



COMMUNITYHEALTH

Needs Assessment

2015



BAPTIST HEALTH®

RICHMOND



2015 Community Health Needs Assessment

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Community Health Needs Assessment
Baptist Health Richmond
Richmond, Kentucky

Introduction

This Community Health Needs Assessment was conducted by Baptist Health Richmond as mandated by the Patient Protection and Affordable Care Act signed into law by President Barak Obama on March 23, 2010. Information contained herein was gathered and compiled and the assessment written from January 2015 through May 2015. This assessment is a thorough review and analysis of feedback provided by the citizens of Madison County, Kentucky and data and publications prepared by city, county, state and federal governmental entities, non-profit organizations and news media.

Assessment findings will guide Baptist Health Richmond (BHR) in recognizing and responding to Madison County's health care needs and improving the wellness of the community. The hospital will evaluate whether or not each identified need can be addressed at present. It will set forth a strategic plan focusing on viable needs through implementation of new programs and services or improvement to existing efforts.

Organization Description

Baptist Health Richmond

Baptist Health Richmond is a fully accredited, non-profit 501 (c) (3) hospital located in Richmond, Kentucky. Licensed for 105 beds, Baptist Health Richmond is a rural, acute care facility that serves about 75,000 patients a year. Established in 1892, the hospital has served Madison and surrounding counties with primary and secondary services for more than a century.

Our core programs include inpatient, outpatient, diagnostic and community services. Our doctors provide care in 20 specialty areas, and we have five board-certified hospitalists. We offer cardiac rehabilitation; occupational, physical and respiratory

therapy; and women's health and childbirth services. Staffed with board-certified emergency physicians and nurses, our Emergency Department treats more than 32,000 patients a year and trains for disaster preparedness annually with the federal government's Chemical Stockpile Emergency Preparedness Program (CSEPP). We have the region's only hospital based, 24/7 Sexual Assault Nurse Examiner (SANE) program.

We offer outpatient surgery and infusion services on campus. Our diagnostic services include a clinical laboratory, CT, MRI and radiologic imaging, nuclear medicine, cardiac catheterization, angioplasty and sleep disorders.

The original hospital mission—to care for all members of our community regardless of their race, creed or ability to pay—still guides us today. Seventy-five thousand patient sought care at Baptist Health Richmond last year; many of them were among the area's rural poor. More than one third of our patients are from low-income households or underserved populations, and 97% of them live in Appalachia. In 2013, our charity care was nearly \$7 million, increase of 23 percent over the prior year.

We are active community partners. We work with local government, businesses and civic organizations, education systems, and social service agencies to strengthen the community and provide opportunities for those less fortunate. We Bowl for Kids' Sake, Paint the Town Pink, fill Salvation Army holiday meal bags, host blood drives, support the United Way and offer a Patient Assistance Fund. We offer numerous free health care classes, medical screenings and health fairs, and our staff members serve on boards and local committees, speak at meetings, and give freely of their time as volunteers. Last year, Baptist Health Richmond contributed more than \$14 million in free health education classes, screenings, services and other community benefits expenses. That includes the more than \$175,000 invested in preparing regional students to enter the workplace through education, clinical rotations and preceptor programs.

Less visible services are freely given as well. Volunteers are on hand daily to visit with patients, deliver mail and run errands for them. They form our board of directors, staff our gift shop and organize events to raise money for hospital needs. Through their kindness, teddy bears are provided for young patients to ease the emotional trauma often associated with a child's hospital visit. Coloring books, crayons and small toys are given to young patients and visitors to help pass the time. If families staying with loved ones cannot

afford to buy food, meals are provided. Volunteers craft hand-made gowns for burial of perinatal losses. Financial assistance for critical medications is also provided through the case management department.

Community Served

Baptist Health Richmond is located in Richmond, Kentucky. Richmond is the county seat of Madison, one of Kentucky's larger counties, and is located in the Appalachian region of the state. Interstate 75 bisects the county from North to South and runs through both Richmond, the county seat, and Berea, the county's other principal city. Richmond lies about 40 minutes south of Lexington (26 miles) and a90 minutes southeast of Louisville (103 miles). It is 106 miles south of Cincinnati, Ohio and 147 miles northwest of Knoxville, Tennessee.

Originally part of Virginia, Madison became one of Kentucky's original counties in 1792. Today, it is a blend of urban, suburban, and rural environments measuring 443 square miles, 441 of which is land and two is covered in water. Two major cities and several smaller communities make up the county. The centrally located city of Richmond was established in 1798, and Berea was incorporated in 1854 near the southern boundary of the county. Both cities lie along Interstate 75. In addition to the two cities, there are also several distinctive communities, among them Boonesboro, Waco, Baldwin, Union City, Kirksville, Kingston, Bybee, and a portion of Paint Lick, which also lies in neighboring Garrard County. Bybee is widely known for its distinctive pottery and the Berea area is recognized nationwide for its crafts and artisans.

Madison County is one of Kentucky's fastest growing areas. According to the US Census Bureau, the population of Madison County in 2014 was 87,340, a 5.3% increase over its 2010 population count. Richmond is the seventh largest city in Kentucky with a 2013 population of 32,550, and Berea's population has increased by six percent since 2010. The population is predominantly white, followed by African-Americans, Hispanic and Latinos, and people who reported being two or more races. There are only a few reported American Indians and Asians.

The county lies within the eight-county Lexington/Fayette County Labor Market area. Four Madison County businesses are among that labor market area's major

employers: Eastern Kentucky University (employs approximately 5,000), Hitachi (USA) Inc. (900), Baptist Health Richmond (700), and NACCO Materials Handling Group (575). Other major employers include Madison County Schools, The Blue Grass Army Depot, EnerSys, The Okonite Company, and KI (USA) Corporation. As of February 2015, Madison County's labor force was 44,662 and unemployment stood at 4.5%

Madison County is home to Eastern Kentucky University, Berea College, National College and Madison County Schools. Eastern Kentucky University offers more than 160 degree programs at the associate, baccalaureate, master's and doctoral levels. Its five academic colleges include Arts and Sciences, Business and Technology, Health Sciences, Education and Justice and Safety. Student enrollment in the fall of 2014 was 16,454, a 1.8% increase over the year before.

Berea College is a liberal arts college offering bachelor degrees in 32 majors as well as independent student-designed majors and a dual degree engineering program in cooperation with Washington University, St. Louis and the University of Kentucky. Enrollment for the 2014 semester was 1,613 undergraduates, representing 46 states and Washington DC, US territories and 60 foreign countries. Seventy percent (70%) of the student body is from Kentucky or Appalachia. Berea College is unique in that students pay no tuition; each is essentially given a four year full scholarship. Students are required to work at least 10 hours per week in campus and service jobs.

National College is a small career college that offers Associate's degree and short-term diploma programs in Business Administration Accounting and Management, Medical Assisting, Office Technology and Computerized Office Applications. Enrollment averages around 400 annually.

The Madison County School District includes 10 elementary schools, five middle schools, two high schools; a semi-private Model Lab School for students grade K through 12; as well as an additional K-12 school district, Berea Independent. The school district also offers an area technical center, an alternative school and the Middle College, where high school students can take college courses on the EKU campus. Enrollment stood at 11,191 during the 2013-2014 school year. The graduation rate was 90%, and 56.4% of the graduates went on to college. On the whole, Madison County school students compared favorably with Kentucky grade point and ACT score averages.

Determination of Service Area

Madison County was chosen as our service area because 70% to 80% of our patients live in the county. Last year, 74% of our patients lived in Madison County, and if we assume that patients with out of state addresses are Eastern Kentucky University students, the proportion of patients from Madison County is actually closer to 80%.

Mission, Vision and Values

Our Mission: To exemplify our Christian heritage of providing quality healthcare services by enhancing the health of the people and communities we serve.

Our Vision: To be nationally recognized as the healthcare leader in Kentucky.

Our Values: Baptist Health Richmond will live out our Christ-centered mission and achieve its vision guided by Integrity, Respect, Stewardship, Excellence and Collaboration.

Executive Summary

Madison County, Kentucky is one of the commonwealth's healthier places to live, and aims for continual improvement. The 2015 County Health Rankings, a study released by the Robert Woods Johnson Foundation and the University of Wisconsin's Population Health Institute, placed Madison County as the 16th healthiest out of Kentucky's 120 Counties, up 4 places from its standing in 2012.

In an effort to identify ways that the county can continue improving the health of its citizens and in response to the Affordable Care Act, Baptist Health Richmond has established a Community Health Needs Assessment process. It has been a priority for both the hospital and community since the fall of 2011. All of Madison County has shown a spirit of cooperation and an eagerness to participate. Community stakeholders – leaders of government, education, health care, business and industry, the ministry and civic, social and community services – enthusiastically gave of their time and expertise. Focus groups were energetic and candid, and sessions continued long beyond their scheduled times. Response to the community survey provided insight into public opinions and needs.

The Madison County Health Department surveyed and studied Madison County's health needs, and throughout the process received four key messages that span every source of primary and secondary data. These key messages are:

- There is a need for an integrated health care delivery system involving hospitals, health departments, clinics, and other collaborative partners.
- The delivery of health care is changing with more care being provided by physician extenders such as physicians' assistants, nurse practitioners. Patients need assistance navigating the system.
- There is a need for emphasis on prevention and healthy lifestyles to mitigate disease early or before it starts.
- Mental health and substance abuse services in Madison County are inadequate.

The community has identified the following as the top three health care priorities for Madison County:

1. Healthy Lifestyle related to Obesity
2. Mental Health
3. Substance Abuse

This assessment will be shared with civic, business and community leaders and organizations, key stakeholders and the community at large. It will also be published on the Baptist Health Richmond web site (www.baptisthealthkentucky.com/richmond).

Framework – Strategic Planning Model

Key Stakeholders

Baptist Health System

The Baptist Healthcare System, Inc. (BHS) and Baptist Health care Affiliates Inc. (BHA), a wholly controlled affiliate of BHS, own and operate all seven of the Baptist affiliated hospitals located in the Commonwealth of Kentucky. BHS and BHA own more than 2,400 licensed acute care hospital beds in Louisville, LaGrange, Lexington, Madisonville, Paducah, Richmond and Corbin and manage the 300 bed Hardin Memorial Hospital in Elizabethtown Kentucky.

Baptist Healthcare System began as a single hospital in 1924 with the opening of Kentucky Baptist Hospital in Louisville. In the 1950's, the system opened Western Baptist Hospital in Paducah and Central Baptist Hospital in Lexington. Today, Baptist Healthcare

System is the largest not-for-profit health care system in Kentucky and is comprised of seven acute-care hospitals, a managed acute-care hospital, a not-for-profit provider sponsored health plan, two surgery centers, occupational medicine clinics, diagnostic centers, urgent care centers and physician offices.

The mission of Baptist Health is to exemplify our Christian heritage of providing quality healthcare services by enhancing the health of the people and communities we serve. The Vision of Baptist Health is to be nationally recognized as the healthcare leader in Kentucky. Baptist Health will live out our Christ-centered mission and achieve its vision guided by Integrity, Respect, Stewardship, Excellence and Collaboration.

Baptist Health Richmond

The Pattie A. Clay Regional Medical Center board of directors entered into an agreement with Baptist Healthcare System in late 2010. The partnership was designed to strengthen alignment of the two health care providers and provide a more comprehensive, high-quality health care system for Madison County and neighboring communities. After more than 120 years of service to Madison and surrounding counties, Pattie A. Clay Regional Medical Center became a wholly-owned member of the Baptist Health System in September of 2012. As the hospital celebrates their bright future and enjoys the many benefits of having joined the Baptist Health System in September of 2012, the continuous commitment has brought expanded services, advanced technology, additional physicians and access to the entire Baptist Health family of hospitals and specialists.

The changes since formally joining Baptist Health in 2012 go far beyond a brand new name. The patient experience continuum is being transformed from the time you enter the health system through the discharge and beyond. The goal is to give every patient the very best that health care can offer, every time at every Baptist location. In addition to adding services, advancing technology and revitalizing the hospital campus, Baptist Health Richmond has used the Community Health Needs Assessment conducted in 2012 to guide decision-making and prioritize new services in the community.

Profile of Madison County

Demographics

Madison County is one of Kentucky’s fastest growing areas. According to the 2010 US Census, the population of Madison County was 83,976; the current population estimate is 86,627 which is a 3.3 percent increase over the 2010 population count. The county is predominantly white, followed by African-Americans, Hispanic and Latinos, and people who reported being two or more races. There are only a few reported American Indians and Asians.

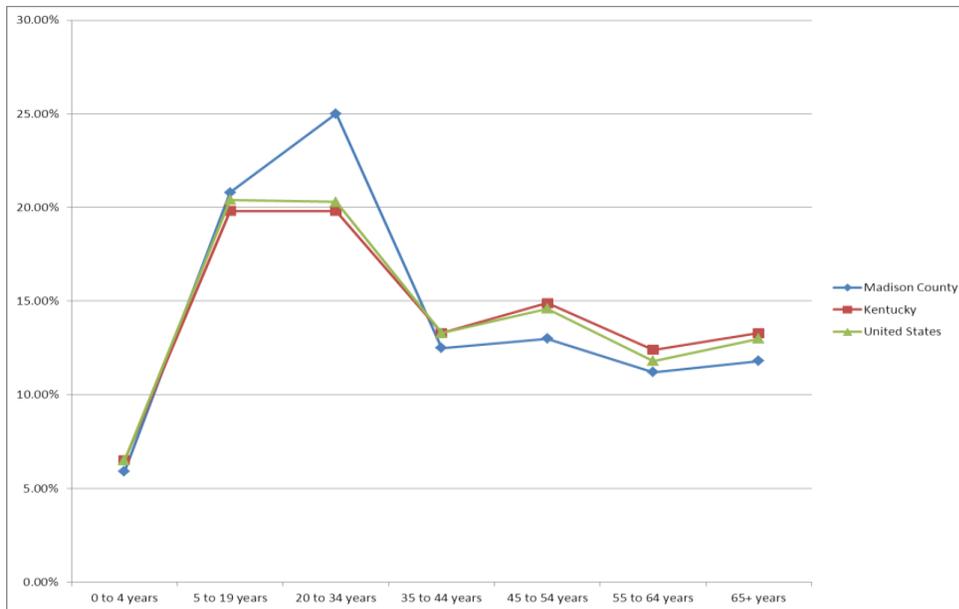
Race/Ethnicity

	Madison Co.		Kentucky		U.S.	
	Number	Percent	Number	Percent	Number	Percent
Total Population	85,590	100%	4,361,333	100%	308,745,538	100%
White	76,995	91.7%	3,835,013	87.9%	230,592,579	74.0%
African-American	3,645	4.3%	341,576	7.8%	39,167,010	12.6%
American Indian/Alaska Native	171	0.2%	8,811	0.2%	2,540,309	0.8%
Asian	840	1.0%	51,411	1.2%	15,231,962	4.9%
Native Hawaiian/Pacific Islander	33	0.0%	2,019	0.0%	526,347	0.2%
Some Other Race Alone	593	0.7%	41,980	1.0%	16,399,187	5.3%
Hispanic/Latino	1,834	2.2%	136,340	3.1%	51,786,591	16.6%
Two or more races	1,699	2.0%	70,535	1.6%	6,099,291	2.0%

U.S. Census Bureau American Fact Finder

Females make up 51.6% of the population, and males account for 48.4%. More than three quarters of the population is adult, with 78.6% being 18 years and over. Madison County’s population is slightly younger than that of Kentucky and the United States, with the largest difference being the number of 20 to 34 year olds. The median age is 33.7, which is younger than both Kentucky (38.2) and the United States (37.3).

Madison County Population by Age



Madison County’s population density is just over 189.6 people per square mile. A little more than half of the residents can be found in Richmond and Berea. According to the 2010 census, most residents (31,364) live in Richmond, the county seat. Another 13,561 live to the south in Berea. Approximately 38,000 live in Madison County’s many unincorporated communities including Waco, Paint Lick, Boonesboro, Bighill, Bybee, Kirksville, Round Hill, Union City and Valley View or in the more rural farming areas.

Residents of Madison County are better educated than Kentucky as a whole, with 83.8% of people age 25 and over having graduated high school and another 27.9% of people 25 and over having earned a Bachelor’s degree or higher. In 2010, there were 35,043 housing units and the homeownership rate from 2006 through 2010 was 62%. The median value of owner-occupied housing is \$141,100. Estimates for 2006 – 2010 showed that Madison County had 30,756 households, with an average of 2.42 occupants each. Per capita income for the same time period averaged \$21,800 and the median household income was \$42,763. As of April, 2015, Madison County’s labor force numbered 42,825. Of that number, 38,874 were employed and 3,889 were unemployed. The unemployment rate was 5.7%.

Poverty thresholds are determined each year by the US government and issued by the Census Bureau. They represent the income level required to support the person or

family based on the number of people in the home. Poverty thresholds for 2013 ranged from \$11,354 for one person to more than \$45,768 for a family of nine people or more (all children must be related and under the age of 18). According to the U. S. Census Bureau’s Small Area Estimates Branch, 21.4% of Madison County residents (16,742) live below the United States poverty thresholds. The number of Madison County’s children under age 18 living in poverty is even higher – 25.3%, or 4,443 children.

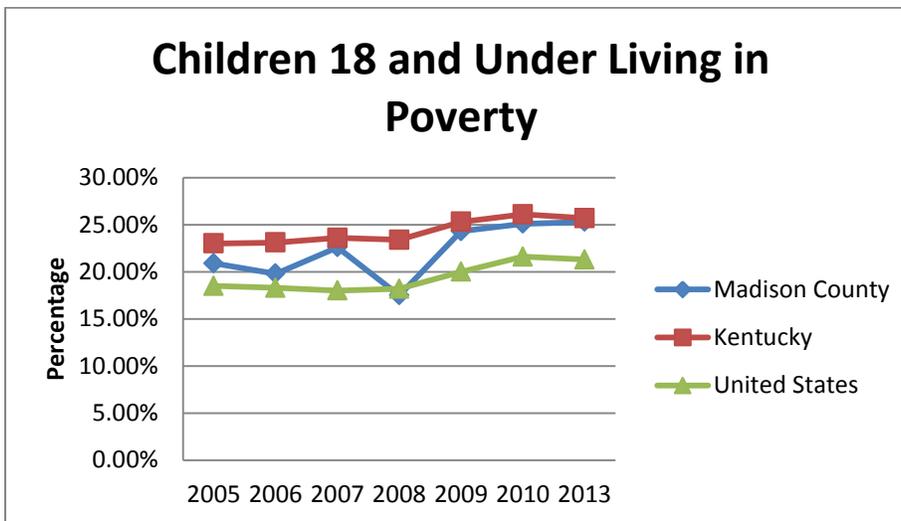
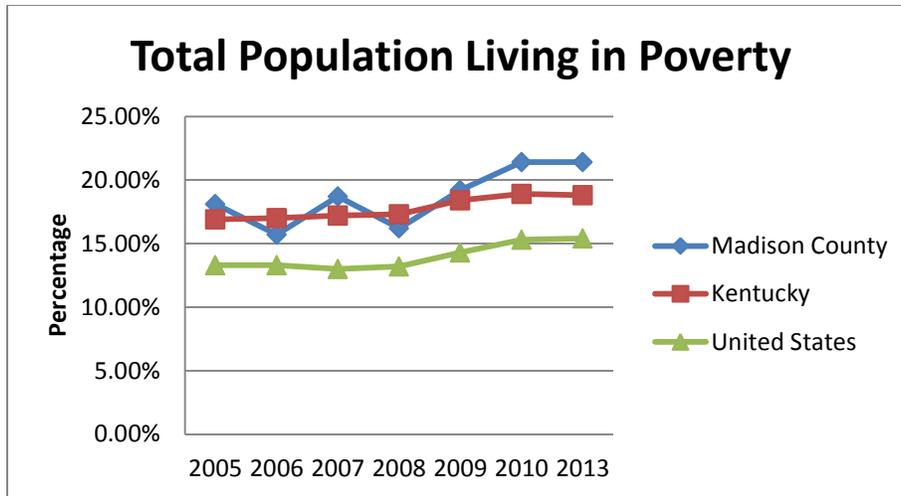
Of Kentucky’s 120 counties, only 51 have more people living in poverty than Madison County. Eighty three (83) Kentucky counties have more children under age 18 who live in poverty. The county fares worse than both Kentucky and the United States in measures of all people living in poverty (18.8% and 15.4% respectively). The percentage of Madison County’s children under age 18 living below the poverty threshold (24.5%) is worse than the nation (21.3%) yet better than the state’s percentage (25.7%).

Persons Living Below the US Poverty Thresholds

	Madison County		Kentucky		United States	
	Total Population	Children Under 18	Total Population	Children Under 18	Total Population	Children Under 18
2013	21.4%	25.3%	18.8%	25.7%	15.4%	21.3%
2010	21.4%	25.1%	18.9%	26.1%	15.3%	21.6%
2009	19.2%	24.3%	18.4%	25.3%	14.3%	20.0%
2008	16.2%	17.5%	17.3%	23.4%	13.2%	18.2%
2007	18.7%	22.6%	17.2%	23.6%	13.0%	18.0%
2006	15.7%	19.8%	17.0%	23.1%	13.3%	18.3%
2005	18.1%	20.9%	16.9%	23.0%	13.3%	18.5%

U.S. Census Bureau Small Area Estimates Branch

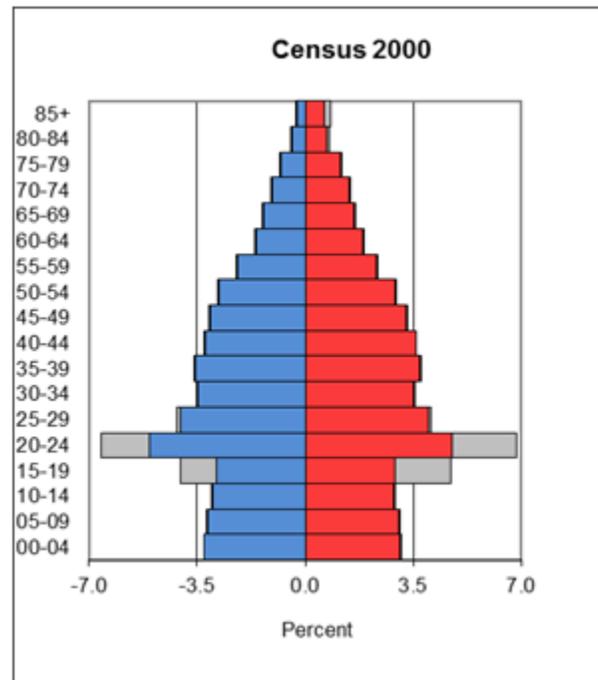
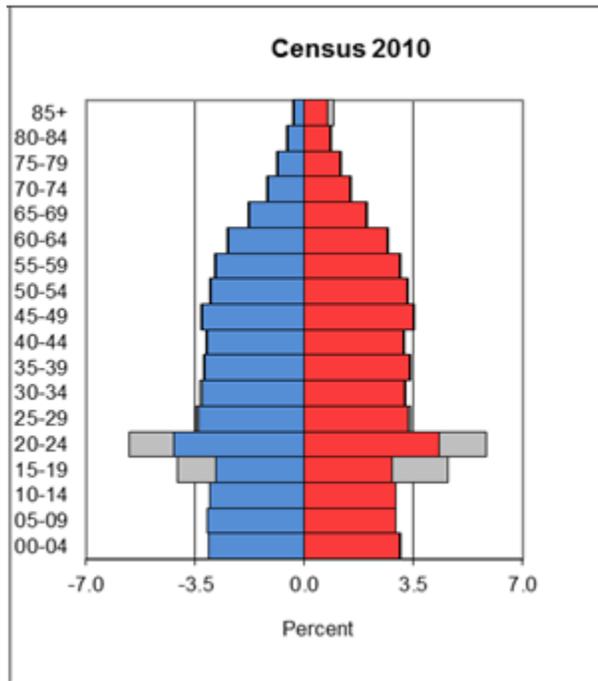
For the last six years, a greater percent of Madison County’s total population lived in poverty than the national average, and in every year but 2008, a far greater percentage of Madison County’s children lived below the poverty threshold. The average monthly number of children enrolled in the Kentucky Children’s Health Insurance Program (KCHIP) nearly doubled in the last decade, rising from 573 in 2000 to 1,002 in 2010. The average monthly number of children receiving Medicaid fared slightly better, with 3,769 enrolled in 2000 compared to 6,486 in 2010.



Vital Statistics

The 2010 population of Madison County according to the U.S. Census Bureau was 82,916, a 17% increase over 70,892 in 2000. The population grew steadily from the 1980's through the 2000's, but the shape of the population pyramid is shifting. People are living longer, so the pyramids are becoming more heavily weighted towards ages 60 and above.

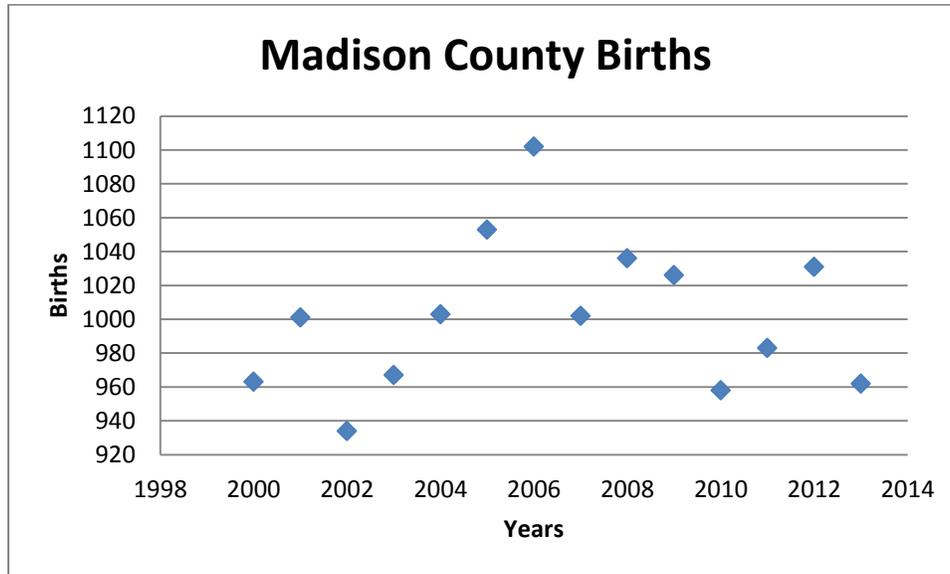
Madison County Population Pyramids by Age



According to Kentucky Data Center website, the number of births and deaths in Madison County hover around Kentucky's average – usually just below the state for births and a little more so for deaths. While the numbers of both births and deaths have

increased along with the general population, the rate of growth has decreased slightly for both statistics. In 2013, Madison County births totaled 962 and deaths totaled 691.

Between 2000 and 2013, births in Madison County ranged between about 934 and 1,102 per year. In 2000; however, the birth rate began to accelerate, and peaked in 2006 with 1,102 births, then it dropped into the high 900s.



<u>Birth statistics</u>	<u>2009-2011</u>	<u>2010-2012</u>
Preterm births	11%	9.0%
Low birth weight (less than 5 lbs. 8 oz.)	9.5%	9.3%
Births to teens 15 – 19 (rate per 1,000)	28.5	27.2
Repeat births to teens 15-19	22%	13%

2011 Kids Count Kentucky Data Book

<u>Vital statistics</u>	<u>2009</u>	<u>2011</u>
Live births	1,024	983
Infant deaths	10	3
Child deaths (ages 1 – 14)	1	
Teen deaths (ages 15 – 19)	0	-

2011 Kids Count Kentucky Data Book

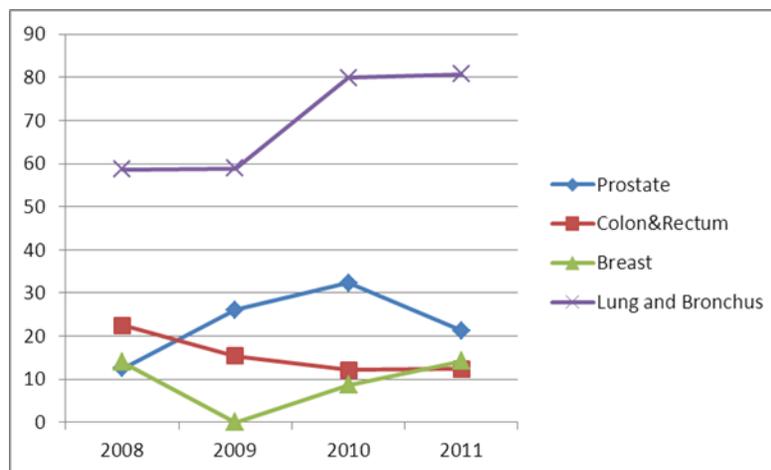
The U.S. Department for Health and Human Services issued a Community Health Status Report for Madison County in 2009. Part of the report listed comparison measures of birth and death for Madison County and the United States. Birth measures were reported in percentages; infant mortality was reported in deaths per 1000 live births and death measures were reported as age-adjusted to the year 2000 standard, per 100,000 population. While Madison County had a higher rate of very tiny newborns and premature births, its infant mortality rate was lower than the national figure in all reported categories.

The County Health Rankings reports on Health Outcomes at the County level by measuring length of life, quality of life and overall ranking. In 2015, Madison County ranked 16 in the State of Kentucky for overall. Madison County's 2012 mortality rate is 7,628. The U.S. Department for Health and Human Services issued a Community Health Status Report

In the Kentucky Cancer Registry's most recent statistics for Madison County, the four types of cancer that are responsible for the most deaths are (all are age-adjusted to the 2000 US standard population to facilitate comparison):

1. Lung and bronchus at 89.5 per 100,000 total population
2. Colorectal at 43.0 per 100,000 total population
3. Breast at 20.3 per 100,000 total population
4. Prostate at 138.3 per 100,000 total population

Age-adjusted Cancer Mortality Rates for Madison County

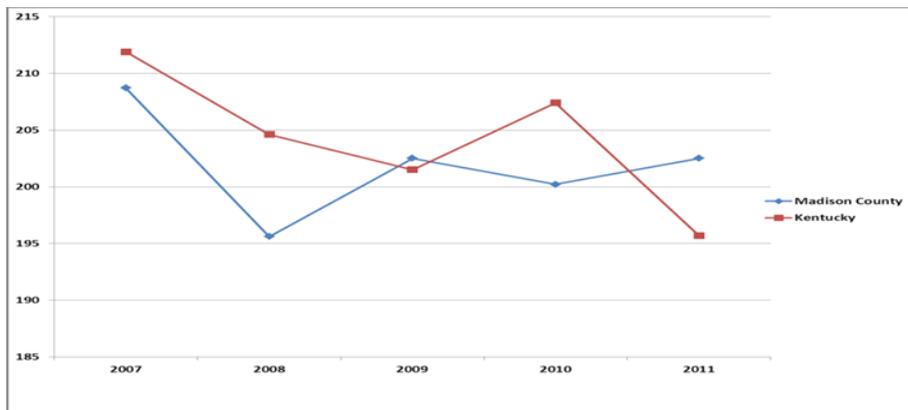


Age-adjusted Cancer Mortality Rates

	All Cancers				
	2007	2008	2009	2010	2011
Madison County	208.7	195.6	202.5	200.2	202.5
Kentucky	211.9	204.6	201.5	207.4	195.7

Kentucky Cancer Registry

Age-adjusted Cancer Mortality Rates – All Types -



The Kentucky Cancer Registry reports on the incidence of invasive cancer rates from 2011 and 2012 for Madison County and Kentucky in the table below. All rates are per 100,000 population; rates are age-adjusted to the 2000 US standard million population.

The incidence of breast cancer increased from 2011-2012 in Madison County.

Incidence of Invasive Cancer Rates from 2012 - 2015				
	Madison County		Kentucky	
	2011	2012	2011	2012
Colon and Rectum	51.3	49.0	49.2	49.2
Lung and Bronchus	102.4	94.1	94.6	92.4
Breast	70.1	79.5	64.4	66.3
Prostate	147.3	121.9	122.5	113.7
All Invasive Cancers	559.6	498.3	513.3	515.1

The following birth and death data was furnished by the Centers for Disease Control and Prevention, National Center for Health Statistics.

Death Data for Kentucky and Madison County, 2011-2013

		2011		2012		2013	
		Kentucky	Madison	Kentucky	Madison	Kentucky	Madison
Death	Diseases of Heart	9,905	140	10,024	154	9,971	162
	Cerebrovascular Diseases	2,064	39	2,073	23	1,1990	24
	Chronic lower respiratory diseases	3,020	44	3,100	39	3,187	31
	Malignant Neoplasms	9,235	166	10,012	166	10,085	178
	Unintentional Injuries	2,608	38	2,741	45	2,513	38
	Intentional Injuries (suicide)	675	13	724	12	701	14

Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2013 on CDC WONDER Online Database, released 2015. Data are from the Multiple Cause of Death Files, 1999-2013, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/ucd-icd10.html> on May 21, 2015 11:52:37 AM

The causes of death in Madison County related proportionally to the causes of death in Kentucky as a whole. Deaths related to heart disease and malignant neoplasms (cancer) continue to increase which support a greater need for early detection and healthy lifestyles. Behavioral risk factors such as use of tobacco, unhealthy diet, and lack of exercise can not only lead to premature death, but can significantly lower the quality of life as well.

Primary Data

Introduction

This Community Health Needs Assessment (CHNA) for Madison County Kentucky was conducted by Baptist Health Richmond (BHR) as mandated by the Patient Protection and Affordable Care Act signed into law by President Barack Obama on March 23, 2010. This report was compiled from January 2015 to May 2015.

Planners/Researchers

This report was conducted with the collaboration of the following:

- Gary Barnes – Regional Director of Planning, Baptist Health
- Phil Brandenburg – Planning Analyst, Baptist Health
- Charline Martin – Baptist Health Foundation Richmond
- Jill Williams – Director of Ambulatory Development, Baptist Health Richmond
- Jennifer Tauziac – Director of Case Management, Palliative Care, Baptist Health Richmond
- Samantha O’Neal – Nurse Educator, Baptist Health Richmond
- Carolyn Hacker – Chief Clinical Dietician, Diabetes Program Coordinator, Baptist Health Richmond
- Sharonda Rose – Health and Wellness Nurse Navigator, Baptist Health Richmond

Methodology

To continue the collaboration and assess the needs of Madison County, Baptist Health Richmond participated with the Madison County Health Department in the Community Health Needs Assessment facilitated and analyzed by the University of Kentucky College of Public Health and Eastern Kentucky University Department of Health Promotion and Administration. Representatives of BHR submitted information as well as participated in the community forums to identify and prioritize the needs of the community based on the primary data. This is a community-driven process which engaged the community and is designed to develop partnerships. The main objectives of the process were to:

- Complete a comprehensive assessment to accurately depict the community's health status
- Define key strategic issues, goals and strategies around those goals
- Take action to create positive health outcomes

The CHNA primary data consists of a Community Survey designed to invite the residents of Madison County to respond to a questionnaire in the following ways:

- A link on the Madison County Health Department Website
- E-mail link sent to major employers and other community distribution lists including Chambers of Commerce
- Paper surveys distributed at various meetings and events
- Paper surveys distributed at Health Department Clinics
- Surveys administered the survey at locations throughout the community
- ECU professors distributed the survey to students

[Madison County Health & Safety 2014 Survey](#)

Survey Overview

The survey was administered between October 1, 2014 and December 12, 2014.

The total number of responses was 1,231.

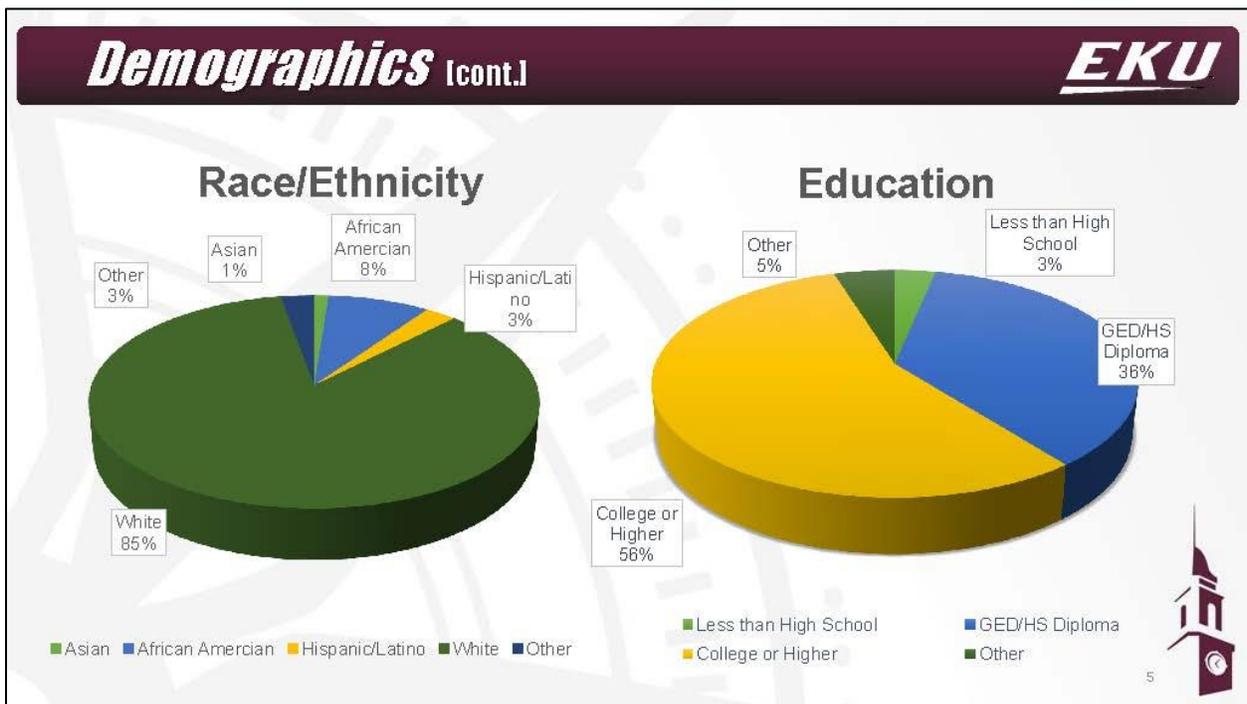
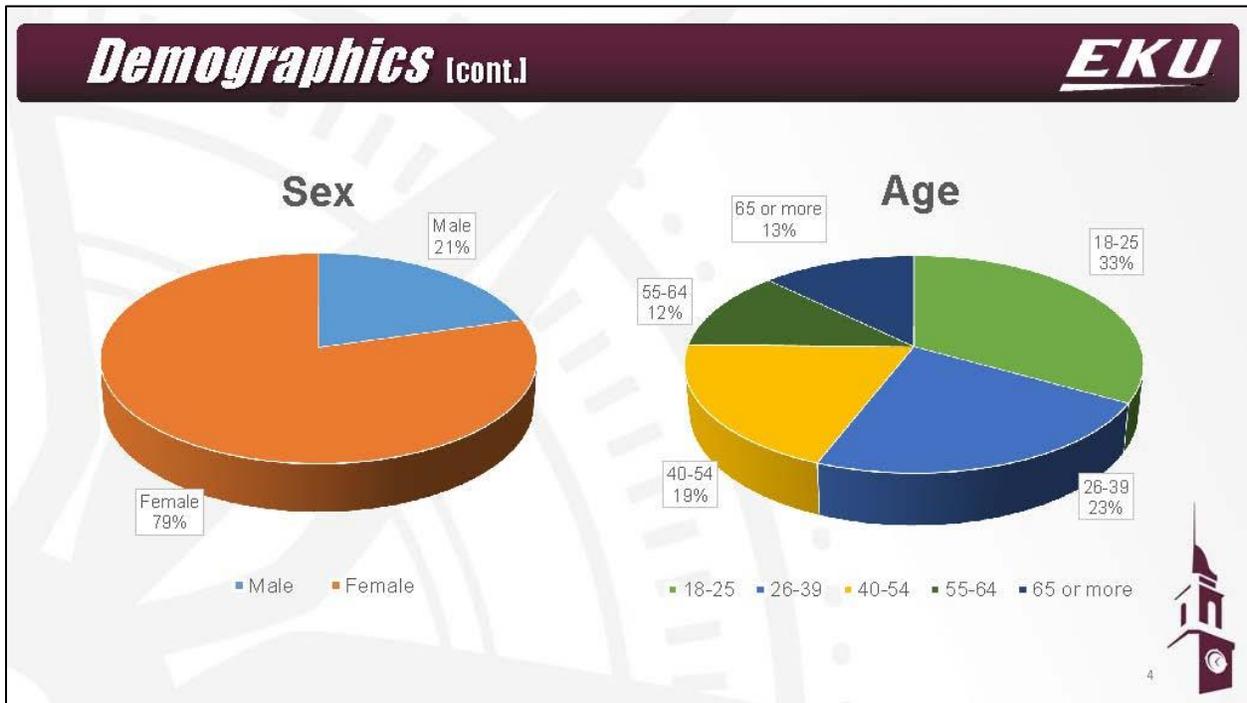
- Number of paper surveys was 609
- Number of online surveys was 622

This assessment provided a look at the strengths and weaknesses of health and safety in the community and provided community stakeholders with a view of the gaps in the health system. More than 75 community stakeholders met in April 2015 to discuss the data from the Community Survey and establish priorities for the community moving forward. Community Stakeholders included representatives from the following community organizations:

- Baptist Health Richmond
- Berea College
- Bluegrass.org
- City of Berea
- City of Richmond
- Community Action Council
- Eastern Kentucky University
- Madison County EMS
- Madison County Health Department
- Madison County Medical Society
- Madison County Schools
- Richmond Police Department
- Madison County Public Libraries
- Whitehouse Clinics
- Kentucky River Foothills
- Kentucky State Police
- Berea College
- Madison County Extension Services

As part of the community stakeholders meeting, the representatives compiled a list of items that are or will be influencing the health status of the community. In addition, they defined three overarching strategic issues and developed teams to identify action strategies that would address those issues.

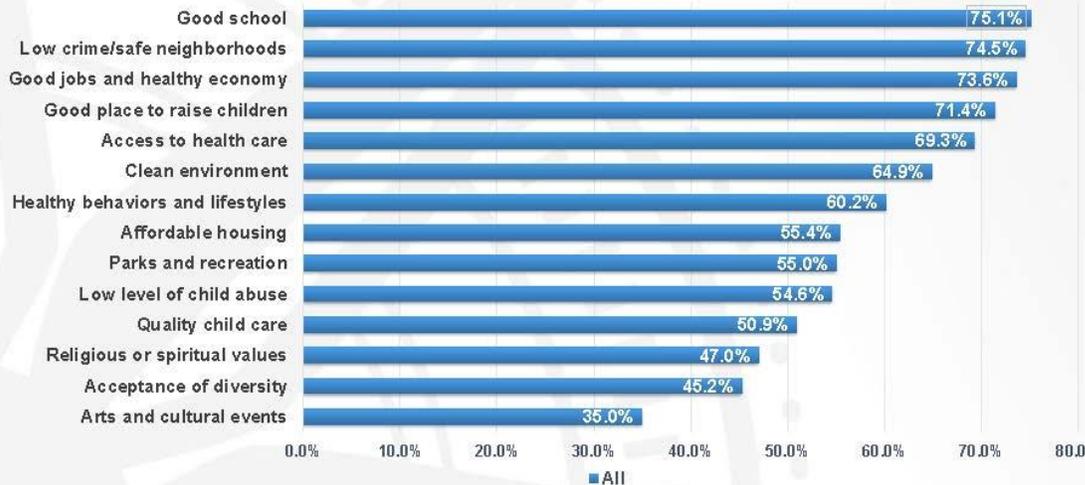
Our Survey Results



Survey Results (Question 1)



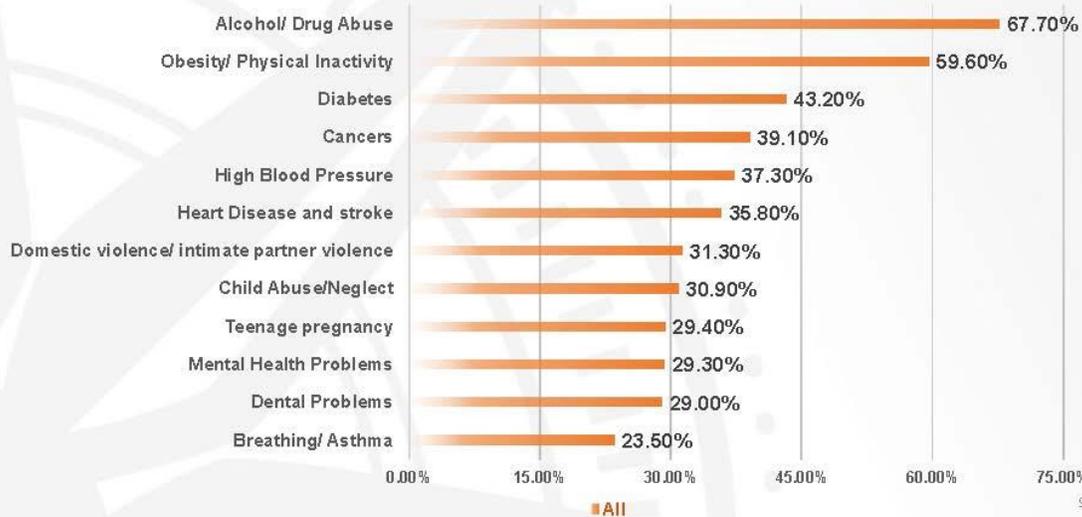
Q1. The Most Important Things for A Healthy Madison County



Survey Results (Question 2-1)



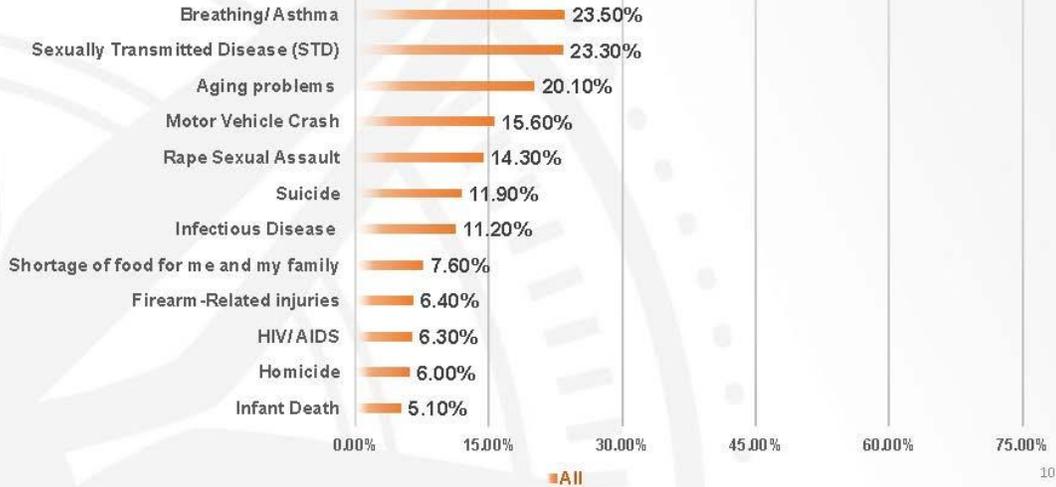
Q2. THE GREATEST HEALTH PROBLEMS IN MADISON COUNTY



Survey Results (Question 2-2)

EKU

Q2. THE GREATEST HEALTH PROBLEMS IN MADISON COUNTY

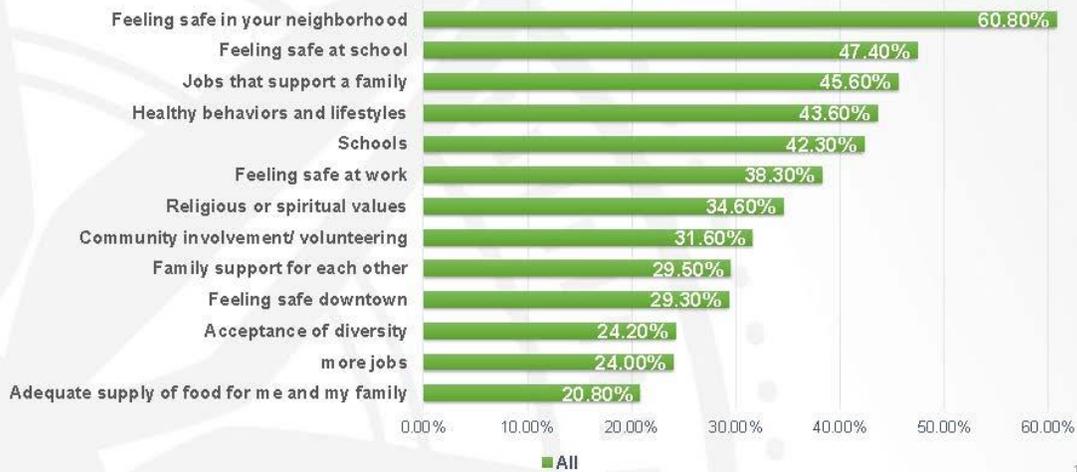


10

Survey Results (Question 3)

EKU

Q3. The Most Supportive Way for Residents' Health In Madison County

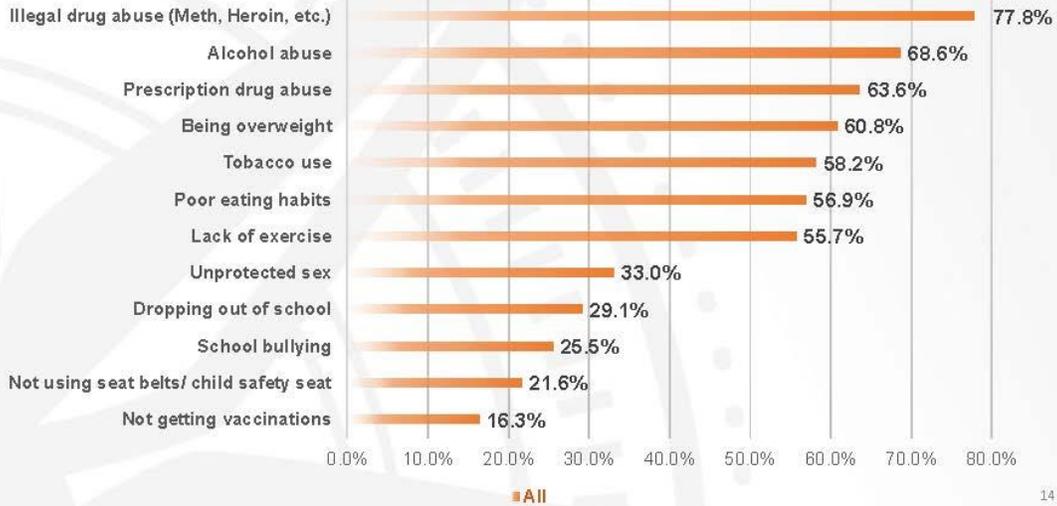


11

Survey Results (Question 6)

EKU

Q6. THE MOST RISKY BEHAVIORS IN MADISON COUNTY

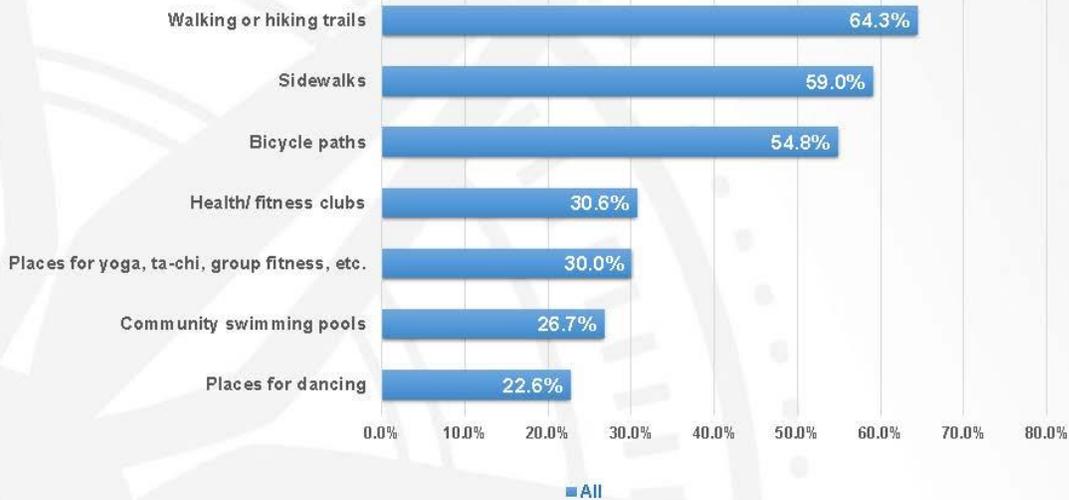


14

Survey Results (Question 8)

EKU

Q8. The Most Needed Physical Activity Opportunity for Madison County

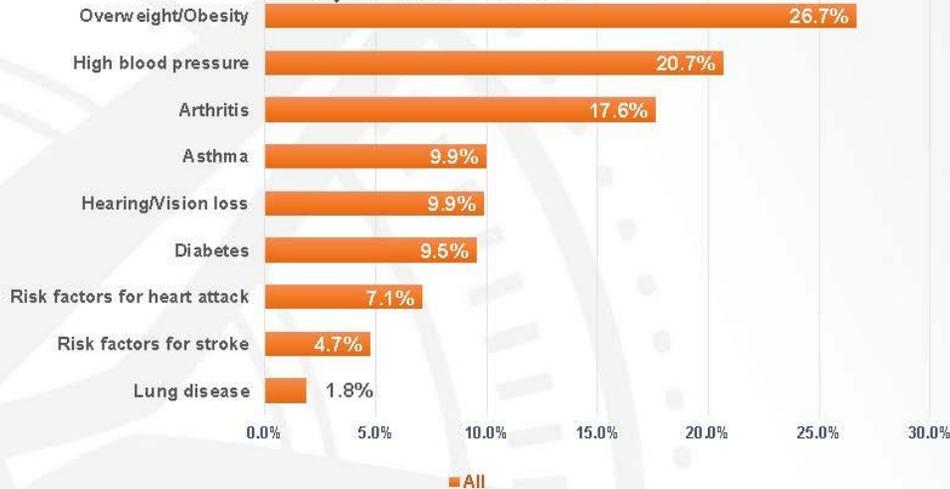


16

Survey Results (Question 11)

EKU

Q11. Health Problems that I Have Been Told I Have by A Health Provider



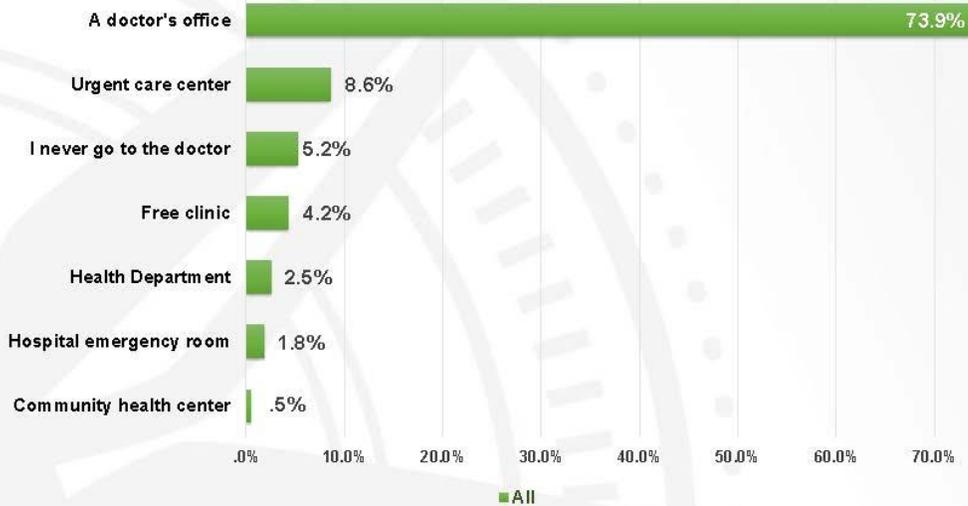
19



Survey Results (Question 12)

EKU

Q12. Place Where I Usually Get Treatment



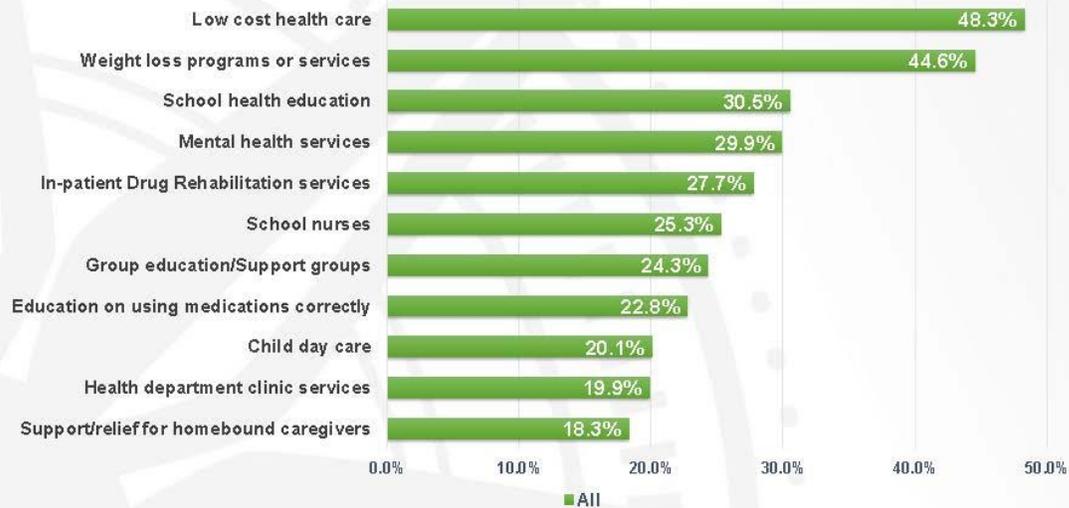
20



Survey Results (Question 18-1)

EKU

Q18. The Most Needed Health Service in Madison County



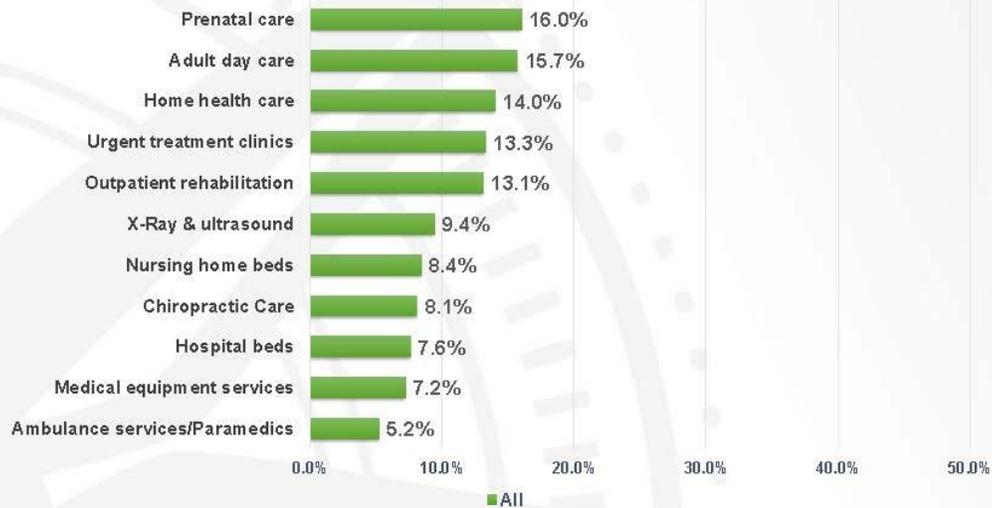
26



Survey Results (Question 18-2)

EKU

Q18. The Most Needed Health Service in Madison County



27



Secondary Data

Even though Madison County is one of the healthiest counties in the State of Kentucky, Kentucky is one of the least healthy states in the Nation. America's Health Rankings 2014, a study released by the United Health Foundation, ranks Kentucky's overall health at 47th in the nation, down four from 2012 when it ranked 43rd. The report listed Kentucky's strengths:

- low prevalence of binge drinking
- low violent crime rate
- high immunization coverage among children

and Kentucky's challenges:

- high prevalence of smoking
- high percentage of children in poverty
- high rate of preventable hospitalizations

In the past two years:

- Smoking among adults decreased from 29.0% to 26.5%. In 1990, 35.3% of Kentucky adults smoked
- Children in poverty increased from 23.3% to 31.5% of children, the highest rate in the nation. In 1990, 23.7% of children in Kentucky were living in poverty
- Immunization coverage among adolescents increased from 51.8% to 60.8% of adolescents aged 13 to 17 years
- Drug deaths increased by 30% from 18.4 to 24.0 deaths per 100,000 population

Kentucky's health rankings remain poor due to lifestyle choices. Among the 50 states, with 1 being the best score and 50 the worst, Kentucky ranks as follows:

	<u>2015</u>
Obesity	46
Smoking	49
Physical Inactivity	42
Diabetes	33
Poor Mental Health Days	50
Poor Physical Health Days	47
Drug Deaths	48

Kentucky's rankings for health conditions are also poor. Again, 50 is the worst score possible. Kentucky's rank is:

Heart Attack	48
High Cholesterol	49
High Blood Pressure	46
Stroke	47
Cancer Deaths	50

Well-Being Index and County Health Rankings Studies

Gallup, the firm responsible for the Gallup Polls, recently released the Gallup-Healthways Well-Being Index for 2014. Gallup polls people's opinion of their physical health (chronic conditions, obesity), lifestyle behaviors (smoking, diet and exercise), emotional health (feelings of happiness or sadness), work environment, basic access to health care and food, and their lives in general. For the sixth consecutive year, only West Virginia scored lower than Kentucky. According to the 2013 State of American Well-Being report, Kentucky scored 62.7 out of a possible 100 points, earning it the 49th spot in the nation. This is down 0.6 points from the 2011 report.

Five factors were evaluated and Kentucky scored near the bottom on all five.

	Rank out of 50 states
<u>Purpose</u> : Liking what you do each day and being motivated to achieve your goals	48
<u>Social</u> : Having supportive relationships and love In your life	49
<u>Financial</u> : Managing your economic life to reduce stress and increase security	46
<u>Community</u> : Liking where you live, feeling safe And having pride in your community	26
<u>Physical</u> : Having good health and enough energy to get things done daily	49

Kentucky led the nation in the percentage of smokers. More than a quarter (33.2%) of Kentucky adults is obese, earning the state the rank of 46 out of 50. More than a third (39.1%) of our population has high blood pressure, again, ranking Kentucky at 46th out of 50 states. The percent of adults with diabetes is 10.6%, resulting in a national rank of 33.

There is a strong correlation between obesity and poor health outcomes. States with high obesity rates, of which Kentucky is one, have more chronic disease, headaches and pain. Blood pressures are higher, and diabetes is more prevalent. Productivity is compromised because workers take more sick days. All of these variables contribute to the fact that Kentuckians' sense of well-being is nearly the lowest in the nation – 49 out of 50.

But Madison County *is* improving its standing in health indices for Kentucky counties. A 2015 study called County Health Rankings was recently released by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation. The study evaluated data from many sources to rate each county's health by comparing Health Outcomes (morbidity, or the quality of life and mortality, the length of life), Health Factors (health behaviors, social and economic factors, and the physical environment), and local programs and policies. Madison scored in the top 25% on all measures. Out of Kentucky's 120 counties, Madison ranked as follows:

Health Behaviors	7
Health Factors	8
Social and Economic Factors	13
Length of Life	15
Health Outcomes	16
Clinical Care	23
Quality of Life	27
Physical Environment	28

Madison County improved its scores on all factors from measures taken in 2012, and on most factors, it continued to score equal to or higher than Kentucky as a whole. However, on some measures in the areas of Clinical Care and Health Care, the county scored less favorably than Kentucky. Particularly noteworthy is the proportion of health care providers to individuals. Further, Kentucky scores well below the national benchmarks on most indicators.

The measures below were first reported in the 2012 Community Health Needs Assessment. Decision makers and the public seem to be paying attention because the scores for 2015 were equal to or showed improvement over 2012 scores on every factor measured for Madison County, Kentucky and the National benchmarks.

	Madison County		Kentucky		US Benchmark	
	2015	2012	2015	2012	2015	2012
Primary Care Physicians	1542:1	1684:1	1551:1	1560:1	1045:1	1051:1
Mental Health Providers	1259:1	1843:1	621:1	852:1	386:1	No data
Dentists	2445:1	2494:1	1683:1	1731:1	1377:1	No data
Uninsured Adults	17%	21%	16%	21%	11%	11%
Diabetic Screenings	90%	89%	85%	84%	90%	90%
Mammography Screenings	61%	59%	60%	59%	71%	71%
Preventable Hospital Stays*	67	74	94	104	41	49

*Rate per 1,000 people -- County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute and RWJF

Children's Health

Madison County continued to experience growth in the number of children defined as those between the ages of 0 and 17. In 2013, 18,148 children were reported living in Madison County – 984 were African-American, 675 Hispanic, 16,178 Caucasian, and 311 classified as Other. This was a 1.4% increase over 2010. The number of Madison County's African-American children increased by 36%, Hispanic by 5%, and Caucasian by 4%.

The Kentucky Youth Advocates and the Kentucky State Data Center at the University of Louisville released the 2014 Kids Count County Data Book, a report measuring Kentucky's status on overall child well-being and on four major areas critical to that wellbeing – economic security, education, health and strength of family, and community. County by county comparisons were made, and Madison County fared well on all indicators, usually falling within the top quartile and always better than half of Kentucky's counties. Madison was ranked 27th out of Kentucky's 120 counties in terms of overall child well-being.

Adverse childhood experiences are events such as abuse, neglect, and family violence occurring within the first 18 years of life. These include emotional, physical and sexual abuse; emotional and physical neglect; domestic violence between adults in the household; abuse of alcohol or drugs; depression, mental illness or suicidality; incarceration of household member(s); and stress due to parental separation or divorce. Nationwide, 1 in 8 children from birth to age 5 had faced two or more adverse experiences. Kentucky's incidence was 1 in 5, placing it significantly higher than the US as a whole. The most common adverse events experienced by Kentucky children are economic hardship and parental separation or divorce. Kentucky also has the highest rate in the nation of children who have lived with a parent or guardian who served time in jail or prison.

In Kentucky, too many children struggle with poor health. Pregnant women living in Kentucky are more likely to smoke, and the state ranks high in the number of low-birth weight infants, obese children, and children with diabetes and asthma. Kentucky also has the highest proportion of children with special health care needs. The proportion of the county's mothers who smoked during pregnancy (23.8%) between 2010 and 2012 was higher than the state average of 22.6%, and 9.3% of the babies born during that time were

low birth weight. Births to teens between the ages of 15 and 19 numbered 27.1 per 1,000 females.

On measures of family and community, Madison ranked 43rd in the state. Of mothers who gave birth from 2010 through 2012, 12.7% did not have a high school degree. Statewide, the rate was 16%. Nearly one third (32%) of the county’s children lived in a single-parent family compared with 37% statewide. From 2011 through 2013, 47.8 out of every 1,000 children between the ages 0 and 17 had been placed in out of home care because of parental abuse or neglect. This was higher than the rate for Kentucky, which was 35.3 per 1,000 children. Finally, during the same time period, 30.7 out of every 1,000 children between the ages of 10 and 17 were incarcerated in the juvenile justice system. In Kentucky, the number was 45.1 out of 1,000.

Social and Community Issues

Every community has crime and Madison County is no exception. The 2013 Crime in Kentucky report published by the Kentucky State Police states that a crime of some sort is committed in Madison County every hour and 15 minutes. The information below represents arrests for Part I criminal activity, not incidence. Part I crimes, or Index crimes, are violent (aggravated assault, forcible rape, murder and robbery) and property (arson, burglary, larceny-theft, and motor vehicle theft) crimes.

Major Part I Crime Arrests in Madison County

	2005	2006	2007	2008	2009	2010	2011	2012	2013
Murder	1	15	5	1	2	9	7	10	4
Forcible Rape	3	10	7	11	11	7	41	32	19
Robbery	17	33	24	17	25	55	41	21	34
Burglary	50	134	190	104	112	98	120	130	105
Larceny - Theft	258	441	377	430	420	486	1,191	894	1,083
Auto Theft	10	27	17	12	22	36	35	32	21
Arson	8	3	1	3	3	5	3	3	3

Part II Crimes or Group-B Crimes as they are now called include bad checks, curfew/loitering/vagrancy, disorderly conduct, DUI, drunkenness, non-violent family offenses, liquor law violations, peeping tom, runaway, and trespass of real property. Categorization and calculations have changed over the past four years making comparisons difficult, but total Group B arrests have increased steadily.

Group B Arrests

2011	7,896
2012	9,168
2013	10,101

Cocaine is readily available and poses the greatest threat to metropolitan areas. Methamphetamine is growing rapidly as a major threat, especially among youth and in rural areas. In 2010, five (5) meth labs were found in Madison County; in 2012, there were 39. This is a 680% increase over a three year span. Marijuana is prevalent crop in Kentucky. It is the most widely available and frequently used illegal drug. The diversion of prescription medications, along with hallucinogens and club drugs, continues to be a significant problem in the state. In 2013, according the Kentucky State Police Crime in Kentucky Report, there were 1,405 drug/narcotic offences in Madison County. The following statistics were provided by the Kentucky State Police (KSP).

Drug use in Madison County

	2006	2007	2008	2009	2010	2011	2012
Opium or cocaine reported usage	136	170	58	66	32	41	81
Marijuana arrests	532	601	302	421	251	137	325
Drug arrests	1,279	1,639	949	1,271	909	665	1,287
DUI arrests	1,140	1,098	750	708	619	532	590

The County Health Rankings report defines excessive alcohol use as binge drinking (consuming more than 4 drinks for women or 5 for men on a single occasion in the past 30 days), or heavy drinking (more than one drink per day for women and more than two per

day for men). Excessive drinking is a risk factor for many unfavorable health outcomes including hypertension, liver failure, cancer, alcohol poisoning, fetal alcohol syndrome, interpersonal violence and motor vehicle crashes. There is a strong association between alcohol consumption and impaired driving, and binge and heavy drinkers accounted for the most instances of alcohol-impaired driving. The report ranked Madison County's prevalence of excessive alcohol use at 7%, up one percentage point from 2012. In 2010, there were 619 arrests for driving under the influence in Madison County and 815 arrests for drunkenness. In 2012, the numbers improved to 592 DUI arrests and 792 arrests for drunkenness. According to the Kentucky Office of Highway Safety's 2014 Highway Safety Performance Plan, Madison County was one of the ten counties ranked highest in the number of alcohol-related collisions in 2012.

The National Alliance on Mental Illness (NAMI) issues report cards for each state on the condition of their mental health systems. In 2006, Kentucky received an F. Three years later, the grade had not changed. A *USA Today* article published in January, 2013 reports that NAMI's newest update gave the country as a whole, a grade of D. No state earned an A, 8 states earned a B, and Kentucky was one of six states earning an F. NAMI gives the state an F because of the shortage of mental health professionals and the lack of alternative housing that supports independent living. Kentucky falls short on the number of quality programs, ER wait times, quantity of psychiatric beds, financing, consumer and family empowerment programs and collaboration among state mental health agencies and other state agencies and systems. Neither of Madison County's hospitals has psychiatric beds.

In 2008, 30% of Kentucky adults reported that they did not participate in any kind of physical exercise during the month. More women did not participate in exercise than men, and adults with lower levels of education were more sedentary. Lack of physical activity increased with age; the highest proportion of people responding that they did not exercise was age 65 and older. Except for an 0.3% decline in the number of Kentucky adults reporting no physical activity at all (29.7 in the 2012 Annual Report as opposed to 30% in 2008), there was virtually no change in the level of physical activity over the four year period. The results were also identical in the 2012 and 2014 County Health Rankings surveys, where 30% of Madison County adults reported that they participated in no leisure

time physical activity. Again, Madison County scored better than Kentucky (31%) but lower than the national benchmark of 21%. The 2014 report indicated that most Madison County residents (63%) did have access to recreational facilities.

It is logical that an unhealthy diet, coupled with lack of exercise, contributes to obesity. Obesity, in turn increases a person’s risk of type-two diabetes, heart and coronary artery disease, hypertension, stroke, cancer, osteoarthritis, respiratory problems and a long list of other conditions.

The numbers of people eating the recommended fruit and vegetable intake is low – only 12.1%. In this instance, Madison County lags behind Kentucky as a whole (21.1%). Groceries and markets are available to everyone in the county; in no area of Madison County is it difficult for a person with low income to find a source of healthy food. On the other hand, fast food establishments are also readily available, accounting for more than half of all restaurants in the county.

In an effort to provide young people with the opportunity for at least one nutritious meal a day, most of Madison County and Berea Independent school children are eligible for the free and reduced lunch program. In 2012, the school districts expanded their free meals to students from low income families. All students in high poverty areas will be eligible for free meals through the 2015-16 school year under the program made possible by the National School Lunch and National School Breakfast programs.

Students Eligible for Free and Reduced Price Lunch

	2011-2012 School Year	2012-2013 School Year
Madison County Schools	56%	53%
Berea Independent Schools	59%	58%

Health Care Utilization

In 2013, Madison County residents were admitted to area hospitals 8,720 times. The most frequent Major Diagnostic Categories for discharge were:

1. Respiratory System
2. Pregnancy, Childbirth and the Puerperium

3. Newborns and Neonates
4. Circulatory System
5. Digestive System
6. Musculoskeletal System and Connective Tissue
7. Nervous System
8. Mental Diseases and Disorders
9. Infectious and Parasitic Diseases
10. Kidney and Urinary Tract

Because not all services are offered at all hospitals, patients who live in Madison County received care at 55 hospitals throughout Kentucky in 2013. More than 79% of these hospitalizations occurred at five area hospitals: Baptist Health Richmond (2,469), University of Kentucky Hospital (1,305), Baptist Health Lexington (1,048), St. Joseph East (983) and St. Joseph Berea (631). Hospitalizations of Madison County residents resulted in 40,023 patient days; the average length of stay was 7.03 days.

Mental Health Counseling and Substance Abuse and Alcohol Counseling were two of the top five needs identified through the 2012 Community Health Needs Assessment. Of the 8,188 Madison County residents who were inpatients at any hospital in 2013, 378 were hospitalized for mental diseases and disorders and 148 for substance use issues.

Baptist Health Richmond is an acute care hospital. According to the 2013 Kentucky Annual Hospital Utilization and Services Report, it admitted 3,237 patients in 2013. These patients were hospitalized for a total of 12,599 days. During that time period, there were also 29,907 visits to Baptist Health Richmond's Emergency Department (ED), and 53,808 patients receiving other outpatient services. Summing these numbers, a total of, 83,715 outpatients were seen, and counting both inpatients and outpatients, Baptist Health Richmond's 2013 patient encounters totaled 86,952. During the same time period, St. Joseph Berea, a critical access facility, admitted 973 patients, saw 20,720 patients in the ED and provided outpatient services to an additional 31,890 individuals for a total of 53,583 patient encounters.

Administrative claims data is not available for 2013, so the chart below reflects 2012's inpatient hospital days payor mix.

	Baptist Health Richmond				St. Joseph Berea				Madison County Total			
	Medicaid	Medicare	Commercial	Other	Medicaid	Medicare	Commercial	Other	Medicaid	Medicare	Commercial	Other
Inpatient Hospitalization Days	3,277	6,646	2,413	509	543	3,011	654	330	3,820	9,657	3,067	839
	28.0%	50.0%	18.2%	3.8%	12.0%	66.4%	14.4%	7.3%	21.9%	55.5%	17.6%	4.8%
Emergency Department Visits	7,524	4,631	7,413	7,347	6,213	3,521	4,497	6,048	13,737	8,152	11,910	13,395
	28.0%	0.2%	0.4%	0.4%	30.6%	17.4%	22.2%	29.8%	29.1%	17.3%	25.2%	28.3%
Hospital Payor Mix Total	10,801	11,277	9,826	7,856	6,756	6,532	5,151	6,378	17,557	17,809	14,977	14,234
	27.2%	28.4%	24.7%	19.7%	27.2%	26.3%	20.7%	25.7%	27.2%	27.6%	23.2%	22.0%

Together, the two hospitals offer the following for Madison County:

	Baptist Health		
	Richmond	St. Joseph Berea	Madison Co.
	Acute Care Capacity	Critical Access Capacity	Total Beds
Medical/Surgical Adult and Pediatric Beds	44	21	65
Obstetric Beds	21		21
ICU/CCU/Burn Beds	8	4	12
Bassinets	21		21
Operating Rooms	5	4	9
Cystoscopy Rooms	1	1	2
Lithotripter Units	1		1

Medical services are readily available in Madison County. The community has two hospitals, student health services at both Eastern Kentucky University and Berea College, four skilled nursing care facilities, five urgent treatment facilities, three dialysis clinics, three standalone MRI facilities, an occupational medicine center, and many pharmacies.

While services are available, they are not accessible to all Madison County residents. The cost of health care is prohibitive to many, despite the availability of insurance and the expansion of Medicaid. Research shows a strong correlation between higher income and better health. According to healthinsurance.org, nearly 83,000 Kentucky residents signed up for qualified health plans (QHPs) during the 2014 open enrollment period. That's 27.4 percent of the estimated eligible market of 302,000 people. For comparison, Vermont led the nation with a sign-up rate of 85.2 percent of its eligible residents, and the national

average of 28 percent. In addition to implementing a state-run health insurance exchange, Kentucky expanded Medicaid under the Affordable Care Act. Under the expansion, Kentucky residents with household income up to 138 percent of the federal poverty level (\$16,105 a year for one person or \$32,913 for a family of four) are eligible for Medicaid.

According to the Kentucky Health Facts, the lack of health care coverage for adults decreased with increasing age, increasing educational level and increasing income level. The highest percentages of residents with no health care coverage in 2013 were adults aged 18 – 24 (27.0% -- down from 29.8% in 2012), adults with less than a high school education (26.4%, up from 25.6% in 2012) and adults earning less than \$15,000 a year (33.4%, up from 30.8% three years ago). More men did not have health insurance than women (19% vs 15.3%), and more African-American adults did not have health insurance than white adults (24.8% vs 15.8%). According to the Trust for America's Health Report, in 2015 14.3 percent of Kentuckians (all ages) were uninsured. The full impact of the Affordable Care Act is yet to be determined; however, the number of Kentuckians without health insurance is decreasing.

Although relatively limited, the area does provide health care services for residents who cannot afford to pay for care. Among these are the Madison County Health Department and MEPCO Home Health, which offer adult and child health care services, diabetes care and home health care services; two White House Clinics offer health care, dentistry and pharmaceutical services on a sliding cost basis; and HealthNOW operates a free health care clinic.

Baptist Health Richmond recently received a grant from the US Department of Health and Human Services to establish a health and wellness network in Madison County. The purpose of the network is to unite the county's health care providers in an effort to eliminate duplication and reduce overlap of services, increase health care opportunities where needed, and more effectively serve Madison County's residents. As evidenced below, the health and wellness network planning process will address priorities identified in the Madison County Health Department Community Health Improvement Plan. The network's goals are:

1. to build a network infrastructure that enables the county's health care providers to coordinate and increase access to care,

2. develop a strategic plan to improve the quality of health care in Madison County,
3. address the need for mental and behavioral health services including substance abuse, and
4. address health care disparities and illiteracy

Other Hospital Specific Sources

Secondary data reveals that 21% of Madison County residents live in poverty. An analysis of Baptist Health Richmond payor data verifies that in 2013 36.3% of the patients served by the hospital were Medicaid, DSH, and KHCP, Madison County Health Department referrals or charity (self-pay/uninsured). If we include Medicare patients, the proportion jumps to 75.4%. Only 24.4% of our patients were covered by commercial insurance in 2013.

While Madison County is ranked as one of Kentucky's healthiest counties, on most measures of healthy lifestyles, it still fell below the national benchmark. Controllable risk factors for diseases of the circulatory and respiratory systems are smoking, poor diet, high blood pressure and cholesterol levels, diabetes, obesity, and lack of physical activity – all behaviors and lifestyle choices in which Kentuckians indulge. In 2013, the Kentucky County Health Ranking listed the leading causes of death in Madison County as Cancer, heart disease, stroke, chronic lower respiratory disease and unintentional injuries. Four out of the five are associated with smoking and second-hand smoke. America's Health Ranking website's 2014 state ranking of adult smokers lists Kentucky as the number two state in the country, with just under a quarter of the adult population (22.0%) partaking, followed only by West Virginia.

The Kentucky Hospital Association publishes inpatient origin data for every hospital in the state. Using this data, we compared the admitting diagnoses for every Madison County resident who was admitted to any Kentucky hospital for treatment in 2013 with the admitting diagnoses for every Madison County resident admitted to Baptist Health Richmond.

In 2013 8,188 Madison County residents were hospitalized. Of that number, 5,719 Madison County residents were hospitalized in facilities other than Baptist Health Richmond, and 2,469 were hospitalized at Baptist Health Richmond. More than 25% of all hospitalized patients from Madison County were admitted for diseases of the circulatory or respiratory system, followed by childbirth, newborns and neonates.

2013 Ten Top Admitting Diagnoses for All Madison County Patients

Major Diagnostic Category Code	% for	
	Madison County	# of Discharges
4 Respiratory System	12.4%	1015
14 Pregnancy, Childbirth, And The Puerperium	12.2%	1003
15 Newborns/Neonates	11.3%	923
5 Circulatory System	10.6%	869
6 Digestive System	8.3%	676
8 Musculoskeletal Sys & Connective Tissue	8.0%	657
1 Nervous System	5.9%	485
19 Mental Diseases/Disorders	4.6%	378
18 Infectious And Parasitic Diseases	4.5%	366
11 Kidney And Urinary Tract	4.3%	352

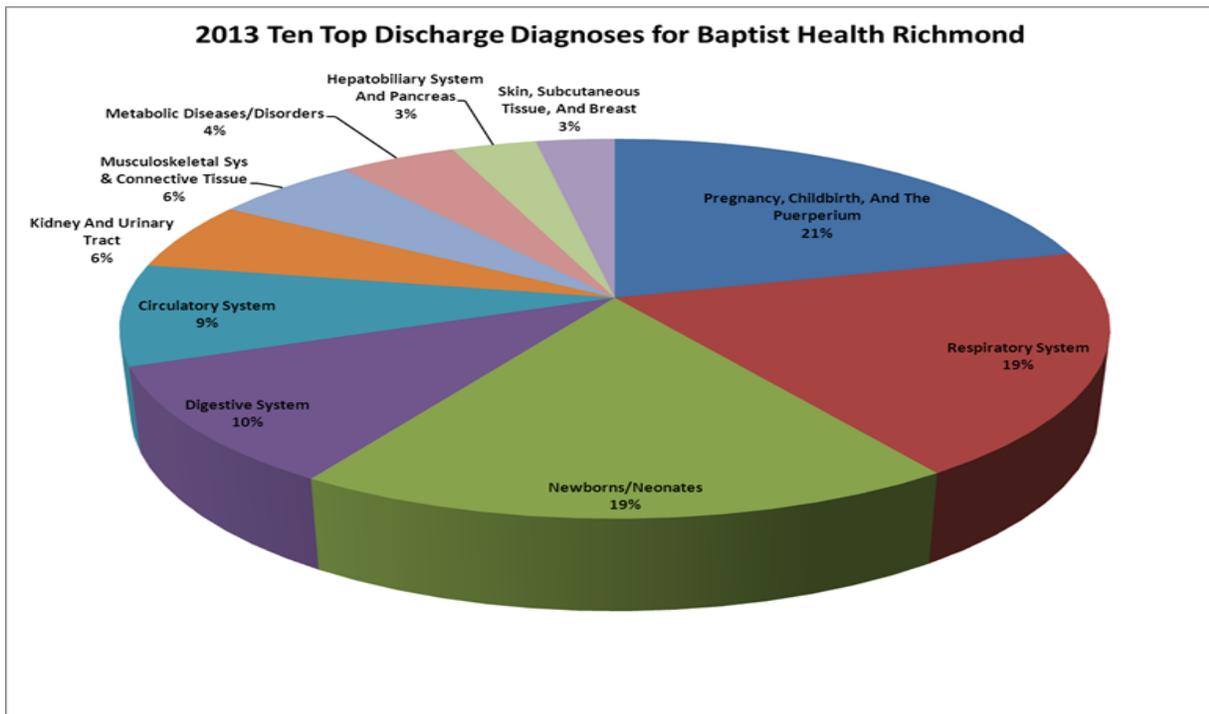
Percentages were calculated using the number of discharges for service/total number of discharges (8188)

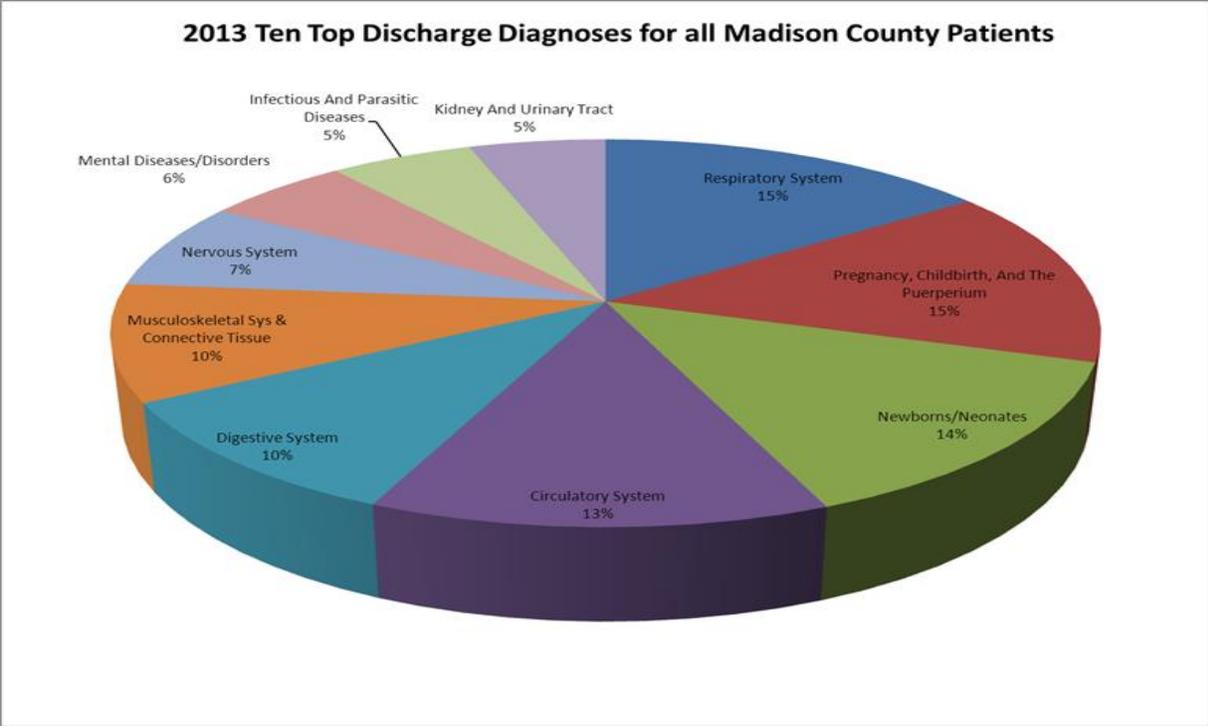
2013 Top Ten Admitting Diagnoses for Baptist Health Richmond

Major Diagnostic Category Code	% for Baptist	
	Health Richmond	# of Discharges
14 Pregnancy, Childbirth, And The Puerperium	18.8%	465
4 Respiratory System	17.3%	427
15 Newborns/Neonates	16.7%	413

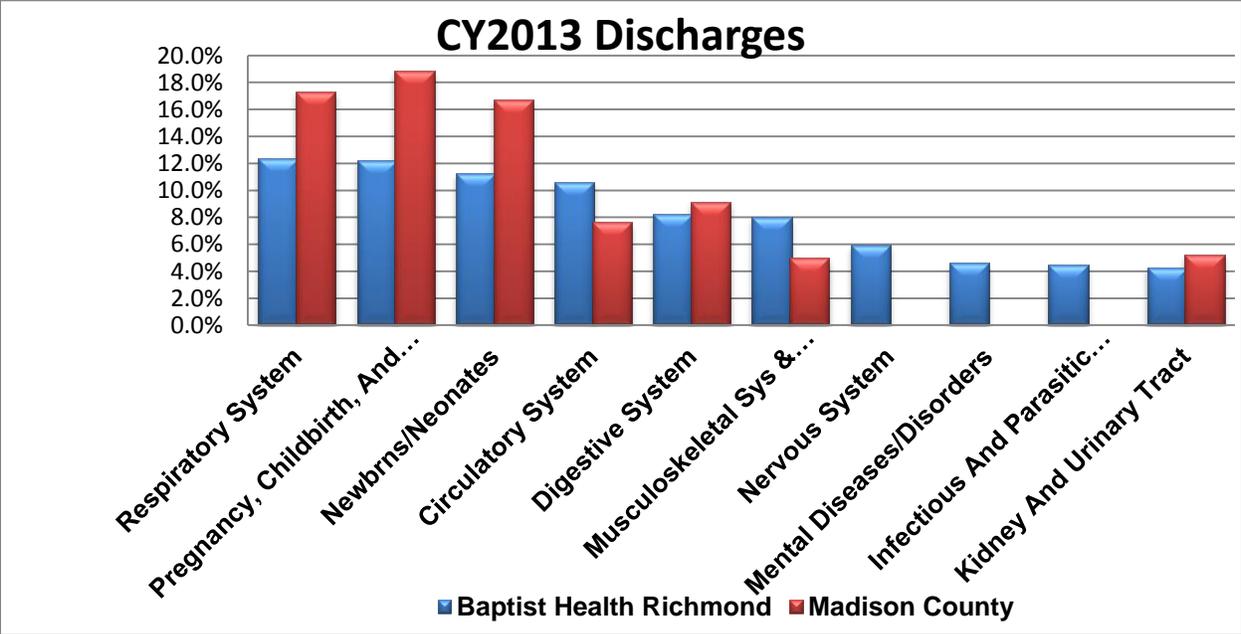
6 Digestive System	9.2%	226
5 Circulatory System	7.7%	189
11 Kidney And Urinary Tract	5.2%	128
8 Musculoskeletal Sys & Connective Tissue	5.0%	123
10 Metabolic Diseases/Disorders	4.0%	98
7 Hepatobiliary System And Pancreas	2.9%	71
9 Skin, Subcutaneous Tissue, And Breast	2.7%	66

Percentages were calculated using the number of discharges for service/total number of discharges for Baptist Health Richmond (2469)





Among the top ten diagnoses for all of Madison County that were not seen at Baptist Health Richmond were diseases of the nervous system and mental diseases and disorders. Diseases of the female reproductive system and the hepatobiliary system and pancreas were among the top ten diagnoses at Baptist Health Richmond but not among the top diagnoses of all Kentucky hospitals treating patients from Madison County.



Community Health Care Resources

Baptist Health Richmond is a non-profit 105 bed acute care facility that delivers all primary care and extensive secondary level health care services for Madison and surrounding counties in the Appalachian foothills. It is staffed by more than 100 physicians providing care in 20 specialty areas and encounters more than 75,000 patients annually. Five board certified hospitalists and two Advanced Registered Nurse Practitioner provide in-house coverage every day of the year.

Baptist Health Richmond's core programs include inpatient, outpatient, diagnostic and community services. We offer cardiac rehabilitation; occupational, physical, speech and respiratory therapy; and women's health and childbirth services. Staffed with board certified emergency physicians and nurses, our Emergency Department treats more than 32,000 patients a year and trains annually with national disaster preparedness teams. Outpatient surgery and oncology are available on site, and we have community-based lab, infusion center, and occupational medicine. Our diagnostic services include a clinical laboratory, CT, MRI and radiologic imaging, nuclear medicine, cardiac catheterization, angioplasty and an accredited sleep disorders center. We also provide outpatient dietician services and classes for health eating and diabetes management. From inpatient hospitalization to outpatient services, Baptist Health Richmond provided care to 36,287 individuals in 2014.

Madison County is also home to St. Joseph Berea, a 25 bed critical access hospital in the southern part of the county. In 2010, it logged 5,018 inpatient days and 18,966 Emergency Department visits. It houses a family medicine practice, specialty clinic and diabetes and nutrition, sleep wellness and senior renewal centers.

Madison County is home to 79 physicians' offices and clinics. Practice areas and specialty offices include:

- 36 Primary care (includes Family practice and Internal medicine)
- 1 Allergist
- 4 General surgery
- 4 Ophthalmologist
- 4 Cardiology
- 3 Orthopedics
- 4 Urology
- 4 Dermatology
- 3 OB/GYN
- 2 Hospice/palliative care
- 1 Geriatric
- 1 Rheumatology
- 1 Oncology
- 1 Pulmonology
- 1 Neurology
- 1 Gastroenterology
- 1 Anesthesiology/pain
- 1 Ear Nose and Throat
- 1 Oral surgery
- 1 Cosmetic surgery
- 1 Pediatric
- 1 Infectious disease
- 1 Bariatric Surgeon

There are 34 dentists and dental clinics, in Madison County. Practice areas include:

- 23 General practice dentistry
- 4 Orthodontics
- 2 Pediatric dentistry
- 4 Family & cosmetic dentistry
- 2 General & family practice, family dentistry
- 2 Periodontics
- 1 Denture & tooth extraction

Health Priority Issues and Strategies

Identified Needs/Overview in Prioritized Order

A community collaborative group including Baptist Health Richmond representatives worked to identify Madison County’s major health needs. This committee represented the health department, public and higher education, policy makers from both cities and the county, police and emergency management, the state human rights commission and an area development council, county extension services, business and industry, area and statewide health nonprofits, and hospital management. Committee members studied the primary data gathered from a community wide survey; along with the secondary data, a collection of published statistics; then came together to discuss the issues and set priorities.

The committee began with the needs most frequently identified in gathering primary data and they recommended others, more global in nature, for inclusion in the discussion. Health needs identified for consideration were:

- Access to care
- Health education awareness
- Specialty physicians
- Mental health counseling
- Primary care physicians
- Substance abuse and alcohol counseling
- Obesity
- Nutritional needs for children
- Uninsured outpatient health care services
- Tobacco use
- Heroin use
- Physical activities
- Affordable health
- Preventive health
- Geriatric services
- Long term outpatient disease management

After discussion of these health care needs, each committee member ranked the needs they perceived as the most important in the community. After analysis of these

prioritized needs, the group again ranked the needs in terms of magnitude in proportion to the service area, prevalence within the service area and high need among vulnerable populations. The Advisory Committee ranked a third time considering the community's current capacity to meet the need, the possibility of another entity already meeting the need, and the need's impact on the community and on other health related issues. The final ranking of community health care needs was:

1. Obesity/health issues caused by lifestyle
2. Mental Health Services
3. Substance Abuse Services

Much of the discussion centered on the fact that many individuals are hospitalized unnecessarily with conditions that could have been prevented through education or cured with early treatment. Chronic but manageable disease should be treated on a continuing basis to avoid hospital admission. Preventive health services – additional primary care physicians as well as community health, wellness and fitness education, screenings and outreach – would benefit patients, increase the efficiency of the health care system and conserve health care dollars. It was agreed upon that by definition, obesity would include disease and health issues caused by poor health choices, obesity, lack of physical activity and chronic diseases associated with such. This category was extremely broad but the Committee determined that so many of the health issues and concerns were associated with obesity and lifestyle choices.

Mental Health and Substance Abuse issues are prevalent throughout the county, and the resources to deal with them are scarce. Both services are relegated to the Richmond office of Bluegrass Comprehensive Care, an office of the Bluegrass Regional Mental Health-Mental Retardation Board, which provides mental health, mental retardation and substance abuse services in a 17 county area of Central Kentucky. Responses to primary data collection indicate that waiting periods for appointments are long and appropriate counselors are often inaccessible. Responses also point out that Madison County's health care system is neither adequately treating nor equipped to handle the volume of substance abuse cases present. Richmond is home to a long term treatment facility for women, but there is no similar treatment program for men.

Priority Health Issues and Processes

Madison County does have resources to address the identified community health priorities, but some are limited and many are not accessible to everyone. Several existing community health resources address more than one priority. As the Baptist Health Richmond Steering Committee reviewed the priorities identified by the Community Advisory Committee, it was determined we could address these health issues in a number of ways. In addition to Obesity/Healthy Lifestyles, the group felt that Preventive Health should be made its own priority to give specific focus on outreach, health education and prevention measures. Similarly, the Steering Committee decided to combine mental health and substance abuse into one priority as many of the same resources and processes will be used to address each.

Priorities 1 and 2 – Obesity/Healthy Lifestyles and Preventive Health

Priorities 1 and 2 are closely related. Preventive Health is critical to successful disease management, and many health issues related to obesity could be avoided through preventative health. The Community Advisory Committee was particularly concerned with obesity, nutritional counseling, physical activity, health education, cancer detection and the aging population in both priorities. In addition to sharing issues, the two priorities tend to share existing health care facilities and resources, and for these reasons, will be considered together.

In addition to more than 108 practicing physicians, there are several diagnostic facilities, urgent treatment and public health centers, group practices, home health agencies, long term care facilities and hospitals that would qualify as resources for outpatient disease management within the inclusion of obesity as identified in the community needs assessment.

Community Health Care Resources

Diagnostic and Treatment Facilities	Medical Practices & Specialty Clinics	Long Term Care/Rehabilitation Centers
Advance Imaging and MRI	Primary Care (36)	Berea Health Care
Central Baptist Medical Plaza	Allergist (1)	Kenwood Rehabilitation Center
DCI Dialysis Center	General Surgery (4)	Madison Health and Rehab Center
Medical Arts Laboratory	Ophthalmology (6)	Telford Terrace
Occupational Medicine Center	Cardiology (4)	The Terrace Nursing & Rehab Center
Open/MRI	Orthopedics (3)	
BHRichmond Outpatient Laboratory	Urology (4)	Hospitals
Richmond Open/MRI	Dermatology (4)	Baptist Health Richmond
VA Berea Clinic	Obstetrics/Gynecology (3)	St. Joseph Hospital Berea
White House Clinic (3 facilities)	Hospice/Palliative Care (2)	
Berea College Health Services	Geriatric (1)	Home Health
Fresenius Medical Care (2)	Rheumatology (1)	Amedisys Home Health Care
EKU Student Health Services	Oncology (1)	Baptist Health Home Care
	Pulmonology (1)	Cardinal Hill Home Care
	Neurology (1)	Caretenders
Urgent Treatment Centers	Anesthesiology/Pain (1)	Gastroenterology (1)
Berea Urgent Care (2)	Gentiva Health Services	MEPCO Home Health Agency
Baptist Urgent Treatment	Ear, Nose and Throat (1)	Amedisys Home Health Care
Little Clinic	Oral Surgery (1)	Cardinal Hill Home Care
Kentucky One Health Urgent Care	Cosmetic Surgery (1)	Nurses Registry and Home Health
	Pediatric (1)	Saint Joseph Home Care
	Infectious Disease (1)	
Public Health	Bariatric Surgery (1)	
Madison Co. Health Dept. Clinic (2)	Podiatry (1)	

Access to preventive health services would not only benefit patients, it would help reduce the inappropriate use of hospital Emergency Departments. With increasing frequency, some people in need of medical care, often those without the means to pay, use the Emergency Department as their primary care physician. They are treated for their condition and released, but many do not continue with follow up care or prescribed medications, leading to recurrence of the problem and return trips to the ED or even hospital re-admissions. The Madison County Health Department offers health education

classes at no cost, and Baptist Health Richmond does as well, both at the hospital and in the community. Other sources of preventive health services and education include:

Berea HealthCare	Madison Health and Rehab Center
Berea Urgent Care (2)	Baptist Health Richmond
Baptist Health Medical Plaza	St. Joseph Berea Breast Center
EKU Student Health (for students)	Telford Terrace
Kenwood Rehabilitation Center	VA Berea Clinic
Madison Co. Health Department (2)	White House Clinic (3)

Oral health and dental hygiene directly impact overall health and wellness. It was the consensus of the Committee that oral health must be included in both the Outpatient Disease Management and Preventive Health priorities. Current initiatives to improve oral health in Madison County consist of improving preventive care, improving access and including oral health as part of overall health.

There are 35 dentists and clinics in Madison County. The types of dentistry and number of offices the different dental services are:

General practice dentistry (23)	General and family practice dentistry (1)
Orthodontics (4)	Periodontics (2)
Pediatric dentistry (2)	Denture and tooth extraction (1)
Family and cosmetic dentistry (2)	

Preventive care is coordinated through Madison County Schools' programs aimed at providing children with education and proper dental care techniques. All students entering school are also required to have received a dental exam and screening. Medicaid Managed Care works to improve access for those who cannot afford dental care by providing reimbursements to dentists and dental hygienists.

Many health problems are caused by or exacerbated by obesity. An alarming number of children are affected and the problem among adults is rampant. The Committee recommended that the services of dietitians be incorporated into both Obesity and Preventive Health priority area services because of the crippling effect the epidemic is having on the health of the general population and the rising cost of medical care.

WE CAN (Ways to Enhance Children’s Activity & Nutrition) is a turnkey, science-based program designed by the National Institutes of Health for parents of 7 to 13 year olds. It provides parents with knowledge, skills and support to help their children stay at a healthy weight, improve food choices, and increase physical activity. Partnering in this project are the Madison County Health Department, Madison County Cooperative Extension, Bluegrass Family Pharmacy and the Telford YMCA. Eastern Kentucky University Student Health Services offers weight management, nutrition and nutritional counseling, and an exercise program for its students. Its Health Education Action Team (HEAT) is a group of peer educators whose mission is to educate fellow students on healthy lifestyle choices. The team concentrates on issues pertinent to college students by organizing events, holding presentations and collaborating with other departments both in and out of class.

The Committee also recommended that services for the geriatric populations be integral to Obesity/Healthy Lifestyle and Preventive Health priority area services. Madison County’s residents ages 55 and older make up 22% of the total population. On average, older individuals require more medical attention than younger populations and often their access to care is impacted by mobility challenges, transportation issues and limited incomes. Services currently available for the senior population include the four skilled care/long term care facilities mentioned previously (Berea Health Care, Kenwood Rehabilitation Center, Madison Health and Rehab Center and Telford Terrace) and the following six retirement communities:

- St. Andrews Retirement Community (2 locations)
- McCready Manor
- Morning Pointe
- Richmond Green Apartments
- Telford Terrace

Priority 3 – Behavioral Health

While mental health and substance abuse issues are prevalent in Madison County, resources to deal with them are few. Eastern Kentucky University Student Health Services tends to the mental health needs of its students. Counseling programs are available throughout the year and a psychiatrist is available one day a week by appointment. Berea College Student Health Services offers pamphlets and materials on stress management, alcohol and substance abuse and healthy relationships. Three psychologists and therapists practice in Madison County. Bluegrass Comprehensive Care and two locations of White House Clinic are available to those who need mental health care but cannot afford private therapy.

Richmond is home to Liberty Place Recovery Center for Women, a 100 bed residential long term substance abuse recovery center under the direction of the Kentucky River Foothills Development Council. There is no detoxification unit available, and women must detox elsewhere before they are accepted at Liberty Place. In addition to residents of Madison County, Liberty Place serves women from all 16 counties in Kentucky's 6th Congressional District. It is a well-attended, highly successful program. Bluegrass Comprehensive Care offers substance abuse counseling. Bluegrass Alcohol Counseling offers individual and group counseling sessions in Richmond, and there are 27 Alcoholics Anonymous meetings in Richmond and another 3 in Berea. Meetings are available every day of the week and are usually held at noon and 8 p.m. Four Narcotics Anonymous meetings are available.

Baptist Health Richmond partners with its sister facility Baptist Health Corbin to address mental health needs in Madison County. This new initiative provides access to 10 psychiatrists, as well as 24/7 coverage for emergency mental health assessment for the hospital by qualified mental health professionals. Outpatient services for counseling are offered. This program began in May of 2015 and has been supported by the needs shown in the primary data collected in both 2012 and 2014.

2012 Community Health Needs Assessment

Accomplishments

Priority 1 – Outpatient Disease Management

The 2012 Strategic Goal was to ensure that residents of Madison and surrounding counties had access to an outpatient disease management program for diabetes and related health issues. In July of 2013, Baptist Health Richmond entered into a partnership with the Madison County Health Department to establish an outpatient diabetes education and nutritional counseling services. Since the inception of the program, we have:

- Created an American Diabetes Association-accredited outpatient diabetes self-management education program
- Taught more than 40 classes
- Had more than 143 patient complete the program
- Received more than 1,200 referrals for outpatient services
- Reached more than 2,500 community members
- Provided more than 1,500 individual counseling services

Priority 2 – Preventative Health

The goal for this priority was to ensure residents of Madison County had access to preventive health care through the primary care strategy outreach plan. As a result of this plan, Baptist Health Richmond has recruited an additional four primary care physician to the area. In addition, the facility has upgraded the technology for breast and lung preventative screening as well as extensively promoted and educated the public on the appropriate early detection screenings.

Priority 3 – Mental Health Services

While Baptist Health Richmond did not intend to meet this need of mental health services, the increase in need prompted the facility to enhance the referral process to appropriate providers. In addition to entering into a consultative agreement with The

Ridge for behavioral health consults, Baptist Health Richmond expanding the social work department and transitioned to a case management model of care for patients. The case management department provides on-call social work services 24/7 and increases the ability to provide mental health services to the patients receiving care at Baptist Health Richmond.

Priority 4 – Services for the Underinsured

While Baptist Health Richmond did not intent to expand its efforts to provide services for the underinsured, it did expand the resources available to this segment of the population. Through a patient assistance fund that provided taxi vouches and medication assistance, the hospital has continued to increase the level of support provided to the patients who are underinsured.

Priority 5 – Substance Abuse Services

Substance abuse services was not a priority Baptist Health intended to meet; however, with the expansion of the case management department the hospital has continued to work with existing providers of substance abuse services to make the appropriate referrals and get patients the care they need outside of Baptist Health Richmond. This includes working in collaboration with the local law enforcement authorities and other outside agencies.

Path Ahead/Next Steps

Implementation Strategy

Priority 1 Obesity/Healthy Lifestyles

Baptist Health Richmond plans to continue to meet this health need through the education and prevention of obesity through a partnership with the Madison County Health Department Community Health Improvement Plan. This priority is very similar to the priority in the 2012 Assessment. However, based on the new primary data and Community

Advisory Committee, Baptist Health decided to be consistent with the terms in the Community Health Implementation Plan.

Strategic Goal 1

To ensure that residents of Madison and surrounding counties have access to an outpatient nutrition counseling and disease management programs for diabetes and related health issues stemming from the prevalence of obesity and unhealthy lifestyles.

Outcome Objectives and Measurable Indicators

1. Identify and increase the number of organizations in Madison County that offer worksite wellness and diabetes prevention programs by December 31, 2017.
2. Offer a Diabetes Prevention Program in Madison County by December 31, 2016.
3. Explore the ability to offer diabetes education programs as part of worksite wellness services by August 31, 2017.
4. By June 30, 2016, develop a plan to conduct outreach to patients in the community who have chronic diseases of Congestive Heart Failure, COPD, and Diabetes.
5. Develop community partnerships to educate local residents on healthy lifestyles and ways to manage chronic diseases resulting from obesity. Partners include:
 - a. Madison County Extension Services
 - b. Madison County Health Department
 - c. Madison County Schools
 - d. City of Richmond
 - e. Eastern Kentucky University
 - f. Madison County Fiscal Court
 - g. Whitehouse Clinics

Priority 2 Preventive Health

Baptist Health Richmond plans to continue to meet this health need through the collaboration with local health care partners and through implementation and growth of primary care providers in the area.

This priority will be addressed by recruiting additional primary care physicians to Madison County and providing the community with a wide variety of preventive health

outreach and awareness programs. The need for additional primary care physicians was identified by both the primary and secondary data collected during this assessment. The greatest health problems identified in the primary data can all be addressed through the establishment of a medical home and primary care physician. Baptist Health Richmond will recruit additional primary care physicians to our service area based upon calculations made using published physician needs assessment models. These physicians will be instrumental in addressing both of the top priorities identified by this needs assessment: outpatient disease management and preventive health.

Through an aggressive community outreach initiative, Baptist Health Richmond will focus on educating the people of Madison County on the importance of preventive health and maintaining a relationship with a primary care physician. This approach will combine hospital hosted events, community events, special events and activities designed specifically to increase awareness and understanding of the importance of the annual exams and screenings necessary for a person to take personal responsibility for their health. The outreach will focus on preventable disease, disease management and making health decisions a priority. In addition, Baptist Health Richmond will continue to increase the preventive health screening made available to consumers with a strong family history.

Strategic Goal 1

To ensure that residents of Madison County have access to a primary care provider.

Strategic Goal 2

To increase the awareness of the importance of early detection and prevention of breast, lung and colon cancer through screening programs for residents of Madison County.

Outcome Objectives and Measurable Indicators

1. By December 31, 2016, Baptist Health Richmond will recruit a minimum of two primary care physicians to practice in Madison County.
2. Baptist Health Richmond will conduct a minimum of 10 free health education and awareness programs, medical health screenings, and fitness activities in Madison County for adults and children annually.

3. By December 31, 2016, Baptist Health Richmond will publish a minimum of 12 general and preventive health information articles in the mass media.
4. By December 31, 2015, Baptist Health Richmond will implement a Lung Cancer Screening Program for non-symptomatic individuals with a significant smoking history.
5. Offer education opportunities to promote the importance of early detection and screening mammograms in an annual Paint the Town Pink campaign.

Community Outreach Plan for Preventive Health				
Deliverable/ Description	Type (Man/Mktg/ Info)	Target Audience(s)	Delivery Method	DEADLINE
B. Michael Caudill Health Fair	Marketing	Community	Blood pressure screening including diabetes education	March
Baptist Health Wellness Event	Marketing	Community Residents	Wellness screenings to identify health issues and importance of having a medical home	July
Building a Healthier You	Marketing	Community	Health providers discuss the importance of wellness on a variety of topics including: nutrition, and the appropriate preventive screening for both men and women.	March and September
City Fest	Marketing	EKU	Education on preventive health and PCPs	September
Diabetes Day – Walk for Wellness	Marketing	Community	A walking event at EKU to educate the community on diabetes and related issues	April
Diabetes Symposium	Marketing	Community	Provide education about Diabetes, class offering, and preventive health measures	March
Dinner with the Dietitians	Marketing	Community	Nutritional counseling and education seminar for community members	March
EKU Athletics health fair	Marketing	Community	Establish a mini health fair at the EKU Basketball games to help community members understand the importance of preventive health and maintaining a relationship with a PCP.	February

EKU Health Fair	Marketing	EKU Employees	Various screenings and including diabetes education, and preventive health screenings.	March
Hot Women and Health	Women	Women	Educational Series – Advance Directives and Living Wills	March
Hot Women and Health	Women	Women	Educational Series – Physical Therapy and Joint Health	April
Hot Women and Health	Marketing	Women	Educational Series	October
Kids' Fest	Marketing	Community	Talk about disease prevention and the importance of having a PCP, including diabetes screening	September.
Madison County Health Fair	Marketing	Community	Various screening and PCP identification including diabetes education	April
Mammogram and a Movie	Marketing	Community	Physician panel to discuss the importance of early detection and the prevention of cancer	October
Medical Minute	Marketing	All	Monthly health information series in the Health Beat and Richmond Register that educate community members on health topics and speaking with physicians.	Monthly
Paint the Town Pink	Marketing	Community	Breast cancer prevention/early detection	October
Power of Pink Annual Campaign	Marketing	Community	Breast cancer prevention	October
Second Sunday	Marketing	Community	Promote the need for PCP at County wide event	October 14

Take Your Health to Heart	Marketing	Community	Heart health outreach event including diabetes education	February
Women's Health Movie Event	Marketing	Community	Physician panel to discuss pre-natal care and women's Health issues	July
Women's Wellness Day	Marketing	Women	Education Event so educate the importance of early detection and annual screenings	October
YMCA Health Fair	Marketing	Senior Citizens	Various screenings and disease as a result of physical inactivity	March
YMCA Healthy Kids Day	Marketing	Madison County families	Information on Primary Care Physicians (PCPs) available	April

Priority 3 Behavioral Health Services

In order to provide truly effective mental health services, one or more psychiatrists and psychologists as well as additional qualified mental health counselors must be recruited to practice in Madison County. As part of the Baptist Health System, Corbin's behavioral health resources can be extended into Madison County. Baptist Health Richmond will work to meet these needs through collaboration with other community and network agencies.

Strategic Goal 1

To ensure that residents of Madison County have access to mental health counseling.

Strategic Goal 2

To ensure that residents of Madison County have access to substance abuse counseling and services.

Provision of substance abuse services for Madison County would require much the same recruitment of professionals, hospital renovation, and capital outlay as that required in order to address mental health services. Like psychiatric care, substance abuse treatment is not central to the hospital's core services or strategic plan. At this time, Baptist Health Richmond will partner with our sister hospital to implement a higher level of substance abuse service to the residents of Madison County. Though this partnership does not have the resources or capital to pursue the addition of an inpatient detoxification wing or initiate, fully staff and equip a substance abuse treatment program, it will create an infrastructure to ensure the community has a higher level of substance abuse services.

Outcome Objectives and Measurable Indicators

1. Implement a behavioral health program to screen inpatients and Emergency Department patients by December 2015 in collaboration Baptist Health Corbin.
2. Establish a 24/7 informational and treatment hotline to address residents of regional behavioral health/substance abuse resources by December 2016.
3. Develop curriculum and obtain license for Intensive Outpatient Program (IOP) by December 2016.
4. Pursue development of tele-psychiatry consult program for inpatient and outpatient consultations by August 2017.

Communication Plan

CHNA Communication Plan					
Deliverable/Description	Type (Man/Mktg/ Info)	Target Audience(s)	Delivery Method	DEADLINE	Responsible
BHR Board Approval	Mandatory	Board		May 26	Gary Barnes
Documents Finalized			Sent to BHS	August 1	Gary Barnes
Executive Team coaching	Mandatory	Senior Leadership	Coach executive team and board members for their presentations to boards, community group, employee and medical staff	August 13	Jill Williams
Management Staff Meeting	Mandatory	Directors	Face to Face	July 16	Jill Williams
Meeting with Richmond Register			Media Briefing	July 28	Jill Williams
Send press release	Info	Media	News release	August 3	Megan Tracy
Include in eNews	Info	Employees	Letter/memo	August 3	Megan Tracy
Send Medical Staff memo Send personal letter for home/office delivery describing results and action plan.	Info	MDs	Letter/memo	August 3	Megan Tracy
Medical Staff Executive Committee	Info	MD Leadership	Invite all MD staff to presentation	August 4	Todd Jones
Town Hall Meetings Q&A	Info	Front line staff	Todd Jones, CEO will present the plan.	TBD	Todd/Jill/Joy
Host special community leader luncheon	Marketing	Community Leaders	Todd will give presentation to all key community leaders explaining the CHNA and distributing copies of the CHNA.	August 7	Jill Williams
Upload CHNA to website	Marketing	All		August 1	CHQ Marketing
Community Civic organizations Tour	Marketing	Community\	<ul style="list-style-type: none"> • Richmond Rotary • Bluegrass Rotary • Red Cross • Kiwanis • Exchange Club 		Jill Williams

			<ul style="list-style-type: none"> • Chamber Eggs/Issues • HR Professionals Meeting • BGAD • ECU Retired Faculty Luncheon • Lions Club • PEO • Red Hat Ladies • Madison Co. Breast Cancer Support Group • Business Babes • Retired Teachers Club • Woman's Club 		
Point of Service Distribution	Marketing	Community	Copies of the CHNA will be made available at public locations including: public libraries, Health Dept., Hospital, physician offices, pharmacies, ECU, Madison County Schools and other key employers.	August 15	Jill Williams

**Baptist Health Richmond Strategic Implementation Plan
2015-2018**

Identified Health Needs	Goals	Action Item(s)
<i>Obesity/Healthy Lifestyles</i>	Ensure residents have access to outpatient nutritional counseling and disease management programs for diabetes and related health issues stemming from the prevalence of obesity and unhealthy lifestyles	<p>Increase in worksite wellness and diabetes prevention programs by December 2017</p> <p>Offer diabetes prevention program by December 2016</p> <p>Develop a plan to conduct community outreach for patients with chronic diseases by August 2017</p> <p>Develop community partnerships to educate residents on healthy lifestyles and ways to manage chronic diseases resulting from obesity</p>
<i>Preventive Health</i>	Ensure residents have access to a primary care provider	<p>Recruit a minimum of two primary care physicians in Madison County by December 2016</p> <p>Host or participate in a minimum of 10 free health education programs, screenings and fitness activities annually</p> <p>Publish a minimum of 12 general and preventive health information articles in the mass media by December 2016</p>

**Baptist Health Richmond Strategic Implementation Plan
2015-2018**

Identified Health Needs	Goals	Action Item(s)
	<p>Increase awareness of the importance of early detection and prevention of breast, lung and colon cancer through screening programs</p>	<p>Implement a lung cancer screening program for non-symptomatic individuals with a significant smoking history by December 2015</p> <p>Offer educational opportunities to promote the importance of early detection and screening mammograms in an annual Paint the Town Pink campaign</p> <p>Coordinate with regional public health departments and the American Cancer Society to promote public education on importance of colon cancer screenings</p>
<p><i>Behavioral Health</i></p>	<p>Ensure residents have access to mental health counseling</p> <p>Ensure residents have access to substance abuse counseling and related services</p>	<p>Implement a behavioral health program to screen inpatients and Emergency Departments patients by December 2015 in collaboration with Baptist Health Corbin</p> <p>Establish a 24/7 hotline to inform residents of regional behavioral health/substance abuse resources by December 2016</p> <p>Develop a curriculum and obtain license for Intensive Outpatient Program (IOP) by December 2016</p> <p>Pursue development of telepsychiatry consult program for inpatient and outpatient consultations by August 2017</p>