

# Community Health Improvement Plan

2014-2016



# Table of Contents

Olathe Medical Center has developed the following Community Health Improvement Plan (CHIP) to address the top health need priorities that were identified through a Community Health Needs Assessment. This is a three-year plan, which will begin implementation in 2014.

- 3 EXECUTIVE SUMMARY**

---

- 4 PRIORITY 1**  
Decrease obesity rate among residents and increase access to healthy food.

---

- 6 PRIORITY 2**  
Address the lack of mental health services.

---

- 7 PRIORITY 3**  
Increase access to care for the uninsured and underinsured.

---

- 10 PRIORITY 4**  
Provide/implement additional health education offerings.

---

- 10 PRIORITY 5**  
Provide additional services for and education for chronic disease care.

---

- 11 PRIORITY 6**  
Provide additional services for seniors.

---

- 12 PRIORITY 7**  
Increase number of women getting mammograms.

---

- 13 PRIORITY 8**  
Increase immunization rates.

---

- 14 PRIORITY 9**  
Implement better healthcare data collection methods and reporting and access to outcomes data.

# Executive Summary

For 60 years, it has been the pleasure and privilege of Olathe Medical Center (OMC) to serve our communities. Our goal of providing the highest possible level of medical expertise, advanced technology, and professional, compassionate care has remained our guiding principal over all those decades, and continues to drive us to provide the very best care for our patients and their families.

While OMC is a committed partner, the overall health of our communities is a joint effort. Schools, nonprofit organizations, county, local and federal government agencies, religious-based groups, health insurers and businesses all play an integral role in meeting the healthcare needs of the residents of our service area.

Recently, in an effort to improve the health of communities, the Patient Protection and Affordable Care Act (ACA) regulated that nonprofit hospitals nationwide, including OMC, conduct a Community Health Needs Assessment every three years. Hospitals are then required to develop and execute a Community Health Improvement Plan to meet the needs identified in this assessment.

OMC, in partnership with the Johnson County Department of Health, and with the help of VVV Research and Development, conducted the health needs assessment for our service area of Southwest Johnson County. This was done by performing research and collecting health data for our area, and actively seeking input from the community through a survey and town hall meetings.

## Health Need Priorities

The research, survey and town hall meeting helped develop a clearer picture of our service area and the health priorities of residents. The result was a list of 12 top health priorities for our community. OMC then conducted additional research to further investigate each health priority. This process resulted in combining related priorities to best allocate our resources and set goals. Below is a summary of the major health need priorities in OMC's service area.

- 1 Decrease obesity rate among residents and increase access to healthy food.
- 2 Address the lack of mental health services.
- 3 Increase access to care for the uninsured and underinsured.
- 4 Provide/implement additional health education offerings.
- 5 Provide additional services for and education for chronic disease care.
- 6 Provide additional services for seniors.
- 7 Increase number of women getting mammograms.
- 8 Increase immunization rates.
- 9 Implement better healthcare data collection methods and reporting and access to outcomes data.

## Community Health Improvement Plan

Olathe Medical Center has developed the following Community Health Improvement Plan (CHIP) to address the top health-need priorities that were identified through the assessment described above. This is a three-year plan, which will begin implementation in 2014.

# Community Health Improvement Plan

## Priority 1: Decrease obesity rate among residents and increase access to healthy food.

**NEED:** The obesity rate among residents across our service area is high, and it continues to rise. Obesity affects individuals' quality of life and can lead to other health conditions including heart disease, stroke, type 2 diabetes and certain types of cancer.

**INITIATIVE:** Provide current pediatric patients and the students of local school districts with goal setting, education, resources and activities to encourage healthy lifestyles, healthy eating habits and exercise.

**ANTICIPATED IMPACT:** While there are many causes and contributing factors to the problem of obesity, we feel that we can make the biggest impact in combating this problem by working with our pediatric patients at our primary care clinics to set goals for healthy eating habits and lifestyles. The goals would focus on exercise and healthy eating. Through the following initiative, we anticipate that many of our pediatric patients and their families will work toward personal goals of getting more exercise and incorporating healthier foods into their diets. These habits would have a positive affect on the rate of obesity.

### OMC's Response

#### 1 Integrate goals for healthy eating habits and healthy lifestyles into pediatric patients' electronic medical records.

All children are recommended to have an annual well-child check. Assessment questions about a child's eating habits, exercise and screen time will be incorporated into the electronic medical record as part of the well-child check for all pediatric patients four – 16 years old. In addition, each patient, his or her guardian and the doctor will work to create a personal healthy lifestyle goal to be accomplished over the next year.

- The number of pediatric patients at Olathe Medical Services clinics who are four – 16 years old is 20,830.
- The framework for this program is 1-2-3-4-5 Fit-tastic, an effort launched through a team of Kansas City agencies that were chosen in 2011 to participate in Collaborate for Healthy Weight, a nationwide initiative led by the National Initiative for Children's Healthcare Quality (NICHQ) and supported by the Health Resources and Services Administration (HRSA). The goals of 1-2-3-4-5 Fit-tastic are to increase the proportion of Kansas Citians at a healthy weight and engaging in healthy behaviors and to increase policy action and environmental changes to support healthy eating and active living.
- OMC will influence change in its community by having a clear plan, tracking progress, using a consistent message and aligning resources for this program.

**2014 GOAL:** Complete integration of assessment questions about healthy eating and lifestyle into electronic medical records.

**2015 GOAL:** Seventy-five percent of pediatric patients ages four – 16 years old who are seen for annual well-child checks will have at least one healthy eating or lifestyle goal documented in their electronic medical records. This goal will be determined by the physician and patient together, with the parent's assistance.

**2016 GOAL:** Of the patients with a documented goal in 2015, at least 75 percent will have achieved his or her goal.

**2** OMC will expand the 1-2-3-4-5 Fit-tastic message in the local community by providing health education and resources to our local school districts with the same messaging used in the primary care and pediatric clinics.

- OMC will work with the school districts to decide what schools, materials and funds are needed to share this message at the elementary and middle school levels. The goal will be to engage at least 50 percent of the elementary and middle schools in our service area with this program.

**2014 GOAL:** Distribute Fit-tastic materials and messages to 50 percent of elementary schools in the OMC service area.

**2015 GOAL:** Distribute Fit-tastic materials and messages to an additional 25 percent of elementary schools in the OMC service area and follow up on progress with schools initiated in 2014.

**2016 GOAL:** Complete distribution to remaining elementary schools in the OMC service area and follow up on progress with all schools in the OMC service area.

## Additional Efforts

Olathe Health System and its physicians recognize the seriousness of the obesity epidemic both nationally and in the OMC service area. Below are some additional ways OMC is helping to decrease obesity in its community.

- OMC hired a Board-certified internal medicine doctor who specializes in diabetic care. She will work closely with our diabetes educators and primary care physicians to treat and manage patients who have diabetes in an outpatient setting.
- The Diabetes Education department at OMC will continue to offer healthy eating cooking classes, weight-loss classes, support groups, training and education for people who are overweight and have diabetes.
- The cafeteria at OMC offers visitors and employees a healthy meal option that includes an entrée option and two vegetable sides. This meal option is only 550 calories and costs \$3.50 to make the healthy option affordable. The cafeteria also recently introduced additional salad options, half-sandwiches and other low-fat options. In addition, the OMC patient menu includes low-sodium, low-fat food options for patients who have special dietary needs.
- The nutritional care staff at OMC will publicly display the nutritional breakdown of food served in the OMC cafeteria.
- The new Olathe Community Center and Stagecoach Park will provide much-needed spaces

for recreational, fitness, and community outreach programs. The 72,000 square foot facility is scheduled to open mid-2014. Olathe Medical Center will be involved by offering health education classes and various health screenings at the facility.

- Olathe Medical Center is working with Johnson County Parks & Recreation Department to create an outdoor fitness center at Heritage Park. Like with an indoor gym, the outdoor equipment is designed to help improve strength, endurance and flexibility, but the greatest advantage comes from combining these benefits with the natural boost users experience simply from being outdoors. It is free for use by the community. There are no “gym” fees for users. This will encourage physical activity and can help to decrease obesity in the community.
- OMC is working with the City of Olathe to create a community garden in one of the local parks. Community gardens provide fresh produce and plants as well as satisfying labor, neighborhood improvement, a sense of community and connection to the environment. They are publicly functioning in terms of ownership, access, and management, as well as typically owned in trust by local governments or not for profit associations. OMC would either sponsor plots in the garden or the entire project.
- OMC provides an annual grant to the Olathe Public Schools for various programs, including student health and wellness initiatives. This year, part of the money is being used for new scales at the elementary level that measure BMI; a walking track at Countryside Elementary; support for health fairs at individual schools; and healthy eating classes at the elementary level.
- OMC is working with Johnson County Health Department to implement a Walking School Bus program with local schools. This includes the City of Olathe addressing safety concerns, such as crosswalks and intersections, cutting down trees, fixing sidewalks that are in disrepair and creating bike lanes.
- OMC currently sponsors or hosts several race events annually, such as the Olathe Medical Center Women’s Triathlon, the Olathe Medical Center Family Fun Run, The Go Girl Run and the Garmin Marathon. These races provide opportunities for residents to train and participate in races that take place in their own community. They are also welcoming to first-time runners and focus on achieving personal goals.
- OMC offers a bariatric surgery program and free weight-loss seminars and support groups. Our outpatient dieticians are a part of this program.
- The Healthy Weigh program at OMC allows a person to have a one-on-one session with a dietitian to discuss personal eating habits, develop goals and establish a plan for managing weight.
- OMC offers its employees a variety of health education programs and classes on the topics of sleep, nutrition, physical activity, stress management and tobacco cessation. Employees can also have one-on-one, face-to-face coaching sessions about their health. Each year, employees have the opportunity to take a free health risk assessment, which includes blood pressure, glucose and cholesterol testing.

## Priority 2: Address the lack of mental health services.

**NEED:** There is a need for additional mental health services in the communities we serve. In this plan, this priority has been combined with Priority #3, access to care the uninsured and underinsured.

## Priority 3: Increase access to care for the uninsured and underinsured.

**NEED:** There is a need in the communities we serve for equal access to healthcare for all groups, including the uninsured and underinsured and those suffering from mental illness. Access to comprehensive, quality healthcare services is important for a person's overall physical, social and mental health; the prevention of disease and disability; the detection and treatment of health conditions; and quality of life. The barriers to healthcare access can include difficulty gaining entry into the healthcare system; lack of transportation; not knowing how to access a healthcare location where needed services are provided; and difficulty finding a healthcare provider with whom a person can communicate and trust.

**INITIATIVE:** Increase access to primary and specialty healthcare services for the uninsured and underinsured people in communities we serve by addressing the barriers to entry of the healthcare system listed above. Help provide resources and information to this population, so they are more familiar with the services available to help them. Provide free or low-cost health screenings and medical services when possible. Partner with community organizations to meet the physical health needs of people who have mental and substance abuse disorders.

**ANTICIPATED IMPACT:** Uninsured and underinsured patients will have more care options and resources and a plan will be in place to provide more care for the mentally ill.

### OMC's Response

#### 1 Implement a Mobile Integrated Healthcare Vehicle program.

One of the consequences of uninsured or underinsured individuals not having access to primary care is that emergency medical services and the emergency room (ER) are used for non-emergency situations, often because the person does not know where else to go.

There are two primary problems here. First, calls are placed to 911 for medical help that are not emergencies. EMS vehicles have to respond in these cases, which can result in longer wait times for actual emergency calls and much greater costs to EMS, the hospital and the person involved. Second, patients are using the hospital in place of primary care, in some cases making several visits to the hospital instead of following up with a primary care doctor. Again, this can result in longer wait times for true emergency patients and much higher costs for all involved.

Olathe Medical Center and the Olathe Fire Department are developing a Mobile Integrated Healthcare Vehicle program to address both of these problems. This program will involve a non-emergency Mobile Healthcare Vehicle that will respond to non-emergency situations and follow up with people who are unlikely to comply with physician instructions.

- This vehicle will be staffed by a physician's assistant, provided by OMC, and a fire department staff person. It would be deployed instead of an EMS vehicle if the situation does not require emergency medical help, but does require some medical or other type of assistance.

- In addition to responding to calls for assistance, the Mobile Integrated Healthcare Vehicle will also proactively follow up with people in their homes, who are frequently using the emergency room or who may need extra help complying with physician instructions.
- The Mobile Integrated Healthcare Vehicle would be a source of information, as well as medical assistance, making sure people have contact information for low- or no-cost care through the Health Partnership Clinic or the Health Department, and answering questions individuals may have. The staff will also follow up with people who missed their appointments at the Health Partnership Clinic.
- The Mobile Integrated Healthcare Vehicle staff will give influenza vaccines.
- This service will provide transportation coupons for those who can't afford transportation to a doctor's office.
- The ER staff at OMC will educate people about how to obtain healthcare services offered by the Johnson County Health Partnership Clinic, Johnson County Health Department and other similar services. The staff will use the online program, My Resource Connection, to further assist people needing assistance finding resources that can help meet their needs. These can include things like groceries, clothing, housing, healthcare, counseling, transportation, employment, emotional support and more. My Resource Connection is maintained and hosted by the government of Johnson County, KS.

**2014 GOAL:** Identify a key group of individuals who frequently use emergency services for non-emergent reasons and could benefit from this service. Formalize the approach and process of this service in coordination with the Olathe Fire Department.

**2015 GOAL:** Impact the lives of at least 50 percent of the people identified as needing assistance, and eliminate their use of the emergency room for non-emergent situations.

## 2 Create a comprehensive plan for the most high-need mentally ill patients.

Olathe Medical Center will collaborate with Children's Therapeutic Learning Center (TLC) and the Johnson County Health Partnership Clinic to address some of the most high-need individuals in our community with behavioral and mental health issues.

- Identify the high-need individuals by looking at those who are underserved and use the ER as a last resort.
- This group will work together to intervene earlier (before the patient ends up in the ER) to get the patient the physical, mental and substance abuse help he or she needs.
- An actionable plan for this service is in development.

**2014 GOAL:** Identify a key group of high-need individuals who have behavioral and mental health issues who are underserved and use the ER as a last resort. Formalize an action plan to address the needs of these individuals, so they are not using the ER for non-emergent reasons.

**2015 GOAL:** Reduce by 50 percent the number of these patients using the ER for non-emergency situations and reduce by 50 percent the number of these patients making multiple visits to the emergency room instead of following up with a doctor.



### 3 Assist uninsured patients in navigating and obtaining insurance coverage through the Health Insurance Marketplace.

Olathe Medical Center currently contracts with an outside vendor to assist in qualifying patients for Medicaid, Medicare and Disability insurance. OMC will contract with an outside vendor that has certified application counselors, starting in 2014, to help uninsured people navigate through the process of obtaining private insurance on the new Health Insurance Marketplace. The Affordable Care Act became federal law in March 2010. It requires nearly every citizen in the United States to buy and maintain health insurance coverage beginning January 1, 2014, or pay a tax penalty. Most uninsured people will need to purchase private health insurance either on the new Health Insurance Marketplace or through insurance companies and insurance agents off of the marketplace. OMC will help patients navigate through the system and gain insurance coverage, so they have better access to healthcare and avoid costly penalties.

- Identify current uninsured patients who might qualify for insurance in the Health Insurance Marketplace.
- Contract with an outside vendor to identify and screen potential candidates and help them navigate through the insurance process.

**2014 GOAL:** Finalize and implement a contract with an outside vendor to screen and qualify potential candidates. Identify a key group of uninsured patients who would benefit from this service. Formalize a process for selecting and screening patients over the next two years.

### Additional Efforts

Olathe Medical Center takes its commitment to serve all members of its service area, both insured and uninsured, very seriously. Below are some of the many other ways OMC is contributing toward this priority.

- OMC provides basic health screenings, first-aid kits and a monetary donation to help support an annual back-to-school event for the homeless students in the Olathe School District. This event is attended by approximately 693 people.
- OMC will provide free medical kits to half of the Title 1 elementary school families in the Olathe School District by the end of 2014 and the other half by the end of 2015. School district principals and nurses have told us that basic needs for their families who are uninsured are thermometers and basic medical supplies like bandages and antiseptic cream.
- OMC provides a free phone service for people to call to help them navigate the healthcare system and find a primary care doctor or specialist.
- OMC is participating in the Latino Coalition, formed at the request of the Mayor of Olathe to make Olathe a more welcoming city for all members of the Latino community. As part of the Health and Human Services Task Group, OMC is helping to address the barriers Latino residents face in accessing healthcare; to make the Olathe Health System easier to navigate and more welcoming for non-English speakers; and to determine recommendations that will be presented to the City of Olathe.
- Olathe Medical Services clinics and the physician corporation of Olathe Health System are

recognized Level III Patient-Centered Medical Homes. This health delivery model focuses on preventive care and ongoing wellness, while delivering great value and quality of care for patients.

- OMC sponsors nursing education and allied health training programs in areas, such as pharmacy and radiology, that provides real-world experience for students to prepare them for medical careers. In 2012, OMC provided \$1,534,092 towards this type of programming and projects a similar or greater level of support over the next three years.
- OMC participates in several health fairs that serve the uninsured and underinsured with free blood pressure checks and/or free cholesterol and glucose checks, screening and cancer information and health resources.
- OMC supports the Health Partnership Clinic (HPC) of Johnson County, which provides medical and dental care to the low income, uninsured residents of Johnson County at two sites in Overland Park and Olathe. OMC physicians donate time to the clinic and the hospital provides in-kind radiology and laboratory services and makes a yearly financial donation to this organization.
- OMC provided \$12,833,824 worth of uncompensated care in 2012, which includes the cost of providing care to patients who meet the guidelines of the system's charity care program, and the cost of providing care in excess of reimbursement to participants in the Medicaid program and other indigent public programs, such as free clinics. OMC projects a similar or greater level of support over the next three years.
- OMC has contracted with all three KanCare organizations to provide care for Medicaid patients.
- OMC supports WYJO Care, a safety net clinic that provides specialty care for people without insurance, through financial assistance, donated physician time and OMC staff serving on the board of directors.
- Olathe Health System has always been a supportive member of the communities it serves in a variety of ways, including community health improvement services, cash and in-kind donations to community groups and organizations, and community building activities, such as housing for the underprivileged, community health improvement and economic development. OMC provided \$533,792 in this area in 2012 and projects a similar or greater level of support over the next three years.

## **Priority 4: Provide/implement additional health education offerings.**

**NEED:** There is a need for additional health education in the communities we serve. In this plan, this priority has been integrated into Priorities #1, #2, #3, #6 and #7.

## **Priority 5: Provide additional services and education for chronic disease care.**

**NEED:** There is a need for additional services for and education about chronic disease care in the communities we serve. In this plan, this priority has been integrated into Priorities #1 and #3.

## Priority 6: Provide additional services for seniors.

**NEED:** The need for senior care services and long-term healthcare is on the rise. As the 78 million baby boomers continue to pass age 60, more people will be faced with the challenges of caring for their senior parents.

**INITIATIVE:** As a hospital, we feel we can have the biggest impact here by providing expanded, quality healthcare services that impact the senior population in our service area, such as new treatment facilities for patients who have Alzheimer and dementia and new high-quality inpatient hospice care.

**ANTICIPATED IMPACT:** Seniors in the OMC service area will have access to new services that will increase their care options and quality of life.

### OMC's Response

#### 1 Complete construction of a Hospice House at Olathe Medical Park.

OMC raised more than \$3.7 million toward the construction and operational costs of an inpatient hospice facility located at Olathe Medical Park and close to the Olathe Medical Center. The Hospice House will provide a home-like environment for terminally ill patients and the expert medical and nursing care they require.

- The Hospice House will meet a large need in the community for hospice care, as there is currently no close option for the residents of OMC's service area.
- It will provide dignity and comfort to patients, including seniors, who are approaching the end of their lives.

**2014 GOAL:** Successful completion of the construction and opening of the Hospice House.

#### 2 Support the memory care project at Olathe Medical Park and prepare OMC for additional memory care patients.

- The Evangelical Lutheran Good Samaritan Society hired a consultant to evaluate building a memory care facility at Cedar Lake Village in Olathe Medical Park. OMC will provide planning and recommendations from a safety and construction standpoint that need to be done to accommodate memory care patients. OMC will also prepare its staff, hospital and resources to accommodate memory care patients. Once the memory care building plan is in place, OMC and the Good Samaritan Society will meet to formalize their comprehensive plan and implementation timeline.

## Additional Efforts

Olathe Medical Center recognizes the growing need for senior care services and long-term healthcare. Below are some additional ways OMC is helping to increase services for seniors.

- OMC's goal is to make senior patients feel safe and comfortable when they come to the ER. The staff is educated and trained in evidence-based geriatric protocols. The ER has made senior-friendly features available including softer lighting, non-skid low glass floors, thicker mattresses, decreased noise and large faced clocks.
- OMC will implement ongoing continuing education with area senior living facility leaders. This will also be an avenue for two-way communication to discover what additional services and education we need to offer.
- OMC offers Home Health services. This includes professional nurses, physical therapists, occupational therapists, speech therapists, medical social workers, dieticians, wound care/ostomy certified nurses and home health aides to assist people in their homes. The staff has experience in a broad range of conditions and needs. They provide care seven days per week and offer after-hours nurses to be "on-call" to assist patients if problems arise.
- OMC has a partnership facility shared with the Evangelical Lutheran Good Samaritan Society on its campus called Cedar Lake Village (CLV). CLV is a senior living retirement community with multiple levels of care from independent to assisted to total care. CLV continues to expand and offer more living options for seniors in our community.

## Priority 7: Increase number of women getting mammograms.

**NEED:** According to the National Cancer Institute, getting a high-quality screening mammogram and having a clinical breast exam (an exam done by a health care provider) on a regular basis are the most effective ways to detect breast cancer early.

**INITIATIVE:** Increase the number of women getting mammograms by directly communicating with our current female patients and educating the public on the importance of mammograms and where they can go to get a mammogram.

### OMC's Response

- 1 Increase the number of mammograms completed by current Olathe Medical Services patients who are women ages 40 – 69 years old.
  - Through the Patient-Centered Medical Home (PCMH) model, each primary care clinic has identified the percentage of female patients who are 40 – 69 years old and have had a mammogram in the past two years. From January 1, 2013 – August 28, 2013, this was 57.74 percent.
  - The PCMH team will work with the public relations department to create a comprehensive communication plan for increasing the number of mammograms for current patients. The public relations department will also create a communication plan for general awareness to the public about the importance of mammograms.

**2014 GOAL:** Create a comprehensive communication plan to increase the number of mammograms for current patients. Increase the number of current patients receiving mammograms to 60 percent.

**2015 GOAL:** Increase the number of current patients receiving mammograms to 68 percent.

## Additional Efforts

Olathe Medical Center and its physicians understand that mammograms are key to early detection of breast cancer. Below are some additional ways OMC is helping to increase the number of women getting mammogram screenings.

- OMC's Breast Care Center is accredited by the National Accreditation Program for Breast Centers. This means our patients get comprehensive care with state-of-the-art services and a multidisciplinary team approach to coordinate the best treatment options. The care team includes surgeons, medical oncologists, radiation oncologists, radiologists and multiple support staff members to provide timely diagnosis and treatment of patients and ongoing monitoring of patients' outcomes.
- OMC spends approximately \$22,000 a year on community education about mammograms and their importance through all of its marketing channels. This includes radio spots, newspaper and magazine advertising, billboards, flyers, newsletters, community events and more.
- OMC sends reminder cards to patients when it's time for their annual mammogram.
- OMC educates patients and the community about free and reduced-cost mammograms available through the Health Partnership Clinic (HPC) of Johnson County. If a patient with no insurance needs a mammogram or pap test, they can go to the Health Partnership Clinic of Johnson County and get an Early Detection Works phone number and code. With this code, they get a free mammogram from a local health facility. The Early Detection Works program pays for clinical breast exams, mammograms, Pap tests and diagnostic services for women who qualify.
- OMC offers evening and weekend hours for mammograms to accommodate busy schedules.
- OMC offers digital mammography for its patients, which is a faster process overall. Image clarity is assessed immediately to reduce unnecessary and sometimes worrisome callbacks. Soft, disposable breast pads add cushioning and increase comfort.

## Priority 8: Increase immunization rates.

**NEED:** Immunization rates are lower than desired in the OMC service area.

**INITIATIVE:** OMC has determined that this initiative is being addressed by the Johnson County Health Department and the HPC. OMC will continue to support them in their efforts by collaborating to provide volunteers, physicians and financial support.



## **Priority 9:** Implement better healthcare data collection methods and reporting and access to outcomes data.

**NEED:** Analyzing healthcare data can verify and measure the effectiveness of services. This would help healthcare organizations make informed decisions with the goal of improving outcomes for the patients they serve.

**INITIATIVE:** OMC participates in a number of data collection and outcomes-based surveys. As part of this plan, we are not recommending anything additional.