IMPLEMENTATION STRATEGY

Significant Health Needs

We used the priority ranking of area health needs by the Local Expert Advisors to organize the search for locally available resources as well as the response to the needs by SMCRMC. The following list:

- Identifies the rank order of each identified Significant Need
- Presents the factors considered in developing the ranking
- Establishes a Problem Statement to specify the problem indicated by use of the Significant Need term
- Identifies SMCRMC current efforts responding to the need including any written comments received regarding prior SMCRMC implementation actions
- Establishes the Implementation Strategy programs and resources SMRMC will devote to attempt to achieve improvements
- Documents the Leading Indicators SMCRMC will use to measure progress
- Presents the Lagging Indicators SMCRMC believes the Leading Indicators will influence in a positive fashion, and
- Presents the locally available resources noted during the development of this report as believed to be currently available to respond to this need.

In general, SMCRMC is the major hospital in the service area. SMCRMC is a 25-bed critical access hospital located in Osceola, Arkansas. The next closest facilities include:

- Great River Medical Center, Blytheville, AR, 18.1 miles (26 minutes)
- Twin Rivers Regional Medical Center, Kennett, MO, 44.6 miles (57 minutes)
- Pemiscot County Memorial Hospital, Hayti, MO, 45 miles (45 minutes)
- Arkansas Methodist Medical Center, Paragould, AR, 52.2 miles (65 minutes)
- NEA Baptist Memorial Hospital, Jonesboro, AR, 53 miles (67 minutes)
- St. Bernards Medical Center, Jonesboro, AR, 54.1 miles (70 minutes)
- Regional One Health Medical Center, Memphis, TN, 55.4 miles (57 minutes)

All data items analyzed to determine significant needs are "Lagging Indicators," measures presenting results after a period of time, characterizing historical performance. Lagging Indicators tell you nothing about how the outcomes were achieved. In contrast, the SMCRMC Implementation Strategy uses "Leading Indicators." Leading Indicators anticipate change in the Lagging Indicator. Leading Indicators focus on short-term performance, and if accurately selected, anticipate the broader achievement of desired change in the Lagging Indicator. In the QHR application, Leading Indicators also must be within the ability of the hospital to influence and measure.

1. **PHYSICIANS – 2013 SIGNIFICANT NEED; Population to Primary Care Physician ratio worse than AR and US**

Public comments received on previously adopted implementation strategy:

- *I am not aware of the actions that the hospital has taken to address Physicians.*
- *They seem to try to keep a good staff...*
- *Don't know any at this time*
- *???*
- *Do not know*
- *I know efforts have been made to attract physicians to the hospitals but they have had limited success.*
- *Don't know any!*
- *Not aware of any actions*

SMCRMC services, programs, and resources available to respond to this need include:

- Worked with county to implement sales tax to assist with recruiting new providers
- ENT available one day a month for surgeries
- Many specialty services provided at Great River Medical Center only 17 miles away
- Mental health screenings available through telehealth in partnership with Mid-South Health Systems
- Telemedicine for neonatology and stroke in partnership with UAMS
- Telemedicine for burn in partnership with Arkansas Children's; consults for emergency pediatric patients
- Tele-trauma available through Arkansas Health Network
- Preparing to go live with Pulsara program (STEMI protocol) in January with Arkansas Department of Health
- Hospital volunteers raise money for scholarships to help support local aspiring physicians and nurses
- Participate in state of Arkansas loan forgiveness program to help bring in physicians
- Local high school students can participate in job shadowing and MASH program to learn about careers in healthcare
- Provide residency placement for Arkansas State University (radiology, respiratory, PT) and Arkansas Northeastern College (EMT/EMTP, RN/LPN, phlebotomy)

Additionally, SMCRMC plans to take the following steps to address this need:

- Begin recruitment process for internal medicine to replace physician planning to retire
- Looking at providing residency placement for DO program at Arkansas State in Jonesboro

SMCRMC evaluation of impact of actions taken since the immediately preceding CHNA:

- Recruited an APN
- Added bone density screenings

Anticipated results from SMCRMC Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations		X
4. Enhances public health activities		X
5. Improves ability to withstand public health emergency		X
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate SMCRMC intended actions is to monitor change in the following Leading Indicator:

- Number of providers recruited in 2017 = 0

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Population to primary care physicians = 2,630:1[20]

[20] www.countyhealthrankings.com

SMCRMC anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
St. Bernards Medical Center		www.stbernards.info 225 E Jackson Ave, Jonesboro, AR 72401 (870) 207-4100
NEA Baptist Memorial Hospital		https://www.baptistonline.org/locations/nea 4800 East Johnson Ave, Jonesboro, AR 72401 (870) 936–1000
Arkansas Children's		http://www.archildrens.org/ 1 Children's Way, Little Rock, AR 72202 (501) 364-1100
UAMS Medical Center		https://uamshealth.com/ 4301 W Markham St, Little Rock, AR 72205 (501) 686-7000
Arkansas Health Network		www.arkansashealthnetwork.com 2 St Vincent Cir, Little Rock, AR 72205 (501) 552-3914
Arkansas Department of Health		www.healthy.arkansas.gov 4815 W. Markham, Little Rock, AR 72205 (800) 462-0599
Arkansas State University		https://www.astate.edu 2105 Aggie Rd, Jonesboro, AR 72401 (870) 972-2100
Arkansas Northeastern College	James Shemwell, PHD	www.anc.edu 2501 South Division Street, Blytheville, AR 72315 (870) 762-1020
Methodist University Hospital		http://www.methodisthealth.org/locations/methodist-university-hospital 1265 Union Ave, Memphis, TN 38104 (901) 516-7000

2. **CANCER – 2013 SIGNIFICANT NEED; #2 Leading Cause of Death; Mammography Screening below AR avg and US best**

Public comments received on previously adopted implementation strategy:

An implementation plan was not developed for this need in 2013, so no comments were solicited.

SMCRMC services, programs, and resources available to respond to this need include:

- Added resources in clinics to better track and schedule preventive screenings, including sending reminders to patients due for a screening
- IV and infusion therapy services available at Great River Medical Center, if needed
- Participate in annual health fairs and provide screenings including PSAs, colorectal screenings, education on self-breast exams, etc.
- Provide education of the month in hallways, on website, and in newspaper on cancer prevention including breast cancer awareness month, etc.
- Participate in Susan G. Komen race and raise money to support cancer screening awareness and research for a cure; hospital team has won awards for participation
- Participating in state program to promote and encourage smoking cessation through screenings and smoking cessation training
- Offer contracted rates for mammography screenings to Department of Health to increase availability to low income and uninsured populations
- Shifted employee health insurance plan to incentivize better health choices including smoking cessation

Additionally, SMCRMC plans to take the following steps to address this need:

- Continue above activities

SMCRMC evaluation of impact of actions taken since the immediately preceding CHNA:

- Extended mammography hours until 9:00pm on first and third Thursdays to increase access after typical working hours
- Added digital mammography

Anticipated results from SMCRMC Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency		X
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate SMCRMC intended actions is to monitor change in the following Leading Indicator:

- Number of mammograms provided in 2017 = 1,570
- Number of colonoscopies provided in 2017 = 501

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Cancer death rate = 229.9 per 100,000[21]

SMCRMC anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
West Cancer Clinic		www.westcancercenter.org 271 West Polk Ave, West Memphis, AR 72301 (870) 733-1800

[21] www.worldlifeexpectancy.com/usa-health-rankings

Organization	Contact Name	Contact Information
Susan G. Komen		https://komenarkansas.org/ 904 Autumn Road, Suite 500, Little Rock, AR, 72211 (501) 202-4399
Arkansas State Department of Health (SOS)		http://www.stampoutsmoking.com/ Arkansas Department of Health Tobacco Prevention and Cessation Program 4815 W. Markham St., Slot 3, Little Rock, AR 72205 (501) 661-2953
Mississippi County Health Department		1299 N 10th St, Blytheville, AR 72315 (870) 763-7064
American Cancer Society		www.cancer.org/about-us/local/arkansas 901 N University Ave, Little Rock, AR 72207 (501) 664-3480

3. **DIABETES – 2013 SIGNIFICANT NEED; #5 Leading Cause of Death; Diabetic Monitoring below AR avg and US best; Diabetes Deaths 54th worst of 56 peers**

Public comments received on previously adopted implementation strategy:

- *I am not aware of actions that the Hospital has taken regarding Diabetes*
- *I am not familiar with any education opportunities the hospital provides.*
- *Provide information about nutrition and increased exercise to the community. Provide diabetes management classes if possible.*
- *I am not sure.*
- *They do address diabetes with information and treatment!*
- *Not aware of any*

SMCRMC services, programs, and resources available to respond to this need include:

- Registered dietician on staff to counsel inpatients as well as available to community
- Provide diabetes education at annual health fairs, on website, and in newspaper
- Provide reminders and counseling to diabetic patients to receive annual eye exam, foot exams, and A1C at Great River
- GRMC operates a fitness center available to the community, that is free to SMCRMC employees and available at a reduced rate for families
    - Contract with personal trainer to provide additional services and education at fitness center
- Hospital staff volunteer at local Charity Clinic; clinic has added a diabetic education program
- Implementing chronic care management program for diabetes, heart disease, etc., which includes face-to-face education and counseling

Additionally, SMCRMC plans to take the following steps to address this need:

- Continue above activities

SMCRMC evaluation of impact of actions taken since the immediately preceding CHNA:

- Wound care clinic works with diabetic patients and provides care and education at Great River Medical Center
- Added pain clinic at GRMC that treats diabetic neuropathy

Anticipated results from SMCRMC Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency		X
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate SMCRMC intended actions is to monitor change in the following Leading Indicator:

- Percentage of patients receiving diabetic care (foot exam, A1C) in 2017 = 2,383

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Diabetes death rate = 57.0 per 100,000[22]

SMCRMC anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
Great River Charitable Clinic	Connie Ash, APN	www.greatriverclinic.org 33 Arkansas St, Blytheville, AR 72315 (870) 762-5459

[22] www.worldlifeexpectancy.com/usa-health-rankings

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Mississippi County Health Department		1299 N 10th St, Blytheville, AR 72315 (870) 763-7064

4. **ACCESSIBILITY/AFFORDABILITY – 2013 SIGNIFICANT NEED; Preventable Hospital Stays above AR avg and US best; Population to Primary Care Physician ratio worse than AR avg and US best; Unemployment above AR avg and US best; Emergency Room Use 10.4% above avg**

Public comments received on previously adopted implementation strategy:

- *The Hospital system should be more transparent about its funding.*
- *Those that use the ER as a doctor's office, often don't pay and are written off, where the rest of us never get a bill after 30 days and are turned over to collection. Send a bill and file insurance before you turn people over to collection.*
- *Not aware of any*

SMCRMC services, programs, and resources available to respond to this need include:

- Extended mammography hours until 9:00pm on first and third Thursdays to increase access after working hours
- Mental health screenings available through telehealth in partnership with Mid-South Health Systems
- Telemedicine for neonatology and stroke in partnership with UAMS
- Telemedicine for burn in partnership with Arkansas Children's; consults for emergency pediatric patients
- Tele-trauma available through Arkansas Health Network
- Perform PSA (prostate-specific antigen) tests for local cancer group to screen for prostate cancer
- IV and infusion therapy services available at GRMC
- Participate in annual health fairs and provide screenings including PSAs, colorectal screenings, education on self-breast exams, cholesterol, lipids, BMI, glucose, etc.
- Provide education of the month in hallways, on website, in newspaper on various health topics including cancer, diabetes, wellness, etc.
- Participating in state program to promote and encourage smoking cessation through screenings and smoking cessation training
- Registered dietician on staff to counsel inpatients as well as available to community
- Provide diabetes education information at annual health fairs, on website, and in newspaper
- GRMC operates a fitness center available to the community, that is free to SMCRMC employees and available at a reduced rate for families
- Implementing chronic care management program for diabetes, heart disease, etc., which includes face-to-face education and counseling
- Contract with air ambulance service (Air Evac) to quickly transport critical patients
- Charity care policy available to help cover costs

- Added financial assistance coordinator to help people sign up for Medicaid and apply for financial assistance
- Pre-authorize patients from Charity Care clinic and the Mission to fall under Charity Care policy at hospital and receive services
- Added primary care clinic on Friday afternoons to increase access
- Provide free sports physicals to all local schools
- Work with local industries for drug screens, workmen's comp services, on-site health fairs, etc.

Additionally, SMCRMC plans to take the following steps to address this need:

- Extended weekend hours for urgent care/fast track

SMCRMC evaluation of impact of actions taken since the immediately preceding CHNA:

- Recruited an APN
- Added Wound Care service line
- Added digital mammography
- Added resources in clinics to better track and schedule preventive screenings, including sending reminders to patients due for a screening

Anticipated results from SMCRMC Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency	X	
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate SMCRMC intended actions is to monitor change in the following Leading Indicator:

- Amount of financial assistance provided in 2017 = $433,000 – Bad debt $7,917,000
- Number of financial assistance applications processed and enrolled in 2017 = 1,804

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- ER Utilization compared to National Average = 54.9 ER visits/100 persons vs. national average 45.1 ER visits per 100 persons[23]

SMCRMC anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
UAMS Medical Center		https://uamshealth.com/ 4301 W Markham St, Little Rock, AR 72205 (501) 686-7000
Arkansas Children's		http://www.archildrens.org/ 1 Children's Way, Little Rock, AR 72202 (501) 364-1100
Arkansas Health Network		www.arkansashealthnetwork.com 2 St Vincent Cir, Little Rock, AR 72205 (501) 552-3914
Arkansas Department of Health		www.healthy.arkansas.gov 4815 W. Markham, Little Rock, AR 72205 (800) 462-0599
Mid-South Health Systems, Inc.	Vickie Winte	209 S Lockard St, Blytheville, AR 72315 (870) 763-2139
UAMS Medical Center		https://uamshealth.com/ 4301 W Markham St, Little Rock, AR 72205 (501) 686-7000

[23] https://www.cdc.gov/nchs/fastats/emergency-department.htm

Organization	Contact Name	Contact Information
Air Evac	Francis Lewis	https://lifeteam.net 1001 Boardwalk Springs Place, Suite 250 O'Fallon, Missouri 63368 (636) 695-5400
Healthy Partners & Affiliate (FQHC)	Valencia Andrews-Pirtle, MD	http://www.eafhc.org/MeetTheProviders/HealthyPartners.aspx 4102 Memorial Dr, Blytheville, AR 72315 (870) 532-6047
Great River Charitable Clinic	Connie Ash, APN	www.greatriverclinic.org 33 Arkansas St, Blytheville, AR 72315 (870) 762-5459
Local school districts		
Mississippi County Union Rescue Mission		https://www.facebook.com/theMissCoMission/ 400 East Walnut, Blytheville, AR 72315 (870) 763-8380

5. **STROKE – 2013 SIGNIFICANT NEED; #4 Leading Cause of Death; Stroke Deaths 46th worst of 56 peers**
6. **HEART DISEASE – #1 Leading Cause of Death; Coronary Heart Disease Deaths 57th worst of 57 peers; Cholesterol Screening 11.9% below avg**

Due to the similar services, programs, and resources required to respond to Stroke and Heart Disease, the two needs have been combined into one implementation plan.

Public comments received on previously adopted implementation strategy for STROKE:

- *I have heard speakers representing the hospital speak about the actions implemented into the Hospital and coordination done with the regional hospitals in Memphis. I believe that is excellent work by our Hospital*
- *The team continues its training to be fast responders in this area.*
- *Don't know at this time!*
- *do not know - but hopefully educate community on symptoms of possible stroke.*
- *The hospital system participates in providing Stroke education to the public through public service announcements.*
- *Information*
- *Not aware of any*
- *Continued participation in the state wide internet treatment program is needed.*

Public comments received on previously adopted implementation strategy for HEART DISEASE:

This was not a 2013 Significant Need, so no comments were solicited.

SMCRMC services, programs, and resources available to respond to this need include:

- Received grant to help provide stroke education at civic group meetings, football games, community events, etc.
- STEMI, tele-stroke (telemedicine) programs available to patients
- Participate in programs like Strike Out Stroke and Arkansas SAVES
- Stroke education provided at local businesses/industries and at health fairs
- GRMC operates a fitness center available to the community, that is free to SMCRMC employees and available at a reduced rate for families
- Hospital volunteers read books to elementary school students and educate on signs and symptoms of stroke

Additionally, SMCRMC plans to take the following steps to address this need:

- Continue above activities

SMCRMC evaluation of impact of actions taken since the immediately preceding CHNA:

- Provided training to local police department for CPR, first aid, and signs/symptoms of stroke

Anticipated results from SMCRMC Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations		X
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency	X	
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate SMCRMC intended actions is to monitor change in the following Leading Indicator:

- Door to balloon time
- Number of tele-stroke consults provided

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Stroke deaths = 66.8 per 100,000 population[24]
- Coronary Heart Disease Deaths = 287.1 per 100,000 population[25]

[24] https://wwwn.cdc.gov/communityhealth
[25] https://wwwn.cdc.gov/communityhealth

SMCRMC anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
UAMS Medical Center		https://uamshealth.com/ 4301 W Markham St, Little Rock, AR 72205 (501) 686-7000
Methodist University Hospital		http://www.methodisthealth.org/locations/methodist-university-hospital 1265 Union Ave, Memphis, TN 38104 (901) 516-7000
St. Bernards Medical Center		www.stbernards.info 225 E Jackson Ave, Jonesboro, AR 72401 (870) 207-4100
NEA Baptist Memorial Hospital		https://www.baptistonline.org/locations/nea 4800 East Johnson Ave, Jonesboro, AR 72401 (870) 936–1000
Dr. S. Karri (cardiologist)		1520 N Division St, Blytheville, AR 72315-1448 (901) 725-2222
Arkansas Stroke Registry		http://www.healthy.arkansas.gov/programs-services/topics/arkansas-stroke-registry
American Heart Association		www.heart.org

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Pafford EMS (ambulance service)		www.paffordems.com 105 Plantation Dr., Osceola, AR 72730 (870) 563-0911

Organization	Contact Name	Contact Information
Air Evac	Francis Lewis	https://lifeteam.net 1001 Boardwalk Springs Place, Suite 250 O'Fallon, Missouri 63368 (636) 695-5400
Hospital Wing		www.hospitalwing.com 1080 Eastmoreland Ave, Memphis, TN 38104 (901) 522-5321
Survival Flight Inc.		survivalflightinc.com 4824 E Baseline Rd #101, Mesa, AZ 85206 (480) 275-4900

Other Needs Identified During CHNA Process

7. **MATERNAL/INFANT MEASURES**
8. **HOMICIDE – 2013 SIGNIFICANT NEED**
9. **LUNG DISEASE – 2013 SIGNIFICANT NEED**
10. **OBESITY**
11. **DENTAL – 2013 SIGNIFICANT NEED**
12. **ACCIDENTS**
13. **SMOKING/TOBACCO USE**
14. **ALZHEIMER'S**
15. **ALCOHOL**
16. **MENTAL HEALTH**
17. **COMPLIANCE BEHAVIOR/PREDISPOSING CONDITIONS – 2013 SIGNIFICANT NEED**
18. **KIDNEY DISEASE**
19. **ORTHOPEDICS**
20. **BLOOD POISONING**
21. **BUILDING COMMUNITY RELATIONSHIPS**
22. **HEALTH LITERACY**

Overall Community Need Statement and Priority Ranking Score

Significant needs where hospital has implementation responsibility

1. Physicians
2. Cancer
3. Diabetes
4. Accessibility/Affordability
5. Stroke
6. Heart Disease

Significant needs where hospital did not develop implementation strategy

None

Other needs where hospital developed implementation strategy

None

Other needs where hospital did not develop implementation strategy

None