

MISSION FOR IMPLEMENTATION

Hancock Medical Center (HMC) is a county owned acute care facility originally constructed in 1987 and based in Hancock County, MS. The hospital's vision includes:

- Taking the lead in improving our community's health by providing a network of care throughout the county and surrounding areas
- Becoming the provider and employer of choice while ensuring quality of care while maintaining financial viability
- Reshaping our hospital services and outreach programs based on needs of the community while providing compassionate patient-centered care

In 2010, Hancock Medical Health Services (HMHS) was created to act as a supporting organization comprised of physician clinics to help sustain hospital services. In 2013, Ochsner Health System entered into a management agreement to assist Hancock Medical Center in achieving their vision to expand and improve upon quality and access to care in the community.

As part of this effort and to meet federal IRS 990H requirements, this document serves as a community health improvement plan (CHIP) for Hancock Medical Center. This report is a companion piece to the Community Health Needs Assessment (CHNA) that was finalized September 2016 and based, in part, off of several needs identified in the CHNA.

TARGET AREA/ POPULATION

Approximately 90% of Hancock Medical Center's patients reside within Hancock County itself. The target population for most of the implementation strategies discussed in the CHIP are dependent upon the priority focus area(s) identified and for the Hancock County community.

PRIORITY HEALTH NEEDS

Based on the data in the Community Health Needs Assessment produced August 2016 through feedback provided by Hancock Medical Center CHNA Advisory Board, Board of Trustees, Leadership, and the community partners and organizations who participated in the CHNA process, the top three (3) health needs for the community(s) served by Hancock Medical Center are:

1. Diabetes
2. Access to Care
3. Educational resources regarding health awareness

Additional health priorities identified within the survey process included obesity (#5), cardiovascular disease (#8), alcohol/substance abuse (#4), teen pregnancy (#6) and lack of transportation (#7). Hancock Medical Center will incorporate two additional priorities identified within their CHIP, those being obesity and cardiovascular disease. While cancer was not listed as a top priority, CHNA secondary data identified malignant neoplasms/cancer as the top cause of death for Hancock County with mortality rates higher for both the state of MS and nationally. Hancock Medical Center will also incorporate this service into their Community Health Improvement Plan.

SELECTED IMPLEMENTATION STRATEGY

The following implementation strategies outline actions Hancock Medical Center will take over the next three years to address the priority health needs listed above.

PRIORITY STRATEGY FOR DIABETES, OBESITY, CARDIOVASCULAR DISEASE, AND HEALTH AWARENESS

Reduce/mitigate poor health outcomes associated with the above chronic conditions to include education regarding disease management, prevention education and thorough follow-up care.

Major Actions	Sub-actions
<p>Implement Bariatrics Program September 2016</p>	<p>1. Provide overall health awareness through the bariatric health program as requires pre and post-surgical patient education on healthy eating, changes in behavior, increased physical activity, psychological evaluations, management of conditions such as diabetes and cardiovascular disease.</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Decreased rate of obesity within Hancock County. • Decreased rate of Type 2 diabetes population within Hancock County. • Increased health awareness throughout the community as part of the bariatric program, to include bariatric patients impacting family/friends due to new lifestyle choices and health awareness. <p>2. Collaboration with Health Providers. Post-bariatric patients are provided 3 continuous months of compliance with the bariatric team to include their PCP/bariatric surgeon, bariatric nurse coordinator, dietician and support groups.</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased collaboration between the HMC bariatric program and HMC/HMHS providers to monitor and educate patients on obesity, diabetes management and cardiovascular disease. • Continued nutritional counseling by HMC dieticians for inpatient population.
<p>Offer resources to increase patient and community awareness regarding diabetes, obesity and cardiovascular disease</p>	<p>1. HMC will continue to provide free meeting space to the Diabetes Education Group on a monthly basis.</p> <p><i>Anticipated Outcome:</i> Sustained community support group</p> <p>2. Education provided to community via health fairs and community speaking engagements on overall health management and specialized topics such as diabetes, obesity and cardiovascular disease.</p> <p>3. Annual wellness screenings to HMC/HMHS employees.</p>

	<p><i>Anticipated Outcome:</i> Increased community awareness and methods to improve disease management.</p> <p>4. HMHS Family Practice Clinics will implement “Measure Up, Pressure Down” program which is organized around evidence-based measures for hypertension management, a symptom of cardiovascular disease.</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Patient and staff education on achieving optimal management of hypertension. • Patients identified not at hypertension goal identified via clinic screening will be given a follow-up appointment within 30 days, thus increasing their access to care.
	<p>5. Continue to provide Ochsner Telestroke Program for patients as strokes are a symptom of cardiovascular disease</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Continued ability to provide care for stroke patients locally • Increased volume of stroke patients presenting to facility
	<p>6. Continue to provide the Cardiac Rehab “Stay Fit” program in Bay St Louis and the “Get Fit” program in Diamondhead</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Sustained and/or increased community participation for increased physical activity which directly contributes to overall health management

PRIORITY STRATEGY FOR ACCESS TO CARE

Improve access to care for community members and identified patient populations.

Major Actions	Sub-actions
<p>Offer expanded clinic hours and/or locations</p>	<ol style="list-style-type: none"> 1. Additional Family Practice location offerings provided in Diamondhead and Port Bienville in addition to Bay St Louis on a Monday to Friday basis 2. Expansion of clinic hours provided for existing specialty clinics to include Urology, Orthopedic and Hematology/Oncology <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased patient clinic volume, community outreach and health care service offerings • Increased physical therapy referrals from Orthopedics
<p>Continued support and additional offerings for School Based Health Program</p>	<ol style="list-style-type: none"> 1. Continued support of resources for the Hancock County School Based Health Program (e.g. nursing staff) 2. Identification of students requiring medical services and offering same day/next day clinic appointments through HMC/HMHS clinics

	<p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased clinic volumes and access to local community care • Increased health outcomes for children • Increased health awareness for children and parents <p>3. Continued offering of influenza vaccinations and medication management</p> <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased influenza vaccination rates for students • Ongoing diabetes management and educational resources for student population
<p>Access to Cancer Care</p>	<ol style="list-style-type: none"> 1. A hematologist/oncologist was recruited in August 2016 2. Expansion of current infusion clinic service offerings for chemotherapy drugs (date TBD) 3. Extended clinic hours for this specific patient population <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased access to local care for these services not currently offered • Decreased cancer death rate for Hancock County • Increased health awareness and cancer screening tests through joint effort between Family Medicine, Surgical and Hematology/Oncology physicians.
<p>Increased Access to Specialty Care Providers and Services</p>	<ol style="list-style-type: none"> 1. Addition of Pain Management services (2017) 2. Addition of Wound Care services (date TBD) 3. Addition of Imaging services in Diamondhead, MS (date TBD) <p><i>Anticipated Outcome:</i> Increased access to local care as these services are not currently offered within Hancock County</p>
<p>Increased Occupational Medicine Services</p>	<ol style="list-style-type: none"> 1. Expansion of services offered to local businesses within and outside of Hancock County <p><i>Anticipated Outcomes:</i></p> <ul style="list-style-type: none"> • Increased health awareness • Increased community vaccination rates • Increased access to local providers via same day/next day clinic offerings • Increased occupational medicine volumes • Increased occupational therapy referrals
<p>Address affordability</p>	<ol style="list-style-type: none"> 1. HMC and HMHS will continue to provide assistance to community for Medicaid applications and/or charity care applications. 2. HMC will continue to refer indigent and uninsured patients to community resources (e.g. Coastal Family Health) for assistance in obtaining specialized services.

Anticipated Outcomes:

- Sustained/Increased Medicaid applications
- Sustained/Increased referrals for specialized services not available at HMC/HMHS

OTHER COMMUNITY NEEDS THAT CANNOT NOT BE ADDRESSED

Priorities identified but not addressed within the HMC CHIP are:

- Mental health providers
- Substance/alcohol abuse
- Teen pregnancy
- Lack of transportation

HMC's intent is to focus on key issues where they could provide the most community impact. The HMC Board of Trustees and Leadership determined these areas are already being addressed in the county by state, non-profit organizations and federally funded programs with specialized capabilities currently unavailable to Hancock Medical Center.