Summa Health™

2017-2019 Community Health Needs Assessment Implementation Plan

summahealth.org

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INTRODUCTION

Summa Health serves more than one million patients each year in comprehensive acute, critical, emergency, outpatient, and long-term/home-care settings. It offers more than 1,300 licensed inpatient beds, as of 2015, on three hospital campuses and several off-site locations. Summa Health's hospitals employ more than 5,600 staff members, and the entire system employs more than 9,000 employees. The buildings and facilities on all campuses encompass approximately 2.2 million square feet.

Summa Health, Akron Children's Hospital, and Cleveland Clinic Akron General Medical Center collaborated to complete a 2016 community health needs assessment (CHNA) and to prioritize the identified community health needs for their service areas. Kent State University's College of Public Health served as the research consultant throughout this process. The hospitals have a long history of collaboration on a wide range of projects aimed at improving community health. The details of the CHNA process, participants and results are available in Summa Health's 2016 CHNA report available at www. Summahealth.org.

This CHNA Implementation Strategies Plan ("Plan") will address the significant community health needs identified through the CHNA. The 2016 CHNA served as the foundation for developing an implementation plan to address those needs that (1) Summa Health determines it is able to meet in whole or in part; (2) are otherwise part of its mission; and (3) are not addressed (or are not adequately met) by other programs and services in the Hospital's service area. The Plan, required by IRS Section 501(r), documents the Hospital's efforts to address the community health needs identified in the 2016 CHNA.

Beyond the programs and strategies outlined in this plan, Summa Health will address the healthcare needs of the community by continuing to operate in accordance with its Mission to provide the highest quality compassionate care to our patients and members and to contribute to a healthier community. This includes Summa's historic tradition of providing care for all individuals regardless of their ability to pay.

The strategies and tactics of this Plan will provide the foundation for addressing the community's significant needs between 2017 and 2019. However, we anticipate that some of the strategies, tactics and even the needs identified will evolve over that period. Our flexible approach to addressing significant community needs will enable us to adapt to changes in collaboration with other community partners.

MISSION

Summa Health's commitment to its mission, vision and values is deeply rooted in its culture of servant leadership. We focus on coordinating care and care transitions throughout the clinical enterprise (and with community-based providers and resources) to improve the health status of the communities we serve.

Mission Statement:
The mission of Summa Health is to provide the highest quality, compassionate care to our patients and members and to contribute to a healthier community.

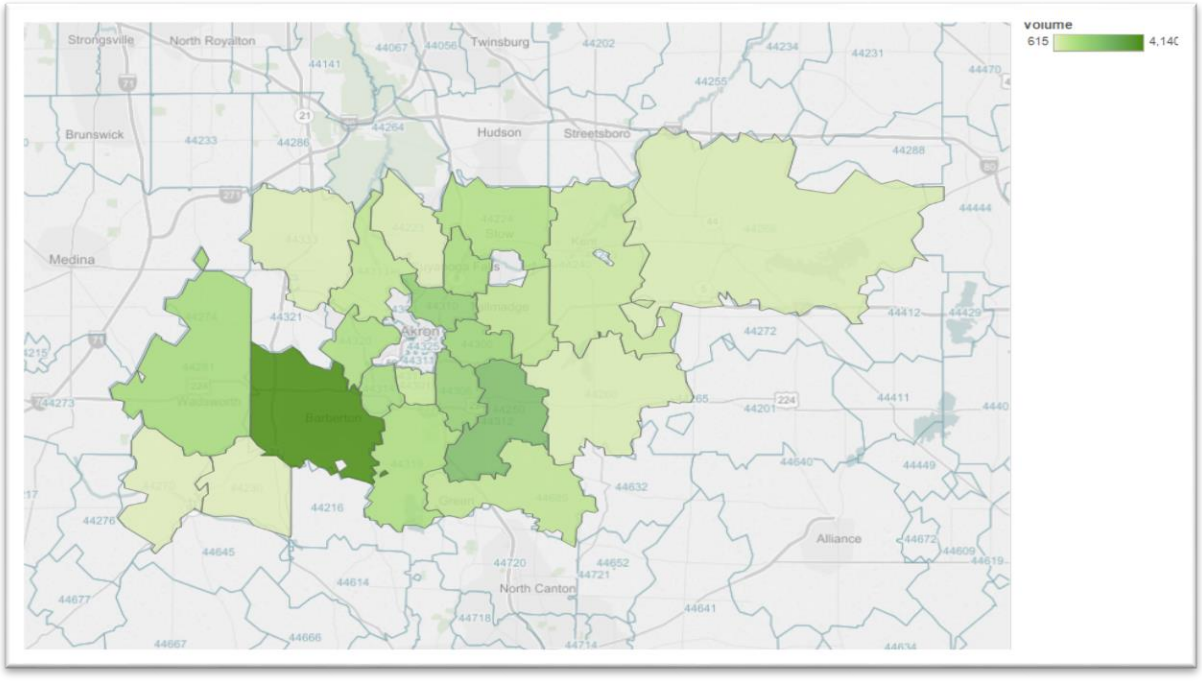
COMMUNITY SERVED BY HOSPITAL

Summa's service community was defined for the 2016 CHNA by the area with the greatest number of patient admissions in 2015. The zip code areas shown below represent 75.32% of the 2015 Admissions to the Summa Health System. As the zip code table illustrates, these census tracts are concentrated within Summit County. While Summa also treats patients from Medina, northern Stark, and Wayne counties, most patients come from Summit County as shown in the map below. Thus, Summit County is the primary service community identified for Summa's Implementation Strategies Plan.

Percentage of 2015 Summa Admissions by Zip Code:

44203: 10.19%	44221: 3.74%	44301: 2.52%	44230: 1.51%
44312: 6.22%	44319: 3.60%	44240: 2.28%	
44310: 4.86%	44320: 3.48%	44266: 1.79%	
44306: 4.80%	44224: 3.27%	44260: 1.77%	
44305: 4.31%	44278: 2.79%	44223: 1.72%	
44281: 3.94%	44685: 2.77%	44333: 1.70%	
44314: 3.90%	44313: 2.62%	44270: 1.54%	

Service Area Based on 2015 Summa Admissions



BACKGROUND AND PROCESS

The three collaborating hospitals (Summa Health, Cleveland Clinic-Akron General Medical Center, and Akron Children's Hospital) convened meetings and discussed the desire to collaborate, the resources needed to conduct the CHNA, and the latest IRS requirements pertaining to CHNAs. The Kent State University College of Public Health (KSU-CPH) served as the contractor to facilitate the development of the CHNA.

KSU-CPH analyzed epidemiological data on nearly 300 community health indicators. They also conducted key stakeholder interviews throughout the community. In addition, focus groups were conducted with community residents from April through September 2016 to solicit their input on missing health needs in the communities. In addition, a questionnaire collected demographic information and basic perceptions of community health needs from the focus group participants.

After these data were collected and the significant health needs identified for the three hospitals, a series of individual hospital meetings were held to identify each hospital's prioritized health needs based on the epidemiologic data, the input from community leaders and residents, input from health commissioners, and other CHNAs that had been previously been conducted.

After careful analysis of both the epidemiological and qualitative data, Summa Health identified five priority categories of health needs that impact the community served by the hospital. They are: prevention and wellness, access to health care, chronic disease management, and health disparities.

Recommendations of these selected priorities were presented to the Summa Health board of directors for approval. Next, in collaboration with Summa Health's internal leadership and departments, and assistance from our Community Engagement Committee and many external partners, a set of specific objectives and strategies was developed to address each prioritized health need determined to be within the scope of services and aligned with the mission of the system. The County Health Rankings & Roadmaps provided the guiding principles and framework for developing the Plan and creating evidence-based strategies to mobilize community action toward health improvement.

IMPLEMENTATION STRATEGIES PLAN FOR SUMMA AKRON CITY, BARBERTON, AND ST. THOMAS CAMPUS

Table 1 provides an overview of the community health priorities identified by Summa through the 2016 CHNA.

Table 1: Priority Health Needs Identified in the 2016 Summa CHNA

Priority Health Issues	Plan to Address
Access to Health Care	**Yes**
Chronic Disease	**Yes**
Environmental Factors	**No**
Health Disparities	**Yes**
Infectious Disease	**No**
Injury and Accidents	**No**
Quality of Health Care	**Yes**
Maternal and Child Health	**Yes**
Mental Health	**Yes**
Prevention and Wellness	**Yes**
Substance Abuse	**Yes**

SIGNIFICANT HEALTH NEEDS NOT ADDRESSED

Table 1 indicates several prioritized health needs identified in the 2016 CHNA that Summa will not address in the Plan. Poor health status can result through a complex interaction of challenging social, economic, environmental and behavioral factors, combined with lack of access to care. Addressing the more common "root" causes of poor community health can serve to improve a community's quality of life and to reduce mortality and morbidity. However, Summa recognizes that no hospital facility can address all of the root causes and health needs present in its community. Therefore, it was determined that the health system will collaborate with other organizations as needed to address the health needs not selected. Injuries, accidents and environmental factors including violence, crime, and poverty will not be addressed directly through our Plan. Resources, as well as available expertise, limit our selection of priorities. Summa Health will, however, look for opportunities to collaborate with Safe Communities of Summit County, Summit County Safe Kids Coalition, community development corporations, local services agencies and other organizations to address these important health issues whenever possible.

The Plan is also in alignment with current community health needs and priorities identified by the Summit County Public Health 2016 Community Health Assessment and the Ohio Department of Health's 2017-2019 State Health Improvement Plan.

SIGNIFICANT HEALTH NEEDS ADDESSED

Priority Health Outcome: Improving Prevention and Wellness

At Summa Health, our population health strategy is evolving the way we deliver care. As with any transformation of this magnitude, our transition has required a number of significant changes. Our vision for care puts the patient at the center of this model by creating a collaboration between the

patient and their caregivers that is focused on prevention and wellness (P&W). P&W focuses on improving the whole person, body and mind and reducing lifestyle risk factors and "everyday" behaviors that can negatively impact health. P&W strategies cross all the Priority Health Outcomes, are imbedded in each objective throughout the Plan and will be identified as (P&W).

Priority Health Outcome: Improving Access to Health Care

Objective 1: Improve access to health care and care coordination by incorporating Community Health Workers (CHW) in community-based settings.[1] [P&W]

Expected outcome: increased patient knowledge, access to care, healthy behaviors and preventative care, increased breastfeeding rates, reduced low birth weight births, and improved mental health.

Strategies: 1.1. Incorporate CHW's in community-based settings at the Summa Center for Health Equity to address social determinants of health, chronic disease management and evidence based prevention programs.[1] [P&W]

1.2. Participate in the Pathways Community HUB model. [1] [P&W]

1.3 Disseminate information regarding available community resources, providers, and facilities available to assist individuals in connecting with primary care, dental, and mental health providers in their community[P&W]

Evaluation measure: Number of patient encounters with CHW.

Objective 2: Increase the number of individuals who have access to primary care medical homes (PCMH) and Comprehensive Primary Care Plus (CPC+) practices hereby increasing the opportunities for preventative and early interventions for individuals requiring primary care, dental, and behavioral health providers. [1][P&W]

Expected outcome: significantly decrease the number of people in Summit County who do not have a medical home.

Strategies: 2.1. Collaborate with local agencies to assist individuals in need of health care but who need assistance obtaining health care coverage. [1][P&W]

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[1] **Priority and strategies align with Ohio's State Health Improvement Plan**

[P&W] **Objectives and Strategies that address Summa Health's Prevention and Wellness Priority**

2.2. Disseminate information regarding available community resources, providers, and facilities available to assist individuals in connecting with primary care, dental, and mental health providers in their community. (P&W)

Objective 3: Increase access to primary care providers and specialists as needed along the continuum of care. 1(P&W)

Expected outcome: significantly decrease the number of people in Summit County who do not have a primary care provider or specialist.

Strategies: 3.1. In conjunction with Summa Medical Group increase the number of primary care providers (PCP) and specialists through targeted recruitment for areas with limited availability. 1(P&W)

3.2. Enhance utilization of existing primary care medical homes including Summa Center for Health Equity.1(P&W)

Evaluation measure: Total number of patients enrolled with a PCMH, PCP and specialists.

Priority Health Outcome: Providing Chronic Disease Management

Objective 1: Increase consumer knowledge base of risk factors, risk behaviors, and genetic considerations which lead to increased incidence of cancer. (P&W)

Expected outcome: reduce incidence of cancer in Summit County.

Strategies: 1.1. Collaborate with local community organizations at community outreach events to provide education identifying risk factors, risk behaviors, and genetic conditions which often lead to the development of cancer. (P&W)

1.2. Collaborate with local community organizations at community outreach events to provide information on the signs and symptoms of cancer. (P&W)

Evaluation measure: Proportion of cancers which are detected at earlier (I&II) stages; reduce cancer death rates.

Objective 2: Increase consumer knowledge base of risk factors, risk behaviors, and genetic considerations, which lead to cardiovascular disease development. 1(P&W)

Expected outcome: reduce incidence of cardiovascular disease in Summit County.

Strategies: 2.1. Collaborate with American Heart Association in utilizing evidence based American Heart Association programs at community outreach events to provide education

identifying risk factors, risk behaviors, and genetic conditions, which predispose individuals to the development of cardiovascular disease. [1(P&W)]

2.2. Collaborate with American Heart Association at community outreach events to provide instruction and education on cardiopulmonary resuscitation through the Hands Only CPR classes. [(P&W)]

2.3. Collaborate with American Heart Association at community outreach events to provide information on the signs and symptoms of cardiovascular diseases.

Evaluation measure: Total number of people trained in Hands Only CPR. Reduced incidence of cardiovascular disease in Summit County.

Objective 3: Increase consumer knowledge base of risk factors, risk behaviors, and genetic considerations, which lead to increased incidence of diabetes.[1(P&W)]

Expected outcome: reduce incidence of diabetes in Summit County.

Strategies: 3.1. Collaborate with American Diabetes Association at community outreach events to provide evidence based education identifying risk factors, risk behaviors, and genetic conditions which predispose individuals to the development of diabetes.[1(P&W)]

3.2. Collaborate with American Diabetes Association at community outreach events to provide information on the signs and symptoms of diabetes and diabetes related complications. [(P&W)]

3.3. Disseminate information regarding available community resources, providers, and facilities for prevention, care and treatment of individuals with diabetes at community outreach events. [(P&W)]

Evaluation measure: Total number of participants enrolled in diabetes education program.

Objective 4: Promote mental wellbeing and prevent alcohol and other drug dependence for residents of Summit County.[**1**(P&W)]

Expected outcome: Reduce incidences of alcohol-and opiate-related overdoses and deaths.

Strategies: 4.1. Care coordination – access to behavioral health series in PCMH and Emergency Department.[1(P&W)]

4.2. Increase participation in Project DAWN.[1 (P&W)]

4.3. Monitor implementation of behavioral health parity legislation.[1(P&W)]

4.4. Provider training on opioid prescribing guidelines and use of OARRS.[1(P&W)]

4.5 Continue providing Centering Pregnancy and Parenting Program to improve neonatal outcomes through an innovative program that provides outreach, education, coordination and focuses on reducing the impacts of pregnant mothers struggling with addiction. [(P&W)]

4.6 Through a partnership with Summit County Public Health provide D.U.M.P boxes for community use at Akron City and Barberton Campus.[1(P&W)]

Evaluation measure: Reduced number of overdose deaths in Summit County.

Objective 5 Decrease smoking and tobacco use in adults. [1(P&W)]

Expected outcome: reduce tobacco use, preterm birth and improve overall health.

Strategies: 5.1. In collaboration with the American Lung Association, American Cancer Society, and American Heart Association, provide education of risk factors for smoking/tobacco use at community health outreach events. [(P&W)]

5.2. In collaboration with local public health departments, promote legislation to increase smoke free environments within communities. [1(P&W)]

5.3. Provide evidence based tobacco cessation programs for the community. [1(P&W)]

5.4. Disseminate information regarding available community resources, providers, and facilities for prevention, care and treatment of individuals who are predisposed or are exhibiting smoking and or tobacco use behaviors. Inpatients predisposed or currently exhibiting smoking and or tobacco use behaviors will also receive information on available community resources. [1(P&W)]

Evaluation measure: Number of participants enrolled in smoking cessation programs.

Priority Health Outcome: Reducing Health Disparities

Objective 1: Reduce infant mortality**.**[1(P&W)]

Expected outcome: reduce preterm births and low birth-weight births in Summit County.

Strategies: 1.1. Continue providing Centering Pregnancy and Parenting Program to improve neonatal outcomes through an innovative program that provides outreach, education, coordination and focuses on reducing the impacts of the social determinants of health for low income mothers.[1(P&W)]

1.2. Continue Baby Friendly designation at Akron City campus and promoting breastfeeding promotion programs throughout the health system.[1(P&W)]

1.3. Link pregnant women and people of childbearing age to smoking cessation support programs.[1(P&W)]

1.4. In collaboration with county public health agencies, provide education, resources, and programming through the Safe Sleep program to promote safe sleep methods for newborns.[1(P&W)]

1.5. In collaboration with March of Dimes, provide support services, resources, and programming to assist mothers in understanding the importance of healthy choices and care for themselves during their pregnancies. [(P&W)]

Evaluation measure: Tracking of number of at-risk women participating in the Centering Pregnancy and Parenting program. Collection of data on birth outcomes (gestational age, birth weight, day in hospital).

IMPLEMENTATION STRATEGIES PLAN SUMMA REHAB HOSPITAL, LLC

Due to the nature of the adult rehabilitation specialty services provided by Summa Rehab Hospital, LLC,(" Hospital") the identified health need in which they have the opportunity to address in this implementation plan for the greatest impact is Access. The community resources provided by a variety of institutions including Summa Akron city, St. Thomas Hospitals led to the determination by Summa Rehab Hospital, LLC to not address any other identified health need.

This implementation strategy specifics community health needs that the Hospital has determined to meet in whole or in part and that are consistent with its mission. The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs ay become more pronounced and require enhancements to the described strategic initiatives. During the three years ending December 31, 2019, other organizations in the community may decide to address certain needs, indicating that the Hospital then should refocus its limited resources to best serve the community.

Priority Health Outcome: Improving Access to Health Care

Objective 1: Enhance access to appropriate medications and improve compliance with medication prescriptions for patients that are discharged from Summa Rehab Hospital.[1]

Strategies: 1.1. Develop a concierge pharmacy program for patients at Summa Rehab Hospital that will offer free delivery of home-going medications, based on the attending physician prescriptions, to the bedside prior to discharge to home.

1.2. Utilize resources available to insure the patient has assistance with pre-authorization processes for specific medications through their insurance plan.

1.3 Investigate alternatives for expensive medications that patients have indicated they are unable to afford and therefore unable to maintain compliance with their medication regimen. Research alternative drug options with their physicians, identify lower cost retail programs in the community, assist with enrollment in patient assistance programs through drug manufacturers and coupon or voucher systems.

1.4 Offer medication counseling from a Pharmacist regarding any medication prescriptions that are filled and delivered to the bedside prior to discharge from Summa Rehab Hospital.

Objective 2: Enhance access to diagnosis specific support groups for community members.

Strategies: 2.1 Host, sponsor or facilitate a variety of support groups that are open to the public such as:

a. Life After Stroke – meets monthly for education, social support and peer outreach [Sponsor through site hosting, provision of Psychologist facilitator and provision of educational topics]
b. Life Goes On – Amputee Support Group - meets monthly for education, social support and development of a peer outreach program [Sponsor through site hosting, provision of Psychologist facilitator and Physical Therapy co-facilitator]
c. Creative Expressions – Brain Injury Support Group – meets monthly for education, social support and creative expression [Sponsor through site hosting, provision of several Therapy facilitators]
d. Delay the Disease – A weekly exercise group for Persons with Parkinson's Disease that is facilitated by trained therapy staff and is free to the public
e. Mended Hearts – a support group that is post open heart surgery – meets monthly [Host site]

2.2 Participate in Advocacy and Support Group activities through Northeast Ohio Brain Injury Foundation / Summit County TBI Collaborative

a. Volunteer time for monthly TBI Collaborative meetings, provide host site for meetings to offer recommendations.

b. Participate in planning and developing educational opportunities for both professionals caring for brain injured persons and Survivors and their families

1. Annual Professional Seminars targeting local and national speakers on topic of Brain Injury Treatment, Recovery, Community Reintegration and Wellness

2. Annual Survivor Conference targeting local and national speakers / providers / resources for Brain Injury Survivors and their families

c. Volunteer with Brain Injury Advocacy Committee quarterly

1. Promote Awareness of issues related to Brain Injury through activities in northeast Ohio – Annual Awareness Event [host site]

2. Plan for Social connections for 1-2 events per year with Existing community support groups in northeast Ohio

d. Participate in AHA Awareness Events or fundraising activities in the Community

1. Strike Out Stroke – Annual Event at the Ballpark

2. Annual Heart Walk – contributions for fundraising efforts

IMPLEMENTATION STRATEGIES PLAN WESTERN RESERVE HOSPITAL, LLC

A number of needs were identified as a result of the analysis of the data from the CHNA. While all of the needs identified were deemed important, due to the variety of Cuyahoga Falls regional institutions and community resources available to address many of the adult health needs and all of the child health needs including, but not exclusively, Akron Children's Hospital, Akron Canton Food Bank, and Summa Akron city and St. Thomas Hospitals, it was determined to address only the quality of care factor of hospital readmissions in this implementation plan.

This implementation strategy specifics community health needs that the Hospital has determined to meet in whole or in part and that are consistent with its mission. The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending December 31, 2019, other organizations in the community may decide to address certain needs, indicating that the Hospital then should refocus its limited resources to best serve the community.

Priority Health Outcome: **Improving Quality of Health Care**

Objective 1: Decrease hospital readmissions by improving post-operative outcomes for patients undergoing joint replacements.

Strategies: 1.1. Establish a Transition of Care team that includes both hospital and post-discharge providers
1.2. Monitor length of stay for patients and complications for post-discharge CJR patients.

Objective 2: Increase consumer knowledge of aspects of preoperative care that improve post-operative outcomes and decrease incidence of hospital readmissions in collaboration with our CJR surgeons.

Strategies: 2.1. Develop and implement collaborative plan between CJR providers and hospital re: 100% attendance in Joint Camp Prior to procedure.

2.2. Establish benchmark length of stay and outcomes for community providers assisting with post-discharge care, may include skilled nursing and rehab facilities, homecare agencies and outpatient therapy centers.

Priority Health Outcome: Increasing Prevention and Wellness

Objective 1: Increase community awareness of importance and impact of healthy lifestyle.

Strategies: 1.1**.** Develop and provide free community 'Lunch and Learn" programs that highlight information around diet, exercise, sleep apnea, smoking cessation, just to name a few.
1.2. Continue educational efforts with schools around "Not Me' I'm Drug Free" message and commitment pledge by students.

Evaluation Plan

Summa Health will use members from internal leadership, departments across the health system and various committees to monitor and evaluate the progress of each priority. Members from various disciplines will be represented.

We anticipate that each priority will have successes and challenges during implementation. The implementation teams are charged with making sure each priority maintains momentum and tracks funds dispensed to manage programs. The Community Engagement Committee will review a Plan update report on an annual basis and will discuss successes and challenges with program leaders as needed.

COMMUNITY COLLABORATIONS

Summa Health values and fosters strong relationships for the greatest collective impact. The Plan will be implemented in collaboration with many community partners including, but not limited to:

- Akron Area YMCA
- Akron Children's Hospital
- Akron Community Foundation
- Akron Marathon
- Akron Metropolitan Housing Authority
- Akron Public Schools
- Akron Summit Community Action
- Akron Summit County Public Library
- American Cancer Society
- American Diabetes Association
- American Heart Association
- American Red Cross
- Area Health Education Center
- Barberton Rotary Foundation
- Bluecoats, Inc.
- Coleman Foundation
- Community Health Center
- County of Summit ADM Board
- Emmanuel Christian Academy
- Faithful Servants Care Center
- Fame Fathers
- Habitat for Humanity of Summit County
- Haven of Rest Ministries
- Health in All Policies
- Heart to Heart Communications
- Kent State University
- Love Akron Network
- March of Dimes
- Minority Behavioral Health Group
- Mount Calvary Baptist Church
- NAACP
- National Alliance on Mental Illness,
- Ohio & Erie Canalway Coalition
- OPEN M
- Prescription Assistance Network
- Salvation Army
- Stephen Communale, Jr. Family Cancer Foundation
- Stewarts Caring Place
- Project GRAD
- Project Ujima
- Summit County Medical Alliance
- Summit County Public Health
- The City of Akron
- The Lippman School
- Tutoring Nurtures Talent
- United Disabilities Services
- United Way of Summit County
- University of Akron