Strategic Implementation Plan, March 2016 Lutheran Medical Center





### Strategic Implementation Plan

The 2016 – 2018 Strategic Implementation Plan spans three years and highlights the overall approach for Lutheran in addressing priority health issues in the service area. Most importantly, Lutheran is working closely with Jefferson County Public Health (JCPH) leaders and the hospital is committed to participation in JCPH's Community Improvement Plan efforts; in fact, in instances where our areas of priority are aligned, Lutheran will participate in the strategic efforts as presented in the county's recent plan, updated December 2015. The plan includes the development of the Jeffco Community Health Improvement Network, a group of multi-disciplinary coalitions in Jefferson County, Colorado working together to increase health of county residents.

The Network aims to create system- and policy-level changes that make healthy choices easier for Jefferson County children and families, and is comprised of five coalitions, or "CoINs" (Coalitions Integrated in the Network). Lutheran representatives are being identified to serve on the various CoINs. By working together, partners throughout Jefferson County including Lutheran, plan to use a collective impact framework to collaboratively and strategically improve the health and well-being of our community.

In an effort to better align with JCPH's goals and strategies, it was decided during the development of Lutheran's Implementation Plan that, CHNA Priority Needs # 2 Chronic Disease Management and #3 Behavioral Health would be combined and renamed #2 Preventative Care and Behavioral Health.

1. Access – The aims for addressing access include efforts to provide community-based events and activities that bring health care to families and children *where they live*. Access occurs at all levels of care and features health screenings that serve as entry points for patients, support groups, and health screenings in addition to many other events that bring value to nearby communities and encourage preventive health care. Strategies to accompany this priority and objective include:

#### PRIORITY 1: ACCESS to HEALTHCARE

OBJECTIVE: Collaborate with JCPH to improve access by removing barriers and creating connectivity to appropriate health services and community resources.

- ⇒ Support 340b Pharmaceutical Plan offering assistance with enrollment in Prescription Drug Assistance programs for free or reduced prescriptions
- ⇒ Increase access for patients to service lines that support management of chronic conditions such as pain management, diabetic services, cardiovascular and cancer programs
- ⇒ Improve appropriate level of care alignment through navigator offerings (Metro Community Provider Network, Bridges to Care, Seniors Resource Center)
- $\Rightarrow$  Identify barriers to accessing care including preventative care and continue to expand access through virtual health programs



2. Preventative Care and Behavioral Health – The aim for addressing preventative care behavioral health is that by integrating and networking services, primary care providers will be able to better direct their patients to preventive care, resources, and services. The goal is to diagnose conditions early on so that interventions are more impactful and individuals have more opportunity to make changes in behavior to better manage their condition. In addition, behavioral health efforts will reduce the stigma for people seeking care and overall increase awareness of behavioral health issues and resources through education and outreach to patients, the community, and providers. Strategies to accompany this priority and objective include:

### PRIORITY 2: PREVENTATIVE CARE AND BEHAVIORAL HEALTH

OBJECTIVE: Collaborate with JCPH to create a comprehensive, county-wide plan to connect patients to comprehensive and cohesive preventive care, including behavioral health.

- ⇒ Assess community resources and needs for information connecting preventive care to available services, create an inventory of behavioral health resources and link patients with community resources that teach them how to better manage their condition such as Metro Community Provider Network, Bridges to Care and SRC
- ⇒ Increase health education opportunities through Cancer, Cardiovascular and other service lines to provide important messages such as warning signs of chronic conditions i.e. stroke and heart attack and improved healthy choices
- $\Rightarrow~$  Conduct, through JCPD collaborative, an awareness campaign to reduce the stigma around seeking behavioral health care services

**3. Obesity** – The aim will address access to physical activity and nutritional education. The risk of obesity and certain chronic disease rates are related, including decreased levels of physical activity and unhealthy food/beverage choices. Strategies for this priority and objective include:

# PRIORITY 3: OBESITY

OBJECTIVE: Collaborate with JCPH to promote active living, healthy food access, and healthy beverage consumption.

- ⇒ Link individuals to wellness resources, including free/low-cost fitness and health classes, support groups, and counseling such as Weigh and Win and Bridges Integrative Health
- $\Rightarrow$  Maintain high nutrition standards through the Colorado Healthy Hospital Compact
- ⇒ Partner with JCPH collaborative to develop culturally relevant educational materials and to target populations most at risk for obesity and lack of exercise
- $\Rightarrow~$  Increase breastfeeding rates and duration, through JCPH collaborative, and Women and Family Services



## Conclusion

During the CHNA process, Lutheran conducted a Community Health Needs Assessment for Jefferson County and developed a Strategic Implementation Plan. The implementation plan features strategies that directly address the needs identified through the CHNA process. As stated earlier, the three redefined priorities are 1) Access to Healthcare, 2) Preventive Care and Behavioral Health, and 3) Obesity. The implementation phase includes:



As a nonprofit hospital, Lutheran is committed to improving the health of the communities it serves. This Community Health Needs Assessment and Implementation Plan demonstrates that the hospital will work independently and in partnership with Jefferson County Public Health's Community Health Improvement Network to positively impact the identified health needs in 2016–2018 to improve patient and community outcomes. The implementation plan is a living document that will be revised as needed, with input from the JCPH Network to include new partners, other hospital and system strategies, and activities, as well as new data. The final CHNA written report was shared with the Lutheran leadership team and subsequently, approved by the SCL Health Front Range, Inc. Board of Directors in December 2015. The Implementation Plan will be approved by the SCL Health Front Range, Inc. Board of Directors prior to May 15, 2016. This Community Health Needs Assessment and Strategic Implementation Plan are available to the community on the hospital's public website: www.Lutheranmedicalcenter.org.

## **Report Resources**

- $\Rightarrow$  Colorado Department of Public Health and Education
- $\Rightarrow$  Jefferson County Economic Development Council
- $\Rightarrow$  Jefferson County Public Health
- $\Rightarrow$  Local Civic and Community Organizations
- $\Rightarrow$  Local Municipalities
- $\Rightarrow$  Lutheran Medical Center Foundation Board of Director
- $\Rightarrow$  Lutheran Medical Center Senior Leadership
- ⇒ Metro Community Provider Network
- $\Rightarrow$  Medical Staff, Lutheran Medical Center
- $\Rightarrow$  SCL Health
- $\Rightarrow$  Terrapin Resource Development, Inc.
- $\Rightarrow$  West Chamber Jefferson County, Youth Leadership Program

- <sup>6</sup> Census.gov; Population; SAIPE Main; SAIPE Data; Interactive SAIPE Data and Mapping Tool; 2014
- <sup>7</sup> US Census Bureau Website; Jefferson County, Colorado Quick Facts;
- http://quickfacts.census.gov/qfd/states/08/08059.html?cssp=SERP; 2014

<sup>8</sup> Colorado Department of Education; Graduation Statistics 2013-2014; Graduation and Completion data; District

Level Data; Graduates and Completers by District, Gender and Race/Ethnicity (excel sheet); accessed 2015 <sup>9</sup> CDC: Community Health Status Indicators (CHSI); 2015;

https://mchdata.hrsa.gov/tvisreports/Documents/NeedsAssessments/2011/CO-NeedsAssessment.pdf

- <sup>10</sup> http://www.cdc.gov/nutrition/downloads/State-Indicator-Report-Fruits-Vegetables-2013.pdf
- <sup>11</sup> Colorado Maternal Child Health Needs Assessment Report; 2014

<sup>12</sup> Deaths and Age-Adjusted Rates with 95% Confidence Limits for Leading Causes of Death, Colorado Department of Health and Pubic Education; 2014

<sup>13</sup> http://www.coloradohealthinstitute.org/uploads/downloads/HSR\_21\_Combined\_2015.pdf



<sup>&</sup>lt;sup>1</sup> Colorado Hospital Association Discharge Data Program Database, 2015

<sup>&</sup>lt;sup>2</sup> Jefferson County Transportation and Planning; accessed at http://bikejeffco.org/wp-

content/uploads/2011/02/Jeffco2.jpg; 2015

<sup>&</sup>lt;sup>3</sup> US Census Bureau Website; Jefferson County, Colorado Quick Facts; 2014

<sup>&</sup>lt;sup>4</sup> http://jeffco.us/human-services/news/2014/on-the-brink--suburban-poverty-explodes/

<sup>&</sup>lt;sup>5</sup> http://y100.dgslaw.com/Project/57/Jefferson-County-Jeffco-Schools-Foundation