UnityPoint Health
Trinity

2016-2018 Community Health Needs Assessment
Community Impact: Summary of Results

In 2015, The Community Health Needs Assessment conducted in the Quad Cities area identified 13 areas of opportunity representing the significant health needs of the community. UnityPoint Health – Trinity chose five of those areas to focus on over the next three years, as well as to support other organizations in the area that were concentrating on the other needs identified that were not key areas of focus for UnityPoint Health - Trinity. The health priorities, challenges identified, goals, review of work done in the community, and results from areas we as a community improved on from the last assessment are listed below:

Diabetes & Nutrition, Physical Activity & Weight: Diabetes prevalence, fruit/vegetable consumption, and overweight & obesity (adults).

Goals:

- Increase awareness on how lifestyle choices impact overall health and wellbeing, and risk of being diagnosed with Type II Diabetes.
- Improve education around disease management for those already diagnosed.
- Create awareness for those not yet affected by diabetes about how to prevent the disease.

Community Improvements:

- %(non-diabetes) blood sugar tested in Past 3 years increased: 2015 = 48.5%, 2018 = 50%
- Population with low food access decreased(%): 2015 = 14.6%, 2018 = 13.9%
- % Children (ages 5-17) within healthy weight increased: 2015 = 57%, 2018 = 61.5%

The following activities and initiatives over the three-year period helped to support the goals for diabetes, nutrition, physical activity and weight:

- Blood sugar screenings – attended 34 mobile panties where 902 blood sugar screenings were conducted with 30% screening abnormal, and 213 referred for follow-up
- Workplace diabetes sessions and screenings – 20 presentations at workplaces on diabetes prevention, healthy eating, and exercise
- LiveWell and Community classes – participated in 13 symposiums, classes, presentations and health fairs

- Partnerships to Improve Community Health (PICH) (school wellness, safe routes to school, community gardens, QC Trails) –
    - 124 Rock Island & Scott County schools completed wellness assessments
    - 16 Safe Routes to School completed, 8 community gardens completed
    - 31 partners collaborates on QC Trails
    - 35 organizations received Be Healthy Quad Cities worksite wellness recognition
- JDRF Walk sponsor for Juvenile Diabetes – 7,600 participants, $785,000 raised
- One-to-one individualized assessment and education visits and group class series for those already diagnosed (2018) – 106
- Diabetes self-management training, education and support visits for those already diagnosed (2018) – 1,978
- DiabetesAware Risk Assessments – 8 completed online with 4 at risk and 2 consults. Paper assessments provided at mobile pantries and events (2018)

Heart Disease & Stroke: Heart disease deaths and prevalence.

Goals:

- Increase education and awareness on the leading controllable risk factors associated with heart disease and stroke.
- Develop partnerships with local community organizations to assist in reaching populations that are at risk for heart disease and stroke.

Community Improvements:

- Decreased the diseases of the heart (age-adjusted death rate) from 191 in 2015 to 165 in 2018
- % of heart disease (heart attack, angina, coronary disease) decreased by 2% between 2015-2018
- The Quad Cities is faring better than the US average, and HP2020 goal for stroke (age-adjusted deaths) of 34. US – 37.1, HP2020 goal – 34.8

The following activities and initiatives from 2016-2018 that helped to support the goals for heart disease and stroke:

- River Bend Foodbank Mobile Pantries – 44 mobile pantries with 1,160 blood pressure screenings, 44% screening abnormal, and 82 referred for follow-up

- John Deere Global Communities Initiative (largely Hispanic neighborhood of Floreciente) -
    - Education classes on healthy eating and exercise at Boys & Girls Club
    - Focus group meeting to determine health needs important to community
    - Health education to community at Mercado on Fifth
    - Habitat for Humanity healthy home class
    - Children from Boys & Girls Club participated in 2017 Heart Walk
    - Wrote and awarded a grant from Global Communities to establish a bilingual Community Health Advocate/CNA, and hired for the position (start date Q1 2019).
- Empowerment Network (2017) – Discussed opportunities to establish a mental health outreach group aimed at partnering with NAMI to provide education
- Quad Cities Alliance for Immigrants & Refugees (QC Air) and World Relief –
    - Developed community health language resource card to assist with language barriers and reduce time to request interpreter for care
    - Helped create documents to assist immigrants and refugees understand appropriate use of healthcare services (PCP, Express Care, ED)
    - Met with Burmese community leader to learn challenges when accessing care, which led to hospital development of diversity/cultural awareness work
    - Hosted focus group to identify major issues, perceptions and assets within the immigrant & refugee communities related to health and quality of life – 12 attended
    - Hosted focus group to identify labor and delivery barriers
- American Heart Association Heart Walk – 2,700-3,500 participants each year with $510,000 raised over the three years
- Community education on heart disease – 50 events with 14,000 participants, 30 stroke support group sessions with an average of 13 participants per session
- Cardiac Comeback Club education and support group pertaining to cardiovascular health (2016 & 2017) – 12 sessions with 165 participants
- New Heart to Heart Community Education Series with focus on cardiovascular health, disease prevention & nutrition (2018 with addition sessions scheduled through 2019) – 1 session with 140 participants
- HeartAware & StrokeAware risk assessments – 1,209 assessments, 682 at risk, 1,284 consults
- Stroke Retreat for survivors & caregivers (2018) – 45 participants
- Other health fairs and blood pressure screenings (2018) – 6 events with 2,800 attendees

Mental Health/Behavioral Health: Fair/poor mental health, symptoms of chronic depression, suicide deaths, and fair/poor ease of obtaining mental health services.

Goals:

- Expand access through the integration of primary and behavioral health services.
- Develop partnerships with public/private entities to address mental health challenges beyond the hospital walls.
- Expand the behavioral health service continuum to meet community needs.
- Increase training and education regarding mental health resources and information.

Community Improvements:

- Suicide (age-adjusted death rate) decreased – 2015 = 16.2%, 2018 = 15.7%
- 91% of those diagnosed depression are seeking help in the community vs 87% throughout the U.S.

The following activities and initiatives over the three-year period helped to support the goals for mental and behavioral health:

- Integrate behavioral health professionals into Community Health Care and UnityPoint Clinics – 46 sites
- Integrated behavioral health professionals into five school districts – 37 schools
- Expand behavioral health services in the Rock Island County jail system – 1,829 served in the jail
- Establish priorities of the Quad Cities Community Mental Health Coalition to address access to mental health services –
    - Finalized priorities to increase mental health access for youth, adults and veterans
    - United Way developed the Mental Health Consortium bringing together UnityPoint Health – Trinity, Robert Young Center, Genesis Health System, the Quad City Health Initiative and Scott County law enforcement
    - Warm Line, a peer-run listening and support line established
    - Planned adult mental first aid training for 2019
- Research and implement strategies for mental health provider recruitment – 4 (2016), 5 (2017) & 4 (2018) providers in recruitment stage
- Partner with entities in the Eastern Iowa region to increase access for patients in Iowa – 3,483 patients served by crisis line and telehealth crisis

- Develop and implement plan to train primary providers on mental health screening tools and resources –
    - PCMH workgroup reviewed tools for primary care
    - UnityPoint Health Clinics are using PHQ 2/PHQ 9 to identify symptoms of depression
- Continue to utilize Trinity's Crisis Stabilization Unit as a valuable tool to quickly assess patients entering the ED and de-escalate behavioral health patients in crisis – patients reconnected to the community (60% in 2016, n=2,420 patients assessed by CSU) (58% in 2017, n=6,015 patients assessed by CSU) (65% in 2018, n=5,963 patients assessed by CSY)
- Partner with National Alliance on Mental Illness (NAMI) to increase education and awareness of mental health challenges – 9 events with 7,700 participants, including the NAMI Walk, which raised $111,390 in 2018
- Continue to increase enrollments in coordinated care programs by partnering with managed care and other organizations – 6,819 total enrollees
- Provide education and awareness surrounding drug and alcohol abuse in youth, prescription drug abuse, and prevention training (2018) –
    - 9 programs for youth including Drug-Free Youth in Touch, Too Good for Drugs, Aggression Replacement Training, Youth Service Bureau, CADS Insight Room, Esteem Teams, After School/Summer Outreach, Prescription Drug Curriculum, Youth Summer Program – 2,256 children, more than 1,638 hours
    - Merchant Alcohol Training – 161 participants, 40 hours, year-long program
    - Prescription Drug Toolkit – 124 participants, 50 hours, year-long program
    - Participated in Scott County Advisory Council
    - 9 prevention/presentations for youth – 1,211 students
    - 5 health and safety fairs – 4,435 attended
    - Entered partnership with EverFi to provide free Prescription Drug Safety Program to schools in Rock Island, Scott, Henry, and Muscatine County

Cancer: Cancer deaths, incidence, prevalence (skin and non-skin), and female breast cancer screening.

Goals:

- Address community needs by increasing cancer screenings and improving the potential for early cancer intervention.
- Provide education to promote avoidance of dangerous activities that could lead to cancer.

Community Improvements:

- Decreased in the age-adjusted death rate for cancer – 2015 = 183, 2018 = 170
- Increased the % Women 50-74 received mammogram in the past 2 years by 9%
- Decreased female breast cancer incidence per 100,000 by 12.6%

The following activities and initiatives over the three-year period helped to support the goals for cancer:

- Pink Pass Breast Cancer Awareness Program – 254 events, 7,922 people reached with health education and vouchers for mammograms
- Skin Cancer Awareness –
    - In 2017, a community outreach coordinator was hired to promote preventative cancer screenings/awareness
    - In 2018, prevention education was provided at 43 health fairs, mobile pantries and events with 3,164 people reached
- Lung cancer screening for individuals at high risk – 1,683 people screened, 24 lung cancers identified
- Cancer-themed events – 5,000 attended Komen Race for the Cure each year, 650 attended Stylin' Against Breast Cancer in 2016, and 100 attended Komen Butterfly Brunch in both 2017 and 2018
- River Bend Foodbank Mobile Pantries – 13 pantries, with 1,100 attendees received information on tobacco and cancer
- Certify a staff member to provide smoking cessation education –
    - In 2018, the staff member was trained and became a certified smoking cessation educator.
    - 1 class was offered, which had 2 participants who were still not smoking at end of 2018.

Access to Healthcare: Barriers to access (inconvenient office hours, cost of prescriptions, appointment availability, finding a physician, lack of transportation, cost of child's physician visit), primary care physician ratio, specific source of ongoing medical care.

Goals:

- Expand provider access & availability of care in the community.
- Improve the availability of affordable prescription drugs.

Community Improvements:

- % of community that have a particular place for medical care increased from 83% in 2015 to 86% in 2018
- Primary Care Doctors per 100,000 increased from 66.4 in 2015 to 75.3 in 2018

The following activities and initiatives over the three-year period helped to support the goals for access to healthcare:

- Continue efforts surrounding physician recruitment to increase the number of primary care providers within the region – 18 primary care sites, 40 physicians, 23 advanced practitioners
- Implementation of 340b program, improving access to necessary medications for patients in need –
    - 2016 – Allowed Trinity access to discounted drugs, saving an estimated $1.4 million in Rock Island and Moline
    - 2017 – Access to savings of $7,002,487 in discounted drugs in Rock Island, Moline and Bettendorf, and provided $2,046 in discharge prescription assistance
    - 2018 – Provided $15,964 in discharge prescription assistance for 354 patients
- Established a Military Advisory Committee to address access and barriers to care for active duty military and veterans in the Quad Cities community –
    - Committee created in April 2016 with charter approved in May and SWAT analysis completed to understand opportunities
    - In 2017,
        - 22 member committee developed a military resource guide to connect veterans to resources
        - Collaborated with the Rock Island Arsenal to provide 15 educational programs for military and civilian staff
        - Provided free flu shots to 14 veterans at the QC Veterans Outreach Center
    - In 2018,
        - Received the Community Veterans Engagement Board (CVEB) designation from the VA, the first healthcare system in the country to form a CVEB
        - Developed a master plan for the first in the region Veterans Experience Action Center event to be held in 2019
        - Collaborated with the Rock Island Arsenal on 13 education programs
        - Provided 22 free flu shots, 28 blood pressure screenings to veterans, and 35 hygiene kits to homeless veterans in the community

  - Also in 2018, the Trinity Health Foundation established a Military & Veteran Services Fund to support critical services, education and outreach for veterans, military members and families - $23,000 was raised through events, employee giving and a grant.

- Explore grant opportunities to increase education on and access to healthcare services –
  - Explored a number of grant opportunities in 2016 & 2017
  - Received two grants in 2018:
    - Hired a bilingual Community Health Advocate/CNA for a largely Hispanic neighborhood to provide health education and access to healthcare services. Start date Q1 2019
    - Hire onsite nurse at Christian Care to provide consultative and basic medical services for people experiencing homelessness and/or poverty (234 contacts with 26 referrals)
- Continue efforts to increase the enrollment of self-pay, non-insured patients/consumers, with an emphasis on education – 2,451 new enrollments, 1,448 ED referrals
- Improve access and availability of translation services for patients (totals in minutes) 2017 & 2018 – Video remote interpreting total = 69,373, over-the-phone interpreting = 51,518, video report interpreting (audio) = 46,853
- Parish Nursing:
  - 51,743 individual contacts
  - 1,603 educational program classes with 16,284 participants
  - 1,069 support groups with 7,195 participants
  - 11,777 blood pressure screenings with individuals
  - 1,217 abnormal readings 2016 & 2017
  - 2018
    - 100 foot clinics with 644 people
    - 185 new doctor referrals
    - 148 referrals to walk-in clinics
    - 130 referrals to ED
    - 7 new RNs/Health Advocates