



Lead/Deadwood Regional Hospital Community Health Implementation Plan

FY 2017 - 2019

Released November 2016

Lead/Deadwood Regional Hospital – Regional Health

Executive Letter

Lead/Deadwood Regional Hospital & Lead/Deadwood Market recognizes and honors the purpose of Regional Health, “Helping our Communities and Patients Live Well.” As we honor that purpose, we work diligently to ensure each and every patient, family member and visitor has the best experience possible. The Community Health Needs Assessment (CHNA) assists us in prioritizing important work to achieve our vision “To be the best health care system in America”.

Our most current CHNA was conducted in FY16. The assessment process helped to identify several opportunities for improvement. The Lead/Deadwood Regional Hospital and Lead/Deadwood Market Advisory Council along with leadership worked hard to determine our best opportunity to serve our communities. Following discussions and review it was decided that Access to Healthcare Services, Mental Health, and Wellness would be our main focus. The goals for each priority are as follows:

- **Access to Healthcare Services:** *Evaluate needs and gaps to develop strategies to support timely access to primary care, specialty care, diagnostic, and inpatient services.*
- **Mental Health:** *Increase access and awareness of culturally appropriate mental health resources and education.*
- **Wellness:** *Explore, develop, and support opportunities that will positively impact the health of our communities.*

The Lead/Deadwood Regional Hospital & Lead/Deadwood Market looks forward to working with our communities during the next three years (FY17-19).



Mark Schmidt
President

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About Lead/Deadwood Regional Hospital

Lead/Deadwood Regional Hospital (LDRH), located in Deadwood, South Dakota, is owned and operated by Regional Health, a tax exempt, community-based organization that is committed to preserving and strengthening health care for the people in the region. The purpose of Regional Health is *helping patients and communities live well*. Regional Health and its affiliates provide health care services to the 380,000 people who live in the Black Hills of South Dakota and the surrounding region, as well as thousands of visitors each year. Regional Health serves a 38-county region comprised of western South Dakota, southeastern Montana, northeastern Wyoming, southwestern North Dakota and northwestern Nebraska.

LDRH is one of Regional Health's four rural hospitals; three of which are designated Critical Access Hospitals. The hospital employs 80 team members (clinical and non-clinical) and has an inpatient bed capacity of 18.

LDRH is dedicated to addressing its outreach objectives of serving the entire community, not only those who come through its doors. Building on a long tradition of service, the hospital utilizes its strengths alongside those of other well-established community partners. This strategy allows the hospital to better understand and reach the most vulnerable sectors of the community, while meeting pressing health care needs. The goal is to improve the community's health status by empowering citizens to make healthy life choices.

Community Health Improvement Overview

In November 2015, Regional Health contracted with Professional Research Consultants (PRC) to conduct Community Health Needs Assessments (CHNA) for each of its hospital communities including the Lead/Deadwood Regional Hospital service area. The CHNA is a systematic, data-driven approach to determining the health status, behaviors, and needs of residents. The assessment provides information so that communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status.

Community Health Needs Assessment Methodology

The CHNA report incorporates data from both quantitative and qualitative sources. Quantitative data input includes primary research (the PRC Community Health Survey) and secondary research (vital statistics and other existing health-related data); these quantitative components allow for trending and comparison to benchmark data at the state and national levels. Qualitative data input includes primary research gathered through an Online Key Informant Survey.

While this assessment is quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all of the community's health needs.

Identified Areas of Opportunity

The following “areas of opportunity” represent the significant health needs of the community, based on the information gathered through Lead/Deadwood Regional Hospital's CHNA and the guidelines set forth in Healthy People 2020. From these data, opportunities for health improvement exist in the area with regard to the following health issues (see the complete CHNA report for additional health indicators).

Access to Healthcare Services	<ul style="list-style-type: none">• Barriers to Access<ul style="list-style-type: none">○ Finding a Physician
Cancer	<ul style="list-style-type: none">• Female Breast Cancer Screening• Cervical Cancer Screening• Cancer is the #1 leading cause of death
Dementia, Alzheimer's Disease	<ul style="list-style-type: none">• Alzheimer's Disease Deaths
Diabetes	<ul style="list-style-type: none">• <i>Ranked as a top concern in the Online Key Informant Survey</i>
Heart Disease & Stroke	<ul style="list-style-type: none">• Heart disease is the #1 leading cause of death; stroke is the #6 leading cause of death
Infant Health & Family Planning	<ul style="list-style-type: none">• Teen Births
Injury & Violence	<ul style="list-style-type: none">• Unintentional Injury Deaths• Seat Belt Usage (Adults)• Firearm-Related Deaths• Firearm Prevalence<ul style="list-style-type: none">○ Including in Homes with Children

Mental Health	<ul style="list-style-type: none"> • “Fair/Poor” Mental Health • Suicide Deaths • <i>Ranked as a top concern in the Online Key Informant Survey</i>
Nutrition, Physical Activity & Weight	<ul style="list-style-type: none"> • Fruit/Vegetable Consumption • Low Food Access • Medical Advice on Nutrition • Overweight & Obesity (Adults) • Medical Advice on Weight • <i>Ranked as a top concern in the Online Key Informant Survey</i>
Oral Health	<ul style="list-style-type: none"> • Dental Insurance Coverage
Respiratory Diseases	<ul style="list-style-type: none"> • Chronic Lower Respiratory Disease (CLRD) Deaths • Flu Vaccination (65+)
Sexually Transmitted Diseases	<ul style="list-style-type: none"> • Gonorrhea Incidence • Chlamydia Incidence • Condom Use
Substance Abuse	<ul style="list-style-type: none"> • Cirrhosis/Liver Disease Deaths • Seeking Help for Alcohol/Drug Issues • <i>Ranked as a top concern in the Online Key Informant Survey</i>

Areas of Opportunity Not Chosen for Action

In acknowledging the wide range of priority health issues revealed through the CHNA process, Lead/Deadwood Regional Hospital determined it could only focus on those which it deemed most pressing, most under-addressed, and most within our ability to influence.

Health Priorities Not Chosen for Action	Reason
Cancer	<i>This issue will not be addressed as a primary need, but will be impacted through the access to healthcare services priority. Awareness activities through the American Cancer Society also currently exist in the community and surrounding area.</i>

Dementia, Including Alzheimer's Disease	<i>This issue will not be addressed as a primary need, but will be impacted through the mental health priority. In addition, there are local licensed skilled nursing facilities providing services to the elderly of the community.</i>
Diabetes	<i>This issue will not be addressed as a primary need, but will be impacted through the Nutrition, Physical Activity and Weight priority.</i>
Heart Disease & Stroke	<i>This issue will not be addressed as a primary need, but will be impacted through the Nutrition, Physical Activity and Weight priority.</i>
Infant health and Family Planning	<i>Data from the CHNA revealed that teen births were of greatest concern in this area in the community. However, limited resources and lower priority excluded this as an area chosen for action.</i>
Injury & violence	<i>Limited resources and lower priority excluded this as an area chosen for action.</i>
Oral Health	<i>LDRH has limited resources, services and expertise available to address oral health and access to oral health insurance. Other community organizations have infrastructure and programs in place to better meet this need. Limited resources excluded this as an area chosen for action.</i>
Respiratory Diseases	<i>LDRH believes this priority area falls more within the purview of other community resources, including outpatient clinical settings.</i>
Sexually Transmitted Diseases	<i>This issue will not be addressed as a primary need, but will be impacted through the access to healthcare services priority.</i>
Substance Abuse	<i>This issue will not be addressed as a primary need, but will be impacted through the mental health priority.</i>

Health Priorities and Strategies July 1, 2016 – June 30, 2019

Lead/Deadwood Regional Hospital's Advisory Council reviewed the areas of opportunity from the 2015 CHNA report. Utilizing input from the Council, the Regional Health Network Board of Directors approved the priority areas included in this Community Health Implementation Plan (CHIP). The focus of the hospital's community-based efforts and resources for FY2017-FY2019 is centered on Access to Healthcare Services, Mental Health, and Wellness (Nutrition, Physical Activity, and Weight).

Workgroups comprised of caregivers representing each of the communities served by Regional Health developed the goals, objectives, and strategies for each of the selected priority areas from across the system. The work listed in this plan utilizes a system-based approach along with each community's involvement and input.

Lead/Deadwood Regional Hospital and Regional Health commit to providing the resources necessary to carry out the goals, objectives, and strategies listed in this Community Health Implementation Plan. These resources include leadership and caregiver time and knowledge, financial support, and planning and reporting assistance.



Priority 1: Access to Healthcare Services

GOAL: Evaluate needs and gaps to develop strategies to support timely access to primary care, specialty care, diagnostic, and inpatient services.

OBJECTIVE 1: IMPROVE PATIENT ACCESS FOR PRIMARY CARE, SPECIALISTS, AND DIAGNOSTIC PROCEDURES

Anticipated Impact: Improved patient satisfaction, decrease in patient wait times to see a provider or have a service

STRATEGIES:

Optimize scheduling rules, templates, and processes

Standardize scheduling practices

Develop specialist referral criteria

PARTNERS

**ALL WOMEN COUNT SD
REGIONAL HEALTH**

OBJECTIVE 2: DEVELOP AND IMPLEMENT A COMMUNITY-BASED POPULATION HEALTH PROGRAM

Anticipated Impact: Patients better directed to appropriate level of care, improved management of resources, and reduced Emergency Department utilization among target population

STRATEGIES:

Build Population Health Infrastructure

Develop Primary Case Management program

Provide education and promotion concerning use of advanced directives

OBJECTIVE 3: INVESTIGATE, PLAN, BUILD AND LAUNCH FIRST PHASE OF A DIGITAL HEALTH STRATEGY

Anticipated Impact: Increased access for patients through digital technology, including access to specialty care

STRATEGIES:

Determine organizational and community needs and solutions options

Develop business plan for the digital health strategy

OBJECTIVE 4: SUPPORT ACCESS TO PRIMARY AND PREVENTIVE CARE FOR VULNERABLE POPULATIONS.

Anticipated Impact: Increase number of patients screened.

STRATEGIES:

Increase support of All Women Count SD program

DID YOU KNOW...

According to the 2015 CHNA, finding a physician was one of the major issues identified under access to healthcare services.





Priority 2: Mental Health

GOAL: Increase access and awareness of culturally appropriate mental health resources and education.

OBJECTIVE 1: REDUCE STIGMA OF MENTAL HEALTH AND INCREASE PUBLIC AND PROVIDER AWARENESS OF AVAILABLE MENTAL HEALTH RESOURCES AVAILABLE IN THEIR COMMUNITY.

Anticipated Impact: Better understanding of services available, increased website traffic, increased use of 211 Helpline for mental health

STRATEGIES:

Partner with 211 Helpline to develop a comprehensive list of mental health resources in the service area

Create a community mental health asset map

Develop publicity campaign in partnership with community to reduce stigma of mental health

OBJECTIVE 2: IMPROVE MENTAL HEALTH SCREENING PROCESS ACROSS THE BLACK HILLS REGION (STARTING WITH REGIONAL HEALTH SYSTEM)

Anticipated Impact: More people seeking services for mental health related issues

STRATEGIES:

Develop education for providers on importance of screening process

Standardize mental health screening tool

Standardize process for referrals of patients who screen positive

Develop case management program for mental health

PARTNERS

**REGIONAL HEALTH BEHAVIORAL
HEALTH CENTER**

211 HELPLINE

**COMMUNITY SERVICES
CONNECTION**

**BEHAVIOR MANAGEMENT
SYSTEM**

OBJECTIVE 3: EXPLORE ADDING MENTAL HEALTH ACCESS INTO PRIMARY CARE CLINICS

Anticipated Impact: More access for vulnerable populations, improved productivity in primary care, improved outcomes

STRATEGIES:

Build business case

Explore other access solutions (telehealth, mobile)

DID YOU KNOW...

The age-adjusted suicide rate for the LDRH service area was 18.4%, significantly higher than the national rate of 12.5%

- 2015 LDRH CHNA





Priority 3: Wellness (Nutrition, Physical Activity, and Weight)

Goal: Explore, develop, and support opportunities that will positively impact the health of our communities.

OBJECTIVE 1: INCREASE COMMUNITY AWARENESS OF CHRONIC DISEASE PREVENTION AND MANAGEMENT PROGRAMS THAT PROMOTE HEALTHY LIFESTYLE CHOICES

Anticipated Impact: Increased participation in health promotion programs and improved health outcomes

STRATEGIES:

- Marketing campaign for existing health promotion programs
- Enhance access to the Regional Health Diabetes Prevention Program
- Enhance access to the Better Choices Better Health (BCBH) Program
- Explore partnership with local Native American agency (non-healthcare)

OBJECTIVE 2: ENHANCE ACCESS TO ORGANIZED WELL-BEING PROGRAMS AND ACTIVITIES IN THE COMMUNITY

Anticipated Impact: Increase in referrals to programs, increased awareness of health risks, increased programming, improved health outcomes

STRATEGIES:

- Expand Regional Health Employee Well-being program to offer consulting to organizations in the Rapid City and Spearfish Communities by the end of 2017 and Lead/Deadwood, Custer, and Sturgis communities by end of 2018
- Live Well Black Hills resource support
- Develop toolkit of disease prevention and disease management resources for providers (including referral process)

PARTNERS

**REGIONAL HEALTH DIABETES
PREVENTION PROGRAM**

**BETTER CHOICES BETTER HEALTH
LIVE WELL BLACK HILLS**

Adoption of Community Health Implementation Plan

On September 27, 2016, the Regional Health Network Board of Directors met and discussed this plan for addressing the selected community health priorities identified through the Community Health Needs Assessment process. Upon review, the Board approved this plan for Lead/Deadwood Regional Hospital and the related resources required to achieve the goals, objectives, and strategies outlined within that work to meet the health needs of the community.



Regional Health is an integrated health care system with the purpose of helping patients and communities live well. The organization, with headquarters in Rapid City, S.D., provides community-based health care in more than 20 communities in two states and 32 specialty areas of medicine. As the largest private employer in western South Dakota, Regional Health is comprised of five hospitals, 24 clinic locations and employs nearly 5,000 physicians and caregivers. Regional Health is committed to the future of medicine, with medical training partnerships, a medical residency program, and more than 130 active research studies.

Regional Health System – A Leader in Health Care of the Black Hills

OUR PURPOSE, VISION AND VALUES

Our Purpose

Helping Patients and Communities Live Well

Our Vision

We aspire to be the best healthcare system in America.

Our Values

- Courage
- Integrity
- Compassion
- Innovation
- Mutual respect

Our Priorities



Patient & Family
EXPERIENCE



Culture of Safety
& Quality CARE



Physician & Caregiver
EMPOWERMENT



Financial
STEWARDSHIP



Community
STEWARDSHIP

Acknowledgements

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▼ REGIONAL HEALTH COMMUNITY HEALTH ADVISORY COMMITTEE

- Dr. David Klocke, Chief Medical Officer, Regional Health (RH)
- Laura Wightman, Chief Nursing Officer, RH
- Mark Schulte, President, Sturgis Market
- Veronica Schmidt, President, Custer Market
- Larry Veitz, President, Spearfish Market
- Mark Schmidt, President, Lead/Deadwood Market
- John Pierce, Vice President, Rapid City Market
- Michael Latour, Vice President, Rapid City Market
- Jeanne Galbraith, Vice President Quality, Safety, and Risk Management, RH
- Doris Fritts, Executive Director, Same Day Surgery Center (SDSC)
- Jamie Heymans, Community Health Specialist, RH

▼ ACCESS TO HEALTH CARE WORKGROUP

- Carol Opgenorth, VP Clinical Optimization - RH
- Marla Venjohn, Director, On Call & Transfer Center- Rapid City Regional Hospital (RCRH)
- Mike Delano, Director Ambulatory – Custer Regional Hospital (CRH)
- Traci Matthew, Director Ambulatory- Lead/Deadwood Regional Hospital (LDRH)
- Sara Snow, Patient Care Coordinator- Sturgis Regional Hospital (STRH)
- Angie Leonard, Senior Director Ambulatory- Spearfish Regional Hospital (SPRH)
- Lana Grout, Director Ambulatory- SPRH Queen City Regional Medical Clinic
- Doris Fritts, Executive Director - SDSC
- Mary Beth McLellan, Manager Med Clinical Ops –Family Residency Clinic

- Angie Pfleger, Manager Ambulatory Clinic –Aspen Regional Medical Clinic
- Jamie Madden, Senior Director Medical Imaging Service – RCRH

▼ MENTAL HEALTH WORKGROUP

- Lori Wightman, Chief Nursing Officer - RH
- Becky Martinez, RN - CRH
- Terry Trucano, Social Worker MSW - LDRH
- Carrie Bossman, Social Worker MSW - STRH
- Angie Leonard, Senior Director Ambulatory - SPRH
- Lana Grout, Director Ambulatory - SPRH
- Doris Fritts, Executive Director - SDSC
- Heath Ruml, Surgical Technician - SDSC
- Janel Brown, Director Behavioral Health - RCRH
- Kathy Hill, Accredited Risk Management Director – RH
- Jessica Olson, Executive Director – Wellfully

▼ WELLNESS WORKGROUP

- Theresa Ferdinand, Manager Employee Health Well Being - RH
- Lacey Burrell, Clinical Dietitian - CRH
- Michelle Evans, Exercise Physiologist - LDRH
- Amber Kennedy, Physical Therapist - STRH
- Deb Winter, Program Manager Diabetes Education – SPRH
- Kim Hepper, Clinical Dietitian - SPRH
- Doris Fritts, Executive Director - SDSC
- Donna Riley, Program Manager Diabetes Education - RCRH
- Erika Lebeau, Weight Management Team Leader- RCRH
- Jim Rix, Manager Physical Therapy – RCRH