



# Community Health Needs Assessment Implementation Plan 2020-2022



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## ABOUT MRH

Moab Regional Hospital (MRH) is a 17-bed, independent, not-for-profit, Critical Access Hospital and Level IV Trauma Center located in Moab, Utah. MRH serves nearly 10,000 residents of rural southeast Utah, primarily those in Grand County, but also others in neighboring counties of San Juan and Emery. MRH also provides medical care to the estimated 3 million tourists and visitors who visit the region each year.

Moab Regional Hospital provides a full range of healthcare services, including behavioral health, emergency care, family medicine, general surgical services, hospice care, imaging and radiology services, infusion services, inpatient care, laboratory services, obstetrics, orthopedics, and wound care. MRH offers a variety of visiting specialties, including, podiatry, dermatology, plastic surgery, neurology, gynecology, and urology. MRH offers financial aid to patients with or without health insurance and provided nearly \$6 million in uncompensated care to the community in 2019.

As a Level IV Trauma Center, Moab Regional Hospital stabilizes patients who are experiencing high level trauma and transports them to larger trauma facilities. MRH works with several air transport agencies for helicopter transportation and also works closely with Grand County Emergency Medical Services for ground transports.

### Mission Statement

Our dedicated team puts the patient first, delivers quality cost-effective healthcare, and promotes wellness to all we serve.

### Core Values

Compassion—Honesty—Excellence

### By the Numbers

DESCRIPTION	2017	2018	2019
Primary Care Visits	18,114	14,780	15,666
Urgent Care Visits	1,158	4,281	5,495
ER Visits	6,365	5,843	5,426
Mental Health/Addiction Visits	780	832	1,076
Specialty Clinic Visits	2,280	2,226	2,443
Uncompensated Care	\$4,552,652	\$6,649,360	\$5,820,255

## EXPLANATION OF ASSESSMENT

Nonprofit hospitals are required to conduct a Community Health Needs Assessment (CHNA) every three years as a requirement of The Patient Protection and Affordable Care Act, signed into law in March 2010. After analyzing needs of the community, the hospital must develop an implementation plan to address those needs.

Results from Moab Regional Hospital's CHNA have been analyzed and will be used to create an action plan for the purposes of:

- Improving overall community health
- Promoting collaboration and partnerships in the area to address top community health needs
- Improving communication across health sectors
- Creating awareness of the comprehensive, high quality health care services available locally
- Reinforcing the commitment to the people of Moab and the surrounding area that their health is the hospital's top priority

## COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Moab Regional Hospital contracted with The National Rural Health Resource Center located in Duluth, Minnesota to perform a Community Health Needs Assessment. The assessment was administered in order to enable Moab Regional Hospital to identify and understand the health needs of the community. The assessment included the development and distribution of mail surveys, focus groups, and secondary data analysis.

Mail Survey - A survey was sent to 800 households in Moab Regional Hospital's service area to obtain a random, stratified sample. 129 surveys were returned at a 16% response rate with a 95% confidence interval +/- 7.91%.

Focus Groups - 33 individuals were interviewed in 5 separate focus groups comprised of key community stakeholders such as healthcare providers, community leaders, seniors, young parents, and the Hispanic population.

Secondary Data Analysis - Data was collected from the Southeastern Utah Health Department and the patient population of Moab Regional Hospital was compared to other communities throughout the state. An analysis was performed by The National Rural Health Resource Center with recommendations for action plan development and implementation.

After the Community Health Needs Assessment was administered and the data analysis was performed, The National Rural Health Resource Center presented results and recommendations to the leadership of MRH. Community health priorities for Moab Regional Hospital were selected and implementation strategies were developed.

## KEY FINDINGS OF THE ASSESSMENT

The following key findings were highlighted by the CHNA report that was prepared by the National Rural Health Resource Center in December 2019.

### Special Points of Interest:

- Emergency/Trauma Care was ranked “Extremely Important” to the community followed by Urgent Care and Primary Care Services
- Overall patient satisfaction at MRH is rated 3.49 on a scale of 1-4, where 4 is extremely satisfied
- 90% of respondents rate the general health of their community as “somewhat healthy” or “healthy”
- 43% of survey respondents have had difficulty paying a medical bill

### Top Community Health Concerns:

1. Ability to pay/high cost of healthcare and prescriptions (3.66 on a scale of 1-4, 4 being extremely concerned)
2. Lack of mental health and addiction services
3. Illegal and prescription drug use/underage alcohol, tobacco, and drug use (3.35 on a scale of 1-4, 4 being extremely concerned)
4. Lack of/availability of specialty care
5. Lack of primary care providers/long wait times

### Top Priorities for Improving Community Access to Healthcare \*:

1. More types of specialists (indicated by 49% of respondents)
2. More primary care providers (indicated by 48% of respondents)
3. Expanded primary care appointment times (indicated by 45% of respondents)

*\* Removal of cost barrier was the number one chosen priority in both 2013 and 2016 CHNA surveys. However, removal of cost barrier was not listed as an option on the 2019 survey.*

### Barriers to Accessing Healthcare:

- Uncertainty regarding services available
- Cost of services/fear of incurring debt
- Uncertainty about opportunities to receive financial support and assistance
- Long waits for appointments

### Ideas for Improving Access to Care:

- More providers (primary care, mental health, specialty)
- Shorter wait times for appointments (the top reason respondents delayed getting health care services was because “appointment wait was too long”)

## PRIORITY SELECTION

The Operations Council of Moab Regional Hospital, a hospital leadership group comprised of physicians, patient care directors, and hospital executives, reviewed the results of the 2019 CHNA survey and focus group data. After reviewing current resources of the hospital, activities the hospital is already doing and have the capacity to expand, and the feasibility of addressing specific health concerns, the council voted to prioritize the following health concerns that the hospital would directly address for the next three years:

1. Access to Mental and Behavioral Healthcare
2. Access to Primary Care Providers and Specialists
3. Remove Financial Barriers to Care

# IMPLEMENTATION PLAN

## Priority 1: Access to Mental and Behavioral Healthcare

- Recruit full-time psychiatrist
- Recruit full-time psychologist
- Recruit child psychiatrist
- Develop contract with Four Corners Community Behavioral Health to partner on services
- Add mid-level provider to work with psychiatrist for behavioral health patients
- Add Mental Health Program Nurse Coordinator
- Provide sponsorship to community organizations that are working to reduce risk factors and increase protective factors – e.g. Seekhaven, Grand Area Mentoring, Youth Garden Project
- Provide access to tele-mental health for all employees (TAVA)

## Priority 2: Access to Primary Care Providers and Specialists

- Recruit Family Practice Physician with OB
- Recruit two Nurses for triage and care coordination
- Add Out-Patient Nursing Services Program Manager and Oncology Navigator
- Implement ECHO Program
- Recruit additional visiting specialists, e.g. Cardiologist, Otolaryngologist (ENT), Pediatrician, Gerontologist
- Increase availability of higher acuity general surgery

## Priority 3: Reduce Financial Barriers to Care

- Employ two full-time Financial Navigators
- Implement monthly financial navigation meetings to review progress and monitor program success
- Reduce lab charges for top 7 most utilized lab tests to 10% below average of regional Critical Access Hospitals
- Expand low-cost blood draw range of service from one month to one year
- Continue community-based low-cost health screening, e.g. skin cancer screenings and sport's physical clinic for student athletes