

NESHOBA COUNTY GENERAL HOSPITAL

CHNA REPORT

2018

Approved by the Hospital's
Board of Trustees
Date _____

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CPAs & BUSINESS ADVISORS

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EXECUTIVE SUMMARY

The purpose of this Community Health Needs Assessment (CHNA) report is to provide Neshoba County General Hospital with a functioning tool to guide the hospital as it works to improve the health of the community it serves. In addition, the report meets the guidelines of the Internal Revenue Service.

The results of the CHNA will guide the development of Neshoba County General's community health improvement initiatives and implementation strategies. This is a report that may be used by many of the hospital's collaborative partners in the community.

The assessment was performed and the implementation strategies were created by the Community Health Needs Assessment Steering Committee with assistance from HORNE LLP. The assessment was conducted in April and May 2018.

The main input was provided by previous patients, employees and community representatives. An opportunity to offer input was made available to the entire community through word of mouth, plus a published and publicly available survey. Additional information came from public databases, reports, and publications by state and national agencies. An important opportunity for public input occurred when the hospital hosted an open Community Forum where great discussion was held regarding the overall health of our community.

In this report, which has been approved and supported by our Board of Trustees, we discuss the health priorities that we will focus on over the next year and a half. The CHNA report is available on the hospital's website <http://www.neshobageneral.com>, or a printed copy may be obtained from the hospital's administrative office.

We sincerely appreciate the opportunity to continue to be a part of this community. We look forward to working with you to improve the overall health of those we serve in Neshoba County.

Lee McCall, Chief Executive Officer
Neshoba County General Hospital

ABOUT THE HOSPITAL



Neshoba County General Hospital is a 48-bed hospital that is well trusted and has a dedication to excellence to its community. Philadelphia is home to Neshoba County General Hospital and Nursing Home where the medical staff offers a variety of specialties in the areas of family medicine, internal medicine, general surgery, radiology, hospitalist inpatient services, pediatrics, geriatric-psychiatry, ophthalmology, outpatient infusion, sleep center, pain management clinic, wound care center, 24-hour staffed emergency department. In 2017, Neshoba County General Hospital started providing oncology and hematology treatments in the new outpatient infusion center. Neshoba County General Hospital's mission is to advance the health of the community we serve by providing value-centered, excellent care.

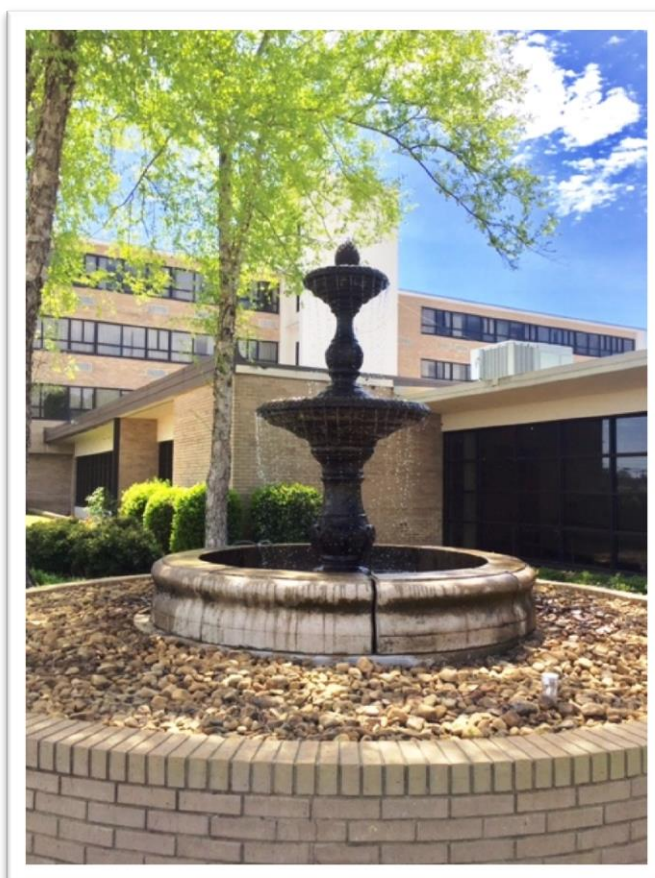
ABOUT THE HOSPITAL

Neshoba County General Hospital's emergency room is a designated Level IV Trauma Center. The hospital operates a paramedic-level ambulance service. Hospital service areas also include Geri-psych and telemetry (cardiac monitoring). Inpatient and scheduled outpatient surgeries are routinely performed.

Also, Neshoba County General Hospital offers coverage in clinical service areas such as:

- Laboratory
- Pain Management Clinic
- Nursing Home
- Radiology/Imaging
- Respiratory Department
- Therapy Services Department
- Workplace Wellness
- Wound Care Center
- Sleep Medicine
- Infusion/Oncology
- Behavioral Health/IOP

Neshoba participates in the Medicare and Medicaid programs. The hospital owns and operates 3 local clinics, including an Urgent Care Clinic, which opens 7 days per week for our patients' convenience. These clinics provide convenient access to family medicine, internal medicine, pediatric care, surgical services, and urgent care. Neshoba County Nursing Home has 140 skilled nursing home beds and a dedicated 20-bed Alzheimer's unit.



THE COMMUNITY HEALTH NEEDS ASSESSMENT

The Community Health Needs Assessment defines opportunities for health care improvement, creates a collaborative community environment to engage multiple change agents, and is an open and transparent process to listen and truly understand the health needs of Neshoba County. It also provides an opportunity for the hospital to identify valuable collaborative partners as we try to better serve the community and improve the health of our citizens.

COMMUNITY HEALTH NEEDS ASSESSMENT STEERING COMMITTEE

The hospital's administrator developed a Hospital Steering Committee responsible for the oversight, design, and implementation of the CHNA. It will continue to collect information, establish community relationships and oversee the budget and funding sources. Adhering to an agreed upon timeline, the Steering Committee will generate, prioritize, and select approaches to address community health needs.

The appointed members are listed below. Other members may serve on the Steering Committee as its work progresses.

Lee McCall - CEO

Scott Breazeale - Assistant Hospital
Administrator & CNO

Annette Watkins - Marketing
Director/PR

Mandy Cumberland - Client
Engagement Specialist

Julia Riley - Pediatric Physician

Leslie Fortenberry - Health
Information Supervisor

John Stephens - Coroner

Mille Smith - Neshoba County
Department of Health Office

Jan Williamson - Neshoba County
Hospital Auxiliary

Allison Boatner - Dietitian

Phyllis Manning - RN, BSN, Infection Preventionist/Employee Health

Harvin Hudson - Retired County Agent



THE COMMUNITY HEALTH NEEDS ASSESSMENT

COMMUNITY ENGAGEMENT AND TRANSPARENCY

We are pleased to share with our community the results of our Community Health Needs Assessment. The following pages offer a review of the strategic activities we believe will be the best strategies to respond to specific health needs we identified in our community. The report also highlights the updated key findings of the assessment. We hope you will take time to review the health needs of our community as the findings impact each and every citizen of our rural Mississippi community, and also, to review our action plan that has been formed in response to the needs identified in the community. Hopefully, you will find ways you can personally improve your own health and contribute to creating a healthier community.



DATA COLLECTION

Primary and secondary data was gathered, reviewed, and analyzed so that the most accurate information was available in determining the community's health needs and appropriate implementation process.

Primary Data: Primary data is data which is collected by the assessment team through conversations, telephone interviews, focus groups and community forums. This data was collected directly from the community and is the most current information available.

Secondary Data: Secondary data is data which is collected from sources outside the community and from sources other than the assessment team. This information has already been collected, collated, and analyzed. It provides an accurate look at the overall status of the community.

Secondary data sources included:

- The United States Census Bureau
- American Heart Association
- Mississippi State Department of Health
- Trust for America's Health
- Centers for Disease Control and Prevention
- Mississippi State Department of Health, Office of Health Data and Research
- US Department of Health & Human Services
- Mississippi Center for Obesity Research, University of Mississippi Medical Center
- Neshoba County General Hospital Records Department

COMMUNITY INPUT

COMMUNITY FOCUS GROUP

A community focus group was held at The Depot, a local community event venue, on Tuesday, April 24, 2018. The participants were invited through an open invitation to all residents in the community. In addition, they can act as a continuous conduit between the community and the leadership of the hospital. These participants contributed to a structured discussion which was impartially facilitated by a healthcare consultant from HORNE LLP of Ridgeland, Mississippi.

This focus group provided a deliberative venue for learning, trust-building, creative problem solving, and information gathering which ultimately served as a valuable resource for the CHNA Steering Committee as it developed the hospital's health priorities for the next 3 years. Since the focus group was based on open communication and critical deliberation, it will hopefully lead to improved community relations, trust and collaborative partnerships as the hospital strives to improve the overall health of the community.



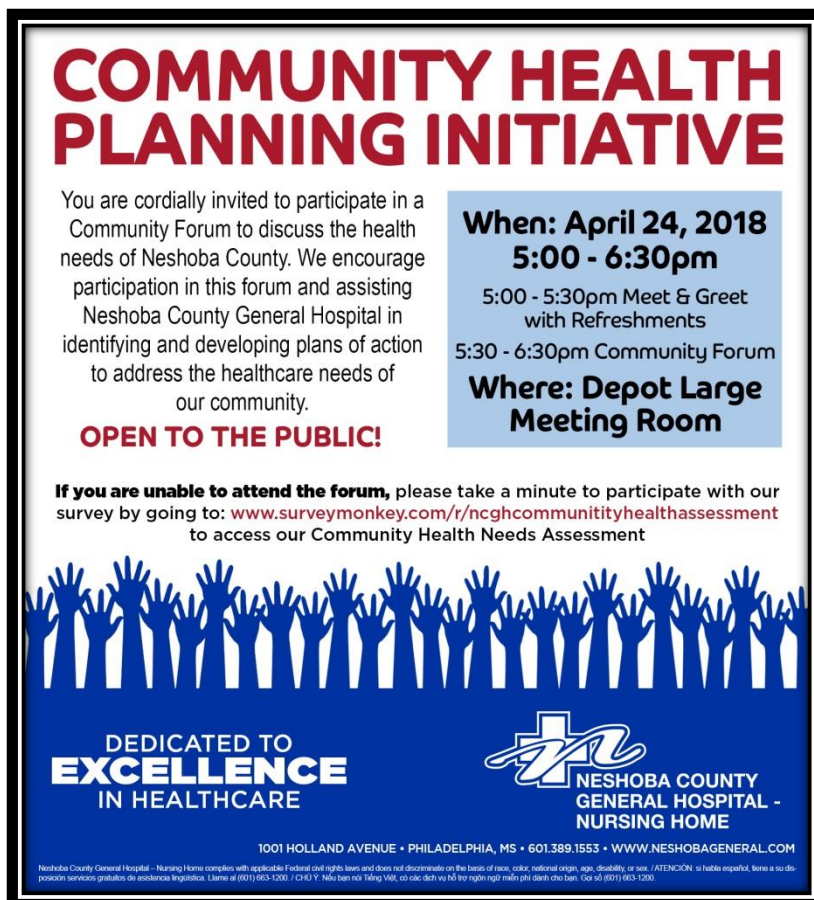
COMMUNITY INPUT

COMMUNITY SURVEY

Community health needs were identified by collecting and analyzing data and information from multiple quantitative and qualitative sources. Considering information from a variety of sources is important when assessing community health needs, to ensure the assessment captures a wide range of facts and perspectives and to assist in identifying the highest-priority health needs. One of the most important sources is to seek input directly from those we serve.

In order to provide citizens in our services area an opportunity to provide us their valuable insight, a Community Survey was published in the local paper and a Community Forum was held. The survey ran in the *Neshoba Democrat*. It was published on April 4, 2018 and April 11, 2018. The *Democrat* has a readership that covers Neshoba County and surrounding areas. If citizens of the community were unable to attend the Community Forum, Neshoba County General Hospital created an online survey

In addition, the survey was made available in public areas of the hospital and distributed through members of the CHNA Focus Group. Collection boxes were available in the hospital's lobbies.



COMMUNITY HEALTH PLANNING INITIATIVE

You are cordially invited to participate in a Community Forum to discuss the health needs of Neshoba County. We encourage participation in this forum and assisting Neshoba County General Hospital in identifying and developing plans of action to address the healthcare needs of our community.

OPEN TO THE PUBLIC!


When: April 24, 2018
5:00 - 6:30pm

5:00 - 5:30pm Meet & Greet with Refreshments
5:30 - 6:30pm Community Forum

Where: Depot Large Meeting Room

If you are unable to attend the forum, please take a minute to participate with our survey by going to: www.surveymonkey.com/r/ncghcommunityhealthassessment to access our Community Health Needs Assessment

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NESHOBACOUNTY GENERAL HOSPITAL - NURSING HOME

1001 HOLLAND AVENUE • PHILADELPHIA, MS • 601.389.1553 • WWW.NESHOBAGENERAL.COM

Neshoba County General Hospital - Nursing Home complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. / ATENCION: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (601) 693-1200. / CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (601) 693-1200.

COMMUNITY INPUT

INPUT FROM THE COMMUNITY

Through internal conversations at the hospital, one-on-one interviews with community leaders, and a hospital focus group, much information was gathered that was influential as the CHNA Steering Committee developed the hospital's implementation plan.

There were health needs identified that can be addressed and met by the hospital and others which must be referred to other local organizations or health agencies. Several health improvement opportunities were identified where the hospital will try to act as a community catalyst for action but are not part of the hospital's implementation plan.

The community felt that the adult population of the county was the segment that had the greatest health risks in regards to lifestyle impacted diseases such as heart disease, cancer, COPD/emphysema, stroke, and diabetes.

Poor nutritional habits are prevalent in the south, especially in rural communities. Therefore, it was felt that the communities in the service area could benefit from educational opportunities emphasizing healthy eating.

Suggestions included:

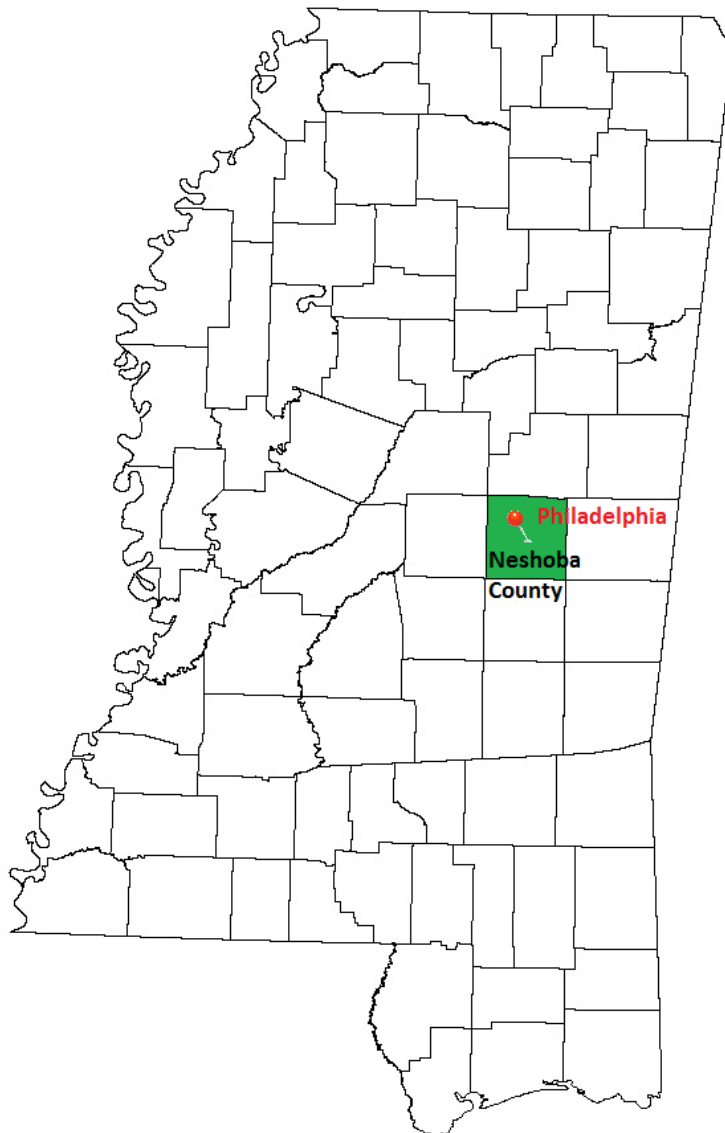
- Coordinating group-led health education classes with the local churches, school systems and other local health agencies
- Having more visible health and wellness activities in various locations throughout the county
- Creating a culture of community health and responsibility
- Developing an initiative with all county health providers to empower the community to take individual ownership in his or her health.

ABOUT THE COMMUNITY

Neshoba County is located in the central part of Mississippi. As of the 2010 census, the population was 29,676. Its county seat is Philadelphia. The county's name is derived from the Choctaw word Neshoba, which means "wolf." Neshoba County shares its northern border with Winston County, its southern border with Newton County, its western border with Leake County, and its eastern border with Kemper County. Its major highways include Mississippi Highways 15, 16, 19, and 21.

According to the U.S. Census Bureau, the county has a total area of 572 square miles, of which 570 square miles is land and 1.5 square miles (0.3%) is water.

Neshoba County, Mississippi



ABOUT THE COMMUNITY

DEMOGRAPHICS

Of the over 29,000 residents, 60.6% were White, 20.9% African American, 16.2% Native American, 0.3% Asian, 0.5% from some other race, 1.4% of two or more races, and 1.6% were Hispanic or Latino of any race.

As of the census of 2000, there were 28,684 people and the estimate for 2016 was 29,403. This represents a 3% increase in population from 2000. There are approximately 10,856 households, and 7,808 families residing in the county. The population density is 52.1 people per square mile.

Of the 10,856 households, 38.8% had children under the age of 18 living with them, 46.7% were married couples living together, 19.2% had a female householder with no husband present, and 28.1% were non-families. 25.2% of all households were made up of individuals and 10.8% had someone living alone who was 65 years of age or older. The average household size was 2.70 and the average family size was 3.21.

In the county, the population was spread out with 28.7% under the age of 18, 8.6% from 18 to 24, 24.4% from 25 to 44, 25.0% from 45 to 64, and 13.5% who were 65 years of age or older. The median age was 35.3 years. For every 100 females there were 92.1 males. For every 100 females age 18 and over, there were 89.1 males.

The median income for a household in the county was \$35,991, and the median income for a family was \$46,334. Males who worked full-time, year-round had a median income of \$40,833 versus \$27,483 for females. The per capita income for the county was \$19,030. About 19.8% of families and 22.3% of the population were below the poverty line, including 30.8% of those under age 18 and 15.0% of those 65 or over.



ABOUT THE COMMUNITY

PATIENT ORIGIN

Approximately 75% of the patients seen during calendar year 2016 reside in Neshoba County, Mississippi. Of these patients, 86% are from the Philadelphia and Choctaw areas while 14% are from the Union area. An additional 17% of patients originated from the adjacent counties of Winston, Leake, Kemper, and Newton. The remaining 8% of the patient population represents a variety of locations outside of the primary and secondary service areas.

SERVICE AREA

Neshoba County General Hospital defines its primary service area as the two main zip codes in Neshoba County which are 39350 (Philadelphia) and 39365 (Union). In addition, Neshoba County General Hospital provides care for patients in the surrounding counties as a secondary service area. Neshoba County General Hospital's catchment area includes the entire Neshoba County equating to 30,000 plus an approximately 15,000 from neighboring communities.



CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

All rural areas in the U.S. are unique with extensive geographic and economic variations. When compared to urban populations however, rural populations are often characterized as being older and less educated; more likely to be covered by public health insurance; having higher rates of poverty, chronic disease, suicide, deaths from unintentional injuries and motor vehicle accidents; having little or no access to transportation; and having limited economic diversity. All of these issues create challenges and opportunities to improve the health of those living in the rural South, and they play a role in understanding some of the underlying causes associated with issues related to the rural health workforce, health services, and special populations. These unique population and health issues were taken into consideration as the Steering Committee evaluated health and wellness opportunities to address. Some can be approached through initiatives of the hospital and others will best be approached through a cooperative effort of local government, state agencies, churches, volunteer programs and the hospital.



CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

HEART DISEASE AND STROKE IN MISSISSIPPI

Mississippi has the highest death rate from cardiovascular disease (CVD) in the country and heart disease is the No. 1 killer in Mississippi. In 2016, 7,876 people in Mississippi died of heart disease. Unfortunately, CVD kills more Mississippians than all forms of cancer combined.

Stroke is the No. 5 killer in Mississippi. In Mississippi, 1,705 people died of stroke in 2016.

Heart Disease and Stroke Risk Factors in Mississippi

In Mississippi	In America
26.0% Adults are current smokers	21.1%
40.0% Adults participate in 150+ min of aerobic physical activity per week	51.6%
68.9% Adults who are overweight or obese (Up from the last CHNA)	63.5%
5.4% Adults who have been told they have had a heart attack	4.4%
4.0% Adults who have been told they have had a stroke	2.9%
4.6% Adults who have been told they have angina or coronary heart disease	4.1%
69.3% Population of adults (18-64) who have some kind of health care coverage	78.9%
15.8% High school students who are obese	13.0%

Disability and death from CVD are related to a number of modifiable risk factors, including high blood pressure, high blood cholesterol, smoking, lack of regular physical activity, diabetes, and being overweight. While it affects persons of all ages in Mississippi, CVD is the leading cause of death for persons age 75 and over.

Seventy-three percent of the population ages 60 to 79 have CVD compared to 40 percent of the population ages 40 to 59 (Older Americans & Cardiovascular Diseases, 2016).

The No. 5 killer in Mississippi and the No. 5 killer in Neshoba County is stroke, another disease greatly impacted by lifestyle. Hypertension, obesity, smoking and lack of exercise are typically associated with the health status of the stroke victim. Unfortunately, these lifestyle habits are prevalent in the rural south.

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

There are nine areas of lifestyle and disease related problems that are significant factors in the higher levels of heart disease and stroke in Mississippi. They are:

- Physical Inactivity
- Obesity
- Improper Nutrition
- Abnormal Cholesterol
- Tobacco Use
- Diabetes
- Socio-cultural Factors
- Acute Event
- Hypertension

LIFESTYLE AND DISEASE

Modified lifestyle diseases are illnesses that can potentially be prevented by changes in diet, environment, physical activity and other lifestyle factors. These diseases include heart disease, stroke, obesity, diabetes and some types of cancer.

In Neshoba County, the three major diseases that result in the most deaths are lifestyle diseases. They are heart disease, cancer and COPD/emphysema. In addition, stroke and diabetes are two major disease entities in the county.

This is why the CHNA Steering Committee has chosen to address educational and lifestyle initiatives to assist in lowering the incidence of these diseases. The initiatives are outlined later in the report under the implementation plan.



CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

RURAL HEALTH DISPARITIES

Although the term *disparity* is often interpreted to mean racial or ethnic disparities, many dimensions of disparities exist in the United States, particularly in health. If a health outcome is seen to a greater or lesser extent between populations, there is disparity. Race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location all contribute to an individual's ability to achieve good health. It is important to recognize the impact that social determinants have on health outcomes of specific populations. *Healthy People 2020*, a federal project of the Office of Disease Prevention and Health Promotion, strives to improve the health of all groups.

Healthy People 2020 defines a *health disparity* as “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Over the years, efforts to eliminate disparities and achieve health equity have focused primarily on diseases or illnesses and on health care services. However, the absence of disease does not automatically equate to good health.

Powerful, complex relationships exist between health and biology, genetics, and individual behavior, and between health and health services, socioeconomic status, the physical environment, discrimination, racism, literacy levels, and legislative policies. These factors, which influence an individual's or population's health, are known as *determinants of health*.

For all Americans, other influences on health include the availability of and access to:

- High-quality education
- Nutritious food
- Decent and safe housing
- Affordable, reliable public transportation
- Culturally sensitive health care providers
- Health insurance
- Clean water and non-polluted air

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

According to an article published in December 2014, by Business Insider (Friedman, L., 2014), for the third year in a row, America's Health Rankings, an annual accounting of Americans' health, has found that Mississippi is the least healthy state in the US.

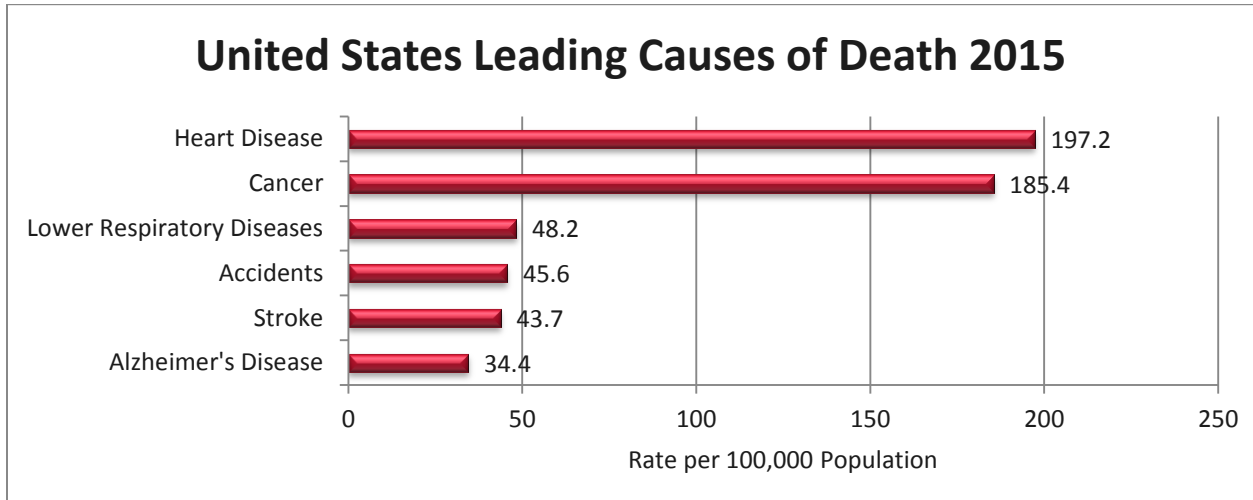
Since the rankings began in 1990, Mississippi – which has high rates of obesity and diabetes, low availability of primary care, and high incidence of infectious disease – has always ranked among the bottom three.

The rankings are funded by the United Health Foundation and are based on data from the Centers for Disease Control and Prevention, the American Medical Association, the Census Bureau, and other sources. They take into account 27 distinct measures including rates of smoking, obesity, drug deaths, education, violent crime, pollution, childhood poverty, infectious disease, and infant mortality.

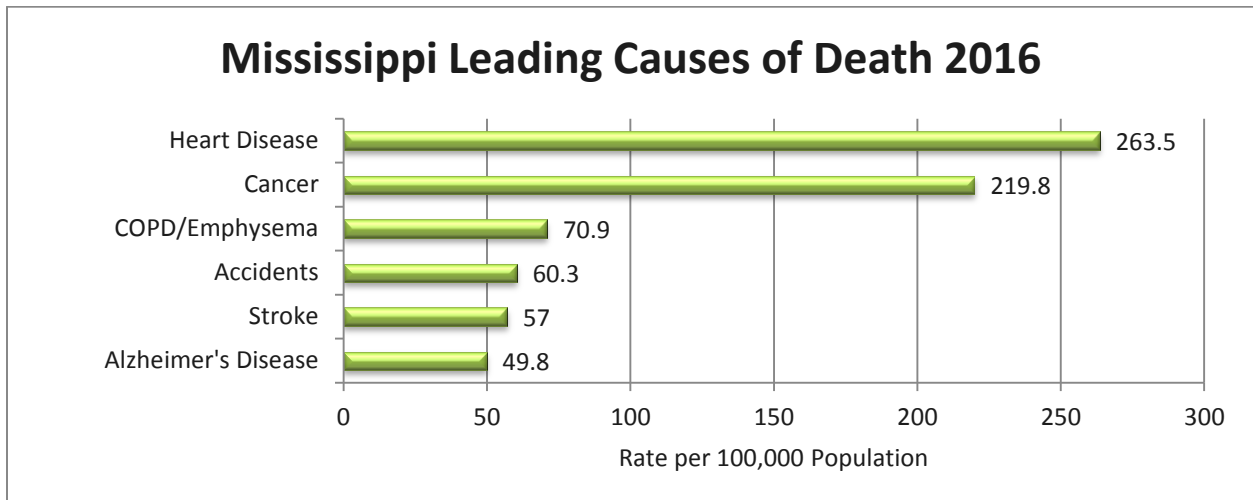
Overall, the rankings showed progress in some areas and not in others. The 2014 analysis found increases from the previous year in obesity and physical inactivity and decreases in infant mortality and smoking rates.

In the past 25 years, there have been some notable changes. Since 1990, there have been major reductions in infant mortality (down 41%), death from heart disease (down 38%), and premature death (down 20%). In 1990, 29.5% of Americans smoked; in 2014, 19% smoked, though smoking remains "the leading cause of preventable death in the country," a press release noted. Unfortunately, in that same time period, rates of diabetes and obesity have more than doubled.

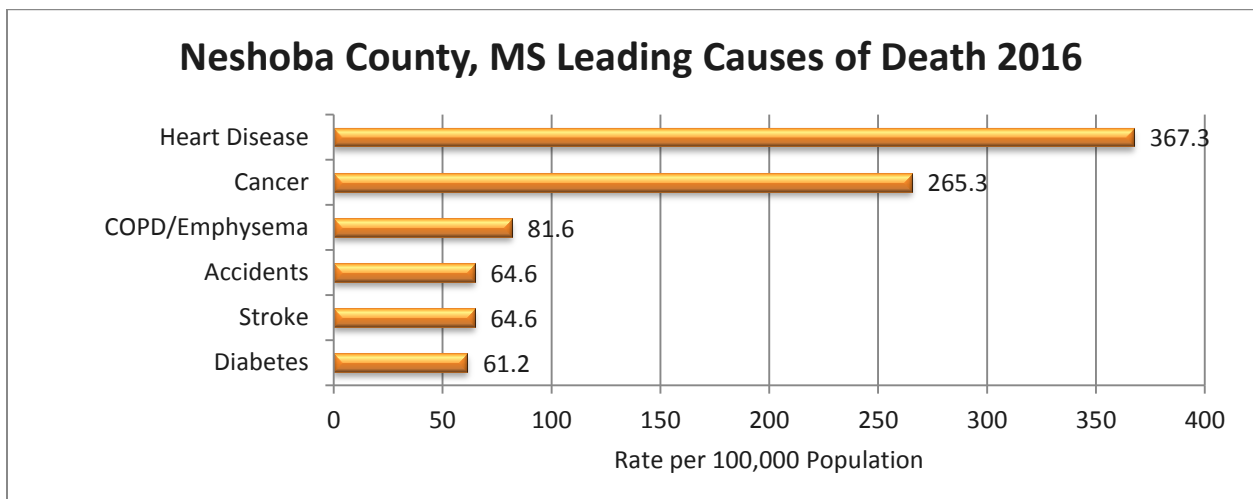
There has also been an 8% decline in cancer mortality since its peak in 1996. Cancer is the second leading cause of death in the US, and 2014 saw an estimated 1.6 million new diagnoses.



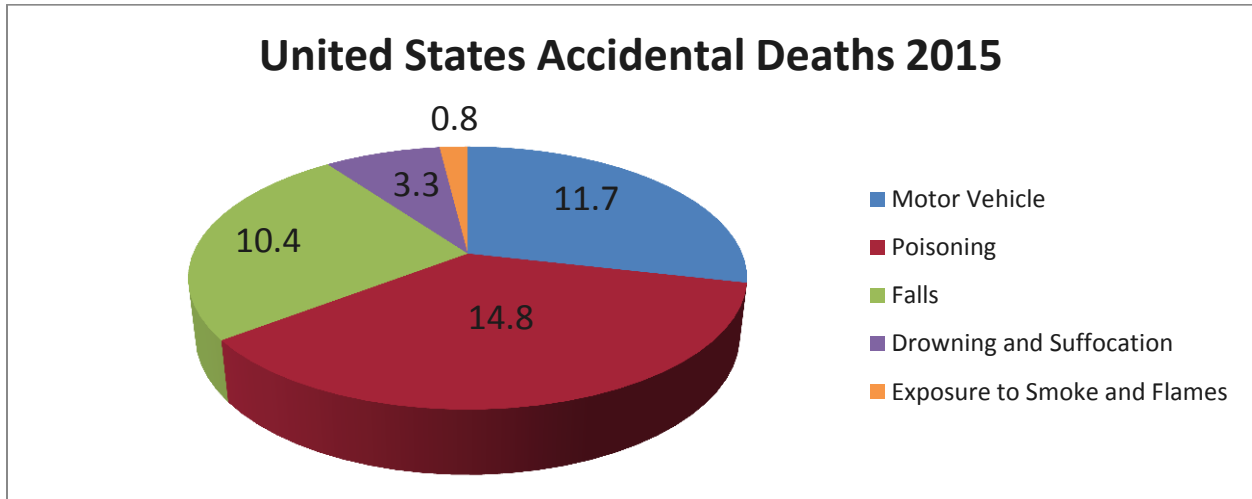
(Heron, M., 2016)



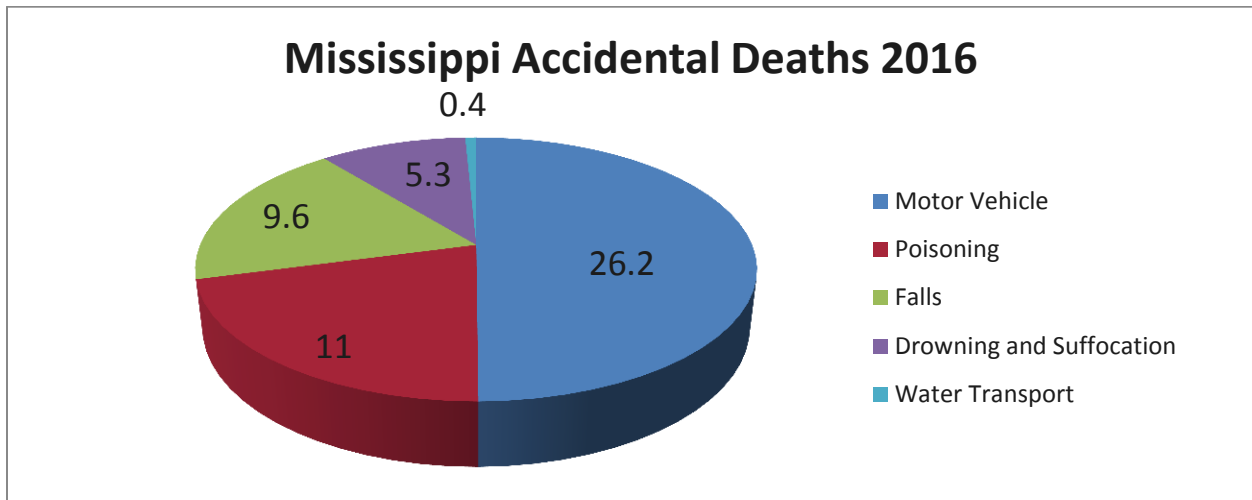
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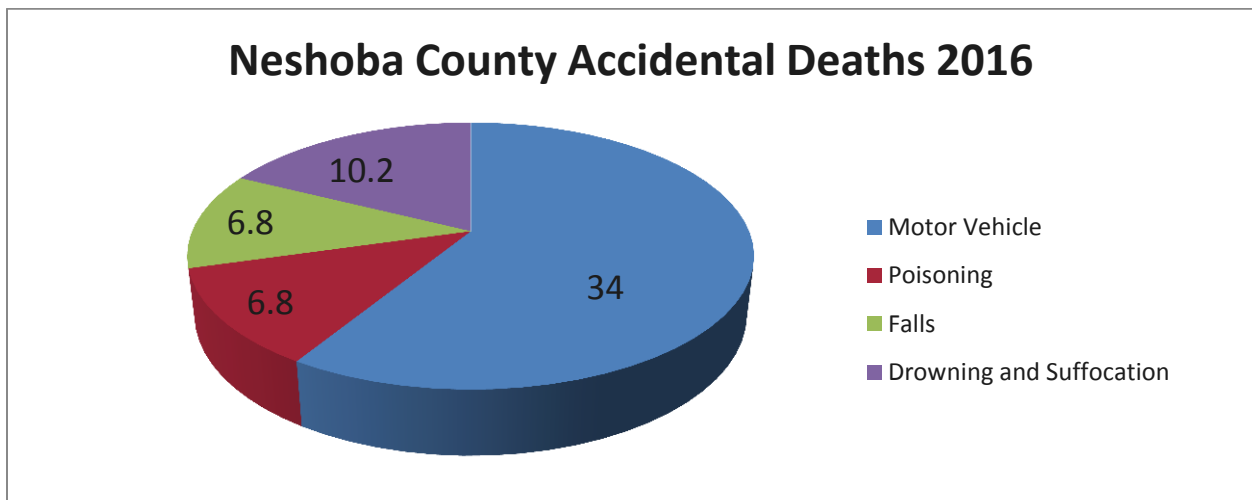
(Generated Statistical Table -MSTAHRs. Neshoba, Cause of Death, 2016)



(Heron, M., 2016)



(Generated Statistical Table-MSTAHRs, Mississippi, Unintentional Injury, 2016)



(Generated Statistical Table-MSTAHRs, Neshoba, Unintentional Injury, 2016)

RESPONDING TO THE COMMUNITY

CLOSING THE GAP

The information gathered from the community was very uniform and was also consistent with the quantitative data. The most common needs mentioned by the community members were related to chronic diseases, health education, lifestyle improvement and access to emergency care.

Hypertension, heart disease, diabetes, weight loss/obesity and nutrition were all health needs identified by both the community members and health care professionals. Community members saw a need for increased education and preventive care in order to eliminate the path to chronic disease.

Prevention is very cost effective compared to the catastrophic treatment needed when a chronic disease is unmanaged and leads to major health problems. Education related to nutrition was emphasized because of the link between obesity and so many chronic health conditions. Other community health needs that were expressed included a need for increased health literacy, and decreased health disparities among socioeconomic and racial groups.

PRIORITIZATION

The Steering Committee understood the facts the primary and secondary data communicated in reference to the health of the citizens of primarily Neshoba County:

- The County exceeds the State and U.S. in rate of deaths from heart disease.
- The County exceeds the State and U.S. in rate of deaths from cancer.
- The County exceeds the State and U.S. in rate of deaths from COPD/emphysema.
- The County exceeds the State and U.S. in rate of deaths from accidents.
- The County exceeds the State and U.S. in rate of deaths from strokes.
- The County exceeds the State and U.S. in rate of deaths from diabetes.

A small rural hospital faces challenges when treating some chronic diseases. These hospitals can, however, work with tertiary hospitals to assist patients in their access to an appropriate care center.

The Neshoba County General Hospital can be the catalyst for community health education, prevention, and enhancement of community wellness activities. We can be invaluable in providing our community with the health resources for making wiser health and lifestyle decisions, thus being a major player in disease prevention.

RESPONDING TO THE COMMUNITY

PRIORITIZATION (continued)

The Steering Committee used the following process to prioritize the identified needs that the hospital would use when creating strategies to help close the gap:

- All the findings and data were read and analyzed for needs and recurring themes within the identified needs.
- Reference was made to the content of the community input and the identified needs from those sources.
- Comparisons were made between the primary and secondary data and then compared to what was the common knowledge and experience of the clinical staff of the hospital.
- Based on what resources could be made available and what initiatives could have the most immediate and significant impact, the strategic initiatives were developed.

Implementation strategies that will address four major health issues (heart disease, diabetes, cancer, and poor nutrition) were developed. The strategies will seek to leverage valuable partnerships that currently exist and to identify opportunities for synergy within the community. The outcomes and results of these interventions will be followed and reexamined in preparation for the next CHNA.

IMPLEMENTATION PLANS

To be successful in creating a true sense of health in our community, it will be necessary to have collaborative partnerships which will bring together all of the care providers, the citizens, governments, plus business and industry, around an effective plan. Many needs have been identified through this process. Neshoba County General Hospital is proud to have been the catalyst in this effort. However, addressing some of the needs identified will require expertise and financial resources far beyond what a small rural hospital can provide.

However, addressing some of the needs identified will require expertise and financial resources far beyond what a small rural hospital can provide. Two such needs are the reduction in injuries and death from motor vehicle accidents and the reduction in tobacco use, specifically smoking, which has been proven to contribute to cancers and other respiratory diseases. Education and appropriate intervention are important to both of these issues. These needs will be shared with the local law enforcement agencies and The Mississippi Department of Health in an effort to encourage their participation in a programmatic approach to these two deadly issues.

RESPONDING TO THE COMMUNITY

IMPLEMENTATION PLANS (continued)

The hospital is aware of many lifestyle issues that face citizens of a rural southern state. Many of the lifestyle habits negatively impact the overall health of our community and are major contributors to several of the leading causes of death in our county. Neshoba County General Hospital has identified five significant initiatives it will undertake over the next year and a half. These collaborative projects should help improve the health and overall quality of life in our community. Each project is described in another section of this report.

There are other health and wellness opportunities identified during the research portion of the CHNA. These possibilities will be considered as we develop our strategic action plans over the coming years.



HEALTH AND WELLNESS INITIATIVES

Over the next three years, Neshoba County General Hospital, in concert with its many community partners will focus its energy in these five areas:

HEART DISEASE AND CARDIOLOGY SPECIALTY RECRUITMENT

Neshoba County General Hospital currently has a limited access to Cardiology services in its primary market. Patients rely on their primary care providers for heart disease management and referrals to out of town specialists.

- Goal and Desired Outcome
 - To build a Cardiology Service Line at Neshoba County General Hospital
 - To open a Neshoba County General Hospital Cardiology Clinic
 - Initially staff with the clinic with 1 full-time Nurse Practitioner and a .2 to .5 FTE Physician Cardiologists. By the end of the first year, the Cardiologist would represent 1 FTE and prospectively at an additional 1 FTE Cardiologist based on need.
 - To implement diagnostic imaging and Laboratory testing in the clinic including Nuclear Medicine, Ultrasound and EKG.
 - To implement 24/7 access to Cardiologists through Tele-medicine.
 - Long-term plan is for an Outpatient Diagnostic Cath Lab.
 - To establishment and implementation of heart health education.

- Process / Time Frame / Location
 - Neshoba County General Hospital has been discussing opportunities for a Cardiology program with a specialty group in its nearby referral market.
 - Neshoba County General Hospital will continue to finalize those discussions and develop a plan for the program implementation or look for other options to address this specific Cardiology services need in Neshoba County.
 - Neshoba County General Hospital will plan for the Cardiology service to open by January 2019.
 - The ideal location will be on the campus of Neshoba County General Hospital.

HEALTH AND WELLNESS INITIATIVES

HEART DISEASE AND CARDIOLOGY SPECIALTY RECRUITMENT (*continued*)

- Measures of Success
 - Improved cardiac disease education, prevention and treatment by:
 1. Opening and operating a full-service Cardiology practice with diagnostic and laboratory testing for the diagnosing and treatment of heart disease
 2. First year (2019) will be staffed with a full-time Nurse Practitioner and part-time Cardiologist.
 3. Year two (2020) have a Cardiologist full-time, 5 days per week
 4. Implementation of an Inpatient Cardiology program
 5. Implementation of Tele-Cardiology
 6. Establishment of a Diagnostic Cath Lab in 3 years

- Collaborative Partners
 - The goal here is to partner with a Cardiology Group that will work with Neshoba County General Hospital to establish a Cardiology program in Neshoba County.

HEALTH AND WELLNESS INITIATIVES

HEALTHY EATING FOR A HEALTHIER LIFESTYLE IN THE SCHOOLS

- Target Population
 - Children from Kindergarten to High School
 - Parents of the Children

- Goal and Desired Outcome
 - To develop fun and healthy meals to promote healthier food choices in the children's lives.

- Process / Time Frame / Location
 - Neshoba County General Hospital will use the summer and fall of 2018 and 2019 to offer the community several different events. There will be cooking demonstrations, educational handouts, and hands-on fresh produce as well as games such as "Name That Vegetable" and "Top Chef."

- Measures of Success
 - One measure of success will be the increased number of children having a more vast knowledge of nutritional values and the Healthy Plate.
 - Another measure of success will be the number of families visited Farmer's Markets to shop for the suggested health friendly items suggest by the events.

- Collaborative Partners
 - Mississippi Health Department
 - Boys and Girls Club of Philadelphia
 - Local Farmer's Markets
 - Mississippi State Extension Service
 - East Central Community College Vo-Tech Culinary Program
 - Porter House Restaurant

HEALTH AND WELLNESS INITIATIVES

DIABETES AWARENESS IN THE COMMUNITY

- Target Population
 - Members of the Community that have diabetes or could potentially have diabetes.
- Goals and Desired Outcomes
 - To provide education during various community functions and health events to improve diabetes health and increase awareness.
 - To help improve health outcomes for people living with diabetes in our community.
- Process / Time Frame / Location
 - We will provide diabetic educational information during our twelve or more Wellness Works health fairs throughout the year. Our team members are planning to develop a diabetic foot care brochure to use during community health events, and to be made available in all of our clinics. Partner with the Mississippi Band of Choctaw Indians Diabetes Educator and Dietitian, to provide nutrition lessons, perform diabetic cooking demonstrations, and encourage healthy eating habits for diabetics. As new opportunities arise, we will coordinate speakers to conduct educational presentations on various diabetes topics. The speakers will be knowledgeable health care professionals and may include doctors, nurses, nurse practitioners, and dietitians. Education regarding the importance of compliance for the lifestyle of a diabetic, will be a major part of our program. As we get more involved in the plan, we will organize a diabetic support group, and have our pharmacy speak about the most recent medications available, and to help ensure adherence to medications prescribed.
 - Our Wellness Works health fairs are conducted throughout the calendar year. Other presentations will be conducted quarterly, at specified times and locations beginning the 4th quarter of 2018.
 - Presentations to local businesses will be held on-site at their designated location. Other educational presentations would be held at the community event locations. It is not yet determined where we could have cooking demonstrations, but there are several options within the community, including local churches and community centers. Our diabetic support group would be most likely held on-site at Neshoba General Hospital –Nursing Home, depending on size of the group.

HEALTH AND WELLNESS INITIATIVES

DIABETES AWARENESS IN THE COMMUNITY *(continued)*

- Measures of Success
 - To improve diabetes disease education, prevention and treatment by:
 - Involving participants in community events
 - Encouraging those participants to return
 - Invite others to join them
 - The number of our participants will increase from year to year.

- Collaborative Partners
 - Mississippi State Department of Health/Neshoba County Health Department
 - Mississippi Band of Choctaw Indians – Diabetes Education Program
 - American Diabetes Association
 - Neshoba Medical Associates – Family & Internal Medicine Practice
 - Neshoba General Hospital – Population Health and Wellness Works Program

HEALTH AND WELLNESS INITIATIVES

DEVELOPING A HEATH EDUCATION PROGRAM

- Target Population
 - Members of the Community and Neshoba County General Hospital's service areas of Philadelphia and Union.

- Goal and Desired Outcome
 - Establish a health education program.
 - To develop and implement strategies to improve the health of individuals within the Neshoba County General Hospital community.
 - To collect and analyze data to identify community needs prior to planning, implementing, monitoring, and evaluating programs designed to encourage healthy and safe lifestyles.
 - To serve as a resource to assist individuals, other professionals, and the community for health education programs.

- Process / Time Frame / Location
 - Neshoba County General Hospital will begin seeking for a community/facility educator to work in a variety of settings within the community and facility to promote the health, wellness, and safety of the population that we serve.
 - The creation of this position is ongoing with a target date to be filled by October 1, 2018.
 - In the year 2019, Neshoba County General Hospital will evaluate the development of a health education center through the conversion of existing space on the hospital campus.

- Measures of Success
 - The success of the community health initiative will be measured through data collected by the community health educator on an ongoing basis.

- Collaborative Partners
 - Local Organizations offering public health fair
 - Local Schools
 - Local Businesses
 - Other Locations where health and safety can be promoted

HEALTH AND WELLNESS INITIATIVES

CANCER EDUCATION AND PREVENTION

- Target Population
 - The communities that Neshoba County General serves
 - Cancer Patients

- Goals and Desired Outcomes
 - To make available educational and cancer prevention resources to all those in need
 - To growth the level of participation in the community

- Process / Time Frame / Location
 - Every year in May, Neshoba County General Hospital will continue to participate in Relay for Life for the American Cancer Society. Numerous fund raisers will be held throughout the year to contribute to this great cause. During this event, Neshoba County General Infusion/Oncology Center will provide educational material to the public regarding free lodging during treatment, wigs, head coverings, and Personal Health Manager kits to newly diagnosed patients.
 - With our currently established Population Health and WellnessWorks Program, Neshoba General staff, partners and will continue to partner with local businesses to encourage and increase participation in health screenings and assist with other health services and education programs throughout the year. Wellness exams will be scheduled for cooperative employees. These employees will be educated on what their Wellness exam covers for preventative care and cancer screenings. Breast Self-Exam instructional pamphlets, Prostate Cancer Fact Sheets, and information on Neshoba County General Outpatient Infusion/Oncology Center will continue to be provided at all Health Fairs that are scheduled for the general public and for WellnessWorks clients.
 - During the month of October, Neshoba County General Mammography Department offers and will continue to offer a discounted price for mammograms to the public.
 - Future activities under investigation are presentations such as, lunch and learn and or dinners, that can be held to inform the public of the importance of specific types of cancer awareness, education, and prevention.
 - Neshoba County General will continue to use social media as a tool for Cancer awareness and prevention. This tool is and will be used to encourage the public to get their annual health screenings and also lists available resources.

HEALTH AND WELLNESS INITIATIVES

CANCER EDUCATION AND PREVENTION *(continued)*

- Measures of Success
 - Participation in these events will be monitored through sign-in sheets during our Health Fairs to establish the total number of participants.
 - The WellnessWorks program will also monitor the number of locations served.
 - Neshoba County General Mammography Department will aide in providing estimated totals of participation in mammogram screenings.

- Collaborative Partners
 - Mississippi State Department of Health
 - Neshoba County Health Department
 - American Cancer Society
 - Population Health and WellnessWorks Program
 - Outpatient Infusion/Oncology Center
 - Mammography Department

THANK YOU

This comprehensive assessment will allow us to better understand the needs and concerns of our community. Neshoba County General Hospital is proud to be the leadership that advances the health of the community served by providing value-centered, excellent care. As always, through this commitment to compassionate and mission-focused healthcare, we are honored to work closely with our collaborative partners in our community to provide outstanding healthcare and create a healthier world for the residents of Neshoba County and surrounding area.

Thanks to each of you who provided valuable insight into this report. Your participation in the data gathering, discussions and this decision making process helped make this Community Health Needs Assessment a true community effort which will better serve all segments of our population.

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