



Lourdes Medical Center of Burlington County

Community Health Needs Assessment Implementation Strategy

Fiscal Years 2017-2019

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Ourdes Health System completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on June 24, 2016. Ourdes Health System performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from representatives of the community, community members, and various community organizations.

The complete CHNA report is available electronically at ourdesnet.org, or printed copies are available at Ourdes Health System.

Hospital Information and Mission Statement

The Ourdes Health System is one of the region's leading healthcare providers, recognized nationally for excellence in clinical care and service to the community. The system has two general acute care hospitals (Our Lady of Ourdes Medical Center and Ourdes Medical Center of Burlington County), located in Camden and Willingboro, New Jersey, and a growing network of ambulatory care facilities and physician practices located throughout southern New Jersey. Ourdes is a member of Trinity Health, a health system serving residents in 21 states.

A major teaching affiliate of the Rowan University School of Osteopathic Medicine, Ourdes provides a full range of medical, surgical, obstetrical, behavioral health, rehabilitation and long-term acute care services. The Ourdes Cardiovascular Institute is recognized nationally for excellence in heart care. Ourdes Health System has an Accountable Care Organization (ACO), Nursing School; comprehensive Wellness Services; and LIFE program for All-Inclusive Care of the Elderly.

To continue to guide our community benefit and health improvement efforts, Ourdes Health System participated in a regional Community Health Needs Assessment (CHNA) with other acute care hospitals, as part of the South Jersey Health Partnership. The CHNA was conducted from February 2015 to June 2016 in the southern New Jersey counties of Burlington, Camden, Gloucester, and Ocean. The 2016 CHNA builds upon our Health System's previous CHNA conducted in 2013. The assessment was conducted in a timeline to comply with requirements set forth in the Affordable Care Act (ACA), as well as to further our commitment to community and population health.

Mission Statement

We, Lourdes Health System and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence in the communities within our communities. In the tradition of the Franciscan Sisters of Allegany, New York, Lourdes Health System serves all who come to it with reverence and integrity, in a simple, joyful and hospitable manner.

Health Needs of the Community

The CHNA conducted in 2016 identified 5 significant health needs within the Lourdes Health System areas. The 5 significant health needs identified include:

Chronic Diseases	<ul style="list-style-type: none">• Higher rates of heart disease; risk factors including smoking, drinking alcohol, and obesity
Behavioral Health	<ul style="list-style-type: none">• Undiagnosed behavioral health conditions, lack of services for treatment, lack of integration of physical/behavioral health
Substance Abuse	<ul style="list-style-type: none">• Increase in opioid addiction• High drug-induced death rates• Lack of services in community for treatment
Cancer	<ul style="list-style-type: none">• Higher rates of cancer incidence and death rates; health disparities among poor and racial/ethnic minorities
Maternal & Child Health	<ul style="list-style-type: none">• Delayed prenatal care; risky behaviors during birth• Low birth weight; high preterm births• Increase in babies born addicted

Hospital Implementation Strategy

Lourdes Health System resources and overall alignment with its mission, goals and strategic priorities were taken into consideration of the significant health needs identified through the most recent CHNA process.

Significant health needs to be addressed

Lourdes Health System will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- Chronic Diseases – Detailed need specific Implementation Strategy on p. 5
- Mental Health – Detailed need specific Implementation Strategy on p. 7
- Substance Abuse – Detailed need specific Implementation Strategy on p. 9
- Cancer – Detailed need specific Implementation Strategy on p. 11

Significant health needs that will not be addressed

Lourdes Health System acknowledges the wide range of priority health issues that emerged from the CHNA process, and determined that it could effectively focus on only those health needs which it deemed most pressing, under-addressed, and within its ability to influence.

Lourdes Health System will not take further action on the following health need:

Maternal and Child Health – Lourdes Health System has consistently been addressing this area through several of its ongoing programs but does not have the resources to do more at the present time.

This implementation strategy plan specifies community health needs that Lourdes Health System has determined to meet in whole or in part and that are consistent with its mission. The Health System reserves the right to amend this implementation strategy plan as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending June 30, 2019 other organizations in the community may decide to address certain needs, indicating that the Health System then should refocus its limited resources to best serve the community.

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2017-2019**

HOSPITAL FACILITY:	Lourdes Medical Center of Burlington County		
CHNA SIGNIFICANT HEALTH NEED:	Chronic Diseases		
CHNA REFERENCE PAGE:	25-34	PRIORITIZATION #:	1

BRIEF DESCRIPTION OF NEED:

Chronic disease rates are increasing and are the leading causes of death and disability. Chronic diseases are often preventable through reduced health risk behaviors like smoking and alcohol use, increased physical activity and good nutrition, and early detection of risk factors and disease

GOAL:

Reduce the incidence of chronic diseases in the populations served by Our Lady of Lourdes Medical Center and better manage the care of patients in the LHS Health Network ACO who have chronic diseases in order to control symptoms and reduce co-morbidities.

OBJECTIVE:

- 1) Provide community members with a variety of programs for tobacco cessation in order to increase participation
- 2) Use coaching, education and navigation services with high risk patients in the ACO in order to better control symptoms from chronic diseases and monitor improvement in conditions (diabetes and high blood pressure)

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Will partner with the American Lung Association and Trinity hospitals to support the ongoing delivery of the ALA tobacco cessation classes. Lourdes will provide additional tobacco cessation classes through the Wellness Services. In addition robust annual smoking cessation campaigns will be developed to engage patients and community members with cessation resources (above classes, NJ Quitline, etc.)
2. RN Population health nurses will identify high risk chronic disease patients based on hospital utilization and health care spend. Each patient will receive coaching, navigation and education regarding chronic disease, diet, exercise and need for follow up care will be initiated. Gaps in care with specific quality metrics will be tracked and trended. Focus on controlling blood pressure and A1C in Diabetics will be assessed.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. On an annual basis a minimum of 25 people will participate in the ALA sponsored class and/or the Lourdes Wellness sponsored cessation class.
2. Diabetes for 50 high risk patients will be better controlled as evidenced by an improvement in A1C levels and blood pressure will be better controlled for 100 patients.

PLAN TO EVALUATE THE IMPACT:

- 1) Number of people attending classes will be monitored on a quarterly basis
- 2) Quality metrics gap closures for high risk patients with diabetes and high blood pressure will be tracked

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- 1) Tobacco cessation classes
- 2) Nurses, social workers, community health workers and analytics team from the LHS Health Network
- 3) Financial Resources

COLLABORATIVE PARTNERS:

- 1) Partners for the cessation efforts include the BCCRCDC participants, local health departments, NJ Quitline, American Lung Association, American Cancer Society.
- 2) Partners for the diabetes and high blood pressure high risk patients include 120 primary care physicians, the Lourdes Medical Associate Endocrinology physicians and the Lourdes Cardiology physicians

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2017-2019**

HOSPITAL FACILITY:	Our Lady of Lourdes Medical Center		
CHNA SIGNIFICANT HEALTH NEED:	Mental Health		
CHNA REFERENCE PAGE:	36-39	PRIORITIZATION #:	2
BRIEF DESCRIPTION OF NEED: The rates of suicide are increasing in Burlington, Camden and Gloucester Counties. Rate of suicide is higher than state rate in Camden and Burlington counties. Residents report a high number of poor mental health days. In addition, the counties experience issues with people undiagnosed for mental health conditions, or having mental health conditions in conjunction with other medical issues, and the available treatment options are limited.			
GOAL: Identify people with mental health conditions as early as possible in order to initiate treatment. Create a range of treatment options that provide the optimum setting in which to care for patients.			
OBJECTIVE: Increase screening for behavioral health needs in primary care and specialty care settings. Work with area hospitals to develop a range of collaborative approaches to improve the care of the patients with behavioral health conditions.			
ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:			
<ol style="list-style-type: none"> 3. Embed behavioral health practitioners in 10-15 primary care practices to screen patients for depression and anxiety. 4. Implement a psychosocial distress screening with each oncology patient. 5. Patients identified through the screenings to have mental health conditions will be navigated to the appropriate services 6. Develop innovative care models in conjunction with the hospitals in the tri-county area in order to maximize impact of actions 			
ANTICIPATED IMPACT OF THESE ACTIONS:			
<ol style="list-style-type: none"> 3. Increase depression and anxiety screening in the primary care and ACO practices by 500 patients annually 4. Increase psychosocial distress screening by 150 oncology patients annually 5. Improved collaborative care approach to address mental health annually in conjunction with tri-county hospitals 			
PLAN TO EVALUATE THE IMPACT:			
<ol style="list-style-type: none"> 1) Evaluate gap closure for depression screening measured in ACO programs 2) Increase in referrals for behavioral health services from ACO primary care physicians 			

- 3) Increase oncology patient compliance with treatment appointments and office visits
- 4) New collaborative care models implemented

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- 1) Staff nurses, social workers, community health workers, and the analytics team from the ACO
- 2) Staff time, financial resources, screening tool and tracking in the registry for cancer patients
- 3) Staff time and financial resources for Southern NJ Behavioral Health Collaborative
- 4) Financial resources for psychiatrist in primary care offices

COLLABORATIVE PARTNERS:

- 1) Primary care screening - Local Behavioral Health partner (Meridian), ACO Primary Care Physicians (120 practitioners)
- 2) Oncology patient screening - LMA Surgical offices, LMA Medical Oncology offices, 21st Century Oncology Radiation partners, community facilities and counseling centers for behavioral health, Rowan Psychology at Lourdes.
- 3) South Jersey Behavioral Health Collaborative - Camden Coalition, New Jersey Hospital Association, Cooper, Virtua, Kennedy and Inspira

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2017-2019**

HOSPITAL FACILITY:	Lourdes Medical Center of Burlington County		
CHNA SIGNIFICANT HEALTH NEED:	Substance Abuse		
CHNA REFERENCE PAGE:	39-45	PRIORITIZATION #:	3
BRIEF DESCRIPTION OF NEED: The drug-induced death rate is higher in Burlington county compared to state and national rates and it is increasing. Opioid addiction is growing rapidly in the community. Venues for care are limited.			
GOAL: Reduce the negative impacts of overuse of opioids			
OBJECTIVE: Implement tracking and monitoring mechanisms to: prevent patients from becoming addicted pain medications; identify patients who are addicted to medications; and decrease overdoses and drug-induced deaths			
ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:			
<ol style="list-style-type: none"> 7. Introduce a Controlled Substance Patient Agreement Contract in Primary Care 8. Complete Urine Drug Screenings on those prescribed opioids 9. Complete Pill Counts 10. Educate physicians on an annual basis regarding signs of opioid addiction and measures being implemented in the community and statewide to combat the issue 11. Connect patients with community resources 			
ANTICIPATED IMPACT OF THESE ACTIONS:			
<ol style="list-style-type: none"> 6. Hold a minimum of one education event annually for providers on the topic of substance abuse, with a minimum of 20 providers in attendance 7. Patients with illicit drugs in urine will not be prescribed opioids 			
PLAN TO EVALUATE THE IMPACT:			
<ol style="list-style-type: none"> 1. All ACO primary care practices have action plans in place 2. Annual reporting on number of primary care physicians participating in education events. 			
PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:			
The ACO nurses, social workers, community health workers, and the analytics team. Cases are discussed in Systematic Case Review Rounds with a psychiatrist, geriatrician, social worker and population health nurse are present. Plans of care to support patients are developed in			

Systematic Case Review as needed. Financial resources.

COLLABORATIVE PARTNERS: Local Behavioral Health partner (Meridian), ACO Primary Care Physicians (120 practitioners)

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2017-2019**

HOSPITAL FACILITY:	Lourdes Medical Center of Burlington County		
CHNA SIGNIFICANT HEALTH NEED:	Cancer		
CHNA REFERENCE PAGE:	26-31	PRIORITIZATION #:	4
BRIEF DESCRIPTION OF NEED: Cancer is the second leading cause of death in the nation behind heart disease. The overall cancer incidence rate is higher in the service area counties compared to the state and the nation. Burlington exceeds the state 44.4 points.			
GOAL: Increase colorectal cancer screening rates and diagnose cancers earlier to increase survivorship.			
OBJECTIVE: Have a process in place to screen 80% of eligible patients under our management for colon cancer by 2018.			
ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:			
<ol style="list-style-type: none"> 12. Determine a baseline of patient compliance with colorectal cancer screening in Lourdes Medical Associates (LMA) and Lourdes Health Network (ACO) practices. 13. Implement a strategy, using the 80 by 2018 platform from the American Cancer Society to address the gap. 14. Place navigation resources in the health system to work with patients who are not in compliance with this screening. 15. Implement a Lourdes Direct Access Program designed to fast track patients who are in good health into screenings without adding an additional office visit. 16. We expect that actively monitoring screening compliance through both our LMA practices and in the ACO (which officially has metrics to achieve on these screenings), will increase rates of screening by focusing attention on this matter. 			
ANTICIPATED IMPACT OF THESE ACTIONS:			
<ol style="list-style-type: none"> 8. By 2018 80% of eligible patients will receive screening colonoscopies 9. Cost of providing the screening services will be reduced by navigating healthy patients through the Direct Access Program. This will save the patient and the insurance provider money by eliminating the cost and hassle of an extra office visit. This eliminates a barrier often overlooked. 10. Patients who successfully complete the Direct Access intake call should be more compliant in attending their colonoscopy or other screening since it will be streamlined. 			

PLAN TO EVALUATE THE IMPACT:

Performance will be monitored on a monthly basis through a metrics dashboard
Estimated number of patients evaluated per year: 400

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

Employees to serve as nurse navigators for the Direct Access Program.
Administrative leadership of the 80 by 2018 initiative from the cancer program staff.
Printed educational and promotional program materials and ACS resources.
Financial Resources

COLLABORATIVE PARTNERS:

American Cancer Society, Lourdes Medical Associates, Lourdes Health Network