



2019

Implementation
Strategy

Jefferson Hospital Implementation Strategy

For FY 2020-2022 Summary

Jefferson Hospital is a 37-bed not-for-profit community hospital located in Louisville, Georgia. In 2019, the hospital conducted a Community Health Needs Assessment (CHNA) to identify the health needs of Jefferson County. The Implementation Strategy for Jefferson Hospital was developed based on findings and priorities established in the CHNA and a review of the hospital's existing community benefit activities.

This report summarizes the plans for Jefferson Hospital to sustain and develop community benefit programs that 1) address prioritized needs from the 2019 Jefferson Hospital CHNA and 2) respond to other identified community health needs.

The following prioritized needs were identified by the community and the CHNA steering committee. Particular focus was placed upon these needs in developing the implementation strategy.

- Access to Care
- Mental and Behavioral Health/Substance Abuse
- Adolescent Health
- Lifestyle and Obesity

Jefferson Hospital has addressed each of the health needs identified in the CHNA. Jefferson Hospital developed implementation strategies to address each of the health issues identified over the next three years.

Specific implementation strategies for each of the CHNA identified health needs are addressed in the following appendices to this report.

The Jefferson Hospital Board approved this Implementation Strategy through a board vote on **April 27, 2020**.

The following issues were identified as “priority” needs by the community participants. The findings are listed in the order of priority determined by the hospital -

1. Mental and Behavioral Health/Substance Abuse
 - a. There is a lack of local mental and behavioral health facilities for both crisis and outpatient treatment options.
 - b. There is a need for more community education on substance abuse issues for both adolescents and adults.
2. Lifestyle and Obesity
 - a. There is a need for education and collaboration/outreach on personal accountability, self-control, and taking charge of one's health.
 - b. There is a need for community education on healthy food options and the relationship between a healthy diet and health.
 - c. There is a need for more affordable healthy food.
3. Access to Care
 - a. There is lack of communication regarding available community resources. There is a need for centralized resource directory.
 - b. There is a lack of transportation.
 - c. There is a need for more effective outreach and education, especially to the medically underserved population in the community.
 - d. There is a lack of free and low-cost health screenings for common diseases.
4. Adolescent Health
 - a. There is a need to offer community education on adolescent sexual behavior, substance abuse, underage drinking and birth control.
 - b. There is a need for a higher level of parental engagement and outreach on methods for raising a healthy child. The lack of parenting engagement and accountability was the main theme associated with adolescent health.
 - c. There is a need for collaboration with other providers, schools, government agencies and nonprofit organizations to educate adolescents on health issues.

Appendix 1

Community Work Plan for Mental and Behavioral Health/Substance Abuse
CHNA Page Reference 69 - 77, 94, 102

Health Problem	Outcome Objective (Anticipated Impact)
<p>a. There is a lack of local mental and behavioral health facilities for both crisis and outpatient treatment options.</p> <p>b. There is a need for more community education on substance abuse issues for both adolescents and adults.</p>	<p>a. Provide a mental health facility in Jefferson County.</p> <p>b. Increase community education related to substance abuse.</p>

Background:

The CHNA process identified a lack of mental health facilities as a major community problem. Several members expressed the idea that substance abuse and mental health issues are closely related.

Implementation Strategy:

- a. Open an Outpatient and Inpatient Behavioral Unit in the hospital approximately January 1, 2021.
- b. Provide additional community health education.

Possible Collaborations:

- Physician Offices
- Nursing Homes
- Law Enforcement
- Community Service Board

Appendix 2

Community Work Plan for Lifestyle and Obesity CHNA Page Reference 50 - 57, 62 -63, 68, 69 - 77, 78 - 84	
Health Problem	Outcome Objective (Anticipated Impact)
<p>a. There is a need for education and collaboration/outreach on personal accountability, self-control, and taking charge of one’s health.</p> <p>b. There is a need for community education on healthy food options and the relationship between a healthy diet and health.</p> <p>c. There is a need for more affordable healthy food.</p>	<p>a. Collaborate with other organizations to expand educational offerings on personal accountability</p> <p>b. Increase education on the importance of a healthy diet and its potential impact on overall health.</p> <p>c. Improve the healthy food options within the hospital. Discuss improving healthy food options with the school system. Collaborate with and support the local food pantry.</p>
<p>Background:</p> <p>The CHNA process identified access to healthy food as a problem for many in the community and a contributing cause of obesity and diabetes. Poor diet was identified as a contributing factor to many of the community’s health problems. Lack of personal accountability was an underlying issue voiced by several community members. Community members believe many residents will not choose healthy food options even when available and that poor diet is an issue across all income levels.</p>	
<p>Implementation Strategy:</p> <p>a. Partner and collaborate with the school system and area churches to increase community education on personal accountability.</p> <p>b. Employ a certified diabetic educator at the hospital to provide community education. Offer periodic community education taught by employees and/or physicians on diet and its relationship to good health.</p> <p>c. Support the local food pantry to provide free or low-cost healthy food selections to community members most in need.</p>	
<p>Possible Collaborations:</p> <ul style="list-style-type: none"> • Public Health Department • Area Churches • Local Food Pantry • Service Center 	

Appendix 3

Community Work Plan for Access to Care CHNA Page Reference 85 - 97, 98 - 99	
Health Problem	Outcome Objective (Anticipated Impact)
<ul style="list-style-type: none"> a. There is lack of communication regarding available community resources. There is a need for centralized resource directory. b. There is a lack of transportation. c. There is a need for more effective outreach and education, especially to the medically underserved population in the community. d. There is a lack of free and low-cost health screenings for common diseases. 	<ul style="list-style-type: none"> a. Make the community aware of existing resources. b. Increase community knowledge of existing available transportation. Collaborate with other organizations on possible alternatives. c. Offer periodic educational meetings and a community newsletter. d. Increase the number of health screenings provided free or at low-costs to the community. Collaborate with the Department of Health on screenings.
<p>Background:</p> <p>Jefferson County is a large land mass county with a small population that is geographically spread into 3 distinct cities, Louisville, Wadley and Wrens. There are only 3 ambulances in the County and only 2 run 24 hours a day. The members were happy with the hospital medical staff.</p>	
<p>Implementation Strategy:</p> <ul style="list-style-type: none"> a. Update the Community Resource Directory and make it available on the hospital’s website. b. Collaborate with area churches and other organizations to seek transportation solutions. c. Investigate providing urgent care on weekends and educate the community on availability of resources throughout the county. d. Educate the community on financial assistance programs currently available. e. Explore Telemedicine to improve access to specialty care. 	
<p>Possible Collaborations:</p> <ul style="list-style-type: none"> • Area churches, civic organizations • Local government officials 	

Appendix 4

Community Work Plan for Adolescent Health CHNA Page Reference 52 - 57, 62 - 63, 68, 69 - 74, 76, 78 - 84	
Health Problem	Outcome Objective (Anticipated Impact)
<p>a. There is a need to offer community education on adolescent sexual behavior, substance abuse, underage drinking and birth control.</p> <p>b. There is a need for a higher level of parental engagement and outreach on methods for raising a healthy child. The lack of parenting engagement and accountability was the main theme associated with adolescent health.</p> <p>c. There is a need for collaboration with other providers, schools, government agencies and nonprofit organizations to educate adolescents on health issues.</p>	<p>a. Increase community education targeting adolescent lifestyles.</p> <p>b. Increase community education to support parents and parenting skills.</p> <p>c. Collaborate with other organizations on health education targeting adolescents.</p>
<p>Background:</p> <p>Several community members stated there is little for young people to do in the area. A need to assist individuals in learning to be a parent was a common theme in both focus groups and in the key stakeholder interviews.</p>	
<p>Implementation Strategy:</p> <p>a. Partner with the local school system to provide additional education to at-risk young people on lifestyle choices and the impact on health.</p> <p>b. Provided periodic educational offerings lead by hospital department managers and physicians.</p> <p>c. Publish a periodic newsletter on healthy lifestyles choices and distribute through the school system.</p>	
<p>Possible Collaborations:</p> <ul style="list-style-type: none"> • Area Churches • School Systems • Public Health Department 	