

2014

COMMUNITY HEALTH NEEDS ASSESSMENT



Lawrence County
Hospital
Monticello,
Mississippi

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EXECUTIVE SUMMARY

The purpose of this Community Health Needs Assessment ("CHNA") report is to provide Lawrence County 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 Lawrence County Hospital'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 hospital's Community Health Needs Assessment Steering Committee ("the Committee") with assistance from HORNE LLP. The assessment was conducted in January and February, 2014.

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, a paid public notice, and an online survey available to the general public. Additional information came from public databases, reports, and publications by state and national agencies.

The implementation describes the programs and activities that will address these health priorities over the next three years. The CHNA report is available on the hospital's website www.smrhc.com or a printed copy may be obtained from the hospital's administrative office.

We sincerely thank those who provided input for this assessment. We look forward to working closely with our community to help improve the overall health of those we serve.

Semmes Ross, Jr.
CEO/Administrator
Lawrence County Hospital

ABOUT THE HOSPITAL



Since 1960, on the bank of the Pearl River, Lawrence County Hospital has been providing medical services to the community. With the official hospital motto being “the Hospital with a Heart,” there is no doubt that Lawrence County Hospital is committed to providing a superior facility, needed services and a warm environment to enable its physicians to best serve the needs of its patients and their families.

With 125 employees, the 25-bed hospital has been a division of Southwest Mississippi Regional Medical Center since 2001. After receiving the designation of being a Critical Access Hospital in 2002, Lawrence County Hospital has flourished. Under the guidance of SMRMC, Lawrence County Hospital has not only been able to add a wider range of services but has updated and replaced existing facilities and equipment. Some of the services added since 2002 include CAT scans, MRIs, Ultrasounds, Intensive Outpatient Services, Physical Therapy, Occupational Therapy, Colonoscopies, EGDs, Wound Care and Cardiovascular Services. The most notable facility improvement is the renovation of the old surgical unit creating a new Emergency Room and waiting area, which is five times larger and is equipped with Telemedicine.

Over the years Lawrence County Hospital, like most small hospitals, has seen its share of ups and downs caused by the ever-changing healthcare industry. Due to the support of the surrounding community, committed physicians, and dedicated staff, the hospital has continued to be a vital part of Lawrence County and serve its population.

Lawrence County Hospital is a not-for-profit institution approved by the state of Mississippi for participation in Medicare and Medicaid programs and is licensed by the Mississippi State Department of Health and The Mississippi Hospital Association.

COMMUNITY HEALTH NEEDS ASSESSMENT STEERING COMMITTEE

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 Lawrence County.

Non-profit hospitals are required to conduct a community health needs assessment. These collaborative studies help health care providers build stronger relationships with their communities, identify needs, and dedicate funding and other resources toward programs that clearly benefit local residents.

The Committee is 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 Committee will generate, prioritize, and select approaches to address community health needs.



The hospital's administrator developed a hospital steering committee. The appointed members are listed below. Other members may serve on the Steering Committee as the committee's work progresses.

| | |
|------------------------|-------------------------|
| Semmes Ross | Administrator |
| Shirley Bullock, RN | Infection Control Nurse |
| Debbie Fortenberry, RN | Director of Nursing |
| Kathryn Langston, RN | IOP, Director |
| Robin Mitchell, RN | Education Director |
| Jennifer Moak | CFO |
| Harriet Robbins | HIM Director |
| Sharon Taylor | Dietary Manager |

Not Pictured: Monica Sandifer

Lab Director

COMMUNITY ENGAGEMENT AND TRANSPARENCY

We are pleased to share with our community the results of the Community Health Needs Assessment. The following pages highlight 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.



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 that which is collected by the assessment team. It is data collected 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 that 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
Centers for Disease Control and Prevention
Lawrence County Medical Records Dept.
Trust for America's Health

Mississippi State Department of Health
American Heart Association
US Department of Health & Human Services

Mississippi Center for Obesity Research, University of Mississippi Medical Center
Mississippi State Department of Health, Office of Health Data and Research

COMMUNITY INPUT AND SURVEY

Announcement/survey published in the *Lawrence County Press* the week of January 27, 2014.

YOU ARE INVITED

to participate in a survey about the general health of our community.

Please complete and return by Feb. 8th.
You may go online www.smrhc.com or return the questionnaire by mail:

SMRMC
ATTN: Public Relations
P.O. Box 1307
McComb, 39649



**Always
Listening
To You. SM**

You may fax the questionnaire back to 601.250.4284.

Lawrence County Hospital is conducting a Community Health Needs Assessment and your input is important to us while we learn more about the health needs in our community.

Have you used any health services offered at either hospital or physician clinics in the past 12 months?

Do you or a member of your family live with a chronic disease? If so, what disease?

Where do you go when you are seeking information or education on health related topics?

If you could name a health or wellness program that would benefit the health of you or your family, what would it be?

Is there a health or wellness need that you are aware of in Lawrence County?

Please list any other comments or information you would like to share.



Southwest Mississippi Regional Medical Center

215 Marion Ave. • 601-249-5500 • www.smrhc.com

INPUT FROM THE COMMUNITY

Through internal conversations at the hospital, one-on-one interviews with community leaders, dialogue with county representatives of the Mississippi State Department of Health, the published and online community survey and a Community Focus Group, much information was gathered which was influential as the CHNA Steering Committee developed the hospital's implementation plan.

The participants in the Community Focus Group were:

| | |
|-------------------------|--|
| Roshanda Alexander | Lawrence County High School, Director, Allied Health |
| *Bridget Bass | Georgia Pacific, Director, EMT Training |
| *Cindy Bryan | Town of New Hebron, Mayor |
| *Jarod Evans | Lawrence County Community Development, Director |
| Tammy Fairburn | Lawrence County Superintendent of Education |
| Sidney Fortenberry | Lawrence County Coroner, Lawrence County Hospital, Director of Radiology |
| Steve Garrett | Lawrence County Supervisor |
| James Hill | Board Member, Family Health Care Clinic, FQHC Board Member, Five-County Child Development |
| Gay McElroy | Lawrence County Supervisor |
| *Reverend Tim McCaffery | Monticello Baptist Church |
| *Michelle McCain, RN | Southwest Public Health District VII, Director |
| Kiley McLendon | Lawrence County Family Practice, CFNP |
| Dave Nichols | Town of Monticello, Mayor |
| Debbie O'Neil | Lawrence County Senior Center, Director |
| Christopher Reid | Mississippi State Department of Health |
| Archie Ross | Lawrence County Supervisor |
| *Elizabeth Turnage | Town of Silver Creek, Mayor |
| Kelsey Wells | Lawrence County Press |
| Carolyn Wren | Mississippi State Department of Health |

**Invited but unable to attend*

In addition to the members listed above, the Focus Group was joined by members of the hospital's assessment team.

INPUT FROM THE COMMUNITY (continued)



Community Forum participants discuss health needs in Lawrence County.

There were health needs identified that can be addressed and met by the hospital, and others that 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.

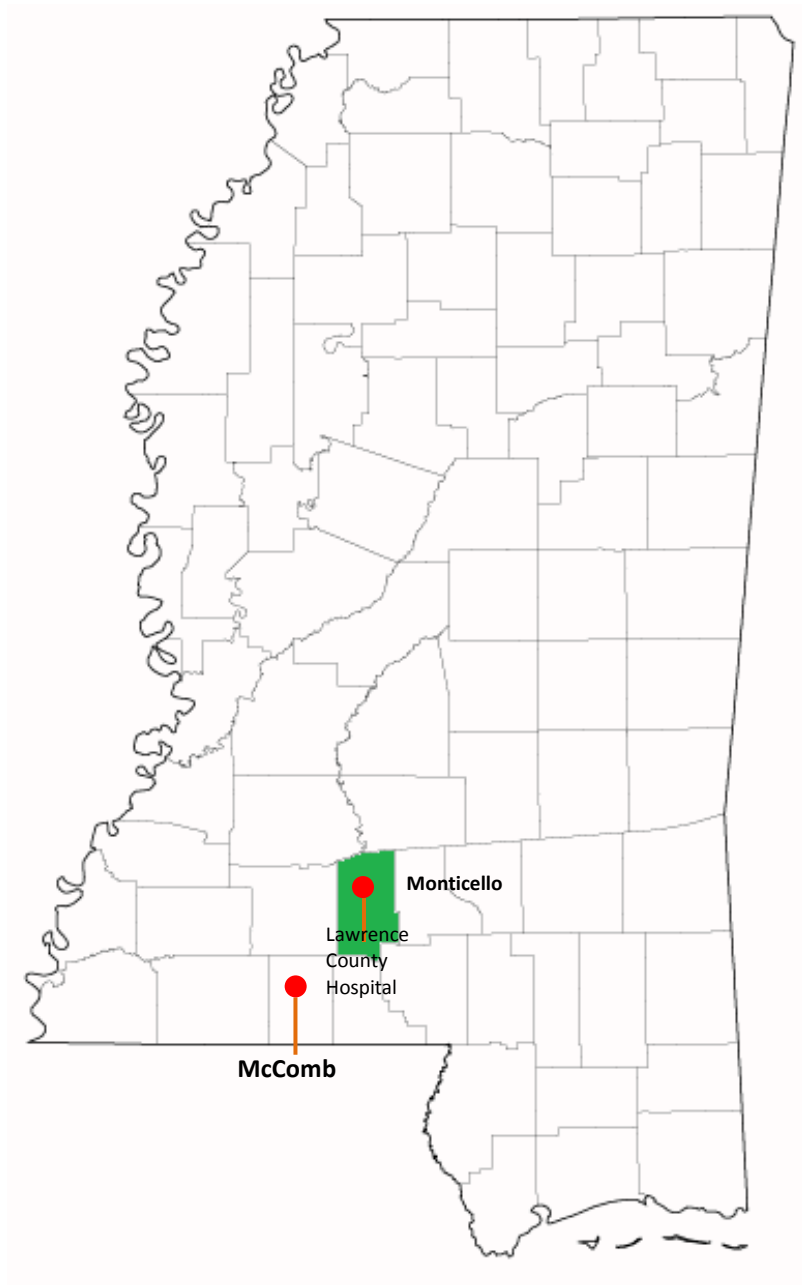
The community felt that healthier living education with emphasis on exercise, nutrition, and avoiding risk factors was most important, especially among the senior population. There is a need for strong community awareness on the health risks which most directly impact diseases such as heart disease, cancer and diabetes. Poor nutritional habits are prevalent in the South, especially in rural communities. It was also felt that the communities in the service area could benefit from educational opportunities emphasizing healthy eating. Because accidents are a major cause of death in the county, safety in all aspects of living will be an area of concentration.

ABOUT THE COMMUNITY

Lawrence County is a county located in the U.S. state of Mississippi. As of the 2010 census, the population was 12,929. Its county seat is Monticello. Lawrence County is named for the naval hero James Lawrence.

According to the 2010 census, the county has a total area of 435.73 square miles, of which 430.63 square miles (or 98.83%) is land and 5.11 square miles (or 1.17%) is water.

LAWRENCE COUNTY, MISSISSIPPI



DEMOGRAPHICS

As of the census of 2010, there were 12,929 people, which is down from the 2000 census. The 2012 estimates show an approximate 3% decrease to 12,551. There were 5,040 households, and 3,749 families residing in the county. The population density was 31 people per square mile. There were 5,688 housing units at an average density of 13 per square mile. The racial makeup of the county was 66.94% White, 32.07% Black or African American, 0.17% Native American, 0.27% Asian, 0.02% Pacific Islander, 0.09% from other races, and 0.44% from two or more races.

There were 5,040 households out of which 35.40% had children under the age of 18 living with them, 55.90% were married couples living together, 14.40% had a female householder with no husband present, and 25.60% were non-families. Twenty-four percent of all households were made up of individuals and 11.40% had someone living alone who was 65 years of age or older. The average household size was 2.61 and the average family size was 3.10.

In the county the population was spread out with 27.30% under the age of 18, 9.40% from 18 to 24, 27.50% from 25 to 44, 22.60% from 45 to 64, and 13.30% who were 65 years of age or older. The median age was 36 years. For every 100 females there were 92.20 males. For every 100 females age 18 and over, there were 88.30 males.

The median income for a household in the county was \$28,495, and the median income for a family was \$37,899. Males had a median income of \$28,925 versus \$18,707 for females. The per capita income for the county was \$14,469. About 16.60% of families and 19.60% of the population were below the poverty line, including 26.10% of those under age 18 and 19.50% of those age 65 or over.

PATIENT ORIGIN

Almost 91% of the patients discharged over the past twelve months reside in Lawrence County, Mississippi. Fifty three percent of all Lawrence County Hospital patients discharged reside in Monticello. Of the patients discharged from Lawrence County Hospital, the majority of those who live outside of Monticello, reside in four towns/communities – Silver Creek, Jayess, New Hebron and Sontag. The majority of the remaining patients came from adjacent Mississippi counties.

SERVICE AREA

Since over 91% of the inpatients reside in Lawrence County and over 50% of those patients reside in and around Monticello, the primary service area for concentration of the health improvement initiatives will be considered Lawrence County with concentration of that patient population centered around Monticello. Activities will also be planned for Silver Creek and New Hebron.

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 no or little 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.

OBESITY IN MISSISSIPPI

The cost to the state of Mississippi due to obesity in terms of our heart health, quality of life, healthcare costs and life spans is astronomical. Obesity contributes to heart disease, stroke, diabetes and a myriad of orthopedic conditions.

Over the past few decades, obesity has become a serious health care issue in the United States. The obesity rate for adults was 13 percent in 1962, it now stands at over two and half times that. Today, 17 percent of children are obese.

As a health condition, obesity costs the country nearly \$150 billion every year. However, it is not just a health condition anymore, according to the American Medical Association. The nation's largest group of doctors voted in June 2013 to classify obesity as a disease.

Obesity has become the most important threat to the health of Mississippians and if left unchecked will overwhelm our healthcare system. What is now a ripple effect of negative health consequences could become a tidal wave of disease, disability and premature death.

OBESITY IN MISSISSIPPI (continued)

The uncontrolled epidemic of obesity is wreaking havoc on our state. With one out of every three adults considered obese, Mississippi is one of the fattest states in America. Obesity predisposes us to many chronic diseases and it produces a ripple effect of negative health consequences: hypertension, heart disease, stroke, kidney disease, neurodegenerative disease, diabetes and even cancer. These conditions kill many Mississippians each year, and at a minimum, rob us of our quality of life.

Obesity is hurting Mississippi's economy. An obese person generates 40 percent more in medical costs per year than a non-obese person. In 2008, Mississippi spent \$925 million in health-care costs directly related to obesity. If the trend continues, obesity related health-care costs will be \$3.9 billion by 2018. Obese adults miss work more often than lean workers, impacting productivity. As a result, obesity hurts Mississippi's business competitiveness and ability to attract new industry.

Obesity is harming Mississippi's children. Mississippi has the highest rate of childhood obesity in the nation. Nearly half of Mississippi children are overweight or obese. Children as young as eight years old are being treated for Type II diabetes and high cholesterol. This was unheard of just a decade ago. The idea that our children will be sicker and die younger than their parents, is not acceptable.

Although, the obesity rate for Mississippi's children has stabilized, the same cannot be said of adults. A recent study shows that by 2030, 67 percent of Mississippi's adults are projected to be obese. These projections released in September by **Trust for America's Health** and the Robert Wood Johnson Foundation would indicate a significant increase from Mississippi's current 35 percent obesity rate.

Adult Overweight and Obesity

Among Mississippi's adults age 18 and over

- 67.9% were overweight, with a Body Mass Index of 25 or greater
- 34.0% were obese, with a Body Mass Index of 30 or greater

Adolescent Overweight and Obesity

Among Mississippi's adolescents in grades 9 through 12

- 16.5% were overweight (85th and 95th percentiles for BMI by age and sex)
- 18.3% were obese (95th percentile BMI by age and sex)

OBESITY IN MISSISSIPPI (continued)

Child Overweight and Obesity

Among Mississippi's children aged 2 years to less than 5 years

- 14.9% were overweight (85th to 95th percentile BMI-for-Age)
- 13.7% were obese (95th percentile BMI-for-Age)

Overweight and obesity are prevalent among all races, all adult age groups and both genders in Mississippi. Although data is not available to determine the number of overweight children living in Mississippi, national data suggests that overweight in children is pervasive and it has nearly doubled in the last 30 years.

Overweight and obesity increase the risk of developing coronary heart disease, hypertension, high cholesterol, Type 2 diabetes, and stroke. Obesity is clearly an independent risk factor for coronary heart disease. For persons with a BMI of 30 or more, mortality from cardiovascular disease is increased by 50-100 percent.

Weight loss in overweight and obese adults has been shown to reduce blood pressure levels, improve cholesterol levels, and lower blood glucose levels in those with Type 2 diabetes.

Dietary factors contribute substantially to the burden of cardiovascular disease (CVD) in the nation and in Mississippi. Food and nutrient consumption patterns affect multiple CVD risk factors including high blood cholesterol, hypertension, diabetes, and obesity. Excessive calorie intake coupled with physical inactivity leads to obesity. Excessive total fat, saturated fat, and cholesterol intake can raise blood cholesterol levels; and a high sodium intake can aggravate hypertension in susceptible persons. Finally, inadequate consumption of fresh fruits, vegetables, and whole grains reduces intake of fiber, potassium and numerous vitamins and minerals associated with reduced risk of heart disease.

HEART DISEASE AND STROKE IN MISSISSIPPI

Mississippi has the highest death rate from cardiovascular disease in the country and heart disease is the No. 1 killer in Mississippi. In 2010, 7,542 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, 1,520 people died of stroke in 2010.

Heart Disease and Stroke Risk Factors in Mississippi

| In Mississippi | | In America |
|----------------|---|------------|
| 26.0% | Adults who are current smokers | 21.1% |
| 40.0% | Adults who participate in 150+ min of aerobic physical activity per week | 51.6% |
| 68.9% | Adults who are overweight or obese | 63.5% |
| 5.4% | Adults who have been told that they have had a heart attack | 4.4% |
| 4.0% | Adults who have been told that they have had a stroke | 2.9% |
| 4.6% | Adults who have been told that 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 | 13.1% |

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 (American Heart Association, 2010).

The No.5 killer in Mississippi as well as in Lawrence 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.

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 | |

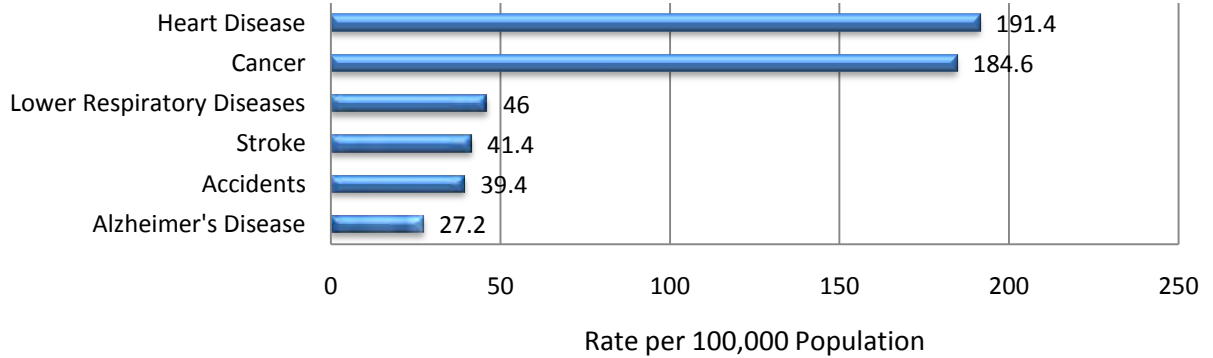
LIFESTYLE AND DISEASE

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

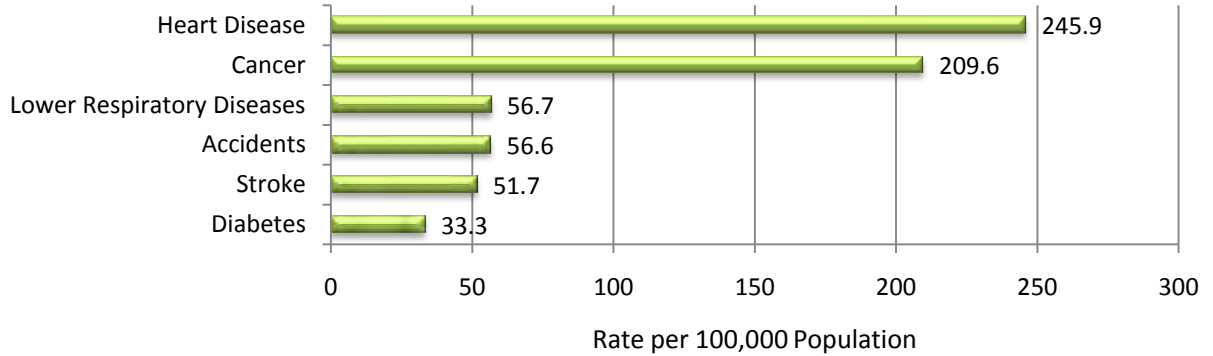
In Lawrence County, the three major diseases that result in the most deaths are lifestyle diseases. They are heart disease, cancer and strokes. Accidents, although not a disease, can be lifestyle related, especially motor vehicle accidents. Accidents are the third largest cause of death in the County.

This is why the CHNA 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.

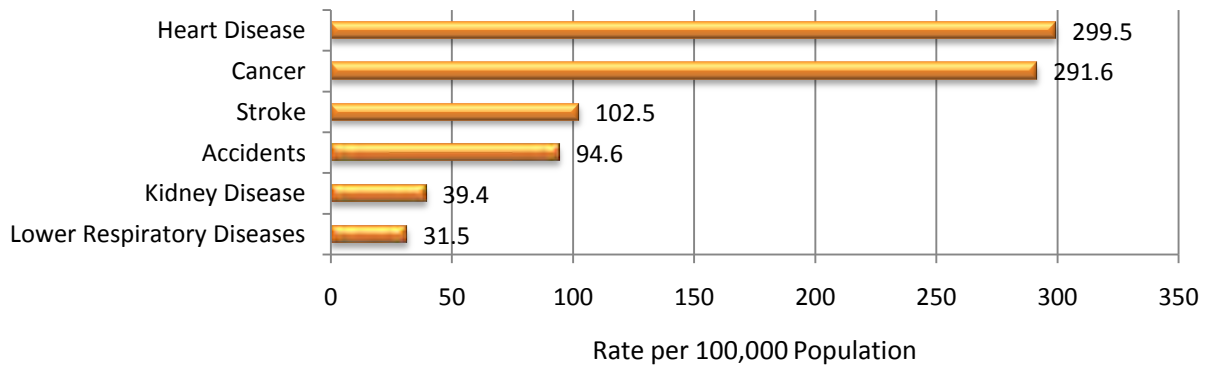
United States Leading Causes of Death 2011

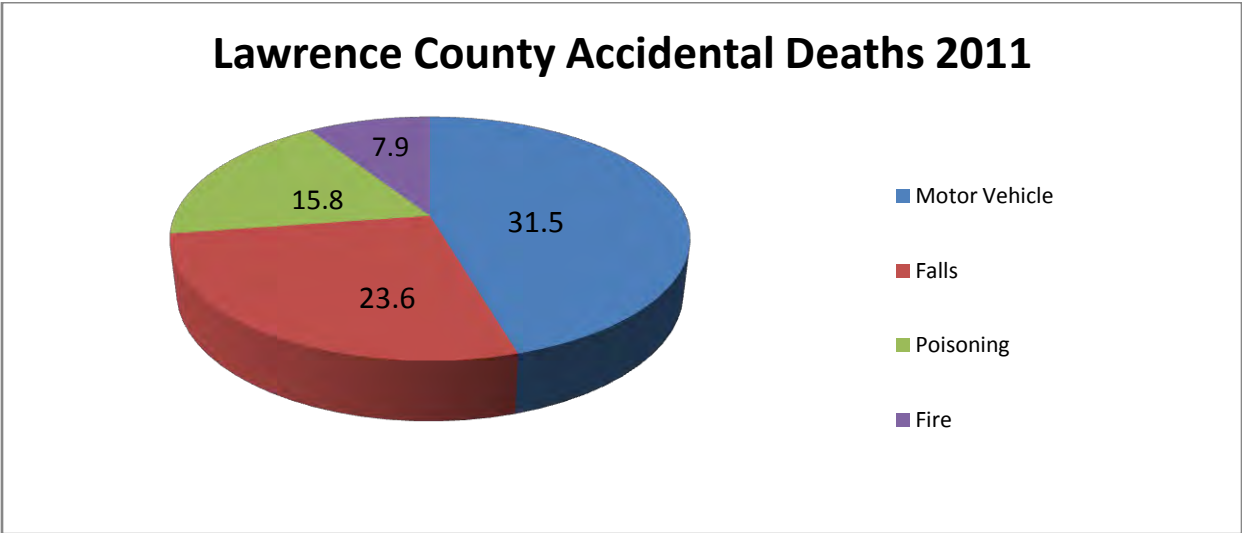
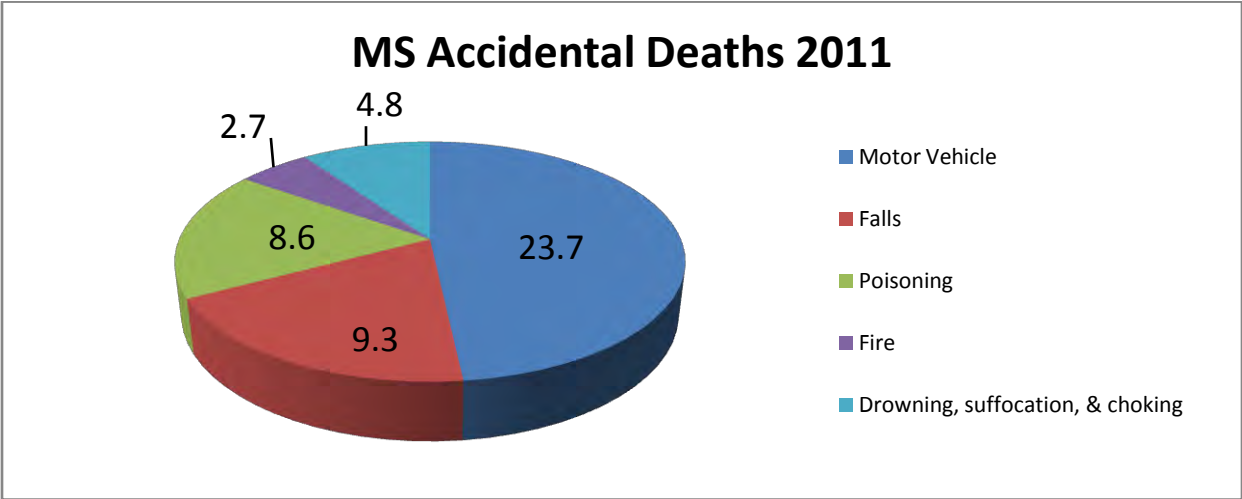
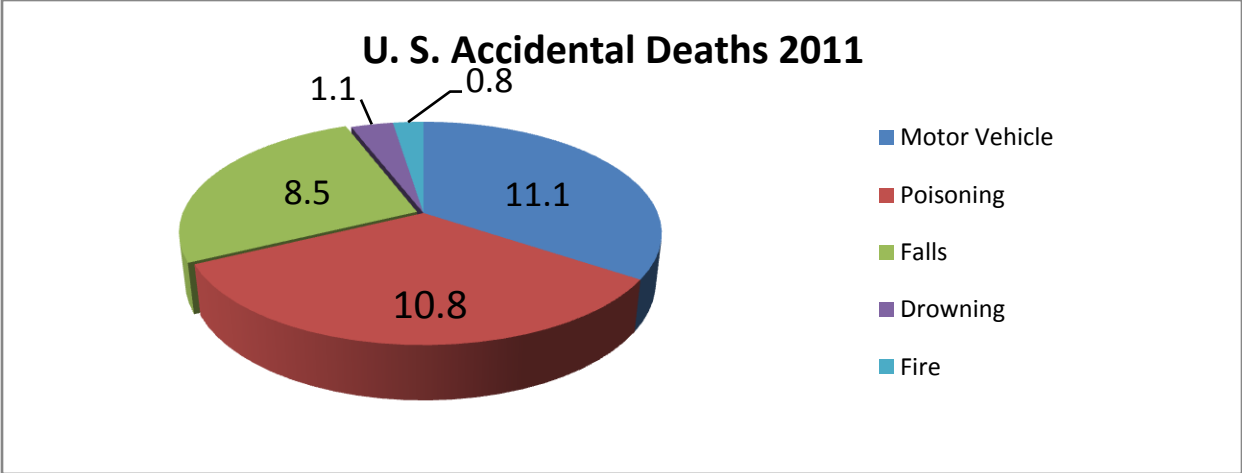


Mississippi Leading Causes of Death 2011



Lawrence County, MS Leading Causes of Death 2011





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, and lifestyle improvement.

Hypertension, heart disease, stroke, diabetes, weight loss/obesity and nutrition were all health needs identified by both the community members and healthcare 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 groups.

PRIORITIZATION

The Steering Committee understood the facts the primary and secondary data communicated in reference to the health of the citizens of the primary service area of Lawrence County.

- The County exceeds the U.S. and State in rate of deaths from heart disease.
- The County exceeds the U.S. and State in rate of death from cancer.
- The County exceeds the U.S. and State in rate of death from stroke.
- The County exceeds the U.S. and State in rate of deaths from accidents.

The smaller non-urban hospital cannot provide the same level of care in the treatment of chronic disease as a larger regional hospital. The local community hospital can, however, work in concert with the regional hospital to assist patients in their access to specialized care. The local hospital can provide emergency care and arrange, when necessary, expedited transport to nearby specialized facilities.

Lawrence County Hospital can be the catalyst for community health education, prevention, and enhancement of community wellness activities. It can be invaluable in providing its community with the health resources for making wiser health and lifestyle decisions, thus being the major player in disease prevention.

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.

Six implementation strategies that will address major health issues 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. Lawrence County Hospital is proud to have been the catalyst in this effort. However, to address some of the needs identified will require expertise and financial resources far beyond what a small community hospital can provide.

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. Lawrence County Hospital has identified six significant initiatives it will undertake over the next two years. These collaborative projects should help improve the health and overall quality of life in our community. Each project is described in detail in the following 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 next two years.

CHNA Strategic Action:

BUILDING A HEALTHY MISSISSIPPI

The city of Monticello in conjunction with the towns of Silver Creek and New Hebron are joining together to participate in the “Building a Healthy Mississippi” program sponsored by Blue Cross Blue Shield of Mississippi. The BCBS Foundation states that it supports projects that are “committed to improving the health and wellness of our fellow Mississippians with a focus on healthy eating and exercise.” In support of the town’s commitment to this program that focuses on healthy eating and exercise, on March 3, 4, and 5, 2014, Lawrence County Hospital will sponsor three or four Healthy Living breakfasts with at least one to be held in each town. These breakfasts will be held in the morning so that participants can be fasting (nothing to eat or drink after midnight) for accurate screening results. Free screenings for Blood Sugar, Total Cholesterol, Blood Pressure, and BMI will be offered. The following outlines a high level overview of what will be covered:

- **Blood Sugar**

The Blood Sugar test is important because according to the Mississippi Physicians Care Network “one out of three people in Mississippi with diabetes don’t know they have it or are not being treated.” The average blood sugar range is 80 to 120. If someone’s glucose is too high or too low they may have diabetes. Glucose is sugar in the blood that is the body’s main source of energy.

- **Total Cholesterol**

Sometimes the body makes and stores extra fats and cholesterol which is why we test total cholesterol. Normal range is 200 or less for total cholesterol. Living with high cholesterol can cause a heart attack if not treated. Participants will receive educational materials on HDL “Healthy” cholesterol and LDL “Lousy” cholesterol.

- **Blood Pressure Test**

Blood pressure is a measure of the amount of force it takes for your heart to pump blood through your body. High blood pressure increases your risk of having a heart attack or stroke and for developing kidney disease. Blood pressure should be less than 120/80. “In Mississippi, close to one million people have high blood pressure and 300,000 do not know they have it,” according to Mississippi Physician Care Network.

BUILDING A HEALTHY MISSISSIPPI (continued)

▪ **Body Mass Index**

Body Mass index is a measure of a person’s weight in relation to their height. The target is less than 25 and a number over 25 means you are overweight while a number over 30 means you are obese. It is important for people to know their BMI number because extra weight can lead to high cholesterol, heart disease, diabetes, and many other chronic illnesses.

Target Population

We will target all individuals living and working in Lawrence County and surrounding areas.

Goal/Desired Outcomes

Our goal is to educate the public on how to take charge of their health for a better life by “Knowing Your Numbers” in weight control, increasing physical activities, eating healthy, and knowing their blood sugar level, total cholesterol number, blood pressure, and BMI.

Process/Time Frame/Location

The following dates, times, and locations are scheduled for the Kick-Off Breakfasts:

- | | | | |
|----------------|---------------|---------|--------------|
| ▪ New Hebron | March 5, 2014 | 6:30 AM | |
| ▪ Silver Creek | March 6, 2014 | 6:30 AM | |
| ▪ Monticello | March 7, 2014 | 6:30 AM | Civic Center |

Measure of Success

We will measure the success of this project based on the number of participants, problem areas identified, and the number of individuals that follow up with their physicians.

Cost/Funding/Human Resource—Other Resources

We estimate the cost to be ten dollars per person with a target group of three to four hundred individuals. The funding will come from the Administration, Education, and Laboratory Departments of Lawrence County Hospital.

Collaborative Partners

- Lawrence County Hospital
- Town of Monticello
- Town of New Hebron
- Town of Silver Creek

CHNA Strategic Action:

MENDED HEARTS

Heart disease is a general name for a wide variety of diseases, disorders and conditions that affect the heart and blood vessels. Heart disease is the number one cause of death in the United States and Lawrence County. For this reason Lawrence County Hospital's Cardiology Clinic in conjunction with Southwest Cardiovascular Institute has begun a program called Mended Hearts.

Target Population

A special group of over 300 people who are recovering from a cardiac procedure will all be included in our target population.

Goal/Desired Outcomes

Our goal is to educate individuals on lifestyle choices and issues which can be contributing factors to heart disease (Examples: Obesity, diabetes, hypertension, improper nutrition, physical inactivity and tobacco use). Also, we would like to make accessing top quality cardiac care a priority for the previously underserved population in and around our hometown. Ultimately, this will improve the cardiovascular health of the area as a whole.

Process/Time Frame/Location

We are sponsoring a "Mended Hearts Luncheon" featuring Dr. Ali Homayuni, Cardiologist, as speaker. He is from Southwest Cardiovascular Institute, which is one of only 130 hospitals nationwide to receive the American College of Cardiology Foundations' NCDR ACTION Registry-GWTG Silver Performance Award for level of care. He will educate the public and share information regarding how good cardiovascular health is something most people have to work to achieve. Some topics will include proper diet, exercise and lifestyle choices and how they affect a healthy heart. This luncheon is a kick-off for the forming of a "Mended Hearts Group" which Lawrence County Hospital will be targeting with educational materials throughout the year.

MENDED HEARTS (continued)

Measure of Success

- The number of the “Mended Hearts Group” who show improvement in their lifestyle choices to reduce repeated cardiac procedures.

Cost/Funding/Human Resource—Other Resources

All cost and funding is provided through the Educational Department of Lawrence County Hospital. We will provide lunch, educational materials and guest Speaker Dr. Ali Homayuni for up to 300 members of the Mended Hearts program. We, also strive to provide free testing and educational materials for all individuals in our target group.

Collaborative Partners

- Monticello Baptist Church
- Cardiovascular Institute of SMRMC



CHNA Strategic Action:

CANCER AWARENESS AND EDUCATION

According to the American Cancer Society, “More than one million people in the United States get cancer each year.” Cancer is the second highest cause of death in Lawrence County. Lawrence County Hospital will strive to increase the cancer survival rate by providing awareness activities and screenings for early detection and by participating in a lifesaving research study. Some individuals will be provided in-depth information about specific types of cancer, their risk factors, early detections, and diagnosis and treatment options.

Target Population

Awareness will be targeted toward the general public and school children. Screenings will be targeted to the adult population of Lawrence County and will be open to the public. The research study will target individuals from 35 to 65 years of age that volunteer to participate.

Goal/Desired Outcomes

Our goal is to provide lifesaving prevention and screening activities and education with our local community while working to save lives, reduce deaths and create a world with less cancer.

Process/Time Frame/Location

Cancer Awareness Events

- “Striking Out Cancer, the Purple Game” will be sponsored by Lawrence County Hospital, DME South and St. Luke’s Home Health:
 - The Lawrence County High School baseball and softball teams will sport purple attire on the fields during regularly scheduled games in March 2014, as the players and coaches do their part to recognize and support the need to continue the fight against cancer.
 - Cancer survivors are invited to throw out the first pitch, educational handouts are distributed, and keynote speakers explain how cancer affects lives.

- “Pink Friday Night Lights”
 - Lawrence County High School celebrates an annual football game night to raise awareness for breast cancer research, supporting the fight to end breast cancer. Floating lanterns are released in memory of cancer victims and in honor of cancer survivors. Honored speakers give some insight into the disease and educational information is distributed at the game.

CANCER AWARENESS AND EDUCATION (continued)

- A Pep Rally is held the night before the game in recognition of Breast Cancer Awareness Month. Everyone is encouraged to wear their “Pink” and to compete in the “Best Dressed in Pink” contest. Pink spirit items are available for purchase at this community-wide pep rally, with all proceeds going to the American Cancer Society.
- Relay for Life
 - Lawrence County Relay for Life is a county-wide community event held annually. Lawrence County Hospital is a platinum sponsor of this event and provides additional support for the cancer survivor events held prior to the main event. The hospital team participates with a tent site the night of the main event which provides educational materials while raising money for the cause.

Colorectal Cancer Screenings

March has been designated Colorectal Cancer Awareness Month. Recognizing how screening can reveal problems that, with prompt treatment, can reduce the risk of colon cancer, Lawrence County Hospital will be providing free Fecal Occult Blood Tests (FOBT) to the community.

The advantages of the FOBT are as follows:

- No cleansing of the colon is necessary.
- Samples can be collected at home.
- Cost is low compared with other colorectal cancer screening tests.
- Does not cause bleeding or tearing/perforation of the lining of the colon.

There will be a kick-off event where participants will be given items needed to collect samples for testing and will be provided with educational materials to explain the process and the importance of early detection. For one week, Lawrence County Family Practice will accept the samples and Lawrence County Hospital will perform the testing. The participants will be contacted with the results and aided in any further steps needed.

If issues are found, the individuals will be assisted in finding a course of action or what their next step should be. It will be recommended that they follow up with their physician, or the staff at Lawrence County Family Practice will be available to answer questions and recommend further action.

CANCER AWARENESS AND EDUCATION (continued)

Cancer Prevention Study

Lawrence County Hospital is fighting back against cancer by hosting enrollment at our facility for the American Cancer Society's new research study called the Cancer Prevention Study-3. By joining this study, which follows subjects over a twenty-year span of time, individuals in our community are helping researchers better understand the genetic, environmental and lifestyle factors that cause or prevent cancer, which will ultimately save lives.

The study is open to anyone who is willing to make the long-term commitment, is between the ages of 30 and 65, and has never been diagnosed with cancer. Blood samples and survey data are collected from each participant to be analyzed for cancer factors.

Measure of Success

This strategy is raising the awareness of cancer and helping individuals recognize the importance of early detection for prevention. Success will be found in the number of individuals that have early detection which should result in improved outcomes. Also, we hope to see a decrease in the number of individuals who are diagnosed with cancer through education in lifestyle choices which are found to increase the risk of developing cancer.

Cost/Funding/Human Resource—Other Resources

The cost of all these events and projects is approximately \$5,000. Funding is a combination of financial support from the hospital and fundraising activities.

Collaborative Partners

- American Cancer Society
- Lawrence County Schools
- DME South
- St. Luke Home Health

CHNA Strategic Action:

BE ACTIVE, LIVE LONGER

The “Be Active, Live Longer” Initiative will focus on the needs of the senior adult population. Elderly people have different challenges and needs than the rest of the population that must be met every day for them to live independently for as long as possible. Lawrence County Hospital will provide mental wellness screenings and support through its Intensive Outpatient Department. Lawrence County Hospital will also present healthy living seminars including the following topics:

- Personal Hygiene
- Nutrition
- Prescriptions and Doctor Visits
- Exercise and Activity



Target Population

Individuals 55 and older in our community and the surrounding area.

Goal/Desired Outcomes

The elderly population wants to live independently in their communities and homes as long as possible. As they age and face the challenges that arise in daily living, our goal is to equip them with the knowledge to best handle these challenges. While some of these challenges may prove impossible to overcome, we can work together to help the elderly maintain their independence as long as possible.

Process/Time Frame/Location

Mental Wellness

- Mental wellness education and screenings in 2014 and 2015
 - Lawrence County Hospital employs individuals trained in the mental health of the elderly. These individuals will participate in the Healthy Living Seminars sponsored by Lawrence County Hospital, and distribute material to educate the community, healthcare providers, caretakers, and the elderly, of signs associated with a possible mental health issue. They will provide screenings on an individual basis to evaluate and identify the need for treatment.

BE ACTIVE, LIVE LONGER (continued)

- They will be involved in several other local health fairs:
 - Southwest Mississippi Opportunity in April of 2014 at South Pike High School in Magnolia
 - TRIAD in June of 2014 at Lawrence County High School in Monticello
 - Lawrence County Nursing Center in November of 2014 in Monticello
- Intensive Outpatient Program (IOP)
 - This program is designed to treat elderly individuals in need of intensive psychiatric intervention, but who can safely and effectively be treated in an outpatient setting. This active treatment is for individuals with mental disorders and features several options. Intensive Outpatient treatment is designed for the patient who is no longer inpatient in the hospital but requires more intense therapies than physician office visits.
 - Intensive Outpatient treatment can be a transition from a higher level of care, or it can be used as an early intervention tool to prevent the need for a higher, more expensive level of care.
 - Patients in this program attend three days a week for three clinical hours each day. Therapies are clearly focused on and structured around current problems. The patient and family members are active participants in setting treatment goals. The patient's progress toward goals is continually assessed to assure success. The program is monitored to make sure the patient's treatment plan is beneficial, necessary and appropriate.
 - IOP is working toward achieving a maximum daily census for this program of ten patients, which ensures a good ratio of patients and caregivers. Another plan is to have present and former patients attend the hospital's Healthy Living Seminars in 2014.
 - All patients deemed eligible for the Outpatient Program must be: 55 or older; living within fifty miles of Monticello; diagnosed with a psychiatric disorder as evident by an acute disturbance in mood, thinking, perception or behavior; cognitively intact and have the capacity to actively participate in all therapies prescribed for the patient.
 - The staff includes a Psychiatrist who sees all patients at least weekly as well as a program Coordinator, who oversees and manages the program. There is a Registered Nurse and Licensed Social Worker who conduct program therapies.
 - Current and former patients in the Intensive Outpatient Program will be encouraged to attend the Healthy Living Seminars planned for 2014.

BE ACTIVE, LIVE LONGER (continued)

Healthy Living Seminars

- Personal Hygiene in June of 2014 with a dental professional and a representative from DME South as speakers
 - Putting first things first, proper hygiene is essential. Dental care is one issue we would like to focus on during this seminar. Teeth need to be brushed, and dentures need to be soaked daily. Whether elderly people want to shower or bathe daily or every few days, safety needs to be a top concern. Items such as a railing or bars, nonslip mats and shower chairs can help maintain balance and prevent falls.
- Nutrition in September of 2014 with Sharon Taylor, Dietary Manager & Food Service Director, Lawrence County Hospital, and Natasha Haynes, Nutritionist, as speakers
 - It is important to ensure that an elderly person eats proper meals, especially if he/she is living alone and may have difficulty cooking. It might be tempting for someone to snack rather than cook for one person, which can lead to inadequate nourishment. We will stress the importance of checking labels and refrigerator items frequently and throwing out all expired items. If it is hard for them to get around, it may be difficult to keep fresh food on hand, so we will discuss some healthy alternatives. Also it may be possible for caretakers to prepare food in advance and freeze the meals to be reheated and eaten.
- Prescriptions and Doctor Visits in August of 2014 with Kiley McLendon CFNP, Lawrence County Hospital & Lawrence County Family Practice, as speaker
 - Health issues that require attention become a greater concern with age. If the elderly person has any condition requiring medications prescribed by the doctor, it is vital that they take the medications at the right time and in the proper dosage. If they use over-the-counter products as well, it is vital to know the importance of reading labels and consulting a doctor or pharmacist to ensure the products have no possible interactions with prescribed medications. We will also address how to choose a Medicare Part D drug plan, ways you can save money on prescriptions, and discounts offered directly from drug manufacturers.
- Exercise and Activity on October 30, 2014, with Jack Douglas, Director of PT at Lawrence County Hospital, employed by The Summit Health & Rehab, as the speaker.

BE ACTIVE, LIVE LONGER (continued)

- Exercise is important to maintain muscle function and to keep elderly people as healthy as possible. We will partner with The Summit Health & Rehab in providing a class on the importance of exercise and alternatives for patients with mobility and health concerns. We will also encourage mind-stimulating activities and discuss how they are just as important as exercise. The swing bed activities coordinator will conduct several demonstrations on the type of mind-stimulating activities that will be discussed.

Measure of Success

The possibility of fewer hospital admissions annually per patient and the increased time these individuals are able to maintain their independence.

Cost/Funding/Human Resource—Other Resources

All resources needed to conduct activities for mental wellness will be provided through the Intensive Outpatient Department of Lawrence County Hospital. These resources will include staff assigned to distribute materials and conduct screenings. For activities included in the “Be Active, Live Longer” Initiative, we will need to provide drinks, meals or snacks, educational materials, and possibly door prizes for fifty elderly community members per seminar. The refreshments will be provided by Lawrence County Dietary Department with costs covered by Lawrence County Administration and Education Departments.

Collaborative Partners

- The Summit Health & Rehab
- DME South
- TRIAD
- Lawrence County Senior Center

CHNA Strategic Action:

KIDNEY DISEASE AWARENESS

26 million Americans have kidney disease. That's one in nine adult Americans! Millions more are at risk. Mississippi ranks among the top in the nation in incidences of kidney disease. As with cancer or heart disease, kidney disease can be a silent killer. Because there may be no symptoms with kidney disease, many people are not diagnosed until too late in this progressive disease. Lawrence County Hospital has free screenings planned for our community.

With guidance from REAP, the Renal Evaluation and Assessment Program of the Mississippi Kidney Foundation, Lawrence County Hospital and Lawrence County Family Practice will be offering free screenings for kidney disease in July of 2014, we are trying to detect kidney disease in its earliest stages. With early diagnosis and early treatment, kidney disease is treatable.



Target Population

Anyone in the Lawrence County area who is considered at risk due to diabetes, high blood pressure, or a family history of kidney disease is our target population.

Goal/Desired Outcomes

Kidney disease is the sixth leading cause of death in Lawrence County, which is higher than the state and national averages. Lawrence County Hospital would like to aid in the early detection of kidney disease in an effort to improve treatment options.

Process/Time Frame/Location

There will be an awareness day where participants will be screened for risk factors for kidney disease. A blood and urine test will be performed, which is the only way to know if you have kidney disease. The blood test helps to measure your GFR, which determines how much blood your kidneys are filtering each minute. The urine test checks for protein in your urine. Also, participants will be provided with educational materials to explain the process and the importance of early detection. Lawrence County Family Practice will accept the samples and Lawrence County Hospital will perform the testing. The participants will be contacted with the results and aided in any further steps needed.

KIDNEY DISEASE AWARENESS (continued)

Measure of Success

Our success will be shown by the number of at-risk patients who participate in the screening and the number of participants who are identified as being in one of the early stages and who follow up with their doctor, which results in prevention or delay of kidney disease.

Cost/Funding/Human Resource—Other Resources

We estimate a cost of five dollars per participant for this project. Funding will come from Lawrence County Hospital and Lawrence County Family Practice.

Collaborative Partners

- Lawrence County Family Practice
- Mississippi Kidney Foundation

CHNA Strategic Action:

SAFETY FIRST

No matter whether you are at home, at school, at work or in the community, knowing and implementing prevention strategies may help you to avoid an accident or better cope with an emergency situation. Accident prevention can be implemented by individuals at home, by employers and employees on a job, by students and teachers at schools, or even community leaders to keep everyone aware of potential hazards and be ready in case of an emergency. Lawrence County Hospital will implement a strategy on “Safety First” that will include participation in a safety day for school students, fall prevention activities/luncheon, and a Rollover Simulator to be on display at an afternoon ballgame in March, 2014.

Target Population

The general public is the main target population. We will try to focus on school students, patients, elderly, and hospital staff in the hope that they will carry this awareness into their everyday lives and out into the community.

Goal/Desired Outcomes

- The desired outcome of “Safety First” in general is enhancement of community knowledge pertaining to safety procedures, conservation and fall prevention.
- The main goal of the Rollover Simulator is to reduce traffic crash-related fatalities and injuries.

Process/Time Frame/Location



- In September of 2014 and 2015, Lawrence County Hospital will participate in a county-wide Farm Safety & Conservation Day targeted toward fourth-graders throughout the county. This event will cover:
 - Fire Safety – McComb Fire Department will set up a house with a smoke bomb to have the students crawl out through the smoke, showing how to exit the home in a fire emergency.
 - Tobacco Education – Mississippi Tobacco Free Coalition

SAFETY FIRST (continued)

- Electrical Safety – Southern Pine Electric Power Association
- ATV Safety – Mississippi Farm Bureau
- Boat Safety – Mississippi Department of Wildlife and Fisheries
- Snake Education & Safety – Mississippi Soil & Water Conservation Commission
- Firearm Safety – Lawrence County Sheriff's Department
- Motor Vehicle & Seat Belt Safety – Mississippi Department of Transportation will display the roll-over simulator
- Food Safety – Mississippi Cattlemen's Association
- Fall Assessment
 - In December of 2013, Lawrence County Hospital partnered with Electronic Caregiver and Lawrence County Senior Center to provide fall assessments, with another one scheduled in last quarter of 2014. An assessment is a useful tool that is often used in screening for risk factors that could cause falls and identifying the ones that warrant further attention.
 - Depending on a variety of factors, most of which are directly related to the aging process, some people are two, three, or even four times more susceptible to falling than others. Falls are the #1 cause of accidental death and loss of independence for seniors. Each person attending the free fall-risk assessment will be provided with a one-on-one screening for the following informational factors:
 - Risk Ratio – Assists in the identification of various gait parameters and their possible contributions to falls in older adults.
 - Gait Analysis – Provides data on how individuals move as they walk and can be interpreted to assess whether a person is at an increased risk for falls.
 - Gait Variables Associated with Falling –
 - Gait Velocity – the velocity at which a person moves forward during walking
 - Cadence – the number of steps a person takes per minute
 - Stride Length – the distance between heel contact points for the same leg
 - Swing Time – the percentage of time a person spends with only one leg contacting the ground
 - Double Support Time – the percentage of time a person spends with both feet in contact with the ground

SAFETY FIRST (continued)

- As healthcare providers, it is important to screen patients during routine medical examinations and upon admission to the hospital in an effort to improve patient safety while in the facility. Patients should be asked about the occurrence of falls and any gait or balance problems, and then be provided with educational materials.
- If a patient is at risk for falling upon admission to the hospital, fall precaution measures will be initiated by the nursing staff. In some cases physical therapy may be called in to provide fall prevention education tailored to the individual.
- Rollover Simulator
 - The Rollover Simulator recreates what happens to vehicle occupants during a rollover crash. The simulator works by rotating a trailer-mounted half-truck up to 30 miles per hour with crash test dummies positioned in the vehicle in place of occupants.
 - An afternoon demonstration is planned at a ballgame in March of 2014 with a rollover simulator provided by the Mississippi Highway Safety Patrol's Public Relations Department. Lt. Benjamin Boyd will be conducting the simulation and will be on hand for explanations and questions.

Measure of Success

- To increase the usage of seat belts and child safety seats by students, teenage drivers, and their families.
- To increase the number of participants attending Farm Safety & Conservation Day.
- To increase the number of fall assessments completed, which will reduce, pain, suffering, medical complications, hospitalization, and mortalities.

Cost/Funding/Human Resource—Other Resources

For Farm Safety & Conservation Day and Fall Assessments, Lawrence County Hospital will provide staff, educational materials and door prizes to assist in these county-wide events.

The Rollover Simulator will be provided by the Mississippi Highway Safety Patrol and Lawrence County High School will provide a venue, with no costs to the hospital. The hospital will organize and promote the event.

SAFETY FIRST (continued)

Collaborative Partners

- Mississippi Highway Safety Patrol
- Lawrence County Soil & Water Conservation District
- McComb Fire Department
- Mississippi Tobacco Free Coalition
- Southern Pine Electric Power Association
- Mississippi Farm Bureau
- Mississippi Department of Wildlife & Fisheries
- Mississippi Soil & Water Conservation Commission
- Lawrence County Sheriff's Department
- Mississippi Department of Transportation
- Mississippi Cattlemen's Association
- Electronic Caregiver
- Lawrence County Senior Citizen Center