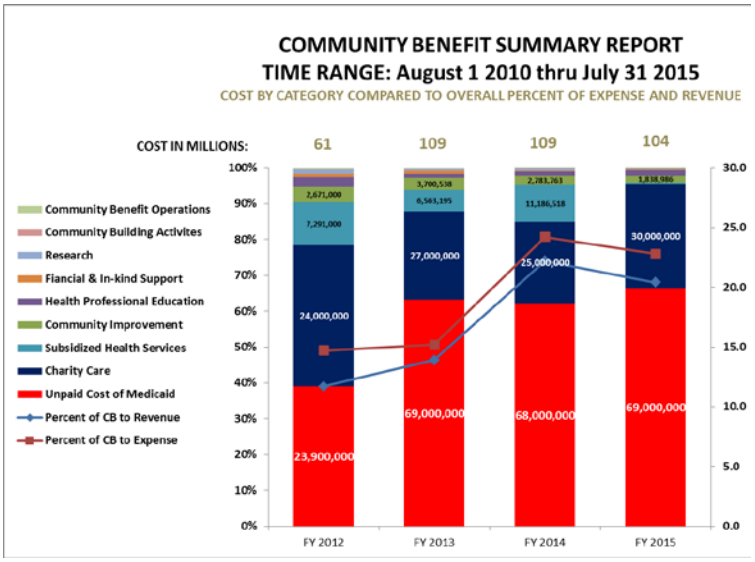
Phoebe Putney Memorial Hospital
Community Health Needs Implementation Strategy
2017-2019

Introduction

> *Greater access to effective, efficient medical care is important for our nation's wellbeing, but medical care cannot deliver wellness, nor can health care system reforms alone bring costs under control. Instead, we need a new vision of health that rests on changing the lives of Americans in ways that lead to healthier, longer lives.*
>
> Robert Wood Johnson Foundation

In 1911, Phoebe Putney Memorial Hospital (PPMH) was established in answer to a community need to have a hospital in the remote southwestern corner of Georgia. The hospital was realized through the founding $25,000 donation of Judge Francis Flagg Putney. Judge Putney had three requirements aligned to his philanthropy: that the hospital serves all regardless of race or ability to pay; that it be built of brick to withstand fire; and that it be named for his mother, Phoebe Putney. Phoebe Putney Memorial Hospital garnered the immediate support of the community, whose members brought linens and supplies to stock their new hospital. In return, Phoebe Putney Memorial Hospital became the safety net for care, ministering to the most vulnerable in the community, devoting itself to improving health in a region lacking in hospitals and healthcare providers. Phoebe has stayed true to its founding mission ever since, making sure people throughout Southwest Georgia have access to the medical care they need regardless of ability to pay. In 2016, PPMH is the dominant healthcare provider and the region's second largest employer. For the fiscal year ended July 31, 2015, PPMH provided $104 *[see chart 1]* million in community benefit and reinvestment in those categories identified by the Internal Revenue Service. PPMH is the flagship of a four-hospital system (either owned/leased or managed), with two campus locations in Albany, Ga., one of which was acquired in December 2011 and converts a previously for-profit organization to tax-exempt status. The ability of the hospital to provide community benefit has grown as the scale of the organization has grown, providing benefit more broadly in the Southwest Georgia region to meet mission. Facilitating access to primary care is in the best interest of the hospital and community, and therefore, in addition to its own family practices and rural clinics, PPMH has also had a long-term and beneficial relationship with Albany Area Primary Health Care, a federally qualified clinic with regional facilities. PPMH

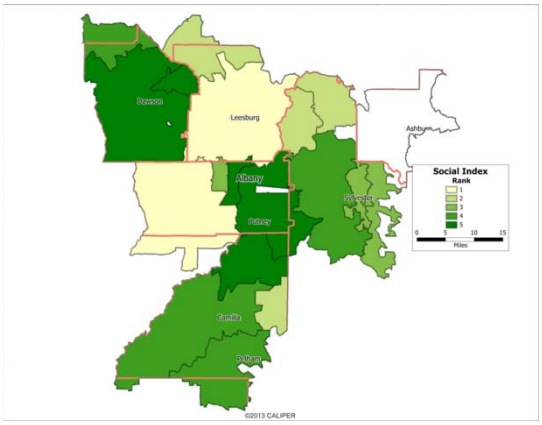
Chart I: Community Benefit Summary Report



delivers high quality, safe healthcare to its patients and families, and extends its commitment further by reinvesting in the greater community. The organization believes in creating capacity in the community and is an active partner with patients, families, neighborhoods, government and civic organizations to provide access to care, innovation in treatments and research, and advocacy for change. The area served is a high-needs community, and the hospital leadership recognizes the priorities identified in the needs assessment, but also the broader responsibility to provide services and service lines that might not otherwise be available to the citizens of the region. As PPMH considers its implementation strategies, it is informed by its specialty areas and populations, especially all women and children's services, inpatient rehabilitation, trauma, emergency and urgent care, neuroscience, cardiovascular and hospice and palliative care. These carefully planned services provide the infrastructure for delivering total community benefit and meeting the mission. PPMH funds and supports medical education and graduate medical education, and through its family medicine residency program has greatly alleviated the shortage of physicians in rural areas and will continue to evaluate the recruitment of physicians in specialties impacted by shortage. PPMH's leadership is committed to growing programs and services, both in and outside the hospital, that place care in the most effective and appropriate settings.

Community Served –While the Community Health Needs Assessment reviewed data for its five county Primary Service Area, the implementation plan focused on those areas with the greatest population density and the greatest socio-economic need that correlates with preventable hospitalizations and poor health outcomes ***[see map 1***]. The geographic target population will reside within Dougherty County and target zip codes with the highest incident rates of health outcomes that are scalable.

Map 1: *Socio Needs Index Created by Community Health Solutions shows high socio economic need correlated with poor health outcomes in zip codes in darker green.*

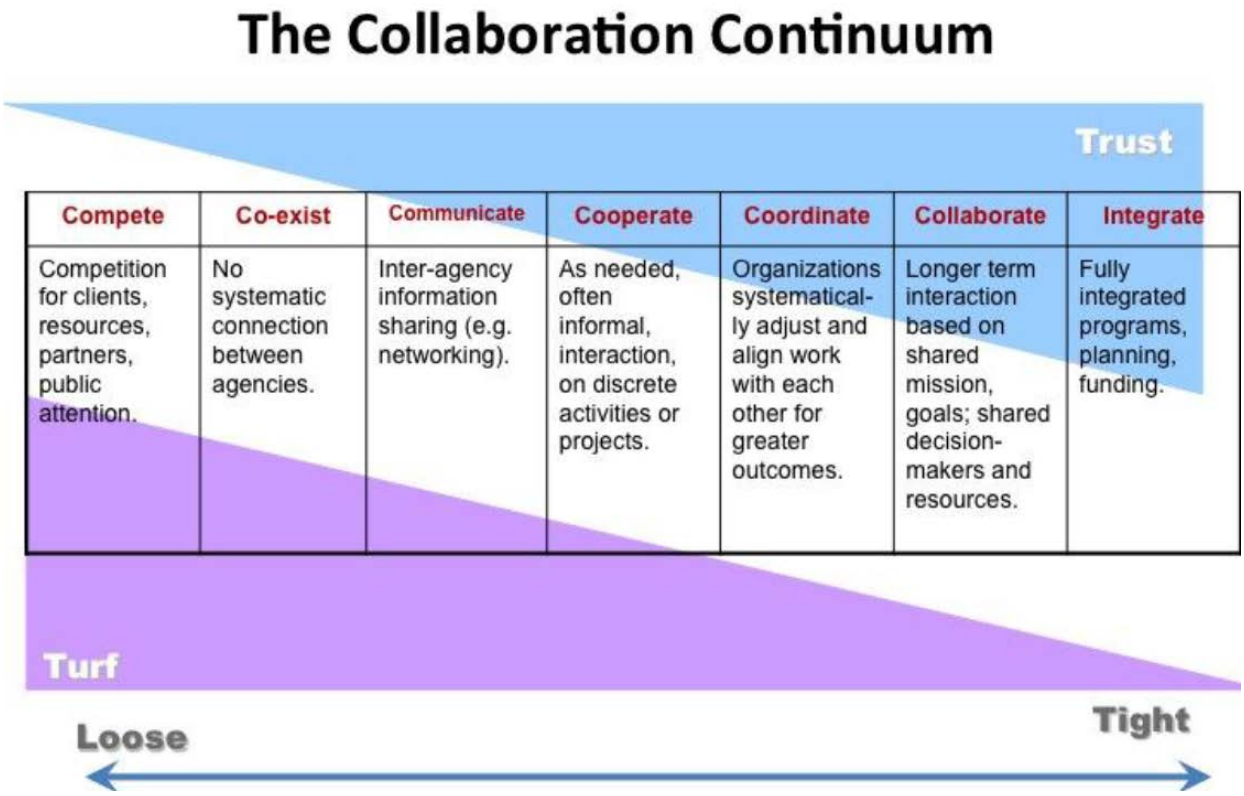


How It Works

- ***All Communities can be described by various social and economic factors that are well known to be strong determinants of health outcomes.***
- ***The SocioNeeds Index takes these factors (which range from poverty to education), and***
- ***Generates and Index Value (from 1-100) for each zip code in the nation. Those with the highest values have the highest socioeconomic need which is correlated with preventable hospitalizations and premature death.***
- ***Index values are assigned a rank of 1 to 5.***

A description of how the implementation strategy was developed and adopted

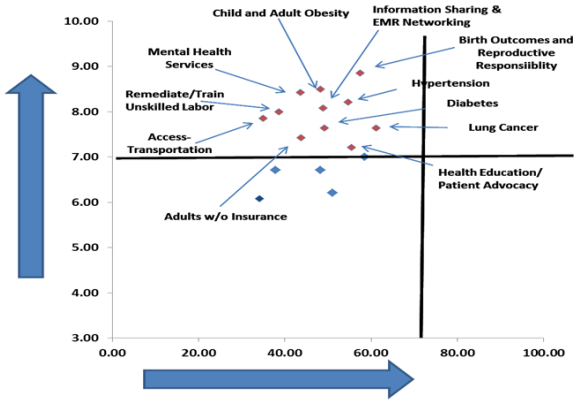
The implementation strategy was developed through organizational level stakeholder sessions with priority specific community partners [Aspire Behavioral Health, Albany Area Primary Healthcare, Horizons Community Solutions and District Public Health] and two feedback sessions with pastors. Priority Specific partners were involved in "Building the Framework" for Diabetes Prevention and Management and Improving Birth Outcomes Coalitions involving a greater spread of organizations with similar project outcomes. The underlying process and strategic direction of the implementation strategy centered-on the collaboration continuum driving toward full collaboration and possible integration with some population community health identified issues ***[see diagram-below]***. Phoebe Putney Memorial Hospital's Community Benefit Subcommittee recommended to the full board approval of the Implementation Strategy and was approved by the full board on December 7th 2016 at its noon board meeting.



Significant health needs and how priorities were determined –

The internal work team met and scored all recommended identified needs using the National Public Health Performance Standard Program Model for prioritizing need, a score sheet was developed that measured "How Important is the Need" and how the "Healthcare System and Its partners" are addressing the need to optimize performance. Those that scored in Quadrant I reflect the highest priority ***[see figure I].***

Figure 1



TOP Identified Priorities:

- ✓ Child and Adult Obesity
- ✓ Mental Health Services
- ✓ Train Unskilled Labor
- ✓ Access to Care-Transportation
- ✓ Adults without Health Insurance
- ✓ Information Sharing and EMR Networking
- ✓ Birth Outcomes and Reproductive Responsibility
- ✓ Hypertension
- ✓ Diabetes
- ✓ Lung Cancer
- ✓ Health Education/Patient Advocacy

Priority Attendees:

Clif Buell, Phoebe Oncology
*Remy Hutchins, Public Health**
*Torrey Knight, District Public Health**
Linda Johnson, National Alliance of Mental Illness*
Tosha Dean, National Alliance of Mental Illness*
Jim Franklin, Phoebe Quality Analyst
Judith Rosenbaum, Albany State University
Tracy Morgan, Phoebe-Albany
Ryan Graham, PPG
Amanda Clements, Phoebe-Albany
*Heather Combs, AAPHC**
Joyce Johnson, Albany State University
*Angie Barber, Network of Trust*****
*Jackie Jenkins, District Public Health**
Represents Low Income, Medically Underserved, and Minority Populations

Once the internal work team scored the priorities, Phoebe-Putney's selection committee, using the Catholic Health Association Recommendation Selection Filters, reconvened and reviewed the eleven priorities that scored in Quadrant I [High Priority-Low Performance]. The data for each priority was reviewed and the participants were given three dots to choose their 3 most important health issues. The priorities were ranked according to number of dots and further vetted using elements of the selection criteria recommended by Catholic Health Association. These three community health issues were selected as priorities by the committee.

1. *Birth Outcomes and Reproductive Responsibility, and*
2. *To prevent and manage chronic diseases*
3. *Behavioral Health and Addictive Disease for Adults and Adolescents*

Selection Committee: Dawn Benson, Senior VP/General Counsel; Thomas Chambless, Senior VP Government Relations; Brian Church, Chief Financial Officer; Dr. Steven Kitchen, Chief Medical Officer; Dr. Keisha Callins, Ob/Gyn*; Evelyn Olenick, Chief Nursing Officer, Phoebe-Albany; Bruce Trickle, Albany Internal Medicine; Judith Rosenbaum, Albany State University*; Melissa Gosdin, Albany State University*; Kimberly Fields, Albany State University, Phoebe-Albany Board Subcommittee Chair*
*** Represents Low Income, Medically Underserved, and Minority Populations**

What the organization will do to address community health needs

Priority 1: Birth Outcomes and Reproductive Responsibility

What	Who	Where	Metric/Intended Outcome
To Build a Birth outcome & Reproductive Coalition Responsibility Coalition and to develop Benchmark objectives within 6 months of its creation Executive Sponsor: Bill Sewell, MD	Phoebe and Community Partners: • ASU • District Public Health • Dougherty County Health Department • Community volunteers	Dougherty County	To create a consolidated multi-stakeholder Strategic Plan - *Invest in shared and innovated practices* - *Identify and Pursue evidence based models* - *Agree to common goals* - *Share data, decision making and resources, and* - *Promote the utilization of available resources that support preconception and prenatal care*
To Provide Pre-Natal Education and Parenting to School Age Teens	Phoebe's Network of Trust/School Nurse Staff	Dougherty County	Improve Infant Birth weight, Prematurity, and Maintain current graduation rates of Program Participants
HIV/AIDS and STD Education	Phoebe School Nurse Program led by the Dougherty County Health Department Task Force	Dougherty County	To decrease the rate of Sexually Transmitted Disease for school-age children
Teen Early Adult MAZE	Phoebe School Nurse Program and Taking Time of Teens Coalition	Dougherty County	To decrease Teen Pregnancy, AIDS/HIV and Sexually Transmitted Diseases

Priority 2: Chronic Diseases:

What	Who	Where	Metric/Intended Outcome
To Build a Diabetes Coalition and develop Benchmark objectives within 6 months of its creation Executive Sponsor: Evelyn Olenick	Phoebe and Community Partners: • PPG • Albany Internal Medicine • Dougherty County Health Department • SOWEGA Council on Aging • Albany City Commission • Albany Civil Rights • Horizons Community Solutions • Aspire Behavioral Health •	Dougherty County	To create a consolidated multi-stakeholder Strategic Plan - Identify Individuals at high risk for diabetes - Enroll high risk individuals into a case coordination program supported by a Primary Care Physician - Utilize and Refer high risk individuals to diabetes resource center for education related to nutrition and diabetes - Develop and coordinate additional shared resources for individuals and family members experiencing

What	Who	Where	Metric/Intended Outcome
	• Albany Area Primary Health Care		diabetes - Monitor improved outcomes while tracking reduction of costs and utilization of resources
Chronic Disease Education and Management (Diabetes, Asthma, Sickle Cell) of school aged children	Phoebe's School Nurse Program	Dougherty County School System	Education, Early Identification and treatment of Chronic Diseases
Healthy Lifestyles (building community gardens)	School Nurse Program and Partners	Dougherty County	To Increase the number of community gardens from 13 to 15.
Health Screenings for School Age Children	School Nurse Program and Partners	Dougherty County	Screening for High blood pressure, weight, hearing and vision
Diabetes Related Health Education	Phoebe Diabetes Clinic	Dougherty County	Provide Health Education on the Prevention and Management of Diabetes

Priority 3: Behavioral Health and Addictive Disease

What	Who	Where	Metric/Intended Outcome
Go Noodle	Phoebe's School Nurse Program	Dougherty County	Identify and Prevent bullying in the schools.
Managing Behavioral Health Medication for school age children	Phoebe's School Nurse Program	Dougherty County	Appropriate and safe administration of behavioral medication
School Nurse Case Management to school age children	School Nurse Program	Dougherty County School System	To link and refer school age children to the appropriate behavioral health service
Linking Partners to various Media Outlets for education, awareness and access of services	Phoebe's Community Benefit Program-	Dougherty County	To decrease the stigma of behavioral health diagnosis and to promote available resources
To provide issue/topic related strategy and action planning to the local BH/AD Collaborative	Phoebe Strategy and Planning	Dougherty County	To Improve the Coordination of Care delivery model between organizations who share patients and to improve access to care
Work with State Legislature on planned efforts associated with Behavioral Health	Phoebe Governmental Affairs and Administration	Atlanta	To ensure hospital input to policy decisions affecting Behavioral Health services.

Community Health Needs not addressed in the implementation strategy and any reason(s) they are not being addressed

Using the Catholic Health Association's Selection filter as a means to prioritize competing significant needs, below is a list of needs that were not included as priorities but remain a concern to the community ***[see below].***

PHOEBE PUTNEY MEMORIAL HOSPITAL-ALBANY
Reason for Not Selecting Community Need

Priority	Filter Number	Comment
Child and Adult Obesity	7	Hospital Resources Not Vast enough to Address this Need. County Health Department and School System and other Non-profit groups are taking the lead on this.
Train Unskilled Labor	4,7	Not within the Hospital's Strategic Scope and other Community Resources are addressing this issue.
Access to Care-Transportation	1,7	Issue is too complex to be address by the Healthcare Facility. Vulnerable populations have access to Medicaid Van option.
Adults without Insurance	7	Phoebe-Albany currently contracts with Change Health to determine medicaid eligibility for uninsured patients.
Information Sharing and EMR Network	7, 10	Enormous Complexity that would devert financial resources from other priorities.
Lung Cancer	4	Phoebe offers free Lung Screenings to 300 non-insured Patients Each year.
Health Education/Patient Advocacy	-	Other: This is an Activity and not a Priority. As part of our Priority Implementation, it will include education and patient advocacy when appropriate.

CATHOLIC HEALTH ASSOCIATION RECOMMENDATION SELECTION FILTERS

(1) Magnitude. The magnitude of the problem including the number of people impacted by the problem.

(2) Severity. The severity of the problem includes the risk of morbidity and mortality associated with the problem.

(3) Historical Trends.

(4) Alignment of the problem with the organization's strengths and priorities.

(5) Impact of the Problem on Vulnerable Populations.

(6) Importance of the problem to the community.

(7) Existing Resources Addressing the Problem.

(8) Relationship of the Problem to other Community Issues.

(9) Feasibility of change, availability of tested approaches.

(10) Value of Immediate Intervention vs. any delay, especially for long-term or complex threats.