2016 Community Health Needs Assessment

Implementation Strategy

Rapides Regional Medical Center

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Community Health
Needs Assessment

About Rapides Regional Medical Center

In the spring of 2016, Rapides Regional Medical Center (RRMC) embarked on a comprehensive Community Health Needs Assessment (CHNA) process to identify and address the key health issues for our community.

Rapides Regional Medical Center (RRMC), based in Alexandria, Louisiana is a for-profit, 328-bed hospital serving the central Louisiana. With approximately 1,700 employees, RRMC provides services primarily to residents of Rapides, Avoyelles and Grant parishes. RRMC is accredited by The Joint Commission.

It is RRMC's mission to provide high quality, efficient and compassionate healthcare for our patients and community. Rapides Regional Medical Center provides the following medical services: General Medicine, Trauma, General Surgery, Cardiovascular Surgery, Cardiac Rehabilitation, Neurology, Neurosurgery, Intensive Care and Telemetry, Oncology Services, Obstetrics and Gynecology, Orthopedic Services, Physical Therapy, Respiratory Services, Lithotripsy and various Outpatient Services. The Medical Staff includes more than 250 physicians and more than 60 specialties.

Rapides Regional Medical Center maintains a department dedicated to addressing its outreach objectives of serving the entire community, not only those who come through its doors. Building on a long tradition of service, the Community Outreach Department utilizes hospital strengths alongside those of other well-established community partners. This strategy allows RRMC to better understand and reach the most vulnerable sectors of the community, while meeting pressing healthcare needs. The goal is to improve the community's health status by empowering citizens to make healthy life choices.

Hospital facts and figures:

- 328 licensed beds

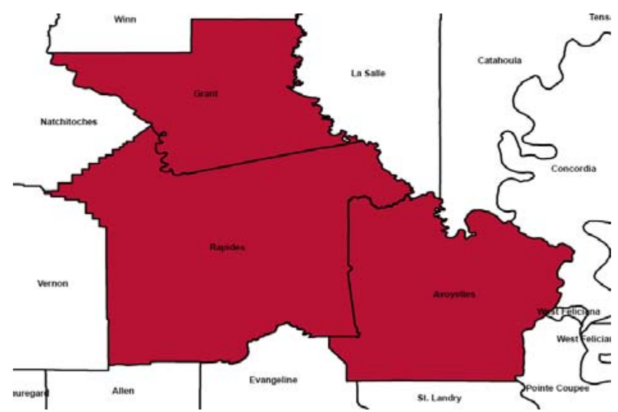
RRMC completed its last Community Health Needs Assessment in 2013. ***[IRS Form 990, Schedule H, Part V, Section B, 3, 2015]***

Community Served

Definition of the Community Served

[IRS Form 990, Schedule H, Part V, Section B, 3a, 2015]

RRMC's community, as defined for the purpose of the Community Health Needs Assessment, includes a three-parish area in Central Louisiana, including Avoyelles, Grant and Rapides parishes. This defined community is the geographic service area served by RRMC and consists of the area composed of the lowest number of contiguous zip codes from which the hospital draws at least 75 percent of its inpatients. A geographical description of the study area is illustrated in the following map.



Demographics of the Community

[IRS Form 990, Schedule H, Part V, Section B, 3b 2015]

The population of the hospital's service area is estimated at 195,912 people. It is predominantly non-Hispanic and White, but also has substantial African American population.

As throughout the state and nation, our population is aging, with more than 13% currently age 65 and older. This is projected to increase in coming years, as is the need for services to meet the health needs of this older population.

Median household incomes ($32,781 to $41,305) are below the state average and far below the US median household income of $53,482. Additionally, 20.0% of Service Area population lives below the federal poverty level.

	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Avoyelles Parish	41,765	832.19	50.19
Grant Parish	22,113	642.86	34.40
Rapides Parish	132,034	1,317.61	100.21
Service Area	**195,912**	**2,792.66**	**70.15**
Louisiana	4,567,968	43,192.45	105.76
United States	311,536,591	3,530,997.60	88.23

Sources: US Census Bureau American Community Survey 5-year estimates (2009-2013).

- Retrieved February 2016 from Community Commons at http://www.chna.org.

Resources Available to Address the Significant Health Needs

[IRS Form 990, Schedule H, Part V, Section B, 3c 2015]

The following represent potential measures and resources (such as programs, organizations, and facilities in the community) available to address the significant health needs identified in this report. This list is not exhaustive, but rather outlines those resources identified in the course of conducting this Community Health Needs Assessment.

Resources Available to Address the Significant Health Needs

The following represent potential measures and resources (such as programs, organizations, and facilities in the community) available to address the significant health needs identified in this report. This list is not exhaustive, but rather outlines those resources identified in the course of conducting this Community Health Needs Assessment.

Access to Healthcare Services

Central Louisiana Mental Health Services District
Christus Health
Christus St. Francis Cabrini Hospital Food Bank

Grant Community Clinic
Grant Family Pharmacy
Grant Parish Healthy Lifestyles Coalition Health Unit
HealthWorks
Huey P Long Clinic
Rapides Clinic
Rapides Primary Care Center
Rapides Regional Medical Center
School System
State of Louisiana Extension Service Urgent Care
VA Medical Center
Willow Glen Clinic

Arthritis, Osteoporosis & Chronic Back Conditions
Christus St. Francis Cabrini Hospital
Dexa Scans
Doctor's Office
Education
Grant Community Clinic
Hospitals
Huey P Long Clinic
Rapides Regional Medical Center
Urgent Care

Cancer
American Cancer Society
Cabrini Cancer Center
Cancer Treatment Centers
Christus St. Francis Cabrini Hospital
DHH Office of Public Health Doctor's Office
Hematology-Oncology Life Center Hospitals
Huey P Long Clinic
Office of Public Health
Rapides Cancer Center
The Rapides Foundation
Rapides Regional Medical Center
United Way

Chronic Kidney Disease
Christus St. Francis Cabrini Hospital
Dialysis Clinic
Doctor's Office
Fresenius Dialysis Center
Grant Community Clinic
Huey P Long Clinic
Office of Public Health
Rapides Regional Medical Center
VA Medical Center

Dementias, Including Alzheimer's Disease
Adult Day Care
Alzheimer's Association
Assisted Living Facilities
Christus Health
Christus St. Francis Cabrini Hospital
Doctor's Office
Home Health Agencies
Medicaid Care Systems

Mental Health Facility
Neuro Medical Clinic of Central Louisiana
Skilled Nursing Facilities
Nursing Homes
Rapides Regional Medical Center
Support Groups

Diabetes
American Diabetes Association
Christus St. Francis Cabrini Hospital
Diabetes Support Groups
Doctor's Office
Food Bank
Hospitals
LSU Ag Center Nutrition Program
People's Pharmacy
Rapides Clinic
The Rapides Foundation
Rapides Regional Medical Center
VA Medical Center
YMCA

Family Planning
Doctor's Office
Rapides Parish Health Unit

Hearing & Vision
Vision for Less
Wal-Mart

Heart Disease & Stroke
American Heart Association
Avoyelles Hospital
Cardiac Care/Rehabilitation Centers
Cath Lab
Christus St. Francis Cabrini Hospital
Doctor's Office
Health Fair
Heart Center
Hospitals
LSU Ag Center Nutrition Program
The Rapides Foundation
Rapides Parish Health Unit
Rapides Regional Medical Center
VA Medical Center
Weight Loss Programs

HIV/AIDS
Alexandria STD Testing Clinic
Central Louisiana AIDS Support Services
Community Healthworx
Health Unit
Office of Public Health
Rapides Parish Health Unit
Rapides Regional Medical Center

Immunization & Infectious Diseases
Doctor’s Offices
WIC Clinic

Infant & Child Health
Christus St. Francis Cabrini Hospital
Doctor's Office
Head Start
Health Unit
Hospitals
Huey P Long Clinic
Neonatal Intensive Care Units
Rapides Parish School Board
Rapides Primary Care Center
WIC Clinic

Injury & Violence
Court System
Hope House
Police Department
Rapides Children's Advocacy Center
Rapides Regional Medical Center

Mental Health
Alexandria Police Department
Bayou Mental Health
Brentwood Hospital
Caring Choices
Central Louisiana Human Services District
Central State Hospital
Compass Behavioral Center
Crossroads Hospital
DHH LA Office of Behavioral Health Doctor's Office
Government Programs
Hospitals
Longleaf Hospital
Mental Health Center of Central Louisiana
Mental Health Court
Mental Health Facility
NHS Human Services
Oceans Behavioral Hospital
Pathways
Pinecrest
Rapides Regional Medical Center
Red River Treatment Center
Region VI Extra Mile
Social Workers
VA Medical Center
Volunteers of America
Wellness Center

Nutrition, Physical Activity & Weight
4-H Youth Programs
Anytime Fitness
Central Louisiana Economic Development Association
Courtyard Health Club
Crossfit
DHH WellSpot Program
Food Bank
Grocery Stores
Health Club
Hospitals

Louisiana Athletic Club
LSU Ag Center Nutrition Program
The Rapides Foundation School Programs
YMCA
Yoga Studio
YWCA

Oral Health
Head Start
Zoo Boo

Respiratory Diseases
Campaigns Against Smoking Doctor's Office
Hospitals
LA Campaign for Tobacco Free Living
Office of Public Health
The Rapides Foundation
School System

Sexually Transmitted Diseases
Alexandria STD Testing Clinic
Central Louisiana AIDS Support Services
Office of Public Health
Rapides Parish Health Unit
Tulane Medical Center

Substance Abuse
AA/NA
APADAC
Caring Choices
Central Louisiana Human Services District
Central State Hospital
Compass Behavioral Center
Drug Court
Gateway Adolescent Center
Grant Parish Healthy Lifestyles Coalition Hospitals
Longleaf Hospital
Oceans Behavioral Hospital
Pathways
Red River Treatment Center
River North
School System
VA Medical Center

Tobacco Use
Central Louisiana Human Services District
Hospitals
The Rapides Foundation
Rapides Parish Health Unit
Tobacco Coalition

Collaboration

[IRS Form 990, Schedule H, Part V, Section B, 6a, 2015]
[IRS Form 990, Schedule H, Part V, Section B, 6b, 2015]

The Community Health Needs Assessment was sponsored by Rapides Healthcare System. The project also received input from a Community Health Needs Assessment Advisory Committee, created for this purpose, which was comprised of representatives of the organizations as well as other citizens chosen for their relevant experience and interests.

A Community Health Needs Assessment provides information so that communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status. This Community Health Needs Assessment will serve as a tool toward reaching three basic goals:

- **To improve residents' health status, increase their life spans, and elevate their overall quality of life.** A healthy community is not only one where its residents suffer little from physical and mental illness, but also one where its residents enjoy a high quality of life.
- **To reduce the health disparities among residents.** By gathering demographic information along with health status and behavior data, it will be possible to identify population segments that are most at-risk for various diseases and injuries. Intervention plans aimed at targeting these individuals may then be developed to combat some of the socio-economic factors which have historically had a negative impact on residents' health.
- **To increase accessibility to preventive services for all community residents.** More accessible preventive services will prove beneficial in accomplishing the first goal (improving health status, increasing life spans, and elevating the quality of life), as well as lowering the costs associated with caring for late-stage diseases resulting from a lack of preventive care.

This assessment was conducted on behalf of Rapides Regional Medical Center by Professional Research Consultants, Inc. (PRC). PRC is a nationally recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments such as this in hundreds of communities across the United States since 1994.

How CHNA Data Were Obtained

[IRS Form 990, Schedule H, Part V, Section B, 3d, 2015]

This assessment incorporates data from both quantitative and qualitative sources. Quantitative data input includes primary research (the PRC Community Health Survey) and secondary research (vital statistics and other existing health-related data); these quantitative components allow for comparison to benchmark data at the state and national levels.

Qualitative data input includes primary research gathered through an online key informant survey.

Community Health Survey

The survey instrument used for this study is based largely on the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS), as well as various other public health surveys and customized questions addressing gaps in indicator data relative to health promotion and disease prevention objectives and other recognized health issues. The final survey instrument was developed by PRC, with input from RRMC and the other community sponsors.

A precise and carefully executed methodology is critical in asserting the validity of the results gathered in the PRC Community Health Survey. Thus, to ensure the best representation of the population surveyed, a telephone interview methodology — one that incorporates both landline and cell phone interviews — was employed. The primary advantages of telephone interviewing are timeliness, efficiency and random-selection capabilities.

The sample design used for this effort consisted of a random sample of 1,000 individuals age 18 and older in the Primary Service Area. Once the interviews were completed, these were weighted in proportion to the actual population distribution so as to appropriately represent the Primary Service Area as a whole. All administration of the surveys, data collection and data analysis was conducted by Professional Research Consultants, Inc. (PRC).

The sample design and the quality control procedures used in the data collection ensure that the sample is representative. Thus, the findings may be generalized to the total population of community members in the defined area with a high degree of confidence.

Public Health, Vital Statistics & Other Data

A variety of existing (secondary) data sources was consulted to complement the research quality of this Community Health Needs Assessment. Data for the Service Area were obtained from the following sources (specific citations are included with the graphs throughout this report):

- Center for Applied Research and Environmental Systems (CARES)
- Centers for Disease Control & Prevention (CDC), Office of Infectious Disease, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- Centers for Disease Control & Prevention, Office of Public Health Science Services, Center for Surveillance, Epidemiology and Laboratory Services, Division of Health Informatics and

Surveillance (DHIS)
- Centers for Disease Control & Prevention, Office of Public Health Science Services, National Center for Health Statistics
- Community Commons
- ESRI ArcGIS Map Gallery
- National Cancer Institute, State Cancer Profiles
- OpenStreetMap (OSM)
- US Census Bureau, American Community Survey
- US Census Bureau, County Business Patterns
- US Census Bureau, Decennial Census
- US Department of Agriculture, Economic Research Service
- US Department of Health & Human Services
- US Department of Health & Human Services, Health Resources and Services Administration (HRSA)
- US Department of Justice, Federal Bureau of Investigation
- US Department of Labor, Bureau of Labor Statistics

Community Stakeholder Input

[IRS Form 990, Schedule H, Part V, Section B, 3h, 2015]

[IRS Form 990, Schedule H, Part V, Section B, 5, 2015]

To solicit input from key informants, those individuals who have a broad interest in the health of the community, an Online Key Informant Survey was also implemented as part of this process. A list of recommended participants was provided by RRMC; this list included names and contact information for physicians, public health representatives, other health professionals, social service providers, and a variety of other community leaders. Potential participants were chosen because of their ability to identify primary concerns of the populations with whom they work, as well as of the community overall.

Key informants were contacted by email, introducing the purpose of the survey and providing a link to take the survey online; reminder emails were sent as needed to increase participation. In all, 72 community stakeholders took part in the Online Key Informant Survey, as outlined below:

Key Informant Type	Number Invited	Number Participating
Community/Business Leader	224	52
Other Health Provider	27	5
Physician	1	0
Public Health Representative	2	2
Social Service Provider	59	13

Project Assistance

This assessment was conducted by Professional Research Consultants, Inc. (PRC). PRC is a nationally-recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments such as this in hundreds of communities across the United States since 1994.

Vulnerable Populations

[IRS Form 990, Schedule H, Part V, Section B, 3f, 2015]

The CHNA analysis and report yielded a wealth of information about the health status, behaviors and needs for our population. A distinct advantage of the primary quantitative (survey) research is the ability to segment findings by geographic, demographic and health characteristics to identify the primary and chronic disease needs and other health issues of vulnerable populations, such as uninsured persons, low-income persons, and racial/ethnic minority groups.

Information Gaps

[IRS Form 990, Schedule H, Part V, Section B, 3i, 2015]

While this Community Health Needs Assessment is quite comprehensive, RRMC and PRC recognize that it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all of the community's health needs.

For example, certain population groups — such as the homeless, institutionalized persons, or those who only speak a language other than English or Spanish — are not represented in the survey data. Other population groups — for example, pregnant women, lesbian/gay/bisexual/transgender residents, undocumented residents, and members of certain racial/ethnic or immigrant groups — might not be identifiable or might not be represented in numbers sufficient for independent analyses.

In terms of content, this assessment was designed to provide a comprehensive and broad picture of the health of the overall community. However, there are certainly a great number of medical conditions that are not specifically addressed.

Public Dissemination

[IRS Form 990, Schedule H, Part V, Section B, 7a-7c, 2014]

This Community Health Needs Assessment is available to the public using the following URL: http://rrmc.healthforecast.net.

HealthForecast.net® is an interactive, dynamic tool designed to share CHNA data with community partners and the public at large.

This site:

- Informs readers that the CHNA Report is available and provides instructions for downloading it;
- Offers the CHNA Report document in a format that, when accessed, downloaded, viewed, and printed in hard copy, exactly reproduces the image of the report;
- Grants access to download, view, and print the document without special computer hardware or software required for that format (other than software that is readily available to members of the public without payment of any fee) and without payment of a fee to the hospital organization or facility or to another entity maintaining the website.

Links to this dedicated HealthForecast.net™ site are also made available at RRMC's website at: http://rapidesregional.com/about/rapides-cares.dot

RRMC will provide any individual requesting a copy of the written report with the direct website address, or URL, where the document can be accessed. RRMC will also maintain at its facilities a hardcopy of the CHNA report that may be viewed by any who request it.

Health Needs of the Community

Significant Health Needs of the Community

[IRS Form 990, Schedule H, Part V, Section B, 3e, 2015]

The following "areas of opportunity" represent the significant health needs of the community, based on the information gathered through this Community Health Needs Assessment and the guidelines set forth in Healthy People 2020. From these data, opportunities for health improvement exist in the area with regard to the following health issues (see also the summary tables presented in the following section).

Areas of Opportunity Identified Through This Assessment	
Access to Healthcare Services	• Lack of Health Insurance • Specific Source of Ongoing Medical Care • Emergency Room Utilization • Ratio of Primary Care Doctors

Cancer	• Cancer Deaths
	  ○ Including Lung Cancer, Prostate Cancer, Female Breast Cancer, Colorectal Cancer Deaths
	• Cancer Incidence
	  ○ Including Lung Cancer, Prostate Cancer, Colorectal Cancer Incidence
	• Prostate Cancer Screening
	• Female Breast Cancer Screening
	• Cervical Cancer Screening
	• Colorectal Cancer Screening
	• *Cancer ranked as a top concern in the Online Key Informant Survey.*

Chronic Kidney Disease	• Kidney Disease Deaths
Dementia, Including Alzheimer's Disease	• Alzheimer's Disease Deaths
Diabetes	• Diabetes Prevalence • *Diabetes ranked as a top concern in the Online Key Informant Survey.*
Heart Disease & Stroke	• Heart Disease Deaths • Heart Disease Prevalence • Stroke Deaths • Stroke Prevalence • High Blood Pressure Prevalence • High Blood Cholesterol Prevalence • Overall Cardiovascular Risk • *Heart Disease & Stroke ranked as a top concern in the Online Key Informant Survey.*
Infant Health & Family Planning	• Infant Mortality

Injury & Violence	• Unintentional Injury Deaths
	  ○ Including Motor Vehicle Crash Deaths and Fall-Related Deaths
	• Helmet Usage [Children]
	• Firearm-Related Deaths
	• Firearm Prevalence
	  ○ Including in Homes with Children
	• Firearm Storage/Safety
	• Homicide Deaths
	• Violent Crime Rate

Mental Health	• Suicide Deaths • *Mental Health ranked as a top concern in the Online Key Informant Survey*

Nutrition, Physical Activity & Weight	• Fruit/Vegetable Consumption
	• Low Food Access
	• Fast Food Consumption [Children]
	• Overweight & Obesity [Adults]
	• Obesity [Children]
	• Leisure-Time Physical Activity
	• Meeting Physical Activity Guidelines
	  ○ Moderate Physical Activity
	  ○ Vigorous Physical Activity
	• Walking Regularly
	• Fitness/Recreational Facilities
	• Medical Advice on Physical Activity
	• Children's Non-TV Screen Time
	• *Nutrition, Physical Activity, and Weight ranked as a top concern in the Online Key Informant Survey.*

Oral Health	• Regular Dental Care
Potentially Disabling Conditions	• Activity Limitations • Arthritis Prevalence
Respiratory Diseases	• Chronic Lower Respiratory Disease (CLRD) Deaths • Chronic Lung Disease Prevalence • Asthma Prevalence [Children] • Pneumonia/Influenza Deaths
Sexually Transmitted Diseases	• Gonorrhea Incidence • Chlamydia Incidence • HIV/AIDS Deaths • HIV Testing [Adults 18-44]
Substance Abuse	• Cirrhosis/Liver Disease Deaths • Overall Alcohol Use • Drug-Induced Deaths • *Substance Abuse ranked as a top concern in the Online Key Informant Survey.*

Tobacco Use	• Cigarette Smoking Prevalence
	• Environmental Tobacco Smoke Exposure at Home
	  ○ Including Among Households with Children
	  ○ Including Among Nonsmokers
	• Smokeless Tobacco Prevalence
	• *Tobacco Use ranked as a top concern in the Online Key Informant Survey.*

Identify & Prioritizing Health Needs

[IRS Form 990, Schedule H, Part V, Section B, 3g, 2015]

Identification of Health Needs

The significant health needs ("Areas of Opportunity" outlined above) were determined after consideration of various criteria, including: standing in comparison with benchmark data; identified trends; the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue.

Prioritization of Health Needs

On September 27, 2016, approximately 10 internal and external stakeholders of Rapides Regional Medical Center participated in a webinar to evaluate, discuss and prioritize health issues for the community, based on findings of the 2016 PRC Community Health Needs Assessment (CHNA). Professional Research Consultants, Inc. (PRC) began the webinar with a presentation of key findings from the CHNA, highlighting the significant health issues identified from the research (see Areas of Opportunity above).

Following the data review, PRC answered any questions and then participants were provided an overview of the prioritization survey. In order to assign priority to the identified health needs (i.e., Areas of Opportunity), a prioritization survey was emailed to each participant. The participants were asked to evaluate each health issue along two criteria:

- **Scope & Severity** — The first rating was to gauge the magnitude of the problem in consideration of the following:
  - How many people are affected?
  - How does the local community data compare to state or national levels, or Healthy People 2020 targets?
  - To what degree does each health issue lead to death or disability, impair quality of life, or impact other health issues?

  Ratings were entered on a scale of 1 (not very prevalent at all, with only minimal health consequences) to 10 (extremely prevalent, with very serious health consequences).

- **Ability to Impact** — A second rating was designed to measure the perceived likelihood of the hospital having a positive impact on each health issue, given available resources,

competencies, spheres of influence, etc. Ratings were entered on a scale of 1 (no ability to impact) to 10 (great ability to impact).

Individuals' ratings for each criteria were averaged for each tested health issue, and then these composite criteria scores were averaged to produce an overall score. This process yielded the following prioritized list of community health needs:

1. **Mental Health (tied)**
2. **Heart Disease & Stroke**
3. **Cancer**
4. **Diabetes**
5. **Dementias, Including Alzheimer's Disease**
6. **Substance Abuse (tied)**

6. Tobacco

7. Chronic Kidney Disease

8. Respiratory Diseases

9. Nutrition, Physical Activity & Weight

10. Injury & Violence

11. Infant Heath (tied)

11. Sexually Transmitted Diseases

12. Potentially Disabling Conditions

13. Oral Health

While the hospital will likely not implement strategies for all of these health issues, the results of this prioritization exercise will be used to inform the development of Rapides Regional Medical Center's Implementation Strategy to address the top health needs of the community in the coming years.

Implementation Strategy

Implementation Strategy Adoption

[IRS Form 990, Schedule H, Part V, Section B, 8-10, 2015]

This summary outlines Rapides Regional Medical Center's plan (Implementation Strategy) to address our community's health needs by 1) sustaining efforts operating within a targeted health priority area; 2) developing new programs and initiatives to address identified health needs; and 3) promoting an understanding of these health needs among other community organizations and within the public itself.

On November 14, 2016, the RRMC Community Benefit Committee approved this Implementation Strategy to undertake the outlined measures to meet the health needs of the community.

This Implementation Strategy document is posted on the hospital's website at:
http://rapidesregional.com/about/rapides-cares.dot

Hospital-Level Community Benefit Planning

[IRS Form 990, Schedule H, Part V, Section B, 11, 2015]

Priority Health Issues To Be Addressed

In consideration of the top health priorities identified through the CHNA process — and taking into account hospital resources and overall alignment with the hospital's mission, goals and strategic priorities — it was determined that RRMC would focus on developing and/or supporting strategies and initiatives to improve:

- Access to Health Services
- Heart Disease & Stroke
- Cancer
- Diabetes, Nutrition, Physical Activity & Weight
- Injury and Violence
- Maternal & Infant Health

Priority Health Issues That Will Not Be Addressed & Why

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

Health Priorities Not Chosen for Action	Reason
Substance Abuse & Tobacco	RRMC has limited resources, services and expertise available to address alcohol, tobacco and other drug issues. Other community organizations have infrastructure and programs in place to better meet this need. Limited resources excluded this as an area chosen for action.
Mental Health	RRMC has limited resources, services and expertise available to address Mental Health and Disorders. Other community organizations have infrastructure and programs in place to better meet this need. Limited resources excluded this as an area chosen for action.
Dementias, including Alzheimer's Disease	RRMC has limited resources, services and expertise available to address Dementia. Other community organizations have infrastructure and programs in place to better meet this need. Limited resources excluded this as an area chosen for action.
Sexually Transmitted Diseases	RRMC believes that this priority area falls more within the purview of the health department and other community organizations. Limited resources and lower priority excluded this as an area chosen for action.
Potentially Disabling Conditions	Advisory Committee members felt that more pressing health needs existed. Limited resources and lower priority excluded this as an area chosen for action.
Oral Health	RRMC has limited resources, services and expertise available to address Oral Health. Other community organizations have infrastructure and programs in place to better meet this need. Limited resources excluded this as an area chosen for action.
Chronic Kidney Disease	Advisory Committee members felt that more pressing health needs existed. Limited resources and lower priority excluded this as an area chosen for action.
Respiratory Diseases	Advisory Committee members felt that more pressing health needs existed. Limited resources and lower priority excluded this as an area chosen for action.

Implementation Strategies & Action Plans

The following displays outline Rapides Regional Medical Center's plans to address those priority health issues chosen for action in the FY2017-FY2019 period.

ACCESS TO HEALTH SERVICES	
	• Primary Care Physicians in the Service Area • Louisiana State University Residency Program • Louisiana State University at Alexandria (LSUA) • Louisiana College (LC) • Northwestern State University (NSU)
Goal	**To increase access to care in the service area** **To assist individuals with identifying Primary Care Providers** **To educate residents in the service area on appropriate utilization of primary care/urgent care/emergency care** **To provide funding to increase graduation rate, quality of healthcare workforce**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on residents in the service area.
Strategies & Objectives	**Strategy #1: Continue the Cooperative Endeavor Agreement with the State to provide indigent health care services** **Strategy #2: Provide all patients discharged from the Emergency Department with an educational document on appropriate usage of primary care/urgent care/emergency care.** **Strategy #3: Provide all patients discharged from the Emergency Department with a primary care provider referral.** **Strategy #4: Provide Physician Directories at Community functions/Health fairs and screenings.** **Strategy #5: Continue to raise funds to provide transportation funds for cancer patients.** **Strategy #6: Support the LSU Family Residency program which provides access to care to the service area residents.** **Strategy #7: Provide funds to local universities to increase healthcare workforce development.**
Financial Commitment	Physician Directories - $4000 Transportation Funds - $5,000 LSU Residency Program - $3,600,000 Nursing Schools - $235,000
Anticipated Impact	• Distribute 3500 physician directories • Provide $5,000 in transportation funds for cancer patients • 18 LSU residents • 40 nursing graduates
Plan to Evaluate Impact	• Report # of physician directories distributed • Report amount of transportation funds distributed to cancer patients • Report number of LSU residents • Report number of nursing graduates
Results	*Pending*

Heart Disease & Stroke	
Community Partners/ Planned Collaboration	• American Heart Association • American Stroke Association • The National Coalition of Women with Heart Disease • National Institutes of Health • American Red Cross
Goal	**To educate service area residents on cardiovascular health.**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on the residents in the service area.
Strategies & Objectives	**Strategy #1: Provide educational materials, presentations and screenings to community residents on cardiovascular health.** **Strategy #2: Educate the community on availability of free resource – Heart Health and Stroke Health profiler.** **Strategy #3: Provide monetary support for cardiovascular health and prevention research to AHA.** **Strategy #4: Provide Basic Life Support (BLS) training to community organizations.** **Strategy #5: Participate in Start A Heart CENLA to provide BLS training to the community.** **Strategy #6: Educate the community on stroke awareness with Tackle Stroke program.**
Financial Commitment	Education Materials - $2500 AHA Donation - $25,000 Community BLS training - $5,000 Start A Heart CENLA - $10,000
Anticipated Impact	• 150 service area residents educated on cardiovascular health • 100 Heart Health Profiler assessments completed • 100 Stroke Health Profiler assessments completed • Donation to AHA for cardiovascular research • BLS training to 350 community residents
Plan to Evaluate Impact	• Report number of service area residents educated on cardiovascular health • Report number of Heart Health and Stroke Health profiler assessments completed • Report AHA donation • Report number of community residents trained in BLS
Results	*Pending*

Cancer	
Community Partners/ Planned Collaboration	• Cancer Screening Project • American Cancer Society • Colon Cancer Alliance • American Academy of Dermatology • National Comprehensive Cancer Network • National Council on Skin Cancer Prevention
Goal	**To educate service area residents on cancer prevention and screenings**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on the residents in the service area.
Strategies & Objectives	**Strategy #1: Educate service area residents on the importance of cancer screening by hosting events – breast, prostate, colorectal, lung.** **Strategy #2: Partner with National Council on Skin Cancer Prevention and the American Academy of Dermatology to increase awareness of signs and symptoms of skin cancer by promoting "Don't Fry Day."** **Strategy #3: Provide educational materials on cancer (colorectal, skin, breast, prostate, lung) to community groups/health fairs.** **Strategy #4: Provide monetary support for cancer research and prevention to ACS.** **Strategy #5: Educate the community on the availability of free resource – Breast Health profiler.**
Financial Commitment	Cancer Screening events/ awareness dates -$1,000 Don't Fry Day - $400 Cancer Educational Materials - $1500 ACS Donation - $5,000
Anticipated Impact	• 200 adults receive education on importance of cancer screening • 125 participants for "Don't Fry Day" • 500 participants in health fairs/community events • Donation to ACS for cancer research • 60 Breast Health Profiler assessments
Plan to Evaluate Impact	• Report number of adults receiving cancer screening education • Report number of participants for "Don't Fry Day" • Report number of participants in health fairs/community events • Report ACS donation • Report number of Breast Health Profiler completions
Results	*Pending*

Diabetes, Nutrition, Physical Activity and Weight	
Community Partners/ Planned Collaboration	• American Diabetes Association • American Heart Association • American Cancer Society • National Kidney Foundation
Goal	**To increase awareness of nutrition, physical activity and weight status as contributing factors in chronic health diseases (diabetes, heart disease and cancer)**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on the residents in the service area.
Strategies & Objectives	**Strategy #1: Provide free monthly Diabetes/Nutrition classes – taught by Registered Dietician and Registered Nurse.** **Strategy #2: Offer free diabetic screening - Diabetes Sound the Alert Day.** **Strategy #3: Offer free diabetic education and assessment through Head to Toe program including blood pressure, foot assessment, hemoglobin A1C, glaucoma screening and nutritional information.** **Strategy #4: Promote physical activity through sponsorship of active community events, i.e. 5K runs, bicycle events, sporting events.** **Strategy #5: Provide nutritional information and healthy lifestyle recommendations at various community events/health fairs.**
Financial Commitment	Diabetes/Nutrition Classes - $2,000 Diabetes Sound the Alert Day - $1,000 Diabetes Head to Toe Assessment - $1,000 Community event sponsorship - $5,000 Health fairs/Community Events - $1,500
Anticipated Impact	• 100 participants in Diabetes/Nutrition Classes • 50 participants in Diabetes Sound the Alert Day • 50 participants in Diabetes Head to Toe Assessment • Sponsorship of 12 community events • 500 participants in health fairs/community events
Plan to Evaluate Impact	• Report number of participants in Diabetes/Nutrition Classes • Report number of participants in Diabetes Sound the Alert Day • Report number of participants in Diabetes Head to Toe Assessment • Report number of community events sponsored • Report number of participants in health fairs/community events
Results	*Pending*

Injury and Violence	
Community Partners/ Planned Collaboration	• Louisiana State Police • AARP • Safe Kids • National Off-Highway Vehicle Conservation Council • National Highway Traffic and Safety Administration • Rapides Senior Citizen Centers
Goal	**To decrease traumatic injury in defined service area**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on the residents in the service area.
Strategies & Objectives	**Strategy #1: Partner with Louisiana State Police to conduct Sudden Impact courses with area students** **Strategy #2: Partner with Louisiana State Police to conduct mock crash and mock trial educating high school students about impaired, unrestrained and distracted driving.** **Strategy #3: Educate community on ATV safety through various events.** **Strategy #4: Provide fall prevention education targeting senior citizens in service area.** **Strategy #5: Provide monthly child passenger safety seat checks.**
Financial Commitment	Sudden Impact - $12,500 Sudden Impact Mock Crash & Trial - $5,000 ATV Safety Events - $500 Fall Prevention Education - $500 Child Passenger Safety Seat Checks - $2,500
Anticipated Impact	• 2,000 participants in Sudden Impact • 750 participants in Sudden Impact Mock Crash and Trial • 500 participants in ATV safety events • 100 participants in fall prevention education • 100 child seat checks
Plan to Evaluate Impact	• Report number of participants in Sudden Impact • Report number of participants in Sudden Impact Mock Crash and Trial • Report number of participants in ATV safety events • Report number of participants in fall prevention education • Report number of child seats checked
Results	*Pending*

Maternal/Infant Health	
Community Partners/ Planned Collaboration	• Nurse Family Partnership • March of Dimes (MOD) • Department of Health and Hospitals/FIMR • Central Louisiana Breastfeeding Coalition
Goal	**To improve maternal/infant health in the service area**
Timeframe	FY2017-FY2019
Scope	These strategies will focus on the residents in the service area.
Strategies & Objectives	**Strategy #1: Provide free Childbirth Classes to service area residents – Prepared Childbirth, Breastfeeding, Sibling and Breathing and Relaxation.** **Strategy #2: Distribute baby packets to expectant mothers providing education, community resources and safe sleep information.** **Strategy #3: Provide educational materials promoting 39 weeks gestation to expectant mothers.** **Strategy #4: Provide free Perinatal Loss Support Group.**
Financial Commitment	Childbirth Classes - $10,000 Baby Packets - $7,500 MOD Donation - $5,000 Perinatal Loss Support Group - $500
Anticipated Impact	• 400 participants in Childbirth Classes • 1,000 Baby Packets distributed to expectant mothers • Donation to MOD • 50 participants in Perinatal Loss Support Group
Plan to Evaluate Impact	• Report number of participants in Childbirth Classes • Report number of baby packets distributed to expectant mothers • Report MOD donation • Report number of participants in Perinatal Loss Support Group
Results	*Pending*