Copper Queen Community Hospital

**Community Health Implementation Plan**

Fiscal Year 2017-2019

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**Background**

In 2012-13, Cochise Health and Social Services (CHSS) completed its first Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP), with technical and funding support from the Arizona Department of Health Services. Building on the 2012 assessment, CHSS embarked on a collaborative approach to conduct the 2016 health assessment, partnering with the Legacy Foundation of Southeast Arizona, Benson Community Hospital, Copper Queen Community Hospital and Northern Cochise Community Hospital to bring together residents and community leaders, nonprofit and social service agencies, governmental institutions and federally qualified community health centers to harness their collective resources, energy and expertise to identify and prioritize the major issues threatening the health and well-being of Cochise County residents.

Those CHNA community partners included Cenpatico Integrated Care, Chiricahua Community Health Centers, Inc., Community Food Bank of Southern Arizona, Fort Huachuca Community Health Promotion Council, Sierra Vista Be Healthy!, Southeastern Arizona Government Organization, Southeastern Arizona Behavioral Health Services, St. Vincent de Paul in Douglas, St. Vincent de Paul in Sierra Vista, Rural Accent/Bowie Community Food Pantry and University of Arizona Cooperative Extension.

The 2016 assessment was submitted and approved by the CQCH board of directors**.** This assessment is available for public review on the hospital’s website at www.cqch.org. As part of the CHNA, a plan is required outlining the needs identified through the CHNA; as part of this plan the hospital must address the needs that will be met over the next three years, with specific objectives and strategies. Additionally, the plan must identify those needs that will not be addressed, along with justification for excluding them as part of the implementation plan. This Community Health Implementation Plan (CHIP) will address these steps.

**How the Implementation Plan was Developed**

**CHNA Process**

The CHNA was completed at the end of 2016. Individuals representing 17 agencies and multiple population groups provided direct input and feedback into the process. A survey received 2,376 responses across the county. The process and steps are outlined in the CHNA report made widely available to the public on the CQCH website at www.cqch.org. Localized results for the CQCH service area were reviewed. A list of priorities was defined by a combination of community members and the CQCH staff. These priorities will be the focus of the implementation plan for CQCH over the next three years.

**Health Concerns Identified for Cochise County at the start of the CHNA via the Healthy Cochise Summit in September 2016:**

♣ More mental/behavioral health services

♣ More medical care – primary care and specialists

♣ Transportation

♣ Better access to healthier foods

♣ More services and resources of all kinds

♣ Greater awareness about resources through education and communication

♣ More collaboration and working together

♣ Economic development and diversity.

**Cochise County’s Top Health Priorities determined following Completion of the CHNA**

**1. Mental Health and Alcohol/Substance Abuse**

Medicaid utilization data revealed that mental health and substance use disorders are a major contributor to the poor health of Cochise County residents. Mental health and physical health are inextricably linked, and research has shown a link between depression and chronic diseases and health conditions, including diabetes and cancer, which are two of the leading causes of death in Cochise County.

**2. Good Jobs and a Healthy Economy**

Health is influenced by a number of factors including social and economic factors, including where people live. People who live in rural areas are at a higher risk of having poor health. Cochise County is one of two counties in Arizona with a declining census; all other counties are experiencing population growth. In addition, approximately 28 percent of the county’s children are living in poverty, which is an indicator for an increased risk of mortality, prevalence of medical conditions and disease incidence, and poor health behaviors.

**3. Healthy Eating and Obesity and Diabetes**

Unhealthful individual behaviors such as smoking, lack of physical activity, and poor eating habits are major contributors to the leading chronic diseases. The United States Department of Agriculture (USDA) catalogs who has limited access to healthy food by determining what percentage of low-income residents live close to a grocery store (within 10 miles in rural areas). The lack of healthy food choices, lack of physical activity and obesity all contribute to the county’s high rate of diabetes.

**Health Needs Identified for Bisbee/Douglas and Surrounding Area during the CHNA via survey:**

**Bisbee 2016 Community Survey Summary of respondents:**

♣ 229 residents responded, 153 were female.

♣ 78% of the people rate their own health as Somewhat to Very healthy.

♣ 72% of the people rate the community’s health as Somewhat to Very healthy.

♣ 42% of Bisbee respondents drive more than 25 miles to see a doctor. Of these respondents, 17% drive more than 75 miles.

♣ 64% of Bisbee respondents do not feel that there is sufficient access to health care services or social services.

**Bisbee 2016 Community Survey Results:**

♣ The six most important factors for improving quality of life in your community:

1. Good jobs and healthy economy (97)

2. Good schools (81)

3. Access to affordable healthcare (54)

4. Affordable housing (51)

5. Good place to raise children (48)

6. Clean environment and clean water (45)

♣ The six most important “health problems” in your community:

1. Substance/drug abuse problems (114)

2. Mental health (104)

3. Aging problems (e.g., arthritis, hearing, vision loss) (69)

4. Homelessness (60)

5. Cancer (54)

6. Diabetes (47)

♣ The five highest “risky behaviors” in your community:

1. Drug abuse (149)

2. Alcohol abuse (126)

3. Being overweight (84)

4. Poor eating habits (76)

5. Dropping out of school (44)

**Douglas 2016 Community Survey Summary of respondents:**

1. 408 residents responded, 282 were female.

2. 87% of the people rate their own health as Somewhat to Very healthy.

3. 63% of the people rate the community’s health as Somewhat to Very healthy.

4. 47% of Douglas respondents drive more than 25 miles to see a doctor. Of these respondents, 16% drive more than 75 miles.

5. 36% of Douglas respondents do not feel that there is sufficient access to health care services or social services.

**Douglas 2016 Community Survey Results:**

♣ The six most important factors for improving quality of life in your community:

1. Good jobs and healthy economy (215)

2. Good schools (132)

3. Good place to raise children (110)

4. Affordable housing (100)

5. Access to healthcare specialists (87)

6. Low crime/safe neighborhoods (72)

♣ The six most important “health problems” in your community:

1. Cancer (219)

2. Diabetes (165)

3. Substance Abuse (146)

4. Aging problems (e.g., arthritis, hearing, vision loss) (86)

5. Teenage Pregnancy (72)

6. Lack of healthy food/grocery stores (62)

♣ The five highest “risky behaviors” in your community:

1. Drug abuse (230)

2. Alcohol abuse (195)

3. Being overweight (166)

4. Poor eating habits (122)

5. Lack of exercise (95)

6. Dropping out of school (93)

**Top three problems as determined by Bisbee group:**

A Bisbee community meeting was held November 30, 2016. Thirty community members were in attendance for the presentation of Cochise County community health data and the midpoint survey results for the county and Bisbee area. After hearing the presentation and discussing the county health data and survey results, the community members ranked the following issues as the top three problems facing Bisbee residents:

1. Alcohol/Substance Abuse

2. Good Jobs/Healthy Economy

3. Obesity & Healthy Lifestyles

**Top three problems as determined by Douglas group:**

A Douglas community meeting was held November 30, 2016. Twenty-five community members were in attendance for the presentation of Cochise County community health data and the midpoint survey results for the county and Douglas area. After hearing the presentation and discussing the county health data and survey results, the community members ranked the following issues as the top three problems facing Douglas residents:

1. Mental Health/Drug Abuse

2. Teen Pregnancy/Birth Control

3. Healthy Eating/Diabetes - Obesity

**Top health priorities as determined by CQCH:**

**Substance Abuse / Misuse**

Medicaid utilization data revealed that mental health and substance use disorders are a major contributor to the poor health of Cochise County residents. Mental health and physical health are inextricably linked, and research has shown a link between depression and chronic diseases and health conditions, including diabetes and cancer, which are two of the leading causes of death in Cochise County. To increase coordinated care for substance abuse, Copper Queen Community Hospital is participating in a federal grant to further develop a network to improve outcomes in opioid misuse and management – a major new crisis in Arizona -- for rural communities across Southern Arizona.

**Diabetes and Obesity, including Healthy Eating**

Unhealthful individual behaviors like smoking, lack of physical activity, and poor eating habits are major contributors to the leading chronic diseases. The United States Department of Agriculture (USDA) catalogs who has limited access to healthy food by determining what percentage of low-income residents live close to a grocery store (within 10 miles in rural areas). The lack of healthy food choices, lack of physical activity and obesity all contribute to the county’s high rate of diabetes.

**Good Jobs and a Healthy Economy**

Health is influenced by a number of factors including social and economic factors, including where people live. People who live in rural areas are at a higher risk of having poor health. Cochise County is one of two counties in Arizona with a declining census; all other counties are experiencing population growth. In addition, approximately 28 percent of the county’s children are living in poverty, which is an indicator for an increased risk of mortality, prevalence of medical conditions and disease incidence, and poor health behaviors.

**Action Plan**

CQCH is committed to quality healthcare close to home. Additionally, the hospital has a commitment to address challenges in a proactive manner. A number of needs and challenges have been identified through the CHNA process. Currently, the hospital is working to meet many of the needs identified through existing services and venues, including a 24-hour emergency department with a Level IV Trauma Center, imaging and respiratory services, an outpatient medical center, including a satellite clinic to serve a population in Palominas, a specialty clinic with providers who travel from Tucson to provide specialty services in 16 different areas, inpatient and outpatient rehabilitation services – including physical, occupational, and speech therapy, and an onsite full-service laboratory. To address the health care needs of Douglas, whose only hospital closed, Copper Queen Community Hospital opened a free-standing emergency department in Douglas. Several strategies have been developed to further enhance, educate, and address many of the needs identified in the CHNA. These strategies are noted below:

***Priority:* Substance Abuse / Misuse**

**Objective 1:** Provide education and best practices to assist in decreasing opioid misuse and abuse in Southeast Arizona.

**Strategies:**

1. CQCH will partner with our Southern Arizona Hospital Alliance (SAHA) members in a year-long federal grant from Health Resources and Services Administration (HRSA) to build a network of behavioral health providers and first responders to fight opioid misuse in Southeastern Arizona. CQCH and SAHA will disseminate Arizona Opioid Prescribing Guidelines across the network; conduct patient pain management needs assessment among the network and develop a shared database of patient pain management; develop and share opioid misuse communications plan; design or adapt community education strategies; and disseminate information on best practices regarding treatment of opioid misuse.

2. CQCH will work with Douglas and Bisbee school districts to educate middle school students in the dangers of drug and opioid use, whether prescribed or illegal. CQCH will fund the training and provide stipends for instructors.

3. CQCH will create partnerships with law enforcement and first responders to increase knowledge, and improve strategies and education on reducing opioid misuse.

**Anticipated Impact:** Through these efforts, up to an estimated 400 community residents, including providers, will receive education on appropriate use of opioid pain medications, as well as the effects and best practices for treatment of misuse and abuse of opioids.

**Objective 2:** Build relationships with Mental Health Providers to increase coordinated care for Southeast Arizona residents.

**Strategies:**

1. CQCH is partnering with our Southern Arizona Hospital Alliance (SAHA) members in a year-long federal grant from Health Resources and Services Administration (HRSA) to build a network of behavioral health providers to fight opioid misuse in Southeastern Arizona.

2. Design and test a process for integrating behavioral health screening and referrals for emergency departments or other healthcare providers.

**Anticipated Impact:** A goal of the grant is to develop a coordinated care plan between network hospitals and behavioral health providers to decrease opioid and other substance abuse and misuse.

***Priority:* Diabetes and Obesity, including Healthy Eating**

**Objective 1:** Provide education and care that is safe, timely, effective, efficient, equitable, and patient-focused.

**Strategies:**

1. CQCH currently provides healthy low fat and calorie meals to the general public as well as patients and employees in the CQCH cafeteria.

2. CQCH will promote and educate residents on healthy living activity options in Douglas and Bisbee. CQCH sponsored new playground equipment ($38,000) at the local park to encourage children and parents to engage in healthy outside activities. CQCH purchased solar heaters ($20,000) for the Bisbee outdoor pool to lengthen the time the pool is available to the community.

3. CQCH provides weekly Weight Watchers classes open to the public to manage weight and encourage healthy eating.

4. CQCH provides lifestyle classes targeted to people with chronic diabetes to help manages their care and improve their lifestyle.

**Anticipated Impact:** Through the education efforts of the hospital, we hope to prevent residents from becoming diabetic or obese through diet and exercise. And for those who already have chronic illness, we hope to reduce further complications of diabetes and obesity.

***Priority*: Good Jobs and a Healthy Economy**

Objective 1: Be the employer of choice in the service area providing jobs that offers a living wage and affordable benefits.

Strategies:

1. CQCH currently employs over 300 people in good paying jobs that exceed the average for their peer group in rural Arizona.

2. CQCH will seek to expand services to accommodate the community needs that will result in additional employment opportunities. Over 20 full time equivalent positions have been added in Bisbee in the last year.

3. CQCH will seek to expand services in Douglas to accommodate community needs. Over 35 full time equivalent positions were added in Douglas with the opening of the Douglas Emergency Department.

4. CQCH will work with the local school districts through health clubs that promote working in the health care industry.

Anticipated Impact: Through continued expansion and ability to provide excellent benefits and wages that exceed our competitors, CQCH will be the provider of choice for Southeast Arizona and provide positive economic impact in the community.

**Identified Needs Not Addressed by This CHIP**

A number of issues were identified which are currently being funded and addressed through other agencies. Additionally, other agencies are better equipped to address these issues. CQCH lacks the providers, equipment, and financial resources to address all community needs. This is a poor area on the border of Mexico that has chronic social service and economic needs that no one institution has the resources to address. We do the best we can with the resources we have.

Copper Queen Community Hospital is committed to quality and affordable healthcare close to home. As such, it will continue to strive toward eliminating barriers to treatment in the community that would prevent the provision of appropriate, safe, and adequate healthcare to the population it serves.