

University Hospital and Clinics Community Health Needs Assessment Implementation Strategy

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Evaluation of Impact



Advancements related to the previous Implementation Strategy for University Hospital and Clinics (UHC)

- 1. UHC continues to provide nutrition-related educational resources within the Medical Library for medical students, residents, and faculty.
- 2. The hospital provides Diabetic Education Classes that include a module related to the importance of physical activity and its impact on health and wellness. The hospital also arranges for free health educational opportunities for patients with a Body Mass Index (BMI) in the obese rage.
- 3. UHC conducts community outreach in order to provide health education related to the early detection of breast cancer through annual mammography screenings.
- 4. The hospital continues to provide a Free Screening Mammogram Night every October during Breast Cancer Awareness month.
- 5. UHC hosted a Community Wellness Fair in June 2017 related to Cancer Prevention.
- 6. The hospital's annual Survivors Event continues to celebrate local cancer survivors.
- 7. Through a partnership with LSU, the hospital continues to provide a Smoking Cessation Program that consist of one on one counseling, health education, and group classes.
- 8. UHC has expanded the Diabetic program and recruited an Endocrinologist to expand access to care for patients with diabetes in the community.



Community Health Need	Target Population	Action Plan	Goals	Existing Partners	Potential Partners	Action Plan Rationale	Evaluation Strategy
Heart Disease	Cardiovascular patients who smoke	assistance programs to cardiovascular patients who indicate a desire to quit	Screen patients who smoke (or a subset with cardiovascular diagnoses) to determine their desire to quit. 2) Promote medication assistance programs providing prescriptions that can help individuals quit smoking. 3) Include communications regarding smoking cessation in HealthLoop communications with cardiovascular patients.		Trust	According to the CDC, heart disease is the leading cause of death in all six of the parishes that make up the primary and secondary service areas. An initiative that educates patients on resources that can assist them in quitting and simultaneously provide a direct referral could be successful in lowering the number of individuals who smoke.	
Heart Disease	UHC patients with heart disease	Provide specialized services to improve early detection and intervention for cardiovascular conditions	Increase the amount of time that CIS specialists spend caring for UHC patients by 1.5X by 2019.	Cardiovascular Institute of the South		create a hospital-physician co-management agreement. The partnership has fostered drastically better patient outcomes, stronger quality measures, shorter lengths of stay, reduced readmissions, and higher patient satisfaction	quality indicators, administer patient satisfaction surveys,
Heart Disease	Vascular disease patient population		Offer peripheral vascular interventions at the UHC Catheterization Lab beginning in 2019.			St. Landry, Vermilion, Acadia, St. Martin, and Iberia parishes had higher age-adjusted mortality rates for all heart disease than the rest of the state. The UHC Catheterization Lab currently provides treatments for cardiovascular disease patients. The service offering will be expanded to offer patients with peripheral vascular disease additional procedures close to home. Timely diagnosis and intervention will lead to improved outcomes for these patients.	Measure number of patients with peripheral vascular disease served and the number of specific procedures provided
Access to Care	Medicaid population	Increase the availability of primary care providers serving Medicaid patients	Recruit primary care providers to the market who will become Medicaid providers.	Lafayette General Health System, Louisiana State University		UHC's service area contains multiple Medically Underserved Areas according to the Health Resources and Services Administration (HRSA). In addition to the shortage of primary care providers in underserved areas, community leaders identified a lack of physicians in the Acadiana region who accept Medicaid patients. In St. Landry, St. Martin, Iberia, Vermilion, and Acadia parishes, the percentage of the population receiving Medicaid was higher than the rest of the state from 2012 to 2016.	Report on the number of new primary care providers accepting Medicaid



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Access to Care	Medicaid population	Extend access to urgent care and walk-in clinic facilities	Offer extended hours of operation at the UHC urgent care clinic, 12 hours per day and 7 days per week, in 2019.			Multiple community leaders mentioned a lack of urgent care facilities serving Medicaid patients or the uninsured throughout Acadiana. Extending the availability of urgent care clinics will decrease inappropriate emergency department usage.	Document the increase in availability of the urgent care clinics and track the number of patient visits at the UHC Urgent Care Clinic
Access to Care	UHC patient population	Promote the Prescription Assistance Program	Increase patient awareness of the Prescription Assistance Program by educating providers on the eligibility requirements and types of assistance available.			St. Landry, Iberia, and Acadia parishes had a higher percentage of individuals below the federal poverty level from 2012 to 2016, according to the US Census Bureau. Within service area parishes, the percentage of the population without health insurance ranged from 13.2% to 15.6%. UHC's outpatient pharmacy and prescription discount programs were mentioned as a strength by community leaders as they improve compliance for lower-income, uninsured, and underinsured populations.	Track the number of patients utilizing the Prescription Assistance Program
Nutrition & Physical Activity	Diabetic patients	Educate patients with diabetes in order to minimize complications and improve health outcomes	Continue to provide nutrition education courses to diabetic patients. 2) Continue to provide DSMP (Diabetes Self-Management Program) courses. 3) Increase the number of referrals to the diabetes education programs.		Cooking Matters evidence-based program	According to the CDC, diabetes was the sixth leading cause of death in Louisiana from 2012 to 2016 and individuals in St. Landry and Iberia parishes were more likely than those in the rest of the state to be diagnosed with diabetes. Evidence-based programs like DSMP and Cooking Matters lead to improvements in health behaviors that in turn improve clinical outcomes.	Track the number of patients who complete the nutrition education and DSMP programs, measure diabetic indicators for individuals completing education programs
Nutrition & Physical Activity	Medical providers	Increase provider self-efficacy in offering nutrition and physical activity coaching	1) Collect resources and courses related to provider-led nutrition and physical activity coaching. 2) Add relevant Continuing Education (CE) courses to the UHC medical library by the end of 2019. 3 Conduct outreach to promote relevant resources and their content.)		Healthy eating and nutrition education were frequently mentioned by community leaders as a public health priority. Adults in St. Landry, Iberia, Acadia, St. Martin, and Lafayette parishes are more likely to report having inadequate fruit/vegetable consumption compared to adults in the rest of Louisiana. Residents in Acadia, Iberia, St. Landry, Vermilion, and St. Martin parishes are more likely to report physical inactivity than residents statewide. Education for providers will lead to improvements in coaching patients towards positive behavior change. Educated providers will be better equipped to refer patients to an array of community-based supportive services.	Monitor the number of resources available to UHC providers and the visits or downloads from the medical library website. Track outreach related to nutrition and physical activity coaching and behavior change.



Community Health Need	Target Population	Action Plan	Goals	Existing Partners	Potential Partners	s Action Plan Rationale	Evaluation Strategy
Health Literacy	Medical providers	Promote provider's understanding of health literacy	Add relevant CE courses to the UHC Medical Library and Resource Center's online resources by the end of 2019. 2) Conduct outreach to promote these resources and their content.	Southwest Louisiana Area Health Education Center (SWLA AHEC)	CDC TRAIN continuing education system	Residents in St. Martin Parish, Iberia Parish, Vermillion Parish, St. Landry Parish, and Acadia Parish were less likely to have earned a high school degree than those in the rest of Louisiana from 2012 to 2016. Low levels of health literacy and a lack of patient education causes strain on local healthcare organizations and leads to poor health outcomes for individuals throughout Acadiana. Community leaders described how many patients are readmitted due to non-compliance stemming from a lack of understanding about the state of their health/disease. Improved provider understanding of how to address varying levels of patient health literacy will lead to more effective care planning, patient follow up,	Monitor the number of resources available to UHC providers and the visits or downloads from the medical library website. Track outreach related to nutrition and physical activity coaching and behavior change.
Health Literacy	Community residents	Increase awareness and understanding of pertinent health and wellness topics	Develop and distribute health and wellness resources (print, online, and inperson) to internal and external stakeholders and the general public 2) Continue to provide educational opportunities via the UHC Medical Library and Resource Center and UHC Outreach Committee		Churches, local schools, walk-in clinics, national disease-specific or specialty organizations	Residents in St. Martin Parish, Iberia Parish, Vermilion Parish, St. Landry Parish and Acadia Parish were less likely to have earned a high school degree than those in the rest of Louisiana from 2012 to 2016. Low levels of health literacy and a lack of patient education causes strain on local healthcare organizations and leads to poor health outcomes for individuals throughout Acadiana Community leaders described how many patients are readmitted due to non-compliance stemming from a lack of understanding about their disease state.	Track the articles, events, and presentations conducted by the Community Relations Department and UHC Medical Library and Resource Center.
Cancer	Community residents	Promote colorectal cancer screening	Continue to provide at-home colorectal screening kits to UHC patients.	American Cancer Society, Miles Perrett Cancer Services		Colorectal cancer incidence was higher in St. Landry, St. Martin, Iberia, Vermilion, Acadia, and Lafayette parishes compared to the rest of Louisiana from 2010 to 2014. In 2017, UHC conducted a study of colorectal cancer in the Acadiana region in order to better understand the high incidence rates throughout the area. Continued distribution of at-home FIT (fecal immunochemical test) screening kits will lead to earlier identification of cancer cases and better health outcomes.	Track the number of screening kits tested. Monitor the colorectal cancer incidence and mortality rates.
Cancer	Community residents	Provide education on cancer screening guidelines	Develop and distribute cancer-focused health education resources (print, online, and in-person) to internal and external stakeholders and the general public. 2) Continue to provide educational opportunities via the UHC Medical Library and Resource Center and UHC Outreach Committee.	American Cancer Society, Miles Perrett Cancer Services, Our Lady of Lourdes Congregational Health Program, Louisiana Breast and Cervical Health Program, Komen Acadiana		Cancer was the second leading cause of death throughout the service area from 2012 to 2016. Additional education for the general public on screening guidelines will lead to an increased number of timely screens, leading to earlier identification of cancer cases and better health outcomes.	Track the articles, events, and presentations conducted by the Community Relations Department and UHC Medical Library and Resource Center.

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Community Health	•	Action Plan	Goals	Existing Partners	Potential Partners Action Plan Rationale	Evaluation Strategy
Need Cancer	Population Cancer patients	Refer cancer patients to wellness services	Continue to refer patients to supportive services throughout Acadiana. 2) Compile a list of relevant resources to share with partner organizations by the end of 2019.	American Cancer Society, Miles Perrett Cancer Services, Our Lady of Lourdes Congregational Health Program, Louisiana Breast and Cervical Health Program, Komen	Cancer was the second leading cause of death throughout the service area from 2012 to 2016. Increased referrals to a variety of supportive and wellness services will improve the quality of life of cancer patients and their families and can lead to improved health outcomes for this population.	Track referrals to supportive services and monitor cancer mortality rates.
Cross-Cutting: Heart Disease, Health Literacy		Provide care management to chronic disease patients	Implement a new care management program involving nurse coaches targeting patients with CHF and COPD by the end of 2019.		Community leaders described how many patients are readmitted due to non-compliance stemming from a lack of understanding about their disease state. Nurse care managers would assist patients with obtaining additional support from partner organizations and could provide additional education to improve patient health literacy. This would lead to improved medication management, patient understanding, and adherence to the care plan.	Monitor health outcomes of patients involved in care management programs.
Cross-Cutting: Access to Care, Health Literacy	Medicaid- eligible population	Reduce the number of individuals who do not have health insurance	Assist eligible patients in enrolling in the LA Medicaid program using dedicated Medicaid Enrollment Specialists.	LA State Department of Health	During Community Leader interviews, the "working poor" or Asset-Limited, Income-Constrained, and Employed (ALICE) population was described as needing additional assistance in accessing services and navigating the healthcare system. Enrollment Specialists are able to assist eligible individuals in understanding the application process for the Medicaid program and can help them to overcome barriers associated with program enrollment and renewal.	Track the number of patients served by Medicaid Enrollment Specialists and monitor the percentage of the population without health insurance.



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