Community Health Improvement Plan

Mercy Hospital Berryville

Fiscal Year 2023-2025

As the Sisters of Mercy before us, we bring to life the healing ministry of Jesus through our compassionate care and exceptional service.

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I. Introduction

Mercy Hospital Berryville (Mercy Berryville) completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors in April 2022. The CHNA took into account input from the county health department, community members, members of medically underserved, low-income, and minority populations and various community organizations representing the broad interests of the community of Carroll County, Arkansas. The CHNA identified two prioritized health needs the hospital plans to focus on addressing during the next three years: Access to Care and Behavioral Health. The complete CHNA report is available electronically at mercy.net/about/community-benefits.

Mercy Berryville is affiliated with Mercy, one of the largest Catholic health systems in the United States. Located in Carroll County, Arkansas, the critical access hospital has 25 licensed beds and includes an outpatient surgery center, sleep center, physical therapy services, and emergency department. Mercy Berryville is a large employer in the area with over 220 co-workers. Carroll County is considered to be part of the larger Northwest Arkansas metropolitan area, which includes Benton, Carroll, Madison, and Washington Counties in Arkansas, as well as, Barry and McDonald Counties in Missouri.

This three-year Community Health Improvement Plan (CHIP), aimed at addressing the prioritized health needs identified in the CHNA, will guide the coordination and targeting of resources, and the planning, implementation and evaluation of both new and existing programs and interventions. The 2022 CHNA and this resulting CHIP will provide the framework for Mercy Berryville as it works in collaboration with community partners to advance the health and quality of life for the community members it serves.

II. Implementation Plan by Prioritized Health Need

Prioritized Need #1: Access to Care

Goal 1: Increase access to health care and community resources for uninsured and at-risk persons.

PROGRAM: **Community Health Worker Program**
PROGRAM DESCRIPTION: Community Health Workers (CHWs) serve as liaisons/links between health care and community and social services, screening for needs related to social determinants of health, facilitating access to services, and improving the quality and culture competence of care. CHWs work one-on-one with at-risk patients and community members, acting as patient advocates, assisting patients in applying for Medicaid and financial assistance and connecting patients with community resources and medication assistance.
ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED: 1. Identify uninsured and at-risk patients and community members in need of assistance in Mercy clinics, emergency department, inpatient settings, community events, and through the use of reports and dashboards. 2. Assist uninsured patients apply for Mercy financial assistance, Medicaid programs, and Marketplace insurance plans. 3. Assist patients without an established primary care provider in establishing care with a primary care clinic or provider. 4. Screen patients for needs related to social determinants of health and connect patients to community resources to meet identified needs. 5. Connect patients with other community resources, including medication resources, as needed.
ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES): 1. By the end of each month, each CHW will have recorded 30 new and 30 ongoing encounters. 2. By the end of each fiscal year for the next three years, each CHW will enroll 80 patients in Mercy financial assistance 10 in Medicaid 3. Each CHW will assist at least 100 patients per year with community and medication assistance resources. 4. Patients enrolling in CHW program will demonstrate reduced ED utilization. 5. Patients enrolling in CHW program will demonstrate a reduction in their total cost of care. 6. Clinic patients enrolling in CHW program will demonstrate reduced no-show rate for follow-up clinic appointments.
PLAN TO EVALUATE THE IMPACT: 1. Track number of new and ongoing encounters conducted by each CHW. 2. Track number of patients successfully enrolled in Mercy financial assistance and Medicaid. 3. Track number of patients receiving community resource and medication assistance. 4. Analyze ED utilization clinic no-show rates for patients enrolled in CHW program.

5. Analyze total cost of care for patients enrolled in CHW program.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:
1. Compensation and benefits for Community Health Workers.
2. Mileage and travel expenses required for CHW work.
3. Office space and indirect expenses dedicated to CHW work.

COLLABORATIVE PARTNERS:
1. ECHO Clinic
2. A Cup of Love Ministries

Goal 2: Increase the number of practicing primary care physicians in the region.

PROGRAM: Family Medicine Rural Residency Program

PROGRAM DESCRIPTION: In partnership with the University of Arkansas for Medical Sciences, Mercy supports the Family Medicine Rural Residency Track. The program is scheduled to begin in July 2024 with 2 residents assigned to Berryville and Eureka Springs. Residents will see patients in the hospital and outpatient clinics and participate in rotations at other facilities and clinics.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:
1. Mercy Berryville will provide infrastructure and supervision for inpatient and outpatient clinical training opportunities
2. Mercy physicians will serve as program directors and faculty for the program.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):
1. By the end of fiscal year 2024, 2 family medicine residents will successfully complete the first year of the program.
2. Family medicine residents will gain exposure and experience in outpatient general family medicine practice with a focus on rural medicine.
3. Retain graduating residents and increase practicing primary care physicians in Carroll County and rural Arkansas.

PLAN TO EVALUATE THE IMPACT:
1. Record total numbers of residents enrolled in family medicine residency program annually.
2. Record number of residents graduating from the program annually.
3. Track post-graduation plans of graduating residents annually.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:
1. Staff and physician salaries.
2. Indirect expenses related to graduate medical education and training.

COLLABORATIVE PARTNERS:
1. University of Arkansas for Medical Sciences Northwest
2. Washington Regional Medical Center

Prioritized Need #2: Behavioral Health

Goal: Increase access to outpatient behavioral health services for primary care patients.

PROGRAM: Concert Health Collaborative Care for Primary Care Physicians
PROGRAM DESCRIPTION: Mercy Berryville will collaborate with Concert Health to support primary care providers (family medicine, internal medicine, and pediatrics) in providing mental and behavioral health services to patients in need. The model provides a behavioral care manager to interact directly with patients, perform assessments, initiate treatment, and communicate and collaborate with primary care physicians. Concert Health provides a psychiatric consultant who meets with care managers regularly, reviews patient charts, and makes recommendations for medication and ongoing treatment.
ACTIONS THE HEALTH SYSTEM INTENDS TO TAKE TO ADDRESS THE HEALTH NEED: 1. Consistent with the Behavioral Health Service Line model of care, Mercy Berryville will implement the Concert Health Collaboration in primary care clinics. 2. Train providers in use of the care approach. 3. Promote the initiative. 4. Identify gaps in care.
ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES): 1. By the end of FY23, the initiative will go live in Mercy Berryville primary care clinics. 2. By the end of FY24, 100 referrals will have been made to Concert Health, and 50 patients will have engaged in collaborative care. 3. Increase access to community resources through referrals to Community Health Workers.
PLAN TO EVALUATE THE IMPACT: 1. Track number of primary care physicians participating in program. 2. Track number of referrals to Concert Health per month. 3. Track percentage of patients referred to Concert Health who enroll in program (conversion rate). 4. Track number of referrals of uninsured and Medicaid patients per month. 5. Track referrals to Community Health Workers for needs related to social determinants of health by Concert Health.
PROGRAMS AND RESOURCES THE HEALTH SYSTEM PLANS TO COMMIT: 1. Cost of coworker and physician time. 2. Operational budgeted support as appropriate. 3. Indirect expenses related to EMR and clinic operations
COLLABORATIVE PARTNERS: 1. Mercy Behavioral Health Service Line Leadership 2. Mercy Virtual Behavioral health (vBH) 3. Concert Health

III. Other Community Health Programs

Mercy Berryville conducts other community health programs not linked to a specific prioritized health need. These programs address a community health need and meet at least one of the following community benefit objectives: improve access to health care services, enhance the health of the community, advance medical or health care knowledge or relieve or reduce government burden to improve health. The need for these programs was identified through documentation of demonstrated community need, a request from a public health agency or community group, or the involvement of an unrelated, collaborative tax-exempt or government organization as partners in the activity or program carried out for the express purpose of improving community health. Although this is not an exhaustive list, many of these programs are listed below.

Community Benefit Category	Program	Outcomes Tracked
Community Health Improvement Services	Alzheimer's Support Group	Persons served
	People Helping People pharmacy assistance program	Persons served
	Lab and imaging vouchers for ECHO free clinic patients	Persons served
Health Professions Education	Health professions student education – lab, nursing, and radiology technician students	Numbers of students
Financial and In-Kind Contributions	Loaves and Fishes Food Bank support	Cost of contributions
	Ozarks AIDS Resources and Services Support	Cost of contributions

IV. Significant Community Health Needs Not Being Addressed

A complete description of the health needs prioritization process is available in the CHNA report. Three health issues identified in the 2022 CHNA process—diabetes, heart disease, and obesity and overweight—were not chosen as priority focus areas for development of the current Community Health Improvement Plan due to Mercy's current lack of resources available to address these needs and the intention to focus on the two prioritized health needs. These issues will be addressed indirectly in implementation strategies developed to meet the prioritized needs in areas that may overlap. Additionally, related community partnerships, evidence-based programming, and sources of financial and other resources will be explored during the next three-year CHIP cycle. Mercy Berryville will consider focusing on these issues should resources become available. Until then, Mercy Berryville will support, as able, the efforts of partner agencies and organizations currently working to address these needs within the community.

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