

Community Health Needs Assessment (CHNA)

Annual Implementation Strategy

Troy Community Hospital

275 Guthrie Drive, Troy, PA 16947

FY 2023

General Information

Contact Person: Felissa Koernig, President

Date of Written Plan: May 27th, 2022

Date Written Plan Was Adopted by Organization’s Authorized Governing Body: June 29, 2022

Date Written Plan Was Required to Be Adopted: November 15, 2022

Authorizing Governing Body That Adopted the Written Plan: Troy Community Hospital Board of Directors

Name and EIN of Hospital Organization Operating Hospital Facility: Troy Community Hospital 24-0800337

Address of Hospital Organization: 275 Guthrie Drive, Troy, PA 16947

I. Purpose of Implementation Strategy

This Implementation Strategy has been prepared to comply with federal tax law requirements set forth in Internal revenue Code section 501(r) requiring hospital facilities owned and operated by an organization described in Code section 501(c)(3) to conduct a community health needs assessment at least once every three years and adopt an implantation strategy annually to meet the community health needs identified through the community health needs assessment. This Implementation Strategy is intended to satisfy each of the applicable requirements set forth in proposed regulations released April 2013.

II. List of Community Health Needs Identified in Written Report

List of Community Health Needs identified in CHNA Written Report, Ranked by CHNA’s Priority:

- Mental Health
- Obesity
- Emergency Department Utilization
- High Blood Pressure
- Diabetes

III. Health Needs Planned to Be Addressed by Facility

List of Significant Health Needs the Facility Plans to Address Include:

- Obesity
- Mental Health

Please refer to the attached tables which provide a detailed description of intervention actions (including collaborative efforts), population description, Guthrie resources utilized, and evaluation tools by measurable effectiveness criteria. These tables are stratified by priority health need.

IV. Health needs Facility Does Not Intend to Address

List of Significant Health Needs the Facility Does Not Plan to Address include:

- Preventable Hospital events
- HIV Screenings

Due to available resources these needs will not be addressed through an implementation strategy in the subsequent fiscal years. However, due to the overlap in disease etiology between the identified priority needs and these needs, an impact is anticipated.

FY2023-2025 Troy Community Hospital Implementation Strategy- Priority Need Obesity

| | Intervention Description | Population Description | Effect Measure | Evaluation of Intervention | Program Frequency |
|-----------------|---|---|---|---|--------------------------|
| Intervention #1 | <p>Increase access to healthy food and provide opportunities for community education around healthy eating</p> <ul style="list-style-type: none"> • Create Community Garden: FY23- Build community garden to provide fresh produce to community members • FY24- Expand raised beds, provide produce to food pantry • FY25- Increase educational/community involvement with cooking demos and recipes | All Guthrie Troy Community Hospital patients at risk for obesity. | <p>Number of community members served</p> <p>Pounds of produce donated to food pantry</p> | Decrease in % of Guthrie patients who are obese | Annually Ongoing |
| Intervention #2 | <p>Address barriers to maintaining a healthy weight (food insecurity)</p> <p>Complete social determinant of health(SDOH) screening in primary care offices and referral to resources for food insecurity</p> | All Guthrie Troy Community Hospital patients at risk for obesity. | Percent of patients screened for SDOH | <p>Number of referrals to food insecurity resources</p> <p>Decrease in % of patients reporting food insecurity (FY 24 & 25)</p> | Annually Ongoing |

FY2023-2025 Troy Community Hospital Implementation Strategy- Priority Need Obesity

| | Intervention Description | Population Description | Effect Measure | Evaluation of Intervention | Program Frequency |
|-----------------|--|---|---------------------------|-----------------------------------|--------------------------|
| Intervention #3 | Provide food-based medical intervention with tailored education and access to healthy food and recipes | All Guthrie Troy Community Hospital patients at risk for obesity. | Number of patients served | Number of resources distributed | Annually Ongoing |

FY2023-2025 Troy Community Hospital Implementation Strategy- Priority Need Mental Health

| | Intervention Description | Population Description | Effect Measure | Evaluation of Intervention | Program Frequency |
|-----------------|--|---|---|---|--------------------------|
| Intervention #1 | <p>Prevent crisis escalation in patients experiencing mental health or substance use disorder emergencies. Increase staff capabilities in providing trauma-informed care and de-escalation techniques to address crisis situations.</p> <ul style="list-style-type: none"> • FY23: Convene Steering Committee • FY23-24: Conduct training to Guthrie employees on: Identifying mental health needs, responding to someone in a crisis, de-escalation • FY25: Continue training, conduct evaluation reviewing number of workplace violence incidence | All Troy patients at risk for mental health problems. | Number of days away from work for injury related to workplace violence | Number of staff injuries | Annually Ongoing |
| Intervention #2 | <p>Decrease time between arrival and crisis assessment for emergency department patients with mental health concerns</p> <p>Increase virtual crisis assessment capabilities in Troy in collaboration of Robert Packer Hospital</p> <p>Utilize CONCERN Counseling Services assessment capabilities when virtual support is unavailable</p> | All Troy patients at risk for mental health problems. | Time between arrival and assessment, for virtual assessment vs. assessment by CONCERN | Decreased time between arrival and assessment | Annually Ongoing |

FY2023-2025 Troy Community Hospital Implementation Strategy- Priority Need Mental Health

| | Intervention Description | Population Description | Effect Measure | Evaluation of Intervention | Program Frequency |
|-----------------|---|---|--|---|-------------------|
| Intervention #3 | Increase access to Mental Health Care Providers <ul style="list-style-type: none"> • FY23 Increase access to psychological services • FY24 increase psychiatrist and psych APP (# to be determined) | All Troy patients at risk for mental health problems. | Providers hired | Number of patients seen by psych in Bradford County | Annually Ongoing |
| Intervention #4 | Prevent overdose by providing opportunities for safe disposal of prescription medications Host yearly drug disposal event at Troy Community Hospital aligned with DEA National Drug Take Back Day to promote safe disposal of prescription medications | All Troy patients at risk for overdose. | Pounds of prescription medications collected | Number of Take Back Days | Annually |

FY2023-2025 Troy Community Hospital Implementation Strategy- Priority Need Mental Health

| | Intervention Description | Population Description | Effect Measure | Evaluation of Intervention | Program Frequency |
|-----------------|---|---|-----------------------------|---|--------------------------|
| Intervention #5 | Increase depression screening and referral to treatment | All Troy patients at risk for mental health problems. | Number of patients screened | Discharge instructions updated (# of resources updated) | Annually |
| | Continue tracking PHQ-2 screening rates in primary care, inpatient, and ED | | | Updated workflow for referral to treatment | |
| | Review workflows to coordinate referrals with additional psychology support | | | | |
| | Update discharge instructions with Farmer helpline, crisis numbers and new resources as available | | | | |