

Providence Medical Center

2016

Community Health Needs Assessment



PMC Community Health Assessment

COMPILED BY FOCUS&EXECUTE

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**OUR MISSION IS TO PROVIDE QUALITY
HEALTHCARE IN THE SPIRIT OF CHRIST**

Background

The Affordable Care Act (ACA), enacted March 23, 2010 added new requirements hospital organizations must satisfy in order to be described in section 501(c)(3) as well as new reporting and excise taxes.

These new requirements for charitable 501(c)(3) hospitals are articulated in section 501(r). The ACA imposes the following new requirements on organizations that operate one or more hospital facilities (Hospital Organizations). Each 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis:

- ◆ establish written financial assistance and emergency medical care policies
- ◆ limit amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy
- ◆ make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial policy before engaging in extraordinary collection actions against the individual, and
- ◆ **conduct a community health needs assessment (CHNA) and adopt an implementation strategy at least once every three years.**

These CHNA requirements are effective for tax years beginning after March 23, 2012

IRS ruling 69-545 established the community benefit standard as the basis for a tax exemption. Community benefit is determined if the hospital promotes the health of a broad class of individuals in the community, based on factors that include:

- ◆ emergency room care is open to all, regardless of ability to pay
- ◆ surplus funds are used to improve patient care, expand facilities, train staff, etc.

- ◆ the hospital is controlled by independent civic leaders, and
- ◆ all available qualified physicians are privileged

The healthcare reform law, the Patient Protection and Affordable Care Act, added a new provision to the IRS code for not for profit hospitals. Under this provision, not for profit hospitals must conduct a Community Health Needs Assessment (CHNA) every three years. The health needs identified in the CHNA must be addressed in an action or implementation plan. Other requirements of the new IRS provision include:

- ◆ the CHNA must take into account the broad interests of the community
- ◆ the assessment must involve individuals with expertise in public health
- ◆ the findings must be made widely available to the public

IRS requirements also specify that the deadline for completion of the CHNA is the end of the hospital's tax year starting after March 2012...for Providence Medical Center the deadline is December 31, 2016. **Failure to complete a CHNA could result in a \$50,000 fine and possible loss of tax-exempt status.**

Providence Medical Center (PMC) engaged Focus & Execute to:

- ◆ complete a Community Health Needs Assessment (CHNA) report
- ◆ provide Providence Medical Center with information needed to complete the IRS form 990 Schedule
- ◆ provide information needed for the hospital to issue an assessment of community health need and to document how it intends to respond to the identified needs

**"WHEN I CAME TO PROVIDENCE MEDICAL CENTER
THERE WAS NO JOY IN SITTING DOWN TO PLAY
THE PIANO. MY BACK, ARMS AND LEGS HURT,
AND MY HANDS WERE EVEN SWOLLEN. JUST TO
SIT ON THE PIANO BENCH WAS PAINFUL. AND
NOW I CAN SIT AND PLAY AS LONG AS I FEEL
LIKE IT. THE PAIN IS GONE."**

—BAILLY—

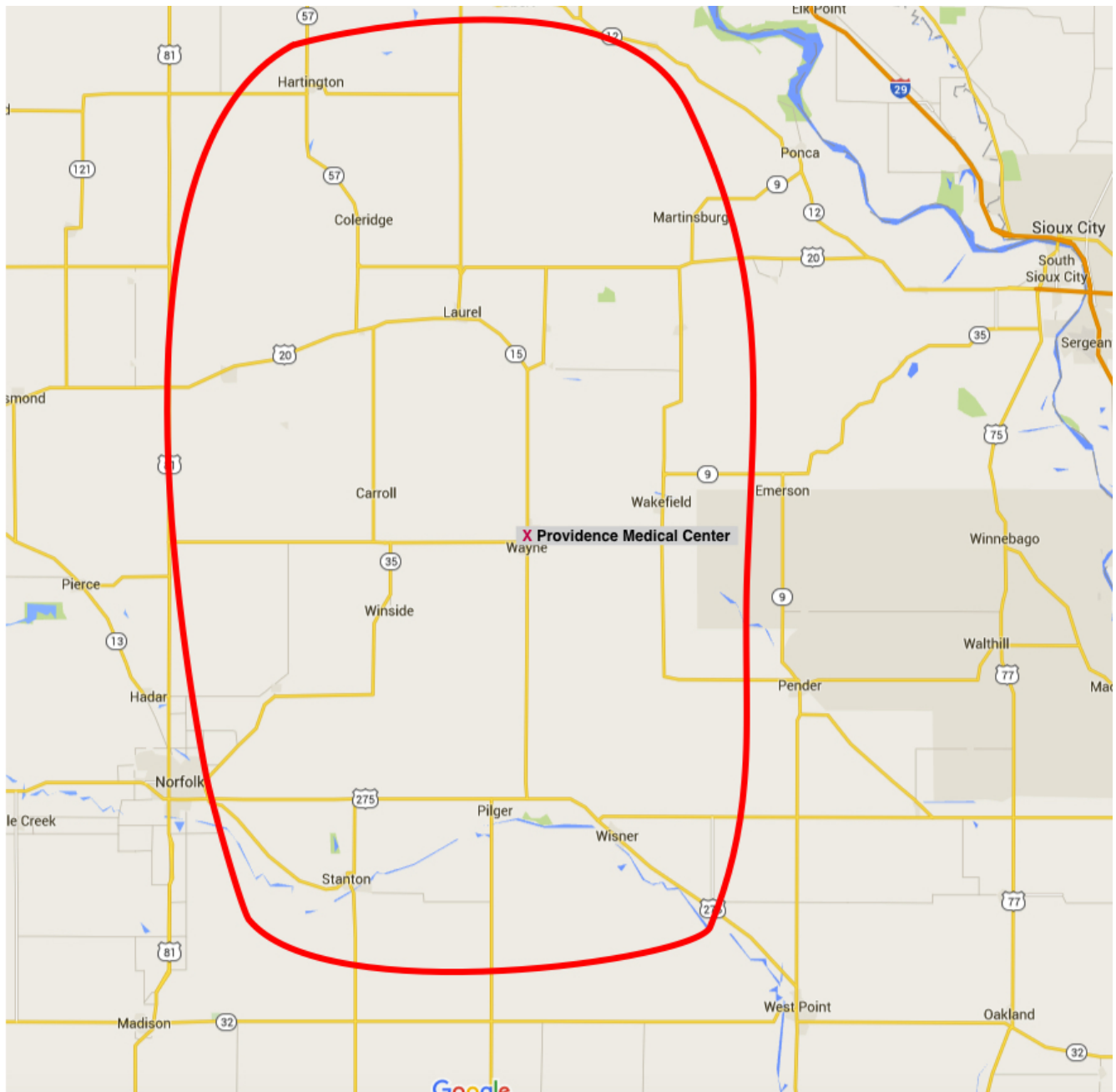


**Amplified Musculoskeletal Pain Syndrome (AMPS) treatment is
available at Providence Medical Center in Wayne, Nebraska.**

It is the only program of its kind available in Nebraska

Determining the Community Served

For purposes of this CHNA, we defined the Providence Medical Center service area as an area which covers Wayne County and portions of the surrounding counties. The area starts in Cedar County with the City of Hartington and travel south next to 81 bypassing Norfolk. Then traveling east it includes the Cities of Stanton and Pilger in Stanton county and Wisner in Cuming County. Finally it moves north to include Wakefield and Martinsburg in Dixon County and back to Hartington.



Processes and Methodologies:

Completion of the Providence Medical Center Community Health Needs Assessment (CHNA) followed an outline designed by the Center for Rural Health at the University of North Dakota for the North Dakota Critical Access Hospitals. The sections of this CHNA follow their suggested methodology and serve as a checklist to ensure all requirements are met.

Two meetings were held to complete the CHNA. A survey was conducted in between meetings to gather the appropriate data to make final decisions on which health needs were appropriate to address in this fiscal year. The first meeting was a general review of health information on a county level. During that meeting, Providence Medical Center reviewed and refined an electronic survey that would be distributed throughout the service area and in local businesses. The survey was further revised in conjunction with Focus and Execute and Providence Medical Center to ensure the questions asked would help the committee decide on the best course of action for the Hospital. Once the questions were determined and edited, the survey was translated into Spanish to reach out to a silent portion of the community.

A second meeting was held to review the information from the survey and prioritize the most important health issues that could and should be addressed given the resources of Providence Medical Center.

The CHNA for Providence Medical Center Utilized Data From:

Community Health Status Indicators (CHSI) from the cdc.gov website. The information on this website was last updated in 2015. The CHSI website provides an overview of key health indicators for local communities to encourage dialogue about actions that can be taken. The CHSI report contains over 200 measures for each of the 3141 counties in the US.

County Health Rankings. Since it began in 2010, County Health Rankings ranks the health of nearly every county in the nation and is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The program awards grants to local coalitions and partnerships working to improve the health of people in their communities. The information received from this website appears to be from 2016.

2015 Census Data. The United States Government conducts a census every few years to gather data on certain demographics in the country. The last census data for Wayne County, NE was conducted in 2015.

Survey Conducted Through the Hospital and Community. A survey was designed in conjunction with Focus & Execute and Providence Medical Center to gather information from the community on the immediate needs of the population.

Outpatient Migration Study. Hospital statistics were gathered for the last three years to see what was happening with patient migration in the community.

Broad Interests of the Community Were Considered:

Special care was used to find individuals in the community who could help define the health care needs of the communities representing the youth, the elderly, and varied cultures. Providence Medical Center had the survey translated into the Spanish language specifically for the latin community.

The individuals involved in the two meetings were asked to take the survey to give their input on the needs of the hospital. Additional efforts were made to reach out to the community in general to give input through the survey. A link to the survey was sent out to the major employers in the community. Employers and community members were contacted personally in the community of Wakefield to try to ensure the latin needs were being heard.

Service Area:

Providence Medical Center has defined its service area to include the following zip codes

| Community | Zip Code | Population-2015 |
|-----------------------------|----------|-----------------|
| Allen | 68710 | |
| Carroll | 68723 | |
| Coleridge | 68727 | |
| Concord | 68728 | |
| Dixon | 68732 | |
| Emerson | 68733 | |
| Hartington | 68739 | |
| Laurel | 68745 | |
| Pilger | 68768 | |
| Randolph | 68771 | |
| Wakefield | 68784 | |
| Wayne | 68787 | |
| Winside | 68790 | |
| Wisner | 68791 | |
| Estimated County Population | | 9367 |

Source: 2015 US Census

The population of Wayne County is 9,367. 100% of Wayne County residents live in Providence Medical Center's primary service area. Data describing health status rankings at the zip code level was difficult if not impossible to find. Therefore, data from Wayne County was used to represent the service area. Special note was taken when the focus group took exception with the data provided about the county in general.

Demographics:

The population of Wayne County estimated for 2015 is 9,367. This is a 2.4% decline in the population since 2010.

- ◆ 19.8% of people are under age 18 compared to 19.4% in 2010
- ◆ 14.2% are >65 compared to 13.7% in 2010
- ◆ 49.0% of the population are female compared to 49.8% in 2010
- ◆ 94.7% are white and 2.2% are African American, while 5.8% regard themselves as Hispanic

93% of Wayne County residents have graduated from high school compared to the Nebraska average of 87%. 79% of Wayne County Residents have some college compared to the national and state averages of 72% and 70% respectively. 8% of the population of Wayne County reported having a severe housing problem compared to 9% for top cities in the US and 13% for the State of Nebraska.

The median household income is \$53,808 with a per capita income of \$25,523. 13.6% of the population live in poverty, while 10.4% of the population under the age of 65 live without health insurance.

Existing Health Care Facilities:

There are several healthcare facilities in the area that compete with Providence Medical Center.

Acute care facilities:

- ◆ Avera Sacred Heart: Yankton, SD
- ◆ Faith Regional Health Services: Norfolk, NE
- ◆ Mercy Medical Center: Sioux City, IA
- ◆ Pender Community Hospital: Pender, NE
- ◆ St Francis Memorial Hospital: West Point, NE
- ◆ Unity Point Health-St Luke's: Sioux City, IA
- ◆ University of Nebraska Medical Center: Omaha, NE

Specialty Facilities:

- ◆ Children's Hospital & Medical Center: Omaha, NE
- ◆ Lewis & Clark Specialty Hospital: Yankton, SD

Processes used to identify PMC priorities:

The process used to identify health need priorities involved carefully reviewing:

- ◆ data gathered from county health records prior to the meeting
- ◆ comments made during the survey which were passed on by the community
- ◆ first-hand knowledge from the broad group of people assembled for the CHNA meetings
- ◆ information gathered through a survey taken by community members

Where the data pointed to a potential serious health problem or issue (e.g. mental health/suicide), we examined data describing how Wayne County compared to the rest of Nebraska and the US Top County Rankings. Specifically, these data sources included:

- ◆ Community Health Status Indicators (Center for Disease Control and Prevention and National Institutes of Health)
- ◆ County Health Rankings and Road Maps (Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute). see Attachment I.

As the data was discussed, there was a difference of opinion as to what was important to look at and what was not. Careful attention was given to the feedback from the survey as well as from the focus group to identify the most important health issues that needed to be addressed.

In establishing priorities among identified health needs, consideration was given about the ability of PMC, along with organizations and agencies from Wayne County, to have an impact on the problem. Consideration was also given to areas that could and should be provided through the use of more modern technologies like telemedicine.

Actions Plan to Address Identified Prioritized Health Needs:

An awareness and proactive approach was taken when defining the goals and actions PMC would and should take to improve the health of the community. PMC was able to develop a relevant approach to improving the health of our service area by utilizing information obtained through the focus group and the community survey along with hospital data and county health statistics. That approach was then put into the Focus and Execute web tool to drive the execution of the goals and actions plans, making sure that the healthcare needs of the community are being met. The following is directly from the Focus & Execute web tool.

Priority One: Create a Preventative Approach to Healthcare

The Affordable Care Act has had a huge impact on the way hospitals are being compensated for healthcare. That has driven hospitals to look at healthcare differently. One of the areas the community felt needed to be addressed was in creating a positive preventative approach to healthcare. This would include education partnering with businesses and education on insurance programs.

Actions to be taken:

1. Create a preventative health screening program
2. Hold a community health fair
3. Develop partnerships with businesses for prevention
4. Educate the public on health insurance

| | |
|------------|---|
| 7.1 | Create a Preventative Approach to healthcare |
| 7.1.1 | Create a preventive health screening program |
| 7.1.2 | Hold a community health fair |
| 7.1.3 | Partnerships with businesses for prevention |
| 7.1.4 | Education on health insurance <ul style="list-style-type: none"> • Navigation of insurance. Health, Dental, Mental health, etc. |

Priority Two: Mental Health Program

Although PMC currently has a mental health program, it is not as strong as it needs to be for the community. Wayne County's ratio is far below the US top performers and the state ratios. PMC also sees a need to assist in this arena given there is a college in town that may need assistance in dealing with mental health issues as well as substance abuse issues.

| Ratio of Mental Healthcare Providers | | |
|--------------------------------------|-------|----------|
| Wayne County | US | Nebraska |
| 1,886:1 | 370:1 | 410:1 |

Table 1 Source: County Health Rankings

| |
|---|
| 7.2 Investigate expansion of the Mental Health program at the Hospital |
| 7.2.1 Explore Substance Abuse Programs |
| 7.2.2 Explore Adolescent Care |
| 7.2.3 Explore Suicide Prevention |
| 7.2.4 Explore Partnership with College on Mental Health Issues |

Actions to be taken:

1. Explore substance abuse program
2. Explore adolescent care programs
3. Explore suicide prevention and grief counseling programs
4. Explore Partnership with college on Mental Health issues

Priority Three: Promote Current Service

Finally PMC became aware there is a lack of knowledge about the services and the quality of care currently being offered by PMC. As a result people in the community are seeking healthcare in other areas they could be receiving closer to home. This leads to a frustration on the part of the patient. PMC also provides some unique services are not available in many hospitals in the state.

Actions to be taken:

1. Implement social media marketing strategy
2. Promote specialized services (AMPS, Parkinsons, Vertigo Therapy, Sphenocath, etc.)
3. Review effectiveness of current print and media strategy
4. Conduct a did you know campaign
5. Market services for the elderly during community events

7.3 Promote Current Services (CHNA)

7.3.1 Implement Social Media Marketing Strategy

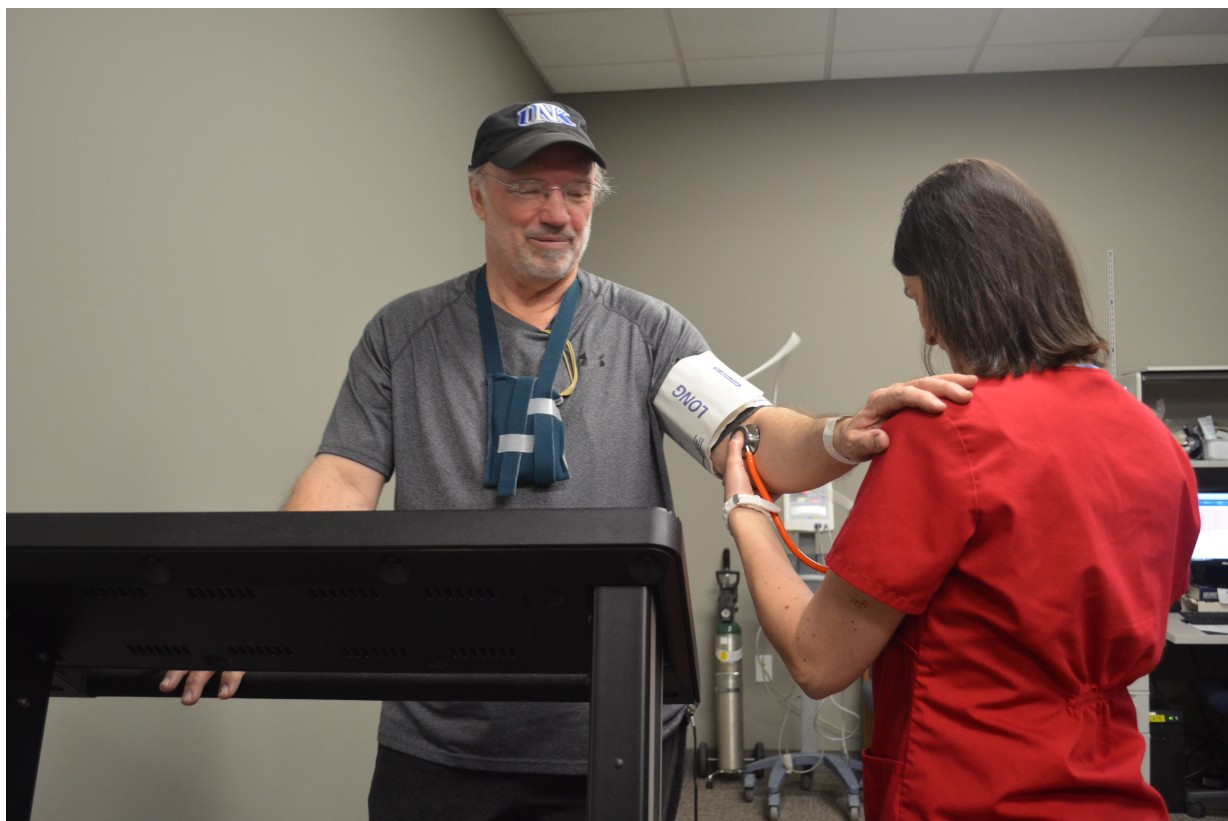
7.3.2 Promote Specialized Services (AMPS, parkinsons, vertigo therapy, Sphenocath, etc.)

7.3.3 Review effectiveness of current print and media strategy

7.3.4 Did you know campaign

7.3.5 Market our services for Elderly during community events

Important Note: Wayne County measures as one of the healthiest counties in Nebraska to live. As such, many of the factors measured by the national organizations did not give the focus group cause for concern. In looking at the ways PMC could improve the life and health of people in the service area, PMC chose to work on a more proactive direction of healthcare.



Attachment I: County Health Factor Comparisons



Areas of Excellence








Areas of Concern

How we stack up in like county measures

| Social & Economic Factors | | Wayne County | Trend | Error Margin | Top U.S. Performers | Nebraska | 14 |
|--------------------------------------|--|--------------|-------|--------------|---------------------|----------|----|
| High school graduation | | 93% | | | 93% | 87% | |
| Some college | | 79% | | 68-90% | 72% | 70% | |
| Unemployment | | 2.8% | | | 3.5% | 3.3% | |
| Children in poverty | | 12% | | 9-15% | 13% | 16% | |
| Income inequality | | 4.9 | | 3.4-6.4 | 3.7 | 4.2 | |
| Children in single-parent households | | 23% | | 12-35% | 21% | 29% | |
| Social associations | | 15.9 | | | 22.1 | 14.3 | |
| Violent crime | | 104 | | | 59 | 264 | |
| Injury deaths | | 40 | | 24-62 | 51 | 54 | |
| Physical Environment | | | | | | | 35 |
| Air pollution - particulate matter | | 11.3 | | | 9.5 | 12.1 | |
| Drinking water violations | | Yes | | | No | | |
| Severe housing problems | | 8% | | 5-11% | 9% | 13% | |
| Driving alone to work | | 79% | | 75-84% | 71% | 81% | |
| Long commute - driving alone | | 17% | | 13-22% | 15% | 17% | |

How we stack up in like county measures

| Health Factors | Wayne County | Trend | Error Margin | Top U.S. Performers | Nebraska | 16 |
|----------------------------------|--------------|---|--------------|---------------------|----------|----|
| Health Behaviors | | | | | | 29 |
| Adult smoking** | 16% | | 15-17% | 14% | 17% | |
| Adult obesity | 30% |  | 26-34% | 25% | 30% | |
| Food environment index | 7.9 | | | 8.3 | 7.7 | |
| Physical inactivity | 26% |  | 23-30% | 20% | 24% | |
| Access to exercise opportunities | 47% | | | 91% | 80% | |
| Excessive drinking** | 24% | | 23-25% | 12% | 21% | |
| Alcohol-impaired driving deaths | 29% | | 9-50% | 14% | 35% | |
| Sexually transmitted infections | 230.3 |  | | 134.1 | 393.5 | |
| Teen births | 7 | | 5-10 | 19 | 31 | |
| Clinical Care | | | | | | 25 |
| Uninsured | 14% |  | 12-16% | 11% | 13% | |
| Primary care physicians | 1,880:1 | | | 1,040:1 | 1,350:1 | |
| Dentists | 1,890:1 | | | 1,340:1 | 1,420:1 | |
| Mental health providers | 1,890:1 | | | 370:1 | 410:1 | |
| Preventable hospital stays | 41 |  | 29-53 | 38 | 51 | |
| Diabetic monitoring | 85% |  | 65-100% | 90% | 86% | |
| Mammography screening | 64% |  | 44-84% | 71% | 62% | |



Providence medical Center has many types of inpatient and outpatient surgery procedures available to patients “close to home”.

We are staffed by a team of highly skilled and compassionate professionals, who help make each patient's experience as comfortable as possible.

AREAS OF GREATEST CONCERN

SERVICES AND RESOURCES

- ▶ Cost and/or availability of Elder Care
- ▶ Resources to meet the needs of Veterans
- ▶ Resources to meet the needs of Aging Population
- ▶ Resources to meet the needs of people with Mental or Physical Disabilities

SELF REPORT ON HEALTH DISEASE

- ▶ Weight Control - 42%
- ▶ Depression, Anxiety, Stress, etc. - 30%
- ▶ High Blood Pressure - 26%
- ▶ High Cholesterol - 23%

CONCERNS FOR CHILDREN UNDER 18

- ▶ Drugs and Alcohol - 11%
- ▶ Bullying - 8%
- ▶ Parents not Parenting - 6%
- ▶ Early Prevention (Speech, Eyesight) - 6%
- ▶ Mental Health - 6%
- ▶ Obesity - 6%

AREAS TO ADD SERVICES

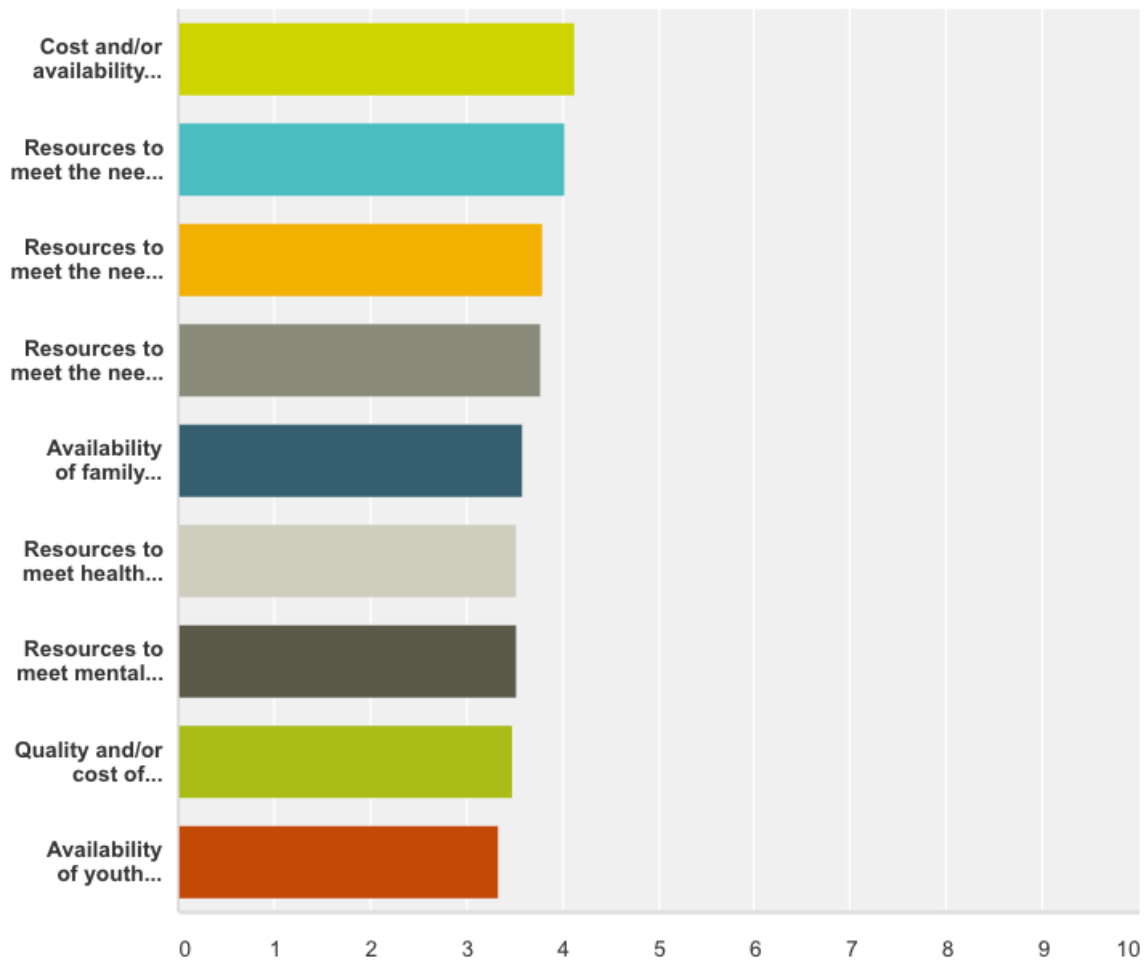
- ▶ Mental Health - 18%
- ▶ Dietician - 7%
- ▶ Holistic and Natural Alternative Medicine - 5%
- ▶ (Pharmacy in Wakefield, Transportation, More Nutritious Foods Available, Preventative Care, Cash Only MD, Cancer Specialist, Pediatrician, Diabetic Education, More Activities, Cultural and Physical that Promote Health)

ADDITIONAL HEALTH AND WELLNESS CONCERNS

- ▶ Healthcare Costs - 6%
- ▶ Availability and Cost of Nutritional Foods - 6%
- ▶ Mental Health Professionals for Youth - 6%
- ▶ Hospital Independence - 4%
- ▶ Billing Issues - 4%

Considering SERVICES AND RESOURCES in your community, what is your level of concern with...

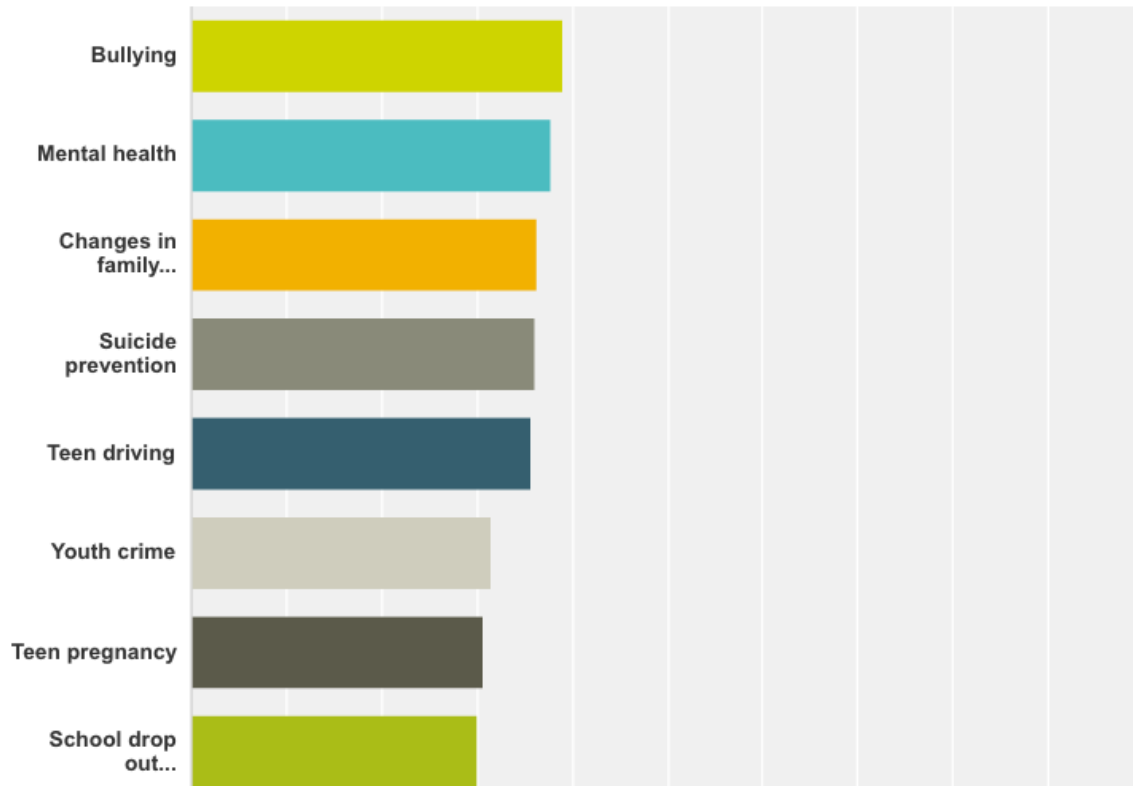
Answered: 219 Skipped: 2



| | 1 = not at all | 2 | 3 | 4 | 5 = A great deal | 6 = Do not know | Total | Weighted Average |
|--|-------------------|--------------|--------------|--------------|------------------------|-----------------------|-------|---------------------|
| Cost and/or availability of elder care | 1.83% 4 | 12.84% 28 | 22.48% 49 | 20.64% 45 | 17.43% 38 | 24.77% 54 | 218 | 4.13 |
| Resources to meet the needs of veterans | 6.42% 14 | 14.68% 32 | 16.51% 36 | 23.39% 51 | 11.01% 24 | 27.98% 61 | 218 | 4.02 |
| Resources to meet the needs of the aging population | 5.94% 13 | 11.87% 26 | 26.48% 58 | 25.57% 56 | 12.79% 28 | 17.35% 38 | 219 | 3.79 |
| Resources to meet the needs of people who have mental or physical disabilities | 9.63% 21 | 12.84% 28 | 20.64% 45 | 23.85% 52 | 12.84% 28 | 20.18% 44 | 218 | 3.78 |
| Availability of family services | 6.45% 14 | 15.21% 33 | 26.27% 57 | 28.11% 61 | 13.36% 29 | 10.60% 23 | 217 | 3.59 |
| Resources to meet health care needs (not related to cost) | 7.31% 16 | 18.26% 40 | 19.63% 43 | 29.68% 65 | 20.55% 45 | 4.57% 10 | 219 | 3.52 |
| Resources to meet mental health needs (not related to cost) | 10.55% 23 | 14.68% 32 | 27.06% 59 | 19.72% 43 | 16.06% 35 | 11.93% 26 | 218 | 3.52 |
| Quality and/or cost of educational/school programs | 15.74% 34 | 11.11% 24 | 18.98% 41 | 25.00% 54 | 21.76% 47 | 7.41% 16 | 216 | 3.48 |
| Availability of youth activities | 11.93% 26 | 17.89% 39 | 19.27% 42 | 32.11% 70 | 13.76% 30 | 5.05% 11 | 218 | 3.33 |

Considering YOUTH in your community, what is your level of concern with...

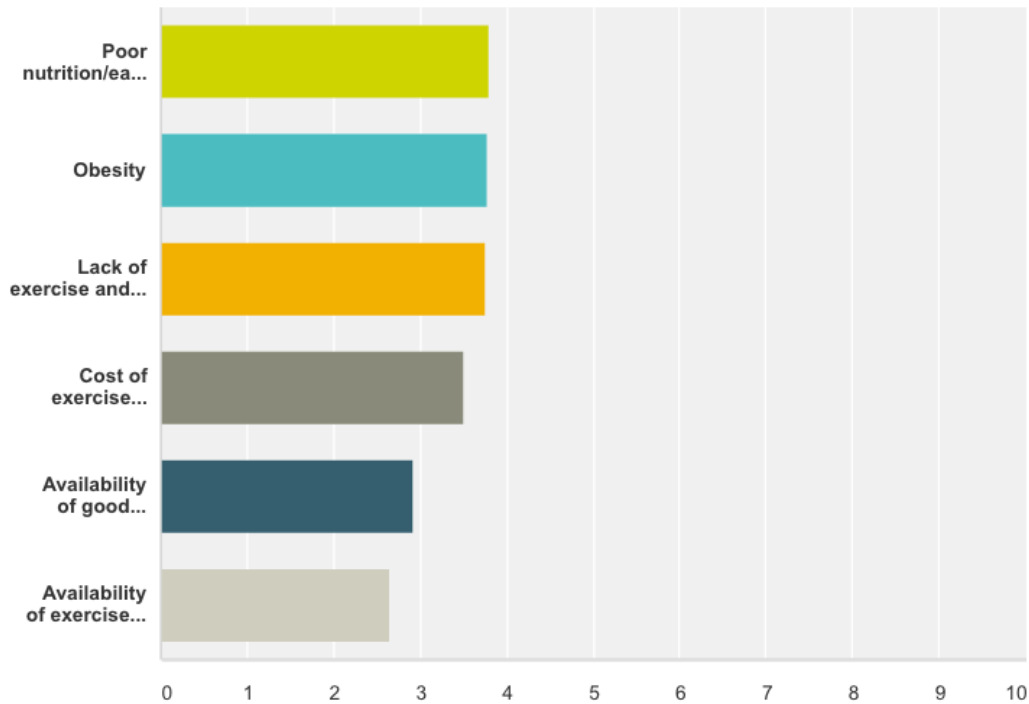
Answered: 219 Skipped: 2



| | 1 = Not at all | 2 | 3 | 4 | 5 = A great deal | 6 = Do not know | Total | Weighted Average |
|--|----------------|--------------|--------------|--------------|------------------|-----------------|-------|------------------|
| Bullying | 4.17% 9 | 13.89% 30 | 15.28% 33 | 26.85% 58 | 34.26% 74 | 5.56% 12 | 216 | 3.90 |
| Mental health | 5.05% 11 | 14.68% 32 | 22.48% 49 | 22.02% 48 | 27.06% 59 | 8.72% 19 | 218 | 3.78 |
| Changes in family composition (e.g. divorce, single parenting) | 7.80% 17 | 12.84% 28 | 24.31% 53 | 25.23% 55 | 22.02% 48 | 7.80% 17 | 218 | 3.64 |
| Suicide prevention | 5.99% 13 | 17.51% 38 | 25.81% 56 | 18.43% 40 | 23.50% 51 | 8.76% 19 | 217 | 3.62 |
| Teen driving | 4.65% 10 | 15.35% 33 | 28.84% 62 | 27.44% 59 | 15.81% 34 | 7.91% 17 | 215 | 3.58 |
| Youth crime | 10.14% 22 | 21.20% 46 | 33.18% 72 | 20.28% 44 | 9.22% 20 | 5.99% 13 | 217 | 3.15 |
| Teen pregnancy | 12.39% 27 | 26.61% 58 | 31.19% 68 | 10.55% 23 | 10.09% 22 | 9.17% 20 | 218 | 3.07 |
| School drop out rates/truancy | 14.75% 32 | 27.65% 60 | 27.65% 60 | 12.44% 27 | 7.37% 16 | 10.14% 22 | 217 | 3.00 |

Considering PHYSICAL HEALTH in your community, what is your level of concern with...

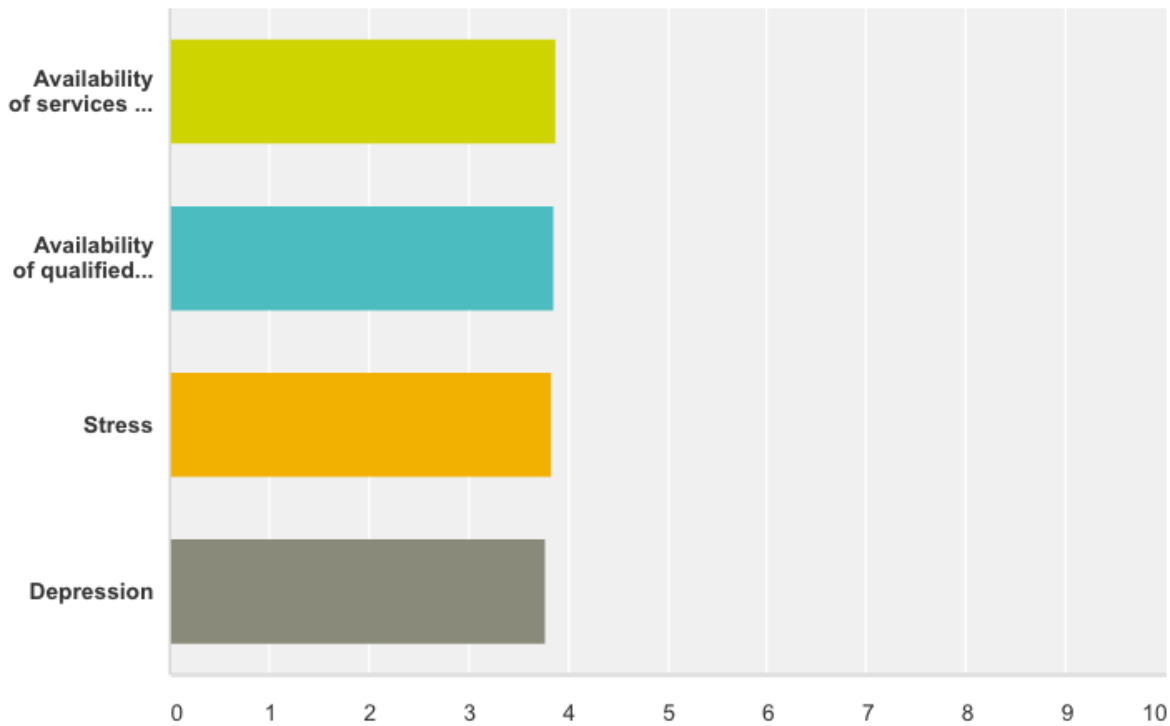
Answered: 219 Skipped: 2



| | 1 = Not at all | 2 | 3 | 4 | 5 = A great deal | 6 = Do not know | Total | Weighted Average |
|---|----------------|--------------|--------------|--------------|------------------|-----------------|-------|------------------|
| Poor nutrition/eating habits | 1.83% 4 | 10.50% 23 | 23.74% 52 | 35.16% 77 | 27.85% 61 | 0.91% 2 | 219 | 3.79 |
| Obesity | 3.20% 7 | 9.13% 20 | 25.11% 55 | 33.79% 74 | 27.40% 60 | 1.37% 3 | 219 | 3.77 |
| Lack of exercise and/or inactivity | 2.74% 6 | 10.50% 23 | 22.83% 50 | 37.90% 83 | 25.11% 55 | 0.91% 2 | 219 | 3.75 |
| Cost of exercise facility | 11.01% 24 | 11.93% 26 | 21.10% 46 | 28.44% 62 | 26.15% 57 | 1.38% 3 | 218 | 3.51 |
| Availability of good walking/biking options (alternatives to driving) | 21.56% 47 | 19.27% 42 | 25.23% 55 | 16.97% 37 | 13.76% 30 | 3.21% 7 | 218 | 2.92 |
| Availability of exercise facilities | 25.11% 55 | 24.66% 54 | 24.66% 54 | 12.33% 27 | 11.87% 26 | 1.37% 3 | 219 | 2.65 |

Considering MENTAL HEALTH in your community, what is your level of concern with...

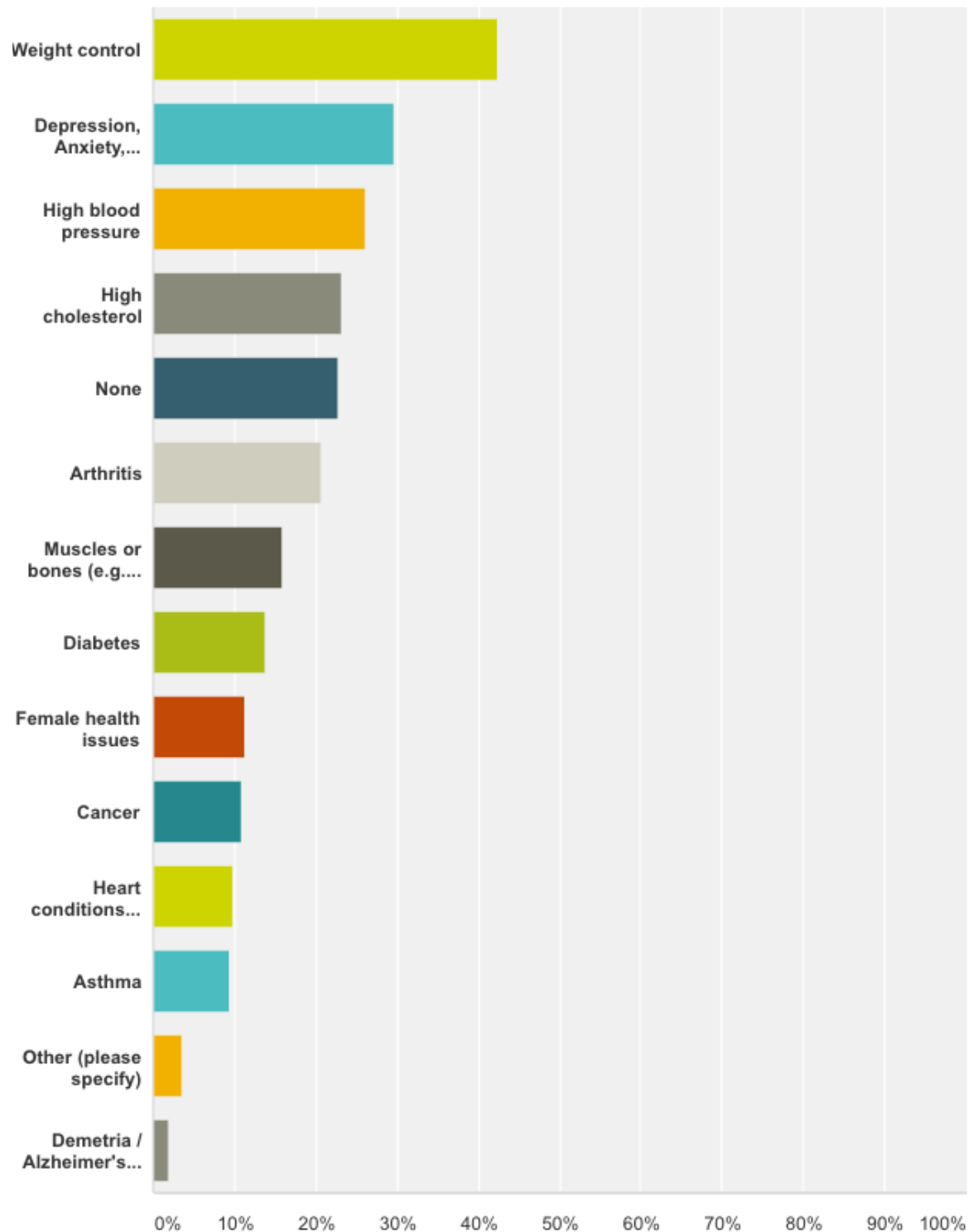
Answered: 217 Skipped: 4



| | 1 = Not at all | 2 | 3 | 4 | 5 = A great deal | 6 = Do not know | Total | Weighted Average |
|--|----------------|--------------|--------------|--------------|------------------|-----------------|-------|------------------|
| Availability of services for addressing mental health problems | 5.53% 12 | 8.76% 19 | 23.96% 52 | 24.88% 54 | 26.73% 58 | 10.14% 22 | 217 | 3.89 |
| Availability of qualified mental health providers | 6.91% 15 | 10.14% 22 | 22.12% 48 | 23.04% 50 | 26.73% 58 | 11.06% 24 | 217 | 3.86 |
| Stress | 2.76% 6 | 11.98% 26 | 21.66% 47 | 29.03% 63 | 29.95% 65 | 4.61% 10 | 217 | 3.85 |
| Depression | 5.07% 11 | 11.98% 26 | 26.27% 57 | 21.66% 47 | 26.27% 57 | 8.76% 19 | 217 | 3.78 |

Listed below are some general health conditions/diseases. Please check all that apply to you.

Answered: 203 Skipped: 18



| Answer Choices | Responses | |
|---|-----------|----|
| ▼ Weight control | 42.36% | 86 |
| ▼ Depression, Anxiety, Stress, Etc. | 29.56% | 60 |
| ▼ High blood pressure | 26.11% | 53 |
| ▼ High cholesterol | 23.15% | 47 |
| ▼ None | 22.66% | 46 |
| ▼ Arthritis | 20.69% | 42 |
| ▼ Muscles or bones (e.g. back problems or broken bones) | 15.76% | 32 |
| ▼ Diabetes | 13.79% | 28 |
| ▼ Female health issues | 11.33% | 23 |
| ▼ Cancer | 10.84% | 22 |
| ▼ Heart conditions (e.g. congestive heart failure) | 9.85% | 20 |
| ▼ Asthma | 9.36% | 19 |
| ▼ Other (please specify) | 3.45% | 7 |
| ▼ Demetria / Alzheimer's disease | 1.97% | 4 |
| Total Respondents: 203 | | |



Providence Medical Center

Extraordinary Care Rooted in Compassion

Attachment III: Focus group and public meeting participants

Members of the Focus Group attended two separate meetings to complete this CHNA. The first took place at Providence Medical Center. The second meeting took place at a local meeting room. The first held on March 4, 2016 from 9:00 a.m. to 12:00 p.m. And the second held on August 1, 2016 beginning at 9:00 a.m. Both of these meetings were facilitated by David Sandberg of Focus & Execute. The following is a list of people who attended one or both of those meetings.

| Name | Company | Representing |
|-----------------|-----------------------------------|-------------------------------------|
| Lowell Johnson | City of Wayne | General Population |
| Kathy Johnson | Retired Educator | Youth/General Public |
| Lori Hansen | City of Laurel | Secondary Market Area |
| Randy Larson | Wayne County | General Population |
| Larry Bockelman | Wisner | General Population |
| Carolyn Harder | Wayne Community Schools | Youth |
| Heidi Allen | MOPS Board | General Population |
| Victor Zarate | Community Health Worker | Latin Community/ General Population |
| VerNeal Marotz | Winside Rescue | First Responders |
| Diana Davis | Carroll Town Board | General Population |
| Julie Rother | Director of Public Health Nursing | Latin Community/ General Population |
| Kris Giese | PMC | Medical Provider |
| Nicole Haglund | PMC | Medical Provider |
| Marlen Chinn | Wayne PD | Law Enforcement |
| Mark Bejot | Wakefield Schools | Youth |
| Hilda Pearson | Self Employed | General Population |
| Amanda Prince | PMC | Medical Provider |

| Name | Company | Representing |
|------------------|-----------------------------|--------------------|
| Sandy Bartling | PMC | Medical Provider |
| Jim Frank | PMC | Medical Provider |
| Ofelia Calleros | Wakefield Community Schools | Latin Community |
| Chele Meisenbach | Ameritas | General Population |

Identify third parties with which hospital contracted to assist in conducting CHNA, along with qualifications of such parties:

Providence Medical Center contracted with Focus & Execute to conduct this CHNA. Focus & Execute has been in business for over 15 years helping health care organizations find the needs of their stakeholders and ensuring strategic plans are aligned to meeting those needs.

Focus & Execute is uniquely qualified to assist in the CHNA process due to their expertise in teaching organizations to execute their strategies. Their tools and methodologies are used by hundreds of health care organizations across the country.

List of organizations with which the hospital collaborated in conducting the CHNA:

- Ameritas
- City of Laurel
- City of Wayne
- City of Wisner
- Community Health Workers
- Town of Carroll
- Wayne Community Schools
- Wayne County
- Wayne County First Responders (Police / Paramedics)

As well as local citizens representing:

- Health Care
- Health Insurance Providers
- General Population
- Hispanic Community
- Youth





PMC Community Health Assessment

2016

CONDUCTED BY FOCUS AND EXECUTE