

2012
Saline County
Community Health Needs Assessment
Rallying the Community Around Health



Perspective ---creating a sense of health in the community

The Community Health Needs Assessment defines opportunities for health improvement, creates a collaborative community environment to engage multiple change agents and provides an open and transparent process to listen and truly understand the health needs of Saline County.

The federal government through the Internal Revenue Service, now requires that not-for-profit hospitals conduct a community health assessment. These census-like studies help health care providers build stronger relationships with their communities, identify needs and dedicate funding and other resources toward programs that clearly benefit local residents.

Participants

Several community and health care organizations collaborated to implement a five stage process focused on identifying and defining local health issues, concerns and needs. The process has been underway for three months to gather and analyze data, and provide direction for the full report. Participating organizations include:

City of Benton, City of Bryant, City of Haskell, Saline County Government, Saline County Health Department, State Health Department Hometown Health Coalition, State of Arkansas Department of Health, Hot Springs Village Property Owners Association and Chamber of Commerce, Saline County Sheriff's Office, Bryant Parks and Recreation, Benton Police Department, Saline Courier, Saline County Economic Development Council, Benton and Bryant Chambers of Commerce, Boys and Girls Club of Bryant, Habitat for Humanity, Benton, Bryant and Bauxite School Districts, Collegetville Fire Department, Benton, Bryant, Bauxite, and Paron citizens, and local employers including: Jordan Woolbright & Associates, PA, Summit Bank, Everett Buick GMC, Carson Physical Therapy, First Security Bank, Self Pools and Spas, Ferguson's Furniture, and FirstStaff.

Project goals and objectives

- To initiate a formal and comprehensive community health assessment process that will allow for the identification of key health and health service issues, and a systematic review of health status in Saline County
- To create an infrastructure that will permit ongoing updating and easy dissemination of available data, and enable a continued partnership
- To create a health profile that will allow for prioritization of needs and resource allocation, informed decision making, and collective action that will improve health outcomes



Sourced from the Robert Wood Johnson Foundation's County Health Rankings website: <http://www.countyhealthrankings.org/take-action>

“We initiated the Community Health Needs Assessment with the goal of identifying public health needs, goals, objectives and priorities,” said Bob Trautman, Chief Executive Officer at Saline Memorial Hospital. “It is our goal that the insights we have found provide the foundation for improving and promoting the health of each community member.”

“The information we gathered provided the insight we will need to set priorities for local public health,” said Karen Mays, LHU Administrator. “The Community Solutions Summit was the final, critical step in the process. Now the real work—improving the health of the community—begins.” “Improving the health of the community truly requires a collaborative effort. The Home Town Health Coalition is pleased to partner with Saline Memorial Hospital and other interested parties to continue to advance the health agenda for Saline County”, said Janice Ray, Public Health Educator, State of Arkansas and Saline County Healthcare Coalition.

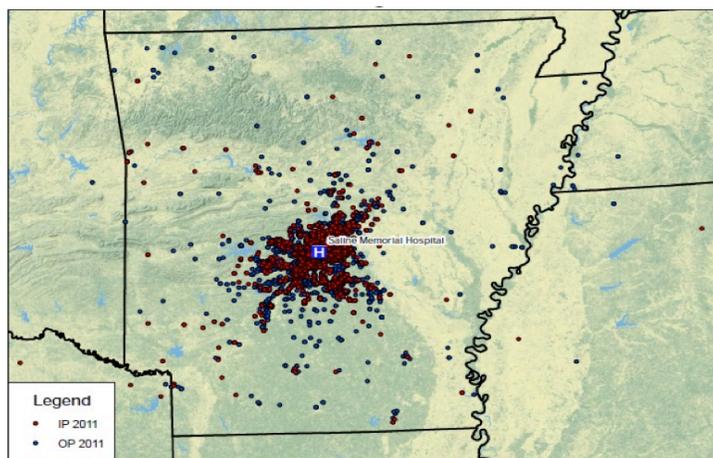
Who Told Us What?

Data Collection and Review

The health of the community was studied extensively through primary and secondary research methods. Data was gathered using several methods:

- Three years of hospital data including inpatient, outpatient, and emergency room visits was analyzed. The data was summarized by service line and mapped by location. This information was used to more thoroughly understand the health service demand and disease profile of the community.
- 321 area residents were surveyed to gather information about their personal health and well-being, health-related behaviors and risks for diseases
- 25 physicians and 359 hospital employees were surveyed for their opinion on community health status and health needs in the community
- 33 community members, employers, and government representatives were interviewed for their perspectives on community health needs and issues
- A Community Summit was conducted with 65 community leaders and citizens. The audience consisted of healthcare workers, business leaders, school systems, government representatives, and other community members

Saline Memorial Hospital Patients



Data was gathered by Zip Code and by Saline County. The map shows the use of healthcare services by residents both in and outside of Saline County



Collaboration is Key to Good Health

Community Engagement and Transparency

We are pleased to share with our community the results of the Community Health Needs Assessment. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community as the findings impact each and every citizen in one way or another.

Implementation Plans

To be successful in creating a true sense of health in Saline County, it will be necessary to have a collaborative venture which brings together all of the care providers, citizens, government, and business and industry around an effective plan of action. A comprehensive plan will be coordinated across the county to help ensure adequate availability of needed and wanted services.

Saline County is ranked 11th healthiest County in Arkansas out of 75 counties in 2012. Arkansas is ranked 47 out of the 50 states.

Key Findings of the Community Health Assessment

Saline County is living up to its billing as having the feel of small hometown America in close proximity to the vibrant capitol of Arkansas. In general, Saline County outperforms the state averages for health status, so where local results fall at or below those levels, we see an opportunity for community action. There are several lifestyle gaps that need to be closed to move Saline County up the chart to be the most healthy community in the State and eventually the Nation. The issues identified in the study needing most attention are obesity, smoking and the physical environment which includes recreational areas and healthy food options, and increased primary care access.

Based on the telephone survey research of Saline County residents, 19% believe poverty is the most impactful issue to people's health. 16% believe people taking more responsibility for their own lifestyle/health is the issue that has the most impact on people's health. Additionally,



Key Demographic Statistics:

- The median age of Saline County (38.9) is higher than AR (37.5) and the US (37.2)
- The median Household income of Saline County (\$50,043) is higher than AR (\$37,602) but slightly lower than the US (\$50,227)
- The per year growth rate of Saline County (2.14%) is higher than AR (.76%) and the US (.67%)
- The medical care index of Saline County (98) is higher than AR (86) and lower than the US (100). This measures healthcare spending of the population

health care service access (10%) and affordable health insurance (9%) are the next highest answers. Both employees and physicians believe that people taking more responsibility for their own lifestyle/health is the issue that most impacts people's health as well as Insurance that's more affordable, for more people.

The overall demand for health services is growing with the population. The estimated Emergency Room Visits (46,600) per population are higher than Arkansas but lower the US. Inpatient Admissions (13,996) and Physician Office Visits (422,596) are lower than AR, but higher than the U.S. Outpatients Visit (26,351) rates per population are the same as AR and lower than the US.

There are three broad themes that emerged in this process:

- Saline County needs to create a "Sense of Health" that permeates the culture of the city, employers, churches, and community activities.
- There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
- While any given measure may show an overall good picture of community health, there are significantly challenged subgroups.

What follows are the key findings of the study. Saline County results are compared to results reported in other counties of Arkansas and the US benchmark which is the 90th percentile of the United States.

Overall Health

Strengths

- Saline County ranks well in Health Factors at #3 out of 75 counties. Health Factors are comprised of health behavior (30%), clinical care (20%), social & economic factors (40%) and physical environment (10%). The percentages in parentheses are the amount each of the factors comprises of the total ranking.
- Lower percentages of unemployment and children living in poverty are positive indicators
- Most of Saline County's socioeconomic statistics are positive

Opportunities

- The physical environment (walking paths, bike paths, fitness centers, availability of fast food, access to healthy food) ranking was 62nd out of 75 counties
- Smoking is high in Saline County
- Access to health care can be difficult for those with public health insurances (Medicaid and Medicare), particularly when it comes to finding a provider that accepts new Medicaid and Medicare patients. Access to affordable dental care and mental health care for those with mild to moderate conditions is also lacking. The slowly recovering economy continues to cause many to struggle in difficult times
- Those without adequate income or health insurance (15%) are less likely to receive the appropriate care at the appropriate site within the continuum of care
- Those with health insurance (16%) are less likely to receive the appropriate care at the appropriate site within the continuum of care

Health Behaviors

Strengths

- Excessive Drinking is lower than AR and slightly higher than US
- Motor Vehicle Accidents are slightly lower than AR
- Teen Birth Rate is much lower than AR, but higher than US
- Sexually transmitted infections are lower than AR

Opportunities

- Smoking is higher (24%) than AR and US benchmarks and smoking is a leading killer in AR
- Adult obesity is equal to AR at 31% and much higher than US. Obesity puts people at increased risk of chronic diseases, diabetes, kidney disease, joint problems, hypertension and heart disease
- Leisure time physical inactivity is 26%; equal to AR but higher than US
- Injuries – leading cause of death for people 1-44 years old

Social & Economic Factors

Strengths

- Lower prevalence of violent crime than Arkansas, but not lower than US benchmark
- Lower percentage of children living in poverty than Arkansas
- Higher percentage of population with some college than Arkansas, but lower than US benchmark
- Unemployment is lower than Arkansas

Opportunities

- People are more likely to report they have inadequate social support
- Saline County has a slightly higher high school graduation rate of 76%, than Arkansas but is still inadequate

Health Outcomes

Strengths

- Relatively low mortality ranking, premature death (8), less than Arkansas, but not at US benchmark
- Low birthweight babies less than Arkansas, but higher than US benchmark

Opportunities

- The percent of adults reporting poor or fair health (18%) at Arkansas level and much higher than US benchmark
- The number of Poor Physical Health Days is relatively high and should be reduced by increases in overall health status
- The number of Poor Mental Health Days is higher than Arkansas and the US



Clinical Care

Strengths

- The 15% of uninsured is lower than Arkansas, but higher than US benchmark
- Preventable hospitalizations are lower than the statewide average and higher than US
- Input from the community is very positive regarding compassionate nursing care. Services receiving particular mention are Delivering Babies, General Surgery, Mammography, and Cancer Treatment

Opportunities

- The number of population per physician is quite high, combined with the physician needs analysis indicates a shortage and the community needs to work together collaboratively with the hospital, existing medical staff, and government to bring in more primary care and specialists to the community
- Saline County residents have lower rates of Mammography and Diabetes screenings
- Preventable hospital stays is equal to Arkansas and higher than US benchmark

The following health initiatives and goals were created by the groups who attended the Community Summit. The work in the next months will determine what of all the ideas will be implemented.

Obesity:

Goal 1: Implement food stamp program changes statewide

Action 1: Nutritional “preferred” foods on the food stamp program

Action 2: Quarterly grocery bonus for those who practice nutritional shopping

Goal 2: Weight loss programs with incentives

Action 1: Nutritional after-school snacks the last 30 minutes of class time

Action 2: Hospital Biggest Loser programs in large employers with dieticians/physicians monitoring and participating

Action 3: Nutrition by Choice program at the Middle School with nutrition education, healthy cooking classes with physicians, chefs, nutritionists

Goal 3: Physical Fitness Incentives

Action 1: Community bicycle trails, closest shopping parking is bicycle rack



Action 2: Add an on-site exercise facility for staff and physicians at Hospital and at large employers

Action 3: Add community adult playground with walking trails and fitness stations

Drug abuse, alcohol abuse, behavioral health:

Goal 1: Increase Medicaid adult beds for inpatient psych

Action 1: Increase the adult psych beds at SMH from 6 to 12

Action 2: Refer overflow to Rivendell to keep patients in the community

Goal 2: Implement SureScripts, a national database, in providers in the community to decrease prescription drug abuse by 10% over the next 2 years

Action 1: Implement SureScripts in Hospital Emergency Departments and with Hospitalists

Action 2: Implement SureScripts in Physician's Offices

Action 3: Promote within the community for other provider offices to have Sure Script in order to monitor drug abuse

Goal 3: Test welfare recipients for drug use

Action 1: Follow other states to require welfare/state assistance recipients to have mandatory monthly drug screens

Action 2: If the test is failed, refer client to drug abuse counseling

Diet, nutrition and exercise:

Goal 1: Increase physical activity by providing 2 new family-friendly locations

Action 1: Determine convenient location

Action 2: Develop planning process

Goal 2: Increase walking trail capacity by 25% by 2017

Action 1: Identify what we have and what we need

Action 2: Provide lighting and safe, accessible locations

Action 3: Change zoning to include sidewalks and/or walking trails in all new neighborhoods in proportion to roof tops

Goal 3: Promote nutrition and exercise education by providing a resource center

Action 1: Create a central database/committee to provide educational materials and resources to the community

Action 2: Create neighborhood and workplace programs for nutrition and cooking education



Smoking:

Goal 1: Decrease access to youth to tobacco purchasing in 10 stores in Saline County

Action 1: Partner with the Tobacco Control Board to keep tobacco products hidden from view and limited to tobacco stores

Action 2: Limit hours to tobacco stores

Action 3: Improve enforcement working with Tobacco Control Board

Action 4: Tobacco products versus entitlement programs

Goal 2: Increase tobacco education in school systems K-12 by 10% by Dec 2014

Action 1: Create the culture of tobacco use is uncool by advocating positive peer groups – annual concert with speaker anti-smoking focus

Action 2: Media campaign making not using tobacco a social norm

Goal 3: Decrease adult tobacco use in the home and cars by 10% by Dec 2013

Action 1: Increase 1-800-QUITNOW knowledge

Action 2: Enforcement of Act 811 – no smoking in a car with a child under the age of 14

Action 3: Increase Worksite usage of State workplace quit smoking programs

Action 4: Create signage for home and cars – Tobacco Free

Physicians/Resources:

Goal 1: Recruit 3 primary care physicians in 1 year

Action 1: Establish committee of SMH and local primary care physicians to organize recruitment and address budgetary concerns

Action 2: In three years will repeat community survey to ascertain change in access to primary care physicians

Goal 2: Recruit 1 specialty physician in 1 year, focusing on Gastroenterology

Action 1: Establish committee of hospital and local physicians to organize recruitment and address budgetary concerns

Action 2: Repeat the community survey to ascertain change in access to specialty physicians

Goal 3: Establish after hours urgent care facility in County in 2 years

Action 1: Establish site, considering geography and ownership

Action 2: Establish infrastructure for facility (level of practitioners, hours of operation, etc.)

Personal Responsibility:

Goal 1: Brand Saline County as a healthy place to be

Action 1: Contact local churches, business leaders, chambers of commerce, elected officials, press

Action 2: Start with educating kids, who will teach parents

Goal 2: Encourage local businesses to promote healthy food

Action 1: Market healthy options at Fast Food restaurants

Action 2: Provide calorie counts on portions in restaurants

Action 3: Use social media to tell people what healthy food options are available at restaurants

Goal 3: Provide the specific information to schools, churches, business leaders

Action 1: Provide phone Apps to assist with health information

Action 2: Create a Health Report Card to send home with health initiatives from schools

Action 3: End of year recognize those who excel with their wellness plan with a healthy family of the year award

Action 4: Bring healthy lifestyle into the faith community, bringing glory to God by taking care of yourself and promoting healthy lifestyles.



Affordability/Access:

Goal 1: Provide education/increase educational services for our community by January 2013

Action 1: Include various departments at SMH to hold programs that teach about illnesses such as, congestive heart failure and cardio-obstructive pulmonary disease

Action 2: Include County Health Department to assist with education on healthcare issues

Action 3: Utilize the Saline Courier as a communication tool

Goal 2: Establish affordable/free access in other underserved areas of the county

Action 1: Establish Christian Care Clinic in other areas of the county, i.e. Bauxite/Bryant

Action 2: Promote Hometown Health Coalition

Goal 3: Increase specialty services in Saline County by 25% by 2015

Action 1: Add pulmonologists, neurologists, gastroenterologists, breast surgeons, bariatric surgeon, and oncologists so these specialists are available in the County making healthcare more accessible locally

Chronic Diseases:

Goal 1: Reduce preventable new chronic diseases by 2% by 2014

Action 1: Develop a mobile testing unit to test for all chronic diseases

Action 2: Provide educational opportunities, materials and seminars to educate public on chronic illness prevention

Goal 2: Increase awareness by 50% of people with hypertension

Action 1: Develop an awareness campaign we can partner with community businesses to send out awareness flyers, handouts, tweets, Facebook posts, etc.

Action 2: Give free blood pressure screening in mobile unit during February, Heart month.

Goal 3: Lower hypertension by 3% in five years

Action 1: Develop community awareness club that partners with health/fitness organizations that offers discount

Action 2: County-wide adult parks initiative – bike/walking trails etc. Tie the two communities together with trails

Diabetes:

Goal 1: Decrease the incidence of new diabetes cases by 2.5% in the next five years

Action 1: Identify segments of the population at risk for new onset of diabetes using existing data regarding risk factors. (Obesity, compromised nutrition, poverty)

Action 2: Develop a targeted education campaign to increase awareness of risk factors and complications and management of diabetes

Goal 2: Reduce complications and readmission of diabetic patients by 25% over 5 years

Action 1: Collaborate with community resources to identify successes and failures in diabetes management (Schools, physicians, AHD, CCC)

Action 2: Collaborate with community resources to identify specific education goals to correct failures.

Goal 3: Engage 50% of the community businesses with 25 or more employees with a diabetes awareness program

Action 1: Develop program to provide diabetes screening in identified local businesses

Action 2: Develop diabetes education program to increase diabetes awareness

Injuries/Teen Pregnancy/Clean Air, Soil and Water:

Goal 1: Reduce Preventable Injuries with recreation activities by 10% in 5 years, i.e. boating, ATVs

Action 1: Pursue licensure for ATVs and boating vehicles only obtained through testing and demonstrations

Action 2: Advocate for helmet laws

Action 3: Identify those that use healthcare services for recreational accidents and educate on safe practices

Goal 2: Reduce rate of teen pregnancy by 5% in Saline County in five years

Action 1: Partner with community faith-based and not-for-profit agencies that deal with teen pregnancy to reach out through or to school systems

Action 2: Partner with at risk and first time diversionary judicial services

Goal 3: Through agencies such as AR Department of Environment and County municipalities, identify and disclose areas of concern for quality of air, water and soil to the public and develop plans for improvement.

Action 1: Decrease the use of burn barrels



Giving credit where credit is due

Acknowledgements

We would like to acknowledge the efforts of this collaborative group. It is energizing when a diverse group of citizens comes together to work toward a common cause. Funding of this project has been provided by: Saline Memorial Hospital.

Participation in creating the Saline County Community Health Needs Assessment and Plan:

Saline Memorial Hospital, City of Benton, City of Bryant, City of Haskell, Saline County Government, Saline County Health Department, State Health Department Hometown Health Coalition, State of Arkansas Department of Health, Hot Springs Village Property Owners Association and Chamber of Commerce, Saline County Sheriff's Office, Bryant Parks and Recreation, Benton Police Department, Saline Courier, Saline County Economic Development Council, Benton and Bryant Chambers of Commerce, Boys and Girls Club of Bryant, Habitat for Humanity, Benton, Bryant and Bauxite School Districts, Collegetown Fire Department, Bryant, Benton, Bauxite and Paron citizens, and local employers including: Jordan Woolbright & Associates, PA, Summit Bank, Everett Buick GMC, Carson Physical Therapy, First Security Bank, Self Pools and Spas, Ferguson Furniture, and FirstStaff.

The report is not the end of the process.

Currently, several small groups are forming to begin implementation on several fronts related to the goals and actions identified in the Community Summit. Please contact Rebecca Jones at SMH for information regarding ongoing efforts and how you may get involved.

The primary and secondary research is the basis of the Community Health Needs Assessment Report for Saline County, AR. The health information contained in these reports will be utilized to redefine community health priorities, develop an updated community plan and guide collaboration and resource allocation.

Meet the people who have brought this important information together. As a community, we are appreciative of their work, their time and their talents.

- Saline Memorial Hospital, Board of Directors
- Bob Trautman, Chief Executive Officer, Saline Memorial Hospital
- Rebecca Jones, Marketing Director, Saline Memorial Hospital



Funding for this project was provided by Saline Memorial Hospital



Engagement Notes

Ways I see myself getting involved

Goals for my personal health



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