

Choctaw Regional Medical Center CHNA Report

CHNA Report and Implementation Plan
Approved September 21, 2022



HORNE.COM

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Executive Summary

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize the healthcare needs of Choctaw County and the surrounding areas. The CHNA is required by The Patient Protection and Affordable Care Act of 2010 and must be submitted to the Internal Revenue Service in order to maintain our not-for-profit status.

Choctaw Regional Medical Center (CRMC) has collaborated with citizens from the community that represent local government, public health officials, industry leaders and medically underserved and chronically ill patients. We have worked to create a coalition that is inclusive and represents all demographics of the population we serve.

Using targeted health demographics, the goal of this group effort is to identify initiatives that will create the most effective outcomes for our citizens. These initiatives will be vetted, implemented, and tracked by the CHNA Steering Committee. On an annual basis, the programs can be adjusted, if needed, and will be reassessed every three years.

The Community Health Needs Assessment Steering Committee was guided by HORNE beginning in July 2022 and will be ongoing throughout the assessment process. A copy of the 2022 Community Health Needs Assessment will be available on the hospital's website, www.choctawregional.com or a printed copy may be obtained from the Medical Center's administrative office.

Choctaw Regional Medical Center would like to thank the members of the Steering Committee, community partners, and HORNE for their input for this assessment. We strive to continue to be the healthcare leader in our area and serve our patients in a caring and compassionate environment.

Steve Marinelli
CEO
Choctaw Regional Medical Center

About the Hospital

Choctaw Regional Medical Center

Choctaw Regional Medical Center, located in Ackerman, Mississippi, was constructed in 2013 through a commitment by our Board of Supervisors, Board of Alderman, Board of Trustees, county leadership, hospital management and our citizens. Building on the belief that everyone should have access to quality healthcare close to home, CRMC has become a health leader in our area.

Specializing in Swing Bed care, Choctaw Regional Medical Center features a 15-bed Acute Care Unit. All our patient rooms are private with large, easily accessible restrooms. Patients have access to physical, occupational and speech therapy 7 days per week and our licensed social worker, nutritionist, and discharge planner work to provide a patient focused care plan that insures the immediate and long-term needs of our patients are met. Our around the clock nursing care, access to highly qualified hospitalists and support from many medical specialists make the difference in the overall quality of the care we provide and the overall experience of our patients.

Other services offered by CRMC:

- Chronic Care Management
- Emergency Department
- Infusion Services
- Intensive Outpatient Program
- Laboratory
- Long Term Care
- Outpatient Specialists
- Primary Care Clinics
- Radiology
- Rehabilitation
- Respiratory Therapy
- Swing Bed Program
- Telehealth
- Wound Care



The Community Health Needs Assessment

The Community Health Needs Assessment defines opportunities for health care improvement, creates a collaborative community environment to engage multiple change agents, and is an open and transparent process to listen and truly understand the health needs of Choctaw County, Mississippi. It also provides an opportunity for the hospital to identify valuable collaborative partners as we try to better serve the community and improve the health of our citizens.

The federal government now requires that non-profit hospitals conduct a community health assessment. These collaborative studies help healthcare providers build stronger relationships with their communities, identify needs, and dedicate funding and other resources toward programs that clearly benefit local residents.

Community Engagement and Transparency

We are pleased to share with our community the results of our Community Health Needs Assessment. The following pages offer a review of the strategic activities we have undertaken, over the last three years, as we responded to specific health needs we identified in our community. The last three years presented a particular challenge for our hospital as we responded to the unprecedented health needs the pandemic brought to our service area.

The report also highlights the updated key findings of the assessment. We hope you will take time to review the health needs of our community as the findings impact each and every citizen of our rural Mississippi community. Also, review our activities that were in response to the needs previously. Many of the strategic actions we had planned were unable to be implemented due to our hospital's and our community's response to Covid-19. The hospital's financial and human resources were redirected to the immediate needs created by the pandemic. Additionally, in many situations, we chose to not bring large groups of people together for screenings and health education opportunities.

The Community Health Needs Assessment (Continued)

Data Collection

Primary and secondary data was gathered, reviewed, and analyzed so the most accurate information was available in determining the community's health needs and appropriate implementation process.

Primary Data: collected by the assessment team directly from the community through conversations, telephone interviews, focus groups and community forums; the most current information available.

Secondary Data: collected from sources outside the community.

Secondary Data Sources

- The United States Census Bureau
- US Department of Health & Human Services
- Centers for Disease Control & Prevention
- American Heart Association
- Forrest General Hospital Medical Records Department
- Mississippi State Department of Health
- ESRI Demographic Research
- Mississippi State Department of Health, Office of Health Data & Research

About The Community

Service Area

Primary: Choctaw County

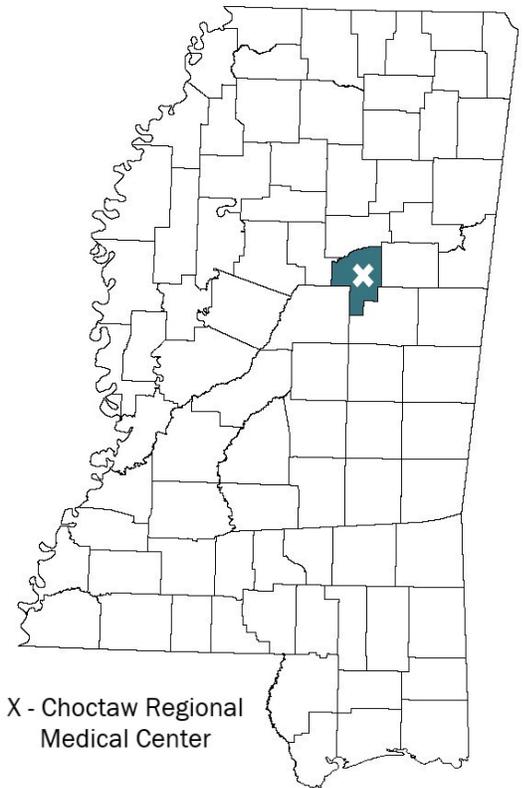
The County

Choctaw County is located in the central part of the of state. Its northern border is the Big Black River, which flows southwest into the Mississippi River, south of Vicksburg. The county seat is Ackerman. The county is named after the Choctaw tribe of Native Americans. They had long occupied this territory as their homeland before European exploration.

The county has a total area of 420 square miles of which, 418 square miles is land, and 1.7 square miles is water. The county has two national protected areas, the Natchez Trace Parkway and the Tombigbee National Forest.

Towns

- Ackerman (county seat)
- French Camp
- Mathiston (mostly in Webster County)
- Weir



Demographics

Choctaw County

Population: 8,246	
Racial Mix:	
White	67.8%
African American	28.4%
Native American	.2%
Asian	.1%
Other	.3%
Non- Hispanic)	98.6%
Hispanic	1.4%

Choctaw County		
Population	8,246	
Racial Mix	White	5,593
	African American	2,343
	Hispanic	117
	Asian	6
	Native American	15
	Two or more races	268
	Other	21
Median Household Income	\$43,874	

Mississippi, Choctaw County and United States

	Mississippi	Choctaw County	United States
Median Age	36.7	44.1	38.5
Median Household Income	\$46,511	\$43,874	\$77,881
Poverty Level*	19.07%	19.4%	13.1%

SOURCES

Source: USAFACTS.org/data/poverty 2022

Source: U.S. Census Bureau, 2020

Source: U.S. Census Bureau, American Community

Source: ESRI Community Profile

More About the Residents of Choctaw County

25% of residents do not have access to broadband

613 Households below the poverty level

585 Households receiving food stamps/SNAP

1,568 Households with 1+ persons with a disability

78 Households with no vehicles (ACS 5-Yr)



Community Input

Community Survey

Community health needs were identified by collecting and analyzing data and information from multiple quantitative and qualitative sources. Considering information from a variety of sources is important when assessing community health needs, to ensure the assessment captures a wide range of facts and perspectives, and to assist in identifying the highest-priority health needs. One of the most important sources is to seek input directly from those we serve.

A community survey was developed by the hospital. Members of the general public were encouraged to participate in the online survey. The survey was available on the hospital's website. Printed copies were available in a variety of public places, including the hospital lobby and clinic waiting rooms. The data collected from the survey was part of the input used by the Steering Committee in establishing priorities.





Community Health Needs Survey 2022

We are conducting a Community Health Needs Assessment and your input is important to us while we learn more about the health needs of our community. Please assist us in taking this short survey.

1. Have you used any health services in the past 12 months?
 - Yes
 - No

2. Do you or a member of your family live with a chronic disease (examples: arthritis, asthma, diabetes, COPD)?
 - Yes
 - No

3. Where do you go when you are looking for information/education on topics related to health? (*check all that apply*)
 - Consumer Health Websites such as WebMD
 - Television
 - A Trusted Friend
 - A Healthcare Professional
 - Social Media
 - Other:

4. How long has it been since you have been to the doctor to get a checkup when you were well (not because you were already sick)?
 - Within the last year
 - 1-2 years ago
 - 3-5 years ago
 - More than 5 years ago
 - I have never been to a doctor for a checkup

5. In the last year, was there a time when you needed medical care but were not able to get it? (Required)
 - Yes
 - No



6. If you answered "yes" to the previous question, why weren't you able to get medical care? Choose all that apply.
- I didn't have health insurance
 - I couldn't afford to pay my co-pay or deductible
 - I didn't have any way to get to the doctor
 - The doctor or clinic refused to take my insurance or Medicaid
 - I didn't know how to find a doctor
 - Fear
 - Too long to wait for appointment
 - Other
- Choose all that apply.*
7. In the last week, how many times did you participate in deliberate exercise, (such as, jogging, walking, golf, weight- lifting, fitness classes) that lasted for at least 30 minutes or more?
- Yes
 - No
8. On a typical day, how many servings of fruits and/or vegetables do you have?
- None
 - 1-2
 - 3-5
 - More than 5
- If other, please indicate here:
9. Have you tested positive for COVID-19? **If no, skip to question #12.**
- Yes
 - No
10. Were you hospitalized due to COVID-19? If so, where?
- Yes Facility: _____
 - No
11. Were you vaccinated when testing positive with COVID-19?
- Yes
 - No
12. Are you fully vaccinated now? (Received 2 doses of 2 dose vaccine or 1 dose of single dose vaccine)
- Yes
 - No



1. How many times were you tested for COVID-19 in a healthcare setting?

- 0
- 1 - 2
- 3 - 5
- 5+

2. Where did you get your health information regarding COVID-19? (check all that apply)

- CDC Website
- Social Media
- Local Health Department
- Other: _____ (please specify)

3. If you could name a health or wellness program that would benefit the health of you or your family, what would it be?

4. Is there a health or wellness need that you are aware of in our area?

5. Please list any other comments or information you would like to share.

Community Health Needs Assessment Steering Committee

The committee is responsible for the oversight, design, and implementation of the CHNA. It will continue to collect information, establish community relationships, and oversee the budget and funding sources. Adhering to an agreed upon timeline, the committee will generate, prioritize, and select approaches to address community health needs. The committee will also monitor the implementation of the 2022 health initiatives. It will remain aware of any changing needs or health care issues and redirect the health improvement activities as appropriate.

The hospital's administrator developed the hospital steering committee. The appointed members are listed below. Other members may serve on the steering committee as the committee's work progresses.

Hospital Steering Committee

Kristi Bagwell RN- Clinical Coordinator

Stephanie Black- Social Services

Shelby Edwards RN- DON Of CRMC

Vaughan Hill- Community Education/Marketing

Ashlynn Kerr RN- Employee Health Nurse

Steve Marinelli- CEO

Monica Potts, LPN- Telehealth Coordinator

Megan Snow RN- Quality Nurse

Kim Thomas RN- DON



Community Focus Group

A community focus group was held at 9:00 a.m. on August 9, 2022. The participants in the group were carefully selected because they each represented a specific segment of the populations served. In addition, they can act as a continuous conduit between the community and the leadership of the hospital. These participants contributed to a structured discussion which was impartially facilitated by a healthcare consultant from HORNE of Ridgeland, Mississippi.



This focus group provided a deliberative venue for learning, trust-building, creative problem solving, and information gathering, which ultimately served as a valuable resource for the CHNA Steering Committee as it developed the hospital's health priorities for the next three years. Since the focus group was based on open communication and critical deliberation, it will hopefully lead to improved community relations, trust, and collaborative partnerships as the hospital strives to improve the overall health of the community.

Due to the recent pandemic experience, the focus group had a heightened awareness of the importance of collaborative partnerships when ensuring the health and well-being of the community. It also applauded the hospital for its leadership role during the pandemic.

Participants in the Community Forum

Kristi Bagwell – Nursing Administrative Assistant, Choctaw Regional Medical Center

Stephanie Black – Director of Social Services, Choctaw Regional Medical Center

Randy Craft – President, Choctaw Regional Medical Center Board of Trustees

Vaughan Hill – Director of Community Education, Choctaw Regional Medical Center

Ashlyn Kerr – Employee Health Nurse, Choctaw Regional Medical Center

Kelvin Knowles – Family Nurse Practitioner, Choctaw Medical Clinic

Steve Marinelli – CEO, Choctaw Regional Medical Center

Renee' Morgan HR – Director, Choctaw Regional Medical Center

Monica Potts – Outpatient/Telehelath Nurse, Choctaw Regional Medical Center

Megan Snow – Quality/Infection Control Nurse, Choctaw Regional Medical Center

Mike Summers – Director of Radiology, Choctaw Regional Medical Center

Kadedria Woodard – Phlebotomist, Choctaw Regional Medical Center

Juliette Ashford – Election Commission, Choctaw County

Felicia Baber – Alderman, City of Ackerman

Karla Beard – School Nurse, Choctaw County School District

Michael Bishop – Food Pantry Coordinator/Minister, Choctaw County

Glen Blaine – Assistant Superintendent, Choctaw County School District

Allison Brasher – School Counselor, Ackerman Elementary School

Brandon Busby – Sheriff, Choctaw County Sheriff's Office

Keith Coleman – Coroner, Choctaw County

Tim Cook – Chief of Police, Ackerman

Angela Cork – French Camp Resident

Rhonda Hood – Administrative Assistant, Southern Company Red Hills Operations

Danny Irvin – Pastor, Ackerman Baptist Church

Dorothy Lilley – Member, Choctaw Regional Medical Center Board of Trustees

David Reed – Ackerman Resident

Dale Reid – Mayor, City of Ackerman

Jo Ann Reid – Member, Choctaw County Twentieth Century Club

John Shumaker – Supervisor, Choctaw County

Lawana Woodard – Teacher, Choctaw County School District

Community Input

The Community Focus Group was just one way the hospital gained insight from those the hospital serves. Each participant brought valuable input about various population groups of the county. Those who were invited, but were unable to attend, have been encouraged to share their knowledge of specific health needs with the hospital administrator and the CHNA Steering Committee.



Rural Health Disparities

Rural Americans are a population group that experiences significant health disparities. Health disparities are differences in health status when compared to the population overall, often characterized by indicators such as higher incidence of disease and/or disability, increased mortality rates, lower life expectancies, and higher rates of pain and suffering. Rural risk factors for health disparities include geographic isolation, lower socioeconomic status, higher rates of health risk behaviors, limited access to healthcare specialists and subspecialists, and limited job opportunities. This inequality is intensified as rural residents are less likely to have employer-provided health insurance coverage, and if they are poor, often are not covered by Medicaid.

According to the Center for Disease Control and Prevention, chronic diseases are the leading causes of death and disability in America, and they affect some populations more than others. People who live in rural areas, for example, are more likely than urban residents to die prematurely from all of the five leading causes of death: heart disease, cancer, unintentional injury, chronic lower respiratory disease, and stroke. These rural health disparities have many causes.

What are the Causes of Rural Health Disparities?

The origins of health disparities in rural America are numerous and vary by region. Some frequently cited factors underlying rural health disparities include healthcare access, socioeconomic status, health-related behaviors, chronic conditions, and more.

- **Health Behaviors:** Rural residents often have limited access to healthy foods and fewer opportunities to be physically active compared to their urban counterparts, which can lead to conditions such as obesity and high blood pressure. Rural residents also have higher rates of smoking, which increases the risk of many chronic diseases.
- **Health Care Access:** Rural counties have fewer health care workers, specialist (such as cancer doctors), critical care units, emergency facilities, and transportation options. Residents are also more likely to be uninsured and to live farther away from health services.
- **Healthy Food Access:** National and local food studies suggest that residents of low-income, minority, and rural neighborhoods often have less access to supermarkets and healthy foods.
- **Demographic Characteristics:** Residents of rural areas tend to be older, with lower incomes and less education than their urban counterparts. These factors are linked to poor health.

Social Determinants of Health

What Determines our Health?

This CHNA report has provided many statistics on what diseases and life-threatening occurrences are killing the residents of Choctaw County. We must keep in mind for every one death that is illustrated in these statistics, there are tens more who are fortunate enough not to have died, but may continue to live only through constant hospitalizations and frequent medical intervention. So, the actual health care costs and demands on the healthcare delivery system is much greater for trying to maintain the quality of life for those who are living with these medical conditions.

Our health is greatly impacted by three major factors. First, is heredity. Many people are born with genetic pathways that make them much more susceptible to various disease entities. Second, is the way we live – our lifestyle. Nutrition, exercise, and life habits, like smoking, abuse of alcohol and drugs, plus other risky behaviors, are components of one’s lifestyle. The third, is called social determinants of health. These are social and environmental influences which are frequently beyond one’s control.

Social Determinants of Health

According to the CenterS for Disease Control and Prevention, social determinates of health (“SDOH”) are conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.

These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels. Social determinants of health are mostly responsible for health inequities – the unfair and avoidable differences in health status seen within and between countries.

The CDC’s Healthy People 2030 Outlines Five Key Areas of SDOH:

Healthcare Access and Quality

The connection between people’s access to and understanding of health services and their own health.

This domain includes key issues such as access to healthcare, access to primary care, health insurance coverage, and health literacy.

Education Access and Quality

The connection of education to health and well-being.

This includes key issues such as graduating from high school, enrollment in higher education, educational attainment in general, language and literacy, and early childhood education and development.

Social and Community Context

The connection between characteristics of the contexts within which people live, learn, work, and play, and their health and well-being.

This includes topics like cohesion within a community, civic participation, discrimination, conditions in the workplace, and incarceration.

Economic Stability

The connection between the financial resources people have – income, cost of living, socioeconomic status – and their health.

This area includes key issues such as poverty, employment, food security, and housing stability.

Neighborhood and Built Environment

The connection between where a person lives – housing, neighborhood, and environment – and their health and well-being.

This includes topics like quality of housing, access to transportation, availability of healthy foods, air and water quality, and neighborhood crime and violence.

Most Unhealthy State 2022

Health can be defined as being free from illness or injury or as a person's mental or physical condition. The World Health Organization defines health as a state of complete physical, mental, and social well-being and not just the absence of disease or infirmity. Health has different meanings for different people and is measured differently for everyone. Some people place levels of health more on appearance, weight, and physical fitness, while others place more value on mental well-being. Others may focus on the absence of medical conditions and diseases. The United States, by far, spends the most on healthcare, more than any other country. Despite this, the country still struggles with a high prevalence of chronic health conditions and preventable deaths.

Levels of Health Among States

Like many other things, health levels and statistics are not uniform across all 50 states. This is evident in obesity rates across the country. Obesity is a major health problem in the United States. It can lead to other serious health problems such as certain types of cancer, Type 2 diabetes, heart disease, and stroke. The Centers for Disease Control and Prevention (CDC) reported that the adult obesity rate in the U.S. was 42.4% in 2017 – 2018. This is a significant increase from 30.5% in 1999 – 2000. The states with the highest obesity rates are West Virginia, Mississippi, Alabama, and Louisiana.

The prevalence of diabetes in the U.S. has increased from 9.5% to 10.9% from 2012 to 2018. While healthy behaviors and active lifestyles are the largest contributors to good health, health can be affected by several factors, including housing, financial safety (especially household income), lifestyle/culture, employment, community safety, education, and environment. Since these factors can vary greatly between states, each state has a different overall level of health and well-being.

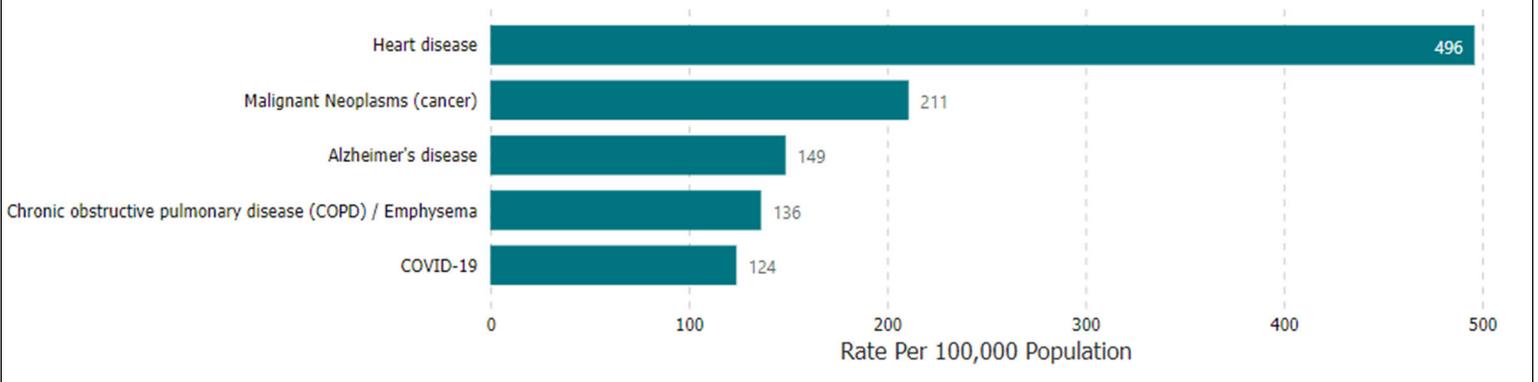
Mississippi is Number One, Again

Mississippi has consistently been the country's most unhealthy state for several years. While Mississippi has a low drug death rate and low prevalence of excess drinking, it falls behind in many other categories. About 32% of Mississippi residents report getting no regular exercise, making it the most physically inactive state in the U.S. This rural state also has the highest obesity rate in the country of 39.5%.

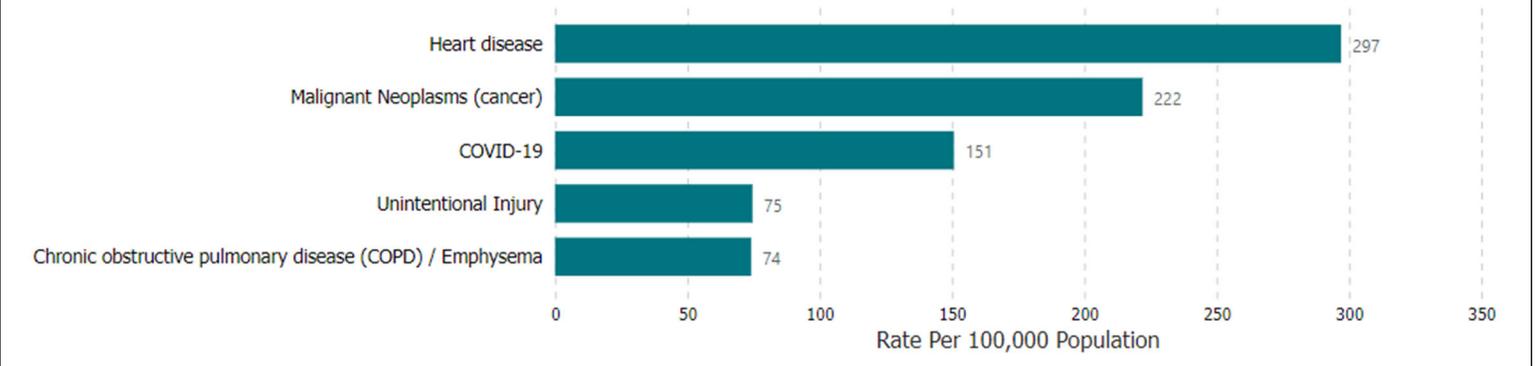


Causes of Death

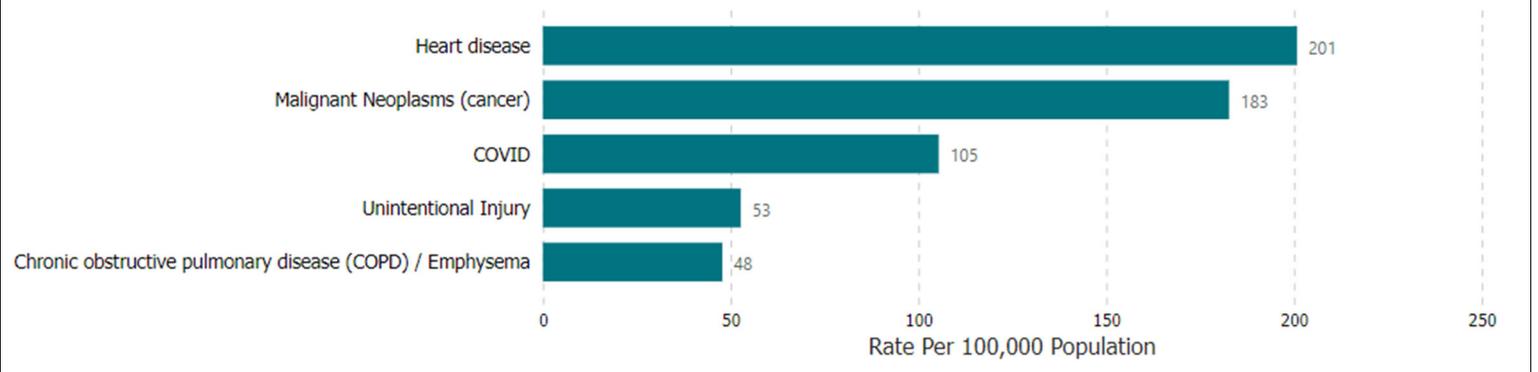
Choctaw County, MS Leading Causes of Death 2020



Mississippi Leading Cause of Death 2020

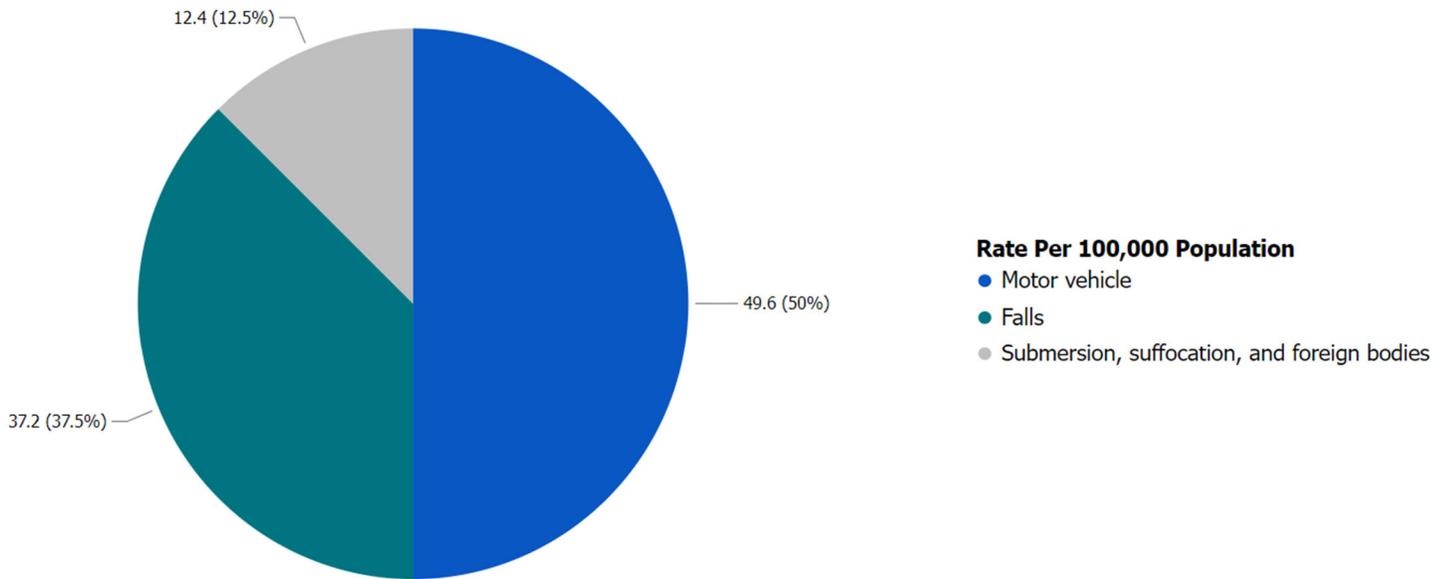


United States Leading Causes of Death 2019 (Covid 2020 Stats)

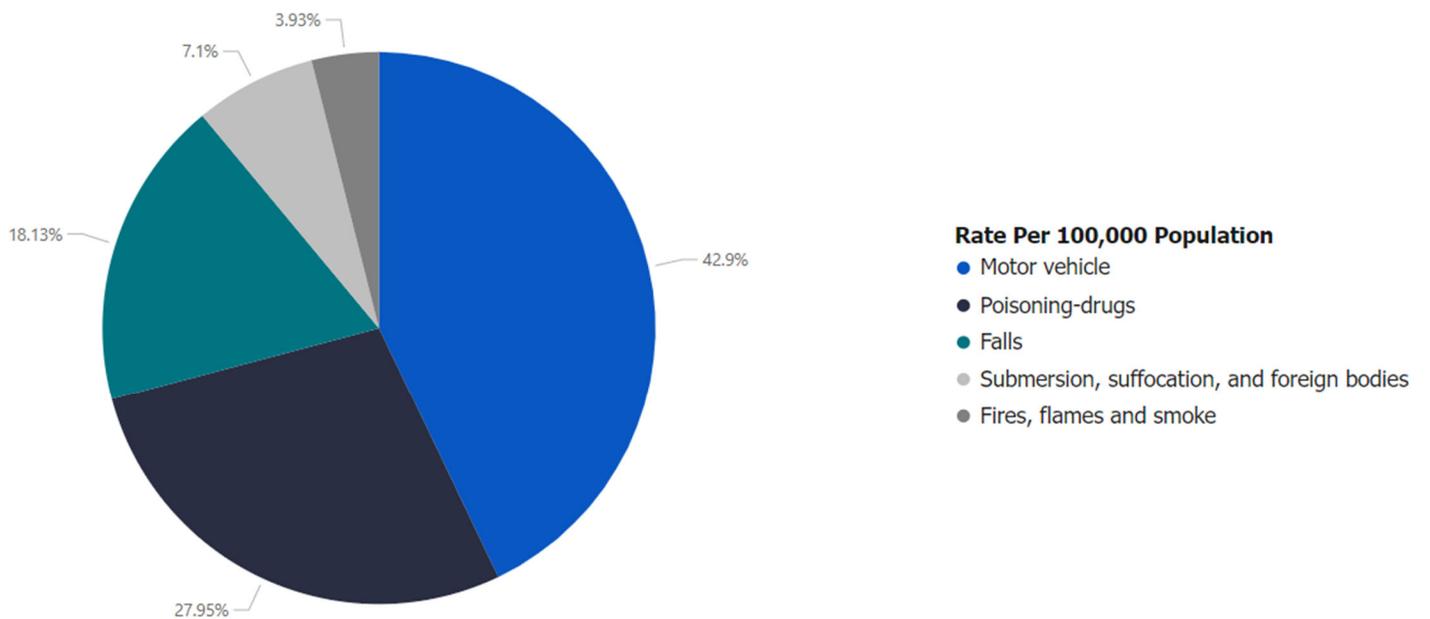


Accidental Deaths

Choctaw County's Top Accidental Deaths Causes

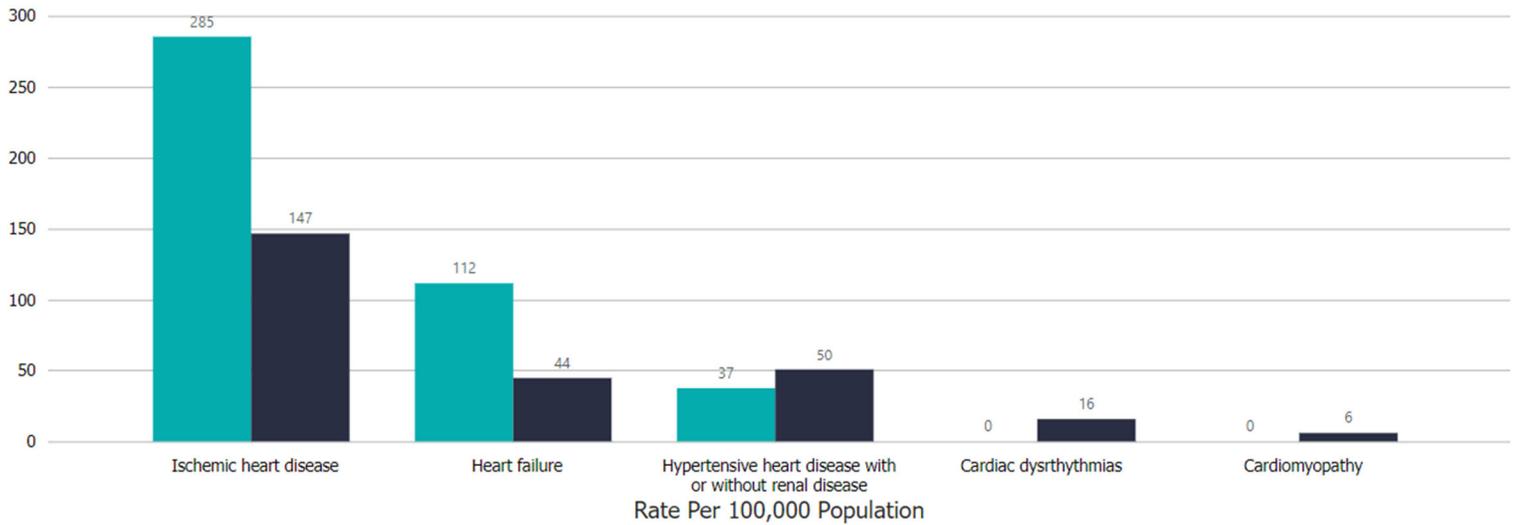


Mississippi's Top 5 Types of Accidental Death



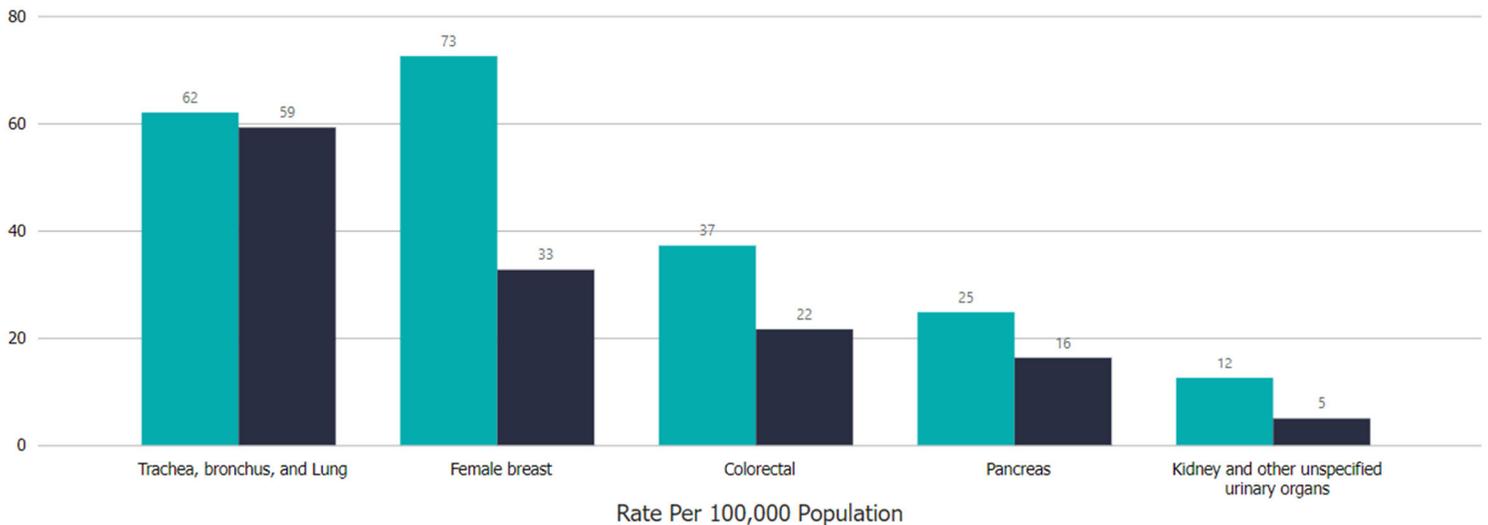
Heart and Cancer Statistics

Top 5 Types of Heart Disease



County/State ● Choctaw ● Mississippi

Top 5 Types of Cancer



County/State ● Choctaw ● Mississippi

The Impact of the COVID-19 Pandemic

The COVID-19 pandemic's impact on our communities throughout America, and especially small rural communities, has altered the delivery of and access to healthcare. Every year, various regions of the U.S. are impacted by disaster, whether it is hurricanes on the Gulf Coast or forest fires on the West Coast. Because these events are somewhat annually predictable, healthcare providers are prepared with procedures and supplies necessary to care for these usually short term and isolated events.

However, COVID-19 was not predicted, and our healthcare system was not prepared. The human resource pool, the supply chain, and the financial resources were all stretched to the max. Protocols and physical plants were not ready to handle the influx of seriously ill patients. Health education and prevention opportunities and practices were not in place. Thankfully, dedicated healthcare workers, clinics, and hospitals answered the call and accepted the challenge.

The number one objective was to care for and protect our communities from this pandemic. Carefully crafted community healthcare agendas were put aside, and all resources were channeled to act and react to serve our communities. The amazing collaborative efforts of local governments, health departments, first responders, the private sector, and the committed healthcare workers made the seemingly impossible happen.

As stated earlier, many planned activities, some of which were part of our CHNA implementation plan, had to be put on hold. Human and financial resources were needed on the "frontline". Consequently, many health initiatives were not able to be implemented. Health education opportunities and public screenings could not happen because of the risk of bringing groups of people together.

There were many positives that came from this crisis. Communities worked together. Healthcare professionals were publicly appreciated and applauded for their commitment to caring, and communities, especially in rural America, found a reason to renew their trust in their small community hospital. Hospitals can look more wisely to the future because of lessons learned during this experience.

Although, several of our health prevention and wellness activities were postponed, there were opportunities to initiate other activities that were created as a result of our last Community Health Needs Assessment. Those that were not implemented were carefully considered and new strategic health initiatives were developed.

CHNA Strategic Action Responses

Take “Charge” of Healthy Eating Habits

Target Population

Due to employee turnover, it caused restraints for employees to visit schools. Changed focus population to adults rather than children.

Goal, Desired Outcome

Educate parents on healthy eating habits in an effort to influence lifestyle changes for future generations

Activities/Actions

- Heart Healthy Checkups every February for employees of the coal mine where their blood pressure, weight, BMI is checked, recorded, and given to employees. Any abnormal findings are discussed with the employee, and they encouraged to follow-up with an appointment with their PCP. If they do not have a PCP, they are encouraged to make an appt. Education and hand outs are provided for abnormal findings.
- Food Pantry Partnership with Broken Wings
- Health Expo June 2017 & 2018 which provided:
 - Free glucose & lipid panel tests
 - Pulmonary Health Screenings
 - BP & HR checks
 - Vaccinations for students entering 7th grade
 - Education on Radiology Services
 - Education on Outpatient Specialty Services
 - Education on Outpatient Wound Care Services
 - Education on Firearm Safety
 - Education on Water Safety
 - Education on Sports Injury Safety
 - Education on Poison Control & Chemical Hazards
 - EMT, Highway Patrol, Fire Department on-site

Take “Charge” of Healthy Eating Habits (continued)

Measure of Success

- Health Expo attendance
- Heart healthy screens with education provided annually to 50-75 employees at American Coal Mine.
- Community participation year to year

Collaborative Partners

- North American Coal Mine
- American Heart Association



CHNA Strategic Action Responses (Continued)

Buckle-Up Brigade

Target Population

All ages

Goal, Desired Outcome

Provide education on seat belt awareness

Activities/Actions

- Annual Health Expo/Car Show that provides education on car safety, ATV safety, injury prevention, and many others
- Active shooter drill with injury prevention

Measure of Success

Annual Health Expo attendance where a large portion of the community received education on car safety

Collaborative Partners

- MORA
- Mississippi Highway Patrol
- Fire Department



CHNA Strategic Action Responses (Continued)

Christian Coalition for Healthy Living

Target Population

Senior Adult Church Groups

Saw a greater need for the middle-aged male population to be educated on “Healthy Living”. Target group became middle-aged men.

Goal, Desired Outcome

Addressing health issues the senior population is facing, including stroke awareness, depression, nutrition, fall risks/ environmental hazards.

Activities/Actions

- Heart Healthy Checkups every February for employees of the North American Coal mine where their blood pressure, weight, BMI is checked, recorded, and given to employee. Any abnormal findings are discussed with the employee and encouraged to follow-up with an appointment with their PCP. If they do not have a PCP, then is offered for a appointment to be made for them at Choctaw Medical Clinic. Education and hand outs are provided for abnormal findings. 7-steps to a Healthy Heart flyer is handed out
- Annual Health Expo in June which provided:
 - Free glucose & lipid panel tests
 - Pulmonary Health Screenings
 - BP & HR checks
 - Vaccinations for students entering 7th grade
 - Education on Radiology Services
 - Education on Outpatient Specialty Services
 - Education on Outpatient Wound Care Services
 - Education on Firearm Safety
 - Education on Water Safety
 - Education on Sports Injury Safety
 - Education on Poison Control & Chemical Hazards
 - EMT, Highway Patrol, Fire Department on-site.

Christian Coalition for Healthy Living (continued)

Measure of Success

The Annual Health Expo reached a large quantity of the community.

The Annual Heart Healthy checks informed 50-75 men annually of any abnormalities that were found during their checkup, provided them with the education and opportunity to better their health, and to follow up with a physician.

Collaborative Partners

- North American Coal Mine
- Mississippi Highway Patrol
- Ackerman Fire Department



CHNA Strategic Action Responses (Continued)

Stroke Sense

Target Population

Middle aged to senior adults

Goal, Desired Outcome

To educate the public on the risk factors, signs, and symptoms of stroke, in an effort to increase awareness of the sudden warning signs of stroke and the importance of 911 services.

Activities/Actions

- Heart Healthy Checkups were conducted every February for employees of the North American Coal mine where their blood pressure, weight, BMI was checked, recorded, and given to employees. Any abnormal findings were discussed with the employee and they were encouraged to follow-up with an appointment with their PCP. If they do not have a PCP, then we offered to make an appointment for them at Choctaw Medical Clinic. Education and hand outs are provided for abnormal findings. 7-steps to a Healthy Heart flyer was handed out
- Annual Health Expo in June which provided:
 - Free glucose & lipid panel tests
 - Pulmonary Health Screenings
 - BP & HR checks
 - Vaccinations for students entering 7th grade
 - Education on Radiology Services
 - Education on Outpatient Specialty Services
 - Education on Outpatient Wound Care Services
 - Education on Firearm Safety
 - Education on Water Safety
 - Education on Sports Injury Safety
 - Education on Poison Control & Chemical Hazards
 - EMT, Highway Patrol, Fire Department on-site
- A booth set up quarterly at Broken Wings thrift store.
- Below are 3 articles that CRMC provided that was printed in the Choctaw Plaindealer and Winston County Journal.

Christian Coalition for Healthy Living (continued)

Measure of Success

Heart Healthy Checks were performed on 50-75 employees at the North American Coal Mine in February, annually.

Large turnout at the annual Health Expo.

Education has improved the awareness of stroke risk factors and management within the community.

Collaborative Partners

- Broken Wings
- North American Coal Mine
- National Stroke Association



CHNA Strategic Action Responses (Continued)

Walking for Wellness

Target Population

All ages

Goal, Desired Outcome

Build walking track on campus of Choctaw Regional Medical Center

Activities/Actions

Due to financial restraints and employee turnover, the walking track was not built. In lieu, we have a designated area around the hospital that is used for walking.

On Saturday, June 3rd, Choctaw Regional Medical Center sponsored the 2017 Inaugural Choctaw County Health Expo. The Expo was held on the campus of Choctaw Regional Medical Center and proceeds from the event went to the Choctaw County Medical Foundation. The Medical Foundation is a non-profit foundation that raises and disburses funds for the purpose of enhancing healthcare in Choctaw County. The Choctaw County Cruisers Car Show began their registration at 8:00 a.m., with more than 50 participants in the car show. Rick Jenkins stated, "The car show was very successful and \$1000.00 was donated to the Medical Foundation." Free health screenings were offered from 10:00 a.m. to 1:00 p.m. and included blood pressure checks, blood sugar checks, and cholesterol screenings. A total of 12 health care vendors from around the area participated and visitors were encouraged to learn about numerous resources offered in and around Choctaw County. Live entertainment was provided throughout the day, featuring The Full Circle Party Band and children of all ages enjoyed the inflatables provided on the hospital grounds. By lunch time, hamburger and hotdog plates were prepared by the hospital staff and were sold to the public for \$5.00 a plate, with proceeds going to The Choctaw County Medical Foundation. The Medical Foundation had a booth set up with information regarding the organization and several new members joined the medical foundation during the Expo. The winner of the Bayou Classic Cooler giveaway was Wayne McLeod of Ackerman, MS. The 20th Century Club provided Bingo with a host of prizes and was played in the hospital dining room from 11:00 a.m. to 2:00 p.m. CEO/Administrator of Choctaw Regional Medical Center, Jamie Rodgers stated "It's so important to continue our relationships with the people of Choctaw County and the surrounding areas. If you expect people to utilize your services, you have to give back and be a part of the community." With such a great turnout for Saturday's exposition, The Choctaw County Health Expo will become an annual event.

Measure of Success

Designated area surrounding the hospital for walking has been established.

Large turnout by the community at the annual Health Expo.

CHNA Covid-19 Response

Target Population

Choctaw County residents of all ages

Goal, Desired Outcome

Provide the community with access to Covid-19 testing and treatment in response to the Covid-19 pandemic.

Activities/Actions

- Outpatient testing offered through Choctaw Medical Clinic and Choctaw Regional Medical Center
- Covid-19 vaccinations offered at Choctaw Medical Clinic and Choctaw Regional Medical Center
- Covid-19 Monoclonal Antibody Infusion Clinic initiated for the treatment of covid-19 cases
- Utilizing social media and newspaper and printed materials to increase awareness of Covid-19 resources available to community residents

Measure of Success

Covid-19 infection and vaccination rates in Choctaw County monitored and discussed in weekly and/or bi-weekly clinical staff meetings.

Through the availability of Covid-19 testing and Covid-19 education, we were able to reduce Covid-19 infection rates in the county. 1,080 individuals were fully vaccinated through Choctaw Regional Medical Center's and Choctaw Medical Clinic's Covid-19 vaccination program. 134 individuals (staff and residents) were fully vaccinated at our nursing home.

Collaborative Partners

- Mississippi Department of Health
- Centers for Disease Control and Prevention

Responding to the Community

Closing the Gap

The information gathered from the community was very uniform and was also consistent with the quantitative data. The most common needs mentioned by the community members were related to chronic diseases, health education, lifestyle improvement and access to care.

Being aware of this lifestyle disparity, the Steering Committee was diligent in addressing these chronic illnesses which lead to a disproportionate number of deaths. Also, the quality of life in our state is negatively impacted by these conditions that rob our citizens of the ability to enjoy good health daily.

Hypertension, heart disease, diabetes, weight loss/obesity and nutrition were all health needs identified by both the community members and health care professionals. In addition, deaths from female breast cancer and trachea, bronchus and lung cancer were identified as disproportionate for the county. Community members saw a need for increased education and preventive care in order to eliminate the path to chronic disease and cancer.

Prevention can be cost effective compared to the catastrophic treatment needed when a chronic disease is unmanaged and leads to major health problems. Education related to nutrition was emphasized because of the link between obesity and so many chronic health conditions. Other community health needs that were expressed included a need for increased health literacy, and decreased health disparities among socioeconomic and racial groups.

Prioritization

The Steering Committee understood the facts the primary and secondary data communicated in reference to the health of the citizens of Choctaw County:

CHOCTAW COUNTY

In mortality statistics, Choctaw County exceeds the state and the U.S. in number of heart disease deaths per 100,000 population. In addition to those who die from heart related diseases, countless more continue to live with constant treatment, medications and interventions because of these illnesses related to unhealthy hearts and lungs.

This same concern is true for patients who suffer and die from various cancer. Cancer is the number two mortality cause in the County. Trachea, bronchus, and lung cancer, as well as female breast cancer in Choctaw County, exceed the death rates for Mississippi.

Typical of southern rural communities, Choctaw County residents do not live the healthiest of lifestyles. Lack of nutritional knowledge and a culture of “country cooking”, along with a lack of exercise, and tobacco use greatly contribute to several lifestyle diseases, with heart disease being number one in Choctaw County.

Alzheimer’s is the number three cause of mortality in Choctaw County. This surprising number exceeds both the numbers for the State of Mississippi and the U.S. Because of these alarming numbers, Alzheimer’s deserve a place in our health improvement plan.

Responding to the Community (Continued)

2022 Strategic Initiatives

Best Living Habits for Choctaw County

Statistics say that in Choctaw County, heart disease is the #1 cause of death, with ischemic heart disease being classified as the leading type of heart disease. The top 2 cancers leading to death in Choctaw County are female breast cancer and tracheal/lung cancer.

Target Population

Males and females ages 20 – 60 years old.

6th grade students

Goals/Desired Outcome

Educate the impact healthy eating and exercise has on heart disease, cancer, and diabetes. Raise awareness of the importance of routine self-breast exam. Addressing the dangers of smoking with younger students in hopes of prevention.

Strategy/Actions

1. Heart healthy checks offered at the American Coal Mine annually in February for their employees.
2. Diabetes/AHA/ Alzheimer/ Hospice 2-day Health event held at Choctaw Regional Medical Center annually in November where the public will be invited and lectures, educational pamphlets, and handouts will be provided. Utilize social media.
3. Breast Cancer Awareness will be provided by providing educational pamphlets on how to perform self-breast exams, targeting middle age and younger women and utilizing social media posts.
4. Vaping/Smoking prevention will be addressed annually during Red Ribbon Week at Choctaw Elementary School, providing informative novelties for the students.

Measure of Success

Provide Heart Healthy Screens to 25 American Coal Mine employees annually. Distribute educational material through handouts, pamphlets, social media, and lectures to over 100 members of the community annually. Provide smoking prevention education or novelties to at least 80% of the 6th grade class at Choctaw Elementary.

Collaborating Partners

- American Coal Mine
- American Heart Association
- Alzheimer’s Association
- Halcyon Hospice
- WellCare Hospice
- American Cancer Society
- Tobacco Free Coalition
- Choctaw County School System
- Chamber of Commerce

Alzheimer's

Statistics say that cancer is the #2 cause of death in Choctaw County with Alzheimer's being #3.

Target Population

Choctaw County residents of all ages.

Goals/Desired Outcome

Educate the public on the importance of POA, Advance Directives, and living wills. Raise awareness of end-of-life care. Make known the difference in dementia and Alzheimer's.

Strategy/Actions

1. Diabetes/AHA/ Alzheimer/ Hospice 2-day Health event held at Choctaw Regional Medical Center annually in November where the public will be invited and lectures, educational pamphlets, and handouts will be provided. Utilize social media
2. Difference between Alzheimer's and Dementia flyers and Facebook posts.
3. Paint Choctaw Purple in November for Alzheimer's awareness month.

Measure of Success

Distribute educational material on Alzheimer and the end stages of life through handouts, pamphlets, social media, and lectures to over 100 members of the community annually

Collaborating Partners

- Alzheimer's Association
- Halcyon Hospice
- WellCare Hospice
- American Cancer Society
- Chamber of Commerce

Patient/Provider Trust

Providers at Choctaw Medical Clinic feel the need to raise awareness with patients being noncompliant in their health and their appointments, thus leading to further health issues.

Target Population

Choctaw County residents of all ages.

Goals/Desired Outcome

Raise awareness of the importance of frequent appointments, compliance, and follow-up appointments. Educate how to manage/monitor other areas of the body with diabetes, HTN, etc.

Strategy/Actions

1. Healthy Minute Video on social media
 - a. Importance of frequent appointments/compliance
 - b. Manage/Monitor other areas of your body with diabetes, HTN, etc.
2. Workforce Wellness – Healthy You Benefit
 - a. Partner with the county and their insurance
3. Text reminder for follow-up appointments/Make note of follow-up appointment on card for patient to have before leaving current visit.
4. Reach out to African American church pastors to build a rapport with them so in return they can communicate the importance of patient/ provider trust and the importance of checkups

Measure of Success

Offer “Healthy You” appointments to 100% of employees employed by the county. Health Minute Video will reach at least 150 members of the community annually. Informative Health meeting with local African American Pastors annually.

Collaborating Partners

- Choctaw County Employees
- Choctaw County
- American Diabetes Association

Thank You

This comprehensive assessment will allow us to better understand the needs and concerns of our community. Choctaw Regional Medical Center is proud to serve Choctaw County and to be an active member of the Akerman community. We are truly committed to providing quality care with compassion and an appreciation for what it means to be your hometown hospital. We take that obligation seriously and are eager to listen to the voices of those we serve.

Thank you for your input and for being a part of this important health assessment for our community. Our eagerness to listen does not stop with the completion of this report. Hopefully, this is just the beginning of an ongoing collaborative relationship where we work together to create a healthier community and find ways to care for those who are underserved.

Our sincere thanks go to all those who took part in this process. We are especially grateful to the members of the hospital board and to our government officials who offer us wisdom and guidance.

Our CHNA Steering Committee members and all those who participated in our Community Focus Group, either by their attendance at the Forum or by conversations, deserve a special thanks for their time, support, and insight. Their input has been invaluable.

And last, but perhaps most importantly, to the general public who realizes their voice does matter. Thank you for completing our Community Health Survey, reading our latest Community Health Needs Assessment, and for supporting our mission of care in Choctaw County.



HORNE