## CHI St. Vincent Hot Springs

Including Arkansas Extended Care Hospital

# 2022 Community Health Implementation Strategy

**Adopted November 2022** 



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#### **At-a-Glance Summary**

#### Community Served



CHI St. Vincent Hot Springs is located in Garland County, population 99,386, which is a popular tourist location and one of the largest cities in Southwest Arkansas. Benton, located in Saline County is slightly larger with a population of 122,437. The Commitment Area for Hot Springs comprises Garland, Saline, and Hot Spring Counties. Outside of these cities, much of Southwest Arkansas is rural. Arkansas Extended Care Hospital is located on the Third Floor of CHI St. Vincent Hot Springs and partners with St. Vincent on community activities and outreach.

#### Significant Community Health Needs Being Addressed

The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs, grouped under "access" and "education," are:



- Access to mental health care
- Access to primary health services
- Substance abuse awareness and education
- Chronic disease education
- Domestic violence and human trafficking awareness and education
- Food and nutrition education and awareness
- Senior Adult Services

#### Strategies and Programs to Address Needs

The hospital intends to take actions and to dedicate resources to address these needs, including:



Cooperative Christian Ministries and Clinic Connected Community Network Senior Adult Services via the Hot Springs Senior Adult Services Center Health Resources in Local Schools Community Outreach Program

## Anticipated Impact



Access to Care - St. Vincent Hot Springs hopes to improve the general health of the community by increasing the availability of access to primary care and behavioral healthcare especially focusing on substance abuse treatment and recovery; establishing a connected community resource network; and enhancing our senior adult services.

Education - The intent is to improve the general health of the community by improving the level of basic health knowledge and awareness and by building a greater level of confidence in and respect for health care in communities that traditionally this sentiment has been lacking.

## Planned Collaboration

Access to Care - CCMC; Arkansas Extended Care Hospital; Garland County Quorum Court; City of Hot Springs; Arkansas Department of Health; Catholic Diocese of Little Rock; Area Agency on Aging; Oaklawn



Education - Hot Springs and Garland County School Districts; CCMC

This document is publicly available online at the hospital's website. Written comments on this report can be submitted to Mission Integration % Michael Millard at 300 Werner Drive, Hot Springs, Arkansas, 71913 or by e-mail to michaelmillard@catholichealth.net.

#### **Our Hospital and the Community Served**

#### About the Hospital

CHI St. Vincent Hot Springs is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 1,000 care sites in 21 states coast to coast, serving 20 million patients in big cities and small towns across America.

In 1888, two vitally important developments occurred in the history of Arkansas health care. A pair of pioneering hospitals both opened: St. Vincent Infirmary in Little Rock and St. Joseph's in Hot Springs. In 2014, St. Joseph's became part of CHI St. Vincent and changed its name to reflect the new partnership. With more than 280 licensed beds, CHI St. Vincent Hot Springs is a faith-based, not-for-profit organization serving the health care needs of Hot Springs, Ark., and surrounding communities.

We serve residents and visitors who seek emergency and trauma care. We're proud to be part of bringing more than 1,000 babies to life each year through our childbirth center. Our advanced specialties include cancer treatment, orthopedics and heart care.

Our Emergency Department (often referred to as Emergency Room or ER) provides emergency care for both adult and pediatric patients 24 hours a day. We have experienced, compassionate physicians and nurses on staff in the emergency room, who specialize in emergency medicine. We also have a Level 2 Trauma Center designation and serve not only the Hot Springs area, but also the entire Southwest Arkansas region. For minor health issues and after hours care, you can turn to one of our Convenient Care clinics.

Arkansas Extended Care Hospital – Hot Springs is a long term acute care hospital located within CHI St. Vincent Hospital of Hot Springs and is co-owned and operated by LHC Group of Lafayette, LA. CHRISTUS Health entered into a joint partnership with LHC Group in September of 2017 maintaining 40% ownership of the facility. Currently the hospital is licensed for 27 LTACH beds.

Opening in March 15, 1999, the Arkansas Extended Care Hospital – Hot Springs provides care to medically complex patients who require continued acute care services over an extended period of time. Some of the specialty areas of focus for the facility are ventilator weaning, IV antibiotic therapy and wound care. Arkansas Extended Care Hospital – Hot Springs primarily serves the adult population and provides employment for approximately 65 persons. The geographical area of focus is Garland County, AR, but the facility also serves the surrounding counties of Montgomery, Scott, Clark, and Hot Springs, AR.

Approximately 200 patients are served in the Arkansas Extended Care Hospital – Hot Springs annually. The average age of patients admitted to Arkansas Extended Care Hospital – Hot Springs is 66, and over 79% of all patients are admitted directly from CHI St. Vincent Hospital. The primary admitting diagnoses

are respiratory, infectious disease, and wound related to co-morbities such as diabetes, obesity and cardiovascular issues that complicate the treatments for primary diagnoses, which result in extended hospitalizations.

#### **Our Mission**

The hospital's dedication to assessing significant community health needs and helping to address them in conjunction with the community is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

#### Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.



#### Description of the Community Served

#### **CHI St. Vincent Hot Springs**

In 2014, Mercy St. Joseph joined the CHI St. Vincent Health System becoming CHI St. Vincent Hot Springs. Founded by the Sisters of Mercy, St. Vincent Hot Springs is the second oldest continuously operating hospital in Arkansas. Built upon the Catholic principles of compassion and care for the poor and vulnerable, St. Vincent continues to be dedicated to serving all those who seek the healing hands of Christ regardless of their ability to pay.

#### **CHI St. Vincent Hot Springs Commitment Area**

The Community Benefits and Mission teams have therefore defined the Primary Commitment Area for St. Vincent Hot Springs to be Garland County, Saline County, and Hot Spring County. Saline County is also part of the CHI St. Vincent Infirmary Commitment Area because both hospitals serve a significant number of patients from Saline County. As such, data from Saline County will be used in both assessment processes and, when possible, refined using ZIP Code level data. A review of unique medical records indicate that admissions from these counties make up 75% of the admissions to St. Vincent Hot Springs for the study period.

	Hot Springs		90th percentile for positive factors 10th percentile for negative factors	
	Garland	Saline	Hot Spring	Top US Performers
Length Life				
Life Expectancy	75	77.3	74	81.1
Premature Age Adjusted Mortality	500	400	530	280
Quality of Life				
Frequent Mental Distress	16%	14%	17%	12%
Frequent Physical Distress	16%	13%	16%	10%
Health Factors				
Obesity	29%	30%	35%	26%
Teen Births	40	22	42	12
Food Insecurity	18%	13%	18%	9%
Clinical Care				
Uninsured	10%	7%	8%	6%
Primary Care Physicians	1,510:1	2,170:1	4,810:1	1,030:1
Mental Health Providers	370:1	740:1	510:1	270:1

Social and Economic Factors				
Violent Crime	645	352	230	63
Suicides	28	20	30	11
Children in Poverty	24%	15%	27%	10%
Demographics				
Population	99,386	122,437	33,771	
% < 18	19.90%	23.10%	20.60%	
% > 65	24.30	18.20%	19.30%	
% Non- Hispanic Black	8.50%	8.20%	11.10%	
% Non- Hispanic White	81.70%	83.40%	82.30%	
% Hispanic	5.90%	5.10%	3.70%	
% Female	51.90%	51.20%	47.70%	
% Rural	36.90%	36.20%	66.00%	

### **Community Assessment and Significant Needs**

The health issues that form the basis of the hospital's community health implementation strategy and programs were identified in the most recent CHNA report, which was adopted in June 2022. The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary.

#### Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Lack of Access to Primary and Mental Health Care	Lack of accessibility to primary and mental health care in those communities that have the highest rates of poverty, lack of insurance, transportation, and confidence in health care. This also includes lack of services for senior adults such as socialization, activities, and access to food.	•
Chronic Disease Education, including Food and Nutrition	Prevalence of obesity and related comorbidities in the population due to lack of access to healthy food options and education.  Related to chronic obesity, incidents of heart disease have been on the rise partially because of lifestyle choices and partially because so many people postponed treatment during the pandemic.	•
Domestic Violence and Human Trafficking	A major concern for our hospital's leadership as well as a majority of key informant survey participants is violent crime.	•
Substance Abuse	The pandemic has exacerbated rates of substance abuse in the community and created further shortages of resources to provide such care for needy communities.	•
Senior Adult Services	There is a need for a range of supportive services for older adults in our community.	•

#### **2022 Implementation Strategy**

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others on to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

#### Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefits with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Hospital and health system participants included Mission Integration leaders, senior Hot Springs leadership, community partners like the City of Hot Springs, the Cooperative Christian Mission and Clinic, the Arkansas Department of Health, Arkansas Health Network, St. Vincent Foundation, St. Vincent



Board of Directors, and the Catholic Diocese of Little Rock.

Community input or contributions to this implementation strategy included surveys of internal and external stakeholders, community partners, public health services, and ongoing partnerships with public and private agencies.

The programs and initiatives described here were selected on the basis of existing and anticipated partnerships with community resources with a shared objective to improve the health outcomes of our community by positively affecting the social determinants of health. Emphasis is being placed on the partnerships that we can form which will have the best opportunities for success.

#### Community Health Strategic Objectives

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.

CommonSpirit Health has established four core strategic objectives for community health improvement activities. These objectives help to ensure that our program activities overall address strategic aims while meeting locally-identified needs.



Create robust alignment with multiple departments and programmatic integration with relevant strategic initiatives to optimize system resources for advancing community health.



Scale initiatives that complement conventional care to be proactive and community-centered, and strengthen the connection between clinical care and social health.



Work with community members and agency partners to strengthen the capacity and resiliency of local ecosystems of health, public health, and social services.



Partner, invest in and catalyze the expansion of evidence-based programs and innovative solutions that improve community health and well-being.

## Strategies and Program Activities by Health Need

Anticipated Impact (Goal)	St. Vincent Hot Springs hopes to improve the general health of the community by increasing the availability of access to primary care and behavioral healthcare especially focusing on substance abuse treatment and recovery; establishing a connected community resource network; and enhancing our senior adult services.					
			Strategic Objectives			
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
Cooperative Christian Ministries and Clinic (CCMC)	Increasing our cooperation with CCMC to improve the delivery of medical and behavioral health care to the most vulnerable members of the community with an emphasis on addressing substance abuse.	•	•	•	•	
Connected Community Network	A patient centered, integrated network of social, medical, and behavioral health services linked together to provide easier access to post acute care, especially for the homeless community and the poor.	•	•	•	•	
Senior Adult Services	Reopen the Hot Springs Senior Adult Services Center in cooperation with the Arkansas Area Agency on Aging, Oaklawn Senior Services, the City of Hot Springs, and Garland County.	•	•	•	•	
Community Outreach Program	The hospital is planning a new Community Outreach program featuring a Community Health Coordinator and two Community Health Workers.	•	•	•	•	
Planned Resources	Community health outreach staff, education and research resources from the local hospital as well as our System Community Outreach Office. Staff medical and social work specialists to participate in community events.					



#### Health Need: Access to Primary, Mental Health Care, and Senior Services

#### **Planned Collaborators**

CCMC; Arkansas Extended Care Hospital; Garland County Quorum Court; City of Hot Springs; Arkansas Department of Health; Catholic Diocese of Little Rock; Area Agency on Aging; Oaklawn

Health Need: Education about Chronic Conditions, Food and Nutrition, Domestic Violence/Human Trafficking, and Substance Abuse					bstance	
Anticipated Impact (Goal)  The intent is to improve the general health of the community by improving the level of basic health knowledge and awareness and by building a greater level of confidence in and respect for health care in communities that traditionally this sentiment has been lacking.						
			Strategic Objectives			
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
Health Resources and Education in Local Schools	Utilize existing St. Vincent operated school based clinics to enhance health education for students and their families, especially to address issues of behavioral health and substance abuse issues.	•	•	•	•	
Cooperative Christian Ministries and Clinic (CCMC)	Expand our partnership to provide resources and expertise to increase awareness and build confidence within the most vulnerable in the community.	•	•	•	•	
Community Outreach Program	The hospital is planning a new Community Outreach program featuring a Community Health Coordinator and two Community Health Workers.	•	•	•	•	



# Health Need: Education about Chronic Conditions, Food and Nutrition, Domestic Violence/Human Trafficking, and Substance Abuse

Planned Resources	Community health outreach staff, education and research resources from the local hospital as well as our System Community Outreach Office. Staff medical and social work specialists to participate in community events.
Planned Collaborators	Hot Springs and Garland County School Districts; CCMC