

# **Corry Memorial Hospital**



## **“Community Health Care Improvement Plan”**

**2013**

**Developed by: Community Health Improvement Committee**

**Respectfully Submitted by: Terry DeLellis RN DON**

## FORWARD

The information and statistics contained in this Executive Summary are compiled from the Erie County Community Needs Assessment completed by the Erie County Department of Health (ECDH) as lead agency, Corry Memorial Hospital, Millcreek Community Hospital, Saint Vincent Health System, UPMC Hamot, the Erie Community Foundation, Highmark Blue Cross Blue Shield, Community Health Net, and the Northwest Pennsylvania Area Health Education Center. The report was authored by Valerie Bukowski, MS and Jeffrey Quirk, PhD of the Erie County Department of Health. Contributors were Patricia Stubber, MBA, Focus Groups Facilitator & Focus Groups Section and Melinda Meyer, MBA, Quality of Life Section. Clerical Support was provided by Kimberly Gray ECDH.

Members of the Community Health Needs Assessment Steering Committee are:  
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Carrie Ennis, Director, Strategic Planning & Corporate Initiatives, UPMC Hamot  
Patricia Stubber, Executive Director, Northwest Pennsylvania Area Health Education Center  
John Schultz and R. Anthony Snow, MD, Community Health Net

The Action Plan for Corry Memorial Hospital was developed from meetings of an internal hospital group and an external community group using the identified Strategic Issues and Priority Indicators. The actions that were identified were categorized and reviewed by the hospital community health care improvement community. This community has met regularly to establish and define the action plan as presented in this document.

The members of the Corry Memorial Hospital "Community Health Improvement" project are:

Terry DeLellis RN DON  
Bethany Trikur RN Occupational Health  
Gayle Gage Physician Office Manager  
Melissa Nyweide Registered Dietitian  
Ellen Eiss RN Emergency Department/Oncology Unit Manager  
Shawn Altman Occupational Health

The Community Health Improvement Committee will be responsible for continued over site and completion of the action plan. This plan is a living document and will be revised at least every three years through on going evaluation of community needs assessment.

# **Executive Summary**

## **Community Health Needs Assessment**

Corry Memorial Hospital (CMH) is a 20 bed not-for-profit Critical Access hospital located in Erie County in Northwestern Pennsylvania. The hospital has served the City of Corry and beyond for over 100 years. The focus of CMH is to provide primary acute care and outpatient services to the community it serves.

The mission statement of Corry Memorial Hospital reflects the hospital's commitment to meeting the health care needs of the community:

“Corry Memorial Hospital will provide state-of-the-art, high quality services delivered by a caring, competent health care team.” It is with the ideal of this mission that CMH has undertaken this Community Health Needs Assessment.

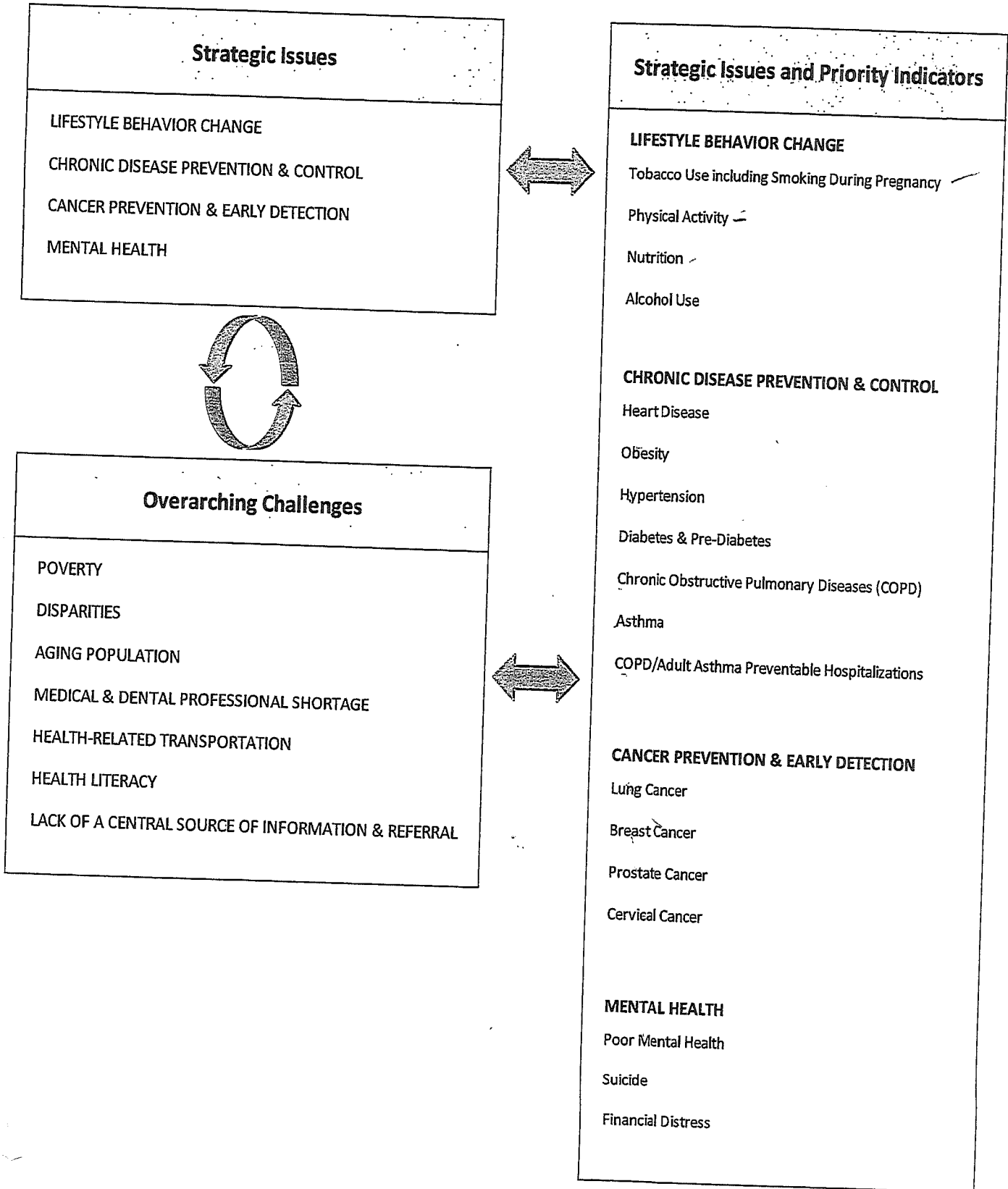
The Patient Protection and Affordable Care Act (PPACA) effective March 23, 2010 and the Health Care Education Affordability Reconciliation Act of 2010 signed into law March 30, 2010 required acute care hospitals to complete a community health care needs assessment. Corry Memorial Hospital engaged in the process not only to meet the requirements set forth by the law but to actively continue to analyze and respond to the on going health care needs of the community it serves.

## **The Community Health Needs Assessment Process**

In 2010, in conjunction with Erie County Department of Health (EDCH), Millcreek Community Hospital, Saint Vincent Health System, UPMC Hamot, the Erie Community Foundation, Highmark Blue Cross Blue Shield, Community Health Net and Northwest Pennsylvania Area Health Education Center, Corry Memorial Hospital formed a collaboration and subsequent Steering Committee to complete a comprehensive Erie County Community Health Needs Assessment. The goal of this assessment for Corry Memorial Hospital was to identify, analyze and actively respond to the health care needs of its community by the development of an action plan for health care improvement. Erie County Department of Health acted as the lead agency. The Mobilizing for Action through Planning and Partnerships (MAPP) framework was used to guide this activity. The ECDH epidemiology staff authored the Health Needs Assessment.

Quantitative data for the assessment was obtained through a 2011 Erie County Behavioral Risk Surveillance System Survey (BRFSS). Qualitative data was obtained through seven focus groups which were conducted throughout the county during the spring and summer of 2012. Information from these and other related sources were used in the development of a list of 150 indicators that were considered for prioritization. A priority matrix was used by the members of the Steering Committee to tally and rank each indicator. This process resulted in the identification of 36 indicators to be considered which were then used by the Steering Committee to identify final priority indicators, overarching challenges and strategic health issues for Erie County (Table 1).

# Blueprint for Community Health Improvement Erie County, PA



## **Corry Memorial Hospital**

Corry Memorial Hospital is a 20 bed Critical Access facility that serves approximately 33,00 people in a tri-county region of Northwestern Pennsylvania, including Erie, Crawford and Warren counties and Chautauqua County in Southwestern New York. CMH has a 30 mile circumference area to the next closest health care facility and is located in southern Erie County. CMH provides health care to an estimated 12% of the population of the Erie County. The CMH service area is a designated Health Care Service Shortage Area by the Health Resources and Services Administration. This designation raises the community's expectation for health care services provided by the hospital. It is the vision of Corry Memorial Hospital to be the enduring first choice for regional health care. The mission is to provide state-of-the-art, high quality services delivered by a caring, competent health care team. These ideals are met by:

- ▲ Financially positioning the facility to be able to obtain the funding to build a new facility
- ▲ Providing in the new facility an acute care unit specially engineered with “Wellness” at it's core
- ▲ Providing state-of-the-art diagnostic equipment for radiology, cardiopulmonary, laboratory services and surgical procedures.
- ▲ Providing emergency services by highly trained staff with state-of-the-art medical equipment.
- ▲ Providing multiple therapeutic services for outpatients as well as the inpatients reducing the need for travel outside the area for specialty care.
- ▲ Providing Community Service through job shadowing and community service hours for high school students, a clinic site for many medical training programs, a meeting place for many community groups and much more.
- ▲ Working with other local providers and agencies to promote wellness in the community.

CMH offers a wide range of inpatient, outpatient, diagnostic, rehabilitative, specialty, community-based and educational services.

## **Erie County**

Erie County is located in Northwestern Pennsylvania on the shore of Lake Erie. Established in 1800, it is the Commonwealth's lone link to the Great Lakes. Erie is the largest of Pennsylvania's 67 counties, with a total area of 1,558 square miles. Erie County's population totaled 280,566 residents in 2010. This amounted to 2.2% of Pennsylvania's population of 12,702,379 persons. The population is 80.0% urban and 20.0% rural.

Statistically the level of education attained by the population of Erie County has improved over the last 20 years from a 77.5% High School graduate rate to a 90.2% high school graduate rate. The median earning for a high school graduate in the county is \$25,122. The unemployment rate in Erie County is about 9.4% which is slightly less than state wide at 9.6%. In 2010, 17.4% of Erie County residents lived below the poverty level. The percentage of population that is under 18 years of age is 24.7%.

## **The Health of the Community**

The objectives of the Erie County Community Health Needs Assessment are to: (1) provide a comprehensive overview of the health status of Erie County, (2) identify priority health needs within the county, (3) organize these priorities into strategic issues, and (4) share this information with the community at large, including stakeholders.

This report is divided into the following sections: (1) Demographics, (2) Maternal, Infant, and Child Health, (3) Mortality, Cancer, and Injury, (4) Infectious Diseases, (5) Chronic Diseases and Conditions, (6) Preventive Health Services, (7) Health Risk Behaviors, (8) Mental and Behavioral

Health, (9) Special Populations, (10) Health-Related Quality of Life, (11) Health Care Access, (12) Health Care Providers, (13) Environmental Health, (14) Quality of Life, and (15) Focus Groups. Selected Healthy People 2010 and 2020 goals, a peer county comparison, and a list of data sources are also included as supplementary material.

Because this is a comprehensive needs assessment, both quantitative and qualitative data are included. Health indicators are reported as individual data points and are also included in trend analyses. Statistics for gender, race, ethnicity, age, education, and income are listed when available. Finally, indicators are compared to state, national, Healthy People, and peer county data. Priorities for Erie County were identified using a priority matrix, ranking system, and asset inventory. Final strategic issues and overarching challenges were then developed.

The conclusions that were identified through the Community Health Needs Assessment completed by Corry Memorial Hospital with the Erie County Department of Health et al. are not new nor are the on going efforts to address them. Corry Memorial Hospital will continue to be part of the Erie County Blue Print for Health Care Improvement on a county level. Members of the hospital staff attend meetings of the county level committees set up to address the issues e.g. Cancer Task Force, the Mental Health Task Force and others. We will partner with these tasks forces and the ECDH to share improvement programs such as the “Let’s Move Outside” program.

CMH will continue to address the on going health care needs of its service area as described below.

### **Improving the Health of Corry Memorial Hospital Service Area**

Highlights include:

#### **Tobacco Use:**

1. Partner with Erie County Department of Health to educate Corry Area Physician Office’s on smoking cessation.
2. Established quarterly smoking cessation programs to be held at the hospital.
3. Advertise PA Free Quit Line at Health Fairs etc.

#### **Physical Activity:**

1. Partner with Erie County Department of Health to promote the “Let’s Move Outside” program by sponsoring some incentive for hospital staff or the committee to walk the Corry Trail.

#### **Nutrition/Obesity:**

1. Develop a 12 week nutrition and wellness program (including BP monitoring & BMI assessment) to be presented for hospital staff, school district staff and Corry industries.

#### **Heart Disease/Hypertension:**

1. Educational sessions on heart disease and prevention by medical staff to the community.
2. Blood pressure screening at Health Fairs and other.

#### **Diabetes:**

1. Community Support Group – Biannual meetings (2 – 4/5 week sessions with speakers giving diabetic education focusing on behavioral change with goal setting)
2. Partner with Erie County Diabetes Association for programming – March Diabetes Month

**Respiratory (COPD, Asthma – Preventable Hospitalization)**

1. CMH is working with Highmark Blue Cross Blue Shield on the Quality Blue Readmission Project.

**Cancer:**

1. Partner with Erie County Cancer Task Force through meeting attendance by hospital staff.
2. Partner with Erie County Cancer Task Force to make available to patients and families the packet "Resources for Patients and Families Living with Cancer".
3. Partner with the American Cancer Society to register community members in the "Cancer Prevention Study 3".
4. Facilitate and sponsor a Women's cancer support group.

**Alcohol Use/Mental Health:**

1. Continue to develop and hand out a resource manual for local and regional resources for alcohol and mental health services.
2. Identify local resources to assist with advertising meetings such as AA or equivalents.
3. Partner with Corry Counseling.
4. Educate hospital staff.

**Other:****Prescription drug abuse:**

1. Utilize ED waiting room as a venue to educate the public.
2. Partner with local leaders.
3. Partner with Corry City Police and other law enforcement.
4. Develop a survey related to prescription drug abuse for gathering data to develop a better local action plan.
5. ED guidelines for providing narcotic prescriptions.
6. Advertise Corry City Police drug drop off program.

**Immunization Program:**

1. Partner with Life Work's Erie and Corry School District to promote influenza immunization for everyone 9 years of age and older.

**Conclusion**

The community health needs assessment developed by Corry Memorial Hospital in conjunction with the Erie County Department of Health and others is the bases for the multi-faceted action plan that has been developed. Along with this plan, the hospital will be working on two areas identified by the local community group during meetings to develop the action plan. These are the prescription drug abuse plan and the immunization program. As time goes on and other needs arise this plan will remain fluid to address those issues.

This plan builds on efforts already in place and Corry Memorial Hospital will continue to work with all stakeholders to improve the care of the service area and to continue to provide state-of-the-art, high quality services delivered by a caring, competent health care team.

**PRIORITY – TOBACCO USE**

**Goal Statement:**

**Indicators (How you will measure progress toward achieving the objective):**

1. Objective #1: Partner with Erie County Department of Health to educate Corry Area Physician Office’s on smoking cessation.
2. Objective #2: Established quarterly smoking cessation programs to be held at the hospital and instructed by Cheryl Mongera CRNP. Bethany/Gayle
3. Objective #3: Advertise PA Free Quit Line at Health Fairs

**Communication needs (Include any communication activities that will support this objective):**

Target \_\_\_\_\_ Purpose \_\_\_\_\_ Approach \_\_\_\_\_

Target \_\_\_\_\_ Purpose \_\_\_\_\_ Approach \_\_\_\_\_

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Date Completed



**PRIORITY – PHYSICAL ACTIVITY**

**Goal Statement: *Implement policies that support residents to achieve increased physical activity.***

**Objective # 1:** By December 2013, build on the communities love for the great outdoors and the interesting historical facts of Corry by sending out 500 postcards to be returned with the trail number on it for 20% participation.

**Indicators (How you will measure progress toward achieving the objective):** Having people sign up for a program promoting walking trails with incentives by sending out 500 postcards, counting returned postcards weekly and showing the progress on a flow chart.

**Communication needs (Include any communication activities that will support this objective):** Create the postcards to be sent out in the brochures, when postcards are returned then the water bottles will be handed out including information about other trails in the Corry area and a web site for trails in and around the Erie area.

Target\_\_Shops & Physician Offices\_\_Purpose\_\_Increase Activity Levels\_\_Approach\_\_Brochure with Postcard Invitation\_\_

Target\_\_Community\_\_Purpose\_\_Increase Activity Levels\_\_Approach\_\_Brochure with Postcard Invitation\_\_

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Date Completed
Create, Prepare Postcards & Stuff Brochures	June 2013	Postcards	Bethany Trikur	20% of postcards returned	June 2013
Collect Postcards (To be dropped off at CMH front desk)	June – October 2013	Flow Charts	Shawn Altman	Obtain Percentage of Participants	
Enter Participants in Drawing for Grand Prize	June- November 2013	Mountain Bike	Gayle Gage	1 Happy Participant	
First 500 Participants to Return Postcard Receives a CMH Water Bottle	June- October 2013	Water Bottles	Gayle Gage Kimmy Kreations	Front Desk staff to hand out water bottle upon receipt of Postcards	
Create Lists of other Corry Trails	June 2013	Paper, Staff to place in water bottles	Bethany Trikur Shawn Altman	Further increase activity levels of all participants	

## PRIORITY – NUTRITION

### ***Goal Statement: Provide Healthy Nutrition and Overall Wellness program to the community and Corry Memorial Hospital Employees***

Objective # 1: By August 31, 2013 develop a 12 week nutrition and wellness program, and implement the first class September 2013 to November 2013 (12 week system), to the Corry Memorial Hospital Employees.

Objective # 1: September to November, 2013 (12 week system) Launch a 12 week nutrition and wellness program, and for the Corry Memorial Hospital Employees.

Objective # 1: January to March, 2014 (12 week system) Launch a 12 week nutrition and wellness program, and for the Corry Area School District Employees.

Objective # 1: September to November, 2014 (12 week system) Launch a 12 week nutrition and wellness program, and for the Corry Shops and Industries Employees.

Indicators (How you will measure progress toward achieving the objective): We will complete a Fat analysis and Blood pressure readings at week 1 and week 12.

Communication needs (Include any communication activities that will support this objective):

Target: Corry Memorial Hospital Employees Purpose: Fat analysis and Blood Pressure readings Approach: Meetings and Handouts

Target: Corry Area School District Employees Purpose: Fat analysis and Blood Pressure readings Approach: Meetings and Handouts

Target: Corry Shops and Industries Employees Purpose: Fat analysis and Blood Pressure readings Approach: Meetings and Handouts

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Dai Compl
Develop a 12 week Nutrition and Wellness program	July to August 2013	Paper and Copier	Melissa Nyweide/ Bethany Trikur/ PT Department	Program Outline and development	
Promote program to Hospital Employees	August 2013	Handouts and Q- tipper advertising	Melissa Nyweide/ Bethany Trikur	Handouts/ advertising	
Launch program Sept to Nov 2013 ( 12 week system)	Sept- Nov 2013	Fat analysis Machine, Blood pressure cuff and stethoscope, Employee Health to take readings, Handouts and Talk schedule for the 12 week cycle	Melissa Nyweide/ Bethany Trikur	Room reservation for the presentation nights one night for each week listed (1 <sup>st</sup> , 6 <sup>th</sup> , and 12 <sup>th</sup> week)	
Evaluate results from first 12 week System	Dec 2013	Results from Fat analysis and blood pressure readings	Melissa Nyweide/ Bethany Trikur	50% of those participating will show improvements in their readings	
Evaluate program based on results from first 12 weeks program	Dec 2013	Make any additions or subtractions to the program as needed	Melissa Nyweide/ Bethany Trikur		
Launch program January to March 2014 ( 12 week system)	Jan to Mar 2014	Fat analysis Machine, Blood pressure cuff and stethoscope, Employee Health to take readings, Handouts and Talk schedule for the 12 week cycle	Melissa Nyweide/ Bethany Trikur	Room reservation for the presentation nights one night for each week listed (1 <sup>st</sup> , 6 <sup>th</sup> , and 12 <sup>th</sup> week)	
Evaluate results from first 12 week System	April 2014	Results from Fat analysis and blood pressure readings	Melissa Nyweide/ Bethany Trikur	50% of those participating will show improvements in their readings	
Evaluate program based on results from first 12 weeks program	May to June 2014	Make any additions or subtractions to the program as needed	Melissa Nyweide/ Bethany Trikur		

Launch program Sept to Nov 2014 ( 12 week system)	Sept- Nov 2014	Fat analysis Machine, Blood pressure cuff and stethoscope, Employee Health to take readings, Handouts and Talk schedule for the 12 week cycle	Melissa Nyweide/ Bethany Trikur	Room reservation for the presentation nights one night for each week listed (1 <sup>st</sup> , 6 <sup>th</sup> , and 12 <sup>th</sup> week)
Evaluate results from first 12 week System	Dec 2014	Results from Fat analysis and blood pressure readings	Melissa Nyweide/ Bethany Trikur	50% of those participating will show improvements in their readings
Evaluate program based on results from first 12 weeks program	Dec 2014	Make any additions or subtractions to the program as needed	Melissa Nyweide/ Bethany Trikur	

**PRIORITY – DIABETES**

**Goal Statement:** Provide continuing educational support to the diabetic population of Corry Memorial Hospital service area.

**Objective # 1:** By December 31, 2013 facilitate one diabetic support to include 4/5 weeks of 1 hour sessions with speakers giving diabetic education focused on behavioral changes and goals setting for 20 people.

**Objective #2:** By June 30, 2014 facilitate one diabetic support to include 4/5 weeks of 1 hour sessions with speakers giving diabetic education focused on behavioral changes and goals setting for 20 people.

**Indicators (How you will measure progress toward achieving the objective):** Support group attendees will set a three month goal and follow up will be done via telephone to assess the results.

**Communication needs (Include any communication activities that will support this objective):**

Target\_Support Group Members\_\_\_Purpose\_\_\_Attend meeting\_\_\_Approach\_\_\_Post card Invitation\_\_\_

Target\_\_\_Physician Offices\_\_\_Purpose\_\_\_Advertise\_\_\_Support Group\_\_\_Approach\_\_\_Meeting Flyers\_\_\_

Target\_\_\_Corry Journal\_\_\_Purpose\_\_\_Advertise\_\_\_Support Group\_\_\_Approach\_\_\_Meeting Flyers\_\_\_

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Dai Compl
Diabetic Committee meeting	August 2013	Meeting Room	Terry DeLellis	Program Outline Identification of Speakers	
Prepare Post Cards & Mail/Flyers	September 2013	Post Cards	Terry DeLellis/Bethany Trikur	Mailed Invitations Flyers for physician offices	

Reserve PMR	September 2013		Terry Delellis	Room for meeting
Contact dietary for meeting snack	September 2013		Terry DeLellis	Snack menu for each meeting in place
Hold meeting	October 2013		Diabetic Committee	4/5 weeks of 1 hour meetings for 20 + attendees
Complete goal setting for attendees	October 2013	Forms for goal setting	Diabetic Committee	Each attendee has set a goal for the next three months
Follow-up calls	January 2014	Copies of goal setting forms and demographics of patients	Diabetic Committee	Number of attendees reaching set goal in October
Diabetic Committee meeting	February 2014	Meeting Room	Terry DeLellis	Review of patient goals & plan for Spring meeting based on patient input
Prepare Post Cards & Mail/Flyers	April 2014	Post Cards	Terry DeLellis/Bethany Trikur	Mailed Invitations Flyers for physician offices
Reserve PMR	April 2014		Terry Delellis	Room for meeting
Contact dietary for meeting snack	April 2014		Terry DeLellis	Snack menu for each meeting in place
Hold meeting	May 2014		Diabetic Committee	4/5 weeks of 1 hour meetings for 20 + attendees
Complete goal setting for attendees	May 2014	Forms for goal setting	Diabetic Committee	Each attendee has set a goal for the next three months
Follow-up calls	September 2014	Copies of goal setting forms and demographics of patients	Diabetic Committee	Number of attendees reaching set goal in October

## **PRIORITY – CANCER**

**Goal Statement: Promote healthy habits to decrease the risk of cancer and participate with local efforts to increase awareness and be included in local resources.**

**Objective # 1:** Provide membership on the Erie County Control Task Force through the Erie County Health Department.

**Objective # 2:** Print and make available to patients and family members the packet “Resources for Patients and Families Living with Cancer” as developed by the Erie County Control Task Force. Monitor any updates in the packet and change accordingly. Inservice the CMH staff regarding availability and contents.

**Objective # 3:** Promote the CPS3 study sponsored by the American Cancer Society. Provide a venue and secure volunteers to participate.

**Objective # 4:** Facilitate and sponsor a Women’s cancer support group.

**Indicators (How you will measure progress toward achieving the objective):**

**Objective # 1:** Monitor that the individual attends a minimum of 80% of the scheduled meeting. Monitor that the individual reviews 100% of the minutes as available if unable to attend the meeting. The minutes and/or items discussed will be reviewed at each of the CMH Community Service Meetings.

**Objective # 2:** Provide a log that will be filled out with each packet dispensed. Quarterly collect the number provided. Organize 1 inservice regarding the packet and obtain participation sign in.

**Objective # 3:** Review the set goal of 100 registrants.

**Communication needs (Include any communication activities that will support this objective):**

**Target:** Community participation in CPS3. **\_Purpose:** Promote the event to meet the goal of 100 registrants. **\_Approach:** Utilize Q-Tipper/hang provided flyers/utilize Corry Journal.

**Target:** Women with cancer in our community. **\_Purpose:** Promote the support group to meet the emotional needs of the local women in our community. **\_Approach:** Hang provided flyers, utilize Corry Journal.



Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Date Completed
Erie County Control Task Force Meetings.	1 month May 2013, then monthly	1 CMH employee to attend	Ellen Eiss	Participant will attend 80% of scheduled meetings. Minutes will be reviewed from all the meetings.	Initiated May 2013 and ongoing
Print out packet of "Resources for Patients and Families Living with Cancer" and make 20 initial copies. Maintain par level of 20 available in the Emergency Department.	1 month June 2013	Paper/printer/photo-copier	Ellen Eiss	Use of packet as appropriate.	
Inservice for use of packet "Resources for Patients and Families Living with Cancer".	2 months July 2013	CMH staff person to schedule and facilitate inservice. Provide venue for inservice. Pay education time for inservice to participating staff.	Ellen Eiss	Attendees will verbalize understanding of materials in the packet and provide to patients and/or family members. Will fill log out when dispensing.	
American Cancer Society CPS3 (Cancer Prevention Study 3)	1 month May 2013	Public Meeting Room Volunteers	Ellen Eiss	100 registrants from community-goal met Volunteers from CMH staff, 3 staff were available to volunteer 5 hours each.	Tues May 14 <sup>th</sup> 2013
American Cancer Society CPS3 (Cancer Prevention Study 3)	1 month May 2013	Required cookies and juice for patients with reaction to lab draw	Ellen Eiss	CMH kitchen will supply tray of cookies and juice as requested by the ACS Cookies and juice provided as requested.	Tues May 14 <sup>th</sup> 2013
Women's Support Group	1 month May 2013, then monthly	Public Meeting Room 1 CMH contact person to organize and facilitate	Ellen Eiss	Monthly meeting with steady attendance	ongoing

## **PRIORITY – ALCOHOL USE/MENTAL HEALTH**

**Goal Statement: *Promote and provide resources for patients and family members to encourage use of available resources in an effort to positively improve the quality of life in our community.***

**Objective # 1:** Develop a resource manual for local and regional resources available for patients and or family members seeking assistance with alcohol or mental health issues.

**Objective # 2:** Contact local churches and local venues known to promote AA meetings or equivalent to obtain a comprehensive list of contact persons and locations with dates and times.

**Objective # 3:** Partner with Corry Counseling.

**Objective # 4:** Provide educational opportunities to the staff at CMH to promote recognition of potential issues with patients and ability to utilize appropriate resources. We are one of the largest employers in our community and these skills would be used out in our community.

**Indicators (How you will measure progress toward achieving the objective):**

**Objective # 1:** Set a goal for completion of the resource manual in the next 6 months. Designate team members to complete and monitor progress monthly until goal met.

**Objective # 2:** Designate task with set goal for completion of 2 months. Monitor progress monthly.

**Objective # 3:** Contact Corry Counseling to obtain contact person and discuss mutual goals and concerns. Establish participants with regularly scheduled meetings within 12 months. Review minutes of discussions quarterly.

**Objective # 4:** Organize 2 inservices yearly and maintain participation log.

**Communication needs (Include any communication activities that will support this objective):**

**Target:** CMH employees. **Purpose:** Encourage participation in provided inservices. **Approach:** Utilize CMH e-mail/hang flyers.

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Date Completed
Resource Manual	6 months Dec 2013	Team members, minimum of two persons from CMH staff, time to contact and research available resources, contact numbers and addresses and verify accuracy	Ellen Eiss	Completed resource manual to be available to healthcare professionals/patients and family members	
Compile comprehensive list of local AA meetings or equivalent in the Corry area.	2 months Aug 2013	1 CMH employee to compile list, contact local or potential venues and verify accuracy of schedule/contact persons and location/time	Ellen Eiss	Compile comprehensive list to be available to healthcare professionals/patients and family members	
Partnering with Corry Counseling	Initiate within 2 months August 2013	1 CMH employee to be established as contact person	Ellen Eiss	Contact person will act as liaison with Corry Counseling to address joint issues or concerns	
Educational inservices	12 months	1 CMH staff person to organize inservice, venue to provide inservice, educational pay for participants	Ellen Eiss	Attendees will verbalize understanding of materials provided	

## **PRIORITY – PRESCRIPTION DRUG ABUSE**

***Goal Statement: Promote education both in the community and with the CMH staff regarding the signs of prescription drug abuse. Promote healthy community habits to recognize and minimize the risk of prescription drug abuse.***

**Objective # 1:** Utilize the Emergency Department waiting room as a focal point for educational opportunities with providing a display and handouts regarding signs and symptoms of potential prescription drug abuse. Provide the location of the local prescription drop off boxes (local police station).

**Objective # 2:** Partner with local community leaders.

**Objective # 3:** Partner with the Corry City Police and other local law enforcement.

**Objective # 4:** Develop a survey to go to local community leaders (i.e. police, school district, mayor, local religious leaders). The survey will be utilized to gather information regarding the specific community concerns and develop a local action plan.

**Objective # 5:** Develop a policy for the Emergency Department as a guideline for providing narcotic prescriptions that includes addressing concerns for potential diversion or abuse.

**Objective # 6:** Develop a document to be placed in the Health Care Packet given on admission regarding care and disposal of prescription drugs.

**Indicators (How you will measure progress toward achieving the objective):**

**Objective # 1:** Develop a list of monthly topics to be displayed. Maintain a par level of 200 handouts and monitor the number taken. Revise as required.

**Objective # 2:** Contact local community leaders to discuss participation in a local task force within 3 months. Establish participants with regularly scheduled meetings within 12 months. Review minutes of discussions quarterly.

**Objective # 3:** Contact Corry City Police and other local law enforcement to discuss mutual goals within 3 months. Establish participants with regularly scheduled meetings within 12 months. Review minutes of discussions quarterly.

**Objective # 4:** Designate 2 CMH individuals to develop survey. Set goal for completion of survey in 6 months. Discuss progress monthly. Send out survey. Gather and compile results within 9 months of start. Develop local action plan specific to the community needs within 12 months.

**Objective # 5:** Develop policy for the Emergency Department to address concerns for potential diversion and abuse of prescription narcotics. Begin to develop within 1 month and complete within 6 months.

**Objective # 6:** Develop document to be placed in Health Care Packet within 1 month. Monitor number of packets provided yearly. Revise as appropriate.

**Communication needs (Include any communication activities that will support this objective):**

**Target: Local Community Leaders Purpose:** Establish participation to reach indicated goals. **Approach:** Contact by telephone initially and document.

**Target: Corry City Police and other local law enforcement. Purpose:** Establish participation to reach indicated goals. **Approach:** Contact by telephone initially and document.

Activity	Timeframe	Resources Required	Lead	Anticipated Products or Results	Date Completed
Educational station set up in the Emergency Department waiting room.	3 months Sept 2013 then monthly	Display board as agreed upon by administration, paper, staff time to develop monthly, photocopier to maintain par level	Ellen Eiss	Educational opportunities will be provided to CMH patients and family members. 80% of handouts available will be taken from waiting area. Staff will query patients/family members for feedback regarding educational format	
Local community leader partnership	3 months to initiate Sept 2013, 12 months to establish a routine schedule	Designated CMH contact person, pay for required meetings/contact	Ellen Eiss	Establish a contact person to act as liaison to address community concerns with CMH regarding prescription drugs and document pertinent discussion	

Law enforcement partnership	3 months to initiate Sept 2013, 12 months to a establish a routine schedule	Designate CMH contact person, pay for meetings/contact	Ellen Eiss	Establish a contact person to act as liaison to address police concerns with CMH regarding prescription drug and document pertinent discussion
Community survey for prescription drug concerns	Develop in 3 months, compile completed surveys in 9 months and develop local plan within 12 months	Designate 2 CMH employees to develop survey, pay time to research, compile and develop plan	Ellen Eiss	Local plan will be developed to address our community needs regarding prescription drug abuse
Emergency Department policy	Begin to develop within 1 month and complete within 6 months	1 CMH employee to develop policy in conjunction with ED physicians, will follow through approval procedure, pay for time required to develop	Ellen Eiss	Complete policy that will be utilized as a guideline for providing narcotics in the Emergency Department
Health Care Packet document	1 month July 2013	1 CMH employee to develop document to be placed in Health Care Packet, paper, pay time to complete, photocopier	Ellen Eiss	Complete document, have placed in Health Care Packets and monitor # given out each year

