



Case File

St. Joseph Health • Orange, California

Healthcare System Impacting Needs

St. Joseph Health is a Catholic healthcare organization that covers much of California and part of Texas. With 14 hospitals, 26 medical groups, six home care facilities and several community clinics, keeping up with the needs of all of their administrators and healthcare professionals – not to mention all the people they serve – is a challenging proposition.

That's why they made the decision to conduct a system-wide Community Health Needs Assessment (CHNA).

Marie-Hortence Prosper, Project Manager of Community Health for St. Joseph Health (SJH), says this massive assessment is part of their overall mission.

"It's a necessary part of maintaining our nonprofit status, but more than that, it's a way to see what people really need in each community. It's our mission to continually improve the health and quality of life of people in the communities we serve," explains Prosper.

"In 2006, we put three strategic goals in place – Sacred Encounters, Perfect Care

and Healthiest Communities," says Prosper. "We use these goals as a starting point for just about everything we do. In 2007, we commissioned PRC to conduct our first Community Health Needs Assessment as part of the Healthiest Communities initiative."

The initial approach to achieving this goal was to address the childhood obesity epidemic, with data finding 25.9% of children ages five through 17 were considered overweight or obese. These results led SJH to begin their Healthy for Life campaign in 2008. Starting in Orange County, CA, this campaign worked toward getting children and their families to develop healthy lifestyle choices by incorporating physical activity and a responsible diet into daily lives.

One component of the campaign was developing an interactive website (www.sjhshealthyforlife.org) to help families, schools and communities make healthy choices. The site includes information that anyone can access, including simple videos

Inside...

- The Health of America's Children
- Keys to Successful Collaborations
- FAQs: IRC 501(r)(3)
- Smaller Communities Make Big Strides



Different Hospitals Different Priorities

Even though these hospitals belong to the same health system, their priorities are necessarily quite different. The results of their PRC Community Health Needs Assessment helped them decide where to place their focus.

St. Joseph Hospital | *Eureka, CA*

- Mental health services, especially within the Latino community
- Access to education and health screenings
- Improve food security for low-income single women with children under 18
- Reduce inappropriate readmits to the ER and Urgent Care

Queen of the Valley | *Napa, CA*

- Oral health for low-income children
- Community-based chronic disease management
- Women's health programs
- Health insurance enrollment and retention for uninsured children and adolescents

Covenant Health System | *Lubbock, TX*

- Health and nutrition education for low-income patients
- Mental health counseling in group sessions
- Adult dental health for those with financial needs and limited access
- Community outreach through children's dental clinics
- Covenant Community Health Screening Initiative (CCHSI) for low-income residents and secondary service areas that lack easy access to healthcare
- Covenant Body Mind Initiative, working with middle and high school students to address and prevent childhood obesity

on fitness and cooking, fact sheets, lifestyle tips and more.

In 2012, SJH completed another, more broadly reaching CHNA, both to check their progress and to determine any changes in their communities' needs.

The Healthy for Life campaign seems to be having a positive effect, as there are improvements in nutrition, physical activity and fitness, and weight indicators in the 2012 CHNA data. Results show that the total number of adults eating five or more servings of vegetables per day increased from 36.2% in 2007 to 48.8% in 2012. Similarly, only 19.6% of adults reported eating three or more fast food meals per week, down from 23.9% in 2007.

People are more likely to receive medical advice about their weight, and overweight residents are more likely to try to lose weight.

According to Prosper, it's not enough, though. "Across the board, we wanted to see more improvement in various health indicators. Unfortunately, even with the success of our programs, there is still a lot of need in our communities. One of the factors that may have contributed to this is the recession.

"The recession affected people's lives in ways no one could have anticipated, and that includes their health. With this in mind, it's no surprise that there are more uninsured people now than in the last assessment," she says. "In 2007, there were 17% uninsured, and now there are 22%. We see similar trends in depression and diabetes as well."

Seeing differences and similarities

"Each hospital looks at the CHNA numbers differently," explains Prosper. "They have to determine what issues are the most prevalent within their own communities."

Healthiest Communities in the Nation

A major emphasis within St. Joseph Health is making the communities that they serve among the healthiest in the nation. These efforts include three major initiatives:

I. Advocacy – Identifying legislative advocacy priorities that impact the core issues of the Catholic healthcare ministry.

- A. Preserving and protecting the budget safety net
- B. Maintaining Catholic ethical integrity
- C. Physician issues, keeping physicians and hospitals collaborating to align treatments and ensure patient focus
- D. Childhood obesity prevention, including the Healthy for Life program
- E. Healthcare reform implementation, and determining how it will affect all aspects of SJH

II. Community Benefit

- A. Translating the values of SJH into action, continually improving the health and quality of life in the communities served
- B. Helping each local hospital identify and meet their local

community health needs

- C. Addressing overall needs in the SJH System Office through programs like the Community Investment Fund and the We Care Committee

III. Wellness Initiatives – A result of the 2007 CHNA, these initiatives were developed to create more healthy communities. This includes the Healthy Living initiatives.

- A. Individual Wellness, including a wellness and medical fitness center, supporting SJH employees' overall wellness efforts, and providing employees with pedometers to help them track their steps as part of their fitness efforts
- B. Group Wellness, focusing on medical and environmental conditions that threaten and diminish the health and welfare of individuals and their communities, creating chronic disease management and prevention programs
- C. Community/Entire Population Initiatives, especially Healthy for Life



Collecting and compiling the data for the overall St. Joseph Health system and for each individual hospital is an involved process, but one that SJH believes is very important as well. Each hospital is presented with its own data and results to help them identify their top five priorities and/or initiatives for each three-year period.

St. Mary Medical Center in Apple Valley, CA, and Mission Hospital in Mission Viejo, CA, both conducted their own

assessments through PRC so they could delve even deeper into their data with more targeted and detailed information.

Of course, there are many differences in the health needs within the various and varied communities – but there are some similarities, too. For example, people with lower levels of education tend to have no insurance, live below the poverty level and are generally worse off when it comes to their health and access to care.

SJH will conduct their overarching CHNAs every three years to determine trends and to make sure they're meeting the real needs of their communities.

Prosper concludes, "We have our overall 'global initiatives' and each hospital has its own initiatives, but of course we're all working together to improve the health of our communities, while staying true to our core values of dignity, service, excellence and justice." ●



The Health of America's Children

Assessing the health needs of children and adolescents in local communities is more important than ever before. In 2012, PRC administered the PRC National Child & Adolescent Health Survey to measure the top health issues for children in America. Hot topics such as childhood obesity, screen-time and physical activity level were analyzed, along with a robust set of measures, which included:

- Access to healthcare services, including insurance coverage and primary care utilization
- Modifiable health risks, including nutrition, physical activity and injury
- Physical and mental health status
- Special health needs and prevalence of select chronic conditions
- Behavioral concerns
- Personal safety, including neighborhood crime
- Health education and outreach
- Demographic breakdowns across all categories

Join PRC's experts **Jana Distefano**, MPH, and **Dustin Strickler**, MBA, as they share PRC's National Child & Adolescent Health Survey findings, including an analysis of U.S. children's health issues across age groups, gender, race and geographic regions.

"The Health of America's Children" is a no-obligation, free webinar for anyone interested in the health of children. To register, **scan the QR code** or visit <http://bit.ly/childhealthsurvey>

Join the Webinar

**Wednesday, December 12
1:00-1:45 p.m. (CST)**



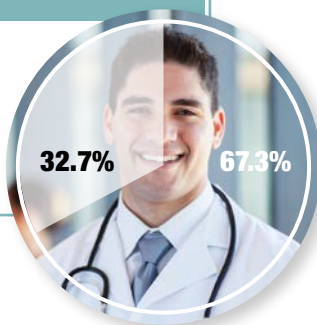
PRC National Community Health Survey

More than **80%** of Americans wear their seat belt when they drive or ride in a car



Did you know...

67.3% of Americans have visited a physician in the past year for a routine checkup



Every two years, PRC interviews 1,000 households across the nation to learn more about the health status, risk and needs of Americans. Since 1995, national survey data have given PRC clients a benchmark against which to compare their local findings, and have painted a vivid picture of health in our country.

This survey is based largely on the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System (BRFSS), but also includes items addressing gaps in indicator data relative to national health promotion, disease prevention and other health-related issues. The report focuses on data related to the following dimensions:

- Physical and Mental Health Status
- Chronic Disease
- Modifiable Health Risk Factors
- Primary Care Services
- Access to Healthcare Services
- Health Education and Promotion



If you'd like to see excerpts from the most recent national report, **scan the QR code** or visit <http://bit.ly/PRCcommhealth>

Professional Research Consultants, Inc.

See you in St. Louis!

the Association for
**Community Health Improvement
National Conference**

www.communityhlthconf.org

March 12-14 • 2013

PRC is a Platinum Sponsor of the 2013 Association for Community Health Improvement (ACHI) national conference! Join us March 12-14 in St. Louis as we connect with more than 400 community health, community benefit and population health professionals from across the country.

We'll have a booth in the exhibit hall, so be sure to stop by and say hello. Plus, we'll be handing out copies of our next *Community Health Connection* newsletter before it's in the mail!

Keys to Success

The responsibility of making a difference in the community simply cannot lie with one organization; multiple entities are essential for success. Although creating successful collaborations is often easier said than done, certain actions can be taken to ensure diverse individuals in a community are brought together.

Many hospital systems see collaboration as a way to conduct their Community Health Needs Assessments, as well as a way to work together on program development. By building successful collaborations, organizations can eliminate or lower duplication of services, while at the same time provide the most efficient use of limited resources. PRC's clients have proven that successful collaborations lead to positive outcomes. PRC has worked with a number of collaborative models between and among hospitals, health departments, foundations and community-based groups.

Essentially, collaborations are created when multiple agencies are brought together to achieve a goal. These partnerships not only instill trust and respect in the other individuals involved, they also create networks among public health organizations, hospitals and other nonprofits. The premise of collaboration is that if you bring together the appropriate people in constructive ways, they will in turn create visions and strategies for addressing the shared concerns of a community.

Ten key elements are crucial for successful community collaborations:

- 1. Good timing and clear need.** It would be a waste of time to organize a collaborative effort without the need; make sure there's a need within the community and that the timing is right.
- 2. Strong stakeholder groups.** These groups should be well-organized and willing to speak or act for those they represent.
- 3. Broad-based involvement.** Make sure to include a variety of participants from several sectors within the community.
- 4. Credibility and openness.** The decision-making process should be seen as fair, credible, open and meaningful.
- 5. Involvement of high-level, visible leaders.** Branching out from the previous element, collaborations will appear more credible if city council members, nonprofit leaders and healthcare organization leaders attend meetings or otherwise openly show their support.
- 6. Support or consent from established authorities.** Nonprofit leaders, public health leaders and hospital leadership should agree to implement the decisions of the collaboration.
- 7. Ability to overcome mistrust.** Trust must be established from the beginning of a collaborative effort and be carried through the process. This includes those involved with the collaboration, as well as those who are not involved but who are affected by the results.
- 8. Strong leadership within the process.** Leaders make an effort to keep all parties involved by acknowledging small successes, and helping negotiate and enforce group norms.
- 9. Interim successes.** Experiencing – and rewarding – success throughout the journey to achieving a goal helps create momentum within the collaborative.
- 10. A shift to broader concerns.** Collaborations allow people to see how change affects the entire community, rather than the needs of their particular population. ●



Frequently Asked Questions about IRC 501(r)(3)



As part of the Patient Protection and Affordable Care Act, nonprofit hospitals that wish to maintain their tax-exempt status and avoid additional penalties must conduct a Community Health Needs Assessment, as well as develop initiatives to impact the needs identified by the data. The federal mandates for CHNAs are codified under Internal Revenue Code, Section 501 (r)(3). Here are nine frequently asked questions to help you better understand the mandate. See below for a visual glance at the CHNA requirements and where PRC can help you fulfill the provisions.

Q: What hospitals does the CHNA requirement apply to?

A: All state-licensed hospitals, including hospitals in joint ventures and governmental hospitals, recognized under 501(c)(3). Hospitals seeking to gain or maintain status as Section 501(c)(3) charitable hospital organizations as described in Section 501 of the IRS Code of 1986 must comply with this requirement. This applies to all organizations

CHNA Requirements



Assess

Conduct Community Health Needs Assessment (CHNA)

PRC can help!



Strategize

Develop an Implementation Strategy for CHNA-Identified Issues



Prioritize

Review Data and Prioritize Health Needs

PRC can help!



Disseminate

Share CHNA Reports/Data with the Community
(e.g. HealthForecast.net®)

PRC can help!



Failure to meet the requirements can result in the loss of tax-exempt status.

CHNA and Implementation Strategy Timetable

Nonprofit hospitals must conduct a CHNA once every three years, with the first assessment completed by the end of the tax year beginning after March 23, 2012.

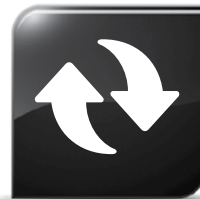
<i>Beginning of Tax Year:</i>	<i>CHNA Completed and Implementation Strategy Adopted by:</i>
April 1	March 31, 2013
May 1	April 30, 2013
June 1	May 31, 2013
July 1	June 30, 2013
August 1	July 31, 2013
September 1	August 31, 2013
October 1	September 30, 2013
November 1	October 31, 2013
December 1	November 30, 2013
January 1	December 31, 2013
February 1	January 31, 2014
March 1	February 28, 2014



Adopt

Create and Formally Adopt an Implementation Strategy Document

PRC can help!



Repeat

CHNA/Implementation Strategy Must Be Completed Every Three Years

PRC can help!



Submit

Attach Implementation Strategy to Form 990 Schedule H



Implement

Implement Planned Strategies for FY2012-FY2014

operating a facility which is required to be licensed or registered as a hospital, as well as any other organization which the Health & Human Services Secretary determines is principally functioning as a hospital, that wish to receive nonprofit status.

Q: Where can I read the entire PPACA Section 9007 mandate?

A: <http://www.ncsl.org/documents/health/ppaca-consolidated.pdf>. Section 9007 is found on pages 760-763.

Q: When is the deadline for conducting a Community Health Needs Assessment and developing/adopting an Implementation Strategy?

A: Hospitals are required to conduct a Community Health Needs Assessment every three years. The timetable on the previous page gives you a complete list of deadlines based on the beginning of your tax year.

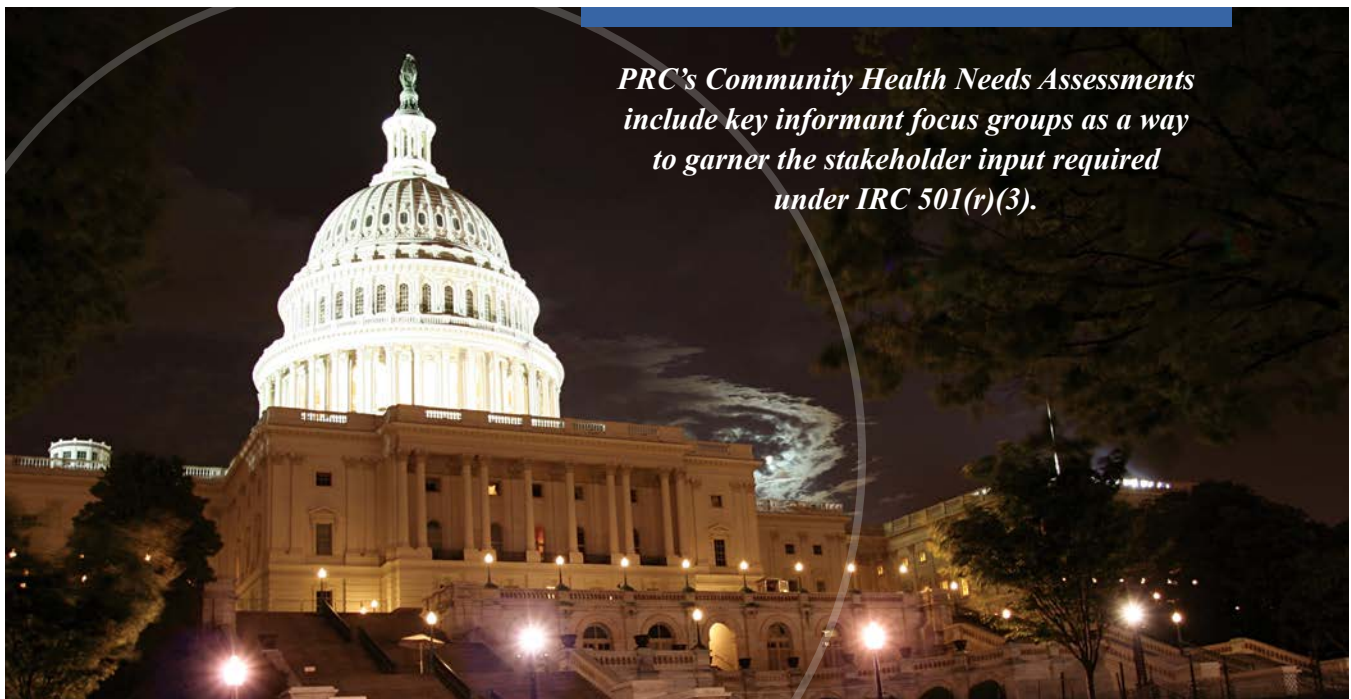
Q: Are there limitations as to how the research can be conducted?

A: There is no prescribed method or approach for conducting the Community Health Needs Assessment, nor any prescribed data indicators that must be included. However, the assessment must take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge or expertise in public health, and must be made widely available to the public.

In addition to a comprehensive survey and collection of secondary data elements, PRC's Community Health Needs Assessments also include key informant focus groups as a way to garner the stakeholder input required under IRC 501(r)(3).

Q: How can I ensure that my data is made widely available to the public?

A: The Community Health Needs Assessment report can be made available to the public via the internet, with a few guidelines, including: being posted on the hospital website or on another website with a direct URL to the report; the website must clearly inform viewers





PRC offers an interactive, online tool to its clients to make the Community Health Needs Assessment data widely available to the communities they reflect – HealthForecast.net®

that the document is available and provide instructions for downloading; the downloaded report must be an exact reproduction of the CHNA report (e.g., Adobe .pdf); no special computer hardware/software (other than freeware) can be required to access the report; and the report must be available until a subsequent CHNA report is released.

PRC offers an interactive, online tool to its clients to make the Community Health Needs Assessment data widely available to the communities they reflect. This tool, HealthForecast.net®, was designed to help hospitals, health systems, health departments, foundations, civic organizations and consumers promote community health and wellness by connecting people to information, ideas and resources.

Q: What is to be included in the Implementation Strategy?

A: Each hospital's Implementation Strategy must address community health needs that were identified in the Community Health Needs Assessment. Each hospital must include in its Implementation Strategy a description of how the organization is addressing the needs identified in the Community Health Needs Assessment, as well as a description of any such needs that are not being addressed and the reasons why such needs are not being addressed. PRC provides clients with an Implementation Strategy framework to help them begin this process.

Q: Can a healthcare system with multiple hospitals conduct only one assessment?

A: Organizations operating multiple hospitals must meet the requirements for each hospital and separate reporting for each hospital in a system is currently required. However, it is possible for one Community Health Needs Assessment to meet the needs



IRS Reviewing Tax-Exempt Hospitals

The IRS is reviewing community benefit activities at more than 3,000 tax-exempt hospitals to enforce federal statutes on Community Health Needs Assessments and annual community benefit as detailed in IRS Form 990 Schedule H.

The Affordable Care Act mandates that the IRS review hospitals' community benefits (including CHNA research) provided by hospitals at least once every three years. The reviews will be conducted in waves, with each hospital in the list of 3,377 being reviewed in one of three annual periods. The IRS is examining the hospitals' IRS Form 990, including Schedule H, as well as other public records.

Names of the hospitals undergoing review have not – and will not – receive notification. This review, which has been dubbed a “stealth review”, provides a couple of lessons for all tax-exempt hospitals:

1. It's important for hospitals to ensure they are complying with the tax law requirements for maintaining 501(c)(3) status.
2. Hospitals conducting their first Community Health Needs Assessment should be aware of the community benefit aspects for the Report and Implementation Strategy components of the requirements.

of multiple hospitals, provided that the assessment is conducted in such a way to provide statistically sound research and reporting for each hospital's market.

Additionally, PRC encourages hospitals to collaborate with other organizations in their community on both the assessment as well as ensuing initiatives. It's been our experience that communities whose health status is often most impacted are those that have coalitions formed by multiple hospitals, local health departments, foundations and/or community-based organizations.

Q: What happens if a hospital fails to meet these requirements?

A: In addition to potentially losing tax-exempt status, each hospital facility failing to meet the requirements will be penalized \$50,000 excise tax per year until the requirements are met.

Q: Are there other requirements?

A: Tax-exempt hospitals must develop and implement written financial assistance and emergency care policies, limit charges for patients who meet financial assistance criteria and meet new billing collection requirements. For more, see IRC 501(r)(4) through IRC 501(r)(7). ●

Foundation Helps Smaller Communities

Make Big Strides

Lincoln Parish, home of Louisiana Tech University and Grambling State University, is nestled in North Central Louisiana and is known as one of the most affluent and progressive parishes in Louisiana. (Note: While 48 of the 50 states are made up of counties, Alaska has 18 “boroughs” and Louisiana has 64 “parishes.”)

With about 25,000 people, Ruston – the largest city in Lincoln Parish – is the epitome of a college community, with all of the advantages and challenges of a transient, young population.

The Lincoln Health Foundation (LHF) is a private foundation funded by the profits from the 2007 sale of Lincoln General Hospital to Community Health Systems, and it is the Foundation's mission “to improve healthcare and outcomes for residents of Lincoln Parish.”

As part of the approval process for the Foundation's new organizational structure and purpose from a supporting foundation to a healthcare conversion foundation, the Louisiana Attorney General stipulated that proceeds from the sale of the hospital could only be used to improve the healthcare of residents in Lincoln Parish. This created urgency for LHF to determine and meet the needs of the Parish. So, in the fall of 2008, LHF partnered with PRC to conduct a Community Health Needs Assessment.

“This was a significant accomplishment for us,” says Lincoln Health Foundation CEO Norman Hanes. “Fortunately, we had heard about PRC from some other foundations in the area, so we knew who we wanted to do the work for us.”

The Lincoln Health Foundation used the results from the assessment to set a course and developed three major initiatives:

Healthier Beginnings, Healthier Living, and Healthier Outcomes & Improved Access to Healthcare.

Healthier Beginnings

“Our data showed a huge infant mortality rate here, which was quite surprising,” says Hanes. There was an annual average of 15.1 infant deaths per 1,000 live births in Lincoln Parish, a much higher rate than that of the entire state of Louisiana (9.7).

“No one knew what a big problem this was, but it appeared that the problem correlated to the number of unplanned and unwed teen pregnancies due to the large young population.” A total of 46.2% of Lincoln Parish births were to unmarried mothers, while 13.9% of births were to women under the age of 20.

Because of this high infant mortality rate found in their data, LHF began funding the Growing Great Kids™ program, a home-based parenting and early childhood outreach program, originally developed by Great Kids, Inc.

“We knew this program was very successful, especially in



Kentucky. It was a proven system, so we adopted it," explains Hanes.

The Growing Great Kids™ program is run by Life Choices of North Central Louisiana. Case and family workers meet with people in their homes to teach them about everything from prenatal care to nutrition and empathetic parenting.

In 2011, the first year the program was in place, 25 families benefited from it. This is the second year of using the program, and they are on track to help 40 families.

"While we don't have follow-up statistics to show our success rate, we think this has been a very successful program," says Hanes, "especially in conjunction with the Mentoring of Moms (MOMs) program, which is also run by Life Choices of North Central Louisiana."

MOMs matches volunteers with young at-risk mothers and mothers-to-be. The volunteers mentor these women to help guide them to positive outcomes – encouraging prenatal care, proper nutrition and more. Hanes says they're also starting to match male mentors to young fathers – so there's more involvement right from the start.

"There's still so much more to do in this area," he explains. "We're working on finding ways to educate young people on preventing unwed teen pregnancy in the first place, which also falls

under the Healthier Living initiative. It's a big undertaking."

One of their sources for ideas and information comes from First Things First®, an award-winning nonprofit organization based in Chattanooga, TN.

"We don't want to reinvent the wheel," explains Hanes. "We do the research to see who has had success in the areas we need to work on. Then, we can adopt or adapt these programs to fit our needs."

Healthier Living

Weight loss and better nutrition are the main focus of the Healthier Living initiative, which LHF is funding primarily through school-based education. They're also educating teachers about nutrition and providing incentives to be good role models for their students. That way, children are getting a more consistent message about how to lead healthier lives.

"It's all ongoing, but the school-based initiative really culminated just a few months ago, at the beginning of this school year," says Hanes. "The school menus throughout Lincoln Parish were completely renovated."

Schools are now offering healthier food options, monitoring portion sizes, providing nutrition education in cafeterias and

Dental Care Reduces Absenteeism



Through the Health Enterprise to Assist Lincoln's Students (HEALS) program, the Lincoln Health Foundation provides a \$100,000 grant for dental care in schools. Four dental providers conduct dental screenings for all third and sixth graders in Lincoln Parish, and then provide vouchers for those students who need treatment.

These dentists carve out hours of their days to work with this program, and school nurses arrange for the students to be transported to their offices to get screening and/or treatment. In 2010, HEALS provided screenings for 361 students, and found 168 students needing treatment.

Hanes says, "The school board noticed a marked reduction in absentee days after we started doing dental screenings and providing treatment vouchers. When students – especially those who wouldn't otherwise be able to visit a dentist on a regular basis – don't have to deal with pain or infection, they're at school. That's the goal of the program."



Foundation Uses Data to Carry Out Mission



The Lincoln Health Foundation was funded by the sale of Lincoln General Hospital to Community Health Systems in March of 2007. Net proceeds of approximately \$22 million are being used by the LHF to fulfill its mission of improving healthcare and access for residents of Lincoln Parish by facilitating health-related initiatives, programs and services that improve quality of life.

Each year, \$1.3 million to \$1.4 million is channeled into Lincoln Parish, with a population of about 47,000. The Foundation uses the data identified in their Community Health Needs Assessment to determine where their money will do the most good in their communities.

Hanes explains, "It's all based on data that identifies the issues. Otherwise, there would be no way to determine where our money would be best used."

reducing or removing fried foods – all while ensuring an appealing presentation.

The education doesn't stop at the schools, though. LHF is also working to educate parents about nutrition and physical activity, while increasing opportunities to get out and move. This includes funding scholarships for sports, developing playgrounds, and creating sidewalks and bike paths in neighborhoods throughout Lincoln Parish.

Healthier Outcomes & Improved Access to Healthcare Services

Within the parish, there is a big population with no health insurance (20% of adults aged 18 to 64), and people with Medicare often have to go as far as 30 miles to receive care. LHF funding helps take healthcare to the people with a mobile health clinic run by The Health Hut through Linking the Parish, Inc.

The Health Hut was the brainchild of Dr. Leonel Lacayo, who shared his passion for helping people without medical care. With the assistance of an LHF board member, Lacayo reviewed the Community Health Needs Assessment data to determine whether a program to help the uninsured could be created, and how it could be done.

The need was definitely there, so Lacayo and his wife, Lisa, came up with a solid plan to improve access to healthcare in Lincoln Parish with a mobile health clinic. They travel to different locations every day to provide screening and medical services, with more than 2,500 patients receiving care after just one year

of service.

"It's made a big impact within our Parish," Hanes says. "Dr. Lacayo was Rural Healthcare Provider of the Year, and Harvard Medical School recently invited him to be a presenter at a convention hosted by the Office of Minority Health at the U.S. Department of Health and Human Services."

Schools are also part of the overall plan to create a healthier community and improve access to healthcare services. Dental screenings (see sidebar) and mental health services are offered to students throughout the Lincoln Parish community. The screenings are funded through LHF's Health Enterprise to Assist Lincoln's Students (HEALS).

HEALS also funds a mental health counselor to help troubled students. The counselor gets to the root of the student's problems and helps them obtain immediate access to mental health assistance. HEALS pays the counselor's salary, purchases supplies and assessment instruments, and even provides professional development opportunities.

Moving Forward

Hanes says they have seen evidence that every one of these programs has made a real impact on Lincoln Parish. "We work with school systems and other organizations, so we do know there is a reduction in absenteeism, behavioral issues and ER visits. We've deployed \$2.5 million so far, and we're seeing results."

The LHF is planning to do a follow-up assessment within the next few years so they have the data to support their efforts. A new assessment will also provide the next set of data to let them know where future grant money should be spent. ●

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PPACA CHNA REQUIREMENTS



Have Questions?

Do you know what needs to be done to make sure your hospital maintains its tax-exempt status?
Look inside for the most frequently asked questions as they relate to the Community Health Needs Assessment requirements of the Patient Protection and Affordable Care Act.

We Have Answers.

Professional Research Consultants, Inc.