

Rush Foundation Hospital

CHNA Report

November 2019

Approved by
Rush Foundation Hospital Board of Directors
November 18, 2019



HORNELLP.COM/Healthcare



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EXECUTIVE SUMMARY

The purpose of this Community Health Needs Assessment (CHNA) report is to provide Rush Foundation Hospital with a functioning tool to guide the hospital as it works to improve the health of the community it serves. In addition, the report meets the guidelines of the Internal Revenue Service.

The results of the CHNA will guide the development of Rush Foundation Hospital's community health improvement initiatives and implementation strategies. This is a report that may be used by many of the hospital's collaborative partners in the community.

The assessment was performed, and the implementation strategies were created by the Community Health Needs Assessment Steering Committee with assistance from HORNE LLP. The assessment was conducted in October 2019.

The main input was provided by previous patients, employees and community representatives. An opportunity to offer input was made available to the entire community through word of mouth, plus a published and publicly available survey. Additional information came from public databases, reports, and publications by state and national agencies.

The response section of this report describes how the hospital and its collaborative partners worked together to address identified health needs in our community during the past three years. In this report, we also discuss the health priorities that we will focus on over the next three years. The CHNA report is available on the hospital's website www.rushhealthsystems.org, or a printed copy may be obtained from the hospital's administrative office.

We sincerely appreciate the opportunity to continue to be a part of this community. We look forward to working with you to improve the overall health of those we serve in Lauderdale County.

Chuck Reece, Managing Director/Board of Directors
Rush Health Systems

ABOUT THE HOSPITAL

RUSH FOUNDATION HOSPITAL

Rush Foundation Hospital is a 215-bed tertiary care facility located in Meridian, MS in Lauderdale County and is the flagship hospital for Rush Health Systems. With a 104-year legacy of medical innovation, quality care and service to others, Rush Health Systems is comprised of 7 hospitals and more than 30 clinics. With 250 staff and contracted physicians and 95 advanced-practice providers, Rush is the largest non-governmental employer in the region. In addition to Rush Foundation Hospital, Rush Health Systems also includes The Specialty Hospital of Meridian, a 49-bed long-term, acute care hospital; Medical Foundation, Inc., a physician management company; Rush Medical Group, a multi-specialty physician practice; and five Critical Access Hospitals: Laird Hospital, Union, MS; H.C. Watkins Memorial Hospital, Quitman, MS; Scott Regional Hospital, Morton, MS; John C. Stennis Memorial Hospital, DeKalb, MS, and Choctaw General Hospital in Butler, AL.

While the city of Meridian's population is approximately 37,000 people, Rush Foundation Hospital and its sister facilities in Rush Health Systems serve a population of 232,900 people in a 45-mile radius and 526,500 residents in a 65-mile radius. Nine counties in East Mississippi and three counties in West Alabama, most of which are primarily rural counties, make up the majority of the service region.

Rush-affiliated physicians specialize in diverse areas such as Anesthesiology, Cardiology, Critical Care, Dermatology, Ear, Nose and Throat/Otolaryngology, Emergency Medicine, Endovascular Surgery, Family Medicine, Gastroenterology, General Surgery, Hospitalists, Hyperbaric, Internal Medicine, Neonatology, Neurology, Obstetrics and Gynecology, Orthopaedics, Orthopaedic Spine Surgery, Pain Management, Pathology, Radiology, Sleep Medicine, Sports Medicine, Urology, Vascular Surgery, Venous and Lymphatic Medicine and Wound Care.

Rush Foundation Hospital provides specialty care and services which include: a Level III Trauma center in the 24-hour a day physician-staffed emergency department; the Neonatal Intensive Care Unit, a 12-bed unit that offers a special quality of care for premature and high-risk infants; the Family Birth Center; Diabetes Management Center at Rush; GI Lab; Joint Replacement Center; Pain Treatment Center; Sleep Centers; Surgical Robotics; The Vein Center at Rush; Senior Care – Intensive Outpatient Program. In addition, Rush Rehabilitation Services, housed in a 17,632-square-foot facility, earned recognition from Focus on Therapeutic Outcomes (FOTO), a nationally recognized management system. Rush Rehabilitation Services offers services which include: Physical Therapy, Occupational Therapy, Speech Therapy, Aquatic Therapy and a Reading Clinic; and the Rush Heart Institute, located in the hospital, provides cardiac care including prevention, detection, treatment and an array of non-invasive testing including: treadmills, nuclear medicine, echocardiography, arrhythmia detection and pacemaker evaluation.

Rush Foundation Hospital is designated as a Blue Distinction+ Center of Excellence for Knee and Hip Replacement by Blue Cross & Blue Shield of Mississippi.

In 2014, Rush Foundation Hospital was dually accredited by the DNV. Rush Foundation Hospital provides quality medical care regardless of race, creed, sex, national origin, handicap or age.

Additionally, in 2013 Rush Foundation Hospital was certified as an ISO 9001:2008 Quality Management Systems compliant organization. This certification is accredited by DNV Certification Inc. of Houston TX. Rush Foundation Hospital is one of only three hospitals in the state and one of only fifty in the nation to achieve this distinction.

Along with being the region's largest employer and a major economic stimulus by virtue of its payroll, Rush Foundation Hospital and its sister facilities provide many benefits to the broader community in the areas of civic involvement and giving; mentoring and program support to nursing and allied health programs at Meridian Community College, East Mississippi Community College, Mississippi State University/Meridian Branch and the University of West Alabama; a strong and generous program of community health education, charitable donations, school and sports physicals, industrial health screenings and wellness events, volunteer hours and pastoral care.

Additionally in 2018, Rush Foundation Hospital used its social media platform to promote health awareness and education programs, hosted civic and governmental leaders at the hospital, participated in county and region-wide disaster training and awareness, and disseminated public health messages and information to the employee and provider base and to the patients of their facilities through educational outreach. Several of the larger-scale examples of these programs which occurred during 2018 include the sponsorship of health education seminars, diabetes education, skin cancer education and screenings, breast health awareness, blood drives and media placements of health information provided by Rush-affiliated physicians (both paid media and by using the health systems' social media platforms). Additionally, Rush Foundation Hospital provided ongoing prenatal and breastfeeding classes (Rush began offering complimentary online childbirth education to its patients in 2016, further extending the reach of important prenatal and postnatal education) as well as providing specialized community education programs for women's health, heart health, breast health, gastroenterological health, sleep disorders, general health fairs, back pain, wound and ostomy care and prostate screenings.

Rush Foundation Hospital also continues to provide and promote Web-based access for patients to obtain certain health information in keeping with fulfillment of the Meaningful Use guidelines.

Rush is also a founding sponsor of the State Games of Mississippi, which in 2018 brought more than 6,000 amateur athletes from around the state to Meridian for competition in forty sporting events. The hospital employs certified athletic trainers to provide the area high schools with basic healthcare and instructional services at no cost on a daily basis during practice and training as well as at in-season competitions and during Saturday morning clinics.

THE COMMUNITY HEALTH NEEDS ASSESSMENT

The Community Health Needs Assessment (CHNA) defines opportunities for healthcare 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 Lauderdale County. 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 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 identified in 2016. Hopefully, you will find ways you can personally improve your own health and contribute to creating a healthier community.

DATA COLLECTION

Primary and secondary data was gathered, reviewed, and analyzed so that 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 and from sources other than the assessment team; information that has already been collected, collated, and analyzed; provides an accurate look at the overall status of the community

Secondary Data Sources

- | | |
|--|--|
| • The United States Census Bureau | • Rush Foundation Hospital Medical Records Department |
| • US Department of Health & Human Services | • Mississippi State Department of Health |
| • Centers for Disease Control and Prevention | • Mississippi Center for Obesity Research |
| • American Heart Association | • University of Mississippi Medical Center |
| • Trust for America's Health | • Mississippi State Department of Health, Office of Health Data and Research |

ABOUT THE COMMUNITY

DEMOGRAPHICS

SERVICE AREA

Primary: Lauderdale County

ABOUT THE SERVICE AREA

Lauderdale County is a county located on the eastern border of the state, adjacent to the state of Alabama. The county seat is Meridian. The county was named for Colonel James Lauderdale, and is included in the Meridian, Mississippi Micropolitan Statistical Area.

The county has a total area of 715 square miles, of which 704 square miles (or 98.4%) is land and 12 square miles (or 1.6%) is water. *

PATIENT ORIGIN

Approximately 42.38% of inpatients seen over the past twelve months reside in Lauderdale County, Mississippi. An additional 32.99% of those patients reside in the adjacent Mississippi counties of Neshoba, Clarke, Newton, Kemper, and Jasper. The percentage of inpatients in these counties is 10.5%, 8.57%, 8.39%, 4.1%, and 1.43%. An additional 14.01% of total inpatients seen reside in the adjacent Alabama counties of Choctaw and Sumter with the following percentage of inpatients, 8.02% and 5.99%. Almost 33.84% of the patient population resides in Meridian. The remaining 10.62% of the patient population represents a variety of locations mostly outside of the primary and secondary service areas.



*LAUDERDALE COUNTY, MISSISSIPPI (2017 Census Publications State and County Profiles Mississippi. USDA Census of Agriculture, 2017).

POPULATION AND RACIAL MIX DATA*

LAUDERDALE COUNTY		
Population	78,221	
Racial Mix	White	41,504
	African American	33,465
	Hispanic	1,751
	Other	1,501
Median Household Income	\$41,340	



* Sources: U.S. Census Bureau, 2017 estimates and U.S. Census Bureau, 2013-2017 American Community Survey

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 data collected from the survey was part of the input used by the Steering Committee in establishing priorities.



Rush Health Systems

Rush Health Systems invites you to participate in a survey about the general health of the communities we serve. The purpose of this short survey is to provide community data for use in the development of the Community Health Needs Assessment report. Please follow this link >>>

<https://linktr.ee/rushhealthsystems> and click on the survey that corresponds with the hospital in your community.



TELL US YOUR HEALTH NEEDS.

Rush Health Systems invites you to participate in our
**Community Health Needs Assessment
(CHNA) survey.**



We will use your response to meet the
health needs of the communities we serve.

rushhealthsystems.org

Community Health Needs Assessment - Rush Foundation Hospital

Rush Foundation Hospital is conducting a Community Health Needs Assessment and your input is very important to us. Help us learn more about the health needs in our community by filling out this survey. Thanks for your input.

1. Have you used any health services offered at Rush Foundation Hospital in the past 12 months?

2. Do you or a member of your family live with a chronic disease? If so, what disease?

3. Where do you go when you are seeking information or education on health related topics?

4. If you could name a health or wellness program that would benefit your health or your family's health, what would it be?

5. Is there a health or wellness need in Lauderdale County that you are aware of?

6. Have you participated in any of Rush Foundation Hospital's wellness events (in-services, health fairs, lunch & learns, etc.)?

7. Please list any other information or comments that 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 hospital's administrator developed a 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

Beth Stokes, Administrator

Melissa Newell, ED Director

Ashlyn Palmer, Marketing

Fabrizio Salazar, Regional Health Educator, Mississippi Department of Health

Pamela Davis-Thomas, Department of Health

Stephanie Wilkerson, Nursery/NICU

COMMUNITY FOCUS GROUP

A community focus group was held at Rush Foundation Hospital on Wednesday, November 6, 2019. 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 healthcare consultants from HORNE LLP 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.

PARTICIPANTS IN THE COMMUNITY FORUM

Beth Stokes – Administrator
Justin Anders – Business Owner, UPS Store
Sheila Dikes – The Medical Store
Fannie Johnson – Meridian City Council
Melissa Newell – ED Director
Ashlyn Palmer – Marketing
Byron Salazar – Regional Health Educator, Mississippi Department of Health
Dr. Angel Savage – Mississippi State University
Sherry Shelby – Lauderdale County Schools, District Head Nurse
Charrisa Shirley – Home Instead Senior Care
Lisa Sollie – Mississippi State University
Pamela Davis-Thomas – Department of Health
Mark Wiggins – The Medical Store
Stephanie Wilkerson – Nursery/NICU
Andrea Williams – Lauderdale County School System
Derrick Mason – Consultant, HORNE LLP
Barry Plunkett – Consultant, HORNE LLP

INVITED BUT UNABLE TO ATTEND

The hospital made a deliberate effort to include in the Community Focus Group a diverse cross section of the community served. Those who were unable to attend the meeting on November 6, were made aware of the purpose of the gathering and the importance of the input from the businesses, civic groups, or population segments they represent. Open dialogue remains fluid with the hospital's administration and the Focus Group members.

Percy Bland – Mayor of Meridian
Fannie Johnson – Meridian City Council
Brittney Mosley – Lauderdale Community Health Director
Cathy Raley – Northcrest Baptist Church Senior Adult Ministry Director



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.

Federal and state agencies, membership organizations, and foundations are working to reduce these disparities and improve the health and overall well-being of rural Americans. Some organizations provide funding, information, and technical assistance to be used at the state, regional, and local level, while others work with policymakers to help them understand the issues affecting population health and healthcare in rural America.

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, and chronic conditions.

ACCESS TO HEALTHCARE

Rural populations can experience many barriers to healthcare access, which can contribute to health disparities. A 2019 *JAMA Internal Medicine* article, “Association of Primary Care Physician Supply with Population Mortality in the United States, 2005-2015,” found lower mortality was associated with an increase of 10 primary care physicians per 100,000 population. The following factors create challenges or barriers to accessing healthcare services for rural Americans:

- There are higher rates of uninsured individuals residing in rural or nonmetro counties compared to their counterparts in urban or metro counties, as reported by a 2018 CDC report “Health, United States, 2017: With Special Feature on Mortality.”
- Healthcare workforce shortages are prevalent throughout rural America. The 2014 National Center for Health Workforce Analysis report, “Distribution of U.S. Health Care Providers Residing in Rural and Urban Areas,” found a greater representation of workers with less education and training living in rural areas and highlights data showing less than 8% of all physicians and surgeons choose to practice in rural settings.
- Specialty and subspecialty healthcare services are less likely to be available in rural areas and are less likely to include specialized and highly sophisticated or high-intensity care. This exacerbates problems for rural patients seeking specialized care who are faced with traveling significant distances for treatment.
- Reliable transportation to care can also be a barrier for rural residents due to long distances, poor road conditions, and the limited availability of public transportation options in rural areas. For more information on rural transportation programs and the impact on health of not having transport available in rural communities, see RHIhub's Transportation to Support Rural Healthcare topic guide.

- For additional information regarding healthcare access in rural areas and other barriers rural populations face related to access to care, see RHIhub's "Healthcare Access in Rural Communities" topic guide."

SOCIOECONOMIC STATUS

According to a 2014 Kaiser Commission on Medicaid and the Uninsured issue brief, "The Affordable Care Act and Insurance Coverage in Rural Areas," rural populations have higher rates of low to moderate income, are less likely to have employer-sponsored health insurance coverage and are more likely to be a beneficiary of Medicaid or another form of public health insurance. The brief found that rural residents are more likely to be unemployed, have less post-secondary education, and have lower median household incomes compared to urban residents.

HEALTH BEHAVIORS

Whether or not populations adopt positive health behaviors can have an impact on the rates of disparities in their health status and mortality. A 2017 CDC MMWR, "Health-Related Behaviors by Urban-Rural County Classification — United States, 2013," examined the prevalence of 5 key health-related behaviors by urban-rural status. Urban residents were more likely to report 4 or 5 of the positive health behaviors.

With all-cause mortality rates higher in rural areas, it is no surprise that mortality related to certain causes are also higher in rural areas. The table below compares several cause-specific mortality rates for rural and urban counties.

**Age-Adjusted Death Rates for the Five Leading Causes of Death per 100,000
Population: United States, 2014**

Cause of Death	Nonmetro Areas	Metro Areas
Heart Disease	193.5	161.7
Cancer	176.2	158.3
Unintentional injury	54.3	38.2
Chronic lower respiratory disease	54.3	38.0
Stroke	41.5	35.4

Source: Leading Causes of Death in Nonmetropolitan and Metropolitan Areas — United States, 1999–2014, [Supplemental Tables](#), *Morbidity and Mortality Weekly Report*, 66(1), 1-8, January 2017

THE UNHEALTHIEST STATE IN THE UNITED STATES

A list of the top ten unhealthiest states was created. It is based on data compiled by the American Public Health Association and the United Health Foundation, which rank U.S. states on their per-capita rates of obesity, child poverty, smoking, cancer-related deaths, cardiovascular disease, and other risk factors. Read on to see how your state ranks.

MISSISSIPPI IS NUMBER ONE

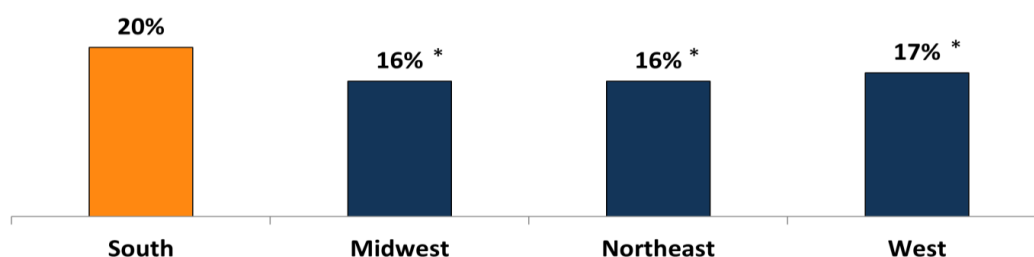
Unfortunately, that is not a ranking that we as a state can be proud. Along with having among the highest rates of cardiovascular disease, smoking, and obesity in America, the Magnolia State unfortunately touts the nation's largest percentage (25 percent) of youths living in poverty. All of these factors combined to put Mississippi at the number-one spot fighting an uphill battle against obesity, cancer, and cardiovascular-related deaths.

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.



Figure 4

Percent of Adults Reporting Fair or Poor Health Status by Region, 2014



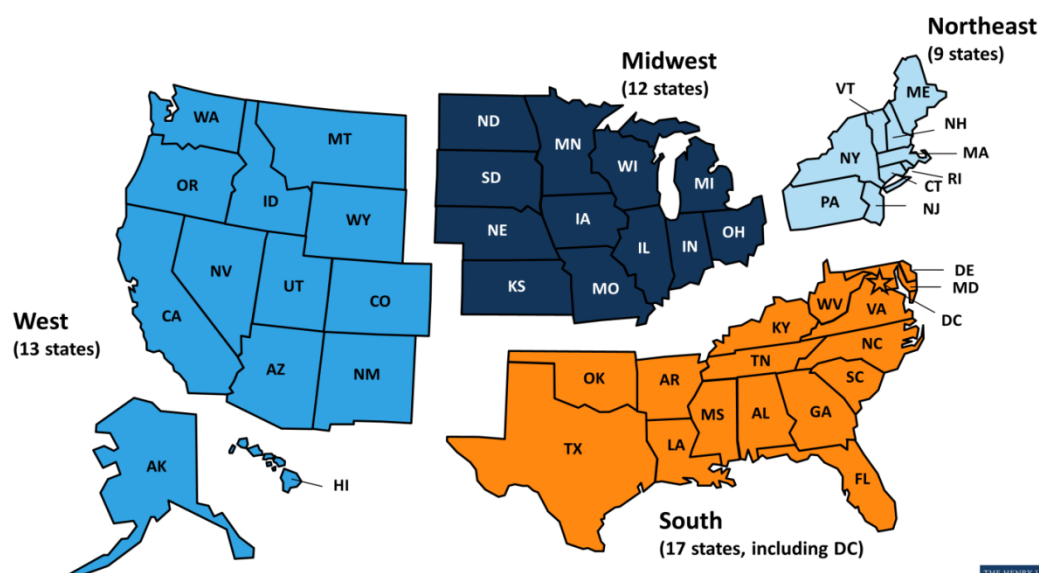
* Indicates a statistically significant difference from the South at $p < .05$ level.

Source: KCMU analysis of the Centers for Disease Control and Prevention (CDC)'s Behavioral Risk Factor Surveillance System (BRFSS) 2014 Survey Results.



Figure 1

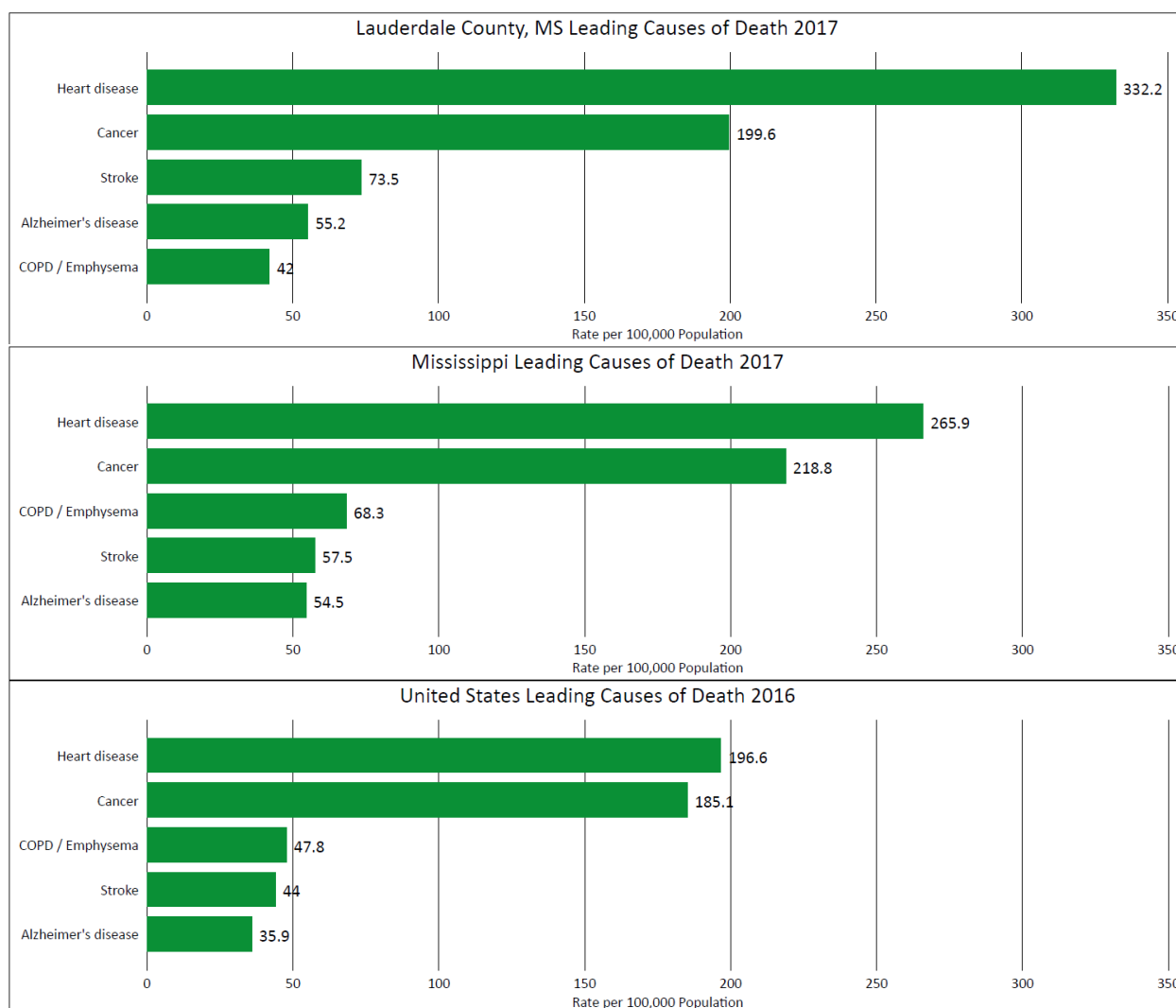
Census Regions and Divisions of the United States



Source: http://www2.census.gov/geo/pdfs/maps-data/maps/reference/us_regdiv.pdf

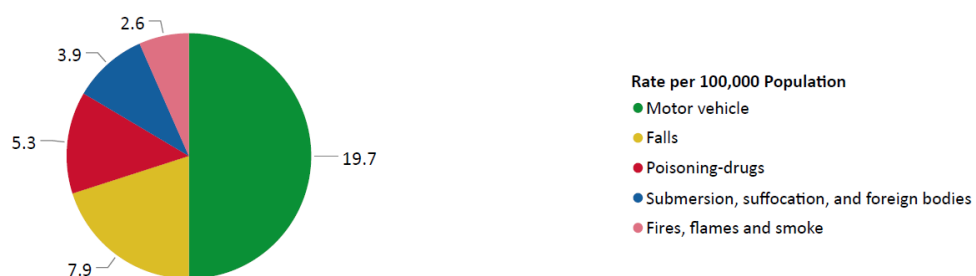


CAUSES OF DEATH

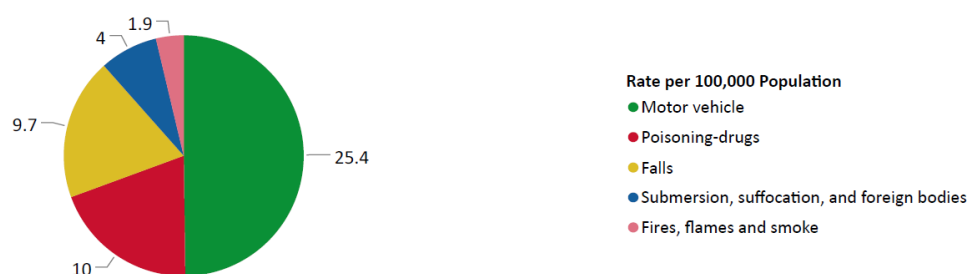


ACCIDENTAL DEATHS

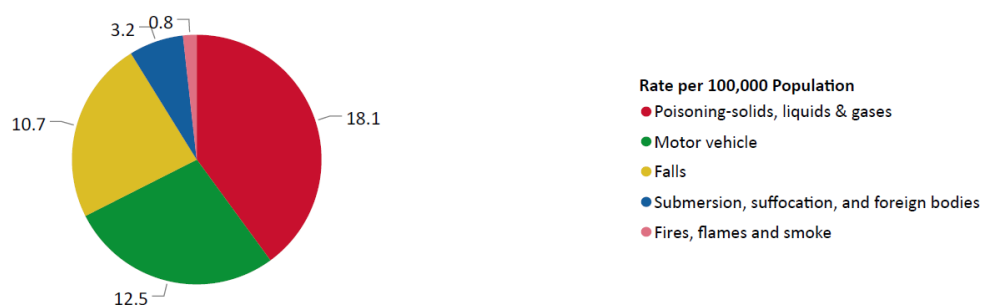
Lauderdale County, MS Top Accidental Deaths 2017



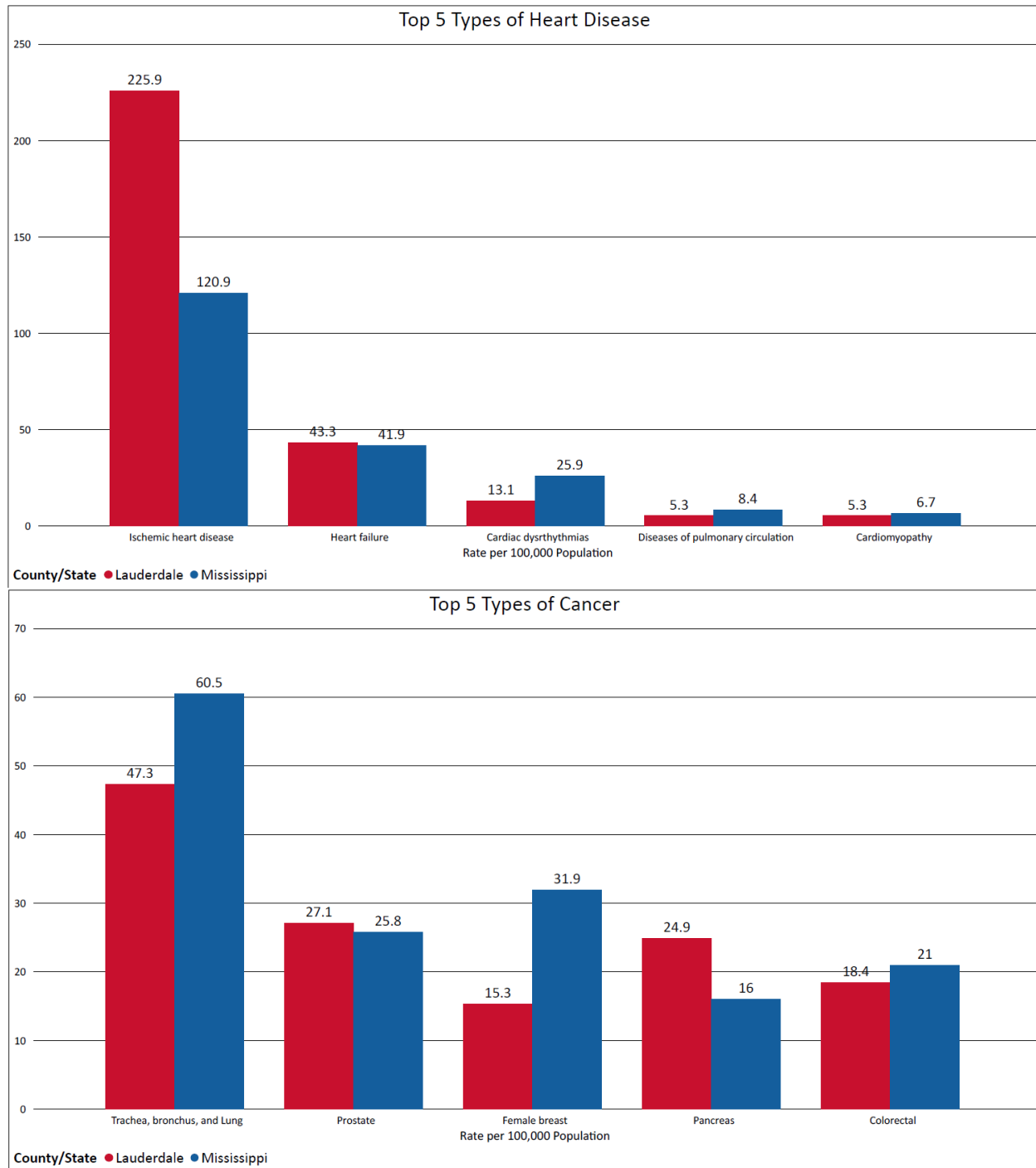
Mississippi Top 5 Accidental Deaths 2017



United States Top 5 Accidental Deaths 2016



HEART AND CANCER STATISTICS



2016 CHNA STRATEGIC ACTION RESPONSES

INITIATIVE 1: LIFESTYLE IMPROVEMENT AND CONTINUING DIALOGUE WITH COMMUNITY

Keeping its commitment to the community, Rush Foundation Hospital provided free care and subsidized care within existing resources where the need for such care exists. Based on the input from the community during our Community Health Needs Assessment (CHNA) in 2016, the hospital looked for ways to improve the health of its community through education, screenings and wellness activities that are offered free of charge. These programs are made available to the general public, but special attention is paid to reaching the marginalized populations.

From 2016-2019, Rush Foundation Hospital continued its participation in the 340B drug program designed to help patients, particularly those who do not have prescription drug coverage under their insurance programs or who are uninsured, receive significant discounts on prescription medications.



Rush Foundation Hospital and its sister facilities provided many benefits to the broader community in the areas of civic involvement and giving; mentoring and program support to nursing and allied health programs at Meridian Community College, East Mississippi Community College, Mississippi State University Meridian Branch and The University of West Alabama; a strong and generous program of community health education, charitable donations, school and sports physicals, industrial health screenings, wellness events, volunteer hours and pastoral care.

In 2017, Rush expanded its social media platform to include Instagram and Twitter. Rush used these platforms to promote health awareness and education programs including weekly health tips from Rush physicians. Additionally, Rush hosted civic and governmental leaders at the hospital, participated in county and region-wide disaster training and awareness, and disseminated public health messages and information to the employee and provider base and to the patients of their facilities through educational outreach. Several of the larger-scale examples of these programs which occurred in the past three years include the sponsorship of health education seminars especially for women, vein screenings, diabetes education and foot screening, skin cancer education

and screenings, breast health awareness, blood drives and media placements of health information provided by Rush-affiliated physicians.

Rush Foundation Hospital provided ongoing prenatal and breastfeeding classes on a monthly basis. In 2019, Rush Foundation Hospital launched East MS Baby Café in Meridian and Philadelphia. Baby Café is a drop in-in center offering breastfeeding support and assistance from our lactation consultant and certified lactation counselors. Rush continued to provide ongoing specialized community education programs for women's health, cardiovascular disease, sleep disorders, general health fairs and prostate screenings. Rush Foundation Hospital also continued to provide and promote web-based access for patients to obtain certain health information in keeping with fulfillment of the Meaningful Use guidelines.

INITIATIVE 2: HEALTHIER LIFESTYLES FOR YOUTH

Healthier lifestyles for youth was a major initiative for Rush the past three years. Rush-affiliated physicians planned and organized quarterly events for the children at Hope Village for Children, an organization founded by Sela Ward that provides emergency shelter and long-term therapeutic residential facilities for children who have been removed from his or her primary caregiver's custody by the Mississippi Department of Human Services due to abuse, neglect or abandonment. Rush physicians partnered with EC HealthNet Family Medicine Residency Program as well as local dental offices to provide seasonal health information via a fun and interactive educational event.

The hospital employed certified athletic trainers who provided the area high schools with basic healthcare and instructional services at no cost on a daily basis during practice and training as well as in-season competitions and during Saturday morning sports injury clinics. Rush is also a founding sponsor of the State Games of Mississippi, which in 2019 brought amateur athletes from around the state to Meridian for competition in forty different sporting events.



INITIATIVE 3: DISEASE MANAGEMENT

Diabetes management and education has also been a major focus for Rush Foundation Hospital. In October 2017, Rush opened the Diabetes Management Center at Rush. Led by Nurse Practitioner, Lara King, the Diabetes Management Center at Rush provides innovative treatment options, education and diabetic foot care. In addition, the Diabetes Educator at Rush Foundation Hospital participated in a number of health fairs where she handed out educational information. She also hosted a monthly diabetes support group for members of the community at no cost.

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, and lifestyle improvement.

Hypertension, heart disease, diabetes, weight loss/obesity and nutrition were all health needs identified by both the community members and the healthcare professionals. Members saw a need for increased education and preventive care in order to eliminate the path to chronic disease. There was much discussion about creating a more nurturing and healthful environment for the young people in the area, especially those who come from low income households. In addition, there was much discussion about the mental health challenges that the community faces. It is not only a health issue but a social and economic issue that must be addressed as a community, not just by the hospital. However, the hospital will continue to share the expressed concerns with the appropriate agencies and civic officials.

Prevention is very 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 socio-economic groups.

PRIORITIZATION

The Steering Committee understood the facts the primary and secondary data communicated in reference to the health of the citizens of the primary focus area of Lauderdale County.



IMPLEMENTATION PLANS

To be successful in creating a true sense of health in our community, it will be necessary to have collaborative partnerships which will bring together all of the care providers, the citizens, governments, plus business and industry, around an effective plan. Many needs have been identified through this process. Rush Foundation Hospital is proud to have been the catalyst in this effort. However, to address some of the needs identified will require expertise and financial resources far beyond what the local community hospital can provide by itself.

Many of the lifestyle habits negatively impact the overall health of our community and are major contributors to several of the leading causes of death in our service area. Rush Foundation Hospital has identified three significant initiatives it will undertake over the next three years. Each of these initiatives has multiple components. These collaborative projects should help improve the health and overall quality of life in our community. Each project is described in detail in the following section of this report.

There are other health and wellness opportunities identified during the research portion of the CHNA. These possibilities will be considered as we develop our strategic action plans over the next three years.



2019 CHNA STRATEGIC ACTION INITIATIVES

Over the next three years, Rush Foundation Hospital, in concert with its many community partners will focus its energy in these three areas:

INITIATIVE 1: PROSTATE HEALTH

Rush Foundation Hospital will create a systematic approach to improving awareness of prostate cancer with a major emphasis during Prostate Cancer Awareness Month by providing the following:

- Community service prostate screenings
- Community education with an emphasis on Benign Prostatic Hyperplasia (BPH) and Prostate Cancer

INITIATIVE 2: HEART HEALTH

Because of the many chronic illnesses that shorten and negatively impact our lives in Lauderdale County, Rush Foundation Hospital will endeavor to encourage the community to improve our Southern Lifestyle in an effort to eliminate many of its unhealthy characteristics.

LIFESTYLE IMPROVEMENT

- Community education
- Promote physical activity and exercise
- Health screenings
- Nutritional education
- Awareness of STEMI program
- Community Education regarding lifestyle and health consequences

INITIATIVE 3: LUNG DISEASE

With cancer being the number two killer in Lauderdale County and trachea, bronchus, and lung cancer leading the list of cancers in our service area, Rush Foundation Hospital will concentrate on reducing the number of citizens in our area who are impacted by these diseases.

EMPHASIS ON COPD, SMOKING AND VAPING

- Educate youth and parents about dangers of vaping – partner with school system
- Smoking cessation education

THANK YOU

This comprehensive assessment will allow us to better understand the needs and concerns of our community. Rush Foundation Hospital is proud to be part of the Rush Health System where we truly believe we are “our brother’s keeper.” As always, through this commitment to compassionate and mission-focused healthcare, we are honored to work closely with our collaborative partners in our community to provide outstanding healthcare and create a healthier world for the residents of Lauderdale County and the surrounding area.

Thanks to each of you who provided valuable insight into this report. Your participation in the data gathering, discussions and decision-making process helped make this a true community effort which will better serve all segments of our population.

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