



CHNA Implementation Strategy

Plan of Action to address needs identified through the 2015 CHNA according to this prioritized list of needs:

1. Dialysis – Contact DaVita Dialysis to discuss the feasibility of implementing an outpatient hemodialysis center in Nashville during fiscal year 2016. Since dialysis was considered the top priority on the CHNA, DaVita was contacted, as outlined in CHNA's Section G: Plan of Action, during the summer months by the CEO regarding this need. The follow-up to these conversations was reported to the HMH Board of Directors in the September 2015 CEO Board Report.

Unfortunately, after reviewing the data on patient volumes from our service area who are currently receiving treatment at a DaVita facility in their other locations, Andrea McCarther, DaVita's representative for this region, informed me there are two reasons why DaVita could not open an outpatient facility in Nashville. One, there is not a physician who is willing to travel to Nashville to meet the requirements for a medical director and two, the patient volume would be a redistribution of their existing market share and drive up costs unnecessarily to add a new location. If for some reason, the Hope or Texarkana facilities experienced an increase in demand requiring additional capacity and a physician becomes available to serve as the medical director in Nashville, DaVita would reconsider the request.

DaVita is the only provider of dialysis services in the southwest Arkansas region and since their company is not able to operate a dialysis unit in Nashville, Arkansas for the reasons listed above, HMH is unable to meet this community need due to lack of resources.

Goal Not Met
2. Clinical Psychologist/Psychiatrist – Recruit a clinical psychologist or psychiatrist for a satellite clinic in Nashville to address behavioral health needs by 4th quarter of fiscal year 2016.

Goal will be deferred to 2017 due to the expense to implement a Hospitalist Program.
3. Long Range IP Behavioral Health (PHS) Research – Contact Pioneer Health Systems to assist with research on feasibility for developing an IP Behavioral Health program in Nashville. Given the expected cost to construct a five bed IP Behavioral Health Nursing Unit, completed financial projections should be reviewed with Welch, Couch and Company, CPAs by 3rd quarter of fiscal year 2016.

CEO and CFO met with representative from Pioneer Health to discuss long range plan for inpatient geriatric behavioral health. Critical Access Hospitals are allowed to construct up to ten licensed beds for a distinct part service such as inpatient rehab and inpatient psych unit. Arkansas has a CON (certificate of need) process to apply for the addition of a distinct part unit. This inpatient program requires a full-time psychiatrist. In addition to the construction of licensed beds, specific support space is required for the unit. Determining the number of licensed beds required to operate cost effectively is the next step.

4. Dermatology – Recruit a dermatologist for a satellite clinic in the new medical office building during the 1st quarter of fiscal year 2016.
Dr. Martin Johnson began his satellite clinic in Nashville August 4, 2015 and plans to schedule patients two days a month and may expand his coverage if needed.
Goal Met
5. Pain Clinic – Explore the options of recruiting a Pain Specialist to come to the specialty clinic by 3rd quarter of fiscal year 2016.
Dr. Michael Wages with Precision Spine Care is scheduled to attend the February Medical Staff meeting to discuss pain management needs in Nashville and the services he provides to determine if it is necessary to have a satellite clinic or if patients could be directly referred to his clinic in Texarkana.
6. Allergist/Allergy Clinic – Research the feasibility of providing an allergy testing and treatment clinic by the end of 2nd quarter of fiscal year 2016.
7. Translation Services – Explore options to implement upgraded translation services to help improve patient satisfaction and patient engagement with the Hispanic population by the end of 1st quarter of fiscal year 2016.
HMH has contracted with Pacific Interpreters, a visual interpreter service utilizes an iPad device to facilitate visual interpretation which improves patient satisfaction, patient engagement, patient confidence, and trust in health care personnel. This service provides HMH access to over 240 languages. Their interpreters are certified in health care translation. This service was implemented October 2015.
Goal Met
8. Strategic Marketing Plan
 - a. Community Town Hall Meetings – Implement bi-annual meetings at the Carter Day Center to update the community of the “State of the Hospital”.
On-going
The Carter Day Center has been reserved to conduct a community meeting on July 12, 2016 and October 4, 2016.
 - b. Expanding D&Y Classes – Research the ability to offer night/evening classes by end of 2nd quarter of fiscal year 2016.
 - c. Awareness – Continue marketing our services through billboard, direct mail campaigns, health fairs, Engage, restaurant commercials, and community directory. On-going
9. Walk-in Clinic/After Hours – Researching the possibility, with the addition of two more employed physicians, to offer extended clinic hours to accommodate the non-emergent patients by end of 4th quarter of fiscal year 2016.
- 10 Genetic Testing Research – Research the feasibility of Genetic Testing during 1st quarter of fiscal year 2016.
Dr. Webb, the Medical Oncologist from the Genesis Cancer Center in Hot Springs, is the only specialized physician on staff that would be ordering genetic testing. HMH staff researched the requirements for offering genetic testing which include having to construct special “clean rooms” in the laboratory. Due to the low patient volume, it is not financially feasible for HMH to endeavor in genetic testing.
Goal Not Met