Organizational Accomplishments 2015

Improving the Health of our Communities
2015 Organizational Accomplishments

I. VALUE PROPOSITION

1. HCNO leveraged membership dues to obtain $4.3 million in grants and contracts, returning 50% of grant awards to hospitals, their communities, and the region.
2. Helped hospitals maintain their 501(c)(3) charitable status with approximately one-third of membership dues being applied toward community health improvement.
3. NOSS, HCNO’s affiliated group purchasing organization, through its partnership with MedAssets, is obtaining even more deep product pricing discounts as a result of MedAssets’ (Vizient) recent merger with Novation.

II. NOSS

1. Returned $396,625 in contract participation rebates and incentives.
2. Continued to provide educationally based programs and services to meet the specialized needs of the membership. Disciplines covered included Compliance, Information Technology, Material Management, Pharmacy and Food Service.
3. Sponsored a food show bringing together manufacturers, brokers and distributors with the NOSS membership to promote the MedAssets Food and Nutrition Services portfolio.
5. Saved hospitals, alternate care and school members $906,433.
6. Developed a strategic plan to determine NOSS’ role relative to the merger of MedAssets with Novation and identify strategies for growing the business.

III. ADVOCACY AND REPRESENTATION (REGIONAL)

1. The Hospital Council served as a trusted and authoritative voice for hospitals on numerous issues covered in the news media and discussed in the community. These included topics such as Opiate Addiction, Medicaid Expansion Reauthorization, Integrating Mental Health Screening and Referral into the Clinical Visit Using Electronic Health Records, Health Insurance Marketplace Navigation (ACA), Advance Care Planning, and Infant Mortality.
2. Represented membership on the OHA Political Action Steering Committee for the 16th consecutive year.
3. Attended the AHA Annual Meeting in Washington, D.C., advocated for issues important to the healthcare industry in meetings with Congressional Representatives, such as threatened elimination of Critical Access Hospital NP designations, challenges to health insurance subsidies and Medicare/Medicaid reimbursement.
4. Represented membership on Jackson Healthcare’s Hospital Charitable Services Awards Program Advisory Board, which honors hospital-sponsored community
benefit and outreach programs that impact communities through education, access and delivery. Both Fostering Healthy Communities and the Northwest Ohio Pathways HUB have been recognized as 2016 finalists for the Jackson Healthcare Charitable Awards.

5. Served on the Lourdes University Healthcare Advisory Council to help develop a curriculum to create a pool of highly qualified individuals for the healthcare workforce.

6. AHA – Represented members at Regional Policy Board 5 meetings providing input and support of advocacy agenda.

7. OHA – Attended Board meetings, PAC/OHA Steering Committee meetings, and Legislative receptions to provide input and support advocacy agenda. Served on the OHA Centennial Planning Committee.

8. Assembled a task force to encourage a community-wide initiative to substantially increase the number of patients who have advance directives in place.

9. Signed the #123forEquity Pledge to Act to encourage members to take prescribed steps to eliminate health care disparities.

10. Provided 50+ interviews/articles to media outlets throughout northwest Ohio regarding member hospital activities/issues, including:
   o Health insurance through the Marketplace
   o Medicaid issues
   o Reducing infant mortality rate through the NW Ohio Pathways HUB
   o Community Health Needs Assessment results and steps to address areas of need
   o Healthcare Heroes Awards program
   o Chronic diseases/the health of the community
   o Campaign against health care disparities.

IV. DISASTER PREPAREDNESS (REGIONAL)

1. HCNO continues to receive Assistant Secretary for Preparedness and Response Healthcare Preparedness Program grant funds from the Ohio Department of Health throughout FY15 to the present.

2. Continued working with ODH and regional public health coordination agency staff to draft versions 1-3 of the NW Ohio Ebola and Other Special Pathogens Plan.

3. Participated in the St. Rita’s Medical Center and University of Toledo Medical Center assessment hospital site visits conducted by ODH in September 2015.

4. Assisted and provided support during two real world events: Central Ohio Botulism Outbreak-April 2015 and the Argon Barge Lightering Project near Kelly’s Island in November 2015.

5. Participated on the Toledo Water Advisory Committee. Worked with the Department of Public Utilities, Lucas County EMA, Lucas Integrated Healthcare Coordination Team, Toledo-Lucas County Health Department, hospitals and various other community partners to review the 2014 Toledo Area Microcystin
Water Ban Event After Action Report, improve communications and mitigate the documented areas for improvement.

6. Provided staff support and leadership to the NW Ohio Healthcare Emergency Management Coalition (NWO-HEMC).

7. Provided onsite Incident Command System trainings in Mercer, Putnam, Sandusky, and Williams counties.


9. Planned and conducted an alternate care facility exercise at Elmwood at the Springs.

10. Conducted the 2015 regional functional exercise to test continuity of operations planning for northwest Ohio healthcare and public health. 650+ hospital participants from northwest Ohio and approximately 130 from northwest Ohio first responder and support agencies attended.

11. Conducted 5 portable hospital deployments. The medical treatment capacity of these portable assets was tested when they were used to conduct an influenza vaccine clinic at Magruder Hospital, to treat real world emergency room patients at ProMedica Memorial, and to provide resources for the Williams County Guard Care Event, supported by Community Hospitals and Wellness Centers, where 300 members of the general public received free medical screenings and testing.

12. Monthly, conducted a NW Ohio Drill Day to maintain Facility Stress Report, OPHCS, SurgeNet, satellite phone, and MARCS radio capabilities.

13. Regional ventilator and pharmaceutical cache requesting and deployment drills were conducted in late 2015.

14. Assembled an Executive Level Task Force to address Ebola and, going forward, other public health epidemics.

V. CARENET

1. The Hospital Council continues to provide staffing and operations to Toledo/Lucas County CareNet through a contractual arrangement with the CareNet Board.

2. CareNet has provided Medicaid and MarketPlace navigation services to the Northwest Ohio region, assisting approximately 575 with enrolling or re-enrolling in Marketplace coverage and 1,082 in applying for Medicaid.

3. Since its inception, CareNet has served more than 27,985 low-income residents through its charitable care network (including, most recently, 597 members).

4. CareNet now has 6 certified community health workers to assist residents with unmet needs with a focus on the social determinants of health.

5. Conducted free dental clinics. 103 services performed in 2015.
VI. COMMUNITY HEALTH ASSESSMENTS (REGIONAL)

1. Contracted for Community Health Assessments enabling that unit to be self-sustaining for 2 years.
2. Conducted 38 community health improvement projects (including community health assessments and planning processes).
3. Working with state agencies to develop better community health improvement standards for the state in the areas of health assessment and planning. (Three proposals pending.)
4. Provided Consulting services for the merger of the county and city of Findlay health departments.
5. HPIO/HCNO proposal was awarded the Ohio State Health Assessment and State Health Improvement Plan (SHA/SHIP) contract.

VII. NORTHWEST OHIO PATHWAYS HUB/LUCAS COUNTY INITIATIVE TO IMPROVE BIRTH OUTCOMES

1. The Northwest Ohio Pathways HUB received HUB certification and is one of three certified HUBS in the nation to coordinate a system of outcomes addressing health disparities.
2. The HUB, in partnership with the University of Toledo AHEC program, is providing scholarships for individuals to become certified as regional Community Health Workers (CHWs) and job development assistance to help organizations define a role for CHWs on their healthcare team to serve the social needs of the Medicaid population. (Funded by a MEDTAPP grant.)
3. Enrollment in the Lucas County Initiative to Improve Birth Outcomes increased 52% from last year, enrolling 533 women.
4. Of the women served, 60% represent minority populations, with 52% being African-American.
5. Of clients enrolled at least 90 days in the program before delivery, 11% of all program births were low birth weight.
6. Of African-American women enrolled at least 90 days in the program before delivery, 8.2% were low birth weight, compared to 14.7% for African-Americans in Lucas County.
7. Submitted a proposal to Medicaid for funding to support the Toledo-Lucas County Getting to 1 joint project of the Equity Institute and the Northwest Ohio Pathways HUB to improve birth outcomes.
8. Testified before Ohio General Assembly Committees on Infant Mortality resulting in HCNO’s HUB receiving funding to help replicate the Northwest Ohio Pathways HUB model in other areas of the state. Worked closely with Representative Robert Sprague (R) – Findlay – District 83 to accomplish the preceding.
VIII. **FOSTERING HEALTHY COMMUNITIES (FHC)**

1. Secured a three-year CDC Partnerships to Improve Community Health (PICH) grant for Healthy Lucas County to reduce the burden of chronic disease and further the work of addressing the Lucas County Health Improvement Goals.
2. Co-sponsored Healthcare Heroes Awards Program with 202 registrants from 10 counties.
4. Increased access to care for 32,000 residents impacted by health disparities by income and race through CareNet, Pathways, Tobacco Treatment, and Care Transitions.
5. Collaboratively helping to meet community benefit requirements of hospitals.

IX. **NORTHWEST OHIO REGIONAL EXTENSION CENTER-NWOREC**

1. The federal Meaningful Use grant ended on February 7, 2014. NWOREC continued to work for an additional year with the Ohio Health Information Partnership (OHIP) until February 2015 through a No Cost Extension (NCE) agreement between HCNO and OHIP.

X. **NORTHWEST OHIO REGIONAL TRAUMA REGISTRY (NORTR)**

1. NORTR Board membership continued to meet quarterly.
2. CDM software upgrades were completed in November 2015 in time to resume data uploads to the state.
3. The regional hospitals worked closely with the HCNO contractor and CDM representatives to work through software compatibility issues for data submission between the state and local systems.
4. The northwest hospitals continued to integrate ICD-10 coding into the trauma registry data submission process.

XI. **MISCELLANEOUS COMMUNITY HEALTH IMPROVEMENT ACTIVITIES (REGIONAL)**

3. Received and/or continued implementation of numerous grants on behalf of member hospitals including:
o the second year of a three-year Partnerships to Improve Community Health (PICH) grant for the prevention and management of chronic diseases in Lucas County;

o the second year of a five-year HRSA Healthy Start grant funding HCNO’s Pathways program in years two through five, designed to eliminate disparities in perinatal health among low-income African-American women of childbearing age;

o the Community Health Worker Certification Program (CHW) grant plus a expansion grant received by UT and coordinated by HCNO’s NW Ohio Pathways HUB to prepare students to work as part of the patient-centered medical home concept envisioned by the ACA;

o a third Navigator Grant to CareNet to assist the uninsured in obtaining, renewing, or switching healthcare insurance coverage through the MarketPlace or re-directing to Medicaid, as appropriate.

4. NW Ohio Susan G. Komen for the Cure - - CareNet and HCNO were awarded funds for both the 2014-15 and 2015-16 grant years. Between the two grant years, these funds provided reimbursement to HCNO member partners for providing 314 screening mammograms, 153 diagnostic services (mammograms, ultrasounds, biopsies), and 13 surgical procedures to individuals who resided in 21 of Komen’s 24-county service area.

XII. OTHER COLLABORATIVE EFFORTS (REGIONAL)

1. Participated in the OHA Regional Hospital Quality Collaborative.
2. Sponsored Susan G. Komen Power of the Promise program
3. Further examples of organizations with which HCNO collaborates include the Area Office on Aging, Ohio Medicaid, the Ohio Department of Health, the Ohio Department of Public Safety, OHIP, HPIO, Susan G. Komen and United Way.
4. Rotary – Medical Equipment and Supplies Abroad (MESA) – Initiated an effort to bring the various mission groups together to achieve a greater collective impact abroad.
5. Helped arrange a panel discussion at a Lima Chamber of Commerce Annual Meeting featuring new robotic technology offered by 2 area hospitals.