Community Hospital of Bremen
2015 Community Health Needs Assessment Update
And Action Plan

In 2012, Community Hospital of Bremen (CHB) contracted with the Indiana Rural Health Association to conduct a Community Health Needs Assessment. Along with the compilation of quantifiable statistics and reports for health-related community data, a 33-question survey was developed to gain the perspective of the community. The survey was widely disseminated to the residents in CHB’s service area through inclusion on the hospital’s website, face-to-face polling at three popular grocery stores in and near Bremen, a publically available survey posted on Zoomerang.com, and distributed in hard copy to the local Amish population.

Based on the information gathered through the assessment, the following areas were identified as the greatest need/importance in the service area of CHB:

1) Drugs:  Illegal drug use/alcohol abuse/prescription drug abuse
2) Healthcare:  Urgent care for basic medical services, mental health services
3) Living conditions:  public transportation and elderly housing
4) Chronic Disease:  Obesity/fitness and diabetes
5) Assistance/Activity:  Senior assistance and all ages activity

In response to those needs, the following recommendations were identified for implementation:

1) Drugs:  Development of educational tools regarding effects of drugs on health, possible share with school or enlist staff to speak at schools regarding drug abuse/prevention.

2) Healthcare:  Hospital to investigate feasibility of operating urgent care center, coordinating with family practice physicians to assure support and referral from ER when appropriate.  Work with Bowen Center (CEO serves on Bowen Center Governing Board) to provide outreach programs through the Plymouth Street Clinic.

3) Living Conditions:  Work with Marshall County Older Adult Services to increase van availability – currently only available one day/week unless other arrangements are made.  CEO serves on the Marshall County Transportation Advisory Committee and this is the oversight committee that provides the courtesy van.

4) Chronic Disease:  Development and focus of education (possible lunch and learn programs) on the benefits of screening and early detection, efforts on behavioral changes proven to help:
   a.  Healthy eating and weight reduction
   b.  Exercise programs
   c.  Development of support groups
   d.  Health Fair for community with free screenings and education
5) Assistance/Activity: Development of wellness programs, monthly fitness newsletter to include senior activities, easy recipes, dietician notes. Evaluate opportunity to create walking/biking paths in the community.

UPDATE

In 2015, a re-assessment of the community health was performed utilizing health information gathered through the Indiana Hospital Association and the IndianaIndicators.org dashboard providing community health data for Marshall County. Review of this data as compared to the prior 2012 data denotes the following:

1) Drugs: illegal drug use/alcohol abuse/prescription drug abuse – excessive adult drinking is slightly higher in Marshall County when compared to the State of Indiana. Controlled substance abuse is slightly lower. While Marshall County is lower than the rest of the State, all areas are seeing the continued problem of opioid abuse.

2) Healthcare access/mental health access: lack of health insurance is higher in Marshall County than other areas in the State. Cost of seeing a physician is not a deterrent in Marshall County, and the Marshall County Health Department has a high staffing ratio compared to other Counties. Access does not seem to be a continued issue for the area.

3) Public Transportation and Housing: the lack of public transportation to attend physician office appointments or to access healthcare has improved. The Marshall County Transportation service through Marshall County Adult Services has increased availability of their transportation buses. Housing remains a potential issue but not to a level that requires immediate spending on construction.

4) Chronic Disease: Obesity/Diabetes – Marshall County adult obesity levels are shown at 28.5% compared to a State average of 31.4%. Diabetes and Diabetes Mortality remain higher in Marshall County compared to the State averages.

5) Senior Assistance and all ages activity: Adult physical activity in Marshall County is better than the State average; although minimally, at 26.9 compared to 27.9.

Recommendations/Steps Taken:

1) Drugs: illegal drug use/alcohol abuse/prescription drug abuse – the Community Hospital of Bremen has adopted the recommended State guidelines regarding prescribing of narcotics through the Emergency Room. In addition, the hospital participates in the State coalition to reduce the prescribing of opioid narcotics in its medical clinics. The hospital will continue to work with all healthcare providers to address this ongoing health problem.

2) Healthcare access/mental health access: The hospital now provides Bowen Center clinic space in their specialty clinic, increasing the availability of mental health services to the community. In addition, the hospital has opened a primary care clinic with two family practice primary care providers employed by the hospital in an effort to increase primary care availability to the community.

3) No addition action needed at this time. Marshall County Adult Services has increased the availability of transportation to the community, and housing is not feasible at this time.

4) Chronic Disease: Obesity/Diabetes – The hospital has begun offering Diabetic classes to the community on a routine basis, covering topics such as cooking, healthy foods, etc.
The Bremen Chamber of Commerce and Bremen Parks Department are working on development of a walking path in the community.

5) Senior Assistance and all ages activity: Development of wellness programs, monthly fitness newsletter to include senior activities, easy recipes, dietician notes. These items are still in the development stages by the hospital.

Communication

The CHNA Implementation Plan 2015 Update will be posted on the hospital web-site. The Implementation Plan will also be coordinated with the hospitals 990 filing, which requires inclusion of the plan with the report. The hospital will bring together the key community members and the staff that was part of the CHNA development, share the results of the update, and revise plan as needed.