

TUCSON MEDICAL CENTER COMMUNITY HEALTH NEEDS ASSESSMENT

IMPLEMENTATION STRATEGY

2012-2014

TMC has a lengthy history of providing acute-care hospital services to the uninsured and underinsured people throughout Southern Arizona and works in partnership with numerous community health and social service organizations to improve the health and well-being of the more than 1 million people living in the region.

The 2010 Patient Protection and Affordable Care Act requires that nonprofit hospitals begin to conduct a community health needs assessment every three years and adopt an implementation strategy to meet the outstanding community health needs identified in the assessment as a condition of maintaining the institution's federal tax exemption.

Tucson Medical Center has elected to prepare this assessment and implementation strategy in fiscal year 2012 and will use the document as a planning tool to help create strategic initiatives regarding medical services and community outreach efforts in order to meet critical health needs of members of our community whose health is at-risk.

In preparing a 2012 Pima County Health Needs Assessment, or CHNA (see Appendix A), Tucson Medical Center collaborated with two major nonprofit health systems in the region – Carondelet Health Network and The University of Arizona Medical Center. For the purposes of the assessment, the three health systems determined a geographic scope of all of Pima County, where at least 80 percent of the hospitals' patients served are located. In addition, as it considers its implementation strategy, TMC is informed by its specialty areas and populations, especially pediatrics, women's, maternity, cardiovascular, orthopaedic, neuroscience, hospice, and senior services.

Priorities

The CHNA identified three top medical health issues: **Obesity, diabetes and substance abuse**. These issues are either among or closely correlated with many of the top 10 causes of death among Pima County residents, including **cardiovascular disease, accidents, strokes, drug-induced deaths, diabetes and suicide** (p. 32).

Also, as one of the community's two providers of pediatric inpatient facilities and emergency departments, TMC is particularly concerned about **children's safety**. The joint CHNA did not delve deeply into the pediatric population, so a review of additional literature was in order. In addition to the CHNA, we examined the 2011 Pima County Community Health Assessment (Appendix B) and the 2011 annual report of the Arizona Child Fatality Review Program (Appendix C) in considering our priorities. The findings indicate that for Pima County children ages 1-14 the most common cause of death in 2009 was unspecified drowning and submersion. In addition, the CHNA reports that Pima County has not yet met its target goal for the number of

pedestrian deaths. And statewide, an estimated third of all child deaths in 2010 were probably preventable, including 92 percent of all accidents. As such, children's safety is another identified area of concern.

Additionally another gap identified in the CHNA is **access to care**. These issues include a lack of insurance coverage, cuts in AHCCCS funding, limited coverage for behavioral health, lack of access to medications and funding for primary care.

We take the above concerns as our starting point in developing our Implementation Strategy, which will focus on five key areas:

- **Cardiovascular Health, Diabetes and Obesity**
- **Children's Safety**
- **Mental Health**
- **Health Information Exchange**
- **Community Care (discounts for low-income and/or uninsured patients)**

Implementation Strategy

Cardiovascular Health, Diabetes and Obesity

The 2012 Pima County Community Health Needs Assessment identified cardiovascular disease as the leading cause of death for adults. Diabetes and stroke also made the top 10 causes of death. Obesity and sedentary lifestyles are known contributors to all of these disease states. While we certainly need to treat these conditions as they arise, it is also critical that we take steps to develop programs and infrastructure, not just for adults but especially for youth to give them a chance to develop healthy habits early in life.

With a 24 percent adult obesity rate in Pima County, it is not surprising that one out of five adults reported not having enough leisure time to participate in any physical activity in the prior month. Pima County also falls behind national standards for both healthy foods and access to recreational facilities.

Tucson Medical Center has implemented many community education and outreach programs to address these issues. Healthy Living Connections, run through Senior Services, offers health coaching, seminars, wellness programs and more to help our mature population better manage their chronic health conditions. We collaborate with dozens of social service and advocacy organizations, such as the American Heart Association, American Stroke Association and the American Diabetes Association to improve care processes and to educate and advocate healthy lifestyles. We sponsor runs, encourage healthy living among our employees and reach out to the area's youth.

For 2012-14, TMC, along with Pima County and the Southern Arizona Community Sports Inc., will form a public/private partnership to build an indoor sports center for youth activities at Curtis Park. This center will include basketball and volleyball courts open for recreational and league play. The unique public/private partnership will keep use fees low and accessible for families.

By creating an affordable, accessible indoor sports center, we will:

- Enhance opportunities for physical activity for Pima County youth year-round
- Expand indoor recreation options, which is most critical during Arizona's summer months
- Increase educational and outreach opportunities for critical youth health topics

TMC will contribute the \$5.4 million needed to build the center, and will also work with Pima County Parks and Recreation and the private developers on programming.

We will continue and expand our Girls On The Run of Tucson program. This a life-changing, experiential learning program for girls in 3rd-5th grade. The program combines training for a 3.1 mile running event with self-esteem enhancing, uplifting workouts. The goal of the program is to encourage positive emotional, social, mental, spiritual and physical development. This program is made possible, in part, through a generous grant from Aetna and the Aetna Foundation, as part

of Aetna's community grant process focused on disease prevention, obesity and health screening. The contributions support Aetna's commitment to enhancing the quality of health care, and reducing racial and ethnic disparities. Community partners include the Pima County Bicycle and Pedestrian Program, Everyone Runs, Southern Arizona Roadrunners, Fleet Feet, Maynard's Market and Kitchen and numerous school districts.

Children's Safety

As one of the community's two pediatric inpatient facilities and emergency departments, TMC is particularly concerned about the well-being of our community's children and families. For Pima County children ages 1-14 the most common cause of death in 2009 was unspecified drowning and submersion. The 2012 Pima County Health Needs Assessment reports that Pima County has not yet met its target goal for the number of pedestrian deaths. In the United States it's estimated that 20 percent of all children between the ages of 5 and 9 who were killed in traffic crashes were pedestrians. Additionally, the November 2011 annual report of the Arizona Child Fatality Review Program notes that a third of all child deaths in 2010 were probably preventable, including 92 percent of all accidents.

TMC continues to be at the forefront of children's safety. As part of our implementation strategy, we will continue our commitment to Safe Kids Tucson, a network of organizations whose mission is to prevent accidental childhood injury, a leading killer of children 14 and under. Spearheaded by Tucson Medical Center, the local chapter is part of Safe Kids Worldwide, a global network of more than 450 coalitions in 16 countries. Major components in local outreach efforts include water safety, child passenger safety, bicycle and pedestrian safety, and general safety.

The TMC Desert Safety Kids Program started more than a quarter century ago when we started our car-seat loaner program. The program offers general safety information as well as free bicycle helmets, gun locks, child fingerprinting and other general safety information both in the hospital and through community outreach by TMC Security Services personnel. Each year, the program also hosts Be Safe Saturday, a day-long event with more than 100 health and safety display booths. The free event provides health & safety education, information and demonstrations. More than 10,000 people attend annually.

Mental Health

The CHNA identified **substance abuse and access to mental health services** as leading areas of concern in Pima County. Substance abuse along with two of the top leading causes of death -- suicides and drug-induced deaths -- all of which have mental health components. Behavioral health status indicators included in the 2011 Pima County Community Health Assessment show Pima County rates are worse than the state as a whole for ER visits and hospital discharges for both psychosis and neurotic disorders. Additionally, Pima County is considered a federally mental health professional shortage area.

TMC is home to Palo Verde Hospital, which has 50 years experience providing mental health services in the local community. Since 1993, it has been a TMC department, providing inpatient and intensive outpatient behavioral health services for adults.

TMC takes an active community role in addressing mental health needs. It was a founding member of the Community Partnership of Southern Arizona (CPSA) and has a permanent seat on the board of trustees providing oversight to the nonprofit regional behavioral health service. CPSA was formed in 1995 to meet the needs of those with mental illness in Southern Arizona, especially for those who qualify for AHCCCS, Arizona's Medicaid program. A myriad of services are provided to those in need and include crisis intervention, inpatient and outpatient services as well as housing on both a short term and long term basis.

TMC supported last year's formation of CPSA's Crisis Response Center, a community intake and triage center for anyone in Pima County experiencing a behavioral health crisis. TMC is and will continue to be an active participant in this system, which provides a 24-hour crisis response line for call in as well as a crisis mobile-assistance team to go to the field and assess individuals who need access to crisis services. They also provide triage services for involuntary admissions to acute-care hospitals.

TMC supports the National Alliance for Mental Illness (NAMI) in its effort to provide education, outreach and advocacy for the mentally ill both locally and nationally. TMC has made some of these services available to staff in order that they may better appreciate the needs of our own community. We also provide financial support NAMI's annual walk.

Last year, TMC joined with Handmaker Jewish Services for the Aging to build and run a much-needed facility for dementia and geriatric psychiatric care. The Paul and Lydia Kalmanovitz Foundation of San Francisco awarded a \$3 million challenge grant to add a two-story, 36-bed health-care facility on the Handmaker campus across the street from Tucson Medical Center. Handmaker is currently spearheading the effort to raise \$1.5 million to match the grant, with the TMC Foundation managing the funds. Fundraising and construction should occur during the bulk of the 2012-14 timeframe of this implementation strategy. Once completed, TMC will manage the 16-bed unit dedicated to short-term geriatric psychiatric care for people experiencing severe breaks in behavior or other psychiatric symptoms. This unit better serves a patient's psychiatric needs than can be achieved in a traditional hospital setting. Presently, the community has just 14 beds to manage this growing population.

TMC will continue to sponsor running events as part of its response to the Jan. 8, 2011, shooting where six were killed and 13 injured, including Rep. Gabrielle Giffords. Gabe Zimmerman, a Gifford aide who died in the shooting, was an avid runner. TMC shares the view of Gabe's father, Ross Zimmerman, that mental health benefits from regular exercise.

Health Information Exchange

TMC and more than 230 local physicians launched Arizona Connected Care, an accountable care organization, to improve care to tens of thousands of patients in Southern Arizona while lowering costs to deliver that care. In order for the ACO to be successful, patients must get the right care, at the right time, from the right provider. That means that although TMC does not typically provide primary care, it is in the organization's and the community's interest to help facilitate **access to primary care**, a gap that was articulated in the CHNA.

Having the right tools in place so that providers can share information is key to creating a successful 21st century health care delivery system. The right technology can connect health care providers across the continuum - including primary care doctors, specialists, assisted-living facilities and nursing homes, hospitals, rehab facilities and public health agencies - to ensure more streamlined continuity of care.

TMC has been at the leading edge of health care information technology. It was the first hospital in Arizona to implement a comprehensive electronic medical record to achieve Stage 7, the highest level to date, on the HIMSS Analytics scale. But health providers use a plethora of electronic records systems – and those systems don't readily talk to one another. Enter the health information exchange, or HIE, which will provide the infrastructure that will allow the systems to communicate.

TMC is developing this information-exchange capability on two fronts. It is part of a public system being developed at a statewide level by a community-based nonprofit known as the Health Information Network of Arizona. This system, which includes hospitals, health plans and other providers who opt in, is likely to start small when it goes live later in 2012 and will expand incrementally across the state.

TMC, however, is also committed to building its own information exchange to help serve as a building block for its participation in the ACO. With more than 200 providers participating, it's important to connect these practices, especially in treating those with chronic conditions -- especially diabetes and cardiovascular disease.

This private system will be customized to fit the needs of its participation in Arizona Connected Care and will include some advanced features. A basic system allows a user to access patient information. A more sophisticated system could automatically alert the provider that a patient has received emergency care, for example, instead of requiring a provider to search for that information.

TMC is also committed to the public effort as well, since as a practical matter, patients will be getting care from providers who may not be participating in Arizona Connected Care.

Community Care Program

Tucson Medical Center is committed to delivering caring, personalized, quality health care to all patients regardless of their ability to pay. As a nonprofit, community hospital, it's our mission and our privilege to play this important role in our community. The Community Health Needs Assessment showed a barrier to accessing health care is a **lack of insurance coverage and cuts in state Medicaid** (in Arizona, it's the Arizona Health Care Cost Containment System, or AHCCCS).

To help address the financial means to accessing care, our Community Care policy covers patients who lack the financial resource to pay for all or part of their bill and to process appropriate adjustments for hospital charges. We first consult with the patient and their family to

identify state or federal resources available to cover the cost of care. This frequently involves obtaining health coverage through AHCCCS. If coverage is not available, the patient can request financial assistance. Requests are reviewed on a case-by-case basis with eligibility determined based on the current year's federal poverty guidelines. We provide discounts for those who earn up to 400 percent of the federal poverty level.

The TMC Board of Trustees approved another program offering financial relief that went into effect in 2012. Recognizing that self-pay patients are not in the same position as insurance companies and other payers to negotiate reduced rates, those who do not have health insurance automatically have their bills cut in half regardless of income. Then, depending on a patient's income, other discounts may apply as part of the TMC Community Care program above.

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