Community Health Impact Measurements

offers path to increased income and community engagement

by Debra Thompson
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There is economic value to thinking through how your Community Health Needs Assessments (CHNA) can help your health system identify numerous opportunities to generate short term revenue and foster greater community engagement. Taking time now to think through these strategies positions you for better compliance and future growth.

Answer the following questions to understand where you are in the process:

1. What mechanisms are you using to collect and track written comments received about your CHNA report and implementation strategies?

2. What meaningful implementation strategies are you implementing that are tied to community benefit budgets or community benefit programs that are directly related to needs identified in your CHNA assessment?

3. What process is in place to evaluate the impact of your strategies for each fiscal year and manage them towards your next CHNA?

4. How do you integrate your CHNA with your corporate strategic plan and your marketing efforts?

Public feedback about your CHNA and implementation strategies is valuable because it can give you information about needs that might have been missed in your data collection effort while engaging the community in the process. Your internal staff need procedures to receive, manage, and share written feedback since your community will correspond at many levels of your system. Section (b)(ii) of the latest IRS draft guidelines states “A hospital facility must take into account input from the following sources in assessing the health needs of its community...[ii] Written comments received on the hospital facility’s most recently conducted CHNA and most recently adopted implementation strategy.”

You can increase your ability to track written comments by publishing an “input link” on your website aside your CHNA report. Once your focus areas are identified begin to explore creative growth avenues. For example, one of our clients, Excela Health in Westmoreland County, PA, identified breast cancer as an important issue. Like many hospitals, they provide breast cancer education and screenings at health fairs and enhanced this practice by having mammogram schedulers on site to make appointments.

Excela Health has several points in the process to measure effectiveness. First, the number of women who attend a program or receive a screening is an output. Second, the numbers of women who schedule a mammogram and who complete a mammogram as a result of attending the program are outcomes.
Finally, the number of women diagnosed with stage 0, 1 or 2 breast cancer is an impact. To increase participation for the economically disadvantaged they offer a free mammogram voucher, so an increase in the number of vouchers used can also be an outcome. During this process the system makes money on the mammograms completed for women with commercial insurance. These efforts increased access for the underserved, increased revenue for the health system, and resulted in lower cost treatment options for the women diagnosed. Further measurable impacts include benefits to the longevity and quality of life for the women served.

All hospitals have staff members who understand and use outcomes measurement tools in clinical and quality programs. Yet the same staff is unfamiliar and inexperienced with applying these concepts to prevention and education programs. Recognizing the difference between an output, outcome or impact, and figuring out how to follow the patient from screening to test to result will increase your success in measuring the program outcomes and determining if the program has made an impact at your year-end evaluation. These activities are what move us toward population based health planning.

One indicator of where you are on the implementation curve is related to your hospital’s overall commitment to innovation. Size often matters as systems with multiple facilities and services are more likely to be exploring strategies to determine how they are going to cost manage most effectively the ongoing CHNA research, innovative program development and evaluation functions to ensure that their programs are evidence based. Forward thinking, stand alone institutions are exploring best practices but often have less internal capacity to support these efforts. Many are relying on consultants and auditors whose varied interpretations of the guidelines may or may not be helpful in outcomes measurement and evaluation planning.

Any delay in creating the outcomes measurement and evaluation process loses the opportunity to share successes and learn from failures. Such information is vital to your annual IRS report and, in some instances, state reporting mandates. The importance of this is reinforced by a recent report entitled “The Second Curve Metrics in Healthcare” published by the American Hospital Association. It states, “they (hospital systems) need to intensify data analysis to identify performance improvement opportunities across the care continuum, develop standardized care processes, implement evidence-based protocols and train staff on clinical quality-improvement methods.” Long term success of your CHNA can be improved with effective integration of the needs assessment and program implementation to your corporate strategic planning and market development efforts. Your approach to measurement and evaluation of your CHNA implementation strategies should be congruent with your clinical innovation and integration strategies.

Avoid viewing CHNA as a “separate”(unfunded) mandate left to be coordinated by an individual who is doing it as an “add on” to their day job. Christopher C. Clark, D.O., Senior Vice President, Medical Affairs and Chief Quality Officer for Saint Vincent Health System in Erie, PA encourages “Hospitals should look at what is required with the Community Health Needs Assessment as a real opportunity to be strategic, patient-centered, and truly redesign health care to meet the needs of those that they serve.”

However, many CEO’s have assigned the CHNA process to the staff member most skilled at project management. This often is a marketing, fundraising, quality or finance professional with no background in research, program development or evaluation. These individuals are more challenged to envision how to evaluate impact. It is more beneficial for each hospital/health system to cost effectively build the internal staff capacity to manage these efforts.

Next steps for your CHNA implementation and impact evaluation can be reviewed at no charge by calling Strategy Solutions at 866-480-8003 or by sending an e-mail with your contact information to david@getstratgy.com.

About Debra Thompson

Debra Thompson is President and founder of Strategy Solutions, Inc. She has extensive experience in strategic planning, quantitative and qualitative research methods and program development and evaluation.

For over 20 years, she has been facilitating CHNA and planning processes; in recent years her clients have been making a strong “case for support” by developing innovative programs that produce both outcomes and impacts by identifying the “return on investment.”

Our projects

Our projects and clients have been recognized as best practices by the PA and NY Departments of Health, PA Department of Education and Welfare, the US Department of Health & Human Services, PA Partners, MD Workforce Development Association, and by the International Economic Development Council.

We are certified as a Women’s Business Enterprise in PA, VA, GA and FL.