

# COMMUNITY HEALTH NEEDS ASSESSMENT

## 2022

Updated 09/12/2024

Community  
Collaboration  
Is Key



**SPRINGHILL  
MEDICAL CENTER**  
*Treating You Like Family*

### INCLUDED IN THE STUDY

Springhill | Cullen | Sarepta | Cotton Valley | Shongaloo | Taylor, AR | Bradley, AR | Webster Parish  
Columbia County, AR | Lafayette County, AR

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## **Our Mission**

***“Patient Centered Care”  
From Our Family To Yours***

## **Our Motto**

***Treating You Like Family***



## **Our Vision**

*To be every patients' first choice for healthcare excellence. We will adapt and expand services to create healthier communities*

## **Our Values**

***Patient First***

***Integrity***

***Accessible***

***Accountable***

***Respect***

***Teamwork***



# SUMMARY

## Springhill Medical Center Health Needs Assessment

Springhill Medical Center conducted a Community Health Needs Assessment (CHNA) to prioritize public health issues and develop a community health implementation plan focused on meeting community needs. The CHNA is designed in accordance with requirements identified in the Federal Patient Protection and Affordable Care Act and further addressed in 26 CFR, Parts 1, 53, and 602. The completion of the CHNA enabled Springhill Medical Center to take an in-depth look at its greater community. The findings from the assessment were utilized by to prioritize community health issues and will be used to meet the community's needs. Springhill Medical Center is committed to the people it serves and the communities they live in.

## A Snapshot of the Springhill Medical Center Service Areas

- Springhill Medical Center's primary medical service area includes Springhill, Sarepta, Cullen, LA and Taylor, Arkansas
- The total population of secondary medical service area is **4,738**
- The population of Springhill Medical Center's primary medical service area is **11,441** (2020 Census / 10 mile radius)
- The total population served by Springhill Medical Center is **26,957**

# Demographic Characteristics from the Community Health Needs Survey

- A total of 220 surveys were collected from paper and online sources.
- 87% of the respondents on the survey were female and 50% were age 55+
- Several identified community leaders and healthcare professionals provided input for this CHNA.
- Forty four percent (44%) of the residents in the primary medical service area live on an annual income of less than \$25,000 per year.
- 76% of the respondents were White, while 23% were African American. Only 0% were Hispanic, 1% were other.
- Top health needs identified: 1) Wellness 2) blood pressure 3) obesity 4) diabetes . This varied little from 2019.



## Identified Health Needs of the Springhill Medical Center Primary

Poor health status can result from a number of factors including: genetic, environmental, behavioral, and socioeconomic. The best way to address this is by identifying the causes of these conditions and challenges and developing interventions in order to decrease the incidence or prevalence of these conditions.

## CHNA COMMITTEE MEETINGS

*The CHNA Committee met in three separate open forum meetings, a synopsis is below*

### Meeting 1 (March 1, 2022)

- During the first meeting, a paper survey was given and completed by each member. Members were given additional surveys and tasked to reach out to community members they represented and get at least five surveys filled out and returned before the next meeting. Additional links to the survey were placed on social media and disseminated through different groups including the Chamber of Commerce, Webster Alerts for the Parish. The survey tool was adapted from other hospitals as well as the toolkit developed by the National Center for Rural Health Works, Oklahoma State University and Center for Rural Health and Oklahoma Office of Rural Health. This toolkit was recommended to us by the Louisiana Department of Health and Hospitals (DHH). The agenda for the first meeting included:
  - Introduction
  - Review of 2019 Recommendations and Accomplishments
  - Overview of Community Health Needs Assessment Process
  - Demographics / SMC and Clinic Services
  - Economic Impact of Springhill Medical Center
  - Health Survey Questionnaire Presented to the Committee

### Meeting 2 (March 15, 2022)

- During the second meeting, the committee reviewed national, state, parish and local health indicators provided by Springhill Medical Center. Committee members turned in surveys, and a discussion was initiated with regard to what they felt were the needs of the community, and some ideas to improve services at Springhill Medical Center. The agenda for the second meeting included:
  - Review Of What Was Discussed In Meeting 1
  - Presented National, State and Parish Health Indicators
  - Presented Springhill Medical Center Health Indicators
  - Gather Surveys
  - Began Group Discussion Questions



# CHNA COMMITTEE MEETINGS

## Meeting 3 (March 29, 2022)

- During the third and final meeting, the committee reviewed the community survey results and prioritized community health issues. The committee, through group discussion, then identified possible ways to resolve the health issues and summarized recommendations.
  - Review Of Meeting 2
  - Present Survey Results
  - Prioritize Community Health Issues
  - Discuss Possible Resolution for Health Issues
  - Summarize Recommendations



## TOP IDENTIFIED HEALTH NEEDS OF THE COMMUNITY

<b>WELLNESS / COMMUNITY EDUCATION</b>	<p>Topping the list, community education and wellness encompasses a wide range of issues. These include blood pressure, cholesterol, diabetes, nutrition, obesity, cancer, smoking cessation and mental health as well as many others.</p> <p>The committee, along with the survey indicated that they would like to see Springhill Medical Center out more in the communities we serve by holding health fairs, lunch and learns, with special attention to the younger generation. SMC’s wellness program will fit in with the ACO program at the Doctors Clinic.</p> <p>The percentage of 20+ adults with nor physical activity is 23.3% compared to 25.8% for Louisiana and 22% for the US.</p>
<b>SPECIALTY PHYSICIANS</b>	<p>As a rural hospital, recruitment of specialists are a challenge. Currently SMC has a visiting Cardiologist, Oncologist and Urologist. The survey indicated that there is a need for an Ophthalmologist and a Dentist. HPSA (Health Professional Shortage Area) indicates that there is a need for 5 additional dentists in Webster Parish.</p>
<b>OBESITY</b>	<p>Webster Parish is ranked #13 in the state for Obesity. 41.20% of the population in Webster Parish were Obese in 2020 compared to 35% in 2015. This indicates a strong need for nutrition education, exercise education and a medically monitored weight loss program. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.</p>
<b>HIGH BLOOD PRESSURE / CHOLESTEROL</b>	<p>High Blood Pressure and Cholesterol go along with Obesity and Diabetes . 64.3% of Medicare age residents in Webster Parish have high blood pressure compared to 57.2% nationwide.</p>
<b>DIABETES</b>	<p>Webster Parish is at 10.6% of the adult population 20+ diagnosed with diabetes compared to 10.3% for the state and 9% for the US.</p> <p>This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.</p>



# 2022 Community Health Needs Assessment Update

## Implementation of Activities

Early in 2022 a CHNA was completed and several areas were identified at the meetings conducted. Later in 2022 through a grant, another survey was completed with focus groups and the areas identified in the earlier meeting were updated to better meet the needs of the community. Listed below are the updated needs identified by the focus groups.

### 1. Health and Wellness Screenings (Items selected and promoted)

- Promoted diabetes awareness month
- Provided annual athletic sports physicals for over 500 students at 5 area schools
- Promoted and ran a Senior Fun & Fitness day for over 700 area senior citizens
- Promoted wellness vaccines for Flu, Shingles and Covid 19 on two digital signs (North Webster Medical Clinic & Doctors Clinic
- Promoted Mammograms utilizing the new 3D Mammo Unit by sending out reminder cards and online advertising. Provided each woman getting a 3D mammogram a nice gift.
- Promoted Colonoscopy Month - Promoted

### 2. Community Projects

- Doctors Clinic Safe Halloween Trick or Treat
- Supported a community Halloween Trick or Treat involving area churches and businesses
- Provided supper for the North Webster Highschool football players and cheerleaders serving around 150 students.

### 3. New Services

- Out Patient Mental Health services - New postcards were created that promoted mental health services. Marketed our Geriatric Psych Unit (Reflections) was marketed by the marketeers and GEO fencing was used to advertise within the market area to promote services.
- Specialty services - CEO began working on getting ortho and surgery to Springhill - Still in process

### 4. Community Relations

- Concerns with the ER contract company, and lots of complaints created a situation where the hospital had to change ER contact companies in October of 2022. When changed the complaints dropped by 90%.
- Customer service education needed in our clinics. The Practice Manager is now meeting with the staff on a regular basis to discuss issues and educate.
- Transportation - The Board of Directors approved purchasing a 15 passenger van for patient transport. The CEO is currently looking for a van and it is projected that it will start in 2023.



# I. Introduction and Description of Springhill Medical Center

## Description of the Community Health Needs Assessment

The purpose of the Community Health Needs Assessment is to 1) assess and prioritize the current health needs of the Springhill Medical Center Community, 2) identify available resources to meet the priorities established in the Community Health Needs Assessment, 3) draft implementation strategies to address health priorities, and 4) build capacity and community infrastructure to assist with health issues within the context of Springhill Medical Center existing programs, resources, priorities and partnerships

This report has been compiled in response to the Patient Protection and Affordable Care Act that requires each tax-exempt hospital to conduct a Community Health Needs Assessment (CHNA) every three years. This will be Springhill Medical Center's fourth survey.

## About Springhill Medical Center

Springhill Medical Center, located in Springhill, Louisiana, is a private, 501 (c) (3) non-profit corporation. It serves citizens of Springhill, Sarepta, Cullen, Cotton Valley, Shongaloo in Louisiana as well as Bradley and Taylor, Arkansas. This is accomplished by offering a hospital with a wide range of integrated services, from prevention and treatment to wellness. Springhill Medical Center employs 260 employees and has an annual payroll in excess of \$13 million.

The hospital is a 58 bed acute / surgical / geriatric psychiatric hospital, offering a broad range of inpatient and outpatient services, including three (3) rural health clinics, one (1) satellite outpatient physical therapy clinic and a partnership with Louisiana Home Care. Other services include:

- 24 Hour Emergency Care Services**
- Home Health (Partnership with LHC)**
- Hospitalist Services**
- Medical-Surgical Units**
- Physical Therapy Services**
- Radiology Services, CT, MRI, US**
- Full Lab Services**
- Telemedicine / Tele psych**
- Respiratory Care**
- Surgical Services**
- Alcohol & Drug Withdrawal Services**
- Geriatric Psychiatric Unit**

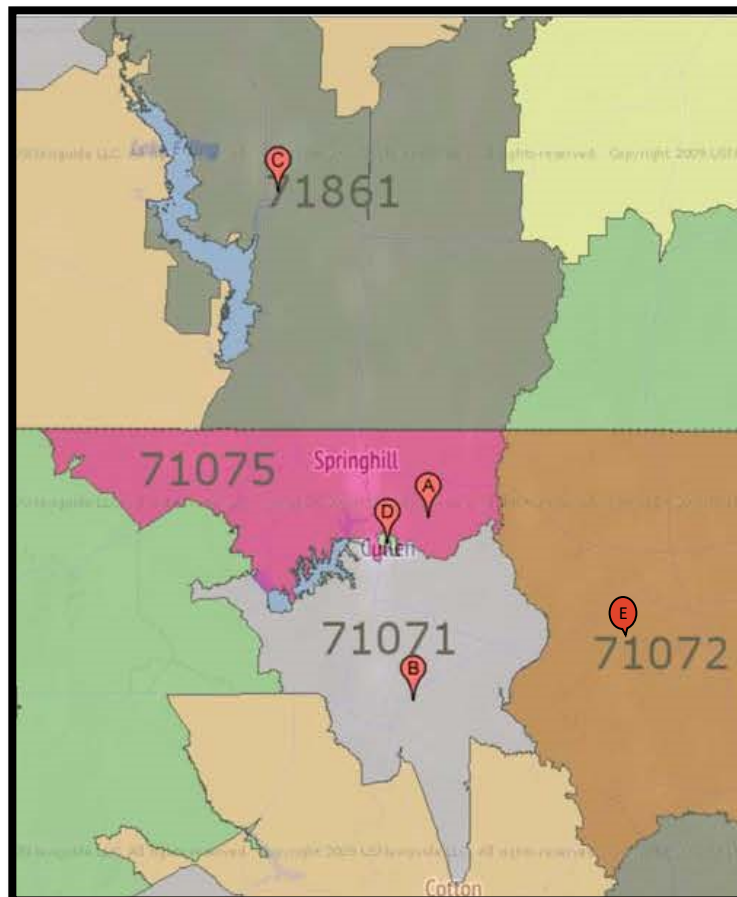


## Springhill Medical Center Patient Care Statistics (FY2021)

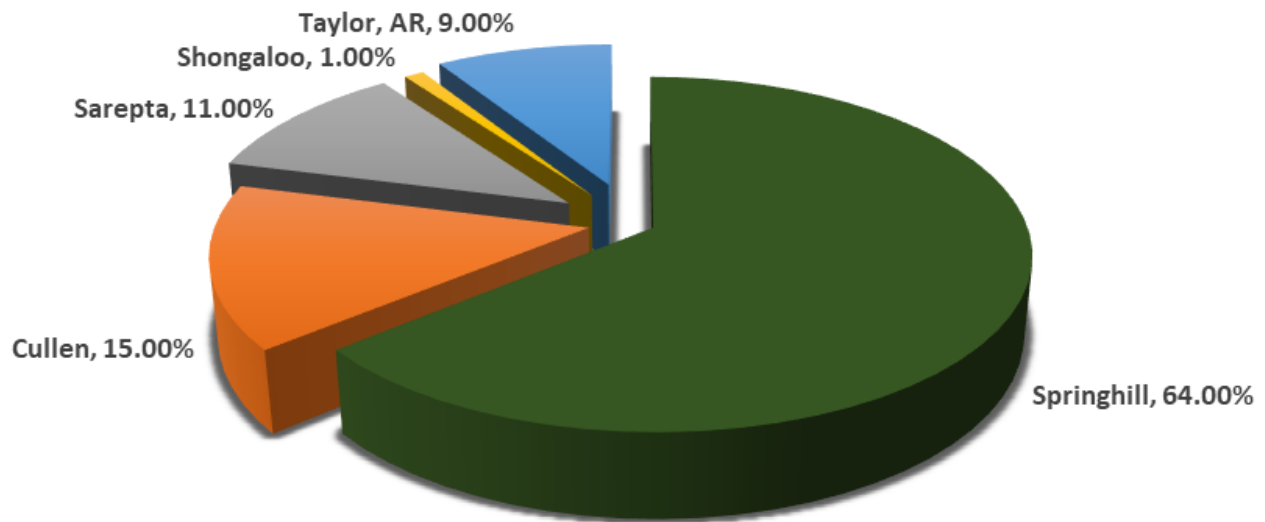
Patients Served	Patients	Diagnostics & Therapy	Totals Tests
Discharges	892	Laboratory (Inpatient)	18,901
Inpatient Days	4,514	Radiology (Inpatient)	1,813
Outpatient Surgery	513	Radiology All Others	9,686
Inpatient Surgery	40	PT (Inpatient)	607
ER Visits	5,593	PT Clinic	15,975
		All Other Testing	19,610

### Description of Primary Medical Service Area

The Community Health Needs Assessment serves the Springhill Medical Center primary medical service area which includes: A: Springhill (71075), B: Sarepta (71071), C: Taylor, AR (71861), D: Cullen (71021), E: Shongaloo (71072)



## Springhill Primary Service Area 2020



### **Springhill (71075)**

The population of Springhill is 4,943 according to the 2020 census. The median age is 47, and the unemployment rate is 7.1%. Poverty Rate is 46%.

### **Cullen (71021)**

The 2020 population of Cullen was 1,131. The median age is 37 years and the unemployment rate in Cullen is 7.1%. The median age decreased by 1.84% from 2019. Poverty Rate is 52.7%

### **Sarepta (71071)**

The 2020 population for Sarepta, LA is 857. The median age is 37 and the unemployment rate is 7.1%. Poverty rate is 25%.

### **Shongaloo (71072)**

The 2020 population for Shongaloo, LA is 139. The median age is 54.4 and the unemployment rate is 7.1% which mirrors the area. Poverty rate is 122%

### **Taylor (71861)**

The population as of 2020 was 675 residents. The median age in Taylor, AR is 30 years and the unemployment rate is 7.2%. Poverty rate is 28%

## Description of Secondary / Tertiary Medical Service Areas

The secondary and tertiary medical service area served by Springhill Medical Center includes the following zip codes:

Zip Code	City	Population
71826	Bradley, AR	471
71018	Cotton Valley, LA	1,060
71064	Plain Dealing, LA	958

## Overview of the entire Service Area

### Primary Market

10 Mile Radius From Hospital

**Population - 11,441**

Includes

- Springhill 71075
- Cullen 71021
- Sarepta 71071
- Shongaloo 71072
- Taylor, AR 71861

### Secondary Market

5 miles beyond primary radius

**Population – 4,738**

Includes

- Bradley, AR 71826
- Cotton Valley 71018

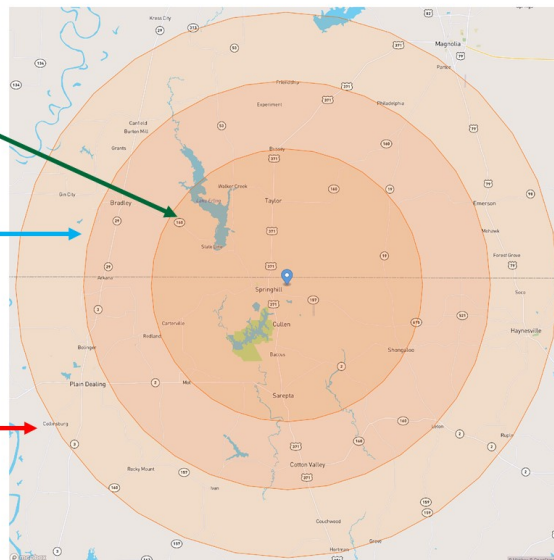
### Tertiary Market

5 miles beyond secondary radius

**Population – 10,418**

**Total population all markets**

**26,957**



Data from the 2020 US Census

## II. Methodology of the Community Health Survey

### Research:

Statistical data from various sources:

- Springhill Medical Center’s inpatient and outpatient medical data
- Centers for Disease Control and Prevention
- U.S. Department Of Health and Human Services
- Louisiana Department of Health and Hospitals

### Primary Data:

To ensure the information provided was gathered from a large sampling of community stakeholders, hard copy versions of the Community Health Survey were distributed in English and were given to the participants at the first meeting of the CHNA committee to distribute to friends and relatives as well as distribute at Church. In addition, information was given for completing the survey online. The survey link was posted on Springhill Medical Center’s Facebook page and website to complete. Community leaders were given the survey to distribute.

### CHNA Committee Membership:

The Steering Committee conscientiously took into account the hospital’s service area when selecting the group of individuals to serve on the CHNA Committee. Involvement in the community was a primary factor when selecting participants as well as ensuring there was adequate diversity from each of the surrounding communities. The Steering Committee identified 26 community members as potential CHNA Committee members. The following community members agreed to participate:

Name	Position	Name	Position
Ray Huddleston	Mayor of Springhill	Linda McDaniel	Main Street Manager
Ronnie Hearnberger	Council Member / Businessman	Kristin Dickinson	FNP-BC
Rhonda Taylor	Chamber Manager	Dr. J. Wayne Sessions	Physician
Lisa Smith	Counselor	Tim Mouser	Mayor of Shongaloo
Nikki Reeves	Branch Manager Carter Credit	Kristin Cole	CNO, SMC
Kindle Masters	Board Member	Pete Johnson	CEO, SMC
Brian Griffin	CFO, SMC	Vicky Shyne	Retired Child Welfare
Lisa Smith	Counselor	Diane Blake	Marketer, SMC
Derek Melancon	HRD, SMC . Marketing	Mary Armwood	Nurse Educator
Raymond Robertson	Retired Pharmacist	Karen Budwah, RN	Geriatric Psych

### III. Results and Findings

#### Demographics

The graphics below compare and contrast population makeup of Springhill Medical Center’s medical service area as identified by the US Census data, 2017 est. with findings of the Community Health Survey.

- Race/Ethnicity

Figure 1 represents the makeup of the primary medical service area based on data compiled from the estimated 2020 Census data. Figure 2 shows the racial makeup based on data collected by the Community Health Survey. More Caucasian population completed the survey than African American.

Figure 1

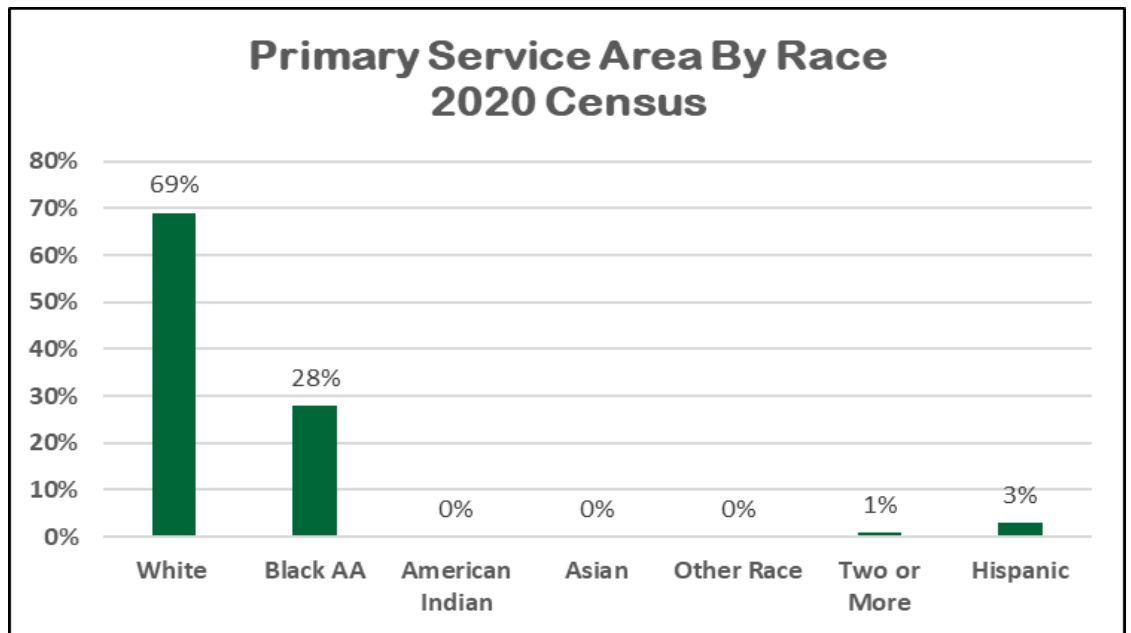
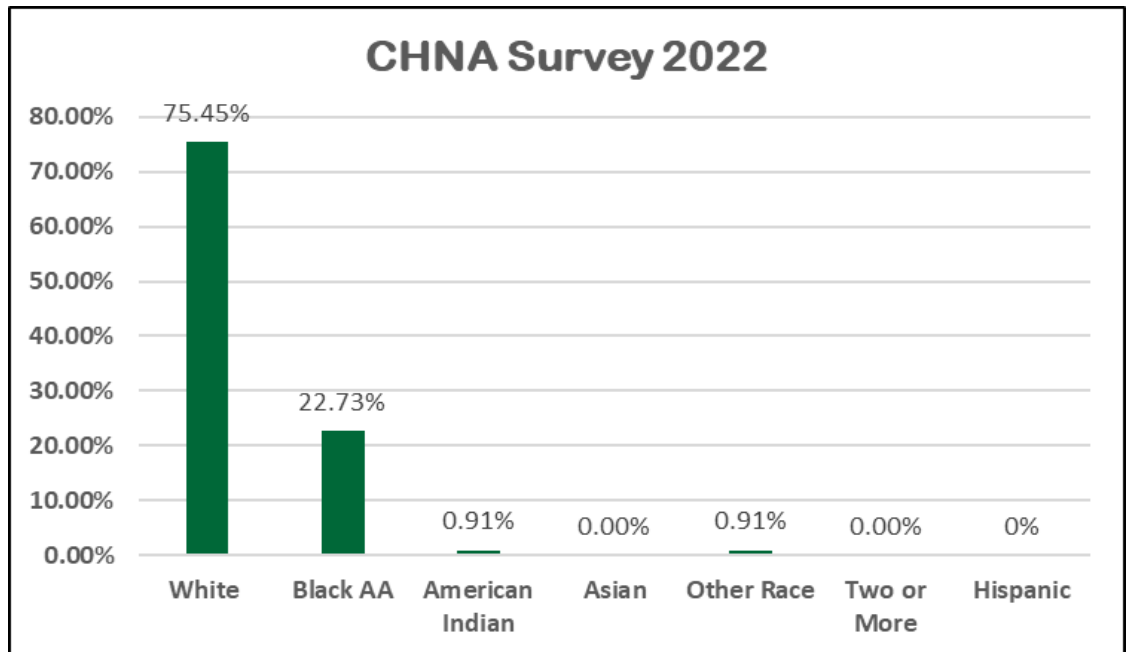


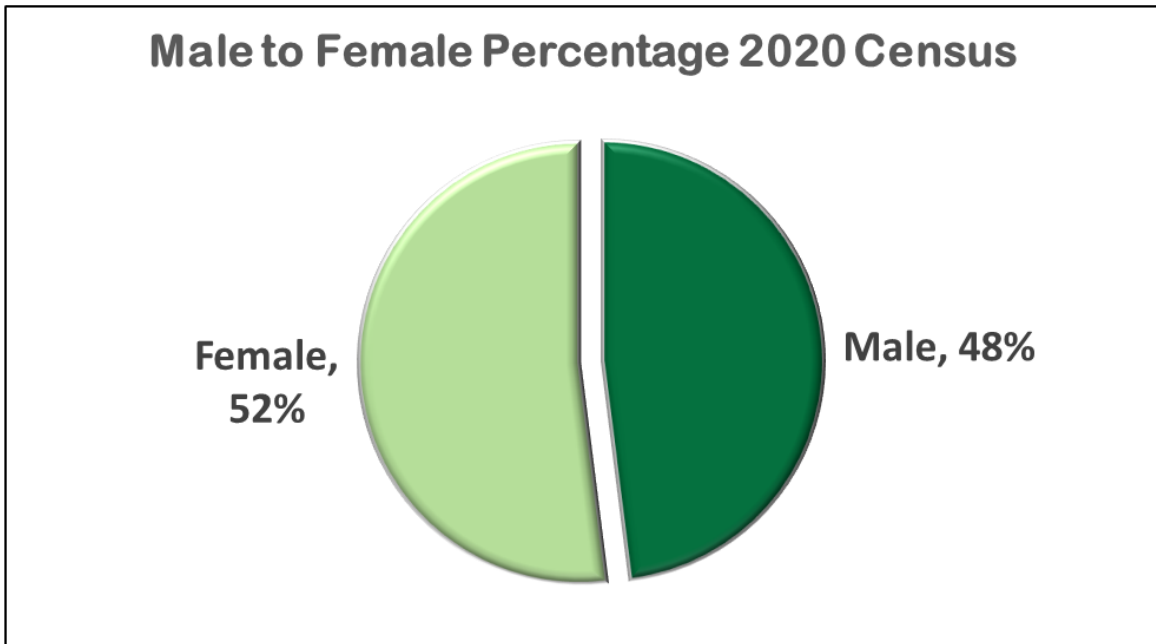
Figure 2



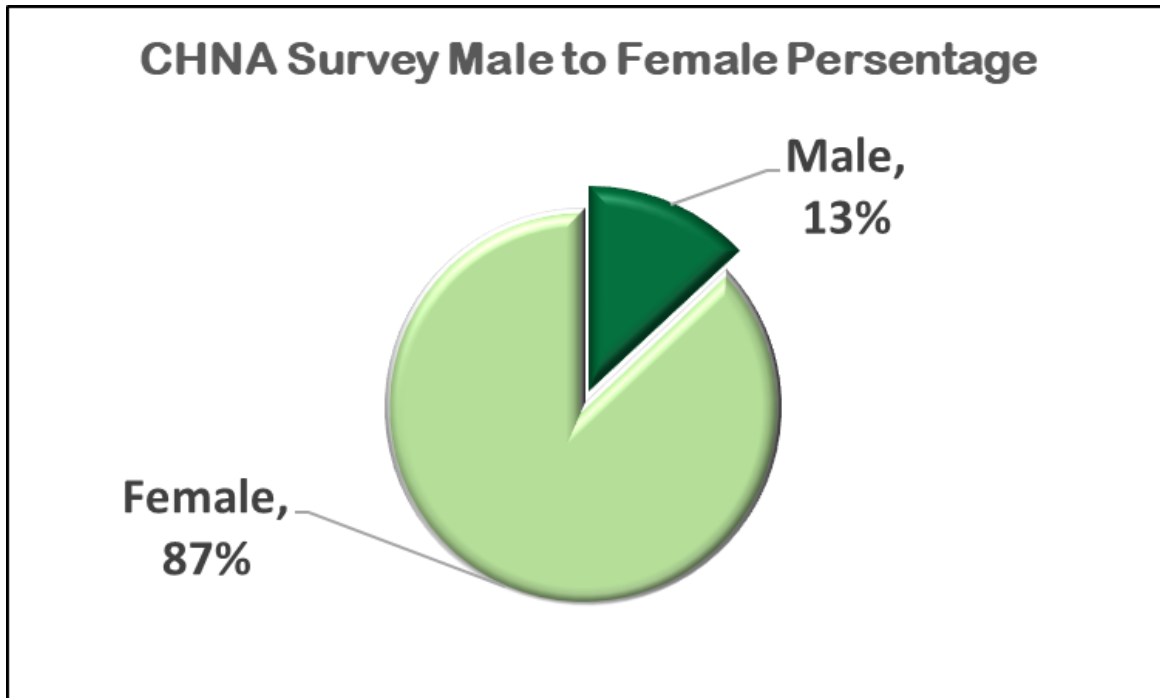
- Gender

Figure 3 displays the gender makeup of the primary medical service area population based on the 2020 estimated Census. Figure 4 represents the gender makeup of the Community Health Needs Survey respondents. At 87%, females are overrepresented among the Community Health Needs Assessment respondents.

**Figure 3**



**Figure 4**

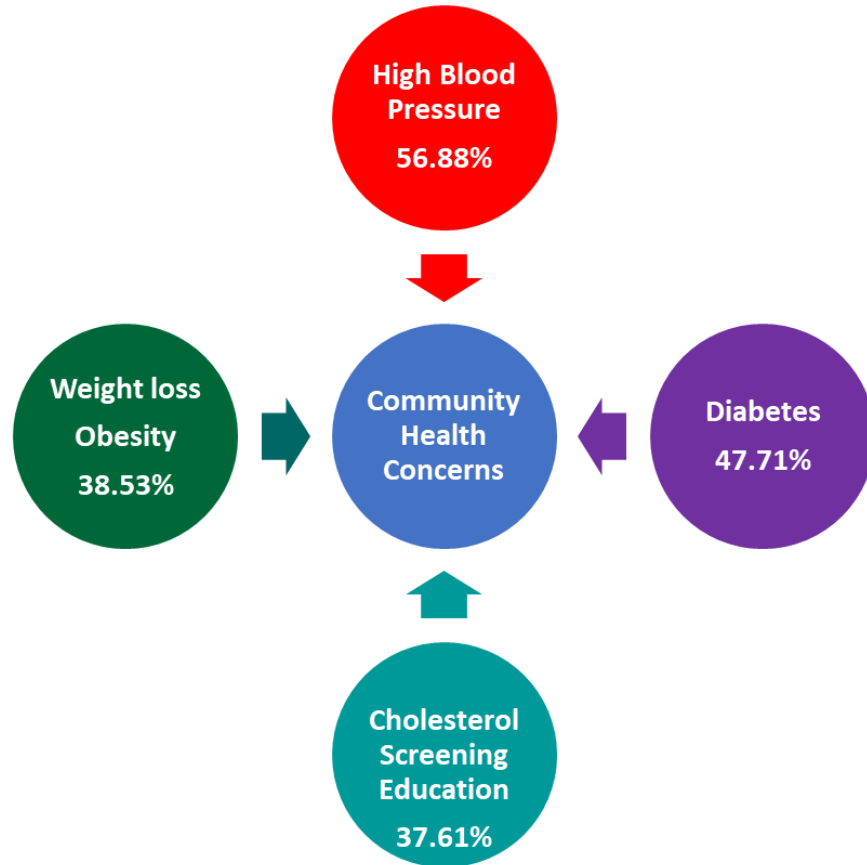




## Identified Health Needs of the Community

Community Health Needs respondents indicated that the most commonly occurring conditions, diseases, or challenges with which they believe need to be focused on. Figure 5 identifies

Figure 5



Based on the methodology and criteria described in Section II and survey data, the top four Springhill Medical Center priority health needs are:

- Wellness / Education (More free screenings)
- Obesity (Weight loss and Nutrition)
- Diabetes / Education / Prevention
- Cholesterol / Blood Pressure Screenings (This ties with wellness screenings)
- Physicians (Specialty - Optometrist, Dentist, Surgeon)

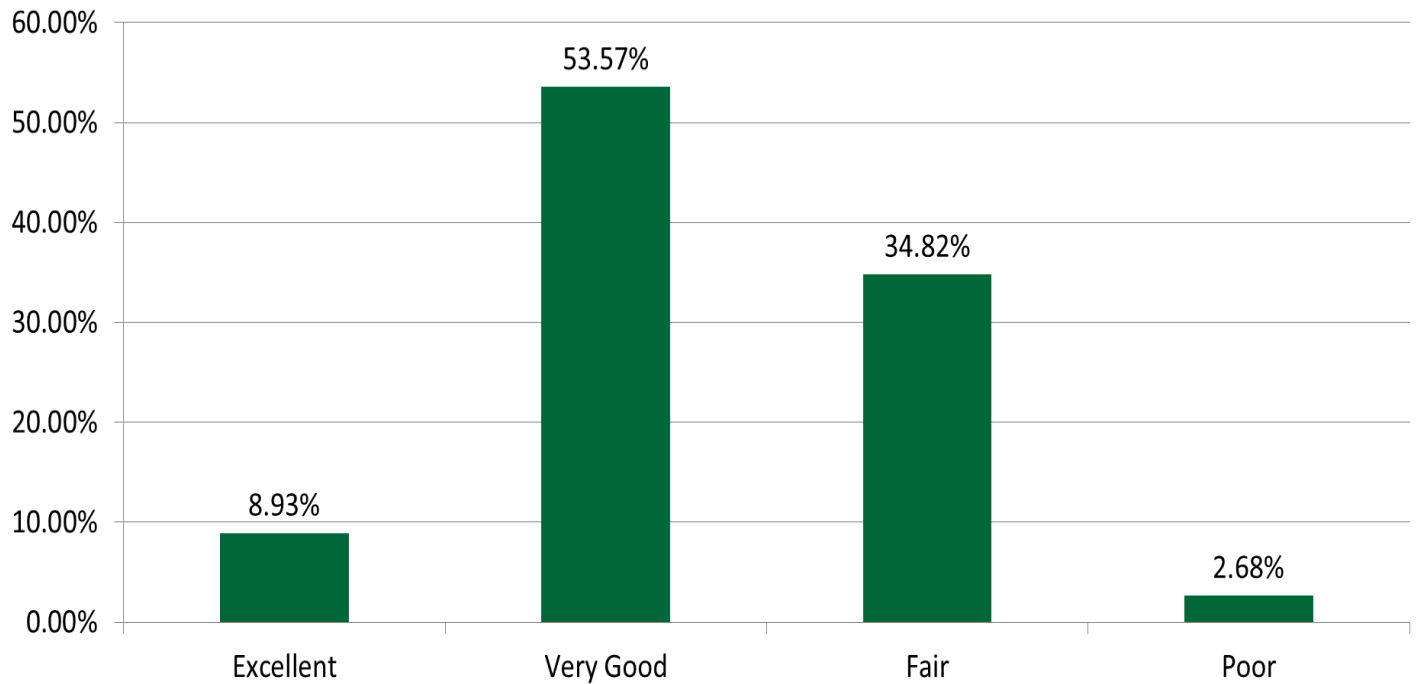
**Identified Health Needs of the Community** (Community data was very comparable. Overall Webster Parish was utilized for data to demonstrate the needs.)



**Wellness**

The Community Health Needs Survey indicated that Wellness is considered a high priority among those surveyed. Wellness encompasses many areas including Obesity, High Blood Pressure, High Cholesterol, Physical Activity, and Diabetes. To first understand what we need to provide for Wellness we need to look at these areas, starting with Poor or Fair Health. The CHNA survey indicated the following:

How would you describe your overall health?



## Poor or Fair Health

In this report area, the estimated prevalence of fair or poor health among adults aged 18 years and older was 30.40%. In Webster Parish. This value is based on the crude number of adults who self-report their general health status as “fair” or “poor.” The local survey indicated that 37.5% were in “fair” or “poor” health in our survey area.

## Health Status



## Webster Parish

CARES HQ 2022

With almost one third of the population in Webster Parish indicating that they are in “fair or poor” health, it becomes very apparent that wellness and education needs to be one of the top priorities. Springhill Medical Center’s Doctors Clinic offers an Accountable Care Organization (ACO) providing a sustainable population health management plan to provide better coordinated care for the communities we serve helping to reduce the cost of care. However, this program only reaches one segment of the population. Many young people have health issues such as obesity, diabetes high blood pressure and mental health issues, the need to reach these individuals becomes very apparent.



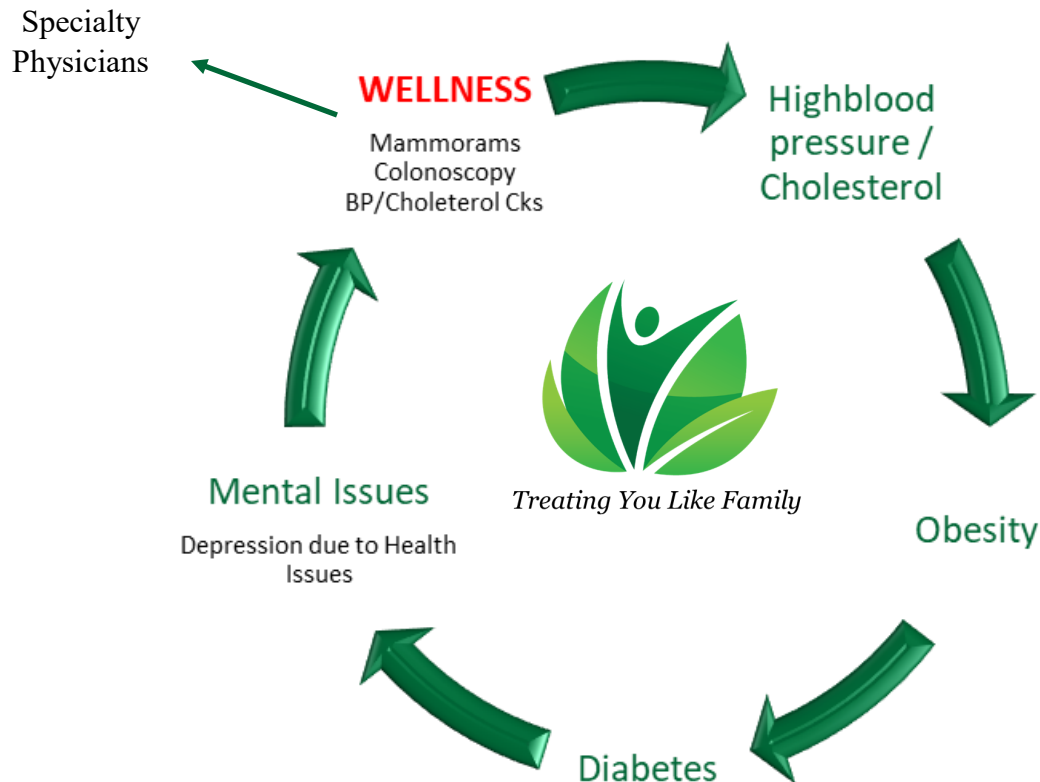
## Wellness Defined

*All Indicators Lead To Wellness*

As the hospital conducted its 2022 CHNA meetings and survey it became very apparent that many of the issues that the community is facing could be addressed under the heading of “Wellness & Education” To understand this need it is important to look at the following areas and assess the needs for “Wellness Education and Prevention”. The areas that the committee and the survey indicated are as follows:

1. High Blood Pressure & Cholesterol (This ties into Heart Disease)
2. Weight Loss and prevention of Obesity in the population
3. Diabetes (This would tie back to Obesity)
4. Mental Illness was indicated as an issue for the younger population.

*Specialty Physicians is an off shoot of wellness. The more we can offer the better for our service area.*



# Exploring the top needs

## Statistics and Information



**High Blood Pressure /  
Cholesterol /  
Cardiovascular**

**Obesity**



**Diabetes**

**Mental Illness**



## Chronic Conditions - High Blood Pressure (Medicare Population)

The National Intitule of Health (NIH) reports that high blood pressure affects one in three U.S. adults. Over time, it can damage the heart, blood vessels, kidneys, and other parts of the body. Complications can include heart attacks, heart failure, stroke, and chronic kidney disease. In addition, the NIH states that people with high cholesterol have an increased risk of heart attack or stroke.

Many factors affect both high blood pressure and high cholesterol. Among them are poor diet, weight, physical activity and genetics.

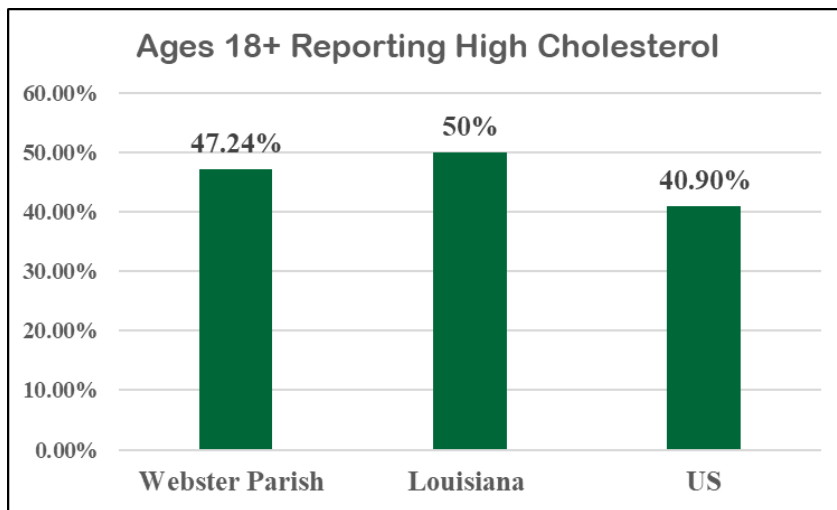
This indicator reports the number and percentage of the Medicare fee-for-service population with hypertension (high blood pressure). Data is based upon Medicare’s administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Within the report area, there were 4,284 beneficiaries with hypertension (high blood pressure) based on administrative claims data. This represents 64.3% of the total Medicare fee-for-service beneficiaries.

## High Cholesterol

**Population 18+** with High Cholesterol for Webster Parish is slightly less than for the state of Louisiana, while the US was at 41% for the 2021 year.

*Stats from America’s Health Rankings*





## HYPERTENSION IN THE UNITED STATES, 2017–2018

**Adult  
hypertension  
is highest  
among**



**Non-Hispanic black 57.1%**

**Non-Hispanic white 43.6%**

**Hispanic 43.7%**

SOURCE: National Center for Health Statistics, National Health and Nutrition Examination Survey, 2017–2018.  
For more information, visit <https://www.cdc.gov/nchs/products/databriefs/db364.htm>.

CS315497



## CHOLESTEROL IN THE UNITED STATES, 2015–2018



**Women have higher levels  
of good cholesterol  
(high-density lipoprotein cholesterol)  
than men**

SOURCE: National Center for Health Statistics, National Health and Nutrition Examination Survey, 2015–2018.  
For more information, visit <https://www.cdc.gov/nchs/products/databriefs/db363.htm>.

CS315547





## **Chronic Conditions - Coronary Heart Disease (Medicare Population)**

This indicator reports the number and percentage of the Medicare fee-for-service population with ischemic heart disease. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Within the report area, there were 2,111 beneficiaries with ischemic heart disease based on administrative claims data in the latest report year. This represents 31.7% of the total Medicare fee-for-service beneficiaries.

## **Mortality - Coronary Heart Disease**

This indicator reports the 2016-2020 five-year average rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates This indicator is relevant because coronary heart disease is a leading cause of death in the United States.

Within the report area, there are a total of 401 deaths due to coronary heart disease. This represents an age-adjusted deathrate of 142.0 per every 100,000 total population.

Coronary Heart Disease is many times a result of not properly monitoring, blood pressure, cholesterol and weight.



## **Obesity**

The second indicator to come from the CHNA. The local survey indicated that 39% of those surveyed wanted weight loss help.

This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Respondents were considered obese if their Body Mass Index (BMI) was 30 or greater. Body mass index (weight [kg]/height [m]<sup>2</sup>) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Data would indicate that the prevalence of Obesity is continuing to increase. However, Webster Parish has decreased slightly over the years with a sharp decline in 2017. This could be driven by a lack of data.

The next four maps show the % of Obesity in Louisiana by Parish and Arkansas by County. (Figure 1) and the amount of physical activity by state and parish/county. (Figure 2)



Figures 1





Figures 2





## OBESITY IN THE UNITED STATES, 1999–2018



**Obesity has increased among adults**

SOURCE: National Center for Health Statistics, National Health and Nutrition Examination Survey.  
For more information, visit <https://www.cdc.gov/nchs/products/databriefs/db360.htm>.

CS31976



## **Chronic Conditions - Diabetes (Adult)**

This indicator reports the number and percentage of adults age 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

The local survey indicated that 35% of the respondents would like more information on diabetes and 47% of the respondents would like to have some sort of screenings offered to the public.

The prevalence of diabetes continues to grow in the US . The state of Louisiana appears to have leveled off from 2015 until 2019. Both Louisiana and Webster Parish have higher incidents of diabetes than the US. Diabetes continues to be an issue in the US, Louisiana and Webster Parish due to several reasons which include unhealthily eating habits. The committee and survey both indicated that they would like for the hospital to provide more free screenings in the community including diabetes

The next two maps show the age-adjusted percentage of adults 20+ diagnosed with diabetes for Louisiana and Arkansas. (figures 3)

Figure 3





## HEALTH OF AMERICAN INDIAN OR ALASKAN NATIVE ADULTS IN RURAL AND URBAN AREAS, 2014–2018

**American Indian or Alaskan Native adults living in rural areas are more likely to have diabetes**

compared with those living in the most urban areas

**RURAL**  
18.9%

**MOST URBAN**  
13.7%



SOURCE: National Center for Health Statistics, National Health Interview Survey, 2014–2018.  
For more information, visit [www.cdc.gov/nchs/products/databriefs/db372.htm](http://www.cdc.gov/nchs/products/databriefs/db372.htm).



C8319264

## **Mental Health / Depression / Suicide**

Community Health Needs Assessment Committee members identified mental illness / suicide as a high priority for our area. Mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” Mental illness is defined as “collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning.”

Mental health and physical health care have a strong correlation. Mental health plays a major role in people’s ability to maintain good physical health. Poor mental health and physical health run on a vicious cycle. Mental illnesses can inhibit individuals in participating in physically healthy behaviors. In turn, poor physical health can seriously impact mental health, causing the individual to not take part in treatment and recovery of chronic diseases.

Data from Mental Health America shows the ranking of each state. The maps below show the ranking of mental illness. The higher the ranking the higher prevalence of mental illness and a lower rate of access to mental health care. (Figure 1: Adult Mental Illness, Figure 2: Overall Mental Illness)



States that are ranked 1-13 have a lower prevalence of mental illness and higher rates of access to care for adults. States that are ranked 39-51 indicate that adults have a higher prevalence of mental illness and lower rates of access to care.

The 7 measures that make up the Adult Ranking include:

1. Adults with Any Mental Illness (AMI)
2. Adults with Substance Use Disorder in the Past Year
3. Adults with Serious Thoughts of Suicide
4. Adults with AMI who are Uninsured
5. Adults with AMI who Did Not Receive Treatment
6. Adults with AMI Reporting Unmet Need
7. Adults with Disability Who Could Not See a Doctor Due to Costs

19% of adults are experiencing a mental illness. **Equivalent to over 47 million Americans.** Using the 19% figure that translates into nearly 4,000 adults age 20+ suffering with a mental illness in our service area.

4.55% are experiencing a severe mental illness, or 900 people in our service area.

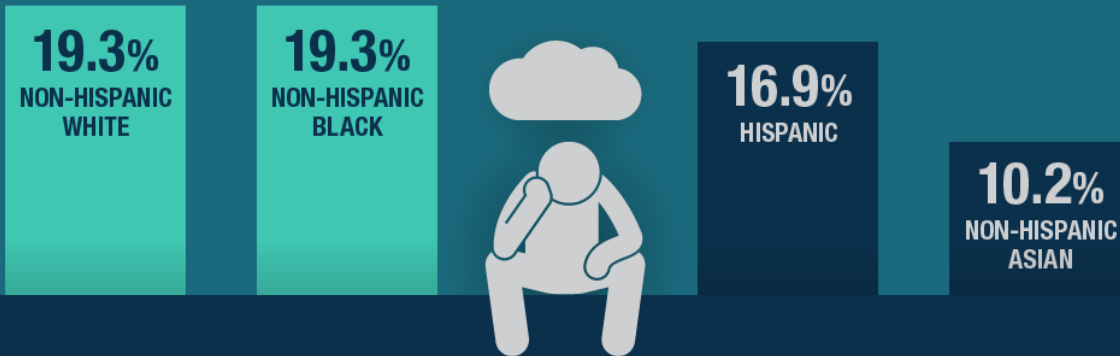
The state of prevalence of adult mental illness ranges from 16.14% in New Jersey to 25.25% in Utah.

According to SAMHSA, “any Mental Illness (AMI) is defined as having a diagnosable mental, behavioral, or emotional disorder, other than a development or substance use disorder. Any mental illness includes persons who have mild mental illness, moderate mental illness, and serious mental illness.

In reviewing the data from Mental Health America, both Arkansas and Louisiana rank as states that have the lowest rate to Mental Health Services access. Louisiana is ranked as one of the higher states with Mental Illness while Arkansas is ranked a little better.

## DEPRESSION SYMPTOMS AMONG U.S. ADULTS, 2019

Non-Hispanic white and non-Hispanic black adults were most likely to experience any severity of depression symptoms in the previous 2 weeks



SOURCE: National Center for Health Statistics, National Health Interview Survey, 2019.  
For more information, visit [www.cdc.gov/nchs/products/databriefs/db379.htm](http://www.cdc.gov/nchs/products/databriefs/db379.htm).



## MENTAL HEALTH TREATMENT AMONG U.S. ADULTS AND CHILDREN, 2019

Women were more likely than men while boys were more likely than girls to take prescription medication for mental health in the past 12 months



SOURCE: National Center for Health Statistics, National Health Interview Survey, 2019.  
For more information on adult mental health treatment, visit [www.cdc.gov/nchs/products/databriefs/db380.htm](http://www.cdc.gov/nchs/products/databriefs/db380.htm).  
For more information on child mental health treatment, visit [www.cdc.gov/nchs/products/databriefs/db381.htm](http://www.cdc.gov/nchs/products/databriefs/db381.htm).





# URBAN-RURAL DIFFERENCES IN SUICIDE RATES: UNITED STATES, 2000-2018

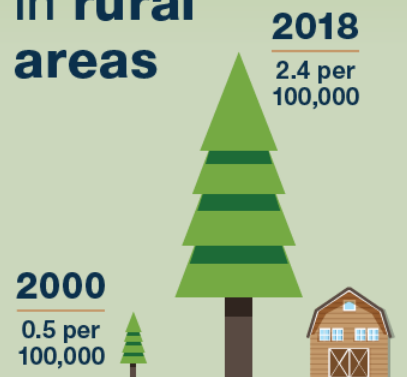
**Suffocation-related  
suicide rates  
among  
females**



more than  
**doubled** in  
urban areas



and more than  
**quadrupled**  
in rural  
areas



SOURCE: National Center for Health Statistics, National Vital Statistics System, 2000-2018.  
For more information, visit [www.cdc.gov/nchs/products/databriefs/db373.htm](http://www.cdc.gov/nchs/products/databriefs/db373.htm).



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## IV. Committee Input

(Things that the committee felt were important to serving the community.)

### All Indicators Lead to Wellness

*As the committee worked through issues and solutions for the health of the communities we serve it became very apparent that promoting Wellness and providing Education was a major key to a healthier community. Whether providing free testing for blood pressure and cholesterol to prevent heart disease to preventive testing such as mammogram and colonoscopy to catch incidents of cancer before they become to severe. All lead to Wellness!*

### Wellness & Education

- SMC to be lead the way to a Healthy Community
- Sponsor a Walk/Run
- Diabetes Class
- Services Education - What do we offer
- Catch young parents at the places they go - Ballparks, Schools, etc....
- Nutrition / Heart Health classes
- Health Fairs in the Community - 4 times a year (Free BP/Cholesterol / A1C
- Lunch & Learn
- Community Day

### Obesity

- Nutrition Education
- Weight loss Education (Maybe start a local group that meets weekly)
- Exercise - Educate the public on places they can go to exercise
- Start a bike riding, walking or running club

### Diabetes

- Hold a class for newly diagnosed diabetics
- Eating for diabetes control

### Mental Health

- Promote the Tele Psych and that we can see children down to 5 years.
- Don't have to travel for help.

### Specialty Services

- Need another Dentist in the community
- Ophthalmologist
- Promote CT/MRI/Echo/Lab for local services provided for those traveling to get services. Quick turn around.
- Transportation
- Another Physical Therapist

## V. Community Resources Available to Assist in Addressing Identified Needs

Existing Programs and Resources to Address Top Four Identified Community Needs

### High Blood Pressure / Cholesterol / Heart Disease:

The American Heart Association offers a wide variety of information on Blood Pressure, Cholesterol and heart disease under health topics. <https://www.heart.org>.

Springhill Medical Center and it's clinics offer free blood pressure checks at the clinics as well as events in the community. Senior Friends members may have their cholesterol checked at no cost.

### Wellness Screenings and Education

The US National Library of Medicine offers information about Wellness and Lifestyle on its website under Health Topics / Wellness and Lifestyle at:

<https://medlineplus.gov/wellnessandlifestyle.html>

Springhill Medical Center offers some free health screenings in the community at various times of the year, these include blood pressure and cholesterol.

### Overweight / Obesity

The CDC offers information on being overweight and obese at their website. Offering both information on the effects of being over weight and obese at:

<https://www.cdc.gov/obesity/data/adult.html>

A Weight Watchers Studio is available at 119 Pine Street in Minden, 71055. (28.42 miles from Springhill)

All Hours Fitness in Springhill is available for exercise equipment. Located at 405 Arkansas St. Springhill, LA 71075 (318) 539-2335. [All hours fitness website](#)

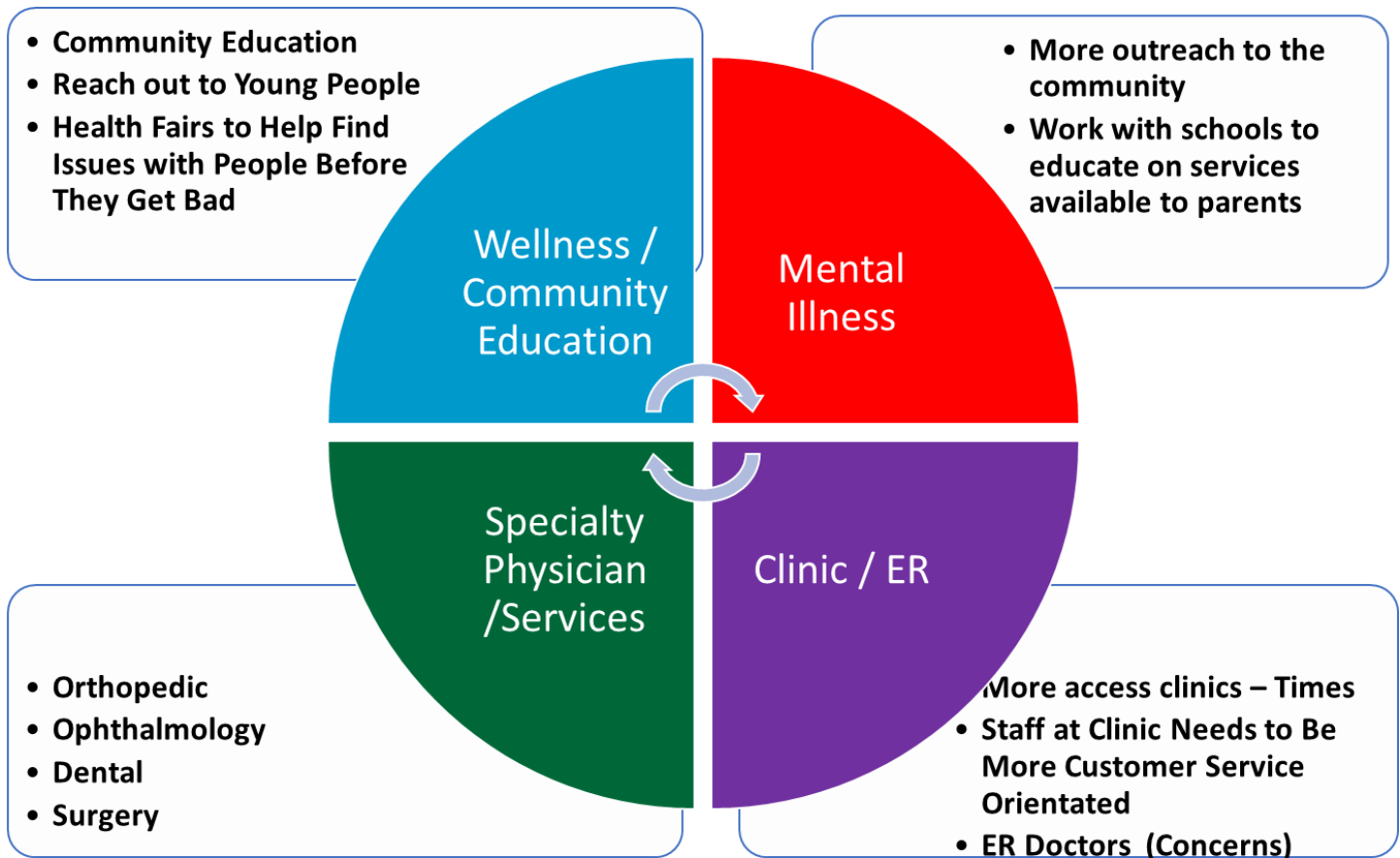
### Diabetes

Louisiana has the 5th highest diabetes rate in the nation. "Well-Ahead" Louisiana offers information on healthy eating and diabetes management. It also offers links to numerous resources on diabetes, including the [CDC](#), the [American Diabetes Association](#) and others.

[Well-Ahead Louisiana](#).



# CHNA Committee Recommendations

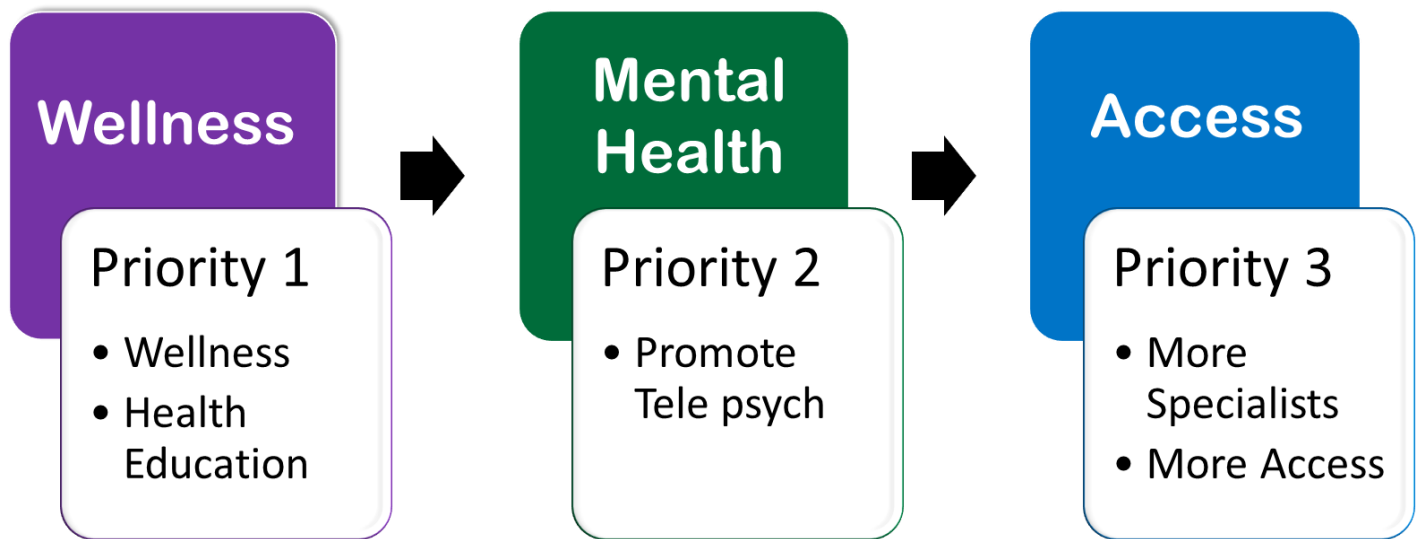


## Additional Under the Indicator of Wellness

- Blood pressure and cholesterol screenings
- Diabetes education
- Obesity - Nutrition / Exercise / Lifestyle Change

## Promotion

- Promote the services offered at SMC and that the hospital can provide most any test needed and send the results to their provider. CT, MRI, ECHO, Lab Services, Physical Therapy.



The CHNA Committee came up with numerous priorities, however the top three (3) were chosen . Each one of the priorities compliments the other and as such should be marketed in conjunction with each other.

**I. When working with the CHNA Committee, there(3) factors needed to be considered to be able to implement the recommended priorities.**

- Size & prevalence of the issue
- Effectiveness of interventions
- The hospital’s ability to address the need

**II. The CHNA Committee adopted three (3) areas of opportunity to improve overall community health and awareness. These are very similar to the 2019 CHNA.**

- **Community Education and Wellness**
  - Educate the community on services
  - Educate on Healthy Lifestyles
  - Provide preventative health screenings in communities Served by SMC
- **Access to Primary Care MD’s and Specialists / Physician Response**
  - Add another Primary Care MD or DO
  - Promote Specialty Services
  - Better Response From Current Providers
- **Mental Health Services**
  - Promote Tele psych
  - Promote Geriatric Psych

## Implementation

**Strategy 1 / Community Wellness & Education:** As with the 2019 CHNA the committee for 2022 felt that the community needed more education on Wellness and services available at Springhill Medical Center and its clinics. (With COVID-19 controls in place in 2020 and 2021 the hospital was unable to complete this indicator, as the focus was on patient safety.)

The 2022 committee felt that more community involvement in providing free wellness testing and education on the benefits of getting wellness screenings would benefit the community as well as the hospital. To achieve **Strategy 1**, the following strategies were suggested for review by the Board of Directors of SMC at the annual Strategic Planning Session.

- Advertise services using more electronic media such as GEO fencing, Facebook, as well as direct community involvement. This will be achieved by, but are not limited to:
  - Promote the successes and organization events on line using one of the above media as well as the current billboards
  - More marketing at events in the area, businesses and small community groups
  - Provide free wellness screenings for blood pressure, cholesterol, diabetes as a way to encourage people to take advantage of all the screenings the hospital and clinics can provide. This would also serve as a platform for education of these wellness screenings through the ACO program at the clinics.
  - Statistics show that Mental Health resources are limited in the communities SMC serves. The committee suggested that SMC promote the new Tele Psych services offered to children ages 5 and up as well as adults 19+.



**Strategy 2 / Mental Illness / Access:** Access to Mental Health Services have been minimal in the rural parts of NW Louisiana and SW Arkansas. In 2019, Mental Health Services especially suicide were a focus by the committee then. With COVID-19 restrictions and closures such as schools the committee felt that there was an even greater need for services to help those with Mental Illness. Statistics show that about 19% of the population in SMC’s service area have issues with Mental Illness and limited access to those services due to the rural area.

To achieve Strategy 2 the committee recommended the following:

1. Promote the Tele Psych program through the media including website, Facebook and other electronic means.
2. Reach out to the young adults with children at events they go to. Ballparks, schools, churches. Provide information about the service offered at the Doctors Clinic for children 5+ and adults 19+.
3. Work to provide the same services at SMC’s other clinics.

## Children and Mental Health

Is this just a stage?

Know when to seek help for your child.



**Strategy 3 / More Specialty Services:** Access to specialty services and providers continues to be a key focus point. It came as no surprise again, that in 2022, access to specialty care is on the priority list. In both the 2016 and 2019 CNHA more access to specialty care providers was a focal point. Since the 2019 CHNA SMC's family medicine providers has stabilized in all our clinics. The current plan is to add one more family medicine MD. Specialist physicians remains a high priority for the community. With the death of our visiting ophthalmologist and a full-time dentist and the need for orthopedics a gap in care has become apparent. The population is having to travel for care. To achieve **Strategy 3**, the following strategies were suggested for review by the Board of Directors of SMC at the annual Strategic Planning Session.

- Work with area healthcare companies to find the needed specialists. Willis Knighton, Christus and Ochsners.
- Utilize the tuition reimbursement availability through the HPSA to recruit a dentist to the area.
- Recruit a Surgeon to do basic surgery.
- Promote the new specialists in the communities we serve.
- Promote the ability to provide services in the community, helping to prevent the populace from traveling to Shreveport / Bossier for those services that may take weeks to receive.



<b>Name of Facility</b>	<b>Phone Number</b>
<b>Transportation</b>	
Advanced	539-5499
Pafford	539-3900
Life Air	800-762-9562
Webster Transport	539-5696
Springhill City Transport	539-5681
<b>Service Area Hospice:</b>	
Agape	371-1140
Amedisys	1-318-868-8788
LifePath Hospice	866-257-5711
St. Joseph	888-731-3575
Serenity	870-901-0500
Peachtree	1-870-773-4353
Life Touch Hospice	870-234-9112
Lifetouch Hospice house	870-862-0337
Southern Care	318-227-9160
Regional Hospice	318-524-1046

<b>Service Area Home Health</b>	
Amedisys	318-868-8788
Professional	318-539-2501
Louisiana Homecare	318-539-5980
National	318-539-4300
Supra	318-865-3111
Minden Med	318-377-4663
Heritage	800-672-8911
Stat	318-371-3673
Columbia	870-234-6101
Magnolia	870-235-3598
Medistar	318-742-4213
Wentworth Place	870-234-1361
Integrity	870-773-4900
Trinity	888-371-9989
<b>Service Area Nursing Homes</b>	
Summit	870-694-3781
Carrington Place	539-3956

<b>Miscellaneous:</b>	
<b>Arkansas Adult Protection</b>	1-800-482-8049
<b>Louisiana Elder Protection</b>	1-800-259-5284
<b>LA Adult Protection</b>	1-800-898-4910
<b>La Dept. of Children and Family Services</b>	1-855-4LA-KIDS
	(855-452-5437)
<b>Alcoholics Anonymous</b>	209 S Main St, Springhill LA
<b>Arkansas Adult Protection</b>	1-800-482-8049
	<a href="http://www.aradultprotection.com">www.aradultprotection.com</a>
<b>Arkansas Child Abuse Dept of Human Services</b>	1-800-482-5964 www.stoparchildabuse.com
<b>Bradley Clinic</b>	(870) 894-3366
<b>Child Protection - Louisiana</b>	LARHIX-1-855-452-5437
<b>Domestic Violence</b>	Hotline 1-800-799-7233 (SAFE)
	TTY Phone: 1800-787-3224
	Male Victims: 1888-743-5754
	<a href="http://www.thehotline.org">www.thehotline.org</a>
<b>Elderly Protective Services</b>	1-800-259-5884
<b>Families Helping Families of Northwest LA</b>	1-888-735-3722
<b>Family Crisis (Domestic Abuse) Providence House</b>	318-226-5015
<b>LA Domestic Hotline</b>	1-888-411-1333
	(rings to Providence House)
<b>LA Adult Abuse (Physically/Mentally and</b>	1-800-898-4910 or
	225-342-9057
<b>LA Dept. of Children &amp; Family Services</b>	Hotline: 1-800-422-4453
<b>Medicaid Offices</b>	1-888-342-6207
<b>Narcotics Anonymous</b>	209 S Main St, Springhill LA
<b>North Caddo Clinic</b>	(318) 326-7272
<b>Sexual Assault Nurse Examiner SANE Nurse (Patient Advocacy)</b>	National #:1-800-656-4673 <a href="http://www.rainn.org">www.rainn.org</a>
<b>SPARC Life Services</b>	(318) 847-4356
<b>Suicide Prevention</b>	National: 1-800-273-8255
	<a href="http://www.suicidepreventionlifeline.org">www.suicidepreventionlifeline.org</a>
<b>Webster Parish Child Protection</b>	318-371-3001
<b>Wild Goose Ministries</b>	318-578-2262

