



Deaconess Health System

FY2016-2017 Community Health Needs Assessment Update
to the 2016 CHNA: Warrick County

FY 2016 COMMUNITY HEALTH NEEDS ASSESSMENT
WARRICK COUNTY, INDIANA

A Collaborative Assessment by: Deaconess Health System, ECHO Community Health Care, St. Mary's Health, United Way of Southwestern Indiana, Vanderburgh County Health Department, and Welborn Baptist Foundation



Table of Contents

FY2016-2017 CHNA Update—Introduction	3
2016 Prioritized Health Needs and Implementation Plans: Warrick County	4
Other Significant Community Health Needs	8
FY16-17 Activities and Outcomes—Behavioral Health	10
Asset Mapping Report	11
Youth Mental Health First Aid (Southwest Indiana Project AWARE)	16
Substance Abuse Initiatives	18
Deaconess Activities and Initiatives	20
Metrics and Goals	21
FY16-17 Activities and Outcomes—Cancer (Breast and Prostate)	24
Breast Cancer	25
Prostate Cancer	32
Deaconess Activities and Initiatives	37
Metrics and Goals	41
FY16-17 Activities and Outcomes—Exercise, Nutrition, and Weight	42
Pre-Diabetes	43
Built Environment and Nutrition	44
Deaconess Activities and Initiatives	45
Metrics and Goals	47
Primary Data Collection—Community Input	48
2016 CHNA Committee and Subcommittee Structure	49
Subcommittee Rosters	50

FY2016-2017 CHNA Update — Introduction

Evansville, Indiana's two health systems, Deaconess and St. Mary's (now St. Vincent Evansville), began laying the foundation for a new community needs assessment in 2010. Tim Flesch, CEO of St. Mary's Health System, and Linda White, CEO of Deaconess Health System, agreed that it made sense for the local hospitals to share a common needs assessment for future planning purposes. St. Mary's and Deaconess extended an invitation to ECHO Health, a Federally Qualified Health Center, the United Way, and the Welborn Baptist Foundation to become co-sponsors of the assessment.

For the 2016 CHNA, the Vanderburgh County Health Department joined our collaborative and together we planned and executed the second community health needs assessment. This document provides a summary of the work accomplished in year one of the new plan.

CHNA 2016 Vendor

Healthy Communities Institute – now part of Midas+, a Xerox Company – was retained by St. Mary's and Deaconess to conduct the 2016 Community Health Needs Assessment (CHNA) for their two service areas of Vanderburgh and Warrick Counties in Indiana and to author the subsequent CHNA reports for each service area.

Based in Berkeley, California, HCI provides customizable, web-based information systems that offer a full range of tools and content to improve community health, and developed the Community Health Needs Assessment Platform. The organization is composed of public health professionals and health IT experts committed to meeting clients' health improvement goals.

CONTACT INFORMATION

For questions regarding the Community Health Needs Assessment, please contact:

Deaconess Marketing Department

600 Mary Street

Evansville, IN 47747

812.450.5000

CHNA@deaconess.com

An electronic version of the Community Health Needs Assessment is publically available at www.deaconess.com/CHNA.

Paper copies of the CHNA are available at zero cost. Email CHNA@deaconess.com to request a copy.

2016 prioritized health needs and implementation plans: Warrick County

St. Mary's and Deaconess called together hospital decision makers, community leaders, and members of the collaborative to prioritize the significant community health needs of Warrick County as identified in the 2016 survey. The group considered several criteria: circle of influence/ability to impact change; opportunity to intervene at a prevention level; magnitude/severity of health issue; and addresses underserved and/or vulnerable populations. **The following three health topics were selected as the top priorities:**

Behavioral Health; Cancer (Breast and Prostate); and Exercise, Nutrition and Weight

Implementation plans for each identified need follow:

CHNA Behavioral Health 2016-2019 Plan: Warrick County

Behavioral Health Services Mapping and Local Survey

- Year one (July 1, 2016 to June 30, 2017) - Conduct service mapping summer/fall 2016; identify duplications, gaps, etc.
- Pending grant funding, prepare and administer local behavioral health survey in spring 2017 with help from USI School of Public Health.

Youth Mental Health First Aid

- Training trainers as well as people in the community will continue throughout the three-year CHNA action period.
- Activities will continue to follow grant guidelines.
- Reach Healthy People 2020 goal of 10.2 age-adjusted death rate per 100,000 population due to suicide.

Substance Abuse

A sub-group needs to meet and decide what specific actions/tasks we want to pursue for the next three years.

2016 prioritized health needs and implementation plans: Warrick County

CHNA Cancer (Breast and Prostate) 2016-2019 Plan: Warrick County

Breast Cancer

Year One: Educate, Investigate, Advocate

A. Educate

- i. Educate women on the importance of screening mammograms.
- ii. Educate women on resources available to receive screening mammograms.
- iii. Educate women on financial resources to pay for screening mammograms.

B. Investigate

- i. ICD-10 billing and coding issues for screening mammograms.
- ii. Problems with H.I.P./Obamacare not paying for screening mammograms or charging co-pays for screening mammograms.
- iii. Hot spots in Warrick County with a disproportionate number of stage 3 and/or 4 breast cancer and deaths due to breast cancer.

C. Advocate

- i. Share information about community screenings.
- ii. Share information about local and regional resources for those with or affected by breast cancer.

Year Two: Increase Screenings

A. Set up community screenings throughout Warrick County.

- i. Use mobile mammography.
- ii. Use mammography resources at hospitals in Warrick County.
- iii. Coordinate with Warrick County resources such as Tri-Cap and Warrick County Coalition that Cares, to increase the number of women having mammograms.

B. Identify a time period and coordinate a county-wide push for women to schedule and/or have their screening mammogram.

Year Three: Reduce Mortality

A. Examine the National Cancer Institute's age-adjusted death rate due to breast cancer for Warrick County. Compare stats over time, concentrating on 2016, 2017, and 2018 data.

B. Reach the Healthy People 2020 goal of 20.7 deaths per 100,000 females due to breast cancer.

2016 prioritized health needs and implementation plans: Warrick County

CHNA Cancer (Breast and Prostate) 2016-2019 Plan: Warrick County

Prostate Cancer

Year One: Educate, Investigate, Advocate

A. Educate

- i. Educate men about the recommended screenings related to prostate cancer.
- ii. Educate men to talk to their doctor at age 50 about prostate cancer screenings.

B. Investigate

- i. Determine current recommended screenings for prostate cancer.
- ii. Hot spots in Warrick County with a disproportionate number of stage 3 and/or 4 prostate cancer and deaths due to prostate cancer.

C. Advocate

- i. Share information about community resources for those with and affected by prostate cancer.
- ii. Advocate for recommended prostate screening tests in age-appropriate men.

Year Two: Increase Screenings

- A. Work with non-profit groups and other appropriate partners to host a prostate screening event in Warrick County.
- B. Identify a time period and coordinate a county-wide push for men to schedule and/or have recommended prostate screenings.

Year Three: Reduce Mortality

- A. Examine the National Cancer Institute's age-adjusted death rate due to prostate cancer for Warrick County.
Compare stats over time, concentrating on 2016, 2017, and 2018 data.
- B. Reach the Healthy People 2020 goal of 21.8 deaths per 100,000 males due to prostate cancer.

2016 prioritized health needs and implementation plans: Warrick County

CHNA Exercise, Nutrition, and Weight 2016-2019 Plan: Warrick County

Pre-Diabetes

Year One: Diabetes Coalition

- Assemble diabetes educators and other related professionals. Arrange regularly scheduled meetings of this group.
- Identify trusted sources of information on diabetes that is appropriate and helpful for the general public.
- Work together to coordinate diabetes classes, grant projects, and other activities throughout the community. This avoids multiple events/classes happening at the same time and increases the opportunity for participation.

Year Two: Community-Wide Diabetes Screening

- Use the Diabetes Coalition to organize and implement a community-wide diabetes screening in both Vanderburgh and Warrick Counties.

Year Three: Assessment

- Track and improve Age-Adjusted ER Rate due to Diabetes.
- Track and improve Age-Adjusted Hospitalization Rate due to Diabetes.

Built Environment

- Build community awareness of the definition and importance of “Complete Streets” - specifically the project on North Main Street in Evansville.
- Advocate for built environment features as they come before local and area governments for consideration. This includes sidewalks, bike lanes, etc.
- Build community awareness of the City of Evansville’s Bike and Pedestrian Plan.

Better Nutrition for Toddlers and Pre-School Age Children

- Work with early childhood providers like 4C to educate parents on nutritious food for their toddlers and pre-school age children.
- Coordinate messaging for use throughout the community regarding nutrition/nutritious choices for toddlers and pre-school age children.
- Track SNAP usage over 3 years to see what people are buying.
- Track and improve USDA data for Low-Income Preschool Obesity.

2016 CHNA — Other Significant Community Health Needs

As part of the community health needs assessment prioritization process, the following topics rose to the top of either primary or secondary data analysis.

- **Access to Health Services**
- **Diabetes**
- **Immunizations & Infectious Diseases**
- **Prevention & Safety**
- **Social Environment**

These needs were not selected as one of our priorities for the CHNA plan for the following reasons:

Access to Health Services – Each hospital has its own plan for increasing access to services. This includes physician recruitment strategies, adding new services or facilities, and enhancing technology. We all belong to the Indiana Hospital Association and the American Hospital Association and follow their guidelines and protocols for successful transition into the new value-based health care delivery model. Because a lot of the access work involves proprietary business information, we did not choose it as a focus for our collaborative.

Diabetes – The community has several successful diabetes programs in the inpatient and outpatient environment. As a group, we decided to focus our efforts on the large number of people with “pre-diabetes” instead of those already diagnosed with primarily Type 2 Diabetes. Prevention will yield greater results and better health in the future.

Immunizations and Infectious Disease – The Vanderburgh County Health Department received state grant funds to increase immunization compliance in pediatric and adult populations. The hospitals and clinics in our collaborative also participate in the health department’s immunization initiatives. Making this a priority for the group would be a duplication of effort and prevent us from addressing another community health need.

Prevention and Safety – Both participating hospitals and the health department actively promote safety. During this fiscal year, we focused on ATV safety. Our programs and accomplishments were recognized by the Governor of Indiana in addition to wide spread media coverage. Selecting this as a CHNA priority topic would again be a duplication of effort and keep us from tackling another issue.

Social Environment – Single parent households and child abuse rates fall into the social environment category. We chose to take those two elements and place them in our Maternal, Fetal, Infant and Children’s Health topic area.

FY16-17 Activities and Outcomes (Year 1 of the plan)

Warrick County

Behavioral Health

Cancer (Breast and Prostate)

Exercise, Nutrition, and Weight



FY16-17 Activities and Outcomes (Year 1 of the plan)

Behavioral Health: Warrick County

- Asset Mapping
- Youth Mental Health First Aid (Southwest Indiana Project AWARE)
- Substance Abuse
- Additional Deaconess Activities



Behavioral Health—Asset Mapping Report: Vanderburgh County

The data below came from the 2016 CHNA survey and focus groups we conducted in 2015 and released in 2016. Behavioral health asset mapping was identified by our behavioral health committee as the first step in addressing our poor mental health data and less than favorable community input.

Table 6. Significant Health and Quality of Life Topics for Prioritization

Secondary Data			Primary Data	
Topic Score	Health Topic	Disparities in Data	Community Input <i>(Total KI=9  ; FGD=10 )</i>	Key Themes from Community
Top 5 Health Needs/Concerns from Secondary Data				
2.36	Mental Health & Mental Disorders	Male suicide rate is more than 2x as high as female rate	 	Issues with stigma; correlation to substance abuse and criminal system; perceived lack of adolescent psychiatry services and shortage of providers in general; suicide rate is rising.
Top 4 Needs/Concerns from Community Input				
1.80	Substance Abuse	Men have higher ER & hospitalization rate due to alcohol abuse	 	Abuse of alcohol, marijuana, prescription drugs, heroin, meth and synthetic drugs; smoking rates are high; increase in e-cig use; smoking ban overturned.
1.60	Children's Health	African American boys have higher ER & hospitalization rate due to pediatric asthma	 	Poor nutrition, increase in childhood obesity & diabetes; many kids on free/reduced lunch program; lack of mental health services for adolescents.
1.49	Exercise, Nutrition, & Weight		 	Lack of exercise/active lifestyle; need to increase availability of safe places to be active and education around nutrition; high prevalence of obesity.
1.01	Access to Health Services		 	Barriers to accessing care such as lack of providers, affordability of care, and transportation; coverage gap for "working poor"

Behavioral Health—Asset Mapping Report: Vanderburgh County

1. Do we have enough mental health providers?

Ratio from this assessment is 819:1 or 819 people for every one mental health provider. The 2017 County Rankings report lists Vanderburgh County's provider rate as 560:1—significantly lower than our assessment.

2017 County Rankings report:

Mental health providers - ratio of population to mental health providers

Vanderburgh County - 560:1

Top US Performers - 360:1

Indiana Average - 730:1

2. What kind of providers do we have (license type and service offered)?

For Vanderburgh County, we identified 221 total providers.

- MD/DO (psychiatrist) - 19 providers
- NP/APRN/PhD/PsyD - 33 providers
- MS/MSW/Masters level - 26 providers
- LCAC/LCSW/"L" level - 141 providers
- Bachelor's Degree - 2 providers

3. Who takes Medicaid? There doesn't appear to be enough Medicaid spots to meet demand.

- Behavioral Disorders - 9 organizations accept Medicaid
- Depression/Anxiety -10 organizations accept Medicaid
- Addictions - 10 organizations accept Medicaid
- Psychiatric/Mental Illness - 5 organizations accept Medicaid
- Trauma/Abuse - 7 organizations accept Medicaid

4. What do we do about kids on the Autism spectrum? We are told providers won't treat them.

Autism is not classified as a mental illness. It is a developmental disorder. Autism cannot be cured with therapy. The needs of these patients are different from the needs of mentally ill patients.

5. Does anyone provide testing for IQ and Autism?

Yes, 25 providers representing 5 organizations from our master list provide testing.

- Christopher Vaught, LMHC
- ECHO Community Healthcare John St. Woodson Clinic
- ECHO Community Healthcare Main Campus
- Luzio and Associates
- Midwest Behavioral Health



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

6. What programs exist for adolescents with an addiction?

There is not a local, residential (inpatient) facility for adolescents with a substance abuse problem. There are multiple outpatient resources and programs for this age group.

39 total providers, 9 total facilities

- 7 outpatient facilities with a total of 26 providers
- 1 inpatient/outpatient facility with 8 providers
- 1 pediatric inpatient hospital (Evansville Psychiatric Children’s Center) with 5 providers

Opportunity for improvement = allowing other groups besides law enforcement and Department of Child Services to refer teens to Hillcrest Youth Home. The kids can live there and get treatment for addiction/s.

7. What services do we have for children under age 10 with any mental health diagnosis?

There is 1 inpatient facility for kids under age 10 in Vanderburgh County, Evansville Psychiatric Children’s Center.

They offer:

- Relationships, marriage/family, divorce/family conflict – 1 inpatient organization
- Parent-child issues – 0 inpatient organizations
- behavioral disorders - 1 inpatient organization
- depression/anxiety – 1 inpatient organization
- chemical/substance abuse/recovery – 1 inpatient organization
- other addictions – 0 inpatient organizations
- career and other changes – 0 inpatient organizations
- chronic conditions/eating disorders – 0 inpatient organizations
- psychiatric/mental illness – 1 inpatient organization
- stress/anger management and social skills – 1 inpatient organization
- trauma and abuse – 1 inpatient organization

There are 2 additional inpatient facilities for kids under age 10 in Indiana, Larue D. Carter Memorial Hospital in Indianapolis
HARSHA Behavioral Center in Terre Haute



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

7. What services do we have for children under age 10 with any mental health diagnosis?

There are 26 organizations that provide counseling services for kids under age 10 in Vanderburgh County.

There are 24 outpatient facilities for kids under age 10 in Vanderburgh County

- Relationships, marriage/family, divorce/family conflict – 11 outpatient organizations
- parent-child issues – 10 outpatient organizations
- behavioral disorders – 11 outpatient organizations
- depression/anxiety – 12 outpatient organizations
- chemical/substance abuse/recovery – 7 outpatient organizations
- other addictions – 1 outpatient organization
- career and other changes – 4 outpatient organizations
- chronic conditions/eating disorders – 7 outpatient organizations
- psychiatric/mental illness – 3 outpatient organizations
- stress/anger management and social skills – 9 outpatient organizations
- trauma and abuse – 12 outpatient organizations

There are an additional 8 outpatient facilities for kids under age 10 in other Indiana counties

- Relationships, marriage/family, divorce/family conflict – 1 outpatient organization
- parent-child issues – 2 outpatient organizations
- behavioral disorders – 5 outpatient organizations
- depression/anxiety – 1 outpatient organization
- chemical/substance abuse/recovery – 3 outpatient organizations
- other addictions – 0 outpatient organizations
- career and other changes – 0 outpatient organizations
- chronic conditions/eating disorders – 1 outpatient organization
- psychiatric/mental illness – 3 outpatient organizations
- stress/anger management and social skill – 1 outpatient organization
- trauma and abuse – 0 outpatient organizations



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

Important information we learned:

Employee shortage/competition – The need for behavioral health providers is increasing. Private groups can pay higher wages.

The greatest need is for private residential treatment for teens (age 13-16). These are kids that need 24/7 care in a secure facility for several weeks or months. This time period is longer than going to a hospital for treatment of an acute situation but not so serious it requires admission to a state hospital. The waiting list for the state-run facility is 11 months for a local teen girl.

Medicaid is an advantage for the seriously mentally ill - Medicaid pays for more mental health services in general than commercial/private insurance. Medicaid will cover 3-6 months in a private residential treatment facility (PRTF) following 2 acute hospital stays. They also pay for wrap around services. Commercial insurance pays for 6 weeks of PRTF.

The DMHA (Division of Mental Health and Addiction) has an admissions committee in Indianapolis. That committee reviews all referrals for adults needing admission to a state run facility.

The local physician at the Evansville Psychiatric Children’s Center reviews cases for the Evansville facility. Those cases do not go through a committee in Indianapolis. That’s good for local organizations.



Southwest Indiana Project AWARE

Evansville, Indiana

Reporting Period: October 1, 2016-September 30, 2017

Lead Project Partners: Deaconess Health/Deaconess Cross Pointe
and St. Vincent Health

Project Evaluator: Diehl Consulting Group

Summary of Initiative

Southwest Indiana Project AWARE will strengthen community capacity to address adolescent mental health needs by bolstering community partnerships and increasing the number of youth-interacting adults in Vanderburgh County and Warrick County, Indiana who are trained in Youth Mental Health First Aid (YMHFA). The population of focus is adolescents aged 12-18 in Vanderburgh and Warrick Counties.

The project has the following goals:

1. Increase capacity of adults to respond to behavioral health issues of adolescents
2. Increase the mental health literacy of youth-interacting adults
3. Link adolescents with behavioral health issues to mental, emotional, and behavioral health assistance and services
4. Increase the number of collaborative partnerships with youth-serving community agencies/programs
5. Conduct outreach and engagement strategies with adolescents and their families/caregivers to increase awareness of and promote positive behavioral health

To achieve these goals, our partnership is delivering YMHFA Instructor and First Aider training, developing a YMHFA sustainability plan, developing/strengthening partnerships with relevant youth-serving community agencies and programs, and developing a social marketing and awareness campaign.

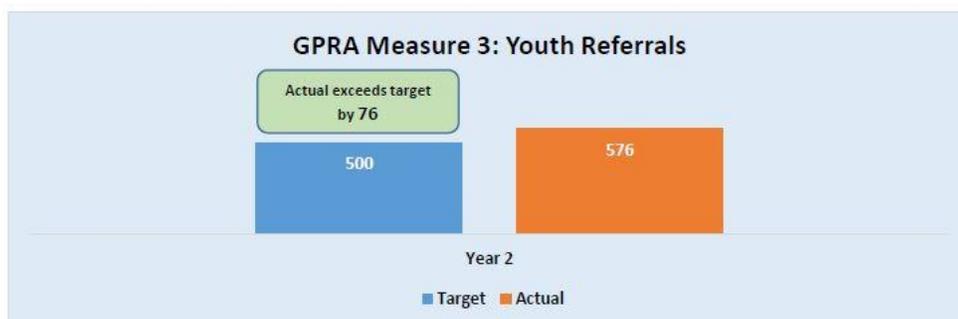
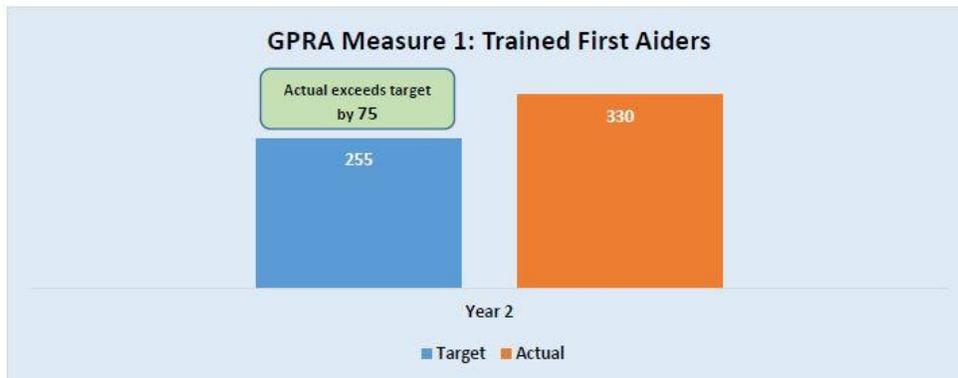
These are highlights from the 2016-17 report. The complete report can be found at www.deaconess.com/chna.

Southwest Indiana Project AWARE

Evansville, Indiana

Reporting Period: October 1, 2016-September 30, 2017

- In Year 2, the Southwestern Indiana Project AWARE conducted nineteen **(19)** First Aider courses, representing **152** hours of instruction.
- A total of **three (3)** Instructors and **330** First Aiders were trained during the period.
- Overall, **41** organizations were represented by trained individuals, demonstrating the community reach and collaboration that the project has experienced.
- Trained Instructors and First Aiders made a total of **576** youth referrals to mental health resources in the community.



Substance Abuse Initiatives—Behavioral Health—Vanderburgh County

Yellow Jug Old Drugs

The substance abuse subcommittee researched the Yellow Jug Old Drugs program, organized by Great Lakes Clean Water. The program provided a free, safe and easy method for consumers to dispose of unused, unwanted drugs. Our group discussed how the program could decrease prescription drug abuse by reducing the amount of drugs in the community. The program would also provide an additional resource for community drug “take backs” on a larger scale.



The Mayor’s Task Force on Substance Abuse voiced concern that although Yellow Jugs may get drugs out of the hands of potential users, it would not help support treatment or those who are actively abusing drugs. A second concern is tracking usage of the jugs.

The Yellow Jug program ceased operation before our subcommittee made a decision to participate.



“After nearly a decade of working to keep our water clean GLCW and the Yellow Jug Old Drugs Program cease operations.

Great Lakes Clean Water Organization was founded in 2008. GLCW was formed to educate people about the importance of proper disposal of unused/unwanted drugs to help keep our water clean.

GLCW started the first drug collection program operated by a non profit organization in the US. The Yellow Jug Old Drugs Program began in early 2009. The program provided a free, safe and easy method for consumers to dispose of unused unwanted drugs in a safe and responsible manner.

The program grew in scope and popularity to serve over 550 pharmacies in eight states. It was the largest drug disposal program operated by a non profit organization. GLCW was the first and only non profit organization licensed by the DEA to be able to collect controlled substances at pharmacies for disposal.

GLCW played a significant role in getting state and federal regulations changed to help facilitate the process of safe and proper drug disposal.

In May 2017 GLCW had to cease operation of the Yellow Jug Old Drugs Program due to inadequate financial support. Costs were increasing dramatically due to the overwhelming response to the program from consumers using the service. Subsequently all operations of GLCW ceased as well.

The founders and board members are proud of the accomplishments this small non profit achieved over the years. Hopefully the ground breaking and pioneering accomplishments will have some long lasting effect to help make drug disposal options more readily available in the future.

As of November 15, 2017 Great Lakes Clean Water Organization, a Michigan Corporation is officially dissolved.”

SBIRT training

SBIRT stands for Screening, Brief Intervention, and Referral to Treatment. It is a public health approach to the delivery of early intervention and treatment for people who have or are at risk of developing substance use disorders.

Educating local physicians, nurses, and staff members in emergency departments and public health clinics about the SBIRT approach increases the likelihood that a person needing substance use intervention will receive help earlier in the addiction process. SAMHSA (Substance Abuse and Mental Health Services Administration) supports and encourages this training so our subcommittee arranged for a community training.

In July 2016, Kaitlyn Reho, MPH, SBIRT training and outreach specialist with the Indiana Prevention Resource Center and Mallorie DeSalle, Indiana SBIRT outreach coordinator for the School of Public Health at Indiana University—Bloomington, provided SBIRT training to the greater Evansville medical community.

SBIRT Step by Step

4 Phases of SBIRT



Sign-in Roster
SBIRT for Healthcare Professionals
Friday July 22, 2016
Trainers: Mallorie DeSalle & Kaitlyn Reho

TYPED FULL NAME	SIGNATURE	Credential	ORGANIZATION
Megan Cade	<i>Megan Cade</i>	LSW + CMPTA	Family & Children's Place
Elizabeth Christmas	<i>Elizabeth Christmas</i>	LCSW, LCAC	Youth First, Inc.
Margaret Compton			
Theresa Dennie	<i>Theresa Dennie</i>	LCSW	Inner Connections Counseling
Noble Dennie	<i>Noble Dennie</i>		" " "
Teresa Faulkner	<i>Teresa Faulkner</i>	LCSW	Southern Hills Counseling Center
Joseph Franklin			
Emily Gabelman	<i>Emily Gabelman</i>	LSW	FAM + Child Place
Cindy Graham	<i>Cindy Graham</i>	LCSW	Southwestern/ECHO
Dan Haviza	<i>Dan Haviza</i>	BA	Southwestern Behavioral
Dennis Hefton	<i>Dennis Hefton</i>		Family Time
Ashley Hilkey	on vacation		
Lisa Jacobs	<i>Lisa Jacobs</i>	LSW	Family Time
John Nieters			
Haley Owens	<i>Haley Owens</i>	BA	Southwestern Behavioral Healthcare
Carmen Rickman	<i>Carmen Rickman</i>	LSW	Family & Children's Place
Theodora Saddoris	<i>Theodora Saddoris</i>	MD	
Amy Southerland	<i>Amy Southerland</i>	LCSW	Family & Children's Place
Davi Stein-Kiley	SICK -		
Brittany Stout	<i>Brittany Stout</i>	NP-C	SICHC
Justin Summay	<i>Justin Summay</i>	BS	FC
Brandi Watson	<i>Brandi Watson</i>	MSW Student	ECHO

SBIRT Grand Rounds at Deaconess

Pain management specialists Dr. Joseph Waling and Dr. Sridhar Bhaskara presented a ground rounds lecture at Deaconess Midtown Hospital entitled, "Comprehensive Pain Management" on August 29, 2017. The pair explained why the SBIRT tool was an essential part of a pain management program and how it can be incorporated into a clinic practice. (All healthcare professionals are invited to attend grand rounds. Records show 27 people in attendance.)

Deaconess Activities and Initiatives—Behavioral Health—Warrick County



Pictured from L to R: Rep. Ron Bacon, Lt. Gov. Suzanne Crouch, Sen. Jim Merritt, Dr. Gina Huhnke, Rep. Holli Sullivan, and Rep. Ryan Hatfield at the July 2017 press conference celebrating INSPECT integration.

Pilot Program for Statewide Opioid Initiative

Deaconess successfully participated in the first state-led pilot program to integrate information from the statewide prescription drug monitoring program (INSPECT) directly into our electronic health record (Epic). Putting INSPECT data directly in the hands of doctors making critical prescribing decisions will save lives and support efforts in the fight against prescription drug and opioid abuse. The statewide initiative is one piece in a broader strategic plan to provide a comprehensive, community-based approach to solving the opioid crisis.

Medication Assisted Treatment

Deaconess Cross Pointe began offering Medication-assisted treatment (MAT) in May 2017. MAT consists of using medications, with counseling and behavioral therapies, to treat substance use disorders and prevent opioid overdose. MAT is primarily used for the treatment of opioid addiction (heroin and prescription pain relievers with opiates).

Suicide Prevention

Deaconess Cross Pointe continues its many community partnerships to address the mental health of our community. In conjunction with others, DCP began a community suicide prevention program and presented five community forums on suicide prevention.

Representatives from our suicide prevention program are assisting with revisions to the Indiana State Suicide Prevention Plan and the Indiana Suicide Prevention Conference was held at the University of Southern Indiana in August 2017.

Primary Care Integration

In February 2017, Deaconess Cross Pointe began integrating services with primary care physicians with the launch of a collaborative relationship with the Deaconess Family Medicine Residency Program.

The Integrative Care Model is team-driven, led by a PCP with support from a “care manager” and consultation from a psychiatrist who provides treatment recommendations for patients who are not achieving clinical goals.

Update—Metrics and Goals

Behavioral Health

Warrick County Goal- Reduce age-adjusted death rate per 100,000 population due to **suicide** from 16.6 (2013-2015) to the Healthy People 2020 goal of 10.2.

Age-Adjusted Death Rate due to Suicide

County: Warrick Measurement Period: 2013-2015



Update—Metrics and Goals

Behavioral Health—Substance Abuse

Adults who Drink Excessively

County: Warrick

Measurement Period: 2015

more...

County: Warrick

16.9%

Source: County Health Rankings

Measurement period: 2015

Maintained by: Conduent Healthy Communities Institute

Last update: April 2017

COMPARED TO



IN Counties



U.S. Counties



IN Value
(15.8% in 2014)



US Value
(18.0%)



Prior Value
(15.9%)

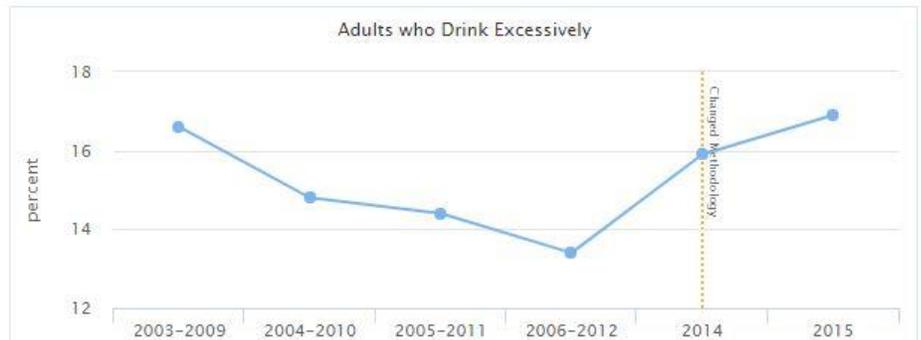


HP 2020 Target
(25.4%)

Graph Selections

INDICATOR VALUES

Change over Time



Change in methodology for 2014:

A new modeling technique was used to produce estimates for 2014 data. Therefore, 2014 data is not directly comparable to previous years of data.

This indicator shows the percentage of adults who reported heavy drinking in the 30 days prior to the survey or binge drinking on at least one occasion during that period. We are monitoring this statistic because local data shows an increase in alcohol use and abuse along with an increase of related incidents such as drunk driving fatalities and child abuse.

Update—Metrics and Goals

Behavioral Health—Substance Abuse

Controlled Substances Dispensed

County: Warrick Measurement Period: 2015



This indicator shows the number of controlled substances dispensed by a licensed pharmacist or physician per capita. We are monitoring this statistic because local data shows increased use of opioids and several initiatives currently address opioid addiction, prescription practices, and statewide focus on all controlled substances.

FY16-17 Activities and Outcomes (Year 1 of the plan)

Cancer (Breast and Prostate): Warrick County

- Education
- Investigation
- Advocacy
- Additional Deaconess Activities

CHNA Cancer (Breast and Prostate): Warrick County

Breast Cancer

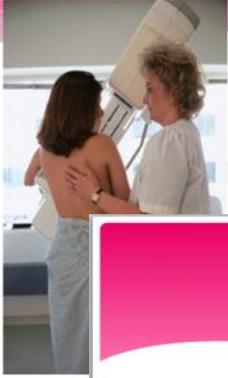
Educate

Committee members created a breast education presentation that contains information about:

- The importance of screening mammograms by explaining what breast cancer is, who is at risk, and when women need to be screened earlier or more often
- Local resources available to receive screening mammograms
- Financial resources available to pay for screenings, including grant programs

Get Screened... you don't need a physician order

- ✓ Talk with a doctor about which screening tests are right for you if you are at higher risk.
- ✓ Have a mammogram every year starting at age 40 if you are at average risk.
- ✓ Have a clinical breast exam at least every 3 years starting at age 20, and every year starting at age 40.
- ✓ St. Mary's Breast Center: 812-485-4437
- ✓ Deaconess Breast Services: 812-450-MAMM
- ✓ Komen Evansville Office: 812-962-2202 for additional options for screening in other counties



Warrick County Community Health Needs Assessment

Support Services

- **TRI-CAP**
 - Help with treatment costs, educate and do extensive case management with underserved and/or uninsured women and men
 - Contact: Lesi Nelson (812) 428-2189
- **Indiana Women In Need – Survivor Support Program**
 - Assist women with professional non-medical services while they are in treatment for breast cancer. Services include but are not limited to: babysitting, house cleaning, groceries and transportation.
 - Contact: Sue Wynne (317) 475-0565
- **Gilda's Club**
 - Offers networking groups, lectures and workshops that help those affected by breast cancer, along with their family members.
 - Contact: (812) 402-8667
- **American Cancer Society**
 - Offers numerous resources for women and men that have been affected by breast cancer.
 - Contact: (800) ACS-2345
- **Susan G. Komen Evansville Tri-State**
 - Offers free mammography and diagnostic services for those who qualify
 - Offers assistance with treatment costs for those who qualify
 - Offers numerous resources for women and men that have been affected by breast cancer.
 - Contact: Sheila Seiler (812) 962-2202
- **TOUCH INC.**
 - Provides transportation, housing, food & utilities
 - Must live in Vanderburgh or Warrick County
 - Contact: Sandy Feltz (812) 454-2826

Warrick County Community Health Needs Assessment- Breast Cancer Coalition

In order to get this information out to the public, members created a website (healthyswin.org/speakers) where the public can request a speaker to present at their place of business, church, or local community building. There was also a flyer developed for promotion of this program to reach people who may not have access to the internet or know about healthyswin.org.



SAVING *Warrick* WOMEN'S LIVES

WOMEN IN WARRICK COUNTY
ARE DYING OF BREAST CANCER
AT SIGNIFICANTLY HIGHER
RATES THAN THE STATE AND
NATIONAL AVERAGE.*

If you'd like to learn more about local resources for women to be screened and treated for breast cancer, you can invite a health care professional to speak at the next meeting of your group or organization.

The presentation, entitled "Saving Warrick Women's Lives," includes:

- Mammogram locations and resources, including grants and programs that will cover the cost of the screening.
- Resources and programs available to help cover diagnostic or treatment expenses for breast cancer.
- Understanding breast cancer—what it is, who is at risk, when women should be screened and more.

FOR MORE INFORMATION, OR TO REQUEST A SPEAKER, visit www.healthyswin.org/speakers. You may also call the Komen Evansville Tri-State office at 812-962-2202.

*According to the 2016 Community Health Needs Assessment for Vanderburgh and Warrick Counties, as conducted by the following organizations:



Deaconess Breast Center

Women who choose Deaconess Breast Services know they can expect skilled, compassionate breast care. Our advanced multidisciplinary approach is designed to address all aspects of specialized breast health imaging and testing. From diagnosis, treatment, and even survivorship, our team is dedicated to providing quality, sensitive, and individualized care.

Committed to breast health excellence, Deaconess is recognized as a Gold Standard facility, and is accredited as a Breast Imaging Center of Excellence by the American College of Radiology and NAPBC.

Deaconess Breast Services offers leading-edge diagnostic and treatment services, including 3D digital mammography with both same day appointments and same day results.

We offer three convenient locations to serve you, including our Mobile Breast Center, which provides screening mammograms throughout the region.

Breast Center
812.424.1200
520 Mary St. #140
Evansville, IN 47710



St. Vincent Breast Center

When it comes to your breast health, don't put things off. St. Vincent Breast Center treats each woman with patience and compassion, offering a full range of advanced breast screenings. It is our goal to provide you with a positive and relaxed experience- whether you're here for a mammogram or one of our other specialized breast health services.

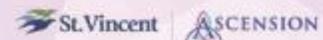
The Breast Center's caring staff and comforting environment create an ambiance that eases the apprehension associated with women's health issues. From imaging and diagnosis, to surgery consultation and recovery, women can receive all their breast health services at one convenient location. And our specially trained physicians are the only board-certified radiologists in the area who specialize exclusively in reading breast imaging.

At St. Vincent Breast Center, we understand the needs of women. It's why we've expanded our digital mammography service to be available at convenient locations throughout the Tri-State. This means the high-quality digital mammography services and the exceptional patient experience that are the hallmark of St. Vincent Breast Center are now available to you with more convenience and even less wait time.

And you can rest assured knowing your mammogram will still be reviewed by one of our board-certified breast radiologists.

Mobile mammography is available at sites across Evansville and also in Henderson, Spencer, Warrick and Gibson counties. Call the Breast Center today for more details.

Breast Center
812.485.4437
Epworth Crossing
100 St. Mary's Epworth Crossing, Suite A500
Newburgh, IN 47630



Learn more, see the mobile breast center calendar, or request your mammogram appointment at www.deaconess.com/breast.

Groups were given a pre-test before the breast cancer educational presentation and a post-test following the presentation to measure how much they learned.

Pre-test

What is the best tool for diagnosing breast cancer? _____

What is the greatest risk factor for developing breast cancer? _____

At what age should a woman start breast cancer screening? _____

There are resources and funding available for diagnosis and treatment of breast cancer.

TRUE FALSE

If you are over the age of 40, have you had a mammogram in the past 12 months?

YES NO

Post-test

What is the best tool for diagnosing breast cancer? _____

What is the greatest risk factor for developing breast cancer? _____

At what age should a woman start breast cancer screening? _____

There are resources and funding available for diagnosis and treatment of breast cancer.

TRUE FALSE

Did this presentation increase your knowledge of breast cancer? _____

Are you more likely to have a mammogram after listening to this educational event?

YES NO

What barriers, if any, do you have that keep you from receiving health care, specifically mammograms?

**Subcommittee for
Warrick County
Health Priorities:
Breast Cancer**

*American Cancer Society
– Anne Laine*

*Deaconess
– Kathy Dockery, Becca
Scott, Claire Sutherby*

*Gilda's Club
– Melanie Atwood*

*Komen Evansville
– Sheila Seiler*

*Oncology Hematology
Associates
– Rich Norris*

*Smokefree Communities
– Julie Phillips*

*St. Vincent
– Vickie De tray, Sheila
Hauck, Lisa Myer*

*TOUGH
– Sandra Feltz*

*Tri-Op Warrick County
– Lesi Nelson*

*Warrick County Health
Department
– Sharon James*

*The Women's Hospital
– Melody Littrell*

March 24, 2017

Newburgh Kiwanis Club
517 W. Main Street
Newburgh, IN 47630

Dear Community Partner:

Women in Warrick County are dying of breast cancer at significantly higher rates than the state and national average. * A group of health care professionals is working to help change that by developing a community speakers' program.

As organizations, clubs and individuals schedule gatherings at your facility, we wanted you to keep our initiative in mind, in case any groups are looking for outside speakers.

The presentation, entitled "Saving Warrick Women's Lives," includes:

- Mammogram locations and resources, including grants and programs that will cover the cost of the screening.
- Resources and programs available to help cover diagnostic or treatment expenses for breast cancer.
- Understanding breast cancer—what it is, who is at risk, when women should be screened and more.

For more information, or to request a speaker, visit

www.healthyswin.org/speakers. You may also call the Komen Evansville Tri-State office at 812-962-2202.

Sincerely,



Kathleen Dockery

Director, Deaconess Breast Services



Sheila Hauck

DNP, RN, NEA-BC Director of Oncology Services, Palliative Care and Professional Practice, St. Vincent

**According to the 2016 Community Health Needs Assessment for Vanderburgh and Warrick Counties, as conducted by the following organizations:*



CHNA Cancer (Breast and Prostate): Warrick County

Investigate

ICD-10 billing and coding issues for screening mammograms:

When scheduling a mammogram, patients need to emphasize that it is a screening mammogram. If the exam is coded as a diagnostic mammogram, most insurance plans will not pay for the screening at 100%.

Problems with H.I.P./Obamacare not paying or charging co-pays for screening mammograms:

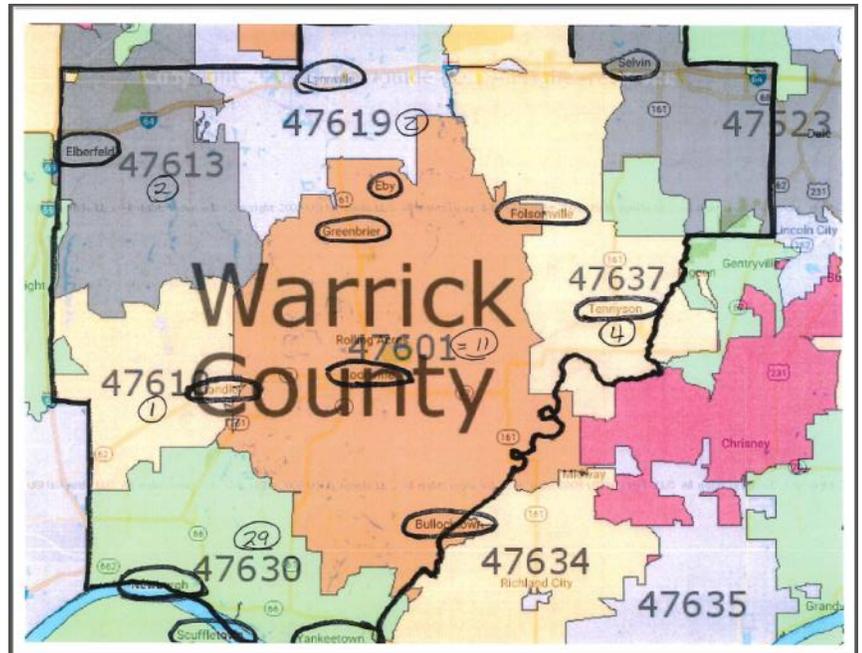
Most issues with denied coverage for a screening mammogram are related to errors in billing and coding or discovery of a lump, etc. which turns the screening exam into a diagnostic exam. Health insurance, including H.I.P. and Obamacare, cover a screening mammogram but patients are often subject to a high deductible for any follow-up care or further testing.

Hot spots in Warrick County with a disproportionate number of stage 3 and/or 4 breast cancer and deaths due to breast cancer:

Research was completed to identify hot spots in Warrick County. Zip code 47630 had the highest incidence of breast cancer discovered at stage 3 or 4 with 29, and 47601 had the second highest with 11.

Barriers to obtaining a mammogram in Warrick County:

The committee identified many barriers that women face when trying to schedule or get a mammogram. The most significant barrier appears to be transportation. Many women also do not know where they can get mammograms now that they have insurance. They can no longer go to a community health center or breast screening events like they did when they were uninsured. Education related to navigating the health care system as well as information about financial assistance, charity care, etc. are critical for an increased screening rate. The most vulnerable patients fall in the 201% to 400% of the Federal Poverty Level. They make too much money for free services but not enough to pay high premiums or meet a high deductible.



The data on this map contains raw numbers where differences in population size have not been taken into account. They have not been standardized and cannot be used to make assumptions between areas.

CHNA Cancer (Breast and Prostate): Warrick County

Advocate

To advocate for breast cancer awareness in Warrick County, committee members created a speakers bureau where the public can request a breast health expert to come to their place of business, church, or local community building. This speaker uses the breast cancer education presentation to share information about community screenings and resources available in the area for those affected by breast cancer.

Committee members continue to collaborate with local businesses and non-profit organizations to identify possible host sites for breast cancer screenings and workshops. Most of the sites found were local churches in Warrick County.

In order to reach more women in the area, the committee discussed adding attendance incentives for these workshops and screenings. Cancer Moonshot, a community taskforce, is working on creating an app that will streamline the gathering of screening opportunities into a central repository. This will make it much easier to share information about screenings and local resources available to women in need.

The form to request a speaker can be found at healthswin.org/speakers.

The screenshot shows the 'Request a Speaker' form on the Healthy Southwest Indiana website. The website header includes the logo 'HEALTHY Southwest Indiana Vanderburgh | Warrick' and navigation links: PRIORITIES, EXPLORE DATA, SEE HOW WE COMPARE, TOOLS & RESOURCES, and LEARN MORE. The form itself is titled 'Request a Speaker' and contains the following text:

A panel of health professionals has worked together to develop a new speakers' bureau to help address the high mortality rate from breast cancer in Warrick County.

The presentation, entitled "Saving Warrick Women's Lives," includes:

- Mammogram locations and resources, including grants and programs that will cover the cost of the screening.
- Resources and programs available to help cover diagnostic or treatment expenses for breast cancer.
- Understanding breast cancer—what it is, who is at risk, when women should be screened and more.

Please complete the form below to invite a speaker to your next meeting or event. You will be contacted by a committee member within two business days.

* Required

Email address *

Your email

On the right side of the form, there is a 'Speakers Bureau' section with the following text:

Speakers Bureau

The Warrick County Community Health Needs Assessment conducted by Deaconess, St. Vincent's, ECHO Clinic, the United Way, the Welborn Foundation and many other community agencies revealed several significant health issues affecting the residents of Warrick County. Breast cancer was identified as one of the top six most pressing health needs of Warrick county citizens. Specifically, Warrick County has one of the highest rates of new breast cancer rates as well as a high death rate.

In response to this important finding, a group of health care professionals have worked together to develop a Speakers Bureau to educate Warrick County residents on breast cancer, resources and screening.

CHNA Cancer (Breast and Prostate): Warrick County

Prostate Cancer

Educate

Members created a prostate education program similar to the breast presentation. It provided information on the following:

- Education on basic prostate health
- Overview of prostate cancer in general and data specific to Warrick County
- Who is at risk
- What should be done and when
- Resources in the community for prostate screenings
- Resources for those affected by prostate cancer

In order to get this information to the public, members created a website (healthyswin.org/speakers) where the public can request a speaker to present at their place of business, church, or local community building.

There was also a flyer developed for promotion of this program to reach people who may not have access to the internet or know about healthyswin.org.



Saving Warrick Men's Lives

Prostate Health Information

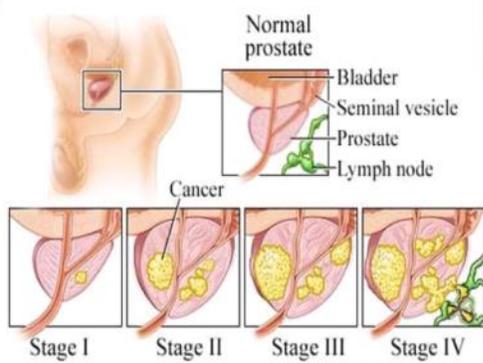


Objectives

- * How this came to be a priority
- * Prostate cancer in Warrick County
- * Overview of prostate cancer
- * Risk factors
- * What can be done

Warrick County Community Health Needs Assessment

Healthy Prostate to Cancer



Warrick County Community Health Needs Assessment

What Should I Do?

- * Discussion with your health care provider:
 - * Age 50 for men at average risk – expected to live > 10 years
 - * Age 45 for men at high risk
 - * African American men
 - * Men with a brother, father or son diagnosed with prostate cancer
- * Age 40 for men at even higher risk
 - * Men having more than one first degree relative who had prostate cancer at an early age
- * American Cancer Society Guidelines

Warrick County Community Health Needs Assessment

Who is at risk?

- * Diagnosed mainly in older men
- * 6 in 10 cases are diagnosed in men 65 and older
- * Occurs more often in African-American men
- * Family history may double a man's risk of developing prostate cancer

Warrick County Community Health Needs Assessment



SAVING *Warrick* MEN'S LIVES

MEN IN WARRICK COUNTY
ARE DYING OF PROSTATE
CANCER AT A HIGHER RATE
THAN THE INDIANA AVERAGE.*

IF YOU'D LIKE TO LEARN MORE about local resources for men to be screened and treated for prostate cancer, you can invite a health care professional to speak at the next meeting of your group or organization.

The presentation includes:

- Statistics regarding prostate cancer— who is at risk?
- Definition of the prostate and its function
- Screening and diagnosis
- Treatment options

FOR MORE INFORMATION, OR TO REQUEST A SPEAKER, visit www.healthyswin.org/speakers.

**According to the 2016 Community Health Needs Assessment for Vanderburgh and Warrick Counties, as conducted by the following organizations:*



CHNA Cancer (Breast and Prostate): Warrick County

Investigate

Committee members worked with urologists and reached a consensus that a digital rectal exam was needed for men ages 55-69. Members are still working to get a unified message, consistent with AUA guidelines, to send out to the public. They have also begun to look at places for presentations to be done once they receive information back from the American Cancer Society on guidelines for screening.

AUA Guideline Statements



1. The Panel recommends against PSA screening in men under age 40 years.

In this age group there is a low prevalence of clinically detectable prostate cancer, no evidence demonstrating benefit of screening and likely the same harms of screening as in other age groups.

2. The Panel does not recommend routine screening in men between ages 40 to 54 years at average risk.

For men younger than age 55 years at higher risk (e.g. positive family history or African American race), decisions regarding prostate cancer screening should be individualized.

3. For men ages 55 to 69 years the Panel recognizes that the decision to undergo PSA screening involves weighing the benefits of preventing prostate cancer mortality in 1 man for every 1,000 men screened over a decade against the known potential harms associated with screening and treatment. For this reason, the Panel strongly recommends shared decision-making for men age 55 to 69 years that are considering PSA screening, and proceeding based on a man's values and preferences.

The greatest benefit of screening appears to be in men ages 55 to 69 years.

4. To reduce the harms of screening, a routine screening interval of two years or more may be preferred over annual screening in those men who have participated in shared decision-making and decided on screening. As compared to annual screening, it is expected that screening intervals of two years preserve the majority of the benefits and reduce over-diagnosis and false positives.

Additionally, intervals for rescreening can be individualized by a baseline PSA level.

5. The Panel does not recommend routine PSA screening in men age 70+ years or any man with less than a 10 to 15 year life expectancy.

Some men age 70+ years who are in excellent health may benefit from prostate cancer screening.

Retrieved 3-1-2018

[https://www.auanet.org/guidelines/early-detection-of-prostate-cancer-\(2013-reviewed-and-validity-confirmed-2015\)](https://www.auanet.org/guidelines/early-detection-of-prostate-cancer-(2013-reviewed-and-validity-confirmed-2015))

CHNA Cancer (Breast and Prostate): Warrick County

Advocate

To advocate for prostate cancer awareness in Warrick County, committee members created a speakers bureau where the public can request a prostate health expert to come to their place of business, church, or local community building. This speaker uses the educational presentation developed by the committee to share information about community screenings and resources available in the area for those affected by prostate cancer.

A small presentation on prostate cancer is included in the breast cancer presentation. We know women are most often the health care decision makers in the family. Doing some cross-education/cross-promotion may enhance knowledge about prostate cancer.

Attempts have been made to schedule prostate cancer education sessions for the public. There have been no sessions scheduled for this fiscal year. Committee members will continue to collaborate with local businesses and non-profit organizations to identify possible host sites for prostate cancer screenings and workshops.

The form to request a speaker can be found at healthyswin.org/speakers.

As we enter year 2, we will start focusing on having a screening event, motivating patients and providers to screen, and providing education at community events instead of a scheduled education session.

Deaconess Activities and Initiatives — Cancer — Warrick County

- **34 regional health fairs** (community and corporate) with staff representation from cancer services. 10,905 individuals participated.
- **Multidisciplinary Breast Care**; Presentation given on 4-24-17 by Donna Grant, RN, OCN, CN-BN, oncology nurse navigator, to 15 Deaconess Family Medicine Residency Program students to help them understand patient outcomes related to multidisciplinary breast care.
- **Cancer Survivor Celebration** on 6-4-17
- **Healthier U Walk**—6-17-17; Cancer services staff attended, cancer education, prevention and screening information provided.
- **Just for the health of it**—7-22-17; Community event at Evansville Museum to offer cancer education, prevention, and resources. We participated with the local medical society and other health system.
- **“YOU are the cure” Komen luncheon**—11-2-17; Dr. Janine Morris, radiologist, spoke about methods of early breast cancer detection, clarification of screening recommendations, and provided education about 3D mammography.

Deaconess Cancer Services is located in Warrick County on our Gateway Campus. Staff promote services available in Warrick County when participating in Evansville/Vanderburgh County activities.



2017 on-site mammograms via the Mobile Breast Center

January	—85
February	—124
March	—169
April	—175
May	—196
June	—167
July	—228
August	—218
September	—250
October	—264
November	—298
December	—277



Recap of Year 1 as an MD Anderson Cancer Network member

Over 180 peer-to-peer consults made between our certified physicians at Deaconess and MD Anderson physicians.

1,763 referrals to Deaconess Clinic Oncology (Oct 2016 to Sept 2017), an increase of more than 30%.

Approval to conduct Tier 3 Clinical Trials.

Approval to conduct National Cancer Institute Clinical Trials. Currently, 4 breast cancer studies and 1 “match” study.

Deaconess Activities and Initiatives — Cancer — Warrick County

Your Health Blog Articles

- *10 things your doctor wishes men would do to protect their health*; Dr. Michael W. Luy, Internal Medicine; 6-12-17
- *Health screenings men need, when and why*; Dr. Michael W. Luy, Internal Medicine; 8-22-17
- *Which cancer screenings you need, when and why*; Dr. Mohammed Allaw, Internal Medicine; 9-12-17
- *What all women should know about mammograms*; Dr. Marc Johnson and Dr. Janine Morris, Radiologists, Deaconess Breast Services; 10-10-17

Published on www.deaconess.com

The screenshot shows the Deaconess website header with navigation links: Find a Doctor, Locations, Services, For You, Your Health. Below the header is a breadcrumb trail: > Your Health / October 2017 / What All Women Should Know About Mammograms. The article title is "What All Women Should Know About Mammograms" by Marc Johnson, MD and Janine Morris, MD, Radiologists, Deaconess Breast Services, dated 10/10/2017. A photograph shows a woman sitting at a desk with a laptop. The article text discusses the importance of mammograms for breast cancer detection, noting that 1 in 8 American women will develop breast cancer in their lifetime. It emphasizes the need for informed decisions and early detection, stating that 98% of women survive a breast cancer diagnosis if caught early. It also mentions that regular screening mammograms are the best way to find breast cancer early and that 3D mammography is a superior choice for women. A section titled "What is a mammogram and when should I have one?" explains that a mammogram is an x-ray picture of the breast used to check for breast cancer in women with no signs or symptoms, typically including 2 or more images of each breast.

The screenshot shows a Facebook post from Deaconess, published by Becca Scott on October 10, 2017. The text of the post states: "Breast cancer will develop in 1 in 8 American women in her lifetime, so it's very important that women are informed about options and recommendations for early detection. Joining us in today's Deaconess Facebook Lunch & Learn are Drs. Marc Johnson and Janine Morris, radiologists who practice at Deaconess Breast Services. They're experts on mammography and breast cancer diagnosis, and will share information about current screening recommendations, and why 3D mammography is s... See More". Below the text is a photograph of two healthcare professionals, a woman and a man, both wearing Deaconess scrubs. They are holding a sign that says "Taking your questions now." with a Facebook logo. The post has reached 8,466 people and includes a "Boost Post" button.

Facebook Lunch and Learn

Cancer Screening Recommendations; 8-25-17

What cancer screenings are appropriate, when, for whom? Dr. Mohammed Allaw

5,200 reached, 220 post clicks, and 93 reactions

Breast imaging; 10/10/17

What all women should know about mammograms. Drs. Marc Johnson and Janine Morris
8,466 reached, 460 post clicks, and 320 reactions

Deaconess Activities and Initiatives — Cancer — Warrick County

Growing Awareness for Men's Cancers: Deaconess is encouraging all tri-state men to put down their razors to raise awareness for prostate and testicular cancers as part of “No-Shave November.” No Shave November is an opportunity for all men with facial hair to show off their best beards, mustaches, or goatees. We are asking participants to send us photos that show creativity, group efforts, and even longevity of growth.



Best Celebrity Look-Alike

“Shave the Date”

Winners will be recognized at the Evansville Aces “Deaconess No Shave November” basketball game on Saturday, November 18 at the Ford Center. Every man who participates will receive a pair of tickets to this game.



The “Stache Dash” at Garvin Park kicked-off the No Shave November campaign.

A 5K run, competitive walk, and kids dash were offered.





October 26, 2017
No. 83
FOR IMMEDIATE RELEASE

Contact: Becca Scott
Deaconess Public Relations, (812) 450-7353
becca.scott@deaconess.com

**PROSTATE CANCER SCREENING, EDUCATIONAL AND AWARENESS
RESOURCES AVAILABLE FOR WARRICK COUNTY MEN**

EVANSVILLE/NEWBURGH – Various community health agencies—including Deaconess—are offering prostate cancer screenings and educational and awareness resources in November. Warrick County men are encouraged to participate, as the most recent Community Health Needs Assessment indicated a high incidence of prostate cancer and prostate cancer death in Warrick County.

Free prostate cancer screenings will be offered Saturday, November 4 from 9:00 a.m. – noon at the annual Community First Health Fair at CK Newsome Community Center, located at 100 Walnut Street in downtown Evansville.

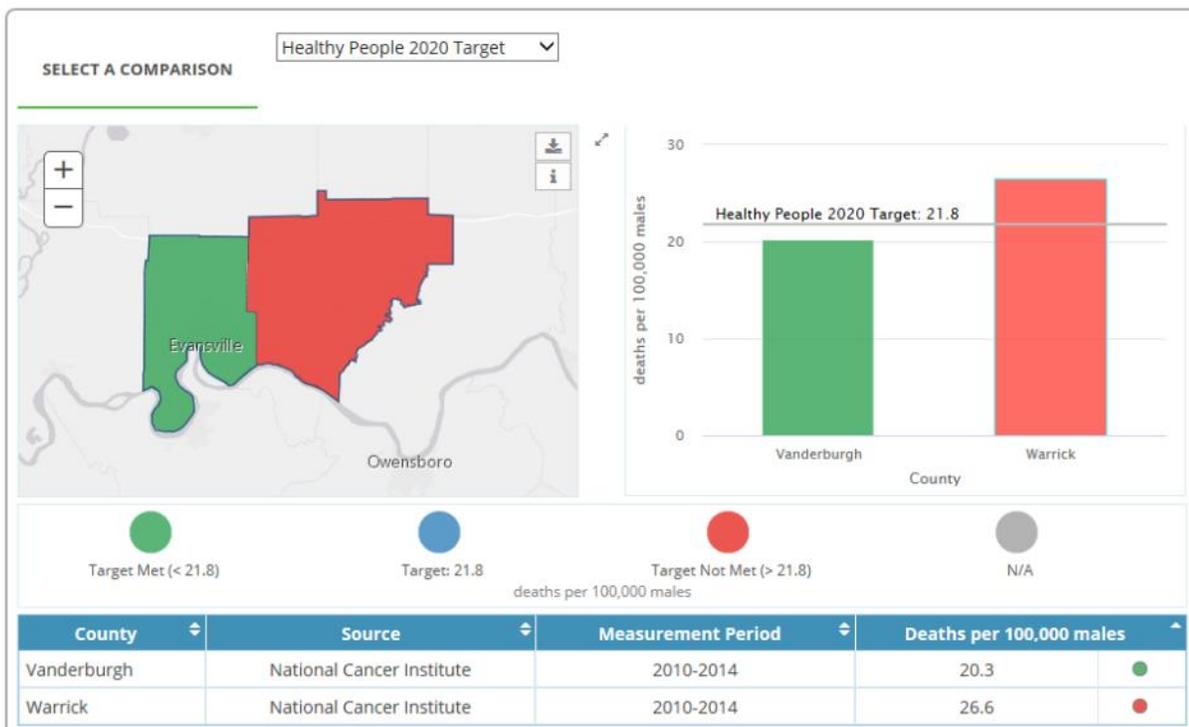
More than a dozen different screenings (including prostate) will be offered, in addition to free flu shots, pneumonia and TDAP vaccines, giveaways, door prizes and more. The event is coordinated by a steering team from numerous community health organizations and staffed by representatives from those organizations, as well as many nursing/health students from Ivy Tech, University of Evansville and University of Southern Indiana. Full details can be found at www.deaconess.com/calendar, keyword “community.”

No Shave November, the annual men’s cancer awareness campaign from Deaconess, is also about to begin. Men are encouraged to put down their razors to raise awareness for prostate and testicular cancers. All participants will receive two free tickets to an upcoming ‘No Shave November’ Evansville Aces game. Full details, including men’s cancer information, can be found at www.deaconess.com/noshave.

More information about the Community Health Needs Assessment prostate cancer indicators can be found at www.healthyswin.org.

Update—Metrics and Goals

- Examine the National Cancer Institute’s age-adjusted death rate due to breast/prostate cancer.
- Compare stats over time, concentrating on 2016, 2017, and 2018 data.
- Reach the Healthy People 2020 goal of 20.7 deaths per 100,000 females due to breast cancer and 21.8 deaths per 100,000 males due to prostate cancer.



We will not see data that includes our time frame of education and advocacy for a few years due to the release schedule of data from the National Cancer Institute.

FY16-17 Activities and Outcomes (Year 1 of the plan)

Exercise, Nutrition, and Weight: Warrick County

- Pre-Diabetes
- Built Environment
- Toddler and Preschool Nutrition
- Additional Deaconess Activities

CHNA Exercise, Nutrition, and Weight: Warrick County

Pre-Diabetes

Year One Progress:

Assemble diabetes educators and other related professionals. Arrange regularly scheduled meetings.

The YMCA agreed to facilitate meetings for this subcommittee. Representatives from area diabetes education programs, clinics, and health systems were invited to join the group. Regular meetings were scheduled.

Identify trusted sources of information on diabetes that are appropriate and helpful for the general public.

American Diabetes Association (ADA), the American Medical Association (AMA), and the Centers for Disease Control and Prevention (CDC).

Work together to coordinate diabetes classes, grant projects, and other activities throughout the community. This avoids multiple events/classes happening at the same time and increases the opportunity for people to participate.

The start date for diabetes education classes in Vanderburgh County were coordinated so patients interested in joining a program do not have to wait for several months. The majority of diabetes programs are based in Vanderburgh County. We started there and will expand effort to Warrick County in years 2 and/or 3.

Additional work not specified in original action plan:

Create a community awareness campaign related to prediabetes. Design a landing page on the www.healthyswin.org website to help community members find trusted sources of information.

CURRENT WORK STAGE: Awareness campaign scheduled to start 4th quarter of 2017. Landing page on the www.healthyswin.org website has been brainstormed and structured, now we are working on developing within the website.

BARRIERS TO WORK: Need additional funds for the marketing campaign to be impactful to drive awareness and change.

“Do I Have Prediabetes?” National Campaign

This campaign was launched at the end of January 2016. It is a national public service announcement (PSA) campaign created by the American Diabetes Association (ADA), the American Medical Association (AMA) and the Centers for Disease Control and Prevention (CDC) in partnership with the Ad Council. It is a three-year-long campaign which promotes the simple, but strong message: No one is excused from prediabetes. Many communication mediums will be utilized to get this message out, including TV, radio and print ads. **Billboards and social media messages were placed in Evansville.**



CHNA Exercise, Nutrition, and Weight: Warrick County

Built Environment and Nutrition

Healthy Community Partnership of Southwest Indiana represents seven counties including Vanderburgh and Warrick. The group formed in 2012 and created a comprehensive plan to prevent chronic diseases and increase lifespan. The plan is being used to promote tobacco-free living, active living and healthy eating, clinical preventive services, and healthy and safe physical environments.



For the purposes of CHNA, Healthy Community Partnership took the lead in addressing built environment issues and the need for better nutrition for toddlers and pre-school-age children.

Year 1 Review:

The Healthy Communities Partnership Leadership Team, which consists of representation from 25 Evansville businesses, set a goal to decrease the number of children in Vanderburgh County that are considered overweight or obese 20% by 2020. Similar goals for Warrick County are being determined.

Three strategies are in place to accomplish this goal:

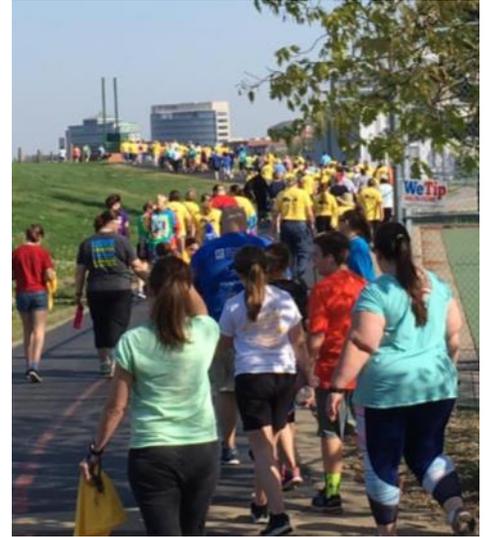
- 1) Develop and promote the implementation of policies that increase healthy eating and physical activity within daycare, preschool, school, after-school and community settings.
- 2) Promote the development of countywide access that supports healthy eating and active living for children and their families.
- 3) Increase community engagement to motivate healthy eating and active living for children and their families.

Four workgroups were created to tackle the strategies listed above. The four workgroups have met monthly since March 2017. Each workgroup has two co-chairs. Three of the workgroups have already set smaller goals to help reach the leadership team's larger goal of 20% by 2020.

Deaconess Activities and Initiatives Exercise, Nutrition, and Weight: Warrick County

Healthier U Walks

Starting in 2011, Deaconess began the Healthier U Walks. The program encourages exercise but also provides people with the opportunity to explore new places with the safety of a “tour guide” and a group to walk with. A lot of people are hesitant to walk, because they don’t want to go alone to parks/trails. The program also rotates through different trails or walking paths in Warrick and Vanderburgh Counties to help identify areas, new for some, for exercise in the community. For 12 Saturdays, May through July, individuals meet each week at a different park or walking trail and walk from 9-10 AM. Strollers and leashed pets are welcome to encourage attendance. Eastland Mall is used as a location for rainy days and market presence for walking awareness.



Deaconess Fitness Center

The Deaconess Fitness Center has two locations in Warrick County, one on the Gateway Campus and another on our Eagle Crest campus. The fitness center offers long operating hours from 5 AM – 12 Midnight daily including weekends and holidays. The fitness center offers a variety of Cybex weight training equipment, treadmills, stationary bicycles, airdyne bicycles, EFX elliptical cross trainers, a Stairmaster and two NuSteps. Each member, as a part of the orientation process, is properly trained to use the equipment.

Employee Wellness

In FY16-17, Deaconess continued their work on a robust employee wellness program. In addition to flu shots and annual wellness screenings, employees are offered personal trainers, exercise classes, nutrition classes, smoking cessation programs, and mental health counseling to help make and reach personal wellness goals.

Deaconess Activities and Initiatives Exercise, Nutrition, and Weight: Warrick County

Wise Choice - Deaconess Hospital and the West Side Nut Club collaborated again to provide a “Wise Choice” Fall Festival munchie map. The Fall Festival in Evansville has been said to be the second largest street festival next to Mardi Gras and draws over 200,000 individuals each year. The festival is known for deep fried and unhealthy options. The Wise Choice map identifies food items that are determined by a dietitian to be low calorie, low fat, and low sodium. Wise Choice debuted in 2012.



Baby Friendly - The Women’s Hospital received Baby-Friendly Facility Designation in August 2015 by Baby-Friendly USA, Inc. The designation symbolizes the hospital’s commitment to supporting breastfeeding mothers. Over the past year, The Women’s Hospital further developed components of the program including “skin to skin” contact and having the baby “room-in” with mom while in the hospital.

“BFUSA believes: (1) human milk fed through direct breastfeeding is the optimal way for human infants to be nurtured and nourished; (2) the precious first days should be protected as a time of bonding and support not influenced by commercial interests; and (3) every mother should be informed about the benefits of breastfeeding and respected to make her own choice.” <https://www.babyfriendlyusa.org/>

Farmers Markets

Deaconess sent staff members and physicians to multiple farmers markets throughout Vanderburgh and Warrick Counties during the 2016 and 2017 summer. They provided healthy recipes and information related to their specialty area such as sleep medicine, heart, women’s health, cancer, etc.

A special initiative called POP Club began at the Historic Newburgh Farmers Market in 2017. This child-focused program encouraged kids to complete activities at the market each week and get their passport stamped. Stamps were rewarded with prizes.

2016 Farmers Markets — April/May through September/October:

Deaconess Farmers Markets — Tuesdays at Gateway Hospital and Wednesdays at Midtown Hospital
Downtown Evansville Farmers Market — Fridays
Franklin Street Bazaar — Saturdays
Historic Newburgh Farmers Market — Saturdays
New Harmony Farmers Market — Saturdays

2017 Farmers Markets — April/May through September/October:

Downtown Evansville Farmers Market — Fridays
Franklin Street Bazaar — Saturdays

* Markets were not held at Deaconess due to major construction projects.



HEY KIDS!

Join us at the
POP Club tent
Every Saturday
May 27th – August 5th
Pop Club 9am – 11am

Stop by and sign a
passport to health to
get started with
weekly activities.

First 200 kids to sign
up will receive a free
POP Club Bag

Update—Metrics and Goals

Exercise, Nutrition, and Weight— We will continue to monitor incidences of diabetes and preschool obesity to measure the success of our intervention and prevention programs.

Adults with Diabetes

Census Place (City): **Evansville**

Measurement Period: **2015**

Census Place (City): Evansville

11.4%

COMPARED TO



500 Cities



US Value
(10.4%)



Prior Value
(11.0%)

Source: CDC - 500 Cities Project

Measurement period: 2015

Maintained by: Conduent Healthy Communities Institute

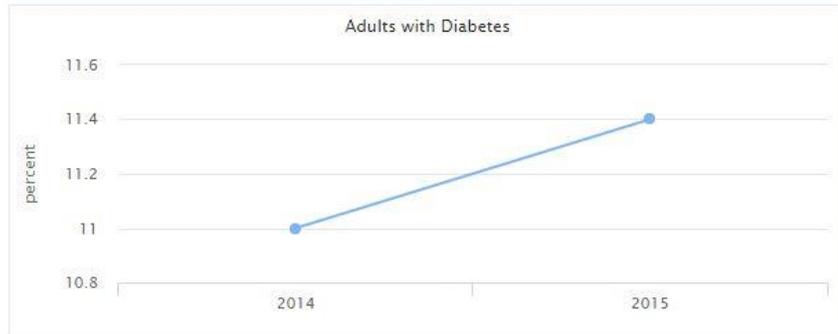
Last update: January 2018

Technical note: Sub-county small area estimates use state and county data from the CDC's Behavioral Risk Factor Surveillance System (BRFSS) in tandem with demographic data for census tracts and cities. It is not appropriate to use this data for evaluation purposes.

Graph Selections

INDICATOR VALUES

Change over Time



This data set only tracks cities. Evansville is our most appropriate option.

Low-Income Preschool Obesity

County: **Warrick**

Measurement Period: **2009-2011**

More...

County: Warrick

12.4%

COMPARED TO



IN Counties



U.S. Counties



Prior Value
(14.6%)



Trend

Source: U.S. Department of Agriculture - Food Environment Atlas

Measurement period: 2009-2011

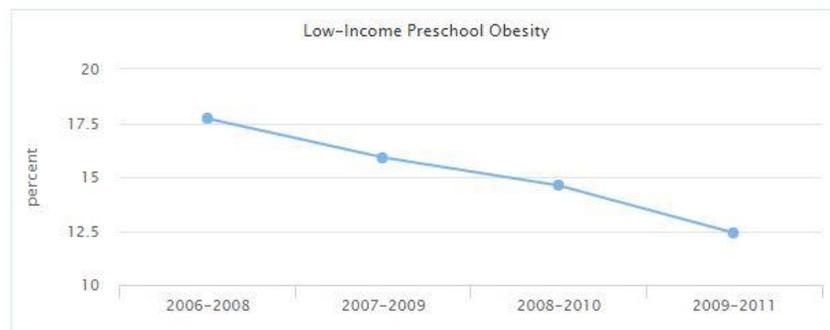
Maintained by: Conduent Healthy Communities Institute

Last update: December 2012

Graph Selections

INDICATOR VALUES

Change over Time

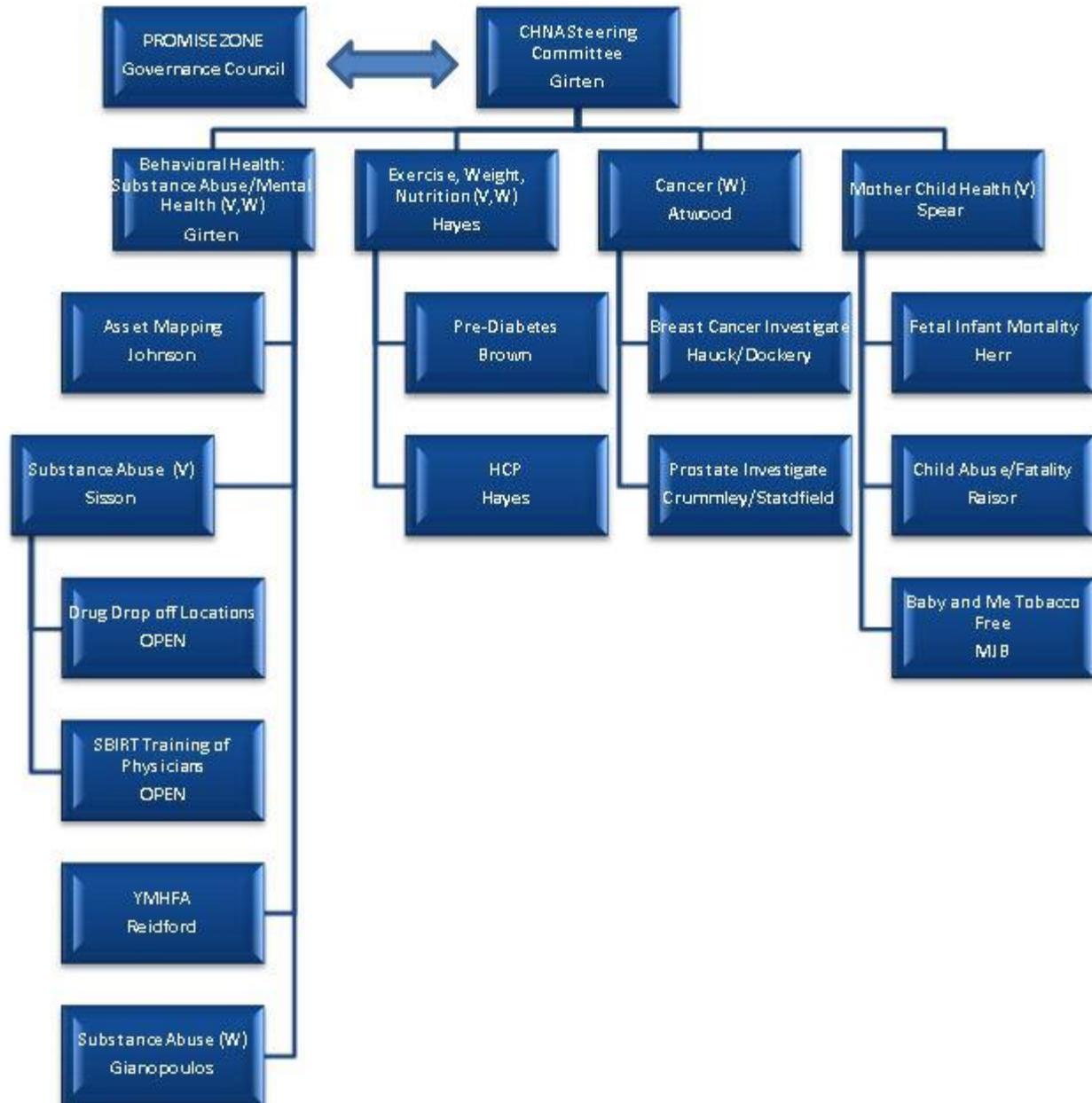


Primary Data Collection—Community Input

To expand upon the information gathered from the secondary data, The collaborative conducted **9** key informant interviews and **10** focus group discussions to obtain input from persons with expertise in public health and those who represent the broad interests of the community. In total, **84** people participated in primary data collection to provide community input with representation from the organizations below:

Albion Fellows Bacon Center	Easter Seals Rehabilitation	Hearing Healthcare Center	St. Mary's Case Management	University of Evansville
Alcoa	ECHO Health	IPMG	St. Mary's Center for Children	University of Southern Indiana
ARK Crisis Child Care Center	Evansville Fire Department	Ivy Tech Community College	St. Mary's Outreach Services	University of Southern Indiana Nursing
Aurora	Evansville Mayor's Office	Knight Township Trustee	St. Mary's Pastoral Care	Vanderburgh Community
Boys and Girls Club	Evansville Psychiatric Children's Center (FSSA)	Lampion Center	St. Mary's Weight Management	Vanderburgh County Health Department
CAJE (Congregations Acting for Justice and	Evansville State Hospital (FSSA)	Old National Bank	SWIRCA	Welborn Baptist Foundation
CAPE	Evansville Vanderburgh School	One Life Church	The Arc of Evansville	Youth First
Deaconess Cross Pointe	Girl Scouts of South-west Indiana	Smoke Free Communities	TJ Maxx	YWCA
Deaconess Family Medicine Residency	Harding, Shymanski & Company	Southwestern Behavioral Healthcare	United Caring Services	
Deaconess Pharmacy	Harrison College Nursing Department	St. Mary's Behavioral Services	United Way of SWIN	

2016 CHNA Committee and Subcommittee Structure Vanderburgh and Warrick Counties



CHNA Behavioral Health Subcommittee

Member	Organization
Lindsey Johnson	St. Mary's Health
Katy Adams	Southwestern Behavioral Health
Chris Allen	Vanderburgh County Health Department
Sharon Barclay	Indiana State Department of Health
Jessica Black	Brentwood Springs
Parri Black	Youth First
Scott Branam	Deaconess Cross Pointe
Sharon Burns	Evansville Catholic Schools
Amy Canterbury	United Way of Southwest Indiana
Deb Capps	Tri-Cap (Warrick County)
Janie Chappell	Deaconess Cross Pointe
Christine	Holly's House
Heather Clark	Deaconess
Deidra Conner	ARC of Evansville
Lottie Cook	Evansville Children's Psychiatric Center
Angie Cooley	ARK Crisis Nursery
Maria Del-Rio Hoover, MD	St. Mary's Health
Amy DeVries	CAJE - Congregations Acting for Justice and Empowerment
Dan Diehl	Diehl Consulting
Dr. Candi Vincent	Deaconess
Suzanne Draper	CASA Vanderburgh County
Heather Gogel	St. Mary's Health
Jason Emmerson	United Caring Services
Jane Friona	USI
Mark Funkhouser	PEACE Zone
Marge Gianopoulos	Youth First - Warrick County
Christy Gillenwater	Southwest Indiana Chamber of Commerce
Eric Girten	St. Mary's Health
Cathlin Gray	Evansville Vanderburgh County School Corporation
John Greaney	St. Mary's Health
Joe Gries	Vanderburgh County Health Department
Monty Guenin	Evansville Police Department
Susan Hammock	USI
John Harding	Buffalo Trace Boy Scout Council
Anna Hargis	Big Brothers Big Sisters
Wyeth Hatfield	ECHO Health
Luzada Hayes	United Way of Southwest Indiana
Andrea Hays	Welborn Baptist Foundation
Ann Hayworth	Q Source
Lynn Herr	Vanderburgh County Health Department
Jill Hoskins	Brentwood Springs
Tracy Huck	St. Mary's Health

CHNA Behavioral Health Subcommittee Continued

Member	Organization
Kathy Hybarger	Indiana State Department of Health
Ashley Johnson	Deaconess
Joyce	Tri-Cap Warrick County
Elizabeth Kalb	USI
Brian Kerney	Aurora
Laura Keys	Youth First
Brett Kruse	Warrick County Sheriff's Department
Lynn Kyle	Lampion Center
Kent Leslie	Deaconess Cross Pointe
Faren Levell	Southwestern Behavioral Health
Donna Lilly	Deaconess Cross Pointe
Silas Matchem	Promise Zone
Wanda McCarter	Brentwood Springs
Susan Milligan	Evansville Catholic Schools
Sara Murray	United Way of Southwest Indiana
Lisa Myer	St. Mary's Health
Swateja Nimkar	USI - Public Health
Michelle Parks	St. Mary's Health
Chris Patterson	Vanderburgh County Medical Society
Kerseclia Patterson	USI
Ginger Patton	Vanderburgh County Health Department
Julie Phillips	Smoke Free Communities
Cathie Pritchard	Q Source
John Pulcini, MD	Surgeon
Janet Raisor	St. Mary's Health
Emily Reidford	Mental Health America - Vanderburgh County
Kathy Riedford	USI
Renee Rockers	Ivy Tech Community College
Vicki Schmitt	Southwest Indiana Chamber of Commerce
Denise Schultz	Youth First
Aleisha Sheridan	4C
Crystal Sisson	Vanderburgh County Substance Abuse Council
Holly Smith	St. Mary's Health
Nicole Smith	Brentwood Springs
Ken Spear, MD	Vanderburgh County Health Department
Davi Stein-Kiley	Youth First

CHNA Behavioral Health Subcommittee Continued

Member	Organization
Sally Sternberg	Evansville Catholic Schools
Susan Steinkamp	Aurora
Erika Taylor	YWCA
Teasa Thompson	Q Source
Ann Tornatta	Deaconess
Adam Trinkel	St. Mary's Health
Jody Uebelhack	Vanderburgh County Government
Vickie	St. Vincent DePaul
Beverly Walton	Community Patient Safety Coalition
Greg Wathen	Southwestern Behavioral Health
Ann White	USI
Mayor Lloyd Winnecke	City of Evansville
Bill Wooten, MD	Mayor's Substance Abuse Task Force
Matt Young	Warrick County Sheriff's Department

Asset Mapping Group	
Susan Hammock	University of Southern Indiana
Wyeth Hatfield	ECHO Health
Joe Gries	Vanderburgh County Health Department
Sylvia Groves	Evansville Vanderburgh School Corporation
Emily Reidford	Mental Health America
Dr. Ken Spear	Health Officer, Vanderburgh County Health Department
Stephanie Crandell	Evansville Vanderburgh School Corporation
Ashley Johnson	Deaconess Health System
4 College Interns	Vanderburgh County Health Department

CHNA Cancer (Breast and Prostate) Subcommittees

Anne Laine, American Cancer Society
Kathy Dockery, Deaconess
Ashley Johnson, Deaconess
Jaci Sager, Deaconess
Becca Scott, Deaconess
Claire Sutherby, Deaconess
Debra Wilson, Deaconess
Sandee Strader-McMillen, ECHO
Alissa McMillan, Evansville Surgical Associates
Melanie Atwood, Gilda's Club
Sheila Seiler, Komen Evansville
Rich Norris, Oncology Hematology Associates
Betty Cummings, Oncology Hematology Associates
Kristina Deters, Purdue Extension Warrick County
Jenna Alka, St. Vincent
Mark Crummley, St. Vincent
Vickie Detroy, St. Vincent
Melissa Driskell, St. Vincent
Eric Girten, St. Vincent
Sheila Hauck, St. Vincent
Ginger Kreyling, St. Vincent
Lisa Myer, St. Vincent
Julie Phillips, Smokefree Communities
Courtney Lee Horning, Smokefree Communities
Faren Levell, Southwestern Behavioral Health
Sandra Feltz, TOUCH
Lesi Nelson, Tri-Cap Warrick County
Sara Murray, United Way/211
Amy Tresslar, United Way/211
Robin Lawrence, US Oncology Network
Chris Patterson, Vanderburgh Medical Society
Marge Gianopoulos, Warrick County Cares
Sharon James, Warrick Health Department
Andrea Hays, Welborn Foundation
Melody Littrell, The Women's Hospital

CHNA Exercise, Nutrition, and Weight Subcommittees

Pre-diabetes Committee Members:

Amy Harris (Deaconess), Jennifer Brown (YMCA), Sally Kroeger (YMCA), RaShawnda Bonds (CAPE), Lacy Wilson (Purdue Extension), Ashley Johnson (Deaconess), Eric Girtten (St. Vincent), Kitty Williams (Deaconess), Mary Jo Boroweicki (Vanderburgh County Health Department), Lisa Verkamp (YMCA), Megan Brothers (Purdue Extension), Mandy and Anna (St Vincent).

Healthy Communities Partnership—Leadership team

Last Name	First Name	Organization
Armstrong	Joshua	Downtown Alliance
Bain	Kevin	Welborn Baptist Foundation
Becker	Shirley	Tri-State Medical Alliance
Carpenter	Jill	Vanderburgh Community Foundation
Coures	Kelley	Department of Metropolitan Development
Dauer	Sarah	Shoe Carnival
Gillenwater	Christy	Southwest Indiana Chamber
Hays	Andrea	Welborn Baptist Foundation
Jones	Don	University of Evansville
Kimmel	Brad	WNIN
McCullough	Julie	USI
Paradossi	Pete	Evansville Regional Business Committee
Raisor	Janet	St. Mary's
Schoettlin	Kathy	Old National Bank
Schriefer	Erin	Evansville Metropolitan Planning Organization
Shokouhzadeh	Seyed	Evansville Metropolitan Planning Organization
Spear	Dr. Kenneth	Vanderburgh County Health Department
Stewart	Derrick	YMCA
Strader-McMillen	Sandee	ECHO
Susott	Amy	Deaconess
Terry	Stephanie	cMOE
White	Ann	University of Southern Indiana
Whitehouse	Caren	EVSC
Whiteside	Jeff	Vectren
Wilson	Lacy	Purdue Extension

CHNA Exercise, Nutrition, and Weight Subcommittees Continued

Exercise, Nutrition, and Weight Sub-Committee Member	Organization
Ginger Patton	Vanderburgh County Health Department
Amy Canterbury	United Way of SWIN
Holly Smith	St. Mary's Health System (Now St. Vincent)
Ashley Johnson	Deaconess Health System
Joe Gries	Vanderburgh County Health Department
Lacy Wilson	Purdue Extension Office
Lisa Myer	St. Mary's Health System
Eric Girten	St. Mary's Health System
Chris Allen	Vanderburgh County Health Department
Janet Raisor	St. Mary's Health System
Faren Levell	Southwestern Behavioral Health
Karen Sue Conaway	iPickHere
Andrea Hays	Welborn Baptist Foundation
Linda Lutz	Evansville Vanderburgh School Corporation
Lisa Fulton	United Way of SWIN
Erin Schriefer	Evansville Metropolitan Planning Organization
Seyed Shokouhzadeh	Evansville Metropolitan Planning Organization