Reid Hospital & Health Care Services

Annual Report of Community Benefits

Completed: April 2011

Reid Hospital & Health Care Services' Mission

ARTICLE 1 - MISSION, FUNCTIONS, AND PHILOSOPHY

SECTION 1. MISSION STATEMENT

Wholeness – in body, mind and spirit -- is basic to fulfillment of human potential. Reid Hospital & Health Care Services and its people work with others to enhance wholeness for all those we serve.

Our convictions include commitment to:

- compassion
- service
- excellence
- value

These convictions are expressed daily through C.A.R.E. principles, the active demonstration of:

- Courtesy
- Attitude
- Respect
- Enthusiasm

These principles are directed toward those people we are privileged to serve and among all of us who serve.

SECTION 2. MAJOR FUNCTIONS

The major functions of Reid Hospital & Health Care Services are:

1. Providing a broadly defined range of health care that:

    - address community and service area needs
    - can be offered in a high quality manner
    - provide cost-effective value

2. Supporting, alone or collaboratively, educational efforts directed toward:

    - entry level preparation of health care workers
    - life long learning for those serving in health care
    - enhancing healthy lifestyles and choices in the people we serve

3. Initiating, participating or cooperatively supporting community efforts that enhance the general health status, well-being and total quality of life in our community and service area.

Reid Hospital & Health Care Services' Mission, continued

SECTION 3. PHILOSOPHY

Reid Hospital & Health Care Services is a private (voluntary), not-for-profit institution, responsive to the needs of our service area. Reid Hospital & Health Care Services is organized for charitable, scientific and educational purposes as a not-for-profit corporation. Our activities shall be conducted so that no part of our net earnings will inure to the benefit of any member, director, officer or individual. Any operating surplus will be used to establish or enhance facilities, services and programs compatible with our mission.

Accordingly, we believe:

1. That basic to everything we do is the recognition of the inherent worth and dignity of each individual; those served and those serving.

2. That the services we render should contribute to the physical, psychological, and spiritual well-being of those we serve.

3. That each patient and family is inherently endowed with certain rights which we recognize, respect and will attempt to meet. We believe that each patient should actively accept responsibility with respect to his/her own care and recovery.

4. That employees, both individually and collectively, are essential to the fulfillment of our mission. Accordingly, employees are entitled to personal dignity, respect, appropriate compensation (material and emotional) and opportunities for personal growth.

5. That the medical staff is essential to the fulfillment of our mission. Therefore, time and resources will be committed on the part of the hospital to the ongoing development of our medical staff.

6. That race, creed, sex, religion or financial status as the basis for access to basic services, employment or volunteer opportunities is contrary to our beliefs and practice.

Action Plan and Timetable

Adopt mission statement	December 1998
Identify community	January 2010
Select vendor for needs assessment	January 2010
Data gathered by vendor	Feb-April 2010
Identify priorities	April 2010
Establish work plan for rest of 2010	May 2010
File plan and post notice	May 2010
Administration approval of plan	June 2010

Please note: the results of the needs assessment and identified priorities were reviewed with the Community Benefit Committee of the Board of Directors in October 2010.

Planning Methods

Define population: the 7 county Reid service area. Wayne, Union, Henry, Randolph and Fayette counties in Indiana; Darke and Preble counties in Ohio.

Review of other data sources: United Way assessment, internal data.

Review of hospital improvement priorities.

Review of current trends in Community Benefit.

Review of IRS 990 Schedule H requirements.

Guiding Principles of Project

Must fit with Reid's mission.

Use of all community resources available.

Wide distribution of needs assessment results-should be a working document for all of community to use as needed.

Collaboration with community agencies.

Programs and services need to address both the underserved population as well as the community as a whole.

Demographics

The following population characteristics were identified in the 2010 needs assessment:

- Men- 48.4%
- Women- 51.6%
- Age 18 to 39-35.8%
- Age 40 to 64-43%
- Age 65+ 21.2%
- <200% FPL-29.8
- 93.7% are white
- 6.3% are identified as other

Community Benefits History and Profile

Reid Hospital's mission of "wholeness in body, mind and spirit for all those we serve" is the foundation for Community Benefit outreach. While Reid Hospital has always served the community by providing care regardless of ability to pay, in 1991 outreach began beyond the walls of the hospital.

The **Social Responsibility Grant** was implemented in 1991 to creatively and proactively support specific efforts and programs in the service area that were outside the scope of Reid's usual services. Community not-for-profit agencies were able to apply for funds to assist in development of programs that were consistent with Reid's charitable mission and focused on improving the health of the community. A budget to allow hourly employees to participate in community service during work hours was also established. The name was later changed to Community Benefit Grants to keep more in line with the most up-to-date terminology.

In 1992 the **No Charge Mammogram Program** was developed to provide free mammograms so that financially vulnerable women would have access to the same early detection and screening exams of women with the ability to pay.

The **Community Health Education Program** followed in 1993 to help the community achieve healthier lives through education and promotion of early detection and prevention of disease. In addition to health education, low cost or no cost screenings became part of Reid's continued outreach to vulnerable populations.

Health care needs can be quite unique and resources are not always available to meet those needs. The **Sara Ronald Care Fund** was established in 1995 to meet these unique needs. Discharge planners are able to use these funds to assist patients in meeting their health care needs.

In 1997 the **No Charge PSA** testing for prostate cancer was added as a community benefit. Reid Hospital's care and concern for the vulnerable populations is part of the organization's history.

Health and spirituality, once regarded as the separate domains of medicine and religion, are currently regarded as complementary aspects of the whole person's health care. In 1998 Reid Hospital developed the **Health Ministries Program** to bring these domains together. Volunteers in local churches serve as Health Ministers to their congregation by sharing health information provided by Reid Hospital.

The **Safe Quarters Car Seat Program** began in 2002 to ensure that every child leaving Reid Hospital would be properly restrained in the family vehicle. Both inpatients and outpatients are eligible for the program and any staff member can initiate the process after determining the child leaving the hospital does not have a proper restraint device. Infant, toddler and booster seat are available to guard the safety of children of all ages.

Every day, in many ways Reid Hospital reaches out to the serve the community as whole as well as those in need. These services have been provided for the last one hundred years, not because of federal or state scrutiny, but because it is the right thing the do.

Identified Community Needs

2010 was a year of transition. The first half of the year programs and services were provided based on the previous (2007) need assessment. Those needs were:

- Depression/stress
- Cardiovascular indicators-blood pressure and cholesterol
- Obesity/lack of physical exercise
- Asthma/chronic lung disease

The results of the needs assessment conducted became available in early May. While similar to the needs identified in 2007, there were a few differences. The needs identified in the 2010 assessment were:

- Access to health care
- Cardiovascular indicators-blood pressure and cholesterol
- Asthma
- Nutrition and overweight/obesity

After the results were obtained in May, many of the programs and services continued as planned. More emphasis was placed on health care access issues and less on depression and stress.

Programs Provided to Meet Identified Needs

Access to health care

- Enrollment assistance-Claim Aid personnel help patients enroll in Medicaid, Health Indiana Plan, etc.
- Community Benefit Mammograms
- Community Benefit PSA's
- Sara Ronald Care Fund
- Support of Siloam Health & Wellness Center
- Screenings at local soup kitchens

Cardiovascular Indicators

- Community blood pressure screenings
- Community cholesterol screenings
- Health Ministries modules
- Low cost heart scans
- Community-placed blood pressure machines

Asthma/Respiratory

- Health Ministries modules
- Low cost lung scan
- Information at health fairs
- Community presentations through Speakers Bureau

Nutrition/Overweight

- S.T.O.P (Pediatric weight loss program)
- Health Ministries modules
- Community presentations through Speakers Bureau
- Information at health fairs

Please note: this list highlights the major programs and services provided. It is not an all inclusive list.

Evaluation

Evaluation of community benefit programming is difficult at best. Traditional methods of program evaluation include number of attendees and their evaluation of the program contents. While this information is valuable in program planning it does not provide outcomes measures.

Looking at trends in community needs assessments does provide measure of community health outcomes. While improvements or declines in health indicators cannot be specifically tied to the programs and services of the hospital, they can provide some outcomes measures.

Comparison of 2007 and 2010 needs assessments

Improvements:

- Prevalence of chronic depression
- Prevalence of childhood asthma
- More likely to have source of ongoing care

Areas for improvement:

- Adult asthma
- Chronic heart disease
- Elevated blood pressure and cholesterol
- Fruit and vegetable consumption
- Obesity and overweight
- Those without health insurance

Programming from May-December 2010 and 2011 will be focused on addressing those areas that need improvement.

Charity Care

Reid Hospital provides care to all patients regardless of ability to pay. A Charity Care policy has been developed and information about paying hospital bills is available in the following locations:

- Emergency waiting room
- Patient Financial Services Office
- All registration areas
- Rehab Services waiting area
- Outpatient Care Center

Because of economic trends payment of hospital bills has become troublesome for many patients who have not otherwise had financial problems. Reid Hospital is making an effort to reach out to all patients at time of registration to provide information and assistance in paying hospital bills.

Data for the amount of charity care provided in 2010 is located in the executive summary pages that follow.

4/5/2011
Reid Hospital & Health Care Services
Executive Summary Excluding Non Community Benefit (Medicare and Bad Debt)
For period from 1/1/2010 through 12/31/2010

	Persons	Benefits
Community Health Improvement Services (A)		
Community Health Education (A1)	2,285	27,799
Community Based Clinical Services (A2)	385	5,976
Health Care Support Services (A3)	954	27,804
****** Community Health Improvement Services**	3,624	61,579
Health Professions Education (B)		
Nurses/Nursing Students (B2)	0	2,459
Other Health Professional Education (B3)	0	340
Scholarships/Funding for Professional Education (B4)	0	450
****** Health Professions Education**	0	3,249
Financial and In-Kind Contributions (E)		
Cash Donations (E1)	1	2,850
Grants (E2)	0	150,999
In-kind Donations (E3)	30,195	573,725
****** Financial and In-Kind Contributions**	30,196	727,574
Community Building Activities (F)		
Physical Improvements/Housing (F1)	0	8,580
Workforce Development (F8)	479	25,168
****** Community Building Activities**	479	33,748
Community Benefit Operations (G)		
Assigned Staff (G1)	0	69,535
Community Needs/Health Assets Assessment (G2)	0	18,750
Other Resources (G3)	2,112	30,812
****** Community Benefit Operations**	2,112	119,097
Traditional Charity Care		
Traditional Charity Care	8,714	9,842,674
****** Traditional Charity Care**	8,714	9,842,674
Government Sponsored Health Care		
Unpaid Cost of Medicaid	0	28,174,864
****** Government Sponsored Health Care**	0	28,174,864
Totals - Community Benefit	45,125	38,962,785
Totals - Overall	45,125	38,962,785

4/5/2011
Reid Hospital & Health Care Services
List of Programs...Complete

Year	Category	Inactive	Title	Dept #
2007	G2		Community Needs Assessment	9320
2007	F1		Adopt A Street	8300
2009	E3		Athletic Training Services	5115
2007	E3		Blood Drives for Community Blood Center	9999
2008	E3		Blood Pressure Machine Usage	9320
2009	E3		Board and Community Involvement	9999
2007	E3	*	Board and Community Involvement	9999
2010	G3		Bra-vo!	9999
2008	E3		Car Seats	9320
2007	A1		Childbirth Classes	0
2007	B3		Clinical Supervision	9999
2011	E1		Community Benefit Cash Donations	9320
2007	E2		Community Benefit Grants	9320
2007	E3		Community Benefit Mammograms	9320
2008	E3		Community Benefit Payroll Budget	9320
2009	E3		Community Benefit PSA's	9320
2007	E3		Community Donations	9999
2007	A2		Community Screenings	9999
2007	F5		Community Training & Development	9999
2009	F2		Economic Development	0
2008	A3		Enrollment Assistance	9100
2011	B1		Grand Rounds	0
2008	F7		Health Advocacy	9320
2007	B3		Health Care Career Development	9999
2009	F8		Health Care Workforce Development	9999
2007	A1		Health Education	9999
2006	A1		Health Fairs	0
2007	A1		Health Ministries Program	0
2007	E3		Jacy House	9320
2011	B1		Medical Students	7850
2007	E3		Meeting Room Space	9320
2007	A1		Prenatal Breastfeeding Classes	0
2009	G3		Resources for Community Benefits	9320
2009	A2		S.T.O.P.	8035
2008	A1		Safe Sitter	9320
2008	A3		Sara Ronald Care Fund	9320
2006	B4		Scholarships	9320
2010	B2		Schools of Nursing Room Use	9320
2009	G3		Shoes for Kids	9320
2007	G1		Staff time	0
2009	C8		Subsidized Health Services	1600
2007	A1		Support Groups	9999
2007	F6	*	Wayne County Vision	9999
2007	A1		Worksite Health Education Programs	9999

4/5/2011
Reid Hospital & Health Care Services
Programs Detail
For period from 1/1/2010 through 12/31/2010

	Monetary Inputs			Outputs
Title / Department	**Expenses**	**Offsets**	**Benefit**	**Persons**
Community Needs Assessment Community Benefit (9320)	18,750	0	18,750	Unknown
Adopt A Street Engineering (Grounds) (8300)	8,580	0	8,580	Unknown
Athletic Training Services Rehab Services (5115)	438,105	13,500	424,605	2,650
Blood Drives for Community Blood Center Multiple Departments (9999)	10,105	0	10,105	322
Blood Pressure Machine Usage Community Benefit (9320)	360	0	360	25,911
Board and Community Involvement Multiple Departments (9999)	10,238	0	10,238	151
Bra-vo! Multiple Departments (9999)	107	0	107	Unknown
Car Seats Community Benefit (9320)	3,374	0	3,374	78
Childbirth Classes Unknown (0)	2,437	0	2,437	95
Community Benefit Cash Donations Community Benefit (9320)	2,850	0	2,850	1
Community Benefit Grants Community Benefit (9320)	150,999	0	150,999	Unknown
Community Benefit Mammograms Community Benefit (9320)	12,556	0	12,556	292
Community Benefit Payroll Budget Community Benefit (9320)	7,031	0	7,031	Unknown
Community Benefit PSA's Community Benefit (9320)	3,197	0	3,197	104
Community Donations Multiple Departments (9999)	30,158	0	30,158	687
Community Screenings Multiple Departments (9999)	5,976	0	5,976	385
Enrollment Assistance Pt. Financial Services (9100)	16,340	0	16,340	487
Health Care Career Development Multiple Departments (9999)	340	0	340	Unknown
Health Care Workforce Development Multiple Departments (9999)	25,168	0	25,168	479
Health Education Multiple Departments (9999)	16,973	0	16,973	1,736
Health Ministries Program Unknown (0)	2,932	0	2,932	2
Jacy House Community Benefit (9320)	14,950	0	14,950	Unknown

4/5/2011
Reid Hospital & Health Care Services
Programs Detail
For period from 1/1/2010 through 12/31/2010

			Monetary Inputs			Outputs
Title / Department			Expenses	Offsets	Benefit	Persons
Meeting Room Space						
Community Benefit (9320)			57,151	0	57,151	Unknown
Prenatal Breastfeeding Classes						
Unknown (0)			1,024	0	1,024	30
Resources for Community Benefits						
Community Benefit (9320)			304	0	304	Unknown
Safe Sitter						
Community Benefit (9320)			2,328	105	2,223	25
Sara Ronald Care Fund						
Community Benefit (9320)			11,464	0	11,464	467
Scholarships						
Community Benefit (9320)			450	0	450	Unknown
Schools of Nursing Room Use						
Community Benefit (9320)			2,459	0	2,459	Unknown
Shoes for Kids						
Community Benefit (9320)			30,401	0	30,401	2,112
Staff time						
Unknown (0)			69,535	0	69,535	Unknown
Support Groups						
Multiple Departments (9999)			2,210	0	2,210	397
Number of Programs	**32**	**Grand Totals**	**958,852**	**13,605**	**945,247**	**36,411**

WANTED:
A healthy community

Reid Hospital has submitted a Community Needs Assessment report to the Indiana State Department of Health as required by the Indiana Hospital Financial Disclosure Act of 1994. The report outlines key health issues confronting the residents of Reid Hospital's service area.

Priorities Identified in 2010 Needs Assessment:

- Access to health care
- Cardiovascular disease
- Respiratory disease
- Nutrition and obesity

For information about the Community Needs Assessment or other Reid Hospital Community Benefit programs call the Community Benefit Department at (765) 983-3094 or the Community Relations Department at (765) 983-3042.

The entire needs assessment results are available at: ***ReidHospital.org***

Reid Hospital
& Health Care Services