

**BON SECOURS MARYVIEW MEDICAL CENTER**  
**FY2020 – FY2022 IMPLEMENTATION STRATEGY**  
**(September – December 2019)**

The Mission of Bon Secours Mercy Health, Inc. is to bring compassion to health care and to commit ourselves to help bring people and communities to health and wholeness as part of the healing ministry of Jesus Christ and the Catholic Church. Our mission leads us to create collaborative partnerships to address the health care needs of the underserved residents of Portsmouth, Suffolk, and Western Tidewater, Virginia. Through these partnerships, Bon Secours Maryview Medical Center is able to positively impact the health of the community in its service area.

A collaborative team from Maryview Medical Center, Children’s Hospital of The King’s Daughters, Sentara Healthcare, Riverside Health System and the Virginia Department of Health – Portsmouth (Collaborative) worked on the 2020 – 2022 Community Health Needs Assessment. In order to obtain input from the community, an online and hard-copy survey was disseminated in English and Spanish. In addition, community focus groups were held throughout Hampton Roads. Epidemiological data was provided by the Virginia Department of Health – Portsmouth and analyzed to compare the Maryview community to Virginia rates.

Maryview Medical Center’s senior leadership team met to review primary and secondary data gathered through the CHNA process (community meetings, community and key stakeholder surveys, and meetings with regional health systems and health departments). Recognizing the importance of each of the health concerns identified, the team evaluated them, the hospital’s strategic goals, services currently provided, and the current CHNA Implementation Plan’s progress. Based on these criteria, the team narrowed their focus to the top five health concerns selected by both the community and key stakeholders. The team then determined the areas in which they could have the greatest impact.

Using the results from the Community Health Needs Assessment (CHNA) survey, community focus groups, and analysis of secondary data, Bon Secours Maryview Medical Center developed the implementation strategy while also taking into account the following:

- Fit with the Bon Secours Health System Mission and Strategic Quality Plan
- High morbidity/mortality/negative outcome caused by need
- Service/Support for need is available within Bon Secours
- Service/Support for need is already available in the region, outside of Bon Secours
- Strong partners are available to address this need
- Need is present in more than one region in Hampton Roads

The detailed process, participants and results are available in Bon Secours Maryview Medical Center’s Community Health Needs Assessment Report which is available at Bon Secours’ website: [www.bonsecours.com](http://www.bonsecours.com).

The table below indicates the most significant health needs in our service area identified through the CHNA process.

<b>Prioritized significant community health need</b>	<b>Addressed by Maryview Medical Center</b>
Alcohol and Substance Abuse	Yes
Heart Conditions/Diabetes	Yes
Chronic Health in Aging Adults	Yes
Overweight/Obesity	Yes
Behavioral/Mental Health	Yes

The hospital completed its prior CHNA for tax year ending August 31, 2019, and its implementation strategy will be approved by the Board and in place by January 15, 2020. In order to align all hospital year-ends within the Bon Secours Mercy Health, Inc. system, a short period CHNA for tax year September 1, 2019 to December 31, 2019 is being prepared. The identified significant and prioritized health needs remain consistent from the prior CHNA. The hospital has not taken any actions towards the CHNA completed as of August 31, 2019 as its implementation strategy is still in development and not yet approved by the Board. The following implementation plan includes the health needs that will be addressed by Maryview Medical Center.

## **PRIORITY: Alcohol and Substance Abuse**

**GOAL:** *Reduce risk of opioid dependency and addiction in community.*

### **BACKGROUND ON STRATEGY**

Opioid addiction is a long-lasting (chronic) disease that can cause major health, social, and economic problems. Opioids are a class of drugs that act in the nervous system to produce feelings of pleasure and pain relief.

Opioid addiction is characterized by a powerful, compulsive urge to use opioid drugs, even when they are no longer required medically. Opioids have a high potential for causing addiction in some people, even when the medications are prescribed appropriately and taken as directed. Many prescription opioids are misused or diverted to others. Individuals who become addicted may prioritize getting and using these drugs over other activities in their lives, often negatively impacting their professional and personal relationships. It is unknown why some people are more likely to become addicted than others.

Opioids change the chemistry of the brain and lead to drug tolerance, which means that over time the dose needs to be increased to achieve the same effect. Taking opioids over a long period of time produces dependence, such that when people stop taking the drug, they have physical and psychological symptoms of withdrawal (such as muscle cramping, diarrhea, and anxiety). Dependence is not the same thing as addiction; although everyone who takes opioids for an extended period will become dependent, only a small percentage also experience the compulsive, continuing need for the drug that characterizes addiction.

Opioid addiction can cause life-threatening health problems, including the risk of overdose. Overdose occurs when high doses of opioids cause breathing to slow or stop, leading to unconsciousness and death if the overdose is not treated immediately. Both legal and illegal opioids carry a risk of overdose if a person takes too much of the drug, or if opioids are combined with other drugs (particularly tranquilizers called benzodiazepines).

-adapted from <https://qhr.nlm.nih.gov/condition/opioid-addiction>

**OBJECTIVE #1:** *Monitor opiate prescribing patterns within Maryview Medical Center.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact or Result
<ul style="list-style-type: none"> <li>Establish baseline opiate prescribing frequencies for emergency department, inpatient, and outpatient</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>Understand scope of opiate use within facility in order to effectively work towards reducing incidences of substance abuse.</li> </ul>
<ul style="list-style-type: none"> <li>Reduce the prescribing of opiates by 5% from established baseline in emergency department, inpatient, and outpatient</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Improve safe prescription practices throughout facility.</li> </ul>
<ul style="list-style-type: none"> <li>Reduce the prescribing of opiates by 10% from established baseline in emergency department, inpatient, and outpatient</li> </ul>	December 2022	<ul style="list-style-type: none"> <li>Improve safe prescription practices throughout facility.</li> </ul>
<p><b>Resources Committed:</b></p> <ul style="list-style-type: none"> <li>Staffing</li> </ul>	<p><b>Intended Partnerships:</b></p>	

**OBJECTIVE #2:** *Increase awareness of opioid and substance abuse risks through school and community partnerships.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact or Result
<ul style="list-style-type: none"> <li>Partner with clinical staff and community partners to provide opioid and other resiliency training within middle and high schools within the market. Goal of 1 school interaction for the year. This may include children in ages other than listed in KPI.</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>Reduce substance abuse-related injuries and deaths in youth.</li> <li>Increase awareness of harm from substance abuse and other negative health behaviors.</li> </ul>
<ul style="list-style-type: none"> <li>Partner with clinical staff and community partners to provide opioid and other resiliency training within middle and high schools within the market. Goal of 3 school interactions for the year.</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Reduce substance abuse-related injuries and deaths in youth.</li> <li>Increase awareness of harm from substance abuse and other negative health behaviors.</li> </ul>

<ul style="list-style-type: none"> <li>Partner with clinical staff and community partners to provide opioid and other resiliency training within middle and high schools within the market. Goal of 5 school interactions for the year.</li> </ul>	<p>December 2022</p>	<ul style="list-style-type: none"> <li>Reduce substance abuse-related injuries and deaths in youth.</li> <li>Increase awareness of harm from substance abuse and other negative health behaviors.</li> </ul>
<p><b>Resources Committed:</b></p> <ul style="list-style-type: none"> <li>Staffing</li> <li>Funding for presenters</li> </ul>		<p><b>Intended Partnerships:</b></p> <ul style="list-style-type: none"> <li>Local Middle and High Schools</li> <li>Portsmouth Community Service Board</li> <li>Portsmouth Sheriff Department</li> </ul>

## **PRIORITY: Heart Conditions/Diabetes**

**GOAL:** Improve access to healthcare opportunity to treat and manage cardiovascular disease.

### **BACKGROUND ON STRATEGY**

Cardiovascular diseases are a group of disorders of the heart and blood vessels which include: coronary heart disease, cerebrovascular disease, peripheral arterial disease, rheumatic heart disease, congenital heart disease, and deep vein thrombosis and pulmonary embolism. Cardiovascular diseases includes numerous problems, many of which are related to a process called atherosclerosis.

Atherosclerosis is a condition that develops when a substance called plaque builds up in the walls of the arteries. This buildup narrows the arteries, making it harder for blood to flow through. If a blood clot forms, it can block the blood flow. This can cause a heart attack or stroke.

Heart disease remains the leading cause of death in the U.S. and stroke continues to rank fifth, according to the National Center for Health Statistics Mortality Data Report for 2017. Research shows people living with diabetes are at least two times more likely to develop and die from cardiovascular disease.

The most important behavioral risk factors of heart disease and stroke are unhealthy diet, physical inactivity, tobacco use and harmful use of alcohol. The effects of behavioral risk factors may show up in individuals as raised blood pressure, raised blood glucose, raised blood lipids, and overweight and obesity. These “intermediate risks factors” can be measured in primary care facilities and indicate an increased risk of developing a heart attack, stroke, heart failure and other complications.

Cessation of tobacco use, reduction of salt in the diet, consuming fruits and vegetables, regular physical activity and avoiding harmful use of alcohol have been shown to reduce the risk of cardiovascular disease. In addition, drug treatment of diabetes, hypertension and high blood lipids may be necessary to reduce cardiovascular risk and prevent heart attacks and strokes. Health policies that create conducive environments for making healthy choices affordable and available are essential for motivating people to adopt and sustain healthy behavior.

There are also a number of underlying determinants of CVDs or "the causes of the causes". These are a reflection of the major forces driving social, economic and cultural change – globalization, urbanization and population aging. Other determinants of CVDs include poverty, stress and hereditary factors.

-adapted from <https://newsroom.heart.org/news/addressing-heart-disease-brain-health-and-diabetes-is-critical-to-reducing-deaths-in-the-u-s>, <https://www.heart.org/en/health-topics/consumer-healthcare/what-is-cardiovascular-disease>, [https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-\(cvds\)](https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-(cvds))

<b>OBJECTIVE #1:</b> <i>Improve readmission conversion rates for STEMI and CHF patients.</i>		
<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
<ul style="list-style-type: none"> <li>Establish baseline for readmissions among STEMI and CHF patients</li> <li>Establish current conversion rates for cardiology practices and cardiac rehab.</li> <li>Develop strategic interventions through MMC Readmissions Committee</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>Reduce hospitalizations among STEMI and CHF patients</li> </ul>
<ul style="list-style-type: none"> <li>Reduce STEMI and CHF readmission from baseline by improving conversion rates.</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Reduce hospitalizations among STEMI and CHF patients</li> </ul>
<ul style="list-style-type: none"> <li>Continue readmission reduction efforts by improving conversion rates.</li> </ul>	December 2022	<ul style="list-style-type: none"> <li>Reduce hospitalizations among STEMI and CHF patients</li> </ul>
<b>Resources Committed:</b> <ul style="list-style-type: none"> <li>Staffing</li> </ul>		<b>Intended Partnerships:</b>
<b>OBJECTIVE #2:</b> <i>Increase attendance at diabetes community education classes.</i>		
<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
<ul style="list-style-type: none"> <li>Establish baseline attendance and referral mechanism for diabetes classes. Identify and establish partner sites in community to offer diabetes</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>Reduce hospitalizations among heart disease patients</li> </ul>
<ul style="list-style-type: none"> <li>Increase attendance by 5% over 2020 baseline. Offer community class at 1 church and 1 organization (Walmart)</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Reduce hospitalizations among heart disease patients</li> </ul>
<ul style="list-style-type: none"> <li>Increase attendance by 10% over 2020 baseline. Offer community class at 2 churches and 1 city site.</li> </ul>	December 2022	<ul style="list-style-type: none"> <li>Reduce hospitalizations among heart disease patients</li> </ul>

**Resources Committed:**

- Staffing

**Intended Partnerships:**

- Healthy Portsmouth Partner Agencies
- Churches
- Walmart
- Portsmouth Health Department

## **PRIORITY: Chronic Health in Aging Adults**

**GOAL:** *Improve access to healthcare opportunity to treat and manage chronic conditions for aging population.*

### **BACKGROUND ON STRATEGY**

One in four Americans has multiple chronic conditions, those that last a year or more and require ongoing medical attention or that limit activities of daily living. That number rises to three in four Americans aged 65 and older.

This high prevalence has several underlying causes: the rapidly growing population of older adults, the increasing life expectancy associated with advances in public health and clinical medicine, and the high prevalence of some risk factors, such as tobacco use and physical inactivity. In 2014, 14.5% (46.3 million) of the US population was aged 65 or older and is projected to reach 23.5% (98 million) by 2060.

As a person's number of chronic conditions increases, his or her risk for dying prematurely, being hospitalized, and even receiving conflicting advice from health care providers increases. People with multiple chronic conditions also are at greater risk of poor day-to-day functioning. Aging adults experience higher risk of chronic disease. In 2012, 60% of older adults managed 2 or more chronic conditions. Chronic conditions can lower quality of life for older adults and contribute to the leading causes of death among this population.

Having multiple chronic conditions is also associated with substantial health care costs. Approximately 71% of the total health care spending in the United States is associated with care for the Americans with more than one chronic condition.<sup>2</sup> Among Medicare fee-for-service beneficiaries, people with multiple chronic conditions account for 93% of total Medicare spending.<sup>3</sup> People with multiple chronic conditions face substantial out-of-pocket costs of their care, including higher costs for prescription drugs

-adapted from <https://www.healthypeople.gov/2020/topics-objectives/topic/older-adults/ebrs>,  
<https://www.cdc.gov/chronicdisease/about/multiple-chronic.htm>

**OBJECTIVE #1:** *Improve awareness of chronic health conditions and social determinants of health through community education.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact or Result
<ul style="list-style-type: none"> <li>Partner with medical providers and community groups to provide education at SeniorHealth Lunch &amp; Learns on five health topics from the CHNA survey. Speakers will provide a pre and post test to group to demonstrate knowledge gained.</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>Increase patient awareness of top chronic health conditions for area.</li> <li>Reduce hospitalizations among aging population for chronic health conditions.</li> </ul>
<ul style="list-style-type: none"> <li>Partner with medical providers and community groups to provide education at SeniorHealth Lunch &amp; Learns on five health topics from the CHNA survey. Speakers will provide a pre and post test to group to demonstrate knowledge gained.</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Increase patient awareness of top chronic health conditions for area.</li> <li>Reduce hospitalizations among aging population for chronic health conditions.</li> </ul>
<ul style="list-style-type: none"> <li>Partner with medical providers and community groups to provide education at SeniorHealth Lunch &amp; Learns on five health topics from the CHNA survey. Speakers will provide a pre and post test to group to demonstrate knowledge gained.</li> </ul>	December 2022	<ul style="list-style-type: none"> <li>Increase patient awareness of top chronic health conditions for area.</li> <li>Reduce hospitalizations among aging population for chronic health conditions.</li> </ul>
<p><b>Resources Committed:</b></p> <ul style="list-style-type: none"> <li>Staffing</li> <li>Catering</li> <li>Facility Use</li> </ul>	<p><b>Intended Partnerships:</b></p> <ul style="list-style-type: none"> <li>Bon Secours Medical Group</li> <li>Community Agencies</li> <li>Portsmouth Sheriff Department</li> <li>Portsmouth Fire Department</li> <li>SeniorCorp</li> </ul>	

## **PRIORITY: Overweight/Obesity**

**GOAL:** Positively impact the incidence of childhood and adult obesity.

### **BACKGROUND ON STRATEGY**

Good nutrition, physical activity, and a healthy body weight are essential parts of a person's overall health and well-being. Together, these can help decrease a person's risk of developing serious health conditions, such as high blood pressure, high cholesterol, diabetes, heart disease, stroke, and cancer. Most Americans, however, do not eat a healthful diet and are not physically active at levels needed to maintain proper health. Fewer than 1 in 3 adults and an even lower proportion of adolescents eat the recommended amount of vegetables each day. Compounding this is the fact that a majority of adults (81.6%) and adolescents (81.8%) do not get the recommended amount of physical activity. Obesity often results in lost workdays, lower productivity, and negative health outcomes, including diabetes and depression.

In understanding the need for reduction of obesity within its service area, Maryview Medical Center will provide programming aimed at reducing obesity in its service area. Maryview also partners with other organizations in the community to provide support.

### **Evidence Base Sources:**

*Healthy People 2020* <http://www.healthypeople.gov>

*Data Resource Center for Child & Adolescent Health* <http://www.childhealthdata.org>

*Greater Hampton Roads Community Indicators Dashboard* <http://www.grhconnects.org>

**OBJECTIVE #1:** *Reduce the incidence of obesity through a variety of weight loss and physical activity programs.*

**ACTION PLAN**

<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Partner with Healthy Portsmouth to develop programs and educational opportunities that increase knowledge of healthy eating and exercise.	December 2020	<ul style="list-style-type: none"><li>• Using the Public Health Foundation's (PHF) Driver Diagram, identify opportunities to increase awareness of Healthy Eating.</li></ul>
Continue working with Healthy Portsmouth to implement programs and educational opportunities that increase knowledge of healthy eating and exercise.	December 2021	<ul style="list-style-type: none"><li>• Develop and implement programs and initiatives identified in the PHF Driver Diagram process.</li><li>• Increase knowledge of beneficial foods.</li><li>• Enhance partnership with City of Portsmouth officials to promote a healthy community environment.</li><li>• Enhance partnership with business community to promote a healthy community environment.</li></ul>

<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Continue working with Healthy Portsmouth to implement programs and educational opportunities that increase knowledge of healthy eating and exercise.	December 2022	<ul style="list-style-type: none"> <li>• Develop and implement programs and initiatives identified in the PHF Driver Diagram process.</li> <li>• Increase knowledge of beneficial foods.</li> <li>• Enhance partnership with City of Portsmouth officials to promote a healthy community environment.</li> <li>• Enhance partnership with business community to promote a healthy community environment.</li> </ul>
<b>Resources Committed:</b> <ul style="list-style-type: none"> <li>• Staffing</li> <li>• Funding for activities</li> <li>• Funding for community garden</li> </ul>		<b>Intended Partnerships:</b> <ul style="list-style-type: none"> <li>• Virginia Department of Health - Portsmouth</li> <li>• Hampton Roads Chamber of Commerce</li> <li>• Portsmouth City Council</li> </ul>
<b>OBJECTIVE #2:</b> <i>Reduce the incidence of obesity through a variety of Bon Secours InMotion and Medical Surgical weight loss and physical activity programs.</i>		
<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Provide nutrition education and physical activity through Medical Surgical Weight Loss programs. <ul style="list-style-type: none"> <li>• Track number of people participating in programs.</li> <li>• Expand programs to community settings.</li> </ul>	December 2020	<ul style="list-style-type: none"> <li>• Increase number of people attending programs.</li> <li>• Reduce BMI for people enrolled in programs.</li> </ul>

<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Provide nutrition education and physical activity through Medical Surgical Weight Loss programs. <ul style="list-style-type: none"> <li>Track number of people participating in programs.</li> <li>Expand programs to community settings.</li> </ul>	December 2021	<ul style="list-style-type: none"> <li>Increase number of people attending programs.</li> <li>Reduce BMI for people enrolled in programs.</li> </ul>
Provide nutrition education and physical activity through Medical Surgical Weight Loss programs. <ul style="list-style-type: none"> <li>Track number of people participating in programs.</li> <li>Expand programs to community settings.</li> </ul>	December 2022	<ul style="list-style-type: none"> <li>Increase number of people attending programs.</li> <li>Reduce BMI for people enrolled in programs.</li> </ul>
Partner with middle and high schools to provide nutrition and physical activity education to students.	December 2020	<ul style="list-style-type: none"> <li>Increase awareness of nutrition and physical activity health benefits.</li> <li>Increase number of children participating in education programs.</li> </ul>
<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Partner with middle and high schools to provide nutrition and physical activity education to students.	December 2021	<ul style="list-style-type: none"> <li>Increase awareness of nutrition and physical activity health benefits.</li> <li>Increase number of children participating in education programs.</li> </ul>

<b>ACTION PLAN</b>		
<b>Activity</b>	<b>Target Date</b>	<b>Anticipated Impact or Result</b>
Partner with middle and high schools to provide nutrition and physical activity education to students.	December 2022	<ul style="list-style-type: none"> <li>• Increase awareness of nutrition and physical activity health benefits.</li> <li>• Increase number of children participating in education programs.</li> </ul>
<b>Resources Committed:</b> <ul style="list-style-type: none"> <li>• Staffing</li> <li>• Funding for presenters</li> </ul>		<b>Intended Partnerships:</b> <ul style="list-style-type: none"> <li>• Local Middle and High Schools</li> </ul>

## **PRIORITY: Behavioral/Mental Health**

**GOAL:** Improve behavioral/mental health through efforts around suicide prevention.

### **Background Strategy**

Behavioral/Mental health disorders are health conditions characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning. Behavioral/Mental health disorders contribute to a number of health problems, including disability, pain and death. Behavioral/Mental health and physical health are closely connected. Mental illnesses, such as depression and anxiety, affect people's ability to participate in health-promoting behaviors.

According to the National Institute of Mental Health (NIMH), an estimated 46.6 million American adults (approximately 1 in 5) were diagnosed with any mental illness (AMI) in 2017. The prevalence of AMI was higher among women than men. The prevalence of AMI was also highest among adults reporting two or more races, followed by White adults.

Additionally, suicide is a leading cause of death (over 33,000 deaths) in the United States. An estimated 25 attempted suicides occur per every suicide death, and those who survive suicide may have serious injuries, at a cost of over \$30 billion in a year. Up to 45% of those who die by suicide have been treated by a primary care physician; however, as many as 81% do not see psychiatric help.

Men are approximately four times more likely to die of suicide; however, women report attempting suicide three times more often. Suicide also occurs at a disproportionately higher rate among adults 75 years and older.

### **Evidence Base Sources:**

*Greater Hampton Roads Community Indicators Dashboard* <http://www.grhconnects.org>

*National Institute of Mental Health* <http://nimh.nih.gov/health>

*Substance Abuse and Mental Health Services Administration (SAMHSA)* [http://samhsa.gov/suicide - prevention-in-primary-care](http://samhsa.gov/suicide-prevention-in-primary-care)

**OBJECTIVE #1:** *Prevent inpatient suicide while maintaining a safe care environment.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact
Daily shift rounding  Complete bi-annual environment risk assessments to include risk manager and engineering department.	2020	<ul style="list-style-type: none"> <li>• Prevention of inpatient suicide</li> <li>• Create a safe care setting</li> <li>• Ongoing education for staff on potential risks</li> </ul>
Daily shift rounding  Complete bi-annual environment risk assessments to include risk manager and engineering department.	2021	<ul style="list-style-type: none"> <li>• Prevention of inpatient suicide</li> <li>• Create a safe care setting</li> <li>• Ongoing education for staff on potential risks</li> </ul>
Daily shift rounding  Complete bi-annual environment risk assessments to include risk manager and engineering department.	2022	<ul style="list-style-type: none"> <li>• Prevention of inpatient suicide</li> <li>• Create a safe care setting</li> <li>• Ongoing education for staff on potential risks</li> </ul>

**OBJECTIVE #2:** *Reduce sentinel events while maintaining patient safety.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact
Daily assessment on all patients for suicidal ideations/thoughts.  Daily chart audits to verify completion of suicide assessments.	2020	<ul style="list-style-type: none"> <li>• Reduce sentinel events</li> <li>• Maintain patient safety</li> <li>• Implement appropriate suicide watch on identified high-risk patients</li> </ul>

Daily assessment on all patients for suicidal ideations/thoughts.  Daily chart audits to verify completion of suicide assessments.	2021	<ul style="list-style-type: none"> <li>• Reduce sentinel events</li> <li>• Maintain patient safety</li> <li>• Implement appropriate suicide watch on identified high-risk patients</li> </ul>
Daily assessment on all patients for suicidal ideations/thoughts.  Daily chart audits to verify completion of suicide assessments.	2022	<ul style="list-style-type: none"> <li>• Reduce sentinel events</li> <li>• Maintain patient safety</li> <li>• Implement appropriate suicide watch on identified high-risk patients</li> </ul>

**OBJECTIVE #3:** *Reduce the suicide rate of patients who were recently treated and released from a healthcare setting*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact
Call every patient within 24 hours of discharge to inquire about health status, status of written prescriptions, and understanding of plan for continued follow-up care.	2020	<ul style="list-style-type: none"> <li>• Reduce the suicide rate of patients who are recently treated and released from a healthcare setting</li> <li>• Adequate and attainable follow-up treatment</li> <li>• Elimination in gaps of service</li> </ul>
Call every patient within 24 hours of discharge to inquire about health status, status of written prescriptions, and understanding of plan for continued follow-up care.	2021	<ul style="list-style-type: none"> <li>• Reduce the suicide rate of patients who are recently treated and released from a healthcare setting</li> <li>• Adequate and attainable follow-up treatment</li> <li>• Elimination in gaps of service</li> </ul>
Call every patient within 24 hours of discharge to inquire about health status, status of written prescriptions, and understanding of plan for continued follow-up care.	2022	<ul style="list-style-type: none"> <li>• Reduce the suicide rate of patients who are recently treated and released from a healthcare setting</li> <li>• Adequate and attainable follow-up treatment</li> <li>• Elimination in gaps of service</li> </ul>

**Resources Required (MENTAL HEALTH)**

Staffing, Funding, Partnerships

**Resources Committed:**

- Staffing
- Funding

**Intended Partnerships:**

## **PRIORITY: Behavioral/Mental Health**

**GOAL:** *Protect the dignity of behavioral/mental health patients and community by providing space in Maryview Behavioral Medicine Services for court sessions and substance abuse support groups.*

### **Background Strategy**

Substance abuse is a major public health issue that has a strong impact on individuals, families, and communities. The use of illicit drugs, abuse of alcohol, and addiction to pharmaceuticals is linked to serious health conditions such as heart disease, cancer, and liver diseases, exacting over \$600 billion annually in costs related to lost work productivity, healthcare, and crime.

Substance abuse also contributes to a wide range of social, physical, mental, and public health problems such as teenage pregnancy, HIV/AIDs, STIs, domestic violence, child abuse, motor vehicle crashes, crime, homicide, and suicide. Because of these far-reaching consequences of substance abuse, treatment programs have been developed to counter addiction.

There are approximately 75,000 deaths attributable to excessive alcohol use each year in the United States. This makes excessive alcohol use the 3rd leading lifestyle-related cause of death for the nation. In the single year 2003, there were over 2 million hospitalizations and over 4 million emergency room visits for alcohol-related conditions.

According to the Centers for Disease Control and Prevention, excessive alcohol use, either in the form of heavy drinking (drinking more than 15 drinks per week on average for men or more than eight drinks per week on average for women), or binge drinking (drinking more than five drinks during a single occasion for men or more than four drinks during a single occasion for women), can lead to increased risk of health problems, such as liver disease and unintentional injuries. Alcohol abuse is also associated with a variety of other negative outcomes, including employment problems, legal difficulties, financial loss, family disputes, and other interpersonal issues.

Drug overdose deaths are the leading cause of injury death in the United States, with over 100 drug overdose deaths occurring every day. The death rate due to drug overdose has been increasing over the last few decades. The majority of deaths due to pharmaceutical overdose involve opioid analgesics (prescription painkillers). Those who die from drug overdose are more likely to be male, Caucasian, or between the ages of 45 and 49. Although the majority of drug overdose deaths are accidental, they may also be intentional or of undetermined intent. Opioid abuse is a serious public health issue, but preventive actions, treatment for addiction, and proper response to overdoses can help.

### **Evidence Base Sources:**

Centers for Disease Control <http://www.cdc.org>

Greater Hampton Roads Community Indicators Dashboard <http://www.grhconnects.org>

**OBJECTIVE #1:** *Protect the dignity of behavioral/mental health patients and community by providing space in Maryview Behavioral Medicine Services for court sessions.*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact
Provide space for Portsmouth Department of Justice to hold court and counseling sessions in Maryview Behavioral Medicine Services.	2020	<ul style="list-style-type: none"> <li>• Dignity of behavioral/mental health patients is maintained.</li> <li>• Immediate counseling available</li> <li>• Adequate and attainable follow-up treatment</li> </ul>
Provide space for Portsmouth Department of Justice to hold court and counseling sessions in Maryview Behavioral Medicine Services.	2021	<ul style="list-style-type: none"> <li>• Dignity of behavioral/mental health patients is maintained.</li> <li>• Immediate counseling available</li> <li>• Adequate and attainable follow-up treatment</li> </ul>
Provide space for Portsmouth Department of Justice to hold court and counseling sessions in Maryview Behavioral Medicine Services.	2022	<ul style="list-style-type: none"> <li>• Dignity of behavioral/mental health patients is maintained.</li> <li>• Immediate counseling available</li> <li>• Adequate and attainable follow-up treatment</li> </ul>

**OBJECTIVE #2:** *Protect the dignity of behavioral/mental health patients and community through providing space for various behavioral and mental health support groups to meeting*

**ACTION PLAN**

Activity	Target Date	Anticipated Impact
Provide space for Alcohol Anonymous, Narcotics Anonymous, and Gamblers Anonymous to meet.	2020	<ul style="list-style-type: none"> <li>• Increased participation by community with addictive behaviors</li> </ul>

Provide space for Alcohol Anonymous, Narcotics Anonymous, and Gamblers Anonymous to meet.	2021	<ul style="list-style-type: none"> <li>Increased participation by community with addictive behaviors</li> </ul>
Provide space for Alcohol Anonymous, Narcotics Anonymous, and Gamblers Anonymous to meet.	2022	<ul style="list-style-type: none"> <li>Increased participation by community with addictive behaviors</li> </ul>
<b>Resources Required</b>		
<b>Resources Committed:</b> <ul style="list-style-type: none"> <li>Staffing for monitoring facilities</li> <li>Volunteer support group facilitators</li> </ul>	<b>Intended Partnerships:</b> <ul style="list-style-type: none"> <li>Portsmouth Department of Justice</li> <li>Narcotics Anonymous</li> <li>Alcoholics Anonymous</li> <li>Gambling Anonymous</li> </ul>	

## **OTHER IDENTIFIED COMMUNITY HEALTH NEEDS NOT ADDRESSED IN IMPLEMENTATION PLAN**

Although Bon Secours Maryview Medical Center recognizes the importance of all the needs identified by the community, resources are limited within the organization to prioritize all of these needs. There are other providers and organizations addressing these needs with specialized programs and services, many of whom serve on the regional Community Health Needs Assessment Coalition. Maryview Medical Center is prepared to collaborate or assist with these efforts beyond the current set of services we provide.

The list below provides names of some resources in the area that can help meet the identified needs of the community:

ACCESS	Lake Taylor Hospital
Catholic Charities of Eastern Virginia	Norfolk Department of Public Health
Chesapeake Free Clinic (Dental)	Old Dominion University
Chesapeake Regional Medical Center	Operation Blessing (Dental)
Children's Hospital of The King's Daughters	Response – Sexual Abuse Support Services
Eastern Virginia Medical School	Senior Services of Southeastern Virginia
Foodbank of Southeastern Virginia	Sentara Healthcare
Geriatrics Life Care	The Barry Robinson Center
Hampton Roads Community Health Center(s)	United Way of South Hampton Roads
Hampton Roads Community Foundation	Veterans Affairs Medical Center
Jewish Family Services	Virginia Supportive Housing

For a list of additional resources available to meet identified needs of the community, please review the Virginia Department of Health's Community Services Resource Guide at <https://www.vdh.virginia.gov/Resources>.

The Bon Secours Maryview Medical Center 2020 – 2022 Implementation Plan was approved by the Bon Secours Hampton Roads Board of Directors on December 3, 2019.