



**FORREST GENERAL
HOSPITAL**
CHNA REPORT
2016

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EXECUTIVE SUMMARY

The purpose of this Community Health Needs Assessment (CHNA) report is to provide Forrest General Hospital with a functioning tool to guide the hospital as it works to improve the health of the community it serves. In addition, the report meets the guidelines of the Internal Revenue Service.

The results of the CHNA will guide the development of Forrest General's community health improvement initiatives and implementation strategies. This is a report that may be used by many of the hospital's collaborative partners in the community.

The assessment was performed and the implementation strategies were created by the Community Health Needs Assessment Steering Committee with assistance from HORNE LLP of Ridgeland, Mississippi. The assessment was conducted in October and November, 2016.

The main input was provided by previous patients, employees and community representatives. An opportunity to offer input was made available to the entire community through word of mouth and paid public notice. Additional information came from public databases, reports, and publications by state and national agencies.

The implementation describes the programs and activities that will address these health priorities over the next three years. The CHNA report is available on the hospital's website www.forrestgeneral.com or a printed copy may be obtained from the hospital's administrative office.

We sincerely thank those who provided input for this assessment. We look forward to working closely with our community to help improve the overall health of those we serve.

Evan S. Dillard, MPH, MBA, FACHE
President and Chief Executive Officer
Forrest Health

ABOUT THE HOSPITAL

Since 1952, Forrest General Hospital, located in Hattiesburg, Mississippi, has been a leader in medical excellence in South Mississippi. The hospital has grown from the original 90-bed facility into a 512-bed, level II regional trauma center hospital system. In addition to the 400-bed general medical/surgical facility, the system includes Pine Grove Behavioral Health Services, an 88-bed chemical dependency and psychiatric unit, and Rehab Resource, a 24-bed rehabilitation unit.

In 2012, Forrest General strengthened the foundation for the future of healthcare in the region by forming Forrest Health System to increase access to quality healthcare and improve the services and stability of local community hospitals.

Forrest Health includes:

Forrest General Hospital
Highland Community Hospital in Picayune
Jefferson Davis Community Hospital in Prentiss

Marion General Hospital in Columbia
Walthall General Hospital in Tylertown
The Orthopedic Institute in Hattiesburg

Forrest General also provides all-levels of care for critical access care hospitals in the 19-county service area, including Covington County Hospital, Greene County Hospital, Hancock Medical Center, Jefferson Davis Community Hospital, Perry County General Hospital, Stone County Hospital, Inc. and Walthall County General Hospital.

Regency Hospital Company maintains a 33-bed long-term acute care facility, Regency Hospital, within Forrest General Hospital. Patients at Regency require acute-care for a longer period of time than standard hospital patients. Forrest General's Emergency Center is among the most modern and advanced emergency facilities available. The Emergency Center includes a total of 59 rooms, including 10 acute care rooms, 45 emergent care rooms and four minor care rooms in addition to a decontamination room. The facility is staffed 24 hours a day by board-certified physicians, advanced practice nurses, and registered nurses. The Emergency Center also serves as medical control for AAA Ambulance and Southeast Mississippi Air Ambulance District (SEMAAD) – the longest continually operating air ambulance service in the United States. The Emergency Center sees over 80,000 patients a year.



ABOUT THE HOSPITAL

Forrest General's Trauma Center combines the latest technology with exceptional physicians and staff to provide excellent care to critically-injured trauma patients throughout the Southeast Trauma Care Region. Forrest General was the first hospital in Mississippi designated as a Level II trauma center by the Mississippi State Department of Health, Bureau of Emergency Medical Services. The Trauma Center at Forrest General provides an immediate, organized response by a highly-specialized team, 24/7, 365 days a year.

Trauma Services is staffed by board-certified trauma surgeons, an in-house anesthesiologist who is available 24-hours a day, and provides 24-hour coverage for neurosurgery, orthopedic surgery, maxillofacial surgery, otolaryngology, urology, and interventional radiology. The trauma center features dedicated trauma bays with state-of-the-art technology and dedicated operating rooms.

One of the goals of the Trauma Center is to reduce traumatic injuries by participating in injury prevention efforts throughout the community, including providing education on topics such as ATV safety, seatbelt safety, car-seat safety, bicycle safety, and fall prevention.

When a heart attack strikes, time is a critical factor in determining the outcome. The Cardiac Network links a number of smaller South Mississippi hospitals to Forrest General's Heart & Vascular Services to provide prompt, life-saving technology to heart attack victims. Network hospitals are provided clot-dissolving drugs that are administered to heart attack victims prior to being transported to Forrest General for care.



The Cardiac Network enables many South Mississippi counties to receive the same fast, expert medical treatment available at Forrest General Hospital. Local doctors work closely with Forrest General's interventional cardiologists from the time the patient arrives at their local hospital to the time they arrive at Forrest General for more advanced treatment.

ABOUT THE HOSPITAL

Physicians and staff at Forrest General are making a difference in the lives of patients who suffer from the most serious kind of heart attack through participation in the STEMI Care System. The STEMI Care System is a network of hospitals that have implemented a process designed to deliver care within minutes to patients experiencing a heart attack called an ST Elevation Myocardial Infarction, or STEMI. Several hospitals in south Mississippi participate in the STEMI Network, including Forrest General, South Central Regional Medical Center in Laurel, Highland Community Hospital in Picayune, Walthall General Hospital, Marion General Hospital, Covington County Hospital, Perry County Hospital, Greene County Hospital, Pearl River County Hospital, Stone County Hospital, Magee General Hospital, George Regional Hospital and Wayne General Hospital.

The STEMI Network was put in place through the efforts of the Mississippi Healthcare Alliance, which features North, Central and Southern Divisions and is supported by 19 healthcare facilities across the state that perform emergency angioplasty for heart attack patients. Forrest General received the American Heart Association's Mission: Lifeline Gold Quality Achievement Award recognizing outstanding care of STEMI Heart Attack patients.



THE COMMUNITY HEALTH NEEDS ASSESSMENT

The Community Health Needs Assessment defines opportunities for healthcare improvement, creates a collaborative community environment to engage multiple change agents, and is an open and transparent process to listen and truly understand the health needs of Forrest and Lamar County. It also provides an opportunity for the hospital to identify valuable collaborative partners as we try to better serve the community and improve the health of our citizens.

The federal government now requires that non-profit hospitals conduct a community health assessment. These collaborative studies help healthcare providers build stronger relationships with their communities, identify needs, and dedicate funding and other resources toward programs that clearly benefit local residents.

COMMUNITY HEALTH NEEDS ASSESSMENT STEERING COMMITTEE

The Committee is responsible for the oversight, design, and implementation of the CHNA. It will continue to collect information, establish community relationships and oversee the budget and funding sources. Adhering to an agreed upon timeline, the Committee will generate, prioritize, and select approaches to address community health needs.

The hospital's administrator developed a hospital steering committee. The appointed members are listed below. Other members may serve on the steering committee as the committee's work progresses.

Millie Swan	<i>Chief Marketing and Medical Staff Services Officer</i>
Tangela Boutwell	<i>Director of Women and Children's Services</i>
Haley Bush	<i>Web and Social Media Specialist</i>
Matt Bush	<i>Web and Social Media Coordinator</i>
Jeanne Carlson	<i>Director of LiveWell Center</i>
Jennifer Easley	<i>Director of Food and Nutrition</i>
Kathy Emmons	<i>Spirit of Women Coordinator</i>
Breanne Gaubert	<i>Spirit Girls and Sweeteas Coordinator</i>
Amanda Kirby	<i>Media Coordinator</i>
Michelle Leslie	<i>Director of Marketing and Communications</i>
Joe Marcello	<i>Service Line Director, Heart and Vascular, and Oncology</i>
Colleen Munkel	<i>Director of Business Development, Pine Grove</i>
Shelia Shappley	<i>Service Line Director, Emergency Services</i>

THE COMMUNITY HEALTH NEEDS ASSESSMENT

COMMUNITY ENGAGEMENT AND TRANSPARENCY

We are pleased to share with our community the results of our Community Health Needs Assessment. The following pages offer a review of the strategic activities we have undertaken, over the last three years, as we responded to specific health needs we identified in our community. The report also highlights the updated key findings of the assessment. We hope you will take time to review the health needs of our community as the findings impact each and every citizen of our rural Mississippi community. Also, review our activities that were in response to the needs identified in 2013. Hopefully, you will find ways you can personally improve your own health and contribute to creating a healthier community.



DATA COLLECTION

Primary and secondary data was gathered, reviewed, and analyzed so that the most accurate information was available in determining the community's health needs and appropriate implementation process.

Primary Data: Primary data is that which is collected by the assessment team. It is data collected through conversations, telephone interviews, focus groups and community forums. This data was collected directly from the community and is the most current information available.

Secondary Data: Secondary data is that which is collected from sources outside the community and from sources other than the assessment team. This information has already been collected, collated, and analyzed. It provides an accurate look at the overall status of the community.

Secondary data sources included:

The United States Census Bureau	Mississippi State Department of Health
Centers for Disease Control and Prevention	American Heart Association
Forrest General Medical Records Department	Trust for America's Health
US Department of Health & Human Services	
Mississippi Center for Obesity Research, University of Mississippi Medical Center	
Mississippi State Department of Health, Office of Health Data and Research	

COMMUNITY INPUT

COMMUNITY FOCUS GROUP

A community focus group was held at Forrest General Hospital on Thursday, October 27, 2016. The participants in the group were carefully selected because they each represented a specific segment of the populations served. In addition, they can act as a continuous conduit between the community and the leadership of the hospital. These participants contributed to a structured discussion which was impartially facilitated by a healthcare consultant from HORNE LLP of Ridgeland, Mississippi.

This focus group provided a deliberative venue for learning, trust-building, creative problem solving, and information gathering which ultimately served as a valuable resource for the CHNA Steering Committee as it developed the hospital's health priorities for the next three years. Since the focus group was based on open communication and critical deliberation, it will hopefully lead to improved community relations, trust and collaborative partnerships as the hospital strives to improve the overall health of the community.

Toby Barker	<i>Mississippi State Representative</i>
Mike Cheng, MD	<i>Radiation Oncology</i>
Theresa Erickson	<i>Pinebelt Community Foundation</i>
Deborah Grantham	<i>Southeast Mississippi Rural Health Initiative</i>
Vickie Martin	<i>Southeast Mississippi Rural Health Initiative</i>
Ann McCullen	<i>Edward's Street Mission</i>
Tom Messer, MD	<i>Cardiology</i>
John Nelson, MD	<i>Emergency Medicine</i>
Andrea Saffle	<i>Hattiesburg Downtown Association</i>
Leigh Ann Underwood	<i>Southern Bone and Joint</i>
Eddy Walker, MD	<i>Emergency Medicine</i>
Valencia Williamson	<i>ADP (Area Development Partnership)</i>



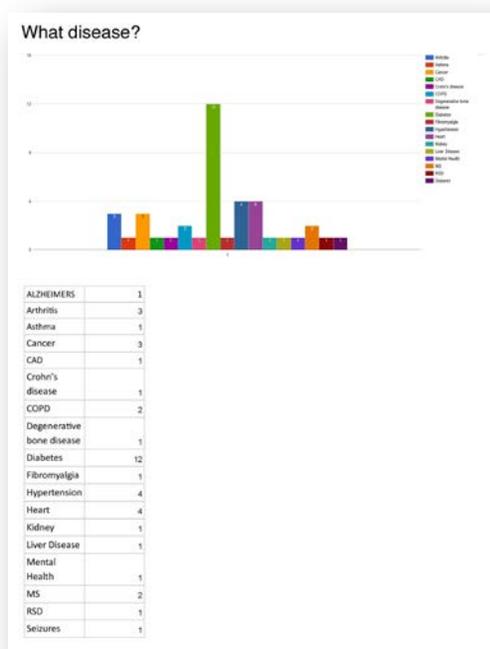
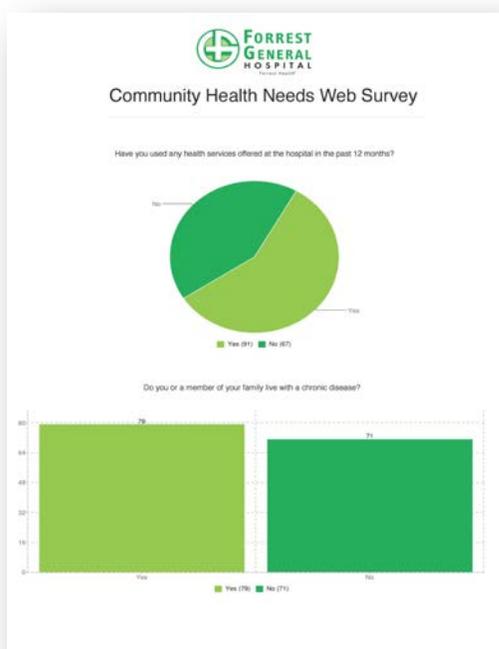
COMMUNITY INPUT

COMMUNITY SURVEY

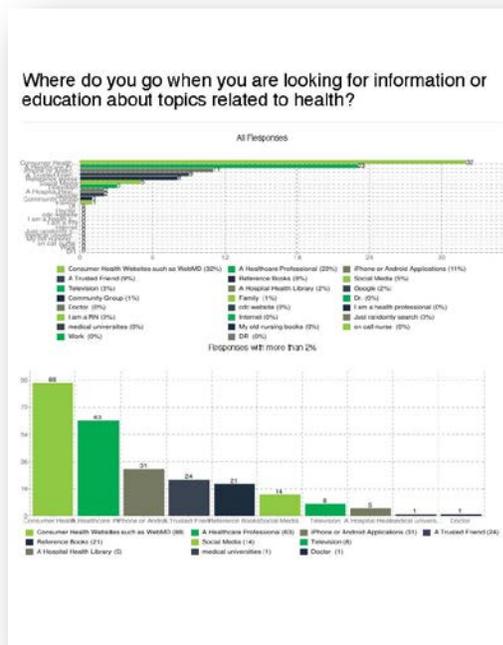
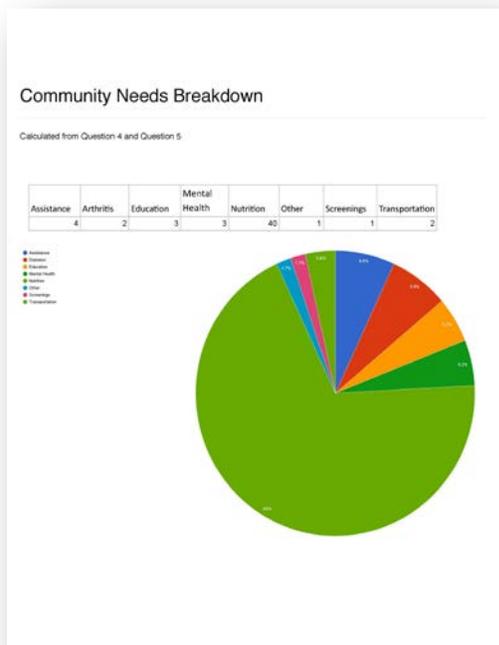
Community health needs were identified by collecting and analyzing data and information from multiple quantitative and qualitative sources. Considering information from a variety of sources is important when assessing community health needs, to ensure the assessment captures a wide range of facts and perspectives and to assist in identifying the highest-priority health needs. One of the most important sources is to seek input directly from those we serve.

In order to provide citizens of our services area with an opportunity to provide us their valuable insight, a Community Survey was made available online. The survey was posted on www.forrestgeneral.com for the first two weeks of November. The survey offered anyone who visited the FGH site a chance to give their feedback in a variety of questions pertaining to the well-being of them and their families.

The following are results from the survey that was focused on the health of the community and the areas of greatest interest:



COMMUNITY INPUT



INPUT FROM THE COMMUNITY

Through internal conversations at the hospital, one-on-one interviews with community leaders, and a hospital focus group, much information was gathered which was influential as the CHNA Steering Committee developed the hospital’s implementation plan.

There were health needs identified that can be addressed and met by the hospital and others that must be referred to other local organizations or health agencies. Several health improvement opportunities were identified where the hospital will try to act as a community catalyst for action but are not part of the hospital’s implementation plan.

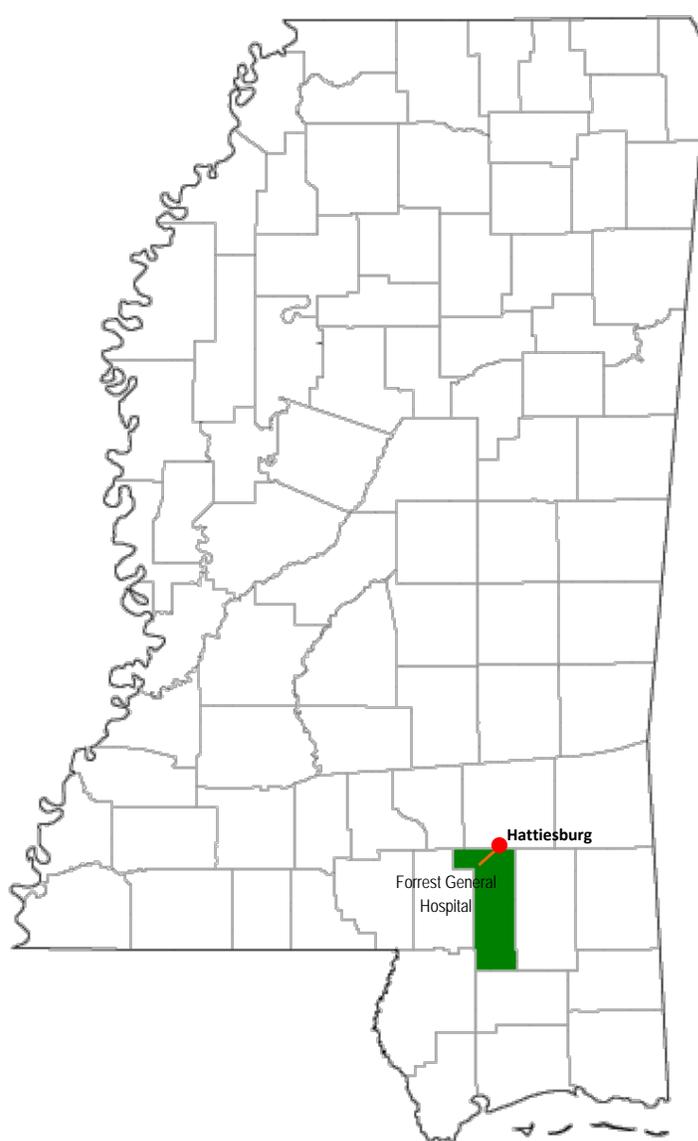
Suggestions included:

- Coordinating group-led health education classes with the local churches, school systems and other local health agencies
- Having more visible health and wellness activities in various locations throughout the county
- Creating a culture of community health and responsibility
- Developing an initiative with all county health providers to empower the community to take individual ownership in his or her health.

ABOUT THE COMMUNITY

Forrest County is a county located in the southern part of Mississippi. It is part of the Hattiesburg, Mississippi Metropolitan Statistical Area. As of the 2014 census, the population was 75,934. Its county seat and largest city is Hattiesburg. The county has a total area of 470.23 square miles, of which 466.31 square miles (or 99.17%) is land and 3.92 square miles (or 0.83%) is water.

FORREST COUNTY, MISSISSIPPI



(2007 Census Publications State and County Profiles Mississippi. *USDA Census of Agriculture, 2007*).

ABOUT THE COMMUNITY

DEMOGRAPHICS

In 2014 there were 75,934 people, 27,661 households, and 17,857 families residing in the county. The population density was 160.7 people per square mile. The racial makeup of the county was 57.2% White, 37.3% Black or African American, 0.4% Native American, 1.1% Asian, 0.1% Pacific Islander, 1.8% from other races, and 1.4% from two or more races. 3.2% of the population was Hispanic or Latino of any race (Community Facts, United States Population, 2010).

There were 27,661 households out of which 34.0% had children under the age of 18 living with them, 38.9% were married couples living together, 18.7% had a female householder with no husband present, and 37.5% were non-families. 28.6% of all households were made up of individuals and 8.9% had someone living alone who was 65 years of age or older. The average household size was 2.48 and the average family size was 3.08 (Community Facts, United States Population, 2010).

In the county, the population was spread out with 23.5% under the age of 18, 16.6% from 18 to 24, 26.1% from 25 to 44, 21.9% from 45 to 64, and 11.9% who were 65 years of age or older. The median age was 30 years. For every 100 females there were 91.3 males. For every 100 females age 18 and over, there were 87.9 males (Community Facts, United States Population, 2010).

The median income for a household in the county was \$36,538, and the median income for a family was \$46,804. The per capita income for the county was \$20,075. About 21.9% of families and 26.4% of the population were below the poverty line, including 36.1% of those under age 18 and 14.2% of those ages 65 or over (Community Facts, United States Population, 2010).

PATIENT ORIGIN AND SERVICE AREA

Almost 40% of the inpatients seen last year reside in Forrest County and the adjacent county to the west, Lamar County, with 30.5% coming from Forrest and 8.8% coming from Lamar. Forrest and Lamar Counties make up the core of the primary service area which is the six counties surrounding those two counties. Those eight counties represent over 80.3% of Forrest General's inpatient population. Forrest County is 70% urban and 30% rural with the majority of the population centered in the Hattiesburg metropolitan area. The secondary service area is comprised of eleven Mississippi counties whose residents experience many of the health and lifestyle challenges that are typical of southern rural communities.

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

All rural areas in the U.S. are unique with extensive geographic and economic variations. When compared to urban populations however, rural populations are often characterized as being older and less educated; more likely to be covered by public health insurance; having higher rates of poverty, chronic disease, suicide, deaths from unintentional injuries and motor vehicle accidents; having little or no access to transportation; and having limited economic diversity. All of these issues create challenges and opportunities to improve the health of those living in the rural South, and they play a role in understanding some of the underlying causes associated with issues related to the rural health workforce, health services, and special populations. These unique population and health issues were taken into consideration as the steering committee evaluated health and wellness opportunities to address. Some can be approached through initiatives of the hospital and others will best be approached through a cooperative effort of local government, state agencies, churches, volunteer programs and the hospital.

OBESITY IN MISSISSIPPI

The cost to the state of Mississippi due to obesity in terms of our heart health, quality of life, healthcare costs and life spans is astronomical. Obesity contributes to heart disease, stroke, diabetes and a myriad of orthopedic conditions.

Over the past few decades, obesity has become a serious healthcare issue in the United States. The obesity rate for adults was 13 percent in 1962; it now stands at over two and half times that. Today, 17 percent of children are obese.

As a health condition, it costs the country nearly \$150 billion every year. But obesity is not just a health condition anymore, at least according to the American Medical Association. The nation's largest group of doctors voted in June 2013 to classify obesity as a disease.

Obesity has become the greatest threat to the health of Mississippians and if left unchecked will overwhelm our healthcare system. Without action, what is now a ripple effect of negative health consequences will become a tidal wave of disease, disability and premature death.

The uncontrolled epidemic of obesity is wreaking havoc on our state. One out of every three adults in Mississippi is considered obese. Obesity predisposes to a whole host of chronic diseases, and it produces a ripple effect of negative health consequences: hypertension, heart disease, stroke, kidney disease, neurodegenerative disease, diabetes and even cancer. These conditions contribute to the death of many Mississippians each year and, at a minimum, decrease our quality of life.

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

Obesity is hurting Mississippi's economy. An obese person generates 40 percent more in medical costs per year than a non-obese person. In 2008, Mississippi spent \$925 million in healthcare costs directly related to obesity. If the trend continues, obesity related healthcare costs will be \$3.9 billion by 2018. Obese adults miss work more often than other workers, impacting productivity. As a result, obesity hurts Mississippi's business competitiveness and ability to attract new industry.

Obesity is harming Mississippi's children. Mississippi has the highest rate of childhood obesity in the nation. Nearly half of Mississippi children are overweight or obese, and children as young as eight years old are being treated for Type II diabetes and high cholesterol. This was unheard of just a decade ago. The idea that children will be sick and die younger than their parents is not acceptable.

While the obesity rate for Mississippi's children has stabilized, the same cannot be said of adults. A recent study shows that by 2030, 67 percent of Mississippi's adults are projected to be obese. Overweight and obesity are prevalent among all races, all adult age groups and both genders in Mississippi. Although data is not available to determine the number of overweight children living in Mississippi, national data suggests that overweight in children is pervasive and has nearly doubled in the last 30 years.

Overweight and obesity increase the risk of developing coronary heart disease, hypertension, high cholesterol, Type 2 diabetes, and stroke. The relationship between increasing BMI above 25 has been shown to be especially strong for hypertension and Type 2 diabetes (Coakley, Must, Spadano, 1999). Obesity is clearly an independent risk factor for coronary heart disease. For persons with a BMI of 30 or more, mortality from cardiovascular disease is increased by 50-100 percent. Weight loss in overweight and obese adults has been shown to reduce blood pressure levels, improve cholesterol levels, and lower blood glucose levels in those with Type 2 diabetes.

Dietary factors contribute substantially to the burden of cardiovascular disease (CVD) in the nation and in Mississippi. Food and nutrient consumption patterns affect multiple CVD risk factors including high cholesterol, hypertension, diabetes, and obesity. Excessive calorie intake coupled with physical inactivity leads to obesity. Excessive total fat, saturated fat, and cholesterol intake can raise blood cholesterol levels, and a high sodium intake can aggravate hypertension in susceptible persons. Finally, inadequate consumption of fresh fruits, vegetables, and whole grains reduces intake of fiber, potassium and numerous vitamins and minerals associated with reduced risk of heart disease.

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

HEART DISEASE AND STROKE IN MISSISSIPPI

Mississippi has the highest death rate from cardiovascular disease (CVD) in the country and heart disease is the No. 1 killer in Mississippi. In 2014, 7,539 people in Mississippi died of heart disease. Unfortunately, CVD kills more Mississippians than all forms of cancer combined.

Stroke is the No. 5 killer in Mississippi. In Mississippi, 1,587 people died of stroke in 2014.

Heart Disease and Stroke Risk Factors in Mississippi

In Mississippi	In America
22.5% Adults are current smokers	21.1%
37.4% Adults participate in 150+ min of aerobic physical activity per week	51.6%
70.7% Adults who are overweight or obese (up from the last CHNA)	63.5%
5.4% Adults who have been told that they have had a heart attack	4.4%
4.0% Adults who have been told that they have had a stroke	2.9%
4.6% Adults who have been told that they have angina or coronary heart disease	4.1%
69.3% Population of adults (18-64) who have some kind of healthcare coverage	78.9%
15.4% High school students who are obese	13.1%

Disability and death from CVD are related to a number of modifiable risk factors, including high blood pressure, high cholesterol, smoking, lack of regular physical activity, diabetes, and being overweight. While it affects persons of all ages in Mississippi, CVD is the leading cause of death for persons age 75 and over.

Seventy-three percent of the population ages 60 to 79 have CVD compared to 40 percent of the population ages 40 to 59 (Older Americans & Cardiovascular Diseases, 2016).

The No. 5 killer in Mississippi is stroke, another disease greatly impacted by lifestyle. Hypertension, obesity, smoking and lack of exercise are typically associated with the health status of the stroke victim. Unfortunately, these lifestyle habits are prevalent in the rural south.

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

There are nine areas of lifestyle and disease related problems that are significant factors in the higher levels of heart disease and stroke in Mississippi. They are:

- | | |
|------------------------|----------------------|
| Physical Inactivity | Obesity |
| Improper Nutrition | Abnormal Cholesterol |
| Tobacco Use | Diabetes |
| Socio-cultural Factors | Acute Event |
| Hypertension | |

LIFESTYLE AND DISEASE

Modified lifestyle diseases are illnesses that can potentially be prevented by changes in diet, environment, physical activity and other lifestyle factors. These diseases include heart disease, stroke, obesity, diabetes and some types of cancer.

In Forrest and Lamar County, the three major diseases that result in the most deaths are lifestyle diseases. They are heart disease, cancer and stroke.

This is why the CHNA Committee has chosen to address educational and lifestyle initiatives to assist in lowering the incidence of these diseases. The initiatives are outlined later in the report under the implementation plan.



CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

RURAL HEALTH DISPARITIES

Although the term *disparities* is often interpreted to mean racial or ethnic disparities, many dimensions of disparity exist in the United States, particularly in health. If a health outcome is seen to a greater or lesser extent between populations, there is disparity. Race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location all contribute to an individual's ability to achieve good health. It is important to recognize the impact that social determinants have on health outcomes of specific populations. Healthy People 2020, a federal project of the Office of Disease Prevention and Health Promotion, strives to improve the health of all groups.

Healthy People 2020 defines a *health disparity* as “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Over the years, efforts to eliminate disparities and achieve health equity have focused primarily on diseases or illnesses and on healthcare services. However, the absence of disease does not automatically equate to good health.

Powerful, complex relationships exist between health and biology, genetics, and individual behavior, and between health and health services, socioeconomic status, the physical environment, discrimination, racism, literacy levels, and legislative policies. These factors, which influence an individual's or population's health, are known as *determinants of health*.

For all Americans, other influences on health include the availability of and access to:

- High-quality education
- Nutritious food
- Decent and safe housing
- Affordable, reliable public transportation
- Culturally sensitive healthcare providers
- Health insurance
- Clean water and non-polluted air

CHARACTERISTICS OF THE HEALTH OF THE SOUTHERN RURAL COMMUNITY

According to an article published in December 2014, by *Business Insider* (Friedman, L., 2014), for the third year in a row, America's Health Rankings, an annual accounting of Americans' health, has found that Mississippi is the least healthy state in the U.S.

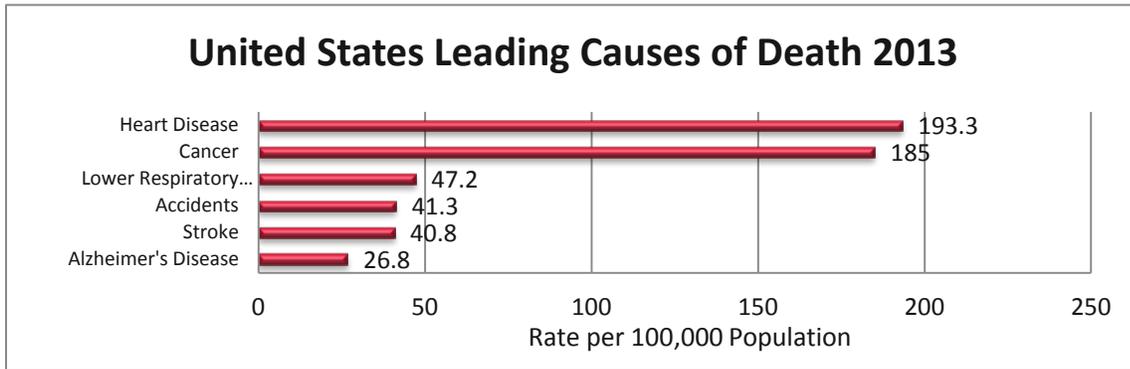
Since the rankings began in 1990, Mississippi – which has high rates of obesity and diabetes, low availability of primary care, and high incidence of infectious disease – has always ranked among the bottom three. Hawaii – which has low rates of obesity, smoking, cancer deaths, and preventable hospitalizations – has always been among the top six.

The rankings are funded by the United Health Foundation and are based on data from the Centers for Disease Control and Prevention, the American Medical Association, the Census Bureau, and other sources. They take into account 27 distinct measures including rates of smoking, obesity, drug deaths, education, violent crime, pollution, childhood poverty, infectious disease, and infant mortality.

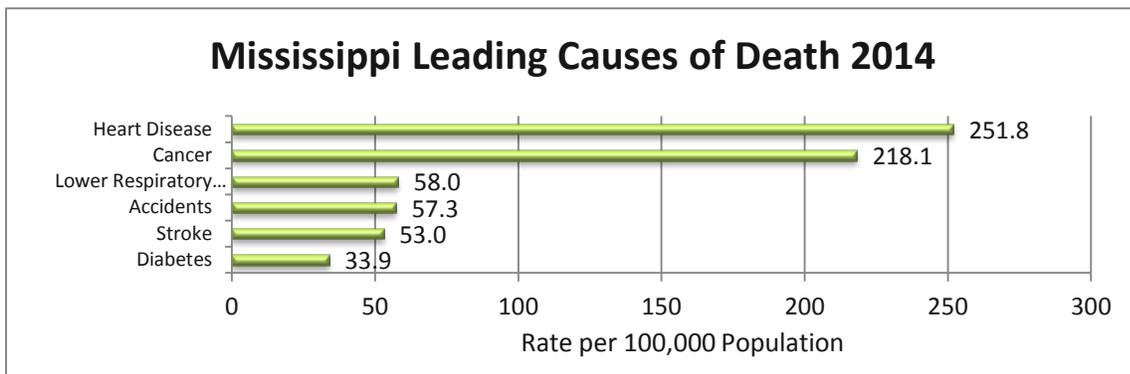
Overall, the rankings showed progress in some areas and not in others. The 2014 analysis found increases from the previous year in obesity and physical inactivity and decreases in infant mortality and smoking rates.

In the past 25 years, there have been some notable changes. Since 1990, there have been major reductions in infant mortality (down 41%), death from heart disease (down 38%), and premature death (down 20%). In 1990, 29.5% of Americans smoked; in 2014, 19% smoked, though smoking remains "the leading cause of preventable death in the country," a press release noted. Unfortunately, in that same time period, rates of diabetes and obesity have more than doubled.

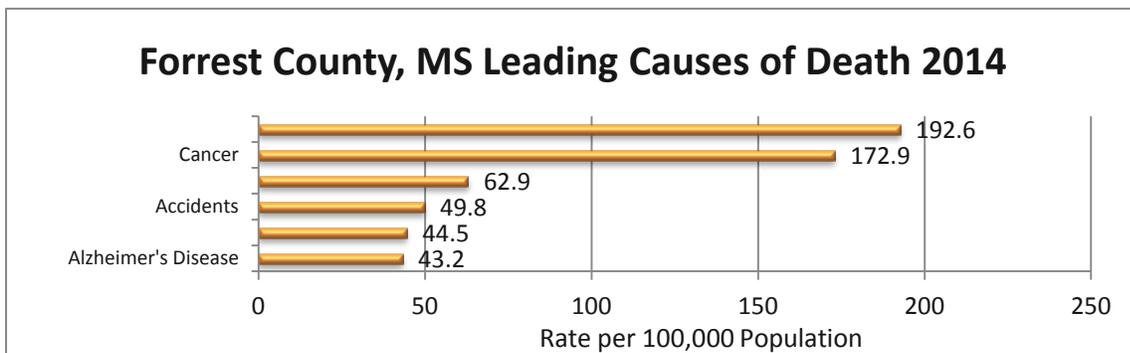
There has also been an 8% decline in cancer mortality since its peak in 1996. Cancer is the second leading cause of death in the U.S. (heart disease is number one), and 2014 saw an estimated 1.6 million new diagnoses.



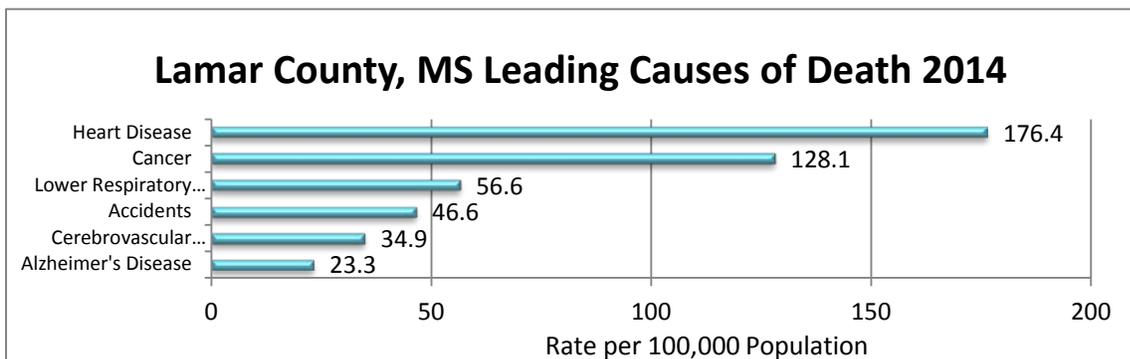
(Heron, M., 2016)



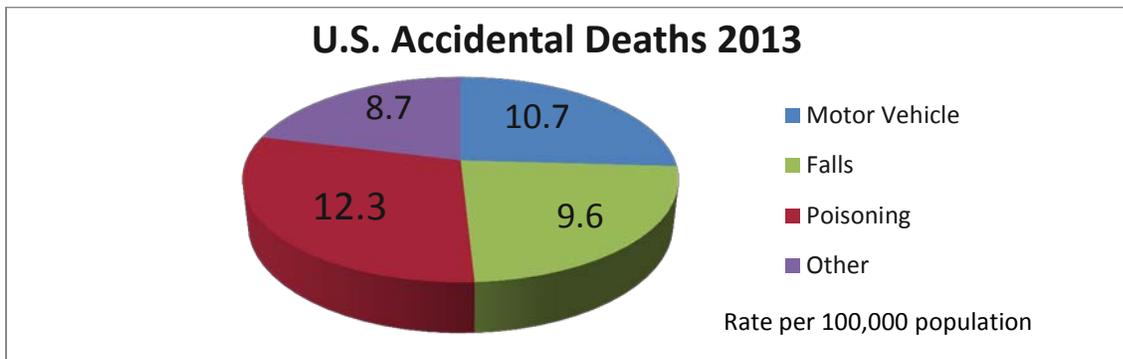
(Generated Statistical Table -MSTAHRs, Mississippi, Cause of Death, 2016)



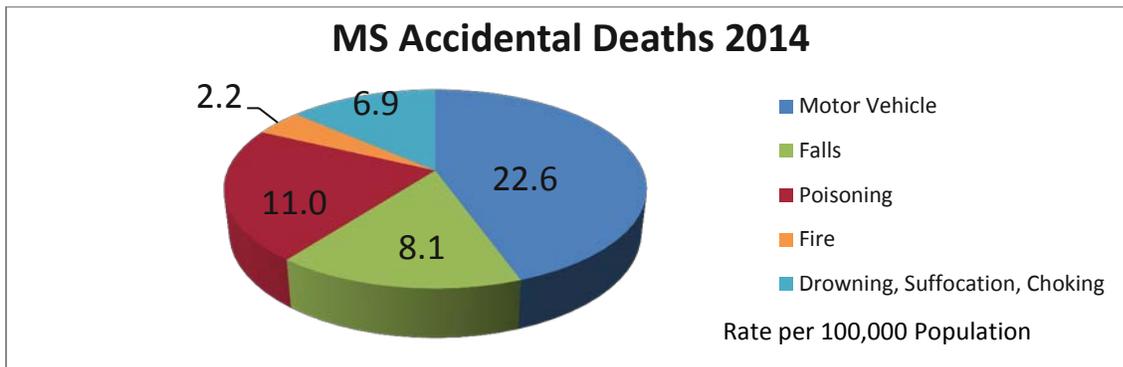
(Generated Statistical Table -MSTAHRs, Forrest, Cause of Death, 2016)



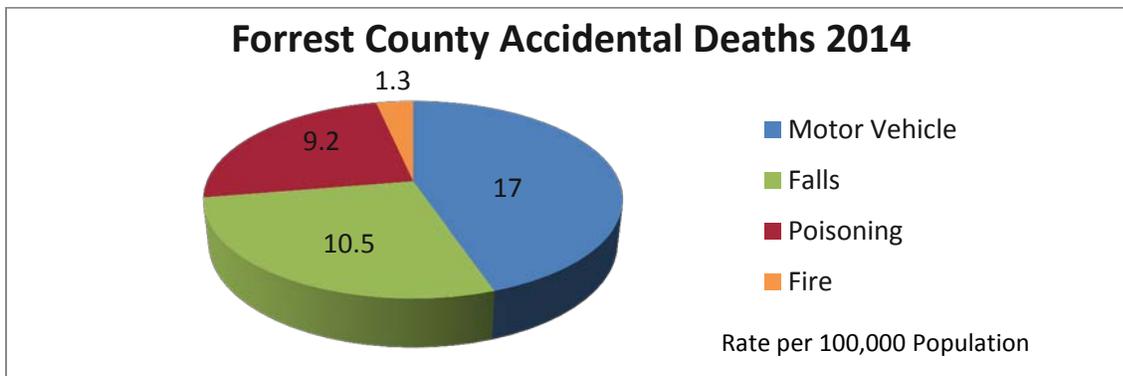
(Generated Statistical Table -MSTAHRs, Lamar, Cause of Death, 2016)



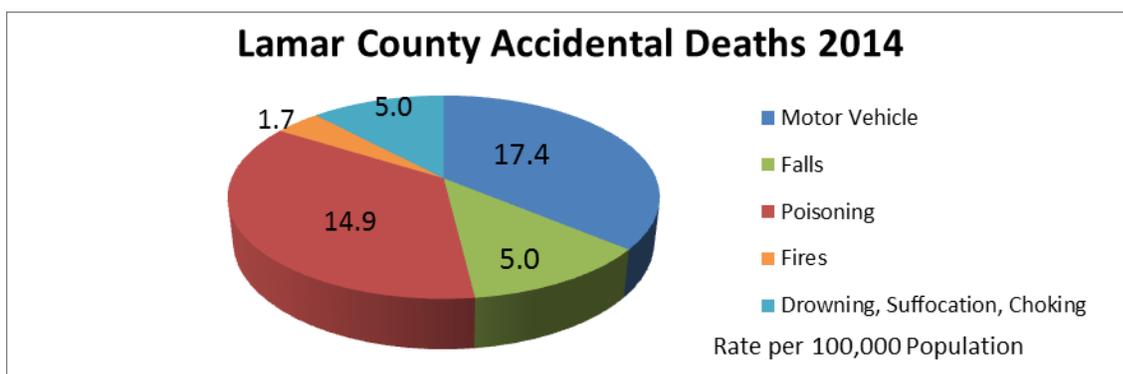
(Heron, M., 2016)



(Generated Statistical Table -MSTAHRs, Mississippi, Unintentional Injury, 2016)



(Generated Statistical Table -MSTAHRs, Forrest, Unintentional Injury, 2016)



(Generated Statistical Table -MSTAHRs, Lamar, Unintentional Injury, 2016)

CHNA STRATEGIC ACTION RESPONSES

STRATEGIC ACTION RESPONSES

Access, affordable care, a lack of knowledge about healthy lifestyles and the relationship to chronic diseases, plus a lack of awareness of available health and wellness services contribute to a wide range of healthcare needs among rural communities in Mississippi.

At the conclusion of the 2013 Community Health Needs Assessment conducted by Forrest General Hospital, the CHNA Steering Committee identified critical areas of health needs for the people in our service areas. The group's vision was to improve population health in the area by addressing gaps that prevent access to quality, integrated healthcare and improving access to resources that support a healthy lifestyle.

In support of the 2013 Community Health Needs Assessment, and ongoing community benefit initiatives, Forrest General Hospital implemented the following strategies to positively impact and measure community health improvement.



CHNA STRATEGIC ACTION RESPONSES

RESPONSE 1: HEALTHFUL LIVING THROUGH BETTER NUTRITION

Forrest General Hospital is participating in four significant programs which address the nutritional needs of the underserved in the primary service area.

These programs are:

MOTHER'S MILK BANK, BREAST MILK COLLECTION CENTER



Forrest General donates nursing staff time and administrative support to host a Breast Milk Collection Center. Milk from lactating women is donated to benefit premature infants and other infants needing natural breast milk versus infant formula. This is an ongoing process coordinated by Forrest General.

Target Population
Breast Feeding Women

Goal/Desired Outcomes

Donation of milk from lactating women to benefit premature infants and other infants needing natural breast milk versus infant formula

Process/Time Frame/Location

On-going collection process at Forrest General Hospital and shipped to a central processing center in Austin, Texas

Measure of Success

Volume of milk donated - the hospital has donated 10, 601 ounces of milk to the Mother's Milk Bank of Mississippi.

Collaborative Partner

Since the Mother's Milk Bank of Mississippi is open, we no longer partner with the Mother's Milk Bank in Austin, Texas.

CHNA STRATEGIC ACTION RESPONSES

MEALS FOR NICU MOTHERS

Forrest General provides breakfast and dinner at no charge to mothers who are staying with their babies in the Neonatal Intensive Care Unit (NICU). This service began June 21, 2016, as a convenience for mothers. To date, the Forrest General Food and Nutrition Department has provided 1,152 meals.

Target Population

Mothers with babies in the NICU

Goal/Desired Outcomes

Donation of nutritious meals to women staying in the NICU with their babies to make the process of being in the NICU an easier one

Process/Time Frame/Location

On-going process at Forrest General Hospital and delivered to the mothers by Food and Nutrition

Measure of Success

Number of meals provided

Collaborative Partner

The Food and Nutrition Department prepares and delivers the meals so there is no collaborative partner.

CHNA STRATEGIC ACTION RESPONSES

EXTRA TABLE PROGRAM

Forrest General is an active participant in this healthful nutrition based program which provides soup kitchens and food pantries with fresh fruits, lean protein, whole grains, and low fructose corn syrup products. The program is available to the segments of the population who use the soup kitchens, food banks and pantries as their main source of nutrition. Forrest General sponsors a yearly fundraiser to provide extra monetary assistance to this program.

Target Population

General public utilizing soup kitchens, food banks, and food pantries

Goal/Desired Outcomes

Reducing obesity by providing healthy food items in the fight against hunger



Process/Time Frame/Location

Forrest General hosts a yearly fundraiser benefitting Extra Table around the holidays, when the public traditionally donates the most. In the past, the hospital has put on staged productions with funds from the ticket sales going to Extra Table. In 2015, the hospital hosted an art contest for students in the Pine Belt. The children decorate Christmas cards, and patrons receive cards with their donations. The hospital also matches donations during this time.

Measure of Success

Meeting or exceeding the amount of donations from the year before

Collaborative Partners

Extra Table Organization (non-profit) and partnering agencies

CHNA STRATEGIC ACTION RESPONSES

CHRISTIAN SERVICE FOOD PANTRY

This is a program that is, in concept, very similar to the Extra Table. Nutritional based meals are provided free to the population in need of food and nutrition. The food products are donated food items from food services organizations. They are carefully collected and reused to serve others. Forrest General is pleased to partner with Christian Services, a non-profit community organization. Since August 2015, Forrest General's Food and Nutrition Department has donated 300 cans of food to Christian Services.

Target Population

General Public utilizing food programs provided by Christian Services

Goal/Desired Outcomes

Utilize food that would normally be disposed of due to over production

Process/Time Frame/Location

On-going program

Measure of Success

Food is utilized by the program versus thrown away

Collaborative Partners

Christian Services (non-profit) and partnering agencies

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 2:

HEALTHFUL EATING PROGRAM AT FORREST GENERAL

Forrest General Hospital feels that incorporating health initiatives into our cafeteria and campus offers healthy options to patients, workers, visitors and guests. In principle, healthy food improvements are associated with higher patient and employee satisfaction. Healthy cafeterias draw in new and repeat customers from the community's surrounding area.

Implementing heart healthy hospital initiatives into our hospital's food service setting is critical to ensuring our staff, patients, and surrounding community has the opportunity to learn and practice healthy eating while making an imprint on their long-term eating habits.

To accomplish this goal, we implemented several nutritional strategies:



Nutritional Displays

Display nutritional information on food items served and displayed in retail areas of the hospital.
Implement: March 1, 2014

Healthy Vending Options

Work with vending contractors to offer nutritional options through our vending machines.
Implement: April 1, 2014

Notes

1. After working with Vendworks, all vending machines were upgraded. Completion date February 2016.
2. The upgraded vending machines offer the following: LED lighting, cashless option, healthy graphics, nutritional information available, ADA Compliant, and larger variety of snacks.
3. Director of F&N was able to work with Vendworks to choose the snacks to include in vending machine. We now have baked/healthier chips, 100 Calorie Pack snacks, pretzels, trail mix, granola and Nutri Grain bars.
4. Refrigeration unit now contains salads, fresh fruit and healthier sandwich options.

Healthy Beverage Options

Establish nutritional beverage options for both retail and patient care area. Implement: July 1, 2014

CHNA STRATEGIC ACTION RESPONSES

Notes

1. In the Food Court area, sugar free beverages are placed at eye level.
2. Protein drinks like Core Power and Yup are available for purchase.
3. A variety of Minute Maid juices are available.
4. Milk in cartons is available every day for each meal.
5. Different types of bottled water are available (Smart Water, Dasani, flavored waters, and Aquafina).

Additional Information of new items options in FGH Food Court

1. Items on the salad bar have been upgraded. Now offering a rotation of the following items: homemade chicken and tuna salad, blackened chicken, lean turkey and ham, different blends of green salad mixtures, artichoke hearts, hummus, low fat salad dressings (Greek and Raspberry Vinaigrette), miniature baby corn, pickled okra and dried cranberries.
2. Fruit is on salad bar throughout the day.
3. Individual containers of hummus and pretzels are packaged together and yogurt is available for purchase.
4. There is a baked entrée option each day.
5. Assorted baked chips are available for purchase.

Target Population

Hospital staff, patients, and general public

Goals/Desired Outcomes

Consumers at Forrest General will have healthier choices in food and beverage, plus educational opportunities at these “point of sale” locations.

Measure of Success

Completion of implementation of the three actions, on-going monitoring for customer acceptance, continued utilization of nutritional information.

Collaborative Partners

- Clinical Dietitian Team
- Menu/Recipe Nutritional Analysis Software Company
- Selected vendors

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 3:

DARE TO CARE – PERIPHERAL VASCULAR SCREENING PROGRAM

Dare to Care is a comprehensive cardiovascular disease early detection and education program offered to men and women age 60 and over, or age 50 and over who have risk factors such as smoking, diabetes, high blood pressure, or high cholesterol. This program promotes awareness of cardiovascular and peripheral vascular disease. Online registration was recently added to this event for participant convenience and easier access to the program.

Target Population

Population age 60 and over, or age 50 and over with risk factors as identified above

Goal/Desired Outcomes

To educate and promote awareness of cardiovascular and peripheral vascular disease and to provide an avenue for early detection

Process/Time Frame/Location

This program is a two-day event that provides a lecture by a physician on the first day at 6:00 p.m. Prior to participants leaving at the end of the lecture, they can sign up for the free vascular screening the next day held at the Forrest General Hospital Ultrasound Vascular Lab from 1:00 to 5:00 p.m. or when all participants have been screened.

This event is scheduled six times per year, usually every other month except during November and December. Registration is made by calling Forrest General OnCall at 1-800-844-4445. The Dare to Care Program poster is available on our website and is distributed to physician offices.

- 2013 – 6 Dare to Care Educational and Screening sessions
 - 302 participants were screened
 - 154 abnormalities detected, or 50% of participants screened
- 2014 – 4 Dare to Care Educational and Screening sessions
 - 183 participants were screened
 - 59 abnormalities detected, or 32%
- 2015 – 4 Dare to Care Educational and Screening sessions
 - 142 participants were screened
 - 43 abnormalities detected, or 30%

CHNA STRATEGIC ACTION RESPONSES

Measure of Success

Measures include the level of attendance and the detection of peripheral vascular diseases such as Carotid Stenosis, Aortic Aneurysms, high blood pressure, and abnormal arterial leg pressures indicative of peripheral vascular disease. All participants' primary care providers as well as the participants receive a copy of their Peripheral Vascular Screening report. Participants review their screening findings with a healthcare provider after their screening and are advised to follow-up with their healthcare provider if screening results indicate abnormalities. Most abnormalities are indications of Carotid Artery stenosis, abnormal leg artery pressures that are indicative of peripheral artery disease, and several Aortic Aneurysms.

Cost/Funding/Human Resource

Other Resources – there is minimal cost associated with this program – Forrest General provides light dinner for participants during lecture.

Collaborative Partners

- Heart and Vascular Physicians – Hattiesburg Clinic
- Other physician specialties such as Endocrinology and Neurology

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 4: CANCER SUPPORT SERVICES

Forrest General supports and facilitates a myriad of services designed to make living with cancer easier. These community services not only educate, but they provide resources that cancer patients and families might not otherwise have accessible. Additionally, the hospital provides educational opportunities through Forrest Health OnCall, a weekly television segment focusing on different topics each week. Every quarter, at least one patient testimonial or information on new cancer treatment is featured. Forrest General has also made health information more accessible through the website by adding a user friendly health information library.

Target Populations:

General Public, physicians & physician offices, cancer patients

Goal/Desired Outcomes:

To make available educational resources and support to all those in need

Process/Time Frame/Location:

Support Groups – see below

“Look Good, Feel Better” Program - ACS

The American Cancer Society's "Look Good...Feel Better" program is a community-based, free, national service. It teaches female cancer patients beauty tips to look better and feel good about how they look during chemotherapy and radiation treatments. A free complimentary kit is given at the group session.

Go to the American Cancer Society website for more information. For information about local classes contact the American Cancer Society's hot line at 1-800-227-2345 which is available 24/7.

Breast Cancer Support Group

Forrest General's Breast Cancer Support Group offers support to women who have experienced breast cancer. Both the newly diagnosed and those who have lived with breast cancer for years may benefit from the hope generated from shared thoughts, feelings and experiences. ACS is a co-sponsor of the group.

CHNA STRATEGIC ACTION RESPONSES

The group meets the third Monday bi-monthly (January, March, May, July, September, and November) at 6:00 p.m. in the Cancer Center Lobby. For information, call Forrest General OnCall at 1-800-844-4445, then press 1, from 2:00 to 10:00 p.m., seven days a week. For dates, go to www.forrestgeneral.com then click on Calendar, select Support Groups, then click Find Event.

Cancer Survivors Network - ACS

People with cancer and their loved ones do not have to face their cancer experience alone. They can connect with others who have “been there.”

The online community is a welcoming and safe place that was created by and for cancer survivors and their families.

What Next - ACS

Another free online support network developed in part by ACS that helps cancer patients, survivors, and caregivers gain firsthand insight into living with cancer and connects with others facing a similar diagnosis.

Cancer Hope Network

The network provides free and confidential one-on-one support to adult cancer patients and their families. That support is provided by matching people diagnosed with trained volunteers who have undergone and recovered from a similar experience. Call 1-877-467-3638.

Cancer Hope Network Caregiver Support

The network offers free, one-on-one confidential support to those who are caring for a cancer patient. Call 1-877-467-3638.

CanSurmount

CanSurmount, a general cancer support group for cancer patients and their families, deals with the overwhelming burden the disease places on patients and their families. In addition to emotional support, CanSurmount provides informational resources designed to help patients better understand the nature of the disease and treatment methods. Forrest General and ACS are co-sponsors of the group.

The group meets the first Tuesday of January, March, August, and October at 7:00 p.m. in the Cancer Center Lobby. The group fellowships with the Prostate Cancer Support group in May and November. For information, call Forrest General OnCall at 1-800-844-4445, then press 1, from 3:00 to 8:00 p.m., Monday through Friday, or call 601-288-1041. For dates, go to www.forrestgeneral.com then click on Calendar, select Support Groups, then click Find Event.

CHNA STRATEGIC ACTION RESPONSES

Pine Belt Prostate Cancer Support Group - Teri Lynn Warden

The support group helps men cope with prostate cancer by providing community-based education and support to prostate cancer patients, survivors, and their family members. Telephone support is provided by certain members by request.

Meets the third Tuesday of every month except May and December in the lobby of the Cancer Center. For information, call Forrest General OnCall at 1-800-844-4445, then press 1, from 3:00 to 8:00 p.m., Monday through Friday, or call 601-271-7120. For dates, go to www.forrestgeneral.com then click on Calendar, select Support Groups, then click Find Event.

Go to the American Cancer Society website for more information on prostate cancer.

Reach to Recovery - ACS

The American Cancer Society's Reach to Recovery program helps people of both sexes cope with the breast cancer experience. Talking with a specially-trained Reach to Recovery volunteer can give a measure of comfort and an opportunity for emotional grounding and informed decision-making. Volunteers are breast cancer survivors who give patients and family members an opportunity to express feelings, talk about fears and concerns, and ask questions of someone who is knowledgeable and level-headed. Most importantly, Reach to Recovery volunteers offer understanding, support, and hope because they themselves have survived breast cancer and gone on to live normal, productive lives. Request for the service can be done by physicians, social workers, the patient or a family member or friend. At Forrest General, requests for the service are made through the social workers.

Go to the American Cancer Society website for more information on Reach to Recovery, or call 1-800-227-2345.

Camp Bluebird

This event is scheduled every year in the month of April at the Paul B. Johnson State Park just south of Hattiesburg on Highway 49. This is a two-day weekend camping out event where special events are held for cancer survivors and their families. All are welcome.

Special events include crafts, spiritual homilies from all Christian denominations, dancing, music, fishing, or just relaxing in the beautiful state park atmosphere on the lake front.

Forrest General Hospital provides the majority of the funding as well as donations in food, drinks, and supplies from other community sponsors and businesses.

CHNA STRATEGIC ACTION RESPONSES

Staff from Forrest General Hospital, Hattiesburg Clinic, and other community volunteers work as camp counselors, facilitate events, and prepare meals for all participants.

- 2013 – 50 Campers, 102 total with workers and counselors
- 2014 – 53 Campers, 107 total with workers and counselors
- 2015 – 53 Campers, 103 total with workers and counselors

Annual Cancer Picnic

This event is held in the month of October on the Cancer Center grounds. The Forrest General Healthcare Foundation provides the funding for food, rental equipment, and supplies.

- 2013 – 350 patients and families attended
- 2014 – 375 patients and families attended
- 2015 – 500 patients and families attended

ACS Cancer Resource Center

Provide patients with wigs, scarves, hats, bras, cancer information, and resource connections. The center is made possible through a partnership between Forrest General and ACS.

- 2013 – 122 served, 87 newly diagnosed served
- 2014 – 136 served, 91 newly diagnosed served
- 2015 – 96 served, 61 newly diagnosed served

Of those served (patients, survivors, family members, health professionals) over 60% were newly diagnosed patients.

Other Support Groups in Forrest General's coverage area

- **Temple Baptist Church Cancer Support Group**
The group meets the 1st Wednesday of each month, 6:00 p.m. at Temple Baptist Church.
Call 601-818-3506 for more information.
- **Marion General Hospital's Cancer Support Group**
The group meets the 2nd Thursday of each month, 1:00 p.m. at the Chapel of the Cross in Columbia. Call Emma at 601-736-3614 for more information.

CHNA STRATEGIC ACTION RESPONSES

- **Jones County Cancer Support Group for Women ACS**
Support for women cancer patients or survivors of any kind of cancer. This group meets the first Monday (second Monday if it is a holiday) monthly 5:00 to 6:00 p.m. at Lee's Coffee & Tea, downtown Laurel. Call 1-800-227-2345 for more information.
- **Jones County Prostate Cancer Support Group ACS**
The group meets the 1st Wednesday of the month at 7:30 a.m. at Lee's Coffee & Tea, downtown Laurel. Call 1-800-227-2345 for more information.
- **Cessation Support**
Mississippi Tobacco Quit line at 1-800-784-8669.

Collaborative Partners

- American Cancer Society
- Hattiesburg Clinic Medical Oncology
- Louisiana State University Cancer Program Affiliation
- Forrest General Healthcare Foundation

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 5:

SPIRIT GIRLS AND SWEETEAS

Forrest General sponsors two programs to benefit young women in the community. Both programs are offered through Spirit of Women and provide health information to help these young ladies make positive and health conscious decisions. Additionally, the programs encourage volunteerism and community involvement to strengthen the next generation of community leaders.

SPIRIT GIRLS

Spirit Girls, a program of Spirit of Women, is designed to reach young women through events targeted at promoting self-esteem, encouraging healthy lifestyles and having lots of fun! This program offers an opportunity for young ladies to learn about good self-esteem, the importance of taking action for their health and giving back to the community. For more than 140 young ladies that make up the 2016-2017 Spirit Girls, which represent 23 schools from Forrest General's 19-county service area, the hours of community service contributed through various events provides a chance to make lasting contributions to their community, as well as lasting friendships.

Target Populations

Girls in grades 7-12 are eligible to participate in Spirit Girls. Participants must be a resident of Forrest General's 19-county service area, including these counties: Covington, Forrest, George, Greene, Hancock, Jasper, Jefferson Davis, Jones, Lamar, Lawrence, Marion, Pearl River, Perry, Pike, Simpson, Smith, Stone, Wayne, and Walthall. The Spirit Girls meet once a month on Sunday afternoons from 2:00 to 3:00 p.m. in Hattiesburg.

Goal/Desired Outcomes

Our goal is to reach today's young ladies so that they will mature into healthy young women. Spirit Girls are offered a wide range of activities to participate in and earn volunteer hours in order to not only serve their community, but also possibly cultivate a passion in an area they would not have been exposed to otherwise. The Spirit Girls program allows young ladies to give back to the community, participate in fun, popular events, and at the same time, along with their mothers, focus on education and important issues facing today's teenagers.

Process/Time Frame/Location

We strive to instill lifelong healthy habits at a young age. Spirit Girls attend monthly meetings where we discuss health topics that are related to teens at this point in their young lives, allowing them to learn healthy habits early on to become strong, healthy women. In addition to monthly meetings, our biggest emphasis is spreading this knowledge to our community through community service events.

CHNA STRATEGIC ACTION RESPONSES

We encourage Spirit Girls to spread the information gained in our Spirit Girl programs to their communities, schools, churches, family members, and other teens, whether it is heart health and exercise, drinking and driving, bullying, and other major issues that teens face today. The special events and volunteering opportunities help them spread the word to our community with their positive examples. Spirit Girls are offered a wide range of activities to earn volunteer hours in order to not only serve their community, but also possibly cultivate a passion in an area they would not have been exposed to otherwise. In addition to volunteering and participating in community events, Spirit Girls are given the opportunity to choose the venue in which they volunteer; many choose art activities, health activities, or even working with special needs children/adults. Many of our Spirit Girls determine their future route based on volunteer work they've enjoyed, whether it is health, art, animals, or special needs related. Many of our seniors also often develop senior projects based on topics they have learned about through our Spirit Girl program. They give Spirit Girls credit for emphasizing these important issues and encouraging them to become strong, healthy, successful women.

Measure of Success

Number of Spirit Girls participating; number of community service hours contributed

- 146 Spirit Girls in the 2015-2016 year provided 3495 volunteer hours.
- At this point for the 2016-2017 year, 143 Spirit Girls have served 1750 hours.

Collaborative Partners

The following organizations are a few of the partners who receive volunteer hours from the Spirit Girls:

- American Cancer Society
- American Diabetes Association
- American Heart Association
- Association of the Rights of Citizens with Disabilities
- Covington County Chamber of Commerce
- DREAM
- Drive to Inspire
- Edward's Street Fellowship Center
- Festival South
- Forrest General Events – Forrest General Cancer Center picnic, Mardi Gras, etc.
- Forrest General Hospital Foundation
- Hattiesburg Clinic Events – Rise & Shine Race, Law Enforcement Appreciation Grill Out, etc.
- Hubfest
- March of Dimes
- Miss Leaf River Valley pageant

CHNA STRATEGIC ACTION RESPONSES

- Mississippi's Miss Hospitality Pageant
- Operation Christmas Child
- Purposeful Refuge
- Seth Harris Childhood Cancer Foundation
- Southern Miss Athletics
- Special Olympics
- State Veterans Home in Collins
- The Children's Center for Communication & Development
- The Hattiesburg Zoo
- United Way

SWEETEAS

Sweeteas, a program of Spirit of Women, is designed to reach young girls through events targeted at promoting relationship building, social skills and healthy lifestyles all while having fun with their Mom/female guardian. The program offers opportunities for these young girls to spend special time with their moms or other female chaperones while learning about the essence of a true Southern Girl – charm, character and charisma, and the art of touching the world with Southern Grace. Sweeteas is also designed to help young ladies learn how to take action for their health at an early age, including activities and expert advice. Sweeteas are also participants in community events, instilling pride in their communities and teaching them they can make a difference even at a young age. For the 104 young girls that make up the 2016-2017 class of Sweeteas, the bi-monthly meetings and community activities provide a chance to not only enjoy fun activities and learn about their health, but also build a strong bond with their Mom/female chaperone.

Target Populations

Girls in Pre-K through 6th grade are eligible to participate in Sweeteas. The girls, along with their Mom/female chaperone, meet bi-monthly on Sunday afternoons from 3:30 to 4:30 p.m. in Hattiesburg.

Goal/Desired Outcomes

Our goal is to reach young girls early on so that they will mature into healthy young ladies. The Sweeteas program allows young girls to participate in fun activities and community events with their Mom/female chaperone while simultaneously developing important social skills and healthy lifestyles.

CHNA STRATEGIC ACTION RESPONSES

Process/Time Frame/Location

We strive to instill lifelong healthy habits at a young age. Sweeteas attend bi-monthly meetings where we have mother/daughter activities that focus on promoting relationship building, social skills, and healthy lifestyles allowing them to learn positive habits early on to become strong, healthy young ladies. In addition to bi-monthly meetings, our biggest emphasis is spreading this knowledge to our community. We encourage Sweeteas and Moms/female chaperones to spread the information gained in our Sweeteas program to their communities, schools, churches, family members, and other young girls whether it is heart health and exercise, table manners, social graces, or other topics relevant to young girls today. We strive for Sweeteas to be a positive example to our community.

Measure of Success

Number of Sweeteas participating

- 94 Sweeteas in 2015-2016 year
- 104 Sweeteas in current 2016-2017 year

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 6: CARDIOVASCULAR DAY OF DANCE

EVALUATION AND INITIATIVES:

PREPARING FOR THE 10TH YEAR OF DAY OF DANCE FOR YOUR HEALTH EVALUATION

There were successful Day of Dance events in 2013 and 2014. After the 2014 event, Day of Dance was discontinued to find new ways to educate the public on heart disease and stroke risk factor modification. The following were the initiatives the hospital implemented to meet this need:

Goal/Desired Outcomes of All Initiatives

To provide events and resources for consumer education on preventing and managing cardiovascular risk factors for heart disease and stroke. These programs are:

Forrest Health Website

With the update of the Forrest Health website, a wellness link, forresthealth.spirithealth.com, was added for fresh, fun, and timely health information. Created in conjunction with Spirit of Women®, this website was developed with our community in mind and is easily accessible on smartphones and tablets. The website features include:

- Online health assessments for patients to complete and discuss with their provider at their next appointment
- Wellness tips for teens
- Recommended screenings for men
- Advice on staying healthy throughout the decades of a woman's life
- Informative health articles

The health and wellness website also includes fun articles and recipes, which are updated regularly.

Target Population

For all of the community, including hospital employees and associates

Process/Time Frame/Location

On-going via FH Website

Measure of Success

Number of hits on the website

Collaborative Partners

Spirit of Women

CHNA STRATEGIC ACTION RESPONSES

FORREST GENERAL WELLNESS EMPLOYEE BMI REDUCTION PROGRAM AND DIABETES MANAGEMENT PROGRAM

Forrest General Hospital's benefit plan has designed a program to assist in managing obesity. This Employee benefit is designed for those who want accountability and are committed to weight loss. Many studies have shown a correlation between reducing the BMI to include other health benefits such as:

- Lower blood pressure
- Lower total cholesterol
- Improved joint health
- Improved self- image

The Employee Diabetes Benefit Program is a life-style management program that provides the necessary tools for optimal diabetes management. Studies show that by following important recommendations the risk for diabetes-related complications can be reduced by as much as 76%.

FG Wellness uses the My Fitness Pal link as a resource on the intranet that employees can have access to for health resources ranging from exercise tracking to healthy recipes. If they click on the FG Wellness logo, it will bring this site up. We also include monthly wellness tips and healthy recipes in the employee newsletter, In-General.

Target Population

BMI Program: Qualifying hospital employees and their dependents (18 years and older) enrolled in the FGH Health Insurance Plan. Participants must have a BMI of 30 or greater to qualify.

Diabetes Program: Qualifying employees and dependents (18 years and older) who have a diagnosis of Type 1 or Type 2 Diabetes and are covered under the FGH Health Insurance Plan.

Process/Time Frame/Location

We have an open enrollment period, but the program is on-going through the year. We reevaluate compliancy at the end of each "benefits" year.

Measure of Success

- Reduction in BMI
- Reduction in A1Cs

CHNA STRATEGIC ACTION RESPONSES

Collaborative Partners

Employee Health Services for the sign-up and accountability of each employee for both DM and BMI programs

FORREST GENERAL HOSPITAL'S SPIRIT OF WOMEN SPONSORED COMMUNITY EVENTS

We encourage our community and employees to get moving by sponsoring/ participating in the following events:

- The Children's Center Classic
- Hattiesburg Clinic's Rise & Shine Race
- DNA 7 Heart and Sole 5k Run & Walk (Kids Hub & Mississippi Nurses Association)
- Rotary Club Bike-a-thon
- Thames Elementary 5K
- ARC Hobble then Gobble
- Doctor's Dash
- American Cancer Society Relay for Life
- Aids Coalition
- Cystic Fibrosis Foundation
- Longleaf Elementary
- Pine Ribbon Fund
- Thames Elementary
- The ARC of Southeast Mississippi
- Voo-Doo 5K
- American Heart Association
- March of Dimes

Additionally, we featured our cardiologists at the following events:

- Diva Series – Dr. Ben Rester
- Football 101 – Dr. Robert Wilkins
- Girls' Day Out – 2015 & 2016 – Dr. Christopher Douglas

Target Population

For all of the community

Process/Time Frame/Location

Walks/runs/events are scheduled throughout the year – On-going

CHNA STRATEGIC ACTION RESPONSES

Measure of Success

- ROI
- Written Evaluations
- Verbal/Written Feedback

Collaborative Partners

- SOW Reward Partners
- Hattiesburg Clinic
- Gift Shop Vendors
- FGH Foundation

MOMMIE AND ME EXERCISE PROGRAM

The hospital encourages families to be active together from the very beginning. Mommie and Me offers exercise classes from pregnancy through toddler years. The classes are an excellent way for women to keep moving and stay healthy through pregnancy, involve their babies and toddlers in exercise and active play, and bond with other mothers and women in the community.

Target Population

Expectant and new mothers

Process/Time Frame/Location

Exercise classes are offered on a quarterly basis throughout the year – ongoing project

Measure of Success

- ROI
- Written Evaluations
- Verbal/Written Feedback

Collaborative Partners

- Madilyn Daniell
- 28th Place (Hattiesburg Clinic)

CHNA STRATEGIC ACTION RESPONSES

RESPONSE 7:

BEHAVIORAL HEALTHCARE AND ADDICTION TREATMENT AWARENESS INITIATIVES

Pine Grove Behavioral Health & Addiction Services is one of the nation's most comprehensive treatment campuses and provides mental health and addiction assessments for prospective patients that may need psychiatric care and addiction treatment. Pine Grove treats children, adolescents, and adults. Pine Grove's world renowned programs treat gender specific chemical addiction including a specialized track for co-occurring eating disorders. Additionally, Pine Grove offers a substance abuse healing program for adults age 55 and over. Other Pine Grove specialty programs include a dedicated professional's treatment curriculum and a comprehensive evaluation center. Pine Grove also features a program for patients with sexual addiction. Inpatient Services including an Adult Psychiatric Unit, along with a Child and Adolescent Psychiatric Unit, and Outpatient Services are other components. Pine Grove was established in 1984 and has provided nationally and internationally recognized healthcare for over 30 years.

Pine Grove provides educational materials about behavioral healthcare and addiction issues at a variety of professional conferences throughout the community.

For local elementary, middle, and high schools, Pine Grove provides door prizes, event sponsorships and speakers from the organization about mental healthcare and addiction related topics at the request of our local schools.

Speakers from Pine Grove also participate in educational events to help community groups that are interested in behavioral healthcare and addiction education.

For local health fairs and conferences, Pine Grove provides sponsorships, educational materials such as brochures about behavioral healthcare and addiction topics and attends as an exhibitor to offer information about available services for attendees.

Additionally, Pine Grove hosts an annual Care Walk that coincides with Mental Health Awareness month to educate the community about behavioral healthcare and addiction issues. Community members are invited to Pine Grove for this awareness event.

Pine Grove provides behavioral healthcare and addiction assessments 24 hours a day, seven days a week.

CHNA STRATEGIC ACTION RESPONSES

Pine Grove also provides continuing education lectures for licensed professionals working in the behavioral healthcare and addiction treatment fields.

To help people in the community that are recovering from addiction, Pine Grove also serves as a host location for area 12 Step meetings.

Pine Grove's Target Population

Teachers, school administrators, counselors, students, parents, civic organizations, licensed healthcare professionals, and the recovery community are some of the groups Pine Grove frequently works with.

Goals/Desired Outcomes

- To provide support for any and all involved in the public and private school systems who need our help, including, but not limited to: educational professionals, students, and their family members
- To provide education to the community about the signs and symptoms of behavioral healthcare issues and addiction disorders and to let them know how to get help
- To provide resources for anyone who may be suffering from a behavioral healthcare and addiction issue, and to help family and friends who need assistance with someone who may be suffering from a behavioral healthcare or addiction issue
- To provide continuing education events for licensed professionals working in the behavioral healthcare and addiction treatment fields

Process/Time Frame/Location

- We visit with and respond to requests for speakers by all school district officials.
- We respond to invitations from health and wellness fair organizers to provide behavioral healthcare and addiction treatment education.
- Pine Grove's professional staff assesses prospective patients who present themselves at the organization's main campus, requesting an assessment.
- A Pine Grove professional coordinates and sends invitations to licensed behavioral healthcare and addiction treatment professionals within the community for the purpose of providing continuing education lectures throughout the calendar year.

CHNA STRATEGIC ACTION RESPONSES

Measures of Success

- Feedback from educational professionals, students, and parents.
- Feedback from licensed behavioral healthcare professionals within the community.
- Feedback from the local recovery community.
- Feedback from educational and wellness conference coordinators.

Collaborative Partners

A variety of local mental healthcare and addiction treatment professionals along with allied healthcare organizations, and the recovery community throughout the region we serve.

RESPONDING TO THE COMMUNITY

CLOSING THE GAP

The information gathered from the community was very uniform and was also consistent with the quantitative data. The most common needs mentioned by the community members were related to chronic diseases, health education, lifestyle improvement and access to emergency care.

Hypertension, heart disease, diabetes, weight loss/obesity and nutrition were all health needs identified by both the community members and healthcare professionals. Community members saw a need for increased education and preventive care in order to eliminate the path to chronic disease.

Prevention is very cost effective compared to the catastrophic treatment needed when a chronic disease is unmanaged and leads to major health problems. Education related to nutrition was emphasized because of the link between obesity and so many chronic health conditions. Other community health needs that were expressed included a need for increased health literacy, and decreased health disparities among socioeconomic and racial groups.

PRIORITIZATION

The steering committee understood the facts the primary and secondary data communicated in reference to the health of the citizens of primarily Forrest County and secondarily Lamar County:

- The county is below the state and U.S. in rate of deaths from heart disease.
- The county is below the state and U.S. in rate of deaths from cancer.
- The county exceeds the state and U.S. in rate of deaths from lower respiratory disease.
- The county exceeds U.S. in rate of deaths from accidents but not the state.

RESPONDING TO THE COMMUNITY

The steering committee used the following process to prioritize the identified needs that the hospital would use when creating strategies to help close the gap:

- All the findings and data were read and analyzed for needs and recurring themes within the identified needs.
- Reference was made to the content of the community input and the identified needs from those sources.
- Comparisons were made between the primary and secondary data and then compared to what was the common knowledge and experience of the clinical staff of the hospital.
- Based on what resources could be made available and what initiatives could have the most immediate and significant impact, the strategic initiatives were developed.

Implementation strategies that will address three major health issues were developed. The strategies will seek to leverage valuable partnerships that currently exist and to identify opportunities for synergy within the community. The outcomes and results of these interventions will be followed and reexamined in preparation for the next CHNA.

IMPLEMENTATION PLANS

To be successful in creating a true sense of health in our community, it will be necessary to have collaborative partnerships which will bring together all of the care providers, the citizens, governments, plus business and industry, around an effective plan. Many needs have been identified through this process. Forrest General Hospital is proud to have been the catalyst in this effort. However, addressing some of the needs identified will require expertise and financial resources far beyond what a critical access hospital can provide.

The hospital is aware of many lifestyle issues that face citizens of a rural southern state. Many of the lifestyle habits negatively impact the overall health of our community and are major contributors to several of the leading causes of death in our county. Forrest General Hospital has identified three significant initiatives it will undertake over the next three years. These collaborative projects should help improve the health and overall quality of life in our community. Each project is described in another section of this report.

There are other health and wellness opportunities identified during the research portion of the CHNA. These possibilities will be considered as we develop our strategic action plans over the next three years.

HEALTH AND WELLNESS INITIATIVES

Over the next three years, Forrest General Hospital, in concert with its many community partners will focus its energy in these four areas:

INITIATIVE 1:

PREVENTING INJURY THROUGH COMMUNITY EDUCATION

Forrest General feels that working with local partners to incorporate injury prevention initiatives into the community will have a significant impact on lessening the morbidity and mortality of trauma.

As the area's Level II Trauma Center, Forrest General treats the majority of traumas suffered in the immediate community and surrounding outlying towns. Forrest General's Trauma Center uses its trauma registry to identify the pattern, frequency, and risks for injury within the community; prevention efforts are based on identification of specific injuries and risk factors as supported by the trauma registry data.

Forrest General has selected three common mechanisms of injury on which to focus based on the data trends found in the trauma registry. These mechanisms are:

MOTOR VEHICLE CRASH (MVC)

Forrest General utilizes a variety of marketing channels including the hospital's social media, blog, employee newsletter, and television segments to promote motor vehicle safety and proper use of seatbelts. Forrest General also provides education regarding seatbelt safety and the importance of proper restraint when operating a motor vehicle during the Annual Trauma Symposium. Forrest General attends a minimum total of five community events yearly; at least one of these events will provide motor vehicle safety education focused primarily on avoiding dangerous distractions and seatbelt safety.

According to Forrest General trauma registry data, there were 719 traumas resulting from motor vehicle crashes in fiscal year 2016. Roughly 70 percent of these traumatic injuries effected people 16-50 years of age, and 28.41 percent of the total number of traumas occurred when people were unrestrained.

Target Population

16 - 50 years of age; Males and Females

Goal/Desired Outcomes

To decrease the total volume of patients injured in motor vehicle crashes and increase the number of patients with proper seatbelt use

HEALTH AND WELLNESS INITIATIVES

Process/Time Frame

On-going process

Measure of Success

Data trends, evaluated regularly to identify increase or decrease in injury; community feedback; and attendance rates at community events

Collaborative Partners

Any local organization offering public health information fairs. In the past, Trauma Services has participated in events hosted by Camp Shelby, the City of Hattiesburg, YMCA, Mississippi State Medical Association Alliance, and local schools.

HEALTH AND WELLNESS INITIATIVES

FALL-RELATED INJURY

Forrest General attends a minimum total of five community events yearly and will provide fall prevention information to participants at one or more of those events. Participants are encouraged to keep their eyes healthy and vision clear by having yearly eye exams and keeping prescription lenses clean; be mindful of medications that may cause dizziness; and to avoid dangers in the home by wearing non-skid footwear, installing grab-bars, de-cluttering the home, and avoiding inadequate lighting.

According to Forrest General trauma registry data, there were 608 traumas resulting from falls in fiscal year 2016. Roughly 83 percent of these traumatic injuries affected people 50-89 years of age.

Target Population

50-89 years of age; Males and Females

Goal/Desired Outcomes

To decrease the number of patients who suffer injury from falls

Process/Time Frame

On-going process

Measure of Success

Data trends, evaluated regularly to identify increase or decrease in injury; community feedback; and attendance rates at community events

Collaborative Partners

Collaborative partners may include any local organization offering public health information fairs or informational opportunities targeting elderly adults and their caregivers. In the past, Trauma Services has participated in events hosted by the City of Hattiesburg, YMCA, Mississippi State Medical Association Alliance, and the Mississippi Nurses' Association among others.

HEALTH AND WELLNESS INITIATIVES

ALL-TERRAIN VEHICLE (ATV) CRASH

Forrest General utilizes a variety of marketing channels including the hospital's social media, blog, employee newsletter, and television segments to provide community health education regarding ATV safety and proper use of helmets. Following the television segment, safety information is distributed to social media, and can also be issued out in the form of a news release. Forrest General also attends a minimum total of five community events yearly and will provide ATV safety education to participants at one or more of those events. Professionals encourage the community to wear helmets at all times when riding ATVs.

According to Forrest General trauma registry data, there were 72 traumas resulting from all-terrain vehicle crashes in fiscal year 2016. Roughly 75 percent of these traumatic injuries effected people 10-49 years of age. Of the total number, 78 percent of these patients were male, and 58 percent were not wearing helmets when the crash occurred.

Target Population

10 - 49 years of age; Males

Goal/Desired Outcomes

To decrease the number of patients who suffer injury from ATV crash, to increase helmet usage throughout the community, and to promote the proper use of helmets while riding all-terrain vehicles

Process/Time Frame

On-going process

Measure of Success

Data trends, evaluated regularly to identify increase or decrease in injury; community feedback; and attendance rates at community events

Collaborative Partners

Collaborative partners may include any local organization offering public health information fairs or safety information targeting males. In the past, Trauma Services has participated in events hosted by Camp Shelby, YMCA, and local schools. Future partners could include summer camps or other safety courses for children.

HEALTH AND WELLNESS INITIATIVES

INITIATIVE 2:

SUICIDE AWARENESS AND EDUCATION FOR ADOLESCENTS AND YOUNG ADULTS

Pine Grove Behavioral Health & Addiction Services, an extension of Forrest General Hospital, is one of the nation's most comprehensive treatment campuses. Pine Grove treats children, adolescents, and adults. Pine Grove's world renowned programs treat gender specific chemical addiction including a specialized track for co-occurring eating disorders. Additionally, Pine Grove offers a substance abuse healing program for adults age 55 and over. Other Pine Grove specialty programs include a dedicated professional's treatment curriculum and a comprehensive evaluation center. Pine Grove also features a program for patients with sexual addiction. Inpatient Services including an Adult Psychiatric Unit, along with a Child and Adolescent Psychiatric Unit, and Outpatient Services are other components. Pine Grove was established in 1984 and has provided nationally and internationally recognized healthcare for over 30 years.

Pine Grove understands how vital it is for family members, friends and educators to recognize the warning signs of suicide in young people and act quickly and appropriately. Taking an active role in the community in terms of identifying the characteristics of suicidal young people, understanding the risks, and how to offer help are initiatives Pine Grove cares about deeply.

Target Population

Children, adolescents, young adults, teachers, school administrators, counselors, students, parents, civic organizations, licensed healthcare professionals, and the university community

Goals/Desired Outcomes

Pine Grove is implementing several strategies to accomplish the goal of providing needed suicide awareness education in the community. The outcome is to inform the community's young people, parents, educators, and other stakeholders about the warning signs and risk factors pertaining to suicide, in addition to providing resources for help.

Process/Time Frame/Location

- A Suicide Awareness and Response Team includes professionals from Pine Grove, who specialize in the treatment of adolescents and young adults. Additionally, this team works with regional school districts to assist educators in understanding the issue of suicide in young people.
- Pine Grove will provide education in the community, through public and school presentations, about the signs and symptoms of suicide in young people.
- To provide support for any and all involved in the public and private school systems that need Pine Grove's help, including, but not limited to: educational professionals, students, and their family members regarding the issue of suicide in young people.

HEALTH AND WELLNESS INITIATIVES

- Professionals with Pine Grove will provide materials including specially prepared brochures to young people, educators, parents, and other concerned individuals with information about suicide awareness, and resources to contact for additional help.
- Pine Grove will establish on their website, www.pinegrovetreatment.com, a dedicated webpage that includes resources about suicide and young people to help the community with information about this topic, and available treatment services.
- A Pine Grove professional coordinates and sends invitations to school counselors and licensed behavioral healthcare and treatment professionals in the community for the purpose of providing continuing education lectures on the topic of suicide and young people.

Measures of Success

- Attendance figures at community-wide and professional presentations.
- Feedback from educational professionals, school counselors, and students regarding the information provided
- Feedback from community stakeholders will be used as a measurement tool regarding Pine Grove's presentations on suicide awareness and education.
- Pine Grove will measure the number of visitors to our webpage about suicide awareness and education.

Cost/Funding/Human Resources – Other Resources

Costs are internal and vary according to the event. Resources used include Pine Grove's professional staff members, who use their time to coordinate each effort, along with any collateral materials that are used.

Collaborative Partners

Collaborative partners for this initiative include Forrest General Hospital, the Spirit Girls program, students and educational professionals, university leaders, licensed behavioral healthcare professionals, and other community stakeholders

HEALTH AND WELLNESS INITIATIVES

INITIATIVE 3: COMMUNITY NUTRITION AND LIFESTYLE

In reviewing feedback from a focus group and online survey, Forrest General noticed a high demand for information on meal prepping, nutrition, exercise and weight loss by means other than surgery. As the healthy living evangelist in the community, the hospital would like to educate the community about living a healthy lifestyle through events, lunch and learns and other communications that provide fun, easily implemented information. The hospital is passionate about encouraging proper nutrition from the very beginning of life. In 2015, Forrest General became the first and only Baby-Friendly designated hospital in Mississippi. That means we provide mothers with the education they need on the importance of breastfeeding and coach them through the first hours with their newborn to teach them how to breastfeed. Additionally, Forrest General donates nursing staff time and administrative support to host a Breast Milk Collection Center. Milk from lactating women is donated to benefit premature infants and other infants needing natural breast milk versus infant formula. This is an ongoing process coordinated by Forrest General.

Target Population

Forrest General employees, weight loss surgery seminar attendees, diabetes community, Lamar County Schools, people already participating in programs such as Clean Kitchen, which is a meal prepping and lifestyle change program at Versus, Spirit of Women members, members of established local exercise groups, individuals and families using the food pantry at Edwards Street Mission and the Southeast Mississippi Rural Health Initiative (SEMRHI).

Goal/Desired Outcomes

To provide education on exercise and nutrition to a racially and economically diverse community and to teach the same audiences how to implement this information with the resources available to them

Process/Time Frame

On-going process

Measure of Success

Attendance at scheduled events and feedback from the community. May also measure through social media click-throughs and views on the Spirit of Women wellness site.

Collaborative Partners

Hattiesburg Clinic Endocrinology, Diabetes Center, Hattiesburg Clinic Diabetes Education Program, public school dietitians, Versus, Spirit of Women, established local exercise groups, Edwards Street Mission, SEMRHI, Extra Table, and Christian Services

HEALTH AND WELLNESS INITIATIVES

INITIATIVE 4: SCREENINGS AND EDUCATION WITH COMMUNITY PARTNERSHIPS

Forrest General understands the importance of addressing the many requests and comments that came from web-based research about the need for more community screenings and health education. The hospital plans to take an active role in public's wellbeing by bringing these preventative measures into the communities most in need.

Target Population

Individuals already involved with the Edwards Street Mission and SEMRHI

Goal/Desired Outcomes

To make preventative screenings and education accessible to vulnerable members of the community

Process/Time Frame/Location

On-going process that will make use of previously established community events such as Hubfest, Mobile Street Renaissance Festival, etc.

Measure of Success

Success will be based on the number of screenings provided.

Collaborative Partners

Hattiesburg Clinic, Edwards Street Mission, Christian Services, and SEMRHI

THANK YOU

This comprehensive assessment will allow us to better understand the needs and concerns of our community. Forrest General Hospital is proud to be part of the Forrest Health System where we truly believe we are “our brother’s keeper.” As always, through this commitment to compassionate and mission-focused healthcare, we are honored to work closely with our collaborative partners in our community to provide outstanding healthcare and create a healthier world for the residents of Forrest County, Lamar County, and other surrounding areas.

Thanks to each of you who provided valuable insight into this report. Your participation in the data gathering, discussions and decision making process helped make this a true community effort which will better serve all segments of our population.

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