



Community Memorial Hospital One-Year Update to Community Service Plan

Prepared for the New York State Department of Health
September 2012

1. Mission Statement

Community Memorial Hospital's mission statement remains the same which is to ensure that the highest quality of healthcare is delivered through coordination of available resources for the purpose of improving the health of the communities served.

2. Hospital Service Area

There have been no changes to the primary service area stated in the Community Service Plan of 2009. Community Memorial continues to serve 45,000 people in 27 Central New York Communities.

3. Participants and hospital role

An intensive strategic planning process was completed in 2011 where it was decided that Community Memorial Hospital would remain a community hospital and that we would need to affiliate with a larger organization. Following a request for proposal and interview process, Crouse Hospital was selected and agreed upon an affiliation. The details of the agreement have been worked out over the past year with an expected implementation within the next month. We have worked closely with Crouse Hospital for many years and look for this new phase of our relationship.

We continue to work with **Bassett** in many endeavors. The Bassett physicians continue to provide outpatient care including Gynecology, ENT, plastic surgery and primary care.

Faxton-St. Luke's also continues to be a strong partner. We supported the efforts of Faxton-St. Luke's to open a satellite facility for dialysis in our area and their search for the appropriate site for their dialysis unit. They opened their dialysis unit in Hamilton on April 12, 2012. Community Memorial Hospital's laboratory continues to be staffed and managed by Centrex, which is operated by Faxton-St. Luke's.

Hamilton Bassett Crouse Network supported the "Health Literacy Action Kits for Providers". These "Kits" will provide healthcare providers with information and materials to assist them with

providing care for patients with low literacy. The survey was completed and a tool kit is being developed for the providers

Community Memorial Hospital is also working with local schools and Madison County Mental Health to improve access to Mental Health services in our area. The plan is to implement mental health programs in the local schools to improve access to our pediatric population.

Emergency Preparedness is another activity that is a combined project. Community Memorial continues to work with Madison County Health Department, New York State Department of Health, Colgate University, and Morrisville State College as well as the local community to ensure the highest level of preparedness possible.

4. Identification of Public Health Priorities

Community Memorial Hospital continues to focus on the public health priorities that we have identified which include:

1. Strengthening Primary Care continues to be a priority with the goal of increasing access to primary care in our communities. We have been unable to recruit a physician for Morrisville Family Health Center. We did recruit a mid-level provider for Morrisville Family who started practicing in February 2012. The healthcare industry continues to face many challenges. Recruitment is one of the largest challenges. Because of this it was decided to consolidate Cazenovia Family Health Center and Morrisville Family Health Center, closing the Cazenovia site. This was accomplished on September 1, 2012.
2. Developing a Hospitalist program continues with the goal of recruiting two full-time Hospitalists for seven-day coverage. We have been successful in the recruitment of two full-time Hospitalists. We now plan to implement an ED/Hospitalist combined program that will allow Community Memorial Hospital to have a physician in-house 24 hours a day.

3. Increasing the utilization of our General Surgery services continues. One of the surgeons has relocated. Community Memorial Hospital now employs one full time surgeon and we are working with Crouse Hospital for further coverage.
4. Providing high-quality non-invasive Cardiology services to our communities continues with one full time Cardiologist.
5. Provide access to quality Neurology services in our service areas in a timely fashion starting with one Neurologist
6. Provide access to quality Pediatrics for our service area.
7. Provide access to Urology services for our community service area.
8. Renovation and expansion of patient care areas and outpatient services.

Evaluation of public health priorities is a continuous process. Among other resources, we utilized two reports when evaluating our public health priorities. One of the reports was the Madison County Mobilizing for Action Through Planning and Partnerships (MAPPS) committee's "Health Improvement Planning Report for Madison County". The MAPPS committee developed a vision for a healthy Madison County, performed assessments, and developed priority public health areas. The public health priorities that were chosen included: 1) access to health care, 2) Health Literacy, 3) community economic development and public policy.

The other survey that was utilized was another project that the Hamilton Bassett Crouse Network supported. This was the Upstate Health & Wellness Survey completed by Bassett Healthcare Network, Research Institute in cooperation with the Chenango, Delaware, Herkimer, Madison, Montgomery, Otsego, and Schoharie County Health Departments. This survey consisted of five separate surveys that included the following topics: 1) household health, 2) access to health care, 3) child lifestyle and behavior choices, 4) adult lifestyle and behavior choices, and 5) health and health needs of the rural elderly. No new surveys have taken place.

After review of our public health priorities our organizational activities and the information provided in these reports, it was decided to add three additional public health priorities. These additions include chronic disease, community preparedness and health literacy last year.

Following discussion with our county mental health department, the local school districts and community leaders we have also identified access to mental health an additional priority.

5. Update on the Plan of Action

We continue to actively recruiting for Primary Care Physicians without success. Our goal was to recruit for primary care with a goal to add a provider to Morrisville Family Health Center first with additions to the other health centers according to the identified need. Physician shortage and a high demand for Family Practice physicians continue to be barriers in this endeavor. Because of this and the financial challenges of healthcare the decision was made to consolidate resources by moving the providers from Cazenovia Family Health Center to Morrisville Family Health Center and close the Cazenovia site. This was done on September 1, 2012.

We were successful in our goal to recruit two full-time Hospitalists replacing the contracted providers that we were utilizing. One provider started in January, 2011 with the other starting in May, 2011. We now plan to implement an ED/Hospitalist combined program that will allow Community Memorial Hospital to have a physician in-house 24 hours a day. This program is expected to be implemented by the end of 2012.

We continue to develop the Hamilton Heart Center and our non-invasive cardiology service. Dr. Raymond Carlson started his practice in Hamilton in September, 2010. He has been well received and provides quality non-invasive cardiology services for our patients.

Dr. Eufrosina Young continues to provide high-quality Neurologic Services. We continue to perform Nerve Conductions, EMGs, and EEGs, and have added Evoked Potentials to the testing we offer.

6. Dissemination of the Report to the Public

This update of the Community Service Plan will be placed on our website. This is in addition to the reports of the last two years Community Service Plans which are already on our website. Our website address is www.communitymemorial.org.

7. Changes (Actual or Potential) Impacting Community Health, Provision of Charity Care and Access to Services

Community Memorial Hospital completed an intensive strategic planning process in 2010-2011. A planning committee was formed consisting of members of the Board of Directors and members of the Medical Staff. Administration participated as support to the committee. A consultant firm was also hired to assist in the process. The areas that the strategic plan concentrated on included physician shortage, need to update infrastructure and the need to improve Information Technology. Input was obtained and interviews were performed with medical staff, employees, community leaders, CEOs of local healthcare facilities and partners, and political leaders. Decisions reached by the committee included: 1) The need to stay a community hospital and 2) The need to develop a closer affiliation with one of our partners. A request for proposal (RFP) was developed and sent to six potential partners. Two strong proposals were received, one from Bassett Healthcare and one from Crouse Hospital. The Planning Committee recommended and the Board of Directors chose to affiliate with Crouse Hospital. The affiliation agreement with Crouse Hospital is expected to be signed by the end of September.

8. Financial Aid Program

The changes in our policy in the way patients are informed of the financial aid program offered would be considered the hospital's biggest success. Our biggest challenge is our inability to get patients that would qualify for the program to request and/or complete an application.

The changes made to the policy have greatly increased the number of applications and significantly increased the amount of assistance granted to our patients in the past three years.

The provision in our policy which allows for assistance with deductibles and co-pays is an accomplishment that meets the needs of our service area.

Due to the success in the increase of applications and the amount of assistance granted, the current policy will remain in effect.