

# 2024 - 2026

## Community Health Improvement Plan of Box Butte General Hospital

*live, learn, work, and play.*



*For a Healthier Panhandle*

## **PREPARED BY**

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## **IN COLLABORATION WITH**

Rural Nebraska Healthcare Network  
Scotts Bluff County Health Department  
Box Butte General Hospital  
Chadron Community Hospital  
Gordon Memorial Hospital  
Kimball Health Services  
Morrill County Community Hospital  
Perkins County Health Services  
Regional West Garden County  
Regional West Medical Center  
Sidney Regional Medical Center  
Panhandle Partnership  
Nebraska Department of Health and Human Services

## **FOR MORE INFORMATION**

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## **INTRODUCTION**

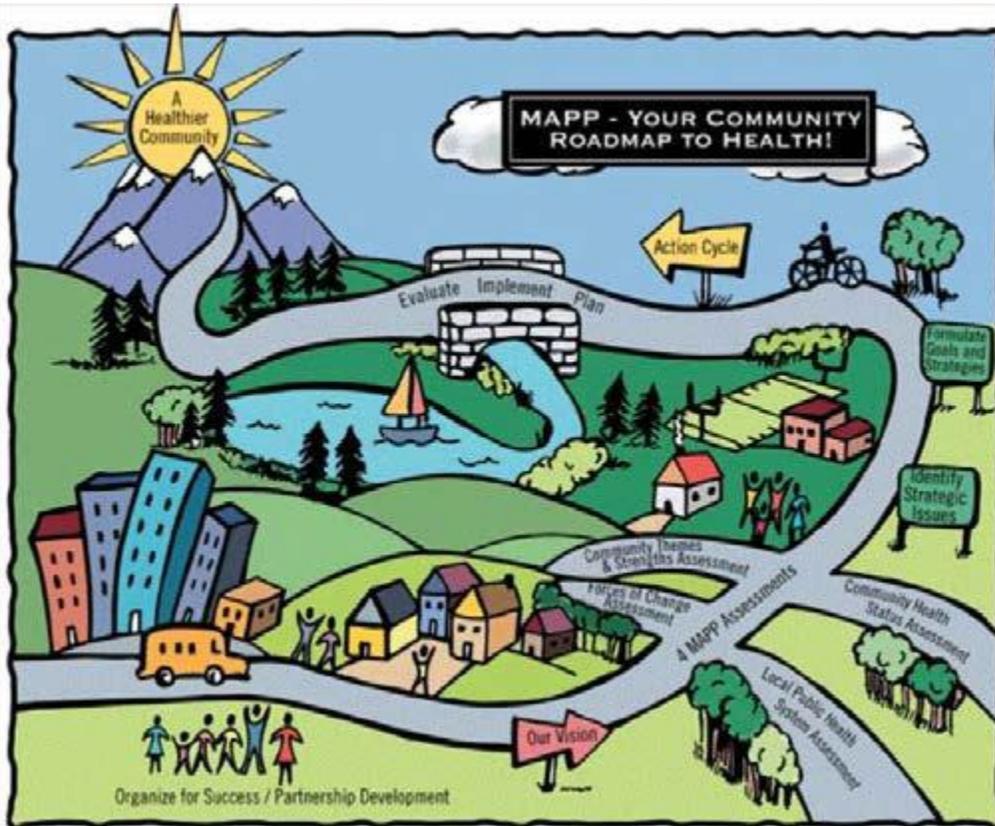
The COVID-19 pandemic limited the regional capacity to attend to the priorities identified in the last cycle. Over the past year and a half, we have been able to grow our capacity and our team witnessed active hope in our partners that is alive and well despite all that has been going on. This cycle (2024-2026) presents an opportunity to make even more movement toward our collective goals. Regional priorities for the Panhandle Public Health District service area (12 counties of the Nebraska Panhandle) were determined prior to the priorities for each hospital service area in the district. Every hospital is aligned with the regional goal to improve access to behavioral and mental health. There are pieces of the other regional priorities that can be found in each hospital's plans for the coming years. The spirit of collaboration feels more present than ever.

## **THE VISION**

The vision for this cycle of Mobilizing for Action through Planning and Partnerships is: When we align our resources a safer and healthier Panhandle will be one where wellness and mental well-being are incentivized, there is access to safe and affordable housing, there is increased social connectedness, we have a sustainable workforce and there are development opportunities, the health system collaborations are optimized, there are robust systems to address behavioral health, our community is equitable, we advocate to address access to care, we have resources available, we have safe built environments, and we prevent Adverse Childhood Experiences (ACEs).

## THE PROCESS

Mobilizing for Action through Planning and Partnerships (MAPP), a partnership-based framework, has been used for the Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) development process in the Panhandle since 2011, and continued to be used for this round of the CHNA and CHIP. MAPP emphasizes the partnership with all sectors of the public health system to evaluate the health status of the region it serves, identify priority areas, and develop plans for implementation.



The MAPP model has six key phases:

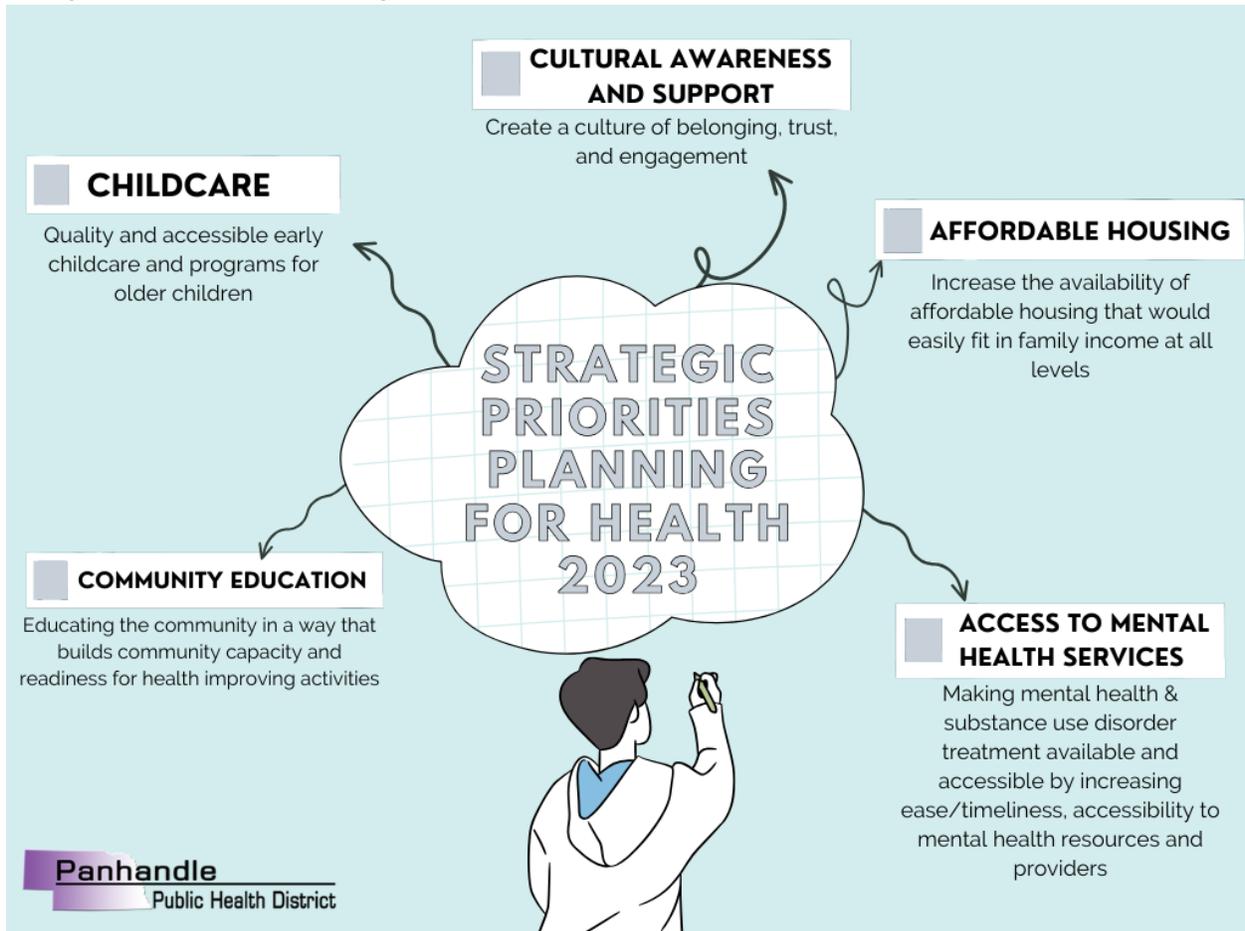
1. Organize for success/Partnership development
2. Visioning
3. Four MAPP assessments
  - a. Community Themes and Strengths Assessment (CTSA)
  - b. Local Public Health System Assessment
  - c. Forces of Change Assessment
  - d. Community Health Status Assessment
4. Identify strategic issues
5. Formulate goals and strategies
6. Take action (plan, implement, and evaluate)

This document encompasses phases five and six. Phases one through four can be found in the Community Health Needs Assessment.

## GOALS

The first four phases of the MAPP model are summarized in the CHNA component of this report. For this cycle, the regional priorities were selected first and then the community hospital selected their priorities.

The goals selected for the region are:



Box Butte General Hospital chose the following priorities:

## 2024-2026 Box Butte General Hospital Community Health Improvement Plan Priority Areas



*Embedded throughout these strategies will be considerations for equity*

### ENGAGING THE COMMUNITY

A survey was created at the end of 2022 and distributed widely online through many email lists and hospital waiting rooms. A postcard with the link to the survey was also sent out to the most isolated communities in the Panhandle (rural counties without hospitals in them, neighborhoods where a high proportion of the residents are non-white, and rural communities that lack common areas for distribution of survey materials). 1100 participants filled out the survey. Community organizations were invited to participate in several meetings throughout 2023 to develop the vision and priorities for the cycle. Community organizations also participated in a survey to describe their gifts that can support community health improvement efforts. Between all of the meetings and surveys, 32 organizations participated.

### ABOUT THE PLAN

The Box Butte General Hospital Community Health Improvement Plan includes goals and objectives for three years and work plans that are intended to be periodically updated. The goals, strategies, and objectives are aligned with national initiatives such as Healthy People 2030 and the Panhandle Community Health Improvement Plan. The specific alignments are called out in the Goals and Objectives section. The objectives include quantifiable performance

measures based on data included in the CHNA or community feedback surveys conducted throughout the cycle.

Establishing the performance measures for the objectives is done on a three-year cycle. The hospitals operate on three-year CHIP/CHA cycles and data is often not made available until a year or two after it was collected.

Monitoring the CHIP will be done by the hospitals and by the communities of practice. The communities of practice are an evolution of the workgroups. They will be focused on specific strategies that several hospitals are working on concurrently. The purpose will be to help hospitals learn more about the nuances of a very specific policy or program implementation. Panhandle Public Health District (PPHD) will collect the data outlined in the CHIP to be presented to the MAPP steering committee and the communities of practice each year. In addition, the party responsible for each activity will present to the committee at least annually to report progress, successes, challenges and needs. The MAPP steering committee meets quarterly and the communities of practice will meet every six months.

The work plan includes activities that community partners have agreed to conduct in the first year of the cycle. The agreements are based on the mission and resources of the agency and are built on evidence-informed best practices. The activities included in the plan include a reference to the best practice and some indication of the agency's ability to support the activity and ongoing needs. The work plan will be reviewed annually to recommit to the activities each hospital and the regional collaboration will complete in that year. With the help of communities of practice and ongoing reviews of the work plans with shorter deadlines, we hope to have more efficient success. Panhandle Public Health District will be responsible for coordinating and scheduling the community of practice and steering committee meetings.

# **BOX BUTTE GENERAL HOSPITAL COMMUNITY HEALTH IMPROVEMENT PLAN GOALS AND OBJECTIVES**

## **STRATEGIC GOAL A: IMPROVE QUALITY OF AND ACCESS TO MENTAL HEALTH CARE IN THE COMMUNITY.**

### **Goal A1: Grow the capacity of staff to address mental health concerns in the hospital.**

**Strategy A1.1** Train staff in Mental Health First Aid.

***Objective A1.1.1***

25% of nursing staff in the clinic, PCU, ED, and special services trained in Mental Health First Aid each year

### **Goal A2: Grow community awareness of mental health resources.**

**Strategy A2.1** Make the resource list accurate and available on the website and share it widely in the community.

***Objective A2.1.1***

Increase in computer analytics

***Objective A2.1.2***

The resource list will be updated quarterly

***Objective A2.1.3***

Usage rate of mental health services offered increases

### **Goal A3: Reduce the stigma around Mental Health.**

**Strategy A3.1** Share mental health awareness information via Facebook and other media outlets

***Objective A3.1.1***

Quarterly mental health awareness information is shared on Facebook and other media outlets

## **STRATEGIC GOAL B: IMPROVE COMMUNITY EDUCATION ABOUT HEALTH AND RESOURCES.**

### **Goal B1: The hospital website is a go-to source of information in the community.**

**Strategy B1.1** The website will be updated to increase ease of use.

***Objective B1.1.1***

More traffic on the website

**Strategy B1.2** Host mini health fairs with reduced fee services.

***Objective B1.2.1***

More community members make use of preventive services

## **STRATEGIC GOAL C: IMPROVE ACCESS TO PREFERRED LANGUAGE**

### **Goal C1: Increase access to information in multiple languages**

**Strategy C1.1** Create a list of contractors who can do translation and interpretation to share in the community.

#### ***Objective C1.1.1***

Residents will be able to access services in their preferred language

**Strategy C1.2** Audit the hospital's interpretation process.

#### ***Objective C1.2.1***

Box Butte General Hospital will have a process for interpretation drafted.

**Strategy C1.3** Run a quality improvement process on the interpretation process.

#### ***Objective C1.3.1***

Box Butte General Hospital will work with staff members and will end up with a smooth interpretation process

**Strategy C1.4** Integrate information gathering about language needs with social work interactions.

#### ***Objective C1.4.1***

Patients will receive their services in their preferred language.

## **STRATEGIC GOAL D: PREVENT CHRONIC DISEASE**

### **Goal D1: Improve quality of preventative care offerings**

**Strategy D1.1** Audit the protocols used by staff for screening patients to determine where the gaps are in reminding patients of upcoming screenings

#### ***Objective D1.1.1***

Higher rates of screenings conducted

**Strategy D1.2** Explore how technology could be used to send automated reminders about upcoming screenings

#### ***Objective D1.2.1***

Higher rates of screenings conducted

### **Goal D2: Increase community awareness of current preventative care offerings**

**Strategy D2.1** Promote lifestyle medicine program.

#### ***Objective D2.1.1***

5% increase in lifestyle medicine visits by the end of each year

<b>Year 1 Workplan</b>				
<b>Approach</b>	<b>Activities</b>	<b>Responsible Parties</b>	<b>Goal #</b>	<b>Time Frame</b>
Grow Hospital Capacity	Train frontline staff in mental health first aid	BBGH leadership	A1.1	January 2024 - December 2024
	Audit the current interpretation process	BBGH leadership	C1.2	January 2024 - June 2024
	Run a quality improvement process on the interpretation process	BBGH leadership	C1.3	July 2024 - December 2024
	Integrate language needs information gathering into work with social worker	BBGH leadership	C1.4	January 2024 - June 2025
Improve Access to Care	Make the mental health resource list accurate and visible on the website	BBGH leadership	A2.1	January 2024 - December 2024
	Update the website to increase its accessibility and ease of use	BBGH leadership	B1.1	January 2024- December 2024
	Host mini health fairs with reduced price services	BBGH leadership	B1.2	January 2024 - December 2026
	Audit the protocols used by staff for screening patients	BBGH leadership	D1.1	June 2024 - June 2025

Community Outreach	Share mental health awareness month information and resources on facebook	BBGH leadership	A3.1	January 2024 - December 2026
	Create a list of contractors who can do translation and interpretation to share in the community	BBGH leadership	C1.1	January 2024 - December 2026
	Promote lifestyle medicine program	Dan Newhoff	D1.2	January 2024 - December 2026

## Sources for Evidence-Based Practices

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