## **Implementation Plan**

## Overview of process

After confirming the hospital's top four priorities with the community and gathering community ideas for action, Mee Memorial Hospital (MMH) developed an implementation plan based on the input. This plan outlines the set of actions that the hospital will take to respond to the identified community needs including: goals, objectives and process and outcome indicators with which the actions will be assessed. The hospital is committed to providing the best service to our community and responding to the health needs that are most important to them. As such, the Board of Directors closely considered the community's priorities in developing this CHNA Implementation plan. The following implementation plan is a three year plan depicting the overall work that Mee Memorial will conduct to address the priority areas. Yearly work plans will be developed to provide detailed actions.

CHNA Board Adopted Priority #1: Access to Primary Care					
Strategy # 1: Assure an adequate supply primary care physicians					
Resource Plan	Anticipated Impact	Evaluation	Planned Collaboration		
Resources committed to the success of the access to primary care strategy	How the success of the strategy will improve the health of the community	How will we determine if we have been successful	Community or internal partners		
Recruitment of new primary care physicians Implement telemedicine and virtual programs Retain providers by:  Maintaining a culture that assures MMH is supportive, accountable, collaborative, and accessible Provides the infrastructure and continue to implement lean culture to mitigate barriers that impact physician productivity and patient access Evaluate recruitment and compensation practices continuously to ensure MMH remains a competitive employer	Providers employed by MMH are engaged and fairly compensated, leading to improved recruitment and retention  Maintaining long-term provider/patient relationship will increase trust and facilitate addressing population health Reduce waiting times for patient appointments	<ul> <li>Number of net additional primary care providers</li> <li>% of patients who saw their PCP in the last year</li> <li>Wait times for new appointments (all payer classes)</li> <li>Provider satisfaction and provider productivity</li> </ul>	• Internal		

CHNA Board Adopted Priority #2: Access to Specialty Care						
Strategy # 1: Assure an adequate supply specialty care						
Resource Plan	Anticipated Impact	Evaluation	Planned Collaboration			
Resources committed to the success of the access to primary care strategy	How the success of the strategy will improve the health of the community	How will we determine if we have been successful	Community or internal partners			
	fairly compensated, leading to improved recruitment and retention  • Maintaining long-term provider/patient relationship will increase trust and facilitate addressing  • Reduce referral times for patient appointments		External relationship with area hospitals / medical groups			
Resource Plan	an adequate supply spe		Planned Collaboration			
Resources committed to the success of the access to primary care strategy	How the success of the	How will we determine if	Community or internal partners			
□ Integration of mental health services into clinics and community services □ Increased awareness and education about the day to day mental health challenges such as stress, anxiety, depression, etc. □ Recruit more providers to increase access □ Research existing mental health crisis lines and form partnerships to promote to the community □ Improve early intervention	<ul> <li>Increased behavioral health resources for adolescents</li> <li>Increased public awareness and prevention</li> </ul>	Establish mental health in Primary Care and/or other service lines to help identify mental health issues at an early stage     Wait time for first appointment targets: 5 business days for urgent need (eg: recent discharge from an acute setting), 30 business days for routine need     Implementation of Pediatric Behavioral Development Specialty     Implement Psychology Services     Patient Satisfaction	<ul> <li>Monterey County Behavioral Health</li> <li>NAMI (National Alliance on Mental Illness, Monterey County)</li> <li>Community Human Services</li> </ul>			

		% of patients     receiving BH     Screening     % of patients     discharged with a				
CHNA Board Adopted Priority #4: Patient Education / Counseling Related to Medical Conditions or Health Behaviors						
Strategy # 1: Assure	adequate patient educ	ation and counseling s	ervices			
Resource Plan	Anticipated Impact	Evaluation	Planned Collaboration			
Resources committed to the success of the access to primary care strategy	How the success of the strategy will improve the health of the community	How will we determine if we have been successful	Community or internal partners			
Expand hospital and clinic prevention classes     Establish diabetes prevention program, follow patients over time     Review of agricultural site clinics     Engage in reviewing topics with Registered Dieticians, Respiratory Therapists, and Pharmacists	More educated and informed residents     Reduced incidence and impact of chronic conditions including obesity and diabetes     Reduce the percentage of community residents with atrisk, pre-or full chronic conditions	List of curricula provided  Number of attendees and completed reviews  Numbers of events hosted and # community residents reached  Number of people enrolled in Diabetes Prevention Program (DPP)  Number of people who completed DPP	Healthy Business     Partners     Health     Department     Senior Centers     School District     Physician Offices			