

2012

Community Hospital  
of Bremen  
Community Health  
Needs Assessment

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Prepared by the Indiana Rural Health Association

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## Process

Community Hospital of Bremen (CHB) contracted with the Indiana Rural Health Association (IRHA) to conduct the Community Health Needs Assessment (CHNA).

IRHA first identified the community served by CHB through conversations with the hospital personnel. Based on a review of patient zip codes, the hospital was able to define the community served as anyone residing in the following zip codes: 46506, 46537, 46536, 46595, 46573, 46550, 46504, and 46563. These postal codes fall within four separate Indiana counties: southeastern St. Joseph County, southwestern Elkhart County, northeast Marshall County, and northwest Kosciusko County.

To quantifiably describe the community, census reports were commissioned from iVantage Health Analytics in conjunction with ESRI. Quantifiable statistics and reports for health-related community data were obtained from Community Hospital of Bremen, the Community Health Rankings & Roadmaps from the Robert Wood Johnson Foundation, and the Indiana Community Asset Inventory and Rankings 2012 from the Center for Business and Economic Research and Ball State University. The full reports can be found in Appendix A. Additional reports were pulled from the Centers for Disease Control website and the Indiana State Cancer Registry. Excerpts from these reports can be found in Appendix A.

Next, a steering committee comprised of community representatives was organized with the help of the Community Hospital of Bremen CEO, Scott Graybill. Business owners, local officials, healthcare providers, minority leaders, clergy, student representatives, and any other interested parties were invited to attend the meeting to discuss the health-related needs of the community with a view to identifying the areas of greatest concern. The list of invitees and their positions can be found in Appendix B.

Once the information was obtained from the steering committee, a 33-question survey was developed to gain the perspective of the inhabitants of the community. Questions included queries about the effect of various factors (such as illegal drugs, teen pregnancy, and obesity), as well as probes into the perceived need for various services and facilities in the community. The survey was widely disseminated to the residents in CHB's services area through inclusion on the hospital's website, face-to-face polling at three popular grocery stores in and near Bremen, and a publically available survey, which was posted on Zoomerang.com (now Survey Monkey) and distributed in hard copy to the local Amish population. The survey may be viewed in Appendix C.

To identify all healthcare facilities and resources that are currently responding to the healthcare needs of the community the IRHA contacted CHB. The hospital was able to update a list of healthcare facilities that was previously compiled by Oklahoma State University during an earlier Community Health Needs Assessment. This collaborative effort produced a listing of the facilities and resources, including but not limited to clinics, family practices, and nursing facilities that are currently available within the service area of Community Hospital of Bremen. The list of existing resources can be found in Appendix D.

At this point, the entirety of the collected data was submitted to Community Hospital of Bremen to explain how the needs identified by the CHNA are currently being met, as well as to write a plan of action for those needs that are not currently being met. CHB was also able to identify the information gaps limiting the hospital's ability to assess all of the community's health needs.

The completed CHNA was then publically posted on hospital's website. Hard copies of the full report were made available to the community upon request at the hospital, as well.

## **Community Served**

The community served by Community Hospital of Bremen is defined as follows: All people living within the following zip codes: 46506, 46537, 46536, 46595, 46573, 46550, 46504, and 46563

## **Description of Community**

### **Physical**

The service area of Community Hospital of Bremen is located in the north central region of Indiana. The community is largely rural and is comprised of southeastern St. Joseph County, southwestern Elkhart County, northeast Marshall County, and northwest Kosciusko County.

### **Population – Ethnicity, Age, Households & Income**

According to iVantage Health Analytics, in conjunction with 2011 ESRI data, the total population of the community is 57,552; and the average median age in the county is 37.07 years old. Females make up 50.5% of the overall populace. Minority populations make up 9.71% of the total inhabitants of the county. There are 20,826 households comprised of approximately 2.76 persons each. The average household income is \$57,403; and the average per capita income is \$20,772.

It is worth noting that there is also a sizable Amish population living within CHB's service area. As there is no designation for this group on census materials, they would not appear within the data, but do account for a portion of the patients at Community Hospital of Bremen.

Demographic Profile - Service Area by ZIP Code  
All Zip Codes

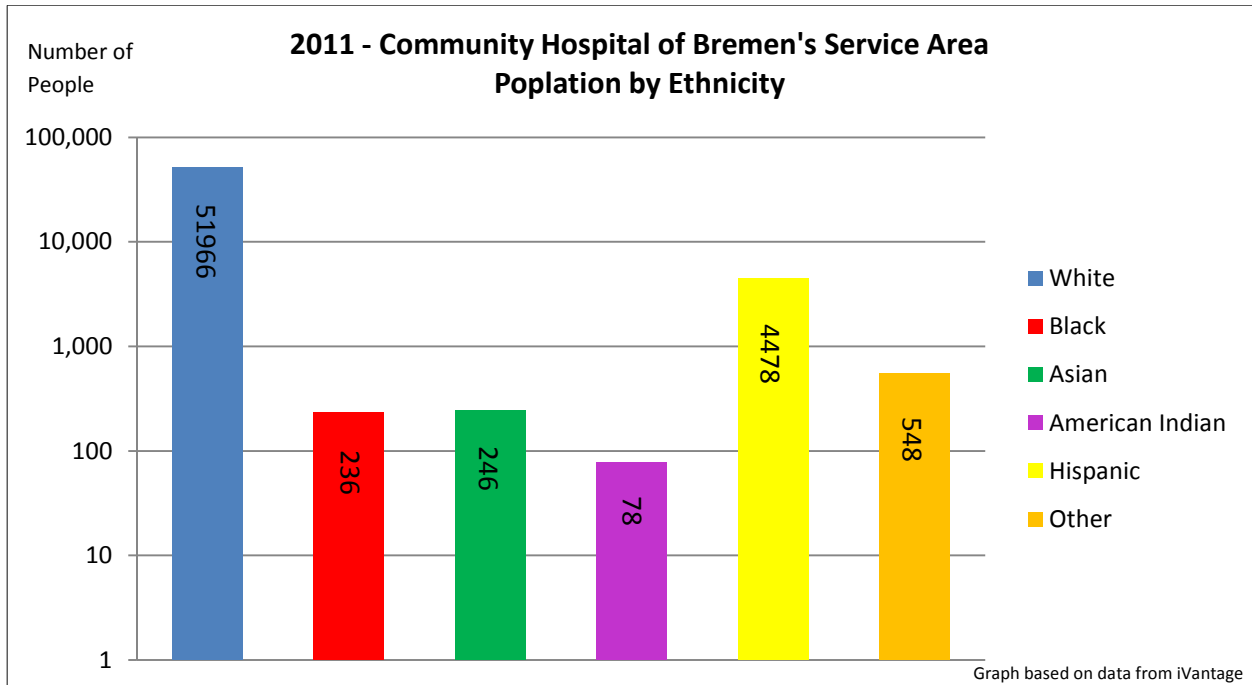
Description	2010	2011	2016	Volume Change	Percent Change
Total Population	57,348	57,552	58,518	964	1.68%
White	51,876	51,966	52,047	81	0.16%
Black	236	236	259	23	9.75%
Asian	246	246	269	23	9.35%
American Indian	78	78	72	-6	(7.69%)
Hispanic	4,365	4,478	5,264	788	17.55%
Other	545	548	605	57	10.40%
Median Age	36.96	37.07	37.70	1	1.70%
Total Population by Age					
00-14	13,240	13,198	13,367	169	1.28%
15-24	7,585	7,602	7,281	-321	(4.22%)
25-34	6,467	6,508	6,724	216	3.32%
35-44	7,201	7,178	6,963	-215	(3.00%)
45-54	8,036	8,006	7,406	-600	(7.49%)
55-64	6,743	6,855	7,397	542	7.91%
65+	8,079	8,205	9,378	1,173	14.30%
Female Population by Age					
00-14	6,381	6,357	6,430	73	1.16%
15-24	3,076	3,083	3,532	-151	(4.10%)
25-34	3,172	3,193	3,284	91	2.85%
35-44	3,654	3,643	3,515	-128	(3.51%)
45-54	3,973	3,957	3,643	-314	(7.94%)
55-64	3,386	3,443	3,708	265	7.70%
65+	4,727	4,790	5,378	588	12.28%

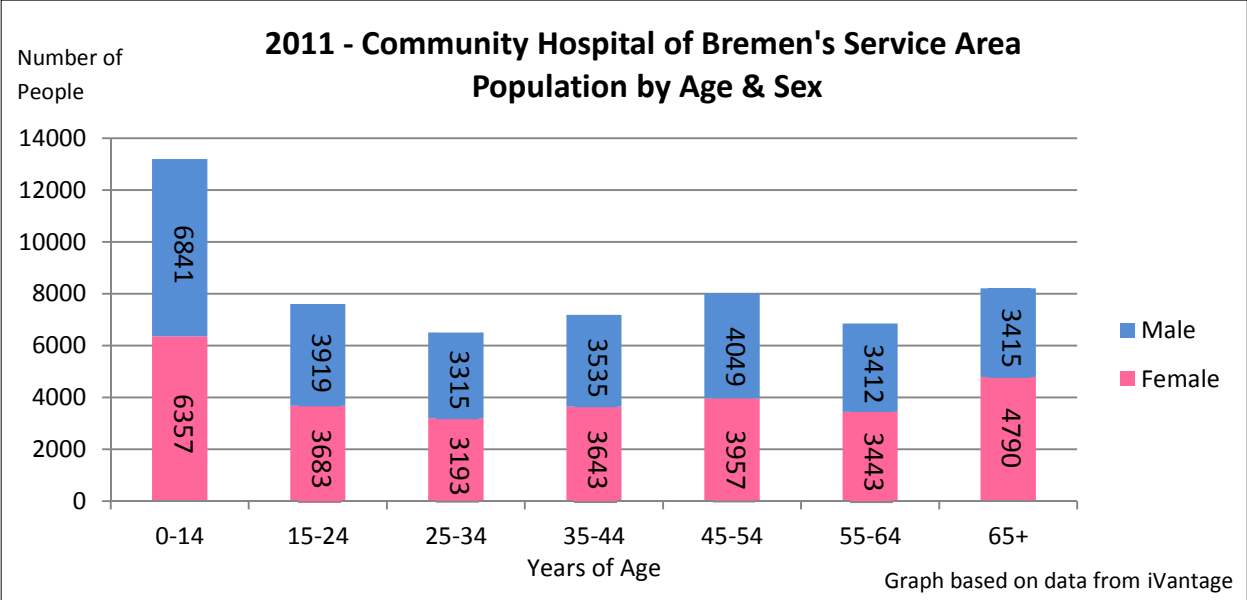
Description	2010	2011	2016	Volume Change	Percent Change
Total Female Population	28,966	29,066	29,490	424	1.46%
Female Population 15-44	10,502	10,519	10,331	-188	(1.79%)
Total Households	20,839	20,826	21,209	383	1.84%
Average Household Size	2.75	2.76	2.76	0	0.00%
Median Household Income	56,284	47,280	53,825	6,545	13.84%
Average Household Income	63,140	57,403	63,280	5,877	10.24%
Per Capita Income	22,944	20,772	22,930	2,164	10.42%
Household Income					
\$ 0 - \$ 14,999	749	2,004	1,898	-106	(5.29%)
\$ 15,000 - \$ 24,999	1,972	2,732	2,089	-843	(23.54%)
\$ 25,000 - \$ 34,999	1,928	2,492	1,951	-541	(21.71%)
\$ 35,000 - \$ 49,999	3,614	3,658	3,257	-401	(10.96%)
\$ 50,000 - \$ 74,999	5,706	4,865	5,902	1,037	21.32%
\$ 75,000 - \$ 99,999	3,585	2,670	3,352	682	25.54%
\$100,000 - \$149,999	1,489	1,705	1,957	252	14.78%
\$150,000 - \$199,999	481	680	507	-173	(25.44%)
\$200,000 +	628	276	206	20	7.26%

Source: ESRI Business Information Solutions

Prepared on October 26, 2012, by iVantage Health Analytics, Inc. 615-932-8400 Copyright 2012  
Reports Center Location: Demographics\Service Area

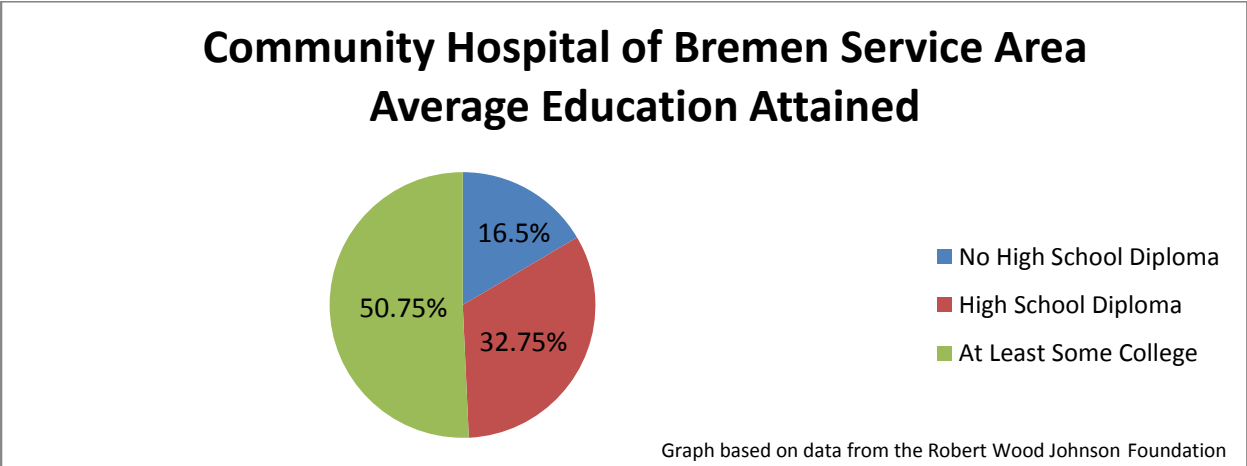
www.iVantageHealth.com





**Education**

The Robert Wood Johnson Foundation reports that an average of 83.5% of the community residents have high school diplomas compared with a statewide average of 84%. Additionally, an average of 50.75% of the community has at least some college education compared with a statewide average of 58%.



The full reports from iVantage Health Analytics, the Robert Wood Johnson Foundation, and the Center for Business and Economic Research and Ball State University can be viewed in Appendix A.

**Health Summary**

The overall average health grade for CHB’s service area from the CAIR report stands at a B+. The CAIR provides a detailed asset inventory of variables that describe the education attainment and health of Hoosier citizens, as well as the availability of natural resources and cultural amenities. All of the data has been carefully selected from secondary sources and is reviewed as to the contribution to the quality of life for the residents within the county. The data sets have been aggregated and an average of the grades given to the counties in Community Hospital of Bremen’s service area is noted above. Based on data from the 2012 County Health Rankings & Roadmaps report, Marshall County ranks 21<sup>st</sup> in Health

Outcomes and 26<sup>th</sup> in Health Factors out of a total of 92 counties in the state, Kosciusko County ranks 25<sup>th</sup> in Health Outcomes and 34<sup>th</sup> in Health Factors, Elkhart County ranks 19<sup>th</sup> in Health Outcomes and 67<sup>th</sup> in Health Factors, and St. Joseph County ranks 43<sup>rd</sup> in Health Outcomes and 36<sup>th</sup> in Health Factors. This results in an average ranking of 27<sup>th</sup> in Health Outcomes and 41<sup>st</sup> in Health Factors for CHB's community.

The Health Outcomes ranking was based on a reported average of 3.3 days of poor physical health by the residents of the service area compared to a national average of 2.6 and a statewide average of 3.6 and a reported average of 3.5 days of poor mental health days by service area residents compared to a national average of 2.3 and statewide average of 3.6. The Health Factors ranking was based on Health Behaviors, Clinical Care, Social and Economic Factors, and Physical Environment.

Instances of adult smoking, adult obesity, and physical inactivity are all on par with state averages, though they well exceed national rates. The average rate of adult smoking in the service area is 23% versus 24% statewide and 14% nationally. The average rate of adult obesity is 30.25% compared to 31% statewide and 25% nationally. The average rate of physical inactivity is 27.25% versus 27% statewide and 21% nationally.

The community posted an average ranking of 36<sup>th</sup> out of 92 counties in Clinical Care. A high patient-to-primary physician ratio at 1062:1 compared with the national average of 631:1 and the statewide average of 889:1 negatively affected the otherwise middling scores in Clinical Care. The service area posted only 64.75 preventable hospital stays versus an Indiana average of 78, and they slightly outpaced the state in diabetic and mammography screening at 74% compared to 73% statewide.

CHB's community continued to maintain or outpace state averages in Social and Economic Factors with the following average rates: high school graduates (83.5% of the community compared to a statewide average of 84%), children in single-parent households (29% versus the statewide average of 32%), and violent crime (179.5 incidents compared with 367 statewide). However, a high unemployment average (11.78% compared to 10.2% statewide) and a low number of residents with at least some college education (50.75% opposed to the statewide average of 58%) combined to produce an average ranking of 63 out of all 92 Indiana counties in Social and Economic Factors.

The Physical Environment score for Community Hospital of Bremen's community was, once again, in the middle third of ranking for the state of Indiana. An average rank of 41<sup>st</sup> out of 92 counties resulted from a low number air pollution-ozone days (.5 days compared with 0 nationally and 3 statewide), a low percentage of individuals with limited access to healthy foods (5.5% of the population compared to a national average of 0% and a statewide average of 7%) and a low average number of fast food locations (48.25% of the total eateries compared to 25% nationally and 50% statewide). The County Health Rankings measures the population living with limited access to healthy foods using the USDA Food Environment Atlas. Individuals are counted who have both low access to a supermarket or large grocery store and a low income. "Low access" is greater than ten miles away in a rural county.

The full County Health Rankings & Roadmaps report conducted by the Robert Wood Johnson Foundation can be viewed in Appendix A.

## Primary and Chronic Diseases

Community Hospital of Bremen generated a report of the Most Common Diagnosis for patients from November 1, 2011 through November 1, 2012. From this report, the top ten most common diagnoses for their service area were identified. A further examination of the payer mix for each diagnosis resulted in an additional report to identify the issues that were most often seen in low-income, disabled, and/or older populations. (\*Note: It is important to understand the key characteristics of the CHB service area. This includes identifying the low-income, disabled and/or elderly population. The population trends help provide an indication of patterns within the residents of the community and assist in identifying the needs around this populace.)

The following list contains the top ten most common diagnoses and the percentage of Medicare and Medicaid patients for each diagnosis:

- Pneumonia – 42 cases (42.86% Medicare & Medicaid)
- Dehydration – 25 cases (64% Medicare & Medicaid)
- Malaise and Fatigue – 14 cases (85.71% Medicare & Medicaid)
- Chest Pain, Not Specified – 12 cases (66.67% Medicare & Medicaid)
- Blood Poisoning Due to e. Coli – 11 cases (63.64% Medicare & Medicaid)
- Ischemic Stroke – 11 cases (90.91% Medicare & Medicaid)
- Noninfectious Gastroenteritis and Colitis – 10 cases (70% Medicare & Medicaid)
- Chest Pain, Other (Angina, Acute Coronary Syndrome) – 10 cases (90% Medicare & Medicaid)
- Atrial Fibrillation – 9 cases (77.78% Medicare & Medicaid)
- Urinary Tract Infection – 9 cases (66.67% Medicare & Medicaid)

Though not indicative of any primary or chronic diseases, it is important to note that CHB saw a total of 67 single live births, 29 deliveries with one- or two-degree lacerations, and 23 patients for rehabilitation services. As noted, these patients do not factor into any data concerning disease; however, they do illustrate two important functions of CHB within their community: labor/delivery and rehabilitation services.

The full list of discharge diagnoses and payer mix reports can be found in Appendix A.

The cancer rates in Community Hospital of Bremen's service area are generally on par when compared to the state averages. The Indiana State Cancer Registry reports an average rate of 470.2 people (per 100,000 people) with any type of cancer in contrast to Indiana's slightly higher average rate of 475.6 people with any type of cancer. Lower than average rates were also posted in CHB's lung cancer (115.2 compared to the state's 116) and breast cancer (71.6 versus Indiana's 80). However, slightly higher averages were posted in both prostate cancer rates (136.4 in comparison to the statewide rate of 136) and colon and rectum cancer rates (52.7 compared to the state's 51.4). Cancer mortality rates in the community mirror the previously mentioned data showing slightly lower rates for breast and lung cancer and slightly higher rates for prostate and colon and rectum cancer.

According to data from the Centers for Disease Control and Prevention Division for Heart Disease and Stroke Prevention Community Hospital of Bremen's average county rank is 45<sup>th</sup> out of Indiana's 92 counties in all heart disease mortality rates. The service area has an average mortality rate of 199.8 per



100,000 which is on par with the state's rate of 199.7 per 100,000 and is somewhat higher than the national average of 185.2 per 100,000.

The CDC's Diabetes Data & Trends report also relates that the CHB community comes in below the state average in rates of diabetes. CHB's service area has an average, age-adjusted rate of 8.9 compared to an Indiana-wide average of 9.5.

Portions of the Indiana State Cancer Registry's Indiana Cancer Facts & Figures 2011, as well as both CDC reports can be found in Appendix A.

### **Existing Healthcare Resources**

Community Hospital of Bremen updated a list of existing healthcare facilities, which had been previously compiled by Oklahoma State University to provide a complete listing of the currently available healthcare facilities and services in CHB's service area. CHB will be able to use this listing when creating their action plan to fully incorporate all available resources.

- Alick's Home Medical
- Anglemeier Family Clinic
- Beaman Home (Domestic Shelter)
- B-Fit Performance/Wellness
- Blake Horio, MD
- Blanchette Massage Center
- Bottorff Chiropractic Clinic
- Bourbon Family Dentistry
- Bremen Chiropractic Center
- Bremen Family Dentistry
- Bremen Family Eyecare
- Bremen Health Care Center
- Bremen Vision Center
- Brian R. Topping, DDS
- Center for Hospice and Palliative Care
- Center for Rehabilitation Outpatient Nappanee
- Charles E. Hassel, DDS
- Community Family Physicians
- Community Hospital of Bremen
- Community Hospital of Bremen Medical Office Suites
- Country Chiropractic
- Curves for Women
- CVS Pharmacy
- Darr & Associates
- Doctor's Hospital
- Elkhart County Health Department
- Hands for Health Therapeutic Massage Clinic
- Hearing Diagnostics Center
- Home Health Services

Jerry O. Lentz, DDS  
John Larson, MD  
Kosciusko County Health Department  
Lakeville Family Medicine  
LuAnne's Nursing Home  
Mark Hutsell, DC  
Marshall County Health Department  
Marshall County Victim Assistance  
Martins Super Markets Nappanee Store  
Massage Works by Cathy CMT  
Meijer  
Memorial Home Care  
Michiana Behavioral Health Center  
Miller's Health Care – Nappanee  
Miller's Health Care – Plymouth  
Miller's Health Care – Wakarusa  
Miller's Health Care – Walkerton  
Miller's Merry Manor – Nappanee  
Miller's Merry Manor – Plymouth  
Miller's Merry Manor – Wakarusa  
Nappanee Family Eyecare  
Nappanee Family Medical Clinic, Ins  
Nappanee Spinal Adjusting Center  
Nate D. Oglesbee, OD  
Northwood Family Dentistry, Inc  
Northwood Medical Clinic  
Orthopedic & Sports Therapy Center  
Orthopedic Sports Medicine Center of Northern Indiana Inc  
St. Joe Visiting Nurse  
St. Joseph County Health Department  
The Natural Path  
Tri County Ambulance Service  
Union North Ambulance Service Inc  
Wakarusa Ambulance Department  
Wakarusa Family Chiropractic  
Wakarusa Medical Clinic  
Walgreen's  
Well Spring Counseling & Learning Center  
Wyatt Family Medicine

A complete listing of the facilities including addresses, phone numbers, and facility type can be found in Appendix D.

## Identifying Health & Service Needs

A steering committee, including representatives from CHB's service area, was organized with the help of Community Hospital of Bremen's CEO, Scott Graybill. Business owners, local officials, healthcare providers, minority leaders, clergy, student representatives, and any other interested parties were invited to attend the meeting to discuss the health-related needs of the community with a view to identifying the areas of greatest concern. The invitation letter and list of both those invited and those who attended can be found in Appendix B.

The steering committee was encouraged to brainstorm all areas of need or concern in the health field in CHB's community in both large and small group settings. Once a master list of all concerns was agreed upon by the full group, attendees were separated into two smaller groups (Group A and Group B). The small groups were asked to list what they perceived to be as the greatest strengths and values in their community. Then, they were asked to identify the highest priorities from the master list of concerns.

By analyzing both prioritized lists from the small groups, the IRHA was able to pull out the items that appeared most frequently and identified eight areas of need or concern to the community:

- Drug Use (illegal and prescription)
- Transport
- Access to Care (specialty, senior, women's, special needs)
- Access to Health Insurance
- Mental Health Services
- Urgent Care
- Immunizations
- Access to Pharmacy Services

The master list, each group's priority list, and the list of areas that were determined to be of the greatest need can be found in Appendix B.

The identified areas of greatest need were used to create a 35 question survey, addressing demographics, issues and community services and amenities, which can be found in Appendix C. It was decided that the assessment tool should be available in both English and Spanish as there is a portion of the population for which Spanish is the primary language. The survey was widely disseminated via internet access, community bulletins, and the local newspaper to the residents within CHB's community through inclusion on the Community Hospital of Bremen website and a publically available survey posted on Zoomerang.com (now Survey Monkey). Face-to-face polling was also implemented at Woodies Grocery Store, the Rentown Store, and Pine Hill Amish Store, three popular grocery stores in and around Bremen. To conduct the in-person survey, two members of the IRHA staff (including one Spanish speaker) greeted all shoppers as they entered the stores and asked for their participation in the survey. The general public was alerted to the face-to-face and online polls through CHB newsletters and an announcement in the local newspaper. At the end of polling, there were a total of 99 online responses and 44 face-to-face responses when both language versions of the survey were combined. The majority or 69% of the respondents are from zip code 46506, 90% identified as white, 8% identified as Hispanic or Latino, and 34% of all respondents were in the 45-55 age range.

Respondents were first asked to assess the effect of various factors on their community by selecting "Very Negative Effect, Some Negative Effect, No Effect, Some Positive Effect, or Very Positive Effect." The

second portion of the survey required respondents to assess the need for various services and facilities in their community by selecting “No Need, Slight Need, Definite Need, or Extreme Need.” In the needs section, respondents were also able to select “no opinion.” Questions 6, 7, and 8 were added at the request of Community Hospital of Bremen’s administration and addressed satisfaction with current healthcare, desired specialties, and access to insurance. Finally, respondents were able to leave open comments.

In order to analyze the results, responses were assigned number values. Regarding question 4, which asked “how do the following issues affect your community,” the responses were ranked from 1 to 5 with 1 representing “Very Negative Effect,” 2 representing “Some Negative Effect,” 3 representing “No Effect,” 4 representing “Some Positive Effect,” and 5 representing “Very Positive Effect.” The results for question 4 are as follows:

When asked “how do these issues affect your community,” four issues were identified as having a negative effect by the respondents:

1. Illegal drug use – rating average of 2.26
2. Prescription drug abuse – rating average of 2.49
3. Alcohol use – rating average of 2.56
4. Language barrier – rating average of 2.92

The top four issues that positively affected the community were identified as the following:

1. School systems – rating average of 3.9
2. Family units – rating average of 3.73
3. Prescription drug availability – rating average of 3.58
4. Access to care – rating average of 3.57

Regarding question 5, which asked “do you see a need for the following services/facilities in your community,” the responses were ranked from 1 to 4 with 1 representing “No Need,” 2 representing “Slight Need,” 3 representing “Definite Need,” and 4 representing “Extreme Need.”

When asked “do you see a need for the following services/facilities in your community,” the top responses were:

1. Low-cost healthcare options – rating average of 3.47
2. Activities for elderly – rating average of 3.12
3. Mental health services – rating average of 3.09
4. Medical transportation – rating average of 3.06
5. Illegal drug education – rating average of 3.05
6. Elderly housing – rating average of 3.04

The two questions which were added at the request of Community Hospital of Bremen resulted in reasonably positive responses from the service area. Question 7 asked respondents whether they were satisfied with the healthcare specialists who are currently available. The final response indicated that 82.4% of respondents are satisfied. Question 8 asked whether the respondent or any member of their family had been without health insurance coverage in the preceding twelve months. The combined responses indicated that only 29.6% of respondents or their family members had been without health insurance in the past year.

Question 6 was another item that was included at the request of Community Hospital of Bremen and acted as a follow-up to the final item in question 5 regarding the need for specialty care. If respondents selected “Definite Need” or “Extreme Need” for specialty care they were encouraged to divulge the type of specialty care needed. The most common responses included a need for transportation, a 24-hour pharmacy, elderly care, and women’s services.

A sampling of the open comments from question 6:

“A free clinic may help with those who have no insurance or very high deductibles which prevent early treatment or screenings. Also, I am not aware of any 24-hour pharmacy within a 30-40 miles radius.”

“WE NEED MORE HELP FOR THE ELDERLY IN THIS COMMUNITY.”

“24-hour pharmacy and low cost healthcare”

“Orthopedics, ENT, oral surgeons, pain management, OB-GYN, women’s health”

“Assisted living, low cost healthcare”

“Transportation and affordable health insurance”

Finally, the survey allowed for any additional open comments from the respondents. These comments focused mainly on affordability of care/insurance and access to services. A sampling of the comments from the survey is below:

Open comments regarding affordability of care/insurance:

“I currently have health insurance but have spent most of my adult life without it. I am in danger of losing it now due to the cost to the company to provide it.”

“Single parents cannot afford insurance – constant poverty”

“Help for people who don’t have sufficient resources”

“We’ve had good service at the hospital this time around, but sometimes it seems like a bandaid station and people just get sent on to other hospitals. Is it a lack of qualified doctors? Also would help if people that don’t have insurance would get sizable discounts. Some people just don’t come here because of the lack of discount.”

Open comments regarding access to services:

“ACCESS TO DERMATOLOGIST SOONER THAN 3 MONTHS WOULD BE GREAT.”

“Great physicians are available in our community but are not always available at the times they are needed or do not have appointments available.”

“Limited services in Bremen; need medical transport outside of Bremen”

“The Bourbon pharmacy closed about five years ago and people have to drive at the very least 15 minutes to the next town. Many of the seniors in my town walked or rode their mobilized wheelchairs to the pharmacy. Now what do they do?”

The complete survey results can be found in Appendix C.

## Summary of Findings

Based on the information gathered as part of the Community Health Needs Assessment, the Indiana Rural Health Association has identified the areas of greatest need in the service area of Community Hospital of Bremen. Through the collection of health data and community input on their assets, values, and weaknesses within the hospital's service area, the following needs were identified as being of the highest importance:

### Identified Needs

- Drugs: Illegal drug use/alcohol abuse/prescription drug abuse
- Healthcare: Urgent care for basic medical services, mental health services
- Living conditions: Low cost healthcare options, public transportation, and elderly housing
- Chronic Disease: Obesity/fitness and diabetes
- Assistance/Activity: Senior assistance and all ages activity

Additionally, to aid Community Hospital of Bremen in the creation of an action plan, the IRHA has made preliminary recommendations for dealing with the defined areas of need.

### Recommendations

#### Drugs:

- Focus on education regarding the effects of drugs on health
- Market specific drug education classes
  - Engage previous offenders in the program. Have them share stories and reveal effects.
- Create a culture of health
- Create parent groups
- Involve social service agencies
- Discuss individual responsibility and ways to enhance it

#### Healthcare:

- Market availability of services and cost comparisons vs. other communities
  - Work within the Amish population to meet the needs of cost containment and services needed
- Education regarding affordable health screening tools
  - Educate regarding risk factors
    - Smoking/obesity/inactivity
  - Review target of educational tools
  - Create a culture of health – all ages
  - Focus on new methods of communicating with residents
    - Evaluate opportunity for monthly citizens roundtable
    - Participate in the Amish advertising paper The People's Exchange. The current circulation is 14,000 residents in Northern Indiana and Southern Michigan.

#### Living conditions:

- Focus on improving what is already in place
  - How well do your constituents know and understand the services at Community Hospital of Bremen? Provide a monthly update/highlight of a service or doctor to constituents.
  - Could a low-cost urgent care center be strategically placed to help meet the needs of the community better? If so, educate CHB constituents about what the services are within that space.
- Evaluate opportunity of outside services coming to CHB service area
  - Telehealth services for mental health patients
  - Special needs individuals
- Evaluate opportunity to choreograph transportation services with local not-for-profits
  - Churches, clubs, foundations etc.
  - If each identified a service area and concentrated on that area only, instead of all of county or a large unmanageable district, services could become more manageable.
- Senior housing options
  - Rehabilitation of local properties for senior living
  - Engage outside potential investors for low-cost construction
  - Family style housing for seniors with minor assistance needs

#### Chronic Disease:

- Focus education on the benefits of screening and early detection
- Focus education efforts on behavioral changes proven to help
  - Healthy eating and weight reduction
  - Exercise programs
  - Farm to family programs
    - Farmers' market
    - Organic or natural foods vs. processed
  - Develop support groups for various disease
    - Create age group appropriate
    - Stage appropriate
    - Create newsletter per disease

#### Assistance/Activity:

- Evaluate opportunity to create walking/biking paths in community
- Wellness programs
  - Screenings for blood pressure/heart rate and BMI
  - Community activities
    - Events in the park, on the farm or at the community center
    - Family nights out, treasure hunts and fruit/vegetable foraging – engages local farmers and families
    - Seasoned senior adventure and activity nights—include churches, clubs, foundations and local business to participate
  - Monthly fitness newsletter—include senior activities, easy recipes, dietician notes and secure incentives from local fresh produce farms/markets

Community Hospital of Bremen has a unique opportunity to become more focused in the health and well-being of its constituents. These efforts can become more successful by focusing on the community they are trying to touch and evaluating different methods to reach them. This can include upgrading current efforts, including newsletters or publications, websites and other communication methods.