

2016

Decatur County
Memorial Hospital
Community Health
Needs Assessment

Prepared by the Indiana Rural Health Association

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Process

Decatur County Memorial Hospital (DCMH) contracted with the Indiana Rural Health Association (IRHA) to conduct the Community Health Needs Assessment (CHNA).

IRHA first identified the community served by DCMH through conversations with the hospital. Based on a review of patient zip codes, the hospital was able to define the community served as all postal codes within the geographic area of Decatur County and some codes that extend slightly beyond the county lines.

To quantifiably describe the community, census reports were commissioned from United States Census Bureau Reports. Quantifiable statistics and reports for health-related community data were obtained from Decatur County Memorial Hospital, the Community Health Rankings & Roadmaps from the Robert Wood Johnson Foundation, the Indiana INDicators from the Centers for Disease Control and the Indiana Business Research Center, and the Indiana Community Asset Inventory and Rankings 2016 from Ball State University's Center for Business and Economic Research. The full versions of these reports can be viewed in Appendix A. Additional reports on chronic disease were pulled from the Centers for Disease Control website and the Indiana State Cancer Registry. Excerpts from these reports can also be found in Appendix A.

Next, a steering committee of Decatur County representatives was organized with the help of the Decatur County Memorial Hospital CEO, Linda Simmons. Business owners, local officials, healthcare providers, minority leaders, clergy, student representatives, and other interested parties were invited to attend the meeting to discuss the health-related needs of the community to identify the areas of greatest concern. The list of invitees and their company and/or affiliation can be found in Appendix B.

From the information 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 of Decatur County through inclusion on the Decatur County Memorial Hospital's website, face-to-face polling at the local public library, the local farmers' market on the Greensburg town square, and a publically available survey posted on SurveyMonkey.com. The survey may be viewed in Appendix C.

To identify all healthcare facilities and resources that currently respond to the healthcare needs of the community, the IRHA contacted DCMH to provide a listing of the facilities and resources, including but not limited to clinics, family practices, and nursing facilities currently available within Decatur County. The list of existing community resources can be found in Appendix D.

At this point, the data was submitted to Decatur County Memorial Hospital 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. DCMH 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 the 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 Decatur County Memorial Hospital is defined as follows: All people living within Decatur County, Indiana, or the surrounding area at any time during the year. To be determined as living within the service area of Decatur County, a person must reside within one of the following postal zip codes: 47240, 47238, 47272, 47225, 47263, 47234, 47037, and 47034.

Description of Community

Physical

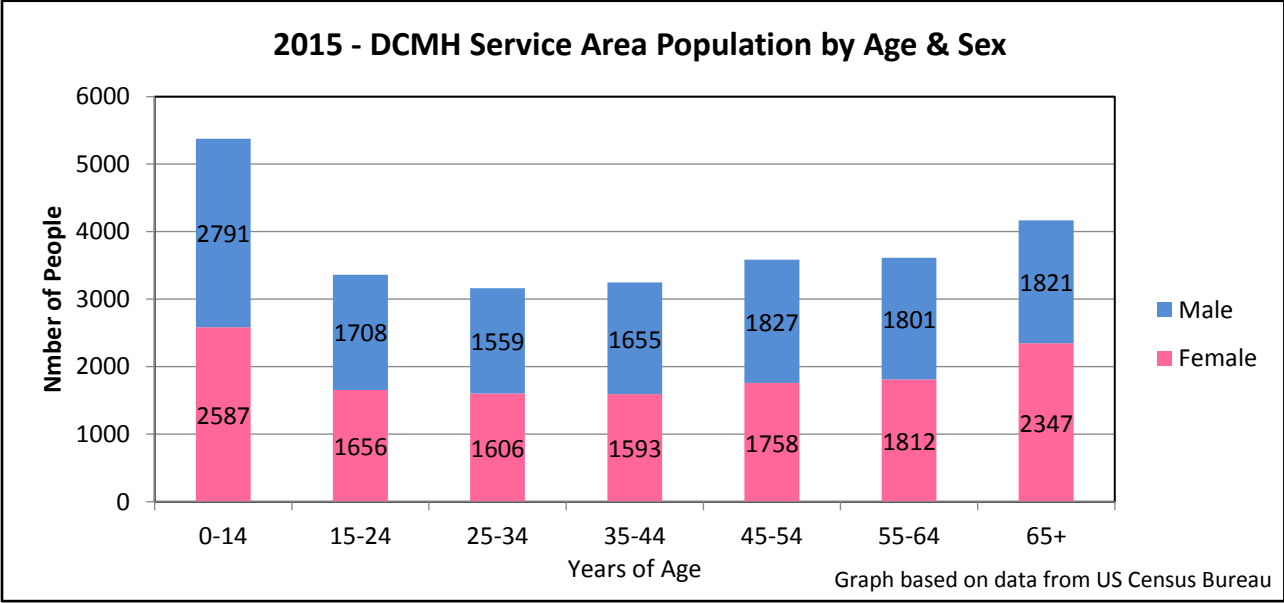
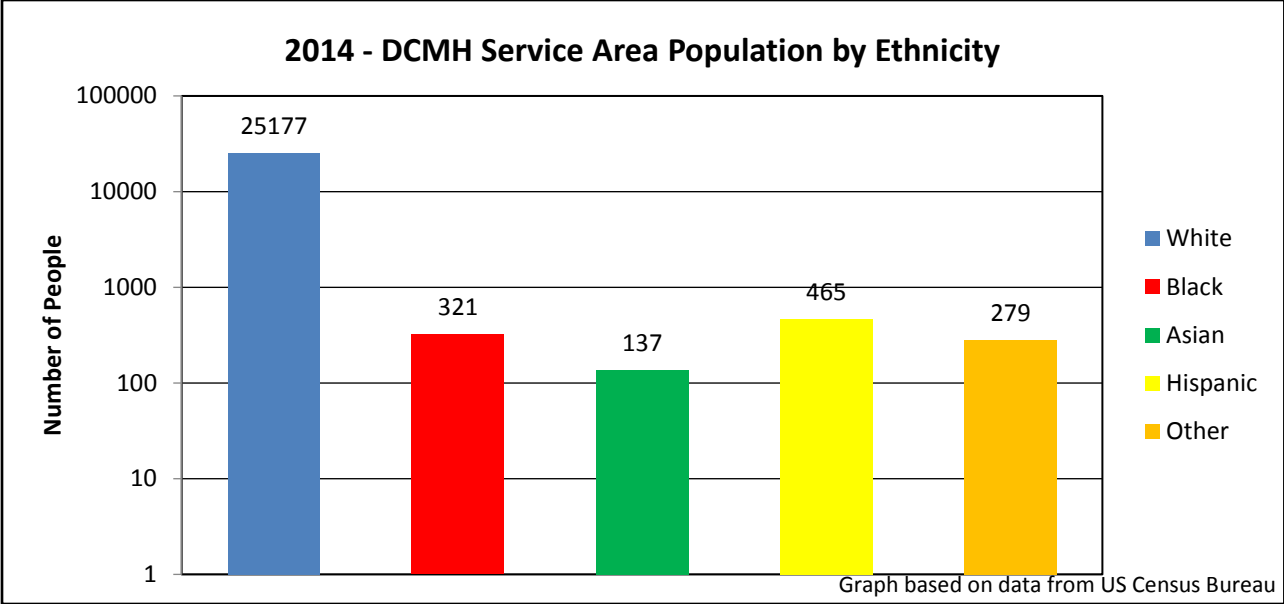
Decatur County is located in the southeastern quadrant of Indiana. The community is largely rural and is the 63rd in size out of 92 counties in Indiana, at approximately 373.32 square miles.

Population – Ethnicity, Age, Households, & Income

According to U.S. Census Report, the total population of the service area is 26,112; and the median age in the community is 39.5 years of age. Females make up 50.8% of the overall populace. Minority populations make up 3.6% of the total inhabitants of the community. There are 9,809 households comprised of approximately 2.63 persons each. The average household income is \$49,631; and the average per capita income is \$22,609.

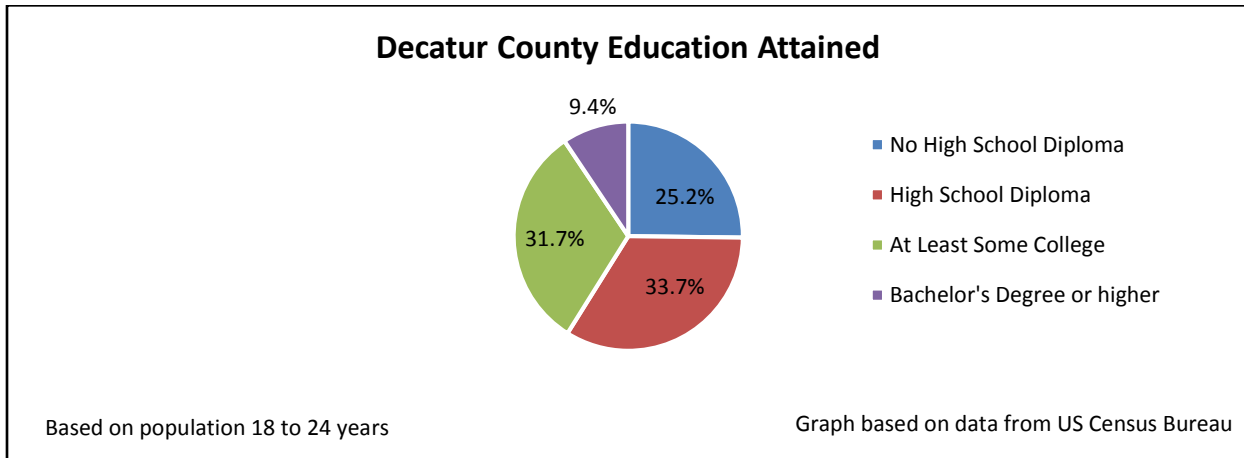
Subject	Decatur County, Indiana			
	Estimate	Margin of Error	Percent	Percent Margin of Error
SEX AND AGE				
Total population	26,112	*****	26,112	(X)
Male	12,853	+/-127	49.2%	+/-0.5
Female	13,259	+/-127	50.8%	+/-0.5
Under 5 years	1,589	+/-74	6.1%	+/-0.3
5 to 9 years	1,875	+/-229	7.2%	+/-0.9
10 to 14 years	1,975	+/-194	7.6%	+/-0.7
15 to 19 years	1,730	+/-61	6.6%	+/-0.2
20 to 24 years	1,447	+/-23	5.5%	+/-0.1
25 to 34 years	3,087	+/-76	11.8%	+/-0.3
35 to 44 years	3,340	+/-82	12.8%	+/-0.3
45 to 54 years	3,874	+/-77	14.8%	+/-0.3
55 to 59 years	1,726	+/-179	6.6%	+/-0.7
60 to 64 years	1,605	+/-186	6.1%	+/-0.7
65 to 74 years	2,057	+/-19	7.9%	+/-0.1
75 to 84 years	1,252	+/-134	4.8%	+/-0.5
85 years and over	555	+/-128	2.1%	+/-0.5
Median age (years)	39.5	+/-0.6	(X)	(X)
18 years and over	19,536	+/-49	74.8%	+/-0.2
21 years and over	18,761	+/-99	71.8%	+/-0.4
62 years and over	4,857	+/-181	18.6%	+/-0.7
65 years and over	3,864	+/-40	14.8%	+/-0.2
18 years and over	19,536	+/-49	19,536	(X)
Male	9,565	+/-87	49.0%	+/-0.4
Female	9,971	+/-96	51.0%	+/-0.4
65 years and over	3,864	+/-40	3,864	(X)
Male	1,662	+/-24	43.0%	+/-0.3
Female	2,202	+/-22	57.0%	+/-0.3

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates



Education

The Robert Wood Johnson Foundation reports that approximately 95% of the service area residents have high school diplomas compared with a statewide average of 87%. However, only 31.7% of the community has at least some (this does not necessarily reflect that a degree was attained, but rather that an individual received *any* post-secondary education at a college or university) college education compared with a statewide average of 61%. The educational achievements of the community earned Decatur a grade of C+ from the CAIR report.



The full reports from U.S. Census Bureau, the Robert Wood Johnson Foundation, and Ball State University's Center for Business and Economic Research can be viewed in Appendix A.

Health Summary

The overall health grade for Decatur County from the CAIR report stands at a C-. The CAIR provides a detailed asset inventory of variables that describes 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 community. The data sets have been aggregated and a grade, noted above, has been given to Decatur County. Based on data from the 2016 County Health Rankings & Roadmaps report, Decatur County ranks 58th in Health Outcomes and 41st in Health Factors out of a total of 92 counties in the state.

The Health Outcomes ranking was based on a reported 3.6 days of poor physical health by Decatur County residents compared to a national average of 3.8 and a statewide average of 4.1 and a reported 3.6 days of poor mental health days by Decatur County residents compared to a national average of 3.7 and statewide average of 4.3. The Health Factors ranking was based on Health Behaviors, Clinical Care, Social and Economic Factors, and Physical Environment.

A middling rate of adult smoking (21% of the population compared to a national average of 17% and a statewide average of 23%), a slightly high instance of physical inactivity (32% compared to a national average of 23% and a statewide average of 28%), a slightly high instance of adult obesity (at 30% compared to a national average of 27% and a statewide average of 31%), and above-average teen birth

rates (47 births compared to 35 nationally and 37 statewide) all prevented Decatur County from achieving a higher rank, currently at 43 out of 92 counties in Health Behaviors.

The county ranked 71st out of 92 counties on Clinical Care due in large part to the high patient-to-primary physician ratio (at 2,390:1 compared with the national average of 1,320:1 and the statewide average of 1,490:1) and even higher patient-to-dentist ratio (at 4,420:1 opposed to 1,540:1 nationally and 1,930:1 statewide).

An exceptional high school graduation rate of 95% compared to only 87% statewide and 82% nationally and below average unemployment (5.0% versus 6.2% nationwide and 6.0% in the rest of the state) were hindered by a very low percentage of college graduates (at 32% compared to a national percentage of 82% and a state average of 61%). These factors resulted in a top-third rank of 26th out of 92 counties in Social and Economic Factors.

The Physical Environment score was also in the top third of counties for Decatur County at a ranking of 29th out of 92 Indiana counties. This ranking is due to a combination of average air pollution-particulate matter (13.5 average density of fine particulate matter compared to a statewide average of 13.5 and a national average of 11.4) and slightly low severe housing violations (12% compared to 14% statewide and 19% nationally). A moderately high number of individuals in the county driving alone to work (86% of the total county population compared to 83% statewide and 76% nationally) did impede the county's score. Also a long commute – driving alone had an impact on their ranking with 24% compared to 30% statewide and 31% nationally.

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. “Low income” individuals are classified if they fall into the government definition of poverty or have a median family income at or below 80% of the county's median family income.

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

Decatur (DC)

	Decatur County	Error Margin	Top U.S. Performers [^]	Indiana	Rank (of 92)
Health Outcomes					58
Length of Life					
Premature death	8,600	7,300-9,900	5,200	7,600	63
Quality of Life					
Poor or fair health**	16%	15-17%	12%	19%	41
Poor physical health days**	3.6	3.5-3.8	2.9	4.1	
Poor mental health days**	3.9	3.7-4.1	2.8	4.3	
Low birthweight	8%	7-9%	6%	8%	
Health Factors					41
Health Behaviors					
Adult smoking**	21%	20-21%	14%	23%	43
Adult obesity	30%	24-37%	25%	31%	
Food environment index	7.5		8.3	7.2	
Physical inactivity	32%	26-39%	20%	28%	
Access to exercise opportunities	62%		91%	75%	
Excessive drinking**	16%	15-17%	12%	16%	
Alcohol-impaired driving deaths	22%	12-33%	14%	25%	
Sexually transmitted infections	122.9		134.1	428.7	
Teen births	47	41-52	19	37	
Clinical Care					71
Uninsured	16%	14-17%	11%	16%	
Primary care physicians	2,390:1		1,040:1	1,490:1	
Dentists	4,420:1		1,340:1	1,930:1	
Mental health providers	2,410:1		370:1	710:1	
Preventable hospital stays	75	65-85	38	63	
Diabetic monitoring	85%	75-94%	90%	84%	
Mammography screening	51%	42-61%	71%	62%	
Social & Economic Factors					26
High school graduation	95%		93%	87%	
Some college	51%	45-56%	72%	61%	
Unemployment	5.0%		3.5%	6.0%	
Children in poverty	19%	14-24%	13%	21%	
Income inequality	3.4	3.1-3.8	3.7	4.4	
Children in single-parent households	36%	29-43%	21%	34%	
Social associations	13.7		22.1	12.6	
Violent crime			59	334	
Injury deaths	73	59-90	51	63	
Physical Environment					29
Air pollution - particulate matter	13.5		9.5	13.5	
Drinking water violations	No		No		
Severe housing problems	12%	9-15%	9%	14%	
Driving alone to work	86%	83-88%	71%	83%	
Long commute - driving alone	24%	20-27%	15%	30%	

[^] 10th/90th percentile, i.e., only 10% are better.

Note: Blank values reflect unreliable or missing data

** Data should not be compared with prior years due to changes in definition/methods

2016

Primary and Chronic Diseases

Decatur County Memorial Hospital generated a report of the Most Common Diagnoses for discharges from July 2015 through June 2016. 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 DCMH population. 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:

- Urinary Tract Infection – 134 cases (90.3% Medicare and Medicaid)
- Obstructive Chronic Bronchitis w/ Acute Exacerbation – 108 cases (61.1% Medicare and Medicaid)
- Pneumonia – 92 cases (73.9% Medicare and Medicaid)
- Congestive Heart Failure – 73 cases (87.7% Medicare and Medicaid)
- Osteoarthritis – 29 cases (58.6 % Medicare and Medicaid)
- Dehydration – 28 cases (75% Medicare and Medicaid)
- Care involving other specified rehabilitation – 28 cases (78.6% Medicare and Medicaid)
- Acute Pancreatitis – 27 cases (22.2% Medicare and Medicaid)
- Atrial Fibrillation – 25 cases (88% Medicare and Medicaid)
- Cellulitis of the Leg – 23 cases (47.8% Medicare and Medicaid)

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

The cancer rates in Decatur County are on par with the state averages. The rate of cancer (per 100,000 people) in Decatur County comes in at 443.8 compared to a statewide rate of 466.6. Decatur comes in above average on the rates of prostate cancer (114.8 versus a statewide rate of 106.9) and breast cancer below average (84.8 versus a statewide rate of 118.1). Lung and colon/rectal cancer are below average with lung cancer being 72.0 versus 73.9 statewide and colon rectal cancer rate of 37.8 versus a statewide rate of 44.4.

Cancer mortality rates for all types of cancer in the county are slightly higher than the state average at a rate of 199.5 versus Indiana's overall rate of 187.3. Colon and rectal cancer mortality rate is lower than the state average with 13.5 compared to 16.6 statewide. Lung cancer has a higher mortality rate than Indiana with 64.1 and 57.5 statewide. Prostate and breast cancer mortality rates were not included due to insufficient data.

According to data from the Centers for Disease Control and Prevention Division for Heart Disease and Stroke Prevention, Decatur County ranks 68th out of Indiana's 92 counties in all heart disease mortality rates. The county has a heart disease mortality rate of 215.4 per 100,000, which is significantly higher than both the state rate of 187.2 per 100,000 and the national average of 171.6 per 100,000.

The CDC’s Diabetes Data & Trends report relates that Decatur County comes in very near the state average in rates of diabetes. The county has an age-adjusted rate of 8.9% compared to an Indiana-wide average of 9.3% and national rate of 8.3%.

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

Existing Healthcare Resources

Decatur County Memorial Hospital provided a complete listing of the currently available healthcare facilities and services that are accessed by those living in Decatur County. This list includes, but is not limited to, a Critical Access Hospital, community-based physicians, a county health department, and a variety of specialty clinics, oral care providers, eye care providers, mental health services, nursing homes, and assisted living facilities. DCMH will be able to use this listing when creating their action plan to fully incorporate all available resource.

Decatur County Board of Health Greensburg Eye Care Dooley, Jon OD Sizemore, Carrie A. OD Weigel & Lohmueller Weigel, David J. OD Lohmueller, Carol A. OD Weigel, Eric, OD Welage, Tom E. OD Anytime Fitness DC Family YMCA DCMH Home Health Care Hospice of Decatur County Montgomery Group Home ResCare Homecare Advantage Home Care Decatur County Memorial Hospital DC Primary Care Datta, Purnendu P. MD Lovins, Becky NP Rayles, Jaimie MD Wagner, Cody MD Oncology Dr. Jamie Ayon Cancer Care Center: Decatur County Memorial Hospital Pain Clinic DCMH Dr. Danielle Turnak Wound Care Center Henry & Newman	Tree City Medical Partners Alunday, Arthur P. MD Fletcher, Jennifer MD McCullough, Mary MD Mungcal, Noel MD Struewing, Natasha WHNP Troutman, Cary NP Walsman, Shelly NP Suzanne Johanigman NP DC Women’s Care Dr. Wayne Perry MD- OB/GYN Dr. Anxhela Treska MD- OB/GYN Darr, Maria MD- Pediatrics Chandler, Andrew MD Westport Clinic Ingram, Tracy L. NP Centerstone Arbor Grove Village Aspen Place Heritage House Hickory Creek Morning Breeze Eversole, Robert DDS Family Dental Care of Greensburg Gentle Dentist – Greensburg Staggs, Russell DDS Paul R. Nahmias & Associates Stradley Hagerty LLC Hagerty, Elizabeth DDS Stradley, Steven DDS
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Henry, Max A. MD Medical Clinic of Greensburg Rehab, Mustafa M. MD Southeastern Indiana Dermatology Dubois, Andrew M. MD Southern Indiana Foot & Ankle Center Jelinek, Amy DPM Southern Indiana Orthopedics Olson, Larry D. MD Tannenbaum, Daryl MD AccuDoc Urgent Care - Greensburg Austin, Trent R. MD Decamp, Daniel P. MD	CVS Pharmacy Walgreens Store Walmart Pharmacy Decatur County Memorial Hospital DCMH Rehab Services Progressive Physical Therapy Albers, Brian MD Geers, Jon MD Negovetich, Ed MD Lake, Leanne MD Audiology Children's Health Care Greensburg Foot Clinic
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A complete listing of the facilities and some of the physicians who are affiliated with each location can be found in Appendix D.

Identifying Health & Service Needs

A steering committee of representatives from Decatur County and the surrounding areas was organized with the help of the Decatur County Memorial Hospital CEO, Linda Simmons. 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 DCMH service area with a view to identifying the areas of greatest concern. The invitation letter, list of those invited, and list of 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 Decatur County Memorial Hospital service area 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 three smaller groups (Group A, Group B, and Group C). 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 all three prioritized lists from the small groups, IRHA was able to identify items that appeared most frequently and identified fifteen of the community's areas of greatest need:

- Activities for families
- Affordability of housing, healthy food, transportation, and healthcare
- Affordable of senior housing
- Availability of mental health services/psych beds
- Broken family units
- Drug abuse - tobacco, alcohol, heroin, meth, and prescription drugs
- Lack of diversity
- Limited access to inpatient services
- Low-quality housing
- Marketing available services

Nutrition and health cooking education
Overutilization of emergency department
Poverty
Prenatal care - smoking and drugs during pregnancy
Underemployment

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 33-question survey, addressing demographics, community issues, services, and amenities, which can be found in Appendix C. The survey was widely disseminated via internet access, community bulletins, and the local newspaper to the residents of Decatur County and the surrounding areas through inclusion on the Decatur County Memorial Hospital's website and a publically available survey posted on SurveyMonkey.com. Face-to-face polling was also implemented at the local public library, as well as at the local farmers' market on the Greensburg town square. To conduct the in-person survey, two members of the IRHA staff greeted all shoppers as they entered the store and asked for their participation in the survey. The general public was alerted to the face-to-face and online polls through DCMH newsletters and an announcement in the local newspaper. At the end of polling, there were a total of 173 online responses and 50 face-to-face responses when the surveys were completed. The majority or 67.71% of the respondents are from zip code 47240 with a fairly even distribution of individuals between the ages of 26 and 65.

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."

When asked "how do the following issues affect your community," the top five answers by all respondents were:

1. Prescription drug use – 91.08% responded either some negative effect or very negative effect
2. Methamphetamine– 91.08% responded either some negative effect or very negative effect
3. Heroin use – 90.61% responded either some negative effect or very negative effect
4. Tobacco use – 83.05% responded either some negative effect or very negative effect
5. Alcohol use – 80.38% responded either some negative effect or very negative effect

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

1. Illegal drug education – 89.86% responded either definite need or extreme need
2. Alcohol education – 85.19% responded either definite need or extreme need
3. Mental Health Services – 84.19% responded either definite need or extreme need
4. Parenting skills education – 82.49% responded either definite need or extreme need
5. Higher quality employment – 78.41% responded either definite need or extreme need

The most common responses in the open comments portion of the survey dealt with the need for more health services, including mental health, activities for families, and parenting skills. A sampling of the comments from the survey is below and the full results for the online survey, face to face survey, and the combined results of the online and face-to-face surveys can be found in Appendix C.

Open comments regarding access to health services:

“Compared to surrounding hospitals, DCMH does very little support groups, outreach services. Margaret Mary Hospital has at least 6 Dietitians and DCMH has ?1 full time. Too much emphasis on inpatient population and not enough on all the Outpatient needs in the community.”

“Mental Health Issues – more help for those in need”

“I would like to see more community support services for the community. Batesville hospital seems to be doing this well. They offer weight loss services, lymphedema therapy services, nutrition classes, and have even started offering exercise as part of weight loss. If DCMH offers these services, I have not seen them advertised in the paper or been able to find this on the website. The workshops I see offered seem to be the same old, same old!”

Open comments regarding availability of activities for families:

“I’ve lived her my entire life. We have always had to drive out of town for extended shopping (malls etc). There has been some improvement, but always room to grow. There is also a huge need for more activities for families. I’ve always driven out of town for activities for families (water parks, amusement parks, laser tag, Dave and Buster type places, nice restaurants). I know some of those activities may be too big for Greensburg, but something like that could draw more people to Greensburg.”

“Definite need for teenage activities and more for families.”

Open comments regarding parenting skills:

“First start in the home parents then all these things fall into place, we have so many programs now the people just need some good responsible teachings at home to be responsible. Teach your children well, everything isn’t free and you need to work for things and not expect it to be given to you!”

“We need better communication with our younger generation and better parenting skills for all to allow us to become a healthier and more productive citizen.”

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 DCMH community. Through the collection of health data and community input on the assets, values, and weaknesses within the hospital’s service area, the following needs were identified as being of the highest importance:

Identified Area of Needs

1. Illegal drug use education, treatment, and prevention
2. Alcohol abuse education, treatment, and prevention
3. Mental Health Services
4. Parenting skills education and services

Opportunities for Improvement

To aid Decatur County Memorial Hospital in the creation of an action plan, the IRHA has made preliminary recommendations for dealing with the defined areas of need. Please note these are opportunities for improvement and in no way to constitute actions, but rather are recommendations for further attention and discussion with DCMH staff.

Education and Prevention; illegal drug use, alcohol abuse, methamphetamine, tobacco use, obesity:

- Work with providers and social services to hold “town hall” style meetings.
 - Discuss constructive activities to develop a modified lifestyle, a culture of healthy living.
 - Ask healthcare providers to share “lack of quality of life” stories for those impacted.
 - Give examples of changed lives.
 - Discuss negative impact on families of addicts.
 - Develop and recruit parent support groups.
- Develop activity classes, Zumba, aerobics, yoga, etc.
 - Include hospital employees and give health insurance credits.
 - Work with local businesses to send employees and offer insurance credits.
 - Collaborate with local clubs for activity support; YMCA and other local fitness centers.
 - Develop and offer drug and alcohol education classes.

Mental Health Drug Treatment Facilities:

- Collaborate with mental health providers, locally or regionally, to develop programs.
- Evaluate insurance coverage with local major employers to determine what coverages are available.
- Evaluate insurance coverage with state programs for the indigent with mental health issues.
- Explore telemedicine opportunities for mental health.

Parenting and Family Support and Education:

- Work with social services to develop group classes on healthy living.
- Collaborate with local churches and civic organizations for support groups.
- Partner with staff providers to host events where they can speak about the benefits of healthy living.

Decatur County Memorial Hospital has a unique opportunity to become more focused on 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, websites, and other communication methods.