Seton Hall University and the
Healthcare Planning and Marketing Society of New Jersey

Case Study Challenge
November 9, 2019
Case Problem Introduction:

With the passage of The Patient Protection and Affordable Care Act in 2010, health systems immediately faced a federal regulatory challenge to identify, prioritize, plan, and implement programs to meet the needs of their communities and priority populations. Hospitals initiated community health needs assessments (CHNAs) to establish systematically a baseline of community need and gaps in care. Multiple methodologies and coalition options offered individual organizations to tailor their prioritization and solutions. Additionally, this statute mandated every hospital should monitor and report progress to the public over a three-year period, which required completion of a Community Health Implementation Plan (CHIP). Evidence from the past nine years suggests that health systems and community hospitals developed innovative and successful health interventions to impact their communities.

Healthcare administrators and managers quickly recognized that a predominant factor influencing their communities' quality of health fell into the category of social determinants of health (SDOH). These common influencers (housing and environment, healthy food, safety, transportation, financial resources, gainful employment) all shaped health outcomes across the continuum of care. In fact, these factors often contribute to health inequities and disparities within community populations and require targeted models and strategies to improve overall population health (PH). Healthcare managers quickly needed to address the PH question “How will we provide social risk-informed care to our communities?”

Industry Response:

The population health approach provides a very broad conceptual model for meeting the health needs of individual communities, but the impact of social determinants continues as a predominant focus in most CHNA/CHIP reports. The following AHA news brief, suggests that SDOH remain an important strategy to improve community health outcomes and addresses the importance for federal grants to aid innovative hospital initiatives.
Reps. Cheri Bustos, D-Ill., Tom Cole, R-Okla., Jim McGovern, D-Mass., and Cathy McMorris Rodgers, R-Wash., today introduced AHA-supported legislation that would provide planning grants and technical assistance to help states and communities address the social determinants of health for high-need Medicaid patients. “We know that even if quality care is available, social determinants often prevent individuals from being able to access health care or achieve health goals,” said AHA Executive Vice President Tom Nickels. “These social determinants of health often include safe and stable housing, access to healthy food, transportation, social connections, safety and environmental exposure. The Social Determinants Accelerator Act would better align resources to improve outcomes within the Medicaid program by funding planning grants for public and private sector accelerator programs, and convening an inter-agency technical advisory council on social determinants of health. Hospitals and health systems recognize that addressing social determinants of health is central to driving value and advancing overall well-being. We look forward to working with Congress in our efforts to keep our communities healthy.” The Aligning for Health coalition, whose members include the AHA, also voiced support for the legislation.

**Case Study Challenge:**
You are a master’s-level health management level consultant, hired by a not-for-profit community hospital. Your scope of work (defined in the contract) includes the following deliverables:

(a) Development of a strategy for responding to the community hospital’s CHNA that adds value to both the organization and the population served.

(b) Recommendations for branding and marketing strategies in response to CHNA, and

(c) Preparing a grant application project description and rationale for future funding from Social Determinants Accelerator Act.
Team Instructions:

OURTOWN MEMORIAL HOSPITAL CASE STUDY CHALLENGE

Step 1: Analysis

Examine the community hospital materials attached. Appendix A presents a brief hospital overview. Appendix B provides latest financial data, and Appendix C includes recent CHNA findings for the two counties that OurTown Memorial Hospital draws the majority of its patients.

Step 2: Directions and Guiding Questions

All teams must address the following:

- A strategic plan outline for prioritizing the CHNA strategy for Ourtown Memorial Hospital.

For the local community hospital, which potential factors would you consider in prioritizing and responding to the CHNA? Consider examining all the unique characteristics of the target hospital for compatibility and distinct differences with the CHNA and SDOH data. Which of their strengths of weaknesses could be of added value? Consider all relevant impacts on revenue. Does the financial analysis reveal any significant immediate or long-term concerns? Does your rationale address each of the following organizational categories: scale/scope, financial position, market position, value position? Will your strategic plan also strengthen the hospital’s community benefit position?

A marketing plan analysis with re-branding recommendations for the community hospital

Would you recommend that the Ourtown Memorial Hospital hospital adapt its current branding strategy? Will you address relationship marketing (building on strong relationships and loyalty over time)? Will you focus on positive attributes such as clinical quality, service quality, lower costs, population health prevention, and scope of service or another area? Would you recommend a cultural audit be completed? Will the communication style need to change?

- A brief grant rationale providing a proposed SDOH intervention.

Based on the targeted community hospital’s latest CHNA, select a social determinant problem to address that best meet the needs identified by the community. Describe the purpose and primary goal of the project. What type of intervention strategy(s) will you select: communication, education, health policy, environmental change, community
service, community or mobilization? How will the intervention be innovative? Will it target a specific sub-population?

Bibliography:


