

Community Health Improvement Plan

Mercy Hospital Tishomingo
Fiscal Year 2026



Your life is our life's work.





Our Mission

As the Sisters of Mercy before us,
we bring to life the healing ministry of Jesus
through our compassionate care
and exceptional service.

Our Values

Dignity
Excellence
Justice
Service
Stewardship

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Introduction

Mercy Hospital Tishomingo is a full-service hospital with 25 licensed beds, critical access facility serving Johnston County and the surrounding areas in south-central Oklahoma. The service area of Mercy Hospital Tishomingo is comprised of two counties: Johnston, and Marshall, with a population of 12,409. For the purposes of this Community Health Improvement Plan (CHIP), these two counties will define the community served by Mercy Hospital Tishomingo.

The hospital provides acute and swing bed inpatient services, 24-hour emergency department, X-ray, CT, Ultrasound, outpatient services including infusion and laboratory. Patients may connect to their health record and health teams anywhere they have access to the internet through the MyMercy patient portal.





Introduction *(continued)*

Mercy's mission is to deliver "compassionate care and exceptional service" to every community member. In dedication to this mission, our work includes the development of a Community Health Needs Assessment (CHNA) during the last year, in partnership with the Johnston County Health Department, The Office of Rural Health, and in cooperation with stakeholders throughout the community.

Mercy Hospital Tishomingo contributes to community building activities to promote the health of the communities in which they serve. Through active participation in community boards, neighborhood community meetings and involvement in community-based events, Mercy Hospital Tishomingo demonstrates its ongoing commitment to the residents it serves. These activities serve as a link to engage Mercy coworkers to look beyond the walls of the facilities in which they serve.

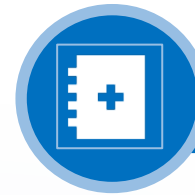
The Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) process involved review of both quantitative and qualitative data to attain the full scope of the community needs as they relate to health. This summary is documentation that Mercy Hospital Tishomingo follows IRS requirements for conduction of the CHNA and CHIP.

Introduction *(continued)*

The CHNA identified six top-priorities and of the six, **three have been chosen as health needs for the Mercy Hospital Tishomingo community**. We will strive diligently to address these needs with a Health Equity lens over the next three years:



Access to Care



Health Promotion/Education



Food Insecurity

As always, we seek to develop a rich and rewarding network of partnerships with our neighbors. We welcome any thoughts you may have on ways to achieve our goal for a healthier community.

Improvement Plan by Prioritized Health Need





Prioritized Need #1: Access to Care

GOAL 1

Increase access to health care for uninsured and at-risk persons.





Prioritized Need #1: Access to Care

Program: Community Health Worker Expansion

PROGRAM DESCRIPTION:

Community Health Workers (CHWs) serve as liaisons/links between health care and community and social services, screening for needs related to social determinants of health, and facilitating access to services and improving the quality and culture competence of care. CHWs work one-on-one with at-risk patients and community members, acting as patient advocates, assisting patients in applying for insurance, Medicaid, and financial assistance and connecting patients with community resources.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Identify uninsured and at-risk patients in need of assistance in emergency department, inpatient settings, as well as using reports and dashboards.
- Assist uninsured patients in applying for Mercy Financial Assistance, Medicaid programs, and connect to Marketplace insurance plans.
- Assist patients without an established primary care provider in establishing care with a primary care clinic or provider.
- Screen patients for needs related to social determinants of health and connect patients to community resources to meet identified needs.
- Connect patients with other community resources, including medication, as needed.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Each CHW will assist at least 20 patient per month with community and medication assistance resources.
- 80% of patients referred to CHW (within their scope) will be screened for social drivers of health (SDOH).
- 50% of new patients to each CHW without a primary care provider will establish care with a PCP at a Mercy clinic or other clinic within 6 months.
- Patients enrolling in CHW program will demonstrate reduced ED utilization by 10%.



Prioritized Need #1: Access to Care

Program: Community Health Worker

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Compensation and benefits for full-time Community Health Workers.
- Office space and indirect expenses dedicated to CHW work.

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Pontotoc County Health Department
- OK Managed Medicaid partners



Prioritized Need #2: Food Insecurity

GOAL #1

To increase access to healthy food and resources to patients identified as food insecure by Mercy Hospital and Clinics.





Prioritized Need #3: Food Insecurity

Program: Pantry Food Box Program

PROGRAM DESCRIPTION:

The Pantry Food Box Program is a partnership between Mercy Hospital Tishomingo, Mercy Clinics, and the Regional Food Bank of Oklahoma to drive improved health outcomes for patients experiencing food insecurity. Food insecurity is an emerging factor for chronic disease, and although food insecurity on its own will not relieve adults of their illness, such reductions could make chronic diseases easier to manage thus improving a patient's health and well-being

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Screen patients for food insecurity in both the hospital and clinic settings.
- Identify central area within the hospital and/or clinic to safely maintain food pantry items.
- Collaborate with internal and external partners to receive weekly/monthly food products and produce for patients.
- Connect patients with local food-related resources through referrals.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- By the end of each fiscal year, at least 75% of patients identified as food insecure will be given food pantry items and referred to the local food bank.
- Increase new patients in receiving food boxes and referrals from baseline by 20%.
- Patient connections to available food resources in the community.



Prioritized Need #3: Food Insecurity

Program: Pantry Food Box Program

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Appropriate space for food pantry.
- Partnership with local community resources.
- Indirect expenses related to organization of pantry items.

COLLABORATIVE PARTNERS:

- Mercy Hospitals
- Regional Food Bank of Oklahoma



Prioritized Need #3: Health Education/ Promotion

GOAL #1

To enhance the health literacy of patients and the community served by Mercy Tishomingo.





Prioritized Need #3: Health Education and Promotion

Program: Health Promotion Initiatives

PROGRAM DESCRIPTION:

Mercy Tishomingo is committed to improving the health literacy of its patients and surrounding community by implementing a comprehensive health education program. This initiative will focus on increasing awareness, understanding, and engagement in preventive health practices through accessible and culturally relevant health promotion activities.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Develop and implement a health promotion calendar.
- Create and distribute educational materials, including a monthly column in the local newspaper.
- Enhance caregiver capacity for health education by providing trainings to clinical and non-clinical caregivers.
- Strengthen community partnerships.
- Leverage technology and traditional media for outreach to patients and community members.
- Monitor

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Deliver consistent, evidence-based health education to patients and community members
- Increase participation in health education events by 10% each year.
- Distribute educational materials to at least 75% of patients seen in both inpatient and outpatient settings.
- At the end of the three-year cycle, reduce avoidable emergency department visits by 10% through improved health knowledge and self-management.



Prioritized Need #3: Health Education and Promotion

Program: Health Promotion Initiatives

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Appropriate training materials for caregivers.
- Partnership with local community partners.
- Indirect expenses related to organization of events.

COLLABORATIVE PARTNERS:

- Mercy Media Communications
- Johnston County Health Department
- Tishomingo Schools
- Johnston County Sentinel

Other Community Health Programs

Mercy Hospital Tishomingo conducts other community health programs not linked to a specific prioritized health need. These programs address a community health need and meet at least one of the following community benefit objectives: improve access to health care services, enhance the health of the community, advance medical or health care knowledge or relieve or reduce government burden to improve health. The need for these programs was identified through documentation of demonstrated community need, a request from a public health agency or community group, or the involvement of an unrelated, collaborative tax-exempt or government organization as partners in the activity or program carried out for the express purpose of improving community health. Although this is not an exhaustive list, many of these programs are listed on the next page.

Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Community Health Improvement Services	Community Health Fairs & Screenings	Persons served
	Blood Drives	Persons served
	Our Neighbor’s Cupboard	In-kind
Health Professions Education	Health professions student education nursing, imaging, therapy, pharmacy, medical student, lab, emergency medical technician and advanced practice nursing	Students served
Financial & In-Kind Contributions	Speaking/ Education Engagements	In-kind



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Financial & In-Kind Contributions (continued)	Community Building -Cash/In-kind Contributions	Financial Contributions/in-kind
	Community Event Sponsorships	Financial contribution
	Our Neighbor’s Cupboard	In-kind
Community Building	Coalition Building/Board Memberships	In-kind
Health Care Support Services	340B Program	Program Funding



Significant Health Needs Not Being Addressed

In any case of prioritization, there will be some areas of needs that are identified that are not chosen as a priority. Because Mercy Tishomingo has limited resources, not every community need will be addressed. Throughout the CHNA process, the following needs arose as a community concern. However, they will not be addressed as top priorities because other organizations are more appropriate to address these needs.

- Transportation
- Housing

While these needs listed will not be specifically addressed in our priorities, they will most likely be impacted through the work in our other community outreach priorities. Mercy Hospital Tishomingo is currently working on partnerships with community organizations to address these significant community needs collaboratively.



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