

Fiscal Years 2020 – 2022

Ascension Standish Hospital Community Health Implementation Strategy

Conducted: FY 2019 (July 1, 2018 – June 30, 2019)



**Ascension
Standish Hospital**

Public Version



Ascension Standish Hospital Implementation Strategy

Implementation Strategy Narrative

Overview

As part of the Patient Protection and Affordable Care Act of 2010, all not-for-profit hospitals are required to conduct a community health needs assessment (CHNA) and adopt an implementation strategy every three years. The purpose of the CHNA is to understand the health needs and priorities of those who live and work in the communities served by Ascension Standish Hospital, with the goal of addressing those needs through the development of an implementation strategy.

Ascension Standish Hospital is a not-for-profit, Critical Access Hospital offering 25 acute and critical care beds, 29 skilled nursing beds, and array of outpatient services. It is located in Standish, Michigan, and has been serving residents of Arenac County since 1961. Ascension Standish Hospital has a legacy of working with community partners and giving back to the community in many ways.

The Michigan Health Improvement Alliance (MiHIA) is a 501(c)(3) not-for-profit organization serving as a regional multi-stakeholder, community collaborative for 14-counties, including Arenac, in mid-central Michigan. Across MiHIA's region, there are a dozen different data-collection platforms utilized to assess community needs, health outcomes, and barriers to creating healthy communities resulting in duplication of collection efforts. At an individual level, thousands of dollars are spent when we could be collaborating more efficiently. Additionally, MiHIA commonly received requests from our health systems, health departments, and other partnering organizations seeking data that MiHIA had a substantial opportunity to orchestrate a regional CHNA, with a coordinating improvement plan, outlining the information and actions that each organization can take to positively affect our communities. As such, MiHIA developed a Regional Community Health Needs Assessment (RCHNA) and Regional Community Health Improvement Plan (RCHIP) in 2018. The RCHNA contains a consistent methodology and standardized process, which includes data collection/analysis, asset mapping, community input, prioritization of issues, evidence-based action plan, and measurement/evaluation process, while the RCHIP contains strategies for addressing data-driven priority health issues to improve health outcomes in MiHIA's counties.

In partnership with MiHIA and in alignment with IRS and best practice standards, Ascension Standish Hospital completed its 2019 Community Health Needs Assessment (CHNA) as an extension of MiHIA's 2019-2021 Regional Community Health Needs Assessment, thus eliminating duplication of data collection efforts, spending on assessment costs, and ensuring health system timelines were met.

The resulting CHNA is a valuable tool used to identify and prioritize Arenac County's significant health issues and to implement action plans in coordination with the broader 14-county region. The CHNA includes a significant amount of secondary data across multiple indicator categories relating to health and health factors. Primary, qualitative data was provided through a community health needs assessment survey and focus groups within the county. With the results of the data taken into consideration, the 2019 CHNA has identified two health focus areas of alignment for Arenac County but also the broader-region. These focus areas are based on the magnitude of the issues affecting the community and region, input from community members and key stakeholders, including persons with expertise in public health, as well as trending of the most current data.



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Needs That Will Be Addressed

Ascension Standish Hospital will be addressing the following health focus areas:

1. Obesity-Related Adverse Health Conditions
2. Adverse Childhood Experiences (ACES)
3. Access to Healthcare
4. Human Trafficking

Needs That Will Not Be Addressed

Ascension Standish will not directly address the following priority health needs identified within the 2019 CHNA:

1. Mental Health
2. Lack of Places/Opportunities for Affordable Physical Activity
3. Teen Pregnancy
4. Chronic Pain
5. Drug Abuse
6. Chronic Disease
7. Tobacco Product Use
8. Hypertension
9. Lack of Healthcare Providers
10. Poverty
11. Lack of Transportation Services
12. High Cost of Healthcare.

While critically important to overall community health, these specific priorities did not meet internally determined criteria that prioritized needs by either continuing or expanding current programs, services and initiatives to steward resources and achieve the greatest community impact. For the areas not chosen, there are other service providers in the community better resourced to address these priorities. Ascension Standish will work collaboratively with these organizations as appropriate to ensure optimal service coordination and utilization.



Prioritized Need #1: Obesity-Related Adverse Health Conditions (AHCS)

GOAL: Reduce obesity related adverse health conditions in Arenac County residents.

Action Plan

STRATEGY 1: Reduce A1c levels for individuals at risk of developing Type 2 diabetes by referring patients to a virtual Diabetes Prevention Program (DPP) or an in-patient Diabetes Self-Management Education (DSME) program.

BACKGROUND INFORMATION:

- **Target Population:** Adults at risk of developing Type 2 diabetes.
- **How does this strategy address the social determinants of health, health disparities and challenges of the underserved:** by providing virtual and in-person diabetes education options to those at risk of developing Type 2 diabetes. According to the County Health Rankings, 2019, 33 percent of Arenac County residents are considered 'obese'. This is compared to the state obesity rate of 32 percent. Diabetes is also listed as one of the top ten leading causes of death in Arenac County (2017).
- **Strategy Source:** Diabetes Prevention Program (DPP) and Diabetes Self-Management Education (DSME) are evidence based: <https://www.cdc.gov/diabetes/prevention/index.html>, and also included in Michigan's 4x4 Plan and Healthy People 2020.

RESOURCES:

- Hospital, MiHIA, physicians, program budget, materials
- Strategy/actions built into annual budgeting/ISOFP: Yes

COLLABORATION:

- Michigan Health Improvement Alliance (MiHIA)
- Good Measures
- Ascension Standish Medical Staff
- Ascension Medical Group (AMG)

ACTIONS:

1. By 10/2019, schedule a meeting with Good Measures to finalize details about the virtual Diabetes Prevention Program.
2. By 12/2019, inform the Ascension Standish Medical Staff about the virtual Diabetes Prevention Program (DPP) and Diabetes Self-Management Education (DSME) program. Provide DPP toolkits to meeting attendees.
3. By 01/2020, meet with Ascension Medical Group leadership to discuss virtual DPP and DSME program. Provide DPP toolkits to meeting attendees.
4. By 02/2020, educate staff at Ascension Standish Family Medicine about DPP and DSME program and how to refer patients.
5. Evaluate virtual DPP referrals, number of classes and participation rate on an annual basis.
6. Evaluate DSME program referrals and participation rate on an annual basis.



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STRATEGY 1: Reduce A1c levels for individuals at risk of developing Type 2 diabetes by referring patients to a virtual Diabetes Prevention Program (DPP) or an in-patient Diabetes Self-Management Education (DSME) program.

ANTICIPATED IMPACT:

- I. By December 31, 2020, a minimum of 4 in-person Diabetes Self-Management Education classes will be held at Ascension Standish Hospital.
- II. By December 31, 2021, a minimum of 25 individuals will have completed the virtual Diabetes Prevention Program.

Alignment with Local, State & National Priorities (Long-Term Outcomes for Prioritized Need #1)

| OBJECTIVE: | LOCAL / COMMUNITY PLAN: | STATE PLAN: | “HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN): |
|-------------------|---|---|--|
| I, II | Increase educational opportunities for those at risk of Type 2 diabetes. <i>(Ascension Standish)</i> | The Michigan Health and Wellness 4x4 Plan recommends the practice of four healthy behaviors (healthy diet, regular exercise, annual physical exam, avoid all tobacco use) and the control of four health measures (body mass index, blood pressure, cholesterol level, blood sugar/glucose level), with the primary goal of reducing obesity which reduces the subsequent development of chronic illnesses. | Healthy People 2020 D-2030-04: Reduce the proportion of adults with diagnosed diabetes with an A1c value greater than 9 percent. |



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Prioritized Need #2: Adverse Childhood Experiences (ACES)

GOAL: Increase awareness of Adverse Childhood Experiences (ACES) in Arenac County.

Action Plan

STRATEGY 1: Provide trauma informed care awareness, education and training to Ascension Standish Hospital associates.

BACKGROUND INFORMATION:

- **Target Population:** Ascension Standish Hospital healthcare professionals (clinical and non-clinical).
- **How does this strategy address the social determinants of health, health disparities and challenges of the underserved:** Adverse Childhood Experiences (ACEs) is the term given to describe all types of abuse, neglect, and other traumatic experiences that occur to individuals under the age of 18. The landmark Kaiser ACE Study examined the relationships between these experiences during childhood and reduced health and well-being later in life. Results showed dramatic links between adverse childhood experiences and risky behavior, psychological issues, serious illness and the leading causes of death.
- **Strategy Source:** ACE / Resilience, Prevention Institute; Boston Children’s Hospital; Brazelton Touchpoints Center; Building Communities of Resilience, George Washington University Milken School of Public Health; Harvard University

RESOURCES:

- Hospital, collaborative partners, budget, materials
- Strategy/actions built into annual budgeting/ISOFP: Yes

COLLABORATION:

- Ascension Standish Hospital
- Michigan Health Improvement Alliance (MiHIA)
- Bay Arenac Great Start Collaborative

ACTIONS:

1. By 12/2019, identify community partners to assist with trauma informed care and ACES training.
2. By 06/2020, Ascension Standish Hospital associate(s) will be trained as community subject matter experts/partners on ACES.
3. By 12/2020, create trauma informed care curriculum for online module and in-person education.
4. By 06/2021, Ascension Standish Hospital associates will have received trauma informed care training via online education module or in-person education.
5. By 06/2021, the Universal Screening tool will be built into the electronic health record.
6. By 07/2021, the Universal Screening will be implemented at Ascension Standish Family Medicine.



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STRATEGY 1: Provide trauma informed care awareness, education and training to Ascension Standish Hospital associates.

ANTICIPATED IMPACT:

- I. By June 30, 2021, 90 percent of Ascension Standish associates will have completed the trauma informed care / ACEs educational module.
- II. By December 31, 2021, the ACEs Universal Screening is utilized for 50 percent of new patients at Ascension Standish Family Medicine.

Alignment with Local, State & National Priorities (Long-Term Outcomes for Prioritized Need #2)

| OBJECTIVE: | LOCAL / COMMUNITY PLAN: | STATE PLAN: | "HEALTHY PEOPLE 2020" (or OTHER NATIONAL PLAN): |
|------------|--|---|---|
| I, II | Build the capacity within the MiHIA region to create a trauma-sensitive region by December 31, 2021. <i>(Michigan Health Improvement Alliance – MiHIA)</i> | Reduce disparities in mental health outcomes. <i>(Michigan Department of Mental Health)</i> Michigan ACE Initiative https://miace.org | ACES and Trauma Informed Care research has been documented by the following agencies: <ul style="list-style-type: none"> • American Academy of Pediatrics https://www.aap.org/en-us/Documents/ttb_aces_consequences.pdf • U.S. Centers for Disease Control and Prevention (CDC) https://www.cdc.gov/violenceprevention/cildabuseandneglect/acestudy/index.html • National Committee on State Legislatures http://www.ncsl.org/Portals/1/HTML_Large_Reports/ACEs_2018_32691.pdf |



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Prioritized Need #3: Healthcare Access

GOAL: Increase Access to Healthcare Services in Arenac County

Action Plan

STRATEGY 1: Implement a TeleBehavioral Health Clinic at Ascension Standish Hospital.

BACKGROUND INFORMATION:

- **Target Population:** Arenac County residents seeking behavioral health services.
- **How does this strategy address the social determinants of health, health disparities and challenges of the underserved:** Individuals living in rural communities have limited access to healthcare services, including behavioral health services. According to the County Health Rankings, 2019, Arenac County had higher Poor Mental Health Days (4.5) than the state of Michigan.
- **Source Strategy:** American Telemedicine Association

RESOURCES:

- Ascension Standish Hospital, Ascension St. John Providence TeleHealth Program, Ascension Information Services, budget, materials
- Strategy/actions built into annual budgeting/ISOFP: Yes

COLLABORATION:

- Ascension Standish Hospital providers and clinical team
- Ascension St. John Providence TeleHealth Program
- Ascension AIS
- Strategy/actions built into annual budgeting/ISOFP: Yes

ACTIONS:

1. By 01/2021, schedule initial planning meeting with partners.
2. By 12/2021, information technology and equipment are operational.
3. By 02/2022, physicians are credentialed.
4. By 04/2022, marketing to physicians, associates and community begins.
5. By 07/2022, TeleBehavioral Health Clinic opens on a monthly basis.

ANTICIPATED IMPACT:

- I. By July 2022, a TeleBehavioral Health Clinic will be available at Ascension Standish Hospital on a monthly basis treating a minimum of five patients each month.



Alignment with Local, State & National Priorities (Long-Term Outcomes for Prioritized Need #3)

| OBJECTIVE: | LOCAL / COMMUNITY PLAN: | STATE PLAN: | “HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN): |
|-------------------|---|---|--|
| I | Increase access to healthcare services for Arenac County residents. <i>(Ascension Standish)</i> | Reduce disparities in mental health outcomes. <i>(Michigan Department of Mental Health)</i> | Healthy People 2020: <ul style="list-style-type: none"> • MHMD-4 Reduce the proportion of persons who experience major depressive episodes (MDEs) • MHMD-9 Increase the proportion of adults with mental health disorders who receive treatment. |



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Prioritized Need #4: Human Trafficking

GOAL: Increase Awareness about Human Trafficking in Arenac County.

Action Plan

STRATEGY 1: Host a Human Trafficking Awareness Event for Arenac County Residents.

BACKGROUND INFORMATION:

- **Target Population:** Arenac County residents.
- **How does this strategy address the social determinants of health, health disparities and challenges of the underserved:** As a major public health issue, human trafficking affects individuals, families, and communities. While it can impact anyone, some populations are more vulnerable to human trafficking due to violence, stigma, and disconnection. By partnering with community agencies and educating communities, the risk of human trafficking can be reduced.
- **Strategy Source:** U.S. Department of Health and Human Services, U.S. Department of Justice, and United Nations Office on Drugs and Crimes to address human trafficking.

RESOURCES:

- Ascension Standish Hospital, community partners, budget, materials
- Strategy/actions built into annual budgeting/ISOFP: Yes

COLLABORATION:

- Ascension Standish Hospital
- Law Enforcement
- Community Service Agencies

ACTIONS:

1. By 01/2020, schedule a meeting with community partners to plan for a Human Trafficking Awareness Event.
2. By 06/2020, establish event logistics (date, time, location).
3. By 08/2020, establish event itinerary.
4. By 09/2020, begin marketing the event.
5. By 12/2020, hold human trafficking awareness event.

ANTICIPATED IMPACT:

- I. By December 30, 2020, a Human Trafficking Awareness Event will be held for Arenac County residents with at least 50 people in attendance.



Alignment with Local, State & National Priorities (Long-Term Outcomes for Prioritized Need #4)

| OBJECTIVE: | LOCAL / COMMUNITY PLAN: | STATE PLAN: | “HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN): |
|-------------------|---|--|--|
| I | Mid-Michigan Human Trafficking Task Force was developed in 2012 to enhance community awareness of the dynamics of human trafficking, and to develop responses to rescue and restore survivors of trafficking. | Michigan Human Trafficking Task Force engages innumerable agencies to work together for the collaborative impact of awareness, support of prosecution of offenders, and identifying victims and putting forth every effort to assist them to become survivors. | <p>U.S. Department of Justice In accordance with the Justice for Victims of Trafficking Act, all United States Attorneys’ Offices (USAOs) have developed district-specific strategies to coordinate the identification of victims and the investigation and prosecution of human trafficking crimes. The strategies include methods to: incorporate human trafficking survivors into task forces, trainings, and outreach events as appropriate; develop district-specific resource materials about victim identification; conduct community outreach; and ensure that USAOs have appropriate victim assistance protocols in place to assist victims of human trafficking.</p> <ul style="list-style-type: none"> • https://www.justice.gov/humantrafficking/page/file/922791/download |