

Genesys Health System Implementation Strategy

Implementation Strategy Narrative

Overview

Genesys Health System is a group of affiliated medical campuses, outpatient centers, primary care locations and ancillary health care organizations with a mission and history of improving our community's health for over 90 years. As a leading health care provider in Mid-Michigan, Genesys is anchored by a 21st century, 400 bed inpatient facility - Genesys Regional Medical Center at Health Park –built both clinically and architecturally around a patient-centered care philosophy with over 21,000 patient discharges in 2015. A member of Ascension, the largest non-profit health system in the U.S. and the world's largest Catholic health system, Genesys is dedicated to healthcare transformation by providing the highest quality care to all, with special attention to those who are poor and vulnerable. In 2015, Genesys delivered over \$34 Million in care of persons who are poor and in community benefit. The Genesys regionally integrated health care delivery system is comprised of a complete continuum of care servicing Genesee, Shiawassee, Lapeer, Oakland, Livingston and Tuscola counties. Over 160 family practice physicians in the Genesys network serve as health advocates through the provision of primary “medical home” care. Committed to the medical, economic and spiritual vitality of the region, Genesys is one of the area's largest employers with over 3,500 employees who contribute to the regional healthcare economy within a population health model of care to improve health outcomes, enhance the patient and provider experience of care, and lower healthcare costs.

All three Genesee County Health Systems - Genesys Health System, Hurley Medical Center, and McLaren Flint, have come together in partnership with the Greater Flint Health Coalition (GFHC) and a collection of multi-sector and community stakeholders to complete a joint Community Health Needs Assessment (CHNA) for Genesee County. Information regarding Genesee County's most important health needs and issues, as well as their prioritization, are based upon information provided by residents, health care consumers, community leaders, health care professionals, and multi-sector representatives, who were interviewed, participated in meetings of the Greater Flint Health Coalition's network of community organizations and partners, or responded to a community-wide survey of individuals who live and/or work in Genesee County. These findings are also informed by the Greater Flint Health Coalition's comprehensive Community Data Scorecard, a collection of over 400 metrics designed to measure health status and chronic disease priorities, social and economic factors impacting residents, and healthcare delivery system access and utilization trends experienced in the region.

CHNA identified health needs for 2016 were prioritized based upon potential long term health outcomes, ability for a health system to have an impact on addressing the need, current priorities and programs, and effectiveness of existing programs. The prioritization process involved data review from the GFHC's Data Review Subcommittee and Cost & Resource Planning Committee. Ten priority health needs for Flint/Genesee County were selected:

1. Access to Clean & Safe Drinking Water
2. Infant / Child Health & Development
3. Obesity / Overweight & Healthy Lifestyle
4. Effective Care Delivery for an Aging Population
5. Mental Health
6. Substance Use
7. Education & Employment
8. Food Insecurity
9. Health Care Access
10. Community Safety

Genesys leadership in collaboration with the Genesys CHNA Priorities Steering Committee then decided to prioritize and address six out of the ten community needs:

Prioritized Needs

Priority 1: Access to Clean & Safe Drinking Water

Rationale: Flint, Genesee County's urban core, has had its drinking water contaminated with lead and other toxins. The contamination occurred when the city switched its water supply as a cost saving measure from the Detroit system to Flint River water, which was more corrosive than Detroit water and caused lead to leach from the pipes that connect much of Flint's aging infrastructure to city homes. Research conducted by a Hurley Medical Center pediatrician discovered that the incidence of elevated blood levels in children residing in the city of Flint increased from 2.4% to 4.9% after the switch. When asked in the community health needs assessment survey "what do you think are the three most important environmental factors that affect health in our community?" 86.95% of respondents choose clean and safe drinking water from the list of available options. The biggest concern is for the health and wellbeing of the Flint residents, specifically women, children, and the elderly who are affected the most from the lead exposure. The true magnitude of residents' exposure to lead in the water will never be known since lead has a half-life in blood of only 28 days (approximated), and the interval between warnings not to drink the water and calls for lead testing was greater. Lead is a potent neurotoxin, and childhood lead poisoning has an impact on many developmental and biological processes, most notably intelligence, behavior, and overall life achievement.

Strategy: Genesys recognizes the need to support our community through aligning our efforts with the recommendations of the Flint Water Crisis/Health/Medical Intervention Strategy Response Plan via the Greater Flint Health Coalition and Hurley Children's Hospital. Genesys will provide lead mitigation nutrition information and services through currently existing programs: Centering Pregnancy, Lactation services, Diabetes/Gestational Diabetes self-management education, medical nutrition therapy education, and cardiac and pulmonary rehabilitation.

Priority 2: Infant / Child Health & Development

Rationale: According to the Annie E. Casey Foundation's *Kids Count Data Book*, Genesee County ranks 79th out of 81 Michigan counties for trends in Child Health & Well-being. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Genesee County community has a higher child poverty rate than the state or nation as a whole. In Genesee County trends observed regarding Medicaid insured children (compared to their commercially insured counterparts) have: higher rates of acute care admissions; higher rates of acute care length of stays (45 – 78 days longer); significantly higher rates of emergency department (ED) use for asthma/slightly lower treatment rates of use of appropriate asthma medication; higher rates of appropriate and "inappropriate" use of the ED; lower rates of weight assessment and counseling for nutrition and physical activity; and lower rates of childhood immunizations; lower rates of appropriate testing for children with pharyngitis; and lower rates of utilization of well-child visits in the first 15 months of life.

Strategy: Develop and implement an evidence-based standard of care for infants and children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost. Genesys has resources for continued and expanded infant and child health programming in our community through the Children's Healthcare Access Program (CHAP), Centering Pregnancy, Lactation Services, Commit to Healthy Hearts, and Student Heart Screenings.

Priority 3: Obesity / Overweight & Healthy Lifestyle

Rationale: Overall, Genesee County's health behaviors are some of the poorest in the state ranking 77th out of 83 Michigan counties for health behaviors. Community residents lack regular physical activity and healthy eating (dining) practices. Genesee County's obesity rate (35.7%) is significantly higher than state

(31.1%) and national (26.59%) averages with the combined obesity and overweight rate being 70.4%. Flint / Genesee County’s physical environment presents many challenges for residents attempting to incorporate physical activity into their daily routines including neighborhood blight, crime, and limited recreation and fitness facilities. Poor health behaviors are associated with high rates of chronic diseases and conditions like diabetes mellitus, high cholesterol, and heart disease. The prevalence of diabetes mellitus continues to rise for both adults and children in Genesee County. Genesee County’s diabetes prevalence (11.6%) is higher than state (9.48%) and national (9.11%) averages. Diabetes is a significant health status indicator and high cost disease.

Strategy: Serve as a vital presence in the community to support physical activity and access to and consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs. Genesys will address obesity/overweight and support healthy lifestyles among adults and children through our established and dedicated Diabetes programs, employee participation in the GFHC Commit to Fit Initiative, and Genesys Athletic Club Community Wellness programming.

Priority 4: Effective Care Delivery for an Aging Population

Rationale: Genesee County’s population is aging. The median age of the population has increased 13.71% in the past 13 years, with individuals aged 55 years and older representing a disproportionately high amount of the total population. The percentage of residents 65 years and older has increased 31.03% during the same time period from 11.6% in 2000 to 15.2% in 2013. Older residents as a population have an increased need for social supports and health care services. Local data and studies indicate that Flint / Genesee County residents are commonly not prepared for health care decision-making at the end of life.

Strategy: Genesys is committed to caring for the aging and elderly populations of Genesee County through our existing Program for the All-Inclusive Care of the Elderly (PACE) and Advance Care Planning programs.

Priority 5: Food Insecurity

Rationale: Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food. Flint / Genesee County’s food insecurity rate (18.02%) is higher than state (16.41%) and national (15.21%) averages. While 82% of county residents report they do not consume an adequate amount of fruits and vegetables, for those living in Flint’s food desert, the lack of access prohibits healthy choices. The city of Flint, population 99,002, has only one chain grocery store compared to 54 liquor stores for food access within city limits and only 21% of sampled convenience stores offering fresh produce. Low income residents are disproportionately affected regarding food access. The lack of adequate transportation is one large contributing factor for Flint residents being able to access healthy food.

Strategy: Our goal is to serve as a vital presence in the community to support access to and consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs. We will leverage our health park campus resources to provide economic opportunity for women farmers and support access to healthy food in the community through collaboration with the Michigan Food & Farming Systems (MIFFS) Women in Agriculture program; and serve in a key leadership role in the Regional Food System Navigation (RFSN) initiative, a Community Foundation of Greater Flint –led effort to address access to and consumption of healthy food.

Priority 6: Health Care Access

Rationale: Genesys will establish an environment to build the capacity to provide responsive services to Veterans at the right time and in the right place that compliment other Veterans initiatives and leverage emerging Veterans resources. The Genesee County Veteran population is 29,204. Of the Veterans who reside in Genesee County, almost half (14,527) are age 65 and older. Michigan is leaving \$800 Million on the table in unclaimed financial benefits for Veterans. Michigan ranks 47th out of 53 states and territories for

average dollars spent on Veterans. There is a slow and difficult enrollment process for services and significant service gaps as the number of Veterans in the state continues to grow.

Strategy: Genesys Health System will partner in supporting Veterans Affairs programs to improve services to Veterans that are aligned with population health care delivery and better health, improved patient experience and reduced cost through the Veterans Choice Program and the Genesys Presumptive Illness program designed to access Veterans to health care services and link Veterans to the financial benefits they deserve.

Needs That Will Not Be Addressed

Genesys Health System will not directly address the following priority health needs identified within the 2016 CHNA: Mental Health, Substance Abuse, Education & Employment, and Community Safety. While critically important to overall community health, these specific priorities did not meet internally determined criteria that prioritized addressing needs by either continuing or expanding current programs, services and initiatives to steward resources and achieve the greatest community impact. For the four areas not chosen, there are other service providers in the community better resourced to address these priorities. Genesys will work collaboratively with these organizations as appropriate to ensure optimal service coordination and utilization.

Summary of Implementation Strategy

An action plan follows for each prioritized need, including the resources, proposed actions, planned collaboration, and anticipated impact of each strategy. See attached action plans for each priority area.

Prioritized Need 1: Access to Clean & Safe Drinking Water

GOAL: Serve as a vital presence in the community to support the recommendations of the Flint Water Crisis Health/Medical Intervention Strategy Response Plan via the Greater Flint Health Coalition and Hurley Children’s Hospital.

Action Plan: Support evidence-based education, nutrition, and medical/health interventions to optimize children’s health, for children with toxic stress exposure to lead.

WATER STRATEGY 1: Provide lead mitigation information and services and incorporate data tracking and information coordination related to lead exposure consistent with the Flint water crisis plan.

BACKGROUND:

- **Target Population:** All potentially exposed children who lived in the City of Flint from April 2014 to present, especially those with toxic stress exposure and those age 6 and under. There are 8,000-9,000 children under the age of 6 years old.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Flint, Genesee County’s urban core, has had its drinking water contaminated with lead and other toxins. The true magnitude of residents’ exposure to lead in the water will never be known since lead has a half-life in blood of only 28 days (approximated), and the interval between warnings not to drink the water and calls for lead testing was greater. Lead is a potent neurotoxin, and childhood lead poisoning has an impact on many developmental and biological processes, most notably intelligence, behavior, and overall life achievement. Lead in drinking water disproportionately affects developmentally vulnerable children and pregnant mothers. Studies have shown that children can absorb 40% to 50% of an oral dose of water-soluble lead compared with 3% to 10% for adults. Further research has demonstrated that for every 1-ppb increase in water lead, blood lead increases 35% in children aged 1 to 5 years. With the water supply still unsafe to drink, water is the number one priority.
- **Strategy Source:** Research led by a Flint pediatrician at Hurley Medical Center and released in September 2015 by a group of leaders that included Hurley Medical Center, Mott Children’s Health Center, Greater Flint Health Coalition, and Genesee County Medical Society, found the incidence of elevated blood lead levels in children residing in the City of Flint increased from 2.4% to 4.9% after the water source change. Flint neighborhoods with the highest lead levels experienced a 6.6% increase while no significant change was seen in children residing outside the city. It wasn’t until October 1, 2015 that government officials instructed Flint residents to stop drinking the water and January 5, 2016 for Michigan’s governor to declare a state of emergency. As of the completion of this CHNA (April 2016), the water in Flint remains unsafe to drink.

RESOURCES:

- Flint Water Crisis Health/Medical Intervention Strategy Response Plan

COLLABORATION:

- GFHC, Hurley Medical Center, Health & Human Service organizations

WATER STRATEGY 1: Provide lead mitigation information and services and incorporate data tracking and information coordination related to lead exposure consistent with the Flint water crisis plan.

ACTIONS:

1. Genesys will provide lead mitigation nutrition information and services through currently existing programs: Centering Pregnancy, Lactation services, Diabetes/Gestational Diabetes self-management education, medical nutrition therapy education, and cardiac and pulmonary rehabilitation.
2. Genesys in coordination with Genesys PHO will provide education to primary care providers regarding toxic stress and aggressive long term neurodevelopmental screening through internal communication processes (physician publications, Congdon Lecture, medical staff meeting, etc.)
3. Genesys will support data tracking and information coordination related to lead exposure consistent with the Flint water crisis plan, including the longitudinal health record and CHAP.
4. Serve as a participant on the Flint Recovery Group Community Partners.

ANTICIPATED IMPACT:

To be determined as the Flint Water Crisis Health/Medical Intervention Strategy Response Plan is implemented.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition		Safe Drinking Water Act: The Environmental Protection Agency (EPA) identifies contaminants to regulate in drinking water. The Agency sets regulatory limits for the amounts of certain contaminants in water provided by public water systems. These contaminant standards are required by the Safe Drinking Water Act (SDWA) . EPA protects public health by implementing the SDWA provisions while working with states, tribes, and many other partners.
	Flint Water Crisis Health/Medical Intervention Strategy Response Plan via the Greater Flint Health Coalition and Hurley Children’s Hospital.		

Prioritized Need 2: Infant/Child Health & Development

GOAL: Develop and implement an evidence-based standard of care for infants and children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: CHAP – Children’s Healthcare Access Program

CHAP STRATEGY 1: In collaboration with GFHC CHAP, engage pediatric mental health services in the community.

BACKGROUND:

- **Target Population:** Pediatric population 18 years and under who reside in Genesee County
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children are insured by Medicaid and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms. Low birth weight measures in Genesee County are higher than both state and national percentages. Mental health is a primary concern of the community as a reported top health concern on the CHNA survey and increasing due to trauma experience in the Flint water crisis. Depression often has a great impact on health behaviors and health outcomes. (Genesee Health System is leading screening efforts to address related development delays).
- **Strategy Source:** CHAP is an evidence-based population approach to improving health outcomes, raising the quality of care, and reducing healthcare costs for children on Medicaid. A primary goal of CHAP is to advocate for system-level reform.
http://greatstartforkids.org/sites/default/files/file/2012%20Great%20Start%20Conference/3_20_12%20Session%20%20CHAP%20critical%20elements.pdf; 2016 Genesee County Community Health Needs Assessment Report. gfhc.org

RESOURCES:

- List of resources: Integrated Mental Health Services with primary pediatric care (MSU pediatric psychiatry; UM grant for pediatric mental health specialists via CHAP)

COLLABORATION:

- GFHC; MSU: University of Michigan: Medicaid Providers (HMC, GRMC, Dr. Akpinar, Dr. Delrosario, Dr. N. Ali, Hamilton FQHC); Medicaid Payers (HP/HAP, Molina); McLaren Health Plan

ACTIONS:

1. Utilizing local providers (MCHC), MSU and UM resources, work collaboratively through GFHC/CHAP to secure Pediatric Mental Health Services in the community in a non-proprietary fashion
2. Establish a standard referral system for pediatric mental health services via CHAP
3. When possible, embed pediatric mental health services in pediatric primary care practices

ANTICIPATED IMPACT:

Short Term

- I. Pediatric mental health referrals will increase by 5% annually

Medium Term

- II. Pediatric access/participation in mental health services will increase by 5% annually

Long Term

- III. Optimal pediatric mental health services will be embedded into Genesee County

CHAP STRATEGY 2: Improve Physician Engagement and referral of pediatric patients to CHAP.

BACKGROUND:

- **Target Population:** Pediatric population 18 years and under who reside in Genesee County.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children are insured by Medicaid and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms. Low birth rate measures in Genesee County are higher than both state and national percentages. Mental health is a primary concern of the community as a reported top health concern on the CHNA survey.
- **Strategy Source:** CHAP is a population-based approach to improving health outcomes, raising the quality of care, and reducing healthcare costs for children on Medicaid. A primary goal of CHAP is to advocate for system-level reform. 2016 Joint Community Health Needs Assessment Report. http://greatstartforkids.org/sites/default/files/file/2012%20Great%20Start%20Conference/3_20_12%20Session%202%20CHAP%20critical%20elements.pdf; Genesee County Community Health Needs Assessment Report. gfhc.org

CHAP STRATEGY 2: Improve Physician Engagement and referral of pediatric patients to CHAP.
RESOURCES: <ul style="list-style-type: none"> Engaged/committed physicians – opportunities for collaboration.
COLLABORATION: <ul style="list-style-type: none"> GFHC, GRMC, Genesys Downtown Flint and East Flint Family Health Centers.
ACTIONS: <ol style="list-style-type: none"> Increase Genesys CHAP physician referrals
ANTICIPATED IMPACT: <p>Short term</p> <ol style="list-style-type: none"> Genesys CHAP Physician Referrals will increase by 10% annually. <p>Medium and Long Term</p> <ol style="list-style-type: none"> Genesys pediatric receipt of health services will increase by 5% annually.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition	Michigan CHAP Model of Care	Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost
	CHAP Children’s Healthcare Access Program		HP 2020: Mental Health and Mental Disorders: Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral; Increase the proportion of children with mental health problems who receive treatment; Emerging issue is people in communities with large-scale psychological trauma caused by natural disasters (Flint Water Crisis)

Prioritized Need 2: Infant & Child Health

GOAL: Develop and implement an evidence-based standard of care for infants and children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: CenteringPregnancy (CP)

CP STRATEGY 1: Evaluate the CenteringPregnancy Program’s feasibility and sustainability

BACKGROUND:

- **Target Population:** Pregnant women and their support persons who seek care at the Genesys Downtown Flint Family Health Center or are referred from PHO and Genesee County Health Department providers.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children are insured by Medicaid and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms. Low birth weight measures in Genesee County are higher than both state and national percentages with the Genesee County at 10.3% compared to Michigan at 8.4% and 8.2% in the nation.
- **Strategy Source:** CenteringPregnancy is a supportive, educational program for expectant parents and support people to learn about their pregnancy, their babies and themselves at the same time they are receiving prenatal care. It is an evidence-based, culturally appropriate model of group health care delivery with 3 components: health care assessment, education, and support, provided in a group facilitated by a credentialed health provider.
<https://www.centeringhealthcare.org/what-we-do/centering-pregnancy>

RESOURCES:

- List of resources: GRMC Downtown Family Clinic leaders/Physicians/Residents; CenteringPregnancy steering committee, AMG Dyad

COLLABORATION:

- Lean Practitioners, Community referral sources such as PHO; Genesee County Health Department

ACTIONS:

1. Collect and summarize current CP implementation and outcome data to support evaluation of program with key stakeholders including clinical staff and patients

CP STRATEGY 1: Evaluate the CenteringPregnancy Program’s feasibility and sustainability

2. Upon evaluation of program data and potential for alignment with health care transformation objectives (population health delivery, fee-for-value), make a recommendation for program continuation or termination.
3. If program continuation is recommended, improve program promotion materials and practices for internal stakeholders and external referral sources.
4. Embed CP referral process, group care implementation, and data collection practices into standard operating procedures at the downtown OB clinic.

ANTICIPATED IMPACT:

Short term

- I. Make program continuation decision based on key stakeholder input.

Medium Term

- II. If program is discontinued communicate to appropriate Genesys leadership to receive approval for decision.

Long Term

- III. If program continuation is recommended, embed program implementation structure into standard OB clinic procedures. Patient outcomes will show improvement with increased patient knowledge, increased breastfeeding rates, improved patient satisfaction, provider satisfaction and decreased low birthrate.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition	MDHHS plan/priority to reduce infant mortality. http://www.michigan.gov/infantmortality/	Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost
			Centering Healthcare Institute – CenteringPregnancy Model of Care. https://www.centeringhealthcare.org/what-we-do/centering-pregnancy

Prioritized Need 2: Infant & Child Health

GOAL: Develop and implement an evidence-based standard of care for infants and children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: Lactation

LACTATION STRATEGY 1: Obtain Baby-Friendly Designation/Practices to improve breastfeeding outcomes and improve the health of infants and mothers.

BACKGROUND:

- **Target Population:** New mothers and newborn infants who deliver at GRMC and throughout the region and their support persons.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms. One of the most highly effective preventive measures a mother can take to protect the health of her infant is to breastfeed. However, in the United States, although most mothers hope to breastfeed, and 79% of babies start out being breastfed, only 19% are exclusively breastfed 6 months later. Additionally, rates are significantly lower for African-American infants.
- **Strategy Source: Baby-Friendly USA - <https://www.babyfriendlyusa.org/find-facilities> Baby-Friendly USA, Inc. is the accrediting body for the Baby-Friendly Hospital Initiative in the United States.** Every hospital that attains the Baby-Friendly designation moves us closer to meeting important public health goals of increasing the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies. In 2007, only 2.9% of United States births occurred in Baby-Friendly designated facilities. The Healthy People 2020 goal is 8.1%.

RESOURCES:

- Baby-Friendly USA Guidelines/Assessment tools; Healthcare providers – Physicians , Lactation Consultants, Women & Children’s Administrative staff; Ascension/St. John Providence Baby Friendly experts including Dr. Schrek (Pediatrician and Lactation Consultant); AMG Dyad.

COLLABORATION:

- Genesys Baby Friendly Committee (obstetrician, nurse manager, receptionist, social worker, lactation consultant, postnatal healthcare assistant, pharmacist, pediatrician, dietician, anesthesiologist); Community Partners including the Genesee County Breastfeeding Coalition and

LACTATION STRATEGY 1: Obtain Baby-Friendly Designation/Practices to improve breastfeeding outcomes and improve the health of infants and mothers.

the Michigan Breastfeeding Network; Healthcare Providers.

ACTIONS:

1. Convene stakeholder baby-friendly committee to determine feasibility/plan for becoming a baby friendly designated program via BFUSA assessment process/tool.
2. Utilizing the BFUSA Logic Model and the 4-D Pathway -- Discovery, Development, Dissemination, Designation -- coordinate/implement the 10 steps required to achieve baby-friendly designation
3. Achieve Baby-Friendly Designation
4. Analyze ongoing data/outcomes via m-PINC scores

ANTICIPATED IMPACT:

Short term

- I. BFUSA Discovery phase will be implemented (CEO Support, Self-Assessment)

Medium term

- II. The BFUSA Development Phase will be completed (Committee, Policy, Data collection plan) and BFUSA Dissemination phase will be completed (Staff training, Data Collection)

Long term

- III. BFSUA Designation Phase will be completed (QI Plan, Readiness Review/Assessment, BF Designation).
- IV. Breastfeeding rates will increase by 10% and an increased percentage of pediatrician breast feeding recommendations will align with baby friendly breast feeding policies and recommended practices.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition – Infant/Child Health & Development		Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost
			Healthy People 2020: Maternal, Infant & Child Health: Increase the proportion of infants who are breastfed exclusively through 3 months; Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and babies.
			CDC: Breastfeeding promotion for physicians http://www.cdc.gov/breastfeeding/pdf/actionguides/doctors_in_action.pdf

Prioritized Need 2: Infant/Child Health & Development

GOAL: Develop and implement an evidence-based standard of care for infants & children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: Commit to Healthy Hearts (CHH)

CHH STRATEGY 1: Improve participation rates and program reach via a systemic referral process to reach Genesys PHO PCPs to refer qualifying pediatric patients to the CHH Primary Prevention Intervention Program (FitKids360).

BACKGROUND INFORMATION:

- **Target population:** Youth ages 8-17 with clinical indicators of BMI \geq 85th percentile, and/or % body fat consistent with age and gender and their parent(s)/caregivers who would benefit from a family healthy lifestyle program focused on healthy eating, physical activity and integrating healthy behaviors into daily living.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. Children in low socioeconomic and minority populations have a heightened risk for obesity; however sedentary lifestyles and poor diets make all children vulnerable. One of three children in the United States is overweight and almost one in five is obese. Obese youth are more likely to have high cholesterol, high blood pressure, bone and joint problems, diabetes, asthma and a number of other health problems. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children are insured by Medicaid and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms.
- **Strategy source:** FitKids360 is an outcomes-based program encouraging healthy behavior changes for children and their families. <http://healthnetwm.org/programs/fitkids360/fitkids360-outcomes>

RESOURCES:

- FitKids360 materials; CHH Program Coordinator; CHH Advisory Committee

COLLABORATION:

- PHO Health Navigators; PHO Pediatric Physicians; CHH Program Coordinator

ACTIONS:

1. Utilize CHH Advisory Committee to develop messaging materials for physicians
2. Research and broaden communication to other venues, such as Congdon Lectures, internal Genesys publications (INK, The Physician, PHO Newsletter) to increase awareness among

CHH STRATEGY 1: Improve participation rates and program reach via a systemic referral process to reach Genesys PHO PCPs to refer qualifying pediatric patients to the CHH Primary Prevention Intervention Program (FitKids360).

physicians

3. Track and evaluate referrals that translate into FitKids enrollment

ANTICIPATED IMPACT:

Short term

- I. Awareness about FitKids Intervention will improve among physicians (baseline practices compared to new practices who receive program referral information)

Medium term

- II. The number of Fit Kids appropriate referrals received will increase by 10%
- III. The number of FitKids referrals that will translate into program enrollment will increase by 10%

Long term

- IV. Program enrollment/family participation will increase by 10% annually
- V. Annually, 90% of participants will demonstrate improved knowledge about nutrition and physical activity
- VI. Annually, 50% of participants will report improved healthy behaviors (increased consumption of fruits and vegetables, increased physical activity, and/or reduced screen time)

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p>	<p>Fit Kids 360 – HealthNet of West Michigan http://healthnetwm.org/programs/fitkids360/fitkids360-outcomes</p>	<p>HP 2020: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.</p>
			<p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost; Reduce the proportion of children and adolescents who are considered obese</p>

Prioritized Need 2: Infant & Child Health

GOAL: Develop and implement an evidence-based standard of care for infants and children in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: Student Heart Screening

Student Heart Screening STRATEGY 1: Create an Advisory Group to determine process, key media partners and financial partners to ensure consistent and timely delivery of the student heart screen program

BACKGROUND:

- **Target Population:** Student ages 12-19 in Genesee County with special focus on poor and vulnerable and their caregivers (parents, teachers, coaches, athletic directors)
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. Genesee county ranks 79th out of 81 Michigan counties for child health and wellbeing measures. Impoverished children are at significantly higher risk for poor health outcomes and poor educational outcomes over the life course. The Flint and Genesee County communities have higher child poverty rates than the state or nation as a whole (26.36% in Flint; 24.15% in Genesee County). Approximately 90% of Flint children are insured by Medicaid and 49.8% of Genesee County children are insured by Medicaid compared to 39.4% in Michigan and 37.1% in the nation. Medicaid insured children in Genesee County have higher rates of acute care admissions, length of stay in inpatient facilities, and higher rates of inappropriate utilization of emergency rooms.
- **Strategy Source:** Corrado D, Pelliccia A, Bjørnstad HH, Vanhees L, Biffi A, Borjesson M, Panhuyzen-Goedkoop N, Deligiannis A, Solberg E, Dugmore D, et al. Cardiovascular preparticipation screening of young competitive athletes for prevention of sudden death: proposal for a common European protocol. Consensus Statement of the Study Group of Sport Cardiology of the Working Group of Myocardial and Pericardial Diseases of the European Society of Cardiology. *Eur Heart J* 2005;26:510 –524; and Corrado D, Basso C, Pavei A, Michieli P, Schiavon M, Thiene G. Trends in sudden cardiovascular death in young competitive athletes after implementation of a preparticipation screening program. *JAMA* 2006;296:1593–1601.

RESOURCES:

- Cardiologists, Physicians, Director and Practice Manager of the Genesys Heart Institute, Genesys Marketing, GPHO, GRMC Downtown and East Flint Family Clinics, Ascension IT.

COLLABORATION:

- Michigan Department of Public Health, Sudden Cardiac Death Association (SCDA), HeartAED (Adventric Technologies, LLC), Schools within Genesee County, Genesys Athletic Club.

ACTIONS:

Student Heart Screening STRATEGY 1: Create an Advisory Group to determine process, key media partners and financial partners to ensure consistent and timely delivery of the student heart screen program

1. Create an multidisciplinary Student Heart Screen Advisory Group (cardiologists, clinical staff, nutritionist, Physician’s Assistant, Marketing, school representatives such as athletic director/coach/health teacher)
2. Establish a structured student heart screen model (staffing, equipment, supplies, documents, logistics/scheduling, ancillary services)
3. Identify partners to engage financial stability
4. Establish a social media presence to market community screening events
5. Redesign the Heart Screen Website to enable consistent scheduling

ANTICIPATED IMPACT:

Short Term

- I. Multidisciplinary advisory group is established

Medium Term

- II. Heart Screen Model is developed
- III. Media partners are engaged
- IV. Financial partner(s) engaged
- V. Website is redesigned, scheduling is automated and social media is actively utilized for marketing events
- VI. Number of coaches and Athletic Directors who receive Heart Screen information and the importance of AEDs is increased by 10%

Long Term

- VII. Number of students screened is increased by 10% each year
- VIII. Number and capacity of screenings offered is increased to accommodate the increase in students screened

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition		Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost
			Health People 2020: Heart Disease & Stroke: Improve cardiovascular health and quality of life through prevention, detection, and treatment of risk factors for heart attack and stroke; early identification and treatment of heart attacks and strokes; and

prevention of repeat cardiovascular events

Prioritized Need 3: Obesity / Overweight / Healthy Life Style

GOAL: Leveraging the strengths of Ascension Mid-Michigan’s current Diabetes and Nutrition programs GRMC will develop the skill and capacity to offer pre-diabetes services (funding anticipated) to increase patient knowledge and adoption of healthy behaviors to mitigate or delay progression of Diabetes.

Action Plan: Establish Genesys Diabetes and Nutrition Learning Center (DNLC) as a CDC recognized Diabetes Prevention Program (DPP) Provider

Diabetes STRATEGY 1: Train coaches to support the implementation of a DPP and apply for CDC recognition

BACKGROUND:

- **Target Population:** Patients who are 18 years of age or older and have a body mass index (BMI) greater than or equal to 24; female patients with a history of Gestational Diabetes; patients with blood results (within a year of program start) of a fasting glucose of 100-125 mg/dl; Plasma glucose measure 2 hours after a 75 gm glucose load of 140-199 mg/dl; A1c of 5.7 to 6.4; a positive screen based on CDC Prediabetes screening test (www.cdc.gov/diabetes/prevention/recognition)
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. The age adjusted death rates for heart disease, Stroke, Diabetes Mellitus (DM), and kidney disease are higher in the county than state wide. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. The Genesee county obesity rate is significantly higher than the state and national averages with a combined obesity and overweight rate of being 70.4%. Additionally, 81.6% of adults in Genesee County have inadequate fruit and vegetable consumption. Poor health behaviors are associated with high rates of chronic illness such as DM, high cholesterol and heart disease. The prevalence of DM continues to rise for both adults and children with Genesee County higher than state and national averages. DM is a significant health status indicator and high cost disease.
- **Strategy Source:** <http://dpacmi.org> <http://www.cdc.gov/diabetes/prevention/lifestyle-program/index.html> www.diabetes.org; <http://dpacmi.org> N England J Med. 2002;346(6):393-403; JAMA Intern Med. 2013;173(2): 113-121; Am J Prev Med. 2008; 35(4); 357-363; Diabetes Educ. 2014;40(4): 435-443; Lancet. 2009;374(9702): 1677-1686; Diabetes Med 2013;30(1):3-15; Diabetes Care 2006;29(9):102-2107; Diabetes Care 2005;28(4):888-894; Ann Intern Med. 2005;142(5):323-332; www.MiHIA.org

RESOURCES:

- DNLC Advisory Committee: Registered Dietitians, Certified Diabetes Educators, DNLC Clerk, Regional Director Diabetes and Wound Care

COLLABORATION:

- SMOM Trained DPP coaches (trained trainer), AMG Michigan Dyads, Optum One data analyst team, Ascension MI Population Health Affinity Team, PHO Health Navigator Manager

Diabetes STRATEGY 1: Train coaches to support the implementation of a DPP and apply for CDC recognition

ACTIONS:

1. Conduct a capacity assessment and submit application for CDC DPP Provider recognition
2. Leverage Resources within DNLC program to identify and train coaches
3. Inform Physician groups, PHO organizations, and community of referral avenues for patient identified with Prediabetes
4. Identify opportunities and implement DPP programs in community settings

ANTICIPATED IMPACT:

Short term

- I. Development and Designation Phase completed to include: coach training, submission of CDC application and development of Program calendar for the 2-6 month phases

Medium term

- II. Dissemination Phase: Messaging/awareness campaign is implemented and DPP begins. Genesys DPP achieves CDC recognition

Long Term

- III. Patients will demonstrate an increase in healthy behaviors as evidenced by the average weight loss for patients enrolled in the DPP program between 5-10 pounds
- IV. A reduction in costs for patient enrolled in DPP program will be demonstrated by preventing the conversion of Prediabetes to Diabetes (by using the AMA’s calculator to estimate the medical saving)
- V. A decrease in patients with HbA1c >9 (SO 7 Metric)

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
<p>Reduce the number of patient diagnosed with pre-diabetes</p> <p>Reduce the number of patients who develop type 2 Diabetes</p> <p>Reduce the disease and economic burden of diabetes mellitus (DM) and improve the quality of life for all persons who are at risk for, DM. (HP2020)</p>	<p>Critical Success Factor 3 (Population Health) Strategic Objective 7 (Pilot standardized diabetes care model</p> <p>Community Needs Assessment: Obesity/Overweight/Health Life Style</p>	<p>Same</p>	<p>Health People 2020:</p> <p>1. Nutrition and Weight Status: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.</p> <p>2. Educational and Community-Based Programs: Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life</p> <p>NATIONAL DIABETES PREVENTION PROGRAM</p> <p>Ascension Population Health/Fee-for-Value focused on optimal patient outcomes, enhance patient and provider experience, and lower cost (quadruple aim)</p>

Prioritized Need 3: Obesity / Overweight / Healthy Life Style

GOAL: Leveraging the strengths of Ascension Mid-Michigan’s current Diabetes and Nutrition programs we will develop disease specific education and programming to include Chronic Kidney Disease (CKD), Cardiac Rehab, Gestational Diabetes (GD) and adult/childhood obesity to increase patient knowledge and adoption of healthy behaviors.

Action Plan: Disease Specific Nutrition Education and Programming

DISEASE SPECIFIC EDUCATION STRATEGY 1: Develop the curriculum to support disease specific education and programming for Medical Nutrition Therapy (MNT) group classes and implement throughout FY 17

BACKGROUND:

- **Target Population:** Patients with Chronic Kidney Disease (CKD), history of Cardio-pulmonary problems, expectant mother’s diagnosed with Gestational Diabetes (GD) and adults/children with a BMI ≥ 25 .
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. The age adjusted death rates for heart disease, Stroke, Diabetes Mellitus (DM), and kidney disease are higher in the county than state wide. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. The Genesee county obesity rate is significantly higher than the state and national averages with a combined obesity and overweight rate of being 70.4%. Additionally, 81.6% of adults in Genesee County have inadequate fruit and vegetable consumption. Poor health behaviors are associated with high rates of chronic illness such as DM, high cholesterol and heart disease. The prevalence of DM continues to rise for both adults and children with Genesee County higher than state and national averages. DM is a significant health status indicator and high cost disease.
- **Strategy Source:** <http://dpacmi.org> www.diabetes.org

RESOURCES:

- Regional Director for Diabetes and Wound Care, Genesys Diabetes and Nutrition clinical staff (RD/RN), Endocrinologist, Cardiac Rehabilitation staff, Cardiovascular Manager, Clinical Managers for Downtown Family Health Center and East Flint Health Center

COLLABORATION:

- Genesys PHO, National Kidney Foundation, IT resources, Genesys Heart Institute physicians and staff, OB/GYN Physicians, Ascension Michigan Population Health Affinity Team

ACTIONS:

1. Utilize the DNLC Advisory Committee to oversee project and help to prioritize the development of disease specific education and programming related to greatest determined need
2. Develop/adapt curriculum based on literature, best practice, and expert opinions. Require additional training for Certified Diabetes Educators (RD/CDE) as needed
3. Develop and execute an awareness messaging campaign to inform target audiences

DISEASE SPECIFIC EDUCATION STRATEGY 1: Develop the curriculum to support disease specific education and programming for Medical Nutrition Therapy (MNT) group classes and implement throughout FY 17

4. Begin Medical Nutrition Therapy group programs for prioritized populations and roll out consecutively over 3 year period of time
5. Research and evaluate how these programs can be integrated into the planning for special populations, specifically Veterans

ANTICIPATED IMPACT:

Short term

- I. The Discovery and Development Phase will be completed (Genesys Registered Dietitians will complete training -if needed - curriculum development, data base system design). The Dissemination Phase will be completed (messaging/awareness information distributed to notify community, patients and providers of disease specific program availability).

Medium term

- II. In partnership with GPHO and Genesys Athletic Club, conduct a wellness event for patients identified with Diabetes to conduct screenings, identify patients who need education, and increase awareness of services available. Conduct 2 Medical Nutrition Therapy (MNT) group classes for the chosen prioritized population

Long term

- III. For patients enrolled in MNT group classes, 75% will attend all classes
- IV. For patients enrolled in MNT group classes, an average of 75% will show increased healthy behaviors as demonstrated by: eating habits, weight loss, improved lab/clinical results (HbA1c, Cholesterol, BG, GFR). For patients enrolled in MNT group classes, the net promoter score for “would you recommend this to friend or family” will be 65 or higher.
- V. For patients enrolled in MNT group classes, the net promoter score for “rate overall experience” will be 65 or higher; and a decrease in patients with a HbA1c > 9 (SO7 Metric).

Alignment with Local, State & National Priorities

OBJECTIVE:		STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Identify relevant community objective(s)	Identify relevant state objective(s)	Identify relevant national objective(s)
Decrease the mortality and morbidity of diseases such as CKD, Cardio-pulmonary complications, Gestational Diabetes through	Community Health Needs: Obesity/Overweight/Healthy Life Styles	Reduced Readmissions Standardized Diabetes Model of Care	Healthy People 2020: Chronic Kidney Disease CKD and end-stage renal disease (ESRD) are significant public health problems in the United States and a major source of suffering and poor quality of life for those afflicted. They are responsible for premature death and exact a high economic price from both the private and public sectors.

enhanced
nutritional
management
education
program

National Kidney Disease
Education Program (NKDEP):
Improving the understanding,
detection, and management of
kidney disease.

**Ascension Population
Health/Fee-for-Value** focused on
optimal patient outcomes,
enhance patient and provider
experience, and lower cost
(quadruple aim)

Prioritized Need 3: Obesity/Overweight/Healthy Lifestyle

GOAL: Serve as a vital presence in the community to support physical activity and access to and consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs.

Action Plan: Commit to Fit

COMMIT TO FIT STRATEGY 1: Support GRMC partnership with the Greater Flint Health Coalition Commit to Fit initiative.

BACKGROUND:

- **Target Population:** All Genesys Health System Employees
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. The age adjusted death rates for heart disease, Stroke, Diabetes Mellitus (DM), and kidney disease are higher in the county than state wide. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. The Genesee county obesity rate is significantly higher than the state and national averages with a combined obesity and overweight rate of being 70.4%. Additionally, 81.6% of adults in Genesee County have inadequate fruit and vegetable consumption. Poor health behaviors are associated with high rates of chronic illness such as DM, high cholesterol and heart disease. The prevalence of DM continues to rise for both adults and children with Genesee County, higher than state and national averages. DM is a significant health status indicator and high cost disease.
- **Strategy Source:** Regular physical activity can improve the health and quality of life of Americans of all ages, regardless of the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of early death; coronary heart disease; stroke; high blood pressure; Type 2 Diabetes; breast and colon cancer; falls and depression (HP 2020).

RESOURCES:

- Free use of the GAC state of the art equipment/facility for one month for C2F participants; GAC General Manager and C2F champions (Highly qualified/ACE Certified GAC staff/personal trainers).

COLLABORATION:

- Greater Flint Health Coalition Health Improvement Steering Committee

ACTIONS:

1. Engage Genesys senior leadership and Mid-level managers to model healthy lifestyle behaviors through participation
2. Promote C2F messaging and departmental challenges to employees through departmental champions

COMMIT TO FIT STRATEGY 1: Support GRMC partnership with the Greater Flint Health Coalition **Commit to Fit** initiative.

- 3. Facilitate small group orientation to the GAC facility, equipment and programming for employees
- 4. Engage employees in healthy behaviors and provide incentives

ANTICIPATED IMPACT:

Short term

- I. Annually, an average of 50 GHS Employees will participate in the Commit to Fit Challenge (150 employees over 3 years)

Medium and Long term

- II. Annually, 50% of participants will report improved healthy behaviors (increased physical activity and healthy food consumption) documented on the C2F website

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition		Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost
	Genesys Athletic Club – Wellness Strategic Plan – Employee Wellness.		HP 2020: To provide access to regular physical activity including participation in moderate and vigorous physical activities and muscle-strengthening activities
			CDC: Workplace health programs Health-related opportunities available to employees at the workplace or through outside organizations to begin, change, or maintain health behaviors.

Prioritized Need 3: Obesity/Overweight/Healthy Lifestyle

GOAL: Serve as a vital presence in the community with to support physical activity and access to/consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs.

Action Plan: GAC Wellness

GAC WELLNESS STRATEGY 1: Deliver wellness/physical activity to the community through the use of Genesys Athletic Club (GAC) Personal trainers and virtual classes for senior and pediatric populations.

BACKGROUND:

- **Target Population:** Seniors (Age 60 and over) and Youth (18 years and under) in Genesee County
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Genesee County ranks 82nd out of 83 Michigan counties for overall health outcomes including 77th in healthy behaviors, 79th in physical environment and 79th in social/economic factors. The age adjusted death rates for heart disease, Stroke, Diabetes Mellitus (DM), and kidney disease are higher in the county than state wide. Flint and Genesee County experience significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes. The Genesee county obesity rate is significantly higher than the state and national averages with a combined obesity and overweight rate of being 70.4%. Additionally, 81.6% of adults in Genesee County have inadequate fruit and vegetable consumption. Poor health behaviors are associated with high rates of chronic illness such as DM, high cholesterol and heart disease. The prevalence of DM continues to rise for both adults and children with Genesee County, higher than state and national averages. DM is a significant health status indicator and high cost disease.
- **Strategy Source:** Certified Personal Trainers via ACE Integrated Fitness Training® Model, created to help health and fitness professionals deliver the individualized programs people need to adopt long-term, healthy behaviors. ACE Certification is accredited by the National Commission for Certifying Agencies (NCCA). <http://www.acefitness.org/fitness-certifications/personal-trainer-certification/default.aspx>; Regular physical activity can improve the health and quality of life of Americans of all ages, regardless of the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of early death; coronary heart disease; stroke; high blood pressure; Type 2 Diabetes; breast and colon cancer; falls and depression. Among children and adolescents, physical activity can improve bone health; Improve cardiorespiratory and muscular fitness; decrease levels of body fat; and reduce symptoms of depression (HP 2020).

RESOURCES:

- Highly qualified/ACE Certified GAC staff/personal trainers; state of the art equipment/facility; Community Wellness fund; Athletic Trainers; PT manager; Group fitness instructor/manager.

COLLABORATION:

- GFHC, Genesee County Schools and Senior Centers; Crim Fitness Foundation, Ascension Information Services (IS)

GAC WELLNESS STRATEGY 1: Deliver wellness/physical activity to the community through the use of Genesys Athletic Club (GAC) Personal trainers and virtual classes for senior and pediatric populations.

ACTIONS:

1. Conduct focus groups (seniors, youth) to determine desired training and virtual services
2. Determine/install new technology webpage to accommodate virtual classes
3. Establish curriculum/class offerings
4. Train instructors in curriculum and program operation
5. Provide programming to youth and seniors in community-based settings

ANTICIPATED IMPACT:

Short term

- I. The roving trainer program will be developed and two pilot sites (one youth and one senior) will be identified

Medium term

- II. 30 youth participants and 30 senior participants will participate in the roving personal training pilot program in community-based settings. The roving personal training program will be fully operational. The technology and curriculum to deliver virtual fitness classes will be in place. Participants will access physical activity in a community-based setting via pilot programming.

Long term

- III. Virtual fitness classes will be provided at two pilot sites (one youth, one senior) in community-based settings for 60 youth and 30 senior
- IV. Annually, 50% of participants will demonstrate improved knowledge about physical activity (pre-post survey)
- V. Annually, 50% of participants will report improved healthy behaviors (increased physical activity)(pre-post survey)

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p>		<p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost</p>
	<p>Genesys Athletic Club – Wellness Strategic Plan – Community Wellness.</p>		<p>HP 2020: To provide access to regular physical activity including participation in moderate and vigorous physical activities and muscle-strengthening activities</p>

Prioritized Need 4: Effective Care Delivery for Aging Population

GOAL: Develop and implement an evidence-based standard of care for the aging/elderly population in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: Program of All-Inclusive Care for the Elderly (PACE)

PACE STRATEGY 1: Develop a broad community messaging campaign to reach PCPs/Genesys PHO; GRMC; and community organizations that serve a senior population such as senior centers, subsidized housing, senior housing, other health systems, etc.

BACKGROUND INFORMATION:

- **Target population:** Potential participants - Individuals age 55 years and older, living in Genesee County, certified as meeting Michigan criteria for nursing home level of care, and able to live safely in the community with the support of PACE services.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Participants are low-income, frail, dual eligible for Medicare & Medicaid with need for access and coordination of direct services such as adult day health, primary care, physical and occupational therapies and transportation within a network of community providers such as physician specialists, ancillary providers, hospitals, and nursing homes to create a comprehensive service delivery system for the frail elderly.
- **Strategy Source:** PACE Model of Care <https://www.medicare.gov/your-medicare-costs/help-paying-costs/pace/pace.html>

RESOURCES:

- GHS Marketing; PACE Marketing Coordinator; PACE Quality Coordinator; PACE Intake Coordinator

COLLABORATION:

- PHO Health Navigators; PHO Office Manager; GRMC Case Managers; Genesee County Senior Centers, VAAA, Reverence Home Care Agencies, disability neutral, elder abuse clients, skilled nursing facilities, etc.

ACTIONS:

1. Develop task force to drive project plan to evaluate content of current (CMS, State) messaging materials; make recommendations for revisions and submit revised material for CMS approval
2. Research and broaden communication to other venues, such as Condon Lectures, skilled nursing facilities, etc. Explore opportunity to place PACE on the Michigan Department of Health and Human Services website
3. Track and evaluate referrals that translate into PACE enrollment

ANTICIPATED IMPACT:

Short term

- I. Submit revised material for CMS approval and provide PACE information for Condon Lectures and recruit through 3 skilled nursing facilities to broaden reach.

Medium term

- II. Awareness about PACE will improve by 10% among clinical and community providers (baseline and future data collected from intake form).

PACE STRATEGY 1: Develop a broad community messaging campaign to reach PCPs/Genesys PHO; GRMC; and community organizations that serve a senior population such as senior centers, subsidized housing, senior housing, other health systems, etc.

- III. The number of PACE appropriate referrals received will increase by 10%.
- Long term**
- IV. The number of PACE referrals that will translate into a PACE enrollment will increase by 10%. Enrolled participants are receiving population health care.

PACE STRATEGY 2: Coordinate and research data collection and analysis through Optum One data use case to identify potential PACE participants within GHS/GPHO who meet PACE guidelines.

BACKGROUND INFORMATION:

- **Target population:** Potential participants - Individuals age 55 years and older, living in Genesee County, certified as meeting Michigan criteria for nursing home level of care, and able to live safely in the community with the support of PACE services.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Participants are low –income, frail, dual eligible for Medicare & Medicaid with need for access and coordination of direct services such as adult day health, primary care, physical and occupational therapies and transportation within a network of community providers such as physician specialists, ancillary providers, hospitals, and nursing homes to create a comprehensive service delivery system for the frail elderly.
- **Strategy Source:** PACE Model of Care <https://www.medicare.gov/your-medicare-costs/help-paying-costs/pace/pace.html>

RESOURCES:

- PACE Marketing; Optum One Data Expert (IT); PACE Quality Coordinator; PACE Intake Coordinator, PACE Medical Director

COLLABORATION:

- GHS; Genesys PHO

ACTIONS:

1. Utilizing task force (developed for messaging strategy), identify data reporting capabilities with Optum One Team; develop a case use strategy to driving messaging strategy and establish reporting frequency and analytics.
2. Operationalize/ track & trend data to identify messaging and outreach opportunities

ANTICIPATED IMPACT:

Short term

- I. Task force will meet to identify data reporting capabilities with Optum One Team.

Medium term

- II. Awareness about PACE will improve by 10% among clinical and community providers (baseline and future data collected from intake form)
- III. The number of PACE appropriate referrals received will increase by 10%.

PACE STRATEGY 2: Coordinate and research data collection and analysis through Optum One data use case to identify potential PACE participants within GHS/GPHO who meet PACE guidelines.

Long term

IV. The number of PACE referrals that will translate into a PACE enrollment will increase by 10%.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p>	<p>PACE Association of Michigan</p>	<p>HP 2020: Access: Improve access to comprehensive, quality health care services; Older Adults Improve the health, function, and quality of life of older adults</p>
	<p>Greater Flint Health Coalition Advance Care Planning Task Force community-wide ACP intervention.</p>	<p>State Legislation – Senate to include PACE in budget proposal</p>	<p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost</p>

Prioritized Need 4: Effective Care Delivery for Aging Population

GOAL: Develop and implement an evidence-based standard of care for the aging/elderly population in Genesee County that improves health outcomes, enhances patient & provider experience and lowers cost.

Action Plan: Advance Care Planning (ACP)

ACP STRATEGY 1: Expand awareness and scope of Advance Care Planning (ACP) and Advance Directives (AD) to Genesee County residents and Genesys Providers.

BACKGROUND INFORMATION:

- **Target population:** Genesee County Residents (GC); GPHO Staff & patients; GHS staff & patients
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Advance Directives ensure that end-of-life services are delivered according to the wishes of the patient. The County-wide ACP program covers all GC residents including underserved, low literacy, etc.
- **Strategy source:** Respecting Choices (RC) is an internationally recognized, evidence-based advance care planning (ACP) model of care. Respecting Choices helps to achieve the Triple Aim for patients who use the most health services and need the most support.
<http://www.gundersenhealth.org/respecting-choices>

RESOURCES:

- ACP Facilitators; GFHC-ACP Task Force; Existing program materials

COLLABORATION:

- Greater Flint Health Coalition-ACP Task Force; GPHO; GRMC Clinicians; Great Lakes Health Connect (GLHC)

ACTIONS:

1. Expand the ACP facilitation model beyond pilot PHO sites to additional PHO sites.
2. Provide front line GHS clinical staff with information/education about: 1) ACP resources and how to introduce them to patients; & 2) How to access ACP information from Great Lakes Health Connect (GLHC)
3. Conduct ACP/AD awareness “Lunch & Learns” for Genesys Employees
4. Conduct ACP facilitator trainings as needed

ANTICIPATED IMPACT:

Short term

- I. The ACP model will expand to an additional 15% (5% annually) of PHO practices from baseline. GHS clinical staff who participated in education will demonstrate capacity to access ACP information when needed from GLHC at a 5% annual increase.

Medium Term

- II. Annually, GHS clinical staff who participated in education will demonstrate capacity to

ACP STRATEGY 1: Expand awareness and scope of Advance Care Planning (ACP) and Advance Directives (AD) to Genesee County residents and Genesys Providers.

introduce ACP resources to patients (pre-post)

Long term

- III. Annually, 25 Genesys employees will participate in ACP/AD Lunch & Learns; 20% will self-report completion of an AD.
- IV. An optimal number of ACP facilitators are trained/in place consistent with addition of new PHO practice delivery sites at 5% annually.

ACP STRATEGY 2: Utilize risk-stratification data to inform program participation and determine program effectiveness.

BACKGROUND INFORMATION:

- **Target population:** Genesee County Residents
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Advance Directives ensure end of life services are delivered according to the wishes of the patient; the County-wide ACP program covers all GC residents including underserved, low literacy, etc.
- **Strategy source:** Respecting Choices (RC) is an internationally recognized, evidence-based advance care planning (ACP) model of care. Respecting Choices helps to achieve the Triple Aim for patients who use the most health services and need the most support.
<http://www.gundersenhealth.org/respecting-choices>

RESOURCES:

- Ascension IT; Optum One Data Use Case

COLLABORATION:

- Ascension IT; Optum One Data Use Case; Providers – GPHO; GRMC; Employed Physicians

ACTIONS:

1. Use the data to identify individuals who would benefit from ACP/AD.
2. Inform providers of patients within their practices that would be good candidates to participate in ACP facilitation

ANTICIPATED IMPACT:

Short term

- I. An increase in people who are engaged in ACP process informed by risk-stratification data annually

Medium term

- II. Annually, an additional 5% of decedents will have AD in GLHC/EMR

Long term

- III. Annually, an additional 5% of decedents with AD in GLHC/EMR end-of-life wishes were followed

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p>	<p>PACE Association of Michigan</p>	<p>HP 2020: Access: Improve access to comprehensive, quality health care services; Older Adults Improve the health, function, and quality of life of older adults</p>
	<p>Greater Flint Health Coalition Advance Care Planning Task Force community-wide ACP intervention.</p>	<p>State Legislation – Senate to include PACE in budget proposal</p>	<p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost</p>

Prioritized Need 5: Food Insecurity

GOAL: Serve as a vital presence in the community to support access to and consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs.

Action Plan: Women in Agriculture (WIA) Farm Development Center

WIA STRATEGY 1: To provide a venue for economic opportunity for women farmers and support access to healthy food in the community.

BACKGROUND:

- **Target Population:** Beginning and historically underserved women farmers in Genesee County who may lack resources, education or experience or other significant barriers for starting a successful farm business; and consumers in need of fresh produce, especially to mitigate the impact of lead exposure.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Flint / Genesee County has experienced significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes and consistently high unemployment rates (currently at 9.7%) and growing generational poverty. Unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status. Flint /Genesee County’s unemployment rates have historically been well above the state and national averages. While the current Flint / Genesee County unemployment rate is more in line with those averages, many newly created jobs in the community do not offer sustainable wages. Educational attainment is also highly correlated with positive health outcomes. Genesee County’s educational attainment rates (high school graduation rates and post-secondary educational achievement) fall well below state and national averages. Finally, while 82% of county residents report they do not consume an adequate amount of fruits and vegetables, for those living in Flint’s food desert the lack of access prohibits healthy choices. The city of Flint, population 99,002, has only one chain grocery store compared to 54 liquor stores for food access within city limits and only 21% of sampled convenience stores offering fresh produce. Low income residents are disproportionately affected regarding food access. The lack of adequate transportation is one large contributing factor for Flint residents being able to access healthy food.
- **Strategy Source:** MIFFS <http://www.miffs.org/>, The Women, Food, & Agriculture Network (WFAN) was founded in Iowa in response to long-standing concerns about systemic rural, agricultural, and environmental problems and gender role. It now provides a national model for reaching a community of women involved in sustainable agriculture <http://www.wfan.org/>

RESOURCES:

- Michigan Food and Farming Systems (MIFFS), Women In Agriculture, Genesys Evergreen (Greenhouse) Manager and tech, Genesys Regional Medical Center, Genesys Marketing, Genesys Health Foundation.

COLLABORATION:

- MSU Extension, MSU Center for Regional Food Systems (CRFS), MIFFS, Genesys Farmers Market, MSU Student Organic Farm, Community Foundation of Greater Flint (GFGF), ROWE

WIA STRATEGY 1: To provide a venue for economic opportunity for women farmers and support access to healthy food in the community.

Professional Services Company, USDA-Natural Resources Conservation Service (NRCS)

ACTIONS:

1. Allocate 3 acres of land on the Genesys Health Park Campus to serve as a community based, resource-sharing and educational center for women growers and consumers in the region
2. Allocate Genesys Evergreen Manager (.25 FTE) and tech to support/coordinate activities and needs of the farm and the health system.
3. Offer input into farmer recruitment to include poor and vulnerable community (suggest involvement from Catholic Charities, St. Luke’s New Life Center, etc.)
4. Create messaging to provide awareness of program and opportunities for community to reach healthy, lead mitigating foods grown by WIA.

ANTICIPATED IMPACT:

Short term

- I. Healthy (lead mitigating) food is growing in WIA farm.
- II. Venues for distribution of healthy foods via Genesys farmers market and Flint locations will be established.
- III. Engaged beginning women producers, growing for sale.

Medium term

- IV. Demonstrated understanding of connection between nutrient-rich fresh foods and health benefits/outcomes. Improved growing/farming knowledge, skills.
- V. Expanded women grower/farmer social/ workforce network.

Long Term

- VI. Ongoing opportunity & environment for economic development for women farmers.
- VII. Nutrient rich food distributed/sold in high need communities.
- VIII. Genesys Health System engagement in regional food system to support population health.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p> <p>Flint Water Crisis</p>		<p>Healthy People 2020: Nutrition, Physical Activity, and Obesity</p> <p>Good nutrition, physical activity, and a healthy body weight are essential parts of a person’s</p>

Health/Medical Intervention Strategy Response Plan via the Greater Flint Health Coalition and Hurley Children's Hospital.

overall health and well-being. Together, these can help decrease a person's risk of developing serious health conditions, such as high blood pressure, high cholesterol, diabetes, heart disease, stroke, and cancer

USDA: This effort is based upon work that is supported by the National Institute of Food and Agriculture, U.S. Department of Agriculture, under award number 2015-70017-22856

Prioritized Need 5: Food Insecurity

GOAL: Serve as a vital presence in the community to support access to and consumption of healthy food via programming that meets community health needs and supports population health delivery – improved health outcomes, enhanced patient & provider experience, and lower costs.

Action Plan: Regional Food System Navigation (RFSN) - Community Foundation of Greater Flint (CFGF) Access to Healthy Food Initiative

RFSN STRATEGY 1: Serve as a partner organization to create an equitable, sustainable regional food system in Genesee County, Michigan

BACKGROUND:

- **Target Population:** Individuals and organizations that comprise the key elements of the regional food system – Growing; producing; processing; distributing; retail; preparing; and eating and consumers in need of fresh produce, especially to mitigate the impact of lead exposure.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** Flint / Genesee County has experienced significant unemployment and population declines coupled with overwhelmingly poor measures for both health factors and health outcomes and consistently high unemployment rates (currently at 9.7%) and growing generational poverty. Unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status. Flint /Genesee County’s unemployment rates have historically been well above the state and national averages. While the current Flint / Genesee County unemployment rate is more in line with those averages, many newly created jobs in the community do not offer sustainable wages. Educational attainment is also highly correlated with positive health outcomes. Genesee County’s educational attainment rates (high school graduation rates and post-secondary educational achievement) fall well below state and national averages. Finally, while 82% of county residents report they do not consume an adequate amount of fruits and vegetables, for those living in Flint’s food desert the lack of access prohibits healthy choices. The city of Flint, population 99,002, has only one chain grocery store compared to 54 liquor stores for food access within city limits and only 21% of sampled convenience stores offering fresh produce. Low income residents are disproportionately affected regarding food access. The lack of adequate transportation is one large contributing factor for Flint residents being able to access healthy food. Historically, although key food system elements exist in the region, they have not efficiently worked together. This stakeholder group is comprised of often siloed sectors including government, education, healthcare, private sector, and nonprofit, which has led to jeopardized funding, dissatisfied food system participants/customers, limited food business opportunities for marginalized/non-traditional initiatives; and increased rates of chronic illness/related healthcare costs in the County.
- **Strategy Source:** The Michigan Good Food Charter is a roadmap for a food system that is rooted in local communities and centered on good food for all of Michigan. <http://www.michiganfood.org/>

RFSN STRATEGY 1: Serve as a partner organization to create an equitable, sustainable regional food system in Genesee County, Michigan

RESOURCES:

- CFGF Task Force and Funding to support RFSN activities; MSU - School of Public Health – Flint; Participants in each of 5 RFSN Action Teams: Growing & Producing; Processing & Distribution; Preparing & Eating; Retail; and Engagement.

COLLABORATION:

- Community Foundation of Greater Flint (GFGF), MSU School of Public Health; Genesys, Hurley, McLaren Health Systems; Food Bank of Eastern Michigan; edibleflint; community-based organizations; Genesee County farmers/growers.

ACTIONS:

1. Serve on the RFSN task force in a system coordination role
2. Help to develop priorities for 5 action teams (Growing & Producing; Processing & Distribution; Preparing & Eating; Retail; and Engagement.)
3. Use Genesys Health Park Campus to leverage economic opportunity
4. Help to facilitate regional food system data collection and evaluation of coordinated outcomes
5. Link MIFFS WIA Farm Development Center to RFSN priorities (recruitment, growing, & distribution for lead mitigation)

ANTICIPATED IMPACT:

Short Term

- I. RFSN Framework is established
- II. Genesys is active contributor to RFSN

Medium Term

- III. Collaboration among stakeholders in alignment with RFSN framework is achieved
- IV. MIFFS WIA Farm Development Center is linked to RFSN priorities (recruitment, growing, & distribution for lead mitigation)

Long Term

- V. Expanded grower/farmer social/ workforce network
- VI. Nutrient rich food distributed/sold in high need communities
- VII. Equitable sustainable regional food system
- VIII. Genesys Health System engagement in regional food system to support population health
- IX. Measurable outcomes are available to inform program development and funding.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p> <p>Flint Water Crisis Health/Medical Intervention Strategy Response Plan via the Greater Flint Health Coalition and Hurley Children’s Hospital.</p>	<p>The Michigan Good Food Charter: A roadmap for a food system that is rooted in local communities and centered on good food for all of Michigan</p>	<p>Healthy People 2020: Nutrition, Physical Activity, and Obesity</p> <p>Good nutrition, physical activity, and a healthy body weight are essential parts of a person’s overall health and well-being. Together, these can help decrease a person’s risk of developing serious health conditions, such as high blood pressure, high cholesterol, diabetes, heart disease, stroke, and cancer</p>

Prioritized Need 6: Health Care Access

GOAL: Genesys will establish an environment to build the capacity to provide responsive services to Veterans at the right time and in the right place that compliment other Veteran initiatives and leverage emerging Veteran resources.

Action Plan: Veterans Presumptive Illness Program

VETERANS PRESUMPTIVE ILLNESS STRATEGY 1: Identify, assess, educate, and refer Vietnam Era Veterans to access health and financial benefits for which they qualify from the Veterans Administration

BACKGROUND:

- **Target Population:** Vietnam Era Veterans who are Genesys Regional Medical Center and Genesys PHO patients.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** When Veterans with similar experiences have higher rates of certain types of illnesses; the federal government may create a presumptive for that illness. By doing so, they “presume” that the illness was caused by the military service. For Vietnam Veterans, there are a variety of health conditions that the VA presumes were caused by exposure to Agent Orange. The Michigan Veteran population is 658,469; the Genesee County Veteran population is 29,204. Of the Veterans who reside in Genesee County, almost half (14, 527) are age 65 and over. Michigan is leaving \$800 Million on the table in unclaimed financial benefits for Veterans. Michigan ranks 47th out of 53 States and Territories for average dollars spent on Veterans
- **Strategy Source:** Presumptive illness <http://veterans.vermont.gov/benefits/presumptives>; The Veterans Health Administration: Implementing Patient-Centered Medical Homes in the Nation’s Largest Integrated Delivery System ~ Commonwealth Fund, 2011; Genesys/Accretive Study to identify presumptive illnesses for the Vietnam Veteran population

COLLABORATION:

- Michigan Dept. of Military and Veterans Affairs; Michigan Veterans Affairs Agency; Genesee County Department of Veterans Services; Accretive Health

ACTIONS:

1. Identify Vietnam Era Veterans at all points of entry into Genesys Regional Medical Center/Genesys PHO
2. Provide an on-site Navigator who can assess Veterans and their families to determine eligibility for services and provide real-time education and enrollment for programs, health services and financial benefits
3. Align identification of Veterans and services as allowable with Genesys PHO’s 160 Primary Care Physicians
4. Promote messaging aimed at Veterans and providers to clarify available services, where services can be accessed, and the enrollment process.

VETERANS PRESUMPTIVE ILLNESS STRATEGY 1: Identify, assess, educate, and refer Vietnam Era Veterans to access health and financial benefits for which they qualify from the Veterans Administration

ANTICIPATED IMPACT:

Short term

- I. A robust system is in place to identify Vietnam Era Veterans.
- II. Vietnam veterans are engaged by providers in the navigation process.

Medium and Long term

- III. Of the 14,000 potentially eligible Vietnam Veterans, a significant number (annual baseline to be established) will be diagnosed with an illness that was caused by exposure to dioxins in Vietnam and therefore be engaged with the Veterans Administration to receive attributable benefits.

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition		<p>The Veterans Health Administration: Implementing Patient-Centered Medical Homes in the Nation’s Largest Integrated Delivery System ~ Commonwealth Fund, 2011</p> <p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost;</p>

Prioritized Need 6: Health Care Access

GOAL: Genesys will establish an environment to build the capacity to provide responsive services to Veterans at the right time and in the right place that compliment other Veterans initiatives and leverage emerging Veterans resources and access to healthcare.

Action Plan: Veterans Choice Program

VETERANS CHOICE STRATEGY 2: Position Ascension as a partner in supporting Veterans Affairs (VA) programs to improve services to Veterans via the Veterans Choice Program that are aligned with Population Health care delivery and Triple Aim Outcomes – better health, improved patient experience and reduced cost.

BACKGROUND:

- **Target Population:** Any veteran is covered if he or she meets the eligibility requirements which include: Lives more than 40 miles from a VA facility; or Unable to get a VA appointment within 30 days of the preferred date, or within 30 days of the date determined medically necessary by their physician; or Lack of available specialists; and Obtains VA and benefit approval prior to the visit.
- **How the strategy addresses the social determinants of health, health disparities and challenges of the underserved:** The Michigan Veteran population is 658,469; the Genesee County Veteran population is 29,204. Of the Veterans who reside in Genesee County, almost half (14, 527) are age 65 and over. Michigan is leaving \$800 Million on the table in unclaimed financial benefits for Veterans. Michigan ranks 47th out of 53 States and Territories for average dollars spent on Veterans. In the nation and in Genesee County Veterans are experiencing long wait times (more than 30 days); lack of available specialists; and unusual, excessive or travel burdens (more than 40 miles) to obtain high quality, timely health care services.
- **Strategy Source: Veterans Access, Choice and Accountability Act of 2014:** Established a \$10 billion fund to pay for healthcare services to Veterans by private healthcare providers. Covers primary care, inpatient and outpatient specialty care, and mental healthcare for eligible Veterans outside of the VA.

RESOURCES:

- Ascension coordination of Veterans Choice at the national level that translates into local implementation (marketing, veteran enrollment/engagement process, patient navigation; data collection/sharing)

COLLABORATION:

- Ascension, Department of Veterans Affairs, Genesys PHO; Michigan Dept. of Military and Veterans Affairs; Michigan Veterans Affairs Agency; Genesee County Department of Veterans Services.

ACTIONS:

1. Align with Ascension providers nationwide to obtain authorization to provide primary care, inpatient and outpatient specialty care, and mental health care for eligible veterans outside of the VA
2. Establish a local Veteran Navigator who can assist Veterans and their families to identify a physician and set medical appointments
3. Launch local marketing campaign with national communications messaging aimed at Veterans and

VETERANS CHOICE STRATEGY 2: Position Ascension as a partner in supporting Veterans Affairs (VA) programs to improve services to Veterans via the Veterans Choice Program that are aligned with Population Health care delivery and Triple Aim Outcomes – better health, improved patient experience and reduced cost.

families to clarify available services, where services can be accessed, and the enrollment process.

4. Post enrollment process on website
5. Implement the enrollment and navigation process

ANTICIPATED IMPACT:

Short Term

- I. Genesys is authorized as the regional provider for the Veterans Choice Program
- II. Veterans Choice enrollment process is active via website
- III. Veteran navigation services are established
- IV. Veterans Choice marketing campaign launched

Medium Term

- V. Increased access to care/number of enrolled Veterans
- VI. Decrease wait times for Veterans to receive services
- VII. Improved patient management of Veterans with specific disease states
- VIII. Increased security related to health information exchange between providers

Long Term

- IX. Clinical pathways are established with VA (Genesys as regional provider for Veterans)
- X. Increased patient satisfaction
- XI. Decreased cost
- XII. Increased ranking for MI on money spent on Veterans
- XIII. Coordinated & protected patient information

Alignment with Local, State & National Priorities

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
Insert #	<p>Genesee County/Flint Community Health Needs Assessment – Greater Flint Health Coalition</p>		<p>Veterans Access, Choice and Accountability Act of 2014: Established a \$10 billion fund to pay for healthcare services to veterans by private healthcare providers. Covers primary care, inpatient and outpatient specialty care, and mental healthcare for eligible veterans outside of the VA</p> <p>Ascension: Population Health/ Fee for Value focused on Optimal Patient Outcomes, Enhanced Patient & Provider Experience, and Lower Cost;</p>