

St. Mary's of Michigan Standish Hospital Implementation Strategy

Implementation Strategy Narrative

Overview

St. Mary's of Michigan Standish Hospital is a not-for profit, Critical Access Hospital offering 25 acute and critical care beds, 29 skilled nursing beds, and an array of outpatient services. It is located in Standish, Michigan, and has been serving residents of Arenac County since 1961.

In 2013, St. Mary's of Michigan Standish Hospital conducted its first Community Health Needs Assessment (CHNA) and Implementation Strategy in partnership with the Central Michigan District Health Department and the Arenac County Health Advisory Committee. Over the next three years the group continued to address the identified needs from 2013 and also put a concentrated effort into developing a CHNA for 2016. The process brought together key healthcare and public service stakeholders, the collection of quantitative and qualitative data, and reached out to the community in order to elicit feedback directly from them and their service providers.

The 2016 assessment began with the collection of secondary data from various sources. This included demographic, socioeconomic characteristics and information pertaining to the health status of the county for the most recent years available.

In addition to the secondary data, the Arenac County Health Advisory Committee surveyed the community to determine the health priorities of the county. Following the compilation of the survey data, the committee held focus groups to receive input from a diverse group of leaders representing the broad interests of the community, including leadership from the healthcare sector – Central Michigan District Health Department, Sterling Area Health Center, Bay Arenac Behavioral Health, and representatives from those organizations who work closely with the poor and vulnerable populations. These stakeholders provided knowledge about the community's health status, risk factors, utilization of services, community resource needs, and identified gaps and needs in healthcare.

Prioritized Needs

The Arenac County Health Advisory Committee utilized data, a community survey, and focus groups to determine the following prioritized needs:

1. **Nutrition:** With 33.2 percent of Arenac County adults listed as having a Body Mass Index (BMI) greater than 30, it was determined that proper nutrition is essential to reducing obesity, as well as chronic diseases such as type 2 diabetes, heart disease, high blood pressure, and stroke. By focusing on improving nutrition, the intent is to reduce obesity levels which will correspond with lower chronic disease rates.
2. **Behavioral Health Services:** 1 in 5 Americans has a mental illness and many are reluctant to seek help or might not know where to turn for care. Due to the rural environment of Arenac County, access to behavioral health services is limited. Currently, a minimal number of behavioral health providers are available and not all insurance plans are accepted.

- 3. Physical Health / Access to Primary Care:** Access to healthcare services is critical for residents who live in rural communities. According to Healthy People 2020, access to healthcare is important for: overall physical, social, and mental health status; prevention of disease; detection and treatment of illnesses; quality of life; preventable death; and life expectancy. Rural residents often experience barriers to healthcare that limit their ability to get the care they need, as well as accessing available services in a timely manner. In Arenac County, after hours/walk-in services are limited to evenings, Monday-Thursday. Those needing non-emergency medical attention outside of this timeframe either travel a distance to find a walk-in clinic or utilize the hospital's emergency department.

Needs That Will Not Be Addressed

A need for improved transportation systems was identified during the CHNA process. Despite advocating for improved transportation, it was determined that St. Mary's of Michigan Standish Hospital, including the Arenac County Health Advisory Committee, do not have the resources available to directly impact transportation.

Prioritized Need #1: Improve Nutrition

GOAL: Increase access to fruits and vegetables.

Action Plan

STRATEGY 1: Increase the number of Double Up Food Bucks program providers in Arenac County.

BACKGROUND INFORMATION:

- Target population: Low income; anyone receiving SNAP benefits is automatically eligible.
- Briefly describe if/how the strategy addresses social determinants of health, health disparities and challenges of the underserved: Consuming a diet high in fruits and vegetables is associated with a decreased risk of many chronic diseases, including heart disease, stroke, high blood pressure, diabetes, obesity, and some cancers. Communities with better access to healthful foods tend to have healthier diets, including higher intakes of fruits and vegetables. In addition, residents of rural, minority, and lower-income neighborhoods are more likely to have poor access to supermarkets. In rural, minority, lower-income neighborhoods, convenience stores and other small grocery or “corner” stores may be more prevalent than supermarkets. Because these stores generally stock little or no produce due to limited space or equipment and may charge more for what is sold, residents of these neighborhoods may have limited access to fruits and vegetables.
- Strategy source (note if strategy is evidence-based and if it addresses policy, system or environmental change): The strategy is based on, The CDC Guide to Fruit & Vegetable Strategies to Increase Access, Availability and Consumption and addresses system and environmental change.

RESOURCES: *(List resources that will be committed to implement strategy)*

- Staff
- Marketing materials

COLLABORATION: *(List partner organizations and/or community groups that will collaborate on strategy)*

- Bay Arenac Intermediate School District/Great Start Collaborative
- Northeast Michigan Community Service Agency
- Sterling Area Health Center
- MSU Extension
- St. Mary's of Michigan Standish Hospital
- Community Health Needs Assessment Workgroup
- Department of Health & Human Services
- Volunteers
- Grocers

ACTIONS: *(List main actions needed to implement strategy and achieve the SMART objectives above)*

STRATEGY 1: Increase the number of Double Up Food Bucks program providers in Arenac County.

1. By 04/2016, identify an organization to lead the project, as well as a project coordinator from within the organization.
2. Each month, conduct phone or in-person meetings that convene partners involved in planning and organizing the program.
3. By 05/2016, the Project Coordinator will educate partners about how to implement a Double Up Food Bucks program.
4. By June 30, 2016, establish baseline measures for the program by surveying Arenac County grocers.
5. By August 31, 2016, meet with grocers to assist them with the Double Up Food Bucks application process.
6. Track data measures on a quarterly basis.
7. Pending application approval, community outreach activities will be conducted to share education and resources (brochures, health fairs) with SNAP recipients.

ANTICIPATED IMPACT: *(List SMART objectives; ensure specific and measurable outcomes, i.e., change(s) in learning, actions and/or conditions):*

- I. By June 30, 2017, at least 1 Arenac County grocer will be participating in the Double Up Food Bucks program.
- II. By December 31, 2017, Arenac County SNAP recipients will redeem at least 50% of Double Up Food Bucks coupons as measured by grocer records.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
I, II	N/A	Michigan’s 4x4 plan: <ul style="list-style-type: none"> • Reduce the percentage of Michigan population who are obese from 31.7% to 30.6%; Overweight from 35.1% to 33.2%; • Increase amount of food stamp sales at Michigan Farmers Markets from \$705,969 to \$824,624 	Healthy People 2020: <ul style="list-style-type: none"> • NWS-8 Increase the proportion of adults who are at a healthy weight. • NWS-14 Increase the contribution of fruits to the diets of the population aged 2 years and older • NWS-15 Increase the variety and contribution of vegetables to the diets of the population aged 2 years and older

STRATEGY 2: Improve redemption of Project Fresh and Senior Fresh coupons

BACKGROUND INFORMATION:

- Target population: Low income; WIC eligible participants
- Briefly describe if/how the strategy addresses social determinants of health, health disparities and challenges of the underserved: Consuming a diet high in fruits and vegetables is associated with a decreased risk of many chronic diseases, including heart disease, stroke, high blood pressure, diabetes, obesity, and some cancers. Communities with better access to healthful foods tend to have healthier diets, including higher intakes of fruits and vegetables. In addition, residents of rural, minority, and lower-income neighborhoods are more likely to have poor access to supermarkets. In rural, minority, lower-income neighborhoods, convenience stores and other small grocery or “corner” stores may be more prevalent than supermarkets. Because these stores generally stock little or no produce due to limited space or equipment and may charge more for what is sold, residents of these neighborhoods may have limited access to fruits and vegetables.
- Strategy source (note if strategy is evidence-based and if it addresses policy, system or environmental change): The strategy is based on, The CDC Guide to Fruit & Vegetable Strategies to Increase Access, Availability and Consumption and addresses system and environmental change.

RESOURCES: *(List resources that will be committed to implement strategy)*

- Staff
- Marketing materials

COLLABORATION: *(List partner organizations and/or community groups that will collaborate on strategy)*

- Central Michigan District Health Department
- Department of Health & Human Services
- MSU Extension
- Community Health Needs Assessment Workgroup
- Sunrise Side Senior Services
- Grocers
- Farm Markets

ACTIONS: *(List main actions needed to implement strategy and achieve the SMART objectives above)*

1. Each month, conduct phone or in-person meetings that convene partners involved in planning and improving the redemption of Project Fresh and Senior Fresh coupons.
2. By 05/2016, conduct mapping of Arenac County grocers who accept Project Fresh and/or Senior Fresh coupons.
3. By 12/2016, meet with grocers who do not accept Project Fresh and/or Senior Fresh coupons.
4. By 10/2017, community outreach and social media promotion of Project Fresh and Senior Fresh participating retailers within Arenac County.

5. Update the Project Fresh and Senior Fresh retailers map on a quarterly basis.

ANTICIPATED IMPACT: *(List SMART objectives; ensure specific and measurable outcomes, i.e., change(s) in learning,*

- I. By 05/2016, create a map of Arenac County Project Fresh and Senior Fresh participating retailers.
- II. By 05/2017, increase the number of Arenac County retailers accepting Project Fresh and Senior Fresh coupons by 50% as measured by CM records.
- III. By 10/2017, increase Arenac County consumer awareness of Project Fresh and Senior Fresh participating retailers by 25% as measured by CM records.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
I, II, III	N/A	Michigan’s 4x4 plan: <ul style="list-style-type: none"> • Reduce the percentage of Michigan population who are obese from 31.7% to 30.6%; Overweight from 35.1% to 33.2%; • Increase amount of food stamp sales at Michigan Farmers Markets from \$705,969 to \$824,624 	Healthy People 2020: <ul style="list-style-type: none"> • NWS-8 Increase the proportion of adults who are at a healthy weight. • NWS-14 Increase the contribution of fruits to the diets of the population aged 2 years and older • NWS-15 Increase the variety and contribution of vegetables to the diets of the population aged 2 years and older

Prioritized Need #2: Behavioral Health Services

GOAL: Improve awareness and access to Behavioral Health Services by implementing a Mental Health First Aid program in Arenac County

Action Plan

STRATEGY 1: Implement a Mental Health First Aid program in Arenac County

BACKGROUND INFORMATION:

- Specify the target population: Arenac County residents
- Briefly describe if/how the strategy addresses social determinants of health, health disparities and challenges of the underserved: 1 in 5 Americans has a mental illness and many are reluctant to seek help or might not know where to turn for care. The symptoms of mental illness can be difficult to detect – even when friends and family of someone who appears to be developing mental illness can tell that something is amiss, they may not know how to intervene or direct the person to proper treatment – which means that all too often, those in need of mental health services do not get them until it is too late. Mental Health First Aid helps address this issue. It is a free public education program designed to help communities understand mental illness, seek timely intervention, and where to turn for help.
- Strategy source (note if strategy is evidence-based and if it addresses policy, system or environmental change): The strategy is based on the National Behavioral Health Council's evidence based practice - Mental Health First Aid. It addresses environmental change.

RESOURCES: *(List resources that will be committed to implement strategy)*

- Staff
- Funding
- Marketing materials

COLLABORATION: *(List partner organizations and/or community groups that will collaborate on strategy)*

- Bay Arenac Behavioral Health
- Bay Arenac Intermediate School District/Great Start Collaborative
- Sterling Area Health Center
- St. Mary's of Michigan Standish Hospital
- Community Health Needs Assessment Workgroup
- Arenac County school systems

ACTIONS: *(List main actions needed to implement strategy and achieve the SMART objectives above)*

1. Each month, conduct phone or in-person meetings that convene partners involved in planning and organizing the Mental Health First Aid program for Arenac County.
2. By 12/2016, recruit Mental Health First Aid instructors for both the adult and youth education programs.

STRATEGY 1: Implement a Mental Health First Aid program in Arenac County

3. Beginning 06/2016, seek funding.
4. By 12/2018, 2 trained adult and 2 trained children's Mental Health First Aid instructors in Arenac County.
5. By 12/2018, provide 6 Mental Health First Aid classes in Arenac County.
6. Collect and analyze program evaluation data as trainings are completed.

ANTICIPATED IMPACT: *(List SMART objectives; ensure specific and measurable outcomes, i.e., change(s) in learning, actions and/or conditions):*

- I. By 12/2018, increase the number of people trained as adult and children's Mental Health First Aid Instructors in Arenac County from 1 adult to 2 and from 0 youth to 2 youth.
- II. By 12/2018, provide six Mental Health First Aid classes in Arenac County.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	"HEALTHY PEOPLE 2020" (or OTHER NATIONAL PLAN):
I, II	N/A	Michigan Mental Health Commission: Ensure consistent access to integrated physical and behavioral health services.	Healthy People 2020: MHMD-1 Reduce Suicide Rates MHMD-2 Reduce Suicide Attempts by Adolescents

Prioritized Need #3: Physical Health (Access to primary care)

GOAL: Reduce emergency department visits through increased access to primary care services in Arenac County.

Action Plan

STRATEGY 1: Expand the availability of After Hours clinics and weekend appointments in Arenac County

BACKGROUND INFORMATION:

- Target population: Arenac County residents; poor and vulnerable population
- Briefly describe if/how the strategy addresses social determinants of health, health disparities and challenges of the underserved: Access to healthcare services is critical for residents who live in rural communities. According to Healthy People 2020, access to healthcare is important for: overall physical, social, and mental health status; prevention of disease; detection and treatment of illnesses; quality of life; preventable death; and life expectancy. Rural residents often experience barriers to healthcare that limit their ability to get the care they need. This includes access to services in a timely manner. In Arenac County, after hours/walk-in services are limited to evenings, Monday-Thursday. Those needing non-emergency medical attention outside of this timeframe either travel a distance to find a walk-in clinic or utilize the hospital's emergency department.
- Strategy source (note if strategy is evidence-based and if it addresses policy, system or environmental change): The strategy is based on the National Rural Health Association's Rural Healthy People 2020 and The Future of Rural Health policy brief. It addresses system and environmental change.

RESOURCES: *(List resources that will be committed to implement strategy)*

Staff

COLLABORATION: *(List partner organizations and/or community groups that will collaborate on strategy)*

- St. Mary's of Michigan Standish Hospital
- Sterling Area Health Center
- Bay Arenac Behavioral Health
- Central Michigan District Health Department
- Community Health Needs Assessment Workgroup
- Physicians/providers

ACTIONS: *(List main actions needed to implement strategy and achieve the SMART objectives above)*

1. Each month, conduct phone or in-person meetings that convene partners involved in expanding After Hours/Walk-in Clinics.
2. By 12/2016, collect data to determine the number After Hours/Walk-in clinics available in the county.

STRATEGY 1: Expand the availability of After Hours clinics and weekend appointments in Arenac County

3. By 12/2016, collect data on emergency department utilization for non-emergent healthcare issues.
4. By 6/2017, meet with clinic administrators to present data collected and discuss potential.

ANTICIPATED IMPACT: *(List SMART objectives; ensure specific and measurable outcomes, i.e., change(s) in learning, actions and/or conditions):*

- I. By 06/2017, bring community stakeholders together for one meeting to discuss After Hours/Walk-in clinic services within Arenac County.
- II. By 06/2018, expand After Hours/Walk-in hours at one Arenac County clinic to include evenings and/or weekend availability.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	"HEALTHY PEOPLE 2020" (or OTHER NATIONAL PLAN):
I, II	N/A	<p>Michigan Health & Wellness 4x4 Plan</p> <p>Michigan Center for Rural Health: Availability and Accessibility to Health Care Services/Goal C: Increase access to primary care and specialty care for rural residents</p>	<p>Healthy People 2020:</p> <ul style="list-style-type: none"> • AHS-3 Increase the proportion of persons with a usual primary care provider • AHS-G Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines.