

Fiscal Years 2020 – 2022

Ascension Borgess Hospital Community Health Implementation Strategy

CHNA conducted FY 2019 (July 1, 2018 – June 30, 2019)



Ascension Borgess Hospital Implementation Strategy

Implementation Strategy Narrative

Overview

Ascension Borgess Hospital (ABH,) a member of Ascension, is a non-profit Catholic health system. It is our mission to serve all persons with special attention to those who are poor and vulnerable. ABH is a 422-bed tertiary care hospital and flagship of Ascension Borgess Health with a continuum of health services from a Level II Trauma Center to primary and specialty care practices throughout southwest Michigan. While ABH's primary service area reaches five counties in southwest Michigan, and includes two additional counties in its secondary and tertiary service areas, the majority of Ascension Borgess Health inpatient and outpatient services are provided at ABH in Kalamazoo MI.

Situated in southwest Michigan, halfway between Chicago and Detroit, Kalamazoo County is home to both Stryker Medical, one of the world's leading medical technology companies, and a large manufacturing division of Pfizer Pharmaceuticals. Kalamazoo also enjoys the presence of Western Michigan University, the state's fourth-largest public university that includes a school of nursing and a privately funded medical school, Western Michigan University Homer Stryker School of Medicine; Kalamazoo College, one of the oldest private schools in the country; as well as Kalamazoo Valley Community College with nursing and medical technician programs.

Demographically, ABH's primary service area population is 262,985. The population (262,985) is 51% female and 49% male. In 2017, the racial demographics were 81.5% White; 11.7% Black or African American; 2.8% Asian, 3.5% two or more races; and 4.9% Hispanic or Latino. Kalamazoo County's average median household income is \$51,945, while 14% of Kalamazoo County is living in poverty.

The federal Affordable Care Act (ACA) requires all not-for-profit hospitals in the country to assess the health of the community. The intent of this assessment is to provide an overall view of the health of the community it serves. This assessment, called the Community Health Needs Assessment (CHNA), provides necessary data and information to hospitals that is invaluable when gaining in-depth knowledge of the community, residents, and patients. This assessment not only takes into consideration local, state and federal data but also assesses the social determinants of health (SDoH) which play a direct role in the health of the community, families and individuals. With the knowledge gained from the CHNA, hospitals are better equipped to fully understand major health needs that extend outside their walls.

ABH identified four distinct environments to assess during the 2019 CHNA process. These indicator groupings focus on upstream SDoH and are offered as best practice in research by the Bay Area Regional Health Inequities Initiative (BARHII) model depicting how factors impacting health can be presented through an upstream/downstream model – with upstream inequities that can create unequal living conditions. These unequal conditions then shape how we can approach our health behaviors, which lead to disparities downstream in disease, injury, and mortality. Data, both primary and secondary, quantitative and qualitative was collected, analyzed, shared and discussed with community stakeholders representing the populations served in the community. Over 1,000 community surveys were completed and key stakeholder focus groups and key informant interviews were also conducted throughout the 2019 CHNA process.

In the initial stages of the CHNA process, ABH, Bronson Healthcare, and Kalamazoo County Health and Community Services (KCHCS) formed a community planning workgroup. Bronson Hospital, the neighboring Kalamazoo hospital provider, is currently conducting a separate CHNA for its organization, as they are required to submit their CHNA report in December 2019, with an implementation plan to follow in early 2020. Even with differing timelines, both hospitals and KCHCS made every effort to collaborate in the Kalamazoo CHNA process to create a report for ABH, Bronson Health, and KCHCS to use to meet their respective CHNA requirements.

The planning workgroup met frequently to collect data and prepare for stakeholder meetings and met six times between November 2018 and May 2019 during the assessment process. ABH would like to recognize Bronson Healthcare and KCHCS, the local governmental public health entity, for their valuable input and expertise throughout the CHNA planning process.

ABH also contracted with the Michigan Health Improvement Alliance (MiHIA.) MiHIA is a 501(c)(3) not-for-profit organization with expertise in data collection, analysis and the CHNA process. MiHIA was brought into the process to conduct data collection and analysis, report findings to the Key Stakeholder Workgroup, facilitate the discussion and health issue prioritization process and to produce the final 2019 CHNA report.

Needs That Will Be Addressed:

- 1) Racism and Discrimination
- 2) Mental Health Assistance and Access
- 3) Access to Primary Care Providers

Needs That Will Not Be Addressed

- 1) Living Wage to Afford (housing, transportation, childcare, etc.) ABH does not currently have the capacity or expertise to address and impact this issue. Additional community partners are working to address this need and ABH will support community strategies to the extent this is feasible.

In addition to the four priority areas selected, two other areas were identified, but did not garner stakeholder support for inclusion and development into the implementation plan phase. These two areas are:

- Safe Housing
- Sexual Health

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

Prioritized Need #1: Racism & Discrimination

GOAL: Commit to ameliorating racism and discrimination within the organization.

Action Plan

STRATEGY 1: Design an awareness plan for ABH & AMG associates and providers.

BACKGROUND INFORMATION:

- **Target Population:** ABH associates and providers, Ascension Medical Group (AMG) associates, providers, and additional Ascension subsidiaries – TouchPoint, Medxcel, etc.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Health disparities among minority populations, which range from disease prevalence to health care access to health outcomes, are often linked to social, economic or environmental disadvantages, such as unemployment, unsafe neighborhoods, and lack of affordable transportation options – conditions known as social determinants of health (SDoH.) Equity in policies and inclusive providers were specific issues reported within this area of need. Key community stakeholder concerns and responses collected included the community's segregated neighborhoods; disparities in morbidity and mortality; minorities' lack of access to care; and redlining of mortgage rates. Although Kalamazoo is famous for the Kalamazoo Promise, a program which pays up to 100 percent of tuition to any of Michigan's state colleges or universities for graduates of the public high schools in Kalamazoo, only 9% of African American males are eligible for this initiative. Key stakeholders and community survey respondents reported the lack of inclusive providers and discriminatory treatment of minority patients, which leads to a lack of trust, resulting in patients who will not access services, especially preventative care. It is also important to note that qualitative data collection consistently showed that racism exists on multiple levels in the community, it is not exclusive to healthcare, but rather, institutional.
- **Strategy source:** *Strategies for Leadership: Does your hospital reflect the community it serves?* AHA. <https://www.aha.org/system/files/2018-02/DiversityTool.pdf>; A Diversity and Cultural Proficiency Assessment Tool for Leaders, *Diversity and Inclusion Initiative*, Step-by-Step: A Guide to Achieving Diversity and Inclusion in the Workplace. Third Sector, New England. www.tsne.org

RESOURCES:

- Ascension Human Resources
- ABH and AMG patient demographics
- Training resources
- Ascension Borgess Foundation
- *Making Healthcare Inclusive, Part 1*, Llopis, Glenn. Forbes, February 19, 2018.
- ABH Medical Library
- "Health in the Mitten." Health Equity in Michigan, A Toolkit for Action. https://www.michigan.gov/documents/mdch/Health_Equity_Toolkit_Presentation_411023_7.pdf

COLLABORATION:

- Ascension Marketing
- Ascension Borgess Diversity Council

STRATEGY 1: Design an awareness plan for ABH & AMG associates and providers.

- Ascension Borgess leadership
- Cradle Kalamazoo
- Truth, Racial Healing & Transformation Kalamazoo
- Western Michigan University Homer Stryker MD School of Medicine
- AmorXinc consulting
- Ascension Michigan ministries conducting similar work

ACTIONS:

1. Develop awareness campaign to include: mystery shoppers; collecting baseline data on demographics of workforce; patients and hospital board of trustees; highlighting patient experience stories; collecting evidence-based tools and local research findings and policies; researching grant opportunities for training resources; presenting findings to ABH and AMG leadership.
2. Provide unconscious bias training: unconscious bias training for leadership; subsequent Train-the-Trainer (unconscious bias) for sustainability; conduct additional trainings as needed.
3. **Resilience** documentary viewing and facilitated workshop for ABH and AMG providers.
4. Garner commitment from executive leadership to champion efforts.

ANTICIPATED IMPACT:

- I. By January 2019, develop an awareness plan for ABH/AMG associates, providers & subsidiaries.
- II. By February 2020, present awareness plan to ABH and AMG executive leadership.
- III. By April 2020, leadership will attend unconscious bias training & physicians and providers attend **Resilience** documentary workshop.
- IV. By May 2020, five associates will be trained to provide unconscious bias training through the Train-the-Trainer program.
- V. By June 2020, committee will be convened to develop Strategy 2 (below.)

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):
1	Cradle Kalamazoo: Reduce the infant mortality rate among babies of color in Kalamazoo to 6.0 (per 1,000 live births) by 2020;	MDHHS Mother Infant Health & Equity Improvement Plan Vision: Zero preventable deaths. Zero health disparities. https://www.michigan.gov/infantmortality/	Healthy People 2020 Framework Overarching Goals: Eliminate health disparities, achieve

Western Michigan
University Homer Stryker
School of Medicine;

“Addressing Race-based
Health Inequity through
Anti-Racism and Implicit
Bias Training for Future
Healthcare Providers”
project: Framework to
ensure healthcare providers
are educated on the social
determinants of health,
implicit bias and structural
racism.

Commit to ameliorating
racism and discrimination
within the organization;
ABH CHNA 2019

MDHHS Targeted Universalism & Equity
2.0

https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2955_2985---,00.html

health equity, and
attain health literacy to
improve the health and
well-being of all.

www.healthypeople.gov

STRATEGY 2: Design an associate and provider diversity training plan.

BACKGROUND INFORMATION:

- **Target population:** ABH and AMG associates, leadership, providers and subsidiaries
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Building on the concepts shared in the unconscious bias training, ABH associates, providers, subsidiaries and leadership will attend appropriate and customized training related to trauma informed care, health equity, cultural competence, etc., using evidence-based tools and curricula.
- **Source:** Dreachslin, JL. *Diversity Leadership from the Inside Out*. Hawaii J Med Public Health. 2015;74(7 Suppl 1):5.

RESOURCES:

- Ascension Borgess Foundation
- Strategies/actions built into annual budgeting process
- US Department of Health and Human Services virtual training
- Office on Women's Health, womenshealth.gov; Trauma Informed Care virtual training, <https://www.aquifer.org/courses/trauma-informed-care/>
- *Have you Really Addressed Your Patient's Concerns?* Epstein, Ronald M., MD; Mauksch. Larry, MEd; Carroll, Jennifer, MD, MPH; Jaen, Carlos Roberto, MD, PhD. American Academy of Family Physicians, 2008
- Kalamazoo County Fetal Infant Mortality Review Team (FIMR) Summary Issues and Recommendations, October 2018.
- Tool for Organizational Self-Assessment Related to Racial Equity, Coalition of Communities of Color, All Hands Raised, from the Eliminating Disparities in Child & Youth Success Collaboration, January 2014.

COLLABORATION:

- Ascension Borgess Diversity Council
- Ascension Borgess Leadership
- Cradle Kalamazoo
- Truth, Racial Healing & Transformation Kalamazoo
- Western Michigan University Homer Stryker MD School of Medicine
- Kalamazoo County Health and Community Services
- External consultants/companies with expertise in health equity, diversity, cultural competency and trauma informed care

ACTIONS:

1. Determine training roll-out; department priority.
2. Customize training for departments and by level of need.

STRATEGY 2: Design an associate and provider diversity training plan.

3. Develop evaluation tools.
4. Integrate training into new employee orientation (in-person and virtual) as feasible.
5. Utilize trainers from previous strategy to assist in training as appropriate.
6. Offer continuing education for associates as applicable.

ANTICIPATED IMPACT:

- I. By September 2020, present training plan to ABH and AMG executive leadership for approval
- II. By January 2021, training plan roll-out commences.
- III. By January 2022, execute evaluation of training to-date.

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):
2	<p>Cradle Kalamazoo: Reduce the infant mortality rate among babies of color in Kalamazoo to 6.0 (per 1,000 live births) by 2020;</p> <p>Western Michigan University Homer Stryker School of Medicine; "Addressing Race-based Health Inequity through Anti-Racism and Implicit Bias Training for Future Healthcare Providers" project: Framework to ensure healthcare providers are educated on the social determinants of health, implicit bias and structural racism.</p> <p>Commit to ameliorating racism and discrimination within the organization; <i>ABH CHNA 2019</i></p>	<p>MDHHS Mother Infant Health & Equity Improvement Plan Vision: Zero preventable deaths. Zero health disparities. https://www.michigan.gov/infantmortality/</p> <p>MDHHS Targeted Universalism & Equity 2.0 https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2955_2985---,00.html</p>	<p>Healthy People 2020 Framework Overarching Goals:</p> <p>Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all. www.healthypeople.gov</p>

STRATEGY 3: Develop an organizational plan to strengthen outreach, public engagement, and access to ABH & AMG for communities of color & immigrant and refugee communities using racial equity best practices.

BACKGROUND INFORMATION:

- **Target population:** Minority, poor and vulnerable populations within the community and service area
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Sharing of best practices and evidence-based resources will ensure appropriate policies and strategies for serving the target population.
- **Source:** Health Research & Educational Trust. 2015, July. *Diversity in Health Care: Examples from the Field*. Chicago, IL.: Accessed at www.hpoe.org

RESOURCES:

- Ascension Borgess Foundation
- Strategies/actions built into annual budgeting process
- Ascension Marketing
- Ascension Borgess Diversity Council
- ABH and AMG leadership

COLLABORATION:

- Family Health Center of Kalamazoo
- Cradle Kalamazoo
- Truth, Racial Healing & Transformation Kalamazoo
- Western Michigan University Homer Stryker MD School of Medicine
- Kalamazoo County Health and Community Services
- Kalamazoo County Community Mental Health and Substance Abuse Services
- ERACCE
- Kalamazoo Community Foundation
- City of Kalamazoo
- United Way of Greater Battle Creek and Kalamazoo Region
- Bronson Healthcare
- Western Michigan University
- Hispanic American Council
- Kalamazoo Valley Community College
- Samaritas and other agencies providing services to refugee populations
- Additional agencies as identified

ACTIONS:

1. Convene internal workgroup to develop action plan.

2. Assess needs of community partners & present findings to ABH & AMG leadership.
3. Identify ABH and AMG representatives.
4. Research potential grant opportunities.
5. Roll-out plan strategies and activities.

ANTICIPATED IMPACT:

- I. By March 2021, convene internal workgroup to develop action plan.
- II. By April 2021, assess needs of community partners.
- III. By June 2021, present plan to executive leadership.
- IV. By August 2021, identify resources to support action plan.
- V. By October 2021, roll-out action plan strategies and activities.

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

LOCAL/COMMUNITY PLAN:	STATE PLAN:	"HEALTHY PEOPLE 2020" (OTHER NATIONAL PLAN):
<p>Cradle Kalamazoo: Reduce the infant mortality rate among babies of color in Kalamazoo to 6.0 (per 1,000 live births) by 2020; Western Michigan University Homer Stryker School of Medicine;</p> <p>"Addressing Race-based Health Inequity through Anti-Racism and Implicit Bias Training for Future Healthcare Providers" project: Framework to ensure healthcare providers are educated on the social determinants of health, implicit bias and structural racism.</p> <p>Commit to ameliorating racism and discrimination within the organization; <i>ABH CHNA 2019</i></p>	<p>MDHHS Mother Infant Health & Equity Improvement Plan Vision: Zero preventable deaths. Zero health disparities. https://www.michigan.gov/infantmortality/</p> <p>MDHHS Targeted Universalism & Equity 2.0 https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2955_2985---,00.html</p>	<p>Healthy People 2020 Framework Overarching Goals: Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all. www.healthypeople.gov</p>

Prioritized Need #2: Access to Mental Health Assistance

GOAL: *Improve access to mental and behavioral health services.*

STRATEGY 1: Deliver behavioral health services effectively in the community.

BACKGROUND INFORMATION:

- **Target Population:** Kalamazoo community members and families with behavioral health needs.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Several factors have been linked to mental health, including race and ethnicity, gender, age, income level, sexual orientation, and geographic location. Other social conditions – such as interpersonal, family, and community dynamics, housing quality, social support, employment opportunities, and work and school conditions – can also influence mental health risk and outcomes, both positively and negatively. A better understanding of these factors, how they interact, and their impact is key to improving and maintaining the mental health of Kalamazoo residents. The 2019 ABH CHNA report highlighted stakeholder comments that the community's mental health system serves only the most severe cases; if one has a lesser severity, they may not be served. Stakeholders also notes that there is cultural stigma associated with mental health assistance. Community survey responses confirmed the need for improved access to behavioral health and substance abuse services. In addition, community stakeholders expressed concern that suicide rates are increasing, especially among older white males and African American males under 17 years of age, as well as veterans. ABH and Ascension Medical Group (AMG) offer extensive quality behavioral and mental health services. We offer inpatient, outpatient and aftercare treatment programs personalized for the needs of adults, seniors, adolescents and children. AMG's Delano outpatient behavioral health centers offer counseling and day treatment programs. The ABH behavioral health unit has 50 inpatient beds for adults and 6 beds dedicated for adolescents (ages 12-17.) The unit occupancy is approximately 75%, with the average daily census of approximately 3 patients for adolescents. The geropsychiatric unit services exist to meet the needs of adult patients 60 years and above. An adolescent day treatment program with psychiatric and medical evaluations and treatment, individual, family and group therapy, activity therapy, coping skills training and educational services, serves up to 20 patients. Enrollment often does not reach capacity. ABH's Behavioral Health Crisis Center is a newer unit, an 8-bed extension of the emergency department (ED) allowing patients a safe, appropriate space for care and treatment after presenting to the ED with behavioral health episodes and needs. AMG's Delano Clinic is recruiting therapists and psychiatrists to expand care services and an RN Navigator position has been hired as of July 2019 to assist patients with care management.
- **Strategy source:** <https://nam.edu/wp-content/uploads/2016/09/Improving-Access-to-Effective-Care-for-People-Who-Have-Mental-Health-and-Sustance-Use-Disorders.pdf>

STRATEGY 1: Deliver behavioral health services effectively in the community.

RESOURCES:

- Ascension Marketing
- ABH and AMG/DeLano clinic behavioral health associates and leadership
- US Department of Health and Human Services online training:
<https://thinkculturalhealth.hhs.gov/education/behavioral-health>
- MDHHS Evidence-Based Practice: Individual Placement and Support 2018 Data Report
https://www.michigan.gov/documents/mentalhealth/Michigan_2018_Report_656988_7.pdf

COLLABORATION:

- Kalamazoo County Community Mental Health & Substance Abuse Services
- Gryphon Place 2-1-1
- Community Healing Centers
- Pine Rest Christian Mental Health Services
- Southwest Michigan Behavioral Health
- Western Michigan University Homer Stryker MD School of Medicine
- United Way of Greater Battle Creek and Kalamazoo Region

ACTIONS:

1. Meet with Ascension Marketing to determine plan to increase awareness of AMG and ABH services for the community and Ascension Borgess Health associates and providers.
2. Present plan to executive leadership.
3. Roll-out marketing to the community, partner organizations, associates and providers.
4. Collaborate with community behavioral health partners to provide enhanced care coordination.

ANTICIPATED IMPACT:

- I. By January 2019, meet with Ascension Marketing to discuss plan to increase awareness of behavioral health services currently offered both at ABH and DeLano Clinic.
- II. By February 2020, present marketing plan to executive leadership.
- III. By April 2020, roll-out marketing plan.

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):
1	<p>Kalamazoo County Community Mental Health & Substance Abuse Services - Accessibility Plan</p> <p>Improve access to mental and behavioral health services; <i>ABH CHNA 2019</i></p>	<p><i>Reduce disparities in mental health outcomes.</i> - Michigan Department of Mental Health</p> <p>Ascension Michigan’s Behavioral Health Service Line Strategic Plan</p>	<p>Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind</p> <p>Healthy People 2020: • MHMD-4 Reduce the proportion of persons who experience major depressive episodes (MDEs) • MHMD-9 Increase the proportion of adults with mental health disorders who receive treatment</p>

STRATEGY 2: Conduct a Medical Mission at Home

BACKGROUND INFORMATION:

- **Target population:** Kalamazoo community members and families with behavioral health needs, specifically low-income, uninsured and underinsured residents of Kalamazoo, and those residents without a primary care provider.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Education, awareness and outreach are especially important to addressing stigma around accessing behavioral health services. Access to comprehensive, quality healthcare services is important for the achievement of health equity and for increasing the quality of life for all community members. A Medical Mission will increase access to medical services as the event will be held in a downtown location, making it easy for participants to walk to, or use public transportation, as many do not have other transportation options available. Access to medical care will be made available as physicians, mid-levels, nurses, medical assistants, and other healthcare providers will be on site to address basic health needs at the Mission. A representative from our population health department will also be present to make appointments for patients who need to establish with a primary care provider for ongoing care. Basic screenings will be provided to identify potential health concerns. Referrals will be made for treatment or services as needed. A relationship and connection with ABH and AMG healthcare providers will build trust for participants. Behavioral health services will be offered providing screenings and referrals. A variety of additional resources will be available from pharmacy to biometric screenings in an effort to provide access to care participants may not seek out regularly.
- **Source:** Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind

RESOURCES:

- Ascension Borgess Foundation
- Strategies/actions built into annual budgeting process
- ABH & AMG providers, associates, volunteers and Ascension subsidiaries
- Ascension Michigan Market ministries volunteers and leadership
- <https://ascension.org/our-work/healthcare/medical-mission-at-home>

COLLABORATION:

- Family Health Center of Kalamazoo
- United Way of Greater Battle Creek and Kalamazoo Region
- Local media
- Northside Ministerial Alliance
- Ascension Borgess Mission Teams
- Western Michigan University Homer Stryker MD School of Medicine
- Kalamazoo County Health and Community Services
- Local churches

STRATEGY 2: Conduct a Medical Mission at Home

ACTIONS:

1. Develop an internal multi-disciplinary team dedicated to the planning and implementation of a Medical Mission at Home.
2. Secure a location, select date, establish timeline and budget, identify and recruit community partners and internal volunteers.
3. Determine screenings and other services to be offered; incentives ordered; food planned.
4. Develop signage, order event t-shirts and other promotional items.
5. Develop patient registration and referral forms and evaluation tools.
6. Develop marketing materials and begin marketing event.
7. Conduct Medical Mission at Home in Kalamazoo.

ANTICIPATED IMPACT:

- I. By December 2019, develop an internal multi-disciplinary team dedicated to planning and implementation of a Medical Mission at Home.
- II. By January 2020, secure a location, select date, establish timeline and budget, identify and recruit community partners, internal and external partners.
- III. By February 2020, determine screenings and other services to be offered; order incentives, plan food.
- IV. By March 2020, develop signage, order event t-shirts.
- V. By April 2020, develop patient registration and referral forms, as well as evaluation tools.
- VI. By May 2020, develop marketing materials and begin marketing event.
- VII. By June 2020, conduct Medical Mission at Home in Kalamazoo.

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):
2	Kalamazoo County Community Mental Health & Substance Abuse Services - Accessibility Plan Improve access to mental and behavioral health services; <i>ABH CHNA 2019</i>	Reduce disparities in mental health outcomes. - Michigan Department of Mental Health	Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind Healthy People 2020: • MHMD-4 Reduce the proportion of

persons who
experience major
depressive
episodes (MDEs)
• MHMD-9 Increase the
proportion of adults
with mental health
disorders who receive
treatment

Prioritized Need #3: Access to Primary Care Providers

GOAL: Increase community access to primary care

Action Plan

STRATEGY 1: Increase the number of primary care appointments available in the community.

BACKGROUND INFORMATION:

- **Target Population:** Kalamazoo community members and families in need of primary care, specifically those residents who are underinsured, uninsured, poor and vulnerable.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Primary care plays a critical role in patient preventative health, with a usual source of care offering early detection and treatment of disease and chronic disease management. Patients with a usual source of care are more likely to receive recommended preventative services. However, disparities in access to health care exist, and many people face barriers that decrease access to services and increase the risk of poor health outcomes. Individuals face barriers that decrease access to services and increase the risk of poor health outcomes. Some of these obstacles include lack of health insurance, language-related barriers, disabilities, inability to take time off work to attend appointments, geographic and transportation-related barriers, and a shortage of primary care providers. Social determinants of health (SDoH) include factors such as socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care. Addressing SDoH is important for improving health and reducing longstanding disparities in health and health care. Further research is needed to better understand barriers to primary care, offer support to primary care providers, and develop interventions that expand primary care access. This additional evidence will facilitate public health efforts to address access to primary care as an SDoH.
- **Strategy source:** <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>; <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>

RESOURCES:

- Strategies/actions built into annual budget process
- Ascension Borgess Foundation
- ABH and AMG providers, associates (Care Coordinators, Community Health Workers, and Patient Navigators,) and leadership
- Ascension Business Development, Human Resources & Recruitment, Population Health
- Ascension Marketing
- Lyft and additional ride-share services

COLLABORATION:

- Family Health Center of Kalamazoo
- Kalamazoo County Health and Community Services
- Additional partners as identified
- Western Michigan University Homer Stryker MD School of Medicine

STRATEGY 1: Increase the number of primary care appointments available in the community.

- United Way of Greater Battle Creek and Kalamazoo Region

ACTIONS:

1. On-going - AMG practices accept Medicaid and schedule appointments for patients regardless of insurance type. Patients are not prioritized based on insurance type.
2. Onboard three new primary care providers (PCPs) at Ascension Westside Family Medical Center.
3. AMG strategies to improve access for patients by establishing policies and procedures to expand available appointment times for primary care visits.
4. Have contracts signed for 15 PCPs by Fall 2019 to start replacement of current primary care provider group leaving the organization in July 2020. These new providers will be expected to have open scheduling templates allowing for more patients to be seen each day than current scheduling processes allow.
5. Continue to recruit new providers as needed.
6. Virtual Care is offered via the Ascension Borgess website (utilizing Amwell providers) to any patient needing an acute visit, 24 hours a day, 7 days a week, 365 days per year.
7. Ascension Borgess ED attachment program and PCP referral program awareness. Any patient visiting the emergency department (ED) that does not have a PCP, meets with a Patient Navigator following the ED visit to assist with primary care establishment. For any patient going to one of our specialty care providers who does not have a PCP, the specialty provider can enter an "order" into the ABH/AMG electronic chart. The order generates a list for the Patient Navigator to follow-up with patients to assist them with primary care establishment.

ANTICIPATED IMPACT:

- I. As of June 2019, AMG practices accept Medicaid and schedule appointments for patients regardless of insurance type – patients are not prioritized based on insurance type.
- II. By Fall 2019 onboard three new PCPs at Ascension Westside Family Medical Center.
- III. By October 31, 2019 contracts signed for 15 PCPs to replace current PCP group leaving the organization July 2020.
- IV. Open scheduling templates as of 11/1/2019 begin to allow additional patient appointments.
- V. Ongoing – recruit additional PCPs as necessary.
- VI. Fall 2019 – marketing begins for the Virtual Care services.
- VII. By Spring 2020, promote Patient Navigator services for ED patients seeking to establish primary care.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
1	Increase community access to primary care; <i>ABH CHNA 2019</i>		<p>Healthy People 2020 target: 100% of adults will have health insurance. Health and Health Care is one of the five key determinants in the “place-based” organizing framework, reflecting 5 key areas of social determinants of health. AHS-1.1; AHS-3; AHS- 5.1; AHS-6.1;</p> <p>Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind</p>

STRATEGY 2: Conduct a Medical Mission at Home

BACKGROUND INFORMATION:

- **Target population:** Low-income, uninsured and underinsured residents of Kalamazoo, and those residents without a primary care provider.
- **How the strategy addresses social determinants of health, health disparities and challenges of the underserved:** Access to comprehensive, quality healthcare services is important for the achievement of health equity and for increasing the quality of life for all community members. A Medical Mission will increase access to medical services as the event will be held in a downtown location, making it easy for participants to walk to, or use public transportation, as many do not have other transportation options available. Access to medical care will be made available as physicians, mid-levels, nurses, medical assistants, and other healthcare providers will be on site to address basic health needs at the Mission. A representative from our population health department will also be present to make appointments for patients who need to establish with a primary care provider for ongoing care. Basic screenings will be provided to identify potential health concerns. Referrals will be made for additional treatment or services is needed. A relationship and connection with ABH and AMG healthcare providers will build trust for participants. Behavioral health services will be offered providing screenings and referrals. A variety of additional resources will be available from pharmacy to biometric screenings in an effort to provide access to care participants may not seek out regularly.
- **Source:** Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind

RESOURCES:

- Ascension Borgess Foundation
- Strategies/actions built into annual budgeting process
- ABH & AMG providers, associates (Care Coordinators, Community Health Workers and Patient Navigators,) volunteers and Ascension subsidiaries
- Ascension Michigan Market ministries volunteers and leadership
- <https://ascension.org/our-work/healthcare/medical-mission-at-home>

COLLABORATION:

- Family Health Center of Kalamazoo
- United Way of Greater Battle Creek and Kalamazoo Region
- Local media
- Northside Ministerial Alliance
- Ascension Borgess Mission Team
- Western Michigan University Homer Stryker MD School of Medicine
- Kalamazoo County Health and Community Services
- Local churches

ACTIONS:

STRATEGY 2: Conduct a Medical Mission at Home

1. Develop an internal multi-disciplinary team dedicated to the planning and implementation of a Medical Mission at Home.
2. Secure a location, select date, establish timeline and budget, identify and recruit community partners and internal volunteers.
3. Determine screenings and other services to be offered; incentives ordered; food planned.
4. Develop signage, order event t-shirts and other promotional items.
5. Develop patient registration and referral forms and evaluation tools.
6. Develop marketing materials and begin marketing event.
7. Conduct Medical Mission at Home in Kalamazoo.

ANTICIPATED IMPACT:

- I. By December 2019, develop an internal multi-disciplinary team dedicated to planning and implementation of a Medical Mission at Home.
- II. By January 2020, secure a location, select date, establish timeline and budget, identify and recruit community partners and internal volunteers.
- III. By February 2020, determine screenings and other services to be offered; order incentives, plan food.
- IV. By March 2020, develop signage, order event t-shirts.
- V. By April 2020, develop patient registration and referral forms, as well as evaluation tools.
- VI. By May 2020, develop marketing materials and begin marketing event.
- VII. By June 2020, conduct Medical Mission at Home in Kalamazoo.

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

OBJECTIVE:	LOCAL / COMMUNITY PLAN:	STATE PLAN:	“HEALTHY PEOPLE 2020” (or OTHER NATIONAL PLAN):
2	Increase community access to primary care; <i>ABH CHNA 2019</i>		<p>Ascension Medical Mission Initiative – Healthcare That Leaves No One Behind</p> <p>Healthy People 2020 target: 100% of adults will have health insurance. Health and</p>

Health Care is one of the five key determinants in the “place-based” organizing framework, reflecting 5 key areas of social determinants of health.
AHS-1.1; AHS-3; AHS-5.1; AHS-6.1;