

# 2022-25

## Community Health Needs Assessment

IMPLEMENTATION STRATEGY



## Introduction

Many factors combine to determine the health of a community. In addition to disease, community health is affected by education level, economic status, environmental issues, substance use, and the personal choices of those who live, work, and play in the community. No single individual, community group, hospital, agency, or governmental body can address the multitude of issues alone. However, working together, we can understand the issues and create a plan to address them.

The Munson Healthcare 2022 Community Health Needs Assessment (CHNA) represents a collaborative, community-based approach to identify, assess, and prioritize the most important health issues affecting our community, giving special attention to the marginalized and underserved in our service area. This work was facilitated through the MiThrive Partnership, a regional, collaborative project designed to bring together dozens of organizations across 31 counties of northern Michigan. Together, we identify local needs and work together to improve the health of our communities.

Learn more about MiThrive: <https://northernmichiganchir.org/>

### Strategic Issues and How Priorities Were Established

Strategic issues were identified through a collaborative process led by MiThrive using the Mobilizing for Action through Planning and Partnerships (MAPP) process, a community-driven strategic planning process for improving community health. Strategic issues are broader than individual health conditions, and represent underlying challenges that need to be addressed, which would lead to improvement in health conditions. Each strategic issue should impact more than one health condition. The graphic on page two describes the steps taken and the resulting strategic priorities.

In addition to the strategic issues listed below, the following challenges were also uncovered in the data:

- Broadband Access
- COVID-19
- Economic Security
- Equity
- Healthy Food
- Healthy Weight
- Infrastructure for Healthy Lives
- Safety and well-being
- Transportation

Munson Healthcare acknowledges the wide range of issues that emerged from the CHNA process and determined that with the broad nature of the strategic issues we could effectively focus on only those issues that were prioritized the highest by our community. However, some of these issues—including equity—are foundational components of all the work of the organization and will be indirectly targeted through many of the strategies listed in this plan.

### Munson Healthcare Mission

Munson Healthcare and its partners will work together to provide superior quality care and promote community health.

### Munson Healthcare Vision

Working together, we will be the first choice for care within the communities we serve.

### Munson Purpose Statement

We improve lives.

# Community Health Needs Assessment At-A-Glance

## → Engage partners for collaboration

Partners joined together to take a comprehensive look at the health and well-being of residents and communities.



Led by the Northern Michigan CHIR whose mission is to improve population health, increase health equity, and reduce unnecessary medical expenses through partnerships and systems change



31 counties in Northern Michigan participated



Diverse representation from hospitals, health departments, community-based organizations, coalitions, agencies and residents

## → Collect and analyze data

Quantitative and qualitative data was collected to identify and understand the issues

152 participants in three community system assessment regional events

840 residents facing barriers participated in pulse surveys

3,465 residents completed community surveys

100 local, state and national indicators collected by county

354 physicians, nurses and clinicians completed healthcare provider surveys

199 participants in three regional assessment events

396 participants in focused conversations at 28 community collaborative meetings

## → Identify needs and select priority issues

Each region held a data walk and priority-setting event which resulted in the following top ranked issues.

### Northwest Region

1. Safe, Affordable and Accessible Housing
2. Mental Health & Substance Use Disorders
3. Access to healthcare
4. Chronic Disease

### Northeast Region

1. Substance Use
2. Mental Health Services
3. Access to Healthcare
4. Chronic Disease

### North Central Region

1. Substance Use
2. Mental Health
3. Access to Healthcare
4. Chronic Disease



To read the full CHNA report visit:  
[Community Health Needs Assessment | Munson Healthcare | northern Michigan](http://Community Health Needs Assessment | Munson Healthcare | northern Michigan)

## Action Plan | Fiscal Years 2023-2025

The strategies below represent actions the hospital system will take across the entire Munson Healthcare service area (Appendix A). Prioritized strategies demonstrate the hospital system's level of commitment to intentionally serve marginalized populations through diverse, equitable, and inclusive actions. With few exceptions, programs and initiatives will target all MHC hospitals and affiliated clinics. See Appendix B for a complete list of strategies each hospital intends to implement.

Community Health systems change work is collaborative and requires interdisciplinary interventions to fully achieve goals. The hospital system is committed to providing resources to support programming, participation in collaborative projects, boards, and support for other community improvement projects related to our priority strategic issues. Some of the stated actions will be led by MHC, while the hospital system will partner, and support work led by other community organizations. Due to the difficult nature of collecting metrics through multiple community partners, impact measurements will primarily represent work that MHC leads, leaving impact reports of work we support to the community partners leading the work.

## Mental Health and Substance Use Disorders

### Expand Access

- ✓ Expand substance use disorder best practice treatment within primary care clinics and expand Peer Recovery Coach model
- ✓ Continue systems change to best care for infants born in withdrawal
- ✓ Work with community partners to increase the number of providers
- ✓ Collaborate with partner agencies to explore options for crisis stabilization

### Reduce Stigma

- ✓ Collaborate with partner agencies to implement mental health stigma and substance use stigma reduction campaigns
- ✓ Develop and deploy staff and provider education on mental health and substance use disorder stigma

### Expand Harm Reduction Strategies

- ✓ Expand Narcan, MedSafe, HIV testing and suicide prevention efforts

### Reduce Impact of Trauma

- ✓ Collaborate with partner agencies to provide education and resources on Adverse Childhood Experiences (ACE) and resiliency
- ✓ Offer trauma informed care education to MHC staff and providers

### Improve Opportunities for Screening

- ✓ Expand universal self-disclosure screening with interventions for maternal substance use disorder

 Actions represent work in partnership with the Community Health Innovation Region Behavioral Health Initiative

## Anticipated Impact

The following metrics will be regularly tracked. Additional, strategy-specific metrics will be identified, measured, and reported through the *Evaluation of Impact*, as appropriate.

- |  |  |                                    |  |  |
|--|--|------------------------------------|--|--|
| ✓ % of infants with NAS treated by non-pharmacologic management                              | ✓ # interactions with stigma campaign resources  | ✓ # pounds of medication collected | ✓ % of providers who indicate that education provided will influence the way they practice | ✓ # of high tech high-touch screenings and brief interventions |
| ✓ # offices and Emergency Departments practicing Medication for Opioid Use Disorder standard | ✓ % of providers who indicate that education provided will influence the way they practice | ✓ # patients tested for HIV        | ✓ # Narcan kits distributed  |  |
|  | ✓ # of employees who engage in education   |                                    |  |  |

## Safe, Affordable, and Accessible Housing

### Expand Partnerships

- ✓ Collaborate with partners to optimize medical care delivery to those who are unhoused through residency education and the Street Medicine Program
- ✓ Increase referrals to Community Connections for support accessing basic needs, including housing

### Increase Screening

- ✓ Coordinate with physician partners to optimize screening technology that identifies gaps in safe housing amongst our patient population

### Deploy Targeted Education

- ✓ Create educational resources that address the most pressing safe housing issues determined via screening

### Support Policy Change

- ✓ Endorse policies and projects around safe and affordable housing with community partners

 Actions represent work in partnership with the Community Health Innovation Region

## Anticipated Impact

The following metrics will be regularly tracked. Additional, strategy-specific metrics will be identified, measured, and reported through the *Evaluation of Impact*, as appropriate.

- ✓ # patients served through the Street Medicine Program
- ✓ # referrals to Community Connections

- ✓ Track reported housing barriers to inform future interventions

- ✓ # interactions with educational resources

- ✓ # policy and projects supported

## Access to Healthcare

### Build Trust

- ✓ Collaborate with Michigan Health and Hospital Association to advance best practice priorities around Diversity, Equity and Inclusion to reduce barriers to accessing healthcare
- ✓ Apply quality improvement initiatives and policy changes that honor equitable care for racial/ethnic minority groups, people with disabilities, members of the LGBTQ+ community, individuals with limited English proficiency, rural populations, religious minorities, and people facing socioeconomic challenges
- ✓ Educate healthcare providers and staff to provide culturally competent care

### Leverage Technology

- ✓ Enhance telehealth to support chronic disease prevention and management programs
- ✓ Expand use of patient portal and text messaging for patient education and resources
- ✓ Utilize a screening tool to collect and analyze a multitude of patient-level health related social needs related to diversity, equity and inclusion

- ✓ Leverage and expand Healthy Futures program for parents with newborns including home visiting and educational initiatives
- ✓ Support MHC recruitment and retention strategy by enhancing opportunities for employee well-being

## Anticipated Impact

The following metrics will be regularly tracked. Additional, strategy-specific metrics will be identified, measured, and reported through the *Evaluation of Impact*, as appropriate.

- ✓ 100% completion of MHC DEI Task Force key objectives for FY 2023-2025.
- ✓ # interactions with educational materials shared via portal
- ✓ # births with a Healthy Futures home visit
- ✓ Healthy Futures enrollment

## Chronic Disease

Diabetes

Heart Disease

Cancer

- ✓ Systematize and expand existing programs that support chronic disease reduction to maximize participation across the region, including:
  - Culinary Medicine
  - Tobacco Cessation
  - Diabetes Prevention Programs and Diabetes Self-Management Education
- ✓ Utilize community-based educational and awareness campaigns to support the inclusive prevention and screening of diabetes, heart disease and cancer

### Anticipated Impact

The following metrics will be regularly tracked. Additional, strategy-specific metrics will be identified, measured, and reported through the *Evaluation of Impact*, as appropriate.

- ✓ # enrolled in tobacco cessation class
- ✓ 3-month tobacco cessation quit rate
- ✓ # Diabetes-Self Management Education referrals
- ✓ # employees participating in virtual diabetes prevention program
- ✓ Colorectal cancer screening rate
- ✓ Breast cancer screening rate
- ✓ # interactions with educational resources

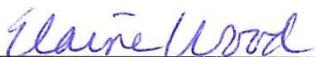
## **Next Steps for Munson Healthcare**

Improving community health requires a broad focus and coordination among diverse agencies and stakeholders. These strategies and activities will be implemented in coordination with MiThrive and our other community partners. We will also work closely with the MiThrive collaborative to ensure that our implementation strategy and efforts align with broader community efforts. The goal is to continue to build new partnerships and gather input from more organizations and residents. The process is also the foundation that we will use to continue to collaboratively plan, develop, and foster programs to effectively address those needs in our community.

The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending 2025, other organizations in the community may decide to address certain needs, indicating that the Hospital then should refocus its limited resources to best serve the community.

## **Approval**

This implementation strategy was reviewed and recommended for approval by the Munson Healthcare Community and Population Health Committee. On October 5, 2022, the Munson Healthcare Board of Directors approved this implementation strategy.



Munson Healthcare Board of Directors, Chair



Date

## **Comments and Questions**

To share your feedback or comments contact [MHC-Community-Health-Staff@mhc.net](mailto:MHC-Community-Health-Staff@mhc.net).

## Appendix

### Appendix A: Complete Service Area Listing

Hospital	Service Area
Cadillac Hospital	Lake, Missaukee, Osceola, and Wexford Counties
Charlevoix Hospital	Charlevoix and Emmet Counties
Grayling Hospital	Crawford, Oscoda, and Roscommon Counties
Manistee Hospital	Manistee County
Medical Center	Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau Counties
Otsego Hospital	Cheboygan, Montmorency, and Otsego Counties
Paul Oliver Memorial Hospital	Benzie County

### Appendix B: Strategies Each Hospital Intends to Implement

Strategy	Intervention	Cadillac Hospital	Charlevoix Hospital	Grayling Hospital	Manistee Hospital	Munson Medical Center	Otsego Hospital	Paul Oliver Memorial
<b>Mental Health/ Substance Use Disorder</b>	Expand substance use disorder best practice treatment within primary care clinics and expand Peer Recovery Coach model	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Continue systems change to best care for infants born in withdrawal*	X	X	X		X	X	
<b>Mental Health/ Substance Use Disorder</b>	Work with community partners to increase the number of providers	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Collaborate with partner agencies to explore options for crisis stabilization	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Collaborate with partner agencies to implement mental health stigma and substance use stigma awareness campaigns	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Develop and deploy staff and provider education on mental health and substance use disorder stigma	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Expand Narcan, MedSafe, HIV testing, and Suicide prevention efforts	X	X	X	X	X	X	X

Strategy	Intervention	Cadillac Hospital	Charlevoix Hospital	Grayling Hospital	Manistee Hospital	Munson Medical Center	Otsego Hospital	Paul Oliver Memorial
<b>Mental Health/ Substance Use Disorder</b>	Collaborate with partner agencies to provide community education and resources on Adverse Childhood Experiences (ACE) and resiliency	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Offer trauma informed care education to MHC staff and providers	X	X	X	X	X	X	X
<b>Mental Health/ Substance Use Disorder</b>	Expand universal self-disclosure screening with interventions for maternal substance use disorder	X	X	X	X	X	X	
<b>Safe, Affordable, Accessible Housing</b>	Collaborate with partners to optimize medical care delivery to those who are unhoused through residency education and the Street Medicine Program					X		
<b>Safe, Affordable, Accessible Housing</b>	Increase referrals to Community Connections for support accessing basic needs, including housing	X	X	X	X	X	X	X
<b>Safe, Affordable, Accessible Housing</b>	Coordinate with physician partners to optimize screening technology that identifies gaps in safe housing amongst our patient population	X	X	X	X	X	X	X
<b>Safe, Affordable, Accessible Housing</b>	Create educational resources that address the most pressing safe housing issues determined via screening	X	X	X	X	X	X	X
<b>Safe, Affordable, Accessible Housing</b>	Endorse policies and projects around safe and affordable housing with community partners	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Collaborate with Michigan Health and Hospital Association to advance best practice priorities around Diversity, Equity, and Inclusion to reduce barriers to accessing healthcare	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Apply quality improvement initiatives and policy changes that honor equitable care for racial/ethnic minority groups, people with disabilities, members of the LGBTQ+ community, individuals with limited English proficiency, rural populations, religious	X	X	X	X	X	X	X

Strategy	Intervention	Cadillac Hospital	Charlevoix Hospital	Grayling Hospital	Manistee Hospital	Munson Medical Center	Otsego Hospital	Paul Oliver Memorial
	minorities, and people facing socioeconomic challenges							
<b>Access to Healthcare</b>	Educate healthcare providers and staff to provide culturally competent care	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Enhance telehealth to support chronic disease prevention and management programs	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Expand use of patient portal and text messaging for patient education and resources	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Utilize a screening tool to collect and analyze a multitude of patient-level health related social needs related to diversity, equity, and inclusion	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Leverage and expand Healthy Futures program for parents with newborns including home visiting and educational initiatives	X	X	X	X	X	X	X
<b>Access to Healthcare</b>	Support MHC recruitment and retention strategy by enhancing opportunities for employee well-being	X	X	X	X	X	X	X
<b>Chronic Disease</b>	Systematize and expand existing programs that support chronic disease reduction to maximize participation across the region	X	X	X	X	X	X	X
<b>Chronic Disease</b>	Utilize community-based educational and awareness campaigns to support the inclusive prevention and screening of diabetes, heart disease and cancer	X	X	X	X	X	X	X

\*Strategy applies only to birthing hospitals.