Table of Contents

4. Letter from the Directors
5. Community Health Needs Assessment / Community Benefit
10. The 7 Community Health Needs Assessment Priorities
19. Community Programs & Services
21. Interpreter Services
22. Volunteer Services
23. Accommodations
24. Friends Gift Shops
25. Comprehensive Gender Services Program
26. Program for Multicultural Health
28. Adolescent Health Initiative
29. Regional Alliance for Healthy Schools
31. Ann Arbor Meals on Wheels
32. Housing Bureau for Seniors
From the Directors

The University of Michigan Health System is working harder than ever to improve and sustain the health of the communities it serves. It is an exciting and challenging time; a time of shifting reimbursement models, increased expectations for health systems to be leaders in influencing population health outcomes, and a time that brings with it new opportunities for collaboration.

The Affordable Care Act (ACA) challenges us to move beyond the walls of our institutions and inpatient service delivery, and it holds us accountable for a greater focus on community health improvement. In 2013, UMHS published our inaugural, federally mandated Community Health Needs Assessment (CHNA) and Implementation Plan (IP) – offshoots of the new ACA requirements. Though seven needs were identified, our efforts have focused on the first four priorities identified as “Tier One”-- Access to Care, Mental Health, Substance Abuse, and Obesity. The remaining priorities-- Pre-conceptual and Perinatal Health, Immunizations, and Child Abuse and Neglect Prevention-- are just as important to the health of our community and work to address these needs is ongoing.

UMHS Community Programs and Services (CPS) is a strong resource that connects our health system with the community and is a major conduit to address the priorities identified in the CHNA. CPS consists of nine programs that provide services and health education, promotion, and prevention. CPS embodies the UMHS mission as we:

• Train students on how to engage the community and provide opportunities for them to practice these skills;
• Provide a platform for researchers to connect with potential clinical research participants; and
• Create avenues for faculty to educate and inform the community about existing or new clinical services.

Internally, CPS supports our health system’s mission and pursuit of excellence in various ways:

• Interpreter Services ensure that our Limited English Proficient (LEP) and deaf and hard of hearing patients are empowered to be active partners in their well-being;
• More than 2,000 volunteers support operational and service excellence by augmenting the work of our faculty and staff – a value of over $3 million dollars and the equivalent of 72 FTEs – to assist various needs of our patients and their families; and
• Four Friends Gift Shops contribute to our financial health by generating funds to provide grants allocated to promote health, welfare, and education for the community. In FY 2014, $270,000 was awarded to UMHS programs with an additional commitment of $250,000 (over five years) to the North Star Reach Camp.

As health care evolves and we work to navigate the changing landscape of community benefit and the community health needs assessment, we will use our greatest resource – the community – to design innovative programs and services that have positive impact, reflect our values, mission, and vision for the future of health care. We are proud to present FY 2014 (July-June) accomplishments. They reflect strong collaborative efforts with the local community and U-M campus and demonstrate the power of what can be achieved when we partner around shared goals that result in a healthier community.

Yours in partnership,
Kathy Wade, PhD, LMSW, Director, Patient Family Services and Community Health Services
Maria Thomas, MA, MPA, Director, Community Health Needs Assessment and Community Benefit
Alfreda R. Rooks, MPA, Director, Community Programs & Services
The University of Michigan Health System is committed to improving and sustaining the health of the communities it serves. To this end, we offer a range of free and low cost services to the general community, with a focus on underserved and low income populations. Programs and services that qualify as Community Benefit are designed to increase access to care and improve community health.

**BACKGROUND**

Every tax-exempt hospital is required to prepare a Community Benefit Report to justify their tax-exempt status. The Patient Protection and Affordable Care Act of 2010 (ACA) requires tax-exempt hospitals to conduct and publicly report a Community Health Needs Assessment and Implementation Plan every three (3) years.

These new requirements are designed to ensure that community benefit activities are responsive to priority community health needs identified, and are both measurable and transparent. Failure to comply with these requirements could lead to a $50,000 excise tax and possible loss of tax-exempt status.

The first UMHS Community Health Needs Assessment was published in June 2013. The next report is due in 2016.

**MISSION**

To achieve and sustain measurable improvements in the health of the Washtenaw County based on the areas identified community health needs assessment.

The 2013 Community Health Needs Priorities are endorsed by the Hospitals and Health Centers Executive Board (HHCEB) in accordance with the ACA requirements.

<table>
<thead>
<tr>
<th>CHNA PRIORITIES 2013</th>
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</thead>
<tbody>
<tr>
<td><strong>Tier 1</strong></td>
</tr>
<tr>
<td>Access to Care</td>
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<tr>
<td>Mental Health</td>
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<tr>
<td>Substance Abuse</td>
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<tr>
<td>Obesity</td>
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</table>
FY15 ACTIVITIES

UMHS is currently working to strengthen the alignment of CHNA processes with our strategic planning goals. In order to maximize the effectiveness of these processes, innovative strategies, and community partnerships are being developed to ensure greater innovation. In collaboration with these partners, UMHS will explore the means for developing a joint CHNA, IP with shared goals and metrics for Washtenaw County. See Table 2.

Table 2

<table>
<thead>
<tr>
<th>Health Issue</th>
<th>UMHS</th>
<th>SJMHS</th>
<th>CCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Mental Health</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Substance Abuse</td>
<td>X</td>
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<td>X</td>
</tr>
<tr>
<td>Access to Care</td>
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<td></td>
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<tr>
<td>Immumizations</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Pre-conceptual &amp; Perinatal Health</td>
<td>X</td>
<td></td>
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<tr>
<td>Child Abuse &amp; Neglect Prevention</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>Heart Disease &amp; Stroke</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Mammograms</td>
<td></td>
<td>X</td>
<td></td>
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<tr>
<td>Breastfeeding</td>
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</tr>
</tbody>
</table>

FY15 TASKS

Task 1 Based on new Internal Revenue Service (IRS) regulations and national benchmarking, prepare recommendations for UMHS Leadership on community health improvement strategies.

Task 2 Develop CHNA strategic plan using an internal review process (SWOT).

Task 3 Conduct PDCA on community benefit data collection process by convening focus groups of faculty and staff to solicit their feedback.

Task 4 Evaluate community benefit programs against CHNA priorities.

Task 5 Report FY13 community benefit by August 2014.
CURRENT STATE OF COMMUNITY BENEFIT

Currently, UMHS community benefit has shown steady and continuous growth as a percentage of change year-over-year from FY2006 to FY2012. The trend data (see Chart 2) attributes this continuous growth to increases in Research and Unpaid Costs of Government Programs.

Chart 1

Annual CB Totals and Percent Change (Year-over-Year) (MHA) FY06 - FY12

Chart 2

Trends by CB Category (MHA) FY2006 - FY2012
THREATS TO COMMUNITY BENEFIT

UMHS continues to demonstrate increasing community benefit investment from FY06 to FY12; these numbers may decline in the coming years due to varying factors:

Factor 1  New IRS regulations further restrict what is reportable (e.g. the IRS no longer considers grant-funded community programs a community benefit).

Factor 2  Stricter rules regarding research dollars as a community benefit.

Factor 3  Medicaid expansion, increased access to insurance will reduce the amount of charity care and bad debt counted as community benefit.

Non-profit hospitals may be expected to offset these impending declines in CB dollars by doing more “programs for the community”. At UMHS, community programs are a very low percentage of community benefit (see Chart 2), but a section that is anticipated to have greater scrutiny.

The mandate to conduct CHNA and develop implementation strategies, coupled with the exclusion of “community benefit” dollars attained from external organizations (e.g., Michigan Department of Community Health (MDCH)) is expected to compel hospitals to invest more in community.
CPS Alignment With The Seven Community Health Needs Assessment Priorities

1. Access to Care
2. Mental Health
3. Substance Abuse
4. Obesity
5. Immunizations
6. Pre-conceptual & Perinatal Health
7. Child Abuse & Neglect Prevention
UMHS is committed to ensuring that medically underserved and at-risk patients and their families have access to all the care and support they need to be healthy. CPS believes that access begins with culturally appropriate services, meeting individuals where they live, work, and play. Some examples of our work to improve access to care include:

- Added six Direct Interpreter Access Lines (D-I-A-L) so patients can reach their providers with an interpreter on the line with them when they first connect with their health care provider;
- Created Communication Sheets (inpatient use) and Registration Cards (outpatient check-in) for LEP patients;
- Piloted Deaf Health Talks series to provide health information in American Sign Language in partnership with Dr. Michael McKee of UMHS Family Medicine;
- Increased access to lodging options by adding Wilmot House and Transplant House to the Patient Visitor Accommodation Program;
- Increased services for transgender patients and families by adding support groups for parents, spouses, youths, and other community members;
- Provide health education, prevention, and health promotion workshops to more than 1,200 community members annually;
- Conducts Community Flu Shot Program that serves nearly 500 at-risk seniors and people with chronic illnesses annually;
- Provided health services to over 1,600 at-risk adolescents, 328 vision screenings, and 320 dental screenings to students at 6 school-based health centers in Washtenaw County;
- Assisted 566 families with insurance enrollment and 1,211 families with tangible needs coordination
- Conducted Medicaid outreach to over 6,800 community members
- Conducted annual Senior Living Week event to promote senior living, health, care, and more to area seniors and their families and caregivers
CPS offers physicians and allied health professionals education on how to improve the provider relationship with underserved populations. The education includes counseling, resources, and referral services to patients and their families identified with psychosocial needs.

- Provides interpreting services to LEP and Deaf and Hard of Hearing patients with Mental Health related issues;
- Provides Parents/Guardians, Spouses/Partners, Youth, and Patient Support Groups;
- Trains providers to work with Teens and Adolescents with Mental Health issues (annual Adolescent Health Conference);
- Provides mental health services to over 400 students (over 2300 individual mental health visits and over 47 group mental health sessions through school-based health centers);
- Provides physical and mental safety checks to ensure our clients’ safety with each meal delivery; and
- Partners with the Hoarding Task Force to assist clients with hoarding issues.

CPS helps patients and their families receive care for substance abuse issues.

- Trains providers to work with Teens and Adolescents with Substance Abuse issues (annual Adolescent Health Conference, 2014)
- Provides support services to youth to overcome substance abuse issues
- Provides a 6-day/week safety check to ensure our clients are taking their medication safely and appropriately.
To combat the growing obesity problem in our communities, especially among underserved and high risk populations, CPS provides both physical health services and individual and group nutrition counseling to patients identified as being overweight or obese.

- Provides nutrition counseling to over 230 patients (more than 860 Individual visits and 30 group sessions at school-based health centers);
- Works with UMHS Nutrition and Food Services to ensure clients meals are balanced, nutritious, and medically appropriate; and
- Conducts healthy eating and physical activity workshops for seniors, adults, and children.

CPS focuses on prevention and health education to help control chronic conditions and establish healthy behaviors that help reduce the incidence of costly diseases and promote the regular use of health services.

- Conducts Community Flu Shot Program that annually serves nearly 500 people. Flu shot priority given to at-risk populations as defined by the CDC; and
- Conducts annual health and wellness immunizations for area students and the families at school-based health centers.
CPS works with at-risk patients and families that need pre-conceptual and perinatal health services ensuring they receive high-quality healthcare.

- Provides strategic planning, capacity building, research support and education to over 200 people on persistent systemic disparities experienced by African American mothers interested in breastfeeding.
- Collaborates with MI Breastfeeding Network to educate, disseminate health education, and health promotion that address disparities in breastfeeding outcomes.

The UMHS Child Protection Team delivers interventions focused on identifying child maltreatment, and preventing, assessing, and treating abused children. CPS works with at-risk and underserved parents and families to prevent child neglect and abuse where they live.

- Provides anger management and stress management counseling to students at school based health centers;
- Provides positive parenting workshops to young mothers and their families residing in public housing;
- Conducts stress management workshops for women; and
- Conducts personal empowerment series to community residents in public housing.
MISSION

To provide programs and services that benefit patients and families, promote health equity, access to care, and connect UMHS to the communities it serves.

OVERVIEW

Created in 1997 as Community Health Services, the department was charged with aligning community initiatives across the health system through program coordination, strategic planning and resource allocation (e.g., mini-grants to the community for health events, publication of the Community Beat, and Community Health Improvement Task Force).

Restructured in 2012, renamed Community Programs and Services, the department provides programs and services that align with the UMHS mission. Working in partnership with community members and funders provides services that decrease health disparities and increase health equity for the individual and families across the lifespan (e.g., WCHD Community Conversations, Community Health Advocates Program (CHAP), increased demand from community partners, cultural competency training, and training medical, public health, pharmacy, and nursing students).

CPS ALIGNMENT WITH CHNA PRIORITIES

UMHS Community Programs & Services is a strong resource that connects our health system with the community and is a major conduit to address the priorities identified in the Community Health Needs Assessment.

Table 3

<table>
<thead>
<tr>
<th>CHNA Priorities</th>
<th>Access to Care</th>
<th>Mental Health</th>
<th>Substance Abuse</th>
<th>Obesity</th>
<th>Immunizations</th>
<th>Pre-Conceptional &amp; Pernatal Health</th>
<th>Child Abuse &amp; Neglect Prevention</th>
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</thead>
<tbody>
<tr>
<td>Interpreter Services</td>
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<td>X</td>
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<tr>
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<td>X</td>
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<tr>
<td>Program for Multicultural Health</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Adolescent Health Initiative</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Regional Alliance for Health Schools</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Ann Arbor Meals on Wheels</td>
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<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Housing Bureau for Seniors</td>
<td>X</td>
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</table>

CPS
CPS is adept at securing external funding to augment UMHS dollars for community-based programs. Sponsored funding (grants) from external organizations (e.g. MDCH) is 91% of CPS external funding. New IRS regulations limiting what is reportable (See Threats to Community Benefit) change the status of these programs (e.g., RAHS services are no longer considered a “community benefit”).

New IRS regulations put these programs at risk of not being considered a community benefit (excludes Interpreter Services funds which support patient services).
MISSION
Interpreter Services is committed to ensuring equal access to health care by providing top quality medical interpreting, translation services, and trainings that are culturally and linguistically appropriate to UMHS staff and to UMHS Deaf, Hard of Hearing, and Limited English Proficient (LEP) patients and families.

Interpreter Services is committed to training medical interpreters to provide professional, ethical, and effective medical interpreting services to patients, their families, and healthcare providers.

EXTERNAL FUNDING
• Medicaid

ACCOMPLISHMENTS
• Added six Direct Interpreter Access Lines (D-I-A-L) so patients can reach their providers with an interpreter already on the line with them
• Trained more than 120 novice interpreters throughout the state of Michigan
• Created communication sheets for LEP patients at check-in
• Translated 159 documents including the individual patient’s medical record, consent forms, questionnaires, and various patient education materials
• Piloted Deaf Health Talks series in partnership with Dr. Michael McKee of UMHS Family Medicine to provide health talks in American Sign Language.

FY15 PLANS
• Continue to collaborate with different clinics to improve services to our patients and families;
• Provide surveys to our patients and providers to continually improve services;
• Provide community information sessions in patient’s language;
• Establish web pages in patient’s language;
• Provide trainings to partnership organizations;
• Offer additional professional development for interpreters and staff; and
• Work with community outreach opportunities (Community Flu Clinics, Medical Student Clinics) to provide interpreting and translation services.
MISSION

The mission of Volunteer Services is to promote the philosophy of caring for patients and families by providing volunteers to augment the work of the University of Michigan Health System faculty and staff.

STATISTICS - FY12 - FY14

<table>
<thead>
<tr>
<th></th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Active Volunteers</td>
<td>1,502</td>
<td>1,897</td>
<td>2,001</td>
</tr>
<tr>
<td>Total Number of Hours</td>
<td>124,700</td>
<td>139,310</td>
<td>149,401</td>
</tr>
<tr>
<td>$ Value of Volunteer Time</td>
<td>$2,744,280</td>
<td>$3,064,820</td>
<td>$3,307,738</td>
</tr>
<tr>
<td>Equivalent FTEs</td>
<td>60</td>
<td>67</td>
<td>72</td>
</tr>
</tbody>
</table>

PROGRAM HIGHLIGHTS

• Collaborated with Patient Family Centered Care (PFCC) program and the Leslie Science Center to bring programming to the CS Mott Family Center.

• Collaborated with PFCC and the Ann Arbor Hands-On Museum to bring “Healing Through Hands on Science” learning activities for inpatients.

• Launched new volunteer database.

Bryana Bayly, a University of Michigan Junior, has volunteered in the Mott Family Center for a year and a half and has made a big impact. She assisted in the planning and preparation for Family Center events. Her initiative and creativity with the art fair program, which coincided with the Ann Arbor Art Fairs, turned the pediatric patients into “Mott Artists”. The art fair she helped organize and implement brought joy to our patients and families, and will continue to be an annual event at the Family Center.
MISSION
The mission of the Accommodations Program is to provide lodging options that reflect the social determinants and economic needs of our partners and families.

FY14 OVERVIEW
• Patient Visitor Accommodation Program (PVAP) averaged 1,059 reservations per month (12,704 reservations for FY14).
• Med Inn Hotel Lobby/Registration and Hotel door locks upgraded.
• Transitioned Transplant House and Wilmot House to the Patient Visitor Accommodation Program

Chart 3

<table>
<thead>
<tr>
<th></th>
<th>Average Occupancy: FY 2014</th>
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<tbody>
<tr>
<td>Med Inn Hotel</td>
<td>![Med Inn Hotel occupancy chart]</td>
</tr>
<tr>
<td>Transplant House</td>
<td>![Transplant House occupancy chart]</td>
</tr>
<tr>
<td>Wilmot House</td>
<td>![Wilmot House occupancy chart]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Wilmot House</th>
<th>Transplant House</th>
<th>Med Inn Hotel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupancy Average</td>
<td>55%</td>
<td>73%</td>
<td>99%</td>
</tr>
</tbody>
</table>

- **The Med Inn Hotel** remained at nearly full capacity for FY14.
- **Transplant House** above average for FY14 occupancy rates.
- **Wilmot House** projects increased occupancy for FY15 due to PVAP.
MISSION
Since 1959, our goal is to be a partner of the University of Michigan Health System, helping to promote the health, welfare and education of our community.

GRANTING/OUTREACH
• Granted over $270,000 to UMHS programs and services this year that embrace and fulfill its mission of promoting the health, welfare and education of the community.
• Granted $250,000 via a 5-year commitment to the upcoming North Star Reach Camp
• Granted over $150,000 to core programs including Gifts of Art, Guest Assistance Program, Trails Edge Camp, and the Patient Education Advisory Committee (PEAC)

FY14 OVERVIEW
• Generated over $2 million in sales for the second consecutive year operating four gift shops at the Health System
  • The Friends Gift Shop at University Hospital
  • The Carousel Gift Shop at C.S. Mott Children’s and Von Voigtlander Women’s Hospitals
  • The Friends with a Heart Gift Shop at the Frankel Cardiovascular Center
  • The Friends Gift Shop at the East Ann Arbor Health and Geriatrics Center
• Utilized the skills and talents of over 50 volunteers to work in the Hospital Gift Shops.

“Life Images of Today and Tomorrow” is a recent project funded by a grant from Friends. The program is offered through a partnership between the UMHS Cancer Center Patient and Family Support Services and Washtenaw Community College Photography programs.
Goals for the program include helping patients capture and define moments in their life stories, as well as finding the therapeutic value of engaging in creative expression during or after cancer care. Family members, including children, can also participate. As a Cancer Center Patient and Family Support Services initiative, the program is enhanced by the expertise and contributions of many disciplines working to provide the ideal patient care experience.

Each patient photographed receives a flash drive containing selected images, suggestions for using the photographs in creative ways, and art therapy resources. For those interested, workshops for making art with the images are available, as are opportunities to receive individual counseling with an art therapist.
MISSION
To meet the diverse physical and mental health care needs of transgender people, at the highest level of medical and ethical standards; to enhance knowledge about transgender people, and; to educate students, health care professionals, and the community on meeting the needs of this unique population.

SUPPORT GROUPS
1. Parents & Guardians of Transgender and Gender Questioning Individuals
2. Spouses & Partners of Transgender and Gender Questioning Individuals
3. Education, Support and Therapy Group for Transgender and Gender Questioning Youth
4. The Female-to-Male Experience
5. The Male-to-Female Experience

FY15 PLANS
• Increase Primary Care Physician Capacity
• Expand CGSP staffing to meet patient demand
• Develop protocol for providing services to transgender and gender-questioning youth
• Plan for the 20th Anniversary of the Comprehensive Gender Services Program

The UMHS Comprehensive Gender Services Program Parent’s Support group has been an invaluable source of information and support for my family and me as we have supported our child through her transgender transition. As is often the case, our child was way ahead of us when she finally told us she is a girl, we were in shock (although not totally surprised), and largely uninformed, and had to hurry to catch up with her!

The CGSP Parent’s Support group gave us a safe and comfortable space to connect with up-to-date resources and gender specialist health care providers to learn about our daughter’s condition, answer questions and concerns, access medical treatment, support her and her siblings through a life-altering change in our expectations and family dynamics, advocate on her behalf with her schools, change her name and gender on identification documents, and more. More importantly, the Parent’s Support group gave, and continues to give, us a place to share with other parents who understand completely and can relate to both the stressful moments and the joys along the path.

I cannot imagine going through a child’s gender transition experience without the CGSP Parent’s Support group to lean on; no parent should have to go through it alone. We are deeply and forever grateful for the UMHS Comprehensive Gender Services Program Parent’s Support group.

--(Name withheld to protect patient’s privacy.)
MISSION
PMCH provides education for faculty, staff, students and the community on culturally competent and culturally appropriate patient-centered care while working to improve health equity amongst diverse populations. We do this by using evidence-based practices to engage the community and developing resources that improve knowledge and provides access to care.

OUTREACH
• Provided health education, health improvement or health promotion workshops to 1,200 individuals;
• Trained 70 School of Nursing, College of Pharmacy and School of Public Health Students as part of the Community Flu Clinic Program funded by a grant from the Michigan Campus Compact;
• Trained more than 70 first and second year medical students on community engagement, effective communication and bias, the use of Cholestech machines for cholesterol screening and blood pressure checks and skills needed to conduct community health screenings;
• Provided strategic planning, capacity building, research support and education to over 200 people on persistent systemic disparities experienced by African American mothers interested in breastfeeding;
• Conducted Community Flu Program that served 500 people, with nearly 400 community members vaccinated by College of Pharmacy and School of Nursing students as part of an inter-professional training program. Flu shot priority given to at-risk populations as defined by the CDC; and
• Established a collaborative with MI Breastfeeding Network (http://www.mibreastfeeding.org/) to educate, disseminate health education, and promotion that address disparities in breastfeeding outcomes. Presently working on strategies, preliminary efforts to be presented at the Michigan Premier Public Health conference in October 2014.

FY15 PLANS
Community:
• Personal Empowerment
• Maternal/Child Health
• Men’s Program
• Health Ministry

Health System:
• Professional Development
• Team Development
• Student Education

Businesses:
• Wellness Program
• Cultural Competency
• Inclusion Training
MISSION
Optimizing adolescent health care by improving provider practice, increasing access to youth-friendly care, advancing research and education, and fostering dynamic partnerships with healthcare providers, health systems, and youth-serving agencies to promote adolescent health and well-being.

EXTERNAL FUNDING
• Michigan Department of Community Health- Child and Adolescent Health Program
• Michigan Department of Community Health- Medicaid Match Program
• Ann Arbor Area Community Foundation
• Patient Education Awards Committee (PEAC)

OUTREACH
• 2014 Conference on Adolescent Health (250 attendees)
• Adolescent Champion Model- piloted program with 4 UMHS primary care (Pediatrics and Family Medicine) health centers
• Convened Youth Advisory Council student advisory group from 6 school-based health centers across the state
• Convened Teen Advisory Council with 8 adolescent representatives from Washtenaw County
• Partnered with the Michigan Chapter of the Society for Adolescent Health and Medicine (MI SAHM) to increase provider membership from 15 to over 75 providers across the state

FY15 PLANS
• Implement Adolescent Champion Model with 12 UMHS primary care (Pediatrics, Family Medicine, and Medical - Pediatric) health centers
• Implement Adolescent Champion Model with 2 non-UMHS primary care health centers (The Corner Health Center and IHA)
• Conduct Adolescent Centered Environment (ACE) assessments with 20 School-Based Health Centers and primary care health centers across the state
• Maintain Teen Advisory Council of 12 adolescent representatives from Washtenaw County
• 2015 Conference on Adolescent Health: April 23-24, 2015
  • 275 anticipated attendees (providers, researchers, health educators and community stakeholders)
• Increase MI SAHM membership to over 100 providers across the state
MISSION
To provide school-based health programs and clinical services that improve the well-being of students, their families and communities.

EXTERNAL FUNDING
• Michigan Department of Community Health-Child and Adolescent Health Program
• Michigan Department of Community Health- Innovations Grant
• Health Resources Service Administration (HRSA)
• United Way of Washtenaw County
• Washtenaw Community Health Organization
• American Psychiatric Foundation
• Delta Dental Foundation
• Friends of the University of Michigan Health System
Today, I am self-confident and outgoing, but that wasn’t always the case. I started by joining the nutrition group offered by our school based health center (RAHS) and meeting individually with staff for nutrition and exercise counseling. I wanted to feel the difference in my being - my body and my health. So far, I have lost 137 lbs.

I still continue to make small changes towards a healthier lifestyle and I am not criticizing myself as often as I used to. I have more choices now. I can go to an event and not worry about fitting in the seats; I can buy clothes at more than one store.

I have broken the cycle of obesity, but I did not do it alone. Thanks to RAHS, I realized the amazing potential that was in me this entire time.

-Jonathon

OUTREACH

- Provided health services to over 1,600 at-risk adolescents for a total of over 8,700 visits
- Assisted 566 families with insurance enrollment and 1,211 families with tangible needs coordination
- Attended 25 outreach activities in Washtenaw County
- Conducted Medicaid outreach to over 6,800 community members
- Completed 69 health education sessions to over 3,000 students in 6 school-based health centers
- Provided vision screening and services to 328 students at 6 school-based health centers
- Provided dental screening and services to 320 students at 6 school-based health centers

FY15 PLANS

- Increase health services to over 1,800 at-risk adolescents in 6 school-based health centers
- Assist 700 families with insurance enrolled and tangible needs coordination
- Attend 40 outreach activities in Washtenaw County
- Conduct Medicaid outreach to at least 7,000 community members
- Provide at least 75 health educations sessions to over 3,200 students in 6 school-based health centers
- Provide vision screening and services to 450 students at 6 school-based health centers
- Provide dental screening and services to 450 students at 6 school-based health centers
MISSION
To reduce hunger and food insecurity for the homebound in Ann Arbor who, because of their health, are unable to prepare complete nutritious meals.

VISION
To serve all homebound persons with an Ann Arbor address in a culturally appropriate manner.

EXTERNAL FUNDING
- Anonymous
- Area Agency on Aging 1-B
- Client Contributions
- Community Support (Thrift Shop, Kiwanis, Churches)
- Coordinated Funders
- Washtenaw Senior Nutrition
- Private Donations
- Fundraising
- Medicaid Waiver
- UMHS

ACCOMPLISHMENTS
- 412 individuals received meals
- 136,500 meals delivered
- 508 volunteers
  - Provided 9,380 hours of service (4.9 FTEs)
  - Drove 85,269 miles

FY15 PLANS
- Chinese/Asian menu for Parkway Meadow residents
- Miller Manor route
- Weekly vegetarian entrée option

“Thank you to all my friends who not only bring me food – but a friendly smile and a “hi” every day. How lucky I am to have the U of M hospital fixing my meals and a crew of angels delivering them to me.”

--Ann Arbor Meals on Wheels client.
MISSION
HBS is a resource for those seeking sustainable housing for seniors.

VISION
HBS will be recognized as a leading resource for addressing senior housing problems.

GUIDING PRINCIPLES
• Honor the independence of the individual
• Ensure that safety is a priority
• Provide guidance and support
• Work in partnership with others

EXTERNAL FUNDING
• Coordinated Funding
• Client Contributions
• United Way/Blue Print for Aging (SCIP)
• Washtenaw County Treasurers Office
• Ann Area Arbor Community Foundation
• Annual Fund Drive
• Senior Living Week
• United Way Designations
• Investment Income

GOALS
• Develop ambassador-like program to recruit and train older adults in surrounding communities to educate others with regard to HBS
• Foster working relationship with discharge planning community education
FY15 PLANS

• (Priorities Developed from recent Strategic Planning Meeting)
  • Raise over $100,000 by FY18
  • Develop strategy to increase major gifts
• Develop branding strategy
• Reach out to underserved communities
• Ensure handout materials (web and non-web) are culturally appropriate for diverse audiences
• Expand electronic client database
• Create customer satisfaction tool and implement
• Identify and then measure outcomes/community impact

Lucy, an 86 year old widow from Ann Arbor, lives in a quiet neighborhood in a home built by her late husband and wants to stay there. Lucy learned of HomeShare many years ago; however, didn’t feel she was ready for it at that time. After several years of having HomeShare in the back of her mind, Lucy decided that now was the right time. She contacted the HomeShare program as a way to obtain some help with household chores, approximately 8 hours per week of assistance with yard work, snow removal, and light household cleaning tasks that would enable her to remain in her home. In exchange, Lucy offered to share her home at no cost to someone who was in need.

Andrew, a 24 year old recent graduate of UoM, came to the HomeShare program as a way to find affordable and comfortable housing while he worked to begin his career. He planned on staying in HomeShare for 5 months.

The HomeShare program matched Lucy and Andrew. More than a year later, the match ended when Andrew found full-time employment out of state. Lucy received the household assistance that enabled her to remain in her home and a great sense of pride in that she helped a young student who is just getting started in life.

“I could not have asked for a better housemate and I hope to find another wonderful match with HomeShare.” --Lucy
## OUTREACH PARTNERS & INITIATIVES

<table>
<thead>
<tr>
<th>PARTNER</th>
<th>INITIATIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Michigan University</td>
<td>Family Empowerment Program at Hamilton Crossing</td>
</tr>
<tr>
<td>UM School of Public Health</td>
<td>Community Engagement for Students</td>
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<tr>
<td>• Office of Public Health Practice</td>
<td>Student Leadership Training</td>
</tr>
<tr>
<td>• PHAST</td>
<td>Student Service Learning</td>
</tr>
<tr>
<td>• Future Public Health Leaders Program</td>
<td>Community Inter-Professional Practice Training Program</td>
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<tr>
<td>• Preventive Medicine Residency Program</td>
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<tr>
<td>• Nutrition Program</td>
<td></td>
</tr>
<tr>
<td>Peace Neighborhood Center</td>
<td>Healthy Eating, Physical Activity Summer Program</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>Undergraduate Research Opportunities Program</td>
</tr>
<tr>
<td>Brothers of Kappa Alpha Psi, Inc.</td>
<td>Kappa Men’s Health Project</td>
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<tr>
<td>MICHR</td>
<td>Community Engagement Council</td>
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<td>Infant Mortality Prevention Collaboration</td>
<td>Safe Sleep Program</td>
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<tr>
<td>Ypsilanti Health Coalition</td>
<td>Capacity Building</td>
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<tr>
<td>UM Medical School</td>
<td>Student Diversity Council</td>
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<tr>
<td>University of Illinois - Chicago Circle Campus</td>
<td>Black Men’s Community Health Advocate Project</td>
</tr>
<tr>
<td>Parkway Meadows</td>
<td>Asian Senior Health</td>
</tr>
<tr>
<td>UM Livonica Dialysis Center</td>
<td>Cultural Competency Training</td>
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<tr>
<td>Parkridge Community Center</td>
<td>Healthy Eating, Physical Activity Summer Program</td>
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<td>UM Office of Health Equity &amp; Inclusion</td>
<td>Career Development Academy</td>
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<td>UM School of Nursing</td>
<td>Community Nursing Program</td>
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<td>Planned Parenthood of MI</td>
<td>Cultural Competency Training</td>
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<td>Women, Infants, and Children (WIC) Program</td>
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<tr>
<td>UM School of Kinesiology</td>
<td>MI Childhood Disparities Research Laboratory</td>
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<td>Turner Senior Wellness Program</td>
<td>Turner African American Services Council</td>
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<td>Black Mother’s Breast Feeding Association</td>
<td>Reducing Disparities in Breastfeeding Outcomes</td>
</tr>
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<td>Ypsilanti Heritage Festival</td>
<td>Health Tent with partners BCBSM, HVA, Growing Hope, St. Joseph Mercy Health System</td>
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<td>Transgender Michigan</td>
<td>Health Equity for the Transgender Community</td>
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<td>Ann Arbor VA Hospital</td>
<td>Transgender Inclusion in VA Services</td>
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<tr>
<td>UMHS Social Work</td>
<td>Health Disparities Grand Rounds</td>
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<tr>
<td>UM Medical School Office of Admissions</td>
<td>Second Look Weekend</td>
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<tr>
<td>UM College of Pharmacy</td>
<td>Community Inter-Professional Practice Training Program</td>
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<td>UM Depression Center</td>
<td>Peer-to-Peer</td>
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<td>Dept. of Human Services, Legal Services of SEMI, Jewish Family Services,</td>
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<td>Synod, AAA1-B, Children of Hoarders, Carpenter Place, A2PD, A2FD,</td>
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<td>Twp Code Enforcement, UMHS Turner Geriatrics</td>
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<td>Ann Arbor Public Schools, Ypsilanti Community Schools, Lincoln</td>
<td>School-based Health Centers</td>
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<td>Consolidated Schools</td>
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2025 Traverwood Drive
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