

CHNA IMPLEMENTATION STRATEGY FY2022-2024

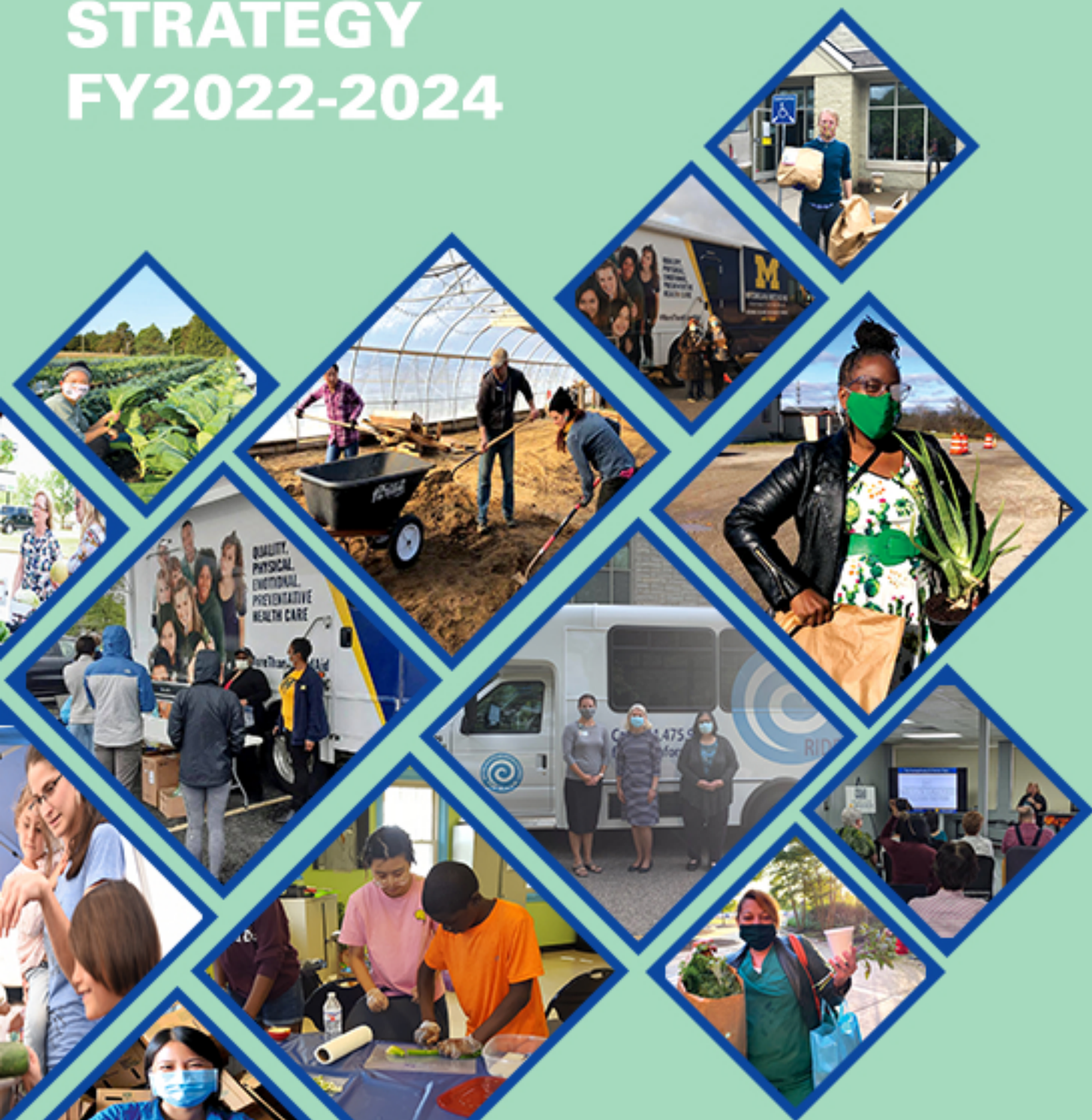


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UNITE Community Health Needs Assessment Implementation Strategy FY 2022-2024

Introduction

In 2021, for the third time, all not-for-profit hospitals in Washtenaw County, Michigan collaborated to conduct a joint Community Health Needs Assessment (CHNA) and Implementation Plan (IP) for the shared geographic region of Washtenaw County. The hospitals, Michigan Medicine (UMH), St. Joseph Mercy Ann Arbor (SJMAA), and St. Joseph Mercy Chelsea (SJMC), conducted a collaborative community health data collection and assessment process in partnership with Washtenaw County Public Health Department and area health coalitions. The process was facilitated by the Washtenaw Health Initiative.

The collaborative, named Unified Needs Assessment Implementation Plan Team Engagement (UNITE), aims to promote health and improve the health equity of our community. To do so, it uses a shared leadership structure and continuously engages the community to develop a unified health assessment and implementation plan. The UNITE group collected data through focus groups and key informant interviews. Additionally, the group assessed data from a variety of quantitative and qualitative sources, including both primary and secondary data. The three hospitals continued to utilize support from the Washtenaw Health Initiative (WHI), which acted as a facilitator for the collaborative CHNA and Implementation Plan process. The WHI is a voluntary, county-wide collaboration focused on improving access to coordinated care for the low-income, uninsured, and Medicaid populations in Washtenaw County, Michigan.

The UNITE group completed the CHNA and IP in adherence with federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from community members and various community organizations.

Board Approval

The Community Health Needs Assessment Implementation Plan (CHNA-IP) was approved by the local boards as follows:

- Michigan Medicine CHNA-IP was adopted by the board on November 4, 2021.
- St. Joseph Mercy Ann Arbor CHNA-IP was adopted by the board on October 27, 2021.
- St. Joseph Mercy Chelsea (SJMC) CHNA-IP was recommended for adoption by the local Board of Trustees on October 26, 2021, and adopted by the Joint Venture Board on October 29, 2021.

CHNA Implementation Plan Availability

The complete CHNA-IP report is available electronically at:

- www.uofmhealth.org/community-health-needs-assessment or
- www.stjoesannarbor.org under the Community Benefit tab or
- www.stjoeschelsea.org under the Community Benefit tab

Or printed copies are available at:

- 3621 S. State St., Ann Arbor MI, 48108
- 5301 McAuley Drive, Ypsilanti, MI 48197
- 775 S. Main St, Chelsea, MI 48118

Description of Hospitals

For more information about each institution see Appendix A (page 37) in the [Community Health Needs Assessment](#).

Identification and Prioritization of Community Health Needs

Members of the UNITE group analyzed data from multiple data sources, community focus groups, and key stakeholder/informant interviews to determine potential priority areas. Those needs were then prioritized based on several factors including the number of people impacted, severity of the problem, ability to positively impact the priority, alignment with institutional missions, and impact on health equity. The data show that the three priority areas, listed below, identified in the group's 2016 and 2019 CHNA, continue to be significant areas of need across the community:

- Mental Health and Substance Use Disorders
- Obesity and related illnesses
- Pre-conceptual and Perinatal health

Therefore, the UNITE group renewed its commitment to addressing these three priorities and doing so through the lens of social determinants of health (SDOH) and health equity.

Strategies

In developing the implementation plan, the UNITE group continued to dig deeper into the root causes underlying three SDOH domains that they agreed had a significant impact on the top CHNA health priorities. These domains were (i) housing, (ii) poverty and (iii) social isolation.

UNITE used the Community Anti-Drug Coalition of America (CADCA) model to conduct a root cause analysis (RCA) around local community conditions and contributing factors to the prioritized health needs. This model asks the questions – what is the problem, why is it a problem, and why is it a problem here? The CADCA structure incorporates the following strategies for creating positive change: Provide Information and Education, Build Skills/Training, Provide Support, Enhance Access/Reduce Barriers, Change Consequences (Positive and Negative), Change Physical Design, Modify Policies. This is a model that has been used in helping to address reduction of substance abuse across the United States.

In addition, the UNITE group identified the following as areas of rapidly escalating seriousness that needed to be addressed as part of an implementation strategy: (i) climate change, (ii) incarceration and (iii) medical debt.

Significant health needs that will not be addressed

Michigan Medicine, St. Joseph Mercy Ann Arbor, and St. Joseph Mercy Chelsea acknowledged the wide range of priority health issues that emerged from the CHNA process, and determined that it could effectively focus on only those health needs which it deemed most pressing, under-addressed, and within its ability to influence. Michigan Medicine, St. Joseph Mercy Ann Arbor, and St. Joseph Mercy Chelsea will not take action on the following health needs within this plan:

- **COVID-19--** is not addressed in this Implementation Plan but will be addressed by each hospital through plans that have been collaborated on by each health system and the health department. These plans include things such as vaccine clinics and COVID-19 education.

This implementation strategy specifies community health needs that the hospitals have determined to address in whole or in part and that are consistent with its mission. 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 these three years, 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.

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2022-2024**

CHNA SIGNIFICANT HEALTH NEED:	Mental Health & Substance Use Disorders
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CHNA REFERENCE PAGE:	29
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BRIEF DESCRIPTION OF NEED:

The average Washtenaw adult reported 4.6 mentally unhealthy days in the past month.

Washtenaw County started collecting local data on adolescent suicide rates in 2004 and since there was an alarming increase in suicide and suicide attempts. It is known that by preventing and treating anxiety and depression suicide and suicide attempts can be prevented. Local data shows that 32% of high school students experience depression and other mental health problems within the last year and 17.1% reported having seriously considered suicide in the past year.

Additionally, both prescription and recreational drug use are creating negative issues within Washtenaw County. There has been an increase in opioid-related overdose deaths from 2011 (29 deaths) to 2020 (61 deaths) in Washtenaw County (Source: Washtenaw County Medical Examiner and Washtenaw County Health Department, Waller, A.). Marijuana use by teens has increased over the past 8 years in the county, as has the use of e-cigarettes, or "vaping".

GOAL: Reduce the prevalence and negative impacts of substance use and mental illness in greater Washtenaw County.

- OBJECTIVES:**
1. Reduce the percent of adults who experienced 14 or more days in which their mental health was not good in the past month from 16.5% to 15% by 2024. (Source: BRFSS 2017-2019, accessed on healthforallwashtenaw.org)
 - 1.1. Increase mental health provider rate by 10% (current rate is 566 providers per 100,000 and goal is to achieve at least 623 providers per 100,000) by 2024. (Source: 2020 County Health Rankings, accessed on healthforallwashtenaw.org)
 2. Reduce the proportion of adolescents who seriously considered attempting suicide during the past 12 months from 17.1% to 13.1% among high school students, and from 16.7% to 11.9% among middle school students by 2024. (Source: MiPHY survey, Washtenaw County Report)
 3. Decrease the proportion of high school students who used e-cigarettes, alcohol or marijuana in the past month by 2024 (Source: MiPHY survey, Washtenaw County Report)
 - 3.1. E-cigarettes: reduce recent use from 15.5% to 12.3%
 - 3.2. Alcohol: reduce recent use from 14.9% to 8.3%
 - 3.3. Marijuana: reduce recent use from 14% to 10.4%
 4. Reduce the number of annual adult opioid fatal overdoses in Washtenaw County from 61 to 49 by 2024 (Source: WCHD, Opioid Data | Washtenaw County, MI)

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED
FISCAL YEARS 2022-2024, UNLESS OTHERWISE NOTED:**

- Michigan Medicine:**
1. Provide health information to the Deaf, Deaf/Blind, and Hard of Hearing through Speakers series using American Sign language in the community.

2. Provide screenings and interventions in the community to youth experiencing mental illnesses or suicidal ideation.
3. Provide mental health support sessions for families in the community that have a child with mental illness.
4. Provide translated materials to social service agencies and provide mental health screenings in ASL through UMH Interpreter Services and Family Medicine.
5. Through Michigan Medicine's grants program, support community organizations, programs, and advocacy that contributes to delivery and access to mental health and substance abuse programs and services to adults and youth regardless of insurance status.
6. Provide 1-3 professional development opportunities to train professionals on the prevention of Elder Abuse.
7. In Straight Talk-Youth Fire setting Prevention program, utilize cognitive-behavioral therapy and motivational interviewing to promote behavior change among youth who have set a fire(s).

St. Joseph Mercy Ann Arbor:

1. Increase mental health providers/services through supporting Community Mental Health in the implementation of the Certified Community Behavioral Health Clinic (CCBHC) of Washtenaw County.
2. Connect patients & community members to peer recovery coaches, Sexual Assault Nurse Examiners and community health workers to address mental health and substance use disorder.
3. Partner with Hope Clinic to better integrate Behavioral Health within the safety net care model at the point of care and proactively call patients to obtain Behavioral Health Services.
4. Support and promote drug take-back events within Washtenaw County medication disposal network, specifically 48197/48198.

St. Joseph Mercy Chelsea:

1. Support and facilitate SRSLY coalitions in Chelsea (48118), Dexter (48130), Manchester (48158) and Stockbridge (49285) to prevent youth substance abuse and promote mental health.
2. Partner in "One Big Thing" initiative to address mental health.
3. Implement the Project SUCCESS program in local middle and high schools.
4. Continue and expand support groups in the service area.
5. Collaborate with schools and other community partners to address mental health needs of youth through education, skill-building and stigma reduction.
6. Facilitate access to care through the Behavioral Health Navigators.
7. Participate in local coalitions and activities related to increasing social support, improving mental health, and reducing substance use.

Joint Hospital Systems Actions:

1. Increase health system collaboration around mental health and substance use disorder activities, as guided by the community.
2. Maintain health system and community supported programs and policies that reduce substance use disorder, and improve mental health.
3. Participate in local coalitions (i.e. Washtenaw Health Initiative Mental Health & Substance Use Disorder workgroup, Washtenaw SUD System Transformation, Washtenaw County Community Mental Health Board, etc.) and activities related to increasing behavioral health access and addressing root causes (i.e. trauma)

4. Explore and support efforts to increase the number and diversity of mental health providers within our health systems and through community providers.
5. Advocate for policies that reduce barriers to training and employment in the field of social work and mental health care providers.
6. SJMC and SJMAA: Increase rates of screening and referral to cessation services for patients using tobacco.
7. SJMC and SJMAA: Partner with local law enforcement and Washtenaw County to promote safe disposal of unused medications
8. SJMC and SJMAA: Expand the presence of Faith Community Nursing staff throughout the community to provide mental health and substance use disorder education support through faith communities.
9. SJMAA and UMH: Support/continue work through the Michigan Opioid Collaborative including seeking extension/expansion of grant funding for Medication Assisted Treatment and advocacy for Opioid Task Force legislation
10. SJMC and SJMAA: Utilize Community Resource Directory to help support mental health and substance use disorder initiatives

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Reduce tobacco use among adult patients.
2. Reduce misuse of prescription medications.
3. Reduce youth substance abuse.
4. Improve outcomes for participating students in Project SUCCESS.
5. Increase participation in support groups.
6. New policies or programs to support mental health among youth.
7. New policies to support reduction in substance use among youth and adults.
8. Improve access to mental health services.
9. Improve social support among service area residents.
10. Increased number of faith communities active in the health ministry network through Faith Community Nursing.
11. Increase number of individuals engaged in tobacco cessation programming.
12. Decrease wait time to obtain behavioral health services.
13. Increase drug disposal in Washtenaw County.
14. Increase mental health providers.
15. Decrease self-harm injuries and suicide attempts among adolescents.

PLAN TO EVALUATE THE IMPACT:

Michigan Medicine:

The Community Health Coordinating Committee will monitor progress of community grant programs' impact. Community Health Services staff will collect various metrics from staff on ongoing community benefit programming.

For data inquiries please contact Community Health Services: 734-998-2156 or email communitybenefit@med.umich.edu.

St. Joseph Mercy Ann Arbor:

The SJMAA Community Health Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys,

focus groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact SJMC/SJMAA staff through www.stjoeshealth.org/cbm 'Contact' icon at the bottom of the webpage.

St. Joseph Mercy Chelsea:

The SJMC Community Health Improvement Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys, focus groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact Reiley Curran, at (734) 593-5279, or reiley.curran@stjoeshealth.org.

PROGRAMS AND RESOURCES THE HOSPITALS PLANS TO COMMIT:

- Staff time to support the implementation of the actions listed above.
- Supplies and marketing for programs.
- Funding for programs, organizations, and advocacy.

COLLABORATIVE PARTNERS: Mental Health & Substance Use Disorders			
	Michigan Medicine	St. Joseph Mercy-Ann Arbor	St. Joseph Mercy-Chelsea
5 Healthy Towns Foundation			✓
Ann Arbor Area Community Foundation	✓	✓	
Catholic Social Services		✓	
Chelsea Ministerial Association			✓
Chelsea Police Department			✓
Chelsea School District			✓
Chelsea Senior Center			✓
Chelsea Wellness Coalition			✓
Chelsea-area Chamber of Commerce			✓
City of Chelsea			✓
City of Dexter			✓
Community Family Life Center	✓		
Community Health Access Initiative	✓		
Corner Health Center	✓		
Dawn Farms		✓	
Dexter Chamber of Commerce			✓
Dexter Community Schools			✓
Dexter Internal Medicine			✓
Dexter Ministerial Association			✓
Dexter Senior Center			✓
Dexter Wellness Coalition			✓
EMU Family Empowerment Program	✓	✓	
Faith in Action		✓	✓
Grass Lake Community Wellness Initiative			✓
Grass Lake School District			✓

Grass Lake Senior Center			✓
Home of New Vision		✓	
Hope Clinic	✓	✓	
Huron Valley Ambulance Community Paramedics		✓	
Jewish Family Services	✓		
Legal Services of South Central Michigan (Michigan Advocacy Program)	✓		
Manchester Community Schools			✓
Manchester Wellness Coalition			✓
Michigan Medicine Dept. of Family Medicine			✓
Michigan Organization for Adolescent Sexual Health	✓		
MSU Cooperative Extension 4-H office	✓		✓
National Alliance on Mental Illness		✓	✓
Our House	✓		
Ozone House	✓		
Packard Health	✓		
Scouts			✓
Stockbridge Chamber of Commerce			✓
Stockbridge Community Schools			✓
Stockbridge Police Department			✓
Stockbridge Wellness Coalition			✓
Student Advocacy Center			
UM School of Public Health	✓		
United Way of Washtenaw County	✓	✓	✓
Washtenaw Area Council on Children	✓	✓	✓
Washtenaw County Community Mental Health	✓	✓	✓
Washtenaw County Sheriff	✓	✓	✓
Washtenaw Health Initiative		✓	
Washtenaw Intermediate School District	✓	✓	✓
Washtenaw County Health Department	✓	✓	✓
Washtenaw County Office of Community and Economic Development		✓	
Washtenaw County Sheriff's Office		✓	
Washtenaw Success by Six	✓		
Great Start Collaborative			
Women's Center of Southeastern Michigan	✓		

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2022-2024**

CHNA SIGNIFICANT HEALTH NEED:

Obesity and Related Illness

CHNA REFERENCE PAGE:

30

BRIEF DESCRIPTION OF NEED: The majority of adults and children in SJMAA, SJMC, and UMH service areas rates of overweight and obesity have remained steady. We have seen that the only group to decrease their previous rate was 5 to 7 years old's. This gives us an opportunity to continue to work toward helping adults and children reach a healthier weight. Overweight and obesity are indicators of potential chronic disease risk and can be indicative of lack of movement. Lack of access to healthy foods, low intake of vegetables and fruits, and limited movement can have huge impacts on both chronic disease risk and a person's ability to maintain a healthy weight.

Obesity has been shown to be a risk factor for severe COVID-19 illnesses. Although, this is not something that can be changed immediately. This has ramifications for helping our children to maintain a healthy weight so during future health crises they are at less risk of severe illnesses.

Further, social determinants such as poverty and incarceration have huge impacts on rates of overweight and obesity and chronic disease. Low-income communities often do not have safe neighborhoods to be active and do not have accessible and affordable healthy food, which puts them at a significant disadvantage in terms of managing their chronic disease risk. Further, those who are suffering from homelessness face barriers to managing their chronic illnesses and maintaining a healthy diet.

Finally, we know that eating whole and unprocessed foods and maintaining the recommended 150 minutes of moderate exercise can reduce risk of chronic disease such as cardiovascular disease (e.g. CHD & stroke). This is an opportunity for the hospitals and their collaborators to improve health behavior and reduce the overall burden of chronic disease on the system.

GOAL: Promote healthy lifestyle choices and reduce chronic disease prevalence & risk in greater Washtenaw County.

OBJECTIVE:

1. Increase healthy lifestyle choices among youth
 - 1.1. Percentage of students who were physically active for 60+ minutes per day on five or more days per week: 2020 county-wide HS rate is 59.2%, best sub-group rate is 73.5%
 - 1.2. Percentage of students who ate five or more servings of fruits and vegetables per day in the last seven days 2020 county-wide HS rate is 29.5%, (58.3% is best sub-group rate)
2. Increase healthy lifestyle choices among adults
 - 2.1. Increase by 10% the percentage of adults who report adequate physical activity, defined as "moderate physical activities for at least 150 minutes per week, vigorous physical activities for at least 75 minutes per week, or an equivalent combination of moderate and vigorous physical activities and also participate in muscle strengthening activities on two or more days per week". Baseline: 21.8% (Michigan BRFSS, 2017 and 2019 combined)
 - 2.2. Increase by 10% the percentage of adults who report eating at least 1 serving of fruits and vegetables a day. Baseline: 65.9% (Fruit) and 83.4% (Vegetables). (Michigan BRFSS, Retrieved via email from Yan Tian (Michigan DHHS).

ACTIONS THE HOSPITAL FACILITIES INTEND TO TAKE TO ADDRESS THE HEALTH NEED, FISCAL YEARS FY2020 - FY2022, unless otherwise noted:

Michigan Medicine:

1. Support, maintain and explore programs that target nutrition education/counseling:
 - a. Regional Alliance for Healthy Schools (RAHS)
 - b. MHealthy
 - c. Project Healthy Schools
2. Support programs and policies that screen for food insecurity, provide referrals to reduce food insecurity, and/or directly provide food to reduce food insecurity:
 - a. UMH Ann Arbor Meals on Wheels
 - b. Patient Food and Nutrition Services meal provision to Ypsilanti Meals on Wheels
 - c. Regional Alliance for Healthy Schools
 - d. Food and resource drives for Food Gatherers.
3. Continue to support programs and policies that encourage more physical activity
 - a. MHealthy
 - b. Project Healthy Schools
 - c. Regional Alliance for Healthy Schools
4. Support organizations and programs working to reduce food insecurity, obesity, and other related illnesses and weight related stigma through community-based funding.
 - a. Support community and neighborhood gardens; increase access to local and nutritious foods.
 - b. Advocate for reduced greenhouse gas emissions in order to prevent acute cardiac events.

St. Joseph Mercy Ann Arbor:

1. Expand food security support and nutrition education through The Farm at St. Joe's initiatives, Nutrition Buddies, Prescription for Health, Shapedown, and Community Health Workers to reduce chronic disease.
2. Advocate for policy change on food systems infrastructure through participation in Washtenaw Food Policy Council and other emerging policy efforts with a focus on food disparity.
3. Increase efforts to improve the safety and availability of fitness infrastructure options in the community, specifically 48197/48198.
4. Implement community-based walking groups.
5. Explore and apply programs and concepts of Lifestyle Medicine and the Blue Zone philosophy within Washtenaw County to improve overall health and reduce chronic disease.

St. Joseph Mercy Chelsea:

1. Continue to promote walking and running for all ages through activities and events.
2. Increase availability and connectivity of walking paths on the hospital campus.
3. Support the Chelsea Farmers Market and Farmers Market Food Assistance programs throughout the service area.
4. Provide nutrition education and technical assistance to individuals and organizations in the service area.
5. Support the development and expansion of area trail networks.

Joint Hospital Systems Actions:

1. Increase health system collaboration around healthy eating, physical activity, and chronic disease reduction as guided by the community.

2. Maintain the health system and community supported programs and policies that reduce chronic disease and increase healthy eating and physical activity.
3. Provide Diabetes prevention, education, and share group programming.
4. Provide and support the Prescription for Health Program
5. SJMC and SJMAA: Increase rates of screening and referral to healthy weight services for patients with BMI greater than 25.
6. SJMC and SJMAA: Expand the presence of Faith Community Nursing staff throughout the community to provide obesity and related illnesses education support through faith communities.
7. SJMC and SJMAA: Utilize Community Resource Directory to help support obesity and related illnesses initiatives

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Increase physical activity among participants.
2. Reduce prevalence of and complications associated with diabetes.
3. Increase walking among hospital patients, visitors, employees, and neighborhood residents.
4. Increase consumption of fruits and vegetables, and support the local farming economy.
5. Reduce the onset of diabetes through the Diabetes Prevention Program.
6. Increase understanding of healthy food choices. Reducing food insecurity among families and seniors living in Ann Arbor and Ypsilanti.
7. Increase access to support and resources to support reducing weight among middle and high school students within Washtenaw County.
8. Reduce prevalence of cardiovascular disease
9. Increase self-efficacy by providing educational classes that increase individual ability to cook healthy foods.
10. Community members will report a reduction in barriers to carrying out healthy behaviors (e.g. increased physical activity or increased access to healthy foods).
11. New policies to support reduction of food insecurity.

PLAN TO EVALUATE THE IMPACT:

Michigan Medicine:

The Community Health Coordinating Committee will monitor progress of community grant programs' impact. Community Health Services staff will collect various metrics from staff on ongoing community benefit programming. For data inquiries please contact Community Health Services: 734-998-2156 or email communitybenefit@med.umich.edu.

St. Joseph Mercy Ann Arbor

The SJMAA Community Health Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys, focus groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact SJMC/SJMAA staff through www.stjoeshealth.org/cbm 'Contact' icon at the bottom of the webpage

St. Joseph Mercy Chelsea

The SJMC Community Health Improvement Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys, focus

groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact: Reiley Curran, at (734) 593-5279, or reiley.curran@stjoeshealth.org.

PROGRAMS AND RESOURCES THE HOSPITALS PLANS TO COMMIT:

- Staff time to support the implementation of the actions listed above.
- Supplies and marketing for programs.
- Funding for programs, organizations, and advocacy.

COLLABORATIVE PARTNERS: Obesity and Related Illness

Collaborative Partner Name	Michigan Medicine	St. Joseph Mercy-Ann Arbor	St. Joseph Mercy-Chelsea
5 Healthy Towns Foundation			✓
American Heart Association		✓	
Ann Arbor Meals on Wheels	✓		
Ann Arbor Public Schools	✓	✓	
Barrier Busters		✓	
Carpenter Place	✓	✓	
Chelsea Ministerial Association			✓
Chelsea School District			✓
Chelsea Senior Center			✓
Chelsea Wellness Coalition			✓
Chelsea-area Chamber of Commerce			✓
City of Chelsea			✓
City of Dexter			✓
Community Family Life Center	✓		
Corner Health Center		✓	
Dexter Chamber of Commerce			✓
Dexter Community Schools			✓
Dexter Internal Medicine			✓
Dexter Ministerial Association			✓
Dexter Senior Center			✓
Dexter Wellness Coalition			✓
EMU Engage, Bright Futures		✓	
EMU School of Nutritional Sciences, Dietetic Interns		✓	
Faith in Action		✓	✓
Family Empowerment Program (Engage EMU)	✓	✓	
Food Gatherers	✓	✓	
Foster Grandparents	✓		
Grass Lake Community Wellness Initiative			✓
Grass Lake School District			✓
Grass Lake Senior Center			✓

Growing Hope		✓	
Hope Clinic		✓	
Jewish Family Services		✓	
Manchester Community Schools			✓
Manchester Wellness Coalition			✓
Michigan Islamic Academy	✓		
Ozone House		✓	
Packard Health		✓	
Parkridge Community Center		✓	
Parkway Meadows	✓		
Patient Food and Nutrition Services	✓		
SOS Community Services		✓	
Stockbridge Chamber of Commerce			✓
Stockbridge Community Schools			✓
Stockbridge Wellness Coalition			✓
UM School of Public Health, Nutrition Sciences, Dietetic Interns	✓	✓	
UM School of Public Health, Office of Public Health Practice	✓	✓	
United Way of Washtenaw County		✓	
Washtenaw Community College		✓	
Washtenaw County Commissioners		✓	
Washtenaw County Health Department	✓	✓	✓
Washtenaw Food Policy Council		✓	
Washtenaw Health Plan		✓	
Washtenaw Intermediate School District	✓	✓	✓
We the People Opportunity Farm		✓	
Ypsilanti Community Schools		✓	
Ypsilanti Heritage Festival	✓		
Ypsilanti Meals on Wheels	✓	✓	
Ypsilanti Public Library		✓	

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2022-2024**

CHNA SIGNIFICANT HEALTH NEED:	Pre-conceptual and Perinatal Health
CHNA REFERENCE PAGE:	32
<p>BRIEF DESCRIPTION OF NEED: Birth outcome disparities continue to persist among racial and ethnic minorities, largely due to institutional and systemic issues that inequitably distribute resources and opportunities. In Washtenaw County, babies born of Black/African American mothers are 4.3 times more likely to die in the first year of life than those of White/Caucasian mothers.</p> <p>Research shows that babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than those babies born to mothers who do get adequate prenatal care. It is essential to obtain early quality prenatal care to identify and treat health problems and health-compromising behaviors that can negatively impact fetal development. Increasing the number of women who receive early quality prenatal care can improve maternal and infant health outcomes and lower health care costs by reducing the likelihood of complications during pregnancy, childbirth, and postpartum.</p>	
<p>GOAL: Increase positive outcomes for pre-conceptual and perinatal health. Improve the health and well-being of women, infants, children and families in greater Washtenaw County.</p>	
<p>OBJECTIVE:</p> <ol style="list-style-type: none"> 1. Reduce the infant mortality rate from 5.2 deaths per 1000 live births (2017-2019) to 4.5 deaths per 1000 live births (Source: MDHHS Health for All). <ol style="list-style-type: none"> 1.1. Reduce Black/African American Infant Mortality rates from 14 to 8 deaths per 1000 live births within Washtenaw County (Source: MDHHS Health for All). 2. Increase the percentage of mothers who receive adequate prenatal care from 81.1% to 84% (Source: MDHHS Health for All). 	
<p>ACTIONS THE HOSPITAL FACILITIES INTEND TO TAKE TO ADDRESS THE HEALTH NEED, FISCAL YEARS 2022-2024, UNLESS OTHERWISE NOTED:</p> <p>Michigan Medicine:</p> <ol style="list-style-type: none"> 1. Train and educate providers, staff, and parents on safe sleep practices. 2. Continue the Maternal and Infant Health Program (MIHP) for pregnant women and infants up to one year of age. 3. Invest in community organizations, programs and advocacy that support mothers, infants, children, adolescents, and families in order to improve health. 4. Program for Multicultural Health will serve on the Region 9-Pre-conceptual and Perinatal Health Collaborative. 5. Regional Alliance for Healthy Schools will provide pre-conception and sexual activity risk reduction counseling, and offer confidential adolescent testing and treatment for sexually transmitted infection. 6. Regional Alliance for Healthy Schools will offer expectant parents' referrals to OBGYN, prescriptions for prenatal vitamins, referrals to local agencies for parenting and resource support, and vaccinations, including COVID vaccines. 7. Partner with community organizations to provide education and outreach related to pre-conceptual health and perinatal care. 	

St. Joseph Mercy Ann Arbor:

1. Launch St. Joe's Ann Arbor Perinatal Wellness Center which offers a safe, inclusive, and nonjudgmental space where women seek social, emotional, and physical support to help with their transition through pregnancy and the postpartum period.
2. Train and educate providers and staff on implicit bias.
3. Provide counseling and support groups for both mothers and fathers, specifically within 48197/48198.
4. Advocate for the provision of breastfeeding and prenatal education and support classes for free or greatly reduced rates for families in our community.
5. Support the Developmental Clinic (DAC) for Medicaid patients.
6. Launch a Diversity, Inclusion & Equity Committee within the Women's & Children Hospital Division to better collaborate, communicate, and support families and advance this work.

St. Joseph Mercy Chelsea:

1. Collect data on local needs related to prenatal care and education among expectant mothers in the service area.
2. Provide opportunities for learning, skill-building and social support for women and children.

Joint Hospital Systems Actions:

1. Explore opportunities to increase access to prenatal education and programs to support new mothers.
2. Partner with local Maternal and Infant Health Coalitions to advance the work
3. Invest in community organizations, programs and advocacy that support mothers, infants, children, adolescents, and families in order to improve health
4. Conduct regular community listening sessions to understand the experiences of minority mothers before, during and after pregnancy.
5. SJMC and SJMAA: Utilize Community Resource Directory to help support maternal and infant health initiatives
6. SJMC and SJMAA: Expand the presence of Faith Community Nursing staff throughout the community to provide maternal and infant health education support through faith communities.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Improve access to care and education for expectant mothers and fathers.
2. Reduction of infant mortality rates in Washtenaw County.
3. Reduction of maternal mortality rates in Washtenaw County or service area.
4. Increase in breastfeeding uptake and duration.
5. Improve patient experience.

PLAN TO EVALUATE THE IMPACT:**Michigan Medicine:**

The Community Health Coordinating Committee will monitor progress of community grant programs' impact. Community Health Services staff will collect various metrics from staff on ongoing community benefit programming. For data inquiries please contact Community Health Services: 734-998-2156 or email communitybenefit@med.umich.edu.

St. Joseph Mercy Ann Arbor:

The SJMAA Community Benefit Ministry Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys, focus groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact SJMC/SJMAA staff through www.stjoeshealth.org/cbm 'Contact' icon at the bottom of the webpage.

St. Joseph Mercy Chelsea

The SJMC Community Health Improvement Council will monitor progress towards these outcomes by regularly collecting and analyzing program data. Each program has defined process and outcome measures to evaluate impact. This data is collected and reported at regular intervals. Data sources include surveys, focus groups, key stakeholder interviews and archival data from hospital, law enforcement, school, and other records.

For data inquiries, please contact Reiley Curran, at (734) 593-5279, or reiley.curran@stjoeshealth.org.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Staff time to support the implementation of the actions listed above.
- Supplies and marketing for programs.
- Funding for programs, organizations, and advocacy.

COLLABORATIVE PARTNERS: Pre-conceptual and Perinatal Health

Collaborative Partner Name	Michigan Medicine	St. Joseph Mercy-Ann Arbor	St. Joseph Mercy-Chelsea
Catholic Social Services		✓	
Corner Health Center	✓	✓	
Michigan Prison Doula Initiative		✓	
Peace Neighborhood Center	✓		
Washtenaw Success by Six	✓		
Great Start Collaborative	✓		
Engage EMU	✓		
Region 9 Perinatal Quality Collaborative		✓	
USDA: Women, Infants, and Children (WIC)		✓	
United Way of Washtenaw County		✓	
SOS Community Services		✓	
Huron Valley Correctional Facility		✓	
Hope Clinic		✓	
Women's Center of Southeast Michigan	✓		

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2022-2024**

CHNA SIGNIFICANT HEALTH NEED: Social Isolation

CHNA REFERENCE PAGE: 48

BRIEF DESCRIPTION OF NEED:

- A youth collaborative, based in Ypsilanti, evaluated health and safety concerns of young people (12-25) and found that 2 out of every 3 young people surveyed wish there were more opportunities to get to know their neighbors.
- Within Washtenaw County, the most positive social needs screened within primary care sites was the domain of Loneliness (as an equivalent to social isolation).
- Focus groups of pregnant women and mothers of young children in Washtenaw County revealed lack of social support and social isolation affect ability to return to work and had effects on mental health during the postpartum period.

GOAL: Increase social support and reduce the negative impacts of social isolation in greater Washtenaw County.

OBJECTIVE:

1. Reduce the proportion of patients who screen positive for social isolation by 1-2%. (Baseline: 6.3-15.4%) (Source: UNITE member hospital and physician practice EMR)

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED, FISCAL YEARS (FY) 20220-2024, UNLESS OTHERWISE NOTED:

Joint Hospital Systems Actions:

1. Screen patients for social needs at regular intervals. Refer those who screen positive to local resources or programs.
2. Review data collected and analyzed by the UM School of Public Health in 2018 and 2019. Identify additional data collection needs.
3. Develop, implement and evaluate a signature project to address social support over the next three years.
4. Develop a resource map of agencies, programs, services and policies that impact social support.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. A shared understanding of the current state of social support and social isolation in greater Washtenaw County, particularly among vulnerable populations
2. Increase investment in programs to address social isolation and social support.
3. Increase collaboration to create policy, systems and environmental changes to improve social support and decrease social isolation.

PLAN TO EVALUATE THE IMPACT:

The UNITE team will define outcome and impact measures to be tracked at regular intervals over the next three years. The results of this evaluation will be shared with the communities via internal and external methods.

PROGRAMS AND RESOURCES THE HOSPITALS PLANS TO COMMIT:

- Staff time to support the implementation of the actions listed above.
- Supplies and marketing for programs.
- Funding for programs, organizations, and advocacy.

COLLABORATIVE PARTNERS: Social Isolation

Collaborative Partner Name	Michigan Medicine	St. Joseph Mercy-Ann Arbor	St. Joseph Mercy-Chelsea
UM School of Public Health	✓	✓	✓
5 Healthy Towns Foundation	✓	✓	✓
Chelsea Ministerial Association			✓
Chelsea Police Department			✓
Chelsea School District			✓
Chelsea Senior Center			✓
Chelsea Wellness Coalition			✓
Chelsea-area Chamber of Commerce			✓
City of Chelsea			✓
City of Dexter			✓
Dexter Chamber of Commerce			✓
Dexter Community Schools			✓
Dexter Internal Medicine			✓
Dexter Ministerial Association			✓
Dexter Senior Center			✓
Dexter Wellness Coalition			✓
Faith in Action			✓
Grass Lake Community Wellness Initiative			✓
Grass Lake School District			✓
Grass Lake Senior Center			✓
Manchester Community Schools			✓
Manchester Wellness Coalition			✓
MSU Cooperative Extension 4-H office			✓
National Alliance on Mental Illness	✓	✓	✓
Scouts			✓
Stockbridge Chamber of Commerce			✓
Stockbridge Community Schools			✓
Stockbridge Police Department			✓
Stockbridge Wellness Coalition			✓
Washtenaw Area Council on Children	✓	✓	✓
Washtenaw County Community Mental Health	✓	✓	✓
Washtenaw County Sheriff	✓	✓	✓
Washtenaw Intermediate School District	✓	✓	✓
Washtenaw County Health Department	✓	✓	✓

Social Determinants of Health

Social Determinants of Health (SDOH) have always been a lens which UNITE has utilized in order to impact the three health priority areas of (1) Mental Health and Substance Use Disorders, (2) Obesity and Related Illnesses and (3) Pre-conceptual and Perinatal Health. According to the Centers for Disease Control (CDC), SDOH are “conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.” For more information about Social Determinants of Health, please see <https://www.cdc.gov/socialdeterminants/about.html>.

UNITE’s Community Health Needs Assessment published in June, 2021, identified six key Social Determinants of Health (SDOH) that impact each of the identified health priority areas. The SDOH identified by UNITE include three primary SDOH:

1. Housing/Homelessness
2. Poverty
3. Social Isolation

And three emerging SDOH:

1. Climate Change
2. Incarceration
3. Medical Debt

UNITE will be addressing Social Isolation collaboratively (see table above). Recognizing the importance of six named Social Determinants of Health (SDOH), each hospital will engage in some level of programming/tactics related to addressing one or more of the remaining SDOH. These activities are summarized below.

Michigan Medicine

Michigan Medicine will continue community-based funding related to health equity and Social Determinants of Health, including the below:

Housing/Homelessness:

- Collaborate, support and/or fund training for parents, families, and residents that equip them with the skills to organize and advocate around issues related to poverty, housing, and more.
- Partner with community organizations to support housing and shelter opportunities for unhoused individuals exiting the hospital, and ensure adequate housing resources for people with mental illness and substance use disorders.
- Provide tax filing support to older adults to support continuation of stable housing.

Poverty:

- Engage in Healthcare Anchor Network activities to develop strategies for improving local hiring practices.
- Partner with, support, and or advocate for anti-poverty efforts.

Climate Change:

The University of Michigan has committed to the following:

- Eliminate Scope 1 emissions (resulting from direct, on-campus sources) by 2040.
- Achieve carbon neutrality for Scope 2 emissions (resulting from purchased electricity) by 2025.

- Establish net-zero goals for Scope 3 emissions categories (resulting from indirect sources like commuting, food procurement, and university-sponsored travel) by 2025.

For more information about these commitments, please see

<http://sustainability.umich.edu/carbonneutrality#scope-1-emissions-initial-reduction-strategies>

Additionally, Michigan Medicine will explore

- Support of programs that improve resilience and reduce the impact of climate change on vulnerable communities within the Michigan Medicine service area.
- Support of programs that reduce the impact of toxins/environmental injustice.

Incarceration:

- Partner with, support, and/or advocate for restorative justice programs and practices, social supports, prevention, and alternatives to police and organizations that support people experiencing and exiting incarceration.
- Explore programs for youth that disrupt the school to prison pipeline.
- The Trauma/Burn program will provide programming to youth involved in fire-setting to reduce arrest and recidivism.

Medical Debt:

- Michigan Medicine will continue to provide Financial Assistance through the MSupport program.
- Support the Washtenaw Health Plan (WHP) to ensure health coverage for individuals who are ineligible for Medicaid.

St. Joseph Mercy Ann Arbor

St. Joseph Mercy Ann Arbor’s Community Health & Well-Being strategy includes impacting Social Determinants of Health as a key pillar of our work. Through advocacy and anchor strategy initiatives, SJMAA will augment our effort to address the root cause of SDOH and devise a more robust plan to address these topic areas. Below are initiatives SJMAA is or will be engaged in.

Housing/Homelessness:

- Explore how St. Joseph Mercy Ann Arbor can utilize campus land to support workforce housing
- Continue to offer free or subsidized rent to community-based organizations (Washtenaw Housing Alliance, Alpha House, Catherine’s House and HouseN2 Home) to support shelters, transitional housing, furnishing homes, and assisting clients with obtaining jobs.

Poverty:

- Engage in Healthcare Anchor Network activities to develop strategies for improving local hiring practices and workforce development
- Continue to offer free or subsidized rent to community-based organizations (i.e. Dress for Success) to support the distribution of professional attire for work and development tools to help women thrive at work and in life.
- Continue to provide charitable contributions to community-based organizations to address poverty and other social determinants of health.

Climate Change:

- Continue initiatives related to energy conservation, waste reduction, decreasing dependency on plastic products, increasing recycling efforts, and overall efforts to reduce our carbon footprint as a healthcare institution.

- Leverage the power of stock ownership in publicly-traded companies to promote environmental change such as reducing greenhouse gas emissions and encouraging the development of sustainability reports.

Incarceration:

- Support efforts through the Washtenaw County Mental Health and Safety Millage.
- Partner with the Washtenaw Sheriff's Department to explore collaboration opportunities.

Medical Debt:

- St. Joseph Mercy Ann Arbor will provide Financial Assistance to patients in need.
- Support the Washtenaw Health Plan (WHP) to ensure health coverage for individuals who are ineligible for Medicaid.

St Joseph Mercy Chelsea

St. Joseph Mercy Chelsea will continue community-based funding related to health equity and Social Determinants of Health, including the below:

Housing/Homelessness:

- Collaborate, support and/or fund training for parents, families, and residents that equip them with the skills to organize and advocate around issues related to poverty, housing, and more.
- Partner with community organizations to support housing and shelter opportunities for unhoused individuals exiting the hospital, and ensure adequate housing resources for people with mental illness and substance use disorders.

Poverty:

- Engage in Healthcare Anchor Network activities to develop strategies for improving local hiring practices.
- Partner with, support, and or advocate for anti-poverty efforts.

Climate Change:

- Continue initiatives related to energy conservation, waste reduction, decreasing dependency on plastic products, increasing recycling efforts, and overall efforts to reduce our carbon footprint as a healthcare institution.
- Leverage the power of stock ownership in publicly-traded companies to promote environmental change such as reducing greenhouse gas emissions and encouraging the development of sustainability reports.

Incarceration:

- Support efforts through the Washtenaw County Mental Health and Safety Millage.
- Partner with the Washtenaw Sheriff's Department to explore collaboration opportunities.

Medical Debt:

- St. Joseph Mercy Chelsea will continue to provide Financial Assistance through the McAuley Support program.
- Support the Washtenaw Health Plan (WHP) to ensure health coverage for individuals who are ineligible for Medicaid.
- Provide enrollment assistance in partnership with local safety net organizations, to help uninsured people access health insurance.

Conclusion

On October 26, 2021, the local Board of Trustees for St. Joseph Mercy Chelsea met to discuss the 2022-2024 Implementation Strategy for addressing the community health needs identified in the 2021 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget. Subsequently, the Joint Venture Board of Trustees for St. Joseph Mercy Chelsea reviewed and approved this Implementation Strategy on October 29, 2021.

On October 27, 2021, the local board for St. Joseph Mercy Ann Arbor met to discuss the 2022-2024 Implementation Strategy for addressing the community health needs identified in the 2021 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy.

On November 4, 2021, the Michigan Medicine health system executive committee met to discuss the 2022-2024 Implementation Strategy for addressing community health needs identified in the Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy.

Acknowledgements

The work of the UNITE collaborative would not have been possible without the commitment of numerous partners. We wish to thank Washtenaw County Public Health, the Washtenaw Health Initiative, the University of Michigan School of Public Health Office of Public Health Practice for their support of this work. We are grateful to the members of our internal committees for their contributions to the plan.

We also want to thank our executive leadership for their support of the work. Without their support we would not be able to continue doing this good work in the community.

We are especially thankful to community organizations, members and groups for helping us shape our understanding of the community's needs and how to best respond to priorities and the existing gaps.