

2012 CHNA Implementation Strategy

Community Health Needs Assessment
for Muskegon, Oceana and Newaygo Counties 2012



Prepared by:
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 **MERCY HEALTH PARTNERS**

A MEMBER OF THE **NEW** MERCY HEALTH

INTRODUCTION TO THE 2012-2015 IMPLEMENTATION STRATEGY FOR THE LAKESHORE CAMPUS OF MERCY HEALTH PARTNERS

Mercy Health Partners' Community Health Needs Assessment (CHNA) for the Lakeshore Campus was completed in June 2012 and published in September 2012. Data analysis and the community input components yielded 17 health issues of concern in Oceana and Newaygo Counties. Ranking sessions were held that included representatives from a wide range of local health and human service providers, and other stakeholder groups. The groups were given a list of not prioritized health issues and asked to categorize each issue according to the domain they felt should take the lead role in addressing the particular issue. The choices were: the "Health System," which includes the hospital, physician practices and public clinics; "Public Health," which includes the local health departments; and "Community," which includes schools, Community Mental Health or other governmental agencies, and community-based and faith-based organizations. Once sorted by domain, the groups then ranked the issues under each on a scale of 1 to 5, with 5 meaning "most significant." The scoring was based on four criteria: severity (magnitude or urgency of the health issue); feasibility (in terms of resources available and surmountable barriers); potential impact on the greatest number of people; and achievability within three years.

In accordance with the Affordable Care Act of 2010 and Section 501(r)(3)(A(ii)) of the IRS Code, each non-profit hospital entity is required to develop and adopt a written "Implementation Strategy" that addresses the health needs identified in the CHNA. The purpose of this Implementation Strategy is to provide a guide for the hospital system to develop policy in allocating resources to meet the identified community health needs. More specifically, the Implementation Strategy relates the CHNA to the hospital system's community benefit expenditures and its strategic business planning. It indicates strategies that address community health priorities and opportunities during the three-year CHNA period.

In doing so, the Implementation Strategy provides a conceptual framework for the hospital system's community benefit programs and services; and, as such, a tool for developing specific work plans to meet specific needs. In general, this framework may embrace a range of community benefit expenditures, including: outreach, information, referral and enrollment, direct service community programs, community care coordination, health education and supporting community collaborations. The first part of the Implementation Strategy that follows profiles the principal health issues that were identified as within the health system's domain, specifies the objectives and intervention strategies, and lists key partners. The Recommended Effort section indicates the kinds of support recommended for addressing the issues, which may be program interventions, in-kind support and/or cash support to partner agencies. Whatever the type of support provided, the hospital's community benefit service will track and maintain outcome data for programs or other assistance that is implemented.

The second part of the Implementation Strategy profiles needs identified in the CHNA's ranking session as falling outside the health system's domain; that is, for Public Health and Community to assume leadership roles in addressing these issues. These profiles describe the hospital's partnership role(s) with the organizations taking leadership. The profiles also provide explanations for areas in which the hospital system does not intend to participate.

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	DIABETES		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 23, 32, 34		RANKING: 1 (tied)	
Brief Description of Issue:			
Lack of preventive care, high rates of unhealthy behaviors; such as smoking and drinking, being overweight, having poor self-management, and barriers to healthy foods—all contributing to high rates of diabetes—one of the leading health concerns presented in the 2012 CHNA.			
GOAL:			
Reduce the incidence and impact of diabetes.			
PRINCIPAL OBJECTIVE: Reduce the incidence of diabetes and provide community care coordination and self-management education as an integral component of care for those experiencing diabetes.	FY13	FY14	FY15
	In place	On-going	On-going
STRATEGIES: 1. Conduct community screenings 2. Ensure that patients have primary care homes 3. Work with patients in accessing pharmacy supplies and assistance programs 4. Work with PCP practices to assign Community Health Workers to low-adhering patients 5. Support community wellness groups and self-management workshops		New effort	In development
RECOMMENDED EFFORT: ➤ Programmatic: continue primary care home, coverage, PAP enrollment and community care coordination/CHWs ➤ In-kind support: participate in community screenings and community wellness groups			
KEY PARTNERS:			
Primary Care Physician Network, PCP Practices, Muskegon Community Health Project, District Health Department #10, Community wellness groups			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	HYPERTENSION AND CARDIOVASCULAR DISEASE		
COMMUNITY BENEFIT CATEGORY:			
<input type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 24, 34, 36		RANKING: 5	
Brief Description of Issue:			
Local data reveals a significantly high rate of reported heart attack and coronary heart disease, rates that are much higher than that of the State of Michigan and of the United States.			
GOAL:			
Reduce the incidence of hypertension and cardiovascular disease in Oceana and Newaygo Counties			
PRINCIPAL OBJECTIVES: Foster lifestyle modifications and promote adherence to medication treatment regimens involving choices that include improved diets, weight loss, regular aerobic exercise, moderation of alcohol intake and cessation of smoking.	FY13	FY14	FY15
	PAP in place	New effort	In development
STRATEGIES: 1. Conduct community screenings 2. Work with patients in accessing pharmacy assistance programs 3. Conduct wellness outreach workshops (schools, senior centers, faith-based organizations, etc.) 4. Support community wellness groups	In place	On-going	On-going
	In place	On-going	On-going
	In place	On-going	On-going
	In place	On-going	On-going
RECOMMENDED EFFORT:			
<ul style="list-style-type: none"> ➤ Programmatic: continue PAP; community screenings; wellness workshops ➤ In-kind support: representatives on community wellness groups 		Community screenings; wellness workshops; participate in community wellness groups	Community screenings; wellness workshops; participate in community wellness groups
KEY PARTNERS:			
Muskegon Community Health Project, District Health Department #10, Oceana School Districts, Council on Aging, Northwest Michigan Health Services (FQHC), Hart and Shelby Primary Care Practices			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	PATIENT-PROVIDER COMMUNICATIONS		
COMMUNITY BENEFIT CATEGORY:			
<input type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 34		RANKING: 6	
Brief Description of Issue:			
Low level of health literacy is cited as a significant issue for improving community health. Consumers commonly lack an understanding of basic healthcare terminology, personal health management responsibilities and reasons for adherence to prescribed treatment regimens. Identified as a need in focus groups.			
GOAL:			
Improve patient-provider communications.			
PRINCIPAL OBJECTIVE: Improve the public's knowledge and understanding of basic healthcare terminology and wellness practices.	FY13	FY14	FY15
STRATEGIES: 1. Development of basic education/healthcare literature for distribution at the offices of PCPs (English and Spanish). 2. Develop and market consumer health information via local media sources (English and Spanish). 3. Examine needs and opportunities for increasing languages services. 4. Support CALL 2-1-1	In place	On-going	On-going
		New effort	In development
	In place	On-going	On-going
	In place	On-going	On-going
RECOMMENDED EFFORT:			
<ul style="list-style-type: none"> ➤ Programmatic: continue education materials in English and Spanish, language services; develop consumer health media materials ➤ In-kind and Cash support: continue support of CALL 2-1-1 			
KEY PARTNERS:			
Lakeshore Health Network, 2) Primary Care Homes-Care Managers, Northwest Michigan Health Services (FQHC), District Health Department #10, Mercy Health Partners' Marketing Department, CALL 2-1-1			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	SPECIALTY CARE AND TESTING		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 34		RANKING: 11	
Brief Description of Issue:			
Lack of local specialty care and diagnostic testing services continue to create disparities in health access for residents of Oceana and Newaygo Counties as evidenced by patients often needing to travel out of the county to receive specialty care services.			
GOAL:			
Improve local access to specialty healthcare and testing.			
PRINCIPAL OBJECTIVE: Create local opportunities for specialty healthcare services and testing.	FY13	FY14	FY15
STRATEGIES: 1. Consider specialty care clinics in concert with existing Mercy practices and Lakeshore Campus. 2. Recruit new specialty physicians to practice in Oceana County	On-going	New effort On-going	In development On-going
RECOMMENDED EFFORT:	On-going	On-going	On-going
	<ul style="list-style-type: none"> ➤ Continue recruitment ➤ Explore feasibility of specialty clinics 	Feasibility study	Assess feasibility
KEY PARTNERS:			
Primary Care Physician Network & Mercy practices, District Health Department #10, Northwest Michigan Health Services (FQHC)			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	PRIMARY CARE PHYSICIAN SHORTAGE		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 13, 15, 34		RANKING: 12	
Brief Description of Issue:			
Oceana and Newaygo Counties have been deemed a Health Professional Shortage Area (HPSA) and a Medically Underserved Population (MUP) area by the Federal Government. This problem will be more acute with the implementation of the Affordable Care Act in 2014. It was also raised in focus groups and is supported by data.			
GOAL:			
Increase the number of PCPs serving the Lakeshore Hospital service area.			
PRINCIPAL OBJECTIVE:	FY13	FY14	FY15
Increase the number of PCPs, including PCPs of Hispanic/Latino ethnicity.			
STRATEGIES:			
1. Maintain ongoing recruitment practices. 2. Target Hispanic/Latino physicians.			
RECOMMENDED EFFORT:			
➤ Maintain on-going recruitment	On-going	On-going	On-going
KEY PARTNERS:			
Primary Care Physician Network & Mercy PCP practices, Northwest Michigan Health Services (FQHC)			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	URGENT CARE		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 34		RANKING: 13	
Brief Description of Issue:			
Emergency Department visits for primary care treatment create a burden on the health system. The strategic placement of urgent care facilities and expansion of primary care practices' hours of operation could reduce the burden on the ED, as well as provide more appropriate clinical care to the patient.			
GOAL:			
Expand urgent care services.			
PRINCIPAL OBJECTIVE:	FY13	FY14	FY15
Implement an urgent care system consistent with the needs and demands of the Lakeshore area populace.			
STRATEGIES:			
1. Expand/modify Mercy PCP office hours and accept unscheduled patients.	In development	In place	On-going
2. Build a sustainable urgent care model within the existing system and infrastructure.			
RECOMMENDED EFFORT:			
➤ Programmatic: continue expansion of Mercy PCP office hours; consider unscheduled patient visits.	In development	In place	On-going
➤ Explore new urgent care model		New effort	In development
KEY PARTNERS:			
Primary Care practices, Mercy Business Department			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY HEALTH SYSTEM ISSUE PLANNING PROFILE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	HEALTH AGENCY COMMUNICATIONS		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 34		RANKING: 15	
Brief Description of Issue:			
Agency staff, including PCPs, consistently voiced frustration over a lack of awareness and communication regarding available local health and social services available for referring their clients/patients.			
GOAL:			
Improve communications between healthcare and human service providers.			
PRINCIPAL OBJECTIVES:	FY13	FY14	FY15
Among healthcare providers, improve the transfer and receipt of information and inter-agency referrals regarding the range of healthcare and human service available within Oceana and Newaygo Counties.			
STRATEGIES:			
1. Facilitate the exchange of information and translation of knowledge through presentations, group meetings, standard data collection and reporting efforts, and product development activities.		New effort	In development
2. Promote a referral service directory for use by PCPs and other private caregivers.		New effort	In place
3. Build on the development of integrated models of care; expand use of Community Health Workers	In place	On-going	On-going
RECOMMENDED EFFORT:			
<ul style="list-style-type: none"> ➤ Programmatic: continue integrated coordinated care model and use of CHWs; ➤ In-kind support: promote exchange of health resource information among healthcare and human service providers ➤ Cash support: develop referral services directory for PCPs 	In place	In place	In place
KEY PARTNERS:			
Lakeshore Health Network, Muskegon Community Health Project, District Health Department #10, CALL 2-1-1			

**ISSUES IDENTIFIED AS
PUBLIC HEALTH DOMAIN
AND
COMMUNITY DOMAIN**

**2013 – 2015 CHNA IMPLEMENTATION STRATEGY
PUBLIC HEALTH/COMMUNITY ISSUE PLANNING PROFILE**

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	PREVENTIVE CARE		
LEAD DOMAIN AND/OR ORGANIZATIONS:	PUBLIC HEALTH, School Districts, Community groups, Primary Care Providers, Mercy Health Partners' Marketing Department		
COMMUNITY BENEFIT CATEGORY:			
<input type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE: 34		RANKING: 1 (tied)	
Brief Description of Issue:			
High prevalence of chronic disease states, such as diabetes and cardiovascular disease, are indicators that a more intensive focus on preventive care is needed.			
GOAL:			
Encourage people to employ preventive care recommendations and healthy behaviors.			
SUGGESTED HEALTH SYSTEM ROLE:		FY13	FY14
Work with public health to create public outreach and awareness opportunities that foster preventive healthcare practices and behaviors.			New effort
SUGGESTED HEALTH SYSTEM STRATEGIES:		FY13	FY14
1. In concert with the District #10 Health Department and PCP Practices, assist with wellness outreach events (schools, senior centers, faith-based organizations, etc.) 2. Provide "free-screening and consultation" events 3. Develop and distribute basic "Preventive Care Tips" flyers/brochures for broad public distribution. Prepare in Spanish and English.		Determine hospital system role and strategy	Facilitate a work plan with community partners
		Continue work plan	
EVALUATION APPROACH:			
Assess hospital system activities regarding suggested activities			
KEY PARTNERS:			
District Health Department #10, Primary Care Physician Practices, Northwest Michigan Health Services (FQHC), Mercy Health Partners' Marketing Department, Local Business Association, Local Service Clubs, Healthy Oceana Group, School Districts, Local Churches			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY
HEALTH ISSUE PLANNING PROFILE
PUBLIC HEALTH/COMMUNITY LEAD ROLE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	OBESITY and NUTRITION EDUCATION/ACCESS TO HEALTHY FOODS		
LEAD DOMAIN AND/OR ORGANIZATIONS:	PUBLIC HEALTH—District Health Department #10, Northwest Michigan Medical Services, School Districts, MSU Extension		
COMMUNITY BENEFIT CATEGORY:			
<input type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S):		Obesity: 23, 29, 32, 34	RANKING: 3
		Nutrition Education: 29, 34	RANKING: 17
Brief Description of Issue:			
Sedentary lifestyle, poor nutrition habits and self-management, difficulty in accessing healthy foods due to income, and "food deserts" are contributing factors in the high obesity rates in Oceana and Newaygo Counties.			
GOAL PER CHNA:			
Reduce the rate of self-reported obesity and being overweight by:			
1. Promoting healthy lifestyle modifications (involving choices that include improved diets, weight loss and aerobic exercise) 2. Promote nutrition education and access to healthy foods			
HEALTH SYSTEM ROLE: Provide expert consultation and support for community-wide prevention and education efforts	FY13	FY14	FY15
	New effort		
SUGGESTED HEALTH SYSTEM STRATEGIES:			
	1. Hospital and Primary Care Network work in concert with the District Health Department #10 and School Districts to develop community weight management and wellness public awareness materials. 2. Align with Muskegon County's "One in '21" five-tier wellness strategy (Infrastructure, Community Engagement, Healthcare, Schools, Business/Labor) 3. Assist businesses and schools in developing wellness programs and provide expertise where appropriate 4. Provide "free-screening and consultation" workshops 5. Strengthen existing Oceana Healthy Lifestyles Coalition. 6. Monitor and report patient BMI data in aggregate	Determine hospital system role and strategy	Facilitate work plan with community partners
EVALUATION APPROACH:			
Assess hospital system regarding suggested activities.			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY
HEALTH ISSUE PLANNING PROFILE
PUBLIC HEALTH/COMMUNITY LEAD ROLE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	TRANSPORTATION		
LEAD DOMAIN AND/OR ORGANIZATIONS:	COMMUNITY—Council on Aging, Red Cross, County Emergency Services, District Health Department #10, and Northwest Michigan Health Services		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S): 21, 32, 33		RANKING: 7	
Brief Description of Issue:			
The need for transportation to health care services was identified as a barrier issue, especially for low-income, Native American and Hispanic populations; including persons with disabilities and the elderly. Transportation for health appointments among the top 10 services requested and one of the top unmet services identified by CALL 2-1-1 in 2012.			
GOAL PER CHNA:			
Improve access to healthcare services for those lacking transportation by instituting an arranged transportation service system to assist healthcare clients dependent upon regular healthcare services, such as dialysis and cancer patients.			
HEALTH SYSTEM ROLE:	FY13	FY14	FY15
Support local efforts; continue emergency transportation by hospital as necessary and appropriate			
SUGGESTED HEALTH SYSTEM STRATEGIES:			
1. Continue shuttle for dialysis patients. 2. Provide emergency transportation via ambulance services and cab fare program 3. Work with local agencies, community service organizations and faith-based entities to identify and organize a shuttle service for people requiring hospital positioned healthcare facility services on a regular or routine basis.	In place In place	On-going On-going New	On-going On-going In development
EVALUATION APPROACH:	Assess current patient demand and examine opportunities for improvement in patient scheduling and delivery of services.	Identify the range of transportation needs. Explore expanding transportation availability for other services based on identified need. Monitor user rates for all transportation service	Assess transportation resources Evaluate the effectiveness of transportation services as delivered in FY14.

2013 – 2015 CHNA IMPLEMENTATION STRATEGY
HEALTH ISSUE PLANNING PROFILE
PUBLIC HEALTH/COMMUNITY LEAD ROLE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	DENTAL CARE		
LEAD DOMAIN AND /OR ORGANIZATIONS:	COMMUNITY--Oceana Dental Clinic, Area Dentists, District Health Department #10		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input checked="" type="checkbox"/> Coverage <input type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S): 29, 34		RANKING: 9	
Brief Description of Issue:			
Lack of dental insurance, the high cost of service and limited local clinic capacities stand as primary barriers to dental care services in Oceana and Newaygo Counties.			
GOAL PER CHNA:			
Improve access to dental care by expanding dental insurance and dental clinic capacity.			
HEALTH SYSTEM ROLE:	FY13	FY14	FY15
Support community and public health efforts to increase access to dental care		New effort	In development
SUGGESTED HEALTH SYSTEM STRATEGIES:			
1. Help facilitate establishment of Muskegon programs to reduce number of Muskegon residents utilizing the Oceana clinic. 2. Work with Muskegon County's Volunteers for Dental Care program to evaluate for possible replication in Oceana County.	Determine hospital system role and strategy	Facilitate a work plan with community partners	Continue work plan
EVALUATION APPROACH:			
Assess hospital system activities regarding suggested activities			

**2013 – 2015 CHNA IMPLEMENTATION STRATEGY
 HEALTH ISSUE PLANNING PROFILE
 PUBLIC HEALTH/COMMUNITY LEAD ROLE**

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	TEEN PREGNANCY/LOW BIRTH WEIGHT		
LEAD DOMAIN AND/OR ORGANIZATIONS:	PUBLIC HEALTH—School Districts, Community- and Faith-based Organizations		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S): 11, 23		RANKING: 10	
Brief Description of Issue:			
Teen pregnancy and birth rates for Oceana and Newaygo Counties are higher than the state average, which often contributes to the incidence of low birth weight babies. Lack of prenatal care has been cited in the 2012 CHNA as another contributing factor to low birth weight babies.			
GOAL PER CHNA:			
Reduce teen pregnancy and rate of low birth weight babies			
HEALTH SYSTEM ROLE: Provide prenatal education and care to at-risk pregnant women, particularly to women under 18 years of age	FY13	FY14	FY15
	In place	On-going	On-going
SUGGESTED HEALTH SYSTEM STRATEGIES: Expand "Pathways to Healthy Pregnancy" program in Oceana County; outreach and enroll at-risk pregnant women in conjunction with primary care practices and women's health organizations, school systems, and other community-based organizations as referral sources.	In development	In place	In place
	Track health outcomes of Pathways patients	Cost-benefit analysis of Pathways program; track low birth weight incidence	Continue Pathways patient health outcomes; cost-benefit analysis and low birth weight incidence
EVALUATION APPROACH:			

2013 – 2015 CHNA IMPLEMENTATION STRATEGY
HEALTH ISSUE PLANNING PROFILE
PUBLIC HEALTH/COMMUNITY LEAD ROLE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	DEPRESSION		
LEAD DOMAIN AND /OR ORGANIZATIONS:	COMMUNITY—District Health Department #10, West Michigan Community Mental Health Services, Mercy Life Counseling		
COMMUNITY BENEFIT CATEGORY:			
<input checked="" type="checkbox"/> Access <input checked="" type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S): 23, 29, 32, 34		RANKING: 14	
Brief Description of Issue:			
Depression has emerged as a growing issue in the 2012 CHNA; not only the reported incidence, but that mental health services are not widely accessible and PCPs do not feel adequately trained to treat and prescribe for mental health disorders. Depression is commonly correlated with high substance abuse and unemployment rates.			
GOAL PER CHNA:			
Advance the treatment of depression by expanding the range of available services for the treatment of depression.			
HEALTH SYSTEM ROLE: Participate in Physician Network’s Depression Collaborative to enhance training for PCPs and increase access to mental health providers	FY13	FY14	FY15
	In place	On-going	On-going
SUGGESTED HEALTH SYSTEM STRATEGIES: 1. Create a directory of referral sources for use by primary physicians. 2. Institute on-site depression “quick response” training for primary care physicians. 3. Use Community Health Workers to help connect patients to mental health providers (CMH, Mercy Life Counseling) and continue PAP program.	In development	Determine hospital system role and strategy In place	Facilitate a work plan with community partners In place
	In development	In place	In place
EVALUATION APPROACH:	Assess MCHP’s PAP and CHW activities in Oceana County	Assess hospital system regarding suggested activities	Assess hospital system regarding suggested activities

2013 – 2015 CHNA IMPLEMENTATION STRATEGY
HEALTH ISSUE PLANNING PROFILE
PUBLIC HEALTH/COMMUNITY LEAD ROLE

MHP CAMPUS:	LAKESHORE CAMPUS		
CHNA HEALTH ISSUE:	ALCOHOL ABUSE		
LEAD DOMAIN AND/OR ORGANIZATIONS:	PUBLIC HEALTH—District Health Department #10, West Michigan Community Mental Health Services, School Districts, Community Groups		
COMMUNITY BENEFIT CATEGORY:			
<input type="checkbox"/> Access <input type="checkbox"/> Coverage <input checked="" type="checkbox"/> Prevention <input checked="" type="checkbox"/> Education/Health Literacy <input type="checkbox"/> Other			
CHNA REFERENCE PAGE(S): 24, 34		RANKING: 16	
Brief Description of Issue:			
Alcohol continues to be a concern in Oceana and Newaygo Counties, with data to support high binge drinking rates and an increasing number of alcohol-related hospitalizations.			
GOAL PER CHNA:			
Reduce alcohol abuse by increasing awareness and reducing substance abuse among youth.			
HEALTH SYSTEM ROLE: Support public health and community efforts to reduce alcohol abuse, especially among youth.	FY13	FY14	FY15
		New effort	In development
SUGGESTED HEALTH SYSTEM STRATEGIES:			
1. Export Coalition for a Drug Free Muskegon strategic plan for environmental change; consultation with DHD #10 personnel 2. Initiate depression quick response intervention training program with PCP practices designed to reduce alcohol abuse 3. Help develop mental & behavioral health referral directory for PCPs	Determine hospital system role and strategy	Facilitate a work plan with community partners	Continue work plan
EVALUATION APPROACH:			
Assess hospital system activities regarding suggested activities			