

**Pennock
Community Health Needs Assessment (CHNA)
Implementation Plan
July 2016 – June 2018**

Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan

Summary of Significant Health Needs Identified in the Community Health Needs Assessment (CHNA)

July 2016 – June 2018

A hospital facility's implementation strategy to meet the community health needs identified through the hospital facility's CHNA is a written plan that either:

- (1) Describes how the hospital facility plans to address the significant health need; or
- (2) Identifies the significant health need as one the hospital does not intend to address and explains why the hospital facility does not intend to address the health need.

Information needed to identify and determine the community's significant health needs was obtained by holding community health forums, sending out community health surveys to residents, interviews and online surveys with community healthcare professionals and community leaders, and community health summits attended by community health partners. Secondary data was gathered from state, local, and national databases to supplement the overall findings and needs identified.

A glossary of terms is available at the end of this Implementation Plan to provide clarity for the terminology used in the document.

Significant Health Needs Addressed in this Implementation Plan - Each of the significant health needs listed below are important and are being addressed by numerous programs and initiatives operated by the Hospital, other organizations within Spectrum Health, and other community partners of the Hospital.

- i. Access to care
 - a. Access to primary care, dental care, mental health care, and substance abuse treatment
 - b. Specialty and subspecialty services such as oncology and oral surgery
 - c. Coordination and collaboration of services (i.e. other health providers, the Health Department, various coalitions, etc.)
- ii. Programs targeting obesity reduction
- iii. Prevention and wellness

Other Significant Needs Identified in the CHNA But Not Addressed in this Plan –The Hospital will not address the following significant health needs identified in the CHNA as part of this Implementation Plan due to limited resources and the need to allocate significant resources to the significant health needs identified above.

- i. Mental health services for people with mild to severe conditions
- ii. Services for school-age individuals with a diagnosis of autism or a similar disorder
- iii. Services for pain management
- iv. Screening services for HIV and STDs
- v. Education on how to navigate the system (i.e., how co-pays/deductibles don't often include prevention/check-ups, how to avoid using the ER)
- vi. Psychoeducation at an early age on nutrition, exercise, living healthy lifestyles
- vii. Community programs accessible to those with transportation/income barriers

Other Significant Needs Identified in the CHNA But Not Addressed in this Plan (continued)

- viii. Higher quality food at affordable prices
- ix. Programs that teach people how to cook/cook healthy foods
- x. Housing services (because of lack of affordable housing, housing in neglect)

Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan

ACCESS TO PRIMARY CARE
July 2016-June 2018

Significant Health Need	Population Served	Action	Measurable Impact
Access to primary care	All residents living in Barry County who use Spectrum Health primary care services	A. Increase access to Primary Care providers	A. Hire additional new net providers: <ol style="list-style-type: none"> 1. 1 Primary Care Physician by December 2016, increasing primary care visits to 1,920. Increase visits another 50% by June 2018. 2. 3 Advanced Practice Providers (APP) by August 2016 increasing visits by 1,536 by June 2017 and an additional 50% increase in visits by June 2018 3. 3 additional Primary Care Physicians by July 1, 2018.

Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan

ACCESS TO SPECIALTY AND SUBSPECIALTY SERVICES
July 2016-June 2018

Significant Health Need	Population Served	Action	Measurable Impact
Specialty and subspecialty services such as oncology and oral surgery	Residents of Barry County receiving Cancer & Oncology Services	A. Reintroduce a provider-based consultative and chemotherapy program and increase days from one day a week in year 1 to 2 days a week in year 2. Barry County currently does not have cancer or medical oncology services.	A. Expand Cancer Services to include Hospital Based Medical Oncology <ol style="list-style-type: none"> 1. Reintroduce provider-based consultative and chemotherapy program for improved access to care by March 2017 2. Create an eight week baseline on initial usage with

			<p>one day per week at new site</p> <ol style="list-style-type: none"> 3. Increase baseline 2% by December 2017 4. Between July 2017-June 2018, increase clinic days to two days per week and increase visits another 10% over baseline.
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<p>Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan ACCESS TO CARE THROUGH MEDNOW (telehealth) July 2016-June 2018</p>			
Significant Health Need	Population Served	Action	Measurable Impact

<p>Access to primary care, mental health care, and substance abuse treatment AND Specialty and subspecialty services</p>	<p>Those patients having long drives to see specialists and/or long waits to see primary care providers</p>	<p>A. Implement MedNow visits for home or provider service locations to help overcome long drives for patients to see specialists and long waits to see primary care providers</p>	<p>A. MedNow: Implement existing Spectrum Health MedNow services to increase access to primary and specialty care services January 1, 2017</p> <ol style="list-style-type: none"> 1. Hire MedNow staff August 2016 2. Create baseline based on initial usage of primary care by October 2016. Increase MedNow use (from baseline) 25% by June 2017 and another 50% by June 2018. 3. Create baseline from initial usage of specialist by October 2016 4. Increase referrals to specialists 10% by June 2017 and another 10% by June 2018.
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Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan
 ACCESS TO CARE AND CORDINATION OF SERVICES
 July 2016-June 2018

Significant Health Need	Population Served	Action	Measurable Impact
Access to primary care, dental care, mental health care, and substance abuse treatment for the underserved (uninsured, underinsured, Medicaid, low income) AND Coordination and collaboration of services	All inpatients who use Spectrum Health Pennock Hospital	A. Collaborative Agreement: Create a collaborative agreement between Cherry Health and Barry County United Way to increase access to health care for the underserved population through hospital-based referrals to Cherry Health for primary, behavioral, and dental care and to the United Way of Barry County to assist those patients unable to pay their co-pay or other services that are not covered. Those that qualify are at or below 250% of Federal Poverty Level.	A. Supporting Cherry Health will be demonstrated through: <ol style="list-style-type: none"> 1. Development of a collaborative agreement, for primary care and dental services with Cherry Health and United Way of Barry County by September 2016 2. Establish baseline referral rate follow-up visits by October 2017 3. Increase referral follow-up visits 10% by June 2017 and another 10% by June 2018 4. Provide staffing for patient follow-up calls
	Barry County residents	B. Support Access to Care Coalition Initiatives: Pennock is a collaborative member of the Access to Care Coalition, where a group of community organizations work together to increase access to healthcare and most recently, mental health and dental services. Pennock will continue to support education and resources networking, especially in the area of the underserved population. One deficit in access is lack of knowledge of resources available to patients dealing with mental health issues for both publically and in the mental health community, as well as how to reach or best serve that population.	B. Through the Access to Care Coalition, Pennock will utilize one employee to: <ol style="list-style-type: none"> 1. Ongoing Facilitating Access to Care meetings; and 2. Coordinate and create a Mental/Behavioral Health Resource Guide: <ol style="list-style-type: none"> a. Develop a resource guide with the Coalition that will be publically available and used as a resource for patients, social service agencies, and health care employees working with underserved populations, and the medical providers in Barry County (July 2016-

			<p style="text-align: right;">December 2016)</p> <ol style="list-style-type: none">3. Distribute Resource Guide to all medical providers and social service agencies in Barry County and have publically available January 20174. Assist in coordinating one health-related poverty simulation to increase awareness of barriers faced by the underserved population that specifically targets area businesses and the medical community. Currently, there is no such education related to health and bridging the medical and business communities to help the underserved population.<ol style="list-style-type: none">a. Conduct poverty simulation by November 2016b. Educate 70 business and medical community members
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Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan
PREVENTION AND WELLNESS
 July 2016-June 2018

Significant Health Need	Population Served	Action	Measurable Impact
Prevention and wellness	All residents who use Spectrum Health primary care services and community at large in Barry County	<p>Diabetes Management</p> <p>A. Expand SH Pennock Hospital’s Diabetes Management program</p> <p>B. Supplement Pennock’s diabetes management program by financially supporting two National Diabetes Prevention programs in Barry County through a collaborative agreement with the MSU Extension. This program enhances existing services and gives patients referred into the program, the day-to-day life skills needed to manage their diabetes through developing new behaviors.</p>	<p>A. Pennock Diabetes Management Program: Decrease no show rate by 5% utilizing Continuous Quality Improvement (CQI) project; choosing and acting on one aspect of no show for improvement.</p> <ol style="list-style-type: none"> 1. Increase patients referred into the Diabetes Self-Management Education program (DSME) by 5% to increase referrals up to 205 by October 2017 and another 5% by June 2018. 2. Add one additional .5 FTE hours by August 2017 to accommodate patient demand. Our current dietitian is only .5 FTE and is at capacity. 3. Increase the individualized goal attainment rate of 87% for Diabetes Management Program patients by 2% by October 2017 <p>B. National Diabetes Prevention Programs</p> <ol style="list-style-type: none"> 1. Provide funding through SHP Foundation through June 2017 2. Provide programmatic resources through SH Pennock Hospital July 2017-June 2018 3. Provide SH Pennock Hospital dietitians and Diabetic educator to work with the National Diabetes Prevention programs 4. Pennock Medical Staff referrals: establish baseline September 2016-June 2017 and increase referrals into the program by 5% by July 1, 2018.

Spectrum Health Pennock Hospital Community Health Needs Assessment Implementation Plan
PREVENTION AND WELLNESS
 July 2016-June 2018

Significant Health Need	Population Served	Action	Measurable Impact
Programs targeting obesity reduction	All residents who use Spectrum Health primary care services and community at large in Barry County	<p>Obesity</p> <p>A. Improve outcomes of patient’s referred into Pennock’s outpatient weight management counseling that utilizes Pennock dieticians to conduct bioelectrical impedance scale screening and counselling.</p> <p>B. Use SH Pennock Hospital staff to support B. Healthy Coalition and B. Healthy Families Program. Pennock’s collaboration with the B. Healthy Coalition specifically addresses the issue of obesity through improved nutrition and promotion of physical activity through policy change, access to healthy choices, and community education.</p>	<p>A. Pennock Outpatient Weight Management Class participation:</p> <ol style="list-style-type: none"> 1. Conduct pre and post Bioelectric Impedance Scale screening for outpatient referral, weight management patients 2. Establish baseline for retention rate by January 2017 and increase rate by 2% by June 2017 3. Reduction in weight of Weight Management participants of 5% over a twelvemonth period with follow up checks at least, but not limited to, every three-month <p>B. B. Healthy Coalition:</p> <ol style="list-style-type: none"> 1. Pennock will provide at least 1 employee to help facilitate the B. Healthy Coalition and B. Healthy Families program 2. The B. Healthy Coalition and SH Pennock Hospital will conduct at least one six week B. Healthy Families program by June 2017 and one by June 2018 with a minimum of twenty children and one adult caregiver per family in each session.

Preliminary Spectrum Health Hospitals Community Health Needs Assessment (CHNA) Implementation Plan Glossary of Definitions

For the period of July 2016-June 2018

Term	Definition
Advanced directive	A legal document (as a living will) signed by a competent person to provide guidance for medical and health-care decisions (such as the termination of life support or organ donation) in the event the person becomes unable to make such decisions.
Advanced Practice Provider (APP)	Mid-level practitioners who are health care providers who have received different training and have a more restricted scope of practice than physicians and other health professionals in some states, but who do have a formal certificate and accreditation through the licensing bodies in their jurisdictions. Examples include, but may not be limited to, Nurse Practitioners, Physician Assistants (PA), and Nurse-Midwives. A Nurse Practitioner is a registered nurse who has acquired the knowledge base, decision-making skills, and clinical competencies for expanded practice beyond that of a Registered Nurse, the characteristics of which would be determined by the context in which he or she is credentialed to practice. PAs are concerned with preventing and treating human illness and injury by providing a broad range of health care services under the supervision of physician or surgeon. They conduct physical exams, diagnose and treat illnesses, order and interpret tests, develop treatment plans, perform procedures, prescribe medications, counsel on preventive health care and may assist in surgery. Nurse-Midwives are advanced practice registered nurses who provide counseling and care during pre-conception, pregnancy, childbirth and the postpartum period.
Bariatrics	The branch of medicine that deals with the causes, prevention, and treatment of obesity.
Bioelectrical impedance scale	A scale that measures the resistance of body tissues through the flow of a small, harmless electrical signal. The proportion of body fat can be calculated as the current flows more easily through the parts of the body that are composed mostly of water (such as blood, urine & muscle) than it does through bone, fat or air. It is possible to predict how much body fat a person has by combining the bioelectric impedance measure with other factors such as height, weight, gender, fitness level, and age.
Chronic disease	A persistent or recurring disease that affects a person for at least three months.
Emergency Department (ED)	The department of a hospital responsible for the provision of medical and surgical care to patients arriving

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For the period of July 2015-June 2018

Term	Definition
	at the hospital in need of immediate care.
Federal Poverty Level	A measure of income issued every year by the Department of Health and Human Services. Federal poverty levels are used to determine eligibility for certain federal programs and benefits.
Full Time Equivalent (FTE)	A unit that indicates the workload of an employed person (or student) in a way that makes workloads or class loads comparable across various contexts. An FTE of 1.0 is equivalent to a full-time worker while an FTE of 0.5 signals half of a full work.
HBA1C	The A1c test (also known as HbA1c, glycated hemoglobin or glycosylated hemoglobin) is a blood test that correlates with a person’s average blood glucose level over a span of a 90 days.
Institute for Healthcare Improvements (IHI)	IHI is a nonprofit organization focused on motivating and building the will for change, partnering with patients and health care professionals to test new models of care, and ensuring the broadest adoption of best practices and effective innovations.
Integrating behavioral health collaborative care programs	The systematic coordination of general and behavioral healthcare. Integrating mental health, substance abuse, and primary care services produces the best outcomes and proves the most effective approach to caring for people with multiple healthcare needs.
Low birthweight (LBW)	Low birth weight (LBW) is defined as a birth weight of a live born infant of less than 2,500 g (5 pounds 8 ounces) regardless of gestational age.
Maternal Infant Health Program	Programs to improve women’s health before, during, and after pregnancy to reduce both short- and long-term problems.
Medicaid	A United States federal health care program for families and individuals with low income and limited resources.

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For the period of July 2015-June 2018

Term	Definition
Medicare	A United States federal system of health insurance for people over 65 years of age and for certain younger people with disabilities.
Metrics	A standard for measuring or evaluating something, especially one that uses figures or statistics
Mothers Offering Mothers Support (MOMS)	A Spectrum Health Healthier Communities program that serves Medicaid beneficiaries who are pregnant and their newborns who are most likely to experience serious health problems due to psychosocial, socio-economic and/or nutritional risk factors.
Next third available appointment	A measurement of the patient's ability to seek and receive care with the provider of their choice, at the time they choose, regardless of the reason for their visit. Counting the third next available appointment is the healthcare industry's standard measure of access to care and indicates how long a patient waits to be seen.
Primary Care	The day-to-day health care given by a health care provider. Typically this provider acts as the first contact and principal point of continuing care for patients within a health care system, and coordinates other specialist care that the patient may need.
Primary Care Emergency Department (ED) Sensitivity	Patients using the hospital emergency departments for non-urgent care and for conditions that could have been treated in a primary care setting.
Psychiatry Behavioral Medicine Integrated (PBM+)	An emerging field within the wider practice of high-quality, coordinated health care. In the broadest use of the term, "integrated behavioral health care" can describe any situation in which behavioral health and medical providers work together.
Readmission	A subsequent admission to the hospital that occurs within 30 days of a previous admission's discharge.
Referral	An act of referring someone or something for consultation, review, or further action.

Preliminary Spectrum Health Hospitals Community Health Needs Assessment (CHNA) Implementation Plan Glossary of Definitions

For the period of July 2015-June 2018

Term	Definition
Sliding fee scale	Variable pricing for products, services, or taxes based on a customer's ability to pay.
Smoking cessation	Discontinuation of the habit of smoking, the inhaling and exhaling of tobacco smoke.
Telehealth or Telemedicine	The use of medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status. Telemedicine includes a growing variety of applications and services using two-way video, email, smart phones, wireless tools and other forms of telecommunications technology.
Trimester	A period of three months, especially as a division of the duration of pregnancy.
Triple Aim	The pursuit of improving the experience of care, improving the health of populations, and reducing per capita costs of health care.
Very low birthweight (VLBW)	A birth weight of a live born infant of less than 1,500 g (3 pounds 5 ounces) regardless of gestational age.