

**WHAT IS A COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)?**

The first step in meeting community needs is identifying the needs. Using an objective approach helps ensure that priorities are based on evidence and accurate information. The assessment process used by Marlette Regional Hospital built upon a four county assessment by the Michigan Thumb Public Health Alliance. Once priorities are selected, there is an assessment of existing services and programs. Gaps in services are identified and strategies are developed. This document outlines Marlette Regional Hospital’s response to the needs identified in their assessment.

**STRATEGY DEVELOPMENT**

The 2016 Community Health Needs Assessment contained three main areas. The first was a survey of 563 individuals who live in the thirteen zip codes served by Marlette Regional Hospital. The second area involved conducting focus groups of community members. The third area was the interview of stakeholders from the Sanilac County branch of the Michigan Department of Health and Human Services, Sanilac County Community Mental Health, and Sanilac Intermediate School District. The survey results of the 2016 Community Health Needs Assessment (CHNA) generated the following information:

| Need-Focus Priorities  | Strategies and Activities   | Lead Person  |
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| 1. Access to Healthcare:<br>Not enough evening or weekend hours, not enough specialists, not able to get an appointment/limited hours, and not enough doctors. | <ul style="list-style-type: none"> <li>• Expanded hours of operation at many of our outpatient clinics. Many clinics have regular hours of operation until 6:30 or 7 p.m. Many others begin seeing patients as early as 7 a.m.</li> <li>• Adding new specialty services. Emergency telehealth services for possible stroke patients. This will be shortly followed by outpatient clinic services, like tele-psychiatry, which will bring specialty physicians to our local hospital. In July 2016 we will expand the availability of urology services, and we have continued to bring additional general and orthopedic services to our hospital.</li> <li>• Expand rural health clinics, located in Brown City, Mayville, Kingston and Marlette In addition, our Kingston clinic accepts walk-in patients and most of</li> </ul> | <ul style="list-style-type: none"> <li>• Marlette Family HC Office Manager</li> <li>• Mayville Family HC Office Manager</li> <li>• Kingston Family HC Office Manager</li> <li>• North Branch Family HC Office Manager</li> <li>• Brown City Family HC Office Manager</li> <li>• Diabetes Education Department Leader</li> <li>• Specialty Clinic Office Manager</li> </ul> |

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|  | <p>our other clinics accept same -day appointments.</p> <ul style="list-style-type: none"> <li>We feel our current roster of primary care providers is sufficient to meet the needs of our community. We will continue to work on increasing the availability of specialty services in our community so our patients can get timely, competent care close to home.</li> </ul>   |  |
| <p>2. The top and only significant reason for a cost consideration preventing individuals from receiving health services was high deductibles or copays.</p> | <ul style="list-style-type: none"> <li>We have no ability to influence our patients' health insurance plans' deductibles and copays, we have begun working on treating our patients in the most cost effective manner possible. As of January 2016, we began participation in a rural Accountable Care Organization which seeks to lower the costs of providing care to our Medicare patients while maintaining and often times improving their health outcomes. This is accomplished through active care management for our patients with a focus on wellness and preventative health services. Lowering the cost of care and preventing sickness lead to lower out-of-pocket expenses for our patients. This approach has been expanded to patients covered under all insurance plans.</li> <li>We will continue to offer charity care discounts to patients who meet financial qualifications</li> </ul> | <ul style="list-style-type: none"> <li>Patient Financial Services Director</li> <li>Marketing Manager</li> </ul> |
| <p>3. The top three concerns for physical health in your community for youth: youth obesity, youth hunger and poor nutrition, and teen pregnancy.</p>        | <ul style="list-style-type: none"> <li>We incentivize our health care providers to partner with local community school systems to educate our youth. Our providers have presented various sex education sessions among other topics. We will encourage our providers to develop educational topics for nutrition to help combat youth obesity and hunger.</li> </ul>  | <ul style="list-style-type: none"> <li>Family HC providers</li> <li>Family HC Office Managers</li> </ul>         |

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| <p>4. The top three concerns for mental health substance abuse in your community for youth: youth drug use and abuse, youth bullying, and youth alcohol use and abuse.</p>                       | <ul style="list-style-type: none"> <li>We will address these issues similar to how we plan to address physical health concerns with our youth. We will encourage our providers to develop and present to our local community schools educational sessions on drug and alcohol use and abuse and bullying.</li> </ul>  |  |
| <p>5. The top three concerns about senior population in your community: cost of medications, availability of resources to help the elderly stay in their homes, and assisted living options.</p> | <ul style="list-style-type: none"> <li>We will continue to address the cost of medications through a partnership with our local retail pharmacy. It has developed a fund to help those who cannot afford their prescriptions. The local pharmacy raises funds through various events, and the hospital helps to administer the program to qualified individuals.</li> <li>Regarding helping the elderly stay in their homes and assisted living options, we do not have a home health agency or an assisted living facility. However, we do operate a hospice service that helps hospice patients stay in their own home as long as possible. We also offer swing bed services to patients who have been discharged from a hospital but aren't quite ready to be home. Swing bed services are designed to rehabilitate the patient so he can return to his own home.</li> </ul> | <ul style="list-style-type: none"> <li>Hannah D Wolfe Manager</li> <li>Marketing Manager</li> </ul>        |
| <p>6. Drug Use and Abuse</p>   | <ul style="list-style-type: none"> <li>Our physician offices and our emergency department have strict guidelines in the prescribing and administration of opioids and narcotics. These guidelines are in place to restrict and replace narcotic and opioid usage and replace them with safer yet effective alternatives.</li> <li>We will work to develop and communicate drug use and abuse awareness information for our communities.</li> <li>We will also look to develop healthy eating education</li> </ul>   | <ul style="list-style-type: none"> <li>Emergency Department Manager</li> <li>HC Office Managers</li> </ul> |

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|   | <p>sessions utilizing our dieticians and diabetes education professionals. We have previously in this report addressed the evening and weekend availability of our health care providers.</p>  |  |
| <p>7. Lack of resources in our rural communities for: transportation, psychological screenings, and psychiatric services as top concerns.</p> | <ul style="list-style-type: none"> <li>• We have partnered with many other health care organizations in a sixteen county region to develop Non-Emergency Medical transportation Organizer (NEMO). AskNemo.org is a web-based application designed to bring transportation providers together with transportation prescribers to assist in organizing and coordinating travel for patients to get to their required appointments in East Central Michigan. It is a project of Hospital Council of East Central Michigan of which we are a member.</li> <li>• We are in the process of developing psychological and psychiatric services through telehealth services which bring these specialists to our local hospital through technology. These services will unite our patients with clinical experts that otherwise would not be available in our rural area</li> </ul> | <p>Specialty Clinic<br/>Marlette Regional Hospital<br/>Leadership<br/>Marketing Manager working in partnership with the Chamber of Marlette.</p> |
| <p>8. More education and awareness of programs need to be provided to our communities.</p>  | <ul style="list-style-type: none"> <li>• In the last couple years we have invested resources in to a community outreach program that addresses many of these concerns. We have hired an Outreach Specialist who proactively calls patients to inform them of wellness and preventative services that are available to them. She is knowledgeable about insurance plans and what screenings and services are covered 100% by the plans and which ones will have deductibles and copays applied to them. We have also hired a Care Coordinator who travels from physician office to physician office to meet with</li> </ul>   | <p>Emergency Department Manager<br/>Marketing Manager</p>  |

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|  | patients at their convenience to talk about how to better manage their chronic health conditions. We will continue to work with our marketing department to create effective strategies to communicate to our communities the services we offer. |  |
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Marlette Regional Hospital's mission is to continuously improve the health in the communities we serve. We continue to provide services to accomplish that mission while we explore innovative ways to improve our efforts. Our best efforts will be working with other like-minded organizations which are committed to making our communities healthier.

Respectfully submitted,

Daniel G. Babcock, CEO  
Marlette Regional Hospital