# 2019 Community Health Needs Assessment



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# Harbor Beach Community Hospital Serving and Meeting Needs of the Community

In 1920, the Huron Milling Company of Harbor Beach acquired the property on the corner of Broad and First Streets. On this property, a hospital was created to serve their employees and the community of Harbor

Beach. As the community grew, the health care needs also grew. In 1957, the hospital was donated to the community and renamed the Harbor Beach Community Hospital. It soon became apparent that a new building was needed. In 1963, a new facility opened its doors to residents. The next 50 years would be marked by major expansions such as the long term care wing and opening of medical clinics in Harbor Beach and Port Hope. The hospital would also be marked by constant growth and improvement in less visible but very important areas such as technology, specialty services, quality initiatives/awards, walk-in clinic services, and round the clock emergency room physicians. All of these changes resulted from the desire to meet a need in the community.



From the beginning, the leaders of Harbor Beach understood that operating a **COMMUNITY** hospital meant striving to understand and respond to the needs of the community- you, your family members, and your friends. It was with this community mindset, in 2012, that Harbor Beach Community Hospital launched a Community Health Needs Assessment (CHNA).

# What is a Community Health Needs Assessment?

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. However, analyzing data is only one step to identifying needs. Gathering input from individuals and groups in the community is also important. Personal experiences are critical to ensuring that statistics are interpreted correctly. The CHNA process balances data analysis with community input. Under the Affordable Care Act, a process and guidelines for developing the CHNA are provided. A CHNA helps to direct resources to issues that have the greatest potential for increasing life expectancy, improving quality of life, and producing savings to the healthcare system. Specific steps outlined by the Internal Review Service include:

- 1. Define the community
- 2. Assess the health needs of the defined community
- 3. In assessing the community's health needs, solicit and take into account input received from persons who represent the broad interests of the community, including those with special knowledge and expertise in public health.
- 4. Document the CHNA in a written report that is adopted by the hospital facility by an authorized body of the hospital facility.
- 5. Make the CHNA report widely available to the public.

This is the third cycle of Community Health Assessment and Planning. The process is intended to be completed on a three year cycle that aligns with Affordable Care Act requirements.

# **Process Overview**

# Why is a Community Health Needs Assessment valuable?

Most experts agree that there are many challenges facing healthcare today. Rapidly changing technology, increased training needs, recruiting medical professionals, and responding to health needs of a growing senior citizen population are just a few of the most pressing challenges. These challenges occur at a time when our economy is on the rebound and resources for families and healthcare providers are stretched. These conditions make the Community Health Needs Assessment (CHNA) process even more critical. A CHNA helps to direct resources to issues that have the greatest potential for increasing life expectancy, improving quality of life, and producing savings to the healthcare system.

# Acknowledgments

Harbor Beach Community Hospital acknowledges the individuals that assisted and led the Community Health Needs Assessment process and development of the Implementation Plan. Trish VanNorman, Project Manager, for the Harbor Beach hospital coordinated the process with contracted assistance from Kay Balcer, Balcer Consulting and Prevention Services. The Administrative Team of the Harbor Beach Hospital was instrumental in input to identifying top needs and priorities for the implementation plan. They participated in review of health indicator data and conducted a resource assessment. In 2019, the hospital launched its CHNA process with a review of the Community Health Assessment and Community Health Improvement Plan produced by the Michigan Thumb Public Health Alliance (MTPHA). MTPHA represents the local public health departments for Huron, Lapeer, Sanilac, and Tuscola Counties. The extensive assessment completed by MTPHA was extremely helpful in analyzing community input and reviewing health indicator data.

**CHNA Team:** Harbor Beach Community Hospital formed an internal team to lead the CHNA process. The team met and communicated frequently from March to September 2019.

- Paul Clabuesch, President/CEO
- Jill Wehner, COO Fiscal Services
- Debbie Geiger, Acute Care Nursing/ER
- Karen Dallas, Business Office
- Rebecca Smith, Diagnostic Imaging
- Ellynne Volmering, Dietary
- Anthony Emerick, Emergency Preparedness/Trauma
- Debbie Oglenski, Extended Care Services
- Tina Osantoski, Human Resources/Health Information Management
- Tami Nickrand, Information Technology
- Laura Janks, Marketing
- Scott Rayl, Pharmacy
- Chad Redburn, Plant Operations
- Elen-Abegail Ragudos, Rehabilitation Services
- Susan Rochefort, Senior Life Solutions
- Trish VanNorman, Specialty Clinic/Grants/Student Health Center
- Dana Gonzalez, Surgical Services

**Consultant:** Harbor Beach Community Hospital contracted with Balcer Consulting and Prevention Services, to provide objectivity and support to the project. Support included consultation in designing a process for the CHNA, obtaining community health data and information, analysis of gaps in information and areas of need, design of a community survey, survey analysis, consultation during development of the implementation plan, and developing content for written reports. Kay Balcer, has been involved in numerous needs assessments, surveys, and program evaluations over the past 25 years. She has worked with the Thumb Rural Health Network to complete two tri-county Community Health Assessments, assisted with a three county CHNA project in 2016, and was the lead consultant on the 2018 Michigan Thumb Public Health Alliance Assessment. Her work in grant writing has also resulted in numerous topic specific needs assessments.

### **Steps in Process**

In 2018 by the Michigan Thumb Public Health Alliance completed a comprehensive health assessment. The Alliance is a partnership between local public health departments in Huron, Lapeer, Sanilac, and Tuscola Counties. The full Alliance report and plan can be accessed at <u>www.mithumbpha.org/documents</u>. In addition to health outcome data, the Alliance conducted stakeholder conversations and surveyed the public. A hospital's Community Health Needs Assessment (CHNA), as outlined by the Internal Revenue Service, is slightly different than the assessments produced by the Alliance. The Alliance assessment is designed to inform the public about the health needs of a county or region. A hospital Community Health Needs Assessment informs the public but is also used as a guide to focus efforts of the hospital on prioritized areas of a need. To prevent duplication and to align efforts with the MTPHA Community Health Improvement Plan, Harbor Beach Community Hospital reviewed the data provided in the four county MTPHA assessment as the first step in the CHNA process.



Companion documents are available for the information included in this report. The following pages summarize the key information utilized by the Harbor Beach Hospital administrative team to identify top needs and priorities for the 2017-2019 Implementation Plan.

# **Representing the Community and Vulnerable Populations**

### **Define the Community Served**

Located along the shores of Lake Huron, Harbor Beach Community Hospital serves rural communities in the eastern portion of Huron County. Huron County is located in the rural area of Michigan commonly referred to as the Thumb. The service area includes numerous towns and villages. A population of 31,280 resides in Huron County. Nearby counties with similar demographics include Sanilac and Tuscola County.

Demographics	Michigan	Huron	Sanilac	Tuscola
Population	9,962,311	31,280	41,269	52,764
% below 18 years of age	21.80%	19.30%	21.70%	20.60%
% 65 and older	16.70%	24.60%	21.00%	19.80%
% Non-Hispanic African American	13.80%	0.50%	0.50%	1.20%
% American Indian and Alaskan Native	0.70%	0.40%	0.60%	0.60%
% Asian	3.20%	0.60%	0.40%	0.30%
% Native Hawaiian/Other Pacific Islander	0.00%	0.00%	0.00%	0.00%
% Hispanic	5.10%	2.40%	3.60%	3.40%
% Non-Hispanic white	75.20%	95.30%	94.00%	93.50%
% Rural	25.40%	89.50%	90.20%	84.20%

Source: www.countyhealthrankings.org

Hospital utilization data was used to identify twelve census divisions that compose the hospital's primary service area. According to the 2010 Census, this service area has a population of 9,100. In Huron County, the following data provides insight into quality of life for residents:

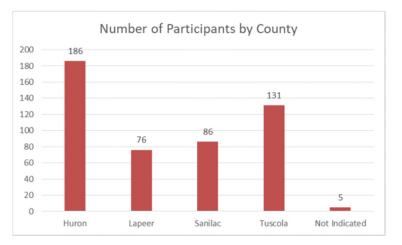
- In 2017, median income was \$46,600 in Huron County and \$54,800 in Michigan.
- 2012-2016 poverty rate for Huron County was 14% and in Michigan was 16.3%
- The percentage of children under age 6 living in a household with income below poverty in Huron County was 29% and for Michigan was 23%.
- Of those over age 65, 8.25% of Huron County residents were in poverty and for Michigan 8.1%.
- The percent of people with bachelor's degree or higher in Huron County was 15% and 28% in Michigan.
- In Huron County, 9% of adults and 4% of children are uninsured. In Michigan, 9% of adults and 3% of children are uninsured.

### **Input From Vulnerable Populations**

The 2018 Thumb Community Health Assessment report, published by MTPHA, included input from the community and vulnerable populations. This data was used during the Harbor Beach Community Hospital's CHNA process. Input on these strategies was obtained by the hospital through a community survey.

### 2018 Thumb Community Health Assessment Report (Michigan Thumb Public Health Alliance)

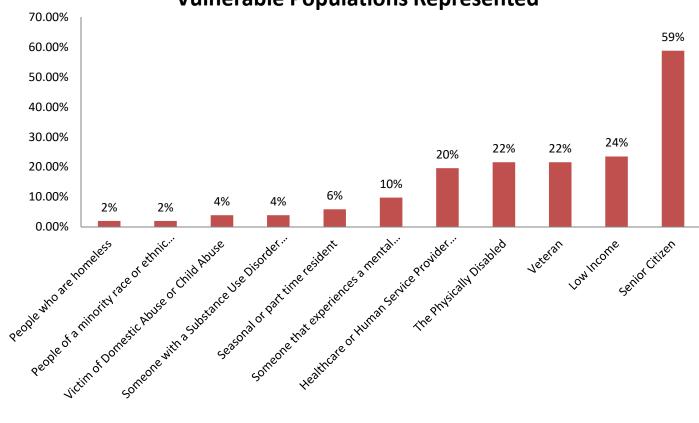
- 1. Stakeholders: Stakeholders were defined as agency and community leaders that have a wide knowledge base regarding regional priorities, vulnerable populations, and available local resources. Stakeholders were first invited to attend one of seven Community Conversations. Participants in the Community Conversations included human service agencies, hospitals, physicians, emergency medical services, behavioral health agencies, Great Start Collaboratives, education, government, law enforcement, and MSU Extension. A follow up online survey that aligned with the Stakeholder Community Conversations was later emailed to stakeholders that did not attend the meetings. Community Conversations and surveys resulted in feedback from 168 stakeholders. The purpose of the conversations and survey were to:
  - a. Obtain input on the priorities identified during data review
  - b. Understand perceptions about contributing factors of cardiovascular disease and preventable injuries
  - c. Learn more about what resources already exist to address these issues and where gaps exist
  - d. Gather suggestions for ways to improve these health issues
- Residents of the Region: A public survey was distributed online and on paper. The survey had four sections: 1) general feedback on priorities,
   2) cardiovascular disease, 3) senior injuries, and
   4) impaired driving. The purpose of the survey was to gain a deeper understanding of contributing factors and community perceptions for priority issues. Across all four counties, 484 individuals participated in the survey. Women represented 88% of the participants. Seniors over age 65 were the smallest age group, only 10%. County participation ranged between 76 and 186.



### Harbor Beach Community Hospital

To obtain additional input on how well the hospital is meeting the community's needs, suggestion on gaps in services, and potential strategies, the CHNA team developed and distributed a community survey. The survey results are described under findings. Of the ninety-one people who participated in the community survey, 56% represented vulnerable population. As indicated on the figure below, survey participants represented a wide variety of vulnerable populations.

**Question:** Please indicate if you are a member of any of the groups below or you represent someone (such as a child, spouse, or parent) who is in the group. (Check all that apply)



# **Vulnerable Populations Represented**

Participants also represented a variety of types of insurance. Of the eighty people who answered the survey question on insurance, 3.75% were uninsured. Of those insured, 26% indicated that they have insurance with high co-pays and deductibles, or limited coverage. Of the 77 indicating they had insurance, 50% had employer provided insurance, 9% purchased their own insurance, and 39% had public insurance such as Medicaid, Medicare, MiChild, or insurance through the Veterans Administration.

# **2016 CHNA Plan Progress**

In 2016, the Community Health Needs Assessment priorities identified by Harbor Beach Community Hospital included two focus areas.

### Focus Area 1: Behavioral Health

- 1. Access to Mental Health
  - a. Lack of Mental Health Providers(2)
  - b. Mental Health-Depression-Suicide
  - c. Alcohol Use/Abuse
  - d. Substance Abuse

### Focus Area 2: Access to Medical Services

- 1. Access to Primary Healthcare and Providers
- 2. Health Insurance and Healthcare Costs
- 3. Health Education and Awareness of Services

### The following table includes an update on the progress toward activities in the 2016 Implementation Plan.

Focus Area	Existing Services to Continue	New or Expansion Strategies	Progress
Behavioral Health	Student Health Center-	Under Consideration1. Behavioral health	1. Primary Care has
	Counseling, Classroom Education, Assemblies, and	screenings in primary care and emergency department	implemented screening during annual physicals.
	<ul> <li>Professional Development for School Staff</li> <li>Social work services for long term care patients</li> </ul>	2. Integrating behavioral health into primary care	<ol> <li>IBH has taken place in both Harbor Beach and Port Hope Medical Clinic.</li> </ol>
	<ul> <li>Tele-psychiatry services for long term care patients</li> <li>Partnership with Thumb Rural</li> </ul>	3. Reducing stigma related to behavioral health	3. Continue working on trying to reduce stigma this will be an ongoing issue.
	<ul> <li>Health Network to develop protocols for reducing drug seeking behaviors</li> <li>Senior Life Solutions</li> <li>Mental Health Adult Access Team Planning Grant</li> <li>Huron Behavioral Health Case Management for Extended Care Unit</li> <li>Community Connections provides education, information, and referral</li> <li>MAPS used in the Clinics</li> <li>Abuse Risk Assessment in ER for those being given opioids</li> </ul>	4. Inpatient behavioral health treatment for youth and adults	4. The state of Michigan has created a database of available beds making it easier to find facilities with availability.
		5. Tele-psychiatry for general public	5. Began offering child and adolescent tele-psychiatry.
		6. Transportation to behavioral health services	6. Mental and behavioral health services available in our community/county should make transportation easier.
		<ol> <li>Toolkit for opioid use in the primary care clinics</li> </ol>	7. Hired LMSW with a Substance Use Certification.
Access to Healthcare:	Harbor Beach, Port Hope, State Street Medical Clinics,	1. Participate in programs with medical students	1. There has been no progress on this.
• Health Insurance,		2. Explore the rural health clinic model	2. RHC status received for the Port Hope Medical Clinic.
Awareness of		3. Complete the hospital remodel to be more patient friendly	<ol> <li>The remodel of the Rapson Building has begun. Expected completion is Memorial Day 2020.</li> </ol>

Access to Primary Care)	<ul> <li>Family Assistance Program</li> <li>340B RX (pharmacy assistance program)</li> <li>Insurance application</li> </ul>	4.	Continue physician and mid-level practitioner recruitment	4.	Both and NP and MD were released of their contract. A search has begun for another Physician.
	assistance- Medicaid & healthcare.gov • Hospital Health Fair	5.	Promote college tuition reimbursement	5.	NHSC approval was obtained for HB Medical Clinic. Port Hope Medical Clinic application under review.
		6.	Update the hospital website so that individuals can find the services that are already accessible more easily	6.	The new marketing coordinator has revamped the web page.
		7.	Utilize Facebook to promote access to services and provide health information	7.	Facebook is being utilized on a more regular basis with new marketing coordinator.
		8.	Review the feasibility of accepting additional insurance providers	8.	Nothing new as a result of last year's findings.

# **Findings**

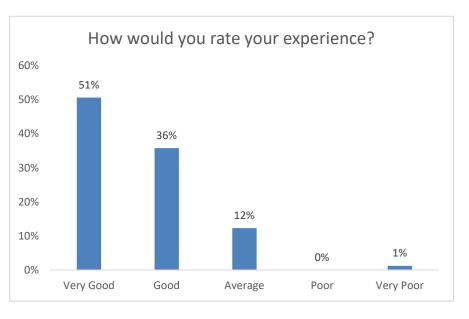
**Data Sources:** Three types of data sources were utilized during the Community Health Needs Assessment (CHNA): public health statistics, focus group/stakeholder survey reports, and community survey results. The Team obtained the most recent data available. Whenever possible, data was compared to county, regional, state, or national data. The 2018 Community Health Assessment Report which was prepared by the Michigan Thumb Public Health Alliance was utilized as a starting point for the Community Health Needs Assessment. Major health indicator data sources included:

- Harbor Beach Community Hospital- 2019 CHNA Community Survey
- Michigan Department of Health and Human Services- <a href="http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp">http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp</a>
- Michigan Behavioral Risk Factor Survey- <u>http://www.michigan.gov/mdhhs/0,5885,7-339-71550\_5104\_5279\_39424-134707--,00.html</u>
- Michigan Profile for Healthy Youth
   <u>https://mdoe.state.mi.us/schoolhealthsurveys/ExternalReports/CountyReportGeneration.aspx</u>
- County Health Rankings- <u>www.countyhealthrankings.org</u>
- United States Census- <u>https://factfinder.census.gov/faces/nav/jsf/pages/community\_facts.xhtml</u>
- Great Start Data Set- Great Start Collaborative and compiled by the Michigan League for Public Policy

**Survey Results:** Ninety-one people completed the CHNA Community Survey. People across the age spectrum were represented. Eighty-three people answered the question on age. The sample included individuals who used the hospital and those who did not.

Age Range	Responses	
16-25 years	5%	4
26-35 years	14%	12
36-45 years	16%	13
46-55 years	13%	11
56-65 years	25%	21
66-75 years	19%	16
Over age 75	7%	6

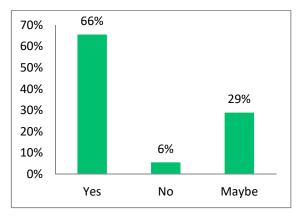
As described under vulnerable populations, 56% of the survey respondents represented a vulnerable population. A variety of survey questions were designed to assess the degree to which the hospital is meeting needs of the community and to understand ways to improve the array and quality of services. Seventy-eight percent of respondents had used services within the last year and another 14% in the past 1-3 years. Of those having used the hospital, 51% rated their experience very good and 36% rated their experience good. This means that 87% of participants having used the hospital rated their experience above average.



The level and quality of healthcare services available in a community can help people live healthier or be a barrier to living healthy. Please answer a few questions about our local healthcare system.

		Strongly			Strongly		Weighted
		Agree	Agree	Disagree	Disagree	Unsure	Average
1.	People in our community know what services are						
	available from our local doctors, hospital, and						
	healthcare providers.	16%	56%	24%	0%	3%	2.82
2.	People do not use local services because they think-						
	"to get high quality medical care and customer service						
	you need to go to a bigger hospital or doctor's office".	18%	39%	33%	3%	7%	2.58
3.	People in our community like the personal care they						
	receive from our local healthcare providers and are						
	confident that their personal health information is						
	kept confidential.	33%	42%	16%	1%	8%	2.92
4.	People in our community who need mental health						
	counseling or psychiatric care have access to services.	14%	42%	21%	3%	19%	2.3

If you or a close family member needed a service offered by the Harbor Beach Hospital, would you come to providers in Harbor Beach or Port Hope?



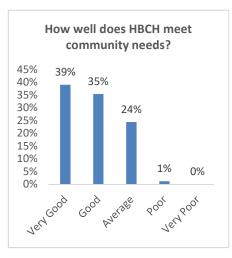
Ans	wered	85
Mental Health Services at school (counseling or group education)	25%	21
Senior Life Solutions	28%	24
Tele-psychiatry services offered at the specialty clinic or Medical clinics.	29%	25
Certified Wound Care Nursing	32%	27
Care-Share Program to assist those caring for loved ones	33%	28
Nursing Services at school (sports physicals, wellness screenings)	35%	30
Mental Health Counseling at one of the medical clinics	38%	32
Diabetic Education	42%	36
Orthopedics	42%	36
In Patient Acute Care	45%	38
Cardiopulmonary/Respiratory Therapy	49%	42
Surgical Services	51%	43
Specialty clinics staffed by visiting physicians	52%	44
Extended Long Term Care/Rehabilitation	52%	44
Physical Therapy	62%	53
Physician Care at Medical Clinics in Harbor Beach or Port Hope	72%	61
Diagnostic Imaging (X-ray, Mammography, Ultrasound, CT Scan)	78%	66
Walk-In Clinic	85%	72
Emergency Room Care	85%	72
Laboratory Testing	86%	73

# Please select the services which you or a close family member would consider using at the Harbor Beach Community Hospital if needed. These services are all offered by Harbor Beach Hospital. (Check all that apply)

### What is the main reason you would seek healthcare outside of the local area?

Categories	# of responses
Already established elsewhere	3
Privacy	3
Quality of Services	3
Specialist not available in Harbor Beach	3
Confidence in Hospital	2
Cost-of services	2
Customer Service	1
Long Wait	1
Poor Experience	1
Transfer of Patients is Frequent	1

Overall, survey participants felt that the hospital met the needs of the community. Survey participants were asked for suggestions on changes and service gaps using an open ended question. After categorizing responses, top responses for changes fell into two categories: customer service (7 responses) and wait time in the walk in clinic (3 responses) and for test results (2 responses). The most popular suggestions for additional services included dermatology, obstetrics/gynecology, primary care, surgery, and urology (3 responses each).



In order to plan effective community outreach programs, survey participants were also asked about topics for education programs. Twenty-one people answered the open ended question. *Every year, we plan what topics to include in community education programs. What are some topics that you or your family would be interested in attending?* Responses were categorized as indicated in the table below:

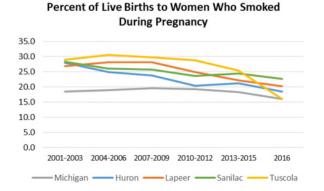
Weight Management (3); Nutrition (6); Exercise (4)	13
Mental Health & Stress	8
Diabetes	4
Caregivers	3
Cancer	2
Cost-Insurance/RX	2
Healthy Lifestyles	2
Parenting	2
Teens	2
One response each for asthma, auto immune disease, awareness of services, breastfeeding, cholesterol, hypertension, immunizations, injury, SUD, well visits for men.	1

### **Priorities for the Thumb Region**

In order to more effectively address complex public health challenges, the health departments in Huron, Lapeer, Sanilac, and Tuscola Counties created the Michigan Thumb Public Health Alliance. In 2017, the Alliance embarked on an 18 month needs assessment process guided by the Rural Healthy People 2020 report. The process involved compiling and analyzing data, prioritization, obtaining community input, and developing goals and objectives. Two documents resulted from the process and are available at <a href="https://www.mithumbpha.org/documents">www.mithumbpha.org/documents</a>. The sixty six page 2018 Community Health Assessment Report (CHA) includes a report on health indicators and community input. Goals and objectives were written for prioritized health issues. This section includes a summary of the goals, objectives, and related data for Huron County.



### **Goal 1: Improve Perinatal Health**



Objective 1:1- Reduce smoking during pregnancy

 Objective 1:2- Increase planned and initiated breastfeeding.

% of Mothers Planning to Breastfeeding							
	Huron	Lapeer	Sanilac	Tuscola	Michigan		
2012	30.0	27.1	45.4	19.9	40.3		
2016	28.1	21.8	37.2	20.3	35.7		
	% of Mo	thers Initi	iating Brea	astfeeding			
	Huron	Lapeer	Sanilac	Tuscola	Michigan		
2012	40.3	48.4	32.0	53.9	36.1		
2016	52.5	57.8	39.0	60.6	46.3		

http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp



### Goal 2: Reduce Adolescent Health Risks

Michigan Profile for Healthy Youth % of students grade 9 and 11-Past 30 days								
2018	Huron	Lapeer	Sanilac	Tuscola	Michigan			
Cigarette 11 NA 12 8 NA								
E-Vaping	31	NA	36	32	NA			

	Michigan Profile for Healthy Youth % of students grade 9 and 11							
Γ	2018	Huron	Lapeer	Sanilac	Tuscola	Michigan		
	Marijuana Use- Ever	23	NA	28	29	NA		

#### $\underline{https://mdoe.state.mi.us/school health surveys/External Reports/CountyReportGeneration.aspx}$

# Goal 3: Reduce Chronic Disease Deaths

Stroke- Age Adjusted Mortality Rate/100,000					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2002-2004	65.2	62.6	60.8	54.2	54.7
2014-2016	33.3	42.1	26.0	40.1	38.0

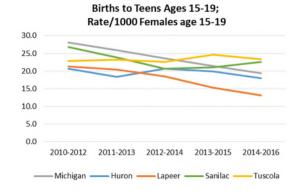
http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp

% of Adults Had Appropriately Timed					
Colorectal Cancer Screening					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2012-2013	NA	67.3%	53.4%	68.9%	67.8%
2014-2016	71.2%	72.3%	74.2%	66.0%	71.0%
http://www.michiga	http://www.michigan.gov/mdhhs/0,5885,7-339-71550 5104 5279 39424-134707,00.html				

% of Adults who consumed Fruits or Vegetables					
< 1 time / day (2011-2013)					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
Vegetables	22	NA	27	34	24
Fruit	31	25	48	43	38

http://www.michigan.gov/mdhhs/0,5885,7-339-71550 5104 5279 39424-134707--,00.html

- Objective 2:1- Decrease the use of tobacco and nicotine delivery devices by adolescents
- Objective 2:2- Decrease marijuana use by adolescents
- Objective 2:3- Decrease adolescent pregnancy

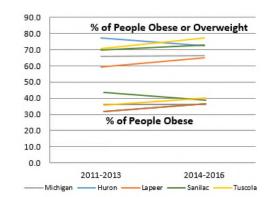


#### http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp

- Objective 3:1- Decrease deaths from cardiovascular disease.
- Objective 3:2- Decrease use of tobacco and nicotine delivery devices by adults.
- Objective 3:3-Decrease obesity
- Objective 3:4- Increase colorectal cancer screenings
- Objective 3:7- Increase consumption of healthy foods.

Percent of Adults engaged in Smoking					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2006-2012	16	17	18	17	21
2016	17	18	18	19	20

www.countyhealthrankings.org



#### Objective 4:1- Increase adult Immunization

% Had the Flu Vaccine in Past Year age >65					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2011-2013	45.8	46.9	43.6	45.5	56.7
2014-2016	*	52.0	*	60.6	57.1
% Ever Had Pneumonia Vaccine age >65					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2011-2013	61.4	65.1	66.7	53.8	67.5
2014-2016	*	59.5	*	69.1	71.3
11.5 12.5 12.5 12.5 12.5 12.5 12.5 12.5					00.html

### Goal 5: Reduce the Impact of Substance Use Disorders

% of Adults Engaged in Excessive Drinking					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2006-2012	17	16	20	19	18
2016	19	22	21	22	21

Data Source: Behavioral Risk Factor Surveillance System

www.countyhealthrankings.org



% of Motor Vehicle Accidents Involving Alcohol					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2008-2012	20	22	30	37	31
2012-2016	36	32	30	30	29
www.countyhealthra	ankings.org				

**Goal 8: Improve Mental Health** 

Mental Health Provider Rates (Lower indicates greater access)



Goal 7: Reduce Childhood Illness & Injury

### Objective 5:1- Reduce substance use disorders

Drug Overdose Death rates/100,000					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2004-2010	6	12	11	10	12
2014-2016	16	11	13	11	20

Data Source: Michigan Department of Health and Human Services http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp

- Objective 6:1-Reduce alcohol impaired accidents.
- Objective 6:2- Decrease incidence of senior injuries

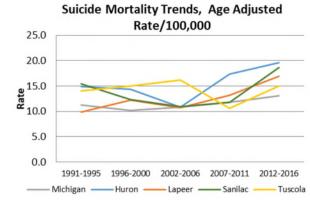
Unintentional Injuries Death Rate/100,000- Age 75+					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
2002-2004	160	133	124	127	146
2014-2016	154	144	205	204	189
http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp					

Objective 7:4- Decrease substantiated cases of child abuse and neglect

Rate per 1,000 Children Ages 0-8 are substantiated					
victims of Child Abuse or Neglect					
	Huron	Lapeer	Sanilac	Tuscola	Michigan
FY13	15.1	20.5	27.6	30.1	20.6
FY17	34.4	23.5	42.9	32.8	26.8

Data Source: Michigan Department of Health and Human Services, Child Protective Services; Great Start Data Set

- Objective 8:1- Increase access to mental health services.
- Objective 8:2- Reduce the incidence of suicide



www.countyhealthrankings.org

- Michigan -

2500

2000

1500

1000

500

2013

2014

- Huron - Lapeer -

2015

2016

-Sanilac -

2017

Tuscola

**Harbor Beach Community Hospital Priorities:** The Harbor Beach Community Hospital CHNA Team analyzed the Assessment completed by the Michigan Thumb Public Health Alliance and compared it to the Harbor Beach Community Hospital's 2016 CHNA priorities. Based on this analysis, priorities were identified in three categories: Focus Area Needs, Priority Needs, and Collaborative Priority Needs.

http://www.mdch.state.mi.us/pha/osr/chi/IndexVer2.asp

### **Prioritization Process**

A CHNA helps to direct resources to the issues that have the greatest potential for improving the health of the community. Successfully addressing priority issues increases life expectancy, improves quality of life, and results in a savings to the healthcare system.

Harbor Beach Community Hospital began the prioritization process by reviewing the data in the 2018 Thumb Community Health Assessment Report. Prioritization meetings were held on May 1 and May 30, 2019. The meeting was facilitated by Kay Balcer, Balcer Consulting and Prevention Services and included prioritization exercises and small group discussion. Discussion included hospital related data, current programs and services of the hospital, and existing efforts of other organizations. The table below illustrates the result of these exercises.

### **Focus Areas Needs**

### Senior Injuries

• Falls

• Auto Accidents Behavioral Health

- Mental Health
- Substance Use Disorders

# <u>Priority Needs</u>

- Chronic Disease
  - Heart Disease
  - Diabetes
  - Obesity-Overweight
  - Tobacco
  - Nutrition
- Physical Activity Access to Care
  - Health Insurance
     Costs/Education
  - MDs/DOs
  - Female Physician for Internal Medicine
  - Knowledge of Local Services
  - Preventive Screening Education
  - Transportation
  - Specialists
- Social Determinants of Health:
- Poverty/Working Poor

### **Collaborative Priority Needs**

- Suicide Prevention
- Child Abuse and Neglect
- Impaired Driving: Distracted and Alcohol
- Adult Immunizations
- Smoking During Pregnancy
- Breastfeeding
- Teen Pregnancy- Local data does not support as a hospital priority.

At a meeting on May 30, 2019 a resource assessment was conducted to help ensure that priorities were appropriately identified as local focus areas, priority needs, and collaborative priorities. Through this analysis the Harbor Beach Community Hospital was able to ensure that all the needs identified in the Community Health Improvement Plan created by the Michigan Thumb Public Health Alliance for the Huron County Health Department are addressed.

# **Resource Assessment for Focus Areas and Identified Health Needs**

# Focus Area 1: Behavioral Health

<b>Current HBCH Efforts</b>	Current
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- Student Health Center-Counseling, Classroom Education, Assemblies, and Professional Development for School Staff
- Social work services for long term care patients
- Tele-psychiatry services for long term care patients and outpatient services
- Partnership with Thumb Community Health Partnership and on Rural Communities Opioid Response Planning Grant
- Senior Life Solution
- Mental Health Access Team Implementation Grant
- Community Connections
- Integrated Behavioral Health Program with counseling available for mental health and substance use disorders in Port Hope and Harbor Beach Primary Care Clinics.
- Participation in county Suicide Prevention Coalition
- Work-Life Balance Program for hospital employees.
- Hospital and primary care policies aligned with Opioid Prescribing laws

Current Community Efforts	Current	Communi	ity Effort
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### County Programs

- 1. Huron Behavioral Health Services for the under-resourced
- 2. Blue Water Center for Independent Living
- 3. Prevention and Recovery Roundtable
- 4. Substance Abuse and Mental Health Counselors available in other areas of county.
- 5. Support groups available in other areas of the county.
- 6. Alcoholics Anonymous and related support groups
- 7. Crisis Line: 1-800-356-5568 or 911
- 8. Inpatient Treatment Programs- Accessible outside of the county
- 9. Geriatric Outreach -Huron Co. Health Department and Huron Behavioral Health
- 10. Suicide Prevention Coalition and Survivor Support
- 11. Medication Assisted Treatment is provided by List Psychological Services and Great Lakes Bay Medical Clinic (FQHC)
- 12. Families Against Narcotics Chapter
- Distribution of naloxone to first responders and the public at community awareness programs.
- 14. Mental Health First Aid programs offered by Huron Behavioral Health
- 15. Peer 360- Recovery Alliance
- 16. Prevention 4 Everyone Committee
- 17. Suicide Prevention Coalition

### Local Programs

- 1. Special Education Services for youth provided by schools and ISD.
- 2. Health Education provided by teachers at local schools.
- 3. Clergy at local churches available for support/counseling
- 4. One large employer has an employee assistance program.
- 5. Alcoholics' Anonymous meetings in Harbor Beach.
- 6. Peer 360 Addictions Support Group

# Focus Area 2: Senior Injuries

Current HBCH Efforts	Current Community Efforts
<ul> <li>Long-term care- PT or OT home assessments for discharged patients that have fall risks.</li> <li>Care &amp; Share Program (respite services)</li> <li>Swing Beds</li> <li>Senior Life Solutions- fall risk assessments</li> <li>Community Connections</li> <li>Community Connections and Human Development Commission Commodities partnership</li> <li>Fall Risk Assessments in primary care clinics</li> </ul>	<ul> <li><u>County Programs</u></li> <li>Adult day services and Foster Care Homes</li> <li>Human Development Commission</li> <li>Subsidized Housing Assistance, Independent and Assisted Living, long term care homes</li> <li>Region VII Area Agency on Aging and Huron County Council on Aging</li> <li>Legal services for seniors-Lakeshore Legal Aid Port Huron Office or will come to Human Development Commission office in Bad Axe</li> <li>A&amp;D Home Care and Blue Water Center for Independent Living (BWCIL) provides Nursing Home Transition services</li> <li>BWCIL is the Housing Assistance Resource Agency (HARA) for the Thumb Area Continuum of Care and provides homeless prevention and rapid re-housing.</li> <li>Homeless Coalition- Emergency Shelter, security deposits rental arrearages</li> <li>HDC-Home delivered meals</li> </ul>

Other Needs- Already addressed and not selected as a focus area for expansion.

# Chronic Diseases (Includes Diabetes, Nutrition, Tobacco Use, Cancer, Obesity, Physical Activity)

Cu	rrent HBCH Efforts	Current Community Efforts
•	Supports weight watchers program held at HBCH	County Programs
•	Student Health Center (SHC)- provides classroom education,	1. Programs offered by other medical providers in the county.
	information to parents, and promotes activity through activities	2. MSU Extension offers resources and information about healthy eating
	such as walking programs.	and fitness.
•	SHC nursing services provides BMI assessments through	3. Fitness and physical therapy services located throughout the county.
	wellness screenings. Will provide follow up nurse education	4. Some employers in the county support employee fitness programs.
	to youth and families if interested.	5. Numerous technology based applications and state/national internet
•	5K race held each summer with Maritime festival	resources are available i.e. www.michigan.gov/healthymichigan.
•	Physicians make referrals to procedures such as banding not	6. Private insurance companies provide discounts to their members.
	offered at HBCH.	7. Home Delivery services by grocers-Browns Market Place and
•	Specialty clinics for endocrinology, cardiology and	McDonalds Food Family
	pulmonology.	8. Nature Center/bike trail along M-25
•	Referring and consultation relationships between primary care	9. Senior Center has exercise equipment available
	physicians and specialists	10. Programs sponsored by the American Heart Association, American
•	Electronic Medical Records	Diabetes Association, and American Cancer Society.
•	Screenings offered and discounted screenings such as	11. Support Groups (varies throughout county)
	mammograms.	Local Programs
•	CPR and Heart Saver Classes	1. Exercise programs offered at the Community House
•	Cardiopulmonary rehabilitation	2. Biking/Walking Trail and Parks and Recreation Programs
•	Participation in Thumb Community Health Partnership	3. Walking track and fitness center available at local school
	r acception in Thanio community freature actionship	4. Food Pantry provides healthy foods to those in need
		5. Renew Wellness Services which includes personal trainer services

Social Determinants of	of Health
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Current HBCH Efforts	Current Community Efforts
Community Connections	County Programs
Community Connections and Human Development	1. Thumb Area Michigan Works
Commission Commodities partnership	2. Huron County Economic Development Corporation
Insurance Enrollment Assistance	3. Huron County Community Foundation
Participation in Local College Access Network	4. Department of Health and Human Services
Bridges out of Poverty trainers and programs throughout the	5. Local College Access Network
community, school, and for healthcare providers.	Local Programs
Referrals to support services including newly added Care	1. Home delivered meals
Management Services provided by an LMSW.	2. School College Connection
	3. City Parks and Recreation
	4. Local Chamber of Commerce
	5. Food Pantry and Back Pack Food Program
	6. Locally placed Department of Health and Human Services Staff
	7. GST Michigan Works offers a business resource network (success
	coaching) for employers in the county.

### Safety and Violence Issues

Current HBCH Efforts	Current Community Efforts
Social emotional health education programs at the Student	County Programs
Health Center	1. Safe Place domestic violence shelter
Primary care referrals to shelter or counseling services	2. County and State Law Enforcement Programs
• Representative and participates in the Child Abuse and Neglect	3. Child Abuse and Neglect Council
Counsel	4. Michigan State Police demonstrations with goggles
Hospital staff works with Department of Human Service and	5. Covenant Simulator
makes referrals for abuse.	Local Programs
Drug education programs at the Student Health Center	1. School education and anti-bullying programs
includes alcohol impaired driving as including in Michigan	2. Local Law Enforcement
Model curriculum.	3. Faith Community programs and outreach
	4. School assemblies on distracted driving
	5. Harbor Drug offers immunizations for adults through pharmacy
	department.

### **Communicable Disease**

Current HBCH Efforts	Current Community Efforts
Expanded policy at Harbor Beach medical clinic to expand	County Programs
immunizations offered in physician offices.	1. Maternal and Child Health programs at Health Department
Partnership with Health Department to provide immunization	Local Programs
outreach clinic.	<b>1.</b> Harbor Drug offers immunizations for adults through pharmacy
	denartment

# **Perinatal and Maternal Health**

Current HBCH Efforts	Current Community Efforts
• Working relationship with health department to make referrals	County Programs
for at risk pregnancies and breastfeeding support.	<ol> <li>Health Department programs to work with women who smoke during pregnancy.</li> </ol>
	<ol> <li>Health Department offers breastfeeding lactation consultant.</li> </ol>

### Huron County participates in the 2-1-1 service referral system

When someone in the community needs non-emergency services they can call 2-1-1. If you need help with any of the following, 2-1-1 is there to provide information 24 hours a day, 7 days a week:

- · Food food pantries, meal locations, commodities, meals on wheels
- Utilities Shut Offs gas, water, electric
- Deliverable Fuels propane, oil, wood, wood pellets, corn
- Rent Assistance must have received eviction or 7-day notice
- Tax Assistance free to eligible families and individuals
- Children's Health Insurance call for eligibility criteria
- Compulsive Gambling contact Michigan Department of Health and Human Services for self-assessment and treatment resources
  Clothing - School, work and career clothing
- Temporary and Transitional Housing Federal Rapid Rehousing
- Temporary and Transitional Housing Federal Rapid Kenousing
   Community Shelters homeless and domestic violence
- Community Sheriers nonneless and domestic viole
- Substance Abuse alcoholism and drug addictions
- Other home and family needs

### **Implementation Meeting**

Following finalization of priorities and assessment of resources. Directors self-selected into the two focus area to begin discussion of potential strategies to address each focus area: Behavioral Health and Senior Injuries. Discussion included reviewing and, if needed, editing the resource assessment. Strategies identified include:

Focus Area 1: Behavioral Health		
Continue Current Efforts	Potential New Strategies	
<ul> <li>Student Health Center-Counseling, Classroom Education, Assemblies, and Professional Development for School Staff</li> <li>Social work services for long term care patients</li> <li>Tele-psychiatry services for long term care patients and outpatient services</li> <li>Partnership with Thumb Community Health Partnership and on Rural Communities Opioid Response Planning Grant</li> <li>Senior Life Solution</li> <li>Mental Health Access Team Implementation Grant</li> <li>Community Connections</li> <li>Integrated Behavioral Health Program with counseling available for mental health and substance use disorders in Port Hope and Harbor Beach Primary Care Clinics.</li> <li>Participation in county Suicide Prevention Coalition</li> <li>Work-Life Balance Program for hospital employees.</li> <li>Hospital and primary care policies aligned with Opioid Prescribing laws</li> </ul>	<ul> <li>Increase connections between the Integrated Behavioral Health Program and the emergency department.</li> <li>Explore ways to integrate behavioral health screening into Walk In Clinic (PHQ2)</li> <li>Reduce stigma related to behavioral health and suicide for high risk groups</li> <li>Increase volume of patients treated for behavioral health in primary care.</li> <li>Collaboration on Thumb Opioid Response Consortium Planning Grant and Thumb Community Health Partnership</li> </ul>	

Focus Area 2: Senior Injuries	
Continue Current Efforts	Potential New Strategies
<ul> <li>Long-term care- PT or OT home assessments for discharged patients that have fall risks.</li> <li>Care &amp; Share Program (respite services)</li> <li>Swing Beds</li> <li>Senior Life Solutions- fall risk assessments</li> <li>Community Connections</li> <li>Community Connections and Human Development Commission Commodities partnership</li> <li>Fall Risk Assessments in primary care clinics</li> </ul>	<ul> <li>Increase awareness of the importance of preventing falls.</li> <li>Strengthen relationships and collaboration with other community partners including Human Development Commission and EMS/Fire</li> <li>Review current practices and create protocol/guidelines to increase referrals to LMSW for care management related to senior injuries.</li> </ul>

Feedback on strategies was obtained from the Hospital Board, Medical Staff, other hospital staff, and the community. The final implementation plan is written in a workplan format and includes a list of programs and services that are currently in place, potential partners, strategies for expanding, improving, or creating new initiatives, and person who will take the lead on these actions.