



Make a Difference
in the health of our community

Community Health Needs Assessment 2015-2018

2015-2018 Implementation Strategy

St. Mary Mercy Livonia
Community Health Needs Assessment Implementation Strategy
Fiscal years 2015-2018

I. Introduction

St. Mary Mercy Livonia (SMML) completed a comprehensive Community Health Needs Assessment (CHNA) that was presented to the SMML local Board of Directors for review and approval on May 18, 2015. SMML performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from community leaders, community members and various community organizations. The complete CHNA report is available electronically at stmarymercy.org.

II. Hospital Information and Mission Statement

St. Mary Mercy Livonia is a 304-bed hospital located in Livonia, Michigan. Since 1959, when the hospital was established by the Felician Sisters, our goal has been to meet the health care needs of our community with an emphasis on quality, personalized care. Over the past 55 years, the hospital has grown to become one of the premier community hospitals in the area as exemplified by the numerous awards recognizing excellence in clinical outcomes, patient safety, financial performance and efficiency. As a member of Saint Joseph Mercy Health System, St. Mary Mercy Hospital maintains a Catholic heritage that is as proud of its past as it is devoted to its future. Through our dedicated administration, physicians, employees and volunteers, the hospital continues to expand its medical services to maintain its role as a leader in community health care.

The service area of St. Mary Mercy Livonia for this assessment was defined as cities within a five mile radius of the hospital. This includes zip codes of Westland, Canton, Livonia, Northville City, Northville Township, Plymouth City, Plymouth

Township, Redford, Farmington Hills and Farmington City. The majority of these cities are located in Western Wayne County; however, Farmington Hills lies within Southern Oakland County lines. The population for these communities is 510,806 residents. Garden City and Novi are within five miles of the hospital but have not been included in the SMML service area because they have a hospital (Garden City Hospital and Providence Park) in their community.

Mission, Vision and Values

Mission: We, Trinity-Health, serve together in the spirit of the Gospel to be a compassionate and transforming healing presence within our communities.

Core Values: Reverence, Commitment to Those who are Poor, Justice, Stewardship and Integrity

Vision: To be a truly great hospital, providing comprehensive, coordinated and compassionate care, every time to everyone.

III. Health Needs of the Community

The 2015 CHNA identified ten significant health needs within the St. Mary Mercy community. These needs were prioritized based on the results of the health needs survey, Healthy People 2020 indicators, magnitude of persons affected, severity of the need, alignment of the problem with organizational strengths, the hospital’s ability to impact the need and the ability to measure change. The significant health needs identified include:

Nutrition/Eating Habits	<ul style="list-style-type: none"> • 35% of Wayne County residents consume fruit < once per day as compared to 37.5% in Michigan. 25.8% of Wayne County residents consume vegetables < once per day as compared to 36.9% in Michigan.
Physical Activity	<ul style="list-style-type: none"> • 23% of Wayne County residents have no leisure time physical activity as compared to 23.8% in Michigan.
Obesity	<ul style="list-style-type: none"> • Nearly 1 in 3 children in Michigan, ages 10-17, are overweight or obese. 29.6% of Wayne County residents are obese as compared to 31.3% in Michigan.
Access to Care	<ul style="list-style-type: none"> • 30.6% of Wayne County residents did not have a routine checkup in the past year as compared to 32.4% in Michigan.

Mental Health	<ul style="list-style-type: none"> • 13.4% of Wayne County residents have poor mental health as compared to 12.7% in Michigan. 20.1% of Wayne County residents have depression as compared to 20.9% in Michigan.
Substance Abuse	<ul style="list-style-type: none"> • 5.6% of Wayne County residents reported heavy drinking as compared to 6.4% in Michigan. 18.6% of Wayne County residents reported binge drinking as compared to 19.2% in Michigan.
Transportation	<ul style="list-style-type: none"> • According to the 2010 Demographic and Social Profile of Western Wayne County, 10% of Wayne households, 8% of Westland household and 5% of Redford households do not own a vehicle.
Cancer	<ul style="list-style-type: none"> • 12.4% of Wayne County residents have cancer as compared to 12.0% in Michigan
Heart Disease	<ul style="list-style-type: none"> • 9.5% of Wayne County residents have cardiovascular disease as compared to 9.8% in Michigan
Diabetes	<ul style="list-style-type: none"> • 10% of Wayne County residents have diabetes as compared to 10.3% in Michigan

2013 Michigan Behavioral Risk Factor Survey. Wayne County does not include the City of Detroit.

IV. Hospital Implementation Strategy

St. Mary Mercy Livonia resources and overall alignment with the hospital’s mission, goals and strategic priorities were taken into consideration of the significant health needs identified through the most recent CHNA process.

Significant health needs to be addressed

St. Mary Mercy Livonia will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- 1. Obesity** – Detailed need specific Implementation Strategy on page 6
- 2. Access to Care** – Detailed need specific Implementation Strategy on page 8
- 3. Mental Health/Substance Abuse** – Detailed need specific Implementation Strategy on page 10

Significant health needs that will not be addressed

St. Mary Mercy Livonia acknowledges the wide range of priority health issues that emerged from the CHNA process and determined that it could effectively focus on only those health needs which it deemed most pressing, under-addressed, and

within its ability to influence. SMML will not take any new or additional actions on the following health needs:

- **Physical Activity and Nutrition for Adults-** Adult physical activity and nutrition will not be addressed in this plan but the hospital will continue to sponsor community fun runs and the other community events that promote physical activity and cooking demonstrations for healthier eating.
- **Cancer-** Cancer will be addressed in the strategies for access to care and in the hospital's community benefit programs for educational seminars, prevention screenings and support groups.
- **Heart Disease-** Heart disease will be addressed in the strategies for access to care and obesity.
- **Diabetes-** Diabetes did not rank among the top health needs although one-third of the people in the United States have diabetes but do not know it. St. Mary Mercy Livonia will continue to offer diabetes prevention seminars and programs, outpatient diabetes education and a support group. Many of the strategies to increase physical activity and improve nutrition will also improve the quality of life for diabetic patients.

This implementation strategy specifies community health needs that the hospital has determined to meet in whole or in part and that are consistent with its mission. The hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending 2018, other organizations in the community may decide to address certain needs, indicating that the hospital then should refocus its limited resources to best serve the community.

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2015-2018**

HOSPITAL FACILITY:	St. Mary Mercy Livonia		
CHNA SIGNIFICANT HEALTH NEED:	Obesity		
CHNA REFERENCE PAGE:		PRIORITIZATION #:	1

BRIEF DESCRIPTION OF NEED:

Obesity contributes to multiple chronic health conditions. The pattern of increasing weight is seen among Michigan children.

Using more fruits and vegetables along with whole grains and lean meats, nuts, and beans is a safe and healthy way to help control weight and a diet rich in fruits and vegetables may reduce the risk of some types of cancer and other chronic diseases. People who eat more vegetables and fruits as part of an overall healthy diet are likely to have a reduced risk of some chronic diseases

Regular physical activity is linked to improved student concentration, cognitive functioning and classroom behavior as well as improved academic and standardized test performance. To effectively prevent obesity, we need to address both diet and physical activity, as both of these factors influence health.

GOAL:

1. Provide education and increase the amount of time children are engaged in physical activity.
2. Provide education and increase consumption of fruits and vegetables by children.

OBJECTIVE:

1. Increase the number of children who engage in 60 minutes of activity per day in the community.
2. Increase the number children who add at least one daily serving of fruits and vegetables.

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Provide education about benefits and types of physical activities in partnership with the schools, YMCA and local Parks and Recreation Departments.
2. Develop new networks/collaborations to provide/support education on types and resources for low-cost/free physical activities.
3. Promote community activities that encourage increased steps/physical activities for children and families.
4. Apply for a *Produce for Better Health* grant to implement targeted healthy grocery store tours in the South Redford School District in partnership with Meijer.
5. Implement an "All School Taste Day" to introduce students in the South Redford School District to fruits/vegetables.
6. In partnership with Meijer, investigate/implement a student assembly program to motivate participation in healthy nutrition programs/tastings, such as the Jump with Jill Assembly.
7. Support (resources/networking) YMCA efforts to close the gap on food securing during the summer months for one Title 1 Livonia school-based food pantry.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Increased number of children engaging in 60 minutes of activity per day.
2. Improved communications/opportunities/networking of school and after-school activities.
3. Increased consumption of fruits and vegetables in children.
4. Increased educational opportunities/resources directed at children and their families for healthy cooking and food utilization skills.
5. Increased access to fruits and vegetables in underserved communities.

PLAN TO EVALUATE THE IMPACT:

Review of Livonia Public Schools student survey data.
Review program data from "All School Taste Day".
Review program data from Produce for Better Health grant.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

In-kind support through staffing, materials for the above programs.
Continued chronic disease and nutrition community benefit programs (cooking demos, seminars, health fairs).
Continued support of local events encouraging physical activities in the community benefit program.
Percentage proposed budget for new dollars for all CHNA and Population Health Management.

COLLABORATIVE PARTNERS:

Local School districts (Livonia and Redford)
Livonia YMCA
Livonia Parks and Recreation Departments
Michigan Commodity Groups
Meijer

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2015-2018**

HOSPITAL FACILITY:	St. Mary Mercy Livonia		
CHNA SIGNIFICANT HEALTH NEED:	Access to Care		
CHNA REFERENCE PAGE:		PRIORITIZATION #:	2

BRIEF DESCRIPTION OF NEED:

While many more individuals are insured through the Health Exchanges and the Healthy Michigan Plan, there is a lack of knowledge/resources for navigating the health care system and use of prevention services.

Access to care is impacted by a variety of situations including, but not limited to availability of providers/office hours, time, transportation, insurance coverage, co-pays and deductibles.

There is a gap in access to specialists care for the underinsured and uninsured.

GOAL:

1. Provide education and improve usage/access to Primary Care Providers.
2. Improve transportation to health care appointments.
3. Increase access to specialists for those under or uninsured.

OBJECTIVE:

1. Provide education and resources to increase the number of children utilizing school-based primary care providers.
2. Provide education and improve the number of adults visiting a primary care provider at least one time per year for preventative care.
3. Increase the number of specialist available and used for care of the uninsured/underinsured.

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Provide education/promote wellness checks and other prevention services to the community in conjunction with South Redford School District.
2. Investigate/support/expand current school-based locations in South Redford School District and/or other locations.
3. Provide educational programs/promote when to use primary care to the community.
4. Investigate/support/expand point-of-care locations in the community.
5. Develop a coalition to address lack of transportation services for health care appointments in the community.
6. Create/expand infrastructure for specialist care in the community.
7. Explore use of navigators/community health workers to assist with follow-up health care appointments and management of chronic diseases.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Increased number of children utilizing school-based clinic services.
2. Expanded capacity/locations of school-based primary care services.
3. Increased number adults seeking regular care/preventative care by a primary care provider.
4. Increased number of adults receiving transportation assistance to health care appointments.
5. Improved communication with collaborative partners/network.
6. Increased number of available specialist in the community for the uninsured/underinsured.
7. Improved communication/referral process/transition of care.

PLAN TO EVALUATE THE IMPACT:

Review of report from South Redford School District clinic visits.
Number of educational programs and review of program metrics.
Number of transportation assistance rides and programs (new and new collaborations).
Review of specialist referral data.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

\$125,000 budgeted in support of specialist care.
Staff-time to support the above actions.
In-kind expenses to support the above actions.
Continued funding graduate medical education program.
Continued funding for transportation services for those in need through SMML transportation program.
Continued funding for chronic disease programming such as diabetes education, cardiovascular disease, senior services.
Percentage of new dollars for all CHNA and Population Health management

COLLABORATIVE PARTNERS:

Hope Clinic
Covenant Community Care
South Redford School District and other local school districts
Community Transportation Resources and Services such as Dial a Ride and Redford Interfaith Relief

**CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2015-2018**

HOSPITAL FACILITY:	St. Mary Mercy Livonia		
CHNA SIGNIFICANT HEALTH NEED:	Behavioral Health (mental health and substance abuse)		
CHNA REFERENCE PAGE:		PRIORITIZATION #:	3

BRIEF DESCRIPTION OF NEED:

The most promising way to prevent suicide and suicidal behavior is through early recognition and treatment of depression and other psychiatric illnesses. Suicide is the third leading cause of death in Michigan for ages 15-34.

Depression in older adults is often not recognized or treated. Most adult seniors are treated by the primary care physician, although they only recognize depression in 50% of their patients. Depression is not a normal part of aging.

More resources are needed to provide Mental First Aid Training, which is CPR-like programs, effective in improving trainees' knowledge of mental disorders, reducing stigma and increasing the amount of help provided to others.

The community-at-large needs access to education and resources to decrease the use of drugs/alcohol by teens.

GOAL:

3. Provide education and improve early detection for suicide.
4. Decrease the stigma and increase identification of depression.
5. Improve transitions of care for behavioral health services.
6. Increase awareness of alcohol and drug use prevention and interventions.

OBJECTIVE:

1. Increase the number of suicide and/or depression screenings conducted in the community.
2. Increase the number of Mental First Aid trainings/responders in the community.
3. Address transitions of care process from the hospital's emergency department to care agencies thereby addressing access to Behavioral Health (BH) services.
4. Reduce use of alcohol by teens in the community.

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Partner with local clinics, physicians, behavioral health and senior care agencies to educate/train/support the provision of suicidal risk screenings by healthcare providers including new and various locations (assisted living).
2. Create a workgroup to determine process/tool and implement depression screenings for all teens seen in the Emergency Room.
3. Provide support/education for depression screening as routine care at Primary Care visits within the St.

Mary Mercy Medical Group.

4. Support/expand (sites, sessions funding, linkages) the number of people trained to be a mental health first aid responder yearly.
5. Create a *Behavioral Health Transitions of Care* team using the STARForM model.
6. Partner with local organizations to provide a drug/alcohol educational program for teens, families and the community-at-large as a neutral venue.

ANTICIPATED IMPACT OF THESE ACTIONS:

1. Increased number of adults screened for suicidal risks in multiple and new settings.
2. All teens presenting to the ER will be screened for suicide/depression.
3. Increased number of Mental Health First Aid Responders in the community.
4. Improved interventions leading to improved access for mental health and substance abuse services.
5. Improved communication with collaborative partners/network leading to improved completion of referrals/access to behavioral health services.
6. Earlier intervention/referral for behavioral health.
7. Increased use of educational opportunities and resources by providing a neutral meeting location.
8. Increased knowledge/awareness of drug/alcohol use by teens in the community.
9. Decreased numbers of teens drinking/using drugs.

PLAN TO EVALUATE THE IMPACT:

Review depression and suicide screening reports/data.

Review Mental First Aid training statistics and interventions.

Compile data, review and implement process improvements for transitions of care for behavioral health referrals.

Review MiPHY data annually and police department DUI ticket statistics.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

Staff-time to support the implementation of the above actions.

In-kind expenses associated with supporting the above actions.

Percentage of budgeted new dollars for all CHNA and Population Health Management.

Continued support of behavioral health inpatient community benefit program.

Continued support of substance abuse ER triage community benefit program.

Continued support of Livonia Save Our Youth (LSOY).

COLLABORATIVE PARTNERS:

Mental Health Agencies (CareLink, Hegira)

Clinically Integrated Network

Local Youth Assistance Organizations

St. Mary Mercy Medical Group

Local School Districts

Growth Works

Senior Service Organizations and Locations

Adoption of Implementation Strategy

On May 18, 2015, the Board of Directors for St. Mary Mercy Livonia, met to discuss the 2015-2018 Implementation Strategy for addressing the community health needs identified in the 2015 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

Maureen Miller Brosnan, SMML Board Chair
Name & Title

Date