St. Joseph Mercy Oakland
Community Health Needs Assessment Implementation Strategy
Fiscal Years 2019 - 2021

St. Joseph Mercy Oakland completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Trustees in June 2018. SJMO 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 representatives of the community, community members, and various community organizations.

The complete CHNA report is available electronically at http://www.stjoeshealth.org/cbm. This page also includes an opportunity for community members to provide comment and request a hard copy of the documents. Printed copies are available at St. Joseph Mercy Oakland Marketing Department.

Hospital Information and Mission Statement

St. Joseph Mercy Oakland traces its roots back to 1927, when the Sisters of Mercy were asked by the City of Pontiac to build a hospital to serve the health care needs of the community. A deep commitment to care for all who need help, regardless of their ability to pay, has been a central focus of the hospital’s mission. As a member of Trinity Health, the country’s second largest Catholic health system, this commitment continues to guide St. Joe's culture.

- **Mission** - We Trinity Health serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.
- **Vision**: As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.
- **Values** – Reverence, Commitment to Those Who are Poor, Justice, Stewardship, Integrity.

Accredited by The Joint Commission, the hospital's primary service area is North Oakland County, with special concern for the Pontiac community. In fiscal year 2017, St. Joseph Mercy Oakland staff provided care to more than 19,500 inpatients and 319,800 outpatients, experienced nearly 61,700 emergency room visits, and performed nearly 11,000 surgeries.

Service Area and Population

For the purpose of this CHNA assessment, the geographic boundary for SJMO encompasses the combined, geography of Oakland County. The hospital’s primary service area is defined as the contiguous zip codes where 80% of the hospital’s admissions originate. The primary service area of SJMO includes Oakland County, specifically the City of Pontiac located in southeastern Michigan.

Oakland County is the second most populated county in Michigan behind Wayne County with approximately 1.2 million residents in 62 cities, villages, and townships. The Robert Wood Johnson Foundation ranks Oakland County as the 9th healthiest county in Michigan. However, SJMO is located in Pontiac, MI, an area designated by the Health Resources and Services Administration as Medically Underserved for having too few primary care providers, high infant mortality, high poverty & high elderly population. As a result, the CHNA and supporting Implementation Plan were conducted to analyze needs in Pontiac as well as Oakland County overall.

Health Needs of the Community

The CHNA conducted in 2018 identified four significant health needs within the St. Joseph Mercy Oakland community. To identify these needs, a larger group of health needs were identified based on a review of data from multiple data sources, community focus groups and key stakeholder/informant interviews to determine potential priority areas. Potential priority areas were evaluated based on the following agreed-upon criteria, taken from each hospital’s previous criteria, and based on common public health frameworks:

1. Severity of health need within community.
2. Impact of the health need on vulnerable populations
3. SJMO resources to positively impact the health need.
4. Magnitude of need relevant to state benchmarks

Overall Score = (1.5*Severity) + (1.5*Vulnerable) + (1.4*Resources) + (1.3*Magnitude)

Each criteria was assigned a score between 1 and 5. The scores were used to determine the weight for each criteria that would be used to rank the health needs. Scores of 1 indicated the criteria was less important to rank the identified health needs, whereas scores of 5 indicated the criteria was extremely important to rank the identified health needs. The average score for each criteria was used to develop the formula below to provide a weight for each health need.

---


CHNA Implementation Strategy 2
I •
15.8% of Oakland County residents have poor mental health compared to 11.9% in Michigan.3
• 1 in 5 children experience a serious mental disorder in their life.4
• 20% of Oakland County residents reported binge drinking as compared to 20% in Michigan.

• 32.9% of Oakland County residents are obese compared to 32.5% in Michigan.
• 19% of Oakland County residents have no physical activity as compared to 23% in Michigan.
• 11.56% of Oakland County residents died from diabetes compared to 10.36% in Michigan.
• 9.2% of Oakland County Residents have diabetes while 9.4% of the U.S. is diabetic.
• 23.8% of people with diabetes are undiagnosed.

• 27.9% of the mortality rate within Oakland County.5
• Heart Disease was the leading cause of death in Oakland County in 2016.

• The U.S. has the highest infant mortality rate of all developed countries.6
• African American woman are twice as likely to experience infant mortality than other races.7

Hospital Implementation Strategy

St. Joseph Mercy Oakland resources and overall alignment with the hospital’s mission, goals and strategic priorities were considered when identifying the significant health needs through the most recent CHNA process.

**Significant health needs to be addressed**
St. Joseph Mercy Oakland will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- Obesity and Diabetes as a subset - Detailed Implementation Strategy on page 5.
- Cardiovascular Disease – Detailed Implementation Strategy on page 7.

**Significant health needs that will not be addressed**
St. Joseph Mercy Oakland 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. St. Joseph Mercy Oakland will therefore not take formal action on the following health needs:

---

6 http://www.mdch.state.mi.us/phs/osr/deaths/causrankcnty.asp
7 https://www.savethechildren.org/content/dam/usa/reports/advocacy/sowm/sowm-2015.pdf

CHNA Implementation Strategy
Mental Health and substance abuse as a subset:
Oakland Community Health Network (OCHN) and Common Ground take the lead on mental and behavioral health issues in the community. Common Ground and OCHN have included a mental health strategy in its health priorities and funding. In order to prevent duplication of efforts and reserve resources SJMO will not directly focus its implementation plan on Mental Health. St. Joe's will continue its commitment to serving the behavioral medicine population while supporting the efforts of Common Ground and OHIN. In addition, funding of a Behavior Health Navigator is being given strong consideration. SJMO will continue work to deter opioid abuse and encourage prescription management prevention through its Faith Community Nursing program and community partnerships to mitigate substance abuse within its service area. The hospital will further support OCHN and Common Ground’s efforts by donating resources and support.

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. Likewise, during the three years ending in 2021, 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 2019 - 2021

### Hospital Facility:
St. Joseph Mercy Oakland

### CHNA Significant Health Need:
Obesity and Diabetes as subset

### CHNA Reference Page:
6, 19, 21, 22, 23, 24, 25, 26

### Prioritization #:
1

### Brief Description of Need:
- Diabetes is the seventh leading cause of death in the United States.\(^8\)
- The Centers for Disease Control and Prevention (CDC) report childhood obesity rates at 13% nationally and 14% for the State of Michigan.\(^9\)
- Obesity prevention includes diet management and physical activity - both factors influence overall health.
- Food insecurity and reliance on school-provided meals, particularly within Pontiac and Waterford.

### Goal:
- Reduce diabetes and obesity prevalence among adults and children in Oakland County
- Improve knowledge of diabetes prevention and nutrition management options for adults and youth in SJMO service area.

### Objective:
- Establish healthy weight of 50 adults and/or students each fiscal year through 2021.
- Increase access to healthy food among families in the Pontiac and Waterford by 10% through fresh produce distribution programing by 2021.

### Actions the Hospital Facility Intends to Take to Address the Health Need:
1. Partner/support Pontiac Public School District and Youth Recreation Center to increase physical activity access for at least 50 adults and students annually through yoga, Camp Cavell and other outpatient physical therapy support.
2. Develop a workplace physical activity program in partnership with local Chambers of Commerce - increase daily movement by 15% for up to 150 individuals over a three-year period.
4. Provide access to Social Determinates of Health (SDoH) services by hosting social support agencies within hospital community space - Mercy Place. (food pantries, clothing closet, WIC, OLSHA)
5. Introduce Farm Depot and food preparation station to support patients and families.
6. Provide Diabetes Prevention Program (DPP) and diabetes education program to support pre diabetic and diabetes management for qualifying participants.

### Anticipated Impact of These Actions:
1. Increased baseline in physical activity level for 150 individuals through business and chamber outreach program using fruit and vegetable consumption surveys.
2. Increased access, knowledge, preparation and budgeting of fruits and vegetables for students in Pontiac and Waterford through Oakland Intermediate Schools.

---

\(^8\) [https://www.healthypeople.gov/2020/topics-objectives/topic/diabetes](https://www.healthypeople.gov/2020/topics-objectives/topic/diabetes)

3. Increased physical activity and fitness education for youth and seniors (120 students & 400 seniors by 2021).
4. Increased adult weight loss for diabetes education and prevention program participates by 5% by 2021.

**PLAN TO EVALUATE THE IMPACT:**
- Track physical activity of Gleaners fresh produce and Food Depot recipients annually within SJMO service area relative to Pontiac & Waterford. Utilize structured focus groups to measure participates pre and post obesity and diabetes rates compared to Oakland County baselines through 2021.
- Track daily fruit and vegetable servings of physical activity and diabetes education program participates monthly through 2021. Measure improvement in eating habits and weight loss goals for youth and seniors.

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Implement Faithful Families Eating Smart Moving More through USDA SnapEd with support from Faith Community Nursing.
- SJMO Staff time for programming, coordinating classes, conducting surveys and focus group facilitation.
- Funding for programs, community collaborations, and organizations with demonstrated focus on obesity and/or diabetes as a health priority.
- Programs already in existence that support diabetes and obesity as a priority health need (Senior Fit, DPP, Yoga, Camp Cavell partnership)

**COLLABORATIVE PARTNERS:**
1. Pontiac & Waterford School District
2. Oakland Intermediate School District
3. Healthy Pontiac We Can!
4. Oakland County Health Department
5. National Kidney Foundation of Michigan
6. Gleaners Community Food Bank of South East Michigan
7. SunTime Bank
# CHNA IMPLEMENTATION STRATEGY
## FISCAL YEARS 2019 -2021

<table>
<thead>
<tr>
<th>HOSPITAL FACILITY:</th>
<th>St. Joseph Mercy Oakland</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHNA SIGNIFICANT HEALTH NEED:</td>
<td>Cardiovascular Disease</td>
</tr>
<tr>
<td>CHNA REFERENCE PAGE:</td>
<td>25, 26, 27, 28,</td>
</tr>
<tr>
<td>PRIORITIZATION #:</td>
<td>2</td>
</tr>
</tbody>
</table>

**BRIEF DESCRIPTION OF NEED:**
- Cardiovascular diseases are the leading cause of death for men and women of all racial, ethnic and economic groups in the nation, state and Oakland County.

**GOAL:**
- Decrease cardiovascular disease risk factors (*smoking*) and prevent death from sudden cardiac arrest.

**OBJECTIVE:**
- Decrease smoking by 5% in three years within Oakland County.
- Increase BLS and stroke training by 5% each year for three years.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
1. Provide early detection screenings using National Health Association stroke risk assessments though Faith Community Nursing (FCN).
2. Offer community focused Basic CPR training courses through Nursing Education Department.
3. Provide smoking cessation referrral through the Center for Disease Control 1800 Quit Now hotline.
5. Increase awareness of RSVP and Thrombectomy capable services.
6. Engage community through Speakers Bureau relative to heart health and cardiology resources.
7. Provide BLS CPR course to at least 90 participants in three years.

**ANTICIPATED IMPACT OF THESE ACTIONS:**
1. Reduce smoking rate in Oakland County each year for three years compared to County baseline.
2. Increased knowledge and skills to resuscitate teens or adults suffering sudden cardiac arrest or stroke.

**PLAN TO EVALUATE THE IMPACT:**
- Track number of participants in the community BLS CPR courses, relevant to cardiac arrest and stroke; plan to increase participation by 15% by 2021.
- Track smoking cessation referrals through 1800 Quit line - increase referral volume by 5% annually.
- Annual Speakers Bureau engagement volume relative to stroke education and heart health education will be conducted once per quarter each year for three years.

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Staff time needed for programming; participate in collaborative workgroups, boards, support policy, and environmental changes.
- Fund programs, community collaborations, and organizations who have demonstrated a need for assistance addressing cardiovascular disease as a priority health need
- Programs already in existence that address priority health needs (Stroke Support Group).
COLLABORATIVE PARTNERS:
1. Pontiac School District
2. Waterford School District
3. Oakland Intermediate School District
4. Healthy Pontiac We Can!
5. Oakland County Health Department
6. Gleaners Community Food Bank
7. Forgotten Harvest Food Pantry
8. Oakland Livingston Human Services Agency
9. American Heart Association
10. Michigan Stroke Network
11. SunTime Bank
## CHNA IMPLEMENTATION STRATEGY
### FISCAL YEARS 2019 - 2021

<table>
<thead>
<tr>
<th>HOSPITAL FACILITY:</th>
<th>St. Joseph Mercy Oakland</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHNA SIGNIFICANT HEALTH NEED:</td>
<td>Access to Maternal Health Resources</td>
</tr>
<tr>
<td>CHNA REFERENCE PAGE:</td>
<td>17, 18, 23, 26, 28</td>
</tr>
<tr>
<td>PRIORITIZATION #:</td>
<td>3</td>
</tr>
</tbody>
</table>

### BRIEF DESCRIPTION OF NEED:
- Infant mortality rate in Oakland County is equal to the State average of 7 deaths per 1,000 births.
- Babies born to African American mothers in Oakland County are 2.8 times more likely to die in the first year of life than those born to Caucasian mothers.¹⁰

### GOAL:
- Reduce low birth weight babies within Oakland County and City of Pontiac by increasing access to prenatal care for people impacted by SDoH.
- Reduce infant mortality rate within Oakland County by increasing exclusive breast-feeding by 10% over a three-year period.

### OBJECTIVE:
- Reduce SDoH barriers (transportation) to maternal health resources by implementing the use of a SDoH screening tool with 100% of the women who receive support at the women’s and children’s center at SJMO and within at least 2 provider groups in our system, by 2021.
- Improve exclusive breast-feeding among new mothers by increasing participation in the weekly breast-feeding education support group by 10% within three years.
- Increase the number of locations within the community where breastfeeding support offered to include two additional sites.

### ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:
1. Collaborate with Oakland County Health Department to imbed Woman Infant and Children (WIC) support at SJMO’s Woman’s and Children’s Health Center.
2. Collaborate with OLHSA to imbed a Maternal Child Health Advocate within the Woman’s Health Center.
3. Support mother baby unit with Community Health Worker & Financial staff.
4. Deploy SDoH screening tool (Wellopp) within Woman’s Health Center for recent and expectant mothers.
5. Fund/partner/implement initiatives that improve infrastructure and support local walking/biking and physical activity programs annually.

### ANTICIPATED IMPACT OF THESE ACTIONS:
1. Improved access to medical appointments/Primary Care Physicians and OB services for Oakland County residents.
2. Improved access to services addressing SDOH in the Pontiac/Waterford communities for up to 5,000 patients annually.
3. Increased referral rates for patients that qualify for WIC, OLHSA and Nurturing Families Partnership programs by 50% within the SJMO service area.
4. Improved access to breastfeeding support for 10% of new mothers in the SJMO service area.

¹⁰ https://www.mdch.state.mi.us/osr/InDxMain/Infsum05.asp

CHNA Implementation Strategy
**PLAN TO EVALUATE THE IMPACT:**
- SDoH screening tool volumes will include 100% of patients who participate at the women's and children's center. This will demonstrate a lead measure of screening that shows a reduction in barriers to care.
- Establish baseline data for WIC and OLSHA referral rates and increase by 10% annually.
- Review annual program reports for Primary Care & OB visits and implement intervention through referral to CHW resources where a missed visit for care occurred. This would increase the connection to resources that can remove barriers to prenatal care.

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Faith Community nurse and Community Health Worker staff time for programming and participation in collaborative workgroups, boards.
- Funding for programs, community collaborations, and organizations who have demonstrated a need for assistance in addressing the priority health needs.
- Programs already in existence that address priority health needs.

**COLLABORATIVE PARTNERS:**
1. Oakland County Fetal Infant Mortality Committee
2. Oakland County Health Department
3. Woman Infant Child (WIC)
4. Mercy Women’s Health Clinic
5. Mercy Medicine
6. Oakland Livingston Human Services Agency

**Adoption of Implementation Strategy**

On Monday, November 12th, the Board of Trustees for SJMO, met to discuss the 2019-2021 Implementation Strategy for addressing the community health needs identified in the June 2018 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

\[\text{Shannon D. Striebich}
\text{President, St. Joseph Mercy Oakland}\]

\[11/14/2018\]

Date

CHNA Implementation Strategy 10