Community Health Needs Assessment
September 2016
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Summary
In 2016, a Community Health Needs Assessment (CHNA) was conducted for the 159,875 residents of St. Clair County and the 41,475 residents of Sanilac County and was completed by McLaren Port Huron. A region-wide collaborative effort from various health and human service agencies contributed information and data to this assessment. Results from this collaboration are anticipated to be released in early 2017 and preliminary priorities are included in this summary.

About McLaren Port Huron
McLaren Port Huron is a 186-bed not-for-profit community hospital that provides a full spectrum of inpatient and outpatient health care services to residents in St. Clair and Sanilac counties including specialized centers accredited or certified for breast health services, orthopedics, stroke care, bariatric surgery, wound healing, cancer care, inpatient diabetes care and sleep medicine. Committed to making a positive difference in the health of our communities since 1882, McLaren Port Huron has been recognized repeatedly for clinical excellence and patient safety by nationally renowned organizations known for their measurements of hospitals and health care systems.

Awards, Accreditations and Certifications:

- Aetna Institute of Quality - Bariatric Surgery Facility for treating individuals living with morbid or extreme obesity
- American Academy of Sleep Medicine (AASM) as a Sleep Center
- American Association of Blood Banks (AABB)
- American College of Radiology (ACR) in the following modalities: Breast Ultrasound and Ultrasound Guided Breast Biopsy, Breast MRI, CT Scanning, MRI, Mammography, Nuclear Medicine, Ultrasound and Stereotactic Breast Biopsy
- American College of Surgeons Commission on Cancer®
- American Heart Association/American Stroke Association’s Get With The Guidelines®-Stroke Silver Quality Achievement Award with Target: StrokeSM Honor Roll
- American Society for Metabolic & Bariatric Surgery Bariatric Surgery Center of Excellence (ASMBS BSCOE)
- Breast Imaging Center of Excellence as designated by the American College of Radiology (ACR)
- Blue Cross & Blue Shield Blue Distinction Center for Maternity Care
- Blue Cross & Blue Shield Blue Distinction Center for Hip & Knee Replacement
- College of American Pathologists (CAP)
- Consumer and Industry Services for Michigan (CIS)
- Healthcare Facilities Accreditation Program (HFAP)
- Joint Commission (fully accredited)
• Joint Commission certification as a Top Performer on Key Quality Measures in heart attack, heart failure, pneumonia and surgical care
• Joint Commission certification as an Advanced Primary Stroke Center
• Joint Commission Disease-Specific Care certification in Advanced Diabetes Inpatient Care
• Joint Commission Disease-Specific Care certification for Wound Care through Healogics
• Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) of the American College of Surgeons (ACS)
• MPRO Governor's Award of Excellence - Outstanding Achievement in Reducing Health Care-Associated Infections in the Acute Care Hospital Setting
• Occupational Health and Safety Administration (OSHA)
• State of Michigan Newborn Screening Outstanding Achievement Award
• State of Michigan Department of Public Health certified mammography inspection
• U.S. Department of Health and Human Services certified mammography facility

I. Community Served by McLaren Port Huron

For the purpose of this assessment, community is defined as primary and secondary services areas, including St. Clair and Sanilac counties. The target population of the assessment reflects an overall representation of the communities served by McLaren Port Huron.

McLaren Port Huron is located in north-east St. Clair County. Market share analysis indicates the largest area surrounding Port Huron and heading west and north into Sanilac County. Data on population, age, race and poverty levels provided additional information about our service area and the people we serve.
### Total Population

<table>
<thead>
<tr>
<th></th>
<th>St. Clair County</th>
<th>Sanilac County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population Estimates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(July 1, 2015)</td>
<td>159,875</td>
<td>41,475</td>
</tr>
<tr>
<td>Census</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(April 1, 2010)</td>
<td>163,040</td>
<td>43,114</td>
</tr>
<tr>
<td>Change</td>
<td>-3,165</td>
<td>-1,639</td>
</tr>
</tbody>
</table>

*Source: www.census.gov*

### Age in Years (2013) %

<table>
<thead>
<tr>
<th></th>
<th>St. Clair County</th>
<th>Sanilac County</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Male</td>
</tr>
<tr>
<td>All Ages</td>
<td>160,183</td>
<td>79,374</td>
</tr>
<tr>
<td>Under 1</td>
<td>1,552</td>
<td>797</td>
</tr>
<tr>
<td>1-4</td>
<td>6,778</td>
<td>3,562</td>
</tr>
<tr>
<td>5-14</td>
<td>20,539</td>
<td>10,501</td>
</tr>
<tr>
<td>15-24</td>
<td>20,183</td>
<td>10,438</td>
</tr>
<tr>
<td>25-34</td>
<td>16,497</td>
<td>8,263</td>
</tr>
<tr>
<td>35-44</td>
<td>19,559</td>
<td>9,634</td>
</tr>
<tr>
<td>45-54</td>
<td>25,721</td>
<td>12,908</td>
</tr>
<tr>
<td>55-64</td>
<td>23,499</td>
<td>11,622</td>
</tr>
<tr>
<td>65-74</td>
<td>14,853</td>
<td>7,156</td>
</tr>
<tr>
<td>75-84</td>
<td>7,568</td>
<td>3,360</td>
</tr>
<tr>
<td>85 &amp; over</td>
<td>3,434</td>
<td>1,133</td>
</tr>
</tbody>
</table>

*Source: www.michigan.gov*

### Race and Hispanic Origin (July 2015) %

<table>
<thead>
<tr>
<th></th>
<th>St. Clair County</th>
<th>Sanilac County</th>
</tr>
</thead>
<tbody>
<tr>
<td>White alone</td>
<td>94.2%</td>
<td>96.6%</td>
</tr>
<tr>
<td>Black or African American alone</td>
<td>2.6%</td>
<td>0.3%</td>
</tr>
<tr>
<td>American Indian and Alaska Native alone</td>
<td>0.5%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Asian alone</td>
<td>0.6%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>2.0%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>3.2%</td>
<td>3.3%</td>
</tr>
<tr>
<td>White alone, not Hispanic or Latino</td>
<td>91.4%</td>
<td>96.7%</td>
</tr>
</tbody>
</table>

*Source: www.census.gov*

### Income and Poverty (2010-2014 in 2014 Dollars)

<table>
<thead>
<tr>
<th></th>
<th>St. Clair County</th>
<th>Sanilac County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median household income</td>
<td>$48,703</td>
<td>$41,578</td>
</tr>
<tr>
<td>Persons in poverty</td>
<td>13.8%</td>
<td>13.8%</td>
</tr>
</tbody>
</table>

*Source: www.census.gov*
II. **Community Health Needs Assessment Process**

McLaren Port Huron participated in a region-wide effort with various health and human services agencies across two counties in the Thumb of Michigan. The assessment included representation and input from the following partners:

- St. Clair County Health Department
- Community Mental health
- St. Clair County Economic Development
- McLaren Port Huron
- St. John River District Hospital
- Lake Huron Medical Center
- YMCA of the Blue Water Area
- Behavioral Risk Factor Survey of Residents of St. Clair County

The results from this collaboration are anticipated in early 2017. Preliminary priorities were identified and served as the focus of this Community Health Needs Assessment to identify the community needs as they exist during the assessment period. The assessment was completed in summer of 2016.

Health indicators, such as leading causes of death, disease rates, health risk behaviors, access to health care and review of county health rankings were collected and analyzed. Combining this analysis, input from the health and human service public agencies, community-based organizations, policy makers, and local residents, provided a basis to prioritize the current health of the community and how McLaren Port Huron could best impact these needs.

A hospital workgroup was employed to develop this CHNA, including: 1) quantitative data review and analysis, 2) literature review to identify State and National benchmarks and evidence-based strategies that relate to the indicators/metrics measured through the quantitative data source, and 3) qualitative data provided through community dialogue sessions with local residents. This allowed for data collection across a broad range of indicators relating to overall population health, social determinants of health including geographic/location difference in health outcomes, and the needs of disadvantaged populations including uninsured persons, low-income persons, and minority groups within St. Clair and Sanilac counties.
The following data contributed to the analysis process:

**Number of Deaths and Age-adjusted Mortality Rates for the**

**Ten Leading Causes of Death, St. Clair & Sanilac Counties, Michigan, 2014**

<table>
<thead>
<tr>
<th>Michigan Rank &amp; Cause of Death</th>
<th>Number of Deaths</th>
<th>St. Clair</th>
<th>Sanilac</th>
<th>MI</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Causes of Death</td>
<td></td>
<td>1,737</td>
<td>489</td>
<td>93,527</td>
<td>2,626,418</td>
</tr>
<tr>
<td>1. Heart Disease</td>
<td></td>
<td>501</td>
<td>153</td>
<td>24,572</td>
<td>614,348</td>
</tr>
<tr>
<td>2. Cancer</td>
<td></td>
<td>376</td>
<td>102</td>
<td>21,074</td>
<td>591,699</td>
</tr>
<tr>
<td>3. Chronic Lower Respiratory Diseases</td>
<td></td>
<td>119</td>
<td>39</td>
<td>5,327</td>
<td>147,101</td>
</tr>
<tr>
<td>4. Stroke</td>
<td></td>
<td>76</td>
<td>17</td>
<td>4,569</td>
<td>133,103</td>
</tr>
<tr>
<td>5. Unintentional Injuries</td>
<td></td>
<td>77</td>
<td>23</td>
<td>4,373</td>
<td>136,053</td>
</tr>
<tr>
<td>6. Alzheimer's Disease</td>
<td></td>
<td>50</td>
<td>13</td>
<td>3,339</td>
<td>93,541</td>
</tr>
<tr>
<td>7. Diabetes Mellitus</td>
<td></td>
<td>83</td>
<td>19</td>
<td>2,838</td>
<td>76,488</td>
</tr>
<tr>
<td>8. Pneumonia/Influenza</td>
<td></td>
<td>38</td>
<td>10</td>
<td>1,866</td>
<td>55,227</td>
</tr>
<tr>
<td>9. Kidney Disease</td>
<td></td>
<td>24</td>
<td>10</td>
<td>1,844</td>
<td>48,146</td>
</tr>
<tr>
<td>10. Intentional Self-harm (Suicide)</td>
<td></td>
<td>23</td>
<td>4</td>
<td>1,344</td>
<td>42,773</td>
</tr>
</tbody>
</table>

**Note:** Rates are per 100,000 population. The causes of death are listed in order of the 10 leading causes of death for Michigan residents in 2014.

*Source: [http://www.mdch.state.mi.us](http://www.mdch.state.mi.us)*
### HEALTH BEHAVIORS

<table>
<thead>
<tr>
<th></th>
<th>ST. CLAIR COUNTY</th>
<th>SANILAC COUNTY</th>
<th>TOP U.S. PERFORMERS</th>
<th>MICHIGAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult smoking</td>
<td>17%</td>
<td>18%</td>
<td>14%</td>
<td>21%</td>
</tr>
<tr>
<td>Adult obesity</td>
<td>32%</td>
<td>34%</td>
<td>25%</td>
<td>31%</td>
</tr>
<tr>
<td>Physical inactivity</td>
<td>24%</td>
<td>22%</td>
<td>20%</td>
<td>23%</td>
</tr>
<tr>
<td>Access to exercise opportunities</td>
<td>68%</td>
<td>13%</td>
<td>91%</td>
<td>84%</td>
</tr>
<tr>
<td>Excessive drinking</td>
<td>19%</td>
<td>20%</td>
<td>12%</td>
<td>20%</td>
</tr>
<tr>
<td>Drug overdose deaths</td>
<td>23</td>
<td>14%</td>
<td>8%</td>
<td>16%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>12%</td>
<td>15%</td>
<td>11%</td>
<td>13%</td>
</tr>
<tr>
<td>Primary care physicians</td>
<td>1,980:1</td>
<td>3,490:1</td>
<td>1,040:1</td>
<td>1,240:1</td>
</tr>
</tbody>
</table>

Source: [www.countyhealthrankings.org](http://www.countyhealthrankings.org)

### Leading Hospital Discharges in 2014

<table>
<thead>
<tr>
<th></th>
<th>St. Clair County Discharges</th>
<th>Sanilac County Discharges</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Hospitalizations</td>
<td>20,796</td>
<td>5,606</td>
</tr>
<tr>
<td>Heart Diseases</td>
<td>2,129</td>
<td>733</td>
</tr>
<tr>
<td>Newborns and Neonates (Less than 7 days)</td>
<td>1,622</td>
<td>407</td>
</tr>
<tr>
<td>Females with Deliveries</td>
<td>1,522</td>
<td>383</td>
</tr>
<tr>
<td>Injury and Poisoning</td>
<td>1,605</td>
<td>474</td>
</tr>
<tr>
<td>Septicemia</td>
<td>767</td>
<td>193</td>
</tr>
<tr>
<td>Psychoses</td>
<td>884</td>
<td>164</td>
</tr>
<tr>
<td>Osteoarthritis and Allied Disorders</td>
<td>908</td>
<td>280</td>
</tr>
<tr>
<td>Cancer (Malignant Neoplasms)</td>
<td>676</td>
<td>183</td>
</tr>
<tr>
<td>Cerebrovascular Diseases</td>
<td>676</td>
<td>163</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>598</td>
<td>223</td>
</tr>
</tbody>
</table>

Source: [http://www.mdch.state.mi.us](http://www.mdch.state.mi.us)

### Top Cancer Sites at McLaren Port Huron in 2014:

1. **Breast**
2. **Lung**
3. **Colon**
4. **Prostate**
5. **Lymphoma**
III. Community Input

In addition to community partners listed below, community input was sought from health providers, community groups, and patients who participated in various health screenings and seminars offered through McLaren Port Huron in 2016.

Methods used to collect data included community conversation meetings, regional meetings, participant surveys, and health care provider feedback.

Multidisciplinary Series Discussion facilitated by the St. Clair County Health Department with representation from:
- St. Clair County Health Department
- Community Mental health
- St. Clair County Economic Development
- McLaren Port Huron
- St. John River District Hospital
- Lake Huron Medical Center
- YMCA of the Blue Water Area
- Behavioral Risk Factor Survey of Residents of St. Clair County

This multidisciplinary workgroup identified the following Preliminary Priorities for 2016:
- Lack of physical activity/sedentary lifestyle
- Obesity and poor diet
- Heavy/binge drinking
- Tobacco use/second-hand smoke exposure
- Prescription drug abuse
- Lack of access to care:
  - Primary
  - Mental
  - Oral
- Cancer screening, detection and early treatment
- Hypertension
- High Blood Cholesterol
- Arthritis (mobility/activity)
- Flu Shots - Deficiency
- HIV Tests – Deficiency
- Quality of neighborhoods

Additionally, McLaren Port Huron held Public Health Meetings relating to the CHNA:
- Cancer Committee
- Community Advisory Board
- Community Education & Outreach Committee
• June 2016, Lunch with the Doctor: Dr. Mercatante, St. Clair County Health Medical Officer, discussed prescription drug abuse

Input addressing the medically underserved, low-income and minority populations are addressed within the St. Clair County Community Service Coordinating Body Meetings. Agencies that serve these populations provide input and updates throughout the year. Highlights of these meetings include:

- July 2016, Sheriff Donnellon spoke about the Drug Task Force and the high incidence of overdose and heroin use
- May 2016, Elder Abuse Prevention, Prescription Drug Abuse Workgroup Update, Veterans Task Force—to coordinate and collaborate on Veteran issues
- March 2016, Homelessness (Point in Time survey )Community Mental Health Updates—implications for behavioral health with State funding cuts

Additionally, McLaren Port Huron is represented and participates in community health work groups relating to prescription and drug abuse, smoking cessation, Senior Outreach Services, Consortium on Aging, Child Abuse and Neglect Council, and other community based organizations such as Rotary Clubs, etc.

Comments for future programs from local citizens at public health hearings include:

- Non-pharmacologic pain management
- Stroke
- Kidney disease
- Preventative health
- Holistic medicine and herbal supplements
- Cancer causes and treatments

Continuous Input:
Members of the community are encouraged to offer suggestions for future health programs, screenings and seminars. Visit www.mclaren.org/phcontact to send comments to McLaren Port Huron community education and outreach personnel.

**IV. Prioritized Significant Community Health Needs**

The CHNA team at McLaren Port Huron evaluated data and input sources collected to prioritize the major issues impacting the community we serve. Criteria included the number of persons affected by the various factors analyzed, the seriousness of the issues, whether the health needs particularly affected persons living in poverty or reflected other disparities, and availability of community resources to address the needs. This process identified the following priority issues for the community. Strategic goals, community input and a review of the existing community benefit activities also guided this plan.

Five significant health needs were identified:
1. Poor management of chronic health conditions
2. High incidence of unhealthy behaviors
3. High incidence of injury/trauma
4. Lack of access to primary and specialty providers
5. Barriers to accessing accurate, evidence-based health information

V. Available Community Resources

Resources available to address the significant health needs as identified through CHNA include:

KEY COMMUNITY HEALTH ASSETS
- McLaren Port Huron
- McLaren Port Huron Foundation
- McLaren Health Care & Subsidiaries
- McLaren Home Care and Hospice
- Primary Care and Specialist Physicians
- Lake Huron Medical Center
- St. John River District Hospital
- St. Clair County Health Department
- St. Clair County Community Mental Health
- YMCA of the Blue Water Area
- Community organizations such as the United Way
- Faith-based Community
- Local Area School Districts

OTHER RESOURCES
- McLaren Port Huron Today’s Health television programming series
- Partnerships with state and national organizations: American Diabetes Association, American Heart Association, American Cancer Society, Centers for Disease Control, Michigan Department of Community Health, US Department of Health and Human Services
VI. EVALUATION

The 2015 McLaren Port Huron CHNA Action Plan included:

- Improve cancer prevention, detection and treatment.
- Improve patient navigation and survivorship care for cancer patients.
- Improve obesity rates and physical activity.
- Improve access to primary care physicians.
- Decrease preventable hospital admissions.
- Improve community access to personal health information.
- Provide community education and outreach relating to health maintenance and improvement, women and children's health, safety, diabetic, joint, heart, stroke and trauma care.

McLaren Port Huron took several steps to impact cancer prevention, detection and treatment in 2015-2016. A new cancer center was constructed and opened in July 2016, offering new state of the art radiation treatment. The cancer program has also increased access to clinical trials and genetic counseling. Screenings were provided for skin cancer, colorectal cancer and breast cancer. The patient navigation process was completed as well as the institution of the survivorship plan.

Obesity rates were reportedly worse in 2016 with 32% compared to 30% in 2015. Similarly, physical inactivity also revealed an increase of inactivity from 22% in 2015 to 24% in 2016. McLaren Port Huron continues to provide education and resources aimed to promote physical activity and proper nutrition. These include programs offered through Diabetes Education, Women's Wellness programs and 55Plus. An example would include the creation of the Savvy Senior Series, offered in July 2016 that promoted physical activity to seniors within the community.

Source: www.countyhealthrankings.org

Access to primary care physicians saw a slight increase from 1,983:1 in 2015 to 1,980:1 in 2016, according to www.countyhealthrankings.org. We continue efforts in recruiting physicians to our community.

McLaren Port Huron continues to assess preventable readmission by focusing on patient education, partnering with home care and extended care facilities, and offering supplemental education programs and support groups to improve self care of chronic health conditions.

With the implementation of a patient health record, McLaren Port Huron has been able to provide access to health information. As of October 1, 2015, there were 2,002 previous inpatient consumers utilizing patient portal to access health records. In the first 3 quarters of FY’16, an additional 1,359 inpatients are accessing their records through our portal.
McLaren Port Huron continues to offer several services and programs related to community health education, self help, support groups, and health screenings. The Fiscal Year 2015 Community Benefit report indicates 276,674 local citizens participated in these programs. A new program that was initiated based on the CHNA was a heart education program and the creation of a cardiac support group.

The FY’ 2015 CHNA was made available to the public on the hospital website as well as in print if requested. No public comments were submitted via the website or in person. The CHNA was presented to the Women’s Advisory Board in May 2016, and the comments were all positive. No additional comments or suggestions were presented.

VI. Approval
The McLaren Port Huron Board of Trustees reviewed and approved the Community Health Needs Assessment and the Implementation Strategy for 2016-2019 at the Sept. 21, 2016 Board of Trustees Meeting.

McLaren Port Huron Board of Trustees Approval:

______________________________  9/21/16
Jennifer Montgomery, President & CEO  Date

**Implementation Strategy**

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<td>16</td>
</tr>
<tr>
<td>Significant Health Needs to be Addressed</td>
<td>17-18</td>
</tr>
<tr>
<td>• Chronic Disease Management</td>
<td></td>
</tr>
<tr>
<td>• Healthy Behaviors</td>
<td></td>
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<tr>
<td>• Health Prevention and Maintenance</td>
<td></td>
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<tr>
<td>• Access to Care</td>
<td></td>
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<tr>
<td>• Health Information</td>
<td></td>
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<tr>
<td>Unaddressed Needs</td>
<td>18</td>
</tr>
<tr>
<td>Adoption</td>
<td>19</td>
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</tbody>
</table>
This Implementation Strategy report summarizes how McLaren Port Huron will develop, conduct, and sustain community benefit programs that 1) address prioritized health needs and 2) respond to other identified community health needs. Execution will begin in FYs 2016 through 2019.

I. Organization Mission
McLaren Health Care, through its subsidiaries will be the best value in health care as defined by quality outcomes and cost.

McLaren Port Huron is committed to caring for its patients and community members by providing free health screenings, community education classes, programs and outreach events to thousands of underserved individuals annually in St. Clair and Sanilac counties.

II. Community Served
McLaren Port Huron is located in north-east St. Clair County. Market share analysis indicates the largest area surrounding Port Huron and heading west and north into Sanilac County.

For the purpose of this Implementation Strategy, community is defined as primary and secondary services areas, including St. Clair and Sanilac counties. The target population of the assessment reflects an overall representation of the communities served by McLaren Port Huron.
### Total Population

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<tr>
<td>Change</td>
<td>-3,165</td>
<td>-1,639</td>
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</tbody>
</table>

*Source: www.census.gov*

#### III. Implementation Strategy Process

A hospital workgroup was employed to evaluate the CHNA and develop this Implementation Strategy. This process included: 1) quantitative data review and analysis, 2) literature review to identify State and National benchmarks and evidence-based strategies that relate to the indicators/metrics measured through the quantitative data source, and 3) qualitative data provided through community dialogue sessions with local residents.

This allowed for data collection across a broad range of indicators relating to overall population health, social determinants of health including geographic/location difference in health outcomes, and the needs of disadvantaged populations including uninsured persons, low-income persons, and minority groups within St. Clair and Sanilac Counties.

The McLaren Port Huron community benefit team also reviewed its existing community benefit activities to assess whether these services were providing value consistent with the needs of the community and its residents. Specifically, these activities considered key health factors and outcomes resultant from associated demographic, social, and economic impacts, the physical environment, health care access and resource coordination, and health behavior trends.

The McLaren Port Huron Board of Trustees reviewed and approved the Implementation Strategy at its September Board of Trustees Meeting on Sept. 21, 2016.

#### IV. Prioritized List of Significant Health Needs Identified in CHNA

McLaren Port Huron utilized key findings in the Community Health Needs Assessment to identify and prioritize an Implementation Strategy.

The CHNA team at McLaren Port Huron evaluated data and input sources collected to prioritize the major issues impacting the community we serve. Criteria included the number of persons affected by the various factors analyzed, the seriousness of the issues, whether the health needs particularly affected persons living in poverty or reflected other disparities, and availability of community resources to address the needs. This process identified the following priority issues for the community. Strategic goals, community input and a review of the existing community benefit activities also guided this plan.
Five significant health needs were identified:
   a. Poor management of chronic health conditions
   b. High incidence of unhealthy behaviors
   c. High incidence of injury/trauma
   d. Lack of access to primary and specialty providers
   e. Barriers to accessing accurate, evidence-based health information

McLaren Port Huron’s review of current community benefit programs found that the hospital is meeting existing community needs through provision of charity care; financial and in-kind contributions; community building activities; and a multitude of community education programs. These activities were determined to be additional priorities for our hospital’s community benefit plan.

V. Significant Health Needs to be Addressed

McLaren Port Huron will work in partnership with public and community resources to address these needs. The overall goal of the following action plan is to improve the overall health factors and behaviors of St. Clair and Sanilac County, leading to improvements in health behaviors and outcomes.

**ACTION PLAN #1: CHRONIC DISEASE MANAGEMENT**
Goal: Promote health and reduce chronic disease through education programs and screening programs to prevent, detect and manage chronic disease.

**IMPLEMENTATION STRATEGIES:**
- Provide evidence based screenings for early identification
- Offer chronic disease management programs and support groups including diabetes, cancer, stroke, bariatric, heart disease, Alzheimer’s disease and Parkinson’s disease
- Expand services through the cancer center and provide access to clinical trials
- Maintain standards and certifications for Centers of Excellence
- Decrease preventable hospital admissions through education and partnerships with local home care agencies

**ACTION PLAN #2: HEALTHY BEHAVIORS**
GOAL: Improve the health of the community by addressing the unhealthy behaviors to protect the health, safety, and quality of life for the community.

**IMPLEMENTATION STRATEGIES:**
- Continue to offer smoking cessation programs
- Continue to offer bariatric, nutrition services and physical activity programs
- Outpatient counseling
- Collaborate with community partners to promote community awareness and education to reduce alcohol, tobacco and non-medical prescription drug use/abuse
ACTION PLAN #3: HEALTH PREVENTION & MAINTENANCE
GOAL: Continue to expand trauma program to reduce the complications and improve management of trauma patients.

IMPLEMENTATION STRATEGIES:
• Provide education programs on fall prevention and awareness
• Provide Matter of Balance education programs
• Continue to assist with helmet safety education and helmet distribution

ACTION PLAN #4: ACCESS TO CARE
GOAL: Improve access to comprehensive quality health care services.

IMPLEMENTATION STRATEGIES:
• Increase the number of primary and specialty care providers in targeted communities
• Continue to collaborate with hospitals, health department, and other regional stakeholders to improve health outcomes
• Collaborate with mental health, primary care, and other community stakeholders to address behavioral health including training, intervention and treatment

ACTION PLAN #5: HEALTH INFORMATION
GOAL: Improve access to health information.

IMPLEMENTATION STRATEGIES:
• Increase access to health information through the patient health record
• Offer counseling to obtain health insurance through the exchange
• Today’s Health television programming series
• In Good Health community newsletter publication
• Continue to evaluate current trends and topics relevant to our community and provide educational programs to address these issues

VI. Unaddressed Significant Health Needs and Rationale
The St. Clair County Health Department 2016 Preliminary Priorities list included health needs that will not be addressed by the McLaren Port Huron CHNA and Implementation Strategy report. These include:
• Flu Shots – Deficiency
• HIV Tests – Deficiency
• Quality of neighborhoods

Flu shots are offered to our inpatient population and throughout the community. HIV testing is available through the Health Department. While the quality of neighborhoods is a very important part of our community profile, improvement is beyond the scope of the hospital services.

Through review and analysis of noted partners engaged throughout the Community Health Needs Assessment process, it is agreed that all other health needs identified are being
addressed through collaborative community efforts and all hospital facilities in St. Clair County.

VII. Next Steps for Action Items

For each of the action area listed above, McLaren Port Huron will work with its area partners to:

- Identify any additional related activities being conducted by others in the community that could be built upon to increase strategic alignment.
- Develop and monitor measurable goals and objectives so that the effectiveness of these collaborative efforts can be measured.
- Build support and participate in community engagement effort for the noted initiatives within the community.
- Developed detailed work plans.

This 2016 implementation plan will be monitored to track successful outcomes and areas for additional improvement. McLaren Port Huron staff will work with regional partners, when appropriate, to secure funding for initiatives that improve health status. The plan and program methodology will be monitored and updated annually with a progress report.

VIII. Adoption

The Implementation Strategy was adopted by the McLaren Port Huron Board of Trustees on Sept. 21, 2016.