Community Health Needs Assessment – 2016 Beaumont Hospital, Dearborn Implementation Strategy 2018 Update





Building healthier lives and communities.

Beaumont

COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION STRATEGY

The Patient Protection and Affordable Care Act (the PPACA) requires all tax-exempt hospitals to assess the health needs of their community through a community health needs assessment (CHNA) once every three years. A CHNA is a written document developed for a hospital facility that defines the community served by the organization, explains the process used to conduct the assessment and identifies the salient health needs of the community. In addition, the CHNA must include a description of the process and criteria used in prioritizing the identified significant health needs, and an evaluation of the implementation strategies adopted as part of the most recently conducted (2013) assessment. A CHNA is considered conducted in the taxable year that the written report of its findings, as described above, is approved by the hospital governing body and made widely available to the public. Beaumont Health completed a CHNA in the first half of 2016. The CHNA report was approved by the Beaumont Health board of directors in December 2016. It is available to the public at no cost for download and comment on our website at beaumont.org/chna.

In addition to identifying and prioritizing significant community health needs through the CHNA process, the PPACA requires creating and adopting an implementation strategy. An implementation strategy is a written plan addressing each of the significant community health needs identified through the CHNA. The implementation strategy must include a list of the significant health needs the hospital plans to address and the rationale for not addressing the other significant health needs identified. The implementation strategy (a.k.a. implementation plan) is considered implemented on the date it is approved by the hospital's governing body. The CHNA implementation strategy is filed along with the organization's IRS Form 990, Schedule H and must be updated annually with progress notes.

The Beaumont Health community has been identified as Macomb, Oakland and Wayne counties. The CHNA process identified significant

health needs for this community (see box to right). Significant health needs were identified as those where the qualitative data (interview and focus group feedback) and quantitative data (health indicators) converged. Beaumont Health prioritized these significant community healthcare needs based on the following:

- Importance of the problem to the community ensures the priorities chosen reflect the community experience.
- Alignment with the health system's strengths is important to ensure we leverage our ability to make an impact.
- Resources criteria acknowledges that we need to work within the capacity of our organization's budget, partnerships, infrastructure, and available grant funding.
- To be sure we reach the most people, the criteria of magnitude considers the number of people the problem affects either actually or potentially.

High Data and Qualitative

- Cardiovascular Conditions (e.g. heart disease, hypertension, stroke)
- Diabetes (e.g. prevalence, diabetic monitoring
- Respiratory Conditions (e.g. COPD, asthma, air quality)
- Mental and Behavioral Health (e.g. diagnosis, suicide, providers)
- Health Care Access
 (e.g. insurance coverage, providers, cost, preventable admissions, transportation, denta care)
- Obesity
- Prevention
 – Screenings and Vaccinations
- Substance Abuse
 (e.g. drug overdose, alcohol abuse, drug use, tobacco)



COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION STRATEGY

 In order to address the health disparities that exist, we consider the impact of the problem on vulnerable populations.

Through the prioritization process, three significant needs were selected to be addressed via the Beaumont Health CHNA Implementation Strategy:

Obesity

Cardiovascular Disease

Diabetes

All other significant health needs were not chosen for a combination of the following reasons:

- The need was not well-aligned with organizational strengths.
- There are not enough existing organizational resources to adequately address the need.
- Implementation efforts would not impact as many community residents (magnitude) as those that were chosen.
- The chosen needs more significantly impact vulnerable populations.

While each of the significant health needs identified through the community health needs assessment process is important, and many are currently addressed by existing programs and initiatives of Beaumont Health or a Beaumont Health partner organization, allocating significant resources to the three priority needs above prevents the inclusion of all health needs in the Beaumont Health CHNA implementation strategy.

Key Approaches of the Implementation Strategy

Beaumont Health is committed to engaging in transformative relationships with local communities to address the social determinants of health and

to increase access to high quality-health care. We recognize good health extends beyond the doctor's office and hospital. Our work in the community takes a prevention, evidence-based approach with key elements that include:

- Building and Sustaining Multi-Sector Community Coalitions - partnering with leaders of local and state government, public health, community leaders, schools, community-based nonprofits, faith-based organizations, and community residents to achieve measurable, sustainable improvements by using a "collective impact" framework to improve the health and well-being of the diverse communities we serve. These multi-sector coalitions engage in mutually reinforcing activities to build and strengthen partnerships that address the social determinants of health and work towards solutions.
- Addressing social determinants of health and improving access to care for vulnerable populations.
- Working with community partners to supplement CHNA initiatives through grants, programs and policies.
- Partnering with FQHCs (Federally Qualified Health Centers) and free clinics to provide support to the underinsured and uninsured within the economically disadvantaged and medically underserved populations of Beaumont Health.
- Partnering with public health departments to align efforts, resources and programs.
- Consideration of sponsorships to organizations for events or activities that address the key health priorities of obesity, cardiovascular disease and diabetes.

The implementation strategy for the chosen health needs of obesity, cardiovascular disease and diabetes are outlined in the following pages.

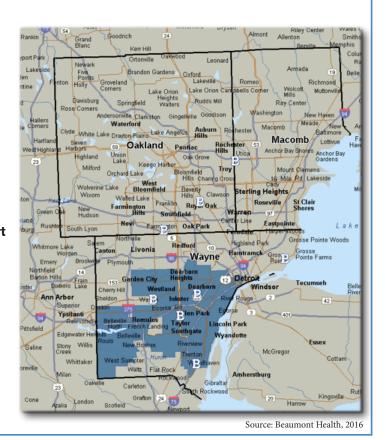
Over the next three years each Beaumont Health hospital will execute its implementation strategies, which will be evaluated and updated on an annual basis.



Beaumont Hospital, Dearborn (formerly Oakwood Hospital - Dearborn) has proudly served residents across southeastern Michigan since 1953. It became part of Beaumont Health in September 2014. With 632 beds, Beaumont Hospital, Dearborn is a major teaching and research hospital and home to three medical residency programs in partnership with the Wayne State University School of Medicine. Beaumont, Dearborn is verified as a Level II trauma center and has been recognized for clinical excellence and innovation in the fields of orthopedics, neurosciences (Stroke Center of Excellence), women's health, heart and vascular care, and cancer care.

Community served

The Beaumont Hospital, Dearborn community (Beaumont, Dearborn) is defined as the contiguous ZIP codes that comprise 80 percent of inpatient discharges. To the right is a map that highlights the community served (in blue) as a portion of the overall Beaumont community. A table which lists the ZIP codes included in the community definition can be found in **Appendix B** of the **CHNA Full Report** located at **beaumont.org/chna**

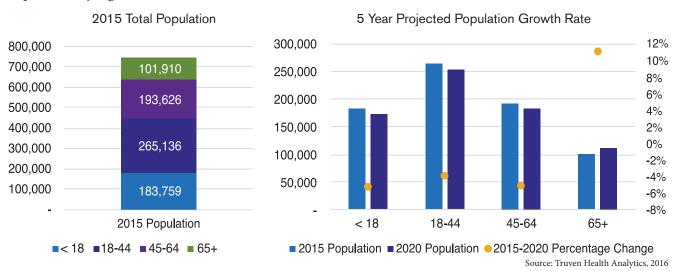


Demographic and socio-economic summary

The population for Beaumont, Dearborn is expected to decrease by 2 percent (17,955 lives) over the next five years. The decrease will primarily impact ZIP codes around Detroit. The age composition of Dearborn is representative of that in the state of Michigan and the country as a whole. The cohort aged 65 years and older makes up the smallest segment of the population (only 14 percent), however, it is expected to experience the most growth over the next five years. This age group is expected to increase 11 percent (11,389 lives) while the other age groups are expected to decrease 4 to 5 percent. Due to the community's aging population, need for health care services in the community will likely increase in the upcoming years.



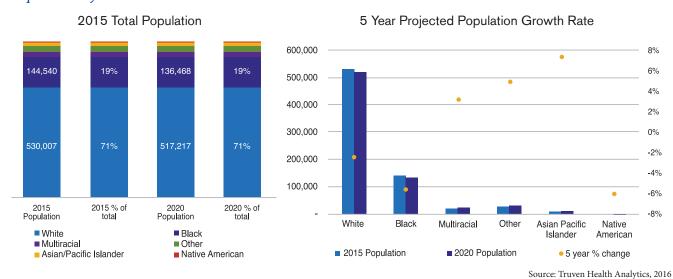
Population by Age Cohort



The community is primarily white (71 percent) and black (19 percent). Despite its apparent lack of diversity from a racial perspective, the city of Dearborn, has the highest proportion of Arab Americans in the country. ²⁴ Persons of Arab ancestry make up 8.5 percent of the Beaumont, Dearborn community population, or 61,572 lives. The Arab population is most highly concentrated in Dearborn (ZIP codes 48126 and 48120) and Dearborn Heights (ZIP code 48127), with more than 76 percent of the Arab population residing in these three ZIP codes.

The community is expected to become increasingly diverse over the next five years. The white population is expected to decrease by 2 percent (12,790 lives), and the black population will decrease by 6 percent (8,072 lives). The Asian/Pacific Islander population will experience the largest increase (7 percent), while the other and multiracial communities will increase by 5 percent and 3 percent respectively. The graphs below display the community's population breakdown by race and the projected five-year change in racial composition.

Population by Race

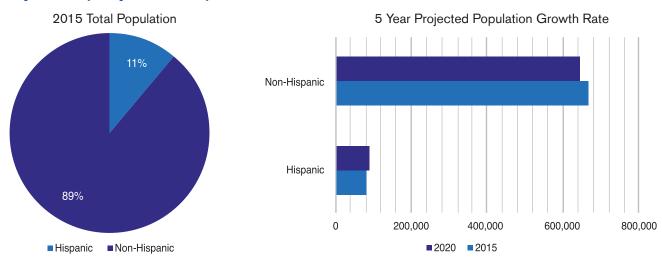


²⁴U.S. Census Bureau, 2010

Beaumont

The community is largely non-Hispanic (89 percent), but has a proportionately larger Hispanic population than Michigan. Hispanics currently comprise 11 percent of the Beaumont, Dearborn population and are expected to grow by 5 percent (4,271 lives) over the next five years.

Population by Hispanic Ethnicity



Source: Truven Health Analytics, 2016

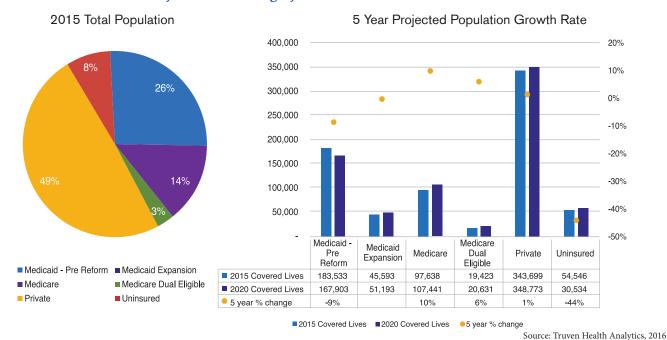
The majority of the Beaumont, Dearborn community population is privately insured. Forty-six percent of Dearborn has private insurance; this includes people who are purchasing health insurance through the insurance exchange marketplace (5 percent), those who are buying directly from an insurance provider (3 percent), and those who receive insurance through an employer (38 percent). Approximately one third of the population has Medicaid (31 percent), 13 percent has Medicare, and 6 percent are Medicare and Medicaid dual eligible.

The Medicare population will experience the greatest growth and is expected to increase 10 percent by 2020. This is primarily fueled by a growing 65 and older population in the community. The private insurance category is projected to increase at a slower rate. The number of people purchasing insurance via PPACA health insurance exchanges is projected to increase by 82 percent, driving most of the growth. Overall, the Medicaid population will decrease by 4 percent; however, the number of people receiving Medicaid coverage due to the PPACA Medicaid expansion will increase by 12 percent. This change is projected to impact the uninsured population as well. In this community currently, 7 percent of the population is uninsured;

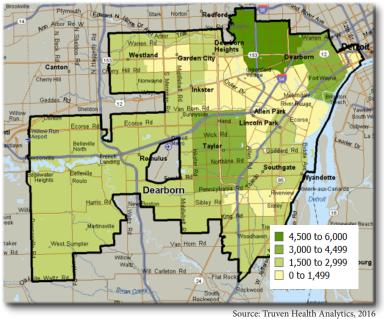
however, the proportion of the population that is uninsured is expected to decrease dramatically over the next five years (-44 percent).



Estimated Covered Lives by Insurance Category

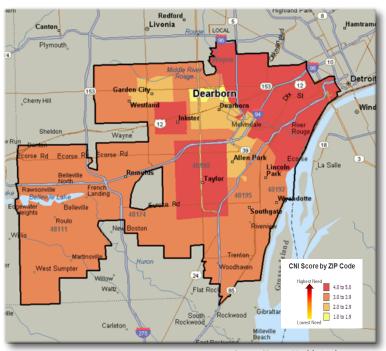


2015 Estimated Uninsured Lives by ZIP Code



The following ZIP codes comprise the largest number of individuals that are uninsured: 48228 (Detroit) and 48126 (Dearborn).

2015 Community Need Index by ZIP Code



The Beaumont community has an overall CNI score of 3.0. The Beaumont, Dearborn community's CNI is 3.7, the highest CNI score of the eight hospital communities. The areas with the highest anticipated need include River Rouge, Ecorse, Taylor, Inkster, and southwest Detroit.

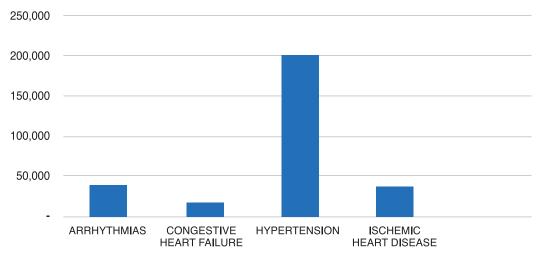
Source: Truven Health Analytics, 2016

Truven Health community data

Truven Health Analytics supplemented the publically available data with estimates of localized disease prevalence of heart disease and cancer as well as emergency department visit estimates.

Truven Health's heart disease estimates identified hypertension as the most prevalent heart disease diagnosis in the Beaumont, Dearborn community; arrhythmias and ischemic heart disease are the next highest volumes.

2015 Estimated Heart Disease Cases

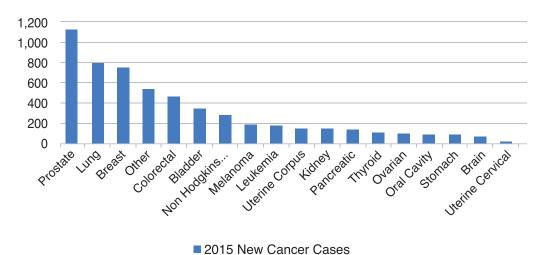


Source: Truven Health Analytics, 2016



Compared to state and national estimates, the community has a higher proportion of new breast and colorectal cancer cases. These two, followed by lung cancer, make up the three most frequently diagnosed cancers in the community estimated to occur during 2015.

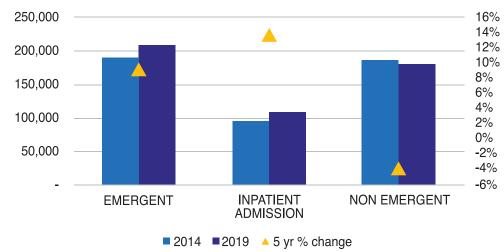
2015 Estimated New Cancer Cases



Source: Truven Health Analytics, 2016

Emergent emergency department (ED) visits are expected to increase 8 percent by 2019, while non-emergent ED visits are projected to decrease by 5 percent (6,780 ED visits). Non-emergent ED visits are lower acuity visits that present in the ED but possibly can be treated in other more appropriate, less intensive outpatient settings. Non-emergent ED visits can be an indication that there are systematic issues with access to primary care or managing chronic conditions. Detroit (ZIP code 48228) has the highest number of non-emergent ED visits and accounts for approximately 9 percent of the total non-emergent ED visits in the Dearborn area.

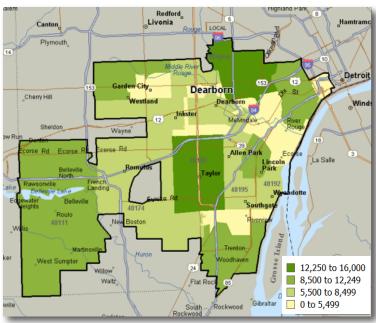
Emergent and Non-Emergent ED Visits



Source: Truven Health Analytics, 2016



$2014\ Estimated\ Non-Emergent\ Visits\ by\ ZIP\ Code$



Source: Truven Health Analytics, 2016

Community input

A summary of the focus group conducted for the Beaumont, Dearborn community can be found in **Appendix I** of the **CHNA Full Report** located at **beaumont.org/chna**

CHNA IMPLEMENTATION STRATEGY 2018 Update

Beaumont Hospital, Dearborn

OBESITY

GOAL: Decrease rate of obesity in children and adults by promoting healthy eating and active living behaviors. **STRATEGY 1:** Provide education and services that support healthy eating, active living and maintaining a healthy weight.

PROGRAM/ ACTIVITY	DESCRIPTION	ANTICIPATED IMPACT	TARGET AUDIENCE	HOW RESULTS WILL BE MEASURED	PARTNERS
Provide Cooking Matters TM programs	Six-week workshops for adults and teens and single session store tours to equip families with the knowledge and skills they need to shop for and prepare healthy meals on a limited budget. Hosted at libraries, senior centers and community organizations.	Improved nutrition practices, eating habits, healthy meal preparation and food budgeting knowledge and behaviors	economically disadvantaged populations	participation rates post-test outcome measures such as use of nutrition facts on food labels, adjusting meals to be more healthy, choosing healthy foods at restaurants participant survey	Gleaners Community Food Bank of SE Michigan
Provide CATCH Kids Club (Coordinated Approach to Child Health) to prevent childhood obesity	After-school and summer program staff are trained to provide the CATCH nutrition and physical activity program.	Improved knowledge and practices to make healthy eating and physical activity decisions	youth grades K-5	post-test outcome measures such as fruit and vegetable consumption, exercise, reading nutrition labels	Dearborn Public Schools
Healthy Dearborn coalition	Beaumont Hospital, Dearborn will provide backbone support to the Healthy Dearborn multi-sector community coalition to develop strategies in the community and at worksites for healthy eating and active living.	Collaborative partnerships to improve the health and well-being of diverse community members	community-wide	number of programs and activities implemented to promote healthy eating and active living	Healthy Dearborn coalition City of Dearborn Dearborn Public Schools
Provide the Dearborn SHINES (School Health through Integrated Nutrition & Exercise Strategies) for Healthy Kids program	A whole child approach to address rising obesity rates that includes evidence-based activities to meet student, family and school-level needs to impact healthy food choices and physical activity.	Increases in healthy food choices and physical activity	youth and families in grades K-8 in eight public schools	student questionnaires measuring outcomes such as knowledge level of healthy food choices and benefits of physical activity on health	Healthy Dearborn coalition Dearborn Public Schools Wayne State University University of Michigan-Dearborn
Develop strategies to increase access to fresh fruits and vegetables	Support the Dearborn Farmers Market, the Power of Produce program, community and school garden programs, and in-school nutrition education tied to school gardens.	Increase in fresh fruit and vegetable consumption	community-wide with focus on economically disadvantaged populations	partnership agreements number of participants	City of Dearborn Dearborn Public Schools Healthy Dearborn coalition



CHNA IMPLEMENTATION STRATEGY

2018 Update

OBESITY - continued

GOAL: Decrease rate of obesity in children and adults by promoting healthy eating and active living behaviors. **STRATEGY 1:** Provide education and services that support healthy eating, active living and maintaining a healthy weight.

PROGRAM/ ACTIVITY	DESCRIPTION	ANTICIPATED IMPACT	TARGET AUDIENCE	HOW RESULTS WILL BE MEASURED	PARTNERS
Medical outreach and prevention programs offered through Beaumont Teen Health Center, River Rouge	Measure BMI and provide nutrition counseling.	Improved nutrition practices of youth	youth ages 10-21	number of students screened in health center number of students receiving nutrition counseling	River Rouge School District
Provide education on healthy eating, fitness and weight management through the Beaumont Speakers Bureau	Education presentations to community groups.	Improved knowledge of obesity prevention and treatment options	community organizations	participation rates participant survey	

STRATEGY 2: Increase opportunities for physical activity.

Healthy Dearborn coalition	Beaumont Hospital, Dearborn will provide backbone support to the Healthy Dearborn multi-sector community coalition to improve walkability and bikeability of the community and to provide recreational programs and events including after-school physical activity programs.	Increase in physical activity of children and adults	community-wide	number of programs and activities implemented to increase physical activity participation rate in Beaumont Gets Walking programs	Healthy Dearborn coalition City of Dearborn Parks and Recreation
Provide the Dearborn SHINES (School Health through Integrated Nutrition & Exercise Strategies) for Healthy Kids program	A whole child approach to address rising obesity rates that includes enhanced physical education utilizing new equipment and resources.	Increase in physical activity of children	youth and teachers in grades K-8 in eight public schools	• number of lessons implemented	Healthy Dearborn coalition Dearborn Public Schools Wayne State University University of Michigan-Dearborn

CHNA IMPLEMENTATION STRATEGY 2018 Update

CARDIOVASCULAR DISEASE

GOAL: Decrease cardiovascular disease risk factors and prevent death from sudden cardiac arrest. **STRATEGY 1:** Provide education programs and services.

PROGRAM/ ACTIVITY	DESCRIPTION	ANTICIPATED IMPACT	TARGET AUDIENCE	HOW RESULTS WILL BE MEASURED	PARTNERS
Provide resources and referrals through the Beaumont Quit Smoking Resource Line	To address the cardiovascular disease risk factor of smoking, the Quit Smoking Resource Line provides telephonic assessment, information and referrals to connect smokers to the quit smoking resources, programs and services they need.	Increased awareness and knowledge of stop smoking methods and support services	smokers	participation rates referral rates	
Provide education on cardiovascular health through the Beaumont Speakers Bureau	Education presentations to community groups.	Improved knowledge of cardiovascular disease prevention and treatment options	community organizations	participation rates participant survey	

STRATEGY 2: Provide early detection screenings

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DIABETES

GOAL: Decrease rate of new diabetes cases and of diabetes complications.

STRATEGY 1: Provide early detection screenings, diabetes prevention programs and diabetes education services.

PROGRAM/ ACTIVITY	DESCRIPTION	ANTICIPATED IMPACT	TARGET AUDIENCE	HOW RESULTS WILL BE MEASURED	PARTNERS
Provide diabetes screenings	Screening offered at community locations to identify and counsel individuals with elevated glucose levels.	Improved self- management and follow-up care	adults	screening resultsreferrals for follow-up careparticipant survey	Community organizations
Provide Diabetes PATH (Personal Action Toward Health) workshops	Six-week chronic disease management class hosted in collaboration with libraries, senior centers and community organizations.	Improved diabetes self-management	adults and seniors with diabetes and their caregivers	 participation rates post-test outcome measures such as blood sugar testing, physical activity, confidence managing condition participant survey 	National Kidney Foundation of Michigan
Provide the National Diabetes Prevention Program	12-month lifestyle change program with group coaching hosted in collaboration with libraries, schools and community centers.	Prevention of type 2 diabetes	adults with prediabetes or at high risk of diabetes	 participation rates increase in physical activity average weight loss participant survey 	

CHNA IMPLEMENTATION STRATEGY

2018 Update

DIABETES - continued

GOAL: Decrease rate of new diabetes cases and of diabetes complications. **STRATEGY 1:** Provide early detection screenings, diabetes prevention programs and diabetes education services.

PROGRAM/ ACTIVITY	DESCRIPTION	ANTICIPATED IMPACT	TARGET AUDIENCE	HOW RESULTS WILL BE MEASURED	PARTNERS
Provide Cooking Matters™ EXTRA for Diabetes programs	Six-week workshops to equip families with the knowledge and skills they need to shop for and prepare healthy meals on a limited budget. Hosted at libraries, senior centers and community organizations.	Improved nutrition practices, eating habits, healthy meal preparation and food budgeting knowledge and behaviors	adults with diabetes or prediabetes	participation rates post-test outcome measures such as use of nutrition facts on food labels, adjusting meals to be more healthy, choosing healthy foods at restaurants participant survey	Gleaners Community Food Bank of SE Michigan
Provide the Diabetes Support Group	Monthly sessions providing support to those with diabetes and their caregivers.	Improved self- management	adults with diabetes	• participation rates	
Provide health education on diabetes through the Beaumont Speakers Bureau	Education presentations to community groups.	Improved knowledge of diabetes prevention and treatment options	community organizations	participation rates participant survey	