

# UnityPoint Health – Des Moines Implementation Plan for the Community Health Needs Assessment (CHNA)

*Adopted by UnityPoint Health-Des Moines Board of Directors April 21<sup>st</sup>, 2016*

## **BACKGROUND/OVERVIEW**

### ***Overview of Affordable Care Act requirements and Community Health Needs Assessment Process***

The Patient Protection and Affordable Care Act, signed into law in March 2010, requires nonprofit hospitals to conduct a Community Health Needs Assessment (CHNA) at least once every three years beginning in March 2012. The Iowa Department of Public Health requires local public health agencies to conduct a CHNA at least every five years.

These requirements present the opportunity for local community health leaders to join forces and identify priorities that can serve as a guide for programs, policies and investments. Working together often creates efficiencies, new partnerships and increased collaboration. Ultimately, Central Iowans benefit when data, resources and expertise are shared to attain the common goal of a healthier community.

In alignment with the Capital Crossroads Regional Vision Plan, the Greater Des Moines Partnership facilitated the development of this CHNA along with a Steering Committee comprised of representatives from hospitals, health departments, philanthropic organizations, service providers, academic institutions and the private sector. The group identified five areas to address in the CHNA: Access to Care, Youth, Physical Environment, Workforce, and Mental Health.

Work groups were created to assess each focus area and to identify current conditions, targets, challenges, needed resources, and priority areas. Upon completion of this work, the Steering Committee reconvened to capture the overall vision for a healthy community environment that supports and enables all Central Iowans to live healthy lives and encourages everyone to take responsibility for their own health.

## **2015 PRIORITIES**

A Steering Committee identified five areas to address, including access to care, mental health, physical environment, workforce, and youth. The final report addresses six priorities, based on the potential for implementation and depth of impact. Those priorities include:

- A. Increase opportunities for expanded and alternative means of healthcare delivery to address issues limiting access to care

- B. Establish more vibrant communities and neighborhoods characterized by mixed- and joint-use spaces and facilities that are accessible and available to everyone, including public gathering places for diverse and integrated engagement, and designs that promote healthy lifestyles
- C. Expand statewide training efforts for all professionals working with children across the various health and child-serving systems in Trauma Informed Care, cultural competency, and mental health first aid
- D. Identify additional sources of funding to create new and expand existing training programs in Psychiatry and Psychology and improve the mental health and disabilities training of primary care doctors and other primary care providers
- E. Ensure access to high-quality pre-K and K-12 education for Central Iowa children
- F. Ensure access to health care services and education for Central Iowa's newcomer population

## **BACKGROUND OF COMMUNITY ENGAGEMENT AT UNITYPOINT HEALTH-DES MOINES**

### ***HISTORICAL ENGAGEMENT***

Historically, UPHDM has been actively engaged in the assessment of and response to community health needs. The UPHDM response to the needs of the communities that it serves has been diverse and multi-faceted. In many instances the development of specific programs and projects has been warranted and effective. Other needs have been better served by UPHDM leveraging in kind resources to assist partnerships and broaden community efforts. This can consist of cash, services, durable goods and intellectual capital. Attention has always been given as to which response is most appropriate.

Community Health Needs Assessments have long been required by local Public Health Departments, and UPHDM has actively participated in this process in Polk and Dallas counties over the past two decades. UPHDM has been a leading contributor to these efforts in regards to all aspects of the process from assessment to implementation and community mobilization. This was also the case with the 2012 CHNA which was the first required through the newly implemented Affordable Care Act (ACA).

UPHDM has implemented the tracking of Community Benefit which is done as part of UPHDM's desire to utilize best practices in assessing and meeting community need. UnityPoint Health - Des Moines' average 3-year Community Benefit investment from 2012 through 2014 was \$39,243,928 annually (including Financial Assistance and Medicaid Shortfall).

## **ALIGNMENT WITH UPHDM STRATEGIC PLAN**

UnityPoint Health-Des Moines has always worked to ***“Improve the Health of the People and Community We Serve”***. This has always been evident in the robust community engagement and community benefit strategies developed and implemented over many years. At the present time, UPHDM has approximately 50 strategies and tactics in place to address the community’s health needs. Further, UPHDM has dedicated staff across the organization actively engaged with the community to identify and address need.

The Strategic Plan of UPHDM with its goals to: ***Deliver on Care Coordination, Enhance Consumer Access and Own and Manage the Premium Dollar***, fit well with the priorities identified within the 2015 CHNA. This is particularly evident in priorities regarding Access to Care and Mental Health, in which the organizations clinical capacity is well positioned to impact need. These goals allow the organization to intentionally apply its unique clinical and business skills and principals to positively impacting the overall well-being and health of all members of our community.

Many of the identified tactics that UPHDM is offering in response to the needs identified in the recent CHNA are efforts that are currently in existence and offered to the community. This reflects UPHDM’s active engagement in its community, as well as its keen perception of local and national health needs. Community Engagement staff are in the process of conducting an environmental scan of our offerings to assess strategic opportunity and alignment with the current CHNA. Upon completion of this process, Community Engagement staff will make any need recommendations regarding new opportunities or shifting of current strategies and resources to more effectively meet the identified need.

UPHDM is and will remain actively engaged with community partnerships that currently exist or may be established to address existing and emerging needs. Currently, UPHDM is a community leader, responding to partner requests to collaboratively address the health of the population. This will continue to be part of UPHDM’s community response. An internal planning and assessment of the allocation of resources will be implemented to appropriately address health needs.

## **IMPLEMENTATION STRATEGY**

### ***Central Iowa Community Health Needs Assessment Priorities and Suggested Strategies with UnityPoint Health-Des Moines Response Strategies and Tactics***

#### **PRIORITY A**

#### **Increase opportunities for expanded and alternative means of healthcare delivery to address issues limiting access to care**

1. Expand web-based physician consultations
2. Explore use of smartphones as a tool for physicians and providers
3. Expand telemedicine
4. Study expanded urgent care locations & hours
5. Use other primary care providers

#### ***UPHDM Response Strategies and Tactics:***

#### **STRATEGY: Supporting use of technology**

This will include the expansion and implementation of various technology efforts to increase access to healthcare through strategies such as telemedicine, use of cell phone apps, online scheduling.

#### **UPHDM TACTICS:**

**Virtual Care:** UnityPoint Clinic has teamed up with MDLIVE, the nation's largest network of board-certified telehealth doctors, to offer virtual care 24 hours a day, 365 days a year. Patients can see a doctor anytime, anywhere by phone or secure online video.

**Telehealth and Tele-psychiatry:** UPHDM has an extensive track in providing telehealth services within the region. Over the past five years, grant funding has accelerated the development of telehealth services in rural areas connecting patients and providers in rural settings with metro based physicians. Payors have been traditionally slow to reimburse for these services but new regulations show promise regarding payment for these services.

**Online Scheduling:** Patients are able to check wait times at clinics and schedule appointments through a link on our UPHDM webpage. There is early work to evaluate the feasibility of individuals scheduling their appointments online.

**HealthNet Connect:** A division of UnityPoint Health providing digital connectivity and solutions for the provision of telehealth and telemedicine.

## **STRATEGY: Expanded provider access**

These efforts will include using strategies such as expanded hours expand geographically of operation, Care Coordination, partnerships with community referrals such as Visiting Nurse Services, use of Nurse Practitioner for services with limited providers and traditional outreach screenings and education.

### ***UPHDM TACTICS:***

**Patient Care Coordinators:** Care Coordinators help patients through their entire healing process providing education, encouragement, facilitating multidisciplinary care, supporting the patient throughout the entire healing process. Care Coordinators help relieve stress by facilitating care between physicians, nurses, dietitians, and counselors.

**UnityPoint Home Health Services:** Home based medical services for the patients to achieve health and independence through personalized plan of care that addresses the specific needs and goals of every individual whether it is through short-term or long-term care.

**School Nurses:** BCH employees the West Des Moines School Nurses. School Nurses are a critical access point in a child/families healthcare.

**La Clinica:** Supported medical clinic specializing in family medicine for the local Hispanic community. The clinic is located at Des Moines University and had approximately 5,166 visits in 2015.

**Translation Services:** Service within the hospital to assist patients in receiving the appropriate translation needed. This utilizes both on site personnel and phone translation services. Recruitment and employment of bilingual providers.

**Connections in Primary Care:** BCH contracts with VNS to co-locate specially trained Family Outreach Specialists in our Primary Care Clinic as part of our healthcare team. Families can be connected on-site and in real time to a member of the team who will work with them in an ongoing fashion regarding the social determinants of health that are affecting the health of their families.

**Health Screenings:** Many service lines across the organization offer a variety of health screening opportunities at no or low charge to our community. This includes skin screenings, mammograms, blood screenings, colorectal screenings and many others.

**HeartReach:** A mobile cardiovascular outreach and screening vehicle and service providing cardiovascular screening to the underserved population. Blood pressure screenings and health information at community events.

**Physician Liaison:** UPHDM employs an individual to connect the needs of the clinics with the hospitals strategic plan. This includes consideration of how best to integrate services into the specific needs of the communities in which they are located.

**National Initiative V:** Pilot project through Medical Education to identify pediatric asthma patients with chronic repeat visits and connect them with a Primary Care Provider to more effectively manage care. The program also refers to Healthy Homes Des Moines.

**Mental Health Therapist in Clinics:** Some clinics within UPC system have licensed Mental Health Therapists co-located with them to attend to mental health issues.

**Healthy Lifestyles Rx:** Developing project to engage physicians in writing prescriptions for healthy activity and nutrition for patients it would benefit. This project includes implementing Exercise as a Vital Sign (EVS) into patient records.

**Care Cart:** Many rural and urban providers do not have the right sized supplies to provide the best care for children. Through the care cart providers who have received pediatric training can request and receive needed supplies.

**Medical Legal Partnership:** Blank Children's Hospital has implemented a Medical Legal Partnership program where an attorney from legal aid is co-located at the hospital and providers make referrals for families who have legal barriers related to the healthcare of their children.

## **PRIORITY B**

**Establish more vibrant communities and neighborhoods characterized by mixed- and joint-use spaces and facilities that are accessible and available to everyone, including public gathering places for diverse and integrated engagement, and designs that promote healthy lifestyles**

1. Develop a system of vibrant, walkable employment and residential nodes dispersed throughout Central Iowa and connected to one another by multimodal transportation corridors
2. Provide multimodal transportation access throughout the region
3. Make walking, biking, and using public transportation a normal part of daily life
4. Encourage and celebrate place making and community building opportunities

### ***UPHDM Response Strategies and Tactics:***

#### **STRATEGY: Support of local food systems and access to healthy food**

UPHDM has been actively engaged in promoting healthy food access and consumption since the 2012 CHNA. Efforts will continue to address helping support local production and consumption of fresh foods including access for underserved individuals. Further, this will include educational opportunities, particularly for youth.

#### ***UPHDM TACTICS:***

**Downtown Farmers Market:** Sponsorship of the Des Moines Downtown Farmers Market that also features UnityPoint Health Des Moines services providing health education each Saturday.

**Garden for Every School:** A partnership with Keep Iowa Beautiful and numerous others to develop an education tool consisting of manuals and videos to help schools build and maintain a school garden to help educate students about nutrition and health.

**Farmers Market/EBT:** This project is a partnership with Eat Greater Des Moines and the United Way of Central Iowa and works with vendors at local farmers markets to help provide education and infrastructure regarding accepting Supplemental Nutrition Assistance Program (SNAP) payment for produce.

**Meals on Wheels:** Support to Wesley Life to provide home delivered meals to individuals who qualify for the program.

**Edible Landscapes:** Proposed landscaping on the Iowa Lutheran Hospital campus that would aesthetically incorporate fruit and vegetable plants on the grounds. Community partners would assist with harvesting and distribution of produce. A community garden is also being considered in this partnership with Iowa State University, the City of Des Moines and the Viva East Bank Neighborhood.

### **STRATEGY: Creating environments to support health and healthy living**

Helping to develop and promote environments that allow people to be healthy will be addressed through active involvement in area collaborative to address transportation, healthy natural and built environments and health homes and neighborhoods.

#### **UPHDM TACTICS:**

**Healthy Homes Des Moines:** This project works with healthcare providers to identify children suffering from asthma that may see health improvements through housing mitigation to reduce asthma triggers. It also assesses and addresses the family's social needs. This is a partnership of Mercy, Broadlawns, Polk County Health Department, Polk County Housing Trust Fund and Visiting Nurse Services.

**Yoga in the Park:** Partnership with Des Moines and Ankeny Parks and Recreation to provide free yoga classes in local parks on Saturdays during the summer months.

**Recreational Trails Maps:** Partnership with the Des Moines Bicycle Collective and other organization to provide Central Iowans with maps of the areas recreational trails that is updated annually.

### **PRIORITY C**

**Expand statewide training efforts for all professionals working with children across the various health and child-serving systems in Trauma Informed Care\*, cultural competency, and mental health first aid**

\* Trauma Informed Care is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both consumers and providers, and helps survivors rebuild a sense of control and empowerment.

1. Increase knowledge of healthcare systems on the impact of trauma on patient health by providing training for providers and staff, creating environments that do not re-traumatize patients, and increasing prevention strategies such as trauma assessments and multi-generational supports in pediatric and family practice health care.
2. Provide schools with the necessary training and resources to build awareness, understanding and knowledge about how to address children who have experienced toxic

- levels of stress and/or have mental health concerns and when to refer to additional services, including mental health providers.
3. Specifically identify funds to train correctional staff on mental health issues and trauma informed care and cross train mental health providers and corrections staff.

***UPHDM Response Strategies and Tactics:***

**STRATEGY: Support Trauma Informed Care (TIC) and Prevention Strategies for Children's Mental Health**

Strategies are currently being implemented and can be expanded upon through the efforts primarily within Blank to educate staff, providers and the community about TIC and its impact on brain development and health.

***UPHDM TACTICS:***

**Trauma Informed Care Conference:** BCH sponsors and hosts this conference for community members.

**New Leader U:** Surviving to Thriving- BCH child advocate presents on TIC to all attendees as part of New Leader U.

**Blank Orientation:** BCH child advocate presents on TIC for all new Blank employees attending this orientation.

**Blank Children's Internal Advocacy Team:** continuous efforts regarding policy issues that touch children's mental health, trauma and adverse childhood experiences.

**Medical Webinars and Conferences:** Education on TIC, Connections Matter is regularly presented to medical professionals through our on-going webinar series and speakers address these topics.

**TIC Stakeholders:** BCH and the Regional Child Protection Center serve as leaders in TIC effort in the community and statewide.

**STRATEGY: Increase awareness of children's mental health issues**

UPHDM offers valuable services lines within Blank and Behavioral Services to educate and inform the broader community regarding children's mental well-being. Numerous collaborative efforts with community partners, such as ACE's 360, are also focused on addressing this and preventative programs to support children and families.

***UPHDM TACTICS:***

**ACEs (Adverse Childhood Experiences) 360 Steering Committee:** The Central Iowa ACEs 360 Steering Committee is leading efforts to raise awareness of the life-long impacts of childhood trauma and to support initiatives working to prevent or mitigate its effects.

**Connections Matter: Developing Brain – Relationships – Community –** This curriculum and effort is a collaborative effort in the community and Blank Children's Hospital (BCH) serves as one of the founding and collaborating institutions. The curriculum and tools are directed toward all groups; professionals,



community members, lay persons. The content directly addresses trauma and its impact on brain development, relationships and the role of community.

**Foster Care Project:** BCH & Regional Child Protection Center (RCPC) is working on the specifics of a medical home for children removed from their homes and placed in foster care. This will be a one stop location that implements the special recommendation for the care of children placed in foster care and supports foster parents and caregivers.

**Failure to Thrive Clinic:** BCH & RCPC serves statewide program and resource for families and providers on failure to thrive.

**Early Mental Health Intervention:** BCH is piloting a model where children and their families are screened for social, emotional, behavioral and developmental issues prior to recommend well-child visits. Screenings for caregiver depression (with link to assessment if necessary) and domestic violence are also provided.

## **PRIORITY D**

### **Identify additional sources of funding to create new and expand existing training programs in Psychiatry and Psychology and improve the mental health and disabilities training of primary care doctors and other primary care providers**

1. Support childhood trauma prevention and early intervention strategies
2. Supporting and fully funding the Adult Mental Health Redesign and also launching a Children's Mental Health System Redesign
3. Support of growing Graduate Medical Education opportunities

#### ***UPHDM Response Strategies and Tactics:***

#### **STRATEGY: Increase services and providers to address mental health needs**

UPHDM will aim to increase access to Mental Health providers through varied strategies in existence and being developed. New opportunities tied to the development of a Psychiatric Residency program will help to address this need. Use of Nurse Practitioners in psychiatric services and co-location of Mental Health Therapists in clinics along with exploring tele-psych service will also increase access.

#### ***UPHDM TACTICS:***

**Psychiatric Residency:** UPHDM is developing a Psychiatric Residency program in partnership with Broadlawns Medical Center through Medical Education. First residents are anticipated for 2018.

**Psychiatric Advanced Registered Nurse Practitioner (ARNP):** Behavioral Health Services is actively expanding its capacity to recruit, employ and support Psychiatric Nurse Practitioners.

**Student Assistance Program:** Contractual arrangement to provide counseling services to local school districts and their students and families.

**Promoting First Relationships:** All providers and nursing staff in Blank general pediatrics practice attended promoting first relationships in primary care. This is one-day training on infant mental health and how to incorporate its many principles into primary care

**Connections in Primary Care:** This partnership opens up a direct link for providers to help their families with mental health issues and has educated providers on resources available. Additionally, the screening pilot is making needed information accessible to providers so they can address prevention, early identification and early intervention.

## **PRIORITY E**

### **Ensure access to high-quality pre-K and K-12 education for Central Iowa children**

1. Increase access to quality early learning environments that promote school readiness
2. Increase K-12 students' proficiency in literacy, reading, and math
3. Identify and engage at-risk students and improve school success by addressing barriers for students and families
4. Support public-private partnerships to expose young people to careers (i.e., Wellmark job training partnership with Des Moines Public Schools and the Waukee Aspiring Professionals Exchange (APEX) program that partners with several local employers)

### ***UPHDM Response Strategies and Tactics:***

#### **STRATEGY: Support academic success through assistive services**

UPHDM will play an active role in supporting the success of area students. The Student Assistance Program provides valuable support to students and families to ensure academic success. Projects for promoting acceptable grade level reading contribute to school readiness.

#### ***UPHDM TACTICS:***

**Student Assistance Program (SAP):** Contractual arrangement to provide counseling services to local school districts and their students and families.

**Child Assault Prevention (CAP):** The child assault prevention program works collaboratively with schools, parents and students to create safe learning environment for children.

**Reach Out and Read:** Outreach program to support early learning and grade level reading.

#### **STRATEGY: Promote career development opportunities to students**

UPHDM has a long history of and will continue to offer career development opportunities in partnership with area schools. These tactics offer opportunities for enhanced academic and career success for students of all levels.

#### ***UPHDM TACTICS:***

**Project SEARCH:** This is a work based training program for young adults with various kinds of intellectual and developmental disabilities. Project SEARCH is located at Iowa Methodist Medical Center. There is also classroom based learning but the topics are related to getting and keeping a job.

**Career Opportunities in Health:** The class supports students in their junior and senior year with exploring various careers in healthcare. The goal is to help expose youth to healthcare career options.

**RespectAbility:** UnityPoint is active with RespectAbility a national advocacy group for people with disabilities and have participated in discussions with legislators and campaign staffers.

## **PRIORITY F**

### **Ensure access to health care services and education for Central Iowa's newcomer population**

1. Educate Iowa's health care providers on their responsibilities vis-à-vis language access under Title VI of the Civil Rights Act of 1964, which prohibits recipients of federal funding from discriminating based on national origin by failing to provide meaningful access to individuals who are Limited English Proficient (LEP)
2. Provide resources to providers on local refugee- and immigrant-serving providers that are able to provide culturally and linguistically appropriate support, especially through the use of the community health navigator model
3. Provide support to organizations, including hospitals and clinics, that assist refugees and immigrants to maintain appropriate health insurance coverage
4. Liaise with local organizations that provide enrollment support, especially during the transition to Managed Care

#### ***UPHDM Response Strategies and Tactics:***

#### **STRATEGY: Increasing access for diverse populations**

UPHDM will continue providing and advocating access for diverse population's access to health care services. La Clinica has continued to address this need for over a decade.

#### ***UPHDM TACTICS:***

**La Clinica:** Supported medical clinic specializing in family medicine for the local Hispanic community. The clinic is located at Des Moines University and had approximately 5,166 visits in 2015.

**Translation Services:** Service within the hospital to assist patients in receiving the appropriate translation needed. This utilizes both on site personnel and phone translation services. Recruitment and employment of bilingual providers.

**CelebrAsian, Latino Heritage Festival, etc.:** Support is provided to these community events and service lines offer various education and screenings.

#### **STRATEGY: Providing employment and career development opportunities**

UPHDM will continue to support efforts to advocate for career needs of diverse populations through efforts offered by Human Resources to assist Immigrant workers in the organization and through collaborative partnerships in the community.

#### ***UPHDM TACTICS:***

**Central Iowa Works:** UnityPoint Health-Des Moines Human Resources staff is engaged in a workforce partnership that brings employers, educators and community based providers to the table. It works to make training available for in demand jobs that also supports individuals with barriers to employment such as people with disabilities, veterans, refugees, those with a criminal history and low income individuals

**Retention Specialist:** This role focuses on supporting employees with “barriers” to employment and often supports English language learners with navigating our systems to identify areas of interest, training opportunities, support through community based resources and our internal application process.

**Direct Care Workers:** The Direct Care Workforce initiative seeks to professionalize the field, standardize training and draw attention to the demanding job that also pays very low wages

## **OPPORTUNITIES FOR EXPANDED STRATEGIC ENGAGEMENT**

With the completion of the 2015 Community Health Needs Assessment, UPHDM has had the opportunity to begin to evaluate current and emerging strategic efforts it provides to meet the identified priorities. These have been identified in part through the previous IMPLEMENTATION STRATEGY section. A further list is referenced in the attached appendix.

This current CHNA has also provided an opportunity to engage with our community partners represented on the CHNA Steering Committee and the broader community to focus our collective efforts to address a specific Priority. Priority D, ***Identify additional sources of funding to create new and expand existing training programs in Psychiatry and Psychology and improve the mental health and disabilities training of primary care doctors and other primary care providers***, has been selected for this. Current plans are being made to include this as part of the work of the ***Wellness Capital*** within the ***Capital Crossroads*** plan. A strategic planning session of community stakeholders is scheduled for late March, 2016 to develop strategic reactions.

Finally, the 2015 CHNA will allow UPHDM staff to assess areas of potential new engagement based on its findings. Some of the possible strategies to consider could be:

- Increased efforts to address specific Social Determinants of Health, similar to the work being accomplished with Healthy Homes Des Moines, could have high impact. Especially in collaboration with community partners. This type of strategy addresses the root causes and environments that can lead to poor health outcomes and supports the work of Public Health.
- Currently UPHDM has limited engagement in Priority B, ***Establish more vibrant communities and neighborhoods characterized by mixed- and joint-use spaces and facilities that are accessible and available to everyone, including public gathering places for diverse and integrated engagement, and designs that promote healthy lifestyles***. However, many opportunities are emerging within Central Iowa in regards to designing health into the environment. Projects like Age Friendly Cities and Complete Streets are examples of initiatives that view health as a critical outcome. Further, many UPHDM leaders are serving on boards and committees addressing the physical and natural environment and their connection to health.
- Utilizing community organizations such as Visiting Nurse Services to help coordinate community referrals of our patients could help to supplement care coordination efforts and improve health outcomes. The Connections in Primary Care has seen promising outcomes in piloting this effort within the Blank General Pediatrics Clinic.