Central Michigan Regional Rural Health Network Development Planning

November 5, 2015
Central Michigan Regional Rural Health Network Development Planning

July 9, 2015

Type Questions Here

Submit Questions to Allison Dunn
Acknowledgement

This presentation was prepared by the Central Michigan District Health Department (CMDHD) for the Central Michigan Regional Rural (CMRR) Health Network Development Planning project.

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Today’s Agenda

- Introductions
- Health Network Development Planning Project Updates
- Health Professional Workforce Recruitment and Retention
- Next Steps in Health Network Development Planning
- Community Health Survey Results
- Central Michigan Regional Rural Health Network Member Spotlight
- Comments and Questions
Introductions
Central Michigan Regional Rural Health Network
Sustaining and Associate Members

Health Care Providers

- Central Michigan District Health Department (CMDHD)
- Central Michigan University (CMU) Health Services
- Community Mental Health for Central Michigan
- Isabella Citizens for Health, Inc.
- McLaren Central Michigan
- Michigan Community Dental Clinics, Inc. (MCDC)
- Michigan Department of Health and Human Services
- MidMichigan Collaborative Care Organization, LLC
- MidMichigan Community Health Services
- MidMichigan Medical Centers – Clare, Gladwin, Gratiot, and Midland
- MidMichigan Medical Center - Gladwin
- Munson Healthcare Grayling Hospital
- St. Mary’s of Michigan – Standish Hospital
- Sterling Area Health Center
Central Michigan Regional Rural Health Network Sustaining and Associate Members

Academic Institutions Offering Health Professions Programs

- Central Michigan University (CMU) College of Medicine (CMED)
- Central Michigan University (CMU) The Herbert H. and Grace A. Dow College of Health Professions (CHP)
- Ferris State University College of Health Professions (CHP)
- Kirtland Community College
- Michigan State University (MSU) College of Human Medicine
- Mid Michigan Community College (MMCC) Health Sciences Program
Central Michigan Regional Rural Health Network Sustaining and Associate Members

Governmental and Non-Governmental Organizations

- Arenac County Health Advisory Committee
- Central Michigan Pregnancy Services
- City of Mt. Pleasant Parks and Recreation Department Farmers' Market
- Clare-Gladwin Health Improvement Planning Workgroup
- EightCAP, Inc. 0-5 Head Start
- Great Start Collaborative - Gratiot-Isabella Counties
- Isabella County
- Isabella Health Improvement Planning Workgroup
- Michigan Health Improvement Alliance, Inc. (MiHIA)
- Michigan Primary Care Association (MPCA)
- Michigan State Police
- Michigan State University (MSU) Extension
Central Michigan Regional Rural Health Network Sustaining and Associate Members

**Governmental and Non-Governmental Organizations**

- Michigan Works! Region 7B and Northern Transformation
- Mid Central Area Health Education Center (AHEC)
- Mid Michigan Community Action Agency (MMCAA)
- Mid-Michigan Transportation Connection
- Mid-State Health Network (MSHN)
- Northern Lower Regional Area Health Education Center (AHEC)
- Region VII Area Agency On Aging (Region VII AAA)
- Roscommon County Health Improvement Planning Workgroup
- Roscommon County Transportation Authority (RCTA)
- Ten16 Recovery Network
Health Network Development Planning Project Updates
Health Network Development Planning Project Updates

Governance Committee

- Memorandum of Understanding in revision process
- Draft Operating Agreement elements and structure determined – one vote per Member organization
- Committees and/or workgroups
  - Governance - formed
  - Information Management to be formed in Nov. ‘15
  - Executive
  - Funding/Sustainability
  - Communications and Public Relations, including Corporate Relations
  - Education
Health Network Development Planning
Project Updates

- **Community Calendar** is operational!
  [www.together-we-can.org/calendar](http://www.together-we-can.org/calendar)

- **CivicHealth** - [http://civichealth.com/](http://civichealth.com/)
  - Provides a web-based application to bridge clinical and non-clinical resources allowing for interoperability between various types of organizations.
  - Provided an introduction to application capabilities on October 7th. Discussion of diversity of offerings by our Network Members led to introduction of a tool for assessing clients by domain used by one of their clients
  - Follow-up demonstration is scheduled on November 20th at 10 a.m. at CGRESD. Will be accessible via GoToMeeting. Please invite others and RSVP!
Patient Assessment Tool: Addressing the Social Determinants of Health**

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>1 – In Crisis</th>
<th>2 – Vulnerable</th>
<th>3 – Safe</th>
<th>4 – Building Capacity</th>
<th>5 – Empowered</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter/Housing</td>
<td>Score of 1: Homeless or threatened with eviction.</td>
<td>Score of 2: In transitional, temporary or substandard housing, and/or current rent/mortgage payment is unaffordable (over 30% income).</td>
<td>Score of 3: In stable housing that is safe but only marginally adequate.</td>
<td>Score of 4: Household is in safe, adequate subsidized housing.</td>
<td>Score of 5: Household is safe, adequate, unsubsidized housing.</td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>Score of 1: No income.</td>
<td>Score of 2: Inadequate income and/or spontaneous or inappropriate spending.</td>
<td>Score of 3: Can meet basic needs with subsidy; appropriate spending.</td>
<td>Score of 4: Can meet basic needs and manage debt without assistance.</td>
<td>Score of 5: Income is sufficient, well managed; has discretionary income and is able to save.</td>
<td></td>
</tr>
<tr>
<td>Food and Nutrition</td>
<td>Score of 1: No food or means to prepare it. Relies on other sources of free or low-cost food to a significant degree.</td>
<td>Score of 2: Household receives SNAP benefits.</td>
<td>Score of 3: Can meet basic food needs, but requires occasional assistance.</td>
<td>Score of 4: Can meet basic food needs without assistance.</td>
<td>Score of 5: Can choose to purchase any food household desires. Makes healthy choices.</td>
<td></td>
</tr>
<tr>
<td>Childcare</td>
<td>Score of 1: Needs childcare, but none is available/accessible and/or child is not eligible.</td>
<td>Score of 2: Childcare is unreliable or unaffordable, inadequate supervision is a problem for childcare that is available.</td>
<td>Score of 3: Affordable subsidized childcare is available, but limited.</td>
<td>Score of 4: Reliable, affordable childcare is available, no need for subsides.</td>
<td>Score of 5: Able to select quality childcare of choice.</td>
<td></td>
</tr>
<tr>
<td>Transportation and Mobility</td>
<td>Score of 1: No access to transportation, public or private; may have car that is inoperable.</td>
<td>Score of 2: Transportation is available, but unreliable, unpredictable, unaffordable; may have car but no insurance, license, etc. No access to car seats.</td>
<td>Score of 3: Transportation is available and reliable, but limited and/or inconvenient; drivers are licensed and minimally insured.</td>
<td>Score of 4: Transportation is generally accessible to meet basic travel needs.</td>
<td>Score of 5: Transportation is readily available and affordable; car is adequately insured.</td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td>Score of 1: Danger to self or others; recurring suicidal ideation; experiencing severe difficulty in day-to-day life due to psychological problems.</td>
<td>Score of 2: Recurrent symptoms that may affect behavior, but not a danger to self/other; persistent problems with functioning due to mental health problems.</td>
<td>Score of 3: Mild symptoms may be present but are transient; only moderate difficulty in functioning due to mental health problems.</td>
<td>Score of 4: Minimal symptoms that are expectable responses to life stressors; only slight impairment in functioning.</td>
<td>Score of 5: Symptoms are not rare; good or superior functioning in wide range of activities.</td>
<td></td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>Score of 1: Meets criteria for severe abuse/dependence; resulting problems so severe that institutional living or hospitalization may be necessary.</td>
<td>Score of 2: Meets criteria for dependence; preoccupation with use and/or obtaining drugs/alcohol; withdrawal or withdrawal avoidance behaviors evident; use results in avoidance or neglect of essential life activities.</td>
<td>Score of 3: Use within last 6 months; evidence of persistent recurrent social, occupational, emotional or physical problems related to use (disruptive behavior or housing problems); problems have persisted for at least one month.</td>
<td>Score of 4: Client has used during last 6 months, but no evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use; no evidence of recurrent dangerous use.</td>
<td>Score of 5: No drug use/alcohol abuse in last 6 months.</td>
<td></td>
</tr>
</tbody>
</table>

Any Domains scoring a 1 or a 2? (Yes or No)

* A score of 1 in the mental health domain requires immediate psychiatric referral

** This is not the final tool. It is draft. Brief, scripted questions are being developed to assist facilitation.
Health Network Development Planning Project Updates

- Chronic Disease Prevention & Management assessment suggested by Pam Daniels of MSU Extension

<table>
<thead>
<tr>
<th>Crisis</th>
<th>Vulnerable</th>
<th>Safe</th>
<th>Building Capacity</th>
<th>Empowered</th>
</tr>
</thead>
<tbody>
<tr>
<td>No screenings; individuals do not know their risks</td>
<td>Individuals with chronic disease, (to include diabetes) live with unmanaged or uncontrollable health complications</td>
<td>Individuals can meet basic understanding of their chronic disease and can keep symptoms controlled</td>
<td>Their chronic disease (including diabetes) is well managed</td>
<td>Chronic disease (to include diabetes) outreach and disease management meets or exceeds the state mandate for healthy outcomes</td>
</tr>
</tbody>
</table>

- Incorporating incentives in programs
Health Network Development Planning Project Updates

Grants.gov Workspace

“Grants.gov Workspace is an additional option for individuals or organizations applying for funding opportunities. Workspace is a shared, online environment where members of the same organization may simultaneously access and edit different forms within an application. For each funding opportunity announcement (FOA), you can create individual instances of a workspace.

One of the primary benefits of Workspace is the ability to separate individual PDF forms that make up the traditional application package. This allows multiple team members within an organization to access and edit forms at the same time. Upon completion of individual sections and forms, applicants have the ability to upload completed forms to the workspace so other team members may view and edit the forms.

Applicants can also reuse saved Workspace forms when applying for new funding opportunities. To be uploaded successfully to a new workspace, the saved form must share the exact name and version of the form in the new funding opportunity.”
Health Network Development Planning Project Updates

Response from HRSA regarding whether one has the ability to work on MSWord documents in the Workspace feature.

“Workspace is a tool for **forms** management – not the management of the contents of the attachments.

In other words, the **MSWord** documents will still need to be completed outside of Grants.gov and uploaded to the Attachments form in Grants.gov.

It appears that multiple staff will be able to access the attachments **form** to upload and/or delete attachments – but would not be able to actually access the **content**.”
VIEW GRANT OPPORTUNITY

HRSA-16-017
Rural Health Network Development Planning Program
Department of Health and Human Services
Health Resources and Services Administration

You have chosen the following Opportunity Package:

Funding Opportunity Number – Title: HRSA-16-017 – Rural Health Network Development Planning Program
Opportunity Package ID: PK000219502
CFDA: 93.912 – Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement

Agencies:
Department of Health and Human Services – Health Resources and Services Administration

Opening Date:
Closing Date: Jan 08, 2016

Since you did not subscribe, you will not be notified of any future changes to this Opportunity Package. If you would like to receive notifications please click here.

⚠ Please review Applicant FAQs as you prepare and submit your application.

Option 1: Download Instructions and Package
Download Instructions and Package by clicking the appropriate button below: Instructions will open directly in your browser and can be saved to your computer. Packages must be saved directly to your computer. You do not need Internet access to read the Instructions or the Package once you save them to your computer.

Download Instructions
Download Package

Option 2: Create a Grants.gov Workspace
Login to create a Workspace, where your organization’s applicants can download, complete, and upload individual forms of an opportunity package.

Learn more about Workspaces
Login for Workspace Features
Health Professional Workforce Recruitment and Retention
Health Professional Workforce Recruitment and Retention

Suggestion from Network Member Diane Nielsen, Program Coordinator, Northern Lower Regional Area Health Education Center – Provide links to Health Network Members’ position opening webpages on the Central Michigan Regional Rural Health Network site.

Michigan Center for Rural Health

Rachel Ruddock, Recruitment and Retention Services Manager, will present on December 3rd.

- 3RNet – Rural recruitment and retention network
- National Health Service Corps Loan Repayment Program (NHSC LRP)
- Michigan State Loan Repayment Program (MSLRP)
Health Professional Workforce Recruitment and Retention

3RNet - www.3rnet.org

- A not-for-profit organization of 49 states that place health professionals primarily in rural and underserved practices
- Provides a nonprofit job board specifically geared to candidates interested in rural and underserved America
- Postings are currently limited to physicians, physicians assistants, and nurse practitioners.

National Health Service Corps Loan Repayment Program (NHSC LRP) - www.nhsc.hrsa.gov

- Federal loan repayment for clinicians working in primary care in underserved areas
- Usually limited to organizations with a Health Professional Shortage Area (HPSA) score of 14 or more
- See hpsafind.hrsa.gov/ to find HPSA score
Health Professional Workforce Recruitment and Retention

Michigan State Loan Repayment Program (MSLRP) -
www.michigan.gov/mslrp

- State loan repayment for clinicians working in primary care in underserved areas
Next Steps in Health Network Development Planning
Next Steps in Health Network Development Planning

Activities for the Remainder of November

- Send information about any Food Day/Apple Crunch events held and if anyone is considering “I wish my ***** knew” campaigns
- CMDHD to participate in a meeting with the HRSA Project Officer and webinars with Rural Health Innovations (RHI), the technical assistance provider
- Rural Health Network Development Planning Program grant application development
- Civic Health demonstration on November 20th at 10 a.m.

December 3rd Health Network Meeting

- Presentation from Rachel Ruddock, Recruitment and Retention Services Manager, Michigan Center for Rural Health
- Presentation from William Saltarelli, PhD, Central Michigan University, regarding cardiovascular risk screenings for 5th graders and proposed educational intervention
- Member spotlights
Next Steps in Health Network Development Planning

Ongoing Activities that Will Help Us in the New Year!

- Review the draft Community Health Survey Report
  - Send in comments
  - Hone in on factors in which your organization focuses, talk to others to find out what is working, and obtain suggestions for how things could work better

- Start thinking about the priority areas in which the Health Network will develop objectives and strategies
## Next Steps in Health Network Development Planning County Health Improvement Planning Workgroup Priority Areas/Domains

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Arenac</th>
<th>Clare-Gladwin</th>
<th>Isabella</th>
<th>Osceola</th>
<th>Rosc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Services – Access to Quality Health Care</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Health Services</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
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<tr>
<td>Mental Health Issues</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
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<tr>
<td>Health Services – Dental Preventive Care/Check-ups</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
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<tr>
<td>Nutrition</td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
<td>✓</td>
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<tr>
<td>Physical Activity</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
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</tr>
<tr>
<td>Nutrition &amp; Physical Activity</td>
<td>✓</td>
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<td></td>
<td></td>
<td>✓</td>
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<tr>
<td>Nutrition &amp; Weight Status</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
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<tr>
<td>Nutrition, Physical Activity and Weight Status</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
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<tr>
<td>Family Life (Parenting)</td>
<td>✓</td>
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<tr>
<td>Maternal and Infant Health</td>
<td></td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Reproductive and Sexual Health</td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
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</table>
Next Steps in Health Network Development Planning
County Health Improvement Planning Workgroup Priority Areas/Domains

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<th>Isabella</th>
<th>Osceola</th>
<th>Rosc.</th>
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<tbody>
<tr>
<td>Violence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
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<tr>
<td>Abusive and Violent Behavior</td>
<td>✓</td>
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<tr>
<td>Abusive/Controlling/Violent Behavior</td>
<td></td>
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<td></td>
<td>✓</td>
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<tr>
<td>Abusive and Violent Behavior (Child Abuse, Elder Abuse, Abuse in Adults with Disabilities)</td>
<td></td>
<td></td>
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<td>✓</td>
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<tr>
<td>Substance Abuse</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Lifestyle and Living Conditions</td>
<td></td>
<td></td>
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<td>✓</td>
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<tr>
<td>Housing</td>
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<td>✓</td>
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<tr>
<td>Transportation</td>
<td>✓</td>
<td>✓</td>
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<td>✓</td>
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<tr>
<td>Environmental Issues</td>
<td>✓</td>
<td></td>
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<td>✓</td>
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</table>
Community Health Survey Results
Community Health Survey Results

- Central Michigan Region Community Health Survey Report Draft is posted in the Resources Library at [www.together-we-can.org/index.php/rural-health-network/](http://www.together-we-can.org/index.php/rural-health-network/)

- Both pdf and MSWord versions are provided

- Draft report review
Central Michigan Regional Rural Health Network Member Spotlight
## Central Michigan Regional Rural Health Network Member Spotlight

<table>
<thead>
<tr>
<th>Organization</th>
<th>Presenter(s)</th>
</tr>
</thead>
</table>
| Central Michigan District Health Department Emergency Preparedness            | Melissa DeRoche  
Emergency Preparedness Health Officer  
mderoche@cmdhd.org                                                                 |
| St. Mary’s of Michigan Standish Hospital                                       | Holly Shillair  
Community Relations Manager  
holly.shillair@stmarysofmichigan.org |
| Michigan Primary Care Association (MPCA)                                     | Jason Johnson  
Outreach and Enrollment Coordinator  
jjohnson2@mpca.net                  |
| Michigan State University (MSU) College of Human Medicine Rural Community Health Program – presentation to include National Rural Health Day activities | Julia E. Terhune  
Rural Community Health Program Coordinator  
Julia.Terhune@midmichigan.org  
or  
Nicole Connor  
Executive Assistant, MidMichigan Health System Clare  
Nicole.connor@midmichigan.org |
Questions and Comments