# **Community Health Needs Assessment**

## **Executive Summary**

### **Compelled to Care for our Community**



As a faith-based health care organization in the Catholic Christian tradition, St. Joseph Mercy Ann Arbor's (SJMAA) work of providing services that benefit the community is core to our identity. While governed by laws and regulations for non-profit tax-exempt hospitals to provide services to those in need, we are ultimately compelled by a desire to extend the healing ministry of Jesus Christ (*cf.* John 13:14-17, Matthew 25:35-36). Our mission and core values call us *to improve the health of our community* with a particular concern for the poor and underserved.

## Assessing Community Health Care Needs

SJMAA collaborated with Washtenaw County Health Improvement Plan Teams, the University of Michigan Health System, local safety net clinics and area health coalitions, to conduct a community health needs assessment (CHNA) for the Washtenaw County area. SJMAA used survey data, stakeholder interviews, and information gathered from other data sources to identify the health care needs of residents.

#### Challenges: Increasing Population and Poverty; Declining Income and Access to Care

Washtenaw County's population of 347,091 as of December 2011 has increased 6.8% since 2000, making it the sixth most populous county in the state. Ann Arbor, the county seat of Washtenaw, is the sixth most populous city in Michigan. The time between full census surveys in 2000 and 2010 included an economic recession that debilitated the automotive industry, placing significant financial hardships on residents of southeast Michigan. Median household income for Washtenaw County residents has declined over 13% and those living in poverty have increased from 8.8% to 11.1% since 2000.

During the same 10-year time frame, the number of residents with health insurance declined from 92% to 89%. The groups least likely to have health insurance are 25 -34 year olds, followed by the 18-24 age group. Western Washtenaw and the Rest of County were the regions with the highest rates of uninsurance.

## **Health Care Priorities**

The CHNA identified 17 health needs for Washtenaw County. Of these, the Community Benefit Ministry Council (CBMC) classified seven as high priority based on size and severity of the problem, the health system's ability to impact the problem, and the availability of existing resources.

- Obesity
- Immunizations and Vaccines
- Access to Care
- Mental Health
- Dental Health
- Breastfeeding
- Mammograms

#### Our Response

The Community Benefit Ministry Council (CBMC) will manage SJMAA's response to the health needs identified in this assessment, with direct executive responsibility. The CBMC has appointed teams for each of the prioritized needs. These teams will engage key community partners in implementing evidence-based strategies across the service area. These strategies will be developed further over several months and detailed implementation plans created. Implementation plans will be reviewed and updated at least annually to ensure the most appropriate responses to identified health needs.

#### Intended Outcomes

Because this work is so crucial to our identity, it is embedded within our organizational strategic and operational plans. Financial and performance targets are created with the goal of strengthening our Community Benefit Ministry, particularly our response to the health needs identified in this assessment. Community Benefit metrics are tracked monthly as part of our Operations Plan.

To access the full CHNA Report, visit www.stjoeshealth.org/cbm