



C A P I T A L A R E A
HealthAlliance

2018 Annual Report

Working together
to empower our community
to achieve better health

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About the Capital Area Health Alliance

The Capital Area Health Alliance (CAHA) believes that everyone has the right to lead a healthy lifestyle and have access to affordable, quality health care resources. As a trusted regional hub, CAHA convenes community conversations, provides an inclusive platform for collaboration, and brings healthcare related resources and educational opportunities to employers, businesses and area residents.

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The work of the Capital Area Health Alliance is accomplished through the committees and activities that embody its commitment to collaboration. CAHA recognizes the effectiveness of working on challenges together that no single organization can resolve or achieve on its own.

Capital Area Community Nursing Network

The Capital Area Community Nursing Network intentionally addresses nursing practice and community needs in the Capital Area through communication, collaboration and advocacy to build action alliances.

Committee Chair: Kathy Forrest, Coordinator Professional Programs & Instructor, MSU College of Nursing

The Capital Area Community Nursing Network (CACNN) prioritized “Readiness for Practice” as the focus for work in 2018-2019. The *Readiness for Practice* focus came from a strategic planning process in late 2017 that summarized urgent issues in nursing. The committee addressed three initiatives within the *Readiness for Practice* focus in 2018 meetings including: (1) Community Education Activities, (2) Millennial Speakers Bureau, and (3) Leadership & Mentoring Models.

1. Community Education Activities. A subcommittee of members developed a questionnaire for use with a focus group of health system recruiters and nursing leaders that employ nursing graduates from our region. The questions asked about gaps in knowledge and skills affecting a new hire’s integration into the practice setting. Results of the focus group meetings revealed: wide variations in on-boarding practices for new hires between organizations and practice settings; a gap in skills to interact effectively with physicians and peer- to- peer communications; lack of knowledge related to delegation; poor time-management skills; and an inability to prioritize care for multiple patients.

Goal: CACNN will explore hosting a forum in collaboration with health systems and nursing faculty that is open to all nursing students in the Capital Area region formatted with active learning strategies and 20 to 30-minute sessions of content, amenable to millennial learners.

2. Millennial Nurses Speakers Bureau. A subcommittee of members identified millennial aged nurses working across practice settings who were willing to share their expertise and passion in a brief presentation. PowerPoint templates were used to develop presentations that include an overview of the setting, specifics of the role, educational requirements, advantages, and time for Q&A. Panels consisting of 4-5 millennial speakers will address student groups completing coursework in local nursing programs.

Goal: The first panel presentation of the Millennial Nurses Speakers Bureau is in early 2019 with the MSU Nursing Student Association. Faculty and practice contacts are being sought to schedule additional speaking engagements.

3. Leadership/Mentoring Models. Training and mentoring recent graduates and newly licensed RNs for leadership roles is considered an urgent need. Committee members identified several online mentoring programs used in a variety of settings. Future consideration was given to developing mentoring dyads with individuals from the Millennial Nurses Speakers Bureau.

Capital Area Physicians Committee

The Capital Area Physician Experience (CAPE) is a coalition that focuses on recruiting and retaining physicians in Mid-Michigan. Through CAPE, leaders from medical education, hospitals, physician groups and the community are working together to develop strategies to show students, residents and practicing physicians that the Capital Area is a great place to live and practice medicine. CAHA is unique among Michigan's regional health coalitions in convening a group to address physician workforce needs.

Committee Chair: Mary Anne Ford, Consultant, Capital Area Health Alliance

The CAPE coalition continued to support the Ingham County Community Health Improvement Plan's goals to improve access to primary care services. The committee explored ways to publicize appointment availability, including coordinating with the 211 service to provide information about availability. The committee also worked with 211 to identify clinics and hospitals serving rural and other underserved populations that were not on the 211 referral list. It was determined that printed resources would be useful tools in providing current information for community members seeking physicians.

With the intention of supporting and recruiting physicians, residents and their families, CAHA worked with physician recruiters, medical school leaders, and the county medical society to create *Benefits of Living and Practicing in Greater Lansing*. Lifestyle topics include schools, commute times, and housing prices. Topics related to medical practice in the area focus on research, teaching and clinical trial opportunities. This resource is available online and in printable form for use by health systems and physician practices, <https://www.capitalareahealthalliance.org/docs/CAPE.BenefitsGreaterLansing.CAHA.pdf>.

Healthcare Workforce Committee

The Healthcare Workforce Committee provides an avenue for communication and collaboration among healthcare organizations, employers, educators and training providers to capture the most useful, effective and innovative workforce development tools to support high quality healthcare in the Tri-County area.

Committee Chairs: Jeanette Klemczak, Consultant, and Luanne Bibbee, Business Development Manager, BCI, Lansing Community College

Over the course of two years, the Healthcare Workforce Committee (HWC) worked to develop a Medical Assistant (MA) Apprenticeship program, addressing the high demand for individuals to fill job openings within this field. The HWC provided the initial collaborative structure to get the MA Apprenticeship program started, and the Business Community Institute of LCC launched the program with LCC's Health and Human Services Division, working with partners at Capital Area Michigan Works!, US Department of Labor and the State of Michigan Talent Investment Agency. The first cohort launched in January 2018 with eight apprentices embedded within Sparrow Health System, McLaren Greater Lansing and CIMA. During the 46-week apprenticeship program, apprentices spent two days per week in class, and three days per week gaining hands-on experience within the hospital setting. MA apprentices in the program are slated to complete

the process in less than a year, earning a wage the entire time. The typical MA certification program lasts two years, making this apprenticeship a fast-track option into the occupation. The first MA Apprenticeship Cohort graduated in November 2018. All eight of the apprentices completed the program with jobs in hand. A second cohort of up to 12 apprentices is expected to begin early in 2019.

The HWC continued to work to address challenges related to Long Term Care (LTC) staffing issues. Two areas of focus that have been identified regarding recruitment and retention are:

1. Develop training programs for nurses in supervisory and leadership positions. Challenges related to team building, communication and the work environment can be better addressed when those in leadership have training to help them learn and enhance leadership skills.
2. Work with high school Career Technical Education (CTE) centers to explore building a pipeline for LTC positions. This pipeline could be developed through internship and shadowing programs for students and would establish a targeted onboarding program as a partnership of CTE and LTC employers.

Healthy Lifestyles Committee

The Healthy Lifestyles Committee is committed to building a healthy culture throughout the Tri-County area by raising awareness of and connection to initiatives promoting healthy behaviors and well-being. The Healthy Lifestyles Committee also provides the advisory framework for *Choosing Health!*[®] which focuses on increasing physical activity, encouraging healthy eating, preventing substance misuse, and promoting mental health.

Committee Chair: Kathy Hollister, Executive Director, Capital Area Health Alliance

The Healthy Lifestyles Committee (HLC) continued its Health Equity & Social Justice Exploration Series, comprised of tools, assessments, resources, guest speakers and in-depth analysis of the root causes of inequity. The series goal was to raise awareness of health inequity; identify actions that committee members can take toward implementing health equity practices and policies in their organizations; and develop a greater comfort level and common language when speaking about health inequities. Jessica Yorke, Health Equity & Social Justice Coordinator for the Ingham County Health Department, played a major role in developing and facilitating this series. Series discussion topics included:

- Examining *Choosing Health!*[®] through a health equity lens
- Actions that organizations engaged in the HLC can take to create health equity
- The Spectrum of Prevention: Approaches to Reducing Health Inequities and Improving Health Outcomes
- Truth, Racial Healing & Transformation Framework
- Cultural Competency
- The Four Levels of Oppression and Change
- The Power of Narrative, How It Shapes Us and Impacts Health Inequities.
- LGBTQ Health Equity

The year-long Health Equity Series was concluded with exploring the possibility that we can create equitable health outcomes in our community in ways that are restorative, energizing and rooted in our shared dedication to the well-being of Capital Area residents. Each HLC member created a personal and organizational Health Equity Action Plan, pairing up with a partner to share their plan and set a future time to connect with the partner to discuss how the plan is going.

The topics discussed and knowledge gained through this series have been instrumental in informing one of CAHA's overarching focuses for 2019: addressing racial and ethnic health inequities.

Mental Health Partnership Council

The Mental Health Partnership Council aligns stakeholders and system leaders to improve the behavioral health landscape in the Tri-County area. The Partnership Council provides updates, information, resources, and opportunities surrounding access to care and the behavioral health service delivery system, health and wellness promotion, training opportunities, community educational events and policy initiatives.

Committee Chair: Joel Hoepfner, Prevention and Wellness Specialist, CMHA-CEI

The Mental Health Partnership Council (MHPC) continued to promote the Creating a Culture of Health Plan, aimed at improving the health and wellbeing of CMHA-CEI staff and the community as well as improving access to behavioral health services and reducing stigma. One such initiative, the online behavioral health screening platform, is available at www.ceicmh.org as well as other community partner agency websites. This online platform provides free and anonymous screenings to individuals who may be experiencing symptoms involving a behavioral health issue. Referral contacts and behavioral health resources are available to the user upon completion of the screening. The platform averages about 50-75 behavioral health screenings completed per month.

Another initiative of the Culture of Health Plan is *Stand Up 2 Stigma* that was implemented in 2018. The mission of *Stand Up 2 Stigma* is to reduce stigmatizing language, thoughts, and behaviors by promoting positivity, hope, inclusion, and acceptance of behavioral health issues throughout the community. This movement is open to all who are interested in supporting the mission: health and human service agencies, professionals, educators, parents, guardians, friends, family, those who live with behavioral health disorders, and anyone else who passionately pursues stigma reduction efforts surrounding behavioral health. Agencies and organizations are encouraged to utilize the *Stand Up 2 Stigma* materials found at <http://www.ceicmh.org/stand-up-2-stigma>.

2018 CAHA Fall Forum

On September 19, over 122 clinical and administrative professionals and community members attended *Integrating Physical Health and Behavioral Health Services*, a CAHA Forum addressing community collaboration to facilitate the integration of physical health, mental health, substance use and prevention services in the region, https://capitalareahealthalliance.org/2018_fall_forum.php. For the first time, CAHA offered Continuing Education credits. The forum featured presentations on integration models in other states, integration efforts underway in Michigan, and existing, viable models to integrate physical health and behavioral health services in the Capital Area. Two panels explored the provider experience with integration models in the region and the ways in which health systems and organizations can work toward providing integrative care to individuals with complex needs. As part of the forum, participants were asked what steps our community can take to facilitate integrated care that cannot be done by individual organizations alone.

Coping with Pain Brochure

Inspired by work that CAHA's Healthy Lifestyles Committee was doing in the community to provide opportunities and resources for healthy living, a pain specialist from the Pain Management Center of Lansing and the Sparrow Pain Management Center approached CAHA about developing a community resource on coping with pain with non-medication options. This led to the collaborative efforts of CAHA, the Ingham Opioid Abuse Prevention Initiative at the Ingham County Health Department, the Tri-County Office on Aging, and the Barry-Eaton District Health Department in creating the *Coping with Pain* brochure. One of the goals of the brochure is to reduce the need for opioid medication by explaining other effective options for pain management. The resource is being distributed to physician practices as well as widely throughout the community. It is available online at https://capitalareahealthalliance.org/coping_with_pain.php.

Truth, Racial Healing and Transformation

Understanding that institutional racism historically and currently has a profound impact on the individual and collective health of our community, CAHA is engaged in the Truth, Racial Healing & Transformation (TRHT) process being funded by the W. K. Kellogg Foundation nationally, as well as here in greater Lansing, <https://healourcommunities.org/>. TRHT is focusing on ways for all of us to heal from the wounds of the past and build mutually respectful relationships across racial and ethnic lines that honor and value each person's humanity.



Strategic Focus 2019–2020

1. Whole Person Care*

Next Steps from CAHA 2018 Forum: *Integrating Physical & Behavioral Health Services*, https://capitalareahealthalliance.org/2018_fall_forum.php. Issues include but are not limited to: integration, diverse workforce, mental health workforce, aging workforce and population, health of healthcare workers, substance use, and technology.

- Strategies:
 - a) Facilitate a *Learning Community* for organizations engaged in or planning integrated care to share ideas, innovations and solutions.
 - b) Education & Networking: bring people together on specific facets of Whole Person Care, such as multidisciplinary teams, patient/family engagement, workforce and reimbursement.

*Whole Person Care recognizes that the best way to care for people is to consider their full spectrum of needs – medical, behavioral, socioeconomic and beyond.

2. Readiness for Care Collaborative

- Strategies:
 - a) Build on the Capital Area Community Nursing Network’s (CACNN) focus of addressing gaps in readiness for practice and leadership training.
https://www.capitalareahealthalliance.org/capital_area_community_nursing.php
 - b) Model emerging *Readiness for Care* collaboration: As CACNN works on *Readiness for Care* and nursing leadership initiatives, create a model for collaboration to inspire and inform efforts of other Capital Area professionals.

3. Address Racial & Ethnic Health Inequities

Next steps from the Healthy Lifestyles Committee Health Equity Series/Training.

- Strategies:
 - a) Build capacity to facilitate difficult yet needed conversations.
 - b) Partner with Ingham County Health Department and continue to engage in *Truth, Racial Healing & Transformation*, <https://healourcommunities.org/>.

CAHA is restructuring how its work is accomplished. Instead of the current standing committee structure, initiatives and strategies will be achieved by utilizing “pop-up” or ad-hoc committees organized by specific topics and focus. Current committee members are invited and encouraged to be engaged in CAHA’s focus going forward per their subject expertise as well as by follow-through on work and strategies already initiated.



Balance Sheet

As of December 31, 2018

ASSETS

Current Assets

Checking/Savings

Checking - Huntington Bank	40,792.19
Money Market Investment - Huntington Bank	26,379.79

Total Checking/Savings	67,171.98
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Other Current Assets

Prepaid Expenses	1,095.00
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Total Other Current Assets	1,095.00
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Total Current Assets	68,266.98
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Fixed Assets

Office Equipment	7,675.00
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Accumulated Depreciation	-7,675.00
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Total Fixed Assets	0.00
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TOTAL ASSETS	<u><u>\$68,266.98</u></u>
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LIABILITIES & EQUITY

Liabilities

Current Liabilities

Accounts Payable

Accounts Payable	2,657.09
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Total Accounts Payable	2,657.09
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Other Current Liabilities

Deferred Annual Dues	2,334.00
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Total Other Current Liabilities	2,334.00
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Total Current Liabilities	4,991.09
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Total Liabilities	4,991.09
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Equity

Unrestricted (retained earnings)	60,760.05
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Net Income	2,515.84
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Total Equity	63,275.89
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TOTAL LIABILITIES & EQUITY	<u><u>\$68,266.98</u></u>
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Profit & Loss

January through December 2018

INCOME	
Contributions	14,260.86
Dues	102,766.00
Interest income.....	26.37
TOTAL INCOME.....	<u><u>\$117,053.23</u></u>
 EXPENSE	
Accounting & auditing	5,800.00
Conferences & meetings	4,022.83
Contract services	91,736.00
Dues & subscriptions	-10.00
Information technology	732.78
Insurance	906.00
Licenses & permits	30.00
Occupancy expenses	6,420.00
Office expense	4,575.47
Travel	324.31
TOTAL EXPENSE.....	<u><u>\$114,537.39</u></u>
 NET INCOME	 <u><u>\$ 2,515.84</u></u>

