HEALTH IS WHERE WE
Live, Learn, Work & Play

2016 MAT-SU COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION PLAN

STATUS REPORT ON 2017 ACTIVITIES
Executive Summary

Valley Hospital Association Inc. (VHA)/dba Mat-Su Health Foundation (MSHF), a non-profit 501(c)(3) organization, is required by the Internal Revenue Service (IRS) to complete a Community Health Needs Assessment (CHNA) every three years (the last one was completed in 2016) and evaluate the implementation strategy goals and objectives on a yearly basis due to VHA’s 35% ownership in Mat-Su Regional Medical Center (MSRMC). MSRMC is a for-profit hospital that without the ownership interest of VHA, would not be required by the IRS to complete a CHNA or implementation strategy action plan. The information from MSRMC that is contained in this evaluation shows the commitment the hospital has to supporting not only MSHF’s mission and outreach to the community, but to the Mat-Su Borough residents as well.

MSHF retained the services of Strategy Solutions, Inc. in an advisory role to assist the foundation and hospital with the evaluation of its action plan. Significant accomplishments over the last year have been reported by MSHF, MSRMC and community partners. The following information shares the 2016 community health improvement goals, as well as tools that the partners used to address these goals and achieve systems-level improvement during Year 1 (2017) of the implementation strategy action plan.

2016 Community Health Improvement Goals

**GOAL #1**
Mat-Su residents have access to an effective and complete behavioral health continuum of care.

**GOAL #2**
All Mat-Su children and families are safe, healthy and thriving through an engaged and coordinated community.

**GOAL #3**
All Mat-Su residents have adequate income, housing, transportation, education levels, social connections, and information on resources and health to support good health and access to physicians and behavioral health care.

**GOAL #4**
All Mat-Su residents are a healthy weight.
Our Way of Working in the World

COMMUNITY ENGAGEMENT
Partners include MSHF, MSRMC, R.O.C.K. Mat-Su (Raising Our Children with Kindness), law enforcement and first responders, behavioral health providers, primary care providers, the Matanuska Susitna School District, Knik Tribal Council, Chickaloon Village Traditional Council, senior centers, the Office of Children Services, the Division of Behavioral Health, local birth centers, and others.

POLICY REFORM
- Testify at legislative sessions regarding community needs
- Bills advocated for that passed: SB79/HB159 Opioid Prescribing; SB83/HB164 Protection of Vulnerable Adults; SB14/HB132; Ride Sharing Services

RESEARCH AND EVALUATION
- Detox Feasibility Study
- 2016 Analysis of MSRMC ED Utilization Data
- Youth-Powered Focus Groups

GRANTMAKING AND SPONSORSHIPS
- MSHF Academic and Vocational Scholarships
- Target Wellness Grants (<$15K)
- Healthy Impact and Discovery Grants (> $15K)
- Strategic Grants
- MSHF and MSRMC Sponsorships
Mat-Su residents have access to an effective and complete behavioral health continuum of care.

Major investments and accomplishments of the implementation plan

Mat-Su Regional Medical Center submitted a Certificate of Need (CON) application on June 27, 2017 to add 36 inpatient beds for adult psychiatric and substance abuse treatment.

Data supporting the need for the CON included the following:

- Total behavioral health (BH) emergency department (ED) visits by patients with a primary BH diagnosis was 1,779.
- Total patients with a primary care BH diagnosis making “BH ED” visits was 1,314.
- Total patients with a primary BH diagnosis of 5+ unique ED visits (“super utilizers”) was 156.

The application was approved, in full without any conditions, by the State of Alaska on November 13, 2017. By the end of 2017, MSRMC began the design/development phase of this expansion, which consisted of defining and describing all the important aspects of the space, its form and function, fine-tuning its features and furnishings, and what the finished project will look like.

Note, a “BH Patient” is any patient who had a visit to the ED in the last year with a primary diagnosis that is classified as a behavioral health diagnosis. See Mat-Su Behavioral Health Environmental Scan, Report 1, http://www.healthymatsu.org/Learning/mshf-reports.
MSHF provided more than $1,150,000 in behavioral health funding support in 2017.

The funding supported behavioral health services in the Mat-Su Borough to fill gaps in the continuum of care, including: providing behavioral health in local schools, supporting three clinics with integrating SBIRT (Screening, Brief Intervention, Referral to Treatment) screening, co-funding Crisis Intervention Team (CIT) training, funding Substance Use Disorder (SUD) pretreatment and treatment, peer support, women’s residential SUD treatment, and children’s mental health treatment.

Evaluation of the Crisis Intervention Team Training.

The Alaska Training Cooperative is working to capture the results of the CIT trainings for law enforcement and other first responders. From June 1 through September 30 of 2017, Alaska State Troopers, Mat-Su EMS, and Palmer and Wasilla Police submitted 163 incident forms for the following types of calls: mentally ill individuals (27%); welfare checks (24%); suicidal individuals (26%); disturbance (10%); intoxicated individuals (4%); violent individuals (3%) and other types of incidents. Subjects’ behavior included: harm to self (49%); suicide threat (13%); suicide attempt (7%); threat to harm others (5%) and other reasons.

- First responders reported using de-escalation techniques in 80% of the incidents.
- First responders who were trained in Mental Health First Aid were more likely to use de-escalation techniques during the incident. No subjects were injured during police presence and no officers or employees were injured.
- The disposition of the calls were 43% voluntary hospitalization; 34% involuntary hospitalization; 9% subject was stabilized at the scene; 2 arrests; 4% diverted to family or friends.

Evaluation of SBIRT Integration.

Sunshine Community Health Center, had incredible success at integrating the use of the screening into the care they provide.

- Over a 12-month period, Sunshine Community Health Center used SBIRT to screen 92.5% (2,166) of eligible patients.
- 10% of these patients tested positive and required a brief intervention or referral to treatment.
- Sunshine Community Health continued screening at a rate of 8.3% and realized a projected collective cost benefit of $143,843 in savings of healthcare utilization due to the SBIRT screenings.

MSRMC and MSHF Created a Multi-Disciplinary Team (MDT).

The focus and mission of the MDT is to serve the complex needs of the patient and to eliminate his/her inappropriate use of the ED by increasing the patient’s connection to more appropriate community-based services outside of the hospital setting. This group started meeting in October 2017 and began reviewing cases. The following types of organizations have staff that attend the MDT meetings: law enforcement, Alaska Court System, behavioral health providers, primary care providers, Mat-Su Regional Medical Center, tribal organizations, care coordinators, and other social service providers. By the end of 2017, approximately 40 patient cases were reviewed by the MDT.
GOAL #2

All Mat-Su children and families are safe, healthy and thriving through an engaged and coordinated community.

Major investments and accomplishments of the implementation plan

In 2017, MSHF provided $1,392,811 in grant funding to fill gaps in the array of services and programs that support children and families in the Mat-Su Borough.

This funding supported programs that assisted homeless youth, food insecure children, children in foster care and those who have experienced maltreatment, and other parents and children.

MSHF continued to serve as the backbone organization for R.O.C.K. Mat-Su (Raising Our Children with Kindness) with the goal of promoting family resilience and eliminating child maltreatment.

In 2017, this cross-sector collaborative accomplished the following:

- Held more than 43 community education events with 1,279 residents receiving information on Adverse Childhood Experiences and resilience.
- Held two “Building Community Connections” gatherings to link the Office of Children’s Services with local resources for strengthening Mat-Su families.
- Sponsored 15 schools and 5 organizations to become “Trauma Sensitive.”
- Provided outreach to 5 organizations to promote developmental screenings for children ages 0-3.
- Created a Family, Infant, and Toddler Court for parents with children 0-3 years which will support parents and work to achieve permanency in a short period of time.

Burchell High School, a Trauma-Sensitive School.

The paragraph below is an excerpt from a story found in the following link from the National Council on Behavioral Health website, https://www.thenationalcouncil.org/lindas-corner-office/2018/03/oprah-winfrey-healing-inside/ titled Trauma-Informed Care Works.

“Burchell High School in Alaska saw a 66 percent drop in referrals for problem behaviors just one year after implementing trauma-informed classrooms. Students and teachers collaborate on expectations for behavior, students are taught the skills they need to master their emotions and learn from their mistakes, and administrators and parents support the teachers’ efforts. Schools nationwide are realizing the power of environments where all children can thrive.”

MSRMC Enhanced Communication with Birthing Centers.

The hospital extended the neonatal emergency transfer eight-hour course (STABLE) to community midwives free of charge in 2017 and had two attendees. A Memorandum of Understanding was signed in October, 2017 for EMTALA transfers being extended to all birthing centers. As of November 2017, birth center transfers of intra-partum mothers and newborns in distress increased by approximately 5 per month due to improved relationships that resulted in improved safety.

MSHF Provided More Than $940,000 to support social emotional learning (SEL) and the development of youth protective factors.

This included funding behavioral health in schools, the purchase of SEL curriculum for the school district, and supporting youth afterschool and summer programming.
GOAL #3  All Mat-Su residents have adequate income, housing, transportation, education levels, social connections, and information on resources and health to support good health and access to physicians and behavioral health care.

**Major investments and accomplishments of the implementation plan**

**MSHF Provided $588,443 in Basic Needs and Care Coordination Funding.**
This included funding for health fairs, public transportation, food security programs, housing and homelessness efforts, and organization capacity and operations funding for organizations assisting with basic needs and care coordination. One of the organizations that received funding – LINKS/ADRC, an organization that assists individuals with disabilities and older residents to access needed services – served 1,755 residents in 2017.

**MSRMC Conducted Community Screenings and Recruited Nurse Practitioners.**
Residents had increased access to care:
- MSRMC conducted 2,245 screenings for Medicaid eligibility.
- MSRMC conducted 747 glucose screenings and 751 cholesterol screenings at health events and provided 256 transportation vouchers for residents who lacked transportation to or from the hospital.
- 3 nurse practitioners were recruited to the hospital.

GOAL #4  All Mat-Su residents are a healthy weight.

**Major investments and accomplishments of the implementation plan**

**MSRMC-Sponsored Community Physical Activity and Health Nutrition Initiatives.**
During 2017, MSRMC sponsored at least 40 community initiatives directly related to physical activity and health nutrition. Included among these initiatives were the Bicycle Safety Rodeo, Baby & Children’s Health Fair, Family Health Fair, Go Red for Heart Health, Senior Walking program at the Menard Center, Senior Fitness Day at MTA Sports Center, Senior Circle Health and Wellness program, and numerous community walks/runs and bicycling activities.