UnityPoint Health – Des Moines 2019 Implementation Plan for the Community Health Needs Assessment (CHNA)

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 that nonprofit hospitals 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. The Mid Iowa Health Foundation provided the leadership for the 2019-2021 Community Health Needs Assessment. This CHNA was conducted as full partnership with the local health departments, hospitals and many other community health organizations. Four priority areas and specific goals were identified in this process.

Conducting this comprehensive CHNA, which was built upon the previous CHNA from 2015, took nearly a year to complete. The choice of the following priorities reflects the idea that a high quality medical/clinical system is essential to treat people who are sick and critical to help restore people’s health; but, it is not where health is created. Health is created in people’s homes, workplaces, neighborhoods and communities where people make healthy or unhealthy choices and establish healthy or unhealthy habits. The framework for those choices is the social, economic and built environment we create. These are the social determinants of health.

BACKGROUND OF COMMUNITY ENGAGEMENT AT UNITYPOINT HEALTH-DES MOINES

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. Consideration 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), as well as 2015.

THE 2019 COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

The 2019-2021 CHNA used the 2016-2018 as a starting point to: DOCUMENT what has been accomplished on the previously identified priorities, ASSESS the level of progress towards meeting these priorities, DETERMINE whether these remain community priorities and ASK whether new issues have emerged that should be considered priorities. To support this, the following steps were completed:

- Convened a group of 17 community leaders to conduct an overall assessment of the progress made on the priorities identified in the 2016 CHNA.
- Convened five priority-specific discussions to document in greater detail the progress that had taken place on each priority. Twenty-six people participated in at least one of these conversations.
- Held five constituency-specific discussions to get the unique perspectives of the business community including human resource professionals, school nurses and emergency department staff.
- Held four 1:1 interviews and received written comments from one person who was not available for one of the above discussions.
- Collected 143 responses to an online survey.
- Organized a five-member Data Team to develop performance measures for the 2019-2022 priorities.
- Re-convened the original group of 17 community leaders to review and accept the proposed priorities for the 2019-2022 CHNA.

The priority areas identified in 2016 (Access to Care, Built Environment, Mental Health, and Workforce) remain priorities in 2019. Much has been accomplished in each of these areas but there is still work to be done. More importantly, these should no longer be considered these as separate and distinct issues and we need to begin to better understand how they are inter-connected. The most dramatic new development that must be addressed was the introduction of Medicaid Managed Care.

The 2019 CHNA focuses on the four broad categories vs. specific priority language. As a result, the group of community leaders conducting the CHNA created four broad vision statements for each category. The group also added specific shorter-term goals (3-5 years) for each with overlap to facilitate intersections. There is also now an overriding community vision statement to help connect them together rather than creating stand-alone goals.
COMMUNITY VISION

Promote access to all levels of health. Zero barriers. Zero disparities.

2019 PRIORITIES AND GOALS

Priority #1: Ensure equal access to health care for all.

1. Increase investments/reimbursements for prevention.
2. Reform Medicaid Managed Care to reduce barriers to accessing necessary services.
3. Increase community understanding and support of mental health, reducing stigma and encouraging parity between mental health and physical health.
4. Reduce transportation barriers, particularly for people of low incomes and rural families.
5. Ensure individuals with mental health needs are connected to appropriate services-avoiding unnecessary jail and emergency room referrals.
6. Increase avenues of understanding and cultural humility, reducing barriers for individuals seeking services.

Priority #2: Establish communities and neighborhoods that are safe, accessible and available to everyone include public gathering places for diverse and integrated engagement, and promote healthy relationships.

1. Increase and utilize physical community spaces to foster social connectivity, civility and build trusting relationships.
2. Reform Medicaid Managed Care to allow for more flexible reimbursement strategies.
3. Ensure everyone has a place to be safe and active.
4. Increase the availability of safe, affordable and stable housing.

Priority #3: Improve the social/emotional well-being of the community.

1. Identify and implement work-site strategies to reduce stress/trauma.
2. Advocate for the establishment and implementation of a children’s mental health system.
3. Increase early identification, detection and intervention programs for children.
4. Increase psychiatric residency slots and efforts to increase practitioner retention.
5. Reform Medicaid Managed Care to improve reimbursement rates and the timeliness of payments, to prevent the disruption or elimination of necessary services and valuable providers.

Priority #4: Increase the capacity (size and skills) of the health care workforce to create and sustain health.

1. Increase training opportunities for trauma informed care* /mental health first aid.*
2. Expand efforts to develop a more diverse workforce that better reflects the patient population.
3. Increase the number of people and organizations who receive cultural and humility and implicit bias training.*
4. Reform Medicaid Managed Care to improve reimbursement rates to minimize staff turnover.
5. Improve recruitment and retention rates to address the unique challenges of rural Polk, Dallas and Warren counties.

The priorities of the 2019 CHNA were approved by a group of Key Decision Makers that consisted of community leaders. These leaders were convened to formalize the identified priorities and form consensus on the goals. The 2019 CHNA was accepted by the UPHDM Board of Directors in December of 2018. This acceptance requires UPHDM to develop and carry out an Implementation Strategy.

*Trauma Informed Care TIC* 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.

*Mental Health First Aid* Mental Health First Aid is a course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.

*Cultural Humility and Implicit Bias* Cultural Competence implies the intentional creation of a system of institutional values supported by a framework of policies, training, and education that increases the achievement of minority groups and increases workplace efficiency for all. Unconscious biases are stereotypes activated by interaction with a member of a stereotyped group. The person experiencing this bias does not intentionally will this feeling of dislike or distrust into existence, but feels it emerge based on cultural influences rather than personal beliefs.
IMPLEMENTATION STRATEGY DEVELOPMENT PROCESS

To develop the 2019 Implementation Strategy, UPHDM utilized the wealth of expertise from within our organization. The UPHDM Community Engagement team worked to identify staff experts to form a Planning Team. Individuals that had relevant knowledge to each of the priorities formed a Task Group to address each priority. In total, 24 staff members participated. During the initial meeting of each group, we explored and identified the following:

1. What current tactics are currently in place at UPHDM to meet this priority/goal?
2. What tactics could be implemented in the short term (1-2 years) with strategic partnering and resources?
3. What big ideas need to be explored and if possible, acted upon?

During a second planning meeting, each task group fine-tuned the work by refining our list of tactics, identifying efforts that can be measured along with metrics and finally prioritized the short term and long-term/big idea efforts. This overall process has led to the development of this 2019 Implementation Strategy.

Moving forward, these Task Groups will meet annually over the course of the Implementation Strategy timeline (3 years) to review metrics and assess progress towards each priority. The groups will also assist in making any necessary amendments to the plan based on identified outcomes, opportunities and needs.

IMPLEMENTATION OF NEW STRATEGIES AND TACTICS

As previously mentioned, in the process of developing the Implementation Strategy, the Task Groups identified tactics that could be implemented within the initial years of the plan. These represented emerging work and or work that is believed could be realistically implemented with focused strategic planning. These tactics will be addresses in the initial 1 to 2 years of the Implementation Strategy. Also identified were tactics the group felt warranted further exploration. These tactics in general would require additional planning, partners and resources to implement. It was felt that these could be tactics to try to address by the end of the 2019 Implementation Strategy.

The execution and monitoring of the Implementation Strategy will be the responsibility of the Community Engagement Team. Current tactics will be tracked for identified metrics when available and incorporated into the Community Benefit Reporting process. Newly identified strategies will be prioritized and the necessary resources, internal and external will be identified to carry them out.
The implementation of many of these tactics will require their own unique strategic plan. In many cases various partners will be needed to move the work forward. It is anticipated that would include community partners such as foundations, healthcare systems, public health and government agencies. It will also at times require closer internal and system partners. Some of the tactics identified will require collaboration with UnityPoint Health System Services and UnityPoint Clinics to be successful.

To carry out some of these tactics will require a dynamic approach as some of them respond to issues that can be fluid within the changing environment of healthcare and communities. Some of the tactics are also bold and large in scale. This will require leveraging significant resources and partners. Fortunately, UPHDM is well position as a respected community partner and leader. This in itself will serve as a valuable asset as we implement our plans.

The Implementation Strategy Planning Team members will serve as an important resource to assist with operationalizing and new tactics. Again, this group represents an incredible wealth of knowledge, skills, connections and community recognition. This group will also be convened annually to assist with assessing and amending the Implementation Strategy progress.

**ALIGNMENT WITH UPHDM STRATEGIC PLAN**

UnityPoint Health-Des Moines has always emphasized its mission 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 more than 90 strategies and tactics in place to address the community's health needs. Further, UPHDM has dedicated staff across the organization who are actively engaged with the community to identify and address areas of need.

The 2019 CHNA and accompanying Implementation Strategy create opportunities to align our community work with the UPHDM Strategic Plan and Roadmap Priorities. These are: **Care Experience, Care Delivery, Care Financing and Care Innovations.**

These UPHDM priorities in many instances support and compliment the CHNA priorities. Particularly those within CHNA Priorities 1, 3 and 4. The overall Roadmap, driven by **FOCUS (Foster Unity, Own the Moment, Champion Excellence, Seize Opportunities)** and our **Committed Team** extends to the work we engage with in the community. These values all transfer to and expand outside the walls of our organization.

Many of the identified tactics that UPHDM is offering in response to the 2019 CHNA priorities 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. Upon the completion of this latest CHNA, the Community Engagement Team has worked with Task Group members to develop the finalized Implementation Strategy. This will become the guiding source of Community Engagement planning. **The Community Engagement Team**
will make any needed 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, current and future, to address existing and emerging needs. Currently, UPHDM is a community leader in responding to partner requests to collaboratively address the health of the population. This will continue to be part of UPHDM’s ongoing community response. Internal planning and assessment of the allocation of resources will be implemented to appropriately address community health needs.
2019 UPHDM IMPLEMENTATION STRATEGY

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

CHNA Priority #1

*Ensure equal access to health care for all.*

<table>
<thead>
<tr>
<th>Priority Goal</th>
<th>Currently Implemented Tactics</th>
<th>Implement Years 1-2</th>
<th>Implement 2+ Years</th>
</tr>
</thead>
</table>
| Increase investments/reimbursements for prevention. | • Community Health Worker  
• LGBTQ Clinic  
• 2-1-1 APP  
• UPH Prescription Drug Safety Program  
• Screening Programs  
• Collaboration with One Iowa and Capital City Pride  
• Healthy Homes – Des Moines  
• BCH Advocacy and Outreach programming  
• 5210 Blank Childhood Obesity Clinic  
• HPV vaccination  
• Meningitis campaign  
• Vaccine schedule at UPC  
• Fall Prevention program  
• Save Your Skin (teen tanning prevention)  
• 80 by 2020 (colon cancer screening)  
• Strata - iPad translation | | • Broader coalition between healthcare and local churches regarding social determinants of health (neighborhoods, transportation, etc.)  
• Behavioral Health Urgent Care |
<table>
<thead>
<tr>
<th>Services</th>
<th>Reform Medicaid Managed Care to reduce barriers to accessing necessary services.</th>
<th>Increase community understanding and support of mental health, reducing stigma and encouraging parity between mental health and physical health.</th>
<th>Reduce transportation barriers, particularly for people of low incomes and rural families.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Medical/Iowa Legal Aid Partnership</td>
<td>• Healthy Homes – Des Moines</td>
<td>• UPH Prescription Drug Safety Program</td>
<td>• Community Health Worker</td>
</tr>
<tr>
<td>• Sober Under the Stars</td>
<td></td>
<td>• Telehealth providers (Psych ARNP with rural affiliate)</td>
<td>• 2-1-1 APP</td>
</tr>
<tr>
<td>• Safe Net Rx</td>
<td></td>
<td>• Psychiatric Residency</td>
<td>• Telehealth providers (Psych ARNP with rural affiliate)</td>
</tr>
<tr>
<td>• MedAssist (Medication Assistance Program)</td>
<td></td>
<td>• Mind Matters at SCI</td>
<td>• Screening programs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Free bereavement care through UnityPoint at Home</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Blank “Connections” program with Every Step</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Medical/Legal Partnership</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• EB Mobile Crisis units</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• FACT (Forensic Assertive Community Treatment)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Healthcare providers engaged in MCO discussions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Systems/Governors Oversight</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Healthcare providers engaged in MCO discussions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Consider closer partnerships with Iowa Interfaith Alliance and Drake University Comparison Project</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• UPH Innovation Center – Behavioral Health technology discussions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Behavioral Health Urgent Care</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Behavioral Health crisis services for UPC</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Broader coalition between healthcare and local churches regarding social determinants of health (neighborhoods,</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ensure individuals with mental health needs are connected to appropriate services-avoiding unnecessary jail and emergency room referrals.</td>
<td>Increase avenues of understanding and cultural humility, reducing barriers for individuals seeking services.</td>
<td>transportation, etc.)</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
</tbody>
</table>
| • JSCC with Uber  
• Blank “Connections” program with Every Step  
• EB Mobile Crisis units  
• Hospital at Home and Care at Home (UPC) – post-discharge home waiver for NextGen patients  
• Meds to Beds program  
• Partnership with Wesley for wheelchair transport | • Eyerly-Ball staff working in ILH Access Center for jail diversion/unnecessary admissions  
• UPH Prescription Drug Safety Program  
• Psychiatric residency  
• Medical/Legal Partnership | • Behavioral Health Urgent Care |
| | • Community Health Worker  
• LGBTQ Clinic  
• Cultural Competency Training – Mgmt. Team  
• Partnership with One Iowa and Capital City Pride  
• Residency Continuity Clinic (Broadlawns and VA) | • Expand partnership with One Iowa |
CHNA Priority #2

Establish communities and neighborhoods that are safe, accessible and available to everyone include public gathering places for diverse and integrated engagement, and promote healthy relationships.

<table>
<thead>
<tr>
<th>Priority Goal</th>
<th>Currently Implemented Tactics</th>
<th>Implement Years 1-2</th>
<th>Implement 2+ Years</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Increase and utilize physical community spaces to foster social connectivity, civility and build trusting relationships</em></td>
<td>• Farmers Markets&lt;br&gt;• Yoga in the Park&lt;br&gt;• Edible Landscapes&lt;br&gt;• Des Moines Social Club Wellness Studio&lt;br&gt;• Brenton Skating Plaza Sponsorship&lt;br&gt;• Free Flicks&lt;br&gt;• Trail Maps</td>
<td>• Highlight natural spaces on campuses (Meditation Garden, Giving Garden, Orchard)&lt;br&gt;• Pollinator Habitat at ILH&lt;br&gt;• “Walk with a Doc” to support 5210 program</td>
<td>• Walking path at Methodist West Hospital</td>
</tr>
<tr>
<td><em>Reform Medicaid Managed Care to allow for more flexible reimbursement strategies</em></td>
<td>• Healthy Homes Des Moines</td>
<td>• Explore partnership with Rebuilding Together for home environment</td>
<td></td>
</tr>
<tr>
<td><em>Ensure everyone has a place to be safe and active</em></td>
<td>• Des Moines Social Club Wellness Studio&lt;br&gt;• Safe Haven designation&lt;br&gt;• Pedestrian Safety Video&lt;br&gt;• Conference Space use&lt;br&gt;• Snow clearing and public safety to Methodist church/ Hoyt Sherman&lt;br&gt;• WWI Memorial Upkeep&lt;br&gt;• Ronald McDonald House&lt;br&gt;• ED Policy for Homeless Shelter Referral during cold weather</td>
<td>• B-Cycles Kiosks on campuses&lt;br&gt;• Expanded bike rack locations&lt;br&gt;• 2-1-1 App connection to park and recreation resources&lt;br&gt;• 5210 Referral Resources&lt;br&gt;• Access to Walking Path Carver School</td>
<td>• Walking path at Methodist West Hospital</td>
</tr>
<tr>
<td><em>Increase the availability of safe, affordable and stable housing</em></td>
<td>• Healthy Homes DSM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### CHNA Priority #3

**Improve the social/emotional well-being of the community**

<table>
<thead>
<tr>
<th>Priority Goal</th>
<th>Currently Implemented Tactics</th>
<th>Implement Years 1-2</th>
<th>Implement 2+ Years</th>
</tr>
</thead>
</table>
| **Identify and implement work-site strategies to reduce stress/trauma.** | • UPHDM Wellness programming  
  • On Point for Health program  
  • EAP services  
  • Embracing U  
  • Dr. Nish Guided Imagery  
  • Dan Harkness, Bedside Awareness (Residents)  
  • Wellness Sub-committee of ACGME  
  • Day One and New Leader U  
  • ACEs/Trauma Informed Care Community participation  
  • Mind Matters at SCI  
  • Yoga in the Park  
  • Farmers Market  
  • UPH Health Risk Assessment (internal and within community)  
  • Wellness Coaching  
  • Connections Matter  
  • Safe Zone Training LGBTQ  
  • Wellness Comes to You | • Expand Embracing U program  
  • Integrated Medicine Committee work  
  • Mindfulness-Dr. Nish  
  • Focus ACEs/TIC internally  
  • Enhanced delivery of Connections Matter (E-B)  
  • Follow up plan and action for employee HRA (share with community)  
  • Mental Health First Aid Training (E-B) for all of UPHDM staff | • Volunteer Time Off |
| **Advocate for the establishment and implementation of a children’s mental health system.** | • ACEs/Trauma Informed Care Community participation  
  • Sources of Strength  
  • Connections Matter  
  • Mental Health First Training (E-B) | | • Behavioral Health Urgent Care |
| Increase early identification, detection and intervention programs for children. | • Psychiatric residency program  
• ACEs/Trauma Informed Care Community participation  
• Mind Matters at SCI  
• Yoga in the Park/Farmers Market  
• Sources of Strength  
• Big Journal  
• Connections Matter  
• Care Coordination in the ED/Access Center at ILH (E-B)  
• Mental Health First Training (E-B) | • Behavioral Health Urgent Care  
• PC training of Mental health through telehealth |
| Increase psychiatric residency slots and efforts to increase practitioner retention. | • Dan Harkness, Bedside Awareness (Residents) | • Behavioral Health Urgent Care |
| Reform Medicaid Managed Care to improve reimbursement rates and the timeliness of payments, to prevent the disruption or elimination of necessary services and valuable providers. | • Care Coordination in the ED/Access Center at ILH (E-B) | • Behavioral Health Urgent Care |
CHNA Priority #4

*Increase the capacity (size and skills) of the health care workforce to create and sustain health*

<table>
<thead>
<tr>
<th>Priority Goal</th>
<th>Currently Implemented Tactics</th>
<th>Implement Years 1-2</th>
<th>Implement 2+ Years</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Increase training opportunities for trauma informed care/mental health first aid.</em></td>
<td>• Trauma Informed Care educational webinar created for Blank</td>
<td>• Expand Apprenticeship Trainings</td>
<td>• Train all UPHDM clinical leaders in Mental Health First Aid to be able to better support their employees &amp; providers.</td>
</tr>
<tr>
<td><em>Expand efforts to develop a more diverse workforce that better reflects the patient population.</em></td>
<td>• Retention Specialist • Diversity and Inclusion Committee • Recruitment referral incentive for clinic employees (hospital and rural affiliates) • Central Iowa Works • Iowa Vocational • Lutheran Services of Iowa • Bureau of Refugee Services • IowaWorks • Evelyn K Davis Center • Project SEARCH with Des Moines Public Schools • IHA scholarship promotion • Partnership with One Iowa • Latino Heritage Festival • Partnership with Iowa Works/Iowa Employment Solution • More diverse representation in PR efforts</td>
<td>• Volunteer Time Off • Expanded Wellness Services • Expanded Maternity Leave</td>
<td></td>
</tr>
<tr>
<td><em>Increase the number of people and organizations who receive cultural and humility and</em></td>
<td>• Cultural Humility training • Retention Specialist • Diversity and Inclusion</td>
<td>• Safe Zone Training</td>
<td>• Cultural humility/implicit bias in healthcare training via NetLearning.</td>
</tr>
<tr>
<td>Implicit bias training.</td>
<td>Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Reform Medicaid Managed Care to improve reimbursement rates to minimize staff turnover. | - Discussion of Medicaid reimbursement rates with legislators and DHS Director Foxhoven,  
- UPH contract negotiations with MCOs. |

| Improve recruitment and retention rates to address the unique challenges of rural Polk, Dallas and Warren counties. |  
- Retention Specialist  
- Some loan repayment for physicians  
- Recruitment referral incentive for clinic employees (hospital and rural affiliates)  
- Physician retention bonus  
- IHA scholarship promotion |  
- Expanded Apprenticeship Trainings |

|  |  
- Volunteer Time Off  
- Expanded Wellness Services  
- Expanded Maternity Leave  
- Partner recruiting efforts with Latina Leadership and Office of Latino Affairs |
UnityPoint Health-Des Moines Community Engagement Team

- Monica Aunan  Physician and Clinic Liaison
- Angie Fagervik-Chia  Marketing and Communications Specialist
- Dave Kading  Director, Business Development
- Chris McCarthy  Community Health Project Manager
- Paige Moore  Director of Patient Experience
- Sid Ramsey  Vice President, Strategic Business Development (Executive Sponsor)

UnityPoint Health-Des Moines Implementation Strategy Planning Team

- Alec Ballard  Intern, Public Relations
- Emily Brown  Retention Specialist, Human Resources
- Kevin Carroll  Vice President, Behavioral Health
- Lindsay Dressen  Marketing and Communications Specialist
- Brian Feist  Program Coordinator, Trauma Services
- Dr. Jennifer Groos  Physician, Blank
- Della Guzman  Manager, Wellness
- Eric Johnson  Director of Pastoral Care
- Joyce McDanel  Vice President Human Resources
- Kristin Mohr  Executive Director, Properties
- Paige Moore  Director of Patient Experience
- Jeff Quigle  Director of Technical Services
- Janell Schlosser  Clinic Director, East Des Moines Family Practice
- Cynthia Steidl  Executive Director, Eyerly Ball
- Matt Swanstrom  Director of Clinic Operations – UnityPoint Clinics
- Ashley Thompson  Government Relations Director – UnityPoint Health
- Raedean Vandenover  Director, Organized System of Care
- Mike Wilwol  Manager, Safety
- Lynley Wolfe  Manager, Social Work
- Chaney Yeast  Director of Government Relations - Blank
- Sarah Zeidler  Executive Director, Oncology
Currently Implemented Tactics Addressing CHNA Priorities

2-1-1 APP: 2-1-1 of Iowa is a resource and referral directory that provides phone and web-based assistance to practitioners and individuals regarding community resources to support patients/clients. UPHDM is helping to develop an APP version that will be available in the Spring of 2019 to assist in a more timely and convenient method.

5210: (5 servings of fruits & vegetables, 2-hour limit of screen time, 1 hour of daily exercise, 0 sugary beverages) Blank Childhood Obesity Clinic with Dr. Jennifer Groos provides medical management, dietician consultation, wellness coaching and outreach/support.

80% in Every Community (colon cancer screening): National Colorectal Cancer Roundtable initiative that continues the progress and commitment from 80% by 2018, and reemphasizes our dedication to partnership, collective action, and the pooling of resources to reach 80% colorectal cancer screening rates nationally.

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.

Big Life Journals – UPHDM partnered with the Johnston School Foundation to provide Big Life Journals to 2 fourth grade classes. BLJ are packed with stories, poems, quotes, illustrations and writing prompts, this guided journal is the world's first growth mindset book created specifically for children. Growth mindset activities help children to recognize their ability to learn and motivates them to harness the power of their own mind. It helps children learn to embrace challenges, to persevere, and how to grow from feedback.

Blank Children’s Hospital Advocacy and Outreach programming Medical Outreach: Free Childbirth Education classes, Pediatric Advanced Life Support (PALS) & Basic Life Support (BLS) education, Neonatal & Pediatric Outreach education.

Brenton Skating Plaza: UnityPoint Health – Des Moines supports the efforts of BSP to help encourage physical activity in the winter through skating and other programs.

Broader look at education and experience in hiring process: Positions that do not have a license or certification that’s required will allow education and work experience to be interchangeable when considering qualifications for employment.

Bureau of Refugee Services: Partnership with BRS to provide support and training opportunities for our team members and interested candidates. In October we’ll be hosting the 2019 Refugee Summit that’s held in Des Moines every year. This conference brings education and awareness about refugees.
C.A.R.E. Connect Guided Imagery: John Stoddard Cancer Center offers free guided imagery through C.A.R.E. Connect, a web streaming service. Combining stunning nature imagery with soothing instrumental music, C.A.R.E. Programming creates a window to the outdoors and helps ease anxiety and stress, while promoting rest and sleep for patients and caregivers. C.A.R.E. Connect may be accessed at any time on a personal web-enabled device.

Care Coordination in the ED/Access Center at ILH (E-B): Eyerly Ball provides care coordination for mental health patients presenting in the emergency department and Access Center at Lutheran Hospital.

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.

Carver Elementary: Carver Elementary School is located across the street from Iowa Lutheran Hospital. UPHDM Facilities Staff assists in assuring clear and safe access on the sidewalks adjacent to the school. They also provide many ad hoc services various school programming.

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.

Collaboration with One Iowa and Capital City Pride: UPHDM is actively working on programmatic partnerships, trainings and sponsorships with One Iowa, a LGTBQ advocacy organization.

Community Health Worker: Community Health Workers are dedicated staff assigned to help specific patients address the Social Determinants of health that may be keeping them from optimal health outcomes. UPHDM is participating in a Demonstration Project to pilot this concept within one of its clinic sites.

Conference Space: UPHDM readily makes its conferences spaces available to community organizations. This allows for organizations and collaboratives to enjoy a convenient and free meeting space to further work within our communities.

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.
Connections program with Every Step: Connections program with Every Step Currently contracted to provide services in the Blank General Pediatrics, Developmental Clinic and Hematology/Oncology Clinics. Every Step provides referral services to community resources, more in-depth developmental assessment, and supports to address the social determinants of health.

Cultural Competency Training – Mgmt. Team, Emp. Engagement Ambassadors, Rural affiliates: All leaders were invited to spend hour learning about cultural humility and the impact it has in healthcare.

Cultural Humility and Implicit Bias Training: Training to recognize and address the intentional creation of a system of institutional values supported by a framework of policies, training, and education that increases the achievement of minority groups and increases workplace efficiency for all. Unconscious biases are stereotypes activated by interaction with a member of a stereotyped group.

Dan Harkness, Bedside Awareness (Residents): Dr. Harkness works to educate Residents on effective recognition of mental health issues when working with patients in the hospital.

Des Moines Social Club Wellness Studio: UnityPoint Health – Des Moines in partnership with the Des Moines Social Club remodeled and Movement Studio where many of the fitness and community outreach classes are held. This is a 2 year agreement started in 2018.

Discussion of Medicaid reimbursement rates with legislators and DHS Director Foxhoven, UPH contract negotiations with MCOs: Blank Advocacy staff involved.

Diversity and Inclusion Committee: Employee Resource Group that supports the organization with developing HR policy, education and community involvement opportunities that promote a diverse and inclusive environment.

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

EAP Services: The Employee Assistance Program (EAP) provides free, confidential and short-term counseling to employees or family members as part of their benefits. Our licensed professional staff provide a confidential setting where employees, students and their family members feel free to seek help and solve personal and family problems, learn new coping skills and enhance their work or school performance.

Edible Landscapes: Landscaping on the Iowa Lutheran Hospital campus that aesthetically incorporates fruit and vegetable plants on the grounds. Community partners, staff and targeted patient units assist with planting, harvesting and distribution of produce.
ED Policy for Homeless Shelter Referral During Cold Weather: During adverse winter conditions the ED facilitates referrals to shelters for patients that require it.

Embracing U: A new peer to peer support program created to have an Embracing U representative in each department of the hospital to serve as resource for teammates who may be in need of support.

Evelyn K Davis Center: Partnership with the EKDC to provide support and training opportunities for our team members and interested candidates.

Eyerly Ball Mobile Crisis units: Eyerly Ball and the CICS are now offering a 24/7 Mobile Crisis Response Team (MCRT) for the CICS’s 10-county region, which has been split into two sections for the response teams. The South Team covers Madison, Warren, Jasper and Poweshiek counties, and the North Team covers Boone, Story, Marshall, Hardin, Hamilton, and Franklin counties.

Eyerly Ball working in ILH Access Center for jail diversion/unnecessary admissions: Jail Diversion was developed to assist inmates with mental health issues, both in jail and in the community. The purpose of the program is to prevent or minimize the number of mentally ill individuals in jail by providing supportive services during incarceration followed by community-based treatment upon release.

FACT (Forensic Assertive Community Treatment): The Forensic Assertive Community Treatment (FACT) team serves individuals in the criminal justice system with a serious mental illness. FACT works to help people live successfully in the community while avoiding a return to jail, prison, or unnecessary psychiatric hospitalizations. The multi-disciplinary team operates as a mobile outreach team - meeting clients in their home or community to provide services.

Fall Prevention through Physical Therapy: Internal group that sees that every patient gets a fall screening regardless of chief complaint. Any patient identified as a moderate to high fall risk will get a treatment plan that includes an evaluation and treatment from their PCP. These patients can be referred to PT, Tai Chi, and Matter of Balance.

Free bereavement care through UnityPoint at Home: UnityPoint Hospice bereavement services offer classes, grief counselors, and support groups to help you and your family deal with the pain of loss.

Free Flicks: A partnership with Des Moines Parks and Recreation Department to provide family friendly recreational opportunities for individuals living in central Iowa. It’s an opportunity to highlight the many parks in Des Moines as well as make a community connection with our clinics in neighborhoods close to the parks.
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.

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.

Hospital at Home and Care at Home (UPC) – post-discharge home waiver for NextGen patients: Process to discharge people from the ED who would have previously been admitted to the hospital for expanded in-home care from UPC providers.

Hoyt Sherman Assistance: UPHDM offers free parking and security rounds to support one of the area’s premier civic engagement and entertainment venues. Hoyt Sherman is a neighbor in physical proximity to the Methodist Medical Center campus.

Human Resources Incentives: Some loan repayment for physicians, Recruitment referral incentive for clinic employees (hospital and rural affiliates) and Physician retention bonus.

IHA Scholarship Promotion: Human Resources works to promote the Iowa Hospital Associations scholarship program to employees who can benefit.

In-house translation services & video interpretation (via Strata): UPH-DM employs full-time Spanish interpreters and uses technologies (both video and over-the-phone) to interpret over 50 languages for our patients and visitors.


Iowa Vocational: Partnership with IVRS to provide support and training opportunities for our team members and interested candidates.

IowaWorks: Partnership with Iowa Works to provide support and training opportunities for our team members and interested candidates.

JSCC partnership with Uber: John Stoddard Cancer Center partners with Uber Central to provide free rides to patients who may not otherwise have transportation to their appointments or treatments. The cost of the rides is covered by philanthropy.

LGBTQ Clinic: UnityPoint Health will be opening a new LGBTQ Clinic in April 2019 to meet the medical needs of the LGBTQ community.
**Lutheran Services of Iowa:** Partnership with LSI to provide support and training opportunities for our team members and interested candidates. LSI teaches a Work Based Literacy class that we provide for our staff who are English language learners.

**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.

**MedAssist (Medication Assistance Program):** Staff work with patients who have an expensive medication but are not able to pay to find reduced prices.

**Meds to Beds program:** Medications are delivered to patients in the hospital that will be needed for post discharge.

**Mental Health First Training:** Mental Health First Aid is a course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.

**Mind Matters Exhibit:** UnityPoint Health – Des Moines sponsored the Mind Matters exhibit at the Science Center of Iowa. This exhibit aims to build greater understanding of the importance of mental health and create a safe space for meaningful conversations about mental illness. Hands-on exhibit experiences bring you closer to facts, feelings and issues surrounding this significant topic.

**Neighborhood Security and Access:** In addition to Hoyt Sherman, UPHDM provides services such as security rounds and snow removal for neighboring organizations such as the WWI Memorial and the Methodist Church.

**On Point for Health Program:** On Point for Health is a Rewards Portal, Employees & spouses earn financial rewards by completing challenges, regional events, health risk survey and health coaching.

**Pedestrian Safety Video:** Blank Children’s Hospital has collaborated with Drake University to develop pedestrian safety videos as a public service.

**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.

**Promotion of Vaccinations at UnityPoint Clinics:** Vaccine schedule at UPC, Meningitis campaign, HPV vaccination promotions.
**Psych Residency Program:** Broadlawns Medical Center and UnityPoint Health – Des Moines offer a jointly-administered psychiatry residency program that has earned full accreditation from the Accreditation Council for Graduate Medical Education. The Broadlawns UnityPoint Health Psychiatry Residency program welcomed the first class of four residents into its four-year training program in July 2018.

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

**Residency Continuity Clinic:** Medical Residents provide coverage for clinics at Broadlawns Medical Center and the VA Hospital.

**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.

**Ronald McDonald House:** Ronald McDonald House of Central Iowa provides low-cost accommodations for families of children receiving medical care at UnityPoint Health – Des Moines, MercyOne and other healthcare providers throughout the Des Moines metro. UPH-DM owns the land where RMH sits and does not charge RMH rent/lease. UPH-DM also helps provide security and grounds services.

**Safe Haven:** Our four hospitals serve as safe havens in our community. The Safe Haven Act is an Iowa law that allows parents – or another person who has the parent’s authorization – to leave an infant up to 14 days old at a hospital or healthcare facility without fear of arrest or going to court.

**Safe Net Rx:** Drug donations repository for distribution to patients in need of assistance.

**Safe Zone Training (LGBTQ):** Safe Zone trainings are opportunities to learn about LGBTQ+ identities, gender and sexuality, and examine prejudice, assumptions, and privilege.

**Save Your Skin (teen tanning prevention):** John Stoddard Cancer Center’s Save Your Skin project is taking aim at informing people about the dangers of using tanning beds. Videos and other presentations have been created to help educate the community.

**Sober Under the Stars:** This alcohol and chemical-free event is held each year to meet the needs of those wanted to celebrate the New Year in a safe and chemical-free environment.
Sources of Strength: UnityPoint Health partnered with the Johnston School Foundation to provide Sources of Strength training for teachers and students. SS is a best practice youth suicide prevention project designed to harness the power of peer social networks to change unhealthy norms and culture, ultimately preventing suicide, bullying, and substance abuse.

Telehealth providers at EB and 1 at Lakeview (Psych ARNP with rural affiliate): Eyerly Ball provides mental health telehealth services to rural affiliates.

Trauma Informed Care Educational Webinar created for Blank staff: 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.

UPH Health Risk Assessment: Optimum Health Solutions (Owned by UnityPoint Peoria) is the provider for our online Health Risk Assessment Survey Portal. This portal is also utilized by Wellness Services (Corporate Wellness), where we provide this portal along with health screenings to Businesses in the Des Moines Metro.

UPH Prescription Drug Safety Program: Digital prescription drug safety course developed by EVERFI. UnityPoint Health is providing the curriculum to select high schools in communities we serve across the state at no cost to the participating schools.

Wellness Coaching: Health Coaching is available to all employees and spouses at UPHDM and Available to all Corporate Wellness Businesses. Health Coaches are trained in the Intrinsic Coaching Methodology which assists individuals in using best thinking to identify steps and create results that are important for them.

Wellness Comes to U: Wellness Comes to U is a platform consisting of a variety of educational presentations and interactive activities. Wellness Services is available to attend staff meetings, retreats and events to offer the following: Laughter is Medicine, 3 Good Things, strength and resistance exercises, stretching and desk exercises, stress breaks, relaxation techniques.

Wellness Sub-committee of ACGME: The Wellness Subcommittee is a group that will have a direct reporting relationship to the GMEC. Our mission is to improve the wellness of the residents, faculty and employees of UnityPoint Health-Des Moines.

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.