

COMMUNITY HEALTH NEEDS ASSESSMENT

Alger County, Michigan 2012-13

Munising Memorial Hospital

Munising, MI

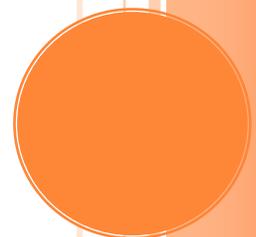


TABLE OF CONTENTS

PURPOSE OF ASSESSMENT	2
EXISTING HEALTH CARE FACILITIES AND OTHER RESOURCES	2
MUNISING MEMORIAL HOSPITAL	2
ALGER COUNTY CHAMBER OF COMMERCE.....	5
COMMUNITY DESCRIPTION & MARKET AREA.....	6
SECONDARY DATA.....	9
SHORTAGES IN ALGER COUNTY.....	16
PRIMARY DATA	16
ALGER COUNTY COMMUNITY HEALTH CARE LEADERS FOCUS GROUP.....	16
HEALTHCARE COMMUNITY FOCUS GROUP	20
IDENTIFICATION AND SUMMARY OF NEEDS	25
PRIORITIZATION AND RECOMMENDATIONS	25
APPENDICES	25

PURPOSE OF ASSESSMENT

Munising Memorial Hospital is dedicated to strengthening the health of Alger County. In the past, Munising Memorial Hospital has employed many different methods to assess the health needs of the community it serves and has adjusted its services to meet those identified needs. Recent changes to federal laws governing non-for-profit hospitals not require Munising Memorial Hospital to conduct a local community health needs assessment, following specific guidelines, every three years and to report the outcome of those assessments as part of their corporate tax filing with the Internal Revenue Service.

Through a joint effort with the Alger County Chamber of Commerce and Munising Memorial Hospital, an assessment of health care needs was conducted through a review of health data, a community healthcare and leaders focus group and feedback from individuals in the community during a community forum and a meeting at the local senior center. This has given Munising Memorial Hospital the opportunity to identify and address the area's health care needs.

EXISTING HEALTH CARE FACILITIES AND OTHER RESOURCES

MUNISING MEMORIAL HOSPITAL

The mission of Munising Memorial Hospital and Health Services is to be the provider of choice for primary medical and hospital care for the residents of Alger County. With unsurpassed personal and professional integrity, our employees and practitioners will provide the highest level of quality care within our resources.

Munising Memorial Hospital Association (the Corporation) owns and operates an 11-bed critical access hospital (the Hospital) in Munising, Michigan. The Hospital mainly serves residents of Alger County. The County is located along the Lake Superior shoreline in Michigan's Upper Peninsula

The Corporation's principal facilities are a hospital building which also houses physician offices comprising the Bay Care Medical Center, a medical office building and the Harbour View Assisted Living Center. All are located adjacent to each other on a campus in Munising.

Munising Memorial Organizational Information

The Corporation is a non-profit corporation organized under the laws of Michigan. The Corporation is exempt from Federal income taxation as an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986.

The Corporation is licensed to operate the Hospital by the Michigan Department of Community Health (MDCH). Various Hospital functions are licensed by other governmental authorities. The Hospital is not currently accredited, mainly due to the administrative burden on a small operation. However, management believes that the Hospital's internal culture and quality practices are comparable to those of accredited hospitals. Lack of accreditation has no effect on the Corporation's eligibility to be a participating provider in Medicare, Medicaid and Blue Cross Blue Shield of Michigan (BCBSM) programs, and has no impact on payment rates there under. The U.S. Centers for Medicare & Medicaid Services (CMS) contracts with MDCH to supplement its periodic licensure survey to address quality and operational matters. Two Hospital functions are currently accredited:

- American College of Radiology accreditation for Mammography service; and
- Community Hospital Laboratory Accreditation (COLA) accreditation of the laboratory.

The Hospital is a member of the Michigan Health and Hospital Association.

Munising Memorial Hospital Quality Metrics

The Hospital has made an organization-wide commitment to improving patient safety and the overall quality of patient care. The Hospital has routinely earned Governor's Awards for Improving Patient Safety and Quality of Care in the Critical Access Hospital Setting. As a CAH, the Hospital is not eligible to receive bonus payments from BCBSM for demonstrating superior quality. The Hospital's small size precludes data collection by CMS that are used to assemble Hospital Quality Measures.

Munising Memorial Hospital Facilities and Services

The Corporation owns and operates the Hospital, which, as a CAH, is licensed for 11 acute care beds. All acute care beds are situated in six rooms facing Munising Bay of Lake Superior. All inpatient care and most outpatient services are delivered under one

roof in the Hospital Facility. An independent physician office and space for visiting specialists are attached to the Hospital Facility.

The scope of services provided by the Hospital is generally similar to that provided by other CAHs. The Hospital Facility contains the following areas:

- a completely digitalized radiology department features a general X-ray room, CT scanning, fluoroscopy, ultrasound, Dexascanning (bone mineral density) and digital mammography;
- the operating room consists of one main suite, a scope room and a five-bed recovery area;
- the laboratory accommodates two private drawing rooms and features upgraded technology;
- the outpatient rehabilitation department features four treatment rooms, a hydrotherapy room, as well as showers for gym participants;
- the emergency department is triple the size of its former quarters, and houses a walk-in area, three private exam rooms, a three-bay trauma room and a decontamination area;
- the six inpatient rooms display a homelike, comfortable atmosphere; and
- two conference centers can be used for support groups, educational programs and administrative meetings.

Inpatient beds can be used for observation and same-day surgery patients, and for a Respite Care Program which provides short-term accommodations to otherwise homebound patients to relieve their care givers.

The Hospital's emergency department is classified as a Level IV trauma center by the American College of Surgeons. A Level IV trauma center provides initial evaluation, stabilization, diagnostic capabilities and transfer to a higher level of care. The Corporation maintains a transfer agreement with MGH, which operates a Level II trauma center, to which nearly all transfers are directed. Consistent with this designation, all surgical procedures performed at the Hospital are elective in nature. The County's emergency medical service (EMS) is operated by the County Sheriff's Department. In many situations, serious trauma cases, especially those resulting from incidents occurring west of the Hospital Facility, will be transported directly to MGH.

Munising Memorial Medical Staff

Four primary care physicians comprise the Hospital's active medical staff (the Active Staff). The Corporation employs two family practitioners and one pediatrician who also treat adults. The other physician is an internist in private practice. These physicians are complemented by two PAs and two Nurse Practitioners, both of whom are employed by the Corporation. Supplementing the Medical Staff are specialists who hold office hours periodically.

Currently in Alger County the majority of the health care facilities and services are in Munising. Located in Munising are:

- Four dental offices
- Four mental health services
- Three primary care clinics and walk-ins
- One tribal health center
- The health department servicing Alger County
- Two chiropractic offices
- Two optometrists

Also in Alger County, there are two small limited hours primary care clinics located in Trenary and Grand Marais.

In regards to long term care facilities there is:

- One nursing home
- Five adult foster care homes
- One home for the aged
- One assisted living facility

In addition, in Munising/Alger County there is one home health care and hospice organization, diabetes educational programming and the Alger County Commission on Aging.

ALGER COUNTY CHAMBER OF COMMERCE

The Alger County Chamber of Commerce was chosen to assist in facilitating the community health needs assessment due to their relationship with the Alger County community, organizations, businesses and leaders. Dr. Katherine A. Reynolds, executive director of the organization, was assigned the task of facilitating community meetings with both the public and community health leaders, and the task of preparing the report.

Dr. Reynolds has a Ph.D. from Southern Illinois University and is well versed in research, writing and community relations. She also has previous work experience in rural health services and education.

The Alger County Chamber of Commerce/Greater Munising Bay Partnership for Commerce Development (GMBPCD) aim is to promote tourism and economic development in Alger County. The mission of the Alger County Chamber of Commerce/GMBPCD is to foster a strong economic environment, which contributes to the well being of the municipality, townships and villages in Alger County. They collaborate with and support the area and businesses by formulating sound economic programs and policies that attract, maintain, and provide incentives to business and property owners. They also work to mobilize the area’s resources to create and design consistent marketing strategies to increase tourism by promoting silent/motorized sports and events. The Alger County Chamber of Commerce/GMBPCD works to enhance and open more lines of communication between public and private businesses, associations, agencies and organizations

The Alger County Chamber of Commerce is a branch of the GMBPCD, and is housed at the Fuzzy Boyak Welcome Center on East Munising Avenue (State Highway M-28), ideally located in the center of Munising along the main state highway and adjacent to Munising’s waterfront and Bay Shore Park.

COMMUNITY DESCRIPTION & MARKET AREA

The hospital is located in the City of Munising, MI (Alger County). The population (according to United States Census Bureau 2010 statistics) of Alger County is 9,601. The Hospital defines its market area as the County. The market area is rural in nature. The area economy is supported by small businesses, industries, and tourism.

<u>Service Area Town</u>	<u>Population</u>
Au Train Township	1,138
Burt Township	522
Grand Island Township	47
City of Munising	2,355
Munising Township	2,983
Onota Township	352

Munising Memorial Hospital

Limestone Township	438
Mathias Township	554
Rock River Township	1,212
*Prison Population in Alger Co.	912

Total Population of Alger County	9,601
Housing Status(in housing units unless noted)	
Total	6,554
Occupied	3,898
Owner-occupied	3,228
Population in owner-occupied(number of individuals)	7,294
Renter-occupied	670
Population in renter-occupied(number of individuals)	1,285
Households with individuals under 18	871
Vacant	2,656
Vacant: for rent	145
Vacant: for sale	106
Population by Sex/Age	
Male	5,224
Female	4,377
Under 18	1,645
18 & over	7,956

Munising Memorial Hospital

20 – 24	483
25 – 34	1,056
35 – 49	1,862
50 – 64	2,429
65 & over	1,975
Population by Ethnicity	
Hispanic or Latino	114
Non Hispanic or Latino	9,487
Population by Race	
White	8,286
African American	612
Asian	32
American Indian and Alaska Native	397
Native Hawaiian and Pacific Islander	0
Other	11
Identified by two or more	263

The Median Household income for 2007-2011: \$38,231

Percentage of Population/High School Graduate (or GED): 86.5%

Percentage of Population/College Graduate (Bachelor’s or higher): 17.1%

There are five public school districts in Alger County and Michigan Department of Corrections is the largest employer with 279 employees and Neenah Paper with 252 employees (Northern Michigan University, Economics Department, 2011 statistics). There is one nursing home, six assisted living facilities and one home health provider.

SECONDARY DATA

For secondary data, research was obtained from County Health Rankings, The Robert Wood Johnson Foundation in collaboration with the University of Wisconsin Population Health Institute, the U.S. Department of Health and Human Services and the Michigan State University database. Also, included in the appendix is the Munising/Alger County Community Health Study conducted by Michigan State University, College of Human Medicine in 2009.

According to County Health Rankings and Roadmaps 2012, Alger County, MI is ranked eighth in the state of Michigan for health outcomes. In regards to health factors it is ranked 30th.

	Alger County	Error Margin	National Benchmark*	Michigan	Trend	Rank (of 82)
<u>Health Outcomes</u>						8
Mortality						14
Premature death	5,980	4,049-7,911	5,466	7,273		
Morbidity						6
Poor or fair health	8%	3-18%	10%	14%		
Poor physical health days	4.1	0.9-7.4	2.6	3.5		
Poor mental health days	4.0	1.5-6.4	2.3	3.7		
Low birthweight	5.2%	3.4-7.1%	6.0%	8.3%		

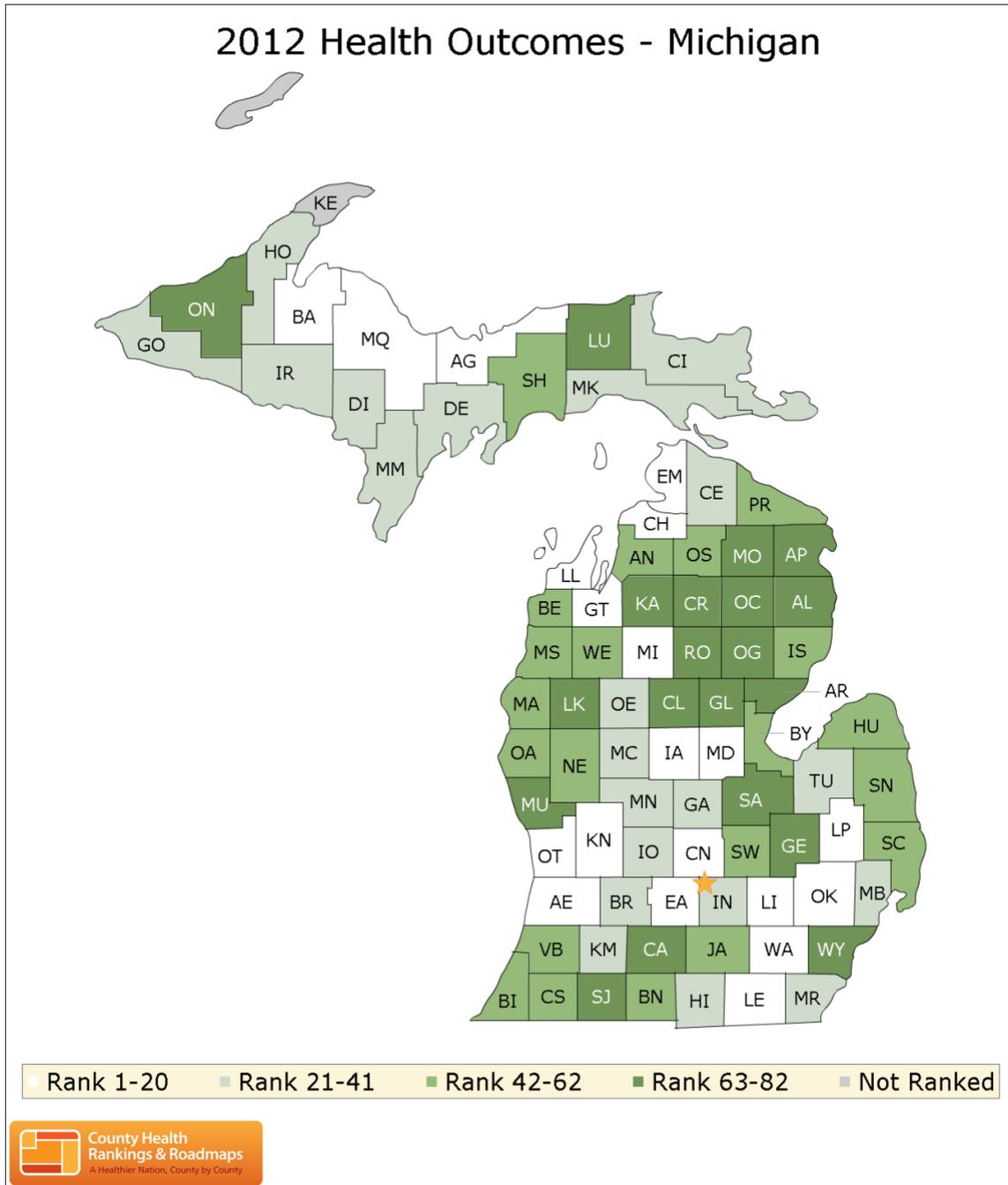
	Alger County	Error Margin	National Benchmark*	Michigan	Trend	Rank (of 82)
<u>Health Factors</u>						30
Health Behaviors						21
Adult smoking			14%	21%		
Adult obesity	31%	24-38%	25%	32%		
Physical inactivity	25%	19-33%	21%	25%		
Excessive drinking			8%	18%		
Motor vehicle crash death rate	15	6-24	12	13		
Sexually transmitted infections	64		84	457		
Teen birth rate	28	21-36	22	34		
Clinical Care						43
Uninsured	16%	14-18%	11%	14%		
Primary care physicians	1,585:1		631:1	1,119:1		
Preventable hospital stays	87	71-102	49	74		
Diabetic screening	89%	73-100%	89%	84%		
Mammography screening	74%	56-90%	74%	68%		

	Alger County	Error Margin	National Benchmark*	Michigan	Trend	Rank (of 82)
Social & Economic Factors						40
High school graduation	83%			76%		
Some college	41%	35-46%	68%	63%		
Unemployment	13.2%		5.4%	12.5%		
Children in poverty	22%	16-29%	13%	23%		
Inadequate social support	17%	10-27%	14%	20%		
Children in single-parent households	34%	25-42%	20%	32%		
Violent crime rate	123		73	518		
Physical Environment						54
<u>Air pollution-particulate matter days</u>	5		0	5		
Air pollution-ozone days	0		0	3		
Access to recreational facilities	0		16	9		
Limited access to healthy foods	11%		0%	6%		
Fast food restaurants	19%		25%	48%		

* 90th percentile, i.e., only 10% are better 2012

Note: Blank values reflect unreliable or missing data

(County Health Rankings, The Robert Wood Johnson Foundation in collaboration with the University of Wisconsin Population Health Institute)



The total number of hospitalizations for Alger County Residents in 2010 was 1,075. The ten leading diagnoses for hospitalizations for Alger County Residents for the year 2010 were:

Principal Diagnosis	Number	Percent
Heart Disease	113	10.5
Injury and Poisoning	93	8.7
Psychoses	74	6.9
Newborns and Neonates (Less than 7 days)	56	5.2
Females with Deliveries	53	4.9
Cancer (Malignant Neoplasms)	53	4.9
Osteoarthritis and Allied Disorders	51	4.7
Cerebrovascular Diseases	30	2.8
Pneumonia	30	2.8
Infectious and Parasitic Diseases	25	2.3

*The top ten diagnoses are the same for the State of Michigan, 2010.

The ambulatory care sensitive hospitalizations for Alger County and four comparable counties in the region during 2010 were:

County	Average Length of Stay	Ambulatory Care Sensitive Cond.	Days of Care
Alger	225	848	3.77
Baraga	351	1,196	3.41
Luce	225	887	3.94
Ontonagon	263	1,094	4.16
Schoolcraft	198	701	3.54

Preventable hospitalizations for patients of all ages by statewide leading diagnoses for Alger County were:

Conditions	Hospitalizations	
	Average Annual Number for 2005-2009	2010
ALL AMBULATORY CARE SENSITIVE CONDITIONS	248	225
Congestive Heart Failure	46	38
Bacterial Pneumonia	37	28
Chronic Obstructive Pulmonary	23	17
Kidney/Urinary Infections	18	16
Dehydration	15	14
Diabetes	5	12
Cellulitis	11	9
Asthma	8	8
Gastroenteritis	5	5
Grand Mal & Other Epileptic Conditions	3	4
All Other Ambulatory Care Sensitive Conditions	78	74

The top ten leading procedures that were performed in short-stay hospitals for Alger County residents for 2010 were:

Selected Procedures	Procedures	
	Number	Percent
All Procedures	2,020	100
Blood Transfusion	159	7.9
Diagnostic Cardiac Catheterization; Coronary Arteriography	96	4.8
Vascular Catheterization Except for Heart & Renal Dialysis	75	3.7
Spinal Fusion	64	3.2
Arthroplasty Knee	49	2.4
Prophylactic Vaccinations and Inoculations	44	2.2
Respiratory Intubation and Mechanical Ventilation	42	2.1
Indwelling Catheter	41	2.0
Laminectomy; excision Intervertebral Disc	36	1.8
Insertion of Catheter or Spinal Stimulator & Injection into	35	1.7

SHORTAGES IN ALGER COUNTY

Secondary data indicates Alger County having shortages in the areas of dental in the Medicaid population, primary care with low income status and mental health for overall Alger County residents (U.S. Department of Health and Human Services, 2012).

PRIMARY DATA

ALGER COUNTY COMMUNITY HEALTH CARE LEADERS FOCUS GROUP

In order to establish what the community’s perception was in regards to healthcare in Alger County both a community health care leaders’ focus group was established and two community forums were held. During the Fall of 2012, a community health care leaders focus group was established to discuss the health care needs of Alger County. This focus group was comprised of leaders not only in health care, but leaders in the community that would represent various entities. The goal of this group was to discuss health care needs in Alger County and approaching the community and the methods involved. The following are a list of the leaders focus group.

Munising Memorial Hospital

Pam McKenna – Tendercare

Nancy Fulcher – Sault Tribe of Chippewa Indians

Jerry Doucette – Chair, Alger County Commission

Caleb Varoni – North Woods Home Care and Hospice

Kris Lindquist – Alger County Commission on Aging

Kevin Calhoun – CEO, Munising Memorial Hospital

Barb Trombley – CFO, Munising Memorial Hospital

Kathy Reynolds - Executive Director, Alger Co. Chamber/GMBPCD & Munising DDA

Nancy Dwyer – RN, Marquette General Hospital Board Member & Local Business Owner

Rod DesJardins – Pathways, Mayor City of Munising

Stacy Richardson – Medical Care Access Coalition

Paula Ackerman – Upper Peninsula Diabetes Outreach Network

Vicki Ballas – Michigan State University Extension

The health care community leaders' focus group met three times. The following are minutes from the meetings.

Alger County Health Needs Assessment
Community Leaders Focus Group Meeting
November 8, 2012

Present: Kathy Reynolds, Pat Sanderson, Nancy Fulcher, Jerry Doucette, Caleb Varoni, Kevin Calhoun, Pam McKenna

Absent: Kris Lindquist, Barb Trombley, Nancy Dwyer, Rod DesJardins, Stacy Richardson, Paula Ackerman, Joan Vinette

Community Leaders Focus Group Goals:

- Community Leaders Focus Group will meet 2-3 times
- Citizen Focus Group will meet one time

- Need to establish fundamental assessment of health care needs in the area
- Will identify key topics that should be focused on

Discussion: What are the Healthcare Needs and Concerns:

- Needs and concerns have changed due to shift in age demographics
- Many people are not seeking preventative care, such as dental, due to economic changes
- Private insurances, Medicare and Medicaid changes/cuts are leading people to skip routine screenings and wellness visits
- Education is key to good health – many do not realize the importance of good dental care in relation to overall health
- Chronic bad habits, behavioral and mental issues will cause multiple medical problems in later years
- Isolation due to severe weather conditions affects mental health
- Economy forces family members to move away causing a lack of caregivers for the elderly – Eldest daughters make most decisions for the elderly
- Generally healthy working males do not have routine screenings or visits as they “feel well” - high blood pressure and other problems go untreated
- Programs that are available are many times underutilized due to lack of knowledge – need to get the word out

Citizen Focus Group-How do we get people involved?

- Advertise in Alger County Shopper and the front page of the Munising News
- County and Township Websites
- Churches and Ministerial Association
- Union Reps
- Senior Center
- Service Organizations
- Police, EMT's, Local Pharmacists see firsthand community needs
- Serve food – Door prizes – Bring a friend, get a prize
- Community Leaders Focus Group Panel at Citizen Meeting

Next Steps

- Plan and hold Citizen Focus Group Meeting
- Wrap up assessment by the end of February

Next meeting: Tentatively scheduled for January 10, 2013

Alger County Health Needs Assessment
Community Leaders Focus Group Meeting
January 10, 2013

Present: Kathy Reynolds, Pat Sanderson, Kevin Calhoun, Barb Trombley, Vicki Ballas, Kris Lindquist, Caleb Varoni, Stacy Richardson, Paula Ackerman

Absent: Pam McKenna, Nancy Fulcher, Jerry Doucette, Nancy Dwyer, Rod DesJardins

- Vicki Ballas will be taking the place of Joan Vinette on the committee
- Alex Kofsky, Michigan Works! was also present

Review of Purpose:

Kevin Calhoun reminded the group that we are here to identify the top two or three current health needs that are currently not being met in our community. Currently the residents of Alger County have a healthcare status that is better than the state average. Studies indicate the average resident in Alger County has a higher income and better healthcare coverage than state averages. The US is currently ranked 16th in the world in healthcare.

The group discussed that the low income struggle with dental health, mental health and physical/medical health. This is due to poor access, whether in be cost or transportation. We want to come up with a meaningful outcome and a set of goals for development.

Community Focus Group:

Our main purpose is to find out what the public sees as needs and wants. What are the things that are working and seen as adequate? Questions should not be leading. We will go with the six questions proposed on the agenda.

Flyers/Posters will be printed and posted; email to community leaders focus group to email and post. Ads in Alger County Shopper/Munising News. The meeting will be at Falling Rock Cafe & Bookstore, Thursday, January 31st 7pm (1 to 1-1/2 hr). Kevin Calhoun, Caleb Varoni and Kris Lindquist will attend to represent the Community Leaders Focus Group.

Final Meeting:

We will meet for the last time on Thursday, February 21 at the Fuzzy Boyak Welcome Center (Chamber office) to discuss the outcome of the community focus group meeting and the report.

HEALTHCARE COMMUNITY FOCUS GROUP

It was determined at the health care leaders' focus group meetings to hold a public forum to discuss health care needs in Alger County. This poster was used for marketing across the county.

WE NEED YOUR PARTICIPATION AND INPUT ON HEALTHCARE IN ALGER COUNTY!

WHERE:
FALLING ROCK CAFE & BOOKSTORE

WHEN: THURSDAY, JANUARY 31, 7:00 - 8:00PM

SNACKS & DOOR PRIZES!!

FOR QUESTIONS, CALL THE ALGER COUNTY CHAMBER OF COMMERCE AT 387-2138

Sponsored By
MUNISING MEMORIAL
HOSPITAL & HEALTH SERVICES

Alger County
chamber of commerce
community minded business smart

greater munising bay
partnership for commerce development

The community forum was in a centralized convenient location. This business establishment was also chosen because of the relaxed atmosphere, which was hoped to elicit more attendance and responses. There were thirty people in attendance and these six questions were used as a guide by the facilitator (Director of the Alger County Chamber of Commerce).

Questions for Healthcare Community Focus Group Forum

1. What do you see as major health concerns in Alger County in the next five years?
2. What do you see as major strengths in health care services/resources in Alger County?
3. How would you describe the overall healthcare services in Alger County?
4. What type of programs could be developed to improve health and healthcare in Alger County?
5. Do you have healthcare needs that you have not sought assistance? Reasons?
6. What do see as barriers in Alger County to healthcare?
7. Additional questions/topics????

Of the above questions, these were the responses.

1. What do you see as major health concerns in Alger County in the next five years?
 - Lack of doctors; need another internist
 - Access to preventative mental healthcare; average mental healthcare is difficult to access; Pathways does a good job, however, they cater to a very specific population and are limited as to whom they can treat
 - Need more affordable healthcare in general
 - Greater number of aging population presents unique needs; need palliative care; expanded geriatric services
 - Need specialists-offer clinics periodically
 - MMH has a bad reputation in the community in emergency situations
2. What do you see as major strengths in health care services/resources in Alger County?

Munising Memorial Hospital

- Munising Memorial Hospital
- Good nurses
- Good EMS System
- Good collaboration between EMS and MMH
- Walk-in Center
- Tribal Clinic
- Good home healthcare
- Lab accessibility
- New mammography machine at MMH

3. How would you describe the overall healthcare services in Alger County?

- Overall good
- Excellent care for diabetics
- Home healthcare services good
- EMS excellent
- Referrals to specialists when needed

4. What type of programs could be developed to improve health and healthcare in Alger County?

- Need preventative mental healthcare services
- Access to water therapy for PT and Rehab (PT at MMH very good)
- Dietician/Nutritional Counseling for general health, obesity, pre-diabetic
- OB clinic for pregnancy checks
- Youth obesity programs
- Weight loss programs
- More preventative care access or clinics
- Offer Health Fairs more than once per year

- MMH, Walk-in and Tribal Clinic should all be connected for better service for all
- Need affordable preventative screenings
- Dialysis equipment

5. Do you have healthcare needs for which you have not sought assistance? Reasons?

- Costs – pure economics
- No insurance or extensive co-pays
- Confusion with insurance coverage; not knowing what are covered expenses
- Out of pocket expenses are too much
- Need records
- Specialists not available locally

6. What do you see as barriers to healthcare in Alger County?

- Lack of population
- Inability to bring good qualified staff and services to rural area
- Need dedicated doctors who choose to live in the area

7. Other:

- Need to raise public awareness regarding services available at MMH, such as new digital mammography machine
- Highlight cooperative ventures in the community; Advanced Cardiac Life Support now available with Alger County EMS
- The specialty clinic that was held a few year ago for H1N1 flu was an excellent service; more specialty clinics such as this could be offered
- Encourage membership in MMH Association or MMH Auxiliary – get community involved to facilitate changes/improvements

At the February 20 meeting at the Senior Center the same questions were asked. The questions and responses were as follows:

1. What do you see as major health concerns in Alger County in the next five years?

- Increasing numbers of our senior/aging population
- Lack of population creates voids in services, shortage of doctors
- Lack of specialists: Ophthalmologist, Podiatrist, Urologist, Audiologist
- Lack of prenatal and follow-up care
- Need more general mental healthcare
- Losing our local hospital

2. What do you see as major strengths in healthcare services/resources in Alger County?

- MMH is a good hospital
- Alger County Commission on Aging is a good starting point for care/resources
- Good communication between local doctors and Marquette
- Lions Club eye exams for school children
- Good nutritional information available from Vickie Ballas-MSU Ext

3. How would you describe the overall healthcare services in Alger County?

- Limited services and doctors, however, what we do have is very good

4. What type of programs could be developed to improve health and healthcare in Alger County?

- Educate community as to what services are available here-increase advertising and community outreach; do not need to go to Marquette
- Need more frequent health fairs
- Increase staffing during peak times, such as flu season
- Increase transportation availability-bus passes for visits to MMH
- Bring more services here, possibly on a part-time basis shared with surrounding areas

5. Do you have healthcare needs for which you have not sought assistance? Reasons?

- Lack of local specialists
- Financial issues, no insurance or higher co-pays

6. What do you see as barriers to healthcare in Alger County?

- Too many people preferring to go straight to Marquette
- Need more doctors

IDENTIFICATION AND SUMMARY OF NEEDS

During this process there were two groups, the community leaders and the community. The project timeline was November 2012-February 2013. During this timeline the community leaders met three times and there were two community meetings, one where the entire community was invited and one at the local senior center.

With the community leaders identified, based on a thorough review of the objective data, these areas of need in Alger County:

- Lack of Medical providers in community, primarily to low income residents
- Lack of Dental providers in the community, primarily to low income residents
- Lack of Mental Health providers in the community, primarily to low income residents
- Lack of preventative health care services and/or awareness of availability

During the two community meetings the following issues were identified:

- Lack of Medical providers and services in community
- Lack of Mental Health providers in community
- Absence or lack of awareness of preventative care services
- Lack of awareness of existence of and/or lack of knowledge of how to access medical services in the community

PRIORITIZATION AND RECOMMENDATIONS

It was interesting to note that the findings of the community leaders, based in data review, and the findings of the community meetings were almost identical. Using the intensity of community from the community meetings as a measure the recommendation is for Munising Memorial Hospital to adopt an action plan to address and measurably improve the following items listed in order of their priority.

1. Increase Mental Health provider access to the community, primarily to low income residents
2. Increase Medical provider access to the community, primarily to low income residents
3. Establish a means by which the community residents can easily access knowledge of health services available in the community and how to acquire them.
4. Evaluate in more depth the need and scope of relevant preventative health services to the community.
5. Increase Dental providers access to the community, primarily to low income residents.