

COMMUNITY HEALTH NEEDS ASSESSMENT

Alger County, Michigan 2016

Munising Memorial Hospital
Munising, MI

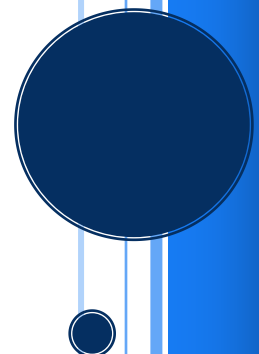


TABLE OF CONTENTS

PURPOSE OF ASSESSMENT	2
EXISTING HEALTH CARE FACILITIES AND OTHER RESOURCES	2
MUNISING MEMORIAL HOSPITAL	2
ALGER COUNTY CHAMBER OF COMMERCE	6
COMMUNITY DESCRIPTION & MARKET AREA	7
SECONDARY DATA.....	11
SHORTAGES IN ALGER COUNTY	19
PRIMARY DATA.....	19
ALGER COUNTY COMMUNITY HEALTH CARE LEADERS FOCUS GROUP	19
HEALTHCARE COMMUNITY FOCUS GROUP	22
IDENTIFICATION AND SUMMARY OF NEEDS.....	28
PRIORITIZATION AND RECOMMENDATIONS.....	29

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. Federal laws governing non-for-profit hospitals now 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 Alger County Commission on Aging. 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

Munising Memorial Hospital (MMH) was first established in 1910 when the original hospital was built on Maple Street in Munising. It was a company hospital, funded by Cleveland-Cliffs Iron Co. as one of many major gifts made throughout the region by the company during that era. In 1947, the organization shifted and became a not-for-profit organization when it obtained its 501(c)3 status from the Internal Revenue Service. From that point forward, it was a community 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. The employees and practitioners will provide the highest level of quality care within our resources and abilities with unsurpassed personal and professional integrity.

MMH is an 11-bed critical access hospital that provides outpatient diagnostic services, limited outpatient elective surgeries, Level 4 Emergency Services, with an average daily inpatient census of one inpatient per day. In September of 2015 Urgent Care walk-in services were established to provide a lower cost alternative to ER during after-hours and

weekends. As it has evolved over the last few years, MMH services are limited to primary care medical services. All necessary secondary (specialty) and tertiary care needs of Alger County residents are provided either in Marquette or outside the Upper Peninsula. MMH has become the primary employer of physicians and mid-level providers in Alger County who provide their services to the community through the Bay Care clinic of MMH. 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, Urgent Care, 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 hospital 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 U.S. Centers for Medicare & Medicaid Services (CMS) contracts with MDCH to provide surveys to address quality and operational matters. Three of the hospital functions are currently accredited:

- American College of Radiology Accreditation for Mammography service; and
- Community Hospital Laboratory Accreditation (COLA) of the laboratory.
- Bay Care - American Association for Accreditation of Ambulatory Surgery Facilities

Munising Memorial 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 Critical Access Hospital (CAH), the hospital receives payments from BCBSM in part based upon pay for performance quality measures. Centers for Medicaid and Medicare Services measures are collected and reported, however, the majority have insufficient volume to be publically reported.

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.

In 2008 Munising Memorial Hospital opened the doors to the current care facility. At fifty-one thousand square feet, the facility incorporates all aspects of a patient care under one roof. The scope of services provided by the Hospital is generally similar to that provided by other CAHs. The hospital facility contains the following areas:

- Completely digitized, the **Radiology Department** now includes a digital X-ray room, CT, Fluoroscopy, 4D Ultrasound, Dexascan and digital mammography.
- The **operating room** consists of one main suite, a scope room and a five bed recovery area. The OR allows for same day outpatient surgery. Currently, MMH has a General Surgeon on its medical staff.
- **Laboratory** services were designed to accommodate two private drawing rooms and several upgrades to equipment, computer systems and space.
- The **Outpatient Rehabilitation** department allows for easier access for patients including a complete gym, four treatment rooms and a shower for gym participants.
- The **emergency room** includes three private exam rooms and a three bay trauma room. The two-bay ambulance garage includes a decontamination area.
- Six **inpatient rooms** display a hotel like, comfortable atmosphere. The rooms are equipped with flat panel televisions and face the lake for a beautiful view.
- Two **conference rooms** can be used for support groups, educational programs and administrative meetings.
- **Bay Care Medical Center** is now located within the hospital building. The medical office touts eighteen exam rooms and two procedure rooms. Bay Care Medical Center is open Monday-Friday 8:00 a.m. to 5:00 p.m.

- Also located on campus is **Harbour View**, a 20 bed Assisted Living facility that was built in 1999.

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

The hospital's emergency department is in the process of becoming 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.

The hospital also offers diabetes education and programming and telemedicine services to those patients who require and can benefit from healthcare services outside of the area.

Munising Memorial Medical Staff

Three physicians comprise the hospital's active medical staff. There is a family practitioner, a osteopathic medicine physician and an orthopedic specialist. These physicians are complemented by three physician assistants and three nurse practitioners, two of whom are employed by the Corporation. Supplementing the medical staff are specialists who hold office hours periodically.

Other Alger County Health Services and Facilities

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

- Four dental offices
- Four mental health services
- Two 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 is one small limited hours primary care clinic located in Trenary. That facility which is operated by UP Health System and offers the following services:

- Office Exams
- Urgent Care Visits
- Allergy Injections
- Laboratory Services
- Routine Immunization Program
- Electrocardiograms
- Sports Physicals
- Minor Outpatient Surgery
- Referrals to Home Health, Specialist, or Mental Health Services

In regards to long term care facilities in Alger County there is:

- One nursing home
- Six adult foster care apartments in one facility
- One adult day care center
- 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 higher 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 the natural resources, attractions 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 Greater Munising Bay Partnership for Commerce Development, 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 estimated population for 2014 is 9,459 which would be a decrease of -1.5%. 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 (2010)</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
Limestone Township	438
Mathias Township	554
Rock River Township	1,212
*Prison Population in Alger Co.	912 (not included in population number)

Total Population of Alger County (2014 Estimate)	9,516
Housing Units	6,593
Homeownership rate	84.9%
Housing Units in Multi-Unit Structures	5.4%

Median Value of Owner-Occupied Housing Units	\$117,100
Households	3,607
Persons per Household	2.34
Per Capita Money Income (2014 Estimate)	\$20,798
Median Household Income	\$39,211
Persons Below Poverty Level (State Avg. 16.8%)	13.9%
Educational Attainment (25 years and over):	
Less than high school graduate	7.3%
9 th to 12 th grade	4.0%
High School Graduate (includes equivalency)	45.9%
Some college, no degree	18.9%
Associate's degree	7.4%
Bachelor's degree	12.6%
Graduate or professional degree	4.5%

Population by Sex/Age (Based on 2014 Estimates)	
Male	5,252
Female	4,264
Under 5	3.3%
5-9	4.9%
10-14	4.6%

15-19	4.8%
20-24	5.1%
25-29	6.0%
30-34	5.7%
35-39	5.6%
40-44	5.3%
45-49	6.9%
50-54	8.2%
55-59	7.8%
60-64	9.5%
65-69	6.6%
70-74	5.6%
75-79	4.2%
80-84	2.0%
85 years and over	3.8%
Median age (years)-2014 Estimate	48.3
Median age (years)-2010 Census	46.4

Population by Race (2014 Estimate)—Based on a population of 9,459	
White	8,087
African American	653
Asian	47
American Indian and Alaska Native	378

Hispanic or Latino	123
Identified by two or more	293

HEALTH INSURANCE COVERAGE	
Civilian noninstitutionalized population	8,525
With health insurance coverage	7,535
With private health insurance	5,682
With public coverage	3,684
No health insurance coverage	990
Civilian noninstitutionalized population under 18 years	1,501
No health insurance coverage	20
Civilian noninstitutionalized population 18 to 64 years	4,982
In labor force:	3,393
Employed:	2,999
With health insurance coverage	2,430
With private health insurance	2,220
With public coverage	343
No health insurance coverage	569
Unemployed:	394
With health insurance coverage	226
With private health insurance	110

With public coverage	118
No health insurance coverage	168
Not in labor force:	1,589
With health insurance coverage	1,364
With private health insurance	992
With public coverage	548
No health insurance coverage	225

Source: U.S. Census American Fact Finder

Major Employers in Alger County	
Michigan Department of Corrections	274
Neenah Paper	248
Timber Products	160
Munising Public Schools	100
Christmas Kewadin Casino	96
Tendercare	93
Munising Memorial Hospital	86
County of Alger	46
Superior Central Schools	43
Family Fare Market	36
Peoples State Bank	33
Pictured Rocks National Lakeshore	23
Trenary Home Bakery	17

Source: 2013 Northern Michigan University Community and Economic Profiles for Michigan's Upper Peninsula

There are four public school districts and one private K-12 school in Alger County.

SECONDARY DATA

For secondary data, research was obtained from County Health Rankings. This report was a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. According to County Health Rankings and

Roadmaps 2015, Alger County, MI is ranked third in the state of Michigan for health outcomes. In regards to health factors it is ranked 43rd.

	Alger County	Error Margin	Top U.S. Performers*	Michigan	Rank (of 82)
Health Outcomes					3
Length of Life					3
<u>Premature death</u>	4,830	3,525-6,135	5,200	7,218	
Quality of Life					16
<u>Poor or fair health</u>			10%	14%	
<u>Poor physical health days</u>	1.6	0.7-2.5	2.5	3.6	
<u>Poor mental health days</u>			2.3	3.7	
<u>Low birthweight</u>	6.7%	4.5-9.0%	5.9%	8.4%	
Health Factors					43
Health Behaviors					40
<u>Adult smoking</u>			14%	20%	
<u>Adult obesity</u>	32%	26-38%	25%	32%	
<u>Food environment index</u>	6.7		8.4	7.2	
<u>Physical inactivity</u>	24%	18-31%	20%	23%	
<u>Access to exercise opportunities</u>	95%		92%	83%	

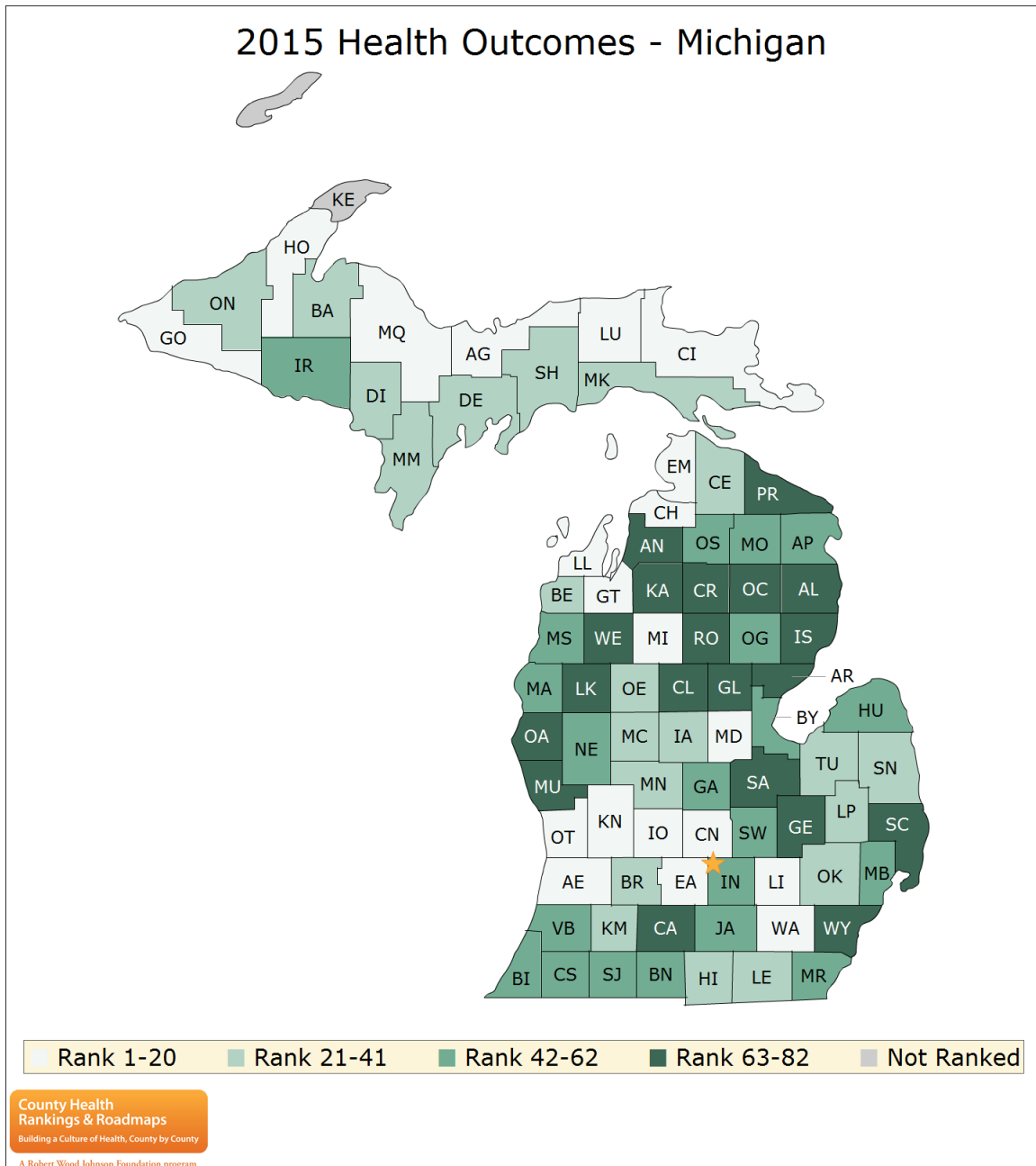
	Alger County	Error Margin	Top U.S. Performers*	Michigan	Rank (of 82)
<u>Excessive drinking</u>	28%	17-43%	10%	18%	
<u>Alcohol-impaired driving deaths</u>	27%		14%	31%	
<u>Sexually transmitted infections</u>	52		138	481	
<u>Teen births</u>	23	17-32	20	31	
Clinical Care					47
<u>Uninsured</u>	16%	14-18%	11%	13%	
<u>Primary care physicians</u>	1,908:1		1,045:1	1,246:1	
<u>Dentists</u>	2,381:1		1,377:1	1,485:1	
<u>Mental health providers</u>	1,190:1		386:1	487:1	
<u>Preventable hospital stays</u>	54	41-67	41	65	
<u>Diabetic monitoring</u>	87%	71-100%	90%	86%	
<u>Mammography screening</u>	70.1%	52.5-87.7%	70.7%	65.6%	
Social & Economic Factors					53
<u>High school graduation</u>				78%	
<u>Some college</u>	41.5%	34.8-48.1%	71.0%	65.6%	

	Alger County	Error Margin	Top U.S. Performers*	Michigan	Rank (of 82)
<u>Unemployment</u>	11.0%		4.0%	8.8%	
<u>Children in poverty</u>	24%	17-30%	13%	24%	
<u>Income inequality</u>	3.9	3.3-4.6	3.7	4.7	
<u>Children in single-parent households</u>	31%	21-40%	20%	34%	
<u>Social associations</u>	14.7		22.0	10.2	
<u>Violent crime</u>	164		59	464	
<u>Injury deaths</u>	69	48-97	50	60	
Physical Environment					19
<u>Air pollution - particulate matter</u>	10.2		9.5	11.5	
<u>Drinking water violations</u>	69%		0%	1%	
<u>Severe housing problems</u>	12%	9-16%	9%	17%	
<u>Driving alone to work</u>	73%	70-76%	71%	83%	
<u>Long commute - driving alone</u>	30%	24-36%	15%	32%	

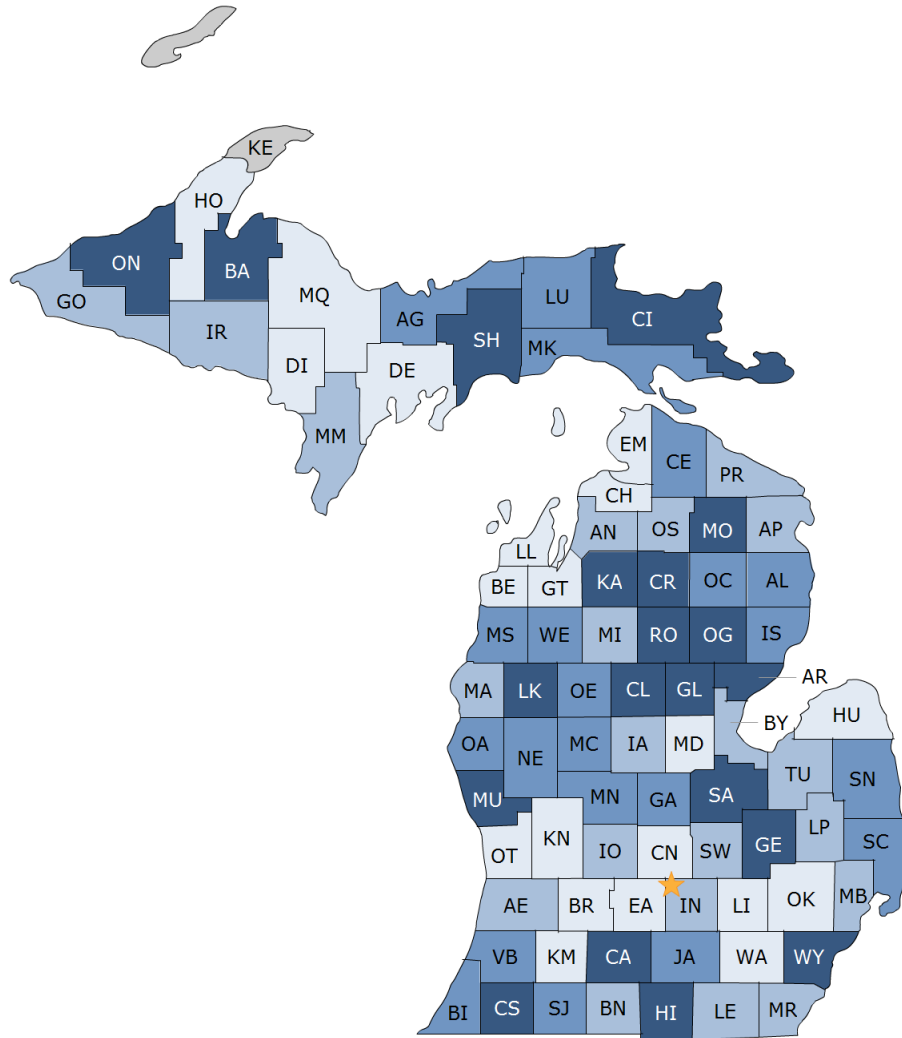
* 90th percentile, i.e., only 10% are better 2015

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)



2015 Health Factors - Michigan



Rank 1-20 Rank 21-41 Rank 42-62 Rank 63-82 Not Ranked

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County
A Robert Wood Johnson Foundation program

The total number of hospitalizations for Alger County Residents in 2013 was 1,111. The ten leading diagnoses for hospitalizations for Alger County Residents for the year 2013 were:

Principal Diagnosis	Number	Percent
Heart Disease	97	8.7
Injury and Poisoning	80	7.2
Newborns and Neonates (Less than 7 days)	72	6.5
Females with Deliveries	70	6.3
Osteoarthritis and Allied Disorders	51	4.6
Psychoses	38	3.4
Pneumonia	36	3.2
Septicemia	32	2.9
Cerebrovascular Diseases	24	2.2
Cancer (Malignant Neoplasms)	23	2.1

These are the top ten diagnoses are the same for the State of Michigan, 2013. Source: Division for Vital Records and Health Statistics, Michigan Department of Community Health

The ambulatory care sensitive hospitalizations for Alger County and four comparable counties in the region during 2013 were:

County	Average Length of Stay	Ambulatory Care Sensitive Cond.	Days of Care
Alger	5.45	190	1036
Baraga	3.80	309	1173
Luce	3.71	228	845
Ontonagon	3.34	137	457
Schoolcraft	3.92	232	909

Source: Division for Vital Records and Health Statistics, Michigan Department of Community Health

All Causes Deaths and Death Rates Alger County Residents, 1999-2013

Year	All Ages	Age Under 50	Age 50-74	Age 75 and Older
2013	102	9	31	62
2012	113	4	42	67
2011	106	4	41	61
2010	99	2	41	56
2009	117	4	35	78
2008	117	6	32	79
2007	106	3	28	75
2006	125	2	40	83
2005	100	3	33	64
2004	120	3	37	80
2003	124	7	43	74
2002	87	6	28	53
2001	117	4	40	73
2000	118	6	39	72
1999	111	4	40	67

Source: 1999-2013 Michigan Resident Death Files. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

The top ten leading procedures that were performed in short-stay hospitals for Alger County residents for 2013 were:

Selected Procedures	Procedures	
	Number	Percent
All Procedures	439	100
Diagnostic Cardiac Catheterization; Coronary Arteriography	45	10
Blood Transfusion	30	6.8
Respiratory Intubation and Mechanical Ventilation	18	4.1
Vascular Catheterization Except for Heart & Renal Dialysis	15	3.4
Arthroplasty Knee	15	3.4
Spinal Fusion	13	3
Hip Replacement; Total and Partial	9	2.1
Percutaneous Transluminal Coronary Angioplasty	9	2.1
Laminectomy; Excision Intervertebral Disc	9	2.1
Insertion of Drug-Eluting Coronary Artery Stent(s)	8	1.8

Source: Michigan Resident Inpatient Files, Division for Vital Records and Health Statistics, Michigan Department of Community Health

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 Winter of 2015, 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 and the minutes from that meeting.

Kris Lindquist – Alger County Commission on Aging

Kathy Heyrman – Alger County Commission on Aging

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

Debbie Nedeau—Putvin Drug Store and Munising Memorial Hospital Board

Paula Ackerman – Upper Peninsula Diabetes Outreach Network

Vicki Ballas – Michigan State University Extension, Program Instructor, Health & Nutrition Institute

Tyler LaPlaunt– Community Health Educator, Sault Tribe of Chippewa Indians

Alger County Health Needs Assessment
Community Leaders Focus Group Meeting
November 3, 2015
Notes

Present: Kathy Reynolds, Debbie Nedeau, Kathy Heyrman, Vicki Ballas, Paula Ackerman, Pat Sanderson, Tyler LaPlaunt (contacted by phone)

Following introductions Kathy explained the purpose of the countywide health assessment required for Munising Memorial Hospital every three years. This group will meet 2-3 times and a Citizen Focus Group will meet once, possibly at APRD.

The following issues were cited as problems or changes with health care in our area in the last couple of years:

The Affordable Care Act has been a major change since the last assessment.

Consumers Mutual, which was widely used in the UP, will be closing soon due to lack of adequate federal funding.

There is lots of confusion for consumers regarding the ACA and higher than anticipated costs for many.

There are constant changes as to what is covered and what is not with insurance companies. Most people do not understand their deductibles, co-pays, etc.

Increased costs for medication lead many consumers to not take meds or take sub-par prescriptions; will take less than the prescribed amount.

Mental health still an issue. No major changes, good or bad, since last assessment. Some patients being evaluated and treated by their general practitioner without seeing a specialist.

Many people are over medicated.

Increase in prescription drug use, legally and illegally, and it's socially acceptable.

Severe weather does have effect on access for medical treatments, especially for elderly trying to get to Marquette. Altran has had to make some cuts, due to lost funding, that was helping with trips to Marquette. Patients on Medicaid can get help, Medicare patients cannot.

The clinic in Grand Marais has closed down, as well as Superior Health Haven.

MMH Urgent Care Center offers care without utilizing higher costs of an ER visit. Offers an alternative for locals with extended hours and days.

Dental health still an issue. Many consumers visiting the dentist less often due to increasing costs, even for those with insurance. No major changes, good or bad, since last assessment.

The abundant outdoor activities available in our area are underutilized. People need to take responsibility and just get up and move/exercise.

There will be a Community Forum Meeting on January 21st.

HEALTHCARE COMMUNITY FOCUS GROUP

After the focus group of healthcare leaders met, there was a public forum to discuss health care needs in Alger County. This advertisement was used for marketing across the county.



**We need YOUR participation
and input on
Healthcare in Alger County!**

5-6 PM Thursday, January 21 at
Alger Parks & Recreation Central Community Center

Snacks and door prizes!!

For questions, call the
Alger County Chamber of Commerce at 387-2138

Sponsored by
MMH, Alger Co. Chamber of Commerce/GMBPCD



AlgerCounty
chamber of commerce
community minded. business smart.

MUNISING MEMORIAL
HOSPITAL & HEALTH SERVICES



greater munising bay
partnership for commerce development

The community forum was in a centralized convenient location. This Alger Parks and Recreation Central Community Center was also chosen because of the centralized location in the county and the community atmosphere. There were thirty people in attendance and these six questions were used as a guide by the facilitator (Executive Director of the Alger County Chamber of Commerce).

Questions for Healthcare Community Focus Group Forums

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. Other comments/concerns regarding healthcare in Alger County.

Of the above questions, these were the responses from the community public forum.

Alger County Public Forum Alger County Health Needs Assessment 2016 January 21, 2016

1. What do you see as major health concerns in Alger County in the next five years?
 - Layoff of workers at MMH, but not at administrative levels
 - Increased RX drug use and abuse
 - Self-medicating for mental health issues
 - More babies being born with issues from drug and substance abuse
 - State budget cuts do not allow access for drug and substance abuse or mental health issues
 - People do not understand their insurance coverage; too many changes in regard to drug coverage, alternative choices are sometimes available but not utilized
 - Tremendous amount of confusion for consumers regarding their insurance coverage
 - Larger number of residents on Medicaid due to ACA
 - Huge price increases for specialty drugs and people not knowing that help is sometimes available from the drug companies to help cover costs

- Higher costs of RX drugs and co-pays for them
 - Lack of specialists locally – when they were available locally they were not utilized and therefore stopped coming to MMH
2. What do you see as major strengths in health care services/resources in Alger County?
- Networking is strong
 - Local pharmacies are great at working with patients when insurance paperwork is lagging behind; good communication between pharmacies and providers
 - Tribal Health Center
 - Diabetes education
 - Physical therapy
 - MMH Health Fair
3. How would you describe the overall healthcare services in Alger County?
- Very good
 - Fair, but rapidly declining
 - Good in terms of basic needs, but frustrating when you have a major issue
 - Too many are not aware of the services available locally; there is much more available in Alger County than most people are aware of
 - Local pharmacies are excellent; very knowledgeable and great sources of information
 - Good relationships are important and make care better
 - We are fortunate to have the services we have and need to work to keep them here
4. What type of programs could be developed to improve health and healthcare in Alger County?
- Same day mammograms, ultrasound, extra testing; many hospitals have same day results; sometimes it may only be available on certain days
 - A better campaign concerning the services and doctors available
 - Specialists need to come on a rotating basis for those with transportation issues
5. Do you have healthcare needs for which you have not sought assistance? Reasons?
- Office visits do not allow enough time with the doctor for multiple issues
 - No specialists available locally and it can take a long time to get an appointment after a referral
 - Difficult for working people to take a day or ½ day off work to see a specialist in Marquette
 - Also a lack of doctors in Marquette; can take a long time to get an appointment
 - The entire national health care system is in crisis
6. What do you see as barriers to healthcare in Alger County?
- Weather
 - Not enough services available locally
 - Shortage of doctors

- Overall cost of services and insurance; higher deductibles
- Lack of knowledge about insurance coverage
- Lack of knowledge as to what services are available
- Too easy to go to Marquette
- People are not pro-active; need to take more personal responsibility
- Most people do not realize the importance of good healthcare and the relationship between physical health, dental health, mental health, vision, etc.
- Communication with reception and administration
- A community that isn't pro-active and not motivated to change; a hospital and healthcare system that hasn't tapped into changing that view point to being more self-motivated and pro-active

7. Other comments/concerns regarding healthcare in Alger County:

- Would like to see the medical/healthcare community more connected in the community
- Need to stress importance of wellness and prevention
- Would like to see LMAS Health Dept. offer more community programs – outreach
- Encourage membership in MMH Association or MMH Auxiliary
- Too much backstabbing between the facilities in the paper

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

A second meeting in the community was then held on January 29, 2016 that was held at the Alger County Commission on Aging with some of the residents and staff. This was facilitated by Kathy Reynolds, the Executive Director of the Alger County Chamber of Commerce. The same questions were asked of this group and the following are the responses.

QUESTIONS FOR DISCUSSION
Alger County Health Needs Assessment 2016
Alger Co. Commission on Aging
January 29, 2016

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

- Diabetes
- Finding staff at the Commission on Aging
- Lack of nursing aids—could be a training program that dealt with skills needed and soft skills for the job. This also could be offered in the high schools
- Mental health issues
- Lack of work programs and guidance for the mentally challenged
- Getting staff to work in the outlying areas
- Special needs housing
- More activities for special needs

2. What do you see as major strengths in health care services/resources in Alger County?
 - Alger County Commission on Aging
 - Collaboration between services in the community
 - Good communication with doctors
 - Local library has good services for the elderly
3. How would you describe the overall healthcare services in Alger County?
 - Lacking dental vision
 - If you need ER care, many times you have to go to Marquette
4. What type of programs could be developed to improve health and healthcare in Alger County?
 - Kidney dialysis services
 - Mobile health services
 - Need more activities for seniors in the community
 - Women's Health Fair
 - Medicare transportation costs (those that can't get Medicaid "fall in the cracks")
 - Low income dental
 - Delivery of groceries or other goods
 - "A strip mall of services"
 - Senior living community
 - Candy Striper Program
 - Free Wi-Fi at senior living establishments
 - Transportation to Banking
 - Veterans need transportation to their health services
 - Grand Marais has no health services
 - Veterans need to use Marquette or Manistique's services before they can be referred to Munising. Transportation then becomes an issue.
 - Munising Memorial Hospital Lab is good, but their (MMH's costs (co-pay) is higher than others
 - Some physicians in Marquette won't take lab work or x-rays that were done at MMH so they have to be redone in Marquette
 - Superior Walk-In doctors could have privileges at MMH
5. Do you have healthcare needs for which you have not sought assistance? Reasons?
 - Women's health—no specialists locally

- Hear many negative comments about local hospital—shouldn't be a competition between the hospital and Urgent Care
 -
6. What do you see as barriers to healthcare in Alger County?
- Dental and eye services don't accept Medicaid
 - Transportation
 - Assisted living shortage and choices for seniors
 - Local care can be time-consuming
7. Other comments/concerns regarding healthcare in Alger County.
- Lakeshore Manor now isn't just seniors—it is everybody in order to fill rooms. Example—Now children and young adults
 - Senior Center—people are not interested in attending and it needs an activities director

IDENTIFICATION AND SUMMARY OF NEEDS

During this process there were two groups, the community leaders and the community. The project timeline was November 2015-February 2016. During this timeline the community leaders met twice times and there were two community meetings, one where the entire community was invited and one at the Alger County Commission on Aging.

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

- 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
- Rising costs of prescription drugs
- Obesity
- Changes in insurance and Medicare and Medicaid rules and regulations can be confusing for the consumer and provider
- The Affordable Care Act has sometimes led to confusion among consumers and higher costs than anticipated

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
- Lack of services for the elderly
- Difficulty in finding qualified staff for lower-paying health occupations

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 had similarities to the needs assessment three years ago. Using the intensity of responses 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. Establish a means by which the community residents can easily access knowledge of health services available in the community and obtain immediate access to information.
2. Increase mental health provider access to the community, primarily to low income residents.
3. Assist in providing low income dental service information and access for the community.
4. Continue to increase medical provider access to the community, primarily to low income residents.
5. Continue to promote use of new Munising Memorial Hospital Urgent Care services which is available to the community seven days a week.