

Trinity Health Grand Rapids Community Health Needs Assessment (CHNA) Implementation Strategy Fiscal Years FY25-27



Trinity Health Grand Rapids completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on May 22, 2024. Trinity Health Grand Rapids performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social influencers of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically <u>HERE</u> Printed copies are available at Trinity Health Grand Rapids, 200 Jefferson Ave SE, Grand Rapids, MI 49503.

Our Mission

We, Trinity Health, serve together in the spirit of the Gospel, as a compassionate and transforming healing presence within our communities.

Our Hospital

Trinity Health Grand Rapids (THGR) is a non-profit, mission-driven, faith-based health organization located in Kent County, serving West Michigan. It is a member of Trinity Health, one of the nation's largest Catholic healthcare systems. Located in downtown Grand Rapids, THGR is a teaching hospital with 303 licensed beds. The organization is designated as

a Level II Trauma Center and has a Level III Neonatal Intensive Care Unit (NICU).

The organization is a recognized leader in oncology, neurosciences, orthopedics, cardiovascular care, kidney transplant, bariatric surgery, behavioral health, and endocrinology services.

The organization includes 1 acute care hospital, 3 Emergency Departments (two freestanding), and 2 Urgent Care Centers. The medical center employs more than 3,000 people and averages more than 75,000 Emergency Department visits, more than 1,800 Births, and more than 15,000 hospital discharges annually.

Our Community Based Services

Trinity Health Grand Rapids has multiple community-based services. The affiliated Trinity Health Medical Group is composed of more than 40 Primary and Specialty Care Medical Offices, hosting more than 750,000 patient visits annually. The Safety Net Health Centers of Trinity Health Grand Rapids serve more than 15,000 unique patients per year and are located in areas of the county that are accessible to individuals belonging to communities that disproportionately experience health inequities.

Trinity Health Grand Rapids also offers a Community Health Worker program, Mobile Mammography, a Maternal Infant Health Program, a Women, Infants & Children (WIC) program, the Diabetes Prevention Program, embedded behavioral health clinicians in primary care offices, and a Behavioral Health Crisis Center, a partnership with Network 180, Kent County's Community Mental Health agency.

Our Community

Trinity Health Grand Rapids serves an 8-county area in West Michigan. The primary service area is Kent County. The secondary service area includes Ottawa, Muskegon, Newaygo, Montcalm, Ionia, Barry, and Allegan counties. Demographic information for the primary and secondary service areas:

- Estimated 2024 population is 1,284,616
- Average age is 39.2 years
- Average household income is \$99,498
- 74% White (non-Hispanic), 11% Hispanic, 8% Black, 3% Asian & Pacific Island (non-Hispanic), 5% Other
- 91% speak only English at home, 6% speak Spanish at home
- 3% have less than a high school education, 5% have some high school, 28% have graduated high school, 32% have some college or an Associate's degree, 32% have a Bachelor's degree or more

Our Approach to Health Equity

While Community Health Needs Assessments (CHNA) and Implementation Strategies are required by the IRS, Trinity Health ministries have historically conducted CHNAs and developed Implementation Strategies as a way to meaningfully engage our communities and plan our Community Health & Well-Being work. Community Health & Well-Being promotes optimal health for people experiencing poverty or other vulnerabilities in the communities we serve by addressing patient social needs and investing in our communities through dismantling oppressive systems, including racism, and building community capacity. Trinity Health has adopted the Robert Wood Johnson Foundation's definition of Health Equity - "Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

This Implementation Strategy was developed in partnership with community and will focus on specific populations and geographies most impacted by the needs being addressed. Racial equity principles were used throughout the development of this plan and will continue to be used during the implementation.

Health and Social Needs of the Community

The CHNA conducted in 2023 and early 2024 identified the significant needs for health and social drivers of health within the Kent County, Michigan community. Community stakeholders then prioritized those needs during a facilitated review and analysis of the CHNA findings. The significant health needs identified, in order of priority include:

1. Housing	 1 in 3 people live in housing that is unaffordable, defined as spending more than 30% of their income on housing costs.
	 Renters are disproportionately impacted by rising housing costs. From 2017 to 2022, median housing costs for homeowners in Kent County increased by 15%, but median housing costs for renters increased by 36%
	 Limited availability of affordable housing: More than 7,000 people applied for Grand Rapids Section 8 housing during a 5-day open enrollment period in October 2023, and may be on a waiting list for up to 5 years before being contacted.
	 Homelessness increased by 70% from 2019 to 2023 and Black residents are disproportionately impacted.
2. Health Insurance	 Compared to adults with private insurance, those who were uninsured in the past year were 5 times more likely not to seek needed care because of the cost. Those with Medicaid were nearly 3 times more likely than those with private insurance not to seek needed care due to cost.
	 Community members identify the primary challenges as Navigating health insurance systems, Lack of health insurance, and Being underinsured.

3. Access to Medical Care	 1 in 4 survey respondents faced barriers when trying to access health care in the past year. Refugees, immigrants, and LGBTQ adults were the most likely to report barriers to care.
	 Cost was a barrier for about 10% of survey respondents who had health insurance all year, while cost was a barrier for 40% of respondents who were uninsured at some point in the past year.
	 LGBTQ adults were the most likely group to report being dissatisfied with the healthcare they received, and the most likely to delay needed care for any reason.
	 1 in 3 Black residents and 1 in 6 Hispanic/Latinx residents said they were treated worse than people of other races when receiving health care in the past year.
4. Access to Healthy Food	 18% of all adults in Kent County experienced food insecurity in the past year, reporting they ran out of food and couldn't buy more or couldn't afford balanced meals in the past year.
	• 61% of LGBTQ residents, 32% of Black residents, and 31% of Hispanic residents experienced food insecurity in the past year.
	 1 in 3 people who face food insecurity in Kent County make too much money to qualify for food assistance benefits like Supplemental Nutrition Assistance Program (SNAP).

Hospital Implementation Strategy

Significant health and social needs to be addressed

Trinity Health Grand Rapids, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following needs:

- **1** Housing CHNA pages 16, 69-77
- **2** Health Insurance CHNA pages 17, 34-35
- 3 Access to Medical Care CHNA pages 18, 32-33, 36-44

Significant health and social needs that will not be addressed

Trinity Health Grand Rapids acknowledges the wide range of priority health and social issues that emerged from the CHNA process and determined that it could effectively focus on only those needs which are the most pressing, under- addressed and within its ability to influence. Trinity Health Grand Rapids does not intend to address the following needs:

• Access to Healthy Food – is not addressed in this plan, but the hospital remains committed to addressing social influencers of health in the community through assessment of needs and referral to community based organizations addressing this need in the community.

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners, has determined to address. The hospital reserves the right to amend this implementation strategy if circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital should refocus its limited resources to best serve the community.



Goal: Decrease number of individuals experiencing homelessness

CHNA Impact Measures	2024 Baseline	2027 Target
Decrease percentage of Black individuals who are unable to pay their housing costs in the past year Source: Kent County Behavioral Risk Factor Survey (BRFS)	25%	6%
Increase home ownership among non-White individuals in Kent County Source: American Community Survey (ACS) 5-Year Estimates	15%	28%
Decrease number of individuals experiencing homelessness Source: Grand Rapids Area Coalition to End Homelessness Point in Time Count	1,239	728
Decrease number of individuals experiencing eviction Source: Housing Kent Metrics Library, Eviction Filings	11,590	5,645

Strategy	Timeline		-	Hospital and Committed Partners	Committed Resources
Strategy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
	Х	Х	Х	Trinity Health Grand Rapids	Social, political, and financial resources
	х	х	х	Housing Kent	Convening authority for housing efforts and metrics library
Engage with local organizations addressing housing in Kent	х	х	х	Grand Rapids Coalition to End Homelessness	Continuum of Care Designation (HUD funder)
County through relationship-	Х	Х	Х	Degage Ministries	Housing and emergency shelter for women
building, community meeting	Х	Х	Х	Mel Trotter Ministries	Housing and emergency shelter for men
participation, and leveraging hospital social and political	х	х	х	Family Promise of West Michigan	Housing and emergency shelter for families
capital				Focus location(s)	Focus Population(s)
	Ke	ent C	oun	ty, Michigan	Individuals experiencing barriers to maintaining housing

Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	x	x	X	Trinity Health Grand Rapids	Workforce Development curriculum and training space
	Х	Х	Х	Huntington Bank	Foundation funding
Implement Workforce Development program to	х	х	х	West Michigan Center for Arts & Technology (WMCAT)	Workforce Development expertise
enhance economic security in the community					
the continuity				Focus location(s)	Focus Population(s)
	Ke	ent C	Coun	ty, Michigan	Individuals who are housing cost- overburdened (spending more than 30% of income on housing expenses)
Strategy		meli		Hospital and Committed Partners	Committed Resources
Strategy		Y2		(align to indicate committed resource)	(align by hospital/committed partner)
Support community education	Х	Х	Х	Trinity Health Grand Rapids	Funding and space for training
initiatives to increase home	Х	Х	Х	Urban League	Housing advocacy and equity expertise
ownership by non-white individuals	х	Х	х	Hispanic Center of Western	Community member input on educational
in Kent County through	v	v	v	Michigan	needs and requests
relationship-building, leveraging	X X	X	X	Linc-Up ICCF	Established Home Ownership Program
hospital political and social capital,	~	Х	Х		Comprehensive housing programming
and exploring options for in-kind				Focus location(s)	Focus Population(s)
support	Ke	ent C	Coun	ty, Michigan	Non-white individuals who would like to pursue home ownership
Strategy		meli		Hospital and Committed Partners	Committed Resources
		Y2	-	(align to indicate committed resource)	(align by hospital/committed partner)
	Х	Х	Х	Trinity Health Grand Rapids	Funding for Community Based Organizations Resources and activities per grant
	Х	Х	Х	TBD Grant Recipients	application
Provide hospital-funded grants to Community-Based					
Organizations addressing					
housing concerns.				Focus location(s)	Focus Population(s)
	Ken	t Co	unty	r, Michigan	Individuals experiencing barriers to obtaining and/or maintaining housing
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Staff and resources to conduct SIOH
	х	х	Х	Find Help	screening and refer to resources Community Resource Directory
	^	^	^		Community Resource Directory and
Implement standard referral	Х	Х	Х	2-1-1	Centralized Housing Referral Program
protocols for patients identifying housing issues in	х	Х	х	AYA Youth Collective	Housing Program for Youth
SIOH screening in inpatient and	х	х	х	Grand Rapids Housing	Section 8 Voucher Program
ambulatory settings at Trinity	Х	х	Х	Commission Well House	Affordable Housing Options
Health Grand Rapids	^	^	^		
				Focus location(s)	Focus Population(s)
				ty, Michigan	Individuals experiencing barriers to obtaining and/or maintaining housing
			no	Hospital and Committed Partners	Committed Resources
Strategy		meli Y2		(align to indicate committed resource)	
Strategy Explore partnerships with		Y2 X			(align by hospital/committed partner) Development of Referral Protocols

plans to address housing concerns for their enrolled members.		
	Focus location(s)	Focus Population(s)
	Kent County, Michigan	Individuals with Medicaid managed plans who are experiencing barriers to obtaining and/or maintaining housing

2 Health Insurance



Goal: Decrease number of individuals for whom cost is a barrier to seeking health care.

CHNA Impact Measures	2024 Baseline	2027 Target
Decrease percentage of uninsured individuals who did not seek needed care due to cost Source: Kent County Behavioral Risk Factor Survey (BRFS)	35%	22%
Decrease percent of Hispanic individuals uninsured part or all of the year <u>Source</u> : Kent County CHNA Community Survey	35%	25%
Decrease percentage of Immigrants and Refugees uninsured part or all of the year Source: Kent County CHNA Community Survey	35%	25%

Strategy	Timeline		ne	Hospital and Committed Partners	Committed Resources
Strategy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
	Х	х	х	Trinity Health Grand Rapids	Colleague time to provide training and materials for training
Provide education to staff	х	х	x	Kent County Health Equity Council Community Voice Members	Colleague time to attend training, space for training, and colleague time to apply learning in support of community members served by their organizations
	x	x	x	Refugee Resettlement Agencies	Colleague time to attend training, space for training, and colleague time to apply learning in support of community members served by their organizations
Medicare/Medicaid eligibility, application, and benefits	x	x	x	Health Net of West Michigan	Colleague time to attend training, space for training, and colleague time to apply learning in support of community members served by the organization
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Individuals in the community experiencing financial barriers to accessing health care

Stratomy	Timeline		ne	Hospital and Committed Partners	Committed Resources
Strategy		Y2		(align to indicate committed resource)	(align by hospital/committed partner)
	Х	Х	Х	Trinity Health Grand Rapids Kent County Health Equity	Colleague time and training materials Colleague time to market the training events
	х	х	х	Council Community Voice Members	to community members served by their organizations
Provide education and application/enrollment support to members of the community at accessible community	х	x	x	Refugee Resettlement Agencies	Colleague time to market the training events to community members served by their organizations
locations					
				Focus location(s)	Focus Population(s)
	Ke	ent C	oun	ty, Michigan	Individuals in the community experiencing financial barriers to accessing health care
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Colleague time to provide enrollment assistance and education
Embed Community Health Workers in hospital-affiliated					
Safety Net Clinics to support					
health insurance and Financial Assistance enrollment				Focus location(s)	Focus Population(s)
	Ke	Kent County, Michigan			Patients served by Trinity Health Grand Rapids who are experiencing financial barriers to accessing health care
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	x	х	х	Trinity Health Grand Rapids	Colleague time to support individuals in applying for health system Financial Assistance
	x	x	x	Corewell Health	Colleague time to support individuals in applying for health system Financial Assistance
Explore multi-system collaboration to ensure all	x	x	x	University of Michigan Health- West	Colleague time to support individuals in applying for health system Financial Assistance
patients who may be eligible for Financial Assistance are able to apply	x	x	x	Mary Free Bed Rehabilitation Hospital	Colleague time to support individuals in applying for health system Financial Assistance
uppiy	x	x	x	Kent County Health Department	Meeting space for Health Equity Council Advisory Board, the body that will oversee this joint effort
				Focus location(s)	Focus Population(s)
	Ke	ent C	oun	ty, Michigan	Patients served by Kent County health systems who are experiencing financial barriers to accessing health care
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
Develop and distribute	х	х	х	Trinity Health Grand Rapids	Colleague time to create the document. Funds to print the document
resource information about health care options for individuals who are uninsured	x	x	x	Kent County Health Equity Council Community Voice Members	Colleague time to distribute the document

	х	х	х	Catherine's Health Center	Subject matter expertise and colleague time to distribute the document
	х	х	х	Mel Trotter Community Partner Medical Clinic	Subject matter expertise and colleague time to distribute the document
	х	х	х	Cherry Health	Subject matter expertise and colleague time to distribute the document
	х	х	х	Exalta	Subject matter expertise and colleague time to distribute the document
	х	х	х	Oasis of Hope	Subject matter expertise and colleague time to distribute the document
				Focus location(s)	Focus Population(s)
	Kent Coun			ty, Michigan	Individuals who are uninsured or underinsured
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Funding for medical care provided through BCCCNP
	х	х	х	Kent County Health Department	BCCCNP strategy for Kent County
	х	х	х	Michigan Department of Health & Human Services	Best practice expertise
Spread Breast and Cervical Cancer Control Navigation Program (BCCCNP) across all	x	x	х	Kent County Health Equity Council Community Voice Members	Guidance regarding how to market BCCCNP and support in marketing the program
Trinity Health Medical Group sites in Kent County	х	х	х	Hispanic Center of Western Michigan	Guidance regarding how to market BCCCNP and support in marketing the program
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Patients of Trinity Health Grand Rapids who do not have adequate health insurance coverage for breast and cervical cancer screening exams

Access to Medical Care

3



Goal: Decrease barriers to accessing medical care.

CHNA Impact Measures	2024 Baseline	2027 Target
Reduce percentage of adults who report delaying needed medical care for any reason Source: Kent County Behavioral Risk Factor Survey (BRFS)	25%	16%
Reduce percentage of LGBTQ+ adults who report delaying needed medical care for any reason Source: Kent County Behavioral Risk Factor Survey (BRFS)	48%	23%
Reduce percentage of uninsured individuals without a primary care provider Source: Kent County Behavioral Risk Factor Survey (BRFS)	32%	16%

Strategy		Timeline		Hospital and Committed Partners	Committed Resources
	¥1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Colleague time to attend training and funds to purchase training
Offer staff education around	х	х	х	LGBTQ+ Healthcare Consortium	Leader collaboration and curriculum expertise
culturally- sensitive care for	Х	Х	Х	GR Trans Foundation	Curriculum expertise
individuals in the LGBTQ+					
community					
				Focus location(s)	Focus Population(s)
	Ke	ent C	oun	ty, Michigan	Members of the LGBTQ+ community
Church a mu	Ti	meli	ne	Hospital and Committed Partners	Committed Resources
Strategy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
Host colleague and patient focus group to determine	х	х	х	Trinity Health Grand Rapids	Colleague time to participate in focus groups and planning teams

needs of—and build trust with—members of the LGBTQ+ community	х	х	х	Grand Rapids Pride Center	Best practice expertise and facilitation support
	Х	Х	Х	LGBTQ+ Healthcare Consortium	Best practice expertise
	Х	Х	Х	GR Trans Foundation	Best practice expertise
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Colleagues and patients of Trinity Health Grand Rapids who are members of the LGBTQ+ community
Strategy	Timeline Y1 Y2 Y3			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Colleague time to attend training and funds to purchase training
Offer education on trauma-	x	x	x	Kent County Health Equity Council Community Voice Members	Expertise regarding the non-trauma- informed care experienced by the individuals served by their organizations
	х	х	х	Network 180 Community Mental Health	Best practice expertise and curriculum
informed care to colleagues	Х	Х	Х	Family Futures	Best practice expertise and curriculum
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Individuals receiving care at Trinity Health Grand Rapids who have a history of trauma
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	х	х	х	Trinity Health Grand Rapids	Mobile mammography unit and colleague time
Offer mobile mammography services and awareness of the availability of the services in communities where individuals experience inequities in health outcomes	х	x	х	Hispanic Center of Western Michigan	Guidance regarding day, time, and location of screenings to reach individuals needing the service. Marketing of the service.
	x	x	х	Grand Rapids African American Health Institute	Guidance regarding day, time, and location of screenings to reach individuals needing the service. Marketing of the service.
	х	х	х	5/3 Bank	Parking lot space and electricity to set up the mobile mammography unit
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Members of the community experiencing transportation barriers to accessing mammography services
Strategy		meli va		Hospital and Committed Partners	Committed Resources
Offer transportation services to	X	Y2 X	Y3 X	(align to indicate committed resource) Trinity Health Grand Rapids	(align by hospital/committed partner) Funding for transportation
	X	X	X	Lyft Concierge	Expertise in healthcare ride-share practice
	x	х	х	Trinity Health Medical Group	Expertise in offices caring for patients who are experiencing transportation barriers to attending scheduled appointments
appointments					
				Focus location(s)	Focus Population(s)
	Ke	nt C	oun	ty, Michigan	Trinity Health Grand Rapids patients who are experiencing transportation barriers to attending scheduled appointments

Strategy		Timeline Y1 Y2 Y3		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
Improve care to individuals in the Hispanic community through increased colleague cultural competence	х	х	х	Trinity Health Grand Rapids	Colleague time to attend training and funding for training
	х	х	х	Trinity Health Medical Group Clinica Santa Maria	Colleague time to attend training
	х	х	х	Trinity Health Medical Group Sparta	Colleague time to attend training
	х	х	х	Trinity Health West Michigan Language Services	Subject matter expertise
	x	х	х	Kent County Health Equity Council Community Voice Members	Expertise regarding the non-culturally competent care experienced by the individuals served by their organizations
	x	x	x	Hispanic Center of Western Michigan	Subject matter expertise and expertise regarding the non-culturally competent care experienced by the individuals served by the organization
				Focus location(s)	Focus Population(s)
	Ke	ent C	oun	ty, Michigan	Hispanic patients served by Trinity Health Grand Rapids

Adoption of Implementation Strategy

On September 25, 2024, the Board of Directors for Trinity Health Grand Rapids met to discuss the 2025-2027 Implementation Strategy for addressing the community health and social needs identified in the 2024 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

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Dr. Matt Biersack, President, Trinity Health Grand Rapids

9/25/24

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