MEMORIAL HERMANN GREATER HEIGHTS HOSPITAL

2019
Implementation
Strategy

MEMORIAL HERMANN
Greater Heights

Executive Summary

Introduction & Purpose

Memorial Hermann Greater Heights Hospital (MH Greater Heights) is pleased to share its Implementation Strategy Plan, which follows the development of its 2019 Community Health Needs Assessment (CHNA). In accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements, this assessment was approved by the Memorial Hermann Health System Board of Directors on June 27th, 2019.

This report summarizes the plans for MH Greater Heights to develop and collaborate on community benefit programs that address the 4 Pillar prioritized health needs identified in its 2019 CHNA. These include:

Memorial Hermann Health System's CHNA Pillar Priorities
• Pillar 1: Access to Healthcare • Pillar 2: Emotional Well-Being • Pillar 3: Food as Health • Pillar 4: Exercise Is Medicine

The following additional significant health needs emerged from a review of the primary and secondary data: Older Adults and Aging; Cancers; Education; Transportation; Children's Health; Economy. With the need to focus on the prioritized health needs described in the table above, these topics are not specifically prioritized efforts in the 2019-2022 Implementation Strategy. However, due to the interrelationships of social determinant needs many of these areas fall, tangentially, within the prioritized health needs and will be addressed through the upstream efforts of the prioritized health needs. Additionally, many of them are addressed within ongoing programs and services (and described in more detail in the CHNA report).

MH Greater Heights provides additional support for community benefit activities in the community that lay outside the scope of the programs and activities outlined in this Implementation Strategy, but those additional activities will not be explored in detail in this report.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in MH Greater Heights's service area and guide the hospital's planning efforts to address those needs. Special attention was given to the needs of vulnerable populations, unmet health needs or gaps in services, and input from the community. To standardize efforts across the Memorial Hermann Health System and increase the potential for impacting top health needs in the greater Houston region, community health needs were assessed and prioritized at a regional/system level. For further information on the process to identify and prioritize significant health needs, please refer to MH Greater Heights's CHNA report at the following link: www.memorialhermann.org/locations/heights/community-health-needs-assessment-greater-heights/.

Memorial Hermann Greater Heights Hospital

Located in the heart of Houston adjacent to The Houston Heights, MH Greater Heights Hospital has been caring for families since 1966. A 260-bed facility with more than 600 affiliated doctors, MH Greater Heights provides a wide range of medical specialties, including heart and vascular care, orthopedics, cancer treatment, sleep labs, diagnostic imaging, rehabilitation, women's care, and wound care.

Vision

Memorial Hermann will be the preeminent health system in the U.S. by advancing the health of those we serve through trusted partnerships with physicians, employees and others to deliver the best possible health solutions while relentlessly pursuing quality and value.

Mission Statement

Memorial Hermann is a not-for-profit, community-owned, health care system with spiritual values, dedicated to providing high quality health services in order to improve the health of the people in Southeast Texas.

Memorial Hermann Health System

One of the largest not-for-profit health systems in the nation, Memorial Hermann Health System is an integrated system with an exceptional affiliated medical staff and more than 26,000 employees. Governed by a Board of community members, the System services Southeast Texas and the Greater Houston community with more than 300 care delivery sites including 19 hospitals; the country's busiest Level 1 trauma center; an academic medical center affiliated with McGovern Medical School at UTHealth; one of the nation's top rehabilitation and research hospitals; and numerous specialty programs and services.

Memorial Hermann has been a trusted healthcare resource for more than 110 years and as Greater Houston's only full-service, clinically integrated health system, we continue to identify and meet our region's healthcare needs. Among our diverse portfolio is Life Flight, the largest and busiest air ambulance service in the United States; the Memorial Hermann Physician Network, MHMD, one of the largest, most advanced, and clinically integrated physician organizations in the country; and, the Memorial Hermann Accountable Care Organization, operating a care delivery model that generates better outcomes at lower costs to consumers. Specialties span burn treatment, cancer, children's health, diabetes and endocrinology, digestive health, ear, nose and throat, heart and vascular, lymphedema, neurosurgery, neurology, stroke, nutrition, ophthalmology, orthopedics, physical and occupational therapy, rehabilitation, robotic surgery, sleep studies, transplant, weight loss, women's health, maternity and wound care. Supporting the System in its impact on overall population health is the Community Benefit Corporation. At a market share of 26.1% in the 'expanded' greater Houston area of 12 counties, our vision is that Memorial Hermann will be a preeminent integrated health system in the U.S. by advancing the health of those we serve.

Summary of Implementation Strategies

Implementation Strategy Design Process

Stakeholders from the 13 hospital facilities in the Memorial Hermann Health System were invited to participate in an Implementation Strategy Kick-Off event hosted by Memorial Hermann's Community Benefit Department and Conduent Healthy Communities Institute (HCI) on May 6, 2019. During this half-day event, participants reviewed Memorial Hermann's CHNA, were introduced to the 2019 MH Implementation Strategy Template and worked in groups to begin drafting their new implementation strategies for their respective hospitals. After the Kick-Off event, each hospital engaged in a series of three bi-weekly technical assistance calls with the Conduent HCI team and representatives from the MH Community Benefit Department to further develop and refine their implementation strategy.

Memorial Hermann Greater Heights Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities that will be taken on by MH Greater Heights to directly address the Four Pillars and focal areas identified in the CHNA process. They include:

- Pillar 1: Access to Care
  - Nurse Health Line
  - ER Navigation
  - OneBridge Health Network
  - Increased Access to Care
- Pillar 2: Emotional Wellbeing
  - Mental Health and Substance Abuse
- Pillar 3: Food as Health
  - Fresh Food Pharmacy
  - Food Insecurity Screening
  - Support Groups for Hospital and Surrounding Community Members
- Pillar 4: Exercise is Medicine
  - Improve Health and Social Cohesion

The Action Plan presented below outlines in detail the individual strategies and activities MH Greater Heights will implement to address the health needs identified though the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

Memorial Hermann Greater Heights Hospital: Implementation Strategy Action Plan

PILLAR 1: ACCESS TO HEALTHCARE
Goal Statement: From 2019-2021, Memorial Hermann will implement initiatives that increase patients access to care to ensure they receive care at the right location, at the right cost, at the right time.

Focal Area 1: Access to Health Services

Strategy 1.A: Nurse Health Line

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Outcomes	Y1 Actual	Y2 Actual
Activity 1.A.1 Provide a 24/7 free resource via the Nurse Health Line that community members (uninsured and insured) within the greater Houston community can call to discuss their health concerns, receive recommendations on the appropriate setting for care, and get connected to appropriate resources.	# of calls from counties comprising MHGH's primary service area (Harris)	29,037	30,036	33,731	% Callers satisfied with the NHL % Callers who followed the NHL Advice % Callers who were diverted from the ER	97% report the service as good or excellent. 97% report following the advice of the nurse. 99% report they will use the service again.	98.41% report the service as good or excellent. 95.08% report following the advice of the nurse. 99.46% report they will use the service again.
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:
- NHL management and operations (currently funded through DSRIP)
- Local campus marketing

Collaboration:
- MH Community Benefit Corporation
- Greater Houston Safety-Net Providers

PILLAR 1: ACCESS TO HEALTHCARE
Goal Statement: From 2019-2021, Memorial Hermann will implement initiatives that increase patients access to care to ensure they receive care at the right location, at the right cost, at the right time.

Focal Area 2: Lack of Health Insurance

Strategy 2:A: ER Navigation

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 2.A.1 Navigating uninsured and Medicaid patients that access the ER for primary care treatable and avoidable issues to a medical home.	# of Encounters # of Referrals	5,348 5,133	3,592 5,341	4,803 6,000	Decline in ER visits post ER Navigation Intervention as opposed to pre at 6, 12, and 18-month intervals	6 month—70.8%; 12 month—59.6% 18 month—47.1%	6 month—71.8%; 12 month—63% 18 month—57%
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:
- Staff and benefits
- IT; operating costs

Collaboration:
- MH Community Benefit Corporation
- Greater Houston Safety-Net Providers
- MH Greater Heights Emergency Department

PILLAR 1: ACCESS TO HEALTHCARE
Goal Statement: From 2019-2021, Memorial Hermann will implement initiatives that increase patients access to care to ensure they receive care at the right location, at the right cost, at the right time.

Focal Area 3: Low Income/Underserved

Strategy 3:A: OneBridge Health Network

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 3.A.1 Provide OneBridge Health Network to connect uninsured patients, meeting eligibility criteria, including a referral from a PCP, with the specialty care connections they need to get well.	# of physicians onboarded	New Program	104	95	# of patients navigated # of patients treated by specialists $s of specialty services provided	10 10 $22,802.82	2 1 $235.00
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:

- OneBridge Health Network Support Staff and Operations
- Hospital Staff communications/marketing to Providers
- Providers' donation of time

Collaboration:

- MH Community Benefit Corporation
- Greater Houston Safety-Net Providers

PILLAR 1: ACCESS TO HEALTHCARE
Goal Statement: From 2019-2021, Memorial Hermann will implement initiatives that increase patients access to care to ensure they receive care at the right location, at the right cost, at the right time.

Focal Area 3: Low Income/Underserved

Strategy 3:B: Increased Access to Care

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 3.B.1 Transportation – Patient Transportation Fees. Support patient transportation fees for low income/underserved via cab vouchers etc. in order to provide a safe way home upon discharge.	Dollars spent	$297,797	$587,420	$721,094	Reduced length of average patient stay by # of days Improved patient satisfaction of self-pay population	Outputs collected; outcomes challenging	Outputs collected; outcomes challenging
Activity 3.B.2 Provide Neighborhood Health Center vouchers through the ER Case management team to promote awareness of and improve access for the appropriate level of care.	# Vouchers given	1,222	253	39	# of patient visits	204	Outputs collected; outcomes challenging
			Activity Notes (if necessary):		**Outcomes Notes** (if necessary):		

Resources:
- ER
- MHGH Case Management
- Transportation costs

Collaboration:
- MH Community Benefit Corporation
- Neighborhood Health Centers
- MHGH Case Management

PILLAR 2: EMOTIONAL WELLBEING

Goal Statement: From 2019-2021, Memorial Hermann will implement initiatives that connect and care for community members that are experiencing a mental health crisis with: access to appropriate psychiatric specialists at the time of their crisis; redirection away from the ER; linkage to a permanent, community based mental health provider; and knowledge to navigate the system, regardless of their ability to pay.

Focal Area: Mental Health and Substance Abuse

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Outcomes	Y1 Actual	Y2 Actual
Activity 1.A.1 Memorial Hermann Psychiatric Response Team, a mobile assessment team, works 24/7 across the System and provides behavioral health expertise to all acute care campuses, delivering services to ERs and inpatient units.	# of patients	808	778	723	# ED patients referred to outpatient care	389	441
Activity 1.A.2 Memorial Hermann Mental Health Crisis Clinics. Memorial Hermann Mental Health Crisis Clinics (MHCCs) are outpatient specialty clinics open to the community, meant to serve individuals in crisis situations or those unable to follow up with other outpatient providers for their behavioral health needs.	# of patients	4,286	3,332	2,554	# PCP Referrals	566	438
Activity 1.A.3 Memorial Hermann Integrated Care Program. Memorial Hermann	# of patients	213	656	386	# Substance abuse screenings completed	649	386

Integrated Care Program (ICP) strives to facilitate systematic coordination of general and behavioral healthcare. This program embeds a Behavioral Health Care Manager (BHCM) into primary and specialty outpatient care practices. Includes depression and substance abuse screenings.					# Unique Patients Screened for Depression (using either PHQ9 or PSC-17 or Edinburg tools)	652	330
Activity 1.A.4 Memorial Hermann Psychiatric Response Case Management. Memorial Hermann Psychiatric Response Case Management (PRCM) program provides intensive community-based case management services for individuals with chronic mental illness who struggle to maintain stability in the community.	# of unique patients	182	206	136	**%** Reduced readmissions # of PCP Referrals # Complete housing assessments	57% 165 151	42% 58 111
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:

- Human Resources - Behavioral Health Services Employees
- Operating Resources – Computers, EMR, and other documentation tools
- Capital Resources – Offices and other facilities

Collaboration:

- Collaboration with all the Memorial Hermann Facilities, Leadership, Case Management, Medical staff, Community Service Providers, and other Community Partners

PILLAR 3: FOOD AS HEALTH

Goal Statement: From 2019 – 2021, Memorial Hermann will implement initiatives that increase awareness of food insecurity, provision of food programs, and education that promotes the reduction/postponement of chronic disease.

Focal Area 1: Diabetes

Strategy 1:A: Fresh Food Pharmacy

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 1.A.1 Implement a Fresh Food Farmacy connected with the Diabetes Support Group where patients pick up recipes and resources and have their nutrition questions answered by the dietitians and health care managers.	Average # of patients participating/month	0 - New	Not implemented this year but in a 3- year plan if funding provided	No implementation during the pandemic	Change in knowledge on healthy choices based on surveys	Not implemented this year but in a 3- year plan if funding provided	No implementation during the pandemic
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:

- Food Bank
- Staff time
- Classroom space
- Operating costs

Collaboration:

- Local food banks
- Sodexo

PILLAR 3: FOOD AS HEALTH

Goal Statement: From 2019 – 2021, Memorial Hermann will implement initiatives that increase awareness of food insecurity, provision of food programs, and education that promotes the reduction/postponement of chronic disease.

Focal Area 2: Food Insecurity

Strategy 2:A: Food Insecurity Screening

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 2.A.1 Screen for food insecurity via ER staff and care managers and connect patients to Houston Food Bank for SNAP eligibility and food pantry connections.	# of patients screened # of patients reporting food insecurity	67,905 1,648	60,368 1,021	54,166 1,905	# of SNAP applications completed by Houston Food Bank for Hospital's service area counties	14,739 (Harris County)	15,514 (Harris County)
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		

Resources:

- Staff time to interview and navigate patients
- Staff time to compile reports

Collaboration:

- Community Benefit Corporation
- Houston Food Bank

PILLAR 3: FOOD AS HEALTH

Goal Statement: From 2019 – 2021, Memorial Hermann will implement initiatives that increase awareness of food insecurity, provision of food programs, and education that promotes the reduction/postponement of chronic disease.

Focal Area 3: Heart Disease/Stroke

Strategy 3:A: Support Groups for Hospital and Surrounding Community Members

Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 3.A.1 Conduct Amputation Support Group for members within the hospital and the surrounding community.	# events Average # of participants	10 8	12 23	No activity during the pandemic	Change in knowledge and health status using modified pre/post test	Outputs collected; outcomes challenging	No activity during the pandemic
Activity 3.A.2 Conduct Mended Hearts Support Group for members within the hospital and the surrounding community.	# events Average # of participants	10 8	4 30-45	No activity during the pandemic	Change in knowledge and health status using modified pre/post test	Outputs collected; outcomes challenging	No activity during the pandemic
Activity 3.A.3 Conduct Stroke Support Group for members within the hospital and the surrounding community.	# events Average # of participants	10 8	2-4 attendees from GH 8 combined meetings with Memorial City and Katy	No activity during the pandemic	Change in knowledge and health status measured using standardized pre/post test	Outputs collected; outcomes challenging	No activity during the pandemic
			Activity Notes (if necessary):		**Outcomes Notes** (if necessary):		

Resources:

- Staff time
- Operating costs
- Marketing

Collaboration:

- TIRR Staff
- Restorix

PILLAR 4: EXERCISE IS MEDICINE **Goal Statement: From 2019 – 2021, Memorial Hermann will implement initiatives that promote physical activities that promote improved health, social cohesion, and emotional well-being.**							
Focal Area: Obesity							
Strategy 1:A: Improve Health and Social Cohesion							
Activities	**Process Measures**	**Baseline**	**Y1 Actual**	**Y2 Actual**	**Outcomes**	**Y1 Actual**	**Y2 Actual**
Activity 1.A.1 Improve health and social cohesion through food distribution and 'a walk in the park' at Moody and Castillo Parks in the Near Northside two Saturdays a month.	# of events # of participants	22 105 participants/ Saturday	22 3,245	0	Retained participation Targeted surveys	Retained participation with an increase of 9%	Walk did not occur due to the pandemic. Food distribution moved to the area pantry.
Activity 1.A.2 Improve health and social cohesion through Walking Clubs (including Walk with a Doc), Senior Fitness, Soccer for Success at Clark Park in Northline.	Average # of walkers # of soccer for success schools that are supported	16 3	48 3	48 0	Retained participation BMI and pacer score for soccer for success	Retention declined due to Pandemic WWAD – 22 Walking Club-31 Seniors-0 85% improvement in health outcomes for 167 SFS students.	WWAD increase in average attendance to 24 No programs for Seniors -0 And SFS-0 during the pandemic
Activity 1.A.3 Healthy Outdoor Communities: Community Collaborative to to create thriving parks and communities and contribute to integrated programming	# of planning meetings # of events	0 0	7 0	12	The goal of this new initiative is to provide programmed events and hands on activities to underserved	The pandemic deferred our plans to implement programming	Identification of schools for gardens in Acres Home

and resources that promote more active and healthy outdoor lifestyles leading to better mental health, well-being, and resiliency in children and youth of color and their families as well as the community at large. GH will assist in programming efforts for events that serve the client base in the Acres Home area.					communities in order to encourage, enable and educate children, youth of color and their families to connect with greenspace and nature, benefiting from the physical and mental health benefits of being outdoors.		
Activity Notes (if necessary):					**Outcomes Notes** (if necessary):		
Resources: • Community Benefit Corporation • Staff • Physicians							
Collaboration: • Moody Park • Castillo Park • Senior Fitness • Soccer for Success at Clark Park in Northline • Nature and Eclectic Outdoors (NEO); the Houston Parks Board (HPB); the City of Houston Parks and Recreation Department; City of Houston and Harris County Libraries; Harris Health System; Lone Star College; Park Rx America; City of Houston SPARK Parks; applicable schools; and a Community Voice Committee comprised of resident advocates from across Houston's communities							