

MEMORIAL HERMANN NORTHEAST HOSPITAL

2019 Implementation Strategy



Executive Summary

Introduction & Purpose

Memorial Hermann Northeast Hospital (MH Northeast) 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 Northeast 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 Northeast 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 Northeast'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 Northeast's CHNA report at the following link:

www.memorialhermann.org/locations/northeast/community-health-needs-assessment-northeast/.

Memorial Hermann Northeast Hospital

A 255-bed facility, MH Northeast Hospital has been caring for families in the Lake Houston and Kingwood area for more than 30 years, offering world-class care close to home. Its affiliated doctors span a wide variety of services including cancer care, children's emergency and NICU care, heart and vascular care, orthopedics, neurosciences, sleep health, wound care, and women's care. The hospital is the anchor for the innovative Memorial Hermann Convenient Care Center providing one-stop, highly coordinated access to an extensive array of Memorial Hermann services. Additionally, MH Northeast serves as the official healthcare provider to passengers traveling through Houston's George Bush International Airport.

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 Northeast Implementation Strategy

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

- Pillar 1: Access to Care
 - Nurse Health Line
 - o ER Navigation
 - OneBridge Health Network
- Pillar 2: Emotional Wellbeing
 - Mental Health and Substance Abuse
- Pillar 3: Food as Health
 - Diabetic Support Groups
 - Food Insecurity Screening
 - Stroke Support Groups
- Pillar 4: Exercise is Medicine
 - Walk with a Doc
 - Pediatric Weight Loss Management Program

The Action Plan presented below outlines in detail the individual strategies and activities MH Northeast 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 Northeast 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	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 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 MHNE's primary service area (Harris, Liberty, and Montgomery)	31,191	32,603	36,838	35,269	% 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.	98% report the service as good or excellent 98% report following the advice of the nurse 99% report they will use the service again.
Activity Notes (if necessary):						Outcomes Notes (if necessary):			

Resources:

• NHL management and operations (currently funded through DSRIP)

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

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	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 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	3,642 2,858	5,855 5,796	4,058 4,408	5,199	Decline in ER Visits post ER Navigation Intervention as opposed to pre at 6, 12, and 18- month intervals	6 mo: -70.5% 12 mo: -58.9% 18 mo: -45.7%	6 mo: -71% 12 mo: -62% 18 mo: -57%	6 mo: -73.1% 12 mo: -63.2% 18 mo: -56.3%
Activity Notes (if necessary):						Outcomes Notes (if necessary):			•

Resources:

- ER Navigators
- IT Support
- Operating costs

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

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:B: Memorial Hermann Northeast Cancer Center

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 2.B.1 Continue to host free MHNE community cancer screenings (1 in summer and 1 in fall) at Memorial Hermann NE Cancer Center. The events are marketed to the community via social media, web, and grassroots efforts.	# of events # of screenings	160	11	No activity during the pandemic	No activity due to the pande mic	# of individuals with positive screenings who are referred for follow-up care	11	No activity during the pandemic	No activity due to the pandemic
Activity Notes (if necessary):							nes Notes necessary):		

Resources:

- Staff
- Volunteers
- Aligned physicians
- Operating costs to include catering, give-a-ways

- MH Community Benefit Corporation
- Greater Houston Safety-Net Providers
- Memorial Hermann Medical Group
- Local non-profits that partner with MHHS system
- Media

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	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 3.A.1 Provide OneBridge Health Network to connect uninsured	# of physicians onboarded	0	104	95	97	# of patients navigated	10	2	4
patients, meeting eligibility criteria, including a referral from a PCP, with the specialty	on sources					# of patients treated by specialists	10	1	7
care connections they need to get well.						\$s of specialty services provided	\$22,802.82	\$235.00	\$131,701.75
Ac	ctivity Notes (if ne	ecessary):				Outcomes Notes (if necessary):			

Resources:

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

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

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: Project Mammogram

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 3.B.1	# of	441	385	No	357	# of	385	No activity	357
Continue cooperative agreement with Northeast	patients			activity		individuals		during the	
Hospital Foundation to enable the uninsured to access	screened			during		with		pandemic	
mammography screenings and treatment as	annually			the		positive			
appropriate. Project Mammogram is a community				pande		screenings			
program sponsored by the Northeast Hospital				mic		who receive			
Foundation that offers free mammograms and breast						appropriate			
ultrasounds to qualifying area women and men. Once						follow-up			
diagnosed, Project Mammogram sends patients to The						care			
Rose for navigation, then some are referred to the									
MHNE Cancer Center. MHNE supports by participating									
in the annual 'In the Pink' fundraising campaign.									
Activity Notes (if necessary):					Outcom	nes Notes (if ne	cessary):		
					YR 1: Includes a total of 124 screening				
					mammo	ograms, 131 dia	gnoistic		
					mammo	ograms and 130) breast u	Iltrasounds	

Resources:

- Employee volunteers
- Branded event give-a-ways at ITP events

- Northeast Hospital Foundation
- In the Pink Partners Businesses, organizations and individuals that support fundraising and outreach efforts
- The Rose

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 1: Mental Health and Substance Abuse

Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
# of	759	787	1,212	1,154	# ED patients	351	736	447
patients					referred to			
					outpatient care			
# of	4,286	3,332	2,554	2,592	# PCP Referrals	566	438	321
patients								
# of	213	656	386	229	# Substance abuse	649	386	229
patients					screenings			
					completed			
					<u> </u>	652	330	207
					•			
					17 or Edinburg tools)			
	# of patients # of patients	# of patients # of patients	MeasuresBaselineActual# of patients759787# of patients4,2863,332# of213656	Measures Baseline Actual Actual # of patients 759 787 1,212 # of patients 4,286 3,332 2,554 # of 213 656 386	Measures Baseline Actual Actual Actual # of patients 759 787 1,212 1,154 # of patients 4,286 3,332 2,554 2,592 # of 213 656 386 229	Measures Baseline Actual Actual Actual Actual Outcomes # of patients 759 787 1,212 1,154 # ED patients referred to outpatient care # of patients 4,286 3,332 2,554 2,592 # PCP Referrals # of patients 213 656 386 229 # Substance abuse screenings completed # Unique Patients Screened for Depression (using either PHQ9 or PSC-	Measures Baseline Actual Actual <td>MeasuresBaseline # of patientsActual 759Actual 787Actual 1,212Actual 1,154# ED patients referred to outpatient careActual 351Actual 736# of patients4,286 patients3,332 2,5542,592 2,592# PCP Referrals566 438438# of patients213 patients656 438386 229 4 Unique Patients Screened for Depression (using either PHQ9 or PSC-652 330</br></br></br></br></td>	MeasuresBaseline # of patientsActual 759Actual 787Actual 1,212Actual 1,154# ED patients referred to outpatient careActual 351Actual 736# of patients4,286 patients3,332 2,5542,592 2,592# PCP Referrals566 438438# of patients213 patients656 438386 229 4 Unique Patients

Activity 1.A.4	# of	182	206	136	71	% Reduced	57%	42%	76%
Memorial Hermann Psychiatric Response Case	unique					readmissions			
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	patients					# of PCP Referrals # Complete housing assessments	165 151	58 111	71 71
	Activity N	cessary):			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: Community Education

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 1.A.1	# events	3	4	No	1	Utilize community	Not	No	Not
Community/Employer Health				activity		assessment to determine	collected	activity	collected in
Lunch & Learns offered by	# of	200	460	during the	130	health topics the	in FY20	during the	FY22
healthcare providers to	attendees			pandemic		community is most		pandemic	
employers and community						interested in to meet			
members on topics related to						health education			
nutrition, weight management,						requests			
etc.									
						% of community health			
						education requests			
						filled/completed			
Activity Notes (if necessary):						Outcomes Notes			
						(if necessary):			

Resources:

- Time/support of collaborators
- Marketing & Communications
- Occupational Health
- 3rd party vendor for set-up
- Event give-a-ways

Collaboration:

Local employers

Staff

ISDs

Physicians

• Local media

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	Baseline	Y1	Y2	Y3	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
	Measures		Actual	Actual	Actual				
Activity 2.A.1	# of patients	85,466	81,113	71,794	64,192	# of SNAP	14,950	16,185	15,005
Screen for food insecurity via ER	screened					applications	(Harris,	(Harris,	(Harris,
staff and care managers and						completed by	Liberty and	Liberty and	Liberty and
connect patients to Houston Food	# of patients	820	2,269	2,661	2,486	Houston	Montgomery)	Montgomery)	Montgomery)
Bank for SNAP eligibility and food	reporting					Food Bank			
pantry connections.	food					for Hospital's			
	insecurity					service area			
						counties			

Resources:

• ER Staff time to interview and navigate patients and compile reports

- Community Benefit Corporation
- Houston Food Bank
- Mission Northeast
- Humble Area Assistance Ministries

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: Stroke Support Group

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 3.A.1	# of events	4	No activity	No activity	No activity	Change in knowledge	No activity	No activity	No activity
Stroke Support Group (meets			during the	during the	due to the	and behavior as	during the	during the	de to the
quarterly) – Free and open to	#	1	pandemic	pandemic	pandemic	measured via a	pandemic	pandemic	pandemic
the community to attend.	participants					pre/post survey			
Activ	vity Notes (if n	ecessary):				Outcomes Notes			
						(if necessary):			

Resources:

- Staff/Volunteer Time
- Marketing and Communications
- 3rd party vendor for set-up
- Event give-a-ways

- Occupational Health
- ISDs
- Local employers
- Staff
- Physicians
- Mid-level healthcare providers

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: Physical Health Services — Health Physicals and Wellness Center

Activities	Process Measures	Baseline	Y1 Actual	Y2 Actual	Y3 Actual	Outcomes	Y1 Actual	Y2 Actual	Y3 Actual
Activity 1.A.1	# of	11,300	0 —	8,036	9,833	Funds going	0—due to COVID	Funds	Funds going back
Continue to conduct	students per		due to			back to		going back	to support
athletic physicals in public	year		COVID			support		to support	schools
schools (full physicals and	examined					school sports		school	
EKG); partner with schools								sports	
to provide a concussion									
trained PCP or ED physician									
on site at HS games.									
Students pay a nominal fee									
for the physicals that is									
then donated back to the									
school system.									
Activity 1.A.2	# of total	171	180	No activity	85	Change in	The Wellness Center	No activity	Access to the
Provide subsidized health	members			during the		health status	has been out of	during the	Wellness Center
and wellness services to				pandemic		(Improve	commission pretty	pandemic	was restricted to
employees and community						general	much this entire		employees due
at on-site Wellness Center	# of	30	0		31	wellness)	year. The number of		to the pandemic.
(fitness classes, boot	responses						members hasn't		Survey focused
camps, body fat	to annual					Impact on	changed and we have		primarily on
percentage, etc.). Majority	membership					participant	no way to measure		areas of
of current members are	wellness					wellness	the change in health		improvement for
post-rehab patients and	survey					measured by	status or improved		the wellness
local senior citizens.						annual	general wellness as		center rather
						participant	there has been no		than change in
						survey	survey taken.		health status.

Activity Notes (if necessary):	Outcomes Notes (if necessary):	
Resources:		
Stroke Coordinator		
Athletic Trainers		
Wellness Center Manager		
Staff		
Volunteers		
Collaboration:		
• ISDs		

• Employers

Physicians and Mid-levelsChambers of Commerce

• Community Seniors