Fostering Community Healing: It begins with us

By Kimberlydawn Wisdom, M.D., M.S., senior vice president of Community Health & Equity and chief wellness & diversity officer at Henry Ford Health System

As those of us in health care continue our work to offer equitable, high-quality and reliable care to our patients, employees, and individuals living in our communities, I believe that to be most effective, we often need to step back and examine ourselves. The health and healing of the patient is, in part, governed by the training of the provider and their world view and experiences, both in and outside the exam room. Understanding our own roles and ourselves better, equips us to better serve our patients and communities. I am reminded of a talk I gave in the 1990s with Robert Anderson, Ed.D., at the University of Michigan Medical School. Although it was more than 20 years ago, many of the ideas we expressed regarding diabetes care are relevant today. We asked the audience of 3,000 several questions:

Can you see how your experiences and upbringing have shaped your attitudes toward members of other cultures? How much of your current attitudes come from the media, and not from your own exploration of other cultures? What kinds of associations do you make between certain cultures and positive or negative acts?

We all have unconscious biases that can have a profound effect on our interactions with others. There are subtle, but pervasive attitudes that members of various cultural groups encounter every day. These can create fear of misunderstanding, or a sense of being excluded or rejected.

Whether or not we experience these fears, understanding that they exist and that we may play a role in creating them is key as we move forward to create healthier and healing communities. When we look closely at ourselves and resolve to become part of the solution, we will all benefit with greater productivity and true healing within the communities and the individuals we serve – and within ourselves.

Take the Harvard Implicit Bias test: https://implicit.harvard.edu/implicit/

Henry Ford Health System welcomes Wright Lassiter III

Wright Lassiter III became president and chief executive officer of Henry Ford Health System on Dec. 31, 2016, following the retirement of Nancy Schlichting, CEO. He officially joined Henry Ford in 2015 as president of the health system, which allowed a carefully planned transition to his new role.

During his first two years with Henry Ford, Lassiter was instrumental in growing the System through the addition of Allegiance Health in Jackson and HealthPlus of Michigan in Flint, and affiliating with Affirmant Health Partners.

Since joining the System, Lassiter has been committed to expanding Henry Ford’s geographic footprint and to providing the most highly reliable and quality care for all, especially since the System is privileged to serve such a diverse population.

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Henry Ford welcomes Wright Lassiter III, continued from page 1

“It’s very important to me that healthcare systems do more than deliver healthcare. A healthcare system must deliver it in a way that is compassionate and meets people where they are,” says Lassiter. “My expectation for Henry Ford Health System both today and going forward is that we are not just a leader in eliminating disparities and serving our communities, but that we are recognized as ‘the’ leader.”

According to Kimberlydawn Wisdom, M.D., M.S., community health, equity, diversity and wellness have taken on increasingly greater roles at Henry Ford for decades. “Gail Warden, CEO from 1988 to 2003, conceptualized it. Nancy Schlichting, CEO for the next 13 years, operationalized it. Now, Wright Lassiter is institutionalizing it,” she says.

By “institutionalizing,” Dr. Wisdom explains that under Lassiter’s leadership, Henry Ford will focus on weaving community health, equity, diversity and wellness into the core fabric of the organization and the community so that it will endure for many years and be sustained long term.

System initiatives currently under way include hundreds of community programs and activities. These encompass community and faith-based partnerships, school-based health programs, health education and screening programs, and eight Employee Resource Groups that support a culture of inclusion. Between 2009 and 2011, the System engaged in a three-year Healthcare Equity Campaign. Find out more at http://bit.ly/HFHS2011.

“Healthcare equity, aligned closely with our diversity efforts, is about leveling the playing field so that people have an opportunity to further their own lives through health care and maximize their potential,” says Lassiter. “We will continue to develop our healthcare system to meet all the various needs of the communities we serve. We have great assets within Henry Ford that will allow us to serve diverse populations and further our leadership position in the country around disparities and healthcare equity. This work will deepen the ‘all for you’ focus of our System.”

Henry Ford West Bloomfield Hospital reaches record numbers for Community Benefit reporting

Henry Ford employees are dedicated to a host of community programs inspired by a passion for improving health among members of the communities they serve. Many employees don’t realize the impact reporting their Community Benefit activities can have. Community Benefit is required by the IRS for Henry Ford to maintain its tax-exempt status.

Amy Strauss, community relations manager, Henry Ford West Bloomfield Hospital, is passionate not only about Community Benefit, but about encouraging employees to report their activities. She joined Henry Ford West Bloomfield in 2014, having worked at Health Alliance Plan (HAP) in Public Relations and Member Engagement for six years. Since then, she has led an effort at West Bloomfield Hospital resulting in a 276-percent increase in reporting in only two years. The hospital is on track for their highest level of reporting in history, over $1.1 million in 2016.

“I want Henry Ford West Bloomfield staff to get credit for everything they are doing for the community,” says Strauss. “It’s like solving a puzzle. We are constantly uncovering more and more things our employees are doing that count as Community Benefit. Our Executive Leadership team is

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committed to Community Benefit activities and reporting, which makes a win-win situation.” She has made her message about reporting more powerful by delivering it personally, speaking with leaders and at staff meetings about Community Benefit and how to report it. Employees sometimes think their four hours taking blood pressure at a health fair isn’t important, she says.

“But it is all impactful. When everyone reports, it shows just how much we are doing as a hospital, and as a System, in the community.”

She emphasizes reporting student hours. “Pharmacy and Nursing, in particular, have many students who rotate through their areas as they complete requirements to become a pharmacist or nurse. Our staff spends a great deal of time with the students, mentoring and teaching. All those hours are reportable,” she says.

Strauss gives this advice to employees about Community Benefit reporting:

• Use the e-form on OneHENRY.
• When in doubt – send it in. Your Community Benefit lead will contact you if he or she has questions.

Henry Ford West Bloomfield employees have increased Community Benefit reporting 276 percent in the past two years. Debora Murray, HFHS chief compliance officer (back row, left) recently met with Henry Ford West Bloomfield Community Benefit committee members Amy Strauss, manager, Community Relations. (back row right), Laura Myers, senior financial analyst (front row, left) and Deborah Kaplan, secretary (front row, right).

Henry Ford West Bloomfield Hospital Community Benefit reporting

<table>
<thead>
<tr>
<th>Period</th>
<th>Value Range</th>
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<tr>
<td>2014 to 2015</td>
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<td>2015 to 2016</td>
<td>$700,000 to $1,128,448</td>
<td>61%</td>
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<tr>
<td>TWO YEARS</td>
<td>$300,000 to $1,128,448</td>
<td>276%</td>
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• Browse the lists of “What Counts” and “What Doesn’t Count” on the OneHENRY page for guidance about what to report.
• Paper forms are still available for staff who don’t have access to computers. Contact Debora Murray, 313-876-8305.

“It’s a team effort that my Community Benefit Finance Partner, Laura Myers, senior financial analyst, and I take very seriously. Community Benefit is so important, and there is great value in reporting it.” says Strauss.

How to Report Your Community Benefit Activities

• From OneHENRY, click on Initiatives, select Community Benefit, and click on your Business Unit at the bottom of the page.
• Or, go directly to: https://onehenry.hfhs.org/initiatives/communitybenefit/Pages/Overview.aspx.

Report programs and activities that respond to an identified community need. They may be directed to or include at-risk persons, including uninsured or under-insured persons. They could be offered to the broad community (including at-risk persons) and are designed to improve community health. Activities may also:

• Improve access to health services
• Advance medical or health knowledge
• Relieve or reduce the burden of government or other community efforts
Celebrating Martin Luther King, Jr.

Henry Ford hosted its 17th annual Dr. Martin Luther King, Jr. Day celebration on Monday, Jan. 16, at Henry Ford Hospital. The event was live-streamed and presented at multiple locations throughout the health system. *Detroit Free Press* columnist Rochelle Riley gave the keynote address. Former Henry Ford Board of Trustees member, retired chief diversity officer for Comerica Bank, and community leader Linda Forte was honored with the Health, Education And Leadership (HEAL) award. Shown with the award, above right, are (from left) Wright Lassiter III, president and CEO; Linda Forte; Kimberlydawn Wisdom, M.D., M.S.; and Bob Riney, executive vice president and chief operating officer.

The event included remarks by Henry Ford leadership and inspiring performances from Detroit-Windsor Dance Academy and the Mosaic Youth Theatre of Detroit (shown in photo at right).

Together 2 Goal® continues at HFHS

In March, Henry Ford completed year one of the three-year Together 2 Goal® campaign, aimed to improve care for one million people across the U.S. with Type 2 diabetes. The framework to achieve this goal consists of 11 evidence-based care processes that encompass three main areas: empowering patients, improving care delivery and leveraging of information technology.

In the first 12 months, Henry Ford has updated the Type 2 Diabetes Management Algorithm and is working to measure A1C every three to six months in patients with Type 2 diabetes. A risk stratification guideline for managing patients with pre-diabetes, those in control and those at high risk, facilitates the team’s use of the resources available at HFHS. Find out more at www.together2goal.org.

Henry Ford presents care transitions conference

On May 4, more than 200 physicians, nurses, social workers, allied health professionals, pharmacists, and health care leaders attended the Henry Ford care transitions conference, “Be the Change...Creating Patient-Centered Care Transitions,” held at Laurel Manor Banquet Center in Livonia. Keynote speaker was Eric Coleman, M.D., MPH, University of Colorado Anschutz Medical Campus, who presented, “Changes in Care Transitions, the CARE Act, and the Importance of Partnering with the Caregiver.” The conference also included many Henry Ford speakers and a patient and caregiver panel discussion.
In 2016, Henry Ford established new resources designed around the needs of caregivers.

“Henry Ford recognizes the importance of supporting our patients’ caregivers – individuals who bring them to appointments, organize their medications, and often help them with daily activities. It’s a challenging job. By investing in caregivers, our hope is to reduce complications and readmissions for patients, and increase compliance with treatment plans,” says Shawn Bennis, MSN, R.N., HFHS family caregiver coordinator. “We also hope to make life easier for caregivers by offering them the resources and guidance they need.”

Caregivers can take advantage of the following services, available at no cost:

- **Caregiver Web Site:** [https://www.henryford.com/familycaregivers](https://www.henryford.com/familycaregivers). Information and helpful resources are gathered on this site, designed to provide a starting point for caregivers.

- **Caregiver Support Groups:** Support groups meet monthly in Wyandotte and St. Clair Shores. Additional locations are expected to be added in 2017. Email caregiverresources@hfhs.org or call 313-874-4838 for details.

- **Caregiver Services:** Experts are available to speak with caregivers on the phone or via email to connect them with resources at Henry Ford and in their communities. Email caregiverresources@hfhs.org or call 313-874-4838.

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**Employee Resource Group focuses on caregiver needs**

Henry Ford’s Employee Resource Group (ERG), iCare4U, is a growing group of HFHS employees and retirees who care for others away from work.

“iCare4U offers a forum for employees to connect in a different way than they do at work,” explains Shawn Bennis, MSN, R.N., HFHS family caregiver coordinator. “Today, many employees care for an aging parent, or a child, friend or family member. Physicians, nurses, and other patient care professionals also have a career as a caregiver. The environment at iCare4U is supportive, and meetings offer expert speakers, education, and time for sharing. All employees who have an interest in supporting caregivers, or who are currently caregivers, are invited to attend.”

Since the first general meeting in June 2016, the ERG has grown to more than 160 employee members. To find out more about iCare4U and upcoming meetings, email ERGiCare@hfhs.org.

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Jane Felczak, MSN, R.N., CPPS, Clinical Quality & Safety, offered advice on how to boost resiliency at a recent iCare4U meeting.
Henry Ford takes action to fulfill #123forEquity Pledge

For many years Henry Ford Health System has been dedicated to eliminating disparities when providing patient care. The System recently committed to the American Hospital Association’s (AHA) #123forEquity Pledge to Act, a promise to work toward specific goals and take actions as a System that promote healthcare equity. HFHS joins nearly 1,500 other hospitals in taking the #123forEquity Pledge, working to ensure health care is equitable, regardless of race, ethnicity, language preference, socioeconomic status, gender, disability status, sexual preference or veteran status.

“Making sure we treat everyone with respect and understanding is an important part of our culture as an organization. It makes us a better health system, and better able to provide care to our patients and communicate with one another,” says Dr. White-Perkins. “The #123forEquity Pledge is natural fit with our strategy and values.”

As part of the #123forEquity Pledge, HFHS will launch a unique education and awareness program for employees.

“One of our first acts was to develop a video training program to reach all our employees,” says Dr. White-Perkins. “The video features an introduction with Kimberlydawn Wisdom, M.D., M.S., and Wright Lassiter III, president and CEO, and several vignettes with HFHS employee actors, who demonstrate different scenarios where disparities can affect care and interactions. It was a collaborative effort, coordinated by the Institute on Multicultural Health and involving many areas around the System, including Community Care Services, Culinary Retail, Home Health Care, Community Care Services, Care Experience, Public Relations and Marketing, and Employee Resource Groups.”

The video employs the LEARN teaching framework for cross-cultural health care. The LEARN acronym means:

- Listen to the patient’s perspective.
- Explain your perceptions of the problem.
- Acknowledge differences between the perspectives.
- Recommend treatment.
- Negotiate agreement.

Employees will be invited to watch the video, take a post-test, and have the opportunity to take a personal pledge of action. The video will launch in 2017 on HFHS University.

Meeting to develop strategies and tactics to promote healthcare equity at Henry Ford Health System are, from left: Denise White-Perkins, M.D., Ph.D., director of the Henry Ford Institute on Multicultural Health; Janan Saba, MPH, PMP, project manager, Community Health, Equity & Wellness; and Marla Rowe Gorosh, M.D., Henry Ford Family Practice.
2016 CHNA prioritizes System-wide community health strategies

Henry Ford recently published its second formal System-wide Community Health Needs Assessment (CHNA). The IRS requires hospitals to conduct a CHNA and adopt an implementation strategy for each hospital facility once every three years. The CHNA must define each of the communities System hospitals serve and solicit input from community stakeholders.

“For the qualitative data gathering for the CHNA, we developed a survey and held focus groups, asking leaders representing health and wellness resources in the communities we serve for their input. They told us their opinions about the critical, pressing needs of our communities,” says Tracey Dietz, project manager, Corporate Planning. “We also used quantitative data from the State of Michigan and qualitative data from stakeholders to better understand community needs.”

In a strong internal partnership, Dietz worked with a team that included leaders from the offices of Community Health, Equity and Wellness (CHEW) and Corporate Compliance. The 2016 Henry Ford Health System CHNA was approved by the System board in December 2016. Review the CHNA at www.henryford.com/communityhealth.

“The report is a tool that reveals whether our work is bringing about change,” explains Dietz. “We’re able to put more emphasis on creating measurement tools, monitoring and reassessing our work, and ultimately directing and managing our resources strategically, so they maximize the benefit to our communities.”

Priorities from the 2016 CHNA include:

• While experiencing modest improvement, Detroit continues to have a high infant mortality rate. Working with community partners, Henry Ford will continue its proven efforts to reduce infant mortality.

• Community leaders identified opioid addiction as a growing health concern, and data from Henry Ford facilities supports its prevalence in the communities Henry Ford serves.

• Reducing obesity and increasing healthy eating and access to healthy foods, priorities in the 2013 CHNA, will continue in 2016.

• Other areas of focus include diabetes management, increasing physical activity, drug/alcohol abuse and mental health, healthy lifestyles, and addressing domestic violence.

Teams from all four HFHS tri-county acute/tertiary care hospitals have developed the required written implementation plans, which have been approved by System boards and were posted online in May 2017. Implementation plans also reflect System and operational strategies and objectives.

According to Debora Murray, HFHS chief compliance officer, “For many reasons, including the changing reimbursement structure in health care, community health and community benefit are getting more attention. These prevention efforts drive changes that improve the health of our patients and the greater communities we serve. Community Benefit reporting

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Identified health priorities

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Note: Each hospital business unit selected one to three priorities to address based on their ability to bring about change in that area. Unchecked boxes do not indicate that those issues are not a concern for that business unit.
ACHI appoints Nancy Combs to national Advisory Council

Nancy Combs, director, Community Health, Equity and Wellness, has been appointed to a three-year term on the Association for Community Health Improvement (ACHI) Advisory Council, the community health arm of the American Hospital Association. This national organization delivers education, professional development, peer networking and practical tools for community health, community benefit and healthy communities professionals.

She was appointed together with Julie Trocchio, senior director, Community Benefit and Continuing Care, Catholic Health Association, and Kristin Juliar, director, Montana Office of Rural Health/Area Health Education Center.

According to the ACHI, qualifications for Advisory Council members include having a broad set of skills as well as leadership and field experience.

Since 2015, Combs has served on the ACHI’s national conference planning committee, and has co-presented breakout sessions for the past three years. Together with Murlisa Lockett, project manager, Generation With Promise, in March she presented “Youth Wellness Ambassadors: Leading Changes in the Health of Detroit,” at the ACHI National Conference in Denver. To find out more, log on to http://www.healthycommunities.org/.

Researcher contributes to CMS Toolkit for CLAS Standards

Diabetes study links patients with community health worker

Through a unique research study, Henry Ford Hospital Internal Medicine patients are connecting with a community health worker (CHW) for specific aspects of their diabetes care. The innovative “K-15 Diabetes CHW Project” is funded by a grant from the DMC Foundation.

Typically, patients with diabetes measure their blood sugar levels at home, then make an appointment to come to their doctor’s office, when their physician can adjust their insulin dose. In a previous study conducted on K-15/Endocrinology at Henry Ford Hospital, registered nurses called patients on the phone instead to adjust their insulin doses. Now, the K-15 Diabetes CHW Project takes that work to a new level.

“In this program, a community health worker calls patients regularly, and an R.N. adjusts the insulin dose. Sometimes the R.N. is close by and does it immediately, while the patient is still on the phone with the CHW,” says Ganesa Wegienka, Ph.D., Public Health Sciences. “Both the CHW and R.N. are working at ‘top of license.’ A great benefit also comes from the connection between the patient and the CHW.”

Goals are to increase the number of patients who achieve their target for daily glucose measurement and control, and visit the office for hemoglobin A1C testing every three months. The principle is that a close connection with the CHW will motivate patients to better care for their health and make it to their appointment.

CHWs are very familiar with community resources and have specialized diabetes care training. They are ideally qualified to help patients overcome barriers to care.

“They can coach patients with diabetes management, and help them obtain healthy groceries, transportation to doctor’s appointments, enroll in health insurance and find prescription discounts,” says Wegienka.

CHW Linda Hopkins-Johnson says she calls patients in the program every other week. Simply expecting that call “encourages them to do better, to try harder, and holds them accountable for their diet and exercise decisions. Some patients are really excited to see their blood glucose numbers improve, and I share that with them. It becomes more meaningful when someone really understands and can be excited with them,” she says. “I can also provide one-on-one education and tips to help them be successful, and connect them with other resources, if needed.”

If successful, the program could expand to other Henry Ford locations.

“We’ll compare blood glucose control for patients in the program with patients in a traditional care environment,” says Wegienka. “We’ll also look at how many patients in the program received hemoglobin A1C tests at three months to measure longer term management of diabetes.”

The project will continue through summer 2017.

The ‘K-15 Diabetes CHW Project’ team includes:

Andrew Bossick, MPH, Public Health Sciences
Linda Hopkins-Johnson, CHW, Community Health, Equity and Wellness; Community Health Worker Hub
Davida Kruger, MSN, APRN-B.C., B.C.-ADM, Endocrinology
Anupama Nair, M.D., Internal Medicine
Jeanne Sicklesteel, R.N., Henry Ford Medical Group, formerly Endocrinology
Ganesa Wegienka, Ph.D., Public Health Sciences
David Willens, M.D., Internal Medicine
WIN Network: Detroit reduces infant mortality with group prenatal care

WIN Network: Detroit is partnering with the Henry Ford Health System Women’s Health Department to bring African-American expectant mothers together for group prenatal visits with remarkable success. As of May 2017, more than 57 women have given birth. The average birth weight is 6.98 pounds, nearly all mothers reached full term, and 100 percent of mothers initiated breastfeeding.

The concept of group prenatal care began at least 10 years ago. “But Henry Ford is the first in the nation to follow an innovative, enhanced model and curriculum, which includes a certified nurse midwife and a community health worker at each group session,” says Kimberlydawn Wisdom, M.D., M.S., principal investigator, WIN Network: Detroit.

“We’ve had an overwhelming response for participation, and pleasant surprises from our participants,” says Jaye Clement, MPH, MPP, director, Community Health Programs and Strategies, Henry Ford. “One of these is that mothers are invited to bring a support person. Many fathers have attended and created their own bonds and support systems with other dads that have lasted well beyond the program.”

Groups are organized around due dates, and each of the 10 group visits is two hours long. Mothers measure their own weight and blood pressure while midwives measure fundal height and fetal heartbeats before the session starts. Any medical concerns or personal questions are addressed privately, appropriately and immediately. The majority of the meetings center around education on a topic of the day, discussion, and sharing. Attendance is robust, due in large part to the personal connection between the CHW and the mothers-to-be.

“Our model is unique because we involve community health workers (CHWs), who are a natural fit for this program,” explains Clement. “The CHW is more like an aunt or a close friend, who form close partnerships with the mothers. They make home visits and dig in to help with specific needs and personal goals, focusing on social determinants of health. CHWs remind them to come to meetings, and even arrange a ride if needed.”

When a mother-to-be needs help managing weight and improving nutrition on a small budget, the CHW may take a look at the food in the house, make specific recommendations, connect the mother with local resources, and help her develop an eating plan. It’s a very intentional, direct approach with positive results.

Cathy Collins-Fulea, MSN, CNM, FACNM, division head, Midwifery at Henry Ford, says three Henry Ford certified nurse midwives are involved in the group prenatal care program.

“Usually the nurse midwives provide individual prenatal care visits as well as labor and delivery care. In the group setting, 

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they form much closer relationships with the patients because of the additional time and depth of interaction the group setting allows,” she says. “The midwives love it because they are able to go into much greater detail with the patients, and are not repeating the same information at multiple patient visits. It’s a much more satisfying way for the midwives to practice.”

Group visits are highly interactive. Mothers advise each other, while the nurse midwife and CHW expand on mother-to-mother advice and clear up misperceptions. The large, two-hour block of time means topics are addressed in detail.

Mothers-to-be also create “vision boards” for their future, beyond birth of the baby. Some want to finish school, while others want to buy a car or a house. The boards get them started on a path to those goals.

Aerial Ali learned about WIN Network and the Group Prenatal Care program from her physician when she became pregnant with her daughter Alyssa, born in November 2016.

“The conversations and having the support was the best part of the program,” she says. “You feel like you belong. The support of the other mothers, in the same stage of pregnancy as you, was great. The nurse midwife and CHW give you all the resources you need. You never feel rushed. Sometimes information from family members who have had babies in the past is no longer relevant. With this group, you get accurate information.”

Ali, who works full-time for the State of Michigan, said the program has had a lasting effect on her health. “I eat healthier and am drinking more water, which I never did before.”

About 120 mothers will enroll in the program every year. Funding for the program comes from multiple sources. Contributors include the W.K. Kellogg Foundation, the Michigan Health Endowment Fund, and the Gail and Lois Warden Endowed Chair on Multicultural Health.

**Group Prenatal Care program wins Focus on People award**

The efforts and outcomes of the enhanced model of group prenatal care were recognized with a Focus on People award from Henry Ford Health System in December 2016 for collaboration between WIN Network: Detroit and Women’s Health staff at Henry Ford Medical Center – New Center One. Accepting the award from Wright Lassiter III, president and CEO, are (left) Jaye Clement, MPH, MPP, director, Community Health Programs and Strategies, and Cathy Collins-Fulea, MSN, CNM, FACNM, division head, Midwifery. Additional team members were: Kimberlydawn Wisdom, M.D., M.S., principal investigator; Edith Combs, BSN, R.N.; Courtney Latimer, MHA, program manager, CHEW; Kristine Walton, R.N.; Shaleena Wyanna, M.A.; Kharunissa Grant, R.N.; Keisha Adams, program assistant; Char’ly Snow, CNM; Elikem Amable, CNM; Linda Reyes, team leader, community health worker; Linda Hopkins-Johnson, community health worker; Nada Dickinson, community health worker; and Felicia Lane, community health worker.

**WIN Network: Detroit and BMBFA team up to increase breastfeeding**

Henry Ford Health System was a platinum sponsor of the Black Mothers Breastfeeding Association’s (BMBFA) national 2016 seminar and hosted the annual event at Henry Ford Hospital. BMBFA is a community partner of Henry Ford’s Women-Inspired Neighborhood (WIN) Network: Detroit. The organization strives to increase breastfeeding success among African-American mothers. Find out more about BMBFA at www.blackmothersbreastfeeding.org.
MYBABY messaging aims to lower infant mortality

Working in collaboration with the Detroit Institute for Equity in Birth Outcomes, HFHS Community Health, Equity and Wellness staff developed five key messages that are shared across southeast Michigan.

“The goal is to communicate consistent, crucial information to mothers that will contribute to lowering infant mortality in our region,” says Jaye Clement, HFHS director of Community Health Programs and Strategies. “In Michigan, the infant mortality rate is almost seven per 1,000 births, and in Detroit, it is almost 13 per 1,000.”

The messaging uses the acronym MYBABY:

**M**: Make it to your due date.

**Y**: Your medical home for prenatal care and regular exams after delivery.

**B**: Baby medical home for well-baby exams and vaccinations.

**A**: ABCs of safer sleep.

**B**: Breastfeeding.

**Y**: Your choice, which encourages family planning.

For more information, visit [http://equityinstitute.weebly.com/about.html](http://equityinstitute.weebly.com/about.html).

Research Study investigates breastfeeding disparities

Henry Ford researchers are investigating whether encounters with a community health worker will increase post-partum weight loss and the duration of breast feeding in African-American mothers. The “MAMA BEAR” (“Mothers Allied with Mothers Around Breastfeeding Encouragement And Return to postpartum health) study is funded by an R-21 pilot study grant from the National Institutes of Health (NIH). Recruitment began in March 2017. Participants will have indicated interest in breastfeeding and delivered their babies at Henry Ford Hospital.

According to Gwen Alexander, Ph.D., MPH, site principal investigator, HFHS Public Health Sciences, “Through this study, we want to encourage breastfeeding, not only for its benefits for the baby, but also for the many benefits to the mother. Typically, breastfeeding uses about 500 calories per day, helping mothers return to pre-pregnancy weight faster and reducing risk for long-term obesity.” According to the NIH, 13 to 20 percent of women are 11 pounds or more above their preconception weight by one year postpartum. ([https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2930888/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2930888/))

Jean Kerver, Ph.D., R.D., is the principal investigator. She is an assistant professor in the department of Epidemiology and Biostatistics in the College of Human Medicine at Michigan State University. The research team will recruit a total of 80 women for the study. Half will be randomly assigned to the control group, receiving only written information about breastfeeding and achieving healthy habits after baby is born, while half will be assigned to the intervention group.

“The intervention group will receive three in-person visits and support phone calls up to once per week with the counseling approach of a community health worker for six months. We will be incorporating a coaching style informed by motivational interviewing, which helps identify ambivalence and build motivation and confidence based on someone’s values. Another key piece of the program is a web-based... (continued on next page)
platform that mothers can use to track their eating and physical activity, and get individualized online coaching tips,” says Dr. Alexander.

The study is recruiting African-American women, as the goal is to reduce racial disparities in uptake and duration of breastfeeding. African-American women also have a higher rate of overweight.

At the study conclusion, the team will evaluate whether the women decided to breastfeed, how long they breastfed, and their weight loss since delivery.

“By offering support, we are hoping that women will try breastfeeding, and with encouragement, will continue for at least five months. If the study shows benefit, we plan to apply for additional funding to expand it, then share our findings nationwide,” says Dr. Alexander.

Honoring Henry Ford Health System’s Diversity Heroes

Henry Ford honored its 2016 Diversity Heroes during an evening celebration at One Ford Place. Each year, employees are nominated by their peers and selected by a committee of employees who play active or leadership roles within the Office of Diversity & Inclusion. The program recognizes employees who express exceptional cultural awareness in patient care, visitor and family interactions, or with fellow employees. The winners continuously learn about diversity, serve as role models, and find innovative solutions to enhance diversity and inclusion.

Guest speaker at the event was Linda Forte, B.S., MBA, retired senior vice president of business affairs and chief diversity officer at Comerica Incorporated, and a former member of the Board of Trustees, Henry Ford Health System.

“Our annual Diversity Celebration, now in its 13th year, is a tradition that allows us to formally recognize contributions that while intangible in nature, create life-changing results for our patients and their loved ones, employees, and members of the community,” says Kimberlydawn Wisdom, M.D., M.S. “This year’s winners truly bring our pledge and promise – ‘All For You’ – to life by treating everyone as an individual.”

In 2016, the Henry Ford Diversity Heroes were:

Ruth Appah, R.N., Telemetry Medical-Surgical
Maureen Connolly, M.D., School-Based and Community Health Program, Department of Pediatrics; Health Disparities Research Collaborative, Department of Public Health Sciences
Wendy Goldberg, N.P., Josephine Ford Cancer Institute
Robert Hindley, Manager, Culinary Services
Holley Holloway, R.D., Greenfield Health Systems – Troy Dialysis
Cheryl Larry-Osman, R.N., M.S., CNM, Clinical Nurse Specialist, Maternal-Child Health Nursing
Linda Reyes, Community Health Worker Team Leader, Community Health, Equity & Wellness
Janeen Sullivan, R.N., Woman/Child Health
Sammye Van Diver, Manager, HAP, Database Administration, IT Support & Operations
Clifford Warren, Leader, Lobby Services
Employee Resource Groups connect health system employees

Henry Ford’s eight Employee Resource Groups (ERGs) offer networking, education, community outreach, socializing and career development opportunities for all HFHS employees. The ERGs connect employees who may not otherwise meet, in settings where they can learn and find support, both professionally and personally. ERGs are open to all employees and are designed not just for employees who represent the ERG’s demographic, but for any employee interested in the group. Katie Naeyaert, Office of System Diversity and Inclusion, coordinates the ERG program at Henry Ford. ERG leaders came together for an annual meeting where they shared accomplishments and plans for the future. Naeyaert provides these highlights:

**Amigos** members are interested in the Latino and Hispanic culture and communities. The ERG provided health screenings and education at community events, and worked with the Latino Stakeholders Group, in connection with the HFHS Institute on Multicultural Health, to enhance health for communities. The Amigos will work with HFHS leadership on a healthcare careers program for Latino students. Leadership opportunities are available. Email amigos@hfhs.org to find out more.

**eMERGe** is designed to involve employees who have an interest in the Middle Eastern culture. The group developed a cultural sensitivity program and acts as internal consultants for HFHS on printed materials that reflect Middle Eastern culture and language. The group is focusing on growth in 2017, and has leadership and membership opportunities available. To find out more, email eMERGe@hfhs.org.

**genERG-Y**, Generation Y employees, grew by 112 members in 2016. The group hosted a well-attended networking event at the Fowling Warehouse in Hamtramck, and holds quarterly events and monthly board meetings. genERG-Y also piloted a successful virtual business workshop called Power Hour. genERG-Y hosts events such as panel discussions, regular member meetings for networking and support, and community outreach events. Find out more by emailing genERG-Y@hfhs.org.

**iCare4U** designed for employees who are also caregivers away from work. Meetings include networking, information, education, support and guest speakers. iCare4U rotates meetings between HFHS hospitals to encourage attendance from all interested employees who are caregivers. For an upcoming meeting schedule and to learn more, email ERGiCare@hfhs.org.

**OPAL** is made up of African-American physicians, academicians and executive leaders. Members engage in community outreach, professional development, professional mentoring and Continuing Medical Education events. The ERG supports several HFHS programs and health education events, including the Community Baby Shower. In 2016, 28 students and 10 OPAL members participated in OPAL Envision, a pre-medical recruitment program geared toward area high school students. To connect with OPAL, email OPAL@hfhs.org.

**PRIDE** supports the health needs of LGBT patients and community members. The group holds business and networking meetings, hosts exciting guest speakers, and participates in Detroit-area community events. The ERG supports the Ruth Ellis Partnership to improve access to health care for LGBT youth, and assists with HFHS employee LGBT Sensitivity Training. The ERG plans employee events and participates in community events. Email pride@hfhs.org to find out more.
ERS connect HFHS employees, continued from page 14

WIN supports the needs and interests of women employees at HFHS. A mentoring program, professional development series, movie night, year-end mixer, community giving event at the Garden Bowl in Detroit, and a leadership panel presentation are some of the events members have enjoyed. The ERG is focusing on increasing membership, especially from employees at off-site HFHS locations. For more information, email WIN@hfhs.org.

Henry Ford’s newest ERG
The newest Henry Ford ERG was approved in April by the System Diversity Council. This ERG’s mission is to coordinate and leverage the efforts of African-American employees to support the System in better meeting the life skills and health service needs of African-American patients and the African-American community at large. For details, email diversity@hfhs.org.

For more information about these or general information about the ERG program at HFHS, email diversity@hfhs.org.

ERG leadership role sets career advances in motion

After Gaskins first attended a GenERG-Y meeting, she volunteered to take meeting notes and make agendas, then took on more responsibilities through committees. When leadership elections were held, Gaskins volunteered and became chair of the ERG.

“The skills I gained through the committees and as chair translated to real life skills that enabled me to move up in my career, with different positions and more responsibilities. I’ve made presentations to Nancy Schlichting, former CEO, and Wright Lassiter, president and CEO. Without that exposure to the health system, to leadership, and the different opportunities available, I know for sure I wouldn’t be where I am today,” she says.

Her career path led from customer service representative at an outpatient clinic to a position in the contact center in Quality. A colleague from GenERG-Y referred her to her current position as sales coordinator for the Account Solutions team at HAP.

(continued on next page)
ERG career advances, continued from page 15

“It’s been a really fun journey. I knew I could do more. I wanted more,” she says. “I was inspired to go back to school and have two classes left to get my first degree.”

Gaskins will receive an associate’s degree in business management in fall 2017, and is already accepted to Wayne State University’s business administration program.

“The ERG connected me with great mentors, who took me under their wings, met with me, and gave me career and job interview advice. Connections with people in leadership positions helped me learn the process to transition into new positions.”

Gaskins says a key part of her success is being willing to volunteer. “Have an idea and show that you’re engaged. People will remember you. Networking isn’t just meeting people, it’s stepping up and helping in a small or a huge way. It’s that little bit of helping other people that helps you in the long run.”

To find out more about ERGs at HFHS, email diversity@hfhs.org.

EMPLOYEE SPOTLIGHT

Director role leads to wide-ranging impact and lasting change

As director of Community Health Programs and Strategies for the Office of Community Health, Equity and Wellness at Henry Ford, Jaye Clement, MPH, MPP, is able to use her talents for wide-ranging impact. Her typical work responsibilities include administrative oversight of WIN Network: Detroit; leading the Community Health Worker (CHW) hub and system-wide CHW integration; contributing to the Community Health Needs Assessment and supporting staff as they implement objectives; fielding and approving community health fair requests to ensure System alignment; and coordinating community outreach for the Henry Ford Cancer Institute.

A strategic planner, Clement focuses on “organizing thoughts and intentions to feed into a common goal and serve a purpose. One of my greatest satisfactions comes from aligning and leveraging resources to make outcomes even better for our communities.”

Clement has two master’s degrees from the University of Michigan, Ann Arbor: one in public health and another in public policy. “While I was completing my master’s in public health, I realized that without a public policy background, I would only be able to work on programs. I wanted to include policy and create lasting change,” she says.

Her career has taken her to the healthcare, non-profit and government sectors, previously working with Allegiance Health in Jackson, which is now part of HFHS. After six years with Henry Ford, Clement says her experiences – from the field level up to the corporate level – have given her valuable perspective on how different aspects of community health work together and affect other areas.

While she’s no longer working in the field, Clement remains in close touch with it. She gets excited when she hears about women who have improved their lives due to the impact of community health workers, and is proud of the employees in her department whose careers have flourished.

“Earlier today, I got an email from a CHW. One of her clients, who was really struggling a few years ago, invited us to see a play she wrote that is being produced and performed. I can’t wait to go see that show and support her. It’s that kind of transformation that makes it all worthwhile.”
Awards and Recognitions

Henry Ford Health System was No. 2 in DiversityInc’s 2017 Top 10 Hospitals and Health Systems ranking. Find out more at http://www.diversityinc.com/henry-ford-health-system/.

Best and Brightest

As a winner of the 2016 Best and Brightest In Wellness® award, presented by the National Association of Business Resources, Henry Ford was selected for promoting a culture of wellness, and planning, implementing, and evaluating efforts in employee wellness to make the organization and the community a healthier place to live and work.

Partnership for America

Henry Ford Health System was a finalist for the Partnership for a Healthier America Partner of the Year award for the System’s work to improve the health of the nation’s youth and making healthier choices more affordable and accessible to families and children across the country.

WIN Network: Detroit abstract award

Jisha Panicker, BDS, MPH, public health consultant, WIN Network: Detroit, received the American Public Health Association Public Health Education and Health Promotion Student Award for her abstract, “Creating a sustainable group prenatal care model for the Women-Inspired Neighborhood (WIN) Network: Detroit at the Henry Ford Health System.” It was given to ten of the top-ranked abstracts in the public health education and health promotion section category.

Henry Ford partners develop ‘Knock-and-Check’ pilot program

A letter carrier in Jersey, United Kingdom, visits an elderly resident on his route as part of the innovative “Call-and-Check” program, a model for a developing Henry Ford pilot program.

Henry Ford Medical Group, the Office of Community Health, Equity & Wellness, and the Henry Ford Global Health Initiative are developing a pilot program that uses an infrastructure already in place – the U.S. Postal Service – to reduce isolation and improve access to health care for elderly Detroit residents. Based on a model from the United Kingdom, the “Knock-and-Check” program connects letter carriers with older patrons on their routes.

Quick conversations between patrons and letter carriers have a dual purpose: social contact and the opportunity for letter carriers to ask a few carefully developed questions. The questions evaluate a patron’s overall wellness and reveal needs for assistance, including help with medications, making an appointment with their doctor, and other health and social issues. The program is completely voluntary for the elderly residents.

“Knock-and-Check has the potential to reduce isolation and unnecessary emergency department visits, improve medication adherence and access to appropriate care, and connect seniors to resources in the community,” explains Kimberlydawn Wisdom, M.D., M.S., senior vice president of Community Health & Equity and chief wellness & diversity officer, who is also the program’s principal investigator. “Since letter carriers already visit the homes every day, the program is low cost.”

The pilot is part of ongoing work by Henry Ford’s Global Health Initiative (GHI) and Institute for Health Improvement (IHI) to investigate programs and processes from outside the country that will benefit people in the U.S., known as reverse innovation.

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Knock-and-Check Pilot Program, continued from page 17

William Conway, M.D., executive vice president, Henry Ford Health System and CEO, Henry Ford Medical Group, introduced the IHI Reverse Innovation Network Initiative to Henry Ford Health System. Dr. Conway involved Dr. Wisdom with the IHI, then tied in the Global Health Initiative.

“I hope to use my certification to accredit Henry Ford Allegiance Health as an ACPE clinical pastoral education center and support Henry Ford Health System in offering spiritual care and education to patients, staff and the communities we serve,” says Williams. “This accreditation means we can offer people from all faiths and backgrounds a learning environment and clinical experiences to prepare them for professional chaplaincy or enhance their skills wherever they choose to minister.” CPE students also support the work of chaplains by offering patients and staff religious and spiritual care both at the bedside and in the community.


Henry Ford Allegiance Health manager receives Pastoral Education Supervisor certification

The Rev. Dr. Versey Williams, manager, Pastoral Care, Henry Ford Allegiance Health, has received associate supervisor certification from the Association for Clinical Pastoral Education, Inc. (ACPE). ACPE certified supervisors are clinical pastoral educators who are academically prepared and are authorized by a recognized faith group.

Williams’ certification qualifies her to secure accreditation for institutions as they work to become clinical pastoral education (CPE) centers, as well as educating CPE students and supervising their clinical work.

According to Williams, CPE training brings theological students and clergy of all faiths (pastors, priests, rabbis, imams and others) into supervised encounters with individuals in crisis. From theological reflection on specific human situations, they gain a new understanding of ministry. Within the interdisciplinary team process of helping others, students and faith leaders develop valuable skills in interpersonal and inter-professional relationships.

“I hope to use my certification to accredit Henry Ford Allegiance Health as an ACPE clinical pastoral education center and support Henry Ford Health System in offering spiritual care and education to patients, staff and the communities we serve,” says Williams. “This accreditation means we can offer people from all faiths and backgrounds a learning environment and clinical experiences to prepare them for professional chaplaincy or enhance their skills wherever they choose to minister.” CPE students also support the work of chaplains by offering patients and staff religious and spiritual care both at the bedside and in the community.

Williams received an exemplary commendation for her work with the National Certification Committee. She is also board certified as a chaplain with the Association of Professional Chaplains.
Henry Ford Health System Community Health, Equity & Wellness (CHEW) and Office of System Diversity and Inclusion (OSDI) Management Team:

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Veronica Williams
Manager, Community Health, Equity & Wellness

Working with these System partners:

Glenn Croxton, Ph.D.
Director, Procurement & Vendor Compliance, Supply Chain Management, HFHS

Jan Harrington-Davis, MBA
Director, Employee/Labor Relations, Workforce Diversity, Compliance, HFHS
If you would like to make an appointment with a Henry Ford physician, please call (866) 655-2757.