A Community Health Needs Assessment (CHNA) of Northern Oakland County was conducted by McLaren Oakland throughout 2018 and 2019.

A Definition of the Community Served by the Hospital Facility

McLaren Oakland is located in the City of Pontiac, in Oakland County, Michigan, approximately 16 miles north of Detroit. Pontiac is the only city in Oakland County designated by the U.S. Department of Health and Human Services as a Medically Underserved Area (MUA). Medically Underserved Areas/Populations are areas or populations designated by HRSA (Health Resources and Services Administration) as having too few primary care providers, high infant mortality, high poverty and/or high elderly population.

McLaren Oakland serves a population with higher unemployment, lower income and higher crime compared to other communities. The City of Pontiac has experienced prolonged economic hardship as General Motors and other automotive suppliers eliminated or downsized their Pontiac operations. Efforts to diversify the employment base are in progress but have not been able to offset the automotive employment losses. In 2008, General Motors employed the equivalent of more than one-half of Pontiac’s households. In the wake of large-scale reductions by General Motors and other automotive suppliers, a large percentage of the population has been left either unemployed or underemployed, and either uninsured or underinsured. Accordingly, many individuals are resorting to emergency room use for their routine health needs. Historically one in every four of McLaren Oakland’s emergency room patients is uninsured. As a result, McLaren Oakland provides more than $20 million per year in uncompensated medical care for individuals and families who are uninsured or underinsured.

McLaren Oakland’s service area extends beyond Pontiac, primarily to Oakland County’s northern and western Regions 1 and 2; Region 2 includes Pontiac. Region 2 has the highest percentage of people with 14 or more days of poor or fair physical health (16.9%) of any region in the county and has the lowest percentage of people that have health insurance (87%).

Demographics of the Community

Pontiac’s 2017 population was estimated at 59,792. In 2017, 48.8% of the population was African American or Black, 39.7% Caucasian, 7.6% reporting two or more races, and 3.9% reporting all other including some other races including Asian, American Indian and Alaska Native. The overall median age was 32.2 years. For every 100 females there were 94.1 males. Pontiac’s median household income was $31,401.
Oakland County is the second-most populated county in Michigan with 1,250,836 residents in 2017. The three largest racial/ethnic groups in Oakland County’s population are: 75.7% Caucasian, 14.2% African American or Black, and 7.5% Asian. The overall median age was 40.7 years. For every 100 females there were 95.7 males. Median household income was $73,369.

### Community Resources

The following is a sample of some of the existing health care facilities and resources within the community that are available to respond to the health needs of the community.

| Alcoholics Anonymous of Oakland County | Health Division – CSHCS |
| CARE House | Health Division - Medicaid Outreach & Advocacy |
| Centro Multicultural LaFamilia | Health Division - Office of Substance Abuse |
| Catholic Social Services | Health Division - WIC Program |
| Doctor’s Hospital of Michigan | Library of the Visually & Physically Impaired |
| Easter Seals Family Behavioral Health Services | Office of Substance Abuse Services |
| Ennis Center for Children | Oakland County Health Department Speaker’s Bureau |
| Ewalt Center | Oakland Family Services |
| Greater Pontiac Community Coalition | Oakland Family Services - CHAMPS |
| Grovecrest Supportive Care | Oakland Family Services - Children w/ Special Needs |
| HAVEN, Inc. | Oakland Family Services - Mental Health Counsel |
| Hispanic Nurses Association | Oakland Integrated Health Network (OIHN) |
| Hispanic Outreach | Oakland Livingston Human Service Agency (OLHSA) |
| Karmanos Cancer Institute | Oakland Primary Health Services (OPHS) |
| La Amistad Latino Senior Citizens Center | Planned Parenthood - Pontiac |
| Latin Affairs Ofc (Community & Human Svcs) | Pontiac Human Services Division |
| Lighthouse Community Development | Pontiac Osteopathic Hospital Children’s Clinic |
| Lighthouse Emergency Services | Resource Network, Inc., The |
| Lighthouse of Oakland County | Sequoia Recovery Services |
| Lighthouse Path | St. Joseph Mercy Oakland - Harold E. Fox Center |
| Mercy Place Clinic | Turning Point Recovery Center Halfway House |
| Comm. Mental Health Authority | Women & Teens Pregnancy Center |
| Department of Community & Minority Affairs | Women’s Survival Center of Oakland County |
| | Woodward Counseling, Inc. |

### How Data was obtained

A committee representing various departments (Finance, Foundation & Quality) within McLaren Oakland met throughout 2018 and 2019 to organize the Community Health Needs survey, documentation, and implementation process. In addition, other community surveys and data sources from community and State of Michigan groups were utilized to evaluate the community needs. We used the same survey from 2013 and 2016 that was approved by a previous McLaren Oakland committee.
The survey was mailed to a random sample of 1,000 residents in Oakland County within a 50-mile radius of McLaren Oakland hospital. An outside vendor was contracted to design and mail the survey and coordinate the list rental.

Participants were asked to complete the four (4) page survey with thirty-five (35) questions. To encourage participation, survey respondents were included in a raffle for gas cards.

The respondents to the survey were over weighted to individuals aged 65 years and older, and to Caucasian/White. Accordingly, our results were supplemented with the findings and responses from both Oakland County’s and State of Michigan’s surveys as well as other data sources listed in the next paragraph.

The following is the demographic information of the McLaren Oakland survey respondents.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>52% = Male</td>
<td>71 older = 39%</td>
<td>91% = Caucasian/White</td>
</tr>
<tr>
<td>48% = Female</td>
<td>65 – 70 = 17%</td>
<td>0% = African-American/Black</td>
</tr>
<tr>
<td>100%</td>
<td>55 – 64 = 13%</td>
<td>0% = Hispanic</td>
</tr>
<tr>
<td></td>
<td>51 – 54 = 13%</td>
<td>0% = Asian</td>
</tr>
<tr>
<td></td>
<td>41 – 50 = 13%</td>
<td>0% = Native American</td>
</tr>
<tr>
<td></td>
<td>30 – 40 = 0%</td>
<td>9% = Middle Eastern</td>
</tr>
<tr>
<td></td>
<td>25 – 29 = 5%</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>18 – 24 = 0%</td>
<td>100%</td>
</tr>
<tr>
<td>100%</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Income Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>48% = Retired</td>
<td>26% = Prefer not to answer</td>
</tr>
<tr>
<td>30% = Employed full-time</td>
<td>13% = Less than $10,000</td>
</tr>
<tr>
<td>9% = Employed part-time</td>
<td>4% = $10,000 to $19,999</td>
</tr>
<tr>
<td>9% = Disabled</td>
<td>9% = $20,000 to $29,999</td>
</tr>
<tr>
<td>4% = Homemaker</td>
<td>4% = $30,000 to $49,999</td>
</tr>
<tr>
<td>100%</td>
<td>22% = $50,000 to $69,999</td>
</tr>
<tr>
<td></td>
<td>9% = $70,000 to $89,999</td>
</tr>
<tr>
<td></td>
<td>4% = $90,000 to $149,999</td>
</tr>
<tr>
<td></td>
<td>9% = $150,000 or more</td>
</tr>
<tr>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

In addition, the following data sources were used when assessing community health needs, determining priorities and planning strategic initiatives:

- McLaren Oakland’s ED Admissions Data – fiscal year 2018
- Pontiac Michigan Population and Demographics 2019
- Energizing Connections for Healthier Oakland (ECHO) 2016
- Health Outcomes Rankings 2016
- Institute for Health Metrics and Evaluation (IHME) Oakland County, Michigan 2016
- Oakland County Community Health Profile 2012
- Michigan’s State Health Assessment and State Health Improvement Plan (MSHA) 2012-2017
Consultation Process of People Represented in Survey

McLaren Oakland’s committee met to evaluate the survey results, community health evaluations and needs of the community served.

The Health Needs of the Community

Health issues arising from the survey and other sources were predominantly related to lifestyle. In 2016, Oakland County ranked 9th out of Michigan’s 83 counties in overall health outcomes, improving from 16th place in 2013 and 17th place in 2011. The county also ranked high in other measures affecting overall health outcomes (e.g. quality of life, length of life, clinical care, and social & economic factors).

The top health issues and current health status of survey respondents included the following information:

Do you think you are healthy?

- Yes = 91%
- No = 9%

Have you been told you have had this illness?

(Ranked)

- High Blood Pressure = 26%
- High Cholesterol = 17%
- Arthritis = 13%
- COPD = 10%
- Chronic Pain = 10%
- Asthma = 6%
- Obesity = 6%
- Stroke = 6%
- Heart Disease = 3%
- Lung Disease = 3%

Survey respondents consider themselves healthy while experiencing health issues noted in the survey. High blood pressure and high cholesterol are controllable with medication. Arthritis also ranked near the top. Encouraging increased physical activity and appropriate weight management often will be beneficial in treating these top-ranked illnesses.
Identifying & Prioritizing Community Health Issues

After performing the community health needs assessment and analyses, the CHNA committee recommends focusing on the following three major health needs of the community:

- **Healthy Heart / Lifestyles Issues**
- **Cancer Resources**
- **Mental Health**

McLaren Oakland will focus on the top issues related to healthy heart, cancer resources and mental health issues. Healthy heart would include weight management, physical activity, nutrition, high blood pressure, and education about basic screening numbers. In addition to the primary benefits of these programs, secondary benefits related to the improvement of lifestyle related conditions such as diabetes and arthritis can be achieved.

In addition to the anticipated program benefits, the committee also considered the availability of assets and resources within the hospital. By leveraging currently available resources, maximum benefit can be achieved. This is crucially important with limited budgeted dollars and staff resources.

### Healthy Heart / Lifestyle Issues

**Healthy Living and Healthy Eating Will Reduce Obesity**

According to Oakland County’s health profile included in its report entitled “Energizing Connections for Healthier Oakland 2016” (ECHO), obesity was labeled as the #1 health concern in Oakland County. In Oakland County, 26.9% of adults are obese as compared to 31.1% in the State of Michigan. The State of Michigan also identified adult obesity as its top priority in its most-recently released report entitled “Michigan’s State Health Assessment and State Health Improvement Plan 2012-2017” (MSHA). In this report, the State stated Michigan “had the fifth highest adult obesity rate in the nation”.

Obesity is a very real health risk and increases the likelihood a person will develop multiple chronic diseases, including arthritis, heart disease, stroke, high blood pressure, sleep apnea, type 2 diabetes, and certain cancers.

MSHA identified several issues related to obesity:
- Affects all ages and all races and ethnicities;
- Linked to other health issues, including diabetes, hypertension, cardiovascular disease;
- Increases costs to society especially healthcare;
- Prevention, when started at the youngest ages, can be impactful in the long run;
- Requires a comprehensive approach including individual behavior change as well as policy and environmental change; and
• Relates to numerous underlying issues and factors – economics, nutrition, fruit and vegetable consumption, physical activity, mental health.

Obesity and related health issues may be reduced by healthier eating such as more consumption of fruits and vegetables and increased physical activity. Two of the “Top Six Voted Theme Indicator Relationships” as presented in the 2016 Oakland County Health Profile are “Healthy Eating” and “Healthy Living”.

The ECHO report stated “Oakland County does not perform well related to food access. A greater percentage of the population in Oakland County lives in a food desert [sic] than Michigan and the United States.” Furthermore, “access to healthy food and beverages [is] a critical component of the built environment, as well as access to recreation and fitness opportunities. Oakland County has more fast food restaurants and liquor stores than Michigan and the US per 100,000 residents.” Only 16.6% of Oakland County’s population eats the recommended 5 -9 daily servings of fruits and vegetables. In addition, 20.2% of Oakland County’s populations has no leisure time physical activity.

MSHA states “Physical activity levels and dietary habits are two critical factors in the obesity epidemic. The percentage of Michigan adults who engage in the amount of physical exercise recommended by the CDC has increased slightly, but the percentage of high school students who do so has been on the decline.” For adults slightly more than 50% achieve the CDC recommended levels. For high school students, slightly less than 50% reach the CDC levels. For both adults and high schools students, only about 20% have adequate fruit and vegetable consumption.

MSHA also states “While the physical activity and dietary habits are generally poor, those of the State’s youth are even worse.”

Information from the McLaren Oakland’s survey reveals the following information regarding physical activity, and fruit and vegetable consumption:

If you exercise, what type of exercise do you do?
- Walking = 45%
- Other = 23%
- Bicycling = 16%
- Weights = 13%
- Swimming = 3%
- 100%

If you don’t exercise, tell us why you don’t.
- Unmotivated = 38%
- Do not see the need = 23%
- Too tired = 15%
- Lack of time = 8%
- Do not have the encouragement of others = 8%
- Do not have a place to go = 8%
- 100%
During the past 12 months, how many days per week did you exercise for at least 20 minutes per day?

- 0 – 1 days = 23%
- 2 – 3 days = 41%
- 4 – 5 days = 23%
- 6 – 7 days = 13%

100%

Do you eat 5-9 servings of fruit and vegetables every day?

Always = 14%
Sometimes = 77%
Never = 9%
100%

Heart disease is the leading cause of death for both men and women in Michigan and the United States. A heart attack happens when part of the heart muscle gets damaged or dies because it isn’t getting enough oxygen through blood flow. Since 1990 between 2,500 and 2,800 Oakland County residents died from heart disease each year.

According to the Michigan Department of Community Health, the following people are at higher risk of having a heart attack:

- Adults age 65 and older
- Racial and ethnic minorities
- Men
- People who have already had heart disease
- People with a family history of heart disease
- People who smoke cigarettes or are exposed to cigarette smoke
- People with high blood pressure
- People who are overweight or obese
- People with diabetes

**Heart disease is the leading cause of death for Oakland**

High blood pressure, also known as hypertension, affects one in three adults in the U.S., and is a prominent risk factor for heart disease and stroke. In the past decade, an increasing number of people have been diagnosed with blood pressure and received treatment.

Conducting screenings for cholesterol and blood pressure is a powerful tool in the fight against heart attack, heart disease and stroke. According to the 2011 Oakland County Health Profile*:

- During 2007, 23.6% of Oakland County residents surveyed reported being told they had high blood pressure and 84.5% of them were taking related prescribed medications.
• Over one-half of persons age 64-74 (56.4%) and 75+ (54.8%) reported having high blood pressure. Interestingly one-quarter of persons age 45-54 (24.8%) also reported having high blood pressure.

• Households with incomes of <$20,000 had a statistically higher rate of high blood pressure at 34.5%. This rate was more than double the rate for households with incomes of $75,000 (16.5%).

• Eight out of ten respondents (81%) reported having their cholesterol checked, while 42.3% reported having been told their cholesterol was high. Persons age 55-64 (59%) and 65-74 (57%) reported the greatest proportion of high cholesterol.

• Age is a significant factor for reporting a diagnosis of diabetes. Nearly 30% of respondents age 65+ reported a diabetes diagnosis. Four years earlier, in 2007, only 5% of Oakland County residents reported having been currently diagnosed with diabetes.

• The risk of developing Type II diabetes can be lowered by being physically active, acquiring proper nutrition and maintaining appropriate cholesterol levels and avoiding excess weight gain.

*Note – this is the most recent information found available on this subject.

Survey respondents to the McLaren Oakland CHNA revealed the following information.

Have you ever participated in community health screenings such as blood pressure screenings, osteoporosis screenings, or cancer screenings?

Yes = 87%
No = 13%

100%

Cancer Resources

Cancers are the second leading cause of death in the nation, State of Michigan and Oakland County. Most cancers are treatable and early detection is very important for successful treatment and survival. Breast cancer is the most frequently diagnosed cancer in women and the second leading cause of death for women.

Many deaths from breast and cervical cancer could be avoided by increasing cancer-screening rates among women at risk. Clinical breast exams are an effective screening tool for identifying changes in breast tissue but mammography is the best method to detect breast cancer in its earliest, most treatable stage.

According to the ECHO 2016 report, cancer is the 2nd leading cause of death in Oakland County. A 2014 survey shows a rate of 157.5 per 100,000 population reported deaths.
from cancer. Certain demographic groups are at higher risk of cancer. Males were higher than females (189.4 male vs 136.1 female per 100,000 population). African American and Blacks (173.6 per 100,000 population) were higher than Caucasians (158.2 per 100,000 population).

The analyses of the McLaren Oakland CHNA revealed the following information:

**Do you have cancer?**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>35%</td>
</tr>
<tr>
<td>No</td>
<td>65%</td>
</tr>
<tr>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

**What type of cancer?**

(Ranked)

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prostate</td>
<td>33%</td>
</tr>
<tr>
<td>Skin</td>
<td>22%</td>
</tr>
<tr>
<td>Cervical</td>
<td>12%</td>
</tr>
<tr>
<td>Leukemia/Lymphoma</td>
<td>11%</td>
</tr>
<tr>
<td>Lung</td>
<td>11%</td>
</tr>
<tr>
<td>Ovarian</td>
<td>11%</td>
</tr>
<tr>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

**Who in your immediate family has been diagnosed with cancer?**

<table>
<thead>
<tr>
<th>Family Member</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>18%</td>
</tr>
<tr>
<td>Father</td>
<td>18%</td>
</tr>
<tr>
<td>Sister</td>
<td>9%</td>
</tr>
<tr>
<td>Brother</td>
<td>9%</td>
</tr>
<tr>
<td>No one</td>
<td>46%</td>
</tr>
<tr>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

**Mental Health**

Mental health issues (e.g. stress, anxiety and depression) can have a major impact on an individual's physical and mental well-being. Depression and other mental health issues were listed as a separate question on the survey tool from the list of other illnesses. Nine (9) percent of the survey respondents identified having a mental health issue.

The Michigan Department of Community Health, Michigan Behavioral Risk Factor Surveillance System 2004-2009 notes that 40% of the top ten leading causes of disability in the U.S. are mental disorders. The National Institute of Mental Health estimates that 25% of adults endure a mental health disorder in a given year. The cost of untreated mental illness exceeds 100 billion dollars per year in the United States.

ECHO 2016 included data results from the Michigan Department of Community Health, Michigan Behavioral Risk Factor Surveillance System 2012 - 2014 which showed:
• Mental Health as one of the top five health concerns in Oakland County
• 11.4% of the respondents reported being diagnosed with poor mental health on at least 14 days in the past month.
• In addition, the suicide rate in Oakland County is 12.8 persons per 100,000.

“Life satisfaction affects both physical and mental wellbeing. Oakland County residents reported being very satisfied or satisfied with their lives 92% of the time. White residents report a higher rate, 92.8%, than Black residents at 81.1%. Income is strongly associated with life satisfaction. Oakland County residents in the lowest income bracket reported being very or somewhat satisfied with their lives 68.1% of the time, compared to 98.5% of Oakland county residents in the highest income bracket,” as reported by Oakland County Community Health Profile 2012.

In addition, “females reported a significantly higher diagnosis rate for stress and anxiety at 16.7% than men at 6.7%. Females are also more likely to seek professional health care than men, which could account for this difference,” also as reported by Oakland County Community Health Profile 2012.

Implementation Strategy

The following are recommendations for implementation strategies to meet the needs identified by our community as cited through our Community Health Needs Assessment surveys and other data sources.

Healthy Heart / Lifestyle Issues

McLaren’s cardiology programs offer advanced diagnostic and treatment options, including minimally invasive cardiac and vascular procedures, advanced surgery procedures, as well as cutting-edge research. McLaren Oakland has been providing primary and specialty health services to families in Oakland County. Our commitment to providing only the highest standard of care to help our patients live longer, healthier lives is demonstrated in our expanding cardiology service line. With a team of specialty physicians and new offices in Clarkston and Waterford, we can offer new options and treatments to our growing community.

Our dedicated team of experienced professionals includes board-certified cardiologists, electrophysiologists, cardiovascular thoracic surgeons, as well as specially trained registered nurses, registered cardiovascular invasive specialists, registered cardiology and vascular sonographers, certified exercise physiologists, and registered EEG technicians.

Our Cardiac Catheterization lab is newly renovated and provides state of the art equipment for advanced diagnostic and treatment options, including minimally invasive cardiac and vascular procedures, including:
• Diagnostic heart angiography
• Diagnostic peripheral angiography of lower extremities
• Diagnostic angiography of carotid arteries
• Minimally invasive vascular treatment of carotid arteries including angioplasty and stenting
• Thrombolytic therapy for pulmonary emboli or deep vein thrombosis
• Heart Rhythm diagnosis and management including pacemakers, defibrillators, loop recorders

Our non-invasive service line provides a full array of cardiac and peripheral diagnostic testing including:
• Stress testing-regular treadmill, nuclear exercise stress and nuclear pharmacologic, stress echo, and dobutamine echo
• Echocardiography services including adult echo, pediatric echo, and transesophageal echo
• Vascular studies including; venous duplex, arterial duplex, carotid duplex, renal artery duplex, and abdominal aorta duplex
• Tilt table testing
• EEG-resting and ambulatory

Cardiac Rehabilitation and Vascular Rehabilitation is a team approach to cardiac disease management involving the patient, the physician, exercise physiologists and nutritionists. These programs include monitored exercise sessions, risk factor reduction education and support, as well as regular communication with the physician regarding patient progress and any symptoms or concerns. McLaren Oakland offers three locations for rehabilitation which include various exercises, one-on-one training with smaller class sizes, including education, dieticians, pharmacists and exercise Physiologists.

McLaren Oakland also participates in several health fairs which includes screenings and education to support healthy heart and healthy lifestyles.

Screening events include:
• Free blood pressure, cholesterol, and glucose screenings in Pontiac. In 2018 110 people participated in blood pressure, cholesterol and glucose screening, and Body Mass Index (BMI) at Macedonia Missionary Baptist Health Fair including early heart attack education.
• Free annual sports physicals and nutrition health displays were available at our Pediatric Children’s Clinic in Pontiac, MI.
• Blood pressure screenings at Brooksie Way 5k. In addition, heart attack care and education including sidewalk CPR compression education, are offered.
• McLaren Oakland hosted a “Dinner with the Doc – heart health speaker presentation” with over 70 attendees in May of 2018.
• We participated in the Senior Olympics at the Waterford Senior Center, with over 50 attendees in June 2018.
• Diabetes education classes in Pontiac were offered in 2017.
McLaren Oakland supports the Michigan Health and Wellness 4x4 Wellness Plan. The goal of this plan is to reduce obesity and overweight adults and children, via four key healthy behaviors:

- Maintaining a healthy diet by eating the recommended amounts of fruits and vegetables,
- Engaging in regular exercise,
- Participating in an annual physical examination, and
- Avoiding all tobacco use.

The 4 key healthy measures of the Michigan Health and Wellness 4x4 Plan are:

- Body Mass Index (BMI).
- Blood Pressure
- Cholesterol Level
- Blood Sugar Level (glucose)

To ensure the success of programs, the CHNA Committee also makes the following overall recommendations:

- Provide information on McLaren Oakland programs to our physician offices, especially primary care physicians, so that physicians can promote our programs to their patients.
- Encourage collaboration among McLaren Oakland departments.
- Identify grant funding to support these programs.
- Identify a “champion” for each of the selected programs.

Cancer Resources

Cancer patients will have increased access to advanced cancer care in the Pontiac area and surrounding communities through the partnership of McLaren Healthcare and Karmanos. McLaren Oakland opened a world-renowned Karmanos Cancer Institute inpatient oncology program in August 2018. The $14 million capital and technology investment created a 21-bed inpatient oncology adult acute care unit at the main hospital. Oakland County patients will benefit from the latest advances in cancer care treatments, including access to advanced clinical trials and programs at the McLaren Oakland hospital main campus in Pontiac. Karmanos Cancer Institute is a unique, integrated center of research, patient care and education, dedicated to the prevention, early detection, treatment and eventual eradication of cancer. Our vision is to be a world leader in cancer care, research, and education through courage, commitment and compassion.

Our inpatient oncology unit provides the following cancer services either onsite or by referral:

- Onsite diagnostic testing
- Treatment of oncology and hematology conditions including:
  - IV therapy
  - Chemotherapy infusions
Injections
  • Port flushes
- Advance directives
- Nutritional counseling
- Palliative care
- Patient navigation
- Surgical oncology
- Inpatient rehabilitation including:
  • Physical therapy
  • Speech therapy
  • Occupational therapy
- Social workers
- Survivorship services
- Screening services including:
  • Breast, Colorectal, Prostate, Skin
- Support services including:
  • Art therapy, smoking cessation, spiritual care, support groups, wig services

McLaren Oakland also offers outpatient services at the Karmanos Cancer Institute in Clarkston, Bloomfield, Lapeer and Macomb. We support our patients through prevention, diagnosis, treatment, recovery and survivorship.

Available services at Karmanos Cancer Institute outpatient include:

  • Onsite diagnostic testing
  • Treatment of oncology and hematology conditions including: IV therapy, chemotherapy infusions, injections and port flushes
  • Advanced directives
  • Clinical trials and research
  • Genetic counseling
  • Nutritional counseling
  • Palliative care
  • Patient navigation
  • Radiation oncology
  • Surgical oncology
  • Rehabilitation
  • Social workers
  • Survivorship services
  • Screening services including: breast, colorectal, prostate and skin
  • Support services including: art, pet and massage therapy, spiritual care, support groups and wig services

We also have programs for patients who qualify with financial assistance to cover deductible and co-payments on medical bills, household costs, caregiver bills and the costs for breast screenings through The McLaren Oakland Foundation. Our social workers and navigators assist patients who have demonstrated a financial need, and ensure these patients will be supported and receive care.
Free mammograms continue to be provided to women who demonstrate financial need through our Sister & Sister © program. We are proud of this program. It is our hope that covering the financial cost of a mammogram will encourage more women to participate and will, in turn, identify anomalies in their early stages. During 2017 and 2018, McLaren Oakland provided 144 and 139, respectively, free mammograms through our Sister & Sister © program.

**Mental Health**

In response to a significant need for intensive mental health care in the community and throughout the State of Michigan, McLaren Oakland provides inpatient psychiatric services specifically designed for the older adult population. Located in the East Tower at the McLaren Oakland main campus in Pontiac, the Senior Behavioral Health program consists of a 27-bed licensed psychiatric program that is accredited by the Joint Commission. Individuals 45 and older who are experiencing a mental health problem and who are at risk of harm to self, others, or whose judgement is significantly impaired are treated by a dedicated staff of mental health professional and support staff. The clinical team consists of board-certified Psychiatrists, Registered Nurses, Social Workers, Psychologist, Recreation Therapists, and Psychiatric Technicians who work with the patient and family to develop an individual plan of service designed to promote optimal health and functioning. Being an integrated part of the hospital, Internal Medicine and other medical specialties are available to meet the needs of the persons treated in the Senior Behavioral Health program. The average length of stay for this service is usually 10 - 14 days. Aftercare planning begins at the time of admission and communication with the next level of care a key factor to the program success. Most insurances are accepted and the program contracts with Oakland Community Health Network to ensure individuals who have Medicaid or are indigent are able to receive care.

In May 2019, McLaren Oakland opened an additional 13 bed special population geriatric psychiatry unit as part of the Senior Behavioral Health program. This unit is adjacent to the existing 27-bed service, and specifically designed to meet the needs and comfort of persons over the age of 65 with mental health problems. This includes an open space design of social and group therapy space, as well as, all patient restrooms meeting Americans with Disabilities Act standards.

With a total of 40 inpatient beds to meet the needs of older adults needing intensive mental health services, McLaren Oakland is meeting the intensive mental health needs of individuals and families in the community.

In addition, McLaren Oakland is committed to several free educational presentations in the community on health including stress management. We offer free “Dinner with the Doc” events, and our stress management event has on average approximately 70 attendees.
Summary

The CHNA committee believes, as documented in the accompanying CHNA report, McLaren Oakland hospital is well positioned to help its community, especially the residents in the City of Pontiac, to address three critical health issues: Healthy Heart/Lifestyle Issues, Cancer Resources, and Mental Health. In addition to the Implementation Strategies presented in the CHNA report, the CHNA Committee also makes the following overall recommendations:

- Continue to provide information on McLaren Oakland programs to our physician offices, especially primary care physicians, so that physicians can promote our programs to their patient
- Continue to encourage collaboration across and between McLaren Oakland departments.
- Continue to identify grant funding to support these programs.
- Continue to publicly recognize “champions” for selected programs benefiting the community

As a not-for-profit hospital, McLaren Oakland Health center is dedicated to improving the health of the communities it serves. With the goal of improving the health of the community, McLaren Oakland Health Center intends to partner with and support community and clinical programs that positively impact the identified health needs in the CHNA report. In addition, the hospital will participate in system-wide efforts, that support and impact community health. McLaren Health Center will indirectly address these priority issues along with other needs, through the provision of charity care, support Medicare and Medicaid programs, discounts to the uninsured and more. McLaren Oakland Health Center will continue to engage with the community to ensure that the work in the plan is relevant, effective and modify its efforts accordingly.