



# CITY OF ALBION CITY COUNCIL MEETING AGENDA

Meetings: First and Third Mondays – 7:00 p.m.

City Council Chambers ♦ Second Floor ♦ 112 West Cass Street ♦ Albion, MI 49224

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COUNCIL-MANAGER  
GOVERNMENT

Council members and  
other officials normally in  
attendance.

## REVISED AGENDA

### SPECIAL COUNCIL MEETING

**Garrett Brown**  
Mayor

**Wednesday, December 28, 2016**

**Maurice Barnes, Jr.**  
Council Member  
1<sup>st</sup> Precinct

**7:00 P.M.**

**Lenn Reid**  
Council Member  
2<sup>nd</sup> Precinct

### PLEASE TURN OFF CELL PHONES DURING MEETING

**Sonya Brown**  
Council Member  
3<sup>rd</sup> Precinct

I. CALL TO ORDER

**Marcola Lawler**  
Council Member  
4<sup>th</sup> Precinct

II. MOMENT OF SILENCE TO BE OBSERVED

**Jeanette Spicer**  
Council Member  
5<sup>th</sup> Precinct

III. PLEDGE OF ALLEGIANCE

**Andrew French**  
Council Member  
6<sup>th</sup> Precinct

IV. ROLL CALL

V. MAYOR AND COUNCIL MEMBER'S COMMENTS

**Sheryl L. Mitchell**  
City Manager

VI. CITIZEN'S COMMENTS (Persons addressing the City Council shall limit their comments to **agenda items only** and to no more than five (5) minutes. Proper decorum is required.)

**The Harkness Law Firm**  
Atty Cullen Harkness

VII. ITEMS FOR INDIVIDUAL DISCUSSION

A. Request Approval Resolution #2016 -79, A Resolution Supporting the Rural Health Network Grant Proposal and Memorandum of Understanding (RCV)

**Jill Domingo**  
City Clerk

B. Motion to Excuse Absent Council Member(s)

NOTICE FOR PERSONS WITH  
HEARING IMPAIRMENTS  
WHO REQUIRE THE USE OF A  
PORTABLE LISTENING DEVICE

VIII. CITIZENS COMMENTS (Persons addressing the City Council shall limit their comments to no more than five (5) minutes. Proper decorum is required.)

Please contact the City  
Clerk's office at  
517.629.5535 and a listening  
device will be provided  
upon notification. If you  
require a signer, please  
notify City Hall at least five  
(5) days prior to the posted  
meeting time.

IX. ADJOURN

## **NARRATIVE**

### **Introduction**

Starr Commonwealth is requesting consideration of a one-year planning grant to create a foundation for a rural health network infrastructure in Calhoun County, Michigan that will address local community health needs within the Albion, Battle Creek, and Marshall communities.

Starr Commonwealth will partner with local stakeholders and health care experts to develop a rural health network that will service the eastern Calhoun County region. These partners include Oaklawn Hospital, Calhoun County, the City of Albion, Summit Pointe, Albion College, the Village of Homer, and the Albion Community Substance Abuse Prevention Coalition.

Together with our partners, Starr Commonwealth will conduct the following planning activities to build the network's infrastructure: identify the health needs of the greater Albion community; identify local gaps in service delivery; cultivate a local network of care coordination; develop a sustainable network strategic plan; and establish formal commitments from network partners that are dedicated to strengthening the local health care system in eastern Calhoun County into the future.

The proposed network planning activities will address the following priority areas: Focus Area – Population Health, Subcategory – Care Coordination; Legislative Aim #1 – Achieve efficiencies; Legislative Aim #2 – Expand access to, coordinate, and improve the quality of essential health care services; and Legislative Aim #3 – Strengthen the rural health care system as a whole.

Based on the network's geographical location in Calhoun County, Starr Commonwealth is requesting funding preferences for the following criteria: Qualification 1: Health Professional Shortage Area (HPSA) for primary, dental, and mental health; and Qualification 2: Medically Underserved Community/Populations (MUC/MUPs).

### **Need**

Located on the eastern edge of Calhoun County along the I-94 corridor in south central Michigan, the city of Albion has experienced many changes in the post-industrial climate, the effects of which are manifested today. With the loss of its only hospital, numerous manufacturing and retail companies, and the subsequent loss of jobs, the community has decreased significantly in population over the past several decades.

According to the United States Census Bureau, the city of Albion had an estimated population of 8,229 in July 2015, representing a -19.7% change since 1990. In the last five years alone, Albion saw a 4.5% decrease in population (census.gov). After a decline in the number of available jobs – especially higher paying jobs – many people of means and wealth could afford to either move away from the Albion community, or seek employment, education, and health care in neighboring communities.

The Office of Disease Prevention and Health Promotion has identified a number of Social Determinants of Health that affect health outcomes. For example, social factors such as access to

educational and job opportunities, quality of education, transportation options, and public safety can directly impact the health of a community (healthypeople.gov).

The post-industrial landscape has had negative implications on the health of Albion and surrounding Calhoun County citizens. A reduction in local economic and social opportunities and lack of resources and supports within the community are just some of the factors that have contributed to Calhoun County's 74<sup>th</sup> place ranking of 82 Michigan counties measured in 2015 for health outcomes (The Coordinating Council [TCC] Calhoun County Community Report Card 2015-16).

In fact, 19% of Calhoun County residents have poor or fair health; 35% of adults are obese; a quarter of adults smoke (26%) and are physically inactive (25%); and 15% of adults participate in excessive drinking (TCC Calhoun County Community Report Card 2015-16). Further, according to the Calhoun County Public Health Department Behavioral Risk Factor Surveillance, 10.6% of Calhoun County adults did not have health care coverage in 2014, which was 2.1% less than the state estimate (12.7%); and 21.5% of Calhoun County adults reported their general health as being fair or poor, which was a larger percentage than both the United States and the State of Michigan (December 2016).

More specifically, the city of Albion has experienced the side effects of limited access to educational opportunities in recent years. In May 2016, Albion Public Schools voters approved the annexation of their school district to neighboring Marshall Public Schools after years of declining enrollment and financial struggle.

Albion's high school and middle school students were already attending Marshall schools as a result of a 2013 cooperative agreement culminating from Albion's \$1.1 million deficit. Prior to the merger, the 2013 Albion School District graduation rate was just 68.7%; a quarter of students were dropouts (25.4%); and 38% of students in the district were chronically absent (TCC Calhoun County Community Report Card 2015-16).

Additional social determinants such as racism, poverty, culture, and social support are also at play in local negative health outcomes. In 2015, 7.6% of Calhoun County residents were unemployed; 29% of children were living in poverty and 43% in single-parent households; and 15% of the county's population was experiencing severe housing problems (TCC Calhoun County Community Report Card 2015-16). When asked to rate their general health, Black, non-Hispanic adults reported a significantly higher prevalence of fair or poor health (50.4%) than White, non-Hispanic adults (16.7%) in Calhoun County (Calhoun County Public Health Department Behavioral Risk Factor Surveillance, December 2016).

Within the city of Albion, the United States Census Bureau reports that 32.5% of residents are living in poverty; the median household income from 2011 to 2015 was \$26,817; 12.9% of persons under age 65 are without health insurance and 13.3% were living with a disability during 2011 to 2015; and at the 2010 census, 36.4% of the Albion population were racial minorities (census.gov).

The effects of poverty on access to food is also a local health concern. The United States Department of Agriculture defines food insecurity as “a household-level economic and social condition of limited or uncertain access to adequate food,” which can result in hunger (usda.gov). With a median family income of just \$54,022, Calhoun County had a food insecurity rate of 15.4% last year; of those 20,920 individuals who were considered food insecure, 21% fell above the eligibility threshold for SNAP (Supplemental Nutrition Assistance Program) and other federally regulated nutrition programs (TCC Calhoun County Community Report Card 2015-16).

Without reliable access to affordable and healthy foods, thousands of local residents are experiencing adverse health effects, especially children. Children who are food insecure are more likely to require hospitalizations; may be at higher risk for chronic health conditions; have more instances of oral health problems; have poor physical quality of life that can affect engagement in school and social interactions with peers; and may be at higher risk for behavioral issues and social difficulties such as increased risk of truancy, school tardiness, and higher rates of fighting, hyperactivity, aggression, anxiety, mood swings and bullying (Michigan State University Extension).

Compounding these adverse health outcomes, the city of Albion lost its only community hospital in 2002. After 95 years of serving the health care needs of the local community, Trillium Hospital announced its closure in January 2002 due to years of financial struggle. From 1997 to 2002, the hospital had lost approximately \$6.5 million, largely in part to local residents pursuing health care services in neighboring communities and because of an 18% client base of Medicaid patients – well above the 6–10% national average ([www.albionmich.com/history/histor\\_notebook/S\\_Hospital.shtml](http://www.albionmich.com/history/histor_notebook/S_Hospital.shtml)).

The closest comprehensive hospital system in the area is Oaklawn Hospital, located twelve miles west of Albion in the county seat of Marshall, Michigan. Neighboring communities house additional options such as Bronson Battle Creek Hospital, located thirty miles west of Albion on the western edge of Calhoun County, and Henry Ford Allegiance Health, situated outside of Calhoun County twenty miles east in Jackson, Michigan.

Within Albion, after-hours clinics and urgent care facilities are nonexistent. The ability for patients to be available during regular office hours to take care of their routine, chronic, or emergency medical conditions is problematic. Barriers such as transportation, child care, the ability to take time off of work, and most importantly the ability to physically get themselves to a medical facility located in a neighboring city is difficult for much of Albion’s residents. Given the social circumstances and financial state of many of Albion’s low-income population, having the money and transportation necessary to commute for medical needs is not an option. Simple routine checkups or minor emergency treatment for common conditions such as cuts or ear infections become difficult, if not impossible.

The nearest option for Albion residents is Oaklawn Hospital in Marshall. Oftentimes, patients from Albion only show up to Oaklawn after an emergency situation arises. Given the many barriers that make seeking medical treatment in a neighboring community difficult, it becomes challenging particularly for low income populations to become proactive about their health care

and treatment solutions. Residents are often forced to be reactive, rather than proactive, about their health care needs.

For example, 13.3% of Calhoun County adults reported a time during the last year when they were unable to see a doctor due to cost; 10.3% reported not taking a prescribed medication due to cost, and an even higher percentage among those with an income of less than \$20,000 (29.5%) and those who were unemployed or unable to work (27.1%) (Calhoun County Public Health Department Behavioral Risk Factor Surveillance, December 2016).

These statistics are significant because the lack of access to health care services is also impacting the daily lives and activities of much of the local population, especially those who are low income. In the Calhoun County Public Health Department's Behavioral Risk Factor Surveillance, 20.7% of adults reported that poor physical or mental health kept them from doing usual activities on one or more days during the past month; 42.9% of which were unemployed or unable to work (December 2016).

Because Albion residents no longer have easy access to health care options in their own community, a coordinated system of care is essential to the health outcomes of the eastern Calhoun County region. In its 2017 Comprehensive Plan, the City of Albion recently released its Goals and Objectives, several of which focus on increasing local collaborations and promoting partnerships that support health care access for residents: "Goal 10: Forge local, regional and global collaborations that support the City of Albion – its people, its needs and its opportunities" and "Goal 11: Support networks and systems that promote healthy living" (City of Albion 2017 Comprehensive Plan).

A Rural Health Network Development Planning Program Grant will provide a framework for establishing a coordinated system of care for eastern Calhoun County residents. The current health care landscape entails many different entities working around one another. A planning grant will provide the resources necessary to coordinate a network of providers in the region that will serve the needs and health disparities of those in the community; in particular, at-risk, underserved, uninsured and low income populations in Albion and surrounding eastern Calhoun County. (See Attachment 4 – Map of Service Area)

This new network of coordinated care will positively impact local service providers within the eastern Calhoun County community as it will help to define ways in which various providers can coordinate and co-locate, when possible, to better meet the needs of the overall community and currently underserved populations. As additional network members are identified and vetted throughout the one-year planning grant period, the group can then begin conversations about how to best unite and physically co-locate based on needs identified by community members in the needs assessment data.

A potential barrier in forming the network and implementing the network activities is the fact that each network member involved in the project is its own entity; therefore, it is imperative to find ways to work together to meet the overall goals of the network and needs of the community at large. This synergistic approach will be guided by the Work Plan and through the

identification of a Project Manager and Network Director, who will oversee the execution of all Work Plan activities and maintain constant communication with all network members.

Another potential barrier is securing the commitment of network members to carry out the identified network activities throughout the one-year grant period, as well as ensuring sustainability beyond the grant period into the future. To aid in these efforts, our Work Plan incorporates community conversations with key network stakeholders and continued vetting of leaders within that network and admission of newly identified community partners. This inclusive process will create buy-in, helping to ensure that proposed network activities are mutually agreed upon and feasible, and that the direction of the network is appropriately responding to the needs of the community as identified through needs assessment data.

Additionally, the Work Plan incorporates formal written commitments that will be required of each participating network member that pledges their respective time and resource commitments to network activities. Committed entities will then work together to develop and formalize a health network strategic plan that will serve as a roadmap for developing a sustainable network into the future, beyond the one-year grant period.

### **Response**

The following goals, objectives, and execution strategies have been identified by the network and articulated in the project Work Plan:

**Goal 1:** Identify health needs of the greater Albion community (Aim #1: Achieve efficiencies)

**Strategy:** Reach out to local community and identify the gaps in care and disparities in health

**Activities:** Survey local community members; collect existing health data from the Coordinating Council of Calhoun County and other entities studying local health; utilize Oaklawn Hospital's annual health needs assessment and strategic plan; coordinate network meetings to analyze data and provide recommendations for next steps

**Outcome:** Define and disseminate the major health needs and disparities of the greater Albion community to all network members and the public at large

**Goal 2:** Identify and grow a network of health agencies, social service organizations, and local governments that address the care coordination gaps for at-risk communities in the greater Albion area (Aim #2a: Expand access to, coordinate, and improve the quality of essential health care services; Developing a network business and/or operations plan)

**Strategy:** Include as many service delivery partners and care coordination organizations/payers to the process of network formation as possible

**Activities:** Expand conversations to outside network members and vet more organizations to continue this work within the network; interview and vet potential leaders within the network for the next step in creating health care accessibility to at-risk and under-funded populations in the greater Albion area

**Outcome:** Defined network members and formal written commitments for a period of time to continue creating and improving care coordination and health care access

**Goal 3:** Identify how network members integrate functions to share resources and create efficiencies in care coordination and service delivery (Aim #1: Achieve efficiencies; Aim #2: Expand access to, coordinate, and improve the quality of essential health care services)

**Strategy:** Investigate what is going well in the current care coordination space and identify the gaps to begin laying the foundation for future partnerships within the network

**Activities:** Collate locally collected data on services provided and have constructive conversations around filling the gaps in payer supported services and actual services delivered; facilitate solutions-focused conversations around managing chronic illness for at-risk populations; explore the challenges in not having physical and mental health services co-located and easily accessible

**Outcome:** Defined inventory of services; coordinated map of payers for services and where/what they fund for at-risk and Medicaid/Medicare populations; defined goals for future integration of mental health services with physical health services

**Goal 4:** Develop sustainable network roadmap that addresses the health needs of the greater Albion community and attempts to fill in gaps in care and access (Aim #2: Expand access to, coordinate, and improve the quality of essential health care services; Aim #3: Strengthen the rural health care system as a whole)

**Strategy:** Identify a plan to move forward on addressing gaps in service delivery and care coordination

**Activities:** Facilitated strategic planning conversations that address the needs of the greater community with the capability of network members to coordinate services

**Outcome:** Develop health network strategic plan that defines the roadmap to improving care coordination and service delivery in the greater Albion area

**Goal 5:** Strengthen health care system of eastern Calhoun County with network collaboration and mature development of the network (Aim #3: Strengthen the rural health care system as a whole)

**Strategy:** Create a network with strong relationships and expressed commitment to the future of health service delivery

**Activities:** Regular meetings of the defined network; regular vetting and admission of new partners and service providers to the network; continued conversations around service delivery and efficiencies

**Outcome:** Formal commitments from all network members of their time and resources available; at the end/during project year, the network is ready to pursue additional funding opportunities and initiates that collaborative process

This project will utilize recent community health assessment data from multiple sources, including The Coordinating Council of Calhoun County's 2015-16 Community Report Card; Oaklawn Hospital's annual health needs assessment and strategic plan; the Albion Health Alliance community health needs assessment; and the City of Albion 2017 Comprehensive Plan. Additional surveys of local community members will be employed as needed.

Starr Commonwealth and Oaklawn Hospital have been having conversations for several years about how they can work together to provide services in the community, with Starr Commonwealth being a provider of behavioral health services and Oaklawn a provider of

physical health services. From these discussions, it was recognized that part of what is missing is a provision of comprehensive and coordinated services in Starr Commonwealth's own back yard in Albion.

Local economic situations also played a part in recognizing the need for a more coordinated approach to serving those in the Albion community. With the annexation of Albion schools to Marshall, many opportunities became apparent for our various organizations within Albion and Marshall to work together in more meaningful ways as the children from both communities are now bonded together and coexisting academically.

As Starr Commonwealth and Oaklawn Hospital realized that both were serving the same audiences, more entities became a part of the conversations around the health care needs of the community. With the City of Albion, Calhoun County, and Summit Pointe at the table, the need for a coordinated system of care for our eastern Calhoun County residents became apparent.

**(Add paragraph about how the Albion Community Substance Abuse Prevention Coalition became a member)**

Albion College quickly became a key player as the college serves a significant portion of the city's population for much of the year. Recognizing that Albion College does not have an urgent care center, and that none exist within the city of Albion, Albion College students have no place to receive after-hours health care or emergency treatment. With 90% of Albion College's students living on campus, this is a critical unmet need in the community.

The proposed health care network is comprised of a variety of local entities who all share a vested interest in improving the health care in eastern Calhoun County. Each network member provides a specific service that, when combined, has the capacity to integrate through the creation of efficiencies and care coordination. It is the collaborative aim of this network to navigate ways in which to house the most services in one place in order to meet the most needs of the most people in our community. This aim will help guide the strategic plan around access and care coordination in eastern Calhoun County.

More specifically, the network will utilize community needs assessment data to identify the health care accessibility issues that community members are facing. Already, we know that some of our local health care providers are geographically segmented in the types of services they provide. For example, Summit Pointe provides mental and behavioral health services and frequently receives clients who have been turned away from their primary care physicians due to needing more specialized care specific to mental health. Conversely, some patients end up either in the emergency room or in jail because they do not have the resources to physically get to Summit Pointe's facilities.

A potential resolution that will be discussed in network conversations is the creation of a community health care hub that houses various service providers of differing specialties – for example a hub that houses physical, behavioral, and mental health as well as urgent care under one roof. A new physical space that integrates co-located services will help to streamline the process of receiving comprehensive health care treatment in one location for all Albion residents,

especially those with increased barriers such as low income, underserved and underinsured residents. This is just one area in which the network will work to identify solutions to meet the health care needs of local residents.

The proposed network is comprised of key local stakeholders with a shared interest in improving the local health care system in eastern Calhoun County. While there are not many known providers in the area that are not already network members, the perspective of the current network members is that if there are any additional area service providers, they will become a part of the network by the end of the grant period. The proposed Work Plan identifies regular opportunities to vet new members as they may arise, and as a formative planning project, membership opportunities will exist throughout the one-year grant period.

Communication between network members will flow as illustrated in the Network Organization Chart (Attachment 8), with the Project Manager and Network Director serving as the gatekeeper for communications, scheduling of meetings, and the resolution of differences should they arise. Each network member has made a commitment through the Memorandum of Understanding to lend their time, expertise, and other resources available to execute the Work Plan and strengthen the network throughout the grant period.

As proposed in the Work Plan, the network has identified the following outcomes to be achieved by the end of the one-year project period:

**Outcome 1:** Define and disseminate the major health needs and disparities of the greater Albion community to all network members and the public at large

**Outcome 2:** Defined network members and formal written commitments for a period of time to continue creating and improving care coordination and health care access

**Outcome 3:** Defined inventory of services; coordinated map of payers for services and where/what they fund for at-risk and Medicaid/Medicare populations; defined goals for future integration of mental health services with physical health services

**Outcome 4:** Develop health network strategic plan that defines the roadmap to improving care coordination and service delivery in the greater Albion area

**Outcome 5:** Formal commitments from all network members of their time and resources available; at the end/during project year, the network is ready to pursue additional funding opportunities and initiates that collaborative process

As a planning grant, it is difficult to determine an exact financial impact that this project will have on network members, but the overarching goal of the network is to reduce the overall financial costs of health care in the region by integrating and sharing services among network members. Through the development of the network and integration of coordinated systems of care, the network will move towards calculating an actual cost savings during a later implementation phase of the project.

The network will engage in strategic planning through regular, scheduled facilitated planning conversations as outlined in the Work Plan. These conversations will serve several purposes, including to: 1) analyze data and provide recommendations for next planning steps; 2) expand conversations beyond the network members to vet additional entities to work within the network; 3) identify network leaders to provide leadership and guidance within the network; 4) collate local data; 5) identify current gaps in services and other barriers to health care; 6) address local health care needs of the community through a formalized strategic plan; 7) to establish formal commitments of time and resources of all network members; and 8) to identify and pursue additional funding opportunities to initiate execution of the strategic plan.

### **Identification and Resolution of Challenges**

When bringing together large entities that work in the same field and on some level compete for “business”, there are always a number of challenges that could and will occur. The partner agencies and institutions have recognized these challenges from the start of their work together. When developing the Work Plan and coming together as a network, the partner agencies identified the following challenges and resolutions:

1. Some of the work that will be done has the potential to change how each organization operates. The network recognizes that one of the goals of the project is to improve care coordination in the region, and that it may require each entity to work differently or become more collaborative. Each organization, through the Memorandum of Understanding, commits to working with a spirit of partnership. The outcomes identified in the Work Plan will not drastically change each organization individually, but will provide those entities that work in the same space the opportunity to partner.
2. Many of the activities require facilitated conversations around data points related to health care and the various populations in the region either not being served or being underserved. One of the challenges to having these conversations is that partner entities might be acknowledging deficiencies in their ability to execute the work they would like to achieve on the individual organizational level. This can create an environment of protectionism and retreat. It has been acknowledged by all partner entities that the focus of this network is to collaborate in such a way that gaps in care coordination and service provision can be filled by having a network structure in place.
3. Many of the measurable outcomes require a commitment beyond the grant period. This presents the challenge of uncertainty, and in a volatile health care environment, that can be hard for agencies to experience. As a matter of importance to the region, the partner agencies have committed to working together before and after the grant period to ensure that the importance of the work being done will continue to be a priority. Each organization has committed time and talent to the execution of creating a local health network and will be working to maintain that network over time.

While there are many challenges to bringing agencies, governments, and institutions together, preparation has been done by the network agencies to ensure that now is the time to move forward with a successful network, and to begin addressing the care coordination gaps and access to health care in the local region. Between the Memorandum of Understanding signed by all network members and the support of each organization through staffing and executive-level support, the commitment to making this network a success is strong.

**Evaluation**

The evaluation plan for this project uses a blend of process and outcome measurements, and both qualitative and quantitative data sources to measure project performance. The network lead, Starr Commonwealth, will be responsible for tracking, monitoring, and documenting progress on all project outputs and outcomes, as well as providing reports to the project funder. The evaluation plan assumes clerical support provided to the planning team to document progress on project activities, including the recording and dissemination of meeting minutes.

The evaluation plan works to ensure that project activities are not only on track to achieve stated outcomes, but also to detect inefficiencies in strategy or to modify project goals. The monitoring of short-term indicators will identify any process issues that could cause a failure to achieve desired results. Short-term process indicators monitored for this project include: 1) number of meetings held; 2) number of meeting attendees; 3) number of network partners represented at meetings; 4) documentation of meeting minutes; 5) number of new participants interviewed; 6) number of new agency members vetted; and 7) data sources used in plan and analysis development. The monitoring of short-term indicators will occur on an ongoing basis.

The planning phase has project goals that, when achieved, will form the basis of a sustainable and effective intra-agency network. Performance on project goals will be measured with long-term outcome indicators. These long-term outcome indicators will be tracked quarterly.

<b>Goals</b>	<b>Outcome Indicators</b>
1) Identify health needs and disparities of the greater Albion community	Completion of health disparities and health needs analysis; analysis made publicly available
2) Identify network of health agencies, social service organizations, and local governments that address the care coordination gaps for at-risk communities in the greater Albion area	Number of agency formal written commitments; diversity of agencies participating
3) Identify how network members integrate functions to share resources and create efficiencies in care coordination and service delivery	Completion of service provider analysis; completion of service gap analysis
4) Develop sustainable network road map that addresses the health needs of the greater Albion community and attempt to fill in gaps in care and access	Development of network strategic plan
5) Strengthen health care system of eastern Calhoun County with network collaboration and mature development of the network	Number of agencies committing to implementation phase; diversity of agencies committing to implementation phase; length of commitment to the network team

**Resources and Capabilities**

Starr Commonwealth was founded in Albion, Michigan in 1913 as a refuge for abused, neglected and delinquent youth. Over a century later, the mission of Starr Commonwealth remains: To create positive environments where children and families flourish. A 501(c)(3) human service organization, Starr operates a full spectrum of programs for youth, families, schools, and communities at sites across Michigan with headquarters in Albion, and campuses in Battle Creek and Detroit. Internationally, Starr's Global Learning Network provides professionals, schools, communities, and institutions of higher learning access to Starr's highly successful and innovative techniques aimed at bringing out the best in every child, family, and community.

Starr Commonwealth offers community-based programs, specialized treatment services, and professional training, all of which focus on identifying, treating and healing trauma and pain-based behavior and building resiliency in children and adolescents.

Over the years, Starr has been selected by Consumer's Digest and the American Institute of Philanthropy as one of the most efficient childcare agencies in the country and is a Better Business Bureau Accredited Charity.

As a nonprofit organization that has been serving children, youth, and families for more than a century, Starr Commonwealth has proven capacity to manage this grant project and personnel. Starr Commonwealth has identified a member of its Advancement Team, Mr. Shane Williamson, to serve as the Project Manager at a planned level of 0.2 FTE. In the Project Manager role, Mr. Williamson will be responsible for assisting the network with its sustainability plan and serving as the manager for the Network Director. Mr. Williamson's strategic position at Starr Commonwealth is well positioned to assist the Network Director in making sure the Work Plan is executed during the grant period and will help provide accountability to the Network Director for their work.

In addition, Starr Commonwealth will utilize its Director of Research and Evaluation to serve as Project Evaluator to ensure that all outcome measures and grant goals and objectives are evaluated for effectiveness and reporting on this grant. As Starr's Director of Research and Evaluation, Ms. Jackson is well versed in ensuring the legal, regulatory, and industry standards for human service agencies are met; establishing performance standards; and collecting and reporting client health and treatment information. Ms. Jackson will work closely with network members to obtain continuous feedback and implement the evaluation plan set forth in this grant.

Starr Commonwealth employs approximately 70 staff, and will utilize two of those staff members within its Advancement Team to comply with grant reporting activities as outlined in the Funding Opportunity Announcement. Specifically, Starr Commonwealth's Director of Grants Management and Grant Writer will complete all reporting activities in accordance with the requirements set forth by the Health Resources and Services Administration.

With regards to fiscal management of this grant project, Starr Commonwealth's Finance Department will be responsible for the accounting of all spending activities, as well as ensuring the completion of all required fiscal reporting activities. Starr Commonwealth has experience in managing federal funds and has been the recipient of numerous state and federal grant opportunities during its 100+ year existence as a tax-exempt nonprofit organization.

Additionally, Starr Commonwealth performs annual financial audits through an independent auditing firm to further support its Finance Department. As one of the largest certified public accounting and business advisory firm in the United States, Plante Moran lends expertise in ensuring that Starr Commonwealth's ledgers and internal reporting accurately reflect Starr's financial information and paint a clear picture of its overall financial health.

Starr Commonwealth and the network members have selected Dr. Stacey Levin to serve as the Network Director and Project Director for this project. Dr. Stacey Levin has been in the Albion community for over three years and has professional experience teaching health and wellness at the college level, and currently serves as the Assistant City Manager for the City of Albion. In her role as Assistant City Manager, Dr. Levin is responsible for special projects and initiatives on behalf of the City of Albion. The City of Albion has committed 40% of Dr. Levin's time to the development of this rural health care network. Dr. Levin will oversee all activities related to this project and will be responsible for the execution of the Work Plan and coordinating the activities of all key personnel within the network that are both paid and unpaid. A complete job description can be found in Attachment 6 for the Network Director.

Below is a list of key personnel and summary of responsibilities that are paid through this grant for time spent on the development of the health network:

**Dr. Stacey Levin** (Network Director)

Dr. Levin will serve as the lead in coordinating all grant activities and activities of the health network that is being formed. In her current role as Assistant City Manager for the City of Albion, she serves a wide variety of functions for the city. Dr. Levin will contract with Starr Commonwealth under this grant so that 40% of her working time will be spent on the development of this network and executing the Work Plan and its outcomes. Dr. Levin will work with all parties in this network to make sure that each activity and goal for the network is met within the grant period.

**Mr. Shane Williamson** (Project Manager)

Mr. Williamson currently serves as the Director of Grants Management and Major Gift Officer for Starr Commonwealth. Mr. Williamson will be responsible for assisting the network with its sustainability plan and serving as the manager for the Network Director. Mr. Williamson will assist the network and its director with making sure the Work Plan is executed during the grant period and will help provide accountability to the Network Director for their work. This work will account for approximately 20% of Mr. Williamson's work time.

The following is a list of key network members that are not paid with grant funds, along with each member's associated organization and summary of their roles in relation to the network planning process:

**Ms. Jamie Schook** (Summit Pointe)

Ms. Schook serves as the Vice President of Human Resources at Summit Pointe and is serving as the representative from Summit Pointe on behalf of the Chief Executive Officer, Ms. Jeannie Goodrich. Summit Pointe is a Community Mental Health organization responsible for

coordination of behavioral health services payments, as well as a direct service provider to Calhoun County. Summit Pointe is very interested in filling the care coordination access gaps and partnering with other agencies in the network to deliver the maximum amount of services in an efficient manner.

**Mr. Richard Lindsey** (Oaklawn Hospital)

Currently serving as the Executive Director of Development and Community Relations for Oaklawn Hospital, Mr. Lindsey will serve as the representative to the network from the hospital. Oaklawn Hospital, being the closest hospital to the greater Albion region, is interested in improving care coordination in local communities so that their emergency room is not overwhelmed with patients that, if able to access care in their community, would be able to manage chronic conditions at home without the need to visit an emergency room.

**Ms. Elizabeth Carey** (Starr Commonwealth)

Ms. Carey is the President and Chief Executive Officer of Starr Commonwealth and will serve as Starr Commonwealth's representative in the health network for the grant period. Starr Commonwealth's role in this project will be to facilitate the network's growth and to serve as an entity that works in the behavioral health and youth and family development realm. Currently a provider of in-home behavioral health services for children in Calhoun County, Starr Commonwealth sees this planning opportunity as a way to partner with esteemed colleague agencies in our local community to fill gaps in behavioral and physical health, as well as an opportunity to co-locate these services to better address the health and wellness of the entire region.

**Mr. Jerry White** (Albion College)

Mr. White currently serves as Chief Financial Officer for Albion College, a private four-year liberal arts college located in Albion. Mr. White will serve as the representative from Albion College to the health network. Albion College currently works with Oaklawn Hospital to provide limited health services to its students. The college also takes great steps to improve the Albion community because they see community as a way to grow the college as an institution and continue their great enrollment of students into the future. Albion College will be an anchor member of the network to achieve greater care coordination for its students, as well as the community at large.

**Dr. Sheryl Mitchell** (City of Albion)

Dr. Mitchell is currently the City Manager for the City of Albion and will serve as the City's representative in the network. The City of Albion is looking for a way to make sure that every citizen in Albion has access to quality health care. As a city, the income levels are incredibly low and access to health care limited. The City's objective in this project is to support the work through any means they can possibly provide, with the City Council's approval, to support the formation and eventual implementation of a health network.

**Ms. Kelli Scott** (Calhoun County)

Ms. Scott is currently serving as the Administrator for Calhoun County and will serve as the County's representative in the network. Ms. Scott will serve in this capacity to lend county government's support to the work of creating access and coordinating care for the citizens in the

greater Albion area, which falls on the eastern-most parts of Calhoun County. As Administrator, she also oversees the county health department and as soon as an executive position is filled at the department, Ms. Scott will bring that person on board with this rural health network as well. Calhoun County is motivated to work with the network as they look at the staggering statistics around teen pregnancy, chronic health conditions, and county-wide behavioral health and drug problems. Calhoun County is motivated to coordinate care and services that help to drive down the cost of health care while increasing health and wellness in the county.

**Mr. Arthur Kale** (Village of Homer)

Mr. Kale serves as the Village Manager for Homer, Michigan and will serve as their representative to the network. Homer is a community in the rural southeastern part of Calhoun County that is next to Albion. Many residents in the Homer community utilize services in the greater Albion area. The village of Homer's interest in this network is to link Homer's sole health service provided by Oaklawn Hospital with the rest of the eastern part of Calhoun County, and begin to coordinate care so that more citizens have access to high quality health care in their local community.

**Ms. Shannon Jackson** (Evaluator)

Ms. Jackson will serve as evaluator for this rural health network grant. Ms. Jackson serves as Starr Commonwealth's Director of Research and Evaluation. Her expertise and degree is in the field of professional program evaluation. Ms. Jackson has served Starr Commonwealth in this role for over seven years. Ms. Jackson will be responsible for implementing the evaluation plan during the project period.

**Ms. Nidia Wolf** (Albion Community Substance Abuse Prevention Coalition)

(insert paragraph describing Nidia's role at the Coalition and what her role in the network will be)

All key persons will work together to execute the Work Plan and goals in the grant under the guidance and leadership from the Network Director, Dr. Stacey Levin. Currently the network is in its formative stage of development. All members are committed to coordinating care for the citizens in the greater Albion region. Each organization has seen the effects of lack of access and lack of proper coordination between health care serving organizations within the regional community.

Previous collaborations between one or two entities in the network have occurred around specific causes. For example, Oaklawn Hospital has partnered with Albion College to provide health services to students at the college during business hours. Starr Commonwealth has provided in-home health services for child behavioral health patients in Calhoun County; specifically, in Battle Creek, which has been supported by Summit Pointe.

(has there been previous collaborations involving the Albion Community Substance Abuse Prevention Coalition to add here as well?)

Never has this group come together to address a systemic issue in the nature of health care for the greater Albion regional community. This network, forming with the common goals of each organization and the building of a strategic plan, will strengthen and mature into an entity that

can create care coordination efficiencies, strengthen the health system(s), and provide access to care in the greater Albion region.

Within the network, current members are comprised of Starr Commonwealth, Oaklawn Hospital, Albion College, Calhoun County, City of Albion, Village of Homer, Summit Pointe, and the Albion Community Substance Abuse Prevention Coalition. These member representatives will make up the network and will help the Network Director execute the Work Plan. Each network member has committed to providing information and any other resources their institutions may have to the network and the director that might be helpful in executing the Work Plan and strengthening the network. Each network member organization has capacity to lend their representatives to the work of this network during the grant period, and are looking for ways to further partner with each entity in the network to move care coordination forward in the greater Albion region.

Starr Commonwealth has had positive relationships with each network member entity. Starr Commonwealth is currently in its 104<sup>th</sup> year of service in the greater Albion region. Many of the individuals working or serving in the network agencies have spent time working or serving at Starr Commonwealth in some capacity as well.

The network is comprised of the following entities and are serving on the network for the reasons stated below:

### **Starr Commonwealth**

Starr Commonwealth has served children residentially on its campus in Albion, in schools throughout Calhoun County, and in their homes for behavioral health services throughout Michigan. Starr Commonwealth will serve as the lead agency bringing the network together to address the care coordination and access gaps that so many families and children experience in the greater Albion region that Starr has experienced over the last 104 years of service.

### **Oaklawn Hospital**

Oaklawn Hospital is located geographically in Marshall, Michigan, but the Oaklawn Medical Group serves all of the eastern side of Calhoun County, which is comprised of the greater Albion region. Oaklawn will bring its health care expertise to the network, as well as its understanding of managing chronic care and providing services outside of a hospital setting and in the community.

### **Summit Pointe**

A Community Mental Health organization in Battle Creek, Michigan, Summit Pointe serves as a payer of federal and state dollars to various agencies providing behavioral health services to individuals throughout the community. Summit Pointe also provides behavioral health services in communities, and is looking to partner and create efficiencies for the dollars it spends on behalf of taxpayers in the community for mental health.

### **Albion College**

Being a main higher educational hub in the greater Albion area, Albion College serves as a lead partner in creating spaces for health access and care to take place. Albion College may be seen as

an unconventional partner because of the college's mission to educate rather than to provide programming; however, Albion College has committed to this work to try and find a way to provide care to its students, create a healthy community for its students to live in, and to create a vibrant city for residents surrounding the college. Albion College may also have resources to provide later as part of an implementation project if the network needs space, buildings, etc.

### **Albion Community Substance Abuse Prevention Coalition**

The Albion Community Substance Abuse Prevention Coalition is a community-based coalition developed to respond to community needs around substance abuse and its related consequences in the Albion community. A natural fit for the health care planning network, the Coalition works to implement community-wide mobilization strategies and county-wide collaborative efforts that prevent or reduce substance use among youth while positively impacting the associated consequences of adult substance use and abuse. The expertise and participation of the Coalition will be imperative to addressing the health needs of the Albion community in relation to substance abuse within the scope of this planning grant.

### **City of Albion/Calhoun County/Village of Homer**

The City of Albion, Calhoun County, and the Village of Homer have been selected as institutions that have been elected to lead and serve the citizens in the greater Albion region and would like to see a healthier community. Each of the above listed organizations has committed to helping, whether it be through their councils, their health departments, or their staff to assist in the formation of a health network in the greater Albion area.

There were not any organizations intentionally excluded. This group is comprised of peers that, when discussing their work, realized there is space to come together and create a network that serves the communities within which they exist. The network will welcome the participation of other local entities as the network forms over the course of the planning grant period; for example, dental and eye care providers in the local community, as well as the Henry Ford Allegiance Family Medicine clinic in Albion, that have not yet been a part of the network planning conversations.

Additionally, elected officials within the local community will be encouraged to participate as the network forms and planning conversations continue. Starr Commonwealth and the committed network members recognize that Albion's local elected officials will be an important part of the conversation surrounding coordinating and improving the health care services for the local community, therefore they will be encouraged to participate via their government administrators.

During the grant period, the network will be reaching out to the community and community leaders to help drive decision making. The comprehensive list of network partners will have total access to the public and will provide updates as the grant period moves forward. For example, the municipality partners will want regular updates at public meetings on progress the network is making.

### **Support Requested**

The below justification falls within the guidelines of the grant use and remains within the grant award amount of \$100,000 over the period of one year.

**A. Personnel**

**Federal Request**

Position	Name	Hourly Wage	Level of Effort	Cost
(1) Project Manager	Shane Williamson	36.00	.20 FTE	\$14,976.00
			<b>Total</b>	<b>\$14,976.00</b>

**Justification:**

(1) Mr. Williamson currently serves as the Director of Grants Management and Major Gift Officer for Starr Commonwealth. Mr. Williamson will be responsible for assisting the network with its sustainability plan and serving as the manager for the Network Director. Mr. Williamson will assist the network and its director with making sure the Work Plan is executed during the grant period and will help provide accountability to the Network Director for their work. This work will account for approximately 20% of Mr. Williamson’s work time.

**Federal Request** **\$14,976.00**

**B. Fringe Benefits**

**Federal Request**

Component	Rate	Wages	Cost
FICA	7.65%	\$14,976.00	\$1,138.18
Unemployment/Worker’s Compensation	2.5%	\$14,976.00	\$449.40
Insurance	31%	\$14,976.00	\$4,642.56
		<b>Total</b>	<b>\$6,230.14</b>

**Justification:**

Fringe Benefits reflect the current rate of network agencies. Zero percent of these costs apply towards direct services.

**Federal Request** **\$6,230.14**

**C. Travel**

**Federal Request**

Purpose	Location	Item	Rate	Cost
(1) Required Training	TBD	Airfare	\$800.00	\$800.00
		Hotel	\$300.00 x 2 nights	\$600.00
		Car Rental	\$125.00 x 2 days	\$250.00
(2) Local Travel	Various	Mileage	1,500 miles at 0.55 cents a mile	\$825.00
			<b>Total</b>	<b>\$2,475.00</b>

**Justification:**

(1) Required travel for training per the terms of the Rural Health Network Development Planning Program grant. The location will be determined upon announcement of award recipients.

(2) Local travel will be required of the network director. All travel will occur within Calhoun County and there has been an allotment of 1,500 reimbursable miles at the federal mileage rate made available for use.

**Federal Request** **\$2,475.00**

**D. Equipment**

None Requested

**Federal Request** **\$0.00**

**E. Office Supplies**

**Federal Request**

<b>Item</b>	<b>Rate</b>	<b>Cost</b>
(1) General Office Supplies	\$100/month for 12 months	\$1,200.00
Copies	1,000 for 12 months at 10 cents a copy	\$100.00
(2) Printing/Professional fees for booklets, reports, information sharing of outcomes/work products	\$5,000 for a 12 month period	\$5,000.00
	<b>Total</b>	<b>\$6,300.00</b>

**Justification:**

(1) General office supplies include stapler/staples, folders, pens/pencils, binders, file saving equipment, boxes, and other items required to perform the tasks that the network and its director will perform during the grant period. This cost includes a copying allowance at a rate of 10 cents per page and approximately 1,000 pages for the grant period. The network has a commitment towards being as “green” and efficient as possible with the work that it is doing.

(2) Printing and professional fees include costs associated with printing work documents that are created during the grant period and using them for distribution in the local network region. These documents could include the strategic plan, data findings, information that is learned throughout the planning period as well as any mass production of network related material and its members such as bylaws, articles of incorporation, and print media and notices for meetings.

**Federal Request** **\$6,300.00**

**F. Contractual Services**

**Federal Request**

<b>Position</b>	<b>Name</b>	<b>Rate</b>	<b>Cost</b>
(1) Network Director	Dr. Stacey Levin	\$33,280.00 per grant period year	\$33,280.00
		<b>Total</b>	<b>\$33,280.00</b>

**Justification:**

(1) Network Director: Dr. Stacey Levin will function as the Network Director and as such will oversee the administration of the fiscal and business operations of the network on an ongoing basis. She will work in tandem with all network agency representatives to make sure their

directives are carried out. Each of these individuals has authority within their respective agencies to implement the activities of the grant and the backing of their leadership in implementing this grant. Given their current positions within their respective organizations, they will have the ability to integrate the oversight of the network’s activities into their daily responsibilities without needing to create new full-time positions. Dr. Levin will responsible for carrying out the work plan with the network agencies and making sure that the planning grant is executed per the guidelines stated within this document.

**Federal Request** **\$33,280.00**

**G. Construction**

None Requested  
**Federal Request**

**\$0.00**

**H. Other**

**Federal Request**

Type	Rate	Cost
(1) Meeting costs – venue rentals, food, equipment rental	Budgeted \$8,938.86 for one-year grant period	\$8,938.86
(2) Legal Services	10% of grant for one-year grant period	\$10,000.00
	<b>Total</b>	<b>\$18,938.86</b>

**Justification:**

(1) Meeting costs are costs associated with rental of facilities to hold network meetings that may be outside of each organization’s home office. These costs include special meetings where the public may be invited or forums with other entities that may be held. This line-item also covers any expense associated with special equipment rental or food that may be required. Some meetings might be held during lunch or morning breakfast hours before the start of a regular work day.

(2) Legal services is a line-item set aside for consulting with a lawyer to develop the network over the grant period. This could include the development of governing documents, articles of incorporation, and a nonprofit status if needed.

**Federal Request** **\$18,938.86**

**Total Direct Charges** **\$82,200.00**

**Indirect Cost Rate** **17.8%**

**Federal Request** **\$17,800.00**

**Proposed Grant Period**

Start Date	June 1, 2017
End Date	May 30, 2018

**Budget Summary**

Category	Cost 06/01/2017-05/30/2018	Total Cost
Personnel	\$14,976.00	\$14,976.00

Fringe Benefits	\$6,230.14	\$6,230.14
Travel	\$2,475.00	\$2,475.00
Equipment	\$0.00	\$0.00
Office Supplies	\$6,300.00	\$6,300.00
Contractual Services	\$33,280.00	\$33,280.00
Construction	\$0.00	\$0.00
Other	\$18,938.86	\$18,938.86
<b>Total Direct Charges</b>	<b>\$82,200.00</b>	<b>\$82,200.00</b>
<b>Total Indirect Charges</b>	<b>\$17,800.00</b>	<b>\$17,800.00</b>
<b>Total Project Costs</b>	<b>\$100,000.00</b>	<b>\$100,000.00</b>

**RESOLUTION #2016-79**

**Resolution Supporting the Rural Health Network Grant Proposal and Approving the Memorandum of Understanding**

**Purpose and Finding:** The U.S. Department of Health and Human Services – Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy (FORHP) has announced a 2017 grant opportunity for Rural Health Network Development Planning Programs. The purpose of the grant program is to (1) promote the planning and development of healthcare networks in order to achieve efficiencies, (2) expand access to, coordinate, and improve the quality of essential health care services; and (3) strengthen the rural health care system as a whole. The grant provides an opportunity to develop an integrated health care network with entities that have not had a history of collaborative efforts, enabling them to establish and improve the local capacity and coordination of care. The grant will provide up to 24 recipients with up to \$100,000 in the planning year and \$900,000 for the implementation phase. The City of Albion has the opportunity to participate as a partner in the grant application and network planning, along with Starr Commonwealth, Summit Pointe, E. M. Brown Charitable Circle Association d/b/a Oaklawn Hospital, Albion Community Substance Abuse Prevention Coalition, Albion College, Calhoun County, and Village of Homer. The Memorandum of Understanding (MOU) outlines the roles and responsibilities relative to developing the grant proposal for a period of two (2) years, ending on or about December 31, 2018. It is found that the City of Albion would greatly benefit from such a Network Planning Program that promotes the planning and development of healthcare networks for the delivery of healthcare services for our residents.

Council Member \_\_\_\_\_ moved, supported by Council Member \_\_\_\_\_, to approve the following resolution

**RESOLVED**, the City of Albion supports the submission of the grant application to the U.S. Department of Health and Human Services – Health Resources and Services Administration (HRSA), Federal Office of Rural Health Policy (FORHP) for the Rural Health Network Development Planning Program.

**BE IT FURTHER RESOLVED**, that the network will welcome the participation of other local entities as the network forms over the course of the planning grant period; for example, dental and eye care providers in the local community, as well as the Henry Ford Allegiance Family Medicine clinic in Albion, that have not yet been a part of the network planning conversations.

**BE IT FURTHER RESOLVED**, that the City Manager is hereby authorized to sign the Memorandum of Agreement on behalf of the City of Albion.

I hereby certify that the above resolution was adopted on December 28, 2016, in a regular session of the Albion City Council, and this is a true copy of that resolution.

Ayes \_\_\_\_\_  
Nays \_\_\_\_\_  
Absent \_\_\_\_\_

\_\_\_\_\_  
Jill Domingo, Clerk

December 28, 2016

## Summary – Rural Health Network Grant

Prepared: S. Mitchell, 12.27.2016

- One-year planning grant; \$100,000; June 1, 2017 – May 30, 2018
- Grant Notice issued November 2, 2016
- Grant Application Due Date: January 3, 2017
- Creating the foundation for a rural health network infrastructure in Calhoun County
- Partners include, but are not limited to: Oaklawn Hospital, Calhoun County, the City of Albion, Summit Pointe, Albion College, the Village of Homer, and the Albion Community Substance Abuse Prevention Coalition
- Three (3) Priority Areas:
  - Achieve efficiencies
  - Expand access to, coordinate, and improve the quality of essential health care services
  - Strengthen the rural health care system as a whole
- Planning grant is to provide a framework for establishing a coordinated system of care for eastern Calhoun County residents and provide resources for various providers to coordinate and co-locate to meet the needs of underserved populations.
- Additional health care providers can become part of the network
- (Page 16) The network will welcome the participation of other local entities as the network forms over the course of the planning grant period; for example, dental and eye care providers in the local community, as well as the Henry Ford Allegiance Family Medicine clinic in Albion, that have not yet been a part of the network planning conversations.
- A Project Manager and Network Director will oversee the execution of the Work Plan and maintain constant communications with all network members.
  - Project Manager - Shane Williamson, Starr Commonwealth (8 hours/week)
    - Cost recovery for wages, fringe benefits, travel, supplies, training
    - Project Evaluator - Ms. Jackson, Starr Commonwealth
    - Reporting - 2 staff from Starr Commonwealth Advancement Team
    - Financial Reporting – Starr Commonwealth Financial Team
    - Audits – Starr Commonwealth’s Auditing Firm
  - Network Director & Project Director – Dr. Stacey Levin (16 hours/week)
    - Cost recovery for wages, fringe benefits, travel, supplies, training
- Memorandum of Understanding identifies the commitment of each organization through staffing and executive level support.