



eat well.



get active.



prevent.

2013

COMMUNITY  
HEALTH NEEDS  
IMPLEMENTATION  
STRATEGY

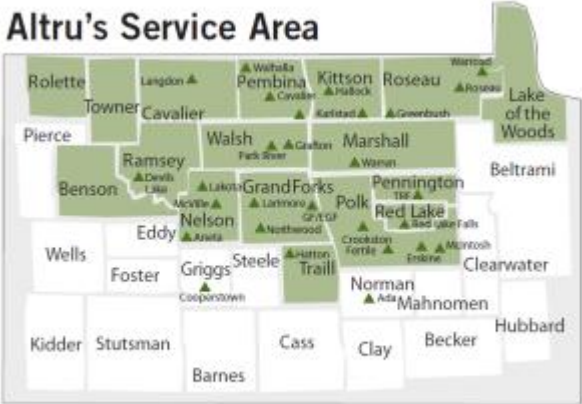
# COMMUNITY HEALTH NEEDS IMPLEMENTATION STRATEGY

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# Introduction

Altru Health System is a community-owned, integrated system with an acute care hospital, a rehabilitation hospital, more than a dozen clinics in Grand Forks and the region, large home care and outreach therapy networks, and a congregate living facility. We employ more than 200 physicians and nearly 3,900 staff. We serve the approximately 220,000 residents of a 17-county region as shown in the map below.



Altru Health System completed our community health needs assessment in August. We used the process from the Association for Community Health Improvement (an American Hospital Association affiliated group) to conduct our community health assessment. The diagram below shows the six steps that comprise the process.



Our Community Health Needs Assessment report documents steps 1-5 of the process. This Implementation Strategy report will address step 6.

## Priorities

As noted in our Community Health Needs Assessment report, we worked with a community-based Advisory Committee to conduct our assessment. (Please see Appendix A for a list of organizations represented by this group.) This group was instrumental in every step of the process. After reviewing primary and secondary data, the Committee provided input for the priority setting process and ultimately agreed that the top five priority areas for improvement should be as follows:

1. Rate of obesity
2. Access to mental health services
3. Binge drinking/excessive drinking
4. Impact of poverty on health
5. Financial barriers to health care access

Committee members approved the following criteria to guide them during the prioritization process:

- » The burden, scope, severity, or urgency of the health need
- » The estimated feasibility and effectiveness of possible interventions
- » The health disparities associated with the need
- » The importance the community places on addressing the need
- » The community resources already allocated to addressing the need
- » The connection to the purpose of the assessment developed by the Advisory Committee: Improve the overall health of the community by focusing on factors that promote health and wellness (versus treating disease).

## Implementation Strategy Development

The Advisory Committee agreed to continue to meet and conduct some initial planning around the priority areas. Advisory Committee members provided additional input for four of the five priority areas. To provide this input, the group wanted to address obesity as a single issue but combine the issues of access to mental health, impact of poverty on health, and financial barriers to health care access. Members felt that these three issues were very closely related and that there would be overlap in terms of resources and potential areas for improvement. (The priority area of binge drinking/excessive drinking was not included in this step; explanation for this decision is provided on page 8.)

Advisory Committee members provided feedback on the following topics for the area of obesity and mental health/poverty/financial barriers:

- » Current services and resources available in our community to prevent/address this issue
- » Research-based programs and/or successful efforts in other communities
- » Service gaps or barriers to current services

After review and discussion, the information gathered for each topic was summarized into gaps/barriers and potential opportunities for the two categories (obesity and mental health/poverty/financial barriers). Appendix B contains the summary information.

Specific follow-up for the priority areas is discussed next. Much of the work outlined in this first Implementation Strategy Report will be process oriented as we continue to work to learn more about what the community is doing and make connections with existing organizations that are addressing similar issues.

## Obesity

Altru Health System has committed to being the lead agency for addressing the priority area of obesity. Altru’s 2014 Strategic Plan contains the following goals and objectives related to obesity.

| Goal   |  |   |
|--|--|---|
| By 2018 reduce the proportion of adults in Grand Forks County who are considered obese from 23% to 20%. (2012 North Dakota Behavioral Risk Factor Surveillance System results) |  |   |
| 2014 Objectives  |  |   |
| Identify a community movement that would impact obesity reduction and implement plans as approved. (e.g., 30 Days of Running)  | Implement weight management programming. | Adopt an implementation strategy with community partners. |

| Goal   |
|--|
| By 2018 reduce the proportion of high school students grades 9 – 12 in Region 4 who are considered obese from 14.1% to 12%. (2011 North Dakota Youth Risk Behavior Survey results) |
| 2014 Objective   |
| Adopt an implementation strategy with the schools in Grand Forks and East Grand Forks and other community partners.  |

Our long-term success in addressing this priority area will be measured by results from the North Dakota Behavioral Risk Factor Surveillance System and the North Dakota Youth Risk Behavior Survey. Success for programs currently offered will be gauged by the number of participants and the individual results achieved according to the goals of the program.

Specific plans already underway that support the achievement of the Strategic Plan goals/objectives are as follows:

## Community Movement

In January 2014, Altru will kick-off a community movement designed to motivate the community to “Get Healthy”. This movement will raise awareness of how to make healthier lifestyle choices and follow individuals who want to share their personal health journey. The tools used to communicate about this are mostly based in social media. Altru did a similar “event” in June of 2013 called 30 Days of Running. This movement had nearly 1,000 people that participated by undertaking some form of exercise for the month. 30 Days of Running generated community conversation about running, exercise, and being healthy in general. The success of this event set the stage for the January movement.

## Weight Management Program

Altru has offered elements of weight loss/management historically, ranging from consultations with a dietitian to bariatric surgery. Now, we are organizing and expanding the offerings to be able to more efficiently serve more people. The new program will have three tracks:

1. Surgical weight loss—This track is for people who need to lose a significant amount of weight. These patients will be closely supervised by a medical provider and will achieve weight loss via bariatric surgery.
2. Medical weight loss and lifestyle change—This track will offer an initial medical assessment with a provider, follow-up visits, and monitoring of risk factors at three and six months. Participants will follow a 15-week fitness and nutrition coaching program and have a customized diet plan that may include partial meal replacement.
3. Wellness and weight management—This track is for people who maybe only need to lose a few pounds, if any, but are interested in making healthy choices to be well and manage their weight.

Two specific programs that we currently offer will be part of the weight management program and will be expanded from their current state to be more comprehensive and reach more people:

Diabetes Prevention Program – This is a 16-week weight management program following evidence-based research from the Centers for Disease Control. The program is offered at Altru Family YMCA and is facilitated by an Altru Diabetes Educator and the Y’s Healthy Living Director. In 2014 the program will be expanded to include a dietitian. Additionally, we will be developing a scholarship program so that the program will be accessible to more people regardless of income.

Healthy ‘N Fit—This program is a 12-week weight management program designed to teach kids and their families healthy eating strategies and to promote physical activity. The program is for boys and girls ages 8 – 15 years and is held at Choice Health & Fitness and Altru Family YMCA. The nutrition education component of the program is facilitated by a registered dietitian; the fitness sessions are led by an exercise physiologist. We plan to develop a scholarship program to make this program available to more children and families in our community. In addition to this structured program, we also offer one-on-one coaching for any child under the age of 18.

## Community Partners Strategy

In addition to the work being directly coordinated by Altru Health System, a community-wide strategy will be identified in 2014 to address adult and childhood obesity. We will continue to learn about efforts already underway in our community and convene a committee or partner with existing groups to develop specific plans. Part of this process also will be to continue conversations around what other communities across the country are doing to prevent obesity. Along with Altru staff, representatives from the following organizations could play a role in this strategy:

- » Grand Forks Park District
- » University of North Dakota
- » Grand Forks County Public Health
- » Human Nutrition Research Center
- » Grand Forks and East Grand Forks Public Schools
- » Altru Family YMCA
- » Grand Forks Air Force Base

Two community groups—Take Action Coalition and Healthier Greater Grand Forks—are already working on policy, system, and environmental changes to make it easier for our community to make healthy choices. The Take Action Coalition is specifically working with restaurants to offer healthy items, getting SNAP Vouchers accepted at the Saturday Farmer’s Market, developing a healthy concession stand food policy for Grand Forks Park District events, and getting funding that subsidized a farmer’s market outside of the Grand Forks County office building.

## **Mental Health/Poverty/Financial Barriers**

As already stated, the Advisory Committee chose to move forward with addressing these three priority areas together because the issues are so intertwined.

Altru Health System’s role in addressing these areas in 2014 will be as follows:

- » continue to provide financial assistance to patients who need it and work to make the programs and services more widely known to our community
- » continue to be involved with and support the work of the Alliance for Healthcare Access
- » continue to provide mental health services via our providers and inpatient and outpatient programming and explore ways to remove any barriers to access that are identified
- » work with Public Health to provide education for businesses and agencies on the impact of poverty

We will need to develop measurable goals and objectives for these priority areas as we develop more concrete plans next year so that we can measure the long-term impact on our community. In the interim, the impact we are having will be measured in terms of the connections we are able to develop, the patients served by Altru Health System and helped by a financial assistance program, and the number of people who receive education on the impact of poverty.

## Financial Assistance

Altru provides financial assistance to patients via charity care, Community Care, and the HERO program.

- » Charity Care is a full or partial discount of outstanding patient balances for services deemed medically necessary for patients that are found to have met all financial criteria. Patients may qualify for Charity Care, even though they have insurance coverage, if they are unable to pay the balance remaining after insurance benefits are applied.
- » Community Care is designed to provide financial assistance to those who have no insurance, limited means to pay for their medical services and who do not qualify for external programs. It provides patients with directed, supervised and coordinated care from their Altru Health System primary care physician for a maximum of six months within a two-year period. Existing patients will be able to retain their current primary care physician, while new patients will be assigned a primary care physician. A financial counselor will direct and/or assist the patient in applying for any external programs
- » The HERO (Health care Eligibility Resource Options) program provides services to screen uninsured and underinsured patients for any potentially available health care coverage through local, government and internal programs. Our financial counselors have a library of resources that can help patients. Patients may qualify for programs based on financial hardship, a disability or the type of care needed. Some financial resources and community agencies available are listed on Altru's website. HERO is a free resource for Altru's patients.

## Alliance for Healthcare Access

The Alliance for Healthcare Access is a group of community members who are working to find long-term solutions to address the widening gap in accessible health care. The Alliance is currently working on establishing a Community Health Center in Grand Forks. Altru Health System has been involved in the work of the Alliance and has provided financial and in-kind support for the development of the health center which is slated to open in early 2014.

There is overlap between the Alliance membership and the Advisory Committee. As such, the Advisory Committee recommended that we determine how we can work with the Alliance to address the health needs in these priority areas. Once the health center is open, we will determine how we can work this group and develop more specific plans.

Please see Appendix C for brief update document from the Alliance for Healthcare Access; member agencies are included on the second page of the document.

## Mental Health Access

Altru Psychiatry Center offers comprehensive outpatient services designed to provide support, professional assessment and therapy and referral services as needed. We employ five psychiatrists and five licensed clinical social workers who work together to provide a personal and comprehensive approach to mental health. We serve patients of all ages.



Additionally, inpatient psychiatry care is provided at Altru Hospital. In addition to providing clinical care, case managers work with patients who are receiving multiple services from Altru. These staff work with patients and their families to access and coordinate appropriate resources at Altru or other community agencies and facilities.

As a result of the issues identified in our Community Health Assessment, we will work with our leadership in this program area to explore ways to remove any barriers to access so that it is as easy as possible for community members to receive needed care.

### Impact of Poverty Education

Altru will work with Public Health to bring the workshop “Bridges Out of Poverty” to businesses and agencies in our community in 2014. This workshop helps to increase the understanding of poverty and the impact it has on individuals, families and our community. The workshop will provide tools to help employers and agencies address and support employees/clients who are living in poverty.

## **Priority Area Not Being Addressed: Binge Drinking/Excessive Drinking**

The priority area of binge drinking/excessive drinking is not being addressed as a result of this assessment because there are other community resources allocated to addressing the need. The Advisory Committee agreed to defer work on this priority to the Community and Campus Committee to Reduce High Risk Alcohol Use. This committee was formed in 2013 and is a joint effort between the University of North Dakota and the City of Grand Forks. The charge to this group is to create a community and campus culture that supports responsible, low-risk alcohol use. Two Advisory Committee members are part of this committee, providing a link between our two groups. Additionally, an Altru employee who is also the co-chair of the Grand Forks Substance Abuse Prevention Coalition serves on the committee. Altru Health System and the Advisory Committee will follow the work of this committee and provide support if needed.

## **Other Health Needs Being Addressed: Late Stage Colorectal Cancer Diagnosis**

Data review for the Community Health Needs Assessment and work with our gastroenterology providers revealed that our region (and the state of North Dakota) has a relatively low colonoscopy screening rate. Further, the rate of late stage colorectal cancer diagnosis (stage 3 or 4) is relatively high. Colorectal cancer can be prevented through the early detection and removal of pre-cancerous polyps detected only through screening colonoscopies.

Altru Health System has adopted the following goal and objectives in our 2014 Strategic Plan and will be addressing this health issue.

| <b>Goal</b>   |   |
|---|---|
| By 2018 reduce the number of colon cancers diagnosed at stage 3 or 4 from 39% to 20% as measured by Altru's Cancer Registry data. (2012 Cancer Registry data) |   |
| <b>2014 Objectives</b>  |   |
| Increase the number of screening colonoscopies by an average of 2 per day over 2013 workload.   | Implement a community awareness campaign. |

We recently have added capacity in our gastroenterology department and Endoscopy Center. We are working with staff in these areas to maximize the number of screening colonoscopies that can be done in any given week. The community awareness campaign is part of a comprehensive communications plan to increase the awareness of the need for screenings among health care providers and residents of our communities. (Please see Appendix D.)

Our long-term success in addressing this health need will be measured by the reduction of colorectal cancer patients logged in our Cancer Registry database who have been diagnosed at stage 3 or 4. Short-term impact will be measured by the number of screening colonoscopies and response to communication efforts by social media engagement and website traffic to corresponding information.

## Resources

Altru's Corporate Development division has been facilitating the Community Health Assessment process. This division will continue to facilitate the process, coordinate activities where appropriate, and monitor progress per specific outcomes identified. Other Altru staff and community members will be involved as initiatives warrant.

## Approval and Next Steps

This report will be shared for approval as follows:

- » Community Advisory Committee on November 27, 2013
- » Altru Health System's Executive Team on December 3, 2013
- » Altru Health System's Board of Directors on December 16, 2013.

Upon approval by these bodies, the report will be available to the public as follows:

- » An electronic and paper copy will be given to each Advisory Committee member.
- » An electronic file will be available on Altru's website ([www.altru.org](http://www.altru.org)).
- » A copy of the report will be available for review at the information desk located in Altru Hospital's front lobby.
- » A copy of the report will be sent—electronically or via U.S. Postal Service—to anyone who requests it.

In 2014, we will work on the initiatives outlined in the plan. For the areas where we are still determining the best actions to take, we will continue to work with our Advisory Committee members and the community organizations that become involved. A status report will be prepared, shared for approval, and made public in November/December of 2014.

## APPENDIX A | ADVISORY COMMITTEE MEMBERSHIP

In addition to Altru Health System, individuals representing the following agencies/organizations made up the community-based Advisory Committee:

- » Grand Forks Public Health
- » Community Violence Intervention Center
- » United Way
- » Grand Forks Public Schools
- » University of North Dakota School of Medicine
- » University of North Dakota
- » Northeast Human Service Center
- » Grand Forks Police Department
- » Grand Forks Fire Department
- » Altru Family YMCA
- » Grand Forks Park District
- » Grand Forks Air Force Base 319<sup>th</sup> Medical Group
- » East Grand Forks Public Schools
- » Grand Forks Senior Center

## APPENDIX B | ADVISORY COMMITTEE SUMMARY DATA

### Priority Area: Obesity

#### Gaps/Barriers

Input provided by Advisory Committee members via written comments and meeting discussion identified the following gaps/barriers:

- » Various classes offered by dietitians have in some cases been very poorly attended; people's schedules may not allow time for this traditional avenue of education.
- » Many services to address obesity cost money (Weight Watchers, fitness center memberships, etc.) and aren't affordable to those who could benefit from them. Further, "pride" may prevent people from seeking assistance to help them access services.
- » Healthy food is typically more expensive and not always as accessible as fast food.
- » Time also can be a barrier in terms of being able to exercise; people working two jobs to survive don't have time to exercise.
- » Hours available, childcare and transportation can limit people's ability to access services.
- » Food available at food pantries is high in fat content and preservatives.
- » Winter makes outdoor activity or getting to any activities difficult, especially for the elderly in our community.
- » Socialization opportunities usually focus around eating and drinking; options available are not usually healthy.

#### Opportunities

The Advisory Committee provided input and discussed opportunities resulting from the various gaps or barriers:

- » The ideal prevention program would offer education on how to make healthy food and lifestyle choices, how to shop at a grocery store for healthy foods on a budget, how to read labels, and support services to develop a fitness program tailored for the individual. A key element of an ideal program is mental health support. People overeat for a variety of reasons, including stress, depression, emotional eating; an ideal program has to address the mental dimension of wellness and obesity prevention.
- » Educational/support programs/health screenings could be provided on a sliding fee scale so they are affordable to all.

- » Educating the community on the programs available. Education on the health benefits of being active prior to an individual becoming obese and the risks associated with obesity.
- » Work with the Take Action Coalition and Healthier Greater Grand Forks and support efforts already underway:
  - Healthy restaurant items program
  - SNAP vouchers at the Saturday Farmer's Market
  - Health concession stand food policy for Grand Forks Park District events
  - Farmer's market outside of the County Office building
- » Creating a culture of wellness at workplaces could be a place to start changing people's habits.
- » Need to more advocacy around the Farm Bill.
- » The 319 MDG at the Grand Forks Air Force Base uses evidence-based practice and have developed Clinical Practice Guidelines based on recommendations by DoD VA Guidelines, HTN –JNC -7. Could these practices/guidelines be applied to the community at large (beyond active duty, family members and retirees)?
- » Altru and Public Health are working with the Greater Grand Forks Breast Feeding Coalition to support breast feeding promotion and encourage workplace policies. Continue these efforts and provide additional support since breast feeding is an evidenced-based obesity prevention strategy.

## Priority Areas

- » **Access to mental health services**
- » **Impact of poverty on health**
- » **Financial barriers to health care**

## Gaps/Barriers

Input provided by Advisory Committee members via written comments and meeting discussion identified the following gaps/barriers:

- » It is difficult to find childcare and transportation and to get off work for an initial assessment, much less for continuing care.
- » Lack of providers and long waiting lists:
  - » No immediate availability, especially for mental health/chemical dependency.
  - » With chemical dependency, there is no shelter available beyond detox with Altru.
- » People are reluctant to seek treatment without insurance; if they do, they struggle with the cost of mental healthcare and chemical dependency treatment. Even if people have health insurance or other medical assistance, it is still hard to cover copays and other recipient liabilities. Sliding fee scales often don't take bigger picture of finances into account.
- » People most in need of these services often have the least knowledge about them and don't have links to available assistance.
- » There can be waiting periods due to size of caseload and demand for services.
- » Hours of availability can be an issue.
- » Funding for staff/services provided by non-profit organizations for mental health services.
- » There is often a stigma associated with mental illness and seeking help for services.
- » There is a lack of prevention services. Many resources are dedicated to helping people when they are in crisis versus preventing the crisis.
- » We have a cultural preference for a quick fix for mental illness versus a longer-term approach through counseling.
- » Mental illness itself is a barrier for treatment. Very difficult to help someone if they are not motivated or able to get help because of the disease.
- » Medication noncompliance can contribute to ongoing issues.

## Opportunities

The Advisory Committee provided input and discussed opportunities resulting from the various gaps or barriers:

- » We need to provide more education on the programs available to individuals.
- » We need a community detox center to care for homeless people.
- » Depression and dementia sometimes go undiagnosed and untreated. The healthcare community could provide more screenings for these issues.
- » Mental health services provided in-home like hospice or home health would benefit people who are homebound or have trouble making it to counseling due to location, transportation issues, etc.
- » Many people have incomes just above the limit where they can get public assistance for healthcare services. These people have limited access to healthcare because they have trouble paying for copays and medications. They also cannot afford to pay for in-home services, such as personal care assistance and transportation. What can we do for this segment of our community?
- » People who are between 60 and 65, unemployed and uninsured, may only be able to access health care through the Third Street Clinic or emergency room.
- » Coordinate mental health services with primary care provider offices.
- » Health Leads is a national organization that works with clinics to connect patients to basic resources. This group enables doctors, nurses, and social workers to prescribe basic resources like food and heat just as they do medications. They recruit and train college students to “fill” these prescriptions by connecting patients with basic resources they need to be healthy. Could we partner to bring this service to our community?



**APPENDIX C | ALLIANCE FOR HEALTHCARE ACCESS**

# Community Health Center Update

## Fall 2013

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The Alliance for Healthcare Access is a group of dedicated community members who are working to find long term solutions to address the widening gap in accessible health care. Through strong collaborative efforts, the Alliance is working towards establishing a Community Health Center in Grand Forks. If you would like to learn more about the Alliance, or Community Health Centers in general, please visit: [www.allianceforhealth.org](http://www.allianceforhealth.org).

**Community Health Center Application** - The Alliance supported efforts for Valley Community Health Centers (VCHC) to apply for New Access Point (NAP) funding. This funding is designed to provide \$650,000/year to offset crucial preventative and disease management services provided to low-income and uninsured individuals on a sliding fee scale. VCHC was not awarded this grant in August 2013; however, their board of directors approved expansion of their operations to a Grand Forks site using an existing federal grant to support service delivery to the uninsured. **VCHC expects to serve their first patients in Grand Forks in early 2014!**

### **Continued Community Support**

- United Way of Grand Forks, East Grand Forks & Area supported our efforts for two consecutive years.
- Altru Health System and Grand Forks Public Health provided funding and on-going support to extend the project coordinator position to ensure crucial work for health center development continues.
- The City of Grand Forks, through its CDBG program, allocated \$300,000 for health center development in 2013 and has awarded additional funding for the 2014 grant cycle for renovation and services to low and moderate income individuals.
- Alliance membership remains strong—with over 20 agencies and more than 30 members committed.

### **Community & Legislative Engagement**

- The Alliance organized a Legislative Forum in 2012 with area legislators and stakeholders to learn more about the health center model of care and to provide insight to our local effort.
- The Alliance was a co-sponsor for a community forum on Health Reform on Sept. 19, 2013.
- The project coordinator has given over 20 presentations to area service clubs, agencies and city and county officials on the Alliance's efforts to bring a health center to Grand Forks.
- We bid farewell to our project coordinator, Mara Jiran on September 13, 2013, and thank her for her energy, passion and enthusiasm for our work. Mara will continue to support the Alliance as a volunteer.

### **What's Next?**

Preliminary work has begun to renovate the third floor space of 212 S 4th St. and prepare four exam rooms with equipment and necessary supplies. Valley Community Health Centers is working with an architect to prepare plans that meet both CDBG and HRSA (Health Resources & Services Administration) requirements.

Recent efforts focused on securing an additional \$300,000 in local support for the renovation and preparation of the new clinic site and several grant opportunities are pending.



# Alliance for Healthcare Access Member Agencies

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Altru Health System  
Bremer Bank  
Center for Rural Health - UND  
City of Grand Forks  
College of Business & Public Administration – UND  
College of Nursing & Professional Disciplines - UND  
Community Violence Intervention Center  
Development Homes  
Eastern ND Area Health Education Center  
Grand Forks County Social Services  
Grand Forks Public Health Department  
Health & Wellness - UND  
Lutheran Social Services  
Northeast Human Service Center  
Northlands Rescue Mission  
Polk County Public Health  
Sanford Health  
Student Health Services - UND  
Third Street Clinic  
United Way  
Valley Community Health Centers  
Valley Health & WIC



*"To provide local solutions for affordable and quality healthcare services to all people in the Upper Red River Valley."*

## APPENDIX D | GASTROENTEROLOGY 2013-2014 COMMUNICATION PLAN

| Activity   | Detail  | Deadline  |
|--|---|---|
| Wellness in One<br>(Medical Minute Replacement)      | Colon cancer focused  | Tape: Oct<br>Air: Nov                           |
| Web Updates  | » Update web information:<br>» Add prevalence of colon cancer<br>» Add info re: colonoscopies,<br>importance & awareness for why<br>important   | October   |
| Family Medicine/Internal<br>Medicine provider letter | Letter to providers showing:<br>- # of their patients who are at age for<br>colonoscopy<br>- Statistics related to colon cancer rates<br>compared to colonoscopy rates<br>- Prevalence of colon cancer in ND<br>- Services available at Altru | November/<br>December                           |
| Regional Provider Reminder                           | - Additional communication to regional<br>providers re: prevalence of colon cancer in<br>ND, screening rates and services available<br>at AHS   | November/Decem<br>ber                           |
| Altru.org homepage web banner                        | Add colon cancer screening banner to<br>altru.org homepage  | September                                       |
| Altru.org web button                                 | - link from homepage to GI page<br>- Content: Are you 50 or older? Time to get<br>screened. Click >>  | March 2014<br>Fall 2014                         |
| Alerus Center Boards                                 | Update Alerus Center digital boards with<br>colonoscopy messages  | November 2013-<br>March/April 2014<br>Fall 2014 |
| Radio PSA  | - Radio PSA about importance of colon<br>cancer screening and why important to get<br><b>- Budget dependent</b>   | March/April 2014<br>Fall 2014                   |
| Online Advertisements                                | - gfherald.com<br>- other web placement<br>- Mobile/tablet placement  | November 2013<br>March/April 2014<br>Fall 2014  |
| FB/Twitter Campaign                                  | - Check Ur :<br>- Importance of colon cancer screening  | March 2014<br>Fall 2014                         |
| Healthy Choices                                      | - Check Ur :<br>- Importance of colon cancer screening  | March 2014                                      |
| Media Pitches  | - Colon cancer prevalence in ND<br>- Incidence of colon cancer compared to<br>screenings completed<br>- What it's like to get a screening   | Feb/March 2014                                  |
| Corporate Member awareness                           | - Link to Healthy Choices blog<br>- Stats & importance of getting a screening.<br>AHS organizational initiative for this goal.  | March 2014                                      |

