

### Overview

As the public health and economic crises from the COVID-19 pandemic came to Michigan, mothers in Jackson started worrying about feeding their babies. Many of the county's 160,000 residents had previously experienced food insecurity, but what they encountered during the pandemic was different: Store shelves were suddenly empty, and families were beginning to panic when they couldn't obtain essential goods such as baby formula and diapers.

A group of community members in Jackson routinely mobilized to address equity and socioeconomic issues prior to the COVID-19 pandemic. The strong collaboration between these residents, community organizations and Henry Ford Allegiance Health (HFAH) served as the catalyst to quickly identify emerging issues and operationalize effective action to meet urgent community needs during COVID-19.



project coordinator at Henry Ford Allegiance Health. With a vision of expanding the availability of resources to meet this community need, Residents in Action approached Amy Schultz, M.D., executive director of population health at HFAH, who then worked with the HFAH procurement department to purchase large quantities of baby formula for distribution to the community at a lower cost. This alleviated families making multiple runs to the stores for baby formula that often was unavailable.

Partial to Girls developed a protocol to ensure safe and sanitary delivery of baby formula and other products, provide crucial information on COVID-19 symptoms, and promote and educate recipients on best practices for slowing the virus's spread. With resources from Henry Ford Allegiance Health and the Jackson COVID-19 Action Network (JCAN) — a recently activated community response team — Partial to Girls was able to make more than 1,200 deliveries of baby needs and household products to families.

"The women from Partial to Girls knew exactly what was needed and how to make it happen," said Schultz. "It has been an amazing opportunity for HFAH to address fundamental social determinants of health during a critical time for local families."

### Impact

What started with stacks of formula cans and diaper packages — in the living room of Partial to Girls founder

### Approach

The grassroots organizations and community members that came together to respond to the pandemic formed a new group called Residents in Action. During a series of weekly meetings, Residents in Action decided to support the work of Partial to Girls, which focuses on making sure that mothers and babies in Jackson have what they need. This support was coordinated by Tashia Carter, a member of Partial to Girls and a community

Salena Taylor — grew exponentially, supported by the partnership with HFAH and JCAN participants such as United Way, Community Action Agency, Michigan Department of Health and Human Services, the city of Jackson and Save Our Youth. Through the existence of strong partnerships across the community, Taylor and Carter were able to put out a clarion call for resources, and the response met the needs of mothers and babies and also helped quell a panic.

Bringing advanced planning and logistics to a process that developed organically, Henry Ford Allegiance Health organized tools to capture data and directed resources to the exact community members who needed them. Residents in Action applied quality improvement practices through rapid-cycle tests of change that improved efficiency and resulted in better outcomes. Ann Batdorf-Barnes, D.O., consultant to the health system, was instrumental in the application of improvement science. She worked with Carter to organize the Residents in Action weekly meetings, amplify the voices of Partial to Girls and Taylor as community needs were expressed, and implement Plan-Do-Study-Act cycles of the baby formula procurement processes.

The procured resources were distributed by Partial to Girls, which had built trusted relationships across the community and also had the know-how and commitment to manage the work and get results. Within a week of the first deliveries, more than 500 babies had been fed. The number of deliveries topped 1,200 in mid-May 2020 and kept growing. Community residents saw that their needs would be met, which was instrumental in decreasing the sense of panic that had begun to pervade some neighborhoods.



## Lessons Learned

Communities that leverage “boots on the ground” efforts can and will reach the disparate populations that tend to be the hardest hit and the hardest to reach during a public health crisis. Supporting local initiatives and organizations, like Partial to Girls and Residents in Action, and building on long-standing networks of collaboration can successfully meet community needs. Lessons to share include:

- **Listen attentively to what the community needs and support residents’ efforts to lead positive change.** When community members, partners and health systems operate on a foundation of trust and with a shared vision of community health, residents are more comfortable not only to communicate what they need but also to take the lead in addressing those needs.
- **As a health system, understand how you are seen in the community.** Some community members may perceive a power differential between health systems and themselves. Carter reinforced that the most important thing Henry Ford Allegiance Health did was act as a good partner by providing the needed resources to those that have natural connections to the community.
- **Recognize the wisdom and know-how that come from the community.** One of the biggest challenges for underresourced communities is not a lack of understanding about how to solve its problems but a lack of resources. By using its procurement and logistics infrastructure, Henry Ford Allegiance Health was able to help direct resources where they were most needed.

- **Use improvement science and process improvement to continuously modify and reassess.** Applying an improvement framework was a key ingredient to the positive community change in Jackson during COVID-19. Residents in Action applied skills and knowledge of improvement methodology, human-centered design, and systems thinking to take action and get quick results. The group set an aim, assessed the system issues, overcame system barriers, created feedback loops and developed the continuous learning processes to achieve the outcomes.

## Future Goals

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Having observed the community impact of this collaborative effort in Jackson, Carter said she sees potential for an important shift in mindsets. “My hope is longer term that mindsets are changed through this

process and the community leaders recognize that people can lead their own change,” she said. “There is power in the people that we serve.” She added, “To get the best outcomes, we need to provide the necessary resources and rely on the people to do what they know needs to be done to make impactful change.” Bolstered by strong partnerships, Henry Ford Health Allegiance and local organizations and groups in Jackson are better positioned to make progress toward the community’s overall health goals.

## Contact

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