



*MyMichigan Medical Center Alpena*

# **Community Health Needs Assessment**

## **2022**



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# Letter to Community



June 2022

Dear Community Members and Partners,

*At MyMichigan Health, our Purpose Statement is: “Creating Healthy Communities – Together.”*

Community health improvement is a daunting challenge. In fact, it is far too great for any single organization to achieve. However, it can be achieved together with the help of community partners like you. Whether in the public health, foundation, nonprofit organization, government or the health care sector, or those with first-hand experience that live, work, play and age within our communities – all can make a difference.

The Community Health Needs Assessment (CHNA) process is one way to make a difference. The CHNA offers a valuable opportunity to listen and gain input on what health concerns matter most to those in our communities. As part of that process, we seek the most impactful, evidence-based ways to work together to improve the health of our communities. Collectively, we have worked hard to address key priorities identified in previous CHNAs to move the needle on health indicators. As a result, we have implemented programs and developed new processes to provide care and affect social determinants of health to those most in need. We are proud of what we have accomplished thus far, but also understand there is still much work to be done.

It is through our CHNA process, using data and stakeholder input, that we measure and obtain a detailed snapshot of our region’s health needs and how best to address barriers to achieving a healthy life. We know that individuals and families can best achieve a healthy life when they are able to make positive health choices in settings where barriers to health are addressed and removed.

MyMichigan Health takes its role as an anchor institution, a community leader and trusted partner in our communities very seriously. We know that we serve as a major employer, purchaser, leader and participant in interconnected relationships with you, for the good of our community’s health.

MyMichigan Health understands its responsibility to set standards of care not only in our clinical settings, but also in the towns, community centers and classrooms where we serve. Our efforts to strengthen and integrate our clinical and community programs, together with our community partners, is how we become successful in our challenge to improve health.

It is our pleasure to provide this 2022 MyMichigan Medical Center Alpena Community health Needs Assessment. In accordance with policy, the Board of Directors reviewed and approved this report on April 26, 2022. We invite you to explore this report and join us as we engage in addressing the critical health issues in our community.

Sincerely,

Chuck Sherwin

President, Alpena Region

Marie Williams

Chair, Board of Directors

Mary Greeley

Vice President, Population Health

# Acknowledgements to Partners

MyMichigan Health is pleased to share with you the 2022 Community Health Needs Assessment. We adopted and modified the Mobilizing for Action through Planning Partnerships (MAPP) process to meet the needs of MyMichigan Health, our partners and the community. This is a community-driven strategic planning process for improving community health. This report represents our commitment to identify and address the barriers in our communities that impact their health.

MyMichigan Health would like to give a special thank you to all of those who have been involved in the development of the CHNA. All of these partners took part in an extensive process that started with planning, collecting and analyzing data to identify the top strategic health issues that our communities face. Collecting qualitative and quantitative data through our process enabled us to have a deep understanding of the challenges that our community faces.

This understanding enables us to develop our Community Health Improvement Plan (CHIP) that will guide our efforts over the next three years to impact health outcomes in our community.

## Thank you to our Community Health Needs Assessment Partners

Alpena Chamber of Commerce

Community Foundation of Northeastern  
Michigan

United Way of Northeast Michigan

Catholic Human Services

Senior Services

Friends Together

Food Bank of Eastern Michigan

The Salvation Army

Community Mental Health

Partners in Prevention

District Health Departments #2 & #4

211 of Northeast Michigan

Alpena Public Schools

Alpena Community College

Northeast Michigan Community Service  
Agency

# Executive Summary

The Community Health team of MyMichigan Health supports the Community Health Needs Assessment (CHNA) as a key component of improving population health. Our assessment and corresponding plans are a reflection of the purpose and core values to MyMichigan Health. We truly believe that health happens where we live, learn, work and play and that all people should have the opportunity to make choices that allow them to live a long, health life, regardless of their income, education or ethnic background.

MyMichigan Medical Center Alpena, with community partners, conducted this CHNA using a modified Mobilizing for Action through Planning Partnerships (MAPP) process that assessed the current health status of the community based on identified needs according to benchmark comparisons in secondary public health data and primary data collected through community surveying for community input and the development of a Community Health Improvement Plan (CHIP). The process included several community partners that collected, reviewed and analyzed public health data, completed and distributed the community health survey, identified priorities and set goals for the 2022 CHIP.

## Community Health Status

MyMichigan Medical Center Alpena services Alcona, Alpena, Montmorency and Presque Isle counties. Together, these four counties are on average 83 percent rural with over 30 percent of the population over the age of 65. Chronic diseases such as diabetes, obesity, stroke and cancer have a strong prevalence resulting in higher mortality rates. Colorectal and lung cancer rates are notably elevated when compared to other cancer rates.

Behavioral health measures of suicide and depression continue to trend on an upward track. While the patient to provider ratio for mental health has improved across the service area, it is still below the Michigan and Healthy People 2030 levels. In addition, an average of 18 percent of persons in Michigan report frequent mental distress which is 10 percent higher than the Healthy People 2030 benchmark of 8 percent.

## Community Health Survey

The 2021 Community Well-Being Survey was conducted between February 1, 2021 and April 30, 2021 to obtain community input regarding the health of the community. The data collected with the survey indicated a need for focus on chronic disease prevention and behavioral health services.

## Community Health Improvement Plan

Two focus areas were adopted and approved by the MyMichigan Medical Center Alpena Board of Directors at the recommendation of the advisory committees and community partners. These focus areas will have specific targets for community health impact based on the data collected and analyzed:

### Chronic Disease Prevention

- Reduction in prevalence of diabetes, obesity, depression, colorectal cancer and lung cancer
- Increase number of routine preventative screenings
- Access to health care needs including primary care, transportation, affordability and sufficient offerings

### Behavioral Health

- Reduction of suicide and depression rates
- Increased access to services for youth population
- Increased awareness of behavioral health and reduction of stigma
- Streamlined resources and programming/synergy with community partners

Figure 1: Chronic Disease Prevention and Behavioral Health Outlines

# Overview of MyMichigan Health

MyMichigan Health, a non-profit health system headquartered in Midland, Michigan, is a leader in providing award-winning, high-quality care to the 25-county region it serves. With Medical Centers in Alma, Alpena, Clare, Gladwin, Midland, Mt. Pleasant, Sault Ste. Marie and West Branch, MyMichigan Health also has affiliations with Medical Centers in St. Ignace and Mackinac Island. MyMichigan Health provides a full continuum of care across a wide array of settings, including urgent care centers, home health, virtual care as well as medical offices in more than 30 specialties and subspecialties including cardiology, family medicine, hematology/oncology, neurosciences, orthopedics, pediatrics, vascular surgery and more. MyMichigan Health demonstrates its commitment to the future of medicine by partnering with leading institutions to offer medical education programs that train medical students, physicians, nurse practitioner and physician assistant students, nursing students and other clinical experts from our region. Its more than 8,800 employees, volunteers, health care providers and other personnel work together to create healthy communities through solutions designed to meet the ever-changing needs of the 981,000 residents in the health system’s 25-county service area. In fiscal year 2021, MyMichigan Health provided \$78 million in community benefits, as well as supported its patients and families with new equipment, services and programs with funds raised by the MyMichigan Health Foundation.



Figure 2: Five Foundational Elements

**MyMichigan Health**

- **Medical Centers**
  - MyMichigan Medical Center Alma
  - MyMichigan Medical Center Alpena
  - MyMichigan Medical Center Clare
  - MyMichigan Medical Center Gladwin
  - MyMichigan Medical Center Midland
  - MyMichigan Medical Center Mt. Pleasant
  - MyMichigan Medical Center Sault
  - MyMichigan Medical Center West Branch
  - Mackinac Straits Hospital\*
  - Mackinac Island Medical Center\*\*
- **Medical Offices and Support Services**
  - Alma, Alpena, Atlanta, Auburn, Bois Blanc Island\*\*, Breckenridge, Cheboygan\*\*, Cedarville, Clare, Drummond Island, Edmore, Farwell, Freeland, Gladwin, Harrison, Ithaca, Kinross, Lincoln, Mackinaw City\*\*, Midland, Mt. Pleasant, Oscoda, Pigeon, Prudenville, Rogers City, St. Ignace\*\*, Sault Ste. Marie, Sanford, Shepherd and West Branch
- **Health Parks**
  - Bay, Freeland, Gladwin, Harrison, West Branch
- **Urgent Care Centers**
  - Alma, Alpena, Clare, Freeland, Gladwin, Houghton Lake, Midland, West Branch
- **Walk In Care**
  - Bay, Sault Ste. Marie
- **Continuing Care**
  - RehabCentra
  - MyMichigan Home Care
  - MyMichigan Hospice
  - Woodland Hospice House
- **Long Term Care**
  - Sault Ste. Marie, St. Ignace\*\*
- **Other Services, Partners, Joint Ventures**
  - Advanced PET Imaging Network\*
  - ConnectCare\*
  - Great Lakes Bay Surgery & Endoscopy Center\*
  - MyMichigan Community Health Services
  - Mt. Pleasant Surgery Center\*
  - MyMichigan Collaborative Care Organization
  - MyMichigan Health Foundation
  - MyMichigan Health Network\*
  - MyMichigan Medical Group
  - Open MRI Mt. Pleasant\*
  - Wound Treatment Centers\*

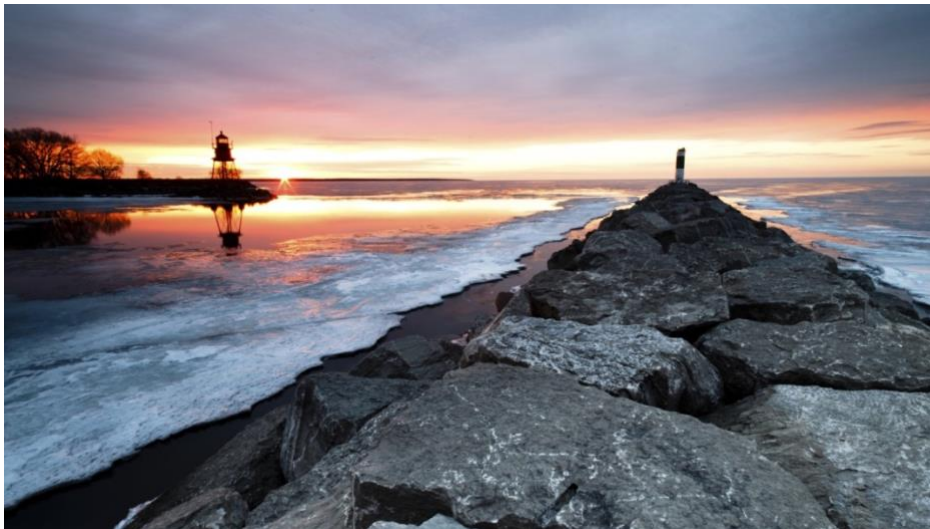
\* Joint Ventures  
\*\* MyMichigan Health University of Michigan Health

Figure 3: Our Communities

Feedback is welcomed via [CommunityHealth@mymichigan.org](mailto:CommunityHealth@mymichigan.org)

# Overview of Community

Located in northeast Michigan on the shores of Lake Huron, MyMichigan Medical Center Alpena serves the counties of Alcona, Alpena, Montmorency and Presque Isle. The area is known as the “Sunrise Side” and can be described as a place where history and heritage collide with relaxed outdoor adventure. With over 200 miles of Lake Huron shoreline among the counties, numerous inland lakes and rivers and an abundance of hiking trails, there is a lot to explore. Amidst the area parks, state parks, pathways, beaches and forests, recreational opportunities exist for kayaking, canoeing, paddle boarding, hiking, snorkeling, diving, swimming, fishing, hunting, biking and stargazing. In addition, the area has multiple lighthouses, sinkholes and the Ocqueoc Falls. Alpena is home to the Thunder Bay National Marine Sanctuary which works to preserve the area shipwrecks and offers glass bottom boat tours during the summer months. Enthusiasts can also dive, snorkel or paddle board over the shipwrecks.



Alpena's first community hospital opened in 1915 as the Donald McRae Hospital. It served until 1939 when a petition was passed to build a new public hospital. On April 16, 1940, a new 88-licensed bed hospital opened called Alpena General Hospital. On April 1, 2016, Alpena Regional Medical Center joined MyMichigan Health, headquartered in Midland, affiliated with the Michigan Medicine: University of Michigan. In 2022, the Medical Center in Alpena completed its 99,000-square-foot patient tower project featuring all private patient rooms, operating rooms, LDRP suites and more. MyMichigan Medical Center Alpena has 139 licensed beds and provides access to cancer care, pain management, infusion services, inpatient behavioral health, wound management and hyperbaric chamber treatments. The medical center is accredited by the Joint Commission and has approximately 900 employees, 100 volunteers and approximately 100 providers. A leader in quality, MyMichigan Medical Center Alpena was also named one of the 2022 Top 20 Rural and Community Hospitals in the United States by the National Rural Health Association (NRHA). The medical center was also named as a 2022 Top 100 Rural & Community Hospital - the recognition is based on inpatient market share, outpatient market share, quality, outcomes, patient perspective, cost, charge and financial efficiency.



## **Community Served at MyMichigan Medical Center Alpena**

The service area in Alcona County is comprised of zip codes: 48705 (Barton City), 48721 (Black River), 48728 (Curran), 48738 (Greenbush), 48740 (Harrisville), 48742 (Lincoln), 48745 (Mikado) and 48762 (Spruce).

The service area in Alpena County is comprised of zip codes: 49707 (Alpena), 49744 (Herron), 49747 (Hubbard Lake), 49753 (Lachine) and 49766 (Ossineke).

The service area in Montmorency County is comprised of zip codes: 49709 (Atlanta) and 49746 (Hillman).

The service area in Presque Isle County is comprised of zip codes: 49743 (Hawks), 49776 (Posen), 49777 (Presque Isle) and 49779 (Rogers City).

# Framework/Methodology

The Community Health Needs Assessment (CHNA), while a requirement every three years under the Patient Protection and Affordable Care act for our tax exempt status, is an important reflection of MyMichigan Health’s mission, vision, core values and the system’s goal to become a leader in our regions to improve the health of our communities. Community is a foundational element in MyMichigan Health’s strategic plan, and we believe that all people should have the opportunity to make healthy choices for a long, prosperous life, despite an individual’s socioeconomic status, education or background. The CHNA, as a key component for identifying top health concerns in a given area, will be vital in accomplishing the four objectives of the “Quadruple Aim”: Improve health outcomes in the community, enhance patient experience, enhance provider experience and reduce the cost of care. The primary purpose for the Community Health Needs Assessment for MyMichigan Medical Center Alpena is to gain an understanding of the health needs caused by disparities in social determinants of health (SDOH) as well as strengths in the given service area. We do so by analyzing a large and specific collection of data and community input in the region which includes Alcona, Alpena, Montmorency and Presque Isle counties. With this understanding of the needs in our communities, we are equipped to develop a three-year strategic plan to improve the health outcomes in our communities and build health improvement capacity for the future health of its residents.

## 2022 CHNA Process

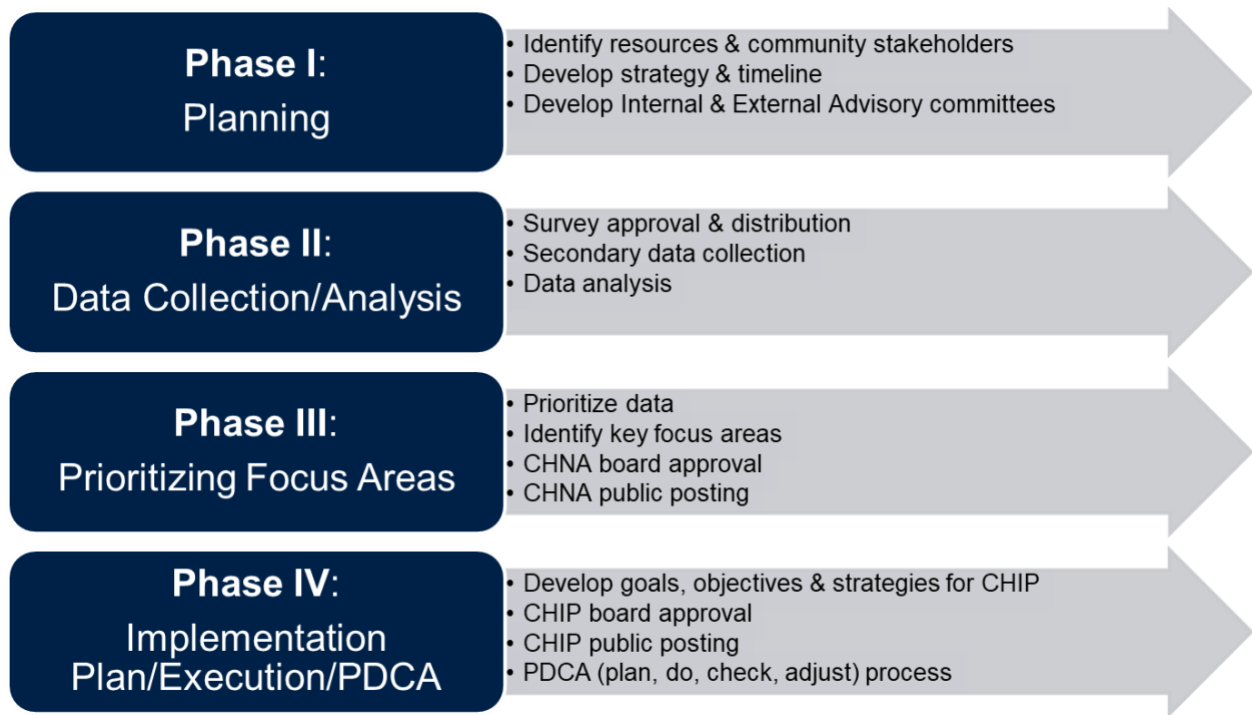


Figure 4: 2022 CHNA Process

### Phase I: Planning for the CHNA strategy

Identifying resources and community stakeholders within the Medical Center’s service area is a critical component to the CHNA. The community health specialist participates in community collaborative groups that are comprised of local organizations and community leaders who focus on the health of the residents. These groups include local non-profit organizations and health coalitions that collaborate to achieve mutual health related goals. Phase I includes the development of a strategy and timeline to be approved by the MyMichigan Health Leadership Team, who will be utilized as an internal advisory committee, and the president of MyMichigan Medical Center Alpena.

### Phase II: Data collection and analysis

Forms of primary and secondary data from the Alpena service area are utilized to perform analysis. **Primary data** will include the input of those representing the local communities. This local input is provided through a survey comprised of questions that are intended to provide an overview of the perceived health needs of community members. **Secondary data** includes over 200 public health indicators that are collected to determine the demographics and health status of the community serviced by MyMichigan Medical Center Alpena. This data will be compared to established benchmarks in the State of Michigan and Leading Health Indicators (LHI) selected by Healthy People 2030. LHI’s are a small subset of high-priority Healthy People 2030 objectives selected to drive action toward improving health and well-being. LHI’s impact major causes of death and disease in the United States and can drive collaboration between organizations and the community. Any health indicator that fails to meet the benchmarks will be identified as a need in the community. This data will then be categorized to determine areas of focus where health issues exist.

### Phase III: Prioritizing Focus Areas

This phase involves using specific analytic practices to determine focus areas and decide our top priorities in order to develop an implementation plan. Each indicator from primary and secondary data will be scaled and categorized into a subset piece of data to determine where our needs are in our community and how we can address them. The community health specialist will work with internal and external sources to determine focus areas and provide a communication document that can be reviewed. This data and focus area prioritization will be presented to the MyMichigan Medical Center Alpena Leadership Team for suggestion and approval. When approved, it will be collected and presented to the Board of Directors and placed on the MyMichigan Health website for public view and comment.



**PHASE IV: Develop Implementation plan/execution/PDCA**

Once the data and focus areas are approved, the next step will be to develop a comprehensive, three year implementation plan that outlines specific goals, objectives and strategies to improve the health outcomes of the community. Review of the focus areas and data analysis will determine what our goals will be, and objectives will be created with those goals in mind and strategies to complete.

# Community Survey Process

A 2021 community well-being survey was conducted to understand the health and health needs of people living in Alcona, Alpena, Montmorency and Presque Isle counties. The Community Health team worked with the Health and Human Services Coordinating Council (HSCC) to adapt the survey to ensure it met the needs of the HSCC and Alpena County agencies and collected data on any health issues or factors emerging since the previous data collection.

The Community Health team aimed to collect data from a sample across Alcona, Alpena, Montmorency and Presque Isle Counties, including a representative sample from the city and out-county areas. The team used existing U.S. Census data to obtain population estimates for each township/city in all four counties to ensure appropriate representation from each location. Efforts were also made to obtain a sample that was representative of each county's population (age, gender, race, education, income).

Data collection occurred via online and paper surveys. Qualtrics was used to administer the online survey and the link was advertised in the local newspaper, on HSCC agency websites and social media accounts. The face-to-face survey was administered at various locations throughout Alcona, Alpena, Montmorency and Presque Isle Counties. Participants completed the survey on site or at home and returned it in a postage paid envelope. Site-specific locations for data collection were determined in collaboration with the HSCC of Alpena County to maximize access for researchers to reach the target population.

# Demographics

The MyMichigan Alpena service area is comprised of four counties: Alcona, Alpena, Montmorency and Presque Isle. The median age for each county is 18 to 32 percent higher than Michigan’s median age. The racial and ethnic diversity remains less diverse with 95.4 percent of the service area population being white, non-Hispanic compared to 74.7 percent in Michigan. In addition, Michigan overall has significantly higher composition of black/African American and Hispanic populations.

Demographics Summary						
		Alcona	Alpena	Montmorency	Presque Isle	Michigan
	Total Population	10,405	28,405	9,328	12,592	9,986,857
	Rural	98.9%	51.9%	100%	80.9%	25.4%
Age	Under Age 18	12.6%	18.7%	14.8%	15.5%	21.5%
	Over Age 65	36.1%	23.9%	32.8%	32.5%	17.7%
	Median Age	58.2	48.1	56.1	55	39.5
Gender	Female	49.7%	50.6%	48.9%	50.2%	50.7%
	Male	50.3%	49.3%	51.1%	49.8%	49.3%
Race	Black or African American	0.5%	0.5%	0.6%	0.6%	14.1%
	Asian or Asian American	0.4%	0.6%	0.3%	0.6%	3.4%
	American Indian or Alaska Native	0.7%	0.6%	0.8%	1%	0.7%
	Native Hawaiian or Other Pacific Islander	0.1%	0%	0%	0%	0%
	White or Caucasian	95.3%	95.5%	95.4%	95.4%	74.7%
	Hispanic	1.6%	1.5%	1.4%	1.5%	5.3%

Table 1: Demographics

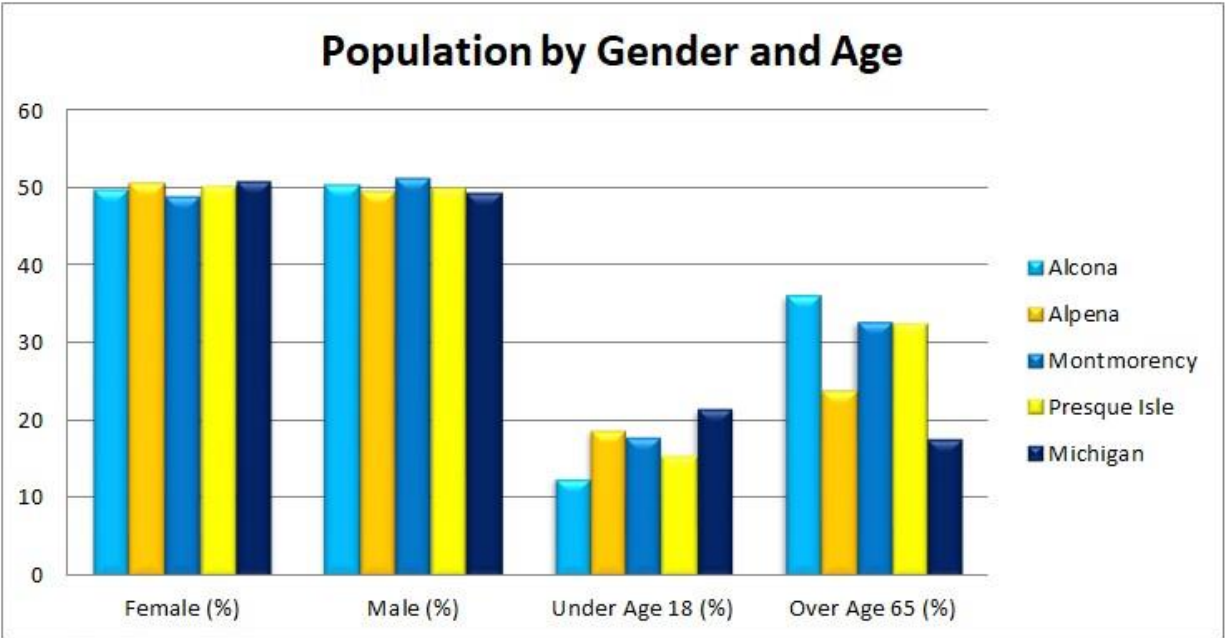


Figure 5: Gender and Age

The population in MyMichigan Medical Center Alpena’s service area is aged when compared to Michigan population with 24 to 51 percent more persons over the age of 65 and 14 to 40 percent less persons under the age of eighteen. This shift in population results in higher rates of chronic disease and increased need for health care services.

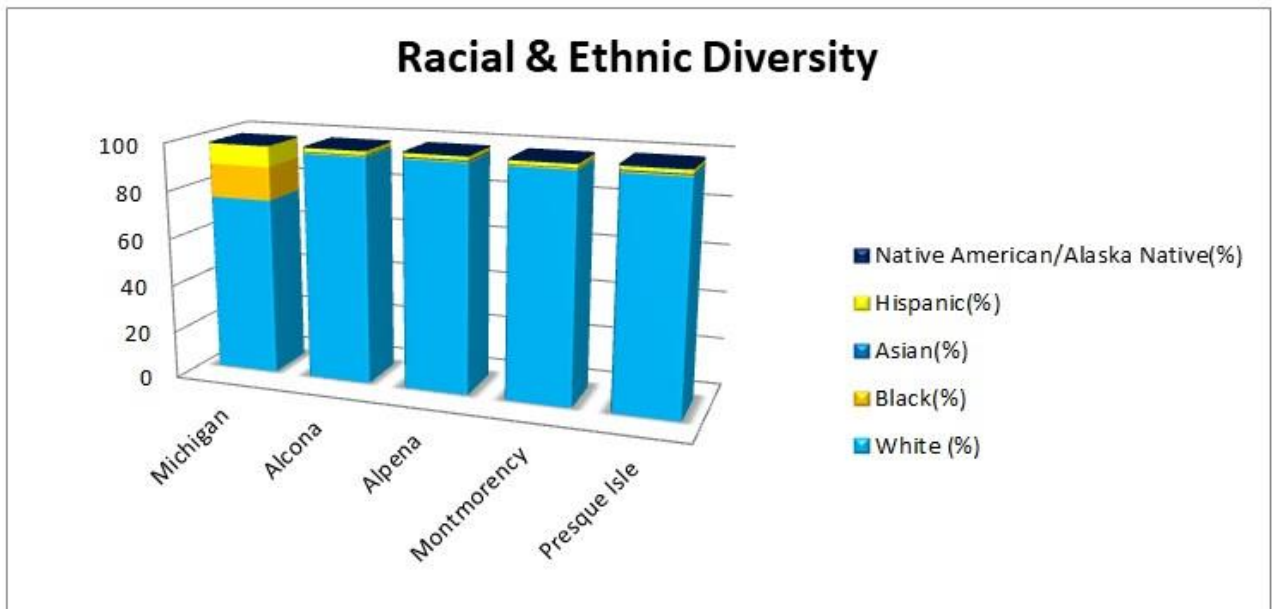


Figure 6: Racial and Ethnic Diversity

# Social Determinants of Health

The Social Determinants of Health (SDOH) are classified as conditions in the environment in which people are born, work, live, play, worship that affect their health, functioning and quality of life outcomes and risks. SDOH can be grouped into five domains which include economic stability, education access and quality, health care access and quality, neighborhood and built environment and social and community context.



Figure 7: Social Determinants of Health

## Economic Stability

According to Healthy People 2030, one in ten people living in the United States are in poverty, and many others are not able to secure health care, housing or healthy foods. Economic stability focuses on poverty, employment, housing, food security and ALICE (Asset Limited, Income Constrained, yet Employed) populations. ALICE represents individuals and families who work, but are unable to meet their basic needs (food, housing, health care and transportation).

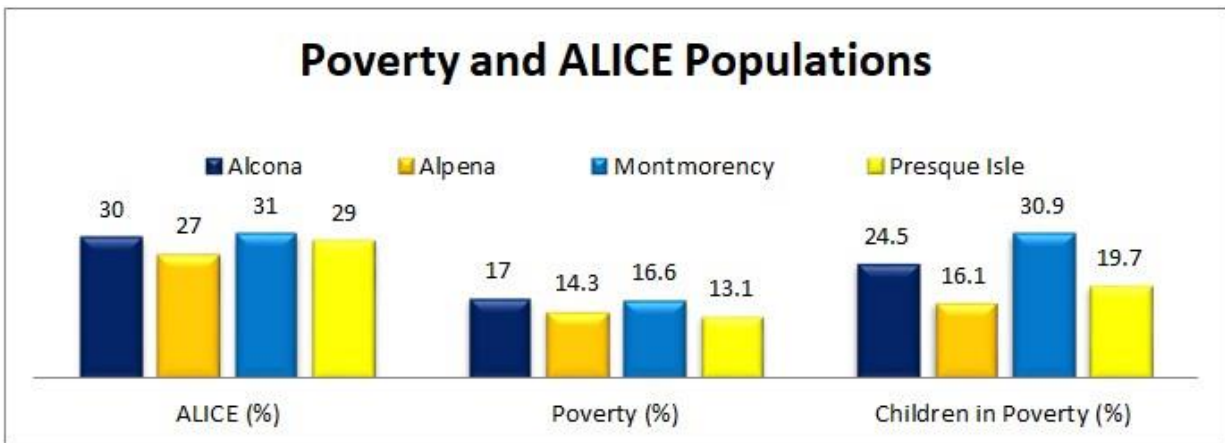


Figure 8: Poverty and ALICE Populations



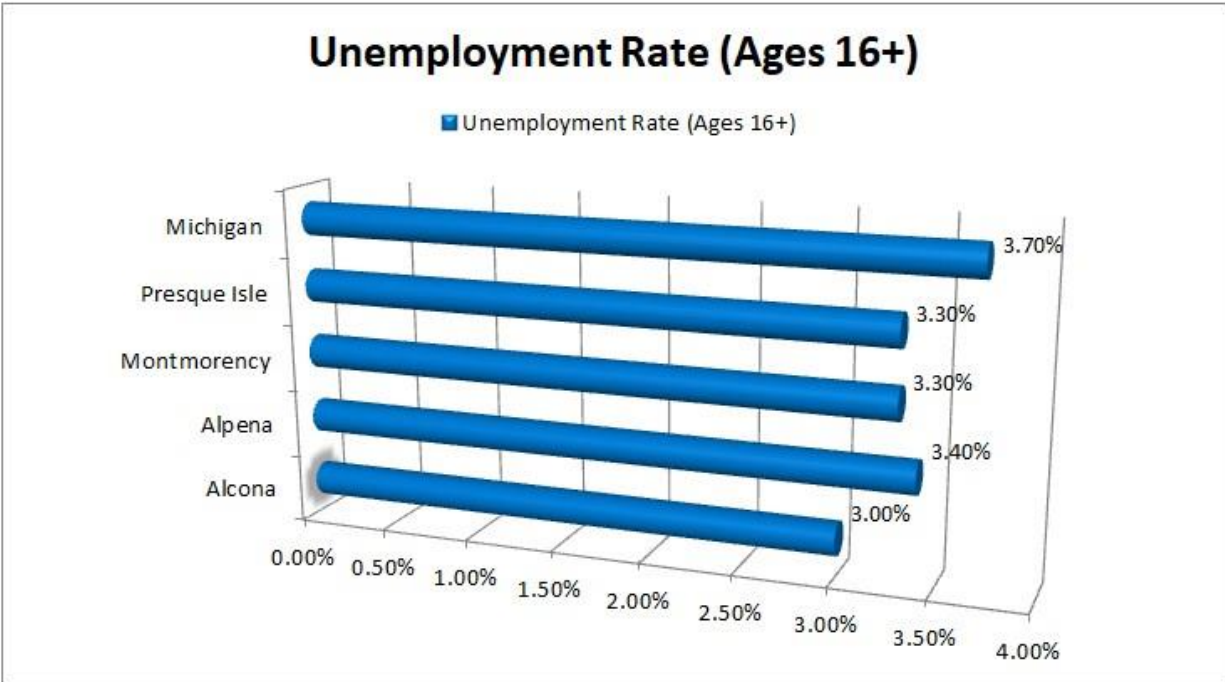


Figure 9: Unemployment Rate

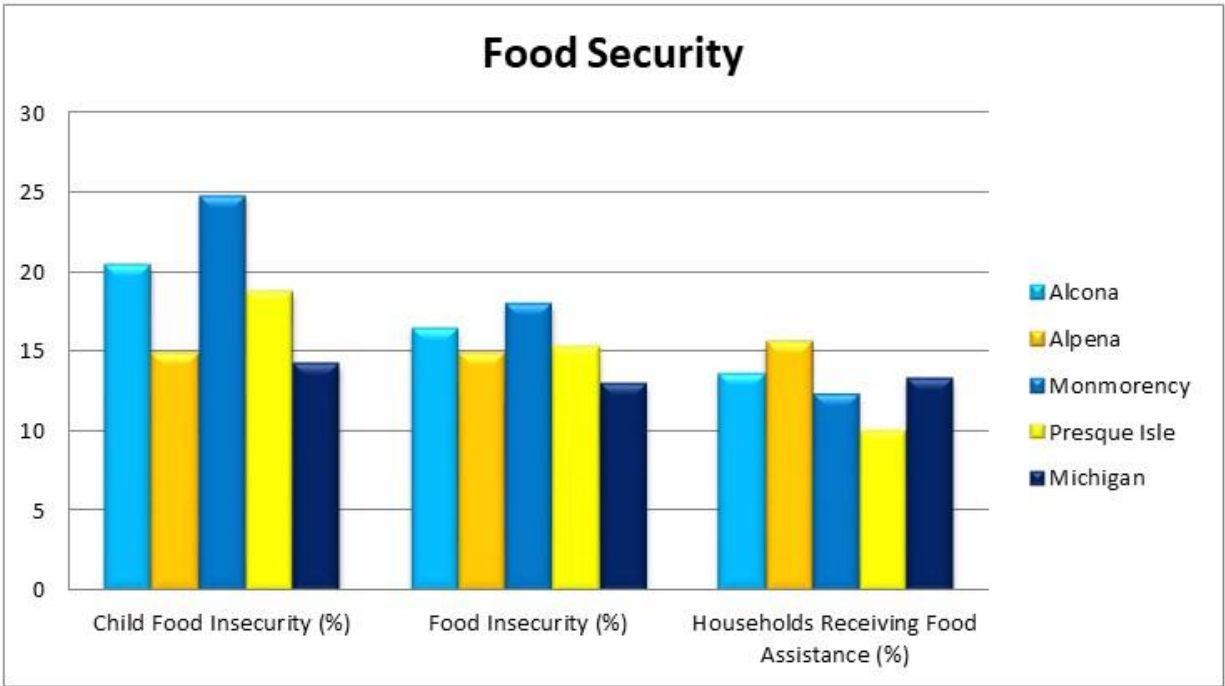


Figure 10: Food Security

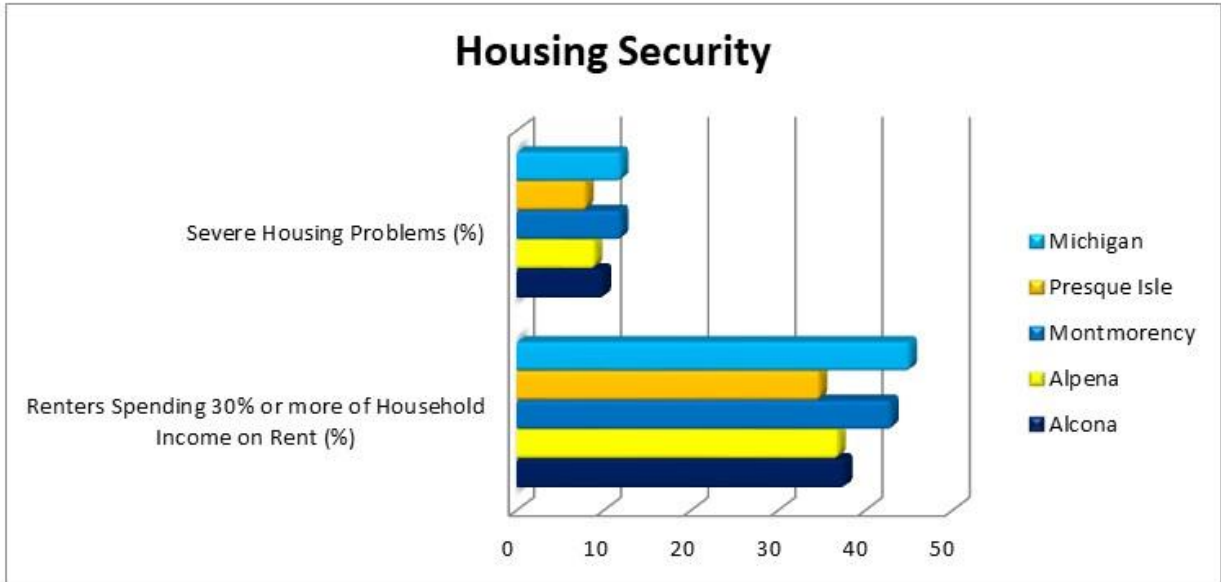


Figure 11: Housing Security

### Education Access and Quality

Research shows that the level, quality and social environment of a person’s education can affect health and longevity. SDOH in education focuses on graduation rates, higher education, early childhood education programs and language, literacy and math skills.

Across the MyMichigan Medical Center Alpena service area, education attainment beyond high school is low, with over 60 percent of people in all counties without a college degree.

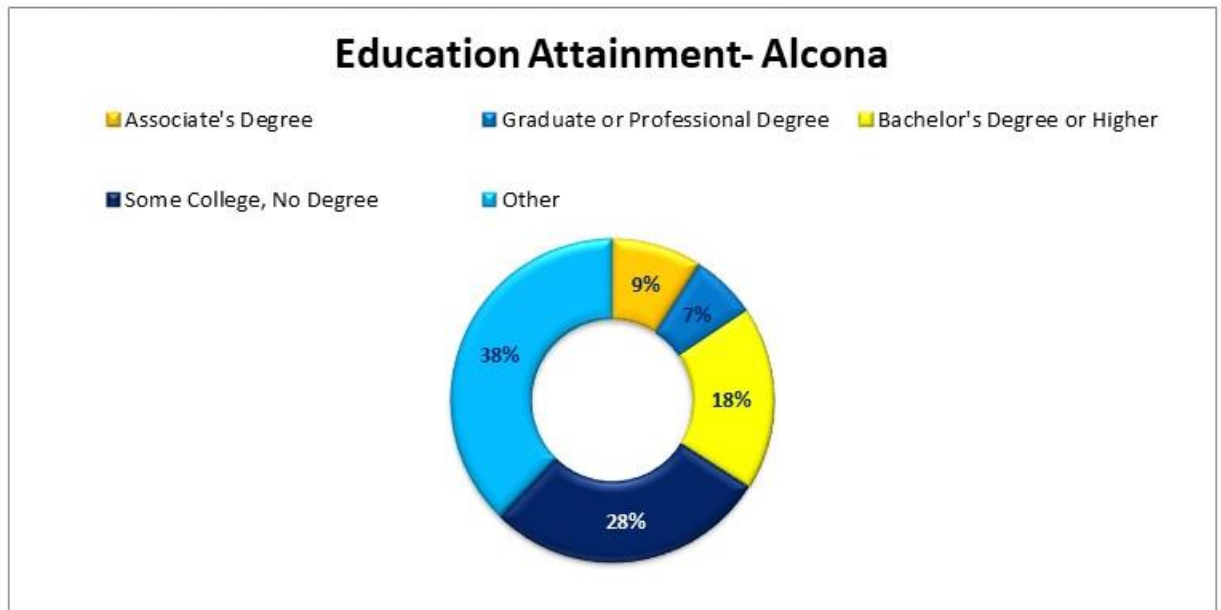


Figure 12: Education Attainment - Alpena County

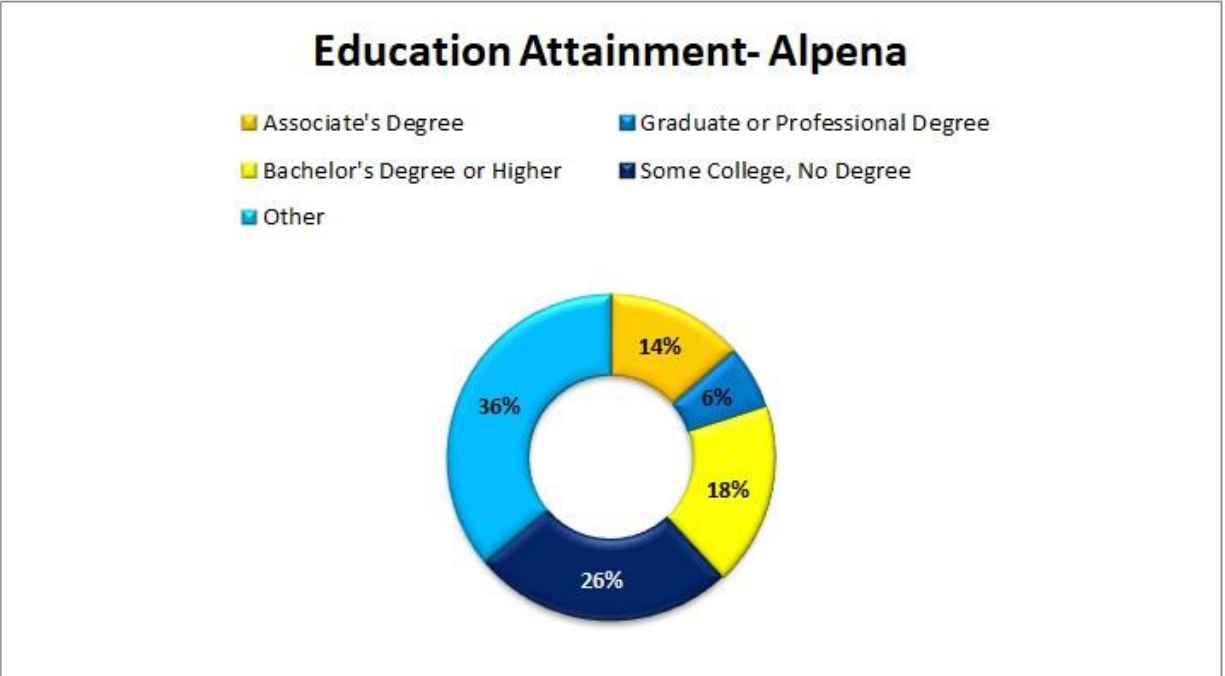


Figure 13: Education Attainment - Alpena County

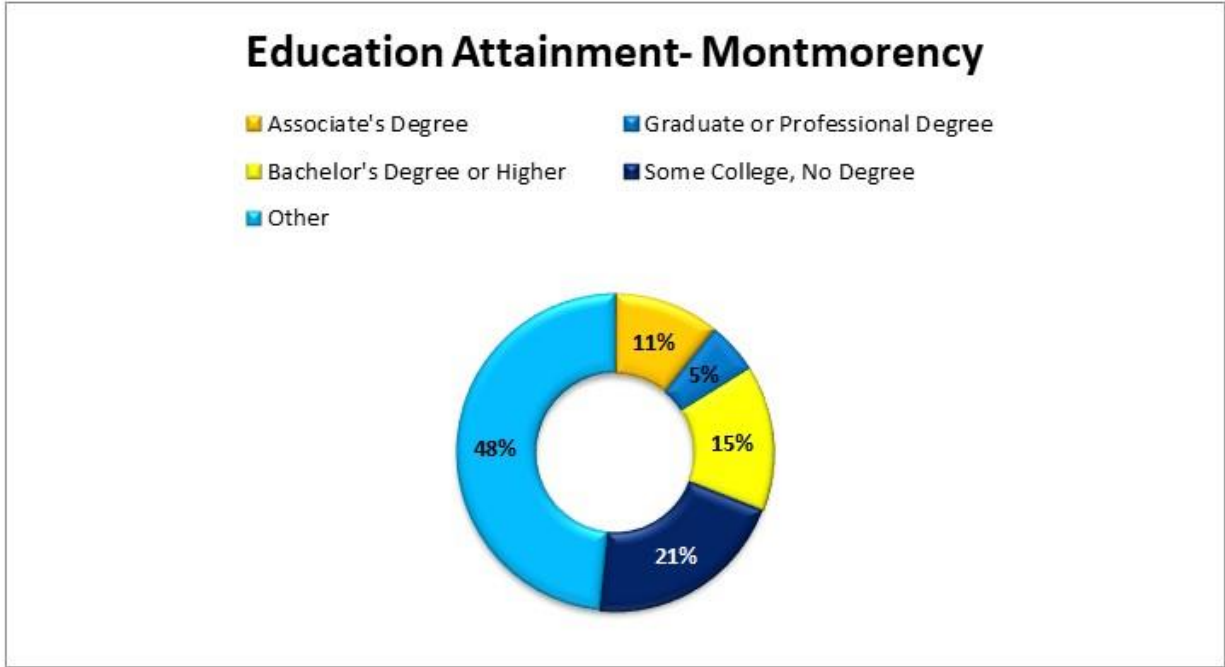


Figure 14: Education Attainment - Montmorency

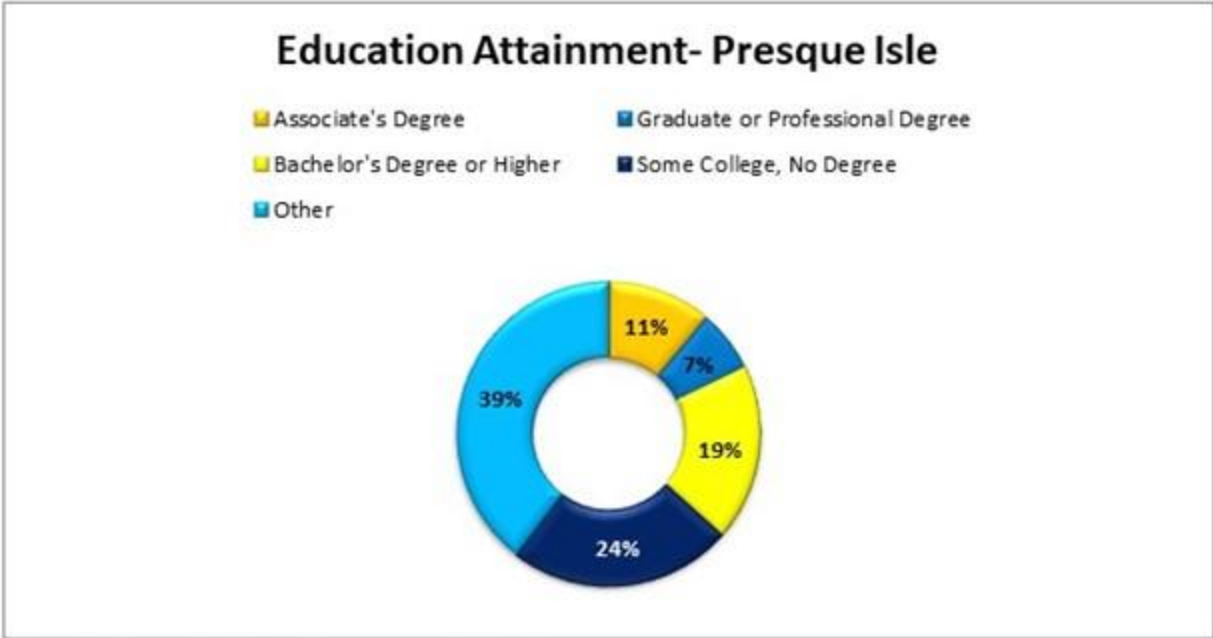


Figure 15: Education Attainment - Presque Isle

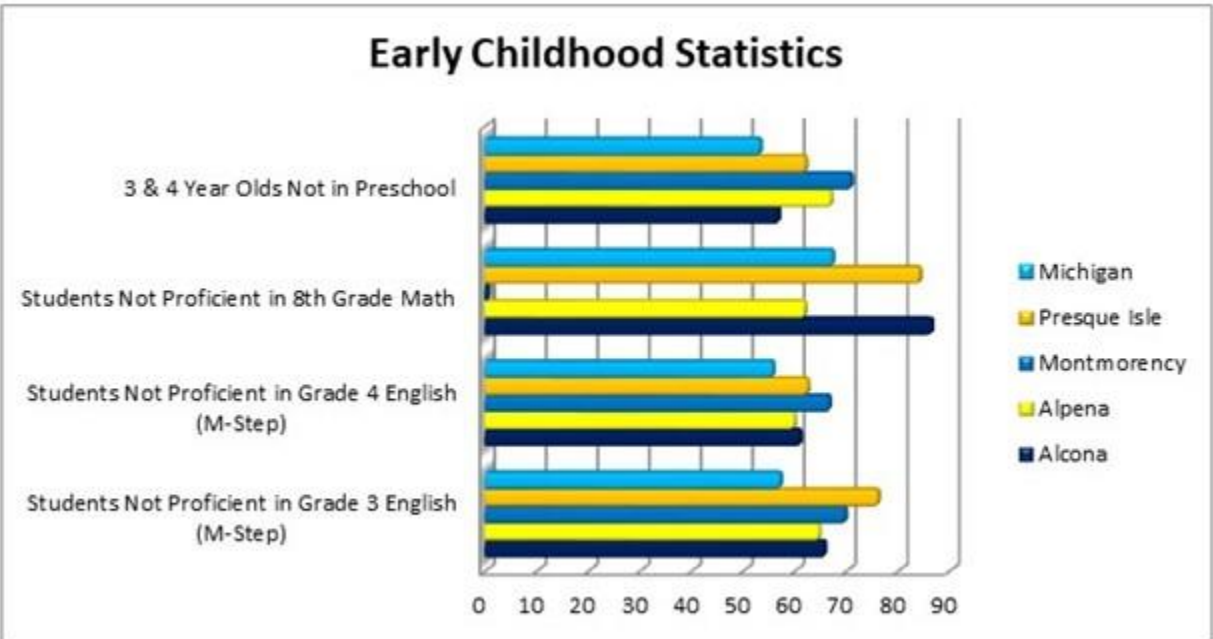


Figure 16: Early Childhood Statistics

Early childhood statistics for English proficiency in third and fourth graders fall outside of the Michigan average in all four counties. Three and four year old children not in preschool are also outside the Michigan average in all four counties. Additionally, Presque Isle and Alcona counties are less proficient in Math at the eighth grade level.

## Health Care Access and Quality

Access to health care focuses the community's ability to get the services, screenings and medications needed. Metrics analyzed include patient to provider ratios, vaccination rates, cancer incident rates, chronic conditions and mortality rates. Providers to patient ratios in all counties have improved minimally across the board, but still remain more than the Michigan ratios.

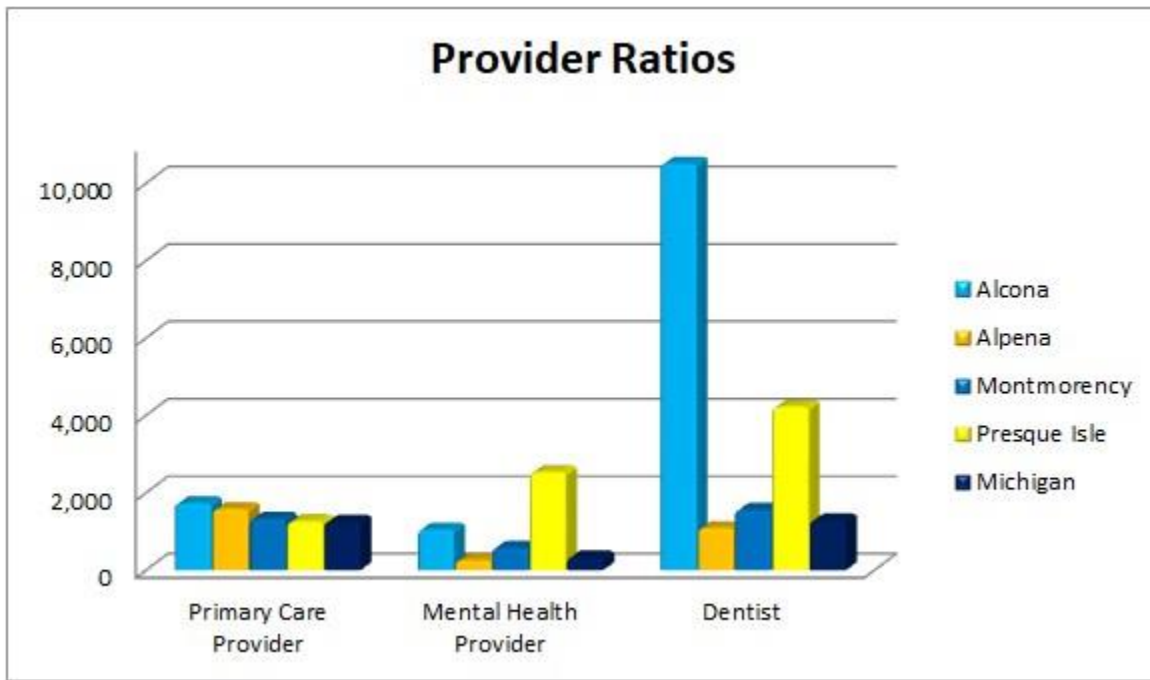


Figure 17: Patient to Provider Ratios

The population in the MyMichigan Medical Center Alpena service area consists of over 30 percent of people over the age of sixty-five. All cancer rates in this Medicare population are more than double the incidence rates in the general population. Mortality rates from all cancer diagnosis are two percent less to 21 percent higher than Michigan rates and 23 to 40 percent higher than Health People 2030 goals (122.7).

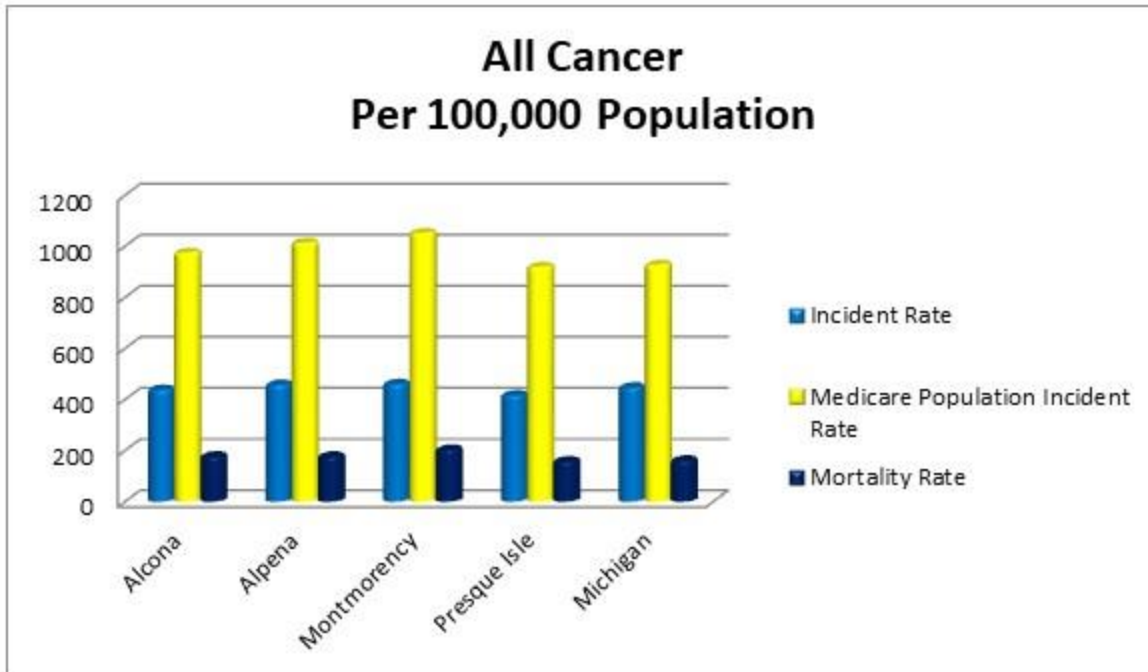


Figure 18: All Cancer Statistics

Colorectal cancer incidence rates are slightly higher than Michigan and mortality rates are moderately above those of Healthy People 2030. Lung cancer incidence and mortality rates are exponentially higher than Healthy People goals and variable when compared to Michigan.

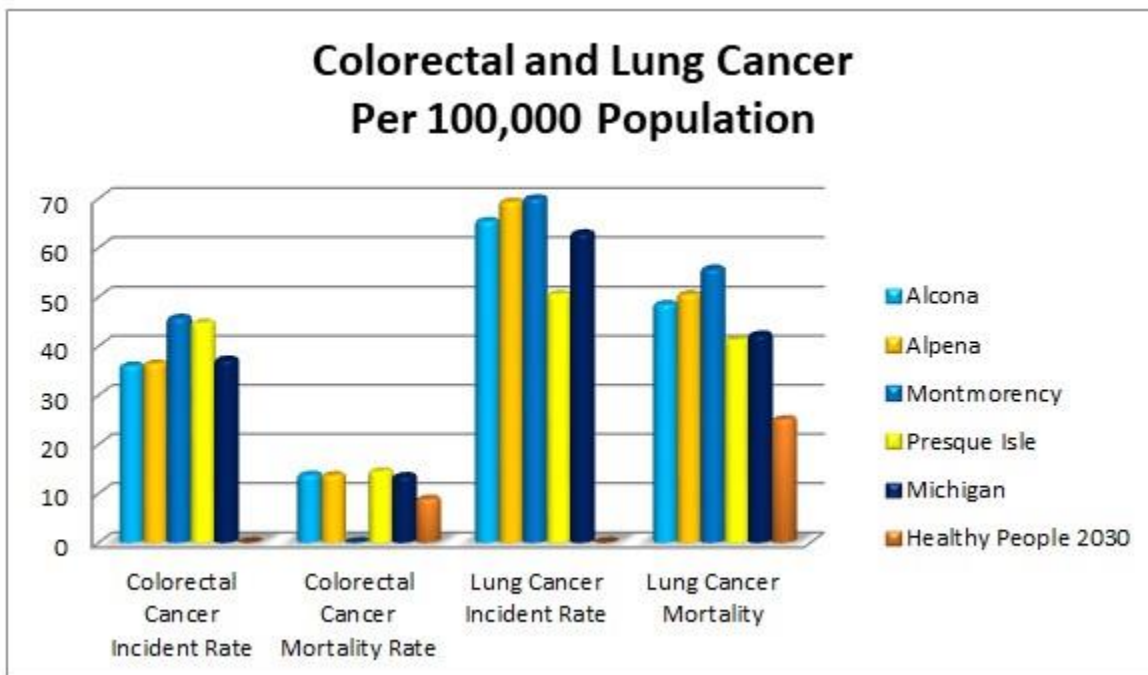


Figure 19: Colorectal and Lung Cancer Incident and Mortality Rates

Deaths from heart disease in the MyMichigan Medical Center Alpena service area are 29 to 47 percent higher than rates in Michigan and 81 to 86 percent higher than Healthy People 2030 goals. The most significant difference is in Alcona County with 509.3 deaths per 100,000 population. Stroke mortality rates are seven to 58 percent higher than Michigan rates and 47 to 76 percent higher than Healthy People 2030 goals. The most significant difference is in Montmorency County with 139.4 deaths per 100,000 population.

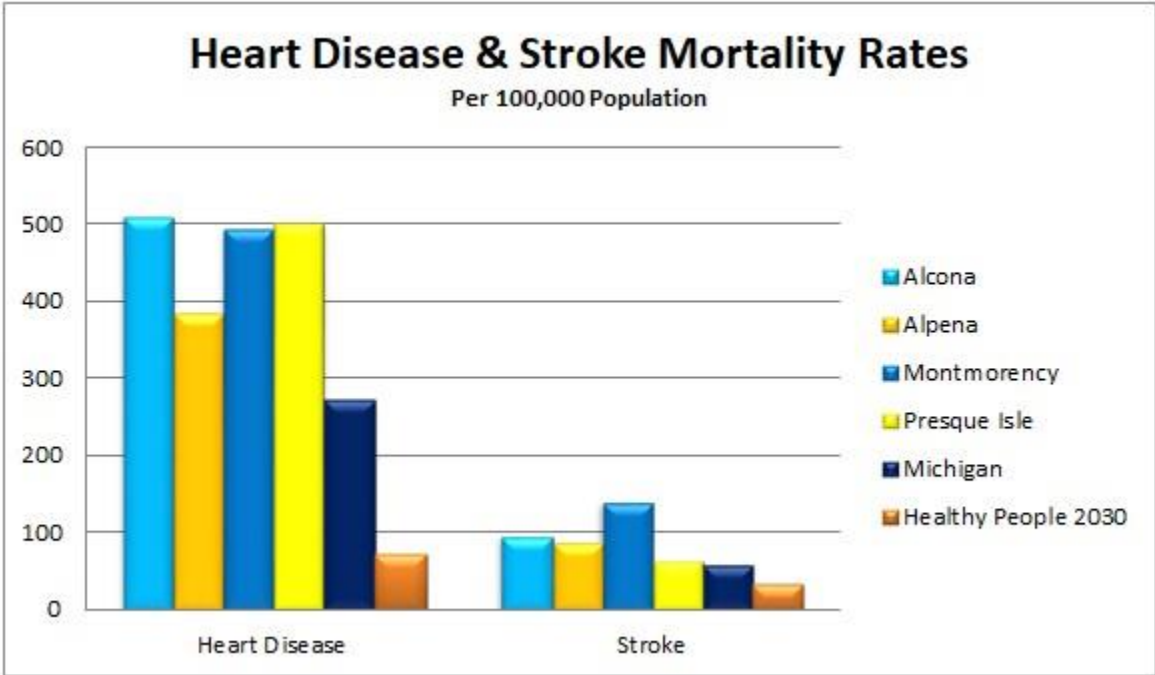


Figure 20: Heart Disease and Stroke Mortality Rates

Diabetes mortality rates are on average five percent higher than Michigan rates and 95 percent higher than Healthy People 2030 goals.

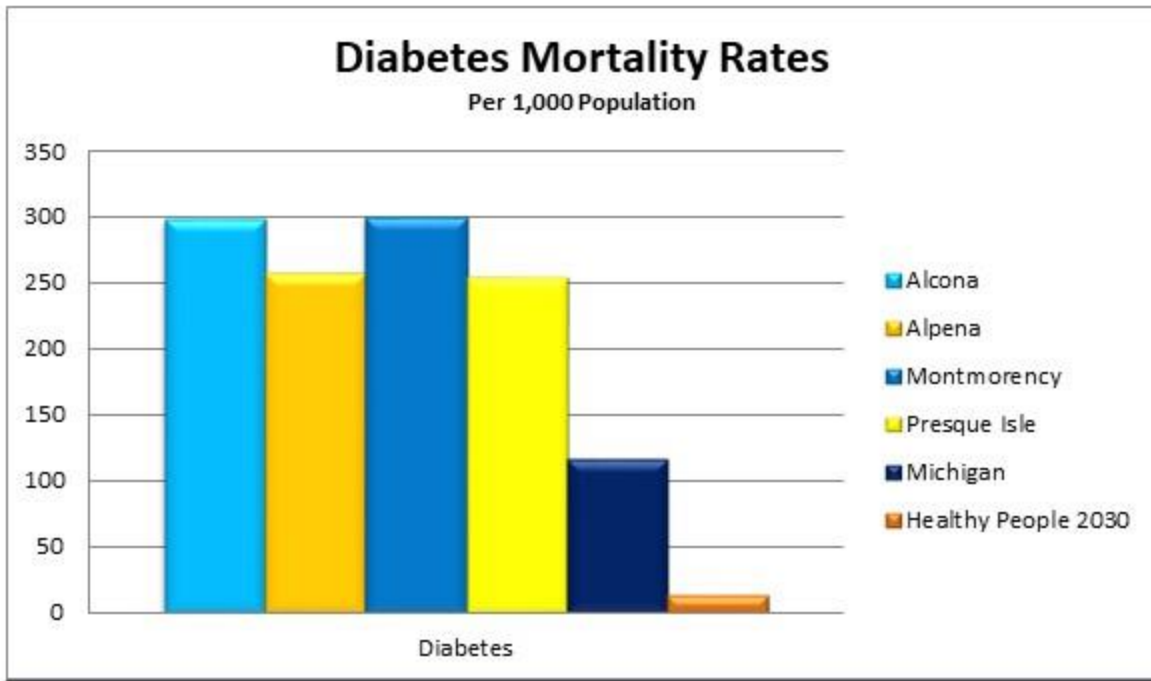


Figure 21: Diabetes Mortality Rates

Prevalence rates for the chronic diseases of diabetes, hypertension and kidney disease are higher than the Healthy People 2030 goals. Diabetes and hypertension are more prevalent in the MyMichigan Medical Center Alpena service area than in Michigan.

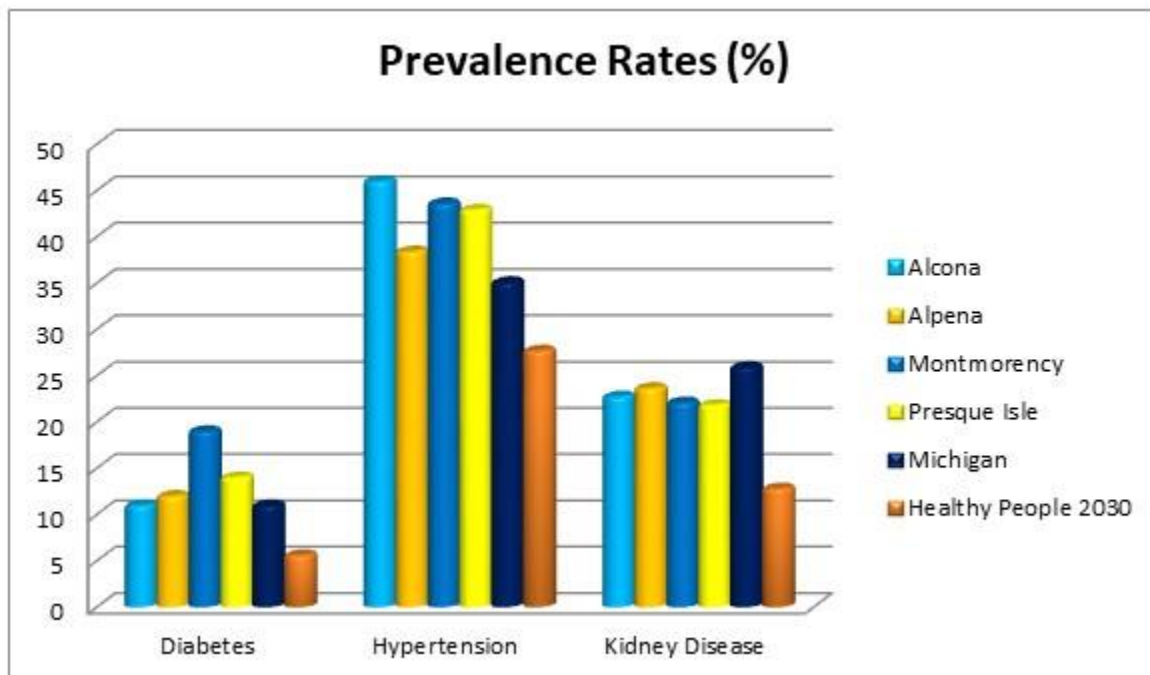


Figure 22: Diabetes, Hypertension and Kidney Disease Prevalence Rates



## Neighborhood and Built Environment

The places where people live, work, learn and play can greatly impact health and well-being. Some of the areas this category concentrates on are injury prevention, premature death, internet access, safe drinking water and smoking. Premature death is the measure of years of potential life lost (YPLL) before the age of seventy-five. On average, MyMichigan Medical Center Alpena counties experience 10 percent more YPLL than Michigan.

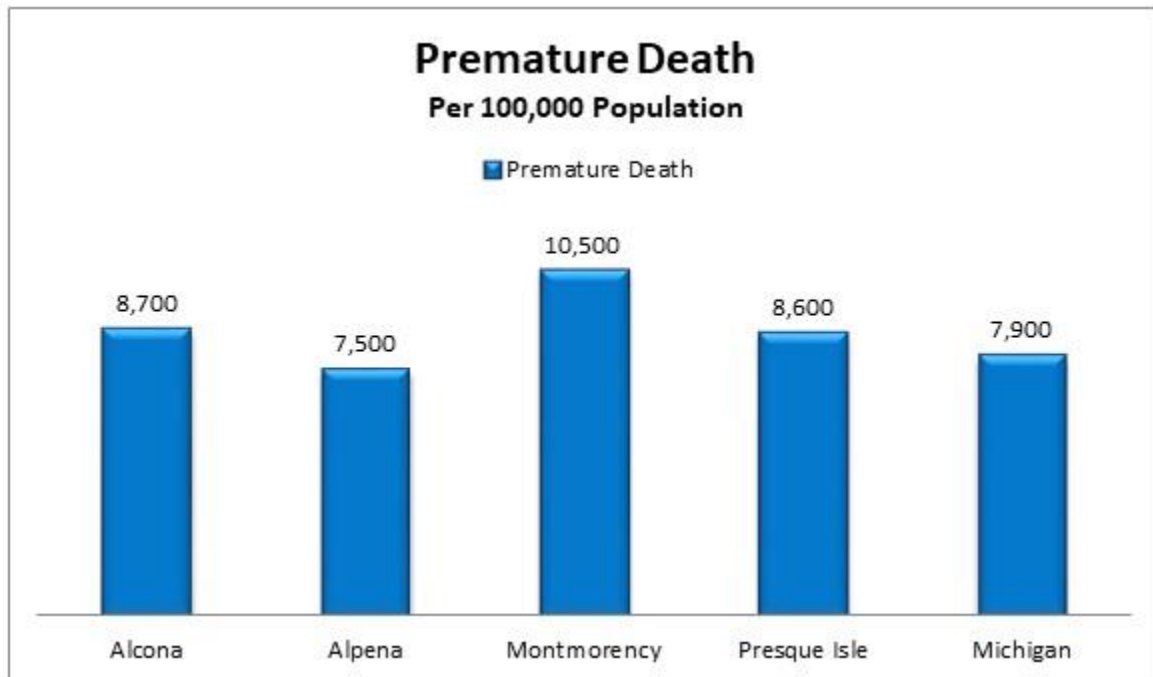


Figure 23: Premature Death

## Social and Community Context

People's ability to develop and maintain relationships with those around them can have a major impact on health and well-being. Those with positive interactions tend to have better health and safety outcomes than those that have negative interactions. This section of SDOH focuses on social and community support, the reduction of anxiety and depression, health literacy, resource referrals and the use of technology to communicate with health care providers.

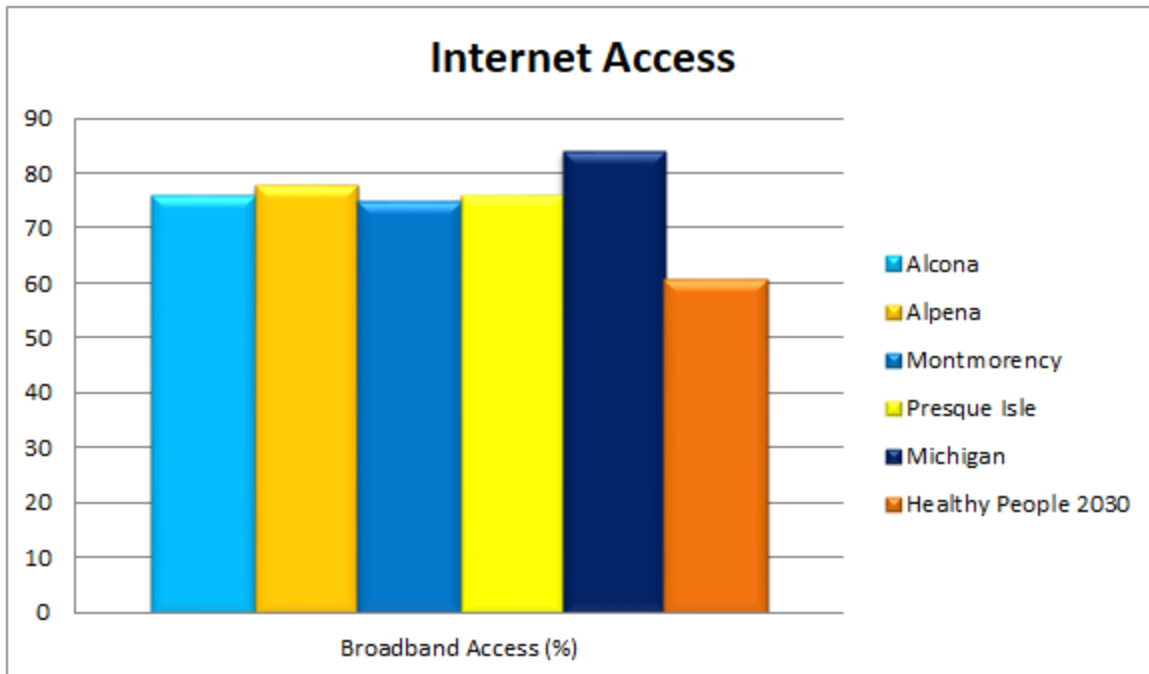


Figure 24: Internet Access

Internet access measures the percent of households in the service area that have access to broadband internet. The MyMichigan Medical Center Alpena service area exceeds the Healthy People 2030 benchmark, but is lower than the Michigan average.

Referral services are available through 211 in all counties served. The top three referral requests for each county were as follows: **Alcona**: Utilities, housing/shelter and health supportive services; **Alpena**: housing/shelter, utilities and food; **Montmorency**: utilities, health supportive services and housing/shelter; **Presque Isle**: utilities, health supportive services and housing/shelter.

# Health Behaviors

Physical activity is an essential component to the health and well-being of a person and the community. Access to exercise opportunities for all four counties is below the Michigan average of 77 percent. It is significantly lower in Montmorency County at 13 percent. Additionally, the percent of physical inactivity is eight percent higher on average than the Michigan rate of 20.8 percent.

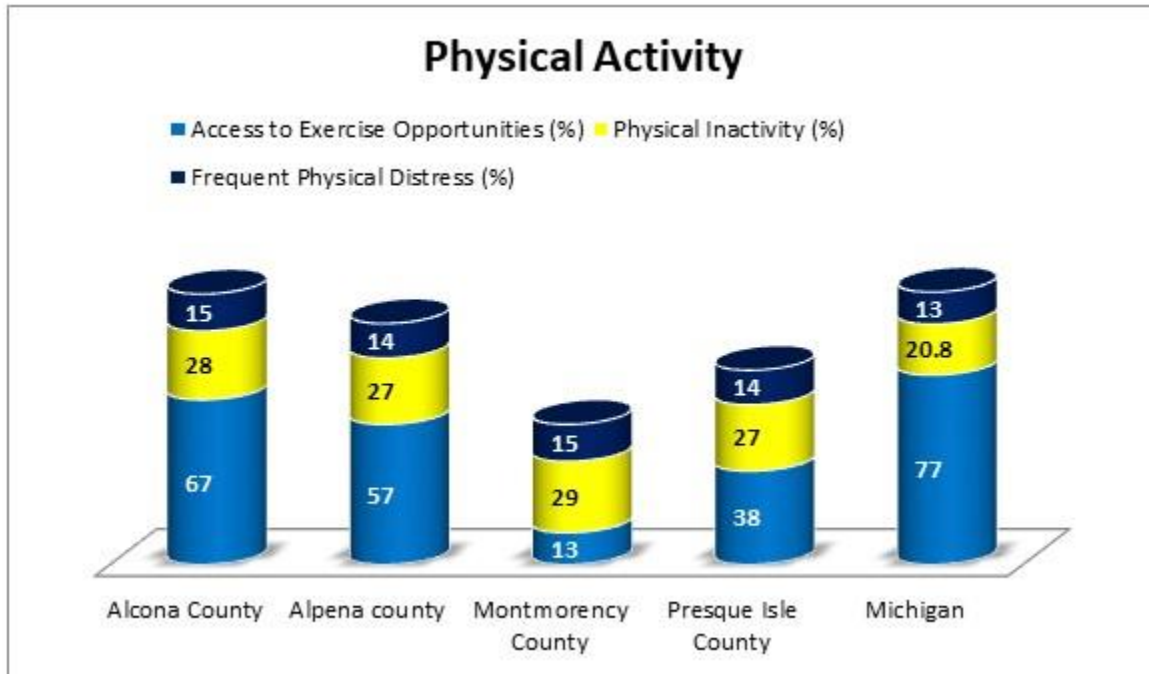


Figure 25: Physical Activity

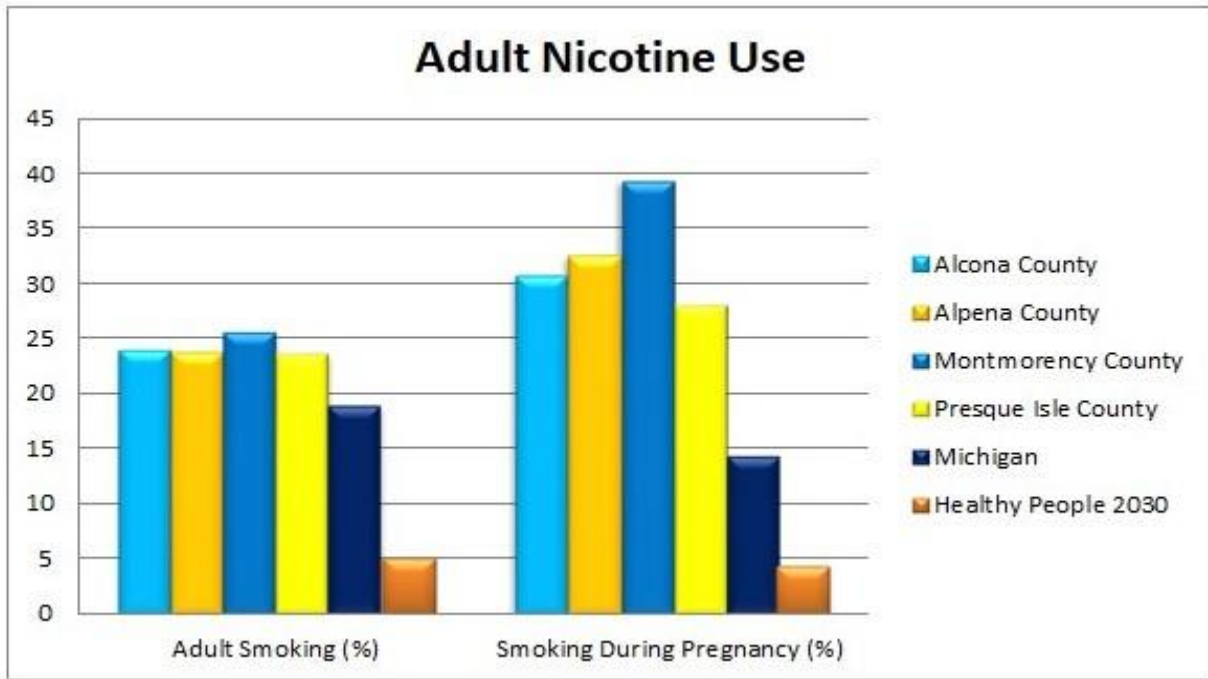


Figure 26: Adult Nicotine Use

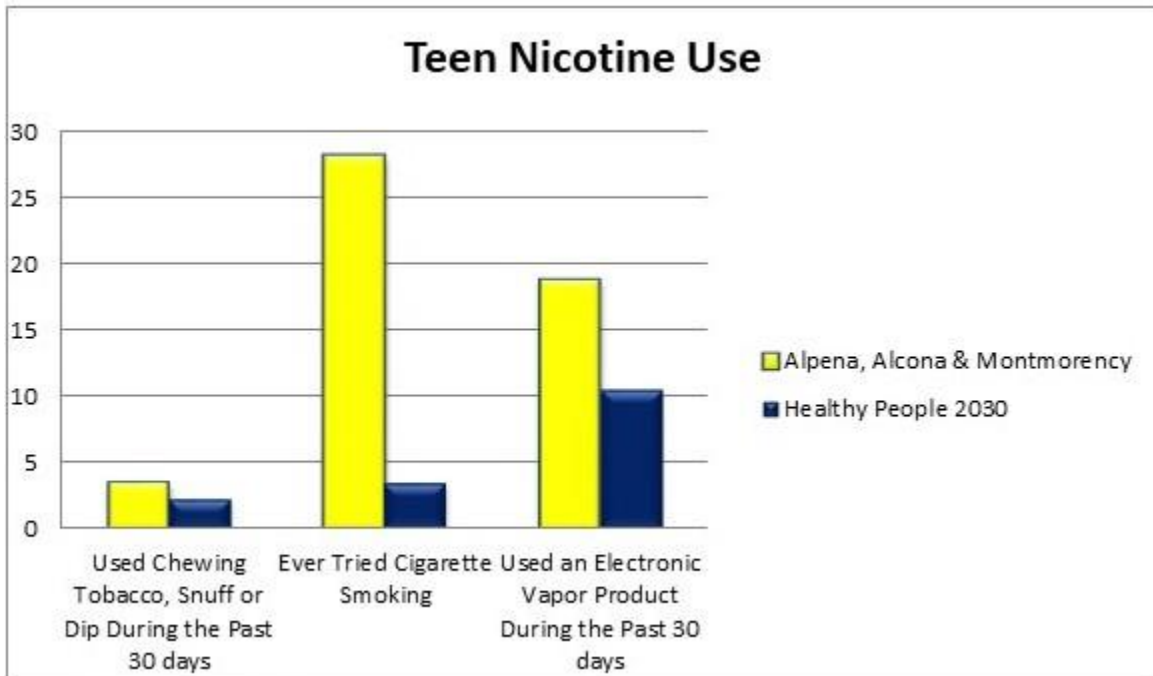


Figure 27: Teen Nicotine Use

The number of adults that smoke averages 25 percent across the four counties, which is slightly above the Michigan average of 20 percent and significantly higher than the Healthy People 2030 goal of five percent. Statistics for mothers who smoke during pregnancy are significantly higher than Michigan percentages and Healthy People 2030 benchmarks. Montmorency County exhibits nearly 35 percent more mothers who smoke during pregnancy when compared to Healthy People 2030 benchmarks. Alpena, Montmorency and Alcona Counties also show teen use of tobacco products above benchmarks.

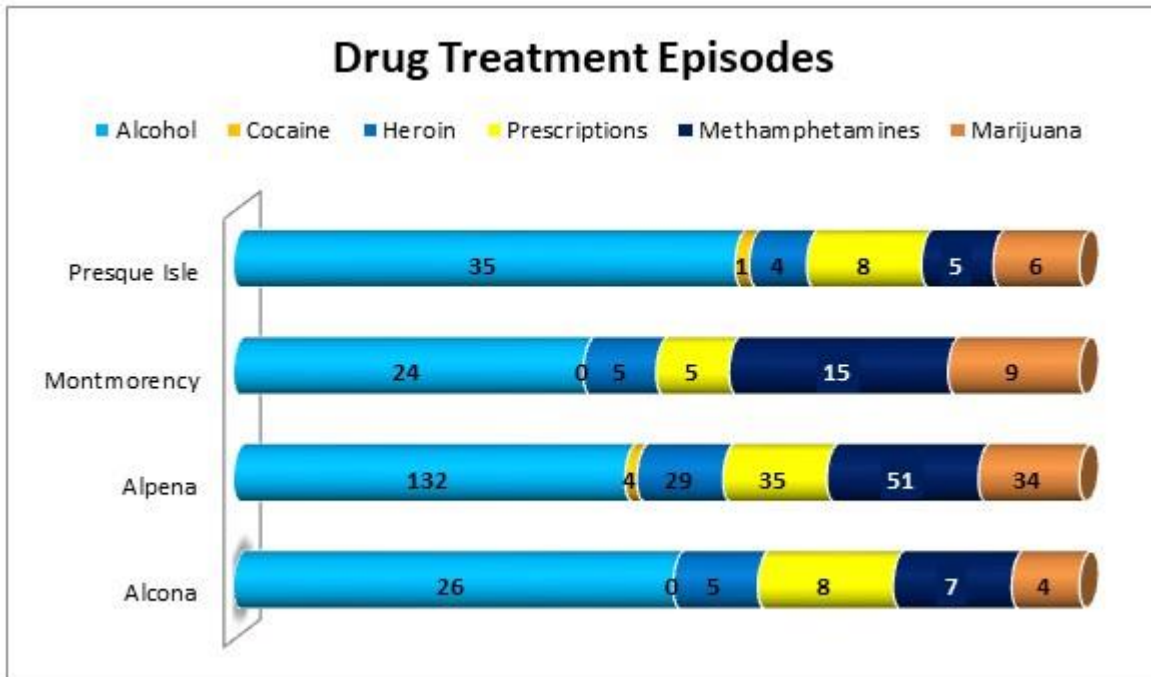


Figure 28: Drug Treatment Episodes

The most significant shift in drug treatment episodes across the service area is the increase in methamphetamine and the decrease in marijuana use.

# Chronic Disease Prevention

Chronic disease prevention focuses on inhibiting the development or slowing the progression of a disease which limits the negative impact on well-being. Prevention measures include identifying risk factors, action toward modifiable risk factors, screenings and routine follow-up with a provider.

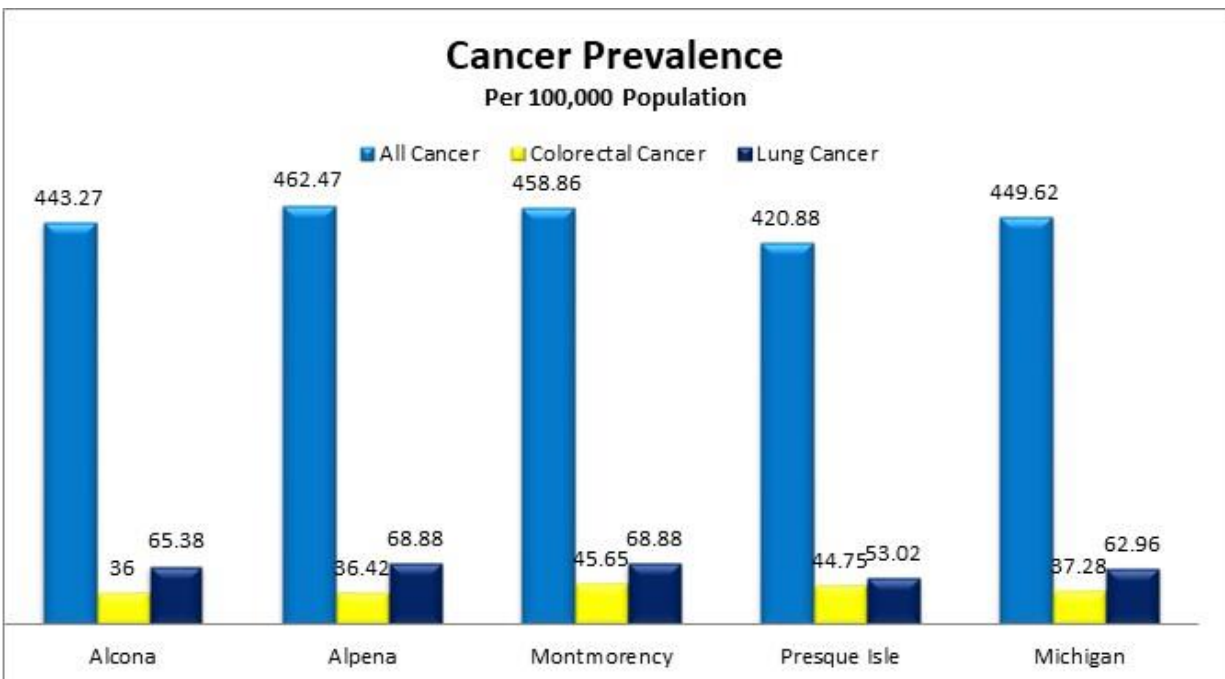


Figure 29: Cancer Prevalence

Prevalence measures the number of people within each 100,000 population that have a particular disease. An average of 446 per 100,000 people across the service area has a cancer diagnosis, 41 per 100,000 have colorectal cancer and 64 per 100,000 have lung cancer. The rates of colorectal and lung cancer are slightly higher than Michigan.

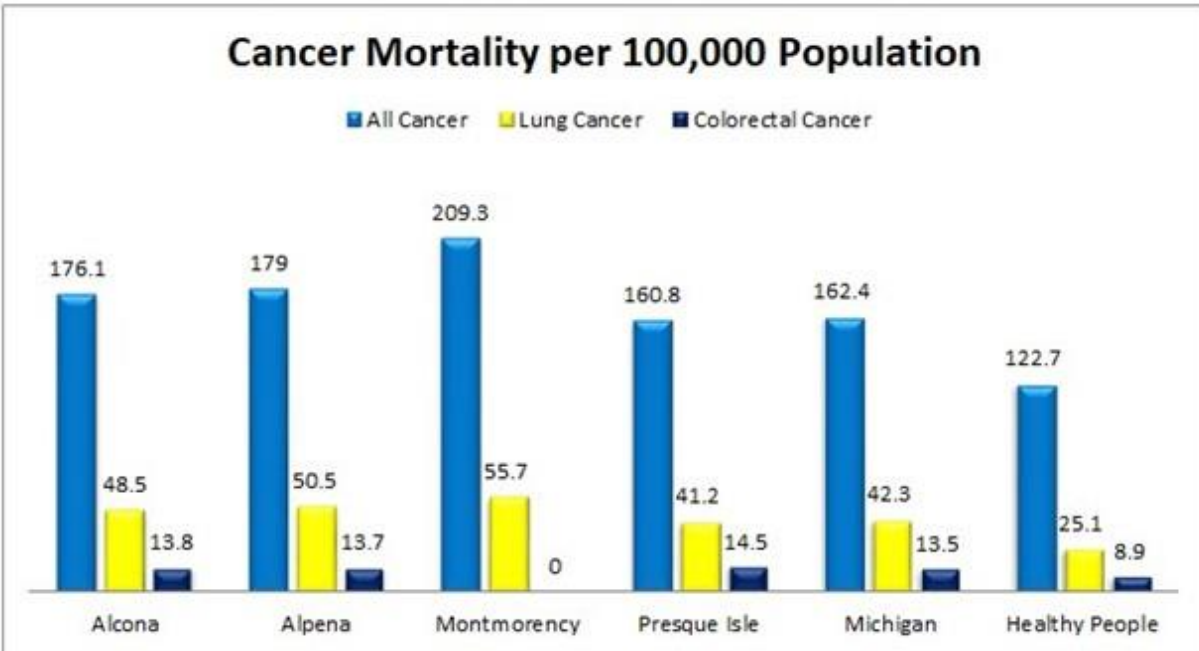


Figure 30: Cancer Mortality

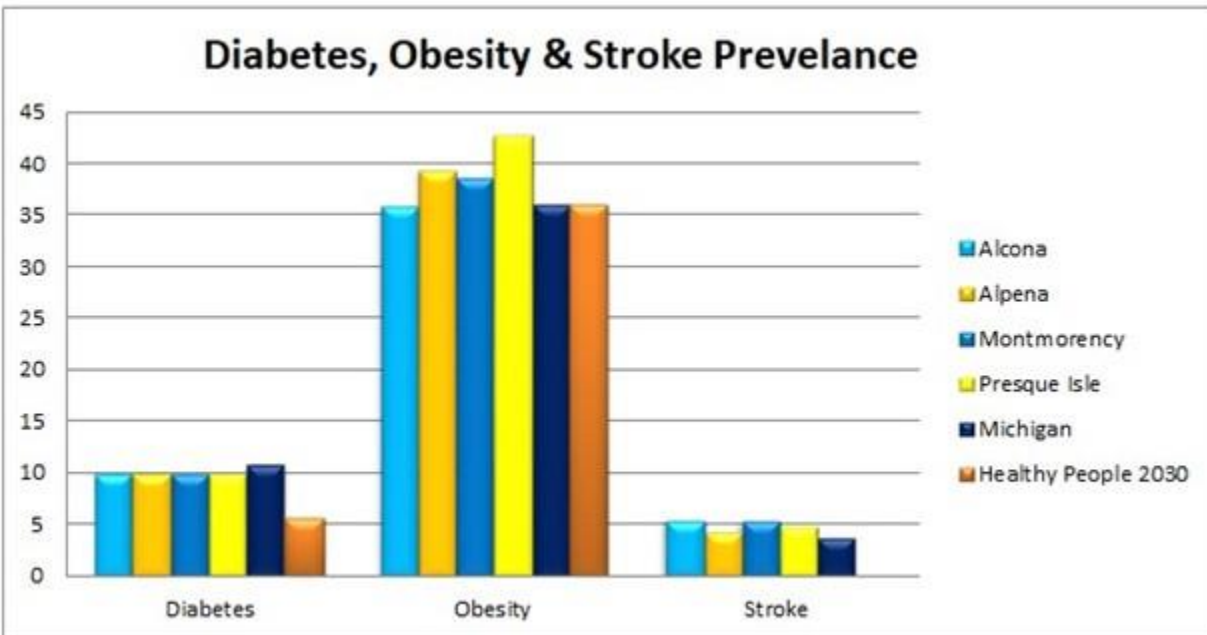


Figure 31: Diabetes, Obesity and Stroke Prevalence

The prevalence of diabetes is equally distributed across the service area at 10 percent of the population. Although lower than the Michigan prevalence rate, all four counties are nearly double the Healthy People 2030 benchmark.

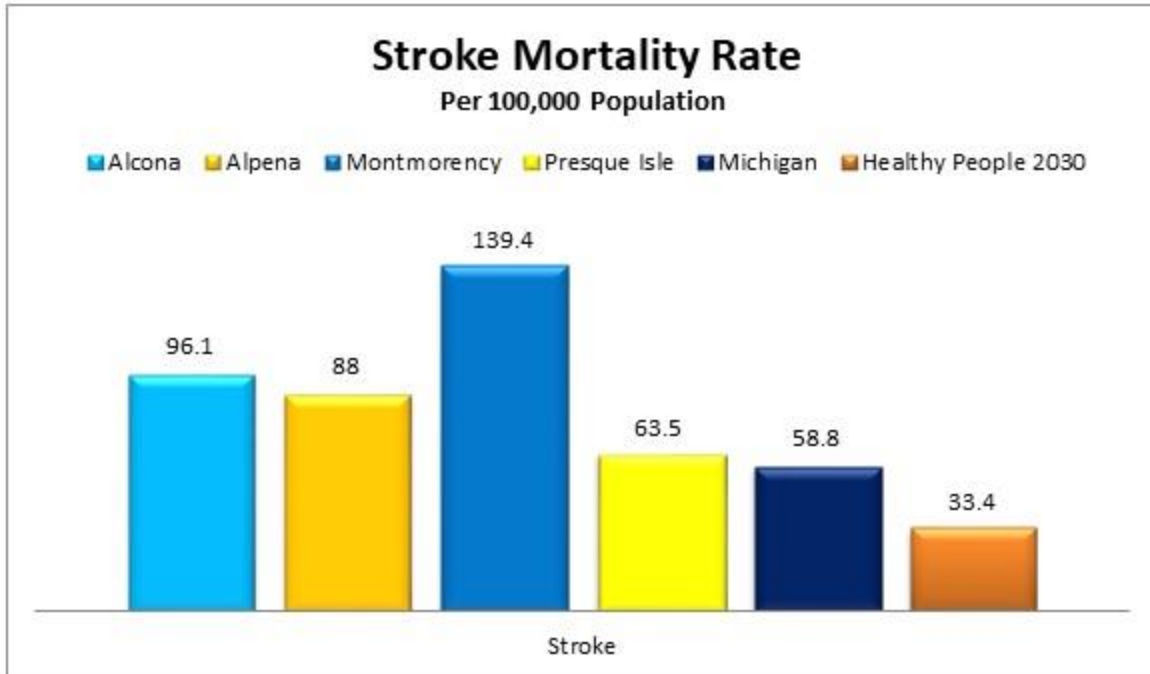


Figure 32: Stroke Mortality Rates

Mortality rates related to stroke are high when compared to Healthy People 2030 benchmarks. Montmorency County has a rate that is 76 percent higher than the benchmark and 58 percent higher than Michigan.



# Behavioral Health

Behavioral Health studies how behavior relates to one’s overall health and the ability to cope with difficult situations, manage emotions and make decisions. Studies have shown an increase in cases of mental health disorders and suicide rates. In the MyMichigan Medical Center Alpena service area, Alcona and Alpena Counties have higher rates of suicide.

Other measures related to behavioral health include adequate sleep, mental distress and chronic depression. Michigan averages 40 percent of adults who report insufficient sleep, 18 percent who experience frequent mental distress and 21 percent with chronic depression.

## Suicide Rate Per 100,000

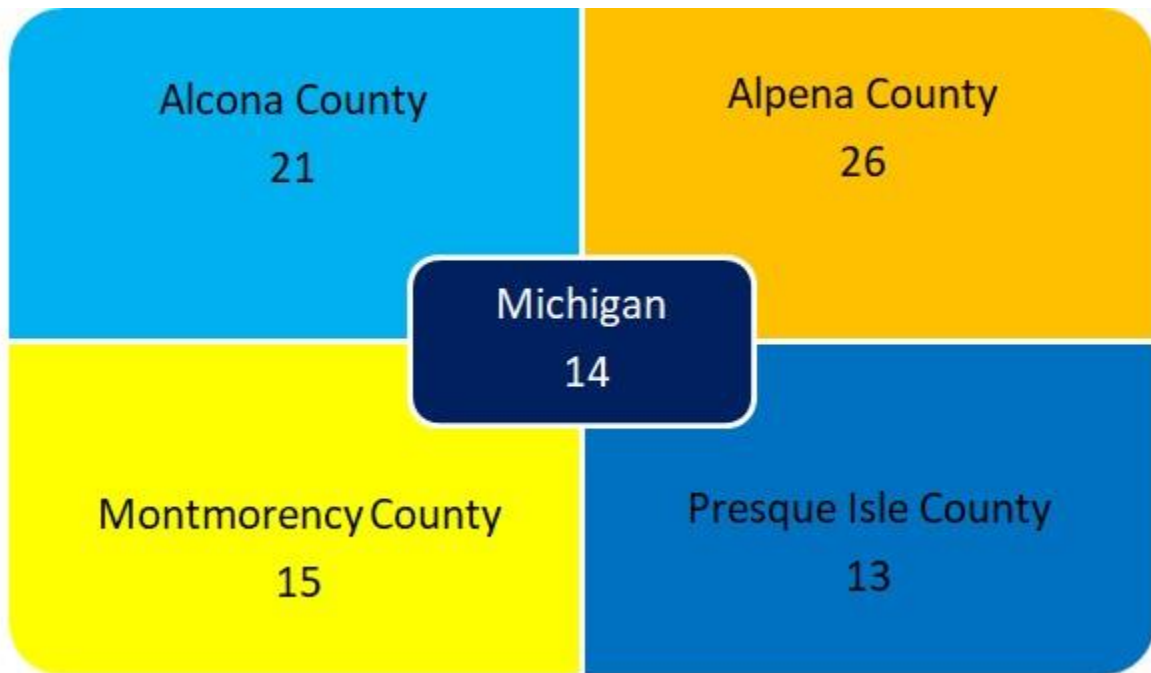


Figure 33: Suicide Rate per 100,000 Populations

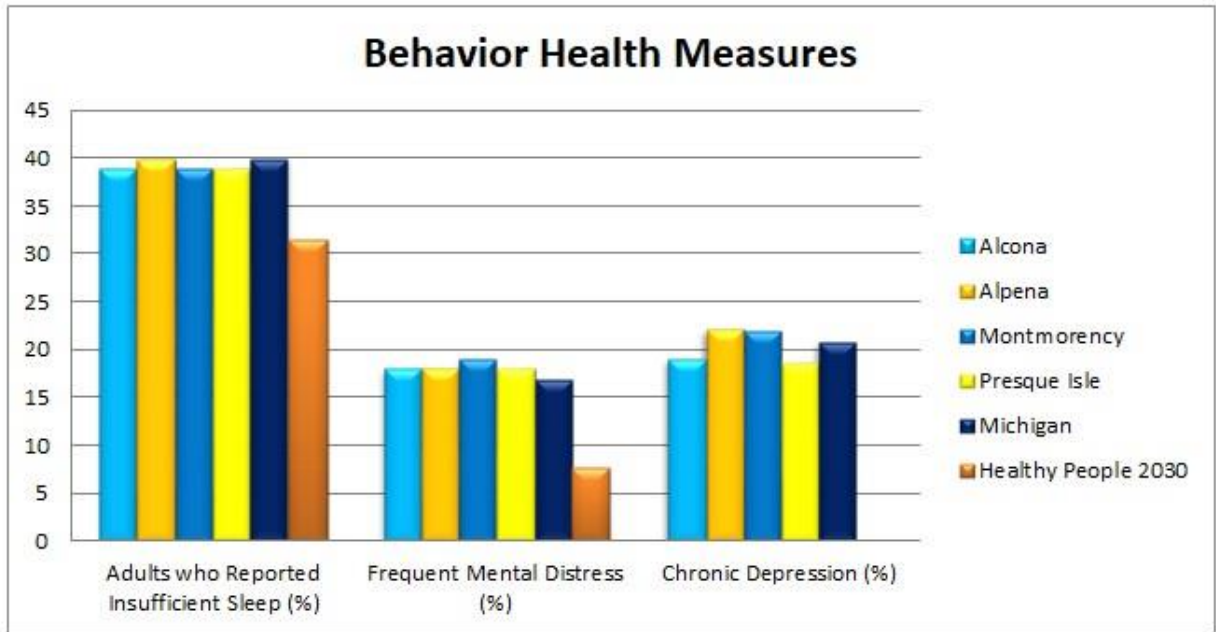


Figure 34: Behavioral Health Measures

# Prioritization Process

Once both the primary and secondary data was collected, community health needs were determined and prioritized by reviewing qualitative and quantitative data. For Stage I, the Community Health team reviewed the collected health indicator data and identified data that demonstrated poor performance against established benchmarks (i.e., Michigan state averages or Healthy People 2030 goals). Once these health needs were identified, the External Advisory assisted in theming and prioritizing the data points using the Hanlon Method.

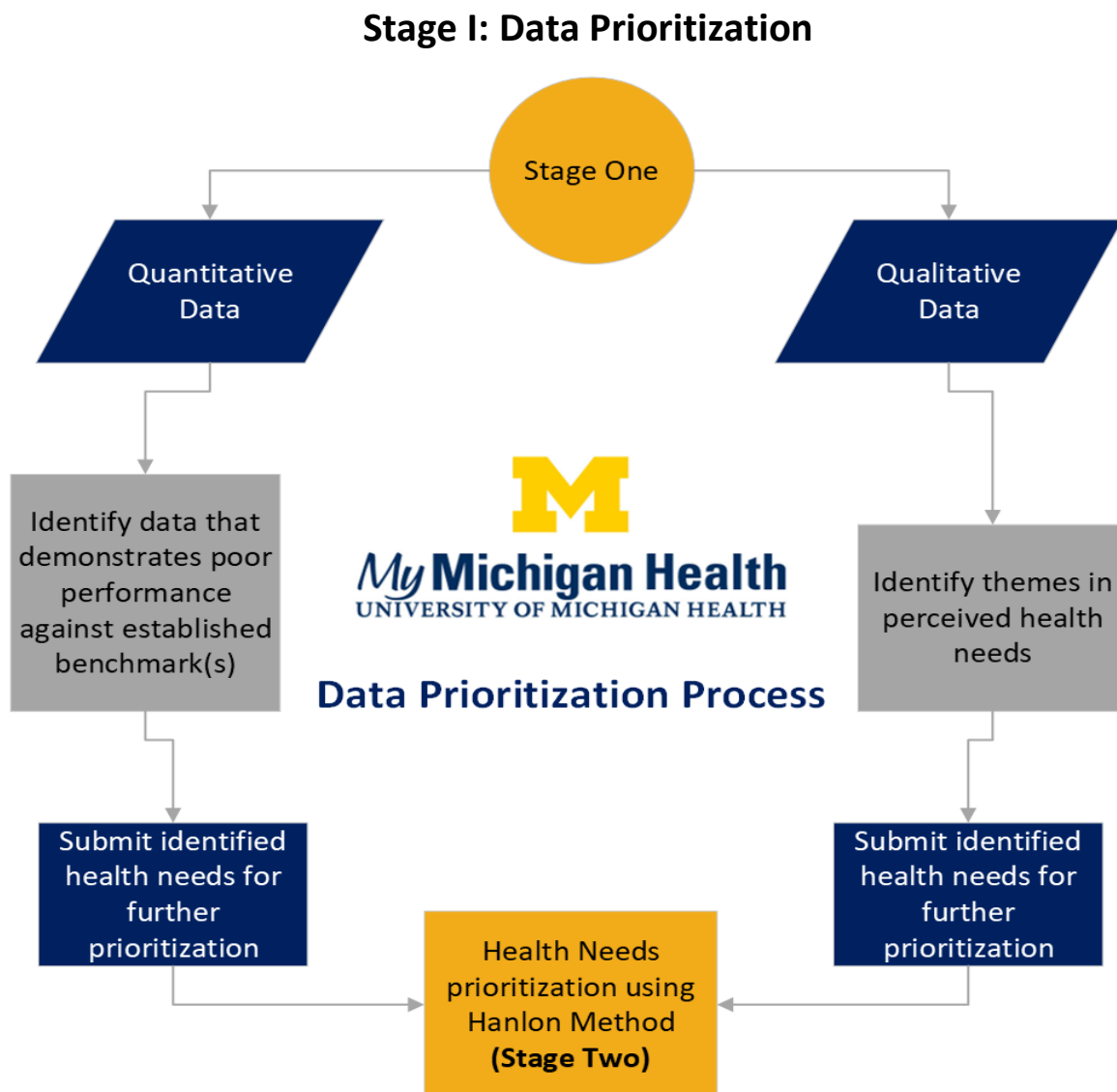


Figure 35: Data Prioritization Process

## CAUSES OF CHRONIC CONDITIONS

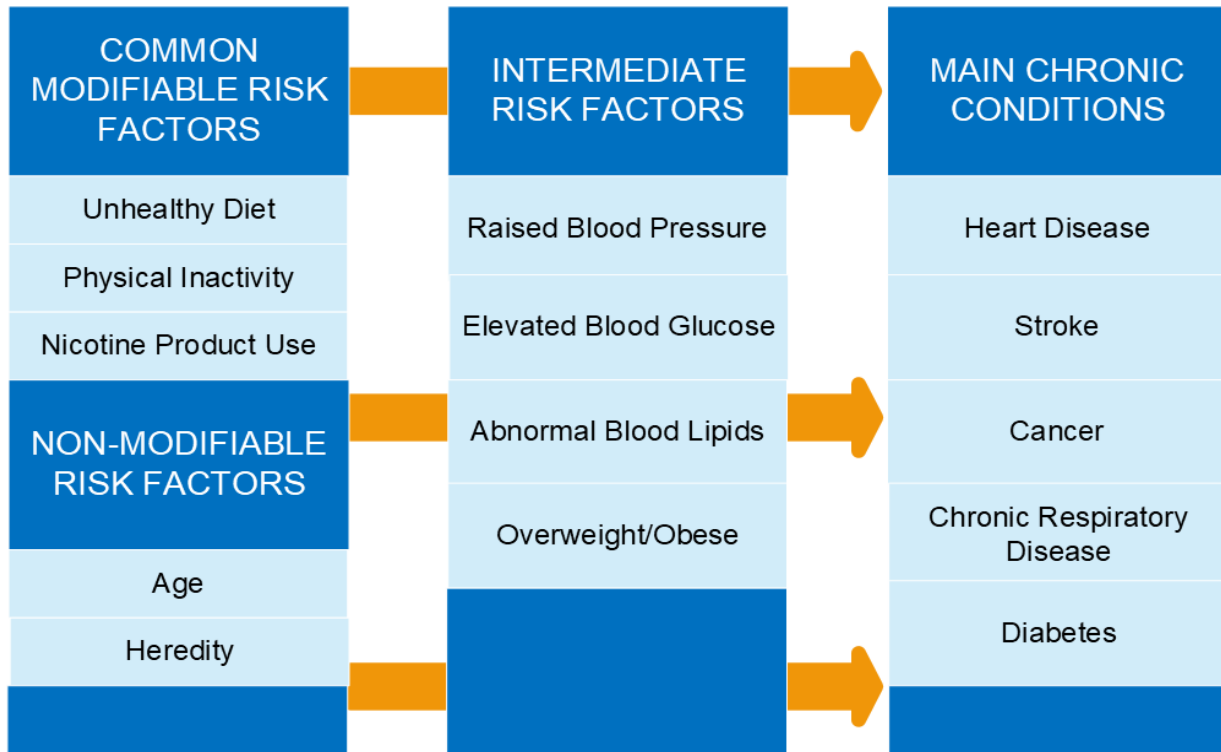


Figure 36: Causes of Chronic Conditions

## Stage II: Hanlon Method of Prioritization

Rating	Burden of Illness (% of population with health problem)	Burden of Death (seriousness of health problem)	Effectiveness of Interventions
9 or 10	>25%	Very Serious	<5% Effective
7 or 8	10% - 24.9%	Relatively Serious	5 – 19.99% Effective
5 or 6	1% - 9.9%	Serious	20 – 39.99% Effective
3 or 4	0.1% - 0.9%	Moderately Serious	40 – 59.99% Effective
1 or 2	0.01% - 0.09%	Relatively Not Serious	60 – 79.99% Effective
0	<0.01%	Not Serious	80 – 100% Effective

### Priority Score Calculation Formula

$$D = [A + (2 \times B)] \times C$$

Figure 37: Hanlon Method

## Hanlon Method Results

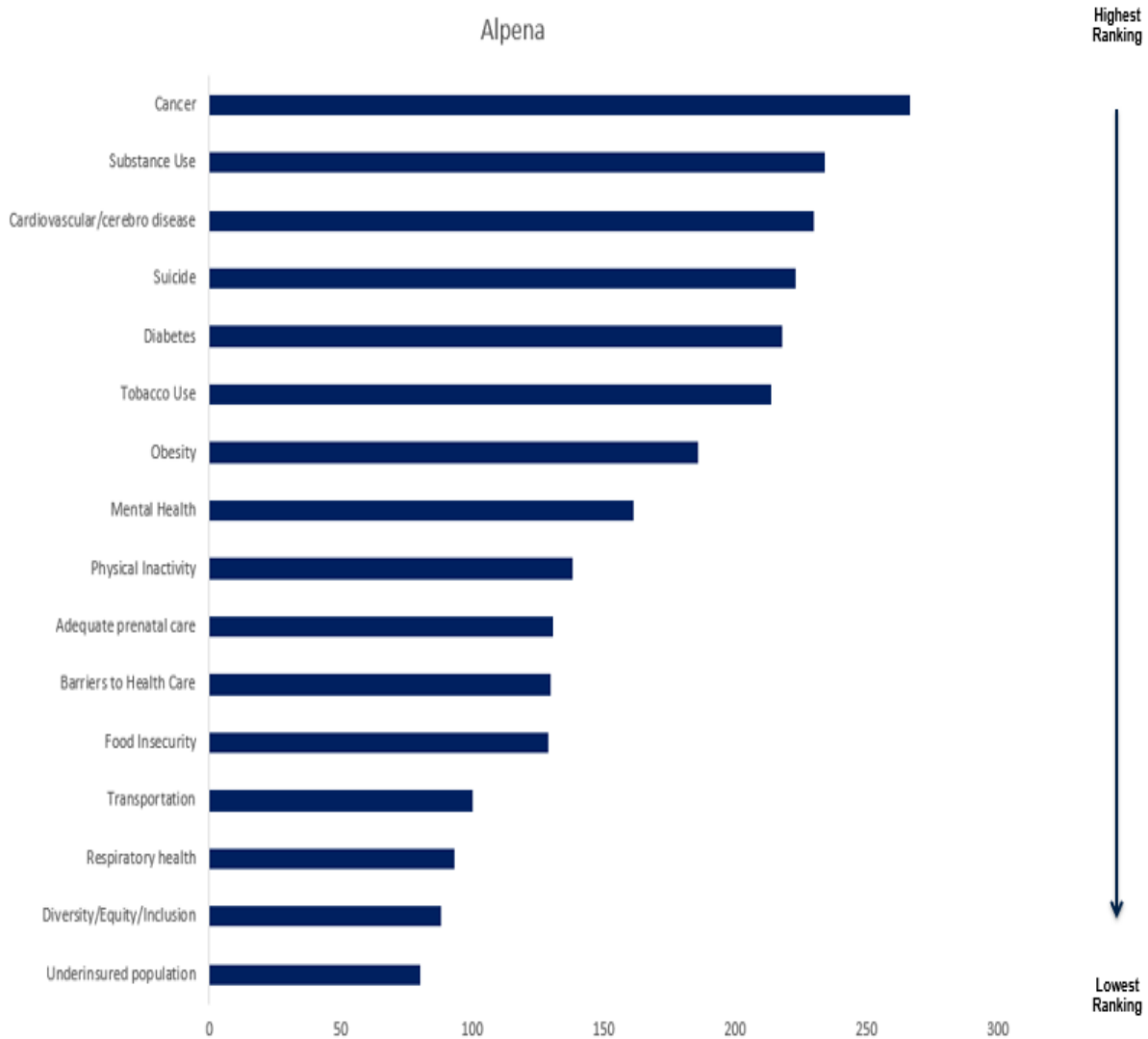


Table 2: Hanlon Method results

Further prioritization continues in order to develop the final focus areas. Advisory committees work together to narrow down focus areas based on modifiable risk factors that health needs have in common. Alpena and surrounding County’s high rates of Obesity, increasing rate of diabetes mortality, heart disease and cancer incidence rates coupled with decreasing rates of cancer screenings led to Chronic Disease Prevention as an area of focus. These chronic diseases have similar modifiable risk factors that allow us to develop strategies to impact many chronic diseases together. Similarly, increasing rates of suicide and substance use disorder, particularly in the youth population, fall within the umbrella of Behavioral Health with similar risk factors in youth assets and mental health needs. Final areas of focus were determined to be Chronic Disease Prevention and Behavioral Health.

# Improvement Plan

MyMichigan Medical Center Alpena built upon the Improvement Plan developed in 2019 to develop a comprehensive plan to address health concerns, all while upholding MyMichigan Health’s purpose statement, “Creating Healthy Communities – Together.” The underlying premise for each MyMichigan Health member in completing the Community Health Improvement Plan is shared ownership for community health and well-being. While our previous Community Health Needs Assessment (2019) helped us to identify focus areas for health improvement, the IRS legislation mandating collaborative efforts provided an opportunity to revisit our needs assessment, strategic planning process and partnerships.

## 2022 Community Health Needs Assessment

### Focus Areas

Chronic Disease Prevention

Behavioral Health

The plan that follows includes goals and evidence-based strategies for the focus areas determined by MyMichigan Health’s Community Health team, solicited input from the Alpena External and Internal Advisory Committees and approved by MyMichigan Medical Center Alpena’s Board of Directors on April 29, 2022.

# Appendix A: Partners

Alpena Chamber of Commerce

Community Foundation of Northeastern Michigan

United Way of Northeast Michigan

Catholic Human Services

Senior Services

Friends Together

Food Bank of Eastern Michigan

The Salvation Army

Community Mental Health

Partners in Prevention

District Health Departments #2 & #4

211 of Northeast Michigan

Alpena Public Schools

Alpena Community College

Northeast Michigan Community Service Agency

# Appendix B: Data Table

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People	Source	Date
Economic Stability	Economic Stability - General	Adults 65+ Living Below Poverty Level	8.60%	9.00%	6.80%	6.90%	8.40%	*	American Community Survey	2019
		% ALICE	30%	27%	31%	29%	25%	*	United Way	2019
		% Poverty	16%	16%	14%	13%	13%	8%	United Way	2019
		ALICE Level Households Above Poverty, but Less Than Basic Cost of Living	2,670	7,375	2,444	3,346	499,810	*	United Way	2019
		ALICE Total Households	4,988	12,752	4,452	5,797	1,004,047	*	United Way	2019
		Children Living Below Poverty Level	24.50%	16.10%	30.90%	19.70%	17.60%	*	American Community Survey	2019
		Families Living Below Poverty Level	17%	14.30%	16.60%	13.10%	14.40%	*	American Community Survey	2019
		Households with Cash Public Assistance	166	396	96	108	92,166	*	American Community Survey	2019
		Median Household Income	40,484	43,463	41,772	47,948	57,144	*	American Community Survey	2019
		Per Capita Income	25,636	25,597	23,958	28,103	32,892	*	American Community Survey	2019
		Persons in Poverty	14%	15.60%	15.50%	13.10%	12.60%	8%	U.S. Census Bureau	2019
		Unemployment Rate	7.60%	6%	8%	13%	5%	25%	United Way	2019
		Housing and Homes	Renters Spending 30% or More of Household Income on Rent	37.70%	36.90%	43%	34.80%	45.10%	25.5%	American Community Survey
	Severe Housing Problems		11%	11%	13%	10%	15%	*	County Health Rankings	2013-2017
	Economic Stability	Child Food Insecurity Rate	20.40%	14.90%	24.80%	18.80%	14.20%	0%	Kids Count	2019
		Food Environment Index (0 worst to 10 best)	7.3	7.8	7.3	7.1	7.0	*	County Health Rankings	2015 & 2018
		Food Insecurity	16%	14%	17%	15%	14%	6%	County Health Rankings	2018
		Food Stamp/SNAP Benefits in the Past 12 Months	13.60%	15.60%	12.40%	10%	13.30%	*	American Community Survey	2019
		Grocery Store Density (per 1,000 population)	0.29%	0.31%	0.33%	0.55%	*	*	US Department of Agriculture; Food Atlas	2015




		Limited Access to Healthy Foods	4%	2%	1%	8%	6%	*	County Health Rankings	2015	
		SNAP Participants (per 10,000 population)	13.60%	15.60%	12.40%	10%	13.30%	*	Community Commons		
		Students Eligible for Free Lunch Program	68%	58%	67%	57%	50%	*	County Health Rankings	2018-2019	
		WIC- Authorized Food Store Access (per 1,000 population)	0.19%	0.14%	0.22%	0.24%	*	*	US Department of Agriculture	2016	
	Workplace	Driving Alone to Work	80%	85.50%	81.70%	82%	82.30%	*	U.S Census Bureau	2019	
		Mean Travel Time to Work (Minutes)	25.8	16.7	24.5	25.1	24.6	*	American Community Survey	2019	
		People that Use Public Transportation to Get to Work	0.20%	0.80%	0.10%	0.10%	1.30%	5.3%	U.S Census Bureau	2019	
		People that Walk to Work	1.60%	0.80%	2.60%	3%	2.20%	26.8%	U.S Census Bureau	2019	
	Education Access and Quality	Adolescents	9th to 12th Grade, No Diploma	7.80%	5.90%	10.20%	7.40%	6.30%	*	U.S Census Bureau	2019
			Disconnected Youth	*	8%	*	11%	7%	10.1%	County Health Rankings	2015-2019
			High School Dropouts	*	8.90%	14.80%	*	7.80%	*	Kids Count	2020
			High School Graduate	79.20%	63.70%	82.90%	69.80%	59.30%	90.7%	American Community Survey	2019
			High School Graduation Rate	89%	92%	87%	90%	82%	*	County Health Rankings	2015-2019
Less than 9th Grade			2.90%	2.30%	2.80%	3%	2.90%	*	U.S Census Bureau	2019	
Students in Special Education		12%	13.30%	15.90%	8.50%	14.40%	*	Kids Count	2020		
Adults		Associate's Degree	36.90%	63.70%	39.40%	51.60%	55.60%	*	U.S Census Bureau	2019	
		Graduate or Professional Degree	5.70%	6.60%	5.10%	7%	11.40%	*	U.S Census Bureau	2019	
		People 25+ with Bachelor's Degree or Higher	16.90%	11.40%	8.60%	10.90%	29.10%	*	American Community Survey	2019	
		Some College, No Degree	28.40%	25.90%	20.70%	23.80%	23.40%	*	U.S Census Bureau	2015-2019	
Children		3 and 4 Year Olds Not in Preschool	55.70%	69.10%	53.40%	60.50%	52.50%	*	Kids Count	2019	
		Students Not Proficient in Grade 3 English (M-Step)	65.80%	64.70%	69.80%	76.10%	57.20%	41.5%	Kids Count	2021	













Determinants	Demographics	Female Population	49.7%	50.6%	49.0%	50.2%	50.7%	*	County Health Rankings	2019
		Male Population	50.3%	49.4%	51.0%	49.8%	49.3%	*	County Health Rankings	2019
		Overall Population	10,495	28,447	9,434	12,380	10,077,331	*	U.S. Census Bureau	2020-2021
		Population Age Over 65	36.1%	23.9%	32.8%	32.5%	17.7%	*	U.S. Census Bureau	2020-2021
		Population Age Under 18	12.6%	18.7%	14.8%	15.5%	21.5%	*	U.S. Census Bureau	2020-2021
		Population American Indian or Alaskan Native	0.7%	0.2%	0.8%	1.0%	0.7%	*	U.S. Census Bureau	2020-2021
		Population Black or African American	0.5%	1.1%	0.6%	0.6%	14.1%	*	U.S. Census Bureau	2020-2021
		Population Hispanic or Latino	1.6%	1.5%	1.3%	1.5%	5.3%	*	U.S. Census Bureau	2020-2021
		Population White (Non Hispanic)	96.8%	96.9%	96.6%	96.5%	79.2%	*	U.S. Census Bureau	2020-2021
	Health Care Access and Quality - General	Adults 65+ Living Alone	19.10%	13.70%	15.50%	14.70%	11.90%	*	U.S. Census Bureau	2019
		Health Factors	48	32	73	34	*	*	County Health Rankings	2021
		Health Outcomes	68	27	70	55	*	*	County Health Rankings	2021
		People with Health Insurance	95.40%	94.60%	92.30%	93.10%	94.50%	92.1%	American Community Survey	2019
		Poor or Fair Health	20%	19%	21%	19%	18%	*	County Health Rankings	2018
		Uninsured Adults	10%	7%	9%	9%	8%	7.9%	County Health Rankings	2018
		Uninsured Children	5%	3%	3%	5%	3%	*	County Health Rankings	2018
		Uninsured Seniors	0%	0.50%	0%	0.10%	0.60%	*	American Community Survey	2019
		All Cancer Incident Rate (per 100,000 population)	439.5	459.4	462	417.6	448.8	*	National Cancer Institute	2014-2018
		All Cancer Medicare Population Incident Rate (per 100,000 population)	974.6	1013.4	1051.6	919.3	927.5	*	Centers for Medicare and Medicaid Services	
All Cancer Mortality Rate (per 100,000 population)	178.7	178.4	204.9	159.3	162.7	122.7	National Cancer Institute	2015-2019		

Cancer	Breast Cancer Incident Rate (per 100,000 population)	98.7	109.4	110.5	88.7	123.1	*	National Cancer Institute	2014-2018
	Breast Cancer Mortality Rate (per 100,000 population)	*	20.2	*	*	20.4	15.3	National Cancer Institute	2015-2019
	Colorectal Cancer Incident Rate (per 100,000 population)	36	36.4	45.7	44.7	37.2	*	National Cancer Institute	2014-2018
	Colorectal Cancer Mortality Rate (per 100,000 population)	13.8	13.7	*	14.5	13.5	8.9	National Cancer Institute	
	Lung Cancer Incident Rate (per 100,000 population)	65.4	69.3	70	50.5	62.9	*	National Cancer Institute	2014-2018
	Lung Cancer Mortality Rate (per 100,000 population)	48.5	50.5	55.7	41.2	42.3	25.1	National Cancer Institute	
	Prostate Cancer Incident Rate (per 100,000 population)	61.1	79.1	71.5	84.3	107.3	*	National Cancer Institute	
	Prostate Cancer Mortality Rate (per 100,000 population)	*	14.4	*	*	18.4	16.9	National Cancer Institute	
Cardiovascular	Atrial Fibrillation	9.37%	9.20%	8.50%	7.90%	8.38%	*	Centers for Medicare and Medicaid Services	2018
	Heart Disease (3 Year average)						3.5 mean score	County Health Rankings	
	Heart Failure (Medicare population)	14.94%	16.42%	14.26%	13.23%	15.96%	*	Centers for Medicare and Medicaid Services	2018
	Ischemic Heart Disease (Medicare population)	27.92%	25.81%	25.95%	25.96%	29.02%	*	Centers for Medicare and Medicaid Services	2018
	Stroke	3.76%	3.50%	3.69%	3.18%	3.81%	*	Centers for Medicare and Medicaid Services	2018
	Autism Spectrum Disorders	*	0.26%	*	0.35%	0.31%	*	Centers for Medicare and Medicaid Services	2018
	Child Abuse Neglect Rate (per 1,000)	22.1	14.5	22.5	22.5	13	8.7	Kids Count	2020
	Children in Investigated Families (Ages 0-17)	201.8	142.5	110.1	107.5	95.9	*	Kids Count	2020
	Children in Out-of-Home Care (Ages 0-17)	10.7	9.4	12.3	5.6	4.7	*	Kids Count	2020

Health Care		Confirmed Victims of Abuse or Neglect (Ages 0-17) (per 1,000)	22.1	14.5	22.5	22.5	13	8.7	Kids Count	2020	
		Adults who are Obese	32%	35%	34%	30%	32%	36%	County Health Rankings	2017	
		Alzheimer's/Dementia	9.84%	9.69%	7.38%	8.96%	11.68%	*	Centers for Medicare and Medicaid Services	2018	
		Arthritis	33.02%	34%	37.94%	33.02%	36.17%	*	Centers for Medicare and Medicaid Services	2018	
		Diabetes (Medicare population)	26.29%	25.72%	26.49%	24.70%	26.13%	*	Centers for Medicare and Medicaid Services	2018	
		Diabetic Screening (Medicare population)	87%	86%		89%	86%	*	County Health Rankings	2014	
		Diagnosed Diabetes Prevalence (per 1,000)	11%	12%	19%	14%	11%	5.6	County Health Rankings	2017	
		Hepatitis (Chronic Viral B&C) (per 100,000)	*	0.55	0.5	*	0.78	0.1	Centers for Medicare and Medicaid Services	2018	
		High Cholesterol (Medicare population)	44.99%	42.79%	47.97%	37.07%	46.01%	*	Centers for Medicare and Medicaid Services	2018	
		Hypertension (Medicare population)	55.12%	55.47%	55.47%	51.78%	57.97%	*	Centers for Medicare and Medicaid Services	2018	
		Kidney Disease	22.75%	23.64%	22.10%	21.81%	25.91%	12.8%	Centers for Medicare and Medicaid Services	2018	
		Osteoporosis	3.73%	3.84%	4.31%	3.50%	5.77%	5.5%	Centers for Medicare and Medicaid Services	2018	
		Prevalence of Hypertension	46%	38.40%	43.60%	42.90%	35.10%	27.7%	Behavior Risk Factor Survey	2019	
	Family Planning		Births with Late or No Prenatal Care	4.80%	3.70%	2.80%	4.40%	5.60%	19.5%	Kids Count	2019
			Less than Adequate Prenatal Care	32%	27%	36%	32%	32%	19.5%	Kids Count	
			Low Birthweight	8%	9%	10%	5%	9%	*	County Health Rankings	2013-2019
			Medicaid Paid Births Single Year	30.2	46.5	56.2	34.2	41.5	*	Kids Count	2019
			Pre-Term Births	9%	9.50%	10.10%	6.30%	10.20%	9.4%	Kids Count	
		Influenza Vaccination Rate (Adults)	43.40%	46.70%	48.50%	49.20%	39%	*	MDHHS: Immunization Report Card	2020	

Access and Quality

Influenza Vaccination Rate (Children)	32.40%	31.30%	21.70%	30.80%	33%	*	MDHHS: Immunization Report Card	2020
Mental Health Provider Ratio	1,730:1	300:1	670:1	4,200:1	360:1	*	County Health Rankings	2020
Other Primary Care Providers Ratio	1,300:1	650:1	620:1	4,250:1	880:1	*	County Health Rankings	2020
Pneumonia Vaccination (PPSV23 65+)	60.80%	67%	71.50%	59.40%	55.10%	*	Michigan Department of Health and Human Services	2020
Population of Dentist Ratio	10,410:1	1,090:1	1,550:1	4,200:1	1,310:1	*	County Health Rankings	2019
Preventable Hospital Stays (per 100,000 population)	2,794	3,609	3,696	3,244	4,789	*	County Health Rankings	2018
Primary Care Provider Ratio	1,730:1	1,490:1	1,320:1	1,400:1	1,270:1	84%	County Health Rankings	2018
Heart Disease	509.3	383.7	493.1	500.3	271.3	71.1	Michigan Department of Community Health	2020
Infant (per 1,000 population)	1	2	*	*	694	5	Michigan Department of Community Health	2020
Life Expectancy, Both Sexes	76.9	77.8	77.5	77	78.1	*	County Health Rankings	2017-2019
Mortality Ranking	61	34	77	59	*	*	County Health Rankings	2018
Stroke	96.1	88	139.4	63.5	58.8	33.4	Michigan Department of Community Health	2020
Suicide	19	33	12	16	14	12.8	County Health Rankings	2015-2019
Percent of High School and Middle School Students who Saw a Dentist in the Past 12 Months	 61.80% 					45%	Michigan Profile for Healthy Youth	2019
HIV Prevalence (per 100,000 population)	*	14	9	*	189	0.087	County Health Rankings	2018

Sexually Transmitted Infections	HPV Vaccination (Females)	62%	52.10%	44.50%	56.30%	45.50%	80%	MDHHS: Immunization Report Card	2020	
	HPV Vaccination (Males)	56.10%	48.90%	47%	49.20%	43.60%	80%	MDHHS: Immunization Report Card	2020	
	Sexually Transmitted Infections (per 100,000 population)	144.9	207.3	64.9	203.3	507.8	*	County Health Rankings	2018	
	Child and Teen Deaths (Ages 1-19)	*	35.5	*	*	26.3	18.4	Kids Count	2019	
	Number of Births Ages 15-19 (per 1,000 females)	21	22	22	17	18	31.4	County Health Rankings	2013-2019	
	Percent of High School Students who are Obese		16%					15.5%	Michigan Profile for Healthy Youth (MI: CDC - Youth Risk Behavior Surveillance System)	2019
	Percent of High School Students who are Overweight		18.10%					16.1%	Michigan Profile for Healthy Youth (MI: CDC - Youth Risk Behavior Surveillance System)	2019
	Percent of Middle School Students who are Obese		25.90%					25.9%	Michigan Profile for Healthy Youth	2019
	Percent of Middle School Students who are Overweight		11.80%					11.8%	Michigan Profile for Healthy Youth	2019
	Percentage of Students who Never had Sexual Intercourse		69.40%					64.7%	Michigan Profile for Healthy Youth	2019
	Percent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injured in the Past Year		67%					*	Michigan Profile for Healthy Youth	2019
	Repeat Teen Births (Ages 15-19)	*	14%	*	*	16.20%	26.9%	Kids Count		

	Teen Pregnancy Rate (per 1,000 population)	*	34.6	*	26.7	25.8	0.701	Michigan Department of Community Health	2019	
Top 10 Inpatient MS-DRGs	Sepsis, unspecified organism	*	353	*	*	*	*	MyMichigan Health	2021	
	Single liveborn infant, delivered vaginally	*	235	*	*	*	*	MyMichigan Health	2021	
	COVID-19	*	228	*	*	*	*	MyMichigan Health	2021	
	Single liveborn infant, delivered by cesarean	*	149	*	*	*	*	MyMichigan Health	2021	
	Hypertensive heart disease with heart failure	*	83	*	*	*	*	MyMichigan Health	2021	
	Hypertensive heart and chronic kidney disease with heart failure and stage 1-4 chronic kidney disease	*	79	*	*	*	*	MyMichigan Health	2021	
	Acute kidney failure, unspecified	*	73	*	*	*	*	MyMichigan Health	2021	
	Cerebral infarction, unspecified	*	69	*	*	*	*	MyMichigan Health	2021	
	Maternal care for low transverse scar from previous cesarean delivery	*	68	*	*	*	*	MyMichigan Health	2021	
	Unilateral primary osteoarthritis, left knee	*	66	*	*	*	*	MyMichigan Health	2021	
	Neighborhood and Built Environment	Drinking Water Violations (Yes or No)	No	No	No	No	No	7.9%	County Health Rankings	2019
Injury Prevention		Firearm Fatalities (per 100,000 population)	13	17	10	11	12	10.7	County Health Rankings	2015-2019
		Premature Death (YPLL) (per 100,000 population)	9,600	7,700	7,500	10,100	7,500	*	County Health Rankings	2017-2019
		Unintentional Injury Deaths (per 100,000 population)	112	83	106	85	78	43.2	Michigan Department of Community Health	2020
Physical Activity	Access to Exercise Opportunities	72%	75%	72%	72%	85%	*	County Health Rankings	2010 & 2019	
	Frequent Physical Distress	15%	15%	15%	14%	13%	*	County Health Rankings	2018	
	Physical Inactivity	23%	25%	28%	30%	23%	21.2%	County Health Rankings	2017	

Neighborhood and Built Environment	Teen Physical Activity	Percentage of High School Students who Were Physically Active for at Least 60 Minutes Per Day on Five or More of the Past Seven Days	→	52.10%	←			30.6%	Michigan Profile for Healthy Youth	2019
		Percentage of Middle School Students who Were Physically Active for at Least 60 Minutes Per Day on Five or More of the Past Seven Days	→	62%	←			30.6%	Michigan Profile for Healthy Youth	2019
	Respiratory Disease Adults	Asthma	4.52%	5.07%	3.98%	4.08%	5.55%	*	Centers for Medicare and Medicaid Services	2018
		Chronic Lower Respiratory Disease Mortality (per 100,000 population)	62.2	14.8	60.5	42.9	44.7	107.2	Michigan Department of Community Health	2015-2019
		COPD (Medicare population)	15.30%	12.81%	15.05%	11.92%	14.18%	*	Centers for Medicare and Medicaid Services	2018
		Influenza and Pneumonia Mortality (per 100,000 population)	*	10.9	*	*	14	*	Michigan Department of Community Health	2015-2019
	Substance Use	Binge Drinking Adults						25.4%	County Health Rankings	
		Excessive Drinking	21%	22%	21%	21%	21%	*	County Health Rankings	2018
	Tobacco Use	Adult Smoking	24%	24%	26%	24%	20%	5%	County Health Rankings	2018
		Adult Tobacco Use						16.2%		
		Births to Mothers who Smoked During Pregnancy	30.70%	32.60%	39.40%	27.90%		4.3%	Kids Count	2019
		Current Adult Smokers	24%	24%	26%	24%	18.70%	5%	Behavioral Risk Factor Surveillance System	2019
	Teen Substance Use	Percentage of High School Students who Ever Drank Alcohol	→	43.20%	←			6.3%	Michigan Profile for Healthy Youth	2019
		Percentage of High School Students who Ever Tried Marijuana	→	21.30%	←			5.8%	Michigan Profile for Healthy Youth	2019



Teen Tobacco Use	Percentage of High School Students who Used Chewing Tobacco, Snuff or Dip During the Past 30 Days	→	3.50%	←			2.3%	Michigan Profile for Healthy Youth	2019
	Percentage of High School Students who Ever Tried Cigarette Smoking	→	28.20%	←			3.4%	Michigan Profile for Healthy Youth	2019
	Percentage of High School Students who Used an Electronic Vapor Product During the Past 30 Days	→	18.90%	←			10.5%	Michigan Profile for Healthy Youth	2019
	Percentage of Middle School Students who Used an Electronic Vapor Product During the Past 30 Days	→	5.30%	←			10.5%	Michigan Profile for Healthy Youth	2019
Social and Community Context - General	Adults who Reported Insufficient Sleep	39%	40%	39%	39%	40%	31.4%	County Health Rankings	2018
	Chronic Conditions: Depression	19.02%	22.14%	21.97%	18.60%	20.87%	*	Centers for Medicare and Medicaid Services	2018
	Chronic Conditions: Schizophrenia/Other Psychotic Disorders	1.81%	3.32%	2.07%	2.22%	3.64%	*	Centers for Medicare and Medicaid Services	2018
	Frequent Mental Distress	17%	16%	17%	16%	15%	7.6%	County Health Rankings	2018
	Poor Mental Health Days (per 30 days)	5.1	5	5.3	5	4.7	*	County Health Rankings	2018
	Violent Crime Rate (per 100,000 population)	120	304	81	93	443	*	County Health Rankings	2014 & 2016
	Children	Children in Single Parent Households	33.80%	34.20%	39.20%	25.90%	33.50%	*	Kids Count
Health IT	Broadband Access	72%	77%	72%	72%	82%	60.8%	County Health Rankings	2015-2019
	Utilities	31.77%	*	*	*	*	*	211	2021
	Housing/Shelter	13.38%	*	*	*	*	*	211	2021
	Health Supportive Services	8.70%	*	*	*	*	*	211	2021
	Food	4.68%	*	*	*	*	*	211	2021

Social and Community Context	Top 10 Referrals for 211	Health Screening/Diagnostic Services	4.68%	*	*	*	*	*	211	2021
		Individual and Family Support Services	4.01%	*	*	*	*	*	211	2021
		Legal Services	3.68%	*	*	*	*	*	211	2021
		Specialized Treatment and Prevention	2.01%	*	*	*	*	*	211	2021
		Information Services	1.67%	*	*	*	*	*	211	2021
		Public Assistance Programs	1.67%	*	*	*	*	*	211	2021
	Top 10 Referrals for 211	Housing/Shelter	*	18.15%	*	*	*	*	211	2021
		Utilities	*	17.47%	*	*	*	*	211	2021
		Food	*	6.16%	*	*	*	*	211	2021
		Health Supportive Services	*	5.99%	*	*	*	*	211	2021
		Temporary Financial Assistance	*	5.48%	*	*	*	*	211	2021
		Health Screening/Diagnostic Services	*	4.28%	*	*	*	*	211	2021
		Information Services	*	4.11%	*	*	*	*	211	2021
		Material Goods	*	3.94%	*	*	*	*	211	2021
		Individual and Family Support Services	*	3.25%	*	*	*	*	211	2021
		Legal Services	*	3.25%	*	*	*	*	211	2021
	Top 10 Referrals for 211	Utilities	*	*	16.55%	*	*	*	211	2021
		Health Supportive Services	*	*	14.44%	*	*	*	211	2021
		Housing/Shelter	*	*	11.97%	*	*	*	211	2021
		Material Goods	*	*	3.87%	*	*	*	211	2021
		Health Screening/Diagnostic Services	*	*	3.52%	*	*	*	211	2021
		Food	*	*	2.82%	*	*	*	211	2021
		Individual and Family Support Services	*	*	2.82%	*	*	*	211	2021
		Information Services	*	*	2.82%	*	*	*	211	2021
		Specialized Treatment and Prevention	*	*	2.82%	*	*	*	211	2021
		Transportation	*	*	2.82%	*	*	*	211	2021
	Top 10 Referrals for 211	Utilities	*	*	*	22.43%	*	*	211	2021
		Health Supportive Services	*	*	*	15.42%	*	*	211	2021
		Housing/Shelter	*	*	*	9.81%	*	*	211	2021
		Specialized Treatment and Prevention	*	*	*	5.61%	*	*	211	2021
		Legal Services	*	*	*	3.74%	*	*	211	2021
		Public Assistance Programs	*	*	*	3.74%	*	*	211	2021
		Individual and Family Support Services	*	*	*	3.27%	*	*	211	2021
		Information Services	*	*	*	2.80%	*	*	211	2021
		Food	*	*	*	2.34%	*	*	211	2021
		Disaster Services	*	*	*	1.40%	*	*	211	2021

# Appendix C: Survey



## 2021 Community Wellbeing Survey

Every three years, MidMichigan Health conducts a Community Health Needs Assessment to identify, understand and respond to the needs of communities we serve. Your responses will be used to guide our investments in community benefit activities. Please note, the survey is optional and confidential. Any information collected will be reported in summary only.

Thank you for taking a moment to make your community a healthier place for you, your family and neighbors. *If you have any questions, please contact Community Health Supervisor Erica Phillips at [Erica.Phillips@MidMichigan.org](mailto:Erica.Phillips@MidMichigan.org).*

### Community Vitality

**Where is your community located?** A community is where you work, live and play. It could also be where you spend most of your time with your family, neighbors, or where you clients live.

1. In which county do you live?

Alcona      Gladwin      Ogemaw      Presque Isle      Other  
Alpena      Montmorency      Oscoda      Roscommon

2. What zip code do you live in?

3. How long have you lived in your community?

0 - 5 months      1 - 4 years      More than 10 years  
6 - 11 months      5 - 9 years      N/A

4. How satisfied are you with the community where you live?

Very satisfied      Satisfied      Neutral      Unsatisfied      Very unsatisfied

5. As a place to live, is the community you live in getting:

Much better      Somewhat better      About the same      Somewhat worse      Much worse

6. How would you rate your community, as a place to:

a. Raise children      Excellent      Good      Fair      Poor      Very poor  
b. Live as you age      Excellent      Good      Fair      Poor      Very poor

7. Which three (3) do you believe if addressed would improve the health of your community?

More low-cost/free exercise activities (all year)      Access to public transportation      More affordable healthy foods options  
Affordable & quality housing      Access to healthcare      Jobs with livable wages/pay

### Your Household

8. In your home (including yourself), how many members are:

a. Children (under age 18)	1	2	3	4	5	6+	N/A
b. Adults (18 - 64 years)	1	2	3	4	5	6+	N/A
c. 65 years and older	1	2	3	4	5	6+	N/A

9. What was your household income in 2020?

\$0 - \$14,999	\$30,000 - \$49,999	\$75,000 - \$99,999	Over \$150,000
\$15,000 - \$29,999	\$50,000 - \$74,999	\$100,000 - \$150,000	

10. During the past month, did you provide any of the following unpaid care or help to an adult family member or friend in need? *Select all that apply*

- Housework      - Helping them bath/dress/groom      - Take them/doing their shopping  
- Cooking/meal prep      - Taking them to appointments      - Helping them pay bills  
- I do NOT provide adult care

11. Which of these devices do you have? *Select all that apply*

A computer/Chromebook/tablet with internet      A cell phone with text/calling only but no internet  
A smartphone      None of the above

12. Do you have enough household supplies? *Exp. Clothing, shoes, blankets, mattresses, diapers, toothpaste, shampoo, etc.*.....Yes No

### Health Care Access & Status

13. What type of health insurance do you have?

Duals (i.e. Medicare and Medicaid)      Medicare      VA/TriCare  
Medicaid      Private      I do NOT have insurance

14. If you or someone in your family required routine medical care, where would you go?

Doctor's Office/Clinic/Health Center      Health Department      Would not seek care  
Emergency Room      Walk-in/Urgent Care

15. During the past 12 months, was there a time when you postponed/didn't get medical care when needed?.....Yes No (Skip to Q16)

a. If "yes", did you not get or delay getting medical care because? *Select all that apply*

- Caregiving duties      - Don't understand the need to see a doctor/provider  
- Child care problems or needs      - Health service too far away  
- Concerns about COVID- 19      - Lack of insurance  
- Cost      - No appointment available  
- Don't have a provider/doctor

### Health Care Access & Status – CONT.

16. During the past 12 months, was there a time you:
- a. Needed prescription medicine but didn't get it because you couldn't afford it?..... Yes No
- b. Changed the way you take your prescription medicines to make them stretch because you couldn't afford to get more?..... Yes No
17. Are you aware of MidMichigan Health's financial assistance policy?..... Yes No
18. In general, your health is:
- Excellent      Very good      Good      Fair      Poor
19. How strongly do you agree with the statement, I lead a purposeful and meaningful life?
- Strongly agree      Agree      Neutral      Disagree      Strongly disagree
20. Since February 2020, have you, any close friends, or family members:
- a. Tested positive for COVID-19?..... Yes No
- b. Been hospitalized for COVID-19?..... Yes No
- c. Died from COVID-19?..... Yes No
21. How likely are you to try and get the COVID-19 vaccine?
- Very likely      Somewhat likely      Not too likely      Not at all likely      Already got it

### Education, Employment & Financial Status

22. What is your highest level of education completed?
- Less than 9th grade      Some College      Associate's Degree      Postgraduate Degree  
High School      Technical Certification      Bachelor's Degree
23. Which of the following categories best describes your employment status?
- Employed, working full-time      - Not employed, NOT looking for work      - Disabled, not able to work  
- Employed, working part-time      - Homemaker      - Retired  
- Not employed, looking for work      - Student (i.e. full/part-time)
24. Since February 2020, have you or any adult in your household:
- a. Lost your job or gotten laid off?..... Yes No
- b. Had your work hours reduced?..... Yes No
25. How likely are you to get a job with opportunities for advancement in your community?
- Almost certain      Very likely      A toss up      Not very likely      Not at all likely      Don't know

26. Do you feel you have the education and training needed to get ahead in your job/career, OR do you need more education and training?

I have necessary education and training      Need more      Don't know

27. Think about your parents when they were your age. Would you say you are better off financially than they were or not?

Better off      Same      I'm not      Don't know

28. Suppose you had an emergency expense that costs \$400. Based on your current financial situation, how would you pay for this expense? If you would use more than one way to cover this expense, please select all that apply.

- Using my credit card and pay it off next month
- Using my credit card and pay it off over time
- Using money in my checking or savings
- By borrowing from a friend or family member
- Get help from a community group or organization
- Using a payday loan, deposit advance, or overdraft
- By selling something
- Some other way

### About You!

29. How do you usually get around your community for things like shopping, visiting the doctor, running errands, or other things? *Select all that apply*

Walk      Uber or Lyft      Ride a bike  
Drive yourself      Taxi      Some other way  
Have others drive you      County transit or bus      I don't get out of the house

30. Your age:

18 - 24 yrs.      35 - 44 yrs.      55 - 64 yrs.      75 - 84 yrs.      95 yrs. +  
25 - 34 yrs.      45 - 54 yrs.      65 - 74 yrs.      85 - 94 yrs.

31. Your race: *Select all that apply*

Asian      American Indian or Alaska Native      Caucasian/White  
African American or Black      Native Hawaiian or Pacific Islander      Other

32. Are you of Hispanic, Latino, or Spanish origin (i.e. Mexican, Puerto Rican or Cuban)?..... Yes No

33. What was your assigned sex at birth?

Female      Male      Prefer not to say

34. Today, how do you identify?

Female      Transgender, male to female      Transgender, Gender Non-Conforming  
Male      Transgender, female to male      Other/Gender Non-Conforming  
Prefer not to sav

# Community Health Improvement Plan

## MyMichigan Medical Center Alpena

### Chronic Disease

**Goal: Positively impact health outcomes through education, behavior modification, risk identification/reduction and access to services**

Strategy	Description	Metrics	Internal Departments Involved	Community Partners
Implement food pharmacies and/or food lockers	Program designed to increase access to healthy foods by offering reduced prices or free fresh/frozen items like fruits, vegetables and lean proteins	<p><b>FY23:</b> Explore partnerships with FBEM, Primary Care Offices and FQHC's</p> <p><b>FY24:</b> Establish one food pharmacy or locker in each of the service area counties (Alcona, Alpena, Montmorency and Presque Isle)</p> <p><b>FY25:</b> Evaluate the effectiveness of food pharmacy/locker on chronic disease management, access to healthy foods and user satisfaction</p>	Community Health MMG	FBEM FQHC's MSU Extension
Support local community groups that engage youth for physical activity	Support programs for school-aged children that promote physical fitness, increase self-confidence and improve mental health	<p><b>FY23:</b> Engage partnerships with Run United and Joshua Tree Studio &amp; Spa to develop/promote programs</p> <p><b>FY24:</b> Establish running programs in at least 2 area elementary schools (Run United) and support/promote True Colors yoga program with at least 15 participants (Joshua Tree)</p> <p><b>FY25:</b> Establish running programs in at least 50% of area elementary schools and provide routine offerings of youth yoga programs</p>	Community Health MyMichigan Health Staff	Joshua Tree Studio and Spa Run United Thunder Bay Transportation
Implement and provide Chronic Disease Self-Management Program (explore various programs)	Program for adults with chronic disease, taught by trained facilitators to improve and manage chronic disease	<p><b>FY23:</b> Identify self-management program and facilitators</p> <p><b>FY24:</b> Implement program/workshop, have 2 trained facilitators and 30 participants complete</p> <p><b>FY25:</b> Have PDCA using FY '24 results, 4 trained facilitators and 60 participants complete</p>	Community Health Diabetes Center MMG	Alpena Senior Center FQHC's
Provide preventative screenings and promote online risk assessments	Provide early detection options for patients and community members that are at risk for chronic diseases and cancer	<p><b>FY23:</b> Explore partnerships, events and/or health fairs for screening opportunities and promotion of online risk assessments tools</p> <p><b>FY24:</b> Conduct screenings minimally at 1 event, per county, per quarter</p> <p><b>FY25:</b> Promote low dose lung scans</p>	Community Health Community Health Workers MMG	HSCC Partners in Prevention Senior Center
Integrate the use of Community Health Workers	Develop a systematic approach to integrating Community Health Workers into the MyMichigan Health care team. A Community Health Worker is considered a skilled trade public health worker that serves as a liaison between community, health care and public health.	<p style="text-align: center;"><b>*System-Wide Metric*</b></p> <p><b>FY23:</b> Sustain current CHW program and integrate within Care Management team with CHW supervisor in place</p> <p><b>FY24:</b> Hire/train 5 more Community Health Workers</p> <p><b>FY25:</b> Have 15 Community Health Workers on staff</p>	Ambulatory Clinical Quality Care Management Community Health MCCO MyMichigan Medical Group	2-1-1 Northeast Everyday Life Consulting Michigan Community Health Worker Alliance Rural Community Health Worker Network

# Community Health Improvement Plan

## MyMichigan Medical Center Alpena

### Behavioral Health

**Goal: Increase availability/accessibility/awareness of mental health and substance use services**

Strategy	Description	Metrics	Internal Departments Involved	Community Partners
Implement suicide prevention training for all staff employed at MyMichigan Medical Center Alpena and community members	Make suicide prevention training(s) available for all staff employed at MyMichigan Medical Center Sault and community members by utilizing the LivingWorks and QPR Institute frameworks.	<b>FY23:</b> Develop a plan with education services and community partners to provide training for staff and the community	Behavioral Health Community Health Education Services and Development	Alpena Public Schools LivingWorks Partners in Prevention QPR Institute
		<b>FY24:</b> Twenty percent of staff at MyMichigan Medical Center Alpena and 20 community members trained in suicide prevention		
		<b>FY25:</b> Forty percent of staff at MyMichigan Medical Center Alpena and 40 community members trained in suicide prevention		
Develop a Tobacco Cessation Strategy	Implement Tobacco Cessation tactics that make it easier for patients and community members to receive counseling and support, and provide information and a channel for providers to refer patients.	<b>FY23:</b> Initiate N-O-T in Alcona and Hillman High Schools. Explore opportunity for additional area high schools to implement N-O-T. Develop Tobacco Cessation Tip Sheet, including resources, contacts and billing codes for tobacco cessation and counseling	Ambulatory Clinical Quality Community Health Pulmonology Oncology OB-GYN MyMichigan Medical Group	Alcona Schools Alpena High School Atlanta Schools Catholic Human Services Hillman Schools MI Quitline Onaway Schools Posen Schools Rogers City Schools
		<b>FY24:</b> <i>Implement 4 tobacco cessation programs for patients and community members</i>		
		<b>FY25:</b> <i>Implement N-O-T programs in all area high schools and develop a provider referral process to tobacco cessation programs</i>		
Support TSP/NAMI efforts to bring "Ending the Silence" to schools	Provide the "Ending the Silence" program health classes to bring awareness to mental health issues and substance use disorder and provide education to students on the signs of mental illness and resources available	<b>FY23:</b> Continue collaboration and bring "Ending the Silence" to Alpena High School by May 2023 and initiate partnerships with other area high schools to begin discussions about bringing the program to those schools	Behavioral Health Services Community Health	Additional High Schools TBD Alpena High School Catholic Human Services NAMI Partners in Prevention The Sunset Project
		<b>FY24:</b> <i>Expand "Ending the Silence" and TSP efforts to at least 2 High Schools in surrounding counties</i>		
		<b>FY25:</b> <i>Offer "Ending the Silence" and TSP in each high school in the service area</i>		

Community Health Improvement Plan approved by the MyMichigan Medical Center Alpena Board on October 25th, 2022