

MyMichigan Medical Center Clare

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 Clare Community Health Needs Assessment. In accordance with policy, the Board of Directors reviewed and approved this report on April 27, 2022. We invite you to explore this report and join us as we engage in addressing the critical health issues in our community.

Sincerely,

Marita Hattem-Schiffman President, Central Region

Mante Waller Schiffen

Donald Schurr Chair, Board of Directors Mary Greeley

Vice President, Population Health

Mary Greeley

Acknowledgements to Partners

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

MyMichigan Medical Center Clare would like to give a special thank you to all of those who have been involved in the development of the CHNA. This includes members of both our Internal and External Advisory committees, as well as MyMichigan Health's Community Health department. All of these partners took part in an extensive process that included planning, collecting and analyzing data and prioritizing that 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 communities.

Thank you to our Community Health Needs Assessment Partners

Clare-Gladwin RESD	United Way of Clare & Gladwin Counties
Clare-Gladwin Great Start Collaborative	MDHHS
Clare Public Schools	Clare Area Chamber of Commerce
Farwell Public Schools	Northern Michigan Alliance for Children
Ten16 Recovery Network	Clare County Transit Corporation
211 Northeast Michigan	MSU Extension
Central Michigan District Health Department	
Greater Lansing Food Bank	MidMichigan Community Health Services

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 were 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 Clare, with the help of community partners, conducted this CHNA using a modified MAPP process that assessed the current health status of the community based on identified needs according to benchmark comparisons in secondary public health data, 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 surveys and assisted in both identifying priorities and setting goals for the 2022 CHIP.

Community Health Status

The communities within Clare County are all predominately rural and chare common themes in demographics and health indicators. Clare County has a more aging population with a higher proportion of persons over the age of 45 ages when compared to surrounding counties. The community is more homogenized and less diverse in terms of racial and ethnic composition, and has a great number of households living in poverty. According to data researched, the Clare County community struggles with issues related to chronic condition management and treatment, behavioral health, access to health care services and Social Determinants of Health.

Community Health Survey

A Community Survey was conducted January - March 2022, surveying residents of Clare County. Once collected, the Community Survey data was analyzed to identify health indicators that were consistent across the county. Key themes that emerged from this process were ongoing issues related to chronic conditions such as diabetes, obesity, and high blood pressure, as well as concerns with access to care for mental health and primary care services. Problems related to housing, food insecurity, broadband access – all related to Social Determinants of Health – emerged as well.

Community Health Improvement Plan

By recommendation from the External Advisory Committee, MyMichigan Health's Central Region Board of Directors approved the following focus areas for the 2022 Community Health Improvement Plan:

Chronic Disease Prevention

Mental Health & Substance Use

Access to Care & Social Services

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 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 everchanging 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 1: Five Foundational Elements



Figure 2: Our Communities

Feedback is welcomed via CommunityHealth@mymichigan.org

Overview of Community

MyMichigan Medical Center Clare serves a robust Central Michigan region, with a variety of recreation and vacation opportunities. With a population of 30,771, Clare County is a primarily rural community located in Michigan's Lower Peninsula. Although the county is comprised of many different townships and communities, the small cities of Harrison, Clare and Village of Farwell are among its largest communities. Named after County Clare in Ireland, the county is most well known for their Irish heritage and its natural history. Home to Mid Michigan College, the county offers widespread education and recreation opportunities, including bike trails, sporting opportunities and many local nautical experiences. Considered to be "Where the North Begins," Clare County provides great tourism and "getaway" opportunities for all!

Located within the city of Clare is the county's sole hospital - MyMichigan Medical Center Clare - a 49 licensed-bed hospital accredited by the Joint Commission. Built in 1937, MyMichigan Medical Center Clare has been serving Clare County and the surrounding counties for over eight decades. Recently updated with the latest surgical technology, the medical center offers a full range of services, including emergency care, heart and vascular services, orthopedics, CT, Lab, imaging and more. In 2019, the medical center received the Governor's Award for Outstanding Achievement in Effective Reporting and Measurement: Outpatient Quality Reporting Acute Care Hospitals. With more than 300 employees, volunteers, physicians and other personnel, the medical center strives to be a leader in community involvement through volunteer efforts, community giving and living MyMichigan Health's purpose – "Creating Healthy Communities – Together."



Figure 3: Clare County Food Distribution

Community Served at MyMichigan Medical Center Clare

The service area in Clare County is comprised of zip codes: 48617 (Clare), 48622 (Farwell), 48625 (Harrison), 48632 (Lake) and 48633 (Lake George).

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, enhancing patient experience, enhancing provider experience and reducing the cost of care. The primary purpose for the Community Health Needs Assessment for MyMichigan Medical Center Clare 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 Clare County. 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

Phase I: Planning

- Identify resources & community stakeholders
- Develop strategy & timeline
- Develop Internal & External Advisory committees

Phase II:

Data Collection/Analysis

- Survey approval & distribution
- Secondary data collection
- Data analysis

Phase III:

Prioritizing Focus Areas

- Prioritize data
- Identify key focus areas
- CHNA board approval
- CHNA public posting

Phase IV:

Implementation Plan/Execution/PDCA

- Develop goals, objectives & strategies for CHIP
- CHIP board approval
- CHIP public posting
- PDCA (plan, do, check, adjust) process

Figure 4: 2022 CHNA Process

Phase I: Planning for the CHNA strategy

Identifying resources and community stakeholders within MyMichigan Medical Center Clare's service area is a critical component to the CHNA. The Community Health team participates in community collaborative groups that are comprised of local organizations and community leaders who focus on the health of the residents. Phase I of the CHNA process includes the development of a strategy and timeline to be approved by MyMichigan Health's Central Region (Alma, Mt. Pleasant, Clare) Leadership Team, who will be utilized as an internal advisory committee, and the president of MyMichigan Medical Center Clare.

Phase II: Data collection and analysis

Forms of primary and secondary data from the Clare County service area are utilized to perform analysis. **Primary data** will include the input of those representing the local communities. This local input will be provided through a survey comprised of questions that are intended to provide an overview of the perceived health needs of community members. **Secondary data** will include public health indicators that are collected to determine the demographics and health status of the region serviced by MyMichigan Medical Center Clare. Once data is collected, it will then be analyzed to identify indicators that are out of range of the established benchmark. Those health indicators identified as out of range will be indicated in red on the included table (Appendix B). This data will then be categorized to determine areas of focus where health issues existed.

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 team 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 External Advisory Committee, as well as the MyMichigan Health Central Region (Alma, Mt. Pleasant, Clare) Leadership Team (Internal Advisory Committee) for suggestion and comment. When agreed, it will then be collected and presented to MyMichigan Health's Central Region Board of Directors for final approval 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.



Figure 5: PDCA Cycle

Community Survey Process

A 2022 Community Health Needs Assessment survey was conducted in Clare County to better understand the health needs and the vitality of the communities served. The 2022 Midland Health Survey (generated by a team at Saginaw Valley State University) served as the basis for the 2022 survey in Clare County. The Community Health team at MyMichigan Medical Center Clare worked with the External Advisory committee (compromised of leader representatives of community social service, education, public health and public policy agencies) to adapt the survey to ensure it met the needs of MyMichigan Health and the partnering agencies.

The community survey opened to the public on January 3, 2022 and subsequently closed on March 15, 2022. Efforts were made to obtain a sample of data that was representative of each community and zip code. Data collection occurred both online and via paper surveys. Microsoft Forms was used to administer the online survey and the link was sent via email to agencies, organizations and e-mail contact lists from each organization. The survey was also advertised on agency social media pages. The paper surveys were administered at various locations throughout the county and provided to organizations with harder to reach populations with limited access to internet. Participants completed the paper surveys at home and returned it in a postage paid envelope. Table 1 shows the demographic profile of the survey respondents.

All those who participated in the survey were offered a Marathon Gasoline gift card (\$10 value) as compensation for their time completing the survey. The sample generated a total of 148 survey responses for analysis. These totals included 96 online surveys and 54 paper surveys.

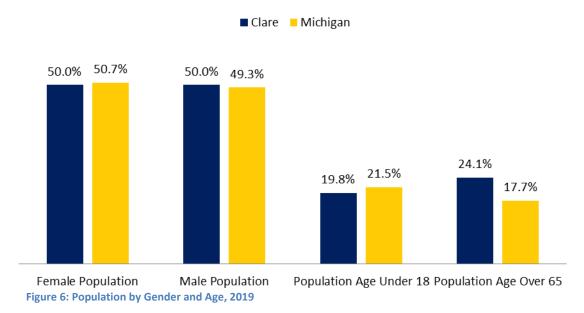
2022	Community Survey Demographic	S
Gender	Female	79%
Gender	Male	21%
	Heterosexual/Straight	95%
Sexual	Homosexual/Gay/Lesbian	0%
Orientation	Bisexual	3%
	Unspecified/Other	2%
Age	Median Age	52 years
	Black or African American	2.9%
	Asian or Asian American	0.0%
Race	American Indian or Alaskan Native	0.7%
Nace	Native Hawaiian or Other Pacific Islander	0.0%
	White or Caucasian	96.4%
	Unspecified/Other	0.0%

Table 1: 2022 Community Survey Demographics

Demographics

According to County Health Rankings, there are over 9 million residents in Michigan, with 30,771 residing in Clare County.

Population by Gender and Age (2019)



Population by Race (2019)

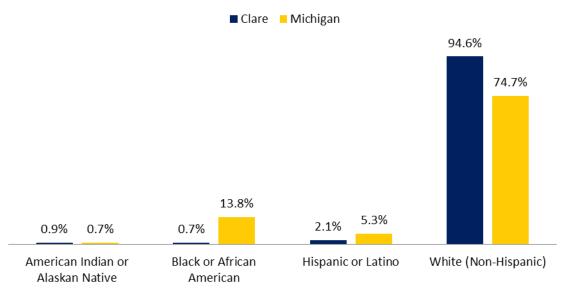


Figure 7: Population by Race, 2019

Social Determinants of Health

The Social Determinants of Health (SDOH) are classified as conditions in the environment in which people are born, work, live or play that affect their health and quality of life outcomes. Areas often included in SDOH frameworks include healthcare access and quality, education access and quality, social and community context, neighborhood and built environment and economic stability.

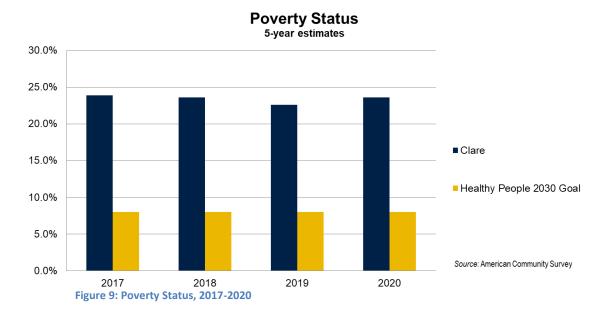
Economic Stability

Key issues within the economic stability function of SDOH include poverty, employment, food security, housing stability and ALICE populations. ALICE is an acronym for Asset Limited, Income Constrained,



Figure 8: Social Determinants of Health

yet Employed, and describes households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county (i.e., those working, yet still struggling to have their basic needs met).

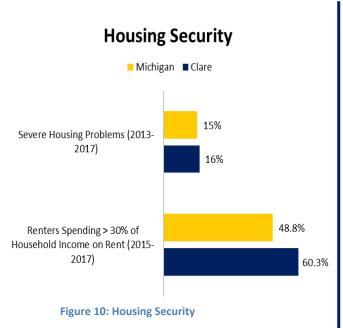


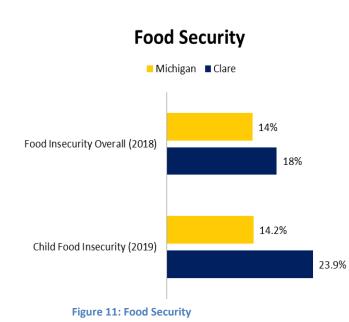
Unemployed Workers (Ages 16+), 2021					
Clare Michigan					
6.4%	4.2%				

Table 2: Unemployed Workers, 2021

ALICE Populations Clare County 2019							
Location	Total HH	% Below ALICE Threshold					
Arthur Township	229	32%					
City of Clare	1,298	52%					
City of Harrison	869	67%					
Franklin Township	359	53%					
Freeman Township	429	48%					
Frost Township	552	55%					
Garfield Township	799	58%					
Grant Township	1,243	36%					
Greenwood Township	410	40%					
Hamilton Township	860	58%					
Hatton Township	339	52%					
Hayes Township	1,708	62%					
Lincoln Township	789	60%					
Redding Township	144	67%					
Sheridan Township	510	36%					
Summerfield Township	156	53%					
Surrey Township	1,315	52%					
Winterfield Township	190	61%					

Table 3: Clare County ALICE Households, 2019





Education

Education status is a key function within the SDOH framework. Key issues such as graduation rates, enrollment in higher education, language and literacy and early childhood education all play a vital role in the health and well-being of a community.

Degree

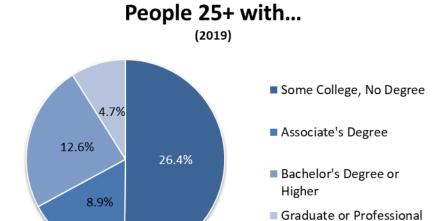


Figure 12: Continuing Education, 2019

3 and 4 Year Olds <u>Not</u> in Preschool (2019)					
Clare	63.6%				
Michigan	52.5%				

Table 4: Three & Four Year Olds Not in Preschool, 2019

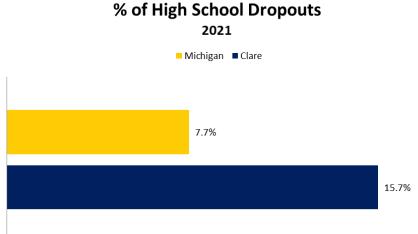


Figure 13: Percentage of High School Dropouts, 2021

Neighborhood and Built Environment

There are important connections between where an individual lives and their health and well-being. Factors such as neighborhood safety, transportation access, housing quality and standards and air and water quality all play an important role in determining one's health status.

% of Adults with Access To...

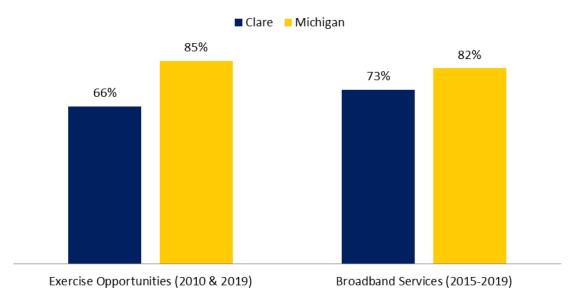
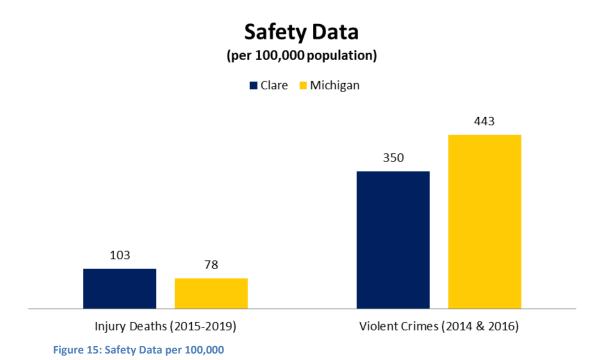


Figure 14: Percentage of Adults with Access to Services



Health Behaviors

Individual behavior plays a vital role in health outcomes. Health Behaviors are often times defined as the actions that affect our health. These actions could include behaviors that lead to improvements in health, such as physical activity, healthy eating and participating in preventive health care. Equally, actions that lead to detriments in our health are also considered health behaviors. These actions include behaviors that increase our risk of disease development, including increased alcohol intake, substance misuse and delaying prenatal care.

Preventive Care

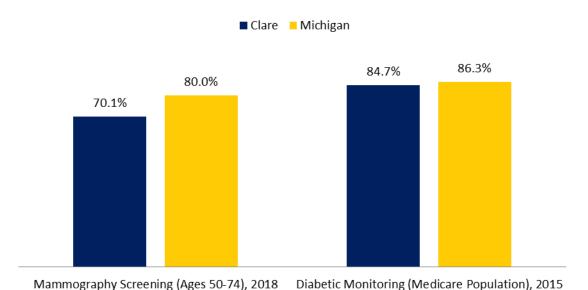


Figure 16: Health Behaviors - Preventive Care

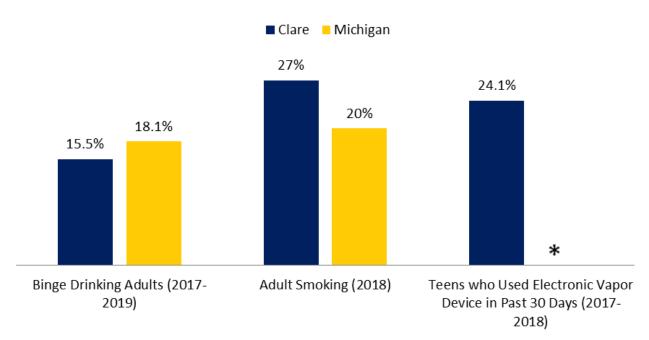
2022 Community Survey Result



of adults needed to see a doctor in the last 12 months but could not get an appointment

Figure 17: Community Survey – Appointments in Last 12 Months

Substance Use



*No Michigan Data Available

Figure 18: Health Behaviors – Substance Use

Maternal & Infant Care 2020

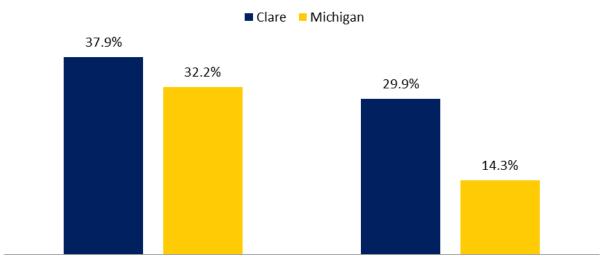


Figure 19: Health Behaviors - Maternal & Infant Care, 2020

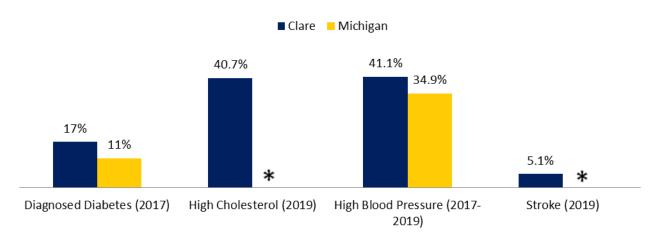
Births with Less than Adequate Prenatal Care

Births to Mothers who Smoked During Pregnancy

Chronic Conditions

Chronic conditions affect millions of people across the globe, including many in the Clare County region. According to the Centers for Disease Control and Prevention (CDC), these chronic conditions are defined as a health condition lasting more than one year, which requires additional and ongoing medical attention. Leading chronic conditions include heart disease, hypertension, diabetes and cancer. Many chronic conditions are often linked to poor health behaviors such as alcohol and tobacco use, poor nutrition and lack of physical activity.

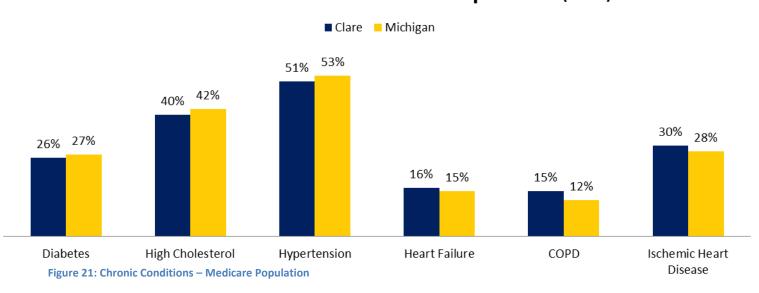
Adult Chronic Conditions



^{*}No Michigan Data Available

Figure 20: Adult Chronic Conditions

Chronic Conditions - Medicare Population (2020)



Adults Who Are Obese (2017)

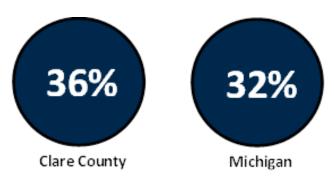


Figure 22: Adult Obesity, 2017

Cancer Incidence (per 100,000) 2014-2018

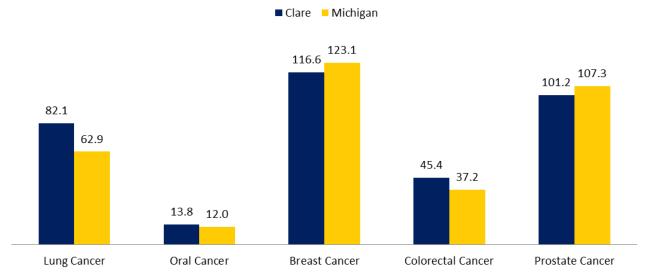


Figure 23: Cancer Incidence (per 100,000), 2014-2018

2022 Community Survey Result

% of participants with the following conditions:

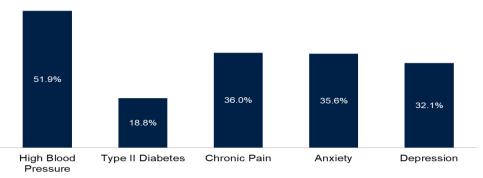


Figure 24: Community Survey – Chronic Conditions

Care Access

According to the County Health Rankings & Roadmaps, access to care is detailed by health insurance status, local care options and one's typical, everyday sources of healthcare. Access to care can have a significant impact on physical, social and mental health and well-being. Affordability of care, health insurance access and the proximity of an individual to their provider's clinic are all crucial indicators when determining an individual's level of access to quality care.

People with Health Insurance 2019

■ Michigan ■ Clare

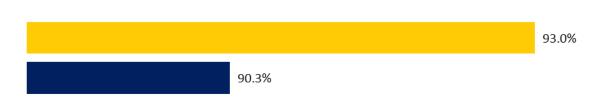


Figure 25: Insured Adults, 2019

People without Health Insurance

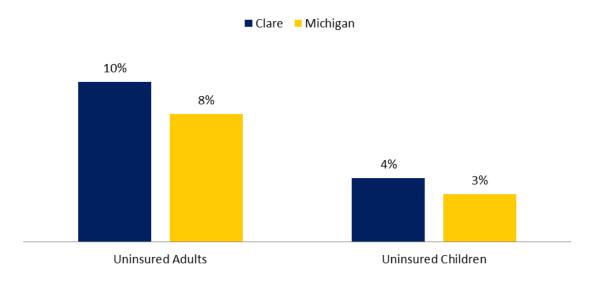


Figure 26: Uninsured Adults & Children, 2018

Primary Care Provider Ratio (2018)



Figure 27: Primary Care Provider Ratio, 2018

2022 Community Survey Result

% of participants who accessed services through telehealth during COVID-19 pandemic

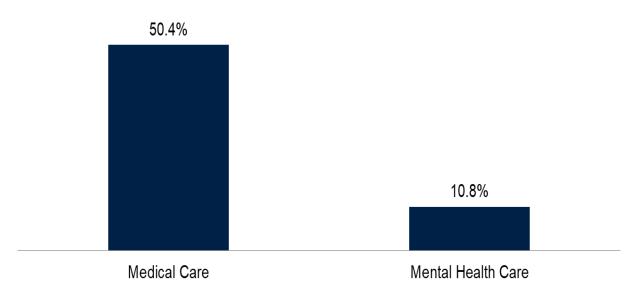


Figure 28: Services accessed during COVID-19

Behavioral Health

Behavioral Health is an all-encompassing term that often includes mental health, well-being and substance use disorders, treatment and recovery. These elements of the behavioral health field have long been associated with an individual's overall health status and have an incredible impact on an individual's everyday life. As the fields of both Mental Health and Substance Use Disorders and Treatment have developed and continue to grow within the medical profession, continued growth in awareness and support for these issues is imperative.

Suicide Mortality (per 100,000), 2015-2019					
Clare Michigan					
26	14				

Table 5: Suicide Mortality, 2015-2019

Alcohol-Impaired Driving Deaths 2015-2019

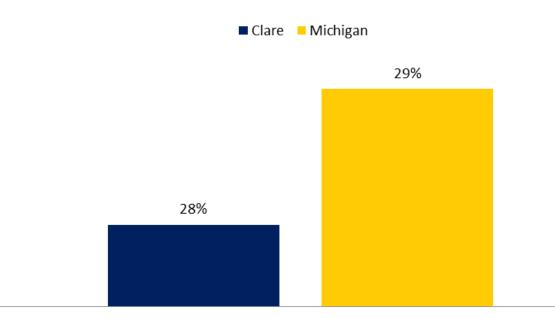


Figure 29: Alcohol-Impaired Driving Deaths, 2015-2019

Adults Ever Diagnosed with Depression 2019

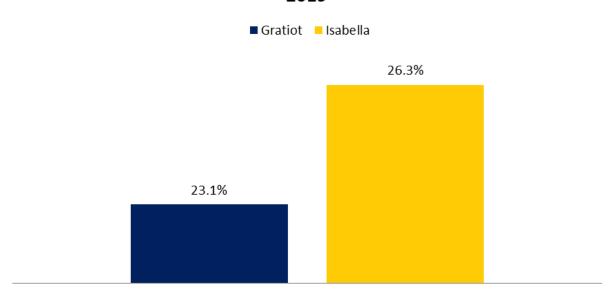
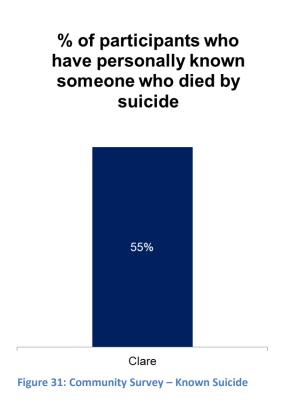
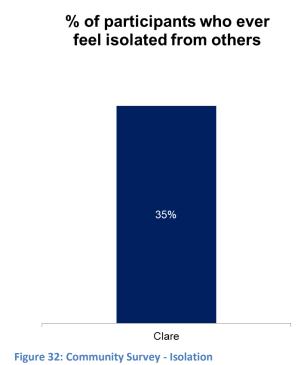


Figure 30: Adults Ever Diagnosed with Depression, 2019

2022 Community Survey Result





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.

Stage I: Data Prioritization Stage One Quantitative Qualitative Data Data Identify data that demonstrates poor Identify themes in performance perceived health against established needs benchmark(s) **Data Prioritization Process** Submit identified Submit identified health needs for health needs for further further prioritization prioritization **Health Needs** prioritization using Hanlon Method (Stage Two)

MyMichigan Medical Center Clare | Community Health Needs Assessment

Figure 33: Data Prioritization Process

Stage II: Hanlon Method

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 34: Hanlon Method Process

Hanlon Method Results

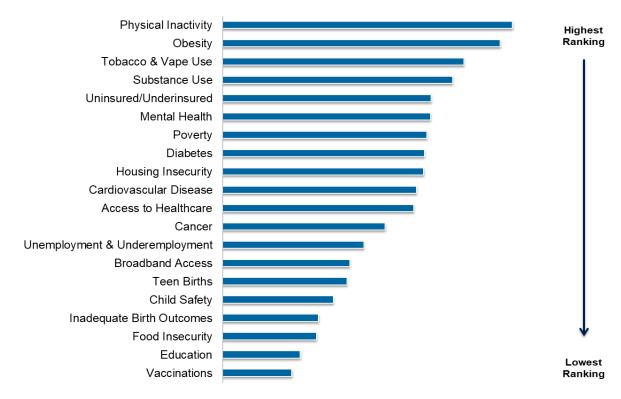
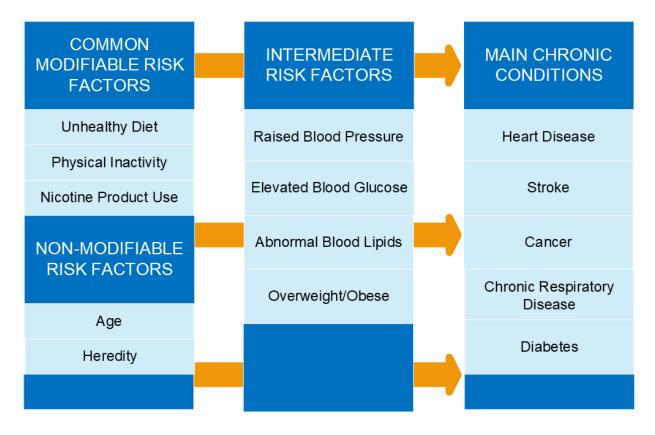


Figure 35: Hanlon Method Results

CAUSES OF CHRONIC CONDITIONS



Further prioritization continues 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. The high rates of obesity, diabetes and hypertension, and cancer incidence rates coupled with decreasing rates of cancer screenings in Clare County 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. Similarly, increasing rates of suicide, substance use disorder, and tobacco and vape use, particularly in the youth population, fall within the umbrella of Mental Health and Substance Use with similar risk factors in youth assets and mental health needs. In addition, the growing needs related to health care access and understanding, preventive care access, and access to other social services related to Social Determinants of Health such as housing, food security, and transportation all fall within the umbrella of Access to Care and Social Services issues. Due to these details and the recommendations made by the advisory committee, the final areas of focus were determined to be Chronic Disease Prevention, Mental Health and Substance Use and Access to Care and Social Services.

Improvement Plan

MyMichigan Medical Center Clare 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

Mental Health & Substance Use

Access to Care & Social Services

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 Clare External and Internal Advisory Committees and approved by MyMichigan Health's Central Region (Gratiot, Isabella, and Clare) Board of Directors on April 27, 2022.

Appendix A: Partners

External Advisory Committee Members

211 Northeast Michigan

Central Michigan District Health Department

Clare-Gladwin Great Start Collaborative

Clare-Gladwin RESD

Clare Area Chamber of Commerce

Clare County Transit Corporation

Clare Public Schools

Farwell Public Schools

Greater Lansing Food Bank

Michigan Department of Health & **Human Services**

MidMichigan Community Health Services

MSU Extension

Northern Michigan Alliance for Children

Ten16 Recovery Network

United Way of Clare & Gladwin Counties

Appendix B: Data Table

		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
		Adults 65+ Living Below Poverty Level	10.9%	8.9%	8.4%	*	American Community Survey	2015-2019
		% ALICE	29%	27%	25%	*	United Way	2019
		% Poverty	16%	22%	13%	8%	United Way	2019
		ALICE Level Households Above Poverty, but Less Than Basic Cost of Living	29.3%	26.9%	25.0%	*	United Way	2019
		ALICE Total Households	15,035	24,690	1,004,047	*	United Way	2019
	Economic Stability -	Children Living Below Poverty Level	21.5%	20.4%	19.9%	*	American Community Survey	2015-2019
	General	Children Living with at Least 1 Parent who Works Full Time	*	*	*	85.1%	Healthy People 2030	
		Families Living Below Poverty Level	12.4%	12.3%	9.9%	*	American Community Survey	2015-2019
		Households with Cash Public Assistance	2.7%	2.2%	2.3%	*	American Community Survey	2015-2019
		Median Household Income	\$47,848	\$45,116	\$57,144	*	American Community Survey	2015-2019
		Per Capita Income	\$23,616	\$23,888	\$31,713	*	American Community Survey	2015-2019
		Unemployed Workers (Ages 16+)	4.4%	4.0%	4.2%	*	U.S. Bureau of Labor Statistics	2021
	Housing and Homes	Renters Spending 30% or More of Household Income on Rent	50.9%	58.5%	48.8%	25.5%	American Community Survey	2015-2019
	Housing and Homes	Severe Housing Problems	12%	21%	15%	*	County Health Rankings	2013-2017
		Adults 65+ with Low Access to a Grocery Store	3.34%	0.62%	*	*	US Department of Agriculture: Food Atlas	2015
		Child Food Insecutty Rate	14.7%	13.7%	14.2%	0%	Feeding America	2019
Economic Stability		Children with Low Access to a Grocery Store	5.62%	1.26%	*	*	US Department of Agriculture: Food Atlas	2015
Stability		Farmers Market Density (per 1,000 population)	0.07	0.03	*	*	US Department of Agriculture: Food Atlas	2018
		Fast Food Restaurant Density (per 1,000 population)	0.56	0.52	*	*	US Department of Agriculture: Food Atlas	2016
		Food Environment Index (0=Worst, 10=Best)	6.7	7.7	7.0	*	County Health Rankings	2015 & 2018
		Food Inseasity	14%	14%	14%	6%	County Health Rankings	2018
	Nutrition and Healthy Eating	Food Stamp/SNAP Benefits in the Past 12 Months	1,437	1,825	344,905	*	U.S Census Bureau	2019
	Eating	Grocery Store Density (per 1,000 population)	0.12	0.14	*	*	US Department of Agriculture: Food Atlas	2016
		Limited Access to Healthy Foods	14%	4%	6%	*	County Health Rankings	2015
		Low Income & Low Access to a Grocery Store	14.29%	3.69%	*	*	US Department of Agriculture: Food Atlas	2015
		SNAP Participants (per capita)	15.97	18.39	*	*	US Department of Agriculture: Food Atlas	2017
		Students Eligible for Free Breakfast Program	24.58%	24.58%	*	34.9%	US Department of Agriculture: Food Atlas	2017
		Students Eligible for Free or Reduced Price Lunch	57%	46%	50%	*	County Health Rankings	2018-2019
		WIC- Authorized Food Store Access (Stores per 1,000 population)	0.3	0.0	*	*	US Department of Agriculture - Food Atlas	2016
		Driving Alone to Work	82%	78%	82%	*	County Health Rankings	2015-2019
	W - 1 - 1	Mean Travel Time to Work (Minutes)	23.9	18.2	24.6	*	American Community Survey	2015-2019
	Workplace	People that Use Public Transportation to Get to Work	0.4%	1.0%	1.3%	5.3%	American Community Survey	2015-2019
		People that Walk to Work	*	*	*	26.8%	Healthy People 2030	

		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
		9th to 12th Grade, No Diploma	6.2%	6.0%	6.3%	+	U.S Census Bureau	2019
		Disconnected Youth	7%	3%	7%	10.1%	County Health Rankings	2015-2019
		High School Dropouts	5.8%	9.8%	7.7%	+	Kids Count	2021
Adolescents	High School Graduate within Four Years of Enrollment	84.5%	79.0%	82.1%	90.7%	Annie E. Casey Foundation	2020	
	People 25+ with Less than 9th Grade Education	2.7%	2.6%	2.9%	+	U.S Census Bureau	2019	
	Students Ages 0-26 in Special Education	16.3%	22.7%	14.4%	+	Kids Count	2020	
		Students in Special Education Spending Time in Regular Education	+	+	+	73.3%	Healthy People 2030	
Education Access		People 25+ with Associate's Degree	9.6%	8.2%	9.4%	+	U.S Census Bureau	2019
and Quality		People 25+ with Bachelor's Degree or Higher	15.4%	29.1%	29.1%	+	U.S Census Bureau	2019
	Adults	People 25+ with Graduate or Professional Degree	5.5%	13.4%	11.4%	+	U.S Census Bureau	2019
	Adults	People 25+ with a High School Diploma of equivalent	91%	91%	91%	+	County Health Rankings	2015-2019
		People 25+ with Some College, No Degree	25.7%	22.4%	23.4%	+	U.S Census Bureau	2019
		3 and 4 Year Olds Not in Preschool	58.9%	61.2%	52.5%	+	Kids Count	2019
	Children	Proportion of Students with Disabilities in Regular Education Class	*	+	+	73.3%	Healthy People 2030	
		Students Not Proficient in Grade 3 English Language Arts (M-STEP)	58.8%	56.1%	57.2%	41.5%	Kids Count	2021
		Female Population	46.1%	51.4%	50.7%	+	County Health Rankings	2019
		Male Population	53.9%	48.6%	49.3%	+	County Health Rankings	2019
		Overall Population	40,711	69,872	9,986,857	*	County Health Rankings	2019
		Population Age Over 65	17.8%	13.2%	17.7%	*	County Health Rankings	2019
Determinants	Demographics	Population Age Under 18	19.3%	17.4%	21.5%	+	County Health Rankings	2019
Determinants	Demographics	Population American Indian or Alaskan Native	0.7%	4.1%	0.7%	-	County Health Rankings	2019
		Population Black or African American	6.0%	2.5%	13.8%	+	County Health Rankings	2019
			+		 	+		
		Population Hispanic or Latino	6.3% 85.5%	4.1% 85.2%	5.3% 74.7%	+	County Health Rankings	2019
		Population White (Non Hispanic)			74.7%	*	County Health Rankings	2019
		Health Factors	42	46		*	County Health Rankings	2021
		Health Outcomes	32	37			County Health Rankings	2021
		No Health Care Access During Past 12 Months: Could Not Get Appointment	+	+	+	3.3%	Healthy People 2030	
		No Health Care Access During Past 12 Month's Due to Cost		-	8%	34.9%	Behavioral Risk Factor Survey	2020
		People with Dental Insurance	*	+	+	59.8%	Healthy People 2030	
	Health Care Access and Quality - General	People with Health Insurance	93.4%	90.7%	93.0%	92.1%	U.S. Census Bureau - Small Area Health Insurance Estimates	2019
		People with Prescription Drug Insurance	*	+	+	70.6%	Healthy People 2030	
		Poor or Fair Health	21%	21%	18%	+	County Health Rankings	2018
		Uninsured Adults	7%	10%	8%	7.9%	County Health Rankings	2018
		Uninsured Children	3%	5%	3%	+	County Health Rankings	2018
		Uninsured Seniors	+	0.6%	0.3%	+	U.S. Census Bureau	2019
		All Cancer Incident Rate (per 100,000 population, Age-Adjusted)	443.3	399.8	448.8	+	National Cancer Institute	2014-2018
		All Cancer Prevalence (Medicare population)	7.35%	7.12%	8.08%	+	Centers for Medicare and Medicaid Services	2018
		All Cancer Mortality Rate (per 100,000 population)	262.8	194.6	211.5	122.7	Michigan Department of Health & Human Services	2020
		Breast Cancer Incident Rate (per 100 population, Age-Adjusted)	120.2	87.5	123.1	+	National Cancer Institute	2014-2018
Health Care		Breast Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	18.7	20.6	20.4	15.3	National Cancer Institute	2015-2019
Access and		Breast Cancer Screening	+	+	+	77.1%	Healthy People 2030	
Quality		Cervical Cancer Screening (Ages 21-65)	83.8%	80.4%	+	+	Centers for Disease Control and Prevention - PLACES	2018
		Colonoscopy Screening	*	*	70.3%	74.4%	Behavioral Risk Factor Surveillance System	2018
		Colorectal Cancer Incidence Rate (per 100,000 population)	43.1	47.0	37.2	+	National Cancer Institute	2014-2018
		Colorectal Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	17.6	19.5	13.5	8.9	National Cancer Institute	2015-2019
	Cancer	Colorectal Cancer Screening (Ages 50-75)	66.8%	68.2%	74.0%	74.4%	CDC - PLACES/CDC - NCCCP	2018
		Lung Cancer Incident Rate (per 100,000 population, Age-Adjusted)	75.5	60.4	62.9	+	National Cancer Institute	2014-2018
		Lung Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	48.1	40.6	42.3	25.1	National Cancer Institute	2015-2019
		Lung Cancer Screening	+0.1	+0.0	+2.5	7.5%	Healthy People 2030	2013-2019
		Lung Cancer Screening Lung Cancer Screening (Medicare population)	2%	2%	1%	7.576 +	Centers for Medicare and Medicaid Services	2020
			70.7%	73.6%	80.0%	77.1%	CDC - PLACES/BRFSS	2020
		Mammogram Screening (Ages 50-74)				77.1%		
		Mammogram Screening (Medicare population)	31%	28%	28%		Centers for Medicare and Medicaid Services	2020
		Oral Cancer Detected at Earliest Stages	*	*		34.2%	Healthy People 2030	
		Oral Cancer Incident Rate (per 100,000 population, Age-Adjusted)	10.7	9.3	12.0		National Cancer Institute	2014-2018
		Pap Test in Past 3 Years (Age 18+)			82.5%	84.3%	Behavioral Risk Factor Surveillance System	2016-2018
		Prostate Cancer Incident Rate (per 100,000 population, Age-Adjusted)	75.8	76.5	107.3	+	National Cancer Institute	2014-2018
		Prostate Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	15.1	12.6	18.4	16.9	National Cancer Institute	2015-2019

		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
	Health	Provider Checked Patient Understanding	*	*	*	32.2%	Healthy People 2030	
	Communication	Understand What Health Care Professional Say	*	*	*	92%	Healthy People 2030	
		Alcohol-Impaired Driving Deaths	12%	38%	29%	28.3%	County Health Rankings	2015-2019
		Chronic Lower Respiratory Disease (Age-Adjusted Rate, 3-year average)	58.5	52.9	43.3	107.2	Michigan Department of Community Health	2018-2020
		Diabetes (Age-Adjusted Rate, 3-year average)	21.6	30.0	23.5	13.7	Michigan Department of Community Health	2018-2020
		Drug Overdose Deaths (per 100,000 population)	12	13	26	20.7	County Health Rankings	2017-2019
		Drug Death Rate due to Heroin-Related Drug Poisoning (per 100,000 population)	*	*	*	4.2	Healthy People 2030	
		Drug Death Rate due to Opioid or Heroin-Related Drug Poisoning	9.93	12.95	21.78	*	Michigan Substance Use Data Repository	2020
	Mortality Rates	Heart Disease (Age-Adjusted Rate, 3-year average)	227.6	199.2	198.3	71.1	Michigan Department of Community Health	2018-2020
		Infant (per 1,000 live births)	4.6	6.3	6.7	5	Michigan Department of Health and Human Services	2014-2018
		Life Expectancy, Both Sexes (years)	77.6	78.7	78.1	*	County Health Rankings	2017-2019
		Premature Age-Adjusted Mortality (Ages 74 and younger, per 100,000 population - age adjusted)	380	330	360	*	County Health Rankings	2017-2019
		Stroke (Age-Adjusted Rate, 3 -year average)	46.4	53.3	41.3	33.4	Michigan Department of Community Health	2018-2020
		Suicide (per 100,000 p opulation)	9	12	14	12.8	County Health Rankings	2015-2019
		Could Not Get Dental Care When Needed	*	*	*	4.1%	Healthy People 2030	
		Percentage of Children, Adolescents, and Adults Who Used the Oral Health Care System	*	*	*	45%	Healthy People 2030	
	Oral Conditions	Pewentage of Middle School Students Who Saw a Dentist for a Check-Up, Exam, Teeth Cleaning, or Other Dental Work During the Past 12 Months	71.7%	71.0%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Pementage of High School Students Who Saw a Dentist for a Check-Up, Exam, Teeth Cleaning, or Other Dental Work During the Past 12 Months	78.5%	74.3%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Adults Who Saw a Dentist in Past 12 Months	62.6%	65.0%	70.1%	45%	CDC - PLACES/BRFSS	2016-2018
		HIV Prevalence (Ages 13 years and older, per 100,000 population)	94	78	189	*	County Health Rankings	2018
	Sexually Transmitted	HPV Vaxination (Females)	52.9%	47.3%	45.4%	80%	MDHHS: Immunization Report Card	2021
	Infections	HPV Vaccination (Males)	50.9%	44.6%	43.4%	80%	MDHHS: Immunization Report Card	2021
Health Care Access and		Sexually Transmitted Infections (per 100,000 population)	307.2	403.9	507.8	*	County Health Rankings	2018
Quality		Adolescents who Get Formal Sex Education Before Age 18	*	*	*	59.1%	Healthy People 2030	
L		Adolescents who Never Had Sex	*	*	*	80.8%	Healthy People 2030	
		Child and Teen Deaths (Ages 1-19, per 100,000 population)	33.8	17.8	26.8	18.4	Kids Count	2020
		Number of Births Ages 15-19 (per 1,000 females)	18	9	18	31.4	County Health Rankings	2013-2019
		Percent of High School Students who are Obese	22.1%	21.5%	*	15.5%	Michigan Profile for Healthy Youth	2017-2018
		Percent of High School Students who are Overweight	18.2%	15.2%	*	*	Michigan Profile for Healthy Youth	2017-2018
	Teens	Percent of Middle School Students who are Obese	26.2%	22.0%	*	15.5%	Michigan Profile for Healthy Youth	2017-2018
	Teens	Pewent of Middle School Students who are Overweight	14.8%	17.0%	*		Michigan Profile for Healthy Youth	2017-2018
		Percentage of High School Students who Ever had Sexual Intercourse	39.8%	26.5%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Percent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injured in the Past Year	69.3%	66.1%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Repeat Teen Births (Ages 15-19)	13.6%	11.8%	15.6%	26.9%	Kids Count	2020
		Teen Pregnancy Rate (Ages 15-19, per 1,000 population)	18.3	12	25.8	31.4	Michigan Department of Health and Human Services	2019
		Single livebom infant, delivered vaginally	311	*	*	*	MyMichigan Health	2021
		Sepsis, unspecified organism	282	*	*	*	MyMichigan Health	2021
		Major depressive disorder, recurrent severe without psychotic features	256	*	*	*	MyMichigan Health	2021
		COVID-19	197	*	*	*	MyMichigan Health	2021
		Morbid (severe) obesity due to excess calories	165	*	*	*	MyMichigan Health	2021
	Top 10 Inpatient MS-	Single liveborn infant, delivered by cesarean	163	*	*	*	MyMichigan Health	2021
	DRGs	Maternal care for low transverse scar from previous cesarean delivery	77	*	*	*	MyMichigan Health	2021
		Acute kidner failure, unspecified	72	*	*	*	MyMichigan Health	2021
		Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic	63	*	*	*	MyMichigan Health MyMichigan Health	2021
		kidney disease, or unspecified chronic kidney disease	62	*	*	*	Market in the state	2021
		Other malaise	02			*	MyMichigan Health	2021

		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
	Neighborhood and	Drinking Water Violations (Yes or No)	No	No	No	7.9%	County Health Rankings	2019
	Built Environment - General	Liquor Store Density (per 100,000 population)	9.8	7.2	16.5	*	U.S. Census Bureau - County Business Patterns	2019
		Firearm Fatalities (per 100,000 population)	5	7	12	10.7	County Health Rankings	2015-2019
	Injury Prevention	Premature Death (YPLL) (per 100,000 population)	6,500	6,800	7,500	*	County Health Rankings	2017-2019
	Injury 1 levention	Seat Belt Usage			95.9%	*	Behavioral Risk Factor Survey	2020
		Injury Deaths (per 100,000 population)	54	54	78	43.2	County Health Rankings	2015-2019
	People with Disabilities	People with Disability	13.0%	13.4%	14.1%	*	American Community Survey	2019
		Access to Exercise Opportunities	55%	76%	85%	*	County Health Rankings	2010 & 2019
		Frequent Physical Distress	15%	15%	13%	*	County Health Rankings	2018
	Physical Activity	Physical Inactivity	23%	19%	23%	21.2%	County Health Rankings	2017
		Population with No Leisuse Time Physical Activity	*	*	*	21.2%	Healthy People 2030	
		Recreation and Fitness Facility Access (per 1,000 population)	0.02	0.07	*	*	US Department of Agriculture	2016
		Percentage of High School Students who Were Physically Active	58.8%	51.4%	*	30.6%	Michigan Profile for Healthy Youth	2017-2018
	Teen Physical Activity	for at Least 60 Minutes Per Day on Five or More of the Past Seven Days	20.076	31.476		30.676	Andrigan Frome for Fleatiny 1 outin	2017-2010
		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	57.4%	55.7%	*	30.6%	Michigan Profile for Healthy Youth	2017-2018
		Adults with Asthma	10.5%	11.6%	11.1%	*	CDC - PLACES/BRFSS	2017-2018
	Respiratory Disease	Asthma Mortality (per 1,000,000)	*	*	*	8.9	Healthy People 2030	
	Adults	Chronic Lower Respiratory Disease Mortality (per 100,000 population)	*	*	56.51	107.2	Michigan Department of Community Health	2020
		COPD (Medicare population)	14%	13%	12%	*	Centers for Medicare and Medicaid Services	2020
		Influenza and Pneumonia Mortality (per 100,000 population)	*	11.3	13.8	*	Centers for Disease Control and Prevention	2017-2019
Neighborhood		Binge Drinking Adults	18.9%	21.1%	18.1%	25.4%	CDC - PLACES/BRFSS	2017-2019
and Built Environment	Substance Use	Excessive Drinking	20%	21%	21%	*	County Health Rankings	2018
Environment		Prevalence of Alcohol Abuse (Medicare Population)	1.78%	2.41%	2.52%	*	Centers for Medicare and Medicaid Services	2018
		Adult Smoking	24%	23%	20%	5%	County Health Rankings	2018
	Tobacco Use	Adult Tobacco Use	*	*	*	16.2%	Healthy People 2030	
		Births to Mothers who Smoked During Pregnancy	21.2%	21.4%	14.3%	4.3%	Kids Count	2020
		Percentage of High School Students who Ever Drank Alcohol	40.6%	42.3%	*	6.3%	Michigan Profile for Healthy Youth	2017-2018
		Percentage of High School Students who Ever Tried Manjuana	19.0%	21.6%	*	5.8%	Michigan Profile for Healthy Youth	2017-2018
		Percentage of Middle School Students who Ever Tried Marijuana	*	*	*	5.8%	Michigan Profile for Healthy Youth	2017-2018
	Teen Substance Use	Percentage of High School Students who Used Marijuana During the Past 30 Days	9.9%	10.7%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Percentage of Middle School Students who Used Marijuana During the Past 30 Days	1.5%	3.1%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Percentage of High School Students who Ever Used Drugs	*	*	*	5.5%	Healthy People 2030	
		Teens who Currently Binge Drink (High School)	10.6%	6.9%	*	8.4%	Michigan Profile for Health Youth	2018
		Pewentage of High School Students who Used Chewing Tobacco, Snuff or Dip During the Past 30 Days	1.7%	3.8%	*	2.3%	Michigan Profile for Healthy Youth	2017-2018
		Peacentage of Middle School Students who Used Chewing Tobacco, Snuff or Dip During the Past 30 Days	0.6%	0.5%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Percentage of High School Students who Ever Tried Cigarette Smoking	20.3%	18.4%	*	3.4%	Michigan Profile for Healthy Youth	2017-2018
		Percentage of Middle School Students who Ever Tried Cigarette Smoking	*	*	*	3.4%	Healthy People 2030	
	Teen Tobacco Use	Pewentge of High School Students who Smoked Cigarettes During the Past 30 Days	3.1%	5.4%	*	*	Michigan Profile for Healthy Youth	2017-2018
		Percentge of Middle School Students who Smoked Cigarettes During the Past 30 Days	3.0%	3.1%	*	*	Michigan Profile for Healthy Youth	2017-2018
		I			1			
		Percentage of High School Students who Used an Electronic Vapor Product During the Past 30 Days	14.6%	23.1%	*	10.5%	Michigan Profile for Healthy Youth	2017-2018
			14.6% 4.5%	23.1% 6.7%	*	10.5%	Michigan Profile for Healthy Youth Michigan Profile for Healthy Youth	2017-2018

		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
	Social and Community Context - General	Adults who Reported Insufficient Sleep	42%	38%	40%	31.4%	County Health Rankings	2018
		Adults and Adolescents Screened for Depression	*	*	*	13.5%	Healthy People 2030	
		Adults Ever Diagnosed with Depression	23.1%	26.3%	*	*	Centers for Disease Control and Prevention - PLACES	2019
		Frequent Mental Distress	16%	17%	15%	7.6%	County Health Rankings	2018
		Minors and Young Adults Committing Violent Crimes (per 100,000 population)	*	*	*	199.2	Healthy People 2030	
		Poor Mental Health Days (per 30 days)	5.0	5.2	4.7	*	County Health Rankings	2018
		Schizophrenia/Other Psychotic Disorders (Medicare population)	3%	4%	3%	*	Centers for Medicare and Medicaid Services	2020
		Violent Crime Rate (per 100,000 population)	203	252	443	*	County Health Rankings	2014 & 2016
	Children	Children (Ages 0-17) in Single Parent Families	35.5%	34.2%	33.5%	*	Kids Count	2019
		Children 0-17 Living in High Poverty Areas	11.7%	17.3%	14.2%	*	Kids Count	2018
	Health IT	Broadband Access	72%	77%	82%	60.80%	County Health Rankings	2015-2019
	Top 10 Referrals for 211	Utilities	22.99%	*	*	*	211	2021
		Housing/Shelter	21.19%	*	*	*	211	2021
		Health Supportive Services	8.30%	*	*	*	211	2021
Social and		Legal Services	4.50%	*	*	*	211	2021
Community Context		Food	3.70%	*	*	*	211	2021
Context		Health Screening/Diagnostic Services	3.70%	*	*	*	211	2021
		Information Services	2.80%	*	*	*	211	2021
		Specialized Treatment & Prevention	2.16%	*	*	*	211	2021
		Public Assistance Programs	1.98%	*	*	*	211	2021
		Material Goods	1.89%	*	*	*	211	2021
	Top 10 Referrals for 211	Utilities	*	18.63%	*	*	211	2021
		Housing/Shelter	*	17.99%	*	*	211	2021
		Health Supportive Services	*	8.38%	*	*	211	2021
		Health Screening/Diagnostic Services	*	4.68%	*	*	211	2021
		Food	*	3.91%	*	*	211	2021
		Material Goods	*	2.68%	*	*	211	2021
		Information Services	*	2.38%	*	*	211	2021
		Transportation	*	1.70%	*	*	211	2021
		Legal Services	*	1.62%	*	*	211	2021
		Specialized Treatment & Prevention	*	1.53%	*	*	211	2021

Appendix C: Survey

MyMichigan Medical Center Clare Department of Community Health

Project Title: Clare County Community Health Needs Survey

Principal Investigator: Ashley Brenner, MPH

Purpose of the Study

The purpose of this research study is to understand the health and health needs of people living in Clare County. Information from this study will be used to develop programs in Clare County to address the needs of its residents. You are being asked to participate in this research study because you are at least 18 years of age and live in Clare County. In total, we hope to have 500 people fill out this survey.

Participation in the Study/Procedures

Participating in this study involves filling out the attached survey that will take about 20-30 minutes. You will be asked to answer questions about your health conditions, health behaviors, and satisfaction with the quality of and access to various services and places in Clare County. Once you complete the survey, your participation in the study will end.

Compensation

In appreciation for your time spent completing the survey, you are eligible to receive a \$10 gift card to Marathon Gasoline. You must provide your name and mailing address (when instructed) after completing the survey to receive this token of appreciation. The study staff will mail your gift card within ten business days of survey completion. If after taking the survey, you seek counseling or medical treatment, any expenses accrued will be the responsibility of the subject and not that of the research project, research team, or MyMichigan Health.

Possible Risks, Stresses or Discomforts

Participating in this research study may involve some risks, stresses or discomforts. You may be uncomfortable with some of the questions we ask. If you are uncomfortable, you are free to not answer those questions. If you experience any discomfort in answering these questions and would like to speak with someone, please contact: http://www.211nemichigan.org for a full list of resources. As in all research, there may be unforeseen risks to you. If an accidental injury occurs, appropriate emergency measures will be taken; however, no compensation or additional treatment will be made available to you except as otherwise stated in this consent form.

Participant Rights

You are free to not answer any questions you choose without penalty. If you decide to participate in this study and complete the survey, you may stop at any time. Choosing not to be in this study will not result in any penalty to you. Specifically, your choice not to be in this study will not negatively affect you in any way.

Possible Benefits for Me or Others

We understand how busy you are and value your time. However, we encourage you to take this survey in order to help your community identify health needs so those concerns can be addressed. Information from this survey will be used by community leaders and organizations to develop programs that address the health concerns and needs of the community.

Anonymity and Confidentiality

Your responses in the survey are anonymous. At the end of the survey you will have the option of providing your name and mailing address to receive a \$10 Marathon Gasoline gift card for taking the survey. This information will be collected in a separately and will not be linked to any information in the research survey.

Your responses will remain confidential. All electronic data are stored in a password protected format and will be kept for three years, then deleted; paper surveys will be shredded. It is possible that the Institutional Review Board (IRB) may view this study's collected data for auditing purposes. The IRB is responsible for the oversight of the protection of human subjects involved in research.

Confidentiality and Privacy Rights

Participation in this research study may result in a loss of privacy since persons other than the investigator(s) might view your study records. Unless required by law, only the study investigators, members of the investigator's staff, and the MyMichigan Health Institutional Review Board can review your study records. They are required to maintain confidentiality regarding your identity. Any study results reported in professional journals or grant proposals will be reported at a group level (combined across people). If any findings are reported at an individual level, they will not contain any information that would identify you.

Questions or Concerns about this Research Study

If you have any questions, problems, illness, or injury during your time on this study, call us promptly. Ashley Brenner, MPH (989-466-3661) is the person in charge of this research study. You can call her directly Monday-Friday 9am-5pm with questions.

Consent

Subject's Permission

I have read this form and have been given the opportunity to ask questions by contacting the individuals listed in the section above. If I have additional questions, I have been told whom to contact. I agree to participate in the research study described above.

If you wish to participate, please select 'Accept' and begin the survey. You may request a copy of this consent page for your records. If you do not wish to participate in this study, please select 'Decline'.

0	Accept
0	Decline

	Please select only one answer unless otherwise specified. Please note that this survey is double-sided.							
1.	Do you live in Clare County, Michigan?							
	○ Yes ○ No							
2.	Do you currently live in:							
	O City of Clare O City of Harrison							
	O Village of Farwell							
	Township in Clare County, please specify:							
3.	What is your gender?							
	O Male O Prefer to self-describe:							
	O Female O Prefer not to answer							
4.	I describe myself as							
	Heterosexual/straight Homosexual/gay/lesbian							
	O Bisexual O Prefer to self-describe:							
	O Prefer not to answer							
5.	What is your age? (years)							
6.	What is your race?							
	Black or African American							
	Asian or Asian American							
	American Indian or Alaskan Native							
	Native Hawaiian or Other Pacific Islander							
	White or Caucasian							
	Other:							
7.	Are you of Hispanic or Latino origin?							
	○ Yes ○ No							
	(CONTINUE TO NEXT PAGE)							

8. Which of the following best describes y	our current relationship status?
O Married	O Separated
O Widowed	O Not married, living with significant other
O Divorced	O Not married
9. What is the highest grade or level of scl	nool you have completed?
O Less than high school degree	Technical/vocational degree
O High school degree	O Bachelor's degree
O Some college	O Graduate degree
10. Which of the following categories best	describes your employment status?
O Employed, working 40 or more hour	s per week O Homemaker
O Employed, working 1-39 hours per v	week O Full-time student
O Not employed	O Retired
O Disabled, not able to work	
11. What is your approximate average hous	ehold income?
O Less than \$20,000	O \$70,000 to \$99,999
O \$20,000 to \$39,999	O \$100,000 to \$149,999
O \$40,000 to \$69,999	O \$150,000 and up
	three or more months in which you were not able to of them on time because you did not have enough
O Yes	O No
13. Do you currently:	
•	ent your primary home O Other
14 In the past 12 months, has there been a	time when you did not have a place to live?
O Yes	O No
(CONTINU	JE TO NEXT PAGE)

15. In the pas	st 12 months	s, which me	ode of trans	portation di	d you primarily	use to get t	o
	Personal Vehicle	Walk	Carpool	Senior Services Courtesy Cars	Public Transportation	Non- motorized vehicle (bike)	N/A
Work	0	0	0	0	0	0	0
Recreational activities	0	0	0	0	0	0	0
Doctor or medical services	0	0	0	0	0	0	0
16. What is y					Inches		
18. Are you o		gnant?		O No			
19.In genera		d you rate	your overall	health? ○ Fair			
O Ver	ry Good			O Poor	r		
O Go	od						
20. How ofter	-	e seat belts	s when you	drive or ride ○ Rare			
O Us	ually			O Neve	er		
O Soi	metimes						
-	imited in any lepression,	-			lth or emotional ?	health prob	olems
O Yes	s			O No			
•			•		you to use spe pecial telephone		ent, such
O Yes	S			O No			

. , , , , , , , , , , , , , , , , , , ,	or any of the following?		
	Yes	No	
Bathing	0	0	
Dressing	0	0	
Shopping	0	0	
Banking	0	0	
Meals	0	0	
4. In the past 12 months, I	nave vou fallen?		
O Yes (Go to question 2	•		
O No (Go to question 26	•		
O NO (GO to question 20	')		
5. Did any of these falls ca your regular activities f	nuse an injury? By an inj or at least a day or to go	ury, we mean the fall ca see a doctor.	aused you to limit
O Yes		O No	
6. How often do you feel is	solated from others?		
O Never	O Sometime	s	O Always
7. Do you feel you belong	at home, work, your con	nmunity, or in any spec	ific group or place?
O Yes	-	O No	3 P
8. Do you feel that your fa coworkers care about y		ve with, neighborhood,	community, and/or
O Yes		O No	

		Yes	No
	you didn't have enough to eat, had to wear dirty clothes, o otect or take care of you?	or O	0
Did you lose a pareason?	arent through divorce, abandonment, death, or other	0	0
Did you live with suicide?	anyone who was depressed, mentally ill or attempted	0	0
Did you live with including prescri	anyone who had a problem with drinking or using drugs, ption drugs?	0	0
Did your parents harm each other	or adults in your home ever hit, punch, beat, or threaten to?	0	0
Did you live with	anyone who went jail or prison?	0	0
Did a parent or a down?	adult in your home ever swear at you, insult you, or put you	0	0
Did a parent or a in any way?	adult in your home ever hit, beat, kick, or physically hurt you	0	0
Did you feel that special?	no one in your family loved you or thought you were	0	0
	nce unwanted sexual contact (such as fondling or intercourse/penetration)?	0	0
Have you ever thou	ught of harming yourself or ending your own life?		
O Yes, within the la	ast 12 months		
O Yes, 1-5 years a	go		
O Yes, more than 5	5 years ago		
O No, I have never	thought of harming myself or ending my own life		
Have you ever atte	empted suicide?		
O Yes	O No		
Have you personal	lly known anyone who ended his or her life by suicide?	?	
O Yes	O No		
	ou know is struggling with thoughts of suicide, please	call the Na	ational

33. How much concern do you hav	e for your o	:hild's safe	ty while they	are in chi	ildcare?					
O Some O I don't	need childca	are								
O A Little										
34 How much etrose dose the cos	t of childean	o put op vo	u and your f	amily bud	last?					
34. How much stress does the cos O A lot O None	t of Childean	e put on yo	d and your i	anny buu	iget:					
3 71.61										
O Some O I don't	need childca	are								
O A Little										
35. Please think about your person general, how satisfied are you participate in) each of the follow	with your <u>A</u> (i.e., ability to	-	-	1				
	Very Dissatisfied	Not Satisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	N/A				
Recreational activities	0	0	0	0	0	0				
Public Assistance programs	0	0	0	0	0	0				
Public transportation	0	0	0	0	0	0				
Jobs	0	0	0	0	0	0				
Adult educational services (e.g. job training)	0	0	0	0	0	0				
Parent/Adult Support Services (e.g. support	0	0	0	0	0	0				
groups, parent education classes)	0	0	0	0	0					
Educational services for children	0	0	0	0	0	0				
Fresh produce and other healthy foods	0	0	0	0	0	О				
Substance use disorder services	0	0	0	0	0	0				
Mental health services	0	0	0	0	0	0				
Affordable housing	0	0	0	0	0	0				
Affordable internet services	0	0	0	0	0	0				
Quality childcare	0	0	0	0	0	0				
(1)	CONTINUE	TO NEXT P	AGE)							

36. Please think about your personal satisfaction with the following in your community. In
general, how satisfied are you with the QUALITY of each of the following:

	Very Dissatisfied	Not Satisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	N/A
Recreational activities	0	0	0	0	0	0
Public Assistance programs	0	0	0	0	0	0
Neighborhood safety	0	0	0	0	0	0
Air and water	0	0	0	0	0	0
Schools	0	0	0	0	0	0
Public transportation	0	0	0	0	0	0
Jobs	0	0	0	0	0	0
Adult educational services (e.g. job training)	0	0	0	0	0	0
Educational services for children	0	0	0	0	0	0
Fresh produce and other healthy foods	0	0	0	0	0	0
Substance use disorder services	0	0	0	0	0	0
Mental health services	0	0	0	0	0	0
Affordable housing	0	0	0	0	0	0
211	0	0	0	0	0	0
Cell Phone coverage	0	0	0	0	0	0
Internet coverage	0	0	0	0	0	0
Childcare	0	0	0	0	0	0

Con Thoric coverage	0	0	0	0	0	0
Internet coverage	0	0	0	0	0	0
Childcare	0	0	0	0	0	0
37. How could your cellphone and i	nternet ser	vices in Cla	are County b	e improve	ed?	
The second part comprised with the				p. 510		
		ou det in a	24-hour peri	od?		
38. On average, how many hours of	sieep do y	ou got iii a	24-liour peri	·		
38. On average, how many hours of 39. Thinking about the activities you participate in any physical activi- running, bicycling, vacuuming, y breathing or heart rate?	u do when ity for at le	you are not ast 10 minu	working, in ites at a time	a usual w , such as	brisk wall	king,
39. Thinking about the activities you participate in any physical activity running, bicycling, vacuuming,	u do when ity for at le	you are not ast 10 minu or anything	working, in ites at a time	a usual w , such as uses som	brisk wall ne increas	king,
39. Thinking about the activities you participate in any physical activities running, bicycling, vacuuming, breathing or heart rate?	u do when ity for at le yard work,	you are not ast 10 minu or anything	working, in ites at a time gelse that ca	a usual w s, such as suses som	brisk wall ne increas 42)	king, e in

gage in muscle	strengthening	activities?
	•	-
	ıt fresh, frozer	n, or canned
	O Count foodb	fragen er
you eat per day	? Count fresh	i, frozen, or
		\neg
Yes	No	_
0	0	
0	0	
0	0	
0	0	
e/aet food from	the following	ı places:
Yes	No	, plasso.
0	0	
0	0	
0	0	
0	0	
0	0	
0	0	
0	0	
0	0	\dashv
0	0	
	gage in activities at per day? Coun you eat per day following beve Yes O O O O O O O O O O O O O O O O O O O	O O O O O O O O O O O O O O O O O O O

5. Do you currently:		s, every day	Yes, on some days	No
Smoke cigarettes		0	0	0
Use chewing tobacco, snuff, or any form of smokeless tobacc	ю	0	0	0
Use e-cigarettes or vape		0	0	0
Have exposure to secondhand smoke		0	0	С
days 7. On the days when you drink alcoholic beverages, about haverage (one drink is equivalent to a 12-ounce beer, a 5-owith one shot of liquor)? drink(s)		-		
8. In the past 12 months:				
	Yes	No	I don't	
			arınk	- 1
I felt like I wanted or needed to cut down on my drinking.	0	0	drink O	\dashv
I felt like I wanted or needed to cut down on my drinking. I have experienced negative consequences from my		0	0	
I have experienced negative consequences from my alcohol use.	0			
I have experienced negative consequences from my		0	0	
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with	0	0	0	
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with my alcohol use.	0	0	0 0	No
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with my alcohol use.	0	0 0	O O	No
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with my alcohol use. 9. In the past 12 months, have you: Used prescription drugs that were not prescribed for you such	0	0 0 0	0 0	
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with my alcohol use. 9. In the past 12 months, have you: Used prescription drugs that were not prescribed for you such antidepressants, pain killers, sedatives or stimulants	0	O O	0 0	0
I have experienced negative consequences from my alcohol use. I sought treatment or attended a support group to help with my alcohol use. 9. In the past 12 months, have you: Used prescription drugs that were not prescribed for you such antidepressants, pain killers, sedatives or stimulants Used marijuana for medical use	O O nas	O O	0 0	0

.In the past yea	r:							
				Y	es	No		I don't us drugs
I felt like I wante	ed or needed to d	cut down on my o	lrug use.	(0	0		0
I experienced ne	egative consequ	ences from my d	rug use.	()	0		0
•	ent or attended a	support group to	help with	-)	0		0
my drug use.								
.If you felt you I following for h		e misuse proble	<u>m</u> , how lik	ely w	ould y	ou be to	go t	o the
	Very likely	Somewhat likely	Neither li or unlike			ewhat likely		'ery likely
Doctor	0	0	0			0		0
Therapist	0	0	0			0		0
Do you consid	or vourself in re	ecovery from a s	ubetanco	ueo d	ieorda	ur?		
•	er yoursen in re	covery nom a s	O No	use u	isorue	<u>:1</u> :		
U Yes								
O Yes			0 110					
	from chronic pa	in (defined as p		r recu	ırrent	pain las	ting l	longer tha
.Do you suffer f	from chronic pa	in (defined as p		r recu	urrent	pain las	ting	longer tha
.Do you suffer f 3 months)? ○ Yes			ersistent o			-		
.Do you suffer f 3 months)? ○ Yes .If you felt you l		in (defined as p	ersistent o			-		
.Do you suffer f 3 months)? ○ Yes			ersistent o	ould kely	you b	-	o the	
.Do you suffer f 3 months)? ○ Yes .If you felt you l	had a <u>mental he</u>	ealth problem, h	ersistent o No ow likely w	ould kely	you be Som un	e to go t	o the	following
.Do you suffer f 3 months)? ○ Yes .If you felt you f for help:	had a <u>mental he</u> Very likely	Somewhat	O No Weither li	ould kely	you be Som un	e to go t newhat likely	v the	following ery likely
Do you suffer f 3 months)? Yes If you felt you for help: Doctor Therapist	Very likely	Somewhat likely	O No Ow likely w	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer f 3 months)? Yes If you felt you be for help: Doctor Therapist	Very likely	Somewhat likely	O No Ow likely w Neither liter or unlike	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer f 3 months)? Yes If you felt you for help: Doctor Therapist	Very likely	Somewhat likely	O No Ow likely w	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer for months)? Yes If you felt you if for help: Doctor Therapist Do you consider the consider of the consideration of the considerati	Very likely O or yourself in re	Somewhat likely	O No Neither li or unlike O oast menta	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer for months)? Yes If you felt you if for help: Doctor Therapist Do you consider the consider of the consideration of the considerati	Very likely O or yourself in re	Somewhat likely Covery from a p	O No Neither li or unlike O oast menta	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer for months)? Yes If you felt you be for help: Doctor Therapist Do you consider Yes Do you have an	Very likely O er yourself in re	Somewhat likely Covery from a p	O No Neither li or unlike O oast menta	vould kely ely	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer for months)? Yes If you felt you for help: Doctor Therapist Do you consider Yes Do you have an Memory Concentration	Very likely O er yourself in re	Somewhat likely Covery from a p	No No Neither li or unlike	vould kely ely I heal	Som un	e to go t newhat likely O	v the	following ery likely
Do you suffer for a months)? Yes If you felt you if for help: Doctor Therapist Do you conside Yes Do you have an Memory Concentration Decision ma	Very likely O er yourself in re	Somewhat likely covery from a pout your (check	No No Neither li or unlike	vould kely ely I heal	Som un	e to go t newhat likely O	v the	following ery likely

57	7.Do you feel safe at home?				
	O Yes O No				
58	B. Please consider the following questions regarding	safety.			
			Yes	No	N/A
	Do you feel safe in your current relationship?		0	0	0
	Have you or your children ever been threatened or abu	sed (physically,			
	sexually, emotionally, or financially) by your partner?		0	0	0
	Is there a partner from a previous relationship making	you feel unsafe?	0	0	О
59	Has a doctor, nurse, or other health professional eany of the following?		you hav	ve or hav	e had
	A heart attack, also called a myocardial infarction			INO	
	Angina (chest pain from a heart problem) or coronary h	oort discoss	0	0	
	A stroke	leart disease	0	0	
			0	0	
	High blood pressure, also called hypertension		0	0	
	Type 1 Diabetes		0	0	
	Pre-diabetes or borderline diabetes		0	0	
	Type 2 Diabetes		0	0	
	Asthma		О	0	
	Depression		0	0	
	Anxiety		0	0	
	Substance use disorder		0	0	
	Cancer		0	0	
60). Have you had a test for high blood sugar or diabete	es within the past	t three	years?	
	O Yes O No				
61	I. A mammogram is an x-ray of each breast to look fo since you had a mammogram?	or breast cancer.	How lo	ng has it	been
	O Within the last year O I have	never had a mamr	mogram		
	○ 1 – 2 years ago ○ I do no	t have breasts			
	○ > 2 years ago				

62. A Pap test and/or an HPV test is a test for you had a screening for cancer of the ce	or cancer of the cervix. How long has it been since
O Within the last year	○ > 3 years ago
O 1 – 2 years ago	O I have never had a pap test
O 2 – 3 years ago	O I do not have a cervix
	a special kit at home to determine whether the en since you had your last blood stool test using a
O Within the last year	○ > 3 years ago
O 1 − 3 years ago	O I have never had a blood stool kit
64. When is the last time you had a colonos	copy or CT (virtual) colonoscopy?
Within the last year	○ > 10 years ago
O 1 – 5 years ago	O I have never had a colon cancer screening
O 6 – 10 years ago	
65. Did you receive a flu vaccination for the	2021-2022 flu season?
O Yes	O No
66. Have you been diagnosed with HIV or Al	DS?
O Yes	O No
67. Do you currently have? (please choose	your primary source of insurance)
O An employer-sponsored health insurance	e plan
O An individual plan purchased on the hea	alth insurance exchange or through an insurance agent
O Medicaid	
O Medicare	
O Uninsured	
68. Do you have a high deductible plan? (A individuals or \$2,800 for families)	high deductible plan is defined as \$1,400 for
O Yes	O No
69. Would you be able to pay an \$8,000 Eme	ergency Department bill? a payment plan O No

70. Was there a time in the past 12 months when you:				
		Yes	No	
Needed to see a doctor but could not because of the cost?)	0	0	
Needed to see a doctor but could not because you could n	ot get a	n O	0	
appointment?				
71. When I need medical care:				
	Yes	No		
I understand what the health care professional tells me.	0	0		
I understand the handouts given to me.	0	0		
I bring a family member or friend with me to help me				
understand what my health care professional tells me and the handouts given to me.	0	0		
72. Did you receive the COVID-19 vaccine?				
O Yes (Go to Question 73)	(Go to Q	uestion 7	4)	
73. If yes, did you complete the initial series (either 2 dose	s for Pf	izer or 2	doses	for Moderna
or 1 dose for J&J Janssen)?				
O Yes (Go to Question 75) O No (Go to Question	on 76)		0 U	nsure
74. If you answered "No" to Question 72, why didn't you re question if you answered "Yes" to Question 72)	eceive t	he vaccir	ne? (Sk	ip this
 Concerned about possible side effects 				
O Don't trust COVID-19 vaccines				
 Don't trust the government 				
 Plan to wait and see if it is safe 				
O Don't know if a COVID-19 vaccine will protect me				
O Don't think COVID-19 is a threat				
O Doctor has not recommended it				
O Hard for me to get a COVID-19 vaccine				
Medical Reasons				
Religious Reasons				
O Other:				

75. Did you receive a 3 rd do	se or a boo	ste	r dose of	the	COVID-19	va	ccine?		
O Yes		О	No				O Not e	eligib	le
76. Since February 2020 (si	nce the bed	ainr	ning of the	e CO	VID-19 pa	ınde	emic):		
							Yes	No)
Have you tested positive	for COVID-1	19?					0	0	
Have you had a loved on	e, close fam	ily r	members,	or a	friend die o	due			
to COVID-19?							0	0	
(If you <u>have not</u> tested pos							•		•
symptoms?			-				-		
O Yes			O No						
78. If you tested positive fo									
O Tes	O No				O Unsi	ure			
79. Has the COVID-19 pand	emic had a	ne	gative imp	act	on:				
			Yes		No				
Your employment			0		0				
Your income security			0		0				
Childcare (availability, ac	cess to)		0		0				
Use of transportation			0		0				
Ability to seek medical ca	ire		0		0				
Food security			0		0				
Sleep			0		0				
Your chronic health conditions									
80. How has the COVID-19	nandomic i	mn	acted you						
ov. now has the COVID-13	Significan	•	Somewh				Somewh	at	Significantly
	increase	•	increase		No chang	је	decrease		decreased
Overall level of stress	O	_	O		0	\dashv	0		O
Mental well-being									
	0		0		0		0		0

81. Since the beginning	of the COVID	-19 pandemi	c, have y	ou been new	ly diagnos	ed with:
				Yes	s	No
A substance use disor	der			0		0
Anxiety				0		0
Depression				0		0
Other mental health co	ondition			0		0
82. Overall, considering	all the possib	le ways you	ır life may	have been i	mpacted b	y the COVID-
19 pandemic, how m	uch has the p	andemic im	pacted yo	our day-to-da	y life?	
O It has not impacted	my life at all					
O It has impacted my	life a little					
O It has moderately in	mpacted my lif	e				
O It has extremely im	pacted my life					
02 61 41 1	-646					
83. Since the beginning	of the pander Significantly	nic, nas you Somewhat	r: No	Somewhat	Significant	tly
	increased	increased	change	decreased	decrease	d N/A
Smoking/vaping	0	0	0	0	0	0
Alcohol consumption	0	0	0	0	0	0
Drug Use	0	0	0	0	0	0
Exercise	0	0	0	0	0	0
Food consumption	0	0	0	0	0	O
84. Have you begun or in with the COVID-19 pa		stance use t	o cope wi	ith stress or	emotions a	associated
O Yes	O No					
85. Has the pandemic lin recovery from a subs	-	_	ports you	ı rely on to n	naintain/su	stain your
O Yes	O No)		O N/A		
	(CO	NTINUE TO	NEXT PA	GE)		

	ndemic, were	_		Yes	No	N/A
Access your medical health	care through	telehealth	?	0	0	0
Access your mental health	care through	telehealth?		0	0	0
Access your substance use	disorder serv	vices throug	gh telehealth?	0	0	0
7. If you used telehealth, ho	w eatisfied a	ro vou with	the quality of	the telebo	alth ovno	rioncos
. Il you used telelledidi, no	Very Dissatisfied	Not Satisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	N/A
Medical health care services	0	0	0	0	0	0
Mental health care services	0	0	0	0	0	0
Substance use disorder care services	0	0	0	0	0	0
	This co	oncludes th	e survey.			
Once complete, please return	n to MyMichig	an Health l	by using the pre	-stamped e	nvelope p	rovided.
Once complete, please return	n to MyMichig		by using the pre	-stamped e	nvelope p	rovided.
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Community Health Improvement Plan MyMichigan Medical Center Clare

Chronic Disease Prevention

Goal: Reduce risk factors for chronic disease by decreasing vape use and increasing healthy eating habits and physical activity

Strategy	Description	Metrics	Internal Departments Involved	Community Partners	
Implement and expand weight	Provide education, done in a series of	FY23: Develop a plan to implement a nutrition education series within school districts in Clare County	Cardiopulmonar y Rehab		
management and nutrition educational series such as Garden Plate Wellness (GPW) and GoThrive! in		FY24: Host 5 offerings of a nutrition education series within the community	Car diopulmonary Renab Community Health Diabetes Center Rehab Services	Clare County Schools MSU Extension	
the Clare Community	F. 5.11.55	FY25: Implement a nutrition education series in 2 Clare County schools			
000	Partner with Clare County schools to develop and maintain a "Reduced Suspension" program for students FY23: Develop a plan to implement tobacco and vape cessation program(s) in Clare County schools and identify at least 2 N-O-T and INDEPTH facilitators for the county				
Offer INDEPTH (American Lung Association) and N-O-T: Not on Tobacco (American Lung Association) in local schools	found vaping on school property. This program includes reducing the student's suspension by 1-2 days, if	FY24: Adopt a Reduced Suspension program for vaping in at least 2 Clare County schools	Community Health MyMichigan Medical Group	American Lung Association Clare County Schools Ten16 Recovery Network	
	they partake in 1-on-1 vape and tobacco counseling with a trained INDEPTH facilitator.	FY25: Assist at least 20 students per year in Clare County with the Reduced Suspension program for vaping			
		FY23: Identify self-management program(s) and identify facilitators		CDSM Program Developers Clare County Senior Services MSU Extension	
Implement and provide chronic disease self-management program(s)	Program for adults with chronic disease, taught by trained facilitators to improve and manage chronic disease	FY24: Implement program/workshop with 1 trained facilitator and 20 participants completed	Community Health Diabetes Center MyMichigan Medical Group		
	undade	FY25: Perform a PDCA using FY24 results and have 3 trained facilitators with 40 participants completed			
		System-Wide Metric			
Implement and expand Lifestyle		FY23: Implement pilot year 1: 4 trained facilitators, 60 ConnectCare participants enrolled, 30 participants complete	Community Health Diabetes Center Employee Wellness	ACLM Ithaca Seventh-Day Adventist Church	
Medicine	interventions as a primary modality to treat chronic conditions	FY24: Pilot year 2: expand to community, 4 trained facilitators, 60 participants complete	MyMichigan Medical Group Rehab Services	Lifestyle Medicine Pivio	
		FY25: Continue expansion, plan developed for SMAs, explore mandatory LM board certification for providers			

Community Health Improvement Plan MyMichigan Medical Center Clare

Mental Health & Substance Use

Goal: Increase access to mental health and substance use services, and advocate effective suicide prevention techniques

Strategy	Description	Metrics	Internal Departments Involved	Community Partners	
Partner with Clare County school implement a peer support progr within the schools. This progra		FY23: Establish an implementation plan for Clare County schools and secure buy-in for the first school to implement in each county			
mplement a peer support program for mental health in Clare County schools s	includes identifying teacher and student mentors to assist in providing depression awareness and suicide	FY24: At least 1 school in Clare County will adopt and implement a peer support program, with at least 5 student and 3 faculty mentors identified within the school	Behavioral Health Community Health	Clare County Schools	
	prevention education, training and support for students and faculty.				
	Implement Tobacco Cessation tactics	FY23: Develop Tobacco Cessation Tips sheet, including resources, contacts and billing codes for tobacco cessation and counseling			
Develop a Tobacco Cessation Strategy	that make it easier for patients and community members to receive counseling and support, and provide information and a channel for	FY24: Implement 3 tobacco cessation programs for patients and community members	Ambulatory Clinical Quality Community Health MyMichigan Medical Group	American Lung Association Ten16 Recovery Network	
	providers to refer patients.	FY25: Implement 5 tobacco cessation programs for patients and community members			
	Make suidde prevention training(s) available for all staff employed at MyMichigan Medical Center Clare and	FY23: Develop a plan with education services and community partners to provide training for staff and the community			
Implement suicide prevention training for all staff employed at MyMichigan Medical Center Clare and community members	community members by utilizing the LivingWorks and QPR Institute frameworks. These programs are designed to span a continuum of	FY24: Twenty percent of staff at MyMichigan Medical Center Clare and 20 community members trained in suicide prevention	Behavioral Health Community Health Education Services and Development	Community Mental Health of Central Michigan LivingWorks QPR Institute	
manuers	safety skills and incorporate common languages, philosophies and approaches for suicide prevention.	FY25: Forty percent of staff at MyMichigan Medical Center Clare and 40 community members trained in suicide prevention			
	Design a team S.A.F.E. response protocol (Blue Envelope) for MyMichigan Health outpatient clinics	FY23: Develop a plan for implementing a S.A.F.E response protocal for MyMichigan Health outpatient departments in Clare County		olith Spectrum Health	
Implement "Blue Envelope Program" se within MyMichigan Health outpatient pr	servicing Clare County residents. This protocol will empower staff to quickly activate a patient safety response at a	FY24: Establish a S.A.F.E. response protocol in 2 MyMichigan Health outpatient clinics/departments in Gratiot and Isabella counties and implement the Blue Envelope Program			
	moment's notice for a patient who verbalizes thoughts of suicide to a staff member.	FY25: Establish a S.A.F.E. response protocol in 5 MyMichigan Health outpatient clinics/departments in Gratiot and Isabella counties and implement the Blue Envelope Program			

Community Health Improvement Plan MyMichigan Medical Center Clare

Access to Care & Social Services

Goal: Improve access to care and social services by increasing access to preventive screenings and removing barriers identified by community members

Explore options for a Mobile Health and Wellness Hub to be used at community events, health fairs and local businesses, allowing community members increased access to services	FY23: Establish a detailed action plan and timeline for implementation of a Mobile Health and Wellness Hub			
	FY24: Begin offering services to community members in Clare Country with the Mobile Health and Wellness Hub	MyMichigan Health Outpatient Services	Community Events Community Agencies	
education	FY25: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub	wywitch igan i wiedical Group		
Davelon a systematic approach to	*System-Wide Metric*			
10 5	FY23: Sustain current CHW program and integrate within Care Management team with CHW supervisor in place	Ambulatory Clinical Quality Care Management	2-1-1 Northeast Everyday Life Consulting Michigan Community Health Worker Alliance Rural Community Health Worker Network	
between community, health care and	FY24: Hire/train 5 more Community Health Workers	Community Health MCCO MyMichigan Medical Group		
20	FY25: Have 15 Community Health Workers on staff			
Increase the number of free health	FY23: Promote Colorectal Health Risk Assessment and provide cancer prevention and risk assessment education at at least 6 events in the Gratiot and Isabella County regions	Behavioral Health		
offered to the community by MyMichigan Health including: cancer,	FY24: Promote the Depression Assessment and provide mental health awareness and suicide prevention education at at least 8 events in the Gratiot and Isabella County regions	Cardiology	Community Agendes Community Events	
assessments, blood pressure, glucose and cholesterol screenings	Weight Loss Assessment and Heart Health Assessment and blood pressure, glucose and cholesterol screenings) and provide education on healthy lifestyles at at least 8 events in the Gratiot and Isabella County regions	MyMichigan Medical Group Oncology		
n n cc b	community events, health fairs and coal businesses, allowing community members increased access to services like screenings, immunizations and education Develop a systematic approach to tegrating Community Health Workers to the MyMichigan Health care team. A Community Health Worker is onsidered a skilled trade public health worker that serves as a liaison between community, health care and public health. Increase the number of free health screenings and risk assessments offered to the community by MyMichigan Health including: cancer, depression and stroke risk ssessments, blood pressure, glucose and cholesterol screenings	FY24: Begin offering services to community members in Clare Country with the Mobile Health and Wellness Hub FY25: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY25: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY25: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella County regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratiot & Isabella Cunty regions with the Mobile Health and Wellness Hub FY26: Have 15 Community Health Workers on staff FY26: Promote Colorectal Health Risk Assessment and provide men	FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Health and Wellness Hub FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with the Mobile Medical Group FY26: Service 50 people in the Gratic & Isabella regions with Medical Group FY26: France the Metric* FY26: Hire/train 5 more Community Health Workers FY26: Hire/train 5 more Community Health Workers on staff FY26: France the Depression Assessment and provide cancer prevention and risk assessment and provide cancer prevention and risk assessment and provide cancer prevention and state at each to the community bealth workers on staff FY26: France the Depression Assessment and provide cancer prevention education at at least 8 events in the Gratica and Isabella County regions FY26: France the Depression and stroke risk seaseme	