

MyMichigan Medical Centers Alma and Mt. Pleasant

COMMUNITY HEALTH NEEDS ASSESSMENT





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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 Alma and Mt. Pleasant 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 Jodle Schiffun

Marita Hattem-Schiffman President, Central Region

La Cifchur

Donald Schurr Chair, Board of Directors

Mary Greeley

Mary Greeley Vice President, Population Health

Acknowledgements to Partners

MyMichigan Medical Centers Alma and Mt. Pleasant are 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 Centers Alma and Mt. Pleasant 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.

Gratiot-Isabella RESD	United Way of Gratiot & Isabella Counties
Alma College	Gratiot County Community Foundation
Central Michigan University	Isabella County Commission on Aging
Community Mental Health of Central Michigan	MDHHS
Gratiot Integrated Health Network	Gratiot Area Chamber of Commerce
Ten16 Recovery Network	Mid-Michigan District Health Department
Gratiot County Child Advocacy	Mt. Pleasant Area Chamber of Commerce
211 Northeast MI	Isabella County Child Advocacy
St. Louis Farmers Market	Mt. Pleasant Farmers Market
Central Michigan District Health Department	Isabella Citizens for Health
Greater Lansing Food Bank	Michigan Health & Hospital Association

Thank you to our Community Health Needs Assessment Partners

MyMichigan Medical Centers Alma and Mt. Pleasant | Community Health Needs Assessment

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 Centers Alma and Mt. Pleasant, 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 of Gratiot and Isabella counties are close in geography, demographics and health indicators. Both communities are rural in nature with primarily younger populations (under age 45), are homogenized and less diverse in terms of racial and ethnic composition and have greater proportions of households living in poverty. According to data researched, these two communities share hampering 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 through March 2022, surveying members of both the Gratiot and Isabella communities. Once collected, the Community Survey data was analyzed to identify health indicators that were consistent across both counties. 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

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 ever-changing needs of the 981,000 residents in the health system's 25-county service area. In fiscal year 2021, MyMichigan Health provided \$78 million in community benefits, as well as supported its patients and families with new equipment, services and programs with funds raised by the MyMichigan Health Foundation.





Figure 2: Our Communities

Feedback is welcomed via CommunityHealth@mymichigan.org

Overview of Community

MyMichigan Medical Centers Alma and Mt. Pleasant serve robust Central Michigan communities within both Gratiot and Isabella Counties. With a population of 40,711, Gratiot County is a primarily rural community located in the geographical center of Michigan's Lower Peninsula. Comprised of three cities (Alma, Ithaca and St. Louis) three villages (Ashley, Breckenridge and Perrinton) and many other local communities, Gratiot County boasts an array of natural resources and atmosphere. Agriculture and manufacturing are among the most prominent industries in the county, both contributing to a steady economy. The county includes various recreational opportunities (including natural rivers, rail trails and state game areas), is the home of Alma College and is well-known for its extensive Wind Farms! Located within the City of Alma is the county's sole hospital – MyMichigan Medical Center Alma, a 96-licensed bed facility accredited by The Joint Commission. The medical center consists of over 1,000 employees, volunteers, health care providers and other personnel, 50% of which reside in Gratiot County. MyMichigan Medical Center Alma is a robust teaching facility that provides a full range of specialty services including cancer care, maternity services, pain management and behavioral health services, to name a few.

With a population of 69,872, Isabella County is located just north of Gratiot County, in the heart of Central Lower Michigan. Home to the Saginaw Chippewa Indian Tribe and Central Michigan University, the county is known for its natural beauty, athletics, and academics! Isabella County provides an array of opportunities for outdoor recreation including bike trails, county parks and camping and water trails. As for healthcare opportunities, Isabella County is home to two well-known healthcare organizations: McLaren Central Michigan and MyMichigan Medical Center Mt. Pleasant. MyMichigan Medical Center Mt. Pleasant has been serving the Isabella county community since 2000, and with a \$30M investment in 2017, became affectionately known as the "Medical Center of the Future." With no inpatient beds, this unique and innovative facility serves the community with a complement of services in one convenient location. Accredited by The Joint Commission, MyMichigan Medical Center Mt. Pleasant provides timely access to adult and pediatric care, while also serving as the official sports medicine provider for Central Michigan University, an NCAA Division I Football Bowl Subdivision institution.

Community Served at MyMichigan Medical Centers Alma and Mt. Pleasant

The service area in Gratiot County is comprised of zip codes: 48615 (Breckenridge), 48662 (Wheeler), 48801 (Alma), 48806 (Ashley), 48807 (Bannister), 48830 (Elm Hall), 48832 (Elwell), 48847 (Ithaca), 48856 (Middleton), 48862 (North Star), 48871 (Perrinton), 48874 (Pompeii), 48877 (Riverdale), 48880 (Saint Louis) and 48889 (Sumner). Service for MyMichigan Medical Center Alma extends to: 48829 (Edmore).

The service area in Isabella County is comprised of zip codes: 48804 (Mount Pleasant), 48858 (Mount Pleasant), 48859 (Mt. Pleasant), 48878 (Rosebush), 48883 (Shepherd), 48893 (Weidman), 48896 (Winn) and 49310 (Blanchard).

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 Centers Alma and Mt. Pleasant 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 Gratiot and Isabella counties. With this understanding of the needs in our communities, we are equipped to develop a three-year strategic plan to improve the health outcomes in our communities and build health improvement capacity for the future health of its residents.

Identify resources & community stakeholders Phase I: Develop strategy & timeline Develop Internal & External Advisory committees Planning Survey approval & distribution Phase II: Secondary data collection Data analysis Data Collection/Analysis Prioritize data Phase III: Identify key focus areas CHNA board approval **Prioritizing Focus Areas** CHNA public posting Phase IV: Develop goals, objectives & strategies for CHIP CHIP board approval Implementation CHIP public posting Plan/Execution/PDCA PDCA (plan, do, check, adjust) process

2022 CHNA Process

Figure 3: 2022 CHNA Process

Phase I: Planning for the CHNA strategy

Identifying resources and community stakeholders within MyMichigan Medical Centers Alma and Mt Pleasant's service areas 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 Centers Alma and Mt. Pleasant.

Phase II: Data collection and analysis

Forms of primary and secondary data from the Gratiot and Isabella counties 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 each of the counties serviced by MyMichigan Medical Centers Alma and Mt. Pleasant. 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.



Community Survey Process

A 2022 Community Health Needs Assessment survey was conducted in both Gratiot and Isabella counties 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 Gratiot and Isabella counties. The Community Health team at MyMichigan Medical Centers Alma and Mt. Pleasant 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.

Both the Gratiot and Isabella county surveys 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 county and each 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 email contact lists from each organization. The survey was also advertised on agency social media pages. The paper surveys were administered at various locations throughout each 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.

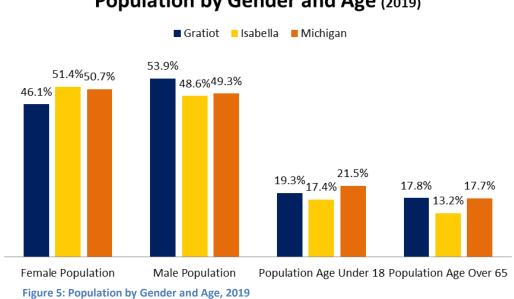
All those who participated in the survey were offered a Meijer gift card (\$10 value) as compensation for their time completing the survey. The sample generated a total of 344 survey responses for analysis in Gratiot County and 128 survey responses for analysis in Isabella County. These totals included 210 online surveys and 134 paper surveys in Gratiot County and 118 online surveys and 10 paper surveys in Isabella County.

2022 Con	nmunity Survey Demographics	Gratiot	Isabella
	Female	80%	84%
Gender	Male	19%	16%
	Unspecified/Other	1%	0%
	Heterosexual/Straight	90%	86%
Sexual	Homosexual/Gay/Lesbian	2%	2%
Orientation	Bisexual	2%	9%
	Unspecified/Other	6%	3%
Age	Median Age	52 years	46 years
	Black or African American	0.6%	1%
	Asian or Asian American	0.3%	2%
Race	American Indian or Alaskan Native	0%	1%
Nace	Native Hawaiian or Other Pacific Islander	0.3%	0%
	White or Caucasian	98%	93%
	Unspecified/Other	0.6%	3%

Table 1: 2022 Community Survey Demographics

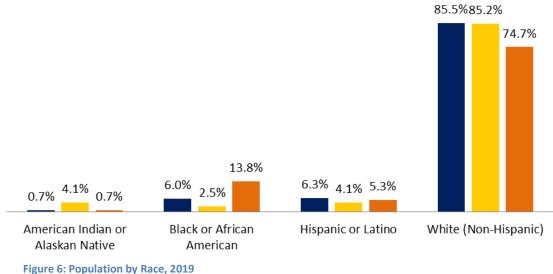
Demographics

According to County Health Rankings, there are over 9 million residents in Michigan, with 40,711 residing in Gratiot County and 69,872 residing in Isabella County.



Population by Gender and Age (2019)





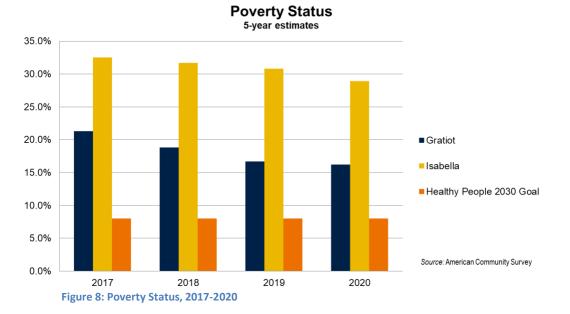
Social Determinants of Health

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

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						
Gratiot	Isabella	Michigan				
4.4%	4.0%	4.2%				

Table 2: Unemployed Workers, 2021



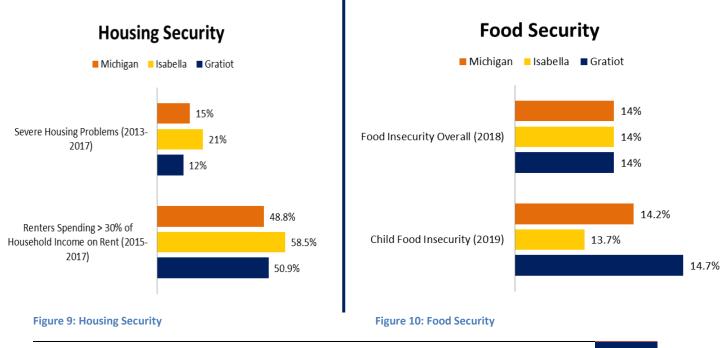
Figure 7: Social Determinants of Health

	CE Populatio ratiot County 2019		ALICE Populations Isabella County 2019				
Location	Total HH	% Below ALICE Threshold	Location	Total HH	% Below ALICE Threshold		
Arcada Twp.	747	46%	Broomfield Twp.	731	33%		
Bethany Twp.	521	30%	Chippewa Twp.	1,719	43%		
City of Alma	3,519	57%	City of Mt. Pleasant	7,963	56%		
City of Ithaca	1,094	46%	Coe Twp.	1,154	36%		
City of St. Louis	1,336	55%	Coldwater Twp.	307	53%		
Elba Twp.	497	49%	Deerfield Twp. 1,123		23%		
Emerson Twp.	376	40%	-				
Fulton Twp.	1,008	39%	Denver Twp.	439	44%		
Hamilton Twp.	194	39%	Fremont Twp.	573	41%		
Lafayette Twp.	207	34%	Gilmore Twp.	503	53%		
New Haven Twp.	412	42%	isabella Twp.	755	48%		
Newark Twp.	412	31%	Lincoln Twp.	762	32%		
North Shade Twp.	257	35%	Nottawa Twp.	856	38%		
North Star Twp.	364	37%	Rolland Twp.	464	45%		
Pine River Twp.	940	38%					
Seville Twp.	884	39%	Sherman Twp.	1,131	38%		
Sumner Twp.	751	35%	Union Charter Twp.	5,249	61%		
Washington Twp.	365	41%	Vernon Twp.	506	34%		
Wheeler Twp.	1,151	46%	Wise Twp.	493	43%		

Table 3: Gratiot County ALICE Households, 2019

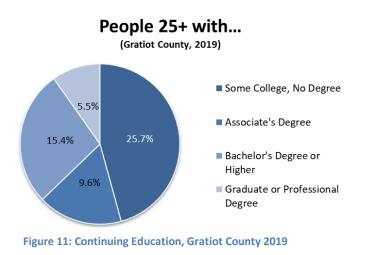
Table 4: Isabella County ALICE Households, 2019

13



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.



3 and 4 Year Olds Not in
Preschool (2019)Gratiot58.9%Isabella61.2%Michigan52.5%

People 25+ with...

(Isabella County, 2019)

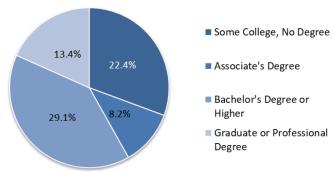




Table 5: Three & Four Year Olds Not in Preschool, 2019

% of High School Dropouts

2021

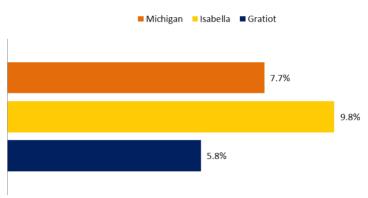
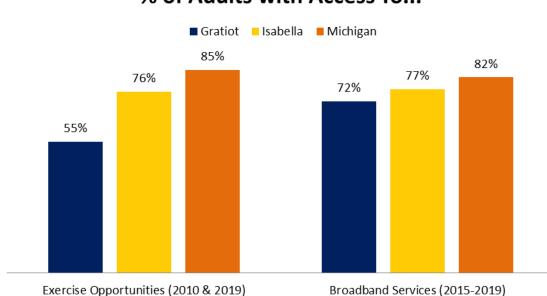


Figure 13: Percentage of High School Dropouts, 2021

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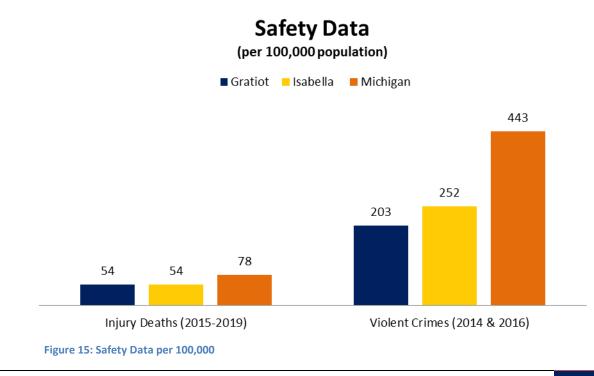
Neighborhood and Built Environment

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.



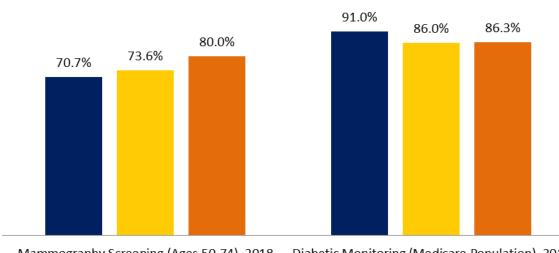
% of Adults with Access To...

Figure 14: Percentage of Adults with Access to Services



Health Behaviors

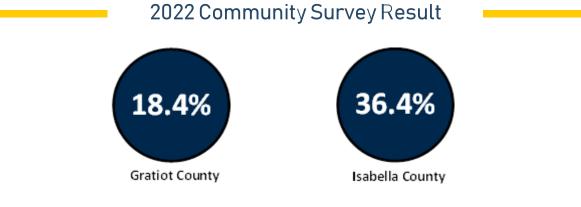
Individual behavior plays a vital role in health outcomes. Health Behaviors are often times defined as the actions that affect our health. These actions could include behaviors that lead to improvements in health, such as physical activity, healthy eating and participating in preventive health care. 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

Gratiot Isabella Michigan

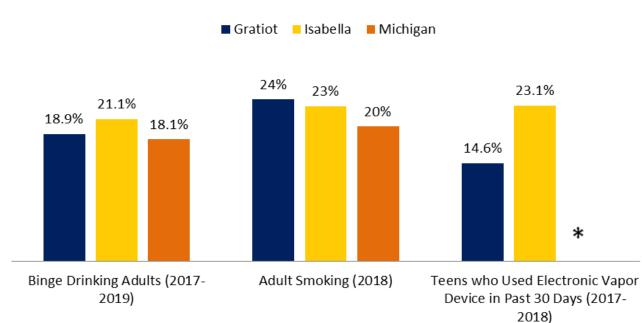
Mammography Screening (Ages 50-74), 2018 Diabetic Monitoring (Medicare Population), 2015 Figure 16: Health Behaviors - Preventive Care



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

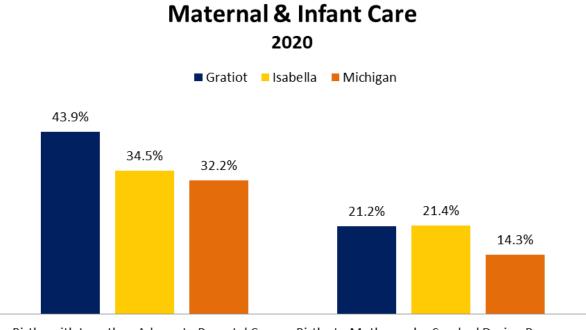
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Substance Use

*No Michigan Data Available

Figure 18: Health Behaviors – Substance Use

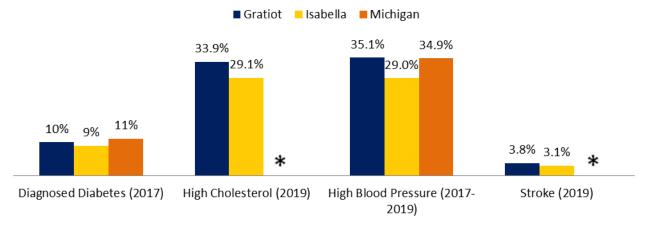


Births with Less than Adequate Prenatal Care Births to Mothers who Smoked During Pregnancy Figure 19: Health Behaviors - Maternal & Infant Care, 2020

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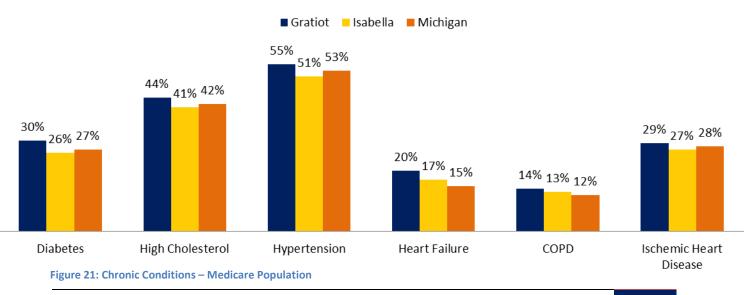
Chronic Conditions

Chronic conditions affect millions of people across the globe, including many in the Gratiot and Isabella 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

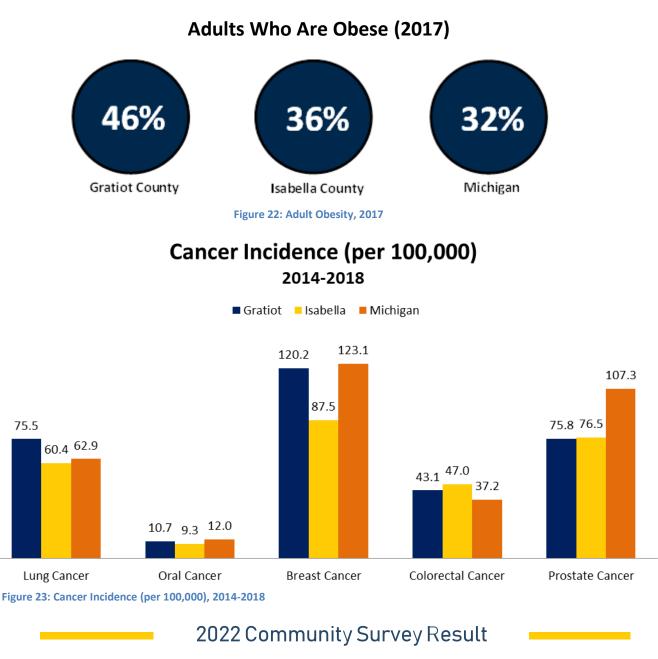


Adult Chronic Conditions

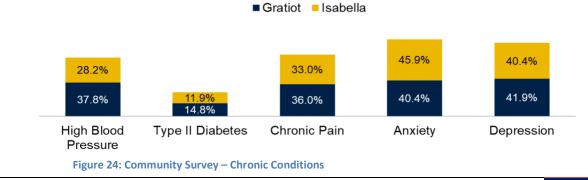
*No Michigan Data Available Figure 20: Adult Chronic Conditions



Chronic Conditions - Medicare Population (2020)







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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.

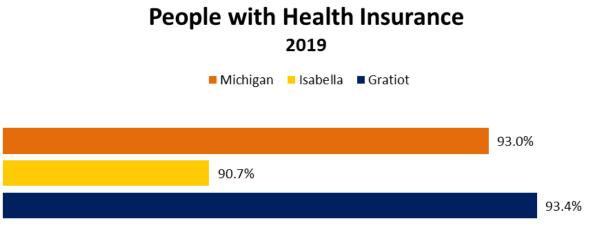
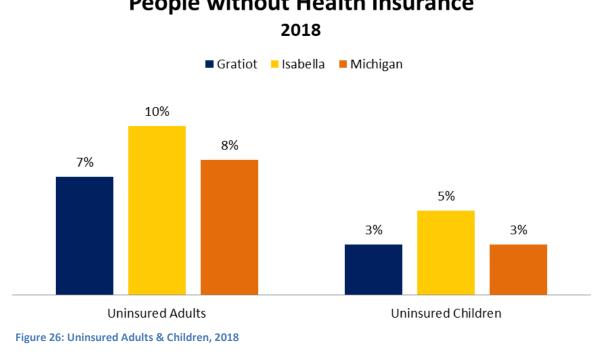


Figure 25: Insured Adults, 2019



People without Health Insurance

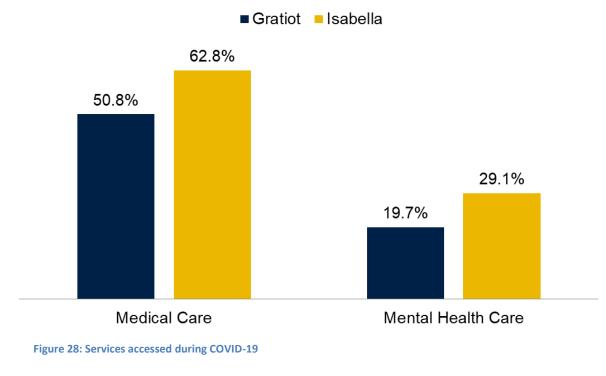
Primary Care Provider Ratio (2018)



Figure 27: Primary Care Provider Ratio, 2018



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



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						
Gratiot	Isabella	Michigan				
9	12	14				

Table 6: Suicide Mortality, 2015-2019

Alcohol-Impaired Driving Deaths 2015-2019

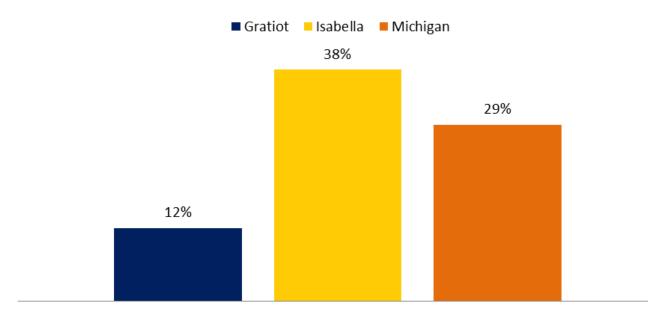


Figure 29: Alcohol-Impaired Driving Deaths, 2015-2019

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Adults Ever Diagnosed with Depression 2019

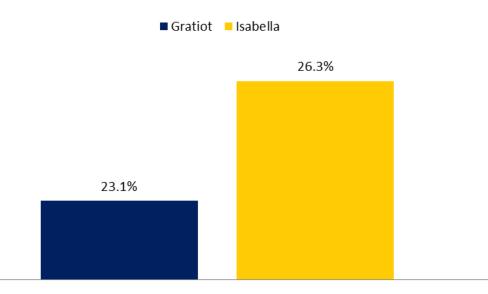
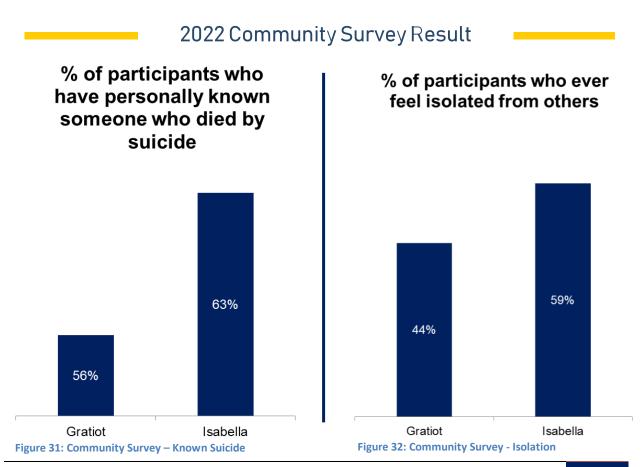
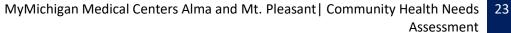


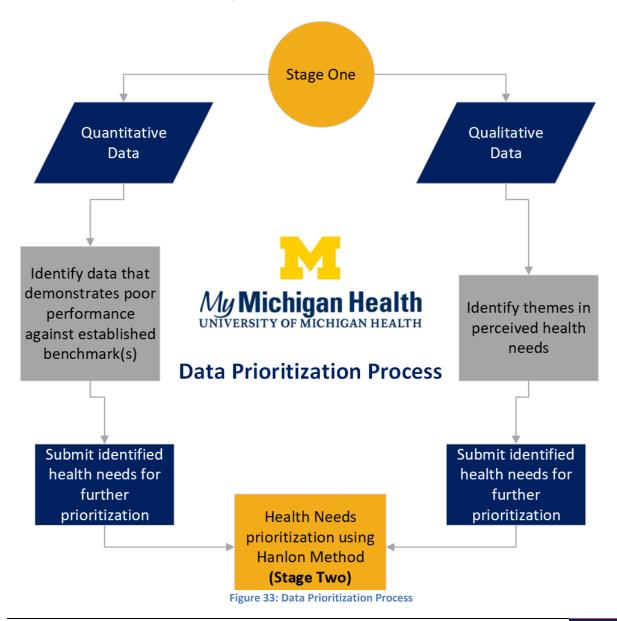
Figure 30: Adults Ever Diagnosed with Depression, 2019





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

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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

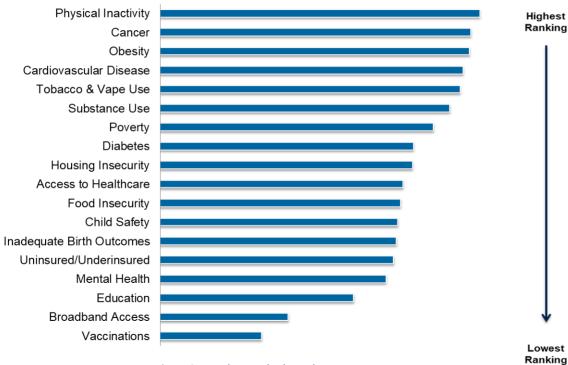


Figure 35: Hanlon Method Results

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CAUSES OF CHRONIC CONDITIONS

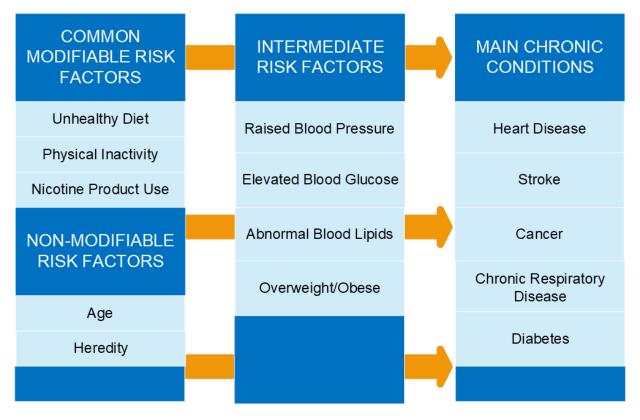


Figure 36: Causes of Chronic Conditions

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 both Gratiot and Isabella counties 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 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 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 Centers Alma and Mt. Pleasant built upon the Improvement Plan developed in 2019 to develop a comprehensive cross-county 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.



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

Appendix A: Partners

External Advisory Committee Members

211 Northeast Michigan Alma College Alma Transit Center **Central Michigan District Health Department Central Michigan University** Community Mental Health of Central Michigan **Gratiot Area Chamber of Commerce Gratiot County Child Advocacy Gratiot County Community Foundation Gratiot County Hope House Gratiot County Substance Abuse Coalition Gratiot Integrated Health Network** Gratiot-Isabella Great Start Collaborative Gratiot-Isabella RESD **Greater Lansing Food Bank** Isabella Citizens for Health Isabella Community Soup Kitchen Isabella County Child Advocacy Isabella County Commission on Aging Michigan Department of Health & Human Services Michigan Health & Hospital Association Mid-Michigan District Health Department Mt. Pleasant Area Chamber of Commerce Mt. Pleasant Farmers Market St. Louis Farmers Market **Ten16 Recovery Network** United Way of Gratiot and Isabella 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
	riousing and rionies	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
Economic		Child Food Insecurity Rate	14.7%	13.7%	14.2%	0%	Feeding America	2019
Stability		Children with Low Access to a Grocery Store	5.62%	1.26%	*	*	US Department of Agriculture: Food Atlas	2015
ousniy		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
	Nutrition and Healthy	Food Insecurity	14%	14%	14%	6%	County Health Rankings	2018
	Eating	Food Stamp/SNAP Benefits in the Past 12 Months	1,437	1,825	344,905	*	U.S Census Bureau	2019
	2 and 2	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
	Workplace	Mean Travel Time to Work (Minutes)	23.9	18.2	24.6	*	American Community Survey	2015-2019
	workprace	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
	Adolescents	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 Spedal Education Spending Time in Regular Education	*	*	*	73.3%	Healthy People 2030	
ducation 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
	Route	People 25+ with a High School Diploma of equivalent	91%	91%	91%		County Health Rankings	2015-201
		People 25+ with a right School Diploma of equivalent People 25+ with Some College, No Degree	25.7%	22.4%	23.4%		U.S Census Bureau	2019-201
-		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	*	*	32.370	73.3%	Healthy People 2030	2019
	Children	Students Not Proficient in Grade 3 English Language Arts (M-STEP)	58.8%	56.1%	57.2%	41.5%	Kids Count	2021
			_	51.4%	50.7%	41.5%		-
		Female Population	46.1%			*	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
		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%	4.1%	5.3%	*	County Health Rankings	2019
		Population White (Non Hispanic)	85.5%	85.2%	74.7%	*	County Health Rankings	2019
		Health Factors	42	46	*	*	County Health Rankings	2021
	Health Care Access and Quality - General	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 Months Due to Cost	*	*	8%	34.9%	Behavioral Risk Factor Survey	2020
		People with Dental Insurance	*	*	*	59.8%	Healthy People 2030	
		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	T.
		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 Canœr Institute	2014-201
		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	2014-201
Health Care		Breast Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	18.7	20.6	20.4	15.3	National Cancer Institute	2015-201
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 Surveillanœ System	2018
		Colorectal Canœr Incidenœ Rate (per 100,000 population)	43.1	47.0	37.2	*	National Cancer Institute	2014-201
		Colorectal Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	17.6	19.5	13.5	8.9	National Canœr Institute	2015-201
	Cancer	Colorectal Cancer Screening (Ages 50-75)	66.8%	68.2%	74.0%	74.4%	CDC - PLACES/CDC - NCCCP	2018
		Lung Cancer Inddent Rate (per 100,000 population, Age-Adjusted)	75.5	60.4	62.9	*	National Cancer Institute	2014-201
		Lung Cancer Mortality/Death Rate (per 100,000 population, Age-Adjusted)	48.1	40.6	42.3	25.1	National Canœr Institute	2015-201
		Lung Cancer Screening	*	*	*	7.5%	Healthy People 2030	1
		Lung Canœr Screening (Medicare population)	2%	2%	1%	*	Centers for Medicare and Medicaid Services	2020
		Mammogram Screening (Ages 50-74)	70.7%	73.6%	80.0%	77.1%	CDC - PLACES/BRFSS	2018
		Mammogram Screening (Medicare population)	31%	28%	28%	*	Centers for Medicare and Medicaid Services	2018
		Oral Cancer Detected at Earliest Stages	\$1%	28%	28%	34.2%	Healthy People 2030	2020
			10.7	9.3	12.0	34.2%	National Cancer Institute	2014-201
		Oral Cancer Incident Rate (per 100,000 population, Age-Adjusted)	*	9.3	82.5%			-
		Pap Test in Past 3 Years (Age 18+)				84.3% *	Behavioral Risk Factor Surveillance System	2016-201
		Prostate Cancer Incident Rate (per 100,000 population, Age-Adjusted)	75.8	76.5	107.3		National Cancer Institute	2014-201
		Prostate Canœr Mortality/Death Rate (per 100,000 population, Age-Adjusted)	15.1	12.6	18.4	16.9	National Canœr Institute	2015-201

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		Indicato r	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
		Swidde (per 100,000 population)	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	*	*	8	45%	Healthy People 2030	
	Oral Conditions	Peccentage 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
		Peccentage 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	
		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 femsles)	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
		Pezent 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
		Pessent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injuged 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 liveboon 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
		Mocbid (sevece) obesity due to excess calories	165	*	*	*	MyMichigan Health	2021
	Top 10 Inpatient MS- DRGs	Single livebom infant, delivered by cesarean	163	*	*	*	MyMichigan Health	2021
	Dittes	Maternal care for low transverse scar from previous cesarean delivery	77	*	*	*	Mr.Michigan Health	2021
		Acute kidner fulbure, unspecified	72	*	*	*	MyMichigan Health	2021
		Hypertensive heart and chronic kidney disease with heart fullure and stage 1 through stage 4 chronic						
		hidney disease, or unspecified chronic hidney disease	63	*	*	*	MyMichigan Health	2021
		Other malaise	62	-	~	*	MyMichigan Health	2021

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		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
		Fireann 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
		Seat Belt Usage			95.9%	*	Behavioral Risk Factor Survey	2020
		Injusy 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 Leisure 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	20.070	21.470		50.0%	satight four of frainly routi	2017-2010
		Pescentage of Middle School Students who Wese 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 Mostality (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 Mostality (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	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
		Pescentage 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 Manjuana 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
		Peacentage 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
		Peccentage 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	Percentge 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
		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
		Peccentage of Middle School Students who Used an Electronic Vapor Product During the Past 30 Days	4.5%	6.7%	*	10.5%	Michigan Profile for Healthy Youth	2017-2018
		Teen Tobacco Use	*	*	*	2.3%	Healthy People 2030	

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		Indicator	Gratiot	Isabella	Michigan	Healthy People 2030	Source	Date
		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	
	Social and Community	Adults Ever Diagnosed with Depression	23.1%	26.3%	*	*	Centers for Disease Control and Prevention - PLACES	2019
	Context - General	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	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
		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	Top 10 Referrals for	Food	3.70%	*	*	*	211	2021
Context	211	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
		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
	Top 10 Referrals for	Food	*	3.91%	*	*	211	2021
	211	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 Alma Department of Community Health

Project Title: Gratiot 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 Gratiot County. Information from this study will be used to develop programs in Gratiot 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 Gratiot County. In total, we hope to have 250 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 Gratiot 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 Meijer. 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.

	Please select only one answer unless otherwise specified. Please note that this survey is double-sided.		
1.	. Do you live in Gratiot County, Michigan?		
	O Yes O No		
2.	Do you currently live in:		
	O City of Ithaca O City of Alma O City of St. Louis		
	O Village of Breckenridge		
	O Township in Gratiot 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…		
	O Heterosexual/straight O Homosexual/gay/lesbian		
	O Bisexual O Prefer to self-describe:		
	O Prefer not to answer		
5. What is your age? (years)			
6	6. What is your race?		
	O Black or African American		
	O Asian or Asian American		
	O American Indian or Alaskan Native		
	O Native Hawaiian or Other Pacific Islander		
	O White or Caucasian		
	O Other:		
7.	7. Are you of Hispanic or Latino origin?		
	O Yes O No		
	(CONTINUE TO NEXT PAGE)		

8. Which of the following best describes your 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 school you have completed?			
O Less than high school degree	O 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?			
 Employed, working 40 or more hour 	rs per week O Homemaker		
O Employed, working 1-39 hours per	week O Full-time student		
O Not employed	O Retired		
O Disabled, not able to work			
11. What is your approximate average household income?			
O Less than \$20,000	○ \$70,000 to \$99,999		
○ \$20,000 to \$39,999	○ \$100,000 to \$149,999		
O \$40,000 to \$69,999	○ \$150,000 and up		
12. In the past 12 months, have there been three or more months in which you were not able to pay all of your bills or could not pay all of them on time because you did not have enough money?			
O Yes	O No		
13. Do you currently:			
O Own your primary home O F	Rent 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			
(CONTINUE TO NEXT PAGE)			

15. In the past 12 months, which mode of transportation did you primarily use to get to							
	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 your weight in pounds? 17.What is your height (in feet and inches)? Feet Inches						
18. Are you currently pregnant? O Yes O No							
19. In general, how would you rate your overall health? O Excellent O Fair							
O Ver	y Good			O Poor	r		
O Goo	bd						
20. How ofter O Alw	-	e seat belts	s when you	drive or ride ⊖ Rare			
O Usu	ally			O Neve	er		
O Sor	netimes						
21. Are you limited in any activities because of mental health or emotional health problems such as depression, anxiety, or feeling fearful or angry?							
O Yes	5			O No			
-			•		you to use spe pecial telephone		ent, such
O Yes	5			O No			

23.D	o you rely on people fe	or any of the following?		_
	- (L.)	Yes	No	
Ba	athing	0	0	
D	ressing	0	0	
S	hopping	0	0	
Ba	anking	0	0	
M	eals	0	0	
	the past 12 months, h Yes (Go to question 2	-		-
	No (Go to question 26			
	/ NO (GO to question 20)		
25. Di ya	id any of these falls ca our regular activities fo	use an injury? By an inj or at least a day or to go	ury, we mean the fall ca see a doctor.	used you to limit
0) Yes		ΟΝο	
26.H	ow often do you feel is	olated from others?		
0) Never	O Sometime	S	O Always
27.D	o you feel you belong	at home, work, your con	nmunity, or in any spec	ific group or place?
0) Yes		O No	
	o you feel that your fai oworkers care about y	nily or the people you li ou?	ve with, neighborhood,	community, and/or
0	Yes		O No	
		(CONTINUE TO N	EXT PAGE)	

38

B 1 1 1 1		Yes	No
	hat you didn't have enough to eat, had to wear dirty clothes, or protect or take care of you?	0	0
Did you lose a reason?	parent through divorce, abandonment, death, or other	0	0
Did you live wi suicide?	ith anyone who was depressed, mentally ill or attempted	0	0
	ith anyone who had a problem with drinking or using drugs, cription drugs?	0	0
Did your parer harm each oth	nts or adults in your home ever hit, punch, beat, or threaten to ner?	0	0
Did you live wi	ith anyone who went jail or prison?	0	0
Did a parent o down?	r adult in your home ever swear at you, insult you, or put you	0	0
Did a parent o in any way?	r adult in your home ever hit, beat, kick, or physically hurt you	0	0
Did you feel th special?	nat no one in your family loved you or thought you were	0	0
	ience unwanted sexual contact (such as fondling or nal intercourse/penetration)?	0	0
O Yes, within the O Yes, 1-5 years	sago		
O Yes, more tha			
O No, I have nev	ver thought of harming myself or ending my own life		
Have you ever at	ttempted suicide?		
O Yes	O No		
Have you persor	nally known anyone who ended his or her life by suicide?		
	O No		
O Yes			
○ Yes you or someone	e you know is struggling with thoughts of suicide, please ca Suicide Prevention Lifeline at 1-800-273-8255	all the Na	itional

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33. How much concern do you have for your child's safety while they are in childcare?

- O A lot O None
- O Some O I don't need childcare
- O A Little

34. How much stress does the cost of childcare put on you and your family budget?

- O A lot O None
- O Some O I don't need childcare
- O A Little
- 35. Please think about your personal satisfaction with the following in your community. In general, how satisfied are you with your <u>ACCESS</u> to (i.e., ability to obtain, retrieve, or participate in) 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
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 groups, parent education classes)	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
Affordable internet services	0	0	0	0	0	0
Quality childcare	0	0	0	0	0	0

(CONTINUE TO NEXT PAGE)

40

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

37. How could your cellphone and internet services in Gratiot County be improved?

38. On average, how many hours of sleep do you get in a 24-hour period? _____

39. Thinking about the activities you do when you are not working, in a usual week, did you participate in any physical activity for at least 10 minutes at a time, such as brisk walking, running, bicycling, vacuuming, yard work, or anything else that causes some increase in breathing or heart rate?

Yes (Go to question 40)

No (Go to question 42)

40. How many days per week did you participate in these activities for at least 10 minutes at a time?

days

41

41. When you take part in these activities, how long do you usually keep at it (minutes or hours)?

O Minutes	• O	Hours
-----------	-----	-------

42. In a typical week:

How many times per week do you engage in muscle strengthening activities?	
How many times per week do you engage in activities to improve flexibility?	
How many servings of fruit do you eat per day? Count fresh, frozen, or canned	
fruit; Do not count dried fruit or juice.	
How many servings of vegetables do you eat per day? Count fresh, frozen, or	
canned vegetables.	

43. In a typical week, do you drink the following beverages?

	Yes	No
Regular soda or pop	0	0
Energy drinks	0	0
Sugar-sweetened fruit drinks (not 100% fruit juice)	0	0
Sugar-sweetened flavored teas	0	0

44. In a typical week, do you purchase/get food from the following places:

	Yes	No
Grocery store	0	0
Convenience store	0	0
Fast food restaurant	0	0
Sit-down restaurant	0	0
Farmers market (when open)	0	0
Со-ор	0	0
Food pantry	0	0
Meals on Wheels	0	0
Other	0	0

(CONTINUE TO NEXT PAGE)

	Yes, every day	Yes, on some days	No
Smoke cigarettes	0	0	0
Use chewing tobacco, snuff, or any form of smokeless tobacco	0	0	0
Use e-cigarettes or vape	0	0	0
Have exposure to secondhand smoke	0	0	0

46. In a typical week, how many days per week do you have at least one alcoholic beverage?

days

47. On the days when you drink alcoholic beverages, about how many do you consume on average (one drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor)?

drink(s)

48. In the past 12 months:

	Yes	No	l don't drink
I felt like I wanted or needed to cut down on my drinking.	0	0	0
I have experienced negative consequences from my alcohol use.	0	0	0
I sought treatment or attended a support group to help with my alcohol use.	0	0	0

49. In the past 12 months, have you:

	Yes	No
Used prescription drugs that were not prescribed for you such as antidepressants, pain killers, sedatives or stimulants	0	0
Used marijuana for medical use	0	0
Used marijuana for recreational use	0	0
Used illegal drugs such as cocaine, crack, crystal meth, heroin, smack, PCP, LSD, uppers or downers (do not include marijuana)	0	0
Taken opioid (narcotic) pain killers	0	0

(CONTINUE TO NEXT PAGE)

	Yes	No	I don't use drugs
I felt like I wanted or needed to cut down on my drug use.	0	0	0
I experienced negative consequences from my drug use.	0	0	0
I sought treatment or attended a support group to help with my drug use.	0	0	0

51. If you felt you had a substance misuse problem, how likely would you be to go to the following for help:

	Very likely	Somewhat likely	Neither likely or unlikely	Somewhat unlikely	Very unlikely
Doctor	0	0	0	0	0
Therapist	0	0	0	0	0

52. Do you consider yourself in recovery from a substance use disorder?

- O No
- 53. Do you suffer from chronic pain (defined as persistent or recurrent pain lasting longer than 3 months)?

~ 110

54. If you felt you had a mental health problem, how likely would you be to go to the following for help:

	Very likely	Somewhat likely	Neither likely or unlikely	Somewhat unlikely	Very unlikely
Doctor	0	0	0	0	0
Therapist	0	0	0	0	0

55. Do you consider yourself in recovery from a past mental health issue?

- O Yes O No
- 56. Do you have any concerns about your (check all that apply):
 - O Memory
 - O Concentration
 - O Decision making that affects how you perform familiar tasks
 - O Confusion when driving in familiar locations
 - O None of the above apply to me

O Yes

O Yes

57. Do you feel safe at home?

O Yes

O No

58. 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 abused (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	0

59. Has a doctor, nurse, or other health professional ever told you that you have or have had any of the following?

	Yes	No
A heart attack, also called a myocardial infarction	0	0
Angina (chest pain from a heart problem) or coronary heart disease	0	0
A stroke	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	0	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 diabetes within the past three years?

O Yes

O No

61. A mammogram is an x-ray of each breast to look for breast cancer. How long has it been since you had a mammogram?

O Within the last year

O I have never had a mammogram

○ 1 – 2 years ago

O I do not have breasts

O > 2 years ago

62. A Pap test and/or an HPV test is a test you had a screening for cancer of the or	for cancer of the cervix. How long has it been since servix?
○ Within the last year	O ≥ 3 years ago
○ 1 – 2 years ago	○ I have never had a pap test
○ 2 – 3 years ago	O I do not have a cervix
	e a special kit at home to determine whether the been since you had your last blood stool test using a
 Within the last year 	○ > 3 years ago
O 1 − 3 years ago	○ I have never had a blood stool kit
64. When is the last time you had a colono	scopy 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
○ 6 – 10 years ago	
65. Did you receive a flu vaccination for th	e 2021-2022 flu season?
O Yes	O No
66. Have you been diagnosed with HIV or A	AIDS?
O Yes	O No
67. Do you currently have? (please choose	your primary source of insurance)
 An employer-sponsored health insurar 	nce plan
○ An individual plan purchased on the heat of the	ealth 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)	A high deductible plan is defined as \$1,400 for
O Yes	O No
69. Would you be able to pay an \$8,000 En O Yes, all at once O Yes, on	a payment plan O No

		Yes	No	
Needed to see a doctor but could not because of the cost?	?	0	0	1
Needed to see a doctor but could not because you could n appointment?	not get a	n O	0	
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		
Did you receive the COVID-19 vaccine?				
O Yes (Go to Question 73) O No	10-1-0	Question 7	74)	
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) 	es for P		doses	for M Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)?	es for P on 76)	fizer or 2	doses O U	Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? O Yes (Go to Question 75) O No (Go to Question If you answered "No" to Question 72, why didn't you re	es for P on 76)	fizer or 2	doses O U	Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? O Yes (Go to Question 75) O No (Go to Question If you answered "No" to Question 72, why didn't you re question if you answered "Yes" to Question 72)	es for P on 76)	fizer or 2	doses O U	Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? O Yes (Go to Question 75) O No (Go to Question If you answered "No" to Question 72, why didn't you re question if you answered "Yes" to Question 72) O Concerned about possible side effects	es for P on 76)	fizer or 2	doses O U	Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? O Yes (Go to Question 75) O No (Go to Question If you answered "No" to Question 72, why didn't you re question if you answered "Yes" to Question 72) O Concerned about possible side effects O Don't trust COVID-19 vaccines	es for P on 76)	fizer or 2	doses O U	Insure
If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? O Yes (Go to Question 75) O No (Go to Question If you answered "No" to Question 72, why didn't you re question if you answered "Yes" to Question 72) O Concerned about possible side effects O Don't trust COVID-19 vaccines O Don't trust the government	es for P on 76)	fizer or 2	doses O U	Insure
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) If you answered "No" to Question 72, why didn't you requestion if you answered "Yes" to Question 72) Concerned about possible side effects Don't trust COVID-19 vaccines Don't trust the government Plan to wait and see if it is safe 	es for P on 76)	fizer or 2	doses O U	Insure
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) No (Go to Question 72, why didn't you requestion if you answered "Yes" to Question 72) Concerned about possible side effects Don't trust COVID-19 vaccines Don't trust the government Plan to wait and see if it is safe Don't know if a COVID-19 vaccine will protect me 	es for P on 76)	fizer or 2	doses O U	Insure
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) No (Go to Question 72, why didn't you requestion if you answered "Yes" to Question 72) Concerned about possible side effects Don't trust COVID-19 vaccines Don't trust the government Plan to wait and see if it is safe Don't know if a COVID-19 vaccine will protect me Don't think COVID-19 is a threat 	es for P on 76)	fizer or 2	doses O U	Insure
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) No (Go to Question 72, why didn't you requestion if you answered "Yes" to Question 72) Concerned about possible side effects Don't trust COVID-19 vaccines Don't trust the government Plan to wait and see if it is safe Don't know if a COVID-19 vaccine will protect me Don't think COVID-19 is a threat Doctor has not recommended it 	es for P on 76)	fizer or 2	doses O U	Insure
 If yes, did you complete the initial series (either 2 dose or 1 dose for J&J Janssen)? Yes (Go to Question 75) No (Go to Question 75) No (Go to Question 72, why didn't you requestion if you answered "Yes" to Question 72) Concerned about possible side effects Don't trust COVID-19 vaccines Don't trust the government Plan to wait and see if it is safe Don't know if a COVID-19 vaccine will protect me Don't think COVID-19 is a threat Doctor has not recommended it Hard for me to get a COVID-19 vaccine 	es for P on 76)	fizer or 2	doses O U	Insure

•	se or a boo							
O Yes		O No				O Not	eligib	e
6. Since February 2020 (s	ince the beg	jinning of th	e CO	VID-19 p	ande	emic):		
						Yes	No	
Have you tested positive for COVID-19?					0	0		
Have you had a loved on to COVID-19?	e, close fam	ily members,	ora	friend die	due	0	0	
lf you <u>have not</u> tested pos	itive for CO	VID-19 since	e Feb	oruary 20	20, s	skip to Qu	iestio	n 79)
7. If you tested positive fo symptoms?	or COVID-19	, were you e	ver h	nospitaliz	ed f	or your C	ovid	-19
O Yes		O No)					
worsening mood.								
worsening mood. O Yes	O No			O Un:	sure			
O Yes		negative im	pact	on:	sure			
O Yes 9. Has the COVID₋19 pand			pact		sure			
O Yes 9. Has the COVID-19 pand Your employment		negative im	pact	on:	sure			
O Yes 9. Has the COVID-19 pand Your employment Your income security	lemic had a	negative im Yes	pact	on: No	sure			
O Yes 9. Has the COVID-19 pand Your employment	lemic had a	negative im Yes O	pact	on: No O	sure			
O Yes 9. Has the COVID-19 pand Your employment Your income security	lemic had a	negative im Yes O	pact	on: No O	sure			
O Yes 9. Has the COVID-19 pand Your employment Your income security Childcare (availability, ac	lemic had a	negative im Yes O O	pact	on: No O O	sure			
O Yes 9. Has the COVID-19 pand Your employment Your income security Childcare (availability, ac Use of transportation	lemic had a	negative im Yes O O O		on: No O O O	sure			
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1. Since the beginning of the COVID-19 pandemic, have	e you been newly diagn	osed with:				
Yes						
A substance use disorder	0	0				
Anxiety	0	0				
Depression	0	0				
Other mental health condition Please list:	0	0				

82. Overall, considering all the possible ways your life may have been impacted by the COVID-19 pandemic, how much has the pandemic impacted your day-to-day life?

- O It has not impacted my life at all
- O It has impacted my life a little
- O It has moderately impacted my life
- O It has extremely impacted my life

83. Since the beginning of the pandemic, has your:

	Significantly increased	Somewhat increased	No change	Somewhat decreased	Significantly decreased	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	0

84. Have you begun or increased substance use to cope with stress or emotions associated with the COVID-19 pandemic?

O Yes O No

85. Has the pandemic limited or impacted the supports you rely on to maintain/sustain your recovery from a substance use disorder?

O No

O Yes

O N/A

(CONTINUE TO NEXT PAGE)

δ. At any time during the pandemic, were you able to:			
	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 services through telehealth?	0	0	0

87. If you used telehealth, how satisfied are you with the quality of the telehealth experiences?

	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 concludes the survey.

Once complete, please return to MyMichigan Health by using the pre-stamped envelope provided. Please return by 3/1/2022.

(CONTINUE TO NEXT PAGE FOR GIFT CARD REDEMPTION)

		unity Health Improven Medical Centers Alma		
		Chronic Disease Prevention		
Goal: R	educe risk factors for chronic dis	ease by decreasing vape use and increas	sing healthy eating habits and phys	ical activity
Strategy	Description	Metrics	Internal Departments Involved	Community Partners
Create a "Teaching Kitchen" space hosted by MyMichigan Medical Center Alma	Design and build a "Teaching Kitchen" space within the Gratiot and Isabella county region to be used by MyMichigan Health and community partners to increase education and access to healthy eating skills	FY23: Establish a "Teaching Kitchen" location and internal construction plan FY24: Open a "Teaching Kitchen" space for use by MyMichigan Health and partnering agencies	Clinical Nutrition Services Community Health Diabetes Center Facilities Operations	Love INC of Gratiot County Mid-Michigan District Health Departmen MSU Extension St. Louis Farmers Market
		FY25: Provide education to at least 30 community members through the "Teaching Kitchen" space	Innovation Planning/Business Development	
Offer INDEPTH (American Lung Association) and <i>N-O-T: Not on Tobacco</i> (American Lung Association) in local schools	Partner with Isabella & Gratiot County schools to develop and maintain a "Reduced Suspension" program for students found vaping on school property. This program includes reducing the student's suspension by 1- 2 days, if they partake in 1-on-1 vape and tobacco counseling with a trained INDEPTH facilitator.	FY23: Train three facilitators in the N-O-T & INDEPTH programs in Gratiot County, and develop a plan to implement a tobacco and vape cessation program in Isabella County schools FY24: Train an additional 2 facilitators in the N-O-T and INDEPTH programs in Gratiot County, and establish a N-O- T/INDEPTH program to use in at least 2 Isabella County	Community Health Mt. Pleasant Pulmonology MyMichigan Medical Group	American Lung Association Gratiot County Schools Gratiot County Substance Abuse and Suicide Prevention Coalition Isabella County Schools Isabella County Substance Awareness Coalition Ten16 Recovery Network
		schools FY25: Assist at least 40 students per year with the Reduced Suspension program for vaping in Isabella County, and at least 100 students in Gratiot County	-	
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	FY23: Identify self-management program(s) and identify facilitators		CDSM Program Developers Gratiot County Commission on Aging Isabella County Commission on Aging MSU Extension
		FY24: Implement a program/workshop with 3 trained facilitators and 40 participants completed	Community Health Diabetes Center MyMichigan Medical Group	
		FY25: Perform a PDCA using FY24 results and have 5 trained facilitators with 80 participants completed	in finishing an incurse i stoup	
	Lifestyle Medicine is a medical specialty that uses therapeutic lifestyle interventions as a primary modality to treat chronic conditions	*System-Wide Metric*		ACLM Ithaca Seventh-Day Adventist Church Lifestyle Medicine Pivio
		FY23: Implement pilot year 1: 4 trained facilitators, 60 ConnectCare participants enrolled, 30 participants complete	Community Health Diabetes Center	
		FY24: Pilot year 2: expand to community, 4 trained facilitators, 60 participants complete	Employee Wellness MyMichigan Medical Group Rehab Services	
		FY25: Continue expansion, plan developed for SMAs, explore mandatory LM board certification for providers		

Community Health Improvement Plan MyMichigan Medical Centers Alma & Mt. Pleasant

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 Gratiot and Isabella County schools and the Gratiot County Substance Abuse and Suicide Prevention Coalition to				
	the schools. This program includes identifying teacher and student mentors to assist in providing depression awareness and suicide prevention	FY24: At least 2 schools in Gratiot County and 2 schools in Isabella County will adopt a peer support program, with at least 5 student and 3 faculty mentors identified in each school	Behavioral Health Community Health	Gratiot County Schools Gratiot County Substance Abuse and Suicide Prevention Coalition Isabella County Schools	
		FY25: At least 3 schools in Gratiot County and 3 schools in Isabella County will adopt a peer support program, with at least 5 student and 3 faculty mentors identified in each school			
Develop a Tobacco Cessation Strategy	Implement Tobacco Cessation tactics that		Ambulatory Clinical Quality Community Health MyMichigan Medical Group	American Lung Association Gratiot County Substance Abuse and Isabella County Substance Awareness Coalition Suicide Prevention Coalition	
	make it easier for patients and community members to receive counseling and support, and provide information and a channel for providers to refer patients.	FY24: Implement 3 tobacco cessation programs for patients and community members			
		FY25: Implement 5 tobacco cessation programs for patients and community members			
all staff employed at MyMichigan Medical Centers Alma and Mt Pleasant and	available for all staff employed at MyMichigan Medical Centers Alma and Mt. Pleasant and community members by utilizing the LivingWorks and QPR Institute	FY23: Develop a plan with education services and community partners to provide training for staff and the community	Behavioral Health Community Health Education Services and Development	Community Mental Health of Central Michigan Gratiot County Substance Abuse and Suicide Prevention Coalition Gratiot Integrated Health Network	
		Centers Alma and Mt. Pleasant and 50 community members trained in suicide prevention			
	to span a continuum of safety skills and incorporate common languages, philosophies and approaches for suicide			LivingWorks QPR Institute	
Implement "Blue Envelope Program" within MyMichigan Health outpatient clinics in Gratiot and Isabella counties	outpatient clinics servicing Gratiot and Isabella county residents. This protocol will empower staff to quickly activate a patient safety response at a moment's notice for a patient who verbalizes thoughts of suicide to a staff member.	FY23: Develop a plan for implementing a S.A.F.E. response protocol for MyMichigan Health outpatient departments in Gratiot and Isabella counties		Spectrum Health	
		FY24: 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	MyMichigan Medical Group		
		FY25: Establish a S.A.F.E. response protocol in 10 MyMichigan Health outpatient clinics/departments in Gratiot and Isabella counties and implement the Blue Envelope Program			

Community Health Improvement Plan MyMichigan Medical Centers Alma & <u>Mt. Pleasant</u>

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

Strategy	Description	Metrics	Internal Departments Involved	Community Partners	
Develop a MyMichigan Health Mobile Wellness Hub to be used across Gratiot & Isabella counties	Develop and implement a Mobile Health and Wellness Hub to be used at community events, health fairs and local businesses, allowing community members increased access to services like screenings, immunizations and education	FY23: Establish a detailed action plan and timeline for implementation of a Mobile Health and Wellness Hub	Community Health MyMichigan Health Outpatient Services MyMichigan Medical Group	Community Agencies Community Events	
		FY25: Service 100 people in the Gratiot & Isabella regions with the Mobile Health and Wellness Hub			
Integrate the use of Community Health Workers	into the MyMichigan Health workers into the MyMichigan Health care team. A Community Health Worker is considered a skilled trade public health worker that serves as a liaison between community, health care and public health.	*System-Wide Metrics*	Ambulatory Clinical Quality Care Management Community Health MCCO MyMichigan Medical Group	2-1-1 Northeast Everyday Life Consulting Michigan Community Health Worker Alliance Rural Community Health Worker Network	
		FY23: Sustain current CHW program and integrate within Care Management team with CHW supervisor in place			
		FY24: Hire/train 5 more Community Health Workers			
		FY25: Have 15 Community Health Workers on staff			
Increase access to health and wellness screenings within the community	Increase the number of free health screenings and risk assessments offered to the community by MyMichigan Health including: cancer, depression and stroke risk assessments, blood pressure, glucose and cholesterol screenings	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		Community Agencies Community Events	
		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	Behavioral Health Cardiology Community Health Diabetes Center		
		FY25: Promote biometric screenings (Stroke Risk Assessment, 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		
Community Health Improvement Plan appr	roved by the MyMichigan Medical Center Ce	ntral Region board on October 26th, 2022			