

THE FRAMEWORK: A STRATEGIC PLANNING MODEL

# The Framework: a Strategic Planning Model

In 2016, the St. Clair County Health Department contracted with VIP Research and Evaluation to carry out a full-scale Community Health Needs Assessment (CHNA) for St. Clair County - an initiative that would survey residents about their health status, health behavior, and health perceptions. The CHNA was the first of four countywide assessments that would be conducted in the development of the Community Health Improvement Plan. The other assessments, including the Forces of Change Assessment, the Local Public Health System Assessment, and the Community Themes and Strengths Assessment, are described below.

These assessments represent the cornerstones of the Mobilizing for Action through Planning and Partnerships (MAPP) framework, which is the premier planning process for community health assessment and strategic planning developed by the National Association of County and City Health Officials (NACCHO) to improve public health. The Health Department enlisted the help of the St. Clair County Metropolitan Planning Commission (MPC) to facilitate the overall planning process and the development of the final Community Health Improvement Plan (CHIP) document.

To create a shared vision and identify the strategic priority areas on which to focus, the planning team formed a CHIP Advisory Committee with representatives from various organizations to guide the



planning process and participate in the three assessments. The Advisory Committee had broad representation from an array of organizations that contribute to the delivery of essential public health services, community and economic development assistance, and recreation services in St. Clair County.

The MAPP framework provided the Advisory Committee with an opportunity to explore the health of St. Clair County residents through a wider lens by looking at forces of change in the community, community assets and resources, and the overall public health system in the county.

## COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

VIP Research and Evaluation was contracted by the St. Clair County Health Department to conduct a Community Health Needs Assessment (CHNA), which included a Behavioral Risk Factor Survey (BRFS).

The overall objectives of the CHNA included:

- → Gauging the overall health climate or landscape of St. Clair County as a whole, in addition to three specific regions (northeast, southern, western);
- → Determining positive and negative health indicators;
- ➔ Identifying risk behaviors;
- → Discovering clinical preventive practices;
- → Measuring the prevalence of chronic conditions and chronic pain;
- → Establishing accessibility of health care;
- → Ascertaining barriers and obstacles to health care;
- → Uncovering gaps in health care services or programs; and
- → Identifying health disparities.

The overall objective of the BRFS was to obtain information from St. Clair County adult residents about a wide range of behaviors that affect their health. More specific objectives included measuring each of the following:

- → Health status indicators, such as perception of general health, satisfaction with life, weight (BMI), and levels of high blood pressure;
- → Health risk behaviors, such as smoking, drinking, and physical activity;
- → Clinical preventative measures, such as routine physical checkups, oral health, and levels of cholesterol; and
- → Chronic conditions, such as diabetes, asthma, and cancer, and their management.

TABLE I: CHNA AND BRFS METHODOLOGY, DATA SOURCES, AND COMPLETES			
	Data Collection Methodology	Target Audience	Number Completed
Key Stakeholders	In-Depth Telephone Surveys	Hospital Directors, Clinic Executive Directors	11
Key Informants	Online Survey	Physicians, Nurses, Dentists, Pharmacists, Social Workers	65
Community Residents (Underserved)	Self-Administered (Paper) Survey	Vulnerable and Underserved Sub-Populations	456
Community Residents	Telephone Survey (BRFS)	St. Clair County Adults (18+)	I,204

This research involved the collection of primary and secondary data. Table I shows the breakdown of primary data collected with the target audience, method of data collection, and number of completes. Secondary data gathered from state and national databases was also used to supplement the overall findings.

On the positive side, most adult residents in St. Clair County report their general overall health status as good to excellent and most adults also report good physical health, the former of which is better than the state or the nation. Residents are satisfied with their lives and most often receive the social and emotional support they need.

Conversely, area adults have lower life expectancy rates (both men and women) and higher age-adjusted mortality rates than adults across the state or nation. Death rates from cancer, heart disease, chronic lower respiratory disease, and diabetes are higher than in Michigan or the U.S., the latter almost twice as high.

Among adults, chronic conditions that have to do with the respiratory system, such as Chronic Obstructive Pulmonary Disease (COPD) and asthma are more prevalent in St. Clair County than across Michigan or the U.S. On the other hand, the prevalence of heart disease (e.g., heart attacks, angina/ coronary heart disease, stroke) and cancer (both skin and non-skin) is lower compared to adults across Michigan and the U.S.

Almost two-thirds (64.2%) of area adults are overweight or obese, and the obesity rate (33.0%) for adults in the area is greater than state or national rates. Further, local health professionals perceive obesity to be one of the top health issues and they believe the community response to this issue has been insufficient.

More than one-fourth of adults report having been told they have high blood pressure and more than one -third report having been told they have high cholesterol. Both of these proportions are better than state or national rates. That said, the proportion of adults who have had their cholesterol checked is lower than in the state or the nation, so the prevalence of adults with high cholesterol could be even greater.

In terms of risk behaviors, smoking is problematic, with almost three in ten (28.1%) area adults classified as smokers, a rate substantially higher than across Michigan and the U.S. Area health professionals, especially Key Informants, feel that the high incidence of smoking is not being adequately addressed in the community.

Adult rates for heavy drinking and binge drinking are both higher than state and national rates. As above, Key Informants believe that the high incidence of alcohol abuse is not being adequately addressed in the community.

Area youth have lower rates of risk behavior such as smoking and marijuana use compared to youth across Michigan or the U.S. The perception of marijuana risk is lower in St. Clair County than the state or the U.S. Additionally, youth binge drinking rates are lower than in the U.S. but higher than state rates.

For high school students 75.6% of students saw a dentist for a checkup, exam teeth cleaning or other dental work in the past 12 months. Roughly 69.7% of the students saw a doctor or health care provider for a checkup or physical exam when not sick or injured in past 12 months.

There is a direct relationship, or at the very least a strong association, between positive health outcomes and both education and income; those with higher incomes and/or more education are more likely to report better health and greater satisfaction with life, and are more likely to have health coverage, visit a dentist, refrain from smoking, and exercise regularly. They are less likely to have chronic health conditions or high cholesterol.

Most adults engage in clinical preventive practices such as routine physical checkups and visiting a dentist. Still, dental care is a preventive practice that many neglect; one-third of area adults report not having visited a dentist in the past year.

Health care coverage has expanded in the last several years to where almost nine in ten area adults have health care coverage, and eight in ten have a medical home (primary care provider). The former proportion is better than state and national levels.

Despite an increase in insured residents, one in ten adults has had to forego a needed doctor visit due to cost in the past year, as deductibles, co-pays, and spend-downs can be prohibitive. A similarly widespread barrier exists with respect to dental care, for which many area adults are uninsured. Barriers to care are particularly prominent among the vulnerable/underserved population, such as the uninsured, underinsured, those on Medicaid, and those with low incomes.

In addition to the cost barrier, those with Medicaid find it hard to see a provider because increasingly more physicians refuse to accept Medicaid. This situation has created critical consequences for primary health care, mental health treatment, dental care, and substance abuse treatment.

Further, traditional health insurance often doesn't cover additional services such as prescription drugs, vision, or dental care. If consumers have to pay for these services out-of-pocket, the cost burden can be great and residents will avoid seeking necessary treatment or any type of preventive service.

Additional barriers to care include transportation, lack of awareness of existing programs and services, cultural barriers (fear of system, public misperception of the underserved), and the inability of some residents to secure appointments or get referrals.

Areas identified by Key Stakeholders, Key Informants, and residents as needing more services and programming are:

- → Substance abuse treatment;
- → Primary care, dental care, mental health care, and substance abuse treatment for the underserved (uninsured, underinsured, Medicaid, low income);
- → Mental health services for people with mild to severe conditions;
- → Affordable behavioral health services for those without a mental health diagnosis;
- → Specialty and subspecialty services, especially for pediatrics (cardiology, neonatology, endocrinology, behavioral/developmental, dietary) and geriatric care (behavioral, physical, social), ENT, allergists;
- → Better coordination and collaboration of programs, services, and resources;
- ➔ Prevention and wellness;
- → Community programs accessible to those with barriers to care such as transportation issues or limited incomes;
- → More accessibility to affordable and healthy food;
- ➔ Programs targeting obesity reduction;

- ➔ Programs that teach people how to cook/cook healthy foods;
- → More affordable housing; and
- → More/better child welfare services.

More details from the 2016 Community Health Needs Assessment can be found online at www.scchealth.co.

### FORCES OF CHANGE ASSESSMENT (FOCA)

This assessment activity focused on the identification of various forces (trends/events/factors) or impending legislative, social, economic, technological, legal, environmental, or scientific changes that may affect the overall health of the community or the local public health system. In January 2018, a "Forces of Change" questionnaire was distributed to key stakeholders in order to identify those forces that are or will be influencing the health and quality of life in St. Clair County and the work of the overall local public health system.

<u>Trends</u> are patterns over time, such as migration in and out of a community or growing disillusionment with government.

*Factors* are discrete elements, such as a community's large ethnic population, a rural setting, or the County's proximity to a major waterway.

<u>Events</u> are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

In carrying out the FOCA, the CHIP Advisory Committee attempted to answer two guiding questions:

- 1) What is occurring or might occur that affects the health of St. Clair County or the local public health system?
- 2) What specific threats or opportunities are generated by these occurrences?

At a March 28, 2018 CHIP Advisory Committee meeting, committee members engaged in further discussions centered on the results of the Forces of Change questionnaire and ultimately voted on what they felt were the most prominent forces of change. Following the discussion and analysis of the cross-cutting themes from all categories within the Forces of Change Assessment, the top ten prominent forces identified by the CHIP Advisory Committee were:

- → Opioid crisis/illegal drugs;
- → Unreliable/reduced funding for education, health care, infrastructure;
- → Weak mental health services;
- → Lack of workforce skills;
- → Digital communication replacing direct social interaction;
- → Public/private health coordination;
- ➔ Proliferation of misinformation;
- ➔ Aging population;
- → Politics invading/ignoring science;
- → Unstable home environments; and
- → Out migration from Michigan/St. Clair County.



## LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT (LPHSA)

The National Public Health Performance Standards (NPHPS) are the basis for the LPHSA. This standardized tool measures the performance of the local public health system (LPHS) - determined as the collective efforts of public, private, and voluntary entities, as well as individuals and informal associations that contribute to public health within a jurisdiction. This may include organizations and entities such as the local health department, other governmental agencies, healthcare providers, human service organizations, schools and universities, faith institutions, youth development organizations, economic and philanthropic organizations, and many others. Any organization or entity that contributes to the health or well-being of a community is considered part of the public health system.

The NPHPS Local Public Health System Assessment Report is designed to help health departments and public health system partners create a snapshot of where they are relative to the National Public Health Performance Standards and to progressively move toward refining and improving outcomes for performance across the public health system.

The St. Clair County LPHSA began with an online survey of CHIP Advisory Committee members, as well as additional stakeholders from the St. Clair County Health Department and local hospitals. In the survey, participants were asked to rate how well the overall health system in St. Clair County performs in each of the ten essential public health areas.

At the March 28, CHIP Advisory Committee meeting, members went through each of the ten essential public health areas and had a deep discussion on how each particular area scored and whether the group felt the survey results accurately portrayed the capabilities of the system in day-to-day operations.



Optimal Activity (76-100%)	The public health system is doing absolutely everything possible for this activity and there is no room for improvement.
Significant Activity (51-75%)	The public health system participates a great deal in this activity, but there remain opportunities for minor improvement.
Moderate Activity (26-50%)	The public health system somewhat participates in this activity and there is opportunity for greater improvement.
Minimal Activity (1-25%)	The public health system provides only limited activity and there is opportunity for substantial improvement.
No Activity (0%)	The public health system does not participate in this activity at all.

Throughout the discussions of the ten essential public health services, a number of cross-cutting themes emerged in the dialogue among the Committee and the ranked list of the essential services was adjusted based on the discussion amongst Committee members. In summary, the group ranked St. Clair County's local public health system as follows:

# Areas where the County's Local Public Health System has Significant Activity (i.e. the system participates a great deal in this activity, but there remains opportunities for minor improvements):

- I) Informing, educating, and empowering people about health issues;
- 2) Diagnosing and investigating health problems and health hazards;
- 3) Linking people to needed personal health services and assuring the provision of health care when otherwise unavailable;
- 4) Mobilizing community partnerships to identify and solve health problems;
- 5) Monitoring health status to identify community health problems;
- 6) Evaluating effectiveness, accessibility, and quality of personal and population-based health services;
- 7) Enforcing laws and regulations that protect health and ensure safety;
- 8) Developing policies and plans that support individual and community health efforts; and
- 9) Assuring a competent public health and personal health care workforce.

# Areas where the County's Local Public Health System has Moderate Activity (i.e. the system somewhat participates in this activity and there is opportunity for greater improvement):

10) Researching for new insights and innovative solutions to health problems.

Overall, the Committee felt that the County's best performance area is in informing and educating the public about health issues. Other discussion points centered on issues such as inconsistent policies among municipalities and organizations regarding support for public health and, while many agencies are increasing collaboration, there is still a need for improved coordination and communication.

## COMMUNITY THEMES AND STRENGTHS ASSESSMENT (CTSA)

The Community Themes and Strengths Assessment (CTSA) provides qualitative information on how communities perceive their health and quality of life concerns, as well as their knowledge of community

assets and resources. It informs a deep understanding of the issues that residents feel are important by answering the questions:

- → "What is important to our community?"
- → "How is quality of life perceived in our community?"
- → "What assets do we have that can be used to improve community health?"

In order to carry out the CTSA, the planning team studied pertinent questions and input related to health and quality of life perceptions from the CHNA data and also facilitated a series of focus group meetings in order to garner the input and concerns of key populations in the community.

Focus groups engaged for the CTSA included:

- → The Blue Water Young Professionals (online survey);
- → Yale Senior Center (onsite) May 11, 2018;
- → Washington Life Senior Center in Marine City (onsite) May 30, 2018; and
- → South Side Neighborhood, Faith Christian Community Church in Port Huron (onsite) May 22, 2018.

## **COMMUNITY THEMES & STRENGTHS: FOCUS GROUPS**

### Key Input from the Yale Senior Center Focus Group:

- → Concern about the drug issues happening in town;
- → Aging population different services required;
- → There are good opportunities for recreation;
- → Access to transportation is an issue. There is a lack of public transit options;
- → There are a large number of shut-ins in the community, due to illness or mobility issues;
- → Lack of shopping/services downtown... vacant buildings;
- → Only VA clinic in this part of the state is in Detroit;
- → There is a need for improved local mental health services;
- → Road and sidewalk conditions are poor; and
- $\rightarrow$  When there is a severe weather issue, there is no place for people to go for basic services.

### Key Input from the South Side Port Huron Focus Group:

- → There is a gap in support for addiction recovery;
- → People lack life skills;
- → Need to change policy makers' mindset;
- → Hunger and poor nutrition in the community. Lack of nutritional education;
- → Lack of access to healthy food;
- → Law enforcement needs a bigger presence to improve the relationship with the community;
- → There are strong community ties and support; great collaboration;
- → The area is "recreationally rich;"
- → Need to change perception and expectations of life quality;
- + There are people taking advantage of benefits. We need to truly help those that need assistance; and
- → We need to ensure children's basic needs are met.

# COMMUNITY THEMES & STRENGTHS: FOCUS GROUPS

#### Key Input from the Washington Life Center Focus Group:

- → Drug addiction (youth middle age) and alcohol intake is a big issue;
- → Cost of living is high;
- → Need more doctor house calls;
- → The baby boomers are aging;
- → Human trafficking is a big issue;
- → There are a lot of programs for activity and recreation;
- → Great entertainment choices with the theaters; helps mental health;
- → Marine City is a very helpful and supportive city;
- → Need better jobs for families;
- → Need more choices for transportation to other cities; and
- → Need finance and life skills classes.

#### Key Input from the Blue Water Young Professionals Focus Group:

- → Most important health-related issues are mental health, obesity, smoking, and opioid access;
- → We have great outdoor recreation opportunities non-motorized trails and water trails;
- → Need more resources for mental health;
- → Need more options for fresh produce and health foods;
- → Promote engagement and incentives in workplaces for healthy living choices;
- → Need to improve financial stability and education in the community; and
- → Better access to resources to support health not just another pamphlet.