

St. Clair County Community Health Improvement Plan 2023-2027

Planning Session #1

June 8, 2022



Welcome and Introductions

Please type your name and organization in the Chat Box at the bottom of your screen!



Opening Remarks: Jennifer Michaluk

Purpose and Objectives for Today's Session



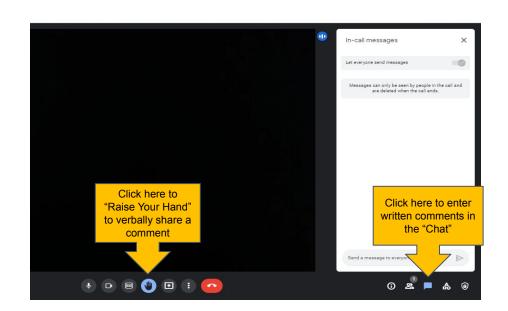
Housekeeping

This session is being recorded.

Participant audio has been muted.

This will be an interactive session. Please join via computer if possible.

Please enter any comments or questions in the CHAT box at anytime.





Today's Facilitator: Mary Kushion, MSA

25 years in governmental public health leadership

- Public and population health consultant
- Central MI University: Master of Public Health Program



Today's Agenda

Overview of CHIP Development Process

Review Current CHIP Summary Report

High Level Overview of 2021-2022 Community Health Needs Assessment

Identify Needs/Issues for 2023-2027 CHIP

Next Steps in Process



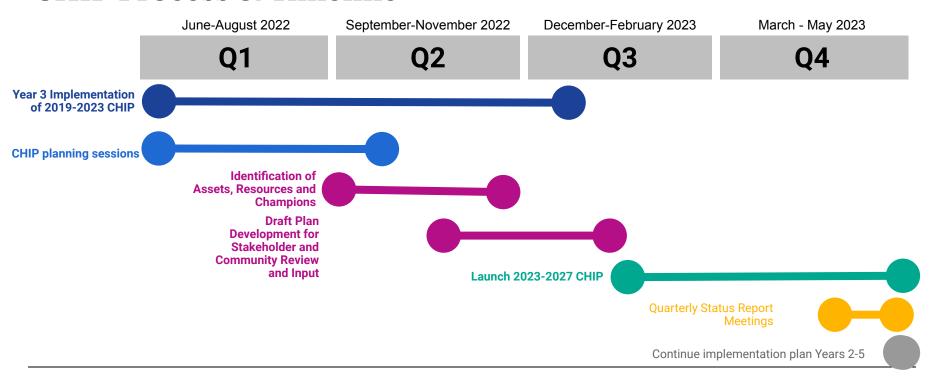


Overview of CHIP Development Process

- Review the results and outcomes from 2019-2023 CHIP: What has been accomplished? What still needs to be completed?
- Review the Community Health Needs Assessment Report
- Determine the current issues
- Of the current issues, which are significant?
- Of those that are significant what are the highest priority to address in the next CHIP?
- Develop goals, objectives and strategies to address priority needs
- Identify champions, assets and resources to implement the strategies
- Create a reporting system to monitor and evaluate implementation
- Seek community input on the draft plan



CHIP Process & Timeline





Review CHIP Summary Report

- The St. Clair County Health Department and community partners, stakeholders and community members developed its 2019-2023 Community Health Improvement Plan (CHIP)
- The current plan is set to end in December 2022
- Evaluation of the plan's accomplishments
- Community Partner Survey conducted February-March 2022





2019-2023 Priority Areas

- Chronic Disease Prevention and Management
- Access to Care
- Substance Abuse
- Mental Health
- Well-Being of Children and Adolescents
- Economic Opportunity
- Environmental Health

Priority Area	Accomplished (%)	•		Unknown (%)	
Chronic Disease Prevention and Management	0%	92.31%	7.69%	0%	
Access to Health Care	7.69%	92.31%	0%	0%	
Substance Abuse	0%	92.31%	7.69%	0%	
Mental Health	15.38%	84.62%	0%	0%	
Well-Being of Children and Adolescents	0%	76.92%	15.38%	7.69%	
Economic Opportunity	0%	92.31	7.69%	0%	
Environmental Health	0%	84.62%	15.38%	0%	

Policy Recommendation	% Started	% Implemented
Improving chronic disease management and education in the county, particularly cancer, pulmonary disease and chronic pain	10.00%	16.67%
Employee wellness programs that offer incentives for healthy eating and physical activity	10.00%	8.33%
Expanded educational and incentive programs for low-income families	10.00%	12.50%
Equipping healthcare providers with useful tools to motivate and refer their patients for weight management issues	10.00%	12.50%
Providing additional tools to navigate healthcare resources	20.00%	25.00%
Creating social and physical environments that promote good health for all people	17.50%	4.17%
Policies encouraging physical activity and good nutrition	12.50%	8.33%
Land use policies that promote walking and bicycling	5.00%	4.17%
Increasing healthy food options available at school cafeterias and extracurricular activities	2.50%	0.00%
Does not apply to my agency	2.50%	8.33%

Policy Recommendation	% Started	% Implemented	
High-quality, affordable, and accessible healthcare services for all	11.11%	14.81%	
Programs that support the well-being of the entire family across the life course	5.56%	7.41%	7
Support a collaborative approach to health promotion that recognizes the importance of including health considerations when making policy decisions (Health in All Policies/HiAP)	8.33%	7.41%	
Implementation of evidence-based and best practices to integrate behavioral health services into primary care and clinical care services	11.11%	7.41%	
Development and implementation of technology solutions that improve access to care, including telemedicine and telehealth	13.89%	7.41%	
Creating community-based services that coordinate and facilitate with clinical care	5.56%	7.41%	
Expanding and enhancing transportation options for those who have difficulty reliably travelling to all aspects of community engagement programs and health care services	5.56%	7.41%	
Expanding healthcare services in under-resourced areas via options such as co-locating, building new facilities and use of technology such as telemedicine	5.56%	7.41%	
Incorporating screenings for Social Determinants of Health and Adverse Childhood Experiences (ACEs) when assessing health status in clinical settings	11.11%	7.41%	
Leveraging partnerships and coalitions to move countywide health equity and HiAP forward	11.11%	11.11%	
Does not apply to my agency	11.11%	14.81%	

Table 4: S	ubstance Abu	se Priority Area

Policy Recommendations	% Started	% Implemented
Expanding upon existing school-based and community substance abuse education and preventions using evidence-based curriculum	6.67%	8.33%
Expanding and enhancing the youth-oriented prevention coalition, with attention to expanding grant opportunities for healthy communities	13.33%	8.33%
Improving tobacco treatment and prevention efforts, with an emphasis on vaping	6.67%	8.33%
Supporting substance abuse outreach and treatment to homeless/transient population	26.67%	25.00%
Working with school districts, colleges, and worksites to improve smoke-free policies of nicotine, <u>yaping</u> and marijuana use	6.67%	8.33%
Increasing health care providers utilization of behavioral health and substance abuse screening and treatment	6.67%	0.00%
Supporting quality control measures and expansions for sober living environments	0.00%	0.00%
Policies that increases alcohol and marijuana taxes and regulate alcohol and medical marihuana dispensary outlet density	0.00%	0.00%
Decreasing the amount of alcohol and tobacco advertising in local stores	0.00%	0.00%
Raising the legal age of purchasing tobacco products to 21	0.00%	0.00%
Ordinances that prohibit recreational growing facilities and dispensaries	0.00%	0.00%
Does not apply to my agency	33.33%	41.67%

Table 5: Mental Health Priority Area

Policy Recommendations	% Started	% Implemented
Promoting community support, attention, and awareness of risk factors for mental illness	18.92%	22.22%
Increasing community linkages and attention aimed at reducing stigma and discrimination toward mental illness	16.22%	14.81%
Improving access to mental health resources to the rural population of the county	13.51%	14.81%
Increasing the number of private health care providers accepting Medicaid insurance	0.00%	0.00%
Increasing the mental health awareness literacy of the public	10.81%	14.81%
Increasing the integration of behavioral health into primary care	8.11%	7.41%
Increasing mental health screening by primary care givers	2.70%	3.70%
Recruiting mental health staff in the areas where there are shortages, including general and pediatric psychiatrists and private clinical psychologists	5.41%	3.70%
Increasing the number of people who have been trained in Mental Health First Aid; and	13.51%	11.11%
Implementing "Zero Suicide Initiative" countywide	5.41%	3.70%
Does not apply to my agency	5.41%	3.70%

Policy Recommendations	% Started	% Implemented
upporting oral health programs and dental exam/dental home by ge 2	8.51%	5.56%
upporting the needs of families experiencing child hospitalizations nd other chronic diseases	4.26%	2.78%
acreasing child and adolescent vaccine rates (all recommended accines, not just required)	10.64%	11.11%
educing reported cases of child abuse and neglect by addressing ot causes through ACE's screening and early detection and revention	8.51%	8.33%
ssuring mothers receive early and effective prenatal care gardless of risk status and they and their infants have strong going supportive programs	6.38%	8.33%
educing teen pregnancy rates by expanding access to Title X family anning services, as well as providing evidence-based education on revention, abstinence, and healthy relationships	2.13%	2.78%
romoting strong, positive family engagement with positive ommunication and healthy relationships	10.64%	13.89%
ncouraging formal linkages between youth-servicing partners and emmunity based clinical services to provide quality teen friendly rvices	4.26%	2.78%
romoting early childhood development and school readiness rograms	10.64%	13.89%
apporting physical activity programs in preschool and childcare and reducing "screen time" during recreational time	4.26%	2.78%
reasing access to and acceptance of nutritious foods	10.64%	11.11%
romoting prevention, early identification, and interventions for sks for health and developmental delays	6.38%	5.56%
dopting the CDC's "Essential for Childhood Framework" ountywide	4.26%	0.00%
olicies and programs that reduce or eliminate bullying	2.13%	0.00%
dentify and support program that promote "resiliency" for adividuals and communities with high ACE's burden	0.00%	2.78%
oes not apply to my agency	6.38%	8.33%

olicy Recommendations	% Started	% Implemented
racting and retaining higher-wage employment opportunities to County	6.90%	8.00%
ventorying the full range of job training and workforce evelopment programs that exist within the County	3.45%	4.00%
he support of adult vocational training	3.45%	0.00%
he support of collaboration between employers and education roviders to build workers' skills	10.34%	8.00%
ncreasing awareness of the full impact and net gain of Blue Water liddle College enrollment	0.00%	0.00%
nproving the public transportation for the role it plays in mployment	0.00%	4.00%
ncouraging high-quality competency based occupational training rograms for working adults	3.45%	0.00%
ovesting in targeted education and training programs to provide nemployed or under-skilled workers with quality jobs and fill skills aps for local employers	3.45%	4.00%
ngaging business and industry to build relationships and derstand immediate and future workforce needs	10.34%	12.00%
acilitating collaboration and encouraging partnerships with all vistem partners to build a shared vision and strategy	6.90%	12.00%
ocusing on skill development and career paths for job seekers, arrent workers, and business and industry	10.34%	16.00%
he integration of foundational skills into relevant education and aining programs	3.45%	4.00%
acreasing the benefits that people acquire from subsequent eccupational training, and empower individuals to move along areer paths	6.90%	8.00%
roviding families with needed financial literacy training	10.34%	12.00%
afe, affordable housing for all County residents	6.90%	0.00%
oes not apply to my agency	13.79%	8.00%

Policy Recommendations	% Started	% Implemented
ducating local government officials and decision makers on the rincipals of the CDC's Health in All Policies (HIAP) approach	0.00%	0.00%
Ising national best practices for health considerations to be national into existing policies, plans and procedures	9.09%	13.33%
tudying transportation, planning, zoning, and development review rocesses to identify opportunities to incorporate health benefits and upact analyses into current policy frameworks	4.55%	6.67%
ctive participation by health-focused groups in regional efforts to uprove environmental health and enhance sustainability	9.09%	6.67%
mproving air quality and water quality in St. Clair County and the urrounding region	9.09%	13.33%
The development and implementation of pedestrian and bicycle naster plans	4.55%	0.00%
inking health-focused organizations with local and regional groups vorking outside public health (e.g. transportation departments, arks and recreation departments)	9.09%	6.67%
Developing recommendations and policies to mitigate the impacts of limate change on public health and the environment in St. Clair County	4.55%	13.33%
Clean, safe, and affordable housing options for all County residents	9.09%	0.00%
and use policies that protect valuable environmental, agricultural, nd water resources	4.55%	0.00%
improving access to affordable healthy foods	18.18%	20.00%
Does not apply to my agency	18.18%	20.00%



Should any issues be carried over to next CHIP?



Recommendation for Next CHIP

When developing goals and objectives for the 2023-2027 plan, it is recommended to have both be measurable and achievable. This is applicable to both the health status indicators and the policy recommendations. It is important to have baseline data (your starting point), time-framed targets for benchmark measurement (where do you hope to be at the end of each year of the plan) and desired data end-points.(the intended goal you hope to achieve).



2021-2022 Community Health Needs Assessment: Overview

Entire Report Was Sent as a Pre-Read

Today- High-Level Overview

Please Ask Questions in Chat Box or Raise Hand

St. Clair County 2021 Community Health Needs Assessment (CHNA)

Presented By:





Development and Composition



- Prepared by Martin Hill, Ph.D., President of VIP Research and Evaluation
- Dr. Hill also prepared the St. Clair County 2017 CHNA
- Collection of Primary Data:
 - Key Stakeholders*: In-depth telephone interviews (N=5)
 - Key Informants**: On-line survey (N=39)
 - Underserved St. Clair County Community Residents: Self-administered survey (N=332)
 - Community Residents: Behavior Risk Factor Survey (BRFS)(Telephone survey) (N=1,000)



*Key Stakeholders: Hospital Directors, Clinic Executive Directors

**Key Informants: Physicians, Nurses, Dentists, Pharmacists, Social Workers



Development and Composition (continued)



- Secondary Data Sources:
 - U.S. Census Bureau
 - Michigan Department of Health and Human Services (MDHHS)
 - County Health Rankings
 - Youth Risk Behavior Survey (YRBS)
 - Michigan Profile for Healthy Youth (MiPHY)
 - Kids Count Database





Physical Health



- Nearly 1 in 5 adults reported having fair/poor general health
- Adults living below the poverty line were twice as likely to report fair/poor general health compared to adults above the poverty line



Mental Health



- Roughly 1 in 6 adults reported having poor mental health
- Adults living below the poverty line were twice as likely to report poor mental health compared to adults above the poverty line
- Non-whites reported poor mental health at a rate 75% higher than the rate whites reported poor mental health





Social Determinants of Health



- Addressing certain social determinants of health, such as affordable housing, access to healthy food, and safe spaces will improve the overall health and health care climate of the region
- Negative social indicators, such as lack of housing, healthy food, and adverse childhood experiences (ACEs) can cultivate negative health outcomes







Chronic Disease



- Arthritis, Diabetes, Angina/Coronary Heart Disease, Stroke, and Cancer rates all increased from the 2016 Community Health Needs Assessment (CHNA)
- COPD rates decreased 16.7% from the 2016 CHNA
- Asthma decreased by 14.9% from the 2016 CHNA
- Diabetes prevalence increased over 60% from the 2016 CHNA





Mortality

point of view.

Mortality

state or cond.

ratio of death

deaths in an

- St. Clair County residents died at a higher rate than the state and country
- St. Clair County infants (under 1 year of age) was nearly 50% higher than the rate for the state and country
- St. Clair County children ages 1-14 had a mortality rate that was half of the rate for the state and country
- Heart Disease and Cancer remained the top two causes of death in St. Clair County
- COVID-19 became the third leading cause of death in 2020 for St. Clair County





Behavioral Risk Factors



- 3 out of 4 adult residents reported being obese or overweight
- Residents between the ages of 25 to 54 had the highest rates of obesity
- The percentage of residents that smoke cigarettes declined 36% compared to the 2016 CHNA
- Adults living below the poverty line were more than twice as likely to report being a current smoker than compared to adults above the poverty line



Behavioral Risk Factors (continued)



- The percentage of residents that are vaping/using E-cigarettes increased 78% compared to the 2016 CHNA
- Heavy drinking and binge drinking rates remained comparable to the 2016 CHNA rates but still significantly higher than state or national rates
- Only half of residents consume fruits daily and less than a third of residents consume vegetables daily





Adverse Childhood Experiences (ACEs)



- 2 out of 3 adults reported experiencing at least one adverse childhood experience (ACEs)
- Over 1 in 5 adults reported experiencing 4 or more ACEs
- There is a direct and linear relationship between the number of ACEs one experiences and negative outcomes later in life, including suicidal thoughts and attempts
- Women and non-white adults were more likely to report 4 or more ACEs than men and white adults, respectively
- Non-whites were more than twice as likely as whites to experience 4 or more ACEs





Adverse Childhood Experiences (ACEs) (continued)



Local ACEs Training is available





Environmental Concerns



- 7 in 10 Key Informants stated:
 - Water quality/quantity as the top environmental concern
 - Air quality and climate change were the next top concerns





COVID-19



- In 2020, COVID-19 became the third leading cause of death among St. Clair County residents
- In the general adult population, nearly 30% of adults reported their life became worse due to COVID-19
- Among underserved adults, nearly 60% reported their life became worse due to COVID-19
- Among underserved adults, the vaccination rate was significantly lower at 36% vaccinated for COVID-19 vs. 67% for the general adult population





COVID-19 (continued)



- 4 out of 5 adults reported that measures taken against COVID-19 make a difference
- Men were twice as likely as females to report that measures taken against COVID-19 did not make a difference
- Nearly 2 out of 3 adults reported receiving at least one dose of COVID-19 vaccine
- Among underserved adults the vaccination rate dropped to 36% vs. 67% for the general adult population





Questions about the 2021 St. Clair County CHNA?



Further questions about the CHNA, contact:

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CHNA and Secondary Data Sources



- For the full report of the 2021 St. Clair County CHNA, visit our website at: www.scchealth.co
- Secondary Data Sources:
 - o U.S. Census Bureau https://www.census.gov/quickfacts/stclaircountymichigan
 - Michigan Department of Health and Human Services (MDHHS)
 - County Health Rankings https://www.countyhealthrankings.org
 - Youth Risk Behavior Survey (YRBS)https://www.cdc.gov/healthyyouth/data/yrbs/results.htm
 - Michigan Profile for Healthy Youth (MiPHY)
 https://stclaircounty.org/PageBuilder/scchd/Offices/604?pageparent=537
 - Kids Count Database https://datacenter.kidscount.org





What Stood Out to You During the Data Overview?





Identifying Issues

Please type into the chat box the issues you believe need to be addressed in the next CHIP

Once you've entered your list, please take a five minute comfort break

Identified Issues

Chronic diseases

Access to care - low income/Persons of color

Mental health

Transportation

Housing/Homelessness

Inpatient Treatment/Recovery

Food deserts

Vaping

Substance Use/Abuse

Minority Health

Health equity

Human trafficking

Infant mortality

Daycare

Obesity/overweight

Health Impacts related to trauma and maltreatment



Next Steps in the Process

- Doodle Poll to Schedule Next Meeting
- Determine which of the identified issues are significant?
- Decide which are of the highest priority to address in the next CHIP?
- Develop goals, objectives and strategies to address priority needs
- Identify champions, assets and resources to implement the strategies
- Create a reporting system to monitor and evaluate implementation
- Seek community input on the proposed plan





Executive Team - Additional Members Needed

- Lisa Beedon
- Don Fletcher
- Debra Johnson
- Liz King



Questions?





Closing Comments and Contacts

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