St. Clair County Michigan

Community Health Improvement Plan 2023-2027



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Table of Contents

EXECUTIVE SUMMARY	3
COMMUNITY ENGAGEMENT	4
OVERALL GOAL	6
PRIORITY ISSUES	6
PRIORITIES CHOSEN	6
RESOURCE ASSESSMENT	7
ACTION PLANS	7
CROSS-CUTTING STRATEGIES TO ASSURE EQUITY AND INCLUSION	24
PROGRESS AND MEASURING OUTCOMES	24
Appendices	26
Appendix A: Planning Process Model	27
Appendix B: Alignment with National and State Priorities	28
Appendix C: Sample Data Points	29
Appendix D: Evidence-Based and Promisina Practices	32

EXECUTIVE SUMMARY

In 2021, St. Clair County began conducting community health needs assessments (CHNA) for the purpose of measuring and addressing health status. The most recent 2021 St. Clair County Community Health Needs Assessment, released in 2022, was cross-sectional in nature and included 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)

The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS) and the National Survey of Children's Health (NSCH). This has allowed St. Clair County to compare the data collected in their CHNA to national, state, and local health trends.

The St. Clair County CHNA also fulfills national mandated requirements for the hospitals in our county. H.R. 3590 Patient Protection and Affordable Care Act states that in order to maintain tax-exempt status, not-for-profit hospitals are required to conduct a community health needs assessment at least once every three years and adopt an implementation strategy to meet the needs identified through the assessment.

From the beginning phases of the CHNA, St. Clair County community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the project. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

The St. Clair County CHNA has been utilized as a vital tool for creating the St. Clair County Community Health Improvement Plan (CHIP). The Public Health Accreditation Board (PHAB) defines a CHIP as a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process. This plan is used by health and other governmental, education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. The plan also meets PHAB Domain 5, Standard 5.2: "Develop and implement community health improvement strategies collaboratively". A CHIP is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community inclusively and should be done in a timely way.

The St. Clair County Health Department hired Dr. Martin Hill of VIP Research and Evaluation firm to facilitate the community health needs assessment. Dr. Hill also conducted the 2017 CHNA. They also hired Mary Kushion Consulting, LLC to conduct an evaluation of the current community health improvement plan and to facilitate the community health improvement planning process. Several key community leaders participated in an organized process of strategic health improvement planning process, and developed the overarching goal to

"Implement a collaborative set of strategies in order to improve the health outcomes prioritized by community stakeholders ensuring equity and inclusion."

COMMUNITY ENGAGEMENT

The 2023-2027 St. Clair County Community Health Improvement Plan was developed in collaboration with the community partner organizations identified in Table 1. The 2023-2027 Community Health Improvement Plan was drafted by agencies and service providers within St. Clair County. During July 2022 – January 2023, the St. Clair County community partners reviewed many sources of information concerning the health and social challenges St. Clair County adults, youth and children may be facing. They determined priority issues which if addressed, could improve future outcomes, determined gaps in current programming and policies and examined best practices and solutions. The committee has recommended specific actions they believe many agencies and organizations will embrace to address the priority issues in the coming months and years. It is understood that the majority of the committee members represent multiple sectors in their professional and personal capacities. They both serve and represent at-risk populations within the county.

Table 1: Community Partners

Member Name	Organization
Allison Arnold	St. Clair County Library System
Alyse Nichols	St. Clair County Health Department
Amanda Biskner	Tri Hospital EMS
Amy Bishop	St. Clair County Health Department
Andrew Seppo	Operation Transformation
Arnie Koontz	Blue Water Area Rescue Mission
Becky Gorinac	St. Clair County RESA
Bishop Kimberly Brown	S.C.C.OR.E. Zion, BWAC
Brandon Fey	St. Clair County Health Department
Brent Gillette	United Way
Cassidy Livingston	St. Clair County Health Department
Christina Boyland	Turning Point, Inc.
Cindy Eckert	Region 10 PIHP
Dave McElroy	Blue Water Area Transit
Deb Johnson	St. Clair County CMH
Don Fletcher	Community Advocate

Member Name	Organization
Dr. Annette Mercatante	MDHHS Senior Public Health Physician
Dr. Najibah Rehman	St. Clair County Health Department
Dr. Sonali Vashi	McLaren Port Huron
Dr. Sushma Reddy	Endocrinologist
Erica Corbat	St. Clair County Health Department
Jennifer Michaluk	St. Clair County Health Department
Jerry Johnson	MSU Extension
Jim Kaski	Blue Water Immunization Partnership
Josh Chapman	Blue Water Area YMCA
Karry Hepting	St. Clair County Administrator
Katie Cox	Lake Huron Medical Center
Kelly DiNardo	McLaren Port Huron
Ken Heuvelman	Odyssey House
Kevin Totty	Community Foundation of St. Clair County
Kevin Watkins	Port Huron NAACP
Lisa Beedon	Blue Water Developmental Housing
Liz King	St. Clair County Health Department
Mary Kushion	Mary Kushion Consulting, LLC
Melinda Johnson	Blue Water Community Action Agency
Mike Baranowski	Community First Health Centers
Misty Wojnarowicz	Michigan Department of Health and Human Services
Patrick Patterson	Blue Water Recovery and Outreach Center
Richard Kroll	Blue Water Recovery and Outreach Center
Scott Crawford	Council on Aging
Sheriff Mat King	St. Clair County Sheriff's Office
Tracy Dunsmore	St. Clair County Community College
Tyronne Charles	Port Huron Housing Commission

OVERALL GOAL

Implement a collaborative set of strategies in order to improve the health outcomes prioritized by community stakeholders ensuring equity and inclusion.

PRIORITY ISSUES

- Mental and Behavioral Health
- Substance Use
- Obesity and Associated Health Behaviors

PRIORITIES CHOSEN

The partners came to consensus early on in the process that ensuring equity and inclusion were to be at the forefront of all issues. Using the <u>2022 St. Clair County Health Needs</u>
<u>Assessment</u>, the community partners initially identified health issues through a brainstorming and nominal group process. (Please see Appendix A for the complete planning process model and Appendix B for details related to the alignment with national and state health priorities) Those issues were then prioritized into six significant issues.

The six significant issues identified were as follows:

- 1. Mental and Behavioral Health
- 2. Substance Use
- 3. Obesity and Associated Health Behaviors
- 4. Infant and Child Health Care and Development
- 5. Chronic Disease
- 6. Equitable Access to Health Care Providers and Services

After additional discussions, the partners were provided a second electronic survey to rank the significant issues based on the magnitude of the problem, the need to address the issue for vulnerable populations, the capacity to address and make an impact, and the degree to which it was a concern and/or root cause of another issue within the county. Survey results are available upon request. Of the six significant issues identified, the stakeholders then identified three issues they considered the highest priority to address in the 2023-2027 improvement plan. (See Appendix C for survey results). The partners recognized that although the remaining three significant issues will not be specifically addressed in the 2023-2027 plan, there are organizations and initiatives underway within the county to address them.

- St. Clair County will focus on three priority areas over the next five years:
 - 1. Mental and Behavioral Health
 - 2. Substance Use
 - 3. Obesity and Associated Health Behaviors

RESOURCE ASSESSMENT

Based on the chosen priorities, The St. Clair County community partners were asked to complete a resource inventory for each priority issue. The resource inventory allowed the committee members to identify existing community resources and programs that could be leveraged to implement the strategies and achieve the goals and objectives.

ACTION PLANS

Each of the three priority issue areas has an overall goal, objectives and strategies. During the development process, the planning committee utilized data to create measurable objectives and thoughtfully considered implementation of evidence-based and promising practices. Appendix D includes the data points that align with the objectives. Appendix E contains promising practices considered during the planning process.

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Goal: To improve the mental and behavioral health of St. Clair County residents.

Objective:

Reduce the percentage of adults who report their mental health was not good 14 or more days per month from 15.6% to 12.6% or lower by December 2027.

The rate for MI was 15.8% and the US was 13.2%. In the 2016 CHNA the St. Clair County rate was 11.6%. The prevalence of poor mental health is inversely related to age and income. Women and non-white adults are more likely to report poor mental health than men or white adults, respectively.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Increase awareness of services available within the county	Priority Outcome: Improve mental and behavioral	Persons 18-24 with less than a high school degree Persons 18-24 with low socioeconomic status	 St. Clair County Community Mental Health Authority St. Clair County Community College St. Clair County RESA Youth Advisory Council 	2023
	Seek resources to implement evidence-based programs	health.	Persons 18-24 with less than a high school degree Persons 18-24 with low socioeconomic status	• Teen Health	2023
Year 2:	Promote the use of telemental health services and the National Suicide Prevention Lifeline "988" organization	Priority Indicator: Percentage of adults who report their mental health was not good 14 or more days per month.	Persons 18-24 with less than a high school degree Persons 18-24 with low socioeconomic status	 St. Clair County Community Mental Health Authority (TalkSpace) St. Clair County Community College St. Clair County RESA Youth Advisory Council Safe Horizons 	2024
Year 3:	Reduce stigma around mental health with special emphasis on the		Black Males	St. Clair County Community Mental Health Authority (TalkSpace)	2025

	Black male population		 St. Clair County Community College St. Clair County RESA Youth Advisory Council Safe Horizons Office of Diversity, Equity and Inclusion Council on Aging Adolescent Workgroup CSCB
Year 4:	Offer transportation assistance to mental health appointments	Persons 18-24 with less than a high school degree Persons 18-24 with low socioeconomic status	 Michigan Department of Health and Human Services St. Clair County Community Mental Health Authority Blue Water Area Transit Council on Aging Medicaid Health Plans

Goal: To improve the mental and behavioral health of St. Clair County residents.

Objective:

Reduce the percentage of teens who report being depressed in the past 12 months from 42.3% to 36.4% or lower by December 2027.

The 42.3% number came from the 2019-2020 St. Clair County MiPHY survey of high school students. The rate for MI (2019) was 36.4% and the rate for the US (2019) was 36.7%.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Promote behavioral health screenings at primary care provider visits for individuals 8-18 years of age	Priority Outcome:	Teens	 St. Clair County Medical Society St. Clair County Community Mental Health Authority 	2023
	Assess and monitor screening tools currently used; PHQ-9 (See evidenced-based practices for additional details)	Improve mental and behavioral health.	Teens	 St. Clair County Medical Society St. Clair County Community Mental Health Authority 	2024
Year 2:	Provide education to parents on limiting child's social media screen time and the signs associated with childhood depression	Priority Indicator: Percentage of teens who report being depressed in the past 12	Teens	Radio FirstSt. Clair County Health Department	2024
Year 3:	Peer support networks	months.	Teens	 National Honor Society Youth Advisory Council LGBTQ+ Groups Blue Water YMCA Building Community Partners Workgroup 	2025

Year 4:	Implement School-based Anti-bullying Interventions (See evidence-based practices for additional details)	Teens	St. Clair County RESAI.M.P.A.C.T.	2026
Year 5:	Community Wide Drop Box (anonymous comment drop box)	Teens		2027

Goal: To improve the mental and behavioral health of St. Clair County residents.

Objective:

Reduce the five-year moving average rate of suicide by 20% by December 2027. (Initial rate was 20.8 as of 2016-2020 and the target rate was 16.4. All rates are per 100,000 residents and age-adjusted using the direct method.)

Michigan five-year statewide rate was 14.0 (2016-2020). St. Clair County rates by age; Under 25 years old was 7.4, Age 25-74 years was 26.4, Age 75 & older was 29.8 (2016-2020).

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Offer peer support groups; focus on adult males	Priority Outcome: Reduce suicide rates. Priority	Adult Males	CSCB Suicide Prevention CommitteeHuron HouseJails	2023
Year 2:	Improve coordination of care between EMS and mental health organizations	Indicator: Five-year moving average rate of suicides.	General Population	PoliceSheriffTri-County EMSFirefighters	2024

Goal: To improve the mental and behavioral health of St. Clair County residents.

Objective:

Reduce the number of adults who reported experiencing an adverse childhood experience from 66% to 60% or less by December 2027.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Assess the feasibility to implement a Trauma Informed Community Building (TICB) model to build community resilience	Priority Outcome: Reducing adverse childhood experiences Priority	Adults	 St. Clair County Community Mental Health Authority St. Clair County Health Department 	2023
Year 2:	Provide ACES Champions training to interested community members and organizations	Indicator: Percentage of adults reporting experiencing an adverse childhood experience	Adults	 St. Clair County Community Mental Health Authority St. Clair County Health Department MSU Extension 	2024

Goal: To reduce substance abuse rates, unintentional injuries, and drug-induced deaths for St. Clair County residents.

Objective:

Reduce the annual crude rate of drug-induced deaths by 20% by December 2027. (The 2020 drug-induced crude mortality rate for St. Clair County was 37.0 per 100,000 residents. Our goal would be 29.6 per 100,000 residents).

The current 2020 statewide rate was 29.5 per 100,000. St. Clair County did have a rate below 29.6 in all but one year from 1980 to 2015. In 2016 the crude rate for St. Clair County jumped to 46.4 per 100,000 residents

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	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Increase naloxone training and accessibility in community	Priority Outcome: Reduce drug- induced deaths Priority Indicator: Annual crude rate of drug- induced deaths	General Public Healthcare Providers Public Safety Schools Workplace Churches Jails	 Port Huron Odyssey House Blue Water Recovery and Outreach Center St. Clair County Health Department St. Clair Community Mental Health Authority 	2023-2024
	Naloxone training and naloxone for newly released prisoners		Jails	 St. Clair County Sheriff's Office Port Huron Odyssey House Online training options 	2023-2027
	Training providers on Medication- Assisted Treatment (MAT)		Healthcare Providers Emergency Department Physicians	 St. Clair County Medical Society Michigan Opioid Collaborative St. Clair County Community Mental Health Authority Community First Health Centers 	2023-2027

	Implement SUD recovery programs to increase the success rates of those coming out of treatment program	Healthcare Providers	 Blue Water Recovery and Outreach Center Port Huron Odyssey House St. Clair Community Mental Health Authority Recovery Court 	2023-2027
Year 2:	Overdose Fatality Review	General Public	Community Services Coordinating Body	2024
Year 3:	Community education on severity of problem	General Public	 SUD Prevention, Treatment, and Recovery Committee Port Huron Odyssey House St. Clair County Health Department Blue Water Recovery and Outreach Center St. Clair Community Mental Health Authority 	2025
Year 4:	Messaging on importance of not using drugs alone	General Public	 St. Clair County Health Department Blue Water Recovery and Outreach Center Port Huron Odyssey House St. Clair Community Mental Health Authority SUD Prevention, Treatment, and Recovery Committee Recovery Organizations 	2026

Goal: To reduce substance abuse rates, unintentional injuries, and drug-induced deaths for St. Clair County residents.

Objective:

Reduce the percentage of adults of binge drinking within the past 30 days from 24% to 20% by December 2027.

The statewide percentage for binge drinking among adults within the past 30 days was 17.4% and nationally the percentage was 15.9%.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Create more sober events	Priority Outcome: Reduce drug- induced deaths Priority Indicator: Annual	General Public Special emphasis on adults 18-34. Healthcare Providers Public Safety Schools Workplace Churches Jails	 Blue Water Recovery and Outreach Center Port Huron Odyssey House Other Recovery Organizations Dry Dock Recovery Room 	2023-2024
	Promotion of healthy coping mechanisms	crude rate of drug- induced deaths	Healthcare Providers General Public	 Blue Water Recovery and Outreach Center Port Huron Odyssey House Other Recovery Organizations SUD Prevention, Treatment, and Recovery Committee CAHC 	2023-2027
Year 2:	Law enforcement presence at social district events (education)		General Public	 St. Clair County Sheriff's Office Local Law Enforcement 	2024

Year 3:	Employee assistance programs -revamp	General Public	 Local HR Departments at Workplaces 	2026
Year 4:	Decrease access to alcohol (sellers)		 Vendor Education for Alcohol and Tobacco 	2027

Goal: To reduce substance abuse rates, unintentional injuries, and drug-induced deaths for St. Clair County residents.

Objective:

Reduce the prevalence of St. Clair County teens currently using vaping products from 24.2% to 20% or less by December 2027.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	More vaping education in middle school	Priority Outcome: Reduce	Schools Parents of Middle Schoolers Parent/Teacher Organizations	 St. Clair County Health Department St. Clair County School District Health Teachers and School Nurses 	2023- 2024
	Marketing campaign to promote MI Tobacco QuitLink- vaping cessation	drug- induced deaths Priority Indicator: Annual crude rate of drug- induced deaths	General Population	 Schools St. Clair County Health Department Michigan Department of Health and Human Services- Tobacco Section SUD Prevention, Treatment, and Recovery Committee Healthcare Provider Offices 	2023- 2027
Year 2:	Creative enforcement if found on minors in school		General Public Schools	 Schools I.M.P.A.C.T. St. Clair County Health Department SUD Prevention, Treatment, and Recovery Committee 	2024
Year 3:	Advocacy to make vaping detectable (add smell) – state, national policy		General Public	• Schools	2025

Year 4:	More social media outreach campaigns from the health department/MDHHS about the effects of vaping	General Public	 St. Clair County Health Department Michigan Department of Health and Human Services- Tobacco Section SUD Prevention, Treatment, and Recovery Committee 	2026
Year 5:	Advertise vendors that follow the rules during stings, not just violators	General Public	 I.M.P.A.C.T. Law Enforcement SUD Prevention, Treatment, and Recovery Committee Times Herald 	2027

Goal: To reduce substance abuse rates, unintentional injuries, and drug-induced deaths for St. Clair County residents.

Objective:

Decrease the average number of days from initial request to get into substance use disorder (SUD) treatment to SUD treatment intake from 6.8 to 4.8 by December 2027.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Increase Community Based Organization's (CBO)	Priority Outcome: Reduce drug- induced deaths Priority Indicator: Annual crude rate of drug- induced deaths	General Public Adults requesting treatment services. Healthcare Providers Public Safety Schools Workplace Churches Jails	 St. Clair County Health Department Blue Water Recovery and Outreach Center Port Huron Odyssey House St. Clair Community Mental Health Authority Sacred Heart 	2023- 2024
	Navigate transportation to treatment	Priority Outcome: Reduce drug- induced deaths Priority Indicator: Annual crude rate of drug- induced deaths	Healthcare Providers	 Blue Water Recovery and Outreach Center Port Huron Odyssey House St. Clair Community Mental Health Authority Dry Dock 	2023- 2027
Year 2:	Educate families on available resources/advisory group	Priority Outcome: Reduce drug- induced deaths	General Public	 St. Clair County Health Department Blue Water Recovery and Outreach Center 	2024

		Priority Indicator: Annual crude rate of drug- induced deaths		 Port Huron Odyssey House St. Clair Community Mental Health Authority United Way SUD Prevention, Treatment, and Recovery Committee 	
Year 3:	Crisis stabilization center	Priority Outcome: Reduce drug- induced deaths Priority Indicator: Annual crude rate of drug- induced deaths	General Public	Women of domestic violence, men's shelter, warming centers, be warm	2025

Priority Issue: Obesity and Associated Health Behaviors

Goal: To reduce the overweight and obesity rates and increase healthy behaviors of St. Clair County residents

Objective:

Reduce the percentage of high school students who are obese from 20% to 17% and the percentage of high school students who are overweight from 15% to 12% or less by December 2027.

As of the most recent data on our middle school students their obesity rate was 21.1% and overweight rate was 18.1% which likely means that without intervention our rate of obesity and overweight will increase in the high school group and among our young adults. Obesity was considered at or above 95th percentile for BMI by age & sex and overweight being within the 85th to 95th percentile.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
	Physical education classes other than gym in schools	Priority Outcome: Reduce obese and overweight adolescents Priority Indicator: Percent of high school students who are obese or overweight	Adolescents	 Port Huron Area Parks and Rec. Faith-Based Community Blue Water Area YMCA Blue Water Area Transit St. Clair County RESA 	2023
Year 1:	Peer-to-peer counseling		Adolescents	St. Clair County RESAFaith-Based CommunitySt. Clair County Health Department	2023
	Social media campaigns		Adolescents	 St. Clair County RESA Faith-Based Community St. Clair County Health Department Blue Water YMCA 	2023

Priority Issue: Obesity and Associated Health Behaviors

Goal: To reduce the overweight and obesity rates and increase healthy behaviors of St. Clair County residents

Objective:

Reduce the percentage of adults who are obese from 42.7% to 36.0% and the percentage of adults who are overweight from 31.8% to 25.0% or less by December 2027.

The Michigan percentage was 35.3% and the US percentage was 21.9% for obesity. The Michigan percentage was 34.6% and the US percentage was 35.2% for being overweight.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Offer in-person and virtual food prep classes	Priority	Overweight and obese adults	 MSU Extension St. Clair County Schools Thumbcoast Tv Faith-Based Community Community Gardens 	2023
	Offer health and wellness program incentives	Outcome: Reduce obese and overweight adolescents .	Overweight and obese adults	 St. Clair County Library Systems MSU Extension St. Clair County Schools MiGardener Faith Based Community Community Gardens 	2023
Year 2:	 Social media campaigns that promote healthy lifestyles 	Indicator: Percent of high school students who are obese or overweight	Overweight and obese adults	 St. Clair County RESA Faith-Based Community St. Clair County Health Department 	2024
Year 3:	 Encourage healthy foods for low- income individuals and families 		Overweight and obese adults	 St. Clair County RESA Faith-Based Community St. Clair County Health Department Community Gardens Seed Banks St. Clair County Library 	2025

Priority Issue: Obesity and Associated Health Behaviors

Goal: To reduce the overweight and obesity rates and increase healthy behaviors of St. Clair County residents

Objective:

Decrease the percentage of adults who report no leisure time physical activity from 25% to 22% by December 2027.

The margin for error of this metric was 23-28% for St. Clair County. A goal of 22% for our county would put us outside the current margin for error. The state average was currently 25% and the US average was 26%.

	Strategies:	Priority Outcome and Indicator:	Priority Population(s):	Primary and Secondary Person(s)/Organization(s):	Timeline:
Year 1:	Memberships to gyms	Priority Outcome: Increase adults who engage in leisure time physical activity Priority Indicator: Percent adults who report no leisure time physical activity	Adults	Blue Water Area YMCASC4 FieldhouseWalking ClubsSchool Districts	2023
	Promote health programs at places of employment		Adults	 Blue Water Area YMCA SC4 Fieldhouse Walking Clubs School Districts Local Employers 	2023
	 Increase access to exercise opportunities 		Adults	 Blue Water Area YMCA Faith Based Communities SC4 Fieldhouse School Districts Birchwood Mall 	2023
Year 2:	Coordinate community walks offered in AM and PM		Adults	 Blue Water Area YMCA Faith Based Communities SC4 Fieldhouse School Districts Birchwood Mall 	2024
Year 3:	Increase access to public fitness classes at YMCA		Adults	Blue Water Area YMCA	2025

CROSS-CUTTING STRATEGIES TO ASSURE EQUITY AND INCLUSION

Cross-cutting Outcomes

In addition to tracking progress on the CHIP priority outcome objectives, St. Clair County will evaluate the impact of strategies implemented by also measuring progress on a set of cross-cutting outcome objectives. Examples of cross-cutting outcomes are listed below.

Social determinants of health: Examples of crosscutting outcomes that address all priorities

- Advocate for complete streets to improve walkability and bike ability
- Improve access and attainment of proper foods
- Advocate for the enhancement of a fully coordinated transportation system
- Support the attainment of a high school education or higher

Prevention, public health system and health behaviors: Examples of cross-cutting outcomes that address all priorities

- Increase vegetable consumption among all age groups
- Reduce adult smoking and binge drinking
- Reduce youth all-tobacco use, special emphasis on e-cigarettes
- Promote community and individual activities aimed at reducing stress and social isolation

Healthcare system and access: Examples of cross-cutting outcomes that address all priorities

- Assure cultural competency training is offered all health professionals in private and public healthcare settings
- Assure training on trauma-informed care is offered to all health professionals in private and public healthcare settings

PROGRESS AND MEASURING OUTCOMES

The progress of meeting the local priorities will be monitored with measurable indicators identified for each strategy found within the action step and recommendation tables within each of the priority sections. The individuals/agencies that are working on action steps will meet quarterly. The full committee will also meet quarterly to report progress. The committee will form a plan to disseminate the Community Health Improvement Plan to the community. Action steps, responsible person/agency, and timelines will be reviewed at the end of each year by the committee. Edits and revisions will be made accordingly.

St. Clair County will continue facilitating a Community Health Assessment every 5 years to collect and track data. The next Community Health Assessment is scheduled to take place in 2026. Primary data will be collected for adults, youth and children using national sets of questions to not only compare trends in St. Clair County, but also be able to compare to the state, the nation, and Healthy People 2030. This data will serve as measurable outcomes for each of the priority areas.

In addition to outcome evaluation, process evaluation will also be used on an ongoing basis to focus on how well action steps are being implemented. Areas of process evaluation that the CHIP

committee will monitor will include the following: number of participants, location(s) where services are provided, number of policies implemented, economic status and racial/ethnic background of those receiving services (when applicable), and intervention delivery (quantity and fidelity).

Furthermore, all action steps have been incorporated into a Progress Report template that can be completed at all future St. Clair County CHIP meetings, keeping the committee on task and accountable. Progress reports may also serve as meeting minutes.

Contact Us

For more information about any of the agencies, programs, and services described in this report, please contact:

Cassidy Livingston
St. Clair County Health Department
Health Educator
Email: clivingston@stclaircounty.org

Phone: 810-987-5300 ext. 1417

Appendices

Appendix A: Planning Process Model

Appendix B: Alignment with National and State Priorities

Appendix C: Prioritization Survey Results

Appendix D: Sample Data Points

Appendix E: Evidence-Based and Promising Practices

Appendix A: Planning Process Model

Beginning in July 2022, The St. Clair County Community Health Partners met six (6) times and completed the following planning steps:

- 1. Initial Meeting- Review of process and timeline, finalize committee members, create overall goal
- 2. Choosing Priorities- Use of quantitative and qualitative data from 2022 CHNA to identify health problems; survey community partners to identify significant issues
- 3. Ranking Priorities- Use of a Likert scale ranking method based on magnitude, needs of vulnerable populations, capacity to address, measurable impact potential, concern within county and root cause of another significant issue, community members identified the top three priorities to be addressed in the 2023-2027 CHIP
- 4. Resource Assessment- Determine existing programs, services, and activities in the community that address the priority target impact areas and look at the number of programs that address each outcome, geographic area served, prevention programs, and interventions
- 5. Gap Analysis- Determine existing discrepancies between community needs and viable community resources to address local priorities; identify strengths, weaknesses, and evaluation strategies; and strategic action identification
- 6. Best Practices- Review of best practices and proven strategies, evidence continuum, and feasibility continuum
- 7. Draft Plan- Review of all steps taken; action step recommendations based on one or more the following: enhancing existing efforts, implementing new programs or services, building infrastructure, implementing evidence-based practices, and feasibility of implementation

Appendix B: Alignment with National and State Priorities

The 2023-2027 St. Clair County Health Improvement Plan priorities align with national priorities. St. Clair County will be addressing the following priorities:

U.S. Department of Health and Human Services National Prevention Strategies

The St. Clair County Plan also aligns with six (6) of the National Prevention Strategies for the U.S. population: healthy eating, active living, injury and violence free living, mental and emotional well-being and preventing drug abuse and excessive alcohol use.

Healthy People 2030

- St. Clair County's priorities also fit specific Healthy People 2030 goals. For example:
 - Mental Health and Mental Disorders (MHMD-03) Increase the proportion of children with mental health problems who get treatment
 - Mental Health and Mental Disorders (MHMD-04) Increase the proportion of adults with serious mental illness who get treatment
 - Nutrition and Weight Status (NWS-04) Reduce the proportion of children and adolescents with obesity
 - Nutrition and Weight Status (NWS-03) Reduce the proportion of adults with obesity
 - Substance Abuse (SU-R01) Increase the proportion of adolescents who think substance abuse is risky
 - Substance Abuse (SU-15) Reduce the proportion of people who had drug use disorder in the past year

Michigan Health Improvement Plan

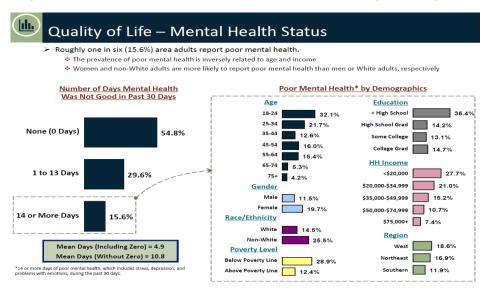
As of January 1, 2023, the state of Michigan does not have a state health improvement plan. The state conducted a community health needs assessment in 2019, but as of the publication date of the 2023-2027 St. Clair County CHIP, a Michigan State Health Improvement Plan has not been completed. St. Clair County will continue to receive updates on the progress and identified priorities within the state of Michigan plan and incorporate them as applicable in the CHIP.

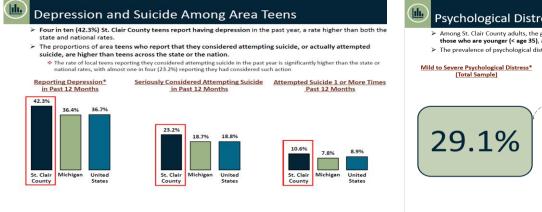
Appendix C: Sample Data Points

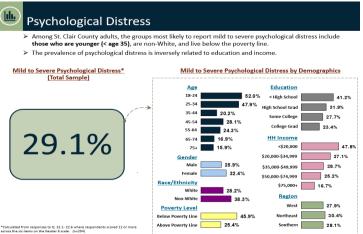
Mental Health Indicators

*Additional data can be found in the complete <u>2022 St. Clair County Community Health Needs Assessment</u>

Percentage of adults who report their mental health was not good 14 or more days per month for MI was 15.6% and the US was 13.2%. In 2016 the St. Clair County rate was 11.6%. The prevalence of poor mental health is inversely related to age and income. Women and non-white adults are more likely to report poor mental health than men or white adults, respectively.







The 42.3% number came from the 2019-2020 St. Clair County MiPHY survey of high school students. The rate for MI (2019) was 36.4% and the rate for the US (2019) was 36.7%.

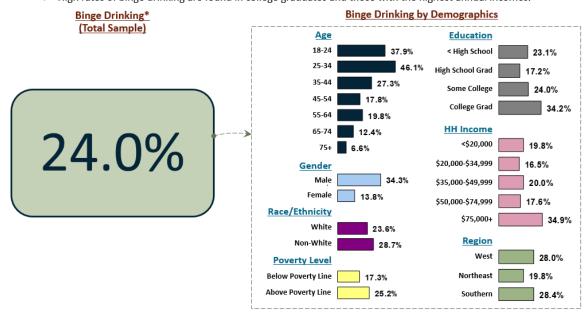
Substance Use Health Indicators

*Additional data can be found in the complete <u>2022 St. Clair County Community</u> <u>Health Needs Assessment</u>



Binge Drinking

- > The prevalence of binge drinking is highest, by far, among adults age 18-34, and it is also much higher among men than women.
- > High rates of binge drinking are found in college graduates and those with the highest annual incomes.

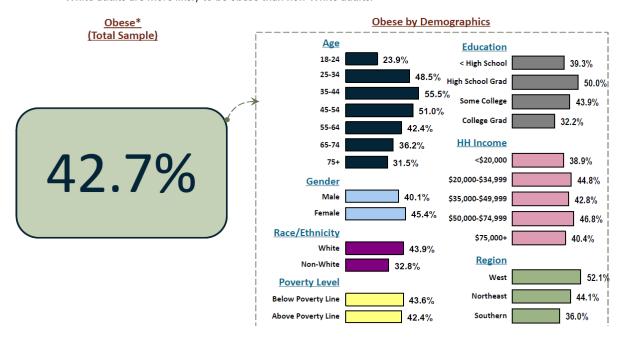


Obesity and Associated Health Behaviors' Indicators

*Additional data can be found in the complete <u>2022 St. Clair County Community Health Needs</u>
Assessment



- > Regardless of demographics, the prevalence of obesity is at least moderately high.
- > Area adults between the ages of 25-64 are more likely to be obese than adults younger or older.
- White adults are more likely to be obese than non-White adults.



Appendix D: Evidence-Based and Promising Practices

Mental and Behavioral Health

- 1. PHQ-9: The PHQ-9 is the nine-item depression scale of the Patient Health Questionnaire. The PHQ-9 is a powerful tool for assisting primary care clinicians in diagnosing depression as well as selecting and monitoring treatment. The primary care clinician and/or office staff should discuss with the patient the reasons for completing the questionnaire and how to fill it out. After the patient has completed the PHQ-9 questionnaire, it is scored by the primary care clinician or office staff. There are two components of the PHQ-9:
 - a. Assessing symptoms and functional impairment to make a tentative depression diagnosis
 - b. Deriving a severity score to help select and monitor treatment

The PHQ-9 is based directly on the diagnostic criteria for major depressive disorder in the Diagnostic and Statistical Manual Fourth Edition (DSM-IV). Source: <u>Patient Health Questionnaire (PHQ-9) - National Council for Mental Wellbeing</u> (thenationalcouncil.org)

2. School-based Anti-bullying Interventions Reduce Violence and Improve Mental Health: Bullying is widespread in the United States. In 2019, about one in five high school students reported being bullied on school property, and more than one in six reported being bullied electronically within the previous year. Bullying can result in physical injury, social and emotional distress, self-harm, and even death. It also increases the risk for depression, anxiety, sleep difficulties, lower academic achievement, and dropping out of school. Youth who bully others are at increased risk for substance misuse, academic problems, and experiencing violence later in adolescence and adulthood.

School-based anti-bullying interventions aim to prevent bullying experiences among students inside and outside of school. Interventions provide group education sessions for students, training, and consultation to school staff, or both. Student sessions may enhance interpersonal and emotional skills. School staff may be trained to deliver student sessions and implement evidence-based anti-bullying policies and practices. Interventions may focus on traditional face-to-face bullying, cyberbullying, or both.

Source: <u>School-based Anti-bullying Interventions Reduce Violence and Improve Mental Health | The Community Guide</u>

- 3. Mental Health and Mental Illness: Collaborative Care for the Management of Depressive Disorders: Collaborative care for the management of depressive disorders is a multicomponent, healthcare system-level intervention that uses case managers to link primary care providers, patients, and mental health specialists. This collaboration is designed to:
- Improve the routine screening and diagnosis of depressive disorders

- Increase provider use of evidence-based protocols for the proactive management of diagnosed depressive disorders
- Improve clinical and community support for active patient engagement in treatment goal setting and self-management

Collaborative care models (Katon et al., 2001) typically have case managers, who support primary care providers with functions such as:

- Patient education
- Patient follow up to track depression outcomes and adherence to treatment
- Adjustment of treatment plans for patients who do not improve

Primary care providers are usually responsible for:

- Routine screening for and diagnosing of depressive disorders
- Initiating treatment for depression
- Referring patients to mental health specialists as needed

These mental health specialists provide clinical advice and decision support to primary care providers and case managers. These processes are frequently coordinated by technology-based resources such as electronic medical records, telephone contact, and provider reminder mechanisms. Source: <u>Depression</u>: Collaborative Care | The Community Guide

4. Trauma Informed Approaches to Community Building: Trauma-informed approaches to community building use a comprehensive, multi-stakeholder, and multilevel approach to support and strengthen traumatized and distressed residents and communities and address the effects of unresolved community trauma such as historical community disinvestment, poverty, inadequate and insufficient housing, violence, social isolation, and structural racism. Trauma-informed community building includes a comprehensive set of individual-, interpersonal-, community-, and system-level efforts; for example, community building activities (e.g., gardening, group exercises, and community art projects), housing development, leadership training, supports for low income and public housing residents, and mixed-income culture building opportunities. Source: Trauma-informed approaches to community building | County Health Rankings & Roadmaps

Substance Use

- Project ASSERT- Project ASSERT (Alcohol and Substance Abuse Services, Education, and Referral to Treatment) is a screening, brief intervention, and referral to treatment (SBIRT) model designed for use in health clinics or emergency departments (EDs). Project ASSERT targets three groups:
 - a. Out-of-treatment adults who are visiting a walk-in health clinic for routine medical care and have a positive screening result for cocaine and/or opiate use. Project ASSERT aims to reduce or eliminate their cocaine and/or opiate use through interaction with

- peer educators (substance abuse outreach workers who are in recovery themselves for cocaine and/or opiate use and/or are licensed alcohol and drug counselors).
- b. Adolescents and young adults who are visiting an emergency department for acute care and have a positive screening result for marijuana use. Project ASSERT aims to reduce or eliminate their marijuana use through interaction with peer educators (adults who are under the age of 25 and, often, college educated).
- c. Adults who are visiting an ED for acute care and have a positive screening result for high-risk and/or dependent alcohol use. Project ASSERT aims to motivate patients to reduce or eliminate their unhealthy use through collaboration with ED staff members (physicians, nurses, nurse practitioners, social workers, or emergency medical technicians).

On average, Project ASSERT is delivered in 15 minutes, although more time may be needed, depending on the severity of the patient's substance use problem and associated treatment referral needs. The face-to-face component of the intervention is completed during the course of medical care, while the patient is waiting for the doctor, laboratory results, or medications. Source: SAMHSA

- 2. Regulation of Alcohol Outlet Density: Regulation of alcohol outlet density reduces alcoholic beverage outlet density or limits the increase of alcoholic beverage outlet density. Density refers to the number of alcohol outlets in a given area. Regulation is often implemented through licensing or zoning processes. An alcohol outlet is a place where alcohol may be legally sold for the buyer to drink there (on-premises outlets, such as bars or restaurants) or elsewhere (off-premises outlets, such as liquor stores). Source: The Community Guide to Preventive Services
- 3. E cigarette Regulations: Regulating e-cigarettes through efforts such as age restrictions, marketing regulations, and expanded smoke-free air policies is a suggested strategy to reduce tobacco use and decrease youth use of e-cigarettes 1. 10, 11, 12, 13, 14. However, additional evidence is needed to confirm effects of e-cigarette regulations. Source: E-cigarette regulations | County Health Rankings & Roadmaps
- 4. Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition):

Published in 2014, this report offered health professionals and other stakeholders'

information on principles of effective drug addiction treatment, answers to frequently

asked questions, an overview of the drug addiction treatment landscape in the United States, and an outline of evidence-based treatment approaches. Source: Principles of Drug Addiction: A Research-Based Guide (Third Edition) (nih.gov)

Obesity and Associated Health Behaviors

The following programs and policies have been reviewed with proven strategies to reduce obesity rates:

1. Nutrition Prescriptions: Nutrition prescriptions are a way for physicians and other health care providers to outline a healthy, balanced eating plan for patients. Based on US Dietary Guidelines for adults, children, and adolescents, nutrition prescriptions establish achievable goals for the patient and their family. Health care providers review progress

at each office visit and a nutrition specialist is consulted for dietary advice as needed. Some nutrition prescription programs partner with local farmers' markets (FVRx programs); in these programs, prescriptions for fruit and vegetables are redeemed or invited at participating markets. Such prescriptions typically support the purchase of at least one serving of produce per day for each patient and their family members. The 5-2-1-0 childhood obesity prevention program is an example of a program that allows health care provider partners to give patients nutrition and physical activity prescriptions. Prescriptions encourage daily habits that include 5 servings of fruits and vegetables, 2 hours or less of screen time, 1 hour or more of physical activity, 0 sugary drinks, and increased water consumption. Source:

http://www.countyhealthrankings.org/policies/nutrition-prescriptions

- 2. Places for Physical Activity: To increase the appeal and perception of safety in places for physical activity, experts recommend spaces be well-maintained, appeal to males and females, and include lighting, vegetation that facilitates open views, areas with street access and higher pedestrian activity, amenities like seating and drinking fountains, and features such as sculptures and food vendors. Source: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/places-for-physical-activity
- 3. Healthy Food in Convenience Stores: In many neighborhoods that lack supermarkets and grocery stores, families depend on corner stores and other small-scale stores to purchase food. The choices at these stores are often limited to packaged food and very little, if any, fresh produce. Improving the product mix at smaller stores and addressing other issues of viability — such as pricing, food quality/ freshness, and customer service — strategies that build upon existing community resources to enhance access to healthy food in underserved communities. Corner stores are also frequent destinations for children, many of whom stop daily on the way to and from school for snacks. Corner stores are, therefore, a areat place to make healthy food choices available and easy. Source: Healthy Food in Convenience Stores: In many neighborhoods that lack supermarkets and grocery stores, families depend on corner stores and other small-scale stores to purchase food. The choices at these stores are often limited to packaged food and very little, if any, fresh produce. Improving the product mix at smaller stores and addressing other issues of viability — such as pricing, food quality/ freshness, and customer service — strategies that build upon existing community resources to enhance access to healthy food in underserved communities. Corner stores are also frequent destinations for children, many of whom stop daily on the way to and from school for snacks. Corner stores are, therefore, a great place to make healthy food choices available and easy. Source:

https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/healthy-food-in-convenience-stores

- 4. Physical Activity: Community-Wide Campaigns: Community-wide campaigns to increase physical activity are interventions that:
- Involve many community sectors

- Include highly visible, broad-based, multicomponent strategies (e.g., social support, risk factor screening or health education)
- May also address other cardiovascular disease risk factors, particularly diet and smoking
 Source: https://www.thecommunityguide.org/findings/physical-activity-community-wide-campaigns.html

5. Community Efforts to Reduce Obesity: To reverse the obesity epidemic, community efforts should focus on supporting healthy eating and active living in a variety of settings. Learn about different efforts that can be used in early childhood care, hospitals, schools, and food service. Source: Community Efforts | Overweight & Obesity | CDC