Saginaw County

Community Health Assessment



2020 - 2023

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Letter from CHA/CHIP Committee

The Saginaw County Community Health Assessment/Community Health Improvement (CHA/CHIP) Committee is pleased to share with you our 2020 Community Health Needs Assessment. Since merging forces in 2012, the team has been committed to improving the lives and health of people living in our Saginaw County. This report represents our continued commitment to that goal.

Building on our first joint community health needs assessment in 2009, our team opted to follow the principles of the National Association of County and City Health Officials (NACCHO) Mobilizing for Action through Planning Partnerships (MAPP) process. It is a community-driven strategic planning process for improving community health.

In order to better serve our community, we must first have a deep understanding of the challenges, assets and strengths of Saginaw County. This report is the result of an extensive process that took us from planning, collecting and analyzing data, to identifying the top three strategic health issues. The wealth of quantitative and qualitative data collected through the MAPP process enabled us to fulfill our commitment to the community by prioritizing their needs in our assessment.

Next, our Community Health Improvement Plan (CHIP) will focus on working to mitigate those health issues over a three year time period. This assessment is a snapshot of the health of people who live in Saginaw County and the many factors that impact health outcomes.

The CHA/CHIP Committee would like to thank everyone who was involved in development of this assessment. Special thanks to our University of Michigan School of Public Health interns: Margaret DeHart who spent countless hours attending community events and collecting indicator data and Saba Ibraheem who helped design many of the pages in this report. Special thanks also goes to our Core Team Members who pushed forward the CHA through multiple stages - Jamie Forbes, Marcie Hunter, and Michael Ovsenik. We could not have completed this report without you! We would also like to thank you for reading this report, and your interest and commitment to improving the health of the Saginaw County Community.

Community Health Assessment Funding Members

- Alignment Saginaw Renee Johnston
- Ascension St. Mary's Hospital Marcie Hunter, Andy Kruse, Beth Pomranky-Brady, Danielle Schmidt
- Covenant HealthCare Larry Daly, Michael Ovsenik, Rebecca Schultz
- Great Lakes Bay Healthcare Lisa Burnell
- Saginaw County Community Mental Health Colleen Sproul
- Saginaw County Health Department Christina Harrington, Nicole Schaub
- Saginaw ISD Amy Wassmann
- United Way of Saginaw County Audra Davis & Rachelle Hilliker

Key Stakeholders

This effort was funded by a number of community organizations who are members of the Community Health Assessment/ Community Health Improvement Plan (CHA/CHIP) Committee. These agencies dedicated direct funding and staff time to the completion of the MAPP Assessment.

Saginaw Community Foundation

Covenant HealthCare Saginaw County Health Department

Ascension St. Mary's Hospital

Saginaw
County
Community
Mental
Health
(SCCMHA)

Saginaw Intermediate School District (SISD)

United Way of Saginaw County Great Lakes Bay Health Centers (GLBHC)

Alignment Saginaw

In addition to these core agencies, the CHA/CHIP Steering Committee also had representation from agencies that represented key areas in Saginaw County. These agencies and their representatives are listed below.

- Ezekiel Project Jessica Hernandez, Director
- Michigan Health Improvement Alliance (MIHIA) Tina Swanton, Program Coordinator
- Saginaw County Board of Commissioners Amos O'Neal, County Commissioner
- Saginaw County Business and Education Partnership Kathy Conklin, Executive Director
- Saginaw Community Action Center- Lillie Williams-Grays, Executive Director
- Saginaw County Housing Commission Lesley Foxx, Executive Director
- Saginaw County Drug Treatment Court James Livingston, Case Manager
- Saginaw Valley State University Cal Talley, Project Director

Community Participation

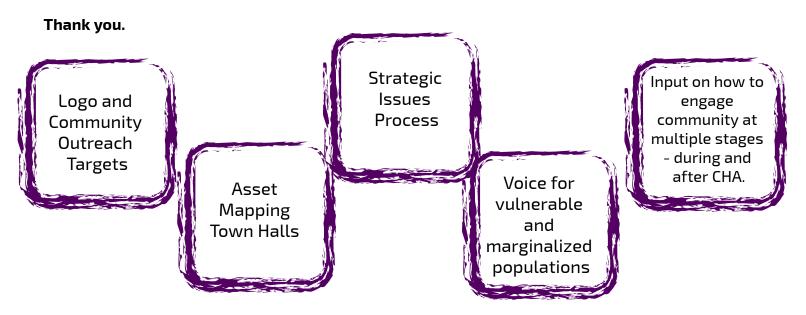
In addition to input from community agencies through the CHA/CHIP Steering Committee, input was provided from community members through the Community Advisory Committee.

This committee was made up of Saginaw County residents who were passionate about making change in their community and came from a variety of backgrounds in Saginaw County.

Committee members were compensated for their time and expertise on community activities for the CHA.

The Community Advisory Committee met monthly during the MAPP process to give input on the design, implementation, and evaluation of the Saginaw County Community Health Assessment. Their decisions helped inform the design of the logo, the format of the asset mapping town halls, the design and implementation of the Strategic Issues meeting, and more.

A sincere thank you to these group members for their time, passion, and investment in their community. Your voices helped shape this assessment for the better!



Community Advisory Committee Members

- Alicia Henne
- Michael Keenan
- Joseph King
- Brian Mangas
- Assegid Mersha
- Serena Pittmann
- Jessica Robenstine
- Bill Schaiberger
- Tamara Tucker
- Latrice Williams

Executive Summary

Background

The Saginaw County Community Health Assessment (CHA) outlines the goals and objectives related to the top health needs identified from data included in this report. This effort was funded by the members of the CHA/CHIP Steering Committee, including the two major hospital systems that serve Saginaw County residents, Ascension St. Mary's Hospital and Covenant HealthCare.

From September 2019 through February 2020, members of the Saginaw County Community Health Assessment/Community Health Improvement Plan Committee (CHA/CHIP), including the two separate hospital systems, the Saginaw County Health Department, and a collection of multi-sector community stakeholders, worked to collect data necessary for the Saginaw County CHA.

Information regarding Saginaw County's priority health needs, as well as their prioritization, are based upon information provided by residents using the four Mobilizing for Action through Planning and Partnerships (MAPP) assessments: 1) community health status, 2) community themes and strengths, 3) local public health system, and 4) forces of change. Each assessment captured a unique data set that was used to inform the final strategic issues process.

In an attempt to acquire broad community input regarding the health needs of Saginaw County, individuals who live, work, and/or attend school in Saginaw County, including residents, health care consumers, community leaders, health care professionals, and multi-sector representatives, participated in meetings of CHIP's network of community partners, and/or responded to the *Share Your Story Saginaw* survey.

More than 3400 community members completed this survey which acted as a touchpoint for needs important to community members and captured information on social determinants of health in Saginaw County.

These findings are also informed by a collection of over 300 metrics designed to measure health status and chronic disease priorities, social and economic factors impacting residents, and health care delivery system access and utilization trends experienced in the County.

<u>Identification and Prioritization of Strategic Issues</u>

Three strategic issues were identified for Saginaw County through a community prioritization process. These strategic issues were prioritized based upon input gathered from the Saginaw County CHA assessments, the implications for long term health outcomes, the ability of local health care systems to have an impact on addressing the need, current priorities and programs, and the effectiveness of existing programs. The identified priorities for Saginaw County for 2020 - 2023 are:







How to Use this Assessment



DECISION MAKING

This report can be used to inform organizations and local government on critical health related policy decisions.



REPORTING

Organizations can utilize data from this report for annual reporting needs.



COMMUNITY CHANGE

Community members and nonprofits can use this report to support efforts to make change in the community around health issues.



FUNDING

Organizations can reference this report while applying for grant funding as a source for recent, relevant data from Saginaw County and its residents.

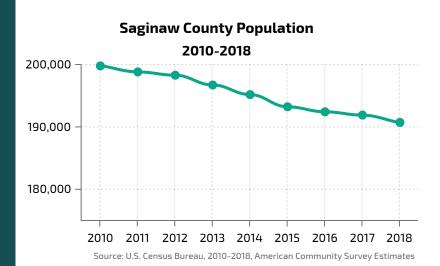
Overview of Saginaw County

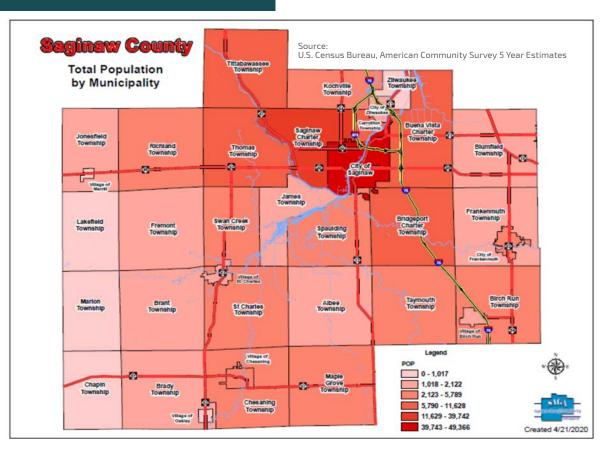
Saginaw County is located in the central portion of the Lower Peninsula of Michigan. It is 800.11 Square Miles and is made up of three cities, five villages and 27 townships. The Saginaw community is located in Mid-Michigan, in the Great Lakes Bay Region made up of Saginaw, Arenac, Bay, Clare, Gladwin, Gratiot, Isabella, and Midland Counties. Over 60% of the county's land is used for farming activity that leads to food processing. It's comprised of hundreds of square miles of excellent agricultural land, forests, waterways, and industrial areas.

Saginaw's economy has transformed from a focus on lumber and automotive to health care and education with two large hospital systems (Ascension St. Mary's Hospital and Covenant HealthCare) and two higher education institutions (Delta College and Saginaw Valley State University).

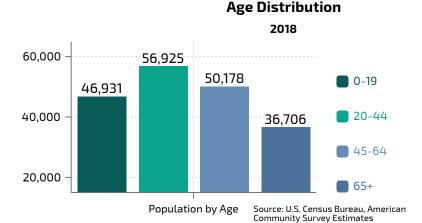
Quick Facts about Saginaw County

- The three most populous municipalities in the County are Saginaw City, Saginaw Township, and Thomas Township - 54% of the population lives in these three locations.
- Major salt, coal, and petroleum deposits are nearby, and sugar beets and beans are produced in the Saginaw valley (Britannica, 2020).
- Saginaw County has more than 550 acres of parks and is home to over 10,000 acres dedicated to the Shiawassee National Wildlife Refuge (Saginaw Parks & Recreation & U.S. Fish and Wildlife Service).

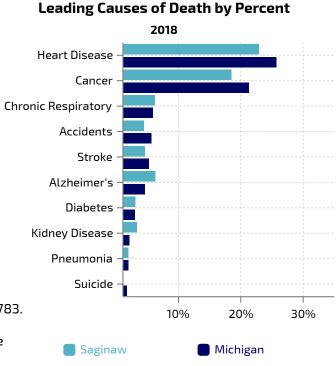




Age & Mortality



- The median age is 41 years.
- Nearly 1 in 5 residents (19%) are aged 65 and older.
- Overall, the population has decreased 4.7% since 2010.
- The age adjusted mortality rate is 847 in comparison to Michigan's 783.
- Age adjusted mortality rates vary by race with black men having the highest at 1,176 nearly double that of white women at 690.
- The crude mortality rate has increased 14% in the last 9 years (2009-2018).



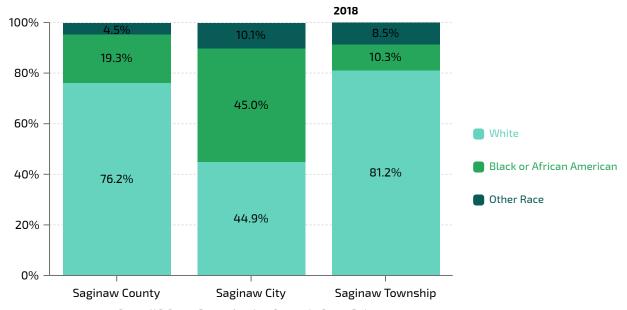
Source: MDHHS VItal Statistics

Race and Ethnicity

According to the 2018 American Community Survey, 76% of Saginaw County residents identify themselves as white, 19% as Non-Hispanic African American, 8.5% as Hispanic/Latino, 0.1% as Native Hawaiian Pacific Islander, and 2.3% as other races.

Saginaw City is more racially diverse in population than the County as a whole, where the 2018 population is 45% White, 45% Black or African American, and 10% other races. Ethnically, 14.5% of Saginaw City residents are Hispanic/Latino.

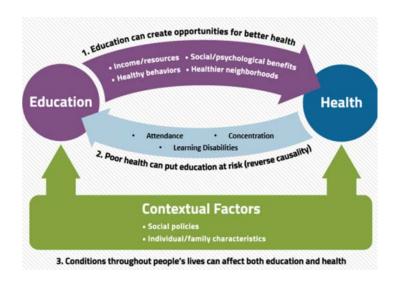
County, City, and Township Population by Race



Education

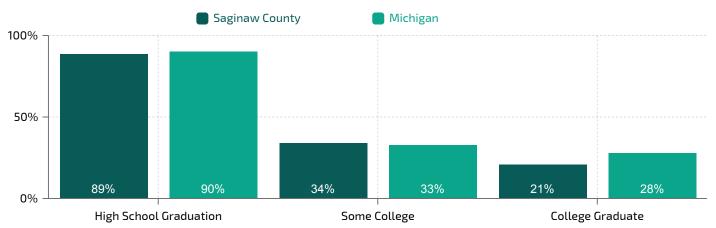
While biological makeup or genetics determine some health issues an individual will experience, socioeconomic factors, such as education, employment opportunities, and income can shape how people make decisions related to their health. In particular, education has a long lasting impact on health - as illustrated by the model to the right from the Center for Society and Health (2015).

In 2018, 89% of Saginaw County residents had a high school diploma which matches closely (90%) to the state. There is a lower proportion 21% of residents are college graduate than in the state (28%) (American Community Survey, 2018).



Educational Levels





Source: U.S. Census Bureau, American Community Survey

- About 13% of Saginaw children are enrolled in Head Start compared to only 7% in the state.
- 41% of 3rd grade students are proficient in English M-STEP compared to 45% in the state.
- The average dropout rate for Saginaw ISD in 2018 was 6%
- 41% of 3rd grade students are proficient in Math M-STEP compared to 45% in the state.

Source: MISchoolData.org, 2019





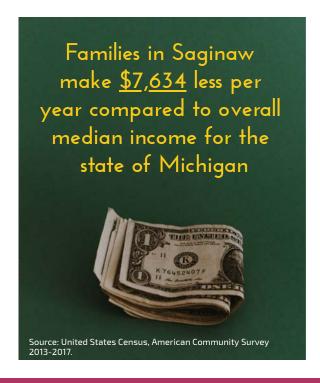
Nearly 1 in 4 children in Saginaw County are chronically absent from school.

Economy

In 2018, Robert Wood Johnson Foundation noted that income and health are clearly linked based on a number of factors:

- Income is strongly associated with morbidity and mortality across income levels
- Poor health contributes to reduced income, creating a negative feedback loop
- Income inequality has grown significantly in recent years which may heighten disparities

In October 2019, the unemployment rate in Saginaw County was 4% which was nearly equal to the state but Saginaw Country has 17% of households in poverty compared to 14% in the state (Bureau of Labor, 2019 & U.S, Census, American Community Survey, 2018). Saginaw's history of economic downturn has influenced its present and Saginaw residents make less than many surrounding counties.

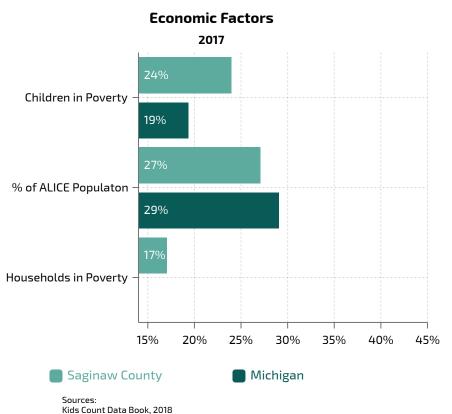


Per the 2013-2017 American Community Survey, the most common employment sectors in Saginaw County are:

Health Care & Social Assistance (24%)

Manufacturing (21%)

Retail Trade (11%).



ALICE is an acronym for Asset Limited, Income Constrained, Employed. These are households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county.

For a single person in Saginaw County in 2017 this equated to earning \$10.18 an hour but for a family with two children - it equated to \$30.93 an hour or \$20,000 more per year than the household income average.

The percentage of households that are part of the ALICE populations varied significantly by township - with 65% of Buena Vista Charter Township residents identified as part of the ALICE population in comparison to 17% of Frankenmuth Township (2017).

The number of households in poverty and in the ALICE population reflects the number of community members who may struggle to meet basic needs. As of 2017 in Saginaw County, this would have been 44% of the population (MichiganALICE.org, 2017).

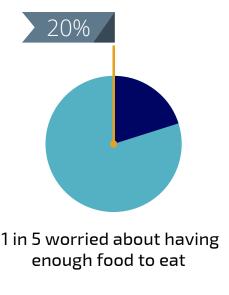


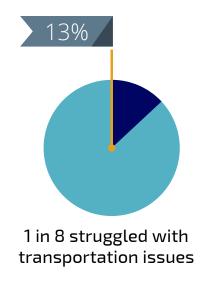
Health inequities defined as "the differences in health status or the distribution of health resources between different population groups arising from the social conditions in which people are born, grow, live, work, and age," according to the World Health Organization. Health inequities can exist across many dimensions, such as race, ethnicity, gender, sexual orientation, age, disability status, socioeconomic status, geographic location, and military status (National Academies of Sciences, Baciu, Negussie, Geller, & Weinstein, 2017).

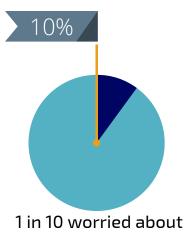
Here are overarching concepts that demonstrate the necessity of addressing health inequities:

- **Inequities are unjust:** Health inequities result from the unjust distribution of the underlying determinants of health such as education, safe housing, access to health care, and employment.
- **Inequities affect everyone:** Conditions that lead to health disparities are detrimental to all members of society and lead to loss of income and lives.

According to the 2019 Share Your Story Saginaw survey, many Saginaw County community members struggle to meet basic needs. Overall in the past 3 months:







1 in 10 worried about having a safe place to live.

INEQUITIES IN SAGINAW COUNTY

While many Saginaw County community members reported barriers in meeting basic needs - some groups experienced more issues than others. Examining the data provided within this report through the health equity lens is a key part of determining how to effectively target root causes of health issues and to address inequities present within Saginaw County.

Transportation

Rural residents and white residents were LEAST likely to report having issues with transportation in the past 3 months.

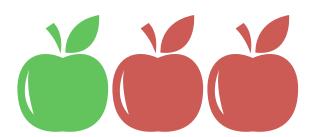


1 in 5 people in the city of Saginaw had difficulty getting to places within the past 3 months - compared to 1 in 10 white community members surveyed in Saginaw County.



Food Insecurity

Black residents and residents who made less than \$30,000 per year were MOST likely to report having issues with accessing food in the past 3 months.

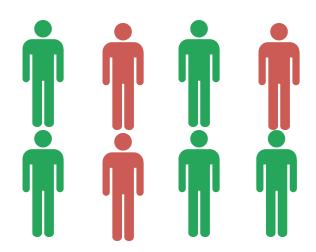


1 in 3 people who made less than \$30,000 per year said they worried about having enough food to eat in the past 3 months.

Diabetes

Diabetes is a serious public health problem that is known to disproportionately affect the Black/African American population and Hispanic/Latino population.

When asked about health priorities, black and Hispanic/Latino respondents were MOST likely to report diabetes as an issue in comparison to white residents.



Diabetes was selected as a top priority by 38% of Hispanic/Latino community members surveyed compared to 23% of white residents.

The Saginaw County Community Health Assessment for 2020-2023 used the Mobilizing for Action, Planning and Partnerships model to carry out the assessment. This model is considered the 'gold standard' for community health assessments.

METHODOLOGY

Forces of Change Assessment

The Forces of Change Assessment was carried out in September 2019 at an Alignment Saginaw meeting with representatives from 25 cross-sector community organizations participating. The aim of this assessment is to answer two broad questions:

- What is occurring or might occur that will impact the health of the community?
- What threats or opportunities are generated by these occurrences?

The Forces of Change Assessment (FOCA) during this cycle of the CHA determined that the six issues (graphic to the right) were the top forces of change that would impact Saginaw County during the 2020-2023 time frame. The top issue listed was the governmental policy change around Medicaid Work Requirements which could have sweeping effects on how many people are able to be covered under Medicaid services as well as the continuum of care for those services.

During the assessment, each group developed a list of specific strengths and opportunities around the various topics that were developed. Themes that emerged from these forces of change focused on issues related to access to resources, environment and environmental changes in Saginaw, and education around issues such as chronic disease for the most vulnerable populations.



Community Health Status Assessment

More than 300 indicators collected The Community Health Status Assessment (CHSA) focuses on the collection of secondary data indicators from 12 core areas. The indicators collected provide a quantitative view of community health and help guide the community health improvement planning process by acting as dashboard indicators to track progress made on different initiatives.

This assessment helps highlight issues that stand out in the data but may not have as much public awareness. Additionally, these indicators can illustrate disparities in health outcomes that are rooted in systematic health inequities. This cycle of the CHA aimed to pull data that was as recent as possible for the indicator list however there are a few critical indicators and contextual indicators used in this report that are less recent than 2017 data.

Community Themes & Strengths Assessment

Community Survey

The Share Your Story Saginaw survey was shared from September to December 2019 and was the largest data collection effort conducted during this cycle of the CHA. Over 35 community events across Saginaw County were attended between September and November to share the survey in person and all of the CHA/CHIP Committee agencies also shared the survey via social media. Due to these collaborative efforts, 3,945 survey responses were collected which was a 1000% increase over the last CHA cycle where 389 survey responses were collected. The survey asked community members who lived, worked, or attended school in Saginaw County about their priorities for health and socioeconomic needs, and inquired about healthcare access and access for social determinants of health. Highlights from the survey are outlined on the next page of this report.



Photovoice & Art Contest

In order to get a qualitative youth perspective on the community health assessment, the CHA/CHIP Steering Committee pursued two different methodologies.

The first is Photovoice - which is a "a visual research methodology with the intention to foster social change" (Budig et. al, 2018). This process involved reaching out to high school aged youth through the school system, a local faith based group, and the FORCE group that is part of Alignment Saginaw to ask youth to participate in the project to take photos of their community that reflected concepts of health equity and inequity. Unfortunately, despite these multiple attempts at partnerships - a total of only 2 submissions were received for this project; Due to the low number we are unable to include these submissions.

The second qualitative youth outreach attempt was done in partnership with Saginaw ISD and focused on elementary and middle school aged youth. This project asked youth to enter an art contest and share what a healthy future looked like for Saginaw. However, due to the COVID-19 outbreak and the school year being cut short - entries were unable to be collected during the necessary time frame.



Asset mapping town halls were an addition to the data collection efforts of the MAPP process. 11 town halls were held across Saginaw County in an effort to collect data on the unique strengths of Saginaw County.

These efforts were held in order to increase the focus on the many positives in Saginaw County as community health assessments often tend to highlight the negative aspects of communities. Results from each of the town hall meetings that were held as well as a description of the methodology used for the meetings can be found in pages 17- 25.



Asset Mapping Town Halls

One addition to this cycle of the community health assessment is community asset maps. During initial discussions with the CHA/CHIP Steering Committee - the Committee committed to finding additional ways to highlight the strengths of Saginaw County to inform an asset based picture of the community.

The CHIP Coordinator used a modified version of the Asset Based Community Development (ABCD) model to collect input from community members across the commissioner districts of Saginaw County. Meetings were planned and held in coordination with the county commissioners from November 2019 to January 2020. County commissioners were asked to help promote to constituents in their district and suggest possible community groups to reach out to for attendance. Each meeting lasted around 1 hour and community members that attended were given an opportunity to interactively highlight the strengths of their community.

Community members did this by working in small groups through a facilitated process to create lists of assets that they saw in their communities. Assets mapped included: values in their community, associations and volunteer groups, organizations and businesses and physical spaces.

Due to illness, there were a few asset mapping town halls that had to be delayed by the CHIP Coordinator - but the hope is that these districts can be mapped at some time during the CHIP process to provide a complete picture of the county.

On the following pages, there are asset maps. The first map is an asset map of the entire county based on most frequently mentioned assets from all of the ABCD sessions.



Outline

- 1. County Asset Map
- 2. District 2 Asset Map
- 3. District 4 Asset Map
- 4. District 5 Asset Map
- 5. District 6 Asset Map
- 6. District 7/8 Asset Map
- 7. District 9 Asset Map
- 8. District 11 Asset Map

 Local Business Associations
 Castle Museum
● YMCA ● Boy Scouts
● Girl Scouts● Ascension St. Mary's ● Great Lakes Bay Healthcare • Covenant HealthCare

◆ Saginaw County Health Department • Saginaw County Community Mental Health Boys and Girls Club

Local Rotaries

Local Chambers of Commerce • Kiwanis • Lions Club• Knights of Columbus• 4H•Nexteer• Isabella Bank• Rehmann Health Center • Lippert Components • City Rescue Mission • Saginaw Community Foundation• Samaritas Center Mustard Seed Shelter• Duralast• East Side Soup Kitchen

• Commission on Aging

• Local Historical Societies

And MANY, MANY MORE!







Churches, fire departments, and parks were the 3 most commonly listed assets in Saginaw.







Police, Senior Centers, and Libraries were the second most common.





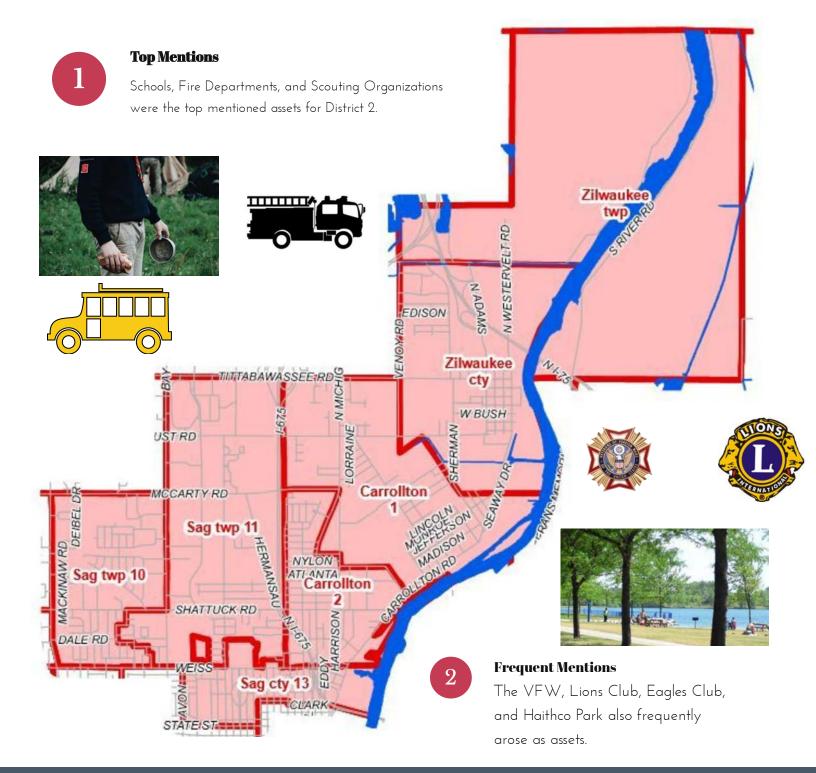


Universities, charity events, and Veterans Groups were also frequently mentioned.

Saginaw County Asset Map

Values that came up for Saginaw County were:

- Diversity
- Family Oriented
- Education
- Perseverance
- Growth
- · Service to Others



District 2 Asset Map

Values that came up for District 2 were:

• Respectful, Friendly, Ease of Access, Compassion & Community Health

Additional Associations & Groups

 Neighborhood Associations, Community Churches (multiple), Kiwanis, Moose Lodge, Zilwaukee Community Foundations, Parent Teacher Organizations,

Additional Organizations & Institutions

 Libraries, Memorial Park, Johnson Creek Park, Bell Landscaping, John E. Green Contractor, Bear's Pizza, Police Departments, OHM Engineering, Zilwaukee City Boards (multiple) MDOT, VA Medical Center & Hospital, Delta College, SVSU & Castle Museum



District 4 Asset Map

Values that came up for District 4 were:

Love, Perseverance, Taxes, Backyard Critters & Water

Additional Associations & Groups

 Recreation Groups, Spaulding Event Committee, Veterans Groups & YMCA Additional Organizations & Institutions

 Schools, Libraries, Law Enforcement & Wickes Park



Top Mentions

Rauchoulz Memorial Library, the Lions Club, 4H & Hemlock Business Association were the most frequently mentioned assets of District 5.











District 5 Asset Map

Values that came up for District 5 were:

Education, Community Support & Family Oriented

Additional Associations & Groups

 RTCA, Parent Groups, Friends of the Library, Parks and Recreation, VFW, Historical Society, Music Boosters, Charity Dinners, Youth Groups, Hemlock STEM Center, Youth Sports & Food Banks

Additional Organizations & Institutions

 Jenni's Place, Maple Grille, Post Office, Commission on Aging, Farmer's Home Tavern, Mamma Mia, Rick Ford, Tom's Market, Pine Haven, Jack's Orchard, Shepard's Organic, Hemlock Elevator, Assisted Living, McDonald's, Isabella Bank, NBA, Hemlock Auto Sales, Andersons, & Village Vet

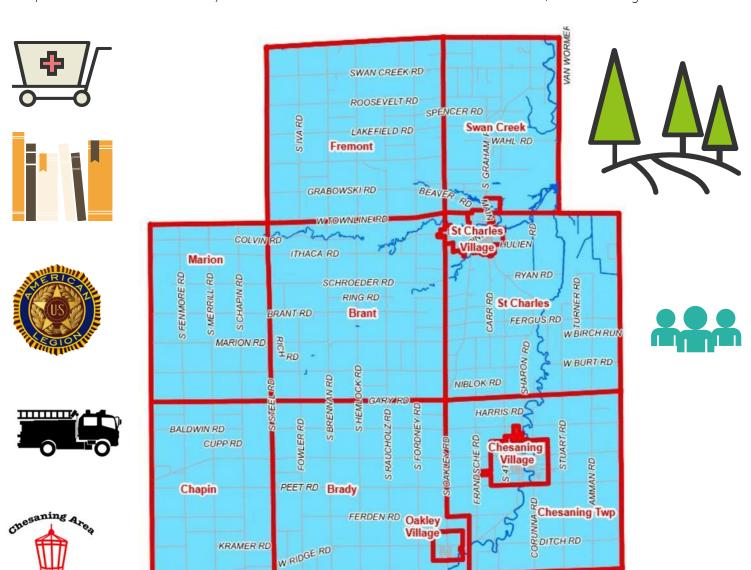


Rehmann Health Center, River Rapids Library, American Legion, Fire Department & Historical Society



Frequent Mentions

Parks, Knights of Columbus, Lions Club, Rotary, Chesaning Conversation Club, Young at Heart Club, CAER & Saginaw Rail Trail



District 6 Asset Map

Values that came up for District 6 were:

Growth, Service to Others, Belonging & Education

Additional Associations & Groups

Ristorical Societi

 Saginaw Valley Agricultural Association, Chesaning Area Senior Association, Santa's Village, Churches, Sports and Music Boosters, Key Club, Kiwanis, Chamber of Commerce, Downtown Development Authority, Pool School, Food Distribution & Charity Groups Additional Organizations & Institutions

• Schools, Police, Lippert Components, Ascension St. Mary's Hospital, Museums, Nixon's, Frank's & CHRE Center



Libraries, Youth Sports, Schools, Chamber of Commerce & Local Business









Frequent Mentions

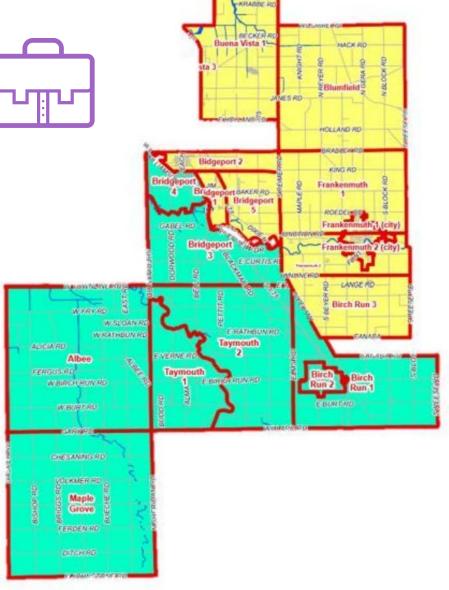
Parks, Fire Department, Historical Village & Museums, & Law Enforcement











Districts 7 & 8 Asset Map

Values that came up for District 7 & 8 were:

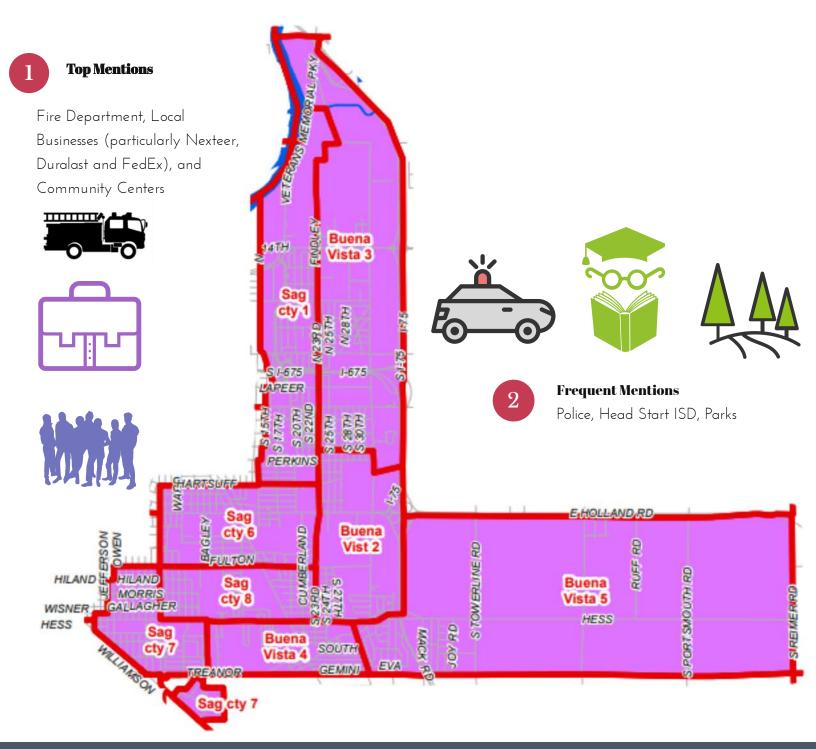
Diversity, Education, Family Oriented & Respect

Additional Associations & Groups

· Rotary Club, Lions Club, Girl Scouts, Boy Scouts, Women's Club, First Baptist in Bridgeport, Church Groups, Great Lakes Bay Miracle League, Neighborhood Associations, Addiction Prevention Group, Recreational Sports and Fitness Groups

Additional Organizations & Institutions

United Financial, Frankenmuth Credit Union, State Crime Lab, Early College Program in Birch Run, Saginaw County Health Department, Wellspring, Great Lakes Bay Healthcare, Covenant HealthCare, Frankenmuth Business - Zehnder's Bavarian Inn, Little Bavaria - top tourist destination



District 9 Asset Map

Values that came up for District 9 were:

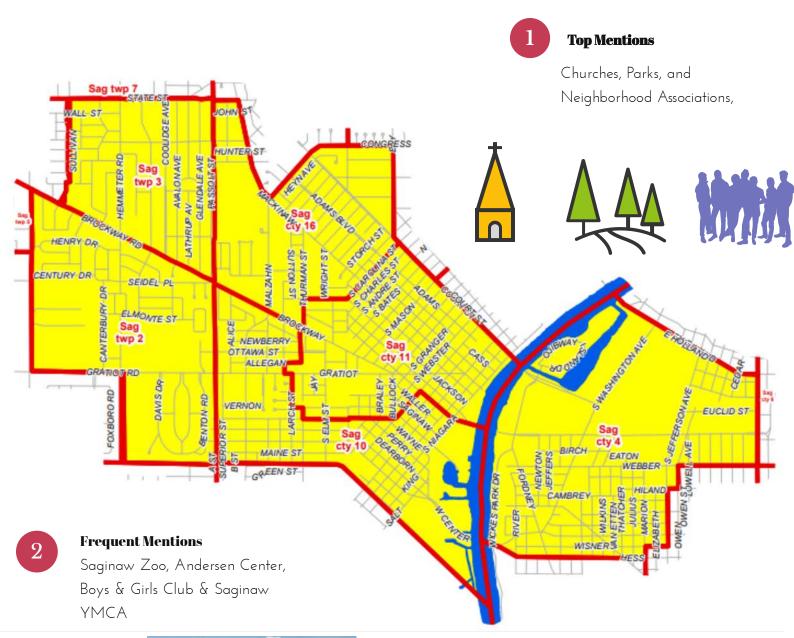
• Growth, Connectedness, Resilience, Collaboration, Safety & Diversity

Additional Associations & Groups

Buena Vista Chamber of Commerce, Buena Vista Business
 Association, Buena Vista Downtown Development Authority,
 New Covenant Christian Center, Community Action Center,
 VBM, Lewis Temple, NAACP, Block Clubs, Elderly Groups,
 Recreation Groups, Anti-crime Groups

Additional Organizations & Institutions

 Causley Trucking, Air Museum, Saginaw Prep, Saginaw Public Schools, National Guard, Harry Brown Airport, Abetes, Steven Van Lines, Great Lakes Bay Health, Commission on Aging











District 11 Asset Map

Values that came up for District 7 & 8 were:

Diversity, Service to Others, Careful & Neighborly

Additional Associations & Groups

 Friendship Center, Samaritas/Friendship House, Mustard Seec Shelter, Old Town Business Association, Teen Center, Heritage Square, Friends of Hoyt Park, Veterans Groups, & the READ Association

Additional Organizations & Institutions

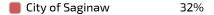
 Fire Department, Health Department, Police, Water Park, Agency on Aging, Jessie Rouse Elementary, Ojibway Island, Saginaw County Community Mental Health & Country Club



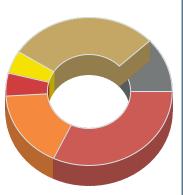
76%

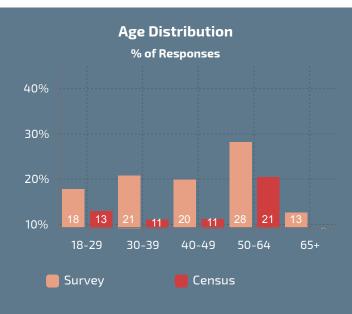
of responses were from women

Survey Responses By Residence



- Saginaw Charter Township 17%
- Thomas Township
 5%
- Bridgeport Charter Township 5%
- Other Saginaw Townships 29%
- Don't Live in Saginaw County 12%







3 out of 5 respondents were able to pay for healthcare without sacrificing other needs

	% Survey Responses	% Census Population		
White	68.5%	76.2%		
Black/African American	20.2%	19.3%		
Hispanic/Latino	7.5%	8.5%		

*Additional 3.8% of survey responses were other races or multiple races. Census adds up to more than 100% as Hispanic/Latino population is counted as an ethnicity separate from race.



1 in 8 people in Saginaw County reported exposure to violence in the past 3 months.

Share Your Story Saginaw Highlighted Survey Results

WHAT ARE THE 3 MOST IMPORTANT HEALTH CONCERNS IMPACTING SAGINAW COUNTY?

- MENTAL HEALTH 51%
- ADDICTION 49%
- OBESITY 42%

WHAT ARE THE 3 MOST IMPORTANT SOCIAL/ENVIRONMENTAL ISSUES IMPACTING SAGINAW COUNTY?

- VIOLENCE & NEIGHBORHOOD SAFETY -45%
- LACK OF JOB OPPORTUNITIES 36%
- HOUSING & HOMELESSNESS 33%

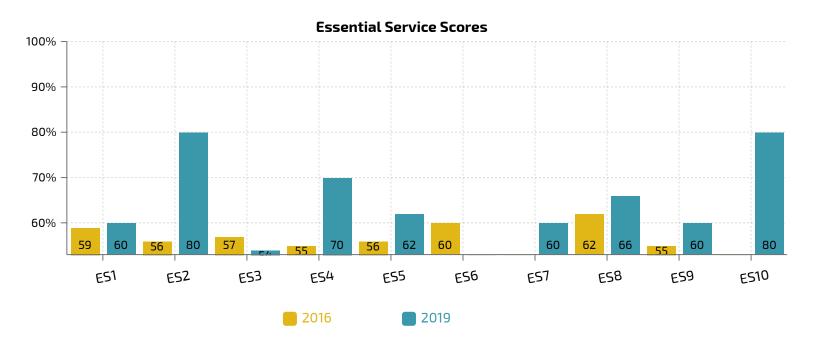
WHAT ARE 3 STRENGTHS THAT SAGINAW COUNTY HAS THAT COULD HELP ADDRESS COMMUNITY CONCERNS?

- COMMUNITY ORGANIZATIONS THAT CARE 38%
- JOBS THAT SUPPORT FAMILIES 28%
- AFFORDABLE HOUSING 27%

Local Public Health System Assessment

The Local Public Health System Assessment provides insight into strengths and opportunities for improvement within the overall public health system. This assessment was completed during two facilitated meetings that used Technology of Participation techniques. The first meeting broke an expanded committee into small groups to grade different services and provide comments. The second session focused on 5 priority topics that were selected and used the same set of criteria to determine gaps for specific service areas; e.g. mental health. Participants evaluated the process via an online survey sent after each meeting.





Strengths

Essential Service 2 - Diagnose & Investigate Health Problems

 Doing well with reportable issues and environmentally related issues. 24% increase in rating since last LPHSA.

Essential Service 4 - Mobilize Partnerships

 Multiple examples of success including the CHIP Committee, MiHIA, Alignment Saginaw. 15% increase since last LPHSA rating.

Essential Service 10 - Research & Innovation

 Partnerships with educational institutions are flourishing. 27% increase since last LPHSA rating.

Opportunities for Improvement

Essential Service 1 - Monitor Health Status

Funders don't always align with true needs. 1% increase since last LPHSA.

Essential Service 3 - Educate & Empower

 Need to improve around chronic disease education. 3% decrease since last LPHSA.

Essential Service 6 - Enforce Laws and Regulations

 Personal choice seen as a priority for community members. 7% decrease since last LPHSA rating.

Local Public Health System Assessment - Targeted Issues



MENTAL HEALTH

Strengths in assuring a competent workforce and researching new efforts.

Room for improvement in education and outreach.

INFANT MORTALITY

Strengths in mobilizing partnerships and assessing data.

Room for improvement in evaluating efforts and creating policies.



ACCESS TO RESOURCES

Strengths in investigating root causes for barriers to access and mobilizing partnerships.

Opportunities for improvement in creating policy and evaluating efforts



VIOLENCE

Strengths in mobilizing partnerships and enforcing laws.

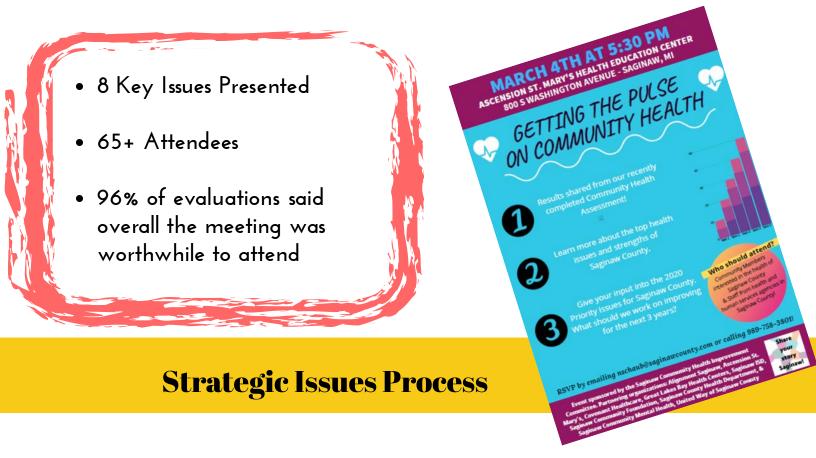
Opportunities for improvement in evaluating efforts and researching innovative models.

CHRONIC DISEASE

Strengths in monitoring health and diagnosing conditions.

Opportunities for improvement in linking clients to care and educating and empowering patients.

STRATEGIC ISSUES



The Strategic Issues process is the fourth phase of MAPP. During this phase the results from the 4 MAPP assessments are integrated to highlight information on key issues and themes. The aim of the strategic issues process is not just to highlight health issues but also to uncover root causes of health issues that can be addressed at a community level.

During this cycle of MAPP, the CHIP Coordinator worked closely with the Community Advisory Committee to collect input on the Strategic Issues process to ensure that it reflected the voices of community members as well as community organizations and was accessible on a variety of levels.

The methodology that was proposed was a community meeting that was open to community members and organizations alike. CHA/CHIP Steering Committee members were asked to help present data on issues at posters for 10 of the top identified issues and to bring community members with them to the event.

During the event, the 10 issues were voted on to determine the top three strategic issues. The first round of voting asked participants to vote on 3 issues which they thought we could have the most impact on in the next 3 years. Top 5 issues selected were:

- Mental Health
- Job Opportunities
- Infant Mortality
- Addiction
- Obesity

The final round of voting asked participants to select which of the 5 issues above was the most important or critical to address in the next 3 years. The top issues selected were:

- Mental Health
- Obesity
- Infant Morality

Obesity Related Chronic Disease

"The high obesity rates in Saginaw are a public health concern because obesity increases the risk of heart disease, Type 2 Diabetes, strokes, high blood pressure, high cholesterol, infertility, depression, sleep apnea and joint pain, as well as many other medical conditions".

- Dr. Dafina Allen, Covenant HealthCare



Background

Obesity is a common, serious and costly disease. Obesity related conditions include heart disease, stroke, type 2 diabetes and certain types of cancer. While adult obesity rates in Saginaw County decreased 4% from the 2014-2016 BRFSS to the 2015-2017 BRFSS - more than 1 in 3 adults in Saginaw is still considered obese.

Saginaw youth are also at risk of being overweight and obese - with high school obesity rates 2% higher than the national average (Michigan Profile for Healthy Youth, 2016 & Youth Behavioral Risk Factor Survey, 2017). According to a report from the American Public Health Association "While obesity can put children at risk for chronic conditions such as Type 2 diabetes, it can also take a toll on their school performance...Compared to their average-weight peers, overweight and obese children were more likely to have lower academic achievement, according to the report. The report also showed that poor scores in math are seen as early as first grade for overweight and obese children compared to peers with healthier weights" (2015).

Obesity and the related health effects that it has on health in our community are a key priority for these and many more reasons.

% Responses that ranked Obesity

As a Top Priority Overall White Black Hispanic/Latino City of Saginaw Outside City

% Of Respondents

Community Survey

Community Themes & Strengths Assessment



- Overall, 42.9% of respondents ranked obesity as a top health priority for Saginaw County.
- This ranking was lowest for black residents (35.7%) and residents making less than \$30,000 a year (34.5%).
- Diabetes (27% overall), heart disease (26% overall), and cancer (18% overall) were also health issues that survey respondents ranked.

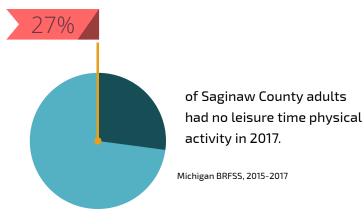
Source: Share Your Story Survey, 2019

Factors in Youth Obesity MiPHY 2015-2016

- 30% of Saginaw high schoolers described themselves as overweight or obese in 2016.
- 1 in 4 students ate 5 servings of fruits and vegetables.
- More than half of high school students were not active for 60 minutes each day.

What does the data show?

Community Health Status Assessment



	SAGINAW	MI	U.S	OVERALL
Adult Obesity	36.5%	32%	39%	Better than national. Worse than state
Obese High Schoolers	16.8%	16.7%	14.8%	Worse than state. Better than national.
Have Diabetes	34.9%	22.5%	N/A	Worse than state

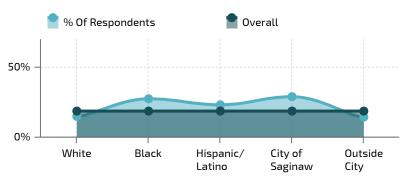
Sources: Michigan BRFSS, 2015-2017, MiPHY 2015-2016

Health Inequities

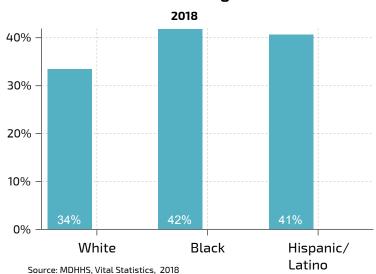
Diabetes was selected as a top priority for health among people of color 10% more than for white resident and was a priority for 38% of Hispanic/Latino residents (Share Your Story Survey, 2019).

This disparity reflects the myriad of ways that obesity can have different impacts on communities and highlights the importance of addressing diabetes as an obesity related chronic disease through CHIP efforts.

Worried About Having Enough Food to Eat In Last 3 Months (Yes/Sometimes)



Obese while Pregnant



According to the Share Your Story Saginaw Survey, black residents and residents of the City of Saginaw were more likely to experience food access issues within the past 3 months.

This highlights the need for examination of inequities within food and resource access within Saginaw County.

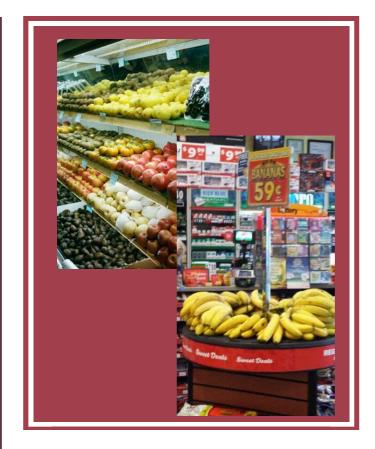
Local Public Health System Assessment

Strengths

Strengths in monitoring health and diagnosing conditions.

Opportunities for Improvement

- Struggle to effectively monitor chronic conditions and communicate with patients on how to selfmonitor.
- A high number of emergency calls to 911 deal with chronic disease management.
- Room for improvement on providing education and information on obesity related chronic disease in the doctor's office and in community conditions.



Source: USDA, 2015

Forces of Change

 Obesity did not arise as a specific Force of Change.

Obesity related themes included:

- Limited transportation cuts off access to all resources.
- Telehealth could be an opportunity for managing chronic disease but is not accessible to all.
- Lack of city parks and recreation; many do not feel safe enough to play outside and/or get healthy food choices from further away.
- Food deserts in Saginaw County limit access to healthy choices.

Mental Health

"People struggling with their mental health may be in your family, live next door, teach your children, work in the next cubicle or sit in the same church pew.

However, only half of those affected receive treatment, often because of the stigma attached to mental health. Untreated, mental illness can contribute to higher medical expenses, poorer performance at school and work, fewer employment opportunities and increased risk of suicide".

- Jean Holthaus LISW, MSW

Source: PineRest Mental Health Awareness Blog



Background

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Over the course of your life, if you experience mental health problems, your thinking, mood, and behavior could be affected (MentalHealth.gov, 2019). Many factors contribute to mental health problems, including:

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse
- Family history of mental health problems

Addressing mental health issues includes not only providing services to those who need them but also addressing prevention education and providing tools to create a more trauma aware community. Mental health efforts should aim to provide wrap-around services for individuals, families and communities in order to address the ripple impact that they can have through communities.

% Responses that ranked Mental Health

As a Top Priority Overall White Black Hispanic/Latino City of Saginaw Outside City Ow Outside City

% Of Respondents

Community Survey

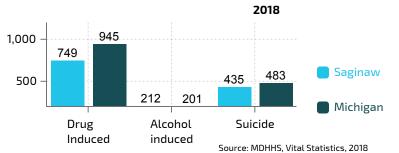
Community Themes & Strengths Assessment



- Across race, income, and geographies mental health ranked as the most frequent response for an important health issue to address.
- 1/2 of Saginaw residents surveyed felt that mental health was a critical issue to address for Saginaw County.
- White residents and residents who lived outside of the city of Saginaw were most likely to rank mental health as an important issue (55.8% and 54.5% respectively)

34

Rate of Potential Years of Life Lost



What does the data show?

Community Health Status Assessment

YOUTH DATA: 36% of youth involved with the Saginaw County Juvenile Court reported having personally witnessed someone getting killed or severely injured (Building Collaboration to Better Serve Juveniles with Mental Health Needs, May 2012).

	SAGINAW	MI	U.S	OVERALL
Number of poor mental health days in the past 30 days	3.8	3.7	3.9	Worse than national. Better than state
% of population ever told they have depression	22%	21.7%	N/A	Worse than state
Poor mental health on at least 14 days of the past month	19.7%	8.5%	12.4%	Worse than state and national

Sources: 2015-2017 Michigan BRFSS & 2017 U.S. BRFSS

Health Inequities

Certain populations are at higher risk of having more severe mental health issues or co-occurring mental health issues. Additionally, those who have a mental illness are at higher risk for a variety of health and socioeconomic impacts.

While trauma cuts across class and race, low-income children, youth and their families and children, youth and families of color disproportionately experience trauma (NCCP, 2007). Since many Saginaw County residents are part of the ALICE population and in poverty - they are at increased risk of experiencing trauma.



1 out 3 Saginaw County residents who make less than \$30,000 a year reported having poor mental health days in the past 3 months.

Source: Share Your Story Survey, 2019

THE RIPPLE EFFECT MENTAL HEALTH

with serious mental illness

PERSON

- · People with serious mental Illness have an
- increased risk for chronic disease 19% of adults with mental illness have a
- substance abuse disorder

 Cardiometabolic rates are 2x higher in adults
- **FAMILY**
- At least 8.4 million Americans provide care to an
- adult with an emotional/mental illness Caregivers provide an average of 32 unpaid



COMMUNITY

- 20% of people experiencing homelessness also have a serious mental illness 37% of people incarcerated in state/federal prison have a diagnosed
- mental condition 70% of youth in juvenile justice system have at least one mental health
- condition 1 in 8 U.S. ER visits are related to mental



- Depression is the leading cause of disability worldwide Depression and anxiety disorders cost the global economy \$1 trillion each year in lost productivity



Local Public Health System Assessment

Strengths

- Hospitals and drug courts have made huge strides in monitoring.
- There is a great deal of work happening in Saginaw County around the opioid epidemic.

Opportunities for Improvement

- There is a need for more prevention focused services and education along with an ability to follow up once services are provided.
- There are also service provision shortages for those who do not quality for Community Mental Health Services.
- Stigma is still a major barrier for those seeking services.



Forces of Change

Medicaid Work Requirements arose as the top factor in the Forces of Change Assessment.

Concerns around this related to access to mental health services for Medicaid clients and issues that may arise with continuity of care for those with serious mental health issues.

Another mental health related challenge mentioned was a lack of prevention oriented community efforts and education around prevention.

Science and technology mentioned that telehealth options for mental health could be a strength and could help address issues of access - particularly in rural areas.

The number of 911 calls relating to suicide in Saginaw County received from January 1, 2019 - October 1, 2019 was 1,166.

Sadly, the total for 2019 increased 349 from October to December. The total for the year is 1,515.

Source: Suicide Response & Resource Network, 2019

Infant Mortality

"If we could improve all moms getting preconception care, our prematurity rate would drop considerably. All moms having and using a safe sleep area and understanding the reasons behind doing so would prevent sleep-related deaths."

- Deb Rhodes, Saginaw County Health Department, Fetal Infant Mortality Review



Background

"Pregnancy can provide an opportunity to identify existing health risks in women and to prevent future health problems for women and their children" (CDC, Healthy People 2020). In 2018, Saginaw County infant mortality rates per 100,000 were 1.3 times higher than the state average (MDHHS Vital Statistics). This number is even higher for black infants within Saginaw with a rate double the state overall numbers (1530 v. 656 per 100,000) (MDHHS Vital Statistics, 2018).

Disparities like this extend beyond the health of infants to the health of mothers." From 2011-2015 in Michigan, Black, non-Hispanic women were three times more likely to die from pregnancy-related causes than White, non-Hispanic women" (Mother Infant Health Improvement Plan, 2019). This priority area reflects a continued focus on addressing disparities and preventable deaths within the maternal infant health sphere.

Saginaw County has the 7th highest infant death rate per 1,000 in Michigan.

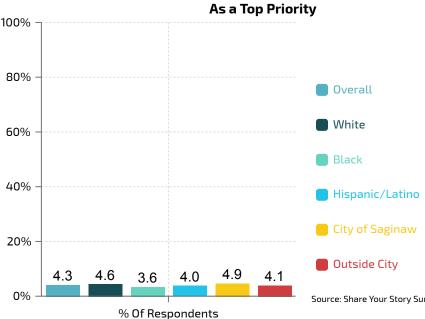
Source: 2014-2018 average data, MDHHS Vital Statistics

Community Survey

Community Themes & Strengths Assessment



% Responses that ranked Infant Mortality



- Overall, 4% of respondents selected Infant Mortality as a health issue to address.
- Only 7% of people aged 18-29 responded that Infant Mortality is an important issue.
- Infant Mortality was the 2nd lowest-ranked health concern in Saginaw County.

Source: Share Your Story Survey, 2019

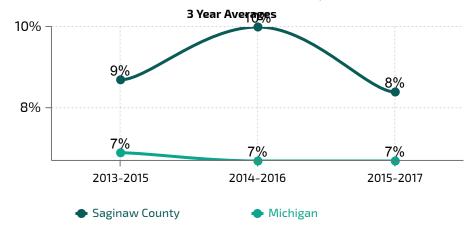
In 2018, the Saginaw Country teenage pregnancy rate was 38 per 1,000 live births. This is 1.4 times higher than the state average of 26 (MDHHS).

"While it is possible that a teen who becomes pregnant can experience a healthy pregnancy and be an excellent parent, many pregnant and parenting teens struggle with multiple stressors, health risks and other complex issues. Being pregnant as a teenager puts you at higher risk for having a baby born too early, with a low birth weight and, tragically, higher risk of death" (Nationwide Children's, 2016).

What does the data show?

Community Health Status Assessment

Total Population Infant Mortality Rates



Source: MDHHS Vital Statistics, 2013-2017

	SAGINAW	MI	U.S.	Overall
Age Adjusted Mortality Rate - Under 1 - Per 10,000	909	656	566	Worse than state and national
Babies with low birth weight (3 year average)	37.9	27.6	N/A	Worse than state
Pre-term births	9.1%	10%	9.9%	Better than state and national

Source: MDHHS Vital Statistics. 2016-2018 & 2017

Health Inequities

Low birth weight infants are at higher risk for health problems. In Saginaw County, black infants are at a higher risk of having a low or very low birth weight.

- Black babies in Saginaw are more likely to have a low birth weight.
- White low birth weights in Saginaw County are <u>15% higher</u> than the rate of the entire state.

White Black Hispanic Source: MDHHS Vital

Michigan

Statistics, 2016-2018

Low Birth Weight per 1,000 by Race

Black babies in Saginaw Country are more likely to be born with a very low birth weight at a rate more than <u>1.5 times</u> white infants.

Saginaw County

Source: MDHHS Vital Statistics, 2016-2018

Local Public Health System Assessment

The second phase of the Local Public Health System Assessment focused on maternal and infant health as a targeted issue. Themes that emerged are listed below.

Strengths

- Monitoring data and health status was mentioned as a strength - there is a great deal of data available on this issue but it is not always timely.
- Partnerships were mentioned as an asset also. There are a high number of great initiatives happening around this issue in Saginaw County currently.

Opportunities for Improvement

 One area to improve is the evaluation of current programs and their outcome measures.



 Nearly 1 in 5 Saginaw County infants were born to mothers that used tobacco during pregnancy (MDHHS, 2018).



Forces of Change

Overall, maternal and infant health did not arise as specific forces of change.

Strengths discussed included:

- Parenting classes
- Patient classes

Threats discussed included:

- Limited number of patient advocates
- Limited funding for prevention
- A lack of follow up services to maintain health

OTHER KEY ISSUES

VIOLENCE & NEIGHBORHOOD SAFETY

"We know that violence is a public health issue because we know that it affects every person in the community when there is a violent act in our city. Could be all the way from the neighbors to first responders to hospital staff to everyone who is watching the TV and they know this violence is happening in our community". - Reverend Sue Hand, Ascension St. Mary's Hospital

Background & Health Inequities

Violence can be experienced in a multitude of ways - from witnessing it to being a direct victim of it. Any level of exposure to violence has been linked to a variety of negative health outcomes from death from injuries sustained by violence to mental health distress and chronic pain conditions from injuries to a higher body mass index linked to living in an unsafe environment (CDC, Healthy People, 2020).

Perceived and actual safety in our neighborhoods is important to the well-being of Saginaw residents. Fear of crime may limit everyday mobility, outdoor activities and access to resources.

Statistically, Saginaw was safer in 2019 and violence has been trending downwards for the past few years. "Overall, we had a very good year," said Saginaw Police Chief Robert M. Ruth. "Shootings, down 25 percent. Homicides, down 40 percent. That's a lot. It's a lot of hard work and dedication in trying to reduce all of these crimes" (WNEM News, January 2020)



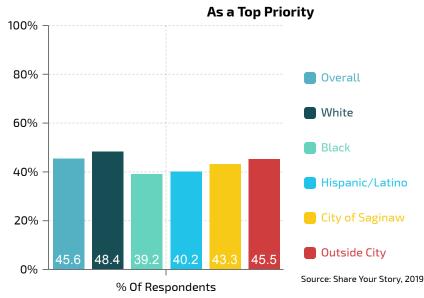
Health Inequities

Despite these overall downward trends - violence is still experienced inequitably in Saginaw County. Overall, 1 in 4 Saginaw City residents had been exposed to violence in the past 3 months in comparison to 1 out of 15 non-city residents (Share Your Story Survey, 2019). Non-white residents also reported having nearly double the risk of being exposed to violence (21.5% compared to 12.3%) (2019). While Saginaw has done better in recent years, there is still work to be done to make neighborhoods safer.

Community Survey

Community Themes & Strengths Assessment

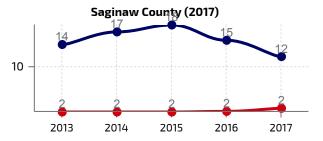
% Responses that Ranked Violence/Neighborhood Safety



- Neighborhood safety and violence was the highest ranked social/environmental concern in Saginaw County by almost a 10% margin.
- Nearly HALF (45.6%) of Saginaw County respondents reported safety and violence as an important issue to address.
- Having a lower income also played into prioritization of violence and neighborhood safety with 40.3% of residents making less than \$30,000 a year ranking violence and neighborhood safety as a top issue.

VIOLENCE & NEIGHBORHOOD SAFETY

Juvenile Crime Rate per 1,000



- Overall crime rate
- Violent crime rate

In 2018, women in Saginaw County experienced domestic violence at nearly double the rate of women in Michigan (11.5 to 6.9).

Sources: MI Juvenile Arrest Data, 2013-2017 & Michigan State Police,, 2018

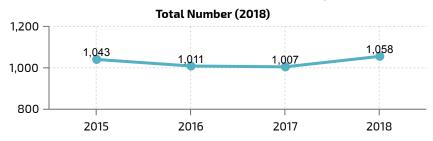
What does the data show?



Community Health Status Assessment

- Juvenile crime rates have been decreasing but saw a slight increase in violent crimes in 2017.
- 746 aggravated assaults occurred in Saginaw County in 2018.
- Sexual assault rates in Saginaw County were 7.4 per 10,000 residents in 2018 compared to 7.2 per 10,000 for the state.

Violent Crimes in Saginaw County



	SAGINAW	MI	U.S	OVERALL
Murder rate per 100,000	8.9	5.06	5.0	Worse than state and national
Domestic Violence rate per 1,000	8.05	4.82	N/A	Worse than state
Juvenile violent crime rate per 1,000	2.15	.96	N/A	Worse than state
Violent crime rate per 100,000	538.2	393.77	233.1	Worse than state and national

Sources: Michigan State Police, 2018 & FBI, 2018

LPHSA

- The first round of the LPHSA did not capture any input about violence and public safety;
 perhaps due to the fact that violence prevention is not listed as an essential service and falls
 outside the realm of traditional public health. However, when committee members were
 asked to look at violence as a targeted issue for the second round of the LPHSA violence
 prevention emerged as one of the lowest scoring areas.
- Areas for improvement cited were: bias in application of laws, research, and evaluation of preventive efforts.
- Strengths cited were: enforcement of laws and mobilization of partnerships.

FOCA

- Accessing resources was noted as a barrier due to violence. When neighborhoods are not safe, getting healthy food and exercise becomes a challenge.
- Disparity in laws was noted as another force of change; with inequitable treatment noted as a negative force of change.
- Neighborhood associations and economic development were noted as opportunities to make neighborhoods safer.

LACK OF JOB OPPORTUNITIES

"\$9.65 an hour. It's not a livable wage, honestly. Even if they are working full time they are not earning enough to support themselves, let alone a family. \$15 an hour jobs and up are just not there for them. Really difficult to get a livable wage".

- Kyle Wallaker, Offender Success Program through MI Works

Background & Health Inequities

Source: U.S. Census Bureau, American Community Survey

Jobs that can support families and individuals in Saginaw County are critical to healthy living. Robert Wood Johnson Foundation notes that unemployment has been linked to losing health insurance, increased depression, increased blood pressure and unhealthy coping behaviors like substance abuse.





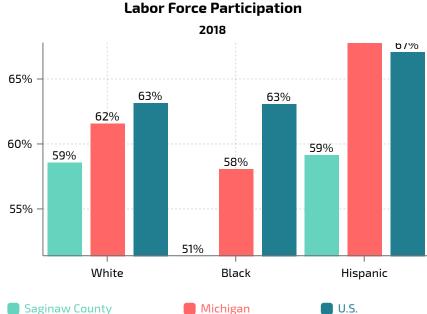




Health Inequities

In 2018, Black residents of Saginaw County were employed in the labor force nearly 12% less than the national average and 7.2% less than their white counterparts (U.S. Census).

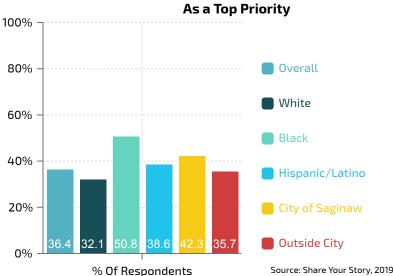
Double the number of black children in Michigan currently live below the 200% poverty level compared to whites. 3 out of 5 Hispanic/Latino children currently live below the poverty level in Michigan (Kids Count, Data Book, 2017).



Community Survey
Community Themes & Strengths Assessment



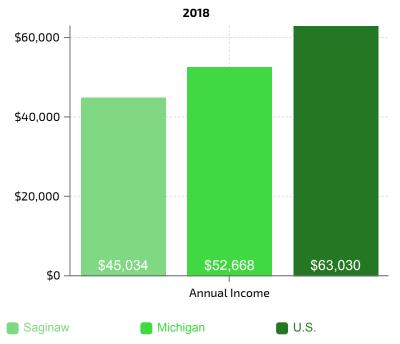
% Responses that Ranked Lack of Job Opportunities



- Lack of job opportunities was the 2nd highest ranked socio-economic issue.
- Overall, 36% of Saginaw County residents reported a lack of job opportunities as an important issue to address.
- Black residents ranked a lack of job opportunities highest – with 1 out of every 2 black residents reporting it as a top issue.

LACK OF JOB OPPORTUNITIES

Average Household Income



Source: U.S. Census Bureau, American Community Survey

What does the data show?



Community Health Status Assessment



There has been a 4.7% decrease in population since 2010 which has contributed to 'brain drain' on the local economy.

The average monthly survival budget for a single adult in Saginaw County is \$1,697 - which equates to \$10.16 -per hour wage rate.

For 2 adults with 1 preschooler and 1 school age child they would need to make \$30.93 per hour to survive - which is nearly \$20,000 higher than the average household income in Saginaw (Michigan ALICE 2017)

	SAGINAW	MI	U.S	OVERALL
Unemployment Rate	3.9%	4.0%	3.6%	Worse than state and better than national
Households in Poverty	17%	14%	11.8%	Worse than state and national
ALICE Population	27%	29%	43%	Better than state and national

Source: U.S. Census Bureau, American Community Survey & Michigan ALICE, 2017

LPHSA

Lack of job opportunities did not arise during discussion as a specific theme BUT Essential
Service 8 Recruiting and Training a Competent Public Health Workforce did bring up
challenges with recruiting certified and licensed employees for the public health workforce.

FOCA

- Medicaid Work Requirements and Generational Poverty were the top two Forces of Change.
- Changing Medicaid work requirements brought up concerns around access to care and having an adequate number of jobs in our community to support the change
- Outbound migration of workers was mentioned as a threat. People leaving the area and few new companies coming in.

DRUG & ALCOHOL ADDICTION

"I think we've made a number of positive strides as far as combating the issue [addiction] but there is still a lot of work to be done. The thing about addiction is that it negatively impacts people from reaching their potential, having happy families. A Saginaw County without addiction would be a community that is thriving". - Nick Kastros, Families Against Narcotics

Background & Health Inequities

Addiction harms the health of individuals and the communities they live in both directly and indirectly through car crashes, overdose deaths, reduced quality of life, and increased crime.

While many community members ranked addiction as an important concern, it is critical to note that the youth population in Saginaw has fewer risk indicators than the state of Michigan - according to 2016 MiPHY data (right).

Health Inequities

While addiction impacts people of all ages, races, and sexes - treatment can cause inequities as well. In Michigan, the opioid epidemic caused over 2,000 deaths in 2017 and opioids including heroin accounted for 73% of Michigan's drug overdose deaths in 2016 (Drugabuse.gov). Despite the need for everyone to have access to treatment to addiction, disparities persist. For every appointment where a person of color received a prescription for addiction-treatment medication called buprenorphine, white patients had 35 such appointments (JAMA Psychiatry, 2019).

Another population at increased risk is men - in Michigan they have 2 times the chance of dying from an alcohol related death in comparison to women (MDHHS Vital Statistics, 2018).

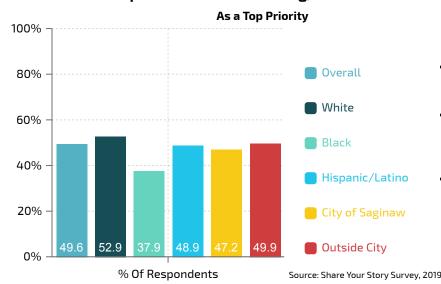
YOUTH INDICATOR DA SHBOARD MIPHY 2015-2016					
Indicator	Saginaw	MI			
Ever tried marijuana	29.8%	41.4%			
Ever drank alcohol	45.6%	61.6%			
Ever abused prescription medication	7.2%	16.1%			
Ever used cocaine	1.5%	4.6%			
Ever offered or sold illegal drugs on school property	13.2%	26%			

Community Survey

Community Themes & Strengths Assessment



% Responses that Ranked Drug/Alcohol Addiction



- Drug and alcohol addiction was the 2nd highest ranked health issue.
- Overall, almost HALF of Saginaw County residents surveyed reported drug and alcohol as an important issue to address.
- 52% of white Saginaw County residents surveyed reported drug and alcohol addiction as an important issue.

DRUG & ALCOHOL ADDICTION

Youth Drug Use Past 30 Days	County	Black	White	Hispanic/ Latino	As/Bs	Ds/Fs
HS students who used marijuana	16.3%	17.2%	12.9%	23.6%	12.9%	33.7%
HS students who used synthetic marijuana one or more times during their life	8.9%	9.0%	7.0%	14.0%	6.2%	17.5%
HS students who took a prescription drug not prescribed to them, including painkillers	5.1%	3.5%	5.4%	6.8%	4.0%	7.1%
HS students who took painkillers such as OxyContin without a prescription	3.9%	2.7%	4.1%	4.8%	2.9%	5.2%
HS students who took a prescription drug such as Adderall without a prescription	2.6%	1.1%	3.3%	4.3%	2.0%	6.3%
HS students who sniffed glue or inhaled any paints or sprays	1.5%	1.1%	1.2%	2.9%	1.4%	3.2%
HS students who used club drugs	0.8%	0.0%	1.2%	0.6%	0.8%	2.1%
HS students who have taken barbiturates without a prescription	0.7%	0.2%	0.8%	1.7%	0.6%	2.1%
HS students who used a needle to inject any illegal drug	0.6%	0.4%	0.5%	1.1%	0.6%	2.1%
HS students who used any form of cocaine	0.3%	0.2%	0.2%	0.9%	0.2%	2.1%
HS students who used methamphetamines	0.3%	0.7%	0.1%	0.6%	0.2%	2.1%
HS students who used heroin	0.2%	0.0%	0.3%	0.6%	0.3%	1.0%

What does the data show?

Community Health Status Assessment





Saginaw's age adjusted death rate from drug overdose decreased from 28.1 to 23.1 from 2017-2018.

Source: MDHHS Vital Statistics

Source: 2015-2016 MiPHY

Per the 2016 MiPHY, youth drug use in Saginaw County was consistently highest among students with low grades and Hispanic/Latino students BUT overall our rates are BELOW the state AND national average.

	SAGINAW	MI	U.S.	Overall
Death Rate by Drug Poisoning (per 100,000)	26.1	26.9	21.7	Better than state. Worse than national.
Rate of years lost due to drug deaths (per 10,000)	201	212	1178	Better than state and national.
Heavy Drinking among Adults	18%	18.6%	13%	Better than state. Worse than national.

Source: MDHHS Vital Statistics, 2018 & 2015-2017 BRFSS

LPHSA

- Stigma was mentioned as a challenge for both addiction and mental health services.
- Opioid epidemic was mentioned as a theme need for education and outreach around opioid addiction.
- Strengths present in partnerships between the court and hospital systems.
- Challenges with criminal justice in providing treatment and not imprisonment.

FOCA

- Addiction was listed as a top Force of Change overall and for social issues. Discussion around addiction focused on insurance and health program requirements, concerns about the stigma of addiction, and the impact of incarceration.
- Legalization of Marijuana arose as a top Force of Change with discussion centered around marijuana as a gateway drug, concerns around youth usage, increased crime balanced against discussions for increased economic growth and positive changes to the justice system.

HOUSING & HOMELESSNESS

"Homelessness makes people vulnerable. When someone is vulnerable, they will ignore or gloss over critical issues and decisions in their lives. Healthcare and wellbeing decisions are often neglected when affordability or ease of access are difficult to attain. If we want people in our community to be healthy, then they need to be safe and stable". – Dan Streeter, CEO – Rescue Ministries of Mid-Michigan

Background & Health Inequities

Being without a safe and stable home is damaging to a person's health. Whether you are homeless or face housing instability – you are more likely to have poor health. Providing people with safe, stable housing leads to lower healthcare costs community wide.



I in 6 Saginaw community members surveyed said they were worried about having a safe place to live in the next few months.

Source: Share Your Story Survey, 2019

Health Inequities

People who are homeless are more likely to be disabled - with 44% of Michigan's homeless population having a disability of some kind compared to 14% of the general population (Ending Homelessness in Michigan, 2018). The formerly incarcerated population is also at higher risk of being unable to find housing or being barred access to housing.

Nevertheless, anyone can struggle with finding stable housing as Michigan families struggle to earn enough money. Currently, the average family income for Michigan (\$649) is well below what is needed to pay for housing - and Saginaw's average income is below that of the state (Ending Homelessness in Michigan, 2018).

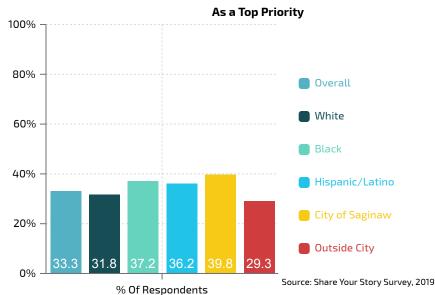


Community Survey

Community Themes & Strengths Assessment



% Responses that Ranked Housing/Homelessness



- Housing & Homelessness was the 3rd highest ranked socio-economic issue.
- Overall, 1 in 3 of Saginaw County residents reported housing and homelessness as an important issue to address.
- Nearly 40% of Saginaw County residents who make less than \$30,000 a year ranked housing and homelessness as an important issue.
- Where you lived also played a role in ranking of the issue - with 39% of city of Saginaw residents ranking it important compared to only 29% of non-city residents.

HOUSING & HOMELESSNESS

Saginaw County has a robust Continuum of Care provider system and average shelter stays have decreased by 8 days between 2011 and 2017 (SCCHAP Annual Report, 2017). What does the data show?

Community Health Status Assessment

Source: SCCHAP Annual Report, 2017 & USICH.GOV, 2018)

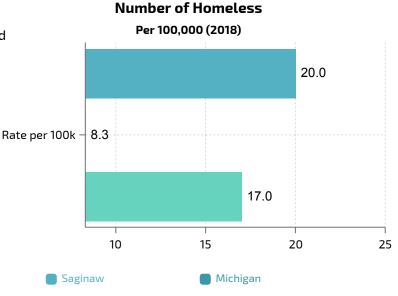


However, housing and homelessness issues are often cyclical and continued support is needed for this population; particularly as many housing issues are linked closely to income and many job opportunities may not

provide enough to support stable housing.

In Michigan, 23% of those who were homeless returned to being homeless within 2 years of being placed in transitional housing.

Source: Ending Homelessness in Michigan, 2018



	SAGINAW	МІ	U.S.	Overall
Households in Poverty	17%	14%	11.8%	Worse than state and national
Moderately or severely cost burdened renters	53%	46%	47%	Worse than state and national
Severe housing problems	15%	16%	17.9%	Better than state and national

Source: U.S. Census Bureau, American Community Survey, 2018 & County Health Rankings, 2017

- Generational Poverty was a top Force of Change. Housing was listed as a threat for this issue along with competition for funding, incarceration, and funding for men around issues like housing and homelessness.
- Environmental forces of change included discussions around economic vitality and opportunities around increasing development in Saginaw – particularly in relation to Saginaw's aging infrastructure.

Housing and homelessness did not arise during discussion as a specific theme during either session of the LPHSA.

TRANSPORTATION

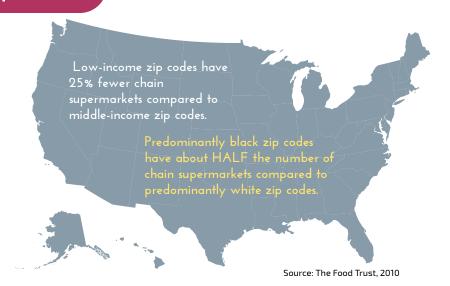
"A healthy community is one that promotes healthy people by ensuring access to safe and nutritious foods; safe places to walk, run or bike; clean air and water; adequate and accessible healthcare systems, and other health enablers. One of these healthy enablers is our transportation system...How we get people and things from one place to another affects our health". - Georges. C. Benjamin, MD, Executive Director of the American Public Health Association

Background & Health Inequities

A thriving transportation system allows community members to access food, medical care, jobs, and more.

It includes public transportation, walkable neighborhoods, and commutable roads.

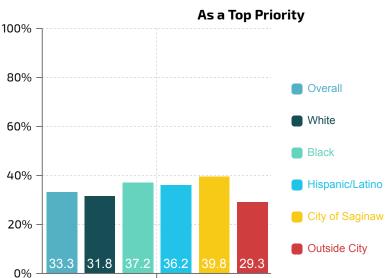
It also focuses on eliminating inequities that might be present – such as food deserts for low income neighborhoods.



Health Inequities

Transportation also links people to needed healthcare services and lack of access to transport plays an important role in seeking care. Nationally, "2.1 million (or 4.4 percent) Medicaid enrollees under age 65 reported they had delayed care because of lack of transportation. ...income and health status were key factors. Almost two-thirds (65.7 percent) of those with a transportation barrier had income below 100 percent of the federal poverty level" (MACPAC.gov, 2019). Delays in care can be costly to both the individual and to the healthcare system - causing more severe issues down the line and preventing people from getting care when they need. Having a robust transportation system with options allows people to access the resources they need - when they need it.

% Responses that Ranked Transportation



% Of Respondents

Community Survey

Community Themes & Strengths Assessment



- Transportation was the 9th highest ranked social and economic issue.
- More than 1 in 4 Black Saginaw County residents surveyed reported transportation as an important issue to address.
- 22% of Hispanic Saginaw County residents and Saginaw City residents surveyed reported transport as an important issue.

Source: Share Your Story Survey, 2019

TRANSPORTATION

What does the data show?



Community Health Status Assessment

Based on the Saginaw Transit Authority Regional Services (STARS) data that was collected from residents of Saginaw County.

- Ridership for **fixed** routes on STARS decreased 42% between 2015 and 2019
- Ridership for demand routes/rides on STARS increased 54% between 2015 and 2019

These data reflect changes in transportation nationwide - with more transport needs shifting towards a user driven model.

	Saginaw	МІ	U.S.	Overall
Population				Better than state
with commute of 30 mins or less	75.9%	65.2%	62.6%	and national
Population				Worse than state
using public transport to get to	0.5%	1.4%	5.1%	and national
work				
				Worse than state
Low income and low access to	7.2%	5.4%	8.3%	and better than
Source: U.S. Census Bureau, American Community Str.		J. + /0	0.570	national

LPHSA

 Rides to Wellness, Home Visiting Programs, and Community Health Workers were all highlighted in the LPHSA as ways to overcome transportation barriers and access to resources.

FOCA

- Transportation did not arise as a top issue for Forces of Change but Access to Food and Accessibility to Resources both emerged as top issues.
- Limited affordable transportation was discussed as a threat to access for multiple resources.

COMMUNITY HEALTH IMPROVEMENT PLAN

Community Health Improvement Plan

Introduction & How to Get Involved

In short, the Community Health Improvement Plan (CHIP) is the 'action' phase of the Community Health Assessment and MAPP process. The CHIP is a comprehensive plan that aims to address issues that the CHA highlighted as strategic issues.

The organizations that make up the CHA/CHIP Committee work to build upon relationships built during the CHA process and to identify gaps to get the right organizational partners at the table to address the identified issues. Once these groups or committees are identified or if they already exist-they get to work!



Interested in being a part of a CHIP Committee?
Contact ALIGNMENT Saginaw to learn more
about how YOU can make a difference in our
community's health!

The committees identify goals for their issues based on information collected from the CHA and then look at evidence based models to address these issues.

These models may already exist in the community and the focus could be on strengthening these approaches or it may be a completely new model that is tried out. The CHA committee also works to seek funding opportunities in the community.

Lastly, the CHA committees work closely with the CHA/CHIP Committee organizations - many of whom use the CHA to develop an internal strategic plan and develop organization specific goals based on the strategic issues



Promote affordable, accessible resources for mental health

The Data

Overall, mental health arose as the top issue for this round of the CHA - both from the Community Health Status Assessment and during the Strategic Issues process. A high percentage of community members reported struggling with mental health issues in the past 3 months and addiction was also highlighted as a key issue.

Moving Forward

Moving into this cycle of the CHA - the Community Health Improvement Committee will be developing strategies that are based on the outcomes of the CHA. Some of the broad strategies and areas that arose as themes are highlighted below. Each of these areas will be explored in the development of the Community Health Improvement Plan for Saginaw County.

Number of 911 calls relating to

Percent of community members experiencing poor mental health days more than 14 days during the past month

Number of deaths due to drug poisoning per 100,000

TARGETED INDICATORS

TRAUMA INFORMED

Increase focus on trauma informed approaches across Saginaw County and partner with organizations to increase knowledge of trauma informed best practices.

ADDICTION

Drug and alcohol disorders are closely tied to issues of mental health. Continue to seek funding for prevention and treatment around addiction.

LEGALIZATION OF MARIJUANA Legalization arose as a potential force of change for mental health issues. Monitor data associated with legalization to evaluate its impacts on community health.

THEMES



Increase education and outreach efforts to decrease stigma in seeking care.



Improve access to care for those without insurance



Work with the criminal justice system on enforcing laws and imprisonment in ways that support mental health.

GAPS in the Local Public Health System

Create a community which provides access, opportunities, and encouragement for healthy lifestyles.

The Data

Obesity was ranked as the third most important health issue to address via the community survey. Additionally, diabetes, heart disease, and cancer - many of which can result from obesity - were also highly ranked. Obesity currently impacts 36% of Saginaw County community members.

Moving Forward

Efforts to address obesity must address root causes of obesity and examine place based inequities and access issues. Additionally, efforts to teach individuals how to effectively manage chronic disease must come from the community and the healthcare system.

Percent of population with diabetes and racial disparities in diabetes rates.

Percent of youth with less than 60 minutes of physical activity and percent of adults with no leisure time physical activity

Percent of residents who have worried about accessing food in last 3 months.

TARGETED INDICATORS

DIABETES

Diabetes arose as the most mentioned chronic disease for community members - particularly for the Hispanic/Latino population. Efforts towards addressing this illness need to be focused on management and prevention in a culturally appropriate manner.

ACCESS

Access to physical activity and healthy food faced barriers such as transportation and a sense of safety. Place based models must be used to target areas of high need.

THEMES



Increase education and outreach efforts for management of chronic disease.



Address social determinants of health while linking people to care.



Close gaps to accessing services for the most vulnerable populations.

GAPS in the Local Public Health System

Impact infant health and birth outcomes by focusing on prevention and pre-natal care by addressing health disparities

The Data

Data from Saginaw supports infant and maternal health as a continuing health issue and highlights disparities in outcomes that are critical for public health to address. Saginaw's infant mortality rate is higher than national and state rates and when presented with data at the Strategic Issues session, community members and organizational representatives selected this as a priority issue to address.

Moving Forward

This focus will target both the overall number of infant deaths in Saginaw County as well as inequities in care that have led to disparate outcomes for women of color.

Percent of pre-term and low birth weight births

Pre and post natal data by race and income levels

Development of local evaluation and outcome measures and pathways to collect this data

Number of preventable infant

TARGETED INDICATORS

PARTNERSHIP

The plethora of efforts around maternal and infant health in Saginaw County need to be aligned in order to effectively utilize the data and funding available.

EQUITY

Disparities in care were a leading force in discussions - for both maternal and infant health. Focus at the state and local level is working to gear towards root causes of disparities in care.

THEMES



Increase education around implicit bias and disparities.

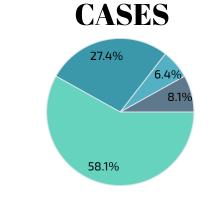


Strengthen evaluation of community initiatives.



Improve strategic alliances to improve outcomes

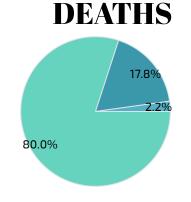
GAPS in the Local Public Health System



58.1

RACE

The black population in Saginaw County has been disproportionately impacted by COVID-19 - with black cases accounting for 27% of cases despite blacks only making up 19% of Saginaw County's total population.





80

Black

ck 17.8



White

6.4

Unknown

Black

8.1

27.4

Other Race

2.2



SEX



Currently, deaths from COVID-19 in Saginaw are equally impacting men and women but across the state - more men have died than women.

ETHNICITY



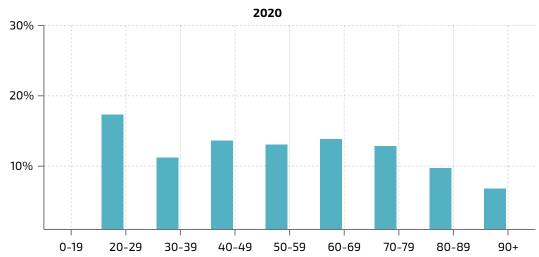
COVID-19

Data as of 4/27/2020

AGE

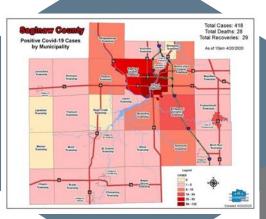
COVID-19 cases have hit the elderly the hardest with most deaths being in this population but distribution of cases still spreads across many age groups in Saginaw.

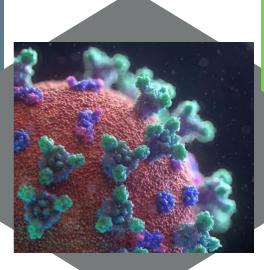
Age Distribution of Cases





of deaths have been in the 70+ age group





Over 500 cases Over 45 Deaths



When I was a boy and I would see scary things in the news, my mother would say to me 'Look for the helpers. You will always find people who are helping". - Mr. Rogers

Saginaw County had its first two confirmed COVID-19 cases on March 21st, 2020. When the community health assessment was being planned - a pandemic was not on anyone's mind. Emergency preparedness and infectious disease were not the focus of conversation as so many of the entrenched issues modern public health deals with are based in social determinants of health and chronic disease and not acute illness.However, as COVID-19 sweeps through Saginaw County - it is clear that modern and historic public health will need to meet in the middle - to use all of the epidemiologic tools of foundational public health; to seek out health inequities and root causes of how this disease has attacked our communities and to work together across every sector to protect

the people of Saginaw County.

The three strategic issues outlined in this report are still issues that will need to be addressed as they are issues that may become more strained during crisis.

This next phase of the community health improvement plan will be deeply connected with the community, state, and national response to COVID-19. Every aspect of community health - from financial to emotional to physical will be strained by this pandemic but we will band together to come out stronger, to plan for recovery and to be the helpers our community needs.

A Look Back Joint CHIP Committees Evaluation of Impact 2017-2020

The 2017-2020 Saginaw County Community Health Improvement Plan (CHIP) was carried out by multiple agencies across the county; some efforts were those of an individual agency and others were the product of committees formed from the CHA. The projects listed on these first two pages are projects that were shared as part of joint CHIP committees between 2017 and 2020.

In the pages following, outcomes from the local hospital system are included in relation to the 2017-2020 CHIP goals.

Priority Health Need: Emerging Models of Health Service Delivery Goal: To address emerging models of health service delivery in Saginaw County

This group addressed two main issues

- Better assessment and enhancement of patient experience
- Improvement of navigation through health and wellness education.

These goals were addressed through discussion and efforts around Community Health Workers and re-creation of a health HUB in the region.



Priority Health Need: Obesity Related Chronic Disease Goal: Reduce the percentage of children, adolescents and adults who are obese and improve health outcomes including diabetes, heart disease, cancer, and asthma.

- Michigan State University Extension provided nutrition education in schools, worksites and child care environments focused on making the healthy choice the easy choice. In addition, they connected people with local food through the Saginaw Farmer's Markets.
- Saginaw Valley Resource Center (SVRC) provided cooking demonstrations, food safety, and food preservation classes will be held in the SVRC Downtown Farmers market.
- Meridian Health Plan provided wellness days with provider offices and clinics focused on preventative services. In addition, Meridian provides support and education at health fairs and community events.
- MIHIA focused on systems changes including the expansion of Diabetes Prevention Program through training
 master trainings. The KURBO program aimed to provide education to 200 children 5-19 years of age that includes 12
 weeks of virtual coaching to the family focused on increasing activity, healthy eating and emotional needs by
 September 2018.
- The Hearth Home provided a food pantry with healthier options for HIV patients that need food assistance.
- The YMCA will provide the Run for Your Heart Training Program a 12 week training program.
- The Saginaw CAC offered Enhanced Fitness for Seniors to increase physical activity of seniors. They also offered an urban gardening program to 100 families including the distribution of plants. They provide emergency food assistance to older adults over 60 years of age and are looking at recipes and nutrition education information to go along with the food assistance packages.
- A community garden was created by Heather Boyd on the West Side of Saginaw to encourage child care providers to visit and garden.
- Community Mental Health created diabetes conversation map classes with adults receiving community mental
 health services or who are enrolled in the health home program.

A Look Back Joint CHIP Committees Evaluation of Impact 2017-2020

Priority Health Need: Behavioral Health

Goal: Reduce substance use in Saginaw County and increase community knowledge and awareness of mental conditions and where to seek treatment.

Increased knowledge of where to access treatment

• Published the updated Community Counseling Directory to include SUD providers for 2017/2018 and continued with Mental Health First Aid Training Program in Saginaw

Worked on reducing substance abuse rates in Saginaw County

- Promoted proper and safe disposal of unused medications.
- Reduced youth access to tobacco.

Promote Trauma Informed Community Training and Awareness

- Hosted trauma education events.
- Promoted use of trauma resources and supports. Ongoing goal.

Organized Local Hoarding Task Force for Saginaw County

• Developed protocols and resources for hoarding response and treatment.

Priority Health Need: Health and Social Equity

Goal: To advocate for policy, procedures, services aimed at eliminating the determinants of health that lead to health and social inequities

The Health and Social Equity Advisory Group was tasked with bringing light to transportation issues in Saginaw and across the region, identifying the greatest need, and organizing solutions to satisfy those needs.

This group's greatest achievement was the Great Lakes Bay Transportation Summits, hosted in 2016 at Delta College with 80 attendees and in 2017 at Saginaw Valley State University with 120 attendees. These events brought in incredible speakers from around the state to showcase best practices and innovative solutions for regional transportation addressing resident's needs to access healthcare, employment, school and social services.

The H&SE team established a community survey that was taken by over 1000 participants. When crisis struck STARS and the agency was threatened with closure, H&SE was able to distribute information, lean on elected officials for support and leadership, present a united front, and organize riders to speak on their own behalf. These quick and targeted efforts played a large part in saving the agency. Through relationship with transportation agencies, organizing within the community, events and community survey, Health and Social Equity saw many of their asks satisfied:

- Return of Saturday service
- Extending service times into the evening
- Free rides on election day
- Overhauled fixed route system to better serve residents' current needs
- Launch of a subsidized ride to work program with Saginaw County Business & Education Partnership
- 24/7 door to door service for \$5.25
- Increased regionalism, better communication and transparency
- Vehicle replacement at STARS

A Look Back Covenant HealthCare Evaluation of Impact 2017-2020



Priority Health Need: Emerging Models of Health Service Delivery Goal: To address emerging models of health service delivery in Saginaw County

Thumb ER Nurse Manager

 Covenant HealthCare hosts quarterly meetings for thumb-area emergency Room nurse managers and leaders for information exchanging. Most recently (4th quarter 2019), 25 individuals attended and received a presentation from Dr. John Sharpe titled "Tourniquet History and Usage"; ECC/Trauma/LifeNet updates were also given.

Great Lakes Bay Health Centers Partnership

Covenant HealthCare continues to support Great Lakes Bay Health Centers (GLBHC), through partnerships and
collaboration, including physician-to-physician communication, in their efforts to provide accessible primary care
particularly for the medically indigent. Collaborative agreements between GLBHC primary care physicians and
Covenant specialists have been executed for 12-specialties and speak to communication and timeliness of patient
care. In addition, Covenant and GLBH are exploring partnership options for improved access to specialties such as
gastroenterology.

"See Me as a Person - Developing Therapeutic Relationships with Patients" Program

• Covenant HealthCare continues to train and adopt the "See Me as a Person - Developing Therapeutic Relationships with Patients" program hospital-wide. "See Me As A Person" training is held on a monthly basis; most recently (1st quarter of 2020), 44 employees including physicians, nurses, physical therapists, occupational therapists, environmental services staff, case management, and dietary staff completed the training.

Patient Family Advisory Councils (PFAC)

Covenant HealthCare continues to promote Patient Family Advisory Councils (PFAC) to ensure patients have a
voice within the organization. In addition to an overall organizational PFAC, Covenant has specialized PFACs for
orthopaedics, cancer care, women and children services, and physician offices. Efforts are currently underway to
form PFACs for emergency and trauma services.

IRS 501(r) Compliance Requirements

• Covenant HealthCare's Financial Assistance Policy (FAP) underwent its annual review in the first quarter of 2019 and was presented to the governing board for approval in April 2019. Updates were made to reflect the 2019 Federal Poverty Guidelines, and the policy remains compliant per IRS 501(r) requirements.

Priority Health Need: Obesity Related Chronic Disease

Goal: Reduce the percentage of children, adolescents and adults who are obese and improve health outcomes including diabetes, heart disease, cancer, and asthma.

Dietary Options and Offerings

• Covenant HealthCare dietary department survey's patrons, including patients, employees and visitors, to gain input and suggestions on menu choices that are compliant with chronic diseases. In 2019, the dietary department began to work with its food supplier to expand more lower sodium product options and offerings for both the café menu and patient regular menu selections.

A Look Back Covenant HealthCare Evaluation of Impact 2017-2020



Priority Health Need: Behavioral Health

Goal: Reduce substance use in Saginaw County and increase community knowledge and awareness of mental conditions and where to seek treatment.

Covenant's "Path to Recovery" Opioid Task Force

Covenant HealthCare created the "Covenant's Path to Recovery" opioid task force. Currently (2020), the task force
is composed of over 30 director and executive-level members who represent multiple disciplines and actively
participate in bi-monthly meetings.

Spirit Hockey Partnership

• Covenant HealthCare partnered with the Saginaw Spirit hockey team to host an opioid awareness event on September 28, 2019. The community-wide event was attended by over 3,000 individuals.

Priority Health Need: Maternal, Infant, and Child Health Goal: To reduce the number of children in Saginaw County who die before their first birthday.

Community Education

• Using traditional and modern approaches, Covenant HealthCare regularly distributes preventative and educational community messages related to maternal, infant, and child health. Messages are delivered in a variety of communication modes, including social media posts and blogs, interview requests on trending health topics (ex: Stop the Bleed, firework safety, safe sleep), and in-person presentations within the community. In 1st quarter 2020, 13-weekly "Medical Moments" segments were delivered on WNEM TV5 educating on a variety of disease prevention and healthcare engagement topics including cancer, physical medicine and rehabilitation (PM&R), orthopedics, breastfeeding, and more.

Immunization and Well-Child Visit Monitoring

• All 17 of Covenant HealthCare' primary care offices continue to emphasize immunizations and well-child visits monitoring. This emphasis is supported by the electronic health record system EPIC and it's "Healthy Planet" functionality which identifies patients due for well-child exams. Additionally, Covenant Medical Group's Bridgeport office participates in "Reach Out and Read", a program that provides children with a book each time vaccinations are given.

Regional Neonatal Intensive Care Unit Continuous Quality Improvement Committee

The multi-disciplinary Regional Neonatal Intensive Care Unit Continuous Quality Improvement Committee meets
weekly to discuss established quality metrics and action plans to achieve metrics and improve care outcomes.
Current (2020) issues which are actively being worked on include: changing treatment regime for Neonatal
Abstinence Syndrome (NAS) babies to a non-pharmacologic primary approach in which the mother is the primary
treatment, Hospital Acquired Infections, and Length of Stay. Covenant Healthcare also continues to share data and
analysis with Pediatrix Medical Group to improve neonatal care and outcomes.

CAN Council Partnership

 In partnership with the CAN (Child Abuse and Neglect) Council Great Lakes Bay Region, Covenant HealthCare's Childbirth Outreach Program Coordinator has implemented a class to educate non-parent caregivers in the "Protect Your Baby's Life" program elements. Grandparent and non-parent caregiver safety classes are offered monthly.

CPR Training for Parents

• Covenant HealthCare' Childbirth Education (CBE) offers Infant and Child CPR training to parents, family, and friends twice a month. Approximately 30 individuals attend each month.

A Look Back Ascension St. Mary's Evaluation of Impact 2017-2020



Priority Health Need: Emerging Models of Health Service Delivery Goal: To address emerging models of health service delivery in Saginaw County Organization Goal: To increase access to affordable health care, health insurance and improve utilization and quality of health services delivered to Veterans, uninsured, under-served, and vulnerable populations .

Veterans Choice

 Ascension St. Mary's Hospital has sought to position Ascension as a partner in supporting Veterans Affairs (VA) programs to improve services to Veterans via the Veterans Choice Program that are aligned with population Health care delivery and Triple Aim outcomes. Currently (2020), Ascension St. Mary's Center of Hope is deepening those partnerships through the gardening program set to launch in 2020.

Advance Care Planning (ACP)

• Ascension St. Mary's Hospital has sought to develop and implement Advance Care Planning (ACP) and Advance Directives (AD) for Saginaw county residents and physicians. Currently (2020), the Center of Hope intends to hold workshops in 2020.



Priority Health Need: Obesity Related Chronic Disease

Goal: Reduce the percentage of children, adolescents and adults who are obese and improve health outcomes including diabetes, heart disease, cancer, and asthma.

Organization Goal: To leverage the strengths of Ascension Mid-Michigan's diabetes, nutrition, and lifestyle programs to provide chronic disease prevention and management education and resources at the right service, right place, right time by refining the structure and process to support improved health outcomes.

Diabetes Prevention Program (DPP), including virtual DPP

Since 2015, diabetes prevention via the CDC Diabetes Prevention Program (DPP) has been a focus area for Ascension St. Mary's Hospital. From 2017 - 2020 this included the continuation of offering in-person DPP sessions at the Center of Hope and expanding training to hospital associates to become certified DPP Lifestyle Coaches. Currently, Center for Hope offers in-person DPP classes; however, due to steady decreases in participant attendance, operational challenges, and launch of virtual DPP, continuation will be re-evaluated in late 2020. In June 2019, Ascension St. Mary's became the first hospital in the Great Lakes Bay Region to partner with MiHIA on the Good Measures Virtual DPP program. This innovative virtual program is designed to help people with pre-diabetes or certain risk factors to prevent progression to type 2 diabetes. Once enrolled, participants have access to: personalized coaching, Power Digital Technology, and The Good Measures Index (GMI) - a number ranging from 0 to 100 which gives participants a way to see their nutrition status, meal by meal, and learn to make better food choices to achieve their goals.

Diabetes Self-Management Education (DSME)

Ascension St. Mary's Diabetes Education Center provides comprehensive diabetes education to those who with prediabetes or diabetes. The program is recognized by the American Association of Diabetes Educators (AADE) and provides many services, including carbohydrate counting, diabetes problem solving, insulin management, label reading, and meal planning, to help individuals manage diabetic conditions. Then Center also provides individual and group instruction to help participants gain knowledge to control your condition, avoid complications and enhance skills for a healthier life.

Diabetes Personal Action Toward Health (PATH)

The Diabetes Personal Action Toward Health (PATH) program was discontinued due to steady decreases in participant attendance and operational challenges. Current (2020), efforts are underway to train all Center of Hope staff on the Diabetes PATH in anticipation to relaunch classes in late 2020.

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A Look Back Ascension St. Mary's Evaluation of Impact 2017-2020



Priority Health Need: Behavioral Health

Goal: Reduce substance use in Saginaw County and increase community knowledge and awareness of mental conditions and where to seek treatment.

Organization Goal: To serve the community through collaboration with the Saginaw Community Mental Health Authority (SCCMHA) to support healthy lifestyles among adults through offering Personal Action Toward Health (PATH) classes and encouraging participants to become involved in other free healthy lifestyle and exercise programs.

Personal Action Toward Health (PATH)

• The PATH program was discontinued due to steady decreases in participant attendance and operational challenges. Current (2020), efforts are underway to train all Center of Hope staff on the Diabetes PATH in anticipation to relaunch classes in late 2020.

Priority Health Need: Health and Social Equity

Goal: To advocate for policy, procedures, services aimed at eliminating the determinants of health that lead to health and social inequities

Organization Goal: to address poverty access inequities through offering programs, activities and services free to the community.

Healthy Lifestyle Programs

- Ascension St. Mary's Center of Hope provides the following free weekly activities to decrease disparities and improve health access: walking class, yoga, enhanced fitness, and hustle aerobics.
- Additionally, the Center of Hope works closely with MSU Extension to provide healthy lifestyle programs and classes such as free groceries and nutrition education, chronic disease programs, community garden assistance, and various children programs including Cooking Matters. The Cooking Matters campaign aims to teach parents and caregivers with limited food budgets how to shop for and cook healthy meals – building a world where healthy eating choices are available for everyone.
- Center of Hope assists individuals and families with locating a primary care provider, free or low-cost prescriptions, lifestyle assistance, health insurance access assistance, and free laundry services.
- The Center of Hope has partnered with Saginaw's Partnership Center, a faith-based nonprofit organization that assists Saginaw residents in financial emergencies and other difficulties, to offer free in-house services such as: assistance with birth certificates, eviction notices, water and energy/heat shut offs. The Partnership Center also assists with obtaining various forms of identification (e.g. Michigan I.D. and State issued driver's license.)



Questions?

Data Requests?

Need detailed data?

Visit Saginaw County Health
Department's web page to
learn more.

www.saginawpublichealth.org

APPENDIX

Centers for Disease Control (CDC)

- · Birth Defects by State: Michigan
- Healthy People 2020

County Health Rankings

2017

Kids Count

2017 Data Book

Michigan ALICE Report

Saginaw, 2017

Michigan Behavioral Risk Factor Survey (MIBRFSS)

2014-2016, 2015-2017

MI School Data

2018

Michigan Department of Health and Human Services (MDHHS)

• 2015-2018, Michigan Death Certificate Registries, Division for Vital Records & Health Statistics,

Michigan Department of Health & Human Services.

2013-2018 Geocoded Michigan Birth Certificate Registry.

Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

- 2015-2018 Michigan Resident Inpatient Files, Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services.
- 2013-2018 Michigan Resident Live Birth Files, Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services.

Michigan Profile for Healthy Youth (MiPHY)

2015-2016

Michigan State Police Crime & Arrest Data

- 2018 Crime Data
- 2013-2017 Juvenile Arrest Data

U.S. Census Bureau, American Community Survey

- 5 Year Estimates, 2013-2017
- 2010,2011,2012,2013,2014,2015,2016,2017,2018

Saginaw County Community Homeless Area Providers

2017 Annual Report

Share Your Story Survey

Community Survey, 2019

STARS Ridership Data

2015-2019

Suicide Response & Resource Network

2018-2019

USDA

Food Environment Atlas, 2015

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Do you live, work, or attend school in Saginaw County? Check all that apply

	□ Live	□ Work	□ Attend	Sc	hool	_ N	lone of the	e abo	ove
0	What city OR tov	vnship do you li ⊙ Chapin	ive in?	0	Lakefie	eld	0	Swan	n Creek
0	Birch Run	 Chesaning 	(Taumahin)	0				•	outh
0	Blumfield Brady	FrankenmuthFrankenmuth		0	Marion Richla			Thom Tittab	nas Dawassee
0	Brant	 Fremont 	,	0	0				ikee (Township)
0	Bridgeport Charter Buena Vista	JamesJonesfield		0					ukee (City) live in Saginav
0	Carrollton	 Kochville 		0				Count	
0	Age group? 18-29 65-74	o 30-39 o 75+		0	40-49 Prefer			50-6	4
	Gender? □ Male □ Female □ Prefer not to answer □ Self Describe								
0	District American American Indian								
	Income?								
	Under \$15,000								
0	 \$50,000 - \$74,999 \$75,000 - \$99,999 Over \$100,000 								
In	In the past three months								
						Yes	Sometin	nes	Not Sure
	Did you eat less than you felt you should because there was not enough food?								
	d you have a depen		to work or					\neg	
school, and your appointments?									

All responses are kept confidential and names will not be linked with survey responses. Individual Survey responses will not be shared, only aggregated data will be utilized.

Did you worry that you may not have safe housing in

Did poor physical health keep you from doing your usual activities; like work, school or a hobby?

Did poor mental health keep you from doing your usual activities; like work, school or a hobby?

Were you exposed to violence in your neighborhood?

the next few months?



We would like to learn about Saginaw County's access to quality healthcare. For each						
statement mark how strongly you agree/disagree.1 for strongly ag	ree &	5 for	stror	ngly d	isag	ree.
	1	2	3	4	5	N/A
My healthcare is affordable						
I am aware of what healthcare services are available in Saginaw						
County						
I can get an appointment when I need it						
The healthcare I receive provides for all my needs						
The place I receive care is: open, respectful, and welcoming for						
patients of all backgrounds						
I can get to my healthcare appointments						
Please check this box if you do not have access to any healthcare						

	Prioritization of Community Needs					
W	hat are the <mark>3 most important health c</mark>	oncerns	impacting Saginaw County?			
	Alcohol/drug addiction		Alzheimer's/Dementia			
	Diabetes/High blood sugar		Infant Death			
	Heart Disease/High Blood Pressure		Stroke			
	Mental Health (Depression, Anxiety)		Sexually Transmitted Disease (STD)			
	Overweight/Obesity		Tobacco/Smoking			
	Asthma/COPD		Don't Know			
	Cancer		Other			
	Dental Health					
W			ental concerns impacting Saginaw County?			
	Availability of healthcare		Lack of affordable child care			
	Limited access to healthy foods		Housing/Homelessness			
	Poor schools/school drop-out rates		Neighborhood safety/violence			
	Lack of job opportunities		Transportation			
	Race/ethnicity discrimination		Sex/Gender Discrimination			
	Child abuse/neglect		Don't Know			
			Other			
W	hat are 3 community strengths that S	aginaw (County has that could help address the			
	mmunity concerns mentioned above?					
	Natural resources (lakes, parks, etc.)		A sense of belonging			
	Quality, affordable healthcare		Pride in community			
	Access to healthy food		Resilience			
	Opportunities to be physically active		Connected neighborhoods			
	Community organizations that care		An increase in economic growth			
	Jobs that support families		Affordable places to live			
	Equitable access to resources		Other			
		Drawings fo	w if you would like to be entered into the raffle for a or the raffle will be completed on December 20, 2019.			
	Name Phone	Number_	Email			

All responses are kept confidential and names will not be linked with survey responses. Individual Survey responses will not be shared, only aggregated data will be utilized.