2019 Community Health Needs Assessment

Building Healthy Communities

MidMichigan Medical Center - Gladwin

MidMichigan Health
UNIVERSITY OF MICHIGAN HEALTH SYSTEM

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Introductory Remarks

The Community Health Team of MidMichigan Health supports the Community Health Needs Assessment, or CHNA, as a key component of improving population health. Our assessments and corresponding plans are a reflection of the Mission, Vision, and Core Values of MidMichigan Health. We truly believe that health happens where we live, learn, work and play, and that all people should have the opportunity to make choices that allow them to live a long, healthy life, regardless of their income, education or ethnic background.

MidMichigan Medical Center - Gladwin completed their last CHNA in 2016 when MidMichigan Health foundational elements towards excellence in health care were being strengthened. These elements aligned with the Institute for Healthcare Improvement (IHI) belief that new designs can and must be developed to accomplish three critical objectives, or what is called the "Triple Aim": improving the health of the population; enhancing the patient experience of care (including quality, access and reliability); and reducing, or at least controlling the per capita cost of care. Additional focus on employee and provider engagement, and most recently community, has further strengthened our foundation.

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Our Mission
Our Mission is to provide excellent health services to improve the quality of life for people in our communities.

Our Vision
Our Vision is to celebrate the power of health throughout life - *with you.*

Our Values
At MidMichigan Health, we hold these values to be fundamental:

Excellence - We offer nothing less than the best.

Integrity - We do the right thing, each time, every time.

Teamwork - We provide individual commitment to a group effort.

Accountability - We accept responsibility for all we do.

Feedback is welcomed via stephanie.leibfritz@midmichigan.org

Population Health

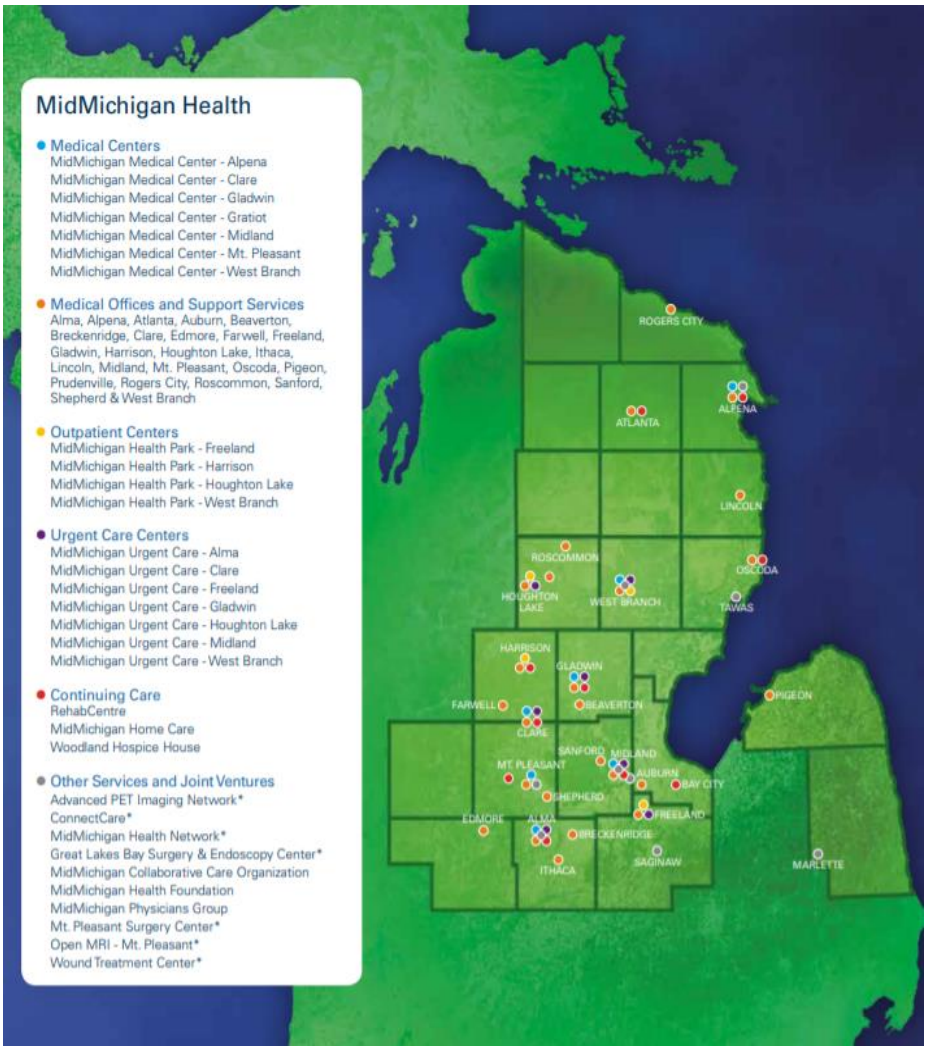
Each subsidiary addresses health and wellbeing within the communities served. Four portfolios of Population Health are addressed: Physical and Behavioral Health; Social and Spiritual Well-being; Community Health and Well-Being, and Communities of Solutions.

Source: Pathways to Population Health 2018

Portfolio one aims at improving the physical and or mental health of individuals served through quality measurement and performance improvement initiatives, as well as the use of patient care navigators and care managers in primary care offices and initiatives to improve access to care, like increased opportunities for telemedicine. Portfolio two addresses social and spiritual drivers of health and well-being, many of which are identified through systematic evaluation of Social Determinants of Health completed at several points of contact including: new patients, emergency department patients, annual physicals, post hospital discharges, referrals to care managers and patients who consistently do not show up for appointments to determine what barriers they may be encountering. Portfolio three activities aim to improve community health and well-being by community partners working together to assess data, determine focus areas of health and pool staff and resources to implement health improvement projects like increasing physical activity, access to healthy foods and reducing opioid usage. Portfolio four addresses our role as an anchor institution. We are the major employer in each community we serve and as such, we promote health and well-being by capitalizing on community assets and active engagement with regional initiatives.

Our Communities

Mid Michigan Health is a non-profit health system, headquartered in Midland, Michigan, affiliated with Michigan Medicine, the health care division of the University of Michigan. MidMichigan Health covers a 23-county region with medical centers in Alpena, Alma, Clare, Gladwin, Midland, Mt. Pleasant and West Branch. In addition to its Medical Centers, MidMichigan Health also offers both home health care and physician services, and has a strong commitment to medical education. MidMichigan Physicians Group provides urgent care and medical offices in more than 30 specialties and subspecialties including cardiology, hematology/oncology, orthopedics, vascular surgery, family medicine and more. The MidMichigan Health Foundation supports patients and families served by MidMichigan Health by raising funds for equipment, services and programs. Currently, MidMichigan has more than 7,400 employees, volunteers and physicians and provided more than $144 million in community benefits in 2018.



MidMichigan Medical Center - Alpena

A 139 licensed-bed hospital located in northeast Michigan on the shores of Lake Huron, Alpena's first community hospital opened in 1915 as the Donald McRae Hospital. It served until 1939, when a petition was passed to build a new public hospital. On April 16, 1940, a new 88-licensed bed hospital opened called Alpena General Hospital. On April 1, 2016, Alpena Regional Medical Center joined MidMichigan Health, making it the fifth Medical Center in the MidMichigan Health system. To reflect the hospital joining MidMichigan, the Medical Center changed its name to MidMichigan Medical Center - Alpena. Accredited by The Joint Commission, the Medical Center has approximately 1,000 employees, 200 volunteers and about 100 physicians. In 2017, the Medical Center in Alpena was recognized as a Top Rural Community Hospital by the National Rural Health Association, was named to the Becker's Hospital Review 2017 list of 100 Great Community Hospitals, and received Michigan's Quality Improvement Organization (MPRO) 2019 Governor's Awards of Excellence for outstanding achievement in Effective Reporting and Measurement in Outpatient Quality Reporting Acute Care Hospitals, as well as Hospital Value-based Purchasing Acute Care Hospitals.

MidMichigan Medical Center - Clare

A 49 licensed-bed hospital, MidMichigan Medical Center - Clare, provides 24-hour emergency room coverage, inpatient care, outpatient care and urgent care services. Specialized inpatient units include cardiac-monitored care, pediatrics, medical/surgical care, and a sleep diagnostics center. MidMichigan Urgent Care - Clare provides walk-in and occupational medicine care to area residents. The Medical Center's active medical staff consists of 18 physicians representing six medical specialties; 94 percent of the physicians are board certified in their medical specialty. The Medical Center is accredited by The Joint Commission and most recently received Michigan's Quality Improvement Organization (MPRO) 2019 Governor's Award of Excellence for outstanding achievement in Effective Reporting and Measurement in Outpatient Quality Reporting Acute Care Hospitals.

MidMichigan Medical Center - Gladwin

MidMichigan Medical Center - Gladwin is a 25 licensed-bed critical access hospital providing general medical and surgical care for inpatients and outpatient services along with a 24-hour emergency room. Our urgent care services are provided at MidMichigan Health Park

Gladwin conveniently located on M-61 for the community. The Medical Center campus features a waterfall in a garden-like setting reflective of MidMichigan Health's emphasis on humanistic care. The waterfall and courtyard are enjoyed by Medical Center employees, patients and visitors. The quality of care at MidMichigan Medical Center - Gladwin is independently verified through accreditation from The Joint Commission. The Medical Center most recently was named one of the Top 100 Critical Access Hospitals in the United States by The Chartis Center for Rural Health in 2019 and most recently received the Michigan's Quality Improvement Organization (MPRO) 2019 Governor's Award of Excellence for outstanding achievement in Effective Reporting and Measurement in Critical Access Hospitals.

MidMichigan Medical Center - Gratiot

MidMichigan Medical Center - Gratiot, a 96 licensed-bed hospital located in Alma, has provided care for Gratiot County and surrounding areas since 1955. More than 130 physicians and mid-level practitioners serve on the active medical staff in 21 different medical specialties. MidMichigan Medical Center - Gratiot also provides an urgent-care clinic and 24-hour emergency department. MidMichigan Medical Center - Gratiot also provides a full range of services in specialty areas including bariatric surgery, cancer, cardiovascular services, orthopedics, maternity, mental health, pain management, rehabilitation services, sleep disorders and wound treatment. There are more than 621 employees and 250 volunteers. The Medical Center is accredited by The Joint Commission most recently received Michigan's Quality Improvement Organization (MPRO) 2019 Governor's Award of Excellence for outstanding achievement in Effective Reporting and Measurement in Outpatient Quality Reporting Acute Care Hospitals. The Medical Center received a B in patient safety from The Leapfrog Group for the spring 2018 Hospital Safety Score.

MidMichigan Medical Center - Midland

A 324 licensed-bed hospital located on 180 acres of wooded campus, MidMichigan Medical Center - Midland is the flagship of the MidMichigan Health system. From its beginning in 1944, the Medical Center in Midland, Michigan has established itself as a leader in quality state-of-the-art health care. In fact, in August 2018, MidMichigan Medical Center - Midland was named one of the top Best Hospitals in Michigan by U.S. News & World Report - the only hospital in the Great Lakes Bay Region to make the list. Accredited by The Joint

Commission, the Medical Center recently received Michigan's Quality Improvement Organization (MPRO) 2019 Governor's Award of Excellence for outstanding achievement in Effective Reporting and Measurement in Outpatient Quality Reporting Acute Care Hospitals. In addition, the Medical Center was recognized as one of the nation's 2016 100 Top Hospitals® by Truven Health Analytics™, was also one of a select few to earn the 2016 100 Top Hospital's Everest® Award and was recognized as one of the nation's 50 Top Cardiovascular Hospitals by Truven in 2017.

In 2011, the Medical Center's expansion and renovation introduced a new environment of care that enhances our region with bigger and better facilities for surgery, patient care and medical services. The active medical staff consists of 166 physicians, 99 percent of whom are board certified. They represent 32 medical specialties providing a full range of primary care as well as outstanding specialty care.

MidMichigan Medical Center - Mt. Pleasant

MidMichigan Medical Center - Mt. Pleasant is a 128,000 square-foot facility conveniently located on M-20 near I-127. The medical center features a 24/7 Emergency Department, outpatient surgery center and a full range of outpatient services including physician offices, lab, imaging and cardiovascular testing. It is fully-equipped and credentialed to provide care for all common emergency conditions, including heart attack, stroke and minor trauma. The department's trauma fast-scan ultrasound equipment can be used at the patient's bedside, with X-ray and CT scanning just a few feet away. An on-site 24/7laboratory will enable fast turnaround of test results. A telemedicine program enables patients to receive expert consultations from neurologists and other specialists at Michigan Medicine for faster decision-making during stroke treatment planning.

MidMichigan Medical Center - West Branch

MidMichigan Medical Center - West Branch is an 88 licensed-bed acute care facility located on 44 acres of rolling countryside in Northeast Michigan. It has three operating suites, a 24-hour emergency department and a state-of-the-art imaging department. The Medical Center serves a broad region, with 30 zip codes in Ogemaw, Oscoda, Roscommon, Arenac and Iosco counties. MidMichigan Medical Center - West Branch has approximately 350 employees, 58 volunteers, 25 active staff physicians, as well as 12 associate staff physicians, 53 consulting staff physicians, 23 allied health professionals and 17 telemedicine physicians.

The convenient location just off I-75 and commitment to quality healthcare are just a couple of the reasons why so many people choose MidMichigan Medical Center - West Branch for their healthcare needs. The Medical Center offers state-of-the-art diagnostic imaging, surgical specialties, rehabilitation programs, educational courses specific to conditions and a revolutionary Wound Care Center. The campus features walking trails, teaching gardens, bird watching station and much more. The walking trails and gardens are enjoyed by Medical Center employees, patients and visitors.

Community Served

The community served will focus on MidMichigan Medical Center - Gladwin located in Gladwin, MI. The service area in Gladwin County is comprised of zip codes: 48612 (Beaverton) and 48624 (Gladwin).

Community Health Needs Assessment

The 2019 Community Health Needs Assessment for MidMichigan Medical Center - Gladwin is a comprehensive health status overview that will serve as the foundation of how to address health concerns within the communities served by MidMichigan Medical Center - Gladwin serves.

The IRS legislation mandating collaborative efforts provided an opportunity to broaden our scope to include further input from local social and human service organizations, community members and our collaborative partners.

Phase I: Pre-Planning

The majority of this effort included identification of hospital and community stakeholders in order to ensure alignment of health improvement. Each member of the Community Health Team of MidMichigan Health participates in formal community collaborative groups where the focus is health improvement. The membership is identified by respective communities and includes non-profit, human service and government agency representatives (a listing of these groups appears in Appendix A). Having mutual goals and strategies helps strengthen the health improvement initiatives and the community as a whole knowing shared priorities exist.

Data Collection & Interpretation

Providing an accurate picture of each of our service communities dominated this phase. In order to do this, we investigated a variety of primary and secondary data sources. A grid of over 150 indicators from 20 different primary and secondary sources were utilized to build the data platform for each subsidiary (Appendix B). Data out of normal range against a benchmark is indicated in red on the table. Data was compared to current standards, our own perceptions and those of our collaborative partners and community members. In order to determine

1. Determinants of Health
2. Care Access
3. Health Behaviors
4. Health Conditions

Areas where health issues existed were revealed in two ways. First, when comparison of local quantitative data indicators against state of Michigan benchmarks resulted in poor performance and when themes of unacceptable health emerged from analysis of data.

Primary Data:

A 2019 Community Health Needs Assessment Survey was conducted to understand the health and health needs of people living in Gladwin County. The 2016 Gladwin Health Survey served as the basis for the 2019 survey.

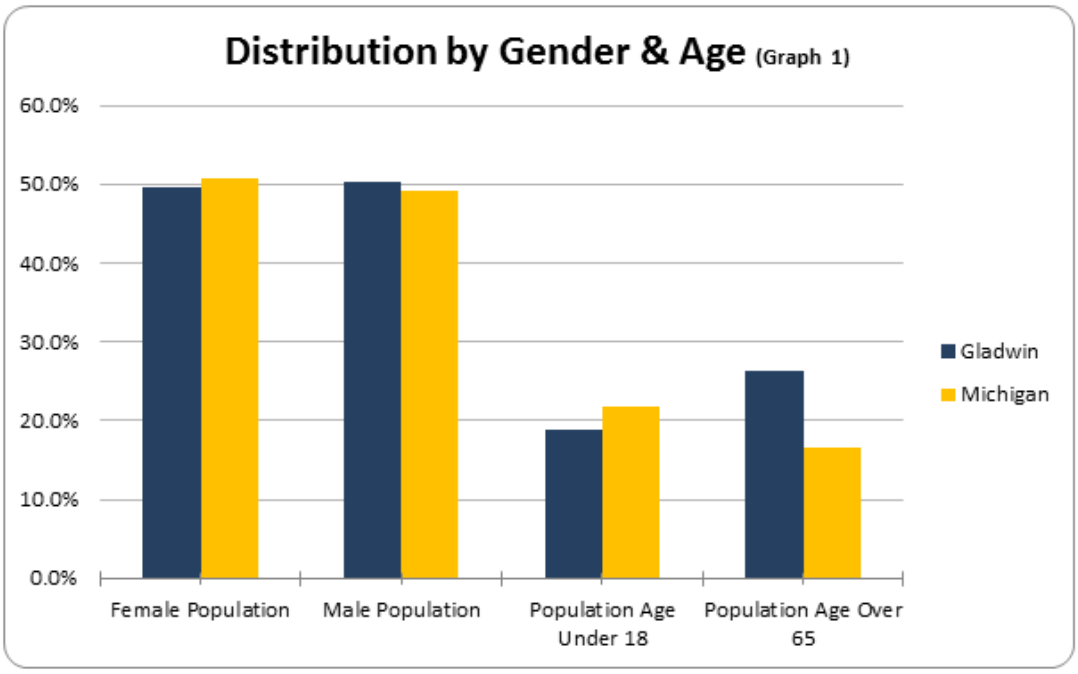
The Community Questionnaires (Appendix C) were given to community members and stakeholders throughout Gladwin County. The questionnaire consisted of 30 questions that gauged participant's perception of health in their community and 153 questionnaires were completed. Before the questionnaire was used for data collection, it was approved by MidMichigan Health's Institutional Review Board. Excerpts of the questionnarie in the following pages.

Data collection occurred via online and paper surveys. Qualtrics was used to administer the online survey and the link was advertised in the local newspaper. The face-to-face survey was administered through the Gladwin County Human Service Coordinating Body. Participants completed the survey on site to maximize access for researchers to reach the target population. The sample generated a total of 153 surveys to be used for analyses.

MidMichigan Medical Center - Gladwin and MidMichigan Medical Center - Clare are part of the Mi*thrive initiative,* a 2019 Community Health Needs assessment of the 31 Northern Counties of the Lower Peninsula. This goal is to collaborate regionally to maximize resources, achieve replicable assessment design and produce high-quality county-level data that is comparable across the region in an effort to understand local and regional patterns and impact long-term population health. There are 154 partners collaborating on this regional CHNA.

Demographics

According to County Health Rankings, there are 25,234 residents in Gladwin County. Of those, 18.8 percent are under 18 years of age and 26.3 percent are 65 and older. Females make up 49.6 percent of the population while males make up 50.4 percent of the population. The median age in Gladwin County is 49.2 years of age. Of the population, 95.9 percent is white, 1.7 percent is Hispanic, 0.5 percent is black or African American and 0.6 percent is American Indian or Alaskan Native. In Gladwin County, the percentage of people who self reported their health to be fair or poor was 17 percent.



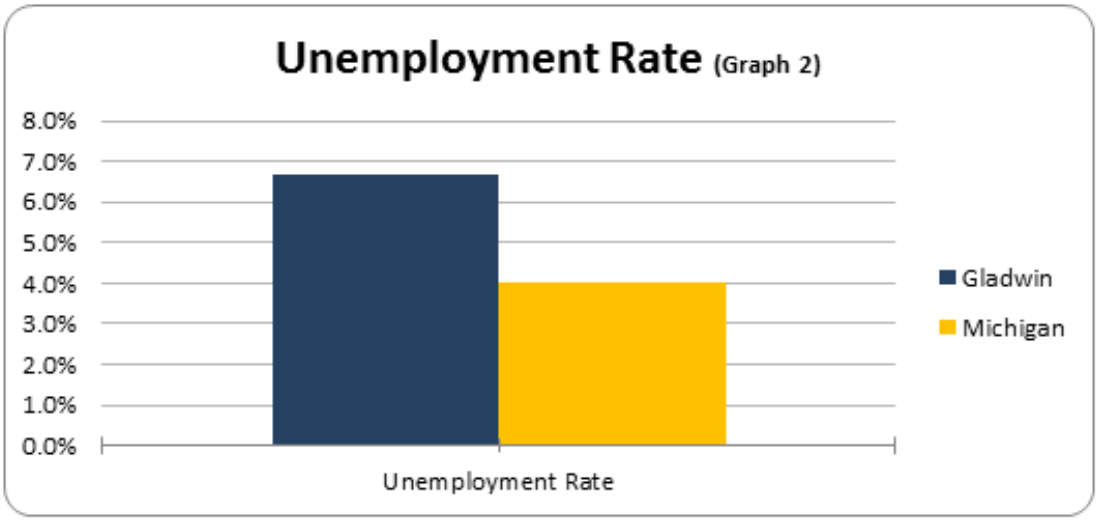
Determinants of Health

Determinants of health are conditions in the environment in which people are born, work, live or play that can affect a wide range of health and quality of life outcomes.

Economic Stability

ALICE is an acronym for Asset Limited, Income Constrained, Employed. Households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county (the ALICE Threshold). Combined, the number of ALICE and poverty-level households equals the total population struggling to afford basic needs. The number of households below the ALICE Threshold changes over time; households move in and out of poverty and ALICE status as circumstances improve or worsen. The tables below show the ALICE distribution by town in Gladwin County According to Bureau of Labor and Statistics. The unemployment rate for Gladwin County is 6.7 percent, which is slightly lower than 2016, which was 9.2 percent (Graph 2). The median income is $40,871, which is $11,129 lower than Michigan at $52,000. Gladwin County per capita income is $23,491. Additionally, 19.9 percent of Gladwin County falls in the low income category and are Supplemental Nutrition Assistance Program (SNAP) participants. There are 26.1 percent of renters spending 35 percent or more of their household income on rent and 52 percent of students are eligible for

free lunch. In Gladwin County, 14.4 percent of families are living below poverty level. The food insecurity rate is 21.6 percent and Michigan is 14 percent.



Gladwin County, 2017

Town	Total HH	% ALICE & Poverty
Beaverton City	558	63%
Beaverton Township	761	46%
Bentley Township	354	29%
Billings Township	1,086	50%
Bourret Township	214	54%
Buckeye Township	531	45%
Butman Township	881	39%
Clement Township	452	45%
Gladwin City	1,267	58%
Gladwin Township	410	55%
Grout Township	650	46%
Hay Township	602	51%
Sage Township	969	41%
Secord Township	651	37%
Sherman Township	456	55%
Tobacco Township	1,098	35%

Community Input: What is your average household income?
66 responded

10.69% responded $0-$24,999; **22.14%** responded $25,000 - $49,000; **29.01%** responded $50,000-$74,999; **21.37%** responded $75,000-$100,000 and **16.79%** responded $100,000 and up.

Education

The high school graduation rate in Gladwin County is 85.8 percent which is lower than Michigan at 90.2 percent. Approximately 13.6 percent of the population in Gladwin ages 25 and above have a Bachelor's degree or higher. In Gladwin County, third graders are not proficient in English and 63.2 percent of three and four year olds are not in preschool.

Community Input: What is the highest grade or year of school you have completed?
134 responded

2.24% Some High School–No Diploma; **9.7%** High School/Diploma/GED; **21.4%** Some College; **22.39%** Associate's Degree; **27.61%** Bachelor's Degree and **16.42%** Master's Degree or higher.

Health and Health Care

Located in Gladwin, MidMichigan Medical Center - Gladwin is a 25 licensed-bed hospital that provides 24-hour emergency room coverage, critical care access, general medical and surgical care for inpatients and outpatients and urgent care services. Inpatient units include cardiac-monitored care and medical/surgical care. Outpatient services include lab and diagnostic testing, ambulatory same day surgeries and a sleep diagnostics center.

The Medical Center also features a hospitalist program to ensure the quality and continuity of inpatient care. Hospitalists are physicians who specialize in caring for patients while they are hospitalized, working closely with the patient's primary care physician.

Medical Offices, Support Services and Outpatient Centers are located at the MidMichigan Health Park - Gladwin with specialty Clinics next to the hospital.

Access to Care

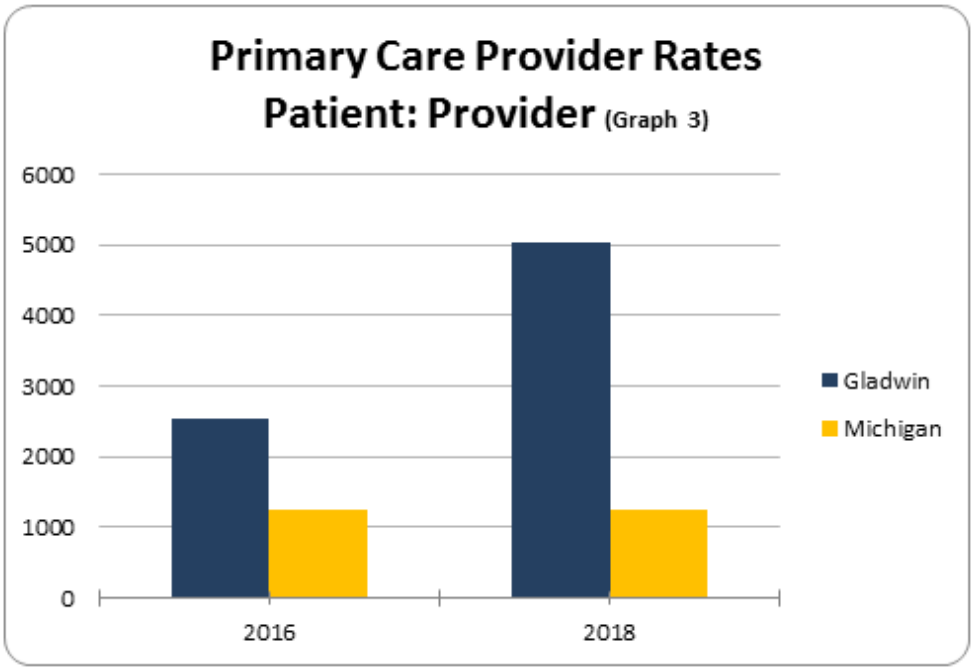
If a community lacks access to care or health services, barriers to good health are created. A description of the current state of health care access follows, along with factors that affect care access.

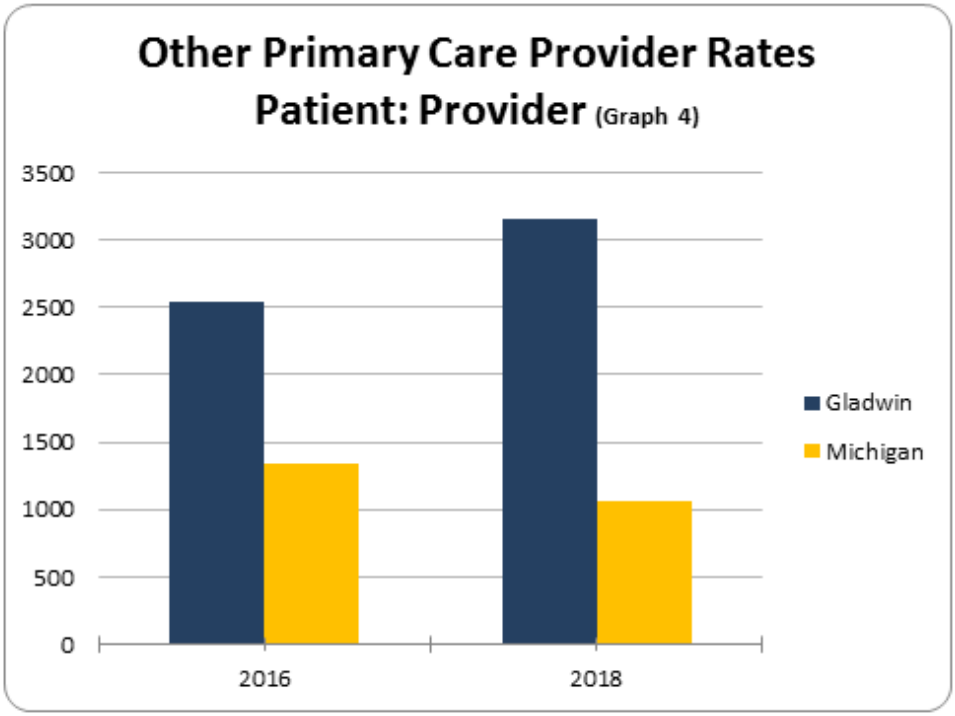
Community Input: When I visit my doctor, I understand:

What the doctor tells me:			The hand-outs the doctor gives me:		
Agree	127	96.21%	Agree	128	92.75%
Neutral/Not Sure	3	2.27%	Neutral/Not Sure	9	6.52%
Disagree	0	0%	Disagree	0	0%
Strongly Agree	2	1.52%	Strongly Agree	1	.72%
Total	132		Total	138	

Access to Health Services

Graph three below shows the primary care provider rate in Gladwin County of 5,020:1 compared to the Michigan rate of 1,260:1. Additionally, the mental health provider rate is 1,050:1 compared to the Michigan rate of 400:1. Other Primary Care Providers, shown in graph four, is 3,154:1 compared to Michigan at 1,064:1. Having a large patient to provider ratio can cause barriers to health due to providers not accepting new patients and creating long waiting periods of time to be seen. Health insurance is another key component to health. Without it, many will not receive the services they needed to maintain a healthy lifestyle and prevent disease. The uninsured rate for adults is 10 percent in Gladwin and the Michigan average is eight percent. The rate of uninsured children in Gladwin County is five percent versus Michigan at three percent.


Primary Care Provider Rates
Patient: Provider (Graph 3)
6000
5000
4000
3000
2000
1000
0
2016
2018
Gladwin
Michigan


Other Primary Care Provider Rates
Patient: Provider (Graph 4)
3500
3000
2500
2000
1500
1000
500
0
2016
2018
Gladwin
Michigan

Community Input: Technology has made it easier to use computers, mobile phones, laptops, and tablets to safely talk face-to-face with your doctor without a visit to the office. I would be OK talking face-to-face using the internet?
137 responded

19.711% strongly agreed; 36.50% agreed; 25.55% were Neutral/Not Sure; 11.68% Disagree; and 6.57% strongly Disagree.

Transportation

Gladwin County has a public transportation service called Gladwin-County Transit. They provide services including Dial-A-Ride, job access and reverse commute (JARC), non-medical transportation (NEMT), reservation, wheel chair lifts and transfers to nearby counties. Counties served include Clare and Midland and they will meet Midland Transit for non-emergent needs. Transportation is also provided for school children to and from school and local school events. Hours of service are 5:00 a.m. to 8:00 p.m., Monday through Friday and Saturday from 7:00 a.m. to 5:00 p.m. Fee for service is three dollars. Community members can make reservations 24 hours in advance and for long term needs, such as Dialysis. MidMichigan Medical Center - Gladwin and the Gladwin County Transit collaborate through contract to provide non-emergent rides for "after hours" when the transit is closed and services patients with no way of getting home from the hospital. In Gladwin County, 7.6 percent of households are without a vehicle, compared to Michigan at 7.9 percent.

Through the Gladwin County Community Health Needs survey, community members were asked if they thought the community is strong in providing: good housing options, good education, transportation services, child care options and jobs with fair wages. Graph five below outlines responses to these questions.

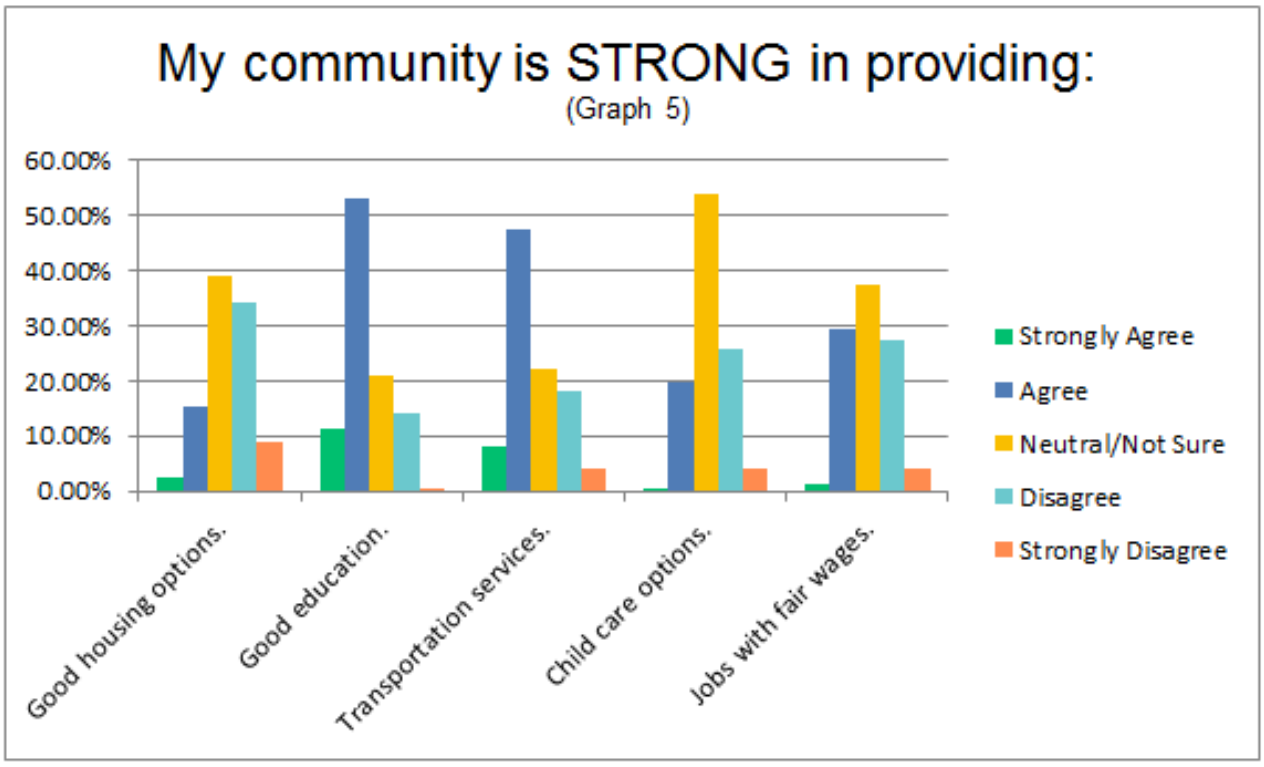
Health Behaviors

According to Healthy People 2020, individual behavior plays a role in health outcomes. For example, if an individual quits smoking, his or her risk of developing heart disease is greatly reduced. Gladwin County ranked 72 out of 82 counties for health outcomes in Michigan and 65 out of 82 for health factors. The data to follow is a reflection on health behaviors of

Gladwin County residents in the areas of health care screenings, substance use, nutrition and exercise.

Preventative Care

Of the Medicare population in Gladwin County, 86 percent aged 65-75 had their blood sugar monitored in the past year using an HbA1c test. Of the same Medicare population, 42 percent had a mammogram screening in the past two years.



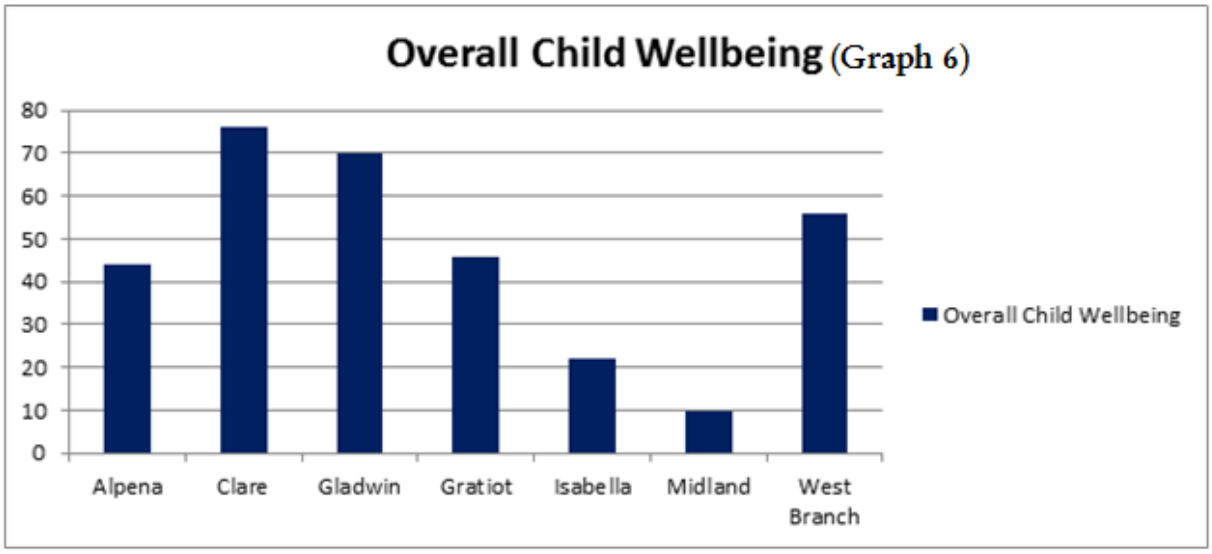
In Gladwin County, 71.8 percent of women have had a Pap smear test. Currently, the female vaccination rate for the Human papillomavirus (HPV) is 38.2 percent compared to Michigan at 43.2 percent. Males are at 32.4 percent compared to Michigan at 39.3 percent.

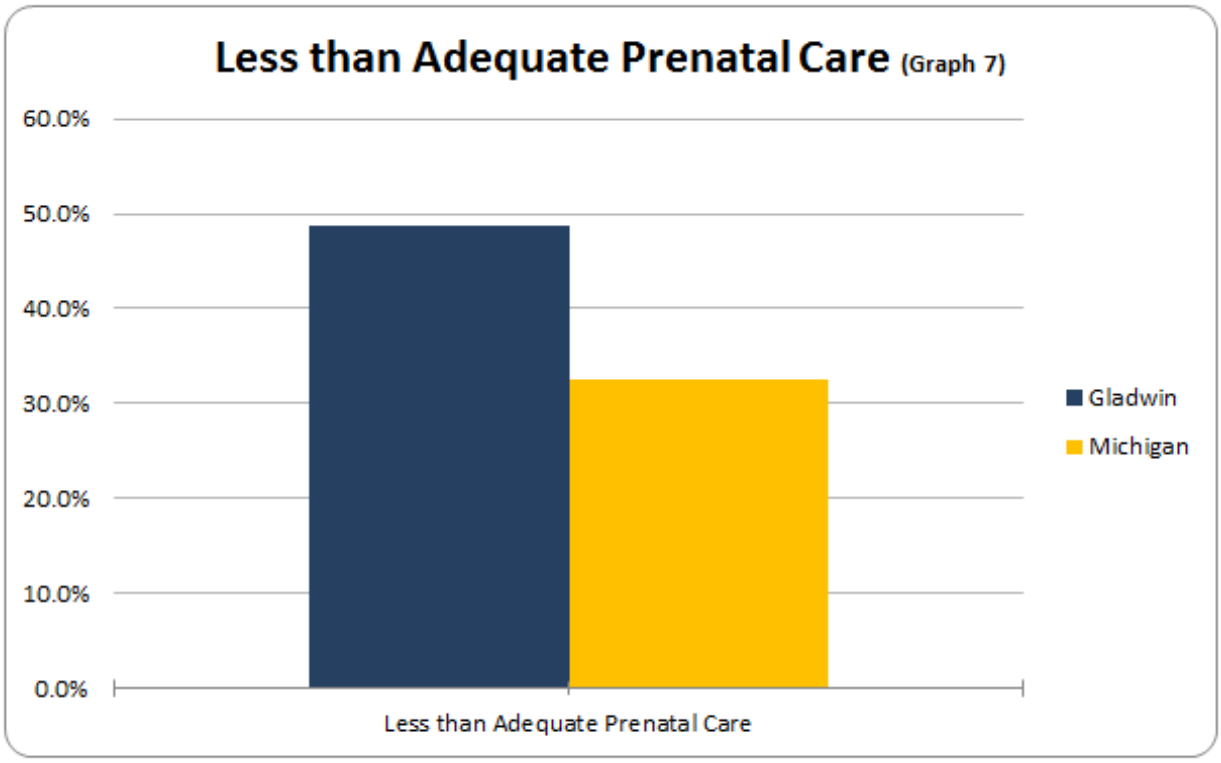
Community Input: How would you rate your overall health?

Out of 149, 97 responded: **8.72%** Excellent, **59.73%** Very Good, **28.19%** Fair, **3.36%** Poor.

Maternal Infant Health

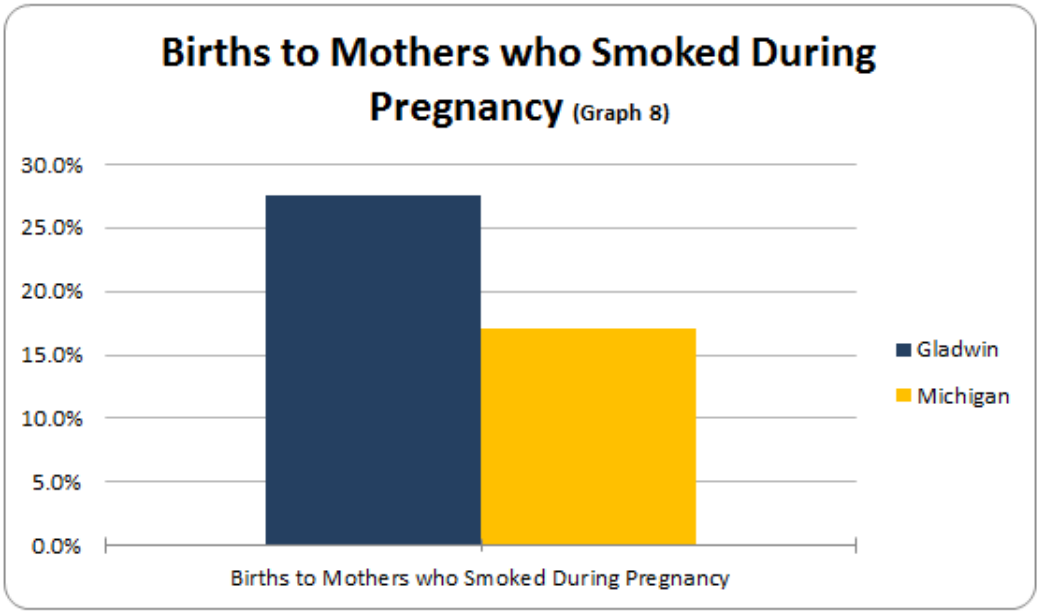
The annual Kids Count report from the Annie E. Casey Foundation measures 16 indicators of childhood well-being, from the rate of low birthweights and teen pregnacy to third-grade reading abilities and the prevalence of single-parent families. Five out of seven MidMichigan Health medical centers ranked in the bottom half of this measure, demonstrated in graph five. Gladwin ranked 70 out of 83 counties with 48.7 percent pregnant of women in the less than adequate prenatal care category, determined by whether or not prenatal care is received in the first trimester and the total number of prenatal visists, as seen in graph six. Babies with low birth weight in Gladwin County is reported at 7.8 percent, which is lower than Michigan at 8.8 percent.





Substance Use

High School teens who report ever drinking alcohol in Gladwin County is 51.3 percent, according to the Michigan Profile for Healthy Youth (MiPHY, 2012). Those that report using marijuana is 24.4 percent. Students who ever tried cigarette smoking have decreased while vaping and marijuana are on the rise. Adults reporting cigarette smoking is higher than Michigan at 23.6 percent. Births to mothers who report smoking during pregnancy is 27.6 percent compared to Michigan at 17.1 percent, shown in graph eight.



Nutrition and Exercise

In Gladwin County, just over 0.16 percent of people 65 years and older have low access to a grocery store. Additionally, 61 percent have access to exercise opportunities, which is significantly lower than Michigan at 84 percent. The food insecurity rate or the rate of availability, variety or quality of food for children is at 21.6 percent and 14.2 percent in Michigan.

Community Input: I believe the following COMMUNITY HEALTH issues exist in my community (select the top 3)?

63 responded to Jobs with Livable Wages/Poverty

48 responded to Access to Affordable Healthy Foods

47 responded to Affordable Housing

Health Conditions

Many public health and health care interventions focus on changing individual behaviors such as substance abuse, diet and physical activity. Positive changes in individual behavior can reduce the rates of chronic disease in this country.

Community Input: What PHYSICAL HEALTH issues do you think are the biggest concern in your community (select the top 3)?

Obesity/Overweight: **56.83%**

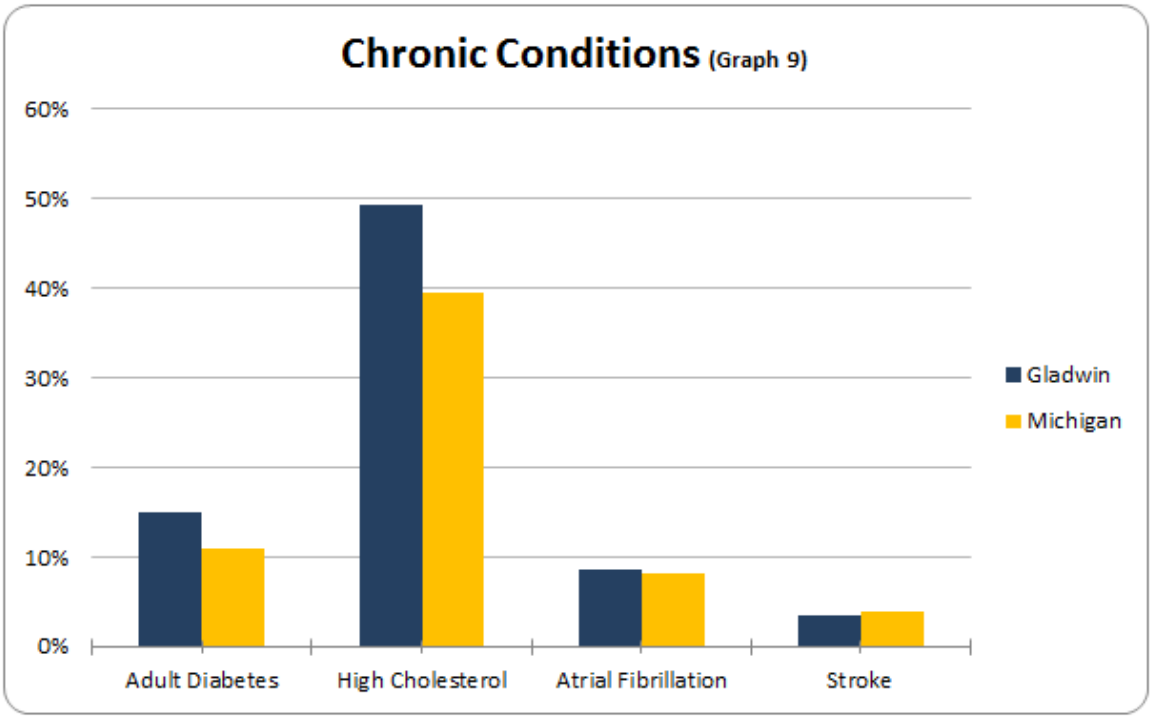
Mental Health: **54.68%**

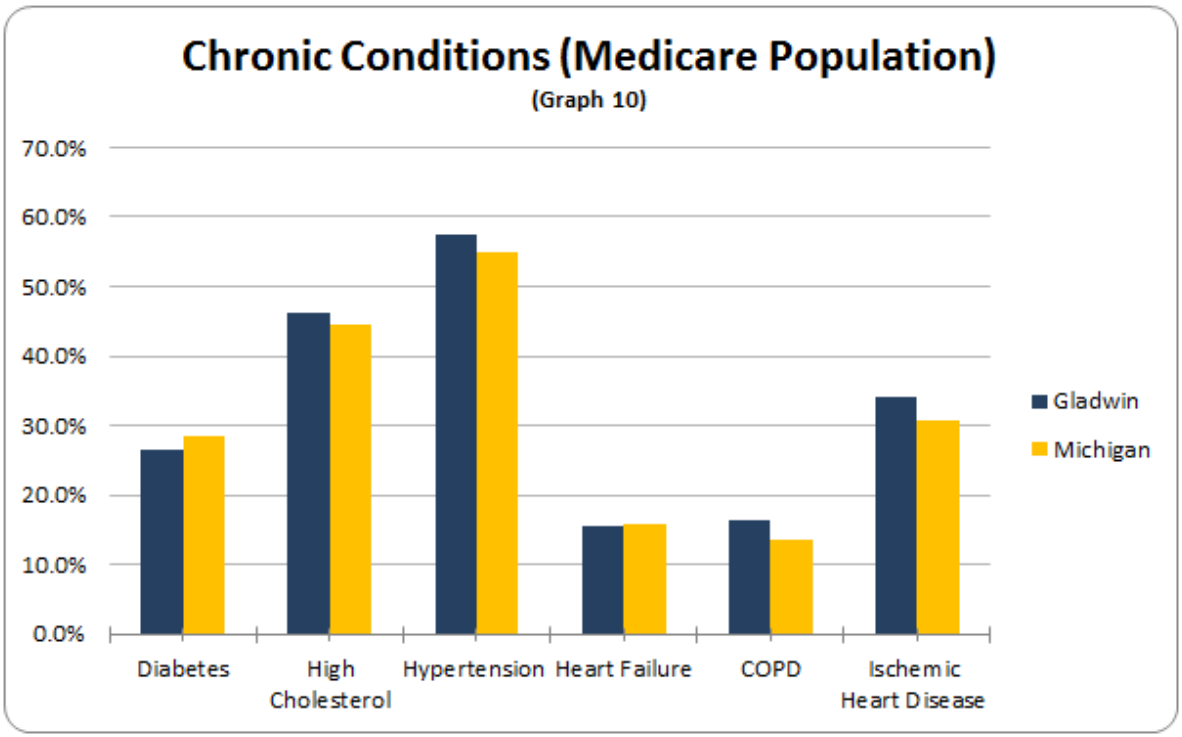
Substance Abuse: **53.96%**

Chronic Conditions

Gladwin County's obesity rate is 37 percent, which is higher than the state average of 32 percent. Obesity is a contributing factor to chronic diseases, as demonstrated in higher adult rates of high cholesterol at 49.4 percent while the Michigan rate is 39.4 percent. Heart disease is also on the rise with a rate of 209.4 compared to Michigan at 197.9.

While examining the Medicare population, 28.1 percent have diabetes in Gladwin County. Heart failure is at 15.6 percent. Gladwin County has a higher rate of COPD than Michigan at 14.3 percent and 18 percent respectively.


Chronic Conditions (Graph 9)
60%
50%
40%
30%
20%
10%
0%
Adult Diabetes
High Cholesterol
Atrial Fibrillation
Stroke
Gladwin
Michigan

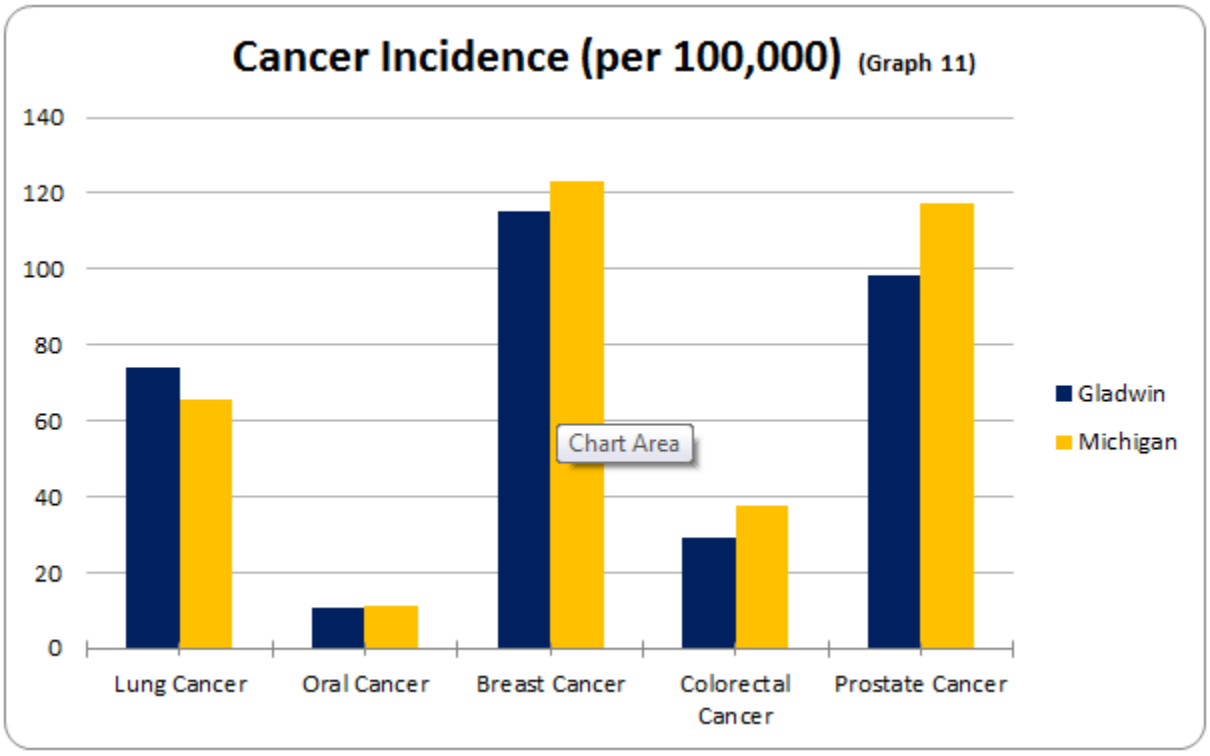

Chronic Conditions (Medicare Population)
(Graph 10)
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
Diabetes
High Cholesterol
Hypertension
Heart Failure
COPD
Ischemic Heart Disease
Gladwin
Michigan

Mental Health

In Gladwin County, 14 percent reported frequent mental distress days, which is the same as Michigan. . According to MidMichigan Health Emergency Response, there were a total of 3,174 contacts made in Gladwin County. Psychiatric/abnormal behavior was in the top ten emergency calls received. The additional top ten calls included: sick person, falls and breathing problems, traffic accidents, unknown problem, chest pain, unconscious/fainting, stroke/TIA and convulsions/seizures

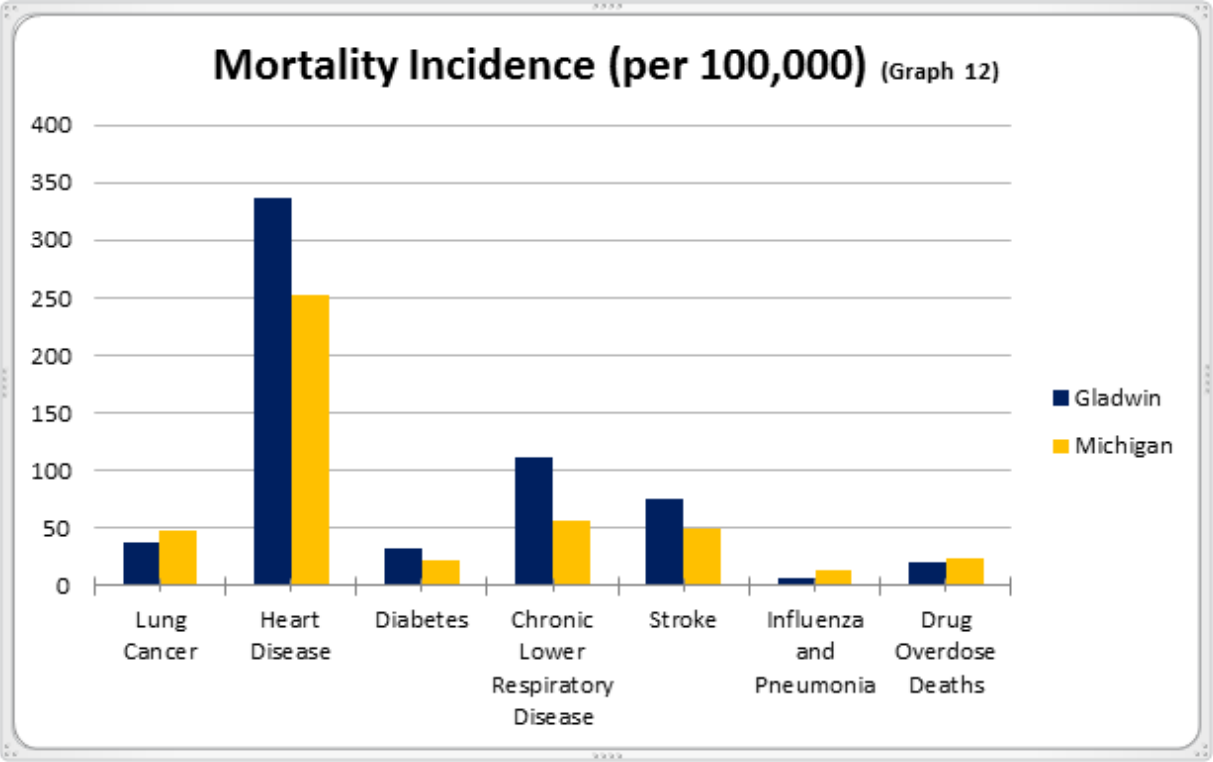
Cancer Incidence

Approximately 459 people per 100,000 population of Gladwin County and 7.7 percent of the Medicare population have been diagnosed with some form of cancer. The next graph shows the cancer incidence rate per county.



Mortality Rate

The next graph shows the mortality rates for cancers: Breast, Colorectal, Lung and Prostate. It also includes Heart Disease, Diabetes, Chronic Lower Respiratory Disease, Stroke, Influenza, Pneumonia and Drug Overdose Deaths.



Prioritization Process

Community health care needs were determined and prioritized by reviewing quantitative and qualitative data, and ranking health issues according to focus areas (Reference Diagram A1).

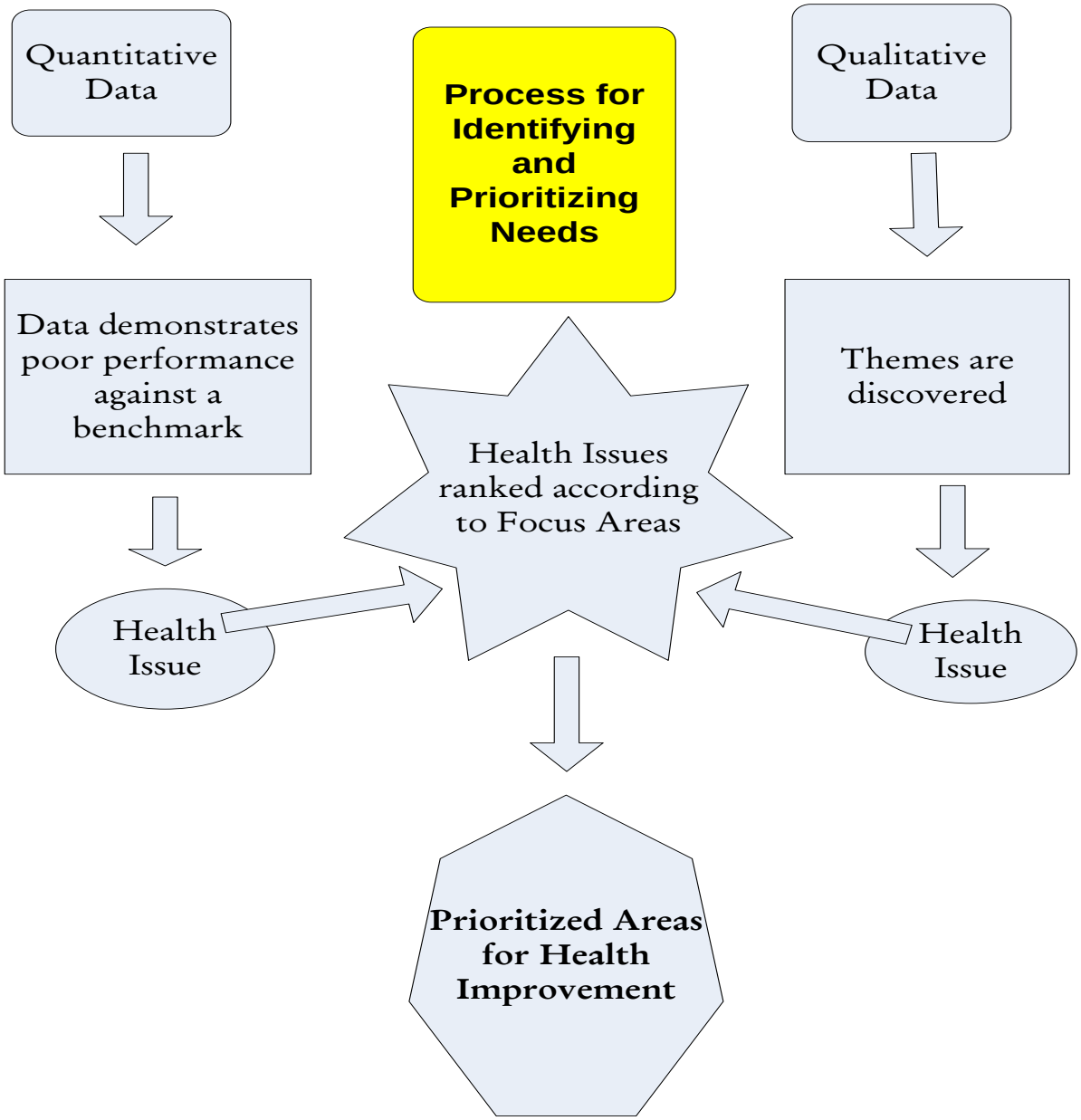


Diagram A1

Prioritization occurred in stages; input was solicited from the Community Health Team, MidMichigan Medical Center - Gladwin Leadership team, Community Health Staff and respective community groups.

In order to respond and impact the health care needs that were identified, a strategic plan will be developed containing goals and outcome measures upon which we will evaluate programs toward goal completion. This part of the plan will be outlined in the summer of 2019 in Part II of this report.

All of the indicators that were explored were categorized into the following four corresponding areas.

1. Determinants of Health (demographics, social environment, education, economy).
2. Care Access (access to health services, transportation).
3. Health Behaviors (preventative care, substance use, nutrition, exercise).
4. Health Conditions (chronic conditions, mental health, cancer incident, mortality rate).

Once categorized, further prioritization began. Indicators were selected based on their placement in the "acceptable" range when compared to hospital, local, state or national data. Out of the 100 indicators analyzed, Gladwin County had approximately 66 out of "acceptable" range. These indicators were presented to the Gladwin County Human Service Coordinating Body where they were asked to identify what they believed were the top five most pressing areas of concern. They could choose a single indicator or group similar indicators together. For example, indicators: adults who are obese, adults who are sedentary, diabetes in adults, high cholesterol, hypertension and pediatric obesity could be grouped together as *obesity*. The top five focus areas chosen by the group are below:

1. Behavioral Health
2. Access to Care
3. Obesity
4. Maternal/Infant Health
5. Substance Abuse

A recommendation will be presented to the Board of Directors, who will have the ultimate decision on the 2019 Community Health Needs Assessment focus areas.
Identifying Priority Areas

Identifying Priority Areas: The Final Step

Assessment

The written report will be provided in two parts: Part I: Data Collection, Evaluation, and Focus Area Prioritization and Part II: The Improvement Plan. The Community Health Team worked together throughout the process to develop the final product that provides an overview of the health system, corresponding data, data interpretation, focus area prioritization and implementation strategies that are subsidiary specific. The 2019 Community Health Needs Assessment established the foundation for developing the 2020-2021 Improvement Plan. Each subsidiary board will review the data and prioritize recommendations in June 2019. Once this approval has occurred, we will outline evidence based strategies for health improvement in the prioritized areas.

Improvement Plan

The Improvement Plan will begin upon approval of focus areas from each respective subsidiary board. Progress will be recorded and presented back to each respective board. The Improvement Plan will be contained in Part 2 of the CHNA report. We will participate closely with our community partners to implement comprehensive strategies in our shared priority areas.

Evaluation

Measurement against benchmarks will continue and a yearly report of outcome measures will be provided. Our plans will be modified as needed based upon public input and outcome measures. Reassessment will be ongoing as we work with our community to develop a regional data dashboard.

Reflection

Various barriers emerged, which hindered either the data collection or prioritization processes for this report. For instance, data is not always collected on a yearly basis, resulting in data that is several years old. Also, some data is only available at a state level, making it difficult to discern need at a more local level. Data around age, ethnicity, gender and race is not available for all data indicators, which limits the ability to examine health disparities. There were also two areas where available data did not match our intuition: mental health and transportation needs. Utilizing these discoveries as a learning experience, we plan to

work harder to obtain more local data for future assessments. Strategies will build upon the assets and resources of our health system and each community.

Conclusion

The 2019 Community Health Needs Assessment has established the foundation developing the 2020-2021 Improvement Plan. Our next step will be to outline evidenced based strategies for health improvement in the prioritized areas. These strategies will build upon the assets and resources of our health system and each community.

The top priority areas for MidMichigan Health chosen by the Community Health Team and reviewed by the MidMichigan Health Population Health Collaboration Team and MidMichigan Medical Center - Clare and Gladwin Board on June 25, 2019 follow:

1. Chronic Diseases
2. Maternal/Infant/Child Health
3. Mental Health

Addendum: This Report will be made publically available on www.midmichigan.org, along with The Improvement Plan. This plan will also be filed with the Internal Revenue Service using Form 990 Schedule H.

Part II: Community Health Improvement Plan

MidMichigan Medical Center - Gladwin built upon the Improvement Plan developed in 2013 to develop a comprehensive cross-county plan to address health concerns while upholding MidMichigan Health's Mission, Vision and Core Values. The underlying premise for each MidMichigan Health subsidiary in completing the Community Health Improvement Plan was shared ownership for community health. While our previous CHNA helped us identify focus areas for health improvement, the IRS legislation mandating collaborative efforts provided an opportunity to revisit our needs assessment and strategic planning processes.

The plan that follows includes goals and evidence based strategies for the focus areas determined by MidMichigan Health's Community Health team, solicited input from the Gladwin County Human Service Coordinating Body and approved by MidMichigan Health's Operation Team and the MidMichigan Medical Center - Clare/Gladwin Board of Directors.

2019 Community Health Needs Assessment focus areas presented to the MidMichigan Medical Center - Clare and MidMichigan Medical Center - Gladwin Boards:

1. **Chronic Diseases**
2. **Maternal/Infant Health**
3. **Mental Health**

Appendix A

Community Health Assessment and Improvement Team (CHAI) Member Agencies

1016 Recovery Network
211
Central Michigan District Health Department
Central Michigan Regional Rural Health Network
Clare/Gladwin Big Brothers/Big Sisters
Clare/Gladwin Continuum of Care
Clare/Gladwin Early On
Clare/Gladwin Great Start Collaborative
Clare/Gladwin RESD
Clare/Gladwin Substance Abuse Coalition
Community Mental Health of Central Michigan
Department of Health and Human Services
Mid Michigan Community Action Agency
Mid Michigan Community College
Michigan Community Dental Clinic
MidMichigan Medical Center - Clare
MidMichigan Medical Center - Gladwin
Michigan Oral Coalition
MSU College of Human Medicine Midland Regional Campus Rural Community Health Program Coordinator
MSU Extension
NEMSCA
Salvation Army
Shelterhouse
United Way

Appendix B

	Indicator	Clare	Gladwin	Michigan	Source	Date
Demographics	Population	30,653	25,234	**9,962,311**	County Health Rankings	2019
	Female Population	50.1%	49.6%	**50.8%**	County Health Rankings	2019
	Male Population	49.9%	50.4%	**49.2%**	County Health Rankings	2019
	Population Age Under 18	19.8%	18.8%	**21.8%**	County Health Rankings	2019
	Population Age Over 65	23.5%	26.3%	**16.7%**	County Health Rankings	2019
	Population White (Non-Hispanic)	94.8%	95.9%	**75.2%**	County Health Rankings	2019
	Population Black or African American	0.7%	0.5%	**13.8%**	County Health Rankings	2019
	Population Hispanic or Latino	2%	1.7%	**5.1%**	County Health Rankings	2019
	Population American Indian or Alaskan Native	0.9%	0.6%	**0.7%**	County Health Rankings	2019
	Poor or Fair Health	19%	17%	**17%**	County Health Rankings	2019
	Health Factors	79	65	*	County Health Rankings	2019
	Health Outcomes	81	72	*	County Health Rankings	2019
Environment	Drinking Water Violations	*	Yes	*	County Health Rankings	2019
	Recreation and Fitness Facility Access (per 1,000)	0.07	0.04	*	US Department of Agriculture	2014
	WIC- Authorized Food Store Access	8	6	**21.7**	US Department of Agriculture	2014
Social Environment	Violent Crime Rate (per 100,000)	350	220	**443**	County Health Rankings	2019
	Social Associations (per 10,000)	12.2	10	**9.9**	County Health Rankings	2019
	Children in Investigated Families, Ages 0-17	189.9	213.5	**113.8**	Kids Count	2017
	Confirmed Victims of Abuse or Neglect, Ages 0-17	26.2	43.8	**18.9**	Kids Count	2017
	Children in Out-of-Home Care, Ages 0-17	11.6	7.4	**5.1**	Kids Count	2017
Education	High School Graduation	84.7%	85.8%	**90.2%**	American Community Survey	2017
	People 25+ with Bachelor's Degree or Higher	12.1%	13.6%	**28.1%**	American Community Survey	2017
	High School Dropouts	5.83%	6.29%	**8.65%**	Center for Educational Performance Information	2017
	Students Not Proficient in Grade 3 English (M-Step)	26.7%	22%	**31%**	Michigan Department of Education	2018
	3 and 4 Year Olds Not in Preschool	61%	63.2%	**52.9%**	Kids Count	2017
	Students in Special Education	16.4%	16.5%	**14%**	Kids Count	2017
Economy	Median Household Income	$35,913	$40,871	**$52,668**	American Community Survey	2018
	Per Capita Income	$21,198	$23,491	**$28,938**	American Community Survey	2017
	Children Under 18 Living Below Poverty Level	37.9%	33.1%	**21.7**	American Community Survey	2017
	Families Living Below Poverty Level	16.9%	14.4%	**10.9%**	American Community Survey	2017
	People 65+ Living Below Poverty Level	10%	9.2%	**8.2%**	American Community Survey	2017
	Households with Cash Public Assistance	3%	4.1%	**2.8%**	American Community Survey	2017
	Unemployment Rate	7.1%	6.7%	**4%**	Bureau of Labor Statistics	2018

	Food Stamp/SNAP Benefits in the Past 12 Months	22.1%	19.9%	**14.9%**	American Community Survey	2017
	Renters Spending 35% or More of Household Income on Rent	28%	26.1%	**41.8%**	American Community Survey	2017
	Students Eligible for Free Lunch Program	55%	52%	**46%**	County Health Rankings	2019
	ALICE Total Households	4,200	3,077	**1,128,012**	United Way	2018
	% ALICE + % Poverty	55%	47%	**29%**	United Way	2018
	Severe Housing Problems	19%	16%	**16%**	County Health Rankings	2019
Access to Health Services	Primary Care Provider Rate	3,040:1	5,020:1	**1,260:1**	County Health Rankings	2019
	Other Primary Care Providers	1,460:1	3,154:1	**1,064:1**	County Health Rankings	2019
	Mental Health Provider Rates	1,090:1	1,050:1	**400:1**	County Health Rankings	2019
	Uninsured Adults	10%	10%	**8%**	County Health Rankings	2019
	Uninsured Children	6%	5%	**3%**	County Health Rankings	2019
	Preventable Hospital Stays	4,759	4,067	**5,188**	County Health Rankings	2019
	Medicaid Paid Births Single Year	61%	40.8%	**43.5%**	Michigan Department of Health and Human Services	2017
	No Health Care Access During Past 12 Months Due to Cost	19.6%	19.6%	**13.3%**	Behavioral Risk Factor Surveillance System	2016
	Fully Immunized Toddlers, Age 2	71%	82.9%	**74.1%**	Kids Count	2018
Transportation	Mean Travel Time to Work (Minutes)	28	30.4	**24.3**	American Community Survey	2017
	Households Without a Vehicle	9.2%	7.6%	**7.9%**	American Community Survey	2017
Top 10 Inpatient MS-DRGs	Septicemia or Severe Sepsis Without MV > 96 Hours	51	*	*	MidMichigan Health	2018
	Heart Failure & Shock with MCC	42	*	*	MidMichigan Health	2018
	Simple Pneumonia & Pleurisy with Mcc	34	*	*	MidMichigan Health	2018
	Major Joint Replacement or Reattachment Of	31	*	*	MidMichigan Health	2018
	Pulmonary Edema & Respiratory Failure	24	*	*	MidMichigan Health	2018
	Chronic Obstructive Pulmonary Disease with Mc	22	*	*	MidMichigan Health	2018
	Septicemia or Severe Sepsis without MV > 96 Hours	22	*	*	MidMichigan Health	2018
	Esophagitis, Gastroent & Misc Digest Disorder	21	*	*	MidMichigan Health	2018
	Simple Pneumonia & Pleurisy with Cc	19	*	*	MidMichigan Health	2018
	Renal Failure with Cc	19	*	*	MidMichigan Health	2018
	Other	355	*	*	MidMichigan Health	2018
Top 10 Inpatient MS-DRGs	Chronic Obstructive Pulmonary Disease with Mc	*	34	*	MidMichigan Health	2018
	Septicemia or Severe Sepsis without MV > 96 Hours	*	32	*	MidMichigan Health	2018
	Septicemia or Severe Sepsis without MV > 96 Hours	*	22	*	MidMichigan Health	2018

	Simple Pneumonia & Pleurisy with Mcc	*	19	*	MidMichigan Health	2018
	Heart Failure & Shock with MCC	*	19	*	MidMichigan Health	2018
	Cellulitis without Mcc	*	17	*	MidMichigan Health	2018
	Renal Failure with Cc	*	15	*	MidMichigan Health	2018
	Chronic Obstructive Pulmonary Disease with Cc	*	12	*	MidMichigan Health	2018
	Simple Pneumonia & Pleurisy with Cc	*	11	*	MidMichigan Health	2018
	Nonspecific Cerebrovascular Disorders with Cc	*	7	*	MidMichigan Health	2018
	Other	*	109	*	MidMichigan Health	2018
Top 11 MMR Nature of Call	Sick Person (Specific Diagnosis)	804	*	*	MMR	2018
	Falls	627	*	*	MMR	2018
	Breathing Problems	471	*	*	MMR	2018
	Chest Pain (Non-Traumatic)	329	*	*	MMR	2018
	Traffic/Transportation/Accidents	315	*	*	MMR	2018
	Unconscious/Fainting (Near)	267	*	*	MMR	2018
	Psychiatric/Abnormal Behavior/Suicide Attempt	256	*	*	MMR	2018
	Unknown Problem (Man Down)	170	*	*	MMR	2018
	Convulsions/Seizures	146	*	*	MMR	2018
	Stroke (CVA)	146	*	*	MMR	2018
	Hemorrhage/Lacerations	145	*	*	MMR	2018
	Total Calls to MMR	4,531	*	*	MMR	2018
Top MMR Nature of Call	Breathing Problems	*	1	*	MMR	2018
	Cardiac or Respiratory Arrest/Death	*	2	*	MMR	2018
	Falls	*	1	*	MMR	2018
	Traffic/Transportation/Accidents	*	1	*	MMR	2018
	Unknown Problem (Man Down)	*	1	*	MMR	2018
	Total Calls to MMR	*	6	*	MMR	2018
Top 10 Referrals for 211	Income Support/Assistance	20.1%	*	*	211	2018
	Utility Assistance	17.8%	*	*	211	2018
	Housing	11.8%	*	*	211	2018
	Transportation	7.4%	*	*	211	2018
	Food/Meals	5.1%	*	*	211	2018
	Individual, Family and Community Support	3.8%	*	*	211	2018
	Legal, Consumer and Public Safety Services	2.6%	*	*	211	2018
	Clothing/Personal/Household Needs	2.5%	*	*	211	2018
	Health Care	2.4%	*	*	211	2018
	Information Services	1.7%	*	*	211	2018
Top 10	Utility Assistance	*	24.4%	*	211	2018

Referrals for 211	Income Support/Assistance	*	17%	*	211	2018
	Housing	*	15.2%	*	211	2018
	Food/Meals	*	5.6%	*	211	2018
	Information Services	*	5.1%	*	211	2018
	Legal, Consumer and Public Safety Services	*	4.7%	*	211	2018
	Transportation	*	3.7%	*	211	2018
	Clothing/Personal/Household Needs	*	3.5%	*	211	2018
	Health Care	*	3.5%	*	211	2018
	Individual, Family and Community Support	*	3.3%	*	211	2018
Preventative Care	Diabetic Monitoring (Medicare Population)	84%	86%	**86%**	County Health Rankings	2018
	Mammogram Screening (Medicare Population)	43%	42%	**43%**	County Health Rankings	2019
	Pap Test in Past 3 Years, Age 18+	72.3%	71.8%	**72.7%**	National Cancer Institute	2016
	Sigmoidoscopy or Colonoscopy Screening	67.8%	67.8%	**71%**	Behavioral Risk Factor Surveillance System	2016
	Pneumonia Vaccination (PPSV23 65+)	34.3%	40.1%	**45.4%**	Michigan Department of Health and Human Services	2018
	HPV Vaccination - Females	39.3%	38.2%	**43.2%**	MDHHS: Immunization Report Card	2018
	HPV Vaccination - Males	32.4%	33.6%	**39.4%**	MDHHS: Immunization Report Card	2018
	Births with Late or No Prenatal Care	9.8%	17.1%	**5.4%**	Kids Count	2016
	Less than Adequate Prenatal Care	42.9%	48.7%	**32.5%**	Kids Count	2016
	Overall Child Wellbeing	76	70		Kids Count	
Behavioral Health	Adult Smoking	22%	19%	**20%**	County Health Rankings	2019
	People Living with HIV (per 100,000)	95	46	**175**	AIDSVu	2015
	Sexually Transmitted Infections (per 100,000)	166.9	174.9	**462.9**	County Health Rankings	2019
	Percentage of High School Students who Ever Drank Alcohol	44.3%	*51.3%	*	Michigan Profile for Healthy Youth	2017/*2012
	Percentage of High School Students who Ever Tried Cigarette Smoking	29.2%	*29.5%	*	Michigan Profile for Healthy Youth	2017/*2012
	Percentage of High School Students who Used an Electronic Vapor Product During the Past 30 Days	24.1%	*	*	Michigan Profile for Healthy Youth	2017
	Percentage of High School Students who Ever Tried Marijuana	29.3%	*24.4%	*	Michigan Profile for Healthy Youth	2017/*2012
	Tobacco Usage - Current Adult Smokers	23.6%	23.6%	**20.8%**	Behavioral Risk Factor Surveillance System	2016
	Binge Drinking Adults	19%	17%	**21%**	County Health Rankings	2019
	Frequent Mental Distress	14%	14%	**14%**	County Health Rankings	2019
	Births to Mothers who Smoked During Pregnancy	35.4%	27.6%	**17.1%**	Kids Count	2016
	Percentage of Students who Ever had Sexual	31%	High School:	*	Michigan Profile for Healthy Youth	2017/*2012

	Intercourse (County)		*41.2%			
			Middle School: *7.6%			
	Percentage of Students who were Physically Hurt on Purpose by Someone they were Dating or Going out with During the Past 12 Months	13%	*4.5%	*	Michigan Profile for Healthy Youth	2017/*2012
Teen Health	Number of Births per 1,000 Females, Age 15-19	39	25	**22**	County Health Rankings	2019
	Teen Pregnancy Rate (per 1,000)	55.6	32.5	**27.3**	Michigan Department of Community Health	2017
	Repeat Teen Births, Age 15-19	15.2%	10.7%	**17%**	Kids Count	2015
	Child and Teen Deaths, Age 1-19	*	*	**26.7**	Kids Count	2017
	Percent of Middle School Students who are Obese	20%	*17.5%	*	Michigan Profile for Healthy Youth	2018/*2012
	Percent of Middle School Students who are Overweight	18.2%	*15.3%	*	Michigan Profile for Healthy Youth	2018/*2012
	Percent of High School Students who are Obese	18.5%	*16.9%	*	Michigan Profile for Healthy Youth (Mi: CDC - Youth Risk Behavior Surveillance System)	2018/*2012
	Percent of High School Students who are Overweight	17.6%	*15.4%	*	Michigan Profile for Healthy Youth (Mi: CDC - Youth Risk Behavior Surveillance System)	2018/*2012
	Percentage of Middle School Students who Were Physically Active for at Least 60 Minutes Per Day on Five or More of the Past Seven Days	58.5%	*50.9%	*	Michigan Profile for Healthy Youth	2018/*2012
	Percentage of High School Students who Were Physically Active for at Least 60 Minutes Per Day on Five or More of the Past Seven Days	53.3%	*50.1%	*	Michigan Profile for Healthy Youth	2018/*2012
	Percent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injured in the Past Year	62.8%	*58.4%	*	Michigan Profile for Healthy Youth	2018/*2012
	Percent of Middle School Students who Saw a Dentist in the Past 12 Months	63.1%	*Not available	*	Michigan Profile for Healthy Youth	2018/*2012
	Percent of High School Students who Saw a Dentist in the Past 12 Months	69.9%	*Not available	*	Michigan Profile for Healthy Youth	2018/*2012
MiPHY-Beaverton	Number of Births per 1,000 Females, Age 15-19			**22**	Michigan Profile for Healthy Youth	2016
	Teen Pregnancy Rate (per 1,000)			**27.3**	Michigan Profile for Healthy Youth	2016
	Repeat Teen Births, Age 15-19			**17%**	Michigan Profile for Healthy Youth	2016
	Child and Teen Deaths, Age 1-19			**26.7**	Michigan Profile for Healthy Youth	2016
	Percent of Middle School Students who are Obese			*	Michigan Profile for Healthy Youth	2016

	Percent of Middle School Students who are Overweight			*	Michigan Profile for Healthy Youth	2016
	Percent of High School Students who are Obese			*	Michigan Profile for Healthy Youth	2016
	Percent of High School Students who are Overweight			*	Michigan Profile for Healthy Youth	2016
	Percentage of Middle School Students who Were Physically Active for at Least 60 Minutes Per Day on Five or More of the Past Seven Days			*	Michigan Profile for Healthy Youth	2016
	Percentage of High School Students who Were Physically Active for at Least 60 Minutes per Day on Five or More of the Past Seven Days			*	Michigan Profile for Healthy Youth	2016
	Percent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injured in the Past Year			*	Michigan Profile for Healthy Youth	2016
	Percent of Middle School Students who Saw a Dentist in the Past 12 Months			*	Michigan Profile for Healthy Youth	2016
	Percent of High School Students who Saw a Dentist in the Past 12 Months			*	Michigan Profile for Healthy Youth	2016
Nutrition and Exercise	Adult Obesity	38%	37%	**32%**	County Health Rankings	2019
	Physical Inactivity	27%	29%	**22%**	County Health Rankings	2019
	Population with No Leisure Time Physical Activity	30.4%	31.1%	**22.1%**	Centers for Disease Control and Prevention	2013
	Low Income and Low Access to a Grocery Store	1.7%	0.49%	*	US Department of Agriculture: Food Atlas	2015
	People 65+ with Low Access to a Grocery Store	0.48%	0.16%	*	US Department of Agriculture: Food Atlas	2015
	Access to Exercise Opportunities	71%	61%	**85%**	County Health Rankings	2019
	Children with Low Access to a Grocery Store	0.59%	0.2%	*	US Department of Agriculture; Food Atlas	2015
	Farmers Market Density	0.1%	0.04%	*	US Department of Agriculture; Food Atlas	2016
	Fast Food Restaurant Density (per 1,000)	0.49	0.35	*	US Department of Agriculture; Food Atlas	2014
	Grocery Store Density (per 1,000)	0.36%	0.12%	*	US Department of Agriculture; Food Atlas	2014
	Food Environment Index	7.8	8.2	**7.1**	County Health Rankings	2019
	Child Food Insecurity Rate	22.8%	21.6%	**14.2%**	Feeding America	2016
	Frequent Physical Distress	14%	13%	**13%**	County Health Rankings	2019
	SNAP Participants (per 10,000)	15.84	15.57	**10.07**	Community Commons	2018
Chronic Conditions	Kidney Disease	16.7%	19.4%	**19.42%**	Centers for Medicare and Medicaid Services	2015
	Depression	22.7%	19.6%	**18.57%**	Centers for Medicare and Medicaid Services	2015
	Schizophrenia/Other Psychotic Disorders	2.7%	3.2%	**3.99%**	Centers for Medicare and Medicaid Services	2015
	Ischemic Heart Disease (Medicare Population)	34%	34%	**30.63%**	Centers for Medicare and Medicaid Services	2015

	Stroke	3.4%	3.4%	**3.97%**	Centers for Medicare and Medicaid Services	2015
	Hepatitis (Chronic Viral B&C)	0.6%	0.36%	**0.68%**	Centers for Medicare and Medicaid Services	2015
	Osteoporosis	4.1%	4.3%	**5.24%**	Centers for Medicare and Medicaid Services	2015
	Arthritis	30.4%	32.5%	**32.6%**	Centers for Medicare and Medicaid Services	2015
	Alzheimer's/Dementia	7.2%	8%	**10.63%**	Centers for Medicare and Medicaid Services	2015
	Poor Mental Health Days (per 30 days)	4.8	4.4	**4.4**	County Health Rankings	2019
	Asthma	11.6%	9.6%	**9.67%**	Centers for Medicare and Medicaid Services	2015
	Babies with Low Birth Weight (per 1,000)	7.3%	7.8%	**8.8%**	Michigan Department of Community Health	2017
	Low Birthweight	7%	7%	**8%**	County Health Rankings	2019
Cardiovascular	Heart Disease Hospitalizations	200.5	219.7	**124.4**	Michigan Department of Community Health	2016
	Adult Diabetes	14%	15%	**11%**	County Health Rankings	2019
	Diabetes: Medicare Population	28.1%	26.5%	**28.59%**	Centers for Medicare and Medicaid Services	2015
	High Cholesterol	49.4%	49.4%	**39.4%**	Behavioral Risk Factor Surveillance System	2015
	High Cholesterol: Medicare Population	45.8%	46.2%	**44.61%**	Centers for Medicare and Medicaid Services	2015
	Heart Disease (3 Year Average)	254.5	209.4	**197.9**	Michigan Department of Health and Human Services	2017
	Hypertension Hospitalizations (10,000 Population)	10.9	11.1	**15.5**	Behavioral Risk Factor Surveillance System	2016
	Hypertension (Medicare Population)	56.7%	57.5%	**54.99%**	Centers for Medicare and Medicaid Services	2015
	Heart Failure (Medicare Population)	16.7%	15.6%	**15.82%**	Centers for Medicare and Medicaid Services	2015
	COPD: Medicare Population	18%	16.3%	**13.7%**	Centers for Medicare and Medicaid Services	2015
	Atrial Fibrillation	9%	8.5%	**8.24%**	Centers for Medicare and Medicaid Services	2015
	Ischemic Heart Disease (Medicare Population)	34%	34%	**30.63%**	Centers for Medicare and Medicaid Services	2015
	Stroke	3.4%	3.4%	**3.97%**	Centers for Medicare and Medicaid Services	2015
Cancer Incident Rate per 100,000 Population	All Cancer	459	431.4	**449.5**	National Cancer Institute	2015
	All Cancer Medicare Population	7.4%	7.7%	**7.83%**	Centers for Medicare and Medicaid Services	2015
	Lung Cancer	75.6	73.9	**65.6**	National Cancer Institute	2015
	Oral Cancer	10.9	10.9	**11.5**	National Cancer Institute	2015
	Breast Cancer	140.1	115	**123.4**	National Cancer Institute	2015
	Colorectal Cancer	28.6	29	**37.7**	National Cancer Institute	2015
	Prostate Cancer	97.1	98.4	**117.6**	National Cancer Institute	2015
Mortality Rate per 100,000 Population	Mortality Ranking	75	69	*	County Health Rankings	2019
	Life Expectancy, Both Sexes	76.22 years	77.62 years	**78.26 years**	US Health Map	2014
	All Cancer	202.8	180	**172.7**	National Cancer Institute	2015
	Breast Cancer	26.8	*	**21.7**	National Cancer Institute	2015
	Colorectal Cancer	*	*	**14.5**	National Cancer Institute	2015

	Lung Cancer	48	37.6	**48**	National Cancer Institute	2015
	Prostate Cancer	14.9	*	**19**	National Cancer Institute	2014
	Premature Death (YPLR)	9,900	8,600	**7,600**	County Health Rankings	2019
	Heart Disease	371.9	336.8	**252.6**	Michigan Department of Community Health	2017
	Diabetes	27	32.1	**22.1**	Michigan Department of Community Health	2017
	Chronic Lower Respiratory Disease	127.2	111	**57.1**	Michigan Department of Community Health	2017
	Stroke	75	75.3	**50.1**	Michigan Department of Community Health	2017
	Suicide	6.2	5.4	**13.6**	Michigan Department of Community Health	2017
	Influenza and Pneumonia	7.7	5.7	**14.1**	Michigan Department of Community Health	2015
	Infant	*	*	**6.8**	Michigan Department of Community Health	2017
	Drug Overdose Deaths	29	21	**24**	County Health Rankings	2019
	Drug Rate Death due to Heroin-Related Drug Poisoning	0	0	**4.2**	Michigan Substance Use Data Repository	2017
	Alcohol-Impaired Driving Deaths	38%	38%	**29%**	County Health Rankings	2019

Appendix C

MidMichigan Community Health Questionnaire

Directions: For each of the questions below, please select/circle the best response. Only select/circle more than one response per question where directly indicted. Please allow for 5 to 7 minutes to complete the survey.

1. What is your zip code? _____

2. How would you rate your overall health?

Excellent Very Good Fair Poor Very Poor

3. How would you rate the overall health of your community?

Very Healthy Healthy Neutral Unhealthy Very Unhealthy

4. How would you rate the overall quality of life in your community?

Very Good Good Somewhat Good Bad Very Bad

5. I can help make my community a better place to live.

Strongly Agree Agree Neutral Disagree Strongly Disagree

6. My community is a HEALTHY place to live because:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
it has a clean environment.	☐	☐	☐	☐	☐
I can get healthy goods.	☐	☐	☐	☐	☐
there are good place to play.	☐	☐	☐	☐	☐
it is a good place to get health care.	☐	☐	☐	☐	☐
there are good places to get dental care.	☐	☐	☐	☐	☐
there are good health programs offered.	☐	☐	☐	☐	☐
I can get affordable health insurance.	☐	☐	☐	☐	☐

7. My community is STRONG in providing:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
good housing options.	☐	☐	☐	☐	☐
good education.	☐	☐	☐	☐	☐
transportation services.	☐	☐	☐	☐	☐
child care options.	☐	☐	☐	☐	☐
jobs with fair wages.	☐	☐	☐	☐	☐

Community Support Services

8. My community has good supports and services for the following groups of people:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
aging adults.	☐	☐	☐	☐	☐
children and families.	☐	☐	☐	☐	☐
teens.	☐	☐	☐	☐	☐
racial and ethnic persons.	☐	☐	☐	☐	☐
veterans.	☐	☐	☐	☐	☐
people whose primary language is not English.	☐	☐	☐	☐	☐
LGBTQ (Lesbian, Gay, Bi-sexual, Transgender, and Questioning) individuals.	☐	☐	☐	☐	☐
people with disabilities.	☐	☐	☐	☐	☐
people who are homeless.	☐	☐	☐	☐	☐
people with mental illness.	☐	☐	☐	☐	☐
people with chronic diseases.*	☐	☐	☐	☐	☐
people with cancer.	☐	☐	☐	☐	☐
people with drugs and/or alcohol addiction.	☐	☐	☐	☐	☐
victims of domestic abuse.	☐	☐	☐	☐	☐
victims of violent crime (exp. assault, rape, robbery, etc.).	☐	☐	☐	☐	☐

9. I get the social and emotional support I need:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
from my family.	☐	☐	☐	☐	☐
from my friends.	☐	☐	☐	☐	☐
at my church.	☐	☐	☐	☐	☐
from my community.	☐	☐	☐	☐	☐

Note:
* Chronic disease is defined as sickness lasting three (3) months or more. Chronic diseases cannot be cured by medication, nor do they just disappear. (Exp. Asthma, Chronic Pulmonary Disease "COPD", Diabetes, etc.)

10. The following HEALTH PROGRAMS are meeting the needs of my community:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
alcohol and/or drug abuse.	☐	☐	☐	☐	☐
asthma.	☐	☐	☐	☐	☐
cancer.	☐	☐	☐	☐	☐
COPD.	☐	☐	☐	☐	☐
dental health.	☐	☐	☐	☐	☐
diabetes.	☐	☐	☐	☐	☐
heart disease & stroke.	☐	☐	☐	☐	☐
hypertension (High Blood Pressure).	☐	☐	☐	☐	☐
infant care.	☐	☐	☐	☐	☐
mental health.	☐	☐	☐	☐	☐
overweight/obesity.	☐	☐	☐	☐	☐
prenatal care.	☐	☐	☐	☐	☐
sexually transmitted infections (STIs or STDs).	☐	☐	☐	☐	☐
tobacco use.	☐	☐	☐	☐	☐
violence and/or domestic abuse,	☐	☐	☐	☐	☐

Other *(please specify)* : _____

_____

Health Literacy & Access to Care

11. When I visit my doctor, I understand:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
what the doctor tells me.	☐	☐	☐	☐	☐
the hand-outs the doctor gives me.	☐	☐	☐	☐	☐

12. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

Yes No

13. Do you have any kind of health coverage, including health insurance, prepare plans such as HMOs, or government plans such as Medicare/Medicaid, or Indian Health Services?

Yes No Don't Know/Not Sure

Community Safety

14. My community is a safe place to live.

Strongly Agree Agree Neutral/Not Sure Disagree Strongly Disagree

15. My community is a safe place to live because:

	Strongly Agree	*Agree*	*Neutral/ Not Sure*	*Disagree*	*Strongly Disagree*
there is safe housing.	☐	☐	☐	☐	☐
there are safe places to play.	☐	☐	☐	☐	☐
there are safe places to work.	☐	☐	☐	☐	☐
there are safe schools.	☐	☐	☐	☐	☐
there is good street lighting.	☐	☐	☐	☐	☐
there are safe roads and sidewalks.	☐	☐	☐	☐	☐
there are safe ways to get to where I need to go (transportation).	☐	☐	☐	☐	☐
there are good fire/safety/emergency services.	☐	☐	☐	☐	☐

Community Profile

16. I believe the following COMMUNITY HEALTH issues exist in my community?
(Select the top THREE (3) health issues only)

☐ Access to exercise and wellness activities
☐ Affordable housing
☐ Access to public transportation
☐ Other (please specify): _____

☐ Access to affordable healthy foods
☐ Access to healthcare
☐ Jobs with livable wages/poverty

17. What do you feel could be done to improve the health of your community?

18. What PHYSICAL HEALTH* issues think are the biggest concern in your community? *(Select the top THREE (3) physical issues only)*

- ☐ Cancer
- ☐ Diabetes
- ☐ Lung Disease (i.e. COPD, asthma, etc.)
- ☐ Heart Disease
- ☐ Obesity/Overweight
- ☐ Poor Nutrition/Poor Eating Habits
- ☐ Physical Inactivity
- ☐ Teen Pregnancy
- ☐ Tobacco Use/Smoking
- ☐ Mental Health (i.e. depression, PTSD, etc.)
- ☐ Hypertension (i.e. high blood pressure)
- ☐ Sexual Health (i.e. STDs/HIV)
- ☐ Substance Abuse (i.e. alcohol, drugs, etc.)
- ☐ Asthma
- ☐ Dental Health
- ☐ Crime

* Note: Physical health is the health of a person's body.

19. When you hear the words "healthy community," what comes to your mind? To you, what would a healthy community look like?

_____

_____

_____

_____

Technology and Health

20. Where do you access the internet (i.e. email, web. Facebook, etc.) most often?

- ☐ I do not have access to the internet
- ☐ Friend's home
- ☐ Home computer/tablet
- ☐ Library
- ☐ Mobile/Cell Phone
- ☐ School
- ☐ Work
- ☐ Other (*please specify*): _____

_____

21. Technology has made it easier to use computers, mobile phones, laptops, and tablets, to safely talk face-to-face with your doctor without a visit to the office.

I would be OK talking face-to-face with my doctor using the internet.

Strongly Agree Agree Neutral/Not Sure Disagree Strongly Disagree

Demographics

22. Please choose your gender.

☐ Male ☐ Female ☐ Transgender

23. Please choose your age group.

☐ 18-24 years ☐ 40-54 years ☐ 65-79 years
☐ 25-39 years ☐ 55-64 years ☐ 80+ years

24. I am:

☐ Married ☐ Divorced ☐ Single
☐ Widowed ☐ Separated ☐ Domestic Partnership

25. Please choose the group(s) below that best represent you. *(Select all that apply)*

☐ White, Non-Hispanic
☐ Black/African American
☐ Latino or Hispanic American
☐ Native American/Alaskan Native
☐ Other (*please specify*): _____
☐ Middle Eastern/Arab American
☐ South Asian/Indian American
☐ Native Hawaiian/Pacific Islander
☐ From multiple races

26. What is your living situation?

☐ I rent my home
☐ I own my home
☐ Other (*please specify*): _____
☐ I live with family and/or friend
☐ I live in temporary housing (i.e. hotel, shelter, motel, transitional housing)

27. Including you, how many people live in your home?

☐ 1 ☐ 2 ☐ 3
☐ 4 ☐ 5 or more

28. What is the highest grade or year of school you completed?

☐ Some High School-NO DIPLOMA
☐ High School Diploma/GED
☐ Some College
☐ Associate's Degree
☐ Bachelor's Degree
☐ Master's Degree or higher

29. What is your average household income?

- ☐ $0 - $24,999
- ☐ $25,000 - $49,000
- ☐ $50,000 - $74,999
- ☐ $75,000 - $99,999
- ☐ $100,000 and up

30. Please use the space below to share any ideas to help MidMichigan Health achieve its mission "to provide excellent health services to improve the quality of life for people in our communities."

_____

_____

_____

_____

THANK YOU!

Part II: Community Health Improvement Plan

The MidMichigan Medical Center - Gladwin Community Health Improvement Plan of 2019-2022 was built upon previous plans to further reflect MidMichigan Health's Mission, Vision and Core Values, as well as collaborative efforts with the community. The underlying premise for each MidMichigan Health subsidiary in completing previous plans was shared ownership for community health. While our previous CHNA's helped us identify focus areas for health improvement, the IRS legislation mandating collaborative efforts provided an opportunity to revisit our needs assessment and strategic planning processes. Part one of the Community Health Needs Assessment included a detailed investigation of quantitative and qualitative data from which areas for health improvement were chosen.

The following plan includes goals and evidenced based strategies to address three focus areas for health improvement, approved by the MidMichigan Medical Center - Gladwin Board of Directors on October 22, 2019. This document reflects input from designated individuals in each community inclusive of, but not limited to, public health experts, representatives of low-income and medically underserved populations and those suffering from chronic disease. The broadened scope from which we plan to function is inherent in the strategies, which include internal health improvement initiatives of MidMichigan Medical Center - Gladwin and MidMichigan Health, as well as collaborative efforts of the hospital with public health, the University of Michigan and our community partners. The following pages outline the Community Health Improvement Plan for MidMichigan Medical Center - Gladwin.

Addendum: This report will be made publicly available on www.midmichigan.org, and will be filed with the Internal Revenue Service using Form 990 Schedule H.

Health Focus Area: Chronic Disease Prevention and Treatment				
Goal: Educate, encourage and provide opportunity for improved health behaviors and increased access to healthy foods.				
Strategy	**Action**	**Lead/Partners**	**Expected Output**	**Measure**
1.1. Expand Prescription for Health Program. 1.2. Explore means to connect patients to other healthy food sources in area.	1.1. Pilot program to reach an increased number of participants in Gladwin County area. 1.2. Connect patients to Double Up Food Bucks, Emergency Food Pantry, Food Bank of Eastern Michigan and Community Garden Sites.	• MidMichigan Health • MSU Extension • Central Michigan District Health Department • MiHIA	Improved knowledge of healthy eating. Increased access to and selection of healthy foods.	**Short Term** Number of programs, participation rates. **Long Term** Increased fruit and vegetable purchase and consumption. Improved BMI's and decreased percentage of children and adults being overweight or obese or reporting high BMI's. Decreased consumption of fast food and sugary drinks.
2. Provide Diabetes Prevention Program.	Expand number of Diabetes Prevention in-person and virtual offerings for adults at risk for diabetes.	• MidMichigan Physicians Group Offices (in-person offerings) • MiHIA (virtual offerings) • Insurance funded (in-person and virtual offerings)	The participation rates for in-person and virtual classes will increase every year through 2022. Delayed onset of Diabetes and comorbidities attributable to Type 2 Diabetes.	**Short Term** Participation rates, physical activity outcomes, average weight loss and program evaluations. **Long Term** Improved A1c and cholesterol numbers.
3. Offer MidMichigan Health Speaker's Bureau for healthy eating, exercise and weight management educational programming.	Provide subject matter experts and educational materials like "Twelve Weeks to a Better You."	• MidMichigan Health Subject Matter Experts	A minimum of three programs per year will be provided to audiences, per request.	Number of requests. Participation rates. Program evaluations.
4. Provide healthy eating and exercise programming for school-aged children.	Offer Eat Healthy Move More, Go Outside, Kurbo and Lou E's Fit Club opportunities.	• MidMichigan Health • MSU Extension • Great Start Collaboration • Community Schools • Great Lakes Loons • MiHIA Kurbo	A minimum of 150 school-aged children will be reached with programming.	**Short Term** Participation rates. **Long Term** Decreased percentage of middle school and high school aged children reporting overweight or obese and decreased BMI.
5. Provide education on recommended health care screenings.	Educate community members regarding suggested health care screenings at programs and events using the Women's and Men's Guides to Living Well and other resources.	• MidMichigan Health • MPG Offices • Community Connect Fair • Women's Expo	Community Members will be informed regarding recommended screenings.	**Short Term** Number of resources distributed. **Long Term** Increased participation in recommended screenings.

Health Focus Area: Maternal/Infant Health				
Goal: Prepare, Care and Support childbearing families in order to improve the health and well-being of childbearing aged women and infants.				
Strategy	**Action**	**Lead/Partners**	**Expected Output**	**Measure**
1.1. Increase proportion of pregnant women who receive early and adequate prenatal care. 1.2. Provide consistent childbirth preparation education content to all staff and pregnant families.	1.1. Educate women of childbearing age regarding the importance of prenatal care. 1.2. Explore Implementation of a Centering Pregnancy Pilot. 1.2a. Work with Community partners to register expectant parents for childbirth preparation, baby care boot camp, breastfeeding/safety and child/infant CPR classes. 1.2b. Implement a consistent education initiative for all medical staff and patient education at inpatient and ambulatory sites.	• MidMichigan Health • MPG and Specialty Clinic OB/GYN • Primary Care and Pediatric Offices • Great Start Collaborative • Central Michigan District Health Department • MiHIA Centering Pregnancy	Improved pregnancy and postpartum behaviors. Improved health of mothers, babies and future health of children.	**Short Term** Number of first time and overall prenatal visits. Number of staff members participating in education. Class participation numbers. **Long Term** Decrease in percent of mothers in the less than adequate prenatal care category. Decrease in average number of low birth weight babies.
2. Increase abstinence from cigarettes among pregnant women.	Expand Tobacco Cessation and Reduction in Pregnancy Treatment Program.	• MiHIA Region 5 Perinatal Quality Collaborative • MidMichigan Health • MidMichigan Physicians Group	Increased numbers of women will decrease or stop abusing substances during pregnancy.	**Short Term** Decreased reported use of Tobacco during pregnancy. **Long Term** Decrease in births to mothers who smoked or abused other substances during pregnancy.
3. Provide opportunity for follow-up care post discharge.	Educate expectant or postpartum mothers regarding needed programs (Maternal Infant Health Program, Healthy Beginnings Program and SNAP enrollment).	• MPG and Specialty Clinic OB/GYN • Primary Care and Pediatric Offices • MidMichigan Home Care • Central Michigan District Health Department • WIC	Increased utilization of community support services early in prenatal period and after delivery.	**Short Term** Reports of support service participation. **Long Term** Reduced rate of post neonatal deaths and deaths from unknown causes.
4.1. Increase the proportion of infants who are breastfed. 4.2. Provide Opportunity and support for breastfeeding across the breastfeeding continuum.	Provide consistent education to physicians, inpatient, outpatient health staff and educators regarding the benefits of breastfeeding. Increase breastfeeding support. Review Patient Portal options for more comprehensive follow-up access and options.	• MidMichigan Health • Central Michigan District Health Department • WIC • MidMichigan Physicians Group	Increased rate of moms at discharge from hospital exclusively breastfeeding. Increased rate of mom's breastfeeding at 3 months, six months and one year.	Breastfeeding rates at initiation, discharge, three months, six months and one year.

Health Focus Area: Mental Health and Substance Use				
Goal Mental Health: Lead, partner or support efforts to ensure a comprehensive system of care to meet the behavioral health of all at the right time, in the right place, and with the right care.				
Goal Substance Use: Provide prevention, screening, assessment, treatment; education and support so all needs are met.				
Strategy	**Action**	**Lead/Partners**	**Expected Output**	**Measure**
1. Improve consumer access to mental health resources and treatment.	1.1. Promote mental health resources through the Hope Portal. 1.2. Assist in closing gaps in care through physician mental health assessment and referral education.	• MidMichigan Health • Community Mental Health of Central Michigan • MidMichigan Physicians Group • 211 of Northeast Michigan	Increased referrals to mental health resources and treatment.	**Short Term** Increased referral rates. **Long Term** Reported decrease in anxiety, depression and unhealthy means of coping.
2. Improve consumer access to substance use resources and treatment.	2.1. Provide resources for tobacco cessation, alcohol abuse, vaping and drug addiction. 2.2. Provide consistent messaging using a variety of tactics.	• MidMichigan Health • MPG Offices • 1016 Recovery Network • Clare and Gladwin RESD • Great Start Collaborative • Human Service Coordinating Body for Safe Families/Safe Children	Increased referrals to substance use resources and treatment. Decreased percentage of teens and adults 18 years and older that abuse substances.	**Short Term** Increased referral rates. **Long Term** Decreased substance use rates (reported smoking, vaping, and binge drinking) and alcohol impaired driving deaths.
3. Continue Project Assert (Alcohol and Substance Abuse Services, Education and Referral to Treatment).	3. Substance Use treatment services will continue in ER and inpatient setting.	• 1016 Recovery • MidMichigan Health	Improved Care Coordination and access to substance use treatment.	Increase in Referral Rates.
4. Identify/Screen for Social Determinants of Health, (SDOH), including Loneliness.	4a.Provide systematic evaluation of Social Determinants of Health needs for new patients, post ED and annual physical. 4b.Provide bi-directional referral to agencies answering needs reflected from SDOH Surveys.	• MidMichigan Health • 211 of Northeast MI • United Way • Council on Aging	Increased identification of SDOH needs.	Referral Rates and Types of Social Determinants of Referrals Satisfied.
5. Identify/Screen for depression/suicide and co-occurring substance abuse and mental health disorders.	Provide assessment for depression/suicide annually for those 12 years and older in primary care offices and at other health encounters as appropriate.	• MidMichigan Health • 1016 Recovery Network • Community Mental Health of Central Michigan • Central Michigan District Health Department • Community Schools	Increased identification and treatment of those at risk for suicide. Increase rates of adults, and teens with co-occurring substance abuse and mental health disorders who receive treatment.	**Short Term** The increased rates of teens and adults in treatment. Decreased reports of anxiety and depression. **Long Term** Decreased Suicide Rates.