MyMichigan Medical Center Alpena

Community Health Needs Assessment 2025

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Letter to Community

June 2025

Dear Community Members and Partners,

At MyMichigan Health, our Purpose Statement is: "Creating Healthy Communities – Together."

Community health improvement is a daunting challenge. In fact, it is far too great for any single organization to achieve. However, it can be achieved together with the help of community partners like you. Whether in the public health, foundation, nonprofit organization, government or the health care sector, or those with first-hand experience that live, work, play and age within our communities – all can make a difference.

The Community Health Needs Assessment (CHNA) process is one way to make a difference. The CHNA offers a valuable opportunity to listen and gain input on what health concerns matter most to those in our communities. As part of that process, we seek the most impactful, evidence-based ways to work together to improve the health of our communities. Collectively, we have worked hard to address key priorities identified in previous CHNAs to move the needle on health indicators. As a result, we have implemented programs and developed new processes to provide care and affect social determinants of health to those most in need. We are proud of what we have accomplished thus far, but also understand there is still much work to be done.

It is through our CHNA process, using data and stakeholder input, that we measure and obtain a detailed snapshot of our region's health needs and how best to address barriers to achieving a healthy life. We know that individuals and families can best achieve a healthy life when they are able to make positive health choices in settings where barriers to health are addressed and removed.

MyMichigan Health takes its role as an anchor institution, a community leader and trusted partner in our communities very seriously. We know that we serve as a major employer, purchaser, leader and participant in interconnected relationships with you, for the good of our community's health.

MyMichigan Health understands its responsibility to set standards of care not only in our clinical settings, but also in the towns, community centers and classrooms where we serve. Our efforts to strengthen and integrate our clinical and community programs, together with our community partners, is how we become successful in our challenge to improve health.

It is our pleasure to provide this 2025 MyMichigan Medical Center Midland Community Health Needs Assessment. In accordance with policy, the Board of Directors reviewed and approved this report on 2/28/2025. We invite you to explore this report and join us as we engage in addressing the critical health issues in our community.

Sincerely,

President, MyMichigan Medical Center Alpena

Chair, Board of Directors

Manager, Community Health

Executive Director, Population Health

Acknowledgements of Partners

MyMichigan Health is pleased to share with you the 2025 Community Health Needs Assessment (CHNA). We adopted and modified the Mobilizing for Action through Planning Partnerships 2.0 (MAPP 2.0) process to meet the needs of MyMichigan Health, our partners and the community. This is a community-driven strategic planning process for improving community health. This report represents our commitment to identify and address the barriers in our communities that impact their health.

MyMichigan Health would like to give a special thank you to all of those who have been involved in the development of the CHNA, especially those in the MiThrive network. All these partners took part in an extensive process that started with planning, collecting and analyzing data to identify the top strategic health issues that our communities face. Collecting qualitative and quantitative data through our process enabled us to have a deep understanding of the challenges that our community faces.

This understanding enables us to develop our Community Health Improvement Plan (CHIP) that will guide our efforts over the next three years to impact health outcomes in our community.

Alpena-Montmorency-Alcona Educational Service District

Area Agency on Aging of Northwest Michigan

AuSable Valley Community Mental Health

Benzie-Leelanau District Health Department

Central Michigan District Health Department

Corewell Health

Disability Network West Michigan

District Health Department #2

District Health Department #4

District Health Department #10

Grand Traverse County Health Department

Great Start Collaborative

Groundwork Center for Resilient Communities

Health Department of Northwest Michigan

Isabella Citizens for Health, Inc

McLaren Northern Michigan

Michigan Department of Health and Human Services

Munson Healthcare

Northeast Michigan Community Service Agency

Partners in Prevention

Strangers No Longer

Traverse City Health Clinic

West Michigan Community Mental Health

Figure 1: Community partners that helped with the CHNA

Executive Summary

The Community Health team of MyMichigan Health supports the Community Health Needs Assessment (CHNA) as a key component of improving population health. Our assessment and corresponding plans reflect the purpose and core values of MyMichigan Health. We truly believe that health happens were 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.

MyMichigan Medical Center Alpena, with community partners, conducted this CHNA using a modified Mobilizing for Action through Planning Partnerships (MAPP) process that assessed the current health status of the community based on identified needs according to benchmark comparisons in secondary public health data and primary data collected through community surveying for community input and the development of a Community Health Improvement Plan (CHIP). The process included several community partners that collected, reviewed and analyzed public health data, completed and distributed the community health survey, identified priorities and set goals for the 2025 CHIP.

Community Health Status

MyMichigan Medical Center Alpena services Alcona, Alpena, Montmorency and Presque Isle counties. Together, these four counties are on average 85 percent rural with approximately 33 percent of the population over the age of 65, which is trending up. Chronic diseases such as diabetes, obesity, stroke and cancer have a strong prevalence resulting in higher mortality rates. Breast cancer incident rates are trending up, colorectal cancer is also trending up in Alcona, Alpena, and Montmorency, along with lung cancer when compared to other cancer rates. Behavioral health measures of suicide and depression continue to trend on an upward track. While the patient to provider ratio for mental health has improved across the service area, it is still below the Michigan and Healthy People 2030 levels. In addition, an average of 20 percent of persons in Michigan report frequent mental distress which is 12.4 percent higher than the Healthy People 2030 benchmark of 7.4 percent.

Community Health Survey

The 2024 Community Well-Being Survey was conducted between August 5, 2024 and October 6, 2024 to obtain community input regarding the health of the community. The data collected with the survey indicated a need for focus on chronic disease prevention, access to care, and behavioral health services.

Community Health Improvement Plan

Three focus areas were adopted and approved by the MyMichigan Medical Center Alpena Board of Directors at the recommendation of the steering committee, community health, and community partners. These focus areas will have specific targets for community health impact based on the data collected and analyzed:

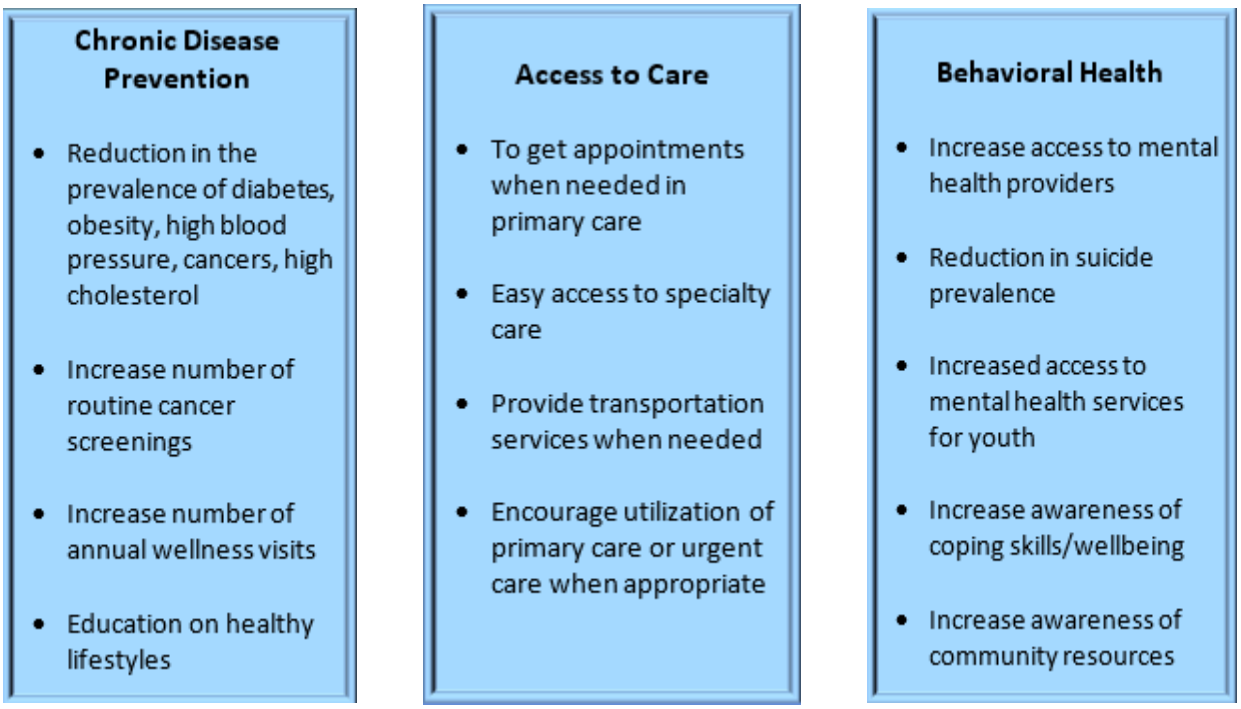


Figure 2: Chronic Disease Prevention, Access to Care and Behavioral Health Outlines

Overview of MyMichigan Health

MyMichigan Health, a non-profit health system headquartered in Midland, Michigan, is a leader in providing award-winning, high-quality health care to the 26-counties it serves. With Medical Centers in Alma, Alpena, Clare, Gladwin, Midland, Mt. Pleasant, Saginaw, Sault Ste. Marie, Standish, Tawas and West Branch, MyMichigan also has affiliations with Medical Centers in St. Ignace* and Mackinac Island.* MyMichigan provides a full continuum of care across a wide array of settings, including urgent care centers, health parks, home health, virtual care, as well as medical offices representing more than 80 specialties and subspecialties.

- A major employer in all the areas we serve and recognized by Forbes as one of "America's Best Employers by State" in 2022, 2023 and 2024.

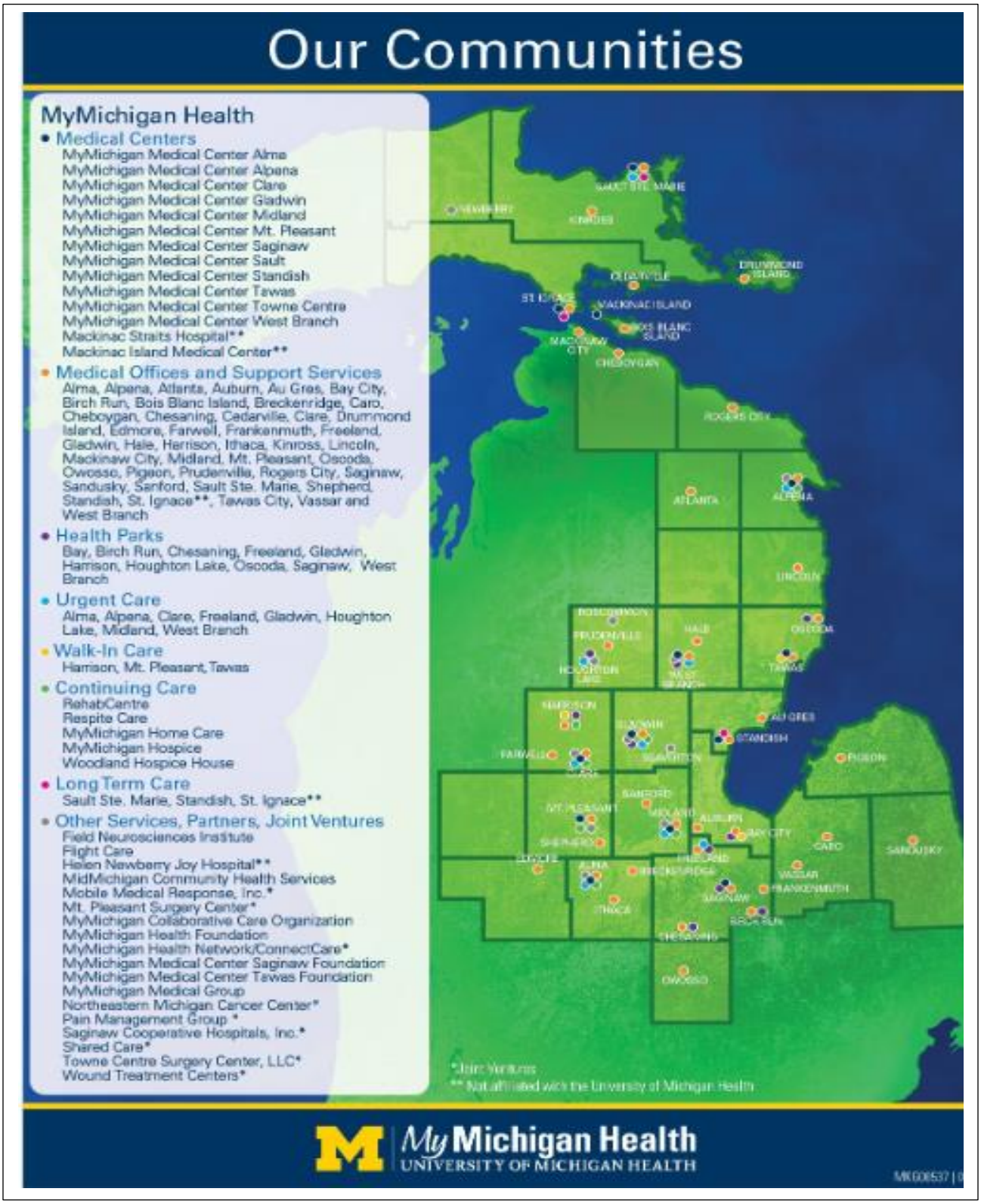
- Committed to the future of medicine by partnering with leading institutions to offer medical education programs that train medical students, physicians, nurse practitioner and physician assistant students, nursing students and other clinical experts for our region.

- More than 13,800 employees, volunteers, health care providers and other personnel working together to create healthy communities for nearly a million residents across the 26-counties we serve.

- A community partner that provided more than $128 million in community benefits during fiscal year 2023 and that supported its patients and families with new equipment, services and programs with funds raised by the MyMichigan Health Foundation.

- Your Go-To Place for all your health care needs.

Figure 3: Five Foundational Elements



*Not affiliated with the University of Michigan Health

Figure 4: Map of MyMichigan Health Service Area

Feedback is welcomed via communityhealth@mymichigan.org

Overview of Community

Located in northeast Michigan on the shores of Lake Huron, MyMichigan Medical Center Alpena serves the counties of Alcona, Alpena, Montmorency and Presque Isle. The area is known as the "Sunrise Side" and can be described as a place where history and heritage collide with relaxed outdoor adventure. With over 200 miles of Lake Huron shoreline among the counties, numerous inland lakes and rivers and an abundance of hiking trails, there is a lot to explore. Amidst the area parks, state parks, pathways, beaches and forests, recreational opportunities exist for kayaking, canoeing, paddle boarding, hiking, snorkeling, diving, swimming, fishing, hunting, biking and stargazing. In addition, the area has multiple lighthouses, sinkholes and the Ocqueoc Falls. Alpena is home to the Thunder Bay National Marine Sanctuary which works to preserve the area shipwrecks and offers glass bottom boat tours during the summer months. Enthusiasts can also dive, snorkel or paddle board over the shipwrecks.

Figure 5: View of Alpena's Sunrise overlooking Lake Huron at the break wall

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 MyMichigan Health, headquartered in Midland, affiliated with the Michigan Medicine: University of Michigan. In April of 2022, the Medical Center in Alpena completed its 99,000-square-foot patient tower project featuring all private patient rooms, operating rooms, LDRP suites and more. MyMichigan Medical Center Alpena has 139 licensed beds and provides access to cancer care, pain management, infusion services, inpatient behavioral health, wound management and hyperbaric chamber treatments. The medical center is accredited by the Joint Commission and has approximately 1100 employees, volunteers, physicians and other providers. A leader in quality, MyMichigan Medical Center Alpena was also named one of the 2022 Top 20 Rural and Community Hospitals in the United States by the National Rural Health Association (NRHA). The medical center was also named as a 2022 Top 100 Rural & Community Hospital - the recognition is based on inpatient market share, outpatient market share, quality, outcomes, patient perspective, cost, charge and financial efficiency.

Community Served at MyMichigan Medical Center Alpena

The service area in Alcona County is comprised of zip codes: 48705 (Barton City), 48721 (Black River), 48728 (Curran), 48737 (Glennie), 48738 (Greenbush), 48740 (Harrisville), 48742 (Lincoln), 48745 (Mikado) and 48762 (Spruce).

The service area in Alpena County is comprised of zip codes: 49707 (Alpena), 49744 (Herron), 49747 (Hubbard Lake), 49753 (Lachine) and 49766 (Ossineke).

The service area in Montmorency County is comprised of zip codes: 49709 (Atlanta) and 49746 (Hillman), 49756 (Lewiston).

The service area in Presque Isle County is comprised of zip codes: 49743 (Hawks), 49759 (Ocqueoc), 49765 (Onaway), 49776 (Posen), 49777 (Presque Isle) and 49779 (Rogers City).

Framework/Methodology

The Community Health Needs Assessment (CHNA), while a requirement every three years under the Patient Protection and Affordable Care act for our tax exempt status, is an important reflection of MyMichigan Health's mission, vision, core values and the system's goal to become a leader in our regions to improve the health of our communities. Community is a foundational element in MyMichigan Health's strategic plan, and we believe that all people should have the opportunity to make healthy choices for a long, prosperous life, despite an individual's socioeconomic status, education or background. The CHNA, as a key component for identifying top health concerns in a given area, will be vital in accomplishing the four objectives of the "Quadruple Aim": Improve health outcomes in the community, enhance patient experience, enhance provider experience and reduce the cost of care. The primary purpose for the CHNA for MyMichigan Medical Center Alpena is to gain an understanding of the health needs caused by disparities in social determinants of health (SDOH) as well as strengths in the given service area. We do so by analyzing a large and specific collection of data and community input in the region which includes Alcona, Alpena, Montmorency and Presque Isle counties. MyMichigan Medical Center Alpena partnered with MiThrive for data collection in a collaboration to reduce survey fatigue within our communities and to work together to decrease duplication in efforts. With this understanding of the needs in our communities, we are equipped to develop a three-year strategic plan to improve the health outcomes in our communities and build health improvement capacity for the future health of its residents.

2024 CHNA Process

Community Status Assessment (CSA): Collects and analyzes quantitative data from trusted sources to assess the status of communities, particularly focusing on populations experiencing inequities. The MiThrive CSA consists of secondary indicators collected in addition to a community survey.

Community Context Assessment (CCA): Utilizes qualitative methods to explore community strengths, lived experiences and external factors influencing change. It gathers non-numerical data, such as audio, photos and text, to provide deeper insights into the unique aspects of the community. The CCA helps fill data gaps and contextualizes issues through the perspectives of those with lived experience, ensuring a more comprehensive understanding of community dynamics. The MiThrive CCA consisted of photovoice, asset maps and quotes collected from residents.

Community Partner Assessment (CPA): Provides a framework for community partners to critically examine their individual systems, processes and capacities, as well as their collective ability to address health inequities. It helps organizations identify both current efforts and future strategies to drive systemic and structural change. By fostering collaboration, the CPA strengthens the network of community partners working toward health equity. The MiThrive CPA consisted of a community partner survey and live virtual events for discussion.

Each assessment offers valuable insights, but their overall impact is significantly enhanced when the findings are analyzed together.

Phase 1: Building the Community Health Improvement Foundation

During Phase 1, funding agreements with local health departments and hospitals for the MiThrive partnership were executed, the MiThrive Steering Committee, MiThrive Workgroups/Round Tables were

organized, and the Core Team was assembled. Strategic partnerships were cultivated with both new and existing collaborators, with a focus on including community members and organizations that represent or serve populations facing health inequities. As the infrastructure and partnerships took shape, guided by clear expectations and timelines, the shared Vision was affirmed, Healthy People in Equity Communities.

Phase 2: Telling the Community Story

During Phase 2, each of the assessments were conducted with support from all MiThrive partners and residents. The MiThrive Core Team instituted a schedule that would have all the individual portions of the CHNA completed during the 2024 calendar year. This was done using MAPP 2.0 as a framework for all planned assessments, and with input and decisions from the MiThrive Steering Committee. Each of the assessments collected different types of data for the community: primary and secondary, qualitative data of health indicators and community sentiments, quantitative data reflecting resident viewpoints, and data regarding the capacity and shared goals of community partner organizations.

Community Status Assessment (CSA)

The Community Status Assessment identifies priority community health and quality of life issues. It answers the following questions:

- How healthy are our residents?
- What does the health status of our community look like?

The answers to these questions were measured by collecting more than 200 indicators from a variety of secondary sources onto the MiThrive Data Platform, as well as primary data collected through the 2024 community survey and provider survey.

Community Survey Process

A 2024 community well-being survey was conducted to understand the health and health needs of people living in Alcona, Alpena, Montmorency and Presque Isle counties. The Community Health team worked with the MiThrive network comprised of local health departments, other hospital entities in Northern Michigan and local businesses to adapt the survey to ensure it met the needs of the community members and collected data on any health issues or factors emerging since the previous data collection.

The Community Health team aimed to collect data from a sample across Alcona, Alpena, Montmorency and Presque Isle Counties. The team used existing U.S. Census data to obtain population estimates for each township/city in all four counties to ensure appropriate representation from each location. Efforts were also made to obtain a sample that was representative of each county's population (age, gender, race, education, income).

Data collection occurred via online and paper surveys and were available in English and Spanish. A QR Code was used to administer the online survey and the link was advertised in the local newspaper, shared widely through email accounts, specifically local schools and Humans Service Council Collaboratives (HSCC) and social media accounts. The face-to-face survey was administered at various locations throughout Alcona, Alpena, Montmorency and Presque Isle Counties. Participants completed the survey on site. Site-specific locations for data collection were determined in collaboration with MiThrive to maximize access for researchers to reach the target population. The survey was open from August 12, 2024 through October 6, 2024. To encourage participation, a $50 gift card was provided by MiThrive, with one winner randomly selected from each county. There were 605 responses from our four counties.

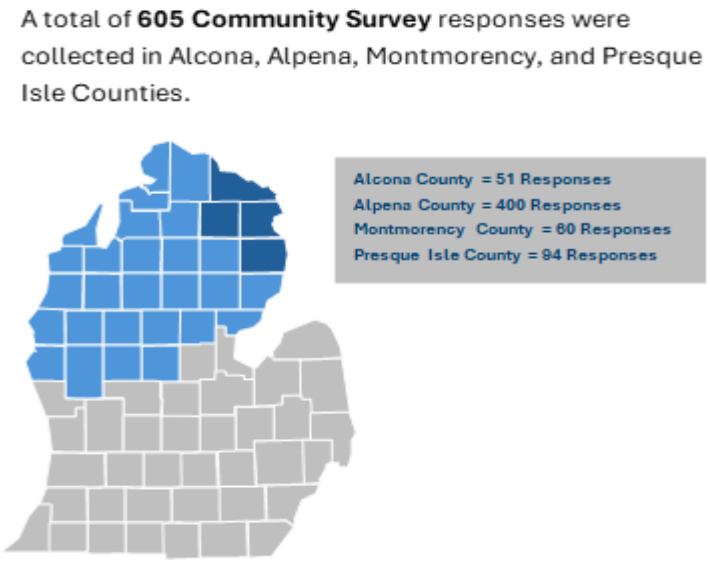


Figure 6: Community Survey Responses

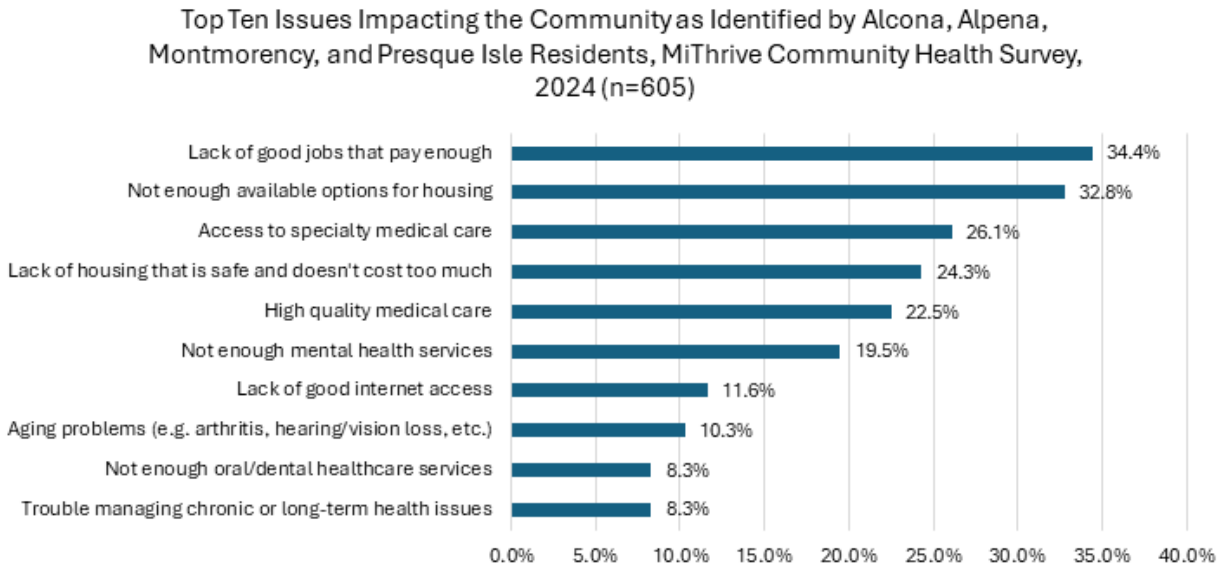


Table 1: Top Ten Issues Impacting the Community per the MiThrive Community Health Survey

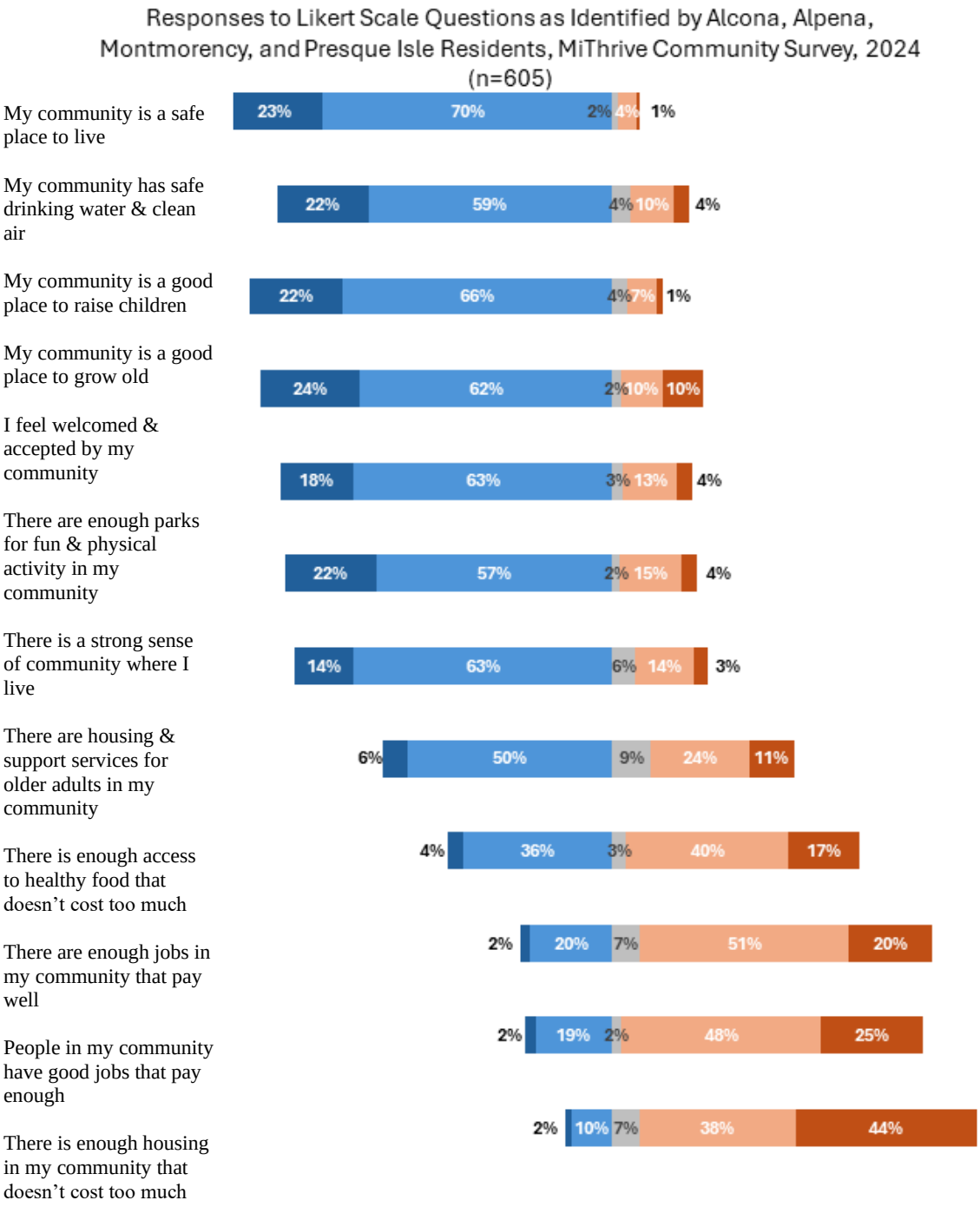


Table 2: Responses to Likert Scale Questions per the MiThrive Community Survey

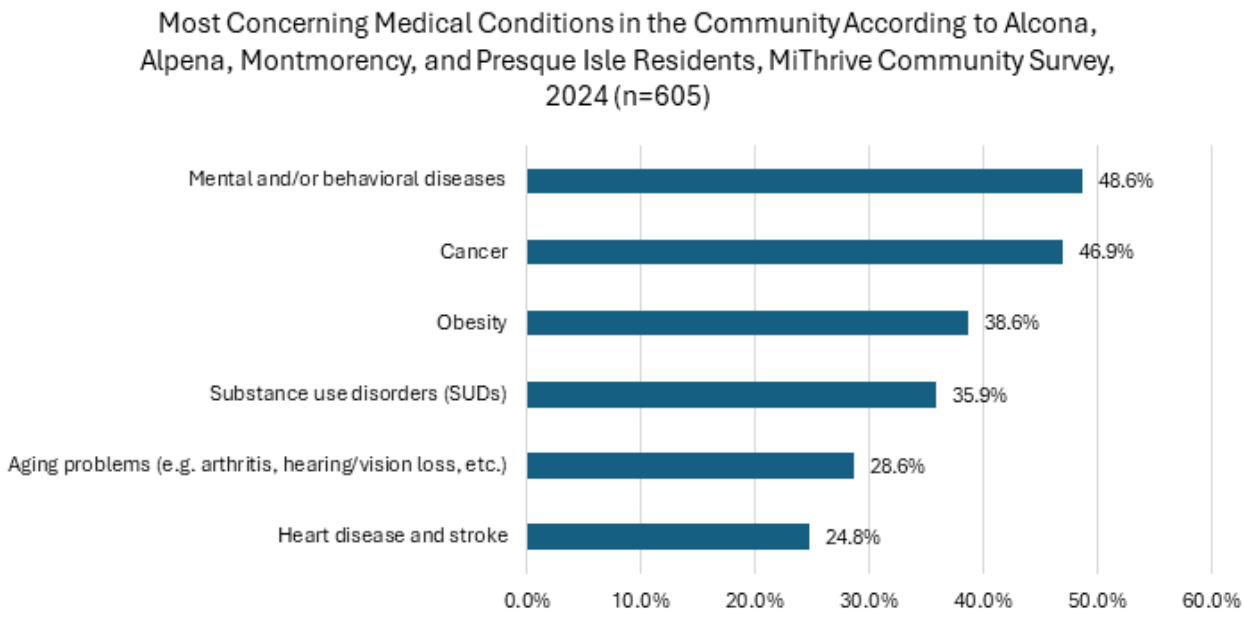


Table 3: Most Concerning Medical Conditions in the Community per MiThrive Community Survey

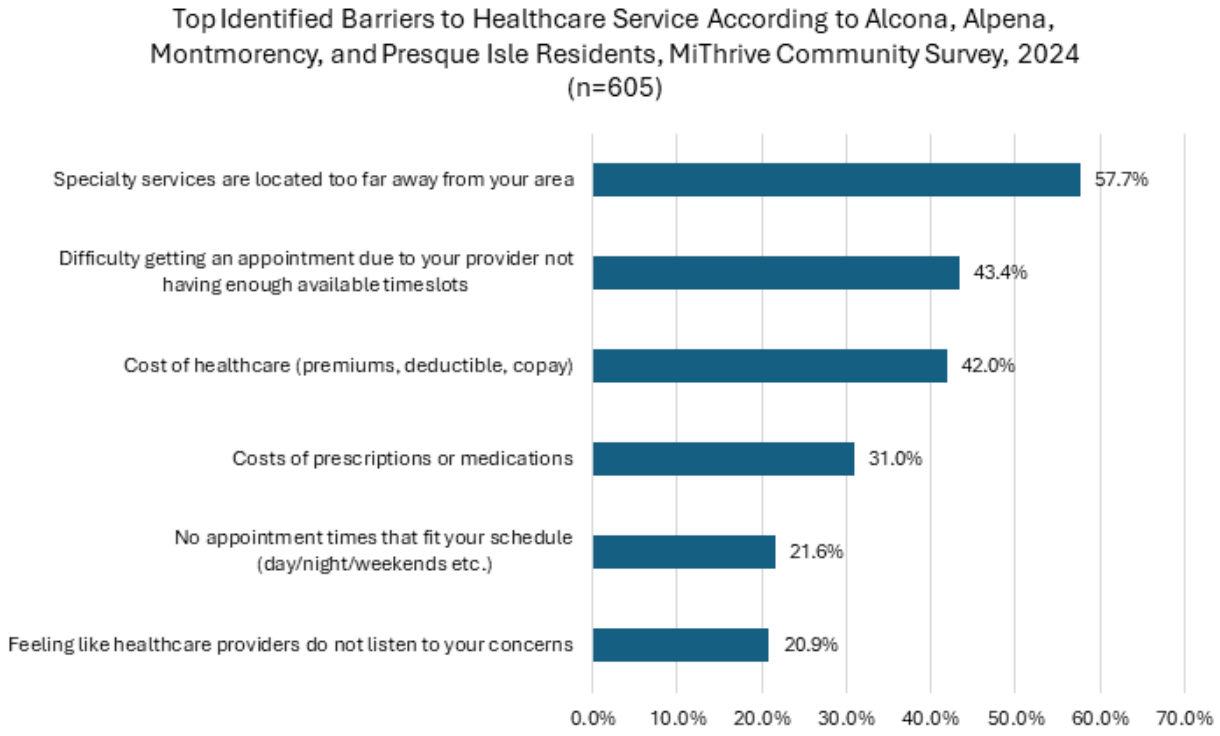


Table 4: Top Identified Barriers to Healthcare Service per MiThrive Community Survey

Community Partner Assessment (CPA)

The Community Partner Assessment focuses on organizations that contribute to well-being. The CPA answers the following questions:

- What are the components, activities, competencies, and capacities in the regional system?
- How are services being provided to residents?

The assessment was designed to enhance communication between organizations and the community by bringing together a diverse range of partners. It aimed to explore connections within the community system, highlight strengths, and identify opportunities for improvement. The Community Partner Assessment included two key components: the Community Partner Assessment Survey and two virtual Community Partner Assessment Discussions events.

Community Partner Survey

From May 6, 2024 to June 3, 2024, 21 community partners from various organizations and sectors across Alcona, Alpena, Montmorency, and Presque Isle counties participated in a community partner survey to assess the system's capacity.

Additionally, survey participants were then invited to attend one of two virtual facilitated discussions, held on June 27, 2024 and July 10, 2024, allowing community partners to identify system strengths and areas for improvement collectively.

Community Context Assessment (CCA):

The Community Context Assessment aims to answer the five following questions:

- What strengths and resources does the community have that support health and well-being?
- What current and historical forces of change locally, regionally, and globally shape political, economic, and social conditions for community members?
- What physical and cultural assets are in the built environment? How do those vary by neighborhood?
- What is the community doing to improve health outcomes?
- What solutions has the community identified to improve community health?

The goal of this assessment is to explore the strengths, assets, lived experiences, and forces of change in the community using qualitative methods.

The MiThrive CCA consists of three parts: asset maps, quotes from residents, and photovoice project. A total of 11 photos came from residents within Alcona, Alpena, Montmorency and Presque Isle counties.

Data Limitations
Community Status Assessment

Secondary Data

- Secondary indicator scores were used to condense secondary data into single scores that give data on the severity of the indicator value and allow for easier comparisons between jurisdictions. Since secondary indicator scores are based on these comparisons, low scores can result even for very serious issues, if there are similarly high rates across the state and/or US.
- Some data is missing for some counties - as a result, the "regional average," when included, may not include all counties in the region. Additionally, some counties share data points, for example, in the Michigan Profile for Healthy Youth, data from Crawford, Ogemaw, Oscoda, and Roscommon counties is aggregated therefore each of these counties will have the same value in the MiThrive dataset.
- Data points pulled from secondary datasets from organizations across the country do present an issue, as data is being updated and released constantly throughout the year. As such, some data presented may not be the most up to date at the time of publication, although it was the most recent data available at the time of writing. Updated secondary data can be viewed on the online MiThrive data platform, if necessary.
- Secondary data tells only part of the story. Viewing all the assessments holistically is therefore necessary.

Community Survey and Provider Survey

- A target number of completed Community Survey responses was set for each county based on the county population size. While some counties reached this target, many did not. This results in data that, while indicative of the community, may not be representative of the entire community or may underrepresent some sub-populations. Survey responses are presented as gathered and were not weighted.
- While the Community Survey was offered online and in-person, most surveys were collected digitally. This may skew data around points involving access to care or broadband concerns.
- Partial or Incomplete responses were removed from the Northern Michigan Community Health Survey. Responses were also reviewed to remove suspect or fraudulent responses from the overall data set.
- Outreach and promotion for the Community Health Survey was driven by existing MiThrive partners which influenced the distribution of survey responses across provider entities.
- The community survey was conducted during the 2024 Presidential Election cycle. As such, the survey was made to compete with many other surveys being conducted at the time, likely leading to resident survey burn-out.

Community Partner Assessment

- Data for the Community Partner Assessment was self-reported by representatives from partner agencies, each with different experiences and perspectives. Based on these differences, it can be assumed that there is some subjectivity inherent in these responses. Even with this subjective bias, data from this assessment should be considered representative of these organizations.

- Facilitated discussions during regional events yielded worthwhile insights but were limited by time constraints for conversation. Additionally, some key stakeholders were missing from these discussions due to scheduling conflicts or other competing responsibilities.
- Community Partner Assessment data reveals insights into the capacities and goals of local community organizations but should not be removed from the context of the other assessments which share information about the health of residents and their perspectives.

Phase 3: Continuously Improving the Community

In Phase 3, community partners and organizations were invited to engage in the prioritization process. By analyzing the data collected from each assessment and incorporating community perspectives, key issues are able to be identified and then prioritized.

Identifying Key Issues

For the first step, the focus was placed on primary data from the community survey, as it contains data helpful for identifying the thoughts and opinions of residents. This data was then organized into themes. Categories for themes were initially pulled from MAPP 2.0 materials, then more themes were added as needed to describe the data collected. This was centered around two of the MiThrive Community Survey questions:

1. What is needed for a community to be thriving?
2. What needs to be fixed in your community?

For each theme, only the top response associated with each theme in each question was used as a reference point. These reference points were then used to graph each theme onto a plane, with the "factors" response used as the "x" variable and the "issues" response used as the "y" variable. Themes on this graph were determined to be key issues if they had at least a 33 percent response rate for either the "x" or "y" variable, or if they had a combined response rate above 33 percent. These identified key issues were then presented to MiThrive partner organizations for prioritization.

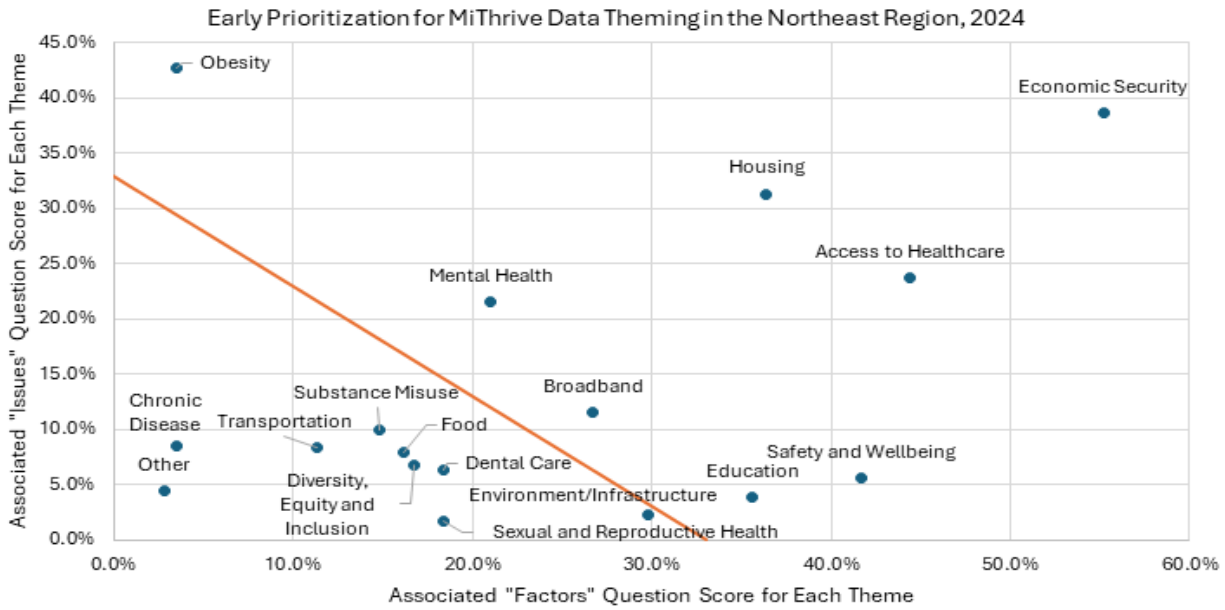


Table 5: Prioritization for MiThrive Data Theming

This graph Illustrates all the themes considered for prioritization. Each data point is comprised of the top associated response to the question asking residents to identify the “top factors for a thriving community” (the “x” variable) and “top issues impacting the community” (the “y” variable). The orange line indicates the cutoff for inclusion in priority setting events. All themes to the right of the line were included.

The eight key issues for consideration in the Northeast region included:

- Access to Healthcare
- Mental Health
- Economic Security
- Obesity
- Housing
- Safety and Wellbeing
- Education
- Broadband

Prioritization Process

Once the themes were identified from the collected data, community health needs were determined and prioritized for Alcona, Alpena, Montmorency and Presque Isle counties by reviewing qualitative and quantitative data. Once these health needs were identified, the Community Health team themed and prioritizing the data points using the Hanlon Method.

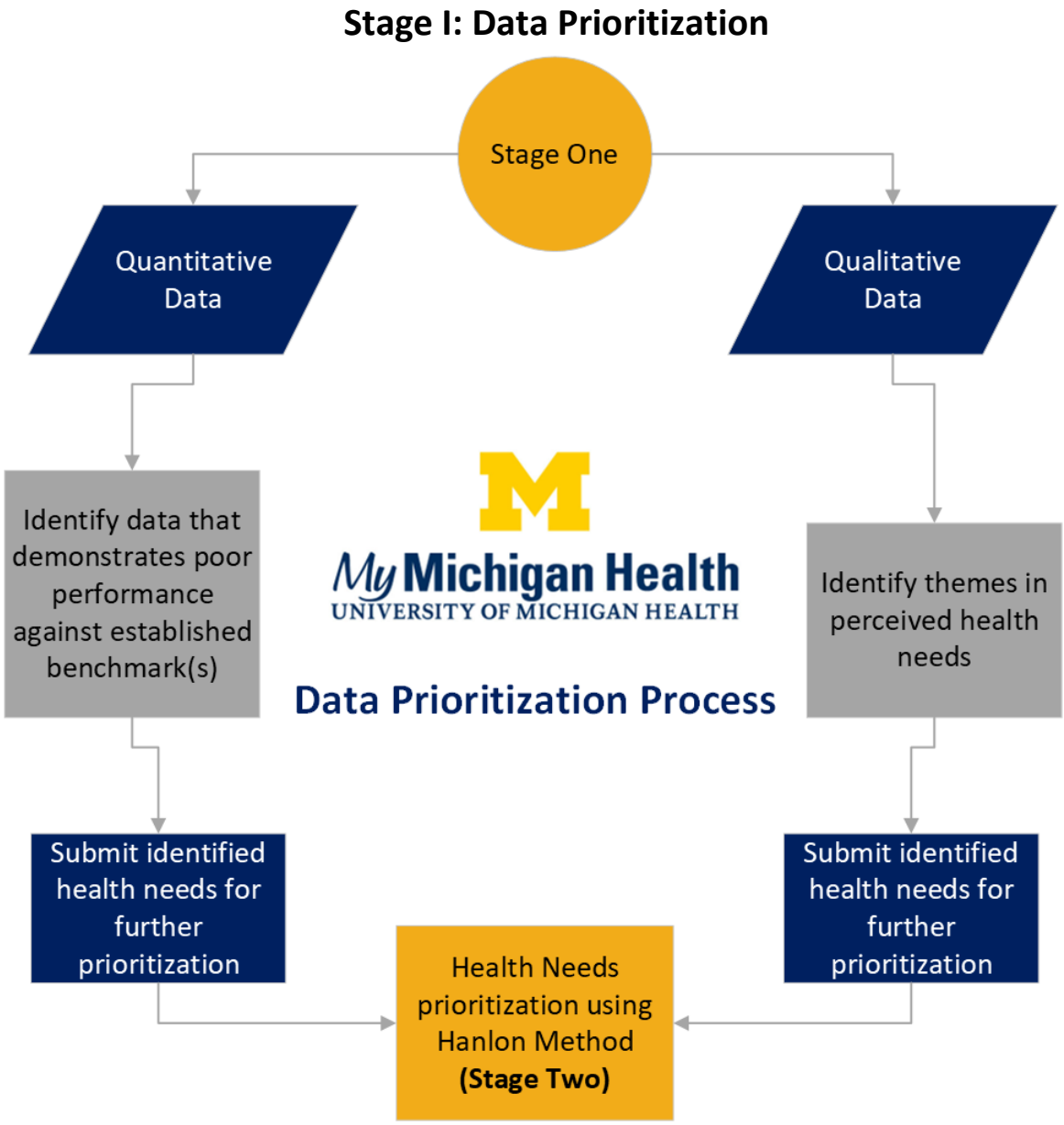


Figure 7: Data Prioritization graphic

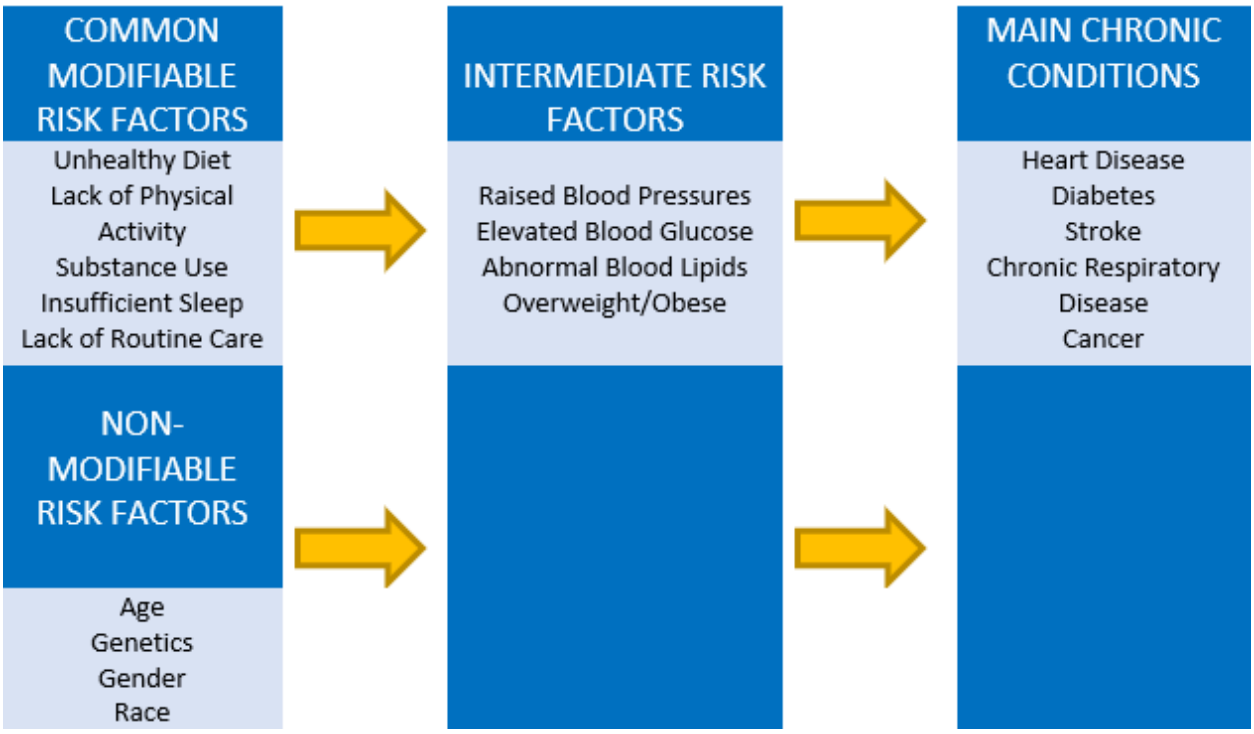


Figure 8: Prioritization Risk Factors of Chronic Conditions

Stage II: Hanlon Method of Prioritization

Rating	Burden of Illness (% of population with health problem)	Burden of Death (seriousness of health problem)	Effectiveness of Interventions
9 or 10	>25%	Very Serious	<5% Effective
7 or 8	10% - 24.9%	Relatively Serious	5 – 19.99% Effective
5 or 6	1% - 9.9%	Serious	20 – 39.99% Effective
3 or 4	0.1% - 0.9%	Moderately Serious	40 – 59.99% Effective
1 or 2	0.01% - 0.09%	Relatively Not Serious	60 – 79.99% Effective
0	<0.01%	Not Serious	80 – 100% Effective

Priority Score Calculation Formula

$$D = [A+(2 \times B)] \times C$$

Figure 9: Hanlon Method of Prioritization

Hanlon Method Results

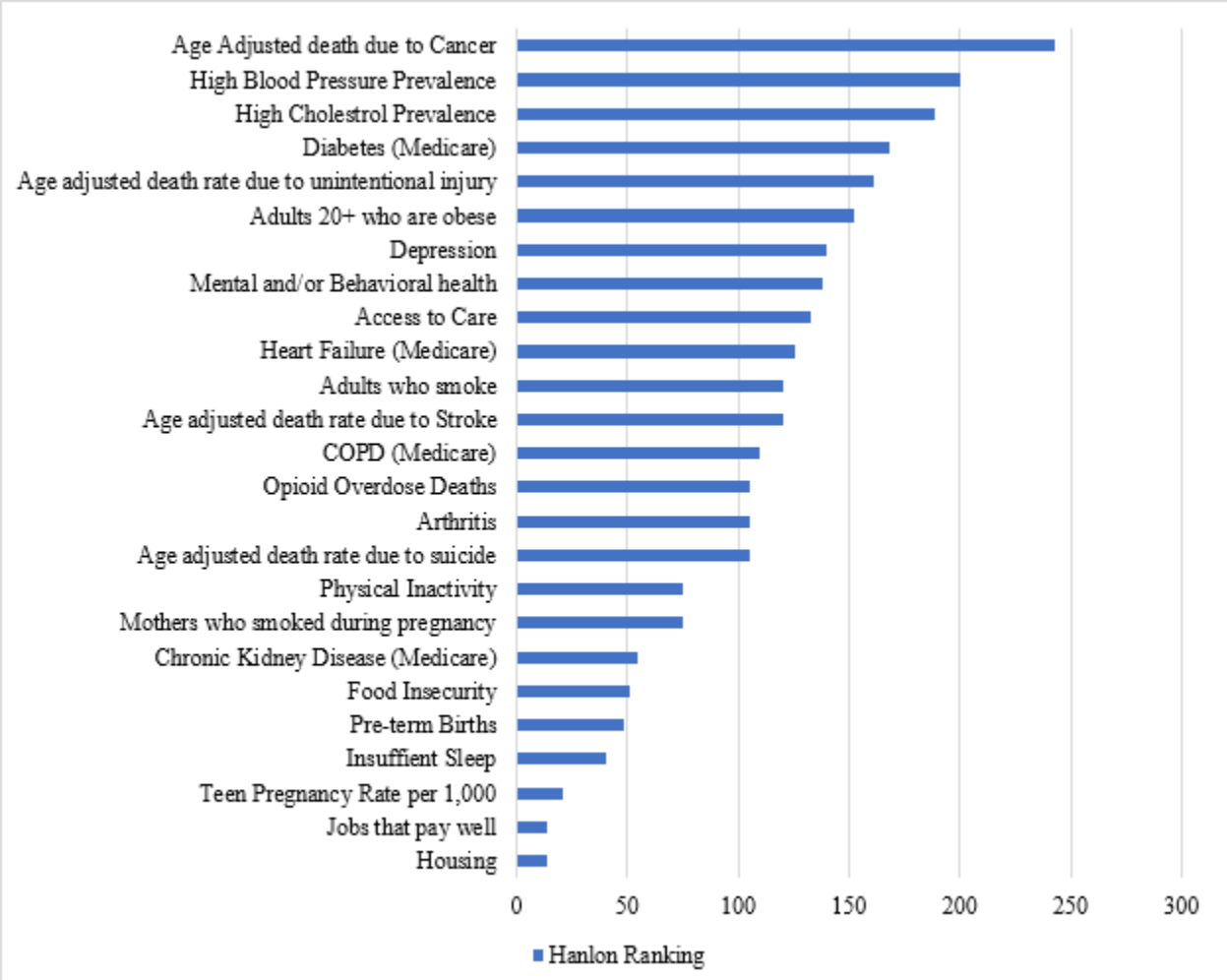


Table 6: Hanlon Method Results

Further prioritization continues in order to develop the final focus areas. Advisory committees work together to narrow down focus areas based on modifiable risk factors that health needs have in common. Alpena and surrounding county's high rates of obesity, increasing rate of diabetes mortality, heart disease and cancer incidence rates coupled with decreasing rates of cancer screenings led to chronic disease prevention as an area of focus. These chronic diseases have similar modifiable risk factors that allow us to develop strategies to impact many chronic diseases together. Similarly, increasing rates of suicide and substance use disorder, fall within the umbrella of behavioral health with similar risk factors in youth assets and mental health needs. Additionally, addressing access to care is critical for reducing disparities and promoting equity in health, especially in the rural communities we serve. Final areas of focus were determined to be Chronic Disease Prevention, Access to Care and Behavioral Health.

Demographics

The MyMichigan Alpena service area is comprised of four counties: Alcona, Alpena, Montmorency and Presque Isle. The aging population is continuing to trend upward. The racial and ethnic diversity remains less diverse with 95.4 percent of the service area population being white, non-Hispanic compared to 73.7 percent in Michigan. In addition, Michigan overall has significantly higher composition of Black/African American and Hispanic populations.

Demographics Summary						
		Alcona	Alpena	Montmorency	Presque Isle	Michigan
	Total Population	10,489	28,904	9,678	13,285	10,037,261
	Rural	92.9%	46.6%	100%	100%	26.5%
Age	Under Age 18	12.8%	18.8%	15.6%	15.0%	21.0%
	Over Age 65	37.0%	25.6%	33.3%	34.8%	19.2%
Gender	Female	49.8%	50.3%	48.6%	49.6%	50.4%
	Male	50.2%	49.7%	51.4%	50.4%	49.6%
Race	Black or African American	0.8%	0.7%	0.6%	0.6%	13.7%
	Asian or Asian American	0.5%	0.6%	0.4%	0.7%	3.6%
	American Indian or Alaska Native	0.9%	0.8%	0.9%	1.0%	0.8%
	Native Hawaiian or other Pacific Islander	0.1%	0.0%	0.0%	0.0%	0.0%
	White or Caucasian	94.5%	97.7%	94.5%	94.8%	73.7%
	Hispanic	1.7%	1.7%	1.9%	1.8%	6.0%

Table 7: Demographics

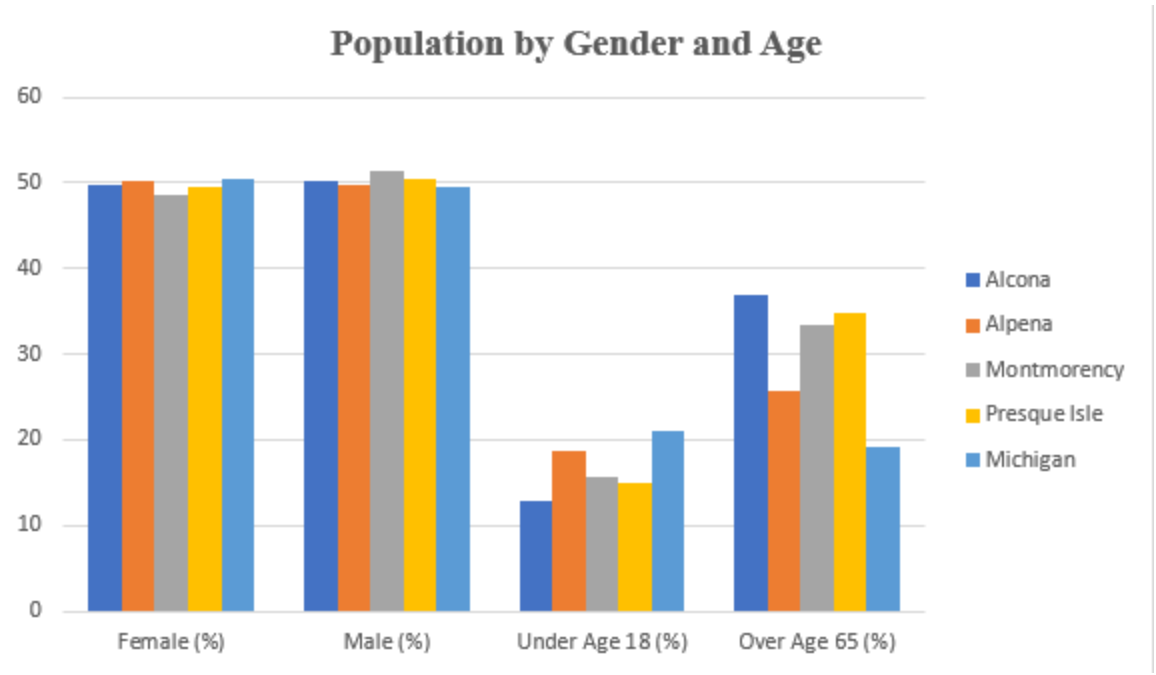


Table 8: Gender and Age

The population in MyMichigan Medical Center Alpena's service area is aged when compared to Michigan population and has seen an uptick in community members aged 65 or older. This number continues to increase every year and supersedes the number of community members under age 18. This shift in population results in higher rates of chronic disease and increased need for health care services, especially in the rural communities we serve.

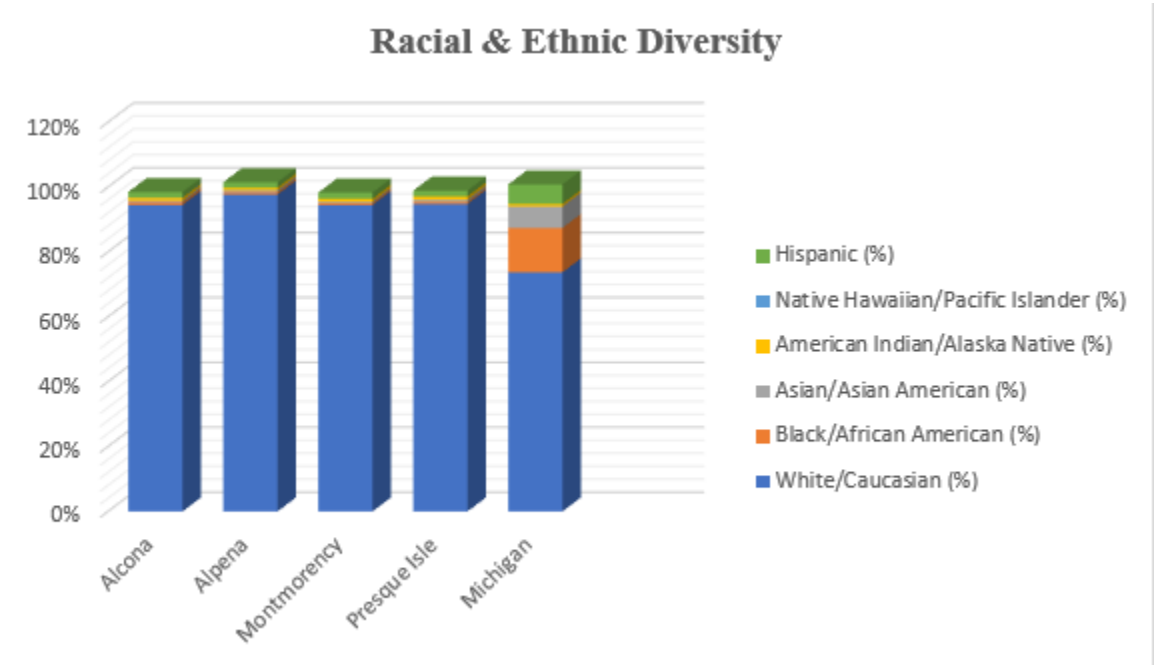


Table 9: Racial & Ethnic Diversity

Social Determinants of Health

The Social Determinants of Health (SDOH) are classified as conditions in the environment in which people are born, work, live, play, worship that affect their health, functioning and quality of life outcomes and risks. SDOH can be grouped into five domains which include economic stability, education access and quality, health care access and quality, neighborhood and built environment and social and community context.

Economic Stability

According to Healthy People 2030, one in ten people living in the United States are in poverty, and many others are not able to secure health care, housing or healthy foods. Economic stability focuses on poverty, employment, housing, food security and ALICE (Asset Limited, Income Constrained, yet Employed) populations. ALICE represents individuals and families who work but are unable to meet their basic needs (food, housing, health care and transportation).

Figure 10: Social Determinants of Health

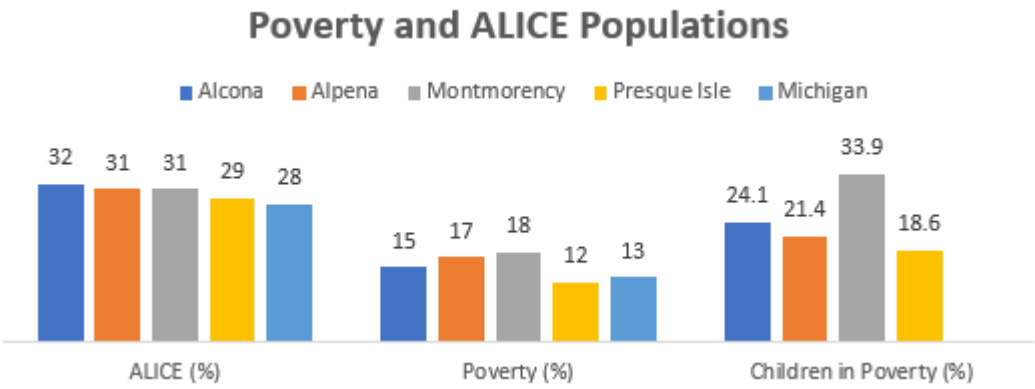


Table 10: Poverty and ALICE Populations

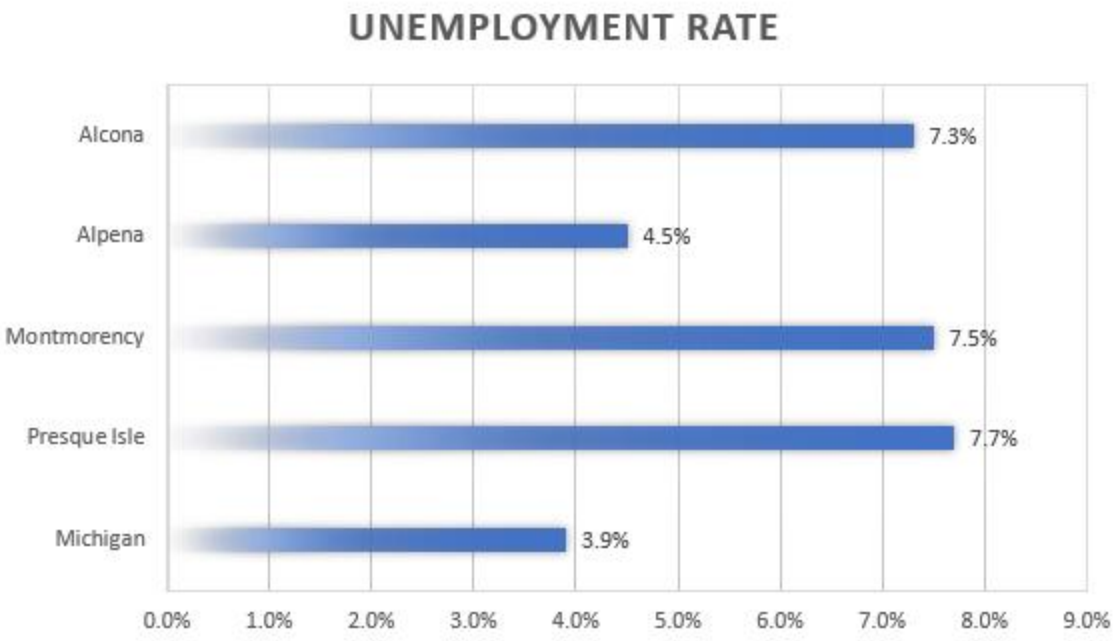


Table 11: Unemployment Rate

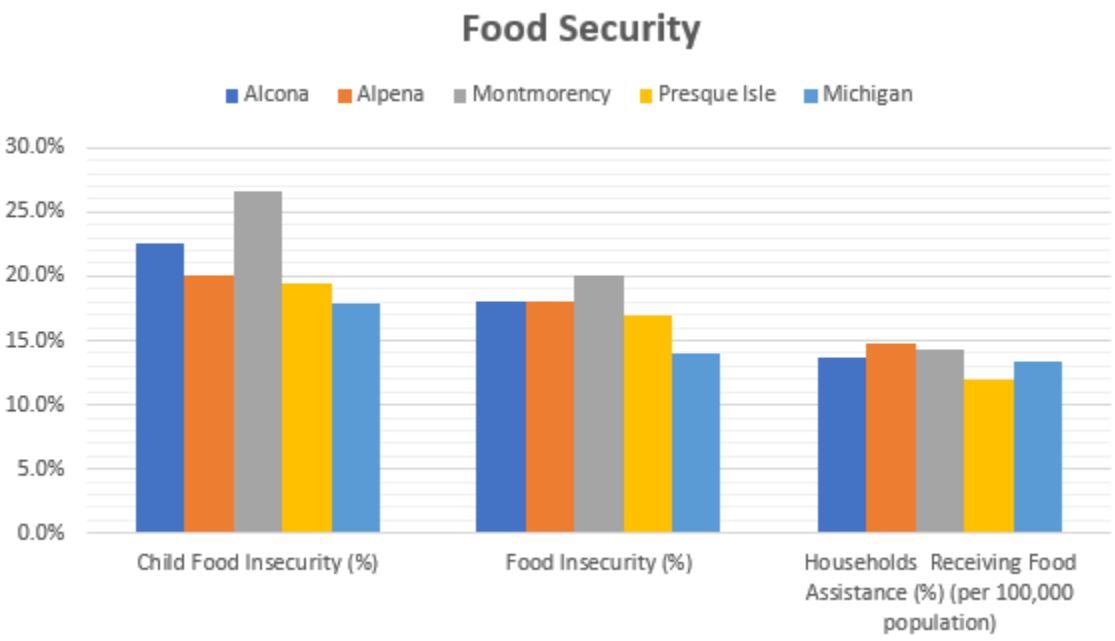


Table 12: Food Security

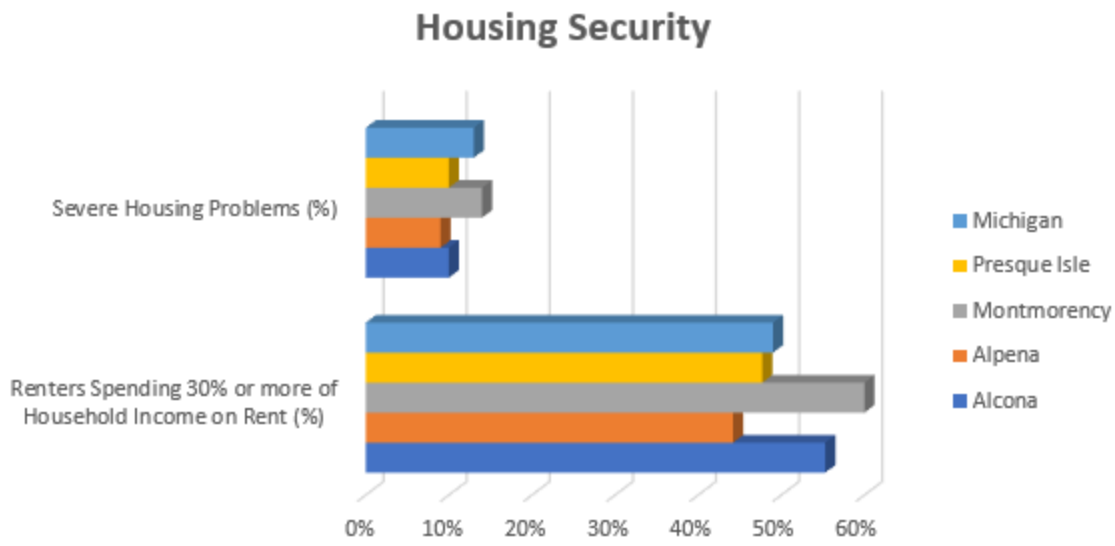


Table 13: Housing Security

Social and Community Context

People's ability to develop and maintain relationships with those around them can have a major impact on health and well-being. Those with positive interactions tend to have better health and safety outcomes than those that have negative interactions. This section of Social Determinants of Health (SDOH) focuses on social and community support, the reduction of anxiety and depression, health literacy, resource referrals and the use of technology to communicate with health care providers.

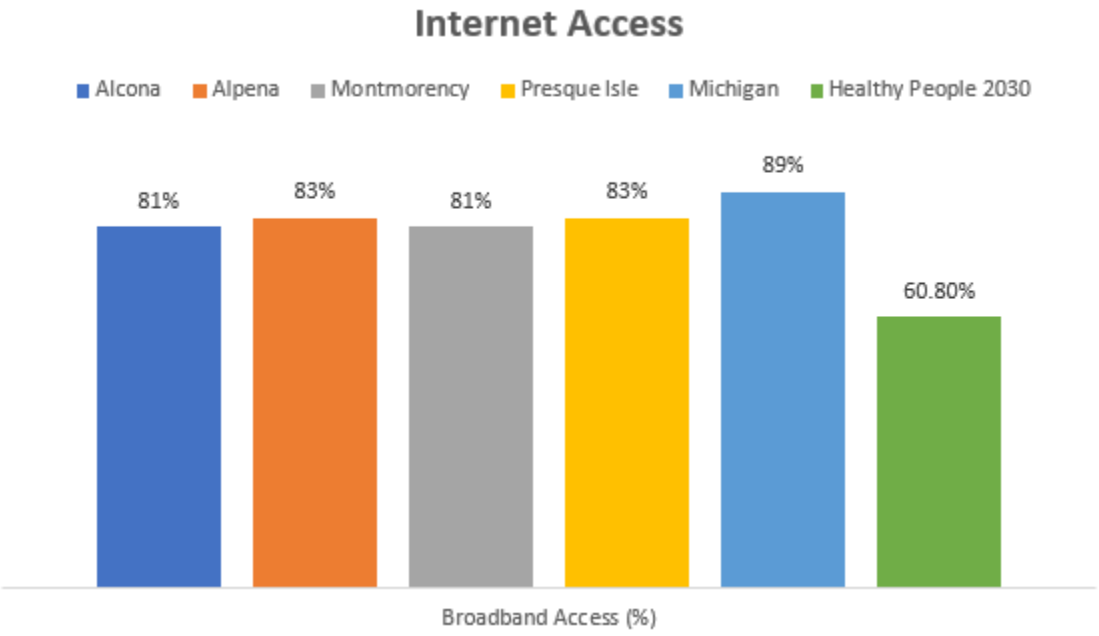


Table 14: Internet Access

Internet access measures the percent of households in the service area that have access to broadband internet. The MyMichigan Medical Center Alpena service area exceeds the Healthy People 2030 benchmark but remains lower than the Michigan average.

Referral services are available through 211 in all counties served. The top three referral requests for each county were as follows: **Alcona:** Electric service Payment Assistance, Heating Fuel Payment Assistance, Food; **Alpena**: Electric Service Payment Assistance, Heating Fuel Payment Assistance, Rent Payment Assistance; **Montmorency** Electric Service Payment Assistance, Heating Fuel Payment Assistance, Rent Payment Assistance; **Presque Isle**: Electric Service Payment Assistance, Heating Fuel Payment Assistance, Food.

Education Access and Quality

Research shows that the level, quality and social environment of a person's education can affect health and longevity. SDOH in education focuses on graduation rates, higher education, early childhood education programs and language, literacy and math skills.

Across the MyMichigan Medical Center Alpena service area, education attainment beyond high school is low, with over 54 percent of people in all counties without a college degree.

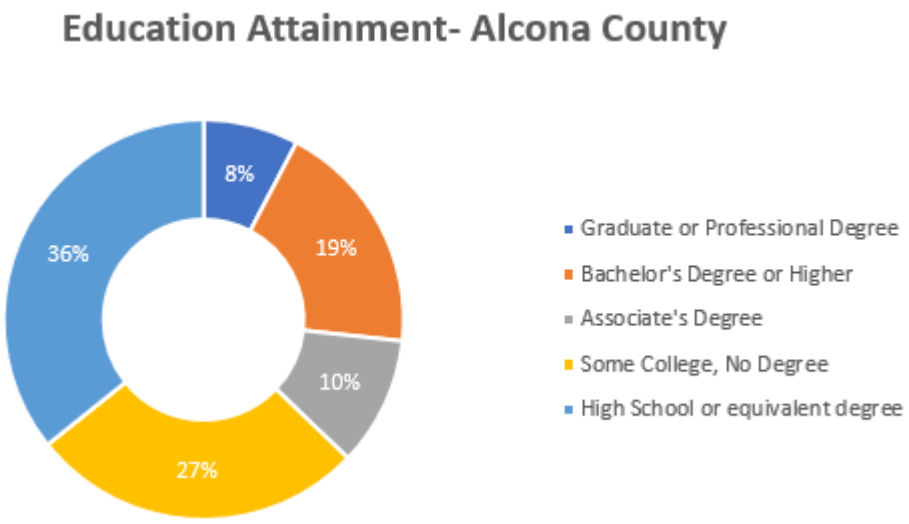


Table 15: Education Attainment- Alcona County

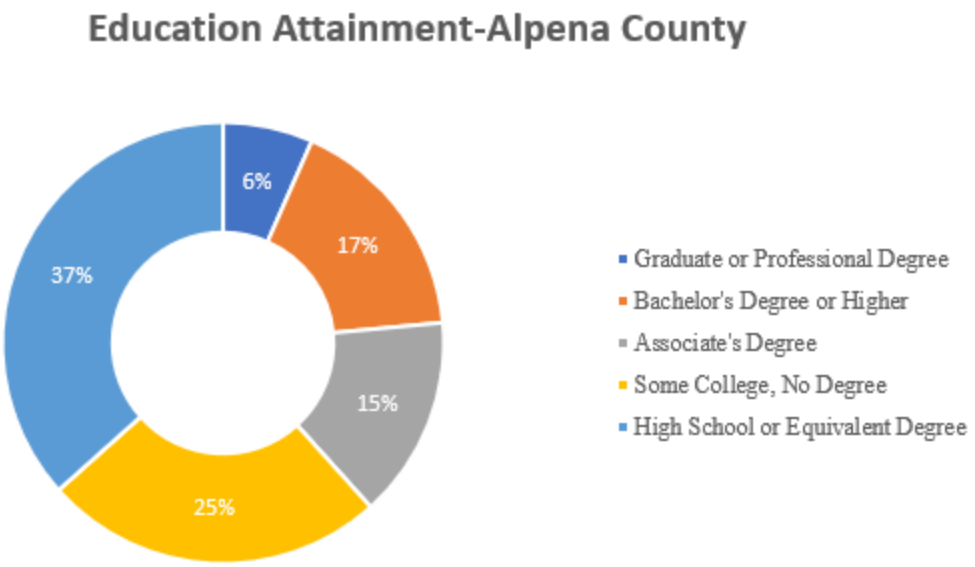


Table 16: Education Attainment - Alpena County

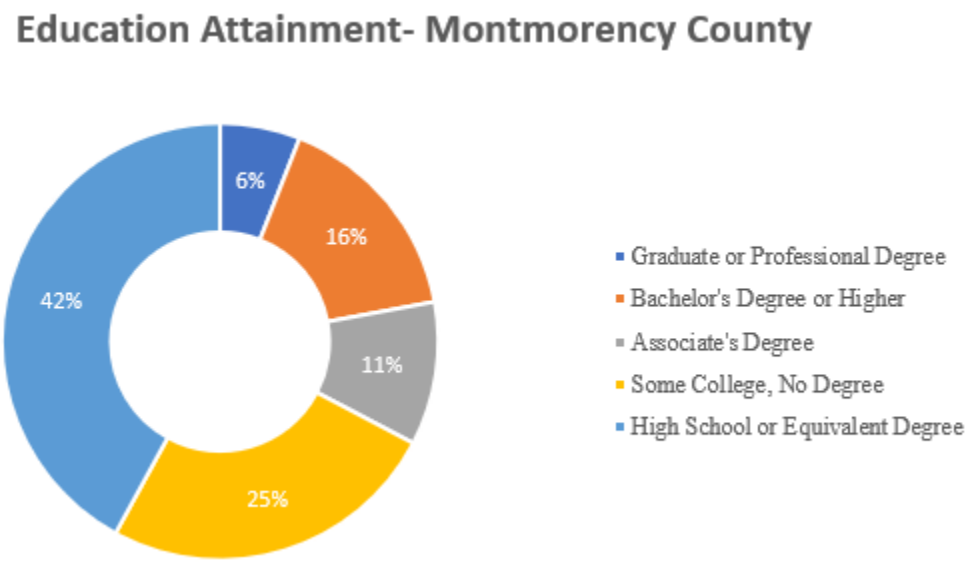


Table 17 Education Attainment- Montmorency County

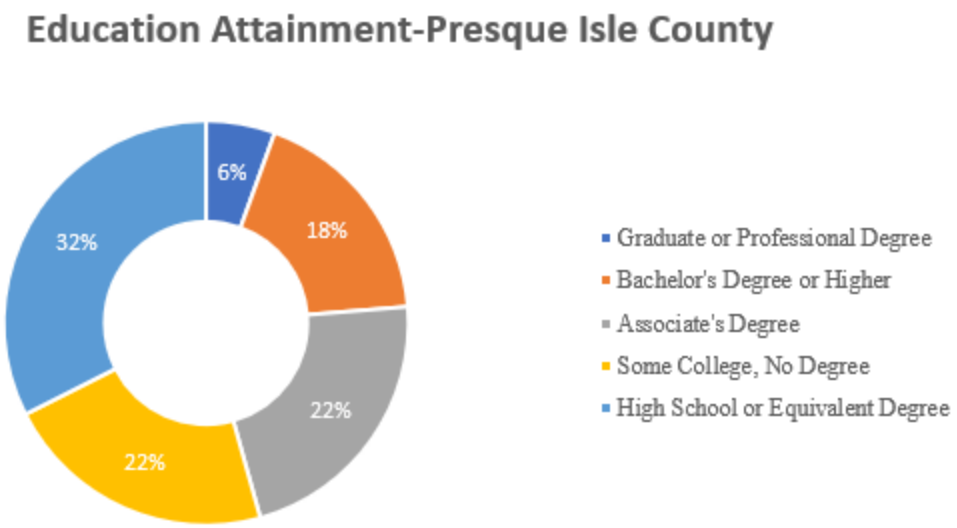


Table 18: Education Attainment- Presque Isle County

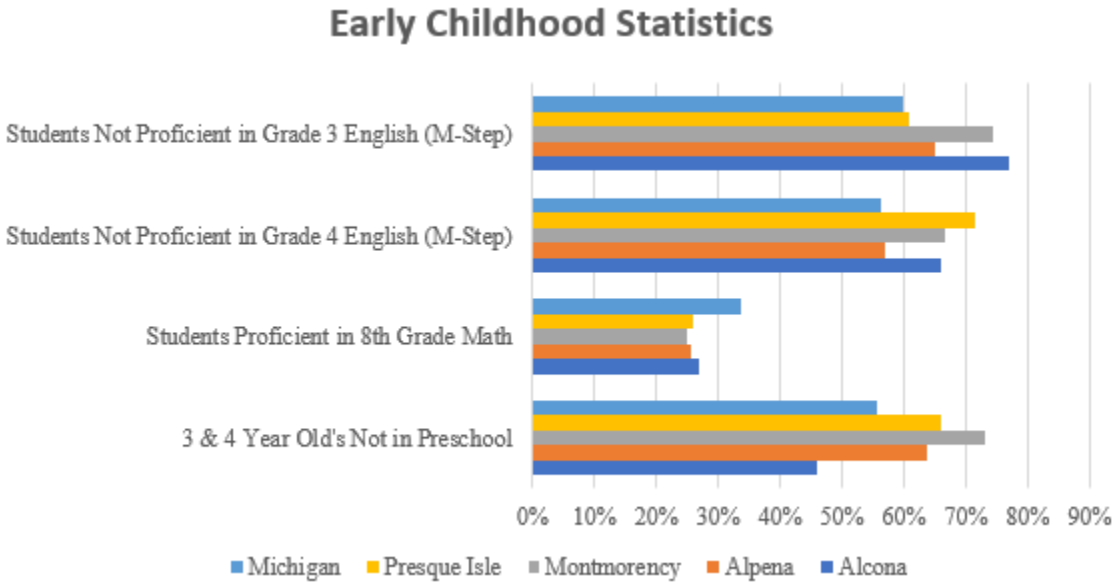


Table 19: Early Childhood Statistics

Early childhood statistics for English proficiency in third and fourth graders fall outside of the Michigan average in all four counties. Three- and four-year-old children not in preschool are also outside the Michigan average in all four counties. Additionally, Presque Isle and Alcona counties are less proficient in Math at the eighth-grade level.

Health Care Access and Quality

Access to health care focuses the community's ability to get the services, screenings and medications needed. Metrics analyzed include patient to provider ratios, vaccination rates, cancer incident rates, chronic conditions and mortality rates. Providers to patient ratios in all counties have improved

minimally across the board but remain less than the Michigan ratios, meaning patient number per provider is higher than Michigan's.

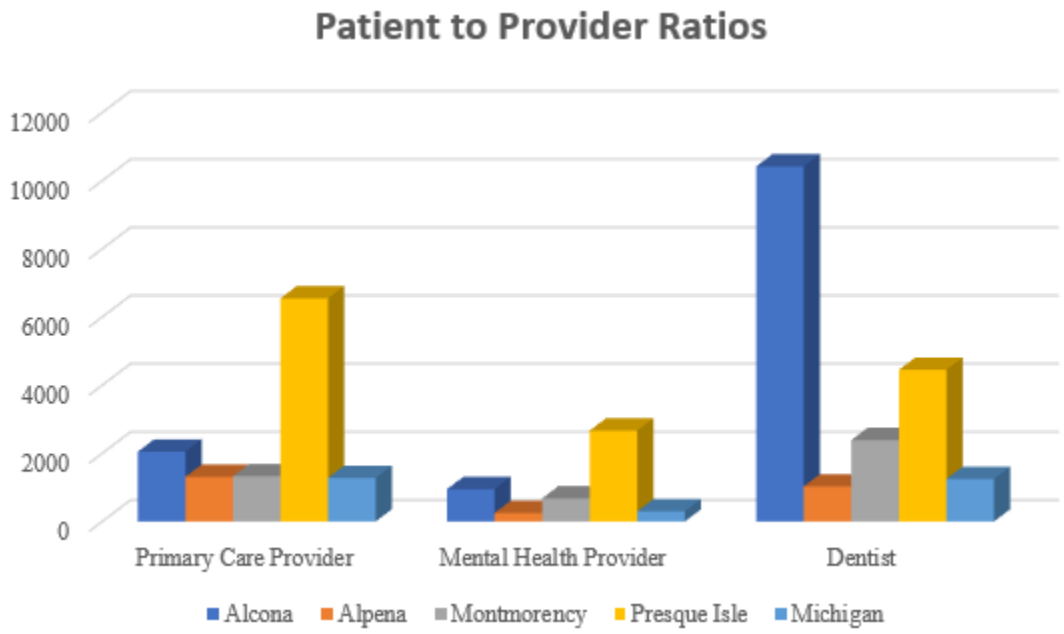


Table 20: Patient to Provider Ratios

The population in the MyMichigan Medical Center Alpena service area consists of over 25 percent of people over the age of sixty-five. All cancer rates in this Medicare population increase in incidence rates compared to the general population. Mortality rates from all cancer diagnosis are greater than Michigan rates in three of the four counties and significantly higher than the Healthy People 2030 goals (122.7).

Chronic Disease

Chronic disease prevention focuses on inhibiting the development or slowing the progression of a disease which limits the negative impact on well-being. Prevention measures include identifying risk factors, action toward modifiable risk factors, screenings and routine follow-up with a provider.

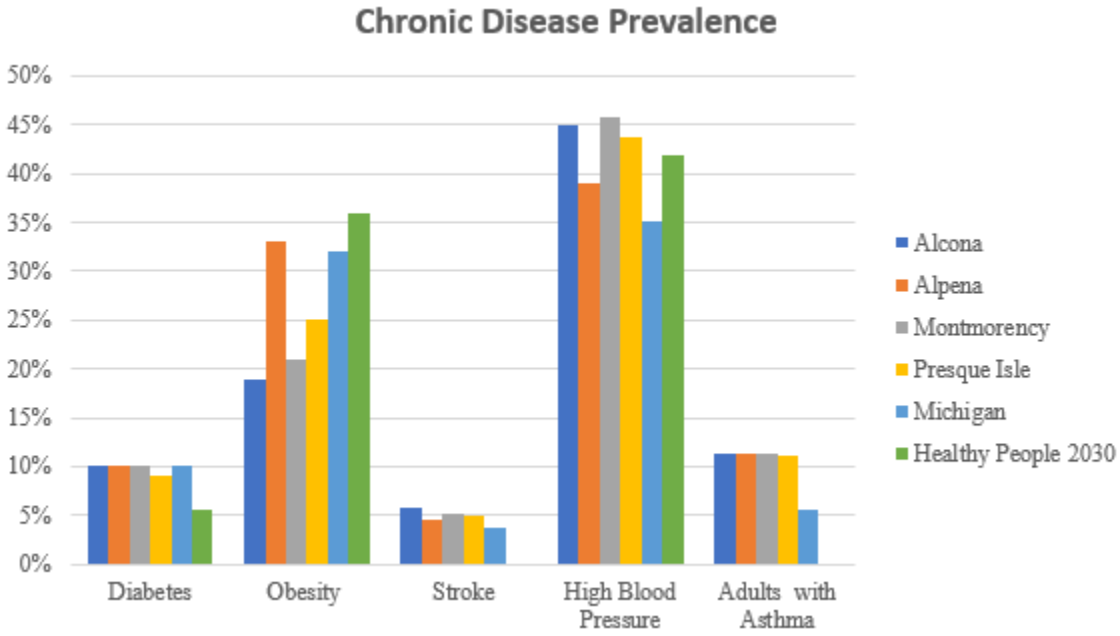


Table 21: Chronic Disease Prevalence

The prevalence of diabetes is equally distributed across the service area at around 10 percent of the population. Although the same as the Michigan prevalence rate, all four counties are nearly double the Healthy People 2030 benchmark. Although obesity is below the Michigan prevalence in most counties and below the benchmark set by Healthy People 2030, obesity still has great impact over chronic conditions. Stroke is also higher than the Michigan average in all four counties. Hypertension (high blood pressure) supersedes the Michigan prevalence significantly as does the adults with asthma.

Neighborhood and Built Environment

The places where people live, work, learn and play can greatly impact health and well-being. Some of the areas this category concentrates on are injury prevention, premature death, internet access, safe drinking water and smoking. Premature death is the measure of years of potential life lost (YPLL) before the age of seventy-five. On average, MyMichigan Medical Center Alpena counties experience 8 percent more YPLL than Michigan.

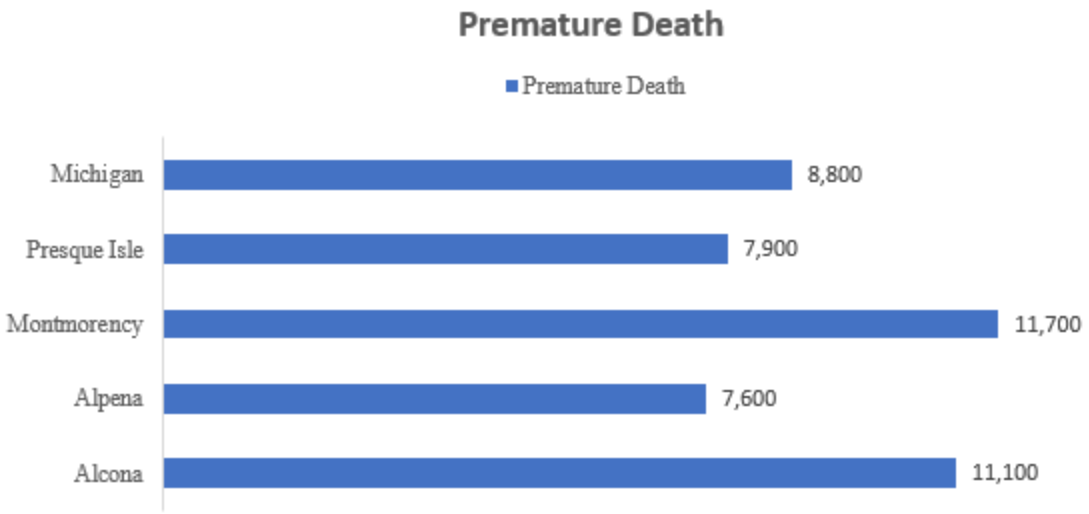


Table 22: Premature Death per 100,000

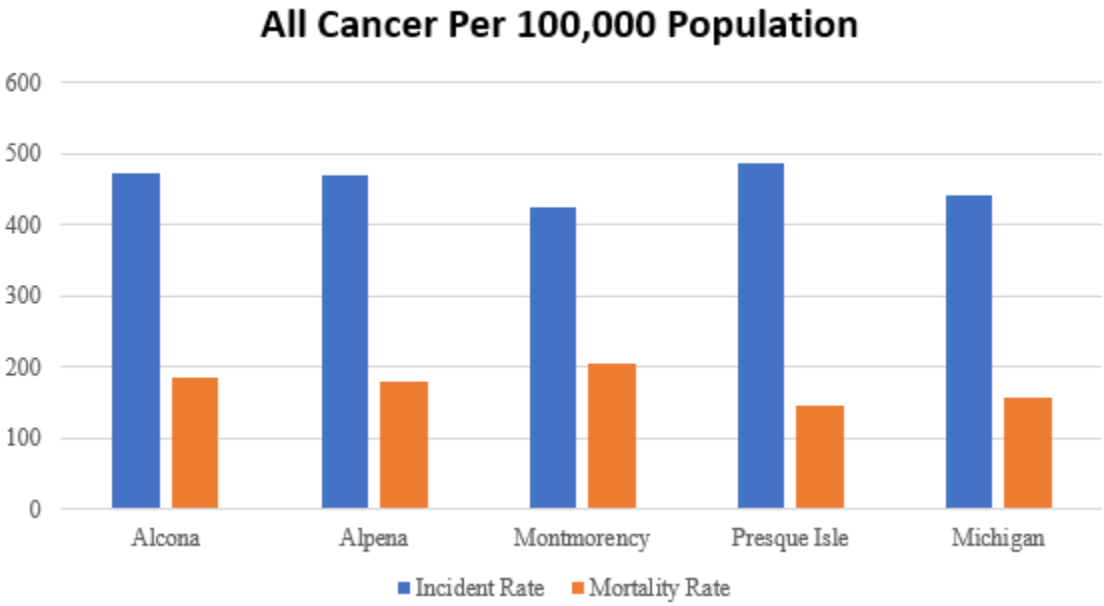


Table 23: All Cancer per 100,000 Population

Colorectal cancer incidence rates are moderately higher than Michigan and mortality rates are moderately above those of Healthy People 2030. Screening for Colorectal Cancer ranges from 67.6 percent to 73.1 percent, which is below the Healthy People 2030 goal of 74.4 percent screened. Lung cancer incidence and mortality rates are exponentially higher in three out of four counties than Healthy People goals and variable when compared to Michigan.

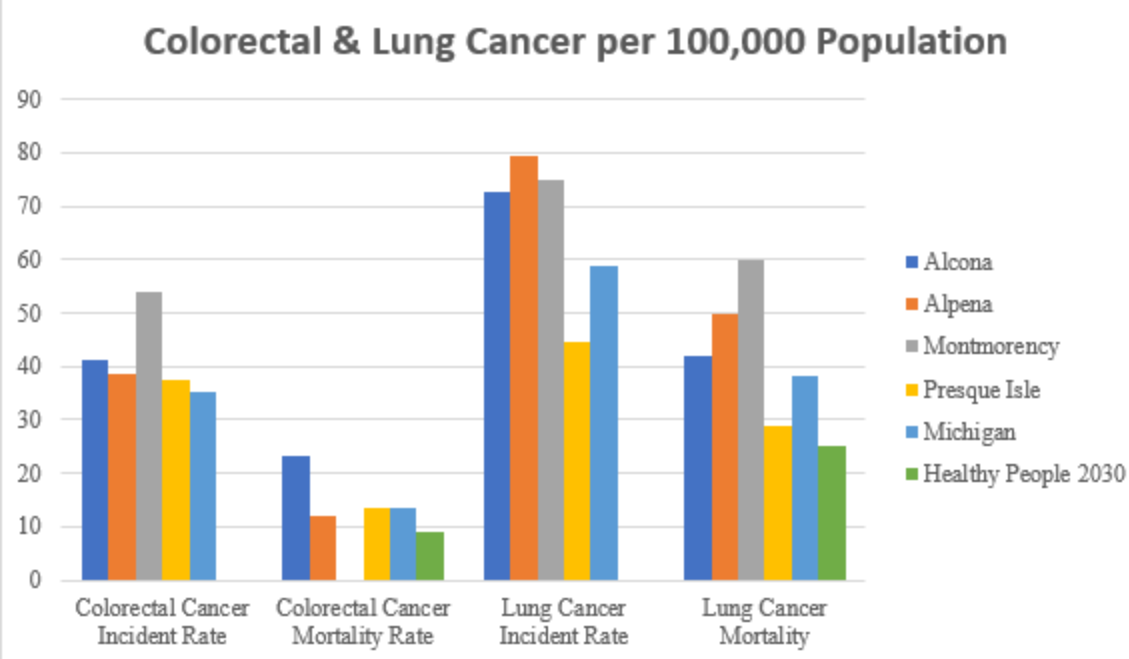


Table 24: Colorectal and Lung Cancer Per 100,000 Population

Deaths from heart disease in the MyMichigan Medical Center Alpena service area are significantly higher than rates in Michigan and significantly higher than Healthy People 2030 goals. Stroke mortality rates are slightly higher in Alpena and Montmorency counties than Michigan rates and overall, moderately higher than Healthy People 2030 goals. Montmorency County continues to trend higher for both mortality rates in heart disease and stroke.

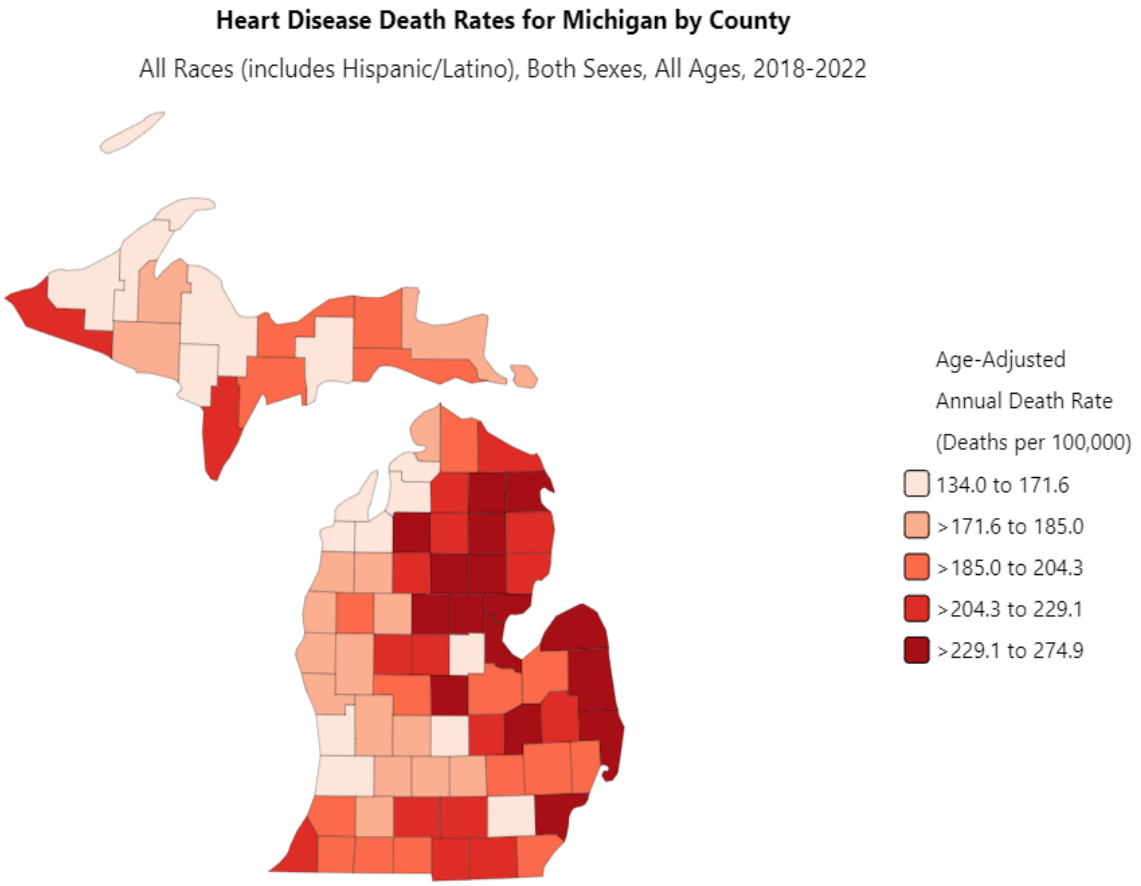


Figure 11: Heart Disease Death Rates for Michigan by County

HD*Pulse*: An Ecosystem of Minority Health and Health Disparities Resources. National Institute on Minority Health and Health Disparities. Created 4/25/2025

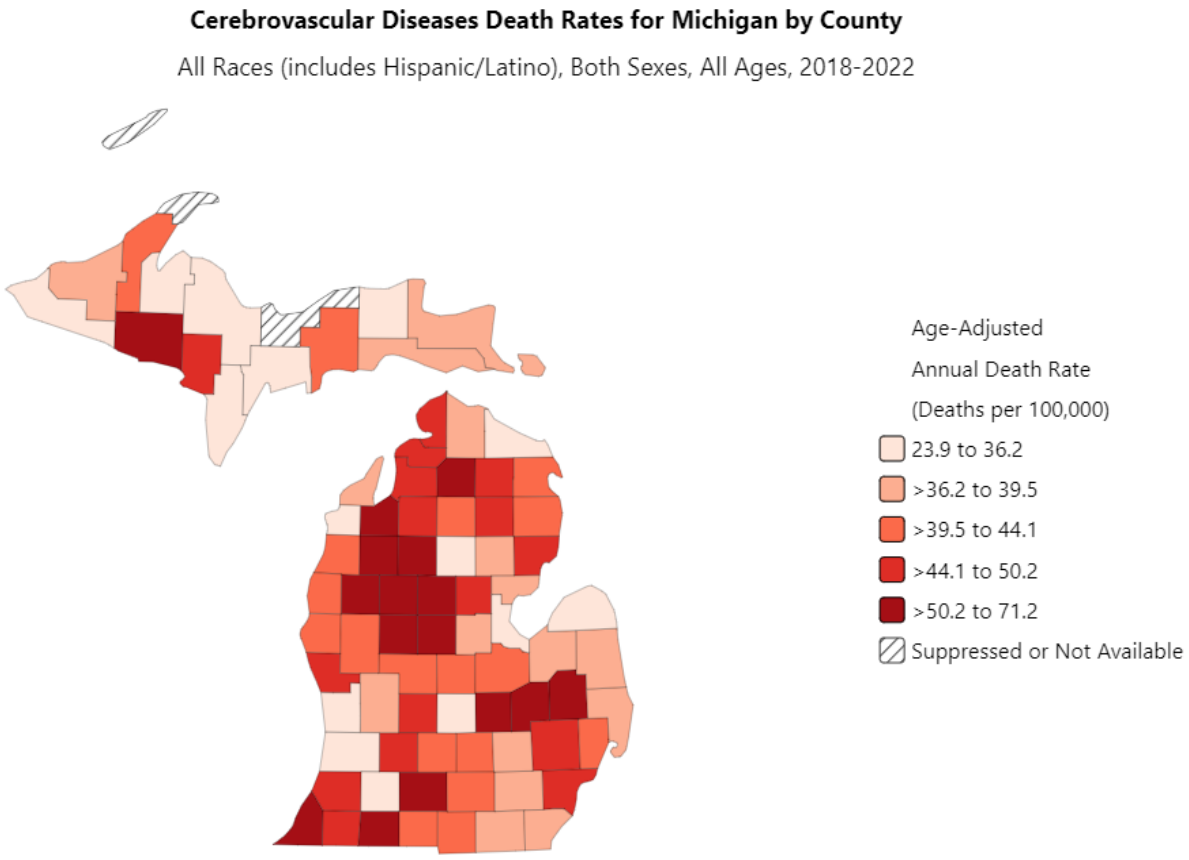


Figure 12: Cerebrovascular Disease Death Rates for Michigan by County

HD*Pulse*: An Ecosystem of Minority Health and Health Disparities Resources. National Institute on Minority Health and Health Disparities.

Mortality rates related to stroke are high when compared to Healthy People 2030 benchmarks. Montmorency County continues to have a rate higher than the benchmark, 50.1 compared to 33.4 and higher than Michigan at 43.2.

Diabetes mortality rates are significantly higher in Alpena and Montmorency than both the Michigan rates and Healthy People 2030 goals.

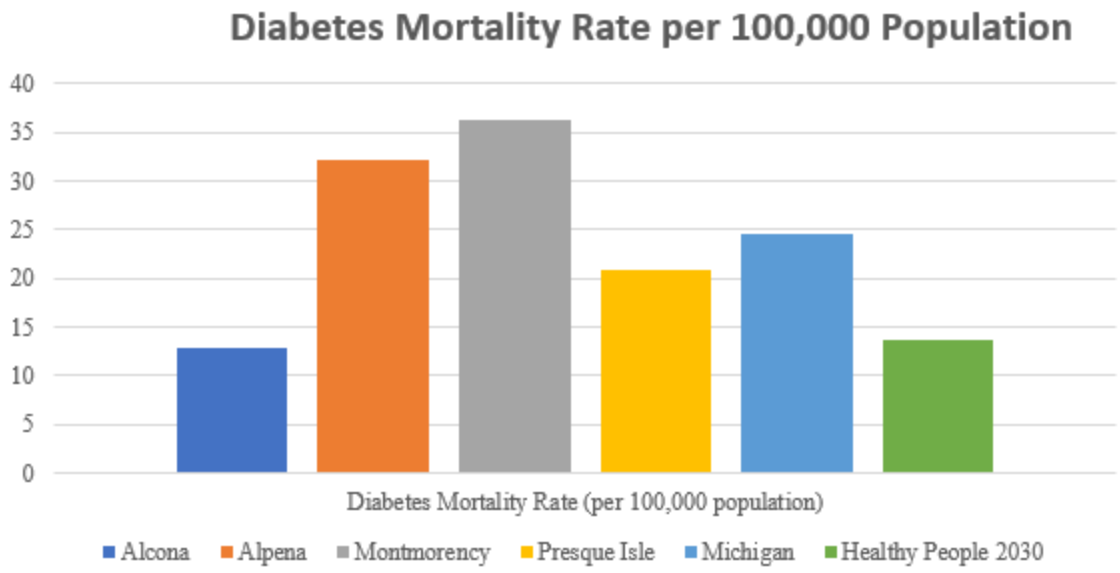


Table 25: Diabetes Mortality Rate per 100,000 Population

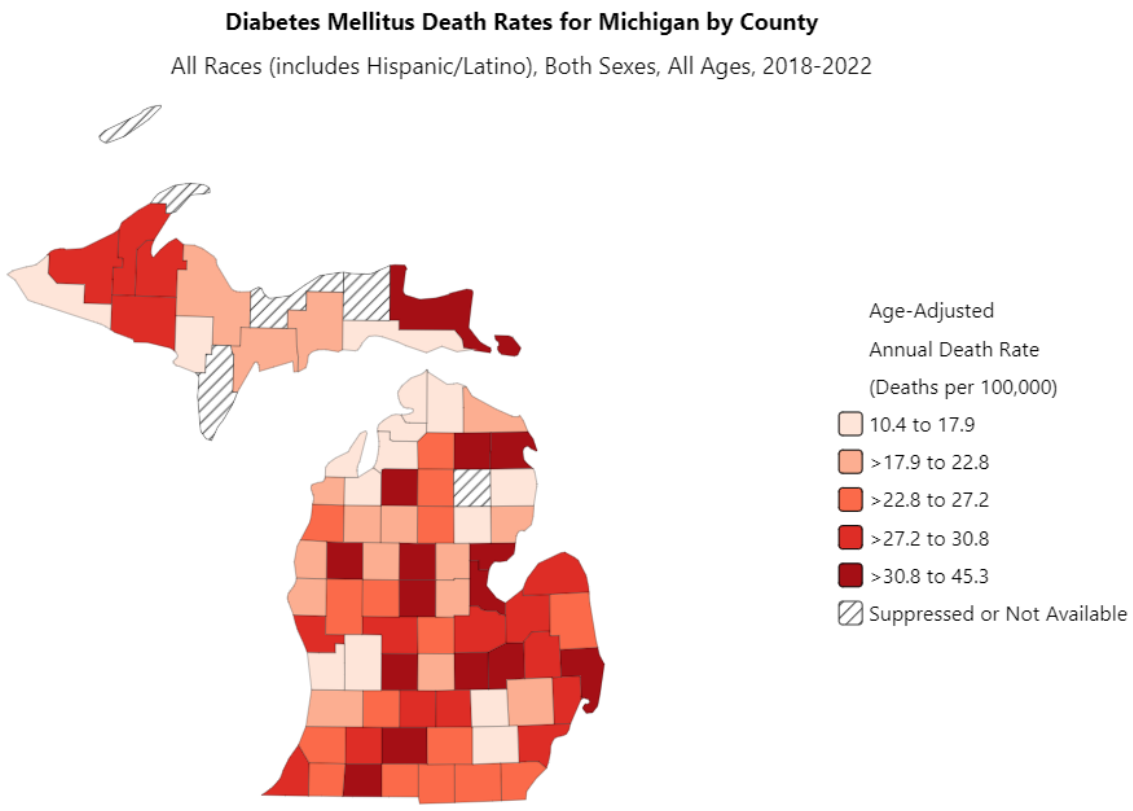


Figure 13: Diabetes Death Rates for Michigan by County

HD*Pulse*: An Ecosystem of Minority Health and Health Disparities Resources. National Institute on Minority Health and Health Disparities.

Prevalence rates for the chronic diseases of diabetes and hypertension are higher than the Healthy People 2030 goals. Diabetes and hypertension are more prevalent in the MyMichigan Medical Center Alpena service area than in Michigan.

Health Behaviors

Physical activity is an essential component to the health and well-being of a person and the community. Access to exercise opportunities for all four counties is below the Michigan average of 86 percent. It is significantly lower in Montmorency County at 16 percent. Additionally, the percent of physical inactivity is two to four percent higher on average than the Michigan rate of 23 percent.

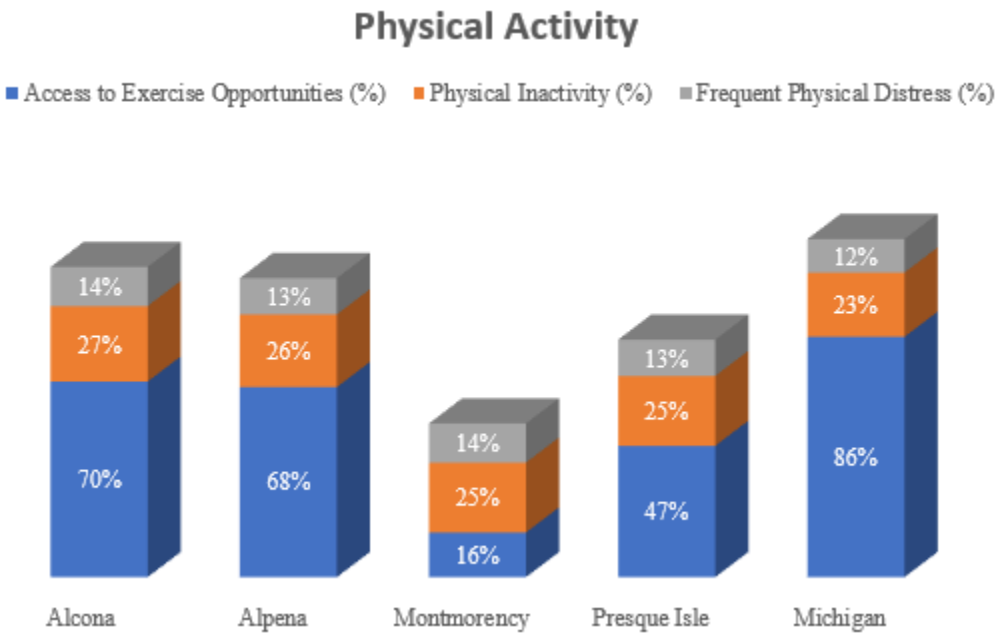


Table 26: Physical Activity

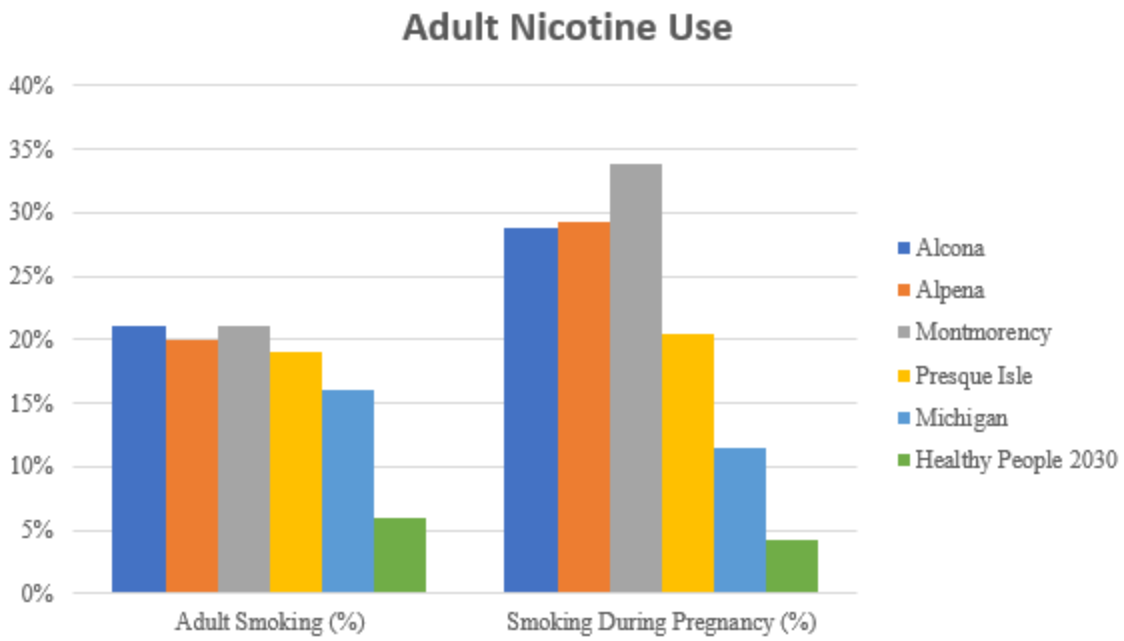


Table 27: Adult Nicotine Use

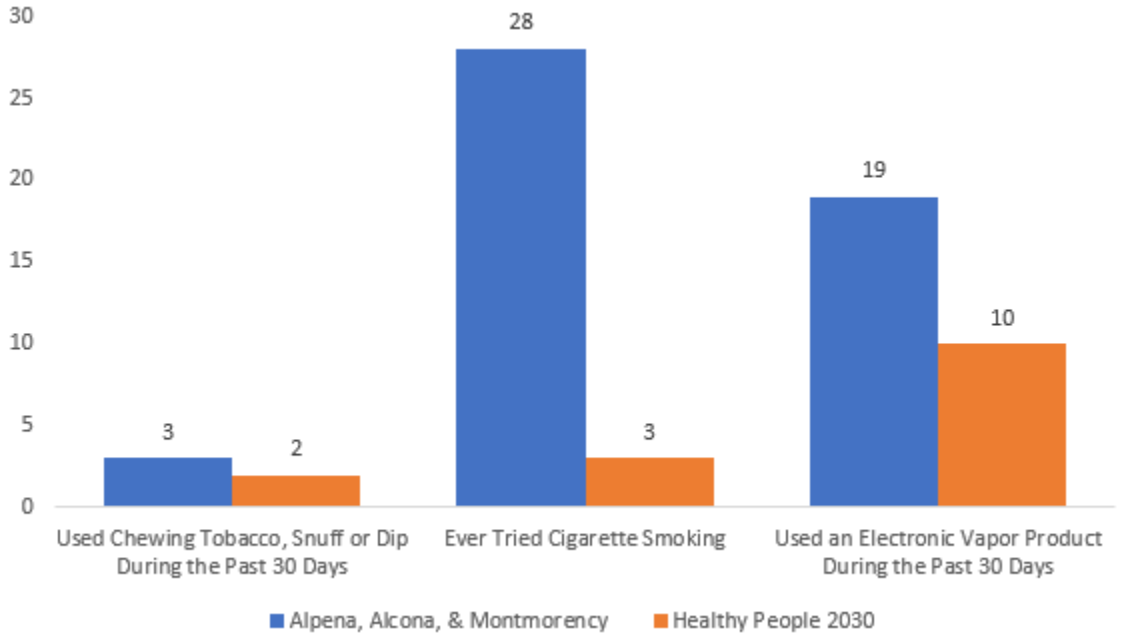


Table 28: Teen Nicotine Use

The number of adults that smoke averages 20 percent across the four counties, which is slightly above the Michigan average of 16 percent and significantly higher than the Healthy People 2030 goal of six percent. Statistics for mothers who smoke during pregnancy are significantly higher than Michigan percentages and Healthy People 2030 benchmarks. Montmorency County exhibits nearly 34 percent of mothers who smoke during pregnancy when compared to Healthy People 2030 benchmarks of 4.3 percent. Alpena, Montmorency and Alcona Counties also show teen use of tobacco products above benchmarks.

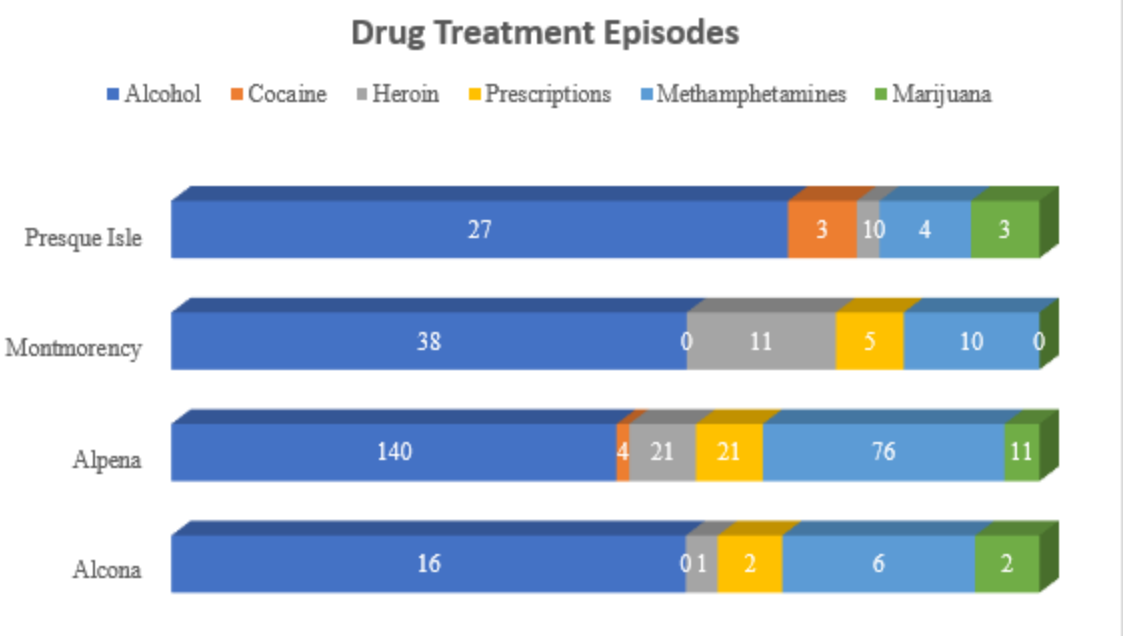


Table 29: Drug Treatment Episodes

The most significant shift in drug treatment episodes across the service area is the increase in methamphetamine and the decrease in marijuana use.

Behavioral Health

Behavioral Health studies how behavior relates to one's overall health and the ability to cope with difficult situations, manage emotions and make decisions. Studies have shown an increase in cases of mental health disorders and suicide rates. In the MyMichigan Medical Center Alpena service area, Alcona and Montmorency Counties have higher rates of suicide.

Other measures related to behavioral health include adequate sleep, mental distress and chronic depression. Michigan averages 36 percent of adults who report insufficient sleep, 18 percent who experience frequent mental distress and 21 percent with chronic depression.

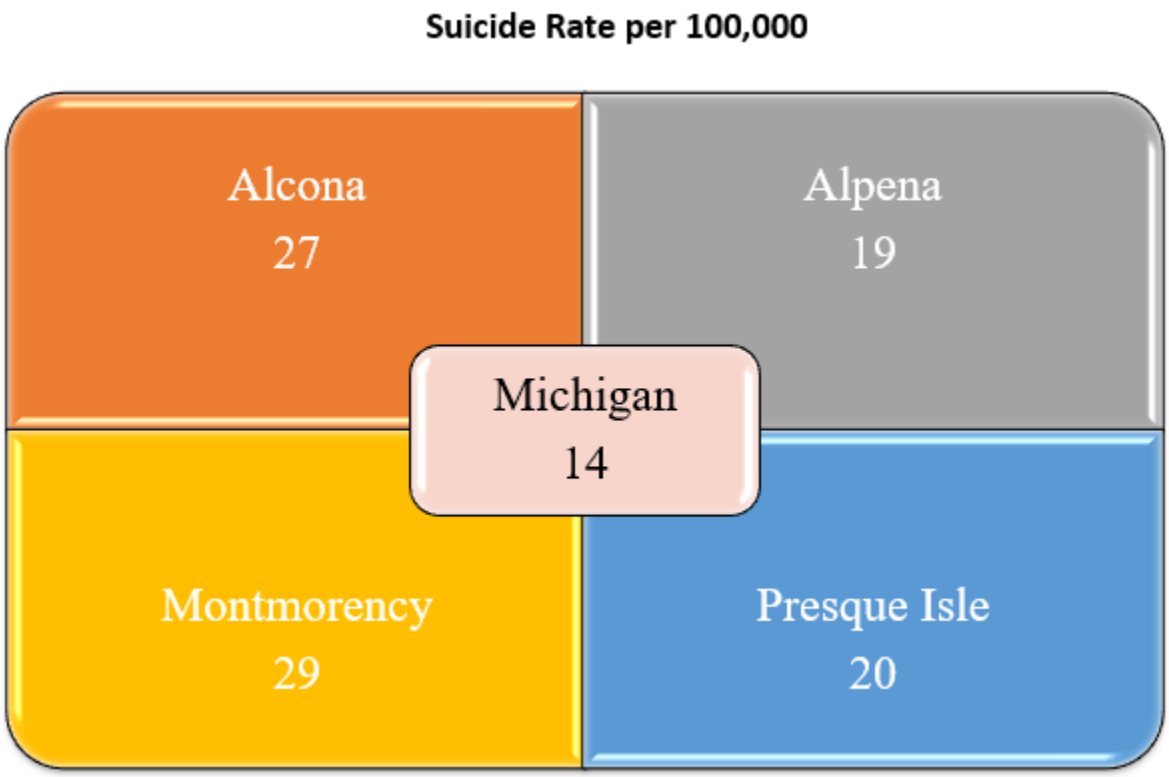


Figure 14: Suicide Rate Per 100,000

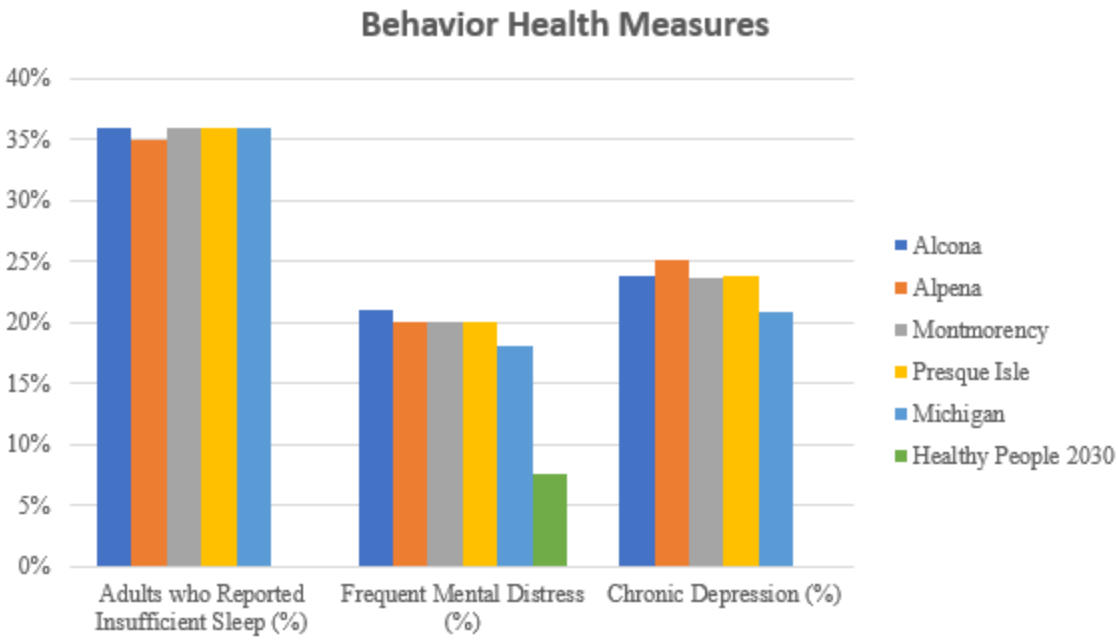


Table 30: Behavior Health Measures

Improvement Plan

MyMichigan Medical Center Alpena built upon the Improvement Plan developed in 2022 to develop a comprehensive plan to address health concerns, all while upholding MyMichigan Health's purpose statement, "Creating Healthy Communities – Together." The underlying premise for each MyMichigan Health member in completing the Community Health Improvement Plan is shared ownership for community health and well-being. While our previous Community Health Needs Assessment (2022) helped us to identify focus areas for health improvement, the IRS legislation mandating collaborative efforts provided an opportunity to revisit our needs assessment, strategic planning process and partnerships.

Figure 15: Focus Areas

The plan that follows includes goals and evidence-based strategies for the focus areas determined by MyMichigan Health's Community Health team, solicited input from the Alpena External and Internal Advisory Committees and approved by MyMichigan Medical Center Alpena's Board of Directors on February 26, 2025.

Appendix A: Partners

Alpena-Montmorency-Alcona Educational Service District

Area Agency on Aging of Northwest Michigan

AuSable Valley Community Mental Health

Benzie-Leelanau District Health Department

Central Michigan District Health Department

Corewell Health

Disability Network West Michigan

District Health Department #2

District Health Department #4

District Health Department #10

Grand Traverse County Health Department

Great Start Collaborative

Groundwork Center for Resilient Communities

Health Department of Northwest Michigan

Isabella Citizens for Health, Inc

McLaren Northern Michigan

Michigan Department of Health and Human Services

Munson Healthcare

Northeast Michigan Community Service Agency

Partners in Prevention

Strangers No Longer

Traverse Health Clinic

West Michigan Community Mental Health

Appendix B: Data Table

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
Economic Stability	Economic Stability – General	Adults 65+ Living Below Poverty Level	7.80%	10.30%	6.90%	8.50%	9.00%	-	American Community Survey	2018–2022
		% ALICE	32%	31%	31%	29%	28%	-	United Way	2022
		% Poverty	15%	17%	18%	12%	13%	8%	United Way	2022
		ALICE Level Households Above Poverty, but Less Than Basic Cost of Living	1,561	3,943	1,462	1,753	1,133,874	-	United Way	2022
		ALICE Total Households	4,832	12,721	4,678	6,110	4,056,442	-	United Way	2022
		Children Living Below Poverty Level	24.10%	21.40%	33.90%	18.60%	17.80%	-	American Community Survey	2018–2022
		Families Living Below Poverty Level	10%	11.30%	12.50%	8.90%	8.80%	-	American Community Survey	2018–2022
		Households with Cash Public Assistance	2.40%	2.30%	3.40%	1.80%	2.80%	-	American Community Survey	2018–2022
		Median Household Income	50,295	49,133	46,345	55,986	68,505	-	American Community Survey	2018–2022
		Per Capita Income	31,167	30,893	28,394	34,698	37,929	-	American Community Survey	2018–2022
		Persons in Poverty	16%	16.50%	18.50%	12.70%	13.10%	8%	American Community Survey	2018–2022
		Unemployment Rate	6.50%	4%	6%	6%	4%	25%	U.S. Bureau of Labor Statistics	2024
	Housing and Homes	Renters Spending 30% or More of Household Income on Rent	55.30%	44.20%	60%	47.70%	49.00%	25.5%	American Community Survey	2018–2022
		Severe Housing Problems	10%	9%	14%	10%	13%	-	County Health Rankings	2025
		Child Food Insecurity Rate	22.50%	20.10%	26.60%	19.40%	17.90%	-	Feeding America	2022
		Food Environment Index (0 worst to 10 best)	6.9	7	6.9	7.2	7.1	-	County Health Rankings	2025
		Food Insecurity	18%	18%	20%	17%	14%	6%	County Health Rankings	2025
		Food Stamp/SNAP Benefits in the Past 12 Months	13.60%	15.60%	12.40%	10%	13.30%	-	American Community Survey	2019
		Limited Access to Healthy Foods	6%	6%	1%	6%	6%	-	County Health Rankings	2025
		SNAP Participants (per 10,000 population)	13.70%	14.80%	14.30%	12%	13.30%	-	US Department of Agriculture	2023
		Students Eligible for Free Lunch Program	64%	61%	67%	60%	53%	-	County Health Rankings	2025
	Workplace	Driving Alone to Work	76%	78.00%	78.00%	77%	76.00%	-	County Health Rankings	2025
		Mean Travel Time to Work (Minutes)	26.5	17.7	24.7	26	24.5	-	American Community Survey	2018–2022
		People that Use Public Transportation to Get to Work	0.00%	0.90%	0.00%	0.00%	1.10%	-	American Community Survey	2018–2022
		People that Walk to Work	3.00%	1.80%	3.80%	2%	2.10%	-	American Community Survey	2018–2022

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
		People that Walk to Work	3.00%	1.80%	3.80%	2%	2.10%	-	American Community Survey	2018-2022
Education Access and Quality	Adolescents	9th to 12th Grade, No Diploma	5.60%	5.10%	8.80%	5.60%	5.30%	-	U.S Census Bureau	2023
		Disconnected Youth	-	8%	-	-	7%	10.1%	County Health Rankings	2025
		High School Dropouts	-	11.40%	14.80%	8.80%	8.10%	-	Kids Count	2023
		High School Graduate	85.50%	76.20%	79.60%	86.30%	82.90%	90.7%	American Community Survey	2018-2022
		High School Graduation (Completion) Rate	93%	93%	89%	92%	92%	-	County Health Rankings	2025
		Less than 9th Grade	1.50%	1.80%	1.80%	3%	2.60%	-	U.S Census	2023
		Students in Special Education	16%	17.10%	18.10%	10.30%	15.80%	-	Kids Count	2023
	Adults	Associate's Degree	11.10%	14.60%	10.00%	23.89%	9.70%	-	U.S Census Bureau	2023
		Graduate or Professional Degree	8.10%	6.50%	5.60%	6%	12.80%	-	U.S Census Bureau	2023
		People 25+ with Bachelor's Degree or Higher	20.00%	16.70%	15.20%	19.80%	31.10%	-	American Community Survey	2018-2022
		Some College, No Degree	28.50%	24.70%	23.80%	23.80%	22.00%	-	U.S Census Bureau	2023
	Children	3 and 4 Year Olds Not in Preschool	46.00%	63.70%	73.20%	66.00%	55.70%	-	Kids Count	2018-2022
		Students Not Proficient in Grade 3 English (M-Step)	77.10%	65.10%	74.50%	76.10%	60.70%	59.9%	Kids Count	2024
Determinants	Demographic	Female Population	49.8%	50.3%	48.6%	49.6%	50.4%	-	County Health Rankings	2025
		Male Population	50.2%	49.7%	51.4%	50.4%	49.6%	-	County Health Rankings	2025
		Overall Population	10,489	28,904	9,678	13,285	10,037,261	-	County Health Ranking	2025
		Population Age Over 65	37.0%	25.6%	33.3%	34.8%	19.2%	-	County Health Ranking	2025
		Population Age Under 18	12.6%	18.6%	15.6%	15.0%	21.0%	-	County Health Ranking	2025
		Population American Indian or Alaskan Native	0.9%	0.8%	0.9%	1.0%	0.8%	-	County Health Ranking	2025
		Population Black or African American	0.8%	0.7%	0.6%	0.6%	13.7%	-	County Health Ranking	2025
		Population Hispanic or Latino	1.7%	1.7%	1.9%	1.8%	6.0%	-	County Health Ranking	2025
		Population White (Non Hispanic)	94.5%	97.7%	94.5%	94.8%	73.7%	-	County Health Ranking	2025
	Health	Adults 65+ Living Alone	24.90%	27.60%	24.50%	23.70%	28.40%	-	MiTHrive	2018-
		Excellent Health					16.80%	-	Behavioral Risk Factor Survey	2020
		Population Health & Well-being	Faring slightly worse than average county in MI, & about the same as the average county/up	same as average MI county, slightly better than the average nation county	faring slightly worse than ave county in MI, about the same as the ave county in nation	Slightly better than ave MI county, better than ave Nation County	-	-	County Health Rankings	2025

	Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
Health Care Access and Quality – General	Community Conditions	Faring worse than ave county in MI, & slightly worse than ave. county in	Same as ave County in MI, slightly better than Nation ave	Worse than ave County in MI, worse than ave county nation	slightly worse than ave county in MI, about the same as the ave county in the nation	·	·	County Health Rankings	2025
	People with Health Insurance	92.90%	93.80%	92.30%	93.60%	94.50%	92.1%	U.S. Census Bureau	2022
	Poor or Fair Health	19%	19%	18%	18%	16%	·	County Health Rankings	2025
	Uninsured Adults	8%	7%	9%	7%	7%	7.9%	County Health Rankings	2025
	Uninsured Children	3%	3%	184%	3%	3%	·	County Health Rankings	2025
	Uninsured Seniors	0%	0.50%	0%	0.10%	0.60%	·	American Community Survey	2019
Cancer	All Cancer Incident Rate (per 100,000 population)	473.7	470.2	425.2	485.5	441.4	·	National Cancer Institute	2017-2021
	All Cancer Medicare Population Incident Rate (per 100,000 population)	9%	10%	9%	9%	11%	·	Centers for Medicare and Medicaid Services	2022
	All Cancer Mortality Rate (per 100,000 population)	185.8	179	205.5	146.5	158.3	122.7	National Cancer Institute	2018-2022
	Blood Stool Home Kit					11%	·	Behavioral Risk Factor Survey	2020
	Breast Cancer Incident Rate (per 100,000 population)	101.8	133.4	142.9	152.4	127	·	National Cancer Institute	2017-2021
	Breast Cancer Mortality Rate (per 100,000 population)	·	26.6	·	·	20.3	15.3	National Cancer Institute	2018-2022
	Mammn in Past 2 Yrs: 50-74	78.30%	74.10%	74.60%	74.90%	76.50%	80.3%	CDC - PLACES	2022
	Mamm Screen: Medicare Population	52.00%	54%	45%	53%	49.00%		Centers for Medicare and Medicaid Services	2022
	Colorectal Cancer Incident Rate (per 100,000 population)	41.1	38.7	53.9	37.3	35.4	·	National Cancer Institute	2017-2021
	Colorectal Cancer Mortality Rate (per 100,000 population)	23.1	12.2	·	13.5	13.4	8.9	National Cancer Institute	2018-2022
	Colorectal Cancer Screening	72.70%	67.60%	69.20%	73.10%		74.4%	CDC - PLACES	2022
	Lung Cancer Incident Rate (per 100,000 population)	72.7	79.5	75	44.5	58.8	·	National Cancer Institute	2017-2021
	Lung Cancer Mortality Rate (per 100,000 population)	42	49.8	59.8	28.8	38.3	25.1	National Cancer Institute	2018-2022
	Oral Cavity and Pharynx Cancer Incidence Rate (per 100,000 population)	13.4	16.7	·	15.2	11.8	·	National Cancer Institute	2017-2021
	Cervical Cancer Screening in Past 3 Years (f, ages 21-65)	81.90%	82.10%	80.90%	82.20%	79.20%	84.3%	CDC - PLACES	2020
	Prostate Cancer Incident Rate (per 100,000 population)	68.2	67.7	76.6	69.9	114.7	·	National Cancer Institute	2017-2021
	Prostate Cancer Mortality Rate (per 100,000 population)	·	18.4	·	·	19	16.9	National Cancer Institute	2018-2022

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
		Cervical Cancer Screening in Past 3 Years (Ages 21-65)	81.90%	82.10%	80.90%	82.20%	79.20%	84.3%	CDC - PLACES	2020
		Prostate Cancer Incident Rate (per 100,000 population)	68.2	67.7	76.6	69.9	114.7	*	National Cancer Institute	2017-2021
		Prostate Cancer Mortality Rate (per 100,000 population)	*	18.4	*	*	19	16.9	National Cancer Institute	2018-2022
	Cardiovascular	Atrial Fibrillation: **Medicare**	15.00%	15.00%	13.00%	14.00%	15.00%	*	Centers for Medicare and Medicaid	2022
		Heart Failure (Medicare population)	11.00%	13.00%	11.00%	10.00%	13.00%	*	Centers for Medicare and Medicaid	2022
		High Cholesterol **Prevalance**	43.60%	38.50%	43.70%	43%	*	186.4 mg/dL	CDC - PLACES	2021
		Ischemic Heart Disease (Medicare population)	20.00%	22.00%	20.00%	19.00%	22.00%	*	Centers for Medicare and Medicaid	2022
		Stroke	5.70%	4.50%	5.10%	5.00%	3.81%	*	CDC - PLACES	2022
		Autism Spectrum Disorders	*	11.70%	*	9.00%	12.70%	*	Centers for Medicare and Medicaid	2023-2024
		Child Abuse Neglect Rate (per 1,000)	7.5	15.9	19.9	12.7	13	8.7	Kids Count	2023
		Children in Investigated Families (Ages 0-17)	118.5	136.8	129.1	105.8	90.4	*	Kids Count	2023
		Children in Out-of-Home Care (Ages 0-17)	7.5	5.9	*	*	4	*	Kids Count	2023
		Confirmed Victims of Abuse or Neglect (Ages 0-17) (per 1,000)	7.5	15.9	15.9	12.7	11.4	8.7	Kids Count	2023
	Chronic Conditions	Adult Diabetes (per 1,000	7.70%	8.00%	7.70%	7.70%	*	5.6	Centers for Disease Control and Prevention	2021
		Adults who are Obese	19%	33%	21%	25%	32%	36%	Centers for Disease Control and Prevention	2021
		Alzheimer's/Dementia: **M**	5.00%	6.00%	4.00%	5.00%	7.00%	*	Centers for Medicare and Medicaid	2022
		Arthritis	41.90%	36%	41.30%	41.00%	36.17%	*	CDC - PLACES	2022
		Diabetes (Medicare population)	24.00%	23.00%	28.00%	23.00%	25.00%	*	Centers for Medicare and Medicaid	2022
		Diabetic Screening (Medicare population)	24%	23%	28%	23%	25%	*	Centers for Medicare and Medicaid	2022
		Diagnosed Diabetes Prevalence (% of adults 20+)	10%	10%	10%	9%	10%	5.6	County Health Rankings	2024
		Hepatitis (Chronic Viral B&C) (per 100,000)	*	0.55	0.5	*	0.78	0.1	Centers for Medicare and Medicaid	2018
		High Cholesterol (Medicare population)	57.00%	61.00%	64.00%	60.00%	62.00%	*	Centers for Medicare and Medicaid	2022
		Hypertension (Medicare population)	65.00%	66.00%	65.00%	64.00%	66.00%	*	Centers for Medicare and Medicaid	2022
		Adults with Kidney Dis	4.60%	3.90%	4.50%	4.40%	25.91%	12.8%	CDC - PLACES	2021
		Chronic Kidney Disease: Medicare	14.00%	18.00%	15.00%	16.00%	19.00%		Centers for Medicare and Medicaid	2022
		Osteoporosis: Medicare	7.00%	7.00%	6.00%	5.00%	10.00%	5.5%	Centers for Medicare and Medicaid	2018
		Prevalence of Hypertens	45%	39.00%	45.70%	43.70%	35.10%	41.3%	CDC - PLACES	2021
		Births with Late or No Prenatal Care	6.90%	5.00%	7.00%	45.00%	5.60%	19.5%	Kids Count	2022
		Less than Adequate Prenatal Care	25%	17%	30%	34%	32%	19.5%	Kids Count	2022

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
Health Care Access and Quality	**amily Plannin**	Less than Adequate Prenatal Care	25%	17%	30%	34%	32%	19.5%	Kids Count	2022
		Low Birthweight	7%	8%	*	5%	9%	*	Michigan Department of Health and Human Services	2022
		Medicaid Paid Births Single Year	53.40%	46.70%	53.50%	44.10%	39.20%	*	The Annie E. Casey Foundation: Kids	2020-22022
		Pre-Term Births	15%	9.90%	13.80%	10.60%	10.40%	9.4%	Michigan Department ofHealth and Human Services	2022
	Health Care	Fully Immunized Adults: COVID-19	15	15.2	15.5	18	11.6	*	MDHHS: Immunization Report Card	2024
		Fully Immunized Children: COVID-19	2.2	2.3	0.8	2.1	4	*	MDHHS: Immunization Report Card	2024
		Fully Immunized Toddlers **(19-35 months)**	71.20%	79.90%	66.40%	72.20%	69.80%	98.7%	The Annie E. Casey Foundation: Kids	2023
		Influenza Vaccination Rate (Adults)	34.40%	35.70%	37.80%	37.10%	30%	*	MDHHS: Immunization Report Card	2024
		Influenza Vaccination Rate (Children)	19.00%	17.20%	9.70%	15.40%	20%	*	MDHHS: Immunization Report Card	2024
		Mental Health Provider Ratio	950:1	250:1	680:1	2,670:1	300:1	*	County Health Rankings	2023
		Other Primary Care Providers Ratio	1,050:1	570:1	570:1	1,210:1	670:1	*	County Health Rankings	2025
		Pneumonia Vaccination (PPSV23 65+)	61.60%	67%	71.40%	58.40%	53.20%	*	Michigan Department of Health and Human Services	2024
		Population of Dentist Ratio	10,420:1	1,030:1	2,390:1	4,450:1	1,250:1	*	County Health Rankings	2025
		Preventable Hospital Stays (per 100,000	1,939	1,802	1,742	2,300	3,236	*	County Health Rankings	2025
		Primary Care Provider Ratio	2050:1	1,310:1	1,330:1	6550:1	1,280:1	84%	County Health Rankings	2025
	Mortality Rate per 100,000 Population	Alcohol-Impaired Driving Deaths	71%	25%	100%	45%	29%	28.3%	County Health Rankings	2025
		Chronic Lower Respiratory Disease	69.1	55.1	61.3	39.8	41.8	107.2	NIH	2018-2022
		Diabetes (per 1,000 population)	12.9	32.2	36.2	20.9	24.6	13.7	NIH	2018-2022
		Drug Overdose Deaths (per 100,000 population)	*	*	*	*	29	20.7	County Health Rankings	2025
		Drug Rate Death due to Heroin-Related Drug Poisoning (Opioid Overdose Deaths)	2	2	1	2	2,422	4.2	Michigan Substance Use Data Repository	2022
		Heart Disease	217.4	235.6	269.2	219	203	71.1	NIH	2018-2022
		Infant (per 1,000 population)	0	0	1	1	650	5	Michigan Department of Community	2020-2022
		Life Expectancy, Both Sexes	75.1	77	73.6	77.6	76.2	*	County Health Rankings	2025
		Stroke	41.1	43.9	50.1	32.8	43.2	33.4	NIH	2018-2022
		Suicide	27	19	29	20	14	12.8	County Health Rankings	2018-2022

	Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
	Percent of High School and Middle School Students who Saw a Dentist in the Past 12		61.80%				45%	Michigan Profile for Healthy Youth	2019
Sexually Transmitted Infections	HIV Prevalence (per 100,000 population)	52.7	39.7	128.5	*	205.5	0.087	National Center for HIV/AIDS, Viral Hepatitis, STD, TB Prevention	2022
	HPV Vaccination (Females)	58%	53.70%	50.00%	47.80%	45.80%	80%	MDHHS: Immunization Report Card	2024
	HPV Vaccination (Males)	48.70%	48.50%	38%	48.00%	43.50%	80%	MDHHS: Immunization Report Card	2024
	Sexually Transmitted Infections (per 100,000 population)	124.8	142.1	94.1	82.3	428.3	*	County Health Rankings	2025
	Child and Teen Deaths (Ages 1-19)	*	35.7	*	S (1)	28	18.4	Kids Count	2022
	Number of Births Ages 15-19 (per 1,000 females)	22	16	28	15	14	31.4	County Health Rankings	2025
	Percent of High School Students who are Obese	→	16%	←			15.5%	Michigan Profile for Healthy Youth (MI: CDC - Youth Risk Behavior	2019
	Percent of High School Students who are Overweight	→	18.10%	←			16.1%	Michigan Profile for Healthy Youth (MI: CDC - Youth Risk Behavior	2019
	Percent of Middle School Students who are	→	25.90%	←			25.9%	Michigan Profile for Healthy Youth	2019
	Percent of Middle School Students who are Overweight	→	11.80%	←			11.8%	Michigan Profile for Healthy Youth	2019
	Percentage of Students who Never had Sexual	→	69.40%	←			64.7%	Michigan Profile for Healthy Youth	2019
	Percent of High School Students who Saw a Doctor for an Exam When They Were Not Sick or Injured in the	→	67%	←			*	Michigan Profile for Healthy Youth	2019
	Repeat Teen Births (Ages 15-19)	*	1.00	1.00	*	16.20%	26.9%	Kids Count	2023
	Teen Pregnancy Rate (per 1,000 population) Age 15-19	36.5	24.5	28.7	28.5	21.2	31.4	Michigan Department of Community Health and Human	2022
Top 10 Inpatient MS-DRGs	Septicemia or severe sepsis w/o MV>96	*	332	*	*	*	*	MyMichigan Health	2025
	Psychoses	*	185	*	*	*	*	MyMichigan	2025
	Vaginal Delivery w/o sterilization/D&C	*	94	*	*	*	*	MyMichigan Health	2025
	Heart failur & shock	*	87	*	*	*	*	MyMichigan	2025
	Normal Newborn	*	85	*	*	*	*	MyMichigan	2025
	Simple pneumonia & pleurisy	*	82	*	*	*	*	MyMichigan Health	2025
	Pulmonary edema & respiratory failure	*	61	*	*	*	*	MyMichigan Health	2025
	Cardiac arrhythmia & conduction disorders	*	56	*	*	*	*	MyMichigan Health	2025
	Cesarean section without sterilization	*	42	*	*	*	*	MyMichigan Health	2025

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
		Cesarean section without sterilization	-	42	-	-	-	-	MyMichigan Health	2025
		Intracranial hemorrhage or cerebral infarction	-	41	-	-	-	-	MyMichigan Health	2025
Neighborhood and Built Environment	Neighborhood and Built Environmen	Drinking Water Violations (Yes or No)	No	No	No	No			County Health Rankings	2025
	Injury Prevention	Firearm Fatalities (per 100,000 population)	21	11	-	-	14	10.7	County Health Rankings	2025
		Premature Death (YPLL) (per 100,000 population)	11,100	7,600	11,700	7,900	8,800	-	County Health Rankings	2025
		Unintentional Injury Deaths (per 100,000 population)	9	17.3	8	11	6431	43.2	Michigan Department of Community	2022
	People with Disabilities	Persons with a Disability	23.00%	19.90%	24.00%	18.50%	14.10%	-	American Community	2018-2022
	Physical Activity	Access to Exercise Opportunities	70%	68%	16%	47%	86%	-	County Health Rankings	2025
		Frequent Physical Distress	14%	13%	14%	13%	12%	-	County Health Rankings	2025
		Physical Inactivity	27%	26%	25%	25%	23%	21.2%	County Health Rankings	2025
	Teen Physical Activity	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	→	52.10%	←			30.6%	Michigan Profile for Healthy Youth	2019
		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	→	62%	←			30.6%	Michigan Profile for Healthy Youth	2019
	Respiratory Disease Adults	Adults with current Asthma	11.40%	11.40%	11.30%	11.20%	5.55%	-	CDC - PLACES	2022
		Chronic Lower Respiratory Disease Mortality (per 100,000 population)	12.7	32	12.7	11.3	44.7	5273	Michigan Department of Health and Human Services	2020-2022
		COPD (Medicare population)	15.30%	13.00%	15.00%	12.00%	13.00%	-	Centers for Medicare and	2022
		Influenza and Pneumonia Mortality (per 100,000 population)	3.3	6.3	1.7	2	1433	-	Michigan Department of Health and Human Services	2020-2022
	Substance Use	Binge Drinking Adults	13.50%	16.20%	14.40%	14.40%	-	25.4%	CDC - PLACES	2022
		Excessive Drinking	20%	21%	20%	21%	20%	-	County Health Rankings	2025
	Tobacco Use	Adult Smoking	21%	20%	21%	19%	16%	6%	County Health Ranking	2025
		Adult Tobacco Use						16.2%		
		Births to Mothers who Smoked During Pregnancy	28.80%	29.30%	33.80%	20.40%	11.40%	4.3%	The Annie E. Casey Foundation: Kids	2022
		Current Adult Smokers	18%	19%	18%	18%	12.90%	6%	CDC - PLACES	2022
	Teen Substance Use	Percentage of High School Students who Ever Drank Alcohol	→	43.20%	←			6.3%	Michigan Profile for Healthy Youth	2019
		Percentage of High School Students who Ever Tried Marijuana	→	21.30%	←			5.8%	Michigan Profile for Healthy Youth	2019

		Indicator	Alcona	Alpena	Montmorency	Presque Isle	Michigan	Healthy People 2030	Source	Date
	Teen Tobacco Use	Percentage of High School Students who Used Chewing Tobacco, Snuff or Dip During the	→	3.50%	←			2.3%	Michigan Profile for Healthy Youth	2019
		Percentage of High School Students who Ever Tried Cigarette	→	28.20%	←			3.4%	Michigan Profile for Healthy Youth	2019
		Percentage of High School Students who Used an Electronic Vapor Product During the Past	→	18.90%	←			10.5%	Michigan Profile for Healthy Youth	2019
		Percentage of Middle School Students who Used an Electronic Vapor Product During the Past	→	5.30%	←			10.5%	Michigan Profile for Healthy Youth	2019
Social and Community Context	Social and Community Context - General	Adults who Reported Insufficient Sleep	33%	33%	33%	33%	36%	26.7%	CDC - PLACES	2022
		Chronic Conditions: Depression	23.90%	25.10%	23.60%	23.90%	20.87%	*	CDC - PLACES	2022
		Chronic Conditions: Schizophrenia/Other Psychotic Disorders	1.81%	3.32%	2.07%	2.22%	3.64%	*	Centers for Medicare and Medicaid Services	2018
		Frequent Mental Distress	21%	20%	20%	20%	18%	7.6%	County Health Rankings	2025
		Insufficient Sleep	36%	35%	36%	36%	36%	*	County Health Rankings	2025
		Poor Mental Health Days (per 30 days)	6	6.1	6.1	5.9	5.6	*	County Health Rankings	2025
		Violent Crime Rate (per 100,000 population)	120	304	81	93	443	*	County Health Rankings	2014 & 2016
	Children	Children in Single Parent Households	20.00%	25.00%	22.00%	19.00%	25.00%	*	County Health Rankings	2025
	Health IT	Broadband Access	81%	83%	81%	83%	89%	60.8%	County Health Rankings	2025
	Top 10 Referrals for 211 (219 Connections)	Electric Service Payment Assistance	32.42%	*	*	*	*	*	211	2022
		Heating Fuel Payment Assistance	11.87%	*	*	*	*	*	211	2022
		Food	5.02%	*	*	*	*	*	211	2022
		Gas Service Payment Assistance	4.57%	*	*	*	*	*	211	2022
		At Risk/Homeless Housig Related	2.74%	*	*	*	*	*	211	2022
		Rent Payment	2.74%	*	*	*	*	*	211	2022
		Furnaces	2.28%	*	*	*	*	*	211	2022
		Low Income/Subsidized Private Rental Housing	2.28%	*	*	*	*	*	211	2022
		Employment Related Trasnportation	1.83%	*	*	*	*	*	211	2022
		Home Rehabilitation	1.83%	*	*	*	*	*	211	2021
	Top 10 Referrals for 211 (446 Connections)	Electric Service Payment Assistance	*	14.35%	*	*	*	*	211	2022
		Heating Fuel Payment Assistance	*	6.95%	*	*	*	*	211	2022
		Rent Payment	*	4.93%	*	*	*	*	211	2022
		Homeless Motel	*	4.26%	*	*	*	*	211	2022
		Food	*	4.04%	*	*	*	*	211	2022
		Gas Service Payment Assistance	*	4.04%	*	*	*	*	211	2022
		At Risk/Homeless Housig Related	*	2.47%	*	*	*	*	211	2022
		Community Shelters	*	2.47%	*	*	*	*	211	2022

	Housiq Related								
	Community Shelters	*	2.47%	*	*	*	*	211	2022
	Automotive Repair & Maintenance	*	2.02%	*	*	*	*	211	2022
	Furnaces	*	1.79%	*	*	*	*	211	2022
Top 10 Referrals for 211(224 Connections)	Electric Service Payment Assistance	*	*	17.59%	*	*	*	211	2022
	Heating Fuel Payment Assistance	*	*	13.07%	*	*	*	211	2022
	Rent Payment	*	*	7.04%	*	*	*	211	2022
	Food	*	*	4.02%	*	*	*	211	2022
	General Legal Aid	*	*	4.02%	*	*	*	211	2022
	At Risk/Homeless Housiq Related	*	*	3.52%	*	*	*	211	2022
	COVID-19 Immunization Clinics	*	*	3.52%	*	*	*	211	2022
	Property Tax Payment Assistance	*	*	3.02%	*	*	*	211	2022
	Furnaces	*	*	2.01%	*	*	*	211	2022
	Gas Service Payment Assistance	*	*	2.01%	*	*	*	211	2022
Top 10 Referrals for 211 (197 Connections)	Electric Service Payment Assistance	*	*	*	21.71%	*	*	211	2022
	Heating Fuel Payment Assistance	*	*	*	8.00%	*	*	211	2022
	Food	*	*	*	5.71%	*	*	211	2022
	Rent Payment	*	*	*	4.57%	*	*	211	2022
	Gas Service Payment As	*	*	*	2.86%	*	*	211	2022
	Holiday Adoption Progra	*	*	*	2.86%	*	*	211	2022
	Homeless Motel	*	*	*	2.86%	*	*	211	2022
	211 Lead Agencies	*	*	*	2.29%	*	*	211	2022
	Low Income/Subsidized F	*	*	*	2.29%	*	*	211	2022
	At Risk/Homeless Housi	*	*	*	1.71%	*	*	211	2022
	Alcohol	16	140	38	27				2024
	Cocaine	0	4	0	3				
	Heroin	1	21	11	1				
	Prescription Opiates	2	21	5	0				
	Methamphetamines	6	76	10	4				
	Marijuana	2	11	0	3				

Appendix C: Survey

2024 Northern Michigan Community Health Survey

Informed Consent

This survey is a chance for you to tell us what is most important to you. MiThrive, a collaborative body that brings together cross-sector partners including local health departments and hospitals across the 31 counties of Northern Lower Michigan, is working to improve the health of communities in these counties by collecting data, identifying key issues, and bringing people together for change.

What is important to the community? What resources and strengths does the community have that can be used to improve community health?

Instructions: This survey will take about 15 minutes to complete. Please select the best answers for each question.

Consent: Your participation in this survey is completely voluntary. Your answers are confidential. The survey data will be managed by MiThrive staff. Your answers will not be used to identify who you are. You are free to skip any question and stop taking the survey at any time. The information you provide will not be used for a discriminatory purpose and there is minimal risk to you for taking the survey.

At the end of the survey, you can choose to be entered into a drawing for a chance to win a $50 gift card. 31 winners will be chosen (One person per county) - must be 18 or older.

Data Transparency: Data collected will be used in the 2024 MiThrive Community Health Assessment and overall results shared on the Northern Michigan Community Health Innovation Region webpage. Any personal information will be kept confidential.

Translation & Accessibility: *This form is available in Spanish.*

If you require accommodations to complete this survey such as for vision, hearing, or other disabilities, please email us at mithrive@northernmichiganchir.org and we would be happy to assist.

Submission Due Date: This form will close **Friday, September 20th at 11:59 PM**. Please submit your response prior to this time.

Questions and concerns can be emailed to mithrive@northernmichiganchir.org.

Survey Questions

1) Which county do you live in?

( ) Alcona
( ) Alpena ( )

Antrim ( )

Arenac

( ) Benzie
( ) Charlevoix
( ) Cheboygan
( ) Clare
( ) Crawford
( ) Emmet
( ) Gladwin
( ) Grand Traverse
( ) Iosco
( ) Isabella
( ) Kalkaska ( )

Lake

( ) Leelanau
( ) Manistee
( ) Mason
( ) Mecosta
( ) Missaukee
( ) Montmorency
( ) Newaygo
( ) Oceana
( ) Ogemaw
( ) Osceola
( ) Oscoda
( ) Otsego
( ) Presque Isle
( ) Roscommon
( ) Wexford
( ) Other - Write In:
_____ [ ]

2) In the following list, which five assets do you think are the most important factors for a community to be considered "thriving"? Please select up to <u>five</u> options.

Healthy food
[ ] Safe housing that does not cost too much
[ ] High quality medical care
[ ] Access to general medical care
[ ] Access to specialty medical care
[ ] Help for mental health and emotions
[ ] Parks and green spaces
[ ] Safe and reliable childcare
[ ] A strong sense of community among residents
[ ] Stopping people from getting sick
[ ] Helping people with long term sickness feel better
[ ] Being safe from harm and violence
[ ] Low substance use or drug use (alcohol, marijuana, tobacco, e-cigarettes, opioid, and narcotic-use)
[ ] Jobs that make people happy and proud

[ ] Jobs that pay well and a strong economy
[ ] Clear air, water, and land
[ ] Community members who are helping out and getting involved in the community [ ] Lifelong learning
[ ] Schools with plenty of resources

[ ] Transportation that you can count on
[ ] Fun events that show different kinds of art and culture
[ ] Being accepted as part of the community
[ ] Low levels of crime
[ ] Police, fire/rescue, and emergency services
[ ] Ease of use for people with physical and/or mental disabilities [ ] Other - Write In: _____

3) Please indicate how strongly you agree or disagree with each of the following statements. Please select <u>one</u> option per statement (Continued on the next page).

	Strongly Agree	**Agree**	**Disagree**	**Strongly Disagree**	**I don't know**
My community is a safe place to live.	( )	( )	( )	( )	( )
My community is a good place to raise children.	( )	( )	( )	( )	( )
My community is a good place to grow old.	( )	( )	( )	( )	( )
There are enough jobs in my community that pay well.	( )	( )	( )	( )	( )
People in my community have good jobs that pay enough.	( )	( )	( )	( )	( )
My community has enough access to healthy food that doesn't cost too much.	( )	( )	( )	( )	( )
There is enough housing available in my community that doesn't cost too much.	( )	( )	( )	( )	( )

There are housing and support services available for older adults in my community.	( )	( )	( )	( )	( )
My community has safe drinking water and clean air.	( )	( )	( )	( )	( )
There are enough parks and other places for fun and physical activity in my community.	( )	( )	( )	( )	( )
There is a strong sense of community among the people where I live.	( )	( )	( )	( )	( )
I feel welcomed and accepted by the other people in my community.	( )	( )	( )	( )	( )
There are no problems with discrimination or negative attitudes/behaviors/thoughts in my community based on race, gender, income, or other factors.	( )	( )	( )	( )	( )

4) In the following list, what do you think are the three most concerning medical conditions impacting your community? Please select up to <u>three</u> options.

[ ] Aging problems (e.g., arthritis, hearing/vision loss, etc.)
[ ] Alzheimer's disease/dementia
[ ] Cancer
[ ] COVID-19
[ ] Diabetes
[ ] Heart disease and stroke
[ ] High blood pressure
[ ] HIV/AIDS
[ ] Infant death
[ ] Infectious diseases (e.g., hepatitis, tuberculosis, etc.)
[ ] Kidney disease

[ ] Liver disease
[ ] Issues during pregnancy or giving birth
[ ] Mental and/or behavioral diseases
[ ] Pneumonia/ Flu
[ ] Respiratory/lung disease (such as asthma and COPD)
[ ] Sexually transmitted infections (STIs)
[ ] Substance use disorders (SUDs)
[ ] Injuries due to accidents
[ ] Obesity
[ ] Other - Write In:
_____
____

5) In the following list, what are the three most important concerns within your community that should be addressed? Please select up to <u>three</u> options (Continued on the next page).

[ ] Aging problems (e.g., arthritis, hearing/vision loss, etc.)
[ ] Child abuse/neglect
[ ] Not enough oral/ dental healthcare services
[ ] Domestic and sexual violence
[ ] Lack of good jobs that pay enough
[ ] Homicide, or people ending the lives of other people
[ ] Discrimination or negative attitudes/behaviors/thoughts based on race, gender, income, or other factors [ ] High quality medical care
[ ] Access to general medical care
[ ] Access to specialty medical care
[ ] Not enough substance use disorder (SUD) services
[ ] Suicide, or people ending their own lives
[ ] Teenage pregnancy
[ ] Not enough maternal care services
[ ] Pollution (bad air and water quality)
[ ] Not enough educational opportunities

[ ] Firearm-related or gun-related injuries
[ ] Not enough mental health services
[ ] Motor vehicle/traffic accidents
[ ] Lack of usable parks and green spaces
[ ] Not enough healthy foods
[ ] Not enough options for transportation
[ ] Lack of transportation that is safe and doesn't cost too much [ ] {Lack of good mental health services}
[ ] Lack of good schools and education
[ ] Not enough available options for housing
[ ] Lack of housing that is safe and doesn't cost too much [ ] Lack of good internet access
[ ] Not enough arts and culture
[ ] Police, fire/rescue, or emergency services
[ ] Trouble managing chronic or long-term health issues [ ] Sense or of community [ ]
Other - Write In:
_____

6) Please indicate whether you think you have easy access (or the ability to find and receive services) to each of the following. Please select <u>one</u> option per statement.

	Yes, I have easy access	**No, I do not have easy access**	**Does not apply to me**
Health information from a source I trust	( )	( )	( )

Family planning services	( )	( )	( )
Good food that doesn't cost too much	( )	( )	( )
Health services for children	( )	( )	( )
Immunizations/Vaccinations	( )	( )	( )
Mental health services	( )	( )	( )
Oral/dental health services	( )	( )	( )
Prenatal care/health care for pregnancy	( )	( )	( )
Primary care services	( )	( )	( )
Sexual health testing and treatment	( )	( )	( )
Services for those with substance-use or drug-use issues	( )	( )	( )
Housing services	( )	( )	( )
Childcare services	( )	( )	( )
Services or care for people with dementia	( )	( )	( )
Supports for the health and wellness of caregivers	( )	( )	( )
Broadband access	( )	( )	( )

7) From the list below, which resources or services are missing in your community that would benefit you? Please select <u>all</u> options that apply to you.

[ ] Housing
[ ] Food
[ ] Transportation
[ ] Mental Health
[ ] Financial Support
[ ] Domestic Violence Services
[ ] Education
[ ] Primary Care
[ ] Childcare
[ ] Substance-use Services
[ ] Dental Health
[ ] Internet (broadband, satellite, etc.)
[ ] Language or translation services
[ ] I feel there are enough services and resources in my community [ ] Other - Write In:

_____

8) Which of the following factors do you experience that make it harder for you to use health care services? Please select <u>all</u> options that apply to you.

[ ] Cost of healthcare (premiums, deductible, copay)
[ ] Difficulty getting an appointment due to your provider not having enough available timeslots
[ ] No appointment times that fit your schedule (day/night/weekends etc.)
[ ] Issues with knowing how to use technology-based scheduling or appointments
[ ] Pharmacies regularly do not have your prescription/medication [ ] Costs of prescriptions or medications
[ ] Feeling like healthcare providers are not listening to your concerns
[ ] Too much paperwork before seeing a healthcare provider [ ] Lack of transportation options [ ] Transportation

9) Think about your environment and features of your community, and your ability to run, walk, bike, or roll from one place to another. Do any of the following issues currently prevent you from being more active in your community? Please select <u>all</u> options that apply to you.

[ ] Do not have the personal equipment for online appointments or scheduling (no cellphone/computer, no internet, etc.)
[ ] Healthcare providers do not speak your native language.
[ ] Cannot understand what your healthcare provider is trying to tell you [ ] Do not trust healthcare providers
[ ] Primary services are located too far away from your area

[ ] Specialty services are located too far away from your area
[ ] Not accepting your insurance
costs too much
[ ] Transportation is not reliable [ ]
Other - Write In:

_____

[ ] I have no barriers
[ ] Sidewalks
[ ] Walkable paths, trails, or walkways
[ ] Bike lanes
[ ] Greenspaces (parks, etc.)
[ ] Direction signs (street signs, etc.)
[ ] Recreation facilities
[ ] Affordable physical activity programs
[ ] Streetlights
[ ] Low ease of use for people with disabilities

[ ] Living a great distance from places in my community
[ ] Feeling unsafe in my community
[ ] Lack of maintenance on paths/trails/roads (snow clearing, etc.) [ ] Other - Write In: _____
[ ] I don't experience any of these

10) The following statements describe a person who meets the guidelines for chronic disease prevention. For each statement, please indicate whether you think YOU, in a typical week, have met the guidelines for chronic disease prevention. Please select <u>one</u> option per statement.

	Exceed Expectation	**Met Expectation**	**Did Not Met Expectation**
Eat 1.5–2 cups of fruits per day and 2-3 cups of vegetables per day	( )	( )	( )

At least 150 minutes of physical activity a week (ex. 30 minutes a day for 5 days a week)	( )	( )	( )
Sleep at least 7 hours each night	( )	( )	( )
Free from daily stress and depression	( )	( )	( )
Free from self-harm and suicidal thoughts	( )	( )	( )
Receive routine screenings every year (annual physical, etc.)	( )	( )	( )
Have good overall health	( )	( )	( )

11) Please indicate how frequently you use any of the following substances (Continued on the next page).

	Currently use this substance (within the past 12 months)	**Formerly used this substance (any-time before the last 12 months)**

Tobacco-use (commercial cigarettes or chewing tobacco, etc.)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
E-cigarette (vape, etc.)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
Excessive Alcohol (eight or more drinks for women, or 15 or more drinks for men during a week)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
Binge Drinking Alcohol (four or more drinks for women, or five or more drinks for men during an occasion)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
Marijuana-use (smoking, edibles, etc.)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)

Illegal substances (such as cocaine, crack, crystal meth, heroin, smack, PCP, LSD, etc.)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
Opioids (narcotics, prescribed by a healthcare provider but are not using as prescribed)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)
Opioids (narcotics, not prescribed by a healthcare provider)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)	(Daily) (Several times a week) (Once a week) (1-3 times a month) (Less than once a month) (Never)

12) **Thinking broadly, what changes are happening or might happen in your area that you believe will affect the health of your community?**
These changes can include weather, technology, money, laws, diseases, community resources, and other things.

_____
_____
_____
_____

13) **Do you have any other comments or concerns that you would like to share that are not reflected in other questions of this survey?**

_____
_____
_____
_____

Demographic Questions

14) Do you represent any of the following populations? Please select <u>all</u> options that apply to you.*

[ ] Amish
[ ] Native/tribal populations
[ ] Migrant/farm worker
[ ] Senior (Over the age of 60)
[ ] Low income/ financially struggling
[ ] Homeless or unhoused
[ ] Have one or more disabilities
[ ] Have grade-school-aged children or younger
[ ] Have children that are older than grade-school age
[ ] Have a mental illness (ex. anxiety, depression, etc.)
[ ] Have a substance-use disorder (ex. alcohol, marijuana, opioid-use, etc.)
[ ] Currently serve or have served in the military
[ ] LGBTQ+ Community
[ ] Provider/ Healthcare Staff
[ ] No, I am not one of the above
[ ] Prefer not answer

15)What is the five-digit zip code of the area in which you live?*

_____

16)Which county do you spend most (over 51%) of your time in? This could include time spent for work, travel, or fun.*

( ) Alcona
( ) Alpena ( )
Antrim ( )
Arenac
( ) Benzie
( ) Charlevoix
( ) Cheboygan
( ) Clare
( ) Crawford
( ) Emmet
( ) Gladwin
( ) Grand Traverse
( ) Iosco
( ) Isabella
( ) Kalkaska ( ) Lake
( ) Leelanau

17) What is your age in years?*

( ) Manistee
( ) Mason
( ) Mecosta
( ) Missaukee
( ) Montmorency
( ) Newaygo
( ) Oceana
( ) Ogemaw
( ) Osceola
( ) Oscoda
( ) Otsego
( ) Presque Isle
( ) Roscommon
( ) Wexford
( ) Other - Write In:
_____
___

_____

18) What kind of health insurance(s) do you have? Please select <u>all</u> options that apply to you. *

[ ] Medicaid and Healthy Michigan Plans

[ ] Medicare

[ ] Individual or family insurance purchased on the exchange or marketplace [ ] Employer-sponsored insurance

[ ] Uninsured

[ ] Unknown

[ ] Other - Write In:

_____

[ ] Prefer not to answer

19) Which of the following best describes you? Please select <u>all</u> options that apply to you.*

[ ] Asian

[ ] Asian American

[ ] African

[ ] Black or African American

[ ] Hispanic or Latino/a/x

[ ] Middle Eastern/ North African

[ ] Native American/ Indigenous/ Alaska Native

[ ] Native Hawaiian/ Pacific Islander

[ ] White/ European

[ ] Prefer not to say

[ ] Prefer to self-describe:

_____

20) What is the highest level of education that you have achieved?*

( ) Did not finish high school

( ) High school graduate or GED

( ) Some college, no degree

( ) Trade school diploma or certificate

( ) 2-year (Associate's) degree

( ) 4-year (Bachelor's) degree

( ) Graduate or professional degree

( ) Prefer not to answer

21) What is your yearly total household income?*

( ) Less than $10,000

( ) $10,000 to $19,999

( ) $20,000 to $29,999

( ) $30,000 to $39,999

( ) $40,000 to $49,999

( ) $50,000 to $59,999

( ) $60,000 to $69,999

( ) $70,000 to $79,999

( ) $80,000 to $89,999

( ) $90,000 to $99,999

( ) $100,000 to $149,999

( ) Over $150,000

( ) Prefer not to answer

22) Including yourself, how many people live in your household?

( ) 1
( ) 2
( ) 3
( ) 4
( ) 5
( ) 6
( ) 7 or more
( ) Prefer not to answer

23) Do you identify as having a disability?

( ) Yes
( ) No
( ) Prefer not to answer

24) Select all options that you would use to describe your disability:

[ ] Blind or Low Vision
[ ] Deaf or Hard of Hearing
[ ] Mental Health Disability
[ ] Intellectual or Developmental Disability
[ ] Traumatic Brain Injury
[ ] Autism Spectrum Disorder
[ ] Physical disability or Mobility Impairment
[ ] Prefer not to say
[ ] Prefer to self-describe: _____

25) How do you identify your gender?

( ) Female
( ) Male
( ) Non-binary
( ) Transgender
( ) Prefer to self-describe:

_____

( ) Prefer to not answer

26) What is your sexual orientation?

( ) Straight/ Heterosexual
( ) Gay
( ) Lesbian
( ) Bisexual
( ) Other - Write In: _____
( ) I prefer not to answer

Provider/Healthcare Staff Questions

Please only fill out questions 27 through 32 if you identified as a Provider/Healthcare Staff on Question 14. Otherwise, please skip to page 19. Thank you!

27) Do you provide direct care or services for clients or patients?

( ) Yes
( ) No
( ) Prefer not to answer

28) What health system, organization, or entity do you work for? Please avoid using abbreviations in your response.

_____

29) What is your primary role as a healthcare provider? Please select only the <u>one</u> option that best fits your role.

( ) Clinical social worker
( ) Doctor of medicine or osteopathy (MD or DO)
( ) Pharmacist
( ) Physician's assistant (PA)/Nurse practitioner (NP)
( ) Dental hygienist
( ) Dietitian
( ) Community health worker
( ) Chiropractor
( ) Nurse (RN, CNA, BSN, etc.)
( ) Clinical psychologist
( ) Podiatrist
( ) Dentist
( ) Optometrist
( ) Physical therapist (PT)/Occupational therapist (OT)/Speech-language pathologist
( ) Other - Write In: _____

30) Define your specialty or that of your practice. Please select <u>all</u> options that apply to you.

[ ] Emergency care
[ ] Primary care
[ ] Pediatrics
[ ] Dental
[ ] Preventative medicine/public health
[ ] Mental health
[ ] Behavioral health
[ ] Surgery
[ ] Substance use services
[ ] Obstetrics and Gynecology
[ ] Family medicine
[ ] Internal medicine
[ ] Neurology
[ ] Psychiatry
[ ] Otolaryngology (ENT)
[ ] Urology
[ ] Anesthesiology
[ ] Radiology
[ ] Pathology
[ ] Orthopedics
[ ] Dermatology
[ ] Cardiology
[ ] Gastroenterology
[ ] Pulmonology
[ ] Endocrinology
[ ] Infectious Diseases
[ ] Oncology
[ ] Allergy/Immunology [ ]
Other - Write In:
_____

31) Approximately what percentage of the patients you serve are on Medicaid?

( ) 0-15%
( ) 16-30%
( ) 31-50%
( ) More than 50%

32) What issues are you seeing in your community that are not reflected in other areas of this survey?

_____
_____
_____
_____

Thank You!

Thank you for your time and energy to complete this survey.

Please fill out the section below to be entered for a chance to win a $50 gift card.

Your personal information will not be connected to your survey responses.

Thank you for participating in the 2024 Northern Michigan Community Health Survey, conducted by MiThrive.

Now that you have completed the survey, you can choose to be entered into a drawing for a chance to win a $50 gift card. 31 winners will be randomly chosen (One person per county) - must be 18 or older.

Drawing entries are not connected to the information that you submitted into the survey, and the information you submitted will remain anonymous if you decide to enter this drawing.

Drawing for the gift cards will occur after the close of the survey on September 20th, 2024. Winners will be contacted by phone and email.

Only one entry per person.

1) **What is your first and last name?**

_____

2) **What is your phone number?**

_____

3) **What is your email address?**

_____

4) **Are you interested in being contacted for more opportunities to contribute to the health of your community?**

( ) Yes
( ) No

Appendix D: 2022 Wrap up of Community Health Improvement Plan

Community Health Improvement Plan
MyMichigan Medical Center Alpena

Focus: Chronic Disease Prevention and Management

Goal: Positively impact health outcomes through education, behavior modification, risk idetification/reduction and access to services.

Strategies	Description	Impact	Internal Department Involved	Community Partners	Status
Food pharmacies and/or food lockers	Program designed to increase access to healthy foods by offering reduced prices or free fresh/frozen items like fruits, vegetables and lean proteins	***2023*** : Explore partnerships with FBEM, Primary Care Offices & FQHC's ***2024*** : Establish one food pharmacy or locker in each of the service area counties (Alcona, Alpena, Montmorency & Presque Isle) ***2025*** : Evaluate the effectiveness of food pharmacy/locker on chronic disease management, access to healthy foods and user satisfaction	Community Health MMG	FQHC's MSU Extension FBEM	2023 Conversations occurred with Food Bank of Eastern Michigan, 2024 Contacts and training were completed with MMG Staff. Space was located for food storage. Shelf Stable food has been secured. Processes in place for food bags per SDOH screens, 2025 to date, Family Medicine has assisted families with food 138 households with food pantry items and holiday boxes. In addition, MyMichigan supported a food truck in December of 2023 and April of 2025. The total families with the April food truck was 398- MyMichigan Alpena has also collaborated with MSU Ext to offer vouchers for fresh fruits and vegetables at the farmers markets and certain grocery stores. 41 individuals received these vouchers in Alcona, Alpena and Presque Isle counties. This increases access for fresh produce and creates a collaboration between MyMichigan and local vendors and retail stores.
Supprt local community groups that engage youth for physical activity	Program for school-aged children that promotes physical fitness, increases self-confidence and improves mental health.	***2023:*** Engage partnerships with Run United & Joshua Tree Studio & Spa to develop/promote programs. ***2024:*** Establish running programs in at least 2 area elementary schools (Run United). Support/Promote True Colors yoga program with at least 15 participants (Joshua Tree) ***2025:*** Establish running programs in at least 50% of area elementary schools. Routine offerings of youth yoga programs.	Community Health MyMichigan Health Staff	Joshua Tree Studio and Spa Run United Thunder Bay Transportation	Partnerships have been very effective with Joshua Tree and RunUnited. **RunUnited** has been well established in the school system, allowing students grade 3-5 to learn about track and running. There have been betwee 250 to 300 students register each year. The program is in 7 different lower elementary schools in Alpena County. **Joshua Tree** has had several sessions of mindfulness classes for teens, with registration being consistent around 12-15.

Implement & Provide Chronic Disease Self-Management Program (explore various programs)	Program or workshop for adults with at least one chronic health condition, taught by trained facilitators to improve knowledge of ways to manage chronic conditions.	***2023:*** Identify self-management program and facilitators. ***2024:*** Implement program/workshop, 2 trained facilitators, 30 participants complete. ***2025:*** PDCA using FY '24 results, 4 trained facilitators, 60 participants	Community Health MMG Diabetes Center	FQHC's Alpena Senior Center	MyMichigan has several facilitators (Health Educators) that conduct the Chronic Disease Self Management course virtually. Goals have been met for trained facilitators, however; the participation for these courses have not been great, therfore this goal has not been met.
Strategies	**Description**	**Impact**	**Internal Departments Involved**	**Community Partners**	**Status**
Preventative screenings and promotion of online risk assessments	Early detection options for patients and community members that are at risk for chronic diseases and cancer.	***2025:*** Explore partnerships, events and/or health fairs for screening opportunities and promotion of online risk assessments tools. ***2024:*** Conduct screenings minimally at one event per county per quarter. ***2025:*** Promote low dose lung screening	Community Health MMG Community Health Workers	Senior Center HSCC Partners in Prevention	Throughout all FY's, opportunities to share the online risk assessment has been promoted via flyers at events that we participate in, especially project connect. Screenings for Blood Pressures are done monthly at Senior populations and new in 2024 at the Center of Charity. Flyers for Low Dose Lung Scans were handed out at multiple events and encouraged to participate along with the Mammogram Saturday event.
Community Health Worker (CHW) Implementation	Community Health Workers (CHW), a skilled trade public health worker, that serves as a liason between community, health care, and public health.	***(System Wide Metric)*** ***2023:*** Sustain current CHW program and integrate within Care Management Team with CHW supervisor in place. ***2024:*** Hire/train 5 more CHW's. ***2025:*** Have at least 15 CHW's on staff	Community Health MMG		MyMichigan Alpena has one full-time CHW. We also utilize Case management personal and discharge planners to assist patients and refer if needed to the CHW. A new referral process to the CHW was implemented in EPIC as well.
Focus: Behavioral Health **Goal:** Increase availability/accessability/awareness of mental health and substance use services					
Strategies	**Description**	**Impact**	**Internal Departments Involved**	**Community Partners**	**Status**
Suicide Prevention training for staff & community members.	LivingWorks SafeTALK is a suicide prevention training that teaches signs of suicide, how to begin conversation, overcome barriers and connec with further support.	***2025:*** Develop a plan with Educational Services to provide training for staff. . ***2024:*** 25% of employees trained in SafeTALK. Partner with one school to have staff trained. ***2025:*** 50% of employees trained, partering with 3	Community Health Educational Services	Alpena Public Schools Partners in Prevention	Many local schools are trained through Partners in Prevention. Promotion of their free classes for Mental Health and Suicide prevention occurs via email to staff and is placed on a communtiy health board.

Tobacco Cessation Initiative	Implement Tobacco Cessation tactics that make it easier for patients and community members to get counseling and support, and to provide information and channel for providers to refer patients to the appropriate source.	***2023:*** Initiate N-O-T in Alcona & Hillman High Schools. Explore opportunity for additional area high schools to implement N-O-T. Tobacco Cessation Tip Sheet developed, including resources, contacts & billing codes for tobaccos cessation and counseling. ***2024:*** Have 4 tobacco cessation programs implemented for patients and community members. ***2025:*** All area high schools have implemented N-O-T programs. Provider referral process to tobacco cessation	Community Health Pulmonology Oncology OB-GYN MPG	MI Quitline Catholic Human Services Alpena High School Alcona Schools Hillman Schools Rogers City Schools Posen Schools Onaway Schools Atlanta Schools	Both schools have N-O-T resources.For FY 2025, Alcona schools reported they are taking a different approach and no longer utilizing the N-O-T program. There have not been many students participate in this program. MyMichigan offers virtual tobacco cessation programs for those that are interested in quitting. MyMichigan also utilizes Freedom From Smoking resources.
Support TSP/NAMI efforts to bring "Ending the Silence" to schools	Program in adjunct to health class to bring awareness to mental health issues and substance use disorders. Educate students on signs of mental illness and resources available.	***2023:*** Continue collaboration to bring "Ending the Silence" to the Alpena High School by May 2023. Initiate partnerships with other area high schools and begin discussions on bringing the program to those schools. ***2024:*** Expand "Ending the Silence" and TSP efforts to at least 2 High Schools in surrounding counties. ***2025:*** "Ending the Silence" and TSP effort in each high school in the	Community Health Behavioral Health Services	Alpena High School Catholic Human Services The Sunset Project Partners in Prevention NAMI Additional high schools TBD	The Sunset Project has been on track to meet these goals. They have successfully held sessions at Alpena High School, ACES Academy, Alcona High School. They have made several attempts to get into the Rogers City High School for this year. They continue to provide this education to each new health class as well, keeping a presence within the school system.

Key

Complete	**In Progress/ On Track**	**Off Track/ Action Needed**