2022
North Central MiThrive Environmental Scan Report

mithrive

NORTH CENTRAL
COMMUNITY
HEALTH
INNOVATION
REGION

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Access to Healthcare

- Increase access to healthcare by establishing a transportation triage of use.

Chronic Disease

- Use health policy to prevent disease and improve health

- Reduce rates of heart disease and related risk factors in the region by helping people get the recommended preventive healthcare services

Economic Stability

- Increase resource utilization for households at or below the Asset Limited, Income Constrained Employed (ALICE) level

- Increase economic growth

Mental Health

- Increase access to mental health services unique to the community

- Improve mental health

*Further information provided in the Environmental Scan regarding priority areas is available upon request.

OVERVIEW: 2022 Environmental Scan

Arenac, Clare, Gladwin, Isabella, Lake, Mason, Mecosta, Newaygo, Oceana, Osceola.

31 ACCESS TO HEALTHCARE

32 CHRONIC DISEASE

67 TOTAL RESPONSES

23 ECONOMIC SECURITY

36 MENTAL HEALTH

Access to Healthcare

Environmental Scan Organization Participation:
Baldwin Family Health Care, Central Michigan District Health Department, City of Ludington, Community Connections, Community PACE, Department of Health and Human Services, District Health Department #10, Family Health Care, Isabella Citizens for Health, Lost in Translation, MidMichigan Community Health Services, MyMichigan Health, Newaygo County Commission on Aging, Newaygo County Community Collaborate (NC3), Senior Resources of West Michigan, Spectrum Health, Trinity Health Medical Group, Walkerville Thrives/Healthy Lifestyles

Identified Partnering Organizations:
All About Time Transportation, Alma Transit, Cab Agencies, Clare County Transit, Community Foundation for Mason, DHS MI Bridges Navigation, Disability Network, Gas Stations, Gladwin Transit Authority, Gratiot Isabella Clare Ride Health, Great Start Readiness Program, Head Start Great Start Collaborative, Isabella County Transit, Ludington Mass Transit, Marketplace Insurance Navigation, Mecosta & Osceola HSCB, Ogemaw County Public Transit, Rides to Wellness, Roscommon County Transit Authority, Senior Centers, Stargazer Transportation, The Right Place, Uber Health I Ride

Chronic Disease

Environmental Scan Organization Participation:
Baldwin Family Health Care, Central Michigan District Health Department, Community PACE, DHHS, District Health Department #10, Family Health Care, Flowers By Mary Ann, Isabella Citizens for Health, Lakeshore Food Club, MidMichigan Community Health Services, MSU Extension, MyMichigan Health, Newaygo County Community Collaborate (NC3), Senior Resources of West Michigan, Spectrum Health, Trinity Health Medical Group, TrueNorth Community Services, UnitedHealthcare, Walkerville Thrives / Healthy Lifestyles

Identified Partnering Organizations:
American Lung Association, Area Agency on Aging , Big Rapids CMH Clubhouse, Big Rapids Farmers Market, Big Rapids library, Centra Wellness, City of Big Rapids, CMREN/Ferris State University, Family Fare, Golden Sands, Healthy Lifestyles, Lakeside Rehab, Lions Club, LiveWell, Mason County Parks Commission, McLaren Health Plan, MDHHS, Mercy Health Project, Migrant Council, MyPlate, Northwest Michigan Health Services, Oceana County Council on Aging, Prescription for Health program, Public School System, Senior Centers, Senior Resources, Spartan Nash, Telamon, UDIGIT Community Garden

OVERVIEW: 2022 Environmental Scan

Arenac, Clare, Gladwin, Isabella, Lake, Mason, Mecosta, Newaygo, Oceana, Osceola.

31 ACCESS TO HEALTHCARE

32 CHRONIC DISEASE

67 TOTAL RESPONSES

23 ECONOMIC SECURITY

36 MENTAL HEALTH

Economic Security

Environmental Scan Organization Participation:
Baldwin Family Health Care, Central Michigan District Health Department, Citizen, City of Hart, City of Ludington, Community Connections, District Health Department #10, Fremont Area Community Foundation, Isabella Citizens for Health, Lakeshore Food Club, Lost in Translation, MidMichigan Community Health Services, New Era Farmers Market, Newaygo County Community Collaborate (NC3), Spectrum Health, TrueNorth, United Way of Mason County,

Identified Partnering Organizations:
Aldi, Beaverton Area Business Association, Department of Nutritional Sciences University of Michigan School of Public Health, DHHS MI Bridges Navigation, Dogwood Community Development, Family Fare, LiveWell Newaygo, Ludington Meat Company, Mason County Veterans, Mecosta/Osceola HSCB, Medicaid providers, Meijer, Michigan works, Mid-Michigan Community Action Agency, Staircase Youth Services, UDIGIT, United Way of the Lakeshore, Walmart,

Mental Health

Environmental Scan Organization Participation:
Arbor Circle, Central Michigan District Health Department, City of Ludington, Clare Public Schools, Central Michigan Recovery and Education Network, Community Connections, Community PACE, DHHS, District Health Department #10, Family Health Care, Flowers By Mary Ann, Harmonized Healing Counseling Services Inc., Isabella Citizens for Health, MidMichigan Community Health Services, MSU Extension, MyMichigan Health, Newaygo County Community Collaborate (NC3), Newaygo County Mental Health, Senior Resources of West Michigan, Spectrum Health, Ten16 Wellness and Recovery, Trinity Health Medical Group, TrueNorth Community Services, United Way of Mason County, West Michigan Community Mental Health
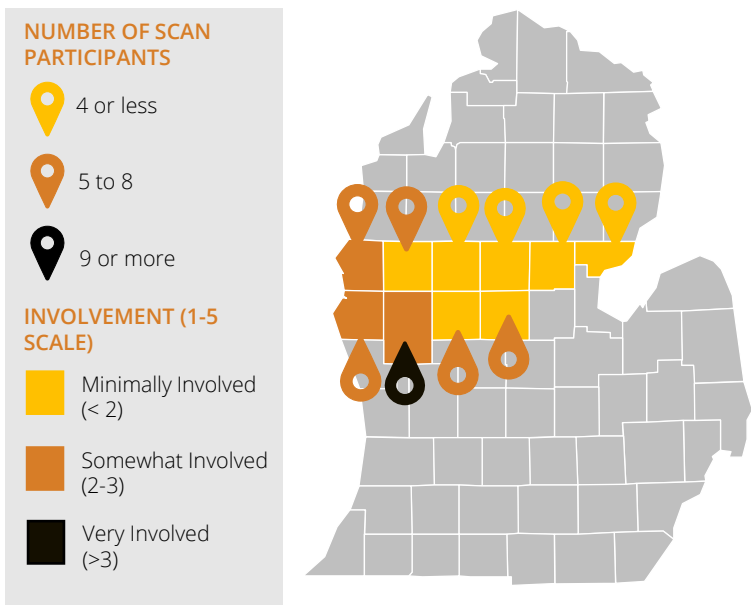
Identified Partnering Organizations:
211, 988 Lifeline, Ascension Hospital, BRRC, Community Mental Health Association of Michigan, Community Mental Health for Central Michigan, Families Against Narcotics, Ferris State University, Gateway to Success Academy, Harmonized Healing Project Headway - Newaygo Mecosta/Osceola School Counselors, HSCB, Interconnected systems framework group, Livewell, Ludington Area School District, Mason County Central Schools, Mason County Eastern Schools, Mecosta Commission on Aging, Mecosta County Sheriff, Mecosta Osceola Substance Awareness Coalition (MOSAC), Mecosta/Osceola Drug Court, MI Works, MiOPEN - U of M MSU Extension Michigan Opioid Collaborative (MOC), Newaygo County RESA, Newaygo County Courts (juvenile), Newaygo County DHHS, Newaygo county jail/ sheriff's department, Osceola Commission on Aging, Osceola County Sheriff, Reach the Forgotten Jail Ministry Jonah Foundation, School wellness centers, Staircase Youth Services, Vulnerable Adults Group, West Michigan Community Mental Health, West Shore Educational School District

ACCESS TO HEALTHCARE

Goal: Increase access to healthcare by establishing a transportation triage of use.

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

- 📍 4 or less
- 📍 5 to 8
- 📍 9 or more

INVOLVEMENT (1-5 SCALE)

- 🟨 Minimally Involved (< 2)
- 🟧 Somewhat Involved (2-3)
- ⬛ Very Involved (>3)

Engagement & Sustainability Related to Shared Goal

Engagement

Programs	12
Systems-level work	14
Data	7
Not currently involved but want to be	2
Not interested in goal	3

Sustainability

|	
Grant-funded & Sustainability Plan	6
Grant-funded & No Sustainability Plan	
Work included in Strategic Plan or Workplan	14
Starting Work Next Year	1
Not interested in goal	

Existing Efforts:

- Transportation to providers for older adults

- Preventative testing through WIC for women and children

- Prepaid transportation options such as cab, NEMT, and local transit cab companies (i.e., existing resources) to offer these services to existing patients

- Medicaid transportation assistance to health appointment for children in foster care

- Gas cards or dial-a-ride tokens

- Mass transit and Rides to Wellness programs for underserved

- Telemedicine and delivery services for prescriptions

- Shared referrals and interagency coordination

- Community connection resources

- Home visits, longer office hours, and incentives to visit clinic

- Navigate insurance and aid in access to mental and dental care
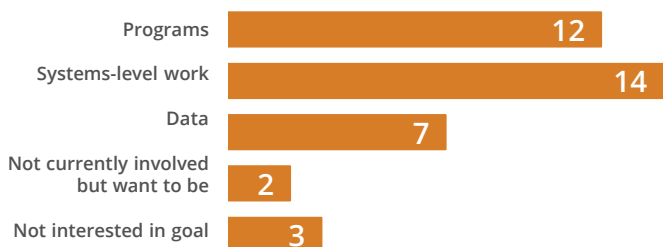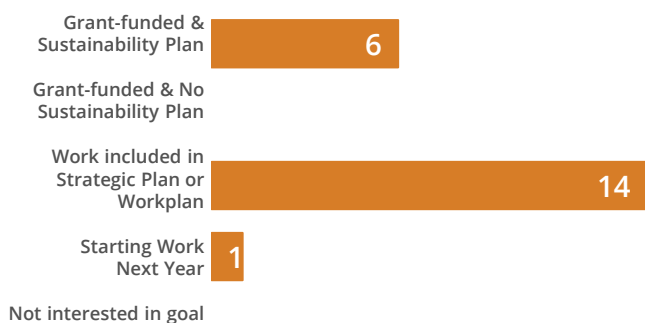
Top Barriers:

🚧	Funding
🚧	Staffing limitations; amount of staff & time
🚧	Cost of programs
🚧	Lack of collaboration & shared platforms
🚧	Training staff on program offerings
🚧	Communication & outreach to clients
🚧	Availability of ride-share programs & drivers

CHRONIC DISEASE

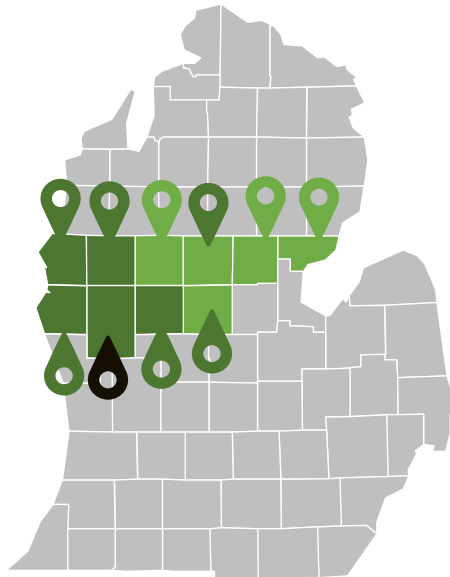Goal: Use health policy to prevent disease and improve health.

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

- 4 or less
- 5 to 8
- 9 or more

INVOLVEMENT (1-5 SCALE)

- Minimally Involved (< 2)
- Somewhat Involved (2-3)
- Very Involved (>3)

Engagement & Sustainability related to Shared Goal

Engagement

Programs	15
Systems-level work	15
Data	12
Not currently involved but want to be	2
Not interested in goal	

Sustainability

|	
Grant-funded & Sustainability Plan	8
Grant-funded & No Sustainability Plan	5
Work included in Strategic Plan or Workplan	16
Starting Work Next Year	5
Not interested in goal	

Existing Efforts:

- Evidence-based disease prevention workshops; diabetes & chronic pain for individuals over 60

- Tobacco-free programs in schools, environmental assessments to create policy change around nutrition and physical activity, gardening and locally sourced foods programs

- Diabetes Prevention Program, Tobacco Dependence Treatment Program, Tobacco policies regarding vaping in schools, Tobacco-free parks, maternal smoking cessation, Heart Age Screenings and referrals to risk reduction programs, SNAP -Ed programming

- Blood pressure monitoring, SUD/Overdose telehealth, MAT therapy, Vaccinations of preventable diseases

- Coordinated Approach to Childhood Health CATCH

- Follow-up with patients after hospital discharge

- Tai Chi, Cancer screenings, Fall prevention, Diabetes self-management, Mindfulness, Chronic pain management

- STD, HIV screening, syringe service program
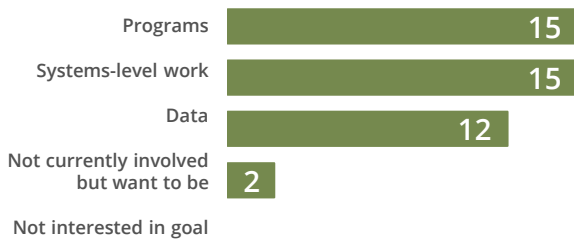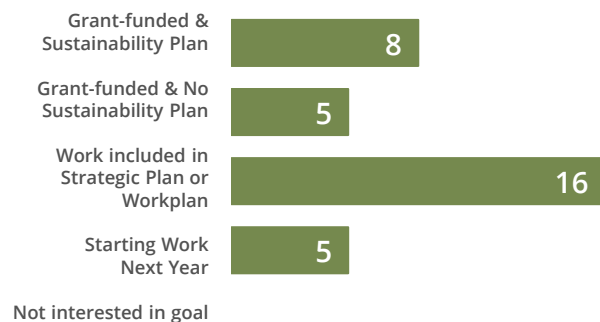
Top Barriers:

	Finding partners to collaborate
	Cost; Grant funding & Staffing limitations; amount of staff & time
	Community need outside of funding scope
	Lack of collaboration & shared platforms, Differing priorities between partners
	Duplication of programs & finding community leaders
	Existing services/programs vs more appropriate efforts
	Healthcare provider shortage, transportation, internet/phone service
	Scaling up resources across all counties & community engagement in programs

GET INVOLVED! Find out how we are collectively moving to action: mithrive@northernmichiganchir.org.

CHRONIC DISEASE

Goal: Reduce rates of heart disease and related risk factors in the region by helping people get the recommended preventive healthcare services.
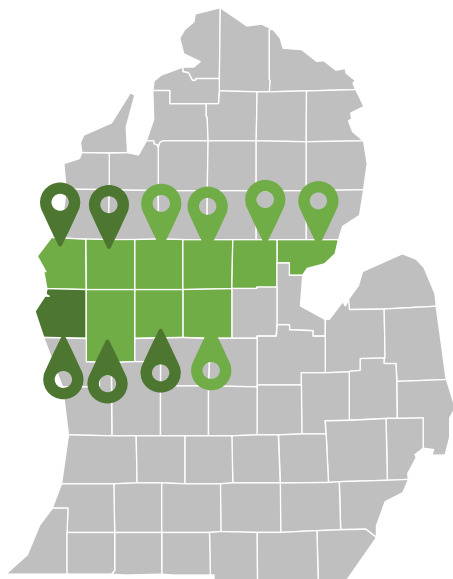
Number of Scan Participants & Involvement by County

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INVOLVEMENT (1-5 SCALE)

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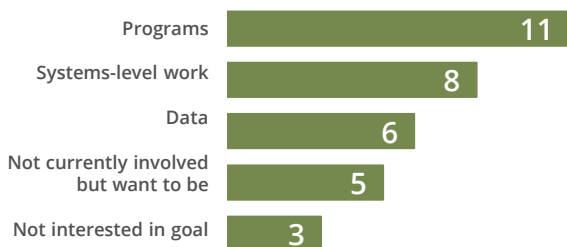- Somewhat Involved (2-3)
- Very Involved (>3)
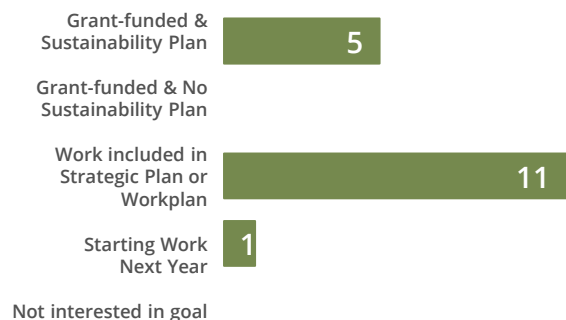
Existing Efforts:

- Strategy in community health improvement plan

- Screening for heart disease risk factors and help individuals navigate healthcare resources.

- Help individuals address barriers to care, and locate primary care physicians and encourage follow-up appointments

- Nutrition education and physical activity programs, tobacco cessation, weight management, and diabetes prevention services, worksite wellness screenings

- Work with community partners to increase referrals and collaborate around shared plans

- Care management and transition of care, reaching out to patients who are behind in preventative care

Engagement & Sustainability related to Shared Goal

Engagement

Programs	11
Systems-level work	8
Data	6
Not currently involved but want to be	5
Not interested in goal	3

Sustainability

Grant-funded & Sustainability Plan	5
Grant-funded & No Sustainability Plan	
Work included in Strategic Plan or Workplan	11
Starting Work Next Year	1
Not interested in goal	

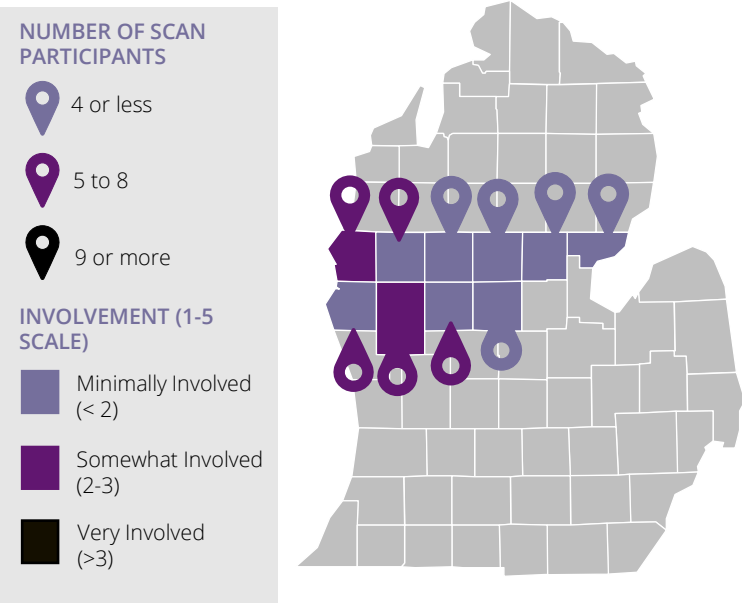## Top Barriers:

	Patient adherence to lifestyle changes
	Staffing limitations; amount of staff & time
	Difficult to share knowledge with general public
	Lack of collaboration & shared platforms
	Large rural geographical area
	Internet capabilities
	Transportation

ECONOMIC SECURITY

Goal: Increase resource utilization for households at or below the Asset Limited, Income Constrained Employed (ALICE) level.

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

- 4 or less
- 5 to 8
- 9 or more

INVOLVEMENT (1-5 SCALE)

- Minimally Involved (< 2)
- Somewhat Involved (2-3)
- Very Involved (>3)

Engagement & Sustainability related to Shared Goal

Engagement

Programs	6
Systems-level work	7
Data	5
Not currently involved but want to be	1
Not interested in goal	1

Sustainability

|	
Grant-funded & Sustainability Plan	5
Grant-funded & No Sustainability Plan	1
Work included in Strategic Plan or Workplan	5
Starting Work Next Year	1
Not interested in goal	

Existing Efforts:

- Work with Medicaid providers and assist people applying for insurance and employment. Address through enhancing health insurance coverage and helping patients navigate healthcare plans

- Utilization of Community Health Workers to connect individuals with resources

- Connect individuals with employer resources and family assistance resources through three school districts. Allow individuals to become successful in school. Partner with local schools, colleges, companies, and mental health to share services

- Aid individuals accessing food, housing, utility assistance
- Participating in county-wide housing study and community development coalition

- Work towards reducing stigma, poverty, discrimination, and marginalized populations

- Provide local grant incentives and conduct economic studies that improve education, infrastructure, regional collaboration, industry activities, and destination marketing
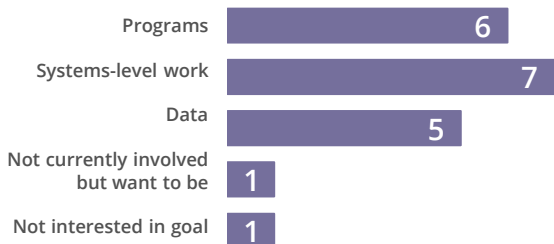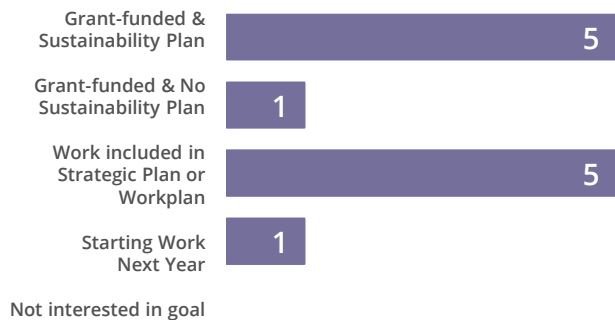
Top Barriers:

|	
🚧	Funding & loss of federal funds to help individuals
🚧	Staffing limitations; amount of staff & time
🚧	Access to services across agencies
🚧	Resources and programs that have income caps, difficult applications and documentation needed, language barriers, and phone meetings during work hours
🚧	Housing availability; eviction and shut off notices before resources can help
🚧	No specific plans or programs in place to target this issue

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

📍 4 or less

📍 5 to 8

📍 9 or more

INVOLVEMENT (1-5 SCALE)

⬛ Minimally Involved (< 2)
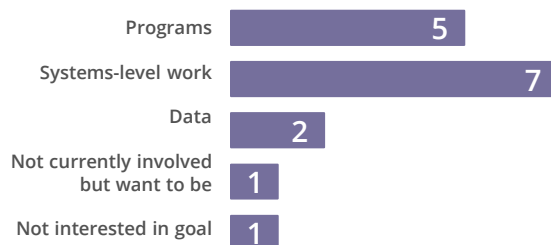
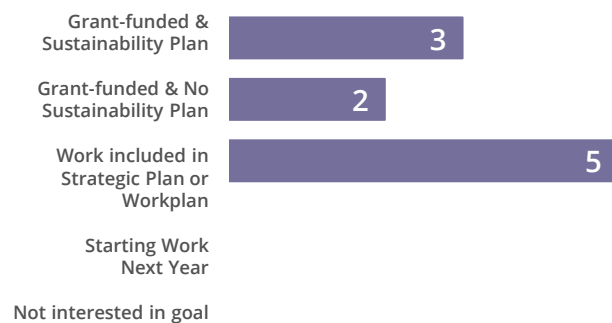⬛ Somewhat Involved (2-3)

⬛ Very Involved (>3)
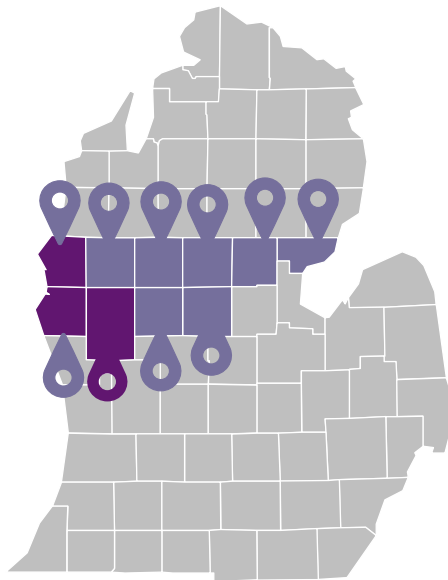
Existing Efforts:

- Refer participants to programs if they desire high paying job or educational attainment

- Help individuals save $200 to $400 a month by providing groceries so individuals can spend their money elsewhere

- Creating and maintaining healthy communities that will help economic growth

Engagement & Sustainability related to Shared Goal

Engagement

Programs	5
Systems-level work	7
Data	2
Not currently involved but want to be	1
Not interested in goal	1

Sustainability

Grant-funded & Sustainability Plan	3
Grant-funded & No Sustainability Plan	2
Work included in Strategic Plan or Workplan	5
Starting Work Next Year	
Not interested in goal	

Top Barriers:

🚧	Funding
🚧	No specific plans or programs in place to target this issue
🚧	Lack of collaboration & shared platforms
🚧	Keeping workforce engaged, systematic change takes a long time to see progress
🚧	Cost of living continues to increase, maintaining budgets becomes more difficult
🚧	Programs not inclusive of individuals who need assistance above the income cap

MENTAL HEALTH

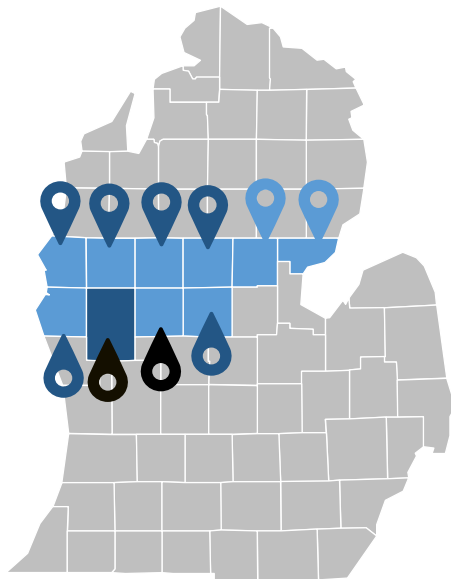**Goal: Increase access to mental health services unique to the community.**

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

- 4 or less
- 5 to 8
- 9 or more

INVOLVEMENT (1-5 SCALE)

- Minimally Involved (< 2)
- Somewhat Involved (2-3)
- Very Involved (>3)

Engagement & Sustainability related to Shared Goal

Engagement

Programs	16
Systems-level work	11
Data	9
Not currently involved but want to be	1
Not interested in goal	1

Sustainability

|	
Grant-funded & Sustainability Plan	10
Grant-funded & No Sustainability Plan	4
Work included in Strategic Plan or Workplan	14
Starting Work Next Year	2
Not interested in goal	

Existing Efforts:

- Mental Health First Aid, Stress Reduction, Mindfulness

- Refer mental health concerns to professionals

- Programs for life skills using holistic health techniques for youth

- In-house and school-based therapists

- Expanding access to behavioral health consultation for primary care and telehealth

- Creating coalition to work on stigma reduction content and dissemination and coalition on K-12 mental health awareness

- Help individuals navigate finding a behavioral health provider

- Suicide awareness programing, telehealth visits to SUD/OUD patients, group therapy, support groups

- Mental health service delivery system (referrals and data) across multiple public-school districts

- Mental health services to individuals that are home-bound or in incarceration
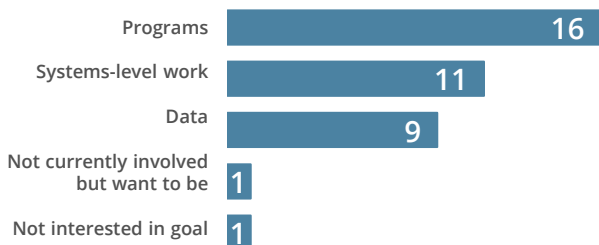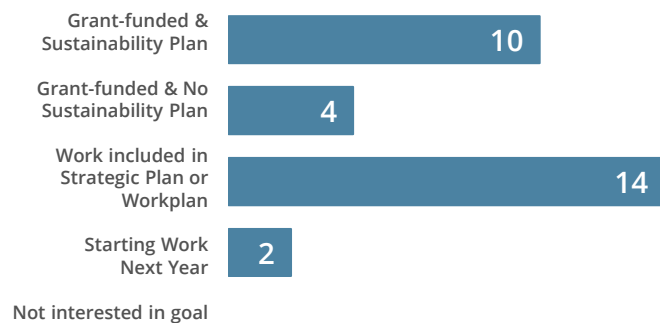
Top Barriers:

	Funding
	Staffing limitations; amount of staff & time
	Stigma
	Insurance, Lack of providers, long waitlist, especially those with Medicaid or uninsured
	Transportation
	Access to mental health information
	Language barriers
	Community engagement

MENTAL HEALTH

Goal: Improve mental health.

Number of Scan Participants & Involvement by County

NUMBER OF SCAN PARTICIPANTS

📍 4 or less

📍 5 to 8

📍 9 or more

INVOLVEMENT (1-5 SCALE)

🟦 Minimally Involved (< 2)

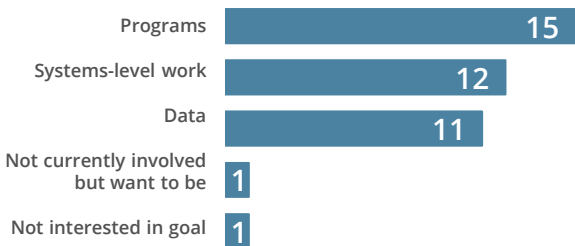🟦 Somewhat Involved (2-3)

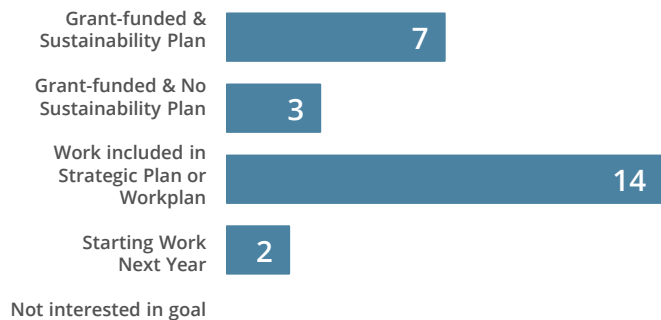⬛ Very Involved (>3)
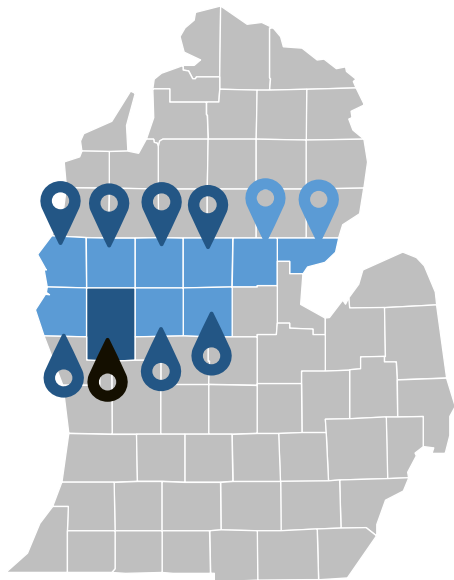
Existing Efforts:

- Programs for adults, children, and elderly on emotion and behavior concerns, as well as developmental disabilities

- Staff attend committees at state level to deal with complex issues related to accessibility to services and program funding

- Internal agency implementing employee mental health

- Tele-pharmacy, SUD education, Narcan and bystander training, at-home drug disposal, families against narcotics, SUD treatment before jail

- Regular screenings of mental health

- Community education and awareness, school education

Engagement & Sustainability related to Shared Goal

Engagement

Category	Value
Programs	15
Systems-level work	12
Data	11
Not currently involved but want to be	1
Not interested in goal	1

Sustainability

Category	Value
Grant-funded & Sustainability Plan	7
Grant-funded & No Sustainability Plan	3
Work included in Strategic Plan or Workplan	14
Starting Work Next Year	2
Not interested in goal	

Top Barriers:

🚧	Funding
🚧	Lack of providers, long waiting
🚧	Access to services
🚧	Policy and funding changes that do not consider client or staff impacts
🚧	Stigma

Number of Scan Participants that Identified Work Outside of the Shared Goals but Aligned with the Priority Areas

9

NONE OF THE ABOVE

Existing Efforts:

- College and Career Readiness, Post Secondary Degree/Certification attainment, FAFSA

- Assisting citizens returning to the workforce, aiding in obtaining essential documents such as SS card, Driver's license, and birth certificate

- Homelessness Prevention and Intervention for ages 17 to 24

- Child welfare; abuse and neglect. Working with families to reduce their risk of re-occurring neglect, licensing foster homes

- Outreach to youth ages 12 to 23 who are runaways, homeless, or at-risk

- Public library; internet and printing

- Substance Abuse Prevention and K-12 Homelessness

- Translation of documents, Interpreting, Education referrals

Additional Comments from the Environmental Scan:

- It is anticipated that 2022 will financially harder than 2021 for community members. Especially due to COVID-related resources starting to be reduced.

- We need more community organizations to be aware of shared goals and know how they will be measured.

- Chronic Disease is usually worsened by behavior and lifestyle choices. The priority area should focus on creating a healthy community instead of Chronic Disease.