



2023 Strategy Guide





Narrative Page

With the participation of over 300 community partners from diverse sectors, MiThrive is committed to fostering a shared vision for northern lower Michigan, where everyone has equitable opportunities to live healthy and thriving lives. Recognizing that no single individual, community group, hospital agency or government body can bear sole responsibility for the community's well-being, MiThrive aims to establish a culture of health based on a common purpose, vision, and shared priorities outlined in the MiThrive Community Health Improvement Plan (CHIP). By uniting around these principles, we believe we can drive systemic change and improve population outcomes. Together, we have the ability to create a flourishing region that promotes well-being for all, regardless of our differences.

The MiThrive Strategy Guide is grounded in the shared priorities identified in the MiThrive Community Health Assessment; Access to Health Care, Chronic Disease, Mental Health, Substance Use, Economic Security, and Housing. For more on the MiThrive prioritization process, click [here](#). The strategy guide aims to showcase evidence-based strategies for community improvement and highlight success stories, Local Bright Spots, which have been successful in our region.

Evidence-based strategies prioritize using approaches that have proven effectiveness over those based solely on intuition, personal anecdotes, or tradition. They provide a solid foundation for decision-making and implementation, as they are informed by scientific evidence and have a higher likelihood of producing positive outcomes.

According to the Robert Wood Johnson Foundation's [What Works for Health](#), whether you are considering a 'tried and true' strategy or a more innovative approach, it is important to consider your community's culture, priorities, and resources along with evidence of effectiveness. For example:

How feasible is it to implement your preferred strategy in your community?

Are there resources available to implement the strategy? Political will to support it?

Is your community ready for the strategy? Will they support it?

Involving a broad group of stakeholders, including local data and subject matter experts and members of the community you want to serve, can help you select the best strategy for your community.

Questions? Please email mithrive@northernmichiganchir.org.





Strategies

Federally Qualified Health Centers (FQHCs) are public and private non-profit health care organizations that receive federal funding under Section 330 of the Public Health Service Act. Governed by a community board, FQHCs deliver comprehensive care to uninsured, underinsured, and vulnerable patients regardless of ability to pay. FQHCs are located in high need communities in urban and rural areas.

Higher Education Financial Incentives

Financial incentive programs offer scholarships and loans with service requirements, educational loans with a service option, and loan repayment or forgiveness programs to encourage health care providers to serve in regions that are rural, underserved, or Health Professional Shortage Areas (HPSA).

Mobile Reproductive Health Clinics

Mobile reproductive health clinics are medically equipped vans with clinicians that offer reproductive health services, such as pregnancy tests, prenatal and postpartum care, gynecological exams, sexually transmitted infection (STI) screenings, health education, and referrals to social services.

School-based Health Centers

School-based health centers (SBHCs) provide elementary, middle, and high school students a variety of health care services on school premises or at off-site centers linked to schools.

Health Insurance Enrollment Outreach & Support

Health insurance enrollment outreach and support programs assist individuals whose employers do not offer affordable coverage, who are self-employed, or unemployed with health insurance needs; individuals may be uninsured or need assistance renewing coverage.

School Dental Programs

School dental programs include screening students for dental needs, sealant programs to protect students' permanent molars, fluoride treatment, and other preventive dental care.

Health Literacy

Health information and services are often unfamiliar, complicated, and technical, even for people with higher levels of education. Health literacy is the degree to which people have the capacity to obtain, process, and understand basic health information and services required to make appropriate health decisions. Low levels of health literacy are associated with limited health related knowledge, poor health outcomes and behaviors such as limited use of preventive care. [Health literacy can be improved](#) by developing and disseminating health and safety information that is accurate, accessible, and actionable by various health care providers, clinic staff, and public health professionals.

Transportation

Transportation is an important social determinant of health in rural communities. The availability of reliable transportation impacts a person's ability to access appropriate and well-coordinated health-care, purchase nutritious food, and otherwise care for themselves. Coordinating a regional transportation service model can significantly [support rural healthcare](#). Click for more info:

- [Carewell Rides to Wellness Pilot Program](#)
- [Case Study Example](#)
- [Rural Transportation Services](#)

Broadband

Broadband is high speed internet access that is faster than dial-up and ready for use immediately. Engaging in collective advocacy efforts to [increase access to and affordability of broadband](#) can reduce barriers to health services that will improve health outcomes, social connectedness, and overall well-being.

Community Connections

Community Connections utilizes a proven Pathways Community HUB Institute model to help communities come together to support their under-resourced residents and to improve health and well-being. Through the use of Community Health Workers (CHWs), this model allows for communities to build a transformative and sustainable community-based care coordination network.

Health Literacy

Health literacy is the degree to which people have the capacity to obtain, process, and understand basic health information and services required to make appropriate health decisions. Low levels of health literacy are associated with limited health-related knowledge, poor health outcomes, and behaviors such as limited use of preventive care as well as higher health care costs and expenditures.

Telemedicine

Telemedicine, sometimes called telehealth, uses telecommunications technology to deliver consultative, diagnostic, and health care treatment services. Telemedicine can supplement health care services for patients who would benefit from frequent monitoring or provide services to individuals in areas with limited access to care.

Motivational Interviewing

Motivational Interviewing (MI) is an evidence-based treatment that addresses ambivalence to change. MI is a conversational approach designed to help people enhance their confidence in taking action and noticing that even small, incremental changes are important and strengthen their commitment to change.

Bright Spot: Community Connections

Community Health Workers (CHW) navigating services; evidenced-based equity focused.

Challenge: Access to care and other Social Determinates of Health.

Approach: Certified CHWs help clients by providing navigation services while using evidence-based pathways to meet client's outcomes. The model provides infrastructure to track risk factors from identification through evidence-based strategies and directly impacted outcomes. The Community Connections program partners with primary care providers, dental home providers, hospital health systems, Medicaid health plans, and community-based organizations.

Results: Our greatest outcome is our Community Connection Pathway Data indicating outcomes and why or why not client needs were met.

Lessons Learned: Evidence based navigation services are important for CHW work. It has allowed our program to easily track and compare outcomes.

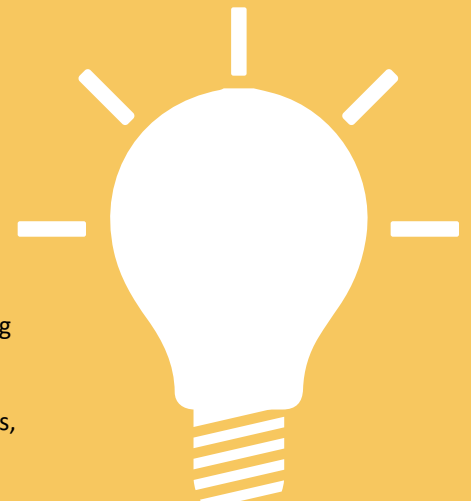
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Vantage Plastics and Central Michigan District Health Department (CMDHD) are working in a private/public partnership implementing evidence-based social determinants of health (SDOH) interventions to cultivate an able-bodied work force. Vantage Plastics, based in Standish, MI - Arenac County, presented a 101.3% turnover in 2022 calendar year, with an estimated financial loss of over 1.5 million dollars.

Beginning January 1, 2023, with collaboration of the de Beaumont Foundation, CMDHD provided a part-time Community Health Worker embedded into Vantage Plastics. This individual provides Pathways HUB evidence-based interventions through Community Connections programming. This model addresses SDOH needs until met, through coordinating, monitoring, advocating, and connecting of existing programs and resources.

Findings within the first quarter produced a nine-percent decrease in turnover at Vantage Plastics. The most significant SDOHs impacting staff include transportation, insurance, and obtaining work-related attire (boots, jeans, etc.). CMDHD's Community Health Worker has and continues to assist employees with over 155 SDOH needs. Secondary effects of program implementation include increased accessibility of communication, clear avenues for self-advocacy for employees, proactive intervention strategies, and additional community collaborations.



COMMUNITY connections





Strategies

Farmers Markets

A farmers market is a multiple vendor farm-to-consumer retail operation, where producers sell goods directly to consumers at a set outdoor or indoor location.

Fruit & Vegetable Incentive Programs

Fruit and vegetable incentive programs, often called bonus dollars, market bucks, produce coupons, or nutrition incentives, offer participants with low incomes matching funds to purchase healthy foods, especially fresh fruits and vegetables. Incentive amounts vary from dollar-to-dollar matches to matched spending increments (i.e., \$1 for \$5 spent); most programs set a daily benefit limit, often \$10 or \$20. Incentives are frequently redeemed at farmers markets, but can also be used at grocery stores, mobile markets, or through community supported agriculture (CSA) shares.

Healthy Food Initiatives in Food Pantries

Food pantry and food bank healthy food initiatives combine hunger relief efforts with nutrition information and healthy eating opportunities for individuals and families with low incomes.

Nutrition Prescriptions

Nutrition prescriptions are one way for physicians and other health care providers to outline a healthy, balanced eating plan for patients. Based on US Dietary Guidelines for adults, children, and adolescents, nutrition prescriptions establish achievable goals for patients and their families.

Mobile Reproductive Health Clinics

Mobile reproductive health clinics are medically equipped vans with clinicians that offer reproductive health services, such as pregnancy tests, prenatal and postpartum care, gynecological exams, sexually transmitted infection (STI) screenings, health education, and referrals to social services.

School-based Health Centers

School-based health centers (SBHCs) provide elementary, middle, and high school students a variety of health care services on school premises or at off-site centers linked to schools.

Health in All Policies

[Health in all policies](#) (HiAP) is a collaborative approach that integrates and articulates health considerations into policymaking across sectors to improve the health of all communities and people. Additional strategies related to HiAP can be found in the [MDHHS SDOH Roadmap to Healthy Communities](#).

Click for more info:

- [Health Policy Handbook](#)
- [Social Service Integration](#)

Community Health Workers

Community Health workers (CHWs) serve a variety of functions to achieve an increase in patient knowledge, access to care, and a higher likelihood of engaging in healthy behaviors and preventative care. [Increasing the use of community health workers](#), will improve the likelihood of individuals engaging in preventative healthcare services.

School-based Nutrition Programs

Coordinated Approach to Child Health (CATCH) is a school health program that focuses on coordinating the efforts of teachers, school staff, and the community. CATCH promotes physical activity and healthy food choices for children from preschool through eighth grade. For more info about CATCH, view the video [here](#).

Employee Wellness Programs

Worksite nutrition and physical activity programs are designed to improve health-related behaviors and health outcomes. These programs can include one or more approaches to support behavioral change including informational and educational, behavioral and social, and policy and environmental strategies.

Communication

Michigan's Community Information Exchange (CIE) is a localized effort to create and sustain the technology and relationships required to support Social Determinants of Health (SDOH) needs of both individual and community. CIE maximizes a person-centered approach by ensuring social care information is collected only as needed and is stored safely. CIE also promotes streamlined access to health enhancing non-clinical services (e.g., social services and supports), helping to coordinate care across a variety of clinical and non-clinical partners, while using data on existing community resources, needs, and gaps to drive policy change.

Bright Spot: CATCH Program

Challenge: Children who are physically active and eat healthy learn better and have better social and emotional skills. Children who are healthy grow into healthy adults. CATCH is an effective means of preventing childhood obesity, in an environment that's fun and easy to sustain.

Approach: CATCH is a tool for creating and maintaining a healthy school environment.

The goals of the CATCH program are to:

- Create an enjoyable and safe environment that teaches, reinforces, recognizes and celebrates healthy behaviors.
- Create an environment that provides motivation and opportunities for children, faculty and staff to adopt physical activity and healthy eating behaviors daily.
- Teach children the knowledge and skills that support living a healthy lifestyle and provide opportunities for them to practice those healthy behaviors.

The CATCH program provides resources and a common language for talking about and reinforcing healthy behaviors throughout the entire school. Grayling Elementary teachers used the CATCH Curriculum lessons, which educate and motivate students to adopt healthy eating and physical activity behaviors. Students learned to identify healthy foods and find creative ways to increase their daily activity. For example, CATCH uses language that students can relate to for identifying healthy food choices. These are: GO foods, SLOW foods and WHOA foods. This simple term—fashioned after green, red and yellow traffic signals—reminds kids that GO foods are nutritious and can be eaten every day, while highly processed and sugary WHOA foods should be eaten sparingly. SLOW foods fall somewhere in between. These types of labels are communicated not just verbally in classrooms, but on posters in lunchrooms, cafeterias and hallways.

Grayling Elementary School implemented CATCH theme weeks throughout the year that involved all the school staff, students and parents. Food service staff labeled foods in the cafeteria as go, slow, and whoa foods, principals provided healthy messages in morning announcements, physical education teachers taught CATCH lessons in physical education class, teachers taught CATCH lessons in the classroom, staff participated in staff wellness activities to model healthy behaviors, and para-pros handed out “caught doing good cards when seeing students making healthy choices.

“CATCH is a great program that enhanced our efforts at GES to provide health education to the students. The staff really engaged in the ideas of CATCH and the students caught on fast. Students at GES would run up to me in the hallway and tell me their GO food for the day” said Samantha Rogers, GES School Nurse.

Results: Pre and post surveys conducted with Grayling Elementary students who participated in CATCH classroom lessons showed decreased screen time, increased fruit and vegetable consumption, decreased pop consumption, and increased milk consumption.

As part of the plan to continue to change the school's wellness environment, GES staff participated in a Bal-a-Vis-X training and purchased equipment to implement this program at the school. Bal-A-Vis-X is a series of Balance/Auditory/Vision exercises, of varied complexity, all deeply rooted in rhythm. It requires focused attention, demands cooperation, promotes self-challenge, and fosters peer teaching. Those staff members who attended are prepared to start teaching students on a one-to-one basis. Through peer-teaching and continued education/training GES staff will continue to integrate Bal-A-Vis-X throughout the school district.

Partnerships were strengthened with District Health Department #10, Munson Healthcare Grayling hospital, and MSU Extension. As a result of the CATCH program, Grayling Elementary School was awarded the Silver School Wellness Award from the Michigan Department of Education. The CATCH program is embedded in the way Grayling Elementary School does business and Grayling Elementary plans to continue the program with technical assistance and resources from the CATCH Foundation to for the 23-24 school year.

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Strategies

Community Development Block Grants (CDBGs)

The US Department of Housing and Urban Development's (US HUD's) Community Development Block Grants (CDBGs) fund local community development activities such as affordable housing, anti-poverty programs, and infrastructure development.

Debt Advice for Tenants with Unpaid Rent

Trained providers offer tenants with unpaid rent advice to address their debts, often supporting establishment of debt repayment plans, budgets, and tools to keep track of income, debts, and spending.

Housing Choice Voucher Program (Section 8)

The Housing Choice Voucher Program (HCV), also known as Section 8, provides eligible low and very low income families with vouchers to help cover the costs of rental housing.

Bright Spot:

Northwest Michigan Coalition to End Homelessness: Initiative to End Chronic Homelessness

Chronic homelessness is one of the most complex issues facing our communities today. Chronic homelessness is life threatening and complex, but it's solvable with the right approach. Chronic homelessness can be solved, and the Northwest Michigan Coalition has committed to ending chronic homelessness by 2027.

Challenge: Reaching a functional end to chronic homelessness means that there will be fewer than 3 people experiencing chronic homelessness at any given time. The NW Michigan Coalition to End Homelessness (NWCEH) is committed to ending chronic homelessness in the next 5 years. By January 2028, there will be three or fewer people experiencing chronic homelessness in the Greater Grand Traverse Area, and on average there will be more people exiting chronic homelessness than are entering.

Approach:

- Increase outflow: More people will exit chronic homelessness each month than are entering.
- Decrease inflow: Less people will enter chronic homelessness each month.
- Maintain effective backbone support: Maintain effective backbone support/staffing of the Coalition to guide the vision and strategy for this work, support aligned activities, establish review and evaluate shared measurement practices, build public will, advance policy and mobilize funding.
- Increase public will to end chronic homelessness: Community leaders will become champions around the work to end homelessness.

Partners involved: NW Michigan Coalition to End Homelessness, Goodwill Northern Michigan, NW Michigan Supportive Housing, NW Michigan Community Action Agency, City of Traverse City, Grand Traverse County, Grand Traverse Regional Community Foundation, Housing North, Munson Medical Center, Rotary Charities, Traverse Connect, Traverse City Housing Commission, and people with lived experience of homelessness

Results: Our community has a unique opportunity to do something important that a few other communities have done: end chronic homelessness. We have the framework we need to make this a reality in our region. The numbers are doable: 70 people experiencing chronic homelessness, 75 units needed. In addition, we are geographically isolated from other urban centers that might otherwise complicate our efforts. If we work together, ending chronic homelessness in our region is absolutely possible.

Contact information:

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Substance Use

Click each strategy for more information.

Strategies

Harm Reduction Services

Harm reduction is an approach that emphasizes engaging directly with people who use drugs to prevent overdose and infectious disease transmission, improve the physical, mental, and social wellbeing of those served, and offer low-threshold options for accessing substance use disorder treatment and other health care services. Click for more info:

- [Syringe Service Programs](#)
- [Naloxone Education & Distribution Programs](#)

SUD Task force

Strategic Prevention Framework (SPF)

SAMHSA's SPF supports engagement of prevention professionals and community stakeholders in a data driven assessment process and provides a comprehensive approach to understanding and addressing substance use and related problems that states and communities face.



Bright Spot:

District Health Department #2 Harm Reduction Services

Implementing Harm Reduction Strategies to Prevent Disease and Overdose

Challenge: DHD #2 received Harm Reduction Funding in 2018. This was in response to address the need for prevention programming to reduce rates of Hepatitis C and HIV.

Approach: Harm reduction strategies to prevent disease and overdose are to expand syringe services in high need communities and to expand and target naloxone distribution. DHD#2 staff visited the Red Project in Grand Rapids to learn what they were doing for Harm Reduction Services. They found the need to partner with organizations in the community. They had to determine: "Is the community ready"? A partnership with law enforcement was developed. Staff met with people in the jails to determine their needs. They found that many were not ready for treatment but the need was to reduce the harm of substance use disorders until people are ready for treatment. Partnerships were also developed with Catholic Human Services, libraries, and community coalitions. Due to the fact that there is still a lot of stigma, DHD#2 staff were ready to meet people where they were at, being non-judgmental and compassionate, and developing relationships. Because there is a lack of resources in our rural areas and lack of treatment options, transportation was determined as a great need. People were struggling. DHD#2 provides a mobile unit van to go out to the community and bring services to people with substance use disorders.

Results: One of the greatest outcomes of the project is when people are part of this program they are more likely to seek treatment. One of the greatest lessons learned is that people need to see people with substance use disorders as people with hopes and dreams and a future. DHD#2 is hoping to start a program where Naloxone training is provided along with CPR training.

Contact information: Heather LeForce, hleforce@dhd2.org





Strategies

Youth Mental Health

Advocating for early and proactive services for youth within the community will support mental, behavioral, and emotional health. Services like Youth Mental Health First Aid equips participants to identify the unique risk factors and warning signs of mental health problems in adolescents and builds an understanding of the importance of early intervention. Click for more info:

- [Mental Health First Aid Courses](#)
- [CMHCM Mental Health First Aid Training](#)
- [School Based Trauma Counseling](#)

Mental Health Parity

The Mental Health Parity and Addiction Equity Act of 2008 generally requires that insurance coverage for mental health/substance use disorder be no more restrictive than coverage for medical surgical services. Building awareness around mental health parity can be an effective way to ensure compliance.

Mental Health First Aid

Mental Health First Aid is a skills-based training course that teaches participants about mental health and substance-use issues.

Positive: Action School Curriculum

A school-based social emotional learning program for students in elementary and middle schools to increase positive behavior, reduce negative behavior, and improve social and emotional learning and school climate.

Bright Spot:

Mental Health: Community Mental Health for Central Michigan Mental Health First Aid Program

Challenge: Most of us would know how to help if we saw someone having a heart attack—we'd start CPR, or at the very least, call 9-1-1. But too few of us would know how to respond if we saw someone having a panic attack or if we were concerned that a friend or co-worker might be showing signs of alcoholism.



Mental Health First Aid takes the fear and hesitation out of starting conversations about mental health and substance use problems by improving understanding and providing an action plan that teaches people to safely and responsibly identify and address a potential mental illness or substance use disorder.

When more people are equipped with the tools they need to start a dialogue, more people can get the help they need. Mental Health First Aiders are a vital link between someone experiencing a mental health or substance use challenge and appropriate supports.

MHFA trainers have trained 3 million people across the country. We/MHFA trainers with the support of the National Council for Mental Wellbeing are working to ensure everyone in America has at least one First Aider in their close circle of friends, family and peers. Every 1 in 15 people should be certified to identify, understand and respond to signs and symptoms of mental health and substance use challenges. Together, we will reach millions more.

Approach: Marketing and promotional activities

A variety of MHFA training programs are available such as: MHFA for Military, Veterans, & their Families, MHFA for Public Safety, MHFA for Older & Aging Adults, Youth MHFA, MHFA for Higher Education, teen MHFA.

<https://www.mentalhealthfirstaid.org/population-focused-modules/public-safety/>

We have partnered/provided training programs at: Mid Michigan College, Ferris State University, local schools & churches, and many local agencies in our community such as: Mid Michigan Community Action Agency, Isabella County Commission on Aging, Homeless Shelters, etc.

CMHCM is proud to offer both the MHFA Training courses throughout the CMHCM six county service area. If you live or work in Clare, Isabella, Gladwin, Midland, Osceola, or Mecosta County this training is free. If you don't live or work in CMHCM counties use this link to find a MHFA training in your county. <https://www.mentalhealthfirstaid.org/take-a-course/find-a-course/>

The course has several options for attendance: virtual, blended and In-person options. Classes can be scheduled for your group at times that will work for them!

Results: Evaluations reflect that participants have increased knowledge and have more confidence in their ability to talk with a friend or family member about a mental health problem and what services/supports may be available.

I have received letters and emails from people who have attended the course that state that they were able to respond and get help in a crisis situation saving the life of a loved one.

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Economic Security

Click each strategy for more information.

Strategies

ALICE

ALICE stands for Asset Limited, Income Constrained, Employed. United for ALICE is a driver of innovation, research, and action to improve life across the ALICE and for all. ALICE partners convene, advocate, and collaborate on solutions that promote financial stability at local, state, and national levels.

Broadband (also in access to healthcare)

Broadband is high speed internet access that is faster than dial-up and ready for use immediately. Engaging in collective advocacy efforts to increase access to and affordability of broadband can reduce barriers to health services that will improve health outcomes, social connectedness, and overall well-being.



Bright Spot:

Economic Security: Evert Promise Plus

Evert Promise Plus is creating a thriving community by investing in Evert Public Schools and improving access to post-secondary education, through scholarships, career and college readiness and support programs.

Challenge: Increasing access to post-secondary education and opportunities by reducing the barriers present. Including but not limited to the financial burden of education after high school. Our program also addresses the difficulty students face in navigating post-secondary education and being successful with a mentorship program.

Approach: Evert Promise Plus is available to all Evert Public School graduates. We work and partner with Evert Public schools to create college readiness curriculum, opportunities, and education to support our students in making post-secondary decisions.

The Evert Community and alumni have been a significant support both financially and physically. They contribute through volunteering, donations, and funding. Our support from the community and alum continues to grow and we look forward to this continuous partnership.

EPP partnered with Osceola County Community Foundation (OCCF) upon our creation for assistance in handling unique gifting, sustainability support as well as working to establish an endowment.

Results: The greatest outcome of this project is watching our students get excited about post-secondary education and opportunities and then helping them to achieve their goals through increased funding. We have over 30 students who currently receive the promise scholarship, totaling over \$130,000 to date. We expect the number of students utilizing the scholarship to nearly double for the 2023/2024 academic year.

Additionally, watching our community come together to create, build, and support this program has been amazing. It literally takes all of us to make this work. Our students, parents, administrators, alumni, and community members, as well as our big and small businesses are an integral part of the success of Evert Promise Plus. From events to direct donations to payroll deductions, all of Evert has come together to support this program.

There are always lessons along the way, literally at every corner, as we are all new to this in different ways. We take these lessons as opportunities to grow as an organization. Without these lessons, we would not be able to accomplish what we have as a non-profit in a small community.

Contact information:

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