

PUBLIC HEALTH IN MOTION

Gearing up for Prevention



NORTHERN MICHIGAN PUBLIC HEALTH ALLIANCE REPRESENTS:

7
Health Departments

31
Counties

841,558
Northern Michigan Constituents

16,669
Square Miles of Coverage

70%
Rural Living

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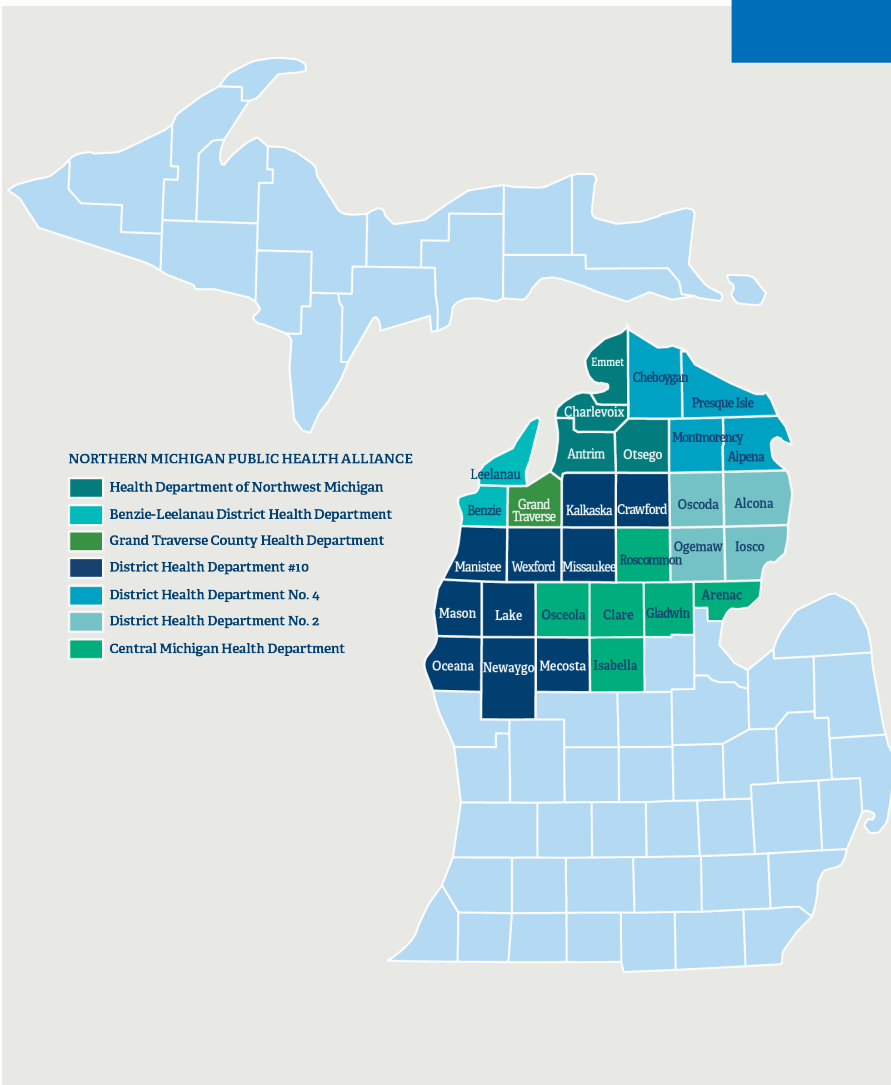
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DRIVING PROGRESS

Public Health in Motion

WHO WE ARE:

The Northern Michigan Public Health Alliance (NMPHA) is a team of healthcare agencies and providers in 31 Northern Lower Peninsula counties that joined together to strengthen public health across the region.



OUR TARGET POPULATIONS:



At-risk pregnant women, infants, and children



People with multiple chronic conditions



Super-utilizers of hospital emergency departments



Aging population with limited income potential



A rural mix of residents with limited access to resources



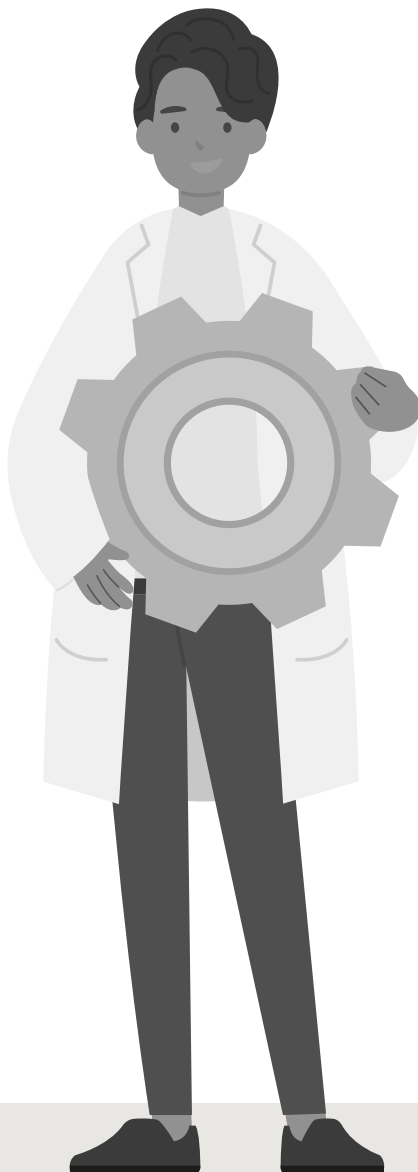
POWER OF APPRECIATION

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The balanced bipartisan FY24 “Make it in Michigan” budget has considerably boosted local health departments’ ability to provide essential local public health services. This budget made critical investments to ensure Michigan families can access the health-care they need. More than \$300 million additional funds were allocated for local public health across the state.

The NMPHA is extremely thankful to have this increase added to the budget as it helps drive our mission. Our alliance works together to improve the overall health of families and individuals in Northern Michigan. We appreciate our legislators joining us in this mission and enacting the much-needed support for our communities to thrive.

Thank you for your support!



DEFINING PUBLIC HEALTH IN MOTION

Public Health in Motion reflects the NMPHA’s efforts to move public health forward and drive progress by leveraging our resources and delivering tools to our residents that enable them to live safe and healthy lives. By collaborating, we can provide a sanitary code that works for our residents, address barriers to care and reduce health disparities, and help children succeed by providing essential hearing and vision screenings.

WE ASK FOR YOUR SUPPORT OF:



THE UNIFIED SANITARY CODE

Ask #1: Advocate for feasible unified Michigan Sanitary Code to protect our groundwater and surface water resource.

Right now, there is a crucial, existing disparity in groundwater and surface water protection due to individual county and district health department codes. By supporting collaboration on a unified sanitary code, we aim to establish a code that is feasible for all stakeholders.



THE SDOH HUB SUSTAINABILITY

Ask #2: Receive dedicated \$5 Million in Social Determinants of Health HUB funding to meet residents' basic needs.

The Community Connections Program, a branch of the Northern Michigan Community Health Innovation Region (NMCHIR), accomplishes this through the work of community health workers (CHW). Securing sufficient funding is important to meet the evolving needs of our communities and support our residents' health and wellbeing.



THE HEARING AND VISION PROGRAM

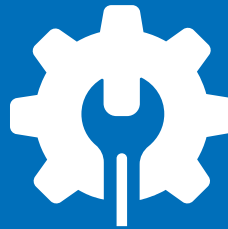
Ask #3: Support Michigan's youth with dedicated funding for state mandated hearing and vision screenings provided by local health departments.

In 2023, the Governor's budget increased funding to local essential services but hearing and vision was excluded from the budget. Last year, the seven health departments in the NMPHA provided more than 69,000 hearing and vision screenings and referred more than 4,300 for follow up services.



MAKING SANITARY CODES WORK

Public Health in Motion



Collaborate with stakeholders to develop a unified Sanitary Code that protects public health and the environment without overburdening local health departments and community partners.

CURRENT SANITARY CODES IN MICHIGAN

Currently, each county and district health departments have their own sanitary codes, leading to varied groundwater and surface water protection throughout the state. Our goal is to work together to create a unified Sanitary Code that meets the needs of all stakeholders. By ensuring adherence to unified sanitation standards, we can enhance public health, safeguard the environment, and ensure a sustainable future.

CONCERNS WITH CURRENT PROPOSED BILLS



- **Workforce:** We are concerned that local health departments lack the capacity to meet the requirements of proposed bills for a statewide sanitary code, which mandates the evaluation of all septic systems every five years. The workforce needed is estimated to be three times the current number of Environmental Health staff at local health departments.
- **Enforcement:** There are concerns about compliance, enforcement, and the involvement of local prosecutors.
- **Treatment:** The current capacity for septage treatment in Michigan is insufficient to accommodate the increased volume of septage from septic tank pumping due to required evaluations. Only a limited number of wastewater treatment plants are equipped to accept septage, and the availability of land application sites is decreasing annually.
- **Cost:** Implementing a septic system evaluation program on a five-year basis will impose significant financial burdens on property owners and local health departments. With approximately 1.4 million septic systems in the state requiring evaluation every five years, the workload would entail about 280,000 evaluations per year. This would necessitate substantial funding for local health departments to handle the demand, whether they conduct evaluations themselves or oversee private evaluators, while property owners would face fees ranging from \$400 to \$1000 per evaluation, resulting in an estimated statewide annual cost of \$196 million.¹

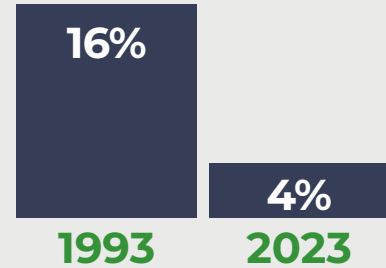
RECOMMENDATION TO CURRENT PROPOSED BILLS: TIME OF TRANSFER

As an alternative to a frequency-based evaluation model, our recommendation is to implement Time of Transfer, also known as Point-of-Sale evaluations, statewide. This approach has proven highly effective and feasible to implement at local health departments.

These evaluations aim to ensure the proper functioning of residential and commercial septic systems, reducing the risk of contamination and safeguarding water quality. One of the main criticisms of existing Time of Transfer septic evaluation programs is that not all properties transfer, such as those in family trusts, and therefore are never evaluated. We support the addition of risk-based initial evaluations of certain properties to capture issues not addressed by a Time of Transfer evaluation program.

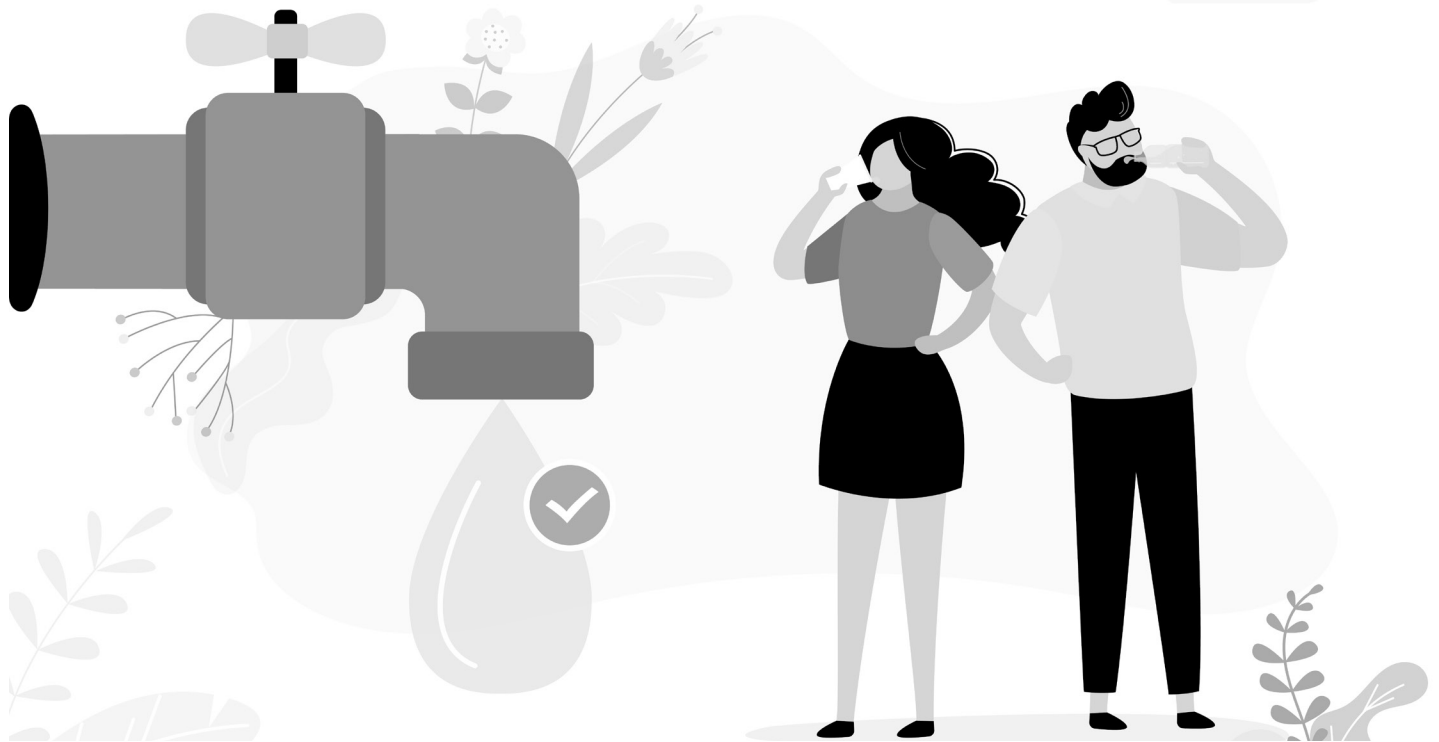


In Benzie County, where a Time of Transfer evaluation program has been in place for over 30 years, the number of non-compliant systems encountered annually has gradually decreased from approximately 16% in the beginning to 4% in 2023.¹



We kindly request your support in advocating for a unified Michigan Sanitary Code and measures to assist local health departments with additional responsibilities. Currently, House Bills 4479 and 4480, as written, propose a statewide frequency-based septic system evaluation program that is not feasible to implement considering current infrastructure and workforce conditions.

Let's work together to prevent water pollution, promote responsible wastewater management practices, and prioritize the health and well-being of all Michiganders through carefully crafted and implementable legislation to manage onsite wastewater infrastructure.



ASK: ADVOCATE FOR FEASIBLE UNIFIED MICHIGAN SANITARY CODE TO PROTECT OUR GROUNDWATER AND SURFACE WATER RESOURCES.

REMOVING BARRIERS

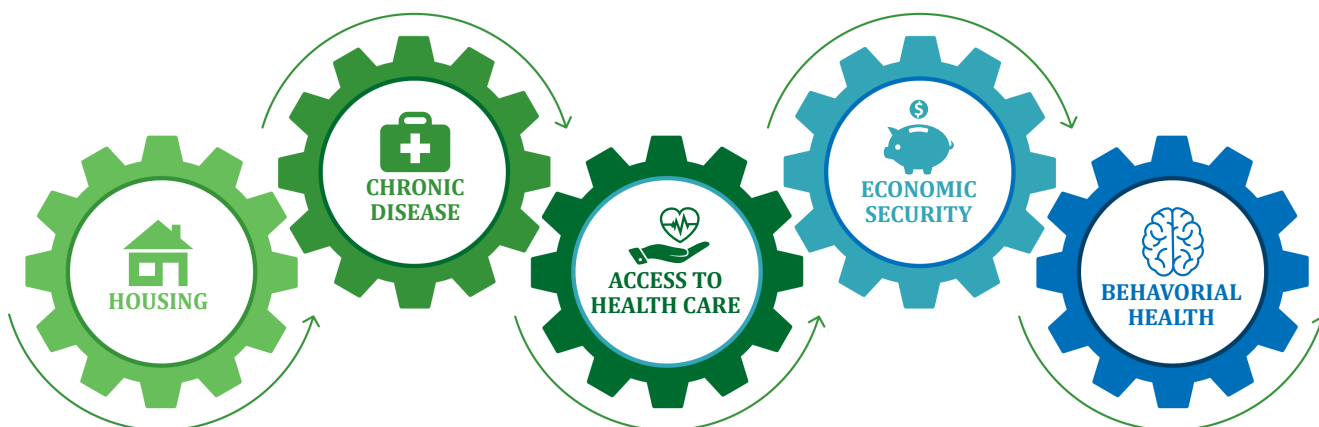
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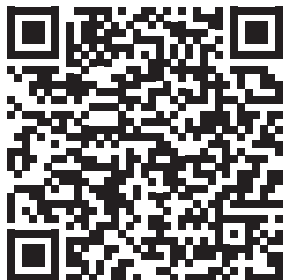
Social Determinants of Health Hub

Social Determinants of Health (SDOH), such as socioeconomic status, education, and access to healthcare, play a crucial role in influencing an individual's health outcomes.

Recognizing and addressing these factors is essential for promoting health equity and improving overall population health. Meeting the SDOH needs of residents requires adequate funding to support programs and services that address social determinants and ensure access to comprehensive healthcare services.



Top needs in Northern Lower Michigan as identified by constituents and businesses in the 2021 MiThrive Community Health Assessment.



Scan me to view Community Connections Data!

COMMUNITY HEALTH WORKERS (CHW)

A CHW is a frontline public health worker who serves as a liaison between community members and healthcare and social service providers. They are typically from the communities they serve and have a deep understanding of the cultural, social, and economic factors that influence health outcomes.

COMMUNITY HEALTH WORKERS IN ACTION

- **Proven:** Community Connections is a certified Pathways Community HUB, an evidence-based model for community-based care coordination.
- **Established:** Community Connections has 34 certified CHWs across Northern Lower Michigan connecting adults, children, and families to community resources.
- **Increased Self-Efficacy:** 87% of Community Connections clients reported increased independence.¹
- **Cost-Savings:** Community Connections has resulted in \$1.21 in medical costs savings for every \$1 of health navigation services.²

“My CHW in the Community Connections program saved my home and lightened the load making it possible for me to chase my demons. I’m a different person because of my CHW and having her as an advocate. I’m so grateful, I had her to navigate this together. I’m so thankful for everything this program does.”



SUCCESS STORY #1

One of our region hubs assisted a senior resident who was initially referred by our local hospital system because they were at risk of losing their housing. A CHW met with the resident and determined they fell behind on bills while undergoing treatment for cancer and missed a few important deadlines for paperwork. As a result, they were being taxed incorrectly at the non-homestead rate causing a significant increase in property taxes. The resident received a notice that they were at risk of losing their house due to late taxes. Our CHW was able to connect the resident with the Michigan Homeowner Assistance Fund. As a result of that navigation assistance the resident received over \$15,000 to help pay the back taxes.

The resident was also dismissed from their oncologist because of too many missed appointments. They were referred to a practice two hours away, which would only make the transportation issues worse since the client does not drive. Our CHW was able to advocate for the patient with the oncology practice and got them in with another oncologist in the practice.

Our CHW continued to work with the resident to work on a budget for the future and helped apply for and receive food assistance and Medicaid through Michigan Department of Health and Human Services (MDHHS).

SUCCESS STORY #2

A referral was received for a resident in need of community resource navigation, which was provided by one of our CHWs. This resident had spent their life in foster care and, upon turning 18, expressed a desire for independent living. With the support of our CHW, they now reside with roommates of similar age, demonstrating strong motivation towards gaining independence. When in need of hearing aids, our CHW assisted in exploring options, securing assistance through a local resource, with full coverage of the cost. Additionally, our CHW facilitated connections with a primary care provider, dentist, and therapist in the area. Further support was accessed through a local non-profit youth services organization, with the individual’s nearby brother serving as a key support system during this transition.





ASK: RECEIVE DEDICATED \$5 MILLION IN SOCIAL DETERMINANTS OF HEALTH HUB FUNDING TO MEET RESIDENTS BASIC NEEDS.

LEVERAGING RESOURCES

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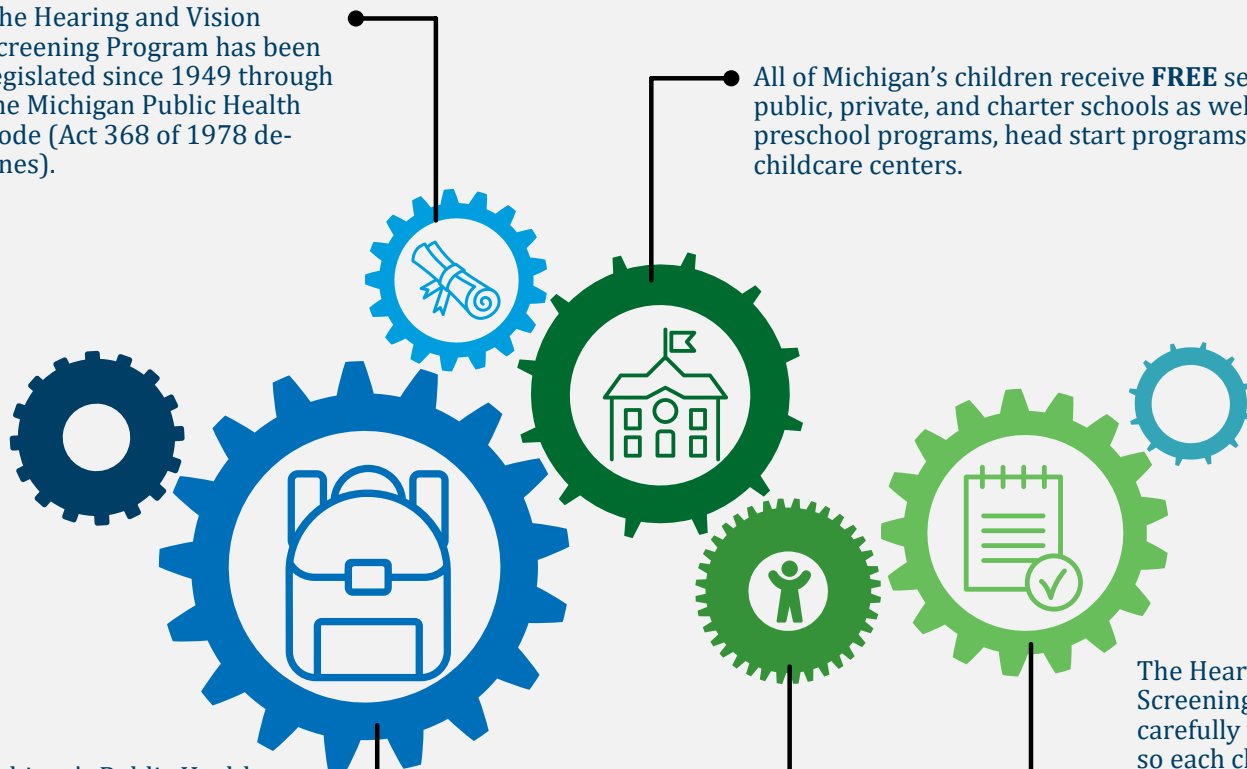


| | For every \$1 invested, we save | Children Screened | Children Referred |
|---------|--|-------------------|--------------------|
| Hearing |  \$112 | 41,231 | 2,787 |
| Vision |  \$162 ¹ | 27,866 | 1,548 ² |

Proper hearing and vision skills are essential for children to fully engage in educational activities, communicate effectively, and reach their academic potential. Funding for hearing and vision were excluded from the legislature's public health funding increase in 2023. We are left with a small, but critical, underfunded program for children.

The Hearing and Vision Screening Program has been legislated since 1949 through the Michigan Public Health Code (Act 368 of 1978 defines).

All of Michigan's children receive **FREE** service in public, private, and charter schools as well as in preschool programs, head start programs, and large childcare centers.



Michigan's Public Health Code requires screening during pre-school (ages 3-5) and again prior to Kindergarten. Once a child begins elementary school, free screenings continue on a regular basis and are conducted by the local health departments.

If a child is not enrolled in a formal school setting, they can receive **FREE** screenings at the local health departments.

The Hearing and Vision Screening Program is carefully standardized so each child screened receives consistent screening, referral and follow up services.

SUCCESS STORY #1

A shy kindergartner who failed the initial hearing screening was identified. Generally, the Hearing and Vision technician performs audiograms when they return to the school in 4 to 6 weeks. However, the technician had availability and conducted the test immediately, revealing sensorineural hearing loss. The child was referred to an Ear, Nose, and Throat (ENT) doctor. The provider commended the technician for identifying the issue, as this type of hearing loss is subtle and could have easily been missed. The child was fitted for hearing aids and is now thriving. Hearing and vision screenings conducted by the local health department are essential for early detection of issues, enabling children to succeed.



SUCCESS STORY #2

At school and home, a specific child was frequently reminded to 'quiet down' or 'be less loud,' with the assumption that they were simply energetic. Despite failing their school hearing tests for four years, the child's family doctor could not identify any issues. Following the fourth screening, the Hearing and Vision technician reached out to the family personally, explaining the importance of consulting with an ENT audiologist. Given the child's screening results and behavior, it was evident that something was amiss. Since English was their second language, the technician assisted the family in finding a doctor and scheduling an appointment. After being fitted with hearing aids, the child's behavior improved significantly. Hearing and vision screenings conducted by the local health department are vital for early detection of issues, enabling children to thrive.



FAST FACTS:

- Services are free to families but not to the local health departments.
- Hearing and vision funding comes from the Department of Education and is managed by MDHHS.
- The Hearing and Vision program hasn't seen a funding increase in 25 years (1999).
- In 2024, local health departments received a one-time, \$6,000 extra payment to support essential hearing and vision screenings for our youth. Without consistent and reliable funding, essential hearing and vision screenings are limited and at risk.
- Together, let's ensure that every child in Northern Michigan has access to the quality hearing and vision screenings.



ASK: SUPPORT MICHIGAN'S YOUTH WITH DEDICATED FUNDING FOR STATE MANDATED HEARING AND VISION SCREENINGS PROVIDED BY LOCAL HEALTH DEPARTMENTS.

TOGETHER WE CAN PROPEL PUBLIC HEALTH FORWARD

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We ask that you partner with us in fine tuning public health to meet the needs of our community.



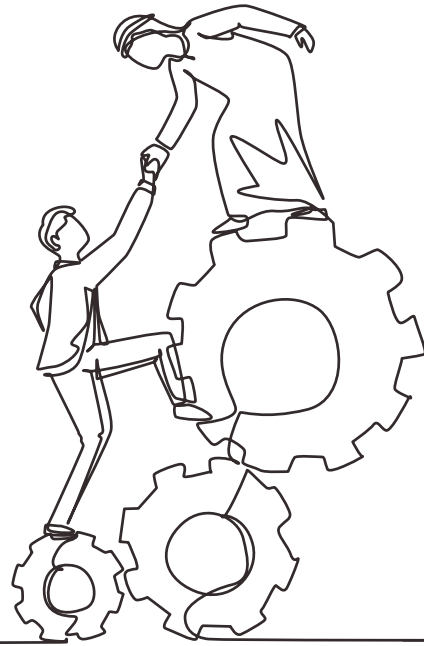
Advocate for feasible unified Michigan Sanitary Code to protect our groundwater and surface water resource.



Receive dedicated \$5 Million in Social Determinants of Health HUB funding to meet residents' basic needs.



Support Michigan's Youth with dedicated funding for state mandated hearing and vision screenings provided by local health departments.



Contact Us To Discuss How You Propel Public Health!



Denise Bryan, Health Officer
District Health Department No. 2
District Health Department No. 4
dbryan@dhd2.org



Steve Hall, Health Officer
Central Michigan District Health Department
shall@cmdhd.org



Wendy Hirschenberger, Health Officer
Grand Traverse County Health Department
whirsch@gtcountymi.gov



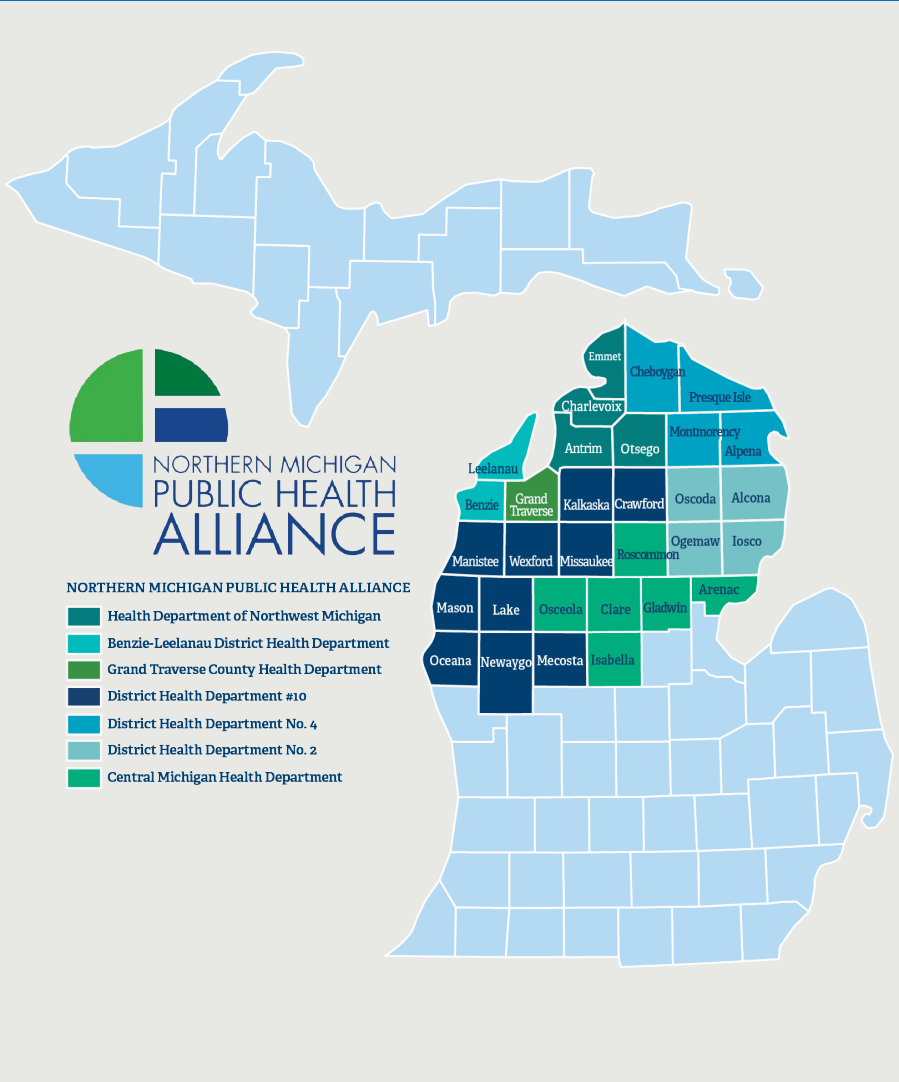
Kevin Hughes, Health Officer
District Health Department #10
khughes@dhd10.org



Dan Thorell, Health Officer
Benzie-Leelanau District Health Department
Health Department of Northwest Michigan
d.thorell@nwhealth.org



Jane Sundmacher, Director
Northern Michigan Public Health Alliance
j.sundmacher@nwhealth.org



JOIN US FOR PUBLIC HEALTH IN MOTION

Thank you for supporting the health and wellbeing of your constituents!



NMPHA Website

<https://nmpublichealthalliance.org/>



Data + Sources

Scan to view our data and sources



MiThrive

Scan to view community health assessment