



2022 Community Health Needs Assessment

McLaren Northern Michigan

Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties

June 2022

Acknowledgements

The 2022 MiThrive Community Health Needs Assessment is a regional, collaborative initiative led by the Northern Michigan Community Health Innovation Region (CHIR). It is designed to bring together hospitals, local health departments, community-based organizations, coalitions, agencies, and residents across 31 counties in Northern Michigan to collect data, identify strategic issues, and develop plans for collaboratively addressing them. The following partners contributed funding and leadership to the 2022 MiThrive Community Health Needs Assessment. We are grateful for their support.



Central Michigan District Health Department
Promoting Healthy Families, Healthy Communities



In addition, the Northern Michigan CHIR was awarded two national grants to enhance a health equity focus in the MiThrive assessments:

- Cross Jurisdictional Sharing Mini-Grant from the Center for Sharing Public Health Services to implement the Mobilizing for Action through Planning and Partnerships (MAPP) Process' Health Equity Supplement
- Increasing Disability Inclusion in the MAPP Process Grant from the National Association of City and County Health Officials.

Thank you to all who shared their time and expertise in the MiThrive initiative, especially local residents. Thousands of residents and organizations participated in planning the assessments, participating in community events and surveys, collecting data, analyzing data, and ranking strategic issues. We are especially grateful to members of the MiThrive Steering Committee and Design Team, as well as the Northwest, Northeast, and North Central Workgroups.

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MiThrive partners represent many sectors of the community, including:

- Residents
- Businesses
- Collaborative bodies and coalitions
- Community-based organizations
- Community mental health agencies
- Federally qualified health centers
- Grant-making organizations
- Hospitals
- Local health departments
- Municipalities
- Michigan Dept of Health and Human Services
- Physicians and other healthcare providers
- Schools
- Substance use prevention, treatment, and recovery services
- Tribal Nations

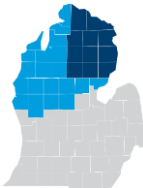
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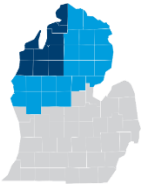
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The MiThrive Core Team

The Northern Michigan Community Health Innovation Region (CHIR) leads the MiThrive community health needs assessment every three years in partnership with hospitals, local health departments, and other community partners. The CHIR's backbone organization is the Northern Michigan Public Health Alliance, a partnership of seven local health departments that together serve a 31-county area. This area was organized into three regions—Northwest, Northeast, and North Central—for the 2021 MiThrive community health needs assessment.



Administrators, communication specialists, epidemiologists, health educators, and nurses from the Northern Michigan Public Health Alliance formed the MiThrive Core Team:

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Definitions

Community Health Improvement Process

The Community Health Improvement Process is a comprehensive approach to assessing community health, including social determinants of health, and developing action plans to improve community health through substantive involvement from residents and community organizations. The community health needs assessment process yields two distinct yet connected deliverables: community health needs assessment report and community health improvement plan/implementation strategy.

Community Health Needs Assessment

Community Health Needs Assessment is a process that engages community members and partners to systematically collect and analyze qualitative and quantitative data from a variety of resources from a certain geographic region. The assessment includes information on health status, quality of life, social determinants of health, mortality and morbidity. The findings of the community health assessment include data collected from both primary and secondary sources, identification of key issues based on analysis of data, and prioritization of key issues.

Community Health Improvement Plan

The Community Health Improvement Plan includes an Outcomes Framework that details metrics, goals and strategies and the community partners committed to implementing strategies for the top priorities identified in Community Health Needs Assessment. It is a long-term, systematic effort to collaboratively address complex community issues, set priorities, and coordinate and target resources.

Hospital Implementation Strategy

The Implementation Strategy details which priorities identified in the Community Health Needs Assessment the hospital plans to address and how it will build on previous efforts and existing initiatives while also considering new strategies to improve health. The Implementation Strategy describes actions the hospital intends to take, including programs and resources it plans to commit, anticipated impacts of these actions, and planned collaboration between the hospital and community partners.

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Executive Summary

In a remarkable partnership, hospitals, health departments, and other community partners in Northern Michigan join together every three years to take a comprehensive look at the health and well-being of residents and communities. Through community engagement and participation across a 31-county region, the MiThrive Community Health Needs Assessment collects and analyzes data from a broad range of social, economic, environmental, and behavioral factors that influence health and well-being and identifies and ranks key strategic issues. In 2021, together we conducted a comprehensive, community-driven assessment of health and quality of life on an unprecedented scale. MiThrive gathered data from existing statistics, listened to residents, and learned from community partners, including health care providers. Our findings show our communities face complex interconnected issues and these issues harm some groups more than others.

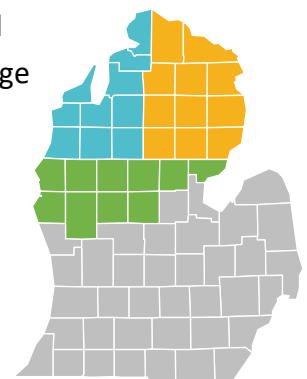
Report Goals and Objectives

The purpose of this report is to serve as a foundation for community decision-making and improvement efforts. Key objectives include:

- Describe the current state of health and well-being
- Describe the processes used to collect community perspectives
- Describe the process for prioritizing Strategic Issues
- Identify community strengths, resources, and service gaps
- Provide actionable data for collaborative health improvement planning

Regional Approach

MiThrive was implemented across a 31-county region through a partnership of hospital systems, local health departments, and other community partners. Our aim is to leverage resources and reduce duplication while still addressing unique local needs for high quality, comparable county-level data. The 2022 MiThrive Community Health Needs Assessment utilized three regions: Northwest, Northeast, and North Central. There are several advantages to a regional approach, including strengthened partnerships, alignment of priorities, reduced duplication of effort, comparable data, and maximized resources.



MiThrive Regions

The service area for McLaren Northern Michigan is Antrim, Charlevoix, Cheboygan, Chippewa, Emmet, Mackinac, Otsego, and Presque Isle counties. Secondary data was collected for Chippewa and Mackinac counties; both primary and secondary data were collected for the remaining counties.

Data Collection

The findings detailed throughout this report are based on data collected through a variety of primary data collection methods and existing statistics. From the beginning, it was our goal to engage residents and many diverse community partners in data collection methods.

To accurately identify, understand, and prioritize strategic issues, MiThrive combines quantitative data, such as the number of people affected, changes over time, and differences over time, and qualitative data, such as community input, perspectives, and experiences. **This approach is best practice, providing a complete view of health and quality of life while assuring results are driven by the community.**

MiThrive utilizes the Mobilizing for Action through Planning and Partnerships community health needs assessment framework. Considered the “gold standard”, it consists of four different assessments for a 360-degree view of the community. Each assessment is designed to answer key questions:

- **Community Health Status Assessment**

The Community Health Status Assessment identifies priority community health and quality of life issues. It answers the questions, “How healthy are our residents?” and “What does the health status of our community look like?” The

purpose of this assessment is to collect quantitative secondary data about the health and well-being of residents and communities. We collected about 100 statistics by county for the 31-county region--plus Chippewa and Mackinac counties--from reliable sources such as County Health Rankings, Michigan Department of Health and Human Services, and US Census Bureau.

MiThrive Data Collection in 31-County Region

100	Local, state, and national indicators collected by county for the Community Health Status Assessment
152	Participants in three Community System Assessment regional events
396	Participants in focused conversations for the Community System Assessment at 28 community collaborative meetings
3,465	Residents completed the Community Surveys for the Community Themes and Strengths Assessment
840	Residents facing barriers to social determinants of health participated in Pulse Surveys conducted by community partners for the Community Themes and Strengths Assessment
354	Physicians, nurses, and other clinicians completed Healthcare Provider Survey for the Community Themes and Strengths Assessment
199	Participants in three Forces of Change Assessment regional events

- **Community System Assessment**

The Community System Assessment focuses on organizations that contribute to wellbeing. It answers the questions, “What are the components, activities, competencies, and capacities in the regional system?” and “How are services being provided to our residents?” The Community System Assessment was completed in two parts. First, community-wide virtual meetings were convened in the Northwest, Northeast, and North Central MiThrive regions where participants discussed various attributes of the community system. These were followed by related discussions at community collaborative meetings at the county (or two-county) level.

- **Community Themes and Strengths Assessment**

The Community Themes and Strengths Assessment provides a deep understanding of the issues that residents feel are significant by answering the questions, “What is important to our community?”, “How is quality perceived in our community?”, and “What assets do we have that can be used to improve well-being?” The Community Themes and Strengths Assessment consisted of three surveys: Community Survey, Healthcare Provider Survey, and Pulse Survey. Results from each were analyzed by county, hospital service areas within the 31-county region, and the three MiThrive Regions.

- **Forces of Change Assessment**

The Forces of Change Assessment identifies forces such as legislation, technology, and other factors that affect the community context. It answers the questions, “What is occurring or might occur that affects the health of our community or the local system?”, and “What specific threats or opportunities are generated by these occurrences?” Like the Community System Assessment, the Forces of Change Assessment was composed of community meetings convened virtually in the Northwest, Northeast, and North Central MiThrive Regions.

The assessments all provide important information, but the value of the four assessments is multiplied by considering them together.

Health Equity

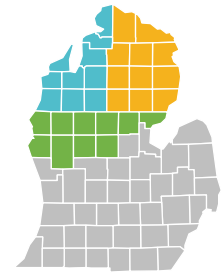
The Robert Wood Johnson Foundation says health equity is achieved when everyone can attain their full health potential, and no one is disadvantaged in this potential because of social position or any other socially defined circumstance. Without health equity, there are endless social, health, and economic consequences that negatively impact patients/clients, communities, and organizations. Although health equity is often framed in terms of race or culture, in rural areas, like McLaren Northern Michigan's service area, social isolation, higher rates of health risk behaviors, limited access to medical care, and few opportunities for good jobs contributes to increased mortality rates, lower life expectancies, and higher incidence of disease and disability, according to the Rural Health Information Hub.

The MiThrive Vision, *a vibrant, diverse, and caring region where collaboration affords all people equitable opportunities to achieve optimum health and well-being*, is grounded in the value of health equity. As one of the first steps of achieving health equity is to understand current health disparities, **we invited diverse community partners to join the MiThrive Steering Committee, Design Team, and Work Groups and we gathered primary and secondary data from medically underserved, minority, and low-income populations in each of the four MiThrive assessments, including—**

- Cross-tabulating demographic indicators such as age, race, and sex, for the Community Themes and Strengths Assessment
- Engaging residents experiencing barriers to social determinants of health and organizations that serve them in the Community System Assessment, Community Themes and Strengths Assessment, and Forces of Change Assessment
- Reaching out to medically underserved and low-income populations through Pulse Surveys administered by organizations that serve them
- Increasing inclusion of people with disabilities in the community health needs assessment through partnership with the Disability Network of Northern Michigan
- Surveying providers who care for patients/clients enrolled in Medicaid Health Plans
- Recruiting residents experiencing barriers and diverse organizations that serve them to the MiThrive Data Walks and Priority-Setting Events.

Key Findings

Following analysis of statistics and community input, significant health needs emerged in each MiThrive Region. Members of the MiThrive Steering Committee, Design Team, and the Northwest, Northeast, and North Central Workgroups themed data from all data collection activities on November 22, 2022. As illustrated in the table below, there was considerable agreement across the region.



MiThrive Regions

Strategic Issues Identified in Data Analysis (Unranked)

Northwest Region	Northeast Region	North Central Region
Access to healthcare/chronic disease prevention		
Affordable housing		
Economic security		
Equity		
Mental health		
Safety and well-being		
Substance use		
Transportation		
COVID-19	COVID-19	Broadband access
Infrastructure for healthy lives	Healthy weight	Healthy weight
Healthy food	Healthy food	Healthy food

Using a criteria-based process, participants at three Data Walk and Priority-Setting Events ranked the Strategic Issues listed above in their region using the following criteria: severity, magnitude, impact, health equity, and sustainability. **The purpose of the ranking process was to prioritize Strategic Issues to collectively develop a shared Community Health Improvement Plan.**

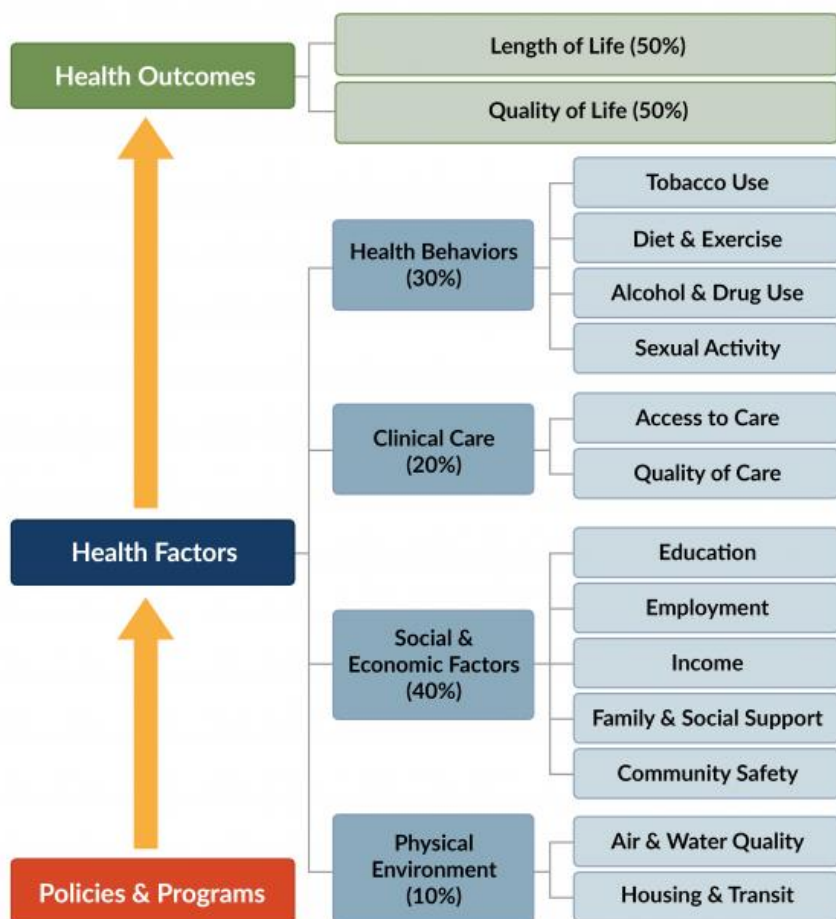
Top-Ranked Strategic Issues by MiThrive Region

Northwest Region December 14, 2021 69 residents and partners	Northeast Region December 7, 2021 34 residents and partners	North Central Region December 8, 2021 77 residents and partners
1. Affordable housing	1. Substance use	1. Substance use
2. Mental health and substance use	2. Mental health	2. Mental health
3. Access to healthcare	3. Access to healthcare	3. Access to healthcare
4. Chronic disease	4. Chronic disease	4. Chronic disease

Introduction

We all have a role to play in our communities' health. In addition to disease, health is influenced by education level, economic status, and other issues. No one individual, community group, hospital, agency, or governmental body can be responsible for the health of the community. No one organization can address complex community issues alone. However, working together, we can understand the issues, and create plans to address them.

A Model of How Health Happens



County Health Rankings model © 2014 UWPHI

The County Health Rankings Model provides a broad understanding of health, describing the importance of social determinants of health, organized in the categories of health behaviors, clinical care, social and economic factors, and the physical environment. It illustrates how community policies and programs influence health factors and in turn, health outcomes.

Purpose of Community Health Needs Assessment

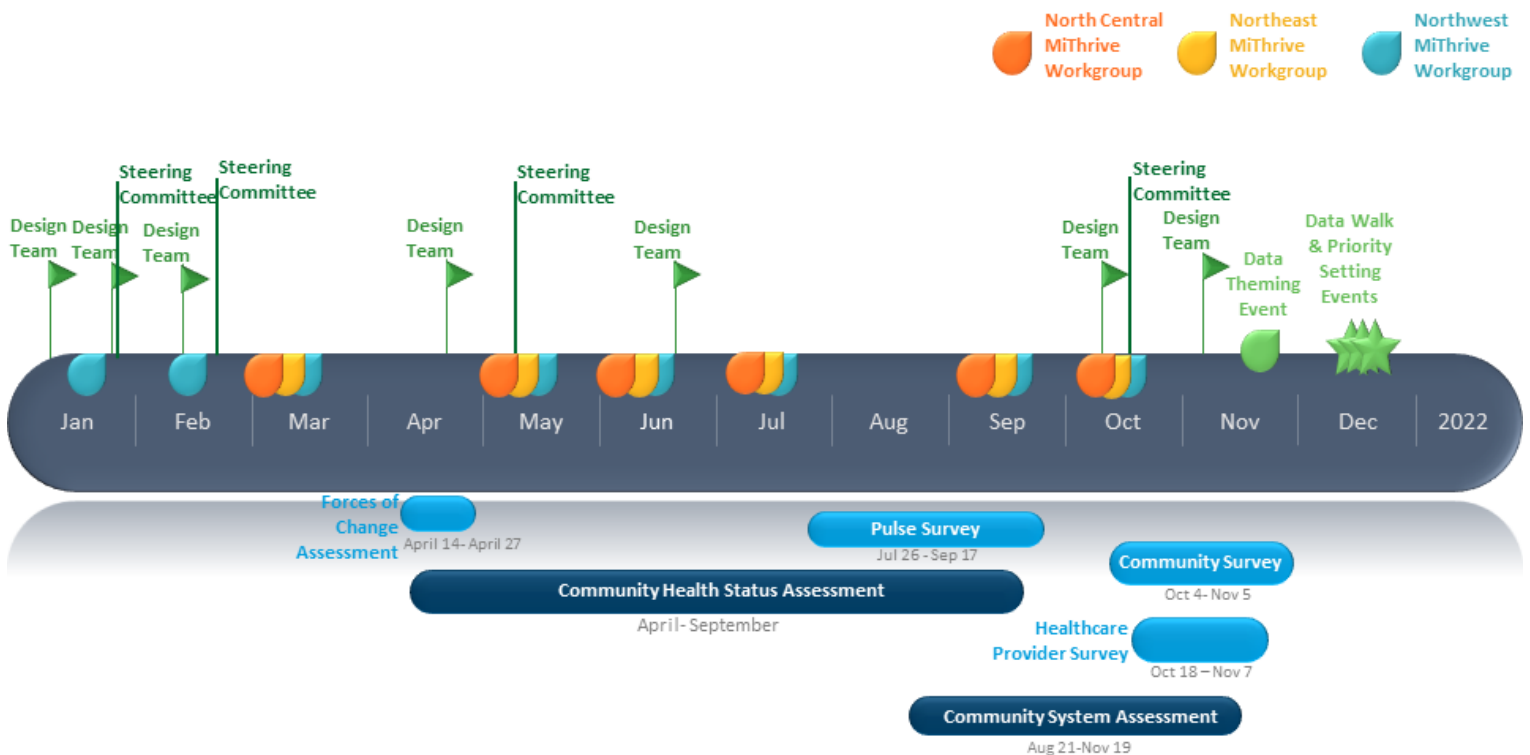
The foundation of the MiThrive community health needs assessment is the County Health Rankings Model and its focus on social determinants. The purpose of community health needs assessment is to:

1. Engage residents and community partners to better understand the current state of health and well-being in the community
2. Identify key problems and assets to address them. Findings are used to develop collaborative community health improvement plans and implementation strategies and to inform decision-making, strategic planning, grant development, and policy-maker advocacy.

Role of MiThrive Steering Committee, Design Team, and Work Groups

The MiThrive Design Team is responsible for developing Data Collection Plans for the four assessments and recommending them to the Steering Committee. In addition to approving the Data Collection Plans, the Steering Committee updated the MiThrive Vision and Core Values and provided oversight to the community health needs assessment. The regional Workgroups (Northwest, Northeast, and North Central) assisted in local implementation of primary data collection, participated in assessments and participated in Data Walk and Priority-Setting Events. Next, they will develop a collaborative Community Health Improvement Plan for the top-ranked priorities in their regions and oversee their implementation.

MiThrive Infrastructure Meetings and Assessment Timeline



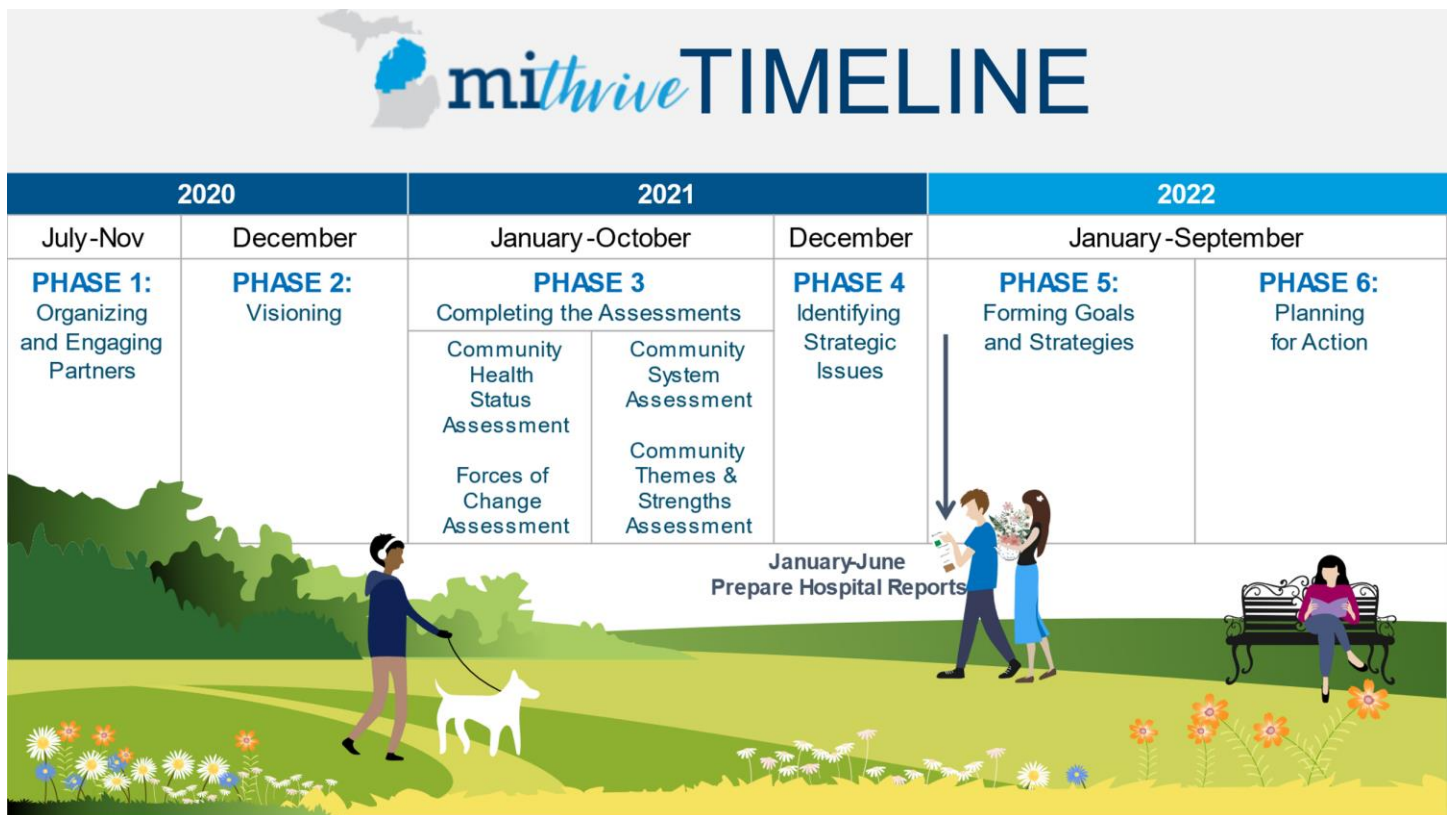
Impact of COVID-19 on MiThrive

There were challenges in conducting regional, collaborative community health needs assessment in 2021, during the peak of the COVID-19 pandemic. Despite their roles in pandemic response, leaders from hospitals, health departments, and other community partners prioritized their involvement in planning and executing the MiThrive Community Health Needs Assessment through their active participation in the Steering Committee, Design Team, and/or one or more regional Work Groups. In all, 53 individuals representing 40 organizations participated in the MiThrive organization.

In previous cycles of community health needs assessment, MiThrive convened in-person events for the Community System Assessment and Forces of Change Assessment. During the pandemic, they were convened virtually using Zoom and participatory engagement tools like breakout rooms, MURAL and RetroBoards, among others. Because residents and partners did not have to spend time and travel, their participation at the community assessment events was increased. Overall, more than 5,500 people participated in assessments in the three MiThrive regions.

Mobilizing for Action through Planning and Partnerships

MiThrive utilizes the Mobilizing for Action through Planning and Partnership (MAPP) community health needs assessment framework. It is a nationally recognized, best practice framework that was developed by the National Association of City and County Health Officials and the U.S. Centers for Disease Control and Prevention.



Phase 1: Organizing and Engaging Partners

Phase 1 involves two critical and interrelated activities: organizing the planning process and developing the planning process. The purpose of this phase is to structure a planning process that builds commitment, encourages participants as active partners, uses participants’ time well and results in a community health needs assessment that collaboratively identifies key issues in a region to inform collective decision-making to improve population health and health equity, while at the same time, meeting organizations’ requirements for community health needs assessment. During this phase, funding agreements with local health departments

and hospitals were executed, the MiThrive Steering Committee, Design Team, and Workgroups were organized, and the Core Support Team was assembled.

Phase 2: Visioning

Vision statements provide focus, purpose, and direction to the community health needs assessment. They provide a useful mechanism for convening the community, building enthusiasm for the process, and setting the stage for planning. Following thoughtful discussion, Steering Committee members updated the MiThrive Vision in January 2021 to: *A vibrant, diverse, caring region where collaboration affords all people equitable opportunities to achieve optimal health and well-being.*

Phase 3: Conducting the Four Assessments

The MAPP framework consists of four different assessments, each providing unique insights into the health of the community. For the 2022 community health needs assessment, MiThrive gathered more health equity data than ever before, and engaged more diverse stakeholders, including many residents, in the assessments.

Health Equity

There is more to good health than health care. **Several things affect people’s health that people do not often think of as health care concerns, like where they live and work, the quality of their neighborhoods, how rich or poor they are, their level of education, or their race or ethnicity.** These social factors influence about 80% of length of life and quality of life, according to the County Health Rankings Model.

A key finding of the 2022 MiThrive community health needs assessment mirrors a persistent reality across the country and the world: health risks do not impact everyone the same way. We consistently find that groups who are more disadvantaged in society also bear the brunt of illness, disability, and death. This pattern is not a coincidence. Health, quality of life, and length of life are all fundamentally impacted by the conditions in which we live, learn, work, and play. Obstacles like poverty and discrimination lead to consequences like powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and healthcare. These community conditions combine to limit the opportunities and chances for people to be healthy. The resulting differences in health outcomes (like risk of disease or early death) are known as “health inequities”.

The health equity data collected in the four MiThrive assessments is included in the discussed below.

Health equity is the realization of all people of the highest attainable level of health. Achieving health equity requires valuing all individuals and populations equally, and entails focused and ongoing societal efforts to address avoidable inequities by ensuring the conditions for optimal health for all groups.

--Adewale Troutman

Health equity, Human Rights and Social Justice: Social Determinants as the Direction for Global Health

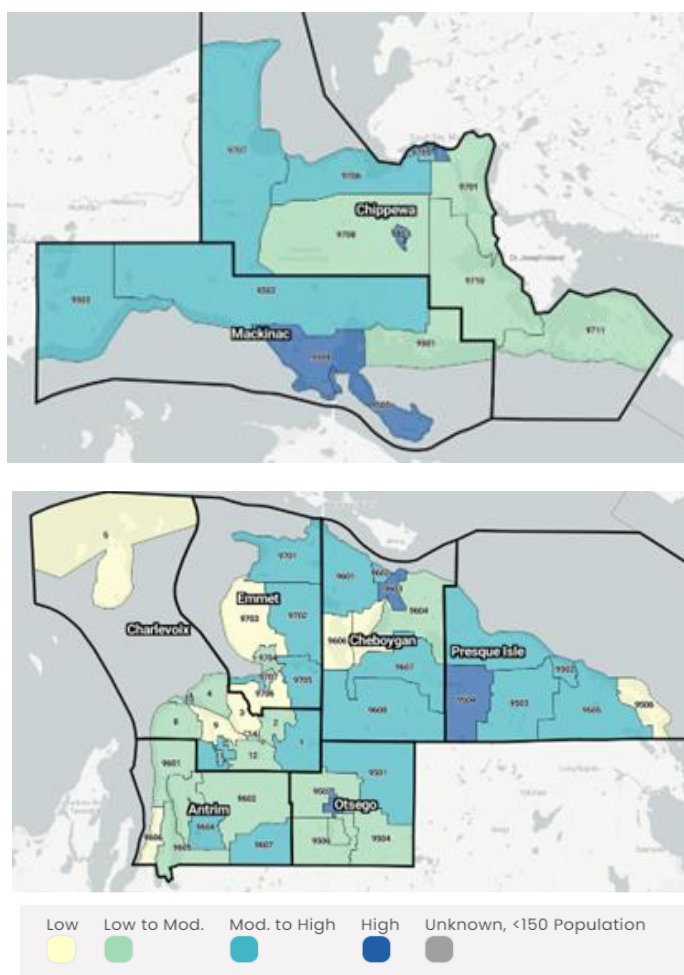
MiThrive Assessment Results

- **Community Health Status Assessment**

The Community Health Status Assessment identifies priority community health and quality of life issues. It answers the questions, “How healthy are our residents?” and “What does the health status of our community look like?” The answers to these questions were measured by collecting 100 secondary indicators from different sources including the Michigan Department of Health and Human Services, US Census Bureau, and US Centers for Disease Control and Prevention.

The Design Team assured secondary data included measures of social and economic inequity, including: Asset-Limited, Income-Constrained, Employed (ALICE) households; children living below the Federal Poverty Level; families living below the Federal Poverty Level, households living below Federal Poverty Level; population living below Federal Poverty Level; gross rent equal to or above 35% of household income; high school graduation rate; income inequality; median household income; median value of owner-occupied homes, political participation; renters (percent of all occupied homes); and unemployment rate. The Social Vulnerability Index illustrates how where we live influences health and well-being. It ranks 15 social factors: income below Federal Poverty Level; unemployment rate; income; no high school diploma; aged 65 or older; aged 17 or younger; older than five with a disability; single parent households; minority status; speaks English “less than well”; multi-unit housing structures; mobile homes; crowded group quarters; and no vehicle.

As illustrated in the map at right, many Census Tracts in the McLaren Northern Michigan service area have Social Vulnerability Indices at “high” or “moderate to high”.



Source: Michigan Lighthouse 2022, Centers for Disease Control and Prevention/ Agency for Toxic Substances and Disease Registry/ Geospatial Research, Analysis, and Services Program. [CDC Social Vulnerability Index 2018 Database - Michigan.](https://www.cdc.gov/socialdeterminants/michigan/)

Community Health Status Assessment indicators were collected and analyzed by county from the following sources:

- County Health Rankings
- Feeding America
- Kids Count
- Michigan Behavioral Risk Factor Surveillance Survey
- Michigan Cancer Surveillance Program
- Michigan Care Improvement Registry
- Michigan Health Statistics
- Michigan Profile for Healthy Youth
- Michigan School Data
- Michigan Secretary of State
- Michigan Substance Use Disorder Data Repository
- Michigan Vital Records
- Princeton Eviction Lab
- United for ALICE
- U.S. Census Bureau
- U.S. Health Resources & Services Administration
- U.S. Department of Agriculture

Each indicator was scored on a scale of zero to three by sorting the data into quartiles based on the 31-county regional level, comparing to the mean value of the MiThrive Region, and comparing to the State, national, and Healthy People 2030 target when available. Indicators with a score above 1.5 were defined as “high secondary data” and indicators with scores below 1.5 were defined as “low secondary data”. **Of about 100 secondary indicators, there were 21 statistics in Antrim, Charlevoix, Emmet, Cheboygan, Otsego, and Presque Isle counties that scored above 1.5, indicating they were worse than their MiThrive region overall or State rates:**

- Median household income
- Special education percent child find
- Average Health Professions Shortage Area (HPSA) score for dental health
- Renters as a percent of all occupied homes
- Vacant housing units
- Child abuse and neglect per 1,000 population
- Teen with 2+ Adverse Childhood Events (ACEs)
- Teens with 5+ fruits/vegetables per day
- Teens with asthma
- Self-reported health as “poor” or “fair”
- Pneumonia
- Teens with major depressive episode
- Adults with 14+ poor mental health days per month
- Overweight adults
- Teens smoked cigarettes in past 30 days
- Teens used chew tobacco etc. in past 30 days

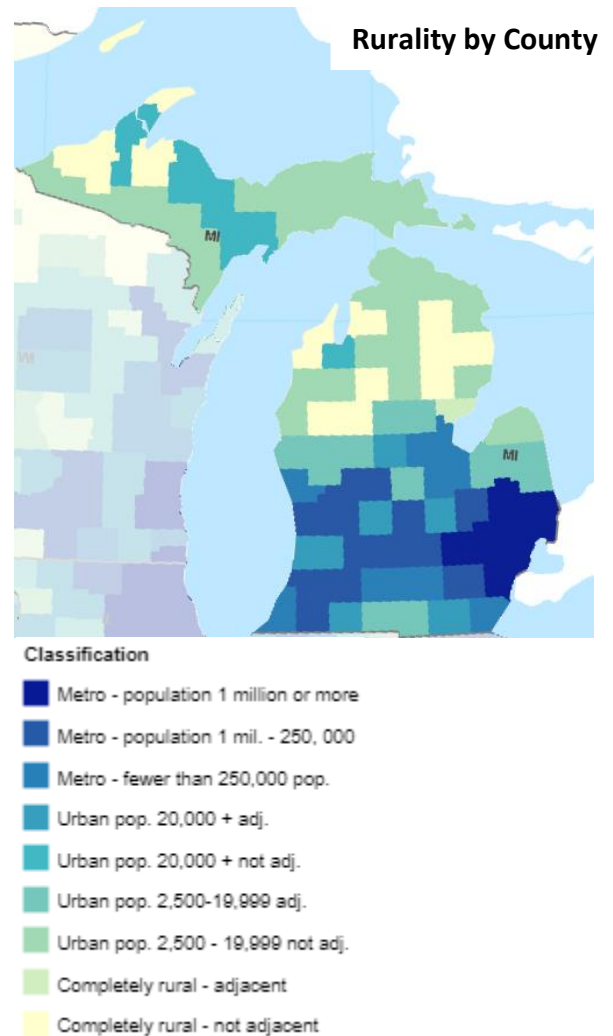
- Motor vehicle crashes involving alcohol mortality
- Alzheimers/dementia mortality
- Liver disease mortality
- Alcohol induced mortality

Please see Appendix A for values of indicators that scored above 1.5.

Geography and Population

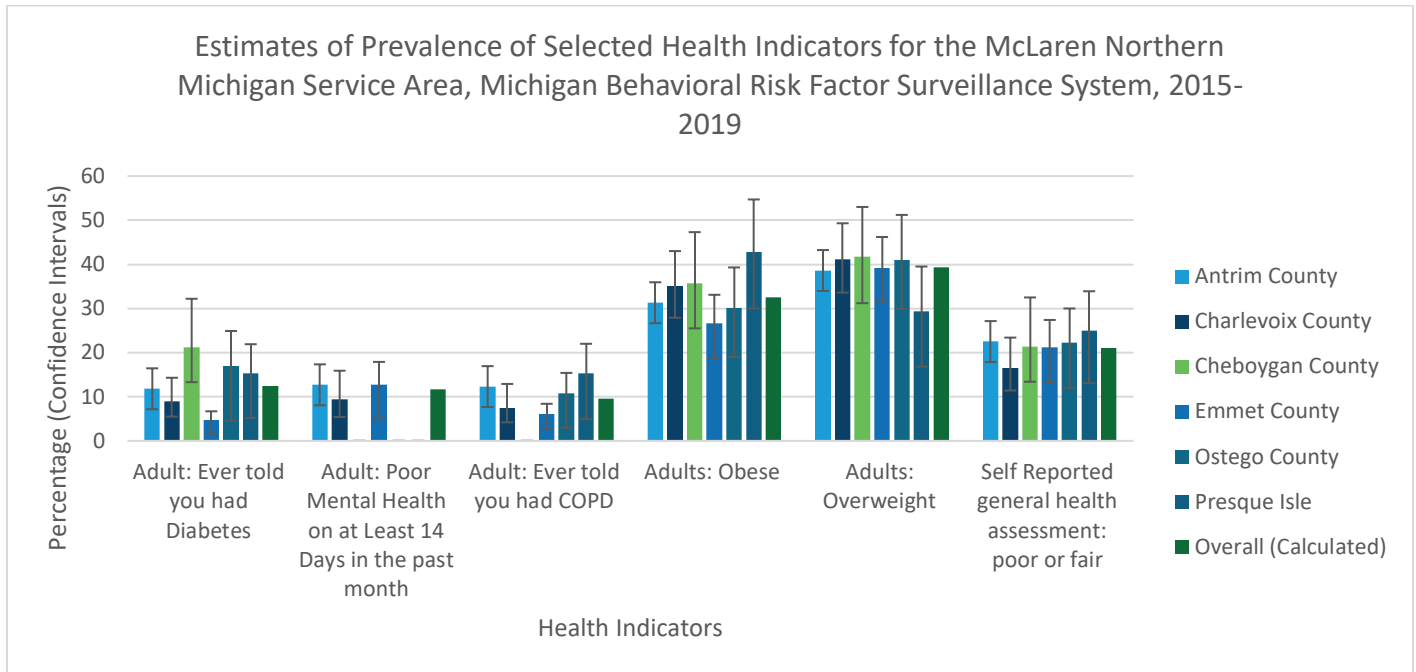
Covering 5,828 square miles, most of the McLaren Northern Michigan service area is designated as “rural” by the U.S. Census Bureau. This is one of its most important population characteristics as rurality influences health and well-being.

The composition of the population is also important, as health and social issues can impact groups in different ways, and different strategies may be more appropriate to support these diverse groups. Of the 193,607 people who live in Antrim, Charlevoix, Cheboygan, Chippewa, Emmet, Mackinac, Otsego, and Presque Isle counties, 87.94% are white. Largest racial or ethnic minority groups are Native American or Alaska Native, at 4.53%, and Black, at 1.70%.

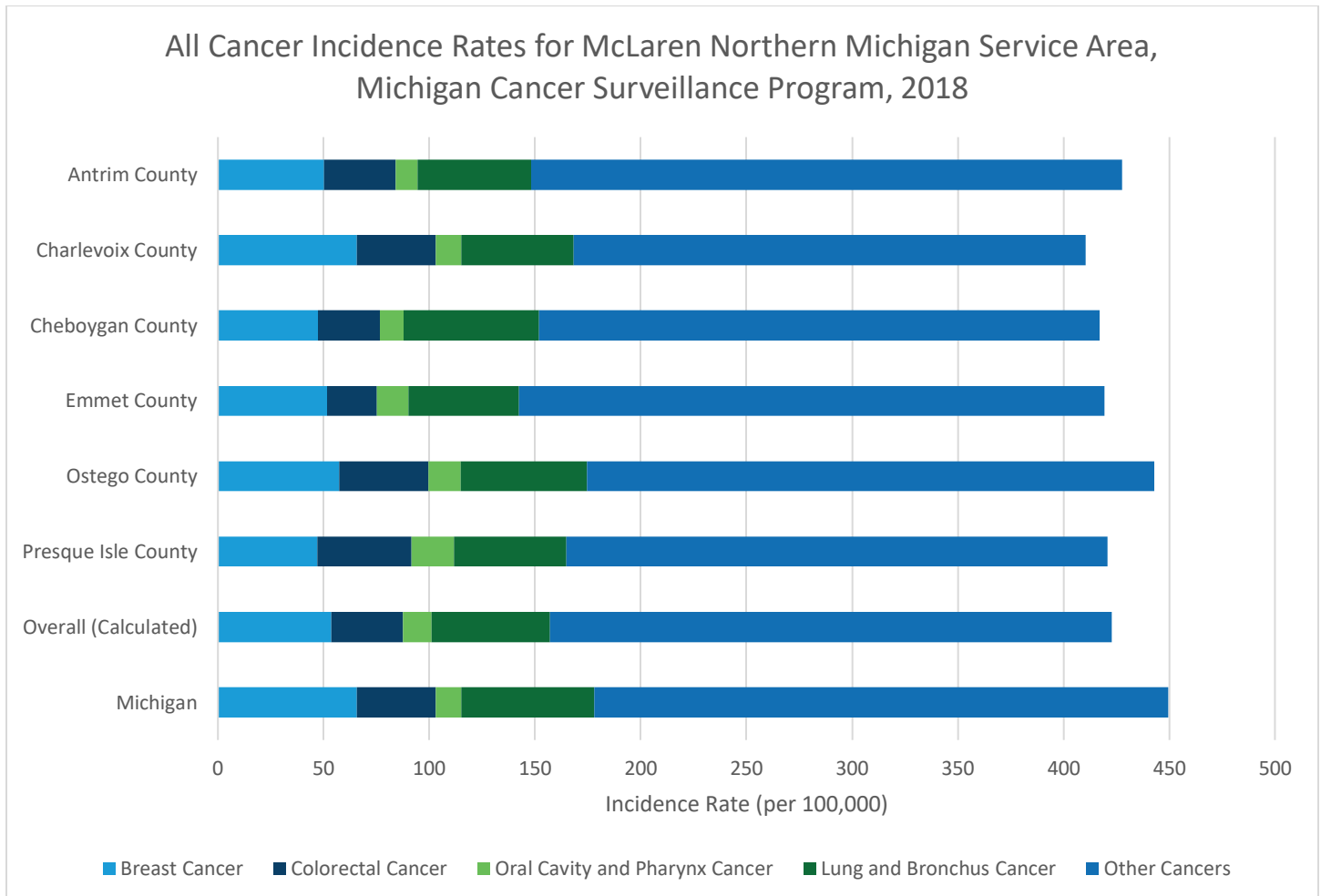


Source: 2013, Rural-urban Continuum Code, Economic Research Service U.S. Department of Agriculture

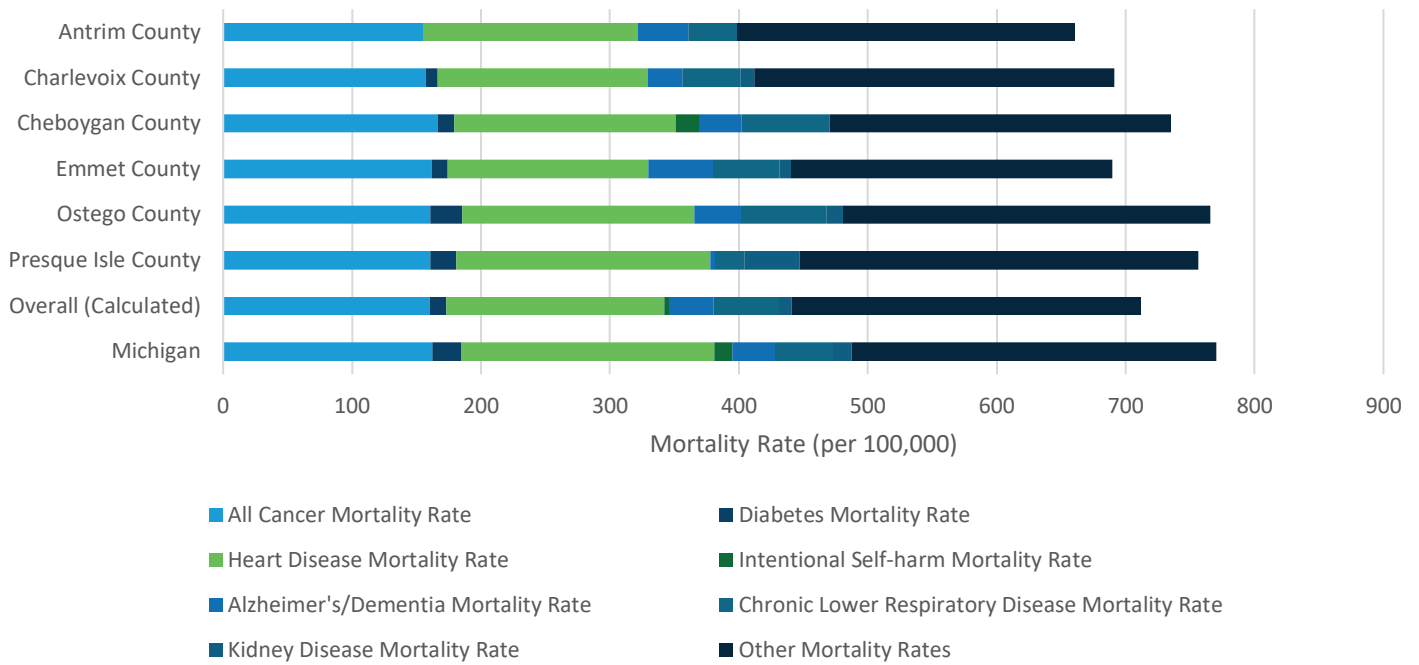
Selected Morbidity and Mortality Indicators for McLaren Northern Michigan Service Area



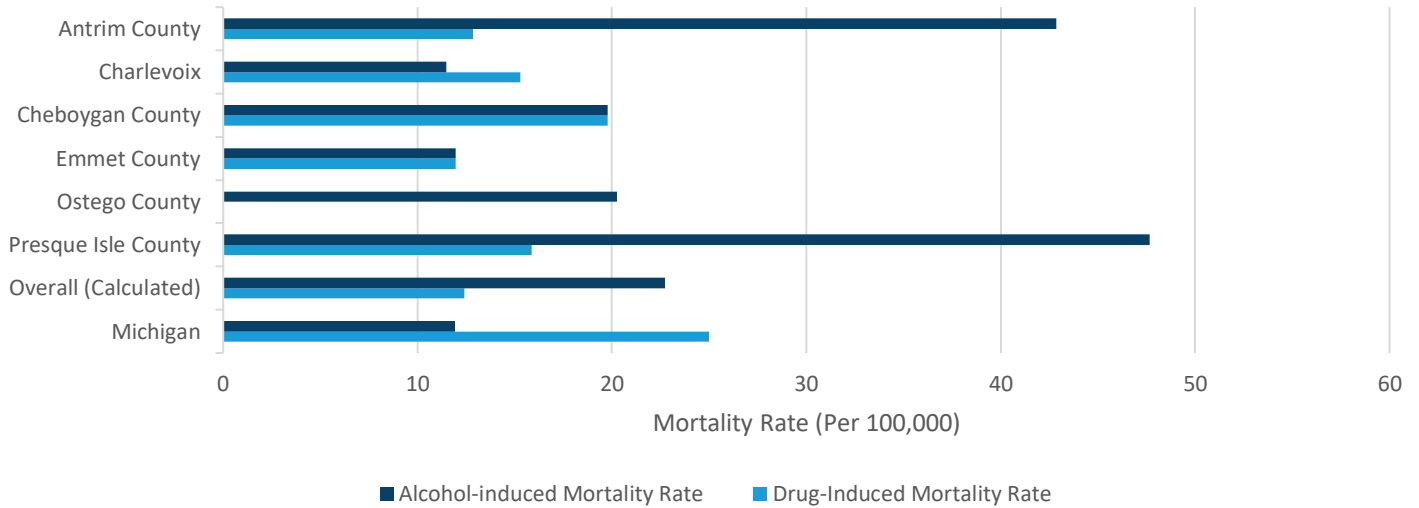
Note: For parts where data was suppressed, those data points were not included in the overall calculation.



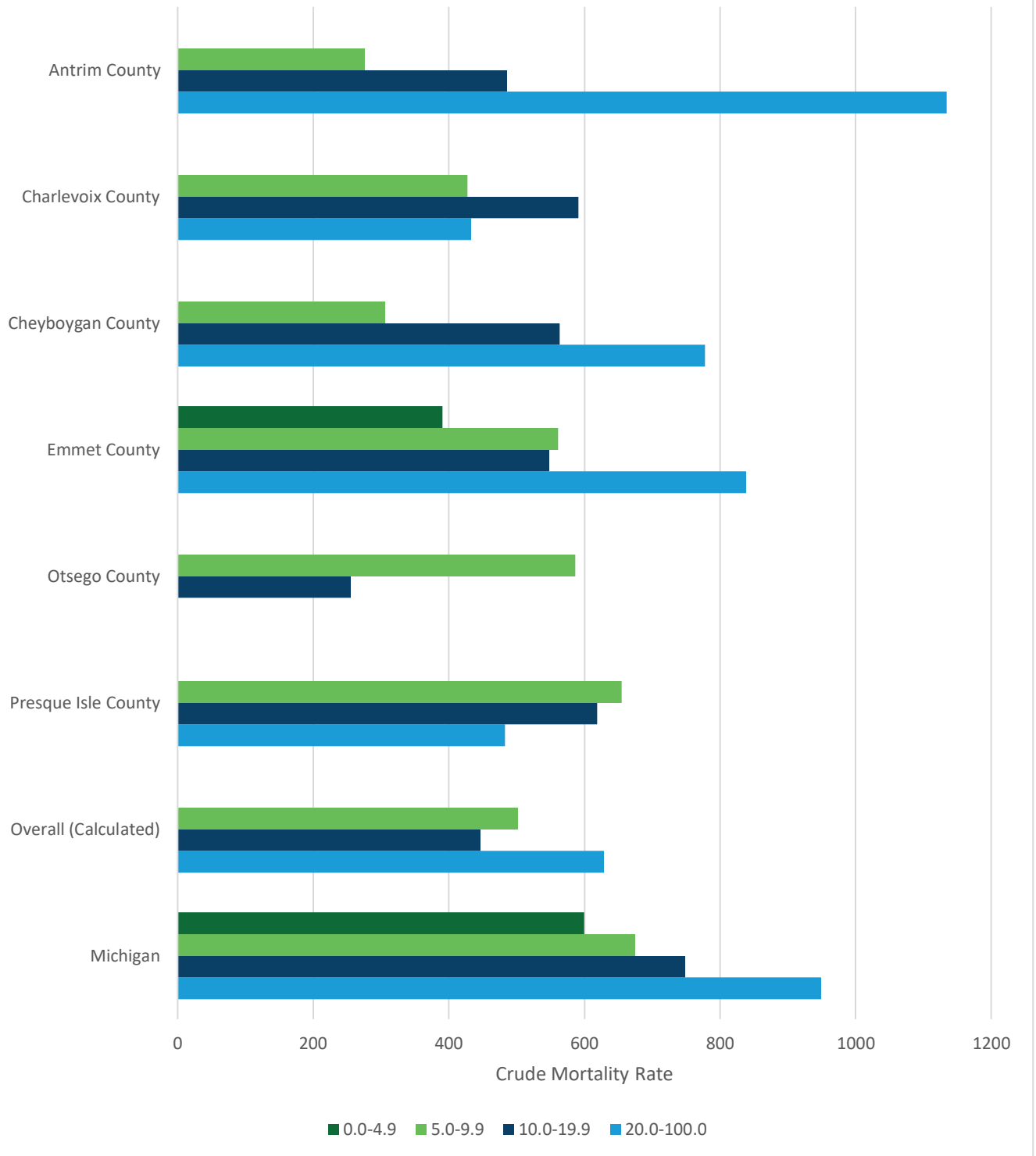
Selected Mortality Rates as a Proportion of Total Mortality Rate for McLaren Northern Michigan Service Area, MDHHS Vital Statistics, 2015-2019



Substance Use Associated Mortality Rates for McLaren Northern Michigan Service Area, MDHHS Mortality Statistics, 2019

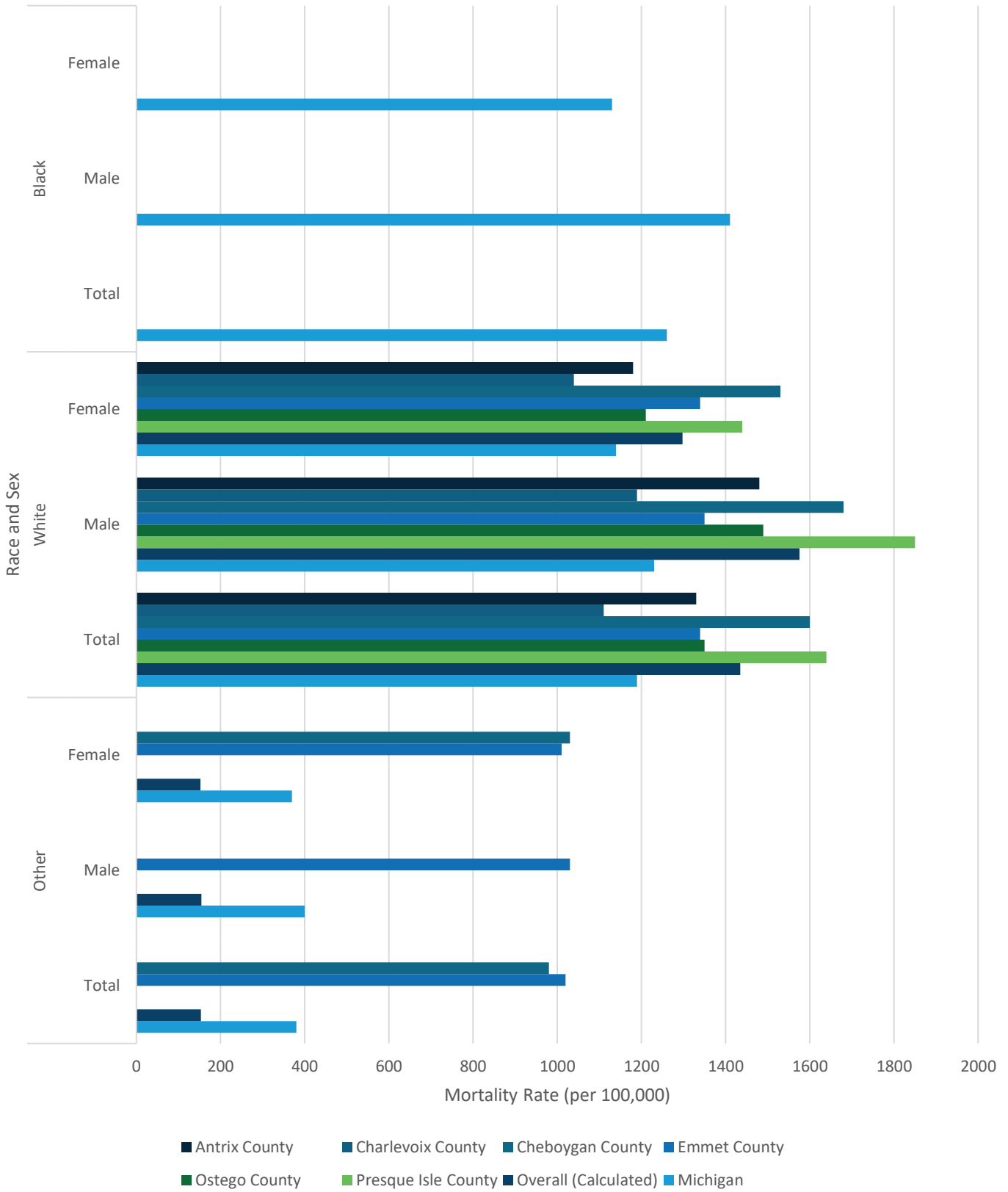


Age-Adjusted Mortality Rates by Poverty Level for McLaren Northern Michigan Service Area, MDHHS Mortality and Poverty Statistics, 2019

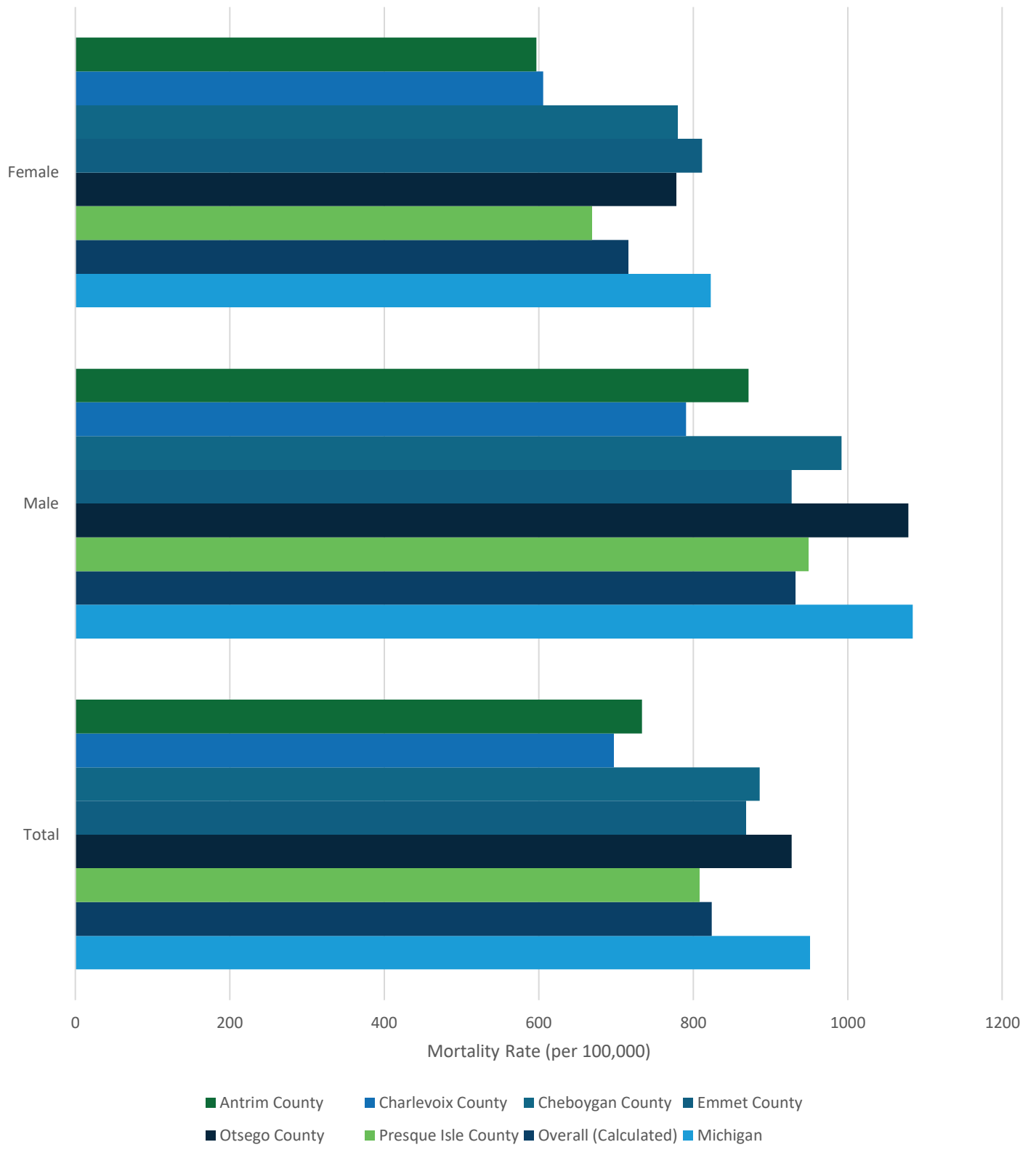


Note: The poverty categories here refer to the percentage of residents in each census tract that live below the poverty line. Deaths have been organized by these categorizations. Any area with 20% or more of the population living below the poverty line is considered a poverty area by US Census reports. Age-adjustment was performed using the standardized population from the United States Census, 2000.

Mortality Rates by Race and Sex for McLaren Northern Michigan Service Area, MDHHS Vital Statistics, 2020



Age-Adjusted Death Rates by Sex for McLaren Northern Michigan Service Area, MDHHS Vital Statistics, 2020



Note: Age-adjustment was performed using the standardized population from the United States Census, 2000.

- **Community Themes and Strengths Assessment**

The Community Themes and Strengths Assessment provides a deep understanding of the issues that residents feel are significant by answering the questions, “What is important to our community?”, “How is quality perceived in our community?”, and “What assets does our community have that can be used to improve well-being?” For the Community Themes and Strengths Assessment, the MiThrive Design Team designed three types of surveys: Community Survey, Healthcare Provider Survey, and Pulse Survey (Please see Appendix B for survey instruments).

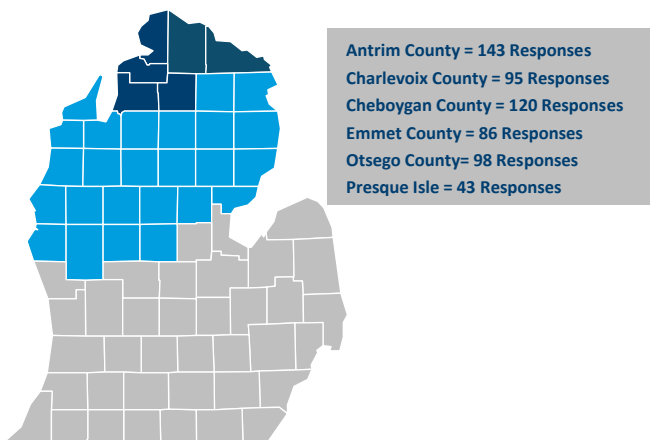
- **Community Survey**

The Community Survey asked 18 questions about what is important to the community, what factors are impacting the community, quality of life, built environment, and demographic questions. The Community Survey also asked respondents to identify assets in their communities. Please see Appendix C for assets identified for Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties.



Community Surveys were administered electronically and via paper format in both English and Spanish across the MiThrive 31-county region. The electronic version of the survey was available through an electronic link and QR code. The survey was open from Monday, October 4, 2021, to Friday, November 5, 2021. Five \$50 gift cards were used as an incentive for completing the survey.

A total of **585 community survey** responses were collected in **Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties.**



Partner organizations supported survey promotion through social media and community outreach. Promotional materials developed for Community Survey include a flyer, social media content, and press release. Five hundred and eighty-five surveys were collected from Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle counties.

Survey respondents were asked to imagine a ladder with steps numbered from zero at the bottom to ten at the top. The **top of the ladder represented the best possible life (10)** and the **bottom of the ladder represented the worst possible life (0)**. Survey respondents identified where they felt they stood on the ladder at the time of completing the survey (Figure 1) and where they felt they would stand three years from now (Figure 2).

Figure 1: 42.01% of Community Survey respondents in Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties are currently either struggling or suffering compared to 57.99% who are thriving (n=576).

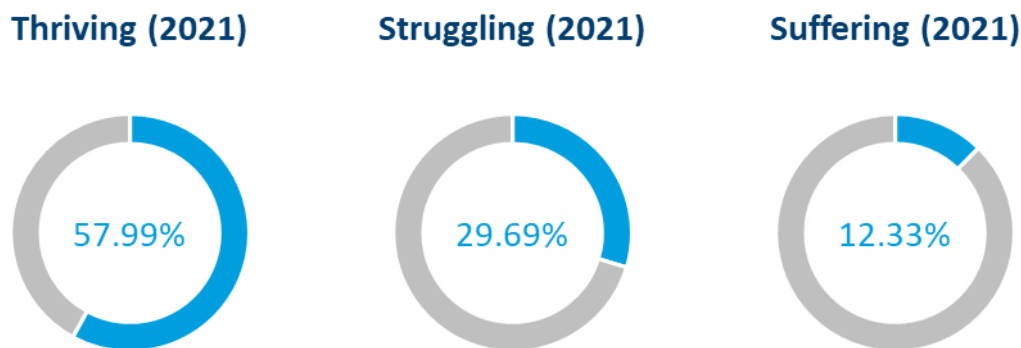
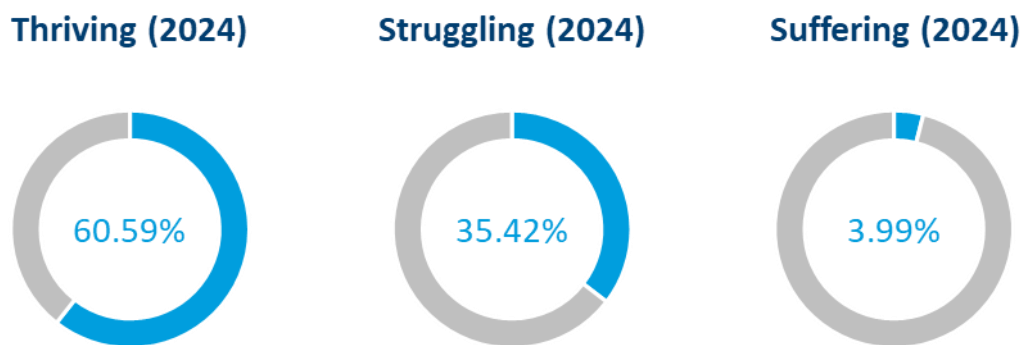


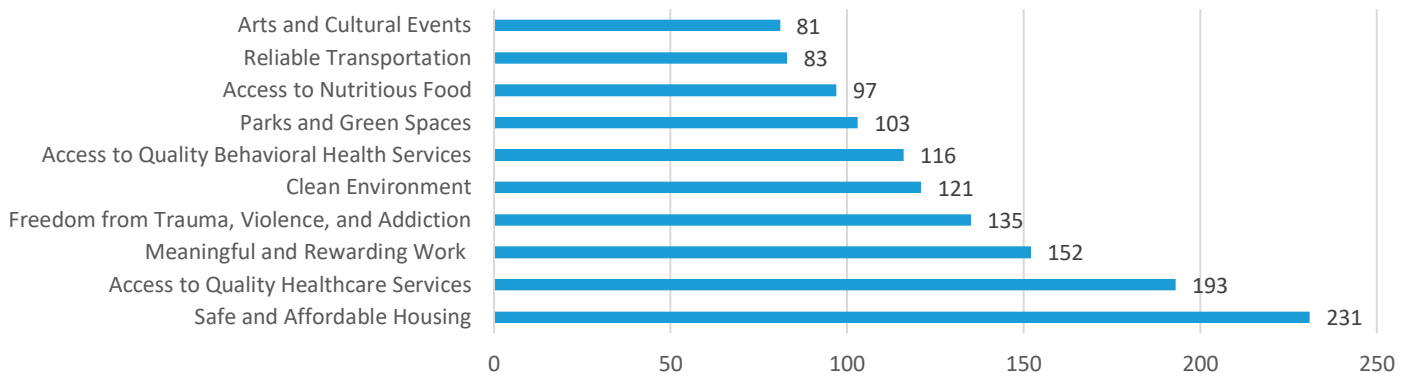
Figure 2: 39.41% of Community Survey respondents Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties predict they will either be struggling or suffering compared to 60.59% who predict they will be thriving three years from now (n=576).



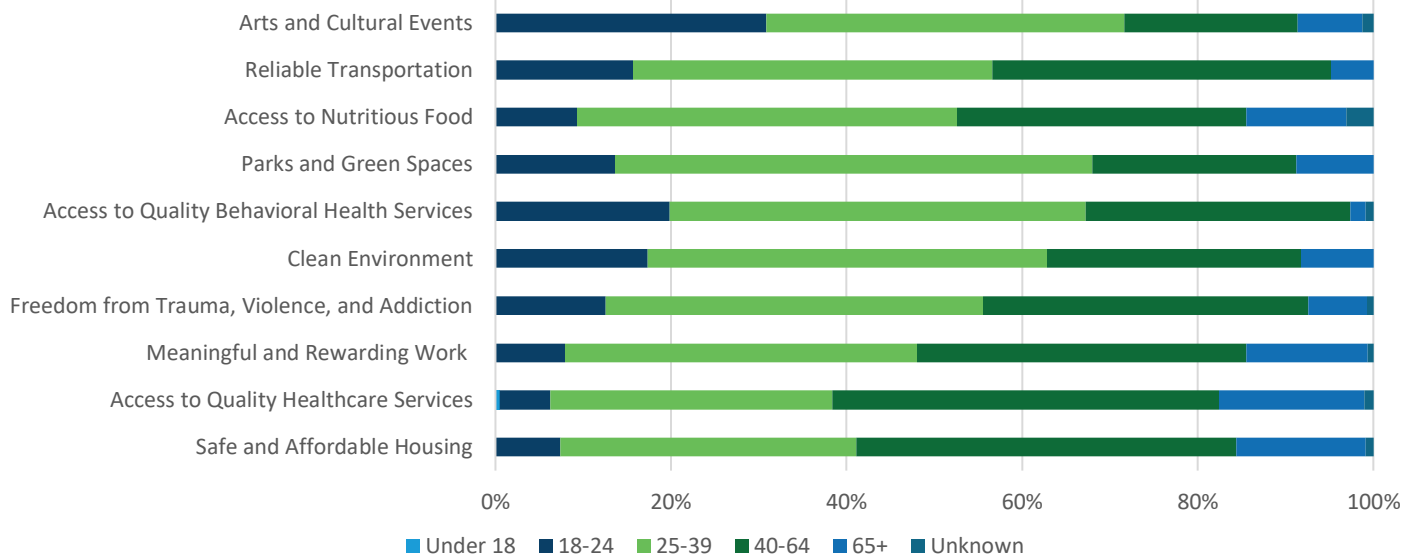
On average, Community Survey respondents in Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties felt they would move **.90 of a step higher** on the ladder three years from how they scored themselves presently (n=576).

**The Cantril-Ladder self-anchoring scale is used to measure subjective wellbeing. Scores can be grouped into three categories – thriving, struggling, and suffering. Cantril’s Ladder data was analyzed separately for the purpose of the 2021 MiThrive Community Health Needs Assessment.*

Top 10 Factors for a Thriving Community as Identified by Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle County Community Survey Respondents (n=585)

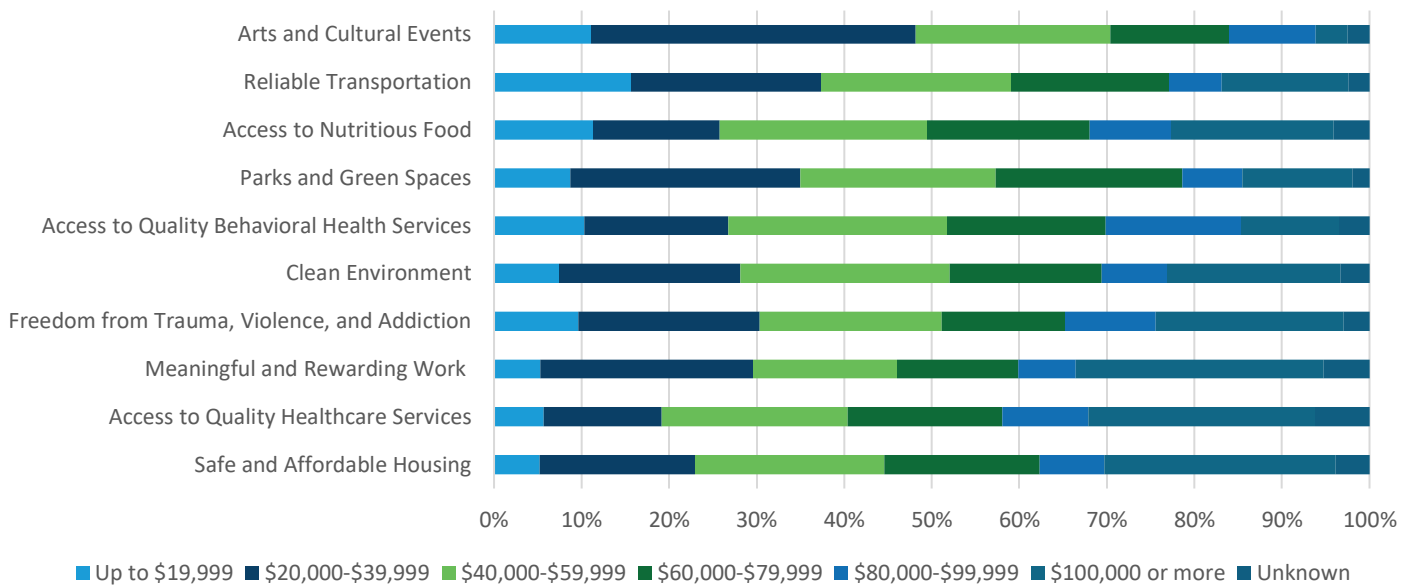


Top 10 Factors For a Thriving Community by Age (n=585)



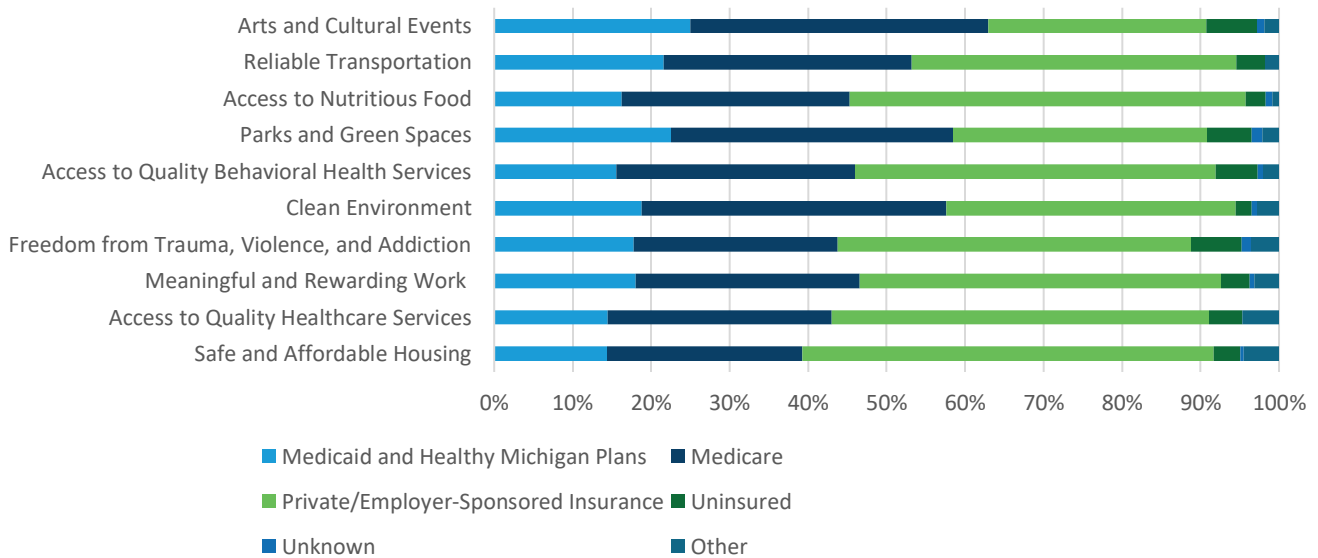
Individuals **aged 65+** make up a larger proportion of those who thought **access to quality healthcare services** was an important factor for a thriving community in comparison to the other nine top factors.

Top 10 Factors for a Thriving Community by Yearly Household Income (n=585)



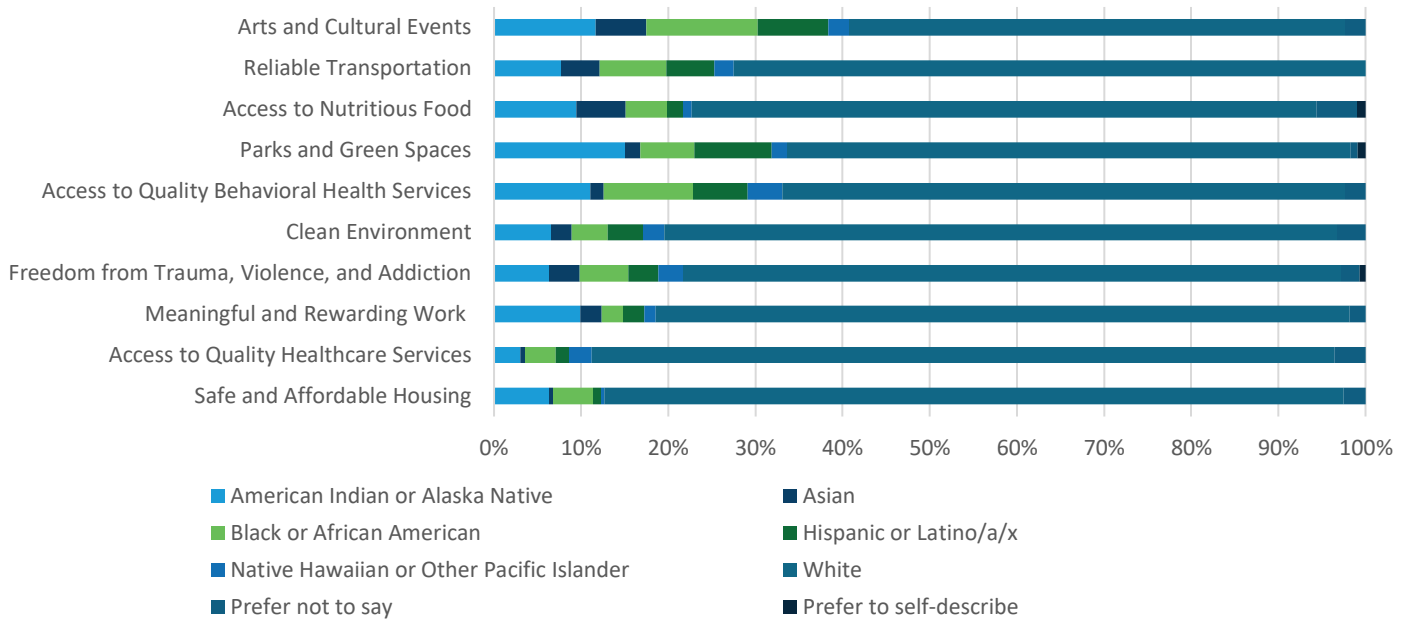
Individuals with a yearly household income **up to \$39,999** make up a larger proportion of those who thought **arts and cultural events** was an important factor for a thriving community in comparison to the other nine top factors.

Top 10 Factors for a Thriving Community by Insurance Type (n=585)



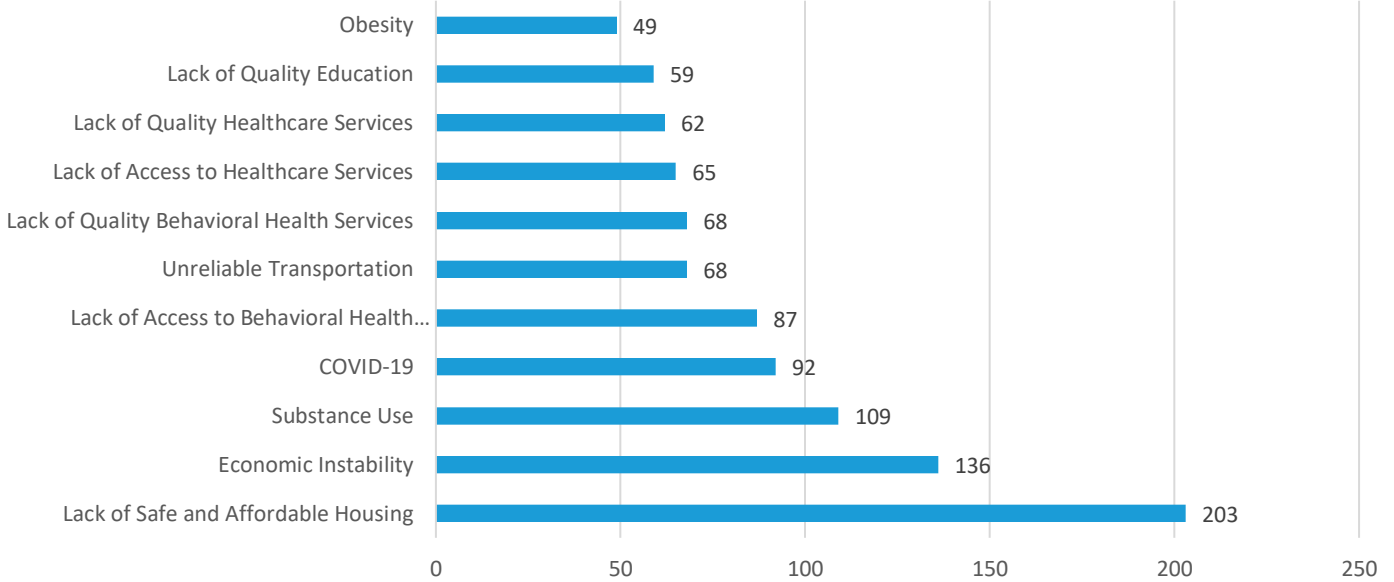
Individuals with **private/employer-sponsored insurance** make up a larger proportion of those who thought **safe and affordable housing** was an important factor for a thriving community in comparison to the other nine top factors.

Top 10 Factors For a Thriving Community By Race and Ethnicity (n=585)

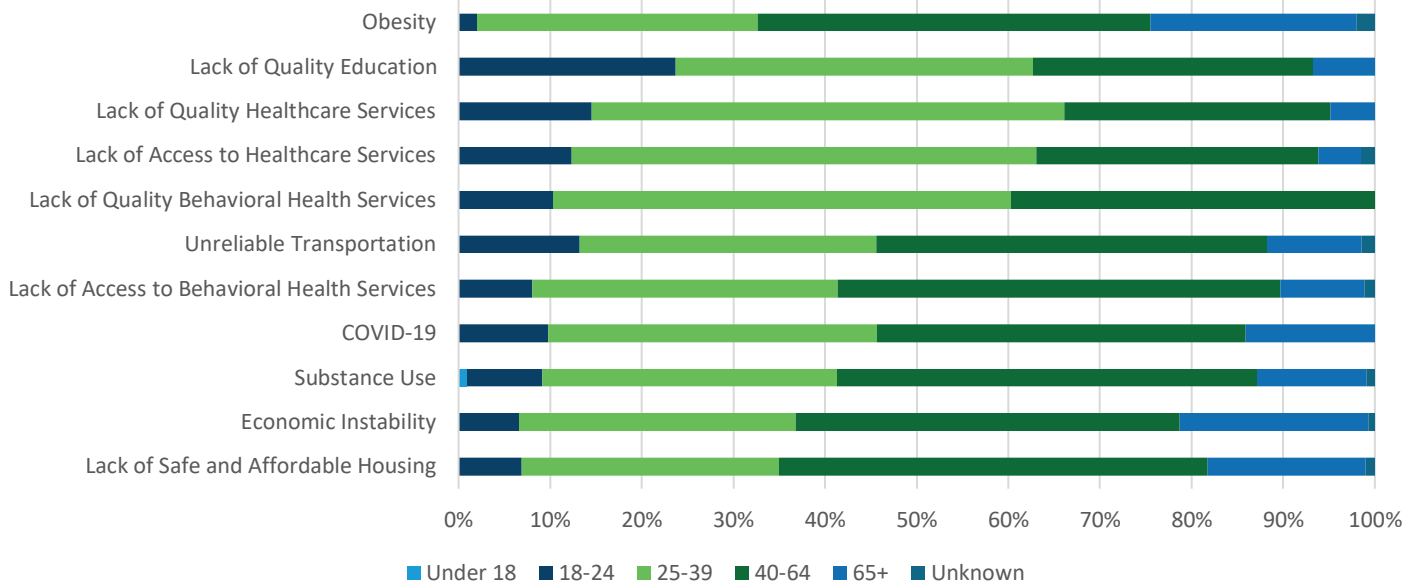


Racial and ethnic minority groups make up a larger proportion of those who thought **arts and cultural events** was an important factor for a thriving community in comparison to the other nine top factors.

Top 10 Issues Impacting the Community as Identified by Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle County Community Survey Respondents (n=585)

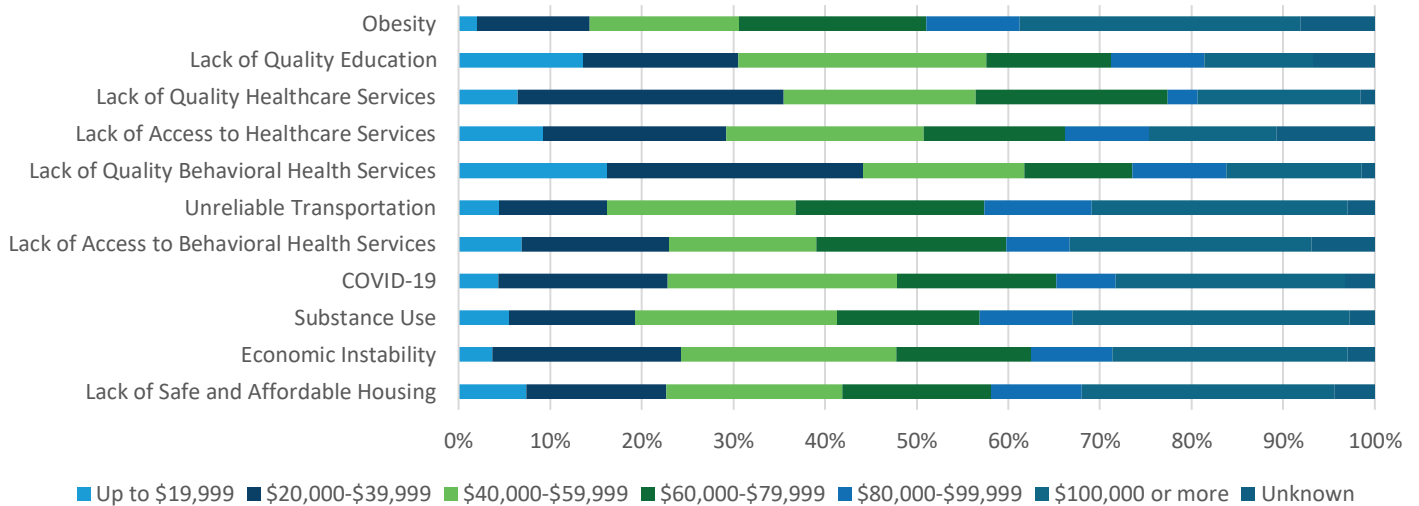


Top 11 Issues Impacting the Community by Age (n=585)



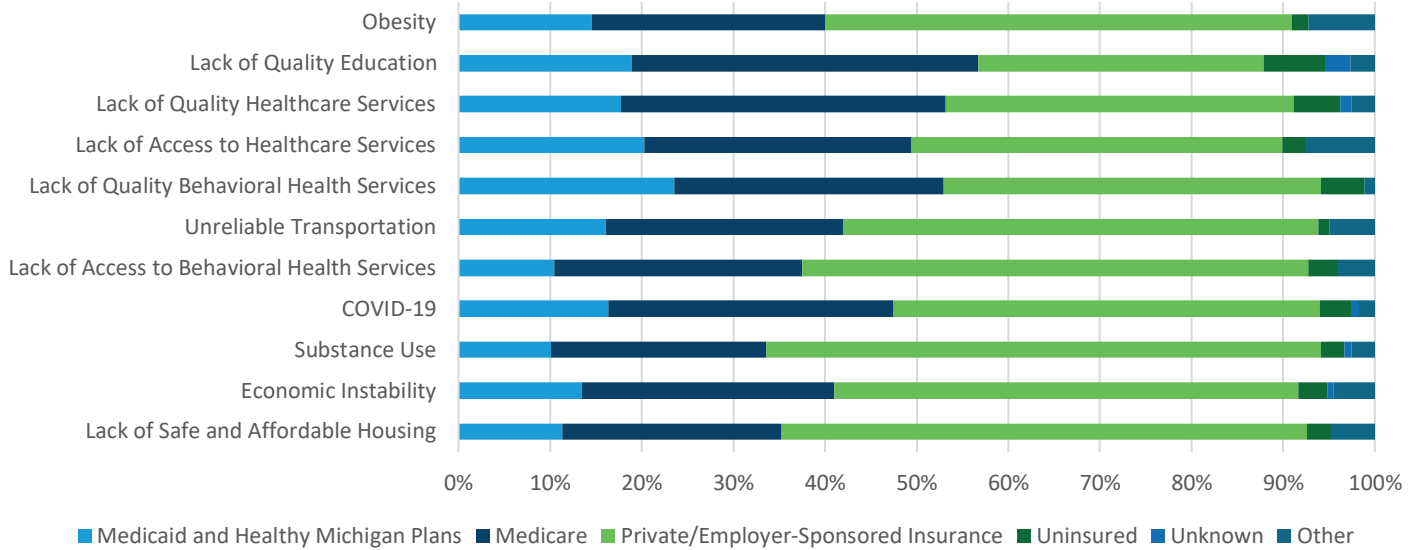
Individuals **aged 65+** make up a larger proportion of those who thought **obesity** was an important issue impacting the community in comparison to the other ten top issues

Top 11 Issues Impacting the Community By Yearly Household Income (n=585)



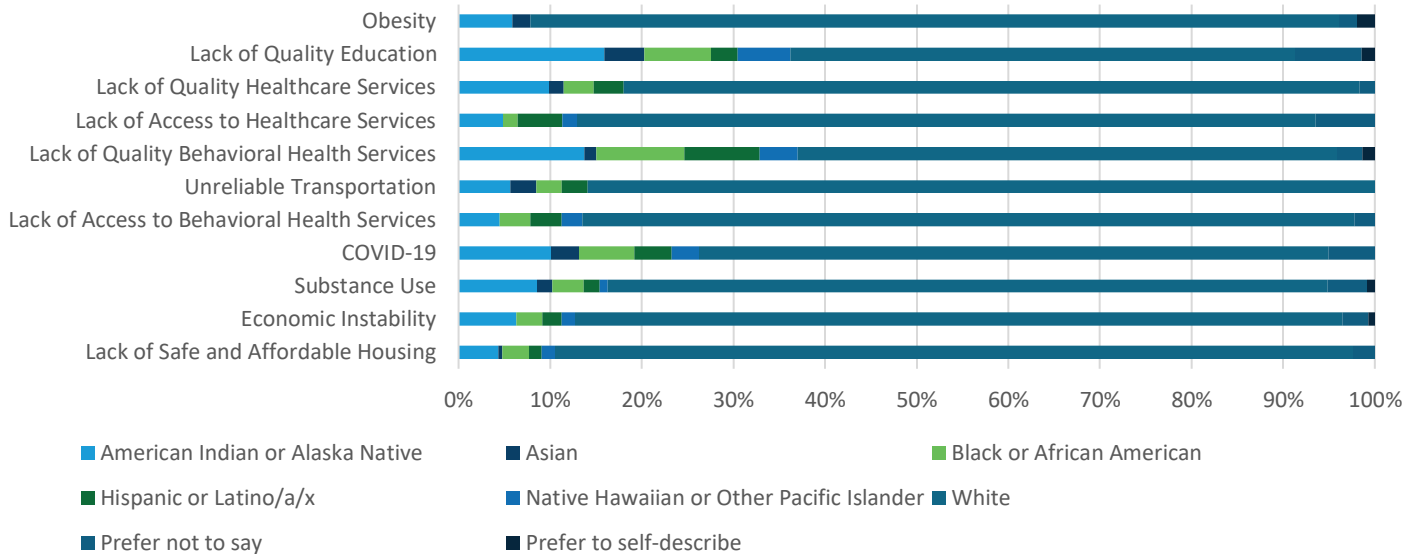
Individuals with **unknown yearly income** make up a larger proportion of those who thought **lack of access to healthcare services** was an important issue impacting the community in comparison to the other ten top issues.

Top 11 Issues Impacting the Community By Insurance Type (n=585)



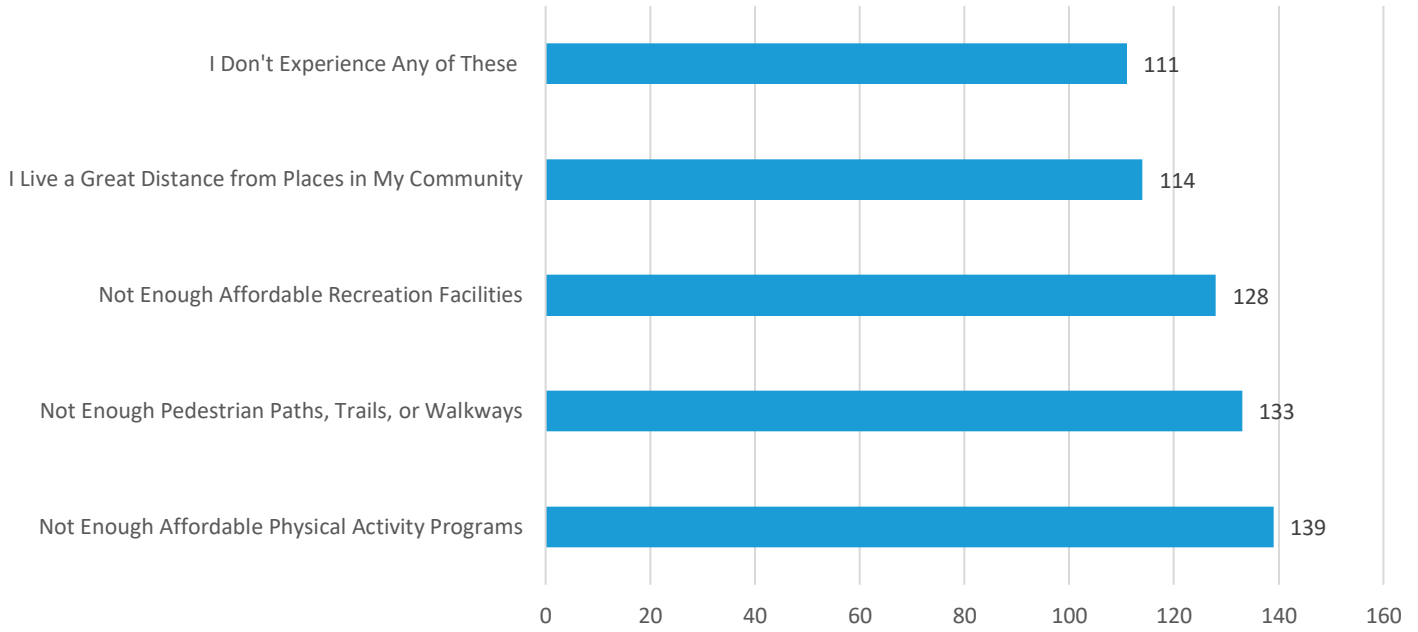
Individuals with **Private/Employer-Sponsored Plans** make up a larger proportion of those who thought **lack of safe and affordable housing** was an important issue impacting the community in comparison to the other ten top options.

Top 11 Issues Impacting the Community By Race and Ethnicity (n=585)

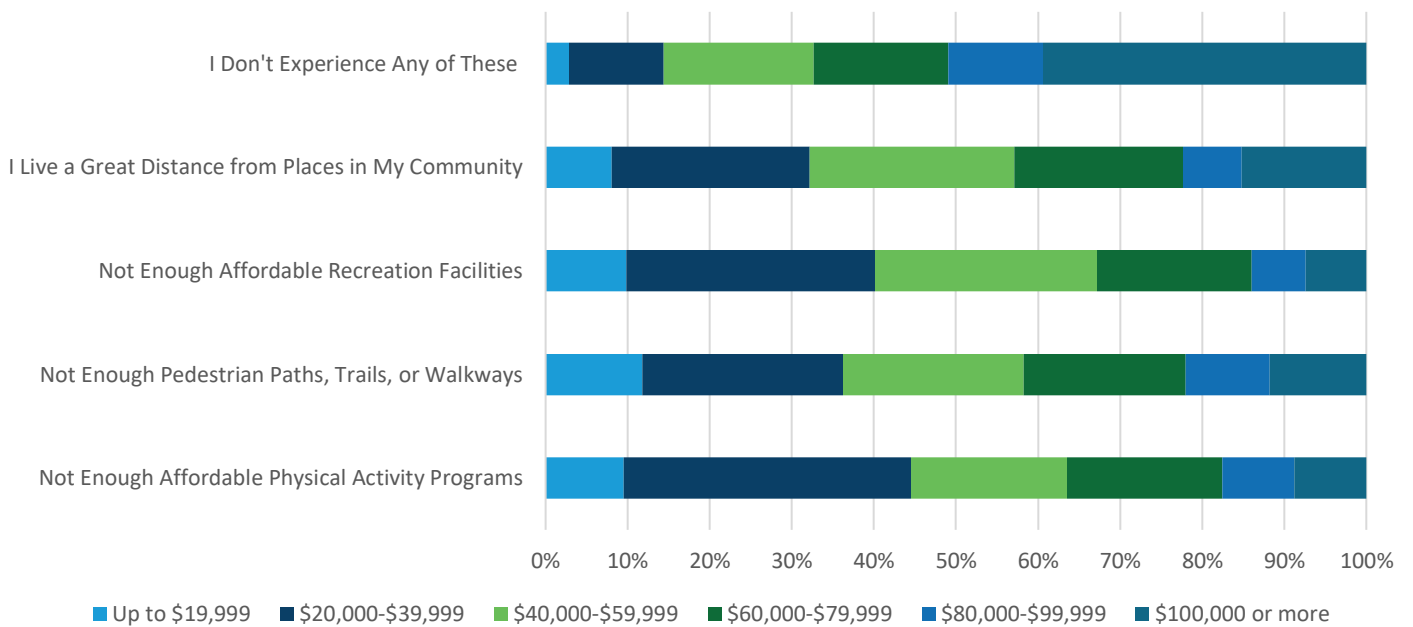


Racial and ethnic minority groups make up a larger proportion of those who thought **lack of quality behavioral healthcare services** was an important issue impacting the community in comparison to the other nine top issues.

Top 5 Issues Preventing Individuals from Engaging in More Physical Activity as Identified by Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle County Community Survey Respondents (n=579)



Top 5 Issues Preventing Individuals from Engaging in More Physical Activity by Income (n=579)



Individuals with a yearly household income of **\$20,000-\$39,999** make up a larger proportion of those who said **not enough affordable physical activity programs** prevented them from being more physically active in their community compared to the other top issues.

- **Pulse Survey**

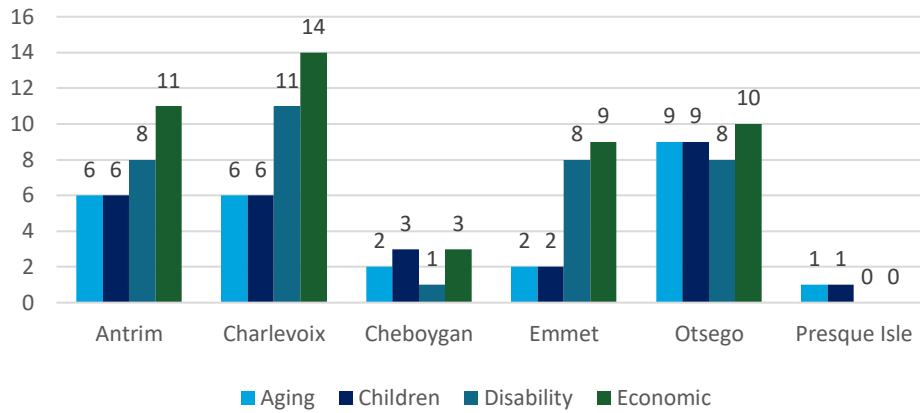
The purpose of the Pulse Survey was to gather input from people and populations facing barriers and inequities in the 31-county MiThrive region. It was a four-part data collection series, where each topic-specific questionnaire was conducted over a two-week span resulting in an eight-week data collection period. This data collection series included four three-question surveys targeting key topic areas to be conducted with clients and patients.

The Pulse Surveys were designed to be weaved into existing intake and appointment processes of participating agencies/organizations. Community partners administered the Pulse Survey series between July 26, 2021, and September 17, 2021, using a variety of delivery methods including in-person interviews, phone interviews, in-person paper surveys, and through client text services. Pulse Survey questionnaires were provided in English and Spanish.

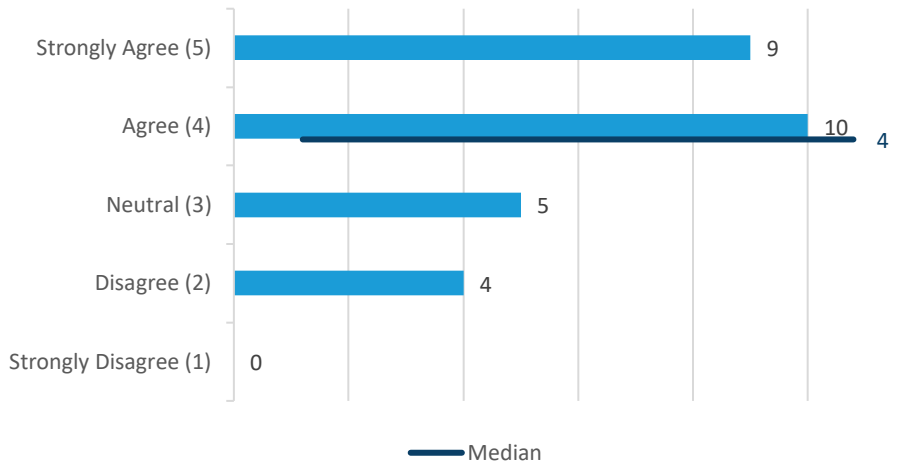
Each Pulse Survey focused on a different quality of life topic area (aging, economic security, children, and disability) using a Likert-scale question and open-ended topic-specific question. Additionally, each survey included an open-ended equity question. Within Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties, 26 aging, 27 children, 36 disability, and 47 economic responses were collected.

The target population for the Pulse Survey series included those historically excluded, economically disadvantaged, older adults, racial and ethnic minorities, those unemployed, uninsured and underinsured, Medicaid eligible, children of low-income families, LGBTQ+ and gender non-conforming, people with HIV, people with severe mental and behavioral health disorders, people experiencing homelessness, refugees, people with a disability, and many others.

A total of 136 pulse surveys were collected in the McLaren Northern Michigan Service Area.



Overall, individuals agree with the statement, "My community is a good place to age" (n=28).



Key themes that emerged from pulse survey responses that rated the following the statement low, "My community is a good place to age."

1	Lack of Resources
2	Lack of Transportation
3	Poverty
4	Geographic Location/Rurality
5	Lack of Housing
6	Social Stigma and Discrimination
7	Lack of Healthcare

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Key themes that emerged from pulse survey responses that rated the following the statement low, "My community is a good place to age."

1	Lack of Resources
2	Lack of Transportation
3	Poverty
4	Geographic Location/Rurality
5	Lack of Housing
6	Social Stigma and Discrimination
7	Lack of Healthcare
8	Safety Concerns
9	Availability of Resources
10	Community Engagement

**Themes emerged from the 10-county MiThrive Northwest Region data.*

Thinking more broadly, what are some ways in which your community could ensure everyone has a chance at living the healthiest life possible?

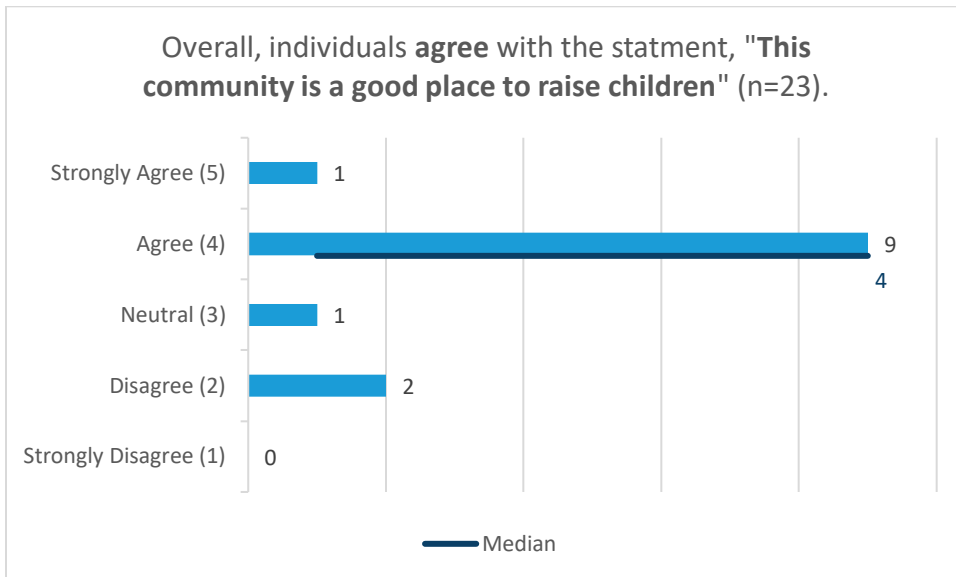
1	Improve Built Environment
2	Promote Community Engagement
3	Improve Outreach Efforts
4	Promote Nutrition and Physical Activity
5	Improved Transportation
6	Improve the Healthcare System
7	Increase Housing Options
8	Promote Social Justice
9	Greater Focus on Mental Health

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Thinking more broadly, what are some ways in which your community could ensure everyone has a chance at living the healthiest life possible?

1	Combat Food Insecurity
2	Promote Community Engagement
3	Greater Focus on Policies
4	Promote Nutrition and Physical Activity
5	Improved Transportation
6	Improve the Healthcare System
7	Increase Housing Options

**Themes emerged from the 10-county MiThrive Northwest Region data.*



Key themes that emerged from pulse survey responses that rated the following the statement low, "This community is a good place to raise children."

1	Lack of Resources
2	Poverty
3	Safety Concerns

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Thinking more broadly, how can we come together so that people promote each other's well-being and not just their own?

1	Strengthen Community Connection and Support
2	Affordable Recreation Opportunities
3	Address Political Division
4	Increase Mental Health Supports
5	More Resources and Services
6	Strengthen Family Support

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Key themes that emerged from pulse survey responses that rated the following the statement low, "This community is a good place to raise children."

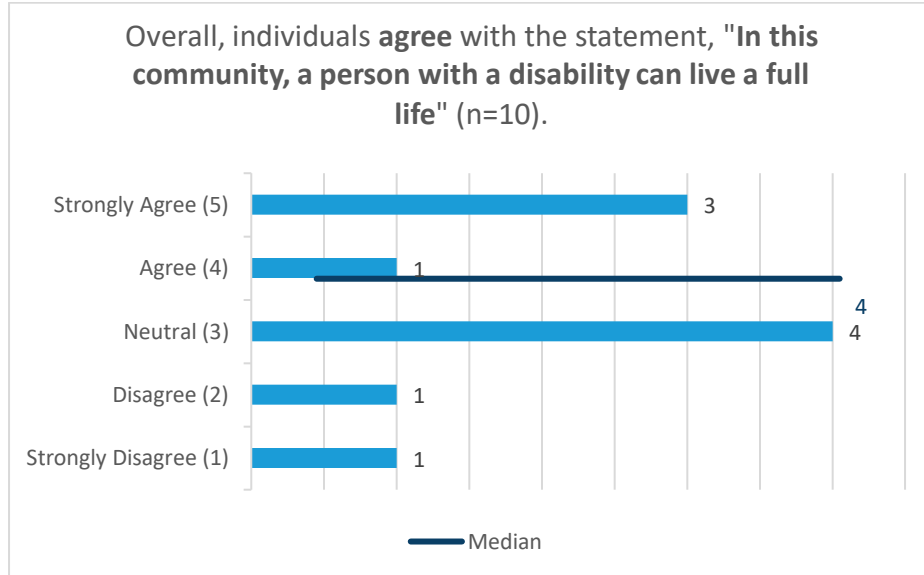
1	Lack of Resources
2	Poverty
3	Safety Concerns
4	Low Quality Education
5	Lack of Recreation Programming

**Themes emerged from the 10-county MiThrive Northwest Region data.*

Thinking more broadly, how can we come together so that people promote each other's well-being and not just their own?

1	Strengthen Community Connection and Support
2	Affordable Recreation Opportunities
3	Address Political Division
4	Increase Mental Health Supports
5	More Resources and Services
6	Increased Health Education and Awareness
7	More COVID-19 Prevention Measures

**Themes emerged from the 10-county MiThrive Northwest Region data.*



Key themes that emerged from pulse survey responses that rated the following the statement low, "In this community, a person with a disability can live a full life."

1	Lack of Resources
2	Lack of Accessible Infrastructure
3	System Issues
4	Geographic Location/Rurality
5	Need for More Community Support
6	Poverty

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Thinking more broadly, think about groups that experience relatively good health and those that experience poor health. Why do you think there is a difference?

1	Lack of Healthcare
2	Poverty
3	System Navigation Issues
4	Lack of Education
5	Need for Increased Community Support
6	Lack of Resources
7	Lack of Insurance

**Themes emerged from the 10-county MiThrive Northeast Region data.*

Key themes that emerged from pulse survey responses that rated the following the statement low, "In this community, a person with a disability can live a full life."

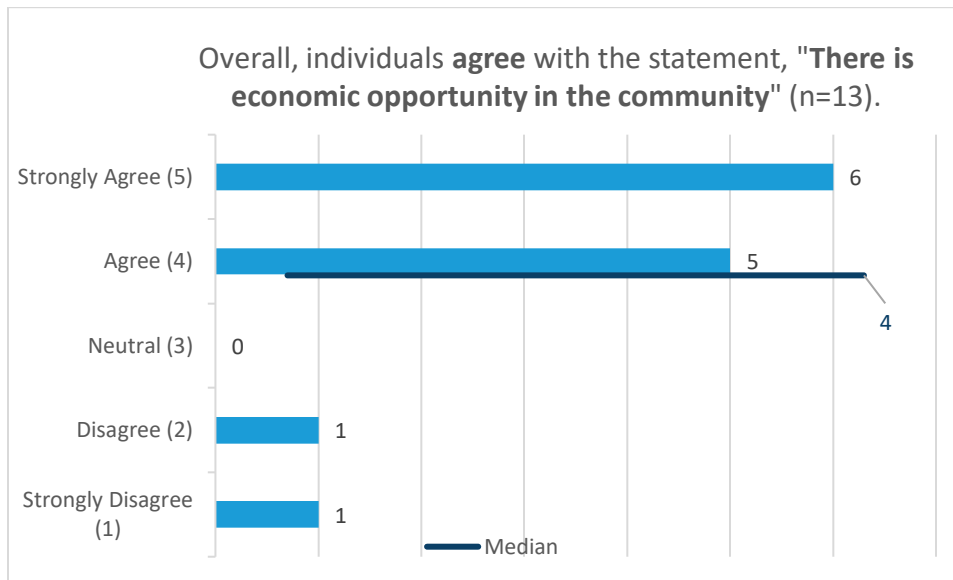
1	Lack of Resources
2	Lack of Accessible Infrastructure
3	System Issues
4	Geographic Location/Rurality
5	Poverty

**Themes emerged from the 10-county MiThrive Northwest Region data.*

Thinking more broadly, think about groups that experience relatively good health and those that experience poor health. Why do you think there is a difference?

1	Poverty
2	System Navigation Issues
3	Lack of Education
4	Need for Increased Community Support
5	Lack of Resources
6	Lack of Insurance

**Themes emerged from the 10-county MiThrive Northwest Region data.*



Key themes that emerged from pulse survey responses that rated the following the statement low, "There is economic opportunity in the community."

1	Job Availability
2	Lack of Housing
3	Poor Wages
4	Lack of Resources
5	Childcare
6	Transportation/Commute
7	Rurality/Geographic Location

*Themes emerged from the 10-county MiThrive Northeast Region data.

Thinking more broadly, how would you ensure that people in tough life circumstances come to have as good a chance as others do in achieving good health and wellbeing over time?

1	Change in Healthcare System
2	Increase Financial Assistance/Government Assistance
3	More Resource Navigation
4	Increased Education and Job Availability
5	Increased Community Support/Support Systems
6	More Affordable and Accessible Childcare
7	More COVID-19 Prevention Measures
8	Insurance

*Themes emerged from the 10-county MiThrive Northeast Region data.

Key themes that emerged from pulse survey responses that rated the following the statement low, "There is economic opportunity in the community."

1	Job Availability
2	Lack of Housing
3	Poor Wages
4	Lack of Resources
5	Transportation/Commute
6	Rurality/Geographic Location

**Themes emerged from the 10-county MiThrive Northwest Region data.*

Thinking more broadly, how would you ensure that people in tough life circumstances come to have as good a chance as others do in achieving good health and wellbeing over time?

1	Change in Healthcare System
2	Increase Financial Assistance/Government Assistance
3	More Resource Navigation
4	Increased Education and Job Availability
5	Increased Community Support/Support Systems
6	More Affordable and Accessible Childcare
7	More COVID-19 Prevention Measures
8	Insurance

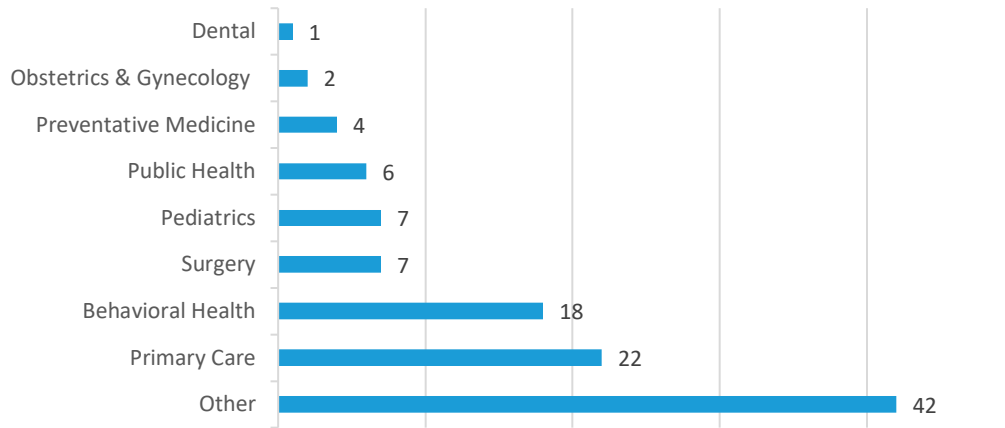
**Themes emerged from the 10-county MiThrive Northwest Region data.*

○ Healthcare Provider Survey

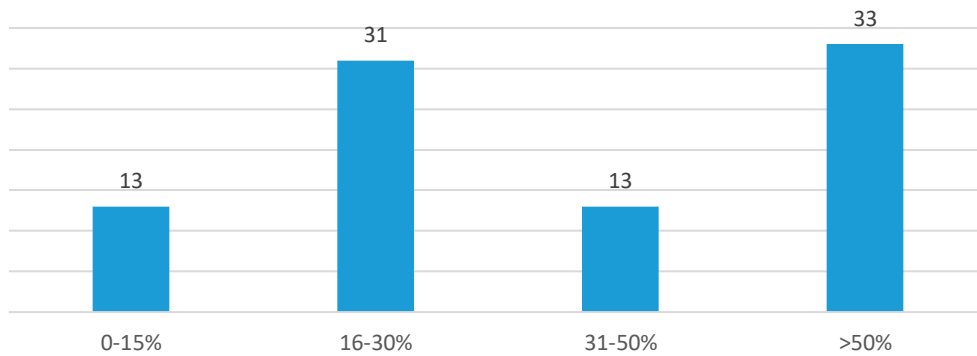
Data collected for the Healthcare Provider Survey was gathered through a self-administered, electronic survey. It asked 10 questions about what is important to the community, what factors are impacting the community, quality of life, built environment, community assets, and demographic questions. The survey was open from October 18, 2021, to November 7, 2021.

Healthcare partners such as hospitals, federally qualified health centers and local health departments, among others, sent the Healthcare Provider Survey via an electronic link to their physicians, nurses, and other clinicians. Additionally, partner organizations supported survey promotion by sharing the survey link with external community partners. Ninety-seven providers completed the Healthcare Provider Survey in Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties.

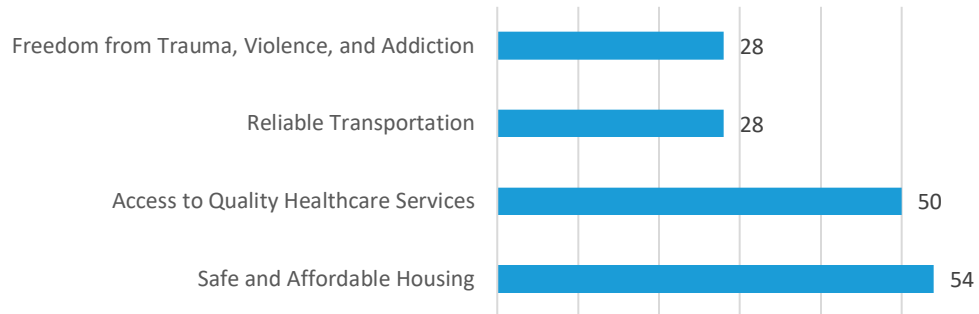
Most providers who answered the survey in the McLaren Northern Michigan Service Area were primary care providers or other (n=90).



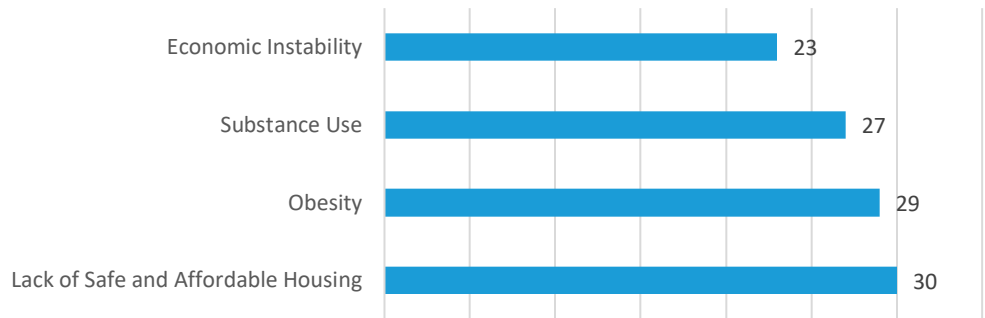
36.6% of providers in this region reported that >50% of patients/clients they serve are on Medicaid (n=90).



Providers think that safe and affordable housing is the most important factor impacting patients/clients in the communities they serve (n=90).



Providers think lack of safe and affordable housing is the most important issue impacting patients/clients in the communities they serve (n=90).



62.2% of providers answered housing resources/services are missing in their community that would benefit their patients/clients serve (n=90).



- **Community System Assessment**

The Community System Assessment focuses on organizations that contribute to wellbeing. It answers the questions, “What are the components, activities, competencies, and capacities in the regional system?” and “How are services being provided to our residents?” It was designed to improve organizational and community communication by bringing a broad spectrum of partners to the same table; explore interconnections in the community system; and identify system strengths and opportunities for improvement. The Community System Assessment was composed of two phases: Community System Assessment Events within the MiThrive regions followed by focused discussions at county-level coordinating bodies.

- **Community System Assessment Event**



At the Community System Assessment events, residents and community partners assessed the system’s capacity in the Northwest, Northeast, and North Central regions. Through facilitated discussion, they identified system strengths and opportunities for improvement among eight domains (Please see Appendix D for Community System Assessment event agenda).

MiThrive Northwest and Northeast Community System Assessment Results—System Strengths

Focus Area	Northwest Region August 17, 2021 + county-level sessions 174 residents and partners	Northeast Region August 16, 2021 + county-level sessions 172 residents and partners
<p><u>Resources</u> A community asset or resource is anything that can be used to improve the quality of life for residents in the community</p>	<ul style="list-style-type: none"> • CHIR’s Community Connections navigation program is in place with SDoH navigation • No wrong door approach—multiple ways to access resources 	<ul style="list-style-type: none"> • Organizations in the system know what resources are available • Organizations do work together to connect people to the resources they need
<p><u>Policy</u> A rule or plan of action, especially an official one adopted and followed by a group, organization, or government</p>	<ul style="list-style-type: none"> • COVID-19 has created new partnerships to develop policies • The CHIR has gathered agencies to work together 	<ul style="list-style-type: none"> • Many organizations in the system work together to alert policymakers and the community of possible public health effects from current or proposed policies
<p><u>Data Access/Capacity</u> A community with data capacity is one where people can access and use data to understand and improve health outcomes</p>	<ul style="list-style-type: none"> • Assessment tools are gathering more information and breaking down the data geographically 	<ul style="list-style-type: none"> • No strengths identified
<p><u>Community Alliances:</u> Diverse partnerships which collaborate in the community to maximize health improvement initiatives and are beneficial to all partners</p>	<ul style="list-style-type: none"> • Hundreds of people are engaged in health improvement across the region • The CHIR works to empower local communities to build capacity for health improvement 	<ul style="list-style-type: none"> • The community system is composed of many diverse partners
<p><u>Workforce:</u> The people engaged in or available for work in a particular area</p>	<ul style="list-style-type: none"> • Michigan WORKS! Tracks trending jobs and employment rates • There is collaboration re training opportunities 	<ul style="list-style-type: none"> • Michigan WORKS! Is a great asset to address workforce issues
<p><u>Leadership</u> Leadership is demonstrated by organizations and individuals that are committed to improving the health of the community.</p>	<ul style="list-style-type: none"> • CHIR/MiThrive in collaboration with hospital systems have created a shared vision for the community 	<ul style="list-style-type: none"> • There are individuals and organizations in the system who want to help
<p><u>Community Power and Engagement:</u> Power is the ability to control the processes of agenda setting, resource distribution, and decision-making, as well as determining who is included and excluded from these processes</p>	<ul style="list-style-type: none"> • There is significant activity creating awareness of public health issues in the region informed by the CHIR and its Learning Community • Organizations are developing and expanding communications plans 	<ul style="list-style-type: none"> • There is connection and collaboration in the Community System
<p><u>Capacity for Health Equity:</u> Assurance of the conditions for optimal health for all people</p>	<ul style="list-style-type: none"> • Organizations are identifying and discussing health disparities 	<ul style="list-style-type: none"> • Data is collected regarding needs of residents in the community

Community System Assessment—System Opportunities for Improvement

Focus Area	Northwest Region August 17, 2021 + county-level sessions 174 residents and partners	Northeast Region August 16, 2021 + county-level sessions 172 residents and partners
<p><u>Resources</u> A community asset or resource is anything that can be used to improve the quality of life for residents in the community</p>	<ul style="list-style-type: none"> Better communication strategies are needed Difficult to understand why people do not get the services they need due to lack of follow up 	<ul style="list-style-type: none"> Organizations need to increase understanding of the reasons that people do not get the services they need The system needs to reduce stigma that may be a barrier to people accessing resources
<p><u>Policy</u> A rule or plan of action, especially an official one adopted and followed by a group, organization, or government</p>	<ul style="list-style-type: none"> Must determine ways the system can influence policy Be more transparent Review policies before they there is an issue 	<ul style="list-style-type: none"> To engage in activities that inform the policy development process, organizations in the system need more staff and funding Need to get decision-makers to the table
<p><u>Data Access/Capacity</u> A community with data capacity is one where people can access and use data to understand and improve health outcomes</p>	<ul style="list-style-type: none"> Organizations in the system need to improve on getting information regarding data out in the community Improve data sharing 	<ul style="list-style-type: none"> There are limited resources and manpower Need to present data to the identified target population and tailor the data so it is meaningful to them Update the CHNA continuously with current information
<p><u>Community Alliances:</u> Diverse partnerships which collaborate in the community to maximize health improvement initiatives and are beneficial to all partners</p>	<ul style="list-style-type: none"> Need to improve alliances within the whole system Partnerships vary county to county 	<ul style="list-style-type: none"> Need to get community members engaged in partnerships Partnerships could improve upon work to improve community health
<p><u>Workforce:</u> The people engaged in or available for work in a particular area</p>	<ul style="list-style-type: none"> Shortage of mental health providers Most organizations are short-staffed Pay scales are contributing to the shortfall 	<ul style="list-style-type: none"> Need to develop an unmet needs report to better understand workforce gaps Use the knowledge from CHNA to develop plans address workforce gaps and shortfalls Increase wages to create livable wages
<p><u>Leadership</u> Leadership is demonstrated by organizations and individuals that are committed to improving the health of the community.</p>	<ul style="list-style-type: none"> Increase emphasis on leadership and management skills Innovation leadership acquisition/attract leaders to the region 	<ul style="list-style-type: none"> More staff is needed to make significant change Need to help people and organizations with strengths—find opportunities for leaderships Need more diversity in leadership
<p><u>Community Power and Engagement:</u> Power is the ability to control the processes of agenda setting, resource distribution, and decision-making, as well as determining who is included and excluded from these processes</p>	<ul style="list-style-type: none"> Need more authentic voices and engagement from residents Need to improve feedback loops 	<ul style="list-style-type: none"> Increase resident voice and engagement to inform decision-making Lack of access to broadband is a barrier Work collaboratively to link communications plans between organizations

<p><u>Capacity for Health Equity:</u> Assurance of the conditions for optimal health for all people</p>	<ul style="list-style-type: none"> • Increase development and implementation of equity policies and procedures • Need more input from residents experiencing inequities • Goals to reduce disparities are in place as a system, but there is little to no action taken 	<ul style="list-style-type: none"> • Increase resident voice to identify health disparities and plan ways to reduce inequities • Reduce stigma which leads to bias and discrimination against certain populations
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• **Forces of Change Assessment**

The Forces of Change Assessment aims to answer the following questions: “What is occurring or might occur that affects the health of our community or the local system?”, and “What specific threats or opportunities are generated by these occurrences? Like the Community System Assessment, the Forces of Change Assessment was composed of community meetings convened virtually in the Northwest, Northeast, and North Central MiThrive Regions.

It focused on trends, factors, and events outside our control within several dimensions, such as government leadership, government budgets/spending priorities, healthcare workforce, access to health services, economic environment, access to social services, and social context. Results of the Northwest and Northeast Forces of Change Assessments are summarized below (Please see Appendix E for Forces of Change event agenda).

FORCES OF CHANGE ASSESSMENT

We are hosting 3 virtual events in April across Northern lower Michigan

[CLICK HERE TO REGISTER](#)

WHO SHOULD ATTEND?
All are welcome! We need voices from all sectors of the community. Your voice, expertise, and experiences will help make collaborative decisions to improve the health and well-being of your community.

WHAT ARE WE DOING?
Identifying and discussing the forces of change that impact the health of our communities. Forces of change are trends, factors, and events outside of our control that may influence our community's health or the system of organizations supporting the community, both in the recent past and the foreseeable future.

WHY IS THIS IMPORTANT?
Where we live, learn, work, and play powerfully influences our health and well-being. No individual, community group, hospital, agency, or governmental body can be entirely responsible for the status of our community or our community's health. No organization can address the multitude of issues alone. Together, we have the power to build a thriving region where everyone, despite differences, can thrive.

WHAT IS MITHRIVE?
MiThrive brings cross-sector partners and residents together to assess community needs and collaborate for community health improvement in the 31 counties of Northern Michigan. It is adaptable, comprehensive, action-oriented, asset-based and focuses on health equity and inclusiveness through four different assessments.

Questions or need additional information? Please email us at MiThrive@NorthernMichiganCHIR.org

Top Forces of Change in the Northwest and Northeast Regions

Domains	Top Forces in Northwest Region	Top Forces in Northeast Region
Government Leadership and Spending/Budget Priorities	<ul style="list-style-type: none"> • Regional and State level approach • Government’s diversity of priorities • Community awareness and involvement in decision making 	<ul style="list-style-type: none"> • Political agendas • Influences Policies
Sufficient Healthcare Workforce	<ul style="list-style-type: none"> • Retirement and burnout • Affordable housing • Mental health and providers 	<ul style="list-style-type: none"> • Monies and grants for training • Minimum wage pending legislation • Lack of staff in specific industries (mental health and substance use treatment)
Access to health services	<ul style="list-style-type: none"> • Insurance dictates access to healthcare • Workforce shortages and staffing • Funding for health services in rural areas 	<ul style="list-style-type: none"> • Cost and access to care • Large poverty and ALICE population • Provider shortages and rurality
Economic environment	<ul style="list-style-type: none"> • Affordable housing • Livable wage 	<ul style="list-style-type: none"> • Education and income levels • Affordable housing • Broadband internet
Access to social services	<ul style="list-style-type: none"> • Mental health and substance misuse • Affordable housing • Broadband and skills to navigate virtual platforms 	<ul style="list-style-type: none"> • Lack of housing (public/affordable) • Isolation • Access to substance use disorder services
Social context	<ul style="list-style-type: none"> • Access to assistance (food, paying utility bills) • Broadband • Social justice, equity, and inclusion 	<ul style="list-style-type: none"> • Environment and Climate Change • Access to accurate information/discernment of information • Affordable housing
Impacts related to COVID-19	<ul style="list-style-type: none"> • Rurality, connectivity, transportation, technology, education • Mistrust • Mental health 	<ul style="list-style-type: none"> • Vaccinations are coming out, recent adverse events • Overall decrease in mental health • Closing of businesses, loss of jobs

Data Limitations

Community Health Status Assessment

- Since secondary indicator scores are based on comparison, low scores can result even from very serious issues, if there are similarly high rates across the state and/or US.
- We can only work with the data we have, which can be limited at the local level in Northern Michigan. Much of the data has wide confidence intervals, making many of these data points inexact.
- Some data is missing for some counties - as a result, the “regional average” may not include all counties in the region.
- Secondary data tells only part of the story. Viewing all the assessments holistically is therefore necessary.
- Some data sources have not been updated data since the past MiThrive cycle. Values for some indicators may not have changed and therefore cannot be used to show trends from last cycle to this cycle.

Community System Assessment

- Completing the Community System Assessment is a means to an end rather than an end in itself. The results of the assessment should inform and result in action to improve the Community System’s infrastructure and capability to address health improvement issues.
- Each respondent self-reported with their different experiences and perspectives. Based on these perspectives, gathering responses for each question includes some subjectivity.
- When completing the assessment at the regional events or at the county level, there were time constraints for discussion and some key stakeholders were missing from the table.
- Some participants tended to focus on how well their organization addressed the focus areas for health improvement rather than assessing the system of organizations as a whole.

Community Themes and Strengths Assessment

- A unique target number of completed Community Surveys was set for each county based on county population size. Survey responses were not weighted for counties who exceeded this target number.
- While the Community Survey was offered online and in-person, most surveys were collected digitally.
- Partial responses were removed from the Community Survey.
- Outreach and promotion for the Provider Survey was driven by existing MiThrive partners which influenced the distribution of survey responses across provider entities.
- Pulse Surveys were conducted across a wide variety of agencies and organizations. Additionally, survey delivery varied including in-person interview, over the phone interview, text survey, and paper format.

Forces of Change Assessment

- Participants self-selected into one of eight Forces of Change Assessment topic areas during the events and discussed forces, trends and events using a standardized Facilitation Guide, although facilitators and notetakers differed for the topic areas and events
- These virtual events removed some barriers for participants although internet accessibility was a requirement to participate
- When completing the assessment there were time constraints for discussion and some key stakeholders were missing from the table.
- MiThrive staff selected the eight topic areas using the Mobilizing for Action through Planning and Partnerships Guide in addition to insights from the MiThrive Core Team members.
- COVID-19 was included as a stand alone topic area and all participants were advised of the topic areas and were instructed to focus on their topic area with minimal discussion on COVID-19 unless it was their specific topic area.

Phase 4: Identifying and Prioritizing Strategic Issues

To launch Phase 4, the MiThrive Core Support Team scored each indicator on a scale of zero to three by sorting the data into quartiles based on the 31-county regional level, comparing to the mean value of the MiThrive Region, and comparing to the state, national, and Healthy People 2030 target when available. Indicators with a score above 1.5 were defined as “high secondary data” and indicators with scores below 1.5 were defined as “low secondary data”. Next, themes that emerged from the Community System Assessment, Community Themes and Strengths Assessment (Community Survey, Pulse Survey, and Healthcare Provider Survey), and Forces of Change Assessment were identified. **All assessments provide valuable information, but the themes that occur in multiple data collection methods are the most significant.** On November 16, 2021, MiThrive Design Team members met to sort the data for the Northwest, Northeast, and North Central Regions using the Prioritization Matrix:



There was considerable agreement across the 31-county region, with the following cross-cutting themes sorted into the High Secondary Data/High Primary Data (upper right quadrant) in all three MiThrive Region:

- Mental Health
- Substance Misuse
- Safety and Well-Being
- Housing
- Transportation

- Diversity, Equity and Inclusion
- Healthcare

In addition, themes emerged that were unique to the MiThrive regions. In the Northwest Region, these themes were: COVID-19, infrastructure for healthy living, and health food access. In the Northeast Region, the themes were: broadband access, healthy weight and healthy food.

The members of the MiThrive Steering Committee, Design Team, and Work Groups met on November 22, 2021, to identify Strategic Issues that emerged from all four assessments. They drafted questions for each Strategic Issue (and continued to refine them over the next few weeks), as recommended by the Mobilizing for Action through Planning and Partnerships community health needs assessment framework. The 11 Strategic Issues are listed below *in alphabetical order*:

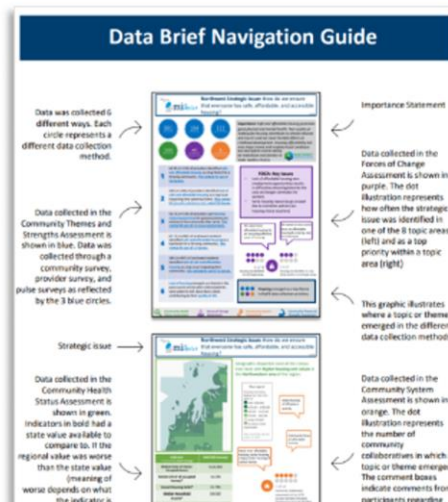
- **Access to Healthcare:** How do we increase access to integrated systems of care as well as increase engagement, knowledge, and awareness of existing systems to better promote health and prevent and treat chronic disease?
- **Behavioral Health:** How do we increase access and reduce barriers to quality behavioral health services while increasing resiliency and wellbeing?
- **Broadband Access:** How can we advocate for increased broadband access and affordability?
- **Economic Security:** How do we foster a community where everyone feels economically secure?
- **Equity:** How do we cultivate a community whose policies, systems, and practices are rooted in equity and belonging?
- **Food Security:** What policy, system, and environmental changes do we need to ensure reliable access to healthy food?
- **Healthy Weight:** How can we create an environment which provides access, opportunities, and support for individuals to reach and maintain a healthy weight?
- **Housing Security:** How do we ensure that everyone has safe, affordable, and accessible housing?
- **Safety:** How do we ensure all community members are aware of and can access safety and well-being supports?
- **Substance Misuse:** How can we increase comprehensive substance misuse prevention and treatment services that is accessible, patient-centered, and stigma free?
- **Transportation Options:** How can we nurture a community and health-oriented transportation environment which provides safe and reliable transportation access, opportunities, and encouragement to live a healthy life?

For each Strategic Issue, a Data Brief was prepared that summarized, by MiThrive Region, the results of the four assessments; please visit [MiTHRIVE – Northern Michigan CHIR](#) for Data Briefs as well as county-level data.

MiThrive Data Briefs



- ✓ Assessment Snapshot
- ✓ Navigation Guide
- ✓ Acronym Key



In December, Data Walk and Priority-Setting Events were convened for the three MiThrive Regions. During these live events, residents and community partners reviewed data and ranked priorities using common processes. The ranking process used five criteria to assess each Strategic Issue, including severity, magnitude, impact, health equity, and sustainability. Participant votes were calculated in real time during the event. This transparency elicited robust conversation and participants opted to combine some issues given the interconnected nature of topics. **Participants from the Northeast and Northwest Data Walks and Priority-Setting events prioritized the interconnected issues of mental health and substance use disorders, access to care, chronic disease, and housing.**

Northwest Region December 14, 2021 69 residents and partners	Northeast Region December 7, 2021 34 residents and partners
<ol style="list-style-type: none"> 1. Affordable housing 2. Mental health and substance use 3. Access to healthcare 4. Chronic disease 	<ol style="list-style-type: none"> 1. Substance use 2. Mental health 3. Access to healthcare 4. Chronic disease

Next Steps

Now that the MiThrive Community Health Needs Assessment is complete, MiThrive Workgroups will be developing Community Health Improvement Plans for the top-ranked priorities in their region and overseeing their implementation. If you are interested in joining the Northwest or Northeast Workgroup, please email mithrive@northernmichiganchir.org

Appendix A

Community Health Status Assessment

Indicators scored 1.5 and above in McLaren Northern Michigan Service Area

1	Antrim, Charlevoix, Cheboygan, Emmet, Otsego, Presque Isle	Comparison Score	Antrim	Charlevoix	Emmet	Cheboygan	Otsego	Presque Isle
2	Median household income	1.63	\$56,165	\$55,760	\$55,829	\$48,044	\$54,332	\$47,948
3	Special education % child find	1.75	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
4	Average HPSA score dental health	1.61	16.33	12	22	19.5	19	20
5	Renters % of all occupied homes	2.17	12.90%	19.10%	27.20%	17.60%	21.10%	11.20%
6	Vacant housing units	2.15	45.20%	34.90%	33.30%	39.50%	33.30%	44.70%
7	Child abuse/neglect rate per 1,000	1.67	125.3	112.9	97.1	157.7	146	107.5
8	Teens with 2+ ACES	1.58	40.60%	38.70%	28.00%	n/a	n/a	n/a
9	Population food insecurity	1.73	12.60%	12.20%	12.80%	16.80%	14.10%	15.30%
10	Teens with 5+ fruits/vegetables per day	1.58	22.60%	16.10%	30.30%	n/a	n/a	n/a
11	Asthma (teens)	1.75	50.00%	n/a	53.30%	n/a	n/a	n/a
12	Self-reported health assessment fair or poor	1.61	22.5	16.5	21.2	21.4	22.3	24.9
13	Pneumonia	1.83	32.5	27.1	21.6	25.2	44.2	28.3
14	Major depressive episode (teens)	1.89	50	48.4	63.6	n/a	n/a	n/a
15	Poor mental health 14+ days (adults)	1.64	12.7	9.4	12.8	*	*	*
16	Overweight (adults)	2.33	10.40%	18.20%	14.30%	n/a	n/a	n/a
17	Smoked cigarettes in past 30 days (teens)	1.75	10.00%	7.10%	0.90%	n/a	n/a	n/a
18	Used chew tobacco etc. in past 30 days (teens)	1.71	7.10%	3.70%	1.80%	n/a	n/a	n/a
19	Motor vehicle crash involving alcohol mortality	2.03	29%	42%	44%	62%	23%	44%
20	Alzheimer's/Dementia mortality	1.67	39.3	26.9	49.9	32.7	36.4	23.2
21	Liver disease mortality	1.58	14.7	9.3	15.2	15.3	14.9	*
22	Alcohol induced mortality	2.06	10	3	4	5	5	6
23								
24								
25								
26								
27								
28								
29								
30								
31								

MiThrive Community Survey

Informed Consent

2

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

This survey is a chance for you to tell us what is most important to you. MiThrive is working to improve the health of communities in Northern Michigan by collecting data, identifying key issues, and bringing people together for change.

This survey will take about 10 minutes to complete. 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. Five (5) winners will be chosen - must be 18 or older.

If you have any questions about this survey, please email mithrive@northernmichiganchir.org.

VALIDATION Max. answers = 3 (if answered)

ID 13

1. In the following list, what do you think are the **three most important factors for a thriving community?**

Check only three:

- | | |
|---|--|
| <input type="checkbox"/> Reliable transportation | <input type="checkbox"/> Safe and affordable housing |
| <input type="checkbox"/> Parks and green spaces | <input type="checkbox"/> Belonging & inclusion |
| <input type="checkbox"/> Meaningful and rewarding work | <input type="checkbox"/> Lifelong learning: cradle to career |
| <input type="checkbox"/> Civic engagement | <input type="checkbox"/> Disability Accessibility |
| <input type="checkbox"/> Access to quality behavioral health services | <input type="checkbox"/> Clean environment |
| <input type="checkbox"/> Freedom from trauma, violence, and addiction | <input type="checkbox"/> Access to nutritious food |
| <input type="checkbox"/> Access to quality healthcare services | <input type="checkbox"/> Arts and cultural events |
| <input type="checkbox"/> Disease and illness prevention | <input type="checkbox"/> Other - Write In |
-

VALIDATION Max. answers = 3 (if answered)

ID 16

2. In the following list, what do you think are the **three most important issues impacting your community?**

Check only three:

- | | | |
|--|---|--|
| <input type="checkbox"/> Racism and discrimination | <input type="checkbox"/> Suicide | <input type="checkbox"/> Lack of access to healthcare services |
| <input type="checkbox"/> Infectious diseases (e.g., hepatitis, tuberculosis, etc.) | <input type="checkbox"/> Infant death | <input type="checkbox"/> Unreliable transportation |
| <input type="checkbox"/> Child abuse/neglect | <input type="checkbox"/> Substance use | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Rape/sexual assault | <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Lack of quality behavioral health services |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Lack of access to nutritious foods | <input type="checkbox"/> Heart disease and stroke |
| <input type="checkbox"/> Sexually transmitted infections (STIs) | <input type="checkbox"/> Lack of access to behavioral health services | <input type="checkbox"/> High blood pressure |
| <input type="checkbox"/> COVID-19 | <input type="checkbox"/> Teenage pregnancy | <input type="checkbox"/> Aging problems (e.g., arthritis, hearing/vision loss, etc.) |
| <input type="checkbox"/> Dental problems | <input type="checkbox"/> Neighborhood and built environment | <input type="checkbox"/> Respiratory/lung disease |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Lack of quality education | <input type="checkbox"/> Lack of safe and affordable housing |
| <input type="checkbox"/> Poor environmental health | <input type="checkbox"/> Cancer | <input type="checkbox"/> Lack of quality healthcare services |
| <input type="checkbox"/> Homicide | <input type="checkbox"/> Lack of access to education | <input type="checkbox"/> Firearm-related injuries |
| <input type="checkbox"/> Economic instability | <input type="checkbox"/> Motor vehicle crash injuries | <input type="checkbox"/> Other - Write In |

18

Imagine a ladder with steps numbered from zero at the bottom to 10 at the top. The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

19

3. On which step of the ladder would you say you personally feel you stand at this time?

- 10
- 9
- 8
- 7
- 6
- 5
- 4
- 3
- 2
- 1
- 0

20

4. On which step of the ladder do you think you will stand about three years from now?

- 10
- 9
- 8
- 7
- 6
- 5
- 4
- 3
- 2
- 1
- 0

21

5. Think about your level of physical activity and ability to bike, walk, or roll from one place to another. Do any of the following issues prevent you from being more active in your community? (select all that apply)

- Not enough bike lanes
- Not enough affordable recreation facilities
- I live a great distance from places in my community
- Not enough street lights
- Not enough sidewalks
- Low accessibility
- Not enough pedestrian paths, trails, or walkways
- Not enough wayfinding signage
- Not enough affordable physical activity programs
- I feel unsafe in my community
- Not enough greenspaces
- Other - Write In
- I don't experience any of these

28

A community is defined, not only by its problems, but by its assets. Assets are resources that bring value to a community such as people, groups, and organizations. We want to know what assets make your community unique and special. Below is a list of community assets. Check the box by each asset that exists in your community. On the following page you will be asked to identify the name of the person, group, or organization and if that asset is primarily focused on a particular population.

6. Check the box next to each asset you know is in your community (feel free to check as many or as few options as you want):

Social Service

- Community Center
- Housing Organizations
- Food Pantry / Kitchens
- Emergency Housing Shelters
- Halfway Houses
- Domestic Violence Shelters

Social/Grassroot Organizations

- Seniors' Group
- Special Interest Group
- Advocacy Groups/Coalitions
- Cultural Organizations
- Hunting/Sportsman Leagues
- Amateur Sports Leagues

Education

- Colleges or Universities

- Community College
- Before-/After-School Program
- Vocational/Technical Education Programs

Health Institutions

- Hospital
- Healthcare Clinic
- Health Department
- Behavioral Health Services

Public Service

- Library
- Police Department
- Fire Department
- Emergency Medical Services

Community-Based Organizations

- Religious Organizations
- United Way

- Community or Philanthropic Foundation
- Political Organizations

Infrastructure

- Parks
- Public Pools
- Vacant Private Building or Lot
- Public Lake or Coastline
- Community Gardens

- Farmers' Markets

Noteworthy Person/Group

- Local Artists/Musicians
- Community Leader
- Celebrity or Influential Figure

Other

- Other - Write In (Required)

 29

PIPING Piped From Question 6. (Check the box next to each asset you know is in your community (feel free to check as many or as few options as you want):)

Can you tell us the names of the organization you selected?

[question("piped value")]

 30

PIPING Piped From Question 6. (Check the box next to each asset you know is in your community (feel free to check as many or as few options as you want):)

7. Some of the assets you selected may be geared to a special population. Can you tell us the target population for the assets you identified?

Demographic Questions

33

7. What 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

4

8. What is your zip code?

5

9. How old are you?

- Under 18
- 18-24
- 25-39
- 40-64
- 65 and older

6

10. What kind of health insurance do you have? (select all that apply)

- Medicaid and Healthy Michigan Plans
- Medicare
- Private/Employer-Sponsored Insurance
- Uninsured
- Unknown
- Other - Write In

7

11. Which of the following best describes you? (select all that apply)

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino/a/x
- Native Hawaiian or Other Pacific Islander
- White
- Prefer not to say
- Prefer to self-describe

8

12. What is your yearly 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
- Over \$100,000

9

13. Including yourself, how many people live in your household?

- 1
- 2
- 3
- 4
- 5
- 6
- >7

LOGIC Show/hide trigger exists.

10

14. Do you identify as having a disability?

- Yes
- No

LOGIC Hidden unless: #14 Question "Do you identify as having a disability?" is one of the following answers ("Yes")

11

15. Select all that apply

- Physical Disability
- Mental Disability
- Emotional Disability
- Prefer not to say
- Prefer to self-describe

12

16. How do you identify your gender? (select all that apply)

Female

Male

Non-binary

Transgender

Prefer to self-describe:

Prefer to not answer

34

IMPORTANT: After you submit this survey, click the link on the thank you page to be entered into the gift card drawing.

Thank You!

1

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

Click here for a chance to win a \$50 gift card. Your personal information will not be connected to your survey responses. The same link will also allow you to indicate if you are interested in additional opportunities to provide feedback or participate in opportunities to support health improvement in your community.



Pulse Survey: Older Adults

MiThrive is conducting a **Community Themes & Strengths Assessment (CTSA) Pulse Survey** and would like to gather feedback from you as a member of one of our communities!

Informational Purposes ONLY - Do not read to client.*What is MiThrive?*

MiThrive is a collaboration of diverse community organizations, local health departments, and hospital systems with a shared goal to assess and collaboratively improve community health within the 31 counties of Northern lower Michigan.

What is the purpose of the CTSA Pulse Survey?

The purpose of the MiThrive CTSA Pulse Survey is to gather input from people and populations facing barriers and inequities in the 31-county MiThrive region. These populations can include those historically excluded, economically disadvantaged, older adults, racial and ethnic minorities, those unemployed, uninsured and under-insured, Medicaid eligible, children of low-income families, LGBTQ+ and gender non-conforming, people with HIV, people with mental and behavioral health disorders, people without housing, refugees, people with a disability, and many others.

How does the CTSA Pulse Survey work?

The CTSA Pulse Survey is a four-part data collection series. Each survey will be distributed in a two-week cycle beginning July 26th and ending September 19th.

Thank you so much for your time and consideration! If you have any questions regarding this survey please feel free to reach out to us at mithrive@northernmichiganchir.org



Informed Consent

We are collecting information about client experiences to improve health within your community. This will take about four minutes. Your answers will be anonymous – we will not record your name or personal information.

If you are willing to answer a few questions, please fill out the following:

1. Please write the name of the organization/agency you are filling this out at

2. What county do you live in? _____

3. What is your zip code? _____



4. Thinking about resources for older adults such as housing, transportation to medical services, churches, shopping, adult day care, social support for older adults living alone, meals on wheels, rate your level of agreement on a scale from 1 to 5 where 1= “strongly disagree” and 5= “strongly agree” with the following statement:

My community is a good place to age

- 1="Strongly disagree" 2="Mostly disagree" 3="Neither agree nor disagree" 4="Mostly agree" 5="Strongly agree"
-

5. What about your community made you think that?

6. Thinking more broadly, what are some ways in which your community could ensure everyone has a chance at living the healthiest life possible?



MiThrive is conducting a **Community Themes & Strengths Assessment (CTSA) Pulse Survey** and would like to gather feedback from you as a member of one of our communities!

Informational Purposes ONLY - Do not read to client.

What is MiThrive?

MiThrive is a collaboration of diverse community organizations, local health departments, and hospital systems with a shared goal to assess and collaboratively improve community health within the 31 counties of Northern lower Michigan.

What is the purpose of the CTSA Pulse Survey?

The purpose of the MiThrive CTSA Pulse Survey is to gather input from people and populations facing barriers and inequities in the 31-county MiThrive region. These populations can include those historically excluded, economically disadvantaged, older adults, racial and ethnic minorities, those unemployed, uninsured and under-insured, Medicaid eligible, children of low-income families, LGBTQ+ and gender non-conforming, people with HIV, people with mental and behavioral health disorders, people without housing, refugees, people with a disability, and many others.

How does the CTSA Pulse Survey work?

The CTSA Pulse Survey is a four-part data collection series. Each survey will be distributed in a two-week cycle beginning July 26th and ending September 19th.

Thank you so much for your time and consideration! If you have any questions regarding this survey please feel free to reach out to us at mithrive@northernmichiganchir.org



Informed Consent

We are collecting information about client experiences to improve health within your community. This will take about four minutes. Your answers will be anonymous – we will not record your name or personal information.

If you are willing to answer a few questions, please fill out the following:

1. Please write the name of the organization/agency you are filling this out at

2. What county do you live in? _____

3. What is your zip code? _____



4. Thinking about school quality, day care, after school programs, recreation, rate your level of agreement on a scale from 1 to 5 where 1= “strongly disagree” and 5= “strongly agree” with the following statement:

This community is a good place to raise children

1="Strongly disagree"	2="Mostly disagree"	3="Neither agree nor disagree"	4="Mostly agree"	5="Strongly agree"
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What about your community made you think that?

6. Thinking more broadly, how can we come together so that people promote each other's well-being and not just their own?



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4. Thinking about individuals that have a disability (such as physical, mental, emotional), rate your level of agreement on a scale from 1 to 5 where 1 = “Strongly disagree” and 5 = “strongly agree” with the following statement:

In this community, a person with a disability can live a full life

1="Strongly disagree"	2="Mostly disagree"	3="Neither agree nor disagree"	4="Mostly agree"	5="Strongly agree"
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What about your community made you think that?

6. Thinking more broadly, think about groups that experience relatively good health and those that experience poor health. Why do you think there is a difference?



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In this community, a person with a disability can live a full life

1="Strongly disagree"	2="Mostly disagree"	3="Neither agree nor disagree"	4="Mostly agree"	5="Strongly agree"
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What about your community made you think that?

6. Thinking more broadly, think about groups that experience relatively good health and those that experience poor health. Why do you think there is a difference?



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4. Thinking about basic needs contributing to quality of life such as being able to support yourself, having a job that allows you to pay bills on time, having a safe home, a reasonable commute, being able to get what you need in the community, rate your level of agreement on a scale from 1 to 5 where 1 = “strongly disagree” and 5 = “strongly agree” with the following statement:

There is economic opportunity in the community

- 1="Strongly disagree" 2="Mostly disagree" 3="Neither agree nor disagree" 4="Mostly agree" 5="Strongly agree"
-

5. What about your community made you think that?

6. Thinking more broadly, how would you ensure that people in tough life circumstances come to have as good a change as others do in achieving good health and well being over time?

2021 MiThrive Provider Survey

Informed Consent

2

This survey seeks providers perspectives on how various issues impact the health and wellbeing of their patients/clients within the 31 counties of Northern Lower Michigan. MiThrive is working to improve the health of communities in Northern Michigan by collecting data, identifying key issues, and bringing people together for change.

This survey will take approximately 10 minutes to complete. Your participation in this survey is completely voluntary. Your answers are confidential. The survey data will be managed and analyzed by MiThrive staff. You will not be identifiable by your answers. You are free to skip any question and stop taking the survey at any time. There is minimal risk to you for taking the survey, including an imposition of time and questions which may be sensitive in nature. If you have any questions about this survey, please email mithrive@northernmichiganchir.org.

(untitled)

Page exit logic: Skip / Disqualify Logic

IF: #1 Question "Do you provide direct care or services for clients or patients?" is one of the following answers ("No") **THEN:** Disqualify and display:

Thank you for your interest in this survey; however, you do not meet the requirement for this survey.

3

1. Do you provide direct care or services for clients or patients?*

- Yes
- No

(untitled)

18

2. What health system, organization, or entity do you work for? (Please avoid using abbreviations) *

16

3. What is your primary role? *

- Clinical Social Worker
- Doctor of Medicine or Osteopathy
- Pharmacist
- Physician's Assistant
- Dental Hygenist
- Public Health Educator
- Community Health Worker
- Nurse Practitioner
- Chiropractor
- Nurse
- Clinical Psychologist
- Podiatrist
- Dentist
- Optometrist
- Nurse-Midwife
- Other - Write In

7

4. Please check the boxes that define your specialty or that of your practice. (Check all that apply) *

- Primary Care
- Pediatrics
- Dental
- Preventative Medicine
- Behavioral Health
- Surgery
- Obstetrics & Gynecology
- Public Health
- Other - Write In

8

5. Which county(ies) do you provide direct care or services in? (Check all that apply) *

- 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

ID 9

6. Approximately what percentage of the patients you serve are on Medicaid?

*

- 0-15%
- 16-30%
- 31-50%
- >50%

VALIDATION Max. answers = 3 (if answered)

ID 10

7. Thinking about the population you serve, what do you think are the three most important factors for a thriving community?

Check only three: *

- | | |
|--|---|
| <input type="checkbox"/> Disease and illness prevention | <input type="checkbox"/> Lifelong learning: cradle to career |
| <input type="checkbox"/> Clean environment | <input type="checkbox"/> Access to quality behavioral health services |
| <input type="checkbox"/> Reliable transportation | <input type="checkbox"/> Belonging & inclusion |
| <input type="checkbox"/> Safe and affordable housing | <input type="checkbox"/> Meaningful and rewarding work |
| <input type="checkbox"/> Parks and green spaces | <input type="checkbox"/> Disability Accessibility |
| <input type="checkbox"/> Access to quality healthcare services | <input type="checkbox"/> Arts and cultural events |
| <input type="checkbox"/> Civic engagement | <input type="checkbox"/> Freedom from trauma, violence, and addiction |
| <input type="checkbox"/> Access to nutritious food | |

Other - Write In

VALIDATION Max. answers = 3 (if answered)

ID 12

8. What do you think are the three most important issues impacting patients/clients in the community(ies) you serve?

Check only three: *

- | | | |
|--|---|--|
| <input type="checkbox"/> Motor vehicle crash injuries | <input type="checkbox"/> Lack of quality education | <input type="checkbox"/> Dental problems |
| <input type="checkbox"/> Lack of access to healthcare services | <input type="checkbox"/> Firearm-related injuries | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Aging problems (e.g., arthritis, hearing/vision loss, etc.) | <input type="checkbox"/> Poor environmental health | <input type="checkbox"/> Substance use |
| <input type="checkbox"/> Homicide | <input type="checkbox"/> Rape/sexual assault | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Economic instability | <input type="checkbox"/> Respiratory/lung disease |
| <input type="checkbox"/> Lack of safe and affordable housing | <input type="checkbox"/> Obesity | <input type="checkbox"/> Infectious diseases (e.g., hepatitis, tuberculosis, etc.) |
| <input type="checkbox"/> Lack of quality behavioral health services | <input type="checkbox"/> Lack of access to behavioral health services | <input type="checkbox"/> Domestic violence |
| <input type="checkbox"/> Unreliable transportation | <input type="checkbox"/> Neighborhood and built environment | <input type="checkbox"/> Child abuse/neglect |
| <input type="checkbox"/> Infant death | <input type="checkbox"/> Lack of access to education | <input type="checkbox"/> Lack of access to nutritious foods |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> COVID-19 | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Heart disease and stroke | <input type="checkbox"/> Racism and discrimination | <input type="checkbox"/> HIV/AIDS |
| <input type="checkbox"/> Lack of quality healthcare services | <input type="checkbox"/> Sexually transmitted infections (STIs) | <input type="checkbox"/> Other - Write In |

14

9. From the list below which resources or services are missing in your community that would benefit your patients/clients? (Check all that apply) *

Employment Navigation

Domestic Violence Services

Mental Health

Housing

Food

Substance Abuse Services

Translation

Financial Support

Transportation

Education

Childcare

Dental Health

Primary Care

Other - Write In

I feel there are enough services and resources to refer my patients/clients to.

LOGIC Show/hide trigger exists.

ID 15

10. Are you interested in additional opportunities to provide feedback or participate in opportunities to support health improvement efforts in your community?

*

- Yes
- No

LOGIC Hidden unless: #10 Question "Are you interested in additional opportunities to provide feedback or participate in opportunities to support health improvement efforts in your community?"

" is one of the following answers ("Yes")

ID 17

IMPORTANT: In an effort to keep your survey responses confidential, click the link on the thank you page which will take you to a separate form where you can enter your contact information if you are interested in further feedback or engagement opportunities.

Thank You!

ID 5

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

If you selected yes to the last question, please provide your contact information by clicking this link.

McLaren Northern Michigan Assets

Identified by Community Survey Respondents from Antrim, Charlevoix, Cheboygan, Emmet, Otsego, and Presque Isle Counties.

Antrim County

Social Service

Community Center

- Helena Township Community Center
- ASI Community Center & Park

Housing Organizations

- Habitat for Humanity
- Elk Rapids Housing Commission
- Northwest Michigan Community Action Agency
- Antrim County Housing Department

Food Pantry/Kitchens

- The Manna Food Project
- Bellaire Community Food Pantry
- First Congregational Community Pantry
- Good Samaritan Center
- Mancelona Food Pantry & Resale
- Community Lighthouse Food Pantry
- Central Lake Bible Baptist Food Pantry

Emergency Housing Shelters

Halfway Houses

Domestic Violence Shelters

- Women's Resource Center

Social/Grassroot Organizations

Seniors' Group

- Bellaire Senior Center
- Antrim County Senior Citizens
- Mancelona Township Senior Center
- Area Agency on Aging of Northwest Michigan
- Elk Rapids Senior Center
- Antrim County Commission on Aging

Special Interest Group

- Antrim County 4-H

Advocacy Groups/Coalitions

Cultural Organizations

- Antrim Chorus
- Crosshatch Center for Art and Ecology

Hunting/Sportsman Leagues

- Bellaire Sportsman Club
- Chain O'Lakes Sportsman's Club
- Antrim Conservation District
- Alba Sportsman's Club

Amateur Sports Leagues

- Antrim County Co Ed Softball League
- Bowling League
- Antrim Dells Weekly Golf Leagues

Education

Colleges or Universities

Community College

- North Central Michigan College

Before-/After-School Program

- Bellaire Kids Club
- Bellaire Youth Initiative
- Communities in Schools – Northwest Michigan
- Central Lake Public Schools

Vocational/Technical Education Programs

- CharEm ISD Career and Technical Education
- Northwest Education Services Career Tech

Health Institutions

Hospital

- Kalkaska Memorial Health Center
- Charlevoix Hospital

Healthcare Clinic

- Ironmen Health Clinic
- Bellaire Family Health Center
- Mancelona Family Practice
- Central Lake Family Health Center

Health Department

- Health Department of Northwest Michigan

Behavioral Health Services

- North Country Community Mental Health

Public Service

Library

- Alden District Library
- Elk Rapids District Library
- Bellaire Public Library
- Central Lake District Library
- Mancelona Township Library

Police Department

- Antrim County Sheriff's Department
- Bellaire Police Department
- Michigan State Police
- Mancelona Village Police Depart
- Central Lake Police Department

Fire Department

- South Torch Lake Fire & Rescue
- Milton Township Fire Department
- Bellaire District Fire Department
- Elk Rapids Fire Department
- Banks Township Fire Department
- Central Lake Fire Department

Emergency Medical Services

- Elk Rapids EMS
- Township Ambulance Authority

Community-Based Organizations

Religious Organizations

- Alden United Methodist Church
- Antrim Church of Christ
- Calvary Lutheran Church
- New Hope Community Church
- Hope Lutheran of Bellaire
- Mancelona United Methodist Church
- Kewadin United Methodist Church
- Bellaire Community United Methodist Church
- Central Lake United Methodist Church
- Alba United Methodist Church
- Bellaire Wesleyan Church

- First Congregational Church
- Bible Baptist Church

United Way

- United Way of Northwest Michigan

Community or Philanthropic Foundation

- Grand Traverse Regional Community Foundation

Political Organizations

Infrastructure

Parks

- Chessie Pause Depot Park
- Alden Depot Park
- Richardi Park
- Craven Park
- Thurston Park
- Palmer Park
- Perry Address Park
- Johnson's Pond
- Legion Park
- Railroad Park
- Cran Park
- Grass River Natural Area
- Willow Day Park
- Barnes Park Campground
- Antrim Creek Natural Area
- Cedar River Natural Area
- Elk Rapids Day Park
- Glacial Hills Natural Area
- Mohrmann Natural Area
- Murphy Park
- Noteware's Landing
- Wetzell Lake

Public Pools

Vacant Private Building or Lot

- Lot on Cayuga St

Public Lake or Coastline

- Torch Lake
- Clam Lake
- Lake Bellaire
- Elk Lake
- Birch Lake
- Wetzel Lake
- Sand Lake
- Richardi Lake
- Green Lake
- Intermediate Lake

Community Gardens

Farmer's Markets

- Bellaire Farmer's Market
- Elk Rapids Farmer's Market
- Mancelona Farmer's Market
- Central Lake Farmer's Market

Noteworthy Person/Group

Local Artists/Musicians

- Pauline Viall
- Kenny Thompson
- Gary Juliano

Community Leader

- Mike Allison
- Joe Short
- Dan Bean

Celebrity or Influential Figure

- Nate Weber

Other

Charlevoix County Assets

Social Service

Community Center

Housing Organizations

- Boyne City Housing Commission

- East Jordan Housing Commission
- Northwest Michigan Habitat for Humanity
- Charlevoix Housing Commission
- Northern Homes Community Development

Food Pantry/Kitchens

- Community Food Pantry
- Jesus is Lord Community Church Food Pantry
- Bible Baptist Church – Bread of Life – Food Pantry
- Third Day Fellowship
- Care & Share Food Pantry
- Good Neighbors Food Pantry
- Boyne City Food Pantry
- Boyne Valley Pantry

Emergency Housing Shelters

- Joppa House Ministries
- Night Light
- Third Day

Halfway Houses

- Joppa House Ministries
- Bay Area Substance Education Services (BASES)

Domestic Violence Shelters

- Joppa House Ministries
- Women’s Resource Center

Social/Grassroot Organizations

Seniors’ Group

- Boyne Area Senior Center
- Charlevoix Senior Center
- East Jordan Senior Center
- Charlevoix County Commission on Aging

Special Interest Group

- Friends of Charlevoix Public Library
- Charlevoix Lions Club
- Charlevoix Conservation District
- Charlevoix Area Garden Club
- Charlevoix County 4-H

Advocacy Groups/Coalitions

- Kiersten’s Ride
- SAFE in Northern Michigan
- Child Abuse Prevention and Education Council

Cultural Organizations

- Charlevoix Circle of Arts
- Charlevoix Historical Society

Hunting/Sportsman Leagues

- Charlevoix Rod and Gun Club
- Jordan Valley Sportsman’s Club

Amateur Sports Leagues

- Boyne City Softball League
- Little League Baseball
- Little League Softball
- Co-Ed Adult Soccer League
- Boyne Area 4-H Soccer
- East Jordan 4-H Soccer
- Charlevoix County 4-H Shooting Sports Club
- Boyne Area 4-H Swim
- Charlevoix Community 4-H Tennis

Education

Colleges or Universities

Community College

- North Central Michigan College

Before-/After-School Program

- All-Star Kids Club
- Rayder Kids Club
- St. Mary Afterschool Program

Vocational/Technical Education Programs

- Char-EM ISD Career and Technical Education

Health Institutions

Hospital

- Munson Healthcare Charlevoix Hospital
- McLaren Northern Michigan Hospital

Healthcare Clinic

- Charlevoix Physician’s Clinic
- Charlevoix Urgent Care
- Boyne Area Health Center
- Boyne Area Free Clinic
- Charlevoix Primary Care
- McLaren Northern Michigan MedCenter
- East Jordan Family Health Center

Health Department

- Health Department of Northwest Michigan

Behavioral Health Services

- North Country Community Mental Health
- Munson Behavioral Health
- BASES
- School-Based Health Centers for youth

Public Service

Library

- Charlevoix Public Library
- Boyne District Library
- Jordan Valley District Library

Police Department

- Charlevoix County Sheriff's Office
- Boyne City Police Department
- Charlevoix Police Department
- East Jordan Police Department

Fire Department

- Charlevoix Fire Department
- Charlevoix Township Fire Department
- East Jordan Fire Department
- Beaver Island Fire Department
- Boyne City Fire Department
- Boyne Valley Fire and Rescue
- Melrose Fire Department – Station 2
- Hudson Township Fire and Rescue
- Melrose Fire Department

Emergency Medical Services

- Lake Charlevoix EMS
- Boyne City EMS
- Jordan Valley EMS

Community-Based Organizations

Religious Organizations

- First Congregational Church of Charlevoix
- Charlevoix United Methodist Church
- Barnard United Methodist Church
- Greensky Hill Indian United Methodist Church
- St. Mary Church
- Lighthouse Missionary Church
- Walloon Lake Community Church

United Way

- Char-Em United Way

Community or Philanthropic Foundation

- Charlevoix County Community Foundation
- Munson Healthcare Charlevoix Hospital Foundation
- McLaren Northern Michigan Foundation

Political Organizations

- Charlevoix Dems
- Charlevoix County Republicans

Infrastructure

Parks

- Whiting Park
- Thumb Lake Park
- Porter Creek Natural Area
- Little Traverse Wheelway
- Boyne City to Charlevoix Trail
- East Park
- Avalanche Preserve Recreation Area
- Veteran's Memorial Park
- Old City Park
- Rotary Park
- Peninsula Beach
- Ridge Run Dog Park
- Sunset Park
- The Hill Nature Preserve
- Tannery Beach
- Ferry Beach
- Charlevoix Skate Park
- Young State Park
- Fisherman's Island State Park
- East Jordan Tourist Park
- Community Park
- Memorial Park
- Centennial Skate Park
- Sportsman's Park
- Elm Pointe
- Mill Street Park
- Watson Field
- GAR Park
- Murphy Field & Loveday Field
- Mt. McSauba Recreation Area

Public Pools

- Charlevoix Area Community Pool
- East Jordan Community Pool

Vacant Private Building or Lot

- East St. Vacant Lot
- Vacant Buildings in Boyne City

Public Lake or Coastline

- Lake Michigan
- Lake Charlevoix
- Ferry Beach
- Fisherman’s Island State Park
- Depot Beach
- Walloon Lake

Community Gardens

- Boyne City Community Garden
- City of Charlevoix Community Garden

Farmer’s Markets

- Boyne City Farmer’s Market
- Charlevoix Farmer’s Market
- East Jordan Farmer’s Market

Noteworthy Person/Group

Local Artists/Musicians

- Jody Adams
- Jerry Douglas
- Freshwater Studio

Community Leader

- Mayor Luther Kurtz

Celebrity or Influential Figure

- Earl Young

Other

Cheboygan County Assets

Social Service

Community Center

- Cheboygan Recreation Center
- Cheboygan Youth Center

Housing Organizations

- Cheboygan Housing Commission

- Cheboygan County Habitat for Humanity
- Northeast Michigan Community Service Agency (NEMCSA)

Food Pantry/Kitchens

- Cheboygan Compassionate Ministries, Inc and The Lord's Kitchen
- Church of the Straits – Food Pantry
- Awaken Church – Courtesy Club Food Pantry
- St. Thomas Food Pantry – Food Distribution Center
- Black River Full Gospel Community – Food Pantry

Emergency Housing Shelters

- Women's Resource Center of Northern Michigan, Inc. – Cheboygan Office

Halfway Houses

Domestic Violence Shelters

- Women's Resource Center of Northern Michigan, Inc. – Cheboygan Office

Social/Grassroot Organizations

Seniors' Group/Services

- Cheboygan County Council on Aging
- Wawatam Area Senior Center

Special Interest Group

- Alcona County Chamber of Commerce
- Mackinaw Women's Club

Advocacy Groups/Coalitions

- Cheboygan County Habitat for Humanity
- Human Services Coordinating Body – Cheboygan
- Women's Resource Center of Northern Michigan, Inc. – Cheboygan Office

Cultural Organizations

- Mackinaw Area Historical Society Heritage Village
- Mackinaw City Area Arts Council

Hunting/Sportsman Leagues

- Cheboygan Sportsmans Club
- Black Lake Sportsmen's Club – Onaway, Michigan
- Indian River Sportsman's Club
- Ducks Unlimited – Cheboygan County

Amateur Sports Leagues

Education

Colleges or Universities

Community College

- North Central Michigan College – Cheboygan Center

Before-/After-School Program

Vocational/Technical Education Programs

Health Institutions

Hospital

- McLaren Northern Michigan – Cheboygan Campus

Healthcare Clinic

- Alcona Health Center
- Rivertown Medical Clinic
- Thunder Bay Community Health Service, Inc.

Health Department

- District Health Department #4

Behavioral Health Services

- North Country Community Mental Health
- Alcona Health Center Cheboygan Campus
- Catholic Human Services Inc.
- Forward Path Counseling PLLC
- Thunder Bay Community Health Service, Inc

Public Service

Library

- Cheboygan Public Library
- Mackinaw Area Public Library
- Indian River Area Library
- Topinabee Public Library

Police Department

- Cheboygan Police Department
- Cheboygan County Sheriff's Office
- Mackinaw City Police Department
- Michigan State Police District 7
- Tuscarora Township Police Department

Fire Department

- Mackinaw City Fire Department Station 1
- Mackinaw City Fire Department Station 2
- Tuscarora Township Fire Department
- Alverno Fire Department Station #1 – Benton Township
- Alverno Fire Department Station #2 – Aloha Township
- Alverno Fire Department Station #3 – Grant Township
- Alverno Fire Department Station #4 – Benton Township
- Alverno Fire Department Station #5 – Grant Township
- Onaway Area Fire Department (county borderline, keep?)
- Mullet Topinabee Fire Department

Emergency Medical Services

- Cheboygan Life Support Systems

Community-Based Organizations

Religious Organizations

- Mackinaw City Bible Church
- Saint Mary/ Saint Charles Catholic Church, Cheboygan
- Church of the Straits
- St. Paul United Methodist
- St. John Lutheran Church

United Way

- Cheboygan County United Way

Community or Philanthropic Foundation

- Straits Area Youth Advisory Council (YAC) Grants
- Strait Area Community Foundation

Political Organizations

- Cheboygan County Democratic Party
- Cheboygan County Republican Party

Infrastructure

Parks

- Gordon Turner Park, Cheboygan, MI
- Chandler Park
- Tuscarora Township Parks Comm
- Washington Park
- Aloha State Park
- Cheboygan State Park
- Mackinaw City Veteran Memorial Park
- Burt Lake State Park

Public Pools

Vacant Private Building or Lot

Public Lake or Coastline

- Burt Lake
- Straits of Mackinac
- Black Lake
- Lake Huron
- Cheboygan River (it's a river, keep?)
- Mullet Lake
- Douglas Lake
- Duncan Bay (bay, keep?)

Community Gardens

- Mackinaw Area Historical Society Heritage Village
- The Eastside Community Garden

Farmer's Markets

- Cheboygan Farmers Market

Noteworthy Person/Group

Local Artists/Musicians

- Nate King – Local Musician
- Evan Archambo – Local Musician
- Dale Rieger – Local Musician
- Billy Jewell Band – Local Musicians
- Leslie A. Tebo – Mayor

Community Leader

- Robert John Butts – Cheboygan County Probate and Family Court Judge
- Mandy Martin – Executive Director of Cheboygan County Habitat for Humanity
- Polly Schneider – Executive Director for Cheboygan Area Chamber of Commerce
- Catherin Schulz – Director of Cheboygan Housing Commission
- Leigh Ann Theunick – 4-H Program Coordinator

Celebrity or Influential Figure

- Susan Melton – Program Director & Air Personality for 102.9 Big Country
- Marcella Costin & John Costin – Public Figure

Other

Emmet County Assets

Social Service

Community Center

- Friendship Centers of Emmet County – Petoskey Center
- Friendship Centers of Emmet County – Huber Senior Center/Brutus
- YMCA of Northern Michigan

Housing Organizations

- Housing North
- Northwest Michigan Habitat for Humanity
- Odawa Housing

Food Pantry/Kitchens

- Manna Food Project
- Brother Dan's Food Pantry
- Pellston Area Food Pantry
- Church of the Straits
- Harbor Springs Food Pantry
- Holy Childhood of Jesus Catholic Church
- Petoskey Salvation Army
- Northmen Den Youth Services

Emergency Housing Shelters

- Women's Resource Center
- The Nehemiah Project

Halfway Houses

- Harbor Hall

Domestic Violence Shelters

- Women's Resource Center

Social/Grassroot Organizations

Seniors' Group

- Wawatam Area Senior Center
- Friendship Center of Harbor Springs
- Friendship Centers
- Area Agency on Aging

Special Interest Group

- Top of Michigan Trails Council
- Little Traverse Conservancy
- Petoskey Band Boosters
- Thrive 45

Advocacy Groups/Coalitions

- Housing North
- Human Services Coordinating Body
- SAFE in Northern Michigan
- Child Abuse Prevention and Education Council
- Tip of the Mitt Watershed Council
- Little Traverse Conservancy
- League of Women Voters
- LGBTQ Alliance of Petoskey
- Top of Michigan Trails Council

Cultural Organizations

- Great Lakes Center for the Arts
- Crooked Tree Arts Center
- Great Lake Chamber Orchestra
- Blissfest Music Organization

Hunting/Sportsman Leagues

- Harbor Springs Outdoors Club
- Emmet County Sportsman Club
- Petoskey Snowmobile Club

Amateur Sports Leagues

- Nubs Nob Race League
- Petoskey Youth Soccer Association
- YMCA Softball League
- Little Traverse Yacht Club Racing
- Bowling League
- Petoskey Little League

Education

Colleges or Universities

Community College

- North Central Community College

Before-/After-School Program

- YMCA of Northern Michigan
- St. Francis Xavier Catholic School
- Northern Michigan Community Child Development Center
- Blackbird Child Care

Vocational/Technical Education Programs

- Char-Em ISD Career and Technical Education Program

Health Institutions

Hospital

- McLaren Northern Michigan Hospital
- Munson Healthcare Charlevoix Hospital

Healthcare Clinic

- Community Health Center of Northern Michigan
- Alcona Health Center - Pellston Clinic
- Petoskey Child Health Associates
- Little Traverse Primary Care
- Little Traverse Bay Band Health Clinic
- Hornet Health Center
- Northern Michigan MedCenter – Petoskey North
- Mackinaw City Medical Clinic
- Bayside Family Medicine
- Pregnancy Care Center of Petoskey
- McLaren CareNow at Walgreens (South)
- McLaren CareNow at Walgreens (North)

Health Department

- Health Department of Northwest Michigan

Behavioral Health Services

- North Country Community Mental Health
- Alcona Behavioral Health
- Little Traverse Bay Bands of Odawa Indians Behavioral Health
- School-Based Health Clinics for youth

Public Service

Library

- Petoskey District Library
- Harbor Springs Library
- Mackinaw Area Public Library
- Alanson Area Public Library

Police Department

- Michigan State Police
- Emmet County Sheriff's Department
- Harbor Springs Police Department
- Petoskey Department of Public Safety
- Mackinaw City Police Department
- Little Traverse Bay Band of Odawa Indians Police Department

Fire Department

- Petoskey Fire Department
- Harbor Springs Fire Department
- Bear Creek Township Fire Department
- Springvale Township Fire Department
- Mackinaw City Fire Department
- Readmond/Friendship/Cross Village Fire and Rescue
- Resort Township Fire Department
- Alanson Littlefield Fire Department
- Pellston Fire Department

Emergency Medical Services

- Emmet County EMS
- Allied EMS

Community-Based Organizations

Religious Organizations

- Knights of Columbus
- First Presbyterian Church of Petoskey
- First Presbyterian Church of Harbor Springs
- St. Anthony Catholic Church
- Church of the Straits
- St. Vincent de Paul Society
- Zion Lutheran Church of Petoskey
- St. Francis Xavier Catholic Church
- Kingdom Hall of Jehovah's Witnesses
- Beautiful Savior Lutheran Church

United Way

- Char-Em United Way

Community or Philanthropic Foundation

- Petoskey-Harbor Springs Area Community Foundation
- Petoskey Education Foundation
- Hestia Women's Giving Circle
- McLaren Northern Michigan Foundation

Political Organizations

- Emmet County Democrats
- Emmet County Republican Party

Infrastructure

Parks

- Pennsylvania Park
- Curtis Park
- Petoskey State Park
- Wilderness State Park
- Zoll Street Park and Beach
- East Park
- Bayfront Park
- Bear River Recreation Area
- Alexander Henry Park
- Spring Lake Park
- Magnus Park

Public Pools

- Harbor Springs Community Pool

Vacant Private Building or Lot

- Pizza Palace
- The “Hole” in Petoskey
- JC Penny in Petoskey
- Several empty buildings in Downton Petoskey

Public Lake or Coastline

- Lake Michigan
- Little Traverse Bay
- Walloon Lake
- Pickerel Lake
- Burt Lake
- Crooked Lake
- Round Lake
- Inland Waterways
- Weber Lake

Community Gardens

- The Petoskey Community Victory Garden
- First Presbyterian Church of Harbor Springs

Farmer’s Markets

- Harbor Springs Farmer’s Market
- Petoskey Farmer’s Market
- Bills Farm Market
- Bliss Farmers Market

Noteworthy Person/Group

Local Artists/Musicians

- Michigan Rattlers
- Great Lakes Chamber Orchestra
- Martina Hahn

Community Leader

- Lisa Peacock
- Todd Burch
- Ashley Brower Whitney

Celebrity or Influential Figure

Other

Otsego County Assets

Social Service

Community Center

- Otsego County Community Center
- Otsego County Sportsplex

Housing Organizations

- Patriot Place
- Otsego County Housing
- Northeast Michigan Community Service Agency
- Habitat for Humanity

Food Pantry/Kitchens

- Otsego County Food Pantry
- Vanderbilt Community Church
- Johannesburg Christian Church

Emergency Housing Shelters

- Patriot Place
- The Refuge in Otsego County

Halfway Houses

Domestic Violence Shelters

- Women's Resource Center of Northern Michigan

Social/Grassroot Organizations

Seniors' Group/Services

- Otsego County Commission on Aging

- Retired Senior Volunteer Program

Special Interest Group

- Rotary Club of Gaylord
- Otsego Lions Club
- Fraternal Order of Eagles
- American Association of University Women
- Pigeon River Discovery Center
- Kiwanis Club of Gaylord
- Otsego County Veterans Affairs
- Veterans of Foreign Wars

Advocacy Groups/Coalitions

- Northern Michigan Opioid Response Consortium
- Otsego County Child Welfare Alliance
- Otsego Lake Association
- RISE Otsego Substance Free Coalition
- Otsego Wildlife Legacy Society

Cultural Organizations

- Gaylord Area Council for the Arts

Hunting/Sportsman Leagues

- Northland Sportsmen's Club

Amateur Sports Leagues

- Otsego County Parks & Recreation
- Gaylor Soccer League
- Otsego County Hockey Association
- Otsego County Sportsplex

Education

Colleges or Universities

- North Central Michigan College Gaylord Center
- University Center Gaylord

Community College

- Kirtland Community College Gaylord

Before-/After-School Program

- Gaylord Community Schools Latchkey
- Johannesburg Cardinal Club

Vocational/Technical Education Programs

- University Center Gaylord

Health Institutions

Hospital

- Otsego Memorial Hospital

Healthcare Clinic

- Otsego Memorial Hospital Walk-In Clinic
- Gaylord Blue Devil Wellness Center
- McLaren Northern Michigan Gaylord Family Medicine
- New Life Ultrasound Clinic
- Thunder Bay Community Health Services
- Gaylord VA Clinic

Health Department

- Health Department of Northwest Michigan
- Otsego County Health Department

Behavioral Health Services

- North Country Community Mental Health
- Northern Michigan Regional Entity
- Healing Minds Behavioral Services

Public Service

Library

- Otsego County Library

Police Department

- Gaylord Police Department
- Otsego County Sheriff
- Michigan State Police

Fire Department

- Otsego Lake Township Fire Department
- Gaylord Fire Hall
- Vanderbilt-Corwith Fire Department
- Elmira Fire Department
- Charlton Township Fire Department

Emergency Medical Services

- Otsego County EMS Rescue

Community-Based Organizations

Religious Organizations

- E-Free Church
- St. Mary Catholic Church
- Life Church of Gaylord
- Trinity Lutheran Church
- Gaylord Family Fellowship Church
- Johannesburg Christian Church
- Otsego United Methodist Church

United Way

- Otsego County United Way

Community or Philanthropic Foundation

- Otsego Community Foundation
- Guardian Gals Inc
- Rotary Club of Gaylord
- Kiwanis Club of Gaylord

Political Organizations

- Republican Party
- Democratic Party
- Right to Life

Infrastructure

Parks

- Doumas Park
- Louis M. Groen Nature Preserve
- Irontone Springs
- Vanderbilt Trailhead Park
- Big Bear Lake State Forest
- Energy Outlet
- Claude Shannon Park
- Gaylord City Elk Park

Public Pools

- Otsego County Sportsplex

Vacant Private Building or Lot

Public Lake or Coastline

- Otsego Lake
- Big Lake
- 5 Lakes
- Bear Lake
- Thumb Lake
- Dixon Lake
- Porcupine Lake
- Big Chub Lake

Community Gardens

- Otsego County Community Gardens
- Otsego Conservation District
- Otsego County Demonstration Garden

Farmer's Markets

- Gaylord Farmer's Market – Winter
- Downtown Gaylord Farmer's Market
- Otsego Farmer's Market

Noteworthy Person/Group

Local Artists/Musicians

- Gaylord Community Orchestra

Community Leader

- Scott Distler
- Ken Borton
- Julie Powers
- Rachel Frisch
- Paul Gunderson
- Dana Bensinger

Celebrity or Influential Figure

- Lauren Duski

Other

Presque Isle County Assets

Social Service

Community Center

- Rogers City Area Senior and Community Center

Housing Organizations

- Rogers City Housing Commission
- Northeast Michigan Community Service Agency

Food Pantry/Kitchens

- Northeast Michigan Community Service Agency
- Westminster Presbyterian Church
- Rogers City Area Senior and Community Center
- Grand Lake Community Chapel

Emergency Housing Shelters

- N/A

Halfway Houses

- N/A

Domestic Violence Shelters

- N/A

Social/Grassroot Organizations

Seniors' Group/Services

- Rogers City Area Senior and Community Center

Special Interest Group

- Presque Isle Area Z Club

Advocacy Groups/Coalitions

- N/A

Cultural Organizations

- Domaci Gallery

Hunting/Sportsman Leagues

- Presque Isle County Sportsmen's Club

Amateur Sports Leagues

- N/A

Education

Colleges or Universities

- N/A

Community College

- N/A

Before-/After-School Program

- Boys and Girls Club of Presque Isle
- Presque Isle County 4-H

Vocational/Technical Education Programs

- N/A

Health Institutions

Hospital

- Alpena Regional Medical Center

Healthcare Clinic

- McLaren Northern Michigan - Rogers City Family Medicine
- Thunder Bay Community Health Service, Inc.

Health Department

- District Health Department #4

Behavioral Health Services

- Northeast Michigan Community Mental Health Authority
- Thunder Bay Community Health

Public Service

Library

- Presque Isle District Library

Police Department

- Presque Isle County Sheriff
- Rogers City Police Department

Fire Department

- Presque Isle Township Fire
- Rogers City Fire Department
- East Grand Lake Fire Department

Emergency Medical Services

- Allied EMS Systems Ambulance of Rogers City
- Onaway Area Ambulance

Community-Based Organizations

Religious Organizations

- Awaken Church
- Onaway United Methodist Church
- Saint Paul's Catholic Church
- Holy Cross Lutheran Church
- Onaway Seventh-day Adventist Church
- First Baptist Church
- Community of Christ and Joy Community Church
- Grand Lake Community Chapel
- St John Lutheran Church
- St. Ignatius Catholic Church

United Way

- United Way of Northeast Michigan

Community or Philanthropic Foundation

- Community Foundation for Northeast Michigan
- The Optimist Club of Rogers City

Political Organizations

- Democratic Party
- Republican Party

Infrastructure

Parks

- Lakeside Park
- South Shore Park
- Sports Park
- Chandler Park
- Herman Vogler Conservation Area
- Westminister Park

Public Pools

Vacant Private Building or Lot

Public Lake or Coastline

- Lake Huron
- Grand Lake
- Long Lake

Community Gardens

Farmer's Markets

- Rogers City Farm Market

Noteworthy Person/Group

Local Artists/Musicians

Community Leader

- Mayor Matt Waligora
- Mayor Scott McLennan

Celebrity or Influential Figure

Other



Northeast Community System Event | Monday, August 16, 2021 | 1:30 -3:30 pm



Northeast Community System Assessment Agenda

1:15 pm	Virtual Event Opens
1:30 pm	Welcome & Introductions
1:40 pm	Community System Assessment Unpacked
1:50 am	Team Discussion #1
2:40 pm	Large Group Check In (Break)
2:45 pm	Team Discussion #2
3:25 pm	Large Group Celebration (Wrap Up)
3:30 pm	<i>(optional)</i> Happy Half Hour – Questions & Networking



Introduction to the Community System Assessment

Activity Purpose:

- Improve organizational and community communication and collaboration by bringing a broad spectrum of partners to the same table.
- Learn about community health and how activities are interconnected.
- Identify system strengths and weaknesses which may then be used to improve and better coordinate activities at the community level

What is a Community System?

All of us are part of the Community System. Community Systems are networks of diverse agencies and groups with differing roles, relationships, and interactions whose activities combined contribute to the health and well-being of the community.

What topic areas will we be talking about today?

- **Resources:** A community asset (or community resource) is anything that can be used to improve the quality of community life.
- **Policy:** Policies are the written or unwritten guidelines that governments, organizations and institutions, communities, or individuals use when responding to issues and situations.
- **Data Access/Capacity:** A community with data capacity is one where people can access and use data to understand and improve health outcomes where they live.
- **Community Alliances:** Diverse partnerships which collaborate in the community to maximize health improvement activities and are beneficial to all partners involved.
- **Workforce:** The people engaged in or available for work in a particular area, company, or industry.
- **Leadership:** Leadership within the community is demonstrated by organizations and individuals that are committed to improving the health of the community.
- **Community Power/Engagement:** Power is the ability to control the processes of agenda setting, resource distribution, and decision-making, as well as to determine who is included and excluded from these processes.
- **Health Equity Capacity:** Health Equity is the assurance of the conditions for optimal health for all people.

Team Discussion #1: Community System Assessment

Detailed Instructions:

Team Introductions: [10 minutes]

- Designate your Note Taker. This person will take notes on the CSA Notes Form.
- Get to know your team! Introduce yourself.
- Review your Focus Area

Introduction Inclusion Tips:

	<ul style="list-style-type: none"> ○ Learn how to pronounce people’s names: It is helpful to phonetically spell names in the chat box [Why is this important?] ○ Share pronouns: One best practice is to include preferred pronouns with one’s name [Why is this important?] ○ Put Names with Faces: Show your face with your preferred name if you can, also realize that not everyone can see you. Introductions that include descriptors of what people would see are helpful to those who can’t see you.
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Overview of Discussion and Performance Measure Scoring: [5 minutes]

- Review as a group the questions to think about in the regarding your Focus Area (See Participant Packet)
- Introduce the Performance Measure questions and scoring grid

Discussion: [15 minutes]

Using discussion questions in your Participant Packet for your Focus Area discuss how the community organizations participate in these focus area activities, and how the system as a whole performs.

Scoring of Performance Measures (8 Minutes)

Vote on the specific measures for your Focus Area using the scoring grid.

Optimal Activity (76-100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51-75%)	Greater than 50% but no more than 75% of the activity described within the question is met.
Moderate Activity (26-50%)	Greater than 25% but no more than 50% of the activity described in the question is met.
Minimal Activity (1-25%)	Greater than 0% but no more than 25% of the activity described in the question is met.
No Activity (0%)	0% or absolutely no activity relating to the activity described in the question.

Discussion to determine strengths and opportunities to improve Performance Measures (12 Minutes)

Choose one of the measures with the most disagreement for more discussion to dig deeper into strengths, weaknesses, and opportunities

Team Discussion #2 Community System Assessment

Repeat Steps for Team Discussion #1

Omit grounding question

TEAM FACILITATORS: PLEASE SEND US YOUR NOTES IMMEDIATELY FOLLOWING THE EVENT

THANK YOU!

MiThrive@northernmichiganCHIR.org

Forces of Change Assessment Event



AGENDA

9:45 am	Virtual Event Opens
10:00 am	Welcome & Introductions
10:10 am	Introduction to MiThrive and the Forces of Change Assessment
10:30 am	Forces of Change Small Group Brainstorming Session
10:45 am	Small Group Spotlight
11:05 am	Forces of Change Small Group Threats and Opportunities Session
11:25 am	Small Group Spotlight
11:45 am	Wrap Up & Next Steps
12:00 pm	Adjourn

EVENT ACCESS LINK

<https://zoom.us/j/96917348003?pwd=ZHhiTCtUM0Q5L3BOL3dwb0JzbHk1UT09>

Meeting ID: 969 1734 8003

Passcode: 484284

One tap mobile

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Questions? Please email us at mithrive@northernmichiganchir.org

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Forces of Change Assessment Event

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+1 253 215 8782 US (Tacoma)

Meeting ID: 969 1734 8003

Passcode: 484284

Find your local number: <https://zoom.us/j/96917348003>