



2016 Community Health Needs Assessment

For Antrim, Benzie, Grand Traverse, Kalkaska and Leelanau counties



MUNSON HEALTHCARE
Paul Oliver Memorial Hospital



Table of Contents

Executive Summary	3
Introduction and Mission Review.....	4
Description of the Hospitals and Communities Served.....	5
Regional Population Demographics	7
Evaluation of the Impact Since the Preceding CHNA	8
How the 2016 Assessment was Conducted.....	10
Health Needs Identified.....	15
Hospital and Community Assets Identified.....	15
Next Steps.....	15
Appendix A	
CHNA Steering Committee	16
Appendix B	
Organizations Represented at the Community Conversations	20
Appendix C	
Primary Data: Community Conversations and Survey Results Summary	22
Appendix D	
Demographic and Secondary Data Source: Xerox Community Health Solutions.....	24
Appendix E	
Cumulative List of Identified Community Health Needs.....	26
Appendix F	
Community Assets Targeting Identified Health Needs.....	27

Executive Summary

A Community Health Needs Assessment (CHNA), published in 2016, was conducted by Munson Medical Center, Paul Oliver Memorial Hospital, and Kalkaska Memorial Health Center during 2015 and 2016 to explore the health status of people living in our area. We wanted to pinpoint the most pressing health issues in our communities and determine what more can be done to improve the health of the people we serve.

Our 2016 CHNA covers Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau counties. These counties are considered our “community” because more than 67 percent of the Munson Medical Center (MMC) inpatient population resides within this area. These counties also are part of the Paul Oliver Memorial Hospital (POMH) and Kalkaska Memorial Health Center (KMHC) service areas. All three hospitals were involved in the CHNA that follows.

The CHNA Process:

A collaborative Steering Committee, which was formed during our preceding CHNA cycle, provided ongoing guidance through the CHNA process. This Steering Committee was comprised of health care leaders and public health officials from around the region. Munson contracted with the Health Department of Northwest Michigan to assist with the data collection process. Five community conversations were conducted throughout the five-county area between October 2015 and February of 2016 to gather primary data. Individuals and representatives from multiple organizations, who have a broad knowledge of the community, participated in the community conversations. Prior to the community conversations, Munson Community Health Department provided a presentation describing the positive impact on community health resulting from the previous CHNA at each of the five community collaboratives.

Secondary data was supplied by Xerox Community Health Solutions (CHS). CHS offers hospitals

and health systems a customizable, web-based Community Health Needs Assessment (CHNA) System. CHS collected demographics and all available data for 100 specific health and quality of life indicators in each of the five counties.

The Health Department of Northwest Michigan, Munson Community Health Department, and an assistant professor of epidemiology from Michigan State University synthesized and analyzed primary and secondary data. A cumulative list of 26 health issues was compiled. The CHNA Steering Committee participated in an initial multi-voting technique session, recommended by the National Association of County and City Health Officials (NACCHO), with seven issues rising to the top.

After the final prioritization of the seven health issues noted below, the connection between them was evident.

- Obesity and overweight
- Diabetes
- Substance abuse/tobacco use
- Access to health services
- Mental health
- Maternal, fetal and infant health
- Access to healthy foods

Due to the clear interconnectivity, amongst the issues, all will be considered in our next steps. We will build an implementation strategy using techniques that cross over between health issues and as such enhance our collective impact on improving community health. Paul Oliver Memorial Hospital's role in addressing each of these health issues may vary. For some, Paul Oliver Memorial Hospital may be the appropriate convener while for others our role may be best suited to be a participant in actively addressing a particular health issue. The final CHNA was approved by the Paul Oliver Memorial Hospital Board of Trustees.

Paul Oliver Memorial Hospital Mission

Paul Oliver Memorial Hospital is a community hospital that works collectively with Munson Healthcare, as well as all health care providers and other community based agencies to provide superior quality care at a competitive price and improve the health of the people in the Benzie Region.

Paul Oliver Memorial Hospital Vision

We will support Munson Healthcare in being northern Michigan's indispensable system of health care by driving collaboration and coordination that results in care that is of the highest quality, easy to use, price competitive, and close to home for the Benzie Region.

The complete CHNA is available online for review at munsonhealthcare.org/CHNA. We will publish our next CHNA in 2019.

Introduction

Our commitment to community health:

Many factors combine to determine the health of a community. In addition to disease, community health is affected by substance abuse, education level, economic status, environmental issues, and the personal choices of all of us who live, work, and play in the community. No one individual, community group, hospital, agency, or governmental body can be entirely responsible for the health of the community. No organization can address the multitude of issues alone. However, working together, we can understand the issues and create a plan to address them.

Paul Oliver Memorial Hospital's continuing commitment in working together with our partners to provide superior quality care and promote community health is reflected in our Community Health Needs Assessment (CHNA), as well as in the work we do each day to better understand and address the health needs of our community.

Our CHNA represents a collaborative, community-based approach to identify, assess, and prioritize the most important health issues affecting our community. The process is also the foundation that health care providers and the community use to collaboratively plan, develop, and foster programs to effectively address those needs in our community.

Munson has conducted Community Health Needs Assessments since 1995. Our first CHNA was completed under the leadership of the North Central Council of the Michigan Hospital Association, local health departments, and a multi-agency committee. This group commissioned a household survey to provide a comprehensive profile of the health status of residents in the 21 counties of northern Lower Michigan. The survey was repeated in 2000 across the same counties. In 2008, a CHNA was performed by analyzing available secondary data and obtaining the input of several key informant community leaders in the 11-county Munson Healthcare service area. These previous assessments led to the development of several successful key multi-stakeholder health initiatives.

Description of Hospitals and Communities Served

Paul Oliver Memorial Hospital (POMH):

One of nine hospitals in the Munson Healthcare system, POMH offers quality, personalized care for primary and urgent medical needs, primarily to the people of Benzie County. Located in Frankfort, Michigan, about 40 miles southwest of Traverse City, POMH became an owned subsidiary of Munson Healthcare in 1986. Because of its rural location, POMH is designated as a Michigan Critical Access Hospital; it was the first hospital in Michigan to attain that status. Emergency, laboratory, radiology, dialysis, and rehabilitation services at POMH are networked with Munson Medical Center to ensure prompt, convenient diagnosis and treatment. POMH has eight acute care beds, as well as a 39-bed Living and Rehabilitation Center. Because the care center is hospital-based, physicians and emergency medical care are available 24 hours a day.

POMH enjoys strong community support that has allowed it to obtain advanced technology not often found in hospitals of its size, including an 80-slice CT scanner and digital mammography. Frankfort is a small, scenic community on the Lake Michigan

shoreline, nestled between Sleeping Bear Dunes National Lakeshore and the Elberta Bluffs. Its natural harbor makes it a favorite stop of boating enthusiasts. It also is home to a thriving arts community. POMH serves all communities in Benzie County, including Benzonia, Beulah, Honor, Lake Ann, and Thompsonville. Benzie County is the smallest of Michigan's 83 counties.

Kalkaska Memorial Health Center (KMHC):

KMHC is a township-owned, Michigan Critical Access Hospital managed by Munson Healthcare and located in Kalkaska, Michigan. KMHC is 30 miles east of Munson Medical Center and provides a diversified offering of health care services not often found in a small community. Services include outpatient surgery, rehabilitation services, a dialysis center, diagnostics, primary and specialty care, and 24-hour emergency care with limited acute inpatient care (eight licensed beds). KMHC offers a continuum of care for seniors including an assisted living facility, long-term and skilled care, and two unique Green House Homes. KMHC also operates two adolescent health clinics supported by Michigan Department of



Paul Oliver Memorial Hospital

Health and Human Services (MDHHS) grants. Kalkaska is a small, rural community that serves as the county seat of Kalkaska County. The county has 561 square miles of abundant natural resources with numerous recreational opportunities. More than 80 inland lakes and 275 miles of streams and rivers, along with numerous state and county parks, allow residents and visitors to get close to the natural beauty that surrounds Kalkaska. Kalkaska is well-recognized for its trout fishing and the starting point for the Iceman Cometh Challenge bike race. Other amenities include the Kaliseum, a county recreation complex, ball fields, and horse barns built by active equestrian clubs. Snowmobile, motocross, and horseback riding enthusiasts enjoy numerous marked trails that wind their way through the county.

Munson Medical Center (MMC):

Located in Traverse City, Michigan, MMC is the largest hospital in northern Lower Michigan with 391 licensed acute care beds. It has a national reputation for quality, and has been named a Top 100 Hospital 14 times. Munson is designated as a Rural Referral

Center by the Centers for Medicare and Medicaid Services (CMS) and is also recognized by CMS as a Sole Community Hospital. Because of this status, it is equipped to provide critical care to patients from 24 counties in northern lower Michigan and the eastern Upper Peninsula. More than 500,000 people served by MMC reside across 11,000 square miles. MMC’s primary service area is composed of five counties: Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau. These five counties are considered the community served by the hospital because nearly 67 percent of the MMC inpatient population lives in the primary service area.

The five-county Grand Traverse region is a four-season destination for outdoor enthusiasts, with abundant natural beauty and recreational resources. The region is nationally known for fruit and wine production, a growing microbrew and spirits industry, and a vibrant art community. The region is often included on “top lists” for places to retire, vacation, pursue outdoor sports, etc.



Regional Population Demographics

Geography and Population:

Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau counties cover a total of 2,166 square miles of land. The region is classified as “rural” by the US Census Bureau with Traverse City defined as a micropolitan area. In general, rural locations experience significant health disparities, such as higher incidence of disease and disability, increased mortality rates and lower life expectancy. Rural residents are more likely to have a number of chronic conditions and are less likely to receive recommended preventive services, in part due to lack of access to physicians and health care delivery sites and/or adequate transportation options.

Of the 170,887 people who live in the five-county region, over half (91,636) live in Grand Traverse County. The population is predominantly white (95.6%); Hispanic/Latinos, at 2.7%, and Native Americans, at 1.5%, are the largest minority groups. The proportion of older adults is considerably larger in the region (20.4%) than the State (15.4%).

Education and income:

Education, employment, and health are intricately linked. Without a good education, prospects for

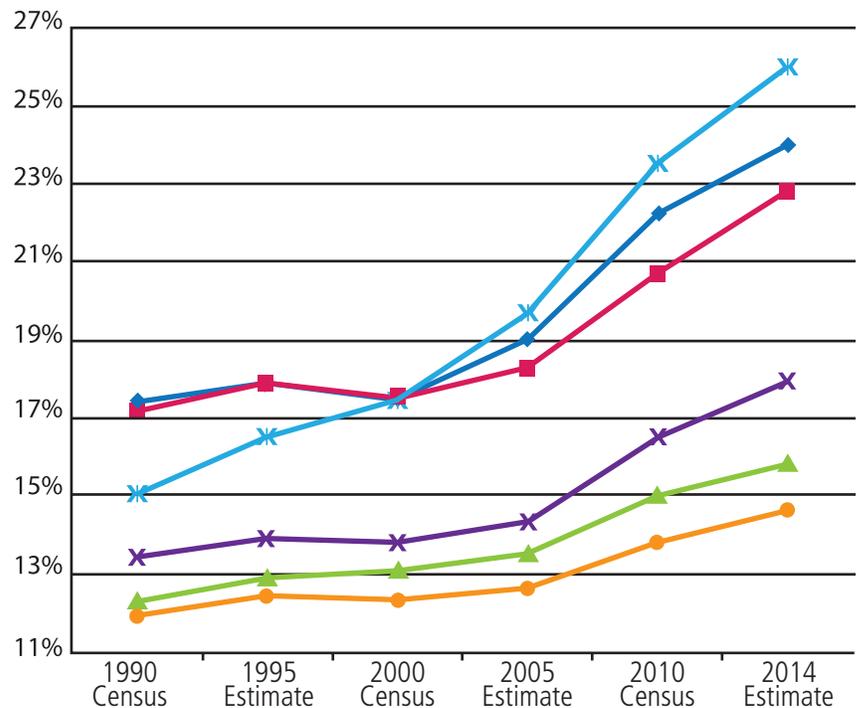
a stable and rewarding job with good earnings decrease. Education is associated with living longer, experiencing better health, practicing health-promoting behaviors such as exercising regularly, refraining from smoking, and obtaining timely health checkups and screenings.

Overall, educational attainment is higher in the 5-county area (28.7% of the population age 25+ has earned a Bachelor’s degree) than the State (26.4%). However, rates vary widely among the five counties, ranging from 13% in Kalkaska County to over 30% in Grand Traverse and Leelanau counties.

Median household income is below the State (\$49,097) in Antrim, Benzie and Kalkaska counties and above the State rate in Grand Traverse and Leelanau counties. These county-level data cannot adequately illustrate income distribution across the region. By drilling down to Census Bureau tracts, stark disparities become apparent. For example, in Grand Traverse County, median household income on Old Mission Peninsula (Census Tract 5509) is \$73,650, the highest in the county. In adjacent Census Tract 5512, at the base of the peninsula, it is \$39,964, the lowest in the county.

Percent of Population Age 65 and Older

- ◆ Antrim
- Benzie
- ▲ Grand Traverse
- ✕ Kalkaska
- ✱ Leelanau
- Michigan



Evaluation of the Impact Since the Preceding CHNA

The priorities established in the 2013 CHNA were the impetus behind several impactful events and programs. We have highlighted some of these related to each priority health issue identified in the 2013 assessment.

Priority: Obesity

Objective 1

Promote employee based wellness programs to hospital employees as well as area businesses.

Strategies

- I. Educate businesses on benefits of employee wellness and assist in identifying opportunities through outreach and Betsie Hosick Health & Fitness center (BHHFC).

The manager of the Fitness Center attended the Benzie Human Services Collaborative meetings on a regular basis and updated the businesses involved. The manager of Human Resources regularly attended Rotary meetings to provide updates on what POMH has to offer in regards to employee and community wellness.

- II. Promote and maintain employee membership program at BHHFC.

Job Conditioning, Tai Chi and Yoga classes were offered at POMH with a total of 4 participants.

- III. Offer lunch and learns to POMH employees and expand into community offering.

Monthly lunch and learns were offered by registered dietitians from June 2014 to December 2015 with an average monthly attendance of 8 participants.

During National Nutrition Month, which is in March, weekly lunch and learns were offered by registered dietitians with an average weekly attendance of 8 participants.

Objective 2

Education and awareness campaign in the hospital and community for healthy dietary choices.

Strategies

- I. Healthy eating education and promotions for chronic diseases.

Six cardiac nutrition classes were offered by a registered dietitian with a total of 10 participants.

- II. Cooking demonstrations and information sessions for healthy eating.

A 30 Minute Meals class was offered by a registered dietitian with a total of 10 participants.

- III. Offer lunch and learns to POMH employees and expand into community offering.

Monthly lunch and learns were offered by registered dietitians from June 2014 to December 2015 with an average monthly attendance of 8 participants.

During National Nutrition Month weekly lunch and learns were offered by registered dietitians with an average weekly attendance of 8 participants.

Objective 3

Promote increased physical activity and exercise in the community

Strategies

- I. Target senior population through senior movement and balance classes at BHHFC and extension classes offered at senior sites.

Senior movement and balance classes were held 3 times weekly at BHHFC. Total class participation during calendar years 2013-2015 was 1,980.

Classes on balance training were offered by a senior occupational therapist at the Gathering Place.

II. Health awareness series for high school students and athletes (male and female).

A class on Sports Nutrition and Eating Disorders was offered by a physical therapist with a total of 30 participants.

A class on Concussion Protocol Education to Schools/Physicians was offered by a physical therapist with a total of 10 participants.

A class on Triathlon Training was offered by a certified athletic trainer with a total of 5 participants.

Beach Fitness Classes were offered by the manager of the fitness center with a total of 20 participants.

Priority: Diabetes

Objective 1

Participation in region wide initiatives to identify opportunities for further programmatic outreach in community.

Strategies

- I. Participation in the Northern Michigan Diabetes Initiative in the 14 county region to develop programs that prevent and manage diabetes. Advisory meetings were attended by a representative from POMH.
- II. Support outreach efforts by Diabetes PATH programs by providing space and promotional efforts with area healthcare agencies.

Diabetes PATH program has been offered at POMH by the Benzie County Commission on Aging (BCCAO). Space provided at POMH was provided as a community benefit.

Objective 2

Promotion of diabetic management programs and development of curriculum for greater class offerings.

Strategies

- I. Monthly diabetic support groups hosted by POMH Dietician.
Monthly diabetic support groups were offered to the community.
- II. Monthly Pre-Diabetes Education classes hosted by POMH.
Monthly Pre-Diabetes Education classes were offered to the community.
- III. Development of Certified Diabetes Program which includes combination of hospital dietitians, local physicians, community members, and the tribe.
Accreditation by the American Association of Diabetes Educators (AADE) has been obtained and diabetes education classes have been initiated.

Priority: Maternal Smoking

Objective 1

Decrease number of pregnant women who smoke through a direct campaign.

Strategies

- I. Promote the State of Michigan Tobacco Quit Line for Pregnant and Postpartum Women
The maternal smoking group has recently been named Tobacco Free Families and is comprised of partners from local Health Departments, Munson Medical Center, the Great Start Collaborative, Kalkaska Memorial Health Center, Paul Oliver Memorial Hospital, and other interested parties. A branded maternal smoking flyer has been created. It is being used by partners to communicate a consistent message including promoting the Quit Line.

All active smokers who undergo the Lung Cancer Screenings at POMH are given Smoking Cessation Education card with Michigan Tobacco Quit Line phone number provided.

The POMH Emergency Department discharge instructions, for all pregnant and postpartum women who are active smokers, included the Smoking Cessation Education card with Michigan Tobacco Quit Line phone number provided.

- II. Educate health providers on evidence based strategies for treating tobacco dependence
Tobacco Free Families has facilitated motivational interviewing trainings for health care providers who complete home visits and provide health care to smoking mothers.
- III. Host and support efforts for local smoking cessation programs.
Through participation with Tobacco Free Families, Paul Oliver Memorial Hospital supported local smoking cessation efforts.

Objective 2
Decrease number of smokers over the age of 18 in our community.

Strategies

- I. Coordinate with schools to promote smoking awareness campaigns to reduce likelihood of adult smoking.
This idea was explored and determined not feasible at this time.
- II. Exploration to not hire staff at hospital who test positive for nicotine.
This idea was explored and determined not feasible.
- III. Host and support efforts for local smoking cessation programs.
Through participation with Tobacco Free Families, Paul Oliver Memorial Hospital supported local smoking cessation efforts.

Priority: Access

Objective 1

Service support for community members who are uninsured or covered by Medicaid.

Strategies

- I. Continue to work on strengthening Primary Care base with recruitment, retention, and IT support.
A POMH physician saw patients in Empire and Interlochen to increase access to care.
- II. Continue to offer financial assistance through Charity Care provision.
Since the previous CHNA, POMH provided over \$420,000 in Charity Care.
- III. Explore opportunity to expand medication assistance (MEDS) program from MMC to POMH.
POMH currently does not offer this service. Service continues to be provided through MMC for discharged patients in need living in Benzie County.

Objective 2

Providing assistance to access services at POMH.

Strategies

- I. Provide transportation financial assistance for Dialysis patients.
Over \$27,000 was provided since the previous CHNA.
- II. Continued operation of Annual Wellness Day for community members and further expansion in other specialties.
A Wellness Day was held annually at POMH.

How the 2016 Assessment was Conducted

Paul Oliver Memorial Hospital adapted Mobilizing for Action through Planning & Partnerships (MAPP), the “gold standard” community health needs assessment framework, developed by the US Centers for Disease Control and Prevention and the National Association of City and County Health Officials (NACCHO). MAPP consists of four phases:

Phase 1: Organizing for success

The first phase of MAPP involves organizing the processes for collecting data for the community health needs assessment, prioritizing issues as indicated in the assessment, and developing an implementation strategy to address key priority issues. The purpose of this phase is to build commitment, engage partners as active participants, and use partners’ time effectively. It results in a plan that can be realistically implemented.

The Munson Community Health Needs Assessment Steering Committee was comprised of leaders and experts from three hospitals, four local health departments, and federally-qualified health centers. Please see **Appendix A** for a complete list.

Phase 2: Visioning

Visioning, the second phase of MAPP, provides focus, purpose and direction to the MAPP process so that participants collectively achieve a shared vision of the future. Paul Oliver Memorial Hospital's vision provides an overarching goal for the Community Health Needs Assessment: *We will support Munson Healthcare in being northern Michigan's indispensable system of health care by driving collaboration and coordination that results in care that is of the highest quality, easy to use, price competitive, and close to home for the Benzie Region.*

Phase 3: Conduct the assessments

We conducted three different assessments in the five-county region with each yielding important information for improving community health. Together these assessments provide valuable insight into the community.

- Community Themes and Strengths Assessment
- Community Health Status Assessment
- Forces of Change Assessment

1. Community Themes and Strengths Assessment (Primary data collection):

The Community Themes and Strengths Assessment answers the question, *What issues are the most important for health and quality of life in our community?* and is a vital part of the community health improvement process. During this phase, community members’ thoughts, opinions, concerns and solutions are gathered. As a result, these individuals become more vested in the process with a sense of ownership and responsibility for the outcome. A variety of methods may be used; the Steering Committee approved a combination of focus groups, referred to as community conversations, and two types of surveys to quantify community input. In all, over 400 residents of Antrim, Benzie, Grand Traverse, Kalkaska and Leelanau counties participated in the Community Themes and Strengths Assessment.

a. Community Conversations:

Community Conversations were facilitated using the Technology of Participation’s Consensus Workshop Method, a type of highly structured focus group. This method utilizes a collective integrated thinking process and consists of individual brainstorming, small group discussion, and full group discussion. In partnership with county-level multipurpose collaborative bodies, we convened five Community Conversations, one in each county of the five-county region, from October 2015 through February 2016 with representation from multiple organizations as listed in **Appendix B**.

One hundred and eleven community residents and stakeholders participated in the Community Conversations. They included representatives from

hospitals; health departments; federally qualified health centers; community mental health and behavioral health providers; schools and early childhood programs; social service agencies, including those who serve children, older adults, the disabled or veterans and/or provide housing, utility or transportation assistance; courts and law enforcement; Michigan State University Extension; faith-based organizations; farms and business; and grant-making organizations. See **Appendix C** for a five-county rollout of the Community Conversation results.

Overall, the answer to the question *What can we do here to move closer to our vision of a healthy community?* was determined to be:

- Promote and strengthen community resources
- Provide access to healthy eating
- Improve access to behavioral health
- Strengthen advocacy for health and wellness
- Increase access to reliable transportation
- Strengthen community connections across the lifespan
- Promote a thriving economy
- Expand community education opportunities
- Increase access to affordable child care
- Increase access to physical health services
- Increase enforcement in high crime areas
- Protect the environment

b. “What Matters to You?” Community Survey:

“The What Matters to You?” Community Survey was designed by the Northern Michigan Health Network for wide distribution across northern Michigan in partnership with several hospitals and health departments. In the five Grand Traverse Region counties, a link to an electronic survey tool was disseminated to a wide range of community partners via county-level multipurpose collaborative bodies. In addition, hard copies with a sub-set of survey questions were distributed to clients at local health department clinics to assure input from the

low-income population. In all, 246 community residents completed the “What Matters to You?” Community Survey. See **Appendix C** for “What Matters to You?” Community Survey results summary.

“What Matters to You?” Community Survey

The most important factors needed for a healthy community are:
1. Access to health care
2. Good jobs and healthy economy
3. Access to affordable healthy food
4. Affordable housing
5. Good schools and high value on education

The top community health problems are:
1. Substance use
2. Lack of affordable housing
3. Overweight and obesity
4. Mental health issues
5. Lack of access to primary care

c. Health Care Provider Survey:

Like the “What Matters to You?” Community Survey, the Health Care Provider Survey was developed for wide distribution across northern Michigan. It was disseminated via email to physicians, nurse practitioners and physician assistants from Munson Medical Center, Kalkaska Memorial Health Center and Paul Oliver Memorial Hospital. Fifty completed the survey. See **Appendix C** for Health Care Provider Survey results summary.

Health Care Provider Survey

The most important factors needed for a healthy community are:
1. Access to health care
2. Good jobs and healthy economy
3. Healthy Lifestyles
4. Good schools and high value on education
5. Strong family life

The top community health problems are:
1. Overweight and obesity
2. Substance use
3. Mental health issues
4. Lack of access to health care
5. Tobacco use

2. Community Health Status Assessment (Secondary data):

Munson contracts with Xerox Community Health Solutions (CHS), formerly Healthy Communities Institute (HCI), to collect demographics and all available data for 100 specific health and quality of life indicators in each of our five counties. This includes statistics related to access to care, death rates, disease prevalence, health risk behaviors, and maternal and child health. CHS populated a robust, easily navigated dashboard that is embedded in the Munson Healthcare website for easy access to the community. For a description of CHS and sources utilized see **Appendix D**. For a comprehensive review of all the secondary data collected by CHS, go to munsonhealthcare.org CHNA-Community Dashboard.

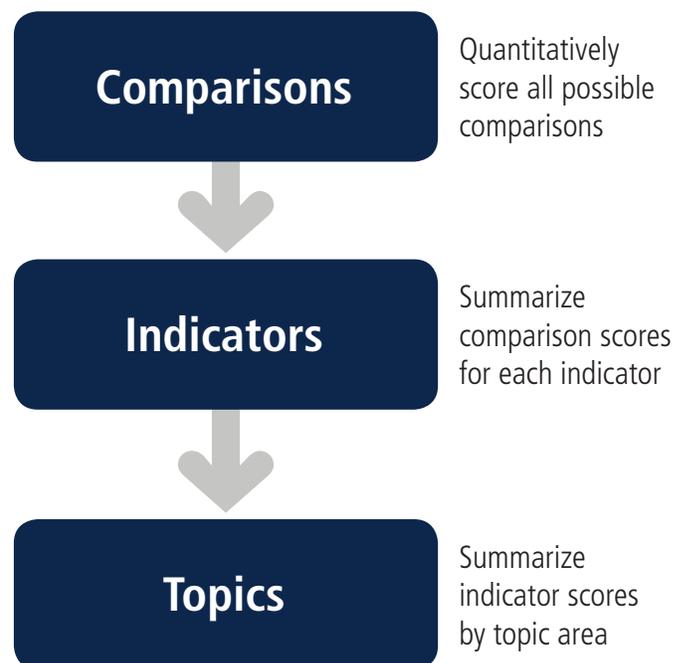
In addition to providing current statistics on each indicator by county, the dashboard includes comparison to US or Michigan data with visual for each, clearly indicating whether the local statistic is better, neutral, or worse. In addition, reports can easily be generated within CHS that identify the highest need indicators, assisting in analysis of secondary data.

a. Secondary data analysis and methodology:

- For each indicator, counties were assigned a score based on the comparison to other communities, whether health targets have been met, and the trend of the indicator value over time. These comparison scores range from 0-3, where 0 indicates the best outcome and 3 the worst.



- Indicators are categorized into topic areas and each topic area receives a score. Topic scores are determined by the comparisons of all indicators within the topic.



- After scoring the secondary data topics, the topics in the worst half (1.5-3.0) were included as significant health needs.

Topics that scored in the lower half of the statistical range in two or more of the counties in the five-county region were: access to health services; mental health and mental disorders; mortality data; cancer; children's health; County Health Rankings; diabetes; public safety; respiratory diseases; substance abuse; and women's health.

3. Forces of Change Assessment (Primary data):

During this phase, participants engage in brainstorming sessions aimed at identifying forces—such as trends, factors, or events—that are or will be influencing the health and quality of life of the community. The forces identified through this process, together with the results of the other MAPP Assessments, provide important information for improving community health in our region.

Through a facilitated discussion, members of the CHNA Steering Committee generated the following list of current forces of change:

Socio-Cultural Forces

- Munson Community Health Initiatives (Northern Michigan Diabetes Initiative, Shape Up North, etc.)
- Cowell Family Cancer Center
- Increase in older adult segment of the population
- Redistribution of the population
- Lower unemployment rate
- Outbreaks of vaccine-preventable diseases in the region
- Consumer voice, driving food choices (gluten-free, organic)
- State Innovation Model—formalizes collaborations for collective impact
- Increases in opiate addiction, increased access to treatment

- Changing social norms, such as kids engaging in less physical activity
- Shift from focus on acute disease to preventable disease/population health
- Increase in depression and anxiety
- Abundance of meth labs
- Collaboration/collective impact
- Formation of the Northern Michigan Public Health Alliance

Political forces

- Federal election
- Affordable Care Act enactment and possible overturn
- Medicaid Expansion

Economic forces

- Improvement in economy
- New regional grant funding
- Low oil and gas prices
- Changing payor models
- More health incentives

Technological forces

- Availability of technology
- County Health Rankings and other easily accessible sources of data
- Quality measures
- Access to information in general, transparency with online reviews

Phase 4: Significant Health Needs:

During this phase of the MAPP process, an ordered list of the most important issues facing the community was developed by exploring the convergence of the results of the assessments thus far. A spreadsheet was prepared that listed the 26 topic areas identified in the Community Themes and Strengths Assessment (primary data) and Community Health Status Assessment (secondary data) by county. For secondary data, Community Health Solutions were used to identify topics that scored in the lowest half of the range. The cumulative list of health issues is detailed in **Appendix E**.

After reviewing data, the Community Health Needs Assessment Steering Committee used the Multi-Voting method to narrow the list down. First, they deleted topics for which the hospital was not a natural leader (for example, housing, education, environment, and transportation). With 16 topics left, each committee member distributed eight sticker votes (half the number of topics). A second round of voting was not necessary as seven topics received eight or more votes:

- Obesity and overweight
- Diabetes
- Substance abuse/tobacco use
- Access to health services
- Mental health
- Maternal, fetal and infant health
- Access to healthy foods

For each one of these topics, an Issue Brief was prepared that summarized all primary and secondary data collected during the community health needs assessment related to that topic. These Issue Briefs were presented to the Munson Healthcare Community Health Committee (CHC), comprised of leaders from across the five-county region. They ranked priority issues using a Decision Matrix with the following criteria: severity, magnitude, impact, sustainability, and achievability.



What is the Community Health Committee (CHC)?

The CHC is a Munson Healthcare Board committee that provides focus and oversight to the community health activities of Munson Healthcare. The CHC is made up of board members from Munson Healthcare and system hospitals, as well as area physicians, public health officials, and community members which collectively represent the broad community including the medically underserved, low income, and minority groups. The CHC meets regularly to review existing programs and services related to current community health needs and consider Munson Healthcare's response to any identified emerging health trends.

Health Needs Identified

Based on results of the extensive prioritization process discussed above, Paul Oliver Memorial Hospital will focus on the following issues:

- Obesity and overweight
- Diabetes
- Substance abuse/tobacco use
- Access to health services
- Mental health
- Maternal, fetal and infant health
- Access to healthy foods

Due to the clear interconnectivity, amongst the issues, all will be considered in our next steps. We will build an implementation strategy using techniques that cross over between health issues and as such enhance our collective impact on improving community health. Paul Oliver Memorial Hospital's role in addressing each of these health issues may vary. For some, Paul Oliver Memorial Hospital may be the appropriate convener while for others our role may be best suited to be a participant in actively addressing a particular health issue.

Hospital and Community Assets Identified

The CHNA identified a large number of community assets. See **Appendix F** for a list of established community services that are partially or fully meeting identified health needs. These services include the three hospitals and their community benefit programs, health clinics, federally qualified health centers, local health departments, county health plans, non-profit organizations, government services, county collaboratives, and other collaborative groups. All of these groups have a long, strong history of working together to meet needs.

It is important to note that some agencies and non-profit organizations offer multiple services and all services may not be listed individually. Also, due to an ever-evolving network of resources, not all may have been identified.

Next Steps

1. CHNA results will be disseminated to community partners, county collaboratives, and other interested parties.
2. The complete CHNA will be posted on the Munson Healthcare website. A copy also may be obtained by contacting Munson Community Health Department.
3. Paul Oliver Memorial Hospital will develop an implementation strategy to address our prioritized health issues and will participate in larger collaborative community health efforts as well.

Appendix A

CHNA Steering Committee Members

Heidi Britton, Chief Executive Officer **Northwest Michigan Health Services**

Ms. Britton joined Northwest Michigan Health Services in 2014. Previously, she served as CEO of the Knox Community Health Center and Public Health Administrator of Knox County Health Department. Britton is a Certified Public Health Administrator and holds a Bachelor of Science in Biochemistry and a Master of Public Health from University of Illinois at Chicago. She has spent her career serving in public health and health services for underserved populations including directing a school-based health center in Champaign, Illinois and as a health volunteer for the U.S. Peace Corps in Turkmenistan.

Mary Clulo, Assistant Treasurer **Munson Healthcare**

Mary has been with Munson seventeen years, focusing on tax compliance, tax-exempt financing and treasury services. She previously was the Vice President of Finance for the Glenwood School for Boys and a Manager at Ernst & Young with a specialization in Tax-Exempt Organizations. She holds a master's degree in Public Policy and a Certificate of Healthcare Administration from the University of Chicago.

Michael Collins, MD, Medical Director **Grand Traverse Health Departments**

Dr. Collins has been Medical Director of the Grand Traverse Health Department for 20 years. He holds a Master of Science degree in Epidemiology from Michigan State University and is a long-time member of the Munson Community Health Committee, which makes recommendations on discretionary spending to the Munson Healthcare Board. Prior to entering public health, Dr. Collins was a respected area OB/GYN.

Chris Hintz, Marketing Strategy Specialist **Munson Healthcare**

Chris joined Munson Healthcare in May 2015. In this capacity he has supported the marketing and communications needs of numerous community health efforts. He has more than 15 years of marketing and public relations experience, primarily in nonprofit settings. Chris earned master's degrees in public administration and journalism from Indiana University.

Kevin Hughes, Health Officer **District Health Department #10**

Kevin has been with District Health Department #10 for 20 years and is currently the deputy health officer for the agency. He has a bachelor's degree in Health Fitness and Health Promotion from Central Michigan University and a master's degree in Organizational Management from Spring Arbor University. Kevin has been involved in the agency's community health assessment efforts since 2003 and serves as an agency representative on four other hospital Community Health Needs Assessment steering committees.

Ian Jones, Corporate Director of Marketing **Munson Healthcare**

Ian joined Munson Healthcare in 2006 and serves on the Community Benefit, Community Health Needs Assessment, and Emergency Management committees. He holds a bachelor's degree from the University of North Carolina at Chapel Hill. Prior to joining Munson, Ian spent nine years in various roles in higher education.

Appendix A

CHNA Steering Committee Members - cont'd

Jean M Kerver, PhD, MSc, RD; Assistant Professor, Department of Epidemiology & Biostatistics College of Human Medicine, Michigan State University

Jean M Kerver, PhD, MSc, RD, is an assistant professor in the College of Human Medicine at Michigan State University, serving in the Departments of Epidemiology & Biostatistics and Pediatrics & Human Development. As a nutritional epidemiologist and a registered dietitian, Kerver has spent her career developing effective ways to promote healthy lifestyle behaviors for families living in poverty or facing other challenges. Her primary research interest involves studying how the food a woman eats during pregnancy affects not only her health, but also the long-term development of her child. Dr. Kerver's position is based in Traverse City, Michigan, as part of a new effort by MSU's College of Human Medicine to establish a statewide research network.

Michelle Klein, RN, MA, Director of Personal Health Benzie Leelanau District Health Department

Michelle is the Director of Personal Health at the Benzie-Leelanau District Health Department. She has 20 years experience in public health and extensive experience working collaboratively with community partners to conduct community needs assessments and implement programs to address identified needs.

Terri Lacroix-Kelty, LMSW, Behavioral Health Director Munson Medical Center

Terri has worked in health care in the Traverse City area for a good part of 27 years and is proud to be serving with the network of services and supports that we have available for our community. Terri is the Behavioral Health Director at Munson Medical Center in Traverse City, MI and is responsible for the inpatient and outpatient service continuum for mental health and substance use disorders. Previous to that, Terri was the Chief Operations Officer and Program Manager at Northern Lakes Community Mental Health for 14 years. While at NLCMH, she managed programs that served and supported adults with serious mental illness and adults with intellectual and developmental disabilities.

Peter Marinoff, President Paul Oliver Memorial Hospital

Peter has worked for Munson Healthcare for 16 years and has worked in accounting and finance, as well as his current role in administration. He is responsible for the daily operations of the hospital and representing the hospital in the community to coordinate health care in the county. He holds a bachelor's degree in Accounting from Radford University in Radford, Virginia, and a master's degree in Business Administration from the University of Michigan.

Mary Beth Morrison, Vice President of Operational Improvement and Project Management Munson Healthcare

Mary Beth earned a bachelor's and a master's degree in Industrial and Operations Engineering, and a master's degree in Health Services Administration from the University of Michigan. She joined Munson Medical Center in 1982 after working at Harper-Grace Hospitals in the Detroit Medical Center. Her responsibilities include managing several staff functions, including Performance Services, Business Intelligence, Process Engineering/Project Management, Community Health initiatives, Knowledge Management Services, and Clinical Informatics.

Appendix A

CHNA Steering Committee Members - cont'd

Donna Norkoli, Health Planner District Health Department #10

Donna is currently the Health Planner Supervisor for District Health Department #10 in Cadillac, Michigan. Previously, Donna was the Project Coordinator for the CDC funded Community Transformation Grant Project for the Sault Ste. Marie Tribe of Chippewa Indians. She has worked in public health for 22 years, with an extensive background in community organizing for program planning and implementation as well as coordination of regional efforts to prevent chronic disease through promotion of physical activity, healthy eating, and tobacco-free lifestyles. Donna holds a B.S. Degree in Public Health Education and Health Promotion from Central Michigan University and is a Master Certified Health Education Specialist.

Christi Nowak, Community Health Manager Munson Medical Center

Christi Nowak received her Master of Public Health from the University of Michigan, School of Public Health in 2005. She also received a Master in Business Administration from California State University, Stanislaus in 2009. Christi has been with Munson Medical Center for over 5 years and is the Manager of Community Health. Her responsibilities include overseeing several regional community health initiatives, diabetes education and participating in many collaborative groups throughout the region that relate to community health.

Lisa Peacock, R.N., M.S.N., WHNP-BC; Health Officer /Family and Community Health Supervisor Benzie-Leelanau District Health Department/ Health Department of Northwest Michigan

Lisa has many years of experience in public health nursing, including direct care as well as supervisory and administrative experience. Her clinical experience includes school nursing, maternal/child and women's health programs. She is currently serving as Health Officer for the Benzie-Leelanau District Health Department and Community Health Supervisor at the Health Department of Northwest Michigan.

Tara Rybicki, Community Health Specialist Munson Medical Center

Tara has been in her position at Munson for two years. She received her Master of Science Degree in 2010 from Central Michigan University. She has been a Registered Dietitian since 2003 and went on to gain further credentialing as a Certified Diabetes Educator in 2011. Tara's work experience is well rounded including time in clinical inpatient and outpatient counseling, community counseling, public health, as well as teaching classes related to healthy living in both the hospital and community college settings.

Jane Sundmacher, Community Health Planner Health Department of Northwest Michigan

Jane facilitates the Northern Michigan Public Health Alliance, a partnership of 6 local health departments that together serve a 25-county region. Community health needs assessment (CHNA) is a top Alliance priority and she leads CHNA on behalf of hospitals and health departments in 16 counties, including the Grand Traverse region. Before joining the health department, Jane was associate administrator for Community Health and Health Promotion at the Oakwood Healthcare System in the Detroit area, with academic appointments at Wayne State University and University of Michigan.

Appendix A

CHNA Steering Committee Members - cont'd

Michael Tinkle, Outreach Coordinator Kalkaska Memorial Health Center

As native and current resident of Kalkaska, Michael has been the Outreach Coordinator at Kalkaska Memorial Health Center since its existence in early 2015. He graduated with a Bachelor's degree in Communication from Saginaw Valley State University in 2010. Michael is responsible for representing Kalkaska Memorial Health Center and the services they offer in the local community as well as the twelve townships that make up Kalkaska County.

Wendy Trute, Health Officer Grand Traverse County Health Department

Wendy has been the Health Officer for Grand Traverse County since August of 2012. She previously was the Public Health Administrator for Rock Island County Health Department from 2002-2012 in Illinois. She has worked in Public Health for 21 years collectively as an epidemiologist, program administrator or health officer for three state health departments, two local health departments and two major universities. She holds a master's degree in public health with an emphasis in epidemiology from the University of Michigan. Wendy holds a certification as a public health administrator and currently serves as the vice chair of the Northern Michigan Public Health Alliance.

Jan Wiltse, Health Planner District Health Department #10

Jan has been at District Health Department #10 for the past eight years, specializing in community health needs assessment, quality improvement, and data collection and reporting. With a PhD in Community Health, she has worked in the public health field for over 25 years. She has experience working in local health departments, as a state consultant, in a hospital setting, and teaching.

Amanda Woods, Community Health Coordinator Munson Medical Center

Amanda received her Master of Public Health in 2009 from the University of Michigan, School of Public Health. She has been involved in rural community health initiatives to reduce chronic disease, cardiovascular disease risk, diabetes risk and decrease the percentage of overweight and obese since 2012. She has been with Munson Medical Center for nearly two years and serves as the Community Health Coordinator.

Laura Zingg, Administrative Director Assisted Living, Marketing, and Outreach Kalkaska Memorial Health Center

Laura has been with KMHC for 8 years and in her role oversees a 40 bed Home for the Aged, 2 Adolescent Health Clinics, Care Management, Marketing, and Community Outreach. She serves as the Kalkaska Chair to the Traverse City Chamber of Commerce and represents KMHC at many community events. She holds a bachelor's degree in Business from Northwood University and a master's degree in Business Administration with a health care concentration from Davenport University.

Appendix B

Organizations Represented at the Community Conversations

Antrim

Antrim County Board of Commissioners
Antrim County Community Collaborative
Antrim County Sherriff's Department
Antrim County Veterans Administration
Area Seniors, Inc.
Bellaire Family Health Center
Communities in Schools Mancelona
Community Member / Restaurant Owner
East Jordan Family Health Center
Good Samaritan Family Services
Health Department of Northwest Michigan
Michigan Department of Health and Human Services
Michigan State University Extension
Munson Medical Center
North Country Community Mental Health Services
Northwest Michigan Community Action Agency
United Way of Northwest Michigan

Benzie

Adoptive Family Support Network
Area Agency on Aging of Northwest Michigan
Benzie Collaborative
Benzie County Circuit Court
Benzie County Council on Aging, Inc.
Benzie County Probation Office
Benzie Leelanau District Health Department
Benzie Manistee FIM Program
Community Member
Crystal Lake Clinics
Early Head Start
Grand Traverse Pavilions
Grow Benzie
Northern Michigan Health Services, Inc.
Board of Directors
Northwest Michigan Community Action Agency
Northwest Michigan Health Services, Inc.
Northwest Michigan WORKS
Paul Oliver Memorial Hospital
Traverse City Continuum of Care
True North Community Services

Kalkaska

Catholic Human Services
District Health Department #10
Father Fred Foundation
Goodwill Industries Northern Michigan
Kalkaska Area Interfaith Resources
Kalkaska County Commission on Aging
Kalkaska County Community Collaborative
Kalkaska Memorial Health Center
Michigan Department of Health and Human Services
Munson Medical Center
True North Community Services
United Way of Northwest Michigan

Grand Traverse

13th Circuit Court Family Division
American Red Cross of Northern Michigan
Area Agency on Aging of Northwest, MI
Catholic Human Services
Child and Family Services of Northwestern Michigan
Conflict Resolution Services, Inc.
Disability Network of Northern Michigan
Father Fred Foundation
Goodwill Industries Northern Michigan
Grand Traverse County Health Department
Grand Traverse County Parks and Recreation
Grand Traverse Pavilions
Great Lakes Home Healthcare
Health Department of Northwest Michigan
Michigan Department of Health and Human Services
Michigan State University Extension
Munson Medical Center
Northern Health Plan
Northern Lakes Community Mental Health Authority
Northwest Continuum of Care
Northwest Food Coalition
Northwest Michigan Supportive Housing
Poverty Reduction Initiative
Project Unity for Life
Third Level Crisis Services
Safe Kids North Shore

Appendix B

Organizations Represented at the Community Conversations - cont'd

Salvation Army

SEEDS

True North Community Services

Women's Resource Center

Leelanau

Benzie Leelanau County EHS/HS

Benzie Leelanau District Health Department

Community Member

Grand Traverse Community Collaborative

Grand Traverse Pavilions

Great Start Collaborative

Leelanau Children's Center

Leelanau County Family Coordinating Council

Leelanau County Prosecutor's Office

Leelanau Family Courts

Michigan State University Extension

Michigan Department of Health and Human Services

Munson Medical Center

Northwest Michigan Health Services, Inc.

Parenting Communities

Salvation Army

Samaritan's Closet

Women's Resource Center

Appendix C

Primary Data: Community Conversations and Survey Results Summary

Munson 2016 Community Health Needs Assessment Community Conversation Analysis by the CHNA Advisory Committee Antrim, Benzie, Grand Traverse, Kalkaska and Leelanau Counties

Promote and strengthen community resources	Provide access to healthy eating	Improve access to behavioral health services	Strengthen advocacy for health and wellness	Increase access to reliable trans	Strengthen community connections across the lifespan	Promote a thriving economy	Increase access to affordable housing	Expand community education opportunities	Increase access to affordable child care	Increase access to physical health services	Increase enforcement in high crime areas	Protect the environment
Increase awareness of community resources	Promote healthy eating and nutrition	Increase access to behavioral health services	Engage in advocacy	Provide community transportation options	Promote youth activities	Promote employment	Plan affordable housing	Provide training and education opportunities across the lifespan	Increase access to affordable child care	Promote health insurance access to care	Increase enforcement in high crime areas	Protect our environment
Promote all community resources	Provide continual access to fresh local food	Eliminate substance abuse	Engage in community conversation	Consider challenges of mobility impairments	Offer events to strengthen families	Expand employment opportunities	Increase availability and quality of affordable housing	Create positive educational environments	Provide affordable child care	Coordinate access to care		
Strengthen community support networks	Promote, grow and share fresh foods	Address mental health access	Focus on health and wellness	Expand public transportation	Engage youth	Recruit economic opportunity	Advocate for affordable housing	Educate the community	Fund early childhood services			ANTRIM COUNTY
Improve accessibility to services	Incorporate nutritional health	Integrate physical and mental health services	Engage the community	Review transportation services	Place recreational activities	Improve community financial support	Design and develop safe, affordable housing	Implement educational building blocks				BENZIE COUNTY
Organize resources	Increase healthy food access	Coordinate and communicate SUD services	Engage community leaders for action	Develop transportation access systems	Create incentives for active participation							GRAND TRAVERSE COUNTY
Improve information access	Promote healthy lifestyles and wellness	Improve behavioral health	Strengthen the community									KALKASKA COUNTY
Support the faith-based community												LEELANAU COUNTY

Appendix C

Primary Data: Community Conversations and Survey Results Summary - cont'd

“What Matters to You?” Community Survey

Question asked: Check the three most important factors needed for a healthy community.

1. Access to health care
2. Good jobs and healthy economy
3. Access to affordable healthy food
4. Affordable housing
5. Good schools and high value on education

“What Matters to You?” Community Survey

Question asked: Check the three top community health problems in your county.

1. Substance use
2. Lack of affordable housing
3. Overweight and obesity
4. Mental health issues; and
5. Lack of access to primary care.

Health Care Provider Survey

Question asked: Check the three most important factors needed for a healthy community.

1. Access to health care
2. Good jobs and healthy economy
3. Healthy lifestyles
4. Good schools and high value on education
5. Strong family life as the most important factors for a healthy community

Health Care Provider Survey

Question asked: Check the three top community health problems in your county.

1. Overweight and obesity
2. Substance use
3. Mental health issues
4. Lack of access to health care
5. Tobacco use

Appendix D

Demographic and Secondary Data Source: Xerox Community Health Solutions

Xerox Community Health Solutions (CHS), formerly Healthy Communities Institute (HCI), located in Berkeley, CA, provides a customizable, web-based information system that offered a full range of tools and content to improve community health. CHS and Munson Health System have collaborated since 2013 to build the public web platform on the Munson Medical Center website site. To learn more about Xerox Community Health solutions, please visit healthycommunitiesinstitute.com.

Indicator Selection

Xerox Community Health Solutions provided a list of specific indicators for this assessment that can be found on the web platform. The indicators chosen for the site are based on several criteria, including:

- Publicly available/accessible data (at the county level)
- Validity of data source (appropriate methodology)
- Likelihood that the indicator will be replaced again in the future
- Corresponding to Healthy People 2020 goals
- Consistency with other HCI websites

Xerox Community Health Solutions Data Sources

- American Community Survey (US Census Data)
- Annie E. Casey Foundation
- County Health Rankings
- Michigan Department of Community Health
- Michigan Department of State
- Michigan Profile for Healthy Youth
- National Cancer Institute
- National Center for Educational Statistics
- Northern Michigan Diabetes Initiative - Community Diabetes Survey
- US Bureau of Labor Statistics
- US Department of Housing and Urban Development
- USDA Food Atlas

Note: Secondary data was pulled in March of 2016. Xerox Community Health Solutions updates data continuously based on availability.

Appendix D

Demographic and Secondary Data Source: Xerox Community Health Solutions - cont'd

Aggregate Secondary Data - Topics scoring in the lowest half

Topic	Antrim	Benzie	Grand Traverse	Kalkaska	Leelanau	# of counties this topic was an issue
	Score	Score	Score	Score	Score	
Access to Health Services	1.7	1.7		1.6	1.7	4
Cancer		1.6		1.9		2
Children's Health	1.6			1.6		2
County Health Rankings	1.5			1.7		2
Diabetes		1.5		X 2		2
Economy				1.7		1
Education				X 2		1
Material, Fetal & Infant Health	X 2.3	1.7		1.7	1.6	4
Mental Health & Mental Disorders	1.8		1.7	1.7		3
Mortality Data	1.5	1.6		X 2		3
Other Chronic Diseases			X 2			1
Public Safety	1.8			1.7		2
Respiratory Diseases		1.7		X 2.1		2
Substance Abuse	1.8			1.5		2
Transportation				1.9		1
Wellness & Lifestyle				1.8		1
Women's Health			1.6	1.6		2

Appendix E

Cumulative List of Identified Community Health Needs (26)

Access to Health Services
Access to Healthy Food
Adequate Law Enforcement
Advocacy for Health and Wellness
Affordable Child Care
Affordable Housing
Awareness of Community Resources
Cancer
Children's Health
Community Connectivity
County Health Rankings
Diabetes
Economy
Education
Environment
Maternal, Fetal & Infant Health
Mental Health & Mental Disorders
Mortality Data
Overweight & Obesity
Other Chronic Diseases
Public Safety
Respiratory Diseases
Substance Abuse & Tobacco Use
Transportation
Wellness & Lifestyle
Women's Health

Appendix F

Community Assets Targeting Identified Health Needs

Access to Health Services

- Adolescent health clinics
- Delta Dental's Healthy Kids
- Delta Participating dentists
- Dental Clinics North
- East Jordan Family Health Center
- Grand Traverse Band of Ottawa and Chippewa Indians
- Grand Traverse Regional Oral Health Coalition
- Health departments
- Healthy Michigan Plan
- Ironmen Health Center in Mancelona
- Kalkaska Memorial Health Center Rural Health Clinic
- Munson Family Practice
- Munson Healthcare
- Northern Health Plan
- Northwest Michigan Health Services, Inc.
- Traverse Health Clinic
- University of Michigan Dental Students

Access to Healthy Food

- Blue Cross / Blue Shield School Eating Program
- Double Up Food Bucks
- Farmers Markets
- Food Pantries
- Groundwork Center for Resilient Communities
- Goodwill Industries Northern Michigan
- Meals on Wheels
- Michigan State University Extension
- Northwest Michigan Food Coalition
- Project Fresh
- School Lunch Programs
- SEEDS
- Shape Up North Fruit & Veggie RX Program
- Women, Infants, and Children (WIC)

Adequate Law Enforcement

- Local Law Enforcement
- Traverse Narcotics Team

Advocacy for Health and Wellness

- Community Mental Health
- Federally Qualified Health Centers

- Health departments
- Michigan Health and Hospital Association
- Munson Healthcare
- Michigan State University Extension

Affordable Child Care

- Early Start
- Great Start
- Head Start

Affordable Housing

- Freedom Builders
- Goodwill Industries Northern Michigan
- Habitat for Humanity
- Home Stretch
- Networks Northwest
- Northern MI Community Action Agency
- True North Community Services

Awareness of Community Resources

- Community Collaboratives
- Health Link
- Health departments
- HelpLink
- Third Level

Cancer

- American Cancer Society
- Antrim County High Tea for Breast Cancer Prevention
- Cancer Navigator Program
- Chronic Disease Coordinating Network
- Cowell Family Cancer Center
- Health departments
- Mammography Assistance Fund
- Munson Cancer Research
- Northwest MI Chronic Disease Prevention Coalition
- Women's Cancer Fund

Children's Health

- Adolescent health clinics
- Head Start
- Health departments
- Health Futures

Appendix F

Community Assets Targeting Identified Health Needs - cont.

- Kalkaska Memorial Health Center Rural Health Clinic
- Maternal Infant Health Program (MIHP)
- Munson Healthcare
- Munson Healthcare Family Practice
- Northwest Michigan Health Services, Inc.
- Traverse Health Clinic
- Women, Infants, and Children (WIC)

Community Connectivity

- County collaboratives
- HELPLINK

Diabetes

- Chronic Disease Coordinating Network
- Diabetes Prevention Program
- Hospital-based diabetes education programs
- Michigan State University Extension
- Northern Michigan Diabetes Initiative (NMDI)
- Northwest Michigan Chronic Disease Prevention Coalition
- Primary care providers
- Ryan Dobry Diabetes Charity

Economy

- Agape Financial of Northwest Michigan
- Benzie Area Christian Neighbors
- Child and Family Services
- County collaboratives
- Goodwill Industries Northern Michigan
- Grand Traverse and Leelanau Laundry Projects
- Grand Traverse Band of Ottawa and Chippewa Indians
- Great Start Collaborative
- HELPLINK
- Kalkaska Area Interfaith Resources
- Leelanau Christian Neighbors
- LOVE, Inc.
- Michigan Department of Health and Human Services
- Michigan WORKS
- Northwest Michigan Community Action Agency
- Poverty Reduction Initiative
- Progress Village

- Safe Harbor
- Salvation Army
- Students in Transition Empowerment Program (STEP)
- Traverse Bay Area Intermediate School District (TBAISD)
- Venture North

Education

- Early childhood education
- Local School Districts
- Northwestern Michigan College
- NMC University Center
- Traverse Bay Area Intermediate School District (TBAISD)

Environment

- Grand Traverse Regional Land Conservancy
- Groundwork Center for Resilient Communities
- Health departments
- Michigan Department of Environmental Quality
- Michigan State University Extension
- Northwest Michigan Water Safety Network
- SEEDS

Maternal, Fetal & Infant Health

- Great Start
- Health departments
- Healthy Futures
- Maternal Infant Health Program (MIHP)
- Munson Neonatal Intensive Care Unit
- Northern Lower Michigan Perinatal Planning Initiative
- Northern Michigan Maternal Child Outreach
- Women, Infants, and Children (WIC)

Mental Health & Mental Disorders

- Adolescent health clinics
- Catholic Human Services
- Community Mental Health
- Community Mental Health – Pediatric Telehealth Psychiatry
- Hoarding Taskforce
- Munson Behavioral Health

Appendix F

Community Assets Targeting Identified Health Needs - cont.

- Northwest MI Health Services, Inc.
- Pine Rest
- Third Level
- Traverse Health Clinic

Other Chronic Diseases

- Chronic Disease Coordinating Network
- Northwest MI Chronic Disease Prevention Coalition

Overweight & Obesity

- Chronic Disease Coordinating Network
- Grand Traverse Bay YMCA
- Live Well – District Health Department #10
- Northwest MI Chronic Disease Prevention Coalition
- Shape Up North

Public Safety

- Children’s Advocacy Center
- Emergency Preparedness Taskforce
- Local Law Enforcement
- Northwest Michigan Water Safety Network
- Opioid Taskforce
- Third Level Crisis Center
- Vulnerable Adult Taskforce
- Women’s Resource Center
- Zero Tolerance

Respiratory Diseases

- Better Breathers

Substance Abuse (drugs and alcohol)

- Addiction Treatment Services
- Catholic Human Services
- Live Well – District Health Department #10
- Munson Alcohol and Drug Treatment
- Northern Michigan Regional Entity

Substance Abuse (tobacco)

- Adolescent health clinics
- District Health Department #10 Smoking Cessation Program
- Freedom from Smoking

- Michigan Tobacco Quit Line
- Tobacco Free Families
- Traverse Bay Area Tobacco Coalition

Transportation

- Antrim County Transportation (ACT)
- Bay Area Transportation Authority (BATA)
- Benzie Bus
- Networks Northwest
- TART Trails
- Kalkaska Public Transit Authority (KPTA)

Wellness & Lifestyle

- Adolescent health clinics
- Benzie County Trails
- Betsie Hosick Health & Fitness Center (POMH)
- Girls on the Run
- Grand Traverse Bay YMCA
- Groundwork Center for Resilient Communities
- Health departments
- Live Well - District Health Department #10
- Local Fitness / Sports Clubs
- Michigan State Parks
- Munson Healthy Weight Center
- Norte!
- Northern Michigan Diabetes Initiative (NMDI)
- Northwest Michigan Parks and Recreation Network
- Shape Up North (SUN)
- Top of Michigan Trails Council
- Traverse Area Recreational Trails (TART)
- Youth WOW

Women’s Health

- Health departments
- Mammography Assistance Fund
- Planned Parenthood
- Women’s Cancer Fund

Note: Some agencies and non profit organizations offer multiple services and all services may not be listed individually. Also, due to an ever-evolving network of resources, not all may have been identified.