

# Improving Health in Isabella County

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## Health Improvement Plan

**2012**

*Central Michigan District Health Department  
2012 E. Preston Street  
Mt. Pleasant, Michigan 48858  
[www.cmdhd.org](http://www.cmdhd.org)*





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## **Central Michigan Area Health Improvement Planning: Isabella County**

### **Introduction/Background: The Community - Isabella County**

Isabella County, with a population of roughly 67,176 inhabitants (US Census 2009), represents a diverse community with a vibrant growing urban population in Mount Pleasant, which hosts Central Michigan University, as well as rural and farming communities. People live in widely varying economic circumstances within the community. 29.4% of individuals are identified as living below the poverty level (US Census Bureau, Small Area Income Poverty Estimates, 2008). There are several medical clinics and medical services many of which are tied to major hospitals in the area (McLaren-Central Michigan in Mount Pleasant and MidMichigan Medical Centers in Gratiot, Clare and Gladwin, and Midland), but it is considered to be a health professional shortage area according to the US Health Resources and Services Administration. Both health and social services and resources tend to be concentrated within the urban center of Mount Pleasant and accessing these can often be a challenge for those living in more rural settings. Additional strains and stresses on these services are presented by the transient nature of some of the population (e.g. CMU students and faculty, tourists and summer visitors) and general economic and demographic changes (i.e. an increasing aged population) that are occurring more generally in all of Michigan and the United States (i.e. increasing numbers of unemployed, increasing numbers of the 'working poor').

### **Background: The Health of Isabella County**

In February of 2010 The University of Wisconsin's Population Health Institute published for the first time County Health Rankings for every county in each US state. Rankings were based on two major factors – Health Outcomes (how each county did in terms of mortality/deaths and morbidity/illness and poor health) and Health Factors that contribute to those ultimate health outcomes -that included four categories: Health Behaviors (e.g. smoking, obesity, drinking, STIs), Clinical Care (e.g. number of uninsured adults, primary care physicians, preventable hospital stays, diabetic screening), Social & Economic factors (e.g. education, employment, social support, crime rate), and the Physical Environment (e.g. air pollution, access to healthy foods and recreational facilities).

Rankings for the six counties that fall under the jurisdiction of the Central Michigan District Health Department (CMDHD) were poor, with health outcomes and health factors in all six counties ranked in the bottom half of Michigan counties (4 of the 6 were ranked in the bottom 10 counties). Isabella county's ranking of 42 for health outcomes and 22 for health factors was the highest of the counties but still left much room for improvement and in some areas the health discrepancies were alarming (e.g. a ranking of 78 in the Clinical Care category and 53 in premature deaths) and still left room for improvement.

### **Health Improvement Efforts**



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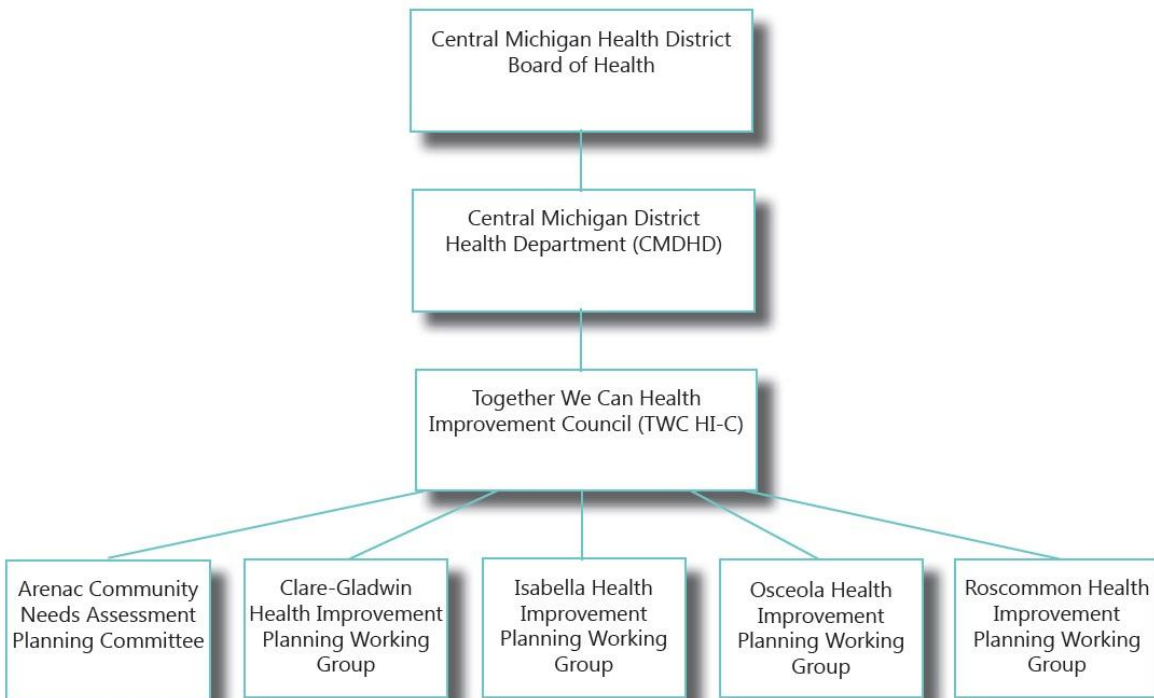
The first step in addressing the health issues in our community was to form the cross-county Together We Can Health Improvement Council, made up of representatives from across the health district from health care organizations, educational institutions, human service agencies, and government agencies. The council first established formal operating agreements and a unifying mission statement. A community needs assessment was completed through community surveys, focus groups, and open-forum discussions at two Public Health Summits. Health Improvement Planning Working Groups were also formed in each county in the central Michigan health district.

### **Isabella Health Improvement Plan**

#### **Mission**

*Uniting the communities and working together, we will improve health and promote wellness in central Michigan.*

The development of the mission statement was accomplished by the Together We Can Health Improvement Council with input from all six counties. Each county's Health Improvement Planning Working group has adopted this mission statement. Working towards a common goal with many partners across the Together We Can region will help each county's Health Improvement Planning Working group affect greater change. A diagram of Together We Can Organizational and Reporting Structure is shown below.





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**Isabella County Health Improvement Planning Working Group Members**

<b>Name</b>	<b>Organization</b>
Alice Jenicke	Chippewa River District Library
Andy Latham	Mt Pleasant Police Department/Public Safety
Audra Daniels	MPADG Co Chairman
Bernadette Stocking	MidMichigan Health
Bob Radaz	Community Mental Health for Central Michigan
Brenda Greenhoe	Mid Michigan Homeless Students Support
Brenda Upton	Isabella County Commission On Aging
Brian Smith	Manager Union Township
Candace Gibson	Teams of Leaders – Central Michigan University
Carey Pauquette-Schalm	Saginaw Chippewa Indian Tribe of Michigan
Cathy Rayburn	Gratiot-Isabella Regional Education School District
Christa Jerome	Eight Cap, Inc – 0-5 Headstart
Cindy Hales	McLaren – Central Michigan
Dag von Lubitz	Adjunct Research Professor - CMU
Dana Bonnell	Central Area Michigan Prisoner Reentry Initiative
Deb Birkam	American Red Cross – Central Michigan Chapter
Deb Yeagley	Gratiot-Isabella Regional Education School District
Dee Obrecht	Child and Family Enrichment Council (Café)
Diana Calkins	Women’s Aid Service Inc, Gratiot – Clare – Isabella
Elizabeth Williams	University of Davenport
Erin Balbough	Women’s Aid Service Inc, Gratiot – Clare – Isabella
Genevieve Hanes	Community Mental Health for Central Michigan
Heather Cole	Central Michigan District Health Department
Helen Lee	Central Michigan District Health Department
Jeff Browne	Mt. Pleasant Police Department/Public Safety
Jessica Gardon Rose	Central Michigan University College of Health Professions
Jim Moreno	Isabella County Commissioner
John Barker	Supervisor Union Township
Julie Hart	MidMichigan Health
Kristin Traskie	MidMichigan Medical Center - Gratiot
Lisa Hadden	CMU College of Medicine
Lori Wangberg	Central Michigan University – Health Services
Mari Pat Terpening	Central Michigan District Health Department
Marilyn Thornton	Community Mental Health for Central Michigan
Mary Irvine	City of Mt. Pleasant – Division of Public Services
Mary Kushion	Central Michigan District Health Department
Mike White	Michigan State Police



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Pam Millhisler	Ten Sixteen Recovery Network
Paula Chermiside	Gratiot Medical Center – MidMichigan Health
Rachel Wilson	Community Mental Health for Central Michigan
Rebecca Stieg	Michigan Prisoner Reentry Initiative
Stephanie Leibfritz	MidMichigan Medical Center – Midland
Tammy Griffin	Mgr. Employee Health & Fitness - CMU CHIP
Ted Fields	Michigan Therapeutic Consultants
Teri Cady	Disability Network of Mid-Michigan
Todd Furlong	Great Start Collaborative – Gratiot and Isabella Counties
Toni Davis	Women’s Aid Service, Inc – Gratiot, Clare, Isabella
Veronica Romanov	Public Health Consultant
Walt Kennedy	Nimkee Memorial Wellness Center - Saginaw Chippewa Indian Tribe



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**Assessing the Health Needs of Isabella County Stakeholders**

The CMDHD provided the Isabella County Health Improvement Planning Working Group with health and demographic information specific to Isabella County. The information included data gathered at the Public Health Summit, County Health Ranking data, Community Health Status Indicators (compiled by the US Department of Health and Human Services and posted at [www.communityhealth.hhs.gov](http://www.communityhealth.hhs.gov)), and additional health indicator statistics compiled by CMDHD.

The Isabella County Health Improvement Planning Working Group used the various health statistics to develop a Health Issues Survey to determine the importance of various health issues within the county.

In November 2010, the survey was widely distributed to members of the health improvement planning working group, Isabella Community Collaborative Council (ICCC), representatives from government organizations, non-profit groups, educational institutions, businesses, and the public to collect opinions from Isabella County community members regarding health issues within the county. The surveys were structured in part on the model developed by the University of Wisconsin and asked for perceptions of severity and importance of factors within the two primary areas measured in the County Health Rankings:

- The health factors which directly affect health outcomes and organized into the major four topic areas of:
  - Health related behaviors
  - Health systems/clinical care
  - Preventative actions and wellness
  - Environmental factors
- And health outcomes (examples of poor health outcomes include premature death, disease, and ill health).

Survey respondents were also asked to name their top three health issues. The Isabella County Health Improvement Planning Working Group used the results of the survey to help determine and prioritize health improvement goals and set priorities, steps and timelines for actions.





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**Priority Areas, Goals & Objectives**

Following compilation of the results of the Health Issues Survey by CMDHD, the Isabella County Health Improvement Planning Working Group developed and prioritized the following major topic areas in which health improvement efforts are to be focused: Health Services; Nutrition, Physical Activity, and Weight Status; Abusive/Controlling/Violent Behavior; Substance Abuse; Mental Health Issues; Maternal and Infant Health; Reproductive and Sexual Health; Lifestyle and Living Conditions; and Environmental Issues.

Initially, efforts will be focused on addressing the top three priority area of Health Services, Nutrition, Physical Activity and Weight status, and Abusive/Controlling/Violent Behavior. The major goals and strategies to address each health priority area follow:

**Health Services**

*Goal 1:* Participate in the submission of FQHC (Federally Qualified Health Center / Community Health Center/CHC) application.

(As listed in the Together We Can District-Wide Plan)

*Objectives:*

- Isabella Citizens for Health, Inc. receives 501(c)3 status (*summer 2011*)
- \$80,000 planning grant received through ARA dollars (*9-14-11*) – Isabella Citizens for Health, Inc. (ICH)
- Continue discussions with existing community health centers/FQHC’s for healthcare integration (ICH)
- Continue to monitor data from the free clinic. (Cindy Hales/McLarenCM)
- Secured a location and a provider ID number for FQHC Look-alike Healthcare Center/patient medical home (*October 2012*)

*Desired Outcomes:*



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- Increased access to medical, dental and vision services for the uninsured, the underinsured, and all other community members
- Increase/provide affordable health care services, including dental and vision (optical) services

*Current Resources in Isabella County:*

- Isabella County Health Improvement Planning Working Group
- Isabella Citizen's For Health, Inc. Board
- Central Michigan District Health Department
- McLaren Central Michigan
- Isabella County Board of Commissioners
- Isabella County Community Collaborative
- MidMichigan Health
- Community partners - advertise and collaborate

*Goal 2:* Integrate local strategies for public awareness about health issues in Isabella County with the CMDHD RWJF community/consumer advocacy grant work plan.

*Sub-Goal:* Stay informed of political issues that affect our agencies, programs and services and ultimately the health of our community members

*Objectives:*

- Identify a point person(s) who will monitor state and federal legislative activity regarding healthcare issues (10-8-12) – CMDHD/H. Lee
- Outline a process to notify and educate Isabella County stakeholders about legislative activity and the potential impact of legislative decisions on our citizens. (11-5-12) – Isabella County HIP Working Group
- Create a system of drafting and disseminating sample letters to state and federal senators and representatives (11-5-12) – Isabella County HIP Working Group

*Desired Outcomes:*

- Increased support for health issues of Isabella County residents by elected officials
- Isabella County HIP working group will continue to monitor political barriers for health care access issues in Isabella County
- Policy development at local, state, and federal levels of government that improves citizens' access to health care

*Current Resources in Isabella County:*

- The Morning Sun, letter to the editor section
- Robert Wood Johnson Foundation Grant
- League Of Women Voters
- Public Service Cable System
- Medical Listings



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*Goal 3:* Increase community awareness throughout Isabella County of the current health services available to our residents.

*Objectives:*

- Create a list of messages and gather information on health services resources (Isabella County HIP Working Group)
- Hold discussions with the Isabella Co. Citizen's For Health, Inc. Board to identify collaborative methods for raising community awareness (H. Lee/board member)
- Develop a marketing strategy for disseminating the message (CMU intern with Guidance from Isabella Citizens for Health, Inc.)
- Implement the marketing strategy

*Desired Outcomes:*

- Increased awareness among Isabella County Residents of the need to access health care services and resources, and increase awareness of existing health services and resources
- Increase a better understanding of the Affordable Health Care Act by posting information in the HIP team room. Helen Lee/CMDHD
- Increased awareness about the components of the affordable care act (As listed in the Together We Can! District-Wide Plan)
- Increased access to affordable health/dental/vision insurance
- Improve appropriate utilization of healthcare services (hospital ER, urgent care/walk-in clinics, primary care providers, etc.)

*Current Resources in Isabella County:*

- 2-1-1
- CMDHD (Plan First/Rx discount card/Children's Special HC Services, Central Health Plan)
- DHS (Medicare/Medicaid, MiChild)
- McLaren Central Michigan
- MidMichigan Health
- Community Mental Health for Central Michigan
- Ten Sixteen Recovery Network
- MI Community Dental Clinic
- Isabella County Community Collaborative

*Goal 4:* Establish a free medical clinic in Isabella County within the next year.

*Objectives:* **Accomplished**

- McLaren opened in January 2012 at CMDHD

*Desired Outcomes:*

- Increased access to medical services for the uninsured, low income residents in Isabella County
- Increase/provide affordable health care services



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- Assist and navigate community members through the process to identify, apply for and obtain adequate health insurance

*Current Resources in Isabella County:*

- 2-1-1
- CMDHD (Plan First/Rx discount card/Children's Special HC Services, Central Health Plan)
- DHS (Medicare/Medicaid, MiChild)
- McLaren Central Michigan
- MidMichigan Health
- Community Mental Health for Central Michigan
- Ten Sixteen Recovery Network
- MI Community Dental Clinic
- Isabella County Community Collaborative
- *Healthcare Providers and Professionals who donate their time and expertise*

**Nutrition, Physical Activity and Weight Status**

*Goal 1:* Support the following initiatives currently in place: 1) Morey Courts fall & spring after-school programs; 2) McLaren Central Michigan/McLaren Fitness summer youth program; 3) McLaren CM/ Junior Achievement/ CMDHD health program; 4) Governor's 4X4 Plan; 5) Girls on the Run; 6) Gratiot-Isabella RESD "Splash" Phys. Ed. program grants in schools; 7) Union Township's Community Kitchen as a resource for cooking demos, nutrition education, etc.

*Objectives:*

- Continue to work with McLaren Central Michigan/Wellness Central to promote the 'Splash' grant summer youth program (Cindy Hales/McLaren CM)
- Attend coalition meetings through Morey Courts (Helen Lee/CMDHD)
- Participate in Junior Achievement Nutrition and Physical Activity educational opportunities (Lead by Nancy English with Lisa Cross)
- Support the MI Dept. of Educ. MiPhy (MI Profile for Healthy Youth) project.
- Assist township officials in promoting healthy lifestyle assets to the community

*Desired Outcomes:*

- Reduced percentage of children (aged 10-17) who report a BMI of 30 or higher. *(TWC! District Wide outcome)*
- Community campaign implemented that promotes recreational facility use and increased physical activity – Includes an updated 'Let's Get Moving' brochure for Isabella Co. *(TWC! District Wide outcome)*
- Nutrition resource list posted on all HIP agency websites and disseminated to ICCC and HIP agencies, schools, faith communities, service clubs, etc.

*Current Resources in Isabella County:*

- Morey Courts
- Junior Achievement



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- McLaren Central Michigan/McLaren Fitness
- MidMichigan Health and Wellness Programs
- Gratiot-Isabella RESD; Area Schools
- 211

*Goal 2:* Utilize the 'Food Partners' committee (Healthy Food Network) to work toward the establishment of a county or regional Food Policy Council. As listed in the Together We Can District-Wide Plan)

*Objectives:*

- Present to Isabella Council of Governments (9-21-11). Seek potential members, generate contact list (Completed by Helen Lee and Jim Moreno)
- The strategic plan shall include creating action steps and a timeline for creating the Food Policy Council. Food Partners committee members

*Desired Outcomes:*

- Increase public awareness of the Farmers Markets, Community Gardens and easier access to stores and centers with healthy, fresh grown foods.
- Produce updated 'Isabella Co. Food Distribution Locations' pamphlet

*Current Resources in Isabella County:*

- Michigan State University Extension
- Isabella County Board of Commissioners
- Central Michigan District Health Department
- City of Mt. Pleasant
- Union Township
- Central Michigan University
- Isabella Co. Master Gardeners

### **Abusive/Controlling/Violent Behavior**

*Goal 1:* Advocate for the continuation of School Liaison Officer positions within Isabella county K-12 schools. (Formerly 6 officers, currently 2, moving towards 1)

*Objectives:*

- Research grant funding opportunities (Mike White - MSP)
- Write letters of support for the continuation of these positions (HIP members)

*Desired Outcomes*

- Increase school liaison officers to previous YSU levels

*Goal 2:* Conduct an assessment of what school districts and Jr. and Sr. High School buildings are currently doing regarding bullying and school violence.

*Objectives:*

- Create a detailed report/spreadsheet of anti-bullying initiatives in these schools
  - Develop a survey
  - Conduct the survey via telephone and/or e-mail



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- Analyze and compile survey data

*Desired Outcomes:*

- A detailed report/spreadsheet of anti-bullying initiatives in these Schools

*Current Resources in Isabella County:*

- Central Michigan District Health Department
- School districts – public and private
- Law enforcement agencies – school liaison officers
- County Board of Commissioners
- City of Mt. Pleasant
- Union Township
- Central Michigan University
- Saginaw Chippewa Indian Tribe

**Substance Abuse**

*Goal 1:* Create a permanent drop-off location for controlled substance/narcotic prescription disposal. (As listed in the Together We Can District-Wide Plan)

*Objectives:*

- Secure participation/buy-in from local law enforcement - Accomplished
- Secure a location at a local law enforcement building & create drop-off and disposal protocol - Accomplished
- Purchase and install a drop-off box – Accomplished October 2012
- Marketing and promotion – Ongoing/ Lead by 1016 Recovery Network & MSP
- Continue to raise awareness about the ‘National DEA Take Back Days’ - MSP

*Desired Outcomes:*

- Controlled substance/narcotic prescription disposal boxes in public safety buildings in Shepherd, Mount Pleasant, and Weidman

*Current Resources in Isabella County:*

- 1016 Recovery Network
- Law enforcement agencies in the county – MSP, City of Mt. Pleasant, Isabella County Sheriff Dept., Shepherd Police, CMU police, SCIT police

*Goal 2:* Organize and conduct a Drug Abuse Symposium in Isabella County

*Objectives:*

- The Substance Abuse Coalition (SAC) will plan the event
- Set date and location (early 2013/winter)
- Determine speakers, topics to cover and list of attendees

*Desired Outcomes:*

- An interactive evening that provides education on the impact of drugs/substances in our community, efforts to eliminate these harmful, even deadly substances, and partnering to curb these health problems

*Current Resources in Isabella County:*

- Substance Abuse Coalition (sub-committee of HIP)



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- Law enforcement agencies/MSP to take the lead
- 1016 Recovery Network – Lead for SAC
- County Prosecutor and County Courts
- County & City government/policymakers
- Families affected by drug abuse
- 211
- Faith Communities
- BAYANET
- McLaren CM
- MidMichigan Health
- Media outlets

### **Mental Health Issues**

*Goal:* Promote the Community Mental Health everyday walk-in program for increased utilization of CMH walk-in services for health ‘WISH’ (approximately twenty clients/week currently)

*Objectives:*

- Educate the general public and referral sources in Isabella county about the availability of free services – HIP promote
- Educate/raise awareness about PATH – 6 week curriculum – HIP promote

*Desired Outcomes:*

- A partnership will be established between the Free Clinic and Community Mental Health “WISH” to provide mental health services bi-monthly at the Free Clinic.

*Current Resources in Isabella County:*

- Community Mental Health for Central Michigan, McLaren Central Michigan

### **Maternal and Infant Health**

*Goal:* Assure all pregnancies result in healthy babies.

*Objectives:*

- Increase access to affordable and dependable transportation for WIC clients to get to their appointments at the health department
- Collaborate with HIP members to promote the WIC program to the community
- Develop a list/inventory of community programs that aim to assist pregnant moms with education and resources for a healthy pregnancy
- Develop a list/inventory of community programs and resources aimed at improving the health of babies and young children
- Encourage and promote smoke-free pregnancies

*Desired Outcomes:*

- Decreased rate of ‘no-shows’ in the WIC program at CMDHD
- The community is more aware of the resources for improving the health of pregnant moms, and of babies and young children



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*Current Resources in Isabella County:*

- HIP agencies and their websites where resources will be linked
- 211
- CMDHD – WIC, MIHP and smoking cessation programs
- County and City government/policymakers
- Isabella Co. Collaborative Council
- McLaren CM
- MidMichigan Health

**Reproductive and Sexual Health**

*Goal 1:* Educate the community, and particularly teens and young adults, to prevent unplanned pregnancies and to prevent/control the spread of sexually transmitted diseases and certain cancers.

*Objectives:*

- Submit a 2% grant to the Saginaw Chippewa Indian Tribe for STD and HIV testing & counseling in Isabella County, including on the campus of Central Michigan University (CMU) – CMDHD submitted in Aug. 2012, award announcements are made in Dec. 2012
- Offer STD and HIV testing & counseling at CMU to students – currently offered once per month
- Extend Central Michigan District Health Department Family Planning service hours for STD testing – Accomplished
- Provide education about HPV (human papillomavirus) to schools, ICCC member agencies, HIP member agencies, CMDHD clients, and to community members

*Desired Outcomes:*

- Increased number of STD and HIV tests being performed
- Increased number of pregnancy tests being performed
- Extended hour clinics are offered monthly where pregnancy prevention and HPV education is available, including HPV vaccinations

*Current Resources in Isabella County:*

- CMDHD
- CMU Health Services
- Saginaw Chippewa Indian Tribe
- Isabella Citizen's For Health, Inc. Board
- ICCC and HIP

**Lifestyle and Living Conditions**

*Goal:* Define and document physical areas of living condition concern in Isabella County

*Objectives:*

- *TRANSPORTATION* – Promote and help leverage resources for 'Rides That Run' (Kay Smith Family Fund of the Mt. Pleasant Area Community Foundation), a





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program to assist low-income, working DHS clients with auto repairs, so that they can continue to get to and from employment and remain self-sufficient

- Become educated and involved in the regional transportation network

### *Desired Outcomes:*

- Continued assessment and focus on transportation issues in Isabella County

### *Current Resources in Isabella County:*

- I-RIDE
- Isabella County Department of Human Services (DHS)
- County, City and Township governmental officials/policymakers

## **Environmental Issues**

*Goal:* To Maintain the quality physical environment of Isabella County.

### *Objectives:*

- Explore the possibility of a Groundwater stewardship program
- Encourage the development of pedestrian/bicycle master plan in the county

### *Desired Outcomes:*

- Maintain the high *county health rankings* status for physical environment

### *Current Resources in Isabella County:*

- CMU
- Saginaw Chippewa Indian Tribe – EH program
- CMDHD EH program
- County/City and Township government officials; and Citizens

## **Moving Forward**

The Isabella County Health Improvement Planning Working Group will develop action plans to implement the strategies to each of the objectives. The action plan for each of the strategies will include the steps required to implement the strategy and the timelines for each step, as well as those responsible for completing each step. At that point, the Health Improvement Planning Working Group will identify the additional facilitating stakeholders needed to accomplish the action plan and work to bring them into the process. The Isabella County Health Improvement Working Group will then move forward to implement the action plans so as to improve the overall health and promote the well-being of the community members in the county.

The Isabella County Health Improvement Working Group has brought together representatives from local and state government, social and health agencies and organizations, schools and school boards, business, law enforcement, and members of the public to address these issues. As the working group continues to address all of the health issues identified it will also continue to enlist the aid and services of those individuals and agencies who can best address the problems and bring resources to bear on providing solutions. Some of these goals can be accomplished in the short term, but many demand long term solutions and will not be accomplished overnight.



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We have set an ambitious agenda that depends on the continued interest and support of the working group members and members of the community.

This planning report represents just the start of our efforts to improve the health of the residents of Isabella County and will serve as our guide for actions in the short term and developing funding and sustainability in efforts in the long term. This is a repetitive process and as we measure and evaluate our progress in achieving our goals we will continue to revisit and address the remaining topic areas.



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## **Appendix A**

### **Isabella County Health Improvement Planning Milestones: Chronology**

#### **March 2010**

More than 100 people from the central Michigan counties of Arenac, Clare, Gladwin, Isabella, Osceola, and Roscommon attended the Public Health Summit on March 13.

#### **May 2010**

The first meeting of the Together We Can Advisory Committee was held on May 20. The Committee has continued to meet on the third Thursday of each month in Clare, Michigan. The group was renamed to the Together We Can Health Improvement Council in January 2011.

CMDHD released *A Healthy Community Together We Can! Information Compiled from the Central Michigan Public Health Summit on March 10, 2010*, a report of information compiled from the Public Health Summit, including the health issues identified by the summit participants as being of particular importance and potential strategies for addressing those issues.

CMDHD released *A Healthy Community Together We Can! County Health Rankings Information for the Central Michigan District Health Department Counties: Arenac, Clare, Gladwin, Isabella, Osceola and Roscommon* containing information compiled from the County Health Rankings, including the health indicators for each of the six counties within CMDHD's jurisdiction, as well as summary information for the six counties as a whole.

#### **August 2010**

CMDHD presented to the Isabella County Community Collaborative (ICCC) on August 6 providing information specific to the county from the County Health Rankings, the Community Health Status Indicators Report, and the Public Health Summit. The ICCC passed a motion to create the Isabella Health Improvement Planning Working Group.

#### **September 2010**

The first meeting of the Isabella Health Improvement Planning Working Group was held on September 10. The Working Group has continued to meet in Mt. Pleasant usually the first Friday of each month following the Isabella County Community Collaborative meeting.

#### **November 2010**

The Isabella County Health Issues Survey was conducted from November 9 through November 22.

#### **December 2010**

On December 3, based upon the results of the Health Issues Survey and additional input from the members of the Working Group, the Isabella Health Improvement Planning Working Group



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determined that the group's primary areas of focus (presented in prioritized order) will be: health services; nutrition and weight status; reproductive and sexual health; lifestyle and living conditions; abusive/controlling/violent behavior; maternal and infant health; environmental issues; substance abuse; and mental health issues

**January 2011**

Teams of Leaders (ToL) training was held on January 10 and 11 for the members of the Together We Can Advisory Council and other invited participants from the six counties within CMDHD's jurisdiction.

The ToL Team Launch for the Together We Can Advisory Council was held on January 12 and 13.

**February 2011**

At the regular February and March meetings of the Working Group specific objectives were identified for the area of Health Services. Increasing awareness of existing services and the need for preventative services was seen as the key objective in this topic area.

**March 2011**

The ToL Team Launch for the Isabella County Health Improvement Planning Working Group was held on March 30, 2011. This group worked on four of the major health topics to flesh out strategies and objectives, identify responsible champions within each area and start to map out next steps (Nutrition & Weight Status; Reproductive & Sexual Health, Violent Behavior, Mental Health).

**April 2011**

Public Health Summit 2 was held on April 14, 2011 at the Doherty Hotel in Clare. Input from the Isabella County and other county working groups was used to guide and inform discussion on health topics and areas for improvement.

**September 2011**

Isabella Citizens for Health received an \$80,000 federal planning grant to prepare an application for the creation of an FQCH in Isabella County.

Helen Lee and Jim Moreno presented to the Isabella County Council of Governments regarding establishing a regional food policy council.

**January 2012**

McLaren Central Michigan opened its weekly Free Clinic in the Central Michigan District Health Department Isabella County branch office.



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**February 2012**

The Central Michigan District Health Department's Community Health Assessment and Health Improvement Plan was released.

**April 2012**

Public Health Summit 3 was held on April 10, 2012 at the Comfort Inn & Suites in Mt. Pleasant. Input from the Roscommon County and other county working groups was used to guide and inform discussion on health topics and areas for improvement.

**June/July 2012**

Raised garden boxes were built and planted at the 1016 Inpatient Detox Center in Mount Pleasant, providing fresh vegetables and activities for patients.

**October 2012**

Isabella Citizens For Health secured a provider ID number and FQHC look-alike status and began the process for opening an FQHC Look-Alike medical clinic.

**November 2012**

The Isabella HIP Group finished developing their first draft of their goals/objectives for their county-specific health improvement plan.