



2016-2017 COMMUNITY ACTION PLAN

Henry Ford Allegiance Health Jackson, Michigan

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Executive Summary

To Our Community,

As a leader and supporter of our local Health Improvement Organization (HIO), it with great pleasure that Henry Ford Allegiance Health (HFAH) presents this summary version of our 2016-2017 Community Action Plan. The plan highlights the activities that Henry Ford Allegiance Health is championing to improve health and well-being of Jackson County residents. This plan reflects significant work of many dedicated organizations and individuals:

- Over 1200 Jackson County residents responded to our third Community Health Assessment phone survey or participated in focus group discussions to provide insight about local health status, attitudes, beliefs, behaviors and opportunities.
- More than 30 HIO Coordinating Council representatives from local government, public health, health care, school districts, mental health, employers and other human service sectors spent months reviewing local data, best practice research and community input to revise our Goals and Objectives for 2016-2017.
- Three existing community initiatives were voted into the Health Improvement Organization, resulting in seven Health Action Teams leading change around priority health issues.
- Henry Ford Allegiance Health, along with over 20 organizations including, and individuals stepped up to lead Health Action Teams and champion specific strategies.

In addition to topic-specific teams around improving nutrition, physical activity, smoke-free lifestyles, behavioral health, teen pregnancy prevention, maternal and child health, and substance abuse prevention, Henry Ford Allegiance Health supports the HIO with two cross-network initiatives. The Collaborative Council is a stakeholder group comprised of individuals from health, education, and financial stability. The Collaborative Council exists to coordinate the work of all strands and agencies to maximize efficiency across the community. The Community Engagement Committee is a partnership of the HIO and Cradle to Career, Jackson’s education network. Leaders from both initiatives recognized parallel goals to engage populations served and made the decision to combine efforts in order to maximize resources. Henry Ford Allegiance Health is proud to be an active partner in both stakeholder groups.

This ambitious plan would not be feasible without the time, expertise and commitment of our many partners and contributors; the progressive capacity of community leaders and funders to understand the immense potential of collective impact; and the support of Henry Ford Allegiance Health to maintain the HIO’s ‘backbone organization.’ For this work to be successful, we now need each of YOU to become champions of health improvement in your homes, neighborhoods, schools and worksites. As part of the broader Jackson 2020 initiative, we look forward to working together to transform Jackson County into a healthier place to live, work and play!

Amy Schultz, MD, MPH
Executive Director, Population Health
 Henry Ford Allegiance Health

W.A. Foote Memorial Health/Henry Ford Allegiance Health

Henry Ford Allegiance Health (HFAH) is a 475-bed health system in Jackson, Michigan. Henry Ford Allegiance Health is one of six hospitals in the Henry Ford Health System (HFHS) headquartered in Detroit, Michigan. HFHS is one of the nation's leading comprehensive, integrated health systems, recognized for clinical excellence and innovation.

Combining hospital-based care with a full range of services, Henry Ford Allegiance Health serves all members of our community. Henry Ford Allegiance Health is a leader in forming community partnerships which innovatively address wellness and preventative needs.

Henry Ford Allegiance Health complements traditional acute care services with mission-based services to support the care continuum for all members of the community. Through our Health Improvement Organization (HIO), HFAH is also a national leader in forming community partnerships that innovatively address wellness and prevention needs in the community.

PROGRESS FROM 2013-2016 COMMUNITY HEALTH ASSESSMENT

In 2013 as part of the collaborative Health Improvement Organization process (www.myhio.org), Henry Ford Allegiance Health (HFAH) completed a Community Health Needs Assessment with partners across Jackson County. After surveying community stakeholders and analyzing local health data, the following indicates the priority areas of focus for HFAH.

2013 CHNA IDENTIFIED PRIORITIES / GOALS

- Improve the knowledge, attitudes and behaviors of residents of Jackson County
- Reduce the obesity rate amongst Jackson County residents
- Reduce smoking rate and secondhand smoke exposure in Jackson County
- Improve the behavioral health and emotional wellness of Jackson County residents
- Enhance collaborative action planning, resource alignment, and linkages among clinical and social systems to achieve collective population health impact

While not every priority on the list is measurable, updated data indicates local improvement in a number of areas.

- Proportion of Jackson County residents that received advice about their weight from a health care provider increased from 27% in 2010 CHNA to 39% in 2013 CHNA and 42% in 2016 CHNA.
- Number of Jackson residents with low access to fresh food decreased from 19,000 to 12,000 from 2013 CHNA to 2016 CHNA.
- Proportion of smokers who report receiving advice from their provider to quit increased from 61% to 68% from 2013 CHNA to 2016 CHNA.
- Percent of adults who would 'definitely' seek professional help for a serious emotional problem increased from 54% to 63% from 2013 CHNA to 2016 CHNA.

In order to contribute to those improvements, HFAH championed several programs to make progress possible. Below is a description of the programs established/enhanced to achieve outcomes. The strategic plans that emerged from the CHNA and identified priority areas were formally adopted by the authorized body of the hospital facility, W.A. Foote Memorial Hospital d.b.a. Henry Ford Allegiance Health. For simplicity, this document will refer to W.A. Foote Memorial Hospital d.b.a Henry Ford Allegiance as simply Henry Ford Allegiance Health.

PRIORITY AREA	HFAH STRATEGY IMPLEMENTED
Obesity/ Nutrition	Build provider competency to address nutrition/weight issues including training such as motivational interviewing Expand local farmer's market capacity and accessibility, including onsite markets at access points such as HFAH, WIC, and EBT machines at farmer's markets
Tobacco Reduction	Provide tools and competency training to support consistent screening and effective referrals for patients and families in need of services for prevention/lifestyle management
Emotional Health	Build systems to support social and emotional health screening and referrals by primary care providers, including pediatricians Support integration of behavioral health social norming messages & promotion of community resources into wellness campaigns (www.mystepbystep.org)
Collaboration	Create a sustainable structure to provide ongoing support for collective impact networks (Jackson Collaborative Network)

About the Health Improvement Organization

The Health Improvement Organization Coordinating Council, founded by Henry Ford Allegiance Health, is a collaborative of community stakeholders committed to improving the health status of the community through an integrated health improvement infrastructure that addresses Jackson's priority health issues. The scope of responsibility includes monitoring community level indicators, identifying specific health priorities, and developing community action plans to address common goals.

This strategic plan outlines how W.A. Foote Memorial Hospital d.b.a Henry Ford Allegiance Health will address the priority health needs identified in the Community Health Needs Assessment (CHNA). For simplicity, this document will refer to W.A. Foote Memorial Hospital d.b.a Henry Ford Allegiance as simply Henry Ford Allegiance Health.

Strategies are executed in collaboration with community partners using the Collective Impact framework. This sophisticated style of collaboration increases the efficiency of all organizations, including Henry Ford Allegiance Health, in addressing the priority health needs of the population.

COLLECTIVE IMPACT

Collective Impact is an evidence-based model of how diverse organizations can work together effectively to solve complex social problems. In the Collective Impact model, a backbone organization is needed to facilitate and oversee the collective impact initiative in the community. The backbone organization requires a dedicated staff that can plan, manage, and support the initiative through ongoing facilitation, technology and communications support, data collection and reporting, and administrative details needed for the initiative to function smoothly.

Henry Ford Allegiance Health supports the backbone organization of the Health Improvement Organization. This team is housed within the Department of Prevention and Community Health. **Through Henry Ford Allegiance Health's support, the backbone organization staff pursues six common activities to support and facilitate collective impact:**

1. Guide vision and strategy
2. Support aligned activities
3. Establish shared measurement practices
4. Build public will
5. Advance policy
6. Mobilize funding

The goals, objectives, and strategies detailed in the HIO Community Action Plan serve as a guide for Henry Ford Allegiance Health, Jackson Health Network and the other participating organizations. Due to strong alignment of community health goals, leadership across Jackson's health and human service continuum have committed to the successful implementation of the HIO Community Action Plan. Henry Ford Allegiance Health, the Jackson County Health Department, United Way of Jackson County, as well as 45 other community organizations, have each devoted significant human and/or financial resources to this process to date and are committed to these efforts over the long term. Successful implementation of the plan can only be achieved through the combined activities of various stakeholder groups. Everyone involved in the work will focus their various strengths, resources, areas of expertise and target populations to achieving specific strategies of the action plan.

The Plan/Process

Henry Ford Allegiance Health's work with the Health Improvement Organization's work over the past several months has culminated in the creation of an updated HIO Community Action Plan, which includes goals, objectives and strategies to address the needs of the Henry Ford Allegiance Health population in Jackson County based on the following data-driven processes:

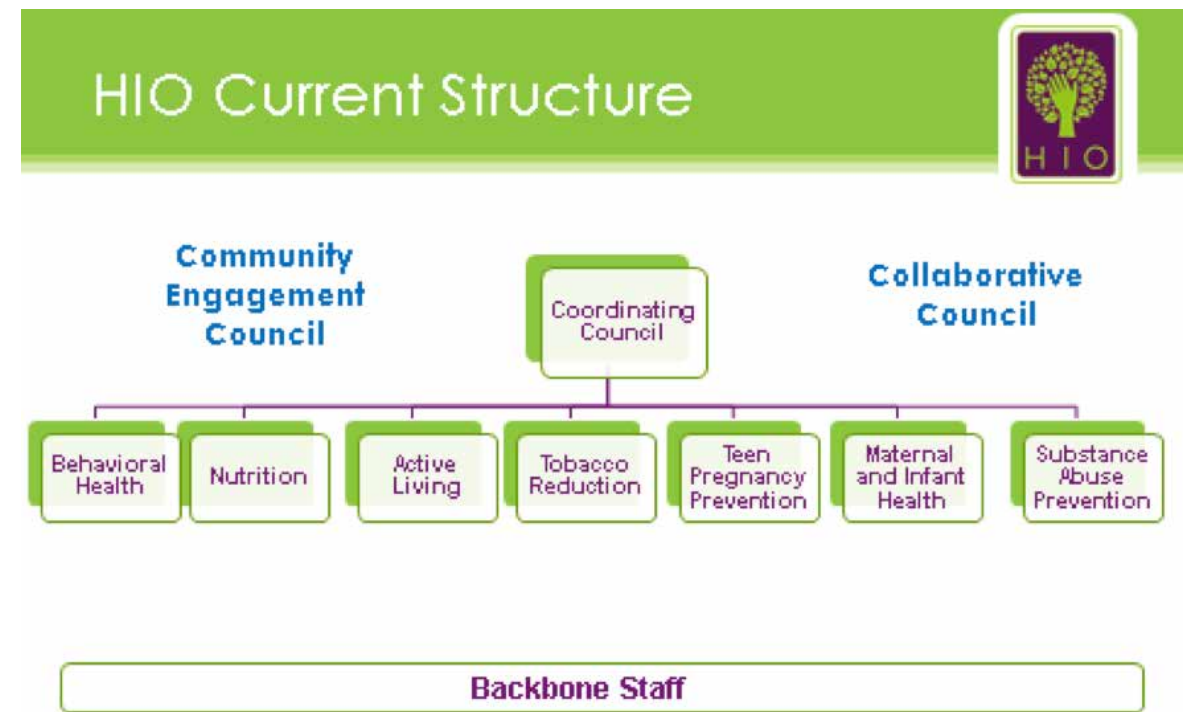
- Collection and review of data on local disease and risk prevalence, access barriers, health experience and disparities
- Collection and review of data from the current and previous Community Health Assessments
- Evaluation of existing strategies, gaps and best practice approaches
- Input from community members on needs and barriers relating to health in Jackson

In this model, Henry Ford Allegiance Health worked with community stakeholders worked to develop and complete a Community Health Assessment for Jackson County. This assessment aligns efforts among community partners and creates a more strategic framework for local health improvement activities. The most recent Community Health Assessment survey was conducted from May 2014 to August 2014. A total of 1,205 Jackson County residents ages 18 and older responded to a 177 question phone survey asking about their health status, insurance coverage, personal health habits and health care experiences. The geographical area of Jackson County was chosen as the target population for the Community Health Needs Assessment. This physical area not only represents the majority of patients that are treated across all Henry Ford Allegiance Health facilities, but it is also explicitly identified in the Henry Ford Allegiance Health vision to establish Jackson County as Michigan's healthiest community. In addition to the survey, the HIO conducted an extensive review of data from various secondary sources. Below are some selected findings from the 2014-2015 Community Health Assessment. Additional findings are presented throughout the document.

- Approximately 30% of all Jackson County residents smoke cigarettes. Among residents who live in the City of Jackson, the percent increases to 36%. Both rates are higher than the State of Michigan rate of 21% (2013).
- Among Jackson County residents, 40% are classified as obese, which is higher than the State of Michigan rate of 32% (2013).
- About 59% of residents report feeling worried, tense, or anxious within the past 30 days.
- Among Jackson County residents, 28% meet guidelines for physical activity, which is better than the State rate of 20%, and 10% meet the guidelines for fruit and vegetable consumption.
- About 31% of mothers that delivered babies in Jackson County report smoking during pregnancy.

After reviewing the data, priority health issues were identified and the Henry Ford Allegiance Health Community Health Plan was created detailing the ways that organizations and community members can address these issues to improve the health of Jackson County. In addition to the phone survey, qualitative information was also gathered through focus groups and system scans held throughout the community. This method of going into the community to gather input allowed us to ensure that the perspectives and opinions of traditionally marginalized populations were included in our analysis. Focus groups were also held in areas of Jackson County that are defined as low-income in which residents are at high-risk for negative health outcomes. Populations that are traditionally underserved by formal healthcare systems were prioritized for sessions.

The Henry Ford Allegiance Health Community Action Plan's detailed strategies are built on evidence-based activities and input from experts within each respective field. In an effort to combine resources and promote collaboration, these experts were brought together into groups respective to their fields of practice or interests. These groups are referred to as Health Action Teams (HATs). Henry Ford Allegiance Health is represented within each of the Health Action Teams, which were created in response to specific areas of concern or areas in need of enhancement in the community. These priority areas set the basis for the goals of the Henry Ford Allegiance Health Community Action Plan. Ultimately, Henry Ford Allegiance Health, along with the Health Action Teams, were responsible for the creation of the objectives and strategies detailed within the Community Action Plan. Using process and outcomes measures, Henry Ford Allegiance Health and each Health Action Team is responsible for monitoring and evaluating the success of their strategies.



Current Health Improvement Organization Partners

- | | | |
|---|---|--|
| 4th Circuit Court - Jackson County | Highfields, Inc. | March of Dimes |
| AARP | Home of New Vision | Marriage Matters Jackson |
| Arbor Hills Psychological Services | Integro, LLC | Meridian Health Plan |
| Big Brothers Big Sisters of Jackson County | Jackson Community Food Pantry | Michigan Department of Health and Human Services |
| Blackman-Leoni Township Public Safety | Jackson Community Foundation | Michigan State Police |
| Catholic Charities of Jackson, Lenawee & Hillsdale Counties | Jackson County Administration | Michigan State University Extension |
| Center for Family Health | Jackson County Chamber of Commerce | Mid State Health Network |
| Central Michigan 211 | Jackson County Health Department | Planned Parenthood |
| Community Action Agency | Jackson County Intermediate School District | Region 2 Area Agency on Aging |
| Community Members | Jackson District Library | Region 2 Planning Commission |
| Family Services & Children's Aid | Jackson County Office of the Sheriff | Segue Inc. |
| Great Start Collaborative of Jackson County | Jackson Health Network | Region 9 Michigan Works |
| Henry Ford Allegiance CareLink | Jackson Police Department | Together We Can Make a Difference |
| Henry Ford Allegiance Health | Jackson YMCA | United Way of Jackson County |
| | LifeWays Community Mental Health | Western Option High School |
| | | YMCA Storer Camps |



GOAL 1: Reduce the obesity rate amongst Jackson County residents to be at or lower than the national average

Obesity is a national epidemic. Seven out of ten Jackson residents are overweight or obese. Additionally, the obesity rate for Jackson County (40%) is greater than the State of Michigan rate (32%) and the United States rate (28%).

Being obese can lead to negative health consequences such as heart disease, type 2 diabetes, high blood pressure, and osteoarthritis. To reduce the prevalence of obesity, the HIO strives to create and implement policy, system and environmental changes that support and sustain overall health improvement for all Jackson County residents.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Only 28% of Jackson County residents meet the national guidelines for physical activity
- Only 10% of Jackson County residents meet the national guidelines for fruit and vegetable consumption
- According to the 2013-2014 Michigan Profile for Healthy Youth (MIPHY), 66% of middle school and 59% of high school students in Jackson County meet the national guidelines for physical activity
- According to the 2013-2014 MIPHY, 30% of middle school and 23% of high school students in Jackson County meet the national guidelines for nutrition

OBJECTIVES	SOURCE	CURRENT	TARGET
1.1: Increase by 10% the average daily fruit and vegetable consumption among Jackson adults	Community Health Assessment	2.71 servings	2.98 servings
1.2: Increase by 10% of Jackson middle/high school students who meet recommendations for fruit and vegetable intake	MIPHY (MS)	30.1%	33.0%
	MIPHY (HS)	22.8%	25.1%
1.3: Decrease by 10% the proportion of Jackson residents with low access to fresh foods	Community Health Assessment	19,000 residents	17,000 residents
1.4: Reduce by 10% the proportion of enrolled children (ages 2-4) in Women, Infants and Children program (WIC) with age/gender body mass index above 85th percentile	WIC	37.1%	33.4%
1.5: Decrease by 10% the proportion of Jackson residents that report watching 5 or more hours of television daily	Community Health Assessment	24.7%	22.23
1.6: Increase by 10% the proportion of Jackson residents that feel sidewalks in their neighborhood are adequate	Community Health Assessment	70.8%	77.8%
1.7: Increase by 10% the proportion of Jackson residents that report using walking trails, bicycle paths, or bike trails	Community Health Assessment	24.1%	26.5%
	Community Health Assessment - Walking Trails	17.0%	18.7%
1.8: Increase by 10% the proportion of Jackson residents that report obtaining physical activity information from a healthcare provider	Community Health Assessment - Bicycle paths or trails	23.7%	26.1%

STRATEGIES

CHAMPION

1.a: Advocate for nutrition policies and initiatives in schools, workplaces, community events, and places of worship

JACKSON COUNTY HEALTH DEPARTMENT

1.b: Expand offerings of fruits and vegetables and nutrition education through food pantries

MICHIGAN STATE UNIVERSITY EXTENSION

1.c: Expand local farmer's market sales through increasing capacity and accessibility

HENRY FORD ALLEGIANCE HEALTH (HFAH)

1.d: Assess current nutrition and food landscape in Jackson County

MICHIGAN STATE UNIVERSITY EXTENSION

1.e: Build provider competency to address active living/weight issues including training such as motivational interviewing and Exercise is Medicine

JACKSON HEALTH NETWORK (HFAH)

1.f: Advocate for and participate in the development of a non-motorized transportation plan for Jackson County

REGION 2 PLANNING COMMISSION

1.g: Support events, campaigns, and initiatives that promote use of local resources like trails and parks

JACKSON COUNTY HEALTH DEPARTMENT

Details and Methods

1.c: EXPAND LOCAL FARMER'S MARKET SALES THROUGH INCREASING CAPACITY AND ACCESSIBILITY

Residents in certain geographic areas of Jackson County are less likely to report access to fresh and affordable produce.

Supermarkets and full-service grocery stores typically have a larger selection of healthy food (e.g., fruits and vegetables) at lower prices compared with smaller grocery stores and convenience stores

Research has shown four ways in which grocery store based interventions can potentially increase fruit and vegetable consumption:

1. Point of purchase signage and information
2. Reduced prices and coupons
3. Increased availability, variety and convenience
4. Promotion and advertising

However, research suggests that low-income, minority and rural communities have fewer supermarkets as compared with more affluent areas. Strategies to improve the affordability of healthier foods and beverages in lower accessibility areas include lowering prices of healthier foods and beverages and providing discount coupons, voucher, and bonuses; and reducing costs of fresh foods by purchasing food directly from local farmers markets (i.e., through farmer's markets).

Financial incentives to food retailers, such as tax benefits and discounts, loans, loan guarantees and grants to cover start-up and investment costs can be offered to encourage opening new retail outlets in areas with limited shopping options. Additionally, incentives to integrate healthier food options into existing corner and convenience stores will increase access to underserved populations.

Like community gardens, local farmers' markets provide fresh produce to community residents. They can also support small farmers, serve as community gathering places, and revitalize community centers and downtown areas. Studies have shown that farmers' markets that partner with human service agencies can increase the use of farmers' markets by low income and elderly populations through promotion and incentive programs.

GOAL 2: Reduce smoking rate and secondhand smoke exposure in Jackson County

Smoking cigarettes has devastating effects on the health of those who choose to smoke, as well as individuals who passively inhale secondhand smoke. The smoke produced by the end of a cigarette, pipe, or cigar that is inhaled as secondhand smoke has thousands of chemical substances, several of which are known to cause cancer in humans and animals. For individuals with asthma, exposure to cigarette smoke can trigger asthma episodes and increase the severity of attacks. Additionally, smokers have an increased risk of heart disease and stroke compared to non-smokers.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Approximately 36% of city residents reported smoking compared to 30% of Jackson County residents
- Among residents who do smoke in Jackson, 63% report stopping for one day or longer within the past 12 months in an attempt to quit smoking
- Approximately 31% of the women who deliver babies at Henry Ford Allegiance Health report smoking during the three months prior to pregnancy

OBJECTIVES	SOURCE	CURRENT	TARGET
2.1: Increase by at least 10% the proportion of Jackson adults who identify resources for smoking cessation	Community Health Assessment	50.4%	55.4%
2.2: Increase by 10% the proportion of smokers who report receiving advice from their provider to quit	Community Health Assessment	67.8%	74.6%
2.3: Reduce by 10% the proportion of Jackson adults and youth who report exposure to secondhand smoke	Community Health Assessment	38.9%	35.0%
	MIPHY (MS)	55.0%	49.5%
	MIPHY (HS)	58.1%	52.3%

STRATEGIES

CHAMPION

2.a: Work with providers to implement evidence based tobacco use treatment model policies that support consistent screening and effective referrals for patients and families in need of services for prevention/lifestyle management

JACKSON HEALTH NETWORK (HFAH)

2.b: Advocate for tobacco policies and initiatives in parks, housing units, and other establishments not regulated

JACKSON COUNTY HEALTH DEPARTMENT

2.c: Build local capacity for teen-specific tobacco interventions

JACKSON COUNTY INTERMEDIATE SCHOOL DISTRICT

2.d: Raise awareness of harmful effects of secondhand smoke

JACKSON COUNTY HEALTH DEPARTMENT

2.e: Identify current tobacco cessation resources and assess under-served populations in the community

JACKSON COUNTY HEALTH DEPARTMENT

GOAL 3: Improve the behavioral health and emotional wellness of Jackson County residents

Behavioral health is used to describe an individual's level of cognitive or emotional well-being. Maintaining a positive state of mind is known to enable a person to function effectively within society and improve physical health. Individuals who have good behavioral health are well-adjusted to society, are able to relate well to others, and feel satisfied with their role within their community. Breakdown of behavioral health can cause serious problems among individuals within their relationships, physical health and jobs.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Relevant Community Health Assessment statistics
- About 19% of residents reported limitation in the past 30 days due to a behavioral health condition
- About 63% of respondents reported that they would 'definitely' seek help for a serious emotional problem
- According to the 2013-2014 Michigan Profile for Healthy Youth (MIPHY), 40% of middle school and 26% of high school students in Jackson County have reported being bullied on school property
- According to the 2013-2014 Michigan Profile for Healthy Youth (MIPHY), 22% of middle school and 19% of high school students in Jackson County have reported being electronically bullied

OBJECTIVES	SOURCE	CURRENT	TARGET
2.1: Increase by at least 10% the proportion of Jackson adults who identify resources for smoking cessation	Community Health Assessment	50.4%	55.4%
2.2: Increase by 10% the proportion of smokers who report receiving advice from their provider to quit	Community Health Assessment	67.8%	74.6%
2.3: Reduce by 10% the proportion of Jackson adults and youth who report exposure to secondhand smoke	Community Health Assessment	38.9%	35.0%
	MIPHY (MS)	55.0%	49.5%
	MIPHY (HS)	58.1%	52.3%

STRATEGIES

CHAMPION

3.a: Assess community capacity to provide resources and referrals for behavioral health needs

JACKSON COUNTY HEALTH DEPARTMENT

3.b: Implement a process for child and youth screening and referral for trauma and chronic stress

FAMILY SERVICE AND CHILDREN'S AID

3.c: Support social and emotional screening and referrals by primary care providers, including pediatricians

JACKSON HEALTH NETWORK (HFAH)

3.d: Work with employers to promote emotionally healthy worksite practices and policies

LIFEWAYS COMMUNITY MENTAL HEALTH

3.e: Support integration of behavioral health social norming messages and promotion of community resources into media campaigns

HENRY FORD ALLEGIANCE HEALTH

3.f: Collaborate with Project AWARE to collect data on current strategies related to objective three

LIFEWAYS COMMUNITY MENTAL HEALTH

Details and Methods

3.e: SUPPORT INTEGRATION OF BEHAVIORAL HEALTH SOCIAL NORMING MESSAGES AND PROMOTION OF COMMUNITY RESOURCES INTO MEDIA CAMPAIGNS

The first step in implementation of this strategy is the public release of the plan created by Henry Ford Allegiance Health and the HIO Coordination Council, to introduce the components of the plan to local businesses and organizations. Following a public release of the plan, Henry Ford Allegiance Health, with the HIO, will use a coordinated brand/campaign to promote consumer-directed norming messages related to behavioral health. The campaign will promote healthy lifestyle messages.

This strategy will expand the capacity of local organizations, such as employers, schools, churches, WIC, child care settings, medical providers, etc., to implement activities (including healthy fundraisers and support groups) that promote good behavioral health.

This strategy will also focus on developing outreach systems that promote "word of mouth" education among less formal social networks through neighborhood-based approaches. Examples of this type of outreach include the use of community volunteers/advocates/health workers and dissemination of messages/information through neighborhood associations, barber shops, food banks, etc.

This strategy will also focus on promoting Healthy Work Environments. This program, provided by the Michigan Departments of Community Health, has compiled recommendations of worksite health promotion policies. These are ongoing, sustainable policies that will promote a healthier work environment and a healthier workforce. Recommended policies include offering flexible work hours to promote physical activity during the day, support of walking breaks or walk and talk meetings, and the provision of employee assistance programs.

GOAL 4: Reduce the Jackson County Teen Pregnancy rate to be at or lower than the state rate

Young people between the ages of 10 and 19 years establish patterns of behavior and make lifestyle choices that have long-standing benefits or consequences. Adolescent pregnancy is a significant public health problem. This often results in lost social, educational and vocational opportunities, perpetual poverty and dependence on public income maintenance and health programs for both parents and children. Teen mothers are more likely than older moms to receive late or no prenatal care, compromising the health of mothers and newborns. Infants born to teen mothers are at higher risk for low birth weight, infant morbidity and mortality, and are at greater risk for child abuse and child safety issues. Young fathers are less likely to marry the mothers of their children and more likely to have lower educational attainment and earnings, which hurts their children's chances of success.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Jackson County's teen pregnancy rate in 2012 was 47 pregnancies per 1,000 females aged 15-19, while the Michigan rate was 45.5
- According to the 2013-2014 Michigan Profile for Healthy Youth (MIPHY), 34% of high school students reported ever having sexual intercourse

OBJECTIVES	SOURCE	CURRENT	TARGET
4.1: Decrease by 10% the proportion of sexually active teens in 7th, 9th, and 11th grades	MIPHY (MS)	6.0%	33.0%
	MIPHY (HS)	33.7%	25.1%
4.2: Increase by 10% the proportion of sexually active teens who report using condoms or birth control pills	MIPHY	68.5%	17,000 residents
4.3: Establish a baseline and increase the number of youth between the ages of 12-17 in the JHN who have been assessed for risk of pregnancy/STIs in the past 12 months	JHN	TBD	33.4%
4.4 Increase by 10% the number of parents/caregivers who have talked with their child about sexual health	MIPHY	59.1%	22.23
4.5 Increase by 10% parents' comfort level in talking with their children about adolescent sexual health	Talk Early Talk Often Pre/Post Tests	Pretest average	77.8%
4.6 Establish baseline and increase by 20% funding to implement evidence-based adolescent sexual health programs	TBD	TBD	26.5% 18.7%
4.7 Reduce the by 10% Jackson County Chlamydia and Gonorrhea rates among teens.	MDHHS (Chlamydia)	1825.3 per 100,000 15-19 year olds	1642.7 per 100,000 15-19 year olds
	MDHHS (Gonorrhea)	69.2 per 100,000 15-19 year olds	62.3 per 100,000 15-19 year olds

STRATEGIES

CHAMPION

4.a: Secure on-going funding for TPPI coordination and evidence based/promising practices

JACKSON COUNTY HEALTH DEPARTMENT

4.b: Implement TOP, Get REAL, and puberty/healthy relationship programs to targeted populations in Jackson County

JACKSON COUNTY HEALTH DEPARTMENT

4.c: Collaborate with the Maternal and Child Health Action Team and JHN for clinical-community services integration to implement metrics and systems to improve adolescent sexual health

CENTER FOR FAMILY HEALTH

4.d: Expand access to information regarding TPPI programs and adolescent sexual health topics to teens, parents and the community at large

JACKSON COUNTY HEALTH DEPARTMENT

4.e: Implement parent education programs to improve communication skills regarding sexuality education and to foster parent/child connectedness

JACKSON COUNTY HEALTH DEPARTMENT

GOAL 5: Decrease infant mortality rates in Jackson County

Maternal and child health indicators are important in gaining a full understanding of a community's health. The infant mortality rate (death of a child before their first birthday) is the number of infant deaths for every 1,000 live births. This rate is often used as an indicator to measure the health and well-being of a community.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Jackson's infant mortality rate was 7.2 infant deaths per 1,000 live births in 2008, 6.0 in 2011, and 3.9 in 2012
- From 2008-2010 African American infants were 2.3 times more likely to die before their first birthday than Caucasian infants
- In 2013, 8% of births in Jackson County were categorized as low birth weight and 2% very low birth weight

OBJECTIVES	SOURCE	CURRENT	TARGET
5.1: Establish baseline and decrease by 10% the proportion of unintended pregnancies in Jackson County	MCHAT Prenatal Survey	TBD	TBD
5.2: Establish baseline and increase by 10% the proportion of women aged 18 and older in Jackson Health Network who have been assessed for risk for unintended pregnancy in the past 12 months	JHN	TBD	TBD
5.3: Establish baseline and increase by 10% the proportion of youth between the age of 12 and 17 in JHN who have been assessed for risk of pregnancy in the past 12 months	JHN	TBD	TND
5.4 Increase by 10% the proportion of pregnant women who receive adequate prenatal care according to the Kessner index	MDHHS	68.5%	75.6%
5.5 Increase by 10% the proportion of pregnant women who enter into prenatal care in the first trimester	MDHHS	72.2%	79.4%
5.6 Establish baseline and increase by 10% the proportion of obstetric practices in Jackson County with standardized assessment and referral practices for social needs/services	JHN	TBD	TBD
5.7 Establish baseline and decrease by 10% the proportion of women who report smoking during pregnancy	MCHAT Prenatal Survey	TBD	TBD
5.8 Establish baseline and increase by 10% the proportion of women who received a postpartum visit on or between 21 and 56 days after delivery	JHN	TBD	TBD
5.9 Decrease by 10% the proportion of infant deaths caused by positional asphyxia	FIMR	17.0%	15.3%

STRATEGIES

CHAMPION

5.a: Establish intergrated systems that connect families to needed services and care such as transportation, Medicaid, MIHP, contraception, prenatal or safe sleep education, etc.

JACKSON COUNTY HEALTH DEPARTMENT

5.b: Work with providers to implement systems, metrics, and provider trainings related to assessment and referral for social needs such as transportation, smoking cessation, etc.

JACKSON HEALTH NETWORK (HFAH)
CENTER FOR FAMILY HEALTH

5.c: Assess processes in provider settings around meeting postpartum appointments

HENRY FORD ALLEGIANCE HEALTH
CENTER FOR FAMILY HEALTH

5.d: Establish cost effective and sustainable way to continue distribution of SleepSacks abd safe sleep education to new moms at discharge

JACKSON COUNTY HEALTH DEPARTMENT

5.e: Train grandparents and other caregivers and stakeholders on safe sleep practices

JACKSON COUNTY HEALTH DEPARTMENT

Details and Methods

5.c: ASSESS PROCESSES IN PROVIDER SETTINGS AROUND MEETING POSTPARTUM APPOINTMENTS

Too frequently women in Jackson County do not follow up with their postpartum appointments. Capacity must be built among local providers to build methods to teach women about the importance of these appointments and to encourage and support in keeping them. This strategy involves expanding the capacity of local providers to consistently implement high-quality practices recommended by national best practice standards to ensure that women consistently attend their postpartum appointments.

One mechanism to support this could be integration of templates that support standard protocols for screening and referral into the Jackson Community Medical Record. Integrating protocols and workflow into the electronic medical record used by many of our Jackson County primary care offices will increase the likelihood that women will follow recommend best-practice care plans.

GOAL 6: Decrease substance use initiation, dependence and abuse among Jackson County youth and adults

A comprehensive approach to health includes substance abuse prevention on the continuum of care. Substance use disorders impact the health of individuals, their families and their communities. Substance abuse prevention and early intervention strategies reduce the impact of behavioral health conditions in the community.

RELEVANT COMMUNITY HEALTH ASSESSMENT STATISTICS

- Based on 2013-2014 MIPHY data, 44% of Jackson County high school students report drinking alcohol
- Based on 2013-2014 MIPHY data, 5% of middle school students and 19% of high school students in Jackson County report using marijuana
- 46% of Jackson County residents drink alcohol, 30% smoke tobacco, and 18% use marijuana or hashish

OBJECTIVES	SOURCE	CURRENT	TARGET
Decrease by 10% the proportion of Jackson County residents that use marijuana or hashish	CHA	17.9%	16.1%
Decrease by 10% the proportion of Jackson County residents that report ever using prescription pain relievers not prescribed or taken only for the feeling it caused	CHA	5.7%	5.1%
Decrease by 10% the proportion of Jackson County residents that report binge drinking	CHA	14.1%	12.7%
Increase the by 2% the proportion Jackson County 7th grade students who think few (1-10%) of the students in their grade used marijuana in the past month	MIPHY	22.5%	22.9%
Increase by 2% the proportion of Jackson County 7th grade students perception of using prescription drugs not prescribed to them, to be at moderate or great risk	MIPHY	74.2%	75.7%
Increase by 2% the proportion Jackson County 7th grade students' perception of alcohol use (taking 1 or 2 drinks of an alcoholic beverage nearly every day) to be at moderate or great risk	MIPHY	58.8%	59.9%
Increase by 2% the proportion of Jackson County 7th graders who report regular cigarette use to be a moderate or great risk	MIPHY	78.9%	80.5%

STRATEGIES

CHAMPION

6.a: Work with healthcare facilities countywide to implement appropriate prevention tools (e.g., Screening, Brief Intervention and Referral to Treatment (SBIRT))

JACKSON HEALTH NETWORK (HFAH)

6.b: Provide prevention education and training opportunities for local SUD providers

HENRY FORD ALLEGIANCE HEALTH

6.c: Integrate SUD prevention messaging with co-occurring disorders and suicide prevention programming

LIFEWAYS COMMUNITY MENTAL HEALTH

6.d: Continue working with local youth to enhance and implement Most Teens Don't social-norming marketing campaign

HENRY FORD ALLEGIANCE HEALTH

6.e: Provide Breakout classroom based drug prevention education

FAMILY SERVICES AND CHILDREN'S AID

6.f: Match youth at risk with mentors in the Children of Promise Excel program (Big Brothers Big Sisters)

BIG BROTHERS BIG SISTERS

6.g: Distribute tobacco and alcohol vendor education packets to Jackson County vendors and implement required Synar checks as determined by the State of Michigan in fulfillment of the Designated Youth Tobacco Use Representation (DYTUR)

HENRY FORD ALLEGIANCE HEALTH

6.h: Identify a process for creating new location in Jackson County for proper drug disposal drop off locations and promote existing locations

JACKSON COUNTY HEALTH DEPARTMENT

6.i: Host annual drug summit on heroin and prescription drugs with qualified presenters

JACKSON COUNTY PROSECUTOR'S OFFICE

6.j: Participate in local events and campaigns to promote JCSAPC and to change community attitudes and beliefs regarding substances

HENRY FORD ALLEGIANCE HEALTH

Details and Methods

6.b: PROVIDE PREVENTION EDUCATION AND TRAINING OPPORTUNITIES FOR LOCAL SUD PROVIDERS

It's important for clinicians to ask the patients if he or she uses substances, advise him or her to quit, and assess willingness to make a quit attempt. One action step to improve consistency of screening and intervention is to integrate a standard protocol for assessment and referral into the Jackson community Medical Record. By integrating a screening and referral system into electronic medical records, it is possible to increase the number of tobacco users who receive advice from their clinicians.

6.d: CONTINUE WORKING WITH LOCAL YOUTH TO ENHANCE AND IMPLEMENT MOST TEENS DON'T SOCIAL-NORMING MARKETING CAMPAIGN

Most Teens Don't is a social marketing campaign to affect social norming by informing students and adults in Jackson County about the smart choices that most teenagers are making in terms risky behaviors. Covering topics like marijuana, alcohol, sex and bullying, Most Teens Don't uses messaging as well as student ambassadors to get the message out in their schools.

6.g: DISTRIBUTE TOBACCO AND ALCOHOL VENDOR EDUCATION PACKETS TO JACKSON COUNTY VENDORS AND IMPLEMENT REQUIRED SYNAR CHECKS AS DETERMINED BY THE STATE OF MICHIGAN IN FULFILLMENT OF THE DESIGNATED YOUTH TOBACCO USE REPRESENTATION (DYTUR)

The Synar Amendment of 1992 requires that states enact and enforce laws to prevent minors from purchasing tobacco products. In Jackson County, these Synar activities are the only checks done on tobacco vendors relating to sales to minors. Of the approximately 150 vendors in the county, 4-12 are chosen each year by the state to be checked. These checks carry no fine for vendors who are found to not be in compliance. Additional funding and support will be required before a more comprehensive check system to establish a community baseline on vendor compliance is possible.

In 2001, Suffolk County, New York mandated a Tobacco Vendor Education Program for all licensed tobacco vendors in the country. Under the mandate, all licensed tobacco vendor receive education about the public health implication of experimenting with tobacco during childhood and the strict penalties for selling tobacco to minors. By education vendors about the implications of tobacco use, the country hoped to motivate tobacco vendors to help keep tobacco out of the hands of minors. From 2000 to 2009, the proportion of the country's tobacco vendors found to be in compliance with the law rose from 86 to 98 percent. The National Association of County and City Health Officials (NACCHO) deemed this a promising practice for tobacco control.

The Centers for Disease Control and Prevention has identified six elements for a comprehensive tobacco control program. Among these elements is the enforcement of existing laws through compliance checks. In 2002, the Southwest Utah Public Health Department implemented a Tobacco Control Compliance Check Program. Vendors participating in the program receive education about how to be compliant with regulations, and are evaluated quarterly for compliance. In 2001, the tobacco buy rate for minors in the program's coverage area was over 20 percent. Since the program was implemented, the tobacco buy rate for minors is now at less than 4 percent. NACCHO has deemed this a model practice for tobacco control.

6.j: PARTICIPATE IN LOCAL EVENTS AND CAMPAIGNS TO PROMOTE JCSAPC AND TO CHANGE COMMUNITY ATTITUDES AND BELIEFS REGARDING SUBSTANCES

The first step in implementation of this strategy is the public release of the plan created by Henry Ford Allegiance Health and the HIO Coordination Council, to introduce the components of the plan to local businesses and organizations. Following a public release of the plan, Henry Ford Allegiance Health, with the HIO, will use a coordinated brand/campaign to promote consumer-directed norming messages related to substance use and abuse. The campaign will promote healthy lifestyle messages.

This strategy will expand the capacity of local organizations, such as employers, schools, churches, WIC, child care settings, medical providers, etc., to implement activities (including healthy fundraisers and support groups) that promote healthy behaviors relating to substance use.

This strategy will also focus on developing outreach systems that promote "word of mouth" education among less formal social networks through neighborhood-based approaches. Examples of this type of outreach include the use of community volunteers/advocates/health workers and dissemination of messages/information through neighborhood associations, barber shops, food banks, etc.

This strategy will also focus on promoting Healthy Work Environments. This program, provided by the Michigan Departments of Community Health, has compiled recommendations of worksite health promotion policies. These are ongoing, sustainable policies that will promote a healthier work environment and a healthier workforce. Recommended policies include offering flexible work hours to promote physical activity during the day, support of walking breaks or walk and talk meetings, and the provision of employee assistance programs.

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