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McClaren
CENTRAL MICHIGAN

COMMUNITY HEALTH
NEEDS ASSESSMENT

EXECUTIVE SUMMARY



We are excited to present our findings from our 2019 Community Health Needs Assessment. McLaren Central Michigan has been working with a regional collaboration known as MiThrive to complete a comprehensive assessment of needs in northern Michigan communities. 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. The full regional assessment encompassed 31 counties, and over 150 organizations participated in some aspect of the Community Health Needs Assessment process. This report focuses on the needs of Isabella and Clare counties.

Data was collected in the following ways: compiling existing statistics; hearing from

residents; learning from groups of community organizations; and surveying health care providers and community members. We then identified two major priorities for our region: mental health/substance abuse and basic needs of living. Additionally, we identified three other strategic issues and two significant goals for our planning process. These additional strategic issues include: access to health care, sense of community, and risks for leading causes of death. The goals for the planning process include cross-sector collaboration and community representation. This 2019 Community Health Needs Assessment (CHNA), which was adopted by the Board of Trustees on September 25, 2019 incorporates requirements of the Patient Protection and Affordable Care Act of 2010.

INTRODUCTION

Mission Review - 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.

MiThrive Partnership

Our continued commitment to our mission of 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. For the 2019 Community Health Needs Assessment, this commitment is evident in our participation in MiThrive, a regional, collaborative project designed to bring together dozens of organizations across 31 counties of northern Michigan to identify local needs and work together to improve our communities. Where we live, learn, work, and play powerfully influences our health. Improving community health requires a broad focus and coordination among diverse agencies and stakeholders.

The goal is to continue to build new partnerships and gather input from more organizations and residents. Our CHNA represents a collaborative, community-based approach to identify, assess,

and prioritize the most important health issues affecting our community, giving special attention to the poor and underserved in our service area. The process is also the foundation that we will use to collaboratively plan, develop, and foster programs to effectively address those needs in our community.

Understanding Health Equity

As the Robert Wood Johnson Foundation describes it, “Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care. For the purposes of measurement, health equity means reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups.”

And when it comes to expanding opportunities for health, thinking the same approach will work universally is like expecting everyone to be able to ride the same bike.”

One way to examine the importance of focusing on health equity is to look at how life expectancy varies by community. Even in neighboring census tracts in Michigan, the difference in life expectancy can be 10 years or more. This is a sign that further investigation is needed to understand the root causes driving the disparity - especially the differences in the conditions where people in these communities live, work, worship, and play.

In the 2019 Community Health Needs Assessment Findings, we examine the impact of these issues on health and health equity, the extent of the challenge in our counties, and opportunities to improve them. Additional data tables related to these issues can be found in Appendix B.

COMMUNITY HEALTH NEEDS ASSESSMENT METHODS

We used the Mobilizing for Action through Planning and Partnerships (MAPP) framework to guide the Community Health Needs Assessment process. MAPP, developed by the National Association for County & City Health Officials and the US Centers for Disease Control and Prevention, is considered the “gold standard” for community health assessment and improvement planning. MAPP is a community-driven planning tool that applies strategic thinking to priority issues and identifies resources to address them.

The Community Health Assessment portion of the MAPP process includes four phases

Phase One: Organize for Success

In spring 2018, we began the process of bringing partners together to lay the foundations of the MiThrive project. We organized a steering committee with representation from local hospitals, local health departments, federally-qualified health centers, Community Mental Health, and the Area Agency on Aging. From the beginning, we laid plans for reaching out to new partners in other sectors to join MiThrive.

Phase Two: Visioning

The steering committee together set the vision of the project for the community: A vibrant, diverse, and caring community in which regional collaboration allows all people the ability to achieve optimum physical, mental, cultural, social, spiritual, and economic health and well-being.

Phase Three: The Assessments

Community Themes and Strengths Assessment

This assessment gathered input (mostly qualitative) from community members to find out

how they perceive their quality of life, see assets and problems in their communities, and define what is important to them.

Community Input Boards

The purpose of the Community Input Boards was to gather feedback from the general public on how their community context impacts health. At large community events, community members answered two questions by writing their answer on a sticky note and sticking it to the question board. These are the questions we asked:

1. What in your community helps you live a healthy life?
2. What can be done in your community to improve health and quality of life?

We collected data using Community Input Boards from July- October 2018.

Mini Client Interviews

The purpose of the Mini Client Interviews was to gather input from specific vulnerable populations by partnering with organizations that specialize in working with these populations.

Our questions focused on barriers to accessing health care:

1. In the past year, what challenges have you or your family had trying to get health care you needed?
2. What kind of health care did you have trouble getting?
3. What would make it easier to get care?

Community Health Status Assessment

The purpose of this assessment was to collect quantitative, secondary data about the health, wellness, and social determinants of health of all residents in our counties. This involved gathering statistics from sources like the Michigan

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Department of Health and Human Services, the Center for Medicare and Medicaid Services, the Centers for Disease Control and Prevention, County Health Rankings, the Census Bureau, and other established sources.

Local Community Health System Assessment

The purpose of this assessment was to gather input from organizations serving the community, and get a system perspective on work being done in the community. Facilitators guided discussions at Human Services Coordinating Bodies and other groups. Discussions focused on different aspects of how all community organizations and entities work together as a unified system to serve the communities. We organized notes by looking at “System Opportunities”, “System Weaknesses”, and “System Strengths.”

Forces of Change Assessment

The purpose of this assessment was to identify forces – trends, factors, and events – that are influencing or likely will influence the health and quality of life of the community or that impact the work of the local community health system in northern Michigan. This assessment provides critical information about the larger context influencing the potential success of the strategies we develop. This assessment was done through four cross-sector events, in Traverse City (2), West Branch, and Big Rapids. The discussion focused on seven types of forces affecting the community: economic, environmental, ethical, social/cultural, tech/science/education, political/legislative, and scientific. After identifying forces at work, we looked at threats and opportunities presented by these forces. The first three Forces of Change events focused broadly on any issues affecting the community. After “Aging Population” was identified at all three events as one of the most powerful forces in our northern Michigan communities, we added a fourth event focused specifically on how

these seven types of forces intersect with issues around a growing aging population.

Phase Four: Identify and Prioritize Strategic Issues

Through a facilitated process supported by the Michigan Public Health Institute, we reviewed all the key findings from the four assessments and looked for the underlying challenges that are preventing us from achieving our shared vision. Regular attendees of MiThrive Steering Committee meetings attended, as well as additional interested MiThrive partners (a full list is provided in Appendix A).

Through combining the data from the four assessments and looking at the community from a holistic perspective, we identified the seven Strategic Issues discussed previously, two of which were categorized to be used for our next step of developing the Community Health Improvement Plan, leaving five strategic issues.

Next, we needed to prioritize these issues to decide which two Strategic Issues we were going to focus on for our collaborative Community Health Improvement Plan. First, we held a meeting to look at needs and conditions across the entire 31-county.

Lastly, we held a meeting to look at needs and conditions across the entire 31-county northern Michigan region. The meeting used a facilitated process, guided by an evidence-based prioritization matrix, to ensure our decisions were data-driven and objective. The criteria considered through the prioritization matrix included Community Values, Severity, Magnitude, Impact of Intervention, Achievability, and Sustainability. The data we used included all the information we gathered previously, including statistics, input from community and partner organizations, and results from the surveys. Through this facilitated process, we collaboratively identified a top issue to approach collectively on a large regional scale.

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We then held meetings around northern Michigan to identify additional priorities for smaller groups of counties, based on local data, conditions, and experience. There were 6 sub-regions formed based on proximity and current cross-county partnerships and collaborations already developed. The 6 sub-regions are shown on the map included in Appendix B. The two counties that encompass McLaren Central Michigan's service area were a part of the southernmost sub region, Mid-Michigan. All sub-regions followed

the same standardized process at each meeting. This process included a prioritization matrix with the criteria of magnitude, severity, values, impact, achievability, and sustainability to rank the strategic issues. Organizations invited to participate in each meeting included those with special knowledge and expertise in public health, local public health departments, and organizations representing medically underserved, low income, and minority groups.

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

McLaren Central Michigan

McLaren Central Michigan, a subsidiary of McLaren Health Care, is a 118-bed acute care hospital located in Mount Pleasant, Michigan. It offers a full range of health and wellness services including Primary Care, General Surgery, Orthopedic Surgery, neurospine surgery, Emergency Medicine and Cancer Services. McLaren Central Michigan is recognized as an accessible and dependable source of quality medical care serving residents of Isabella and Clare Counties. In addition to its medical staff of over 50 active physicians, it is affiliated with more than 150 other quality providers. The

hospital is one of the region's largest employers, with approximately 525 employees and another 100 volunteers. McLaren Central Michigan received the Governor's Award of Excellence for 2018 and 2019. The hospital was named one of the Top 100 Rural & Community Hospitals in the United States by The Chartis Center for Rural Health. McLaren Central Michigan holds The Joint Commission's Gold Seal of Approval® for Hospital Accreditation and is the only hospital in the Central Michigan area to receive a Safety "A" grade, the highest score possible, in the Hospital Safety report published Fall 2018 and Spring 2019.

HOW WE SOUGHT INPUT FROM MEDICALLY UNDERSERVED, MINORITY, AND LOW-INCOME POPULATIONS

- Through mini client interviews, we reached out to medically underserved and low-income populations to learn about barriers they face accessing care.
- We sought input from minority populations through inviting representatives from local tribes and other organizations serving minorities to participate in steering committee meetings, the forces of change assessment, and prioritization.
- Community input boards were part of events serving low-income populations.
- We surveyed health care providers who serve Medicaid patients.
- Organizations representing medically underserved and low-income populations participated in the local community health system assessment, the forces of change assessment, and the prioritization process.

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

McLaren Central Michigan Service Area

Demographics and Vital Statistics

McLaren Central Michigan's service area comprise the zip codes of 48858 (Mt. Pleasant), 48883 (Shepherd), 48893 (Weidman), 48617 (Clare), 48633 (Farwell), 48625 (Harrison), and 48632 (Lake), 49340 (Remus), 48878 (Rosebush), 49310 (Blanchard), 49305 (Barryton) with a total population of 101,640. The largest community is Mt. Pleasant, making up 26% of the population. The service area's population is primarily white 85% and 95% in Isabella and Clare Counties, respectively. Native American population make up 2.9% of the entire service area while Hispanic or Latino make up 3.8% and 2% respectively.

The demographic profile of Isabella and Clare counties are significantly different, over 50% of Isabella County residents are between the ages of 18-44, whereas only 27% of Clare residents are within the same age range. Isabella County's lower age is attributed to the student population of CMU. Residents over the age of 65 are 11.6% and 22.6% respectively, which is up in both counties from the 2016 assessment. Overall, there has been an increase in population of 278 representing a positive change of 2.7%. The population is expected to increase through 2020.

Isabella County is located in the heart of Michigan's Lower Peninsula and is home to the Saginaw Chippewa Indian Tribe and Central Michigan University. Agriculture, oil and gas production, and manufacturing are the leading industries in the county. A majority of the commercial development is located in the city of Mt. Pleasant where U.S.-127 going north and south and M-20 going east and west intersect.

Mt. Pleasant is the county seat and the largest community with a population of 25,388. Union Township, with 7,615 residents and Chippewa

Township with 4,617 residents are the next two largest communities. The total population is 71,282. The largest employer in Isabella County is the Soaring Eagle Casino and Resort followed by Central Michigan University, and the Saginaw Chippewa Indian Tribe. McLaren Central Michigan is also located in Mt. Pleasant.

Clare County is located immediately north of Isabella County and is known as Michigan's "Gateway to the North." It is home to Mid-Michigan Community College with agriculture and manufacturing being the leading industries. The most commercial development is in the city of Clare where U.S.-127 and U.S.-10 meet.

Harrison is the county seat and is home to 2,114 residents while Clare boasts the largest population at 3,118. Clare County's total population is 30,358. Mid-Michigan Health is the largest employer in the county.

Approximately 90% of our discharges originate from our primary service area, which is Isabella and Clare Counties. This report will focus on the two counties. Even with little population growth there will be a need for a growing range of acute care services including heart and vascular disease, stroke, diabetes, cancer care and preventive services due to an aging population. MCM's service areas overall minority population is also expected to continue to grow, increasing the need for outreach and clinical programs that address the unique needs of an increasingly diverse population.

Economic Factors: Education, Poverty and Level of Insured

For both Isabella and Clare Counties, the average household income is below the state average of \$52,668. Isabella's mean household income measures \$42,771, most likely lowered by the number of college students living in the community. Clare's is \$35,913.

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Uninsured adults, persons ages 19 - 64, for Isabella County is 11.5% while Clare is 16.7%. The state average is 10.4% while the national average is 14.8%. When including persons 65 and older who are eligible for Medicare, state average is .4% with 1% for Isabella and .2% for Clare. Poverty rates are over the state average for both counties. The individual and household poverty rates for Isabella County are 27.3% and 12.1% respectively, while Clare County is 23.6% and 16.9%. The state average is 15.6% for individuals and 10.9% for households.

In 2017, the percentage of grade four students in Isabella and Clare Counties not proficient in English were higher than the state average of 56% at 58% and 64%, respectively.

Lower socioeconomic status and level of education is associated with an increased risk for many diseases, including cardiovascular disease, arthritis, diabetes, chronic respiratory diseases and cervical cancer as well as mental distress. MCM and other providers will need to provide affordable care as the low-income population continues to grow.

Chronic Disease and Mortality

Heart Disease, Cancer and Chronic Lower Respiratory Diseases are the leading causes of death (due to a chronic disease) in Isabella and Clare Counties. These same three diseases are also attributed to the top three causes of death due to a chronic condition in the State of Michigan. Heart Disease and Cancer far surpass Chronic Lower Respiratory Disease for both Isabella and Clare Counties at more than three times the rate for Isabella and more than double the rate for Clare.

The CDC says that chronic diseases have significant health and economic costs in the United States. Preventing chronic diseases, or managing symptoms when prevention is not possible, can

reduce these costs. With the steadily growing older population in the two counties, these diseases will only become more prevalent unless more preventive action is taken.

Without proper insurance or education people will be unable to keep their health conditions under control and will end up in the hospital and emergency departments for issues that should and could be managed more cost effectively by regular visits to healthcare providers.

Maternal and Child Health

There were 1,012 births in the MCM service area in 2017. This was slightly lower than the previous assessment which reported 1,059 births in 2014. For years 2012-2016, MCM's service area saw slightly lower numbers for mothers receiving prenatal care during the first trimester reflecting 70% and 66% respectively, compared to the state average of 73%. In that same period, the incidence of preterm births and low birthweight were slightly better than the state average for Isabella and Clare Counties reflecting at 7% and 7% for Isabella County, respectively, and 7% and 6% for Clare County. A large disparity exists with 2017 data as it relates to teen pregnancy rate when comparing both Isabella and Clare Counties. The teen pregnancy rate (per 1,000) for 2017 shows Isabella and Clare Counties at 13.8 and 54.3 respectively, a significantly higher rate for Clare County.

Infectious and Sexually Transmitted Disease

In 2017-2018, 27% and 31% of teens in Isabella and Clare Counties reported having had sexual intercourse. In those same years, 77% of teens in Isabella County and 58% of teens in Clare County reported using condoms during sexual intercourse. The chlamydia rates in 2015 for Isabella and Clare Counties were 296 and 144 per 100,000, respectively, while the state rate was 469. Despite the availability of vaccines, pneumonia and seasonal flu are significant causes of

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hospitalization in both Isabella and Clare Counties. Mortality rates for both counties for pneumonia and influenza aligned with the state's rates in 2017 at 14.4 and 13.4 per one thousand, respectively. The state's rates for 2017 are 14 per one thousand. The best way to control communicable diseases is by maintaining high levels of vaccination in the population. In 2017, 74.7% of residents in Isabella County and 68.3% of residents in Clare County reported not having a flu vaccine in the last year. Improving vaccine rates for established diseases requires public outreach and coordination among providers. Meeting emerging disease threats also requires highly coordinated rapid mobilization of public health and provider resources.

Mental Health/Social and Emotional Wellness

Percent of older adults experiencing depression is reportedly higher in MCM's service area versus the State and National averages. The Centers for Medicare and Medicaid reported in 2015, 18.6% of Isabella County and 17.6% of Clare County adults 65 and older experienced depression. The State and National numbers reported for 2015 were 15.11% and 14%, respectively. Michigan Profile for Healthy Youth in 2017-2018 reported that 40% and 42% of teens had symptoms of a major depressive episode in Isabella and Clare Counties, respectively. This youth data is a result of the percentage of high school students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months.

Lastly, according to MDHHS Vital Records, the rates for Intentional Self-harm (Suicide) (Mortality Rate per 100,000) for Clare County were much higher than the state rate reflecting 19.8 versus

13, respectively. Isabella County rated 9.2 per 100,000, significantly lower than Clare County and the State rate.

Community Mental Health is designed to address access to mental health services in the area, and MCM supports that initiative.

Obesity Prevalence

The problem of obesity in the United States has reached epidemic levels and MCM's service area is experiencing equally high rates of obesity for adults and children. Isabella County has an adult obesity rate of 28.4% while Clare has a rate of 37.1%. Isabella County has improved since MCM's last health assessment by 2.6%. Clare County has worsened by 7.1%. The state of Michigan's overall rate is 32.2% and the national rate is 27.7%. Teen obesity rates are on the radar for Isabella and Clare Counties at 22% and 19% respectively. In 2017-2018 approximately half of teens reported regular physical activity, 51% and 53% of teens in Isabella and Clare Counties, respectively. Like many chronic health conditions, obesity is more common among lower-income and less-educated populations. Obesity is a central risk factor for chronic disease and increases the risk of many conditions, including diabetes, heart disease, lung disease, stroke, cancer and osteoarthritis.

Preventing and reducing obesity has the potential to greatly improve public health, reduce healthcare costs and restore economic losses due to disability. Outreach and interventions targeting children and high-risk adult populations are essential to reduce obesity in the community. In addition to medical care, resources for exercise, healthful foods and ongoing public education are required.

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2019 Strategic Priorities and Issues

This year we identified strategic priorities as part of the MiThrive collaborative. Strategic issues are broader than individual health conditions and represent underlying challenges that need to be addressed, which would lead to improvement in health conditions. Each strategic issue should impact more than one health condition.

This Strategic Priority was identified as the #1 need in the MiThrive 31-county region. All sub-regions also selected it as most important on a local level as well.

Strategic Priority: Ensure a community that provides preventive and accessible mental health and substance abuse services

Health Impact

Mental illness and substance use disorders can have grave impacts on length and quality of life for individuals, as well as significantly impact families and communities. For individuals, mental illness and substance use disorders can disrupt every area of life, including relationships, work, health, and other areas. Individuals facing these conditions are at higher risk for a number of physical illnesses and have an increased risk of premature death. For families, mental illness and substance use disorders can disrupt family ties and social connections, make it more difficult to meet basic needs, and create additional stress for family members. For communities, mental illness and substance use disorders can disrupt community cohesion, present extra burdens on law enforcement, and create risks for the community like drunk driving and second-hand smoke.

Healthy Equity

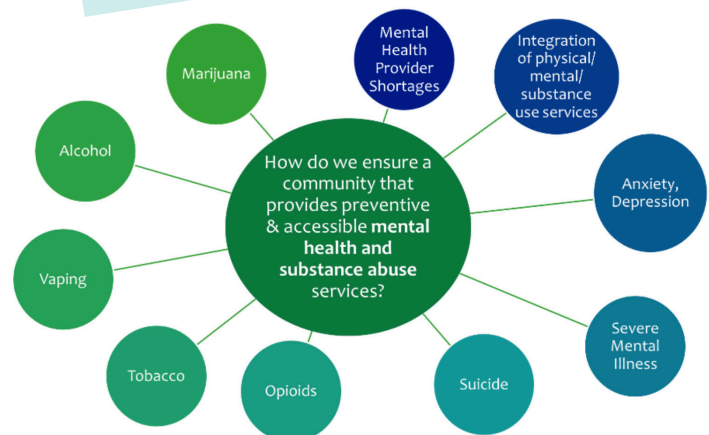
Disparities in treating mental health and substance use disorders persist in diverse segments of the

2019 Strategic Priorities

- Ensure a community that provides preventative and accessible mental health and substance abuse services
- Address basic needs of living to create resiliency and promote equity

Additional Issues

- Improve prevention and reduce health risks for leading causes of death
- Improve access to comprehensive health care for all
- Foster a sense of community that promotes trust and inclusiveness



population, including: racial and ethnic groups; lesbian, gay, bisexual, transgender, and questioning populations; people with disabilities; transition-age youth; and young adults. In addition, certain segments of the population – individuals facing poverty, childhood trauma, domestic violence, and foster care – have historically had less access to services, low utilization of services, and even poorer behavioral health outcomes. Provider shortages, lack of inpatient treatment beds, and

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limited culturally competent services all contribute to persistent disparities in mental health and substance use treatment, especially in rural areas. Rural areas also have been the hardest hit by growing rates of opioid abuse and overdose. In addition, as our population of older adults continues to grow, so do the distinct risks and needs for that population.

Challenges

With suicide rates above the national average in Clare County and over 40% of teens reporting symptoms of a major depressive episode in the past year in both Isabella and Clare Counties, mental health is a significant concern in McLaren Central Michigan's service area. Similarly, abuse of alcohol, tobacco, and drugs need to be addressed. Rates of binge drinking range from 21% (Isabella) to 14% (Clare). In Isabella and Clare Counties, approximately one and four residents smoke. Hepatitis C rates, which are strongly associated with injection drug use, are spiking among young adults. Among teens, approximately one and four report vaping in the past month, and roughly one in ten used marijuana in the past month. Contributing to these problems are ongoing shortages of mental health providers and substance use treatment options.

Assets, Resources, and Opportunities

With the rising severity of these issues, more organizations and coalitions are working on Mental Health/Substance Use than ever before. An example of these efforts include collaboration among local law enforcement, McLaren, Michigan DHHS, Ten16 Network, Mt. Pleasant and Shepherd Public Schools and Truth Initiative to fight e-cigarette usage in our youth. With increased coordination among groups, the potential for significant impact is growing. Other additional resources include Community Mental Health programs, Stickler Center and Listening Ear.

Prioritization

Organizations participating in MiThrive saw this issue as an important area to address through the project at both local and regional levels. To significantly improve access to treatment, system changes are needed on a regional and statewide scale. MiThrive will provide a platform for more effectively advocating for these changes. In addition, many more groups are working on these issues now than have been in the past, so this is an ideal time to begin to bridge efforts and promote collaboration.

Looking at criteria including values, severity, impact, and magnitude, mental health/substance use scores as a high priority. Mental illness and substance use issues are growing quickly, and all segments of the population are affected. The burden falls most heavily, however, on the most vulnerable populations, making these issues important to address to achieve health equity. For those facing these issues, the impact on health and quality of life can be severe. Improving prevention and access to care for mental health and substance use is highly valued by the community: 91% of residents agreed in a survey that it is important to meet the basic mental health needs of people in our community. For these reasons, mental health and substance use was identified as a top priority in the MCM region, as well as the full 31-county MiThrive region.

Community Voice

Residents said when it came to supporting their health, they want better:

- Access to mental health providers
- Access to substance use treatment
- Response to the opioid crisis and other drugs
- Anti-tobacco policies
- Response to drunk driving

When surveyed, residents ranked this issue as the second most urgent of all the strategic issue

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identified. 87% of resident survey respondents agreed or strongly agreed that many people in their community need better access to mental health and substance abuse services/prevention.

“The majority of our community has mental health issues. We need them to have low cost/free coverage to quality counseling” – Clare County

“I believe people have access to mental health and substance abuse services but do not take full advantage of the services provided. I also think that there are not enough mental health opportunities or employers to serve our community’s needs.” – Isabella County

“We need to educate, starting with the kids [on substance abuse].” – Clare County

Community Organizations cited the following as significant, growing threats:

- Legalization of marijuana
- Opioid crisis/drugs/vaping
- Mental illness

Strategic Priority: Address basic needs of living to create resiliency and promote equity

Health Impact

Addressing basic needs of living is crucial to improving the conditions in the environments in which people are born, live, learn, work, play, worship, and age. Conditions in the physical and socioeconomic environment have a vital impact on a wide range of health, function, and quality-of-life outcomes and risks.

A few examples of how these basic needs are linked to important health outcomes:

- Nutrition education can lead to improved diet and weight for families in food secure households.
- Living in housing with physical problems (e.g. need for appliance, roof, and heating updates)

is associated with poor self-assessed health, increased limitations to activities for daily living, and chronic disease. Faulty appliances and inadequate heating may increase nitrogen dioxide. Plumbing leaks, roof leaks, and inadequate ventilation increases mold, which are associated with higher rates of asthma.

- Communities and housing not designed for senior accessibility can increase risk of falls, social isolation, loss of independence, and many other problems.
- Physical activity levels increase in neighborhoods with safe sidewalks and streetlights, leading to safer neighborhoods with less crime, therefore reducing the risk of obesity.

Healthy Equity

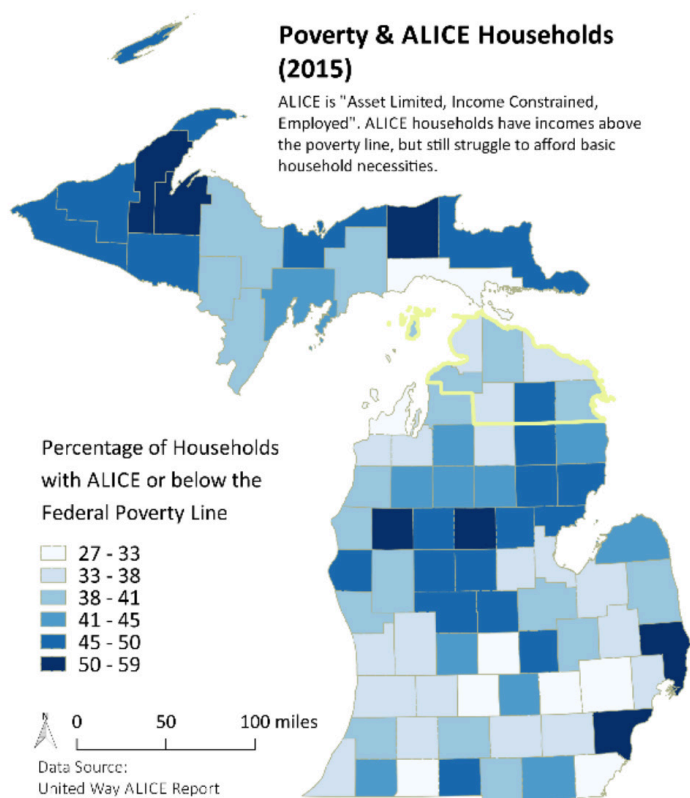
These kinds of basic needs are the root cause of many serious inequities in health outcomes. Needs like food insecurity and inadequate housing affect low-income and vulnerable residents the most, disproportionately putting them at high risk of many poor health outcomes. Improving these root-causes would make a much longer-term impact on health equity than program interventions like health education classes. Similarly, seniors are disproportionately harmed by these issues. Creating communities that are safe and healthy for seniors improves conditions for other populations as well.

Challenges

In Isabella and Clare Counties, half (50%) and (53%) of households struggle to afford basic household necessities. The percentage of children living in households below the poverty level for Isabella and Clare Counties are 21% and 38% respectively, with the percentages of the State and Nation reflecting 22% and 20%, respectively. In Isabella and Clare Counties 17% and 15% of kids live in a food insecurity environment compared to the State rate of 14%. More than half of Isabella

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County residents and nearly half of Clare County residents spend 35% or more of their household income on rent, putting them at higher risk of housing insecurity and homelessness. The State and National rate for this measure more favorably at 41%. All these factors weaken the ability of families and communities to endure challenges and develop healthy, thriving lives.



Assets, Resources, and Opportunities

Many organizations in the area are addressing basic needs of living. These issues are complex and multi-dimensional, so as new collaborations form and expand, the possible total impact on basic needs grows. A significant example of how some agencies are working to positively affect these numbers is the Strickler Non Profit Center. The Strickler Center offers a variety of supplemental help for residents of Isabella and surrounding counties including household products, food, clothing and a baby pantry. Other local churches

and nonprofit agencies work to raise funds and execute drives to provide necessities for families and residents in need. Isabella County has several options of subsidized housing including facilities in Shepherd and Mt. Pleasant, where an income scale determines rent. Isabella County offers a robust public transportation system with additional transportation resources provided by private companies. Clare County as an opportunity to improve transportation, especially for those residents seeking healthcare in Isabella County.

Prioritization

Improving basic needs of living is highly valued: 95% of residents agreed in a survey that it is important to meet the basic needs of people in our community. Large proportions of households struggle to meet at least some of these basic needs. For those who can't meet basic needs, the impact on health and quality of life can be severe. Conversely, if we are able to improve this issue, it would improve the root cause of many health inequities in our counties. Groups saw this issue as an ideal area for diverse partners to come together to share resources and strategies and collaborate toward tangible community improvement. It was also noted that improving basic needs is the foundation for reducing risks for leading causes of death, improving access to comprehensive health care and building a sense of community- other strategic issues identified. For these reasons, basic needs of living was identified as a strategic priority in the northern Michigan region.

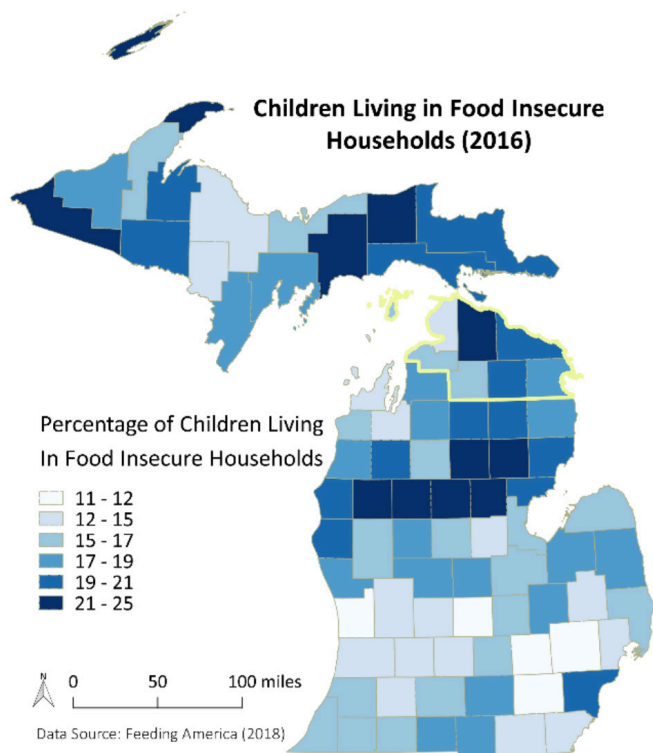
Community Voice

Residents said when it came to supporting their health, they want and value:

- Services to meet basic needs
- Clean natural environment
- Access to healthy food
- Outdoor and indoor opportunities for physical activity (especially low-cost)
- Improved transportation

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- Improved community infrastructure (e.g. sidewalks, community gardens, tobacco-free policies, playgrounds, handicap accessibility, etc.)



When surveyed, residents ranked this issue as the most urgent of all the strategic issues identified. 79% of resident respondents agreed that many people in their community struggle to meet basic needs of living.

"I have been seeing transportation being an issue lately" –Isabella County

"More food pantries and places like the CareStore really make an impact on ensuring people in our community have access to basic needs (Strickler Center)" – Isabella County

"[We need] Affordable housing" – Isabella County

"I would like to see a community garden in Harrison. I know that there was the starting of one at MIWorks however, there was never really

anything there and it was very sad looking. I think this is a great idea because it gives people the chance to have healthy food without the high prices. Also the garden might be all they have." – Clare County

"I think Clare County could use services to get single moms back in school (College). It is hard with transportation time and childcare cost. A student can end up on a transit bus 2 to 3 hours for a 3 hour class." – Clare County

"Provide greater access to ways in which people can get and stay healthy, through food and activity." – Clare County

Community Organizations cited the following as significant, growing threats in northern Michigan:

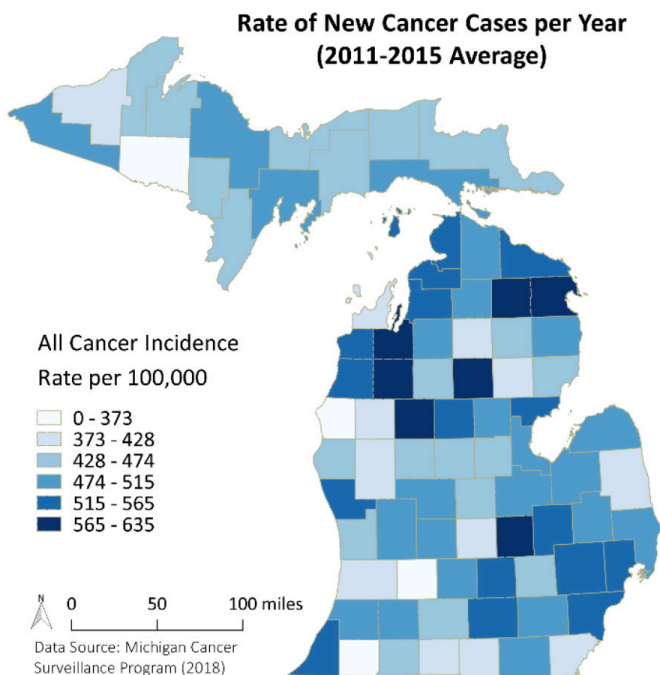
- Poor quality housing
- No regional plan to set up communities to meet the needs of the aging population
- Threats to water and air quality
- Wages don't keep up with the cost of living; generational poverty
- Lack of affordable childcare

Strategic Issue: Improve prevention and reduce health risks for leading causes of death

Challenges

Heart disease and cancer are by far the leading causes of death across the northern Michigan region. Chronic lower respiratory diseases - most commonly caused by smoking - also stand out because the death rate is higher in Clare County than the Michigan and US averages. Preventing these leading causes of death will require lowering the obesity rate, decreasing tobacco use, and improving vaccination rates. For example, in 2017, 74.7% of residents in Isabella County and 68.3% of residents in Clare County reported not having a flu vaccine in the last year, leaving vulnerable residents like small children and the elderly at increased risk of serious illness and death.

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS



opportunities: Ten16 Network substance abuse cessation classes, Health Department Vaccination awareness programs, Karmanos cancer awareness/education outreach and several more.

Central Michigan University recently developed the Interdisciplinary Center for Community Health and Wellness. The CMU Interdisciplinary Center for Community Health & Wellness is a five-college partnership that links with community health priorities to stimulate collaborations, research and education about health and wellness for disease prevention, health promotion, health communication, quality of life improvement and related economic benefits for Michigan and beyond. This particular department has been responsible for implementing community health fairs and health-related awareness programs in the Mt. Pleasant and surrounding community.

Health Equity

Leading causes of death include heart disease, cancer, lung diseases, stroke, injuries, Alzheimer’s Disease, diabetes, and pneumonia/influenza. Assets, Resources, and Opportunities
In addition to McLaren community education, a variety of local organizations offer health education

Prioritization

Reducing risks for leading causes of death was not chosen as a priority because the most significant factors in reducing risks are included in the other issue areas described. This is especially true for the chronic diseases, which are most impacted by upstream approaches through addressing issues like basic needs.

Community Voice

Residents said when it came to supporting their health, they value and want health knowledge, like additional education on healthy living.

When surveyed, 79% of residents agreed that improving this issue would improve quality of life for the community; 56% said it would improve their family’s quality of life. Over 95% of survey respondents

Rank	Cause of Death	MI	Isabella	Clare
1	Heart Disease	199	244	259
2	Cancer	170	170	201
3	Chronic Lower Respiratory Diseases	45	51	68
4	Unintentional Injuries	42	37	54
5	Stroke	37	44	40
6	Alzheimer's Disease	28	18	32
7	Diabetes Mellitus	22	20	22

Source: 2012-2016 Geocoded Michigan Death Certificate Registries, Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services.

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

agreed that it is important to prevent and reduce leading health risks.

"It would be nice to see individuals take their preventative health more seriously instead of waiting until there are issues. From the beginning of a child's life it would be nice to have the best care, food choices, etc." – Isabella County

"I believe that people need more education on where to find resources that are available to them." – Isabella County

"I would recommend [education surrounding]: substance abuse (opioid crisis), mental health issues, and chronic disease. With a background in Public Health, I believe there are many things our community can do to improve health for so many." – Isabella County

Community Organizations cited our aging population as one of the most significant trends in this area.

Strategic Issue: Improve access to comprehensive health care for all

Health Impact

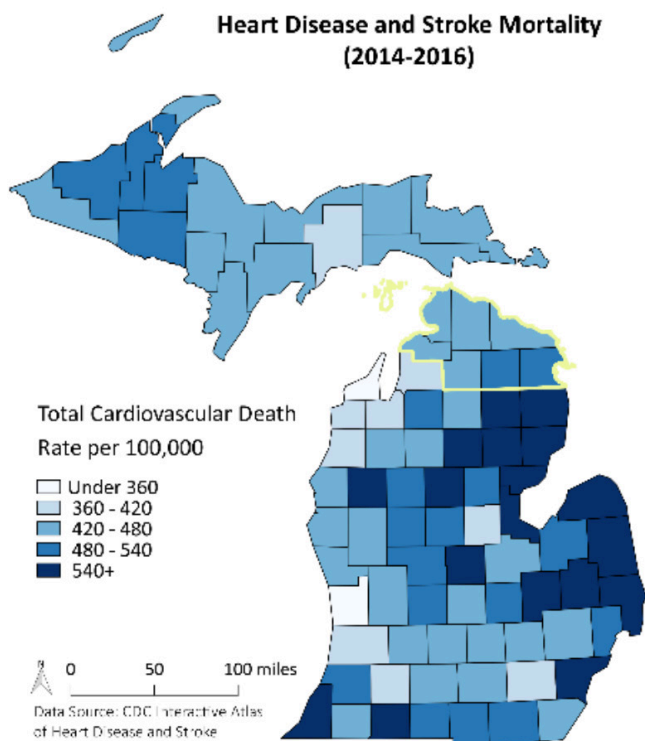
According to Healthy People 2020, access to health care is important for: overall physical, social, and mental health status; disease prevention; detection, diagnosis, and treatment of illness; quality of life; preventable death; and life expectancy.

Health Equity

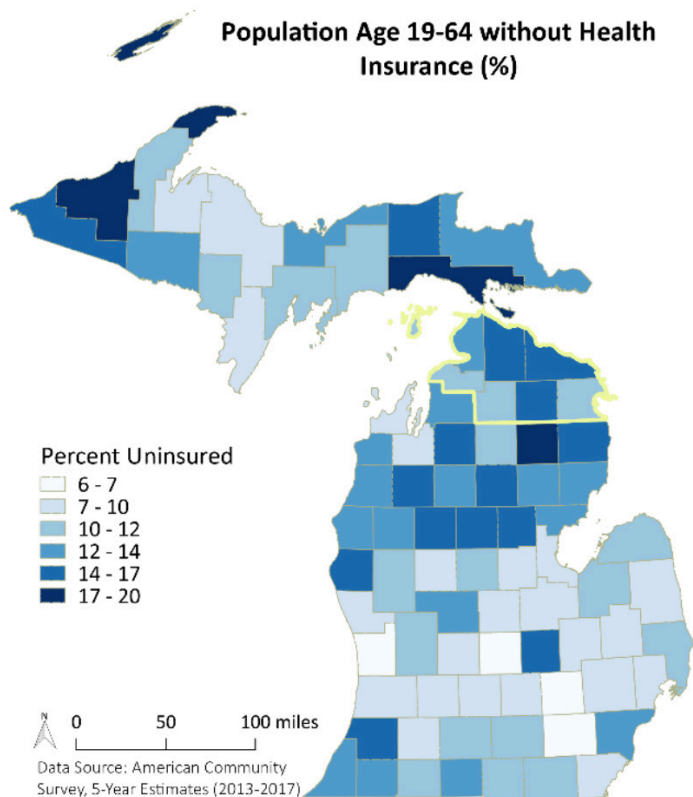
One example of inequities in access to care are the significant disparities in insurance coverage among different races/ethnicities. In MCM's two county region, this mostly impacts Native American populations. For example, one in five Native American residents of Isabella County are uninsured compared to a Caucasian resident, which is one in ten. However, both counties reflect zero disparities when looking at insurance coverage for the Hispanic population compared to Caucasian residents. Low-income people and people living in rural areas also have more challenges accessing health care, including additional challenges related to transportation, cost of care, distance to providers, inflexibility of work schedules, childcare, and other issues.

Challenges

Residents of both counties experience a variety of barriers to accessing health care, including problems with transportation, appointment availability, and certain provider shortages. In Isabella and Clare Counties, 21% and 19% of adults have no personal health care provider. In addition, 12% of non-elderly adults in Isabella County and 7% in Clare County are uninsured, and between 14% and 19% of adults said high cost of care prevented them from seeing a doctor when they needed to in the past year.



COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS



Assets, Resources, and Opportunities

McLaren Central Michigan, federally qualified health centers (FQHCs), and local health departments play key roles in working to improve access to health care. For example, local health departments and FQHCs offer health insurance navigation support during open enrollment periods and new recruitment of primary care providers has been a focus of McLaren Central Michigan, McLaren Medical Group and Isabella Citizen's for Health (FQHC). Other programs to help link people to care include: McLaren Central Michigan's Physician Referral Line, referrals through the WIC (Women, Infants, and Children) program, and 211.

Prioritization

This strategic issue was not chosen as one of the top issues because many of the barriers to

accessing health care will be relieved in some way through addressing basic needs of living and mental health/substance use. In addition, barriers to care are not the root cause of poor health, and a more upstream approach is needed to be most effective at improving population health in the long term.

Community Voice

Residents said when it came to supporting their health, they want:

- Better access to primary, dental, and specialist care
- More convenient doctor appointments & appointment availability
- More affordable health care and accessible insurance

When surveyed, residents agreed that improving access to health care would improve quality of life for their family, while they strongly agreed that better access would improve quality of life for their community.

"I would like to go back to having better healthcare coverage; we pay a lot for less coverage than ever before!" – Clare County

"I see 2 issues that are tied together. Accessibility to quality health care for those on assistance programs and affordable premiums for the middle class." – Isabella County

"Harrison area needs more HealthCare options." – Clare County

"My family has a family care provider but it is impossible to get an appointment to see the doctor when someone is sick; forcing us to use urgent care." – Clare County

"Also more specialist, people have to travel way too far for specialists!" – Clare County

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

Strategic Issue: Foster a sense of community that promotes trust and inclusiveness

Health Impact

A growing body of research shows that social connectedness creates resilience, which protects health. In contrast, community social ills like social isolation, discrimination, and sexual harassment/assault create vulnerabilities that can have a devastating impact on health. Social isolation and social disconnectedness have a significant negative association with physical health (e.g. blood pressure and mortality), mental health (e.g. depression and suicide), drug use, and poor quality of life. In contrast, positive human relations and social interaction are predictors of good health, longevity, lower mortality, and delayed onset of cognitive impairment and dementia.

Health Equity

Certain populations are at significantly higher risk for social isolation, including racial and religious minorities, seniors who live alone, and the between 9% and 11% of Clare and Isabella County teens who identify as lesbian, gay, or bisexual. In the US overall, 4 in 10 LGBT+ youth say the community in which they live is not accepting of LGBT+ people, and they are twice as likely as peers to report being physically assaulted. Girls and women are also at increased risk of violence, especially from an intimate partner. Seniors are at increased risk of social isolation because of their limited mobility, decreasing social networks due to death of their partner(s) and peers, and changes in their social roles due to retirement and loss of income.

Social support can also be the difference between stability and instability within a family. Family instability harms children's health and contributes to health disparities. In addition, limited social networks can reduce access to resources to meet

basic needs and further exacerbate inequities.

Challenges

In Isabella and Clare Counties 55% and 46% of teens say they know an adult in their neighborhood they could talk to about something important, and 34% and 43% of teens have experienced at least two Adverse Childhood Experiences (ACE's). These are both risk factors for serious health conditions later in life. In Isabella County, nearly one and five teens have experienced sexual intimate partner violence. Among Michigan householders over 65 years of age, 44% live alone.

Assets, Resources, and Opportunities

Many groups throughout Isabella and Clare Counties are working to build community. Senior centers and meals on wheels work to connect older adults. Some schools and libraries are working toward becoming community centers; local schools are offering meals outside of regular school seasons. Faith-based groups and non-profits create ways to engage and volunteer. Central Michigan University hired a new Vice President for Diversity and Inclusion and is working to provide an inclusive environment for LGBT+ residents and several area schools have programs in place to assist students with the social isolation they are feeling. Various clubs and 4-H provide other ways to engage in community. There is also movement within some organizations and businesses to prioritize a sense of community among their employees. For example, the Mt. Pleasant Chamber of Commerce initiated their first annual Corporate Cup Challenge to assist local organizations in engagement activities internally and community-wide. Through the activities of the County Collaboratives, communities are coming together to discuss ways to reduce adversities and improve outcomes for multiple generations.

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

Prioritization

Sense of Community was not chosen as a top priority, in part because it does not have as severe, immediate impact on health as some of the other issues. However, the need to bring people together can potentially help inform the way we address the other priorities we have chosen.

Community Voice

Residents said when it came to supporting their health, they highly value support from family, friends, and community. In addition, residents said they want to see more community connectedness and more opportunities for social support. When surveyed, 80% of residents agreed that improving sense of community, support, and inclusion would improve their families' quality of life. Over 92% of survey respondents agreed that it is important to build a sense of community where they live.

"Central Michigan University does a great job at creating a community, but Mt. Pleasant as a whole needs a better community feel" – Isabella County

"Social connections are extremely important." – Clare County

"I think that some agencies work together very well, but it always seems to be the same agencies at the table. It would be nice to have some new faces at the table of some of the collaborative meetings." – Clare County

"I believe that many organizations work very well together and that there is a true spirit of working together for a common goal in our area." – Isabella County

"There is no community in Farwell." – Clare County

Improving the Planning Process: Strengthen Collaboration

Locally and across northern Michigan, there is

growing recognition that developing partnerships across the public, private, and non-profit sectors creates unprecedented opportunities for improving life in our communities. Local organizations serving the community said significant, sustainable changes will require a more collaborative, comprehensive approach to community improvement planning. As we move forward and design plans to address the priority issues we have identified, a cross-sector approach will be crucial for success.

Community Voice

"I believe that many organizations work very well together and that there is a true spirit of working together for a common goal in our area." – Isabella County

"I think that some agencies work together very well, but it always seems to be the same agencies at the table. It would be nice to have some new faces at the table of some of the collaborative meetings." – Clare County

"I feel our community government is isolated from general population." – Isabella County

"It doesn't help that we also have the student population of the University that looks down on our community. Check CMU confessions on Twitter and find where they post how this town only exists because of CMU. Clearly they don't know about the oil fields." – Isabella County

Community organizations said to achieve significant, sustainable community improvement, we need to:

- Use a coordinated, comprehensive approach to planning
- Improve process for community improvement planning
- Align goals, strategies, and vision
- Maximize limited resources
- Improve data sharing and communication

COMMUNITY NEEDS HEALTH ASSESSMENT FINDINGS

Improving the Planning Process: Empower Residents and Stakeholders

Local organizations reported this as an important step in making significant, sustainable changes in the community to improve quality of life. They emphasized a need to include “authentic voices” in decision making, ensuring those most affected by the issues are part of designing the solutions. Including authentic voice in decision-making also is necessary in the pursuit of health equity.

As we move forward in the planning process, we will need to ensure residents and diverse community stakeholders are at the table when decisions affecting the community are being made. In addition, we need to work on improving communication among organizations, to the community, and from the community.

Community Voice

When surveyed, 56% of residents said more representation in decision-making would improve quality of life for their family, while 78% said more representation would improve quality of life for

their community. Nearly 92% said they believe it is important for local organizations to work together better.

“I believe that community members do not provide input when they are asked.” – Clare County

“I work in a local government and we offer public hearings and open meetings all of the time, but no one ever shows to provide their input.” – Clare County

“There are lots of opportunities for community input, but community members don’t tend to care about these opportunities.” – Isabella County

Community organizations said to achieve significant, sustainable community improvement, we need to:

- Include more partners at the table
- Include more residents at the table
- Create systems to better capture constituent voice
- Improve communication to community
- Improve communication with partners

NEXT STEPS



The next step will be to create a Community Health Improvement Plan. This will mean gathering diverse partners and representation from the community to identify specific goals and objectives related to our strategic priorities. Because MiThrive is focused on collaborative solutions, the plan will include room

for organizations from every sector to play a role contributing toward the goals we identify. Through collaboration and continued monitoring and evaluation, we will be able to address these important issue and improve health and wellbeing in our region.

APPENDIX A

Organizations Represented during Assessment Process

Steering Committee

Throughout the Community Health Needs Assessment process, MiThrive has prioritized inclusiveness and kept meetings open to any organization interested in attending. Therefore, the Steering Committee did not have an official membership list. The list below includes organizations that attended at least two Steering Committee meetings in 2018.

Benzie-Leelanau District Health Department	Munson Healthcare Cadillac Hospital
Central Michigan District Health Department	Munson Healthcare Charlevoix Hospital
District Health Department #10	Munson Healthcare Grayling Hospital
District Health Department #2	Munson Healthcare Manistee Hospital
District Health Department #4	Munson Medical Center
Grand Traverse County Health Department	Munson Healthcare Otsego Memorial Hospital
Health Department of Northwest Michigan	Munson Healthcare Paul Oliver Memorial Hospital
Kalkaska Memorial Health Center	Northeast Michigan Community Service Agency
McLaren Central Michigan	North Country Community Mental Health
McLaren Northern Michigan	Northern Michigan Community Health Innovation Region
Mid-Michigan - Alpena	Spectrum Health
Mid-Michigan Health - Clare Gladwin	Traverse Health Clinic
Munson Healthcare	

Forces of Change Assessment

1North	Community Connections /Benzie-Leelanau DHD
Alcona Health Center	Crawford County Commission on Aging
Alliance for Senior Housing, LLC	District Health Department #2
AmeriCorps VISTA	District Health Department #4
Area Agency on Aging of Northwest Michigan	District Health Department #10
AuSable Valley Community Mental Health	Family Health Care - White Cloud
Benzie Senior Resources	Father Fred Foundation
Benzie-Leelanau District Health Dept.	Ferris State University Public Health Programs
Catholic Human Services	Free Clinic
Central Michigan District Health Department	Goodwill Industries
Char-Em United Way	Grand Traverse County Commission on Aging

APPENDIX A

Grand Traverse County Health Department	MSU Extension
Grand Traverse County Probate Court	Munson Healthcare
Grand Traverse County Prosecuting Attorney's Office	Munson Healthcare Cadillac Hospital
Grand Traverse County Senior Center	Munson Healthcare Manistee Hospital
Grand Traverse Pavilions	Munson Medical Center
Grow Benzie	Newaygo County Commission on Aging
Habitat for Humanity Grand Traverse Region	North Country Community Mental Health
Harbor Care Associates	Northeast Michigan Community Service Agency
Health Department of Northwest Michigan	Northern Lakes Community Mental Health
Health Project	Northern Michigan Children's Assessment Center
Hope Shores Alliance	Northwest Michigan Community Action Agency
Hospice of Northwest Michigan	Northwest Michigan Health Services
Housing Consulting Services LLC	Parkinson's Network North
Kalkaska Commission on Aging	Presbyterian Villages of Michigan
Lake City Area Chamber of Commerce	Region 9 Area Agency on Aging
Lake County Habitat for Humanity	Regional Community Foundation
Leelanau County Senior Services	River House, Inc.
McLaren Northern Michigan	Real Life Living Services
Meridian Health Plan	Senior Volunteer Programs
Michigan Department of Health and Human Services	ShareCare of Leelanau
Michigan State Police Community Trooper	Spectrum Health
Michigan State University Extension	United Way of Northwest Michigan
Mid-Michigan Community Action Agency	United Way of Wexford Missaukee Counties
Mid-Michigan Health	Walkerville Thrives
Mid-Michigan Medical Center-West Branch	Wexford County Prosecutor
Monarch Home Health	Wexford-Missaukee Intermediate School District
	Women's Resource Center of Northern Michigan

Local Community Health System Assessment

Area Agency on Aging of Northwest Michigan	Baker College
Area Agency on Aging of Southwest Michigan	Bureau for Blind Persons
Alcona Health Center	Catholic Human Services
AuSable Valley Community Mental Health Authority	Commission on Aging - Grand Traverse

APPENDIX A

Local Community Health System Assessment *(continued)*

Community Hope	Grand Traverse County Health Department
Court Juvenile Advocate	Health Department of Northwest Michigan
Dental Health	Human Trafficking Community Group
District Health Department #2	Indigo Hospitalists
District Health Department #4	Manna
District Health Department #10	McLaren Northern Michigan – Cheboygan Campus
Michigan Department of Health and Human Services	Michigan Human Trafficking Task Force
Disability Network	Michigan Veterans Affairs Agency
Family Health Care	Michigan Works
Ferris State University	Mecosta-Osceola Intermediate School District (MOTA)
Friend of the Court	MSU Extension
Friendship Center	Munson Family Practice
Grand Traverse County Health Department	Northeast Michigan Community Service Agency
Grand Traverse Regional Community Foundation	Northern Michigan Children Assessment Center
Munson Healthcare Grayling Hospital	Newaygo Co Great Start Collaborative
Great Start Collaborative	Newaygo County Regional Education Service Agency
Grand Traverse Court Family Division	
Grand Traverse County Drug Free Coalition	

Identifying Strategic Issues

Alcona Health Center	Health Department of Northwest Michigan
Area Agency on Aging of Northwest Michigan	McLaren Central Michigan
AuSable Valley Community Mental Health	McLaren Northern Michigan
Benzie-Leelanau District Health Department	MI Department of Health and Human Services
Central Michigan District Health Department	Mid-Michigan Health
Char-Em United Way	Mid-Michigan/AHEC
Crawford County Commission on Aging	MSU-Extension
District Health Dept. #2	Munson Healthcare
District Health Dept. #4	Munson Healthcare Cadillac Hospital
District Health Dept. #10	Munson Healthcare Grayling Hospital
Grand Traverse County Health Department	Munson Healthcare Manistee Hospital
Groundwork Center for Resilient Communities	Munson Medical Center

APPENDIX A

Identifying Strategic Issues *(continued)*

Munson Healthcare Otsego Memorial Hospital	Northern Michigan Community Health Innovation Region
Munson Healthcare Paul Oliver Memorial Hospital	
North Country Community Mental Health	

Prioritizing Strategic Issues – 31-County Region

Alcona Health Center	Health Department of Northwest Michigan
Area Agency on Aging of Northwest Michigan	Kalkaska Commission on Aging
AuSable Valley Community Mental Health	McLaren Central Michigan
Benzie-Leelanau DHD	McLaren Northern Michigan
Catholic Human Services	Mid-Michigan Health - Alpena
Central Michigan District Health Department	Mid-Michigan Health - Clare Gladwin
District Health Dept. #10	MSU-Extension
District Health Dept. #2	Munson Healthcare
District Health Dept. #4	Munson Healthcare Cadillac Hospital
Food Bank of Eastern Michigan	Munson Healthcare Manistee Hospital
Grand Traverse County Commission on Aging	Munson Healthcare Grayling Hospital
Grand Traverse County Health Department	Munson Medical Center
Grand Traverse County Senior Center	North Country Community Mental Health
Grand Traverse Pavilions	Spectrum Health
Groundwork Center for Resilient Communities	Wexford County Council on Aging

“Mid-Michigan Sub-Region” 3-County Region

(Includes McLaren Central Michigan's defined “community” of Isabella and Clare Counties)

Partners in Change	Ten16 Network
MSU-Extension	The Care Store
Community Mental Health of Central Michigan	MidMichigan Health
McLaren Central Michigan	Mid Michigan College
Central Michigan District Health Department	A & D Healthcare
Gratiot/Isabella Counties Great Start Collaborative	RISE Advocacy
Kelli Thompson GI RESD Steve Hall CMDHD	Region VII Area Agency on Aging
Merchandise Outlet	EDL

APPENDIX B

Sub-Region Map

Yellow = Tip of the Mitt Sub-Region (McLaren Northern Michigan)

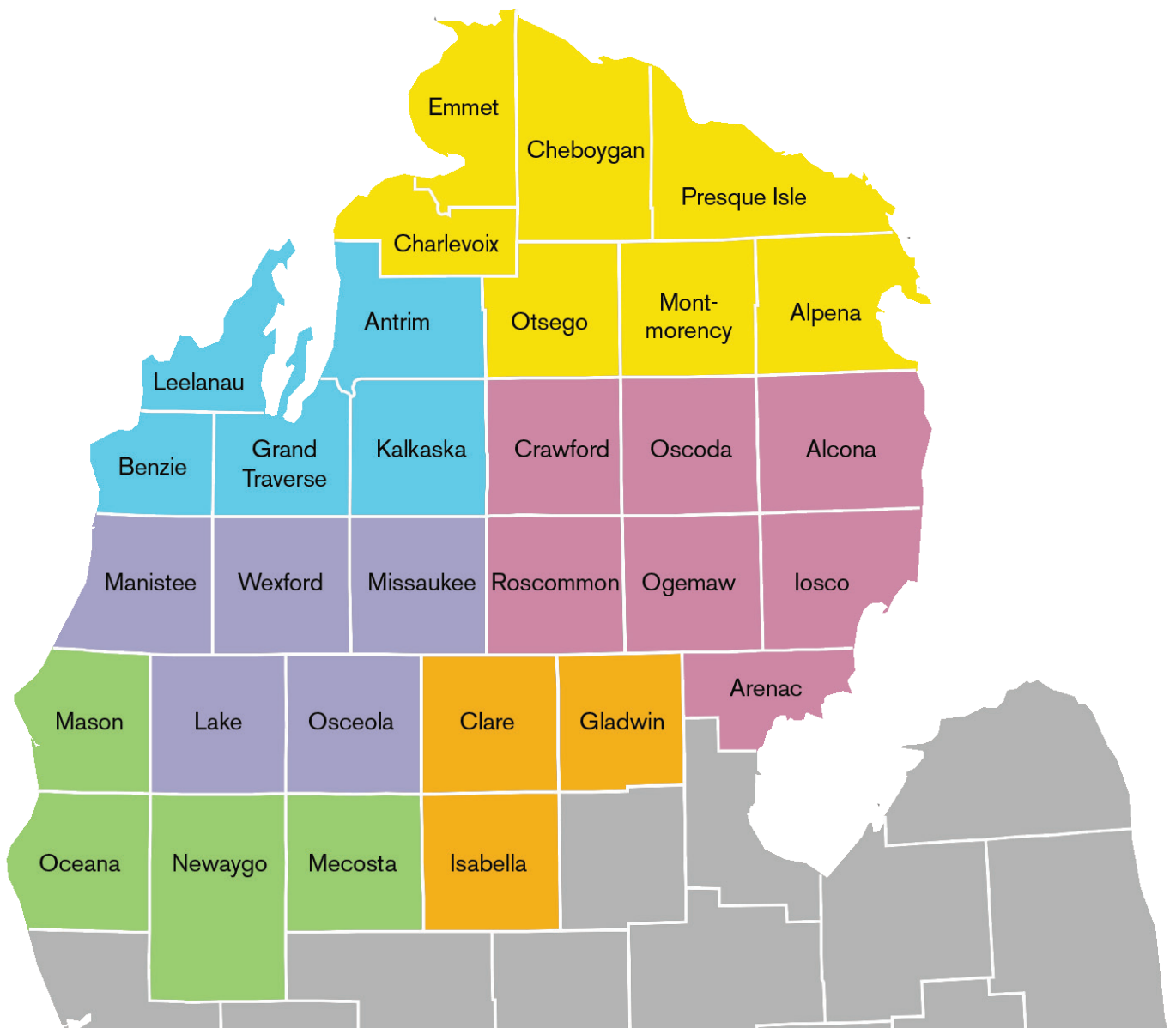
Light Blue = Grand Traverse Sub-Region

Pink = Eastern Sub-Region

Purple = Wexford Area Sub-Region

Green = Southwest Sub-Region

Gold = Mid-Michigan Sub-Region



APPENDIX C

Assessment Data Tables

Community Themes and Strengths Assessment

In most cases, residents stated similar themes as both positives that help them be healthy, and as areas they would like to see improved in their community.

DEMOGRAPHICS

Data Year	Indicator	MI	Isabella	Clare
2016	Total Population ¹	9,928,300	71,282	30,358
2016	% Female ¹	50.8	51	50
2016	% < 18 ¹	22.1	17	20
2016	% 65 and over ¹	16.2	12	23
2016	% American Indian / Alaskan Native ¹	0.7	3.9	0.8
2016	% Hispanic ¹	5.0	3.8	2.0
2016	% Non-Hispanic White ¹	75.4	86	95
2010	% Rural ¹	25	47	71
2018	% students who identify as gay, lesbian, or bisexual ²	*	9	11

¹ County Health Rankings; ² Michigan Profile for Healthy Youth

OVERALL HEALTH

Data Year	Indicator	MI	Isabella	Clare
2014-2016	Years potential life lost per 100,000 ¹	7,293	6,016	9,236
2018	Health outcome rank (out of 83) ¹	n/a	42	78
2018	Health factors rank (out of 83) ¹	n/a	52	82
2017	% Self-reported general health assessment: poor or fair ³	18	14	26
2016	% American Indian / Alaskan Native ¹	0.7	3.9	0.8

¹ County Health Rankings; ² Michigan Profile for Healthy Youth

APPENDIX C

BASIC NEEDS

Data Year	Indicator	MI	Isabella	Clare
2010-2014	% Households with severe housing quality problems ¹	16	24	19
2010/2016	% Access to exercise opportunities ¹	86	77	81
2013-2017	% Work outside county of residence ⁴	29	19	42
2013-2017	% Unemployment rate ⁴	7	8	12
2013-2017	% Population below the poverty level ⁴	16	27	24
2016	% Children 0-12 eligible for subsidized care ⁵	3	2	3
2016	% Children 0-12 receiving subsidized care ⁵	2	2	2
2016	% population experiencing food insecurity ⁶	14	17	15
2015	% population with low access to grocery store ⁷	*	4	2
2014	% Students eligible for free lunch ⁷	n/a	37	53

¹ County Health Rankings; ² Michigan Profile for Healthy Youth; ³ Michigan Behavioral Risk Factor Surveillance Survey; ⁴ American Community Survey; ⁵ Kids Count Data Center; ⁶ Feeding America; ⁷ USDA Food Environment Atlas; *Data not available

MENTAL HEALTH

Data Year	Indicator	MI	Isabella	Clare
2017	Mental health providers per 100,000 population ¹	232	229	76
2017/2018	% Teens with symptoms of a major depressive episode ²	*	40	42
2017	% Poor mental health on at least 14 days in the past month ³	*	8	12
2012-2016 (5yr avg)	Intentional self-harm (suicide) (mortality rate per 100,000 population) ⁸	13	9	20
2015	% Depression among adults 65+ ⁹	15	19	18

¹ County Health Rankings; ² Michigan Profile for Healthy Youth; ³ Michigan Behavioral Risk Factor Surveillance Survey; ⁴ American Community Survey; ⁵ Kids Count Data Center; ⁶ Feeding America; ⁷ USDA Food Environment Atlas; ⁸ MDHHS Vital Records; ⁹ Center for Medicare and Medicaid Services; *Data not available

APPENDIX C

ACCESS TO CARE

Data Year	Indicator	MI	Isabella	Clare
2015	Preventable hospital stays (per 1000 Medicare enrollees) ¹	55	78	81
2018	Clinical care rank (out of 83 counties) ¹	n/a	79	83
2016	Dentists per 100,000 population ¹	72	49	30
2015	Primary care providers per 100,000 population ¹	80	50	36
2017/2018	% Teens with routine check-up in the past year ²	*	66	63
2017	% Adults with no personal health care provider ³	15.2	21	19
2017	% Needed to see doctor, cost prevented care ³	11	14	19
2013-2017	% Uninsured: age 19-64 ⁴	10	12	17
2016	% Children 0-18 insured by MiChild ⁵	42	33	57

¹ County Health Rankings; ² Michigan Profile for Healthy Youth; ³ Michigan Behavioral Risk Factor Surveillance Survey; ⁴ American Community Survey; ⁵ Kids Count Data Center; ⁶ Feeding America; ⁷ USDA Food Environment Atlas; ⁸ MDHHS Vital Records; ⁹ Center for Medicare and Medicaid Services; *Data not available

APPENDIX C

SUBSTANCE ABUSE				
Data Year	Indicator	MI	Isabella	Clare
2012-2016	% Motor vehicle deaths with alcohol-impaired ¹	29	39	39
2017/2018	% Teens: used marijuana during the past 30 days ²	n/a	11	13
2017/2018	% Teens: at least one drink of alcohol during the past 30 days ²	*	14	17
2017/2018	% Teens: smoked cigarettes during the past 30 days ²	*	5	9
2017/2018	% Teen: vaping past 30 days ²	*	23	24
2017/2018	% Teens: took a prescription drug not prescribed to them, including painkillers, during the past 30 days ²	n/a	5	7
2017	% Adult: binge drinking ³	19	21	15
2017	% Adult: current smoker ³	19	23	27
2012-2016	% Smoked while pregnant ⁸	18	24	37
2014	Drug use mortality (per 100,000 population) ¹⁰	13	7	15
2017	Heroin treatment admission rate (per 100,000 population) ¹¹	252	107	201
¹ County Health Rankings; ² Michigan Profile for Healthy Youth; ³ Michigan Behavioral Risk Factor Surveillance Survey; ⁴ American Community Survey; ⁵ Kids Count Data Center; ⁶ Feeding America; ⁷ USDA Food Environment Atlas; ⁸ MDHHS Vital Records; ⁹ Center for Medicare and Medicaid Services; ¹⁰ Institute for Health Metrics and Evaluation; ¹¹ MDHHS, Vital Hepatitis Surveillance and Prevention Unit; *Data not available				

APPENDIX C

LEADING CAUSES OF DEATH

Data Year	Indicator	MI	Isabella	Clare
2010-2016	Motor vehicle crash death rate per 100,000 population ¹	10	9	15
2012-2016	Firearm fatalities rate per 100,000 population ¹	12	5	14
2017/2018	% Teens with current asthma ²	*	47	57
2017/2018	% Obese teens ²	*	22	19
2017/2018	% Overweight teens ²	*	15	18
2017	% Adults who are obese ³	32	28	37
2017	% Adults who are overweight ³	35	27	39
2017	% Adult: ever told diabetes ³	11	10	15
2017	% Adult: cardiovascular disease ³	*	12	18
2011-2015	All cancer incidence rate (per 100,000 population) ¹²	518	467	523
2011-2015	Prostate cancer incidence rate (per 100,000 population) ¹²	118	72	98
2011-2015	Breast cancer incidence rate (per 100,000 population) ¹²	83	75	85
2015	% COPD: adults 65+ ⁹	14	15	17

¹ County Health Rankings; ² Michigan Profile for Healthy Youth; ³ Michigan Behavioral Risk Factor Surveillance Survey; ⁴ American Community Survey; ⁵ Kids Count Data Center; ⁶ Feeding America; ⁷ USDA Food Environment Atlas; ⁸ MDHHS Vital Records; ⁹ Center for Medicare and Medicaid Services; ¹⁰ Institute for Health Metrics and Evaluation; ¹¹ MDHHS, Vital Hepatitis Surveillance and Prevention Unit; ¹² Michigan Cancer Surveillance Program; *Data not available

APPENDIX D

Community Assets Targeting Identified Strategic Issues

ABUSE & PROTECTIVE SERVICES

FOR EMERGENCY SERVICES CALL 911

Common Ground Crisis Line(800) 231-1127
 Crisis Hotline(800) 317-0708
 Elder Abuse Hotline(855) 444-3911
 Equality Michigan(313) 537-7000
 Faith Trust Institute(206) 634-1903
 HAVEN Crisis Line(877) 922-1274
 Love Is Respect Hotline(866) 331-9474
 Michigan Coalition to End Domestic & Sexual
 Violence (MCEDSV)(517) 347-7000
 Michigan Dept of Health & Human Services –
 Adult & Children Protective Services
(855) 444-3911
 Nami Magizi Nangwiihgan (Abuse Services)
 Mt Pleasant(989) 775-4400
 National Domestic Violence
 Helpline(800) 799-7233
 RAINN (Rape & Incest National
 Network)(800) 656-4673
 Stop It Now! Hotline(888) 773-8368
 Veteran’s Crisis Line(800) 273-8255
 Victim Connect (stalking hotline) (588) 484-2846
 Women’s Aid Service –
 Mt Pleasant(989) 772-9168

ADULT AGING SERVICES

Andahwod Continuing Care Community & Elder
 Services – Mt Pleasant(989) 775-4319
 Greendale Senior Services – Shepherd
(989) 832-8683
 Isabella County Commission on Aging
(989) 772-0748

Isabella County Department of Health & Human
 Services(989) 772-8400
 Meals on Wheels – Contact Isabella County
 Commission on Aging(989) 772-0748
 Medicare(800) 633-4227
 Medicare/Medicaid Assistance Program (MMAP)
(800) 803-7174
 Region 7 Area Agency on Aging...(800) 858 1637
 Rosebush Food with Friends(989) 433-0151
 Senior Legal Hotline of Michigan...(800) 347-5297
 Social Security Administration(800) 772-1213
 The ARC of Central Michigan – Mt Pleasant
(989) 773-8765
 Veterans Affairs(800) 827-1000

ASSISTED LIVING

Applewood Assisted Living – Mt Pleasant
(989) 772-1866
 Maplewood –Mt Pleasant(989) 773-7001
 McBride Quality Care Services – Mt Pleasant
 Mental Illness/Developmental Disabilities.....
(989) 772-1261
 Medilodge of Mt Pleasant(989) 772-2967
 Prestige Center – Mt Pleasant(989) 773-9421

ALZHEIMER’S & DEMENTIA SUPPORT

Alzheimer’s Association & Helpline.....
(800) 272-3900
 Country Care Assisted Living – Farwell
(989) 330-1813
 Margaret’s Meadows – Remus(989) 561-5009
 Medilodge of Mt Pleasant(989) 772-2967

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Prestige Center – Mt Pleasant (989) 773-9421
 Region 7 Area Agency on Aging...(800) 858 1637

COUNTY RESOURCES

Isabella County Administrative Offices
(989) 772-0911

Isabella County Courts

Circuit Division(989) 317-4097
 Civil/Small Claims Court(989) 317-4219
 Community Corrections(989) 317-4099
 Criminal Division(989) 317-4178
 Family Division / Friend of the Court
(989) 317-4186
 Probate/Juvenile Division(989) 317-4212
 Prosecuting Attorney(989) 317-4085

Trial Court Probation

Felony(989) 317-4163
 Juvenile(989) 317-4205
 Misdemeanor(989) 317-4180

Legal Resources

Center for Civil Justice(800) 724-7441
 Legal Services of Eastern Michigan
(800) 322-4512
 Serving: Arenac, Bay, Clare, Genesee, Gladwin,
 Gratiot, Huron, Isabella, Lapeer, Midland, Saginaw,
 Sanilac, St. Clair, and Tuscola counties

Cities

Clare(989) 386-7541
 Mt Pleasant(989) 779-5300

Townships

Broomfield(989) 967-8839
 Chippewa(989) 773-3600

Coe(989) 828-5960
 Coldwater(989) 382-7018
 Deerfield(989) 779-7557
 Denver.....(989) 442-5157
 Fremont(989) 866-8174
 Gilmore(989) 588-0462
 Isabella(989) 433-5413
 Lincoln(989) 828-6967
 Nottawa(989) 644-8480
 Rolland(989) 561-2224
 Sherman(989) 644-2666
 Union(989) 772-4600
 Vernon(989) 433-2028
 Wise(989) 386-7244

Villages

Lake Isabella(989) 644-8654
 Rosebush(989) 433-8059
 Shepherd(989) 828-5322

DISABILITY RESOURCES

EightCap, Inc(989) 772-0110
 Michigan Commission for the Blind
(800) 292-4200
 Michigan Commission for the Deaf Voice/TTY....
(313) 437-7035
 Michigan Council for Rehabilitation Services
(517) 483-2826
 MidMichigan Disability Network.....(800) 782-4160
 The National Federation of the Blind
(410) 659-9314
 State of Michigan Division on Deaf, Blind, & Hard
 of Hearing – Toll-free(313) 437-7035

APPENDIX D

EDUCATION & TRAINING

Adult Programs

Central Michigan University	(989) 774-4000
Michigan Workforce Development Agency – GED	(517) 335-5858
Mid-Michigan Community College – Mt Pleasant.....	(989) 773-6622
MJ Murphy Beauty College – Mt Pleasant	(989) 772-2339
Naturopathic Institute of Therapies & Education - Mt. Pleasant	(989) 773-1714
Protégé Cosmetology School	(989) 317-8260
Saginaw Chippewa Tribal College – Mt Pleasant	(989) 317-4760

CHILDCARE CENTERS & PRESCHOOLS

Headstart

Early Head Start Family Center – Mt Pleasant.....	(989) 773-9186
Edmore Head Start - Blanchard....	(989) 427-5913
Eight Cap Head Start – Mt Pleasant.....	(989) 772-0110
Shepherd Head Start	(989) 828-5453

Mt Pleasant

CMU Child Development & Learning Center.....	(989) 774-3760
Creative Beginnings Child Dev Ctr Mt Pleasant East	(989) 779-5555
Mt Pleasant West	(989) 773-2222
Early Headstart Family Center....	(989) 773-9186
First United Methodist Church Preschool.....	(989) 772-1580
Isabella Child Development Center	(989) 772-0508

Loving Arms Daycare	(989) 330-3614
Montessori White Pine Children's Center.....	(989) 775-8272
Mt Pleasant Public Schools.....	(989) 775-2300
Renaissance Public School Academy	(989) 773-9889
The Sandbrook Learning Center of Beal City Schools	(989) 644-3901
Tonya's Tots	(989) 773-0437
Zion Lutheran Church Nursery School	(989) 772-1516

Blanchard

Debbie's Daycare	(989) 561-5167
Hubie's Day Care	(989) 561-5603
Penny's Day Care	(989) 561-5201

Shepherd

Country Childcare	(989) 828-6309
West Midland Family Center Preschool & Early Learning	(989) 832-3256

Weidman

Izzy's Kids Childcare Center	(989) 664-8089
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LIBRARIES

Central Michigan University Library – Mt Pleasant	(989) 774-1100
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Chippewa River District Libraries

Coleman Area Library – Coleman	(989) 465-6398
Faith Johnston Memorial Library - Rosebush.....	(989) 433-0006
Mt. Pleasant High School Media Center.....	(989) 775-2200 x 20830

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Pere Marquette District Library - Clare	(989) 386-7576
Saginaw Chippewa Tribal Libraries	(989) 775-4508
Shepherd Community Library	(989) 828-6801
Surrey Township Public Library – Farwell	(989) 588-9782
Tate Memorial Library – Blanchard	(989) 561-2480
Veterans Memorial Library – Mt Pleasant	(989) 773-3242
Sherman Twp Library - Weidman... ..	(989) 644-5131

SCHOOLS

Beal City Public Schools	(989) 644-3901
Chippewa Hills School District	(989) 967-2000
Gratiot-Isabella Technical Education Center	(989) 775-2210
Montabella Community Schools	(989) 427-5148
Morey Montessori Public School Academy - Shepherd.....	(989) 866-6741
Mt Pleasant Public Schools	(989) 775-2300
Mt Pleasant Seventh Day Adventist Elementary.....	(989) 773-3231
Sacred Heart Academy – Mt Pleasant.....	
Elementary	(989) 773-9530
Secondary	(989) 772-1457
Shepherd Public Schools	(989) 828-5520
St Joseph School – Beal City	(989) 644-3970

COLLEGES/CAREER CENTERS

Central Michigan University	(989) 774-4000
Mid-Michigan Community College – Mt Pleas- ant.....	(989) 773-6622
MJ Murphy Beauty College – Mt Pleasant	(989) 772-2339

Naturopathic Institute of Therapies & Education - Mt. Pleasant	(989) 773-1714
Protégé Cosmetology School	(989) 317-8260
Saginaw Chippewa Tribal College – Mt Pleasant	(989) 317-4760

YOUTH PROGRAMS

Big Brothers/Big Sisters – Mt Pleasant	(989) 772-5232
CMU University Recreation	(989) 773-4495
Girl Scouts Heart of Michigan Council	(800) 497-2688
City of Mt Pleasant Programs	
Basketball (K-6)	(989) 779-5332
Flag Football (K-4)	(989) 779-5332
PEAK	(989) 779-5334
Soccer (K-7)	(989) 779-5332

Non-City Programs

Championship Sports Basketball Club	(989) 953-7529
Baseball Players Association (age 13-14)	(989) 621-6900
Girls' Baseball (age 2-12)	(989) 773-5421
Mt Pleasant Little League (age 6-12)	(989) 560-6317
Union Twp Little League (age 6-12)	(989) 772-0144
Mt Pleasant Rocket Football (age 8-14).....	mprocketfootball@gmail.com
Amateur Hockey Assn of Mt Pleasant	(989) 560-1850
Mt Pleasant Driller Youth Wrestling	(989) 772-4960
Mt Pleasant Figure Skating Club	(989) 779-0690
Mt Pleasant Pacers – Swimming (age 6-18)	(989) 773-2595

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Mt Pleasant Striders – Running (all ages)
.....(989) 772-0323

Mt Pleasant Youth Soccer.....
.....parks-rec@mt-pleasant.org

EMERGENCY & DISASTER SERVICES

Ambulance, Fire and Police.....911

American Red Cross of Mt Pleasant
.....(989) 773-3615

Center for Disease Control and Prevention (CDC)
.....(800) 232-4636

Consumers Energy Emergency Line
.....(800) 477-5050

Crisis Hotline(800) 317-0708

Poison Control(800) 222-1222

Tri-County Electric Cooperative Emergency Line
.....(800) 848-9333

Women’s Aid Service - Mt Pleasant (counseling &
emergency shelter)(844) 349-6177

Fire Departments (Non-Emergency)

Deerfield Township Fire Department
.....(989) 773-0327

Isabella Northeast Fire District(989) 433-2152

Mt Pleasant Fire Department(989) 779-5100

Nottawa-Sherman Twp Fire Department
.....(989) 644-3221

Rolland Millbrook Fire Department
.....(989) 561-2346

Saginaw Chippewa Tribe Fire Dept
.....(989) 775-4000

Shepherd Tri Township Fire Department - Weid-
man.....(989) 828-5272

Law Enforcement (Non-Emergency)

CMU Police Department(989) 774-3081

Isabella County Sheriff's Dept(989) 772-5911

Michigan State Police – Mt Pleasant Post #63
.....(989) 773-5951

Mt Pleasant Police Department(989) 779-5100

Saginaw Chippewa Tribe Police(989) 775-4700

Shepherd Police Department(989) 828-5045

Sherman Township Marshall(989) 644-8882

EMPLOYMENT ASSISTANCE

Career Ladders Inc. (Job search assistance)
.....(888) 247-3786

Experience Works – Mt Pleasant ..(989) 773-1932

Farmworker Legal Services – Kalamazoo
.....(269) 492-7190

Goodwill Workforce Development Office Mt Pleas-
ant(989) 773-4884

Michigan Works – Mt Pleasant(989) 772-5304

Unemployment Office Hotline(866) 500-0017

FINANCIAL ASSISTANCE

MSHDA: Step Forward(866) 946-7432

Tax Assistance

Blysone & Bailey - Mt Pleasant(989) 772-4673

Boge Wybenga & Bradley - Mt Pleasant
.....(989) 772-1730

Cain & Sisung CPAs - Mt Pleasant
.....(989) 772-3929

H & R Block - Mt Pleasant(989) 773-8129

Liberty Tax Service – Mt Pleasant (989) 546-6307

Wilson Sharrar & Freeze, CPA PC - Mt Pleasant
.....(989) 773-6449

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FOOD, CLOTHING & HOUSEHOLD ASSISTANCE

American Red Cross of Mt Pleasant	(989) 773-3615
Community Compassion Network Food Pantry - Mt Pleasant	(989) 863-4449
EightCap, Inc	(989) 772-0110
Habitat for Humanity	(989) 773-0043
Isabella Community Soup Kitchen	(989) 772-7392
Isabella County Department of Health & Human Services	(989) 772-8400
Meals on Wheels – Contact Isabella County Commission on Aging	(989) 772-0748
WIC Program – Mt Pleasant	(989) 773-5921

HEALTHCARE SERVICES

AIDS Program Hotline	(800) 872-2437
Centers for Disease Control	(800) 232-4636
Central Michigan District Health Department	(989) 773-5921

Clinics & Hospitals

McLaren Central Michigan – Hospital Mt Pleasant	(989) 772-6700
Broadway Health Services – Mt Pleasant	(989) 772-9523
CMU Health Services Primary & Specialty Services Clinic	(989) 774-7585
CMU Health Services Mt Pleasant Internal Medicine.....	(989) 953-4002
Family Medical Care - Mt Pleasant	(989) 772-1442
Isabella Citizens for Health – Mt Pleasant	(989) 953-5320

Mid-Michigan Medical Center

Emergency & Outpatient Services Mt Pleasant	989-775-1600
South Medical Office – Mt Pleasant	(989) 775-1610
Shepherd Medical Office	(989) 828-6691
Nimkee Memorial Wellness Center – Mt Pleasant.....	(989) 775-4600

PEDIATRICIANS

Children's Health Care, PLLC – Mt Pleasant	(989) 772-7774
Isabella Citizens for Health Pediatrics Mt Pleasant	(989) 779-5270
Pleasant Pediatrics - Mt Pleasant	(989) 772-1500
Urgent Care	
Isabella Urgent Care - Mt Pleasant	(989) 317-0565
McLaren Central-ReadyCare Walk-In Clinic Mt Pleasant	(989) 773-1166
Urgent Clinic Express - Mt Pleasant	(989) 773-9669
Women's Medical Center - Mt Pleasant	(989) 773-3411

Dental Resources

Dental Hygiene Health Services	(989) 385-5174
Dental Lifeline Network (low income; severe problems only)	(303) 534-5360
Mobile Care Group (dental care for homebound / nursing & assisted care facilities)	(248) 809-6398
Aspen Dental Clinic- - Mt Pleasant	(989) 607-0507
Austin & Austin Dentistry – Clare.....	(989) 386-7021
Boss Dental PLC - Mt Pleasant	(989) 775-3336

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Bryan Dental - Mt Pleasant(989) 773-9051	American Medical Equipment - Mt Pleasant
Dr. Kimber DeWitt(989) 772-4555
Mt Pleasant(989) 772-3939	Freedom Med Alert(877) 318-4993
Clare(989) 386-9570	LifeWatch Cardiac Monitoring(800) 517-6330
Elizabeth Winegar, DDS – Clare ... (989) 386-7021	Muscular Dystrophy Association ... (800) 572-1717
Keith Bever Jr, DDS - Mt Pleasant (989) 773-9793	<i>Medical equipment loan closets in Michigan</i>
Kenneth Egger, DDS - Mt Pleasant (989) 773-3560	One-Drop Diabetes Support & Supplies (http://onedrop.today)(800) 437-1474
Michigan Community Dental Clinic - Mt Pleasant.....(989) 772-4026	Mid-Michigan Health Home Medical Equipment(800) 862-5002
Midland & Mt Pleasant Oral and Maxillofacial Surgery.....(989) 773-8065	Oakland Orthopedic - Mt Pleasant(989) 775-7320
Mt Pleasant Family Dental - Mt Pleasant(989) 773-2133	Paralyzed Veterans of America- MI(800) 638-6782
Nimkee Memorial Wellness Center - Mt Pleasant.....(989) 775-4600	<i>Wheelchairs, power chairs, adaptive sports equipment, hoists, lifts, etc.</i>
Paula Druskins, DDS - Mt Pleasant (989) 772-3216	Rizzuto's Wide Shoes(800) 257-0808
Richards and Ribitch Dentistry - Mt Pleasant(989) 772-1344	Sheldon Medical Supply - Mt Pleasant(989) 773-0300
Scott Dexter PC - Mt Pleasant(989) 772-3046	Sparrow Regional Medical Supply - Mt Pleasant.....(989) 772-7244
Hearing Aids	Strive Medical – Catheters & Wound Care(888) 771-9229
AccuQuest Hearing Center – Mt Pleasant(989) 546-7600	The National Federation of the Blind(410) 659-9314
Allied Hearing – Mt Pleasant(989) 773-1209	United Cerebral Palsy Michigan ... (517) 203-1200
Bieri Hearing Specialists(888) 885-0976	<i>Michigan Assistive Technology Loan Fund and Michigan Employment Loan Fund</i>
Central Michigan University Audiology Clinic(989) 774-3904	US Med (877) 840-8218
Michigan Hearing – Mt Pleasant (989) 546-4439	
Miracle Ear – Mt Pleasant(989) 817-4700	MENTAL HEALTH & COUNSELING SERVICES
Relay Center for Deaf/Hard of HearingVoice/TTY (844) 578-6563	Crisis Hotline (800) 317-0708
Medical Equipment & Loan Closets	Addiction Solutions Counseling Center Mt Pleasant(989) 779-9449
Airway Oxygen Inc - Mt Pleasant ..(989) 772-9885	Community Mental Health for Central Michigan - Mt Pleasant(989) 772-5938
ALS of Michigan(800) 882-5764	
<i>Equipment loan program for ALS and PLS patients only</i>	

APPENDIX D

Central Michigan University Programs in Mt Pleasant

Psychological Training and Consultation Center.....(989) 774-3904

Center for Community Counseling & Development.....(989) 774-3532

Listening Ear Crisis Intervention Center Mt Pleasant(989) 772-2918

Mt Pleasant Community Counseling Associates(989) 773-0222

Problem Gambling Help-Line 24/7(800) 270-7117

Veteran's Crisis Line(800) 273-8255

Pharmacies & Prescription Assistance

CVS Pharmacy(989) 772-1945

Downtown Drug - Mt Pleasant(989) 773-5544

Elder Prescription Insurance Program(866) 747-5844

Senior Prescription Drug Assistance

Evans Drug Store - Shepherd(989) 828-6057

Hansen's Pharmacy and Variety – Blanchard(989) 427-5275

Kmart Pharmacy - Mt Pleasant(989) 773-6991

Kroger Pharmacy - Mt Pleasant(989) 773-3047

LifeSource Direct (uninsured/underinsured)(866) 340-4748

Meijer Pharmacy - Mt Pleasant(989) 775-2110

MiRx Discount Card(866) 755-6479

For Patients Without Drug Coverage

Mission Pharmacy - Mt Pleasant ... (989) 773-8200

MMAP(800) 803-7174

Michigan Medicare/Medicaid Assistance Program

NeedyMeds (800) 503-6897

Partnership for Prescription Assistance www.pparx.org

Rite Aid Pharmacy - Mt Pleasant ... (989) 772-7677

RxAssistwww.rxassist.org

Walgreens Pharmacy - Mt Pleasant(989) 775-8098

RETAIL DISCOUNT DRUG PROGRAMS

(ask pharmacist)

CVS • Meijer • Target • K-Mart • RiteAid

Walgreens • Kroger • Sam's Club • Walmart

Substance Abuse

CDC Hotline(800) 232-4636

Alcoholics Anonymous Hotline 24/7(313) 831-5550

Addiction Solutions Counseling Center Mt Pleasant(989) 779-9449

Families Against Narcotics(586) 438-8500

Mid-State Health Network of MI ... (517) 253-7525

Narcotics Anonymous (NA) Hotline.....(800) 230-4085

Problem Gambling Help-Line 24/7(800) 270-7117

SAMHSA Hotline(800) 662-4357

Substance Use Treatment Services 24/7(800) 834-3393

The Watershed Addiction Treatment Programs(888) 442-4371

Vision Providers

Central Eyewear - Mt Pleasant(989) 772-0272

Clare/Farwell Lions Club – Info about vision screenings & eyeglasses(989) 539-1010

Evans Eye Care - Mt Pleasant(989) 775-3937

L.O. Eyecare - Mt Pleasant(989) 772-3339

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Mid-Michigan Retina PLC - Mt Pleasant
(989) 317-3555

Pleasant Optics - Mt Pleasant(989) 773-7747

The Eye Site - Mt Pleasant(989) 773-2020

Vision USA(800) 766-4466
Assistance with eye exams

Wal-Mart Vision Center - Mt Pleasant
(989) 773-9714

HOUSING ASSISTANCE

Emergency Shelters & Warming Centers

Women’s Aid Service of Mt Pleasant Counseling &
 emergency shelter(844) 349-6177

Heating/Utility Assistance & Home Repairs/ Weatherization

EightCap, Inc(989) 772-0110

The Heat and Warmth Fund(800) 866-8429

USDA Rural Development.....(517) 324-5190

Low Income Housing

Action Agency(800) 443-5518

EightCap, Inc(989) 772-0110

Home Stretch(231) 947-6001

HUD Rental Assistance(800) 569-4287

USDA Rural Development(517) 324-5190

LEGAL ASSISTANCE

Center for Civil Justice(800) 724-7441

Legal Aid Legal Service(866) 531-6309

Legal Hotline for Michigan Seniors.....
(800) 347-5297

Legal Services of Eastern Michigan
(800) 322-4512

Serving: Arenac, Bay, Clare, Genesee, Gladwin, Gratiot,

Huron, Isabella, Lapeer, Midland, Saginaw, Sanilac, St. Clair, and Tuscola counties

PARENTING/PREGNANCY RESOURCES

24-Hour Crisis Line(800) 275-1995

Isabella County Child Advocacy Center - Mt Pleasant.....
 (989) 317-8787

EightCap, Inc(989) 772-0110

Great Start Collaborative of Gratiot & Isabella Counties.....(989) 433-2962

National Parent Help Line 24/7(855) 427-2736

CMU Center for Children, Families & Communities Mt Pleasant(989) 774-6639

Women’s Resource Center 24/7 (800) 275-1995

SUPPORT GROUPS

Bariatric Support Group – Mt Pleasant
(989) 463-6699

CMU Counseling Center(989) 773-0078

CMU Sexual Aggression Peer Advocates – 24/7 Support.....(989) 774-2255

Isabella County Commission on Aging
(989) 772-0748

Listening Ear Crisis Intervention Center Mt Pleasant
(989) 772-2918

Mid-Michigan Health System - Support Groups
(800) 999-3199

Nami Magizi Nangwiihgan (Abuse Services) Mt Pleasant
(989) 775-4400

Planned Parenthood(800) 230-7526

Women’s Aid Service of Mt Pleasant - Counseling & emergency shelter
(844) 349-6177

Women’s Resource Center 24/7 (800) 275-1995

APPENDIX D

TRANSPORTATION

American Cancer Society Road to Recovery (Transportation for medical appointments)	(800) 227-2345
Affordable Taxi - Mt Pleasant	(989) 775-7500
Dean Transportation - Mt Pleasant	(989) 773-0642
Chippewa Cab Medical Transport	(989) 779-2227
Greyhound Bus Lines - Mt Pleasant	(800) 454-2487
Holt Transportation - Saginaw	(989) 860-1004
Isabella County Transportation Commission Mt Pleasant	(989) 772-9441
Joe Cab Limo Service - Mt Pleasant	(989) 944-1862
Michigan Transportation Services	(877) 777-7900
S & L Transportation	(800) 823-9044

Disability Services

Ride Safe Taxi - Mt Pleasant	(989) 621-0775
U Ride Taxi - Mt Pleasant	(989) 779-8294

TRIBAL SERVICES

Department of Civil Rights.....	(517) 335-3165
Michigan Indian Employment and Training Services.....	(800) 591-8820
Michigan Indian Legal Services	(800) 968-6877
Michigan Indian Tuition Waiver	(231) 439-5247
U.S. Office of Indian Education	(202) 260-3774
Michigan Dept of Health & Human Services - Na- tive American Affairs Office	(517) 335-7782
Saginaw Chippewa Indian Tribe ...	(989) 775-4000

VETERANS AFFAIRS

American Legion Information	(800) 433-3318
American Legion-Owen Barrett, Post 110 Mt Pleasant	(989) 772-9709
CHAMPVA	(800) 733-8387
CHAMPVA Meds by Mail	(800) 385-0235
Disabled American Veterans	(877) 426-2838
Michigan Veterans Affairs	(800) 642-4838
Michigan Chapter of Paralyzed Veterans of Ameri- ca - Loan Closet/Equipment Donation	(800) 638-6782
Paralyzed Veterans of America Headquarters	(800) 424-8200
Veterans Administration	(800) 827-1000
Veterans Affairs of Isabella County	(989) 317-4093
Veteran's Crisis Line	(800) 273-8255
Vietnam Veterans of America	(800) 882-1316

VOLUNTEER OPPORTUNITIES

Big Brothers/Big Sisters of Mt Pleasant	(989) 772-5232
Community Cancer Services of Isabella County	(989) 772-2524
Isabella County Commission on Aging Mt Pleasant	(989) 772-0748
United Way of Gratiot/Isabella Counties	(989) 463-6245