



LMAS DISTRICT HEALTH DEPARTMENT 2009 COMMUNITY PLAN

Priority - Cardiovascular Disease and Obesity

Goals

Community members will be aware of the risk factors, prevention efforts and early detection related to cardiovascular disease and obesity.

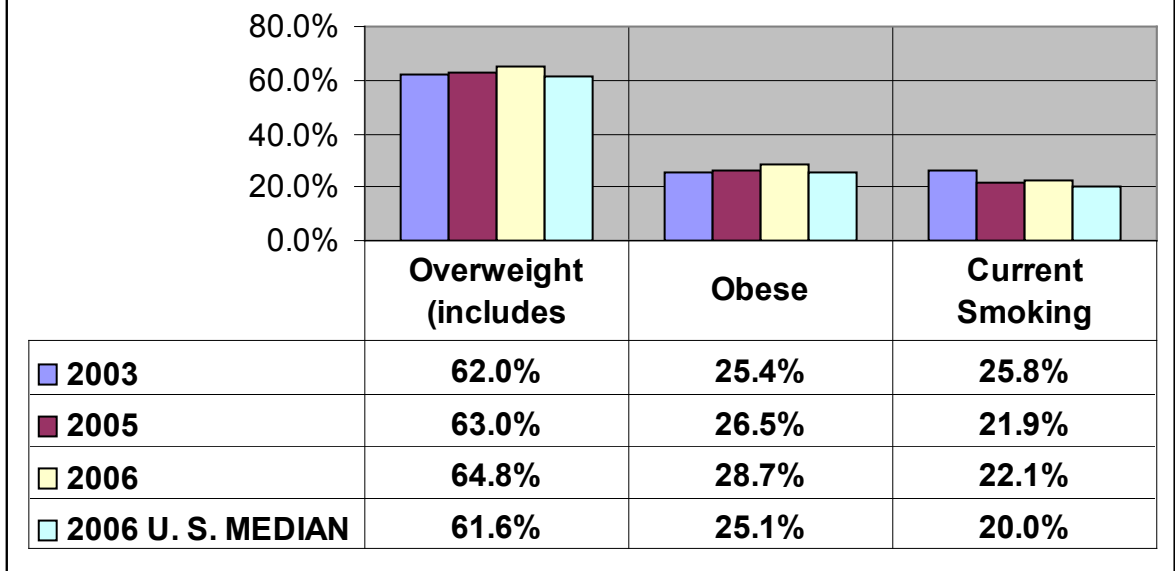
Objectives

- Utilize area youth to increase the community's awareness of the effects of tobacco and second hand smoke.
- Create a media campaign primarily focusing on men and the warning signs of cardiovascular disease.
- Educate community on the implementation of the smoke free ordinance.
- Identify at risk populations and educate regarding the effects of tobacco and offer assistance with community cessation resources.
- Promote healthy lifestyle information to clients.
- Participate in local efforts to promote healthy lifestyles

Strategies

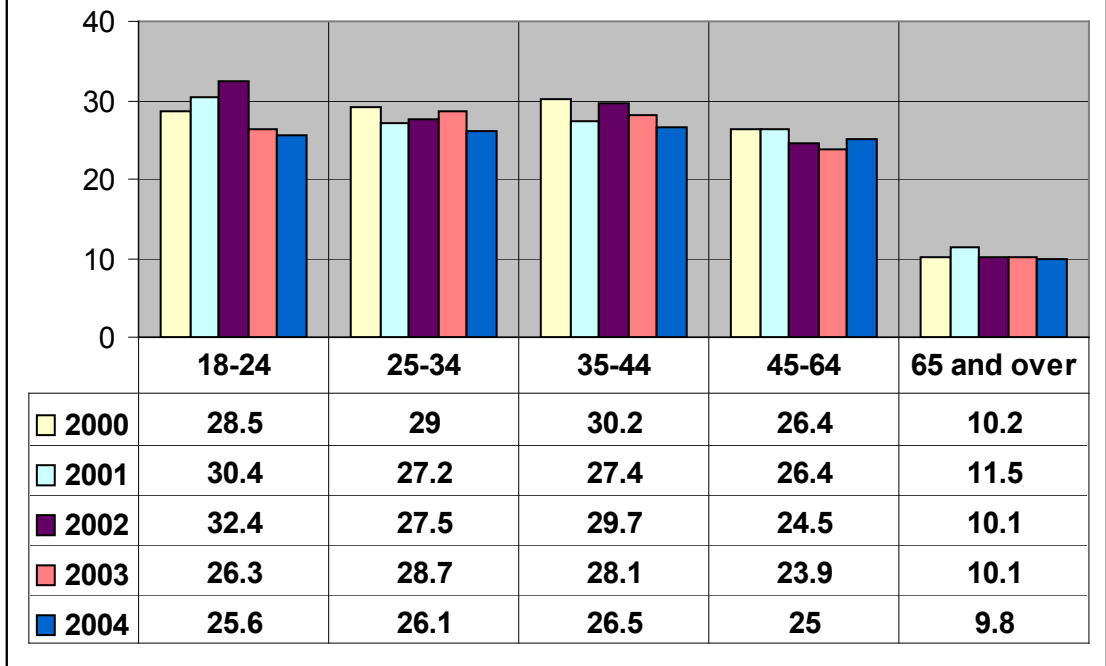
- At least one area youth coalition will be mobilized to complete a community awareness project regarding increasing the public's awareness of the effects of tobacco and second hand smoke.
- A newspaper article will be created and published in the four LMAS counties emphasizing the risks of cardiovascular disease.
- LMAS will partner with local businesses to distribute information tags on snow shovels warning consumers of the cardiovascular risks associated with shoveling.
- LMAS will provide MDOC "Expectant Mother's Quit Kit"/"Quit Kit" to expectant mothers identified through the WIC clinic in each office.
- LMAS will provide materials and items that highlight healthy lifestyle choices to WIC clients.
- LMAS will participate in local community coalitions related to healthy lifestyles especially those that focus on childhood obesity.
- LMAS will work with coalition in Newberry to design and implement a walking trail, which is designated as Smoke-Free.

Michigan Cardiovascular Risk Factors



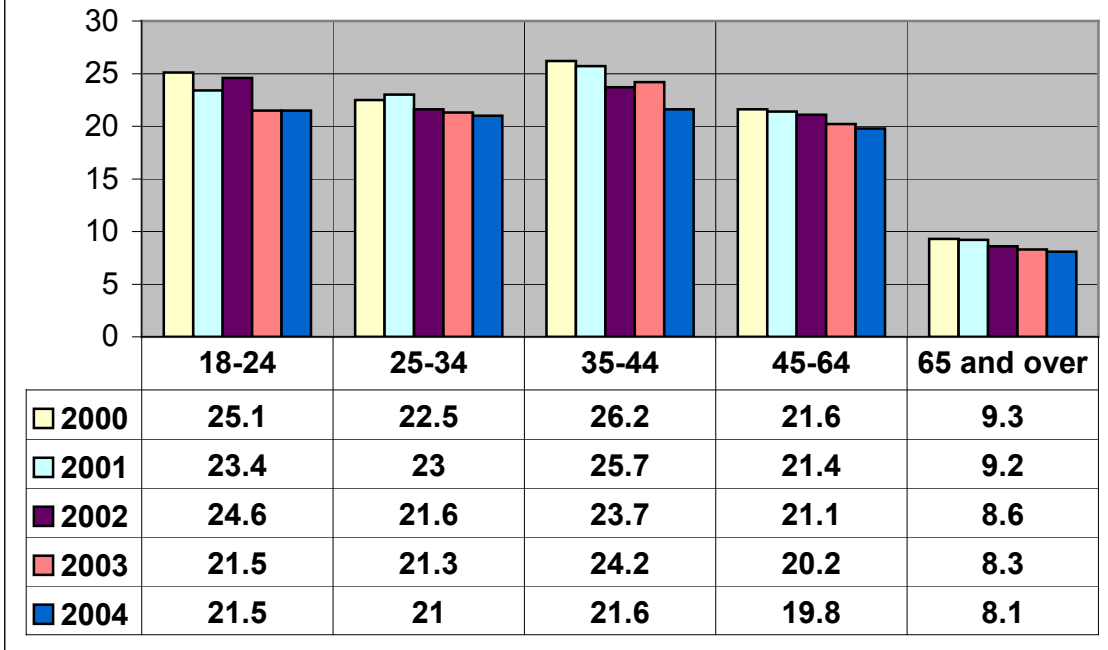
Source: Behavioral Risk Factor Surveys, MDCH, 1998-2003, 2005, and 2006; U.S. BRFSS 2006 Data

Males - Percent of Current Smokers (18 yrs. and over)



Source: National Center for Health Statistics, www.cdc.gov/nchs/fastats/smoking

Females - Percent of Current Cigarette Smokers (18 yrs. and over)



Source: National Center for Health Statistics, www.cdc.gov/nchs/fastats/smoking

Michigan Adult Current Smoking Rate (2006): 22.1%

(Source: MDCH, Michigan Behavioral Risk Factor Survey, 2006)

Michigan Prenatal Smoking Rate (2003): 14.4%

(Source: MDCH, Division for Vital Records and Health Statistics and Centers for Disease Control and Prevention; Smoking Attributable Morbidity, Mortality and Economic Costs (SAMMEC), 2003.)

Impact of Smoking: Luce, Mackinac, Alger, and Schoolcraft Counties 2003

- ✓ Deaths caused by smoking: 77
- ✓ Deaths caused by Second Hand Smoke: 9
- ✓ Fires due to smoking materials: 4
- ✓ Adult Smoking Rate: 33.7%

Source: Michigan Department of Community Health Vital Statistics and SAMMEC 3.1. Fire in Michigan, Department of State Police- Fire Marshall Division.

Priority - Access to Care

Goals

Community will be knowledgeable about resources available related to accessing health care.

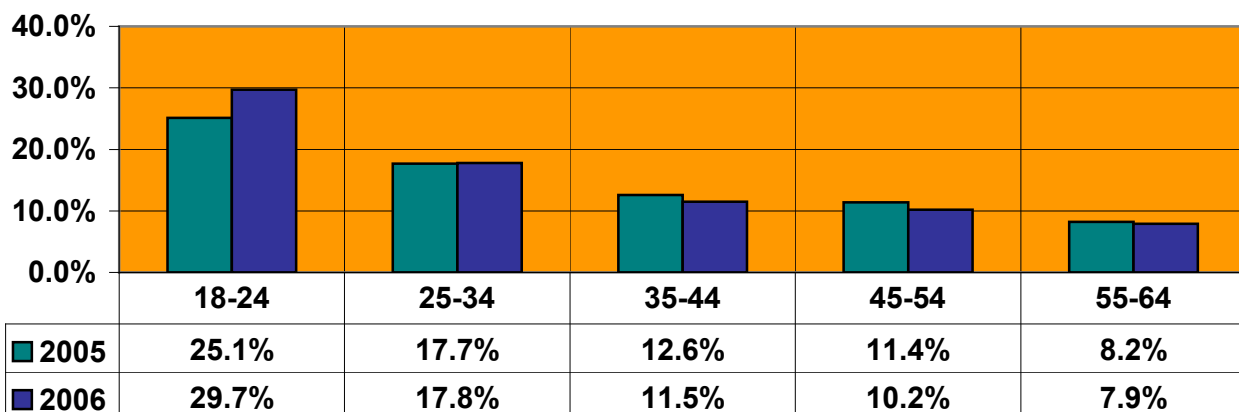
Objectives

- LMAS will collaborate with stakeholders to begin to address the community's needs related to health care access and work to increase the community's awareness regarding this issue in Alger County.
- LMAS will collaborate with access to care systems to support efforts to impact the burden of infectious and chronic diseases in vulnerable populations in the community.

Strategies

- Clinic staff will identify clients that have barriers to accessing care and assist with the application process for insurance coverage, provider identification or other barriers as identified.
- LMAS will participate in community workgroups to assist in identifying barriers to accessing care and creating an access to care framework.
- LMAS will promote MI Child, Plan First, CSHC and other health care resources in their clinics and community.
- LMAS will refer potentially eligible clients to Access to Care Programs available in the community.
- LMAS will offer a limited number of vaccines to Access to Care clients

**Percentage of Michigan Residents
with No Health Insurance, Grouped by Age**



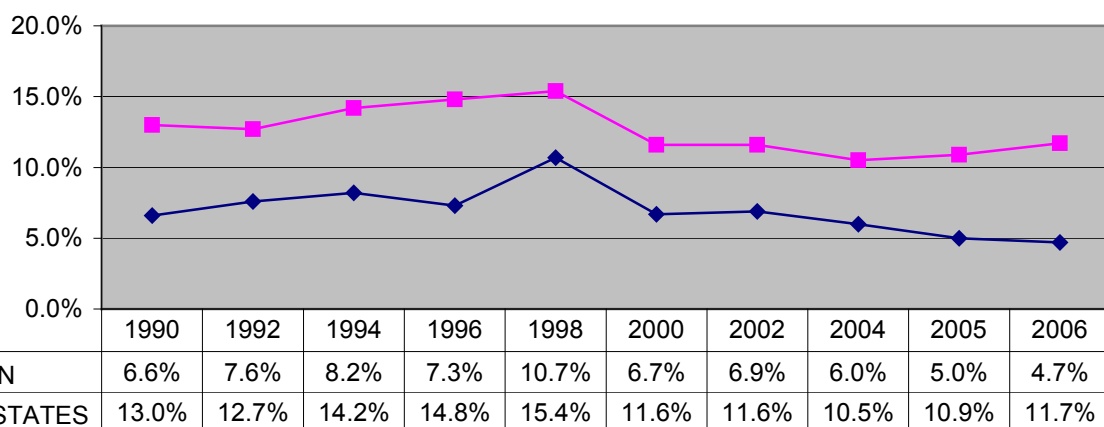
Source: MDCH Behavioral Risk Factor Survey 2005, 2006

Uninsured Estimates (2000) for Children under 18 years of age

	Luce	Mackinac	Alger	Schoolcraft	Michigan
Below Poverty	47	54	44	50	60,532
100-199% Poverty	56	117	64	82	59,546
Over 200% Poverty	50	104	76	68	109,438
All Income Levels	153	276	184	200	229,516
Total Population (19 years and younger)	1657	2907	2265	2232	2,884,065

Source: Primary Health Care Profile of Michigan –Data Book 2002

PERCENTAGE OF UNINSURED CHILDREN (UNDER AGE 18)



Source: MDCH Characteristics of the Uninsured 2008

Priority - Substance Use and Abuse

Goals

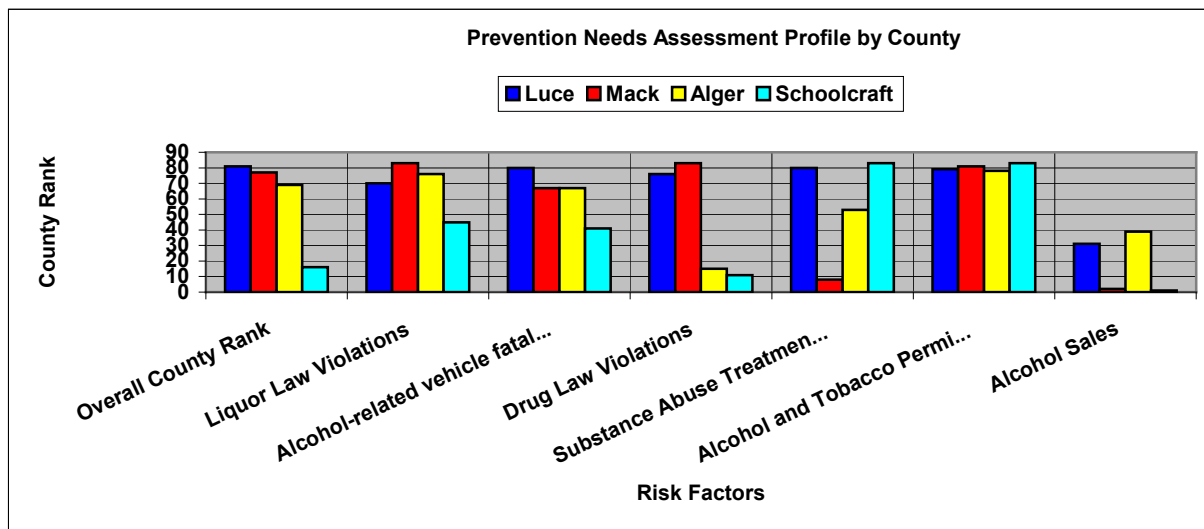
The community will have increased awareness of substance use and abuse issues and how to access services.

Objectives

- LMAS will collaborate with community partners to provide programs that will target high-risk groups.
- LMAS will collaborate with community partners to identify emerging substance abuse issues and create action plans.
- LMAS will collaborate with community correction agencies to provide substance abuse treatment for incarcerated clients.
- LMAS will collaborate with stakeholders to increase awareness of barriers in accessing services in Luce, Mackinac, Alger and Schoolcraft Counties and actively refer clients.

Strategies

- LMAS will utilize youth surveys and other surveys made available to identify behaviors that put the community at risk.
- LMAS will participate in activities that promote substance abuse awareness in the community, like Red Ribbon Week, Candle Light Vigil, UP Youth Conference, Action Troop, Town Hall meetings, etc.
- LMAS staff will work with local courts, schools and community centers to promote prevention programs, as designated in the Prevention Plan and treatment services.
- LMAS will develop and maintain a marketing committee to facilitate community education.
- LMAS will collaborate with partnering agencies/community groups to provide community awareness regarding issues of concern within the scope of Community Health Plans.
- LMAS will provide an agency representative for all county Collaborative Body and Community Task force/workgroup meetings as they apply to the mission of our agency.
- LMAS, Community Health Division will complete a Quarterly Status report identifying all county barriers in accessing services and client satisfaction outcomes. This report will be posted in each county waiting area on a quarterly basis and submitted to Stakeholders on an annual basis.
- As a provider of the Treatment services for all four county Drug Court Programs, LMAS will be an active member of the drug court team and attend all case management meetings.
- LMAS will develop media messages to promote awareness and educate the public regarding substance use and abuse.
- LMAS will collaborate with local coalitions to provide alcohol and drug free events.
- LMAS will collaborate with at least one county community corrections agency to provide jail diversion services.
- LMAS will distribute Substance Abuse resource information to all WIC clients.



Source: Michigan Department of Community Health, Prevention Needs Assessment Profile for Luce, Mackinac, Alger and Schoolcraft Counties. Overall county rank is based on the average of 19 risk scores, equally ranked: 1=lowest risk; 83=highest risk.

Priority - Women's Health Issues

Goals

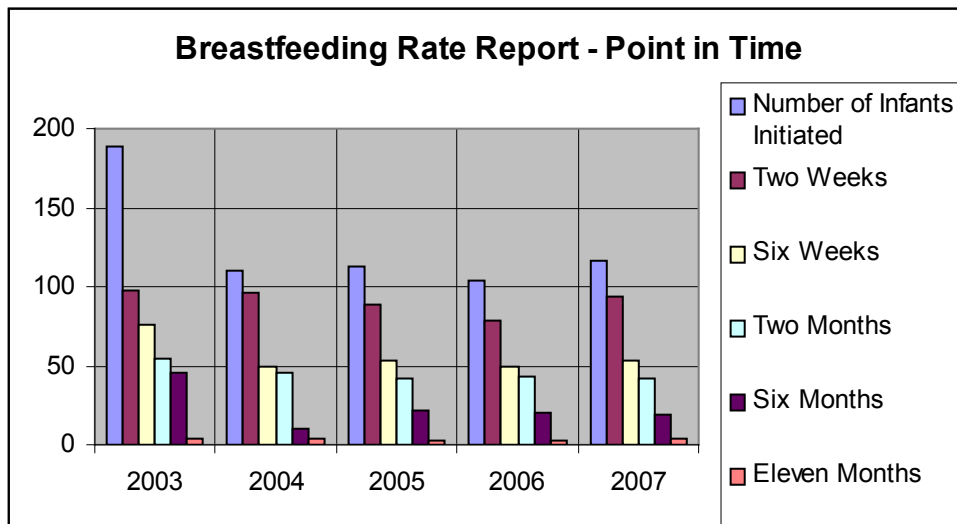
Women will have a greater awareness of health issues that affect them and the resources available to them.

Objectives

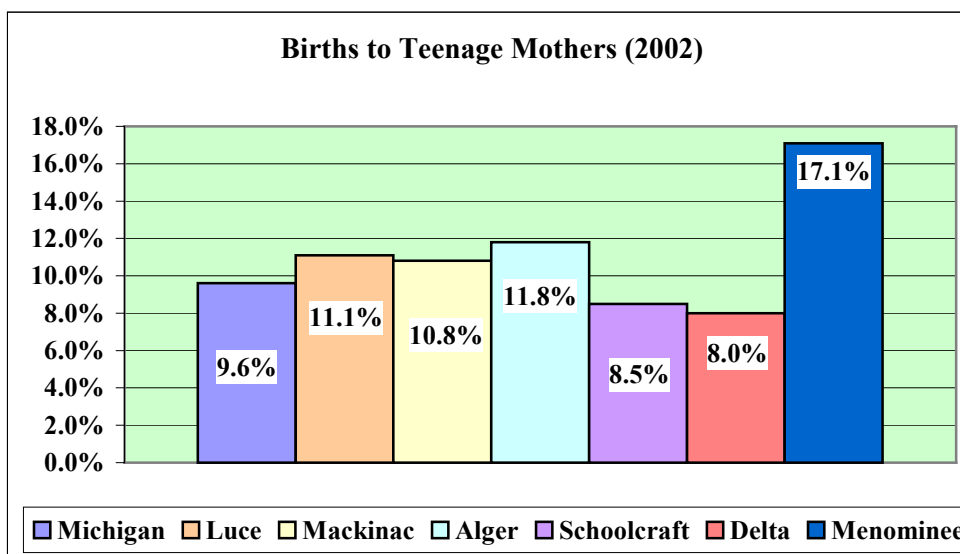
- Educational materials will be developed and/or obtained for women that highlight health issues including chronic and infectious diseases.
- LMAS will collaborate with other community partners to plan community events such as local health fairs.
- LMAS will provide educational information on women's health and prevention to clinic clients, targeting teen clients and pregnant women.

Strategies

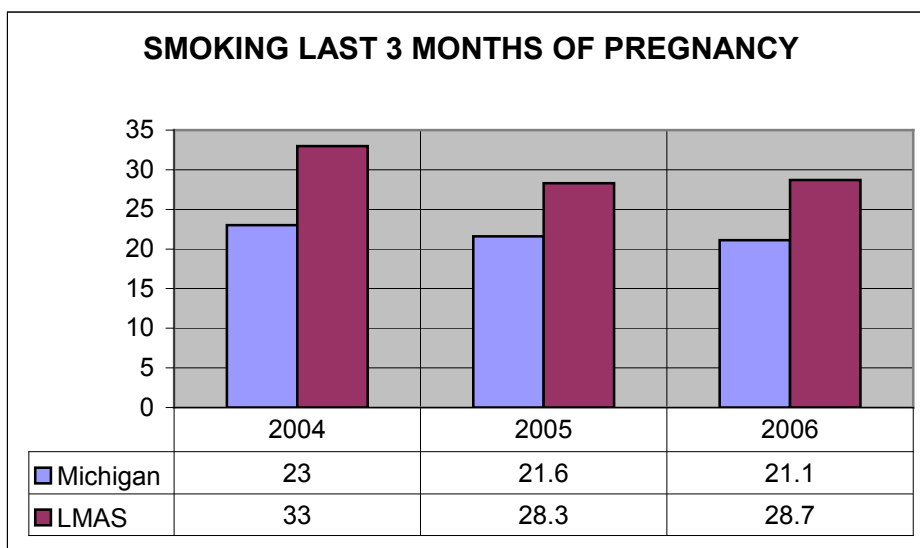
- Brochures/handouts highlighting reproductive health issues and pregnancy issues will be developed and distributed.
- Brochures/handouts highlighting chronic health issues and promoting healthy life styles will be developed and/or distributed.
- Educational encounters will be offered to local schools, alternative education sites or youth groups.
- LMAS staff will assist in the planning and participate in community events like health fairs.
- LMAS will participate in local Breastfeeding Network teleconferences.
- LMAS staff will be updated regarding issues related to post-partum depression.
- LMAS will distribute an article highlighting the importance of breastfeeding to local media.
- LMAS will develop and distribute "ABC" fliers and literature to clients and other community members and agencies.
- LMAS staff will be involved with "family life" committees when invited by area schools.
- LMAS staff will promote the HPV vaccine to eligible females.
- LMAS staff will promote programs that support Women's Health such as Family Planning, BCCCP and the Maternal Infant Health Program



Source: Michigan Dept of Community Health, Breastfeeding Initiation Duration Report - Point in Time, BF Rate Summary - 8/08/07



Source: Primary Health Care Profile of Michigan Data Book February 2002



Source: WIC Annual Report Data, 2007