



COMMUNITY HEALTH IMPROVEMENT PLAN **SAGINAW COUNTY**



2023-2026

***BWELL SAGINAW
COALITION PARTNERS:***

Ascension St. Mary's Hospital

CMU Medical Education
Partners

Covenant HealthCare

Great Lakes Bay Health Centers

HealthSource Saginaw

Michigan Department of Health
& Human Services-Saginaw

Michigan Health Improvement
Alliance

Saginaw Community
Foundation

Saginaw County Community
Mental Health Authority

Saginaw County Health
Department

Saginaw Intermediate School
District

Saginaw Valley State University

United Way of Saginaw County

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VISION



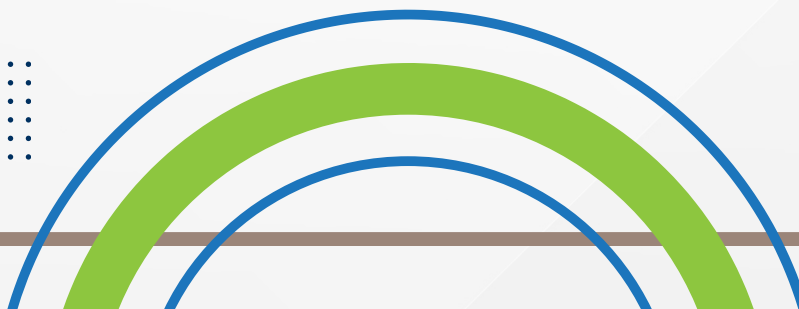
To move Saginaw County
into the top 25 healthiest
communities in Michigan



INTRODUCTION

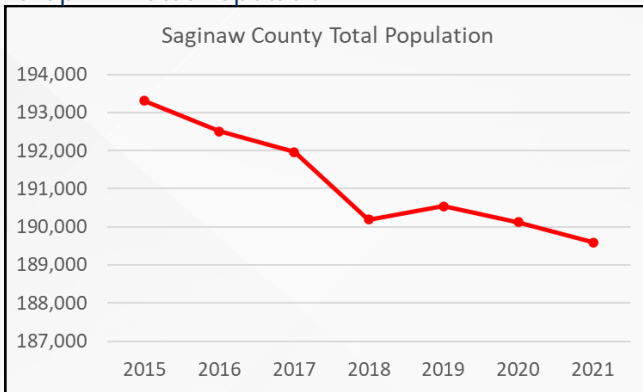
The Saginaw County Health Department, along with its many partners, is pleased to present the 2023 Community Health Improvement Plan (CHIP). The CHIP is possible because of all the hard work and support from the BWell Saginaw Partner Coalition. The BWell Saginaw Partner Coalition is a community collaborative comprised of several multidisciplinary organizations. These organizations came together throughout several months to review the findings from the 2023 Community Health Assessment and create a plan to address the health priorities for Saginaw County.

This document summarizes the identified health priorities and outlines the plan for improving the health of Saginaw County residents. The first section describes the demographics of Saginaw County. The next section focuses on the health assessment process. The health assessment was completed using information through a variety of methods, which included a community survey, community conversations and existing data sources. The final section describes the CHIP process. In this section the health priorities are identified with supporting data and desired outcomes.



SAGINAW COUNTY DEMOGRAPHICS

Graph 1: Total Population

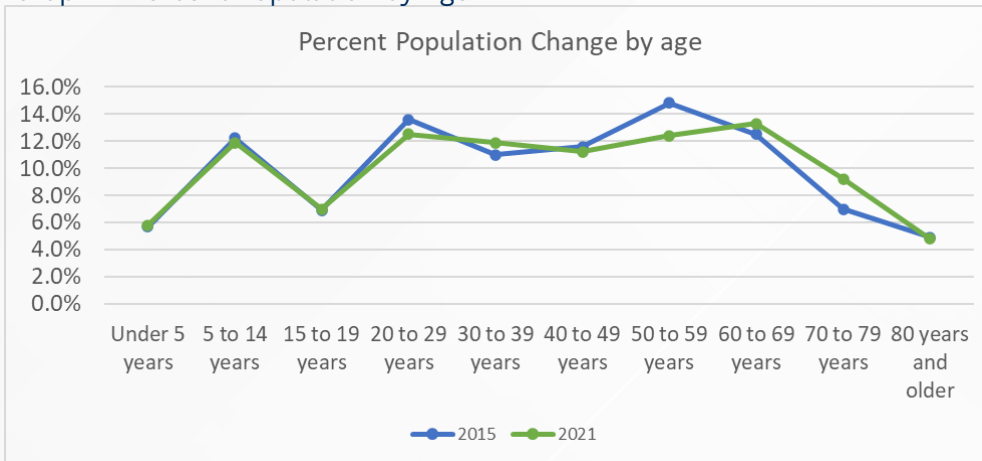


Saginaw County has seen a 2% decline in total population since 2015.

The largest declines were among persons aged 50-59 at 2.4% followed closely by 20-29 years of age at 1.1%.

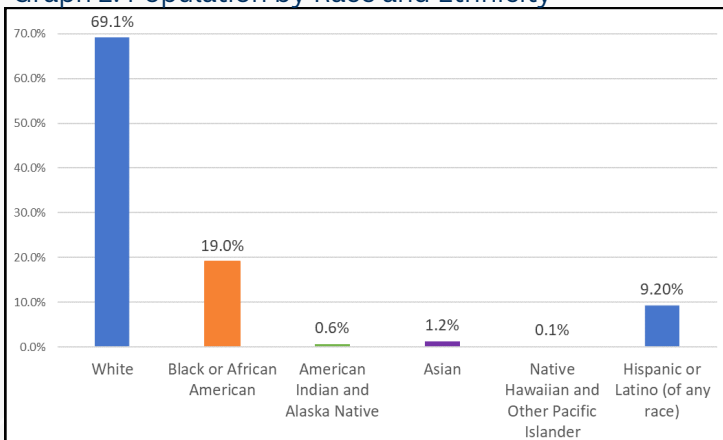
US Census- American Communities Survey 2021

Graph 2: Percent Population by Age



US Census- American Communities Survey 2021

Graph 2: Population by Race and Ethnicity



Looking at the diversity of Saginaw County, the majority of the population, 69.1%, identify as White, 19% identify as Black or African American and 9.2% identify as Hispanic.

US Census- American Communities Survey 2021



SAGINAW COUNTY DEMOGRAPHICS

Percent Unemployed	Percent Bachelors Degree or Higher	Median Household Income
5%	23%	\$49,565

US Census- American Communities Survey 2021

Poverty in Saginaw County - 2021

Family Size	Federal Poverty Level - 2021
1	\$12,760
2	\$17,240
3	\$21,720
4	\$26,200

- **21.8%** of **all people** in Saginaw earn and income below the poverty level.
- **17%** of **all families** in Saginaw live below the poverty level
- Of the families in poverty.
- **42%** are **female single parent households**.

US Census- American Communities Survey 2021

Saginaw county ALICE population - 2021

(Asset Limited, Income Constrained, Employed)

ALICE households have incomes above the federal poverty level but struggle to afford basic household necessities.

In 2021, 45% of Saginaw families live in an ALICE household



United for Alice

COMMUNITY HEALTH ASSESSMENT PROCESS

Background

The Saginaw County Health Department (SCHD), founded in 1928 as the second oldest health department in Michigan, has a mission to protect, preserve, and promote a healthy community and environment for all. The SCHD’s vision is to be a transformative leader, partner, and service provider building a safe and healthy community. It is within this purpose that the SCHD, alongside our partners on the BWell Saginaw Partner Coalition, have developed an ongoing county wide community health assessment (CHA). The goal of the 2023-2026 CHA Report is to offer a meaningful understanding of the most significant health needs, serving as the data backbone to inform efforts to address those needs. To see a full copy of the 2023 – 2026 CHA visit www.bwellsaginaw.org.

Purpose

The goals of the CHA are to:

- Determine the health status of Saginaw County residents and assess the capacity of the public health infrastructure.
- Identify gaps in programs and services that are needed within the community.
- Improve existing programs and services to better serve Saginaw County residents.

Methodology

The Mobilizing for Action through Planning and Partnerships process was used to conduct the community health assessment and improvement plan. MAPP is a community wide strategic planning process for improving public health. This framework helps communities prioritize public health issues, identify resources for addressing them, and take action to improve conditions that support healthy living.

Community Health Status Assessment

The SCHD collected secondary data from multiple sources to determine the community’s health status. Existing data included demographics, employment, poverty, morbidity, mortality, health behaviors and others. Statistical trends and data indicators were collected on the most granular level were available and pertinent, including race and ethnicity to examine potential health disparities. Comparison data was also collected when available and pertinent to provide further context to the data and it’s analysis.



COMMUNITY HEALTH ASSESSMENT PROCESS

Methodology

Community Themes and Strengths Assessment

Conducting the Community Themes and Strengths Assessment (CTSA), answers the following questions: 1) What is important to the community? 2) How is quality of life perceived in the community? 3) What assets does the community have that can be used to improve community health?

Community Survey

A community survey was developed with the assistance of a community advisory committee. Questions on the survey collected information on demographics, income, education, physical health, mental health, substance use, COVID-19, social determinants of health, and the strengths of the community.

Community Conversations

Community Conversations are similar to focus groups but are more relaxed. They are conducted as though you are sitting around your kitchen table having a conversation. Participants were asked questions about what they thought were the strengths and areas of improvement in their neighborhoods/communities. They were also asked to share what their ideal neighborhood/community would look like.

Local Public Health Systems Assessment

Conducting the Local Public Health System Assessment (LPHSA), answers the following questions: 1) What are the activities, competencies, and capacities of the local public health system? 2) How are the 10 Essential Public Health Services being provided to the community? The SCHED gathered this information in 2 ways. First, through a survey completed by local community organizations. Second, through a workshop in which organizations came together to identify their strengths and weaknesses in how they provide the 10 essential services.

Forces of Change Assessment

Conducting the Forces of Change (FOC) Assessment answers the following questions: 1) What is occurring or might occur that affects the health of the community or the local public health system? 2) What specific threats or opportunities are generated by these occurrences? The FOC was completed through a facilitated discussion with identified key stakeholders in the community.



COMMUNITY HEALTH ASSESSMENT PROCESS

County Health Rankings

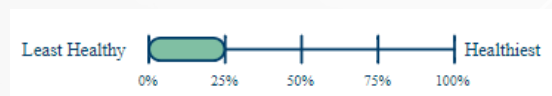
The County Health Rankings & Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The County Health Rankings show the rank of the health of nearly every county in the nation and illustrate that much of what affects health occurs outside of the doctor’s office. The Rankings help counties understand what influences the health of residents and how long they will live. The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

2023 Overall Rank: 76 of 83 Counties

Health Outcomes

Health outcomes represent how healthy a county is right now, in terms of length of life but quality of life as well.

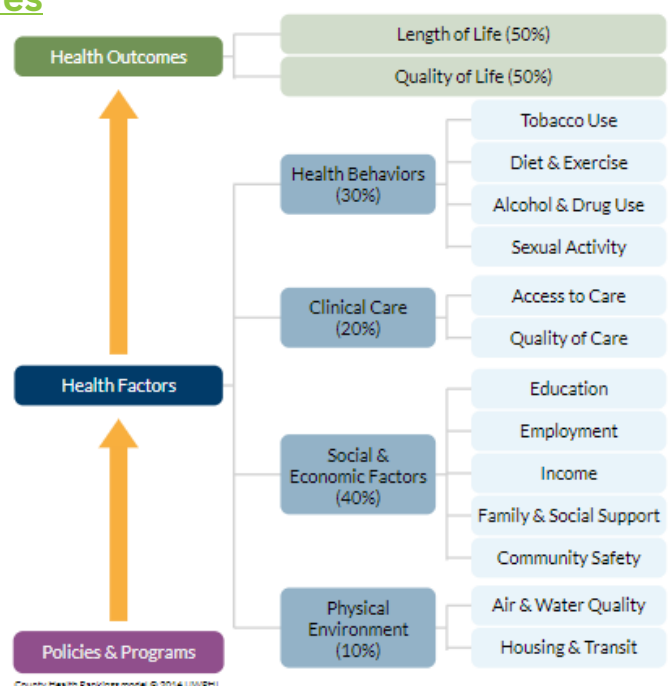
Saginaw (SA) is ranked **among the least healthy counties** in Michigan (Lowest 0%-25%).



Health Factors

Health Factors represent those things we can modify to improve the length and quality of life for residents.

Saginaw (SA) is ranked **among the least healthy counties** in Michigan (Lowest 0%-25%).



COMMUNITY HEALTH IMPROVEMENT PLAN

Purpose

As a result of the Community Health Assessment (CHA), three health priority areas were identified with certain focus areas for each one. The Community Health Improvement Plan (CHIP) outlines the goals and strategies for each health priority area.

Structure

BWell Partner Coalition

The BWell Saginaw Partner Coalition provides leadership, oversight and direction for the health improvement plan. Two workshop sessions were held to create a goal for each health priority and to generate strategies to accomplish those goals.

Workgroups

Each strategy will form a work group comprised of various community organizations committed to working on the strategy. Strategy maps were created that identified the organizations and specific tasks they are committed to doing. Based off the strategy maps, each work group will create an action plan with specific tasks that will be performed, who will perform them and how performance will be measured.

Health Equity Council

To ensure strategies are created with an equity lens, the BWell Saginaw Health Improvement plan is working very closely with the Saginaw County Health Equity Council (HEC). The HEC is a coalition of community based organizations and community members focusing on the elimination of documented health disparities and to seek improvement of the delivery of health services to Saginaw County residents. The HEC coordinator is a member of the BWell Saginaw Partner Coalition and regularly attends the meetings bringing forth any concerns or suggestions from the HEC. HEC members will also be represented on workgroups to help inform and design interventions.

Saginaw County Health Priority Areas

**Obesity and Chronic Disease
Mental Health and Substance Use
Maternal and Child Health**



Community Health Improvement Plan

Priorities, Goals & Strategies

Obesity/Chronic Disease

By December 2026 Saginaw County will redefine what a healthy body status is and improve measures by 20%.

- 1 Define healthy body status and collect data
- 2 Develop and implement county wide awareness messaging with a focus on health literacy
- 3 Improve the implementation of nutrition standards in schools
- 4 Develop toolkit for healthcare providers to use with patients
- 5 Expand ongoing efforts to improve food access and affordability

Mental/Substance Use

By December 2026, develop an integrated continuum of care for Saginaw County. By December 2026, reduce fatal and non-fatal overdoses in Saginaw County by 50%.

- 6 Improve access for mental health services in all Saginaw county schools (early screening, clear path to services available and enough provider capacity building county wide)
- 7 Develop a new model of multi-agency collaboration to improve access and serve as a point of entry for mental health services
- 8 Build/Expand mental health navigators
- 9 Develop a comprehensive county wide response to reduce overdoses in Saginaw County, including prevention, harm reduction, treatment, and recovery

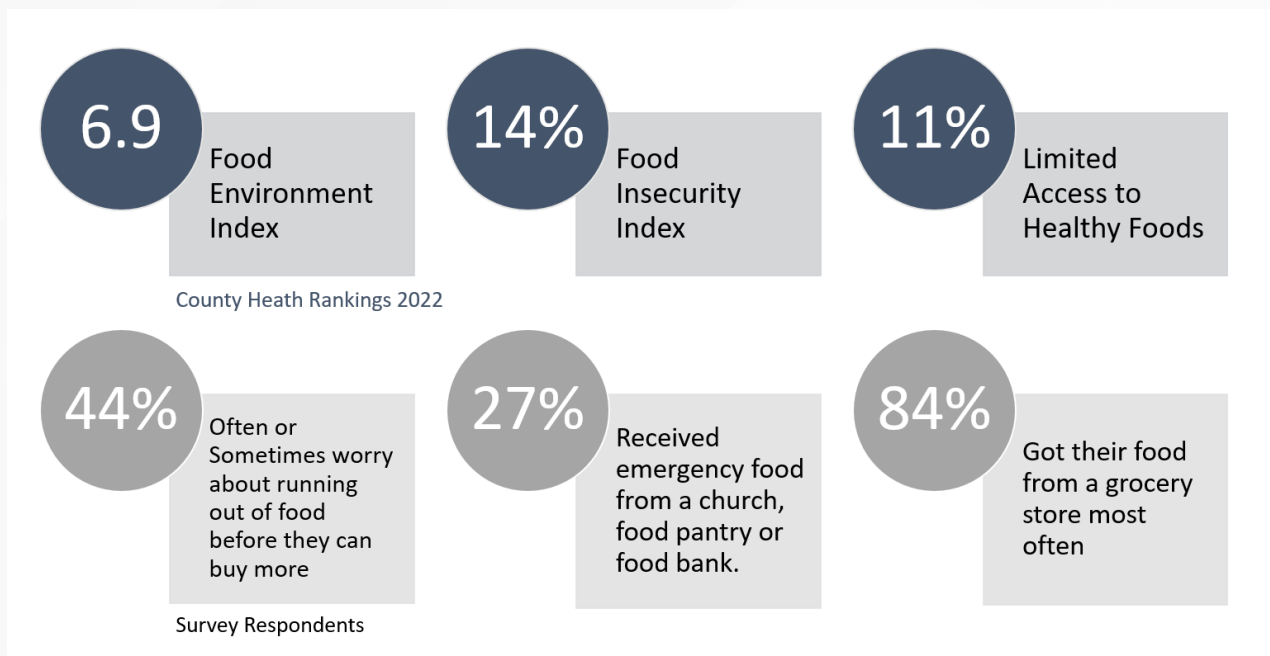
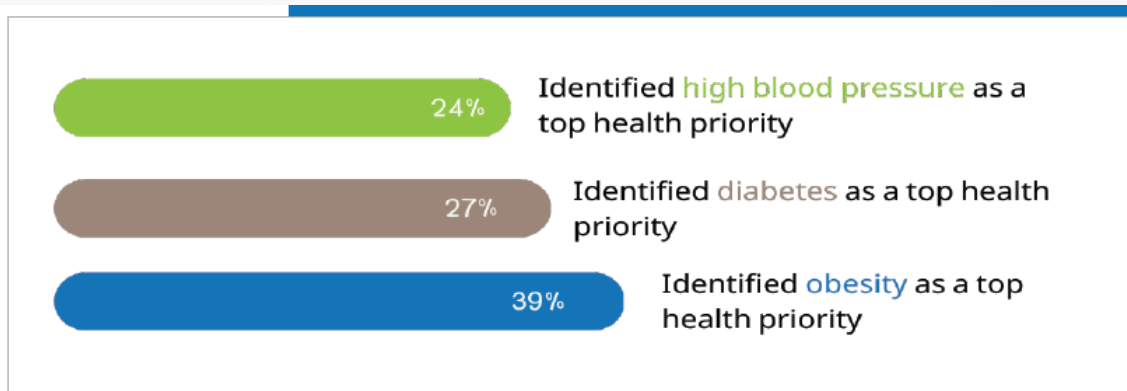
Maternal/Child Health

By December 2026, reduce infant mortality rates in the City of Saginaw by 50%.

- 10 Execute healthcare personnel training addressing implicit bias, health literacy, workforce culture, culturally appropriate messaging to drive more equitable care
- 11 Find and reach the unreachable to get women of childbearing age into primary care and engaged in other services to improve health prior to and between pregnancies
- 12 Expand and promote Doula programs within Saginaw County

OBESITY AND CHRONIC DISEASE

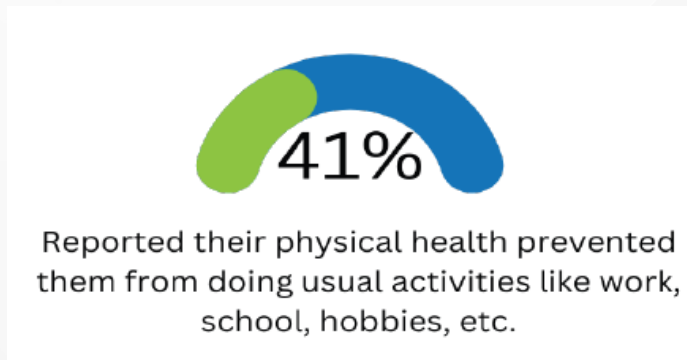
Understanding the Problem



47% consider themselves overweight and **10%** consider themselves obese

52% have ever been told they were overweight or obese

47% have ever been told they needed to lose weight for any reason



OBESITY AND CHRONIC DISEASE

What we are Doing About it

By December 2026, Saginaw County will redefine what a healthy body status is and improve measures by 20%.

Problem:

Over 75% of Saginaw County residents are identified as overweight or obese. BMI and weight alone are not great indicators of health.

Strategy (Map #1):

Define healthy body status and collect data.

Outcomes:

- Develop a new healthy body status index that is a measurement of your overall body rather than just mass.
 - Improved data collection and reporting on newly developed status indicators for county residents.
 - Healthcare providers throughout Saginaw County will be implementing the new healthy body status measurements.
-

Problem:

Obesity is not recognized as a public health emergency.

Strategy (Map #2):

Develop and implement county wide awareness messaging with a focus on health literacy.

Outcomes:

Increase in awareness and knowledge about the state of obesity in Saginaw County.

Problem:

School nutrition standards implemented in schools are in need of improvements to reduce waste, increase consumer satisfaction, and provide healthy menus.

Strategy (Map #3):

Improve the implementation of nutrition standards in schools.

Outcomes:

Healthier meals and improved nutrition for students.

OBESITY AND CHRONIC DISEASE

What we are Doing About it

By December 2026, Saginaw County will redefine what a healthy body status is and improve measures by 20%.

Problem:

Lack of consistent information provided to patients by health care providers on what a healthy body is.

Strategy (Map #4):

Develop a toolkit for healthcare providers to use with patients.

Outcomes:

Healthcare providers will be provided with consistent and culturally appropriate messages and information regarding healthy body status and will provide the same to their patients.

Problem:

- Lack of access to affordable, healthy foods.
- Almost half of Saginaw residents reported they worry about running out of food before they can buy more.

Strategy (Map #5):

Expand ongoing efforts to improve food access and affordability.

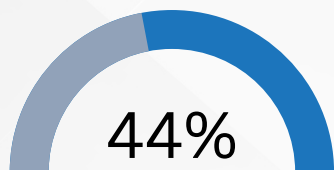
Outcomes:

- Increase in the percent of people reporting they have access to healthy foods.
- Decrease in the percent of people reporting they are worried about running out of food before they can get more.

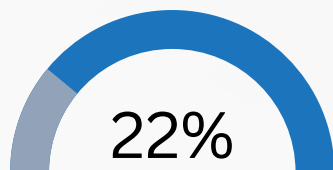
MENTAL HEALTH AND SUBSTANCE USE

Understanding the Problem

Mental Health



Reported their mental health as fair or poor (2022 Community Health Survey)



Reported that they were ever told they had depression (MBRFSS 2019-2021)

52% of respondents reported their mental health was not good on 6 or more days out of the past 30 days.

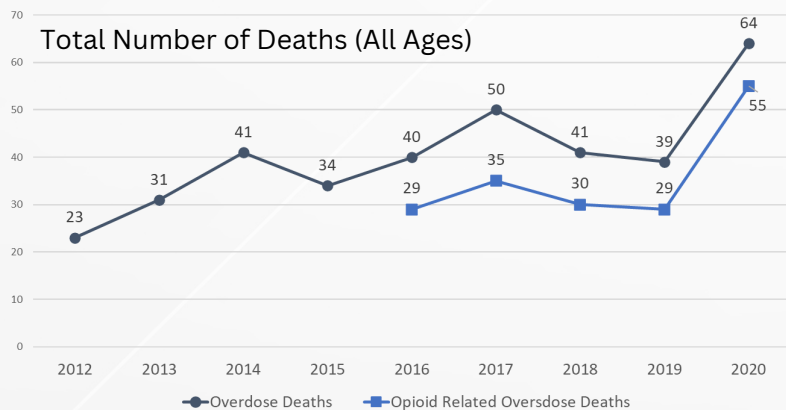
Reported needing mental health and/or substance use treatment but not getting it in the past 12 months.

45% Were under 25 years old

30% Were between 25-44 years old

49% Identifying as Lesbian, Gay, Bisexual or queer reported needing mental health or substance use treatment but did not get it compared to 21% of those identifying Heterosexual or Straight.

Substance Use



MiTracking

675
Number of nonfatal overdose ED visits for 2020

213
Number of nonfatal opioid related ED Visits for 2020

MiTracking Database

39% increase in overdose deaths (2019-2020)
44% increase in opioid deaths (2019-2020)

MENTAL HEALTH AND SUBSTANCE USE

What We are Doing About it

Mental Health

By December 2026, develop an integrated continuum of care for Saginaw County.

Problem:

More and more youth are experiencing poor mental health, including depression and anxiety.

Strategy (Map #6):

Improve access for mental health services in all Saginaw County schools (early screening, clear path to services available and enough provider capacity building countywide).

Outcomes:

- Increase in the number of youth receiving help to appropriately deal with their feelings especially depression and anxiety.
 - Increase in the number of youth reporting improved mental health.
-

Problem:

It is difficult to navigate the mental health system.

Strategy (Map #7):

Develop a new model of multi-agency collaboration to improve access and serve as a point of entry for mental health services.

Outcomes:

- Increase in people receiving mental health services.
 - Improve navigation and access to mental health services.
-

Problem:

There is a lack of knowledge and understanding on insurance coverage and how to navigate the mental health system.

Strategy (Map #8):

Build/Expand mental health navigators.

Outcomes:

- Increase in people receiving mental health services.
- Improved navigation and access to mental health services.



MENTAL HEALTH AND SUBSTANCE USE

What we are Doing About it

Substance Use

By December 2026, reduce fatal and non-fatal overdoses in Saginaw County by 50%.

Problem:

Saginaw is experiencing a significant increase in overdoses and overdose deaths, including those involving opioids.

Strategy(Map #9):

Develop a comprehensive countywide response to reduce overdoses in Saginaw County, including prevention, harm reduction, treatment, and recovery.

Outcomes:

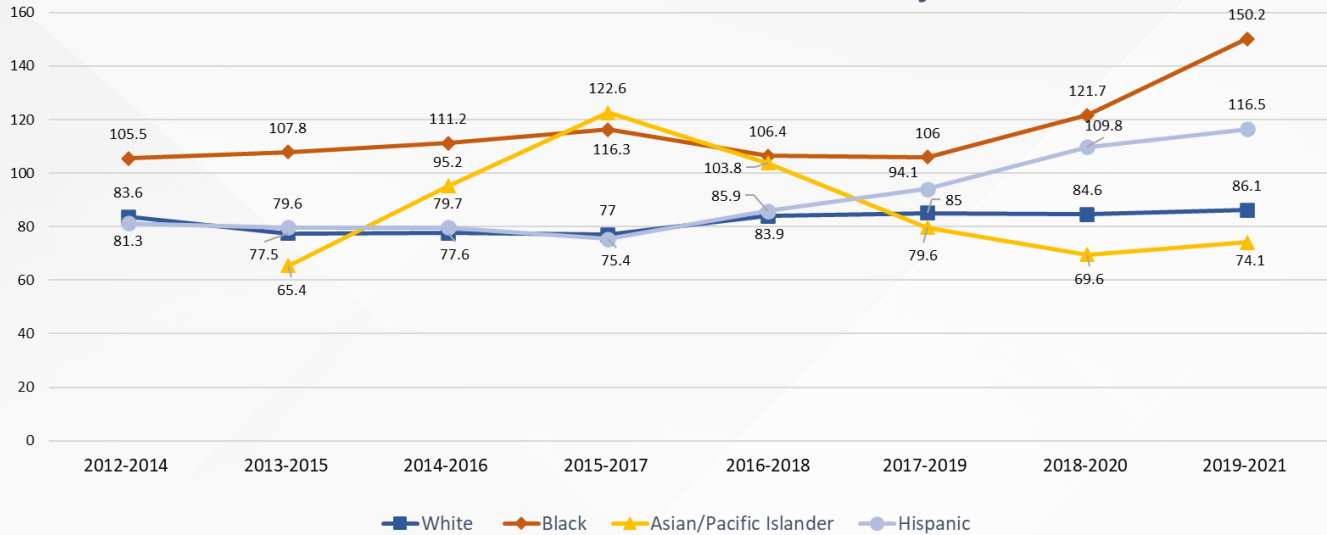
- Increase in usage of harm reduction programs and services.
- Increase in number of people receiving treatment for substance use disorder.
- Increase in number of people participating in recovery programs.
- Reduction in all fatal and non-fatal overdose deaths (including those from opioids).



MATERNAL AND CHILD HEALTH

Understanding the Problem

Three Year Preterm Live Births by Race



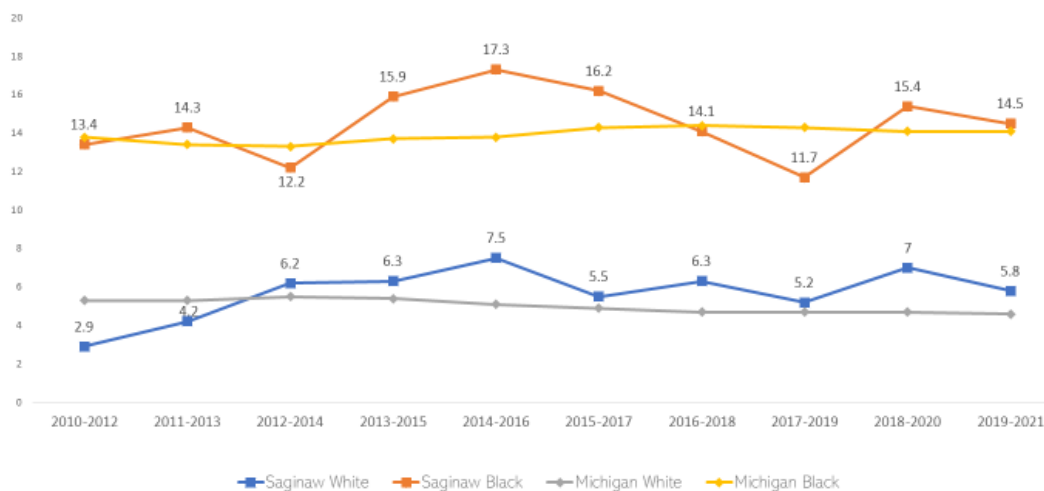
Source: 2021 Geocoded Michigan Birth Certificate Registry.
 Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

Percent Distribution of Live Births by Race and Level of Prenatal Care

	All Races	White	Black/African American	Hispanic Ancestry
Adequate	66.8%	73.4%	49.6%	61.9%
Intermediate	23%	19%	34.3%	26.1%
Inadequate	10.2%	7.5%	16.1%	11.9%

Data Source: 1989 Michigan Birth Certificate Registry; 1990-2021 Geocoded Michigan Birth Certificate Registries. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

Three Year Moving Average - Infant Death Rates by Race- 2021



Source: 2021 Geocoded Michigan Birth Certificate Registry.
 Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services

MATERNAL AND CHILD HEALTH

What we are Doing About it

By December 2026, reduce infant mortality rates in the City of Saginaw by 50%.

Problem:

- Pregnant women, specifically women of color, are not feeling supported or validated during pregnancy, labor and delivery, and postnatally.
- Saginaw county ranks among the highest for infant deaths in the state of Michigan.

Strategy (Map #10):

Healthcare personnel training addressing implicit bias, health literacy, workforce culture, culturally appropriate messaging to drive more equitable care.

Outcomes:

- Increase in the number of women feeling supported and validated during pregnancy, labor, delivery and postnatally.
- Decrease in the number and rate of infant deaths.

Problem:

There seems to be a disconnect between the programs and services available to the moms and babies who need them.

Strategy (Map #11):

Find and reach the unreachable to get women of childbearing age into primary care and engaged in other services to improve health prior to and between pregnancies.

Outcomes:

- Increase in the number of women of childbearing age taking advantage of resources and services available to them.

Problem:

Pregnant women are not getting adequate prenatal care.

Strategy (Map #12):

Expand and promote Doula programs within Saginaw County.

Outcomes:

- Increase in utilization of programs and services available to moms and babies, specifically with our most vulnerable populations.
- Increase in number of pregnant women getting adequate prenatal care.

COMMUNITY HEALTH IMPROVEMENT PLAN

Next Steps:

The completion of the BWell Saginaw Community Health Improvement Plan is only the beginning of improving the health of the community. The next step is to begin development and execution of the strategies identified in the plan. This requires continued collaboration among the diverse groups of people and organizations within the community. Workgroups have been established to create an action plan for each of the strategies. The workgroups will meet monthly as the action plan is created and continue to meet to ensure plan objectives are being met. Evaluation measures for each project or initiative will be developed to measure if the strategies outlined in the plan are effectively meeting the stated objectives. Additionally, the BWell Saginaw Partner Coalition will continue to provide oversight and direction to the workgroups. Action plans, quarterly reports, and performance measures will be available at www.bwellsaginaw.org

CHIP Timeline:

November/December 2023 - Form Strategy Workgroups

January 2024 - Hold Public CHA/CHIP State of Saginaw's Health

January - February 2024 - Develop Action Plans

Quarterly Reporting - April 2024 thru January 2026

For ongoing reporting and real time action planning please stay connected with our work at www.bwellsaginaw.org.