



# 2021 Healthy Ottawa Plan



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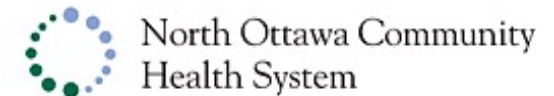
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# Healthy Ottawa Leadership

**Healthy Ottawa Advisory Council:** The following organizations are responsible for overseeing the creation of the Healthy Ottawa Plan



**Healthy Ottawa Facilitator:** Community SPOKE is responsible for coordinating and facilitating the Healthy Ottawa planning process





# Healthy Ottawa Planning Participants

This year's Healthy Ottawa Plan was conducted virtually due to the pandemic restrictions and therefore it was difficult to track exact participation from and be able to name which organizations were represented as part of the planning process as we have done with prior plans. However, similar to previous Healthy Ottawa plans, there were over 100 representatives from cross-sector industries such as healthcare, government, nonprofits, faith-based organizations, business, and schools that were actively engaged in the process. Close to 200 community members, including individuals who represent populations that experience disproportionately negative health outcomes, also participated in the planning process this year to help determine both root causes of the health priorities and propose strategies for implementation.



# Healthy Ottawa Mission, Vision and Values

**Vision:** Healthy people living in healthy communities

**Mission:** To achieve positive health outcomes for Ottawa County residents by partnering to identify health issues, plan, and implement strategic actions for change

**Values:**

- Equity
- Collaboration
- Excellence
- Best Practice



# What is a Community Health Improvement Plan?

The “Healthy Ottawa Plan” is the name given to our county’s “Community Health Improvement Plan.”

A **community health improvement plan** (or CHIP) is a long-term, systematic effort to address public health problems based on the results of **community health assessment** activities and the **community health improvement process**.

- Centers for Disease Control and Prevention (CDC)

The primary data used for Ottawa County’s Healthy Ottawa planning came from the 2020 Community Health Needs Assessment (CHNA). The full report can be found on the Healthy Ottawa website -

<http://healthyottawa.org/chna/>





# Why develop the Healthy Ottawa Plan?

The problems and challenges we face as it relates to public health are simply too great for a single individual, organization, or even sector to solve alone.

Only through true collaboration can we meet the pressing and systemic needs as identified in the *Community Health Needs Assessment*.



# 2018 Healthy Ottawa Plan Progress Update

In 2018, Ottawa County completed its second Community Health Improvement Plan (Healthy Ottawa Plan) and many organizations have been hard at work implementing several of the recommended strategies from that plan. For a full summary of the work that has taken place since 2018, please reference Appendix A beginning on page 97 at the back of this report.



# How to Use this Document

The goals of putting the Healthy Ottawa Plan together are multi-faceted. Here is a quick guide on how best to use the following document:

1. Educate yourself on the greatest public health priorities and the factors influencing those priorities.
2. Use the goals, objectives, specifically the prioritized root causes outlined in this document to develop and align your own organizational strategies.
3. Identify recommended strategies from this plan that you would like to take part in helping implement.



# Executive Summary

In 2021 Ottawa County came together to create its next iteration of the Community Health Improvement Plan (CHIP) or as it has been renamed, the “Healthy Ottawa Plan.” The goal of this plan is to identify the greatest health needs in the community, identify root causes of those needs, and recommend strategies for implementation in order to help improve the health and well-being of local residents. As with past Healthy Ottawa plans, this process was conducted collaboratively and involved individuals representing a variety of sectors including healthcare, government, nonprofit, business, faith-based organizations, and schools. The Healthy Ottawa planning process always begins after the completion of the [Community Health Needs Assessment \(CHNA\)](#) which Ottawa County conducted once again in 2020. The data from this report allows progress to be measured on previous Healthy Ottawa Plan objectives as well as assess where we need to focus collectively as a community moving forward. In assessing both the quantitative and qualitative data from the 2020 CHNA, it was clear to planning participants that the community should continue to prioritize the same health focus areas that were identified in 2015 and 2018: access to care, mental health, and healthy behaviors.



# Executive Summary

While the overarching focus areas have remained the same, the understanding of what root causes are influencing the metrics tied to each of them continues to become clearer with each planning process and therefore, more specified. The hope is that this in turn leads to more effective strategies being implemented in our community. One of the additions to the 2021 planning process was the involvement of the general public as well as a targeted population of low-income individuals and representatives of the Latinx community (two populations that experience disproportionately negative health outcomes) to help determine both root causes of our greatest health needs and potential solutions. This greater level of inclusivity in the process is designed to lead to better outcomes in the future.

Despite Ottawa County's collective efforts to improve outcomes within the health focus areas of access to care, mental health, and healthy behaviors; the results in the last three years have been mixed. Not surprisingly, the COVID-19 pandemic has had a negative influence on several of the metrics that have been prioritized. Most notably, metrics such as the percentage of adults classified as being in "poor" mental health and receiving treatment or medication for mental health conditions have worsened in the last three years. Understandably, the pandemic and the resulting environment have produced an overall decline in the mental health of local adults and also made treatment less accessible. Whether influenced by the pandemic or not, there has also been a steep increase in obesity rates and an alarming decline in the percentage of adults eating fruits and vegetables in the last three years.



# Executive Summary

On the positive side as it relates to Healthy Ottawa Plan priorities, more adults are confident navigating the health care system, engaging in more leisure time physical activity, and have a personal care provider than three years ago. While there has been improvement in these areas, Healthy Ottawa Plan participants believe continued focus and improvement is needed around these metrics moving forward.

The following pages outline the objectives, prioritized root causes, and recommended strategies for each of the health focus areas. These were all determined through a shared decision-making process with the goal of implementing some of these recommended strategies in a collaborative manner while desiring other community partners to adopt their own organizational strategies to align with the plan. While nonprofit hospitals and local Public Health Departments are required by law to conduct a Community Health Needs Assessment (CHNA) and adopt an implementation strategy to address identified health priorities (Community Health Improvement Plan), it is a remarkable testament to the collaborative spirit in Ottawa County that with three hospital systems, the Public Health Department and other partners, we have now created three Healthy Ottawa plans and seen several of the recommended strategies implemented with great success. On behalf of the Healthy Ottawa Advisory Council, we want to thank all who have helped to create a healthier Ottawa County!



# Process and Timeline

## February 2020 – August 2020

- Collected primary and secondary data which became the source for the Community Health Needs Assessment (CHNA). The table below shows the breakdown of primary data collected with the target audience, method of data collection, and number of completes:

	Data Collection Methodology	Target Audience	Number Completed
Key Stakeholders	In-Depth Telephone Interviews	Hospital Directors, Clinic Executive Directors	9
Key Informants	Online Survey	Physicians, Nurses, Dentists, Pharmacists, Social Workers	123
Key Informants	Online Survey (COVID)	(Same As Above)	120
Community Residents (Underserved)	<i>Self-Administered (Paper) Survey</i>	Vulnerable and underserved subpopulations	346
Community Residents	Telephone Survey (BRFS)	Ottawa County Adults (18+)	1,200



# Process and Timeline

## February 2020 – August 2020

- Secondary data for the CHNA was derived from local hospital utilization data and various government and health sources such as the U.S. Census, Michigan Department of Health and Human Services, County Health Rankings, Youth Risk Behavior Survey, Youth Assessment Survey, and Kids Count Database.
- The full CHNA can be accessed here:  
<http://healthyottawa.org/chna/>

## January 2021

- Using the results of the CHNA, the Healthy Ottawa Advisory Council and VIP Research determined that the three overarching priority areas for Ottawa County continue to be the same priorities identified in both 2015 and 2018: access to care, mental health, and healthy behaviors.





# Process and Timeline

## **March 2021**

- Public presentation of the CHNA and release of the written report.

## **April 2021**

- Plan participants determined the key metrics to build the plan around for each focus area of access to care, mental health, and healthy behaviors.

## **April – May 2021**

- Community SPOKE conducted a general public survey and a targeted outreach survey and interviews to engage the community in helping to identify the root causes for each of the key metrics and to suggest strategies to combat them.



# Process and Timeline

## **June 2021**

- Plan participants identified the most “influential” root causes for each objective and those most “feasible” for the community to address.

## **July 2021**

- Plan participants identified potential strategies and prioritized which ones should ultimately be recommended for communitywide implementation.



# Process and Timeline

## **August – September 2021**

- Finalized the written Healthy Ottawa report.
- Planning participants determined which recommended strategies to implement collaboratively.

## **January 2022**

- Implement 2021 Healthy Ottawa Plan and review progress periodically.



# Definitions

**Goal:** Describes the overall purposes and aims of the prioritized health focus areas of access to care, mental health, and healthy behaviors.

**Objectives:** The specific desired results that will be achieved to advance a *Goal* within each priority health focus area. Objectives are derived from metrics collected in the CHNA.

**Prioritized Root Causes:** Those factors identified as having the most “influence” on the key metrics contained within the *objectives* and those that are the most “feasible” for the community to address (based on the perspective of Healthy Ottawa planning participants).

**Recommended Strategies for Implementation:** Those strategies planning participants believe can have the greatest potential to address the *prioritized root causes* as well as the the most momentum to implement through collective action.



# Community Goals

The Healthy Ottawa Plan was developed first to prioritize the greatest health needs in Ottawa County. Second, it identifies what changes are desired and the means by which members of the community will have the greatest influence. The following goals have been identified by Healthy Ottawa plan participants, who collaborated to create strategies for each of the three priority health focus areas.

- 1. Access to Health Care** Increase access to a patient-centered and community-integrated system of care.
- 2. Mental Health** Increase recognition and treatment of mental health conditions.
- 3. Healthy Behaviors** Increase the percentage of adults at a healthy weight and decrease barriers to healthy living.



# Call to Action

While the Healthy Ottawa Plan was created by the community to serve as a road map, an array of complex and multi-faceted health and human services make it challenging to improve people's health. Therefore, to successfully implement the recommended strategies and make improvements, commitment is needed from even more community members, organizations and diverse populations. This plan was designed to engage various interest groups and to be carried out by:

- **Hospitals** - primary organizations to develop and implement the plan for collective action,
- **Public Health and Community Mental Health** - primary organizations to develop and implement the plan for collective action,
- **Nonprofit and faith community** - organizations to design strategies aligned with the goals and objectives of the plan,
- **Community members** - to better understand the greatest health areas and be involved in solutions,
- **Funders** - to use the plan as a reference for decision-making related to health funding,
- **Businesses** - to use the plan as a reference for how to improve the health of their employees.



# Focus Area: Access To Care

## **Background:**

The ability to access healthcare continues to be a story of the “have and have nots” as there are many options to receive quality healthcare throughout Ottawa County for residents who have good insurance and financial means, but for a smaller, vulnerable population, there are numerous barriers to accessing care. On a positive note, we continue to see a trend in more Ottawa County residents having confidence navigating the healthcare system, more residents identifying having a Personal Care Provider (PCP), and fewer individuals without insurance. On the other hand, we see vulnerable populations having worse outcomes in all these metrics as well as more overall residents identifying their General Health as “Fair” or “Poor” compared to three years ago.



# Focus Area: Access To Care

## Key Findings:

- Ottawa County has fewer primary care physicians at 62.9 per 100,000 population vs. the State of Michigan at 79.4.<sup>1</sup>
- 38.1% of “underserved and vulnerable” adults had trouble meeting their healthcare needs in 2020.<sup>2</sup>
- 13.2% of Ottawa County adults reported their health as “Fair or Poor” while 43.9% of adults with less than a high school degree and 32.5% of adults earning less than \$20,000/year reported the same.<sup>3</sup>
- 8.2% of Ottawa County adults had NO healthcare insurance while 27.4% of adults with less than a high school degree and 25.9% of adults earning less than \$20,000/year reported the same.<sup>4</sup>
- 87.6% of Ottawa County adults are confident navigating the healthcare system.<sup>5</sup>





# Focus Area: Access To Care

## Key Findings:

- Key Informants identify **out-of-pocket health care costs** as the **#4 most pressing health issue** in our community.<sup>6</sup>
- “Underserved and vulnerable” adults identify “**too costly/expensive**” as the **#1 reason** why they had trouble **meeting their healthcare** in the last 2 years.<sup>7</sup>
- Key informants believe “**the ability to afford out of pocket expenses like co-pays/deductibles**” is the **#1 barrier** to access to care.<sup>8</sup>
- Key informants believe “**the complexity of the healthcare system**” is the **#2 barrier** to access to care.<sup>9</sup>
- Key informants believe “**limited number of providers accepting Medicaid**” is the **#3 barrier** to access to care.<sup>10</sup>
- “Underserved and vulnerable residents” identify **transportation** as a **top resource lacking** in the community.<sup>11</sup>



# Focus Area: Access To Care

**Goal:** Increase access to a patient centered & community integrated system of care.

## **Objectives:**

1. Increase the percentage of adults who are confident navigating the health care system.
2. Increase the percentage of adults who have a Personal Care Provider (PCP).
3. Decrease the percentage of adults who don't have health insurance due to cost.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Context for Prioritizing Objective #1:** This objective originally identified in the 2015 Healthy Ottawa Plan resulted in the formation of the Ottawa Pathways to Better Health program (community health worker model). Although we have seen improvement in this outcome for two consecutive CHNA cycles, planning participants felt that the complexity of navigating the healthcare system continues to be a major barrier for many accessing care.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Metrics:** Percentage of adults with confidence navigating the health care system:\*

- a) 2014 – 81.3%
- b) 2017 – 84.4%
- c) 2020 – 87.6%

**Sub-Population Data for 2020:\***

- a) 79.6% of non-white adults
- b) 62.1% of adults in living below the poverty line

\*Sources: 2020 Ottawa County Community Health Needs Assessment, page 25, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna) and 2020 Ottawa County Behavioral Risk Factor Survey, page 63, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs).



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #1** – Lack of technology knowledge and/or confidence.

While the increased use of technology has helped to advance healthcare, it has become clear to many that that patients' understanding and confidence of utilizing these new methods is still lacking.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #1** – Lack of technology knowledge and/or confidence.

**Recommended Strategy #1:** Have medical providers offer a tutorial/walkthrough to patients of their systems, technology, website, apps, etc.

**Recommended Strategy #2:** Greater collaboration of care coordinators, social workers, and community health workers to learn from each other and improve upon health access for families.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #2** – Language or cultural barriers.

One of the primary root causes identified when interviewing populations disproportionately experiencing negative health outcomes was that the healthcare system largely isn't designed to be inclusive to their needs. This was particularly apparent when hearing from Latinx individuals who expressed several language and cultural barriers in the way of them optimizing their health.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #2** – Language or cultural barriers.

**Recommended Strategy #1:** Broaden reach of "navigators" (community health workers) and the financial sustainability of these roles. They are relatively low cost and specialize in connecting people to resources, removing challenges, and building trust.

**Recommended Strategy #2:** Providers hiring more multilingual staff.

**Recommended Strategy #3:** DEI training for medical provider staff on how to communicate with non-English speakers in a respectful and effective way.





# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #3** – Lacking knowledge of what resources are available.

Despite community-based organizations and medical practices' best efforts to market the services that exist, it was clear from community surveying that many people still don't know where to go to access specific healthcare services in Ottawa County.



# Focus Area: Access To Care

**Objective #1:** Increase the percentage of adults who are confident navigating the health care system.

**Prioritized Root Cause #3** – Lacking knowledge of what resources are available.

**Recommended Strategy #1:** Increased promotion of Call 211 and the resources they have available.

**Recommended Strategy #2:** Create a system where you can enter an individual's general information (insurance, age, etc.) and be provided with a list of providers that they qualify to work with.



# Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Context for Prioritizing Objective #2:** Personal Care Providers (PCP) play a critical role in helping to diagnose medical issues early with patients and help get them on the right treatment path. However, more than 1 in 10 Ottawa County residents (11.9%) still don't have a PCP and that number is greater for non-white adults (28.8%), young adults ages 25-34 (23.6%), and individuals with less than a high school degree (21.4%).\*

\*Source: 2020 Ottawa County Behavioral Risk Factor Survey, page 84, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs).



# Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Metrics:** Percentage of all adults who have No Personal Care Provider (PCP):\*

- a) 2011 – 12%
- b) 2014 – 11.4%
- c) 2017 – 12.4%
- d) 2020 – 11.9%

**Sub-Population Data for 2020:\***

- a) 28.8% of Non-white adults
- b) 23.6% of Adults ages 25-34
- c) 21.4% of Adults with less than a high-school degree

\*Sources: 2020 Ottawa County Community Health Needs Assessment, page 25, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna) and 2020 Ottawa County Behavioral Risk Factor Survey, page 84, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs).



# Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Prioritized Root Cause #1** – No healthcare insurance.

One of the more common reasons why an individual doesn't have a PCP is that they also don't have health insurance. Insurance often covers the cost of routine visits and care received from a PCP. In fact, the percentage of Ottawa County adults without health insurance coverage (8.2%) is similar to the percentage of those without a PCP (11.9%).\*

\*Source: 2020 Ottawa County Behavioral Risk Factor Survey, page 57 and page 84, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs).



# Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Prioritized Root Cause #1** – No healthcare insurance.

**Recommended Strategy #1:** Educate community on ways to identify PCP's accepting new patients.

**Recommended Strategy #2:** Expand use of Medicaid application / process guide.



# Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Prioritized Root Cause #2** – Many Primary Care Providers (PCPs) don't accept Medicaid.

One of the primary reason expressed by individuals for why they don't have a PCP is that offices they have reached out to won't accept new Medicaid clients. This creates an environment where healthcare needs go unmet or are met through inappropriate use of emergency care.



## Focus Area: Access To Care

**Objective #2:** Increase the percentage of adults who have a Personal Care Provider (PCP).

**Prioritized Root Cause #2** – Many Primary Care Providers (PCPs) don't accept Medicaid.

**Recommended Strategy #1:** Greater promotion of the providers in the community who do accept Medicaid.

**Recommended Strategy #2:** Advocacy at State and Federal level to raise Medicaid reimbursement rates.





# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Context for Prioritizing Objective #3:** One of the (if not the primary) factors for why Ottawa County adults can't access healthcare is due to cost. This is becoming a growing concern as there has been a slight increase in the percentage of adults who fit into this category over the last three years.



# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Metrics:** Percentage of all adults who have no healthcare access due to cost:\*

- a) 2014 – 9.8%
- b) 2017 – 7.4%
- c) 2020 – 8.6%

**Sub-Population Data for 2020:\***

- a) 18.2% of Non-white adults
- b) 19.8% of Adults ages 25-34
- c) 22.2% of Adults with less than a high-school degree

\*Sources: 2020 Ottawa County Community Health Needs Assessment, page 25, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna) and 2020 Ottawa County Behavioral Risk Factor Survey, page 60, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs).



# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Prioritized Root Cause #1** – Health insurance is too expensive.

While not being able to access healthcare due to cost is in of itself a root cause, when we dig one layer deeper it is identified that both the cost of insurance and the medical expenses themselves are what make healthcare inaccessible to many.



# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Prioritized Root Cause #1** – Health insurance is too expensive.

**Recommended Strategy #1:** Greater efforts to reach non-insured and help get enrolled.

**Recommended Strategy #2:** Greater education of clients to understand that their Medicaid/Medicare will be low or no cost. Some may still think they have to pay and thus avoid care.



# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Prioritized Root Cause #2** – Medical costs are too expensive.

While not being able to access healthcare due to cost is in of itself a root cause, when we dig one layer deeper it is identified that both the cost of insurance and the medical expenses themselves are what make healthcare inaccessible to many.



# Focus Area: Access To Care

**Objective #3:** Decrease the percentage of adults who have no healthcare access due to cost.

**Prioritized Root Cause #2** – Medical costs are too expensive.

**Recommended Strategy #1:** Create more transparency in the cost of medical care ahead of time.

**Recommended Strategy #2:** Ensure that patients are going to in-network providers and accessing covered services.



# Focus Area: Mental Health

## **Background:**

While the pandemic had a negative ripple effect on many health outcomes for Ottawa County adults, perhaps no impact was greater than on their mental health. In three years, we have seen a substantial increase in individuals that are considered to be in "poor mental health" as well as a substantial decrease in the percentage of adults that are taking medication or receiving treatment for a mental health condition. Unfortunately, the COVID-19 pandemic and the restrictions it created prevented many people who suffer from poor mental health from accessing the critical services and treatment they needed. There is also great concern over the long-term impact that the pandemic will have on people's mental health.



# Focus Area: Mental Health

## Key Findings:

- Both rates of binge drinking and heavy drinking increased from 2017 to 2020.<sup>12</sup>
- In the past year, 4.9% of adults and 18.5% of youth thought about committing suicide.<sup>13</sup>
- Ottawa County saw an increase in the percentage of adults that are considered to be in “poor mental health” almost double from 8.8% in 2017 to 15.3% in 2020.<sup>14</sup>
- A higher percentage of individuals living in households earning less than \$20,000 per year are considered to be in “poor mental health” (34.2%) compared to the general Ottawa County adult population (15.3%).<sup>15</sup>





# Focus Area: Mental Health

## Key Findings:

- Key Informants identified **mental health and access to mental health** as the **most pressing** health issues in our community.<sup>16</sup>
- Ottawa County adults identify “**mental illness**” as the **#3 most important** health issue in our community.<sup>17</sup>
- Among area adults with at least one day of poor mental health, over half (52.4%) say their **poor mental health is due to the COVID-19 pandemic**.<sup>18</sup>
- At least three in ten teens **report feeling sad and hopeless** (31%), which has **increased steadily** from 22.9% in 2011.<sup>19</sup>
- Key Informants identify “**residential mental health service**” as the **top program/service lacking** that should be the **greatest priority**.<sup>20</sup>
- “Underserved and vulnerable residents” identify **access to abundant and affordable mental health services** as a **top resource lacking** in the community.<sup>21</sup>



# Focus Area: Mental Health

**Goal:** Increase recognition & treatment of mental health conditions.

## **Objectives:**

1. Decrease the percentage of adults in “poor” mental health.
2. Increase percentage of adults receiving treatment or medication for individuals with mild to severe psychological distress.
3. Decrease the percentage of adults and youth who have suicide ideation and attempts.



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Metrics:** Percentage of all adults in “poor” mental health:\*

1. 2011 – 8.6%
2. 2014 – 8.6%
3. 2017 – 8.8%
4. 2020 – 15.3%

**Metrics:** Percentage of specific adult populations in “poor” mental health:\*

1. Households with less than \$20,000 in income – 34.2%
2. Adults ages 18 – 24 – 23.6%

\*Sources: 2020 Ottawa County Behavioral Risk Factor Survey, page 32, 41 and 43, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs) and 2020 Ottawa County Community Health Needs Assessment, page 104, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna).



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Context for Prioritizing Objective #1:** After nine years of the percentage of Ottawa County adults classified to be in “poor” mental health hardly fluctuating from just above 8.5%, the percentage jumped to 15.3% in 2020. Planning participants and community surveys gave more context to this as more people appeared to be suffering from poor mental health connected to the COVID-19 pandemic.\*



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #1:** Lack of coping skills

Based on their experience working with a range of clients and patients, planning participants felt that many people generally lack adequate coping skills to address the current stressors in society such as political conflicts, terrorism, social media, bullying, and financial stress which all leads to individuals experiencing poor mental health.



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #1** – Lack of coping skills

**Recommended Strategy #1:** Partner with employers to provide mental health resources and skills through lunch presentation, team meetings, etc.--using the messages created by Thrive Ottawa and other partners.

**Recommended Strategy #2:** Expand the number and capacity of mental health providers in the community.



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #2:** Adverse Childhood Experiences (ACEs) / Trauma

Data shows that there is a direct correlation between having a high number of Adverse Childhood Experiences (ACEs) and the likelihood that an adult will suffer from “poor” mental health.



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #2 – Adverse Childhood Experiences (ACEs) / Trauma**

**Recommended Strategy #1:** Expand Thrive Ottawa County workgroup with purpose of forming common messaging and training opportunities for targeted sectors.

**Recommended Strategy #2:** Adopt the “Sanctuary Institute Model” as a common platform that can be utilized community-wide.





# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #3:** Relational Stress

Relational stress could pertain to personal or professional relationships whether that be stressed induced by a spouse or partner, children, or co-workers.



# Focus Area: Mental Health

**Objective #1:** Decrease the percentage of adults in “poor” mental health.

**Prioritized Root Cause #3 – Relational Stress**

**Recommended Strategy #1:** Educating individuals, both youth and adults, about how to cope with relational stress in healthy ways. Education on how to have a healthy relationship.

**Recommended Strategy #2:** Create a volunteer based rotational effort to provide free couple's counseling and mediation between family members.



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Metrics:** Percentage of adults receiving treatment or medication for Mild to Severe Psychological Distress:\*

1. 2014 – 25.8%
2. 2017 – 53.5%
3. 2020 – 39.2%

**Metrics:** Percentage of adults receiving treatment or medication who are classified as being in “poor” mental health:\*

1. 2014 – 30.1%
2. 2017 – 51%
3. 2020 – 43.4%



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Context for Prioritizing Objective #2:** The gains in the percentage of Ottawa County adults receiving treatment or medication for mental health conditions from 2014 to 2017 was short lived as the COVID-19 pandemic created an environment where fewer people were able to access appropriate treatment methods.



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Prioritized Root Cause #1:** Stigma.

While more focus and attention has been given to mental health in recent years in an effort to normalize this important issue, planning participants believe that stigma remains a major barrier that prevents many people from accessing treatment.



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Prioritized Root Cause #1 – Stigma**

**Recommended Strategy #1:** Regular and structured communication between local Mental Health providers (a new collaboration).

**Recommended Strategy #2:** Anti-Stigma campaign with key stakeholders. Partnerships with Community Mental Health who is working on an anti-stigma campaign.



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Prioritized Root Cause #2:** Not knowing how to advocate for oneself.

An individual's ability to communicate well with a health care provider is essential. Knowing the right questions to ask, being able to navigate language/cultural differences, and the ability to commit time and energy all are challenges for individuals becoming their own medical advocate.



# Focus Area: Mental Health

**Objective #2:** Increase percentage of adults receiving treatment or medication for mental health conditions.

**Prioritized Root Cause #2** – Not knowing how to advocate for oneself.

**Recommended Strategy #1:** Use some of the common messaging and common promotion to teach questions to ask when accessing treatment.

**Recommended Strategy #2:** Connect with adult and youth serving programs/individuals to collaborate on perhaps creating a simple lesson plan that teaches self-advocacy.

**Recommended Strategy #3:** Educate and encourage more Primary Care doctors to discuss mental health with patients.





# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Metrics:** Percentage of individuals who thought of ending their life in the past year:\*

- a) Adults – 4.9%
- b) Youth – 18.5%

**Metrics:** Percentage of individuals who attempted suicide in the past year (of those who thought of ending their life in the past year):\*

- a) Adults – 19.6%
- b) Youth – 37%



# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Context for Prioritizing Objective #3:** The high rate of suicide contemplation (especially among youth) continues to be a major concern by many in the community.



# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Prioritized Root Cause #1:** Untreated mental health condition.

Studies show that a high percentage of individuals who die by suicide have an underlying mental health condition.



# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Prioritized Root Cause #1** – Untreated mental health condition.

**Recommended Strategy #1:** Create a pipeline to recruit mental health providers. Engaging youth in being interested, offering internships, and ways to build experience, especially for professionals of color.

**Recommended Strategy #2:** Continue to encourage universal mental health screenings (ex. Dr. office, schools).

**Recommended Strategy #3:** Create some sort of infographic that shows the different resources and tools available and how they fit together.



# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Prioritized Root Cause #2:** Health Literacy – not knowing when to advocate for oneself.

There are many opportunities for an individual to seek help prior to getting to the point of contemplating or attempting suicide. If individuals knew when to advocate for themselves earlier, more intervention could take place and more lives saved.



# Focus Area: Mental Health

**Objective #3:** Decrease the percentage of adults and youth who have suicide ideation and attempts.

**Prioritized Root Cause #2** – Health Literacy – not knowing when to advocate for oneself.

**Recommended Strategy #1:** Create a mental health continuum of care. Help define the steps and resources prior to reaching crisis.

**Recommended Strategy #2:** Support the expansion of the "Blue Envelope" initiative in schools.



# Focus Area: Healthy Behaviors

## **Background:**

Obesity and chronic diseases often caused by weight-issues continue to be a top concern for both residents and healthcare providers as more adults trend from a healthy weight to becoming overweight or obese. Obesity alone in Ottawa County increased by 11.6 percentage points in the past six years from 2014 to 2020.

Corresponding with increased weight gain, we are seeing Ottawa County adults eating less and less fruits and vegetables every time we conduct this assessment.



# Focus Area: Healthy Behaviors

## Key Findings:

- Adults classified as obese (34.5%) increased 11.6% from 2014 – 2020.<sup>22</sup>
- Fruit and vegetable consumption has been trending negatively each assessment from 2014 – 2020.<sup>23</sup>
  - 43.6% of adults eat LESS than 1 fruit per day
  - 31.8% of adults eat LESS than 1 vegetable per day
- Only 25% of adults classified as “overweight” and 57% of adults classified as “obese” have received advice regarding their weight from a healthcare professional.<sup>24</sup>





# Focus Area: Healthy Behaviors

## Key Findings:

- Key informants identified **“obesity”** as the **#5 most pressing top health issue** in in Ottawa County.<sup>25</sup>
- Ottawa County adults identify **“obesity”** as the **most important health issue** in the community besides COVID-19.<sup>26</sup>
- “Underserved and vulnerable residents” identify **access to free or low-cost nutrition/healthy eating opportunities** as a **top resource lacking** in the community.<sup>27</sup>
- “Underserved and vulnerable residents” identify **access to free or low-cost fitness/exercise opportunities** as a **top resource lacking** in the community.<sup>28</sup>



# Focus Area: Healthy Behaviors

**Goal:** Increase the percentage of adults at a healthy weight and decrease barriers to healthy living.

## **Objectives:**

1. Decrease the percentage of adults who are obese.
2. Decrease the percentage of adults who consume less than one fruit and one vegetable per day.
3. Decrease the percentage of adults who engage in no leisure-time physical activity.



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Metrics:** Percentage of adults who are obese:\*

- a) 2011 – 25.8%
- b) 2014 – 23.9%
- c) 2017 – 29.9%
- d) 2020 – 34.5%

**Metrics:** Percentage of specific adult populations who are obese:\*

- a) 48.1% of adults ages 35 – 44
- b) 40.3% of adults with less than a high school degree

\*Sources: 2020 Ottawa County Behavioral Risk Factor Survey, pages 50-53, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs) and 2020 Ottawa County Community Health Needs Assessment, page 24, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna).



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Context for Prioritizing Objective #1:** Obesity is an underlying cause of many chronic health conditions that individuals experience. Addressing the rapidly rising obesity rates in Ottawa County adults would go a long way to improving their overall health status.



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Prioritized Root Cause #1:** Poor Diet

A poor diet is often cited as the primary factor in an individual's overall weight status. High consumption of highly processed and fast foods, overeating, along with low fruit and vegetable consumption are often contributors to poor diets. There is also concern of the popularity of "fad" diet methods that don't always lead to better overall health.



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Prioritized Root Cause #1 – Poot Diet**

**Recommended Strategy #1:** Work with local food pantries/grocery stores to introduce healthier food options and to provide recipes for these types of food.

**Recommended Strategy #2:** Support Ottawa Food and their Real Food Can initiative.



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Prioritized Root Cause #2:** Lack of physical activity.

Physical activity can help individuals maintain a healthy weight status or actually lose weight if they are expending more calories than they are taking in through food.



# Focus Area: Healthy Behaviors

**Objective #1:** Decrease the percentage of adults who are obese.

**Prioritized Root Cause #2** – Lack of physical activity.

**Recommended Strategy #1:** Have “community exercise advocates” located within each low-income neighborhood/area so it's not an outside person coming in, it's their friend or neighbor motivating them.

**Recommended Strategy #2:** Continue to provide fun and creative ways to get people interested in starting more physical activities, like walking programs, free parks passes, etc.





# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Metrics:** The percentage of adults who consume less than one fruit per day:\*

- a) 2014 – 20.6%
- b) 2017 – 31.5%
- c) 2020 – 43.6%

**Metrics:** The percentage of adults who consume less than one vegetable per day:\*

- a) 2014 – 17.1%
- b) 2017 – 21.4%
- c) 2020 – 31.8%

\*Sources: 2020 Ottawa County Community Health Needs Assessment, page 26, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna) and 2020 Ottawa County Behavioral Risk Factor Survey, pages 69-71, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Context for Prioritizing Objective #2:** The percentage of Ottawa County adults who consume less than one fruit and less than one vegetable daily has increased significantly since 2014. Fruits and vegetables are important components of a healthy diet, and adequate daily consumption is important to help prevent cancer, cardiovascular disease, and obesity.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Prioritized Root Cause #1:** High cost to purchase fruits and vegetables.

Reported repeatedly in community surveying, cost continues to be cited as the number one reason why area adults don't consume more fruits and vegetables.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day

**Prioritized Root Cause #1** – High cost to purchase fruits and vegetables.

**Recommended Strategy #1:** Educate about low-cost, simple ways to include more fruits and vegetables in meals.

**Recommended Strategy #2:** More promotion of Double Up Food Bucks.

**Recommended Strategy #3:** Encourage farms to donate to food pantries.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Prioritized Root Cause #2:** Knowledge of how to prepare fruits and vegetables.

Reported repeatedly in community surveying, Ottawa County adults identify that there is a growing lack of understanding of how to prepare home-cooked meals and specifically knowing how to cook with different varieties of fruits and vegetables.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Prioritized Root Cause #2:** Knowledge of how to prepare fruits and vegetables.

**Recommended Strategy #1:** Bring healthy eating classes to people. Remove the barrier of having people to go somewhere else on their own.

**Recommended Strategy #2:** Make more culturally relevant recipes and cooking demos available.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Prioritized Root Cause #3:** Time to prepare fruits and vegetables.

The fast-pace of American culture, adults working long hours or multiple jobs, and the busyness of kids' schedules often prevent people from either having or feeling like they have the time to prepare home-cooked meals.



# Focus Area: Healthy Behaviors

**Objective #2:** Decrease the percentage of adults who consume less than one fruit and one vegetable per day.

**Prioritized Root Cause #3:** Time to prepare fruits and vegetables.

**Recommended Strategy #1:** Promote Real Food Can website, which provides info about preparing quick and convenient meals.

**Recommended Strategy #2:** Promotional campaign to show quick prep options for different fruits and vegetables.





# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Metrics:** Percentage of adults who engage in no leisure-time physical activity:\*

- a) 2011 – 12.7%
- b) 2014 – 20.5%
- c) 2017 – 23.4%
- d) 2020 – 16.4%

**Sub-population data:\***

- a) 25.7% of adults living below the poverty line
- b) 36.5% of adults with less than a high school degree

\*Sources: 2020 Ottawa County Behavioral Risk Factor Survey, page 67, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs) and 2020 Ottawa County Community Health Needs Assessment, pages 26, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna).



# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Context for Prioritizing Objective #3:** Helping Ottawa County residents become physically active can assist with weight management and can offer many other health benefits as well. Although the unique environment of 2020 gave more time and space for people to get physically active as seen in the assessment results, a continued focus on physical activity in the future will be important to combat the community's rising obesity rates.



# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Prioritized Root Cause #1:** No time.

Cited often in community surveys, the fast-pace of American culture, adults working long hours or multiple jobs, and the busyness of kids' schedules often prevent people from either having or feeling like they have the time to engage in extra physical activity.



# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Prioritized Root Cause #1:** No time.

**Recommended Strategy #1:** Encourage small amounts of time to get people moving. For example, rather than one, 30-minute workout, encourage six 5-minute workouts.

**Recommended Strategy #2:** Educate people on things they can do while waiting in their car, waiting on the phone, while on lunch break, etc. Little movements that they can keep physically active with.



# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Prioritized Root Cause #2:** Lack of motivation.

Cited often in community surveys, many adults express the lack of motivation as the primary reason why they don't engage in more physical activity. With the busyness of life and daily exhaustion that often comes with that, many adults don't feel that they have the energy or desire to devote to exercise.



# Focus Area: Healthy Behaviors

**Objective #3:** Decrease the percentage of adults who engage in no leisure-time physical activity.

**Prioritized Root Cause #2:** Lack of motivation.

**Recommended Strategy #1:** Survey community members about what would motivate them to be more physically active, and then create resources based on the results.

**Recommended Strategy for #2:** Encourage physicians to provide referrals/recommendations to physical activity options within the community.



# Sources Page

## Focus Area: Access to Care

- <sup>1</sup> 2020 Community Health Needs Assessment, page 129, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>2</sup> 2020 Community Health Needs Assessment, page 135, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>3</sup> 2020 Behavioral Risk Factor Survey, page 41, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>4</sup> 2020 Behavioral Risk Factor Survey, page 57-58, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>5</sup> 2020 Behavioral Risk Factor Survey, page 63, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>6</sup> 2020 Community Health Needs Assessment, page 102, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>7</sup> 2020 Community Health Needs Assessment, page 135, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>8</sup> 2020 Community Health Needs Assessment, page 144, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>9</sup> 2020 Community Health Needs Assessment, page 144, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>10</sup> 2020 Community Health Needs Assessment, page 144, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>11</sup> 2020 Community Health Needs Assessment, page 142, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

## Focus Area: Mental Health

- <sup>12</sup> 2020 Behavioral Risk Factor Survey, page 34, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>13</sup> 2020 Behavioral Risk Factor Survey, page 49, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs) and 2019 Youth Assessment Survey, page 16, [www.ottawacountyouth.org](http://www.ottawacountyouth.org)
- <sup>14</sup> 2020 Community Health Needs Assessment, page 24, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>15</sup> 2020 Behavioral Risk Factor Survey, page 43, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>16</sup> 2020 Community Health Needs Assessment, page 102, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)
- <sup>17</sup> 2020 Behavioral Risk Factor Survey, page 39, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>18</sup> 2020 Behavioral Risk Factor Survey, page 125, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)
- <sup>19</sup> 2019 Youth Assessment Survey, page 16, [www.ottawacountyouth.org](http://www.ottawacountyouth.org)



# Sources Page

<sup>20</sup> 2020 Community Health Needs Assessment, page 141, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>21</sup> 2020 Community Health Needs Assessment, page 142, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

## Focus Area: Healthy Behaviors

<sup>22</sup> 2020 Community Health Needs Assessment, page 24, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>23</sup> 2020 Community Health Needs Assessment, page 26, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>24</sup> 2020 Community Health Needs Assessment, page 122, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>25</sup> 2020 Community Health Needs Assessment, page 102, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>26</sup> 2020 Behavioral Risk Factor Survey, page 39, [www.healthyottawa.org/brfs](http://www.healthyottawa.org/brfs)

<sup>27</sup> 2020 Community Health Needs Assessment, page 162, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)

<sup>28</sup> 2020 Community Health Needs Assessment, page 142, [www.healthyottawa.org/chna](http://www.healthyottawa.org/chna)






# Contact Information for CHIP

Do you want to learn more about the Healthy Ottawa Plan or be a part of making a difference in our community?

Visit [healthyottawa.org/contact-us/](https://healthyottawa.org/contact-us/) to get involved!

# Appendix A – 2018 Healthy Ottawa Progress Update



**Community Health**  
PRIORITIES

## Access to Care

**GOAL**  
Increase access to a patient-centered and community-integrated system of care.

**OBJECTIVES**

1. Increase the percentage of adults who are confident navigating the health care system.
2. Decrease the percentage of adults who had trouble meeting their own or family's health care needs in the past year.

**RECOMMENDED STRATEGIES**

1. Expand the Ottawa Pathways to Better Health program to allow community health workers to serve a greater number of people. Learn more about the program at [www.mtOttawa.org/CPBH](http://www.mtOttawa.org/CPBH).
2. Expand care coordination in physician offices.

## Mental Health

**GOAL**  
Increase recognition and treatment of mental health conditions.

**OBJECTIVES**

1. Increase the percentage of adults receiving treatment or medication for mental health conditions.
2. Decrease the percentage of adults and youth who have suicide ideation and attempts.
3. Decrease the number of accidental deaths caused by an opioid-involved overdose.
4. Decrease the percentage of adults experiencing mild to severe psychological distress.

**RECOMMENDED STRATEGIES**

1. Increase public awareness of existing mental health treatment models and services.
2. Increase community conversations about mental health including expansion around the county of the town hall meeting format.
3. Educate the community on Adverse Childhood Experiences (ACEs).

## Healthy Behaviors

**GOAL**  
Promote consistent healthy behavior messages and decrease barriers to healthy living.

**OBJECTIVES**

1. Decrease the percentage of adults who engage in no leisure-time physical activity.
2. Increase the percentage of adults who consume at least five servings of fruits and vegetables per day.
3. Increase the percentage of overweight or obese adults who receive advice from a health care professional about their weight.

**RECOMMENDED STRATEGIES**

1. Increase awareness about low-cost and free opportunities for physical activity within Ottawa County.
2. Support Ottawa Food efforts.
3. Implement an educational campaign about the importance of family meals.
4. Work with health care professionals to reduce the barriers that prevent them from providing weight-related advice to overweight and obese patients.
5. Develop a framework to promote the Ottawa County health improvement strategies, health communications and local resources that will help people achieve optimal health.


The following pages highlight the progress made on various strategies implemented based on the 2018 Community Health Improvement Plan (Healthy Ottawa Plan). Please note that this summary does not capture all of the good work our community has done connected to the original plan but rather those that were being actively tracked.



2018 Ottawa County  
Community Health Improvement Plan Progress



# A Healthy Ottawa County



**Community Health**  
PRIORITIES

## Access to Care

**GOAL**  
Increase access to a patient-centered and community-integrated system of care.

**OBJECTIVES**

1. Increase the percentage of adults who are confident navigating the health care system.
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## Healthy Behaviors

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2. Support Ottawa Food efforts.
3. Implement an educational campaign about the importance of family meals.
4. Work with health care professionals to reduce the barriers that prevent them from providing weight-related advice to overweight and obese patients.
5. Develop a framework to promote the Ottawa County health improvement strategies, health communications and local resources that will help people achieve optimal health.

In the summer of 2018, Ottawa County developed its second plan for a healthy Ottawa County.

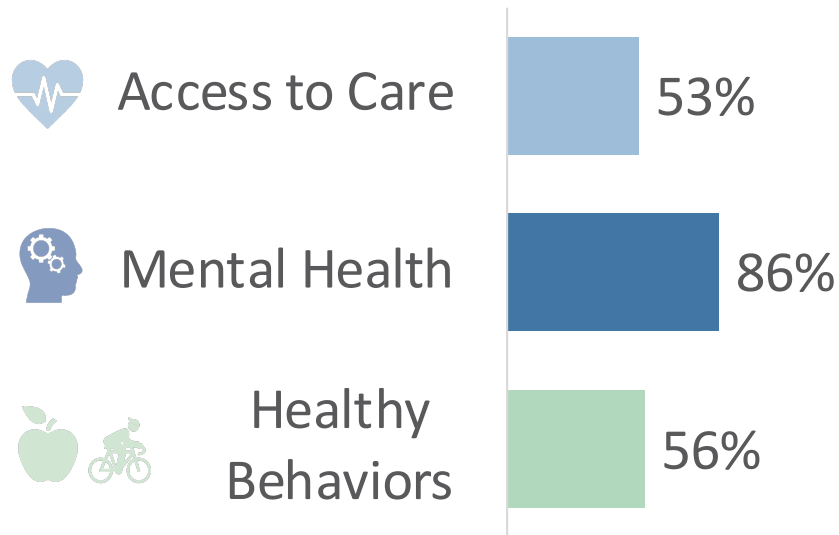
The most prevalent health issues according to the 2017 CHNA included:

- Access to Health Care
- Mental Health
- Healthy Behaviors

These became the 2018 CHIP (Healthy Ottawa) Priority Areas.

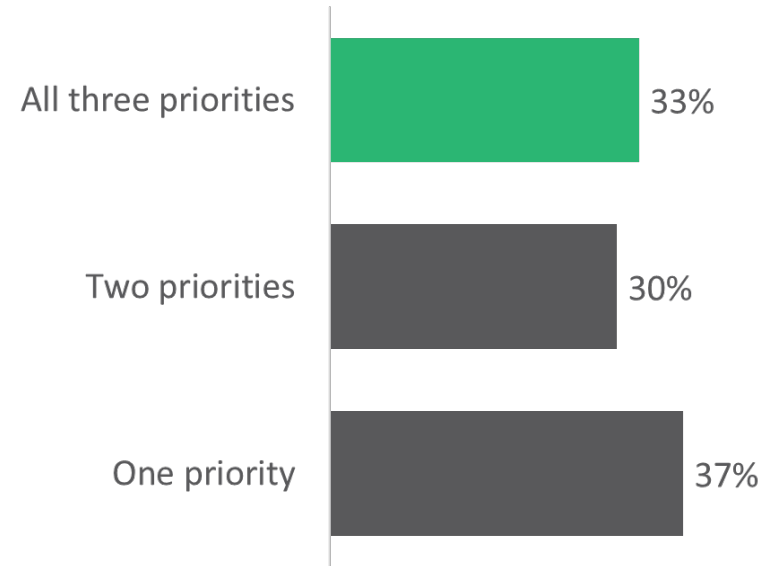
# 2018 CHIP (Healthy Ottawa): Stakeholder Usage Results

## Which CHIP Priorities did Stakeholders Use and/or Implement Strategies Within?\*



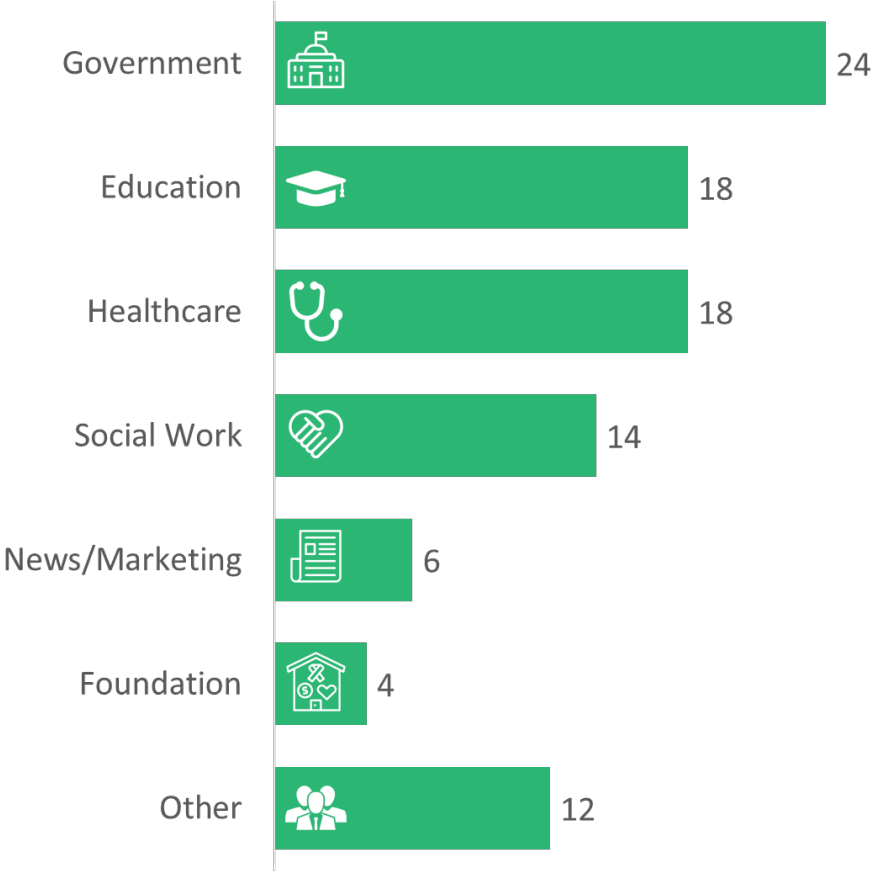
\* 43 people answered this survey question. Respondents were able to provide multiple answers to this question.

## How many CHIP Priorities did Stakeholders Use and/or Implement Strategies Within?\*



\* \*43 people answered this survey question.

# 2018 CHIP (Healthy Ottawa) Downloads By Sector



\* 96 people who downloaded a report and/or infographic identified the organization they work with.

# Impact: Funding

The Healthy Ottawa Plan was instrumental in helping CFHZ align their flexible Community Endowment resources with the greatest needs & biggest opportunities for impact. A few examples include:

- **Access to Care**
  - \$20,000 to Holland Free Health Clinic: remove barriers that prevent Hispanic patients from gaining access to health services.
  - \$10,000 to OCDPH toward a new Miles of Smiles mobile dental unit.
- **Mental Health**
  - Awarded over \$1M to local agencies to support a wide range of options for expanding access to MH care (see details on the next 3 slides).
- **Healthy Behaviors**
  - \$75,000 to Community Action House to support the launch of a Community Food Club.

# Impact: Funding

## From CFHZ's 2020 Covid-19 Community Stabilization Fund for expanding access to MH care:

- \$30,000 to OAR to increase outpatient clinic capacity
- \$30,000 to Holland Free Health Clinic to increase mental health, alcohol and drug counseling client capacity
- \$30,000 to City on a Hill Ministries Health Clinic to increase behavioral health integration program capacity
- \$20,000 to Children's Advocacy Center to expand their counseling program capacity to address the current waitlist for counseling services.
- \$16,000 to Resthaven to bring iN2L (It's Never Too Late) programming to their assisted living residents. This person-centered engagement program uses technology to enhance social interaction and promote mental health while still following social distancing protocols.
- \$15,000 to Mosaic Counseling for their School Outreach Program
- \$15,000 to Boys and Girls Club of Holland to increase social work staff capacity
- \$15,000 to Beacon of Hope to increase intake capacity and provide virtual counseling training
- \$13,000 to Arbor Circle to increase access to mental health and substance abuse services for Hispanic and Latinx community members
- \$13,000 to Maple Avenue Ministries for mental health services and supports for Black community members
- \$5,000 to the Momentum Center on behalf of the Ottawa County Suicide Prevention Coalition for a county-wide mental health/suicide prevention postcard mailing



# Impact: Funding

From the 2020 Emergency Human Needs Funds (CFHZ in partnership with GHACF and United Way) for expanding access to MH care:

- \$45,000 to Mosaic Counseling
- \$25,000 to OAR - Ottagan Addictions Recovery
- \$22,500 to Bethany Christian Services
- \$20,000 to Arbor Circle
- \$15,660 to Midtown Counseling
- \$12,500 to Beacon of Hope



# Impact: Funding

## **Before 2020, from CFHZ's competitive grant program for expanding access to MH care:**

- \$20,000 to Beacon of Hope - Emotional Health Group for Adults on Probation
- \$70,000 to Holland Community Hospital - School Mental Health Program
- \$30,000 to Ladder Homes - Housing Capacity Expansion
- \$75,000 to Midtown Counseling Services - On-site School Counseling Program
- \$70,000 to Mosaic Counseling (formerly TCM Counseling) - Counseling and School Services
- \$200,000 to Ottawa County Department of Public Health - Pathways to Better Health
- \$65,000 to Spectrum Health Foundation Zeeland Community Hospital - Blue Envelope Suicide Prevention Program
- \$40,000 to Wayne Elhart be nice. Memorial Fund - School Education Program
- \$75,000 to West Ottawa Public Schools in partnership with Mosaic Counseling - In-School Counseling
- \$75,000 to Winning at Home - Holland Counseling Center

# Access to Health Care: Plan

## Access to Care

### **GOAL**

Increase access to a patient centered and community integrated system of care.

### **OBJECTIVES**

1. Increase the percentage of adults who are confident navigating the health care system.
2. Decrease the percentage of adults who had trouble meeting their own or family's health care needs in the past year.

### **RECOMMENDED STRATEGIES**

1. Expand the Ottawa Pathways to Better Health program to allow community health workers to serve a greater number of people. Learn more about the program at [www.miOttawa.org/OPBH](http://www.miOttawa.org/OPBH).
2. Expand care coordination in physician offices.

# Access to Health Care: Outcomes

## Ottawa Pathways to Better Health

- There are currently 11 Community Health Workers (CHWs).
  - 3 are grant-funded and embedded in Ottawa Co. Community Mental Health.

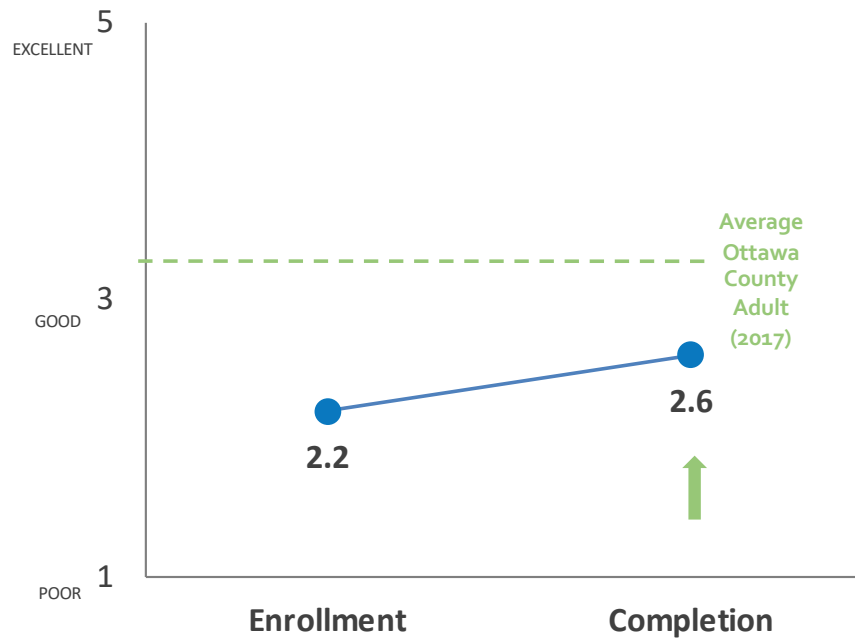
Year	Referrals	CHWs
2018	426	7
2019	542 (+229 MIHP pilot)	9
2020	442 (impacted by Covid)	10
2021 (to date)	82	11



# Enrollment/Completion Survey Results

## Overall Health Status

**Clients report a statistically significant increase in their overall health.** On average, clients report a small but significant **improvement** in their perceived overall health. It is important to note that at enrollment, the average OPBH client rates their health as only “fair” – much lower than the average Ottawa County adult’s rating of between “good” and “very good”. This is indicative of the challenges faced by incoming OPBH clients and the importance of communication in the referral network.



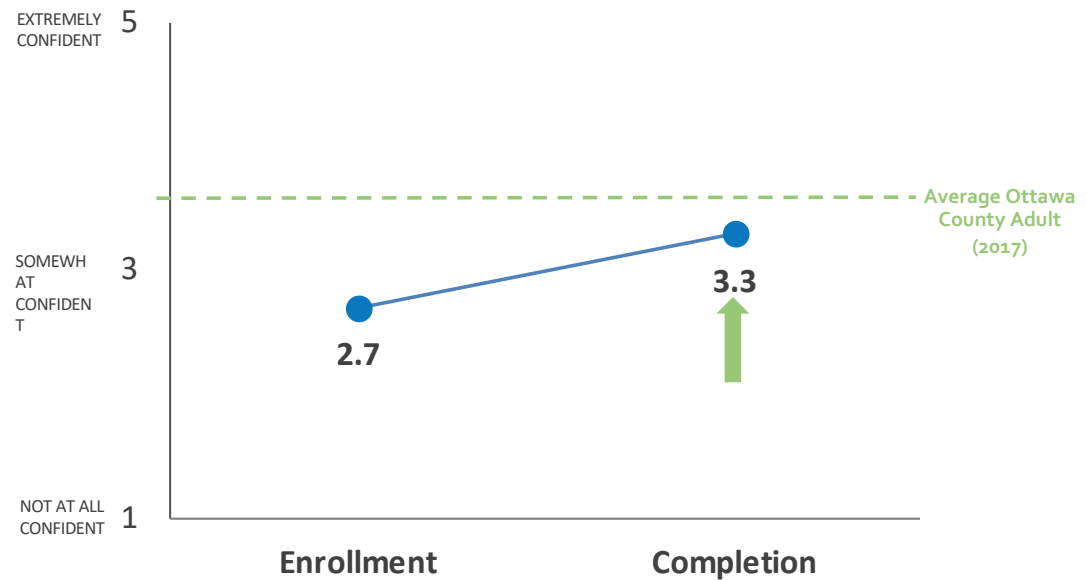
Question: Would you say in general that your health is.... Excellent (5), Very good (4), Good (3), Fair (2), Poor (1)

Sources: Results from 273 OPBH clients who completed both the enrollment and completion questionnaires between February 2017 and December 2020. The Ottawa County adult average (3.5) is from the same question asked of 1,318 adults in the 2017 Ottawa County Community Health Needs Assessment’s Behavioral Risk Factor Survey.

# Enrollment/Completion Survey Results

## Navigating the Health Care System

Clients report a statistically significant increase in their confidence navigating the health care system. Clients gained confidence in their ability to successfully navigate the often complex health care system. In fact, after program completion the average OPBH client reports nearly as much confidence as the average Ottawa County adult – between “somewhat” and “very” confident.



Question: How confident are you that you can successfully navigate the health care system? Not at all confident (1), Not very confident (2), Somewhat confident (3), Very confident (4), Extremely confident (5)

Sources: Results from 271 OPBH clients who completed both the enrollment and completion questionnaires between February 2017 and December 2020. The Ottawa County adult average (3.6) is from the same question asked of 1,318 adults in the 2017 Ottawa County Community Health Needs Assessment's Behavioral Risk Factor Survey.

# Access to Health Care: Outcomes

## Holland Hospital

- Hired 11 new physicians from 2018-2020.
- Established a centralized patient scheduler for timely follow-up.
- Integrated behavioral health & diabetic educators into the Holland Hospital Medical Groups.
- Created convenient care options.
  - Now offering virtual visits (10,237 performed in 2020).
  - Opened a walk-in service in Zeeland (serviced 1,198 patients in 2020).



# Access to Health Care: Outcomes

## Holland Free Health Clinic

- Streamlined & digitized their intake process.
- Increased healthcare outreach & accessibility for Hispanic and Spanish speaking patients.
- Dental, Diabetic Education, Vision, and Medication Assistance programs provided a significant amount of free care to underserved individuals.
- Served over 450 clients and facilitated over 7,000 visits in the past 3 years.





# Access to Health Care: Outcomes

## Love in Action Health Clinic

- Put greater focus on patient empowerment for insurance sign-up and transitioning to a medical home.
- Began offering onsite Medicaid sign-up and continued the practice of referring to community partners for insurance sign-up (2018 data missing):
  - **2019:** **20** patients were approved for insurance (onsite at LIA or referred; Medicaid or other)  
**29** patients transitioned to an area Primary Care Provider (medical home)
  - **2020:** **31** patients were approved for insurance (onsite at LIA, via telephone, or referred; Medicaid or other)  
**Over 23** patients transitioned to an area Primary Care Provider (all data not captured)



# Access to Health Care: Outcomes

## Spectrum Health Zeeland Community Hospital

- Supported the new MAX (Macatawa Area Express) bus stop at SHZCH with goal to increase usage to 950 riders per year.
- Increased the number of referrals from the Spectrum Health Medical Group in Ottawa County (588 Lakewood, Georgetown Physicians, Zeeland Physicians, Holland Community Health Center) and from SHZCH into the Ottawa Pathways to Better Health (OPBH) program.



# Access to Health Care: Outcomes

## Great Start Work Group

- Created promotional materials (Spanish & English):
  - Medicaid Guide
  - Why Medical Checkups Matter
  - Birth Certificate insert promoting Help Me Grow



# Mental Health: Plan

## Mental Health

### GOAL

Increase recognition and treatment of mental health conditions.

### OBJECTIVES

1. Increase the percentage of adults receiving treatment or medication for mental health conditions.
2. Decrease the percentage of adults and youth who have suicide ideation and attempts.
3. Decrease the number of accidental deaths caused by an opioid-involved overdose.
4. Decrease the percentage of adults experiencing mild to severe psychological distress.

### RECOMMENDED STRATEGIES

1. Increase public awareness of existing mental health treatment models and services.
2. Increase community conversations about mental health including expansion around the county of the town hall meeting format.
3. Educate the community on Adverse Childhood Experiences (ACEs).



# Mental Health: Outcomes

## Thrive Ottawa County

- 25 cross-sector individuals/organizations collaborating to educate the public about ACEs and resilience.
- Created website with resources: [www.thriveottawa.org](http://www.thriveottawa.org)
- Held a large-scale public campaign in 2020 to ↑ awareness of ACEs and resilience.
- Trained 100 Community Champions to educate others on ACES and resilience.
  - Several hundred people have taken part in presentations given by Community Champions.



# Mental Health: Outcomes

## Mosaic Counseling

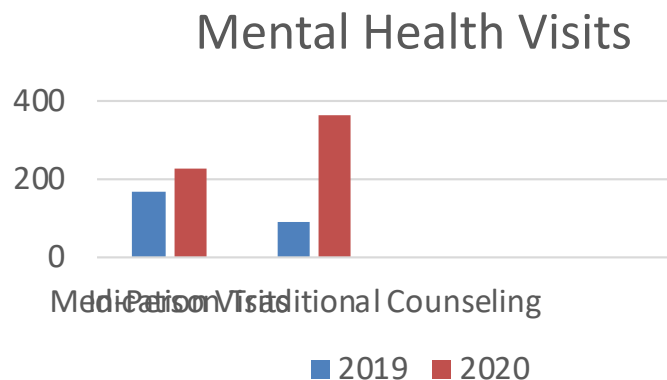
- Provides professional counseling to anyone who lives, works, worships, or attends school in OC.
- Has 95 therapists (plan to add more); and contracts with 2 psychiatrists.
- Provided:
  - therapists in 32 OC schools, and 570 students received FREE counseling during the 19/20 school year.
  - free QPR Suicide Prevention Trainings.
  - follow-up care to families that have lost loved ones suddenly.
- Added staff in response to the demand for services.



# Mental Health: Outcomes

## City on a Hill Health Clinic

- Added MH services in 2019. Have a Limited Licensed Professional Counselor (LLPC) on staff, working toward full licensure.
- Expanded MH services from 1 to 3 days a week.
- Integrated MH services into the primary care clinic.
- Expanded to traditional counseling; many clients needed more intense counseling.



# Mental Health: Outcomes

## Bethany Christian Services

- Trained staff
  - Trauma Focused Cognitive Behavioral Therapy.
  - Trauma Informed Parenting & Advanced Trauma Informed Parenting (TIP and ATIP).
- Secured funding
  - to serve Hispanic/Latinx populations addressing behavioral health needs (with CMH).
  - to address MH needs of ALICE populations.
- Launched an evidence-based Juvenile Justice MH contract in partnership with MDHHS & MSU.
- Hired 4 new FTE to meet service delivery and outreach needs.





# Mental Health: Outcomes

## Holland Hospital

- Opened Partial Hospitalization & Intensive Outpatient Programs.
- Added a psychiatrist, a psychiatric nurse practitioner & several new therapists at the Outpatient Behavioral Health clinic.
- Continue to operate the Mental Health ER.
- Began distributing Narcan to ED patients being discharged who are at risk of opioid overdose.



# Mental Health: Outcomes

## Holland Free Health Clinic

- Added behavioral health screening tools to their Needs Assessment.
- Implemented a protocol to flag patients interested in MH services for immediate follow up.
  - As a result, saw an ↑ in patients requesting MH care.
- Doubled the hours of the MH Program Coordinator and LMSW counselor.
  - Coordinator now offering substance use disorder services such as peer mentoring, recovery support services, and education training.



# Mental Health: Outcomes

## Spectrum Health Zeeland Community Hospital

- Received a grant to expand the Blue Envelope Program to include schools.
- Since 2019:
  - Trained 1,000+ school staff.
  - 250+ suicide prevention conversations with youth.
- Piloted a be nice. action plan class.
- Helped promote QPR Suicide Prevention trainings.



# Mental Health: Outcomes

## Ottawa Community Schools Network

- Hired 11 Community School Coordinators.
- Trained 12 staff as ACEs Community Champions.
- Helped create the Blue Envelope Initiative pilot.
- Built partnerships with 5 mental health agencies to provide mental health services to students in schools.

School Year	Students Starting Mental Health Services (98% in-school services)	Students Screened with Mental Health Screeners
17/18	57	128
18/19	205	200
19/20	189	255
20/21 (to date)	115	80



# Mental Health: Outcomes

## Opiate Task Force

- Implemented a system for tracking overdoses (fatal & non-fatal).
- Integrated Narcan into EDs.
- Partnered with:
  - Grand Rapids Red Project to provide Narcan to OC community members.
  - local healthcare providers to ↑ the number of X-waivered physicians to provide medication assisted treatment.
  - all 3 health systems-provided pain management training to physicians.

# Mental Health: Outcomes

## Love in Action Health Clinic

- Began consistently utilizing mental health and substance use **screening** for each patient (ex. PHQ9, GAD7, CAGE-AID, and MDQ tools).
- The LIA paid daytime medical provider obtained certification as a Psychiatric Mental Health Nurse Practitioner. She utilizes **motivational interviewing** and provides **psychoeducation** for those with mental health concerns or those needing to begin treatment for chronic disease states.
- Mental health diagnoses are the most prevalent diagnoses in the Clinic.



# Mental Health: Outcomes

## Momentum Center

- Provided a safe environment to have respectful conversations about difficult issues.
- Decreased stigma through community conversations like the Town Hall Meetings on Mental Illness, ACES, etc.
- Held events on ACES, movie nights on ACES, a teen event on Diversity and Mental Illness, and sent community- wide mailers on mental illness.

2018: AOT Training; Town Hall on MI and Alternate Therapies; Summer Series on Addiction; Inspire on Stigma & Mental Illness

2019: Winter Series on MI ; Inspire Event on ACES ; Town Hall on ACES; April Move Night- Resilience ; June Town Hall on ACES in Holland ; June Movie Night- Brave ; Salmon Run to eRace Stigma ; Awareness Event

2020: Virtual Town Halls on Mental Illness and COVID ; COVID and ACES; Hope and Resiliency; 2020 Virtual Salmon Run to eRace Stigma

- 131 people with mental illness joined Momentum Center since March of 2018.

# Mental Health: Outcomes

## Momentum Center

- Impact of Town Hall Meetings:

### Town Hall on ACES in Holland

- 100% of respondents said the events raised their awareness, inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 62.5% of respondents said the events inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 37.5% of respondents said the events convinced them to become or continue as a leader, donor or advocate

### Report on In-person Community Conversations (*Inspire!* Events, Summer Series, and Town Events)

The Inspire!, Summer Series and Town Hall\* events had a very positive impact on attendees. Out of 118 completed surveys,

- 98% said the events raised their awareness, inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 63% said the events inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 24% said the events convinced them to become or continue as a leader, donor or advocate

\*There was not significant difference among events – they were all perceived as very positive. However, the Inspire! and Summer Session events were relative stronger in terms of inspiring respondents to take action; the Town Hall Meeting events were relatively stronger in terms of convincing respondents to become or continue as leader, donor, or advocate.



# Mental Health: Outcomes

## Momentum Center

- Impact of Town Hall Meetings:

### Report on Virtual Town Halls

The Town Hall events on ACES and COVID-19, Mental Illness and COVID-19, Public Health and Racial Justice 1 & 2 had an even stronger impact on attendees.

- 99% of respondents (unweighted mean) said the events raised their awareness, inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 69% of respondents (unweighted mean) said the events inspired them to take action, or convinced them to become or continue as a leader, donor or advocate
- 47% of respondents (unweighted mean) said the events convinced them to become or continue as a leader, donor or advocate

There was not a significant difference among events in terms of impact.

\*33% of completed surveys were from Inspire! events; 11% of surveys were from Summer Series Events; 56% of completed surveys were from Town Events.

# Mental Health: Outcomes



- Formed in 2018
- Aims to ↓ suicides in OC by educating the community about suicide warning signs & prevention strategies, promoting suicide prevention resources, & identifying & addressing emerging issues regarding suicide and suicide prevention.

## be nice.:

	2019	2020
Number of students actively engaged in be nice.	17,430	15,212
Number of schools actively engaged in be nice.	29	25
Number of employees at businesses actively engaged in be nice. Action Plan training	650 (32 businesses)	1,263 (23 businesses)
Number of people trained in Mental Health First Aid	205	150

## QPR training:

	2017-2020
Number of people trained in QPR (number reported by Mosaic Counseling)	7,000

## Blue Envelope training:

	2019	2020
Number of schools in Blue Envelope program	8	14
Number of staff trained	257	717
Trainee pre- and post-assessment response to "I have confidence with how to respond to a student who expresses suicidal thoughts."	54% increase in staff confidence	31% increase in staff confidence*
Number of Blue Envelope incidents in Ottawa County schools	82	169
Number of students impacted by Blue Envelope	4,500	13,000

\* 30% of staff trained in 2020 were in year 2 of implementation and had a "refresher" training

Due to COVID-19, many of the Suicide Prevention Coalition's Initiatives in 2020 looked drastically different than in years past. As a result, 2020 data cannot be effectively compared to previous or upcoming years.

# Healthy Behaviors: Plan

## Healthy Behaviors

### GOAL

Promote consistent healthy behavior messages and decrease barriers to healthy living.

### OBJECTIVES

1. Decrease the percentage of adults who engage in no leisure-time physical activity.
2. Increase the percentage of adults who consume at least five servings of fruits and vegetables per day.
3. Increase the percentage of overweight or obese adults who receive advice from a health care professional about their weight.

### RECOMMENDED STRATEGIES

1. Increase awareness about low-cost and free opportunities for physical activity within Ottawa County.
2. Support Ottawa Food efforts.
3. Implement an educational campaign about the importance of family meals.
4. Work with health care professionals to reduce the barriers that prevent them from providing weight-related advice to overweight and obese patients.
5. Develop a framework to promote the Ottawa County health improvement strategies, health communications and local resources that will help people achieve optimal health.

# Healthy Behaviors: Outcomes

## Ottawa Food

- Implemented a variety of initiatives to ↑ access to fruits & vegetables.
  - 46,524 pounds of fresh, local produce distributed to food insecure households.
- Implemented the *Real Food Can* Campaign to ↓ barriers to fruit & vegetable consumption.
  - 6,381 users visited [www.RealFoodCan.org](http://www.RealFoodCan.org) (June- Dec 2020)
- Provided a Food Navigator at the Holland Farmers Market in 2020.
  - Provided tours & recipes; helped customers utilize food assistance programs.



# Healthy Behaviors: Outcomes



## Step It Up! Program

- Created by OC Parks, Public Health, GIS & Planning Depts. to help people stay active & explore new parks.
  - 1,078 enrolled in 2018.
  - 1,371 enrolled in 2019.
  - 919 enrolled in 2020.
- Program involves:
  - Tracking & reporting activity; setting & achieving fitness goals; variety of health tips
  - Opportunities for group walks
- 2020 Outcomes
  - 69% of survey respondents reported their Health Improved.
  - 65% of survey respondents met national health guidelines (for amount of PA/week) before the program. This increased to 76% at the end of the program.



# Healthy Behaviors: Outcomes

## Tri-Cities Family YMCA

- Offered many programs to promote consistent healthy behaviors and ↓ barriers to healthy living.
  - 3,500 members and over 2,000 program participants/year.
- Group Wellness
  - 60+ classes per week, (live & virtual)
    - Pedaling for Parkinson's
    - LiveWise (Alzheimer's patients)
    - Strength training for older adults
    - Y Diabetes Prevention Program
    - Prescription for Health Memberships; Free 7<sup>th</sup> grade memberships
    - Healthy Plant Based Eating Program
- Personal Fitness Opportunities



# Healthy Behaviors: Outcomes

## Tri-Cities Family YMCA

- Wellness Staff
  - Average 30 employees in the wellness department, working to ensure access to a healthy lifestyle.
- Decreased Barriers
  - The TCFY offers Community Pricing Scholarships to members and program participants in order to insure accessibility for all. Approximately 25% of all who are active at the Y participate in the Community Pricing program.
  - Members are also able to access fitness classes online in the comfort of their own home, eliminating the need for travel, especially during the past year.



# Healthy Behaviors: Outcomes

## Love in Action Health Clinic

- Clinic staff assess social determinants of health regularly & address revealed needs through community partners (food, transportation, housing & clothing).
- Staff members increase awareness, and support empowerment regarding accessing low-cost and free opportunities for physical activity within Ottawa County. They also support Ottawa Food efforts.
- Clinic providers utilize prescription YMCA vouchers and partner with patients to make SMART (Specific, Measurable, Attainable, Realistic, Timely) goals with clients regarding reasonable exercise possibilities from home.
- Clinic providers walk through Healthy Plate Education (increase fruit & veggies, decrease carbohydrates) & partner with patients to make SMART Goals.





# Healthy Behaviors: Outcomes

## Healthy Ottawa

- Rebranded the collaborative process of identifying key health problems & engaging the community to develop & implement strategic solutions.
  - Surveying leaders
  - Conducting BRFS
  - Conducting interviews with policymakers
  - Surveying special populations at risk of being medically underserved
  - Develop the OC Community Health Needs Assessment (CHNA)
  - Publish and present the CHNA results to the public
  - Creating the Healthy Ottawa Plan
- New website: [www.HealthyOttawa.org](http://www.HealthyOttawa.org)



# Feedback on 2018 CHIP (Healthy Ottawa)



The CHIP is an incredibly valuable tool for us as a local funder. It helps us better understand the highest priority needs in our community and align strategies for addressing them. We have used it on many occasions to inform decisions about which projects and programs we fund.

I think the CHIP and its work was critical in the county's response to COVID. So many connections were possible to be made because of the CHIP work. You all were instrumental in making sure this was no worse than it has been or will be. SO IMPORTANT to forge these partnerships and work toward nonpolitical goals! Very grateful for Ottawa County!

I appreciate this data. We have referenced this material in grant applications, to identify community needs, to look at the needs of our clients compared to broader community, etc.

We appreciate Ottawa County's approach to community health and have enjoyed being part of the process. We also try to incorporate information from these types of plans into our area planning process.

Keep up the great work!