







ECHO





BUILDING A HEALTHY COMMUNITY...





One of my top goals over the last 24 years has been to make Oakland County one of the best places to live, work, play, and raise a family. This includes improving the quality of life through active and healthy lifestyles. Oakland County Health Division has embraced this vision which is reflected in the creation of a community health improvement initiative known as Energizing Connections for Healthier Oakland or ECHO.

Today, I am pleased to share the official release of the ECHO Community Health Improvement Plan (CHIP). It builds on an impressive countywide community health assessment. It is also based on evidence and best practices. Created by a cross-sector partnership of organizations, the CHIP serves as a roadmap toward improving the quality of life in Oakland County through better health.

The CHIP provides a first-of-its-kind opportunity to move the mark forward on health by utilizing the data compiled from the ECHO assessments to align policies and programs around the county. Whether you choose to implement a worksite wellness initiative or enhance a community program to support the CHIP, the collective impact of many businesses and organizations collaborating on common health improvement goals will be significant.

Please join me in supporting the Community Health Improvement Plan. Visit the Oakland County Health Division website at www.oakgov.com/health for the next steps to take and ways to be involved. Together we can achieve an even healthier Oakland.

L. Brooks Patterson
Oakland County Executive



A COMMUNITY CALL TO ACTION

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Oakland County is a large, diverse community with many resources; however, many preventable health risks still exist. A healthy community is more than the absence of disease; it is the result of numerous factors, including income, education, neighborhood and community design, infrastructure quality, access to healthcare, healthy food, and opportunities to be physically active.

Building on the success of existing collaborations, the Oakland County Health Division organized Energizing Connections for Healthier Oakland (ECHO), a health improvement initiative. Led by a 30-member, cross-sector Steering Committee, ECHO facilitated developing a community-driven, comprehensive health assessment and health improvement plan that addresses pressing health issues in Oakland County.

The ECHO Community Health Improvement Plan (CHIP) for Oakland County outlines goals, objectives, and actions that can move the needle on health for five strategic issues. Community ownership allows for measurable impact to occur as so much more can be accomplished by working together. This invitation to the community calls for action to address the CHIP strategic issues. Whether your organization is developing a strategic plan, building a new program, or providing ongoing services that align with the CHIP strategic issues, it is important to document and link these community-wide initiatives to build an all-inclusive approach to health improvement. Together we can fulfill the ECHO vision of healthy people connected to a thriving community.

Sincerely, Jaimie Clayton Bonnie Kincaid Kathy Forzley



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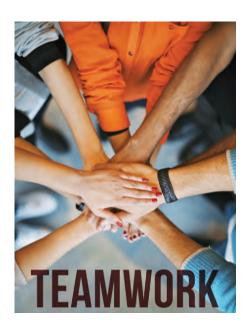
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OAKLAND COUNTY OVERVIEW

Oakland County is located on the northern border of the City of Detroit and Wayne County. With a population of 1,220,798, Oakland County is the 2nd most populous county in Michigan and the 32nd most populous nationally. Oakland County is home to nearly 30% of the 6-county Metro Detroit region's population. Since 2010, Oakland County's population has grown by 3%, an increase of 35,506 people which is the fastest growth in Metropolitan Detroit. Seventeen percent of Oakland County's population is five to 17 years old, while 15% of Oakland County's residents are age 65 or older.

Oakland County's population consists of approximately 79% Caucasian, 14% African American (the second largest African American population in Michigan next to Wayne County), 6% Asian (the largest Asian population in the state of Michigan), less than 0.5% Native Hawaiian/Pacific Islander, and 1% were some other race.⁶ An estimated 4% of Oakland County residents were Hispanic.⁶ Nearly 14% of the population speaks a language other than English (compared to Michigan at 9%).⁷ According to the U.S. English Foundation Inc., Oakland County's 77 total languages rank second in the state and 41st nationally for the number of languages spoken.⁸

The county has 28 school districts with 531 public and nonpublic schools. In the 2014-2015 school year, K-12 enrollment was approximately 207,000 children and adolescents, with 188,460 from public schools and 19,026 from nonpublic schools.

Oakland County covers an area of 907 square miles. ¹⁰ It has 35,247 acres of water, including 1,468 natural lakes and the headwaters of five major rivers. ^{11,12} Residents enjoy 83,087 acres of park, recreation, and open land, including 13 county parks, eight state parks, three Metroparks, and numerous local parks. ^{12,13}

Oakland County is an employment hub in Michigan, with approximately 580,000 employed workers, 262,165 of which commute from another county. 14,15 Oakland County has a diverse economy, with the top three employment

sectors being Professional and Business Services (26%); Trade, Transportation, and Utilities (18%); and Private education and Health Services (16%). The county's unemployment rate dropped to 4.2% in November 2015 from a high of 15% in July 2009. More than 97,000 jobs have been added since the low point of the recession in the first quarter of 2010. To Oakland County is home to nearly 1,000 firms from 39 foreign countries.

Since 1992, Oakland County has been governed under the authority of County Executive L. Brooks Patterson. Mr. Patterson's tenure as the County Executive has been highlighted by a number of business practices to expand economic development and security, including a balanced three-year, rolling, line-item budget, which has resulted in a AAA bond rating since 1998 for prudent fiscal policies.¹⁹

Another important initiative of Mr. Patterson is his emphasis on quality of life in Oakland County, with a long-standing committee of his Business Roundtable that generates recommendations for improving quality of life. The ultimate goal of Mr. Patterson is to make Oakland County one of the best places to live, work, and play. This emphasis on quality of life has been embraced by many county departments, including Oakland County Health Division (OCHD) through its community health improvement process.



A CALL TO ACTION

The ECHO Community Health Improvement Plan (CHIP) is intended to act as a blueprint to engage all sectors of the community in Oakland County. This living document will evolve as conditions, resources, and needs of the community change. The CHIP was created by involving multiple voices and perspectives from the community.

ECHO organized the plan around five strategic issues prioritized from the data and information compiled from the Community Health Assessment (CHA). Each strategic issue has goals, objectives, and suggested actions that can empower those looking to participate. Additionally, there are measures to track progress and tables that describe alignments of CHIP objectives to state and

national plans. Each strategic issue includes ideas for involvement identified for a variety of sectors, and how to participate with ECHO and the improvement activities.

The CHIP is a call to action for Oakland County. Every governmental agency, community organization, business, and individual can play a role in improving the health of our community. This plan provides a roadmap to align and link ongoing and future initiatives to make the best use of valuable resources. As you review the plan, consider how the goals and objectives align with those within your organization and how you intend to join this call to action. To get involved with the issues or actions included in the plan, please contact ECHO at echo@oakgov.com.

"HEALTHY PEOPLE CONNECTED TO A THRIVING COMMUNITY"

BACKGROUND

OCHD began work on its CHA and CHIP in 2013, by selecting Mobilizing for Action through Planning and Partnerships (MAPP) as a framework to guide the process. MAPP is a community-driven strategic planning process for improving health, developed by the National Association for County and City Health Officials (NACCHO). OCHD titled the initiative Energizing Connections for Healthier Oakland, or ECHO, and assembled a group of five staff, the ECHO Core Group, to work on this endeavor. ECHO engages the community in a recurring process to:

- Identify Gather data to create a snapshot of health in the county.
- Prioritize Rank health issues and determine which ones to address.
- Act Develop a coordinated plan to empower all partners throughout the community to help improve the health of the county.

In December 2013, a 30-member, cross-sector Steering Committee was assembled to oversee ECHO and includes representatives from hospitals, human services, behavioral health, higher education, businesses, parks and recreation, economic development, emergency response, community organizations, and elected officials. One of the first tasks of the ECHO Steering Committee was creating ECHO's vision, which is "Healthy people connected to a thriving community."

Early in the process, the ECHO Steering Committee engaged the community to identify their thoughts and attitudes around the meaning of a healthy community through the use of Four Question Boards. These boards were displayed at events across the county, and community members were invited to write their responses to the questions. ECHO used these answers to develop visual displays of the community's interpretation of what health means to them.

See exhibit 1.1



A community kickoff was held in April 2014, to officially launch ECHO to the community. Over 100 partners and community members attended to learn about ECHO and sign up to participate further. This event also commenced the start of data collection and information gathering through four assessment teams. Additionally, the ECHO Data Dashboard was introduced. The Data Dashboard will serve as a one-stop shop for monitoring data and indicators in the CHIP.

The four assessment teams include:

- Community Health Status Assessment (CHSA) The CHSA team used quantitative data to identify the top health conditions in Oakland County and also examined where health inequities exist.
- Community Themes & Strengths Assessment (CTSA) The CTSA team identified community assets and perceptions about health and quality of life through

use of question boards, focus groups, and a countywide survey.

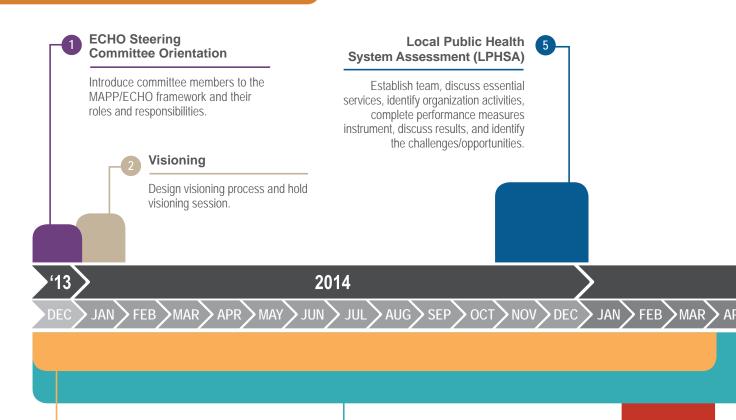
- Local Public Health Status Assessment (LPHSA) –
 The LPHSA team examined the delivery of essential
 public health services by all partners in Oakland
 County and identified strengths, weaknesses, and
 opportunities for improvement in the public health
 system. This assessment used the National Public
 Health Performance Standards as a tool for analysis
 of service delivery.
- Forces of Change Assessment (FOCA) The FOCA team looked at all the forces and associated opportunities and threats that can affect a community, either now or in the future. Initial thoughts regarding forces and their importance to the health of the community were gathered in an electronic survey, and in an in-person meeting to solidify the top forces impacting Oakland County.

Data collection and compilation by the four assessment teams concluded in May 2015. Each team identified top themes, opportunities, and/or concerns that arose from the data. The ECHO Core Group assembled all the information into summary reports that were presented to the Steering Committee in August 2015. They had a robust discussion about the recurring themes in the

data that resulted in selecting five strategic issues that would be the focus of the ECHO Community Health Improvement Plan (CHIP) for Oakland County, as well as core principles that will shape the work to come.

The Steering Committee then completed the development of goals, objectives, and suggested actions for

EXHIBIT 1.2: ECHO TIMELINE



Community Themes and Strengths Assessment (CTSA)

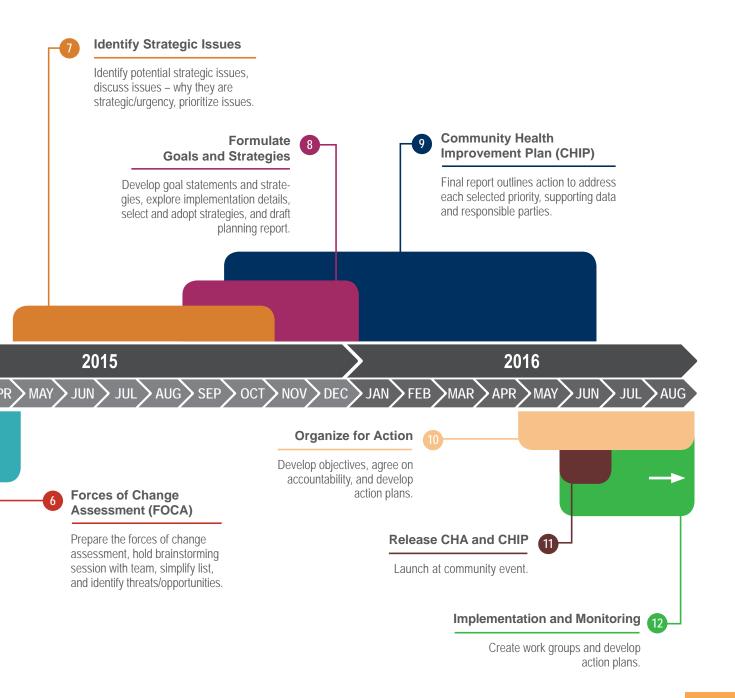
Identify team and resources; hold community dialogue and focus groups; develop, disseminate, and collect community survey; and conduct interviews with residents/key leaders. Community Health
Status Assessment (CHSA)

Conduct data collection of core indicators, select and collect additional indicators, analyze the data and create a health profile, disseminate health profile, establish a system to monitor data over time, and identify the challenges/opportunities.

the CHIP's five strategic issues: healthy eating, active living, built environment, access to care, and data and informatics. The suggested actions are intended as a starting point that community organizations and businesses can consider for getting involved. The ECHO Core Group was empowered by the Steering Committee to integrate evidence-based practices and a cross-section

reference of state and national plans for each strategic issue to finalize the plan.

In February 2016, the CHIP was finalized by the ECHO Steering Committee. This is the community's plan to implement, monitor and update as new information emerges that impacts Oakland County's health and quality of life.



CORE PRINCIPLES

Core Principles

The ECHO Steering Committee identified the following core principles that will guide the health improvement process, including the CHIP and Action Plan, and future community health assessments.

- Access Quality health and human services should be available, affordable, and easily navigable to all community members.
- Education Education is a critical component in promoting prevention, improving health literacy, and reducing health inequities.
- Resource Awareness Agencies actively promote and share resources among partners and clients in the community.

- Collaboration & Community Partnership Partners in the local public health system commit to building upon the existing, strong partnership base in the county, coordinating efforts, and sharing resources.
- Equity ECHO will continue to monitor the social determinants of health in Oakland County, with the ultimate goal of achieving the highest level of health for all people.
- Civic Engagement Oakland County residents aspire to make a difference in their communities, becoming more connected to their neighbors, and improving quality of life.
- Communication Information is shared openly among the partners in Oakland County. ECHO will continue to communicate with community members and residents as efforts occur to improve health.





STRATEGIC ISSUES









HEALTHY Eating

ACTIVE LIVING

BUILT Environment

ACCESS TO CARE

DATA & INFORMATICS

Strategic Issues

The ECHO Steering Committee reviewed data and themes from the Community Health Assessment process and identified five strategic issues to focus action on that will move the needle on health in Oakland County.



Healthy Eating

How can we create an environment that provides equitable access to and education about healthy eating for all community members?

Goal:

 Increase accessibility, affordability, and consumption of healthy foods throughout Oakland County.



Active Living

How can we strengthen the accessibility of resources and opportunities to promote active living among all community members?

Goal:

 Increase number of children and adults who lead active lifestyles in Oakland County.



Built Environment

How can we cultivate a built environment that promotes a healthy, connected, thriving community?

Goals:

- Foster improvements in the built environment to create a more connected, livable community.
- Increase the consideration of health impacts in infrastructure decision-making and policy.
- Promote and advance safe and healthy housing for all residents.



Access to Care

How can we ensure access to integrated health services for all community members?

Goals:

- Improve public knowledge about available health insurance and other health resources.
- Improve coordination of integrated services.



Data and Informatics

How can we increase data use and sharing across sectors to improve our understanding of health, service delivery, and operational efficiency?

Goal:

 Improve data and information technology use to make Oakland County a leader in health informatics.





STRATEGIC ISSUE - HEALTHY EATING

How can we create an environment that provides equitable access to, and education about, healthy eating for all community members?

Why Address Healthy Eating?

A healthy diet is a critical component of a healthy lifestyle. Healthy eating helps reduce a person's risk for developing obesity, osteoporosis, iron deficiency, and dental caries (cavities). Healthy eating also helps prevent high cholesterol, high blood pressure, and reduces the risk of developing chronic diseases such as cardiovascular disease, cancer, and type 2 diabetes. For youth, healthy nutrition promotes optimal growth and development.

Many factors can affect an individual's diet and consumption of healthy foods, including their knowledge about nutrition and healthy eating, as well as access to, and availability of, healthy foods in their community. Empowering people to make healthy choices and increasing access to affordable, healthy foods can make great strides in improving the community's health.

Healthy Eating: Consulting the Data

- Slightly more than a quarter of adults in Oakland County are obese.²⁰
- 36% of adults in Oakland County are overweight, which is the same as the Michigan average.²⁰

- 51% of pregnant women carrying single babies in Oakland County had weight gain that was excessive, which is higher than the Michigan average of 46%.²¹
- Almost 79% of adults in Oakland County are eating less than the recommended five servings of fruit and vegetables a day.²²
- 31% of the population in Oakland County lives in a food desert, which is a low-income census tract where a substantial number of residents have low access to a supermarket or large grocery store.²³
- 23% of Oakland County residents live in census tracts with no healthy food outlets.²⁴
- 41% of adults in Oakland County and Michigan have high cholesterol, while 38.4% of adults in the United States have high cholesterol.^{25, 26}
- The leading cause of death in Oakland County is heart disease.²⁷
- Obesity was the number one health concern of all ECHO Community Survey respondents.²⁸
- At 82.1 per 100,000, Oakland County is lower than both the State of Michigan and the United States for their rate of Supplemental Nutrition Assistance Program authorized food retailers.²⁹



Goal: Increase accessibility, affordability, and consumption of healthy foods throughout Oakland County.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
	Organize Food Policy Council	Food Policy Council created
	Increase healthy food access by exploring & expanding community, school, and home gardens	 Establish baseline and increase by 5% Percent of population with limited food access
	Increase amount of healthy food donated to local pantries and free/ low-cost alternative food outlets	Establish baseline and increase by 5%
Establish Food Policy Council to increase healthy food access	Establish a Healthy Corner Store Certification Program in designated food deserts in Oakland County	 At least one certified corner store within a 1/2 mile census tract designated as food desert Percent of low-income population with limited food access
	Identify opportunities to expand access to healthy and affordable options at farmers' markets	 Establish baseline and increase by 5% Percent of population with limited food access Inadequate fruit/vegetable consumption,
	Identify opportunities to increase farmers' market locations	Percent of adults age 18+ Youth Risk Behavior Surveillance System, median fruit and vegetable intake
Increase education and promotion opportunities around healthy eating	Identify and examine best practices for promoting healthy eating, cooking, and hydration in the community, including businesses	 Establish baseline and increase by 5% Inadequate fruit/vegetable consumption, percent of adults age 18+ Youth Risk Behavior Surveillance System, median fruit and vegetable intake

NATIONAL PREVENTION STRATEGY³⁰

HEALTHY PEOPLE 2020³¹

MICHIGAN HEALTH AND WELLNESS 4X4³² MICHIGAN OBESITY PRIORITY STRATEGIES 2014-2018³³

OBJECTIVE: Establish Food Policy Council to increase healthy food access

Increase access to healthy and affordable foods in communities Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods encouraged by the Dietary Guidelines for Americans

Encourage coalitions to implement strategies to increase the availability of healthy foods (mainly fruits and vegetables) in communities

Increase the variety of healthy foods offered in communities through existing establishments, grocery stores, farmers' markets, & community gardens in low-access neighborhoods

OBJECTIVE: Increase education and promotion opportunities around healthy eating

Help people recognize and make healthy food and beverage choices Increase the proportion of physician office visits that include counseling or education related to nutrition or weight Assess local community needs and expand programs such as community gardens and farmers' markets that bring healthy foods (especially Michigan-grown fruits and vegetables) to schools, businesses and communities

Provide nutrition information to customers (e.g., on menus) and make healthy options and appropriate portion sizes the default in restaurants and other food service venues

HEALTHY EATING | SHORT-TERM ACTIONS

- · Organize Food Policy Council.
- Examine food deserts by mapping grocery stores to determine areas where there is low food access.
- Promote best practices for healthy eating and cooking.
- Examine best practices around healthy eating in the local business community.

- Identify best practices for community gardening.
- Identify opportunities to increase or improve access to healthy, affordable options at farmers' markets.
- Develop materials to help teach consumers to grow fruits and vegetables.

HEALTHY EATING | MID-TERM ACTIONS

- · Establish collaborations to support gardening efforts.
- Develop/promote guidelines and recommendations for healthy food donations.
- Utilize best practice models for sustainable food outlets.
- Develop partnerships to donate plants, garden boxes, and other supplies to local gardening collaborations for dissemination to community members.
- Provide education throughout the growing season on tips to successfully grow produce, through social media, emails, or text messages.
- Establish partnerships with master gardeners to support additional gardening efforts.
- In food deserts, survey corner stores about current healthy food offerings.

- In neighborhoods without full-service grocery stores, work with residents to identify local corner stores that could serve as a reliable source of healthy food within the neighborhood.
- Identify and provide "How to become a Healthy Corner Store" training.
- Increase Supplemental Nutrition Assistance Program/Electronic Benefit Transfer (SNAP/EBT) technology use at farmers' markets in Oakland County.
- Increase SNAP ED programs in Oakland County.
- Increase alternative food outlets, such as low-cost produce markets, farm to school linkages, food pantries that offer produce and healthy foods, and non-traditional food sources, such as churches.





HEALTHY EATING | LONG-TERM ACTIONS

- Increase the amount of healthy food that is donated to local pantries and free and low-cost alternative food outlets.
- Increase healthy food access by expanding community, school, and home gardens.
- Establish a Healthy Corner Store Certification in areas designated as a food desert in Oakland County.
- Disseminate guidelines that identify opportunities for businesses to improve healthy eating options in the work environment.

SECTOR	IDEAS ON HOW TO BE INVOLVED	
Healthcare	 Participate in Food Policy Council Implement farm to institution programs Promote healthy eating in facilities and cafeterias Implement prescriptions for healthy foods 	 Promote healthy eating to employees Provide healthy eating education opportunities to employees and patients
Behavioral Health	 Participate in Food Policy Council Promote healthy eating to employees and consumers 	 Provide healthy eating education and information to consumers and employees Connect consumers to community gardens
Education	 Participate in Food Policy Council Implement school gardens Promote healthy eating in school cafeterias Connect families to community gardens 	 Provide healthy eating education opportunities to students and employees Implement farm to institution programs
Human Services	 Participate in Food Policy Council Work with partners to increase healthy food offerings at alternative food outlets 	Provide healthy eating information to clients and employees
Government	 Participate in Food Policy Council Expand the number of farmers' markets Expand EBT use at farmers' markets Promote Healthy Corner Store Certification in communities 	 Expand or sponsor community gardens Work with partners to increase the number of alternative food outlets Incorporate healthy eating education into wellness programs
Business	 Participate in Food Policy Council Promote healthy eating in facilities and cafeterias Identify and implement best practices to promote healthy eating at businesses 	 Become a certified Healthy Corner Store Incorporate healthy eating education into wellness programs Sponsor healthy eating opportunities in the community
Faith-Based Groups	 Participate in Food Policy Council Sponsor, implement, or promote alternative food outlets Sponsor community gardens 	 Host/sponsor healthy eating and cooking education opportunities Increase healthy food options and healthy eating education at alternative food outlets
Community/ Volunteer Groups	Participate in Food Policy CouncilSponsor community gardens	Host/sponsor healthy eating and cooking education opportunities
Parks/ Sports/ Recreation	Participate in Food Policy CouncilSponsor community gardens	Host/sponsor healthy eating and cooking education opportunities
Restaurants/ Food Outlets	Participate in Food Policy CouncilPromote healthy food options	 Implement farm to institution programs Host/sponsor healthy eating and cooking education opportunities





STRATEGIC ISSUE - ACTIVE LIVING

How can we strengthen accessibility of resources and opportunities to promote active living among all community members?

Why Address Active Living?

Regular physical activity helps improve an individual's overall health and fitness, and reduces the risk for many chronic diseases. People who are physically active live longer and have lower risks for heart disease, stroke, type 2 diabetes, depression, and some cancers. Regular physical activity is an important way to control weight and combat obesity. Communities that support active living are also safer and promote social cohesion.

Personal, social, economic, and environmental factors all play a role in physical activity levels among youth, adults, and older adults. Not all communities have equal access to physical activity resources or environments that support an active lifestyle. Community programs can impact the physical activity levels of its residents. Communities can introduce and sustain ways to support walking, cycling, and active transportation and increase access to recreation facilities, thereby increasing active living among its residents.

Active Living: Consulting the Data

- A little over 20% of adults in Oakland County report no physical activity in their leisure time.²⁰
- Over a guarter of adults in Oakland County are obese.²⁰
- 36% of adults in Oakland County are overweight, which is the same as Michigan's average.²⁰
- 51% of pregnant women carrying single babies in Oakland County had weight gain that was excessive, which is higher than the Michigan average of 46%.²¹
- The leading cause of death in Oakland County is heart disease.²⁷
- Only 41% of ECHO Community Survey respondents agree that it is easy to bike or walk in their community.
- In the ECHO Community Survey, the six focus cities identified physical activity as the 4th out of 10 top health concerns.²⁸
- 42% of the population in Oakland County lives within a half mile of a park, which rates below the median for counties in the United States.³⁴
- Obesity was the number one health concern of all ECHO Community Survey respondents.²⁸





Goal: Increase the number of children and adults who lead active lifestyles in Oakland County.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
Increase education and promotion of opportunities for active living	Create an Active Living Network of organizations including faith-based community, schools, non-profits, health-care, and media to promote and share information about physical activity	 Active Living Network convened Number of organizations in the network Number of communications disseminated
Increase access to safe, affordable active living activities in the community	Promote and implement strategies to increase walking/walkable communities	 Community walkability scores Percent of population reporting that they lead active lives Decrease percent of population with BMI greater than 30
	Promote affordable family-oriented physical activity options in the community	Establish a baseline of physical activity opportunities for families
	Promote affordable active living opportunities for pregnant women to support healthy weight gain	Establish baseline percent healthy weight gain
	Increase number of hospitals and physicians supporting and issuing prescriptions for active lifestyles	Number of hospitals/physicians participating in a prescription for active living program
	Increase the number of community facilities and organizations promoting and hosting active living activities	Calendar of events for active living opportunities in the community
	Increase active living opportunities for older adults in conjunction with senior centers and other community partners	Calendar of events for active living opportunities for older adults
	Utilize volunteer groups to assist isolated individuals to become more active and less secluded	Number of volunteers providing support to isolated individuals
	Increase the number of businesses, organizations, and foundations that sponsor or fund activities to support and expand active living opportunities	Number of sponsored or funded activities

Increase the number of children and youth who are physically active for 60 minutes per day	Promote affordable community-based physical activity opportunities for children in the community	Establish baseline of community-based physical activity opportunities for children
	Increase the number of communities participating in Safe Routes to School	Establish baseline of communities involved in Safe Routes to School and increase by 5%
	Work with schools to identify barriers to daily recess, and promote recommendations and research supporting daily recess	Report barriers, recommendations, and research supporting daily recess
	Increase the number of schools offering 20 minutes of daily recess	Percent of school districts requiring regular elementary school recess
Increase employer wellness policies promoting and supporting active living for employees	Work with employers to increase the number of businesses with wellness policies that promote active living	 Wellness assessment scores Number of businesses with wellness policies
	Increase employer-provided incentives for mass transit and active living practices	Number of employer provided incentives
	Work with employers to increase opportunities for employees to utilize healthcare reimbursement or dependent care accounts to pay for active living expenses	Number of employers reporting reimbursement account policies supporting active living





NATIONAL PREVENTION STRATEGY³⁰

HEALTHY PEOPLE 2020³¹ MICHIGAN HEALTH AND WELLNESS 4X4³² MICHIGAN OBESITY PRIORITY STRATEGIES 2014-2018³³

OBJECTIVE: Increase education and promotion of opportunities for active living

Assess physical activity levels and provide education, counseling, and referrals Increase the proportion of physician office visits that include counseling or education related to physical activity

Work with community, non-profit and faith-based organizations to offer low or no-cost physical activity programs (sports, walking clubs)

Provide community programs with a focus on changing physical activity behavior and building social support

OBJECTIVE: Increase access to safe, affordable active living activities in the community

Facilitate access to safe, accessible, and affordable places for physical activity

Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities Facilitate safe neighborhoods that encourage physical activity where appropriate (e.g., sidewalks, bike lanes, adequate lighting, multi-use trails, walkways, parks, and playgrounds)

Encourage community design and development that supports physical activity, such as sidewalks, adequate lighting, and traffic-slowing devices to improve active transportation

OBJECTIVE: Increase the number of children and youth who are physically active for 60 minutes per day

Promote and strengthen school and early learning policies and programs that increase physical activity Increase proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity and for musclestrengthening activity Encourage all school systems to adopt healthy food offerings, healthy behaviors, physical activity programs, and discuss with students the meaning of health as a personal core value

Promote Comprehensive School Physical Activity Program (CSPAP) that includes the following: quality physical education as the foundation, physical activity before, during, & after school, staff involvement, and family & community engagement

OBJECTIVE: Increase employer wellness policies promoting and supporting active living for employees

Support workplace policies and programs that increase physical activity

Improve health, illness, and quality of life through daily physical activity

Implement initiatives to increase the number of employees who are physically active during the work day. Consider feasibility of scheduling alternatives as well as structural additions such as bicycle racks, walking paths, changing facilities with showers

Support workplace programs that increase workday physical activity, such as flextime policies, lunchtime walking groups, access to exercise equipment, bicycle racks, walking paths, and changing facilities with showers

ACTIVE LIVING | SHORT-TERM ACTIONS

- Create an Active Living Network of organizations including non-profits, faith-based communities, schools and healthcare to promote and share information about physical activity.
- Promote affordable family-oriented physical activity options in the community.
- Promote affordable active living opportunities for pregnant women to support healthy weight gain.
- Promote affordable community-based physical activity opportunities for children in the community.

- Promote community-based physical activity opportunities for older adults.
- Partner with parks and recreation associations to improve access to physical activity opportunities for children and youth.
- Promote education and awareness of Safe Routes to School.
- Collaborate with community partners to increase physical activity strategies targeting children.

ACTIVE LIVING | MID-TERM ACTIONS

- Increase awareness about, and access to, active living opportunities for people with disabilities.
- Promote and implement strategies to increase walking and walkable communities.
- Increase the number of community organizations and facilities promoting and hosting active living activities.
- Utilize volunteer groups to assist isolated individuals in becoming more active and less secluded.
- Work with Parent Teacher Associations (PTA) to expand awareness, understanding, and promotion of Safe Routes to School.
- Increase the number of communities participating in Safe Routes to School.

ACTIVE LIVING | LONG-TERM ACTIONS

- Increase the number of hospitals and physicians supporting and issuing prescriptions for active lifestyles.
- Work with schools to identify barriers to daily recess and promote recommendations/research supporting daily recess.
- Engage political leaders and media to increase awareness of Safe Routes to School opportunities.
- Increase the number of schools offering 20 minutes of daily recess.
- Work with employers to increase the number of businesses with wellness policies promoting active living.
- Create a checklist of wellness options that employers can provide, such as reduced weight loss program fees, walking paths, or healthcare reimbursement.

SECTOR	IDEAS ON HOW TO BE INVOLVED	
Healthcare	 Participate in Active Living Network Promote physical activity to pregnant women to support healthy weight gain Support and promote walking to patients and employees Issue prescriptions for physical activity 	
Behavioral Health	 Participate in Active Living Network Promote the linkages between physical activity and mental health Support and promote walking to consumers and employees Implement wellness policies that promote active living 	
Education	 Participate in Active Living Network Increase the number of districts that participate in Safe Routes to Schools Identify and address barriers to daily recess Increase the availability and length of daily recess 	
Human Services	 Participate in Active Living Network Increase wellness policies promoting active living Promote community-based physical activity for children Increase the number of community organizations offering active living opportunities Promote and support walking among clients and employees 	
Government	 Participate in Active Living Network Increase the number of communities participating in Safe Routes to Schools Implement strategies to improve walkable communities Increase access to and promotion of community-based physical activity programs Increase active living opportunities for older adults Support and promote walking to employees and public 	
Business	 Participate in Active Living Network Increase wellness policies promoting active living Provide incentives or reimbursement for active living expenses 	
Faith-Based Groups	 Participate in Active Living Network Offer free or low-cost active living opportunities Promote and support walking and walkable communities	
Community/ Volunteer Groups	 Participate in Active Living Network Offer physical activity programs across all ages Support isolated individuals to be more active 	
Parks/ Sports/ Recreation	 Participate in Active Living Network Offer free or low-cost active living opportunities Offer physical activity programs across all ages Implement strategies to improve walkable communities Increase access to and promote community-based physical activity programs 	

EXHIBIT 1.3: STEP IT UP WORKSITES: STEP IT UP! Implement workplace policies **EVERYONE CAN HELP** and programs to MAKE OUR COMMUNITIES promote walking. ш 1111 MORE WALKABLE ш 1111 1111 ш ш **PARKS AND** MEDIA: News ш RECREATIONAL Spread the word about walking and **AND FITNESS** creating safe and ш **FACILITIES:** easy places Provide access to to walk. green spaces and recreation areas. **INDIVIDUALS SCHOOLS:** & FAMILIES: Implement safe Walk with friends, TRANSPORTATION, routes to school and family, and work daily physical LAND USE, & colleagues. education **COMMUNITY DESIGNERS:** programs. Design safe and easy places to walk. **PUBLIC HEALTH:** Provide information to plan, implement, and evaluate walking **HEALTH CARE** programs. **PROFESSIONALS:** Talk to patients about physical **VOLUNTEER** activity. & NONPROFIT **ORGANIZATIONS:** Offer free or low-cost community walking programs. Step it up! Help make your community more walkable. Learn how by visiting www.SurgeonGeneral.gov





STRATEGIC ISSUE - BUILT ENVIRONMENT

How can we cultivate a built environment that promotes a healthy, connected, thriving community?

Why Address the Built Environment?

The built environment includes all physical aspects of where we live, work, and play (e.g., homes, buildings, streets, open spaces, sidewalks, and parks). The environment people live in affects their health by determining their ability to be physically active, access healthy foods, and the possibility of being injured or becoming ill. Asthma is one health condition that is often worsened by home-based exposures and is the most common chronic health condition among children.³⁵

Uniting health partners with city planners, parks and recreation departments, or transportation providers can help create communities that are purposefully healthy, active, and well-connected. Improving the quality of homes in the community can also improve people's health status by positively impacting the place where they spend the majority of time. Working across sectors can help mitigate some of the health disparities caused by the built environment, and improve quality of life for the most vulnerable populations of the community.

Built Environment: Consulting the Data

 31% of the population in Oakland County lives in a food desert, which is a low-income census tract where a substantial number of residents have low access to a supermarket or large grocery store.²³

- 23% of Oakland County residents live in census tracts with no healthy food outlets.²⁴
- Approximately 40% of diagnosed asthma in children is believed to be attributed to residential exposure.³⁵
- 10.7% of Oakland County adults reported living with asthma.²⁰
- Less than 1% of the population in Oakland County uses public transportation.³⁶
- 68% of ECHO Community Survey respondents do not believe there is adequate public transportation in their community.²⁸
- While 50% of the ECHO Community Survey respondents stated that they do not need to use public transportation, 49% responded that there is no public transportation in their neighborhood, and 20% of respondents stated that buses do not travel where they need them.²⁸
- 25% of the ECHO Community Survey respondents do not agree that it is easy to bike or walk within their community.²⁸
- 42% of the population in Oakland County lives within a half mile of a park, which rates below the median for counties in the United States.³⁴







Goal: Foster improvements in the built environment to create a more connected, livable community.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
Increase the number of communities that are age-friendly	Increase the number of communities with the Communities for a Lifetime designation	Number of Communities for a Lifetime and increase by 5%
	Engage older adults in community planning	Number of communities that engage older adults in community planning
	Increase awareness of transportation options for older adults	Assessment of transportation options Resource list of transportation options for older adults
Increase accessibility to parks and trails	Encourage communities to complete walkability plans to improve park and trail access	 Park audit score Walkability score Adult physical activity rate Number of directional signage installed Number of communities with signage
	Increase the number of parks with a Safe Park Zone designation	Develop baseline and increase by 5%Adult physical activity rate
	Increase the number of communities that have Shared Use Agreements	Develop baseline and increase by 5%Adult physical activity rate
Increase the number of communities in Oakland County with Complete Streets Plans	Increase advocacy and support for Complete Streets and its health benefits to local municipalities	 Develop baseline of communities in Oakland County with Complete Streets and increase by 5% Adult physical activity rate
Increase the number of policies and programs that promote cycling and bike use in Oakland County	Develop bike share programs with business and community partners	Develop baseline of bike share programs
	Increase the number of bike fix-it stations and bike racks	 and increase by 5% Develop baseline of bike fix-it stations and increase by 5%
	Partner with municipalities to educate about cycling safety and sharing the road with cyclists	Number of communities providing education about cycling safety and road sharing

Goal: Increase the consideration of health impacts in infrastructure decision-making and policy.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
Increase the number of instances health is included into policies and programs in non-health sectors in Oakland County	Complete two health impact assessments in Oakland County, utilizing the ECHO partnerships	Number of health impact assessments
	Increase health representation when developing/updating community master plans	Number of communities engaging health representation in master plan development and updates

"HEALTH IS WHERE WE LIVE, LEARN, WORK, AND PLAY"

- Robert Wood Johnson Foundation

Goal: Promote and advance safe and healthy housing for all residents.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
Increase the number of educational programs about healthy and safe housing	Identify and disseminate healthy housing checklists	Asthma rates Lead poisoning rates
	Implement Home Injury Prevention Program	 Number of unintentional deaths from falls Injury and poisoning – principal diagnosis; hospitalization
	Develop multi-component home visiting program to reduce asthma triggers	Asthma hospitalizations Reduce asthma deaths
	Explore opportunities for Healthy Home Network	Lead poisoning ratesAsthma hospitalizations
	Develop Master Home Environmentalist program	Injury and poisoning – principal diagnosis; hospitalization

NATIONAL PREVENTION STRATEGY³⁰

HEALTHY PEOPLE 2020³¹ MICHIGAN HEALTH AND WELLNESS 4X4³² MICHIGAN OBESITY PRIORITY STRATEGIES 2014-2018³³

OBJECTIVE: Increase the number of communities that are age-friendly

Facilitate social connectedness and community engagement across the lifespan

N/A Age friendly communities not addressed in plan

N/A Age friendly communities not addressed in plan

Facilitate access to safe, accessible and affordable places for physical activity that can be used by all people of all ages and functional abilities

OBJECTIVE: Increase accessibility to parks and trails

Enhance cross-sector collaboration in community planning and design to promote health and safety Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities Engage in regular activity. Adults need at least 2.5 hours of moderate intensity physical activity per week

Facilitate access to safe, accessible, and affordable places for physical activity, including parks and trails

OBJECTIVE: Increase the number of communities in Oakland County with Complete Streets Plans

Enhance cross-sector collaboration in community planning and design to promote health and safety Policies for the built environment that enhance access to and availability of physical activity opportunities Complete Streets Advisory Council and the State Transportation Commission to identify model local policies for complete streets Encourage community design and development that supports physical activity, such as sidewalks, adequate lighting, and traffic-slowing devices to improve active transportation

OBJECTIVE: Increase the number of policies and programs that promote cycling and bike use in Oakland County

Enhance cross-sector collaboration in community planning and design to promote health and safety

Increase the proportion of trips made by bicycling

Work with transportation projects to implement non-motorized infrastructure to support residents to walk, bike, and use public transportation where appropriate

Encourage community design and development that supports physical activity, such as sidewalks, adequate lighting, and traffic-slowing devices to improve active transportation

NATIONAL PREVENTION STRATEGY³⁰

HEALTHY PEOPLE 2020³¹

MICHIGAN HEALTH AND WELLNESS 4X4³² MICHIGAN OBESITY PRIORITY STRATEGIES 2014-2018³³

OBJECTIVE: Increase the number of instances health is included into policies & programs in non-health sectors in Oakland County

Integrate health criteria into decision-making, where appropriate, across multiple sectors Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities

Encourage small and large businesses to offer worksite wellness programs for their employees Support workplace policies and programs that increase workday physical activity such as flextime policies, lunchtime walking groups, access to exercise equipment, facilities, bicycle racks, walking paths, and changing facilities with showers

OBJECTIVE: Increase the number of educational programs about healthy and safe housing

Design and promote affordable, accessible, safe, and healthy housing

Promote health for all through a healthy environment including Healthy Homes and Communities

N/A Housing not considered in plan

N/A Housing not considered in plan





BUILT ENVIRONMENT | SHORT-TERM ACTIONS

- · Complete health impact assessments
- · Identify and disseminate healthy housing checklists.
- Increase the awareness of transportation options for older adults.
- Encourage communities to complete walkability plans to improve park and trail access.
- Increase advocacy and support for Complete Streets and its health benefits to local municipalities.
- Increase number of bike fix-it stations and bike racks.

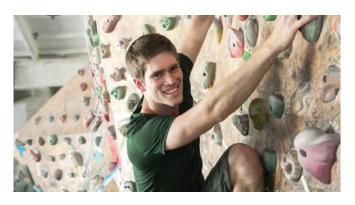
BUILT ENVIRONMENT | MID-TERM ACTIONS

- Explore opportunities for a Healthy Home Network
- Develop a multi-component home-visiting program to reduce asthma triggers.
- Implement a Home Injury Prevention Program.
- Increase the number of parks that have a Safe Park Zone designation.

- Expand number of older adults in community planning.
- Partner with municipalities to educate about cycling safety and sharing the road with cyclists.
- Develop bike share programs with businesses and community partners.

BUILT ENVIRONMENT | LONG-TERM ACTIONS

- Increase health representation when developing or updating community master plans.
- Develop Master Home Environmentalist Program.
- Increase the number of communities with the Communities for a Lifetime designation.
- Increase the number of communities that have Shared Use Agreements.





SECTOR	IDEAS ON HOW TO BE INVOLVED	
Healthcare	 Send health representatives to participate in land use master planning Refer patients to healthy homes programs 	 Educate patients about housing triggers for asthma and injury prevention in the home Increase awareness of transportation options for older adults
Behavioral Health	 Send representatives to participate in land use and master planning Increase awareness of transportation options for older adults 	Advocate for the benefits of Complete Streets, shared use agreements, and other policies that promote healthy community design
Education	Engage with partners to develop shared use agreements	 Advocate for the creation of Safe Park Zone designations Contribute to walkability plans
Human Services	 Increase awareness of transportation options for older adults Support municipalities applying for Communities for a Lifetime designation 	 Advocate for the benefits of Complete Streets, shared use agreements, and other policies that promote healthy community design Promote and educate about healthy homes
Government	 Obtain Communities for a Lifetime designation Increase use of health impact assessments Recruit health and older adult representation when developing master plans Increase park access with Safe Park designations 	 Develop walkability plans Work towards Complete Streets designation Promote cycling through bike fix-it stations and safe bicycling education Implement healthy homes programs
Business	 Increase awareness of transportation options for older adults to access local businesses Support municipalities that are applying for Communities for a Lifetime designation Sponsor opportunities to educate about healthy homes 	 Participate in health impact assessments Provide input on walkability plans, shared use agreements, and other policies that support healthy community design
Faith-Based Groups	 Encourage community participation in land use master planning Promote and educate about healthy homes 	 Encourage collaboration across sectors Increase awareness of transportation options for older adults
Community/ Volunteer Groups	 Encourage community participation in land use master planning Increase awareness of transportation options for older adults 	Provide input on walkability plans, shared use agreements, and other policies that support healthy community design
Parks/ Sports/ Recreation	 Increase the number of parks with a Safe Park Zone designation Increase adoption of walkability plans, shared use agreements, and other policies that support healthy community design 	 Invite health and other community representatives when developing plans Sponsor bike share programs Educate about safe cycling practices





STRATEGIC ISSUE - ACCESS TO CARE

How can we ensure access to integrated health services for all community members?

Why Address Access to Care?

Access to affordable, comprehensive, and quality health care services is a cornerstone of a healthy community. Access to care affects health disparities in a community, can impact health equity, and is also an important component of quality of life. Limited access to services can influence people's ability to reach their full potential. Inadequate access to care can increase emergency room usage, unnecessary hospitalizations, and healthcare costs.

Integration of care begins with prevention, early detection, and treatment of behavioral health conditions at the same time a person's physical healthcare needs are addressed to achieve overall health and community health. Integrating mental and emotional health promotion into community health and public health prevention strategies can make all health promotion more effective and help prevent other public health issues.³⁷

Access to Care: Consulting the Data

 9.3% of adults in Oakland County do not have health insurance.³⁸

- 12.6% of Oakland County adults did not see a doctor due to cost, which is higher than the Healthy People 2020 9% target.^{20, 30}
- 14.3% of adults in Oakland County lack a consistent source of primary care.²⁰
- 78% of women overall in Oakland County received adequate prenatal care, while only 65% of African-American women and 66% of Hispanic women had adequate prenatal care.³⁹
- Oakland County has a rate of 178.7 primary care physicians per 100,000 people.⁴⁰
- 15.1% of the overall population in Oakland County is on Medicaid;³⁸ however, five of the six ECHO Focus Cities (Pontiac, Madison Heights, Hazel Park, Oak Park, and Southfield) have areas where over 20% of the population is enrolled in Medicaid.³⁸
- 49% of the ECHO Community Survey respondents do not know if there are resources available to assist in getting health insurance.²⁸





Goal: Improve public knowledge about available health insurance and other health resources.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE	
Improve awareness of populations	Organize an Access to Care Workgroup including community-based organizations, education, faith-based sectors, and clinicians to conduct a gap analysis and identify under-served groups	 Access to Care Workgroup convened Assessments of under-served groups completed Percent of residents that could not afford to go to the doctor Other groups identified by the gap analysis 	
unable to adequate- ly access health insurance and other health resources	Provide ongoing education, assistance, and support to community members on effectively and optimally using health insurance and health resources	Number of access points for health resource navigation	
	Promote utilization of health system navigators to help understand health insurance and accessing care	Number of trained health system navigators	
Increase the	Address barriers identified from the gap analysis and identify and address inequities in access	Percent of residents uninsured (child, adult, senior) Percent of residents who usually use public transportation to get to provider Measures of access (inequities)	
percentage of residents who have access to healthcare	Update and promote the ECHO Data Dashboard as a tool for data and service information	Number of organizations participating in Network of Care database	
	Work with partners to address cultural and linguistic barriers to obtaining and understanding health information and services	Cultural and linguistic barriers identified	
Improve awareness of and education about behavioral	Promote Mental Health First Aid Training among professionals and community members	Number of trainings provided in community	
health services and resources	Provide training to implement trauma- informed care practices to key organizations	Number of trainings provided in community	

Goal: Improve coordination of integrated services.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
Increase access and referrals to	Identify barriers to accessing mental health services and prioritize actions to address barriers	Barriers to accessing mental health services identified
integrated health services	Bring together stakeholders to create and implement a community-wide comprehensive mental health referral plan	Referral plan completed

ACCESS TO CARE | ALIGNMENT WITH NATIONAL & STATE PLANS

NATIONAL PREVENTION STRATEGY³⁰

HEALTHY PEOPLE 2020³¹

MICHIGAN HEALTH AND WELLNESS 4X4³² MICHIGAN OBESITY PRIORITY STRATEGIES 2014-2018³³

OBJECTIVE: Improve awareness of populations unable to adequately access health insurance and other health resources

Reduce barriers to accessing clinical and community preventive services, especially among populations at greatest risk

Increase the proportion of persons with medical insurance

Engage partners (employers, trade and professional organizations, health insurers, and business associations) to offer worksite wellness and access to 4 X 4 resources

Improve health care quality and equity by building partnerships between provider practices and community organizations/resources

OBJECTIVE: Increase the percentage of residents who have access to healthcare

Reduce barriers to accessing clinical and community preventive services, especially among populations at greatest risk

Increase the proportion of persons with a usual primary care provider

Encourage individuals to get an annual physical examination and discuss the status of the four key health measures Improve health care quality and equity by building partnerships between provider practices and community organizations/resources

OBJECTIVE: Improve awareness of and education about behavioral health services and resources

Promote early identification of mental health needs and access to quality services Improve mental health through prevention and by ensuring access to appropriate, quality mental health services

N/A Plan does not address

N/A Plan does not address

OBJECTIVE: Increase access and referrals to integrated health services

Support implementation of community-based preventive services and enhance linkages with clinical care

Improve access to comprehensive, quality healthcare services

Encourage healthcare professionals to provide education, counseling, and referrals to community resources to help individuals with their 4 healthy behaviors and 4 health measures

Encourage healthcare professionals to assess physical activity levels and dietary patterns and provide education, counseling, and referrals to community resources









ACCESS TO CARE | SHORT-TERM ACTIONS

- Organize an Access to Care Workgroup including community-based organizations, education, faith-based sectors, and clinicians to identify under-served groups.
- Promote community awareness and understanding of various options for health insurance and resources.
- · Identify and address service gaps.

- Update and promote the ECHO Data Dashboard as a tool for data and service information.
- Promote utilization of health system navigators to help understand health insurance and accessing care.
- Promote Mental Health First Aid Training among professionals and community members.

ACCESS TO CARE | MID-TERM ACTIONS

- Address barriers to transportation and health insurance; identify and address inequities in access.
- Provide ongoing education, assistance, and support to community members on effectively and optimally using health insurance and health resources.
- Identify barriers to accessing mental health services.
- · Work with partners to develop a standardized approach to integrated screening processes.
- Provide training to implement trauma-informed care practices to key organizations.
- Increase collaboration between service providers and support networks.

ACCESS TO CARE | LONG-TERM ACTIONS

- Work with partners to address cultural and linguistic barriers to obtaining and understanding health infomation and services.
- · Bring together stakeholders to create and implement a community-wide comprehensive mental health referral plan.

SECTOR	IDEAS ON HOW TO BE INVOLVED	
Healthcare	 conduct gap analysis of care and services Identify ways to address inequities found in gap analysis Work with partners to address cultural and linsupport to 	se of health system navigators to help d health insurance and accessing care access and referral to health services ngoing education, assistance, and community members on effectively th insurance and health resources
Behavioral Health	 conduct gap analysis of care and services Identify ways to address inequities found in gap analysis Promote Mental Health First Aid Training among professionals and community members Provide ongoing education, assistance, and supmental health and supm	aining to implement trauma-informed ices to key organizations arriers to accessing mental health read prioritize actions to address barriers ether stakeholders to create and a community-wide comprehensive alth referral plan access and referral to health services
Education	 conduct gap analysis of care and services understand Provide public education on the availability of services and resources in the community Work with guistic bar 	se of health system navigators to help d health insurance and accessing care partners to address cultural and lin- rriers to obtaining and understanding from and services
Human Services	 conduct gap analysis of care and services understand Identify ways to address inequities found in gap analysis Work with guistic bar 	se of health system navigators to help d health insurance and accessing care partners to address cultural and lin- rriers to obtaining and understanding frmation and services
Government	conduct gap analysis of care and services as a tool for eldentify ways to address inequities found in gap analysis and ending the promote community awareness/understanding of various options for health insurance and ending guistic bar	d promote the ECHO Data Dashboard or data and service information se of health system navigators to help d health insurance and accessing care partners to address cultural and lintriers to obtaining and understanding ormation and services
Business		ne ECHO Data Dashboard as a tool d service information

· Work with partners to address cultural and lin-· Provide ongoing education, assistance, and guistic barriers to obtaining and understanding support to community members on effectively Faith-Based health information and services using health insurance and health resources Groups · Promote use of health system navigators to help · Provide public education on availability of understand health insurance and accessing care services and resources in the community · Work with partners to address cultural and lin- Provide ongoing education, assistance, and guistic barriers to obtaining and understanding support to community members on effectively Community/ health information and services using health insurance and health resources Volunteer Groups Promote use of health system navigators to help · Provide public education on availability of services and resources in the community understand health insurance and accessing care

EXHIBIT 1.4: INTEGRATING HEALTH SERVICES







STRATEGIC ISSUE - DATA & INFORMATICS

How can we increase data use and sharing across sectors to improve our understanding of health, service delivery, and operational efficiency?

Why Address Data and Informatics?

Informatics is the science that studies the use and processing of data, information, and knowledge. Informatics can help create a shift in how public health, healthcare, and partners manage information, conduct operations, and make decisions.

Technology is rapidly advancing and agencies are tasked with utilizing it for the betterment of their clients and community. Embracing data and informatics can create bridges between partners that support improved coordination of care for clients and patients.

The ECHO Local Public Health System Assessment identified improving data between partners as a major opportunity for the Oakland County public health system.

Data and Informatics: Consulting the Data

- About 6 in 10 (59%) hospitals had adopted an Electronic Health Records (EHR) system with certain advanced functionalities in 2013.⁴¹
- 80% of Americans who have access to their health information in electronic health records use it, while 65% who don't have access to their health information say it is important to have it.⁴²
- 67% of U.S. adults age 65 & older say that accessing their medical information online is important.⁴³



DATA & INFORMATICS | GOAL & OBJECTIVES

Goal: Improve data and information technology use to make Oakland County a leader in health informatics.

OBJECTIVE	SUGGESTED ACTIONS	MEASURE
	Convene a Health Informatics Workgroup comprised of representatives from healthcare, local public health, mental health, and other partner organizations to facilitate cross-sector information exchange	A Health Informatics Workgroup is convened and a schedule for regular meetings established
Develop a Health Informatics Work- group to assess current and future opportunities	Assess the current landscape of health information exchange in Oakland County; identify current practices, potential opportunities, & gaps in information exchange	A completed assessment
around data use, technology, and health information	Increase the number of informal and formal data sharing arrangements between partners	Number of data sharing arrangements
exchange	Promote cross-sector information exchange	Assess interest/opportunities for cross-sector information exchange
	Expand/update the ECHO Data Dashboard and use to monitor indicators in the CHIP	Number of CHIP indicators ECHO Data Dashboard

NATIONAL PREVENTION STRATEGY³⁰ HEALTHY PEOPLE 202031

FEDERAL HEALTH IT STRATEGIC PLAN 2015-202044

NATIONAL STRATEGY FOR INFORMATION & SAFEGUARDING 201245

OBJECTIVE: Develop a Health Informatics Workgroup to assess current and future opportunities around data use, informatics, technology, and health information exchange

Expand use of interoperable health information technology Increase the proportion of persons who use electronic personal health management tools

Enhance Nation's Health IT Infrastructure

Drive collective action through collaboraton and accountability

DATA & INFORMATICS | SHORT-TERM ACTIONS

- Convene a Health Informatics Workgroup comprised of representatives from healthcare, public health, mental health, and other partner organizations.
- · Access interest and opportunities for cross sectional information exchange.

DATA & INFORMATICS | MID-TERM ACTIONS

- Assess the current landscape of health information exchange in Oakland County, identifying current practices, potential opportunities, and gaps in information exchange.
- Expand and update the ECHO Data Dashboard and use it to monitor indicators included in the Community Health Improvement Plan.

DATA & INFORMATICS | LONG-TERM ACTIONS

- Increase the number of informal and formal data sharing arrangements between partners.
- Expand and increase access to information technology and integrated data systems to promote cross-sector information exchange.

SECTOR	IDEAS ON HOW TO BE INVOLVED
Healthcare	 Participate in Health Informatics Workgroup Help identify current practices, potential opportunities, and gaps in information exchange Increase the number of informal and formal data sharing arrangements between partners
Behavioral Health	 Participate in Health Informatics Workgroup Help identify current practices, potential opportunities, and gaps in information exchange Increase the number of informal and formal data sharing arrangements between partners
Education	Participate in Health Informatics Workgroup Increase the number of informal and formal data sharing arrangements between partners
Human Services	Participate in Health Informatics Workgroup Help identify current practices, potential opportunities, and gaps in information exchange
Government	 Participate in Health Informatics Workgroup Help identify current practices, potential opportunities, and gaps in information exchange Expand and update the ECHO Data Dashboard and use it to monitor indicators included in the Community Health Assessment
Business	Participate in Health Informatics Workgroup Expand and increase access to information technology and integrated data systems to promote cross-sector information exchange
Faith-Based Groups	Participate in Health Informatics Workgroup Increase access to information technology to promote cross-sector information exchange and the increased use of data and health information in the community
Community/ Volunteer Groups	Participate in Health Informatics Workgroup Increase access to information technology to promote cross-sector information exchange and the increased use of data and health information in the community









MOVING FORWARD

Next Steps

ECHO will work with partners to implement and document the activities outlined in this Community Health Improvement Plan (CHIP). ECHO will also convene several key stakeholder groups, including a Food Policy Council, Active Living Network, Access to Care Workgroup, and Health Informatics Workgroup, to help facilitate and oversee activities. Organizations, businesses, municipalities, and community members will be actively engaged to take ownership of, participate in, and document the strategies outlined in the plan.

FOOD POLICY COUNCIL

ACTIVE LIVING NETWORK ACCESS TO CARE WORKGROUP HEALTH INFORMATICS WORKGROUP

HOW TO GET INVOLVED

Join ECHO to help address the complex factors that shape opportunities for people in Oakland County to be healthy. No single person or organization alone can create such a large-scale and lasting change as can happen together.

Share pressing issues impacting health in Oakland County. The way we communicate about our partnership and our work is critical to our success. The narrative that people are most familiar with is that health is a product of personal responsibility. The reality is that the conditions in which people live, and the opportunities they have, form the foundation for health.

Understand health and equity and how social, economic, and environmental factors, such as racism, poverty, poor education, unsafe housing, and poor food access, affect health outcomes and negatively impact our entire society.

Help increase community engagement. Commit to including community members, especially those impacted by inequities, in all aspects of planning, implementation, and evaluation of your programs and services. Building trusting relationships and community ownership can lead to lasting changes.

Work with us to inform and influence policy and decision makers to ensure that everyone equally benefits from policies and practices within our county, communities and organizations.

Document progress through collection, reporting, and sharing of data and information. By evaluating and measuring our efforts we can clearly understand how successful we are in addressing our most pressing health issues and reducing inequities in our community.

Follow us on the ECHO website, and Data Dashboard at oakgov.com/health.

ECHO | STEERING COMMITTEE

Alliance of Coalitions for Healthy Communities

Marc Jeffries

Area Agency on Aging 1-B
Tina Abbate Marzolf

Beaumont Health System Belinda Barron

Beaumont Health System

Maureen Elliott

Botsford Hospital Margo Gorchow

Clinton River Watershed Council

Anne Vaara

Crittenton Hospital Angela Delpup

Easter Seals
Brent Wirth

Henry Ford Hospital West Bloomfield **Michael Feld, MD**

Hope Hospitality and Warming Center **Elizabeth Kelly**

McLaren Health Care Chandan Gupte

Michigan Department of Health & Human Services Vicki Cooley

Oakland County Board of Commissioners Shelley Taub

Oakland County Board of Commissioners **Helaine Zack**

Oakland County Child Care Council **Susan Allen**

Oakland County Community Mental Health Authority **Kathleen Kovach** Oakland County Economic Development and Community Affairs **David Schreiber**

Oakland County Health Division **Tony Drautz**

Oakland County Homeland Security

Ted Quisenberry

Oakland County
Medical Control Authority
Bonnie Kincaid

Oakland County
Parks and Recreation
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Oakland County Veterans' Services **Garth Wootten**

Oakland County Youth Assistance Mary Schusterbauer

Oakland Family Services Jaimie Clayton

Oakland Livingston
Human Service Agency
Lynn Crotty

Oakland Schools

Joan Lessen-Firestone

Oakland University Patricia Wren

St. John Providence Health System **Jerry Blair**

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Total Management Solutions
Leanne Chadwick

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Common Ground **Emily Norton**

Easter Seals

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ACRONYMS

ACRONYMS	DESCRIPTION
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
CHSA	Community Health Status Assessment
CTSA	Community Themes and Strengths Assessment
EBT	Electronic Benefit Transfer
ECHO	Energizing Connections for Healthier Oakland
EHR	Electronic Health Record
FOCA	Forces of Change Assessment
K-12	Kindergarten - Twelfth Grade
LPHSA	Local Public Health Status Assessment
MAPP	Mobilizing for Action through Planning and Partnerships
NACCHO	National Association for Counties & City Health Officials
OCHD	Oakland County Health Division
SNAP ED	Supplemental Nutrition Assistance Program Education

ENDNOTES

- "Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2014 more information 2014 Population Estimates." American FactFinder. Web. 13 Jan. 2016. http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>.
- 2. "U.S. Total Population County Rank." USA. Web. 21 Dec. 2015. .">http://www.usa.com/rank/us--total-population-county-rank.htm?yr=8000&dis=&wist=&plow=&phigh=>.
- 3. "Michigan Total Population County Rank." USA. Web. 21 Dec. 2015. .">wist=&plow=&phigh=>.
- 4. "Cumulative Estimates of Resident Population Change and Rankings: April 1, 2010 to July 1, 2014 State -- County / County Equivalent 2014 Population Estimates." American FactFinder. Web. 21 Dec. 2015. ."
- 5. "Age and Sex: 2014 American Community Survey Oakland County, Michigan." American FactFinder. Web. 13 Jan. 2016. http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF.
- 6. "Race and Hispanic or Latino Origin: 2010." American FactFinder. Web. 21 Dec. 2015. http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF.
- 7. "Selected Social Characteristics in the United States: 2010-2014 American Community Survey 5-Year Estimates." American FactFinder. Web. 21 Dec. 2015. .
- 8. "Counties With the Most Languages Spoken." U.S. English Foundation. Web. 21 Dec. 2015. http://www.usefoundation.org/userdata/file/Research/Regions/michigan.pdf>.
- 9. "EEM | Public Data Sets." Centers for Educational Performance and Information. Web. 13 Jan. 2016. http://cepi.state.mi.us/EEM/PublicDatasets.aspx.
- 10. "Community Profiles: Oakland County." Southeastern Michigan Council of Governments. Web. 21 Dec. 2015. http://semcog.org/Data-and-Maps/Community-Profiles>.
- 11. "Soil Survey of Oakland County Michian." Natural Resource Conservation Service. United States Department of Agriculture. Web. 16 Feb. 2016. http://www.nrcs.usda.gov/Internet/FSE_MANUSCRIPTS/michigan/oaklandMI1982/text.pdf.
- 12. "Oakland County 2015 Land Use." Oakland County Michigan. Web. 16 Feb. 2016. https://www.oakgov.com/advantageoakland/media-center/Documents/Maps/sum_oak.pdf.
- 13. "Land Use Definitions." Oakland County Michigan. Web. 16 Feb. 2016. https://www.oakgov.com/advantageoak-land/communities/Pages/CPHALUZDefinitions.aspx.

- 14. "Means of Transportation to Work By Select Characteristics." American FactFinder. Web. 21 Dec. 2015. ">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S0802&prodType=table>">http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml
- 15. "Census Bureau Reports 262,000 Workers Commute into Oakland County, Mich., Each Day." United States Census Bureau. Web. 21 Dec. 2015. http://www.census.gov/newsroom/press-releases/2013/cb13-r18.html.
- 16. "QCEW Data Views." U.S. Bureau of Labor Statistics. Web. 6 Jan. 2016. http://www.bls.gov/cew/apps/data_views.htm#tab=Tables.
- 17. "Local Area Unemployment Statistics." Bureau of Labor Statistics. Web. 19 Dec. 2015. http://data.bls.gov/pdq/ SurveyOutputServlet; jsessionid=24738F036CAB9F8181C9CD9BE3444A95.tc_instance5.>.
- 18. "Advantage Oakland: Facts and Stats Economic Data." Oakland County Michigan. Web. 6 Jan. 2016. https://www.oakgov.com/advantageoakland/business/Pages/county-profile-default.aspx.
- 19. "Accomplishments." Oakland County Michigan. Web. 5 Jan. 2016. https://www.oakgov.com/exec/Pages/accomplishments/default.aspx.
- 20. "2012-2014 Michigan BRFS Regional & Local Health Department Estimates." Michigan Department of Health and Human Services. Web. 6 Jan. 2016. http://www.michigan.gov/documents/mdch/2012-2014_MiBRFS_Reg_LHD_Tables_FINAL_500165_7.pdf.
- 21. "Number & Percent of Live Births by Weight Gain of Mother and by Year." Michigan Department of Health and Human Services. Web. 6 Jan. 2016. .
- 22. "2011-2013 Michigan BRFS Regional & Local Health Department Estimates." Michigan Department of Health and Human Services. Web. 7 Jan. 2016. http://www.michigan.gov/documents/mdch/2011-2013_MiBRFS_Reg_LHD_Tables_FINAL_466326_7.pdf.
- 23. "Community Health Needs Assessment (CHNA): Population with Low Food Access." Community Commons. Web. 7 Jan. 2016. http://assessment.communitycommons.org/CHNA/report?page=3&id=404&reporttype=libraryCHNA.>.
- 24. "Community Health Needs Assessment (CHNA): Modified Food Retail Environment Index." Community Commons. Web.7Jan.2016.http://assessment.communitycommons.org/CHNA/report?page=3&id=788&reporttype=libraryCHNA>.
- 25. "Health Indicators and Risk Estimates by Community Health Assessment Regions and Local Health Departments Michigan." Michigan Department of Health and Human Services. Web. 7 Jan. 2016. http://www.michigan.gov/documents/mdch/2011-2013_MiBRFS_Reg_LHD_Tables_FINAL_466326_7.pdf.
- 26. "BRFSS Prevalence & Trends Data." Centers for Disease Control and Prevention. Web. 13 Jan. 2016. .
- 27. "Michigan and US Age-adjusted Death Rates for Leading Causes of Death." Michigan Department of Health and Human Services. Web. 8 Jan. 2016. http://www.mdch.state.mi.us/pha/osr/chi/Deaths/leadUS/LeadingUSObject2.asp ?AreaCode=63&AreaType=C&JS=No>.
- 28. "Community Themes and Strengths Assessment." Oakland County Health Division. Survey. Qualtrics. 29 July 2015. Web. 11 Jan. 2016.

- 29. "Community Health Needs Assessment (CHNA): SNAP Authorized Food Store Access." Community Commons. Web. 8 Jan. 2016. http://assessment.communitycommons.org/CHNA/report.aspx?page=3&id=750&reporttype=libraryCHNA>.
- 30. Surgeon General. National Prevention Council. Web. 8 Jan. 2016. http://www.surgeongeneral.gov>.
- 31. Office of Disease Prevention and Health Promotion. Healthy People 2020. Web. 8 Jan. 2016. https://www.healthypeople.gov>.
- 32. Michigan Department of Health and Human Services. Michigan Health and Wellness 4x4 Plan. Web. 8 Jan. 2016. http://www.michigan.gov/documents/healthymichigan/Michigan_Health_Wellness_4x4_Plan_387870_7.pdf.
- 33. Michigan Department of Health and Human Services. Making a Difference in Obesity, Michigan's Priority Strategies 2014 2018. Web. 8 Jan. 2016. http://www.michigan.gov/documents/healthymichigan/Making_a_Difference_in_Obesity_Priority_Strategies_2014_-_2018_BE_ACTIVE_EAT_HEALTHY_Publish_4_21_14_454433_7.pdf.
- 34. "Community Health Status Indicators (CHSI): Access to Parks." CDC. Community Health Status Indicators. Web. 12 Jan. 2016. http://wwwn.cdc.gov/CommunityHealth/profile/currentprofile/MI/Oakland/310049.
- 35. Beyond Health Care: New Direction to a Healthier America." Commission on Health. Robert Wood Johnson Foundation. Web. 3 Mar. 2016. Health Care New Directions to a Healthier America.pdf>.
- 36. "Commuting Characteristics by Sex: 2010-2014 American Community Survey 5-Year Estimates Oakland County, Michigan." American FactFinder. Web. 8 Jan. 2016. http://factfinder.census.gov/faces/tableservices/jsf/pages/product-view.xhtml?src=CF>.
- 37. "Health Care and Health Systems Integration." Substance Abuse and Mental Health Services Administration (SAMHSA). Web. 7 Mar. 2016. http://www.samhsa.gov/health-care-health-systems-integration.
- 38. "Health Insurance Coverage Status: 2010-2014 American Community Survey 5-year Estimates Oakland County, Michigan." American FactFinder. Web. 11 Jan. 2016. .
- 39. "Natility Trends: Birth Characteristics and Fertility Trends." Michigan Department of Health and Human Services. Web. 14 Jan. 2016. http://www.mdch.state.mi.us/pha/osr/chi/births14/frame.html.
- 40. "Community Health Needs Assessment (CHNA): Access to Primary Care." Community Commons. Web. 11 Jan. 2016. http://assessment.communitycommons.org/CHNA/report.aspx?page=2&id=213&reporttype=libraryCHNA/.
- 41. "More physicians and hospitals are using EHRs than before." U.S. Department of Health and Human Services. Web. 7 Aug. 2016 http://www.hhs.gov/about/news/2014/08/07/more-physicians-and-hospitals-are-using-ehrs-than-before.html.
- 42. "Electronic Health Records: How they connect you and your doctor." The Office of the National Coordinator for Health Information Technology (ONC). Web. 11 Mar. 2015. https://www.healthit.gov/patients-families/electronic-health-records-infographic.
- 43. "The Next eHealth Wave for Silver Surfers: Health Management." Accenture. Web. 2015. https://www.accenture.com/us-en/insight-silver-surfer-catching-ehealth-wave-summary.aspx.
- 44. United States Department of Health and Human Services. Federal Health IT Strategic Plan. https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal_0.pdf.
- 45. "National Strategy for Information Sharing and Safeguarding." The White House. Web. https://www.whitehouse.gov/sites/default/files/docs/2012sharingstrategy 1.pdf>.

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