

December 2016

# Community Health Improvement Plan Mid-Year Update Report December 2016



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## Introduction

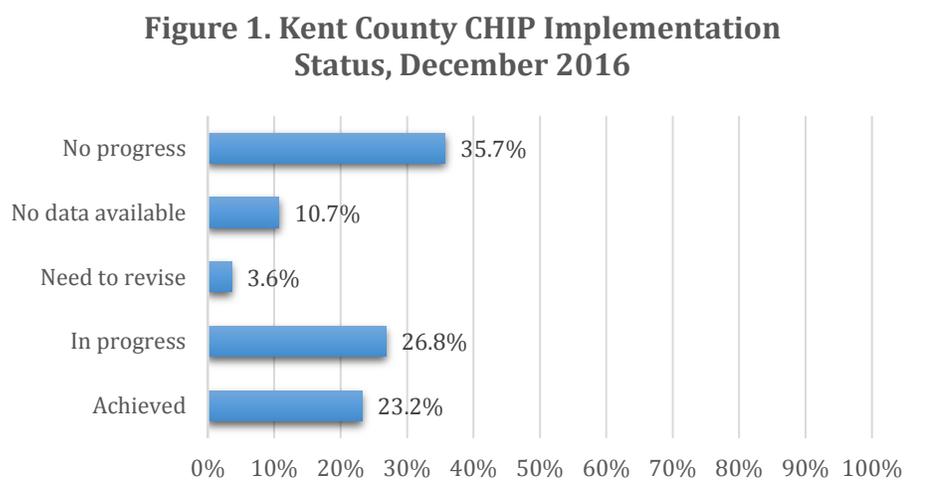
### Report Overview

Healthy Kent published the 2015 Community Health Improvement Plan (CHIP) in February 2016. Outlined in this plan are the goals, objectives, and strategies for addressing the four most prevalent community-identified health issues afflicting the residents in Kent County. Also included in this plan is a list of key community partner organizations and agencies that have committed to the successful implementation of the strategies included within the CHIP. The 2015 CHIP can be viewed in its entirety by visiting [www.kentcountychna.org](http://www.kentcountychna.org).

This report is intended to serve as a six-month snapshot of the work being done in accordance with the Kent County CHIP. Reports of progress were compiled through solicitation of updates from each of the workgroup co-leads. Successes, challenges, and accomplishments are highlighted.

## Objective Status Dashboard and Progress Summary

As of December 2016, 23% of objectives in the Kent County CHIP have been completed, which is an increase from 13% stated in the June 2016 report (Figure 1). Twenty-five percent are in progress and 4% need to be revised. Almost 40% of objectives have had no progress.



The “no data available” category encompasses all objectives for which updated statistical information was unavailable. These indicators likely will not show updated status until the 2017 Behavioral Risk Factor Surveillance Survey (BRFSS) and Community Health Needs Assessment (CHNA) processes are conducted.

Figure 2 displays implementation status by workgroup (Adverse Childhood Experiences [ACE]; Healthy Eating, Active Living [HE]; Health in All Policies [HIAP]; Mental Health [MH]; Substance Use Disorder [SUD]). The quantity of objectives per workgroup should be considered when evaluating this information.

**Figure 2. Kent County CHIP Implementation Status by Workgroup, December 2016**



**Objective Status Key**

No Progress	In Progress	Achieved	Exceeded
☹	☹	☺	☺ ✓

**Mental Health (MH) Workgroup**

**Goal 1** Decrease stigma associated with mental health issues and increase community awareness of risk factors for mental health conditions.

Objective	Target	Status
Provide Mental Health First Aid training to at least 200 adults who work with youth annually for three years (beginning in January 2016)	200 adults who work with youth per year	☺ ✓ 591 participants

[Data Source: MHFWM; Network180]

In 2016, there were 591 adults trained in Youth Mental Health First Aid. These numbers were reported by the Kent Intermediate School District, Mental Health Foundation, Network180, Urban League, Sparta Schools and Wedgewood Christian Services.

Objective	Target	Status
Provide Mental Health First Aid training to at least 90 adults in the community at-large annually for three years (beginning in January 2016)	90 adults trained	☺ ✓ 341 adults trained

[Data Source: MHFWM; Network180]

Mental Health First Aid training reached 341 adults in 2016, which meets and exceeds the objective.

Objective	Target	Status
Provide Mental Health First Aid training to at least 90 healthcare providers in Kent County annually for three years (beginning in January 2016)	90 healthcare providers trained	☹ No progress*

[Data Source: MHFWM; Network180]

There has been no progress on providing Mental Health First Aid training to healthcare providers, as there is a shortage in the number of Mental Health First Aid trained instructors. The 8-hour training is hard to fit into the healthcare provider's schedules. There is a lack of healthcare providers represented on the MH workgroup, which makes it difficult to get a class going.

\*The workgroup identified this as an objective that needs to be revised.

Objective	Target	Status
Provide Mental Health First Aid training to at least 90 community residents who speak Spanish annually for three years (beginning in January 2016)	90 Spanish-speaking adults trained	☺ In progress

[Data Source: MHFWM]

The Mental Health Education Committee for Spanish speakers continues to work on the development of a one time, 1.5-hour training. It will include what is mental health, how to recognize when there is a problem starting, and what to do to seek help. HealthNet will provide this training at locations already serving the Spanish speaking population such as Network180, Cherry Health and Kent School Services Network. HealthNet will track where the training is occurring and the number of participants.

Network180 has a staff person who has been trained in Mental Health First Aid in Spanish. That training will occur in the Spring or Summer of 2017.

Objective	Target	Status
Provide Mental Health First Aid training to at least 90 law enforcement and First Responders in Kent County annually for three years (beginning in January 2016).	90 law enforcement and/or first responders trained	 No progress

[Data Source: MHFWM; Network180]

Before soliciting participation in Mental Health First Aid by law enforcement and first responders, the Workgroup has decided to first assess training needs for this population. The Healthy Kent Suicide Prevention Coalition is working to connect with the Kent County Sheriff’s Department and has contacted other local law enforcement agencies to help gather training needs data. The Workgroup identified that there is a Mental Health First Aid module for Law Enforcement. A few of the Mental Health First Aid Instructors are certified in the Law Enforcement module.

Objective	Target	Status
Expand availability of Live. Laugh. Love. curriculum into at least two (2) Kent County public and private school districts annually for three years (beginning in January 2016)	At least 6 school districts offering curriculum	 5 school districts offering curriculum

[Data Source: MHFWM]

To date, there are five school districts in Kent County that offer the Live. Laugh. Love. curriculum for students. Among these districts, there are 2,200 students impacted by the program. When the curriculum was first offered, the Mental Health Foundation was the only provider. Recently, a health educator at the Kent County Health Department who works in the Sparta School District was trained and is now offering the curriculum to students there. The Mental Health Foundation would like to expand its reach with Live. Laugh. Love. to other school districts where the Kent County Health Department is providing Life Skills programming.

Objective	Target	Status
Expand the number of public and private school districts in Kent County that implement the “be.nice.” program to at least 8 school districts annually for three years (beginning in January 2016)	At least 16 school districts offering program	 12 school districts offering program

[Data Source: MHFWM]

The *be nice* program is being offered in 12 school districts, which means a reach of more than 25,000 students of all ages. This program is a positive anti-bullying initiative designed to spread awareness surrounding the issues of bullying and the importance of treating people with civility community-wide.

Objective	Target	Status
Expand the “be.nice.” program into at least 2 workplace settings in Kent County annually for three years (beginning in January 2016)	At least 4 workplaces offering program	☺ ✓ 11 workplaces offering program

[Data Source: MHFWM]

The *be nice* program has been expanded into 11 worksites in Kent County in the first part of 2016. This program is a positive anti-bullying initiative designed to spread awareness surrounding the issues of bullying and the importance of treating people with civility community-wide. The Workgroup would like to offer the *be nice.* program at the Health Department in 2017.

Objective	Target	Status
Coordinate social marketing messages among Kent County organizations to increase awareness and knowledge of mental health issues by at least 5% among Kent County residents by December 2017	At least 5% increase in awareness and knowledge	☹ In progress

[Data Source: Kent County Health Department]

Over the past five years, the Healthy Kent Suicide Prevention Coalition has funded an awareness campaign “*Suicide is not an Option, Just Ask Mom, Friends, Siblings, Dad.*” It promotes the Lifeline phone number and features suicide survivors asking people to seek help. The images have been put on billboards and bus signs. This campaign has been created and continued through the efforts of the survivors of suicide. Moving forward the group would like to consider broaching the topic of asking the question, “*Are you thinking about killing yourself?*” and knowing when to ask it.

Actual progress on collecting pre- and post-data pertaining to message recognition, awareness, and knowledge on mental health issues has not yet been recorded.

The Workgroup drafted a question to include in the 2017 Community Health Needs Assessment Community Survey to help set a benchmark for this objective. It will ask, “Do you or a family member have a mental health disorder such as sadness, worry anxiety depression thoughts of suicide?”

The Workgroup is aiming to find funding to support a social marketing campaign on mental health awareness and stigma reduction.

**Goal 2**

Improve patient navigation and referral services for persons with mental health needs in Kent County.

Objective	Target	Status
Establish a primary data source for capturing information about client barriers and concerns associated with mental health service navigation and referrals in Kent County by March 2016	Data source established.	☹ In progress

[Data Source: Kent County Health Department]

The Workgroup decided to have a question added to the 2017 Community Health Needs Assessment Community Survey rather than develop their own survey. This is a multiple-choice question to identify barriers that could be addressed by the Navigation Tool: “Have you ever faced barriers that have kept you from seeking mental health services? Yes or No. If yes, check all that apply: Didn’t know who to call; Felt embarrassed or shame; I can’t afford to pay for services; Difficulty accessing the systems; Services are not provided in my language; Missed appointments due to lack of transportation; Missed appointments due to lack of childcare; Fear; Unable to leave work; Inconvenient location of services; Cultural beliefs around mental health; Other \_\_\_\_\_.

Objective	Target	Status
Clients and mental health service agencies will have access to a tool to assist with client navigation of the mental healthcare system in Kent County by December 2016	Navigation tool in use.	☹ In progress*

[Data Source: HK Mental Health Workgroup]

The Mental Health Navigation Tool website development was selected as a GVSU Computer Science Capstone Project. Members of the Workgroup have volunteered to work with the students. The Workgroup aims to have a navigation tool to place on the Mental Health Foundation website.

\*The workgroup identified this objective as needing revision.

Objective	Target	Status
Clients and mental health service agencies will have access to a web-based tool or “app” that assists with mental healthcare system navigation by December 2017	“App” developed and in use.	☹ In progress

[Data Source: HK Mental Health Workgroup]

Objective	Target	Status
At least 50% of healthcare service providers in Kent County will report having used the navigation tool at least "sometimes" within practice by December 2018	Navigation tool in use	 No progress

[Data Source: Kent County Health Department]

Objective	Target	Status
At least 75% of people surveyed will be aware that a mental health service navigation tool exists by December 2018	Navigation tool in use	 No progress

[Data Source: Kent County Health Department]

## Substance Use Disorder (SUD) Workgroup

**Goal 1** Prevent, delay, and reduce harmful substance use behaviors in Kent County.

Objective	Target	Status
Reduce use of tobacco products in past 30 days by high school youth from 12% to 11% by September 2018	11% (MiPHY, 2013-2014)	☺ ✓ 5.8% (MiPHY, 2015-2016)

[Data Source: HK SUD Workgroup, MiPHY]

Based on updated MiPHY data, this objective for reducing youth tobacco use has been met and exceeded. With the exception of Tobacco 21, the strategies listed to address this objective are ongoing programs delivered by Kent County prevention providers. A representative of Mercy Health has stepped forward to take the lead on the Tobacco 21 initiative.

One of the streamlining efforts associated with this strategy includes a formalized data sharing program that would include information from all existing strategies. To date, the Prevention Subcommittee of the SUD Workgroup has verbally agreed to develop a data reporting system, but no work toward establishing the system has been initiated.

Objective	Target	Status
Reduce adult e-cigarette use from 10.1% to 9.5% by September 2017	9.5% (BRFSS, 2014)	No updated data available

[Data Source: HK SUD Workgroup, BRFSS]

Currently, updated data on the status of this objective is unavailable as the BRFSS has not been conducted since 2014. Many of the strategies proposed for addressing e-cigarette use among adults in Kent County are ongoing efforts by numerous organizations. Research and planning surrounding the proposed social norm campaign has not yet begun since focus has been placed upon other areas of the CHIP.

Objective	Target	Status
Increase the percentage of high school youth who report that smoking marijuana once or twice per week is a moderate or great risk from 51.2% to 53% by September 2018	53% (MiPHY, 2013-2014)	☹ 47.8% (MiPHY, 2015-2016)

[Data Source: HK SUD Workgroup, MiPHY]

Per the 2015-2016 MiPHY data, this objective is moving in the wrong direction. Fewer students (47.8%) report that smoking marijuana once or twice a week is a moderate or great risk. This trend will be difficult to reverse as marijuana use is normalized through television and pop culture and

more states legalize recreational use. Many of the strategies being implemented to address this issue are ongoing efforts by Kent County prevention providers.

Objective	Target	Status
Reduce past-year non-medical use of pain relievers by 18-25 year olds from 11.9% to 11% by September 2017	11% (BRFSS, 2014)	No updated data available

[Data Source: HK SUD Workgroup, BRFSS]

There has not yet been any work to implement the strategies associated with this objective. Major efforts on other pieces of the overall CHIP have required coordination and this work has been tabled for now. If funding were available to get someone to lead this effort, it would be easier to devote time to it.

Objective	Target	Status
Reduce the proportion of persons aged 18-24 years engaging in binge drinking during the past 30 days from 28.8% to 25.8% by September 2017	25.8% (BRFSS, 2014)	No updated data available

[Data Source: HK SUD Workgroup, BRFSS]

Updated data to indicate progress on this objective is not yet available because the BRFSS has not been completed since 2014. The education programs being employed as strategies for this objective are ongoing projects implemented by prevention providers in Kent County. Kent County Health Department received grant funding from the Lakeshore Regional Entity (LRE) to continue the Rethink Drinks public awareness campaign through September 30, 2017. In addition to an outfield fence sign at Fifth Third Ballpark, the Rethink Drinks campaign used bus ads, Johnny ads, and digital ads to promote its message in Kent County. An online evaluation survey ran for approximately two weeks to collect data regarding the effectiveness of the campaign message.

Objective	Target	Status
Reduce the proportion of persons aged 25-34 years engaging in binge drinking during the past 30 days from 29.3% to 26.3% by September 2017	26.3% (BRFSS, 2014)	No updated data available

[Data Source: HK SUD Workgroup, BRFSS]

Updated data to indicate progress on this objective is not yet available because the BRFSS has not been completed since 2014. Kent County Health Department received grant funding from the Lakeshore Regional Entity (LRE) to continue the Rethink Drinks public awareness campaign through September 30, 2017.

Objective	Target	Status
Reduce use of alcohol in the past 30 days by high school youth from 21.1% to 19% by September 2018	19% (MiPHY, 2013-2014)	☺ ✓ 17% (MiPHY, 2015-2016)

[Data Source: HK SUD Workgroup, MiPHY]

Based on updated MiPHY data, the past 30-day use of alcohol among youth in Kent County has declined from 21.1% to 17%, which exceeds the target set by the SUD Workgroup. The strategies being implemented for this objective are ongoing programs delivered by Kent County prevention providers.

**Goal 2** Decrease barriers to accessing treatment services provided in Kent County.

Objective	Target	Status
Assess how easily a client can access substance use disorder services in Kent County	Assessment completed	☹ No progress

[Data Source: HK SUD Workgroup]

Work has not yet begun on developing a new survey or targeted questions to include on an existing survey to assess the ease of accessing substance use disorder services in Kent County. It may be difficult to do a thorough assessment to determine how easily a client can access substance use disorder services in Kent County. Some discussion has taken place on narrowing the population to just Medicaid clients and Network180 could help acquire that data. Lack of time and leadership for this objective has stalled efforts.

Objective	Target	Status
Clients and substance use disorder service agencies will have a tool to assist with client navigation of the substance use disorder treatment system in Kent County	Navigation tool established	☺ Achieved

[Data Source: HK SUD Workgroup]

Using funding from the Michigan Department of Health and Human Services and the Lakeshore Regional Entity, a website navigation tool was completed. This site assists family members, friends, and treatment providers in finding substance use disorder treatment and recovery support services for those in need and referring them to those services.

The completion and launch of the website was a major success for the SUD CHIP workgroup. The launch received media coverage from WOOD TV 8. In conjunction with the website, a stigma reduction campaign was created and materials were distributed throughout the community. These materials contained the website address as another way to introduce people to the site.

Objective	Target	Status
Clients will have access to information about existing substance use disorder treatment options in Kent County	Database or directory established	 No progress

[Data Source: HK SUD Workgroup]

Discussion has taken place within the workgroup regarding how this objective sounds similar to the objective to develop a navigation tool. It has been proposed to delete this objective.

Objective	Target	Status
At least 30% of people surveyed will be aware of substance use disorder treatment options in Kent County	30% or more	 No progress

[Data Source: HK SUD Workgroup]

Currently the group has no indication whether Kent County residents are aware of what substance use disorder treatment options are available for those in need. The workgroup would like to write a question to include on the next CHNA scheduled to be conducted later this year.

Objective	Target	Status
Assess racial demographic information of people using substance use disorder treatment facilities	Method for collecting and assessing demographic data implemented	 No progress

[Data Source: HK SUD Workgroup]

It may be difficult to do a thorough assessment of the racial demographic information of people using substance use disorder treatment facilities. The workgroup has talked about narrowing the facilities assessed to those accepting Medicaid clients. Network180 could help obtain those data.

Objective	Target	Status
Assess racial disparities among clients across substance use disorder treatment facilities in Kent County	Method for collecting and assessing racial disparities implemented	 No progress

[Data Source: HK SUD Workgroup]

Objective	Target	Status
Collect racial/demographic information of people charged with substance use related offenses occurring in Kent County	Method for collecting and assessing data for substance use related offenses implemented	 No progress

[Data Source: HK SUD Workgroup]

Objective	Target	Status
Assess racial disparities among people charged with substance use offenses occurring in Kent County	Method for collecting and assessing racial disparities in criminal charges for substance use	 No progress

[Data Source: HK SUD Workgroup]

Objective	Target	Status
Discover the procedures used in the Kent County judicial system related to screening, monitoring, and referral for substance use disorder treatment services	Procedures identified and understood	 No progress

[Data Source: HK SUD Workgroup]

Objective	Target	Status
Discover the procedures used by physicians and medical practitioners related to substance use disorder screening, monitoring, and referrals in Kent County	Procedures identified and understood	 No progress

[Data Source: HK SUD Workgroup]

<b>Goal 3</b>	Expand treatment methods for trauma to more providers of substance use disorder treatment in Kent County.
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Objective	Target	Status
Screen at-risk individuals for both substance use disorders and trauma in an effort to appropriately treat each condition and prevent them from perpetuating each other	ACE and UNCOPE implemented at 3 clinics and 3 colleges	 Achieved

[Data Source: HK SUD Workgroup]

Service providers at Health Intervention Services, Oasis of Hope, and Catherine’s Care Center saw the value of using the ACE and UNCOPE screening tools at their facilities and include them in their appointment processes.

Despite Workgroup efforts to have the ACE and UNCOPE screening tools used in university health and counseling centers, there is currently no interest among the colleges and universities to take action. Workgroup members are currently reassessing this objective to determine whether it should be revised and to focus on approaching local high schools regarding use of the tool.

Objective	Target	Status
Establish a data source to offer information on who treats trauma in conjunction with substance use disorders in Kent County	Method for collecting data established	 No progress

[Data Source: HK SUD Workgroup]

An idea has been suggested to include information on the [www.mirecovery.info](http://www.mirecovery.info) website on which agencies in Kent County treat trauma in conjunction with substance use disorders. A survey would have to be administered first to gather the data to put on the website, which would take staff time and funding that isn't available at this time. However, if more funding from the Michigan Department of Health and Human Services and the Lakeshore Regional Entity was received, this could be written into the plan to expand the website.

Objective	Target	Status
Establish a data source to track the usage of the ACEs tool by substance use disorder treatment facilities in Kent County	Method for collecting data established	 No progress

[Data Source: HK SUD Workgroup]

<b>Goal 4</b>	Empower the people of Kent County to make healthier choices in their stage of recovery.
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Objective	Target	Status
Provide at least 2 naloxone overdose prevention rescue trainings to family, friends, and community members in Kent County annually	At least 2 naloxone overdose prevention trainings offered per year	 Achieved

[Data Source: Grand Rapids Red Project]

The Grand Rapids Red Project is present in five different neighborhoods, six days a week training individuals, family members, and friends on how to recognize an overdose and providing them with a naloxone overdose prevention kit.

On December 14, 2016, the Kent County Health Department and The Grand Rapids Red Project collaborated to hold the first naloxone training at the Health Department. Ten people participated. A second training will be held in early March 2017.

Objective	Target	Status
Provide at least one naloxone overdose prevention rescue training to law enforcement officers in Kent County	At least one training provided	 Achieved

[Data Source: Grand Rapids Red Project]

The Grand Rapids Red Project conducted naloxone overdose prevention rescue trainings for the Grand Rapids Police Department in 2016. Several local law enforcement agencies have reported “saves” in the second half of 2016 because of the naloxone kit officers have in their patrol vehicles.

Objective	Target	Status
Expand the Good Samaritan Law to protect anyone requesting medical aid for a person overdosing on opioids from criminal prosecution	# of policy makers educated on law	☺ Achieved

[Data Source: HK SUD Workgroup]

Michigan’s Good Samaritan exemption has been extended to all ages when seeking medical attention for a drug overdose. House Bills 5649 and 5650 are now Public Acts 307-308 of 2016. This expands a 2015 law signed by Governor Rick Snyder exempting individuals under age 21 from prosecution from drug-related charges when seeking medical aid for themselves or someone else.

Objective	Target	Status
Increase the number of physicians who are co-prescribing naloxone with opioids by providing at least one education in-service targeting physicians in Kent County	Baseline assessment of providers completed; at least one in-service provided	☹ No progress

[Data Source: Kent County Health Department]

The Grand Rapids Red Project has been awarded a grant from the Steelcase Foundation to educate medical providers in Kent County on the benefits of co-prescribing naloxone rescue kits and provide technical assistance on integration.

Objective	Target	Status
Establish a data source for collecting information about Kent County residents’ awareness of the harms related to substance use disorder	Method for collecting data established	☺ In progress

[Data Source: Kent County Health Department]

The SUD CHIP workgroup is very interested in placing a question on the next Community Health Needs Assessment that would ask about Kent County residents’ awareness of the harms related to substance use disorder.

Objective	Target	Status
Measure awareness and knowledge of the stigma associated with substance use disorders among Kent County residents	Method for collecting data established	☹ In progress

[Data Source: Kent County Health Department]

A stigma-reduction campaign was created through the support of the OROSC grant awarded to the workgroup earlier this year. The campaign launched concurrently with the navigation website, which received media coverage from WOOD TV 8. The campaign has a dual purpose – to promote availability of a navigation website and to reduce stigma and barriers associated with substance use disorders. Workgroup members recognize the utilization of the navigation website is largely dependent on breaking down stigma.

As funding for this project came sooner than expected, the Workgroup did not have sufficient time to gather pre-launch awareness and knowledge data pertaining to stigma associated with substance use disorders. The Workgroup has successfully forged relationships with a local advertising agency, KantorWassink, and a local videographer, Jonathan Bell, to assist with the creation of campaign materials. The cost of some of these services will be donated to the cause by both KantorWassink and Mr. Bell. Grant funding ended on September 30, 2016.

Objective	Target	Status
Establish a data source to track locations where IV drug users can access clean syringes in Kent County	Method for collecting data established	☹ No progress

[Data Source: Kent County Health Department]

Objective	Target	Status
Establish a primary data source for overdose occurrences from opioids in Kent County	Method for collecting data established	☹ No progress

[Data Source: Kent County Health Department]

## Healthy Eating & Active Living (HEAL) Workgroup

### Goal 1

Increase the proportion of Kent County residents who are at a healthy weight (as defined by having a BMI between 18.5 and 24.9).

Objective	Target	Status		
Increase the proportion of Kent County residents who meet federal physical activity guidelines by at least 5% by December 2018	Adults: 84.4% (BRFSS, 2014)	Adults	HS	MS
	High Schoolers: 57.9% Middle Schoolers: 66.2% (MiPHY, 2013-2014)	No updated data available	☹️ 52.0%	☹️ 58.6%

[Data Sources: HS & MS Physical Activity data, 2015-2016 MiPHY]

The HEAL Workgroup has made consistent strides in data collection, BMI research protocol and process, positive health messaging, and distribution of a healthy living 2017 health calendar to residents and community in the HOPE zone regions.

The HEAL workgroup continues to promote healthy messaging (fruits and vegetable consumption, reduction of sugary drinks – increasing water), as well as physical activity through Walk This Way messages. WalkBikeGR.info and GRWalks is being promoted with printed cards distributed to a variety of sectors. The Vital Streets plan has also been adopted by the City of Grand Rapids, and it will include and promote non-motorized transportation as well as increased promotion of walk/bike opportunities and safety messaging.

The workgroup continues to make progress with childhood BMI data collection. Through the fall and winter, a research protocol and the IRB application were developed, and currently the implementation process is being developed for measurement of youth in grades 6-8 within Kent County. The workgroup developed a survey to be asked at BMI project implementation schools to identify indicators of healthy school environments based on the School Health Index assessment. The workgroup developed a request for a query on the BMI status of Spectrum Health, affiliated offices, and Helen DeVos Children’s Hospital. Data are currently being received from these groups and there should be an accessible database soon to develop baseline numbers on BMI. Once data are aggregated from the implementation schools and the database, results will be shared with GRPS with the goal of gaining acceptance of BMI data collection with GRPS students.

Objective	Target	Status		
Increase the proportion of Kent County residents who consume the recommended number of servings of fruits and vegetables by at least 5% by December 2018	Adults: 27.0% (BRFSS, 2008)	Adults	HS	MS
	High Schoolers: 26.9% Middle Schoolers: 33.6% (MiPHY, 2013-2014)	No updated data available	☹️ 26.0%	☺️ ✓ 34.6%

[Data Sources: HS & MS Fruit and Vegetable Consumption data, 2015-2016 MiPHY]

Measuring the direct impact of strategies on the CHIP objectives associated with healthy eating and active living (HEAL) is a bit challenging because they are longer-term and the data to measure actual progress lag by a couple of years. However, significant progress toward achieving process

goals associated with the key strategy – a healthy living campaign – have been recorded in the past six months.

Through the work of the HEAL Workgroup, partners have recognized there is a data gap for current statistics regarding fruit and vegetable consumption among adults. Questions used to collect this information were eliminated from the local and state-level versions of the Behavioral Risk Factor Surveillance Survey (BRFSS) for the past several iterations. HEAL Workgroup partners are working to secure funding support for ensuring that these questions are a priority addition to the 2017 BRFSS.

**Goal 2** Reduce the proportion of Kent County residents experiencing food insecurity.

Objective	Target	Status
Decrease the proportion of Kent County residents who live in a food insecure household by at least 5% by December 2018	12.6% (76,547 adults)	 In progress

Objective	Target	Status
Decrease the proportion of Kent County children who live in a food insecure household by at least 5% by December 2018	17.3% (27,280 children)	 In progress

At this time, updated data for the two objectives associated with this goal are unavailable. The HEAL Workgroup again has identified insufficient data for addressing food insecurity in Kent County. As a result, partners have worked to identify a standardized strategy for measuring food insecurity in Kent County. This strategy has involved the development, vetting, and adoption of a set of five core food insecurity questions that will be used universally across all groups in Kent County that are working to assess and address food insecurity. The workgroup has successfully secured funding for this project through the Essential Needs Task Force Food and Nutrition Coalition and will be working with Calvin College’s Center for Social Research to get the project underway. All partners of the HEAL Workgroup have signed-on to support this project and to utilize the questions in their data collection efforts.

The core food insecurity questions were vetted through an IRB process at Mary Free Bed Rehabilitation Hospital and were approved as an addition to existing patient intake questionnaires. The questions were also added to the 2016 VoiceGR survey conducted by the Community Research Institute at the Johnson Center for Philanthropy.

## Adverse Childhood Experiences (ACEs) Workgroup

### Goal 1

Increase community awareness about the long-term impacts of adverse childhood events on health and wellbeing later in life.

Objective	Target	Status
Train at least 100 individuals in ACE concepts by October 2016	100 individuals (by 10/2016)	 ✓ 116 individuals

The target set for the CHIP objective to train 100 individuals on ACE concepts was exceeded in the first six months of plan implementation. Family Futures developed a training PowerPoint presentation that has been used to train CHIP ACE Workgroup members, Kent County Health Department WIC and Clinical Services providers, and to 45 parents and MSU medical residents who attended a Great Start Collaborative meeting in mid-May. Workgroup members are currently modifying ACE training presentations for six target audiences for implementation in 2017.

Workgroup member Head Start has adopted a policy to provide ACE training to all current staff and new hires.

The workgroup provided 200 American Academy of Pediatrics Resilience Project posters for client/patient waiting rooms at MSU Medical Clinic, Family Futures, and Head Start.

ACE Workgroup co-lead Dr. Nirali Bora MD implemented an ACE educational session with the MSU family medicine and pediatric residents in October. She had residents assess their own ACE scores using the standard ACE assessment tool, watch a Ted Talk about ACEs by Dr. Nadine Burke and introduced the ACEs patient screening pilot program.

Objective	Target	Status
Engage YLAV to develop campaigns and educational activities that increase community awareness and knowledge of the harmful effects of violence on youth	500 posters and resource materials distributed; 400 newsletters, infographics, editorials, and articles published; 20 social media messages, blogs, videos, and photos monthly (by 12/2018)	 300 posters and bracelets and 40 social media posts have been made. Five youth events were held between February and April

YLAV is a local youth-led coalition focused on increasing awareness and preventing relationship and sexual violence. YLAV provides high school and college age teens and young adults with the opportunity to be a leader and energize their community to take a stand against violence. YLAV accepts students from freshman in high school to freshman in college.

YLAV delivered training sessions to community leaders and professionals to increase proficiency in primary prevention of violence. YLAV provided two trainings on the impact of relationship and sexual violence on teens to the Kent County Commissioners and to professionals attending the Domestic Violence Community Coordinated Response Team Noontime Educational Forum.

**Goal 2**

Support the network of coalitions in Kent County working toward universal awareness and prevention of the crisis of children exposed to violence.

Objective	Target	Status
Complete environmental scan and gap analysis of coalitions in Kent County working on ACE initiatives by October 2016	Completed environmental scan (by 5/2016)	☺ An assessment/scan has been developed and is in the process of implementation

The CHIP ACE Workgroup developed two separate surveys that capture awareness of ACE research among professionals and their use of ACE-related strategies in their work. The ACE Primary Care Community Education Survey was distributed to more than 300 medical professionals. To date, there have been 99 completed surveys. The ACE Needs Assessment Survey for General Professionals was distributed to 918 recipients in February.

Dr. Borali is working with her clinic to pilot an ACE screening tool for parents regarding their child's exposure to ACE risk factors at their well child checks. Parents will be asked if they are interested in a referral for counseling or other community resource when indicated by screening.

The long-term goal of the workgroup is to work to align CHIP efforts with those of the greater community by coordinating efforts with the numerous agencies working on ACEs prevention, crisis intervention and treatment. A new trauma-related work group has developed from discussions on this issue among Department of Health Human Services social services/child welfare staff. CHIP members will participate in one or more of the committees.

**Goal 3**

Establish a resource and referral system for ACE prevention, intervention, and crisis management.

Objective	Target	Status
Develop and disseminate an ACE resource and referral guide to local organizations serving children and families by October 2017	1,000 ACE resource and referral guides distributed (by 10/2017)	☹ ACE resource guide has not yet been developed

In the short-term, the ACE Workgroup updated an existing resource guide in Kent County – the Family Resource Guide – which hadn't been updated since 2009. There was poor response to the request of local agencies (from the Family Resource Guide) for information to the Trauma Resource Guide. This project has been put on hold until there is time to compile a list of agencies from the Family Resource Guide that also provide trauma-informed/ACE-related services.

The intermediate goal for the workgroup is to distribute the Trauma Resource Guide, ACEs trainings, assessment tools and treatment services listed by child/youth-serving sectors to primary care providers and youth service providers.

## Health in All Policies Update

### Goal 1

Increase community awareness of Health in All Policies among community partners in Kent County.

Objective	Target	Status
By December 31, 2017 increase the number of community partners that participate in a HiAP learning opportunity from zero to 10	At least 10 partners by 2017	 In progress

Strategies for this objective will include: 1) Develop a HiAP campaign which includes educational learning opportunities (HiAP 101), evaluation plan, HiAP marketing and promotion materials, continuing education credits and a plan for organizational or institutional adoption; 2) Develop a framework for incorporating HiAP into work plans, programs and services; and 3) Develop assessment and framework.

Health Equity/Social Justice (HESJ) staff are reaching out to other counties that are part of Michigan Power to Thrive to discuss and share ideas on HiAP.

HESJ staff and interns continue to educate themselves on HiAP approaches and have open discussions with partners on how our community can embrace a HiAP approach. These discussions are key to the overall understanding of HiAP as well as community readiness. HESJ staff continue to add HiAP to the Kent County Power to Thrive agenda.

KCHD met with WebTecs to discuss a HiAP logo to be used with all promotional and awareness materials. This along with the pending toolkit will help launch the awareness campaign. The team also met to discuss revising the objective and strategies.

Karyn is in communication with staff from MPHI and Washtenaw County about partnering on a Health Impact Assessment. The team is also considering future training for KCHD staff on Health Impact Assessments. It is believed this will strengthen the connection between HiAP and environmental change/policy for staff and partners.