

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

HEALTHY MICHIGAN FUND REPORT



For The Period
October 1, 2004 to September 30, 2005

Healthy Michigan Funds are used to support behavioral and public health activities at the community level. Activities and accomplishments are evidence of positive steps being taken to reduce preventable death and disability in Michigan residents. These local activities have a direct impact on many of the 25 Michigan Critical Health Indicators.

This portion of the Healthy Michigan Fund Report presents highlights of FY 2005 accomplishments for all the Healthy Michigan Fund projects, their indicators of success, along with future goals for FY 2006.

Healthy Michigan Fund – FY 2005 Report

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Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11384
Alzheimer's Information Network

FY 05 Funds Appropriated
\$400,000

FY 06 Funds Appropriated
\$290,000

Project Name: Alzheimer's Information Network

Target Population: 240,000 persons in Michigan with dementia, 240,000 family care partners, and tens of thousands of health and human services professionals serving them

Project Description: An estimated 240,000 residents have dementia due to Alzheimer's disease and related disorders. Preventable complications of dementia and excess disability lead to increased cost of care and increased demand for long-term care. Alzheimer's disease is the third most expensive disease in the country after heart disease and cancer. The Dementia Programs support the Michigan Dementia Coalition, which brings the expertise and resources of multiple agencies to bear on priority dementia issues. Through the Michigan Dementia Coalition, Michigan has a network of primary care physicians who serve as leaders in disseminating dementia best-care practices in the medical community. The Dementia Program also funds a network of community dementia agencies (Alzheimer's, Huntington's and Parkinson's) to provide information, education and support to caregivers. Statewide toll-free help lines, support groups, and education programs are critical services for families overwhelmed by the demands of care giving for persons with dementia.

Project Accomplishments for FY 2005:

- Caregivers and others made 14,000 calls to dementia help lines for information and assistance.
- 1,100 families or individuals participated in Care Consultation services.
- 24,000 family caregivers and professionals participated in 1,100 dementia educational presentations, programs and workshops.
- More than 2,200 support group meetings provided information, education, and support to participants with an average of 9 participants in each meeting.
- A dementia awareness campaign with 17 billboards, 12 monthly press releases, TV and radio PSAs, and a dedicated website will launch in January 2006 to increase awareness of the early warning signs of dementia, the importance of early assessment, and where to go for help.
- The Michigan Primary Care Dementia Network with 80 members has developed and piloted dementia care quality indicators.

Project Goals for FY 2006:

- 80% of help line callers who receive a referral will report that the information was helpful.
- 80% of family caregiver participants in dementia education will increase their ability to be an effective caregiver.
- 80% of support group participants will increase their ability to help the person with memory loss.
- 75% of families or individuals who participate in Care Consultation will complete some or all of the steps discussed in care planning.

Alzheimer's Information Network Services*, FY2005		
	Number Completed	Number of Persons Served**
Consumer		
Help line calls	14,019	N/A
Presentations	906	19,786
Support Group meetings	2,224	1,703
Newsletters	N/A	138,343
Professional		
Presentations	192	4,080
Newsletters	N/A	28,044
Other Services		
Exhibits	255	2,018 hours
Media (radio/television)	246	N/A

Source: Alzheimer's Information Network Report.

*Network agencies funded by this Project receive funding from various sources along with HM Funds that contribute to these accomplishments.

**Participants may be counted more than once if they participated in more than one presentation

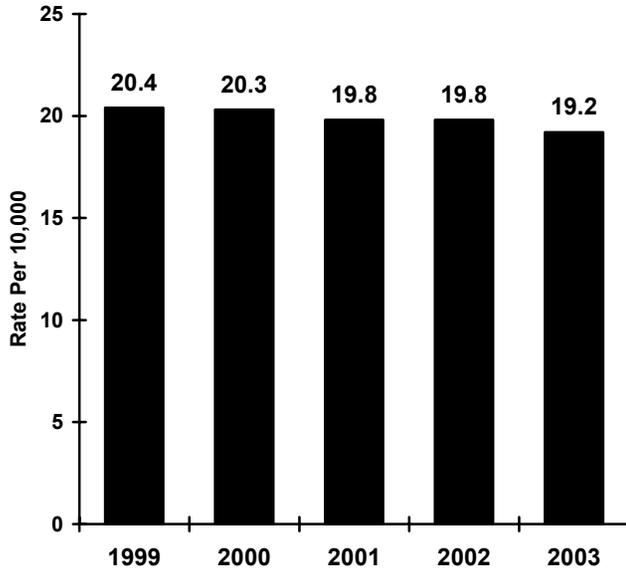
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11352
Cancer Prevention and Control

FY 05 Funds Appropriated
\$3,155,600

FY 06 Funds Appropriated
\$2,571,200

Michigan Age-Adjusted Invasive Cancer Mortality Rates* per 10,000 Population, 1999 - 2003



Source: DVRHS, MDCH.

*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

Project Name: Cancer Prevention and Control

Target Population: Adult residents of Michigan

Project Description: To reduce cancer mortality and morbidity in Michigan residents. Three programs receive federal grant funds plus state Healthy Michigan funds to accomplish this goal: 1) Michigan’s Breast and Cervical Cancer Control Program (BCCCP) provides access to breast and cervical cancer screening and follow-up services. If diagnosed with breast or cervical cancer through the BCCCP, women then qualify for treatment through Medicaid. 2) The WISEWOMAN (WW) Program provides healthy lifestyle interventions to reduce risk of cardiovascular disease and cancer for women enrolled in BCCCP. 3) Michigan’s Comprehensive Cancer Control Program is coordinated by MDCH and implemented by the Michigan Cancer Consortium (MCC), a statewide network of 80 public and private organizations, committed to reducing mortality from cancers with the greatest cost and disease burdens for MI citizens.

Project Accomplishments for FY 2005:

- BCCCP’s assigned caseload was surpassed with 26,498 women age 40 to 64 receiving services; nearly 13,000 women ages 40 to 49 received screening mammograms funded by HMF.
- 3,960 BCCCP-enrolled women received WW Program healthy lifestyle interventions.
- Women enrolled in BCCCP receive high quality screening/diagnostic services as ensured by MPRO’s CQI monitoring. BCCCP exceeded national standards for promptness in obtaining diagnostic services for women with abnormal screening exams and timeliness of starting cancer treatment.
- 3 communities with higher than average colorectal cancer mortality rates built capacity to conduct pilot colorectal cancer early detection programs in FY06 for uninsured individuals, ages 50 and older.
- The Primary Care Initiative for a Healthier Michigan, engaging nearly 100 MI organizations and key stakeholders completed an ambitious strategic plan to resolve system barriers that impede clinicians from routinely providing evidence-based prevention and chronic disease care to patients.

Project Goals for FY 2006:

- Provide screening mammograms to 11,000 low-income women ages 40 to 49 enrolled in the BCCCP.
- Screen and provide healthy lifestyle interventions for 4000 low-income women through the WISEWOMAN Program to reduce risks associated with hypertension, smoking, and high cholesterol.
- Provide colorectal cancer screening/diagnostic services to 400 uninsured MI men & women, through implementation of the pilot Colorectal Cancer Early Detection Program in high mortality counties.
- Implement priority strategies from the Primary Care Initiative’s Strategic Plan, including strategies related to electronic medical records which enhance and support the MI Health Information Network.

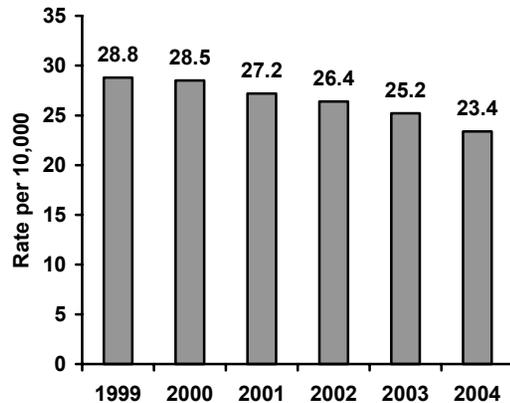
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11380
Chronic Disease Prevention

FY 05 Funds Appropriated
\$2,598,200

FY 06 Funds Appropriated
\$1,698,200

**Michigan Age-Adjusted Population,
Heart Disease Mortality Rate
1999-2004**



Source: DVRHS, MDCH.

*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

Project Name: Cardiovascular Health

Target Population: Michigan citizens with a special emphasis on high-risk populations

Project Description: To improve management of risk factors related to heart disease/stroke, decreasing morbidity, premature mortality and healthcare costs. Funds are distributed through a competitive process.

Project Accomplishments for FY 2005:

- MI Stroke Initiative: A quality improvement program to improve response time and treatment for stroke, implemented in 14 hospitals statewide showed significant improvement in performance measures, resulting in 2,300 lives saved in FY 2005.
- MI Hypertension Control Project: Over 5,000 people discussed health risks with their physician.
- Childhood Obesity Prevention Project: Grants and technical assistance provided to schools to conduct an assessment process and implement changes to improve healthy eating and increase physical activity, impacting over 30,000 students.
- Healthy Communities Initiative: Grants and technical assistance provided to 35 communities to implement changes to support healthy eating and increased physical activity. Consumption of fruits and vegetables doubled and physical activity levels improved from 18% to 40%.
- Healthy Aging Initiative: Partnerships with Office of Services to the Aging & MSU Business College.

Project Goals for FY 2006:

- Reduce risk for childhood obesity and other cardiovascular disease risk factors by improving healthy eating options and physical activity level in MI schools reaching 300,000 students and their families.
- Partner with MI Quality Improvement Consortium and BCBS to develop consensus guidelines on the treatment of childhood obesity, along with tools and resources to assist primary care physicians.
- Work with different types of MI primary care practices to improve health outcomes of at least 2,400 people at high risk for cardiovascular disease by implementing a new evidence-based model of care.
- Continue to work with 13 hospitals to track stroke outcomes and improve response time & treatment for stroke, increasing chances of recovery, avoiding long term disability & reducing health care costs.
- Improve management of hypertension by collaborating with healthcare providers and managed care plans to implement new national clinical guidelines which will lead to improved blood pressure treatment and will continue to impact 20,000 people.
- Evidence based strategies to reduce risk factors for heart attack and stroke will be implemented at 8 churches, 27 community coalitions, 20 worksites and 11 counties, reaching over 1.2 million residents.
- Help high risk populations prevent and manage cardiovascular emergencies reaching 10,000-20,000 African Americans in approximately 100 faith-based and community venues.

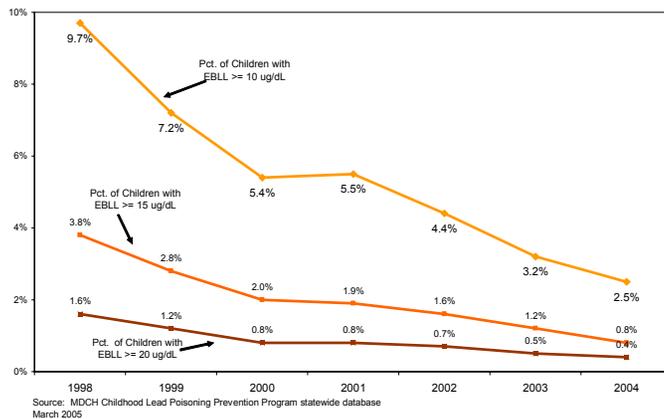
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14254
Childhood Lead Programs

FY 05 Funds Appropriated
\$1,000,000

FY 06 Funds Appropriated
\$1,000,000

Elevated Blood Lead Levels (EBLL) in Michigan
Children under Age Six, 1998 - 2004



Source: MDCH, Childhood Lead Poisoning Prevention Project

Project Name: Childhood Lead Poisoning Prevention

Target Population: Children younger than age 6 & pregnant women. Focus is on the target communities where lead poisoning prevalence is greatest. Those communities are: Battle Creek, Benton Harbor, Flint, Grand Rapids, Hamtramck, Highland Park, Jackson, Kalamazoo, Lansing, Muskegon, Pontiac & Saginaw

Project Description: This project provides guidance and support for implementation of the priority “first steps” identified by the Governor’s Task Force to Eliminate Childhood Lead Poisoning. Elimination by 2010 is a federal and state goal. Distribution based upon community need and capacity to address lead poisoning.

Project Accomplishments for FY 2005:

- Provided local consultation and support to Flint, Highland Park, Hamtramck, Muskegon and Benton Harbor to begin or enhance community coalitions. The goal was to establish local activity and sustainable local funding for lead-related interim controls and/or remediation in child-occupied homes
- Began development of an electronic, voluntary “lead-safe housing” registry for rental properties built prior to 1978, allowing for market-driven consumer choices based upon quality and safety measures.
- Provided staff and logistical support for the State Lead Commission (required by PA 400 and 431).
- Developed the position and hired a remediation ombudsman for consultation to individual families.
- Funded remediation in child-occupied residencies. Abated 22 units at a cost to HMF of \$243,410. In the case of rental property owners, funding was used to leverage MSHDA loans.
- Provided funding to local public health agencies to enable/enhance comprehensive case management for children with severely elevated blood lead levels (greater than or equal to 20).
- Developed and implemented a public awareness media campaign (July 1 – Sept 30) focusing on the target communities, including: PSAs (radio/TV), bus signs, newspaper, poster and postcard messages.

Project Goals for FY 2006:

- Re-tool media campaign and materials to discuss and encourage housing-based primary prevention of lead poisoning to: homeowners, rental property owners, parents and families.
- Continue consultation and local support to community coalitions in Benton Harbor, Muskegon, Flint, Hamtramck and Highland Park. As funding allows, add communities to receive consultation services
- Continue funding local public health agencies to provide comprehensive case management services for children with elevated blood lead levels in Kalamazoo, Battle Creek, Benton Harbor, & Pontiac.
- Finalize and publicly promote the “lead-safe housing” registry, as required by PA 432.
- Continue funding the housing ombudsman for statewide coverage consultation/assistance.
- Fund remediation or interim controls in child-occupied housing units as funding allows.
- Continue funding the Lead Commission activities, as required by PA 400 and PA 431.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11380
Chronic Disease Prevention

FY 05 Funds Appropriated
\$100,000

Project Name: Children’s Arthritis

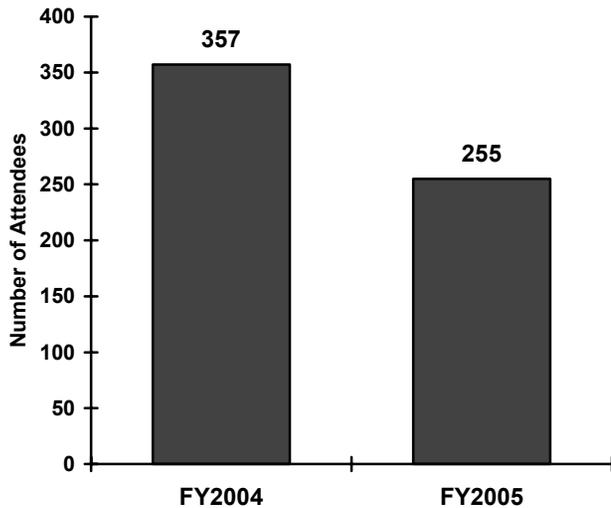
Target Population: 6,000 Michigan children with potentially crippling childhood arthritis

Project Description: This project aims to prevent needless disability in children with arthritic conditions. With prompt, accurate diagnosis and appropriate treatment, irreversible joint damage can be prevented in most children.

Project Accomplishments for FY 2005:

- Distributed 216 “Arthritis Critical Elements of Care” (CEC) document to key specialty groups/clinicians.
- Provided Pediatric Rheumatology Update Grand Rounds: 255 pediatric and family practice physicians participated in Grand Rounds presentations on pediatric rheumatology.
- Identified additional venues: provided a juvenile arthritis update as one grand rounds program utilizing the REMEC Telehealth Network reaching 100 participants statewide.
- Distributed 5,000 total juvenile arthritis action newsletters to families of children with Juvenile Arthritis (JA). JA Knowledge is Power information packets were distributed through pediatric rheumatology clinics and through Arthritis Foundation’s Arthritis Answers helpline.
- Planned and provided the 2005 juvenile arthritis parent seminar that 35 parents attended.
- Enhanced the website of the Arthritis Foundation Michigan Chapter (AFMC): a link to the Critical Elements of Care document was added in two sections of the AFMC website; a direct link to MDCH is also available now on the AFMC JA web page.

**Number of Provider Attendees at a
Pediatric Rheumatology Teleconference,
FY 2004- 2005**



Source: Arthritis Program reports, MDCH.

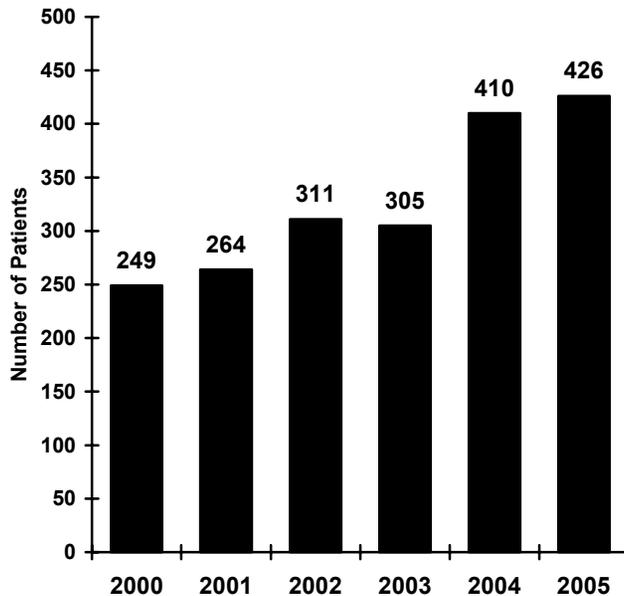
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14274
Dental Programs

FY 05 Funds Appropriated
\$150,000

FY 06 Funds Appropriated
\$150,000

Number of Patients Receiving Comprehensive Dental Care, 2000 - 2005



Source: Oral Health Program, MDCH.

Project Name: Dental Health

Target Population:

- 1) Donated Dental Services: Persons who are mentally or physically handicapped, who are medically compromised or elderly.
- 2) Wayne County Dept. of Health: Pediatric clients of the Wayne County Oral Health Services

Project Description:

- 1) Donated Dental Services: Through a network of volunteer dentists, eligible patients are referred for comprehensive dental care. Two referral coordinators staff the toll-free phone lines, process applications and match patients with volunteer dentists. The legislation appropriates the Healthy Michigan Fund allocation to the Donated Dental Service Program administered through the Michigan Dental Association. Part of the legislative appropriations supported the Wayne County Department of Public Health.
- 2) Wayne County Dept. of Health: Provide dental care under Primary Care Dental Special Project.

Project Accomplishments for FY 2005:

- 1) Donated Dental Services:
 - 426 patients received comprehensive dental care; a 3.7% increase from FY 04.
 - 5,874 dental procedures were provided; a 3.7% increase from FY 04.
 - 807 dentists volunteered; a 5% increase from FY 04.
 - 190 dental laboratories donated \$92,290 in laboratory services; a 1% increase from FY 04
 - Michigan dentists and dental laboratories for dental treatment donated a total of \$1,046,440; a 12.7 % increase from FY 04.
 - Return on Investment: Every \$1 spent = \$7.58 worth of services received
- 2) Wayne County Department of Health:
 - Avg. 106 clients seen monthly; treatment focused on preventive dental services to children

Project Goals for FY 2006:

- Recruit dentists to participate; thus, reducing one-year waiting list to apply for services and a 1-3 year waiting list to get services
- Provide \$1,100,000 worth of donated dental treatment
- Increase number of individuals served to 440
- Provide \$100,000 worth of donated laboratory fabrications
- Increase distribution of volunteer dentists to have 75% of the counties in Michigan participate in the Donated Dental Service Program

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11363
Diabetes and Kidney Program

FY 05 Funds Appropriated
\$2,315,200

FY 06 Funds Appropriated
\$2,315,200

Project Name: Diabetes--Local Agreements

Target Population: Persons at-risk for or with pre-diabetes, diabetes and/or kidney disease

Project Description: Funds are distributed to agencies providing educational, consultation, consumer-based and other services intended to prevent onset of diabetes, reduce mortality/morbidity from diabetes & kidney disease and improve quality of life for persons w/ diabetes and/or kidney disease. Primary recipients of funds are Diabetes Outreach Networks (DONs) & Nat'l Kidney Foundation of MI (NKFM).

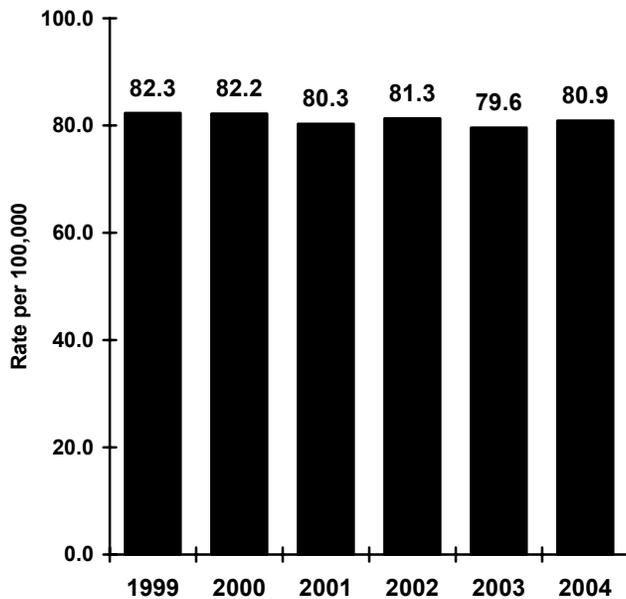
Project Accomplishments for FY 2005:

- A new surveillance tool was successfully implemented that will allow tracking program's impact on diabetes-related health & clinical behaviors (The Diabetes, Osteoporosis & Arthritis Survey); the MI Diabetes Prevention & Control Program (MDPCP) hired Diabetes Epidemiologist to lead program and Diabetes Partner in Action Coalition; Diabetes Optional Module included in 2005 BRFSS survey.
- In 2005, DONs served approximately 3,375 clients statewide. Subsequent follow-up visits for 937 of these 3,375 clients provided comparison data which demonstrated significant improvements in diabetes-related services from initial visit to follow-up. Specifically: 109% increase in foot exams, 79% increase in eye exams, 58% increase in hemoglobin A1c testing, 103% increase in lipid profile testing, 150% increase in pneumococcal immunizations, 84% increase in flu immunizations, 126% increase in self-reported exercise, 204% increase in aspirin therapy, 227% increase in dietician visit, and 38% increase in treatment for hypertension. (Source: DCIP Annual Report FY'05: Diabetes Section, MDCH)
- An NKFM beauty salon initiative, Healthy Hair Starts w/ a Healthy Body, trained more than 700 hair stylists and reached 14,500 African American and Hispanic clients in many of MI's urban centers. Nearly 59% of clients took a positive health behavior step (i.e., eating more nutritiously, increasing physical activity, or stopping smoking), and/or sought physician assistance about their health risks after talking with their stylists. A similar barber shop initiative demonstrated that nearly 69% of participants reported they are trying to take preventative steps. The African American Initiative for Male Health Improvement (AIMHI) screened and monitored 628 participants for chronic disease.
- NKFM implemented an educational program to 120,000 MI students, and certified diabetes self-management education programs increased to 86, with a total of 27,500 persons educated in 2005.

Project Goals for FY 2006:

- Improve quality of diabetes care/management by at least 5% for key diabetes clinical indicators.
- At least 50% of NKFM Healthy Hair/Healthy Body program clients take positive health steps.
- Assess effectiveness of integrating diabetes prevention into WISEWOMAN (WW) project by results of pilot-test that incorporates detection of pre-diabetes and lifestyle interventions to prevent diabetes.
- At least a third of clients in the state-certified diabetes self-management training program reach goal.

**Michigan's Age-Adjusted Diabetes-Related Mortality Rate
1999 - 2004**



Source: Vital Records & Health Data Development Section, MDCH.
*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

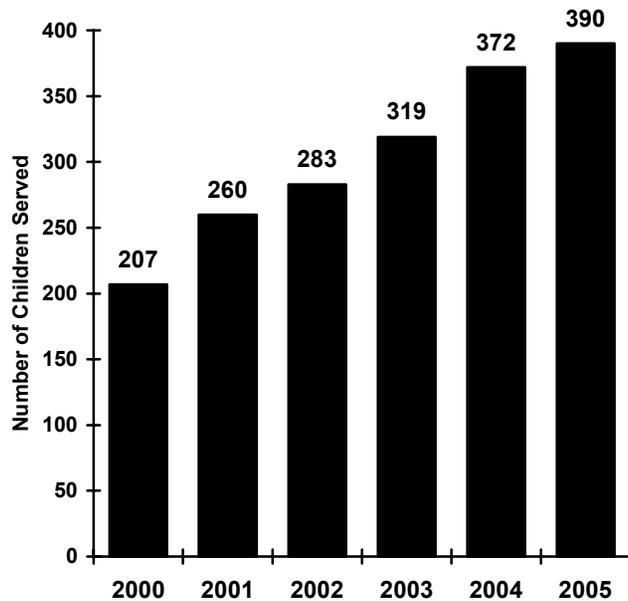
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11393
Morris Hood Wayne State University Diabetes Program

FY 05 Funds Appropriated
\$400,000

FY 06 Funds Appropriated
\$400,000

Number of Children Served in Comprehensive Clinics, 2000-2005



Source: Diabetes Program reports, MDCH.

Project Name: Diabetes—Morris Hood WSU Diabetes Outreach

Target Population: Children and adolescents with type 1 diabetes who live in underserved areas both rural and urban; obese urban minority school children at risk for type 2 diabetes

Project Description: Provide comprehensive care to children who have type 1 diabetes who are either economically disadvantaged or live in geographically remote areas. Screen urban obese minority middle school children for risk of the Metabolic Syndrome X (type 2 diabetes, hypercholesterolemia and hypertension).

Project Accomplishments for FY 2005:

- Outreach clinics were held in Marquette (4); Alpena (4); Jackson (2); Port Huron (2); Traverse City (1) and South Haven (1). A total of 390 children were seen.
- Each child/family received an assessment of health status and compliance; problems are identified, diagnosed and treated by a comprehensive team of specialists (Pediatric Endocrinologist, MD, Certified Diabetes Educator, Registered Dietitian and Social Worker).
- 374 children with various Endocrine disorders were seen in Marquette. Sixteen of 374 had a pre-diabetic condition (Metabolic Syndrome) and are involved in primary prevention program for type 2 diabetes.
- 422 children were screened for risk factors associated with the metabolic syndrome. 257 (61%) were either overweight or at risk of overweight. Of this group: 32% had elevated cholesterol level, 19% had elevated systolic blood pressure, and 27% had elevated diastolic blood pressure.

Project Goals for FY 2006:

- Provide comprehensive care to children who have type 1 diabetes who are either economically disadvantaged or live in geographically remote areas.
- Provide consultation and management to children who live in the Upper Peninsula who have endocrine diseases other than diabetes.
- Continue to screen urban, minority middle school children until we reach our target of 500 children.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 15173
Newborn Screening Follow-Up and Treatment Services

FY 05 Funds Appropriated
\$400,000

FY 06 Funds Appropriated
\$250,000

EHDI Program Select Data Facts 2003-2004		
	2003	2004
Number of Michigan Births	131,381	129,387
% Completed Hearing Screens Reports	89%	94%
Referral rate from completed screens	2.9%	3.5%
% Incomplete or missed hearing screen reports	11%	5%
Average age hearing loss identification	122 days	107 days

Source: MDCH, early Hearing Screening, Detection, and Intervention Program Data Facts Sheet

Project Name: Early Hearing Detection and Intervention (EHDI) Program

Target Population: All infants born in Michigan

Project Description: The project has three goals: 1) All infants will be screened for hearing loss before 1-month of age 2) All infants who do not pass the screening will have a diagnostic evaluation before 3-months of age and 3) All infants identified with a hearing loss receive appropriate early intervention services before 6-months of age. Timely early intervention can prevent many of the detrimental effects of hearing loss. Research demonstrates that intensive early intervention positively supports the language and cognitive development of young infants with disabilities. The EHDI program contributes directly to infants having language and communication experiences that support development. Grant funds have supported EHDI provider program training, literature development, database development, community development, follow-up activities and a family support system.

Project Accomplishments for FY 2005:

- The percentage of Michigan births that received newborn hearing increased from 94% in 2004 to 95% in 2005.
- The percentage of babies who fail hearing screening who receive diagnostic evaluation by 3 months of age increased from 54% in 2004 to 60% in 2005.
- The percentage of babies with documented hearing loss who received early intervention services by 6 months of age cannot be documented for 2005 due to the limited amount of reporting completed at this time. This is a goal for the EHDI program in 2006.

Project Goals for FY 2006:

- The percent of Michigan births that receive newborn hearing screening will increase.
- The percent of babies who fail hearing screening who receive diagnostic evaluation by 3-months of age will increase.
- The percent of babies with documented hearing loss who receive early intervention services by 6-months of age will increase.

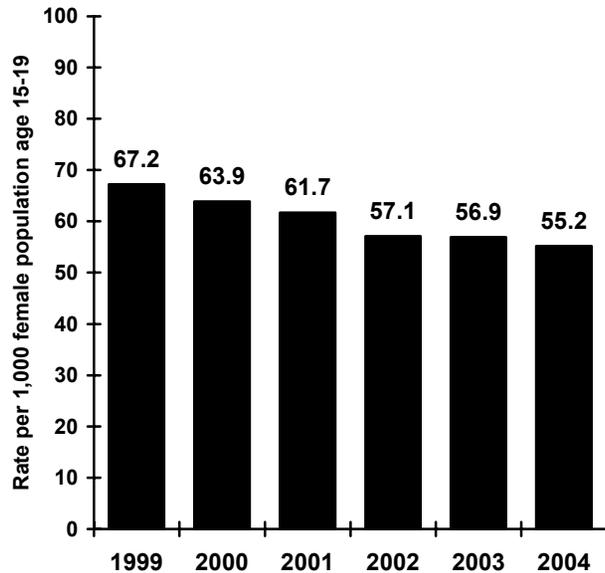
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14281
Family Planning Local Agreements

FY 05 Funds Appropriated
\$658,100

FY 06 Funds Appropriated
\$658,100

**Estimated Teen Pregnancy Rates (Age 15-19)
Michigan Residents, 1999-2004**



Source: MDCH, Vital Records and Health Statistics, 1/05

Project Name: Family Planning

Target Population: Females and males at-risk for unintended pregnancy.

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children.

Project Accomplishments for FY 2005:

- Served 174,654 female teens and women under 250% of poverty (unduplicated count).
- Served 52,073 female at-risk teens.
- Screened 109,132 female teens and women for sexually transmitted infections (including HIV).
- Screened 99,598 female teens and women for cervical cancer (Pap smears).

Project Goals for FY 2006:

- To serve at least 165,400 people with family incomes of under 250% poverty level.
- To serve at least 52,279 female teens at-risk for unintended pregnancy.
- To screen at least 99,598 female teens and women for cervical cancer.

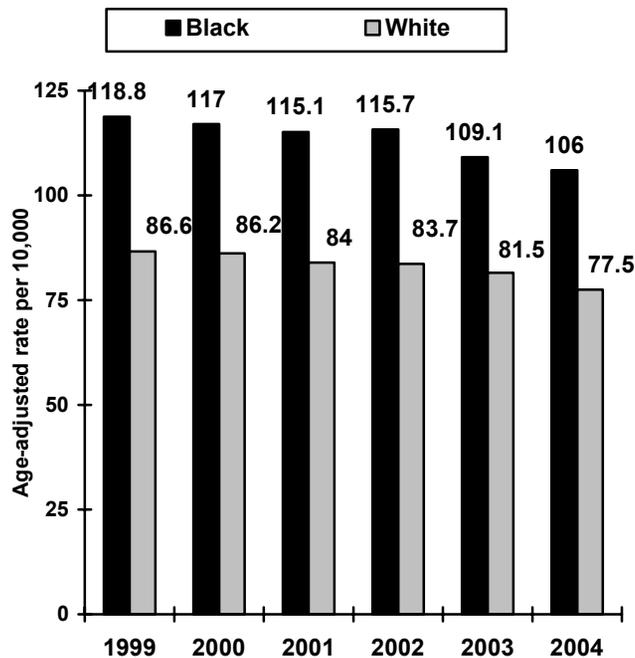
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11268
 Minority Health Grants and Contracts

FY 05 Funds Appropriated
 \$900,000

FY 06 Funds Appropriated
 \$900,000

Age-Adjusted Death Rates by Race
 Black vs. White 1999-2004



Source: MDCH, Vital Records

Project Name: Health Disparities Reduction Program (HDRP)

Target Population: African Americans, Latino/Hispanics, Native Americans, Asian Americans, and Arab Americans/Chaldeans

Project Description: The goal is to reduce health disparities by supporting a portfolio of social/behavioral interventions that will have the greatest impact among racial and ethnic minorities. This is accomplished by funding programs, through a multi-year competitive grant process, that target populations at the greatest relative risk in terms of behavior and geographic location. Program goals for all disparate populations include: 1) Promoting the provision of quality primary and secondary prevention services; 2) Promoting broader access to timely and culturally appropriate services; 3) Developing broader community-based decision capacities; 4) Continuously attempting to link people to existing services; 5) Promoting more comprehensive and inclusive departmental program planning initiatives.

Project Accomplishments for FY 2005:

- The multi-disciplinary Health Disparities Working Group increased awareness of health disparities by developing: a presentation for dissemination of factual and consistent messages, 4 easy to read fact sheets, publication covering chronic disease, violence and HIV, and a “Health Disparities Tool Kit” for distribution throughout Michigan to public health partners, HMO’s and community groups.
- Adult Well-Being Services conducted support groups targeting African Americans in Detroit, seeking to improve overall health of participants through reduction of previously out-of-control hypertension: 92% of participants had a clinical reduction in their hypertension, 94% reported an increase in knowledge of hypertension, 97% reported increase in knowledge on lowering their blood pressure through exercise and diet, and 89% completed the program reporting that information was beneficial.
- Outcome objectives were met for 11 other funded programs, including a variety of initiatives.

Project Goals for FY 2006:

- Facilitate 15 four-month support groups and provide additional individual support for at least 180 hypertensive African American age 50 and older residing in Detroit, Highland Park and Hamtramck.
- Decrease burden of disparities: distribute public health interventions info. with proven effectiveness.
- Establish a systematic approach for collaboration and communication among governmental, private, and community-based health entities. Leverage resources to initiate new and innovative programs.
- Individual program goals to be achieved by the Arab American Chaldean Council, Baldwin Family Health Care, Calhoun County Dept. of Public Health, Genesee County Health Dept., Nottawaseppi Huron Band of Potawatomi Tribe, Oakland Livingston Human Service Agency, St. Joseph Mercy Hospital, St. John Community Health Investment Corp., Tomorrow’s Child/Michigan SIDS, Inc., and YMCA of Greater Grand Rapids.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 16778/16758
 Immunization Program Management & Field Support

FY 05 Funds Appropriated
 \$2,044,100

FY 06 Funds Appropriated
 \$ 2,086,800

MCIR Historical Perspective of Registered Users and Shots Recorded 1997-2005

Year	Register Users	Doses Entered
1997	137	None
1998	1,327	6.5 million
1999	2,007	5.5 million
2000	2,333	4.4 million
2001	2,815	8.3 million
2002	3,493	5.5 million
2003	4,242	4.8 million
2004	7,459	2.6 million
2005	19,759	2.7 million

Source: Immunization Section Program, MDCH.

Project Name: Immunization Registry and Administration

Target Population: Children ages 0 – 19 years.

Project Description: Michigan Childhood Immunization Registry (MCIR) is a regionally based, statewide childhood immunization registry that contains over 41 million shot records of 3.2 million children under the age of 20 years. The department is currently working through subcontracts with six MCIR regions to enroll and support every immunization provider in the state. Currently, there are 2,565 immunization providers/healthcare organizations enrolled in MCIR, 4,495 schools and 2,935 childcare programs. Over 7,500 users log-in to the system daily. Users can access a child’s immunization record to determine if they need additional vaccines. The MCIR will generate recall letters to notify responsible parties whose children have missed shots and encourage them to visit their immunization provider to get the needed vaccines. The regional activities discussed above, as well as the development of enhancements and maintenance of the system, are funded using the Healthy Michigan Fund.

Project Accomplishments for FY 2005:

- 2,238 provider offices submitted over 2.7 million shot records to MCIR; 94% of immunization providers submitted data to MCIR and utilized it as an immunization tool in their practice.
- Integrated the school and childcare immunization reporting into MCIR; training began August 2005 and over 65% of the schools utilized MCIR for their November 1, 2005 report.
- Targeted MCIR effort to recruit and train all immunization providers (200 more provider offices) in SE Michigan enabled immunization rates for 94,000 children (19-36 months) to increase by 9%.
- The Public Health Informatics Institute sponsored 45 public health professionals representing 16 state health depts. to visit MI, showcasing MCIR’s desire to integrate MCIR w/ other child health data sets.
- State legislation was introduced to allow MCIR to become a life-span registry and integrate with other child health data sets such as Lead Screening, Newborn Screening & Hearing

Project Goals for FY 2006:

- Add required fields to MCIR to prepare for pandemic flu outbreak data collection.
- Add a high-risk flag to MCIR to indicate the need for influenza vaccine for children with asthma and other special health risk factors; this will allow providers to generate reminder letter for high-risks.
- Develop HL7 capabilities for seamless integration with electronic medical records systems for data collection and immunization assessment purposes.
- Enhancements to the vaccine accountability inventory functionality within the MCIR to better track and account for vaccine being administered and inventoried around the state.
- 95% of Michigan’s schools will utilize MCIR for school immunization reporting (by Dec. 31, 2006).
- 75% of childcare programs in Michigan will utilize MCIR for childcare immunization reporting.

Healthy Michigan Fund – FY 2005 Report

Appropriations # -14259
Special Projects

FY 05 Funds Appropriated
\$1,000,000

FY 06 Funds Appropriated
\$900,000

Project Name: Infant Mortality

Target Population: Counties in Michigan with the largest disparity in black vs. white infant mortality.

Project Description: To reduce racial disparity in infant mortality across Michigan. Funds are contracted with local health departments to initiate projects to meet specific needs identified by focus groups and community needs assessment. Local communities are expected to engage key stakeholders in a collaborative effort to address the problem. In addition, funds will provide state level support.

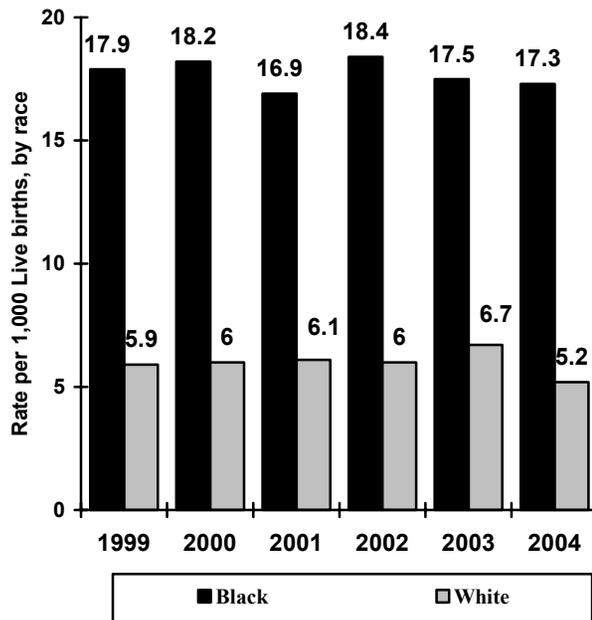
Project Accomplishments for FY 2005:

- Eleven urban communities with high African American infant mortality rates were identified and funded to improve pregnancy outcomes.
- The target communities established coalitions to study the problem.
- Focus groups held with stakeholders including the target population to hear the stories of how this disparity might occur.
- Data on the target population was shared with communities and further local data collection began.
- Funding provided to improve the ability of local FIMR teams to abstract cases & do home interviews.
- A network of local representatives met monthly to develop a plan for eliminating disparities and to share accomplishments.

Project Goals for FY 2006:

- Complete a community needs assessment of issues related to racial disparity in services for pregnant and parenting African American women.
- Produce a comprehensive local work plan that:
 - supports healthy lifestyles for all women of child-bearing age;
 - assures access to primary care;
 - attempts to reduce unintended pregnancy;
 - identifies causes of death through FIMR;
 - identifies/screens pregnant women risk and provides linkage w/ WIC, family planning & MIHP;
 - reduces sudden infant death due to unsafe sleep;
 - links with Nurse Family Partnership, Closing the Gap and other programs designed to reduce racial disparities;
 - assures best practice;
 - develops a local and state infrastructure to assure continuity and coordination of care;
 - demonstrates satisfaction among the target population;
 - assures access to advocacy.
- Design an evaluation plan that monitors success and allows modification of objectives.

**Infant Mortality Rate, by race
Michigan 1999-2004**



Source: Vital Records & Health Data Development Section, MDCH

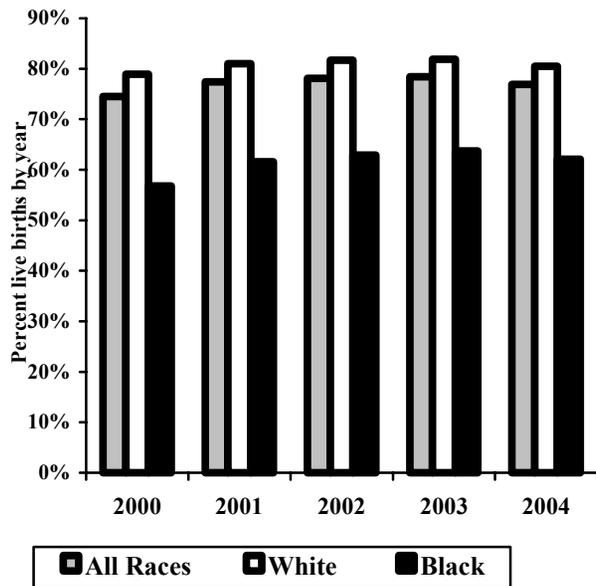
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14262
Local Maternal/Child Health Services

FY 05 Funds Appropriated
\$246,100

FY 06 Funds Appropriated
\$246,100

Percent of Live Births with Adequate level of Prenatal Care, Race, Michigan 2000-2004



Note: The Kessner Index is a classification of prenatal care based on the month of pregnancy in which prenatal care began, the number of prenatal visits and the length of pregnancy (i.e. for shorter pregnancies, fewer prenatal visits constitute adequate care.)

Source: MDCH Division of Vital Records and Health Statistics

Project Name: Local Maternal/Child Health (MCH) Services

Target Population: Prenatal women, mothers, infants, children and adolescents of any income group with a special focus on those who are low income.

Project Description: The project provides support for local communities to address MCH issues in their community that will impact the health status of this target population. There are 18 national and 9 state performance measures/objectives, of which one or more can be addressed, or with justification, a community specific objective for the target population can be selected. The indicators include an array of maternal/child health issue areas such as: immunization, lead screening, infant mortality, newborn hearing screening, children's health insurance cover, etc.

Project Accomplishments FY 2005:

- The following, reported in 2005, are examples of accomplishments by three of 45 agencies that receive funds to address locally identified health needs of women and children in their jurisdiction:
 - Wayne County Department of Public Health: 586 at and high risk children received services in their home for the purpose of counseling, anticipatory guidance or health problems discussion and guidance.
 - District Health Dept. #10: Provided 2573 family planning services, 720 in-home child health services, and at least 75% of young children (19-35 months old) were fully immunized. In addition, 512 families were served by the Healthy Futures program.
 - Kent County Health Department: 6,406 Infant Support Services and 2,090 Maternal Support Services were provided.

Project Goals for FY 2006:

- The more frequently chosen areas to use the funds for are advocacy and outreach services that address the needs of children with special healthcare needs, prenatal care outreach and enrollment, family planning, Maternal Support Services and Infant Support Services. Following are examples of goals set by 3 of the 45 agencies receiving allocations to address the local community's needs & objectives:
 - Wayne County Department of Public Health: Target is to provide Child Health Services to 314 families and Maternal Support Services to 198.
 - District Health Dept. #10: Over 500 families will be served through the Healthy Futures program; immunizations, breast feeding, and access to health care will continue to be targeted. Also, 79% of children 19-35 months of age are targeted to be fully immunized.
 - Kent County Health Department: Target is to serve 3,900 families through the Maternal Infant Health Program (MIHP) in an effort to: reduce overall infant mortality rate, reduce percent of low birth weight births, reduce rate of births to female teenagers (ages 15-17), and increase percent of infants born to pregnant women receiving prenatal care in first trimester.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 33500
Local MCH Services

FY 05 Funds Appropriated
\$1,575,500

FY 06 Funds Appropriated
\$1,575,500

Project Name: Maternal Outpatient & Medical Services (MOMS)

Target Population: Women who are pregnant or were recently pregnant (within two calendar months following the month the pregnancy ended), who apply for medical coverage for their pregnancy at a Local Health Department (LHD), Federally Qualified Health Center (FQHC), or Department of Human Services (DHS) office. Customers must also meet one, or more, of the following criteria; Women with income at, or below, 185% of the Federal Poverty Level who are applying for Medicaid; Women who are covered by the Medical Emergency Services (ESO) program.

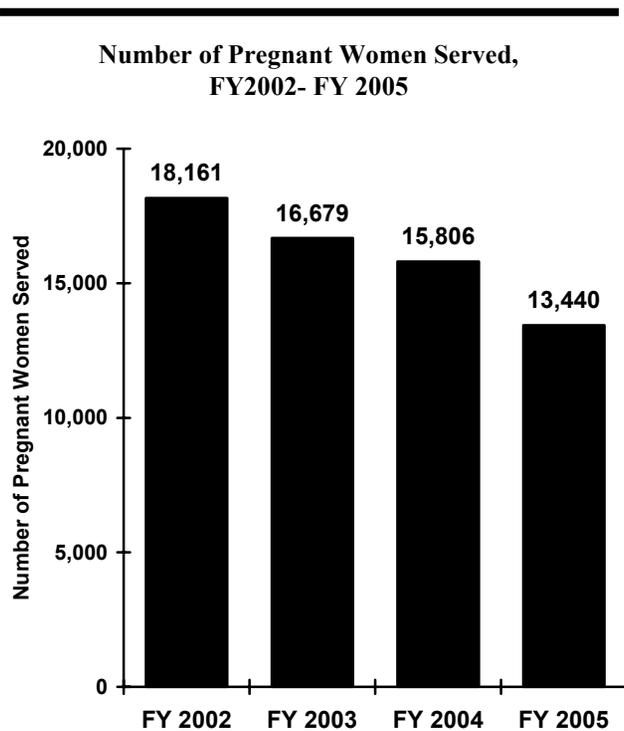
Project Description: Provides medical coverage for approximately 17,000 pregnant women annually. The program allows women to seek early prenatal care while awaiting eligibility determinations for Medicaid. Services covered include, prenatal and pregnancy-related care, pharmaceuticals and prescription vitamins, laboratory services, radiology and ultrasound, maternal support services, childbirth education, outpatient hospital care, and labor and delivery services including all professional and inpatient hospital services. Funding sources utilized for the MOMS program are SCHIP, Healthy Michigan Funds and general funds.

Project Accomplishments for FY 2005:

- Provided access to early prenatal care for women applying for Medicaid.
- Assisted in reducing infant mortality and incidents of pre-term labor.
- Assisted in reducing admissions into neonatal intensive care.
- Assisted in increasing infant birth weights.
- Provided information for LHD, FQHC and DHS.

Project Goals for FY 2006:

- Provide access to early prenatal care for women applying for Medicaid.
- Assist in reducing infant mortality and incidents of pre-term labor.
- Assist in reducing admissions into neonatal intensive care.
- Assist in increasing infant birth weights .
- Provide information and schedule annual MOMS meetings for LHD, FQHC and DHS.



Source: MOMS Oracle Database

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14276
Migrant Health Care

FY 05 Funds Appropriated
\$340,000

Program Outcome Objectives:

Time-framed measurable objectives will be used to determine the effectiveness of services provided.

OBJECTIVE: 95% of all migrant women living in a camp with a Camp Health Aide will be identified and referred for prenatal care and continue to receive prenatal care throughout their pregnancy.

Objective Achieved: 100%

OBJECTIVE: 75% of women giving birth while living in a camp with a Camp Health Aide will breastfeed their baby.

Objective Achieved: 100%

OBJECTIVE: 90% of all children living in a camp with a Camp Health Aide will have the appropriate number of immunizations.

Objective Achieved: 93%

OBJECTIVE: 60% of all women over age 18 will have a pap test within the past year or will obtain one before leaving the camp.

Objective Achieved: 70%

Project Name: Migrant Health Services

Target Population: Migrant women and children with health problems. Those who experience domestic violence and/or need referral to additional services.

Project Description: This allocation was utilized to re-establish the Camp Health Aide Program, which identifies individuals with serious health needs, experiencing domestic violence or with needs for referral to a variety of other services. The only agencies eligible for these funds were the four federally qualified migrant health centers in Michigan (Intercare, Health Delivery, Inc., Family Medical Center and Northwest Michigan Migrant Health Center). Funds were distributed related to the number of sites served by each agency. Since Intercare serves three separate areas, it received 50% of the Camp Health Aide funds.

Project Accomplishments for FY 2005:

- Funded five sites to increase focused services for farm worker women and girls who have experienced domestic violence, particularly related to pregnancy, but also related to any occurrence of domestic or partner violence.
- A total of 40 Camp Health Aides were recruited and trained through Migrant Health Promotion, Inc. The Aides came from six sites within the migrant health network, and each site housed a Program Coordinator that assisted in the training and assured that Aides received weekly trainings throughout the term of the contract to continually increase their knowledge and effectiveness.
- The pre-test scores for the Camp Health Aides was an average of 70% (44 of 64 questions). The high pre-test average is undoubtedly related to the fact that half of the 40 Aides were returning veterans, and several had continued to work as volunteers in 2004 when the program was not funded. Post-test scores increased by 17% to an average of 87% per participant (range of 77%-95%).
- A total of 1,932 individuals received 6,277 services from the 40 Camp Health Aides.
- While the number of Aides was smaller than in previous years when funding was available, they achieved a similar number of encounters, indicating a more intensive level of service in 2005.
- Thirty-five percent of infant and child health encounters were for vaccine administration, 23% for injuries, 15% for illness, 11% for dental services, 4% were newborn related, 2% were for elevated blood lead levels and 10% other.
- Thirty-seven percent of women's health services were pregnancy-related, 27% were for pap testing, 20% were related to breast health, 8% for family planning services and 8% for other.

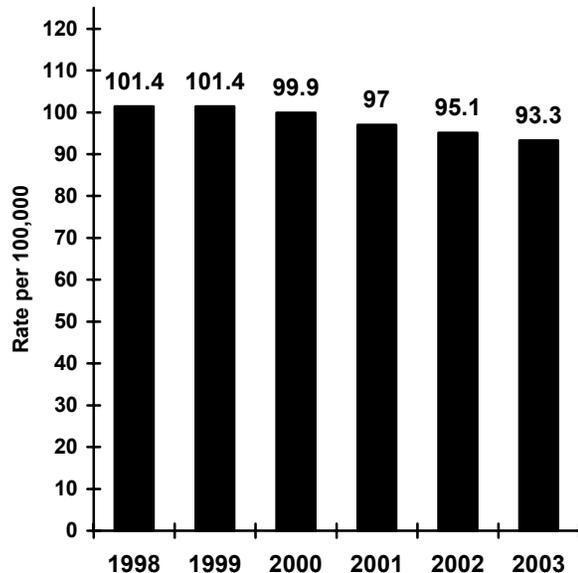
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11380
Chronic Disease Prevention

FY 05 Funds Appropriated
\$400,000

FY 06 Funds Appropriated
\$200,000

Michigan Age-Adjusted Hip Fracture* Rate, 1998-2003



Source: Michigan Inpatient Data base, DVRHS, MDCH.

* Cases were Michigan residents, discharged from a hospital (MI, IN, OH, WI) in 1998, 1999, 2000, 2001, 2002 with a principal diagnosis of hip fracture (ICD-9-CM 820.0-820.9). In-hospital deaths were included. Age-adjusted annual rates were calculated using the U.S. 2000 Standard population.

Project Name: Osteoporosis

Target Population: All residents of Michigan. The project initiatives target women, senior citizens, children and adolescents, and health care providers.

Project Description: The primary objectives are prevention, detection, and treatment of osteoporosis and osteopenia to reduce both the prevalence of osteoporosis and the number of osteoporosis-related fractures. Projects include public and professional education, community-based screening and counseling, dissemination and support for voluntary quality assurance standards for health professionals, and program evaluation. The Osteoporosis Project is administered through the Michigan Public Health Institute, which in turn subcontracts with community and statewide partnership agencies.

Project Accomplishments for FY 2005:

- Community education: 199 educators throughout Michigan were trained to conduct the Better Bones, Brighter Futures community education programs; 105 programs for 2,146 participants.
- Community risk assessment and bone mineral density screenings: 509 adults assessed to be at risk for osteoporosis received counseling and bone mineral density screening tests.
- Michigan Model Curriculum for Comprehensive Health Education: Nutrition lessons for K-5 were completed and osteoporosis information integrated into revised lessons at grades 3 and 5.
- Diabetes, Arthritis, and Osteoporosis Behavior Risk Factor Survey: A random-digit dial telephone survey of 2650 individuals implemented and completed; data will be used to guide project priorities.
- Revision of the Michigan Osteoporosis Strategic Plan: Revised through a statewide planning process. A new organization, Michigan Coalition for Bone Health, established to implement the 5-year plan.
- The Michigan Consortium for Osteoporosis: The consortium executed plans, developed materials, & expanded its constituency for 6th Annual Symposium held for members & other health care providers

Project Goals for FY 2006:

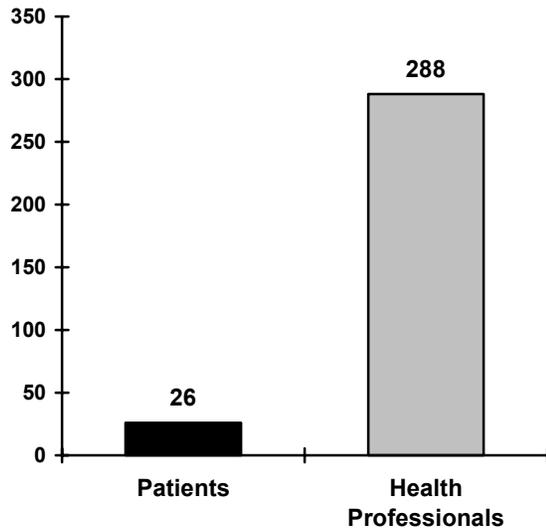
- Continue to expand community education programs to reach targeted populations; evoke healthy behavior changes in 50% of participants.
- Provide community risk assessment, counseling, and bone mineral density screenings for 100 adults who are from underserved or at-risk populations.
- Expand the membership of the Michigan Coalition for Bone Health by 20% and initiate implementation of two projects to address the 2005-2010 strategic plan vision priorities.
- Facilitate and support the work of the Michigan Consortium for Osteoporosis to educate health care providers and improve voluntary quality assurance standards to ensure that a minimum of 100 bone densitometer operators have agreed to comply with quality assurance standards.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11387
Michigan Parkinson's Foundation

FY 05 Funds Appropriated
\$200,000

Number of Clients and Health Professionals Served Through the Multidisciplinary Clinic, FY 2005



Source: Agency Quarterly and Annual Report

Project Name: Parkinson's Disease

Target Population: People with Parkinson's disease and their families/caregivers; Health professionals serving those with Parkinson's disease.

Project Description: The Michigan Parkinson's Initiative focuses on increasing access to specialized health care to ensure accurate diagnosis and optimal treatment, increasing awareness about Parkinson's Disease, and providing education about care and treatment. Multidisciplinary, "second opinion" clinics staffed by movement disorder specialists evaluate patients who live in areas of the state that lack these specialized services. Education provided to patients and families during the clinic visit and educational forums for health care professionals and consumers increase knowledge about Parkinson's Disease and its treatment.

Project Accomplishments for FY 2005:

- **Regional one-day multidisciplinary clinics:** Conducted 3 multidisciplinary second-opinion clinics attended by 26 patients and 6 healthcare professionals. At follow up, 38% reported a change in diagnosis; 77% reported following clinic recommendations.
- **Community and medical education programs:** Conducted three educational programs for health care professionals and consumers; 288 participants attended. Two educational programs expanded participation through videoconferencing to 13 locations. Programs were videotaped and distributed to 50 additional locations.
- **Train-the-trainer programs :** Developed a survey tool to assess training needs of extended care facility staff.

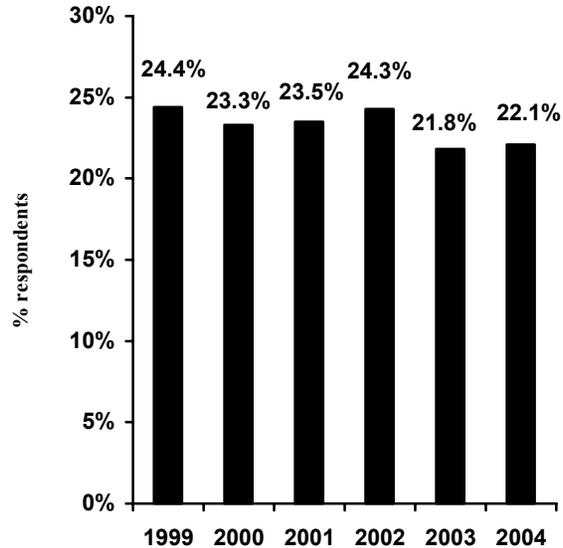
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11369
Physical Fitness, Nutrition, and Health

FY 05 Funds Appropriated
\$900,000

FY 06 Funds Appropriated
\$700,000

No Leisure-Time Activity*, Michigan Residents 1999-2004



* Proportion respondents who reported they did not participate in any physical activities, recreation, or exercise in their leisure time within the past month.
Source: Michigan BRFS, 1999-2004, MDCH

Project Name: Physical Fitness/Governor’s Fitness Council

Target Population: Michigan children and adults

Project Description: The purpose of the project is to promote physical education and physical activity events in Michigan.

Project Accomplishments for FY 2005:

- Coordinated the National Walk to School Day to increase awareness of the importance of regular physical activity through walking and biking to school. Over 200 schools participated. A toolkit was developed for middle schools to sustain this program beyond a one day event to address and change barriers to safe routes to school.
- The Exemplary Physical Education Curriculum (EPEC) is designed to teach children the skills needed to be physically active for a lifetime. Two K-5 objectives were revised and three Lifetime Activity modules were developed - Resistance Training, Basketball and Tennis.
- Worked with the Governor's Office to co-organize the Labor Day Bridge Run in conjunction with the Labor Day Bridge Walk. Local communities were encouraged to host a five mile "virtual bridge walk" on Labor Day with 16 communities participating.

Project Goals for FY 2006:

- Continue to work on EPEC, a physical education curriculum to teach children lifelong skills, by completing revised formatting for K-5 objectives and provide training for 20 teachers, potentially impacting 10,000 students.
- Finalize two EPEC Lifetime Activity Modules (Basketball and Tennis) and provide training to 50 teachers, potentially impacting 12,000 students.
- Market Walk to School Day event to Michigan schools and register 200 schools. Expand Safe Routes to School program by training 20 elementary schools.
- Organize Labor Day Mackinaw Bridge Run attracting 300 participants.
- Market Virtual Labor Day Bridge walks to local communities with 20 communities participating.

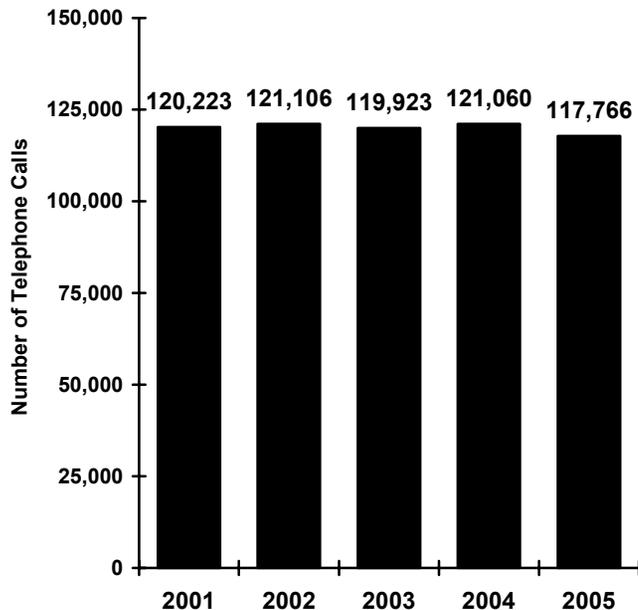
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 33860
Special Adjustor Payments

FY 05 Funds Appropriated
\$300,000

FY 06 Funds Appropriated
\$300,000

Number of Telephone Triage from Public, 2001-2005



Source: Division of Environmental and Occupational Health, MDCH.

Project Name: Poison Control

Target Population: All Michigan residents.

Project Description: The Michigan Poison Control System consists of two regional certified poison centers: Children’s Hospital of Michigan Regional Poison Control (CHM) in Detroit, and the Regional Poison Control Center in Grand Rapids. The centers provide 24 hour/day, 365 days/year, toll-free telephone access for poison triage and first aid advice. The Poison Control program utilizes a comprehensive approach to preventing poison exposure through education of the public and to minimize severity of injury by education of healthcare professionals in the latest treatment for poisoning.

Project Accomplishments for FY 2005:

- Telephone triage from the public (information and advice) – This is provided 24 hours, 365 days per year. Over 117,700 calls received that involved over 85,500 human exposures.
- Total number of successful outcomes (i.e., avoided emergency department visits) 61,194/85,586 human exposures = 71.5% avoided emergency department.
- Consultative service to healthcare providers.
- Provided consultations by medical toxicologists.
- Provided public education through health fairs, community presentations, publications and other venues.
- Provided daily data to MDCH for purpose of syndromic surveillance. This involves the continuous auto uploading of data, occupational pesticide poisonings, and environmental pesticide reporting. Released fact sheet on waterproofing agent, aluminum and copper sulfate algicide.

Project Goals for FY 2006:

- Continue telephone triage from the public, targeting similar numbers (over 117,700 calls), while maintaining or increasing the number of successful outcomes.
- Continue consultative services to healthcare providers.
- Continue public education at health fairs, community presentations, publications, and other venues.
- Continue to provide consultation by medical toxicologists.
- Continue to provide MDCH poison control data for the purpose of syndromic surveillance.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14251
Pregnancy Prevention Program

FY 05 Funds Appropriated
\$5,033,300

FY 06 Funds Appropriated
\$5,033,300

Project Name: Pregnancy Prevention

Target Population: Females and males at risk for unintended pregnancy for family planning services, and for the Michigan Abstinence Program (MAP): Adolescents (9-17 years old and up to 21 years of age for special education populations) and their parents/families.

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children. The Michigan Abstinence Program (MAP) promotes abstinence from sexual activity and related risk behavior ; includes providing parent education and community awareness.

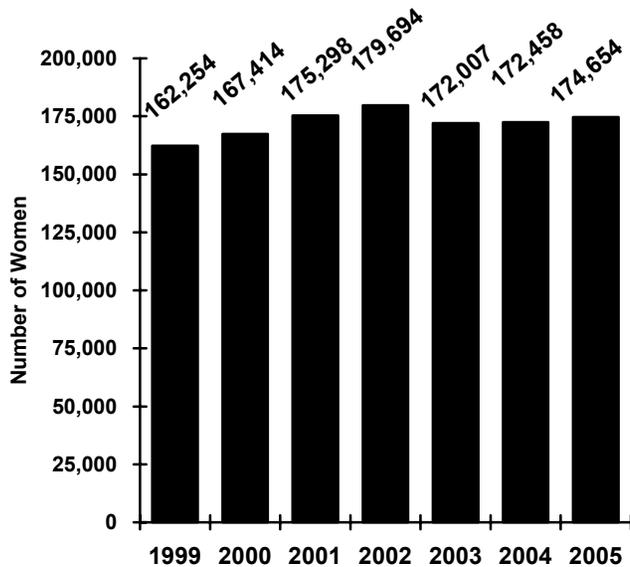
Project Accomplishments for FY 2005:

- Served 174,654 female teens and women under 250% of poverty (unduplicated count).
- Served 52,073 female at-risk teens.
- Screened 109,132 female teens and women for sexually transmitted infections (including HIV).
- Screened 99,598 female teens and women for cervical cancer (Pap smears).
- The Michigan Abstinence Program provided abstinence education to 15,937 Michigan residents; 94% were youth and 6% were parents/adults/caregivers.
- 14,970 youth participated in abstinence education and 11,374 of those youth participated in 14 or more hours of educational contact. The average number of contacts per youth rose from 8 in FY 04 to 13 in FY 05.
- Mini-grants provided to 9 MAP funded sites allowed for additional activities such as summer programming to engage youth during critical, high risk time periods.

Project Goals FY2006:

- To serve at least 165,400 people with family incomes of under 250% poverty level.
- To serve at least 52,279 female teens at-risk for unintended pregnancy.
- To screen at least 99,598 female teens and women for cervical cancer.
- To increase the number of Michigan youth choosing to remain abstinent from sexual activity and other risky behaviors.
- To increase the number of parents/adults/caregivers communicating effectively with youth regarding the benefits of abstinence from sex and other related risky behaviors.
- To increase the number of communities providing social environments that support sex-free and drug-free lives for youth.

Number of Women Receiving Pregnancy Prevention Services, 1999 - 2005



Source: Family Planning Annual Report, Women's and Reproductive Health Unit, MDCH.

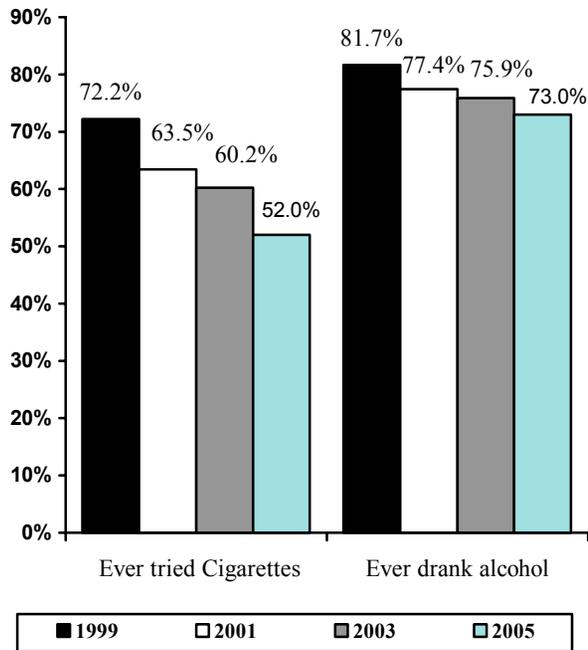
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 14270
School Health and Education Programs

FY 05 Funds Appropriated
\$500,000

FY 06 Funds Appropriated
\$500,000

**Michigan Youth Behavioral Survey
Results by Percentage of MI High School
Students, 1999, 2001, 2003 and 2005**



Source: Michigan Youth Risk Behavior Survey, 2005 Report

Project Name: School Health/Michigan Model

Target Population: School-aged children throughout Michigan and their families

Project Description: The Michigan Model provides comprehensive school health education for Michigan’s school-aged children and their families. School Health Coordinators at 25 regional sites across the state provide health-related professional development, resources and ongoing support/technical assistance for public, charter and nonpublic schools in kindergarten through 12th grade. The Michigan Model for Comprehensive School Health Education curriculum is supported and updated through a statewide collaboration providing a research-based approach to health education. The Michigan Model is the primary health education curriculum used in kindergarten through high school.

Project Accomplishments for FY 2005:

- Drew Medicaid matching dollars through the provision of Medicaid outreach activities.
- Ongoing provision of professional development, curriculum materials and technical assistance to teachers across the state.
- Ongoing development and piloting of new curriculum modules (e.g. Sun Safety).
- Continuation of the curriculum revision/updating process for grades K-6.
- Initiated a rigorous randomized control multi-year evaluation study to include a pilot of the new lessons prior to the evaluation.
- Provided in-depth technical assistance and professional development to Michigan school districts in the area of compliance with Michigan’s new sex education legislation.

Project Goals for FY 2006:

- Provide the revised *Michigan Model for Comprehensive School Health Education* curriculum to all Michigan students and their families as well as assure the continuation of the evaluation study.
- Release the revised grades 4 & 5 and continue revision of the *Michigan Model for Comprehensive School Health* curriculum to ensure accurate and updated content that will lead to ongoing and more widespread use of the curriculum.
- Continue the evaluation study in order to demonstrate program effectiveness, leading to more widespread use of the curriculum in addition to increasing out-of-state sales.
- Continue the provision of technical assistance and professional development to schools in the area of sex education with particular attention paid to compliance with Michigan’s sex education legislation.
- Ongoing provision of Medicaid outreach activities and finding additional means of providing outreach through school health sites.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 46512
Nutrition Services

FY 05 Funds Appropriated
\$167,000

FY 06 Funds Appropriated
\$167,000

Project Name: Senior Nutrition Services

Target Population: Homebound senior citizens age 60 and over.

Project Description: Home-delivered meals are served to those age 60 or older who are homebound and have no other means of meal preparation. Meals served must meet established nutritional requirements, such as 1/3 of the recommended dietary allowance (RDA), and be low in sugar, fat and sodium. Meals are to be made available at least 5 days per week. The Healthy Michigan funding enables the provision of meals on weekends and holidays, and support special diet meals as appropriate.

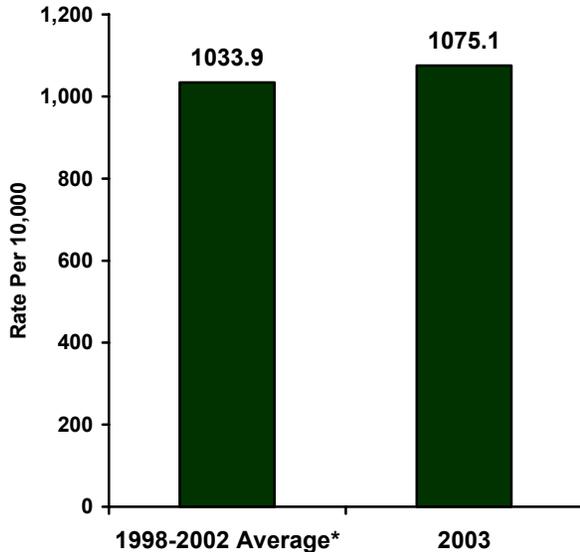
Project Accomplishments for FY 2005:

- The program provided 8.272 million meals to 52,157 homebound seniors. The HMF portion equaled 40,241 meals.
- Total funding used for support of the home delivered meals program was \$34,286,633. Federal funds comprised 38.9% of the funding, with the state and local levels contributing 28.8% and 32.3% respectively.
- Program participants contributed an average of \$.82 meal in donations, which generated an additional \$6,756,946 in funding. These additional funds are included as part of the local percentage and used to expand the number of meals available.
- The additional 40,241 meals supported by the HMF increased the total number of meals eligible for federal NSIP reimbursement and generated an additional \$23,714 to support program activities.
- For the first time, with implementation of the National Family Caregiver Support Program, caregivers have been allowed to define alternatives services, including home delivered meals, as a form of respite. As a result, 62,172 meals were provided to 374 care recipients on behalf of their caregivers.

Project Goals for FY 2006:

- Minimize reductions in services resulting from the loss of other revenue sources and increased costs.
- Improve objectivity of the DETERMINE nutritional risk screening tool to achieve more accurate risk profile of individuals served.
- Expand the use of home delivered meals as a form of respite for caregivers.

**Preventable Hospitalization Rate
Patients Aged 65 and Older,
1998-2002 Annual Average and 2003**



Source: Preventable Hospitalization Database, DVRHS, MDCH.

*Average Annual Rate for 1998-2002.

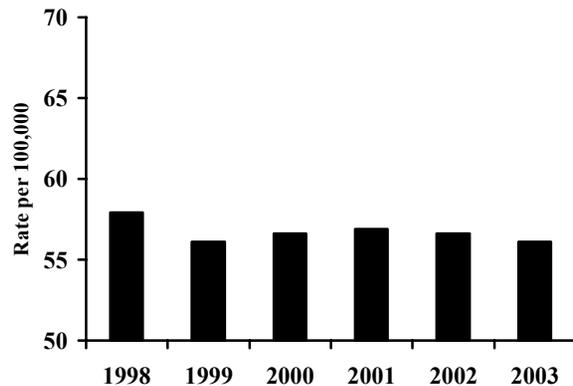
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11360
Smoking Prevention

FY 05 Funds Appropriated
\$3,165,100

FY 06 Funds Appropriated
\$2,719,500

**Age-adjusted Lung Cancer Mortality Rate
per 100,000 population in Michigan
1998-2003**



Source: MDCH, Age-adjusted rates are computed by the direct method, using as the standard population the age distribution of the total population of the United States for the year 2000

Project Name: Smoking Prevention and Smoking Cessation Quit Kit Program

Target Population: Michigan residents (Youth, adults, seniors, Communities of Color)

Project Description: 1) Prevent youth from initiating tobacco use, educate the public on the dangers of secondhand smoke, promote smoke-free environments, and increase the awareness about the impact of tobacco on minority populations. 2) Encourage and assist tobacco users in quitting.

Project Accomplishments for FY 05:

- The City of Detroit and Emmet, Antrim, Otsego, Marquette, and Wayne Counties passed smoke-free worksite regulations. Effect of smoke-free worksites regulations/ordinances in 11 cities and counties is to protect over 33% percent of MI workers from toxic effects of exposure to secondhand smoke.
- Over 60 percent of Michigan public four-year universities and over 50 percent of private four-year colleges and universities have implemented smoke-free residence hall policies.
- 56 percent of MI public and private schools have implemented 24-hour/7-days-a-week tobacco-free school policies, protecting students from toxic effects of exposure to secondhand smoke.
- The smoke-free apartments initiative was launched in 19 counties and: 1) identified over 250 smoke-free apartment buildings, 2) assisted in gaining the adoption of the first smoke-free building policy by a local housing commission in Cadillac, 3) assisted many private landlords in adopting smoke-free policies to protect resident families from the hazards of secondhand smoke in their homes.
- The state's Quitline capacity increased to serve nearly 5600; nearly 3500 received nicotine patches.

Project Goals for FY 2006:

- Support passage of smoke-free worksites regulations in at least 4 counties & 3 cities to protect residents from hazards of secondhand smoke, increase cessation rates, & reduce social acceptance.
- Increase to 80% Michigan public and private schools that implement 24/7 tobacco-free policies, to protect students from exposure to secondhand smoke and reduce social acceptability of tobacco use.
- Decrease smoking rates among youth through collaboration with youth organizations and worksites.
- For evaluation purposes, collect tobacco-related baseline data on Michigan's five major ethnic populations and other population groups disproportionately affected by the burden of tobacco.
- Improve health professionals' understanding and involvement in supporting patients wanting to quit.
- Increase the number of cost-sharing agreements among Medicaid Health Care Plans to support use of the Michigan Quitline (currently 7 of 15 Health plans are collaborating), to help reduce the 44% smoking rate among the Medicaid population.
- Increase the number of municipalities that have developed and implemented smoke-free policies for HUD Housing Developments, in order to create smoke-free environments, encourage quit attempts, and reduce social acceptability of tobacco.

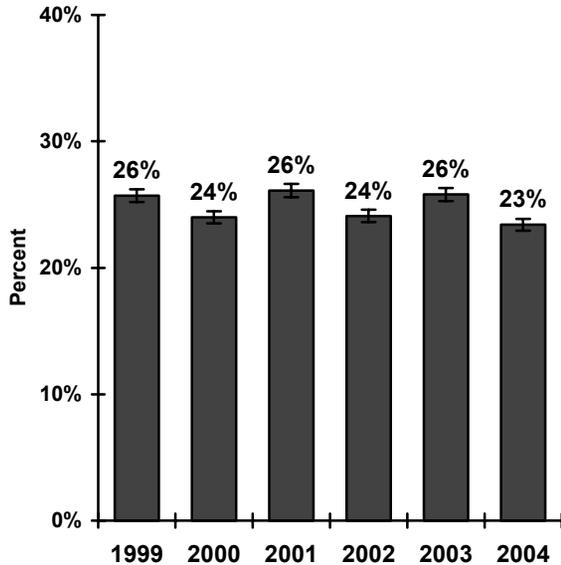
Healthy Michigan Fund – FY 2005 Report

Appropriations # - 11360
Smoking Cessation Nicotine Replacement Therapy Program

FY 05 Funds Appropriated
\$1,500,000

FY 06 Funds Appropriated
\$900,000

Smoking Prevalence in Adults, 1999-2004



Source: Data for Adult (18 years and Older) Smoking Prevalence is taken from the BRFSS, MDCH.

Project Name: Smoking Cessation Nicotine Replacement Therapy Program

Target Population: Uninsured Michigan smokers

Project Description: The nicotine replacement therapy program (NRT)--a program to provide a supply of nicotine patches or gum--was mandated by the legislature in June 2004. Distributing NRT through the quit line allows the Department to: 1) screen callers for medical conditions that might contraindicate the use of NRT; 2) instruct callers in the proper use of NRT to avoid an under- or overdosing situation; and, 3) screen callers to ensure medication is not distributed to minors without parental permission and medical supervision. NRT is distributed to the uninsured as they are the most at risk, least likely to be able to afford medication, and are statistically far more likely to be smokers. HMF money was awarded to the vendor distributing NRT under this program by sole source allocation.

Project Accomplishments for FY 2005:

- The Michigan Cessation Quitline coaches have responded to 10,750 calls from smokers requesting information and/or support to quit tobacco use.
- Michigan Quitline coaches have achieved a 30% quit rate after 6 months with use of NRT. This compares favorably to a national average 6 month quit rate (with or without NRT) of 24%.
- More than 3,500 uninsured people have received NRT through the Quitline. The uninsured represent over 78% of those using the Quitline to support their success in quitting.
- The Health Promotion Clearinghouse responded to over 11,750 calls for information and/or support to quit smoking, and distributed over 119,000 quit kits.

Project Goals for FY 2006:

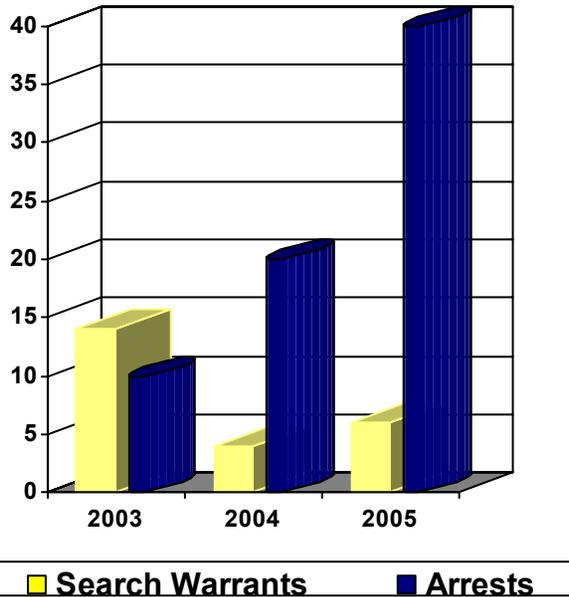
- Increase the number of pregnant Medicaid smokers who are advised and assisted to successfully quit tobacco use.
- Expand the capacity of the Quitline to provide proactive counseling to Michigan callers, including providing NRT for uninsured participants.
- Complete Quitline evaluation with outside contractor to determine Quitline effectiveness.

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Appropriations # - 11390
Tobacco Tax Collection & Enforcement

FY 05 Funds Appropriated
\$810,000

FY 06 Funds Appropriated
\$610,000



Source: Tobacco Tax Collection and Enforcement Report, State Of Michigan

Project Name: Tobacco Tax Collection and Enforcement

Target Population: Individuals and retailers who purchase/sell tobacco products illegally

Project Description: To protect the State of Michigan, its economy and its welfare, through the prevention and suppression of organized smuggling of untaxed tobacco products in the state, and through enforcement of the tobacco tax act, and other laws pertaining to combating criminal activity.

Project Accomplishments for FY 2005:

- Doubled the arrests of tobacco smugglers in the State of Michigan from the previous year.
- Increased seizure amounts from the previous years.
- Law enforcement agency leader in the State Of Michigan in combating illegal smuggling.
- Increased amount of regulatory inspections and complaints taken in the state.
- Continued to identify new and current trends in smuggling:
 - Counterfeit stamps affixed to pack of cigarettes.
 - Large seizures of illegally smuggled molasses tobacco coming into the state.
 - The use of scotch tape to partially remove legitimate stamp onto out of state packs of cigarettes.
- Worked closely with Department of Treasury on identifying individuals liable for assessments.
- Continued to investigate smuggling across the state.
- Continued with partnership of federal agencies in combating internet purchases.
- Assisted Dept. of Treasury in interviewing and investigating most notable purchasers using internet.
 - Over 100 complaints taken which involved cigarettes purchased through the internet or e-check.
- Assisted federal, state, and local law enforcement agencies on complaints related to theft of cigarettes.
- Implemented and facilitated training programs across the state with regards to tobacco tax enforcement and tobacco smuggling.

Project goals for FY 2006:

- Continue to develop partnerships with government entities in combating all types of smuggling.
- Continue to work aggressively in identifying smugglers of tobacco.
- Maintain or increase higher number in arrests of tobacco smugglers.
- Maintain or increase seizures of illegal contraband tobacco.
- Continue to facilitate training programs to law enforcement on identifying tobacco smuggling.
- Continue to show a strong presence in regulating the industry through retail inspections.
- Continue to be the primary resource and enforcement team for tobacco smuggling in the State of Michigan.

Healthy Michigan Fund – FY 2005 Report

Appropriations # - 12271
Local Health Services

FY 05 Funds Appropriated
\$220,000

FY 06 Funds Appropriated
\$220,000

Accreditation Program Goals

1. Assist in continuously improving the quality of local public health departments.
2. Establish a uniform set of standards that define public health and service as fair measurement.
3. Ensure local level capacity to address core functions of public health.
4. Provide a mechanism for accountability to demonstrate effective use of financial resources.

Project Name: Training and Evaluation--LPHO

Target Population: 45 Local Public Health Departments serving 83 Michigan Counties.

Project Description: The mission of the Michigan Local Public Health Accreditation Program is to assure and enhance the quality of local public health in Michigan by identifying and promoting the implementation of public health standards for local public health departments; it evaluates and accredits local health departments on their ability to meet these standards. The program is a collaborative effort between Michigan's forty-five local health departments (LHDs), the Michigan Departments of Community Health (MDCH), Agriculture (MDA), and Environmental Quality (MDEQ), and the Michigan Public Health Institute (MPHI). Program funding is contracted to MPHI to coordinate and administer this program.

Project Accomplishments for FY 2005:

- Concluded Accreditation Cycle 2 with completing eleven on-site evaluations of local health departments to assure local level capacity to provide services and ensure minimum program standards are met.
- Convened state/local *A-G Workgroup* who developed LHD Powers and Duties to replace six administrative capacity sections of the accreditation process.
- Convened state/local *Boilerplate Workgroup* who explored the use of incentives and or sanctions for accreditation/non-accreditation.
- Through the *A-G Workgroup* revised & approved MDCH Policy 8000 to assure program standards are in accordance w/ changes in state/federal law, rules, policy, or professional standards of practice.
- Increased accreditation training content and delivery method to meet need identified through the Accreditation Quality Improvement Process.
- Submitted and awarded grant through Robert Wood Johnson Foundation to develop enhancements to Michigan's process and develop a model of accreditation best practices.

Project Goals for FY 2006:

- Enhance and improve communication between state agencies and local public health to impact consistency, speed and quality of messages.
- Expand the Local Liaison Report with more program-specific article submission and enhanced distribution methods.
- Implement an on-site Review Evaluation process for Accreditation Cycle 3.
- Design and implement accreditation-related training for state agency reviewers and local public health department employees.