

# **SURGEON GENERAL REPORT**

(FY2007 Appropriation Bill - Public Act 330 of 2006)

**April 30, 2007**

**Section 651:** By April 30, 2007, the department shall submit a report to the house and senate fiscal agencies and the state budget director on the activities and efforts of the surgeon general to improve the health status of the citizens of this state with regard to the goals and objectives stated in the "Healthy Michigan 2010" report, and the measurable progress made toward those goals and objectives.

*Michigan Department  
of Community Health*



**Jennifer M. Granholm, Governor**  
**Janet Olszewski, Director**

## OFFICE OF THE SURGEON GENERAL



**For the Period  
October 1, 2005 to September 30, 2006**

Appointed in 2003 by Michigan Governor Jennifer M. Granholm, Dr. Kimberlydawn Wisdom is the first state-level surgeon general in the nation. As Michigan's leading public health advocate, Dr. Wisdom is charged with addressing Michigan's health status and engaging constituencies and partners to improve it.

This DCH boilerplate report for Section 651 of P.A. 154 of 2005 summarizes the activities and efforts of the Michigan Surgeon General to improve the health status of the citizens of this state with regard to the goals and objectives stated in the *Healthy Michigan 2010* report, and the measurable progress made toward those goals and objectives. Healthy Michigan 2010 aligns Michigan's health status goals with the Healthy People 2010 goals for the nation, as addressed through four strategic priority areas in the Surgeon General's *Prescription for a Healthier Michigan*.

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## State Of Michigan – Office of the Surgeon General

Appointed in 2003 by Michigan Governor Jennifer M. Granholm, Dr. Kimberlydawn Wisdom is the first state-level surgeon general in the nation. She is Michigan's leading public health advocate, charged with addressing Michigan's health status and engaging constituencies and partners to improve it. The Surgeon General's leadership resulted in the release of *Healthy Michigan 2010: Surgeon General's Health Status Report*, an evidence-based scientific report documenting Michigan's current health status, and aligning Michigan's health status goals with the *Healthy People 2010* goals for the nation. Her role is key to monitoring *Healthy Michigan 2010* indicators and mobilizing change to improve health status.

*Healthy Michigan 2010* provides the foundation for the *Prescription for a Healthier Michigan*, the Surgeon General's call to action for all Michigan residents to create a social movement of behavioral, policy and environmental change. In the *Prescription*, Dr. Wisdom challenges community stakeholders to embrace prevention practices and invest in a prevention-focused health improvement agenda. She identifies four strategic priorities:

- Promoting Healthy Lifestyles
- Protecting Families
- Protecting Communities
- Eliminating Health Disparities

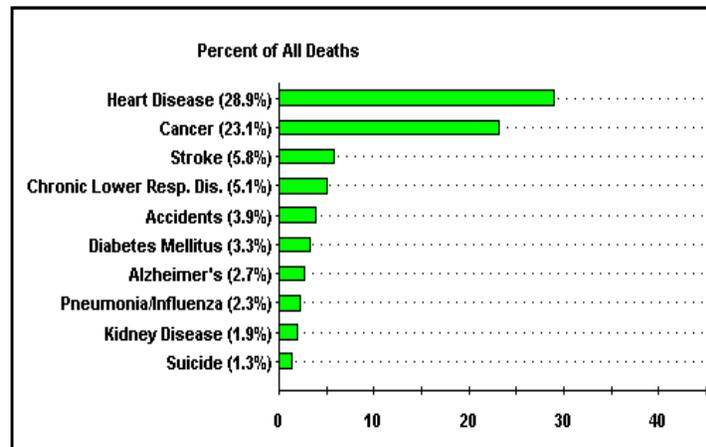
This report on the Office of the Surgeon General presents the highlights of the Surgeon General's efforts to improve the health status of Michigan's citizens, reporting on FY 2006 activities and measurable progress made towards addressing the goals identified in the four strategic priority areas of the *Prescription for a Healthier Michigan*.

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## Strategic Priority: Promoting Healthy Lifestyles

*Michigan Steps Up* is the Surgeon General’s healthy lifestyles initiative in collaboration with the Michigan Department of Community Health. With its motto, “Move More, Eat Better, Don’t Smoke,” the campaign uses a multi-tiered strategy to empower individuals and communities to reduce health risk factors in the areas of physical activity, healthy eating and tobacco cessation and control. Such efforts, building on pathfinding work of MDCH, were designed to address the etiologic factors that contribute to the leading causes of death and soaring health care costs. While Michigan has an unacceptably high ranking nationally for heart disease mortality; age-adjusted death rates continue to fall from year to year; in 2004, Michigan saw fewer total heart disease deaths than in any of the previous 15 years. Cancer is the second leading cause of death in Michigan and the leading cause of Years of Potential Life Lost for people below the age of 75. High-fat and low-fiber diets, sedentary lifestyles, and environmental factors such as radon exposure are all risk factors for cancer, but cigarette smoking is the leading preventable cause of cancer. Michigan rates of smokers have consistently been higher than national rates; in 2004, an estimated 23.4% of Michigan adults were current smokers.<sup>1</sup> Tobacco also impacts non-smokers. In June 2006, then-U.S. Surgeon General Richard H. Carmona issued a comprehensive scientific report concluding that there is no risk-free level of exposure to secondhand smoke. Thus, programs such as *Michigan Steps Up*, which address policy and environmental changes like the adoption of smoke-free school or worksite policies, are a critical part of efforts to decrease exposure to secondhand smoke.

**Leading Causes of Death, Michigan Residents, 2005**

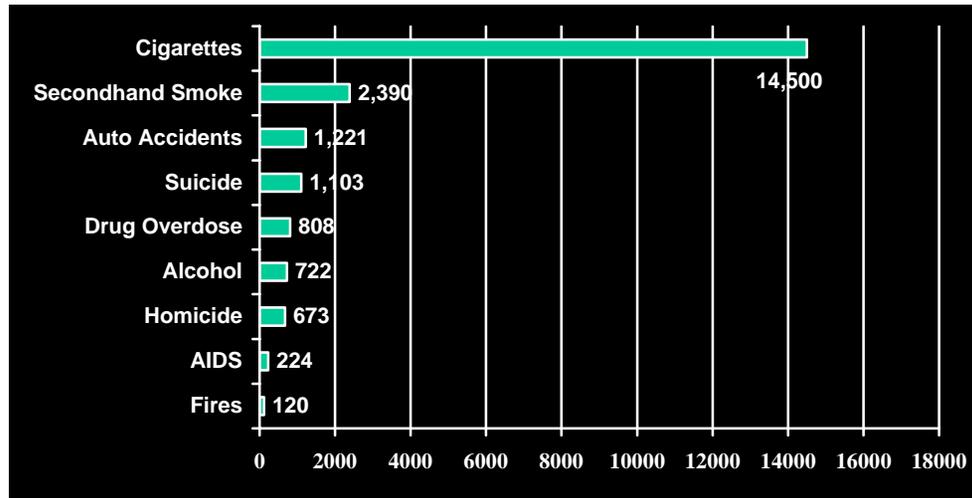


Source: MDCH Vital Statistics - *Causes of death are classified in accordance with the Tenth Revision of the International Classifications of Diseases (ICD-10)*

1 2004 Behavioral Risk Factor Survey: Health Risk Behaviors in the State of Michigan. Epidemiology Services Division, Michigan Department of Community Health.

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### Causes of Preventable Death Michigan Residents, 2005



#### Deaths/Year

Source: Michigan Vital Statistics, SAMMEC 3.0

*Michigan Steps Up* campaign components include an interactive website, community competitions and recognition programs, and “local-motion” at the city-county level focused on behavior change, policy development, and creating a healthier built environment. The campaign has engaged six stakeholder groups - businesses, schools, healthcare organizations, faith-based organizations, communities, and most recently, Michigan’s youth - in creating a social movement to achieve healthier lifestyle goals. In FY 2006, nearly 400 organizational stakeholders continue to give their time, energy and enthusiasm to help *Michigan Steps Up* to better health (see Appendix I).

- **Michigan Steps Up Website**

The Michigan Surgeon General website ([www.michigan.gov/surgeongeneral](http://www.michigan.gov/surgeongeneral)) launched in February 2005 had received more than 106,000 logged visits by the end of FY 2006. In addition, 16,477 people had completed customized online personal health plans on the linked *Michigan Steps Up* website ([www.michiganstepsup.org](http://www.michiganstepsup.org)). The website is interactive and user-friendly, containing tools to help everyone improve their health, including personal planning tips to set and track goals, free healthy recipes and snack ideas, ideas for making healthy choices when eating out, daily health tips, and links to hundreds of

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health-related resources. Various stakeholder groups have incorporated the website as a key resource in their health promotion efforts.

Surgeon General website visits and personal plan enrollments with the *Michigan Steps Up* program track increased awareness of personal health issues and commitment to change, and mobilize action around key health issues by Michigan's citizens. Former U.S. Surgeon General C. Everett Koop's efforts with social marketing and policy change around tobacco control are benchmarked as evidence of the power of media advocacy and organized community intervention to achieve wise public policies and social reform.

- **Healthy Lifestyle Community Competitions & Recognition Programs**

Michigan's Surgeon General, along with the Director of the Michigan Department of Community Health and representatives from public health organizations, were featured speakers at the State Capitol on March 29, 2006, to launch Public Health Week in Michigan. April 3, 2006 marked the kickoff of National Public Health Week, a campaign to educate the public, policymakers and practitioners about issues related to the 2006 year's theme of "Designing Healthy Communities: Raising Healthy Kids." Activities focused on empowering Americans to assess the status of the built environment (such as sidewalks, neighborhood design, parks, roads, schools, etc.) and its impact on children's health in the community.

In FY 2006, 23 extraordinary communities, coalitions, and schools were honored as "Hometown Health Heroes" for their collaborative efforts to make their community a healthier place to live and grow. The state also recognized eight "Public Policy Champions" for introducing new legislation to address gaps in the state's safety net, or for their long-time advocacy of programs that are crucial to maintaining good public health: Michigan Board of Education President Kathleen Straus; U.S. Sen. Debbie Stabenow; State Sen. Deb Cherry; State Sen. Beverly Hammerstrom; State Sen. Michelle McManus; State Sen. Patti Birkholz; State Rep. Chris Kolb; and City of Vassar Manager Scott Adkins.

- **Businesses Promoting Employee Health**

In August 2006, Governor Granholm received an award from the National Governors Association Center for Best Practices for funding to develop and implement the *Michigan's Healthy Workplaces Project*. One of 13 projects funded through the Healthy States competitive grant program, *Healthy Workplaces* will recruit 25 businesses with 50 employees or more from the Governor's Michigan's Cities of Promise initiative to participate in the project. This interagency initiative aims to redevelop eight vulnerable communities that are experiencing declining population, extreme poverty, loss of industry and jobs, crumbling infrastructure and blighted neighborhoods. A Partnership Team in each city includes a state agency representative, local unit of government partners, and other stakeholders including churches, schools, businesses, hospitals, community development

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corporations, and human service organizations. The state agencies work with the team in a strategic, collaborative fashion to focus resources in the city.

Dr. Wisdom is leading a high-level interdisciplinary policy team in guiding the project as it engages private sector employers in implementing worksite wellness action plans that assure supportive workplace environments and motivate employees to assume personal accountability for their health. Integrating the project into the *Cities of Promise* and *Michigan Steps Up* will leverage existing momentum and resource channeling, and focus community attention and support.

Since the *Michigan Steps Up* Healthy Businesses initiative was launched in August 2005 with the Small Business Association of Michigan (SBAM), the Surgeon General continues to urge businesses across Michigan to make small changes in their environment and policies to make it easier for employees to be healthier at work. The initiative aims to ultimately increase productivity and morale, and to reduce employee and employer health care costs. Michigan businesses of all sizes continue to have access to low- and no-cost effective strategies that can assist them in promoting good health, including:

- Assessment tools that suggest changes for a healthier worksite;
- Free, confidential employee Health Risk Appraisals (HRAs) that can provide employees and employers with useful health information (see “Calling on Michigan’s Healthcare Community,” below);
- Incentives to make at least one change over the next 12 months that supports healthy lifestyles at the worksite;
- Low- or no-cost ways to support healthy lifestyle choices; and
- Contact information for businesses with exemplary health promotion programs.

Over 50 business organizations have demonstrated a strong commitment to healthy worksite environments, and are committed members of the Healthy Business Workgroup. Members represent various sectors of the business community, including chambers, associations, healthcare, manufacturing, service, non-profits, universities, local and state governments and unions.

With stakeholders representing GM, Compuware, SBAM, local Chambers of Commerce, the University of Michigan, Michigan State University and other employers, the Healthy Business Workgroup worked diligently to identify and create evidence-based tools and resources for Michigan businesses. One such resource is the Designing Healthy Environments at Work (DHEW) Assessment Tool, assisting worksites in developing policies and environments that support healthy lifestyles. Since its launch in August 2005, 89 worksites have registered with DHEW, and 44 of the worksites have completed the assessment.

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Another key product from the Workgroup is the Worksite Wellness Chronicles, highlighting businesses around the state that have implemented activities or policies to create a healthier workforce. These Chronicles are regularly posted on the *Michigan Steps Up* website.

In FY 2006, the Workgroup continued to encourage businesses to use the free and confidential Health Risk Appraisal (HRA) available on the website. Employers are able to receive worksite-specific, aggregate reports after employees complete the HRA. Donated through the University of Michigan (U of M) Health Management Research Center, the tool has been made available to *Michigan Steps Up* without charge in a true “public-public” partnership. Since May 2005, 4,999 individuals have completed an HRA, and 937 individuals have completed the HRA as part of their worksite’s health promotion activities. Nine worksites have received an aggregate report based on the results from the individual HRAs completed by their employees.

- **Healthy Schools Create Healthier Students**

The Healthy Schools initiative, another *Michigan Steps Up* component, was launched on September 21, 2005. The goal is to encourage Michigan schools to promote physical activity, healthy eating, and a tobacco-free lifestyle to students and staff. The initiative aims to engage 30 state-level school and community organizations and at least 400 schools (10% of schools in Michigan) to implement a healthy school environment by establishing Coordinated School Health Teams, completing the Healthy School Action Tool (HSAT), and joining Michigan Team Nutrition and Michigan Action For Healthy Kids associations by 2007.

The Healthy School Action Tool (HSAT) was developed to help schools assess whether their school environment offers consistent messages about the importance of healthy eating, physical activity and a tobacco-free lifestyle, and opportunities for students to make healthy choices. HSAT may also assist in writing the district local wellness policy. This tool has been posted by MDCH at [www.mihealthtools.org](http://www.mihealthtools.org), and reflects the synergy and strong working relationship between MDCH and other key organizations. Michigan Action for Healthy Kids has trained HSAT facilitators during the past year, and continues to offer regional HSAT facilitation trainings for individuals looking to help schools complete HSAT. As of FY 2006, 686 Michigan schools have registered for the HSAT and 227 have completed it.

The Michigan Surgeon General’s Healthy School Environment Recognition Program was launched in September 2005; an online application was made available and more than 200 schools applied for the program. Dr. Wisdom honored 30 Michigan schools for making significant improvements in their environment in support of physical activity, healthy eating and tobacco-free lifestyles. The awards were presented at a Michigan Action for Healthy Kids Coalition meeting in Lansing on April 26, 2006.

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The four schools that earned first-place recognition have formed Coordinated School Health Teams, completed the HSAT, and made noteworthy improvements such as increasing physical activity time and options, increasing access to healthy food and beverage choices, and teaching about sun safety at outdoor events.

The Recognition Program is the result of a two-year collaboration between the Michigan Department of Community Health, Michigan Department of Education, the Michigan Parent Teacher Student Association, Comprehensive School Health Coordinators Association, United Dairy Industry of Michigan, Michigan State University Extension, Michigan Action for Healthy Kids Coalition, Team Nutrition, and others.

On June 30, 2004, President Bush signed the *Child Nutrition and WIC Reauthorization Act of 2004* into law. The Act contains a local school wellness policy provision, an important new tool to address obesity and promote healthy behavior through changes in school environments. The provision requires that every school district participating in the federal school meals program have a wellness policy in place by the first day of the 2006-2007 school year.

The *Michigan Steps Up* Healthy School Initiative complements the local wellness policy federal requirements. Schools that form a Coordinated School Health Team and complete the Healthy School Action Tool position themselves to implement a local wellness policy and also have a system for making and tracking changes in their school environment.

Michigan's Surgeon General joined Pistons All-Star guard Richard "Rip" Hamilton at Detroit's Burns Elementary on March 7, 2006 to unveil a newly renovated "Strong Body-Strong Minds" center that encourages a love for lifetime learning and healthy living. The remodeled room at Burns reflects Hamilton's personal spirit for healthy living and two tenets of *Michigan Steps Up* – healthy eating and physical activity – while focusing on literacy and education. Dr. Wisdom praised Hamilton, the Rip City Foundation, and the NBA Cares program for helping Burns students realize their full potential by incorporating the strong body-strong mind idea into everything they do.

During the summer of 2006, planning was completed for the first-ever *Michigan Steps Up Youth Leadership & Advocacy Summit*, held in October 2006. Michigan high schools were invited to send teams of up to four students and one adult mentor to participate in this event designed to engage youth to make a personal commitment to a healthy lifestyle and empower them to become advocates for environmental and policy change in their schools. Participants heard success stories from schools around the state and had the opportunity to create an action plan to implement within their school.

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- **Calling on Michigan’s Healthcare Community**

The Healthcare Stakeholder Group of *Michigan Steps Up* focuses on providing strategies to help healthcare professionals promote the campaign messages of moving more, eating better, and not smoking to their patients. A group of more than 50 Healthcare stakeholders, led by the Michigan Health and Hospital Association Health Foundation and the Michigan State Medical Society (MSMS), has focused on:

- Working with the Healthy Business Workgroup to provide an online Health Risk Assessment;
- Offering a recognition event for healthcare clinicians and organizations;
- Supporting strategies addressing prevention services in primary care;
- Pilot-testing a systems change project for primary care; and
- Developing tools to enhance prevention services.

The Healthcare Group offers a free, confidential Health Risk Assessment (HRA) through the *Michigan Steps Up* website. The HRA, developed by the U of M Health Management Research Center and launched in 2005, is a scientific tool that provides individuals with a report on their health risks, based on their answers to the HRA questions. Individuals can print out a personal copy of their results (surveying health history, health practices and preventive screenings), as well as a copy for their healthcare provider. Physicians as well as employers are encouraged to promote the HRA to their patients/employees.

The *Primary Care Initiative (PCI) for a Healthier Michigan*, an important effort of the Healthcare Group launched in late 2004, continued its work to identify and resolve the major system barriers that impede the delivery of preventive services and limit the optimal management of chronic disease in primary care settings. The five system barriers addressed in its Strategic Plan are:

- 1) Insufficient knowledge about community health resources;
- 2) Limited use of health information technology;
- 3) Payment and reimbursement systems that inadequately support prevention and chronic disease care;
- 4) Multiple and inconsistent clinical practice guidelines; and,
- 5) Delivery systems that focus on episodic and acute care but offer little or no effective prevention and chronic disease care.

A comprehensive report containing an overview of the Initiative and its Strategic Plan can be found on the PCI web site at [www.mipci.org](http://www.mipci.org). Also found on the home PCI webpage is a link to the *Michigan Steps Up* Campaign, demonstrating the PCI’s collaboration with the healthy lifestyle initiative supported by Dr. Wisdom.

As a result of the Initiative, and through a collaborative partnership with primary care, public health and the broader health care community, the *Michigan Primary Care Consortium (MPCC)* was established. Their shared vision is that “every

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consumer of primary care services in Michigan is consistently receiving evidence-based preventive and chronic disease care and changes to assure quality care are embedded into primary care practices throughout the state.”

A Steering Committee was formed in 2006 to provide the essential leadership for the MPCC and the implementation of the strategic plan (see Appendix II). Under their guidance, ad hoc committees will be convened to address the areas of barrier resolution and practice transformation - the main components of the implementation phase of the Initiative (see Appendix III).

The Healthcare Group has produced several tools to support prevention services, including: a healthy lifestyles “Prescription,” a Patient Health Record, a Preventive Care Flow Chart, and “An Ounce of Prevention... Why Investing in Prevention Pays” pamphlet. Healthcare providers are further encouraged to incorporate prevention messages and information into routine care by adopting a number of evidence-based prevention tools available online through MSMS and *Michigan Steps Up*.

At the third Michigan Steps Up Stakeholder Meeting on November 14, 2005, 13 Michigan healthcare providers were publicly recognized by the Surgeon General for their outstanding performance in promoting healthy lifestyles and disease prevention.

- **Faith-Based Stakeholders Link Body and Spirit**

The interfaith collaborative network has continued to proactively implement effective programs to garner support for *Michigan Steps Up* and influence change among churches and faith-based organizations throughout Michigan.

The Michigan Faith-Based Health Association (MFBHA) was started in FY 2006 for faith venues statewide to share health resources, funding opportunities and expertise on cardiovascular health, nutrition and physical activity. It is also used to support the vision of supporting healthier lifestyles for Michigan residents. The association recognizes that faith-based organizations have historically served as a cornerstone for human services within the community and is an excellent place to work to improve health behaviors.

*Michigan Steps Up* faith-based stakeholders and staff have played a leadership role in the development of this effort. The MFBHA is open to anyone in the faith community with a commitment to improving the health of children and families in Michigan. More information can be found at the new MFBHA website ([www.mihealthtools.org/mfbha](http://www.mihealthtools.org/mfbha)).

Moving ahead, on August 24, 2006, Michigan’s Surgeon General announced a new web-based tool to assist Michigan churches to support physical activity, healthy eating, and a tobacco-free lifestyle among churchgoers. The tool was launched at the Second Annual Governor’s Faith-Based & Community Resource Symposium at Cobo Conference Center in Detroit. The *Michigan Steps Up Promoting Healthy Congregations Assessment* was created to enable Michigan faith-based

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organizations to assess themselves on how well they are doing at supporting healthier lifestyles among their congregations and learn about steps they can take to promote better health among their members.

Other web-based resources include: the “Spirit, Mind & Body: Eat Well, Live Well, Event Planning Guide,” monthly updates on a variety of health topics, and an opportunity to join the newly formed MFBHA.

Members of Michigan’s faith community have played a key role in the development of these resources as part of a network of nearly 400 statewide *Michigan Steps Up* stakeholders. This group has worked collaboratively with the Michigan Department of Community Health to develop a healthy eating policy for faith-based functions, the MFBHA and the *Walk by Faith* health information website.

In January 2006, Dr. Wisdom and representatives of the *Body & Soul* program of the National Cancer Institute/American Cancer Society were featured on “Faithfully Fit,” a special that aired nationally on the Food Network.

- **Living in Active, Healthy Communities**

The Healthy Communities Group has focused on garnering community engagements in the formation of health coalitions and assessment of the *Michigan Steps Up* campaign. As a helping hand to communities, this group encourages communities to complete a health environmental assessment called the Healthy Communities Checklist (HCC). Once the HCC is completed, communities use the data to determine which of the other available community assessment tools (Promoting Active Communities, Nutrition Environment Assessment Tool, or Smoke-Free Community Assessment) to use next. Having identified their barriers related to healthy eating, physical activity, and tobacco use, communities can develop plans to make positive changes.

In FY 2006, 54 communities received grants to develop local wellness coalitions, complete assessment tools from [www.mihealthtools.org](http://www.mihealthtools.org) and/or make policy and environmental changes that support reducing cardiovascular disease and the *Michigan Steps Up* mission.

The Promoting Active Communities (PAC) award recognizes communities that are making it easier for residents to be active, and have taken action to remove barriers to physical activity. Any city, township, charter township, or village in the State of Michigan is eligible to complete the PAC self-assessment and apply for the award. As of FY 2006:

- 82 communities from 40 counties completed the PAC at least once; and
- 24 communities earned an award more than once.

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The five levels of awards for the six categories of questions in the application include: Policies and Planning for Non-Motored Transportation; Pedestrian and Bicycle Safety and Facilities; Community Resources for Physical Activity; Worksites; Schools; and Public Transportation.

For more information and resources regarding FY 2005 activities and achievements of *Michigan Steps Up* and its stakeholder and partner organizations, please visit the *Michigan Steps Up* website ([www.michiganstepsup.org](http://www.michiganstepsup.org)).

### Strategic Priority: Protecting Families

The Surgeon General believes a significant impact can be made in protecting families by focusing on the health and well-being of women, infants and children.

- **Partnerships to Eliminate Childhood Lead Poisoning**

The Surgeon General served as co-chair of the Childhood Lead Poisoning Prevention Statewide Task Force that began in August 2003. The Final Report of the Task Force to Eliminate Childhood Lead Poisoning was presented to the Governor in November 2004. Efforts of the Task Force, in conjunction with legislative staff, resulted in the introduction and passing of six lead bills:

- Requirement for 80% testing of Medicaid-enrolled children by 2007 (P.A. 55);
- Mandated electronic reporting of blood lead tests by laboratories analyzing samples from Michigan citizens by October 2005 (P.A. 54);
- Development of a “Lead-Safe” Housing Registry for pre-1978 rental properties (P.A. 432);
- Establishment of the Childhood Lead Poisoning Prevention and Control Commission (P.A. 400 and P.A.431), and
- Penalties for Lead Hazards in Rental Housing (P.A. 434).

The Governor signed these pieces of legislation aimed at helping families avoid living in houses that contain lead-based paint between April and December 2004. Further, in March 2005, the Governor appointed nine individuals to the Childhood Lead Poisoning Prevention and Control Commission, chaired by the Surgeon General. This Commission met three times and held two public hearings in FY 2005. The Commission met again on March 6, 2006, to finalize commissioner recommendations and give assignments to state agencies. The meeting was followed by public comment. These public hearings enable the commissioners to communicate directly with citizens and advocates regarding barriers and possible improvements in the prevention and control of childhood lead poisoning. Additionally, plans were in the works for Michigan to join with other states in the annual observance of National Childhood Lead Poisoning Prevention Week scheduled for October 23 to October

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29, 2006. The Childhood Lead Poisoning Prevention and Lead Hazard Remediation programs at MDCH coordinated statewide activities over the year. These included community displays by local health departments and qualified health plans and a May 2006 Saginaw educational event. Elementary schools were encouraged to educate young children and their families about preventing lead poisoning in the home and in daycare/babysitting settings.

As of FY 2006, local lead coalitions have been active in communities including: Hamtramck, Highland Park, Flint, Muskegon, Benton Harbor, Detroit, Kent County and Saginaw. As an early result of these activities, in combination with a robust media campaign and more local involvement and awareness, the number of Medicaid-eligible toddlers tested for lead poisoning increased by more than 20% from 2004 to 2005. Testing percentages continued to increase in Medicaid and high risk population in FY 2006. The goal is to have lead coalitions established in 13 target communities by FY 2007.

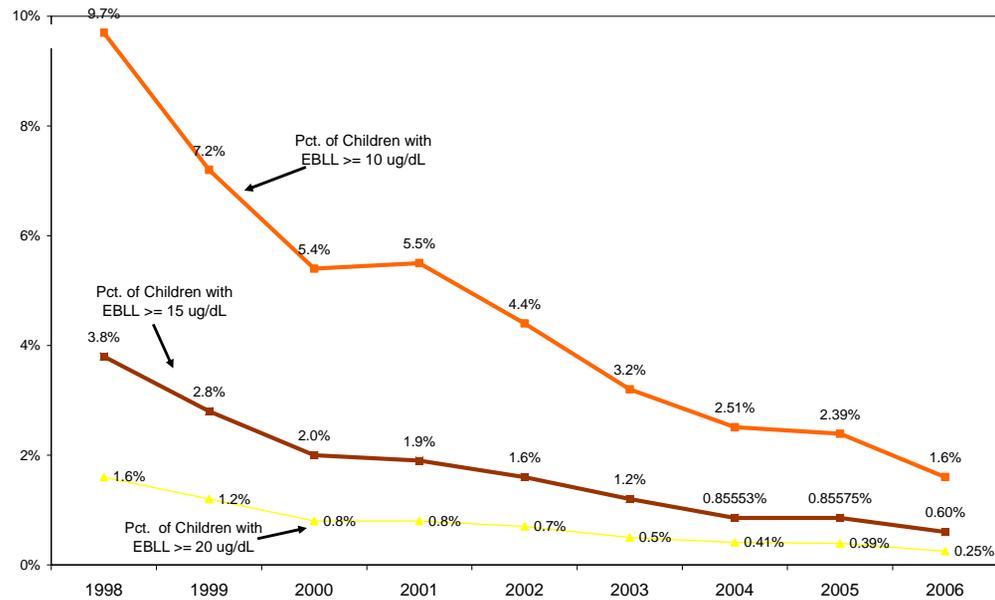
Testing in the special supplemental food program for women, infants, and children (WIC program) occurred in a subset of health departments in FY 2006, in response to P.A. 286, which required that beginning October 1, 2006, all Medicaid-eligible children in the WIC program receive lead testing. Additionally, approximately 40 homes were abated of all lead hazards protecting current and future occupants in FY 2006.

In FY 2006, 30.4% of Michigan children one and two years of age had received a blood lead test, and 17.6% of all children under age six were tested. In Detroit, 58% of children one and two years of age were tested and 43.4% of all children under age six were tested. At the end of FY 2006, among Michigan Medicaid enrollees, 58% of children received a blood lead test by their second birthday, 64% by age three and 67% by age six. In the City of Detroit, 66% of children enrolled in Medicaid had received a blood lead test, and by age three, 77% had been tested.

The overall performance standard for Medicaid Health Plans, which are required to test 80% of enrolled children six years and under by October 1, 2007, stands at 70% in December 2006. Several of the Health Plans are already above 75%, and one plan has tested 83% of their enrolled children of appropriate ages.

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Elevated Blood Lead Levels (EBLL) in Michigan  
Children under Age Six, 1998 - 2006



Source: MDCH Childhood Lead Poisoning Prevention Program statewide database  
March 2007

- **Partnerships to Reduce Unintended Pregnancies**

As charged by the Governor in conjunction with her “Blueprint for Preventing Unintended Pregnancies,” Dr. Wisdom has been leading with the Governor’s Office the program *Talk Early & Talk Often*, a community-based training program to give parents of middle-schoolers the tools they need to open up communication with their children about important issues of sexuality and abstinence. Through FY 2006 more than 60 *Talk Early & Talk Often* workshops had been held, amassing a track record of empowered, highly satisfied parents who have new tools with which to interact positively with their youth on sexual abstinence. Dr. Wisdom appeared in multiple media with planned interviews regarding the program on CBS Morning News

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and other national press. Additional resources and services are available for Michigan parents through the MI Parent Resources website ([www.michigan.gov/miparentresources](http://www.michigan.gov/miparentresources)).

*Talk Early & Talk Often* was featured as a model program in the July 27, 2006 “Adolescent Sexual Health: Engaging Parents in Teen Pregnancy Prevention” audio conference. The conference informed teachers and health care providers from six states about the role parents play in adolescent decision-making and behavior and highlighted programs that promote parental involvement in teen pregnancy prevention. After a very successful pilot, Michigan’s Governor and Surgeon General took pleasure in having the opportunity to share this program with other states; the program truly trains and empowers parents to talk frankly with their children about abstinence and sexuality.

The 2005 Michigan Youth Risk Behavior Survey (YRBS) data indicates that 42 percent of Michigan’s high school aged youth (grades 9-12) have experienced sexual intercourse (a decrease from 44% reported on the 2003 YRBS). About 70 percent of all teen pregnancies are unintended. Dr. Wisdom continued her strong focus on preventing teen pregnancy through her national role with the National Campaign to Prevent Teen Pregnancy, to which she was elected as a Board Member on April 26, 2006. Dr. Wisdom was also appointed chairperson for the Campaign’s State and Local Action Task Force.

On September 27, 2006, Dr. Wisdom also announced the formation of a new statewide Provider Task Force as part of the Governor’s Blueprint for Preventing Unintended Pregnancies. This interdisciplinary group of 40 experts in women’s health includes physicians, social workers, nurses and nurse practitioners, health plans, state and local public health representatives, universities and medical schools, school-based health centers, and Title X clinics. Participants are reaching out to underserved populations and those working with cultural minorities, and developing a Clinical Guideline and Provider Toolkit to support providers in effectively counseling women on how to not become pregnant unless the pregnancy is planned. The drafted Clinical Guideline was slated for review by the Michigan Quality Improvement Consortium (MQIC) in March 2007.

Dr. Wisdom also is leading an implementation strategy for another key component of the Blueprint - a recently approved federal Medicaid waiver to expand access to family planning services for low-income women at or below 185 percent of poverty who reside in Michigan and meet Medicaid citizenship requirements. Enrollment for the state’s new *Plan First!* Program began July 1, 2006, and will expand health services to an expected 200,000 more women. Through *Plan First!*, MDCH will now provide family planning services to women – ages 19 to 44 – who otherwise would not have medical coverage for these services. As of the end of FY 2006, more than 11,500 women had access to critical family planning services through the *Plan First!* program.

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It is estimated that each public dollar spent to provide family planning services saves \$3 that would otherwise be spent in Medicaid costs for pregnancy-related care and medical care for newborns, according to national Medicaid research. These services provide cost-effective, cost-saving solutions for Michigan's Medicaid program, as well as prevent unintended pregnancies. Approximately 41% of all births in Michigan, and 65% of Medicaid births, are from unintended pregnancies. Reducing the number of unintended pregnancies by just 10% would result in over \$27 million in savings in Medicaid expenditures.

- **Partnerships to Reduce Infant Mortality**

The Office of the Surgeon General continued its commitment to engaging in collaborative efforts to decrease infant mortality. The number of infant deaths in Michigan for 2005 was 7.9 per 1,000 live births, just slightly higher than the previous year's all time low record level of 7.6 per 1,000 live births. However, the Michigan infant mortality rate continues to be higher than the national rate. The 2005 provisional infant death rate for the United States is 6.8. Implementation of the Nurse Family Partnership, a proven program relative to improving birth outcomes, continued in FY 2006 in four of the highest African American infant mortality rated communities in Michigan (Benton Harbor, Detroit, Grand Rapids, and Pontiac). Dr. Wisdom's efforts included:

- She worked closely with Benton Harbor on monitoring their infant mortality plan.
- She was keynote speaker at the Infant Mortality Summit hosted by Senator Gilda Jacobs of Huntington Woods.
- She participated in planning a meeting of 11 communities receiving state infant mortality reduction grants.

Please see additional information on Page 20, "Reducing Racial Disparity in Infant Mortality."

### **Strategic Priority: Protecting Communities**

The Surgeon General has called to action individuals to motivate their communities and inspire change, embracing prevention practices and investing in a prevention-focused health improvement agenda.

- **Preventing and Reducing Suicide**

Suicide deaths in Michigan (1,103) topped deaths related to homicide (673) and HIV/AIDS (224) combined in 2005. On September 25, 2005, the Surgeon General in conjunction with community partners introduced a new state policy blueprint designed to prevent suicides and reduce the number of citizens that attempt suicide annually. The Michigan Suicide Prevention Plan, a comprehensive long-term strategy to engage stakeholders and address suicide at a state level, was developed by the Michigan Suicide Prevention Coalition. As an initial step in implementing the state plan, the Michigan Department of

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Community Health applied for and received \$1.2 in federal funds to institute a comprehensive youth suicide prevention and early intervention program for the state.

Michigan's plan aligns with the National Strategy for Suicide Prevention and includes steps to:

- Increase awareness that suicide is preventable and reduce the stigma associated with mental illness;
- Reduce the number of suicide attempts among Michigan youth;
- Promote efforts to reduce access to lethal means and methods of suicide, including creating public information campaigns designed to reduce the accessibility of lethal means in the home;
- Enhance the recognition of high-risk individuals within communities, and improve response times to people that are identified as high risk;
- Support and promote research on suicide and suicide prevention;
- Develop and implement community-based prevention programs; and,
- Improve access to community mental health and substance abuse services.

- **Creating a Health Infrastructure Prepared for Chemical and Biological Terrorism**

The Surgeon General participated in tabletop exercises to enhance all hazards preparedness, and has been an active participant on the Michigan Health Alert Network, responding to health-related issues statewide.

- **Increasing Blood Donations**

The State of Michigan Employee Blood Challenge, which the Surgeon General championed at the Governor's request and with full support of all state departments, saw great success in FY 2006 as a new and unique opportunity for a public-private partnership that would truly make a difference. The campaign was slated to run from November 1, 2005-October 31, 2006.

Many components contributed to its success. Employee incentives were donated by Michigan's four blood agencies as well as several Michigan vacation destinations. A dedicated website with photos, department challenges, and a State of Michigan "Blood-o-meter" kept enthusiasm high. In addition, the Challenge enjoyed excellent leadership support from the Governor, the Cabinet, and all state departments including bipartisan efforts from the Legislature; and the commitment and expertise of our state's blood agencies, working together in an unprecedented collaboration.

Most important, state employees demonstrated just how much they care about saving lives by giving blood. While the initial goal of the campaign was to increase blood donations by 20 percent, the State of Michigan actually grew worksite donations by nearly 50 percent by the close of the campaign. In the first 11 months, ending September 30, 2006, the total number of

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blood units donated by state employees soared to 5627 (worksite donations) and 8074 (worksite plus tracked community donations).

### **Strategic Priority: Eliminating Health Disparities**

The Surgeon General continues to champion the effort to reduce racial and ethnic disparities in health. According to MDCH (2005), racial/ethnic minorities have higher rates of tobacco use, cancer, stroke, diabetes, cardiovascular disease, and obesity. The goals of the Health Disparities Reduction and Minority Health Program are to:

- Increase awareness of health disparities by disseminating data.
- Decrease the burden of disparities by distributing information on public health interventions with proven effectiveness.
- Establish a systematic approach to interdepartmental collaboration and communication.

As of FY 2006, nine organizations that were awarded grants for Health Disparities Reduction in 2005 (for a 2.5-year funding cycle) were achieving their goals and objectives with favorable outcomes. Five of the funded projects included programs amenable to evaluation using the Quality Adjusted Life Years (QALY) coefficient, measuring the amount of time in years of perfect health that would be valued the same as a year with disease or disability. These analyses were conducted by the Prevention Research Center at the University of Michigan. All programs showed participants making significant improvement in status, with several QALYs recovered per year of program effectiveness.

- **Reducing Diabetes-Related Health Disparities**

The Surgeon General served as co-chair of the Diabetes Policy Advisory Council which launched the Michigan Diabetes Strategic Plan in October 2003. This plan established a unified course of action to help reduce the increasing prevalence and burden of the disease, specifically addressing populations most at risk for diabetes and diabetes complications. Although the Surgeon General no longer serves as co-chair, recommendations of the plan continued to be rolled out in FY 2006, specifically targeted to address the populations most at risk for diabetes and diabetes complications.

As a part of the Huron Potawatomi Diabetes Prevention Program, 22 of 30 participants made significant improvements of 7% weight loss or a minimum 150 minutes of exercise per week. Also, with St. John Health's STEP ON Diabetes Program, 184 of 367 participants made significant reductions in Body Mass Index (BMI).

- **Reducing Disparities in Unintended Pregnancies**

Unintended pregnancy rates are highest for:

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- Low-income women;
- Unmarried women;
- African-American women;
- Teens;
- Women between the ages of 20 and 29;
- Women with less than a high school diploma or GED;
- Women with no insurance; and,
- Women on Medicaid.

Michigan's Surgeon General, promoting and strategically engaging with the Governor's "Blueprint for Preventing Unintended Pregnancies," continued efforts in FY 2006 to expand family planning, provide contraceptive equity, and provide leadership support to the *Talk Early & Talk Often* initiative.

- **Reducing Racial Disparity in Infant Mortality**

The disparity between the African American infant mortality rate and the rate for white infants continues. In 2005, the white infant mortality rate was 5.5 per 1,000 live births, while the African American infant mortality rate was 17.9 per 1,000 live births. The infant mortality rate for infants of other races was 11.4 per 1,000 live births.

Supported by the Office of the Surgeon General, an important state initiative designed to improve African American infant mortality is focused on the communities in Michigan with the highest infant mortality rates. Michigan communities with the greatest racial disparity in infant mortality include: Oakland, Genesee, Kalamazoo, Saginaw, Berrien, Macomb, Kent, Ingham, Detroit, Wayne and Washtenaw. In FY 2006, local Infant Mortality Coalitions continued to meet to develop community-based plans for improving African American birth outcomes. As an example of the strides they are making, in the Oakland Livingston Human Services program, 63 percent of participants reported prenatal care visits; 6 of 9 deliveries were full term healthy births. In 2006, 41 pregnant African-American women had enrolled in the program.

## Special Events and Recognitions

The Surgeon General continued to mobilize individuals, families, and communities in FY 2006 as part of her "Surgeon General Rounds." In FY 2006, the Surgeon General spoke at nearly 60 conferences and events and performed more than 80 media interviews on topics including childhood obesity, diabetes, school wellness policies, wellness in the faith community, healthy workforce, secondhand smoke, HIV-AIDS, lead testing and health disparities. She also led well-covered media walks recognizing community-

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based initiatives to improve health in the built environment, including the Flint River Trail, Lansing's River Trail, and the Conner Creek Greenway in Detroit.

Dr. Wisdom received numerous local and national Special Recognitions during FY 2006, including:

- Women of Power Award, National Coalition of 100 Black Women, Inc.
- Health Champion Award, Michigan Minority Health Coalition
- Key Partner Award, MSU Extension, Family and Consumer Sciences Program
- Legacy of Leadership Award, Rosedale Park Baptist Church
- Community Service Award, Gift of Life Michigan

Dr. Wisdom's role and office are the subject of a University of Michigan School of Public Health case study to describe the context in which an Office of the Surgeon General was created and executed at a state level; explore the events, relationships, attitudes and beliefs of national, state and local agencies, organizations and their representatives with ties to or collaboration with the office; and propose conclusions regarding the effectiveness, value and challenges of the position.

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## Appendix I: *Michigan Steps Up Stakeholders*

### **BUSINESS WORKGROUP:**

Accident Fund Insurance Company of America

American Cancer Society

American Heart Association - Greater Midwest Affiliate

Blue Cross Blue Shield of Michigan

Brogan & Partners

Compuware Corporation

Daimler Chrysler Corporation

Deep Lake

DeGrow & Associates, Inc.

Delphi

Dept. of Labor & Economic Growth

Eaton Corporation

Foamade Industries

Foundation for a Healthy Community

Frankenmuth Mutual Insurance Company

Gemini Group Health & Wellness

General Motors Corporation

Office of the Governor

Grand Rapids Area Chamber of Commerce

Greater Detroit Area Health Council

Health Alliance Plan

Health Management Research Center

Holtyn & Associates

Jackson National Life

Johnson & Johnson

Kalamazoo County Health & Human Services

Lakeland Care, Inc.

Lansing Regional Chamber of Commerce

Livingston County Department of Public Health

Michigan Education Special Services Association

MI Dept. of Civil Service, Employee Health & Wellness

Michigan Association of Broadcasters

Michigan Economic Development Corp.

Michigan Fitness Foundation

Michigan Health & Hospital Assn

Michigan Legal Services

Michigan Restaurant Association

Michigan State Building and Construction Trades Council

Michigan State Medical Society

Miller Canfield

ODL, Inc.

Operating Engineers Local 547

Seyferth Spaulding Tennyson

Small Business Assoc. of Michigan

Sparrow Comm. Health Education

StayWell Health Management

Success Point Marketing, Inc.

T.E.A.M.

TI Automotive Systems

U of M Tobacco Research Network

UBS Financial Services, Inc.

United Auto Workers International Union

WEYCO, Inc.

Whirlpool

Wolohan Lumber Company

### **HEALTHCARE WORKGROUP:**

MSU Institute for Health Care Studies

National Kidney Foundation

MI Academy of Family Physicians

MI Peer Review Organization

MI Association for Local Public Health

Foot Health System

Henry Ford Health System

MI Council of Nurse Practitioners

March of Dimes -MI

American Heart Association-Midwest Affiliate

American Lung Assn. of MI

Johnson and Johnson

MSU Dept. of Pediatrics

Novo Nordisk Pharmacy

FACT MSU

Children's Hospital of MI

Concentra Medical Center

MI Health & Hospital Assn.

Michigan State Medical Society

U of M Health Management/Policy American Academy of Pediatrics-MI

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MSMS Alliance  
 MI Dietetic Assn.  
 Huron Medical Center  
 MI Assn. of Health Plans  
 MSU College of Human Medicine  
 American Diabetes Assn.  
 MI Nurses Assn.

American College of Women's Health  
 MI Health Council  
 Blue Cross Blue Shield of MI  
 U of M School of Public Health  
 MI Academy of Physician's Assistants  
 MI Primary Care Assn.  
 MI Council for Material and Child Health

American Cancer Society  
 MESSA  
 MI Integrative Medicine  
 MI Osteopathic Assn.  
 MI Pharmacists Assn.  
 MSU College of Nursing  
 MI Department of Community Health

## COMMUNITY WORKGROUP:

American Diabetes Association  
 American Heart Association - Greater Midwest  
 Affiliate  
 American Lung Association of Michigan  
 Bronson ProHealth Wellness Services  
 Cadillac Area Community Health Coalition  
 Capital Area District Library  
 Department of Human Services  
 Governor's Council on Physical Fitness  
 Henry Ford Health System Institute on Multicultural  
 Health  
 Inter-Tribal Council of Michigan  
 League of Michigan Bicyclists  
 March of Dimes  
 Mayor Kwame M. Kilpatrick's Office

Michigan Association of Broadcasters  
 Michigan Association of Local Public Health  
 Michigan Association of United Ways  
 Michigan Community Action Agency Association  
 Michigan Department of Agriculture  
 Michigan Dept. of Community Health- Mental Health  
 Svc. For Children & Families  
 Michigan Fitness Foundation  
 Michigan Food Policy Council  
 Michigan 5-A-Day Coalition  
 Michigan Land Use Institute  
 Michigan Public Health Institute  
 Michigan Recreation and Park Association  
 Michigan Restaurant Association  
 Michigan State University

Michigan State University Extension  
 MSU Extension Obesity Council/Community Food  
 Systems  
 Michigan Townships Association  
 Mid-Michigan District Health Dept.  
 National Kidney Foundation of Michigan  
 Prevention Network  
 Rails to Trails Conservancy Michigan Chapter  
 REACH Detroit Partnership  
 St. Clair County Community Mental Health  
 St. Mary Mercy Hospital  
 The Asian Center  
 Three Rivers Health Foundation  
 Tobacco-Free Michigan  
 Wexford Missaukee Multi Purpose Collaborative Body

## FAITH-BASED WORKGROUP:

Saginaw Valley State University  
 Detroit Area Agency on Aging  
 University of Michigan Health Systems  
 Henry Ford Health System  
 Wayne State University  
 Providence Hospital Congregational Health

Bristol-Meyers Squibb  
 American Cancer Society Great Lakes Division, Inc.  
 Governor's Office for Community & Faith-Based  
 Initiatives  
 St. Joseph Mercy Hospital  
 Faith Access to Community Economic Development  
 American Diabetes Association

Providence St. John  
 American Heart Association Midwest Affiliate  
 Detroit Department of Health & Wellness Promotion  
 Michigan Public Health Institute

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## SCHOOLS WORKGROUP:

American Cancer Society	Michigan Assoc. for Health, Physical Education, Recreation and Dance	Michigan Education Special Services Association
American Heart Association	Michigan Association of School Boards	Michigan Fitness Foundation
Blue Cross Blue Shield of Michigan	Michigan Association of School Nurses	Michigan Parent, Teacher, Student Association
Comprehensive School Health Coordinators Association	Michigan Dental Association	Michigan State University Extension
Gordon Food Service	Mich. Dept. of Community Health	Michigan Team Nutrition
Governor's Council on Physical Fitness, Health & Sports	Michigan Department of Education	National Kidney Foundation of Michigan
Inter-Tribal Council of Michigan	Michigan Diabetes Outreach Network	School Community Health Alliance of Michigan
	Michigan Education Association	School Nutrition Association of Michigan
		United Dairy Industry of Michigan

## Appendix II: Michigan Primary Care Consortium Steering Committee Members

Charles Barone II, MD, FAAP	Michigan Chapter of the American Academy of Pediatrics
Teresa Bartlett	Daimler Chrysler Corporation
Mark Bertler, BA, CAE	Michigan Association for Local Public Health
Gerard Breitzer, DO, MS	Michigan State University
Robert Burack, MD, MPH	Wayne State University - Karmanos Cancer Institute
Jean Chabut, RN, BSN, MPH	Michigan Department of Community Health
Mike DeGrow	Michigan Academy of Physician Assistants
Patience Drake	Michigan Consumer Health Care Coalition
Joe Fortuna, MD	Delphi Corporation
Peter Graham, MD	Michigan Academy of Family Physicians

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Doyle Hayes	Pyper Products, Inc.
Susan Hendrix, DO	American College of Obstetricians and Gynecologists
Denise Holmes, MS	Institute for Health Care Studies
Gregory Holzman, MD	Michigan Department of Community Health
Ruth Hoppe, MD, FACP	American College of Physicians, Michigan Chapter
Kevin Kelly, MPA	Michigan State Medical Society (MSMS)
Marc Keshishian, MD	Blue Cross Blue Shield of Michigan
Craig Magnatta, DO	Michigan Association of Osteopathic Family Physicians
Marsha Manning	General Motors Health Care Initiatives
Toshiki Masaki	Ford Motor Company
Susan Moran, BSN, MPH	Michigan Department of Community Health
Rick Murdock	Michigan Association of Health Plans
Donald Nease, MD	University of Michigan
Janet Olszewski,	Michigan Department of Community Health
Dennis Paradis	Michigan Osteopathic Association
Thomas Petroff, DO, FACOOG	McLaren Health Plan
Juliet Santos	Michigan Council of Nurse Practitioners
Kim Sibilsky, BA	Michigan Primary Care Association

## Office of the Surgeon General – FY 2006 Report

Larry Wagenknecht, RPh

Michigan Pharmacists Association

Gail Warden, MHA

Henry Ford Health System

Jan Whitehouse

Greater Detroit Area Health Council, Inc.

Kimberlydawn Wisdom, MD

Michigan Department of Community Health

# Appendix III: The Michigan Primary Care Consortium

## Strategic Plan Implementation

