

Energy Waste Reduction Low Income Workgroup

October 3, 2024



Agenda

Welcome and Introductions

Brad Banks,
MPSC

Social Determinants of Health Hub

Nina Sassy,
MDHHS

Heating with Justice: Barriers and Solutions to a Just Energy
Transition in Cold Climates

Claire McKenna,
Pacific Northwest National Laboratory

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Close & Adjourn

Brad Banks,
Energy Waste Reduction Section, MPSC

MICHIGAN'S ROADMAP TO HEALTHY COMMUNITIES

Social Determinants of Health (SDOH) Hubs: Cultivating Strong and Resilient Communities

Laura Drayton



THE GOAL OF THE MDHHS SDOH STRATEGY IS TO:

Improve the health and social outcomes of all Michigan residents while working to achieve health equity by eliminating disparities and barriers to social and economic opportunity.

SDOH Strategy Phases

PHASE I

Refinement

- **Focus Areas: Housing Stability, Food Security, and Health Equity**
- **IMPROVEMENT** of internal programs and policies
- **ALIGNMENT** of internal initiatives and collated resources

PHASE II

Holistic

HOLISTIC structural interventions:

- Community Information Exchange (CIE)
- Community Health Workers (CHWs)
- Health Equity Partnerships

PHASE III

Innovation

INNOVATIVE, community-driven solutions:

- SDOH Hubs
- Health in All Policies Multi-sectoral Initiatives
- Closing the Disparity Gap

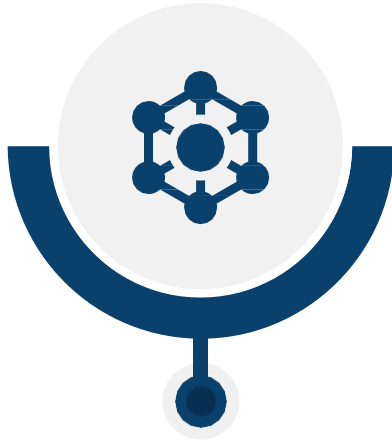
A Closer Look at SDOH Hubs

SDOH Hubs promote regional, multisector collaboration and provide the infrastructure for a sustainable statewide framework that addresses the social drivers of health.



SDOH Hubs Goals

Local SDOH Hub partners work together to enhance social and health care service delivery and improve access to resources, tailored to the specific needs of their communities.



Establish and scale the infrastructure for a **sustainable statewide framework** that supports addressing SDOH.



Enhance **regional, cross-sector collaboration** to create a comprehensive and accessible health and social service delivery system for residents.



Maximize funding and reduce health care costs through technology, human capital, and cross-sector collaboration.



Reduce health disparities and improve health equity by ensuring all Michigan residents have the opportunity to achieve optimal health and well-being.

SDOH Hub Pilot Framework

Community Engagement

Foster meaningful, sustained community engagement across all phases of intervention planning and implementation.

Governance

Establish criteria, actionable steps, and strategies for partnerships, collaborations, and relationships that result in improved health outcomes over the long term.

Policy & Advocacy

Identify evidence, tools, and resources to enhance communication about policies that affect SDOH with policy makers and other stakeholders.



Data Collection & Storytelling

Embed a consistent SDOH approach to the collection, analysis, and dissemination of quantitative and qualitative data.

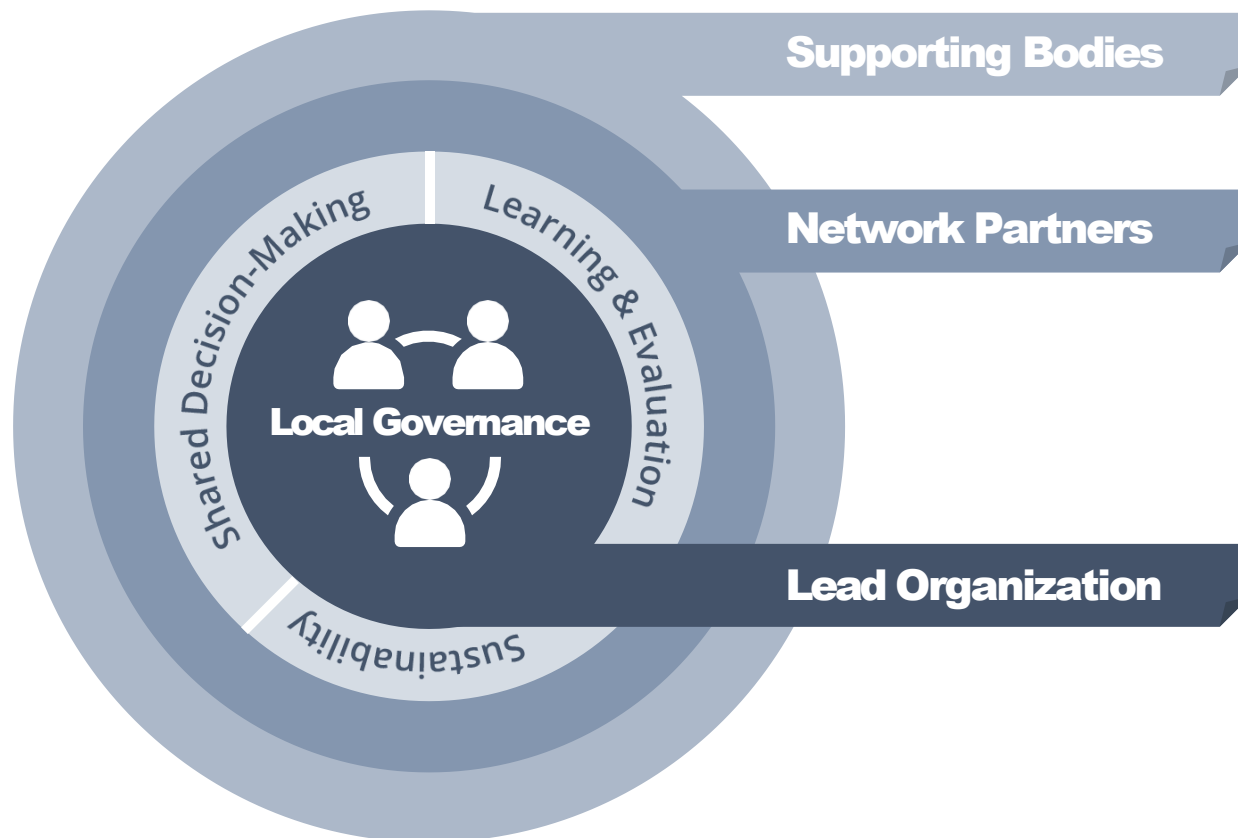
Evaluation & Evidence Building

Advance evaluation and build evidence for strategies that address SDOH to reduce disparities and promote health equity.

Infrastructure

Strengthen and sustain infrastructure such as workforce, training, and access to financial resources required to address SDOH and reduce health disparities.

Establish criteria, actionable steps, and strategies for partnerships, collaborations, and relationships that result in improved health outcomes over the long term.



Supporting bodies include the SDOH Advisory Council, the SDOH Interagency Work Group, and technical assistance (TA) providers.

Hubs will strengthen **network** relationships across sectors and engage diverse partners, including CBOs.

All hubs will have a **Lead Organization** that is committed to managing the Hub. This organization will be responsible for administering funds, communicating with partners, and ensuring that community members guide the work of the hub.

SDOH Hubs Coordinating Bodies

SDOH Hubs Advisory Council



- During the pilot phase of the SDOH Hubs, MDHHS will engage an advisory council to guide the implementation of the SDOH Hub pilot projects and develop recommendations for future iterations of the SDOH Hub work.
- The SDOH Hubs Advisory Council will reflect the perspectives necessary for an inclusive, community-driven approach.

SDOH Hubs Learning Community



- The SDOH Hubs Learning Community is comprised of representatives from each of the SDOH Hub sites, including representatives from lead organizations and network partners.
- The SDOH-HLC meets every other month to share updates, discuss challenges, and lessons learned/best practices.



SDOH Hubs Advisory Council

Purpose

During the pilot phase of the SDOH Hubs, MDHHS will engage an advisory council to guide the implementation of the SDOH Hub pilot projects and develop recommendations for future iterations of the SDOH Hub work.

Membership

The SDOH Hubs Advisory Council is comprised of a diverse group of 22 members from various domains and sectors, including state government agencies, the private sector, health care, philanthropy, technology, and community members.

SDOH Hubs Advisory Council Priorities

ALIGNMENT



Better align SDOH Hub efforts by consistently sharing best practices and coordinating approaches to mitigation of barriers.

MEASUREMENT



Identify meaningful measures of SDOH Hubs to demonstrate value and illustrate impacts.

ENGAGEMENT



Build a community engagement strategy to raise awareness of the importance and impacts of SDOH Hubs.

SUPPORT



Develop a technical assistance strategy and identify funding mechanisms to promote sustainability of SDOH Hubs.

ADVANCE EQUITY



Identify promising policies and practices to close disparity gaps and advance health equity through SDOH Hub implementation.

A graphic on the left side of the slide features a teal-to-blue gradient background. It includes faint, semi-transparent icons of three people silhouettes at the top and a gear icon at the bottom. Overlaid on this background is the text "SDOH Hubs Learning Community" in a bold, white, sans-serif font, arranged in three lines.

SDOH Hubs Learning Community

Purpose

Throughout implementation of SDOH Hubs, MDHHS will engage a learning community to share successes, barriers, and opportunities. The learning community will identify best practices to inform future iterations of SDOH Hub work.

Membership

The SDOH Hubs Learning Community is comprised of representatives from each SDOH Hub pilot site and network partners. It will interface with the SDOH Hubs Advisory Council and supporting bodies, including technical assistance providers and subject matter experts.

Key Barriers Identified



**Narrowly
focused funding**



**Focused on
management,
not prevention**



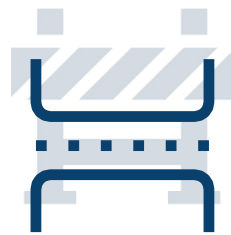
**Long wait list for
programs and
services**



**Overburdened
clinical/social
care providers**



**Complexity of
the EGrAMS
system**



**Lack of
collaboration**



**Duplicative efforts
and inefficient use
of funding**



**Lack of
understanding of
health equity**

Opportunities



Use braided funding sources and seek flexible funding sources



Implement upstream prevention strategies



Streamline application and renewal processes



Engage community partners to provide support



Streamline the contract process to engage small CBOs



Participate in the SDOH Interagency Work Group



Work together to achieve shared goals through collaboration



Require DEI training and impact assessments

SDOH Hub Pilot Funding Priorities



01 Community Health Worker (CHW) training, hiring, and integration



02 Community Information Exchange (CIE) planning and implementation



03 Implementation of holistic interventions that address SDOH utilizing a Health in All Policies framework

SDOH Hubs Measurement

To ensure transparency and accountability, Hubs will include:



**01 Data Collection
and Analysis**



**02 Monitoring and
Evaluation**







**03 Public-facing
Dashboards**

Hub Pilot Site Measurement: Pre-Assessment





HUMAN-CENTERED: CHW Integration

	No CHW integration
	CHWs integrated into the health care/ clinical care system
	CHWs integrated into the broader system of health and social care
	SDOH Hub pilot is implementing the CITIE initiative

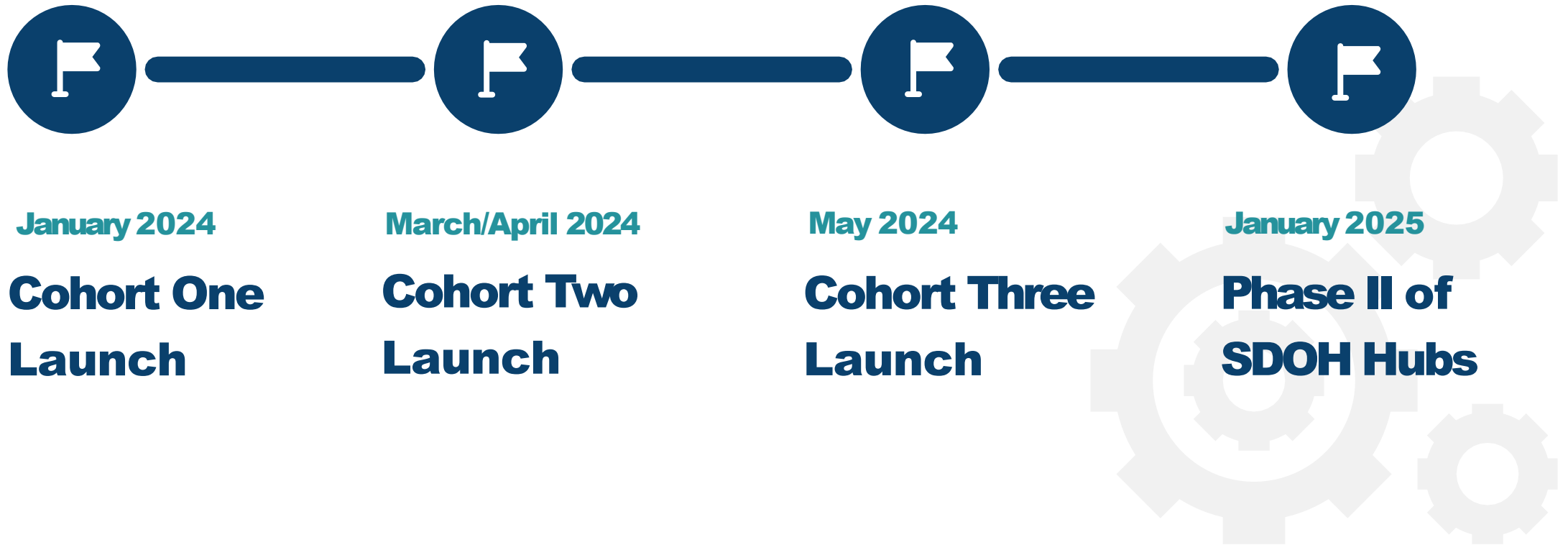
TECHNOLOGICAL: CIE Implementation

	No formal integration or implementation
	Referrals but no formal coordination or data sharing
	Coordinated team with informal but regular data sharing
	Formalized cross-sector data integration

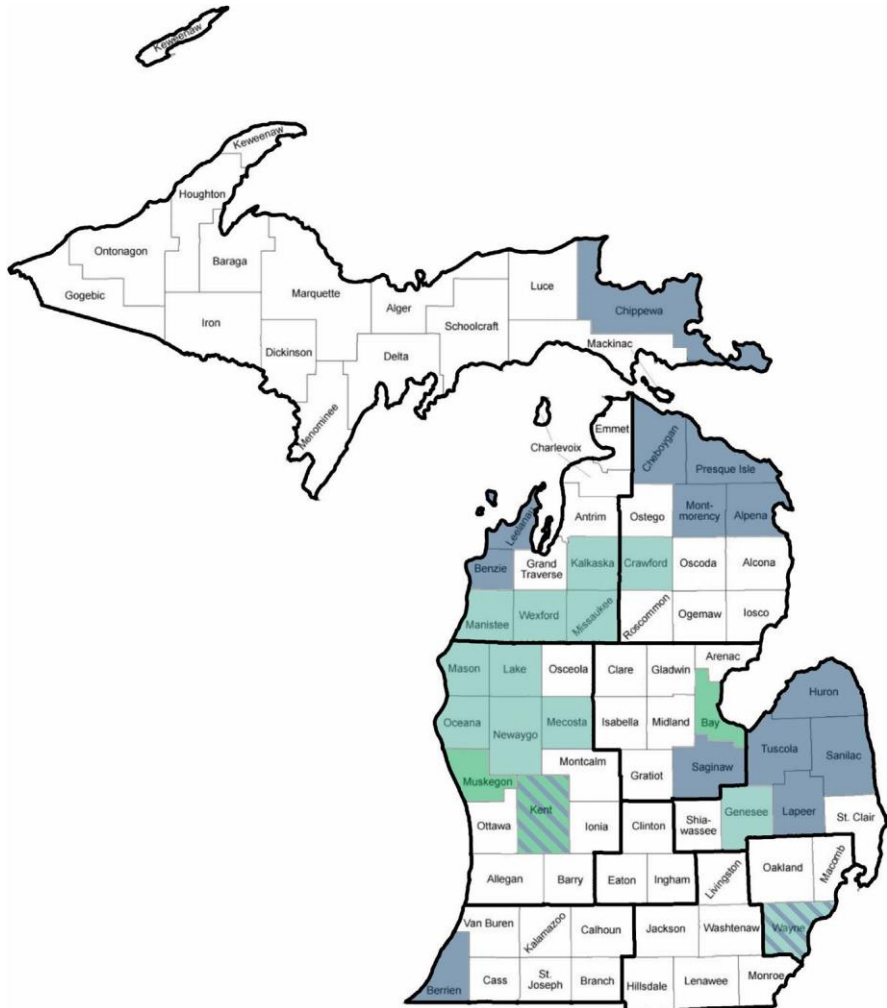
ORGANIZATIONAL: HiAP Implementation

	Unfamiliar with the HiAP approach; no implementation
	Familiarity with the HiAP approach, but no implementation
	Limited cross-sector collaboration; informal implementation
	Intentional cross-sector collaboration; formal implementation

SDOH Hub Pilots Timeline



SDOH Hub Pilot Sites



1

Cohort One

District Health Department #10, Detroit Health Department, Wayne County Health Department, United Way of Genesee County/Greater Flint Health Coalition

2

Cohort Two

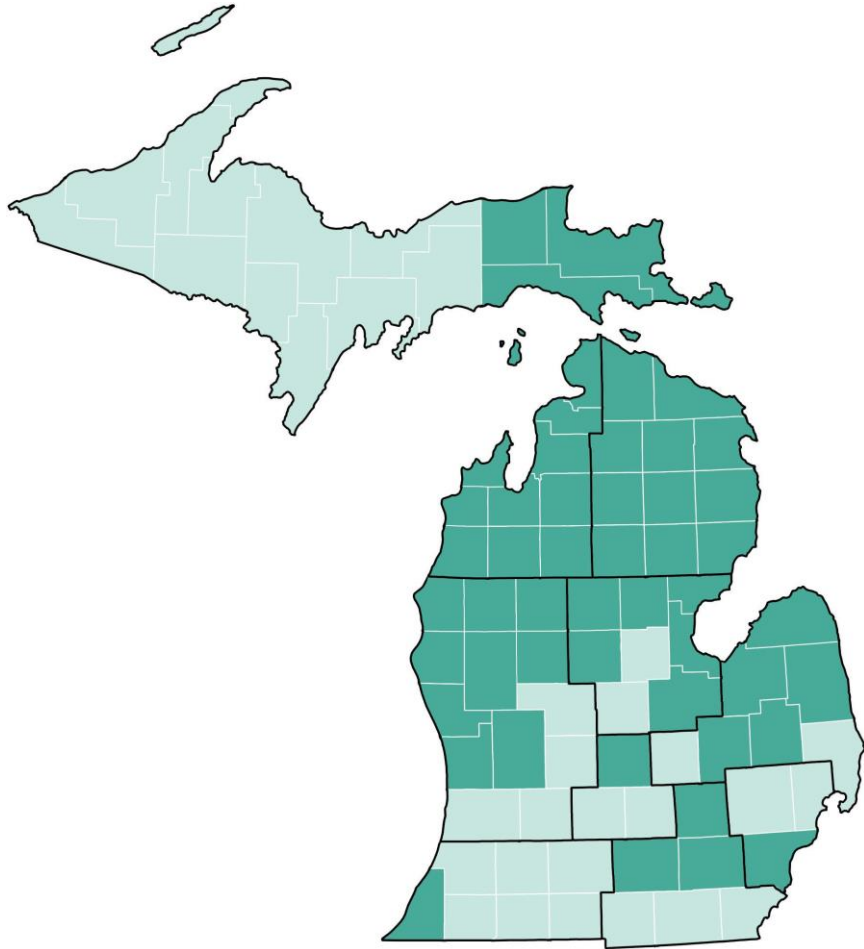
United Way of Bay County, Muskegon County Health Department, Heart of West Michigan United Way

3

Cohort Three

Chippewa County Health Department/CLM Community Action Agency, Northern Alliance: Benzie-Leelanau and DHD#4, Thumb Alliance, Saginaw County Health Department/PartnerShift Network, United Way for Southeastern Michigan, Berrien County Health Department/Area Agency on Aging, Kent County Health Department

SDOH Hubs FY25 Implementation



- Existing sites will rollover funding and receive additional funding to continue activities in FY25.
- MDHHS is partnering with the Center for Health Research and Transformation (CHRT) to support overall alignment between coordinating entities, including SDOH Hubs and Regional Health Collaboratives (RHCs).
- SDOH Hub sites will be added in Regions 7 and 9 to ensure representation from every prosperity region.
- The Northern Michigan Public Health Alliance (NMPHA) will include additional counties.

SDOH Hub Site Profiles

For more information about the SDOH Hubs initiative, please visit our website:

Michigan.gov/SDOH



bit.ly/SDOH-Hub-Profiles

Anticipated Impact

01



Development of a foundational infrastructure that can adapt and expand over time.

02



Increased accountability and transparency.

03



Increased alignment at state and local levels, and across health and social care.

04



Improved access to state resources.

05



Increased commitment to community-driven work.

06



Reduced health disparities.

Case Studies and Collaborative Solutions

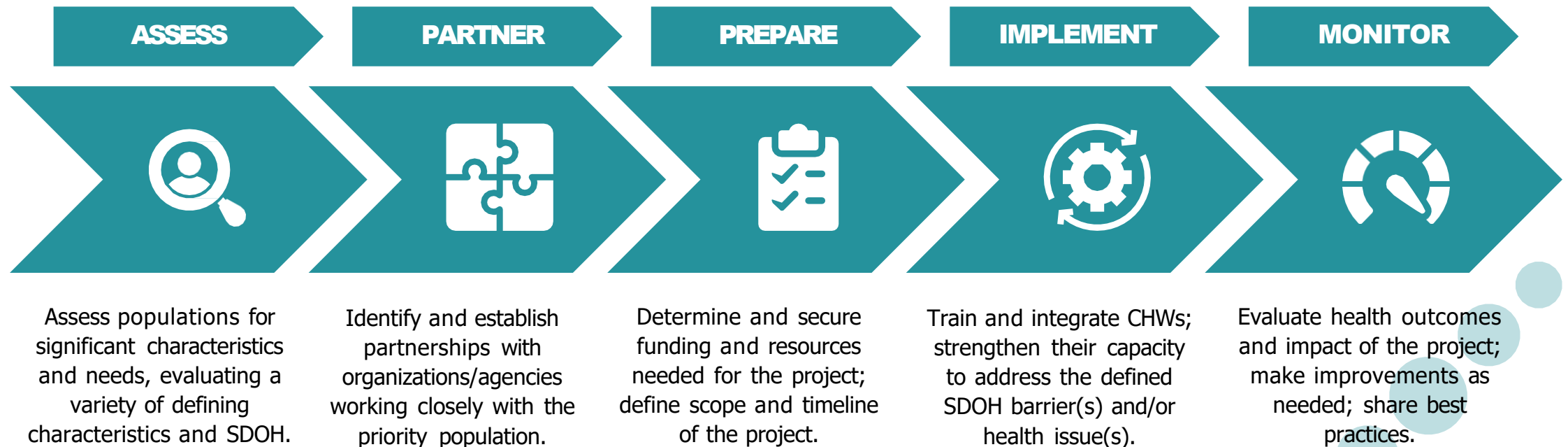


BEST PRACTICES AND CASE STUDIES

Implementing the CHW Integration to Improve Equity (CMIIE) Initiative



Community Health Worker Integration to Improve Equity (CTIE) is an innovative, collaborative initiative that aims to address health disparities by training and integrating CHWs in communities that have been disproportionately burdened by health inequities.



CME Initiative Projects



**Training and
integrating CHWs in
Genesee County to
address a high
prevalence of
hypertension (high
blood pressure)**



**Training and
integrating CHWs in
Ingham County to
support the refugee
population**



**Training and
integrating CHWs in
Wayne County to
connect individuals to
critical health
screening programs**

BEST PRACTICES AND CASE STUDIES

Developing and Implementing Community Information Exchange (CIE)

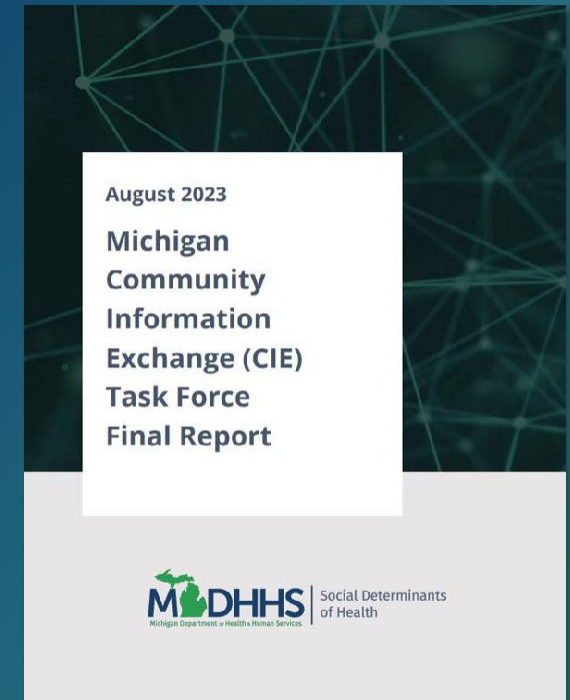


CIE Task Force Final Report

The CIE Task Force identified the following domains that support effective implementation of community information exchange:

- Capacities for Data Exchange
- Resource Directory Information Capacities
- Longitudinal Data Aggregation Capacities
- Legal and Ethical Framework
- Coordinating Entities Capacities
- Governance
- Sustainability

Michigan.gov/CIE



What is CIE?

A CIE is a community-led ecosystem comprised of multidisciplinary **network partners** who use a **shared language, resource database,** and **integrated technology** platforms to deliver enhanced **community care planning.**

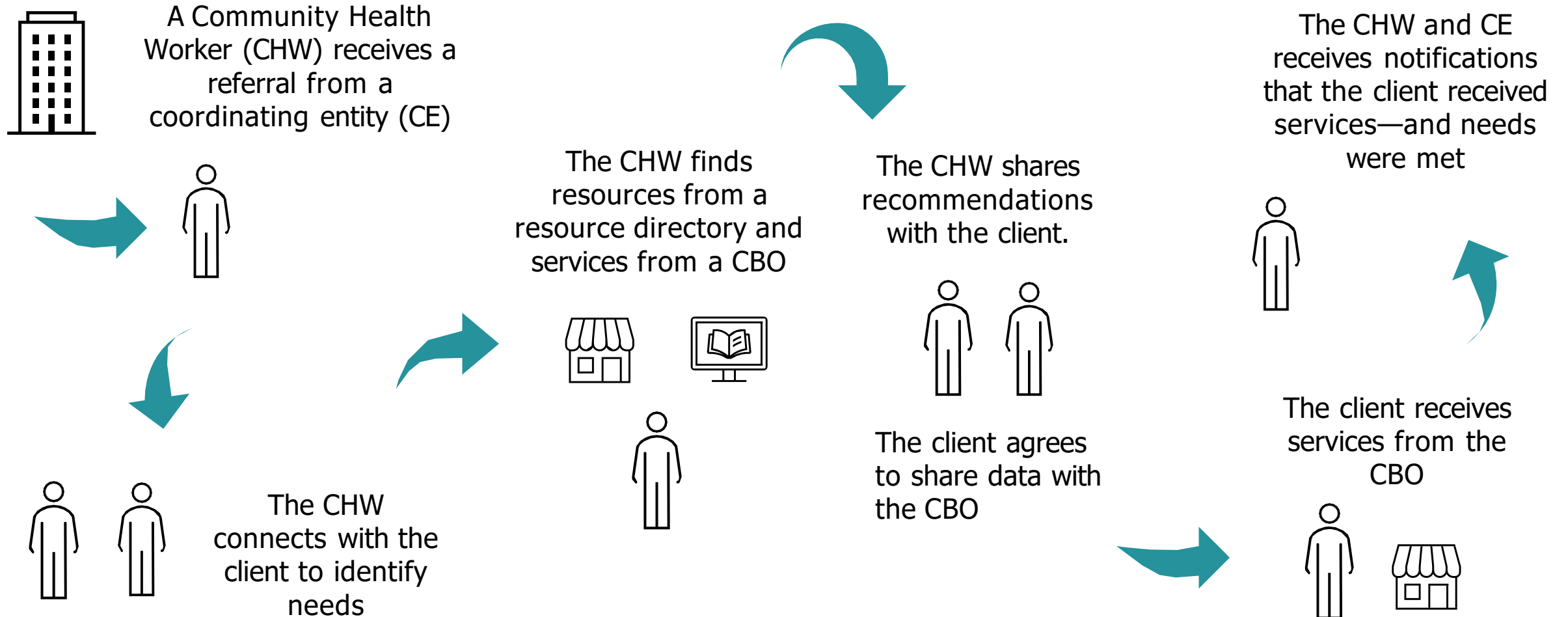
CIE enables communities to shift from a reactive approach to addressing social needs to an approach that is more proactive, holistic and person-centered.

At the very core of a CIE is the community it serves, and with the community as its compass, a CIE seeks to support antiracism and health equity.

Community Information Exchange Goal

To promote health and social equity and improve the wellbeing of all Michigan residents, Community Information Exchange helps different organizations that provide health care and social services work together better. This system allows them to share important information about what people need and the available resources to help them. By doing this, the right people can get the right assistance at the right time and in the right way. The goal is to improve the well-being of all Michigan residents and ensure that everyone is treated fairly.

CIE Use Case



BEST PRACTICES AND CASE STUDIES

Utilizing a Health in All Policies (HiAP) Approach to Address SDOH



Good Housing = Good Health (GH2) Program



Good Housing = Good Health demonstrates how quality housing directly impacts quality of life. Good housing equals good health because housing stability is good for both physical and mental health and well-being.

Program Term: October 1, 2023 – September 30, 2024 | **Funding Allocation:** \$2,000,000

SDOH Hub Site Participants:

1. City of Detroit Health Department
2. Greater Flint Health Coalition
3. Kent County Health Department
4. Northern Michigan Public Health Alliance
5. Public Health Muskegon Health Department
6. Thumb Alliance
7. Wayne County Health Department



Good Housing = Good Health (GH2) Program

GH2 Program Components



**Housing
Stability
Support and
Education**



**Leveraging
Community
Health
Workers**



**MI Bridges
Navigation**



**Relationship
Building and
Collaboration**



**Community
Information
Exchange
(CIE)**



**Housing
Resource
Webinars and
Training
Opportunities**

Food Delivery Program: Goals

- Support food delivery services to SNAP recipients and people experiencing transportation barriers in Kent and Wayne counties.
- Engage community residents in Kent and Wayne counties to support and increase SNAP enrollment as well as promote availability of food delivery benefit.
- Develop recommendations to support sustainability and scalability of Food Delivery Program in Michigan.



Future Outlook



SDOH Hubs Sustainability



**Coordinating
Entities**



**Funding
Mechanisms**



**Policy and
Advocacy**



**Technical
Assistance**



Opportunities to Support



Sharing Best Practices

Sharing insights on lessons learned and mitigation of barriers.



Providing Technical Assistance

Providing TA to SDOH Hub Lead Organizations and network partners.



Leveraging Partnerships

Acting as convenors and connectors of the work.



Supporting Evaluation

Supporting the evaluation process for the pilot phase.



Financial Investment

Filling in funding gaps and supporting scalability and sustainability.

Engagement Opportunities

Stay involved with implementation and expansion efforts:



**Sign up for
the SDOH
newsletter**

[bit.ly/MDHHS-SDOH-
Newsletter](https://bit.ly/MDHHS-SDOH-Newsletter)



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www.Michigan.gov/SDOH



Thank You



Close & Adjourn

Thank You!