



Lenawee Health Network

Mission: To improve the health and well-being of the community.

CHIP Goal: Cultivate a resilient community equipped with equitable & accessible resources empowering all to reach their highest potential for health.

Today's Agenda

Minutes – February 09, 2023

8:00 – 8:05 **Call to Order**

Purpose/Mission

- Welcome & Introductions
- Inspiration & Appreciation

8:05 – 8:10 **Leadership Updates**

- COVID-19 Updates
- Collective Impact Core: Trauma & Resilience
 - Trauma Informed Temperature Check

8:10 – 8:40 **CHIP Strategy & Collaborations**

- Spotlight Presentation(s):
 - Zonta Club of Lenawee – Amanda Davis
 - YMCA of Lenawee – Beth Deakins

8:40 - 8:55 **Emerging Issues**

- March:
 - [National Women's History Month](#)
 - [National Nutrition Month](#)
 - [2025-2030 Dietary Guidelines – Committee Meeting](#)
 - [National Colorectal Cancer Month](#)
 - [National Kidney Month](#)
 - [National Social Work Month](#)
- April:
 - [National Minority Health Month](#)
 - [National Alcohol Awareness Month](#)
 - [National Sexual Assault Awareness & Prevention Month](#)
 - [National Parkinson's Awareness Month](#)
 - [National Stress Awareness Month](#)
- Agency Updates
- Open Discussion

9:00 **Meeting Adjourned**

Inspiration & Appreciation

- “We must not, in trying to think about how we can make a big difference, ignore the small daily difference we can make which, over time, add up to big differences that we often cannot foresee.” – Marian Wright Edelman
- Appreciation: “I’m grateful for Ashley Vandebusch! We got some time to connect this month, and she led me to some really great conversations and deep insights about how we connect with others. I’m still thinking about them today! You are an inspiration, Ashley.” - Madeline DeMarco
- Please send any submissions recognizing our partners or residents for their great work to Frank.Nagle@ProMedica.org for a feature in our upcoming meetings.
- Submit by the 4th Friday of each month.



LHN LEADERSHIP

Monthly Updates

COVID-19: Lenawee Update

Lenawee County Active Cases			
	Lab-Confirmed	Probable	Total
New Cases This Week	38	51	89
Total Active Cases	37	42	79

Lenawee County Cumulative Cases				
	Lab-Confirmed	Probable	Total	Percentage of Cumulative Cases
Male	10,799	3,181	13,980	45%
Female	12,797	4,065	16,862	55%
Discontinued from isolation	23,228	7,171	30,337	98%
Deaths	331	33	364	1%
Total	23,596	7,246	30,842	

Lenawee County Active Cases			
	Lab-Confirmed	Probable	Total
New Cases This Week	26	32	58
Total Active Cases	28	25	53

Lenawee County Cumulative Cases				
	Lab-Confirmed	Probable	Total	Percentage of Cumulative Cases
Male	10,755	3,137	13,892	45%
Female	12,732	3,978	16,710	55%
Discontinued from isolation	23,128	7,057	30,185	99%
Deaths	331	33	364	1%
Total	23,487	7,115	30,602	

People Vaccinated	At Least One Dose	Completed Primary Series	Updated (Bivalent) Booster Dose
Total	56,207	53,609	9,228
% of Total Population	57.1%	54.5%	9.4%
Population ≥ 5 Years of Age	N/A	53,568	9,228
% of Population ≥ 5 Years of Age	N/A	57.4%	9.9%
Population ≥ 12 Years of Age	N/A	52,652	9,109
% of Population ≥ 12 Years of Age	N/A	61.6%	10.7%
Population ≥ 18 Years of Age	N/A	49,748	8,950
% of Population ≥ 18 Years of Age	N/A	63.8%	11.5%
Population ≥ 65 Years of Age	N/A	17,246	5,313
% of Population ≥ 65 Years of Age	N/A	90.1%	27.7%

Vaccinations in Lenawee County, Michigan

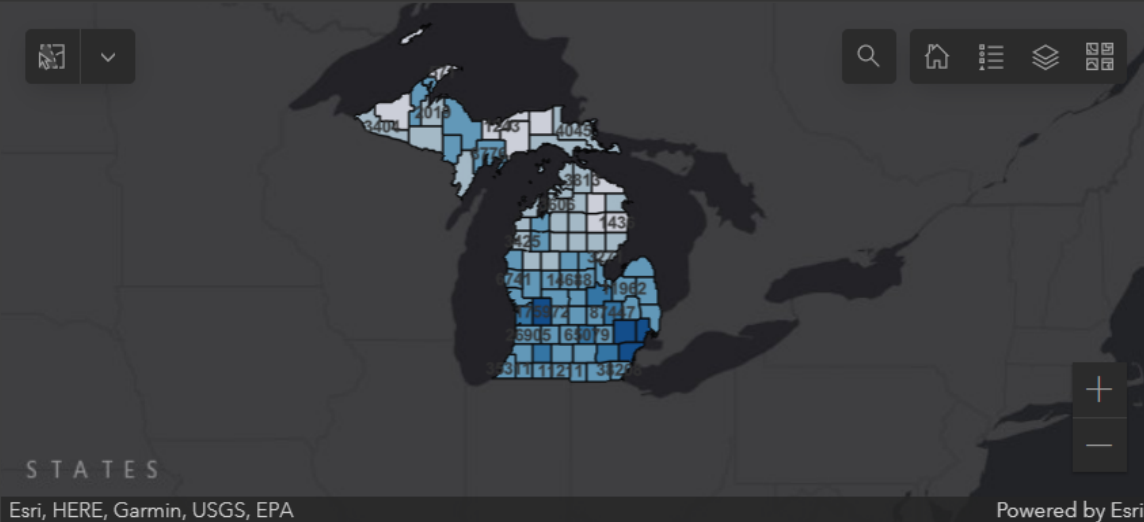
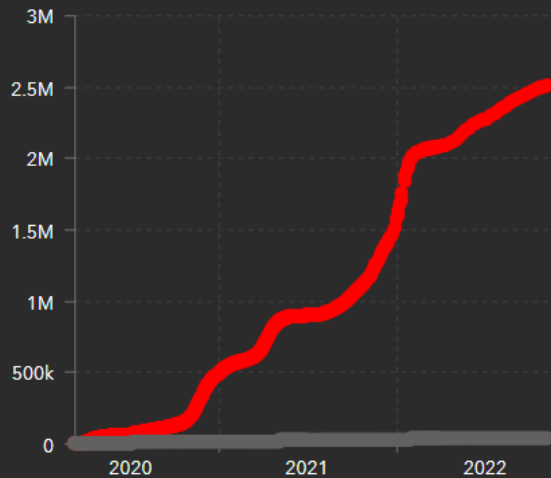
People Vaccinated	At Least One Dose	Completed Primary Series	Updated (Bivalent) Booster Dose
Total	56,169	53,586	
% of Total Population	57.1%	54.4%	
Population ≥ 5 Years of Age	N/A	53,546	9,028
% of Population ≥ 5 Years of Age	N/A	57.4%	9.7%
Population ≥ 12 Years of Age	N/A	52,630	8,912
% of Population ≥ 12 Years of Age	N/A	61.6%	10.4%
Population ≥ 18 Years of Age	N/A	49,726	8,753
% of Population ≥ 18 Years of Age	N/A	63.8%	11.2%
Population ≥ 65 Years of Age	N/A	17,236	5,199
% of Population ≥ 65 Years of Age	N/A	90%	27.2%

Michigan COVID-19 Summary

EFFECTIVE 11/10/2022 THIS DASHBOARD IS NO LONGER BEING UPDATED

Total Confirmed Cases
 ✳️ **2,507,475**
 Michigan

Cumulative Cases and Deaths

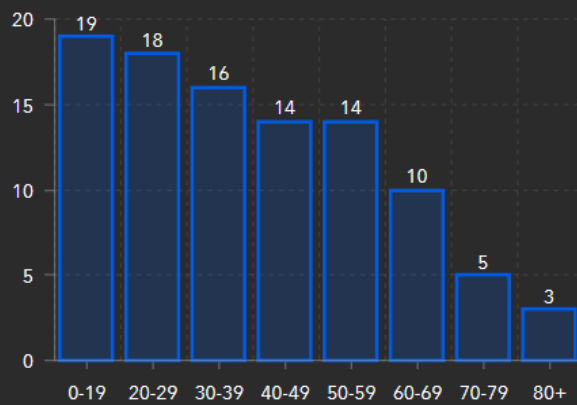


Cases by County

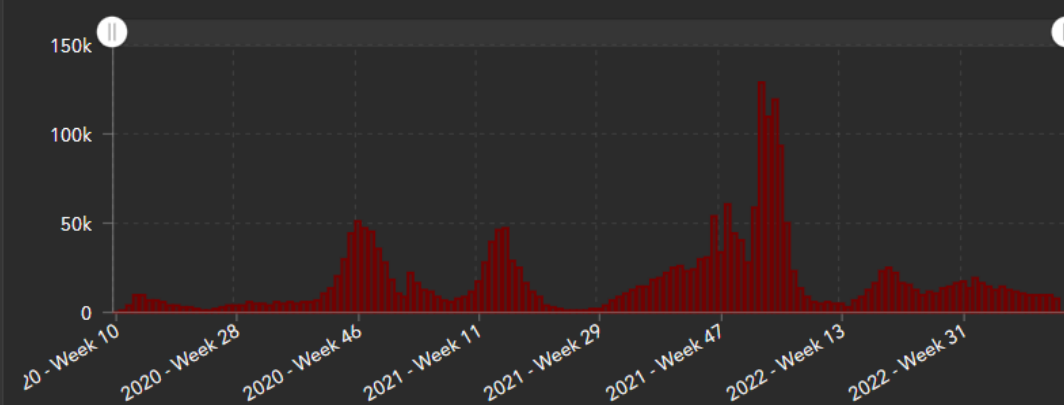
- 467,672 Cases
WAYNE County
- 319,646 Cases
OAKLAND County
- 254,882 Cases
MACOMB County
- 175,972 Cases
KENT County
- 87,910 Cases
WASHTENAW County

Deaths Michigan
 ❤️ **35,984**

COVID-19 Percentage of Cases by Age



Total COVID Cases per Week



Deaths per County

- Deaths: 7,953
WAYNE County
- Deaths: 3,988
MACOMB County
- Deaths: 3,854
OAKLAND County
- Deaths: 1,702
GENESEE County
- Deaths: 1,462
KENT County

Total Deaths

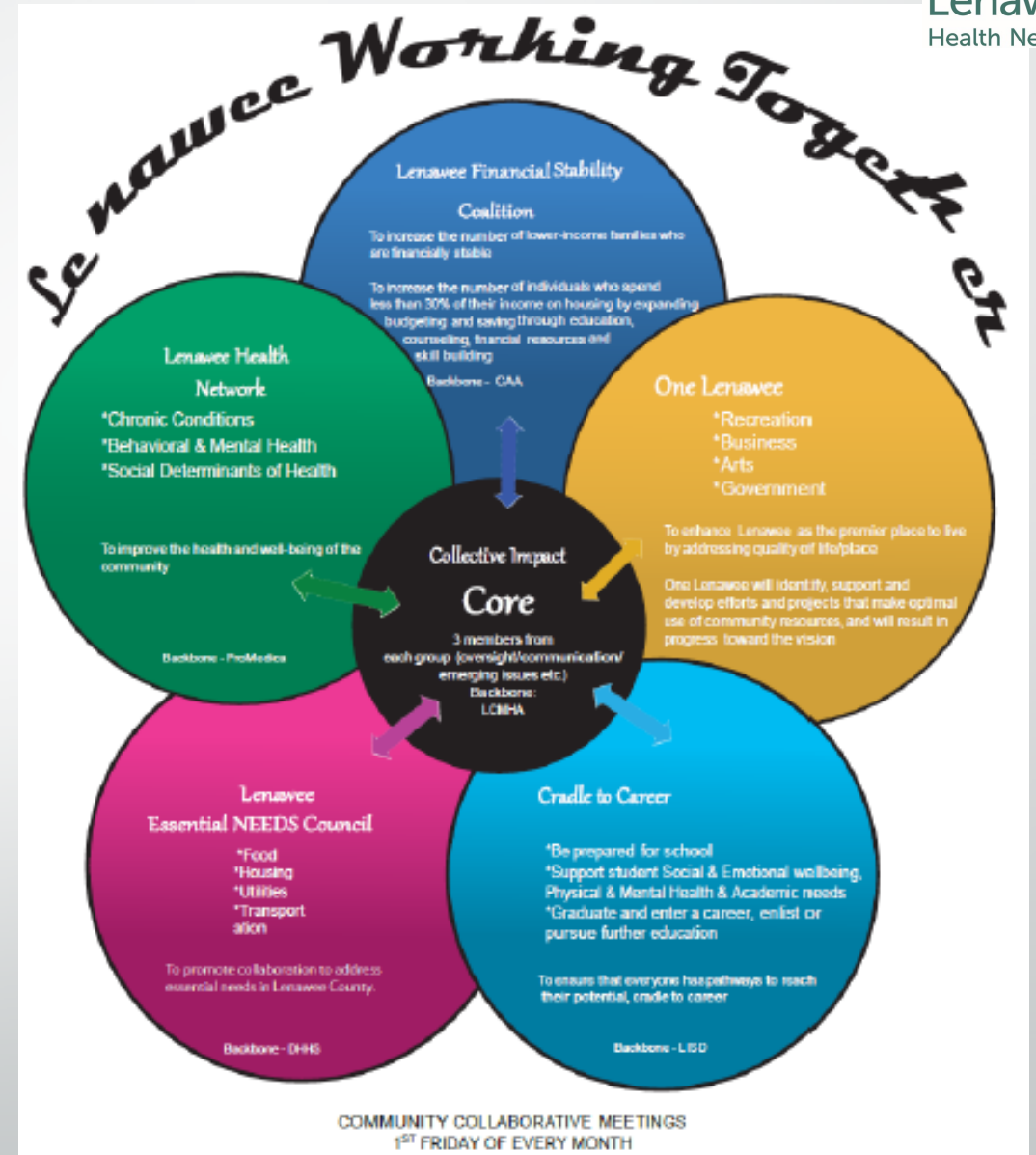
Last Update: 11/9/22 3:00 pm

Cases/Week Cases/Day Deaths/Day Active Cases

Michigan COVID-19 Sources

- Michigan.gov
 - <https://www.michigan.gov/coronavirus/>
- Lenawee County Health Department
 - <https://www.lenawee.mi.us/983/COVID-19---Vaccine>
 - <http://www.lenawee.mi.us/917/2019-Novel-Coronavirus>
 - <https://www.lenawee.mi.us/931/COVID-19-Case-Testing-Information>
 - <https://mistartmap.info/cdc-indicators?area=county%3Alenaweeinformation>

Collective Impact Core Trauma & Resilience



Guiding Principles of Trauma-Informed Care

(Adopted from Trauma-Informed Oregon's Guiding Principles of Trauma Informed Care)

1. **Safety:** People feel physical and psychologically safe.

- Catholic Charities shared they have made safety installations to improve safety for staff and consumers. Installations include cameras, enhanced parking lot lighting, operational adjustments to mitigate potential risk between client and staff.
- Department on Aging shared that they have a room dedicated to engaging directly and privately with people. This room cultivates a safe and comfortable environment for constituents.
- Community Mental Health shared that their organization recommended a system/policy change for health insurance to ensure newly hired employees in need of their insurance do not go without.
- Region 2 AAA shared that they added a layer of engagement with participants registering for workshops to ask if they are familiar with how to access and utilize the online platform which the workshop will take place. If people are not as familiar, they will work directly with them to orient the participant to the various functions, so they are comfortable the day of the workshop.
- MSU-Extension shared that they use the Voice by Choice methodology to ensure participants in workshops do not feel put on the spot to participate, answer questions and to engage. It cultivates safety and avoids putting participants in uncomfortable situations.

2. **Trustworthiness & Transparency:** Decisions are made with transparency and with the goal of building and maintaining trust among the people impacted.

- Jackie Bradley, Lenawee Community Mental Health Authority, shared their organization developed a new strategic plan which included staff sessions and several components along the process to gather staff feedback, recommendations and to implement solutions in response.
- MSU-Extension shared that the Continuum of Care has cultivated relationships to incorporate representation from individual(s) with lived experience in their meetings.

1. **Peer Support and Mutual Self-Help:** Opportunities are created for acceptance, understanding, and validation from people with shared experiences.

- At Interconnections Drop-In Center, everyone is peer support for one another. Several people were affected by Riverview Terrace closure. One person was experiencing homelessness and the staff and team provided support to the individual who was able to receive services to avoid homelessness.
- Department on Aging shared they are pivoting the vision of Day Break Programming to focus on peer support for older adults.
- The Human Services Building recently did an active shooter training. Following the training, Community Mental Health offered crisis debriefing.

Guiding Principles of Trauma-Informed Care

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- 4. Collaboration & Mutuality:** *Healing happens in relationship and in the meaningful sharing of power and decision making.*
 - *Laura Pipis shared that Lynne Punnett is leading an effort to secure housing for Riverview Terrace residents that have been displaced. In search of housing, Lynne included residents in the task force to explore suitable options and to contribute lived experience and perspective to the decision-making process.*
 - *Martha York shared that the Matter of Balance program includes a section within the 4th session that dedicates time for participants to shared what they have gone through with their group. Participants have shared that it has helped to heal from trauma's they have experienced.*
 - *Cari Rebottaro shared that working with Caregivers frequently encounters children that may have decision making power on behalf of their parent(s) but continue to include their parent(s) in the decision-making process so they are informed, empowered and can avoid trauma.*

- 5. Empowerment, Voice & Choice:** *Every person's experience is unique and requires an individualized approach. This builds on what individuals and communities have to offer, rather than responding to received deficits.*
 - *Marth York shared that Region 2 Area Agency on Aging is hosting a Dementia Minds event where people with dementia are having a chance to share their stories and give voice to their experience of living with dementia. The aim is to dispel the "tragedy narrative" that many stigmatize dementia as being, and instead show how they still have things to contribute in our society. Being part of this Dementia Minds group and hosting a public event that shares their stories gives them a sense of purpose as they work to educate the greater community on how to value and include people with dementia."*
 - *Laura Schultz Pipis shared that during the community's response in supporting residents at Riverview Terrace, DHHS, Department on Aging, Share the Warmth and other organizations dedicated resources to ensure all residents were connected to case worker that could support their individual needs. The team also formed a taskforce and were able to secure resident participation to ensure their voice was at the table and part of shaping the decisions and supports provided.*

- 6. Cultural, Historical, & Gender Issues:** *The Community actively overcomes cultural stereotypes and biases, is culturally responsive, leverages the healing value of traditional cultural connections, and recognizes and addresses historical trauma.*
 - *MSU-Extension shared that their organization collects demographic, race/ethnicity, gender, and similar information as part of participants registering for their programs. They identified opportunity to update these questions to ensure their processes are inclusive of culture, history, and gender. This was shared as an example of how organizations embrace culture, history, and gender inclusivity in their operations.*
 - *Lenawee Community Mental Health shared that their organization changed signage in their bathrooms to be more gender inclusive. There was previous signage that stated not to flush feminine products in the toilets. This signage has been updated to state not to flush any products other than toilet paper. This is an example of their organization cultivating inclusivity into their physical environment.*

Guiding Principles of Trauma-Informed Care

(Adopted from Trauma-Informed Oregon's Guiding Principles of Trauma Informed Care)

- Temperature Check Document Review:
 - Please contribute your feedback -> <https://forms.gle/YuoAYxbNm8gMqXfL7>



March Spotlight Presentations

- Zonta Club of Lenawee: Amanda Davis
- YMCA of Lenawee: Beth Deakins

March Advocacy

- National Women's History Month
- National Nutrition Month
 - 2025-2030 Dietary Guidelines – Committee Meeting
- National Colorectal Cancer Month
- National Kidney Month
- National Social Work Month



April Advocacy

- [National Minority Health Month](#)
- [National Alcohol Awareness Month](#)
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- [National Parkinson's Awareness Month](#)
- [National Stress Awareness Month](#)



Agency Updates & Discussion



Thank you for joining our meeting today!

Next meeting April 13, 2023

8:00 AM – 9:00 AM

Via – Zoom

[LHN Google Drive](#)