



# 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.

June 08, 2023

# Today's Agenda

► Minutes – May 11, 2023

## 8:00 – 8:05 Call to Order

- Purpose/Mission
- Welcome & Introductions
- Inspiration & Appreciation

## 8:05 – 8:20 Leadership Updates

- Health Trends & Updates – Lenawee County Health Dept.
- Collective Impact Core: Trauma & Resilience

## 8:20 – 8:35 CHIP Strategy & Collaborations

- Spotlight Presentation(s):
- Community Health Improvement Plan (CHIP) Refresher

## 8:35 - 8:55 Emerging Issues

- Webinar(s)/Resource(s):
  - [Trauma and COVID-19: Addressing Mental Health Among Racial/Ethnic Minority Populations](#)
  - [Cultural Competence for Service Providers](#)
  -
- June:
  - [LGBTQ+ Pride Month](#)
  - [Alzheimer's & Brain Awareness Month](#)
  - [Men's Health Month](#)
  - [PTSD Awareness Month](#)
  - [Family Health & Fitness Day – June 10, 2023](#)
  -
- July:
  - [National Minority Mental Health Awareness Month](#)
  - [Lenawee County Mental Health Resource Guide](#)
  -
- Agency Updates
- Open Discussion

## 9:00 Meeting Adjourned

- *Next Full LHN Meeting **July 13, 2023**, at 8:00 a.m. via Zoom.*
- *Next LHN Leadership Meeting **TBD**.*

# Inspiration & Appreciation

- ▶ “Equity is leaving the door open for anyone who has the means to approach it; equity is ensuring there is a pathway to that door for those who need it.” - Lori Lightfood
- ▶ Appreciation:
- ▶ Please send any submissions recognizing our partners or residents for their great work to [Frank.Nagle@ProMedica.org](mailto:Frank.Nagle@ProMedica.org) for a feature in our upcoming meetings.
- ▶ Submit by the 4<sup>th</sup> Friday of each month.

# LHN LEADERSHIP

Monthly Updates

# Community Health Updates

Lenawee County Health Department



LENAWEE COUNTY  
HEALTH DEPARTMENT

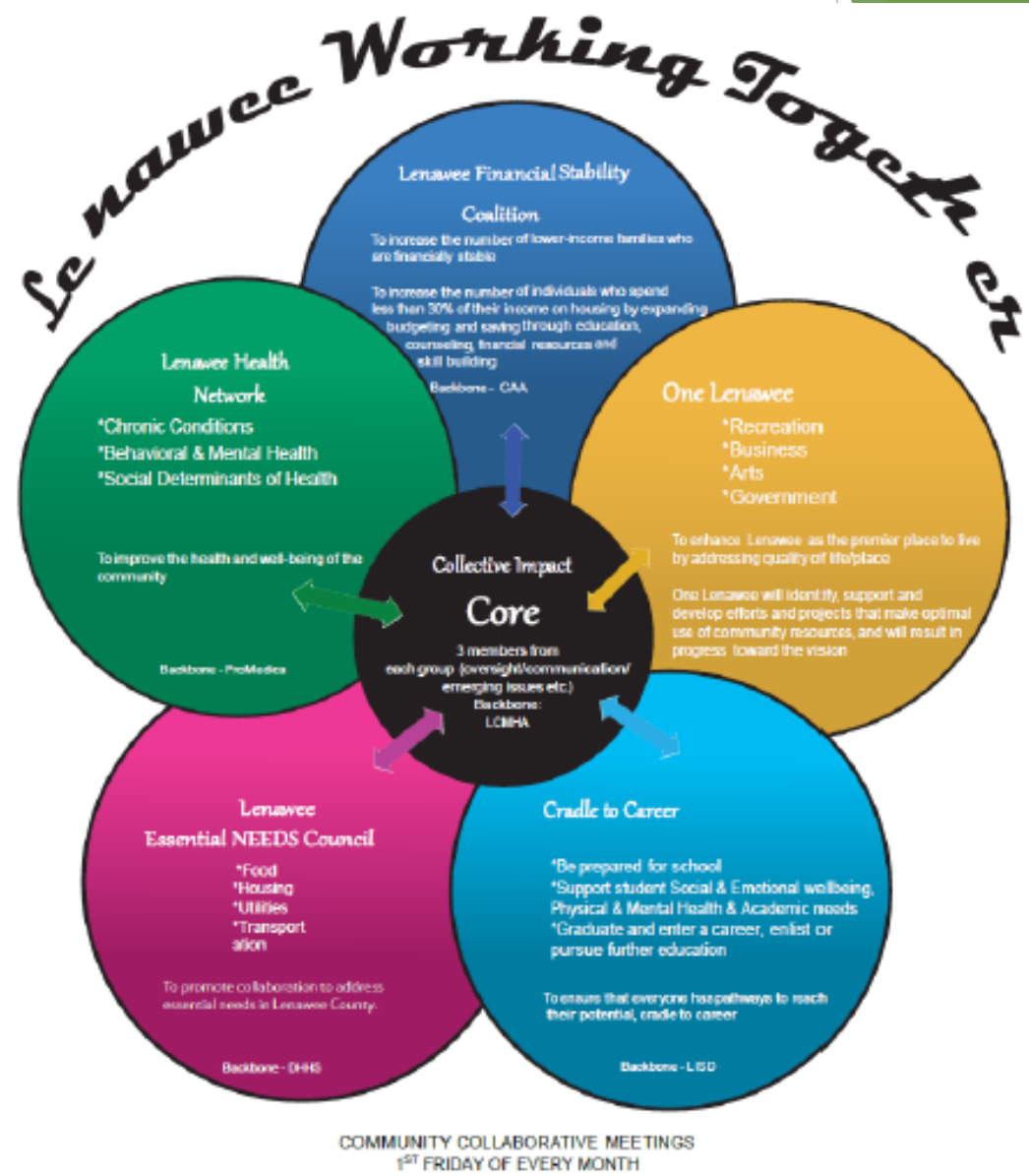
# Webinar Opportunities

- [Trauma and COVID-19: Addressing Mental Health Among Racial/Ethnic Minority Populations](#)
- [Cultural Competence for Service Providers](#)



The screenshot shows a video player interface. On the left, there are two small video thumbnails: the top one shows a man with a headset, and the bottom one shows a woman. The main video area displays a woman's hands holding a sign that says "CONVERSATIONS: Interpreting & Translating". To the right of the video, the title "Cultural Competence" is prominently displayed in large black font, with "Service Providers" underneath in a smaller font. Below the title, it says "Presented by: Marta Menendez" and "Date: 24/11/20". At the bottom right, there is a logo for "POWERED BY All Graduates" featuring two stylized figures. The video player controls at the bottom include a play button, a progress bar showing "0:04 / 1:36:11", and icons for volume, closed captions, settings, and full screen.

# 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

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

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 share 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.*

# Lenawee Health Network (6 responses)

## Trauma Aware

Recognition & Awareness	
1	At least one work group member understands the need for TIC and is a champion
1	A group of members understand the need for TIC and are champions
0	A majority of members understand and can speak about the needs for TIC
0.67	Work group uses data to validate the need for TIC

## Trauma Sensitive

Foundational Knowledge		Work Group Readiness		Process & Infrastructure	
1	A few work group members have attended foundational training about TIC	0.42	Work group has stable funding and a low level of chaos	0.33	A dedicated group within the work group is identified as TIC change agents
1	Most members have attended foundational training about TIC	1.00	Work group leadership is committed to TIC	0	TIC change agents include people with lived experience in the work group's priority area
0	Most members have knowledge about TIC	1.00	A majority of work group members are committed to TIC	0.33	A process of communication and info sharing is established
1.00	TIC knowledge is exchanged among members as part of the work group culture	0.50	Resources are directed to TIC efforts	0.33	TIC change agents are able to infuse TIC knowledge to other members
1.00	A group of members can apply TIC knowledge and skills	1.00	TIC is a work group priority	0	TIC change agents are empowered to call into question non-trauma informed policy and practice, including power structures
		0.67	Work group leaders model TIC		
		0.50	Work group leaders embody TIC		

## Trauma Responsive

Gather Information		Prioritize & Create Plan	
0.33	TIC Change Agents use a process for gathering info about TIC opportunities	0.17	TIC change agents have developed a method to prioritize TIC opportunities
0.17	TIC Change Agents have reviewed policies, practices, and environment with a trauma lens	0	TIC change agents have created a work plan
0.75	The work group has a process for input and feedback from members and people impacted	0	TIC change agents monitor the work plan and use it to feed implementation efforts
0.67	The work group uses other data to identify opportunities for TIC		

## Trauma Informed

Implement & Monitor		Adopt Policy & Practice	
0.50	A change to policy, practice, or environment has been initiated	0.33	A change to policy, practice, or environment has been adopted
0.33	The change is reviewed and monitored	0.17	A change to policy, practice, or environment has been institutionalized
0.33	Most changes to policy, practice, or environment have been initiated	0.17	Most changes to policy, practice, or environment have been institutionalized

# Lenawee Health Network (TOTAL - 11 responses)

## Trauma Aware

Recognition & Awareness	
1	At least one work group member understands the need for TIC and is a champion
1	A group of members understand the need for TIC and are champions
0	A majority of members understand and can speak about the needs for TIC
0.64	Work group uses data to validate the need for TIC

## Trauma Sensitive

Foundational Knowledge		Work Group Readiness		Process & Infrastructure	
1	A few work group members have attended foundational training about TIC	0.45	Work group has stable funding and a low level of chaos	0.36	A dedicated group within the work group is identified as TIC change agents
1	Most members have attended foundational training about TIC	0.91	Work group leadership is committed to TIC	0.09	TIC change agents include people with lived experience in the work group's priority area
0	Most members have knowledge about TIC	0.91	A majority of work group members are committed to TIC	0.36	A process of communication and info sharing is established
0.91	TIC knowledge is exchanged among members as part of the work group culture	0.45	Resources are directed to TIC efforts	0.36	TIC change agents are able to infuse TIC knowledge to other members
0.73	A group of members can apply TIC knowledge and skills	0.91	TIC is a work group priority	0.09	TIC change agents are empowered to call into question non-trauma informed policy and practice, including power structures
		0.73	Work group leaders model TIC		
		0.64	Work group leaders embody TIC		

## Trauma Responsive

Gather Information		Prioritize & Create Plan	
0.36	TIC Change Agents use a process for gathering info about TIC opportunities	0.18	TIC change agents have developed a method to prioritize TIC opportunities
0.18	TIC Change Agents have reviewed policies, practices, and environment with a trauma lens	0.09	TIC change agents have created a work plan
0.82	The work group has a process for input and feedback from members and people impacted	0.09	TIC change agents monitor the work plan and use it to feed implementation efforts
0.64	The work group uses other data to identify opportunities for TIC		

## Trauma Informed

Implement & Monitor		Adopt Policy & Practice	
0.64	A change to policy, practice, or environment has been initiated	0.36	A change to policy, practice, or environment has been adopted
0.36	The change is reviewed and monitored	0.27	A change to policy, practice, or environment has been institutionalized
0.45	Most changes to policy, practice, or environment have been initiated	0.27	Most changes to policy, practice, or environment have been institutionalized

• Darker colors = more positive responses

# Spotlight Presentation



# LHN Community Health Improvement Plan (CHIP)

## LHN Google Drive -> 4. CHIP Folder

### **Lenawee Health Network** 2021-2023 Community Health Improvement Plan Final: 12/09/2021

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

**PURPOSE:** The LHN is a group of community organizations working collaboratively to improve the quality of health in our community.

- All Lenawee statistics are based on the Health Assessment conducted October – December of 2011, 2014, 2017 and 2020. The Michigan Profile for Healthy Youth (MiPHY) assessment data was collected in 2019 at area middle schools and high schools, to provide insight into youth issues.
- The goals, Strategies and Objectives of this plan encourage the utilization of evidence-based approaches empowering residents to achieve their health goals.
- Information for services referenced in this plan is accessible through 2-1-1, Lenawee Community Foundation Resource Guide and ProMedica Lenawee County Resource Guide

#### **LHN Collaborative Commitment:**

- Address health needs of residents through evidence-base, place-base, and mobilized initiatives.
- Enhance media attention and public recognition of health priorities and issues.
- Listen to youth, educators, parents, and community.
- Work collectively to achieve the shared vision of health and wellbeing in Lenawee County.
- Develop strategy to identify and address the needs of disproportionately affected populations.
- Pursue and secure collaborative grant funding to implement programming, as needed.
- Share emerging issues and potential opportunities with members and community networks.

**PLAN:** The plan includes four components of focus:

1. Leadership
2. Chronic Conditions
3. Behavioral Health
4. Determinants of Health

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



# June Advocacy

- Alzheimer's & Brain Awareness Month
- Men's Health Month
- PTSD Awareness Month
- Family Health & Fitness Day – June 10, 2023



# July Advocacy

- [National Minority Mental Health Awareness Month](#)
- [Lenawee County Mental Health Resource Guide](#)



# Agency Updates & Discussion





# Thank you for joining our meeting today!

Next meeting July 13, 2023  
8:00 AM - 9:00 AM  
TBD

[LHN Google Drive](#)