2024
Social Determinants of Health Summit

January 23-26, 2024

CONFERENCE **PROGRAM**

MDHHS Michigan Department of Health & Human Services | Social Determinants of Health

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Attendees are not required to attend one track for the entire day; they can mix and match sessions from different tracks into their agendas. This provides the ultimate opportunity for attendees to customize their experience.

DAY 1 : Tuesday, January 23

Joneigh Khaldun, MD, MPH, FACEP
Vice President and Chief Health Equity Officer, CVS Health

9:10 – 10:00 a.m. : Opening Keynote

Partnerships that Create Equitable Access to Health Care

Dr. Khaldun will talk about her role in addressing social drivers of health through her previous leadership within the Michigan Department of Health and Human Services (MDHHS) and, currently, as Chief Health Equity Officer of CVS Health.

10:15 – 11:15 a.m. : Plenary

Health Equity Disparities and Closing the Gap

State public health leaders and policymakers will discuss a focused approach to tackle health disparities by addressing the underlying causes of disparities through upstream actions and offering solutions through midstream interventions.

Renée Branch Canady, PhD, MPA
CEO, Michigan Public Health Institute

Poppy Sias-Hernandez
Executive Director, Office of Global Michigan; Chief Equity & Inclusion Officer, Governor's Office

Thomas F. Stallworth III
Senior Advisor for Legislative & External Affairs, Executive Office of the Governor

Ponsella Hardaway
Director, MOSES

Jim Lee
Senior Vice President of Data Policy and Analytics, Michigan Health & Hospital Association

DAY 1 : Tuesday, January 23

BREAKOUT SESSION TRACKS

Track 1: ***Collecting Data in Communities for Programs that Address Social Determinants of Health (SDOH)***
This track will feature sessions that focus on collecting and using data to benefit communities. The presentations focus less on one specific program or community and more on best practices for data collection and how to use the data to inform program work.
(Sessions 101, 201 & 301)

Track 2: ***Integrating SDOH in Traditional Health Care Settings***
This track will focus on innovative programs and practices that health care institutions can employ within their systems to improve care for patients with complex social determinants of health.
(Sessions 102, 202 & 302)

Track 3: ***Food Sources and SDOH***
This track will focus on how food access intersects with overall health and how communities are innovating to improve access and health for their residents.
(Sessions 103, 203 & 303)

Track 4: ***Improving Access to Systems to Affect SDOH***
Systems that have been in place to improve the health of Michigan residents are not always easily accessible to all. This track's sessions focus on improve access to those systems. *(Sessions 104, 204 & 304)*

Track 5: ***Innovative Collaborations in the Work to Address SDOH***
This track focuses on communities that have innovated unique collaborations that work to improve health on multiple levels for residents. *(Sessions 105, 205 & 305)*

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (100)

Erin Barrett, MPH, MCHES
Public Health Planning Coordinator, District Health Department #10

Emily Llore, MPH
Community Health Planner & Director of Community Health Assessment and Improvement Planning, Health Dept of NW Mi & Northern Michigan CHIR

101: Closing the Gap: Empowering Residents to Lead Change

In 2022, the Northwest Michigan Community Health Innovation Region (CHIR) Learning Community sponsored the Community Empowerment Project (CEP), a pilot project designed to empower residents to advance the Northern Michigan Community Health Innovation Region's vision of healthy people in equitable communities. The CEP provides a tangible, local example of community partners engaging in shared learning and co-creation to close the gap between traditional decision-makers and those experiencing the problem. This presentation describes the motivations behind the CEP, the project, and how it centered equitable grantmaking practices. It also shares the stories of four grant recipients and offers recommendations, based on lessons learned, to other institutions interested in funding resident-led, community-based projects.

DAY 1 : Tuesday, January 23

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (100), *continued*

102: Strategic Implementation of Social Needs Coordinators in an Independent Physician Organization

Professional Medical Corporation (PMC) is an independent physician organization located in Flint and the surrounding community. PMC is comprised of over 400 primary care and specialist physicians serving over 100,000 community members. Strategic thinking, planning, and execution was required for a broad approach to supporting patients with their social determinants of health needs due to each independent practice having different operations, electronic health records, practice support, and patient needs. PMC implemented the use of "Social Needs Coordinators" who have built relationships to best support patients with their needs and coordinate services and communication. This ensures patients receive their needed care, while minimizing cost and technological burdens to the medical practice.

Karly Saez, MS, RD
Operations Manager, Professional Medical Corporation

103: Feeding MI Families: Amplifying the Lived Experience of Food Insecurity in Michigan

Over the past two years, Feeding MI Families has documented the food access and food assistance experiences of over 1,400 rural and urban Michigan families with the goal of identifying critical and creative ways to improve food security across our state. In this session, members of our academic-community partnership will share our project approaches, findings, and parent-driven recommendations for change. After this session, attendees will be able to explain the value of including and elevating individuals with lived experience in improving food policies and programs.

Kate Bauer, PhD
Associate Professor, University of Michigan

Jeneen Ali, PhD
Research Area Specialist/Project Coordinator, University of Michigan

Tommara Grice
Early Childhood Advocate & Project Assistant, Feeding MI Families

Glori Crowell
Co-President, Do a Little Good

DAY 1 : Tuesday, January 23

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (100), *continued*

Jamila McLean, MPH
Senior Health Care Policy Manager, Benefits Data Trust

Katherine M. Commey, MPH
Manager Behavioral and Physical Health and Aging Services Administration, MDHHS

104: Strengthening Medicaid Managed Care Coordination to Improve Access to Public Benefits

Cross-sector partnerships are key to the success of benefit enrollment interventions. Benefits Data Trust (BDT) in collaboration with MDHHS conducted a 12-month discovery and design initiative to identify opportunities to increase the enrollment of Medicaid beneficiaries into additional public benefits such as the Food Assistance Program (FAP). BDT surveyed 16 Michigan Medicaid health plans and integrated care organizations (ICOs) to better understand how they support benefits access among their members and consider SDOH when developing strategies and initiatives. BDT will share results of this discovery and design project along with policy and process recommendations that the state in collaboration with MCOs, ICOs, CBOs and additional stakeholders, can undertake to advance to connect Medicaid beneficiaries to additional public benefits.

105: The Benefit of Transdisciplinary Partnerships to Drive Social Equity

This presentation will showcase the value of transdisciplinary partnerships to address social determinants of health, with an emphasis on alleviating transportation as a barrier to health. Attendees will understand how transportation, or lack thereof, is a social determinant of health, and how barriers to transportation can lead to negative health impacts. Presenters will showcase the positive impact of transdisciplinary partnerships across multiple sectors through increased positive well-being as self-reported by participants of the Mobility Wallet Program in Michigan. Attendees will be able to identify at least three opportunities to create transdisciplinary partnerships that further their mission in their own communities.

Rebecca Yaciuk
Community Development Manager, Feonix-Mobility Rising

Tenia Denard, BA
Community Development Manager, Michigan Catch-a-Ride, Feonix-Mobility Rising

DAY 1 : Tuesday, January 23

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (200)

Samantha Iovan, MPH
Senior Project Manager, Center for Health and Research Transfomration

Nailah Henry, MPH
Health Policy Analyst, Center for Health and Research Transformation

201: Unlocking Potential: Understanding and Addressing Health Disparities Through EMS Data

The real-time availability of Emergency Medical Services (EMS) data about the health status of patients could be vital to enhancing public health surveillance, strengthening disaster and pandemic preparedness and coordination of response efforts, and evaluating the effectiveness of public health interventions. Center for Health and Research Transformation identified concerning trends related to the quality of health equity-related demographic data elements in EMS, such as race, ethnicity, sex, and gender identity. This presentation will discuss the potential of EMS data to identify and address health and racial disparities in real-time at the community level.

202: Doula Access for All: How Doulas Influence SDOH Outcomes

This session discusses how doulas can positively affect SDOH outcomes and reduce disparities in infant mortality among babies of color. Partnerships with multiple community partners will be discussed and how these partnerships can be collaborative and not duplicate services given. Attendees will have increased knowledge to describe doula care as a non-medical intervention to improve SDOH outcomes. Attendees can discuss doula relationships with the community to influence positive SDOH results. Attendees will also be able to list methods doulas use to help their clients to build positive relationships.

Hillery Ross-Furse, BS, CLE, CHW
Community Health Worker Lead, Trinity Health/The Health Project

DAY 1 : Tuesday, January 23

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (200), *continued*

Amarachi Wachuku, MPH
Project Coordinator,
Greater Flint Health Coalition

Heatherlun Uphold, PhD
Assistant Professor,
Michigan State University

Karren Campbell, PhD
Faculty Research Specialist,
Michigan State University

203: "We Need to Eat Too": Strengthening Food Systems to Combat Health Inequities in Flint

This presentation will discuss findings from a CDC-funded program entitled Racial and Ethnic Approaches to Community Health (REACH), which supports increased access to healthy food among low-income, underserved communities. This 2-year implementation occurred in Flint, Michigan which has large populations of racial and ethnic minorities with chronically insufficient availability of healthy foods, high poverty rates, and high rates of chronic disease and associated morbidities. The featured REACH activities in Flint include the set up or improvement of static local food pantries and mobile food markets (for both pop-up food distributions and new enrollments in state and federal food benefits programs such as Supplemental Nutrition Assistance Program/SNAP and Double Up Food Bucks/DUFB). This session will include insights into challenges encountered, lessons learned, promising practices and sustainability.

Max Glick
Director of Program Development,
Lighthouse MI

204: Unrestricted Cash Assistance and Health Outcomes

This session seeks to answer the question: How can the development, implementation, and evaluation of a Guaranteed Income (GI) Program support the health and well-being priorities of caregivers of children (ages 0-18 years) experiencing housing, food, or financial instability? Presenters will provide information on the history, impact, future and state of cash assistance programs as learned from guaranteed income and universal basic income pilots and programs throughout the United States. The presentation will also include preliminary data gathered in a series of focus groups and community conversations with Lighthouse patrons who are caregivers of youth (ages 0-18 years) in Oakland County, to inform the development, implementation, and evaluation of a GI Program.

Rebeccah Sokol, MSPH, PhD
Assistant Professor, University of Michigan, School of Social Work

Stephanie Hall, MSW
Research and Advocacy Manager,
Area Agency on Aging 1-B

DAY 1 : Tuesday, January 23

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (200), *continued*

205: Return Home Safe Program: A Health and Housing Collaboration Leveraging Closed-Loop Referrals to Prevent Falls

Housing is an important SDOH and poor housing quality puts occupants at risk of falls which could result in an ED visit or lengthy hospital admission. This presentation will describe the Return Home Safe (RHS) Program, which is a partnership among Henry Ford Health, Habitat for Humanity Detroit (HFHD), and Baldwin Society Supporting Older Adults (BSSOA), to ensure that patients who are discharged from medical care return home to a safe environment. RHS specifically focuses on fall prevention and aims to promote aging in place and reduce falls, injuries, emergency department visits, hospital readmissions, and cost of care by providing minor home safety repairs and modifications and private duty aide services for low-income older adults in eastern Wayne County. The presentation will detail the closed-loop referral mechanism embedded within HFH's electronic medical record system. This patient-centered program represents best practices in leveraging community partner strengths and a closed-loop referral mechanism to address housing as a SDOH.

Dana Parke, MA
Program Manager - Clinical & Social Health Integration, Henry Ford Health

Stephanie Osterland, MA
CEO, Habitat for Humanity Detroit

Britney Johnson, MSW
Habitat for Humanity Detroit

DAY 1 : Tuesday, January 23

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (300)

Amy Drahota, PhD
Associate Professor,
Michigan State University

Karren Campbell, PhD
Faculty Research Specialist,
Michigan State University

Blair Warren, MA
Research Assistant,
Michigan State University

301: Using the Flint Health Equity Report Card (HERC) for Substance Use Disorders as a Model for Other Health Indicators and Locations

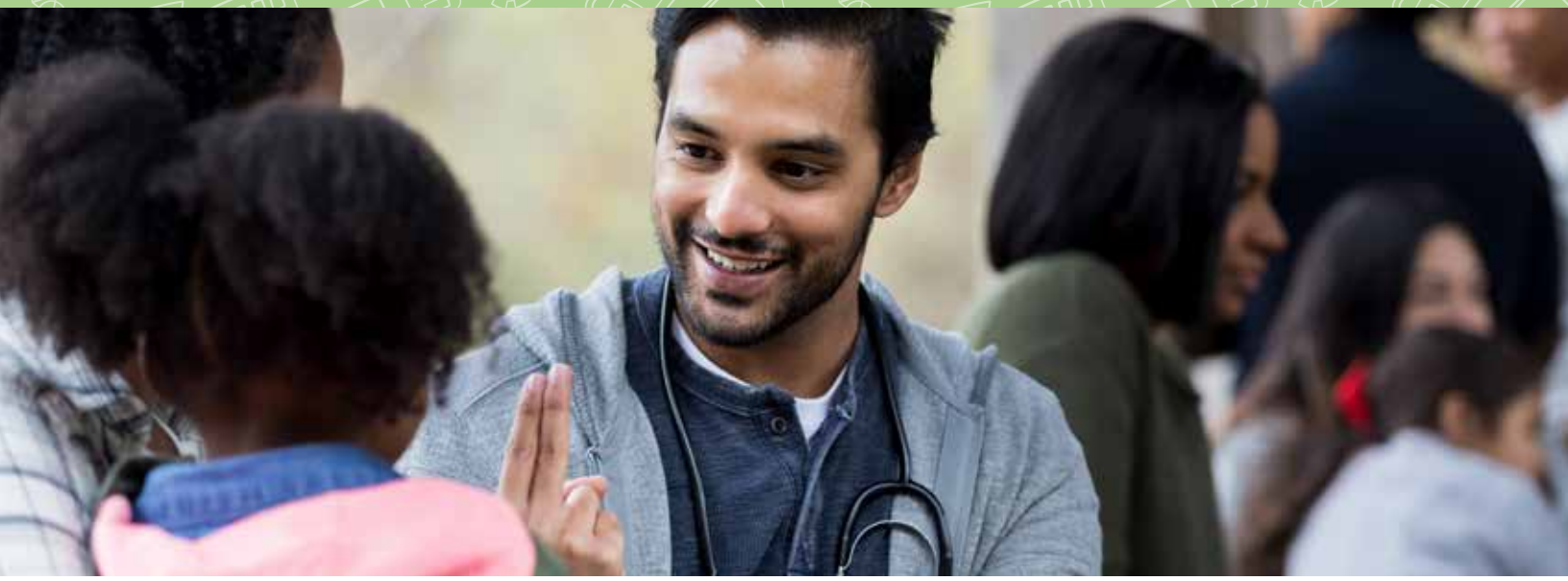
Port Huron is significantly impacted by income disparity, a lack of available behavioral health care and treatment, and higher than average medical provider-to-patient ratios. The Flint and Genesee County Health Equity Report Card (HERC), which began in 2022, uses uses a report card format to help researchers, public health practitioners, community workers, and policy makers more easily operationalize action steps to address systemic causes of structural inequities. This presentation demonstrates the success of the first attempt to implement the HERC model in a different location (Port Huron), population density (rural) and demographic (primarily white), and for a specific health outcome (substance use disorders).

Kenneth Heuvelman, LLPC, CAADC, CCS
Clinical Coordinator,
Flint Odyssey House, Inc

Jennifer L. Gerow, LMSW, CADC,CCS
Flint Odyssey House Inc

Kristen Young, MA, CAADC
Flint Odyssey House Inc

Heatherlun Uphold, PhD
Assistant Professor,
Michigan State University



DAY 1 : Tuesday, January 23

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (300), *continued*

302: Integrating Community Paramedicine into Regional Health Collaboratives to Enhance Access and Quality of Care

MI Community Care (MiCC) is a Regional Health Collaborative serving Livingston and Washtenaw counties that operates a community care coordination program to identify individuals with complex medical and social needs and provide care coordination and complex case management services. MiCC includes local hospitals, a federally qualified health center, community mental health agencies, and several community organizations with expertise in addressing social determinants of health needs such as housing, food, and transportation. Over the last few years, MiCC has been focusing on integrating community-based providers, such as community health workers and community paramedics. Community Paramedicine (CP) is a care model that utilizes paramedics with supplemental training to address non-emergent medical and social needs in the patient's home, rather than transporting patients to hospital emergency departments. This presentation will include an overview of two models, a description of the CP role within MiCC, and an examination of case studies that demonstrate the importance of place-based care in addressing complex needs.

Ayse Buyuktur, PhD, MPH
Program Manager,
Center for Health and
Research Transformation

Samantha Iovan, MPH
Senior Project Manager,
Center for Health and
Research Transfomration

Jason Fair, MA, EMT-P
Project Manager,
Emergent Health Partners

DAY 1 : Tuesday, January 23

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (300), *continued*

Lindsay Pielack
Co-Director, Keep Growing Detroit

303: Rooted in Detroit Families: Strategies to Promote Health and Well-Being Through Urban Agriculture

Food is an integral theme that spans across initiatives to promote outcomes related to health and well-being for families. This presentation will introduce Keep Growing Detroit's core programs, including the Garden Resource Program and Grown in Detroit, and uplift how we work in collaboration across the early childhood landscape to connect partners and families to Detroit's thriving good food ecosystem. These efforts are rooted in decades of community-led efforts and evidence-based outcomes and most importantly, center racial equity as they focus on health and wellness outcomes initiated by and for Detroit's families.

304: Improving Access to Affordable and Culturally Competent Health Care Through Health and Technology

Refugees, migrants, and asylum-seekers remain among the most vulnerable groups worldwide facing inadequate access to health services with several physical and mental health problems. These populations are disproportionately affected by TB, hepatitis B virus (HBV) infection, HIV infection, and some tropical or parasitic infections (e.g. malaria and Chagas disease) (WHO, 2018). Lack of medical insurance, language barriers, poor health education, and problems in accessing culturally competent (migrant-friendly) health care are core reasons behind limited access to affordable health care among migrant populations (WHO, 2018). This session will provide an overview of ImmiHealth, a health-technology platform that connects migrants, refugees, asylum seekers, and people who are new in the country to culturally competent, free/affordable health care, including but not limited to Direct Primary Care (D.P.C.) centers, Federally Qualified Health Centers (F.Q.H.C.), and free health clinics.

Tirth Patel, BSE
Chief Executive Officer and Founder, ImmiHealth

Sania Srivastava
Public Health Student, University of Michigan

Marco Costanza, BS
MD Candidate, University of Michigan Medical School

DAY 1 : Tuesday, January 23

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (300), *continued*

Tameka Citchen-Spruce
Director of LEAD-IN, Michigan Disability Rights Coalition

Michelle A. Meade, PhD
Professor Director, U-M Center for Disability Health and Wellness, University of Michigan/Michigan Medicine

305: Building Public-Private Partnerships to Address Health and Care Disparities Among Individuals with Disabilities

One in four individuals in the United States, or about 61 million people, have a disability which impacts their health and functioning. In Michigan, these numbers are closer to one in three adults. People with disabilities have higher rates of preventative chronic conditions, poorer health outcomes, and less access to care than individuals without disabilities. Across disability groups, social determinants of health play a role in both health behaviors and health outcomes, with people of color consistently experiencing the worst outcomes. Too often, individuals with disabilities – and particularly people from marginalized communities – are not counted and their needs remain unaddressed.

After attending this session, participants will be able to discuss the lack of identification of disability status impacts effective health care access and treatment as well as health outcomes for individuals with disabilities. Participants will also be able to understand the importance of health care organizations working in partnership with community members and organizations. In addition, this presentation will identify three responsibilities of health care systems in the creating accessible environments and processes.

3:30 – 4:30 p.m. : Closing Plenary

Embracing the BOLD: The Future of Public Health and the Social Determinants

Understanding and addressing the social determinants of health allows public health professionals to implement preventive measures and interventions that can improve health outcomes and reduce the burden of diseases at a population level. In this session, participants will explore the dynamic intersection of public health and social determinants of health, unraveling the factors that underpin health disparities, and charting a visionary path forward.

Dr. James Bell III, MSW
Chief of Staff/Heath Equity Lead, MDHHS

DAY 2 : Wednesday, January 24

Dr. Jalonne L. White-Newsome
Federal Chief Environmental Justice Officer, The White House Council on Environmental Quality

9:00 – 9:30 a.m. : Opening Keynote

Environmental Justice and the Social Drivers of Health

This keynote will discuss environmental justice and show the connection with social drivers of health. This will be an overview presentation that includes the Justice40 Initiative. Justice40 is the initiative to make 40% of the overall benefits of certain federal investments flow to disadvantaged communities that are marginalized, underserved, and overburdened by pollution. This investment will help confront decades of underinvestment in disadvantaged communities and bring critical resources to communities that have been overburdened by legacy pollution and environmental hazards.

BREAKOUT SESSION TRACKS

Track 1: ***Sustaining Collaborations in the Work to Address SDOH***
These sessions provide focus on additional supports that communities can learn from or utilize to make their collaborations more sustainable, ensuring that their community members are receiving support and care they can depend on. *(Sessions 401, 501 & 601)*

Track 2: ***Meeting Communities Where They Are At***
Collaborative programs that work must ensure that they are meeting the priorities of the community, as defined by the members of the community. These sessions focus on communities that engaged their residents and resources inside the community when developing solutions. *(Sessions 402, 502 & 602)*

Track 3: ***Holistic Solutions and Whole-Person Health***
As social determinants of health do not exist in a vacuum, these presentations speak to wellness and health that incorporates body, mind, relationships, and a truly holistic approach.
(Sessions 403, 503 & 603)

Track 4: ***Strategies to Prevent or Reduce Chronic Disease***
These sessions focus on multi-tiered and collaborative approaches that specifically focus on individuals who have or are at heightened risk for having chronic health conditions. *(Sessions 404, 504 & 604)*

Track 5: ***Innovative Partnerships & Best Practices to Support CHWs***
This track focuses on communities that have created unique collaborations with Community Health Workers. *(Sessions 405, 505 & 605)*

DAY 2 : Wednesday, January 24

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (400)

401: Information and Assistance: More Than a List to Support CHWs and CIEs

Sarah Kile
Lead Housing Case Manager, Ruth Ellis

Greg Bloom
Lead, Open Referral

Providing referrals to meet essential needs is key in addressing social determinants of health and building a community information exchange but there's a lot more work than creating a list. Agencies must have the right people, the right training, and the right infrastructure in place to make sure that a usable directory is possible. After attending this session, attendees will be able to describe the specific need and complications of directory maintenance which includes local relationships, scale, training and the recommendations for directory needs for community information exchange. Participants will also be able to discuss resource-data-as-a-service as well as Open Referral's data standards which help to ensure resource data sharing is scalable. Finally, attendees will be able to describe how domain specific partnerships can contribute to success and discuss how this directory information should be provided as a public good and not saleable by tech companies.

402: Healing Communities

Latressa Gordon, DNP, MSN, RN
Flint Public Nurse/Navigator Coordinator, Michigan United

Tarnesa Martin, BSN, RN
Patient Resource & Community Advocate, Hurley Medical Center

Community health nurses are critical to improving health literacy in their communities. Health literacy refers to an individual's ability to understand and effectively use health information to make informed decisions about their health. Community health nurses contribute to enhancing health literacy in underserved populations. After attending this session, participants will be able to define community health, as well as the scope of responsibilities and the significance of community health nurses in improving overall health.

DAY 2 : Wednesday, January 24

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (400), *continued*

403: Momentum Center: Improving Mental Health Through Positive Community

Barbara Lee VanHorssen, MBA
Experi-Mentor (Executive Director), Momentum Center (Extended Grace dba)

The Momentum Center for Social Engagement is an innovative approach to serving individuals with mental illness, addictions, and other disabilities by addressing the social determinants of mental health. The Momentum Center is creating a community where every person is fully visible and connected. The center works to fill the gaps between the person and clinical or therapeutic services, offering supports, companionship, and positive programming that helps individuals cope with their challenges as they seek effective solutions to their problems. Participants will learn about the center's work, which emphasizes the social determinants of health including social structures, policies, and economic systems that affect mental health outcomes.

Donald Avery, MPA
Director of Network Services, Network180 - Kent County Community Mental Health

Jenna Vipond, CTRS
Chief Operations Officer, Momentum Center

404: Produce Prescriptions: A Solution to Equitably Addressing Food Insecurity and Chronic Disease within Communities

Recognizing the core deliverables under Michigan's Roadmap to Healthy Communities, this session will introduce Produce Prescription Programs as a healthy behavior intervention that bridges the gap between health care and food access. The Michigan Farmers Market Association (MIFMA) will lead our discussion around Produce Prescriptions and their growing landscape in Michigan with support from Meridian Health Plan and the Fresh Prescription Network of Detroit, as they share the inspiring work they are collectively doing to equitably address food insecurity and chronic disease with diabetes patients in their community. Attendees will learn how Produce Prescription programs can be a solution to address diet-related chronic disease and food security. Participants will be able to define and differentiate a Prescription Produce Program from other food security initiatives. Attendees will also be able to identify three ways they can support the expansion of access to and funding for this evidence-based intervention addressing social determinants of health within their own spheres of influence.

Bella Pagogna
Produce Prescription Manager, Michigan Farmers Market Association

Ashley Wenger
Programs Manager, Michigan Farmers Market Association

Patrice Brown
Food Access Manager, Eastern Market Partnership

Megan Slaven
Senior Director, Communications, Meridian

DAY 2 : Wednesday, January 24

10:15 – 11:15 a.m. : BREAKOUT SESSIONS (400), *continued*

405: A Multisector Partnership to Improve Health and Housing Equity Among LGBTQ+ Young People

An innovative partnership between Henry Ford Health and Ruth Ellis Center is addressing housing as a SDOH by offering comprehensive health services within a permanent supportive housing setting. This program resulted in the delivery of integrated health care and social services to LGBTQ+ young people experiencing housing insecurity via creation of two collaborative Health & Wellness Centers (HWC). This presentation will focus primarily on the Ruth Ellis Clairmount HWC, including experiences designing and operationalizing an innovative, integrated, patient-centered, and trauma-informed health care delivery model in a safe, trusted, and supported community environment. Tenants stop in to see trusted staff in the new first-floor HWC whether it be for gender affirming care, sexually transmitted infection testing, an art therapy session, or a flu shot. This partnership aims to increase health care access as well as housing stability for LGBTQ+ young people in the Detroit area, with a long-term goal of improving health outcomes and equity.

Ollie Lagrou, RN
Clinical Nurse Leader, Clairmount Clinic, Henry Ford Health System in partnership with the Ruth Ellis Center

Joyya Pettus
Lead Housing Case Manager, Ruth Ellis

Linda Little, MBA, RN, CCM
President and CEO, Neighborhood Service Organization

11:30 a.m. – 12:30 p.m. : Plenary

Housing: The Vital Sign of Health

Attendees will learn the urgency for housing solutions in Michigan; the link between housing and health, including health care costs; the face of people who are unhoused (it's not what you think); and how medical respite for people who are homeless could be an impactful solution.

DAY 2 : Wednesday, January 24

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (500)

Joan Ilardo, PhD, LMSW
Director of Research Initiatives, Michigan State University College of Human Medicine

Jean Kerver, PhD, RD
Associate Professor, Michigan State University College of Human Medicine

Sheilah Hebert, MS, RD, IBCLC
Nutrition Educator, Michigan State University Extension

501: Examples of Using a Roadmap to Create and Sustain Food and Nutrition Collaboratives

Presenters will share the results of the Successful Nutrition Programs Across the Lifespan project (SNP-AL) funded by the Michigan Health Endowment Fund. The purpose of SNP-AL was to pilot a roadmap for establishing sustainable grassroots community collaboratives. The roadmap led the sites through a series of steps that promoted building lasting relationships based on trust, respect and inclusion of all voices. The two SNP-AL sites will describe how they used the roadmap process to form their collaborative, determine the need to address, and implement a program that addressed the need.

502: Mapping Food Access for Muskegon Heights: A Community-Driven Approach

Learn how a Muskegon County collaborative partnered with the community on this project to improve food access and foster community empowerment in Muskegon Heights. The Muskegon Community Health Innovation Region (CHIR) worked with over 100 residents and food entrepreneurs within a participatory process to create a holistic and systematic map of the food system serving this under resourced community, in addition to a comprehensive overview of resident identified food priorities and barriers.

Samantha Cornell, JD
Director, Muskegon CHIR

Jennifer Barangan
Project Manager – Community Collaboration, Muskegon CHIR

DAY 2 : Wednesday, January 24

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (500), *continued*

503: Trinity Health Ann Arbor's Approach to Addressing Food Insecurity and Improving Healthy Lifestyles

This joint presentation by The Farm at Trinity Health Ann Arbor and Trinity Health Ann Arbor Lifestyle Medicine will provide a brief overview of The Farm at Trinity Health. The session will detail how the farm addresses the SDOH through: a Farm Share Assistance program, an on-staff Community Health Worker, an on-site food pantry, and various programming designed to address health and well-being. The presentation will take a deeper dive into the impact of one collaborative program between The Farm and Trinity Health Ann Arbor Lifestyle Medicine: Nutrition Buddies. This innovative program matches food insecure youth with medical residents for culinary education and mentorships. Residents learn first-hand about SDOH in our community and all participants receive fresh, healthy food from The Farm at Trinity Health.

Jae Gerhart
Manager of Farm Programs, The Farm at Trinity Health, Trinity Health Michigan

Kelly Wilson, RDN, DipACLM
Lifestyle and Culinary Medicine Program Coordinator, Trinity Health-Ann Arbor

Marolyn Valenzuela
Program Specialist II, National Kidney Foundation of Michigan

Sam Shopinski, BA, MSS
Sr. Program Manager, National Kidney Foundation of Michigan

504: Hablemos de Salud Renal: Preventing Chronic Kidney Disease among Hispanic Michigan Residents

Chronic kidney disease (CKD) health disparities are well established, most evident in the 1.3-fold increased risk for Hispanic individuals of developing end-stage renal failure than white counterparts. To reduce kidney disease health disparities experienced by racial and ethnic minorities, the National Kidney Foundation of Michigan (NKFM) works at the community level and takes a bidirectional learning approach to engage and partner with diverse stakeholders. This approach helped expand reach and collaboration with Hispanic communities. This presentation will overview NKFM's community engagement experiences, lessons learned, and gaps in serving the Hispanic communities to help everyone learn from NKFM's experiences and invite other people to share their efforts.

DAY 2 : Wednesday, January 24

1:00 – 2:00 p.m. : BREAKOUT SESSIONS (500), *continued*

Shannon Lijewski
Principal, Everyday Life Consulting

Lisa Braddix, MPH
Chief Health Equity Officer, Southeastern Michigan Health Association

505: Using Collective Impact to Advance Social and Economic Mobility of Community Health Workers

Cementing the community health worker (CHW) profession as a viable and attractive career option calls for the creation of a model with equitable access to training and career advancement opportunities, an environment where organizations and leaders regard CHWs as valued members of health care or public health teams and as connections to valuable resources in their respective communities. After attending this session participants will identify feasibility for model to coordinate and employ CHWs at partner sites as well as describe social and economic opportunities for advancing their role.

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (600)

601: The Women's Health Partnership

Cancer and heart disease are the leading causes of death for Michigan women, and to tackle this issue the Cancer Prevention and Control Section of MDHHS has screening programs for women. To promote these programs, the Women's Health Partnership exists to partner with organizations to enroll women for lifesaving health screenings, engage women in services for themselves and their families, and help women take advantage of FREE health services in the communities they serve. This session will provide information about the partnership, how it promotes lifesaving services to Michigan women and how it has grown to focus on reaching diverse communities.

Polly Hager
Section Manager, Cancer Section, MDHHS

Additional Co-Presenters:
Bria Bush
Ariel Ragin, BA, MPH
Zahra Shafie Khorassani, MPH
Cathy Lancaster, MS

DAY 2 : Wednesday, January 24

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (600), *continued*

Yvonne Cudney, JD, MPA
Outreach and Education Coordinator, Housing Bureau for Seniors

Jennifer Wolf, Certified Aging in Place Specialist
Senior Analyst, Engagement, City of Ann Arbor Office of Sustainability and Innovations

602: Improving the Health and Welfare of Seniors to Stabilize Inter-Generational Homeownership

The Aging in Place Efficiently Pilot Program engaged multiple nonprofit and public sector partners to pair cross-sector innovative strategies to improve the health, safety and comfort of seniors, reduce energy burdens and carbon emissions, and stabilize housing intergenerationally. This session will share information about the pilot program and lessons learned.

Rebecca E. Hasson, PhD
Associate Professor, University of Michigan

Lisa Gagliardi, BA, MPA, EQC
CEO, LJ Gagliardi

603: Merging Implementation Science and Health Equity Research to Eliminate Youth Physical Activity Disparities

The adoption of classroom-based physical activity interventions in elementary schools is nearly universal (92%), but fewer than 22% of teachers who implement activity breaks achieve a dose of 10 minutes per day. This presentation will highlight the development and subsequent tailoring of a classroom-based physical activity intervention, called Interrupting Prolonged sitting with ACTivity (InPACT), for delivery in low-resource schools using implementation science frameworks focused on equity. These strategies focus on increasing teacher self-efficacy and reducing multilevel implementation barriers in low-resource schools to promote intervention fidelity, effectiveness, and sustainment.

DAY 2 : Wednesday, January 24

2:15 – 3:15 p.m. : BREAKOUT SESSIONS (600), *continued*

Blair Carter
Senior Public Health Educator, Detroit Health Department-EHE

Kyra Sanders, MSW
Community Planner, MDHHS

Miglena Mihaylova, CHES
Physician Detailer, Detroit Health Department

Tyffanie Walton
Health Educator Coordinator, MDHHS

Keith Hughes
Senior Public Health Educator, Detroit Health Department

604: The Pull Up Project: A Mobile Health Initiative

This session will take a look into how Detroit is responding to HIV surveillance networks by utilizing a community-based mobile health initiative. Through the Pull Up Project, MDHHS, Detroit Health Department, and collaborators provide a status-neutral approach to HIV prevention and care services, including gender-affirming care, supportive services, mental health, substance use treatment, and case management services for LGBTQ+ persons. This project facilitates a network of community-based organizations and hospital-based systems that serve priority populations and other community members. The mobile unit health initiative has expanded to offer access to traditional and nontraditional medical care services.

Robin Lynn Grinnell
Community and Education Resources Manager, MDHHS

605: The Intersection of School Transportation and Food Security: Insights from Success Coaches

Pathways to Potential began in 2012 as a partnership between MDHHS and local schools in five counties to address chronic absenteeism. Today, the program has 209 FIS Success Coaches serving schools in 38 counties. Addressing chronic absenteeism, grade retention, and graduation rates through a SDOH lens allows our success coaches to share first-hand knowledge of the intersectionality and impact of the social determinants of health. In this session, we will share real-time examples of the school transportation crisis and its impact on food security for vulnerable families; share strategies that are trying to address the issue; and seek feedback from participants on additional opportunities for partnership.

David Trowbridge
Departmental Specialist, Pathways to Potential

Lindsey Cross
Pathways to Potential Analyst, MDHHS Central Office—Bureau of Community Services

DAY 2 : Wednesday, January 24

Hassan Hammoud, MSW
Senior Manager of Essential Services, Ford Motor Company Fund

3:30 – 4:30 p.m. : Closing Plenary

The Power of Collaboration

Hassan Hammoud has been able to facilitate and sustain collaborations at the state and local levels for most of his career. Hassan will speak about the importance of partnerships and what can be accomplished when we collaborate.

DAY 3 : Thursday, January 25

9:00 – 9:15 a.m. : Opening Keynote

Welcome and Opening Remarks

Director Elizabeth Hertel will welcome participants to the summit, emphasizing the significant influence of social determinants on peoples' health. She will highlight the urgent need for collaboration, urging attendees to explore actionable strategies that will foster health equity and catalyze transformative change in health care delivery across Michigan.

Elizabeth Hertel, MBA
Director, MDHHS

Ninah Sasy, BS, MSA
Director of Policy and Planning, MDHHS

Caroline Stoner, MPH
Policy Analyst, MDHHS

9:15 – 9:30 a.m.

Produce Prescription Pilot Program (P4) - Addressing Food Security with Cultural Competency

Through the Social Determinants of Health strategy, Michigan's Roadmap for Healthy Communities, efforts are ongoing to improve food security and reduce disparities in populations that are disproportionately impacted by social drivers of health. In a collaborative approach, MDHHS Policy and Planning Office partnered with four Michigan Native American Tribes through the Produce Prescription Pilot Program (P4) Bridge Funding initiative. With an emphasis on food sovereignty, the P4 Bridge Funding project is part of the greater MDHHS SDOH Strategy to support SDOH efforts to improve health outcomes for Tribal communities in Michigan. This session will provide information about the project.

DAY 3 : Thursday, January 25

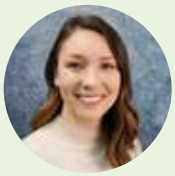
9:30 – 10:00 a.m. : Opening Keynote

Supporting Access to Traditional Food Through Nutrition Initiatives

Nottawaseppi Huron Band of the Potawatomi (NHBP) has several initiatives in place that support access to traditional foods. Staff members from NHBP will share how these initiatives support the health of the NHBP tribal community.

Shelby Brueck, MPH, CHES
Community Health Outreach Manager, NHBP

Nickole Keith
Food Sovereignty Coordinator, NHBP



Erin Stark, MS, RD, CDCES
Registered Dietitian, NHBP

10:10 – 11:25 a.m. : Keynote

Health in All Policies Panel

This session brings together representatives from the Michigan Department of Labor and Economic Opportunity, Michigan Department of Economic Development, the Michigan State Housing Development Authority to explore the integration of health considerations into various policy areas. The aim is to promote a holistic approach to improving public health outcomes across the state.

Algeria Wilson
Health & Equity Policy Advisor, Executive Office of Governor Gretchen Whitmer

Kim Trent
Deputy Director for Prosperity, Michigan Department of Labor and Economic Opportunity

Diane Golzynski, PhD, RDN, SNS
Deputy Superintendent, Division of Finance and Operations, Michigan Department of Education

Jean Ruestman
Administrator, Office of Passenger Transportation, Michigan Department of Transportation

Lisa Kemmis
Director of Rental Assistance and Homeless Solutions, Michigan State Housing Development Authority

DAY 3 : Thursday, January 25

Regina Branch, MS
Children's Services Administration Special Advisor, MDHHS

Tim Click, MSW
State Bureau Administrator, Children's Services Administration, MDHHS

Rachel Willis, MSW
Director of the Bureau of Out of Home Services, MDHHS

Jason Cross, MSW
ICWA Compliance Manager, MDHHS

11:35 a.m. – 12:35 p.m. : Keynote

Children's Services Administration Panel

The Children's Services Agency presentation promises an insightful exploration into the crucial interplay between social determinants and child welfare. The session will delve into the pivotal role of social factors in shaping the well-being of children and families, shedding light on innovative approaches to address these determinants.

Presenters from City of Detroit, Saginaw County, District Health Department #10

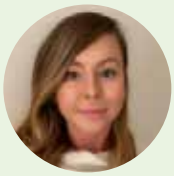
12:35 – 1:40 p.m.

MDHHS Social Determinants of Health Strategy Hub Rollout

This presentation will showcase the progression of the Social Determinants of Health Hub framework, detailing insights gained from our SDOH planning grants with local health departments. It will offer an overview of the framework's development and its timeline.

Darien Pipkin, MSHM
SDOH Analyst, MDHHS

Natalie Holland, BA
Departmental Analyst, MDHHS



Laura Drayton, MPH
Senior SDOH Strategy Policy Advisor, MDHHS

Tiwanna Hatcher, MPA
Senior Health Programs Advisor, MDHHS

Elizabeth Hartig, MA
Senior Data Advisor, MDHHS

DAY 4 : Friday, January 26

10:00 a.m. – 2:15 p.m.

Networking Luncheon *— Eagle Eye Banquet Center, Bath, MI*

Networking with exhibitors, community organizations, and other state influencers who are working to address social determinants of health in Michigan.

Lt. Gov. Garlin Gilchrist II

11:00 a.m.

Keynote

Virtual Exhibitors

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