AGENDA

St. Clair County Board of Commissioners
Human Services Committee

MEETING WILL BE HELD REMOTELY VIA WEBEX

May 6, 2021 at 6:00 PM

The meeting will be held virtually due to the COVID-19 pandemic. Any citizen who wishes to address the Board can send their request to citizens@stclaircounty.org or leave a voicemail at 810-989-6900 prior to 4:00 p.m. the day of the meeting.

Event Address: https://stclaircounty.webex.com/stclaircounty/onstage/g.php?MTID=ebef5b2bab3b141e3af3bff997584e2f4

Event Password: 0000

Audio Conference: To receive a call back, provide your phone number when you join the event;
OR
Call 1-408-418-9388 and Enter Access Code: 132 816 2225

1. **Roll Call/Opening/Pledge of Allegiance**
2. **Additions/Deletions/Changes to the Agenda**
3. **Citizens to be Heard**
4. **Updates**
   - A. Community Mental Health Update
   - B. COVID-19 Update - Medical Health Officer
5. **Conceptual Initiatives**
6. **Old Business**
7. **New Business**
   - A. Resolution 12-07 Encouraging Voluntary Compliance with COVID-19 Mitigation Strategies

B. Community Health Needs Assessment Contract Approval

8. Other Human Services Matters

9. Information Only

10. Receive and File Packets

11. Adjournment

Committee Chair: Lisa Beedon

Note: The County complies with the "Americans with Disabilities Act" and if auxiliary aids or services are required at the meeting for individuals with disabilities, please contact Administrator/Controller's Office, Suite 203, 200 Grand River Avenue, Port Huron, MI 48060, (810) 989-6900 three days prior to said meeting.

Community Mental Health Update

Summary:

COVID-19 Update - Medical Health Officer

Summary:

Resolution 12-07 Encouraging Voluntary Compliance with COVID-19 Mitigation Strategies

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
	Resolution 21-07 Encouraging mitigation strategy compliance	4/29/2021	Cover Memo

ST. CLAIR COUNTY BOARD OF COMMISSIONERS
RESOLUTION 21-07

RESOLUTION TO ENCOURAGE VOLUNTARY COMPLIANCE WITH COVID-19 MITIGATION STRATEGIES

WHEREAS, SARsCoV2 transmission has resulted in several waves of disease and disruption of the normal activities of our county, including loss of workforce, illness and death; and

WHEREAS, only limited mitigation strategies have evidence based support in providing significant impact on this disease transmission; and

WHEREAS, these mitigations strategies include actions that require voluntary compliance by the majority of people to be most effective and that to date these actions have not been successfully applied; and

WHEREAS, these actions cause little, if any, harm and can potentially benefit the entire community, including a reduction in the burden of disease, illness and deaths; and

WHEREAS, it is in the best interest of our county, in regards to physical, economic and social health, to minimize the impact of SARSCoV2 transmission.

THEREFORE BE IT RESOLVED, that the St. Clair County Board of Commissioners strongly supports and recommends voluntary compliance with the mitigation strategies listed below:

- Wearing a mask that fully covers the mouth and nose while in public settings, at events and gatherings, and anywhere they will be around other people, and
- Following guidance for limited occupancy and gatherings that reduce the risk of close contact less than six (6) feet, and
- Following guidance by the St. Clair County Health Department and other public health experts on testing, isolation and quarantine, and
- Vaccinating with approved COVID19 vaccines.

Dated: **May 6, 2021**

ST. CLAIR COUNTY
BOARD OF COMMISSIONERS

Reviewed and Approved by: _____

_____ _____

Gary A. Fletcher
County Corporation Counsel

511 Fort Street, Suite 101
Port Huron, MI 48060
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ST. CLAIR COUNTY
HEALTH DEPARTMENT

Our Community. Our Environment.

3415 28th Street Port Huron MI 48060

MEMORANDUM

Divisions

ADMINISTRATION
P 810.987.5300
F 810.985.2150

DENTAL CLINIC
P 810.984.5197
F 810.984.0747

EMERGENCY PREPAREDNESS
P 810.987.5300
F 810.987.0630

ENVIRONMENTAL HEALTH
P 810.987.5306
F 910.985.5533

HEALTH EDUCATION
P 810.987.5300
F 810.986.2150

NURSING DIVISION
P 810.987.5300
F 810.985.4487

TEEN HEALTH
P 810.987.1311
F 810.966.2898

WIC PROGRAM
P 810.987.8222
F 810.966.2898

www.scchealth.co
/scchdmi | @scchdmi

DATE: April 13, 2021

TO: St. Clair County Board of Commissioners

FROM: Greg Brown, Administrator

RE: Community Health Needs Assessment Contract Approval

The Health Department completed a request for proposal (RFP-HD-0321-407) through the Purchasing Department to receive bids to complete a Community Health Needs Assessment, including Behavior Risk Factor Survey. We received six bids (see attached). We have decided to accept the bid from VIP Research and Evaluation who did our last CHNA in 2016. Funding is available for this project through the Child & Maternal Health Title V block grant, from this fiscal year, and next fiscal year. The Health Department is respectfully requesting approval of a Professional Service Contract with VIP Research and Evaluation not to exceed $95,000.

TO: Annette Mercatante, MD, MPH, Medical Health Officer, St. Clair County Health Department
FROM: Martin Hill, Ph.D., President, VIP Research and Evaluation
DATE: April 6, 2021
RE: Proposed Research Services for a Community Health Needs Assessment (CHNA) and Behavioral Risk Factor Survey (BRFS) for St. Clair County, Michigan, 2021

Introduction

Thank you very much for the opportunity to provide a research plan and proposed costs that will assist the St. Clair County Health Department (SCCHD) in conducting a Community Health Needs Assessment (CHNA) with a Behavioral Risk Factor Survey (BRFS) in 2021. VIP Research and Evaluation is committed to providing high quality research and will adhere to this principal while planning and overseeing this research project.

The importance of this research requires a comprehensive understanding of the needs of the St. Clair County Health Department and their goals and objectives with respect to the CHNA. The research results will identify health needs and gaps in services, and will inform SCCHD staff of the health and health care needs of all St. Clair County residents. We believe that our research and professional experience, and our history of partnering with SCCHD, is evidence that we are well qualified for this critically important assignment.

Overview of Research Team

The VIP Research and Evaluation team has extensive experience with research projects across industries and topics, but especially with research involving health and healthcare, such as Community Health Needs Assessments. Additionally, we employ rigorous quantitative and qualitative research methodologies to arrive at conclusions that help our clients succeed. Spearheading this research project will be Dr. Martin Hill, who has a Ph.D. in sociology, specializing in applied research in evaluation and medical sociology, and has more than 30+ years of social science research experience.

VIP Research and Evaluation has a proven track record and has conducted the following relevant research projects within the state of Michigan:

- Greater Ottawa County United Way Community Needs Assessment; 2012, 2015, 2018, 2021
- Ottawa County Community Health Needs Assessment; 2011, 2014, 2017, 2020
- Ottawa County Behavioral Risk Factor Survey; 2011, 2014, 2017, 2020

- Mason County Community Health Needs Assessment; 2011, 2014, 2017, 2019
- Newaygo County Community Health Needs Assessment; 2011, 2014, 2017, 2019
- Osceola County Community Health Needs Assessment; 2011, 2014, 2017, 2019
- Barry County Community Health Needs Assessment; 2014, 2017, 2019
- Mecosta County Community Health Needs Assessment; 2014, 2017, 2019
- Montcalm County Community Health Needs Assessment; 2014, 2017, 2019
- Mason County Behavioral Risk Factor Survey; 2011, 2014, 2017
- Barry County Behavioral Risk Factor Survey; 2014, 2017
- Mecosta County Behavioral Risk Factor Survey; 2014, 2017
- Montcalm County Behavioral Risk Factor Survey; 2014, 2017
- Newaygo County Behavioral Risk Factor Survey; 2014, 2017
- Osceola County Behavioral Risk Factor Survey; 2014, 2017
- St. Clair County Community Health Needs Assessment; 2016
- St. Clair County Behavioral Risk Factor Survey; 2016
- District Health Department #10 Behavioral Risk Factor Survey; 2016

The VIP Research and Evaluation team works closely with all of our clients as research partners. This means we collaborate with clients and engage them in all aspects of the research process. Since the research process is iterative, this type of relationship ensures both parties gain insight along the way, and increases the overall usability of research results.

What follows is our understanding of the goals and objectives of the St. Clair County Health Department, the scope of work, analysis and reporting, assumptions about the proposed research plan, project deliverables, timing, and associated costs.

Background and Objectives

The mission of the St. Clair County Health Department is to be the trusted local expert in population and preventive health practices by promoting and protecting public health through assessment, planning, and response so that the public can achieve optimal well-being.

Moreover, St. Clair County Health Department's mission is consistent with Michigan's Public Health Code to continually and diligently endeavor to prevent disease, prolong life, and promote the public health through organized programs, including:

- Prevention and control of environmental health hazards
- Prevention and control of diseases
- Prevention and control of health problems of particularly vulnerable population groups
- Development of health care facilities and health services delivery systems to the extent provided by law

- Regulation of health care facilities and health services delivery systems to the extent provided by law

The overall objective of this research is to assess county-level and regional level population health needs, as well as risk and protective factors, with the result of having a consistent set of comprehensive health data that can be tracked over time.

The CHNA will provide the St. Clair County Health Department with the information they need to properly assess the health needs of its community. Ultimately, the SCCHD will be able to use the research results for their strategic planning and program implementation.

Scope of Work/Research Plan

The Community Health Needs Assessment will combine research findings from both primary and secondary data. Additionally, both quantitative and qualitative research methodologies will be used to collect the primary data. By triangulating various methodologies, we will strengthen our conclusions as to the state of the health and health care landscape in St. Clair County. Moreover, it will assist researchers in identifying the pressing and prevalent health-related issues.

Population Health Data Tool

In cooperation with the CHNA team, VIP Research and Evaluation staff will develop a database that houses data gathered from a wide variety of existing secondary data sources. The importance of using secondary data in a comprehensive health needs assessment cannot be understated. Secondary data analysis will be used to portray the health of residents, and the health care landscape, of St. Clair County. Data can be utilized from a variety of sources and can be used to show trends/changes over time within St. Clair County. Further, it allows for a comparison of St. Clair County with neighboring counties, the state of Michigan, or the nation as a whole.

Examples of specific indicators include **social determinants of health** (e.g., poverty rates, unemployment rates, level of education, crime rates, percent of single-parent households, students eligible for free/reduced lunch), **health status indicators** (e.g., life expectancy, mortality rates, birth rates, leading causes of death, cancer diagnoses and death rates, immunization rates, prenatal care), **youth behavioral risk factors** (e.g., teenage sexual activity and pregnancy rates, mental health, suicide, substance use/abuse, obesity, physical activity, diet), **health care access** (PCPs per capita, proportion of Medicaid patients), and **hospital and clinical data** (e.g., admissions by insurance type, ER admissions by race/ethnicity). This list is certainly not exhaustive and VIP staff will work closely with the CHNA team to determine the indicators necessary to most accurately depict the health and health care landscape of St. Clair County.

Additional examples of indicators could include:

- Barriers/obstacles to health care access
- Domestic violence
- Mental health (adults)
- Other demographic data (e.g., % uninsured, underinsured, uninsurable and the population groups that over represent these categories)
- Oral health
- Physical environment
- Resources available
- Social environment
- Substance abuse

Examples of secondary data sources include:

- Bureau of Labor Statistics
- Center for Educational Performance Information
- CDC Healthy People Data
- County Health Rankings
- Health Indicators Warehouse (National Center for Health Statistics)
- HRSA Designation Standards
- Kids Count Data Book
- Michigan Care Improvement Registry (MCIR)
- Michigan Department of Community Health/Vital Records/Statistics
- Michigan Department of Human Services
- Michigan Inter-Tribal Council BRFS
- Michigan Office of Highway and Safety Planning
- Michigan Primary Care Association
- Michigan State Police Crime Facts
- National Center for Health Statistics
- National Health Interview Survey Data (NHIS)
- National Library of Medicine
- State Health Facts (Kaiser Foundation)
- U.S. Census/American Community Survey (ACS)
- Youth Risk Behavior Surveillance System (YRBSS)

The above are simply examples of data we consider important and useful. We expect the data tool to be extensive and comprehensive; however, we are cognizant of keeping the data collection process efficient and effective by avoiding the tendency to compile large quantities of unnecessary data. Only data that specifically address the goals and objectives of the CHNA team will be considered.

We will build the database and populate it with important and necessary information from the above sources. We will ensure that the tool is user-friendly, so that whoever chooses to use the tool can do so in an effective and efficient manner.

Adult Behavioral Risk Factor Survey (BRFS)

Methodology and Sampling Plan

The BRFS will be a telephone survey of St. Clair County adult residents (age 18 and older). Where landline phone numbers are used, we will screen to see if there is more than one adult in the household, and if so, we will **randomly target one adult**, not necessarily asking the person who answers the phone to participate. This process will limit sampling error.

We will use the Behavioral Risk Factor Surveillance Survey instrument designed by the Center for Disease Control (CDC), used nationally, by the state of Michigan, and used previously in St. Clair County (2016). This will not only provide consistency but will also enable us to trend to a previous point in time and compare to other regions such as neighboring counties, the state of Michigan, and to the nation as a whole.

For this BRFS survey we will use a Disproportionate Stratified Sampling (DSS) design which has been used within the state of Michigan and nationally for all BRFS surveys since 2003. This strategy combines the use of random digit dial (RDD) sample with listed sample and will ultimately yield a probability sample that is more efficient than simply pulling numbers from RDD sample. For example, we will call listed numbers at a higher rate than unlisted numbers (e.g., 1.5:1.0 ratio), and this process, or protocol, will be followed for each of the three regions and their corresponding zip codes. This will allow us to achieve a high hit rate, compared to simple random sampling, and still achieve a statistically representative sample.

Each phone number will be called up to eight times or until a respondent completes the survey or chooses not to participate. In the event that the target person is not available, voicemail messages will be left only on the first and the final attempts. The message left will contain the reason for the call and the importance of their participation.

Trained interviewers will make daytime and evening calls on Monday through Saturday, and even on Sunday, if the CHNA team deems that appropriate. Although daytime calls will be made during the week, most calls will be made in the evening hours.

A total of 1,200 completed surveys will be collected in order for the results to be statistically valid, offer low margins of error, and allow for analysis of sub-populations that will be large enough to confidently extrapolate to the corresponding sub-populations of St. Clair County. We will attempt to collect a number of completed interviews in each of the three regions (northcentral, western, and southern) that is consistent with the proportion of the population. Comparisons among sub-populations that will be important to inspect include age, race, gender, level of education, annual household income, employment status, marital status, and children living at home (vs. none).

If the BRFS survey needs to be translated into Spanish, VIP Research and Evaluation will translate the survey into Spanish and the phone center has bilingual (Spanish-speaking) interviewers ready to conduct interviews with residents whose preference is to participate in this research using Spanish as their primary language.

Current state and national BRFS studies are comprised of up to 60% cell phone participants (40% landline), thus it is important that we increase the proportion of local cell phone participants for this iteration of the St. Clair County BRFS. Historically, the BRFS was comprised of 25%-30% cell phone participants, however, this year we are recommending that we achieve a **50%:50% ratio of landline to cell phone**. Since we do not know the actual proportion of cell-phone only adults in St. Clair County, and more importantly the limited budget prevents us from collecting a sample with 60% cell-phone participants, we believe the option above is robust enough to achieve our goals. Further, it is consistent with our approach in other Michigan counties. Finally, we will ask every cell phone respondent if they also have a landline telephone, this way we can determine the number of cell phone-only participants we will have in our final sample.

Data Weighting

We will employ the same BRFS data weighting process that the CDC and the state of Michigan employs in order to remove as much bias as possible and to be able to generalize results to the population of St. Clair County. This process includes two steps: **design weighting** and **iterative proportional fitting**, also known as raking. Because raking does not require demographic information for small geographic areas, it allows for the introduction of many demographic variables. For example, variables such as telephone source, detailed race/ethnicity, education level, marital status, age by gender, gender by race/ethnicity, age by race/ethnicity, renter/owner status, and county region will used to weight the sample to ensure the data is more representative of the population of St. Clair County adults.

The design weighting formula is the same as in 2016. It takes into account the number of landline phones and the number of adults in each household. It also takes into account the number of available records (NRECSTR) and the number of records selected (NRECSEL) within each geographic strata (_GEOSTR) and density strata (_DENSTR).

The first step is to calculate the stratum weight (_STRWT) from the number of records in the strata and the number of records selected. The design weight is calculated in the following way within each _GEOSTR*_DENSTR combination:

_STRWT=NRECSTR/NRECSEL

Once the stratum weight is calculated, the number of adults within the household and the number of phones are used to calculate the design weight:

Design Weight = STRWT X (1/Number of Phones) X Number of Adults in Household

Questions about the number of adults and the number of telephone lines in each household are asked during the screening process of each landline telephone interview. For cellular telephone respondents, the number of adults and the number of telephones in the household are set to 1, and cellular telephone respondents are treated as one adult/one phone households in the design weighting process.

The final weight is based on the following formula:

Design Weight X Raking Adjustment

Raking weighting incorporates the known characteristics of the population into the sample. This is done in an iterative process, with each demographic factor introduced in a sequence. The sequence of factors may be multiple times before the sample is found to accurately represent the population on all factors under consideration. BRFS raking variables include those mentioned above (telephone source, detailed race/ethnicity, education level, marital status, age by gender, gender by race/ethnicity, age by race/ethnicity, renter/owner status, and county region).

Key Stakeholder Interviews

We will complete 10 interviews with Key Stakeholders at the executive level who are community leaders typically involved in policy decision-making. With regard to health care, examples of Key Stakeholders are hospital administrators or clinic directors.

It is essential to gather in-depth feedback from this group because they provide a perspective that is based on their tremendous knowledge of the health and health care landscape in St. Clair County. Their expertise in health, health care, and human services will provide information and feedback critical to the success of the CHNA.

The participants will be selected from a database/list of community stakeholders provided by the St. Clair County CHNA team. We assume the list will contain contact information such as telephone numbers. Interviews will be conducted via telephone by our senior staff members who have vast experience conducting executive-level interviews. Interview duration will be approximately 30 minutes. At minimum, we will reach out to executive-level individuals at the following organizations:

- Algonac Medical Facility
- Beacon Home Care
- Blue Water Pregnancy Care Center
- Blue Water YMCA
- Community Foundation of St. Clair County

- Council on Aging
- Department of Health and Human Services
- Downriver Community Services
- Lake Huron Medical Center
- McLaren Port Huron Hospital
- Peoples' Free Clinic for Better Health
- St. Clair County Community Mental Health
- St. Clair County Great Start Collaborative
- St. Clair County Health Department
- St. John River District Hospital
- Tri-Hospital EMS
- Visiting Nursing Association
- United Way of St. Clair County

Consistent with qualitative methodologies, interviews will be recorded, transcribed, coded, and major themes will be pulled from the vast amount of rich information we expect to receive.

Since the Principal Investigator submitting this proposal also conducted the St. Clair County CHNA in 2016, the research team will explore opportunities to track certain questions and compare findings from 2016 with the current year. More importantly, we will take this opportunity to gather feedback from Key Stakeholders regarding action taken by the community based on the information collected from their responses in 2016. This is important because we will be able to determine if Key Stakeholders believe they are contributing usefully to this process and that their valuable time is being put to good use.

Key Informant Surveys

We will complete 50-75 online surveys with Key Informants. This group will be comprised of community leaders who also have expertise in health and public health issues but are typically not involved in policy decision making. They are either: (1) intimately involved with recipients of health care services, and have a clinical perspective, or (2) are keenly aware of the community, its residents, and the issues and problems related to health care. Examples of Key Informants are physicians, nurses, physician assistants, dentists, ER staff, case managers, social workers, community benefit staff, financial staff dealing with charity care, board members, directors of nursing homes, directors of assisted-living organizations, and executive leadership not mentioned above in the section on Key Stakeholder Interviews.

Like Key Stakeholders, it is vital to obtain feedback from this group because they provide a perspective that is based on their extensive knowledge and experience in the areas of health, health care, and human services in St. Clair County.

Participants will also be selected from a database/list of community Key Informants provided by the St. Clair County CHNA team. We assume the list will contain contact information such as email addresses and telephone numbers. The survey will be hosted online and will take approximately 20 minutes to complete.

We will also be able to track certain questions and compare findings from 2016 with this iteration (2021). We will take this opportunity to gather feedback from Key Informants regarding any steps taken to address issues uncovered from the 2016 CHNA over the past five years. Like Key Stakeholders, this is an opportunity to get feedback from Key Informants as to whether they have seen any changes or steps taken to improve health and health care for St. Clair County residents since the last time they participated.

(Optional) Self-Administered/Online Survey with Underserved Residents

In lieu of focus groups, which can be difficult to recruit for and coordinate, and often result in a small number of participants, we recommend conducting a survey with the underserved, or vulnerable, subpopulation of area residents if resources warrant it. Underserved residents include the uninsured/underinsured/uninsurable, low income, single mothers with children, minority groups such as Hispanics, and elderly adults.

A short survey (2-3 pages) would be constructed and distributed at various agencies and organizations that serve these subpopulations (free health clinics, WIC, emergency rooms, health departments, senior centers). We would need to get buy-in from these agencies/organizations to assist us in distributing the survey and we have had success in the past when the local Health Department is sponsoring the research. Additionally, we will program the survey to be online for those who would rather participate in this way. We will take precautions to have survey links with specific extensions to ensure the appropriate people are participating.

Because this subpopulation can be difficult to recruit for participation, we recommend constructing this survey early on in the project and leaving it in the field for as long as possible (e.g., several weeks/months). Moreover, the CHNA team may need to offer incentives for participation (e.g., $10 Meijer or Walmart cards) if we find we are struggling to secure enough participants. If we are able to offer incentives and leave the survey in the field for a lengthy time period, we are confident we can obtain 300-400 completed surveys.

Analysis and Reporting

VIP Research and Evaluation staff will complete a comprehensive analysis of all data collected. Comparisons will be made between data collected in 2016 and 2021. Secondary data will be analyzed and reported comparing St. Clair County with Michigan and the United States, where these data are available. Additionally, analyzing this data will allow us to:

- Uncover pressing and prevalent health or health care issues
- Identify disparities between certain subgroups or subpopulations
- Understand and identify factors that impact health and health care
- Determine major community health needs, specifically among certain population groups and/or geographic areas
- Ascertain the major health problems/issues in St. Clair County and ways these have been addressed (or not) over the past five years
- Compare key findings from 2016 with 2021 to: (1) identity trajectories of perceived health needs over time, and (2) demonstrate continued gaps or areas of improvement
- Obtain participant feedback as to whether or not they believe they, and other health care professionals or groups, are making a positive impact on health and healthcare issues for area residents

This analysis will result in a final CHNA report that is both comprehensive and cohesive, utilizing all the sources and methodologies discussed above, providing a clear and accurate picture of the health and health care landscape of St. Clair County. The report will include:

- Background and objectives of the research project
- Methodologies utilized for analysis and interpretation
- Narrative sections highlighting qualitative themes emerging from the study (IDIs)
- Tables/charts/graphs depicting key findings for the Key Informant online survey, the BRFS survey, the underserved resident survey, and secondary data sections
- BRFS tables will compare the differences among the following subgroups/variables and denote any statistically significant differences: region, gender, race, age, level of education, annual household income, and poverty level*
- Confidence intervals for the BRFS data
- Complete, in-depth analysis and interpretation of all the data collected
- Summary of findings highlighting key, pressing, and/or prevalent issues
- Implications/recommendations focusing community health priorities and next steps
- Executive summary: a three-to-four-page synopsis of the most pressing issues/findings

*Note: this is a preliminary list based on what has been used in past CHNA reports, as well as in Michigan BRFS reports. We will work closely with the CHNA team and adjust the list as needed.

Assumptions

- In-depth interviews to be conducted with Key Stakeholders will have a duration of approximately 30 minutes
- Online survey with Key Informants will have an average duration of 20 minutes
- BRFS – target audience is adults, 18 and older, residing in St. Clair County
- BRFS – respondents will be screened to determine if more than one adult lives in the household and if so, one adult will be randomly selected to participate
- BRFS – survey will consist of core BRFS questions and up to 15 additional optional module questions
- BRFS – survey duration will average no more than 25 minutes (**NOTE: the current price quote is based on a 35+ minute interview because we used 2016's BRFS template**)
- CHNA team will provide VIP Research and Evaluation with the contact information (phone and email addresses) of both Key Stakeholders and Key Informants
- CHNA team will also assist VIP team in getting buy-in/assistance from area organizations/agencies that offer programs and services to the underserved subpopulation
- CHNA team will see that a communication campaign is utilized to inform the public (e.g., newspaper, radio, website, etc.) that the CHNA/BRFS is being conducted and that they may be contacted by VIP Research and Evaluation or the Wilkins Research (the phone center). These campaigns will help boost participation rates among health care practitioners and residents for the focus groups
- St. Clair County Health Department will be listed as the study sponsors to ensure better cooperation rates

Deliverables

VIP Research and evaluation is responsible for the following services and deliverables:

- Complete project management to ensure the project runs smoothly and efficiently
- BRFS – construction, programming, and testing of the survey
- BRFS – procurement of sample list, including listed and unlisted sample for landline telephones and RDD cell phone sample in St. Clair County
- BRFS – training/briefing interviewers on the proper protocol and procedures when conducting the survey
- BRFS – quality control by monitoring the interviewers in the field

- BRFS – data collection via telephone interviews
- BRFS – coding of any open-ended questions
- BRFS – weighting and raking of data
- Construction of the in-depth interview discussion guide, online surveys, and self-administered survey in collaboration with the CHNA team
- Programming and testing of online surveys
- Data collection via the in-depth telephone interviews
- Coding of all open-ends for major themes
- Transcription of in-depth interviews
- Data management, cleaning, and tabulation
- Data codebook providing full name of all variables and response options
- Complete data analyses, including subgroup comparisons
- A spreadsheet of raw data containing information collected
- A population health data tool with sources and statistics
- Complete datasets in Excel and/or SPSS of the online survey, if desired
- A comprehensive report incorporating all of the primary and secondary data as described above
- Presentation of findings

Timeline

We will work closely with the CHNA team from St. Clair County Health Department to ensure this project is carried out in a timely manner. Communication between VIP Research and Evaluation staff and representatives of teams will be ongoing since it will be crucial to developing well-crafted protocols. Throughout the research process, VIP Research and Evaluation will be proactive with weekly communication (or more if necessary) and updates. When the project timeframe becomes more solidified, we will attempt to develop a more detailed timeline for each project component and for the project overall, but with COVID that might not be realistic. For now, the following dates will be used as guidelines, providing the research project begins in a timely manner:

- April 23, 2021 – St. Clair County Health Department selects the CHNA/BRFS research vendor
- June-August, 2021 – collect community feedback via in-depth interviews and online survey
- June-August, 2021 – pull data for, and build, the population health data tool
- May-October, 2021 – if underserved resident survey is an option, take this longer timeframe to collect this data
- June-August, 2021 – collect BRFS data
- September, 2021 – deliver BRFS data to CHNA team
- December, 2021 – deliver final CHNA report to SCCHD CHNA team

Costs for St. Clair County CHNA 2021

The total costs for the 2021 St. Clair County CHNA, which includes all of the deliverables mentioned above, will be **$95,000***.

*NOTE: costs are calculated based on the assumptions listed above (e.g., VIP will get assistance with agency/organization buy-in of Underserved Resident survey, CHNA team will provide contact information for Key Stakeholders and Key Informants). If the parameters of the project change, impacting the project assumptions, we will have to address this early on as it will also impact the project budget.

***NOTE: costs are also based on an estimate of the BRFS to be as lengthy as it was in 2016, however, we assume if will be shorten in duration this iteration and therefore costs should be less than what is indicated here.**

*NOTE: all costs are salary and wage costs. We anticipate only minor costs for supplies or direct costs (e.g., telephone costs). Further, if the SCCHD staff assists with some of the tasks (e.g., health data tool), costs will be reduced and the savings passed on to the CHNA team.

Key Personnel

Dr. Martin Hill

Dr. Martin "Marty" Hill is currently President of VIP Research and Evaluation and will be the Principal Investigator for this research endeavor. Dr. Hill has over 25 years of research experience across academic, governmental, for-, and non-profit settings.

Marty completed his first post-graduate research training with the U.S. Department of Justice/Bureau of Prisons as a Research Analyst evaluating drug treatment programs throughout the federal prison system. He received the Special Act Award for his contribution to the research in this area. Following this, Marty worked as a Senior Research Associate for the Kercher Center for Social Research at Western Michigan University (WMU). During his work at the Kercher Center for Social Research worked on various social research projects, many which focused on evaluating county drug courts and other community programs and initiatives. Most recently, Marty was the Director of the Carl Frost Center for Social Science Research at Hope College where he spearheaded numerous research projects for both for- and non-profit organizations.

Throughout his career he has provided a wide range of research services, including survey research, program evaluation, needs assessment, integrating both quantitative and qualitative methodologies. His approach to research is to treat the client as a research partner from formulation of research questions to utilizing research findings in optimal ways. When approaching client partnerships, Marty always emphasizes the role of collaboration in generating meaningful research insights.

Marty's unique combination of education and research experience, coupled with his approach to research and working with clients has enabled him to foster many lengthy and successful client relationships.

Marty has a Ph.D. in sociology, with a concentration in medical sociology and applied research and evaluation.

RFP-HD-0321-407 Community Needs Health Assessment
BID OPENING April 9, 2021 - Electronic submission to MITN

VENDOR	DATE,TIME RECD	TOTAL BID AMT	COMMENTS
Issues and Answers Network, Inc	MITN electronic	*$213,292.00*	Assuming 30 minute questionnaire; provided pricing for shorter qs
Management Decisions, Inc	MITN electronic	*$174,528.00*	
Market Decisions Research	MITN electronic	*$165,319.00*	
Public Sector Consultants	MITN electronic	*$213,313.00*	
Public Works LLC	MITN electronic	*$305,000.00*	$305,000 30 minute questionnaire $292,000 25 minute questionnaire $278,500 20 minute questionnaire
VIP Research and Evaluation	MITN electronic	*$95,000.00*	