

Correlation of Interventions with Indicators	Connect with Others	Eating Better				Move More			Avoid Unhealthy Substances			Number of indicators affected
		Eat more fruits & vegetable	Decrease fast food consumption	Improve proximity to healthy food	Decrease BMI	More exercise	Decrease screen time	Walk/bike short trips	Decrease tobacco use	Decrease prescription drugs abuse	Reduce alcohol use/binge drinking	
5 a day tool kit (EB-3)		X			X							2
Breathe Life Plan (AUS-2)	Decrease depression, improve social contact in healthy ways								X			1
Communities Mobilizing/Alcohol - CMCA (AUS-3)										X		2
Community and School Gardens (EB-2)	X	X										4
Community Swimming Pool (MM-3)	X					X	X					4
Complete Streets (MM-7)	X					X		X				3
Community Read Program (CWO-2)	X									X		2
Education Seminar Series (G-3)	X	X	X				X		X	X	X	7
Expanded FUTP60 Programs (MM-9)	X	X	X			X	X		X			6
Farmers Market Enhancements (EB-4)	X	X	X	X				X				4
Gazebo Concerts (CWO-3)	X							X	X			3
Grocery Store/Mini-Mart/Restaurants (EB-5)		X	X	X								3
Healthy Chefs program (EB-1)	X	X	X				X					4
Healthy Walking/Bicycling Programs (CWO-1)	X						X	X	X	X		5
MCS Employee Fitness Program (MM-4)	X						X	X	X	X		5
Manchester Wellness Coalition Coordinator (G-2)												0
Project SUCCESS (AUS-4)									X	X	X	3
Project TNT (AUS-6)									X			1
Red Barrel Program (AUS-5)										X		1
Rethinking Drinking Program (AUS-1)											X	1
Rural Homes Fitness Programs (MM-5)	X						X	X	X	X		5
Safe Routes to School (MM-8)	X						X	X	X	X		4
Shared-Use Trail (MM-1)	X						X	X	X	X		5
Technology-Directed Assistance (CWO-4)	X											1
Wellness Center - exp. Programs/Members (MM-2)	X						X	X	X	X		4
Winter Activity Programs (MM-6)	X						X	X	X	X		5
<b>Number of Interventions/indicator</b>	<b>17</b>	<b>7</b>	<b>4</b>	<b>2</b>	<b>1</b>	<b>11</b>	<b>12</b>	<b>9</b>	<b>4</b>	<b>5</b>	<b>4</b>	

*Figure 2 – Correlation of Indicators with Interventions*

PLAN MATRIX																
Element	Intervention	Indicator(s) to impact - New interventions only	Primary Target Population				Number of People Impacted	Evidence of effectiveness in existing programs (for impacting CWF Vision)	Collaboration between organizations in community or between committees	Policy, Infrastructure, Systems, Behavior				Best Practice, Recommended in literature, innovative		Total funding request to CWF (for new interventions)
			0-18	19-35	36-65	>66				<250	>250	Policy	Infra-structure	Systems	Behavior or culture	
Move More	MM4-1 Shared-Use Trail	BMI, exercise, screen time, walk, dest	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 150,000
	MM4-2 Wellness Center Exp.	BMI, exercise, screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 40,000
	MM4-3 Community Pool	BMI, exercise, screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 100,000
	MM4-4 MCS Fitness Program	BMI, exercise	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ -
	MM4-5 Rural Homes Fitness	BMI, exercise, screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 17,500
	MM4-6 Winter Activities	BMI, exercise, screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 9,000
	MM4-7 Complete Streets	walking, dest., walk/bike exercise	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 30,000
	MM4-8 Safe Routes to School	BMI, walking, dest., walk/bike exercise	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 7,500
Eat Better	MM4-9 Exp. FUTP60 Programs	BMI, student exercise	X													\$ 20,000
	EB-1 Healthy Chefs Program	F&V, screen time, social conn.	X													\$ 40,000
	EB-2 School/Community Gardens	F&V, exercise, BMI	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 18,000
	EB-3 5-a-Day Portion Kits	F&V	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 20,000
	EB-4 Enhanced Farmers Market	F&V, distance to store	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 106,000
	EB-5 Grocery/Mini Mart/Rest.	F&V, BMI, distance to store	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 9,000
	AUS-1 Rethinking Drinking	Decrease alcohol consumption	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 6,000
	AUS-2 Breathe Life Program	Decrease tobacco usage	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 19,200
Connect With Others	AUS-3 Manchester CIMCA	Decrease alcohol consumption	X				X	X	X	X	X	X	X	X	X	\$ 18,000
	AUS-4 Project SUCCESS	Decrease substance abuse	X				X	X	X	X	X	X	X	X	X	\$ -
	AUS-5 Red Barrel Program	Decrease substance abuse	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 8,000
	AUS-6 Project TNT	Decrease tobacco usage	X													\$ 20,000
	CWC-1 Healthy Walk/Bike Prog	Exercise, BMI, social conn., screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 20,000
	CWC-2 Community Read	Social conn., relate to other indicators	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 8,000
	CWC-3 Gazebo Concerts	Social conn., exercise, screen time	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 4,800
	CWC-4 Tech-Directed Assist	Social conn., relate to other indicators	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 15,000
Unallocated reserves	G-2 MWC Paid Coordinator	Oversight of all indicators	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 60,000
	G-3 Education Seminar Series	Significant indicators affected	X	X	X	X	X	X	X	X	X	X	X	X	X	\$ 17,000

Figure 3 – Manchester Comprehensive Wellness Plan  
Correlation of CWF Element, Intervention, Indicator(s) and Other Factors

## **Correlation with Washtenaw County Health Objectives for the Year 2020**

The Manchester Wellness Coalition examined the published Washtenaw County Health Objectives for 2020<sup>9</sup>. The goals for 2012-2015 Manchester health and wellness improvement developed by the Coalition align with the intent of the following County goals, noting the appropriate objective number in Reference 9. Our plan shows good alignment with several county goals.

### Healthy Kids

- #1 – Increase proportion of children attaining 60 minutes of physical activity five days per week
- #2 – Increase consumption of five or more servings of fruits and vegetables per day
- #3 – Decrease the rate of overweight children

### Substance Abuse – Teens

- #9 – Reduce proportion of high school students who are current smokers
- #10 – Reduce proportion of middle school students who have had at least one alcoholic drink in the last month
- #11 – Reduce proportion of middle school students who have ever used marijuana

### Healthy Adults

- #20 – Increase the proportion of adults consuming five or more servings of fruits and vegetables per day
- #21 – Decrease the proportion of adults who are current smokers
- #22 – Increase the proportion of adults who attain at least 30 minutes of moderate activity five days per week OR 20 minutes of vigorous activity three days per week
- #23 – Increase the proportion of adults with a disability who participate in at least 10 minutes of moderate or vigorous activity each week
- #24 – Decrease the proportion of adults who are overweight

### Substance Abuse – Adults

- #28 – Decrease the proportion of adults 18-29 years who binge drink
- #29 – Reduce illicit drug use in adults 18-29

### Healthy Older Adults

- #42 – Increase the proportion of adults 65 or older who attain at least 30 minutes of moderate activity three days per week

### Healthy Communities

- #49 – Increase the proportion of residents with pedestrian sidewalks, paths or trails in or near their neighborhood
- #50 – Increase the proportion of residents using alternative modes of transportation (not driving alone) to and from work

## PROPOSED 4-YEAR PLAN AND BUDGET

Figure 4 provides an overall view of the 4-Year Plan and corresponding budget requests to the Chelsea-Area Wellness Foundation, for the period 2012-2015.

Abbr.	Name	Rank	2012	2013	2014	2015
AUS-1	Rethinking Drinking	1	\$ 1,500	\$ 1,500	\$ 1,500	\$ 1,500
AUS-2	Breathe Life Plan	2	\$ 4,800	\$ 4,800	\$ 4,800	\$ 4,800
AUS-3	Manchester CMCA (Voices)	5	\$ -	\$ 6,000	\$ 6,000	\$ 6,000
AUS-4	Project SUCCESS	3	\$ -	\$ -	\$ -	\$ -
AUS-5	Red Barrel Program	4	\$ -	\$ 4,000	\$ 2,000	\$ 2,000
AUS-6	Project TNT	2	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
CWO-1	Healthy Walking/Biking Programs	1	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
CWO-2	Community Read	2	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000
CWO-3	Gazebo Concerts	3	\$ 1,200	\$ 1,200	\$ 1,200	\$ 1,200
CWO-4	Technology Directed Assistance	4	\$ -	\$ 5,000	\$ 5,000	\$ 5,000
MM-1	Shared Use Trail	1	\$ 100,000	\$ 50,000	\$ -	\$ -
MM-2	Wellness Center - Expanded Programs	2	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000
MM-3	Community Center - Pool	8	\$ -	\$ -	\$ 50,000	\$ 50,000
MM-4	MCS Employee Fitness Program	9	\$ -	\$ -	\$ -	\$ -
MM-5	Rural Homes Fitness	5	\$ 2,500	\$ 5,000	\$ 5,000	\$ 5,000
MM-6	Winter Activities	7	\$ -	\$ 3,000	\$ 3,000	\$ 3,000
MM-7	Complete Streets	4	\$ -	\$ 10,000	\$ 10,000	\$ 10,000
MM-8	Safe Routes to School (SR2S)	6	\$ -	\$ 2,500	\$ 2,500	\$ 2,500
MM-9	FUTP60 Programs - MCS	3	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
EB-1	Healthy Chefs	2	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000
EB-2	Community and School Gardens	4	\$ 7,000	\$ 5,000	\$ 3,000	\$ 3,000
EB-3	Five-a-day toolkit	1	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
EB-4	Farmers Market Enhancements	5	\$ 1,000	\$ 5,000	\$ 75,000	\$ 25,000
EB-5	Grocery Store, Restaurants, MM	3	\$ -	\$ 3,000	\$ 3,000	\$ 3,000
G-2	MWC Paid Coordinator	1	\$ -	\$ 20,000	\$ 20,000	\$ 20,000
G-3	Education Seminar Series	1	\$ 2,000	\$ 5,000	\$ 5,000	\$ 5,000
	Unallocated reserves		\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
	<b>TOTAL</b>		<b>\$ 167,000</b>	<b>\$ 178,000</b>	<b>\$ 244,000</b>	<b>\$ 194,000</b>

*Figure 4 – Proposed 4-Year Timeline and Budget*

## ONGOING COALITION RESPONSIBILITIES

The Manchester Wellness Coalition was provided a \$5,000 budget to assist with Coalition startup, promotion and plan development activities.

As of Revision 1 (June 15, 2012), the Coalition has expended \$491 of this fund for membership in the Manchester Area Chamber of Commerce, for miscellaneous advertising expenses, for printing of the community outreach booklet, and for promotional table covers. We expect to utilize additional funds for US Postal Service EDDM™ mailings informing the Manchester community about the Plan and other Manchester Wellness Coalition activities, miscellaneous printing costs, public meeting expenses, project “roll-out” expenses and other promotional items, and engaging expertise as may be needed.

The Manchester Wellness Coalition has identified and will implement the following actions as part of its ongoing responsibilities in the 2012-2015 period.

1. We have prepared a funding intervention for a part-time paid Manchester Wellness Coalition coordinator, to carry forward with the 4-Year Plan implementation. We will work with CWF and the other coalitions on the Community Advisory Council to determine the best approach to structuring this position.
2. We will formalize a permanent organization, consisting of a Board of Trustees, to oversee the annual preparation of Plan updates, to provide general oversight of funds and the use of funds by partner fiduciaries, to liaison with the CWF and other 5H coalitions, and to direct the work of the part-time coordinator. We will consider whether this should be a 501(c)3 organization, to allow the Coalition to directly serve as a non-profit host fiduciary organization for funding.
3. We will file an annual report with the Chelsea-Area Wellness Foundation documenting progress on interventions and funds utilization. The report will also discuss lessons learned, ability to successfully manage and execute several interventions at one time, and changes to be implemented in the next year's plan as a result of these lessons.
4. We will oversee the preparation of detailed grant requests with full budget details by the oversight organizations, which are formulated from the interventions approved in this plan.
5. We will establish an MWC webpage and Facebook presence for posting updates on the MWC activities.
6. We have established an e-mail address for communications concerning the Coalition's activities: [manchesterwellnesscoalition@gmail.com](mailto:manchesterwellnesscoalition@gmail.com)

## REFERENCES

1. *Manchester Community Assessment*, January 17, 2011, submitted to the Chelsea-Area Wellness Foundation, approved March 29, 2011.
2. *Health Improvement Plan of Washtenaw County (HIP) Survey Data 2010*, with 1995-2005 trend data as available, Washtenaw County Public Health, <http://hip.ewashtenaw.org>
3. *2010 Washtenaw County HIP Data Analysis*, prepared by Manchester Wellness Coalition, October 30, 2011
4. *Michigan Community Health Assessment (Healthy Community Checklist)* <http://mihealthtools.org/checklist>, April 30, 2010 data
5. *The Michigan Profile for Healthy Youth (MiPHY) Survey*, Michigan Department of Education, 2010, Washtenaw County report, [http://www.michigan.gov/mde/0,1607,7-140-28753\\_38684\\_29233\\_44681---,00.html](http://www.michigan.gov/mde/0,1607,7-140-28753_38684_29233_44681---,00.html)
6. *Nutritional Environments Assessment Tool (NEAT)*, [www.mihealthtools.org/neat](http://www.mihealthtools.org/neat)
7. *Community Focus: Substance Abuse Indicators in Livingston and Washtenaw Counties, SAFE & SOUND Survey*, The Substance Abuse Factors in our Environment and Survey for Understanding Neighborhood Determinants, January 2011, [http://www.ewashtenaw.org/government/departments/public\\_health/health-promotion/substance-abuse-prevention/community-focus-report-1](http://www.ewashtenaw.org/government/departments/public_health/health-promotion/substance-abuse-prevention/community-focus-report-1)
8. *Promoting Active Communities Survey 2010*, [www.mihealthtools.org/communities](http://www.mihealthtools.org/communities)
9. *Washtenaw County Health Objectives for the Year 2020*, Health Improvement Plan of Washtenaw County, 2007
10. *Community Visioning Session – November 30, 2005 DDA Visioning Workshop*, Manchester Downtown Development Authority [http://www.dda-manchester.org/about/DDA\\_Plan/plan.html](http://www.dda-manchester.org/about/DDA_Plan/plan.html)
11. Chelsea-Area Wellness Foundation, [www.5HealthyTowns.org](http://www.5HealthyTowns.org), miscellaneous resources

**APPENDIX A-1**

**Members of the  
Manchester Wellness Coalition**

### **Eat Better Subcommittee**

**Ruth VanBogelen, Chair** – Manchester Civic Club, Manchester Township  
Barry Allen – Manchester Lions Club, Sharon Township  
Peggy Allen – Manchester Lions Club, Sharon Township  
Nancy Loudin , RN - Freedom Township  
Kevin Mowrer – Principal, Manchester High School  
Donna Clark – Retired Teacher, Healthy Chefs Coordinator  
Laura Seyfried – Executive Director, Community Resource Center  
Irene Stedman – Manager, Manchester Farmers Market  
Andy Supers – Manchester Village  
Elizabeth Beaudoin, DVM - Manchester Township  
Char Major – Manchester Township

### **Move More Subcommittee**

**Ray Berg, Chair** – Manchester Area Chamber of Commerce, Freedom Township  
Jennifer Alexa – Freedom Township Clerk  
Amelia Woods – Member, Village Council, Manchester  
Mark VanBogelen – Manchester Civic Club, Manchester Township

### **Connect with Others Subcommittee**

**Karl Racenis, Chair** – Chair, Manchester Downtown Development Authority  
Laura Seyfried – Executive Director, Community Resource Center  
Heather Sturm – Director, Manchester District Library

### **Avoid Unhealthy Substances Subcommittee**

**Peter Girz, Chair**, LLMSW- Karen Bergbower & Associates  
Erin Murphy, MA – Karen Bergbower & Associates  
Kathy Benedict, RN - Chelsea Community Hospital  
Rev. Peter Harris – Pastor, Sharon United Methodist Church  
Dennis Sullivan, M.A. - Bridgewater Township  
Trenda Eversole – Resident

### **Advisory Members**

Jeff Wallace – Village Manager, Manchester  
Dr. Dana Andrews – Manchester Village, Andrews Family Chiropractic  
Reiley Curran, MPH - Chelsea Community Hospital  
Sarah Andrews – Manchester Village  
Cherie Vannatter – Superintendent, Manchester Community Schools  
Madeline Rickert – Student, Manchester High School  
Pat Vaillencourt – Council President, Manchester; owner Coffee Mill/Black Sheep Tavern  
Melissa Schook – Chelsea Community Hospital  
Diane Rickert – Bridgewater Township  
Jennifer Schemke-Irvine - Resident  
Kari Newman - Chelsea Area Wellness Foundation Board of Trustees, Manchester Village  
Karen Hinkley - Manchester Village  
Kelly Ball – Manchester Community Schools, Community Education



**APPENDIX A-2**

**Key Health Indicators**

**Evaluated by the**

**Manchester Wellness Coalition**

The Coalition selected the following Western Washtenaw or Manchester-specific indicators to measure the community's current health and wellness, with comparisons to Washtenaw County as a whole. These indicators are derived from the HIP, NEAT and MiPHY sources. Other specialized data sources are listed on the individual intervention tables as noted. The potential association with a Coalition subcommittee (vision statement) is noted in *bold italics*.

### 1. OVERWEIGHT/OBESITY BASED ON BMI (HIP) – *Eating Better, Move More*

63% of adults in Western Washtenaw are overweight or obese in 2010, compared to 57% for the county as a whole. This is a negative trend from 2005, when only 56% of Western Washtenaw adults were overweight or obese, and a continuously growing trend since 1995, when 44% reported as overweight/obese.

39% of children over two years of age in Western Washtenaw are overweight or obese, compared to 16% of the county as a whole. Only 11% of Ann Arbor, and 21% of Ypsilanti are overweight or obese. This is an increase of 70% in 5 years, up from 23% overweight/obese in 2005.

### 2. GENERAL HEALTH INDICATORS (HIP)

Western Washtenaw residents report the highest number of days per month that their poor physical or mental health kept them from doing their usual activities, such as self-care, work, or recreation (average of 6.4 days per month, vs. 4.1 days for the county as a whole). – *Connecting with Others*

22% of adults have been told they have high blood pressure (down from 26% in 2005), and 23% were told they have high cholesterol by their physician. – *Eating Better*

### 3. FRUITS & VEGGIES (HIP, MiPHY) – *Eating Better*

Only 8% of Western Washtenaw residents report eating five or more servings per day, compared to 24% of Ann Arbor, and 19% of Ypsilanti. Trend is downward. Another Manchester survey identified the primary reason as “not thinking about eating 5 fruits and vegetables”.

- Western Washtenaw children eat an average of 3.9 servings per day (up from 2.5 in 2005), compared to 3.3 for county as a whole.
- 48% of 7th grade students and 38% of Manchester High School students eat 5+ servings per day.
- Average consumption for adults in Western Washtenaw is 2.9 servings per day (down from 3.9 in 2005), compared to 3.1 for the county as a whole.

### 4. MEALS EATEN AS A HOUSEHOLD (HIP) – *Connecting with Others*

Adults in Western Washtenaw eat more meals together with people in their household than the rest of the county; 47% of adults eat at least one meal together with people in their household