



## **Community Health Needs Assessment 2018**

**HSHS St. Clare Memorial Hospital**

An assessment of Oconto County, Wisconsin conducted jointly by HSHS St. Clare Memorial Hospital, Bellin Health Oconto Hospital and Oconto County Public Health.

Provisions in the Affordable Care Act (ACA) require charitable hospitals to conduct a Community Health Needs Assessment (CHNA) and adopt implementation strategies to meet the needs identified. The CHNA is a systematic process involving the community to identify and analyze community health needs as well as community assets and resources in order to plan and act upon priority community health needs. This process results in a CHNA report which is used to develop implementation strategies based on the evidence and assets and resources identified in the CHNA process.

Triennially, HSHS St. Clare Memorial Hospital conducts a CHNA and adopts an implementation plan by an authorized body of St. Clare Memorial Hospital in the same tax year, and makes the report widely available to the public. St. Clare Memorial Hospital's previous CHNA report and implementation plan was conducted and adopted in FY2015.

In FY2018 (July 1, 2017 through June 30, 2018), HSHS St. Clare Memorial Hospital conducted its CHNA in partnership with representatives from the community. Upon completion of the CHNA, the hospital developed a set of implementation strategies and adopted an implementation Plan to address priority community health needs. The population assessed was Oconto County, Wisconsin. Data collected throughout the assessment process was supplemented with qualitative data gathered through a CHNA steering committee with broad community representation, community conversations held with key informants, focus groups, secondary data, and the opinions of community key stakeholders obtained via a "Community Event" held on Dec. 6, 2017.

### **Identification and prioritization of needs**

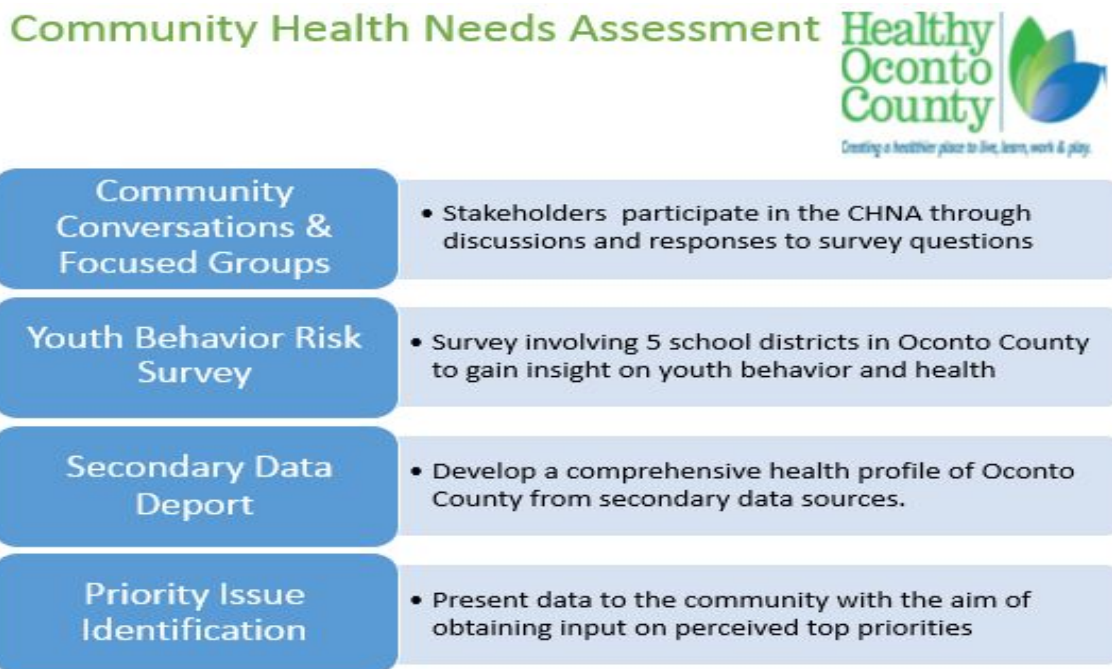
The following health needs were identified based on burden, scope, severity and urgency of the health need; the health disparities associated with the health need; the importance the community places on addressing the health need; the community assets and resources that could be leveraged through strategic collaboration in HSHS St. Clare Memorial Hospital's service area; the secondary data sources; and local expertise and input.

Health needs:

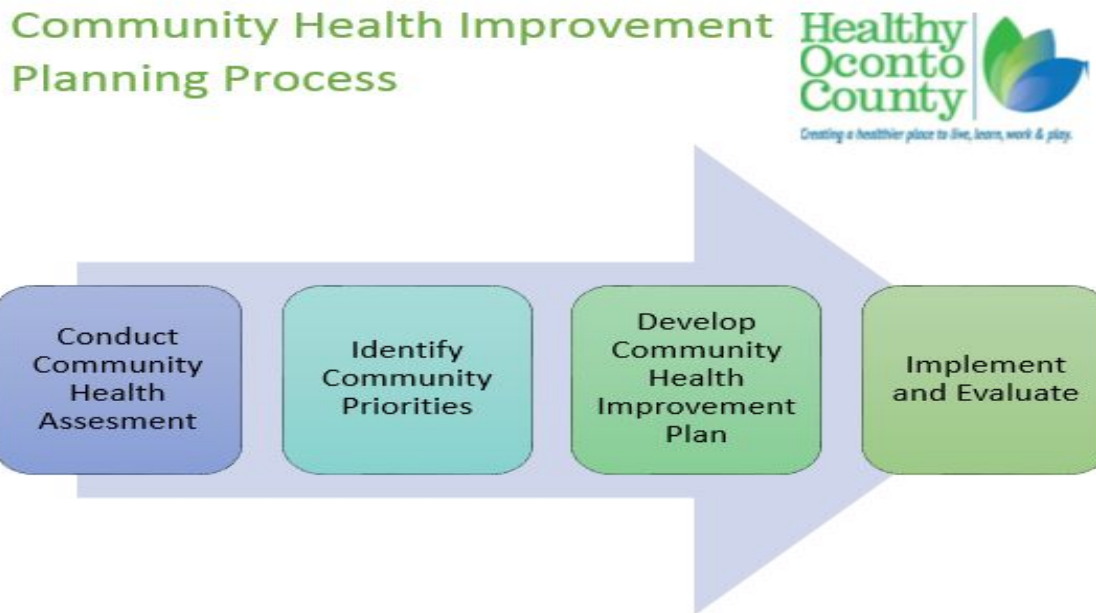
- Alcohol and other drug abuse (AODA)
- Physical activity and nutrition
- Mental health

## Implementation plan development

As part of the engagement process with key stakeholders, attention was given to natural partnerships and collaborations that will be used to operationalize the implementation plan. The implementation plan is considered a “living document” – a set of strategies that can be adapted to the lessons learned while implementing community benefit activities and initiatives relevant to the priority needs. The broader set of community health needs will continue to be monitored for consideration as future focus areas.



## Hospital background



HSHS St. Clare Memorial Hospital is a critical access hospital located in Oconto County, Wisconsin. For more than 97 years, the hospital has been the leader in health and wellness in Oconto County. HSHS St. Clare Memorial Hospital in partnership with Prevea Health provides a wide range of specialties, including orthopedics, general surgery, digestive health, heart and vascular, neurology, sports medicine, pulmonology, physical, occupational and speech therapy, ear, nose, and throat, and audiology.

HSHS St. Clare Memorial Hospital partners with other area organizations to address the health needs of the community, living its mission *to reveal and embody Christ's healing love for all people through our high quality Franciscan health care ministry*, with a preference for the poor and vulnerable. HSHS St. Clare Memorial Hospital is part of Hospital Sisters Health System (HSHS), a highly-integrated health care delivery system serving more than 2.6 million people in rural and mid-sized communities in Illinois and Wisconsin. HSHS generates approximately \$2 billion in operating revenue with 15 hospitals and more than 200 physician practice sites. Our mission is carried out by 14,000 colleagues and 2,100 physicians who care for patients and their families in both states.

Hospital Sisters Health System has a rich and long tradition of addressing the health of the community. This flows directly from our Catholic identity. In addition to community health improvement services guided by our triennial CHNA process, HSHS St. Clare Memorial Hospital contributes to other needs through our broader community benefit program including health professions education, subsidized health services, research and community building

activities. In FY2017, HSHS St. Clare Memorial Hospital’s community benefit contributions totaled more than \$3,658,890 million.

**Current hospital services and assets**

<b>Major Centers &amp; Services</b>	<b>Statistics</b>	<b>New Services &amp; Facilities</b>
<ul style="list-style-type: none"> <li>● Anesthesiology</li> <li>● Breast Health Program</li> <li>● Business Health Services</li> <li>● Cancer Treatment</li> <li>● Cardiology Services</li> <li>● Diabetes Education</li> <li>● Emergency Services</li> <li>● Family Medicine</li> <li>● Gastroenterology</li> <li>● Infectious Diseases</li> <li>● Intensive Care Unit</li> <li>● Internal Medicine</li> <li>● Laboratory</li> <li>● Medical Imaging</li> <li>● Neurology</li> <li>● Nutrition Education</li> <li>● Oncology</li> <li>● Ophthalmology</li> <li>● Orthopedic Services</li> <li>● Pain Management</li> <li>● Pathology</li> <li>● Pediatric/Family Medicine</li> <li>● Pharmacy</li> <li>● Podiatry</li> <li>● Pulmonology</li> <li>● Rehabilitation</li> <li>● Sleep Lab</li> </ul>	<ul style="list-style-type: none"> <li>● Total Beds: 10</li> <li>● Total Colleagues: 154</li> <li>● Bedside RNs: 45</li> <li>● Inpatient admissions: 427</li> <li>● ED visits: 4260</li> <li>● Births: 0</li> <li>● Inpatient surgeries: 125</li> <li>● Outpatient surgeries: 664</li> <li>● Physicians on Medical Staff: 175</li> <li>● Volunteers: 39</li> <li>● Community Benefit: 3.6. million</li> </ul>	<ul style="list-style-type: none"> <li>● Medical Service Building. Date 2015</li> <li>● TeleStroke Medicine &amp; Tele Emergency Department Consultations</li> <li>● Hyperbaric Therapy</li> <li>● Regional Surgery Center.</li> <li>● Regional Dialysis Center</li> </ul>

<ul style="list-style-type: none"> <li>● Surgical Services</li> <li>● Swing Bed</li> <li>● Urgent Care</li> <li>● Urology</li> <li>● Vascular Health</li> <li>● Women's Health</li> <li>● Wound Care/Hyperbaric Medicine</li> </ul>		
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**Hospital accreditations and awards**

American College of Radiology Accreditation (ARC) 2016

**HSHS Awards for 2017:**

- Zero Surgical Site Infections
- Zero C-difficile Infections
- Zero MRSA Infections
- Zero CLABSI
- Zero Cauti Infections

**Community served by the hospital**

Although HSHS St. Clare Memorial Hospital serves Oconto County and beyond, for the purposes of the CHNA, HSHS St. Clare Memorial Hospital defined its primary service area and populations as Oconto County. HSHS St. Clare Memorial Hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

<b>Demographic Profile of Oconto County</b>			
<b>Characteristics</b>	<b>Oconto County 2015</b>		<b>WI 2015</b>
Total Population	37,476		5,742,117
Median Age (years)	45.4		39
<b>Age</b>	<b>N</b>	<b>%</b>	
0-14 years	6,387	17%	1,082,933
15-44 years	12,090	32.3%	2,212,335

45-64 years	12,313	32.9%	1,598,652	
65 years and over	6,686	17.8%	848,197	
<b>Gender</b>				
Female	18,327		2,890,732	
Male	19,149		2,851,385	
<b>Race and Ethnicity</b>				
White (Non-Hispanic)	36,101	96.3%	4,967,124	86.5%
Black or African American (Non-Hispanic)	92	0.2%	360,792	6.3%
Native American or Alaska Native	363	1.0%	50,449	0.9%
Asian (including Hmong)	166	0.4%	143,732	2.5%
Hispanic or Latino	614	1.6%	364,558	6.3%
Some Other Race	262	0.7%	96,057	1.7%
<b>Speaks language other than English at home</b>				
English	97.1%		91.3%	
Spanish	1.5%		4.6%	
Indo-European	1.1%		2.0%	
Asian and Pacific Island	0.1%		1/7%	
Other Languages	0.2%		0.4%	
<b>Median household income -2015 dollars</b>	\$ 52,765		\$53.357	
<b>Percent below poverty in the last 12 months<sup>^</sup></b>	9.4%		13.0%	
<b>Education level of adults 25 years and older- Sheboygan County</b>				
Less than high school degree	9.8%		8.9%	
High school degree	43.7%		32.0%	
Some college/associates	31.2%		31.2%	
Bachelor's degree or higher	15.4%		27.8%	

Data from American Community Survey 2015 estimates. Accessed at: [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_15\\_5YR\\_DP05&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_DP05&prodType=table), [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_15\\_5YR\\_S1601&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_S1601&prodType=table), and [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_15\\_5YR\\_S1501&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_S1501&prodType=table) on March 20,2018.

### **Process and methods used to conduct the Assessment**

HSHS St. Clare Memorial Hospital led the planning, implementation and completion of the Community Health Needs Assessment in partnership with Bellin Health Oconto Hospital and Oconto County Public Health.

### **Internal**

HSHS St. Clare Memorial Hospital spent 12 months developing the CHNA, identifying and prioritizing community health needs for its service area, and formulating an implementation plan to guide ongoing population health initiatives with like-missioned partners and collaborators.

These planning and development activities included the following steps:

- Convene the HSHS Eastern Wisconsin community benefit team
- Determine internal capacity for the collaborative process
- Allocate monetary resources to support the community-wide effort
- Present to Leadership to gain permission for colleagues to track and document community benefit efforts in CBISA
- Define the role of the Community Benefits Facilitator, inclusive of the EMS Liaison role
- Share the results of the needs assessment and obtain feedback for the implementation plan from the Hospital Advisory Committee
- Present the CHNA and implementation plan to HSHS St. Clare Memorial Board for approval

### **External**

HSHS St. Clare Memorial Hospital leveraged existing relationships to gain additional insights into community health needs in HSHS St. Clare Memorial Hospital's service area. External components and steps included:

- Creating a regional steering committee consisting of HSHS St. Clare Memorial Hospital, Bellin Health Oconto Hospital and Oconto County Public Health
- Led community forums with individuals and groups including school superintendents, business owners, EMS personnel, law enforcement, parent groups, county board supervisors, circuit judge, and the community college
- Conducted a youth risk behavior survey in all five school districts in the county
- Gathered statistics from various data sources reflecting the health of Oconto County

### **Defining the purpose and scope**

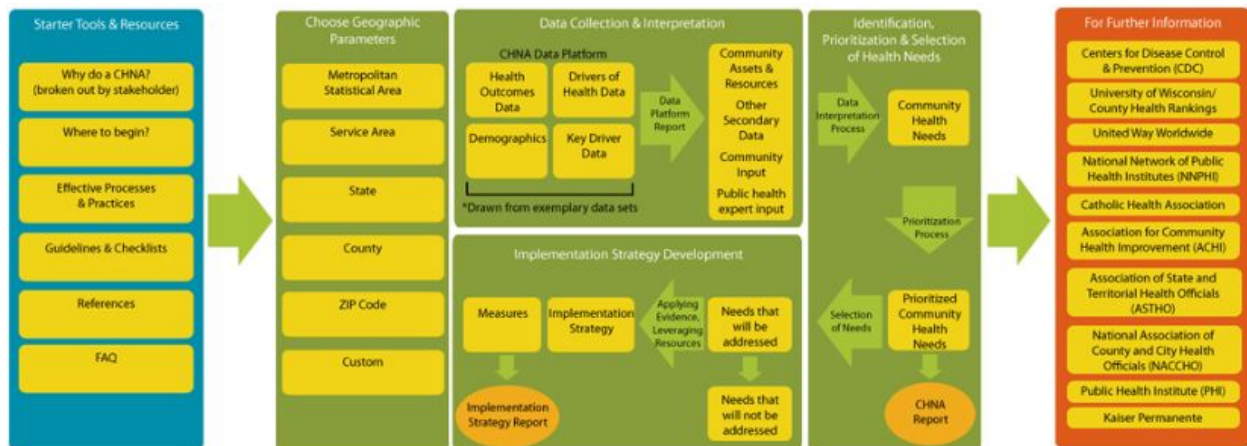
The purpose of the CHNA was to 1) evaluate current health needs of HSHS St. Clare Memorial Hospital's service area, 2) identify resources and assets to support initiatives that address the health priorities identified, 3) develop an implementation plan to organize and help coordinate collaborative efforts impacting the identified health priorities, and 4) establish a system to track,



report and evaluate efforts that will impact identified population health issues on an ongoing basis.

### Data collection and analysis

The overarching framework used to guide the CHNA planning and implementation is based on the Catholic Health Association’s (CHA) Community Commons CHNA flow chart below:



*Adapted from the work of Kaiser Permanente.*

### Data sources

The CHNA process utilizes both primary and secondary data. Some action team members in Oconto County were enlisted to compile a secondary data report to supplement the primary data. This report summarizes the demographic and health-related information for Oconto County.

- County Health Rankings and Roadmaps
- American Community Survey – Census Bureau
- Wisconsin Department of Health Services – Data & Statistics
- Wisconsin Interactive Statistics on Health (WISH)
- Oconto County Health Department
- Oconto County Online Youth Risk Behavior Surveys

The data was gathered into a written report/presentation and shared with community members at key community leader meeting (described below).

### **Input from persons who represent the broad interests of the community**

HSHS St. Clare Memorial Hospital is committed to addressing community health needs in collaboration with local organizations and other area health care institutions. In response to the FY2015 CHNA, the hospital planned, implemented and evaluated implementation strategies to address the top three identified community health needs: Alcohol and other drug abuse (AODA), physical activity & nutrition, and mental health. This year's assessment expanded on that collaboration, actively seeking input from a broad cross-section of community stakeholders. The goal was to reach a consensus on priorities for which to focus human, material and financial resources.

### **Input from community stakeholders**

#### **Community conversations**

Community stakeholders were asked to actively participate in the CHNA process. In February 2017, survey questions were discussed with over 100 people throughout the community including school administrators and guidance counselors, behavioral health counselors and mental health therapists, child welfare agency workers, EMS personnel, law enforcement, food pantry managers, county supervisors, civic organizations, and parent groups.

#### **Focus group meetings**

Physical activity and nutrition workgroup meetings were held on Jan. 24, March 21, May 23, July 26 and Sept. 27, 2017. Approximately ten people attended each session to discuss strategies for gaining healthy food donations to area food pantries, and strategies to increase physical activity.

An AODA workgroup held monthly meetings with community stakeholders. The workgroup focused on understanding the AODA issues in Oconto County. They reviewed data and engaged in conversations with employers, government, law enforcement, school administrators, mental health providers and health care providers. Below are the results from these conversations:

- 98 percent stated alcohol or other drug abuse is an issue in Oconto County
- 95 percent stated alcohol or other drug abuse in Oconto County is a concern for them personally
- 70 percent stated alcohol or other drug abuse in Oconto County created problems for them or their business
- 66 percent stated they were unsure if Oconto County was doing enough to fight alcohol or other drug abuse
- Available resources, culture and law/legal restraints were identified as barriers to reducing alcohol or other drug abuse in Oconto County

- Education, more resources and law/legal reforms were identified as ways to fight alcohol or other drug abuse issues in Oconto County.

Approximately 100 people, representing 22 groups, attended these forums. Using the information from these conversations and the youth behavior risk survey (YBRS), the AODA workgroup identified education/awareness, culture and resources as the focus of their efforts.

### **Education/Awareness**

It is imperative that Oconto County residents understand the impact and/or misuse of alcohol and drugs. We must take steps to incorporate education early surrounding the misuse of alcohol and other drugs in an attempt to offset the issues that surround alcohol/other drug abuse (e.g. lost work time, truancy, vandalism, DWI/DUI, injuries/fatalities, etc.).

### **Culture**

It is important to understand that part of the social culture within Oconto County and our society involves gatherings where alcohol consumption is part of the social ritual/norm of everyday events. Same is true regarding taking prescription medication for routine aches and pains. Both practices carry a danger of addiction. This was a significant issue shared amongst the various stakeholders.

Other components that contribute to this issue include, but not limited to, sharing medication, inability to obtain prescription medication, and the transition to street drugs due to ease of accessibility and cost, to name a few.

There's a strong desire to study these issues and create interventions that would have a significant impact on these issues.

### **Resources**

It was evident that people were a loss of what to do, who to talk with and where to go to obtain further education to increase their knowledge about this issue.

The AODA workgroup obtained a grant through the Medical College of Wisconsin to develop a plan that would address the three themes over the next three years. The grant dollars were used to bring on a consultant who lead the workgroup through this process. The AODA intervention plan will be finalized in June 2018.

### **Youth Behavior Risk Survey (YBRS)**

The survey was conducted to monitor health-risk behaviors of the nation's high school students. These behaviors, in turn, result in the most significant causes of both mortality and morbidity during youth and adulthood. The behaviors monitored by the Wisconsin YBRS include traffic

safety, weapons and violence, suicide, tobacco use, alcohol and other drug use, sexual behavior, and diet, nutrition and exercise.

The YBRS was conducted February through May 2017 in the five school districts that operate within Oconto County. There were 932 students in grades 9-12 that completed the survey.

## Community health needs assessment event



*Save the Date and Plan to Come  
to the  
Healthy Oconto County Community Health Improvement Assessment 2017*

*Wednesday December 6, 2017  
8:00am-11:30am*

*Bellin Health Bond Community Center  
1201 Park Avenue  
Oconto, WI 54153*

*Join us in reviewing the health and lifestyle data for residents of Oconto  
County and identifying health focus improvement areas for 2017-2020*

*RSVP via email by November 30 to: [brenda.refberg@bellin.org](mailto:brenda.refberg@bellin.org)*

Light refreshments will be served

Sponsored by:



Healthy Oconto County steering committee brought together community stakeholders to participate in the CHNA process. The community health assessment data report was emailed to the community stakeholders prior to the event on Dec. 6, 2017. The presentation also had links to

other downloadable reports which allowed participants to review data before the meeting. Twenty seven individuals attended the event which was held at Bellin Health Bond Community Center in Oconto.

A presentation was given by members of the Healthy Oconto County steering committee: Kathy Henne, Chris Culotta, Debra Konitzer and Laura Cormier.

The presentation included:

- Welcome, introductions and objectives of the day
- Healthy Wisconsin 2020 framework
- Social determinants of health and community data
- Focus on priority areas identified in the 2016 Oconto County CHNA
  - Alcohol and Other Drugs
  - Physical Activity and Nutrition

The presentations focused on data reports, task force accomplishments and challenges, objectives and goals, and recommendations.

Following the presentation, steering committee members moderated round table discussions for stakeholders to further discuss the potential strategies within the top three priority areas that will be included in the 2018-2020 Healthy Oconto County community health improvement plan.

At the end of the event, attendees were informed to expect a follow-up survey to provide feedback on the event, express interests in becoming involved in the action teams, and to ask questions about data.

### **Steering committee**

Kathy Henne, RN

Debra Konitzer

Laura Cormier

HSHS St. Clare Memorial Hospital

Oconto County Public Health

Bellin Oconto Hospital

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[debbie.konitzer@co.oconto.wi.us](mailto:debbie.konitzer@co.oconto.wi.us)

[Laura.Cormier@bellin.org](mailto:Laura.Cormier@bellin.org)

Chris Culotta

WI DHS, Division of Public Health-NER

[Christophered.Culotta@dhs.wisconsin.gov](mailto:Christophered.Culotta@dhs.wisconsin.gov)

### **Participants**

- Oconto County Public Health\*
- HSHS St. Clare Memorial Hospital
- Bellin Health Oconto Hospital
- UW-Extension – Oconto County
- Wolf river Aging Disability Resource Center (ADRC)\*
- Gillett School District\*
- Suring School District\*
- Lena School District\*
- Nurses Nook\*
- Marinette County Public Health
- Hillside Assembly Church Food Pantry\*
- Tri-City United Way
- Oconto County Board of Health
- Newcap\*
- Community members at large

*\*Denotes groups representing medically underserved, low-income and minority populations.*

### **Input from members of medically underserved, low-income and minority populations**

Hospital Sisters Health System and HSHS St. Clare Memorial Hospital are committed to promoting and defending human dignity, caring for persons living in poverty and other vulnerable persons, promoting the common good, and stewarding resources. We believe that the CHNA process must be informed by input from the poor and vulnerable populations we seek to serve. To ensure that the needs of these groups were adequately represented, we included representatives from both hospitals within the county, public health, United Way, local food pantries, Aging and Disability Resource Center, local school districts, and Newcap. These organizations serve the under-resourced in our community, including low-income seniors, children living in poverty, and families who struggle with shelter and food insecurity. Representatives of these organizations, who work directly with their constituents, have extensive knowledge and quantifiable data regarding the needs of their service populations. Actively including these organizations in the CHNA process was critical to ensure that the needs of the

most vulnerable persons in our communities were being shared and addressed in the CHNA process and development of related implementation strategies.

### **Input on FY2015 CHNA**

No written comments were received regarding the FY2015 CHNA.

### **Prioritizing significant health needs**

As part of the identification and prioritization of health needs, HSHS St. Clare Memorial Hospital considered the feasibility and effectiveness of possible interventions that could impact these health priorities; the burden, scope, severity, or urgency of the health need; the health disparities associated with the health needs; the importance the community places on addressing the health need; and other community assets and resources that could be leveraged through strategic collaboration in HSHS St. Clare Memorial Hospital's service area.

Based on the CHNA planning and development process described, the following community health needs were identified:

- Alcohol and other drug Abuse (AODA)
- Physical activity/nutrition
- Mental health

Access to care was also identified as a health priority. Due to a lack of county-wide resources, a formal workgroup has not been established. As a result, access is a component of each of the above identified health priorities.

### **Overview of priorities**

#### **Alcohol and other drug abuse (AODA)**

Excessive alcohol use is responsible for approximately 88,000 deaths in the United States each year<sup>1</sup> and, in 2010, \$249 billion in economic costs.<sup>2</sup> In 2013, the economic cost of drinking was about \$6.8 billion in Wisconsin and \$66.1 million in Oconto County.<sup>3</sup>

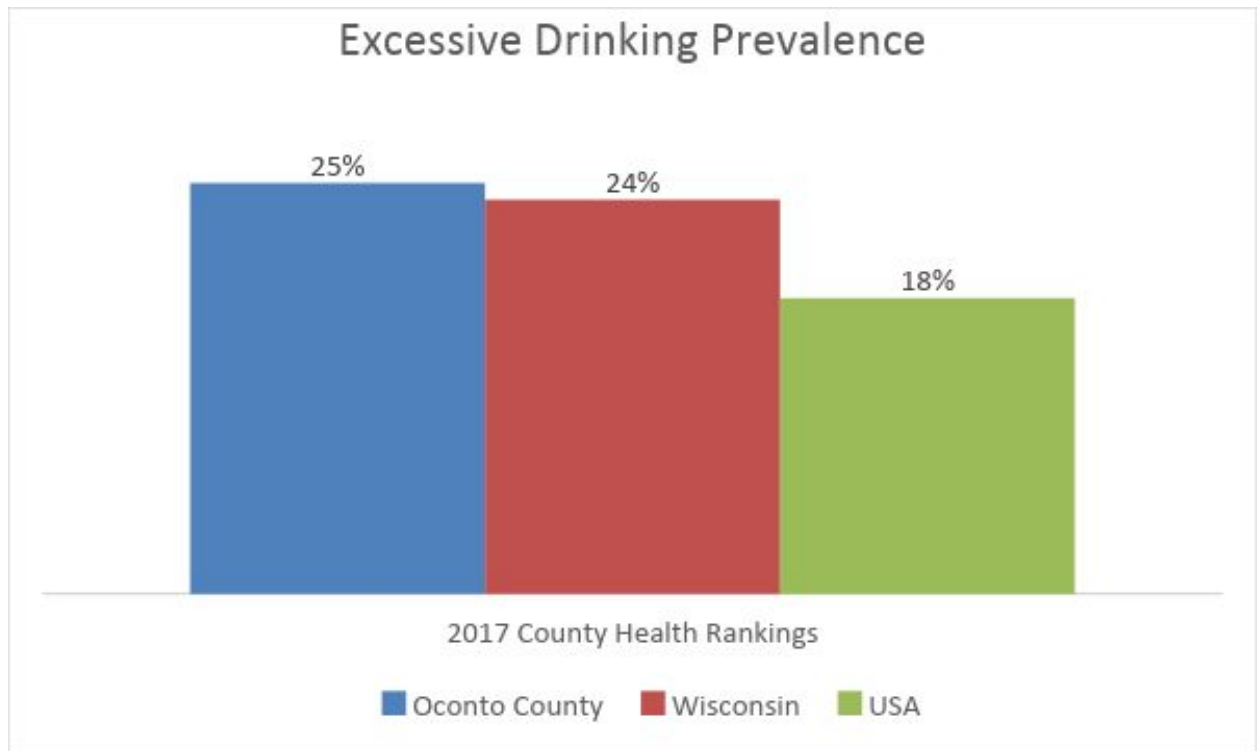
Source: 1. Centers for Disease Control and Prevention (CDC). [Alcohol-Related Disease Impact \(ARDI\) Web site](#). Source:

Source: 2. Sacks JJ, Gonzales KR, Bouchery EE, Tomedi LE, Brewer RD. [2010 National and State Costs of Excessive Alcohol Consumption](#). *Am J Prev Med* 2015; 49(5):e73–e79.

Source: 3. Black PD, PaltzerJT. The Burden of Excessive Alcohol Use in Wisconsin. University of Wisconsin Population Health Institute, March 2013

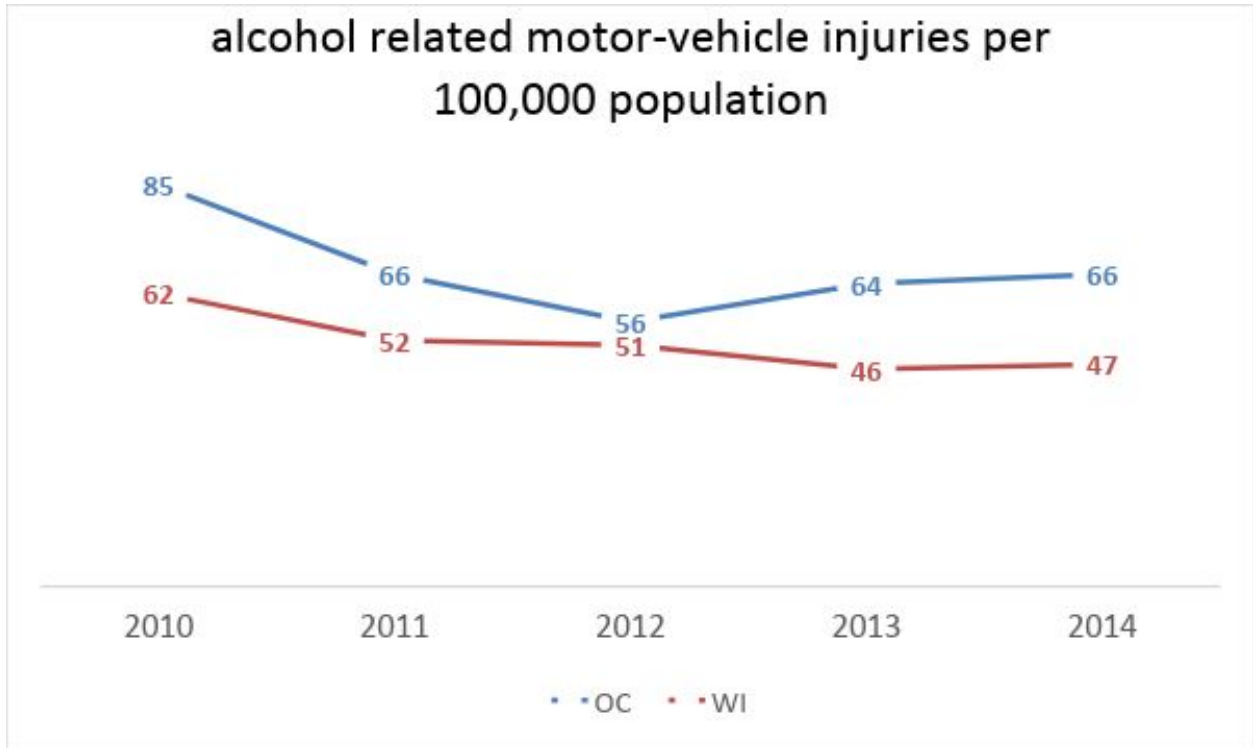
Currently, the Centers for Disease Control (CDC) defines binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males. This accounts for weight and metabolism differences. Previously, the CDC defined binge drinking as five or more

drinks at one time, regardless of gender. The 2017 County Health Rankings report showed that Wisconsin was ranked the second worst state in the nation among adults reporting excessive drinking (binge or heavy drinking).



In 2015, 58 percent of alcohol related deaths in Wisconsin were due to acute conditions such as motor vehicle accidents, falls and poisoning (*Wisconsin DHS, 2016*). The rate of deaths due to alcohol related motor vehicle accidents in 2014 was higher in Oconto County (11/100,000 population), than Wisconsin (3.7/100,000 population). Similarly, alcohol related motor vehicle injuries have been on the rise since 2012 in Oconto county.



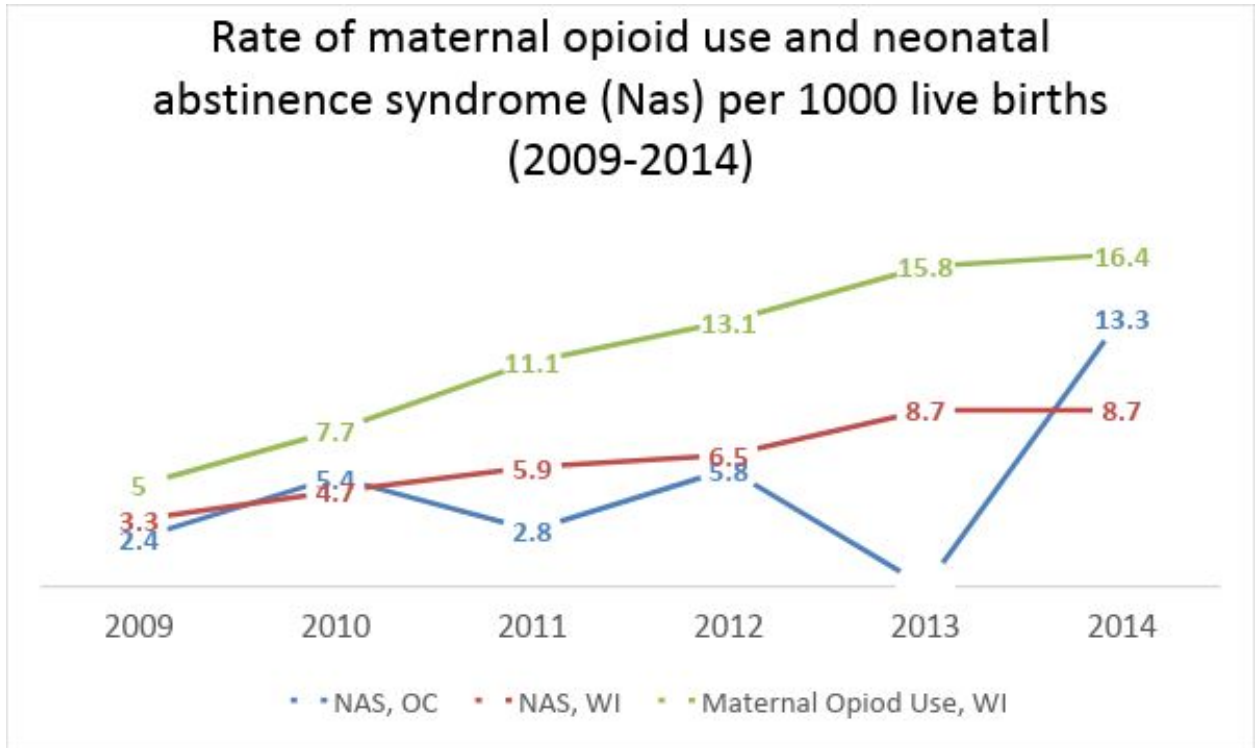


Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016

**Substance use**

Drug overdose deaths and opioid-involved deaths continue to increase in the United States. The majority of drug overdose deaths (more than six out of ten) involve an opioid.<sup>1</sup> Since 1999, the number of overdose deaths involving opioids (including prescription opioids and heroin) quadrupled.<sup>2</sup> From 2000 to 2015, more than half a million people died from drug overdoses. Source: <https://www.cdc.gov/drugoverdose/epidemic/index.html>

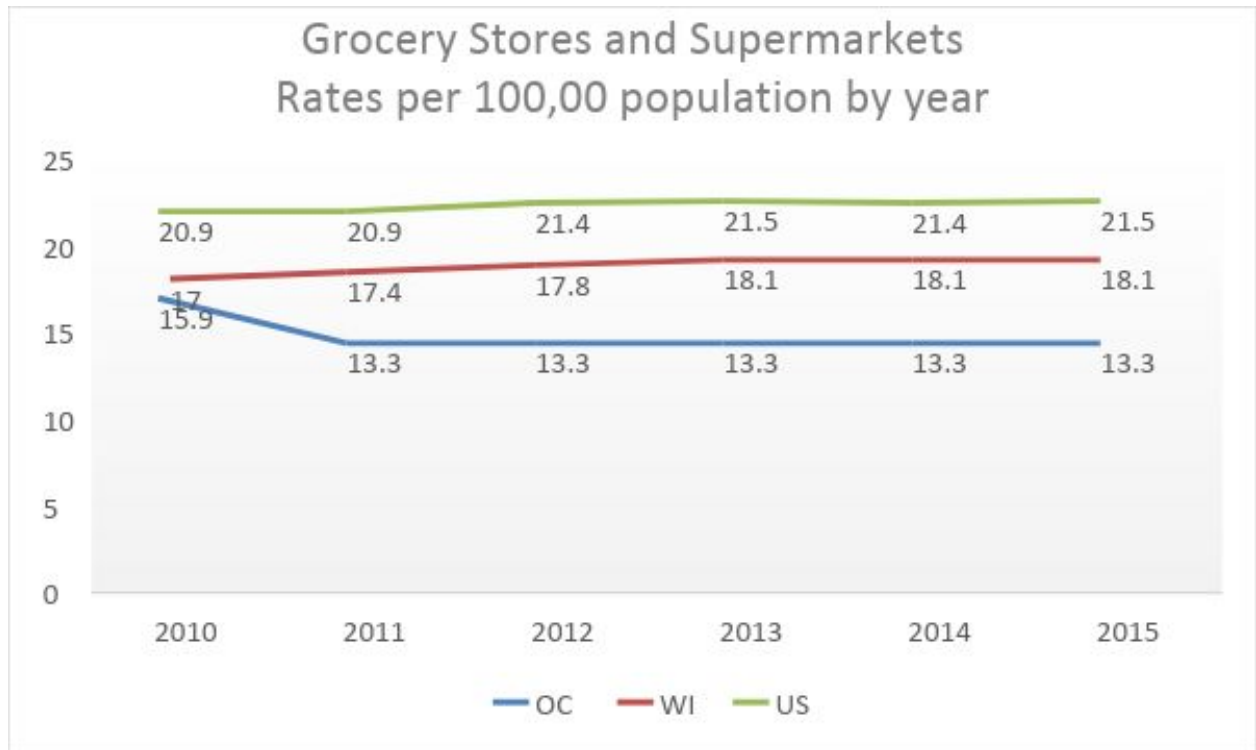
In Oconto County, there were four recorded deaths related to drug abuse (both prescription opioids and heroin) in 2014 (2) and 2015 (2). The Oconto County community health assessment presentation showed some favorable statistics related to drugs in Oconto County (e.g. downward trending opioid prescribing rates, drug related hospitalizations and drug law arrests). However, the rate of neonatal abstinence syndrome, a condition associated with maternal opioid use, seems to be trending upwards when compared with the reference rate in 2009, although there was no cases recorded in 2013.



Source: Wisconsin DHS Publication on Opioids, 2016

### Nutrition

Access to quality food in a population can be measured using several indices. One way to measure this is to assess the density of grocery stores vs. fast-food restaurants in a population. In Oconto County, the rate of grocery stores per 100,000 population is 13.3 while that of fast-food restaurants is 37.2. Oconto County has also had fewer grocery stores and supermarkets per 100,000 population compared with state and national rates.



Source: U.S. Census Bureau: County Business Patterns; CARES (2015)

### Food security

The United States Department of Agriculture (USDA) defines food insecurity as lack of access, at times, to enough food for an active, healthy life for all household members and limited or uncertain availability of nutritionally adequate foods. In 2015, it was estimated that the food insecure population in Oconto County needed an additional \$1.801 million to purchase enough food to meet their food needs (*Feeding America*).

### Food insecurity statistics, 2015

<i>Place</i>	<i>Number of people</i>	<i>Rate of food insecurity</i>
<i>Oconto County</i>	<i>3,510</i>	<i>9.4%</i>
<i>Wisconsin</i>	<i>633,170</i>	<i>11%</i>

Source: Feedingamerica.org

### Obesity

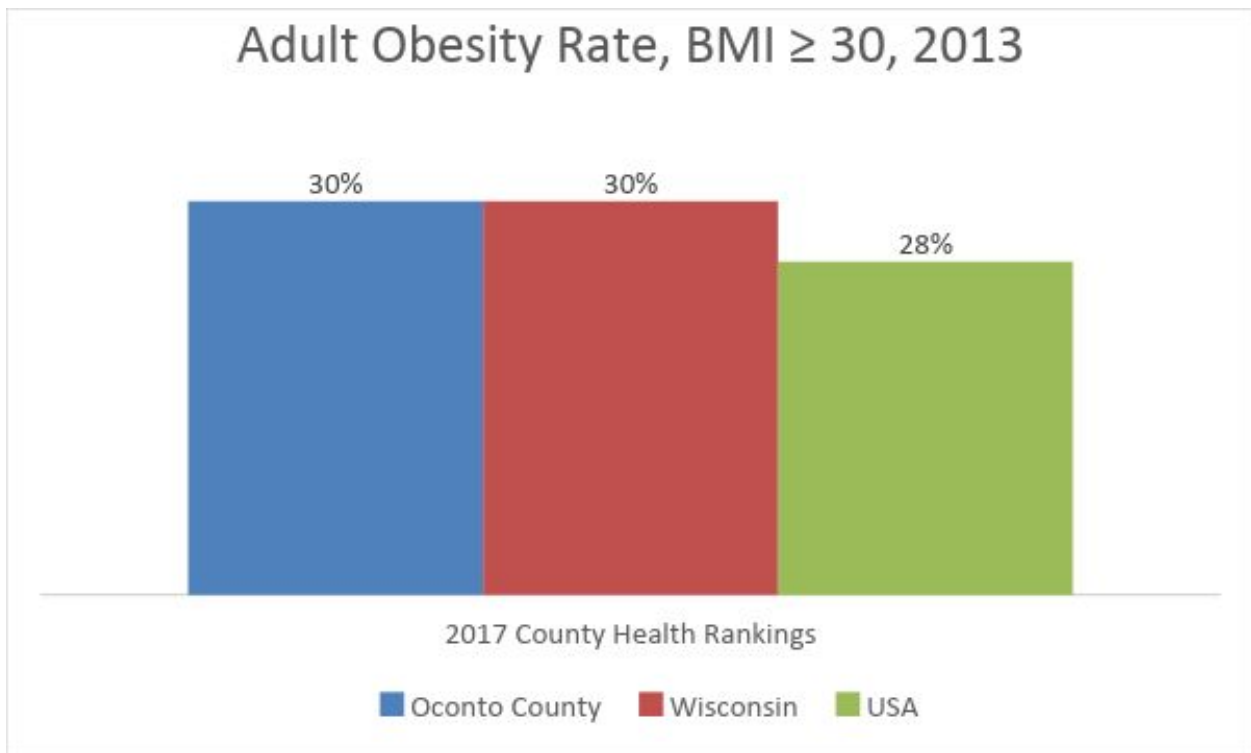
- Obesity-related conditions include heart disease, stroke, type 2 diabetes and certain types of cancer. These are some of the leading causes of preventable death. The estimated annual medical cost of obesity in the U.S. was \$147 billion in 2008; the medical costs for people who are obese were \$1,429 higher than those of normal weight.

Source: <https://www.cdc.gov/obesity/data/adult.html>

The Healthy People 2020 nationwide goal for healthy weight is 34 percent, and the unhealthy weight goal is 66 percent. The Healthy People 2020 goal for obesity is 31 percent.

In 2013, two out of three adults were overweight or obese in Wisconsin.<sup>4</sup>

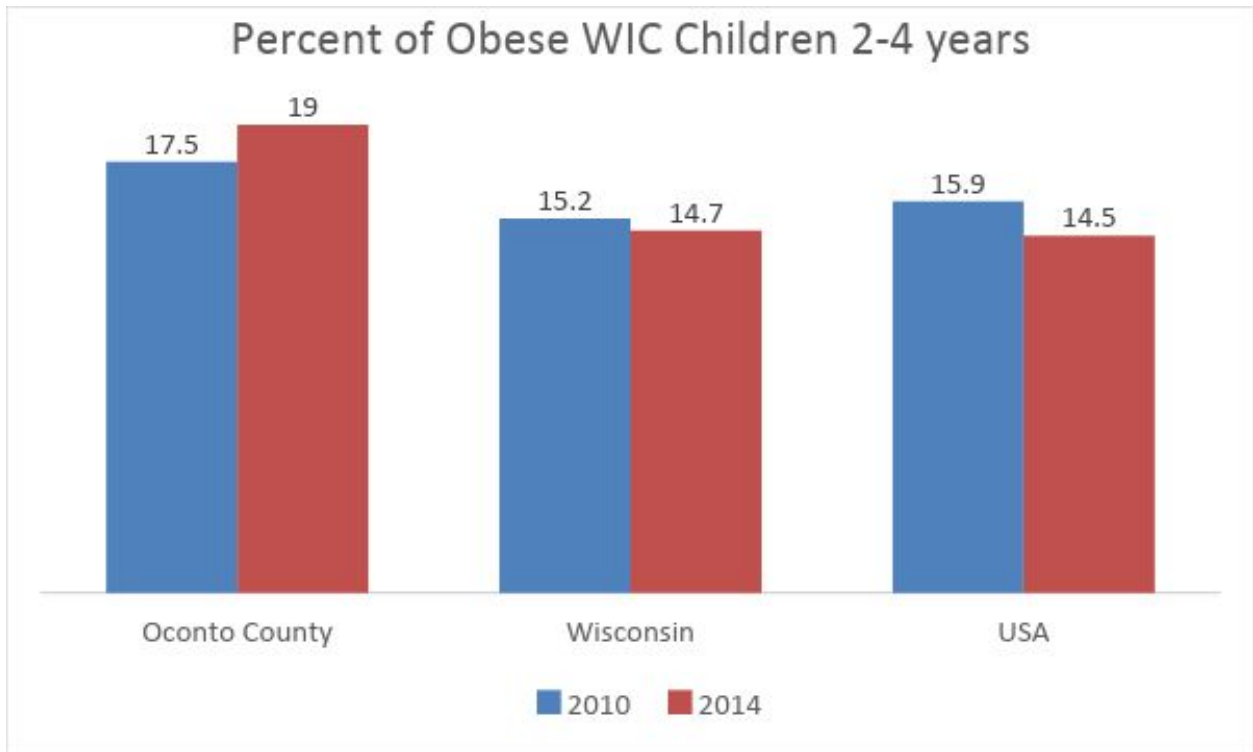
Source 4: Hatchell K, Roubal AM, Catlin BB, Timberlake K. Opportunities to Make Wisconsin the Healthiest State, University of Wisconsin Population Health Institute, 2015



Childhood obesity remains an important public health burden and studies have shown disproportionately higher rates in vulnerable populations. It is recommended that increased surveillance among WIC participants can help assess effectiveness of obesity prevention among children of low-income households.<sup>5</sup>

Source: 5: Pan L, Park S, Slayton R, Goodman AB, Blanck HM. Trends in Severe Obesity Among Children Aged 2 to 4 Years Enrolled in Special Supplemental Nutrition Program for Women, Infants, and Children From 2000 to 2014. *JAMA Pediatr*. Published online January 08, 2018. doi:10.1001/jamapediatrics.2017.4301

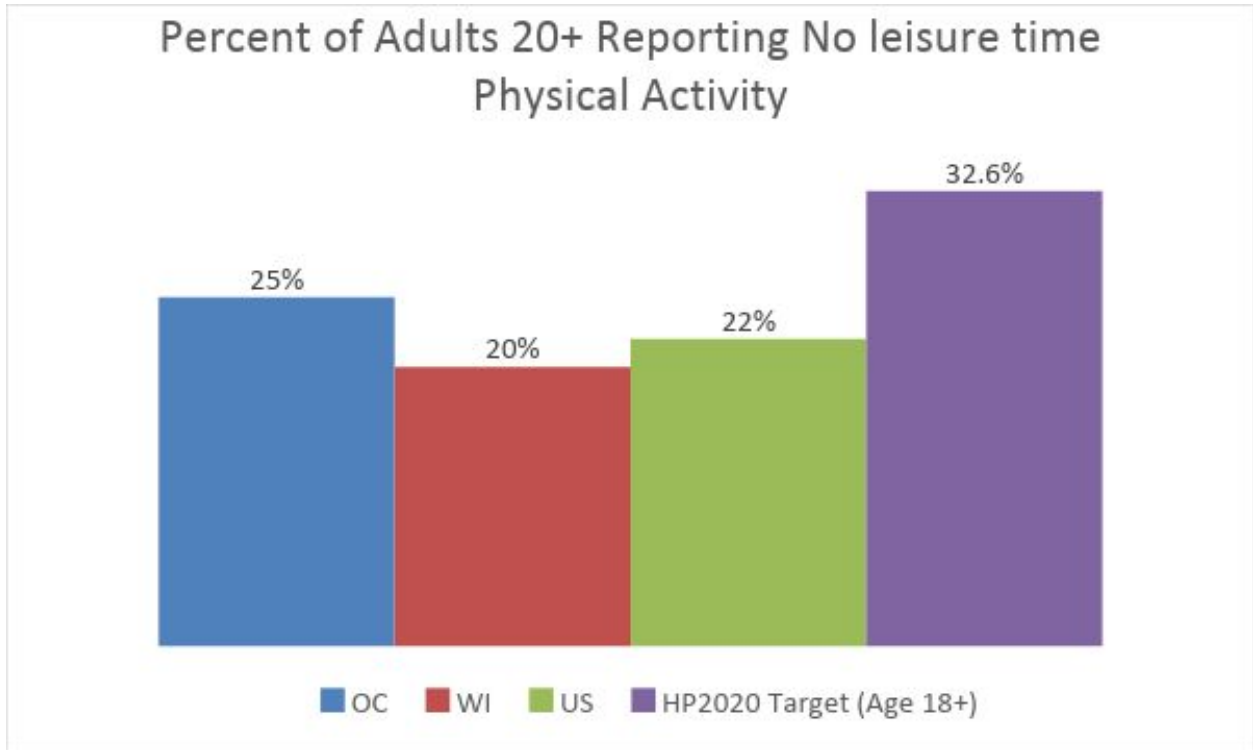
The 2010 and 2014 obesity rates among WIC participants two to four years old were higher in Oconto County compared with state and national rates. Additionally, state and national rates declined in 2014 compared with the 2010 baseline, while the rate in Oconto County increased.



Source: The State of Obesity; CDC MMWR NOV, 2016; Kids Count Data Center

**Physical activity**

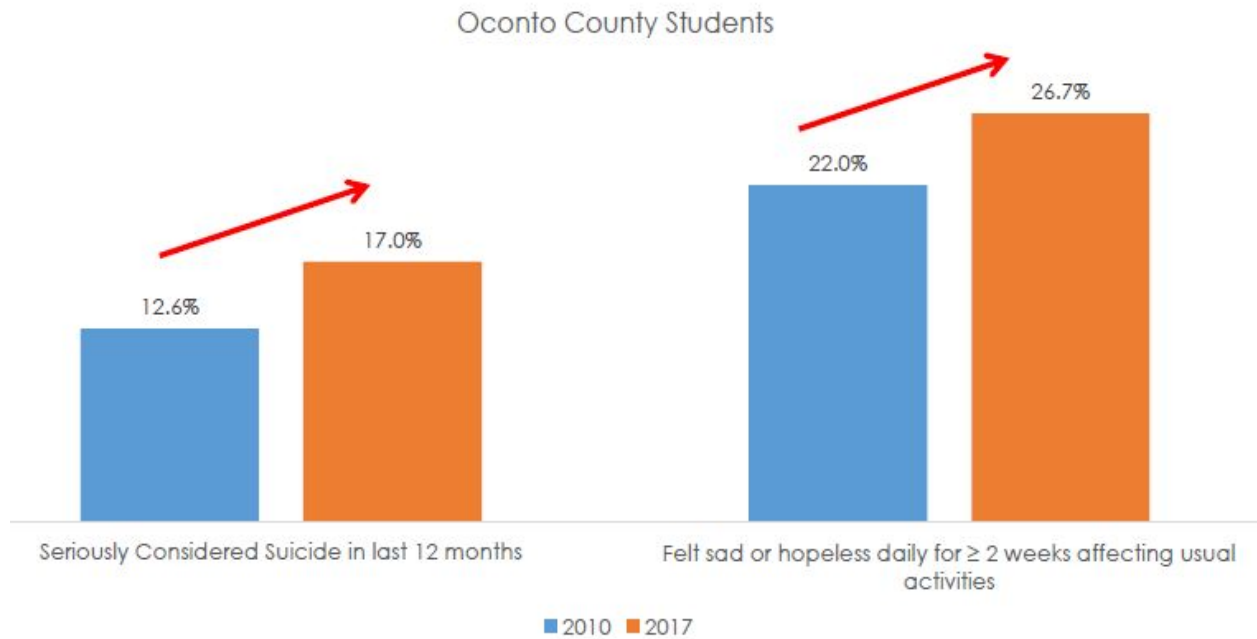
The recommended amount of physical activity by the Centers for Disease Control is moderate physical activity for at least 30 minutes on five or more days per week, or vigorous physical activity for at least 20 minutes on three or more days per week. Moderate physical activity includes walking briskly, vacuuming, gardening or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate. One in ten deaths among U.S. adults has been linked to physical inactivity. Sedentary adults pay \$1500 more per year in health care costs more than physically active adults. Eighty percent of U.S. adults do not meet recommended levels physical activity needed to achieve health benefits. (stateofobesity.org)



Source: County Health Rankings, 2017

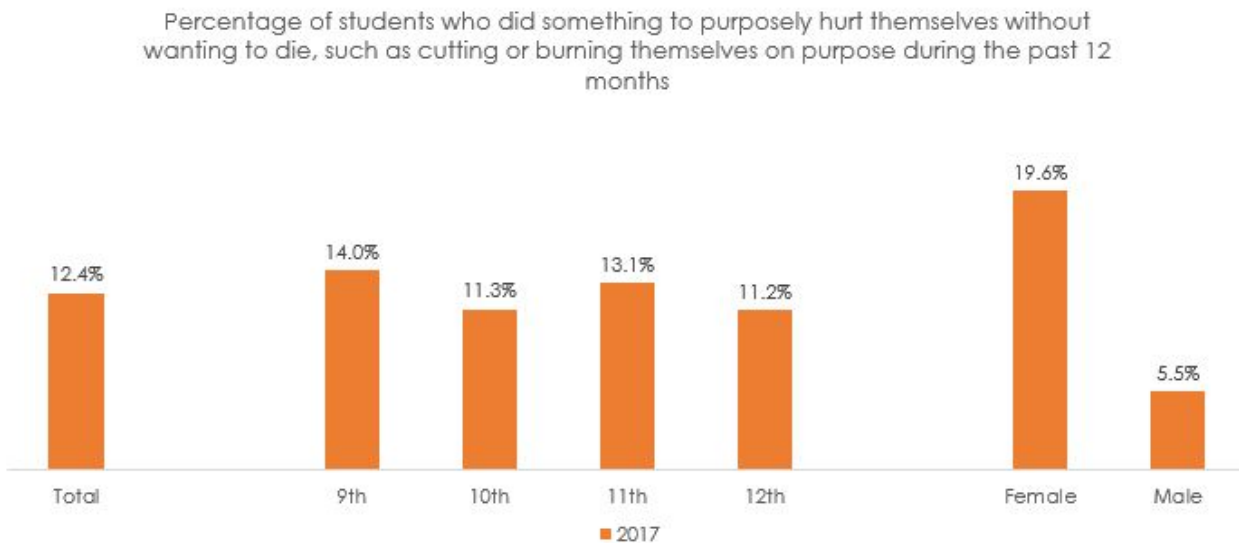
**Mental health**

In 2015, adults in Oconto County and Wisconsin reported not having good mental health (stress, depression, emotional problems) for 3.4 and 3.5 days, respectively, in the past 30 days. *Source:* <http://www.countyhealthrankings.org/>. Additionally, the percent of Oconto County youth who feel sad or hopeless for more than two weeks or have seriously contemplated suicide in the past twelve months have increased in 2017 compared to the 2010 baseline.



Source: Oconto County Online Youth Risk Behavior Survey

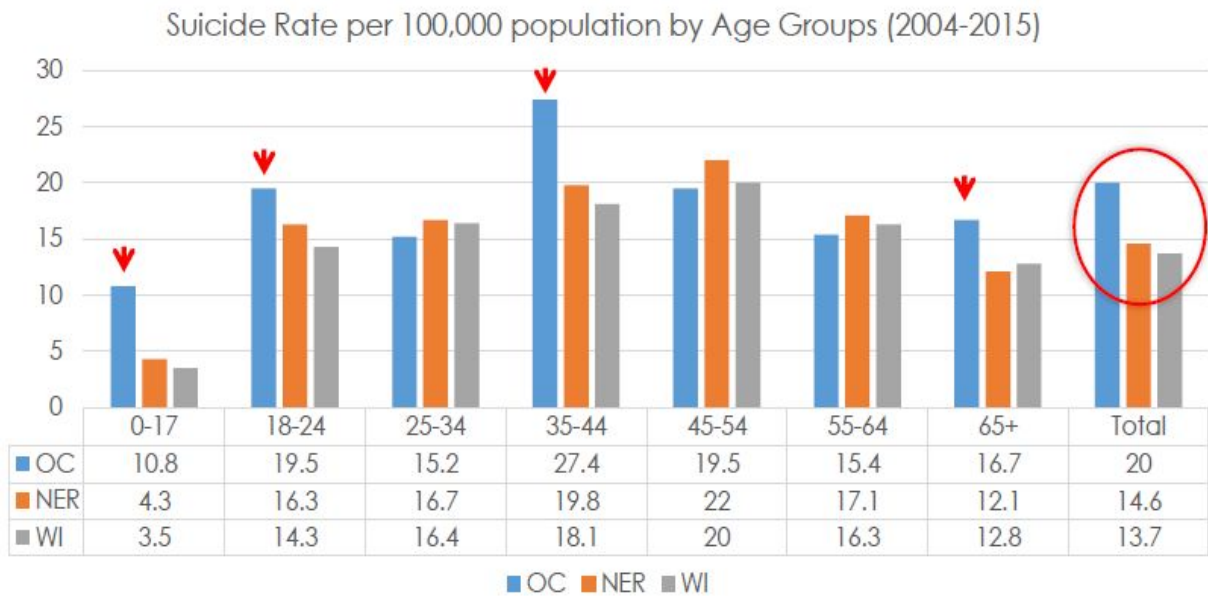
Mental illness is a risk factor for many unhealthy and unsafe behaviors, including self-harm and suicides.



Source: Oconto County Online Youth Risk Behavior Survey

Suicide is a major public health problem. It's a leading cause of death especially among the youth. Source: <https://www.healthypeople.gov/>.

From 2004-2015, the total suicide rate was higher in Oconto County than Wisconsin. The chart below shows suicide rates among different age groups in Oconto County compared to the Northeastern region and State over the same period. There are notable spikes in the younger age groups.



Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2016

Mental health needs continue to grow in the face of shortage of mental health providers in the State and County. Oconto County is a federally designated Mental Health Professional Shortage Area. *Source <https://www.dhs.wisconsin.gov/publications/p0/p00515a.pdf>.*

Current data shows that the population density per mental health provider is significantly higher in Oconto County compared to state and national rates.



**Table 1: Availability of Mental Health Providers in Oconto County, 2017**

<b>Report Area</b>	<b>Estimated Population</b>	<b>Number of Mental Health Providers</b>	<b>Ratio of Mental Health Providers to Population(1 Provider per x Persons)</b>
<b>Oconto County</b>	<u>37,420</u>	<u>17</u>	<u>2,201.2</u>
<b>Wisconsin</b>	<u>5,745,786</u>	<u>9,813</u>	<u>585.5</u>
<b>United States</b>	<u>317,105,555</u>	<u>643,219</u>	<u>493</u>

Source: County Health Rankings (via communitycommons.org), 2018

**Potential resources to address the significant health needs**

Community assets and resources that currently support health or could be used to improve health were identified at key stakeholder meetings and through focus groups. The following resources will be considered when developing the implementation plan.

Hospitals and related medical groups

- HSHS St. Clare Memorial Hospital
- Bellin Health
- Prevea Health
- Libertas

Other community organizations and government agencies:

- **AODA**
  - Healthy Oconto County
  - County Health and Human Services
  - School districts
  - Law enforcement
  - Behavioral health
  - WI Youth Alliance

- Health and Human Services
- Local media
- Church and faith communities
- The Division of Public Health
- Community members
  
- **Physical activity and nutrition**
  - Healthy Oconto County
  - Oconto County Health and Human Services
  - Food pantries and food bank
  - School districts
  - Employers
  - Nutritionists/Dietitians
  - The Division of Public Health
  - UW-Extension
  - Parents
  - Local Chamber of Commerce
  - Community members
  
- **Mental health**
  - Oconto County Health and Human Services
  - Healthy Oconto County
  - Law enforcement
  - TriCity United Way
  - Treatment providers
  - School districts

**Next steps**

After completing the FY2018 CHNA process and identifying the top priority health needs, next steps include:

- Collaborate with community organizations and government agencies to develop or enhance existing implementation strategies
- Develop a three-year implementation plan (FY2019 through FY2021) to address priority health needs identified in the FY2018 CHNA process
- Integrate the implementation plan into organizational strategic planning and budgeting to ensure alignment and allocation of human, material and financial resources

- Present and receive approval of the CHNA report and implementation plan by HSHS St. Clare Memorial Hospital's governing board in the same tax year that the CHNA was conducted
- Publicize the CHNA report and implementation plan widely on HSHS St. Clare Memorial Hospital's website and make accessible in public venues such as town halls, etc.

**Approval**

The FY2018 CHNA report was adopted by HSHS St. Clare Memorial Hospital's governing board on May 9, 2018.

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## Appendix X

Evaluation of the impact of any actions that were taken, since the immediately preceding CHNA conducted in FY2015, to address significant health needs identified.

In FY2015, HSHS St. Clare Memorial Hospital conducted a Community Health Needs Assessment (CHNA). Primary and secondary data was gathered from multiple sources to assess the hospital's primary service area. Based on the data and the prioritization process, the following priority community health needs were selected:

- Physical Activity and Nutrition
- Mental Health
- Substance Use

The FY2015 Implementation Plan outlined the strategies that the hospital would undertake to address the priority community health needs identified through the CHNA process. Evaluation of the impact of the actions that were taken in response to the hospital's FY2015 CHNA follows.

**Physical Activity and Nutrition:** The hospital continued support of the development, implementation and/or continuation of strategies to improve physical activity and nutrition.

**Outcomes:** Lead the activities of Healthy Oconto County 2018, a coalition of community partners dedicated to improving the health of Oconto County. Created an Oconto Falls Trail System to increase safe, physical activity in Oconto County. Coordinated food drives for Kingdom Come Food Pantry, utilized sites and courier services for food distribution, and provided educational materials regarding healthy food choices.

Provided free diabetes support group, free quarterly community education classes for seniors that include a free meal, and nutritional education for high school students.

**Mental Health:** The hospital continued support of the development, implementation and/or continuation of strategies to improve mental health.

**Outcomes:** Infrastructure planning to provide tele-psychiatry coverage at HSHS St. Clare Memorial Hospital. We didn't get the contract proposal development for Employee Assistance

Program (EAP) and school based mental health are two different services for the Oconto Falls School District. Led by the HSHS and Prevea Executive Director for Behavioral Care Services, the proposal was to provide outpatient counseling services to the school district. The program's purpose was to provide School Based Mental Health to improve access and to provide timely access to services and treatment. Furthermore, the program was designed to reduce and prevent suicide and or violence against others among school age children through early identification and intervention. The school district ultimately chose a different provider for the EAP services. Prevea Health and Libertas, a department of HSHS St. Vincent Hospital and an alcohol and drug addiction treatment center for adolescents and adults, participated in the Annual Oconto County Community Wellness Fair at the Bond Community Center in Oconto. Prevea Health offers a state-certified outpatient behavioral health clinic in the Medical Services Building on the campus of HSHS St. Clare Memorial Hospital in Oconto Falls.

**Substance** Use: The hospital continued support of the development, implementation and/or continuation of strategies to address AODA.

**Outcomes**: Researched the feasibility of offering Inpatient withdrawal management services at the hospital. Through a Wisconsin Department of Health Services' Hope Grant, individuals who are uninsured can receive opioid treatment services through Northeast Wisconsin Opioid Treatment Services. This program is provided through a collaborative effort between Libertas (a department of HSHS St. Vincent Hospital) and Prevea Health to help individuals addicted to opioids and meth.. Northeast Wisconsin Opioid Treatment Services provides services to people living with an opioid addiction in Florence, Marinette, Menominee and Oconto counties. Through this program, people with opioid addiction can access abstinence-based treatment or medication-assisted treatment with substance use counseling.