

**SSM Health St. Mary's Hospital – Janesville**

3400 E. Racine Street | Janesville, WI 53546



2018

**Community Health Needs *Assessment***



# Table of Contents

## Assessment

Message to Our Community ..... 3

Executive Summary ..... 4

About Us ..... 5

About Our Community ..... 6

The Health of Our Community ..... 7

The Health Needs of Our Community ..... 8

Our Progress since 2015 ..... 9

## Appendices | How the Information was Obtained

CHNA Methodology ..... 11

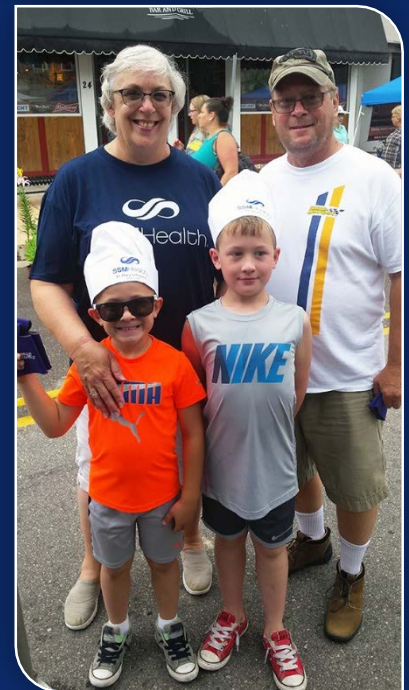
Community Representation ..... 12

Community Data ..... 13

Prioritizing Health Needs ..... 23

Prioritization ..... 24

CHNA Collaborators ..... 25





## Message to Our Community

SSM Health St. Mary's Hospital – Janesville, a member of SSM Health, has delivered exceptional, compassionate care to Rock County for six years. Inspired by our founding Franciscan Sisters of Mary and guided by our Mission – Through our exceptional health care services, we reveal the healing presence of God – we cherish the sacredness and dignity of each person as demonstrated through our Values of compassion, respect, excellence, stewardship and community.

Our sustained community commitment can be seen through our collaborative partnerships with residents and organizations. We rely on these relationships to help us identify and develop plans to address high-priority community health needs.

Over the last 12 months, in collaboration with our community partners, we have conducted a community health needs assessment by gathering health-related information from Conduent Healthy Communities Institute (HCI) regarding Rock County. We have also gathered community perspectives from the Rock County Health Department and community stakeholders to identify concerns about the health of these communities and the number of area-based programs and organizations that exist to address their needs. Though the Community Health Needs Assessment (CHNA) is extensive and encompasses data collection and community input processes, it is important to recognize that this is just one piece of a broader community health improvement process. The CHNA provides the quantitative data and qualitative community perceptions necessary for driving priority selection and decision-making within the community.

Sincerely,

Ben Layman  
President  
SSM Health St. Mary's Hospital – Janesville



## background

SSM Health St. Mary's Hospital – Janesville is pleased to present the 2018 Community Health Needs Assessment (CHNA). This CHNA report provides an overview of the health needs and priorities associated with our service area. The goal of this report is to provide persons with a deeper understanding of the health needs in their community, as well as to help guide the hospital in its community benefit planning efforts and development of an implementation strategy to address evaluated needs. The SSM Health Wisconsin Regional Board approved this CHNA on November 13, 2018.

SSM Health St. Mary's Hospital – Janesville last conducted a CHNA in 2015 for the 2016-2018 Community Health Implementation Plan (CHIP).

The Affordable Care Act (ACA) requires 501(c)(3) tax-exempt hospitals to conduct a CHNA every three tax years and adopt a strategic implementation plan for addressing identified needs.



## priorities

SSM Health St. Mary's Hospital – Janesville determined priorities for the 2018 CHNA and strategic implementation plan. Priorities chosen include:

- Obesity: Resources include University of Wisconsin – Extension Rock County, Community Action of Rock and Walworth Counties, Rock County Health Department, and Janesville Public School District
- Substance abuse: Resources include Wisconsin Bureau of Substance Abuse Services, Rock County Health Department, Rock County Human Services Center, Janesville Counseling Center, Janesville Police Department, Rock County Sheriff's Department, Youth 2 Youth, Healthy Edgerton, Janesville Mobilizing 4 Change, and Building a Safer Evansville
- Tobacco use: Resources include American Lung Association, Youth 2 Youth, and Wisconsin Quit Line

## strategies

The hospital will collaborate with its community partners to leverage available resources available in Rock County. Strategies for priority needs are as below.

- Obesity – Increase community awareness of nutrition and physical fitness, improve access to healthy food options, and increase youth physical fitness.
- Substance abuse – Offer community education and resources, offer resources for patients with substance abuse diagnoses, improve placement opportunities and services for patients with substance abuse diagnoses, and reduce addictive opioid prescriptions.
- Tobacco use – Provide community information and education regarding tobacco use, smoking cessation resources including Freedom from Smoking classes and community activities to promote tobacco cessation efforts.



# SSM Health St. Mary's Hospital – Janesville

## SSM Health

SSM Health is a Catholic not-for-profit health system serving the comprehensive health needs of communities across the Midwest through a robust and fully integrated health care delivery system. Headquartered in St. Louis, SSM Health has care delivery sites in Missouri, Illinois, Oklahoma and Wisconsin. The health system includes 24 hospitals, more than 300 physician offices and other outpatient care sites, 10 post-acute facilities, comprehensive

*Through our exceptional health care services, we reveal the healing presence of God.*

home care and hospice services, a pharmacy benefit company, an insurance company, a technology company and an Accountable Care Organization.

With more than 10,000 providers and 40,000 employees in four states, SSM Health is one of the largest

employers in every community it serves. An early adopter of the electronic health record (EHR), SSM Health is a national leader for the depth of its EHR integration.

## SSM Health St. Mary's Hospital – Janesville

### highlight of services

SSM Health St. Mary's Hospital – Janesville offers a comprehensive array of acute inpatient services, along with an ambulatory network consisting of convenient care, primary care, and specialist providers.

The hospital shares a 50-acre campus and electronic health record system with SSM Health Dean Medical Group, providing seamless health care services.

### community partnerships

We are proud to be part of community projects that work to improve health outcomes in the areas we serve.

### community benefit

In 2016, SSM Health Care of Wisconsin provided \$53.5 million in net community benefit, including \$5.3 million in charity care; \$8.9 million in health professions education, \$0.7 million in community services; and \$33.3 million in unpaid costs of Medicaid and other public programs.

### additional affiliations and partnerships

SSM Health Dean Medical Group ("Dean"), which joined SSM Health system in September 2013, is a for-profit, integrated health care organization in Madison, Wisconsin. Dean consists of a network of more than 60 clinics in south-central Wisconsin, Davis Duehr Dean eye care, insurance provider Dean Health Plan, and pharmacy benefits company Navitus Health Solutions. Approximately 500 Physicians provide primary, specialty, and tertiary care in the clinics. The system services more than 400,000 health plan members.

## Hospital at a Glance

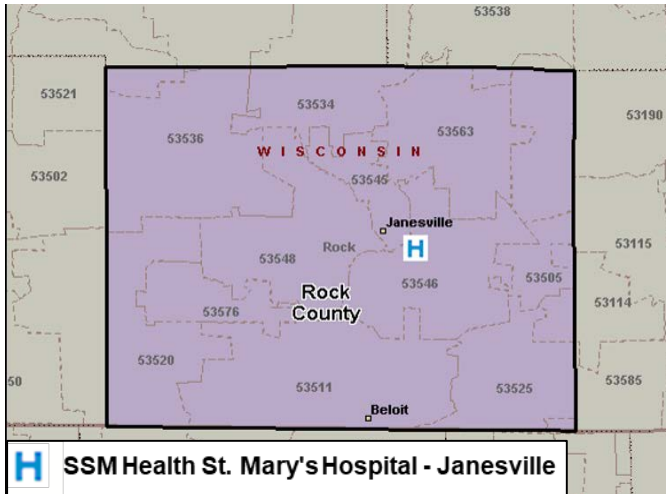
Admissions		2,570
Outpatient Visits		16,793
ER Visits		16,952
Births		435
Beds		50
Employees		372
Medical Staff		409
Volunteers		96
Charity Care		\$1,309,661



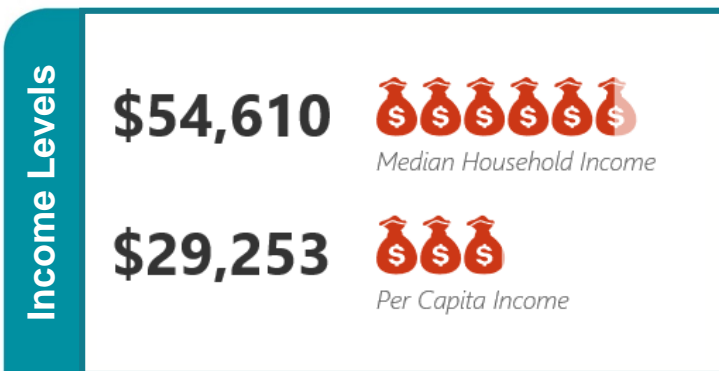
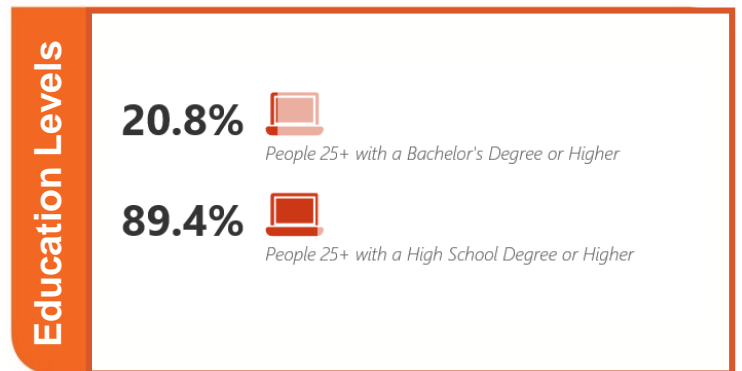
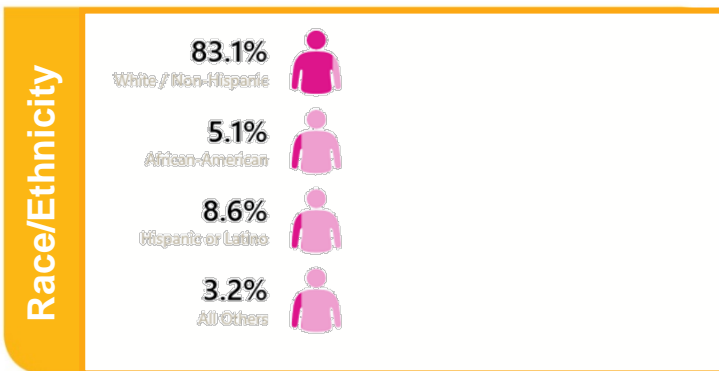
# About Our Community



The community we serve is defined as Rock County, which accounts for 87 percent of the total patients served by the hospital in 2017. There are 22 ZIP codes that are contained within or overlap the service area. The hospital is located in Janesville (ZIP code 53546). In 2016, Rock County had an estimated population of 161,620 persons.



## our community by the numbers





# The Health of Our Community

## About the Data

The data were derived from a variety of sources, including the Conduent Healthy Communities Institute (HCI) analytics platform. The website includes the most up-to-date publicly available data for approximately 140 community indicators from over 20 sources and covering 20 topics in the areas of population health, determinants of health, and quality of life. Additional sources include Rock County Health Department and Health Equity Alliance of Rock County.

Below is a statistical overview of strengths and weaknesses within the community that factored into our consideration of the priority health needs of the community.<sup>7</sup>

### *Our community by the numbers*



#### Cancer

Incidence rates and/or death rates are, in some cases, higher than national averages. Specific areas of concern include lung, bronchus, colorectal, and breast cancers.



#### Unintentional Injuries and Falls

Death rates due to unintentional injuries and falls in Rock County were higher than state and national averages.

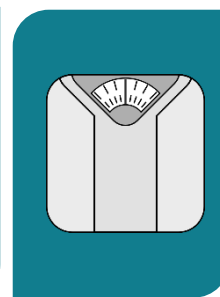
#### Smoking

22.4 percent of Rock County adults smoke. Additionally, 15.2 percent of mothers reported smoking while pregnant, which is more than double the national rate.



#### Obesity

32.1 percent of adults in Rock County are obese, compared to 28.5 percent of adults in Wisconsin overall.



#### Mental Health

Depression within the Medicare population and the death rate due to suicide are higher in Rock County than in state and national averages.



#### Childhood Immunizations

99.6 percent of children are compliant with immunization requirements, which is slightly better than the Wisconsin compliance rate of 98.1 percent.

#### Dental Health

The rate for non-traumatic oral health emergency room visits is more than 50 percent higher in Rock County than Wisconsin overall. Additionally, there are fewer dentist per capita in Rock County than in Wisconsin overall.



#### Unemployment

The unemployment rate is 2.8 percent, which is higher than the overall Wisconsin rate of 2.6 percent.



# The Health Needs of Our Community

Community health needs were identified from existing sources of secondary data (regarding demographics, health status indicators, and measures of health care access), and by gathering community perspectives from individuals with expertise in public health, as well as from individuals who live, work, learn, play, and/or grow in Rock County.



## key priorities

### Obesity: Rock County Obese Adults



Obesity, as well as food insecurity and physical inactivity, were issues identified in community perspective activities and supported by secondary data research.

Throughout the US, the percentage of individuals considered overweight or obese continues to rise. In addition to being costly for the US health care system, obesity can lead to and/or complicate other conditions, such as heart disease, stroke, diabetes, and certain types of cancer.

### Substance Abuse: Rock County Adults who Binge Drink



Substance abuse, the effects of substance use, and mental health issues were identified in both community perspective activities and secondary data research.

Multiple factors contribute to substance abuse, including mental health needs, poor economic conditions, high poverty rates, lower educational attainment levels, higher percentages of individuals living alone, and easy access to alcohol and other substances.

### Tobacco Use: Rock County Adults who Smoke



Smoking in adults, especially pregnant women, was a significant issue identified in secondary data research and supported by community feedback.

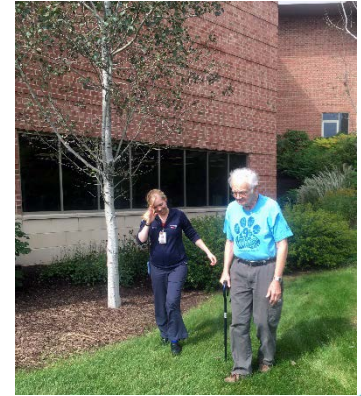
Tobacco is the agent most responsible for avoidable illness and death in America today. Tobacco brings premature death to almost half a million Americans each year, and it contributes to profound disability and pain in many others.



## Our Progress Since 2015

Our last Community Health Needs Assessment was conducted in 2015. Below are the health needs we identified, the strategies we implemented to address them and the progress that has been made.

**Fall Prevention** – We worked with several community partners to decrease falls with our community’s elders. Activities included participating at health fairs and other events to increase community awareness about the issue, distributing fall prevention toolkits at numerous sites, and offering evidence-based fall prevention programs including “Stepping On” program and “Strong Women” fitness classes.



**Smoking** – We worked with several community partners to decrease smoking in the community. Activities included increasing community awareness about the dangers of smoking through SSM Health St. Mary’s Hospital – Janesville’s radio show called, Stay Healthy Rock County, offering smoking classes, training staff members in the American Lung Association’s Freedom From Smoking evidence based program, distributing “Quit Smoking” kits during the 2017 Great American Smokeout, and helping implement an evidence-based smoking cessation program for pregnant mothers in collaboration with Wisconsin Women’s Health Foundation. Grant-making activities included a \$5,000 award to provide smoking cessation counseling and support at a local food pantry.

**Obesity** – Activities included participation at health fairs and other events to promote healthy living through proper nutrition and exercise to hospital patients and community members, sponsorship of physical activity programs, participation in the Janesville Farmer’s Market, and providing evidence-based programs, in English and Spanish, designed to decrease obesity in participants. Grant-making activities included a \$5,000 award to the Rock County Trail Coalition to updated local maps, a \$5,000 award to Community Action of Rock and Walworth Counties for nutrition guidance in its Fatherhood and Youth Mentor Programs, a \$40,000 award to the City of Janesville to support funding for a Fitness Court, and a \$5,000 award to Boys & Girls Club of Janesville to adopt a nationally-developed, evidenced-based youth health and wellness program.



**SSM Health St. Mary's Hospital – Janesville**

3400 E. Racine Street | Janesville, WI 53546



# 2019 – 2021

*Appendices*

SYS-SYS-18-463375 04/17 ©2017 SSM Health. All rights reserved.

## CHNA methodology

---

This CHNA considers multiple data sources, including secondary data (regarding demographics, health status indicators, and measures of health care access), as well as primary data derived from information gathering activities from community members and persons who represent the broad interests of the community, including those with expertise in public health.

### Primary Data

SSM Health St. Mary's Hospital – Janesville sought and received input from the Rock County Public Health Department. The hospital also worked closely with the Health Equity Alliance of Rock County to develop the October 2017 Rock County Community Health Assessment (CHA). Community perspectives and data gathered during this endeavor were incorporated into the hospital's Needs Assessment. Community perspectives were gathered from multiple activities, including a community survey, One-to-One interviews, and focus groups (community conversations), summarized as follows:

- Community Survey – A community perception survey of individuals who “lives, works, learns, or plays in Rock County” was conducted in 2017, with 1,345 responses
- Interviews – Twelve One-to-One Conversations with community stakeholders were conducted in 2017 to identify changing community health needs
- Focus Groups – Twelve community conversations about health impacts were conducted with over 130 people in 2017 to assess current health challenges

### Secondary Data

In addition to a review of demographics, we gathered and reviewed data from broad sources to set the initial direction and priorities of the community health needs assessment. The secondary data was derived from a variety of sources including the Hospital's HCI – CHNA System. The system includes the most up-to-date publicly available data for approximately 140 community indicators from over 20 sources, covering 20 topics in the areas of health, determinants of health, and quality of life.



## community representation

SSM Health St. Mary's Hospital – Janesville worked closely with the Health Equity Alliance of Rock County to develop the October 2017 Rock County Community Health Assessment (CHA). The hospital included Healthy People 2020 categories in its participation, including activities to gather and collect community perspectives from 1,345 survey participants, 12 interviews, and 130 focus group members. See details below.

The process benefited from input from several individual community leaders representing diverse constituencies. Additionally, the CHNA benefited from guidance and input from individuals with expertise in public health and CHNA process.

### Survey

The top five community health needs identified by survey respondents are: (1) Drug abuse, (2) Alcohol abuse, (3) Obesity, (4) Mental Health, and (5) Cancers. In addition to demographic details, a summary of survey questions included the following:

- What are the top five (5) health problems in your community?
- What are the top five (5) most concerning risky behaviors in your community?
- What are the top five (5) environmental issues that concern you the most in your community?
- What are health problems or concerns for you or someone in your household?
- If you, or someone in your household, could not get care or medication, tell us why.

### Interviews

The top five community health needs identified by individual interviews are: (1) Behavioral health, (2) Oral health issues, (3) Reactive health care vs. preventative health care; (4) Racism; and (5) The impact of the economy on the overall health of the community. Questions asked in One-to-One interviews are as follows:

- I understand you have been a long time Rock County resident. In your time living in Rock County how have you seen it change?
- What are your concerns about health in the community as a Rock County resident?
- Why are you concerned with problem(s) you identified?

### Focus Groups

Community health needs identified by focus groups include, in alphabetical order: (1) Access due to cost, access, and/or navigation issue; (2) Cancer; (3) Dental health; (4) Diabetes; (5) Food insecurity; (6) Health education; (7) High blood pressure; (8) Insufficient preventive healthcare; (9) Kidney failure; (10) Lack of providers (specialists, pediatricians, and social workers); (11) Lack of substance abuse treatment; (12) Language / cultural barriers; (13) Mental / behavioral health; (14) Obesity / physical inactivity; (15) Substance abuse; (16) Teen pregnancy; and (17) Transportation. Questions asked in focus groups are as follows:

- What do you see as the top three health challenges for people in your community? And why?
- What are the barriers to good health in your community?
- What are some of the changes related to health and healthcare that could be made in your community?
- Additional comments or follow-up needed?

## Community Data from Conduent Healthy Communities Institute

SSM Health St. Mary's Hospital – Janesville is pleased to make data from Conduent Healthy Communities Institute available to the community. We invite community organizations, planners, policy makers, educational institutions, and residents to use this information to understand and track community health issues and plan strategies for improvement.

Indicators below are sorted in decreasing severity. Severity is based on the percentage difference from the Wisconsin or U.S. average.

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
175.9%	Non-Physician Primary Care Provider Rate [Providers per 100,000 population]	2017	54	95	81	-
160.9%	Syphilis Incidence Rate [Cases per 100,000 population]	2016	3.7	2.3	8.7	-
154.5%	Total Employment Change [Percent]	2014-2015	3.4%	2.2%	2.5%	-
151.0%	Non-Traumatic Oral Health Emergency Department Visit Rate [ED visits per 10,000 population]	2014	73.4	48.6	57.7	-
145.4%	Teen Birth Rate: 15-19 [Live births per 1,000 females aged 15-19]	2016	22.1	15.2	24.3	-
137.9%	Primary Care Provider Rate [Providers per 100,000 population]	2015	58	80	75	-
136.5%	People 25+ with a Bachelor's Degree or Higher [Percent]	2012-2016	20.8%	28.4%	30.3%	-
134.0%	Death Rate due to Drug Poisoning [Deaths per 100,000 population]	2014-2016	21.7	16.2	16.9	-
133.3%	Mothers who Smoked During Pregnancy [Percent]	2016	15.2%	11.4%	7.2%	1.4%
133.1%	Children Living Below Poverty Level [Percent]	2012-2016	23.3%	17.5%	21.2%	-
133.0%	Students Eligible for the Free Lunch Program [Percent]	2015-2016	45.1%	33.9%	42.6%	-
132.2%	Young Children Living Below Poverty Level [Percent]	2012-2016	27.1%	20.5%	23.6%	-
131.8%	Families Living Below Poverty Level [Percent]	2012-2016	11.2%	8.5%	11.0%	-
130.0%	Stroke: Medicare Population [Percent]	2015	3.9%	3.0%	4.0%	-
125.1%	Adults who Smoke [Percent]	2014-2016	22.4%	17.9%	-	12.0%

## Community Data from Conduent Healthy Communities Institute

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
123.1%	Age-Adjusted Death Rate due to Lung Cancer [Deaths per 100,000 population]	2010-2014	54.4	44.2	44.7	45.5
123.0%	Asthma: Medicare Population [Percent]	2015	9.1%	7.4%	8.2%	-
122.5%	Persons with a Disability [Percent]	2016	14.7%	12.0%	12.8%	-
122.0%	Persons with a Disability (5-year) [Percent]	2012-2016	14.4%	11.8%	12.5%	-
121.6%	Alcohol-Impaired Driving Deaths [Percent]	2012-2016	43.4%	35.7%	29.3%	-
121.3%	Lung and Bronchus Cancer Incidence Rate [Cases per 100,000 population]	2010-2014	73.9	60.9	61.2	-
120.9%	Self-Reported General Health Assessment: Poor or Fair [Percent]	2014-2016	17.9%	14.8%	-	-
120.5%	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases [Deaths per 100,000 population]	2014-2016	47.0	39.0	40.9	-
120.1%	Age-Adjusted Death Rate due to Alzheimer's Disease [Deaths per 100,000 population]	2014-2016	32.9	27.4	28.4	-
118.1%	Child Food Insecurity Rate [Percent]	2016	18.9%	16.0%	17.9%	-
117.8%	COPD: Medicare Population [Percent]	2015	10.6%	9.0%	11.2%	-
117.6%	Age-Adjusted Death Rate due to Falls [Deaths per 100,000 population]	2014-2016	21.4	18.2	8.9	7.2
116.3%	Age-Adjusted Death Rate due to Suicide [Deaths per 100,000 population]	2014-2016	16.4	14.1	13.2	10.2
115.7%	People Living Below Poverty Level [Percent]	2012-2016	14.7%	12.7%	15.1%	-
114.4%	Infants Born to Mothers with <12 Years Education [Percent]	2015	12.7%	11.1%	15.1%	-
114.3%	Food Environment Index [Index of Grocery Store Access & Food Insecurity]	2018	7.7	8.8	7.7	-
114.2%	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) [Deaths per 100,000 population]	2014-2016	39.4	34.5	37.2	34.8
114.1%	Adults with Diabetes [Percent]	2014-2016	8.9%	7.8%	-	-



**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
113.9%	Age-Adjusted Death Rate due to Unintentional Injuries [Deaths per 100,000 population]	2014-2016	56.6	49.7	43.2	36.4
113.6%	Households with Cash Public Assistance Income [Percent]	2012-2016	2.5%	2.2%	2.7%	-
113.1%	Preventable Hospital Stays: Medicare Population [Discharges per 1,000 Medicare enrollees]	2015	50.9	45.0	49.4	-
112.6%	Adults who are Obese [Percent]	2014-2016	32.1%	28.5%	-	30.5%
112.4%	Depression: Medicare Population [Percent]	2015	19.1%	17.0%	16.7%	-
111.7%	Persons with Disability Living in Poverty [Percent]	2016	28.7%	25.7%	26.6%	-
111.4%	Age-Adjusted Death Rate due to Colorectal Cancer [Deaths per 100,000 population]	2010-2014	15.6	14.0	14.8	14.5
111.0%	Age-Adjusted Death Rate due to Cancer [Deaths per 100,000 population]	2010-2014	186.6	168.1	166.1	161.4
110.8%	Persons with Public Health Insurance Only [Percent]	2016	21.6%	19.5%	23.0%	-
110.2%	Houses Built Prior to 1950 [Percent]	2012-2016	28.2%	25.6%	18.2%	-
109.4%	Osteoporosis: Medicare Population [Percent]	2015	5.8%	5.3%	6.0%	-
109.4%	Social Associations [Membership associations per 10,000 population]	2015	10.6	11.6	9.3	-
109.3%	Frequent Physical Distress [Percent]	2016	11.7%	10.7%	15.0%	10.8%
109.0%	Adults who are Overweight or Obese [Percent]	2014-2016	66.8%	61.3%	-	-
108.3%	Poor Physical Health: Average Number of Days [Days]	2016	3.9	3.6	3.7	-
108.2%	Dentist Rate [Dentists per 100,000 population]	2016	61	66	67	-
108.0%	Persons with a Self-Care Difficulty [Percent]	2016	2.7%	2.5%	2.7%	-

**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
107.7%	Unemployed Workers in Civilian Labor Force [Percent]	May 2018	2.8%	2.6%	3.6%	-
107.7%	Households with Children Receiving SNAP [Percent]	2012-2016	53.3%	49.5%	53.0%	-
107.5%	Chlamydia Incidence Rate [Cases per 100,000 population]	2015	455.4	423.5	478.8	-
106.8%	People Living 200% Above Poverty Level [Percent]	2012-2016	65.7%	70.2%	66.4%	-
106.8%	Insufficient Sleep [Percent]	2016	34.5%	32.3%	38.0%	-
106.6%	Diabetes: Medicare Population [Percent]	2015	24.4%	22.9%	26.5%	-
106.5%	Medicare Healthcare Costs [Dollars per enrollee]	2015	\$9,264	\$8,696	\$9,729	-
105.9%	Premature Death [Years per 100,000 population]	2014-2016	6,363.2	6,008.5	6,658.1	-
105.9%	Age-Adjusted Death Rate due to Breast Cancer [Deaths per 100,000 females]	2010-2014	21.7	20.5	21.2	20.7
105.3%	Persons with Private Health Insurance Only [Percent]	2016	58.6%	61.7%	56.0%	-
105.0%	Diabetic Monitoring: Medicare Population [Percent]	2015	86.7%	91.0%	85.7%	-
104.8%	Mammography Screening: Medicare Population [Percent]	2015	68.6%	71.9%	63.2%	-
103.8%	Food Insecurity Rate [Percent]	2016	10.9%	10.5%	12.9%	-
103.7%	All Cancer Incidence Rate [Cases per 100,000 population]	2010-2014	475.6	458.7	443.6	-
103.3%	Hypertension: Medicare Population [Percent]	2015	50.1%	48.5%	55.0%	-
102.2%	People 25+ with a High School Degree or Higher [Percent]	2012-2016	89.4%	91.4%	87.0%	-
102.1%	Preterm Births (OE) [Percent]	2016	9.8%	9.6%	9.6%	9.4%
101.8%	Colorectal Cancer Incidence Rate [Cases per 100,000 population]	2010-2014	39.0	38.3	39.8	39.9

**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
101.4%	Life Expectancy for Females [Years]	2014	80.8	81.9	81.5	-
101.3%	Severe Housing Problems [Percent]	2010-2014	15.6%	15.4%	18.8%	-
101.3%	Hyperlipidemia: Medicare Population [Percent]	2015	40.0%	39.5%	44.6%	-
101.0%	Life Expectancy for Males [Years]	2014	76.9	77.7	76.7	-
100.7%	Adults with Health Insurance [Percent]	2016	92.1%	92.7%	-	100.0%
100.4%	Persons with Health Insurance [Percent]	2016	93.3%	93.7%	-	100.0%
100.1%	Children with Health Insurance [Percent]	2016	96.2%	96.3%	-	100.0%
100.0%	Blood Lead Levels in Children [Percent]	2014	1.3%	1.3%	-	-
100.0%	Babies with Low Birth Weight [Percent]	2016	7.4%	7.4%	8.2%	7.8%
99.2%	Age-Adjusted Death Rate due to Influenza and Pneumonia [Deaths per 100,000 population]	2014-2016	13.2	13.3	14.6	-
99.0%	Adults who are Sedentary [Percent]	2014-2016	20.2%	20.4%	-	32.6%
98.5%	Children Compliant with Immunization Requirements [Percent]	2014	99.6%	98.1%	-	-
98.2%	Mothers who Received Early Prenatal Care [Percent]	2015	76.9%	75.5%	77.0%	77.9%
97.9%	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions [Deaths per 100,000 population]	2014-2016	9.3	9.5	11.0	12.4
97.8%	Population 16+ in Civilian Labor Force [Percent]	2012-2016	65.4%	66.9%	63.1%	-
97.7%	Gonorrhea Incidence Rate [Cases per 100,000 population]	2015	89.3	91.4	123.9	-
97.7%	Alzheimer's Disease or Dementia: Medicare Population [Percent]	2015	8.5%	8.7%	9.9%	-
97.5%	Oral Cavity and Pharynx Cancer Incidence Rate [Cases per 100,000 population]	2010-2014	11.8	12.1	11.5	-
97.0%	Age-Adjusted Death Rate due to Kidney Disease [Deaths per 100,000 population]	2014-2016	13.0	13.4	13.3	-



**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
96.7%	Student-to-Teacher Ratio [Students per teacher]	2015-2016	14.8	15.3	17.7	-
96.7%	High School Graduation [Percent]	2014-2015	91.4%	88.4%	83.2%	87.0%
95.8%	Rheumatoid Arthritis or Osteoarthritis: Medicare Population [Percent]	2015	25.4%	26.5%	30.0%	-
95.8%	Cancer: Medicare Population [Percent]	2015	6.9%	7.2%	7.8%	-
95.4%	Access to Exercise Opportunities [Percent]	2018	90.5%	86.3%	83.1%	-
95.0%	Ischemic Heart Disease: Medicare Population [Percent]	2015	21.1%	22.2%	26.5%	-
95.0%	Frequent Mental Distress [Percent]	2016	11.3%	11.9%	15.0%	-
94.2%	Renters Spending 30% or More of Household Income on Rent [Percent]	2012-2016	43.9%	46.6%	47.3%	-
93.8%	Age-Adjusted Death Rate due to Diabetes [Deaths per 100,000 population]	2014-2016	18.3	19.5	21.1	-
93.7%	Breast Cancer Incidence Rate [Cases per 100,000 females]	2010-2014	119.9	127.9	123.5	-
93.5%	Cervical Cancer Incidence Rate [Cases per 100,000 females]	2010-2014	5.8	6.2	7.5	7.3
92.3%	Chronic Kidney Disease: Medicare Population [Percent]	2015	16.8%	18.2%	18.1%	-
92.1%	Poor Mental Health: Average Number of Days [Days]	2016	3.5	3.8	3.8	-
91.7%	Age-Adjusted Death Rate due to Prostate Cancer [Deaths per 100,000 males]	2010-2014	20.0	21.8	20.1	21.8
91.5%	Infant Mortality Rate [Deaths per 1,000 live births]	2014-2016	5.4	5.9	5.9	6.0
91.1%	Prostate Cancer Incidence Rate [Cases per 100,000 males]	2010-2014	105.7	116.0	114.8	-
90.9%	People 65+ Living Below Poverty Level [Percent]	2012-2016	7.0%	7.7%	9.3%	-
90.0%	Atrial Fibrillation: Medicare Population [Percent]	2015	7.2%	8.0%	8.1%	-
89.2%	Heart Failure: Medicare Population [Percent]	2015	10.7%	12.0%	13.5%	-

**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
88.6%	Liquor Store Density [Stores per 100,000 population]	2015	6.2	7.0	10.5	-
87.1%	Households without a Vehicle [Percent]	2012-2016	6.1%	7.0%	9.0%	-
84.1%	Adults who Binge Drink [Percent]	2014-2016	20.7%	24.6%	-	24.2%
82.5%	Violent Crime Rate [Crimes per 100,000 population]	2012-2014	233.4	282.9	-	-
81.1%	Adults with Asthma [Percent]	2014-2016	7.7%	9.5%	-	-
80.6%	Food Insecure Children Likely Ineligible for Assistance [Percent]	2016	29.0%	36.0%	20.0%	-
70.7%	Substantiated Child Abuse Rate [Cases per 1,000 children]	2016	6.5	-	9.2	-
69.2%	Babies with Very Low Birth Weight [Percent]	2015	0.9%	1.3%	1.4%	1.4%
66.7%	Recreation and Fitness Facilities [Facilities per 1,000 population]	2014	0.1	-	0.1	-
60.0%	Farmers Market Density [Markets per 1,000 population]	2016	0.1	0.0	-	-
40.8%	Drinking Water Violations [Percent]	FY 2013-14	2.0%	4.9%	-	-
17.1%	Lyme Disease Incidence Rate [Cases per 100,000 population]	2016	6.8	39.7	8.1	-
15.0%	HIV Diagnosis Rate [Cases per 100,000 population]	2014	0.6	4.0	-	-
-	Total Health Care and Social Assistance Receipts/Revenue [Dollars, in millions]	2012	\$1,121	-	-	-
-	All Firms [Firms]	2012	11,239	-	-	-
-	Firms Owned by Men [Percent]	2012	56.0%	54.6%	53.7%	-
-	Firms Owned by Minorities [Percent]	2012	7.9%	9.4%	28.8%	-
-	Firms Owned by Nonminorities [Percent]	2012	88.1%	87.7%	68.7%	-
-	Firms Owned by Nonveterans [Percent]	2012	84.3%	85.6%	87.1%	-
-	Firms Owned by Veterans [Percent]	2012	9.3%	9.2%	9.1%	-

**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
-	Firms Owned by Women [Percent]	2012	30.3%	30.9%	35.8%	-
-	Employer Establishments [Number of Establishments]	2015	3,275	-	-	-
-	Female Population 16+ in Civilian Labor Force [Percent]	2012-2016	61.2%	63.3%	58.3%	-
-	Total Employment [Paid Employees]	2015	56,646	-	-	-
-	Homeownership [Percent]	2012-2016	64.3%	58.4%	55.9%	-
-	Median Housing Unit Value [Dollars]	2012-2016	\$132,500	\$167,000	\$184,700	-
-	Median Monthly Owner Costs for Households without a Mortgage [Dollars]	2012-2016	\$487	\$532	\$462	-
-	Mortgaged Owners Median Monthly Household Costs [Dollars]	2012-2016	\$1,231	\$1,391	\$1,491	-
-	Housing Units [Housing units]	2016	68,527	-	-	-
-	Median Household Gross Rent [Dollars]	2012-2016	\$749	\$789	\$949	-
-	Median Household Income [Dollars]	2012-2016	\$50,968	\$54,610	\$55,322	-
-	Per Capita Income [Dollars]	2012-2016	\$25,884	\$29,253	\$29,829	-
-	Annual Ozone Air Quality [American Lung Association (ALA) assigned grade]	2014-2016	5.0	-	-	-
-	Recognized Carcinogens Released into Air [Pounds]	2016	1,953	-	-	-
-	Children with Low Access to a Grocery Store [Percent]	2015	7.4%	-	-	-
-	Fast Food Restaurant Density [Restaurants per 1,000 population]	2014	0.7	-	-	-
-	Grocery Store Density [Stores per 1,000 population]	2014	0.2	-	-	-
-	Households with No Car and Low Access to a Grocery Store [Percent]	2015	2.6%	-	-	-
-	Low-Income and Low Access to a Grocery Store [Percent]	2015	10.6%	-	-	-
-	People 65+ with Low Access to a Grocery Store [Percent]	2015	3.9%	-	-	-

**Community Data from Conduent Healthy Communities Institute**

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
-	People with Low Access to a Grocery Store [Percent]	2015	28.9%	-	-	-
-	SNAP Certified Stores [Stores per 1,000 population]	2016	0.8	-	-	-
-	PBT Released [Pounds]	2016	59.0	-	-	-
-	Average Household Size [Persons per household]	2012-2016	2.5	2.4	2.6	-
-	Female Population [Percent]	2016	50.8%	50.3%	50.8%	-
-	Foreign Born Persons [Percent]	2012-2016	4.6%	4.8%	13.3%	-
-	Households [Households]	2012-2016	63,941	-	-	-
-	Male Population [Percent]	2016	49.2%	49.7%	49.2%	-
-	Persons per Square Mile [Persons per square mile]	2010	223.3	105.0	87.4	-
-	Population Age 5+ with Language Other than English Spoken at Home [Percent]	2012-2016	8.3%	8.7%	21.1%	-
-	Population American Indian and Alaska Native [Percent]	2016	0.5%	1.1%	1.3%	-
-	Population Asian [Percent]	2016	1.3%	2.8%	5.7%	-
-	Population Black or African American [Percent]	2016	5.1%	6.6%	13.3%	-
-	Population Hispanic or Latino [Percent]	2016	8.6%	6.7%	17.8%	-
-	Population Native Hawaiian and Other Pacific Islander [Percent]	2016	0.1%	0.1%	0.2%	-
-	Population Over Age 65 [Percent]	2016	15.8%	16.1%	15.2%	-
-	Population Two or More Races [Percent]	2016	2.3%	1.9%	2.6%	-
-	Population Under Age 18 [Percent]	2016	23.6%	22.3%	22.8%	-
-	Population Under Age 5 [Percent]	2016	6.0%	5.8%	6.2%	-
-	Population White [Percent]	2016	90.7%	87.5%	76.9%	-
-	Population White (Not Hispanic or Latino) [Percent]	2016	83.1%	81.7%	61.3%	-
-	Total Population [People]	2016	161,620	-	-	-



## Community Data from Conduent Healthy Communities Institute

Severity Ratio	Indicator [Units]	Year	Rock County Value	WI Value	US Value	HP 2020 Target
-	Veteran Population [Percent]	2012-2016	9.0%	8.3%	8.0%	-
-	Single-Parent Households [Percent]	2012-2016	39.7%	31.5%	33.6%	-
-	People 65+ Living Alone [Percent]	2012-2016	30.2%	29.0%	26.4%	-
-	Mean Travel Time to Work [Minutes]	2012-2016	22.8	21.9	26.1	-
-	Solo Drivers with a Long Commute [Percent]	2012-2016	28.3%	26.5%	34.7%	-
-	Workers Commuting by Public Transportation [Percent]	2012-2016	0.6%	1.9%	5.1%	5.5%
-	Workers who Drive Alone to Work [Percent]	2012-2016	82.7%	80.7%	76.4%	-

## prioritizing health needs

As part of the CHNA requirement, hospitals are required to evaluate the needs that are identified and validated through the data analysis. In order to do so, hospitals must establish specific criteria that will be used to assess each of the identified community needs. The system has recommended criteria and ratings that each hospital can use during prioritization. The method used to evaluate the needs as well as potential weighting is customizable based on the hospital's approach.

Prior to review of the data, a list of criteria was established to aid in the selection of priority needs. During the data review process, attention was directed to health issues that met these criteria:

- Health issues that impact a lot of people or for which disparities exist, and which put a greater burden on some population groups
- Poor rankings for health issues in Rock County as compared to Wisconsin, the US, or Healthy People 2020 national health targets
- Health issues for which trends are worsening

SSM Health St. Mary's Hospital – Janesville sought and received input from the Rock County Public Health Department. The hospital also worked closely with the Health Equity Alliance of Rock County to develop the October 2017 Rock County Community Health Assessment (CHA). Community perspectives and data gathered during this endeavor were incorporated into the hospital's needs assessment. Community perspectives were gathered from multiple activities, including a community survey, one-to-one interviews, and focus groups (community conversations), summarized as follows:

- Community Survey – A community perception survey of individuals who “lives, works, learns, or plays in Rock County” was conducted in 2017, with 1,345 responses
- Interviews – Twelve one-to-one conversations with community stakeholders were conducted in 2017 to identify changing community health needs
- Focus Groups – Twelve community conversations about health impacts were conducted with over 130 people in 2017 to assess current health challenges

In addition, SSM Health St. Mary's Hospital – Janesville created an internal CHNA steering committee to prioritize needs in Rock County that were identified and validated through data analyses. The steering committee consisted of staff members representing administration, nursing, quality, operations, and communications. The steering committee aligned key strategies, resources, magnitude of the issues and overall capability of the hospital to address the suggested needs.

Nineteen community health needs were considered by the steering committee. These needs were (1) access issues, (2) aging issues, (3) alcohol abuse, (4) asthma, (5) cancers, (6) dental problems, (7) diabetes, (8) domestic violence, (9) heart disease, (10) HIV / AIDS, (11) maternal and child health, (12) mental health, (13) obesity, (14) rape and sexual assault, (15) STDS / STIs, (16) substance abuse, (17) teen pregnancy, (18) tobacco use, and (19) violence/gun injuries.

Thus SSM Health St. Mary's Hospital – Janesville identified the three priorities for the 2019-2021 CHNA and strategic implementation plan to include: Obesity, Tobacco Use, and Substance Abuse.

**prioritization**

The prioritization matrix used by SSM Health St. Mary's Hospital – Janesville to assess priorities is summarized below

Identified Community Needs	Magnitude	Alignment with Mission, Key Strategies & Priorities	Resources Needed to Address the Issue	Hospital's ability to Impact	Total Score
Access Issue	5	5	3	3	16
Aging Issues	5	5	3	3	16
Heart Disease	3	5	4	3	15
Substance Abuse	4	5	2	3	14
Tobacco Use	3	5	3	3	14
Asthma	3	4	3	4	14
Maternal and Child Health	3	5	2	3	13
Obesity	5	5	1	1	12
Cancers	4	5	1	2	12
Domestic Violence	2	5	2	3	12
Mental Health	5	5	1	1	12
Diabetes	4	5	1	1	11
HIV/AIDS	3	3	4	1	11
STDs / STIs	4	4	1	2	11
Rape and Sexual Assault	2	5	1	1	9
Teen Pregnancy	4	3	1	1	9
Alcohol Abuse	3	3	1	1	8
Dental Problems	3	3	1	1	8
Violence/Gun Injuries	2	4	1	1	8

**Scoring Guidance**

Score	Magnitude	Alignment with Mission, Key Strategies & Priorities	Resources Needed to Address the Issue	Hospital's ability to Impact
5	Significantly unfavorable as compared to benchmark	Directly consistent with our mission, key strategies and priorities	No additional resources needed; service is currently in place	Can provide a service likely to measurably improve the community's health status
3	Slightly unfavorable or equal compared to benchmark	Somewhat related to our mission, key strategies and priorities	Minimal resources needed to extend a current service	Can provide a service likely to measurably improve the community's health status with expertise from a community organization partner
1	Equal to or more favorable as compared to benchmark	Inconsistent with our mission, key strategies and priorities	Requires significant resources	Don't have the ability to measurably improve this need

## CHNA collaborators

SSM Health St. Mary's Hospital – Janesville worked closely with the Health Equity Alliance of Rock County to develop the October 2017 Rock County Community Health Assessment (CHA). Community perspectives and data gathered during this endeavor were incorporated into the hospital's Needs Assessment. Collaborators with the Rock County CHA are listed below.

- Aging and Disability Resource Center of Rock County
- Beloit Health System
- Building a Safer Evansville (BASE)
- Children's Hospital – Exchange Family Resource Center
- City of Janesville
- Community Action, Inc.
- Community Health Systems, Inc.
- Community Link
- Edgerton Hospital
- HealthNet of Rock County
- Healthy Edgerton
- Janesville Mobilizing 4 Change
- Mercy Health
- Rock County Criminal Justice System Planner/Analyst
- Rock County Human Services
- Rock County Public Health Department
- Rock County Supervisors
- Rock-Walworth Comprehensive Family Services Head Start/Early Head Start
- School District of Beloit
- Second Harvest
- South Central Wisconsin Area Health Education Center
- SSM Health
- United Way Blackhawk Region
- University of Wisconsin Extension
- Youth 2 Youth 4 Change