# 2018 Community Health Needs Assessment

## St. Agnes Hospital

430 E. Division Street, Fond du Lac WI 54935





A member of SSMHealth

## Table of Contents



Message to Our Community	03
Who We Are	04
About Our Community Hospital	06
Executive Summary	07
Healthy Fond du Lac County 2020 Steering Committee	

## Appendices

2018 Fond du Lac County Health Department - Community Health Assessment:1 A Summary Report of Key Informant Interviews	13
2018 Fond du Lac County Health Department - Community Health Assessment: A Summary Report of Priority Health Issues Survey	34
2018 CHA Task Force - Identifying CHA Priorities	42



## Message to Our Community





At St. Agnes Hospital, we have made a commitment to bring the finest and most stateof-the-art health care to the communities we serve. We want to deliver this care in a high-quality environment through a healing presence, and we want to do this in the most cost-effective way possible.

We know that keeping individuals healthy and out of their providers' offices helps to reduce overall health care costs. That's a commitment we don't take lightly.

As you will read later in this report, St. Agnes Hospital is working collaboratively with other health care and business leaders in Fond du Lac County to help address some significant health concerns - obesity, dental care, mental health and alcohol abuse.

We have made a pledge to help find viable solutions to truly impact these areas of concern and will, in some cases, take the lead.

On our own, we have initiated some creative programs to help move to greater wellness. We look for new ways to help our providers deliver the best care through new best practices, and we continue to build our care transitions program, making a commitment to help our patients find their way through our system and help to demystify health care.

This is only the tip of the iceberg. St. Agnes Hospital is taking some great leaps to provide exceptional care close to home. This report shares the many good works that we have accomplished, and those that are underway within our ministry to help support the community in good health.

Sincerely,

Katherine Vergon

Katherine Vergos President, St. Agnes Hospital



## Who We Are



#### **St. Agnes Hospital**

St. Agnes Hospital provides services in nearly all specialties except transplant; we run six operating rooms each day and provide 24/7 emergency services. A daVinci robot is used for general and gynecological procedures, and a new hybrid lab offering minimally-invasive heart rhythm treatment and more.

### **Our Services**

- Adult Day Services
- Agnesian HealthCare Foundation
- Agnesian Work & Wellness
  - Alcohol & Drug Testing (including DOT)
  - Corporate Consulting
  - Drug Screen Collection Site
  - Employee Assistance Program
  - Employee Physical Exams
  - Health Programs & Screenings
  - Health Risk Appraisal
  - Hearing Screenings
  - Occupational Medicine
  - Traveler's Health Clinic
  - Wellness Programs & Coaching
  - Work Injury Care Services
- Ambulatory Infusion
- Anticoagulation Management
- Behavioral Health Services
  - Addiction & Drug Abuse Treatment
  - Agnesian Autism, Behavior & Communication Center

- Agnesian Beyond Boundaries of Autism
- Biofeedback
- Counseling
- Doll & Associates
- Domestic Violence Services
- Psychiatric Care
- Psychiatric/Psychological Testing, Assessment & Evaluations
- Bereavement Services
- Cancer Care
  - Genetic testing
  - Navigation Care Coordination
  - On-site Laboratory Services
  - On-site Pharmacy Services
  - Living Beyond Cancer Program
  - Hematology & Medical Oncology
  - Radiation Oncology
- Care Management
- Center for Pain Care
- Center for Physical Rehab
- Center for Sleep Disorders



## Who We Are (continued)



- Community Care Program
- Courtesy Van
- Dale Michels Center for Heart Care
  - Acute Care Services
  - Angioplasty
  - Cardiac Catheterization/Vascular Laboratory
  - Cardiac Rehabilitation
  - Cardiopulmonary Services
  - Congenital Cardiology
  - Electrocardiographic Services
  - Electrophysiology
  - Hybrid Lab
  - Open-Heart Surgery
  - Pacemaker Clinic
- Diabetes Services
- Dialysis Services
- Emergency Department
- GI Lab/Endoscopy Services
- Health Resource Center
- Hospitalists
- Infectious Disease
- Intensive Care Unit
- Interpreter Services
- Lactation Services
- Medical Imaging
  - Bone Density
  - Interventional Radiology
  - Magnetic Resonance Imaging (MRI)
  - Positron Emission Tomography (PET) Scanning
  - Stereotactic Mammography Needle Breast Biopsy System
  - Women's Imaging Center (3D mammography)
- Medication Assistance Program
- Medical/Surgical Services

- Neurodiagnostics Services
- Neuro-Medical Unit
- Nutrition Counseling
- Obstetrics/Gynecology Services
- Pain Medicine
- Palliative Care Services
- Parish Nursing
- PASS Clinic (PreAdmission Surgical Services)
- Pediatrics Unit
- Primary Stroke Center
- Pulmonary Rehabilitation
- Samaritan Health Clinic
- SANE Program (Sexual Assault Nurse Examiner)
- School Nursing
- Speakers Placement Service
- Special Diet Mobile Meal Program
- Spiritual Care Services
- Sports & Spine Center Fond du Lac & Mayville
  - Athletic Training Services
  - Dry Needling
  - Outpatient Rehabilitation
  - Physical, Occupational & Speech Therapies
  - SPEED
  - Work Hardening & Conditioning
  - WorkSTEPS Pre-employment & Fit-for-Duty Testing
- Support Groups
- Surgery Department & Day Surgery
- Treffert Center
- Valet Parking
- Volunteer Services
- Women & Infants
- Wound Care, including hyperbarics



## About Our Community Hospital

## Our Community Hospital by the Numbers





## **Executive Summary**



#### **SSM Health Mission**

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

#### Background

St. Agnes Hospital has been proud to serve as an active Healthy Fond du Lac County 2020 participant since 2008 when the first Community Health Assessment process began. The assessment was commissioned by the Healthy Fond du Lac County 2020 Steering Committee. The Fond du Lac County Health Department and Healthy Fond du Lac County 2020 Steering Committee utilized the Wisconsin Guidebook on Improving the Health of Local Communities, which is built on the Take Action Cycle by County Health Rankings and Roadmaps. This was the framework followed by each step of the community health improvement process.

### Healthy Fond du Lac County 2020 Mission & Vision

Our mission is to assess, identify, address and monitor priority health needs through community collaboration.

Our vision is a community where all Fond du Lac area residents can reach their highest potential for health.



## Healthy Fond du Lac County 2020 **Steering Committee**

### **Steering Committee Membership**

- Agnesian HealthCare/SSM Health
- Aurora Health Care
- City of Fond du Lac Police Department
- Envision Greater Fond du Lac
- Fond du Lac Area Businesses on Health
- Fond du Lac Area Foundation
- Fond du Lac Area United Way
- Fond du Lac County
- Fond du Lac County District Attorney

- Fond du Lac County Health Department
- Fond du Lac Family YMCA
- Fond du Lac School District
- Marian University
- Moraine Park Technical College
- Ripon College
- St. Mary's Springs Academy
- UW-Extension Fond du Lac County

#### **Our Purpose**

To serve as an advisory group for the Community Health Improvement Process.

### **2018-2021 Community Health Priorities**

- 1. Nutrition and Physical Activity
- 2. Mental Health
- 3. Alcohol and Other Drug Abuse

#### **Overarching priorities**

- Trauma-Informed Care
- Social Determinants of Health

## **Priority Action Teams & Collaborations**











## Priority: Nutrition and Physical Activity

### Goal

Increase the number of Fond du Lac County residents living at healthy weight for their height through *eating healthier and being more active.* 

## 2017 Community Health Survey Key Findings - Adults



Overweight & Obesity Almost 3 in 4 classify as being overweight or obese

Source: 2017 Community Health Survey Report



Nutrition - Vegetables 1 in 4 reported eating the recommended servings of vegetables per day



Nutrition - Fruits About 1 in 2 reported eating the recommended servings of fruit per day



Physical Activity Almost 1 in 4 met the reommended amount of physical activity and strength training

## 2017 Community Health Survey Key Findings - Youth



Overweight & Obesity Just over 1 in 4 classify as being overweight or obese



Nutrition - Vegetables 1 in 4 reported eating the recommended servings of vegetables per day



About 2 in 5 reported eating the recommended servings of fruit per day



Physical Activity About 1 in 5 met the reommended amount of physical activity and strength training

## Living Well Coalition 2015-2018 Accomplishments

Breastfeeding Friendly Child Care Centers

Source: 2017 Student Health Experiences and Attitudes Survey Report

- Downtown Fond du Lac Farmers Market
- Farmers Market Vouchers
- Fond du Lac School District Physical Education Program Grant
- Food Forest Initiative

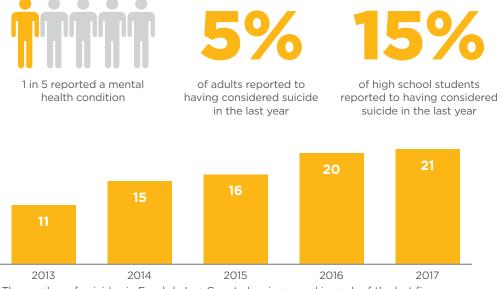


## Priority: Mental Health

### Goal

- Reduce stigma around mental health and suicide.
- Increase access to behavioral health services across the lifespan, and for those in high-risk groups.
- Decrease the number of deaths by suicide.

## **2017 Community Health Survey Key Findings**



The number of suicides in Fond du Lac County has increased in each of the last five years.

Sources: 2017 Community Health Survey Report • Fond ud Lac County Medical Examiner

## CSI of Fond du Lac County, Inc. 2015-2018 Accomplishments

- Merged existing Trauma-Informed Care Committees
- Fond du Lac County Mental Health Services Provider Survey
- Promoted a stigma-free approach to mental/behavioral wellness
- Suicide Prevention Initiative Destination Zero Suicide



## Priority: Alcohol and Other Drug Abuse

### Goal

- Decrease underage drinking and adult binge drinking.
- Decrease the misuse and abuse of drugs, particularly opioids.

### **2017 Community Health Survey Key Findings**



Alcohol Use - Adults Nearly 1 in 5 adults reported binge drinking



Alcohol Use - Youth Nearly 1 in 5 youth reported binge drinking





Youth Access 1 in 3 youth reported very/fairly easy access to prescription medications for misuse





Youth Electronic Vapor Product Use About 1 in 10 youth reported electronic vapor product use in the past 30 days



#### Drug Overdose Rate Per Year

Number of deaths per 100,000 people due to either accidental of intentional drug poisoning, based on 2014-2016 data

Sources: 2017 Community Health Survey Report • 2017 Student Health Experiences and Attitudes Survey Report County Health Rankings and Roadmaps • Fond du Lac County Medical Examiner's Office

## DFC of Fond du Lac County 2015-2018 Accomplishments

#### **Drug Free Communities**

- Full integration of the four pillar approach to form the Opioid Initiative
- Developed an action plan with goals and objectives, building capacity, and refining data collection

#### Alcohol

• Increased consistency in compliance checks by law enforcement, community events best practices, and adoption of the social host ordinance

#### **Other Drugs**

- Drug Take Back campaign collected over two tons of drugs in 2016 and 2017 for disposal
- Drug Drop Boxes and Narcan Trainings
- · Increased awareness, education, and community engagement



11

## Appendices

2018 Fond du Lac County Health Department - Community Health Assessment:12 A Summary Report of Key Informant Interviews	
2018 Fond du Lac County Health Department - Community Health Assessment:	3
2018 CHA Task Force - Identifying CHA Priorities	



# FOND DU LAC COUNTY HEALTH DEPARTMENT

COMMUNITY HEALTH ASSESSMENT A SUMMARY REPORT OF KEY INFORMANT INTERVIEWS 2018

## Table of Contents

Introduction
Focus Area Ranking 3
Top Five Health Issues
Health Focus Area Summaries
Mental health 4
Alcohol and other drug use
Chronic disease prevention and management7
Adequate, appropriate, and safe food and nutrition
Physical activity9
Injury and violence
Healthy growth and development11
Communicable disease prevention and control 11
Oral health
Tobacco use and exposure12
Reproductive and sexual health
Environmental and occupational health13
Appendix A 15
Appendix B 16

## Introduction

This report summarizes the findings from 20 Key Informant Interviews that were conducted as a part of the 2017 Fond du Lac County Community Health Assessment (CHA). The purpose of the interviews was to collect more in-depth, qualitative information from community experts who can provide valuable insight on pressing health issues in the community.

Key Informants in Fond du Lac County were identified by the Community Health Assessment Task Force members and interviewed by the Fond du Lac County Health Department. Interviews were completed in-person and electronically via questionnaires in February and March 2018. Interview questions were synonymous with the questionnaire (Appendix B) to ensure a consistency in data collection. Interviewees were asked to rank twelve health focus areas from highest to lowest priority, with number one being the top priority health issue to address in Fond du Lac County based on the population served.

#### Interview tool/Questionnaire

Interviewees were asked to rank the 12 health focus areas presented in Wisconsin's State Health Plan from highest to lowest priority, with number one being the top priority health issue to address in Fond du Lac County based on the population their organization serves.

Interviewees were asked the following questions for each of the top four health focus areas identified:

- What are existing strategies to address this health issue? What is working well?
- What are the barriers and challenges in addressing this health issue? What could be done differently?
- What additional strategies are needed to address this health issue?
- Who are the key groups in the community that we could partner with to improve community health and quality of life?
- Is there a subgroup or population where we could target our efforts? (when applicable)

All key informant interviewees were informed that their participation is voluntary, that their responses will have anonymity, and responses will be summarized with other interviews and published in a summary report. This report is the summary of key informant interviews for the 2017 Fond du Lac County Community Health Assessment.

**Limitations:** Twenty key informant interviews were conducted in Fond du Lac County. The report relies on the opinions and experiences of a limited number of community experts identified as being well-connected to the community. However, responses may not be representative of the overall perception of community strengths, needs, and challenges. It is possible that the results could have been considerably different if a different set of informants had been interviewed. Results should be interpreted with caution and in conjunction with other Fond du Lac County data (e.g. community health surveys and secondary data).

## Focus Area Rankings

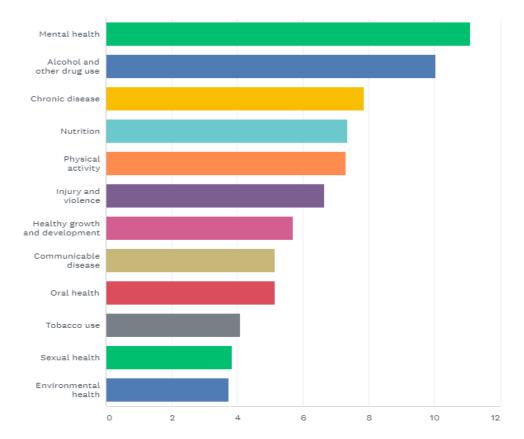


Figure 1. Ranking of 12 Health Focus Areas by Key Informants

The chart above displays the overall rankings of the 12 health focus areas completed by the 20 key informants. Health focus areas are listed in descending order from most-pressing to least-pressing based on the rankings. Based on the overall rankings, the top five health focus areas ranked most consistently as the most-pressing health priority are: mental health, alcohol and other drug use, chronic disease, physical activity, and nutrition. Environmental health was ranked as the lowest priority most frequently. Health focus areas were weighted by the ranking they received, scoring less if they were ranked lower on the scale and scoring more if they were ranked higher on the scale. Key informants were asked to rank the twelve focus areas 1 through 12, with one being the most-pressing health focus area to address to improve health and twelve being the least-pressing health focus area to improve health.

## **Top Five Health Issues**

The five health focus areas ranked most consistently as top five health issues for Fond du Lac County were:

- 1. Mental Health
- 2. Alcohol and Other Drug Use
- 3. Chronic Disease
- 4. Nutrition
- 5. Physical Activity

Nutrition and physical activity were tied in the ranking for being the fourth most pressing health issue.

## Health Focus Areas Summaries

This sections includes a summary of responses for each of the twelve health focus areas. The summaries are based on 20 key informant interviews that were conducted and are not meant to serve as a complete list of Fond du Lac County assets and barriers for each of the health focus areas.

#### Mental health

#### **Existing Strategies**

Key informants named the Health Care Center with 24 beds that requires a 72-hour hold, proactive Crisis Intervention Training (CIT) for Fond du Lac police, active support from law enforcement, collaborations among independent agencies and local health systems, NAMI Fond du Lac County, Fond du Lac County Department of Community Programs, 24-hour emergency hotline, socialization opportunities at senior centers, senior center programs, dementia friendly coalition, several treatment methods for mental health issues in area, employers increasing mental health support services, support groups in the community, The Reporter (newspaper based in Fond du Lac) for media coverage, community partnerships and willingness to work together, Comprehensive Service Integration Fond du Lac County, Inc. (CSI), qualified leadership on coalitions, grant funded program to address suicide prevention focusing on middle-aged men, community-wide focus on trauma-informed care, SHARDS Inc. which provides subsidized mental health services, Treffert Center, Agnesian HealthCare Mental Health Navigators, Healthy Fond du Lac County 2020, Mental Health for Youth First Aid, screening tools (e.g. YScreen, ASQ, ACEs), school and community trainings such as Question, Persuade, Refer (QPR), presence of counselors, social workers, and psychologist at schools, increase in mental health resources by local health systems, and availability of inpatient treatment and opportunities if insured and affordable as strategies to support mental health in the county.

#### Barriers and Challenges:

Key informants mentioned a general misunderstanding of mental illness, stigma, lack of psychiatrists and mental health providers, access to mental health services and providers (long wait time to see provider, long wait time between services, short appointment times, and insurance coverage), high caseloads for providers and provider burn-out, transportation if service is out of town, cost of care, limited resources and funding, alcohol consumption exacerbates mental health issue, no long term resources and solutions in place (breaking the cycle), transgender individuals unable to find provider for services, lack of diversity in provider population, language barriers for services, education on mental illness, access to maintenance mental health care, adverse effects of untreated mental illness (i.e. loss of job, self-harm, addiction issues), some workplaces lack mental health services and support, support for students who have been identified with a mental health issue, high caseload for social workers and psychologist in schools, parent/guardian sign-off for student to receive mental health services at school and connect with additional resources, different approaches in community to address mental health issues and make it challenging to work together, attracting and retaining providers, training for officers and first responders and trainings in the workplace, not willing to explore new opportunities to fix an issue, and limited program funding.

#### Additional Strategies Needed

Key informants suggested to address mental health in earlier grade levels such as in middle school, increased screenings for teenagers, care coordination for students and families among school and health centers, timely follow up for people and children in crisis, population-based education on mental health issues, services available and how to navigate them, increase general understanding of mental health, treatment services, and stigma reduction, increase funding and support, explore reason for increase in mental health needs, address provider shortage, increase case management at all levels, incentivize individuals to enter the counseling field, increase community support for underserved populations (low-income, children), increase outreach to different communities in Fond du Lac County, increase trainings for adults through Mental Health for Youth First Aid, adopt universal language for zero suicides, increase provider diversity and languages spoken, increase employer investment in mental health services and programs to improve employee health, address the epidemic of isolation, improve access to more intensive care and assistance, safe zone trainings throughout the community, normalize mental health as an equally important variable to assess regularly, and increase community collaboration in addressing mental health issues.

#### **Key Community Partners**

Key informants suggested the following community partners to improve mental health: NAMI, Agnesian HealthCare, Beacon House, Blandine House, Adult Care Consultants, Berry House, schools, law enforcement, United Way, Social Services, Behavioral Health of local health systems, Fond du Lac County Health Department, faith community, Fond du Lac County Department of Community Programs, independent agencies, CSI members and clients, non-profit organizations, SHARDS Inc., Latinos Unidos, Ebony Vision, United for Diversity, DELT – District Equity Leadership Team of Fond du Lac School District, Humanity Project, Equality Project, LGBTQ+ support groups, Brotherton Indians, Fond du Lac Area Women's Fund, Fond du Lac Family YMCA, Boys and Girls Club of Fond du Lac, FDL Pride Alliance, and those who work with individuals facing mental health challenges such as clergy, school counselors, physicians, and job agencies.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informants mentioned this issue affects all and is widespread. Subgroups mentioned where effort may be targeted included children, grades K though 12, African Americans, older adults, individuals who identify as LGBTQ+, women, middle-aged men, veterans and individuals of lower income and have low insurance coverage for mental health or are uninsured. Efforts include affordable care and more help for all people, transportation, and working with school districts to reduce barriers to mental health once they've been identified. Additional efforts include working with LGBTQ population and underserved populations to understand needs. Efforts are being targeted at middle-aged men and those identified high at-risk, veterans and individuals who identify at LGBTQ+, with a community collaborative and coordinated approach through a Healthy Wisconsin Partnership Program grant.

### Alcohol and Other Drug Use

Key themes related to alcohol and other drug use include recognition of lack of mental health care coincides with substance use, need for better access to treatment and recovery services, and social acceptance of binge drinking as challenges improving health in this area.

#### **Existing Strategies**

Key informants named inpatient and outpatient treatment and recovery services such as Beacon House and Blandine House, Alcoholics Anonymous and Narcotics Anonymous, Drug Court, Gratitude Club, Department of Community Programs, Agnesian Health Care, and health centers; availability of multiple programs for those who are in need and seek them, Narcan trainings and Narcan availability, Alcohol Tobacco and Other Drug Surveys in select schools, drug drop boxes, law enforcement and community policing, alcohol and tobacco compliance checks, social host ordinance adoption, evidence-based programs in schools, educational campaign "Parents Who Host, Lose The Most", Drug Free Communities of Fond du Lac County and coordination among public and private sectors, including resource allocation on alcohol and other drug use and strong community partnerships.

#### **Barriers and Challenges**

Key informants mentioned social acceptance of binge drinking and difficulty in ability to influence norms and attitudes towards alcohol use (underage and binge drinking) and drug use, high alcohol outlet density, ease of access to alcohol and drugs, lack of sufficient resources for aging population and lack of treatment and recovery resources for veterans, stigma of drug use, legal barriers, current legislation for drunk driving penalties, vaping and juuling prevalence among youth, general lack of interest among youth to participate in group activities, increasing attendance at AA/NA meetings, opioid prescribing practices in the health care industry, difficulty in accessing treatment, navigating the system, lack of a support system for individuals using a substance, resources are not as readily available for certain populations when ready for change, community partners taking different approaches to address alcohol and other drug use in the County, disconnect among some rural communities, general over criminalization and punishment with illegal drug use in in the justice system, and over policing among minority communities.

#### Additional Strategies Needed

Key informants suggested stronger legislation around the consequences of alcohol and drug use, including selling to minors, education on the facts of substance use, strategies are appropriate and culturally sensitive for intended audience, proactive approach with law enforcement, more policies and practices on alcohol reduction, increased access to alcohol and other drug abuse services and programs, increased number providers, need more health insurances to cover addiction and in-patient treatment, prevention education and stigma reduction, alcohol tax, general shift from criminalization to rehabilitation and support, and willingness to try new strategies that have worked in other communities, strategies that help create a culture where alcohol and substance abuse is less socially acceptable, and increase social events and activities in the community that do not permit alcohol use.

#### Key Community Partners

Key informants named the following partners to improve community health:

Law enforcement, schools, hospitals, AA/NA, Gratitude Club, schools, colleges and universities, Aurora HealthCare, Agnesian Healthcare/SSM Health, governmental agencies, treatment facilities, Comprehensive Service Integration of Fond du Lac County Inc., Healthy Fond du Lac County 2020, NAMI, Fond du Lac County Department of Community Programs, Life Enforcement program, teenagers, Drug Free Communities Fond du Lac County coalition members, drinking establishments, rural communities, churches, large business community leaders, non-profits, and all sectors of the community.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informants named everyone as this issue crosses all groups and socio-economic levels. It was mentioned that some groups may be affected more by this issue such as low-income neighborhoods where there is a higher alcohol outlet density, vulnerable ages such as middle school youth, and middle aged to older males. To target efforts towards subgroups mentioned it was recommended to use appropriate strategies for the generation targeting and explore and address root causes.

#### Chronic disease prevention and management

#### **Existing Strategies**

Primary care, including talking with physicians and registered dieticians, follow up with patients, preventive screenings and managed care, healthcare, Health Risk Assessments that provide rewards to encourage healthier lifestyle (e.g. lower monthly premiums), significant chronic disease and care management programs, education, prevention, qualified and committed health professionals, many dedicated to addressing this issue, providers graded on their management of diseases, and disease prevention is linked to education about healthy eating, exercise, mental health, stress, drug use and preventive exams.

#### **Barriers and Challenges**

Difficultly to get an appointment with doctor (access), access proper care (insurance, cost, transportation, support system), medications as easy solution to manage condition, resistance to lifestyle changes, changes in nutrition guidelines and diet recommendations, short diet trends, funding for medications, Fond du Lac County Department flat funding, limited access to resources in rural areas, gaps in services for those isolated to homes, more resources needed for people without insurance and increase in preventive care, patient compliance with medical care, provider specialist shortages, programming to address chronic disease (once diagnosed) is reactive rather than proactive, general lack of understanding illness or disease that was diagnosed, and alternative treatment/support options for low-income persons with chronic illnesses to avoid using emergency room service as a clinic and prevent over-utilization of unnecessary emergency room services.

#### Additional Strategies Needed

Increased support for individuals on disability to better manage health, improve education and prevention efforts among populations at higher risks for developing chronic disease, funding to cover costs of preventative care visits, increase understanding of routine care, and long term use of a recommended healthy eating pattern.

#### Key Community Partners

Local health systems and health providers, Samaritan Health Clinic, Fond du Lac County Health Department, Fond du Lac County Department of Community Programs, Fond du Lac Area Businesses on Health (FABOH), schools, faith community, senior centers, Fond du lac Family YMCA, Boys and Girls Club of Fond du Lac, churches with a parish nurse program, employers, insurance companies, wellness groups, first responders and community at large is socially responsible.

Subgroup/population where efforts could be targeted and how efforts could be targeted: Populations served through hospitals were mentioned as a group where efforts could be targeted.

## Adequate, Appropriate, and Safe Food and Nutrition (nutrition)

#### **Existing Strategies**

Key informants named following strategies in place to promote nutrition and food security throughout the county:

*Existing strategies in schools*: healthy food options available, including meal programs (free and reduced school lunch and breakfast), fruit and vegetable programs, backpack buddies (send non-perishable food home with child for weekend), healthy vending machines and snack options, and wellness policies, school gardens, nutrition education included in curriculum, and Physical Education Program grant. Note: not all strategies apply to all school districts in Fond du Lac County.

*Existing strategies in the community*: farmers market, winter farmers market, community gardens, Living Well coalition, food pantries, food drives, meal sites and community agencies addressing food insecurity (such as Salvation Army), Women Infants and Children (WIC) Nutrition Program, FoodShare Nutrition Program, Farmers Market Nutrition Program vouchers, senior meal dining program and home delivered meal program.

#### **Barriers and Challenges**

Key informants named barriers and challenges to food access and healthy eating: staying up-to-date on community food resources, families not making it priority to have sufficient food at home, transportation to food pantries and healthy food options, lack of fresh produce at food pantries, food pantries rely on community donations which may or may not be healthy choices, social stigma with back pack buddies program, cost of healthy food choices, youth access to meals in summertime, school lunches, outreach of nutrition services to homebound individuals, lack of knowledge on healthy food choices, cooking skills, and shopping strategies, access to education on healthy food choices, cooking skills, and meals programs, abundance of fast food options available, and efforts in place and strategies implemented but have not seen reduced rates of overweight or obesity.

#### Additional Strategies Needed

Key informants named the following strategies: promotion of resources that are available to families and updated resource list, increased awareness of resource list so it can be utilized; promotion of Community Supported Agriculture (CSA) Produce with a Purpose; nutrition education, available in language and literacy levels appropriate for audience; a way to address FoodShare grace period when income no longer qualifies; cost-effective and evidence-based programs, gardens for families; better the ratio of healthy to less healthy food options available, increased community access to fresh fruits and vegetables; and policies that support healthy food choices.

#### **Key Community Partners**

Key informants named the following partners: Schools, school lunch suppliers, parents, day care facilities, colleges, food pantries or similar agencies, CSA, farmers markets, Envision Greater Fond du Lac, government at all levels, senior centers, healthcare agencies, community organizations, Living Well coalition members, dieticians, hospitals, nursing homes, and medical providers.

Subgroup/population where efforts could be targeted and how efforts could be targeted: Key informants named everyone, across all groups, as being affected by adequate, appropriate, and safe food and nutrition. Low-income families and individuals were named as a subgroup that experience more challenges and barriers to this health area. It was suggested to engage more consumers in the efforts that are being brought forward and ensure they are culturally sensitive. Efforts could be targeted at schools which have higher rates of students eligible for free and reduced lunches. Efforts could include increased education about healthy food choices for youth and parents and access to healthy food options. Using strategies similar to the back pack buddies program and addressing summer time challenges were mentioned. It was also mentioned that those aged 50 years and older are a group that could have more efforts to promote nutrition and access to healthy foods and convenience is key.

#### Physical activity

#### **Existing Strategies**

Employers and insurance companies incentivize being physically active, Fond du Lac Family YMCA, Fond du Lac Loop trail, 5K events in Fond du lac County, organizations incentivize health club memberships, multiple sectors reinforce and recognize physical activity recommendations and benefits, Living Well coalition and strong community partners at the table, FABOH, Physical Education Program (PEP) grant at Fond du Lac School District, and gyms and exercise rooms available at the schools.

#### **Barriers and Challenges**

Cold weather, time, cost prohibitive, fear of falling or underlying health issues, technology, cost associated with sports for youth and families, lack of active members in coalition, lack of general community awareness of Living Well coalition, activities available in community and in languages spoken, some residents lack environmental opportunities to be active, and low rate of students participating in sports.

#### Additional Strategies Needed

Education of benefits of physical activity, increase meaningful connection of being physically active, including intrinsic and extrinsic motivation, increase affordable activities available to the community and affordable, healthy food options, and sustainability plan Living Well Coalition.

#### **Key Community Partners**

Fond du lac Family YMCA, Fond du Lac Area Businesses on Health (FABOH), local health systems and health providers, employers, including healthy workplace employers, schools and athletic departments, Fond du Lac School District Physical Education Program grant, Fond du Lac School District Recreation Department, private and public sectors, and Fond du Lac County.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informants mentioned all populations should be targeted and extra efforts should be made towards lower-income individuals, elderly, persons with disabilities, and gender non-conforming individuals. It was mentioned that efforts should be made to be more inclusive as a whole and to increase engagement with various populations in Fond du Lac County and make culturally responsive efforts.

### Injury and violence

#### **Existing Strategies**

Counselors available in schools and community, School Resource Officers and their positive relationships with youth, bullying prevention policies in schools, community policing, well-trained law enforcement, aggressive District Attorney's office, active shooter trainings, preparedness, education, domestic abuse efforts through ASTOP, Women's fund, and law enforcement, and shared community resources.

#### **Barriers and Challenges**

Some injury and violence issues are connected to mental health issues and alcohol and drug use, access to care for mental health and alcohol and drug abuse, decline in participation in faith-based organizations, lack of family structure, change in acceptable behaviors and norms in society, including morals and values, increase in gun violence, legislative change, bullying in larger community, existing shelters get full rather quickly, lack of adequate support groups and therapeutic resources for those impacted by domestic violence, and addressing multifaceted issues of injury and violence as it relates to alcohol and drug use and mental health.

#### Additional Strategies Needed

Addressing mental health challenges and barriers will help address injury and violence, health issues need to be address simultaneously, increase in faith-based communities meeting needs of community members at large; address norms of acceptable versus reported violence, community organizations supporting positive relations among neighborhoods through community events; advocate for programs and policies that address injury and violence issues, funding and quality treatment, and collaborative approaches to breaking cycles of violence.

#### **Key Community Partners**

Faith-based organizations, law enforcement, community coalitions and organizations addressing mental health and alcohol and other drug issues, medical facilities, Fond du Lac Area Women's Fund initiative, schools, Affinity Medical Groups, Latinos Unidos, women's empowerment series ran by Fond du Lac County Department of Social Services, and organizations that serve vulnerable populations such as seniors and persons with disabilities.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

All populations. Subgroups mentioned include women, youth, and low-income neighborhoods. Efforts include education on domestic abuse for both genders, community policing, community activities, and faith-based organizations for outreach.

#### Healthy growth and development

#### **Existing Strategies**

Respondents mentioned activities in the community for youth, school districts, Birth to 3 program, Agnesian Healthcare, Head Start, Supporting Positive Relationship so Our Children Under 6 can Thrive (SPROUT) partnership, Boys and Girls Club of Fond du Lac, Big Brothers Big Sisters Fond du Lac, support groups and agencies in the community which offer mentoring, financial and material support to new moms and parents, school resource officers, and trauma-informed care resources as existing strategies to promote healthy growth and development in the county.

#### **Barriers and Challenges**

Respondents mentioned youth mental health, preventing and addressing instances of childhood trauma, support services for families in employment, healthcare, childcare, and food, lack of healthy home environments, poor lifestyle habits, lack of positive role model, knowing what services are available to community, addressing isolation and depression among families, stressors such as income, lack of knowledge of importance of investing in youth, transportation in rural areas and funding as barriers and challenges to improving healthy growth and development in Fond du Lac County.

#### Additional Strategies Needed

Respondents mentioned a community approach and coordination for parenting support, including more educational activities, support groups and resources for parents as a needed strategy to improve health in this area.

#### Key Community Partners

Fond du Lac County Health Department, Agnesian HealthCare/SSM Health, Aurora HealthCare, Fond du Lac Area United Way, Family Resource Center, schools, Parent Teacher Organizations, independent agencies, Catholic Charities, Fond du Lac Family YMCA, Boys and Girls Club of Fond du Lac, parents, teachers, law enforcement, SPROUT, 4K sites, Head Start, women's empowerment series, and childcare centers.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informants mentioned single parent families, parents of children with special needs, low-income families, rural families, minority communities, and middle school aged youth as subgroups. Efforts mentioned include programs outside of school to support middle-school aged youth, increase affordable, quality care, transportation, parenting classes and support groups for families and parents, and to strengthen existing coalitions through shared resources and coordination.

#### Communicable disease prevention and control

#### **Existing Strategies**

Local health systems, healthcare facilities, health clinics, Fond du Lac County Health Department, flu clinic and vaccinations, food safety education, public schools, and personal responsibilities such as handwashing.

#### **Barriers and Challenges**

Misinformation about vaccines, flu-shot conversations for families with youth, education about vaccines, lack of alternate health methods in community, perceived lack of susceptibility for communicable disease, ability for parents to easily "opt out" for vaccines, increased amount of people opting out for vaccinations, lack of comprehensive sexual health education in schools, and high rates of sexually transmitted diseases.

#### Additional Strategies Needed

Key informants suggested additional efforts to reduce number of youth attending school with flu symptoms and increased education and messaging via social media, news and radio.

#### **Key Community Partners**

Key informants mentioned parents, school districts, local health systems, assisted living facilities, and medical professionals.

Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informants mentioned those living in assisted living facilities, senior housing and people of all ethnic backgrounds. No strategies were mention on how to target efforts.

#### Oral health

#### **Existing Strategies**

Key informants mentioned the Save A Smile program, a community resource list of dentist accepting Medicaid patients, and Agnesian HealthCare community assistance.

#### **Barriers and Challenges**

Key informants mentioned a lack of providers in the area accepting Medicaid patients and child care and transportation for dental appointments due to longer travel distance required to visit a dentist that accepts Medical Assistance.

#### Additional Needed Strategies

Key informant mentioned awareness and access to oral health.

#### Key Community Partners

No comments.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

A key informant mentioned efforts could be target towards the low-income population that does not have dental insurance.

#### Tobacco use and exposure

#### **Existing Strategies**

Key informant mentioned smoke-free housing, quit smoking day, and medications to help people quit tobacco use as strategies to improve health in this area.

#### **Barriers and Challenges**

Key informant mentioned addiction, people resuming their smoking addiction after quitting, and a general lack of understanding how harmful and addictive vapor products are as barriers and challenges to this health issue.

#### Additional Needed Strategies

Key informant suggested there is more regulation needed on vapor products and more education needed for consumers on this health issue.

#### **Key Community Partners**

5 Counties for Tobacco Free Living Coalition, physicians, health care professionals, and local health systems.

#### Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informant suggested that young people are a population that should be targeted but no efforts on how were mentioned.

#### Reproductive and sexual health

#### **Existing Strategies**

Key informant mentioned Charis Pregnancy Center, New Beginnings Pregnancy Center, and Aurora HealthCare HIV Specialists as strategies in place to improve reproductive and sexual health.

#### **Barriers and Challenges**

Key informant mentioned limited sexual health education currently being taught and lack of access to specialized services, out of county travel is required.

#### Additional Needed Strategies

Key informant suggested teaching comprehensive sexual health education in schools.

#### Key Community Partners

Key informant mentioned physicians, Equality Project, and Fond du Lac County Health Department.

Subgroup/population where efforts could be targeted and how efforts could be targeted: Key informant mentioned older generations may be a subgroup to target efforts but no comment on how was made.

#### Environmental and occupational health

#### **Existing Strategies**

Key informant mentioned Equality Project, community support for equal housing ordinance to include transgender individuals, and LGBTQ+ and Area Association of Commerce partnership on inclusion stickers for local businesses.

#### **Barriers and Challenges**

Key informant mentioned the following as barriers and challenges in relation to individuals who identify as LGBTQ+: religious barriers, outreach to community for support, schools, identifying safe zones, and gender conforming bathrooms.

#### Additional Needed Strategies

Key informant suggested the following strategies to improving environmental and occupational health for individuals who identify as LGBTQ+: increase in community outreach for support and increase in safe zone trainings.

#### Key Community Partners

Key informant mentioned the Safe Zone program.

## Subgroup/population where efforts could be targeted and how efforts could be targeted:

Key informant named Fond du Lac Schools, UW-Fond du Lac, and older generations as groups where efforts could be targeted but did not comment on how to target efforts.

## Appendix A

Twenty individuals participated in key informant interviews about pressing health issues in the Fond du Lac County community. Key Informants from a variety of organizations participated, gathering an array of perspectives from community experts who serve low-income, minority, and underserved populations and the general public.

#### **Key Informants**

Bridgette Amadon, North Fond du Lac School District Valerie Barton and Debbie Serwie, ADVOCAP Jack Braun, St. Vincent De Paul Mike Degere, SSM Health Louise Gudex, City of Fond du Lac and County of Fond du Lac Housing Authority Dale Hans, NAMI of Fond du Lac County Brian Hastings, Memorial Baptist Church Dan Hebel, Boys & Girls Club of Fond du Lac Amber Kilawee, Fond du Lac Area United Way Cathy Loomans, Fond du Lac Senior Center Kimberly Mueller, Fond du Lac County Health Department Esther Mukand, Department of Senior Services Rick Patton, Fond du Lac County Veterans Services Marian Sheridan, Fond du Lac School District Shavanna Talberts, Fond du Lac School District Christopher Szymczak, Equality Project Geri Vanevenhoven, Fond du Lac County Department of Community Programs Savannah Vang, Hmong Community Ryan Waldschmidt, Fond du lac County Sheriff's Office Jennifer Walters, Aurora Health Care

## Appendix B







## Key Informant Interview Tool

The purpose of this interview is to is to collect more in-depth information from community experts who can provide valuable insight on pressing health issues in the Fond du Lac County community. The input provided in this interview will serve as qualitative data in the 2017 Community Health Assessment and will be used to develop 2019-2021 Community Health Improvement Plan. Your participation is voluntary and your responses will have anonymity. A final report with a summary of responses will be publicized but key informants' names and titles will be listed separately. You will have the opportunity to review notes for accuracy following the interview.

#### Interviewee

Name:				
Title:	Organization:			
Population targeted or served:				
General public	Medically underserved	Minority	Low-income	
Other:				
Interviewer:				
Name:				
Title:		Organiz	ation:	

I give permission for my responses to these questions to be shared with the organization who interviewed me and the Healthy Fond du Lac County 2020 Steering Committee for the purpose of completing the 2017 Fond du Lac County Community Health Assessment. I understand that my responses will be combined in anonymity and in summary with other interviews and published in a summary report. Complete responses to the survey tool will be filed and secured at the Fond du Lac County Health Department.

Signature

**Title & Organization** 

Date

#### **General Questions:**

- 1. Tell me about your role.
- In general, how would you rate the quality of life in Fond du Lac County for the\_\_\_\_\_\_ population? Poor Fair Good Excellent
- 3. What do you believe are the 2-3 most important characteristics of a heathy community?
- 4. World Health Organization defines health as, "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity". How would you define health from you experiences within our community?

Please rank the 12 health focus areas below from highest to lowest priority, with #1 being the top priority health issue to address in Fond du Lac County based on the population you serve.

Healthiest Wisconsin 2020

Adequate, appropriate, and safe food and nutrition
Alcohol and other drug use
Chronic disease prevention and management
Mental health
Oral health
Physical activity
Reproductive and sexual health
Tobacco use and exposure
Injury and violence
Healthy growth and development
Environmental and occupational health
Communicable disease prevention and control

We are going to ask you a series of questions for the top 4 most pressing health issues you identified. Please answer the following question for each health issue.

Health Issue #1: \_

What are existing strategies to address this health issue? What is working well? (Strengths)

What are the barriers/challenges in addressing this health issue? What could be done differently? **(Challenges)** 

What additional strategies are needed to address this health issue?

Who are the key groups in the community that we could partner with to improve community health and quality of life?

Is there a subgroup or population where we could target our efforts? (Ex: age, gender, race, ethnicity, low-income, elderly, disabled, neighborhoods, etc.)

If a subgroup is identified, how could we target our efforts towards this subgroup?

#### Health Issue #2: \_\_\_\_\_

What are existing strategies to address this health issue? What is working well? (Strengths)

What are the barriers/challenges in addressing this health issue? What could be done differently? **(Challenges)** 

What additional strategies are needed to address this health issue?

Who are the key groups in the community that we could partner with to improve community health

and quality of life?

Is there a subgroup or population where we could target our efforts? (Ex: age, gender, race, ethnicity, low-income, elderly, disabled, neighborhoods, etc.)

If a subgroup is identified, how could we target our efforts towards this subgroup?

Health Issue #3: \_\_\_\_\_\_

What are existing strategies to address this health issue? What is working well? (Strengths)

What are the barriers/challenges in addressing this health issue? What could be done differently? **(Challenges)** 

What additional strategies are needed to address this health issue?

Who are the key groups in the community that we could partner with to improve community health and quality of life?

Is there a subgroup or population where we could target our efforts? (Ex: age, gender, race, ethnicity, low-income, elderly, disabled, neighborhoods, etc.)

If a subgroup is identified, how could we target our efforts towards this subgroup?

Health Issue #4: \_\_\_\_\_\_

What are existing strategies to address this health issue? What is working well? (Strengths)

What are the barriers/challenges in addressing this health issue? What could be done differently? **(Challenges)** 

What additional strategies are needed to address this health issue?

Who are the key groups in the community that we could partner with to improve community health and quality of life?

Is there a subgroup or population where we could target our efforts? (Ex: age, gender, race, ethnicity, low-income, elderly, disabled, neighborhoods, etc.)

If a subgroup is identified, how could we target our efforts towards this subgroup?

# FOND DU LAC COUNTY HEALTH DEPARTMENT

COMMUNITY HEALTH ASSESSMENT A SUMMARY REPORT OF PRIORITY HEALTH ISSUES SURVEY 2018

## Table of Contents

Introduction	2
Focus Area Ranking	3
Top Five Health Issues	3
Health Focus Area Summaries	1
Mental health	4
Alcohol and other drug use	4
Chronic disease prevention and management	4
Adequate, appropriate, and safe food and nutrition	4
Physical activity	5
Injury and violence	5
Healthy growth and development	5
Communicable disease prevention and control	5
Oral health	5
Tobacco use and exposure	5
Reproductive and sexual health	5
Environmental and occupational health	5
Appendix A	6

## Introduction

This report summarizes the findings from the priority health issues survey which was available to the public from March 1, 2018 to March 23, 2018. The purpose of this survey was to gather feedback from the community at large and collect public input on what residents identify as top health concerns in Fond du Lac County. The survey was available in hard copy at the health department and online on the health department's website. The survey was distributed and made available at all public libraries in Fond du Lac County, senior centers, and at community groups. The survey was promoted on social media, in the newspaper, on the radio, and via email to community partners. The survey was available to take in English and Spanish. Residents were encouraged to review key findings from the 2017 Community Health Survey beforehand to provide additional feedback.

#### Interview tool/Questionnaire

Residents were asked to rank the 12 health focus areas, as presented in Wisconsin's State Health Plan, from highest to lowest priority, with number one being the top priority health issue to address and 12 the least-pressing health issue to address in Fond du Lac County.

Residents were asked the following questions in the Priority Health Issues Survey (Appendix A):

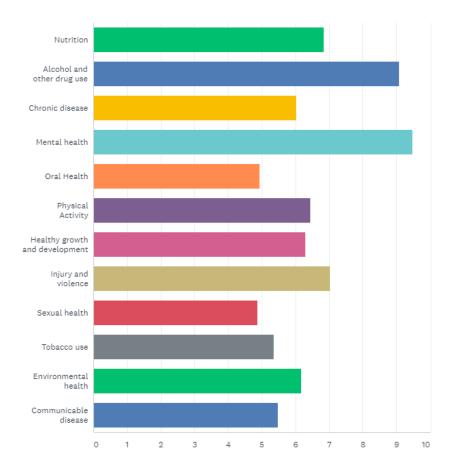
- Please rank the health areas listed below from 1 12 in order of biggest to least concern as you see in Fond du Lac County, with #1 will be the most-pressing health issues to address and #12 the least-pressing health issues to address.
- Please share any feedback you have or voice any challenges/difficulties to maintaining or improving health in the areas you identified as top concerns in Fond du Lac County.

All respondents were informed that their participation is voluntary, that their responses will have anonymity, and responses will be part of the 2017 Community Health Assessment. This report is a summary of the 2017 Priority Health Issues Survey.

**Limitations:** 284 residents participated in the Priority Health Issues Survey. The report relies on the views and experiences of a limited number of residents and is not to be generalized as the view of all county residents. Results should be interpreted with caution and in conjunction with other Fond du Lac County data, such as the Fond du Lac County Community Health Survey Report and secondary data.

#### Health Focus Area Rankings

Figure 1. Ranking of 12 Health Focus Areas by respondents.



The figure above displays the overall rankings of the 12 health focus areas completed by the 284 residents. Based on the rankings, the top five health focus areas ranked most consistently as the most-pressing health priority are: mental health, alcohol and other drug use, injury and violence, nutrition and physical activity. Reproductive and sexual health was ranked as the least-pressing health area most frequently. Health focus areas were weighted by the ranking they received, scoring less if they were ranked lower on the scale and scoring more if they were ranked higher on the scale. Participants were asked to rank the twelve focus areas 1 through 12, with one being the most-pressing health focus area to address to improve health and twelve being the least-pressing health focus area to improve health.

#### **Top Five Health Issues**

The five health focus areas ranked most consistently as top five health issues for Fond du Lac County by respondents were:

- 1. Mental Health
- 2. Alcohol and Other Drug Use
- 3. Injury and Violence
- 4. Nutrition
- 5. Physical Activity

#### Health Focus Areas Summaries

This section includes a summary of themes that emerged based on responses for each of the twelve health focus areas and single outlying comments were not included. This summary is not meant to be generalized as the view of all Fond du Lac County residents and should be interpreted in conjunction with other community health assessment data.

#### Mental health

Respondents mentioned the following challenges and difficulties to improving mental health in Fond du Lac County: difficulty in accessing mental health services, including long wait time to see a provider and between appointments, adequate insurance coverage for needed services, lack of appropriate resources and quality services, and navigating the system. Additional barriers to accessing mental health services are cost, transportation, and homelessness, as those in need may not have basic needs met. Lack of appropriate services for the aging population, youth, those living under the poverty level, and services to address isolation, loneliness, and substance use. Another challenge is a lack of mental health providers, for youth and adults, high provider caseloads, and attracting and retaining mental health professionals in the area. Respondents mentioned stigma surrounding mental health as a barrier and that mental health needs often coincide with substance use, tobacco use, and violence.

#### Alcohol and Other Drug Use

Respondents mentioned the following challenges and difficulties to decreasing alcohol and other drug use rates in Fond du Lac County: alcohol and drug problem is a complex issue that is multifaceted, social acceptance of binge drinking, varying perception of moderate alcohol consumption, rising rates of opioid and drug use, lack of resources for prevention and treatment, need for more residential and sober living facilities, lack of services for those with inadequate insurance coverage or who are at/under poverty level, long term drug court and drug treatment is a need, drug education in schools, accessible and affordable alcohol and other drug treatment for all, and alcohol drug use influences other areas of health, such as loss of employment, mental health issues, and crime.

#### Chronic disease prevention and management

Respondents mentioned following challenges and difficulties to improving chronic disease prevention and management: improving mental and physical health will lead to improvements in chronic disease prevention and management, lifestyle changes are a challenge and there is dependence on medications to manage chronic disease.

#### Adequate, Appropriate, and Safe Food and Nutrition (nutrition)

Respondents mentioned the following challenges and difficulties in improving adequate, appropriate, and safe food and nutrition in Fond du Lac County: areas in Fond du Lac County where healthy food options are limited, and access to health and nutrition education.

#### **Physical activity**

Respondents mentioned the following challenges and difficulties to improving physical activity: access to fitness centers with barriers being cost and transportation, time, weather in winter time, improved safety on trails and additional walking and biking paths around Fond du Lac.

#### Injury and violence

Respondents mentioned the following challenges and difficulties to improving health in the area of injury and violence: recent rise in crime and violence surrounding drug use.

#### Healthy growth and development

Respondents mentioned following challenges and difficulties to improving healthy growth and development: increase access to resources on parenting and support for families with young children.

#### Communicable disease prevention and control

No themes emerged.

#### Oral health

Respondents mentioned following challenges and difficulties to improving oral health: access to dental care for individuals who receive medical assistance or have no dental insurance with barriers including cost and lack of dental providers accepting medical assistance.

#### Tobacco use and exposure

No themes emerged.

#### Sexual and reproductive health

Respondents mentioned the lack of family planning clinics in the area as a barrier to accessing affordable reproductive and sexual health resources and services.

#### Environmental and occupational health

No themes emerged.

#### Appendix A

#### PRIORITY HEALTH ISSUES SURVEY

#### 2017 - FOND DU LAC COUNTY





Please rank the health areas 1-12, with #1 being the most pressing health area to address and #12 the lowest, in order to improve health and well-being of Fond du Lac County residents.

#### ACCESS HEALTHY FOODS

Being able to get enough food to not go hungry. The foods available to eat are safe and include a variety of grains, vegetables, fruits, protein and dairy.

#### ALCOHOL AND DRUG USE

Drinking more alcohol than recommended, while under age, during pregnancy, or before or while driving a vehicle. Illegal drug use includes smoking marijuana, using pain killers as not prescribed, etc.

#### CHRONIC DISEASE

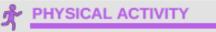
A type of sickness that lasts a long time and does not go away on it's own or completely. Examples include: heart disease, stroke, cancer, diabetes, asthma, arthritis, and more.



Able to see and cover the cost of a mental health provider if needed. Mental health includes depression, anxiety, emotional problems, and suicide rates.



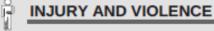
Able to see a dentist and cover the cost of going to a dentist if needed.



Opportunities to be active/exercise in your environment. Children play 60 minutes a day and adults move 30 minutes/5 days a week to be at a healthy weight for their height.

### HEALTHY MOMS, BABIES,

Moms have support for a health pregnancy, one goal being to give birth to a baby at a healthy weight. Babies and children are able to reach developmental milestones as they grow and get help as needed.



Amount of crime, intentional injuries (slapped, hit, threatened), and accidental injuries (falls, poisonings, crashes) in our community. Could they have been prevented?

#### SEXUAL HEALTH



Able to get education, resources, and services needed to be in control of pregnancies (i.e. birth control and condoms) and prevent and/or treat sexually transmitted diseases (i.e. HIV, Chlamydia).

TOBACCO USE

Use of cigarettes, e-cigarettes, smokeless tobacco, and cigars. Teens and youth smoking under 18 years of age; smoking during pregnancy; breathing in second-hand smoke.



Safe place to live, work, and play. Safe water to drink, places to eat, air to breath, outdoors to explore, and roads/paths to travel.



People help prevent the spread of germs or sicknesses. For example, by: washing hands, handling food properly, getting flu shots, getting vaccinated, preventing tick bites, and more.

#### PRIORITY HEALTH ISSUES SURVEY

#### 2017 - FOND DU LAC COUNTY

Please share any feedback you have or voice any challenges/difficulties to maintaining or improving health in the areas of health you identified as top concerns in Fond du Lac County.

If you felt anything was missing from the health area options provided, please describe:

If you are interested in future opportunities to learn more about the priority health needs in Fond du Lac County, please provide an email or phone number below. An event will be held later this year.

Do you LIVE in Fond du Lac County? (circle one) YES NO

Do you WORK or go to SCHOOL in Fond du Lac County? (circle one) YES NO

#### Thank you for your feedback!





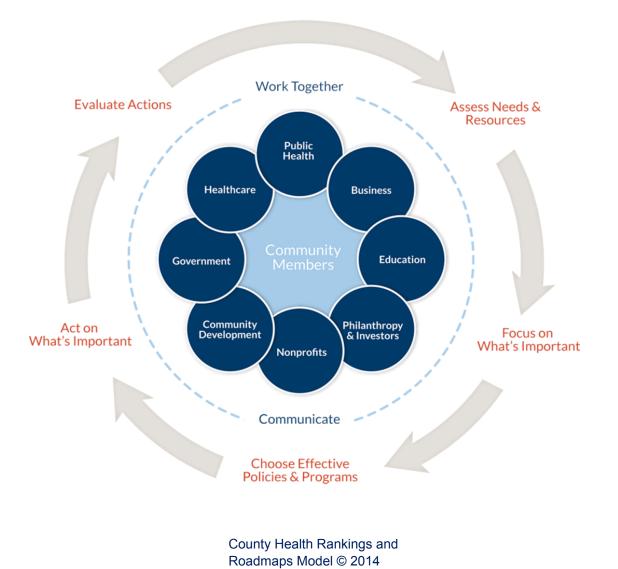
# Identifying CHA Priorities

April 05, 2018

**CHA** Task Force

### Community Health Assessment

- Key Informant Interviews
- Community Health Survey by JKV Research, LLC
- Priority Health Issues Survey -Public Input
- Secondary Data collection



### Key Informant Interviews

• 20 completed

### Priority Health Issues Survey

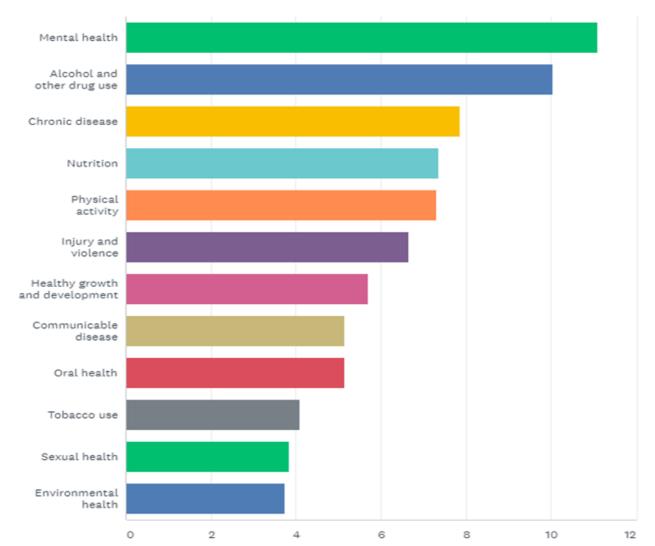
- 284 responses
- Available online
  - Website
  - Emailed to community partners
- Hard copies at libraries:
  - Brandon, Campbellsport, Fond du Lac, North Fond du lac, Oakfield, Ripon
  - Senior centers
- Community Engagement: Green Thumb Garden Club, Ruby's Pantry/Grace Christian Church, Getting Ahead Initiative, ParentLife of Badgerland, Oakfield Coffee Group

# **Key Informants**

- 1. Bridgette Amadon, North Fond du Lac School District
- 2. Valerie Barton and Debbie Serwie, ADVOCAP
- 3. Jack Braun, St. Vincent De Paul
- 4. Mike Degere, SSM Health
- 5. Louise Gudex, City of Fond du Lac and County of Fond du Lac Housing Authority
- 6. Dale Hans, NAMI of Fond du Lac County
- 7. Brian Hastings, Memorial Baptist Church
- 8. Dan Hebel, Boys & Girls Club of Fond du Lac
- 9. Amber Kilawee, Fond du Lac Area United Way
- 10. Cathy Loomans, Fond du Lac Senior Center
- 11. Kimberly Mueller, Fond du Lac County Health Department
- 12. Esther Mukand, Department of Senior Services
- 13. Rick Patton, Fond du Lac County Veterans Services
- 14. Marian Sheridan, Fond du Lac School District
- 15. Shavanna Talberts, Fond du Lac School District
- 16. Christopher Szymczak, Equality Project
- 17. Geri Vanevenhoven, Fond du Lac County Department of Community Programs
- 18. Savannah Vang, Hmong Community
- 19. Ryan Waldschmidt, Fond du lac County Sheriff's Office
- 20. Jennifer Walters, Aurora Health Care

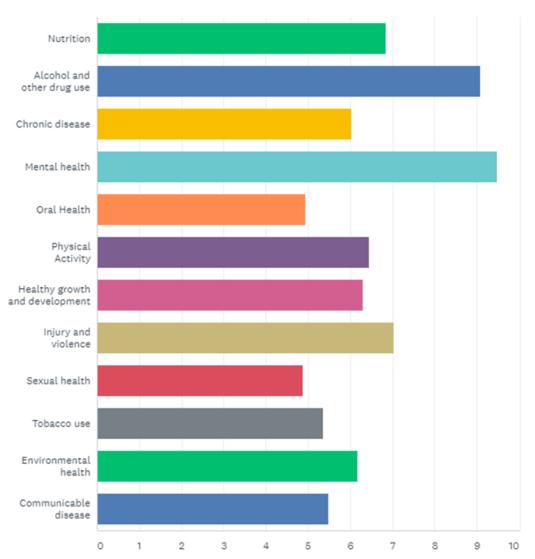
### Key Informants

- 1. Mental health
- 2. Alcohol and other drug use
- 3. Chronic Disease
- 4. Nutrition & Food Access
- 5. Physical activity
- 6. Injury and violence
- **7.** Healthy growth and development
- **8.** Communicable disease prevention and control
- 9. Oral health
- **10.** Tobacco use and exposure
- **11.** Reproductive and sexual health
- **12.** Environmental and occupational health

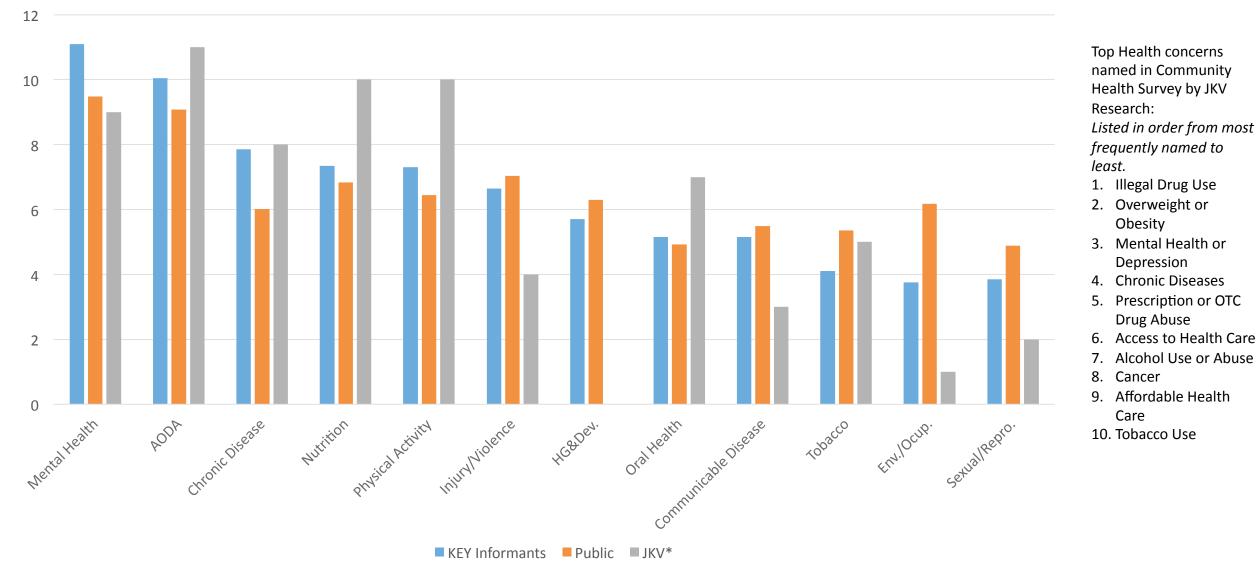


### **Priority Health Issues Survey**

- 1. Mental Health
- 2. Alcohol and other drug use
- 3. Injury and violence
- 4. Nutrition & food access
- 5. Physical activity
- 6. Healthy growth and development
- 7. Environmental and occupational health
- 8. Chronic disease prevention and management
- 9. Communicable disease prevention and control
- 10.Tobacco use and exposure 11.Oral Health
- 12.Reproductive and sexual health



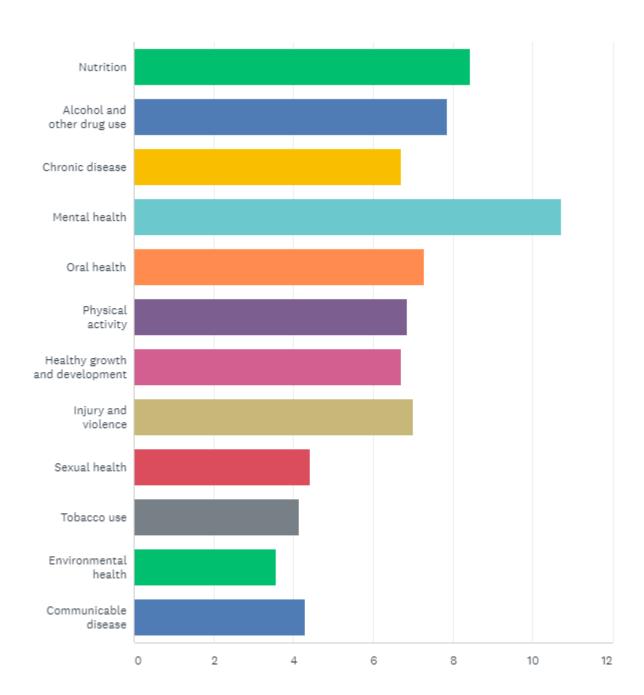
#### **Comparison of Priorities**



\*JKV Research, LLC Community Health Survey Report

## SVDP Getting Ahead Investigators

- 1. Mental health
- 2. Nutrition & Food Access
- 3. AODA
- 4. Oral health
- 5. Injury and violence
- 6. Physical activity
- 7. Chronic disease
- 8. Healthy growth and development
- 9. Reproductive & sexual health
- 10.Communicable disease prevention and control
- 11. Tobacco use and exposure
- 12.Environmental and occupational health



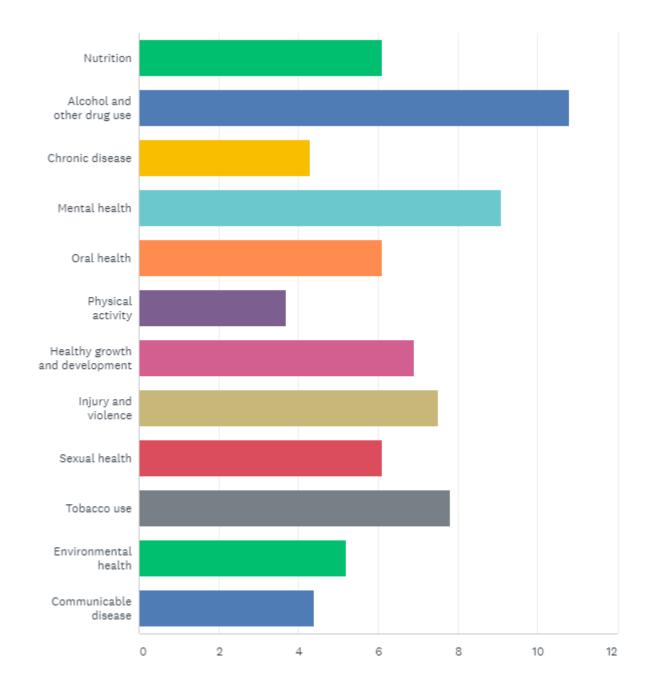
# Key themes on most pressing health areas as identified by SVDP Getting Ahead Investigators:

Challenges and barriers

- Access to AODA treatment and support services with barriers including cost and lack of insurance coverage
- Access to mental health services
- Mental health issues, substance use and violence coincide and impact a persons overall well-being

### Teen Parents – ParentLIFE of Badgerland

- 1. AODA
- 2. Mental health
- 3. Tobacco use and exposure
- 4. Injury and violence
- 5. Healthy growth and development
- 6. Nutrition & Food Access
- 7. Repro./sexual health
- 8. Oral health
- 9. Environmental and
- occupational health
- 10.Communicable disease
  - prevention and control
- 11.Chronic disease
- 12. Physical activity



### Key themes on most pressing health areas as identified by teen parents from ParentLIFE of Badgerland:

Challenges and barriers to improving community health

- Increase in alcohol and other drug use and injury and violence
- Access issues to mental health and dental providers

### Latinos Unidos

- Their top concerns: Chronic Disease (diabetes); AODA (programs in first language to serve Latino community in the area); Access to healthy foods; Maternal and Child Health
- Challenges/difficulties to maintain or improve health in areas identified:
  - Indoor facilities available for residents during winter time, to stay active.
  - Wautoma has "La Clinica" a clinic with Spanish speaking staff and no insurance required (pay out of pocket available), expressed how something like this in our area could incredibly benefit the Latino community.
  - Hospitals provide interpreters and it is embarrassing having a 3<sup>rd</sup> person listening to very private conversations. Bilingual staff suggested for direct services and a better communication on how to request an interpreter or to let them know if there is personal [conflict of] interest with a specific interpreter.

Review of data by 12 Health Focus Areas

### Adequate, Appropriate, and Safe Food & Nutrition

#### Key informant existing strategies:

**Existing strategies in schools:** healthy food options available, including meal programs (free and reduced school lunch and breakfast), fruit and vegetable programs, backpack buddies (send drives, meal sites and community agencies non-perishable food home with child for weekend), healthy vending machines and snack options, and wellness policies, school gardens, nutrition education included in curriculum, and Physical Education Program grant. Note: not all strategies apply to all school districts in Fond du Lac County.

**Existing strategies in the community:** farmers market, winter farmers market, community gardens, Living Well coalition, food pantries, food addressing food insecurity (such as Salvation Army), Women Infants and Children (WIC) Nutrition Program, FoodShare Nutrition Program, Farmers Market Nutrition Program vouchers, senior meal dining program and home delivered meal program.

# Adequate, Appropriate, and Safe Food & Nutrition

#### **Key informant challenges & barriers**

- staying up-to-date on community food resources
- families not making it priority to have sufficient food at home
- transportation to food pantries and healthy food options,
- lack of fresh produce at food pantries, food pantries rely on community donations which may or may not be healthy choices,
- social stigma with back pack buddies program
- cost of healthy food choices, youth access to meals in summertime, school lunches
- outreach of nutrition services to homebound individuals,
- lack of knowledge on healthy food choices, cooking skills, and shopping strategies, access to
  education on healthy food choices, cooking skills, and meals programs
- abundance of fast food options available
- efforts in place and strategies implemented but have not seen reduced rates of overweight or obesity.

# Adequate, Appropriate, and Safe Food & Nutrition

### Public Input:

• Areas in Fond du Lac County where healthy food options are limited, and access to health and nutrition education

# Adequate, Appropriate, and Safe Food & Nutrition

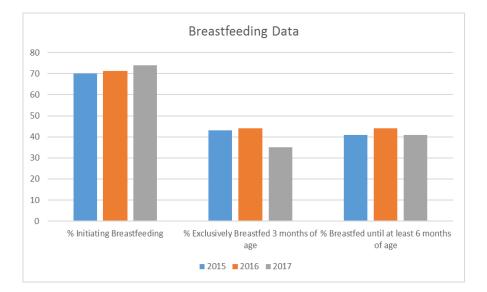
Table 10. Nutrition and Food Insecurity [Adult Survey & Student Survey]

Fruit Intake (2+ servings/day)       60%       61%       51%         Fruit (2 or More Times/Day)*       71%       67%       39%       34%       32%         Vegetable Intake (3+ servings/day)       26%       32%       25%         Vegetables (3 or More Times/Day)*       26%       24%       25%        15%         At Least 5 Fruit/Vegetables/Day       34%       43%       32%       23%       23%       At Least 2 Fruit/3 Vegetables/Day       24%       23%       17%			FDL		WI	US			FDL		WI	U.S.
Vegetable Intake (3+ servings/day)         26%         32%         25%          Vegetables (3 or More Times/Day)*         26%         24%         25%          15%           At Least 5 Fruit/Vegetables/Day         34%         43%         32%         23%         At Least 2 Fruit/3 Vegetables/Day         24%         23%         17%	Adult	2008	2014	2017	2009	2009	Student	2008	2014	2017	2013	2015
At Least 5 Fruit/Vegetables/Day 34% 43% 32% 23% 23% At Least 2 Fruit/3 Vegetables/Day 24% 23% 17%	Fruit Intake (2+ servings/day)	60%	61%	51%			Fruit (2 or More Times/Day)*	71%	67%	39%	34%	32%
	Vegetable Intake (3+ servings/day)	26%	32%	25%			Vegetables (3 or More Times/Day)*	26%	24%	25%		15%
Household Went Hungry in Past Year 6%	At Least 5 Fruit/Vegetables/Day	34%	43%	32%	23%	23%	At Least 2 Fruit/3 Vegetables/Day	24%	23%	17%		
				6%	1							

\*In 2017, fruit consumption changed to 2 questions (fruit and 100% fruit juice) and vegetable consumption changed to 4 questions (salad, carrots, potatoes and other vegetables). In addition, time frame changed from "yesterday" to "past seven days".

#### **Breastfeeding Rates – WIC**

- 74% of mothers on WIC initiated breastfeeding; this has increased by 3% from 2016.
- 35% of WIC infants are exclusively breastfed at 3 months of age; above the state average of 28%.
- 41% of infants were breastfed until at least 6 months of age; above the state average of 36%.



### Key informant existing strategies:

- Number of NA/AA meetings, Gratitude Club, recovery housing, health centers, inpatient and outpatient treatment programs
- Narcan trainings
- Youth YScreen tool in school across counties, ATOD survey; school education
- Substance use rates in FDL school district coming down;
- ID Checks; law enforcement; community policing; drug court program
- "Parents who host the most, lose the most" educational campaign;
- Social host policy being adopted; Drug drop box,
- Drug Free Communities; strong community partnership working to decrease substance use – lots of non-profits allocate resources to substance use issue – coordination among community

#### Key informant barriers & challenges:

- Social acceptance/culture of binge drinking and alcohol consumption at social events
- 1<sup>st</sup> OWI offense seen as "freebie"
- Breaking social norms on underage and binge drinking; Breaking cycles of generational abuse
- Availability of drugs and alcohol;
- More people to attend NA/AA;
- Stigma of drug use and alcohol abuse;
- Health industry and legal barriers; legislation
- High caseload for providers/counselors;

- Support system for individuals with AODA issues and ability to access resources timely when ready; navigating the system; AODA beds fill & waitlist – not always readily available;
- Community partners across the county are not on the same page for this issue – how to address it collectively with consistent message;
- Over criminalization and over punishment with drug use; disproportionate representation of drug-related offenses;
- Societal costs of addiction
- Lack of mental health care coincides with AODA; some mental health issues are addressed by selfmedicate with alcohol and drugs; access issues for treatment;

### Public Input:

- alcohol and drug problem is a complex issue that is multifaceted, social acceptance of binge drinking, varying perception of moderate alcohol consumption
- rising rates of opioid and drug use,
- lack of resources for prevention and treatment, need for more residential and sober living facilities, lack of services for those with inadequate insurance coverage or who are at/under poverty level, long term drug court and drug treatment is a need, accessible and affordable alcohol and other drug treatment for all,
- drug education in schools
- alcohol drug use influences other areas of health, such as loss of employment, mental health issues, and crime

#### Table 22. Alcohol Use [Adult Survey & Student Survey]

			-										<u> </u>
		FDL		WI	US	HP2020			FDL		WI	U.S.	HP2020
Adult	2008	2014	2017	2016	2016	Goal	Student	2008	2014	2017	2013	2015	Goal
Drank Alcohol (past month)	72%	67%	68%				Drank Alcohol (past month)	46%	24%	21%	33%		
Binged (past month)*	27%	42%	39%	25%	17%	24%	Binged (past month)**	26%	10%	11%	18%	18%	8.5%
Household Problem (past year)	2%	5%	3%				Never Drank Alcohol	32%	51%	50%	34%	37%	
							Average Age of Onset	12.8	12.8	13.0			

\*In 2014 and 2017, binge drinking in adult survey was "4 or more drinks on an occasion" for females and "5 or more drinks on an occasion" for males. In 2008, "5 or more drinks on an occasion" was used for both males and females.

\*\*In 2017, binge drinking in student survey was defined as 4 or more drinks for females and 5 or more drinks for males. In 2008 and 2014, binge drinking was 5 or more drinks, regardless of gender.

Table 24. Cocaine, Heroin or Other Str	eet Drugs	[Adult and Student Survey]	-				
	FDL			FDL		WI	U.S.
Adult	2017	Student	2008	2014	2017	2013	2015
Household Problem (past year)	. 0%	Never Used					
		Cocaine	91%	96%	96%	96%	95%
		Heroin	93%	97%	98%		98%
		Average Age of Onset					
		Cocaine	13.7	12.8	13.7		
		Heroin	13.5	11.8	12.0		
	-						

Table 25. Prescription Medication Misuse/A	ibuse [/	Adult a	nd Stud	lent Surve	ey]				
	FDL			HP2020		FDL		WI	U.S.
Adult	2008	2014	2017	Goal	Student	2014	2017	2013	2015
Past Year Prescription Medication Misuse	3%	2%	1%	6%	Past Month Misuse				
					Prescription Pain Relievers	3%	3%		
					Non-Pain Prescription Medication*	2%	3%		
					At Least One Prescription Medication	4%	5%	8%	
					Never Misused				
					Prescription Pain Relievers	92%	92%		
					Non-Pain Prescription Medication*	91%	92%		
					At Least One Prescription Medication	87%	89%	85%	83%
					Average Age of Onset				
					Prescription Pain Relievers	13.1	13.0		
					Non-Pain Prescription Medication*	13.4	13.5		
					At Least One Prescription Medication	13.2	13.1		

\*In 2017, individual questions of tranquilizer, sedative and stimulants were combined into one question and is represented in this summary as "non-pain prescription medication".

#### Table 26. Misuse of Over-the-Counter Drugs [Adult and Student Survey]

						•
	FDL			FDL		WI
Adult	2017	Student	2008	2014	2017	2011
Household Problem with Prescription/OTC Misuse (past year)*	4%	Never Misused OTC**	86%	90%	95%	93%
		Average Age of Onset	13.4	12.5	13.3	-

\*In 2017, the adult survey asked about a household problem associated with prescription medication or over-the-counter medication misuse/abuse. \*\*In 2017, the student survey changed "over-the-counter cough or cold medication" to "over-the-counter medication."

# Chronic Disease Prevention and Management

### Key informant existing strategies:

- Primary care talking with physician & preventive screenings and managed care,
- Healthcare, insurance companies do HRAs & provide rewards that encourage healthier lifestyle (lower monthly premiums),
- Education, prevention
- Qualified and committed health professionals
- Many dedicated to addressing the issue
- Significant chronic disease management programs already in place;
- Providers may be graded on their management of diseases identify disease early on – disease prevention is linked to education about healthy eating, exercise, mental health, stress, drug use and preventive exams;

# Chronic Disease Prevention and Management

#### Key informant barriers & challenges:

- Difficult to get an appointment with doctor/provider (access); access proper care (insurance, transportation, support system)
- Medications as easy solution to manage condition resistance to lifestyle change;
- Changes in diet recommendations (eating patterns); short term diet trends;
- Funding for medications;
- Fond du Lac County Department flat funding;
- Limited access to resources in rural areas; gaps in service for those isolated to homes;
- More resources needed for people without insurance;
- Alternative treatment/support options for low-income persons with chronic illnesses so ER isn't their clinic;
- Patient compliance with medical care
- provider specialist shortages;

# Chronic Disease Prevention and Management

### Public Input

- Improving mental and physical health will lead to improvements in chronic disease prevention and management
- Lifestyle changes are a challenge
- Dependence on medications to manage chronic disease.

# Chronic Disease Prevention and

### Management

Table 7. Health Conditions in Past Three Years [Adult Survey]

		FDL			F	DL
Adult	2008	2014	2017	Adult	2014	2017
Condition				Condition Under Control		
High Blood Cholesterol	21%	26%	27%	High Blood Cholesterol	92%	90%
High Blood Pressure	29%	31%	26%	High Blood Pressure	94%	90%
Mental Health Condition	11%	17%	20%	Mental Health Condition	100%	96%
Heart Disease/Condition	8%	11%	9%	Heart Disease/Condition	86%	89%
Diabetes	7%	7%	7%	Diabetes	93%	92%
Asthma (Current)	9%	10%	7%	Asthma (Current)	97%	100%

#### Table 9. Overweight Status [Adult Survey & Student Survey]

	-	FDL		WI	US	HP2020		-	FDL		WI	U.S.
Adult	2008	2014	2017	2016	2016	Goal	Student	2008	2014	2017	2013	2015
Overweight (BMI 25.0+)	62%	69%	73%	67%	65%	66%	Overweight or Obese	27%	25%	27%	25%	30%
Obese (BMI 30.0+)	26%	34%	37%	31%	30%	31%						

## Chronic Disease Prevention and Mangaement

#### **Cancer incidence**

Number of new cancer diagnoses per 100,000 population

	FDL County	WI	Top US Performers
Rate	466 (2940 cases)	469	-

Years of Data Used: 2010-2014 Source: WI Cancer Reporting System

## Mental Health

### Key informant existing strategies:

- Health center with 24 beds that requires a 72-hour hold
- Proactive Crisis Intervention Training (CIT) for Fond du Lac police, active support from law enforcement
- Collaborations among independent agencies and local health systems
- NAMI Fond du Lac County, Fond du Lac County Department of Community Programs
- 24-hour emergency hotline
- Socialization opportunities at senior centers
- Senior center programs, dementia friendly coalition
- Several treatment methods for mental health issues in area
- Employers increasing mental health support services, support groups in the community
- The Reporter (newspaper based in Fond du Lac) for media coverage

- Community partnerships and willingness to work together
- Comprehensive Service Integration (CSI), qualified leadership on coalitions, grant funded program to address suicide prevention among middle-aged men,
- community wide focus on trauma-informed care
- SHARDS Inc. which provides subsidized mental health services,
- Treffert Center, Agnesian Mental Health Navigators,
- Healthy Fond du Lac County 2020,
- Mental Health for Youth First Aid, screening tools (e.g. YScreen, ASQ, ACEs), school and community trainings such as QPR,
- Presence of counselors, social workers, and psychologist at schools
- Increase in mental health resources by local health systems, and availability of inpatient treatment and opportunities if insured and or can afford it

# Mental Health

#### Key informant barriers & challenges:

- Demand for services outweighs supply of providers
- Lack of understanding; stigma
- Lack of psychiatrists
- Access (wait time between apts, short apts., follow up, coverage for # of visits),
- Limited services for children, financial cost,
- Provider burn out -high caseloads;
- Coping strategies,
- More first responders need training; training in workplace;
- Gap in long term resources available, cycle & system needs long term solution;
- Transgender individuals have difficulty in finding

provider for services; Lack of diversity in provider population;

- Integrate mental health into routine check;
- Social system is stressed; counselors caseloads filled; funding; community partners sometimes work in silos or are not working collaboratively or openly on community issue; hesitation to explore new opportunities, approaches to addressing mental health
- Language availability of services in native languages;
- Students' needs –more support needed, high caseloads at schools; parental-guardian support for services offered at school; support from other resources (church, etc.)

## Mental Health

### **Public Input**

- Difficulty in accessing mental health services, including long wait time to see a provider and between appointments, adequate insurance coverage for needed services, lack of appropriate resources and quality services, and navigating the system.
- Additional barriers to accessing mental health services are cost, transportation, and homelessness, as those in need may not have basic needs met.
- Lack of appropriate services for the aging population, youth, those living under the poverty level, and services to address isolation, loneliness, and substance use.
- Lack of mental health providers, for youth and adults, high provider caseloads, and attracting and retaining mental health professionals in the area.
- Stigma surrounding mental health as a barrier and mental health needs often coincide with substance use, tobacco use, and violence

## Mental Health

Table 11. Mental Health Status [Adult Survey & Student Survey]

		FDL				FDL		WI	U.S.	HP2020
Adult	2008	2014	2017	Student	2008	2014	2017	2013	2015	Goal
Sad, Blue or Depressed Always/Nearly Always				Sad, Blue or Depressed Always/Nearly						
(past month)	4%	3%	6%	Always (past year)	14%	17%	19%			
Find Meaning & Purpose in Daily Life				Felt Sad or Hopeless Almost Every						
Seldom/Never	4%	4%	6%	Day for 2 or More Weeks in a Row			26%	25%	30%	
Considered Suicide (past year)	5%	3%	5%	Considered Suicide (past year)	18%	14%	13%	13%	18%	
				Past Year (all students):						
				Attempted Suicide		7%	6%	6%	9%	1.7%
				Attempt Treated by a Dr./Nurse		2%	2%	3%	3%	
				Self-Harm (past year)			16%	17%		
					_					

1	Fable	12.	Opinions	about	Mental	Health	[Adult	Survey]	

	FI	DL
Adult	2014	2017
People are Caring and Sympathetic to Persons with		
Mental Illness (strongly/slightly agree)	65%	59%
Treatment can Help People with Mental Illness Lead		
Normal Lives (strongly/slightly agree)		98%

	FDL County	Top US Performers	WI
Mental Health Providers (ratio)	930:1	330:1	560:1
Data Source	CMS, National Provider Identification		
Years of Data used	2017		
Retrieved from County	Health Rankings & Roc	admaps	

## **Oral Health**

### Key informant existing strategies:

• Save A Smile program, a community resource list of dentist accepting Medicaid patients, and Agnesian HealthCare community assistance.

### **Key informant barriers & challenges:**

• Lack of providers accepting Medicaid patients; childcare and transportation; travel to outside of county (1 hr away) to get check ups

## Public Input:

 access to dental care for individuals who receive medical assistance or have no dental insurance with barriers including cost and lack of dental providers accepting medical assistance

## **Oral Health**

#### Table 4. Health Care Access in Past Year [Adult Survey]

		FDL		HP2020
Adult	2008	2014	2017	Goa1
Delayed/Did Not Seek Care Due to Cost			17%	
Prescription Medications Not Taken Due to Cost (Household)			8%	3%
Unmet Medical Care (Household)*		6%	9%	4%
Unmet Dental Care (Household)*		13%	19%	5%
Unmet Mental Health Care (Household)*		3%	9%	
At Least One Unmet Care (Household)*	12%	18%	26%	
Reasons for at Least One Unmet Care (Household)*.**				
Cannot Afford to Pay		44%	48%	
Uninsured		41%	36%	
Insurance Did Not Cover It		17%	23%	

	FDL County	Top US Performers	WI
Dentists	1,520:1 (67 Dentist)	1,280:1	1,520:1

Retrieved from County Health Rankings & Roadmaps (Area Health Resource File/National Provider Identification file). Year of Data Used: 2016

\*In 2017, wording changed from respondent-specific to household-specific.

\*\*Multiple responses accepted.

#### Table 5. Routine Procedures [Adult Survey]

		FDL		WI	U.S.	HP2020
Adult	2008	2014	2017	2016	2016	Goal
Routine Checkup (2 yrs. ago or less)	84%	85%	88%	84%	84%	
Cholesterol Test (4 years ago or less)	80%	76%	75%	78%	78%	82%
Dental Checkup (past year)	68%	69%	69%	73%	66%	49%
Eye Exam (past year)	52%	51%	57%			

## **Oral Health**

	-	
Fond du Lac County		
Ashwood Grove 1	Non-Adjusted	62
Ashwood Grove 2	Non-Adjusted	163
Ashwood Grove 3	Non-Adjusted	119
Ashwood Grove 4	Non-Adjusted	86
Ashwood Grove 5	Non-Adjusted	126
Ashwood Grove 6	Non-Adjusted	92
Ashwood Grove 7	Non-Adjusted	119
Ashwood Grove 8	Non-Adjusted	95
Brandon Waterworks	Non-Adjusted	872
Campbellsport	Non-Adjusted	1943
Colonial Gardens Homes	Non-Adjusted	48
Country Aire Mobile Home Park	Non-Adjusted	60
Elmore Heights Trailer Court	Non-Adjusted	30
Fairwater Waterworks	Non-Adjusted	302
Fond du Lac	Adjusted	42000
Fond du Lac Tn Water Utility	Adjusted	700
Manor Hills Mobile Home Park	Non-Adjusted	400
Mary Hill Park Sanitary District	Natural	88
Mount Calvary Waterworks	Non-Adjusted	558
North Fond Du Lac	Adjusted	4292
Oakfield Waterworks	Non-Adjusted	1015
Ripon	Adjusted	7241
St Cloud Waterworks	Non-Adjusted	494
Villa Loretto Nursing Home	Non-Adjusted	75
Woodland Park	Non-Adjusted	66

A majority of public water systems are not fluoridated. Fluoride rinse programs have been implemented in rural school districts through Save A Smile dental program.

Wisconsin Public Water Supply Fluoridation Census (2013)

# **Physical Activity**

#### Key informant existing strategies:

- Employer/insurance companies incentivize PA (with lower monthly payments);
- YMCA; FDL Loop, senior center programs, fall prevention workshops; number 5K events in FDL,
- Organizations incentivize health club memberships - reinforcement and recognition of physical activity recommendations and benefits;
- Living Well coalition, Fond du lac Area Business on Health and strong community partners work together to promote physical activity;
- PEP grant at schools gym/exercise rooms available;

#### **Key informant barriers & challenges:**

- Cold weather; time;
- Cost prohibitive;
- Fear of falling or underlying health issues;
- Technology;
- Cost associated with sports for youth/families;
- Language and available activities;
- Living well coalition;
- Environment lack of access to opportunities to play/move;
- Low rate of students participating in sports;

## **Physical Activity**

## **Public Input:**

- Access to fitness centers with barriers being cost and transportation, time
- Weather in winter time
- Need to improve safety on trails and add additional walking and biking paths around Fond du Lac

# **Physical Activity**

#### Table 8. Physical Activity in Past Week [Adult Survey & Student Survey]

		FDL		WI	US		FDL	WI	U.S.	HP2020
Adult	2008	2014	2017	2009	2009	Student	2017	2013	2015	Goal
Strength Training (3 days)			29%			Strength Training (3 days)	53%		53%	
Moderate Activity (5 times/30 min)	46%	41%	43%			Seven Days of 60 Minutes of Physical Activity	21%	24%	27%	31.6%
Vigorous Activity (3 times/20 min)	26%	33%	32%	31%	29%					
Recommended Moderate or Vigorous	52%	55%	54%	53%	51%		_			

#### Access to exercise opportunities

Percentage of population with adequate access to locations for physical activity.

	FDL CO	Top US Performers	WI
Access to exercise activities	83%	91%	86%

Retrieved from County Health Rankings and Roadmaps

## Reproductive and Sexual Health

#### Key informant existing strategies:

• Charis Pregnancy Center, New Beginnings Pregnancy Center, Aurora HIV specialist

#### **Key informant barriers & challenges:**

• Limited sexual health education currently being taught and lack of access to specialized services, out of county travel is required.

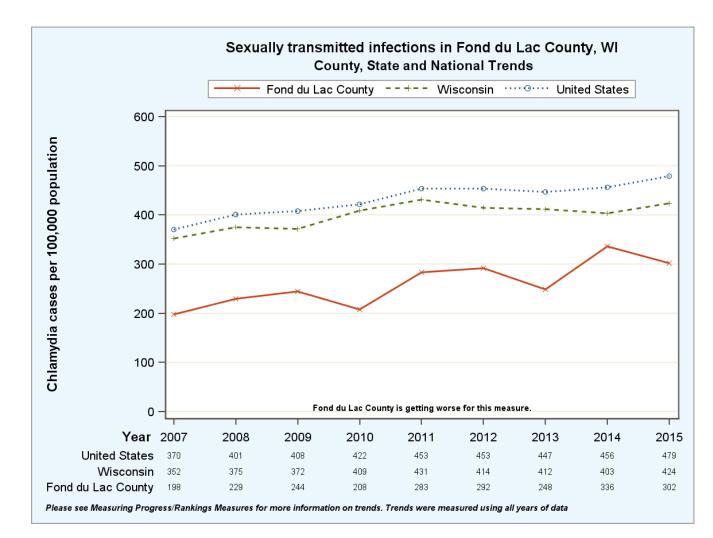
### Public Input:

• Lack of family planning clinics in the area as a barrier to accessing affordable reproductive and sexual health resources and services.

## Reproductive and Sexual Health

Human Growth and Development [10 <sup>th</sup> or 11 <sup>th</sup> Grade]	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>
Sexual Orientation					
Heterosexual (Straight)					84%
Gay or Lesbian					2%
Bisexual					8%
Ever Had Sex in Lifetime			33%	31%	30%
Never Had Sex			65%	66%	69%
Age of Onset: First Had Sex			14.5	14.7	14.7
Two or More Sexual Partners in Lifetime (Of Respondents Who Had Sex)			59%	58%	56%
Used Alcohol or Drugs Before Last Sexual Encounter (Of Respondents Who Had Sex)					17%

	Fond du Lac	Top US performers	WI	
Teen Birth Rate	19	15	20	Number of births per 1,000 femal
Black	32			population ages 15-19.
Hispanic	59			
White	16			
STIs	301.7	145.1	423.5	
Retrieved from Cou	ntv Health Ranking	as and Roadmap	S	



Fond du Lac County										
Diseases	2015	2016	2017							
Sexually Transmitted Infections (STI)										
Chlamydia	294	330	316							
Gonorrhea	35	104	63							
Food/Water Borne Illness										
Campylobacter	33	21	32							
Cryptosporidium	18	15	5							
E. Coli	1	10	1							
Giardia	6	6	11							
Salmonella	18	22	24							
Vaccine Preventable (except Hep C)										
Pertussis	2	9	5							
Hepatitis A	0	0	0							
Hepatitis B	1	2	2							
Hepatitis C	51	40	34							
Tuberculosis (TB)										
Latent Disease	12	6	14							
Active Disease	2	1	0							

## **Tobacco Use and Exposure**

### Key informant existing strategies:

 Smoke-free housing, quit smoking day, and medications to help people quit tobacco use

### **Key informant barriers & challenges:**

 addiction, people resuming their addiction after quitting, and a general lack of understanding how harmful and addictive vapor products.

## **Public Input:**

• No themes emerged.

## **Tobacco Use and Exposure**

Table 15. Current Tobacco Cigarette Smokers	[Adult Survey & Student Survey]
---	---------------------------------

					-								
		FDL		WI	US	HP2020			FDL		WI	U.S.	HP2020
Adult	2008	2014	2017	2016	2016	Goal	Student	2008	2014	2017	2013	2015	Goal
Current Smoker (past month)	27%	20%	20%	17%	17%	12%	Current Smoker (past month)	22%	7%	6%	12%	11%	16%
							11 or More Cigarettes on Days Smoked	15%	18%	11%	10%	9%*	
							Never Smoked Cigarettes	57%	77%	88%	67%	59%*	
							Average Age of Onset	12.6	12.8	13.3			

\*2013 U.S. student data

#### Table 18. Current Electronic Vapor Product Users [Adult Survey & Student Survey]

	FDL		WI	US		FDL	US
Adult	2014	2017	2016	2016	Student	2017	2015
Electronic Vapor Product Users (past month)	7%	4%	5%	5%	Electronic Vapor Product User (past month)	11%	24%
					Never Smoked Electronic Vapor Product	75%	
					Average Age of Onset	13.9	

#### Table 17. Exposure to Cigarette Smoke [Adult Survey]

		FDL		WI	U.S.	HP2020
Adult	2008	2014	2017	2005	2006-08	Goal
Smoking Policy At Home						
Not Allowed Anywhere	74%	83%	88%	75%	79%	87%
Allowed in Some Places/At Some Times	14%	8%	4%			
Allowed Anywhere	. 3%	1%	2%			
No Rules Inside Home	9%	8%	7%			
Nonsmokers Exposed to Second-Hand Smoke (past 7 days)	41%	18%	18%			34%

## **Tobacco Use and Exposure**

#### Table 20. Smokeless Tobacco [Adult Survey & Student Survey]

	FI	DL	WI	US			FDL		WI	U.S.	HP2020
Adult	2014	2017	2016	2016	Student	2008	2014	2017	2013	2015	Goal
Used Smokeless Tobacco (past month)	9%	5%	4%	4%	Used Smokeless Tobacco (past month)	8%	3%	2%	8%	7%	6.9%
					Never Used Smokeless Tobacco	85%	91%	94%			
	-				Average Age of Onset	13.4	13.7	13.5			

#### Table 21. Cigars, Cigarillos or Little Cigars [Adult Survey & Student Survey]

	FI	DL			FDL		WI	U.S.	HP2020
Adult	2014	2017	Student	2008	2014	2017	2013	2015	Goal
Smoked Cigars, Cigarillos or Little Cigars	•		Smoked Cigars, Cigarillos or Little Cigars						
(past month)	6%	5%	(past month)	17%	6%	4%	12%	10%	8.0%
			Never Used Cigars, Cigarillos or Little Cigars			90%			
			Average Age of Onset			13.7			

	Fond du Lac	WI	Years of data used						
Smoking During Pregnancy	16%	13%	2013-2016						
Retrieved from County Health Rankings and Roadmaps									
<b>Tobacco Sales to Minors</b>	15.4%	-	2017						
Source: Wisconsin Wins (2017)									

# Injury and Violence

#### Key informant existing strategies:

- School counselors, school resource officers, positive relationships with youth at schools; bullying prevention in schools
- Community policing model in FDL; law enforcement; well-trained law enforcement;
- Aggressive DA's office; people held accountable
- Active shooter trainings; preparedness; education;
- Efforts in domestic abuse; ASTOP, shared community resources; collective impact through Women's Fund Initiative

#### **Public Input**

• Recent rise in crime and violence surrounding drug use.

#### **Key informant barriers & challenges:**

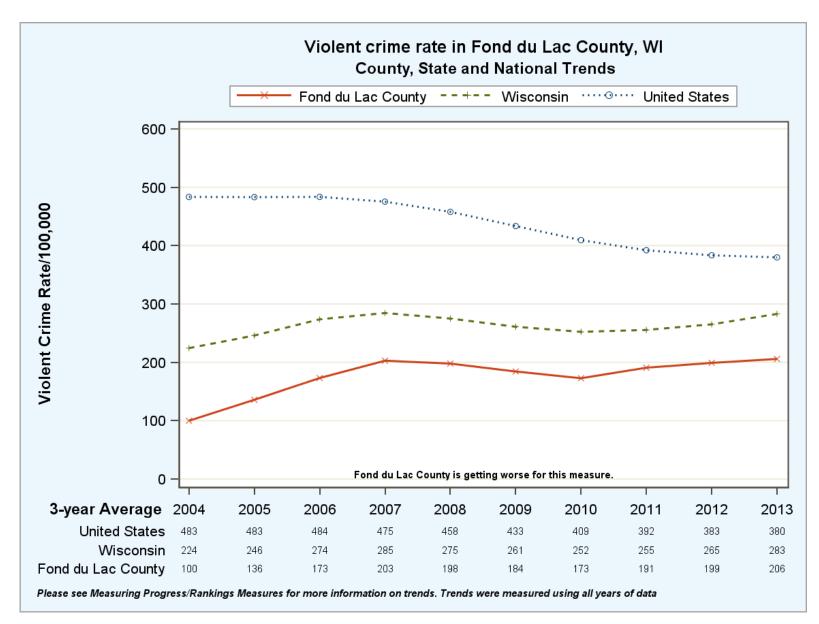
- Addressing multifaceted issues of injury and violence as it relates to alcohol and drug use and mental health
- Change in acceptable behaviors and norms in society, morals and values, family structure
- Decline in participation in faith-based organizations;
- Increase in gun violence; legislative change
- Bullying in larger community;
- Existing shelter get full rather quickly lack of adequate resources and support groups/ therapeutic resources for those impacted by domestic violence

#### Table 28. Personal Safety Issues [Adult Survey & Student Survey]

	*								
		FDL			FI	DL .	WI	U.S.	HP2020
Adult	2008	2014	2017	Student	2014	2017	2013	2015	Goal
				Carry Weapon, Excluding Recreational Sports					
Afraid for their Personal Safety (past year)	5%	6%	10%	(past month)	9%	7%	14%	16%	
Pushed, Kicked, Slapped or Hit (past year)	2%	2%	6%	Physical Fight (past year)	24%	20%	22%	23%	28.4%
At Least One of the Personal Safety Issues				Dating Violence (Of Dating Respondents)					
(past year)	7%	7%	12%	(past year)		12%	9%	10%	
				Someone Threatened Student Through					
				Electronic Communications (past year)	20%	21%	18%	16%	
				Student Threatened Another Person Through					
				Electronic Communications (past year)	10%	9%			
				Self-Harm (past year)		16%	17%		

	FDL County	Top US Performers	WI	Data Source/Year
Violent Crime	206	62	283	Uniform Crime Reporting - FBI 2012-2014
Injury Deaths	72	55	73	CDC WONDER mortality data 2012-2016
Retrieved from Count	v Health Rankinas and	Roadmans		

Retrieved from County Health Rankings and Rodamaps



Source: County Health Rankings and Roadmaps (2018)

# Healthy Growth and Development

#### Key informant existing strategies:

- Activities in the community (School District, Birth to 3, Agnesian/SSM, Head Start collaboration); SPROUT; Head Start, Child Care Centers
- Programs that support Elementary age youth Boys and Girls Club, Big Brothers, Big Sisters;
- Programs that offer mentoring and financial support to new parents;
- School Resource Officers;
- Trauma Informed resources

#### Key informant barriers & challenges:

- Youth mental health
- Preventing and addressing instances of childhood trauma
- Support services for families in employment, healthcare, childcare, and food
- Lack of healthy home environments, poor lifestyle habits, lack of positive role model
- Knowing what services are available to community
- Addressing isolation and depression among families
- Stressors such as income
- Lack of knowledge of importance of investing in youth
- Transportation in rural areas
- Funding

#### **Public Input**

 Increase access to resources on parenting and support for families with young children.

## **Environmental and Occupational Health**

### Key informant existing strategies:

 Equality Project, community support for equal housing ordinance to include transgender individuals, and LGBTQ+ and Area Association of Commerce partnership on inclusion stickers for local businesses.

### **Key informant barriers & challenges:**

• Key informant mentioned the following as barriers and challenges in relation to individuals who identify as LGBTQ+: religious barriers, outreach to community for support, schools, identifying safe zones, and gender conforming bathrooms.

### **Public Input**

• No themes emerged.

## **Environmental and Occupational Health**

	FDL	Top US	WI
Air Pollution	9.7	6.7	9.3
Drinking water violations	No		
Severe housing problems	13%	9%	15%
Driving alone to work	82%	72%	81%
Long commute - driving alone	23%	15%	27%

	FDL	Top US	WI					
Food Environment Index	8.4	8.6	8.8					
Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best).								

#### Retrieved from *County Health Rankings and Roadmaps*

# Communicable Disease Prevention and Control

#### Key informant existing strategies:

- Local health systems and facilities; health department;
- Food safety education; handwashing; individual personal responsibilities;
- Immunization rates; education; public schools; healthcare and medical professionals

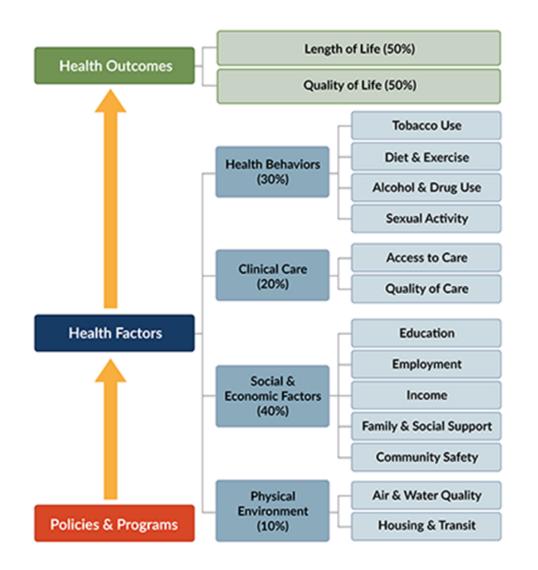
#### **Key informant barriers & challenges:**

- Misinformation about vaccines, flu-shot conversations for families with youth, education about vaccines
- Lack of alternate health methods in community
- Perceived lack of susceptibility for communicable disease,
- Ability for parents to easily "opt out" for vaccines, increased amount of people opting out for vaccinations
- Lack of comprehensive sexual health education in schools
- High rates of sexually transmitted diseases.

#### **Public Input**

No themes emerged.

 ✓ 75% of Fond du Lac County two year olds received all recommended immunizations. (2017)



County Health Rankings model © 2014 UWPHI

# Mortality

	FDL CO			Top US Performers		/I	Number
Infant Mortality	Rate (48	e: 6 deaths)	4		6		per 1000
		FDL	1	Շօր US		WI	Number
Years of Potential Life Lost (YPPL)		5,400	5	5,300		6,000	before ag (age-adju

Number of infant deaths (1 year) per 1000 live births

Number of years of potential life lost pefore age 75 per 100,000 population (age-adjusted)

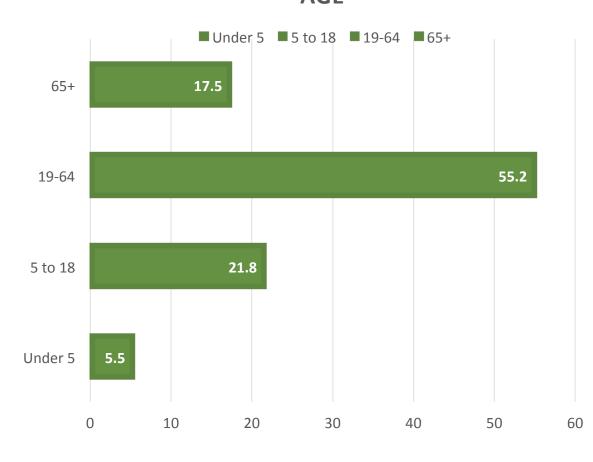
## Morbidity

	FDL	Top US	WI
Low Birth Weight	7%	6%	7%
Black	13%		
Hispanic	8%		
White	7%		

Percentage of live births with low birthweight (< 2500 grams).

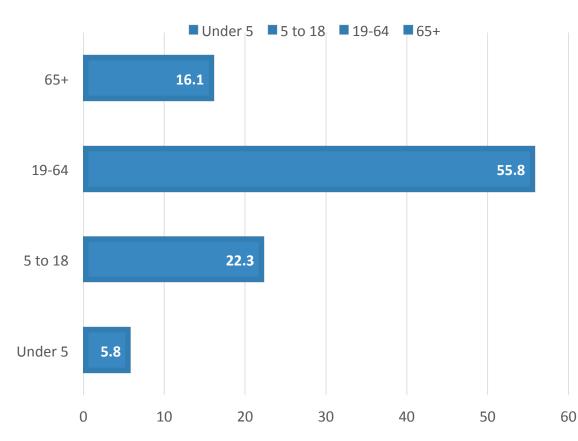
## Demographics

## Fond du Lac County 2016 AGE



## Wisconsin 2016

AGE



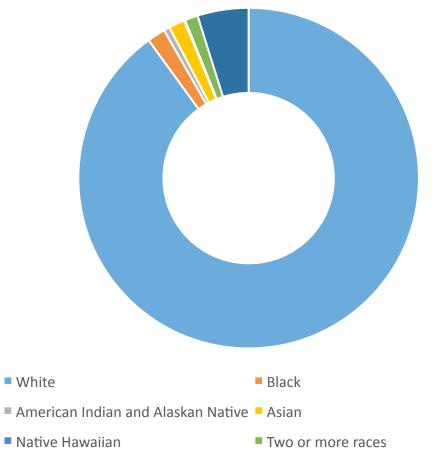
# Fond du Lac County Demographics 2015 Data

Age Group	Males	Females	Total
0-17	11,312	10,784	22,096
18-44	16,927	16,671	33,598
45-64	14,571	14,742	29,313
65+	7,720	10,066	17,786
Total	50,530	52,263	102,793

35.1% live in a rural area Percentage of population growth 2010 – 2013: 1%

# Fond du Lac County 2016

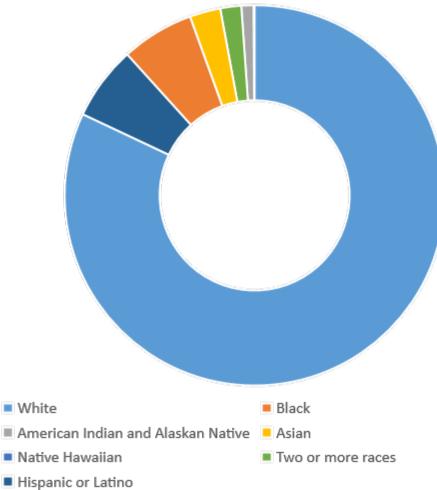
Race and Ethnicity



Hispanic or Latino

## Wisconsin 2016

Race and Ethnicity



# Housing 2012-2016

	Fond du Lac County	WI	US
Housing units	44,706	2,668,444	135,697,926
Owner-occupied housing unit rate	71.7%	67.0%	63.6%
Median value of owner-occupied housing unit	\$147,000	\$167,000	\$184,700
Median selected monthly owner costs – with a mortgage	\$1,285	\$1,391	\$1,491
Median selected monthly owner costs – without a mortgage	\$515	\$532	\$462
Median gross rent	\$709	\$789	\$949

# Education 2012-2016

	Fond du Lac	WI	US
High school graduate or higher	91.6%	91.4%	97.0%
Bachelor's degree or higher	21.9%	28.4%	30.3%

# Income & Poverty 2012-2016

	Fond du Lac County	WI	US
Median household income	\$56,376	\$54,610	\$55,322
Per capita income in past 12 month	\$28,036	\$29,253	\$29,829
Persons in poverty	7.7%	11.8%	12.7%

## Priorities

## Healthiest WI 2020

#### VISION

Everyone living better, longer

#### GOALS

Improve health across the life spanEliminate health disparities and achieve health equity

#### **MISSION**

Assure conditions in which people can be healthy, and members of healthy, safe, and resilient families and communities.

#### **5 Key Health Priorities for Healthy Wisconsin**

- Alcohol
- Nutrition and physical activity
- Opioids
- Suicide
- Tobacco

Recognized the need to build awareness around the effect ACES have on health

## **Neighboring Counties Priorities**

Waushara	Winnebago	Green Lake	Dodge/ Jefferson	Washington	Sheboygan
Mental Health	Social and Place Connectedness	AODA	Obesity/Nutrition & Physical Activity	Chronic Disease Prevention and Management	AODA
AODA	Access to Opportunities that Improve Health	Mental Health	Substance Abuse	Substance Abuse	Mental Health
Chronic Disease	Healthy Food and Beverages	Chronic Disease	Mental Health	Workplace Wellness	Access to Health Services
Overarching priority areas:	Mental Health	Mental Health			<b>Obesity/Nutrition</b>
Access to Care, ACEs, Equity,	AODA				

## What issues should we focus on to have the greatest impact on health in our community?

• Determine the number of priority issues the group will select

# Set criteria for priorities and process to be used

## **Prioritization Criteria**

- 1. Actionable at the local level
- 2. Able to be impacted in 3-5 years
- 3. Viable strategies exist to impact the issue
- 4. Affects many people
- 5. Has a serious impact on population health

## **Ranking Priorities**

Multi-voting technique Select 3 priorities to focus on

## Health Focus Areas

- Nutrition & Physical Activity (combined)
- Alcohol and other drug use
- Chronic disease prevention and management
- Injury and violence
- Mental health
- Tobacco use and exposure

## **Overarching Priorities**

- ACEs, Trauma, and Resilience
- Determinants of Health (Economic, Social, and Educational)
- Health Disparities

- Trauma Informed Care
- Social Determinants of Health

# Fond du Lac County Community Health Priorities Identified:

- Mental Health
- Alcohol and Drug Use
- Nutrition and Physical Activity
- Overarching Priorities:
  - Trauma Informed Care
  - Social Determinants of Health

## CHA Forum – Save the date!

June 20, 2018 7:00-8:30 AM Plaza Level Conference Center St. Agnes Hospital, SSM Health

Featured Keynote Speaker: Karen Timberlake