Florence County Health Department 2020-2025

Community Health Assessment



Connecting You to a Better Life



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Acknowledgements

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The Florence County Health Department would like to thank all our partners for their support and dedication of their time and expertise in the development of the Community Health Assessment and Community Health Improvement Plan. Our community is fortunate to have such caring and motivated individuals to ensure the safety and well-being of those in their community. Together we can promote Connecting You to a **Better Life!**



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Introduction

The Florence County Health Department recognizes the overall importance of a Community Health Assessment (CHA) within it's community and state. Data in this report is a collective effort of health department staff, partners and stakeholders. The CHA document drives community assessment, planning, implementation, and evaluation used throughout the community health improvement plan.

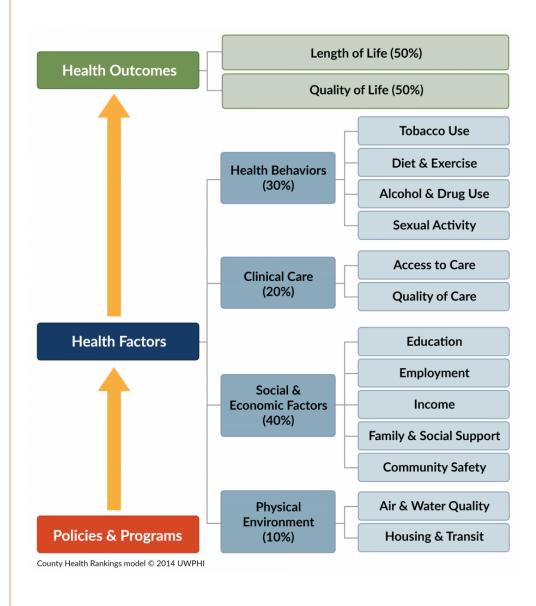
As individuals review the report, they will notice that some areas have improved as a result of community initiatives while others have gotten worse. Other data points may be too early to determine an improvement or decline. The reader is encouraged to review the data as it applies at a local, state, and national level to provide comparative information.

Public Health Accreditation status through the Public Health Accreditation Board (PHAB), as well as the state of Wisconsin, requires that Community Health Assessments be completed at least every five years. PHAB standards strongly encourage that national models of methodology be utilized when completing a CHA. The Florence County CHA was completed using an adapted version of the National Association of County and City Health Officials (NACCHO) *Mobilizing Action through Partnerships and Planning (MAPP)* process. MAPP is a community driven planning process used to improve the health of the community. The process was led by the Florence County Health Department with assistance and support from the Wisconsin Department of Health, Northern Region Office for Policy and Practice Alignment.

The collaborative effort engaged approximately 30-participants to identify key health priorities in Florence County. The process provided a platform to improve population health and promote health equity related to a rural community with little ethnic diversity. In addition, the CHA is modeled after other reports recognized by PHAB as meeting standards and measures for comprehensive

Method

Indicators for the 2020-2025 CHA are organized utilizing the County Health Rankings model of population health factors and Social Determinants of Health. This model was developed in partnership with the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation and is widely used among Public Health Professionals. By applying this model, Florence County Health Department is able to improve the commitment that it has in implementing best practices for improved population health outcomes.



Source: University of Wisconsin, Population Health Institute and the Robert Wood Johnson Foundation, County Health Rankings and Roadmaps. (2019).

Method (continued)

In conjunction with the Social Determinants of Health, the Florence County Health Department used the *Wisconsin Guidebook on Improving the Health of Local Communities (2019).* This guidebook focuses on the Social Service Model which was developed from the United Way of Central Ohio as an innovative approach to leveraging a community-based care system. This model has proven to increase collaboration between service providers to ensure that community members are being delivered the essential services.



Source: University of Wisconsin, Population Health Institute and the Robert Wood Johnson Foundation, County Health Rankings and Roadmaps. (2019).

Method (continued)

In addition to the models used for the organization and determination of the indicators listed in the CHA, the Florence County Health Department also engaged community members, partners, and stakeholders in two primary ways. One way the Health Department engaged the community was by creation and disbursement of a Community Health Survey (See Appendix B). The second method of engagement was through community-based focus groups.

Florence County Health Department recognizes the value of input from target populations. The Community Health Survey was created by health department staff utilizing guidance from the National Association of County and City Health Officials (NACCHO) on community health assessments. A preliminary survey was distributed to Florence County staff members for editing and suggestions on ease of use and literacy. Florence County Health Department staff further improved the survey draft by implementing the suggestions for edits by numerous other agencies including Aging and Disability Resource Center, Human Services Department, Economic Development, and Clerk's Office.

The survey was sent via mail to a random selection of 320 residents from all eight townships located throughout the county. Surveys were also distributed to community members at the local grocery store on two separate occasions. Furthermore, in order to capture the responses of priority populations (i.e. low income, disabled, the elderly, and parents with young children) surveys were also distributed at the local St. Vincent de Paul commodities program and door to door at two of the larger low income and disabled housing units in the county. Finally, surveys were handed out to all health department customers including Women, Infants, and Children (WIC) participants.

The second method of community engagement involved two separate focus groups which were advertised in local newspapers and through flyer distribution (see Appendix E) throughout the county. Participants were able to talk about their perceptions of the strengths and challenges of living healthy in Florence County. Florence County Health Department provided outreach through gift basket incentives to encourage participation. The gift baskets were on display at the local library for two weeks prior to the scheduled focus groups. One focus group was held during the day at a local low-income housing unit and the other was held in the evening at the county library.



Can Stock Photo

"

...agencies participate in and develop programs based on the needs of their community.

"

Author Unknown, 2019

What is a CHA and CHIP?

Local Health Departments are required to regularly and systematically collect, assemble, analyze, and make available information on the health of their community (WI DHS 140.01(1)(g)3).

What is a Community Health Assessment and Improvement Plan?

- A locally based initiative
- Identifies local factors causing health concerns
- Recognizes community assets and resources
- Addresses local health priorities
- Linked to state and national priorities
- Mobilizes community resources to improve the health of residents

Who is here?

- Representatives of the community
- Leaders with knowledge of the community
- Individuals interested and committed to creating a healthier community

Why do a community health assessment and an improvement plan?

- Form and strengthen partnerships
- Increase community awareness
- Tap community's innovative ideas
- Integrate isolated efforts... build on existing services
- Conserve resources... prevent duplication of efforts
- Develop comprehensive strategies that will work in your community

How do we create a community health improvement plan?

- Examine data: disease, death, disability, injury, community opinion
- Process follows national models (we used MAPP Mobilizing for Action through Planning and Partnerships)
- Identify priority health problems: factors that can be impacted
- Identify community assets and resources to be supported or tapped
- Develop a health improvement plan to address priority concerns
- Present the health improvement plan to the community
- Implement the identified strategies and measure success
- The community health assessment is a community document, produced and used by the community



Data Sources

Primary Data

"Data or information that you collect yourself, rather than get from somewhere else" (Cambridge Dictionary, 2019).

The primary data collected for this assessment was the 2019 Community Health Assessment Survey which was distributed from June 2019 to July 2019. The survey was available in paper version only. Analysis and report of the community health assessment survey summary was prepared by the Florence County Health Department's 2019 Wisconsin Area Health Education Centers (AHEC) student. The AHEC intern also summarized feedback from focus groups for Community Health Assessment reporting purposes.

Secondary Data

"Secondary data is data that is publicly available, rather than data that an organization collects for itself" (Cambridge Dictionary, 2019). Secondary data was utilized from a variety of sources including but not limited to the following:

<u>Community Commons</u>, developed by the Institute for People, Place and Possibility, provides access to tools, data, and reports through their CARES Engagement Network. This network is a national data and reporting platform for communities.

<u>County Health Rankings and Roadmaps</u>, developed by the University of Wisconsin Population Health Institute bases health status on Health Outcomes and Health Factors. The county health rankings model was used to discuss the health of the community during the community meeting on September 18, 2019. The County Health Rankings also provides evidence-based options to create healthier places to live, learn, work, and play.

<u>The Behavioral Risk Factor Surveillance System (BRFSS)</u>, is the world's largest, on -going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, data is collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam.

<u>The Youth Risk Behavior Survey (YRBS)</u>, was developed by the Division of Adolescent and School Health (DASH), National Center of Chronic Disease Prevention and Health Promotion, and the Center for Disease Control and Prevention (CDC) in collaboration with several representatives from state and local health education agencies and other federal agencies. This assessment identifies state and local YRBS information.

<u>U.S. Department of Commerce, U.S. Census Bureau American FactFinder</u>, this site provides access to data about the United States, Puerto Rico and the Island Areas. The data in American FactFinder comes from several censuses and surveys.



The Collaborative Process

Mobilizing for Action through Planning and Partnerships (MAPP)

The Health Department decided to base our Community Health Assessment and Community Health Improvement Plan on the national model which consists of six phases:

- **Organizing**: Preparing for the process and inviting members to participate
- Visioning: After group is assembled, determine a shared vision and mission
- **Assessments**: Assess data utilizing two out of the four MAPP assessments and analyze results
- **Strategic Issues**: Identify top concerns as identified by various data sources
- **Goals/Strategies**: Develop goals related to mission and strategic issues
- Action Cycle: On-going cycle of Planning for Action, Implementation and Evaluation

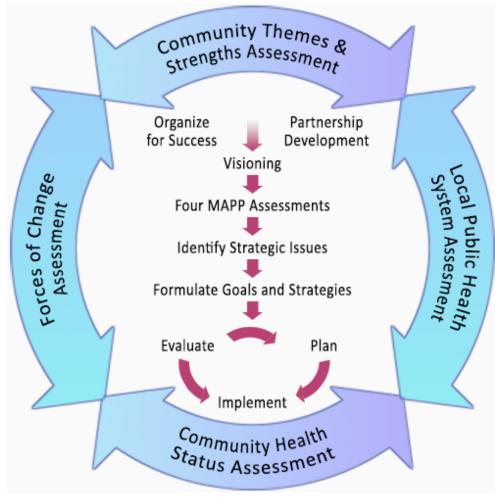


Photo credit: University of Kansas. Accessed December 2019.

MAPP Phases

- Organizing
- Visioning
- Assessments
- Strategic Issues
- Goals/Strategies
- Action Cycle

The Collaborative Process

Organizing

- **August 2019:** Representatives from the Department of Health Services, Division of Public Health, Northern Region Office of Policy and Practice Alignment (OPPA) met with Florence County Health Department staff to discuss the Community Health Assessment process and begin a preliminary review of data.
- **August 2019:** Potential participants from many sectors of the community were identified. Agendas and supporting materials for the CHA meeting were sent to all participants.
- **September 18, 2019:** Twenty-six participants attended *"Data in a Morning",* Community Health Assessment meeting led by Northern Region OPPA facilitators, Jim Lawrence and Angela Nimsgern, to review data from twelve Healthiest Wisconsin 2020 focus areas.

The participants representing different sectors of the community reviewed

data compiled from multiple secondary data sources. In addition, results of the local Florence County Community Health survey and focus groups were considered.

• September 18, 2019: In the afternoon, the Steering Committee Members met to discuss results of "Data in a Morning", identify themes and provide suggestions of subcommittees to work on future goals and strategies.



Round-robin discussion at the CHA meeting on 9/18/2019

The time line was completed by health department intern, Julia Hallgren, to document the process (See Appendix A).

The Collaborative Process

Healthiest Wisconsin 2020 Focus Areas

- Alcohol and Drug Use
- Mental Health
- Chronic Disease Prevention and Management
- Tobacco Use and Exposure
- Injury and Violence Prevention
- Healthy Growth and Development
- Physical Activity
- Reproductive and Sexual Health
- Environmental and Occupational Health
- Nutrition and Healthy Foods
- Communicable Diseases
- Oral Health

Why these?

• Twelve health focus areas identified in a twoyear, science-based, state-wide effort culminating with the state health plan *Healthiest Wisconsin 2020.*

• Inter-sector and interdisciplinary workgroup involving almost 200 public health, medical and academic experts

• Reflect the underlying causes of hundreds of diseases and health conditions that affect the people of Wisconsin

Visioning

The Florence County Health Department, Vision, Mission and Goals align with the State Health Improvement Plan

Florence County Health Department's Mission:

Connecting You to a Better Life!

Florence County Health Department's Vision

• Healthy people, vibrant communities

Florence County Health Department's Values:

COMMITMENT, COLLABORATION, COMPASSION

The group agreed that the Florence County Community Health Improvement Plan (CHIP) will be guided by similar vision and goals statements as the state health improvement plan, Healthiest Wisconsin 2020.

Healthiest Wisconsin 2020 declares a bold vision, "Everyone living better,

longer."

This vision reflects the plan's twin goals:

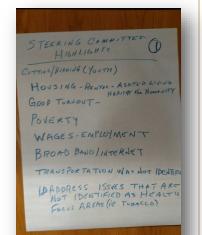
- Improve health across the life span
- Eliminate health disparities and achieve health equity

The plan's mission is to assure conditions in which people can be healthy, and members of healthy, safe, and resilient families and communities.

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

(Retrieved from Health Focus Area Profiles July 2010)

Steering Committee



Community Health Improvement is most successful when there is true collaboration between public and private entities for health improvement activities. The following members of the CHA Steering Committee have committed their expertise, agency resources and staff time to help better serve our community.

Florence County Community Health Assessment and Improvement Plan Steering Committee Meeting Participants

Members:

0	. Wis. Div. of Public Health; Director/Northern Region Wis. Div. of Public Health; CHES/Northern Region
Jen Steber	Florence County Human Services; Director
Jenn Robinson	.Florence County Human Services
Ann Price	Florence County Health Department; RN
Annette Seibold	Florence County Health Department; Health Officer
Amber Kolberg	Florence County Health Department; CHS
Sara Jerue	Florence County Health Department; Transcriptionist
Tiffany White	. Florence County ADRC; Director
Angela Lorenzen	VA Associate Chief of Pharmacy, Clinical Supervisor
Joe Rizzo	.DCHS Director of PR and Business Development





Socio-Economic and Demographic

Overview

Florence County, a rural county in Northeast Wisconsin, has a long history of excellent relationships among community partners collaborating to offer a broader range of services than any individual, department, or group could provide on its own. However, we face substantial challenges including high rates of poverty and lack of access to care including health, dental, and mental health providers.

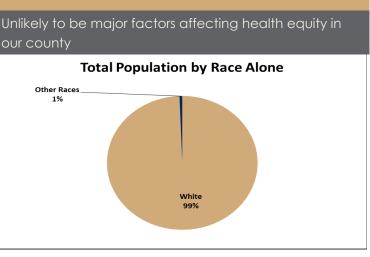
The health department staff consists of two Registered Nurses, one Community Health Specialist/Registered Sanitarian and an Administrative Assistant. The department serves an area of 488 square miles and a population of approximately 4,400 according to the 2017 US Census. Florence county has the second smallest population of the 72 counties in Wisconsin. Florence is one of two counties in the State of Wisconsin with no incorporated cities or villages. About 50% of children attending Florence Schools are eligible for free or reduced-price lunch which is a significant indicator of general economic status for the county because families must be at or below 185% Federal Poverty Level (FPL) to qualify.

Health Disparities and Inequalities

According to the Centers for Disease Control and Prevention (CDC), health disparities are differences in health outcomes between groups that reflect social inequalities. Since the 1980s, our nation has made substantial progress in improving residents' health and reducing health disparities, but ongoing racial/ethnic, economic, and other social disparities in health are both unacceptable and correctable.

Our sizeable low- to moderately-low-income (less than 200% FPL*) population is prone to poorer health outcomes.

Research has linked race and ethnicity to inequitable health outcomes. Florence County has very little cultural diversity. However, health equity is affected by economics, access, geography, and transportation.

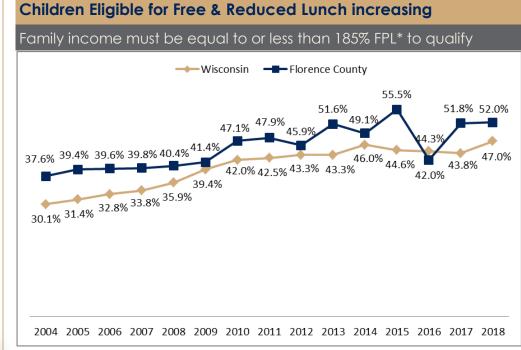


Florence County Population by Race & Ethnicity





County Demographics



Source: Wisconsin Food Security Project http://www.foodsecurity.wisc.edu. Accessed September 2019

The Federal Poverty Level Guidelines are distributed annually from the Federal Government to reflect income related to household size. Florence county has a high rate of students qualifying for free or reduced lunch, which means they meet the Federal Poverty Level. Poverty is related to poor health outcomes.

Florence

*Federal Poverty Level (FPL) Guidelines for 2018								
	House- hold/ Family Size	100% of Poverty	138% of Poverty	150% of Poverty	200% of Poverty	250% of Poverty	300% of Poverty	400% of Poverty
	1	\$12,140	\$16,753	\$18,210	\$24,280	\$30,350	\$36,420	\$48,560
	2	\$16,460	\$22,715	\$24,690	\$32,920	\$41,150	\$49,380	\$65,840
	3	\$20,780	\$28,676	\$31,170	\$41,560	\$51,950	\$62,340	\$83,120
1	4	\$25,100	\$34,638	\$37,650	\$50,200	\$62,750	\$75,300	\$100,400
	5	\$29,420	\$40,600	\$44,130	\$58,840	\$73,550	\$88,260	\$117,680
	6	\$33,740	\$46,561	\$50,610	\$67,480	\$84,350	\$101,220	\$134,960
	7	\$38,060	\$52,523	\$57,090	\$76,120	\$95,150	\$114,180	\$152,240

*Federal Poverty Level (FPL) Guidelines for 2018

Source: FamiliesUSA. (2017). Retrieved from https://familiesusa.org/product/federal-poverty-guidelines

\$84,760

\$105,950

\$127,140

\$63,570

Florence County's rate of children who are eligible for free and reduced lunch is higher than the State of Wisconsin and has been since 2004.

8

\$42,380

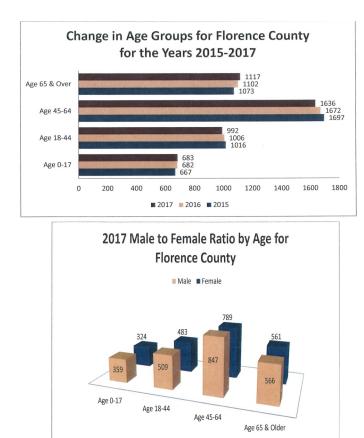
\$58,484

\$169,520

County Demographics

Florence County is often referred to as a "retirement community", with many residents over age 60 and fewer young people. The aging population trend has been established over the past ten years and is expected to continue into the future. Related to this, we have a high proportion of disabled residents when compared to the state (see below). An aging population is also a consideration in overall health outcomes.

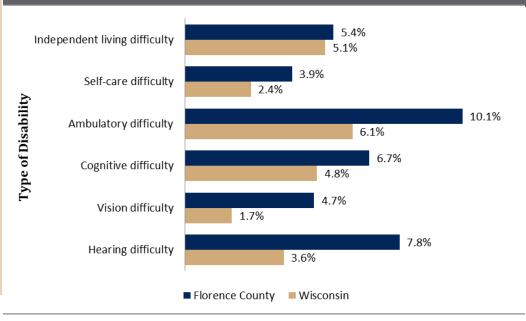
Male to female population has remained similar in numbers and consistent since 2013.



Source: U.S. Census Bureau, American Community Survey 2013-2017. Accessed July 2019.

Disabled Persons by Disability Type

Higher percentage of disabled persons compared to the state



What is considered a disability?

- Hearing Impaired
- Vision Impaired
- Difficulty with Independent Living

Source: 2013-2017 U.S. Census Bureau, American Community Survey. Accessed July 2019

Alcohol and Drug Use

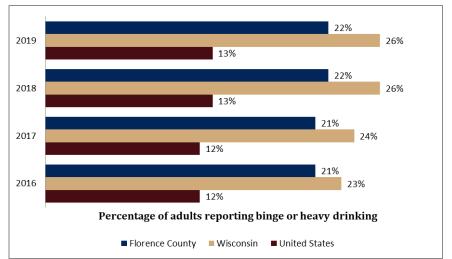
Binge drinking or heavy alcohol use among adults within the past 30 days in Florence County is lower that the state, but above the nation. Excessive drinking is the third leading lifestyle-related cause of death in the United States.

"The consumption of alcohol has been identified as one of the top-10 risks contributing to the worldwide burden of disease."

World Health Organization

Excessive alcohol consumption includes:

- Binge drinking
- Heavy drinking (15+ drinks/week for men; 8+ drinks/week for women)
- Any alcohol consumption by youth under 21 or pregnant women



Source: County Health Rankings and Roadmaps. (2019)

Annual Cost of Excessive Alcohol Use in Wisconsin



On an annual average, excessive alcohol consumption in Florence County contributes to:



< 5 alcohol-related deaths



14 alcohol-related hospitalizations



6 alcohol-related crashes



o alconor-related crashes

11 persons in an alcohol-related treatment service

Source: Linnan, S, Paltzer J., & Skalitzky, E. (2019). The Burden Of Binge Drinking in Wisconsin. University of Wisconsin Population Health Institute, School of Medicine and Public Health.

Alcohol and Drug Use

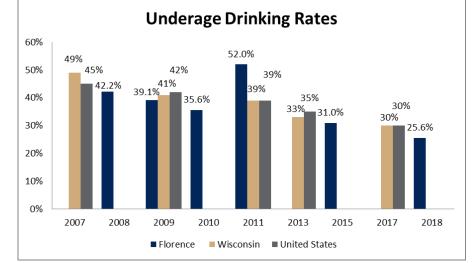


Florence High School data from the 2018 Youth Risk Behavior Survey (YRBS) shows a slight decrease in alcohol use and binge drinking behavior among high school students compared to the state. Florence County reports 26% of students consumed at least one drink in the past 30 days and 13% reported binge drinking in the past 30 days.

The YRBS results were a major factor in the group choosing Alcohol & Drug use as a Community Health Improvement Plan priority focus area. YRBS data is collected state-wide every two years.

Underage Drinking Rates

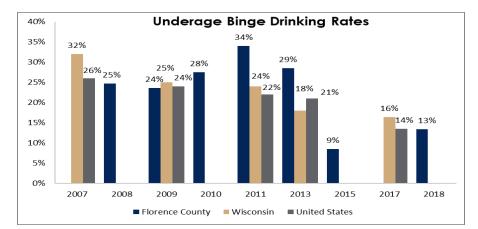
Percentage of students in grades 9-12 who had a least one drink of alcohol on one or more of the past 30 days.



Source: U.S. Department of Health and Human Services, Center for Disease Control and Prevention . (2019) and Wisconsin Department of Public Instruction. (2019).

Underage Binge Drinking

Percentage of students in grades 9-12 who had 5 or more drinks in a row on one or more of the past 30 days.



Wisconsin youth alcohol use and binge drinking rates have been higher than the United States on average for the past 15 years.

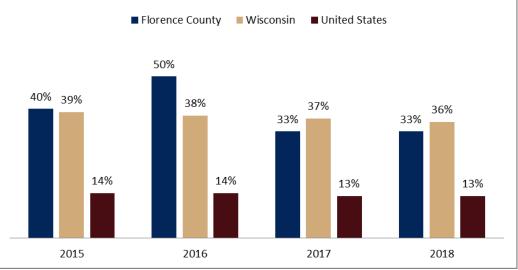
Source: U.S. Department of Health and Human Services, Center for Disease Control and Prevention . (2019) and Wisconsin Department of Public Instruction. (2019).

Alcohol and Drug Use



Since 2017, Florence County has shown a decrease in alcohol impaired driving deaths compared to the state of Wisconsin. Alcohol-impaired driving deaths are the percentage of motor vehicle crash deaths where alcohol was determined to be a factor. Florence County and the state of Wisconsin have significantly higher rates of alcohol impaired driving rates than the United States.

In 2003, Wisconsin lowered the prohibited alcohol content from .10 to .08



Alcohol-Impaired Driving Deaths

Source: University of Wisconsin Population Health Institute, School of Medicine and Public Health, County Health Rankings. (2019). Accessed October 2019.

Underage Prescription Drug Misuse

Percentage of Wisconsin students in grades 9-12 who have ever taken a prescription drug without a doctor's prescription

 Underage Prescription Drug Misuse Rates

 • Florence County
 • Wisconsin
 • United States

 25%
 21%
 18%

 13%
 9%

 201
 203
 205
 2018

Although Florence students have been on a downward trend for misuse of prescription drugs, participants of the Community Health Assessment data presentation were concerned about YBRS results. (YRBS at the state level does not reflect the same questions as local YRBS since 2013)

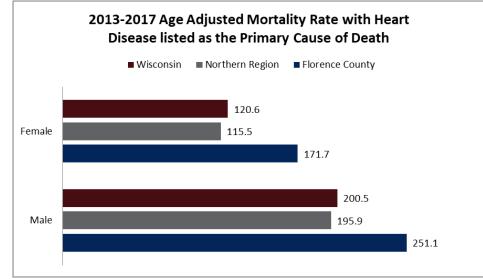
Chronic Disease



The data on the following pages show deaths from heart disease, stroke, Chronic Obstructive Pulmonary Disease (COPD), and lung cancer are lower in both the state and region than Florence County. This could be due to the fact that we are a "retirement community" with an aging population which are more prone to these conditions.

Heart Disease

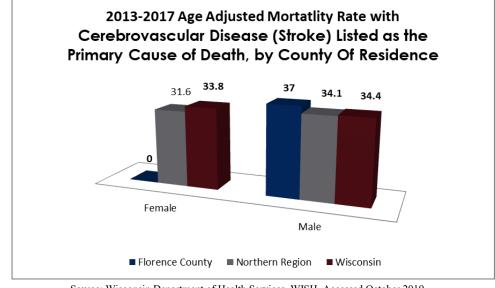
Overall, Florence's rate of heart disease as primary cause of death is higher than the state and the Northern region for both males and females.



Source: Wisconsin Department of Health Services, WISH Query System. Accessed October 2019.

Stroke

Primary cause of death listed as stroke is significantly higher for males in the region and state as well as Florence County.



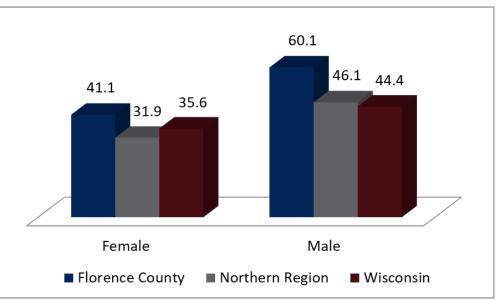
Source: Wisconsin Department of Health Services, WISH. Accessed October 2019.

Chronic Disease (continued)

COPD

Primary cause of death listed as Chronic Obstructive Pulmonary Disease continues to be higher in Florence County, than the region and state for both sexes.

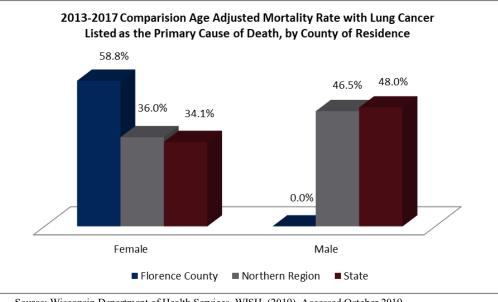
2013-2017 Comparison Between Sexes of Age Adjusted Mortality Rates with Chronic Obstructive Pulmonary Disease Listed as the Primary Cause of Death, by County of Residence.



Source: Wisconsin Department of Health Services, WISH. (2019). Accessed October 2019

Lung Cancer

Primary cause of death listed as lung cancer is higher for males in both the northern region and the state. However, Florence County shows an opposite trend, whereas females have a higher percentage of lung cancer than males.



Source: Wisconsin Department of Health Services, WISH. (2019). Accessed October 2019







Wisconsin State Statute requires healthcare providers to notify the local health department whenever they suspect or diagnose any of over 100 reportable communicable diseases. The health department is required to provide surveillance and follow-up on these cases.

2016-2018 Communicable Diseases Investigated in Florence

*Lyme Disease Continues to be the Most Reported Communicable Disease

2016-2018 Disease Surveillance Chart				
Disease	2016	2017	2018	
	Counts	Counts	Counts	
Vaccine Preventable Disea	ases			
Haemophilus Influenzae,	0	1	0	
Invasive				
Influenza A	0	1	2	
Meningococcal disease	0	0	1	
Pertussis (whooping cough)	1	2	26	
Streptococcal Group B Dis-	0	1	0	
ease				
Streptococcus pneumonia	0	1	1	
Invasive Disease				
Vectorborne Diseases	<u>_</u>			
Mosquito-borne				
West Nile virus infection	0	1	2	
(bird)				
Zika Virus	1	0	0	
Tickborne				
Ehrlichiosis/Anaplasmosis	0	0	2	
Jamestown Canyon	1	0	0	
Lyme disease*	13	39	11	
Powassan	0	1	0	
Rocky Mountain Spotted	1	1	1	
Fever				
Viral Hepatitis				
Hepatitis A	0	1	1	
Hepatitis C	11	7	5	
Sexually Transmitted Infection	s			
Chlamydia	4	8	4	
Foodborne Illness				
Campylobacter	2	5	4	
E-coli-Enteropathogenic	0	1	0	
E-coli, Shiga Toxin Producing	1	0	0	
Giardiasis	0	2	0	
Other Diseases				
Blastomycosis	0	1	0	
Histoplasmosis	0	0	1	







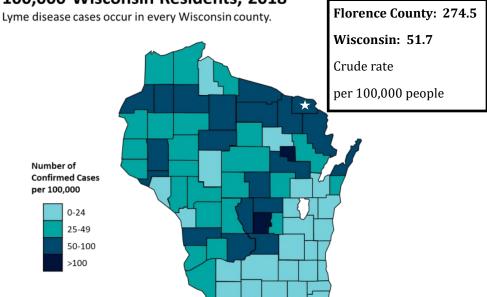
2019-Florence County distributed a version of the State's Fight the Bite Tick Removal Kit. This effort helped to raise awareness and prevent exposure to Lyme Disease.

Radon is a naturally occurring gas that is radioactive and can cause lung cancer. The Environmental Protection Agency (EPA) recommends all homes with 4 picocuries per liter (4 pCi/L) or higher be fixed.

Environmental Health

The state of Wisconsin has a 22% infectivity rate in deer ticks, creating a high risk of Lyme transmission particularly in some Northern counties including Florence.

Confirmed Cases of Lyme Disease (*B. burgdorferi*) per 100,000 Wisconsin Residents, 2018

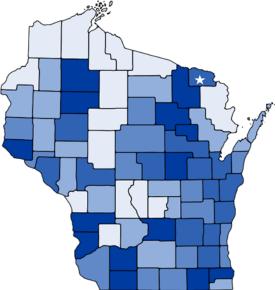


Data Source: Wisconsin Department of Health Services Accessed October 2019

RADON

Percent of tests with results ≥ 4 pCi/L . Fifty percent of Wisconsin's reported results are elevated. Florence County is above the state average at 55%.

19	19,592 TOTAL TEST			
		2015		
		15.1% to 38.8%		
		>38.8% to 48.1%		
		>48.1% to 52.0%		
		>52.0% to 55.5%		
		>55.5% to 100.0%		

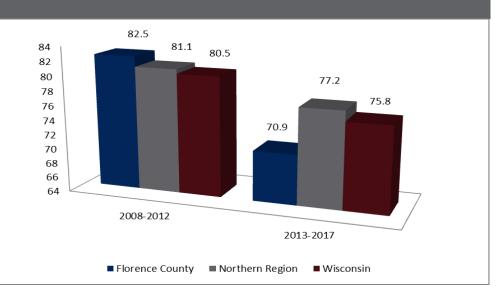


Wisconsin Environmental Public Health Tracking, Florence County 2019 County Environmental Health Profile. Accessed October 2019.

Healthy Growth & Development

Prenatal Care in the First Trimester

Percentage of Florence County mothers receiving prenatal care is declining



Mothers that receive prenatal care in their first trimester of pregnancy have better birth outcomes. In Florence County, mothers receiving prenatal care has declined since 2012.



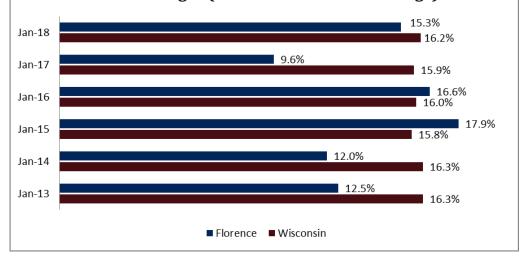
Data Note:

See some data missing? That is because not all data is available on a yearly basis. There are various factors that impact the reporting of data. Some examples are state legislation and regulations, reporting requirements, and small numbers. Source: Wisconsin Department of Health Services, WISH Query System. Accessed October 2019.

Overweight Children

Florence County rates similar to state

Percent of WIC Children ≥2 to <5 Years of Age That are Overweight (≥85th Percentile BMI for Age)



*It is noted that data may have limited interpretive value due to the small numbers.

Source: Wisconsin DHS and the Women, Infant and Children (WIC) program. Accessed October 2019

Injury & Violence Prevention



Among the top 10 causes of injury and violence in Florence County that required an emergency department visit, falls were the number one cause of injury.

Florence County Top 10 Causes of Injury

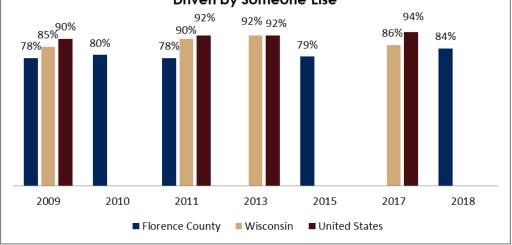
Cause of Injury	Emergency Department Visit Number	Rate per 100,00
Assault	<5	No rate
Drowning	0	No rate
Firearms	0	No rate
Suffocation	0	No rate
Self-Injury	<5	No rate
Traumatic Brain Injury	7	52.5
Falls	32	239.9
Unintentional fire-related	0	No rate
Motor vehicle accident	6	45.0
Poisoning drug-related	7	52.5

Source: Wisconsin Department of Heath Services, WISH Query. Accessed October 2019.



The percentage of Florence County students who report wearing a seat belt remains consistently below state and national levels.

Percentage of Students in Grades 9-12 Who Most of the Time or Always Wear a Seat Belt When Riding in a Car Driven by Someone Else



Source: Youth Risk Behavior Survey (YRBS). Retrieved on October 2019.

Mental Health



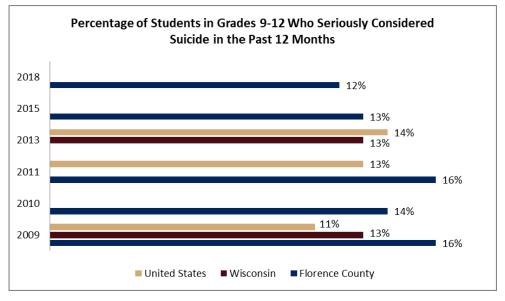
Image credit: Secureteencom

The percentage of Florence County students who seriously considered suicide have declined in recent years, but are consistent with the state and nation.



Source: 2019 Florence County Middle/High School Students during a Question, Persuade, Refer (QPR) Gatekeeper Training.

The Human Services Department (HSD) and the Sheriff's Office are the two agencies in the county that receive referrals for emergency mental health situations. In 2017 & 2018, HSD had a total of 49 contacts. Of those contacts, 32 were diverted, which means they were able to create a safety plan or deemed safe to return to the community. There were no hospitalizations for either year. According to the Florence County Coroner's Office, there were no completed suicides in Florence County in 2017-2018.



Source: Youth Risk Behavior Survey (YRBS). Retrieved on October 2019.

Health Professional Shortage Areas Mental Health Care



Florence County is similar to many parts of the state as a health professional shortage area for mental health providers. Participants in the CHA felt strongly that lack of awareness of mental health services and barriers to care continue to make this an important focus area.

Source: Wisconsin Office of Rural Health. Accessed October, 2019.

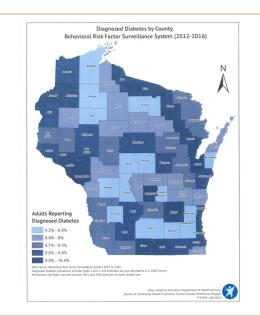
Nutrition & Healthy Foods

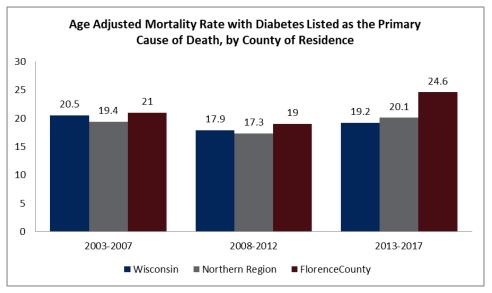


Florence High School 2018 YRBS – Percentage of students in grades 9-12 - Eating habits

- 37% of Florence County students reported eating fruit one or more times per day over the past seven days.
- 78% of Florence County students reported drinking water one or more times during the past seven days.
- 35% of Florence County students reported eating breakfast one or more times during the past seven days.
- 17% of Florence County students reported eating other vegetables one or more times during the past seven days.

Diabetes rates in Florence County are slightly below state average. However, diabetes as a primary cause of death is slightly higher than the state and region.





Source: Wisconsin Department of Health Services, WISH Query System. Accessed October 2019.

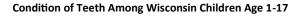
Oral Health

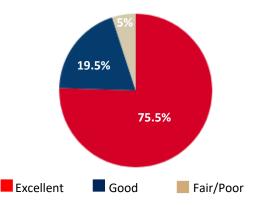


Photo Source: kimriouxdds.com .(2019)

Source:

Florence County Health Department Media. (2019) Northwood's Dental Project (NDP) has been working to prevent tooth decay and create awareness of oral health since it was formed in March 2007 by Oneida and Vilas County Health Departments. Northwood's Dental Project expanded the partnership in 2009 and 2011 to include Forest and Florence County Health Departments. NDP's dental staff





Source: Wisconsin Department of Health Services. Accessed October 2019.

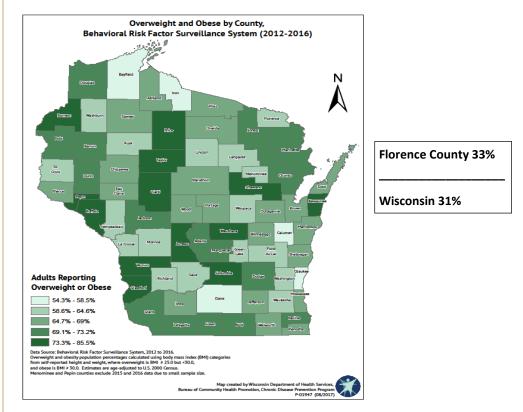
provide free preventive dental services to any family who wants to participate. Northwood's Dental Project relies on funding from community members, area foundations and organizations, various grants and the ability to bill Medicaid for sustainability of its programs. Services are provided using portable dental equipment and supplies.

Healthy Smiles-Fluoride Varnish	Florence
# Participating sites	2
# Children Participating	41
# Children referred for untreated dental decay	7
% of Children reporting Medicaid	61%
Seal-A-Smile-Dental Sealant Program	
# Participating schools/events	1
# Students receiving education	61
# Students receiving oral health exams/dental supplies (includes retention students)	45
# Students participating with special health care needs	9
# Students receiving sealants	33
# of Sealants placed	176
% of Students screened receiving sealants	77%
# Students referred for untreated dental decay	11
% of Students reporting Medicaid	49%

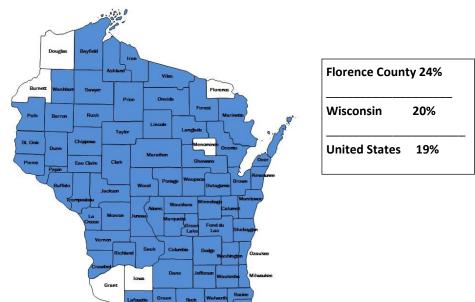
Northwood's Dental Project Florence Data for 2018-19

Physical Activity

Adult obesity rates for Florence County are slightly above the state average.



Age-Adjusted County –Level Estimates of Leisure-time Physical Inactivity Incidence Among Adults 20 Years of Age and Older







Florence County adult inactivity rates are also slightly above average compared to state and national rates.

Reproductive & Sexual Health



In 2017, Florence County Health Department (FCHD) initiated Reproductive and Sexual Health Services to Florence County residents.

Poverty and Premature Births

Studies have shown that there is an association between high poverty rates and preterm birth rates. This is often times due to a variety of social, economic, environmental, medical, and behavioral factors. Poverty can lead to chronic stress because of the many challenges that are related to

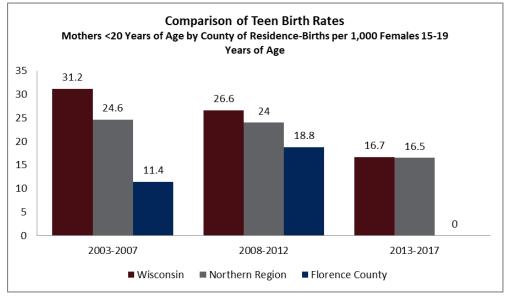


living in impoverished conditions. Research shows that chronic stress can increase the hormonal stress levels in an expectant mother, which can cause mothers to go into premature labor. Undue stress from neighborhood poverty, lack of access to care, transportation issues, and other forms of discrimination may contribute to higher rates of preterm birth rates (Wisconsin DHS, 2019).

Teen Births



In 2017, there were 2,591 live births to mothers under age 20 in Wisconsin, representing 4.0% of all births.



Source: Wisconsin Department of Health Services, WISH Query System. Accessed October 2019.

<u>Health Equity Alert:</u>

Large inequities in poor birth outcomes by race or ethnicity and education persist . In Wisconsin, about 1 out of every 10 babies are born premature, but prematurity occurs more frequently for black mothers than other races.



Red– Rates are above the Northern Region in Wisconsin

Green– Rates are similar or below Northern Region in Wisconsin

Type of Smoking-related Disease	Age-adjusted Death Rate: Florence County/Northern Region/Wisconsin
Malignant Neoplasms of Trachea, Bronchus & Lung	Florence County 47.2 Northern Region 40.0 Wisconsin 39.8
Cerebrovascular Diseases	Florence County 22.8 Northern Region 33.1 Wisconsin 34.4
Acute Myocardial Infarction	Florence County 59.9 Northern Region 46.0 Wisconsin 32.1
Heart Failure	Florence County 18.6 Northern Region 18.4 Wisconsin 19.8
Hypertensive Heart Disease	Florence County <5* Northern Region 6.1 Wisconsin 8.6
Malignant Neoplasm of Esophagus	Florence County <5* Northern Region 4.5 Wisconsin 4.8
Malignant Neoplasms of Lip Oral Cavity & Pharynx	Florence County <5* Northern Region 2.5 Wisconsin 2.5
Emphysema	Florence County <5* Northern Region 2.2 Wisconsin 2.2

Source: Wisconsin Department of Health Services (2019).

Malignant Neoplasm of the Larynx

Wisconsin WINS Compliance Checks for tobacco sales

Florence County Results 2011-2019

	Percent of Retailers Selling to Minors	Number of Sales to Minors	Number of Visits
2011	0%	0	6
2012	0%	0	10
2013	0%	0	13
2014	8%	1	12
2015	9%	1	12
2016	33%	4	12
2017	8%	1	12
2018	8%	1	12
2019	20%	2	10

Florence County <5* Northern Region 1.1 Wisconsin 0.9

*It is noted that data may have limited interpretive value due to the small numbers.

Source: Wisconsin WINS 2011-2019

Prioritization

Upon completion of the presentation of data, participants took about twenty minutes to write one priority per sticky note that they felt was a priority in our community that should be address over the next five years. Participants were allowed to write as many sticky notes as they deemed necessary to address their concerns. They were then asked to post their priority areas on a white board, grouping those that were similar. Once all participants posted their sticky notes, staff from the Northern Region OPPA identified areas of priority and grouped outliers when needed.



What do you think are the top priority issues that should be considered for the next five years of Community Health Improvement efforts? (Post-It Notes)

- Trauma Informed Care/Adverse Childhood Experiences (ACES)
- High School Intentional Injury (Cutting/Burning)
- Lung Disease-Smoking/Vaping
- More Activity-Lower Blood Pressure/Heart Problems
- Tobacco Use-Adult & Children
- Promote Residents of Healthy Culture-Physical Activity
- Obesity Rate-Adults & Children
- Elderly Population/Housing
- Access to Care-MH/Dental/Medical
- High Poverty Levels
- Housing-Building of more Rental
 Properties/Mid-Priced Homes
- Awareness of Mental Health Issues
- Opportunities to create community
- Connectedness
- Promotion of Private Well Testing
- Focus on Youth
- More Services Available for Special Needs
- Chronic Disease
- Maintain a Strong Educational System
- Prevention
- Jobs-Competitive Wages
- Offer Health Fairs in Townships
- Communication Through Free Newspapers & use of 99.1 Radio Station/Telephone Time
- Elderly on fixed income
- Offer Health Alternatives County-wide



Prioritization (continued)

What are the top 2-4 issues that will be considered for the next 5 years of Community Health Improvement efforts? (Ranking process of community identification exercise)

Housing	9 (tied)
Poverty*	12
Aging Elderly Population	3
Mental Health	11
Access to Care (including access for special populations) *	5
Obesity	4
Physical Activity	9(tied)
Trauma Informed Care	0
Jobs*	0
Alcohol and Other Drug Abuse	17
Tobacco	6
Education*	3
Communication	0
Community	1
Private Well	1

*Note: Issues with an asterisk are considered "cross-cutting factors" which can broadly affect the health and welling-being of the entire population. These were not a consideration for priority areas because of their wide impact in a variety of areas. The Florence County Health Department along with local and state partners are committed to addressing these issues on a continual larger social and economic basis.

Top four results from CHA Meeting:

- 1. Alcohol and Other Drug Abuse (AODA)
- 2. Poverty*
- 3. Mental Health
- 4. Housing/Physical Activity



Prioritization

FCHD Community Health Priorities

Priority One: Alcohol and Other Drug Abuse/AODA

Priority Two: Mental health awareness and suicide prevention



Health Equity:

Research continues to show that the color of your skin, where you live, and how much you make are major predictors of your health, and your chances of reaching your full health potential. Research has also continued to show that we, as a community, can change these factors and have positive outcomes on health. That is the work of *health eauity*. and there is a lot of evidence behind it (Wisconsin Public Health Association, 2019).

After reviewing data, members were asked to rank their top four priority areas, based on a group process. Results were calculated from compiling all sticky notes into ten general categories. These categories and the outcome of the prioritization process can be seen below in the chart. Alcohol and Other Drug Abuse continues to be a clear concern with Poverty and Mental Health determined to be close second place areas of importance.

Many of the other factors were still of some concern for the group. However, the group determined their importance to be less of a concern based on recent community activity, available resources, individual/community impact, and local, state, and national data than the top four priority areas.

The health department will continue to engage in past coalitions and initiatives in all the focus areas, but the 2020-2025 Community Health Improvement Plan will center around the top three concerns identified by the partners. The top two health priorities will continue to be AODA and MH with poverty interwoven into both priority areas as health equity as an agenda item.

Rank	Priority Areas	Total
1	Alcohol and Other Drug	17
2	Use Poverty	12
3	Mental Health	11
4	Housing	9
4	Physical Activity	9
5	Tobacco	6
6	Access to Care	5
7	Obesity	4
8	Education	3
9	Community	1
9	Private Well	1
10	Jobs	0

Community Forum Summary 2019 Health Priorities

The Wisconsin Division of Public Health conducted a Strengths, Weaknesses, Opportunities, and Challenges (SWOC) analysis on each of our Core Data Sets at our Community Forum in September of 2019. This allowed community members from a wide variety of agencies and organizations to give input on the health needs and issues facing Florence County. Also comments were added from community feedback provided during the CHA process. The combined common themes discussed for each of the core data sets are below.

Health Priority 1: Alcohol and Other Drug Abuse

Strengths	Weaknesses
• Florence County Alcohol and Other Drug Abuse (AODA) and Mental Health Coalition	• Previous Sheriff's Deputy trained as a Drug Recogni- tion Expert has not been replaced
• Law Enforcement Programs (D.A.R.E. and Canine	Drug possession arrests increasing
Units)	Lack of treatment facilities nearby
Social Host Ordinance	• Treatment costly
Keeping It Real Program	• Alcohol compliancy checks are not being completed
• Availability of Narcan	
Opportunities	Challenges
• Increase support groups and programs for children of addicts and/or inmates	• Low numbers effect reporting of and availability of data
• Increase use of social media regarding drug abuse and alcohol affects	 Increased use of methamphetamines, heroin, and opiates
Increase outpatient treatment numbers	• Legalization of marijuana in bordering state has a

Health Priority 2: Mental Health	
Strengths	Weaknesses
 Establishment of local provider in Florence County School-based counseling in school district Suicide and Means Prevention offered to Middle/High School students and teachers annually 	 Limited access to mental health providers/long waiting lists Difficulty finding resources for mental health services Stigma
Opportunities	Challenges
 Focus efforts on different age groups Increase social connectedness Create a "<i>Healthy Behavior Survey</i>" to establish baseline data 	 Youth Behavior Risk Surveys have limits due to small numbers Increase in number of children affected by trauma and abuse Some elderly living in isolation

Community Forum Summary 2019 Health Priorities

Health Priority 3: Built Environment

Strengths	Weaknesses	
ATV/Snowmobile Trails	Limited rental options for county residents	
Natural Environment	High property costs	
Safe Pathways to School	Lack of assisted living facilities	
Economic Development/Housing Committee	Lack of low income housing options	
Safe Housing		
Opportunities	Challenges	
Identify and promote walking trails	• Working class cannot afford current housing prices	
Increase rental properties for low/middle income	High poverty levels	
families	Housing drives job choice	
Increase options for elderly housing/assisted living	Isolation	

Health Priority 4: Active and Safe Living

Strengths	Weaknesses		
• Yoga with or without a Chair offered regulary	• Food insecurity among Florence County youth		
• Strong Bodies and Walk with Ease offered	Trauma Informed Cared		
• Safety Swim Lessons for 3rd grader class	Community Connectedness		
• Annual bike safety class for 4th grade class	• High obesity rates in both children and adults		
Hunter/Gun Safety Class	One fitness facility		
Keyes Peak Ski Hill Steps	Limited resources		
Opportunities	Challenges		
Increase activities for gym class/open gym	• Poverty		
Develop ski team	Access to classes		
• Increase outlets for activities (i.e. walking path)	• Transportation		
Provide positive activities for youth	• Cost		
• Create a Active and Safe Living Task Force to re- place disbanded Children & Family Coalition	• Location		

Community Forum Summary 2019 Health Priorities

Other Health Issues:

Environment and Occupational Health

Strengths

- Tests have shown that there are pocket areas in Florence County that contain high arsenic levels
- Great to have water lab at the health department to test bacteria/nitrate instead of outsourcing through priority mail to DNR/DATCP
- Zoning also uses water lab at the county to test surface water: streams, lakes, and rivers. Scott said that the water tables are changing– more awareness as of five years ago
- Broadband more access for rural areas due to grant money
- Physical environment:
 - Lead:
 - 0% Poisoning reported
 - Two elevated blood lead levels reported within last 10 years
 - Retired health officer/county nurse of 37 Years- can count on one hand how many lead cases



Opportunities

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- Arsenic water cost money to have water tested
- Make population aware of flooding wells
 - Radon:
 - 55% in Florence
 - 50% in state
 - Time sensitive
 - Low voltage fan-contractors build-in now
 - Remediation is in-expensive
- 2017 Wetland Grant-not supported
 - Connect trails
 - Zoning will be re-applying for this grant
- Bike paths/walking paths-huge issue to find
 - Motorized ATV- big industry
 - Steps at Keyes Peak Ski Hill/cement path for elderly
- Expand roads to include 10"bike path-
 - Shot down in the past- not supported
 - Match grant
 - More roads to plow
- Physical Environment:
 - Lead:
 - Old homes- lead based paint might become a problem with selling homes from elderly
 - Gap: one contractor in Florence County for lead based paint- needs funding
 - Data only goes so far- need community awareness

Chronic Disease

Strengths

- Testing more when people are experiencing symptoms of Lyme's Disease
- Provide hand outs- public information on chronic diseases
- Tick Kit Distribution– Used funding that we found in FCHD budget. Received \$1 donation for on-going prevention measure
- Cancer rate lower in Florence County than State



Opportunities

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- Elderly set in their ways- promote the benefit of drinking water
- Lyme's Disease:
 - Five percent higher than the state
 - Local clinic specialized training
 - We live in a "tick habitat"
 - Lung Cancer– Florence County 2nd highest in the state
- Higher rate of obesity, increase awareness
- Convince elderly to have blood pressure check- complaints of sleeping all the time
- Heart Disease- high in Florence 135 vs. 91
- Premature death
 - Florence: 9,081
 - WI: 6,320
- Self injury-looked at separately from suicide
- Accident- reported back to the county of residence
- 15% Florence residents reported they have poor health

Built Environment

Strengths	Opportunities	
• Across the border in Michigan had very nice hous within a \$130k price range	• Older population selling homes– Florence housing overpriced– too much rehab	
ALL L	• Try to make available affordable housing for young- er population– working families	
	 Elderly staying in their own homes – no where to locate too 	
	Mid-priced homes hard to find	

Community Forum Summary 2019 Health Priorities

Other Health Issues:

Social Determinants of Health

Strengths

- Any county will dip, comes back up within 10 years
- Observing rural communities:
 - Meals on Wheels
 - Transport seniors to doctor appointments and shopping
 - Lots of cooperation for access
- Education:
 - Advance grad-higher than the state
 - Some college- two year trade programs
 - Succeeding in Florence
 - Access w/school NWTC & Bay
 - Internship- keep young people working in area
 - Working in trades- very important
 - Devoted teachers in Florence- very dedicated
 - Graduation rate- success in community

Opportunities

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- Disappointed in younger group leaving– economic development
 - Housing aid- state recovery program
 - Disability numbers:
 - self reported
 - Florence higher– surprising (18.5%)
 - Not serving as many disabled through the door- no outreach
 - Does community think that they need a diagnosis to receive resources from ADRC
 - 4th grade reading
 - doesn't reflect what test results show in elementary school
 - Rate connects with poverty
 - Social-data is spread out just to get enough
 - Uninsured #:
 - Working- childless adults doesn't offer insurance through employer
 - Self employed







Physical Activity

Strengths

- Student walk– Bobcat Loop (one mile long)
 - Start in front of the high school
 - Walk to elementary on sidewalks
 - End in front of high school, where you started
- Bus Golden Living Center residents to Keyes Ski Hill
 - Walk cemented path to stairs

Opportunities

- Create bike organization
 - Enjoy sociability
 - St. Germaine-Lakeland has a bike organization
 - Rise money
 - Maintain trail
 - Costly
 - Personal money donations
 - Bike signs
 - Map out walking trail
 - Historical society
 - Over 30 key buildings committee picking 10 buildings (can't use them all)
- Fitness- shows very low rate
- Make local residents aware of events
- Not enough volunteers or same volunteers
- Group people wearing too many hats





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Access to Care

Strengths

- No Mental Health providers- In last CHA survey
 - School "on couch"
 - ADAPT Clinic in Niagara for assistance
 - Pathways to Healing Counseling Center
 - Crisis line

Opportunities

No dentist

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- Need two dentists in our county to be considered accessible
- Recognized as a Healthcare shortage area

Healthy Growth and Development

Strengths

- Peer support relationship
 - Kristin Nelson, AODA Recovery Peer Support
 - Relationship building- TORPEDO's
- Keeping it Real
- Choosing the best
- QPR- great turn out at high school
 - Adult & student age classes with suicide tools
 - Volunteer based
 - Role playing/practice skills



Opportunities

- Behaviors
 - Adverse Childhood Effects Study (ACES) ACES score= poor health, drug use, suicide attempts, sexual abuse
 - Medical evaluation
 - Ten question questionnaire
 - Childhood trauma
 - Being aware of affects of ACES score helps to create prevention in areas
 - Look at coping strategies & support systems
 - Need to look at improving protective factors
 - Building relationships- adverse child experiences community support

Tobacco

Strengths

- Florence County Health Department is part of the Northwood's Tobacco Free Coalition
- Tobacco compliancy checks conducted on a yearly basis
- Tobacco presentations to middle school/high school students
- Tobacco presentation to elementary school staff
- Tobacco behind the counter resolution
- Tobacco 21 campaign awareness



Opportunities

Vaping:

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- 23% increase in the past 30 days
- Increase of use everywhere
- Products market children with flavored e-juices
- Resolution to legislators having tobacco products put behind the counter to reduce underage sales
- Easy to hide
- Students think cigarettes are nasty and smelly
- Odorless
- Want youth connected to them– make it affordable for teens to purchase
- Tobacco:
 - One out of three eight year olds admitted smoking cigarettes
 - Easy access if their parents are smokers
 - Does this mean that they are using marijuana too?
 - Smoking has decreased, but vaping, edibles, and chewing tobacco are popular and easy to conceal

Community Forum Summary 2019 Health Priorities

Other Health Issues:

Alcohol and Other Drug Abuse

Strengths

- First drink reported before 13 years old- Less than 5% which is lower than state
- County taking hard stance against marijuanaincluding bar owners
 - No recreational marijuana use
 - No stores in Florence County may sell marijuana products
 - K-9 in schools will be a great help
- AODA w/ school work on creating counseling awareness policy: Model Tobacco Free Schools
 - Counseling/screening-work w with and educate student
 - Missing out on education by using punitive measures such as suspension/expulsion
 - Three step process
 - Make Sherriff's Department aware of the situation- minor in possession
 - On the October school board agenda
 - Good outcomes for other schools
- County in support of:
 - All nicotine products be behind the counter
 - Tobacco 21– move age to 21

Opportunities

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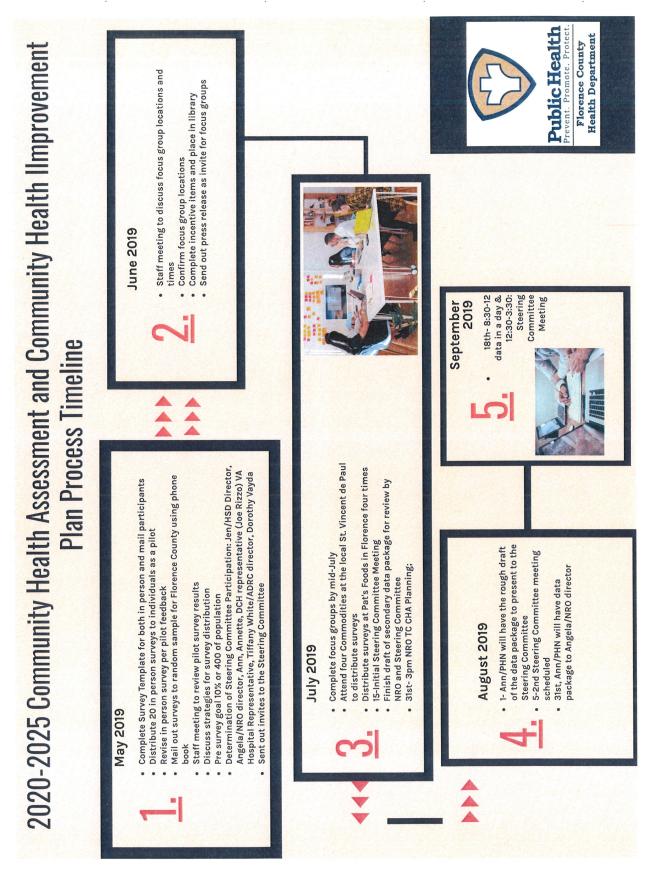
- Alcohol rate in Florence County & Wisconsin higher than U.S.
- Currently forty-five bar and liquor stores in Florence
 - Work to decrease access to alcohol
 - Binge drinking up to 20% in students between 9-12 grade.
 - Drug use is not declining
- Meth easier to make- very high rate
- Marijuana Use:
 - Big problem in school
 - Isn't captured in the YRBS Survey
 - Peer pressure
 - Talked about in school- what was done over the weekend
 - Decriminalized kids think it isn't a bad
 - Used medically
 - Legal in bordering state
 - Educate kids- still a drug
 - Stop a car find marijuana most likely find Heroin too
 - Generational Trauma
 - Orientation normal to experience
 - Applying to school







Appendix A: Timeline



Appendix B: Community Health Survey



Florence County Health Department



501 Lake Ave PO Box 410 Florence, Wisconsin 54121 715-528-4837 A.Seibold, RN, MS Health Officer/Director

June 17, 2019

Florence County Health Department Florence County Community Health Assessment Survey

Dear Florence County Resident:

While a great deal of attention has been paid in recent years to the harmful effects of prescription drugs, alcohol, and lack of mental health services on our community and its' citizens' health, less discussion has taken place about the impact of legal substances like tobacco/e-cigarettes, disease prevention, oral health, nutrition, climate change, injury and violence, physical activity and reproductive/sexual health on the citizens of Florence County. To get an idea of what our county's residents' habits and opinions are with regard to these issues, the Florence County Community Health Assessment Steering Committee has designed a questionnaire which is being sent to a randomly-selected sample of 500 county residents of all ages and backgrounds. The results of this survey will be used to decide whether a significant problem exists in our community with regard to these issues and what, if any, sort of action should be taken.

Enclosed with this letter you'll find a copy of the questionnaire along with instructions on how to complete it and a postage paid envelope to send it back in. The questionnaire takes about 10 to 15 minutes to complete. Please take a few minutes to complete this questionnaire and send it back to us; all responses are confidential, and while there is some demographic information on the questionnaire to help us identify any particular groups that need specific services, your responses are completely anonymous.

Getting a realistic picture of the impact that the above issues are having on our community will help the Florence County Community Health Assessment Steering Committee know what sort of services we can implement to better serve our community. Thank you for being part of making Florence County a healthier place for our children, those we love, and ourselves.

Sincerely,

Florence County Health Department

Connecting you to a Better Life!

Resource: University of Kansas, Center for Community Health and Development (2018). *The community toolbox*. Retrieved from <u>https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/conduct-surveys/checklist</u>

Appendix B (continued): Community Health Survey

FLORENCE COUNTY COMMUNITY HEALTH SURVEY

Please take a few minutes to complete the survey below. The purpose of this survey is to get your opinions about community health issues in Florence County. The Florence County Health Department will use the results of this survey and other information to identify the most pressing problems which can be addressed through community action. If you have previously completed a survey, please ignore this. Remember... your opinion is important!

1. In the following list, what do you think are the three most important factors for a "Healthy Community?"	#1	#2	#3
Good place to raise children	0	0	0
Low crime / safe neighborhoods	Ο	0	0
Low level of child abuse	0	0	0
Good schools	Ο	0	Ο
Access to health care (e.g., family doctor)	0	0	0
Parks and recreation	0	0	0
Clean environment	0	0	0
Affordable housing	0	0	0
Excellent race relations	0	0	0
Good jobs and healthy economy	0	0	0
Strong family life	0	0	0
Healthy behaviors and lifestyles	0	0	0
Low adult death and disease rates	0	0	0
Low infant deaths	0	0	0
Religious or spiritual values	0	0	0
Other (Please be specific)	0	0	0
2. What kind of place do you usually go to when you are sick or nee	ed advice a	bout	your

O A doctor's office	 O VA Clinic
O A clinic	O An emergency room

O An urgent care clinic	
O Other	

3. How do you pay for your healthcare? Check all that apply.	
Health insurance (e.g., private insurance, employee sponsored)	0
Medicare	Ο
Medicaid, Medical Assistance (MA)	0
Veterans' benefits	0
Indian or Tribal Health Service	0
No health insurance coverage	О
Private Pay (Cash)	0

4. In your opinion, what do you think are the <u>THREE</u> most important *health problems* in your community? (Those problems which have the greatest impact on overall community health.) Cancer Infectious Disease (i.e. hepatitis, TB etc.)

Cancer	Infectious Disease (i.e. hepatitis, TB etc.	
Child Abuse/Neglect	Mental Health Problems	
Dental Problems	Motor Vehicle Crash Injuries	
Diabetes	Rape/Sexual Assault	
Domestic Violence	Respiratory/Lung Disease	
Fire-arm related Injuries	Sexually Transmitted Disease	
Heart Disease and Stroke	Suicide	
High Blood Pressure	Teenage Pregnancy	
HIV/AIDS	Infant Death	
Homicide	Other	
Aging problems (e.g. arthritis hearing	(vision loss otc)	

___Aging problems (e.g., arthritis, hearing/vision loss, etc.)

Florence County Health Department 5/2019

Appendix B (continued): **Community Health Survey**

FLORENCE COUNTY COMMUNITY HEALTH SURVEY

_Alcohol AbuseRacism	Overeating
	tbelts/child safety seatsNot Exercising
Unsafe SexEating unheat	
_Not getting immunizations or shots to prevent disea	ses
6. Are you:	7. Your age group:
O Male O Female O Transgender	O 18-24 O 25-34 O 35-44 O 45-54
O Other	O 55-64 O 65-74 O 75+
8. Which of the following best describes you?	9. Your education level:
(Choose all that apply)	O Less than High School
O White/Caucasian	O High school diploma/GED
O African American/Black	O Trade/Vocational school
O Asian, Pacific Islander	O Some college
O Native American, Alaskan Native	O Associate degree
O Hispanic/Latino	O Bachelor's degree
O 0ther	O Graduate/Professional degree
10. Are you currently	11. Household income per
O Employed (full or part-time)	year:
O Self-employed	O Less than \$20,000
O Unemployed/out of work	0 \$20,000-\$34,999
O A homemaker/stay-at-home parent	O \$35,000-\$49,999
O A student	O \$50,000-\$74,999
O Retired	O \$75,000 or more
ODisabled	
O0ther	
12. How many people are in your	13. Do you speak a language other than English at home? O Yes O No
household? # under 18 years old # over 55	at home? O Yes O No If yes, which language?
	II yes, which language:
14. Your township is	15. What is the best way to inform the public?
	NewspaperRadioSocial Media
	Department WebsiteOther
low did you get this survey: (Check One) Wor	kplace Mail Church Grocery Store
Personal Contact Community meeting	
lease return completed surveys to the address below by ommunity project, please contact us at the number belo	y July 31, 2019. If you would like more information about th ow.
Florence County Health Department	Phone: 715-528-4837
501 Lake Avenue, P.O. Box 410	Fax: 715-528-5269
Florence, WI 54121	Web site: www.florencecountywi.co

Thank you very much for your response!

Florence County Health Department 5/2019

Appendix C Community Survey Evaluation

The 2019 Florence County community survey showed when income and education were considered for health related questions. Respondents with income less than \$25,000 per year reported poorer health, less exercise, and less insurance coverage more frequently than those respondents with income above \$25,000 per year.

Age Results might have been different if more of a younger age group would have been captured in the survey. Future outlets to include in the next survey might include the following:

- Food Fun & Fitness (Adults)
- WIC Clinics (more than one)
- Focus Groups (increase incentives and more promotion)
- Terrace Apartments (door to door on evening or weekend)
- Child Support Office
- School Open Houses
- Parent/Teacher Conferences
- Sporting events
- Local fitness center
- Human Services Department



Appendix D

Florence County Community Health Survey Summary of Results 2019

1. In the following list, please rank the <u>THREE</u> most important factors for a "Healthy Community".

	# of responses (n=143)	% responses
Good place to raise children	32	35%
Low crime/safe neighborhoods	41	45%
Low level of child abuse	3	3%
Good schools	39	43%
Access to healthcare (e.g., family doctor)	26	29%
Parks and recreation	2	2%
Clean environment	17	19%
Affordable housing	14	15%
Excellent race relations	3	3%
Good jobs and healthy economy	37	41%
Strong family life	22	24%
Healthy behaviors and lifestyles	17	19%
Low adult death and disease rates	1	1%
Low infant deaths	0	0%
Religious or spiritual values	17	19%
Others (please specify)	2	2%

Summary: Question one requested that participants rank the three most important factors for a "*Healthy Community.*" Out of the 143 surveys completed only 91 participants answered the question correctly. Therefore, the main limitation was the question lead in inaccurate results due to incorrectly answered items.

Florence County Community Health Survey Summary of Results 2019

2. What kind of place do you usually go to when you are sick or need advice about your health?

	# of responses (n=143)	% responses
A doctor's office	96	60%
A clinic	23	15%
VA Clinic	16	11%
An emergency room	14	9%
An urgent care clinic	8	4%
Other	1	1%

Summary: The responses to the survey indicate that over half of participants receive their health care at a doctor's office. A majority of other participants receive care for a clinic or the VA, whereas only 14% of participants receive health care services at an emergency room, urgent care, or other.

3. How do you pay for your healthcare? Check all that apply.

	# of responses (n=143)	% responses
Health insurance (e.g., private insurance or employee sponsored)	88	40%
Medicare	74	31%
Medicaid, Medical Assistance (MA)	17	8%
Veterans' benefits	19	8%
Indian or Tribal Health Service	1	1%
No health insurance	2	1%
Private Pay (Cash)	25	11%

Summary: According to the responses of the Community Health Survey, less than half of the participants have private health insurance to pay for health care services, whereas almost half pay for health services through the use of Medicare and Medicaid, or Veteran's Benefits. Only 1% of county residents reported having no coverage to pay for health care services.

Florence County Community Health Survey Summary of Results 2019

4. From the list below, place a check on the <u>THREE</u> most important *health problems* in your community. (Those problems which have the greatest impact on overall community health)

	# of responses	% responses
	(n=143)	
Cancer	77	54%
Child abuse/neglect	13	9%
Dental problems	25	17%
Diabetes	36	25%
Domestic violence	16	11%
Fire-arm related injuries	0	0%
Heart disease and stroke	46	32%
High blood pressure	28	20%
HIV/AIDS	0	0%
Homicide	0	0%
Aging Problems (e.g., arthritis, hearing/vision loss, etc)	49	34%
Infectious disease (e.g., hepatitis, TB, etc.)	4	3%
Mental Health problems	49	34%
Motor vehicle crash injuries	10	7%
Rape/sexual assault	1	1%
Respiratory/Lung disease	12	8%
Sexually transmitted disease	1	1%
Suicide	10	7%
Teenage pregnancy	7	5%
Infant death	0	0%
Other	0	0%

Florence County Community Health Survey Summary of Results 2019

5. From the list below, place a check on the THREE *behaviors* that have the greatest impact on overall health of the people in your community.

	# of responses (n=143)	% responses
Alcohol Abuse	95	66%
Tobacco Use	44	31%
Drug Abuse	95	66%
Unsafe Sex	4	3%
Not getting immunizations or shots to prevent disease	21	15%
Racism	5	3%
Dropping out of school	7	5%
Not using seatbelts/child safety seats	6	4%
Eating unhealthy foods	43	30%
Overeating	31	22%
Not using birth control	2	1%
Not exercising	42	29%
Other	0	0%

6. Are you:

	# of responses (n=143)	% responses
Male	41	29%
Female	101	71%
Transgender	0	0%
Other	0	0%

Florence County Community Health Survey Summary of Results 2019

7. Your age group:

	# of responses (n=143)	% responses
18-24	3	2%
25-34	6	4%
35-44	9	6%
45-54	11	8%
55-64	37	26%
65-74	43	30%
75+	32	22%

8. Which of the following best describes you? (Check all that apply)

	# of responses (n=143)	% responses
White/Caucasian	139	97%
African American/Black	0	0%
Asian, Pacific Islander	0	0%
Native American, Alaskan Native	4	3%
Hispanic/Latino	3	2%
Other	0	0%

Florence County Community Health Survey Summary of Results 2019

9. Your education level:

	# of responses (n=143)	% responses
Less than High School	4	3%
High School diploma/GED	47	33%
Trade/Vocational School	12	8%
Some college	32	22%
Associate Degree	11	8%
Bachelor's Degree	21	15%
Graduate/Professional Degree	15	10%

10. Are you currently...

	# of responses (n=143)	% responses
Employed (full or part-time)	43	30%
Self-employed	4	3%
Unemployed/out of work	3	2%
A homemaker/stay-at-home parent	6	4%
A student	2	1%
Retired	80	56%
Disabled	9	6%
Other	0	0%

Florence County Community Health Survey Summary of Results 2019

11. Household income per year:

	# of responses (n=143)	% responses
Less than \$20,000	29	20%
\$20,000-\$34,999	32	22%
\$35,000-\$49,999	17	12%
\$50,000-\$74,999	24	17%
\$75,000 or more	22	15%

12. How many people are in your household?

	# of responses (n=143)	% responses
Total number in your household	50	-
# under 18 years old	65	-
# over 55	173	-

13. Do you speak a language other than English at home?

	# of responses (n=143)	% responses
Yes	7	5%
No	131	92%
If yes, which language? Spanish x2; German x1; Sign x1		

14. Your township is:

	# of responses (n=143)	% responses
Aurora	21	15%
Commonwealth	9	6%
Fence	2	1%

Florence County Community Health Survey Summary of Results 2019

14. Your township is continued:

	# of responses (n=143)	% responses
Fern	8	6%
Florence	73	51%
Homestead	13	9%
Long Lake	3	2%
Tipler	3	2%

15. What is the best way to inform the public?

	# of responses (n=143)	% responses
Newspaper	60	42%
Department website	9	6%
Radio	38	27%
Social media	54	38%
Other	12	8%

How did you get this survey: (Check one)

	# of responses (n=143)	% responses
Workplace	15	10%
Mail	51	37%
Church	0	0%
Grocery Store	22	15%
Personal Contact	13	9%
Community Meeting	8	6%
Other	23	16%

Appendix E

Florence County Focus Group Flyer—Chapin Heights

We Want to Hear From You!

If you are over 18 years of age & a Florence County resident we want to know what you think the community health issues are in Florence County?

Focus Group Discussion

- . Insurance Coverage
- . Access to Care
- . Healthy Communities
- . Community Needs

Monday, July8, 2019 from 1-3pm

Chapin Heights Building B Lounge (Bingo room) A gift basket raffle will be held for those in attendance.

Your opinion is important to us!

Sponsored by: The Florence County Health Department

Florence County Focus Group Flyer—Library

We Want to Hear From You!

If you are over 18 years of age & a Florence County resident we want to know what you think the community health issues are in Florence County?

Focus Group Discussion

- . Insurance Coverage
- . Access to Care
- . Healthy Communities
- . Community Needs

Thursday, July 11, 2019 from 6-7pm

Florence County Library Conference Room A gift basket raffle will be held for those in attendance.

Your opinion is important to us!



Sponsored by: The Florence County Health Department

Florence County Focus Group Responses

7/8/19 – Chapin Heights

- 4 Participants 1 Left about halfway during conversation
- 1. Exercise What do you want to see?
- No responses to questions but comments made:
- Not many sidewalks/good, clear sidewalks to use
- Lady fell due to condition of side walk
- "There's not a lot around here for old folks to do."
- Activity Level
- Did not know there was yoga offered on site
- Some had to work so could not attend anyway
- Tough to have activities in the winter

2. Access to Healthcare?

- No Rides
- Example: called ADRC said it was meals on wheels day so they couldn't get a ride that day
- Bad quality of care
- Used to more populous areas with lots of transportation and available healthcare options
- Lack of insurance
- Eye/Dental care
- Gentlemen asked for information on eye care but hasn't received anything yet
- VA doesn't cover vision or dental

3. Would you know where to go for care?

- Look for recommendations
- Online if they have internet
- Vision place in Florence if insurance covers , no longer open (per Ann)

Florence County Focus Group Responses

5. Programing on Site

- "A gym would be nice."
- Walking assistance so people could get out and walk
- If they don't have to travel to get somewhere, they may be more willing to attend something

6. Best ways to contact/get out information?

- Internet if available
- Phone
- Letter in mail
- Children will help out

7. Other issues to addressed

- Mold in building
- Walls, basement
- Told building manager is probably aware

8. Noticeable changes in Florence

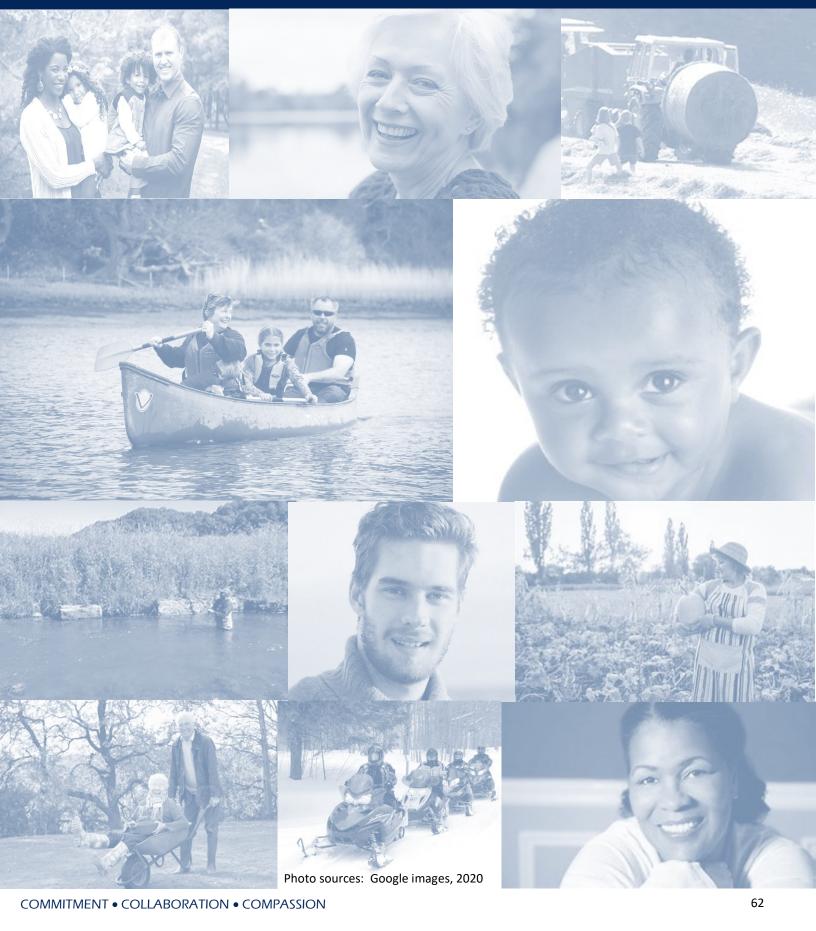
- Stores
- Pats, Dollar store
- New buildings
- More accessible
- Affordable when compared to other places similar (rural areas)

9. What does Florence do well?

- Keeping in touch with the senior citizens
- "ADRC is a big help, especially with the meals on wheels."



Community Health Improvement Plan Florence County, Wisconsin





Florence County Community Partners

Florence County Health Department would not have been able to complete the Community Health Improvement Plan (CHIP) without the input, hard work and dedication from our many community partners. Many agency representatives, community partners, and community members participated in a variety of platforms (i.e. community health surveys, focus groups, and meetings). We would like to sincerely thank the following agencies and individuals:

Jen Steber	Florence County Human Services; Director
Jenn Robinson	Florence County Human Services; Social Worker
Ann Price	
Annette Seibold	Florence County Health Department; Health Officer
	Florence County Health Department; CHS
	Florence County Health Department; Admin. Assistant
	Florence County Health Department; Student Intern
	Community Member; Retired Registered Nurse
	Florence Board of Health; Community Volunteer
	Florence County Board of Health Chairperson
Peyton Prevost	TORPEDOs - Florence High School student
	TORPEDOs - Florence High School student
Tiffany White	
	ADRC: Information and Assistant Specialist
	Florence County Land Conservation; Administrator
Meg Dallapiazza	UW Extension; 4-H Youth Development Agent
Teresa Chrisman	
David Gribble	Florence County Sheriff's Office; Deputy
Donna Fayas-Johnson	Caring House
Kayla Lehmann	
Sara Foster	Florence County School District
Wendy Gehlhoff	Florence County Economic Development
	Northern Lake Community Clinic (Lakewood)



Community Health Improvement Plan

What is a Community Health Improvement Plan: The Community Health Improvement Plan (CHIP) is a long-term, systematic plan that address issues that have been identified by the nation, state and local Community Health Assessment (CHA).

The Purpose: The purpose of the plan is to describe how the health department and community partners and stakeholders will engage the community it serves to work together to improve the health of the population in the jurisdiction that Florence County Health Department serves.

<u>Who uses the Community Health Improvement Plan:</u> The CHIP can be utilized by community, partners, and stakeholders to set priorities, direct the use of resources, and to develop and implement projects, programs, and policies. The CHIP does not replace or supersede concurrent action plans or work plans utilized by the health department or any of their community partners.

Who is responsible the Community Health Improvement Plan: Florence County Health Department has been the lead organization responsible for organizing and coordinating the community health improvement process. However, it does not take credit for owning the process nor is it the sole entity responsible for CHIP implementation. The Florence County Health Department has actively engaged the community and it's partners with the intent on developing a CHIP that complements the various other action planning efforts and/ or documents produced by other community partners and stakeholders within the jurisdiction it serves.

Commitment: Florence County Health Department is committed to this effort, as part of a larger initiative to develop collaborative partnerships with community stakeholders, which is noticeable through its work to build capacity within the community to address key population health issues identified in the Community Health Assessment process. Through this commitment and the CHIP process Florence County Health Department is able to foster responsibility and ownership of the plan with partners while also developing and strengthening partnership.

Public Health Accreditation Board (PHAB) Standards & Requirements: The PHAB Standards & Measure guidance were utilized in the development of Florence County Health Department's CHIP process to ensure that all criteria were met.

Standard 5.2: Develop and implement community health improvement strategies collaboratively.

Reaccreditation Requirements:

- \Rightarrow Desired measurable outcomes or indicators of health improvement and priorities for action
- ⇒ Considerations of social determinants of health, causes of higher risks and poorer health outcomes and health inequities
- ⇒ Plans for policy and system level changes for the alleviation of identified causes of health inequity. Policy changes may address social and economic conditions that influence health and health equity including housing, transportation, education, job availability, safety and zoning.
- ⇒ Designation of the individuals and organizations that have accepted responsibility for implementing strategies.



Community Health Improvement Plan

<u>Alignment with State Health Improvement Plan:</u> Wisconsin § DHS 140 requires that "all local health departments shall assume responsibility for participating in community health assessments, collecting, reviewing and analyzing data on community health. Local health departments are also responsible to organize and develop a Community Health Improvement Plan" under the same state statue. Assessments and plans are submitted to the Wisconsin Department of Health Services. Submissions should identify which focus areas, indicators, and strategies align with the State Health Improvement Plan (SHIP).

Florence County Health Department has aligned with three focus areas selected by the state (Alcohol and Other Drug Use; Mental Health; ; and Chronic Disease Prevention and Management) and has determined to specifically address the priority populations of the aging population and adolescent health.

Further aligning with the SHIP, Florence County Health Department has adopted the framework that identifies cross-cutting factors that influence health status across all priority areas. These are: Access to Healthcare; Social Determinants of Health; Built Environment; Public Health System; Health Behaviors; and Health Equity.

Health Equity: The attainment of the highest level of health for *all* people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health care disparities.



This icon denotes that a strategy is likely to reduce health disparities

Social Determinants of Health: Nearly every is impacted by social determinants of health. The following examples influence health equity in positive or negative ways: Income and social protection, education, unemployment and job security, work life conditions, food security and housing which will be all discovered during this process.

Public Health System & Health Behaviors: The public health system is made up of governmental agencies and non-governmental organizations working to promote health and prevent disease and injury to the entire community or within the vulnerable populations. Prevention addresses health problems before they begin. Health behaviors are actions people take to maintain health, or actions people take that may harm their health or the health of others. These behaviors are influenced by family, community and the social determinants of health (social, economic and physical environment).

Access to Healthcare: The healthcare system pays for and delivers clinical health care services to meet the needs of the patient. Access to health care means having timely use of comprehensive, integrated and appropriate health services to achieve the best health outcomes.

Strategies that are aligned with some of the strategies identified in the SHIP will be indicated by the icon below. These strategies are considered evidence-based and "best practice" through the systematic review of available research.



This icon denotes alignment with the Wisconsin SHIP.



Florence County Health Department and the voluntary steering committee utilized the results of the Community Health Assessment, participant feedback, supporting epidemiological data, and consideration of the state focus areas to determine what the priority areas were. Four priority areas were chosen and were vetted by the Florence County Health Department and the steering committee participants during this meeting.

Strengths, Weaknesses, Opportunities & Challenges (SWOC)

Analyses of each priority was conducted by using the SWOC model. SWOC provides the opportunity to identify common themes among priority areas, as well as challenges needing to be addressed through thoughtful community health improvement planning. Goals and strategies were gathered, reviewed, and agreed upon by the Steering Committee during the afternoon session of the Data In a Day presentation in September 2019. Analyses using the SWOC process were listed for each priority area (see pages 36 & 37 of the CHA). Strategy development will take place within community and partner coalitions that already exist for the purpose of reducing publication.

Alcohol and Other Drug Abuse and Mental Health strategies are developed and coordinated through the Alcohol and Other Drug Abuse (AODA) and Mental Health (MH) coalition. Partners and stakeholders are often actively participating in strategic plans that are specific to their area of expertise. Currently there are a wide variety of programs and services for this population but it is recognized that continued coordination of these activities must continue in order to ensure collective impact in policy and programming options for rural communities with limited resources such as Florence County.

Built Environment issues include both social and physical determinants of health. The impact of resources to Florence County have been consistently recognized by members of the community, partners, and stakeholders and strategies to address these issues continue to be cross-cutting with occupational status, educational attainment, access to health care, and poverty levels. Existing and new coalitions continue to coordinate and strategize to decrease the risk factors for poverty and low socioeconomic status.

Active and Safe Living related to Chronic Disease and Prevention measures have been identified by the community, partners, and the Steering Committee as an area that is cross-cutting. Group consensus was to develop a task force that would coordinate responses to identify gaps, priorities, and opportunities while working to implement systems and environmental changes at the community level to prevent the onset of chronic conditions and adverse health outcomes due to injuries. Strategies will be developed and implemented by the new Active and Safe Living Task Force in conjunction with community partners.



Goals & Strategies

CHIP 2025 Targets CHIP targets were adopted, where applicable, from current targets for community health improvement. Many targets were derived from the 2020-2025 Florence County CHA Health Priorities , Healthiest Wisconsin 2020: State Health Plan, and/or Healthy People 2020 goals and objectives. If a target was not previously addressed, Florence County Health Department applied a 10% improvement which is based on the target-setting methodology utilized across many federal Healthy People 2020 objectives.

Next Steps (PHAB Reaccred 5.2.1 e) The CHIP is designed to assist in coordinating action through community health improvement planning. With the implementation of this plan, Florence County Health Department enters into the action phase of the MAPP process. This phase includes the planning, implementation, and evaluation of the action plans for each of the identified priority areas. These action plans outline the activities, key partners, and evaluation measures for each identified priority issue.

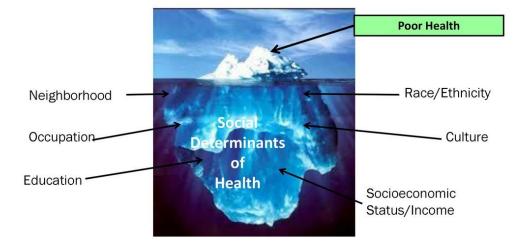
Achieving improved health outcomes will take time and effort as the community transitions from planning to coordinated action. Florence County Health Department will formally evaluate the progress made toward goals each year and will release an annual update detailing progress made. Throughout the year, however, Florence County Health Department will monitor progress and update the plan as necessary. Florence County Health Department may need to reevaluate strategies based on changing resources and leverage additional assets to assure that goals are met. The action phase of this plan is an ongoing process that allows Florence County Health Department to evaluate the effectiveness of its efforts and modify its course of action as community health needs evolve.



The Social Determinants of Health: A Broader View

Addressing broader socio-economic factors is crucial to improving the health of the entire state as well as Florence County's population. Florence County Health Department recognizes the importance of this process and kept this in mind when addressing priority populations and outlining specific targeted interventions for the community. Florence County used this process to prioritize strategies that foster a healthy community through environmental, policy and systems changes. The purpose of these broad interventions is to increase access to opportunities to be healthy were we live, work, and play.

Florence County Health Department, as previously noted, has established four health priorities that are listed in the CHIP: Alcohol and Other Drug Abuse, Mental Health, Built Environment, and Active and Safe Living. In addressing these focus areas, Florence County is committed to pursuing additional cross-cutting strategies that promote health and health equity for all Florence County residents. In addition, Florence County Health Department is committed to addressing the broad social and economic factors as we continue to plan and coordinate interventions to improve health in Florence County. (PHAB Reaccred 5.2.1 a)



The Problem Runs Deep

Diagram credit: Summit County Health Department, Ohio . Accessed 2019



The Social Determinants of Health: A Broader Context

The following is a list of evidence-based strategies that the state of Wisconsin has identified as potential interventions to address the broader scope of social determinates of health which lead to poor health outcomes in Florence County and the state of Wisconsin. These strategies are meant to promote overarching environmental, policy, and systems changes that will have a positive impact on all four priority issues and beyond.

Although this list of strategies as been specifically chosen by the state of Wisconsin, it is relevant to Florence County and is supported by the research. It is not an all inclusive list or is it meant to be. Florence County continues to identify additional needs, opportunities, and partnerships as a way to increase the impact of efforts in pursuing a more engaged, healthier, and equitable community.

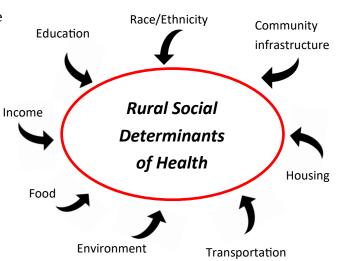


Image credit: www.ruralhealthinfo.org. Accessed 01/2020

EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Reduce discrimination and increase social cohesion		
Legislation that protects minority and vulnerable groups from discrimination and social exclusion	Q	8
Labor market, education and family welfare policies that reduce social stratification		0
Programs and policies that increase opportunity for health social interaction and networking	Q	
Implement zoning strategies to promote mixed income communities	Q	€

Reduce poverty		
Tax credit for seniors and adults with disabilities	2	0
Transitional Jobs program for unemployed jobseekers	Q	
Increase social connectedness among adults/special populations	Q	8



EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Improve education		
Increase early childhood education	R	
Create environments that support learning	<i></i>	
Establish home visiting or parent education programs	\$	0
Increase education beyond high school	4	0

Increase access to quality healthcare		
Reduce financial and non-financial barriers to effective care	R.	0
Increase opportunities for oral health care	R	
Recruit providers to underserved areas	Q	
Recruit and retain high quality workforce	Q	0

Work to ensure affordable, quality housing is available for all Florence County	resid	lents
Improve housing quality	Ż	0
Promote mixed use development	2	9
Support housing rehabilitation loan and grant programs	R	0

Source: Healthiest Wisconsin 2020 Focus Area Profile (2014). Accessed December 2019.



The Social Determinants of Health: A Broader Context

EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Provide early childhood supports		
Improve quality of Head Start and other early education programs, including small- er teacher-child ratios		
Increasing the number of teachers with four-year college degrees in early childhood educa- tion and decreasing staff turnover		
Increasing home visits with families	Q	0

Employment, Income & Poverty		
Assist eligible families in obtaining earned income tax credits through programs that provide free tax filing assistance	Q	0
Employment programs such as vocational training for adults and transitional jobs; jobs and training for the reentry population		0
Provide educational opportunities on financial empowerment such as credit and credit repair strategies, strategies to eliminate debt, developing wealth and assets and planning for retirement	Q.	€
Support mentoring programs		8

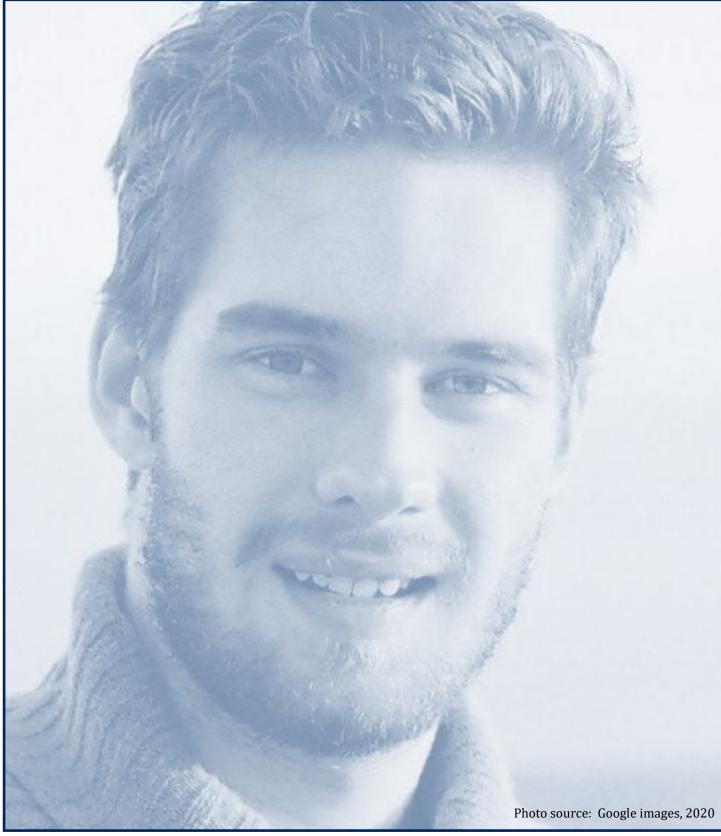
Local / Regional built environment changes to support active living and social connectedness		s
Improve streetscape design and land use policies (such as Complete Streets) that include bike and pedestrian infrastructure	R	
Expand green spaces and parks through renovating or enhancing under-utilized recreation areas, or rehabilitating vacant lots, or abandoned infrastructure	R	0
Ensure the health and equity impacts are considered when making policies regarding the built environment		8

Safe home environments		
Require smoke and carbon monoxide installation in new and existing homes	Q	₿

Source: Healthiest Wisconsin 2020 Focus Area Profile (2014). Accessed December 2019.

PRIORITY ISSUE:

Alcohol and Other Drug Use



Florence County Improvement Process Implementation Plan

Date Created: December 2019

Date Reviewed/Updated: May 2022

ALCOHOL AND OTHER DRUG USE OVERALL AIM

Ensure all adolescents reach optimal health and wellness for successful progression into adulthood

PRIORITY ISSUE: ALCOHOL AND OTHER DRUG USE

GOAL 1: Reduce Substance Use in Florence County

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency
Alcohol Age Compliance Checks	Florence County Sheriff's Office	Annual
Drug Take Back Days	Florence County Sheriff's Office & Health Department	Bi-Annual
Long Term Indicators	Source	Frequency
County Health Rankings	University of Wisconsin	Every 3 Years
Youth Risk Behavior Survey	Florence School District	Every 2 Years
Behavioral Risk Factor Surveillance System Survey (BRFSS)	CDC	Every 2 Years

(PHAB Reaccred 5.2.1)

PRIORITY ISSUE: ALCOHOL AND OTHER DRUG USE

GOAL 1: Reduce Substance Use in Florence County

OBJECTIVE #1: Reduce underage drinking in Florence County as measured by middle/high school students reporting "use in the last 30 days" on the Florence County Youth Risk Behavior Survey.

BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205

Evidence Based Resource: Excessive Consumption: Social Host Liability Law, Drug courts & Minimum drinking age laws as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

		1	1			
Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
1.1 Implement social access media campaign	Ongoing	Marketing tools and staff time	Florence County AODA/MH Coalition Members	Increased education to community on the consequences of social hosting		
1.2 Increase the perceived risk of harm for underage drinking	Ongoing	Marketing tools and staff time	Florence County AODA/MH Coalition Members	Increased education to community on the consequences and dangers of underage drinking	Q	
1.3 Increase support of responsible marketing ad provision of alcohol and other drugs in Florence County	Ongoing	Compliancy check training and staff time	Florence County AODA/MH Coalition Members	Decrease in failed compliance checks and enhanced enforcement of laws prohibiting alcohol sales to minors	Ţ,	
1.4 Improve access to substance abuse treatment/counseling	Ongoing	Licensed professional counselors/ therapists	Florence County AODA/MH Coalition Members	Reduce recidivism, drug use, and incarceration	Q	8

OBJECTIVE #2: Prevent initiation of Tobacco Use by Youth and Young Adults in Florence County.

BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205

Evidence Based Resource: "Tobacco Quit Lines and school-based tobacco free school policies with tobacco education programs" as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
2.1 Increase personal and social skills to help avoid tobacco use	Ongoing	Evidence- based tobacco education program materials and staff time	Florence County AODA/MH Coalition Members and Health Department	Increased skill-building education to adolescents and young adults to reduce youth smoking	Q	•
Opportunities for l	Expansior	n/Enhancem	ent			
Provide school-aged building resource th	-	0 11		n additional resiliency		
Provide youth the opportunity for peer to peer education, skill-building and positive socialization						
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors						
and preventing risky behaviors Expand programming that supports positive activities for your during high risk times, such as after school and during school breaks (out-of-school time programming)						

Florence County Health Department

PRIORITY ISSUE:

Mental Health

Photo source: Google images, 2020

MENTAL HEALTH OVERALL AIM

Promote mental well being and prevent the completion of suicide for all Florence County residents

PRIORITY ISSUE: MENTAL HEALTH

GOAL 1: Reduce suicide deaths

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency
Number of safety diversion plans	Human Services Department	Annually
Number of psychiatric hospitalizations	Human Services Department	Annually
Long Term Indicators	Source	Frequency
County Health Rankings	University of Wisconsin	Every 3 Years
Youth Risk Behavior Survey	Florence School District	Every 2 Years
Behavioral Risk Factor Surveillance System Survey (BRFSS)	CDC	Every 2 Years

PRIORITY ISSUE: MENTAL HEALTH

GOAL 1: Reduce suicide deaths

OBJECTIVE #1:

BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205 **Evidence Based Resource:** as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current	Target	Resources	Lead Person/	Anticipated Product		
Strategies	Date	Required	Organization	or Result		
1.1 Decrease % of poor mental health days from 4.4% to3.4%	Ongoing	Evidence- based program materials, staff time and campaign outreach materials.	Florence County AODA/MH Coalition Members	Decrease poor mental health days by promot- ing strategies to edu- cate/support families and students through initiatives.	Q	9
 1.2 Decrease # of injury deaths from 100 to 84 	Ongoing	Evidence- based strategies and diversion plan template(s) and supplies for means restriction	Florence County AODA/MH Coalition Members	Decrease deaths with positive activities and restricting means.		
Opportunities for	Expansion	n/Enhanceme	ent			0
Expand programming t access to mental healt		-	ies and mentors fo	r individuals that lack		
Expand programming t assertiveness training	hat address	es healthy relati	onships, setting bo	undaries, skill building, and		

Florence County Health Department

PRIORITY ISSUE:

Built Environment



BUILT ENVIRONMENT OVERALL AIM

Support a built environment that promotes a healthy community design and health equity for all of Florence County residents

PRIORITY ISSUE: BUILT ENVIRONMENT

GOAL 1: Create opportunities for active and safe living.

PERFORMANCE MEASURES

	C	F
Short Term Indicators	Source	Frequency
Community Health Surveys	Florence County Health Department Survey Results	Annual
	Housing Committee	Annual
Long Term Indicators	Source	Frequency
County Health Rankings	University of Wisconsin	Every 3 Years
County Health Rankings Adult Behavior Survey	University of Wisconsin CDC—BRFSS	Every 3 Years Annual

PRIORITY ISSUE: BUILT ENVIRONMENT

GOAL 1: Create opportunities for healthy and safe living

OBJECTIVE #1:

By 2025, Florence County Housing Committee will implement three strategies to improve the overall health and safety of all county residents

BACKGROUND ON STRATEGY:

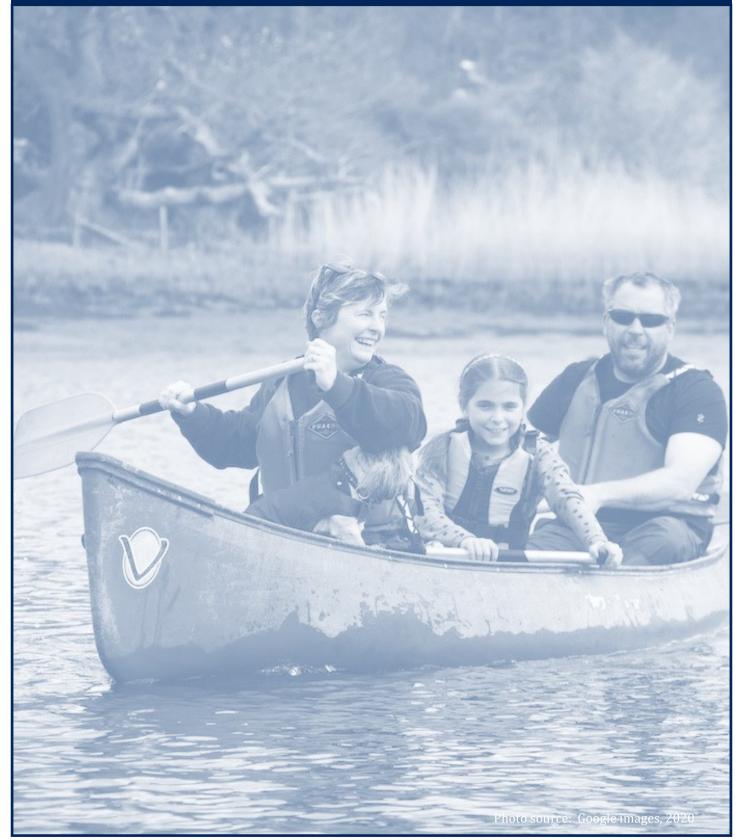
Source: Florence County CHA—2020-20205

Evidence Based Resource: as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
1.1 Explore and imple- ment mixed-use de- velopment options throughout Florence County	2025		Florence County Economic Development Housing Com- mittee	Increase in number of mixed-use development projects that are both site -specific and neighbor- hood-based	Q	
1.2 Increase percentage of people using the Housing First program in Florence County	2025		NEWCAP	Increase promotion of the Housing First location and have increased participation by December 2025	Q	
1.3 Establish housing rehabilitation loan and grant programs	2025		Florence County Human Services and/or Economic Development Housing Committee	Increase opportunities for Florence County residents to apply for and receive assistance with housing rehabilitation opportunities	Ţ2	
Opportunities for	Expansior	n/Enhancem	ent			
Consider zoning regula	tions: land ι	ise policy			Q	
Improve streetscape (d	lefine) desig	n				

PRIORITY ISSUE:

Active and Safe Living



ACTIVE AND SAFE LIVING OVERALL AIM

Ensure that all Florence County residents have the opportunity to engage in healthy practices and avoid preventable chronic conditions

PRIORITY ISSUE: ACTIVE AND SAFE LIVING

GOAL 1: By 2025, Florence County Task force will implement three strategies to improve the overall

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency
Community Health Surveys	Florence County Health Department Survey Results	Annual
Environmental Public Health Tracking Report	Environmental Public Health Tracking –Department of Health Services	Annual
Long Term Indicators	Source	Frequency
County Health Rankings	University of Wisconsin	Every 3 Years
Adult Behavior Survey	CDC-BRFSS	Annual
Youth Risk Behavior Survey	YRBS	Every 2 years

PRIORITY ISSUE: ACTIVE AND SAFE LIVING

GOAL 1:

OBJECTIVE #1:

BACKGROUND ON STRATEGY:

Source: Florence County CHA—2020-20205

Evidence Based Resource: as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

		1	1			
Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
1.1 Fitness programs will be offered in a variety of community settings for residents of all ages.	Ongoing		Safe and Healthy Living Task Force	Fitness and exercise programs will be offered in community settings throughout the county that increase physical activity levels for all ages	Ç	
1.2 Promote tick education and pre- vention activities by distribution of 400 tick kits 2025	Ongoing		Safe and Health Living Task Force	Decrease the number of confirmed Lyme cases reported in Florence County	Q	
1.3 Implement multi- component obesity prevention Interventions	Ongoing		Safe and Health Living Task Force	Decrease obesity rates in Florence County	<u>Z</u>	8
Opportunities for l	Expansion	n/Enhancem	ent			
Increase the number of	f places for	physical activity				
Increase transportation	n access for	low-income and	l/or vulnerable pop	ulations in increase access	Q	

Community Health Assessment

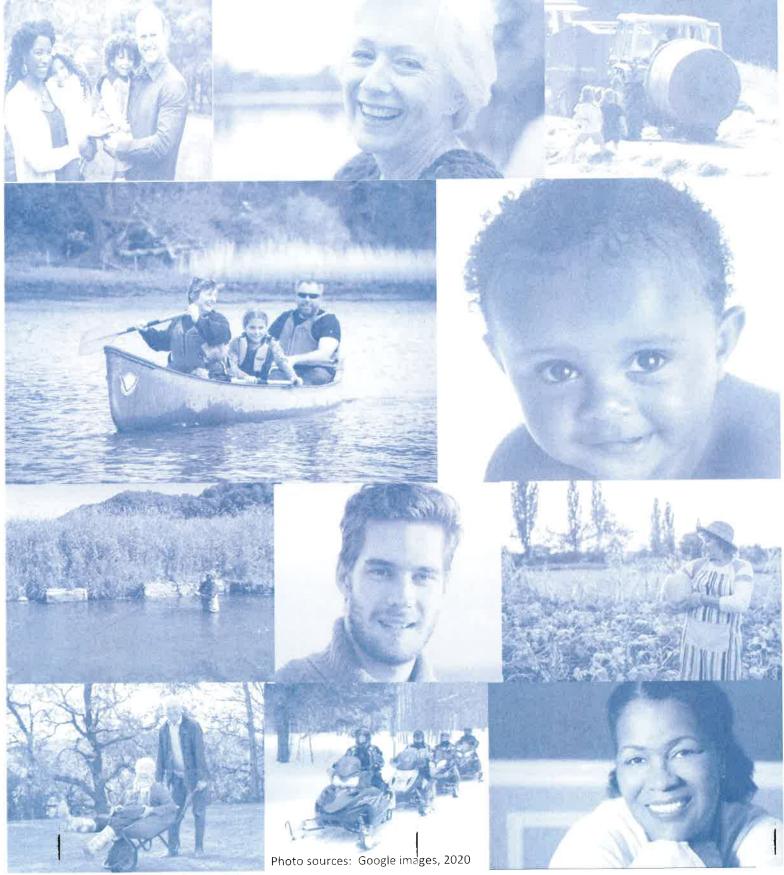
Community Health Improvement Plan



Photo and design credit: Some graphics, photos, and designs were adopted from South Dakota Department of Health or Summit County Public Health Community Health Improvement Plans. Accessed November 2019.



Community Health Improvement Plan Florence County, Wisconsin





Florence County Community Partners

Florence County Health Department would not have been able to complete the Community Health Improvement Plan (CHIP) without the input, hard work and dedication from our many community partners. Many agency representatives, community partners, and community members participated in a variety of platforms (i.e. community health surveys, focus groups, and meetings). We would like to sincerely thank the following agencies and individuals:

Jen Steber	Florence County Human Services; Director
Jenn Robinson	Florence County Human Services; Social Worker
Ann Price	Florence County Health Department; RN
Annette Seibold	Florence County Health Department; Health Officer
Amber Kolberg	Florence County Health Department; CHS
Sara lerue	Florence County Health Department; Admin. Assistant
Julia Hallgren	Florence County Health Department; Student Intern
Karen Wertanen	Community Member; Retired Registered Nurse
Yvonne VanPembrook	Florence Board of Health; Community Volunteer
Holly Stratton	Florence County Board of Health Chairperson
Peyton Prevost	TORPEDOs - Florence High School student
Lacey Enders	TORPEDOs - Florence High School student
Tiffany White	ADRC; Director
Maria Bournaville	ADRC: Information and Assistant Specialist
Scott Wolf	Florence County Land Conservation; Administrator
Meg Dallapiazza	UW Extension; 4-H Youth Development Agent
Teresa Chrisman	Florence County Sheriff's Office; Deputy
David Gribble	Florence County Sheriff's Office; Deputy
Donna Fayas-Johnson	
Kayla Lehmann	Caring House
Sara Foster	Florence County School District
Wendy Gehlhoff	Florence County Economic Development
Rhonda Stuart	Northern Lake Community Clinic (Lakewood)



Community Health Improvement Plan

<u>What is a Community Health Improvement Plan</u>: The Community Health Improvement Plan (CHIP) is a long-term, systematic plan that address issues that have been identified by the nation, state and local Community Health Assessment (CHA).

The Purpose: The purpose of the plan is to describe how the health department and community partners and stakeholders will engage the community it serves to work together to improve the health of the population in the jurisdiction that Florence County Health Department serves.

Who uses the Community Health Improvement Plan: The CHIP can be utilized by community, partners, and stakeholders to set priorities, direct the use of resources, and to develop and implement projects, programs, and policies. The CHIP does not replace or supersede concurrent action plans or work plans utilized by the health department or any of their community partners.

Who is responsible the Community Health Improvement Plan: Florence County Health Department has been the lead organization responsible for organizing and coordinating the community health improvement process. However, it does not take credit for owning the process nor is it the sole entity responsible for CHIP implementation. The Florence County Health Department has actively engaged the community and it's partners with the intent on developing a CHIP that complements the various other action planning efforts and/ or documents produced by other community partners and stakeholders within the jurisdiction it serves.

Commitment: Florence County Health Department is committed to this effort, as part of a larger initiative to develop collaborative partnerships with community stakeholders, which is noticeable through its work to build capacity within the community to address key population health issues identified in the Community Health Assessment process. Through this commitment and the CHIP process Florence County Health Department is able to foster responsibility and ownership of the plan with partners while also developing and strengthening partnership.

Public Health Accreditation Board (PHAB) Standards & Requirements: The PHAB Standards & Measure guidance were utilized in the development of Florence County Health Department's CHIP process to ensure that all criteria were met.

Standard 5.2: Develop and implement community health improvement strategies collaboratively.

Reaccreditation Requirements:

- \Rightarrow Desired measurable outcomes or indicators of health improvement and priorities for action
- ⇒ Considerations of social determinants of health, causes of higher risks and poorer health outcomes and health inequities
- ⇒ Plans for policy and system level changes for the alleviation of identified causes of health inequity. Policy changes may address social and economic conditions that influence health and health equity including housing, transportation, education, job availability, safety and zoning.
- ⇒ Designation of the individuals and organizations that have accepted responsibility for implementing strategies.



Community Health Improvement Plan

Alignment with State Health Improvement Plan: Wisconsin § DHS 140 requires that "all local health departments shall assume responsibility for participating in community health assessments, collecting, reviewing and analyzing data on community health. Local health departments are also responsible to organize and develop a Community Health Improvement Plan" under the same state statue. Assessments and plans are submitted to the Wisconsin Department of Health Services. Submissions should identify which focus areas, indicators, and strategies align with the State Health Improvement Plan (SHIP).

Florence County Health Department has aligned with three focus areas selected by the state (Alcohol and Other Drug Use; Mental Health; ; and Chronic Disease Prevention and Management) and has determined to specifically address the priority populations of the aging population and adolescent health.

Further aligning with the SHIP, Florence County Health Department has adopted the framework that identifies cross-cutting factors that influence health status across all priority areas. These are: Access to Healthcare; Social Determinants of Health; Built Environment; Public Health System; Health Behaviors; and Health Equity.

Health Equity: The attainment of the highest level of health for *all* people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health care disparities.



This icon denotes that a strategy is likely to reduce health disparities

Social Determinants of Health: Nearly every is impacted by social determinants of health. The following examples influence health equity in positive or negative ways: Income and social protection, education, unemployment and job security, work life conditions, food security and housing which will be all discovered during this process.

Public Health System & Health Behaviors: The public health system is made up of governmental agencies and non-governmental organizations working to promote health and prevent disease and injury to the entire community or within the vulnerable populations. Prevention addresses health problems before they begin. Health behaviors are actions people take to maintain health, or actions people take that may harm their health or the health of others. These behaviors are influenced by family, community and the social determinants of health (social, economic and physical environment).

Access to Healthcare: The healthcare system pays for and delivers clinical health care services to meet the needs of the patient. Access to health care means having timely use of comprehensive, integrated and appropriate health services to achieve the best health outcomes.

Strategies that are aligned with some of the strategies identified in the SHIP will be indicated by the icon below. These strategies are considered evidence-based and "best practice" through the systematic review of available research.



This icon denotes alignment with the Wisconsin SHIP.



Goals & Strategies

Florence County Health Department and the voluntary steering committee utilized the results of the Community Health Assessment, participant feedback, supporting epidemiological data, and consideration of the state focus areas to determine what the priority areas were. Four priority areas were chosen and were vetted by the Florence County Health Department and the steering committee participants during this meeting.

Strengths, Weaknesses, Opportunities & Challenges (SWOC)

Analyses of each priority was conducted by using the SWOC model. SWOC provides the opportunity to identify common themes among priority areas, as well as challenges needing to be addressed through thoughtful community health improvement planning. Goals and strategies were gathered, reviewed, and agreed upon by the Steering Committee during the afternoon session of the Data In a Day presentation in September 2019. Analyses using the SWOC process were listed for each priority area (see pages 36 & 37 of the CHA). Strategy development will take place within community and partner coalitions that already exist for the purpose of reducing publication.

Alcohol and Other Drug Abuse and Mental Health strategies are developed and coordinated through the Alcohol and Other Drug Abuse (AODA) and Mental Health (MH) coalition. Partners and stakeholders are often actively participating in strategic plans that are specific to their area of expertise. Currently there are a wide variety of programs and services for this population but it is recognized that continued coordination of these activities must continue in order to ensure collective impact in policy and programming options for rural communities with limited resources such as Florence County.

Built Environment issues include both social and physical determinants of health. The impact of resources to Florence County have been consistently recognized by members of the community, partners, and stakeholders and strategies to address these issues continue to be cross-cutting with occupational status, educational attainment, access to health care, and poverty levels. Existing and new coalitions continue to coordinate and strategize to decrease the risk factors for poverty and low socioeconomic status.

Active and Safe Living related to Chronic Disease and Prevention measures have been identified by the community, partners, and the Steering Committee as an area that is cross-cutting. Group consensus was to develop a task force that would coordinate responses to identify gaps, priorities, and opportunities while working to implement systems and environmental changes at the community level to prevent the onset of chronic conditions and adverse health outcomes due to injuries. Strategies will be developed and implemented by the new Active and Safe Living Task Force in conjunction with community partners.



Goals & Strategies

CHIP 2025 Targets CHIP targets were adopted, where applicable, from current targets for community health improvement. Many targets were derived from the 2020-2025 Florence County CHA Health Priorities, Healthiest Wisconsin 2020: State Health Plan, and/or Healthy People 2020 goals and objectives. If a target was not previously addressed, Florence County Health Department applied a 10% improvement which is based on the target-setting methodology utilized across many federal Healthy People 2020 objectives.

Next Steps (PHAB Reaccred 5.2.1 e) The CHIP is designed to assist in coordinating action through community health improvement planning. With the implementation of this plan, Florence County Health Department enters into the action phase of the MAPP process. This phase includes the planning, implementation, and evaluation of the action plans for each of the identified priority areas. These action plans outline the activities, key partners, and evaluation measures for each identified priority issue.

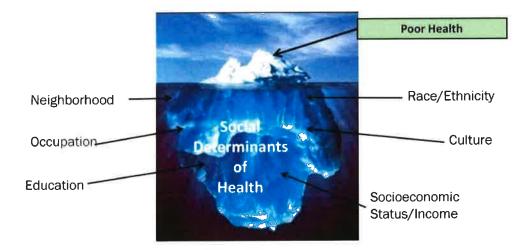
Achieving improved health outcomes will take time and effort as the community transitions from planning to coordinated action. Florence County Health Department will formally evaluate the progress made toward goals each year and will release an annual update detailing progress made. Throughout the year, however, Florence County Health Department will monitor progress and update the plan as necessary. Florence County Health Department may need to reevaluate strategies based on changing resources and leverage additional assets to assure that goals are met. The action phase of this plan is an ongoing process that allows Florence County Health Department to evaluate the effectiveness of its efforts and modify its course of action as community health needs evolve.



The Social Determinants of Health: A Broader View

Addressing broader socio-economic factors is crucial to improving the health of the entire state as well as Florence County's population. Florence County Health Department recognizes the importance of this process and kept this in mind when addressing priority populations and outlining specific targeted interventions for the community. Florence County used this process to prioritize strategies that foster a healthy community through environmental, policy and systems changes. The purpose of these broad interventions is to increase access to opportunities to be healthy were we live, work, and play.

Florence County Health Department, as previously noted, has established four health priorities that are listed in the CHIP: Alcohol and Other Drug Abuse, Mental Health, Built Environment, and Active and Safe Living. In addressing these focus areas, Florence County is committed to pursuing additional cross-cutting strategies that promote health and health equity for all Florence County residents. In addition, Florence County Health Department is committed to addressing the broad social and economic factors as we continue to plan and coordinate interventions to improve health in Florence County. (PHAB Reaccred 5.2.1 a)



The Problem Runs Deep

Diagram credit: Summit County Health Department, Ohio . Accessed 2019

Florence County Health Department



The Social Determinants of Health: A Broader Context

The following is a list of evidence-based strategies that the state of Wisconsin has identified as potential interventions to address the broader scope of social determinates of health which lead to poor health outcomes in Florence County and the state of Wisconsin. These strategies are meant to promote overarching environmental, policy, and systems changes that will have a positive impact on all four priority issues and beyond.

Although this list of strategies as been specifically chosen by the state of Wisconsin, it is relevant to Florence County and is supported by the research. It is not an all inclusive list or is it meant to be. Florence County continues to identify additional needs, opportunities, and partnerships as a way to increase the impact of efforts in pursuing a more engaged, healthier, and equitable community.

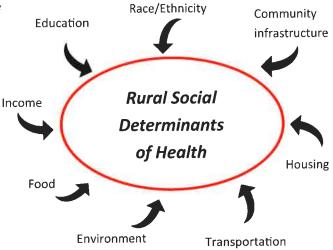


Image credit: www.ruralhealthinfo.org. Accessed 01/2020

EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Reduce discrimination and increase social cohesion		
Legislation that protects minority and vulnerable groups from discrimination and social exclusion	Q	8
Labor market, education and family welfare policies that reduce social stratification	0	0
Programs and policies that increase opportunity for health social interaction and networking	0	
Implement zoning strategies to promote mixed income communities	Q	8

Tax credit for seniors and adults with disabilities	0	e
Transitional Jobs program for unemployed jobseekers	Q	
Increase social connectedness among adults/special populations	Q	8

The Social Determinants of Health: A Broader Context

EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Improve education	
Increase early childhood education	0
Create environments that support learning	Q
Establish home visiting or parent education programs	Q 0
Increase education beyond high school	0 0

Increase access to quality healthcare		
Reduce financial and non-financial barriers to effective care	0	8
Increase opportunities for oral health care	0	
Recruit providers to underserved areas	0	
Recruit and retain high quality workforce	0	0

Work to ensure affordable, quality housing is available for all Florence County	resid	lents
Improve housing quality	Ø	8
Promote mixed use development	0	9
Support housing rehabilitation loan and grant programs	Ø	8

Source: Healthiest Wisconsin 2020 Focus Area Profile (2014). Accessed December 2019.



The Social Determinants of Health: A Broader Context

EVIDENCE-BASED BEST PRACTICES

ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Strategies in the Wisconsin State Health Plan for Florence County to consider when developing local initiatives.

Provide early childhood supports		
Improve quality of Head Start and other early education programs, including small- er teacher-child ratios	Ø	
Increasing the number of teachers with four-year college degrees in early childhood educa- tion and decreasing staff turnover	0	
Increasing home visits with families	Ø	8

Employment, Income & Poverty		
Assist eligible families in obtaining earned income tax credits through programs that provide free tax filing assistance	\Diamond	8
Employment programs such as vocational training for adults and transitional jobs; jobs and training for the reentry population	0	8
Provide educational opportunities on financial empowerment such as credit and credit repair strategies, strategies to eliminate debt, developing wealth and assets and planning for retirement	Ø	8
Support mentoring programs		9

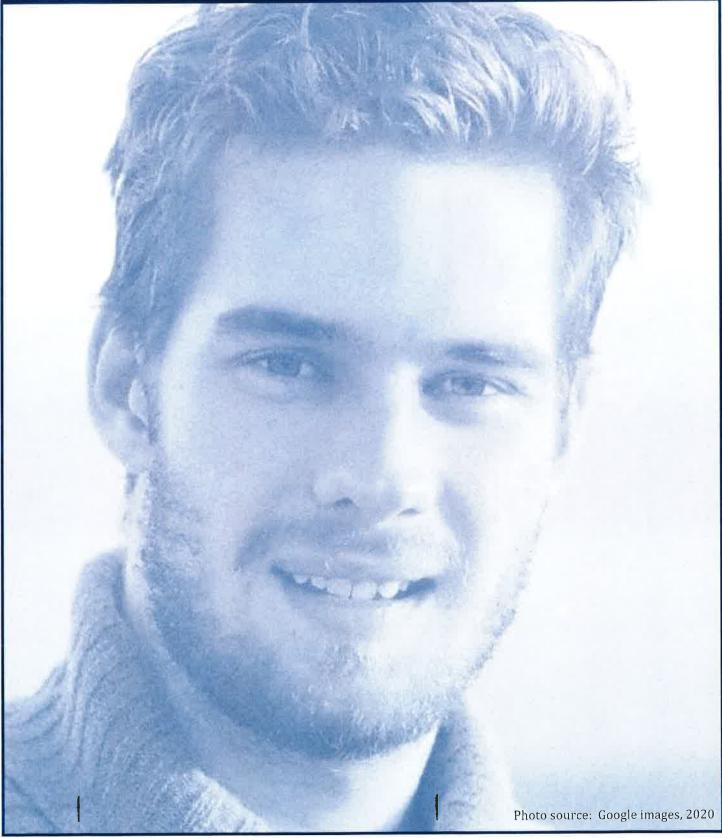
Local / Regional built environment changes to support active living and social connected	ednes	S
Improve streetscape design and land use policies (such as Complete Streets) that include bike and pedestrian infrastructure	\boldsymbol{Q}	
Expand green spaces and parks through renovating or enhancing under-utilized recreation areas, or rehabilitating vacant lots, or abandoned infrastructure	0	0
Ensure the health and equity impacts are considered when making policies regarding the built environment	Ø	₿

Safe home environments		
Require smoke and carbon monoxide installation in new and existing homes	$\boldsymbol{\Diamond}$	8

Source: Healthiest Wisconsin 2020 Focus Area Profile (2014). Accessed December 2019.

PRIORITY ISSUE:

Alcohol and Other Drug Use



Florence County Improvement Process Implementation Plan

Date Created: December 2019

Date Reviewed/Updated: May 2022

ALCOHOL AND OTHER DRUG USE OVERALL AIM

Ensure all adolescents reach optimal health and wellness for successful progression into adulthood

PRIORITY ISSUE: ALCOHOL AND OTHER DRUG USE

GOAL 1: Reduce Substance Use in Florence County

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency	
Alcohol Age Compliance Checks	Florence County Sheriff's Office	Annual	
Drug Take Back Days	Florence County Sheriff's Office & Health Department	Bi-Annual	
Long Term Indicators	Source	Frequency	
County Health Rankings	University of Wisconsin	Every 3 Years	
Youth Risk Behavior Survey	Florence School District	Every 2 Years	
Behavioral Risk Factor Surveillance System Survey (BRFSS)	CDC	Every 2 Years	

(PHAB Reaccred 5.2.1)

PRIORITY ISSUE: ALCOHOL AND OTHER DRUG USE

GOAL 1: Reduce Substance Use in Florence County

OBJECTIVE #1: Reduce underage drinking in Florence County as measured by middle/high school students reporting "use in the last 30 days" on the Florence County Youth Risk Behavior Survey.

BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205

Evidence Based Resource: Excessive Consumption: Social Host Liability Law, Drug courts & Minimum drinking age laws as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	
1.1 Implement social access media campaign	Ongoing	Marketing tools and staff time	Florence County AODA/MH Coalition Members	Increased education to community on the consequences of social hosting	0
1.2 Increase the perceived risk of harm for underage drinking	Ongoing	Marketing tools and staff time	Florence County AODA/MH Coalition Members	Increased education to community on the consequences and dangers of underage drinking	Q
 1.3 Increase support of responsible marketing ad provision of alcohol and other drugs in Florence County 	Ongoing	Compliancy check training and staff time	Florence County AODA/MH Coalition Members	Decrease in failed compliance checks and enhanced enforcement of laws prohibiting alcohol sales to minors	Q
1.4 Improve access to substance abuse treatment/counseling	Ongoing	Licensed professional counselors/ therapists	Florence County AODA/MH Coalition Members	Reduce recidivism, drug use, and incarceration	<i>ф</i> e

OBJECTIVE #2: Prevent initiation of Tobacco Use by Youth and Young Adults in Florence County.

BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205

Evidence Based Resource: "Tobacco Quit Lines and school-based tobacco free school policies with tobacco education programs" as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

	ASMINI					THE WEAR
Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
2.1 Increase personal and social skills to help avoid tobacco use	Ongoing	Evidence- based tobacco education program materials and staff time	Florence County AODA/MH Coalition Members and Health Department	Increased skill-building education to adolescents and young adults to reduce youth smoking	Ø	9
Opportunities for	Expansion	n/Enhancem	ent			
Provide school-age building resource t	-			an additional resiliency		
Provide youth the c socialization	opportunity	y for peer to p	eer education, sk	ill-building and positive		
Expand programmi and preventing risk	-		ed at increasing a	cademic performance		
Expand programmi times, such as after ming)		-		ur during high risk school time program-		

PRIORITY ISSUE:

Mental Health



MENTAL HEALTH OVERALL AIM

Promote mental well being and prevent the completion of suicide for all Florence County residents

PRIORITY ISSUE: MENTAL HEALTH

GOAL 1: Reduce suicide deaths

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency			
Number of safety diversion plans	Human Services Department	Annually			
Number of psychiatric hospitalizations	Human Services Department	Annually			
Long Term Indicators	Source	Frequency			
County Health Rankings	University of Wisconsin	Every 3 Years			
Youth Risk Behavior Survey	Florence School District	Every 2 Years			
Behavioral Risk Factor Surveillance System Survey (BRFSS)	CDC	Every 2 Years			

PRIORITY ISSUE: MENTAL HEALTH

GOAL 1: Reduce suicide deaths

OBJECTIVE #1:

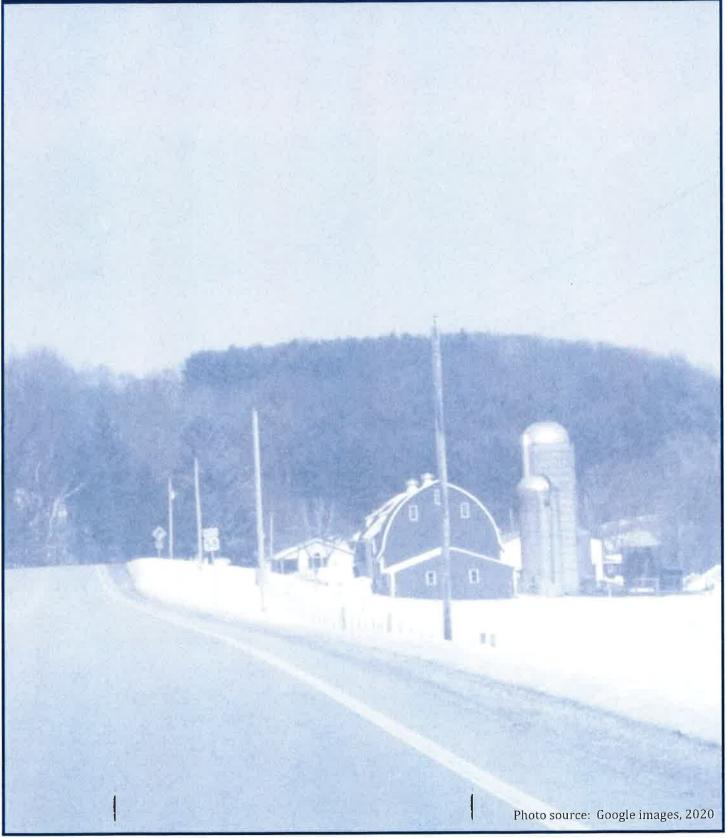
BACKGROUND ON STRATEGY:

Source: Florence County Youth Risk Behavior Survey and Florence County CHA—2020-20205 **Evidence Based Resource:** as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	
1.1 Decrease % of poor mental health days from 4.4% to 3.4%	Ongoing	Evidence- based program materials, staff time and campaign outreach materials.	Florence County AODA/MH Coalition Members	Decrease poor mental health days by promot- ing strategies to edu- cate/support families and students through initiatives.	<i>©</i> ()
1.2 Decrease # of injury deaths from 100 to 84	Ongoing	Evidence- based strategies and diversion plan template(s) and supplies for means restriction	Florence County AODA/MH Coalition Members	Decrease deaths with positive activities and restricting means.	
Opportunities for Expand programming t access to mental healt	hat support n care servic	s positive activit	ies and mentors fo		Ø 🖯
Expand programming t assertiveness tra jn ing	hat address	es healthy relati	ionships, setting bo	undaries, skill building, and	

PRIORITY ISSUE:

Built Environment



BUILT ENVIRONMENT OVERALL AIM

Support a built environment that promotes a healthy community design and health equity for all of Florence County residents

PRIORITY ISSUE: BUILT ENVIRONMENT

GOAL 1: Create opportunities for active and safe living.

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency
Community Health Surveys	Florence County Health Department Survey Results	Annual
	Housing Committee	Annual
Long Term Indicators	Source	Frequency
County Health Rankings	University of Wisconsin	Every 3 Years
Adult Behavior Survey	CDC—BRFSS Annual	
Youth Risk Behavior Survey	YRBS	Every 2 years

PRIORITY ISSUE: BUILT ENVIRONMENT

GOAL 1: Create opportunities for healthy and safe living

OBJECTIVE #1:

By 2025, Florence County Housing Committee will implement three strategies to improve the overall health and safety of all county residents

BACKGROUND ON STRATEGY:

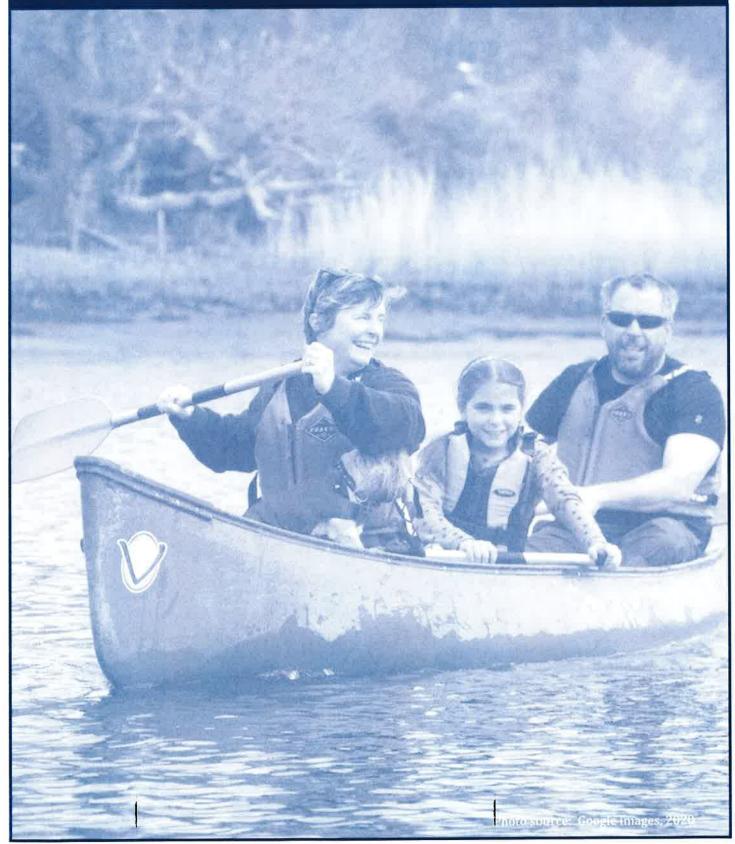
Source: Florence County CHA—2020-20205

Evidence Based Resource: as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	
1.1 Explore and imple- ment mixed-use de- velopment options throughout Florence County	2025		Florence County Economic Development Housing Com- mittee	Increase in number of mixed-use development projects that are both site -specific and neighbor- hood-based	0
1.2 Increase percentage of people using the Housing First program in Florence County	2025		NEWCAP	Increase promotion of the Housing First location and have increased participation by December 2025	Q
1.3 Establish housing rehabilitation loan and grant programs	2025		Florence County Human Services and/or Economic Development Housing Committee	Increase opportunities for Florence County residents to apply for and receive assistance with housing rehabilitation opportunities	Q
Opportunities for l Consider zoning regula			ent		
Improve streetscape (d	lefine) desig	;n			7%

PRIORITY ISSUE:

Active and Safe Living



ACTIVE AND SAFE LIVING OVERALL AIM

Ensure that all Florence County residents have the opportunity to engage in healthy practices and avoid preventable chronic conditions

PRIORITY ISSUE: ACTIVE AND SAFE LIVING

GOAL 1: By 2025, Florence County Task force will implement three strategies to improve the overall

PERFORMANCE MEASURES

Short Term Indicators	Source	Frequency Annual Annual	
Community Health Surveys	Florence County Health Department Survey Results		
Environmental Public Health Tracking Report	Environmental Public Health Tracking –Department of Health Services		
Long Term Indicators	Source	Frequency	
County Health Rankings	University of Wisconsin	Every 3 Years	
Adult Behavior Survey	CDC-BRFSS	Annual	
Youth Risk Behavior Survey	YRBS	Every 2 years	

PRIORITY ISSUE: ACTIVE AND SAFE LIVING

GOAL 1:

OBJECTIVE #1:

BACKGROUND ON STRATEGY:

Source: Florence County CHA—2020-20205

Evidence Based Resource: as recommended by What Works for Health: Policies and Programs to Improve Wisconsin's Health

Current Strategies	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result		
1.1 Fitness programs will be offered in a variety of community settings for residents of all ages.	Ongoing		Safe and Healthy Living Task Force	Fitness and exercise programs will be offered in community settings throughout the county that increase physical activity levels for all ages	Q	
1.2 Promote tick education and pre- vention activities by distribution of 400 tick kits 2025	Ongoing		Safe and Health Living Task Force	Decrease the number of confirmed Lyme cases reported in Florence County	4	
1,3 Implement multi- component obesity prevention Interventions	Ongoing		Safe and Health Living Task Force	Decrease obesity rates in Florence County	Q	•
Opportunities for Increase the number o	f places for	physical activity		ulations in increase access	10 10	

Community Health Assessment

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Community Health Improvement Plan





Photo and design credit: Some graphics, photos, and designs were adopted from South Dakota Department of Health or Summit County Publid Health Community Health Improvement Plans. Accessed November 2019.