

Healthy People Lincoln County

Community Health Assessment

Creating a healthier place where you work, learn, live and play.















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Lincoln County Health Department

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April 2018

Dear Community Members:

The Lincoln County Health Department in collaboration with its Healthy People Lincoln County partners is proud to present the 2018-2023 Community Health Assessment. This report includes a comprehensive review and analysis of data regarding health issues and needs of individuals residing in Lincoln County. The Community Health Assessment is the first step of our Community Health Improvement Process and provides an overall plan on tackling the health challenges in our county.

In completing the Community Health Assessment, Lincoln County Health Department followed the Wisconsin Way Framework from the Wisconsin Association of Local Health Departments and Boards. This included a comprehensive approach of working with community partners and members which included reviewing and analyzing data, identifying resources and assets, identifying priorities that align with the state and national health plans, and sharing final results of the health assessment with the community.

The final report provides useful information to public health officials, health care providers, policy makers, organizations, community groups and individuals who are interested in improving the health status of our community. These results enable organizations to strategically establish health priorities, develop strategies, and obtain or levy resources. It also allows us to come together as a community by focusing on common priorities and goals, ultimately making a larger impact.

I want to thank everyone who has contributed to this health assessment. We welcome any feed-back presented in this report and extend an invitation to you to actively participate in making Lincoln County a healthier place to live, work, play, and learn.

On behalf of Lincoln County,

Shelley Hersil, CHES, MPH

Health Officer/Director

Shelly Heroil

Lincoln County Health Department

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Community Health Assessment Introduction

Lincoln County Health Department is required by Statutory Law 140 and Public Health Accreditation Board to conduct a Community Health Assessment every five years. According to the Affordable Care Act, non-profit hospitals are also required to complete a Community Health Assessment every three years. In Lincoln County, the Community Health Assessment is a collaboration by community partners "Healthy People Lincoln County", with leadership from Lincoln County Health Department, UW-Extension Lincoln County, Ascension Sacred Heart Hospital, and Ascension Good Samaritan Hospital.

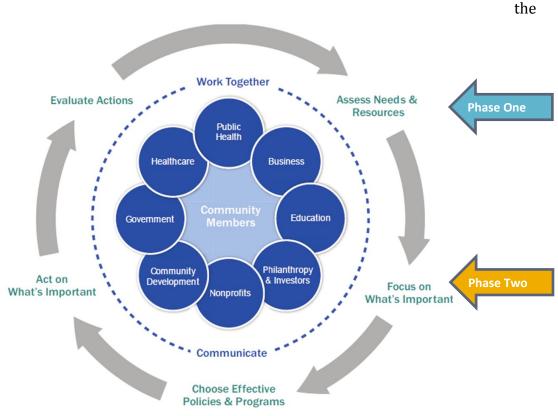
Purpose

The purpose of Lincoln County's Community Health Assessment (CHA) is to complete a comprehensive review of information about the community's current health status, needs, issues, assets and resources with the goal of improving and promoting the health of those that live in Lincoln County. Upon the completion of data review and analysis, top health priorities are determined by community partners and members. Following the Community Health Assessment, a Community Health Improvement Plan is developed to identify strategies to address these health priorities.

Community Health Assessment Model

The Community Health Assessment (CHA) process began in May of 2017. The Wisconsin Way is the framework Lincoln County used for completing the CHA. The Wisconsin Way Framework was developed by the Wisconsin Association of Local Health Departments and Boards (WALHDAB) www.walhdab.org. The figure below shows the Community Health Improvement Process model from the County Health Rankings which is referred to in the framework. Phase1: Assess Needs and Resources and Phase1: Assess Needs and Resources and Phase3: Focus on What's Important are the two components of the framework's cycle

that are addressed in Lincoln County Community Health Assessment. The model also reflects the importance during the CHA process to engage with partnering organizations and members of the community as well as to communicate efforts and findings throughout the phases represented in the model.



© 2014 County Health Rankings and Roadmaps

Phase 1

Assessing Needs and Resources

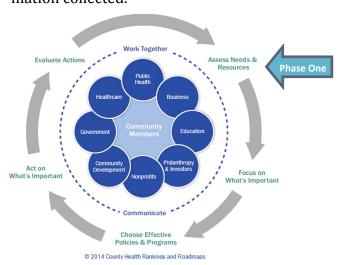
Assessing Needs and Resources is the first phase of the Community Health Assessment process and Phase 1 of the Community Health Improvement Plan Process shown below. This included:

Step 1: Identifying the questions and data that are critical to your community.

Step 2: Including input from the community.

Step 3: Identifying assets and resources.

Step 4: Complying and analyzing information collected.



1. Data Collection

This process began by collecting a large range of primary and secondary data for the assessment including demographics, social and economic, health statistics, and environmental data. Data was provided by the Wisconsin Department of Health Services, Lincoln County Health Department, and local partners which included hospitals, UW Extension, schools, and law enforcement. Primary quantitative and qualitative data was also collected from community members through a county-wide health opinion survey, community forum, key informant interviews and focus groups.

Collecting data on the social determinants of health such as, employment, education and physical environment was a priority during this process. The Wisconsin Way Framework's list of core data set was used during the CHA (See table below). Data collection and analysis plays a critical role in making public health decisions, program development, evaluation, and policy formation. It is important that the data presented in this CHA comes from reliable and credible sources. Data comparisons and benchmarking are provided when possible. It is also important to keep in mind there are limitations to the data that is available. These limitations include small data size, lack of or access to local data, real time data not available, and poor participation by community members. A list of primary and secondary data sources used for this assessment are as follows:

Primary Data Source List

- Lincoln County Community Health Surveys
- Lincoln County Community Forum
- Lincoln County Key Informant Interviews
- **Lincoln County Focus Groups**
- Lincoln County Social Norms Survey
- Lincoln County Youth Risk Behavior Survey
- WI Electronic Disease Surveillance System
- WI Immunization Registry
- WI WINS

Secondary Data Source List

- Behavioral Risk Factor Surveillance System
- Centers of Disease Control and Prevention
- **County Health Rankings**
- Healthiest Wisconsin 2020
- Healthy People 2020
- Lincoln County Health Rankings
- WI Department of Health Services
- WI Interactive Statistics on Health
- WI Environmental Public Health Tracking See Appendix E for definitions of each data source.

Wisconsin Core Data Set

- Demographic Profile
- Social Determinants
- Mortality
- Morbidity
- Access to Care
- **Built Environment**
- **Environmental Health**
- Violence and Injury
- **Nutrition and Healthy Foods**
- Oral (Dental) Health

Reproductive and Sexual

- Physical Activity
- Mental Health

Health

- Alcohol and Other Drugs
- Tobacco

Source: Wisconsin Way 2018

2. Gather Input from Community &

3. Identify Assets and Resources

The following data collection methods were used to gather information from community members on what the health strengths and challenges are in Lincoln County as well as assets and resources. The goal of implementing these methods is to gain a better perspective from leaders in our community and target population groups on health challenges in the county.

Community Health Survey

In June 2017, a community survey was administered to residents of Lincoln County in both an online and paper copy version. The survey was developed based off a template from the Northern Region Wisconsin Division of Public Health. This template referenced the Healthiest Wisconsin 2020 Plan focus areas. There were 648 surveys completed. The purpose of the survey was to gather data on the community's health needs. Surveys were distributed to key organizations and establishments in the county, as well as areas of the community with higher health disparities such as those with low income and education. See survey distribution list and results in Appendix B.

Community Forum

Lincoln County Health Department hosted a Community Forum on August 12, 2017 with the purpose to review primary and secondary, national, state, and local data that align with the Wisconsin Healthiest 2020 Plan and the Wisconsin Way Framework's Core Data Sets. Thirty-eight partners were in attendance. In depth, one-onone discussions took place after the review of each health focus areas. Each discussion included a review of the populations in Lincoln County with poor health outcomes due to health inequities and an analysis on why those groups are disproportionately affected. Populations identified are summarized on pages 7-23 under each health focus area. A brainstorming session on strengths, weaknesses, opportunities, and challenges was part of the analysis of the data, see summary in Appendix A.

Key Informant Interviews

Face-to-face interviews took place in January through March of 2018 to obtain additional perspectives and insights from key partners in the community with diverse backgrounds. To see a list of those that were interviewed and a summary of key points, see Appendix C.

Community Focus Groups

Specific target populations in Lincoln County participated in small group discussions and shared their beliefs, attitudes, experiences and challenges with regard to health. Focus groups consisted of 8-10 participants. Incentives were provided to recruit participants. Participants were able to talk about their perceptions of the strengths and challenges of living healthy in Lincoln County. See Appendix D for a list of who participated in the focus groups as well as a summary of results.

4. Compile & Analyze Information

All data that was gathered during this process was compiled by the Northern Region Wisconsin Division of Public Health, UW-Extension – Lincoln County and Lincoln County Health Department. Data was analyzed by community partners and members.

Assessment Results— Health Focus Areas

The following section of this report presents a summary of the Lincoln County Community Health Assessment findings, organized according to the key categories outlined in the Wisconsin Way Framework Core Data Set. See page 24 for Phase 2 of the Assessment, Focus on What is Important.

For more information on the Community Health Assessment, contact Shelley Hersil, Director/ Health Officer, Lincoln County Health Department, shersil@co.lincoln.wi.us or 715-539-1360.

Overview of Lincoln County

Lincoln County, WI

Encompassing almost 900 square miles, or 567,000 acres in North Central Wisconsin, Lincoln County ranks 21st in size among the state's 72 counties. There are 16 townships ranging in size from Corning's 92,690 acres to Scott's 20,890. Lincoln County has 152 named lakes and 577 unnamed lakes. Winter recreation is available with 22 miles of cross country trails, 315 snowmobile trails and 200 ATV winter trails. Lincoln County is primarily made up of manufacturing as well as larger employers in the areas of government, health care, education and insurance.

Population

According to the U.S. Census Bureau American Community Survey 2016, a total of 27,902 people live in Lincoln County. A majority of the population is between 45 and 64 years of age. Like other rural counties in Northern Wisconsin, Lincoln County is experiencing a decline in population as well as an increase in those residents that are 65 years of age or older. If we measure the growth of this population from 2010 to 2030 we are expected to see a 62% increase in the elderly population.

Age and Gender, US Census 2010

Age Group	Both Gender	Male	Female
Total	28, 743	14,412	14,331
0-4	1,471	741	730
5-19	5,468	2,902	2,566
20-24	1,169	619	550
25-34	2,798	1,395	1,403
35-44	3,576	1,821	1,755
45-54	5,078	2,576	2501
55-64	3,914	2,008	1,906
65+	5,269	2,350	2,919

Race and Ethnicity, US Census

Lincoln County has seen a small change in race and ethnicity from 2010-2015. The population is decreasing and very slowly becoming more racially diverse.

Race	2010	2015
White	27,860 (98.5%)	27,426 (97.3%)
Black or African American	64 (.2%)	147 (.5%)
American Indian and Alaskan Native	83 (.3%)	154 (.5%)
Asian	122 (.4%)	144 (.5%)
Native Hawaiian or Pacific Islander	21 (.1%)	0 (0%)
Ethnicity	2010	2015
Non- Hispanic or Latino	28,743 (98.9%)	27,172 (96.1%)

Disability, US Census

There were 3,402 Lincoln County residents that identified themselves as people with disabilities in 2015 (15.4% of the 18+ population). Source: US Census Bureau.

At the time of this report, data was not available on sexual orientation or immigration, as well as health data by zip codes.

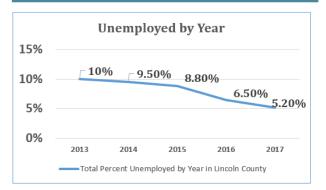
Social and Economic Factors

Why is it important?

Our health is determined in part by access to social and economic opportunities and resources available in our home, neighborhood and communities. Our goal is to create social and physical environments that promote good health for all. The following components are social determinants to achievable health outcomes as referenced in Healthy People 2020.

- Economic stability
- Social and community context
- Health and health care
- · Neighborhood and built environment

Employment



- The average number of county residents employed from 2011-2016 consists of 10,525. Before the recession began, about 30% of these jobs were in manufacturing (18% for the state and 14% for the U.S.). Now, roughly 23.5% of all jobs in the county are currently in manufacturing. Source: US Census Bureau.
- Lincoln County experienced one of the highest percentages of unemployment in the state of Wisconsin from the great recession due to jobs associated with the housing industry. In 2017, county residents are returning to work with an unemployment rate of 5.2% compared to Wisconsin at 4.6%.

In Lincoln County...

- Families with low incomes often struggle to afford food, rent, childcare, and transportation.
- Individuals who are unemployed are more than 50% more likely to be in fair or poor health when compared to those who are employed.
- Working non-standard hours and having little control over working conditions is associated with increased illness, injury and mortality.
- 2018 key informant interview results indicate that Lincoln County has a residents with Asset Limited, Income Constrained, Employed or (ALICE).

Homeowners and Homeless

- Occupied Housing Units: 12,419; Owner Occupied: 9,381 (75.5%) State (67.3%), Source US Census Bureau.
- Lincoln County organizations have reported 121 individuals homeless as of May 2017.
- According to 2018 key informant interviews, there is a shortage of affordable quality housing especially for larger families. This has become a barrier to residing in Lincoln County for residents as well as employees.

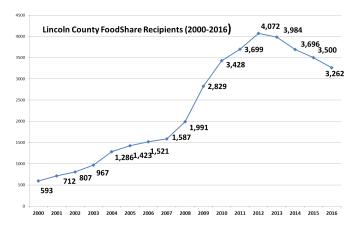
Poverty

❖ In 2009 the estimated poverty rate was 15.6% for children under 18 years old and 16.8% for children under 5 years old. Lincoln County is comparable to the Wisconsin rate: 14.6% for children under 18 and 17% for children under 5. Source: US Census Bureau.

(Source: American Community Survey) Percent of Population					
All people (2015)	10.2%	+/-1.2			
Under 18 years	12.4%	+/-3.1			
Related children under 18 years	12.2%	+/-3.1			
Under 5 years	16.8%	+/-8.4			
5 to 17 years	11.0%	+/-3.4			
18 to 64 years	10.2%	+/-1.2			
65 years and over	7.9%	+/-1.8			

Social and Economic Factors Cont.

Food Access

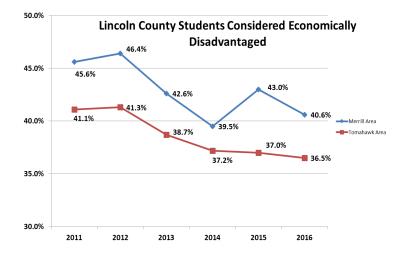


FoodShare is a state program that provides food for those that have limited money. There currently is legislation pending as of March 2018 at the federal level to cut those that benefit from Food Share. Source: WI Department of Health Services.

National School Lunch Program (NSLP)

The National School Lunch Program is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day. Source: Food and Nutrition Service—USDA.

The chart below refers to the percentage of students that qualify for the reduced lunch program in Lincoln County.



Education

Years of formal education are correlated strongly with:

- Higher income
- Better working conditions
- Access to health care
- More stability
- Better housing
- Greater sense of personal control
- Healthier lifestyles
- 90% of Lincoln County residents have obtained a high school diploma or higher (2015) which is similar to Wisconsin. 15% of Lincoln County residents have a bachelors degree or higher which is lower than Wisconsin at 25%. Source: US Census Bureau.

Literacy

According to the US Census Data 2015, 481 people in Lincoln County speak a different language at home, 194 of those do not speak English very well, with the most prevalent language being Spanish.

Transportation

❖ 2018 key informant interviews and focus groups report that transportation is an issue for the City of Tomahawk. There is some transportation available to seniors through an interfaith volunteer group but no public transportation system is available. This makes it difficult for those that don't have a way to get to medical appointments, after school programs, grocery stores, etc. This is less of a problem in the City of Merrill which has multiple forms of public transportation.

Social and Economic Factors Cont.

Adverse Childhood Experiences (ACEs)

ACEs are Adverse Childhood Experiences, also known as childhood trauma. Examples of trauma include abuse, household substance abuse, household mental illness, parental separation or divorce, incarcerated household member, emotional neglect and physical neglect. For every one of these examples, that a child has, they get an ACE. The more ACEs a child has, the more likely they are to develop chronic diseases and/or mental illness when they get older.

ACEs Data Dashboard 2011-2015

Distribution of ACE Scores among residents—Percent of Population with Specific ACE Score.

Number of ACES	Lincoln County	Northern Region	Wisconsin
O ACEs	45%	50%	48%
1 ACEs	22%	21%	22%
2-3 ACEs	20%	18%	19%
4+ ACEs	13%	11%	11%

According to the Wisconsin Child Abuse and Neglect Prevention Board, from 2011 - 2015, Lincoln County was the second highest in the state in prevalence of 4 or more Adverse Childhood Experiences (ACEs). Lincoln County is a small, rural community which limits its capacity to promote healthy life skills and teach resilience. There are also the opinions of community members that there is no point in changing current living conditions as shared during 2018 focus groups. 2018 key informant interviews provided similar feedback stating county residents lack motivation which leads to hopelessness. This feeling of hopelessness could be a results of high ACE scores in our community. The high ACE scores among Lincoln County youth may also lead to increased mental health concerns, risky behaviors, and other chronic disease as these children become adults.

Social Support

There is a strong association between social isolation and poor health outcomes. One study found that the magnitude of risk associated with social isolation is similar to the risk of cigarette smoking in terms of adverse health outcomes. In Lincoln County, between 2011-2015, approximately 28% of children were raised in a single parent household. These families are more likely to be in poverty due to loss of financial resources of a second adult in the home, Source US Census Bureau. Consequences also include poor health outcomes, stress, unhealthy behaviors, illness and disease.

According to community forum discussions, Hispanic populations are typically known for strong family support but among those in Lincoln County that are undocumented, many do not have a drivers licenses which leads to transportation concerns. In addition, fear of being targeted by authorities for deportation often leaves them living in isolation and hesitant to obtain resources. These, along with other factors, have led this population to have higher unemployment, less education, lower home ownership and less access to health services.

What do Social Determinants mean for Lincoln County?

High ACE scores, lack of social support, and loss of good paying jobs have become an unhealthy cycle in Lincoln County leading to families with low incomes and lower education levels. Lincoln County had a very high unemployment rate during the great recession. There is also the population that is underemployed. They are not provided with enough hours during the work week to collect benefits such as health insurance from their employer. These factors have greatly influenced our AL-ICE (Asset Limited, Income Constrained, Employed) residents and family populations leaving them at higher risk for not obtaining basic needs and living in high stress situations that can be a catalyst to chronic diseases and premature death.

Mortality

Why it is important?

Premature death can provide a unique and comprehensive look at overall health status. To understand mortality in a community, analyzing leading causes as well as years of potential life lost is essential.

What does this mean for Lincoln County?

Lincoln County's challenge with mortality is having a higher premature death rate, on average, than Wisconsin with about 6,700 premature deaths each year compared to 6,000 for the state, 2017. Chronic disease and preventable injuries are primary contributors to premature death.

Challenges for those at higher risk?

Unhealthy behaviors such as smoking, poor diet, socioeconomic conditions, stress, unsafe practices, and availability of health care, can all be contributors to mortality.

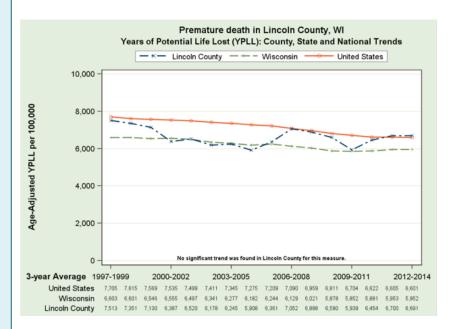
Sources: County Health Rankings 2017, Wisconsin Department of Health

Data highlights:

Lincoln County			Wiscons	in	
Causes of Death	Ran k	Number	Age- adjusted	Causes of Death	Rank
Cancer	1	412	190.9	Cancer	1
Heart Disease	2	395	169.8	Heart Disease	2
Other Causes	3	273	120.2	Other Causes	3
Accidents (Unintentional)	4	95	54.0	Accidents (Unintentional)	4
Alzheimer's Disease	5	113	46.5	Chronic Lower Respiratory Diseases	5

Death by Age Group:

Child and Adult Mortality by Age	# of Deaths	Rate (per 100,000)
1-4	0	-
5-14	0	-
15-19	0	-
20-24	3	-
35-55	17	-
55-64	41	843.4
65-74	65	2082.0
75-84	85	4497.40
85+	136	16037.7



Morbidity

Why it is important?

Morbidity encompasses disease, injury and disability, and helps to understand measures of overall health in community.

Chronic diseases can be prevented through healthy diet, physical activity, and eliminating tobacco use and substance abuse. Chronic diseases are very costly. Effective management can prevent more serious complications.

84% of health care spending is generated by the 50% of the population who have one or more chronic disease.

What does this mean for Lincoln County?

Lincoln County is average in the number of residents reporting poor physical health days compared to surrounding counties in Wisconsin.

Cardiovascular, cancer, and mental health are the leading diseases that cause hospitalization in Lincoln County.

Challenges for those at higher risk.

- Population groups with lower educational attainment and economic status are more likely to become sick.
- The 2017 community survey showed that residents with lower incomes had a higher percentage reporting their health as fair versus good.
- Low income populations often lack reliable transportation, especially the elderly and those who lack a social network or support.
- Penalties for being off work often force employees to go to work sick. This combination of factors often leads to delays in medical treatment.

Data highlights:

Number of Poor Physical Health Days

The average number of poor physical health days reported by Lincoln County residents in the last 30 days. Source: County Health Rankings.

Lincoln	3.4
Langlade	3.5
Price	3.9
Taylor	3.3
Marathon	3.3
Wisconsin	3.4

Total Hospitalizations

Age	# Hospitalized	Rate	Average
Total	2,762	96.8	\$26,264
<18	332	61.3	\$17,722
18-44	450	56.7	\$16,451
45-64	761	81.6	\$32, 785
65+	1,219	208	\$28,141

Hospitalization by Disease

Disease	# Hospitalized	Rate (per 1000)
Alcohol Use	52	1.8
Drug Use	18	-
Mental Disorders	130	4.6
Diabetes	49	1.7
Cardiovascular	137	4.8
Chronic Pulmonary	80	-
Pneumonia and Influenza	88	3.1
Neoplasms (cancer)	129	4.5

Sources: National Diabetes Statistics Report, 2014 (CDC); Fast Stats (CDC); Economic Benefits of Preventing Disease (National Prevention Strategy); Centers for Disease Control and Prevention; Healthiest Wisconsin 2020; Healthy People 2020; WI Department of Health, County Health Rankings 2017.

Access to Care

Why it is important?

Access to health care includes medical, dental, and behavioral health services and impacts overall physical, social and mental health status. There are many aspects to having access to care. Health insurance is essential, but it is also necessary to have:

- Comprehensive coverage, including preventive services, mental health, alcohol and other drugs (AODA).
- Providers that accept the individual's insurance.
- Relatively close geographic location of providers to patients.
- Services from a trusted and ongoing source.
- Health literacy (definition: the ability to obtain, read, understand and use healthcare information to make appropriate health decisions).

Access to health care impacts:

- Prevention of disease and disability
- Detection and early treatment of health conditions
- Quality of life
- Preventable death
- Increased life expectancy

Health Care in Lincoln County:

Lincoln County has three medical clinics, one free clinic and two critical access hospitals. There are no psychiatrists, no pediatricians and a lack of specialty providers. Lincoln County has one federally qualified dental clinic. There are no mental or AODA inpatient treatment facilities, a shortage of mental health providers especially for youth, and a shortage of dental clinics that take Medicaid. Hospitals do not treat infants beyond emergent care. There is also no means to get an x-ray at some of our local clinics. Mental health counseling is now available at both school districts in the county as well as preventive dental care.

Data highlights:

Lincoln County Community Health Survey 2012, 2015 and 2017

48% (n=328) reported health insurance through their employer is the number one way they pay for health care, 2015. Those surveyed with a lower income responded they use Medicaid at 48% (n=19), 2017 and the Hispanic population report out of pocket as their primary source for payment at 43% (n=3), 2015.

43% (n=54) reported that cost is why they haven't gone in for a routine checkup in more than two years, 2012.

18% (n=115) reported going to the emergency room or walk-in clinic as a primary source of health care. Reason was scheduling issues 23% (n=41); emergency care 25% (n=43); and convenient hours 19% (n=34), 2012.

37% (n=161) reported cost as the biggest barrier for them and there family to get services for mental health, 2012.

74% (n=483) reported having a dentist or dental clinic that they visit regularly, 2012.

72% (n=459) reported being covered by a public/private insurance plan that would pay part of their dental bills, 2012.

71% (n=315) stated the biggest barrier for them and/or their family to get dental care is cost, 2012.

Uninsured in Lincoln County, WI

	2012	2013	2014	2015
Lincoln County	10%	10%	8%	6%

Health Insurance

After the Affordable Care Act was implemented in 2014, health care insurance coverage was expanded to more residents living in Lincoln County. Low income residents when surveyed, stated access to health care as one of the top three strengths in the health of our community. Despite this change, those residents with private insurance often skip their routine and preventive medical care due to high deductibles, premiums and copays. Many county residents are underemployed, working just under the number of hours needed for insurance benefits. Reimbursement structures for Medicaid (MA) for providing dental care has lead to a lack of dentists who will take on Medicaid clients. Lincoln County has one dental clinic that will accept MA.

Access to Care cont.

Barriers for Lincoln County obtaining health care:

Additional barriers to care include:

- Transportation to appointments.
- Long waits to get an appointment.
- Longer clinic hours for workers.
- Lack of knowledge about the importance of preventive care.
- Low health literacy.
- Parents not able to prioritize care for their children.
- Reluctant to ask for help.
- Lack of insurance coverage.
- No internet.
- Difficult to navigate health care online.
- Clinics not serving those with MA.

These barriers disproportionately affect those with high health needs, low income, elderly and single parent households. The undocumented Hispanic population is also largely affected by these barriers and fear that if they get health services they will be reported, often don't have insurance, and need to pay out of pocket for expenses.

Factors contributing to the gaps in access to care in Lincoln County:

Changes in ownership of our larger health care systems, specialists no longer coming to the county, and recent retirements of many primary care providers has led to more Lincoln County residents traveling out of county for health care. This disproportionally affects those with higher health needs and the growing elderly population who need transportation. 2018 key informants interview results show it is and will continue to be difficult to hire family practitioners. Also changes in Medicaid has lead to increased use of Emergency Rooms (ER) by those on MA as local primary care organizations often require reimbursement to be seen and the ER does not.

Data highlights:

Ratio of # Providers to Patients	2018	2017	2016	WI 2018
Primary care physicians	1,470:1	1,420:1	1,370:1	1,520:1
Dentists	1,550:1	1,470:1	1,580:1	1,560:1
Mental health providers	1,400:1	1,330:1	1,420:1	560:1

Key Informant and Focus Group Comments 2018:

- Lincoln County hospitals have limited services.
- High health care costs.
- Medications are not affordable.
- Challenging to access Bridge Dental Clinic
- Lack Medicaid acceptance in dental clinics.
- If someone has complications from surgery they have to go out of county for care.
- In adequate mental health and ADOA services for those who need it.

Emerging Health Care Trends in Lincoln County:

- Providing privileges to providers from other states.
- Increase use of telemedicine.
- ❖ Veterans choice for care within 100 miles.
- Changes in the healthcare systems' reimbursement structure being quality based performance versus fee for service.
- Implementation of the community paramedic program.
- Online scheduling and online acute care.
- Providers becoming independent practice.

Lincoln County strategies to address access to care:

- Need local data on access to care—example emergency visits.
- Have coalitions address access to care issues with each health priority—nutrition, oral health, mental health, and alcohol and other drugs.
- **Explore** a community navigation "Hub".
- Move towards becoming health literate agencies.
- Advocate on access to care issues for Lincoln County (elected officials, organizations, etc.).

Source: County Health Rankings, Lincoln County Key Informant Interviews 2018, Lincoln County Focus Groups, 2018

Built Environment

Why it is important?

The built environment includes all of the physical parts of where we live and work (e.g., homes, buildings, streets, open spaces, and infrastructure). The built environment influences a person's health.

The following are additional contributions to a healthy built environment:

- Sidewalks to ensure safety.
- Subsidized housing.
- Expand local food sources and commercial kitchens.
- Affordable transportation, gym membership, etc.

What does this mean for Lincoln County?

- There is a need to have better access to affordable and healthy food, especially in the rural communities.
- According to key informant interviews, housing is affordable in Lincoln County, but the quality of homes is an issue for residents.

Challenges for those at higher risk:

- In Lincoln County, some of those who live in the rural parts of the county, have limited or no access to transportation, affordable food and/ or gyms.
- This is especially a concern for the elderly who live in isolation or have challenges utilizing resources.
- Those with a criminal background have limited housing and employment opportunities, making it difficult to reestablish their lives.
- Those who live in substandard housing with health conditions such as childhood lead poisoning and asthma result from inequities in the quality of home and neighborhood environments.

Data highlights:

- Lincoln County has five recreation facilities located with in the city limits of Merrill (3) and Tomahawk (2).
- There are (2) farmers' markets in Merrill and (2) in Tomahawk.
- Lincoln County has 9,381 (76%) owner occupied housing compared to the state at 67%.
- Lincoln County residents reported in the Community Health Survey 2017 that access to parks, bike trails and walking paths is the number one strength in making Lincoln County a healthy place to live. See table below.

Top Strengths of Lincoln County Reported in the Community Health Opinion Survey 2017

Strengths	Number Responses (N=1991)	% Responses
Access to parks, bike trails, walking paths	396	20%
Good Schools	230	12%
Clean Environment	210	11%
Low Crime/ Safe Environment	204	10%
Access to health care	197	10%

Identified Community Resources:

- Lincoln County has walking and biking trails.
- Many opportunities for outdoor activities year round.
- Sidewalks.
- Updated Tomahawk bridge; promotes safety.
- Libraries in Tomahawk and Merrill.
- Community groups encouraging city development.
- Merrill High School gym used by the community.
- Community gardens.

Sources: US Census Bureau, County Health Rankings, Lincoln County Community Opinion Survey 2017, and Lincoln County Community Forum.

Environmental Health

Why it is important?

Natural environment includes a variety of factors, but in particular air and water quality. Air pollution can aggravate chronic bronchitis, asthma and lung disease. Contaminants in water, such as prescription drugs, pesticides, and chemicals can lead to an increased risk for illness or disease. According to one estimate, a 10% reduction in fine particulate matter could prevent over 13,000 deaths in the U.S.

What does this mean for Lincoln County?

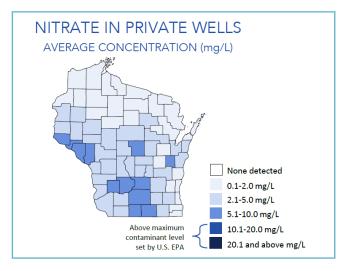
- Radon levels are higher in the southern part of Lincoln County.
 Residents of Lincoln County may not have the resources to fix the problem in their home.
- There are high nitrate levels in well water, especially among residents that reside near farmland.
- Carbon monoxide poisoning has been increasing steadily.
- Health Department staff have reported that there are less state and federal resources available to protect the air and water quality in the state of Wisconsin.

Challenges for those at higher risk:

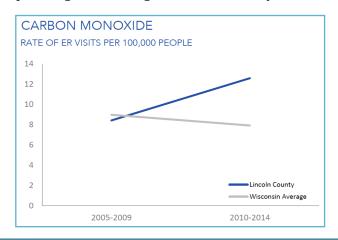
- Poor air and water quality have the greatest impact on the very young, the elderly, and those with chronic health conditions.
- Low income residents are at higher risk of elevated blood lead levels due to living in old homes.
- Those who live in rural Lincoln County have a higher risk of radon exposure, nitrates in well water, and Lyme disease.

Source: WI Environmental Health Profiles (2017). Centers of Disease Control, WI Department of Health, Lincoln County Community Opinion Survey (2017).

Data highlights:



- ❖ In 2015, 3.4% of children tested in Lincoln County had child lead poisoning results greater than or equal to 5 ug/dl compared to Wisconsin at 6.4%.
- Age-adjusted asthma emergency department visits in 2014 was 75 compared to 150 visits in 2002.
- Radon levels occur at higher levels in southern Lincoln County because of an increase in granite.
- ♦ In 2015, Lyme disease occurred at a rate of 82.2 per 100,000, 22.7 for Wisconsin.
- Lincoln County residents reported in the Community Health Survey 2017, that a clean environment is one of the top strengths of living in Lincoln County.



- Lincoln County Health Department has a water quality program including a water lab.
- Environmental health regulations in place.
- Home owners report pumping their septic every 3 years.
- Radon testing is being done in newer housing.
- Lincoln County has three medication drop off boxes.

Violence and Injury

Why it is important?

Injuries are the leading cause of death in ages 1-44 in the U.S. (2013), causing 59% of all deaths in that age group.

Direct and indirect health impacts of intentional/unintentional injuries can include poor mental health, poor physical health, premature death, high medical costs and decreased productivity.

Community safety affects both physical safety and psychological well-being. Children in unsafe situations display more aggressive behaviors and are at risk for alcohol/ tobacco use and risky sexual behavior.

Falls have surpassed motor vehicle crashes as the most common cause of injury-related death. Falls cost \$800 million in hospital charges each year.

What does this mean for Lincoln County?

- Lincoln County has a high rate of falls and a growing elderly population.
- Students report not feeling safe.
- There is an increase in sexual predators and sex trafficking.

Challenges for those at higher risk:

- Children, teenagers and the elderly are more prone to injury. Most falls are among the elderly aged 65 and older.
- Youth/young adults are more susceptible to bullying, dating violence, and sex trafficking.
- Substance abusers have an increased risk for injury and violence.
- Women have a higher risk of domestic violence, dating violence and sexual assault.

Sources: The Burden of Falls in Wisconsin (2010), Healthy People 2020, County Health Rankings (2014), Wisconsin Behavioral Risk Survey, and Lincoln County Youth Risk Behavioral Survey

Data highlights:

2010-2014 Cause of Injury Emergency Visit Lincoln County	Number	Rate per 100,000	WI Rate per 100,000
Falls	3,759	2,613	2,141
Struck by or Against Object or Person	1,638	1,139	1,066
Cutting or Piercing	1,103	767	632
Overexertion	1,007	700	596
Natural or Environmental Factors	811	564	346
Motor Vehicle Traffic Crash	759	528	590
Non-traffic	391	272	179
Poisoning	265	184	154
Fire, Heat and Chemical Burns	195	136	104
Machinery	100	70	60

- ♦ During 2010-2014 there were 1,440 hospitalizations listed for Lincoln County residents, an average of 288 per year. Falls make up 702 of the hospitalizations, with a rate of 488 per 100,000 population.
- ♦ In 2017, 24% of Lincoln County high school students reported that they were bullied on school property. (during the 12 months before the survey).
- ❖ In 2017, 25.8% of Lincoln County middle school students reported that they have been electronically bulled.
- ❖ In 2017, 11.8% of Lincoln County high school students reported that they never or rarely feel safe from physical harm at school.

- Adult Disability Resource Center Programs
- Lincoln County Falls Coalition
- UW Extension—Lincoln County Programs
- Lincoln County Death Review Team
- HAVEN
- Ascension Good Samaritan Hospital SANE Nurses
- Special events targeting child safety
- DNR Hunter and Snowmobile Safety Classes

Reproductive and Sexual Health

Why it is important?

Children/teens from unintended pregnancies are more likely to have poor mental and physical health, lower educational ability, lower paying jobs and more behavioral issues.

Risks associated with an unintended pregnancy include: delays in starting prenatal care; decreased likelihood of breastfeeding; increased risk of low birthweight; increased infant mortality; and increased risk of child abuse.

Sexually transmitted infections can lead to reproductive health problems, fetal and perinatal health problems, cancer, and aid in HIV transmission.

What does this mean for Lincoln County?

- Lincoln County has a significantly higher teen birth rate than WI.
- There is a lack of attendance in labor and delivery classes.
- Health literacy is a challenge.
- Women are not receiving prenatal care in the first trimester.
- Pregnant women are smoking at a higher rate than the state.

Challenges for those at higher risk:

- Teens, the low income, substance abusers, and those with mental health illness are at an increased risk for unhealthy, risky sexual behaviors
- Populations that struggle to provide their family with basic needs are at high risk for poor health outcomes. This includes women with unexpected pregnancies, new moms, and low income families.

Data highlights:

- ❖ The rate per 1,000 births from mothers less than 20 years of age in Lincoln County was 30.6 for 2006-2011 and 29.4 from 2011-2015. In 2011-2015 Wisconsin's rate was 19.8.
- ❖ The percent of births in Lincoln County where prenatal care began in the first trimester was (84%, n = 209) in 2006-2010 and (79%, n= 209) in 2011-2015.
- Lincoln County percentages of low birth weight babies was (7%, n=21) in 2006-2010 and (7%, n= 18) in 2011-2015
- Lincoln County averaged 66 people with chlamydia from 2012-2016.
- Approximately 35% of students in grades 9-12 reported ever having sexual intercourse in 2013. This has had little change from 1999 at 42%, but is higher than the state at 35%.
- From 2006-2015, there were 14 infant deaths to Lincoln County residents. An average of 1.4 per year.
- ❖ Percent of births to mothers who reported smoking during pregnancy, was (25%) in 2006-2010 and (23%) from 2011-2015. This is higher that the state with 13% in 2011-2015.
- ❖ In 2011-2015, Lincoln County ranked among the top counties with a high percentage of ACE scores. 22% of Lincoln County residents reported 4 or more ACEs.

Confirmed Cases of Selected Sexually Transmitted Diseases Infecting Lincoln County Residents

	2012	2013	2014	2015	2016	2017	Total
Chlamydia	56	64	86	58	67	46	377
Gonorrhea	4	4	10	13	24	6	61
Syphilis	0	1	0	1	0	0	2

NOTE: 2017 Data was run December 2017 and includes cases up to that date. Source: Wisconsin Department of Health Services

Identified Local Assets and Resources:

- Children's Hospital of WI community services
- Lincoln County Health Department programs
- Early Education, Head Start, and 4K
- HealthFirst reproductive health programs
- Reproductive health curriculum in school
- State of WI requires discussion of birth control in sexual education in school curriculum.

Sources: County Health Rankings 2014; Healthiest Wisconsin 2020; Healthy People 2020, Behavioral Risk Survey, and WI Child Abuse and Neglect Prevention Board.

Oral (Dental) Health

Why it is important?

Good oral health improves the ability to speak, smile, smell, taste, touch, chew, swallow, and make facial expressions.

Good oral health can prevent: mouth pain, tooth decay, tooth loss, oral and throat cancer, birth defects, and other diseases of the mouth.

What does this mean for Lincoln County?

Lincoln County residents experience the following barriers:

- A lack of dental insurance and low reimbursement for dental services.
- Fear of going to dentist.
- Lack of motivation to go to dentist.
- Those with coverage are not seeking care.
- Difficult to access dental care after work.
- Long waiting lists for Bridge Community Clinic.
- Lack of awareness of the need for oral/dental care.
- No transportation to dental clinics.
- Children dependent on parents to seek care.
- Lack of fluoride in rural areas.

Challenges for those at higher risk:

- Those who more likely to have poor oral health include people with disabilities, those with health conditions, lower levels of education and income, and specific racial and ethnic groups.
- A challenge for low income families in Lincoln County is only one dental clinic will take Medicaid.
 This can cause transportation issues if they need to go out of the area for services.

Sources: Healthiest Wisconsin 2020; Healthy People 2020, Wisconsin Department of Health, Environmental Health Profiles 2017, Lincoln County Community Health Survey 2012 and 2015.

Data highlights:

- 94.4% of Lincoln County's population is on fluoridated water. State is at 86%.
- ❖ In 2014, there were 140 emergency visits for non-trauma tooth pain in Lincoln County.
- Percent of Medicaid participants with dental service in 2010 in Lincoln County was 37%.
- ❖ 48% of third graders in the northern region of Wisconsin have treated decay, while 16% have untreated decay, and 54% have experienced dental caries, 2012-2013.

Lincoln County Community Health Survey 2012 and 2015

In 2012, 97.7% (n=635) reported they know the daily recommendations for good dental health (brush teeth, floss, regular dental visits).

In 2012, 85% (n=554) reported that they practice daily recommendations for good dental health (brush teeth, floss, regular dental visits) regularly.

In 2012, 74% (n=651) reported they have a dentist or dental clinic that they visit regularly. In 2015, 65% (n=174) reported they go to the dentist either one or two times a year.

In 2012, 73% (n=634) reported they are covered by public or private insurance that pay part of their dental bills. In 2015, 58% (n=140) reported they had public or private insurance.

In 2012, 71% (n=443) reported the biggest barrier for them and their family to get dental care is costs. In 2015, 29% stated cost as biggest barrier.

In 2012, 31% (N=640) reported they or someone in their family have not received dental care in the last 2 years.

In 2012, 39% (n=338) reported they have had a tooth pulled due to pain.

In 2015, 28% (n=102) reported they lost a tooth due to decay.

- Oral Health Coalition prevention and education programs
- School-base dental sealant program
- Federal Quality Dental Clinics
- Bridge Community Clinic
- Fluoride supplement program
- Good Samaritan Tooth Fairy Fund
- Loan forgiveness for dentists

Nutrition and Healthy Foods

Why it is important?

A healthy diet reduces the risk of a number of chronic diseases, cancers, oral disease, malnutrition, anemia etc.

Good nutrition in children is important for healthy growth and development and maintaining appropriate weight.

Annual health care costs are \$1,400 higher for people who are obese than for those who are not.

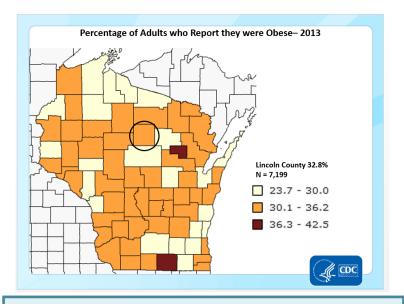
When families have easy access to sufficient and nutritious foods they are more likely to be food-secure.

What does this mean for Lincoln County?

- Lincoln County residents do not eat enough fruits and vegetables.
- Majority of restaurants are fast food.
- People are not motivated to be healthy.
- Family meals aren't happening as frequently and families don't know how to prepare food.
- Lack of access to grocery stores in rural area.
- There is food insecurity among youth.
- There is limited options and costs for fresh local food.

Challenges for those at higher risk:

- People with low income, the elderly, and those who are isolated or living in a rural community have issues obtaining or eating healthy foods.
- Children are dependent on parents/caregivers for healthy foods.
- There is limited availability of healthy food options in Lincoln County.
- Healthy food options are perceived as too expensive to those with a fixed income.



Data highlights:

- ♦ In 2013, 33% of adults reported they were obese in Lincoln County and 14% of high school students.
- ❖ In 2017, 3% of Lincoln County middle school students and 8.3% of high school students reported not eating fruit in the last 7 days.
- In 2017, 5.8% of Lincoln County middle school students and 12.4% of high school students reported not eating vegetables in the last 7 days.
- ❖ In 2017, 16.4% Lincoln County middle school students and 17.2% of high school students reported drinking a can, bottle, or glass of soda one or more times per day in the last 7days.
- ❖ In 2017, 18.4% of Lincoln County middle school students and 38.7% of high school students reported eating meals with 1 or more of the adults in their home 3 or less times a week.

Note: For 2017 data above 774 Lincoln County high school students and 708 middle school students filled out the survey.

- Lincoln County Nutrition Coalition Programs
- UW-Extension Nutrition Classes (Foodwise)
- Community Gardens
- ADRC (Meals on Wheels, Senior Dining Sites)
- Farmers Markets in Merrill and Tomahawk
- Northwoods Breastfeeding Program
- Food Pantries in Merrill and Tomahawk
- Kids Backpack Program
- WIC /Fit Families Program
- Free and reduced lunch at schools
- Summer Free Lunch Program

Physical Activity

Why it is important?

Regular physical activity in adults can lower the risk of premature death, coronary heart disease, stroke, high blood pressure, type 2 diabetes, breast and colon cancer, falls and depression.

Physical activity in children and adolescents can improve bone health, improve cardio-respiratory and muscular fitness, and decrease levels of body fat.

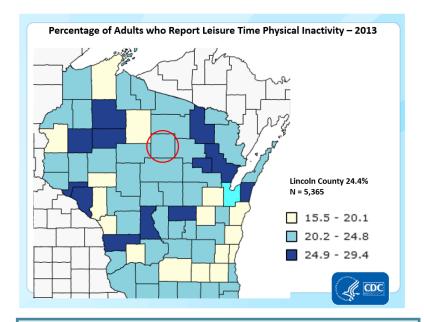
What does this mean for Lincoln County?

- Lincoln County has a lack of affordable winter weather activities.
- Those that live in the rural community have issues with access to safe and child friendly areas for activity.
- Sidewalks are limited or need repair.
- Our community culture doesn't promote physical activity. There is a lack of motivation.
- Many people work physically demanding jobs and are too tired to exercise.
- Increase in recreational screen time among teens, putting them at high risk for low physical activity.

Challenges for those at higher risk:

- Those living in a rural community with little access to exercise opportunities/facilitates can be at high risk for poor health.
- Limited places with free childcare so parents can exercise.
- Lack of physical activity, especially among teens, due to high amounts of TV, computer, videogame or other screen usage; associated with being overweight or obese.

Source: 2015 Behavioral Risk Factor Surveillance System Survey, 2017 Lincoln County Youth Risk Behavior Survey.



Data highlights:

- ❖ In 2015, 31% of adults whose weight classification by body mass index as obese and 35% classified overweight. These are similar to national percentages.
- ❖ In 2015, 14% of students in grades 9-12 had a weight classification per the body mass index as obese and 17% were classified as over weight. These are similar to national percentages.
- ❖ In 2017, 4.5% of Lincoln County middle school students and 11.8% of high school students reported that they were not physically active at least 60 minutes per day on all 7 days before the survey.
- ❖ In 2017, 20.6% of Lincoln County middle school students and 22.6% high school students reported watching 3 or more hours of television per day.

- Availability of walking trails, bike paths, parks/ playgrounds
- Merrill Park and Recreation program
- Employer health incentive programs
- Some day cares now offering yoga
- ADRC exercise programs for older adults
- Fit labs at schools
- Summer school is promoting lifelong physical activities
- UW-Extension Strong Bodies Program in Merrill and Tomahawk

Mental Health

Why it is important?

Approximately 20% of the population experiences a mental health problem during any given year.

Mental health issues are associated with increased rates of risk factors such as smoking, physical inactivity, obesity, and substance abuse. As a result these physical health problems can lead to chronic disease, injury and disability.

What does this mean for Lincoln County?

- There is an increased number of youth that have experienced abuse and/or trauma.
- Students are being bullied.
- There is a lack of mental health providers.
- Telehealth (provider availability).
- Some elderly are living in isolation.
- Providers/agencies are unaware of available services.
- Difficulty navigating access to care.
- Mental health education is limited at school.
- No statistics on coping strategies or benefits of resiliency strategies.
- Midwest mentality take care of vourself.
- Fear of children being taken away if you seek help for a mental illness.

Challenges for those at higher risk:

- Those with a family history.
- Stressful life situations, such as financial problems; being bullied; no support system; a loved one's death or a divorce. This can be more difficult for the low income population.
- Use of alcohol/recreational drugs.
- Being abused or neglected.
- Aging and disabled, living in isolation, chronic illness or lost a love one.

Community Health Survey 2015 <u>Mental</u> Health Data

During the past 30 days..

Duili	ig the past 50 days.		
	Felt tired or had little energy Had trouble sleeping	13.5%	Had trouble concentrating, i.e. reading a newspaper or watching TV
30.2%	Had a poor appetite or ate too much	4.1%	Felt like your family may be better off without you
21.2%	Felt down, depressed, or hopeless	4.1%	Used alcohol or drugs to lessen the feelings of hopelessness or helplessness
20.3%	Had little interest or pleasure in doing things	2.7%	Felt like harming yourself or someone else

Data highlights:

- In 2015, 75% of 689 Lincoln County residents reported that they experienced five or fewer days of not feeling mentally well.
- ❖ From 2006-2010 to 2011-2015, the age adjusted suicide rate in Lincoln County decreased by almost 5% (18.4 in 2006-2010 and 13.5 in 2011-2015).
- ❖ In 2017, 23.6% of Lincoln County middle school students and 34.1% of high school students felt so sad or hopeless almost every day for 2 or more weeks in a row that they stopped doing some usual activities in the last year.
- In 2017, 36.4% of Lincoln County high school students reported never or rarely get the help they need when feeling sad, empty, hopeless, angry or anxious.
- One of the focus group in 2018 stated they fear their children will be taken away if they seek help for mental illness.

Identified Local Assets and Resources:

- Mental Health Counselors in schools
- Lincoln County Mental Health Resource Guide
- North Central Health Care
- Medical College of WI Child Psychiatry
- Medical College of WI Periscope Project
- Trainings on ACEs/Trauma Informed Care
- Lincoln County Mental Health Coalition
- Crisis Intervention Team Training
- Psychiatry residency programs in Wausau

Sources: County Health Rankings 2017; Healthiest Wisconsin 2020; Healthy People 2020; Centers for Disease Control and Prevention, Lincoln County Community Health Survey 2015 and Lincoln County Youth Risk Behavior

Alcohol & Other Drug Use

Why it is important?

An estimated 22 million people per year in the U.S. have drug and alcohol problems. 95% of them are unaware of their problem.

Approximately 88,000 deaths in the U.S. are attributed to excessive drinking annually (2006-2010).

Drug and alcohol use can also lead to costly physical, mental and public health problems such as teen pregnancy, HIV/AIDs and other STDs.

What does this mean for Lincoln County?

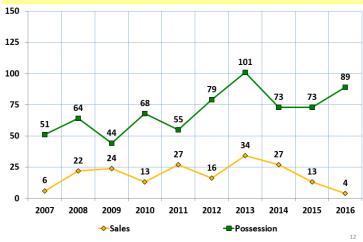
- Increase in heroin, opiates and meth use.
- Increase in drug possession arrests.
- Individuals are overdosing.
- Youth are drinking and driving.
- Bars are community gathering sites.
- High ratio of bars to number of people.
- No alcohol checks are being done.
- Lack of treatment options and costs.
- Limited access to transportation for treatment.

Challenges for those at higher risk:

- A combination of genetic, environmental and developmental factors influence risk level.
- Those with low income, minorities, individuals with mental issues and ACEs are at higher risk to use.
- Youth are more susceptible to peer pressure and make risky behaviors. Also living in a household with a parent/caregiver using a substance increases risk of use.
- More are being prescribed opioids for pain that lead into addiction.

Sources: Healthiest Wisconsin 2020; Healthy People 2020, Center of Disease Control and Prevention, Northwoods Coalition Epidemiological Profile for Alcohol and Other Drugs 2017, Lincoln County Social Norms Survey 2016.

Number of Adult Drug Arrests in Lincoln County



Source: Wisconsin Department of Justi

Data highlights:

- ♦ 151 alcohol licenses were issued from 2014-2015 in Lincoln County.
- From 2012-2016, there were 11 alcohol-related fatalities in Lincoln County and from 2007-2011 there were 6.
- ❖ In 2014 there were 308 alcohol –related hospitalizations and 51 drug related hospitalizations.
- ❖ In 2016, there were 237 OWI arrests per 100,000 population.
- From 2012-2014, the prevalence of binge drinking in Lincoln County among adults was 20%.
- From 2014-2016 there were 230 arrests in Lincoln County for methamphetamine including paraphernalia, possession and intent to deliver.
- Lincoln County Neonatal Abstinence Syndrome had a rate of 8.2 per population from 2009-2014.
- ❖ In 2016, Lincoln County 4% of middle school students used marijuana and 18% of high school students in the last 30 days.
- ❖ In 2016, 9% of middle school and 33% of high school students had at least one drink of alcohol in the last 30 days.

- Lincoln County Drug Free Coalition efforts
- DARE Program
- Medication Drop Box program
- Increase in Canine Units
- Increase in first responders carrying Narcan
- Merrill Safe Ride Home
- · Local youth drug and alcohol data
- Social Norms Campaign

Tobacco

Why it is important?

Quitting the use of tobacco is the single most effective way in preventing diseases such as cancer, diabetes, heart disease and death in the U.S.

Every year in Wisconsin there are over 6,600 deaths due to tobacco use (2008-2012 data); \$3 billion in direct health care costs; and \$1.6 billion in lost productivity. Results of tobacco use accounts for 11% of Medicaid costs and nearly 10% of Medicare costs.

Secondhand smoke exposure can cause chronic disease, asthma, ear infections, and Sudden Infant Death Syndrome (SIDS).

What does this mean for Lincoln County?

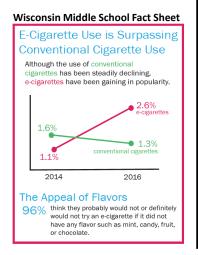
- Increase in youth using e-cigarettes.
- A higher percent of pregnant women that smoke, increasing risk for unhealthy birth outcomes.
- Low birth weight among infants whose mother smoked during pregnancy.
- A lack of regulation on e-cigarettes.
- No health data for e-cigarettes and vapor products.
- Individuals can purchase tobacco products online.

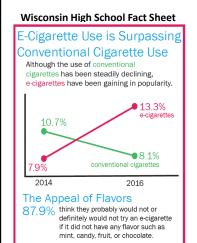
Challenges for those at higher risk:

- Tobacco is an industry that directly targets youth and minorities as well as males, disabled, and LGBT.
- Others also at risk include those exposed to secondhand smoke involuntarily such as children.

Sources: Economic Benefits of Preventing Disease (National Prevention Strategy); Healthiest Wisconsin 2020; Healthy People 2020; Centers for Disease Control and Prevention, Wisconsin Department of Health, Burden of Tobacco 2015, and Lincoln County Lincoln County Social Norms Survey 2016.

2016 Youth Tobacco Survey





Source: Wisconsin Department of Health Services

Data highlights:

- ❖ During 2008-2012, an estimated 6,678 people died from illnesses directly related to smoking each year, constituting nearly 15% of all annual deaths in Wisconsin among persons aged 35 years and older.
- ❖ In 2015 it was reported 11% of Wisconsin adults smoke everyday.
- ❖ The percent of successful tobacco purchases by minors in Lincoln County was 13.8% (2015), 10% (2016), and 11% in 2017.
- ❖ In 2016, 5% of middle school students and 12% of high school students in Lincoln County reported smoking cigarettes during the last 30 days; 2% of middle school students and 13% of high school students reported using smokeless tobacco; and 7% of middle school and 23% of high school students reported using electronic vapor products. Lincoln County is higher than the state which is at 8% for smokeless tobacco use.
- From 2006-2010, 25% of births occurred to mothers who reported smoking during pregnancy, from 2011-2015 it was 23%. This is higher than the state with 13% in 2011-2015.

- Northwoods Tobacco Free Coalition Programs
- Lincoln County Drug Free Coalition Programs
- Smoke Free Air Law
- Coverage for tobacco cessation medications

Phase 2

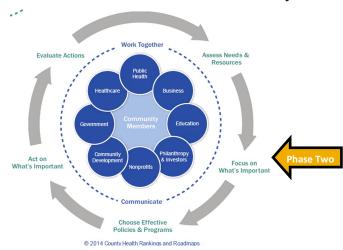
Focus on What is Important

The last phase of the Community Health Assessment is to <u>Focus on What is Important</u>. The following are the steps taken by community partners and members.

Step 1: Identify a set of priority community health issues to address.

Step 2: Align the local health improvement plan with state and national priorities.

Step 3: Summarize and disseminate the results for the assessment to the community.



1. Identify Priority Issues

Once all the community data are reviewed, both primary and secondary, the partners collaboratively determine which issues to focus on in the upcoming years. These issues were chosen based on the following criteria:

- The number of people impacted.
- The seriousness of the health problem.
- If there are known interventions to address the problem.
- If resources available to address the health problem.
- The importance to the community and wiliness to be active and want to make a difference.

Each partner was given an opportunity to vote for their top health priorities based on all of the data shared through the process including community input and the criteria mentioned above. See Appendix F. The following health priorities were identified.

- Alcohol and Other Drugs
- Mental Health
- Nutrition and Healthy Foods
- ❖ Oral (Dental) Health

Further discussions during the development of the CHA concluded that the following overarching priorities need to be addressed.

- Social Determinants
- Health Equity

2. Align with State and National Priorities

The top health priorities chosen for Lincoln County align with the Healthiest Wisconsin 2010 and Healthy People 2020. This alignment will be evident with the completion of the Community Health Improvement Plan (CHIP).

3. Summarize and Disseminate

Lincoln County residents and community partners came together to both provide and analyze health data and health concerns for the Lincoln County population. A theme of specific populations for whom there was an inequitable share of poor health outcomes and the community factors that may have lead to these inequalities became evident. Those groups specifically mentioned repeatedly by both community members and partners were low income, elderly, and Hispanics. The health priorities selected reflect the health concerns that are often the root cause of other concerns within Lincoln County.

Before finalizing this report, preliminary findings will be shared to all community members for their input to ensure that the community as a whole is in agreement with the assessment and health priorities. Healthy People Lincoln County Partnership Committee, along with community stakeholders and the public, will begin to develop the Community Health Improvement Plan. Current coalitions of each health priority will meet to develop an action plan for the CHIP based on the community health assessment, resources and assets, and evidence based practices. Strategies will include policy work and address social determinants of health. Final results will be a catalyst for the next six years.

Appendix A

Community Forum Summary 2017-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 August of 2017. This allowed community members from a wide variety of agencies and organizations to give input on the health needs and issues facing Lincoln 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 Drugs

Strengths Weaknesses -Lincoln County Drug Free Coalition programs -Drug possession arrest increasing -Law Enforcement programs (Canine Units, -Individuals are overdosing -Lincoln County youth are drinking and driving DARE) -More first responders carrying Narcan -Culture of Lincoln County -Merrill Safe Ride Home -Lack of treatment options and costly -No alcohol checks being done -Social Norms Campaign **Opportunities** Challenges -Drug Courts -Data collection is very broad -Low number of residents per liquor license -Increase access to Narcan -Offer DARE or equivalent program after 5th -Increase in use of heroin, opiates and meth -Legalization of marijuana negative impact grade -Increase support groups and programs including inmates

Health Priority 2: Mental Health

Strengths		Weaknesses
-Mental Health Counseld -Lincoln County Mental programs and resour -Medical College of WI p -Training provided to on	Health Coalition rces programs	-Lack of mental health providers/waiting lists -Providers/agencies are unaware of services -Difficulty navigating the mental health system -Midwest mentality – take care of yourself
Opportunities		Challenges
-Need more education for -Need more online resort-Mental health courses in	urces	 -Increased number of youth abuse and trauma -Data is still collected via landline vs cellphone -No statistics on coping strategies or benefits of resiliency strategies -Some elderly living in isolation -Mental health not included in school classes

Health Priority 3: Nutrition and Healthy Foods

- -Lincoln County Nutrition Coalition programs
- -UW-Extension nutrition classes
- -ADRC Programs (Meals on Wheels, meal sites)
- -Farmers Markets
- -Food Pantries
- -Kids Backpack program
- -School food programs
- -WIC /Fit Families program

Weaknesses

- -Low intake of fruits and vegetables
- -Family meals aren't happening as frequently
- -Youth have unhealthy food habits
- -Food insecurity among youth

Opportunities

- -Need more education on food preparation and -Access to grocery stores in rural area cooking
- -Pursue Breastfeeding Coalition
- -Work with schools to get families are completing forms for free and reduced lunch

Challenges

- -Limited options for fresh local food
- -Cost vs shelf life

Health Priority 4: Oral (Dental) Health

Strengths

- -Oral Health Coalition Programs
- -Lincoln County Health Department Programs
- -Good Samaritan Tooth Fairy Fund
- -Federal Quality Dental Clinics

Weaknesses

- -Those with coverage are not seeking care
- -Long waiting lists for Bridge Community Clinic
- -People have fear of going to dentist
- -Lack of motivation to go to dentist

Opportunities

- -Services for those without dental insurance
- -Combine services for "one stop shopping"
- -Work with WIC
- -Sealants program for adults
- -Education on dental care and its overall impact on health
- -Offer more programs that encourage dentists to practice in northern WI

Challenges

- -Difficult to access dental care after work
- -Shortage of dentists that accept MA
- -Medicare doesn't cover dental

Community Forum Summary 2017—Other Health Issues

Strengths, Weaknesses, Opportunities, and Challenges (SWOC)

Social Determinants

Strengths

- -Strong volunteer network
- -Recipients of good community grants
- -Large number of non-profit services

Opportunities

- -Better jobs
- -Better housing
- -Local Boys and Girls Club
- -Transportation options
- -Mentoring programs
- -Head Start model implemented in other grades
- -More volunteer, employment, training opportunities

Built Environment

Strengths

- -Walking and bike trails
- -Lots of wooded space
- -Updated Tomahawk bridge
- -Libraries in Tomahawk and Merrill
- -Community groups encouraging city development
- -Local Newspapers

Opportunities

- -Merrill High School to allow community members to use their gym before or after school
- -Improve sidewalks
- -Expand local food sources
- -Less emphasis on phones and tablets
- -Affordable internet

Access to Care

Strengths

- -St. Vincent Free Clinic
- -Nurse lines
- -Same day appointments/ online scheduling
- -Transportation programs

Opportunities

- -Increase health care hours of operations for after work
- -Getting parents to get the care for their child
- -Adequate insurance coverage and transportation
- -Need to do a better job of promoting existing programs
- -Hospital needs to be more than band aid station
- -Programs that highlight health literacy

Communicable Diseases

Strengths

- -Medical Providers promote immunizations
- -Best Practice disease investigation
- -Immunization available
- -ARCW and HealthFirst Hepatitis C/HIV testing

Opportunities

- -Increase sharps disposal containers throughout the county and needle exchange.
- -Jobs with sick leave or penalties for being off work
- -Increase community education on Hepatitis C
- -Encourage flu and pneumonia shot for adults

Environmental And Occupational Health

Strengths

- -Health Department has a Registered Sanitarian and Water Lab
- -All septic systems are inspected by Zoning
- -Good detection of childhood lead exposure
- -High percentage have fluoride in water supply
- -Low arsenic levels

Opportunities

- -Increase access to low interest loans for fixing septic, home, etc.
- -Offer free carbon monoxide detectors
- -Increase education about the importance of testing water annually
- -Develop healthy home checklist and promote healthy home visits

Injury and Violence

Strengths

- -ADRC Programs
- **-UW Extension Programs**
- -Lincoln County Death Review Team
- -HAVEN
- -DNR Hunter and Snowmobile Safety classes
- -Ascension Good Samaritan Hospital Programs

Opportunities

- -Offer more evidence based fall prevention programs
- -Increase ATV Safety courses
- -Increase bullying education and prevention efforts
- -Human trafficking needs more attention
- -ATV Trail monitoring

Healthy Growth and Development

Strengths

- -Children's Hospital of WI Community Services
- -North Central Health Care Programs
- -Lincoln County Health Department programs
- -Early Education; Head Start and 4K

Opportunities

- -Need more education for new parents
- -Need more online resources

Reproductive And Sexual Health

Strengths

- -Lincoln County Health Department programs
- -HealthFirst Reproductive Health programs
- -State of WI requires discussion of birth control in sexual education curriculum

Opportunities

- -More education directed to LGBT community
- -More outreach is needed to older adults
- -Limited means for preventative screening, contraception and prenatal care
- -Add sexual health questions to YRBS
- -Family Support outside of clinics and hospitals

Chronic Disease

Strengths

- -ADRC programs
- -Good number of health care providers
- -Percentage of adults getting cholesterol screened

Opportunities

- -Hub for coordinating care
- -Look at the entire person when providing care
- -Provide affordable prevention screening
- -Transportation to get to appointments

Physical Activity

Strengths

- -Availability of walking trails, bike paths, parks
- -Park and Recreation programs
- -Employer health incentives
- -Some day cares now offering yoga
- -ADRC has exercise programs for older adults
- -Fit labs at schools
- -Summer school are promoting lifelong activities

Opportunities

- -Increase physical activity education
- -Focus on lifelong physical activity vs sports; increase non competitive sports
- -Promote winter activities
- -Change physical activity mentality, doesn't have to be intense/just move more
- -Develop a guide with what resources are available per season
- -Improve sidewalks to promote walking
- -Interconnect walking paths
- -Increase childcare at fitness centers/gyms

Tobacco Prevention and Control

Strengths

- -Northwoods Tobacco Free Coalition programs
- -Lincoln County Drug Free Coalition programs
- -Smoke free air law
- -Local data from the Social Norms survey

Opportunities

- -Increase enforcement of smoke free air law
- -More regulations/laws needed for electronic tobacco projects
- -Exposure to secondhand smoke at home
- -Increase education to pregnant moms and youth that smoke
- -More education to store staff that sell tobacco products (high staff turnover)

Appendix B

Lincoln County Community Health Opinion Survey Summary of Results 2017

The Healthy People Lincoln County Community Health Opinion Survey 2017 was completed by 689 Lincoln County residents from June 16 to July 28. There were 398 people who responded to the survey online and 291 who responded with hard copy surveys. Those 15 years of age and older completed the survey.

The following is a list of organizations that distributed and collected the survey: Lincoln County Health Department, Oak Park Dental, Lincoln County Service Center, Retired Teachers Association, PCA, Lincoln County 4-H, Redeemer Church, Merrill Area Recreation Center, Family Services, Parkside Preschool, Tomahawk Senior Center, Adult Disability Resource Center, North Central Health Care, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Ascension Merrill Clinic, Marshfield Clinic Merrill Center, Dave's County Market, Nelson's County Market, SEMCO, St Mary's Catholic Church, Trinity Church, Tomahawk Library, and TB Scott Library.

Paper surveys were distributed to organizations that serve low income residents of Lincoln County with 40 participating in the survey. Data shown in **red** in the charts below reflect answers from low income participants from the following organizations Bridge Dental Clinic, Community Action Program, Tomahawk Annex, Our Sisters House, Social Services, and the Merrill Food Pantry. For complete copy of the survey results visit www.lincolncounthealthdepartment.com.

1. Please mark the top three strengths that make Lincoln County a healthy place to live.

	Number of responses (N=836) (N=46)	% Responses
Access to parks, trails, walking paths	396 <mark>16</mark>	20% <mark>16%</mark>
Good schools	230 <mark>4</mark>	12% <mark>4%</mark>
Clean environment	210 <mark>13</mark>	11% <mark>13%</mark>
Access to Health Care	13	12%

Of the residents that filled out the survey low income survey participants identified access to health care as a top strength while total survey participants reported good schools. Both agreed access to parks and a clean environment as a top strength.

2. Please mark the top three health challenges affecting Lincoln County residents.

	Number of Responses	% Responses
Alcohol and other drug abuse	463 <mark>17</mark>	23% 16%
Overweight/obesity	212 <mark>5</mark>	11% <mark>5%</mark>
Aging health issues	172 <mark>11</mark>	9% <mark>10%</mark>
Chronic Disease	7	6%

Of the residents that filled out the survey low income participants identified chronic disease as a top barrier while total survey participants identified overweight/obesity as a health challenge. Aging health issues and alcohol and other drug abuse are identify as top health challenges by all participants.

3. Please mark barriers that make it difficult for you to be healthy.

	Number of Responses	% Responses
Difficulty in handling stress	146 <mark>16</mark>	12% <mark>15</mark> %
Lack motivation	144 <mark>10</mark>	11% <mark>9%</mark>
Unable to work	17	15%
Transportation	10	9%

All participants including low income residents identified stress and lack of motivation as a top barrier. In addition, low income survey participants identify unable to work and transportation as a barrier to being healthy.

4. Please circle your response below.

	Agree	Disagree
Are overweight	78% (540)	11% (76)
Are over weight	70% (28)	18% (7)
Don't exercise enough	75% (520)	11% (74)
Don't exercise enough	68% (27)	20% (8)
Use tobacco	75% (514)	13% (88)
USE LUBACCO	65% (26)	23% (9)
Drink alcoholic beverages more than they should	73% (506)	13% (90)
Drink alcoholic beverages more than they should	55% (22)	30% (12)
Are affected by drug use or abuse	72% (499)	13% (91)
Are affected by thing use of abuse	55% (22)	33% (13)
Don't eat healthy	72% (496)	14% (99)
Don't cat nearthy	55% (20)	35% (14)
Are affected by depression, mental health issues and	62% (434)	15% (101)
suicide	63% (25)	30% (12)

Lincoln County residents provided their health opinion on the health behaviors listed above. The results reflect that 50% or more of the participants surveyed agree that the above behaviors are present in Lincoln County.

5. Please mark your main type of health care coverage?

	Number of Responses (N=562) (N=51)	% Responses
Health insurance sponsored by employer	328 <mark>(2)</mark>	47.61% <mark>3.28%</mark>
Medical Assistance (Medicaid)	25 <mark>(19)</mark>	3.63% <mark>31.15%</mark>
Badger Care (Medicaid)	57 (19)	8.27% 31.15%
Medicare	152 <mark>(11)</mark>	22.06% 18.03%

Health care coverage is prevalent through an individual's employer except those that are low income reported a higher number on Medicaid and Badger Care.

6. How would you rate your overall health?

	Number of Responses (N=642) (N=39)	% Responses
Excellent	44 (1)	6.39% <mark>2.5</mark> %
Very Good	231 (10)	33.53% <mark>25%</mark>
Good	268 (13)	38.90% 32.5%
Fair	80 (11)	11.61% <mark>27.5</mark> %
Poor	23 (4)	3.34% <mark>10%</mark>

79% of participants of the survey reported good to excellent health. This compares to 61% of the low income participants of the survey.

Appendix C

Key Informant Interview Summary 2018

Key Informant Interviews took place from January to March 2018. This included face to face meeting with individual leaders and decision makers in our community. The following are the list of agencies that participated in the Key Informant Interviews: St. Vincent de Paul Free Clinic, St. Vincent de Paul Outreach, Merrill United Way, Tomahawk Schools, St. Stephen's Church, Merrill Area Public Schools and Board, Comunidad Hispania, Adult and Disability Resources Center, Ascension Merrill Clinic, Community Action Program, Lincoln County Board, Ascension Good Samaritan Hospital, Ascension Sacred Heart, City of Merrill, Our Sister's House, PCA, North Central Health Care, City of Merrill and City of Tomahawk.

What do you	-Different organizations available to the public that provide variety of resources.
consider some	
of the	-Strong coalitions.
strengths in	-Good amenities (pool, parks, trails, library, ice rinks).
our	-Small town connections-local supportive businesses-investment by residents.
community/	-Close to larger towns with more resources.
county?	-Bus service in Merrill.
	-Lincoln Industry
	-Merrill Enrichment Center
	-Schools are (strong) doing a good job of educating youth.
	-People willing to help, volunteer and get involved.
	-Mentality in the city; want to be progressive.
	-Meaningful relationships.
	-Cost of living low.
	-Lots of activities available.
	-Amazing natural resources.
What do you	-Transportation
What do you consider some	•
_	•
consider some	-Lack of affordable housing options. Homelessness -Substance Abuse -Hospital limited with services (no ICU, no birthing center).
consider some of the challenges in our	-Lack of affordable housing options. Homelessness -Substance Abuse -Hospital limited with services (no ICU, no birthing center)High health care costs.
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consider some of the challenges in our community/	-Lack of affordable housing options. Homelessness -Substance Abuse -Hospital limited with services (no ICU, no birthing center)High health care costsLack of educationLack of hope in the futureMisconception of immigrants/immigration, unwelcome to "outsiders"Poverty (cannot afford basic needs) and lack of understanding of itMisplaced energy with a disconnected community that resists changeRestrictive government policies and protocols that prohibit or make change and
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consider some of the challenges in our community/	-Lack of affordable housing options. Homelessness -Substance Abuse -Hospital limited with services (no ICU, no birthing center)High health care costsLack of educationLack of hope in the futureMisconception of immigrants/immigration, unwelcome to "outsiders"Poverty (cannot afford basic needs) and lack of understanding of itMisplaced energy with a disconnected community that resists changeRestrictive government policies and protocols that prohibit or make change and growth difficultWeather -Separation between Merrill and TomahawkUnable to attract professionals to area. No well-paying employment or sustaina-
consider some of the challenges in our community/	 -Lack of affordable housing options. Homelessness -Substance Abuse -Hospital limited with services (no ICU, no birthing center). -High health care costs. -Lack of education. -Lack of hope in the future. -Misconception of immigrants/immigration, unwelcome to "outsiders". -Poverty (cannot afford basic needs) and lack of understanding of it. -Misplaced energy with a disconnected community that resists change. -Restrictive government policies and protocols that prohibit or make change and growth difficult. -Weather -Separation between Merrill and Tomahawk.

- Mental health issues increasing, not enough services, resources, don't except

-Lack of funding in all areas.

type of insurance.

Key Informant Interview Summary 2018

Continued:	-Lack of care for elderly population/ isolated and transportation issues.
	-Employment issues for disabled.
What do	-Lack of support groups.
you consid-	-Lack of health care providers in Tomahawk.
er some of	-Declining enrollment, aging population, need to bring youth in.
the	-Need advocates/mentors to help people.
challenges	-No good role models for kids (need a Boys and Girls Club, parental education-all
in our	levels), limited resources for youth activities.
communi-	
ty/ county?	
What do	-Mental Health
you consid-	-Caregiver burnout.
er major	-Diabetes
health con-	-Health is poor once residents get to their 40s
cerns for	-Alcohol and other substance abuse.
communi-	-Poor nutrition- healthy eating not affordable (food pantry needs more
ty/county	perishables).
residents?	-Obesity unhealthy lifestyles-inactivity-intergenerational patterns-happening ear-
residents.	lier in life.
	-Homelessness-hunger
	-Oral health- challenging to access Bridge Dental Clinic, lack of access.
	-Poor family structure/dysfunctional families.
	-Lack of preventative screening for women.
	-No preventative action against mental health issues and drugs only reactive.
	-Financial resources
	-Noncompliant patients/lack of understanding/no follow thru.
	-Increase in health insurances costs and deductibles.
	-Medicaid use the emergency room to avoid paying up front and deductible.
	-Affordable medication.
What do	-Up to the individual to utilize resources (poor personal motivation).
you consid-	-Access to health care.
er some of	-Lack of education for low income.
the barriers	-Mental health stigma issues.
for	-Need more AODA resources.
communi-	-Difficult to reach to educate public on resources available/lack of understanding
	of resources and of health care.
ty/county	
residents to	-Rural area equals isolation.
be healthy	-Poor broadband access.
that are not	-Stagnant and complacent social forces.
being	-No promotion of healthy lifestyles lack of nutrition education/lack of healthcare
addressed?	education.
	-Lack of trust to have agencies involved with "home" life.
	-Lack of homeless shelter.
	-Need more things to do in the community (YMCA, volunteer opportunities).
	-Lack of exercise and activity-lack of easy access to.
	-Free clinic too restrictive (time, access limited for working people).
	-Limited options for troubled students.

Key Informant Interview Summary 2018

Continued:	-Poor Medicaid acceptance in health organizations.
	-Farmer's market too small.
What do	-Lack of insurance coverage.
you consid-	-Increase of suicides.
er some of	-increase of suicides.
the barriers	
for .	
communi-	
ty/county	
residents to	
be healthy	
that are not	
being	
addressed?	
Why are	-Funding (lack of), limited resources, tax levy freeze.
barriers not	-No affordable weight loss program.
being	-Lack of nutrition education.
addressed	-Lack of time and money for residents to make healthy choices.
or ad-	-Lack of understanding differences and programs.
dressed	-Barrier to change- family barriers.
adequately?	-Lack of planning or understanding resources.
aucquatery.	-Town myths
	-No incentive to come to our community.
	-Parental mistrust of the schools.
	-Generation cycle (continues)
	-Basic needs come before health/wellness.
	-Need to impact broader audience, make healthy "cool".
	-Government and politics
	-Lack of motivation to work– government assistance is better reimbursement
	than a job.

Appendix D

Focus Group Summary 2018

The following target populations participated in a focus group. Focus groups took place from January to March 2018. This included a group discussion of 8-10 people. Participants included: Kinship of Tomahawk Youth, Merrill High School Students, Tomahawk Senior Center, and Pine River School for the Young Learner Parents.

What do you consider some of the strengths in our community/ county?

- -Helpful community especially in times of need (natural disaster).
- -Variety of events available, a good park system River Bend Trail, Ice Age Trail.
- -Easy to get around (but not when it's cold).
- -Bad things don't happen here.
- -Good volunteer groups.
- -People know each other (strong relationships).
- -Friends, good markets/stores.
- -Riverside Athletic, other clubs that are affordable for outside/inside activity.
- -Resources: multiply clinics, convenient that services are in town WIC, Badgercare, and Bridge Dental Clinic.
- -Senior Day Care Center, Head Start, Lincoln Industry can enjoy their peers.
- -Health stores i.e. Mustard Seed, Golden Harvest and County Market, Farmer's Market vouchers (surprise we have stores like this in Merrill).
- -School Forest
- -Walkable community.
- -Soup kitchen

What do you consider some of the challenges in our community/ county?

- -Not much to do for youth/kids.
- -Drug/alcohol problems.
- -Limited mental health services.
- -Limited dental care.
- -All major medical care is transferred to Wausau.
- -Gym options not available in the summer (schools) or too expensive (Riverside).
- -Stagnant population, need new businesses, occupations limited.
- -Transportation a problem, have to rely on parents if live out of town.
- -Slippery, unsafe roads (farther north, worse they are).
- -Need a better school lunch.
- -Limited special needs access at parks.
- -Economic reasons very hard to stay living in Merrill.
- -Poor housing options, no quality affordable places.
- -Wish programs were local not regional (ADRC).

Focus Group Summary 2018

Do you feel people in Lincoln County are more healthy or less healthy than people that live in other areas and why?

LESS HEALTHY

- -School lunches too healthy, youth don't like, are not able to prep own lunch at home and end up going to fast food places.
- -No healthy food options when going out to eat.
- -Physically the same health as others, but mental health worse.
- -Midwest has long hard winters. Culture of Wisconsin is to drink.

MORE HEALTHY

- -Northern Wisconsin is a lot healthier on younger stand point because we have a lot of people who work on farms and laboring jobs.
- -We swim and fish.
- -I see people running, and outside being active.
- -We're not in a big city, we can grow our own food.

Do you feel people in our community eat healthy and have healthy foods available to them?

NO

- -No fresh, healthy produce available, and available food is too expensive.
- -Time is a factor for prepping/cooking healthy meals.
- -Price is more of a factor than health when choosing meals/grocery shopping.
- -Sometimes fast food can be cheaper than homemade meals.
- -Growing season is too short.
- -Our restaurants don't have healthy, affordable, good options.
- -Need to know how to prepare.

YES

- -Meals on Wheels, Farmers' Markets
- -Healthy options are available.

Do you feel people in our community are mentally healthy?

YES

- -It's not as hectic in town.
- -For the most part people are mentally well.
- -Social time is important.

NO

- -There is not a lot for youth to do here.
- -Mental health resources are limited. Schools are the main source of help.
- -Mental health facilities are in Wausau.
- -Domestic violence is high.
- -Increase in drug use and crime.
- -Afraid kids will be taken away if you seek help.

Do you feel people in our community use too much drugs and alcohol?

YES

- -Our community uses too much drugs and alcohol.
- -Easiest way to combat is to give us other things to do.
- -When overusing or selling, offenders do not get punished enough.
- -It keeps you warm, we have a lot of bars.
- -Ties into mental health.
- -Easy access

Focus Group Summary 2018

Do you feel people in our community are take care of their teeth?

YES

- -Better dental care in Wausau.
- -Very hard to find insurance coverage for a dental surgery.
- -Expensive to get good dental care beyond basic care.
- -Hard to find dental products at the grocery store.
- -You see a lot of people with black or missing teeth.
- -People just don't take care, don't floss.

NO

-People care about how they look so care about their dental care.

What resources do we have in our community that seem to be working to address these issues?

- -Our doctors are really good, including mental health providers.
- -School counselors try very hard to help but can only help to a point where need someone else at that point.
- -Riverside helps the community, but is expensive.
- -We have 2 fitness places.
- -Kinship, Boy and Girl Scouts, We have "DARE" in 5th grade.
- -Therapy/Counseling.
- -We have dentists, doctors, chiropractors, and a hospital.
- -Health Food Store
- -Food pantry
- -Multiple stores have pamphlets and interactive educational displays.
- -Fishing is a life skill; when you're feeling down, go fish!
- -HAVEN domestic violence- they do what they can.
- -Head Start good foundations.
- -Lincoln Industry and Group Home Special Needs.
- -Health Service Building in town easy accessibility means a lot.
- -Need social events
- -Kinship only for those in need.

What other resources would you suggest that aren't currently available?

- -Trampoline Park.
- -Bigger, better skate park.
- -Flex 14 schedule back at the high school.
- -Adult playground
- -More community events (i.e. Yoga in the Park, 5 K Runs/Walks, Walk Your Dog Around Council Grounds).
- -Bigger supermarket with more fresh and diverse groceries.
- -Different stores that appeal to more people we only have Wal-Mart and County Market.
- -Have to go to Wausau for nicer restaurants and here we only have fast food.
- -Information on the negatives of coffee drinking.
- -More AA, quit smoking, and drug and alcohol supports groups, "COPS" education for youth.
- -Personal trainers
- -A healthy economy which may include building for stores or hotels (some don't want Tomahawk to expand).
- -More fruits and vegetables, more naturally grown foods we could grow here, more whole foods.
- -A healthy food restaurant and an organic restaurant.
- -Expand the Humane Society.

Focus Group Summary 2018

In your opinion, why are they not being addressed or addressed adequately?

- -Lack of people/population
- -Lack of funding/money.
- -Retirement community
- -Community focuses on sports and not much else. Need community leaders.
- -Youth not involved because all boards are filled with older people.
- -Potential is there (community needs to collaborate).
- -No one is trying.
- -People use the term "too expensive" when talking about health, but choose unhealthy expensive things like cigarettes.
- -Gas stations promote tobacco products (except Kwik Trip).
- -Childcare is too expensive- needed to quit job.
- -Merrill prioritization has been raising buildings.
- -Transportation
- -Life skills are being lost.

Anything else?

- -We need renewable energy and a cleaner environment.
- -We need better school lunches and a professional chef.
- -We need a local car dealership (Tomahawk).
- -ER services an asset.
- -ER services not helpful.
- -The attic those who want help can.
- -AA support group at a church, some people will not go into a church for this support group.
- -Need to travel for health care.

Appendix E

Data Source Definitions

Centers of Disease Control and Prevention	CDC provides access to numerous reports and databases related to health of our Nation i.e. National Diabetes Statistics Report, 2014.
County Health Rankings	Data provided by UW—Wisconsin which ranks the health outcomes at the county level in a ranking method from 1-72.
Lincoln County Community Health Opinion Survey	Lincoln County Community Health Opinion Survey completed in 2012, 2015, and 2017.
Lincoln County Key Informant Interviews and Focus Groups	Data collected by the Healthy People Lincoln County Partnership Group. This included Key Informant face to face interviews as well as targeted focus groups of 8-10 people.
Healthiest Wisconsin 2010	A five year health improvement plan for the state of Wisconsin.
Healthy People 2020	Science-based 10 year plan to improve the health of all Americans.
Wisconsin Immunization Registry	WIR is a database that tracks immunizations of Wisconsin's children and adults.
WI Electronic Disease Surveillance System	WEDSS is a tool used for reporting, investigation, and surveillance of communicable diseases in Wisconsin.
Behavioral Risk Factor Surveillance System	The BRFSS is one of the largest health surveys conducted in the United States. The BRFSS collects data regarding an individual's health risk behaviors, the use of preventive services, and chronic health conditions.
U.S. Census Bureau	Demographic (Census) data on the United States Population.
U.S Department of Health and Human Services	Provides access to numerous reports and databases related to health of our Nation i.e. Economic Benefits of Preventing Disease.
Lincoln County Youth Risk Behavior Surveillance System	The YRBSS is similar to the BRFSS; however, it is a school-based survey that only monitors data related to health- risk behaviors in youth.
WI Department of Health Services	WI DHS provides access to numerous reports and databases related to the health of Wisconsin residents. i.e. Burden of Falls, Burden of Tobacco WI Child Abuse and Neglect Prevention Board.
Wisconsin WINS	WI WINS provides data related to the percentage of retail stores selling tobacco products to minors through annual compliance checks.
WI Interactive Statistics on Health	WISH providers information about health indicators in Wisconsin using protected databases otherwise not accessible.
WI Environmental Public Health Tracking	WI Environmental Public Health Tracking is a comprehensive and update environmental health data from the Wisconsin Department of Health.

Appendix F

Lincoln County Community Forum Prioritization—Final Tally

Weighted Rank	Healthiest Wisconsin 2020 Focus Areas	Number of Votes			Weighted Score (1=3 pts, 2=2 pts, 3=1 pt)	
		1	2	3	Total	
1	Mental Health	11	13	4	28	63
2	Alcohol and Drug Use	7	4	8	19	37
3	Nutrition and Healthy Foods	4	2	4	10	20
4	Social Determinants of Health	3	3	4	10	19
5	Chronic Disease Prevention and Management	2	2	4	8	14
6	Oral Health	3	1	2	6	13
7	Access to Care	1	2	3	6	10
8	Healthy Growth and Development		2		3	7
9	Built Environment	1		1	2	4
10	Reproductive and Sexual Health		1	1	2	3
10	Tobacco Use and Exposure		1	1	2	3
12	Injury and Violence Prevention		1		1	2
12	Physical Activity			2	2	2
	Communicable Diseases				0	0
_	Environmental and Occupational Health				0	0



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Healthy People Lincoln County 2018-2023 Community Health Improvement Plan

Creating a healthier place where you work, learn, live and play.



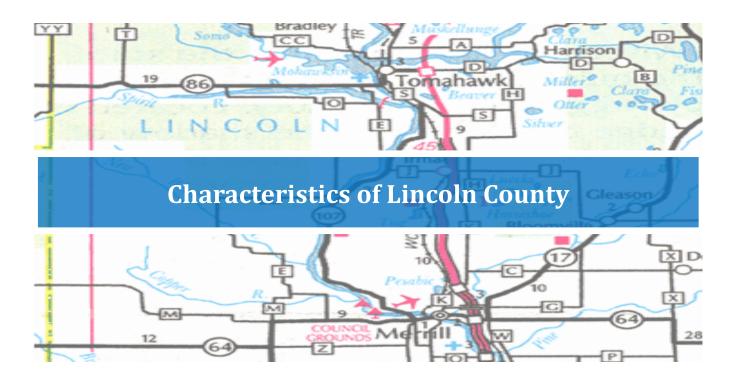




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- Lincoln County's population is primarily non-Hispanic white (97%).
- The elderly population is anticipated to increase by 62% when compared from 2010 to 2030.
- Top employment opportunities are in manufacturing, government, and health care.
- At the time of this report, the unemployment rate at was 5.2%, which is an improvement from 11% in 2009.
- When residents were surveyed in 2017, they shared that their top barriers to being healthy were an inability to work, a lack of motivation, and stress.
- In the 2017 survey, residents identified parks, trails/paths and good schools as strengths for Lincoln County.
- According to data released in 2015 Lincoln County has a high percentage of adults that have experienced Adverse Childhood Experiences (ACEs). ACEs are linked to risky health behaviors, chronic health conditions, low life potential, and early death.
- In 2017, it was reported that the number of premature deaths (years of potential life lost before age 75) in Lincoln County (6,700 per 100,000) is higher than the state of Wisconsin (6,000 per 100,000).



It takes motivation from an entire community to make a healthy community.

How can you contribute to making a healthier community?

Become an Advocate!

Educate your social circle including your family, your friends and your coworkers! Inform anyone you can get to listen about the possibilities outlined in this plan.

Take Action!

Whether you hold a neighborhood meeting about starting a community garden, or present the idea of increasing oral health education to a parent organization—remember, every effort makes a difference toward the collective good of our community.

What can you do to invest in your community as an agency or business?



Source: Centers of Disease Control and Prevention

Listen!

Review this plan and see how much of your strategic planning reflects the desires of the community you are serving.

Innovate and Partner!

Consider addressing some of the strategies discussed in the plan. Maybe you are already working on some of the pieces but need support to help complete or enhance the program. Contact members of Healthy People Lincoln County to help identify partnerships you can get involved in to successfully implement some of these interventions.



Healthy People Lincoln County

Working with partners helps us accomplish something that one agency could not do alone. Lincoln County Health Department (LCHD) partners with numerous organizations, agencies and individuals throughout the county in order to make our community a healthier place to live, learn, work and play. This initiative, or partnership, is called Healthy People Lincoln County (HPLC). HPLC and their partners are able to share resources, ideas and skills in order to avoid duplication and to provide higher quality programs or services for the community. The impact on health challenges in the community are greater when we combine our efforts.

Mission

Our mission is to promote partnerships within the community to improve health through advocacy, prevention and implementation of best practices.

Vision

Through community partners, Healthy People Lincoln County's (HPLC) vision is to help Lincoln County become the healthiest community in Wisconsin where residents live the highest quality of life possible.

HPLC Partnership Committee and Coalitions

HPLC Partnership committee includes organizational members from UW-Extension– Lincoln County, Lincoln County Health Department, Ascension Good Samaritan Hospital and Ascension Sacred Heart Hospital. The partnership committee meets bi-monthly to provide guidance in the development, implementation and evaluation of the Community Health Assessment and Community Health Improvement Plan (CHIP). Achieving success in implementing the CHIP is facilitated through endless efforts from our community coalitions, organizations and the community as a whole.

For more information visit www.healthypeoplelincolncounty.org.



Background

The 2018-2023 Lincoln County Community Health Improvement Plan details goals, objectives and strategies to address the health priorities identified during the Community Health Assessment process. These priorities include Mental Health and Substance Abuse, Nutrition and Healthy Foods, and Oral (Dental) Health. Social determinants and health equity are additional overarching target priorities. The efforts to address these priorities are led by the Healthy People Lincoln County Partnership Committee who collaborates in creating and implementing this six year plan.

The Community Health Improvement Plan Process

The framework used while developing the Lincoln County Health Department's Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP) comes from The Wisconsin Way on Improving the Health of Local Communities from the Wisconsin Association of Local Health

Departments and Boards www.walhdab.org. The figure to the right shows the process model from the County Health Rankings, which is referred to in this framework. The first two phases in the frame work are accomplished during the CHA and the last three phase are accomplished during the CHIP.

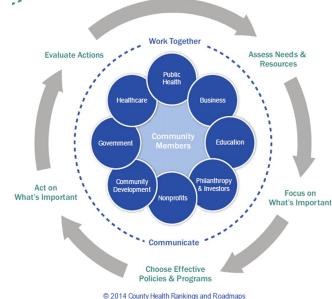
Phase 1: Assess Needs & Resources

Phase 2: Focus on What's Important

Phase 3: Choose Effective Policies and Programs

Phase 4: Act on What's Important

Phase 5: Evaluate Actions



Overview of the Community Health Improvement Process

In December 2017, the process to develop the Community Health Improvement Plan (CHIP) began with a series of Action Planning Team meetings. The purpose of the Action Planning Team was to develop evidence-based goals and objectives based on the Community Health Assessment results in each priority area. Teams evaluated if objectives were relevant, appropriate, impactful and feasible. Team participation was selected from community coalitions that were established during the 2012 CHIP process, as well as from new partners and community members. Each team met 2-3 times to develop a plan for the priority to which they were assigned. The following describes each phase that was completed by the Action Planning Teams. See page 36 for a list of participants.

Phase 3: Choosing Effective Policies and Programs

A list of evidence-based programs were presented to the Action Planning Teams; as well as goals and plans from Healthiest Wisconsin 2020 and Healthy People 2020. Local coalition goals and activities were also shared from the previous 2012 CHIP. Based on this information, team members brainstormed goals, measurable objectives and strategies. The following sources provided an inventory of evidence-based practices; What Works for Health, County Health Rankings, Centers for Disease Control and Prevention, and the Association of State and Territorial Dental Directors.

Phase 4: Act on What's Important

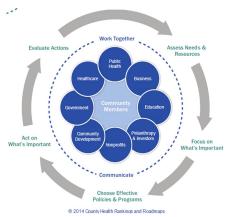
After the Action Planning Teams reviewed evidence-based programs, and the community health assessment results, team members developed a work plan for each priority area. Evidence based strategies, identified partners responsible for implementation, and timelines were included. During the development of the work plans, resources and assets in the community, non-duplication of programs, environment analysis on trending influences, and feasible strategies were all considered.

Phase 5: Evaluate Actions

The next step for the Action Planning Teams was to create evaluation objectives for each priority area and to identify key indicators. Evaluation objectives are used to measure progress and impact on the priority areas. Indicators were chosen from local, state and national data sources and will be used to assist in evaluating long term outcomes.

Sharing the Plan

Healthy People Lincoln County will disseminate the final CHIP to stakeholders and community members.



Community Health Improvement Process Timeline

May—July 2017: Lincoln County Community Health Opinion Survey was conducted.

August 2017: Community Forum was held.

November —February 2018: Key Informant Interviews and Focus Groups were completed.

April 2018: Community Health Assessment was disseminated county wide for comments.

April 26 2018: Community Health Assessment was approved by the Board of Health.

December — May 2018: Action Planning Teams developed the Community Health Improvement Plan.

June 28, 2018: Community Health Improvement
Plan approved by the
Board of Health.

Our Community Conversations



- Difficulty navigating the mental health system
- A need for increase access to Narcan
- Encourage flu and pneumonia shots

More education on

Nutrition and Healthy Foods

- No healthy options when out to eat
- Family meals aren't happening as frequently
- Low intake of fruits and vegetables
- Farmer's market is too small
- Too expensive/time consuming

Questions we asked community

members:

- What are some of the challenges in our county?
- What do you consider some of the major health concerns in our county?
- What resources would you suggest that aren't currently available?
- What do you consider to be some of the barriers for county residents to be healthy?

Social Determinants and Health Equity

- More transportation options
- Better quality affordable housing
- Expand mentoring programs
- More volunteer, employment, training opportunities
- Stigma/stagnant social forces/culture

Top 5 Reasons People Love Living in Lincoln County

- **1.**Good amenities (parks, trails, pool, library, etc.)
- 2. People are willing to help, volunteer, and get involved
- 3. Schools are strong and doing a good job educating
- 4. Easy to get around/Walkable community
- 5.Strong relationships/People know each other

Oral Health

- Lack of motivation/fear to go to dentist
- Difficult to access care after work
- Lack of access to Bridge Dental Community Clinic
 - Medicare doesn't cover dental

Mental Health and Substance Abuse

- Easy access to drugs and alcohol
- Not a lot for youth to do
- Mental health and treatment resources are limited
- Increased youth abuse and trauma

Increases in sharps disposal

No mental health courses in school



More community events

Increase education on Hepatitis C

Expand local food sources

and needle exchange

Lack of support groups

The data represents community perceptions of the health of Lincoln County, collected through Design source: Health Equity Alliance of Rock County (HEAR); Community Conversations Community Forums, Key Informant Interviews, and Focus Groups in 2017 and 2018.

Community Health Assessment Highlights

The following is a summary of community successes and future opportunities as a result of the Community Health Assessment that was completed in April 2018. This summary provides ways for you as a community member or organization to take action on future opportunities. The complete Community Health Assessment can be found at http://lincolncountyhealthdepartment.com.

Focus Area	Community Successes	Community Opportunities
Mental Health and Substance Abuse	 Available trainings for providers and lay persons Psychiatry Residency Program Awareness/education programs 	 Mentorship program in Merrill More treatment options More recovery support options More mental health providers
Nutrition and Healthy Foods	Community gardensSpecial events and classesFree/reduced school lunches	 Access to healthy, affordable food Expand farmers' market Expand food pantries
Oral (Dental) Health	 Free dental sealant program Free fluoride varnishing Oral health prevention campaigns 	 Increase Medicaid reimbursement Provide dental care for those on Medicaid Expand dental hours
Social Determinants	Transportation in MerrillGood schoolsClean environment	 Develop transportation for Tomahawk Affordable and quality housing Availability of good paying jobs Motivated workforce
Access to Care	 Community paramedic program Availability of telemedicine Counseling for mental health in schools 	 Advocate on access issues Increase specialty providers Affordable medications Community Navigator Hub
Built Environment	 Availability of outdoor recreation Community gardening Access to parks, trails and paths 	Make healthy activity the normBetter access to healthy affordable foodMore sidewalks
Environmental Health	Good air qualityEnvironmental health regulationsLocal water lab	 Drinking water without nitrates Radon mitigations Education on carbon monoxide poisoning
Violence and Injury	Available programs and classesSafety classes	Fall prevention programsChild Death Review recommendationsSpecial events on child safety
Reproductive and Sexual Health	Programs and classesRequired curriculum for schools	 Expand access to reproductive health services Enhance reproductive health education in school
Physical Activity	Access to parks, trails and pathsPrograms for youth and adults	Reduce screen timeExercise facilities having day care available
Tobacco	 Insurance coverage of tobacco cessation methods Implementation of Smoke Free Air Law 	 Education on e-cigarettes Regulation on e-cigarettes Cessation programs for pregnant moms



Definition of Health

According to the Centers for Disease Control and Prevention, health is a state of complete physical, mental, and social well-being and not just the absence of sickness or frailty. A variety of factors influence a person's state of health including biological, socioeconomic, psychosocial, behavioral, or social. Health equity is achieved when all people have "the opportunity to 'attain their full health potential' and no one is 'disadvantaged from achieving this potential because of their social position or other socially determined circumstance'.

Best Practices

Lincoln County Health Department and its partners strive to integrate evidence-based public health practices in all the objectives and strategies identified in this plan. Evidence-based interventions lead to more successful programs and have greater impact on policies. Not every goal or objective in this plan is considered 'evidence-based', due to the fact that there are varying levels of what is considered 'evidenced-based'. It might be because evidence-based research is not yet available on the strategies implemented. The action plan provided on the following pages documents if a chosen strategy is evidence-based.

Action Plans

Each goal in the Community Health Improvement Plan will be worked on by a community coalition. The action plan provides a symbol indicating what level of the socio-ecologic model is used. These action plans will be an ever changing document, that at a minimum, will be updated quarterly. Each goal will also include key indicators that are tracked by the coalition. Indicators will help in monitoring if the work being done is making a difference in the health of those that live in our community. See pages 12 –34 for each priorities action plan and key indicators.

Communication and Branding

Healthy People Lincoln County has been in existence since 2006. It is important that Healthy People Lincoln County continues to communicate the work that is being done to reach goals in each health priority. A Communication and Branding Plan will be developed by the Healthy People Lincoln County Partnership Committee.

Monitor and Sustain

The action plans for the CHIP will be monitored for outcomes by the each coalition facilitator. Monitoring insures that data on each health priority is reviewed and evaluated periodically; and strategies are adjusted as needed. The Socio-Ecological Model prioritizes strategies that change policy, the environment, or systems. These types of strategies have higher impact and are more sustainable.

Socio-Ecological Model

Socio-Ecological Model

The Socio-Ecological Model is represented on the right and shows the five levels of community involvement in changing individual health behavior. Each level builds off of the other and works together. When planning a campaign that will change behavior, those in charge want to think about who the change will reach and how many people could be affected. If change occurs at the community or public policy level, more people are guaranteed to see and experience the new change.



The symbols below represent each level of the model. Refer to the action plans starting on page 15 for more information on what level of change is being reached in each identified strategy.

Symbol	Definition	Examples
Individual	Increase the individual's knowledge and influence his or her attitudes and beliefs regarding a health issue.	 Attending a food demonstration cooking class. Provide mental health training. Join a quit smoking class.
Interpersonal	Individual behavior change by affecting social and cultural norms and overcoming individual-level barriers such as friends and family.	 Make sure healthy foods are available to eat at home. Set limits on screen time. Brushing your teeth with your child.
Organizational	Individual behavior change by influencing organizational systems and policies.	 Implementing a evidence-based program into a school curriculum. Develop a healthy snack policy at work. Provide opportunity to exercise during break at work.
Community	Facilitate individual behavior change by leveraging resources and participation of community-level institutions.	 Creating a community garden. Implementing a point-of-purchase prompt program in grocery stores. Promote a safe ride to schools program.
Policy	Federal, state, local, and tribal government agencies may support policies that promote healthy behavior.	 Taxing soda. Increase Medicaid reimbursement for dental care. Prohibiting the use of e-cigarette's in public places.

Source: Centers of Disease Control and Prevention

Summary of 2018-2023 Community Health Improvement Plan Priorities



Overarching Priorities: Social Determinants of Health and Health Equity

- Goal 1: Increase Youth Mentoring (Big Brothers Big Sisters, Kinship, etc.).
- Goal 2: Increase efforts to pursue the implementation of a "HUB Model" in Lincoln County.

Priority: Mental Health and Substance Abuse

- Goal 1: Increase preventative education and outreach that increases knowledge, strengthens families, builds life skills and increases resiliency.
- Goal 2: Increase outreach and programming for those identified as high risk in the community.
- **Goal 3:** Become a community that supports recovery.
- Goal 4: Merge the Lincoln County Mental Health Coalition and the Lincoln County Drug Free Coalition.

Priority: Nutrition and Healthy Foods

- **Goal 1:** Increase access to nutritious foods.
- **Goal 2:** Improve nutrition- eating more nutritious foods and beverages choices.

Priority: Oral (Dental) Health

- Goal 1: Increase awareness, knowledge and oral/dental behaviors and their effect on "whole body" health.
- Goal 2: Increase utilization of oral/dental health services and resources.

Overarching Priority: Social Determinants and Health Equity

Social Determinants of Health

Life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines length and quality of life.

Health Equity

When everyone has the opportunity to "attain their full health potential" and no one is "disadvantaged from achieving this potential because of their social position or other socially determined circumstance."

Source: Centers for Disease Control and Prevention

Alignment with State and National Plans



- By 2020, assure that populations of differing races, ethnicities, sexual identities and orientations, gender identities and educational or economic status, and those with disabilities, have access to comprehensive, patient-centered health services that are safe, effective, affordable, timely, coordinated and navigable.
- By 2020, state and local governments will develop and implement policies and programs that improve social cohesion and social support for all by reducing racism and other forms of decimation; creating health-enhancing environments at home, in the workplace and throughout the community; and promoting the values of diversity and social connectedness.



- Increase the proportion of adolescents who have an adult in their lives with whom they can talk about serious problems.
- Increase the proportion of parents who use positive communication with their child
- Proportion of children aged 0-17 years living with at least one parent employed year round, full time.
- Proportion of persons living in poverty.
- Proportion of households that experience housing cost burden.
- Increase the proportion of adults with disabilities who report sufficient social and emotional support.
- Proportion of high school completers who were enrolled in college the October immediately after completing high school.
- Proportion of children aged 0-17 years who have ever lived with a parent who has served time in jail or prison.

Note: National and State Health Plan will be updated in 2020 thus goals and objectives might change.

Local Assets and Resources

- Free medical clinic and federally qualified dental clinic
- Affordable housing
- Clean environment
- Good schools
- Good transportation in the City of Merrill
- Strong volunteer network and strong relationships
- Organizations have received community grants
- Large number of non-profit services
- Access to primary health care, 4 medical clinics

Overarching Priority: Social Determinants and Health Equity



Key Indicators

Key Indicator	Lincoln	Target	Data Source
Percentage of teens and young adults ages 16-24 who are neither working nor in school.	14%	10% (Top U.S. 2018)	County Health Rankings and Roadmaps
Adolescents having an adult in their lives with whom they can discuss serious problems (percent, high school students).	65.6% (2017)	71.6% (WI)	Youth Risk Behavior Survey (Lincoln County and WI)
Percentage of children that live in a household headed by single parent.	28% (2018)	20% (Top U.S. 2018)	County Health Rankings and Roadmaps
Percentage of adults reporting fair or poor health (ageadjusted).	13% (2018)	10% (Lincoln)	County Health Rankings and Roadmaps
Percentage of population living below the Federal Poverty Line (FPL).	10% (2018)	8% (Lincoln)	County Health Rankings and Roadmaps
Percentage of children under age 18 in poverty.	15% (2018)	12% (Top U.S. 2018)	County Health Rankings and Roadmaps
Percentage of population ages 16 and older unemployed but seeking work.	4.5% (2018)	3.2% (Top U.S. 2018)	County Health Rankings and Roadmaps

Social Determinants and Health Equity Action Plan

Goal 1: Advocate and support the development and implementation of programs and policies to reduce inequities in social determinants of health such as social, environmental conditions, economic, and in health outcomes.

Objective 1: Increase efforts to pursue the implementation of a "Community Navigator HUB Model" in Lincoln County

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
† 🔅	Assess current resources provided to Lincoln County residents through a case management approach.	# of organizations assessedReport of findings
	Increase education on case management hub. Develop a plan to create a community navigator hub.	# of education sessions% of increase in knowledgeCompleted plan
	Secure funds to implement a case management hub including a sustainability plan.	# of funds secured
	Evaluate effectiveness of the community navigator hub.	Evaluation results

Responsible Partners: Healthy People Lincoln County Partnership Committee

Objective 2: Increase Youth Mentoring - (Big Brothers Big Sisters, Kinship of Tomahawk, etc.)

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
† 🔅	Access current efforts in enhancing youth mentorship in Lincoln County.	# of organizations assessedReport of findings
	Advocate for comprehensive youth mentorship program that addresses current gaps.	# of advocacy events
	Advocate for resources to implement a youth mentorship program.	# of advocacy events
	Promote youth mentorship programs within HPLC partnership agencies.	# of outreach/media events

Responsible Partners: Healthy People Lincoln County Partnership Committee

Socio-Ecological Model "Level of Change" Key











Priority: Mental Health and Substance Abuse

Behavioral Health

Refers to a person's state of well-being and how their behaviors affect their overall health and wellness. Mental and substance abuse disorders fall under the umbrella of behavioral health.

Mental Health

Mental health includes a person's emotional, psychological, and social well-being. It affects how an individual thinks, feels, and acts. It also helps determine how a person handles stress, relates to others, and make choices. When a person is mentally healthy, she/he realizes their own abilities, can cope with normal stresses of life, can work productively and contributes to their community.

- Centers for Disease Control and Prevention

Substance Abuse

Substance abuse is the use or dependence on an addictive substance, including alcohol and drugs. Drug addiction is a chronic disease characterized by drug seeking and use that is compulsive, or difficult to control, despite harmful consequences. Substance abuse is associated with social/family disruptions, financial problems, loss of productivity at work and at school, violence and poor health outcomes.

- National Institute on Drug Abuse

Alignment with State and National Plans



- Reduce suicides and suicide attempts in Wisconsin.
- Increase and enhance protective factors.
- Reduce smoking and obesity among people with mental health disorders.
- Reduce disparities in suicide and mental health disorders for disproportionately affected populations.
- Reduce the rate of depression, anxiety and emotional problems among children with special health care needs.



- Reduce the suicide rate.
- Reduce the proportion of adolescents and adults that experience depression.
- Increase depression screening by primary care providers.

Note: National and State Health Plan will be updated in 2020 thus goals and objectives might change.

Local Assets and Resources

Mental Health

- Lincoln County Mental Health Coalition
- Mental health counselors in schools
- Lincoln County Mental Health Resource Guide
- North Central Health Care
- Medical College of WI Child Psychiatry
- Medical College of WI Periscope Project
- Trainings on ACEs/Trauma Informed Care
- Crisis Intervention Team Training
- Psychiatry residency program in Wausau

Substance Abuse

- Lincoln County Drug Free Coalition
- DARE Program
- Medication Drop Box Program
- Increase in canine units
- Increase in first responders carrying Narcan
- Merrill Safe Ride Home
- · Local youth drug and alcohol data
- Social Norms Campaign

Priority: Mental Health and Substance Abuse



Mental Health Key Indicators

Key Indicator	Lincoln	Target	Data Source
Age adjusted suicide rate (deaths per 100,000 population).	13.5 (2011-2015)	10.2 (HP2020)	Wisconsin Interactive Statistics on Health
Percent of high school students who attempted suicide requiring medical attention (1 or more times in the last year).	2.2% (2017)	1.7% (HP2020)	Youth Risk Behavior Survey (Lincoln & U.S.)
Percent of high school students who reported feeling so sad or hopeless almost every day for 2 or more weeks in a row that they stopped doing some of their usual activities in the last year.	34.1% (2017)	27% (WI 2017)	Youth Risk Behavior Survey (Lincoln & WI)
Average number of mentally unhealthy days reported in the past 30 days by adults.	3.5 (2018)	1.7% (Top U.S. 2018)	County Health Rankings and Roadmaps
Ratio of population to mental health providers.	1,400:1 (2018)	330:1 (Top U.S. 2018)	County Health Rankings and Roadmaps
Percent of adults that report 4 or more Adverse Childhood Experiences (ACEs).	22% (2011-2015)	10% (Top WI 2011- 2015)	WI Child Abuse and Neglect Prevention Board

Priority: Mental Health and Substance Abuse



Substance Abuse Key Indicators

Key Indicator	Lincoln	Target	Data Source
Percent of high school students who drank alcohol at least 1 day during the last 30 days	33% (2016)	30.4% (WI 2017)	Lincoln County Social Norms Survey, WI Youth Risk Behavior Survey
Percent of students who used an electronic vapor product at least one day during the last 30 days	23% (2016)	11.6% (WI 2017)	Lincoln County Social Norms Survey, WI Youth Risk Behavior Survey
Percent of students who used marijuana one or more times during the last 30 days	18% (2016)	16% (WI 2017)	Lincoln County Social Norms Survey, WI Youth Risk Behavior Survey
Prevalence of binge drinking among adults (age 18 and older)	20% (2012-2014)	12% (Top *Northwoods Coalition Performer)	Northwoods Coalition Epidemiological Profile
Rate of opioid-related hospitalizations (per 1,000 population)	1.3 (2013-2014)	.4 (Top *Northwoods Coalition Performer)	Northwoods Coalition Epidemiological Profile
Rate of deaths related to alcohol and other substances (per 100,000 population)	269.8 (2017)	179.3 (WI 2017)	Wisconsin Public Health Profile 2017; Lincoln County
Rate of drug law arrests (per 100,000 population)	390 (2014)	35 (Top *Northwoods Coalition Performer)	Northwoods Coalition Epidemiological Profile

^{*} The Northwoods Coalition includes 35 counties in Wisconsin and 11 Wisconsin Tribal National. Counties include: Ashland, Barron, Bayfield, Buffalo, Burnett, Chippewa, Clark, Douglas, Dunn, Eau Claire, Florence, Forest, Iron, Jackson, La Crosse, Langlade, Lincoln, Marathon, Menominee, Monroe, Oneida, Pepin, Pierce, Polk, Portage, Price, Rusk, St. Croix, Sawyer, Taylor, Trempealeau, Vilas, Washburn, Waushara, Wood.

Goal 1: Increase preventative education and outreach that increases knowledge, strengthens families, builds life skills (coping, decision making, problem solving, conflict resolution, etc.) and increase resiliency.

Objective 1: By December 31, 2023, the Coalition will publish 2 Lincoln County Youth Health Profiles that include Social Norms Survey and Youth Risk Behavior Survey data from Merrill and Tomahawk School Districts.

Level of Change	Strategies Responsible	Evaluation
+ •••	Administer and distribute information from the middle and high school Social Norms Survey and Youth Risk Behavior Survey.	 # of students surveyed # of Youth Health Profiles distributed # of presentations # participants

Responsible Partners: Lincoln County Health Department, Lincoln County UW Extension, Merrill Area Public Schools, and Tomahawk School District

Objective 2: By December 31, 2023, the Coalition will implement 1 public awareness campaign annually in Lincoln County.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies Responsible	Evaluation
***	Implement public awareness campaigns (Dose of Reality, kNOw Meth, Hopeline, Suicide Prevention Lifeline, Social Norms, Know! Parent Tips, ACEs/Trauma Informed Care, etc.).	 # of billboards # of newspaper and radio ads # reached via social media # posters/cards # aware of campaigns via surveys

Responsible Partners: Lincoln County Health Department, Lincoln County UW Extension, Merrill Area Public Schools, Tomahawk School District, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members

Objective 3: By December 31, 2023, the Coalition will implement 2 community events in Lincoln County.

Level of Change	Strategies	Evaluation
† 🔅	Provide community presentations, town hall events and summits regarding mental health, substance abuse and other addictions (e.g.gambling, gaming, hoarding, etc.)	# of events# of participants# that increased knowledge

Responsible Partners: Lincoln County Health Department, Lincoln County UW Extension, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Northwoods Veterans Auxiliary, TB Scott Free Library, Tomahawk Public Library and interested coalition members

Socio-Ecological Model "Level of Change" Key











Objective 4: By December 31, 2023, the Coalition will implement 4 community trainings annually in Lincoln County.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies Responsible	Evaluation
† 🔅	Provide evidence based trainings to increase skills of residents, coalition members and professionals (QPR, Mental Health First Aid, Taking Care of You, Naloxone Training, etc.).	 # of trainings # of participants # that increased knowledge # that have applied skills # that have used resources

Responsible Partners: Lincoln County Health Department, Lincoln County UW-Extension, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, and Coalition Members with Training Certifications

Objective 5: By December 31, 2023, the Coalition will provide Merrill and Tomahawk School Districts with 2 evidence based strategies to promote mental health and prevent substance abuse among youth.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies Responsible	Evaluation
† 🔅	Provide school administration and counselors with evidence based strategies and resources to support preventative education related to mental health and substance abuse.	 # of meetings # of resources provided # of strategies implemented/ results from evaluation tools

Responsible Partners: Lincoln County Health Department, Lincoln County UW-Extension, HAVEN, Merrill Area Public Schools, Tomahawk School District, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, and interested coalition members



Explore opportunities to educate school boards on the community needs and efforts of the coalition.

• # of meetings/presentations

Responsible Partners: Lincoln County Health Department, Lincoln County UW-Extension, HAVEN, Merrill Area Public Schools, Tomahawk School District, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, and interested coalition members

Goal 2: Increase outreach/programming for those identified as high risk in the community.

Objective 1: By December 31, 2023, the Coalition will implement 2 family-based education opportunities to identified families at higher risk in the community.

Evidence Based Strategy Source: County Health Rankings "What Works r Health"

Level of Change	Strategies	Evaluation
† ************************************	Implement the Families and Schools Together (FAST) Program in Merrill and Tomahawk.	 # of families served Evaluation results from program participants Follow up evaluation results to see if skills are applied

Responsible Partners: Merrill Area Public School, Tomahawk School District, Kinship of Tomahawk, Big Brothers and Big Sisters and interested coalition members



Implement the Strengthening Families Program Merrill and Tomahawk.

- # of families served
- Evaluation results from program participants
- Follow up evaluation results to see if skills are applied

Responsible Partners: Merrill Area Public Schools, Tomahawk School District, Lincoln County UW Extension

Objective 2: By December 31, 2019, the Coalition will develop a substance abuse and mental health resource guide and distribute throughout Lincoln County.

Level of Change	Strategies	Evaluation
†	Develop a guide for substance abuse and	# that report resources are helpful
	mental health resources in our area that is	via community pilot survey
	available via print and electronically (group	# brochures, posters and cards
	resources by crisis, counseling and support	# of crisis professionals that indi-
	groups).	cate resource meets their needs

Responsible Partners: Lincoln County Health Department, Lincoln County–UW-Extension, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, and interested coalition members

Objective 3: By December 31, 2023, there will be a 10% increase in number of inquiries to 211 from Lincoln County residents.

Level of Change	Strategies	Evaluation
† 🍁	Promote 211(free resource helpline) and increase organization that are included.	# of Lincoln County agencies listed# of inquiries from Lincoln County
		List of common inquiries

Responsible Partners: Merrill Area United Way, Lincoln County Interagency Members and interested coalition members

Priority: Mental Health and Substance Abuse Action Plan

Goal 3: Become a community that supports recovery.

Objective 1: By December 31, 2023, Lincoln County will have 10 individuals trained and active as recovery coaches.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
	Provide education on the role of recovery coaches in the community.	# of presentations# of participants

Responsible Partners: HAVEN, North Central Health Care, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members







Recruit community members to be trained as recovery coaches.

- # recruited
- # trained

Responsible Partners: HAVEN, North Central Health Care and interested coalition members









Collaborate with partners to develop a system for accessing recovery coach services.

- # of community partners
- # of recovery coach matches
- evaluations to measure impact of recovery coach match

Responsible Partners: HAVEN, Lincoln County Health Department, North Central Health Care, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Lincoln County Department of Social Services, and interested coalition members

Objective 2: By December 31, 2023, the Coalition will pursue expansion of additional substance abuse and mental health support groups for individuals and their family members in Lincoln County.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
† 🔅 🌰	Have representatives from Alcoholics Anonymous, Woods and Waters Narcotics Anonymous, Nar-Anon, North Central Wisconsin Area of Narcotics Anonymous and National Alliance on Mental Illness provide information to start a support group(s) in the county. Consider support options for other addictions (e.g. gambling, gaming, eating disorders, hoarding, etc.)	# of educational resources received # of presentations

Responsible Partners: North Central Health Care, Lincoln County Department of Social Services, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members

Evidence Based Strategy Source: County Health Rankings "What Works for Health"		
Level of Change	Strategies	Evaluation
† %	Recruit individuals in the community to lead support groups.	# of community members re- cruited # of support groups greated
		# of support groups created
Responsible Partners: North Central Health Care, Lincoln County Department of Social Services. Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members		
† ½	Promote support groups available in the county.	• # of participants
Responsible Partners: Responsible Partners: North Central Health Care, Lincoln County Department of Social Services, Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members		
Objective 3: By December 31, 2023, the Coalition will meet with elected officials (county board, city council, school boards) and legislators annually to discuss and advocate for policy change.		
Evidence Based S	trategy Source: County Health Rankings "Wha	t Works for Health"

	Meet with elected officials and legislators and/	# of meetings held
	or involve in local events to discuss emerging	 # of issues/policies discussed
<u> 11111111</u>	mental health and substance abuse issues and	# of actions taken
	needed policy changes.	

Evaluation

Level of Change Strategies

Responsible Partners: Lincoln County Health Department and Lincoln County UW Extension

Goal 4: Merge the Lincoln County Mental Health Coalition and the Lincoln County Drug Free
Coalition.

Objective 1: By July 31, 2018, the Coalition will begin meeting quarterly.

Level of Change	Strategies	Evaluation
† 🔅	Coalition will hold an organizational meeting in July to establish membership of the newly merged coalition.	# of participants# of coalition members

Responsible Partners: Lincoln County Health Department and Lincoln County—UW Extension

Objective 2: By December 31, 2018, the Coalition will have name, mission statement and organizational structure.

Level of Change	Strategies	Evaluation
† 🔅	Develop a Coalition Leadership Team to establish coalition name, mission statement, and organizational structure.	# of leadership team members# of meetingsCompleted name, mission and organizational structure

Responsible Partners: Lincoln County Health Department, Lincoln County UW Extension Kinship of Tomahawk, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members

Objective 3: By December 31, 2020, the Coalition will establish a marketing and branding presence in Lincoln County.

Level of Change	Strategies	Evaluation
† 🔅	Develop the coalition marketing and branding plan.	Plan developed

Responsible Partner: Lincoln County Health Department, Lincoln County—UW Extension, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Local Marketing Professional and interested coalition members

† 🔅	Implement the coalition marketing and branding plan.	 Coalition logo Website/social media Brand community event displays (health fairs, Community Night Out, Children's Festival, etc.) Brand resources and materials that the coalition provides # of residents aware of coalition
		• # of residents aware of coalition

Responsible Partners: Lincoln Count Health Department, Lincoln County - UW Extension, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Law Enforcement, HAVEN, Local Marketing Professional and interested coalition members

Priority: Nutrition and Healthy Foods







Nutrition is the intake of food, considered in relation to the body's dietary needs. Good nutrition – an adequate, well balanced diet combined with regular physical activity – is a cornerstone of good health. Poor nutrition can lead to reduced immunity, increased susceptibility to disease, impaired physical and mental development, and reduced productivity. - World Health Organization

Alignment with State and National Plans



- By 2020, people in Wisconsin will eat more nutritious foods and drink more, nutritious beverages through increased access to fruits and vegetables, decreased access to sugar-sweetened beverages and other less nutritious foods, and supported, sustained breastfeeding.
- By 2020, all people in Wisconsin will have ready access to sufficient nutritious, high-quality, affordable foods and beverages.



- Reduce household food insecurity and in doing so reduce hunger.
- Increase the contribution of fruits to the diets of the population aged 2 years and older.
- Increase the variety and contribution of vegetables to the diets of the population aged 2 years and older.
- Increase the proportion of physician office visits that include counseling or education related to nutrition or weight.

Note: National and State Health Plan will be updated in 2020 thus goals and objectives might change.

Local Assets and Resources

- Lincoln County Nutrition Coalition
- UW-Extension nutrition classes (Foodwise)
- Community gardens
- Aging and Disability Resource Center
- Farmers markets
- EBT accepted at farmers markets

- Food pantries in Merrill and Tomahawk
- Kids Backpack Program
- Healthy options in school lunches
- WIC (374 children enrolled), also offer Fit Families Program
- Free and reduced lunch at schools

Priority: Nutrition and Healthy Foods



Youth Key Indicators

Key Indicator	Lincoln	Target	Data Source
Child Obesity: youth ages 5-17 who visited a participating health care system in 2015 and 2016 with a BMI >95 percentile	20.2%(54452)* 15.3%(54487)* 18% (54435)* 24.6%(54442)*	14.8% (WI)	Wisconsin Health Atlas 2015-2016
Number of children on Food Share (food stamps)	1672; 31% (2017)	386,366; 30% (WI 2017)	Wisconsin Department of Health Services
Percentage of high school students who did not eat vegeta- bles in the past 7 days	12.4% (2017)	6.7% (U.S. 2015)	Youth Risk Behavior Survey 2017 (Lincoln County and US)
Percentage of high school students who did not eat fruit in the past 7 days	8.3% (2017)	5.2% (U.S. 2015)	Youth Risk Behavior Survey 2017 (Lincoln County and US)



Adult Key Indicators

Key Indicator	Lincoln	Target	Data Source
Adult Obesity ages 18+ who self report a BMI of >30	29%	26%	County Health Rankings
	(2018)	(Top U.S. 2018)	and Roadmaps
Adult Obesity: adults ages 18+who visited a participating health care system in 2015 and 2016 with a BMI >30	49.2% (54452)* 44.6% (54487)* 51.6% (54435)* 49.6% (54442)*	41.2% (WI)	Wisconsin Health Atlas 2015-2016
Food Insecurity	11%	8%	County Health Rankings
	(2018)	(Top WI , 2018)	and Roadmaps

^{*} Lincoln County Zip Codes: Merrill (54452), Tomahawk (54487), Gleason (54435), Irma (54442)

Nutrition and Healthy Foods Action Plan

Goal 1: Increase access to nutritious foods

Objective 1: By December 31, 2023, the Nutrition Coalition will promote and implement 2 strategies to increase access to healthy foods for Lincoln County Students in school.

Evidence Based Strategy Source: County Health Rankings "What Works for Health"			
Level of Change	Strategies	Evaluation	
	Promote utilization and or assist in creating School Food Pantries (example screening students and schools for needs such as amount of students that are food insecure) UW Extension.	# of safe and healthy food pantries project evaluations completed	
Responsible Part	ner: Lincoln County UW Extension		
† ½	Promote utilization and or assist in creating school gardens (example hydroponics).	 # of school gardens initiated and maintained. # of pounds of produce grown in schools # of grants received # of programs implemented 	
Responsible Partners: Lincoln County UW Extension and Lincoln County Health Department			
	Pursue funding to increase access to nutritious foods at school (example Farm to school, grant writing).	# of grants applied for and re- ceived	
Responsible Partners: Lincoln County UW Extension and Lincoln County Health Department,			

Ascension Good Samaritan Hospital and Ascension Sacred Heart Hospital

Objective 2:By December 31, 2023, the Nutrition Coalition will promote and implement 2 strategies to increase access to healthy foods for Lincoln County Community Members

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
	Evaluate and assist local food pantries to increase healthy food options.	 # of safe and healthy food pantries project evaluations completed # of healthy food changes implemented
Responsible Partner: Lincoln County-UW Extension		
	Develop and distribute a nutrition access guide.	Track # of access guides given out and to whom.
Responsible Partner: Lincoln County Health Department		

Socio-Ecological Model "Level of Change" Key











Nutrition and Healthy Foods Action Plan

Level of Change	Strategies	Evaluation
† 🌣 🌰	Implement gardening events (example Live Sustainable Workshops, Children's Fest)	 # of educational events held on gardening Support given to local community gardens
Responsible Part and Lincoln Count	ners: Ascension Good Samaritan Hospital, Linco y-UW Extension	oln County Health Department,
† •	Promote access to affordable, healthy food options (example coupons for farmer's market, grocery stores)	# coupons utilized
Responsible Part	ners: Ascension Good Samaritan Hospital and H	HealthFirst (WIC)
	Develop a food gleaning toolkit for local restaurants to donate leftover foods (example, local food pantries, breaking bread)	# of toolkits distributed# of new food retailers participating with food gleaning
Responsible Part Hospital	ners: Lincoln County Health Department and A	scension Good Samaritan
	ecember 31, 2023, the Nutrition Coalition will passe access to healthy foods for Lincoln County W	
Evidence Based S	trategy Source: County Health Rankings "What	Works for Health"
Level of Change	Strategies	Evaluation
† 🔅	Promote and or assist in creating healthier food behavior by employees at worksites	 # of promotions at worksites # of worksites the develop policies on healthier options for work meetings or lunches # of employees reporting a change of behavior
Responsible Part	ners: Lincoln County Health Department, Ascer	nsion Good Samaritan Hospital,

Goal 2: Improve nutrition- eating more nutritious foods and beverages choices

and Ascension Sacred Heart Hospital

Objective 1: By December 31, 2023, the Nutrition Coalition will promote and implement 2 strategies to improve Nutrition among Lincoln County Students in School

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
† † †	Education to school administration on the benefits of healthy school snacks	 # of presentations to school administration Increase perceived benefits of healthy snacks in schools among school administration staff
		Attendance at school wellness policy meetings

Responsible Partners: Lincoln County Health Department, Lincoln County—UW Extension, Ascension Good Samaritan Hospital and Ascension Sacred Heart Hospital

Nutrition and Healthy Foods Action Plan

Level of Change	Strategies	Evaluation
† 🔅 🕋	Education on improving healthier eating habits at school (example taste testing).	# of educational presentations provided to students
Responsible Partners: Lincoln County UW Extension and HealthFirst (WIC)		

Objective 2: By December 31, 2023, the Nutrition Coalition will promote and implement 2 strategies to improve Nutrition among Lincoln County Community Members

Evidence Based Strategy Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluation
† 🔅 🐽	Education on healthy cooking techniques through cooking demonstrations.	# of demonstrations completedIncreased knowledge of healthy cooking styles
Responsible Part Healthfirst (WIC)	ners: Lincoln County—UW Extension, Ascen	sion Good Samaritan Hospital and
† 🔅	Medical Providers will implement healthy nutrition educational messages at patient visits (example promote formation of breastfeeding support group, 5210 (http://5210letsgo.com), nutrition prescriptions, and displays).	# of providers implementing a strategy

Responsible Partners: Ascension Good Samaritan Hospital and Healthfirst (WIC)

Priority: Oral (Dental) Health



Oral (Dental) health is essential to general health and quality of life. It is a state of being free from mouth and facial pain, oral and throat cancer, oral infection and sores, periodontal (gum) disease, tooth decay, tooth loss, and other diseases and disorders that limit an individual's capacity in biting, chewing, smiling, speaking, and psychosocial wellbeing.

-World Health Organization

Alignment with Local, State and National Plans



- Assure Access to ongoing oral health education and comprehensive prevention, screening and early intervention, and treatment of dental disease in order to promote healthy behaviors and improve and maintain oral health.
- Access to effective and adequate oral health delivery systems, utilizing a diverse and adequate workforce, for populations if higher risk



- Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth
- Reduce the proportion of children, adolescents, and adults with untreated dental decay
- Increase proportion of children, adolescents and adults who used the oral health care system in the past year
- Increase the proportion of adults and low-income children and adolescents who received any preventive dental service during the past year
- Increase the proportion of children and adolescents who have received dental sealants on their molar teeth

Note: National and State Health Plan will be updated in 2020 thus goals and objectives might change.

Local Assets and Resources

- Oral Health Coalition Seal A Smile Program in schools, Annual Sugar Out Day, Affordable Dental Care Guide, Adult Dental Awareness Campaign
- Bridge Community Dental Clinic

- Head Start Fluoride Varnish Program
- Ascension Good Samaritan Hospital Tooth Fairy Fund
- Marshfield Clinic Dental Clinic
- Fluoride Supplement Program

Priority: Oral (Dental) Health



Key Indicators

Key Indicator	Lincoln	Target	Data Source
Ratio of population to dentists	1550:1 (2018)	1280:1 (2018)	County Health Rankings
Percent of the population (age 2+) that did not have a dental visit in the past year.	49% (2018)	26% overall (WI 2018)	County Health Rankings
Percent of untreated dental decay in children aged 3-5 years	26.4% (WI 2013)	21.4% (U.S. 2013)	Wisconsin Department of Health Services
Percent of children aged 3-5 years that experience dental caries (tooth decay)	35.7% (WI 2013)	30% (U.S. 2013)	Wisconsin Department of Health Services
Percent of untreated dental decay in children aged 6-9 years	20.1% (WI 2013)	18% (Lincoln)	Wisconsin Department of Health Services
Percent of children aged 6-9 who have dental sealants on one or more permanent first molar teeth	50.8% (WI 2013)	28.1% (U.S. 2013)	Wisconsin Department of Health Services
Percent of untreated dental decay in adults aged 35-44	27.8% (U.S. 2013)	25% (HP2020)	Wisconsin Department of Health Services
Rate of oral health emergency department visits (non-traumatic) per 100,000	140 (2014)	Decrease Visits	Environmental Public Health Tracker

Oral (Dental) Health Action Plan

Goal 1: Increase awareness, knowledge and oral/dental behaviors and their effects on "whole body" health

Objective 1: By December 31, 2023, Oral Health Coalition will promote and implement 4 evidence based strategies to increase awareness and knowledge of effect of dental behaviors for Lincoln County Residents.

Evidence Based Strategies Source: County Health Rankings "What Works for Health"

Level of Change	Strategies	Evaluations
† •••	Continue/Expand oral health education campaigns for Lincoln County school age children (example, Sugar Out Day).	 # of students participated # of schools participated Evaluation results from program participants % increase knowledge of students participated

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, Oak Park Dental, Merrill Area Public Schools, and Tomahawk School District







Continue/Expand oral health education campaign in Community (example, Sugar Out Day).

- # of community members participated
- # of businesses/employees participated

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, and Oak Park Dental









Utilize Oral Health Displays to promote good oral hygiene at community events/ organizations/worksites (example, at cooking demonstrations).

- # of events
- # of participants
- # of displays utilized

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, and Oak Park Dental





Continue/Expand Oral Health Social Marketing Campaign (example, billboards, social media ads).

- # messages
- # information requests

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, and Oak Park Dental

Socio-Ecological Model "Level of Change" Key



Individual









Oral (Dental) Health Action Plan

Objective 2: By December 31, 2023, Oral Health Coalition will develop 4 partnerships with local Medical and Dental Clinics to Promote Development of Early/Continuing Positive Oral Health **Behaviors**

Fyidence Based Strategies Sources: County Health Rankings "What Works for Heal

Evidence Based Strategies Sourcest Country Treater Mannings Windt World for Treater				
Level of Change	Strategies	Evaluations		
÷ 🐉 🐽	Medical Providers will implement oral health behavior message at well child visits.	 # messages implemented by medical providers at well child visits # participating partners 		
Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, Oak Park Dental and local clinics				
† 🔆	Utilized Oral Health Displays (example medical and dental clinics, ED waiting areas).	# displays# participating partners		

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, Oak Park Dental and local clinics

Goal 2: Increase utilization of oral/dental health services and resources

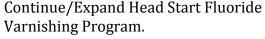
Objective 1: By December 31, 2023, the Oral Health Coalition will promote and implement 3 evidence based strategies to increase usage of oral/dental resources for Lincoln County Residents.

Evidence Based Strategies Source: County Health Rankings What Works for Health			
Level of Change	Strategies	Evaluations	
† 🌣 📻	Continue/Expand Dental Seal A Smile Program to Lincoln County Elementary and Middle Schools.	 # students participated # schools participated # sealants applied # urgent referrals/follow-up 	
Responsible Partners: Lincoln County Health Department, Merrill Area Public Schools, Tomahawk School District, Ascension Good Samaritan, Ascension Sacred Heart and interested coalition members			
		l	









- # students participated
- # students that complete 3 varnished during the school year.

Responsible Partners: Lincoln County Health Department, Pine River School for Young Learners and Tomahawk Head Start







- Expand Fluoride Supplement program to Pine River School for Young Learners rural students/families.
- # families/students participated
- # of reoccurring participants

Responsible Partners: Lincoln County Health Department and Pine River School for Young Learners

Oral (Dental) Health Action Plan

Objective 2: By December 2023, the Oral Health Coalition will promote and recruit 2 partners to participate/support the Oral Coalition mission and goals.

Evidence Based Strategies Sources: County Health Rankings "What Works for Health"

		- 1
Level of Change	Strategies	Evaluations
* •••	Explore opportunities to involve other dental professionals/clinics.	# new partners/clinics# contacts made
Responsible Partners: Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital and interested coalition members		
* •	Develop and distribute a guide for Oral/ Dental Health resources that are available in Lincoln County.	 #report resources are helpful via community pilot survey # brochures distributed

Responsible Partners: Lincoln County Health Department, Ascension Good Samaritan Hospital, Ascension Sacred Heart Hospital, Bridge Community Dental Clinic, and Oak Park Dental



Healthy People Lincoln County Coalition Highlighted Accomplishments 2012-2017



Lincoln County Drug Free Communities Coalition

- School-Based Social Norming Campaign
- Mass Media Campaigns Against Underage and Binge Drinking
- Proper Drug Disposal Programs
- Community educational forums
- Parent educational efforts

Lincoln County Mental Health Coalition

- Community Mental Health Trainings and Programs
- Community Education on ACEs and Trauma Informed Care Approaches
- Education and outreach to healthcare providers and education professionals
- Implementation of Youth Risk Behavioral Survey
- NAMI Family Support Group
- Presentations and displays at local events/programs
- Distribution of Mental Health Resource Guide
- HOPELINE Digital and Marketing Campaigns

Lincoln County Nutrition Coalition

- Cooking demonstrations targeting low income
- Implementing EBT at the farmers' markets
- Point of purchase prompts at convenience and grocery store
- 5210 (5 fruits/vegetables, 2 hours of screen time, 1 hour of exercise, and 0 sugary drinks) program implementation
- Installation of water bottle stations
- Community Garden programs

Lincoln County Oral (Dental) Health Coalition

- Sugar Out Day Education Campaign for students and community members
- Dental sealants for 2nd, 3rd, 6th and 7th grade students
- Tooth Fairy Fund
- Fluoride varnishing
- · Organization endorsement of fluoride varnishing
- "Don't Wait to See a Dentist" billboard campaign

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Nutrition and Healthy Foods Action Planning Team

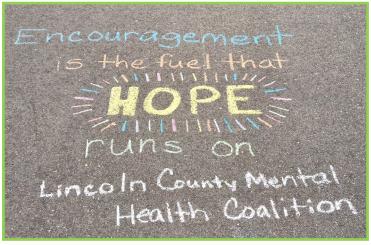
Community Member, Brigid Flood Bridge Dental Clinic, Jennifer Fryer Healthfirst, Nichole Kwasny

Oral (Dental) Health Action Planning Team

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Healthy People Lincoln County www.healthypeoplelincolncounty.org

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