Price County COMMUNITY

Health Needs Assessment



2019 - 2022







Community, like any word, has multiple meanings. Some communities are defined merely by association of place – "we all come from here so we make a community." In Price County, however, community also embraces ideals of fellowship with others, enhanced by common goals of a healthy and vibrant people. We look out for one another. We know our neighbors. We care for people as our kin.

Starting in October 2018 we called our community partners to a common table to discuss the values that are core to improving our community. We did so to kick-start a three-year strategic plan for addressing our community's health needs. This process is born out of a tradition, in part mandated by government policy, but actually truly key to our missions to promote, protect and preserve the health of people including high quality, accessible health care services.

Many conversations followed. Many voices lent their song. The collaborative effort determined that our priorities are virtually unchanged from the plan before it. We care about and will address:

Mental Health
 Alcohol and Drug Abuse (AODA)
 Chronic Disease

The Community Health Needs Assessment acts as both a declaration of the commitment by Price County Public Health and Flambeau Hospital to put forth resources (human talent, effort, and financial investments), as well as a call to action for our fellow institutions and individuals to do the same. Moving a needle on issues as big as these takes the momentum of an entire community. Through the last plan we have seen what our partners are capable of achieving and we thank you for your work and dedication. We invite you to continue this journey with us. We open our arms to others who want to join us. (Contact us and ask how to get involved!)

Community as we see it mimics the words of Margaret Mead: "Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it is the only thing that ever has." We hope to see you at the coalition meetings, committees and even on the streets of this place we call home.

Sincerely,

Jim Braun

Flambeau Hospital • Chief Administrative Officer



Michelle Edwards

Michelle Edwards

Price County Public Health • Health Officer



Flambeau Hospital Mission Statement: To provide high quality, accessible health care services in our community. **Price County Public Health Division Mission Statement:** Leaders in promoting, protecting, and preserving the health and well-being of Price County citizens through partnerships with people and community.

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Our Community

Our "community served" was defined as Price County because (a) most community health data is available at the county level; (b) most of our assessment partners define their service area at the county level; (c) Price County includes the majority of our service area. Flambeau Hospital and Price County Public Health do serve clients beyond Price County.

WHOWEARE

Price County is the sixth largest county in the state of Wisconsin geographically. It includes two cities, three villages and 17 townships. The major industries are wood and paper products, tourism, and manufacturing. Additional industries include farming, transportation and health care.



Price County Public Health professionals monitor and diagnose the health concerns of entire communities and promote healthy practices and behaviors to ensure that populations stay healthy. This is done through a variety of programs such as communicable disease prevention, environmental health and maternal and child health to name a few.

Flambeau Hospital is co-sponsored by Marshfield Clinic Health System and Ministry Health Care, part of Ascension Wisconsin. (Additional information about the sponsors can be found in the appendices.) A 25-bed Critical Access Hospital, Flambeau Hospital is the most rural hospital in the State of Wisconsin per the Critical Access Hospital Guidelines.



Demographic Profile of Price County

	Wisconsin	Price County		
Total Population, 2013-2017	5,795,483	13,442		
Median Age (years), 2013-2017	39.2	51.3		
Percent Population By Age, 2013-2017				
Persons under 5 years	5.9%	3.7%		
Persons under 18 years	22.5%	17.3%		
Persons 65 years and over	15.6%	23.9%		
Percent Population by Biological Sex, 2013-2017				
Female	50.3%	50.8%		
Male	49.7%	49.2%		
Percent Population by Race and Ethnicity, 2013-2017				
White Alone	85.9%	95.8%		
Black or African American Alone	6.3%	0.7%		
American Indian and Alaska Native Alone	0.9%	1.0%		
Asian Alone	2.6%	0.6%		
Native Hawaiian and Other Pacific Islander	0.0%	0.8%		
Two or more races	2.3%	0.8%		
Hispanic or Latino	6.6%	1.6%		
Speak a Language other than English, 2013-2017	8.7%	3.6%		
Median Household Income (in 2017 dollars), 2013-2017	\$56,759	\$45,680		
Percent Below Poverty in the last 12 months, 2013-2017	12.3%	11.9%		
High school graduate or higher, percent of persons age 25+, 2013-2017	91.7%	90.4%		

29.0%

Bachelor's Degree or higher, percent of persons age 25+, 2013-2017

17.0%

of Community Health Improvement Plans and Processes

On a three-year cycle, Price County Public Health and Flambeau Hospital jointly participate in community health improvement planning and processes (CHIPP). Embedded in the CHIPP is a community health needs assessment (CHNA). The CHNA includes collecting current data on health trends, analyzing the data to identify and prioritize health issues that most closely affect our community, and choosing strategies to help alleviate these needs. The identified strategies are often written into an implementation strategy or community health improvement plan (CHIP). CHIPP is a collaborative effort including the voices of many community organizations and individuals who share a vision to improve community health.

Many elements of CHIPP are mandated to Price County Public Health under Wisconsin State Statute 251.05 and to Flambeau Hospital under the Affordable Care Act and the IRS. Although mandated, Price County Public Health and Flambeau Hospital recognize CHIPP as imperative to improving community health outcomes and fully lend their resources to the initiatives outlined herein because we deem the health and wellness of our citizens to be fundamental to their future and to a thriving community.

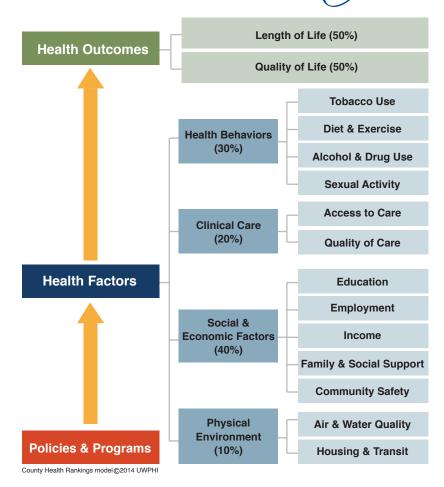


A Strategy for Improving Community

Health

Flambeau Hospital and Price
County Public Health are committed to using national best practices in conducting the community health needs assessment and in implementing community health improvement strategies.

Our approach relies on the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing in particular the determinants of health model and the model for community health improvement.



In addition, we utilize the Wisconsin Guidebook on Improving the Health of Local Communities (developed with funding from the University of Wisconsin School of Medicine and Public Health from the Wisconsin Partnership Program). This guidebook builds on the County Health Rankings and Roadmaps' Action Center.

Based on all of these resources, our community health improvement strategy rests on the following principles to make our communities a healthy place to live, learn, work and play:

- Work collaboratively to effectively address health issues
- Pay attention to the forces that shape health outcomes (e.g., social and economic determinants)
- ► Focus efforts on target populations with a disparate health burden
- Emphasize the powerful impact of policy and system-based approaches on change
- Use the best evidence of effective strategies
- Identify and track specific, measurable performance indicators

Assessment Framework and Data



Planning Process

Flambeau Hospital (with its sponsors Ministry Health Care, part of Ascension Wisconsin, and Marshfield Clinic Health System), Price County Public Health, and the Wisconsin Department of Health Services, Division of Public Health - Northern Region, led the Price County community health needs assessment (CHNA). The Price County needs assessment and prioritization process began in July 2018 and ended in December 2018.

Working collaboratively, these organizations identified and complied data in a report. The report was sent to community stakeholders to consider and comment on prior to an in-person stakeholder meeting in October 2018 (Community Needs Forum).

Data was organized into the following categories:

- Demographics
- Mortality
- Morbidity
- Health Behaviors
 - Alcohol and other drugs
 - Physical activity and nutrition
 - Tobacco use
 - Reproductive and sexual health
- Clinical Care
- Social and Economic Factors
- Physical Environment

Vork Together **Evaluate Actions** Assess Needs & Resources **Public** Health Healthcare **Business** Community Government Education Community Philanthropy Development & Investors Act on **Nonprofits** Focus on What's Important What's Important Communicate **Choose Effective Policies & Programs**

Data Sources

Data was drawn from a variety of sources including (but not limited to):

- Centers for Disease Control and Prevention,
 Behavioral Risk Factor Surveillance System
- Community Commons (www.CHNA.org)
- County Health Rankings
- ► Embrace (Domestic Abuse Shelter)
- Flambeau Hospital
- Wisconsin Department of Health Services

- Wisconsin Department of Justice
- Wisconsin Department of Public Instruction
- Wisconsin Department of Transportation
- Extension Price County
- US Census Bureau, AmericanCommunity Survey
- Additional public sources

Voices Of Our Community

Price County Public Health and Flambeau Hospital are committed to addressing community health needs collaboratively with local partners. Price County Public Health and Flambeau Hospital used the following methods to hear community members' thoughts on the strengths and challenges of being a healthy community. These methods provided us with additional perspectives on how to select and address top health issues facing our communities.



Input from Community Stakeholders

Twenty-seven community stakeholders participated in the Community Needs Forum in October 2018. All invited stakeholders received a data report one week ahead of the forum. Community stakeholders were asked to come prepared to discuss surprising data points, gaps in available data, any questions about the data and any remaining gaps or needs relating to the 2016 CHNA priorities.

During the forum, community stakeholders participated in large and small group facilitated discussions about the presented data, progress on the previous priority areas and any emerging needs. Participating organizations are listed in the appendices.

Voices Of Our Community

Input from Members of Medically Underserved, Low-income and Minority Populations and/or Organizations that Represent those Populations

With attention to health disparities and in an effort to directly reach individuals with low income, Flambeau Hospital conducted a survey at a Price County food pantry. The survey asked participants their perception of the top health needs in Price County and about their own physical, mental and oral health. The survey was distributed in Spring/Summer 2018. The results were summarized and presented at the forum. Survey results indicated top priorities of:

▶ Mental Health ▶ Chronic Diseases ▶ Drugs ▶ Alcohol
Input on previous CHNA

No written comments were received regarding the previous CHNA.





Results of the Previous CHNA

Flambeau Hospital and Price County Public Health's previous CHNA was completed in June 2016. The priority health issues selected and addressed were:

- AODA/Mental Health
- Chronic Disease and Nutrition
- Aging Population (hospital-only initiative)

An evaluation of the impact of the efforts to address those issues to date can be found in the appendices.



Criteria

After reviewing and discussing the community health data, stakeholders at the October 2018 Community Needs Forum were asked to provide input on prioritizing the needs to be addressed throughout the next three years using the following criteria:

- Scope or severity of the problem
- Health disparities (e.g., by income and/or gender) and needs of those who are more vulnerable
- Feasibility of known interventions with proven impact
- Momentum and commitment from the community
- Alignment with a larger base of collaborative partners

Prioritization Process

Prior to the Community Needs Forum, participants received a data report and corresponding worksheet for highlighting individual observations. At the forum, facilitators presented a review of this information and invited stakeholders to comment on striking or significant data. Following this discussion, participants worked in small groups to determine issues affecting Price County. These issues were categorized and given a summarizing title. Participants then utilized dot voting to determine the top priorities on which they felt the community should focus. Voting created a prioritized list which included in order: mental health, youth, AODA, parenting and economic instability (a tie), injury/violence, and chronic disease prevention.

Following the forum, hospital and public health representatives convened with coalition leadership to review the outcome of the stakeholder meeting and finalize the priorities. The forum list of potential priorities was reviewed and narrowed through the lens of community capacity, readiness, and momentum.

Priorities Selected

Based on this process, the following priorities were selected:

► Mental health ► Alcohol and other drug abuse ► Chronic disease

Significant strides were made in each of these issues as a result of the previous

CHIPP efforts and consequently remain important in Price County.

Priorities for Action

Health Issues Not Selected for this Plan

Flambeau Hospital and Price County Public Health understand each prioritized health need is important and remain committed to being active participants in improving the health of the community. While each of the health needs identified at the forum deserves attention, for the purposes of this CHNA we have chosen to focus our efforts on the priorities listed above. The following health issues were not selected for the reasons described:

- Youth: Youth will be an intended audience of mental health and AODA implementation efforts.
- Parenting: Parenting will be addressed as part of the chosen mental health priority.
- Injury/Violence: The implementation strategy will support reduction of injury and violence as it pertains to mental health and AODA use. At the same time, Flambeau Hospital and Price County Public Health will provide strong support and collabora tion with existing community efforts and the nonprofit organization Embrace, which specifically addresses domestic violence in our community.
- Economic Instability: Price County Public Health's and Flambeau Hospital's capacity to address economic instability as a separate priority area is limited. Some aspects of instability may be addressed through the selected priorities and implementation strategies.



Overview of Priorifies

An assessment of Price County conducted jointly by Flambeau Hospital and Price County Public Health concluded priority health needs in 2019-2022 will include:

- Mental Health
- ► Alcohol and Other Drug Abuse (AODA)
- ▶ Chronic Disease





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.

Factors identified by AODA/Mental Health Coalition leadership as contributing to the challenges in Price County

- A shortage of mental health providers, including providers specifically trained to work with youth
- Limited telehealth capacity to address mental health concerns
- Price County lacks inpatient mental health facilities
- Student reports of being bullied
- ▶ Reports of high isolation by some demographic groups
- Increasing suicide rates, especially among males
- Children and families in poverty
- Rising reports of child abuse

Data highlights

- In Price County, 23.1% of adults age 18 and older self-reported they receive insufficient social and emotional support all or most of the time (2006-2012). This is higher than Wisconsin adults (16.1%) and adults nationwide (20.7%).
- Price County's suicide rate is higher at 50.2 per 100,000 in 2016 than the Wisconsin average of 14.9 per 100,000. In Price County, as in Wisconsin, males are most at risk.
- Child Protective Services in Price County received reports on abuse at a rate of 44.2 in 1,000 children in 2016, while Wisconsin compared at 33.1 reports per 1,000 children.
- Price County Child Protective Services has placed an increasing number of children in out-of-home custody placements, with 41% of those removals being related to drug usage in 2016 and 2017, and 47% in 2018.

Identified local assets and resources

- Price County AODA/Mental Health Coalition (including representatives from, but not limited to: health care, public health, library, clergy/religious, law enforcement, and education sectors)
- ► Chequamegon, Phillips and Prentice school districts' school counseling/guidance departments
- ▶ JPD Warrior, Inc. (local non-for profit focusing on suicide prevention)
- Price County Aging and Disability Resource Center Unit programs including Senior Nutrition (congregate dining sites located throughout Price County)
- Price County Behavioral Health Unit programs including Comprehensive Community Services and Community Support Programs
- Youth-serving organizations including school and community athletic teams and clubs

ALCOHOL AND OTHER DRUG ABUSE (AODA)

Why it is important

- An estimated 22 million people per year in the U.S. have drug and alcohol problems. Ninety-five percent of them are unaware of their problem.
- Young adults (age 18 to 25) are the biggest abusers of prescription (Rx) opioid pain relievers, ADHD stimulants, and anti-anxiety drugs in the United States.
- More than 50% of older adults (ages 57 to 85+) in the United States use more than five prescription medications daily, and this may lead to health issues resulting from unintentional prescription misuse or intentional prescription misuse.
- Drug and alcohol use can also lead to costly physical, mental and public health problems such as teen pregnancy, sexually transmitted infections, domestic and child abuse, violence, crime, and motor vehicle crashes.

Factors identified by AODA/Mental Health Coalition leadership as contributing to the challenges in Price County

- Shortage of substance abuse counselors and related treatment providers (mental health)
- Price County lacks inpatient substance abuse treatment facilities
- A high prevalence of risk factors including poverty, reported physical or emotional abuse, and poor mental health
- Increasing drug use; more lethal drugs being used
- Limited tobacco cessation resources and support
- A local and state culture of binge drinking
- Systemic trauma, passed from one generation to the next

Data highlights

- ▶ 39% of Price County high schoolers believe their parents would not think it is wrong for them to drink alcohol at least twice a month.
- Arrests for possession of a controlled substance have risen: 22 in 2014, 52 in 2015, and 62 in 2016.
- Arrests for sale of a controlled substance have risen: 2 in 2015, to 16 in 2016.

Identified local assets and resources

- Price County AODA/Mental Health Coalition (including representatives from, but not limited to: health care, public health, library, clergy/religious, law enforcement, and education sectors)
- Phillips, Prentice and Chequamegon school districts' school counseling/guidance departments
- Park Falls Police, Phillips Police and Price County Sheriff's Office
- Drug Abuse Resistance Education (DARE) programs in Price County School Districts
- Youth serving organizations or programs that promote resiliency including school and community athletic teams and clubs

CHRONIC DISEASE

Why it is important

Chronic diseases include heart disease, stroke, cancer, diabetes, and asthma. They can often be prevented through healthy diet, physical activity, and/or eliminating tobacco use and substance abuse. Chronic diseases are costly although effective management can prevent more serious complications. Ninety percent of health care spending is generated by the 50% of the population who have one or more chronic diseases (2016).

Diabetes:

- ➤ Affects 29.1 million people in the US (2012) ► Is the 7th leading cause of death (2013)
- One in every four US health care dollars is spent caring for people with diagnosed diabetes

Cancer:

- Is the 2nd leading cause of death in the US
- Risk factors include use of tobacco, physical inactivity & poor nutrition, obesity, UV light exposure
- Also can be reduced through early screening and vaccination

Coronary Heart Disease:

- Is the leading cause of death in the US
- Modifiable risk factors include high blood pressure, high cholesterol, cigarette smoking, diabetes, poor diet & physical activity, overweight & obesity

Factors identified by Price County Health and Wellness Coalition leadership as contributing to the challenges in Price County:

- Limited indoor recreation or physical activity spaces (which can be needed in winter)
- Adults reporting little time for personal health and wellbeing care as a result of a wide number of factors
- Environmental barriers to healthy decisions at work
- Inconsistent access to and availability of fresh fruits and vegetables
- Food available at local food pantries is influenced by donors and not always the healthiest choice

Data highlights

- ▶ 10.7% of Price County adults report their health as "poor" or "fair."
- 9% of Price County adults are diagnosed with diabetes, higher than for Wisconsin adults (8%).
- 67% of the Price County population has adequate access to park and recreational facilities compared to 86% for the State.

Identified local assets and resources

- Price County Health and Wellness Coalition
- School Districts with recreation facilities open to the public
- School District School Nutrition Programs (free and reduced lunch)
- Parks and trail systems throughout Price County and the Chequamegon-Nicolet National Forest
- Farmers markets and food pantries throughout the county
- Backpack programs (providing food in a backpack for children in families with low income)
- Youth serving organizations or programs including school and community athletic teams and clubs
- Strong Families/Strong Kids committee of the AODA/Mental Health Coalition

Mext Steps

Having identified the priority health needs to be addressed, next steps include:

- Collaborating with community partners
- Developing a three-year implementation strategy / community health improvement plan
- Creating a more specific annual action plan during each year of the implementation strategy
- Integrating the health priorities and implementation strategy into organizational strategic planning and resource investments and allocations



Approval and Input

Approval

This community health needs assessment (CHNA) report was adopted by the Board of Directors of Flambeau Hospital, Inc., on May 2, 2019 and by the Ascension Wisconsin Board on May 16, 2019. The CHNA report was shared with Price County Public Health's governing board on May 1, 2019.

Public Comments/Feedback

If you would like to serve on a coalition that helps meet the aims of this report, or have another comment on this assessment, please contact either Flambeau Hospital or Price County Public Health.

Community Relations Director
Flambeau Hospital
715-762-7575

Public Health Officer
Price County Health & Human Services
715-339-3054



Appendices

► Appendix 1:

Progress Report on Results of Previous CHNA Process

► Appendix 2:

Community Stakeholders

Appendix 3:

Crosswalk Between this CHNA Report and 501(r) Requirements

► Appendix 4:

Flambeau Hospital Sponsors





Flambeau Hospital and Price County Public Health are committed to making a positive, measurable impact on the health of the people in the communities we serve. To that end, we evaluate the strategies we implement to address the health needs of the community.

We use a logic model, an approach that is nationally recognized for program evaluation. Logic models provide methods for documenting the following:

- ▶ Inputs: Resources needed to implement the strategies
- Outputs: Actions taken, the number of programs/tactics implemented and the number of people reached
- Outcomes: Measures of the impact of the programs/strategies (such as changes in learning, actions or conditions)

To be specific about the outcomes we will be accountable for, we set SMART metrics – metrics that are Specific, Measurable, Achievable, Realistic and Time-related.

Evaluation Schedule/Process

At the beginning of the three-year cycle:

- Establish SMART metrics for medium-term (3-year) indicators for each strategy
- Establish SMART metrics for long-term (beyond 3 years) indicators for each priority area

At the beginning of each fiscal year in the three-year cycle:

- Establish SMART metrics for short-term (fiscal year) indicators for each strategy
- Establish action steps and output indicators for each strategy

Quarterly each fiscal year:

- Report actions completed
- Report the status of each strategy/priority

At the end of each fiscal year:

- Report on results for short-term and output indicators
- Describe accomplishments and analyze results

At the end of the three-year cycle:

- Report on results for medium-term indicators for each strategy
- Describe and analyze results
- Incorporate results into next Community Health Needs Assessment

The original CHNA report was posted in June 2019 with results for Year One and Year Two. This appendix was updated in early 2020 to also include results for Year Three.

Progress Report on Results of Previous CHNA Process 1

Health priorities identified in the preceding CHNA (2016-2019) were:

AODA/Mental Health
Chronic Disease and Nutrition
Aging Population (hospital-only initiative)

AODA / Mental Health

Results for Year 1:

- Two "Good Drugs Gone Bad" presentations were conducted. The presentations focused on reducing prescription drug abuse. The program was held at a Women's Expo, with 30 women attending. Eighty-one percent of presentation participants were able to recognize signs of prescription drug misuse.
- Information on the importance of parents not hosting parties with youth and alcohol ("Parents Who Host Lose the Most") was distributed through many channels including the District Attorney's office, community lawyers, school athletic director, school mailings to parents, a press release, yard signs, and student groups. The school districts of Prentice, Phillips and Chequamegan continue to participate in "Parents Who Host Lose the Most", although no new school districts were added in the past year. Zero citations for underage drinking in the county were issued during this time. It was felt by the Coalition that the "Parents Who Host" effort contributed to zero citations.
- The community resource guide was updated and distributed throughout Price County. The flyers were distributed at 3 town hall meetings focused on methamphetamine abuse. Approximately 200 people attended the town hall meetings. Attendees had a number of questions about topics covered in the resource guide.

AODA / Mental Health

Results for Year 2:

Three substance abuse-focused town hall sessions were held in three different communities in March 2018. Topics included the misuse of drugs as well as the availability of local resources. The "hidden in plain sight" room was also set up during the meeting in order to demonstrate how drugs can be concealed. Informational materials on prescription drug abuse prevention was also available. Approximately 100 people attended the 3 town hall meetings.

The original CHNA report was posted in June 2019 with results for Year One and Year Two. This appendix was updated in early 2020 to also include results for Year Three.

Progress Report on Results of Previous CHNA Process¹

- The school districts of Prentice, Phillips and Chequamegon continue to participate in "Parents Who Host Lose the Most", although no new school districts were added in the past year. Information on the importance of parents not hosting parties with youth and alcohol was distributed through the 3 school districts (prom, graduation) plus yard signs. No alcohol-related arrests were made in the 2018 proms or graduations.
- Two local AODA resource guides were updated -- one for providers and one for the community. 500 community resource guides were distributed (ex: public health department, hospital, chamber, library) and 100 provider resource guides were distributed (ex: clinics, counseling centers, recovery centers). Additionally, a 4-page report on AODA Coalition efforts and accomplishments was sent to every household in Price County.

AODA / Mental Health

Results for Year 3:

- The Alcohol and Drug Abuse (AODA)/Mental Health Coalition held its third annual 'town hall' event focused on substance abuse in Price County. With declining participation in the second year, the coalition revised the session to be the 'State of Price County' address. The event was repeated at three separate venues. In total, 28 people attended. Speakers included representatives from a variety of settings like law enforcement, school guidance, county public health and crisis services, and healthcare. After the panel shared their expertise, the audience asked questions of the experts. The 'hidden in plain sight' bedroom was also featured at each venue, demonstrating where drugs can be hidden in a bedroom. All 'State of Price County' participants who completed a survey indicated that the program was "helpful" or "very helpful" in identifying drug issues in our community.
- The coalition distributed 200 Deterra bags for safe disposal and 25 lock boxes for safe keeping of prescription drugs.
- The coalition promoted 'Good Drugs Gone Bad' and 'kNOw Meth' through billboards in the communities of Park Falls and Phillips.
- The coalition created an annual report which highlighted the activities of the coalition, help line numbers, and contact information for further involvement with the coalition. This report was disseminated to 10,500 households as a newspaper insert. Additional copies were also available at expos and other events.



Results for Year 3: continued

- The AODA resource guides for providers and for consumers were updated, printed, and distributed to coalition partners and agencies who were willing to share the resource.
- The coalition promoted multiple events through paper and radio advertising campaigns, including Strong Families/Strong Kids Music in the Park, Hines Park Clean Up, and the State of Price County Town Hall events.
- 'Parents Who Host Lose the Most' was utilized again in three school districts. A letter was sent to parents at graduation regarding penalties for hosting drinking parties for minors. There were no alcohol related arrests made in Price County related to the 2019 graduation.

Chronic Disease and Nutrition

Results for Year 1:

- The Strong Bones (renamed from Strong Women) classes were held in three communities in FY17: Park Falls, Phillips and Ogema. The program was offered at day and evening times. For the classes in which data was collected, on average, Strong Bones participants improved their weights progression by 37%.
- The 5210 program (5 fruits and vegetables daily; less than 2 hours of screen time; at least 1 hour of physical activity; 0 sugary beverages) was implemented in 3rd and 5th grades. Students who participated in 5210 demonstrated an increased understanding noted by the dietician/instructor of nutrition. The Health and Wellness Coalition hosted a 5210 booth at the Price County Fair. One billboard on a major highway in Price County promoted the 5210 approach.

Chronic Disease and Nutrition

Results for Year 2:

Four Strong Bones (renamed from Strong Women) classes were held in three communities in FY18: Park Falls, Phillips and Ogema. The program was offered at day and evening times. Two new instructors were trained. 79 individuals participated in the programs (duplicate count). In one of the classes, participants had measured improvements in their weight progression (average of 7%) and functional testing (average of 16%).

The original CHNA report was posted in June 2019 with results for Year One and Year Two. This appendix was updated in early 2020 to also include results for Year Three.



Results for Year 2: continued

The 5210 program (5 fruits and vegetables daily; less than 2 hours of screen time; at least 1 hour of physical activity; 0 sugary beverages) was implemented in 2nd, 3rd and 4th grade classrooms (n=142) and the after school program (n=24-32) at one elementary school. The number of third and fourth grade students reporting consumption of a fruit or vegetable everyday increased by 9% (pre-test to post-test for third and fourth grade classes at one elementary school). Additionally, some teachers reported on a post series student observation survey that they were hearing comments from their students on the amount and variety of fruits and vegetables eaten at home. 5210 was also promoted at the Price County Fair and through a billboard on a major highway.

Chronic Disease and Nutrition

Results for Year 3:

- Three Strong Bones (renamed from Strong Women) classes were held in four communities in FY19: Park Falls, Phillips, Ogema, and Kennan. The program was offered at day and evening times. Four hundred twenty-six (426) individuals participated in the programs (duplicate count). In one of the classes, participants had measured improvements in their weight progression (average of 6%).
- The 5210 initiative is a framework promoting consumption of 5 fruits and vegetables daily, having less than 2 hours of screen time, participating in at least 1 hour of physical activity, and drinking 0 sugary beverages. In FY19, the coalition paused on offering direct 5210 education but continued with promoting 5210 as a branding strategy. Given 5210 training and promotions (e.g., billboards, fliers) have occurred for multiple years, the concept has a level of recognition in the community. Organizations with events that fit these behaviors were asked to include the 5210 logo on their promotions. At least two events have agreed to do this for FY20 and many plans are in place to increase the recognition of this initiative.



Aging Population / Senior Health (Hospital only initiative)

Results for Year 1:

Three businesses/sectors in Price County participated in Dementia Friendly training in FY17. Ninety percent of those trained increased their knowledge of how to effectively interact with persons with dementia.

Aging Population / Senior Health (Hospital only initiative)

Results for Year 2:

Three businesses/sectors in Price County participated in Dementia Friendly training in FY18. For one of the trainings, the participants' quiz results increased from 30% correct responses (pre-training) to 80% (post-training).

Aging Population / Senior Health (Hospital only initiative)

Results for Year 3:

- Two businesses participated in Dementia-friendly training and two first responder groups received Dementia-friendly emergency response training.
- A published advocate for caregiving of dementia (Marty Schreiber) presented at a large community event, with the intention to spark conversation over the aging of Price County. Although his presentation did not reach the anticipated number of participants due to severe winter weather, approximately 50 books were shared in the community.
- A coalition began to form to look at the long-term education needs of our community in order to be fully inclusive of our aging population.

Appendix 2. Community Stakeholders

Listed below are the community stakeholders who provided input about the needs of the community through their attendance at the Community Needs Forum. Individuals with low income were surveyed directly through the food pantry for their input. (Note: Due to the small population and resources available, the organizations in Price County largely focus on the entire population. Few organizations focus exclusively on medically underserved or low-income individuals. There are no organizations that focus exclusively on minority populations given the demographics.)

- Community Members
- Price County Board of Supervisors
- Price County Aging and Disability Resource Center Unit
- Price County Children and Youth Unit
- Price County Behavioral Health Unit
- Price County Public Health Unit
- ▶ Price County Sheriff Department
- ► Park Falls Police Department
- ► Chequamegon School District
- Phillips School District
- Extension Price County
- Phillips Public Library
- New Horizons North (nonprofit agency providing social services and support for individuals with disabilities and/or severe mental health)
- ► Embrace (a domestic violence and sexual assault program that provides safe shelter and support services for survivors of Washburn, Rusk and Price Counties)
- ► Flambeau Home Health and Hospice
- Flambeau Hospital
- Limberg & Associates Counseling, LLC
- Marshfield Clinic Health System
- Ascension Wisconsin



Required Content from Section 501(r) Rules	Found in this Section	
Definition of the community served and how it was determined	Our Community	
Description of the process and methods used to conduct the assessment: Data and other information used in the assessment Methods of collecting and analyzing the data/information Any parties collaborated with or contracted with	Assessment Framework and Data Sources	
Description of how the hospital solicited and accounted for input from persons who represent the broad interests of the community • Summary of the input • How it was provided • Over what time period • Names of organizations providing input • Include at least one governmental public health department • Summary of nature and extent of their input • Description of populations being represented (medically underserved, low-income, minority) • Note any written input received on the prior CHNA	Voices of Our Community	
Prioritized description of the significant health needs identified Description of the process and criteria used in prioritizing	Priorities for Action	
Description of potential resources identified to address the needs	Overview of Priorities	
Evaluation of the impact of the actions taken since completing the last CHNA to address the significant health needs in that CHNA	Appendix: Progress Report on Results of Previous CHNA Process	

Abbendix 4. Flambeau Hospital Sponsors

Ascension Wisconsin

Ministry Health Care, part of Ascension Wisconsin, is a co-sponsor of Flambeau Hospital. Ascension Wisconsin (ascension.org/wisconsin) operates 24 hospital campuses, more than 100 related healthcare facilities and employs more than 1,300 primary and specialty care clinicians from Racine to Eagle River. Serving Wisconsin since 1848, Ascension is a faith-based healthcare organization committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable. As one of the leading non-profit and Catholic health systems in the U.S., Ascension operates 2,600 sites of care – including 151 hospitals and more than 50 senior living facilities – in 21 states and the District of Columbia.

Our Mission as a Catholic healthcare system: Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

Ascension is continuing the long and valued tradition of addressing the health of the people in our community, following in the footsteps of legacy Ministry Health Care. This flows directly from our Catholic Identity. In addition to the community health improvement efforts guided by our CHNA process, we contribute to other needs through our broader community benefit program.

Marshfield Clinic Health System

Marshfield Clinic was founded in 1916 by six physicians practicing in Marshfield, a rural central Wisconsin city. At its inception, Clinic founders saw that research and education were critical to their practice of health care and that remains so today. The Clinic became a 501(c)(3) nonprofit organization in 1992 and in 2014, Marshfield Clinic Health System, Inc., was formed. The Health System's mission is to enrich lives and create healthy communities through accessible, affordable, compassionate health care.

The Health System today is a \$2.4 billion integrated system serving Wisconsin, with about 10,000 employees that includes over 1,200 providers in 86 specialties. Its entities provide service and health care to more than two million Wisconsin residents through over 50 clinical care centers; Security Health Plan of Wisconsin, Inc.; and Marshfield Medical Center hospitals in Marshfield including Marshfield Children's Hospital, Eau Claire, Rice Lake, Neillsville, Ladysmith as well as Flambeau Hospital in Park Falls.