

Barron County Health & Human Services Board Meeting

Government Center Veterans Memorial Auditorium

Monday, January 23, 2023 9:30AM

PRESENT: Karolyn Bartlett – Chair, John Banks, Bob Heil, Toniann Knutson, Lynn Kolpack, Carol Moen, Dr. Richard Sampson, Stacey Wenzel, Patti Anderson, Diane Vaughn.

APPEARING VIRTUALLY: None

ABSENT: Jerry Apfel

OTHERS ATTENDING: None

STAFF PRESENT: Jeff French, County Administrator; Stacey Frolik, DHHS Director, John Muench, Director, Child Support; Child Support Program Manager, Lynette Metcalf, Jodi Busch, Finance Director, Heidi Syvinski, Financial Analyst; DHHS Program Managers – Karla Broten, Laura Sauve, Ann Hay, Mary Olsen, Bonnie Roemhild; Pam Gannon, DHHS Administrative Assistant.

STAFF APPEARING VIRTUALLY: None

STAFF ABSENT: Jodi Busch

Other Staff Attending Karla Potts-Shufelt, Kylie Crotteau.

Call to order by Chair Karolyn Bartlett at 9:30 a.m.

Public Meeting Notification read by Bartlett.

Motion: (Banks/Moen) to approve agenda for January 23, 2023 DHHS Board meeting. Carried.

Motion: (Anderson/Knutson) to approve minutes from the November 28, 2022 Health and Human Services Board meeting. Carried.

Comments from the Public: Heidi Wise, 746 21st St. Chetek gave her concerns regarding the Covid vaccine. Amanda Koehn, 2038 6th Ave. Chetek talked about her concerns over the Covid vaccine and county collaborating with another agency. Paul Popp, 1146 Dallas St. Chetek also gave his concerns of West Cap funds and Barron County to promote the Covid vaccine.

Financial Reports: Syvinski presented 2022 financial reports and a 5-year analysis on DHHS & Child Support.

2023 Rate Approval (Brochure & PH Fee Schedule) **Motion:** (Heil/Banks) to approve 2023 Fee Schedule. Carried.

Motion: (Moen/Anderson) To Bring Resolution to the Floor-In Support of Increased County Child Support Funding:

Motion: (Vaughn/Banks) To Close Debate on Resolution In Support of Increased County Child Support Funding.

Resolution – In Support of Increased County Child Support Funding: Motion: (Knutson/Moen) to approve Resolution. 9 voting in favor and 1 against (Vaughn). Motion Carried.

Comprehensive Community Services Cost Settlement Advance Request: Frolik explained Advanced Request.

Community Health Report: Sauve explained Community Health Report.

Department Updates:

DHHS: .Pandemic Rollback – Medicaid/Foodshare: Roehmheld gave update that February would be the last month of bonus food share benefits. Anticipates that Medicaid reviews will start again 4-1-2023 but still waiting for final word from the federal government.

Child Support: Muench states office is fully staffed with ongoing training of new staff members. In February or March there will be a comprehensive child support presentation.

Set next meeting date: February 27, 2023, at 9:30 am

Future Agenda Items: Conflict with March meeting looking to move to March 29. Report from Child Support. Vaccine incentive for discussion purposes. Update on Restorative Justice.

Adjourn – (Vaughn/Wenzel) adjourned the meeting at 11:00 a.m.

Respectfully submitted by Pam Gannon, Administrative Assistant
(Minutes are not official until approved by the DHHS Board.)

COMMUNITY HEALTH ASSESSMENT

A Summary of Key Findings



BARRON COUNTY, WI

2021-2022



BARRON COUNTY DEPARTMENT OF
HEALTH & HUMAN SERVICES

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ASSESSMENT PARTNERS

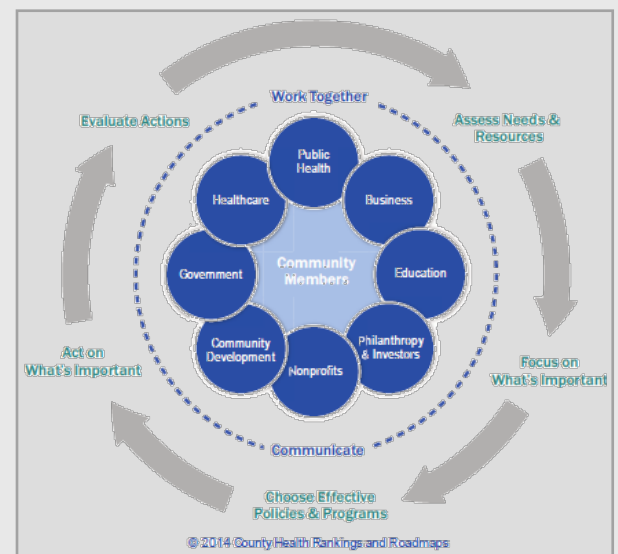


SUMMARY

The 2021-2022 Community Health Assessment (CHA) was designed to be a Reaffirmation Survey based on the findings of the extensive assessment in 2018-2019. The main reason for choosing this design for the 2021-2022 assessment was because, like many others, the pandemic has limited the resources and capacity for a full needs assessment. This assessment was used to make sure that the previous community identified health priorities within the 2018-2019 survey are still what our Community Health Improvement Plan (CHIP) should be based around. Public Health does a full, large-scale health assessment on a six year cycle, this report serves as our three year, mid-cycle update. The community health assessment 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. The reaffirmation results will be used to create action-oriented plans for their organizations and coalitions. The Community Health Improvement Plan is a six-year action plan, updated mid-cycle every three years that is created to address the health priorities identified by the CHA. The CHIP outlines our goals to improve each health area as well as actions to accomplish each goal.

Thrive Barron County is a collaborative group consisting of public health, local health care facilities, the Aging & Disability Resource Center and other public and private community groups. This committee works together to assess the health of Barron County Wisconsin and its residents. The steering committee has been meeting and working to gather data, obtain community input and prioritize health needs. The community health planning effort includes two major phases: a community health assessment (CHA) and a community health improvement plan (CHIP).

As a result of this process our community confirmed **substance use**, **mental health** and **chronic disease** are still the top health priorities in Barron County. In addition health equity and the social determinants of health are being weaved into all priorities as we know they are the top predictors of health.



BARRON COUNTY HEALTH PRIORITIES

Substance Abuse

Mental Health

Chronic Disease

THE SOCIAL DETERMINANTS OF HEALTH & HEALTH EQUITY

For many years, the public health field focused on individual behaviors and lifestyles as the key determinants of good health. Recently the field has started **to recognize that where we live, learn, work, and play also impacts our health**. There is growing evidence that unequal access to good jobs, healthy food, good schools, and safe communities lead to worse health outcomes, and the people who most often lack access to those things are people with lower incomes and people of color. This shift in the public health field has brought more attention and energy to the goal of health equity, a commitment to reduce and ultimately eliminate disparities in health and strive for the highest possible standard of health for all people. Health equity is concerned with creating better opportunities for health and giving special attention to the needs of those at the greatest risk for poor health.

Social Determinants of Health

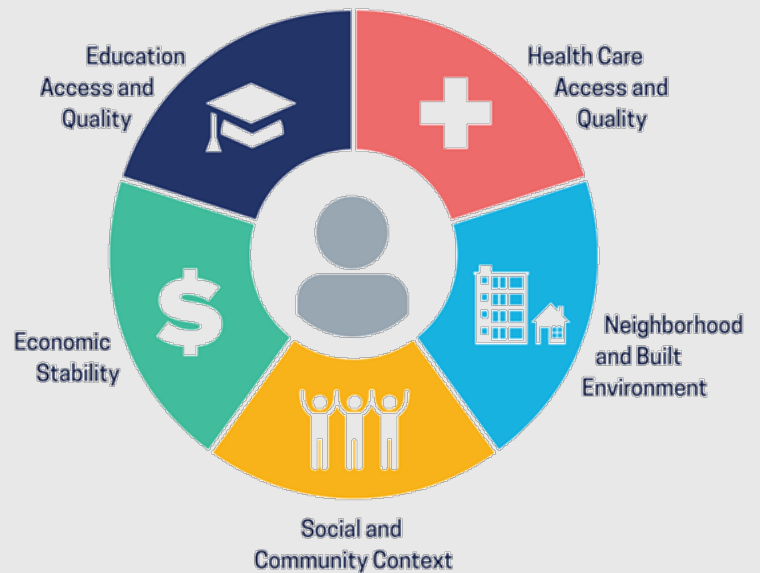


Photo courtesy of the Robert Wood Johnson Foundation

Understanding how health equity fits into the community definition of health and the community health assessment over all was very important to the Steering Committee. Finding ways to reach various populations in Barron County is a priority. It is understood that while problems identified may be similar, there are different needs within the same health concern among diverse populations. **Thrive Barron County strives to look for ways to adapt and modify approaches to ensure we are serving people in the way that works best for them.**

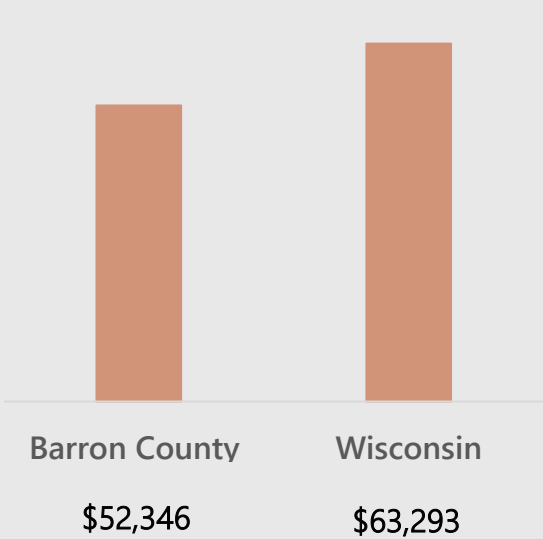
ASSESSMENT DATA

COMMUNITY PROFILE AND DEMOGRAPHICS

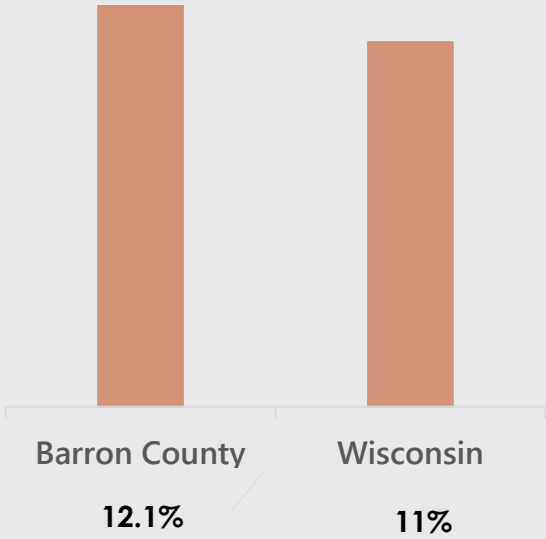
Barron County a rural community comprised of 4 cities (Barron, Chetek, Cumberland and Rice Lake), 7 villages (Almena, Cameron, Dallas, Haugen, New Auburn, Prairie Farm and Turtle Lake and 25 additional townships. It is located in Northwestern Wisconsin. The largest municipality is Rice Lake with 8,900 people. In 2021, the population of Barron County was estimated at 45,719. Ninety five percent of the population is White, 3% are Hispanic or Latino and 1.4% are Black or African American and 1.3% are American Indian or Alaska Native. Of Barron County’s current estimated population of 45, 7191, per the U.S. Census Bureau we estimate nearly 3% or more do not speak English as their primary language. Current numbers suggest 491 (.90%) speak Somali. School enrollment and local employer information, however, indicates the Somali speaking population has increased beyond that number. We have 738 (1.62%) residents who speak Spanish; migrant workers increase that number to 1008 (2.2%) from mid-May to September. There are several unique employment opportunities within Barron County that draw immigrants from across the globe. In addition to Spanish and Somali communities Barron County also has several plain clothes communities and a small part of the St. Croix Chippewa Indians of Wisconsin tribal reservation.



MEDIAN INCOME



PERSONS IN POVERTY



PERCENTAGE POPULATION RECEIVING INCOME MAINTENANCE

SERVICES IN 2021 COMPARED TO OTHER COUNTIES IN THE GREAT RIVERS INCOME MAINTENANCE CONSORTIUM

Income Maintenance includes: Medical Assistance, Food Share, and Child Care Assistance

Source: Barron County Economic Support Programs

County	Percent Population	County	Percent Population
Barron County	27.13%	Eau Claire County	21.33%
Burnett County	28.40%	Pierce County	14.44%
Chippewa County	21.89%	Polk County	22.70%
Douglas County	24.09%	St. Croix County	13.20%
Dunn County	21.53%	Washburn County	26.97%

****Barron County is the SECOND highest county for percentage of residents receiving income maintenance in the region.**

PERCENTAGE POPULATION BELOW POVERTY LEVEL

Source: US Census Data

Below Poverty Level: Race & Hispanic Origin	Barron County Percent Below Poverty Level	Wisconsin Percent Below Poverty Level
White alone	11.6%	8.5%
Black or African American alone	5.4%	29.5%
American Indian & Alaska Native alone	34%	19.2%
Asian alone	20.8%	13.2%
Native Hawaiian & Other Pacific Islander alone	-	-
Some other race alone	8.7%	16.3%
Two or more races	25.7%	16.7%
White, Hispanic or Latino origin (of any race)	23.0%	18%
White alone, not Hispanic or Latino	11.3%	8.4%

Our American Indian residents are living in poverty at disproportionate rates compared to other races. Lack of transportation and substance use were cited as contributing to this high poverty rate.

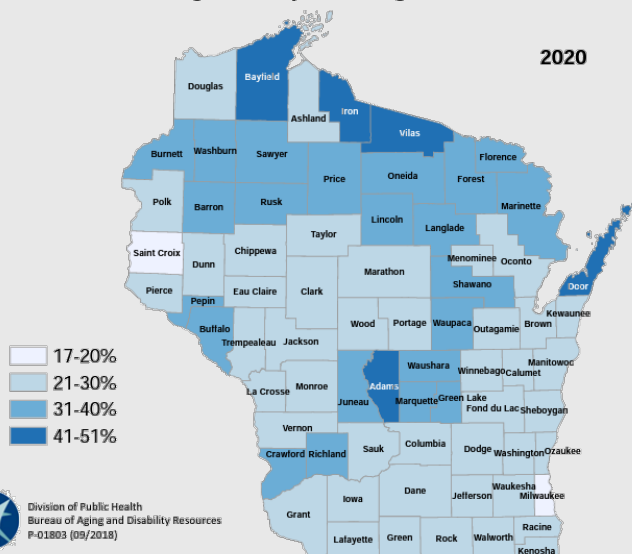
AGE OF RESIDENTS

Age ¹	Barron County	WI
Under 5 years	5.3%	5.4%
Under 18 years	21.4%	21.6%
65 years & over	22.7%	17.9%

¹Census Quick Facts, Barron County WI (2021)

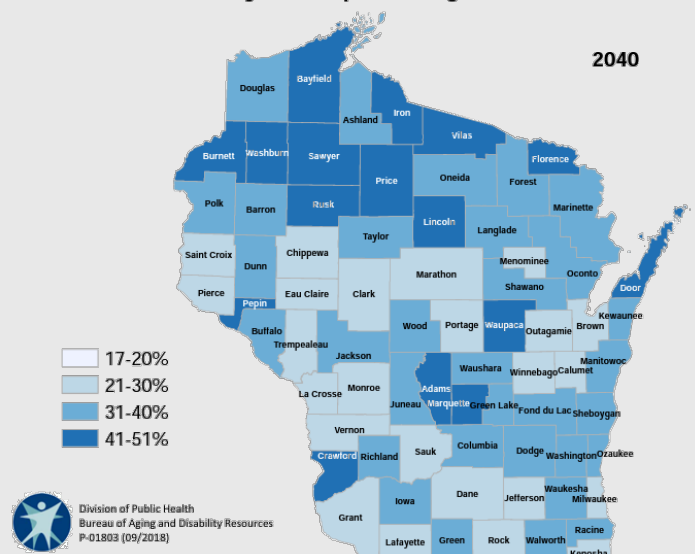
Barron County's population continues to age. We need to consider the impact this will have on employment, housing, community services, healthcare, and our families.

Percent of the Projected Population Ages 60 and Older, 2015-2040



Source: Wisconsin Department of Administration, Demographic Services, 2010-2040 Population Projections, Vintage 2013

Percent of the Projected Population Ages 60 and Older, 2015-2040



Source: Wisconsin Department of Administration, Demographic Services, 2010-2040 Population Projections, Vintage 2013

HEALTH CARE CAPACITY AND DISTRIBUTION

According to data from the Census Bureau, 7.63% of Barron County's Population is uninsured. The overall rate in Wisconsin is 5.45%. This rate has increased or stayed the same each year since 2015.

Primary Medical Care

Five medical systems serve Barron County residents through ten clinics and three hospitals.



Amery Hospital and Clinic
Hospital- Amery
Clinic- Turtle Lake



Cumberland Health Care
Hospital- Cumberland
Clinics- Cumberland and Turtle Lake



Marshfield Medical Center
Hospital- Rice Lake
Clinics- Rice Lake, Cumberland, Chetek
Family Health Dental Center- Rice Lake (*Federally Qualified Healthcare Center*)



Mayo Clinic Health System
Hospital- Barron
Clinics- Barron, Rice Lake, Chetek



Prevea Health
Clinic- Rice Lake

NO COST HEALTHCARE

Rice Lake Area Free Clinic*

Open Tuesday nights, staffed by volunteers. Provides free primary medical care, diabetic clinic and new in 2019 mental health counseling services.

Barron County is a primary care provider health care shortage area. According to the County Roadmaps and Rankings Barron County has ratio of population to primary care providers of 900:1 compared to 1260:1 in Wisconsin. This rate has been fairly stable in Barron County over the past five years with a low in 2018 of 885:1 and a high in 2015 of 947:1.

DENTAL HEALTH

Two dental clinics in Barron County currently accept medical assistance and provide care on a sliding fee scale: Northlakes Community Clinic (Federally Qualified Health Center) in Turtle Lake and Marshfield Clinic Health System in Rice Lake. Barron County has an additional 10 dental clinics, an oral surgery clinic and two orthodontic clinics.

Barron County is a Dental Care Health Professional Shortage Area. According to the 2020 County Health Rankings & Roadmaps Barron County has ratio of population to dentists of 1450:1. The Wisconsin average is 1390:1. This ratio has improved slightly in Barron County in the last five years decreasing from a high of 1620:1 in 2016.

MENTAL HEALTH

Barron County Public Health keeps a mental health resource list which currently has 14 private Barron County behavioral health counseling services listed. There are an additional 20 sites within 1 ½ hour

drive. Mayo Clinic Health System, Marshfield Clinic Health System and Prevea Rice Lake Health Center all offer behavioral health services.

Low cost options include:

[Northlakes Community Clinic](#), a FQHC, provides mental health services on a sliding fee scale.

[Rice Lake Area Free Clinic](#), provides free counseling services one night a month.

[Barron County Behavioral Health](#) ensures access for qualified persons to DHS 75, DHS, 34, DHS 36, and DHS 63 programs. The services provided adhere to the statutorily mandated behavioral health services that are outlined in the administrative codes and provide behavioral health and substance use services to populations who cannot otherwise afford services.

Barron County is a Mental Health Professional Shortage Area. According to the 2019 County Health Rankings, Barron County has a ratio of population to mental health providers to 1,160:1. The Wisconsin average is 440:1.

HEALTHCARE BARRIERS & GAPS

In 2018, the community shared its views on healthcare barriers and gaps through surveys, focus groups and interviews. Healthcare partners (Rice Lake Area Free Clinic, Northlakes Community Clinic, Cumberland Healthcare, Marshfield Medical Center Clinic, Mayo Clinic Health System, and Public Health) contributed to this data. Analysis showed the top barriers and gaps. All of the healthcare partners still feel these are top concerns. A recent survey of Barron County residents on the effects of the pandemic has shown that the pandemic has only made these worse.

BARRIERS

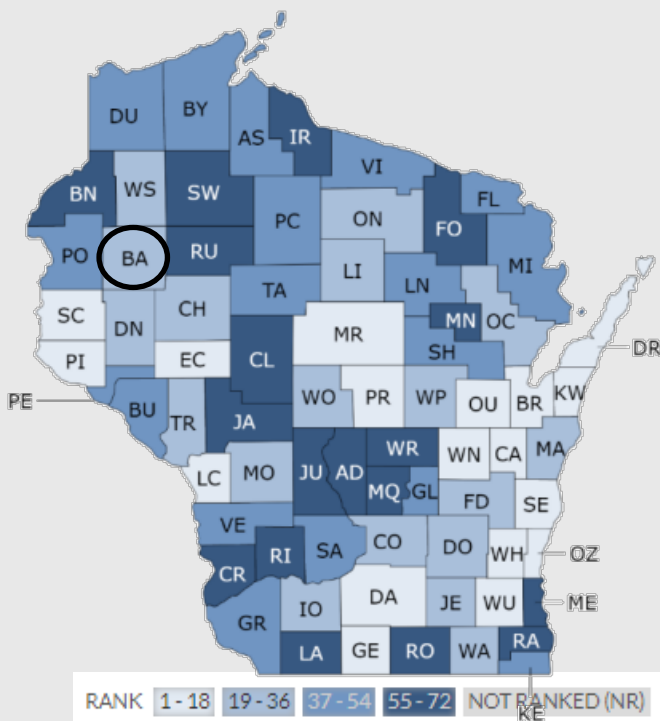
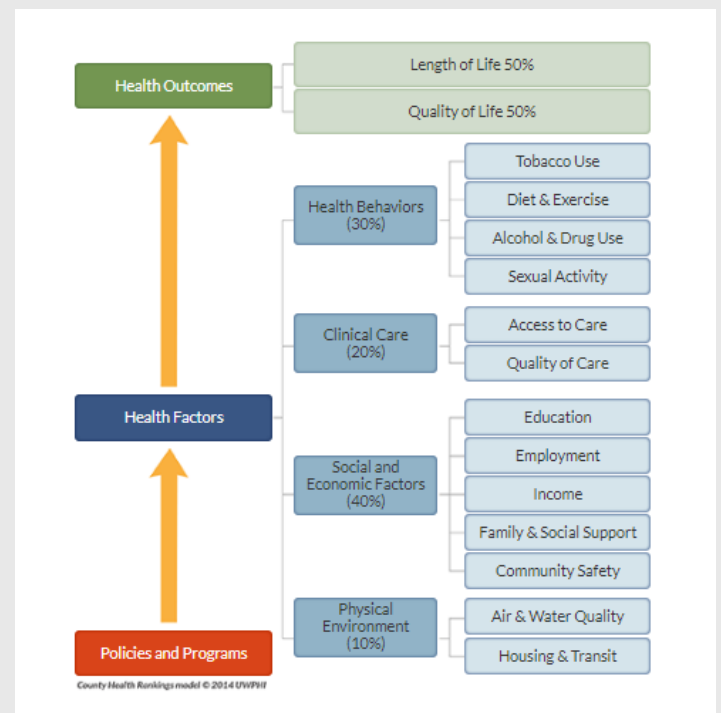
- **Poverty:** issues which force residents to make choices between basic living costs and healthcare
 - affordable housing
 - education
 - low wage jobs
- **Affordability:**
 - high insurance costs/ high deductible
 - cost of healthcare overall
 - cost of medications
- **Communication:**
 - language barriers (Spanish and Somali are primary languages needing interpreters)
 - literacy levels
 - the inability to understand how insurance works
 - being unsure where to start in the process
 - mental health stigma prevents the seeking of services
- **Transportation:**
 - no public transportation
 - living in a rural community

GAPS

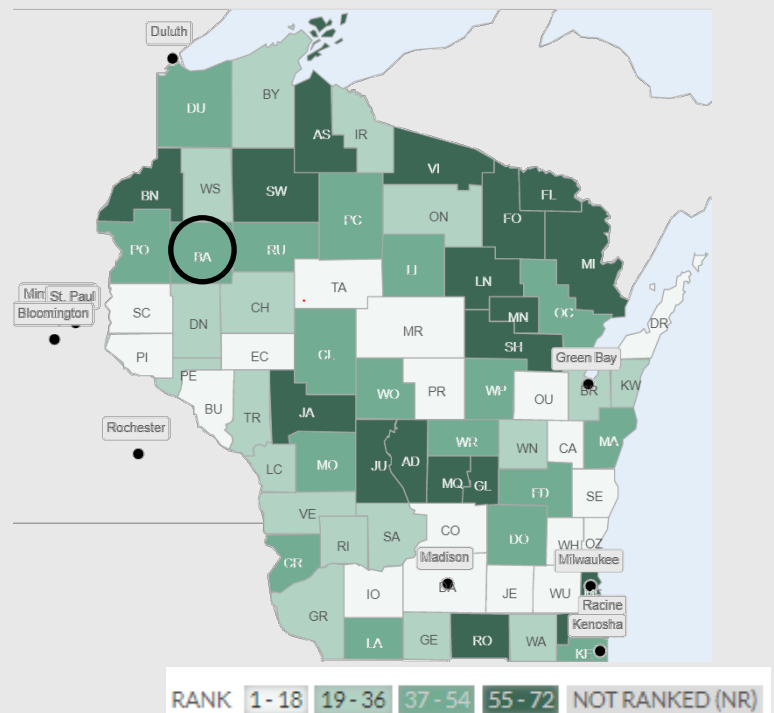
- **Rural Community:**
 - difficulty recruiting providers and/or their spouses to our rural community
 - migration of young, college educated professionals out of Barron County
- **Reimbursement Rates:**
 - inpatient and emergency mental health reimbursement rates are unable to sustain programs
 - no inpatient mental health or crisis stabilization beds in Barron County
 - low dental medical assistance reimbursement rates
- **Access:**
 - lack of psychiatry
 - lack of mental health for children
 - lack of local inpatient and emergency mental health services
 - lack of local inpatient substance abuse treatment
 - lack of dental providers
 - lack of dental providers who accept medical assistance

COUNTY HEALTH RANKINGS AND ROADMAPS

The County Health Ranking compare all Wisconsin Counties using the same health factors and outcomes shown in this diagram. The information found in the County Health Rankings helped inform Barron County's Health Assessment. More details on the Barron County Health Rankings can be found at, www.countyhealthrankings.org



Barron County ranked 31st out of 72 counties for health factors in 2022.



Barron County ranked 42nd out of 72 counties for health outcomes in 2022.

Below is a five year look at Barron County's Health Rankings. All Counties in Wisconsin are ranked from 1 (best) to 72 (worst). Barron County's health factors, which are the conditions that typically impact our quality and length of life, have steadily improved over the last five years.

Year	Health Outcomes (length of life & quality of life)	Health Factors (health behaviors, clinical care, social & economic factors, and physical environment)
2022	42	31
2021	36	34
2020	40	42
2019	21	24
2018	18	37

CORE DATA

Barron County looked at data from multiple sources as it prioritized health concerns. As part of the Wisconsin Community Health Improvement Plans and Processes (CHIPP) Infrastructure Improvement Project, a recommended core data set for initial assessment was created. Barron County used the "Introduction to the Recommended Core Data Set for Initial Assessment and Prioritization: Indicators for Assessing Local Health Needs, V2:0: February 2015" document to gather its core data. The core data set compares Barron County demographics, access to care, social determinants of health, and death and illness rates to state rates. The full core data set is located in Appendix 1 of this document.

REAFFIRMATION SURVEY

The survey was designed to reaffirm that the current top health priorities are still the top health concerns in Barron County based on the findings of the extensive assessment in 2018-2019. The Thrive Barron County Steering Committee developed and distributed the reaffirmation survey throughout the community to confirm **Substance Use**, **Mental Health**, and **Chronic Disease** were still the top health concerns. Approximately 370 Barron County residents completed the survey. A copy of the survey can be found in Appendix 2.

PRIORITIZATION OF HEALTH ISSUES BY THE STEERING COMMITTEE

The Thrive Steering Committee used the following questions and data contained in this document to analyze and identify the community's top health needs.

Comparison to State and National Goals	How is Barron County doing in comparison to the State and National goals? (Core Data Set)
Community Impact	<p>How is Barron County currently and in the future going to be affected by the health priority in terms of:</p> <ul style="list-style-type: none"> • Number of people affected • Costs associated in not doing something (health care, lost work, supportive living) • Severity of the condition (chronic illness, disability, death) • Impact on quality of life
Ability to Impact	<p>Are there known strategies to make a difference?</p> <p>Are there adequate resources available in the county to address the health priority?</p> <p>Are there adequate internal resources available to address the health priority?</p>
Community Readiness	<p>Is the community of Barron County ready to address the health priority in terms of:</p> <ul style="list-style-type: none"> • Stakeholders awareness of concern • Community organizations receptiveness to addressing the health priority • Citizens being open to hearing more about the health priority
Gaps in Community	Are there gaps in Barron County efforts to address the health priority?
Voice of Local Customer	Did survey data identify this as an issue?

ANALYSIS OF DATA AND PRIORITIES

Top Identified Health Priorities Identified by Various Data Collection Methods

Core Data Interpretation

1. Chronic Disease
2. Alcohol, Tobacco, and Other Drug Abuse (ATODA)
3. Mental Health

Affirmation Survey

1. ATODA
2. Mental Health
3. Chronic Disease

The Thrive Steering Committee reviewed the data, based on the core data information and community input, and prioritized 1) Substance Abuse (Alcohol, Tobacco, and Other Drug Use/Abuse), 2) Mental Health, and 3) Chronic Disease as our top health priorities.

APPENDIX 1

CORE DATA TABLE

Category	Title	Measure	Targets and Top Performers*	Barron County 2021	Wisconsin 2021	Year(s) Data Used	Barron County 2020	Wisconsin 2020
Demographics	Below 18 Years	% of population below 18 years of age		21.60%	22.10%	2015-2019	21.70%	23.00%
Demographics	65 and Older	% of population aged 65 years and older		21.4%	16.50%	2015-2019	20.9%	14.40%
Demographics	Race/ Ethnicity	% of population that is African American, Asian, American Indian or Alaskan Native, or Hispanic		4.10%	24.70%	2019		
Demographics	Not Proficient in English	% of population that is not proficient in English	Site Unavailable					
Demographics	Rural	% of population living in a rural area	Site Unavailable					
Demographics	Population Estimates	Population numbers by age group and gender	See Census					
Demographics	Population Change	% of change in population 2010 - 2014		0.2%	0.3%	2018-2019	0%	0%
Mortality	Premature Death	years of potential life lost before age 75 per 100,000 population (age-adjusted)	5,400 per 100,000 (Top Performer)	6,600 per 100,000	6,300 per 100,000	2017-2019	6,500 per 100,000	6,400 per 100,000
Mortality	Infant Mortality	Rate per 1,000 live births	1.8 per 1000 (HP2020)	4.5 per 1000	6 per 1000	2020	4.2 per 1000	5.8 per 1000
Measures of Overall Health	Poor or Fair Health	% of adults self-reporting poor or fair health (age-adjusted)	14% (Top Performer)	17%	15%	2018	14%	17%

Measures of Overall Health	Poor Physical Health Days	Average number of physically unhealthy days self-reported in adults in past 30 days (age-adjusted)	3.4 (Top Performer)	4	3.7	2018	3.7	3.9
Measures of Overall Health	Low Birth Weight	% of birth weights <2,500 grams	6% (Top Performer)	6%	7%	2013-2019	6%	7%
Chronic Disease	Diabetes	% of adults age 20 and above with diagnosed diabetes	6% (Top Performer)	11%	10%	2017	12%	9%
Chronic Disease	Cancer	Incidence per 100,000 population by cancer site (age-adjusted)		473.27 per 100,000	468.64 per 100,000	2014-2018		
Chronic Disease	Coronary Heart Disease Hospitalizations	Coronary heart disease hospitalization rate per 1,000 population		3.8 per 1,000	3.2 per 1,000	2017		
Chronic Disease	Cerebrovascular Disease Hospitalizations	Cerebrovascular disease hospitalization rate per 1,000 population		2.1 per 1,000	2.5 per 1,000	2017		
Chronic Disease	Youth Asthma	Cases under age of 18 sent to the Emergency Room for asthma		25.63	23.4	2020		
Oral Health	Fluoride in Public Water Supply	% of public water supplies with fluoride content at 0.7 PPM or greater		Only Rice Lake		2020		
Oral Health	Oral Health of 3rd Grade Children	% of untreated decay	20% (HP2010 target)	18.40%		2017-2018		
Communicable Disease	Childhood Immunizations	% of children aged 19 to 35 months who received the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and PCV	80% (HP2020 target)	65%	70%	2020	65	72.1

Communicable Disease	Communicable Disease	Population of top reportable communicable diseases		124	36,263	2017		
Mental Health	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	3.8 (Top Performer)	4.3	4	2018	3.8	4
Mental Health	Intentional Injury Hospitalizations	Self-inflicted hospitalization rate per 100,000 population		23.9 per 100,000	28.2 per 100,00	2017	81 per 100,000	99 per 100,00
Mental Health	Youth Suicide	% who seriously considered attempting suicide during the 12 months before the survey		15.70%	18.80%	2019		
Injury and Violence	Youth Injury	% who rarely or never wore a seat belt when riding in a car driven by someone else		5.00%	6.50%	2019		
Injury and Violence	Injury Hospitalizations	Ranked causes of hospitalizations for injuries (age-adjusted per 100,000) population)		352.00	471.2	2017		
Injury and Violence	Falls Fatalities 65+	Injury deaths due to falls for age 65 and older (per 100,000 population)		93 per 100,000	235.4 per 100,000	2017	119.6 per 100,000	146.7 per 100,000
Alcohol & Other Drugs	Excessive Drinking	% of the adult population that reports either binge drinking, defined as consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days, or heavy drinking, defined as	15% (Top Performer)	26%	V27%	2018		24%

		drinking more than 1 (women) or 2 (men) drinks per day on average						
Alcohol & Other Drugs	Alcohol impaired driving deaths	Proportion of driving deaths with alcohol involvement	11% (Top Performer)	15%	36%	2015-2019	7%	36%
Alcohol & Other Drugs	Drug Overdose Deaths	# of drug poisoning deaths per 100,000 population		10	20	2017-2019	12	19
Alcohol & Other Drugs	Drug Arrests	Number of arrests for drug possession		13%	7.30%	2012		
Alcohol & Other Drugs	Alcohol-related hospitalizations	Rate of alcohol-related hospitalizations per 1,000 population		1.9 per 1,000	2.2 per 1,000	2017		
Alcohol & Other Drugs	Youth Drug and Alcohol Use	% of students who had at least one drink of alcohol on one or more of the past 30 days		29.80%	29.20%	2019	19.2	19.3
Alcohol & Other Drugs	Youth Drug and Alcohol Use	% of students who had their first drink of alcohol other than a few sips before age 13		16.50%	15.00%	2019	16.4	14.6
Insufficient Sleep	Insufficient Sleep	% of adults who report fewer than 7 hours of sleep on average (age adjusted)		34%	33%	2018	32%	32%
Physical Activity and Nutrition	Adult Obesity	% adults (age 20 +) with BMI > 30	26% (Top Performer)	41%	32%	2017	41%	31%
Physical Activity and Nutrition	Physical Activity / Inactivity	Estimated percent of adults aged 20 and over reporting no leisure time physical activity	19% (Top Performer)	20%	20%	2017	23%	21%

Physical Activity and Nutrition	Access to exercise opportunities	Percentage of individuals in a county who live reasonably close to a location for physical activity (e.g., parks and recreational facilities)	91% (Top Performer)	74%	85%	2010 & 2019	58%	81%
Physical Activity and Nutrition	Youth Dietary Behavior	Percentage of students who ate fruits less than five times per day		5.70%	5.6	2019		
Physical Activity and Nutrition	Youth Dietary Behavior	Percentage of students who ate vegetables less than five times per day		5.90%	6.3	2017		
Physical Activity and Nutrition	Youth Dietary Behavior/ Overweight	Percentage of students overweight		14.60%	16%	2019		used how do you describe your weight.
Physical Activity and Nutrition	Youth Physical Activity	Percentage of students physically active at least 60 minutes per day on less than 5 days		55.30%	55.90%	2019		
Physical Activity and Nutrition	Breast-feeding	% of infants receiving WIC breastfed exclusively through three months		84%	81%	2018-2019		
Tobacco	Adult Smoking	% adults self-reporting smoking > 100 cigarettes in their lifetime and currently smoking (every day or most days)	16% (Top Performer)	21%	17%	2018	17%	16%
Tobacco	Adult Smokeless Tobacco Use	% of persons aged ≥18 years who reported currently using chewing tobacco, snuff, or snus (a small pouch of smokeless tobacco)		N/A	3.70%	2009		

		every day or some days						
Tobacco	Smoking During Pregnancy	% of mothers who report smoking during pregnancy	10%	18%	12%	2021	20%	13%
Tobacco	Tobacco Sales to Minors	% of illegal tobacco sales to minors		4.10%	14.1	2021		
Tobacco	Youth Tobacco Use	% of students who smoked cigarettes on one or more of the past 30 days	16% (HP2020)	5.70%	6.00%	2019		
Tobacco	Youth Tobacco Use	% of students who used chewing tobacco, snuff, or dip on one or more of the past 30 days		3.30%	3.80%	2019		
Tobacco	Electronic Vapor Products	% of students who ever used electronic vapor products		45.50%	50.10%	2019		
Reproductive and Sexual Health	Sexually Transmitted Infections	Chlamydia cases per 100,000 population	161 cases per 100,000 (Top Performer)	278 per 100,000	484 per 100,000	2018	243 per 100,000	479 per 100,000
Reproductive and Sexual Health	Teen Birth Rate	Birth rate per 1,000 females age 15-19	12 (Top Performer)	18 per 1,000	15 per 1,000	2017	19 per 1,000	17 per 1,000
Reproductive and Sexual Health	Prenatal Care	Adequacy of prenatal care per Kessner or Kotelchuck indices		97%	77%	2020		
Reproductive and Sexual Health	Preterm births	% of births < 37 weeks gestation		7.00%	9.90%	2020		
Reproductive and Sexual Health	Youth Sexual Behavior	% of students who have ever had sexual intercourse		34.60%	38.40%	2019		
Reproductive and Sexual Health	Youth Sexual Behavior	Among students who had sexual intercourse during the past three months, the percentage who did not use a condom		25.00%	27.40%	2019		

		during last sexual intercourse						
Access to Care	Preventable Hospital Stays	Hospitalization rate for ambulatory-care sensitive conditions per 100,000 Medicare enrollees	2565 per 100,000 (Top Performer)	3,255 per 100,000	3,747 per 100,000	2018	3,841 per 100,000	3,940 per 100,000
Access to Care	Uninsured under Age 65	% population under age 65 that has no health insurance coverage		8%	7%	2018	8%	6%
Access to Care	Primary care physicians	Ratio of population to primary care physicians	1030:1 (Top Performer)	890 to 1	1270 to 1	2018	910 to 1	1270 to 1
Access to Care	Mental health providers	Ratio of population to mental health providers	270:1 (Top Performer)	1130 to 1	470 to 1	2020	1250 to 1	490 to 1
Access to Care	Dental Utilization	% of Medicaid members receiving a dental service		30.02%	23.43%	2008		
Access to Care	Dentists	Ratio of population to dentists	1210:1 (Top Performer)	1460 to 1	1410 to 1	2019	1560 to 1	1460 to 1
Access to Care	No recent dental visit	% of population age 2+ that did not have a dental visit in the past year		33%	26%	2017		
Access to Care	Local Health Department Staffing	Fulltime equivalents of local health department staff per 1,000 population		13.2 per 1,000	13.3 per 1,000	2016		
Access to Care	Flu Vaccination 65+	% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination	55% (Top Performer)	45%	53%	2018	47%	52%
Chronic Disease Management	Cervical Cancer Screening	% of women 18+ who had a pap test in last 3 years		no data				
Chronic Disease Management	Colon Cancer Screening	% of 50+ population who ever had a sigmoidoscopy						

		y or colonoscopy						
Chronic Disease Management	Diabetic Screening	% of diabetic Medicare enrollees that received HbA1c screening in past year	90% (Top Performer)	91%	90%	2017	91%	90%
Chronic Disease Management	Mammography Screening	% of female Medicare enrollees aged 65-74 that received annual mammography screening	51% (Top Performer)	51%	49%	2018	50%	50%
Chronic Disease Management	Cholesterol Screening	% of adults ever had cholesterol checked	94% (Top Performer)	90%	92%	2015-2019		
Education	High School Completion	% of adults ages 25 and over with a high school diploma or equivalent		90%	92%	2015-2019		
Education	Some College	% of adults age 25-44 with some post-secondary education	73% (Top Performer)	60%	70%	2015-2019	58%	69%
Education	Reading Proficiency	Average grade level performance for 3rd graders on English Language Arts Standardized tests		2.9	3	2018	3	3
Employment	Unemployment	% of population age 16+ unemployed but seeking work	2.6% (Top Performer)	4%	3.30%	2019	3%	3.00%
Employment	W2 Enrollment	Count of Individuals enrolled in W-2 (Wisconsin Works) on the last working day of the month		41	14,439	2017	29	11,039
Adequate Income	Median Household Income	Median household income (all residents of a household over age 18)		\$ 54,400	\$64,200	2019	\$ 50,300	\$60,800

Adequate Income	Poverty, All Ages	% of population living below the Federal Poverty Line (FPL)		11%	12%	2017	11%	12%
Adequate Income	Poverty, Children	% of children under 18 living below the Federal Poverty Line (FPL)	10% (Top Performer)	14%	17%	2019	15%	14%
Adequate Income	Children Eligible for Free Lunch	% of children enrolled in public schools that are eligible for free school lunch		45%	39%	2018-2019	39%	37%
Adequate Income	Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	9% (Top Performer)	9%	14%	2013-2017	10%	14%
Community Safety	Violent Crime	Violent crime rate per 100,000 population (includes offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault)	63 per 100,000 (Top Performer)	46 per 100,000	298 per 100,000	2014 & 2016	46 per 100,000	298 per 100,000
Community Safety	Child Abuse	Child abuse rate per 1,000 population (allegation of maltreatment substantiated)		9 per 1,000	4 per 1,000	2018	3 per 1,000	4 per 1,000
Community Safety	Youth Violence	% of students who have been bullied on school property during the past 12 months		22%	19.50%	2019		

Community Safety	Youth Violence	% of students who have ever been physically forced to have sexual intercourse when they did not want to		6.90%	7.3	2019		
Health Literacy	Illiteracy	% of the population age 16 and older that lacks basic prose literacy skills		8%	7%	2003		
Social Support	Inadequate Social Support	% adults without social/emotional support (self reported that 'never', 'rarely', or 'sometimes' get support they need)	14% (Top Performer)	21%	23%	2015-2019	32%	32%
Social Support	Single-parent Households	% of children that live in a household headed by a single parent	14% (Top Performer)	21%	23%	2015-2019	32%	32%
Social Support	Older Living Alone	% 65 years and older who live alone		28%	29%	2017	29%	29%
Racism	Hate Crimes	Hate crime rate		28	72	2020		
Built Environment	Limited Access to Healthy Foods	% population who are low income and do not live close to a grocery store (10 miles rural/one mile urban)		3%	5%	2015	3%	5%
Built Environment	Food Insecurity	Percent of people who do not have adequate access to food during the past year		9%	9%	2018	10%	10%
Built Environment	Lead Poisoned Children	Prevalence of elevated blood lead levels among children age six and under		1	678	2014		
Built Environment	Year Structure Built	% of housing units built prior to 1950		29%	26%	2017	27%	26%

Natural Environment	Air Pollution -- Particulate Matter	The average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county	5.2 (Top Performer)	6.4	7	2.16	7.2	8.6
Natural Environment	High Ozone Days	The 8-hour ozone concentration in parts per million, converted to an air quality index level	0 (Top Performer)	N/A	N/A		N/A	N/A
Natural Environment	Drinking Water Violations	Indicator of the presence of health-related drinking water violation. Yes-violations No-no violations		No		2019	Yes	
* Targets: Obtained from Healthy People 2020 or 2010 (HP2020 and HP2010).								
* Top Performers: See the County Health Rankings and Roadmaps (CHRR) Exploring the Data (http://www.countyhealthrankings.org/using-the-rankings-data/exploring-the-data) for more information on this metric. The "Top Performer" is the value for which only 10% of counties in the country are doing better.								

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APPENDIX 2

Barron County Reaffirmation Health Survey

Barron County Community Health Needs Assessment

All Barron County residents are invited to complete this Community Health Needs Assessment survey. The information you provide by completing the survey is important. Through this assessment we hope to gather insight into how we can more effectively address the top health priorities and concerns of our residents.

Barron County Community Health Needs Assessment

Descriptions of Previously Community-Identified Health Priority Areas:

Mental Health focuses on achieving and maintaining a healthy mental outlook. It includes services and support to guide how we think, act, and feel as we handle stress, relate to others, and make choices. This can include depression, anxiety, PTSD, self-harm, and suicide.

Chronic Disease involves illnesses that last a long time, usually cannot be cured, and often result in disability. It includes health concerns such as arthritis, cancer, diabetes, high blood pressure, chronic obstructive pulmonary disease (COPD) and obesity.

Alcohol, Tobacco, and other drug misuse: Alcohol misuse focuses on how much and how often alcohol is consumed. Topics include: Binge and/or excessive drinking, underage drinking, providing alcohol to minors, operating a vehicle while | intoxicated. Tobacco/nicotine use includes cigarettes, chewing tobacco and E-cigarettes. Substance misuse includes the use of illegal substances, such as marijuana, heroin, methamphetamine and the misuse of prescription drugs such as OxyContin, Ritalin, and Vicodin.

1. Do you consider mental health a top health priority within Barron County?

☐ Yes

☐ No

2. Do you consider chronic disease prevention a top health priority within Barron County?

☐ Yes

☐ No

3. Do you consider prevention and treating alcohol, tobacco, and drug misuse a top health priority within Barron County?

- ☐ Yes
- ☐ No

Barron County Community Health Needs Assessment

We are asking these questions to make sure we are getting opinions from people of different backgrounds.

4. What is your gender? Please select one option.

- | | |
|---------------------------------------------|-----------------------------------------|
| <input type="radio"/> Male | <input type="radio"/> Transgender |
| <input type="radio"/> Female | <input type="radio"/> Prefer not to say |
| <input type="radio"/> Non-binary/3rd gender | <input type="radio"/> other |

5. Which category below includes your age? Please select one option

- | | |
|------------------------------------|--------------------------------------------|
| <input type="radio"/> Less than 18 | <input type="radio"/> 50-64 |
| <input type="radio"/> 18-24 | <input type="radio"/> 65-80 |
| <input type="radio"/> 25-35 | <input type="radio"/> Over 80 |
| <input type="radio"/> 36-49 | <input type="radio"/> Prefer not to answer |

6. Race and ethnicity: I identify as...please select all that apply.

- | | |
|------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Black/African | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Hispanic/latinx | <input type="checkbox"/> Other |
| <input type="checkbox"/> Native American | <input type="checkbox"/> Prefer not to answer |

7. What is the highest level of school you have completed or the highest degree you have received? Please select one.

- | | |
|------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="radio"/> Less than a high school degree | <input type="radio"/> Bachelor's Degree |
| <input type="radio"/> High School degree or equivalent (e.g GED) | <input type="radio"/> Graduate Degree (e.g. Masters, PhD, M.D., etc) |
| <input type="radio"/> Some college but no degree | <input type="radio"/> Prefer not to answer |
| <input type="radio"/> Associate Degree | |