



MINISTRY
Good Samaritan Health Center



COMMUNITY
HEALTH NEEDS ASSESSMENT
Fiscal Year 2013

Communities We Serve



601 South Center Avenue, Merrill, Wisconsin 54452

TABLE OF CONTENTS

Community	4
Community Involvement	5
Community Needs Assessment Process	6
Health Needs	8
Community Assets	11
Health Priorities	12
Next Steps	12
Appendices	
Appendix 1 _ Community Statistics.....	13
Appendix 2 _ Community Needs Assessment Team	15
Appendix 3 _ Lincoln County Health Rankings	16
Appendix 4 _ Community Survey Tool	17
Appendix 5 _ Community Survey Distribution Sites	21
Appendix 6 _ Community Needs Index	22
Appendix 7 _ References	24

Ministry Good Samaritan Health Center Community Health Needs Assessment

An assessment of Lincoln County conducted jointly by Ministry Good Samaritan Health Center, Ministry Sacred Heart Hospital, and Lincoln County Health Department.

Ministry Good Samaritan Health Center (MGSHC) is a critical access hospital located in Merrill, Wisconsin – the county seat of Lincoln County. The population of Merrill is approximately 10,000. Merrill is a small-town community with a combination of business and industry. Merrill was once a thriving town supported by factories that catered to the housing and paper industry. With the economic and housing downturn, Merrill now has fewer manufacturing jobs, and many in Merrill drive to nearby Wausau to work and shop. Primary professional employers include an insurance agency, the public schools and health care organizations. Local manufacturing plants are those for windows and doors, work boots, and wire/metal products.

Available health care in Merrill and the surrounding area is common to what would be found in many rural communities: a hospital, and several medical and dental clinics, but few mental health resources.

Data and information for this report was obtained in several ways.

- Local health care, social service and public health agencies, the United Way, and the UW Extension shared data and information.
- A community survey was conducted; respondents participated via the internet or by paper surveys.
- Discussions and focus groups were conducted with physicians and community members who work at local agencies or businesses.
- Data was researched from reputable websites that provide health statistics.

We believe we can make the biggest impact to improve our community's health by collaborating and sharing resources with others who are working on similar issues. The following report details the information used to identify our Community Health Needs priorities.

Description of Community Served by the Hospital

Ministry Good Samaritan Health Center (MGSHC) is a critical access hospital primarily serving Lincoln County, Wisconsin. MGSHC is located in Merrill, Wisconsin – the county seat of Lincoln County. The population of Merrill is approximately 10,000. Located in north-central Wisconsin, Lincoln County has a population of approximately 28,700. Eighty-five percent of inpatient discharges from MGSHC are individuals who reside in Merrill; 92% from Lincoln County. Primary professional employers include an insurance agency, the public schools and health care organizations. Local manufacturing plants are those for windows and doors, work boots, and wire/metal products.

According to the 2010 US Census, Lincoln County has experienced a 1.9% increase in the percent of people age 65 and older over the period of 2000-2010. Merrill has seen a 1.8% decline in youth aged 19 and younger over the same period. The race of the population is 96.3% white, 1.3% Hispanic or Latino, and less than 1% each Black, American Indian, Asian, or Pacific Islanders. Compared to the state of Wisconsin, this community has a higher than average unemployment rate (11.5%) and lower than average household income (\$46,625). The uninsured rate is equal to the state average at 11%.

In looking at the education level of residents of Lincoln County, the Department of Workforce Development notes that the "education attainment of residents is reflective of the labor demand of Lincoln County." In other words, the availability of jobs drives the education level attained by the residents.

The effects of the demographic and economic environment identified above are felt by Ministry Good Samaritan Health Center. In recent fiscal years, significant contributions have been made to serve those with no ability to pay for their health services and to cover the costs of bad debt and reimbursement shortfalls.

Details of the data summarized above can be found in Appendix 1.

Who Was Involved in Assessment

The assessment team comprised of private and public Lincoln County organization members including: hospital nurses and administrators; clinic personnel; public health nurses and educators; behavioral health therapists and leaders; elementary, high school and post high school educators, nurses and administrators; police and emergency personnel; child, women's, family and senior social services; as well as interested community members in the health needs assessment process. Community members received an invitation by mail and follow-up email.

Jim Lawrence, health educator consultant, and Angela Nimsgern, regional director from the Division of Public Health Northern Region Office, and Art Lersch, community resource development educator at UW Extension Lincoln County, were consultants.

A representative from MGSHC joined the Lincoln County Community Health Improvement Plan Steering Team as a community partner to obtain further data for each of the priorities. This team created the community health survey and MGSHC assisted with data compilation and analysis.

Additionally, MGSHC conducted a focus group with physicians and case managers practicing in the facility. Those attending included: Dr. Robyn Schertz (medical director of Good Samaritan Emergency Department), Dr. Mark Gaulke (internal medicine/pediatrics, Ministry Medical Group), Dr. Robert Sedlacek (family practice, Ministry Medical Group), Dr. Dionna Pendleton (family practice, Ministry Medical Group), Dr. Ken Anuligo (family practice, Ministry Medical Group) and Mark Moser (LSW case management, Ministry Good Samaritan Health Center).

Appendix 2 lists the individuals who participated in the community needs assessment process.

Public Health Experts

Shelley Hersil, Director and Health Officer
Lincoln County Health Department
Master in Public Health Administration, UW-Lacrosse
Certified Health Education Specialist (CHES)
Lincoln County Health Officer for seven years and more than 10 years experience with Tobacco Control and Prevention.

Jim Lawrence, Health Educator Consultant
Wisconsin Division of Public Health – Northern Regional office
More than 20 years of experience in public health consulting.

Art Lersch, Associate Professor, Community Resources Development Educator
 UW Extension Lincoln County
 Master in Public Health Administration, Kent State University
Focus area are organizational, leadership and business development.

Angela Nimsgern, Regional Director
 Wisconsin Division of Public Health – Northern Regional Office
 Master in Public Health Administration, CHP
More than 12 years of experience with community health assessments.

How the Assessment Was Conducted

The community needs assessment process started in 2012 with “Data in a Day” event. Community members were invited to review secondary data provided by community partners as well as the Wisconsin Division of Public Health. Participants spent the day reviewing Lincoln County health and social determinants data and current community resources. The *Healthiest Wisconsin 2020* twelve focus areas were provided as a framework for the assessment.

The *Healthiest Wisconsin 2020* framework focuses on improving conditions for health (“health determinants”) that are primarily created in communities and institutions, and how their policies, practices and assets can be aligned to support health. The 12 Health Focus Areas are:

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

More information about the State Health Plan – Healthiest Wisconsin 2020 can be read at <http://www.dhs.wisconsin.gov/hw2020/>.

Another key piece of secondary information reviewed was the Lincoln County Health Rankings compared to state averages. The Wisconsin County Health Rankings Report from University of Wisconsin School of Medicine and Public Health ranks Wisconsin's 72 counties from 1 (healthiest) to 72 (least healthy) based on:

- Health Outcomes - rankings are based on an equal weighting of one length of life (mortality) measure and four quality of life (morbidity) measures.
- Health Factors - rankings are based on weighted scores of four types of factors:
 - o Health behaviors (6 measures)
 - o Clinical care (5 measures)
 - o Social and economic (7 measures)
 - o Physical environment (4 measures)

The data clearly shows a decline in mortality rankings from 28 to 55 and health factors from 47 to 57 over the period of 2010-2012. Appendix 3 summarizes the Lincoln County Health Rankings. Please note that the 2012 rankings were not available until after the “Data in A Day” was conducted.

Data from the US Census and Wisconsin indicators identified that the senior population (over age 65) will grow dramatically by the year 2030 and Lincoln County food share (food stamp) recipients jumped nearly 168% from 2000-2007. Other data reviewed included health care access, leading causes of death and behavioral risk factors.

Representatives with expertise in each area of interest assisted in utilizing their knowledge of how local needs are currently being met or are currently unmet. Through this process, the group was successful in narrowing the focus to address the highest unmet needs of the local counties by a handwritten survey. Twelve state priorities were then narrowed to three county priorities.

Following the “Data in a Day” review, a 2012 Lincoln County Community Health Improvement Plan Steering Committee formed. Ministry Good Samaritan Health Center dedicated a representative to this committee. The committee reviewed the top three priorities identified by the community group and by a unanimous vote agreed to focus on these areas for County and Hospital improvement plan initiatives. The Steering Committee held meetings to create a survey assessment for the community based on the three priorities to gather primary data. Refer to Appendix 4 or www.healthypeoplelincolncounty.com for the community survey tool.

Electronic surveys were sent to hospital employees, local government employees, and a copy was posted on www.healthypeoplelincolncounty.com. A press release and public service announcement on May 1, 2012 informed residents of the survey availability. Respondents were to be 18 years of age or older. Social media outlets, such as Facebook, also promoted the survey through the Lincoln County Health Department. Hardcopies of the survey were also distributed throughout Lincoln County targeting low income populations. Appendix 5 provides a complete list of survey distribution sites.

Six hundred and sixty-four Lincoln County residents completed the survey. One hundred and seventy-two people responded to the online survey and the rest via paper format. Only individuals 18 years or older completed the survey. According to U.S. Census Bureau 2011 population estimates about 78.4%, or approximately 22,424 individuals in the county were ages 18 or older. This means that approximately 3% of the adult population in Lincoln County completed this survey. A database summarizing all the raw data was developed by Ministry Good Samaritan Health Center in Merrill. This data was then analyzed and reported back to the Steering Committee by the UW Extension.

The margin of error for the sample size in relation to the total potential population of respondents was calculated at +/-3.75%. Using this margin of error, there is a 95% certainty that those who did not complete the survey would have answered in the same ways as those who did.

A challenge in identifying the needs of the poor is that while the community survey asked respondents for their income level, the data from the health questions were not correlated with the income level. However, there is information from the survey that tells us that the lack of financial resources is a barrier to receiving health care for many.

Additionally, statistics available regarding mental health are limited due to restricted collaboration with individuals working in that field. Refer to Appendix 4 or www.healthypeoplelincolncounty.com for the community survey results.

Ministry Good Samaritan Health Center then conducted a focus group comprised of physicians and case managers practicing in the facility to see if the priorities chosen by the Assessment Team were validated by what the physicians saw in their practices. Physicians in this group were invited to a one-hour meeting at the hospital. Information from “Data in a Day” and the other assessment activities were shared.

The Community Need Index (CNI) was also reviewed to determine if there are any areas of vulnerable individuals residing within their service area. The CNI was developed in 2005 to identify the severity of health disparity by zip code and demonstrates the link between community need, access to care, and preventable hospitalizations. The CNI accounts for the underlying economic and structural barriers that affect overall health. These barriers are income, culture/ language, education, insurance, and housing. Each barrier condition is assigned a score (with 1 representing less community need and 5 representing more community need). The scores are then aggregated and averaged for a final CNI score. The overall mean CNI score for Lincoln County is 1.9 and Merrill is 2.2. This likely confirms, due to the rural nature of the county and community, vulnerable groups are not congregated in any specific area.

Appendix 6 displays CNI information for Lincoln County and Merrill.

For an explanation of the Community Need Index:

http://www.dignityhealth.org/Who_We_Are/Community_Health/STGSS044508

Health Needs Identified

The data collected through the community health survey was compared whenever possible to associated state and county benchmarks. The following issues are the primary health care priorities identified for Ministry Good Samaritan Health Center’s community:

- Oral health
- Mental health
- Nutrition and healthy foods

ORAL HEALTH

Oral health means being free of mouth pain, tooth decay, tooth loss, oral and throat cancer, birth defects, and other diseases that affect the mouth. Many diseases can start with oral symptoms and many diseases beginning in the mouth can affect health in other parts of the body. The *Healthiest Wisconsin 2020* objectives related to oral health are: 1. Assure access for better oral health, and 2. Assure access to services for all populations.

In 2007-2009, 25% of children in Head Start and 17% of third graders in the northern region of Wisconsin had untreated dental decay. Forty-three percent of Head Start children and 68% of third graders had experienced dental carries. (*State of Wisconsin Department of Health Service.*)

From 2009-2011, approximately 680 patient visits, or 4% of all visits in Ministry Good Samaritan’s Emergency Department, had a primary or secondary diagnosis related to dental issues. About 63-72% of adults in Lincoln County had a dental visit and cleaning within the year, while 49.5 -63.8 % of adults had at least one tooth extracted due to decay or gum disease. (*2010 Wisconsin Burden of Oral Disease in Wisconsin*)

In the 2012 community health survey, 72% of respondents reported that the greatest barrier for dental care is cost and 31% of households have a member who has not received dental care in the last two years. Additionally, 38% have had a tooth pulled due to tooth pain. Access to

oral health care is a major barrier in northern Lincoln County. Only one dental clinic in the county is a safety net clinic. This is a federally-qualified health center which provides access to

dental services for underserved populations. This clinic is one of the few that will accept patients who are covered by Medicaid/Badger Care and Medicare. Their charge structure allows no/minimal fee for patients below 100% and sliding fees for patients below 200% of federal poverty. This clinic is located in Merrill, WI.

According to the Wisconsin Department of Health, Lincoln County has been identified as a shortage area for dentists for low-income populations. It would have taken 1.6 full-time equivalent dentists (dentist FTEs) to eliminate this dentist shortage for the calendar year 2009. The threshold for federal designation of a dental low-income population health professional shortage area is a ratio of 4,000 low income population to 1.0 FTE or greater.

MENTAL HEALTH

Mental illnesses affect one in every five American families. (*California Psychiatric Association*) Mental health issues are also associated with physical health problems and risk factors – such as smoking, physical inactivity, obesity and substance abuse – that can lead to chronic disease, injury and disability. In 2012, the County Health Rankings and Roadmaps report, Lincoln County residents have 3.1 poor mental health days per month as compared to the state average of 3.0. Lincoln County has also been designated as a mental health federally designated health professional shortage area. (*U.S. Department of Health and Human Services*)

In the 2012 community health survey, respondents reported:

- 27% have little interest or pleasure in doing things
- 33% feel down, depressed or hopeless
- 64% have trouble falling asleep, staying asleep or sleeping
- 64% feel tired with little energy
- 38% have poor appetite or eat too much
- 20% have trouble concentrating
- 84% have mental health resources available but 82% of those are in the form of friends/family
- Primary barriers reported for not seeking needed services are 35% cost, 8% lack of providers and 8% lack of time

For the years 2004-2008, the suicide rate in Lincoln County was 17.11 deaths/100,000 population. This is in contrast to the state rate of 12.23/100,000. The most suicides occurred in the age group 35-54 years. (*Wisconsin Interactive Statistics of Health*) Jane Deau, director of Merrill Area Community Enrichment Center, has commented on the prevalence of depression and suicide among the elderly. She stated that she knows of three people in the area who committed suicide this year. Other Wisconsin statistics show that in 2009, 16.4 % of female students and 10% of male students surveyed had seriously considered suicide. Six percent of surveyed students had attempted suicide in the past 12 months. (*Centers for Disease Control*) <http://www.cdc.gov/mmwr/pdf/ss/ss5905.pdf>

Unfortunately, there is not an abundance of data around mental health in Lincoln County. While we do know that there is a 4.7% prevalence of severe mental health in the non-institutionalized, there is little available information about those with other problems, such as anxiety, depression or dementia. Comments from medical providers in emergency medicine, primary care and public health attest to the lack of mental health resources in Lincoln County and the need for these resources. About 2.3% of patient visits to Ministry Good Samaritan Health Center's Emergency Department did have secondary diagnoses of mental health.

NUTRITION AND HEALTHY FOODS

Adequate and appropriate nutrition is a cornerstone for preventing chronic disease and promoting health. One key issue for this focus area is food security or assured access to enough food to lead an active and healthy life. There are seven districts in Wisconsin measured for food security. Lincoln County is in the third highest district with 14.8% of the population reporting food hardship. Food hardship is measured as household members, for a one year period, who do not have money to buy the food they need. (*Food Research and Action Center*)

In the 2012 community health survey, respondents reported:

- 88% know the dietary recommendations for eating a balanced diet and approximately 50% follow the recommendations most days.
- Daily liquid consumption includes drinking water (80%), milk (50%), coffee (51%), soda (38%) and juice (30%). Adults also reporting drinking alcohol (6%) followed by an energy drink (4%) daily.
- Lack of time (52%) and money (30%) are the two primary reasons reported for not eating a balance diet.

A complete list of findings from Data in a Day can be viewed at:

http://www.co.lincoln.wi.us/i/pu/7fac075d28fa/lc_community_needs_assessment_2012.pdf

The focus group comprised of physicians and case managers practicing in the facility agreed with the community priorities identified above but also felt that the following priorities were reflective of their patient populations:

- Lifestyle issues (nutrition and healthy foods, activity, chronic diseases)
- Sexual health
- Domestic abuse and violence
- Alcohol, tobacco and other drug abuse

SEXUAL HEALTH

Key findings from the “Data in a Day” revealed that there were a total of 51 Lincoln County births to women age 15-17 years old over a 10 year period – an average of five per year.

DOMESTIC VIOLENCE

“Haven” is the local shelter for those who have suffered sexual assault, domestic violence or other abuse. From January to August 2012, Haven provided 2,307 nights of shelter to women and children. There were 2,063 crisis calls, along with 57 calls from Law Enforcement. There were 473 unduplicated clients. (Information provided by Haven Director Judy Woller.) Haven also provides support groups, advocacy and emergency transportation. GSHC Emergency Department has a record of three sexual assault cases examined by Sexual Assault Nurse Examiner (SANE) staff in 2011. This number should be validated. Only adult sexual assault cases are seen at Ministry Good Samaritan Health Center; pediatric cases are referred to Ministry Saint Clare’s Hospital in Weston. This patient volume also does not account for the number of patients who may have been abused but present with other physical complaints.

ALCOHOL AND DRUG ABUSE

About 0.7% of patient visits to the Ministry Good Samaritan Health Center’s Emergency Department were related to alcohol or drug issues. In 2009, 41% of Wisconsin high school students reported current alcohol use – the 11th highest rate in the nation. Wisconsin also continues to have high rates of underage drinking, underage binge drinking and drinking among women of childbearing age. About 61% of Lincoln County adults report current alcohol use, which is similar to the rest of the state.

(<http://www.dhs.wisconsin.gov/stats/pdf/alcoholconsumption.pdf>)

Local emergency department physicians express concern over lack of resources to deal with acutely intoxicated patients who present to the emergency room. These patients do not have a medical diagnosis that would require hospitalization, but in their intoxicated state are not able to care for themselves or drive. They may be sleepy or combative. There is no mental health resource to which these patients may be discharged to, thus they often remain in beds in the emergency department, preventing those beds from being used for emergency care.

Marijuana is the most commonly used illicit drug among Wisconsin high school students, with 19% reporting current use and 34% reporting use at least once. Heroin, cocaine and methamphetamine use by high school students is 1-3%. It should be noted that in 2012, 18 methamphetamine labs were discovered in the central Wisconsin area. Inhalant use by Wisconsin students was 10% having ever used them.

(<http://www.dhs.wisconsin.gov/stats/aoda.htm>)

The Social Norms Survey is given annually to students and parents to compare perceived drug use/risky behavior to actual use. Generally, the actual use is much lower than the perceived use. When these results are shared, it helps to dispel the view that “everyone is doing it.”

Student responses from the Merrill High School Social Norms Survey (2012): 39% report drinking alcohol in the past 30 days; 18% report smoking marijuana; 24 % smoked cigarettes; 9% used methamphetamine; 13% misused over-the-counter drugs; 14% misused prescription drugs; 16% used smokeless tobacco; and 11% reported that they typically drank when hanging out with friends. While the percent of students that drink has steadily decreased from 47% in 2007, other statistics such as prescription drug misuse or methamphetamine use are starting to increase after decreasing in the past.

Community Assets Identified

The assessment identified a number of strong community assets in Lincoln County. Health care is provided by a number of organizations that work together to provide for the needs of the residents. In the Merrill area, primary care is provided by Ministry Medical Group Merrill, Marshfield Clinic Merrill Center, Aspirus Merrill Clinic and Bridge Community Clinic. St. Vincent DePaul Free Clinic also provides care to those who cannot afford to pay for their health care.

Ministry Good Samaritan Health Center is the only hospital in the Merrill area, and provides emergency care, diagnostic imaging, laboratory services, rehabilitation services, inpatient and outpatient surgery, acute inpatient care, swing bed, and outpatient treatment and testing services. Ministry Good Samaritan is a Level 4 trauma center, with a primary role to stabilize trauma patients and then transfer them to a higher level of care.

Patients from the community can access medically necessary health care services regardless of their ability to pay. Community Care Financial Assistance is granted based upon the patient’s inability to pay and to individuals who are uninsured, underinsured or medically indigent. Ministry Good Samaritan Hospital board members have commented that, in Merrill, many employers are now exclusively offering health plans with high deductibles. Some of the employers offer Health Savings Accounts (HSAs) with these plans. The high-deductible accounts may cause the subscribers to “think twice” prior to seeking health care, due to the higher personal cost for the care.

Home Health and Hospice care services are provided by Ministry Home Health or the Aspirus VNA/Aspirus Hospice, as well as other private agencies in the community. Support programs exist to meet the needs of the aging, as well as those with specific conditions such as epilepsy, autism or other disabilities.

Mental health resources are limited in the Merrill area. There are a few private counseling services in the area. The Lincoln County Health Care Center has locations in Merrill and Tomahawk, and provides outpatient treatment for mental health, alcohol and drug abuse, and counseling. They have a 24-hour emergency service line and suicide prevention services. Crisis interventions services from the Health Care Center to Ministry Good Samaritan Health Center have decreased due to funding over the past years—counselors are available by phone, but in-person consults are limited to business hours. Ministry Good Samaritan Health Center also received a grant within the past year that provides a counseling session to patients who are admitted to the hospital for medical reasons but request drug or alcohol counseling. North Central Health Care Center, located in Wausau, Wisconsin, also provides inpatient and outpatient treatment.

There are nine listings for dentists in the local phone book. Bridge Community Clinic provides medical and dental care for the low-income resident. Ministry Good Samaritan Health Center has a “Tooth Fairy Fund” that provides funding for those patients seen in our emergency department for dental pain to receive care at Bridge Community Clinic.

Health Priorities

The Lincoln County Needs Assessment Team narrowed the 12 *Healthiest Wisconsin 2020* priorities through a voting process. Each of the 37 participants was given three votes. The focus areas given the greatest number of votes were selected as priorities for the next 3-5 years.

- Oral health
- Mental health
- Nutrition and healthy foods

The focus group of physicians and case managers agreed with the priorities above but through discussion also felt that the following priorities were reflective of their patient populations.

- Lifestyle issues (nutrition and healthy foods, activity, chronic diseases)
- Sexual health
- Domestic abuse and violence
- Alcohol, tobacco and other drug abuse

Next Steps

The next step is to use the findings for strategic planning, decision-making, resource investments and allocations for the next five years, 2013-2017. Teams for the oral health, mental health, and nutrition and health foods priorities have been created and will begin to develop action plans. These teams ultimately report to the Lincoln County Community Health Improvement Plan Steering Team of which a representative from Ministry Good Samaritan Health Center will participate.

The Lincoln County Health Department was also awarded the Community Health Improvement Plan and Processes (CHIPP) Infrastructure Project mini grant funded by the UW School of Medicine and Public Health from the Wisconsin Partnership Program. This project tests CHIPP-related tools and resources. The logic model is one of the tools that are being utilized on each of the three health priorities.

Appendix 1 Community Statistics – Lincoln County and Merrill, Wisconsin

Population Demographics

Region	% Male	% Female	% 65 and over	% Caucasian	Two or more Races
Lincoln County	50.1%	49.9%	18.3%	97.2%	1%
City of Merrill	47.6%	52.4%	19.4%	96.3%	1.3%
State of Wisconsin	49.6%	50.4%	13.7%	86.2%	1.8%

Resource: 2010 U.S. Census Bureau

Age Group	Percent of Population	Percent Change from 2000-2010
Under 10 years	10.7%	-1.8%
10 – 19 years	13.5%	
20 – 29 years	8.9%	
30 – 39 years	10.5%	
40 – 49 years	15.4%	
50 – 59 years	16.5%	
60 – 69 years	11.4%	65+ 1.9%
Over 69 years	13.2%	

Resource: <http://www.cubitplanning.com/county/1811-lincoln-county-census-2010-population> (Accessed 8/24/12)

Income, Employment, Uninsured and Poverty Levels

County	Median Income (2006-2010)	Unemployment Rate (2012)	Uninsured (2012)	Persons Below Poverty Level (2006-2010)	Children Below Poverty Level (2012)
Lincoln County	\$46,625	11.5%	11%	10.0%	17%
State of Wisconsin	\$51,598	8.3%	11%	11.6%	19%

Resource: Wisconsin Division of Workforce Development, Census Bureau and County Health Rankings and Roadmaps website

Appendix 1 (continued)
Community Statistics – Lincoln County and Merrill, Wisconsin

Job-Based Educational Attainment

Job Based Education Attainment	Lincoln County	Wisconsin
< High School	8%	9%
High School Diploma or equivalent	39%	32%
Some College or Associates Degree	34%	34%
Bachelor’s Degree or above	19%	25%

Resource: Lincoln County Workforce Profile

Top Employers in Lincoln County

Establishment	Number of Employees
Church Mutual Insurance Co.	625
Lincoln Wood Products Inc.	500
County of Lincoln	450
Merrill Area Public Schools	400
Semling Menke Co. Inc.	386
Hurd Doors and Windows	375
Weinbrenner Shoes	293
Good Samaritan Health Center of Merrill	255
Lincoln Hills School Correctional Facility	215

Resource: <http://www.lincolncountyedc.org/merrillCommunityProfile1.pdf> (Accessed 8/24/12)

Appendix 2 Community Needs Assessment Team

Angela Nimsgern

***Brenda Jones**

Susan Cronick

Bill Zeitz

Bob Odegard

Bonnie Rudie

Brigid Flood

Carmen A. Viegut

***Cindy Lezotte**

Connie Kuczumarski

Dan Wendorf

Debbie Moellendorf

Debi McGregor

Dee Olsen

Erin Zastrow

Evelyn Lee

Jane Deau

Jesse Borchardt

Jessica DeJong

Jim Lawrence

John Sample

Julie Thompson

Kathy Graham

Ken Neff

Lori Decker

Pam Melander

Paula Gebauer

Peggy McDowell

Robin Lane

Sarah Jaeger

Sharon Anderson

Shelley Hersil

Stacy Bolder

Tammi Boers

Tammy Hansen

William Erickson

Amanda Kostman

WI Division of Public Health Northern Region

Ministry Good Samaritan Health Center

Ministry Sacred Heart Hospital

Lincoln County Board of Health

Merrill Fire Department

UW Extension - Lincoln County

Lincoln County Health Department

Ministry Sacred Heart Hospital

Ministry Good Samaritan Health Center

Community Care of Central Wisconsin

City of Merrill - Parks & Recreation Department

UW Extension - Lincoln County

Children's Service Society of Wisconsin

Merrill Area United Way

Aging & Disability Resource Center

Anderson Associates

Merrill Area Community Enrichment

Community Care of Central Wisconsin

Aspirus Clinics

WI Division of Public Health Northern Region

Merrill Area Public Schools

Tomahawk Senior Community Center

Citizen

City of Merrill Police Department

Ministry Medical Group - Tomahawk

Church Mutual Insurance Company

Ministry Sacred Heart Hospital

Northern WI Tobacco Free Coalition

Marshfield Clinic-Merrill Center

Bridge Community Health Clinic

Citizen

Lincoln County Health Department

Tomahawk School District

Lincoln County Health Department

UW Extension Lincoln County

COO Ministry Sacred Heart Hospital

UW Extension Lincoln County

***Names listed in bold = representatives from Ministry Health Care organization**

Appendix 3 Lincoln County Health Rankings

Trends

County	Category	2010	2011	2012
Lincoln	Mortality	28	37	55
	Health Factors	47	55	57

2011	Lincoln County	Error Margin	National Benchmark*	Wisconsin	Rank (of 72)
Health Outcomes					57
Mortality					55
Premature death	7,090	5,946-8,234	5,466	6,124	
Morbidity					56
Poor or fair	14%	10-18%	10%	12%	
Poor physical health days	4.0	2.9-5.1	2.6	3.3	
Poor mental health days	3.1	2.2-4.0	2.3	3.0	
Low birth weight	6.3%	5.3-7.3%	6.0%	6.9%	
Health Factors					57
Health Behaviors					57
Adult smoking	27%	21-33%	14%	20%	
Adult obesity	29%	24-34%	25%	29%	
Physical inactivity	24%	19-30%	21%	23%	
Excessive drinking	25%	20-32%	8%	24%	
Motor vehicle crash death rate	17	11-22	12	15	
Sexually transmitted infections	227		84	372	
Teen birth rate	31	26-35	22	31	
Clinical Care					40
Uninsured	11%	9-12%	11%	11%	
Primary care physicians	720:1		631:1	744:1	
Preventable hospital stays	78	68-87	49	59	
Diabetic screening	89%	79-98%	89%	89%	
Mammography screening	73%	62-83%	74%	73%	
Social & Economic Factors					49
High school graduation	92%			86%	
Some college	52%	47-57%	68%	63%	
Unemployment	11.5%		5.4%	8.3%	
Children in poverty	17%	12-21%	13%	19%	
Inadequate social support	18%	13-24%	14%	17%	
Children in single-parent households	23%	18-28%	20%	29%	
Violent crime rates	152		73	275	
Physical Environment					18
Air pollution-particulate matter days	2		0	5	
Air pollution-ozone days	0		0	1	
Access to recreational facilities	7		16	11	
Limited access to healthy foods	2%		0%	6%	
Fast food restaurants	31%		25%	41%	

* 90th percentile, i.e. only 10% are better; Note: Blank values reflect unreliable or missing data; Source: www.countyhealthrankings.org

Appendix 4 Community Survey

(Survey completed by Lincoln County residents 18 and older.)

Lincoln County Health Department and community partners are committed to work together to create a healthier county for all. We hope you will take time to complete and return this anonymous survey. Your input will help us focus our work in the areas of nutrition, oral health, and mental health.

If you have any questions, please contact Lincoln County Health Department, 607 N. Sales Street, Suite 101, Merrill, WI 54452, phone at 715-539-1360 or email at shersil@co.lincoln.wi.us.

Thank you for your participation.

A total of 664 respondents filled out the survey.
(N = Number of Responses)

Please circle your answers.

1. How would you rate your overall health?
 - a. Excellent 11.4%
 - b. Very Good 34.7%
 - c. Good 39.5%
 - d. Fair 12.6%
 - e. Poor 1.8%

(N: 659)
2. During the past 30 days, how many days did you not feel well physically (includes physical illness and injury)?
 - a. 0 29.1%
 - b. 1-5 45.1%
 - c. 6-10 11.9%
 - d. 11-20 7.2%
 - e. 21-30 6.8%

(N: 657)
3. During the past 30 days, how many days did you not feel well mentally (includes stress, depression and problems with emotions)?
 - a. 0 33.7%
 - b. 1-5 43.7%
 - c. 6-10 9.1%
 - d. 11-20 7.1%
 - e. 21-30 6.3%

(N: 646)
4. During the past 30 days, how many days did poor physical or mental health keeps you from doing your usual activities, such as self-care, work or recreation?
 - a. 0 days 59.6%
 - b. 1-5 days 25%
 - c. 6-10 days 6.5%
 - d. 11-20 days 4.6%
 - e. 21-30 days 4.2%

(N: 659)
5. Do you know the dietary recommendations for eating a balanced diet?
 - a. Yes 88.2%
 - b. No 11.8%

(N: 654)
6. Which of the dietary recommendations do you follow most days? (Circle all that apply.)
 - a. Fruits (4 – ½ c. servings) 53.6%
 - b. Vegetables (5 – ½ c. servings) 50%
 - c. Whole Grains (6 - 1 oz. serving) 49.4%
 - d. Dairy (3 – 1 c. servings) 47.6%
 - e. Protein (5 – 1 oz. servings) 64.8%
 - f. None of the above 11.7% (N: 664)
7. Which beverage(s) do you drink daily? (Circle all that apply.)
 - a. Milk 55.6%
 - b. Soda 38%
 - c. Water 85.7%
 - d. Juice 30.9%
 - e. Energy drink 4.2%
 - f. Coffee 50.8%
 - g. Alcohol 6.2%
 - h. Other 7.7%

(N: 664)
8. Where do you get most of your meals? (Circle only one answer.)
 - a. Restaurants – sit down 3.1%
 - b. Restaurants – fast food 1.8%
 - c. Homemade 75.7%
 - d. Home - pre-mixed or pre-packaged or frozen meal 17.4%
 - e. Meals on Wheels 2%

(N: 649)
9. What prevents you from eating a balanced diet? (Circle all that apply.)
 - a. Lack of time 52.4%
 - b. Lack of money 29.5%
 - c. Lack of family support 7.4%
 - d. Lack of access to groceries 5.1%
 - e. Not able to cook 3.8%
 - f. Lack of healthy restaurant options 9.3%

(N: 664)

In the last 2 weeks, have **you** experienced any of the following?

10. Little interest or pleasure in doing things
a. Yes 26.8% b. No 73.2% (N: 626)
11. Felt down, depressed or hopeless
a. Yes 33% b. No 67% (N: 625)
12. Trouble falling asleep, staying asleep, or sleeping too much
a. Yes 52.1% b. No 47.9% (N: 641)
13. Felt tired or had little energy
a. Yes 63.5% b. No 36.5% (N: 630)
14. Poor appetite or eat too much
a. Yes 37.6% b. No 62.4% (N: 639)
15. Trouble concentrating on things (such as reading the newspaper or watching TV)
a. Yes 19.9% b. No 80.1% (N: 633)
16. Experienced disturbing or recurring negative visual or auditory experiences,
a. Yes (9.2%) b. No 90.8% (N: 628)

In the last two weeks, has a **family member or friend** experienced any of the following?

17. Little interest or pleasure in doing things
a. Yes 20.5% b. No 47% c. Don't know 32.5% (N: 624)
18. Felt down, depressed or hopeless
a. Yes 24.8% b. No 45.7% c. Don't know 29.6% (N: 626)
19. Trouble falling asleep, staying asleep, or sleeping too much
a. Yes 36.5% b. No 38.3% c. Don't know 25.2% (N: 630)
20. Felt tired or had little energy
a. Yes 39.5% b. No 35% c. Don't know 25.5% (N: 628)
21. Poor appetite or eat too much
a. Yes 25.1% b. No 35% c. Don't know 25.5% (N: 629)
22. Trouble concentrating on things (such as reading the newspaper or watching TV)
a. Yes 13.2% b. No 52.4% c. Don't know 34.4% (N: 628)

23. Experienced disturbing or recurring negative visual or auditory experiences
a. Yes 5% b. No 67.4%
c. Don't know 27.6% (N: 617)
24. If you responded yes to any of the questions 24. Do you and/or your family or friends have the support and/or resources that you/they need?
a. Yes 83.5% b. No 16.5% (N: 522)
25. If you have answered "yes" to question 24, what resources and/or support have you used? (Circle all that apply.)
a. Self-help 67.2%
b. Support groups 9.9%
c. Faith-based organizations/church 36.9%
d. Mental health provider/counselor 23.4%
e. Family or friend 82.1%
f. Employee Assistance Program through work 8.9%
g. Other 17.4%
h. None of the above 10.1% (N: 431)
26. What is the biggest barrier for you and/or your family to get services for mental health? (Circle only one answer.)
a. Cost (no insurance or high co-pays/deductibles) 37.1%
b. Lack of transportation 4.7%
c. Lack of doctors/medical provider/counselor 8.4%
d. Lack of family support 3%
e. Lack of knowledge 7.9%
f. No time
g. Fear or lack of trust 17% (N: 430)
27. Do you know the daily recommendations for good dental health (brush teeth, floss, regular dental visits)?
a. Yes 97.7% b. No 2.3% (N: 650)
28. Do you practice the daily recommendations for good dental health regularly (brush teeth, floss, regular dental visits)?
a. Yes 85.2% b. No 14.8% (N: 651)
29. Do you have a dentist or dental clinic that you visit regularly?
a. Yes 74.2% b. No 25.8% (N: 651)

30. Are you covered by any public or private insurance plan that would pay for any part of your dental bills? (Including Medicare or Medicaid)
- a. Yes 72.4% b. No 27.6% (N: 634)
31. What is the biggest barrier for you and/or your family to get dental care? (Circle only one answer.)
- a. Cost (no insurance or high co-pays/deductibles) 71.1%
- b. Lack of transportation 5.4%
- c. Lack of doctors/medical provider 6.5%
- d. Lack of family support .45%
- e. Lack of knowledge 2.3%
- f. No time 8.8%
- g. Fear or lack of trust 5.4% (N: 433)
32. Have you or anyone in your family not received dental care in the last 2 years?
- a. Yes 31.1% b. No 68.9% (N: 640)
33. How many teeth have you had pulled due to tooth pain.
- a. 1 38.5% b. 2 15.1% c. 3 7.7% d. 4 9.5%
- e. 5 7.1% f. 5 or more 22.2% (N: 338)
34. Do you have someone you think of as your personal doctor or medical provider?
- a. Yes 87.6% b. No 12.4% (N: 647)
35. How long has it been since you last visited a doctor or medical provider for a routine checkup (physical exam not an illness or condition)?
- a. Within the past year 81.5%
- b. Within the past 2 years 11.5%
- c. Within the past 5 years 2.6%
- d. 6 or more years ago 1.8%
- e. Never .6%
- f. Don't know 2% (N: 659)
36. If your last routine checkup was more than 2 years ago, what is the reason? (Circle one answer.)
- a. Cost (no insurance or high co-pays/deductibles) 42.5%
- b. Lack of transportation 8.7%
- c. Lack of doctors/medical provider 3.1%
- d. Lack of family support .8%
- e. Lack of knowledge 3.1%
- f. No time 32.3%
- g. Fear or lack of trust 9.4% (N: 127)
37. Do you and/or a family member visit the emergency room or walk-in clinic as your primary source of health care?
- a. Yes 18.1% b. No 81.9% (N: 635)
38. If yes to question 37, why? (Circle all that apply).
- a. Scheduling issues 23.4%
- b. No regular doctor 13.1%
- c. Transportation issues 8%
- d. Emergency Care Needed 24.6%
- e. More convenient hours 19.4%
- f. Have no insurance and will not be turned away 11.4% (N: 175)
39. Has a medical provider prescribed you medication to help improve? (Circle all that apply.)
- a. Your mental health 30%
- b. Your physical health 47.3%
- c. (Circled a. and b. 22.6%) (N: 771)
40. If yes to question 39, do you take the medication prescribed on a regular basis?
- a. Yes 88.6% b. No 52% (N: 456)
41. Where do you get information on health?
- a. Internet 57.5%
- b. Books 34.2%
- c. Medical provider 78.6%
- d. Family 38.1%
- e. Friends 30%
- f. TV 19%
- g. Radio 8%
- h. Other 11% (N: 664)
42. What is your gender?
- a. Female 78.7% b. Male 21.3% (N: 647)
43. How old are you?
- a. 18-28 13.7% b. 29-39 19.6%
- c. 40-50 21.9% d. 51-61 23.1%
- e. 62+ 21.7% (N: 649)

44. Which racial group best represents you?
- a. White 96%
 - b. Asian .09%
 - c. Native Hawaiian and other Pacific Islander.05%
 - d. African American/Black 0
 - e. American Indian or Alaska Native 0
 - f. Hispanic or Latino .09%
 - g. Two or more races 1.2% (N: 645)
45. What is the highest grade of school you completed?
- a. Middle school 5.3%
 - b. High school 39.2%
 - c. Technical college/two year college 29.9%
 - d. Four year college 13.5%
 - e. Graduate studies 12.2% (N: 646)
46. How many live in your household?
- a. 1 30% b. 2-3 36.5% c. 4-6 30%
 - d. 7+ 3.4% (N: 646)
47. How many children live in your household?
- a. 1 38.2% b. 2-3 51.4% c. 4-6 9%
 - d. 7+ 1.4% (N: 346)
48. What is your current employment status?
(Circle only one.)
- a. Employed 58.1%
 - b. Self-employed 3.8%
 - c. Out work less than 1 year 2.5%
 - d. Out of work 1+ years 2.5%
 - e. Homemaker or stay home parent 3.8%
 - f. Student 3.8%
 - g. Retired 18.9%
 - h. Unable to Work 3.8%
 - i. Other 2.5% (N: 630)
49. How do you pay for your medical bills?
(Circle all that apply.)
- a. Health insurance through employer 54.8%
 - b. Self-paid health insurance plan 12.7%
 - c. Community care 3.8%
 - d. Medicaid 13.9%
 - e. Medicare 24.8%
 - f. Out of pocket 29.5%
 - g. Sliding scale 1.7% (N: 664)
50. How do you pay for your medical bills?
(Circle all that apply.)
- h. Health insurance through employer 54.8%
 - i. Self-paid health insurance plan 12.7%
 - j. Community care 3.8%
 - k. Medicaid 13.9%
 - l. Medicare 24.8%
 - m. Out of pocket 29.5%
 - n. Sliding scale 1.7% (N: 664)
51. Your annual household income from all sources is:
- a. Less than 10,000 15.7%
 - b. Between \$10,000- \$25,000 25.3%
 - c. Between \$25,000-\$50,000 21.1%
 - d. Between \$50,000 - \$75,000 17.5%
 - e. More than \$75,000 20.3% (N: 616)

For a complete copy of the survey results, visit www.healthypeopleincolncounty.com.

Appendix 5 Community Health Survey Distribution Sites

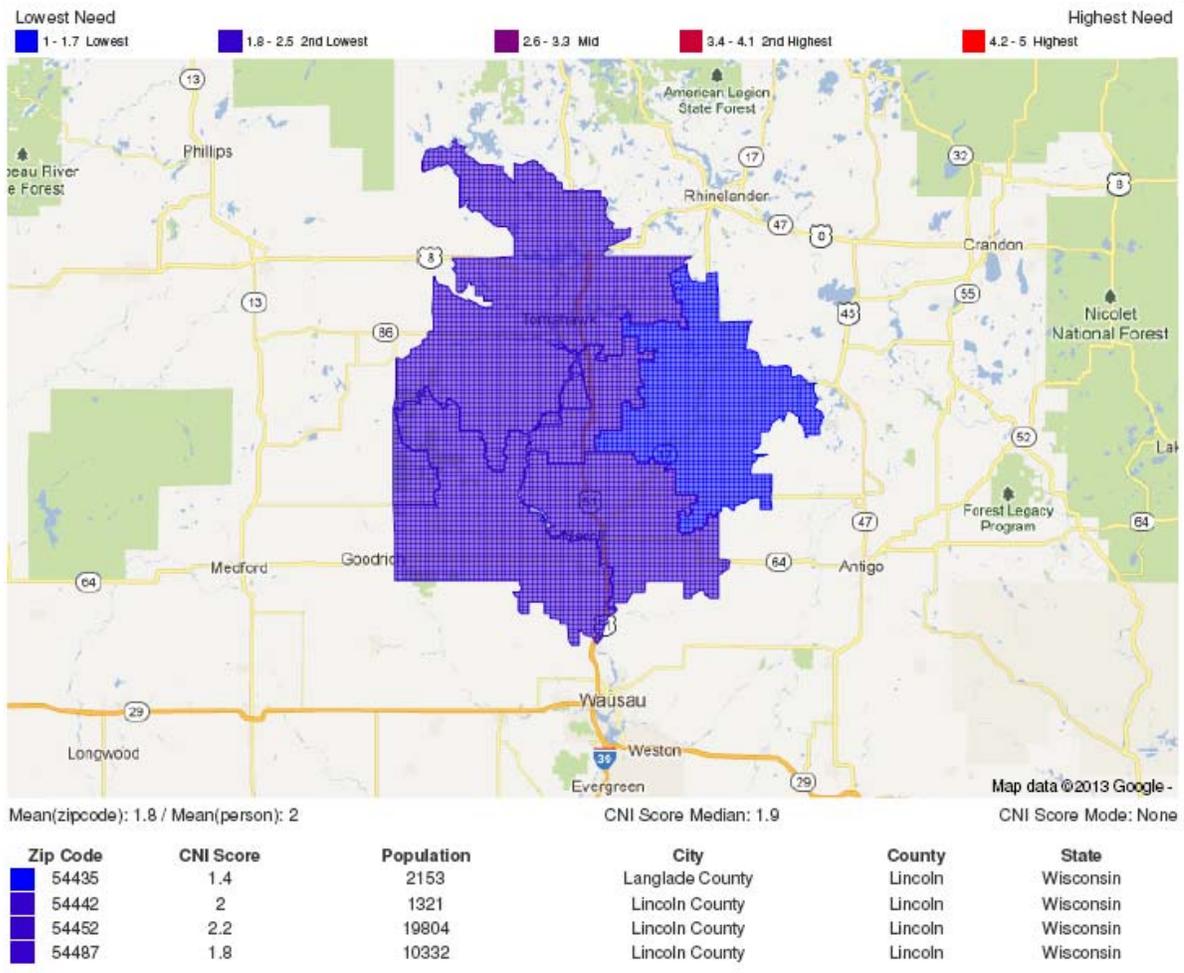
Target Audience	Location of Survey
Low Income	Merrill Food Pantry
Low Income	Tomahawk Food Pantry
Low Income	Merrill Bridge Clinic
Low Income	Soup Kitchen Merrill
Low Income	Breaking Bread Tomahawk/Merrill
Seniors	Meal Sites – Tomahawk Senior Center
Seniors	Meals on Wheels
Employees	Lincoln County Employees
Low Income	WIC
	HAVEN
Low Income	Merrill Head Start
Low Income	Tomahawk Head Start
General	Ministry Good Samaritan Health Center
General	Ministry Sacred Heart Hospital
General	Marshfield Clinic
General	Aspirus Clinic
General	Ministry Medical Group Tomahawk
General	Ministry Medical Group Merrill
General	Salvation Army Tomahawk
Low Income	Back Pack Program (through Salvation Army)
Families	Monday Folders (Tomahawk School Dist)
Families	Lighted School House (Tomahawk School Dist.)
Families	Monday Folders (Merrill Dist)
Families	Lighted School House (Merrill School Dist.)
Seniors/families	Merrill Enrichment Center
Seniors	Tomahawk Senior Center
General	TB Scott Library
General	Tomahawk Library
Employees	PCA
Employees	Harley
Employees	Tomahawk School District
General	Northwoods Vineyard Church
Families	Family Resource Center
Families	St. Mary's - soup luncheon-Wednesdays
Employees	Daigle Brothers

Press release on May 1, 2012 – all local newspaper, radio and Wausau Daily Herald

Posted on www.healthypeoplelincolncounty.com

Posted on UW Extension website and Facebook

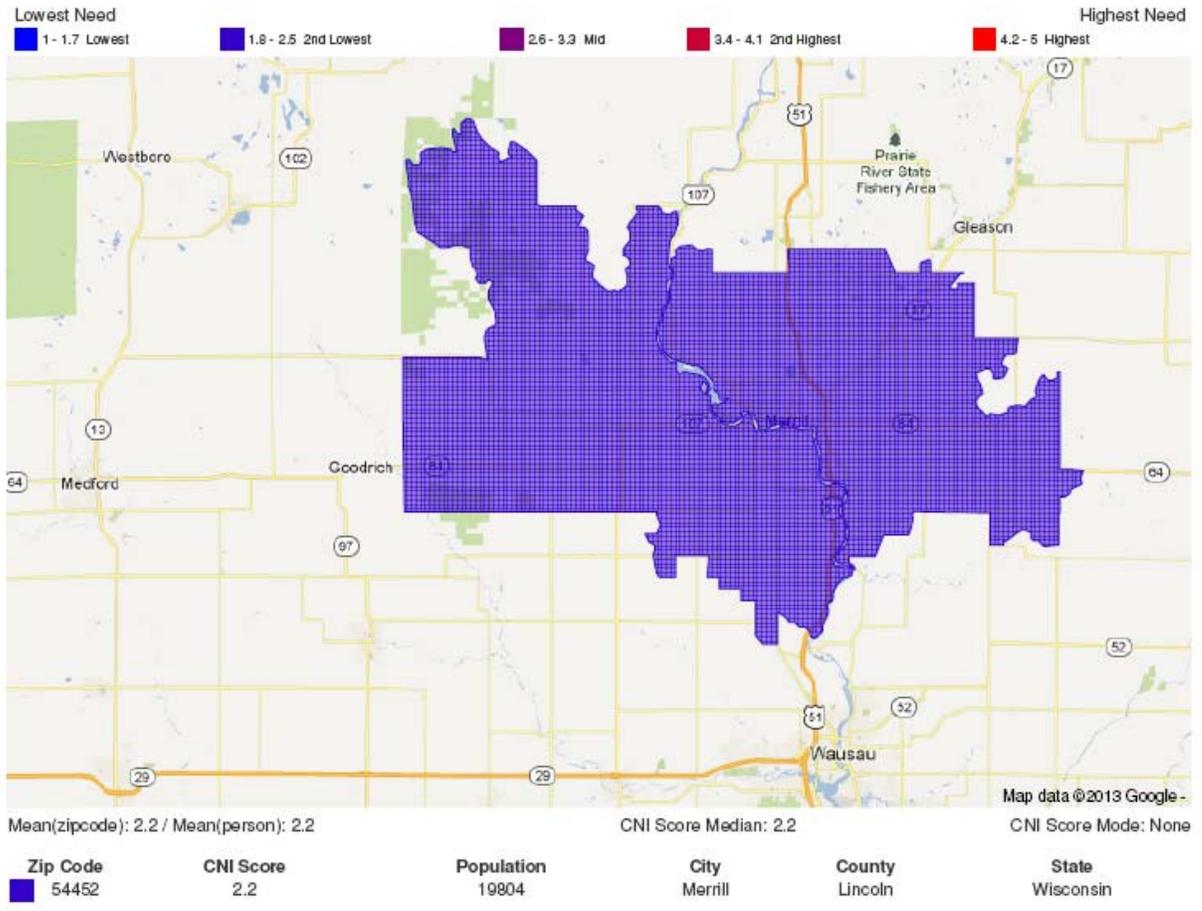
Appendix 6 Community Need Index - Lincoln County



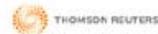
© 2012 Dignity Health



Appendix 6 (Continued) Community Need Index - Merrill



© 2012 Dignity Health



Appendix 7 References for Community Needs Assessment

- Children's Health Alliance of Wisconsin. (2012). Partnering to Seal a Smile. Retrieved from <http://www.chawisconsin.org/documents/PartneringSealASmile2012.pdf>
- Community Need Index. http://www.dignityhealth.org/Who_We_Are/Community_Health/STGSS044508
- County Health Rankings. (2012). 2012: Lincoln County, Wisconsin. Retrieved from <http://www.countyhealthrankings.org/>
- Curtis, K. & Barfield, J. (2011). Poverty and Food Insecurity in Wisconsin and Lincoln County. University of Wisconsin – Extension. Retrieved from http://www.apl.wisc.edu/pfs_profiles/Lincoln_Poverty_and_Food_Insecurity.pdf
- Healthy People Lincoln County. www.healthypeoplelincolncounty.com
- Social Norms Survey for Merrill High School. 2012. Results provided by Moellendorf, Debbie, 4H Youth Development Director, Department Head Professor, Department of Youth Development, University of Wisconsin – Extension.
- State of Wisconsin Department of Health Services. County Oral Health Wisconsin Surveillance System (COWSS).
- Umland Olson, M.A., MS & Lemay, WR DDS. Burden of Oral Disease in Wisconsin 2010. www.dhs.wisconsin.gov/publications/P0/P0209.pdf
- U.S. Census Bureau. (2010). <http://www.census.gov/>
- Westbury, J. (2012). Lincoln County Workforce Profile. Wisconsin Department of Workforce Development. Retrieved from http://worknet.wisconsin.gov/worknet/worknetinfo.aspx?htm=pub_cntyprofiles
- Wisconsin Department of Health Services. (2012). Number of Dentist FTEs Needed to Reduce Significant Shortages for Medicaid Members. Retrieved from <http://www.dhs.wisconsin.gov/publications/p0/p00368.pdf>
- Wisconsin Department of Health Services. (2010). *Healthiest Wisconsin 2020* focus area profiles, chronic disease prevention and management. Retrieved from <http://www.dhs.wisconsin.gov/hw2020/pdf/chronicdisease.pdf>
- Wisconsin United for Mental Health. Retrieved from <http://www.wimentalhealth.org/real/statistics/common.php>

Other websites:

<http://quickfacts.census.gov/gfd/states/55/55069.html>

<http://www.city-data.com/city/Merrill-Wisconsin.html>

<http://www.cubitplanning.com/county/1811-lincoln-county-census-2010-population>

<http://www.dhs.wisconsin.gov/wish>

<http://www.lincolncountyedc.org/merrillcommunityprofile1.pdf>

<http://www.statehealthfacts.org/profileind.jsp?sub=40&rgn=51&cat=3>