Ascension Wisconsin
Community Health Needs Assessment

2019-2022
Ascension NE Wisconsin – St. Elizabeth Campus
Ascension NE Wisconsin – Mercy Campus
An assessment of Outagamie County and Winnebago County

Ascension NE Wisconsin – St. Elizabeth Campus and Ascension NE Wisconsin – Mercy Campus are located in northeast Wisconsin. The community health needs assessment (CHNA) was conducted in 2018 and focused on the needs of individuals in Outagamie and Winnebago counties. Based on this CHNA process, both campuses will focus on the following priority health needs in 2019-2022:

- Healthy Weight
- Mental Health

Who We Are
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.

Our Community

Although Ascension NE Wisconsin – St. Elizabeth and Mercy Campuses serve Outagamie County and Winnebago County and surrounding areas, for the purposes of the CHNA, the campuses focused on the needs of Outagamie and Winnebago counties. Our “community served” was defined as such 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) most of our service area is in Outagamie and Winnebago counties.
Demographic Profile of Outagamie and Winnebago Counties

<table>
<thead>
<tr>
<th></th>
<th>Outagamie County</th>
<th>Winnebago County</th>
<th>Wisconsin</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Population</strong></td>
<td>181,799</td>
<td>169,487</td>
<td>5,754,798</td>
<td>318,558,162</td>
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<tr>
<td><strong>Under Age 18</strong></td>
<td>24.2%</td>
<td>20.9%</td>
<td>22.6%</td>
<td>23.1%</td>
</tr>
<tr>
<td><strong>Age 65+</strong></td>
<td>13.1%</td>
<td>14.7%</td>
<td>15.2%</td>
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<tr>
<td><strong>Race or Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>90.3%</td>
<td>92.5%</td>
<td>86.2%</td>
<td>73.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>3.2%</td>
<td>2.6%</td>
<td>2.6%</td>
<td>5.2%</td>
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<tr>
<td>Multiple Races</td>
<td>1.8%</td>
<td>1.4%</td>
<td>2.2%</td>
<td>3.0%</td>
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<tr>
<td>Black / African American</td>
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<td>12.6%</td>
</tr>
<tr>
<td>Native American / Alaska Native</td>
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<td>0.6%</td>
<td>0.9%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Some Other Race</td>
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<td>0.8%</td>
<td>1.8%</td>
<td>4.8%</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
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<td><strong>Population with Limited English Proficiency</strong></td>
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<td>1.8%</td>
<td>3.2%</td>
<td>8.5%</td>
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<tr>
<td><strong>High School Graduation</strong></td>
<td>92%</td>
<td>91%</td>
<td>88%</td>
<td></td>
</tr>
<tr>
<td><strong>Children in Poverty</strong></td>
<td>10%</td>
<td>14%</td>
<td>16%</td>
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</table>

Sources: Data were reported on Community Commons (www.chna.org) and County Health Rankings and Roadmaps. The cited original sources included: U.S. Census Bureau, American Community Survey, 2012-16; EDFacts (federal database - 2014-15); U.S. Census Bureau, Small Area Income and Poverty Estimates (2016)
Our Community Health Improvement Approach

Ascension Wisconsin is committed to using national best practices in conducting the CHNA and implementing community health improvement strategies to assure that our work has a positive, measurable impact on the health of the people in the communities we serve. Our approach relies on the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing the determinants of health model as 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 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, including social and economic determinants
- Focus efforts on populations with a disparate health burden to increase health equity
- Emphasize the powerful impact of policy and system-based approaches on change
- Use strategies with the best evidence of effectiveness
- Identify and track specific, measurable performance indicators
Framework and Data Sources

The assessment was conducted by Ascension NE Wisconsin – St. Elizabeth Campus and Mercy Campus in Summer 2018. The assessment incorporates results of a professionally-completed community survey, key informant/stakeholder interviews, community member interviews and a data review.

Data from multiple sources were reviewed:

- **Secondary Data** – Secondary data was obtained from the County Health Rankings and Roadmaps website (www.countyhealthrankings.org) and the Community Commons website (www.chna.org). Original data sources on those sites are from multiple government sources, including the Behavioral Risk Factor Surveillance System, the U.S. Census Bureau, Dartmouth Atlas of Health Care, EDFacts and the U.S. Department of Housing and Urban Development and others.

- **Primary Data** – Ascension NE Wisconsin is part of the Fox Valley Community Health Improvement Coalition (FVCHIC), a regional collaborative. The members of the FVCHIC include five health departments and four hospital systems in a three-county area (Outagamie, Winnebago, Calumet). The FVCHIC members work together to periodically conduct a community survey. The FVCHIC contracted with a professional independent research firm (JKV Research, LLC) to conduct a community survey. Phone surveys were conducted with 1,500 adult residents of Outagamie (n=500), Winnebago (n=500) and Calumet (n=500) counties. The survey, conducted between December 2017 and April 2018, included questions on personal health, personal safety, access to healthcare, demographics and the perceived largest health concerns in the community. The local survey results were compiled into a report.

- **Reports** – The *Healthiest Wisconsin 2020 Baseline and Health Disparities Report*, published by the Wisconsin Department of Health Services, describes health disparities in Wisconsin. Information from this report was included in the local data review. *Disparities Report* data sources include but are not limited to: the Wisconsin Department of Health Services (e.g., through the Wisconsin Interactive Statistics on Health database and the Family Health Survey); Department of Public Instruction (Youth Risk Behavior Survey); Centers for Disease Control and Prevention (Behavior Risk Factor Survey) and U.S. Census (American Community Survey).

- **Electronic Medical Record (EMR)** – Ascension Wisconsin provided some aggregated EMR data for the region.

Voice of the Community

Ascension NE Wisconsin – St. Elizabeth Campus and Mercy Campus are committed to addressing community health needs collaboratively with local partners. Ascension NE Wisconsin – St. Elizabeth Campus and Mercy Campus and their community partners used the following methods to listen to 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 Leaders
Input was received from community leaders through key informant/stakeholder interviews. FVCHIC member organizations conducted 50 interviews with leaders in Outagamie, Winnebago and Calumet Counties. The written notes from those meetings were shared with JKV Research who compiled the results into a report. See Appendices for a list of stakeholders.

Input from Members of Medically Underserved, Low-income and Minority Populations and/or Organizations that Represent Those Populations
Ascension Wisconsin is fueled by a commitment to human dignity, the common good, justice and solidarity. We believe the CHNA process must be informed by direct input from persons who experience health disparities based on income and/or race and ethnicity. With that in mind, FVCHIC member organizations surveyed individuals at locations that were largely serving individuals with low income, individuals who are medically underserved and/or individuals who are from a minority community. This included the federally qualified community health center and a county-based Women, Infants and Children (WIC) program. Fifty-three surveys were completed in June 2018. The surveys were shared with JKV Research who compiled the results into a report.

Input on the Previous CHNA
No written comments were received regarding the previous CHNA.

Priorities for Action

Prioritization Process and Criteria
The prioritization process included two steps:
1. The local Community Health Improvement Lead (CHIP) lead and system CHIP leaders reviewed the data, discussed potential priorities and made a formal recommendation.
2. The recommendation was reviewed and affirmed by the Ascension NE Wisconsin – St. Elizabeth Campus president and Ascension NE Wisconsin – Mercy Campus chief administrative officer.

Prioritization criteria included:
- Scope of problem (e.g., number of people impacted, severity)
- Health disparities (e.g., by income and/or race and ethnicity)
- Feasibility (e.g., are there known interventions, can we have an impact)
- Momentum-commitment (e.g., political will, community readiness)
- Alignment with others (e.g., local health department priorities)

Priorities Selected
The following health issues were selected as the priorities:
- Healthy Weight
- Mental Health
Health Needs Not Selected for this Plan

Ascension Wisconsin understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities we serve. For the purposes of this CHNA, we have chosen to focus our efforts on the priorities listed above.

Alcohol misuse/substance abuse was not selected in this CHNA cycle. Addressing alcohol and substance abuse at the community level is a collaborative undertaking. At this time, community momentum and partnerships on this issue are limited. As opportunities arise to substantively and collaboratively address substance abuse in Outagamie and Winnebago counties, the campuses will participate. Additionally, the campuses will seek internal opportunities to address alcohol misuse/substance abuse.

Overview of Priorities

A description of each priority area, data highlights and relevant assets/resources are on the following pages.
Healthy Weight / Physical Activity and Nutrition

Why it is Important
Regular physical activity in adults can lower the risk of early death, coronary heart disease, stroke, high blood pressure, type 2 diabetes, breast and colon cancer, falls and depression.¹

Physical activity in children and adolescents can improve bone health, improve cardiorespiratory and muscular fitness, decrease levels of body fat and reduce symptoms of depression.¹

A healthy diet reduces risk of several chronic diseases, some cancers, oral disease, malnutrition, anemia and others risk factors, diseases and illnesses.¹

At a healthy weight, one is less likely to:
• Develop chronic diseases
• Die at an earlier age¹

Good nutrition in children is important:
• To healthy growth and development
• To maintaining appropriate weight¹

When families have ready-access to sufficient and nutritious foods, they are food secure. Ten percent of Wisconsin households are food insecure.²

Disparities
• Individuals in Wisconsin with lower income are disproportionately affected by obesity and many related chronic illnesses.³
• Individuals in Wisconsin who are Hispanic, African American and American Indian are disproportionately affected by obesity and/or lower rates of physical activity.³

Sources:
1. Healthy People 2020
2. Healthiest Wisconsin 2020
3. Healthiest Wisconsin 2020 Baseline and Health Disparities Report

Data Highlights

Obesity Rates

<table>
<thead>
<tr>
<th></th>
<th>Adult Physical Inactivity¹</th>
<th>Access to Exercise Opportunities²</th>
<th>Heart Disease³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outagamie</td>
<td>19%</td>
<td>93%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Winnebago</td>
<td>34%</td>
<td>90%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>21%</td>
<td>86%</td>
<td>3.9%</td>
</tr>
</tbody>
</table>

Data Description: Percentage of adults who report a Body Mass Index (BMI) of 30 or more.
Source: National Diabetes Surveillance System, as reported on County Health Rankings

Phone Survey Respondents (n=500 Winnebago; n=500 Outagamie)
• Consumed at least two servings/day of fruit:
  o Outagamie: 50 percent
  o Winnebago: 44 percent
• Had moderate physical activity each week (5 times/30 minutes):
  o Outagamie: 34 percent
  o Winnebago: 32 percent

Community members were asked to identify the top three community health concerns. Obesity ranked:
• In the top two by Outagamie County (22 percent; n=500) and by Winnebago County (26 percent; n=500) phone survey respondents.
• Fifth (16 percent; n=50) by key informant / community leader interview respondents.
• Fifth (17 percent; n=53) by individuals surveyed who may have low income, be medically underserved or from a minority community.

¹ National Diabetes Surveillance System, as reported on County Health Rankings and Roadmaps website. Year of data used: 2014.
² Business Analyst, Delorme map data, ESRI and US Census Tigerline Files, as reported on County Health Rankings and Roadmaps website. Years of data used: 2010 population, 2016 SIC, 2016 parks.
³ Centers for Disease Control and Prevention, as reported on the Community Commons website. Years of data used: 2011-2012.
Mental Health

Why it is Important
Approximately 20 percent of the population experiences a mental health problem during any given year.\(^1\)

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.\(^2\)

Challenges for Those at Higher Risk
- Having a blood relative, such as a parent or sibling, with a mental illness
- Stressful life situations, such as financial problems, a loved one’s death or a divorce
- An ongoing medical condition
- Traumatic experiences
- Use of alcohol/recreational drugs
- Being abused or neglected
- Having few friends or few healthy relationships\(^3\)

Disparities
- Individuals in Wisconsin who have low income, are female, are African American, or are Hispanic report higher rates of mental distress.\(^4\)
- Individuals in Wisconsin who are male have higher rates of suicide compared to individuals who are female.\(^5\)

Sources:
1. National Institute for Mental Health
2. Healthiest Wisconsin 2020; Healthy People 2020
3. Centers for Disease Control and Prevention
5. Wisconsin Department of Health Services

Data Highlights

Suicide, Age-Adjusted Death Rate (2012-16)

<table>
<thead>
<tr>
<th></th>
<th>Outagamie</th>
<th>Winnebago</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratio of Population to Mental Health Providers(^1)</td>
<td>620:1</td>
<td>500:1</td>
</tr>
<tr>
<td>Average Poor Mental Health Days in the Last 30 Days(^2)</td>
<td>3.4</td>
<td>3.3</td>
</tr>
</tbody>
</table>

Phone Survey Respondents (n=500 Winnebago; n=500 Outagamie)
- Had a mental health issue in the last 3 years:
  - Outagamie: 21 percent
  - Winnebago: 21 percent
- Considered suicide in the past year:
  - Outagamie: 4 percent
  - Winnebago: 10 percent
- Reported their children had been bullied:
  - Outagamie: 20 percent
  - Winnebago: 25 percent

Community members were asked to identify the top three community health concerns. **Mental Health** ranked:
- Fifth by Outagamie County (15 percent; n=500) and fourth by Winnebago County (16 percent; n=500) phone survey respondents.
- First (78 percent; n=50) by key informant / community leader interview respondents.
- First (34 percent; n=53) by individuals surveyed who may have low income, be medically underserved or from a minority community.

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\(^1\) National Provider Information Registry, as reported on County Health Rankings and Roadmaps website. Year of data used: 2017.
\(^2\) Behavioral Risk Factor Surveillance System, as reported on County Health Rankings and Roadmaps website. Year of data used: 2016.
Community Resources

The following organizations and coalitions are resources potentially available to address the prioritized health needs.

**Mental Health**
- Zero Suicide - multi-sector suicide prevention coalition that includes representation from health departments, non-profits, healthcare organizations and others from Winnebago, Outagamie and Calumet counties
- Catalpa - outpatient youth mental health service provider, created by multiple area health systems
- N.E.W. (NorthEast Wisconsin) Mental Health Connection – convener of a multi-organization collaboration to create and improve the region’s mental health system of care
- United Way Fox Cities - a nonprofit organization advocating for change
- Samaritan Counseling - a tri-county organization providing counseling services and wellness screenings
- Community for Hope - nonprofit organization promoting suicide prevention, intervention and grief support
- National Alliance on Mental Illness (NAMI) - a nonprofit serving the tri-county region to raise awareness, provide education, advocacy, outreach and support programs for people living with mental illness and their loved ones
- Prevent Suicide Fox Cities - non-profit working to decrease suicide and its toll on survivors

**Healthy Weight**
- Weight of the Fox Valley - regional collective impact effort that includes representatives from healthcare organizations, local health departments, non-profits and others in Outagamie, Winnebago and Calumet counties
- United Way Fox Cities - a nonprofit organization advocating for change
- East Central Wisconsin Regional Planning Commission - a nonprofit serving eight counties to improve health by incorporating health impact at all levels
- Rural Health Initiative - a non-profit program focused on the growing concerns and barriers related to the health and safety of today’s farm families

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**Results of the Previous CHNA Process**

Our previous CHNA process was completed in June 2016. The priority health issues selected and addressed were:
- Nutrition and Physical Activity
- Mental Health
- Alcohol Misuse

An evaluation of the impact of our efforts to date to address those issues can be found in the Appendices.
Next Steps

Having identified the priority health needs to be addressed, next steps include:
  - Collaborating with community partners through local coalitions
  - Developing a three-year implementation strategy
  - 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

This community health needs assessment (CHNA) report was adopted by the Board of Directors of Ascension NE Wisconsin, Inc., on April 23, 2019, and by the Ascension Wisconsin Board on May 16, 2019.

Public Comments/Feedback

We welcome feedback on this plan from community members. Please see our public website for the email address for submitting comments.
Appendices
Appendix 1: Progress Report on Results of Previous CHNA Process

Ascension Wisconsin is 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 for which we will be accountable, 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 (three-year) indicators for each strategy
- Establish SMART metrics for long-term (beyond three 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

At the writing of this report, data is available for the first two years of the previous CHNA and is summarized below. Once final data is available, an evaluation report will be completed for the entire period of implementation.

Health priorities identified in the preceding CHNA were:
- Mental Health
- Alcohol Misuse
- Nutrition and Physical Activity
Results are regional unless otherwise indicated.

**Nutrition and Physical Activity**

- **Results for Year One:**
  - Both campuses participated in the Weight of the Fox Valley (WOTFV). The number of municipalities that have adopted the Weight of the Fox Valley resolution increased from four to 12. The resolution conceptually supports local infrastructure investment to improve health.
  - *Ascension St. Elizabeth Campus ONLY:* The hospital campus completed the Baby Friendly Development and Dissemination phases in FY17 and continued to the Designation phase. Their breastfeeding policy was nearly complete and most of the staff were trained, with training continuing in FY18. Data collection began.

- **Results for Year Two:**
  - Both campuses continued to participate in WOTFV.
    - Local capacity to address physical activity and nutrition was expanded when WOTFV secured funding for an AmeriCorps program. The funding enabled 10 organizations to host 14 AmeriCorps members from September 1, 2018, through August 15, 2019, to expand the reach of the initiative throughout the Fox Valley.
    - In partnership with healthTIDE, a statewide obesity prevention coalition, WOTFV applied and was awarded funding from the Medical College of Wisconsin for a healthy kids’ meal project. A nutrition assessment of the kids’ menu landscape in the Fox Valley was completed, paving the way for future goals and changes to improve the nutrition of kids’ menu options across the region.
    - A scorecard was developed with the three active action teams: Early Care and Education, Active Communities and Worksite Wellness. All set goals and created action plans. Progress was monitored quarterly and reported to leadership. Several results from year two include:
      - **Active Communities:** One complete streets policy was passed and new wayfinding signage designed to increase traffic by bicyclists and walkers was ordered for one trail system.
      - **Early Care and Education:** Two summer programs implemented strategies to offer locally-grown fresh fruits and vegetables.
      - **Worksite Wellness:** A plan to help organizations implement comprehensive worksite wellness programs targeting healthy lifestyles was put into place in partnership with WOTFV Worksite Action Team, Well City Fox Cities and Well City Oshkosh (incorporated as OABFOH). An annual community worksite challenge (Maintain, Don’t Gain) was implemented over the holidays with two organizations offering new worksite wellness programming, providing access to their 422 employees. Five additional organizations offered this as a new component of worksite wellness, giving access to their 1,776 employees.
o **Ascension St. Elizabeth Campus ONLY:** Although the pursuit of Baby Friendly status was discontinued in FY18, the hospital campus continued efforts to support families in breastfeeding by establishing a Breastfeeding Quality Control group. The group focused on education for families across the continuum of care, from prenatal care through labor and delivery and then for postnatal care.

o **Ascension Mercy Campus ONLY:** Ascension Mercy Campus continued to move forward with pursuing Baby Friendly status. The hospital campus completed a number of steps in the first phase of the process, including conducting a self-appraisal. Planning to complete the next steps has occurred.

### Mental Health

- **Results for Year One:**
  - During the mental health awareness months (May and October), 892 individuals completed the Test Your Mood Survey in Winnebago, Outagamie and Calumet counties. The survey was an anonymous online self-assessment for individuals to test their mood. Links to resources also were provided.
  - QPR Training - QPR stands for Question, Persuade, Refer. QPR training provides participants with the knowledge and skills to proactively interact with an individual who may be considering suicide.
    - More than 80 percent of QPR gatekeeper training participants reported feeling confident in asking the important questions.
    - Eleven percent of train-the-trainer workshop trainees had conducted at least one training.
    - The number of certified QPR instructors increased from 100 to 106.
    - **Ascension Mercy Campus Only:** Twenty-three QPR gatekeeper trainings were held in Winnebago County, adding to the 2,500 Fox Valley QPR gatekeepers.
  - The Zero Suicide Coalition is comprised of two work groups -- the community learning circle and the provider learning circle. The community learning circle focused on QPR training with employers. Members of the provider learning circle continued to implement QPR training in their respective organizations. Six organizations conducted a self-assessment, using the Zero Suicide assessment tool, as they integrated suicide prevention strategies in their organizational policies. Two of those organizations were Ascension Mercy and Ascension St. Elizabeth. Behavioral health leaders at the hospital campuses worked through the Zero Suicide toolkit. As a result, changes to assessments were made (e.g., added protective factor questions to intakes) and new prevention strategies were implemented (e.g., adding the national suicide hotline number to all Behavioral Health / Emergency Department discharge instruction sheets).
  - **Ascension St. Elizabeth Campus ONLY:** Ascension St. Elizabeth contributed $6,000 to the United Way Fox Cities for its Providing Access for Healing (PATH) program. PATH supports school-based mental health services in the Fox Valley. In the first semester of the 2016-17 school year, 348 students received services through PATH. Student progress was measured at the end of the semester with the following results: forty-nine percent of PATH students
who had academic performance issues showed improvement in academic performance; fifty-four percent of students who had school behavior issues showed improvement in their behavior; sixty-eight percent of students participating in the PATH program had reduced symptoms as reported by their therapists.

- **Ascension Mercy Campus ONLY:** Ascension Mercy Campus contributed $4,000 to Catalpa in support of the HOST program. Catalpa is a youth mental health service provider and HOST, Helping Our Students Thrive, is Catalpa's school-based mental health service program. In the Oshkosh Area School District in 2016-17, 54 students were served by HOST. For students participating in the HOST program in the 2016-17 school year, 61 percent increased their academic performance, 56 percent decreased their absenteeism and 78 percent decreased disruptions in the classroom.

- **Results for Year Two:**
  - Both campuses worked with N.E.W. Mental Health Connection, Ascension Fox Valley Behavioral Health and the National Alliance on Mental Illness (NAMI) to increase community members' awareness of mental health resources. In FY18, 1,821 Test Your Mood surveys were conducted, surpassing the goal of 1,800.
  - The QPR Advisory Board met monthly, held a rejuvenation event for trainers in April 2018 and conducted several QPR trainings in Calumet, Winnebago and Outagamie counties. Five new certified QPR instructors were trained, bringing the total to 111 instructors. Additionally, 95 percent of QPR gatekeeper training attendees who participated in a post-training evaluation reported they felt confident asking the important questions.
  - The hospital campuses participated in the Zero Suicide Coalition and aided in setting up QPR trainings in all three counties. The Zero Suicide Coalition increased the number of organizations that adopted the Zero Suicide model and integrated suicide prevention strategies into their organizational policies and/or increased procedures from six to 20 (goal was 10).
  - **Ascension St. Elizabeth Campus ONLY:** Ascension St. Elizabeth funded the PATH school-based mental health services program with $5,000. Four hundred forty-one Appleton-area students were served. Student progress was measured each semester and showed improvements: 58 percent of PATH students who had academic performance issues showed improvement in academic performance; 74 percent of PATH students who had school behavior issues showed improvement in their behavior; 73 percent of PATH program participants had reduced symptoms as reported by their therapists.
  - **Ascension Mercy Campus ONLY:** Ascension Mercy funded the RISE UP school-based mental health services program, formerly known as HOST, with $5,000. Students who participated showed improvements. In the 2017-18 school year, there was a 30 percent decrease in absences, a 12 percent decrease in disciplinary actions (though the number of students with any disciplinary actions was small) and an 81 percent improvement in the number of students who had no classes in which they were proficient or advanced.
**Alcohol Misuse**

- **Results for Year One:**
  - Community partners developed an asset inventory tool to better understand the current status of community-based alcohol misuse prevention efforts. Some of the fields in the tool are geographical area, intervention focus, evidence base and potential gaps. Winnebago County Health Department, Outagamie County Health Department and Calumet County Health Department have all entered programs and services into the tool.
  - Both campuses participated in The Real Happy Hour (RHH), which promotes the importance of family mealtime and playtime. RHH encouraged participation in free and low-cost family activities throughout the Tri-County Partnership area (Winnebago, Outagamie and Calumet counties). The Real Happy Hour was promoted at multiple events in all three counties.

- **Results for Year Two:**
  - The asset inventory was completed informally, with results indicating limited community momentum in alcohol misuse prevention. Based on this finding, no alcohol misuse prevention plan was created. Opportunities to collaboratively address drugs/opioids in the region may be considered in the future.
  - The Real Happy Hour participated in five back-to-school fairs in the Fox Valley. Members of the group posted at least two posts on social media each day.
    - Results of the 2017-2018 community phone survey indicated that 56 percent of both Outagamie County and Winnebago County families have five or more meals/week together.
Appendix 2: Community Organizations/Stakeholders

Listed below are the community organizations that provided input about the needs of the community.

<table>
<thead>
<tr>
<th>ADRC in Outagamie County *</th>
<th>Hmong American Partnership ***</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American Heritage, Inc. ***</td>
<td>Homeless Connections * **</td>
</tr>
<tr>
<td>Auroral Medical Center Oshkosh Emergency Department</td>
<td>Menasha Board of Health</td>
</tr>
<tr>
<td>Appleton Downtown Inc.</td>
<td>Menasha Police Department</td>
</tr>
<tr>
<td>Ascension Wisconsin Behavioral Health and Security Services</td>
<td>Menasha Senior Center*</td>
</tr>
<tr>
<td>Ascension Calumet Hospital Campus – Emergency Department</td>
<td>Neenah-Menasha YMCA</td>
</tr>
<tr>
<td>Aurora Sexual Assault Center</td>
<td>New Holstein Chamber of Commerce</td>
</tr>
<tr>
<td>Calumet County - Public Health</td>
<td>Northeast Wisconsin Mental Health Connection *</td>
</tr>
<tr>
<td>Calumet County Economic Development</td>
<td>Oshkosh Area School District</td>
</tr>
<tr>
<td>Casa Hispana ***</td>
<td>Oshkosh Area United Way</td>
</tr>
<tr>
<td>Catalpa *</td>
<td>Early Intervention Program of Outagamie and Winnebago Counties (Birth to 3 Program)</td>
</tr>
<tr>
<td>Childcare Resource and Referral</td>
<td>Outagamie County Health and Human Services</td>
</tr>
<tr>
<td>Chilton Police Department</td>
<td>Outagamie County Public Health</td>
</tr>
<tr>
<td>Chilton School District</td>
<td>Outagamie Sheriff’s Office</td>
</tr>
<tr>
<td>City of Menasha</td>
<td>Rural Health Initiative * **</td>
</tr>
<tr>
<td>Community Development</td>
<td>Samaritan Counseling ***</td>
</tr>
<tr>
<td>Community for Hope</td>
<td>UW-Oshkosh Head Start Program</td>
</tr>
<tr>
<td>ESTHER ** ***</td>
<td>University of Wisconsin-Oshkosh</td>
</tr>
<tr>
<td>Fit Oshkosh</td>
<td>Winnebago County YMCA</td>
</tr>
<tr>
<td>Goodwill Industries Neighborhood Partners * **</td>
<td></td>
</tr>
</tbody>
</table>

*Denotes organizations or programs representing medically underserved populations.

**Denotes organizations or programs representing low-income populations.

***Denotes organizations or programs representing minority populations.
## Appendix 3: Crosswalk Between This CHNA Report and 501(r) Requirements

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