



# COMMUNITY HEALTH NEEDS ASSESSMENT

2016

# Communities We Serve



500 South Oakwood Road, Oshkosh, Wisconsin 54904

## Mercy Medical Center Community Health Needs Assessment

An assessment of Winnebago County conducted jointly by Mercy Medical Center and the Fox Valley Community Health Improvement Coalition.

Mercy Medical Center (MMC) is located in Oshkosh, Winnebago County, Wisconsin. The community health needs assessment (CHNA) was conducted in 2015 and focused on the needs of individuals in Winnebago County.

MMC is part of Ministry Health Care (doing business in the Fox Valley as Affinity Health System). Ministry Health Care is an integrated healthcare delivery network serving more than 1.1 million people, across Wisconsin and eastern Minnesota. Ministry generates nearly \$2.2 billion in operating revenue with 15 hospitals, 45 clinics, and more than 12,000 associates, including 650 physicians and advance practice clinicians. In 2013, Ministry Health Care joined Ascension, the largest Catholic and not-for-profit healthcare system in the nation.

*Our mission as a Catholic healthcare system is to further the healing ministry of Jesus by continually improving the health and well-being of all people, especially the poor, in the communities we serve.*

Ministry Health Care has a rich and long tradition of addressing the health of the community. 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. In 2014-2015, Mercy Medical Center's community benefit contributions were more than \$4.9 million.

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## Community Served by the Hospital

Although Mercy Medical Center serves Winnebago County and beyond, the hospital focused on the needs of Winnebago County for the purposes of this CHNA. 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) Winnebago County includes the majority of our service area.

Winnebago County is located in eastern Wisconsin and is surrounded by several lakes, including the largest fresh water lake in Wisconsin, Lake Winnebago. The county is home to several significant industries, such as Oshkosh Corporation and Miron Construction, and is the leader in paper production. Several academic centers, including the University of Wisconsin Oshkosh, University of Wisconsin-Fox Valley and the Fox Valley Technical College are located in the county. Winnebago County encompasses urban, suburban and rural areas, including the cities of Menasha, Neenah, Omro, Oshkosh and parts of Appleton, as well as many different townships and villages.<sup>1</sup> Winnebago County is also home to Mercy Medical Center and Aurora Medical Center, both hospitals located in Oshkosh, which work collaboratively on many community health initiatives.

According to the 2015 County Health Rankings published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, Winnebago County ranks 42 out of 72 Wisconsin counties in health outcomes.<sup>2</sup>

<sup>1</sup>Winnebago County. <http://www.co.winnebago.wi.us>

<sup>2</sup>University of Wisconsin Population Health Institute. County Health Rankings 2015. <http://www.countyhealthrankings.org>

**Demographic Profile of Winnebago County**

<b>Characteristics</b>	<b>Wisconsin 2014</b>	<b>Winnebago 2014</b>	<b>Winnebago County 2010</b>	<b>% Change for County</b>
Total Population*	5,757,564	169,511	166,994	1.5%
Median Age (years) ^	38.8	37.6	37.4	0.5%
<b>Age*</b>				
Persons under 5 years	5.9%	5.6%	5.9%	-5.4%
Persons under 18 years	22.6%	20.8%	21.6%	-3.8%
Persons 65 years and over	15.2%	14.7%	13.4%	8.8%
<b>Gender*</b>				
Female	50.3%	49.7%	49.7%	0.0%
Male	49.7%	50.3%	50.3%	0.0%
<b>Race and Ethnicity*</b>				
White alone (non-Hispanic)	87.8%	93.0%	92.5%	0.5%
Black or African American alone	6.6%	2.0%	1.8%	10.0%
American Indian and Alaska Native alone	1.1%	0.7%	0.6%	14.3%
Asian alone	2.6%	2.7%	2.3%	14.8%
Two or more races	1.8%	1.6%	1.5%	6.3%
Hispanic or Latino	6.5%	3.9%	3.5%	10.3%
<b>Speaks language other than English at home^</b>	8.6%	5.2%	5.8%	-11.5%
<b>Median household income^</b>	\$52,738	\$51,949	\$50,974	1.9%
<b>Percent below poverty in the last 12 months^</b>	13.3%	12.5%	10.5%	16.0%
<b>High School graduate or higher, percent of persons age 25+ ^</b>	90.8%	91.8%	89.8%	2.2%

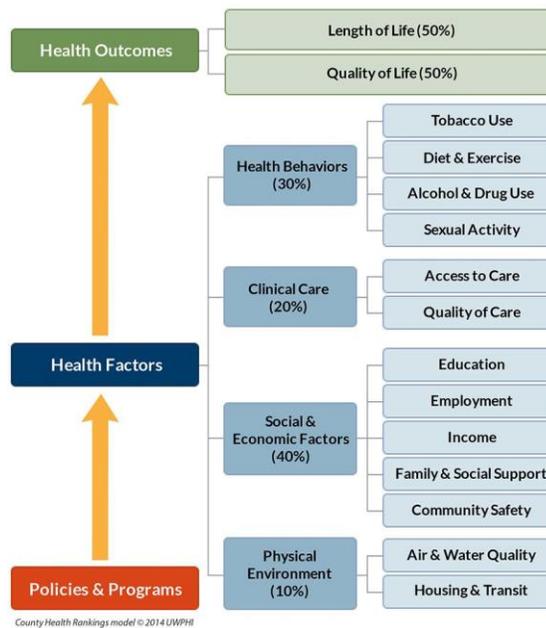
\* Source: U.S. Census QuickFacts. <http://www.census.gov/quickfacts/table/PST045214/00>.

^ Source: U.S. Census Bureau, 2010-2014 and 2006-2010 American Community Survey. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml###>.

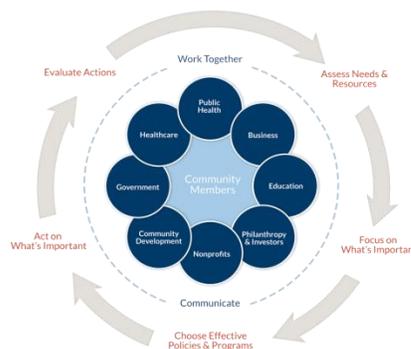
Process and Methods Used to Conduct the Assessment

**Community Health Improvement Strategy**

Ministry Health Care is committed to using national best practices in conducting the CHNA and implementing community health improvement strategies. Our approach relies on the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing in particular the determinants of health model and the model for community health improvement.



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



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

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

### **Planning Process**

A shared community health needs assessment was conducted in 2015 with regional partners collaborating and funding the effort. The Fox Valley Community Health Improvement Coalition (FVCHIC) is a core group of representatives from four health systems (Affinity Health System [part of Ministry Health Care], Aurora Health Care, Theda Care and Children's Hospital of Wisconsin), and five local public health departments (Calumet Public Health, Outagamie Public Health, Winnebago Public Health, City of Appleton Public Health and City of Menasha Public Health), as well as representatives from the State Department of Health Services. Members of this coalition represent one or more of the three counties of the Fox Valley (Calumet, Outagamie and Winnebago). These partners worked together to identify what data would be collected, what data collection tools would be used, and collaborated to gather the data. The purpose of the collaboration was to collectively:

- Determine the current community health needs by county of the region
- Gather input from persons who represent the broad interests of the community
- Obtain information about the assets and resources that exist in our county
- Identify significant health needs

The organizing framework for the data was the Healthiest Wisconsin 2020. The health focus areas described in the Healthiest Wisconsin 2020 address important health outcomes and objectives were developed for each focus area of this framework:

- 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

### Data Sources

The primary source of data was the *Winnebago County Behavioral Risk Factor Surveillance System (BRFSS) Study: 2015 Report* conducted by the St. Norbert College Strategic Research Institute (SRI) in coordination with the FVCHIC. The BRFSS utilizes the same process as the Centers for Disease Control and Prevention state and national BRFSS surveys to gather information on the health practices and health related behavioral risks of county residents. A total of 401 telephone interviews in Winnebago County were completed between January 15 and March 12, 2015. Respondents were scientifically selected so that the survey would be representative of all of the county's adult population 18 year old and older. The sample also included 25 percent cell only numbers which were obtained by random sampling.

Key findings from BRFSS: *(a complete listing of key findings can be found in appendix 1)*

Mental health is an issue in Winnebago County.

- 30 percent of respondents in Winnebago County reported three or more days of depression in the last 30 days at the time of the survey
- The percent of respondents that indicated they did not have any days that physical or emotional problems kept them from their normal activities during the past 30 days declined from 63 percent in 2011 to 51 percent in 2015.
- 15 percent of respondents indicated they experienced one to two days that physical or emotional problems kept them from their normal activities during the past 30 days, an 11 percent increase from 2011.

Nutrition and obesity prevention needs to be addressed in Winnebago County.

- 58 percent of respondents in Winnebago County are overweight or obese
- The percentages of age groups only eating one to two servings of vegetables a day include: 78 percent of 18 to 24 year olds; 52 percent of 25 to 34 year olds; 58 percent of 35 to 44 year olds; 63 percent of 45 to 54 year olds; 64 percent of 55 to 64 year olds; and 70 percent of 65 years and older.
- The percentages of age groups only eating one to two servings of fruits a day include: 61 percent of 18 to 24 year olds; 75 percent of 25 to 34 year olds; 59 percent of 35 to 44 year olds; 67 percent of 45 to 54 year olds; 68 percent of 55 to 64 year olds; and 70 percent of 65 years and older.
- 22 percent of adults 20 years of age and older are physically inactive; a rate higher than the state and national rates (21 percent).

Alcohol consumption is a health need that needs to be explored in Winnebago County.

- 27 percent of Winnebago County respondents consumed five or more drinks in one occasion in the last 30 days of the survey (proxy for binge drinking).
- 68 percent of respondents age 18 to 24 reported their largest number of drinks on an occasion to be five or more.

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## Input From Persons Who Represent the Broad Interests of the Community

Mercy Medical Center is committed to addressing community health needs collaboratively with local partners. Community health improvement leaders actively participate in the FVCHIC as well as in other community and regional groups, such as the Fox Valley Substance Abuse Coalition, Weight of the Fox Valley, the Zero Suicide Community Initiative, and others. This year's assessment built on that collaboration, actively seeking input from a broad cross section of community stakeholders and members, with the goal of reaching consensus on priorities to mutually focus on.

### **Input From Community Stakeholders**

Information collected from leaders of the community was obtained through key informant interviews. Key informants in the Fox Valley region were identified by the members of the FVCHIC and included leaders and local experts representing various sectors of the community (education, law enforcement, healthcare, public health, faith-based organizations, businesses, government, non-profit organizations and more). Among those included in the interviews were members of Mercy Medical Center staff. Members of FVCHIC personally invited informants to participate and conducted the interviews August-September 2015. A total of 134 key informants from the Fox Valley area were interviewed. Eighty-seven (65 percent) key informants represented organizations or agencies that offered services that included Winnebago County. Thirty-one of those belonged to organizations that offered services exclusively in Winnebago County.

Key informant interviews were mostly conducted in person and interviewers used a standard interview script that asked key informants to rank up to five public health issues, based on the focus areas presented in the Wisconsin State Health Plan, that are the most important issues for the region. In addition, once the five public health issues were identified, key informants were asked to (a) identify existing strategies to address the issue; (b) list barriers or challenges to address the issue; (c) list additional strategies needed to address the issue; and (d) identify key groups or individuals in the community that hospitals could partner with to improve community health.

**Table 1: Key informants who serve Winnebago County exclusively (n=31)**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Amy Barker	Director	Future Neenah
Tom Blaze <sup>†</sup>	President and CEO	Oshkosh YMCA
Doug Brey <sup>†,††,†††</sup>	Crisis Supervisor	Winnebago County Department of Human Services
Barry Busby	Coroner	Winnebago County
Jamie Constantine	Oshkosh West High School Junior	re:TH!NK Youth Coalition
Noell Dickman	Education Watchdog	Oshkosh Northwestern
Emily Dieringer	Health Educator/ Coalition Coordinator	Winnebago County Health Department/ re:TH!NK, Winnebago's Healthy Living Partnership
Brenda Doolittle	SANE Coordinator	Aurora Medical Center Oshkosh
Cindy Flauger	Leader of Family Services	Goodwill Industries of North Central Wisconsin
Rosann Fochs <sup>†,††</sup>	Community Relations and Volunteer Services Coordinator	Children's Hospital of Wisconsin- Fox Valley
Jeff Gilderson-Duwe	Director	Oshkosh Public Library & Winnefox Library System
Darren Heesacker, MD	Emergency Department Medical Director	Aurora Medical Center Oshkosh
Amy Jahnke <sup>†,††,†††</sup>	Emergency Department Manager	Mercy Medical Center, Affinity Health System*
Mike Kading	Director of Parks and Recreation	Town of Menasha
Matthew Kaemmerer <sup>†,†††</sup>	Director of Pupil Services	Oshkosh Area School District
Lynn Kleman <sup>††</sup>	Development Manager	Mercy Health Foundation
Alexandra Molinski	Oshkosh North High School Senior	re:TH!NK Youth Coalition
Catherine Neiswender <sup>†,†††</sup>	Community Development Educator	University of Wisconsin- Extension, Winnebago County Extension Office
Tracy Ogden <sup>†,††,†††</sup>	Development and Marketing Director	Boys and Girls Club
Kenn Olson	Winnebago County Board Supervisor	Winnebago County Health Department
Sue Panek <sup>†,††,††††</sup>	Executive Director	Oshkosh Area United Way
Denise Parrish <sup>†,††,†††</sup> †	Vice President of Patient Care Services	Mercy Medical Center, Affinity Health System*
Debbie Peters <sup>†,††,†††</sup> †	Executive Director	Community for Hope
Amy Putzer <sup>†</sup>	Director of Programs	Oshkosh Area Community Foundation
Petra Roter	Vice Chancellor, Student Affairs	University of Wisconsin- Oshkosh
Gina Schwebke, RD, CD <sup>†</sup>	Registered Dietitian	Children's Hospital of Wisconsin- Fox Valley
Nicole Slusser	Emergency Department Manager	Aurora Medical Center Oshkosh
Mark Weisensel	Supervisor of Aging and Outreach Services	Winnebago County Department of Human Services
Al Wenig	Director of Recreation	Oshkosh Area School District
Leona Whitman <sup>†,††,†††</sup> †††	Director	University of Wisconsin- Oshkosh Living Healthy Community Clinic
Annette (Andi) Wolf <sup>†</sup>	Pastor	Emmanuel United Church of Christ

**Table 2: Key informants who serve the Fox Valley region including Winnebago County**

Name	Title	Organization	Calumet	Outagamie	Winnebago
Diana Aronson <sup>†, ††</sup>	Nurse Consultant	University of Wisconsin- Oshkosh Head Start	X	X	X
Sarah Bassing-Sutton <sup>†, ††, †††</sup>	Program Director	Samaritan Counseling Center	X	X	X
Bill Breider <sup>†, ††, †††</sup>	President and CEO	YMCA of the Fox Cities	X	X	X
Sarah Burmeister <sup>†, ††, †††</sup>	Public Health Preparedness Coordinator	City of Appleton Health Department	X	X	X
Kelly Butzlaff <sup>†, ††</sup>	Director, Family and Community Partnerships	University of Wisconsin-Oshkosh Head Start	X	X	X
Beth Clay <sup>†, ††, †††</sup>	Executive Director	N. E. W. Mental Health Connection	X	X	X
Todd Drew, RS	Contract DNR Asbestos Compliance Inspector; Environmental Health Sanitarian	Wisconsin DNR; Menasha Health Department	X	X	X
Julie Filapek <sup>†, ††, †††</sup>	Program Coordinator, Neighborhood Partners	Goodwill Industries of North Central Wisconsin		X	X
Kristina Foshag <sup>†, ††, †††</sup>	Nurse Specialist	Affinity Health System*	X	X	X
Ernesto Gonzalez <sup>†, †††</sup>	Director	Casa Hispana	X	X	X
Mike Goodwin <sup>†, †††</sup>	Co-Chair	Common Ground	X	X	X
Stephanie Gyldenvand <sup>†, †††</sup>	Lead Organizer	ESTHER		X	X
Lynn Hammen <sup>†, ††</sup>	Director, Early Childhood	University of Wisconsin- Oshkosh Head Start	X	X	X
Mary Harp-Jirschele <sup>†, ††</sup>	Executive Director	J.J. Keller Foundation	X	X	X
Kathi Hegrans	Injury Prevention and Outreach Coordinator	ThedaCare Trauma	X	X	X
Carlos Herrera <sup>†, †††</sup>	Coordinator of Hispanic Ministry	St. Therese Church	X	X	X
Chad Hershner <sup>†, ††, †††</sup>	Co-chair	INCLUDE		X	X
Sonja Jensen <sup>†, ††, †††</sup>	Public Health Nurse Supervisor	Appleton Health Department	X	X	X
Cal Kanowitz <sup>†, ††, †††</sup>	Executive Director	Hope Clinic/Alliance	X	X	X
Greg Keil	Director of Community Development	City of Menasha	X		X
Peter Kelly <sup>†, ††, †††</sup>	President & CEO	United Way Fox Cities	X	X	X
Steve Kihl	Environmentalist	Appleton Health Department	X	X	X

Lisa Kogan-Praska †, ††, †††	CEO and President	Catalpa Health	X	X	X
Wendy Krueger	Operations Manager for Personal Health	ThedaCare at Work; Well City Fox Cities	X	X	X
Ben Krumenauer	Regional Bicycle and Pedestrian Coordinator	East Central Wisconsin Regional Planning Commission	X	X	X
Sue Larson, RN ††	Registered Nurse	Appleton Health Department	X	X	X
Tina Lechnir †, ††, †††	Director, Behavioral Health	Affinity Health System*	X	X	X
Becky Lindberg, RN	Public Health Nurse	Appleton Health Department	X	X	X
Paul Linzmeier	Sustainability Leader	ThedaCare	X	X	X
Nicole Malchow, MSW, APSW †, ††, †††	Social Worker	Children’s Hospital of Wisconsin- Fox Valley	X	X	X
Jerome Martin †	Executive Director	Homeless Connections	X	X	X
Nancy McKenney, MS, RDH	Public Health Director	City of Menasha	X		X
Donald Merkes †, ††, †††	Mayor	City of Menasha	X		X
Tom Nichols, MD †, ††, †††	Pediatrician	Children’s Hospital of Wisconsin- Fox Valley	X	X	X
Judith Olson †, †††	Executive Director	Child Care Resource & Referral	X	X	X
Lori Reblin, OTRIL	Occupational Therapist/ Rehab Supervisor	Children’s Hospital of Wisconsin- Fox Valley	X	X	X
Michelle Roberts	Environmentalist II	City of Appleton Health Department	X	X	X
Sabrina Robins, PhD †††	Chair	African Heritage, Inc.	X	X	X
Frankie Rodriguez †, †††	Director	Hispanic Chamber of Commerce of WI	X	X	X
Karen Rosenberg	Program Manager, Weight of the Fox Valley	Weight of the Fox Valley/ United Way	X	X	X
Laura Ruys †, ††, †††	Director, Emergency Services	St. Elizabeth Hospital Affinity Health System*	X	X	X
Heather Schimmers †, ††, †††	Vice President of Patient Care Services	St. Elizabeth Hospital Affinity Health System*	X	X	X
Beth Schnorr †, ††, †††	Executive Director	Harbor House	X	X	X
Jackie Schoening †, †††	Central Regional Coordinator for CESAs 2,3,& 6	Wisconsin Safe and Healthy Schools Center	X	X	X
Sherah Sroka, MSW, APSW †, ††, †††	Medical Social Worker	Children’s Hospital of Wisconsin- Fox Valley	X	X	X
Kristene Stacker †, ††, †††	Executive Director	Partnership Community Health Ctr.	X	X	X
Tim Styka †, ††, †††	Police Chief	City of Menasha	X		X

Todd Thomas	Police Chief	City of Appleton Police	X	X	X
Tabitha Uitenbroek	Trauma Program Manager	ThedaCare Trauma	X	X	X
Greg Vandenberg <sup>†</sup>	Director of Giving and Community Engagement	U.S. Venture, Inc.	X	X	X
María Vargas <sup>†,††,†††</sup>	Outreach and Enrollment Coordinator	Partnership Community Health Ctr.	X	X	X
Cyril Walsh, MD <sup>†,††,†††</sup>	Emergency Department Medical Director	ThedaCare	X	X	X
Bryn Wehrwein <sup>†,††</sup>	Director of Health Services	University of Wisconsin- Oshkosh Head Start	X	X	X
Greg Woller <sup>†</sup>	Executive Director	Big Brothers Big Sisters of the Fox Valley	X	X	X
Jean Wollerman	Director, Menasha Senior Center	Neenah-Menasha YMCA	X		X
Kate Yonke, RDN, CD <sup>†,††,†††</sup>	Co-owner	Evolve	X	X	X

<sup>†</sup> Denotes this individual’s position/organization represents low-income populations  
<sup>††</sup> Denotes this individual’s position/organization represents medically underserved populations  
<sup>†††</sup> Denotes this individual’s position/organization represents minority populations  
 \* Affinity Health System is part of Ministry Health Care

The five health issues ranked most consistently as top five health issues by the key informants in the tri-county region including Winnebago County were:

1. Mental health
2. Alcohol and substance abuse
3. Physical activity\*
4. Nutrition\*
5. Healthy growth and development

*\*Key informants routinely expressed a challenge in separating physical activity and nutrition and regarding them as two distinct issues. Most key informants regarded nutrition and physical activity as a proxy for obesity and responded accordingly.*

Key informants routinely identified the high level of collaboration among organizations and agencies in the Fox Valley and the availability of health care organizations in the area as a positive regional asset.

**Input from Members of Medically Underserved, Low-income and Minority Populations**

Ascension Health and Ministry Health Care are fueled by a commitment to human dignity, the common good, justice and solidarity. We believe the CNHA process must be informed by direct input from the poor, vulnerable and disparate populations we aim to serve.

A survey was developed by the community health improvement leader for Affinity Health System (part of Ministry Health Care) with input from community partners. The survey was distributed electronically to a variety of community partners and agencies that serve vulnerable populations, including the Women, Infants and Children (WIC) clinics, senior centers, food pantries, community clinics and others.

The survey was available in Spanish for those organizations and agencies that serve Spanish-speaking individuals. Each agency was responsible for administering the survey to their clients and returning the completed surveys to the community health improvement leader for analysis.

Respondents were aware that participating in the survey was voluntary and responses would remain confidential and anonymous. The survey was distributed from September 28 to October 15, 2015.

The written survey asked participants to choose up to three public health issues based on the focus areas presented in the Wisconsin State Health Plan that are the most important issues for the region. The survey also asked participants for some demographic information, such as gender, age and race information, as well as their perception of some health needs including access of services. Questions asked participants to indicate (a) how important a health issue was and (b) their satisfaction with the community's efforts in addressing the health issue.

The results were summarized and included in the data shared with members of the FVCHIC and members of the Community Health Improvement Council, a regional hospital-based team that supports the work of the community health improvement leader for Mercy Medical Center.

Respondents of the vulnerable population survey ranked:

- Mental health as their number one health concern
- Alcohol misuse as their number two health concern
- Chronic disease (diabetes, etc.) as their number three health concern
- Physical activity and nutrition as their number four health concern

Respondents indicated that the following health issues were the top five most important:

- Drinking and driving
- Dental care
- Infrastructure of their community
- Prenatal care access for pregnant women
- Drug abuse

Respondents indicated the most satisfaction with community efforts in the following health areas:

- Prenatal care access for pregnant women
- Children and youth have access to basic medical services
- Resources to help people with diabetes
- Infrastructure of their community
- Health care is accessible to all

Respondents indicated the least satisfaction with community efforts in the following health areas:

- Understanding by youth of the dangers of e-cigarettes
- Dental care

- Parents knowing how to talk with their children about drugs
- Availability of health insurance for all
- Recognition of alcoholism and other drug dependence
- Children, youth and adults maintaining healthy weights
- Availability and accessibility to healthy foods for all

**Input on previous CHNA**

No written comments were received regarding the previous CHNA.

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**Prioritized Significant Health Needs****PRIORITIZATION CRITERIA**

The following criteria were used for prioritization:

- Data on health of the community
- Stakeholders' input
- Needs of medically underserved/low income population
- Available resources/community assets
- Community readiness and engagement
- Expertise/competence in the health priority
- Known effective interventions
- Existing organizations already addressing issue adequately

**PRIORITIZATION PROCESS**

Data from the various sources, information regarding community characteristics and organizational strategic priorities were summarized and presented to the Affinity Health System (Ministry Health Care) Community Health Improvement Council, a regional hospital-based team that supports the work of the community health improvement leader for Mercy Medical Center. The Council, comprised of staff from various departments (finance, marketing, foundation, clinics), provided feedback and suggestions and agreed with the recommendation that mental health, obesity prevention and alcohol misuse would be the top community health needs to be addressed by Mercy Medical Center.

Including the council's feedback, community health priority recommendations for the next three years were presented to the Mercy Medical Center and the medical group leadership teams for endorsement. These two entities endorsed the recommendation of the three community health priorities.

**PRIORITIES SELECTED**

Based on this process, the following priorities were selected:

- Mental health
- Obesity prevention (physical activity and nutrition)
- Alcohol misuse

## OVERVIEW OF PRIORITIES

### Mental Health

Mental health issues continue to be a priority in Winnebago County. The county's suicide rate is 11.3 per 100,000 populations, as compared to 13.1 for Wisconsin and 12.93 for the US. The Healthy People 2020 target for the US is 10.2.

Mental illness is the most common cause of disability in the United States. Mental health is essential to personal well-being, relationships, and the ability to contribute to society. Mental health issues are associated with increased rates of these risk factors: smoking, physical inactivity, obesity, substance abuse. These physical health problems can in turn lead to: chronic disease, injury, and disability. (*Centers for Disease Control & Prevention; County Health Rankings & Roadmaps; Healthiest Wisconsin 2020; Healthy People 2020.*)

Significant steps have been addressed including:

- Continued support of the North East Wisconsin Mental Health Connection (N.E.W. MHC), a membership organization that leads the collaboration of community stakeholders to create and continuously improve the mental health system of care including the mental health integration program which provides mental health education to providers in the Fox Valley.
- Expansion of Question, Persuade and Refer (QPR) trainings in the region
- Formation of the Zero Suicide Community Initiative, a coalition that plans to take a systematic approach to quality improvement in health care and community settings to prevent suicides.

In their discussions, stakeholders noted that following issues require the community's attention:

- Increased community awareness related to mental health
- Greater integration of physical and mental health services in healthcare
- Improved sharing of health documentation between providers
- Consistent messaging regarding mental health treatments and resources

In addition, the survey of those who live in poverty indicated that access to affordable healthcare, including mental health, is an issue that needs more attention in our community.

### Obesity Prevention

Obesity continues to be a priority in Winnebago County. According to the *2015 County Health Rankings* for Winnebago County, 29 percent of adults were obese,\* which is the same rate as the state obesity rate but is higher when compared to national obesity rates (25 percent). The *2015 BRFSS Report* indicates that 58 percent of adults in Winnebago County were considered overweight (27 percent) or obese (31 percent). The Winnebago County overweight rates are lower than the state rate (36.7 percent) but the county's obesity rate is higher than the state's obesity rate at 29.8 percent.

*\*Overweight and obesity are determined by body mass index (BMI), a measure of body fat based on height and weight that applies to adult men and women.*

**BMI Categories:**

- Underweight = <18.5
- Normal weight = 18.5–24.9
- Overweight = 25–29.9
- Obesity = BMI of 30 or greater

Overweight and obesity are contributors to the development of chronic diseases, such as diabetes, hypertension, stroke, coronary heart disease and even some cancers, to name a few health conditions. In addition, literature suggests that mortality rates are higher among overweight and obese individuals. Obesity places an economic strain on healthcare systems. The annual economic cost of obesity related medical expenses for Wisconsin is estimated at more than \$1.5 billion annually.

Significant steps have been addressed including:

- Continued support of Weight of the Fox Valley (WOTFV), a coalition that brings together regional partners to collectively work together to help communities achieve and maintain a healthy weight
- Exploration of baby-friendly certification for Ministry Health Care hospitals
- Exploration of an obesity prevention set of strategies to be implemented by and in Ministry Health Care hospitals

In their discussions, stakeholders noted:

- The region needs better trails and urban design that make physical activity the easy option and integrate exercise into daily life
- To make nutrition/food and physical activity education accessible to all
- To provide more Spanish-speaking providers, program staff and materials
- To focus on making the environment conducive to healthy choices

In addition, the survey of those who live in poverty showed that the following issues needs are important issues related to health:

- Bike lanes and trails
- Farmers' markets
- Affordable places to be physically active (such as a gym)
- Access to affordable healthy foods

**Alcohol Misuse**

Alcohol misuse is a priority in Winnebago County. According to the 2015 County Health Rankings for Outagamie County, 26 percent of adult engaged in binge drinking. The *2015 BRFSS Report* indicated that 27 percent of adults engaged in binge drinking in the past 30 days. These rates are higher than the state rate at 22.8 percent and much higher than the national rate of 17.0 percent. The *Healthy People 2020* target it to reduce binge drinking in the past 30 days to 24.4 percent for adults.

Alcohol consumption and misuse are prevalent in the state and in this region. Stakeholders commented on the pervasive culture that exists in this region that supports and accepts alcohol consumption. Many indicated a need to change the culture and law enforcement policies surrounding alcohol consumption for social change to occur with this issue.

Alcohol misuse, including binge drinking is linked to a variety of other health issues such as injury and violence, intentional injuries, alcohol poisoning, unprotected sexual activity, sexually transmitted infections, high blood pressure, depression and others.

Significant steps have been addressed including:

- Community campaigns, such as “Parents who host, lose the most”
- Drug Abuse Resistance Education (DARE) in elementary and middle schools

In their discussions, stakeholders noted that following issues require the community’s attention:

- The ease of access to alcohol in our communities
- Social acceptance of alcohol and drug use
- Events such as Pub Crawl in Oshkosh, which normalizes excessive drinking
- DUI punishments that are not severe enough

In addition, the survey of those who live in poverty indicated that alcohol misuse and drinking and driving were top health priorities for respondents.

Obesity, mental health and alcohol misuse are health issues that share many similar characteristics. These three health priorities are connected. Literature suggests that alcohol and substance abuse is often seen in conjunction with mental health issues. Similarly, there is some evidence of the association between obesity and mental health; such as the effect of overeating triggered by mental health issues contributing to weight gain and obesity.

As strategies are implemented to address the three health needs listed, careful attention will be placed to address access to health care for each. As an example, as implementation plans are planned around mental health issues, access to mental health services will be addressed.

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## Potential Resources to Address the Significant Health Needs

### **COMMUNITY RESOURCES**

Key informants were asked to list community assets and resources during their interviews. In addition, members of the FVCHIC also identified resources and assets in the community that currently support health or could be used to improve health. The following resources, categorized by health priority, will be considered in developing implementation plans to address the prioritized community health needs:

#### **Health Priority: Mental Health**

##### **Regional (Calumet, Outagamie and Winnebago counties)**

Catalpa Health  
 National Alliance for Mental Illness (NAMI) Fox Valley  
 North East Wisconsin Mental Health Connection (NEWMHC)  
 Question, Persuade and Refer (QPR) Advisory Board  
 Reach Counseling Services  
 Samaritan Counseling  
 Zero Suicide Community Initiative

##### **Winnebago County**

Community for Hope  
 Helping Our Students Thrive (HOST)  
 Living Healthy Community Clinic  
 ReTh!nk Mental Health Sharesop

#### **Health Priority: Physical Activity, Nutrition, Obesity**

##### **Regional**

Breastfeeding Alliance of Northeast Wisconsin  
 Farmers' Markets  
 East Central Wisconsin Regional Planning Commission  
 Fox Valley Bike Challenge  
 UW-Extension Wisconsin Nutrition Education Program  
 Weight of the Fox Valley

##### **Winnebago**

Growing Oshkosh  
 Winnebago County Health Department: ReTh!nk  
 Safe Routes to School  
 United Way-Oshkosh  
 Well City Oshkosh  
 Women, Infants and Children (WIC) Program  
 YMCA Oshkosh

**Health Priority: Alcohol Misuse****Regional**

Fox Valley Substance Abuse Coalition

**Winnebago County**

Rethink Alcohol Prevention & Control Programming

Winnebago County Law Enforcement (Sheriff's Department & Oshkosh Police Department)

**Other Community Partners**

American Red Cross

Appleton Area School District

Aurora Health Care

Boys & Girls Club

Calumet County Public Health Department

Calumet Medical Center

Casa Hispana/Hispanic Chamber of Commerce

Children's Hospital of Wisconsin

Chilton Area School District

City of Appleton Public Health Department

City of Menasha Public Health Department

Community Action for Healthy Living

Cooperative Educational Service Agency (CESA)-6

Fox Valley Community Health Improvement Coalition

Fox Valley Technical College

Lawrence University

Mercy Medical Center

Oshkosh Area School District

Outagamie County Public Health Department

Outagamie County Pre-Action Network

Outagamie County Substance Abuse Taskforce

Rural Health Initiative

Salvation Army

St. Elizabeth Hospital

ThedaCare

University of Wisconsin-Extension

University of Wisconsin-Oshkosh

Winnebago County Public Health Department

**Community characteristics**

- Strong history of collaboration
- Many efforts are conducted at the regional level (Calumet, Outagamie and Winnebago counties)

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## Next Steps

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

- Collaborating with community partners through the Fox Valley Community Health Improvement Coalition
- 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

Members of the FVCHIC agreed that specific community health implementation strategies would be addressed within each of their organizations in order to integrate with each organization's internal strategic priorities. The FVCHIC agreed that given the momentum surrounding obesity prevention, and their involvement in the Weight of the Fox Valley (WOTFV), a regional coalition using collective impact to enact social change related to obesity, they would continue to support WOTFV in a collaborative way. FVCHIC will continue to work together on future CHNAs and perhaps in the future will also work collaboratively in additional implementation strategies for community health need improvement.

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## Evaluation of the Impact of the Preceding Implementation Strategy

Health priorities identified in the preceding CHNA (2013-2016) were:

- Obesity
- Mental Health

### **Evaluation**

**Obesity:** Working through the Weight of the Fox Valley (WOFV) Coalition, community leaders and elected officials were educated and two municipalities adopted the WOFV resolution. Five restaurants are now partners in the Smart Plate program. There was an increase in the percentage of adults whose BMI falls within the health range (from 36% to 42%); however, continued effort is needed to increase it further.

**Mental Health:** Mercy was an active participant in the Zero Suicide Coalition. During this timeframe, over 5000 Fox Valley residents completed QPR gatekeeper training; and the number of sectors receiving training was increased thus broadening reach. While there was a decrease in the number of suicides in Winnebago County from 2013 to 2015, our goal is to reach zero, so this will continue to be a priority for the hospital.

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Approval

This community health needs assessment (CHNA) report was adopted by the hospital's governing board on May 3, 2016.

**Appendix 1****Fox Cities Behavioral Risk Factor Surveillance System Survey 2015  
Winnebago County Key Findings**

1. **Overall Health Rating** - Over half (54 percent) of Winnebago County residents felt their overall health was either very good or excellent. Almost two-thirds (61 percent) said there were no days in the past 30 days that their physical health was not good, while 59 percent indicated they had no days of poor mental health. However, 34 percent indicated they were kept from usual activities by poor physical/mental health during the past 30 days for three or more days.
2. **Healthcare Access** - The vast majority of respondents have some type of healthcare coverage (95 percent). People are generally seeing doctors more often for annual physicals or checkups. Up to eight percent of respondents indicated they themselves or someone in their household is not taking medications due to cost and 22 percent currently have healthcare bills being paid off over time.
3. **Weight/Diet/Exercise** - Respondent's BMI (body mass index) was calculated by using weight (rounding up for fractions) and height (in feet and inches) without shoes. According to the CDC categories, 31 percent were obese, 27 percent were overweight, and 42 percent were neither overweight nor obese. Additionally, the plurality of respondents said they eat two servings of vegetables per day and one serving of fruit per day. Seventy-six percent said they participated in physical activities or exercises during the past month; 82 percent reported they do moderate exercise in a typical week and 42 percent reported they do vigorous exercise in a typical week.
4. **Inadequate Sleep** - Thirty-five percent of respondents reported sleeping eight hours or more in a 24-hour period; 14 percent reported sleeping five hours or less on average within a 24-hour period.
5. **Asthma** - Fifteen percent of all respondents said they had been told they had asthma. Of those who ever had it, 61 percent said they still have it.
6. **Depressive Disorder** - Twenty-three percent (23%) of respondents reported ever being told they have a depressive disorder.
7. **Diabetes** - Nine percent of respondents said a doctor told them they had diabetes, with another two percent saying yes, but only during pregnancy. The vast majority, 87 percent, said they had never been told they had diabetes.
8. **Oral Health** - The majority (81 percent) of respondents had seen a dentist within the past year, which is similar to 2011 levels (80 percent). Five percent said they had not visited a dentist in at least five years.
9. **Tobacco Use** - The majority of respondents (54 percent) had not smoked at least 100 cigarettes in their lifetime. Of those who currently smoke some days or every day, 44 percent said they had tried to quit for at least one day in the past year. Four percent reported using chewing tobacco, snuff, or snus, while eight percent use electronic cigarettes.

10. **Alcohol Consumption** - Sixty percent of respondents reported drinking at least one drink of any alcoholic beverage at least one day in the past 30 days. Eighteen percent of respondents reported drinking at least one alcoholic beverage 15 or more days per month in the past 30 days. During the past 30 days when respondents drank, 33 percent reported having an average of one drink while 11 percent indicated five or more drinks.
11. **Immunization** - Thirty-nine percent of respondents reported having either the flu shot or flu vaccine sprayed in their nose within the past 12 months.
12. **Falls** - Seventy-two percent of respondents reported no falls in the past 12 months; 14 percent reported one fall, six percent reported two falls, and eight percent three or more falls. Of those who reported having fallen, 47 percent reported that their fall had not caused an injury.
13. **Seatbelt Use** - A large percentage (81 percent) of respondents reported always using their seatbelt while driving or riding in a car.
14. **Drinking and Driving** - The majority of respondents (95 percent) reported never driving while perhaps having too much to drink while one percent each reported 1, 2, 3, 4, or 5 or more times in which they've driven when they perhaps had too much to drink.
15. **Women's Health Issues** - Ninety-one percent of women had breast exams and 88 percent had pap tests. Additionally, 92 percent of women age 40 had a mammogram.
16. **Colorectal Cancer Screening** - A large percentage of respondents (60 percent) have never used a blood stool home testing kit while more respondents (83 percent) have had a colonoscopy/sigmoidoscopy.
17. **Alcohol Screening & Brief Intervention (ASBI)** - The majority (67 percent) of respondents reported a healthcare provider did ask them during a routine checkup how much they drink; only eight percent reported being advised to reduce or quit drinking at their last checkup.
18. **Social Context** - In the past 12 months, 16 percent of respondents were always or usually worried about having enough money to pay their rent/mortgage while 14 percent reported being always or usually worried about having enough money to buy nutritious meals. Over 50 percent reported never being worried about having enough money for rent/mortgage or for nutritious meals.
19. **Hypertension and Cholesterol Awareness** - Twenty-nine percent of respondents said they had high blood pressure, while 31 percent of those who had ever had their cholesterol checked said they had high cholesterol.
20. **Emotional Support** - Slightly under half of respondents (47 percent) feel they always receive the social and emotional support they need.
21. **Screen Time** - Forty-six percent (46 percent) of respondents spend one to two hours a day in front of an electronic screen at home or for leisure while 14 percent reported six hours or more.
22. **Sugar Drinks** - Between 51 percent and 59 percent of respondents did not drink any sugar drinks in the past 30 days. Of those that did, between 8-10 percent reported having five or more on any occasion, while most only had one or two drinks on average (23-34 percent).

23. **Family Dining** - Only two percent of respondents reported never eating a household meal together in the past week while 33 percent reported eating a meal together more than seven times.