



# Community Health Needs Assessment Implementation Strategy



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# Community Health Needs Assessment

## Executive Summary

Burnett Medical Center—a Critical Access Hospital with an adjoining clinic and long-term care facility located in Grantsburg, WI—partnered with Burnett County DHHS-Public Health and the St. Croix Tribal Health Clinic to conduct a Community Health Needs Assessment (CHNA). Required by the Patient Protection and Affordable Care Act, the goal of the assessment is to identify the most significant health needs among Burnett County residents—Burnett Medical Center’s service area—and develop a plan to address the identified health needs.

The significant health needs were determined through an assessment process that began in the spring of 2015. Using the State of Wisconsin health plan—Healthiest Wisconsin 2020—as a framework, quantitative and qualitative data collection methods were employed to assess the health needs of Burnett Medical Center’s service area.

After completion of the assessment, CHNA partners facilitated a Community Health Meeting in which representatives of other healthcare providers, community groups, and local non-profit organizations that have an interest and expertise in the health of Burnett County residents were invited to offer input and help prioritize Burnett County’s health needs. Results of the assessment process were presented, the needs discussed and prioritized, and input provided to help in the identification of possible goals and interventions to address the prioritized health needs.

In prioritizing the health needs, attendees voted on three of the 12 health focus areas from the Healthiest Wisconsin 2020 framework by considering five criteria: viable strategies exist to impact the need, resources are available to impact the need, there is a high importance placed by the community on addressing the need, the need has an extensive impact on population health, and the need is not adequately being served by current resources and organizations in the community.

Out of the voting process, alcohol and other drug abuse, behavioral health, and tobacco use and exposure were identified as significant health needs. Hospital leaders evaluated the 12 health focus areas against an additional criterion: the hospital’s ability to address the need based on the hospital’s expertise and resources. Out of this process, chronic disease prevention and management, most notably prevention and management of diabetes, was also identified as a significant health need. Although not one of the 12 health focus areas, access to care, which is an area of focus in the state health plan and an indicator of health status, was also identified as a significant need.

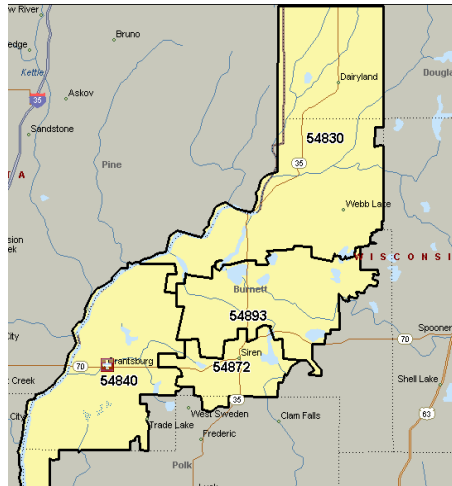
An implementation strategy was then developed to identify what resources and programs Burnett Medical Center would deploy to address the significant health needs, and how Burnett Medical Center would collaborate with other community groups and organizations in addressing the health needs. In partnership with Burnett County DHHS—Public Health, Burnett Medical Center formed “Healthy Burnett” in 2013 to engage community partners and members to work collaboratively to promote the health of Burnett County and its residents. By bringing key community stakeholders together to align activities and resources to enhance how the community addresses identified health needs, Healthy Burnett creates an infrastructure for continual health improvement.

Certain needs were not addressed in the implementation strategy due to either lack of hospital resources or expertise, the need being of relatively low priority, and/or the need being currently addressed by others.

As the implementation strategy is executed over the next three years, the plan’s effectiveness in addressing the identified health needs will be evaluated, and partners will accordingly mobilize to further respond to the service area’s health needs at the close of the three year duration.

## Definition of Community Served

Burnett Medical Center primarily serves residents of Burnett County, which has a population of 15,159 (U.S. Census Bureau, 2015). Determined by geography and percent of inpatient discharges, Burnett Medical Center's service area includes the town of Grantsburg—which makes up 39% of total inpatient discharges—and the towns of Webster, Danbury, and Siren, which together account for 35% of discharges (BMC Claims Data, 2015). Burnett Medical Center also serves neighboring counties of Pine County, MN, and Polk County, WI, among others.



Burnett Medical Center 2015 Discharges by Zip Code

PO Name	ZIP	2015 Discharges	Cumulated %
Grantsburg	54840	141	39%
Webster	54893	43	12%
Danbury	54830	33	10%
Siren	54872	50	14%

Source: BMC Claims Data, 2015

Burnett Medical Center's service area, with a median age of 49.1 years in 2010, is older than the rest of Wisconsin and the United States. The population of Burnett County is predominately white (91.6%), but has a notable Native American population (4.6%). Roughly \$10,000 lower than Wisconsin, the average household income of Burnett County in 2014 was \$40,722 (U.S. Census Bureau, 2010). In 2014, the unemployment rate of Burnett County was 10%, compared with 7% for Wisconsin (Department of Workforce Development, 2015).

## Assessment Process and Methodology

Burnett Medical Center partnered with Burnett County DHHS-Public Health and the St. Croix Tribal Health Clinic to assess the health needs of the service area (see Appendix for individuals involved). In assessing the health of Burnett County residents, a variety of data collection methods—both quantitative and qualitative—were employed. Using the State of Wisconsin health plan—Healthiest Wisconsin 2020—as a framework, quantitative data was collected to examine the health of the community with regards to 12 health focus areas, as well as socioeconomic indicators intended to shed light on Burnett County's status with respect to access to care.

A variety of data sources were used to assess the health needs, including the County Health Rankings—created by The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute—the United States Census Bureau, the Wisconsin Department of Health Services, Wisconsin Interactive Statistics on Health, and the Behavior Risk Factor Surveillance System, among others (see Appendix for a full listing of the data sources utilized). To analyze Burnett County's health status on given indicators in order to identify significant needs, when appropriate, county-level data was compared to state and national benchmarks.



Qualitative data was gathered from community members and service organizations to develop an understanding of community perceptions of the service area's health needs, and to gather input from persons representing the broad interests of the community served. This data was gathered from April 2015 to December 2015 through (1) an internet-based survey and paper survey of approximately 500 individuals, (2) focus groups, and (3) key informant interview, which asked respondents and participants to indicate what they believed to be the biggest health problems among Burnett County residents.

After quantitative and qualitative data was collected, CHNA partners facilitated a Community Health Meeting on April 15th, 2016, in which representatives of other healthcare providers, community groups, and local non-profit organizations that have an interest and expertise in the health of Burnett County residents were invited to offer input and help prioritize Burnett County's health needs. Results of the assessment process were presented, the needs discussed and prioritized, and input provided to help in the identification of possible goals and interventions to address the prioritized health needs.

### **Input from Public Health and Community Representatives**

Throughout the CHNA process, special attention was focused on understanding the needs of medically underserved, low-income, and minority populations. To achieve this, efforts were made to engage and gather input from individuals representing the broad interests of the community served. This was accomplished in the following capacities:

#### *CHNA Core Partners*

As the primary drivers of the process, facilitators of the CHNA from Burnett Medical Center, Burnett County DHHS—Public Health, and the St. Croix Tribal Health Clinic, each brought knowledge of the population served, their needs, and resources currently available to address those needs. In particular, St. Croix Tribal Health Clinic brought knowledge of the Native American population in Burnett County. Public Health provided input on the needs of the underserved and low-income populations and resources currently available to address their needs. Core partners are also actively involved in other community health-related groups and conveyed input regarding the health needs of the groups' respective target populations throughout the process.

#### *Pilot Community of Wisconsin CHIPP Infrastructure Improvement Project*

As a pilot site of the Wisconsin CHIPP Infrastructure Improvement Project—a project designed to create and refine a standard set of tools and practices for communities to utilize in conducting community health improvement plans, facilitated by the Wisconsin Department of Health Services, the Wisconsin Association of Local Health Departments and Boards, the University of Wisconsin Population Health Institute, and the Wisconsin Hospital Association, among others—CHNA partners took into account input from state and regional health departments in planning and executing the CHNA. Tools created by the project provided guidance on existing health data sources to utilize in the assessment process. Public health educators at the Wisconsin Western Region Division of Public Health provided input on data sources to utilize in the assessment, how to analyze the data sources to identify significant health needs, and how to execute the process for prioritizing significant health needs.

#### *Focus Groups and Key Informant Interview*

Focus groups were conducted with medical providers at Burnett Medical Center—one being the Medical Director for the Burnett County Health Department—the Burnett County Family Resource Center, and the Grantsburg and Siren/Webster Rotary Clubs. The key informant interview was completed with a Grantsburg School District principal. Questions asked in each were designed to gather input on what participants felt to be the biggest assets and health concerns among Burnett County residents. The

Burnett County Family Resource Center, an organization that provides opportunities to promote healthy families and safe communities, provided insight on the needs of underserved and low income populations. The Grantsburg School District principal also provided input on the needs of these populations (See Appendix for focus group and key informant interview results).

#### *Survey*

Great effort was made to gather input from members of medically underserved, low-income, and minority populations through the survey. Demographic questions—about income, insurance type, and race/ethnicity, among others—were asked in order to identify members of those populations and thus ensure their representation. The surveys were distributed to various locations and groups of people throughout Burnett County (see Appendix for full listing of survey locations). The survey instrument asked respondents to identify what they perceived to be the biggest health problems and risky behaviors among Burnett County residents (see Appendix for results).

#### *Community Health Meeting*

Finally, in discussing and prioritizing the significant health needs identified at the Community Health Meeting facilitated by CHNA partners, input was gathered from public health representatives, not-for-profit organization professionals, and other individuals who serve underserved groups, in attendance (see Appendix, under community partners, for a full listing of the organizations represented). Through a discussion of the assessment results presented, meeting attendees expressed what they felt to be the biggest health needs among the people they serve. Of the organizations present, populations being represented include the Native American population, the medically underserved, and the low-income.

### **Identification and Prioritization of Significant Health Needs**

Quantitative and qualitative assessment results were considered in concert to understand the significant health needs of Burnett County residents. Quantitative health indicator measures for Burnett County were compared to state and national benchmarks in order to determine Burnett County's health status with respect to the 12 health focus areas, as well as socioeconomic measures of health. Key findings indicate that Burnett County's health status with respect to oral health, nutrition, physical activity, chronic disease prevention and management, behavioral health, and alcohol and drug use is poorer than state and national benchmarks. Through analysis of socioeconomic measures of health for Burnett County, access to care was also identified as an area of concern (See Appendix for all health indicator data).

In prioritizing the significant health needs identified through the assessment process, attendees voted at the Community Health Meeting on three of the 12 health focus areas from the Healthiest Wisconsin 2020 framework. When voting, participants were asked to evaluate each health focus area in light of the assessment results presented and against the following five criteria:

1. Viable strategies exist to impact the need
2. Resources are available to impact the need
3. There is a high importance placed by the community on addressing the need (i.e. considering qualitative assessment results)
4. The need has an extensive impact on population health, both in the number of individuals affected and in the degree to which it influences health outcomes
5. The need is not adequately being served by current resources and organizations in the community

Out of the voting process, the following top three health focus areas were selected:

1. Alcohol and other drug abuse
2. Behavioral health
3. Tobacco use and exposure

While the above criteria were used by community partners to prioritize the health focus areas, hospital leaders evaluated the 12 health focus areas against an additional criterion: the hospital's ability to address the need based on the hospital's expertise and resources. Out of this process, chronic disease prevention and management, most notably prevention and management of diabetes, was also identified as a significant health need. Although not one of the 12 health focus areas, access to care, which is an area of focus in the state health plan and an indicator of health status, was also identified as a significant need.

### **Prioritized Description of Significant Health Needs**

Alcohol and other drug abuse were identified as a significant health concern for Burnett County. Although not far off from Wisconsin's rate (24%), the percent of adults that report either binge or heavy drinking in Burnett County is 21%. The excessive drinking behavior characteristic of Burnett County is also demonstrated in the number of residents per liquor license and the percent of motor vehicle crashes related to alcohol. Specifically, Burnett County has 161 liquor licenses compared to 338 for Wisconsin. The high percentage of motor vehicle crashes related to alcohol is 7.7% in Burnett County compared to 4.9% for Wisconsin (County Health Rankings, 2016).

Behavioral health was also identified as a significant health concern across all data collection methods. A concern expressed in one focus group and the key informant interview was the lack of behavioral health providers in Burnett County. Being designated as a Behavioral Health Professional Shortage Area and having no practicing child and adolescent psychiatrists creates a barrier to receiving needed services. Additionally, poor behavioral health can negatively impact other health behaviors and outcomes, as was expressed by community partners at the Community Health Meeting. Research indicates that individuals with behavioral health issues have an increased risk of developing chronic health problems and risk factors such as smoking, physical inactivity, obesity, and substance abuse and dependence.

Tobacco use and exposure is another significant need in the service area. In Burnett County, the percent of adults who smoke is 23.8%, which is higher than WI (19.3%) and higher than the HP2020 goal of 12%. As an indicator of tobacco exposure, the percent of mothers that smoke during pregnancy is still a major problem. Burnett County (31%) is more than double the Wisconsin average (14%). Health care costs are increasing due to tobacco use and exposure. Each year, 18% of all deaths in Burnett County are attributable to smoking, which is higher than Wisconsin at 15%. Rates of death from lung cancer are higher in Burnett County (65 per 100,000 population) compared to the Western Region and WI and above the National Benchmark of 45.5 per 100,000 population.

Being an older population on average, chronic diseases are prevalent among Burnett County residents. Of the leading causes of death in Burnett County, the majority are chronic disease-related; cancer and heart disease are the first and second leading causes of death. Similarly, seven of the ten leading causes of death in Wisconsin and the United States are due to chronic diseases. When considering prevalence of diabetes in particular, Burnett County fairs worse than Wisconsin. More Burnett County residents (10.3%) are estimated to have diabetes than compared to Wisconsin (10.1%). Percent of diabetes-related hospitalizations is also higher for Burnett County (18%) than Wisconsin (15%). Furthermore, the rate of deaths due to diabetes is higher in Burnett County (23.6 per 100,000 population) than Wisconsin (20.4).



Another significant health need evident across quantitative and qualitative data collection methods was access to care, resulting from socioeconomic barriers existent among Burnett County residents. Focus group responses and quantitative data measures pointed to high rates of poverty in Burnett County. With 15% of the Burnett County population living in poverty, compared to 12% for Wisconsin and 14% for the United States, this population may be at an increased risk of mortality, prevalence of medical conditions and disease incidence, depression, intimate partner violence, and poor health behaviors. Being 100% rural, lack of transportation in Burnett County is also a barrier to receiving healthcare. Lack of health insurance coverage is an additional concern as 14% of Burnett County residents do not have insurance, compared to 11% for Wisconsin and the United States. Individuals without insurance are less likely to receive preventive and diagnostic healthcare services, are more often diagnosed at a later disease stage, and, on average, receive less treatment for their condition than insured individuals.

### Existing Resources in the Community

There are a variety of healthcare facilities and resources in Burnett County available to respond to the health needs of area residents (see Appendix for full listing of resources). There are four health clinics, a WIC Clinic, and other programs that run through the Burnett County Department of Health and Human Services, where the primary care needs of residents are served. Burnett Medical Center's hospital, adjoining clinic, and long-term care facility, meets the acute, primary, and long-term care needs of many residents, and also provides access to a number of visiting specialists. Three dental clinics in the county provide dental services to area residents. However, those that are uninsured, underinsured, and lack transportation, have limited access to primary and dental care services. In regards to behavioral health services, counseling and therapy services are offered by a number of organizations such as, Northwest Passage and Northwest Journey, which are great local services that address youth behavioral health needs.

Aforementioned service providers offer an array of healthcare services but, local school districts, non-profit organizations, community groups, and other governmental agencies also demonstrate a commitment to enhancing the health and well-being of Burnett County residents through program and service offerings, education, and support of other organizations and initiatives.

### Information Gaps

Burnett Medical Center's ability to accurately assess the community's health status was slightly limited due to information gaps in the data collection process as a result of (1) public data sources not reporting health indicator data specific to unique populations (in our service area, the Native American population), and (2) the inevitable lag that exists in the time data is collected to when it is published due to the logistics of collecting, analyzing, and publicizing data. While these factors may result in a possible inaccurate representation of current health status, qualitative data collected through the surveys, focus groups, and key informant interview were intended to help compensate for this.

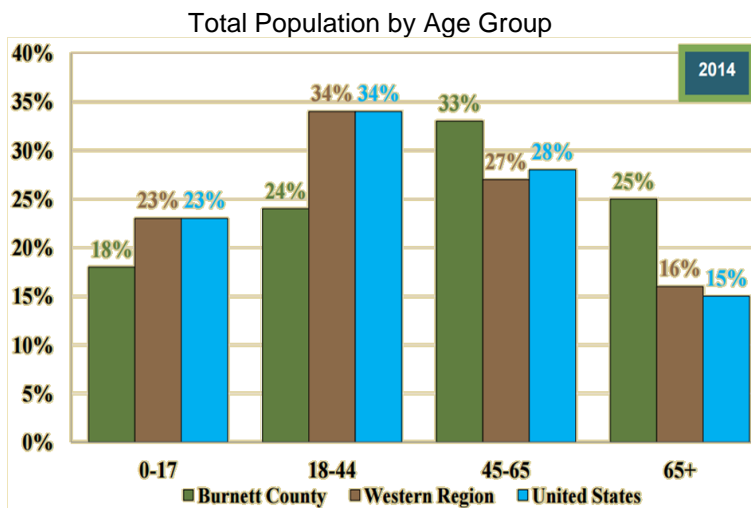
# Appendix

## Quantitative Findings

### Population and Demographics

#### i. Population

According to the 2015 Wisconsin Department of Health Services, Burnett County is 100% rural, compared to Wisconsin which is 29.8% rural. About 15,159 people reside in Burnett County and the median age is approximately 49.1 years. Burnett County's population is aging and shrinking; between 2000 and 2010, the county experienced a 1.38% decrease in size (U.S. Census Bureau, 2015).



Median Age in Years  
Burnett County 49.1  
Wisconsin 38.5  
United States 37.2

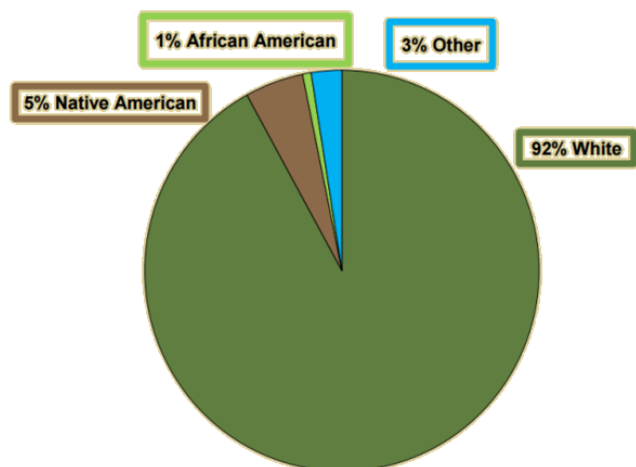
Source: U.S. Census Bureau, 2015

Source: Wisconsin Department of Health Services, 2015

#### ii. Race/Ethnicity

The population of Burnett County is predominately white (91.6%), but also has a notable Native American population (4.6%). African Americans make up only a small portion of Burnett County's population (0.5%) and the remaining 3.3% of the population consists of Asian, Hispanic/Latino, and other races (U.S. Census Bureau, 2015).

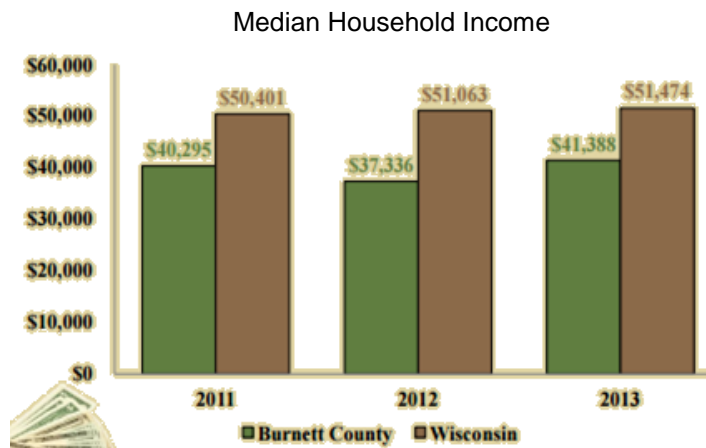
Burnett County Population by Race



Source: U.S. Census Bureau, 2015

### iii. Economics

In 2013, the average household income of Burnett County was \$41,388, which is roughly \$10,000 lower than Wisconsin (County Health Rankings, 2016). In considering poverty levels of the service area, with 16.5% of the population living in poverty, Burnett County had a higher poverty rate than Wisconsin (13.2%) and the United States (15.5%) in 2014 (U.S. Census Bureau, 2014).

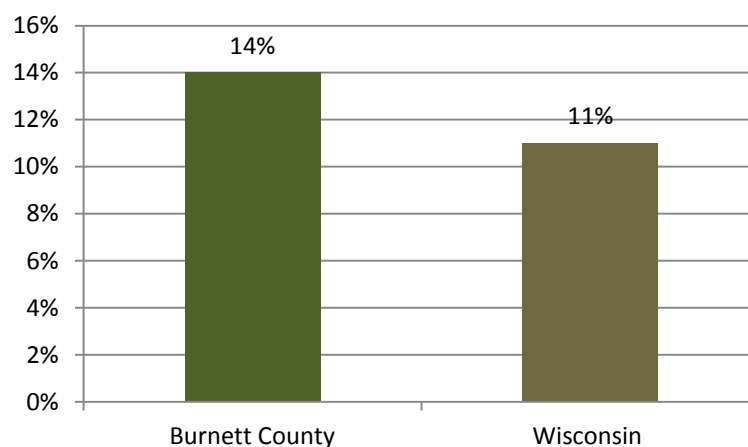


Source: County Health Rankings, 2016

### iv. Insurance Coverage

Insurance coverage for Burnett County residents is less than Wisconsin and the United States. According to the 2016 County Health Rankings, 14% of Burnett County residents do not have insurance, compared to 11% for Wisconsin. Lack of health insurance coverage is a significant barrier to accessing needed health care. Individuals without insurance are less likely to receive preventive and diagnostic health care services, are more often diagnosed at a later disease stage, and, on average, receive less treatment for their condition than insured individuals.

Percent of Population Under Age 65 Without Health Insurance, 2016



Source: County Health Rankings, 2016

## v. Employment

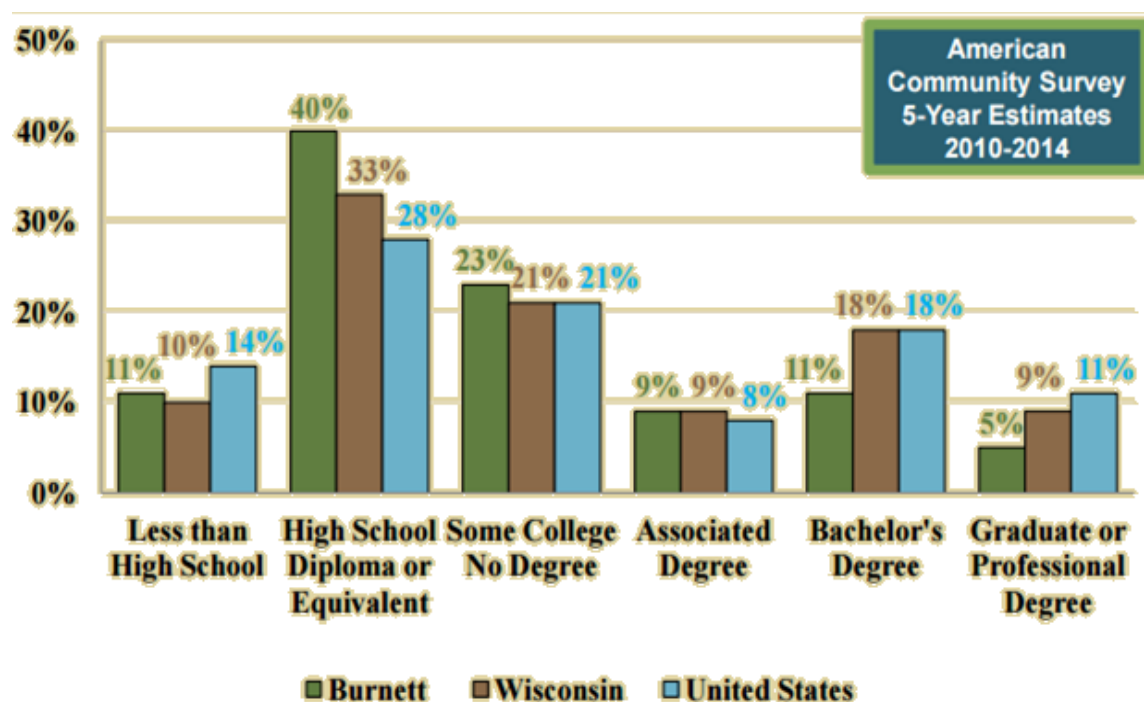
In 2014, Burnett County had an unemployment rate of 10%, which is higher than both Wisconsin (7%) and the United States (9%) (Wisconsin Department of Workforce Development, 2015). The unemployed population experiences worse health and higher mortality rates than the employed population. Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, which in turn can lead to increased risk for disease or mortality, especially suicide. Because employer-sponsored health insurance is the most common source of health insurance coverage, unemployment can also limit access to health care (County Health Rankings, 2016).

## vi. Educational Attainment

Research shows that educational attainment is one of the strongest predictors of individual and community health. Education levels influence income potential and job type, access to healthy food and health care, and individual health behavior choices. At the community level, public school achievement outcomes influence local economic health (County Health Rankings, 2016).

Burnett County has a lower level of educational attainment than Wisconsin and the United States. For the years 2010-2014, only 48% of Burnett County residents had more than a high school diploma, compared to 57% for Wisconsin and 58% for the United States (U.S. Census Bureau, 2015).

Percentage of Educational Attainment



Source: U.S. Census Bureau, 2015



## Health Indicator Data

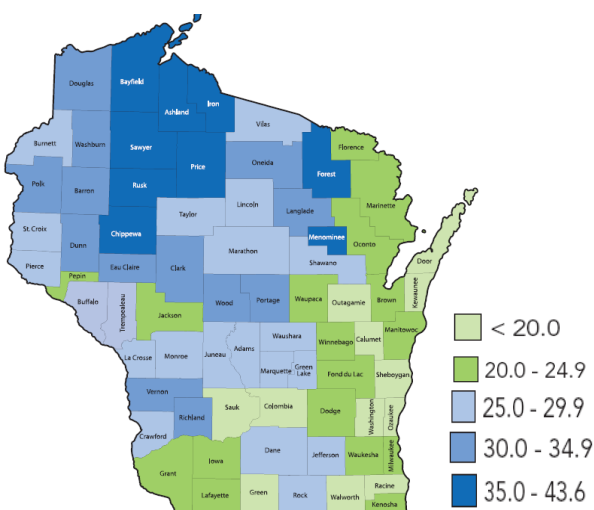
### i. Oral Health

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. It also improves the ability to speak, smile, smell, taste, touch, chew, swallow, and make facial expressions. Oral health is integral to general health, and people cannot be healthy without good oral health. Many diseases can start with oral symptoms, and many diseases beginning in the mouth can affect health in other parts of the body (Healthiest Wisconsin 2020, 2013).

Improvement in oral health is rooted in effective prevention and treatment efforts, including routine dental visits and community water fluoridation, which help to prevent tooth decay, gum disease, and infection. Ability to access dental health services is crucial to maintaining good oral health. According to the 2010 Burden of Oral Disease in Wisconsin report, only between 25 and 29.9% of Medicaid (MA) members in Burnett County receive dental services. Generally no dentists in Burnett County accept patients with MA, so access to dental health services are poor. Burnett County is designated as a “Dental Health Professional Shortage Area”, meaning there is a federal designation identifying there is a shortage of dental providers. This reflects Burnett County’s residents’ challenge in receiving proper dental health services.

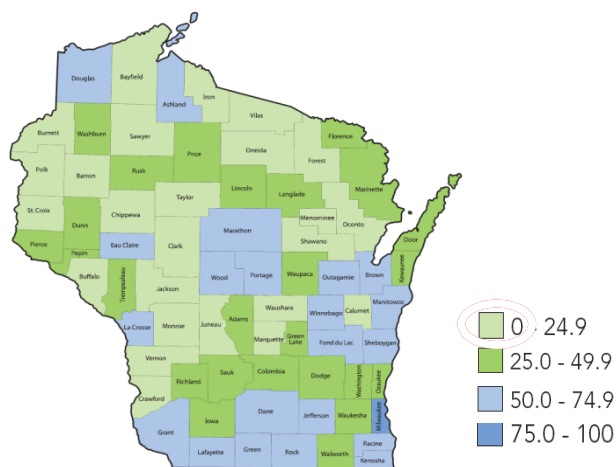
According to Community Commons, for the years 2006-2010, 27% of Burnett County adults had poor dental health. This rate is higher than both Wisconsin (15%) and the United States (16%) indicating the lack of access to dental care (2015). As a means to preventing tooth decay, gum disease, and infection, community water fluoridation is also an indicator of good oral health. In Burnett County, between zero and 24.9% of the population is served by fluoridated water, which is lower than much of Wisconsin (Burden of Oral Disease in WI, 2010).

Percentage of Medicaid Members  
Receiving Dental Services



Source: Burden of Oral Disease in WI, 2010

Percent of Total County Population  
Served by Fluoridated Water



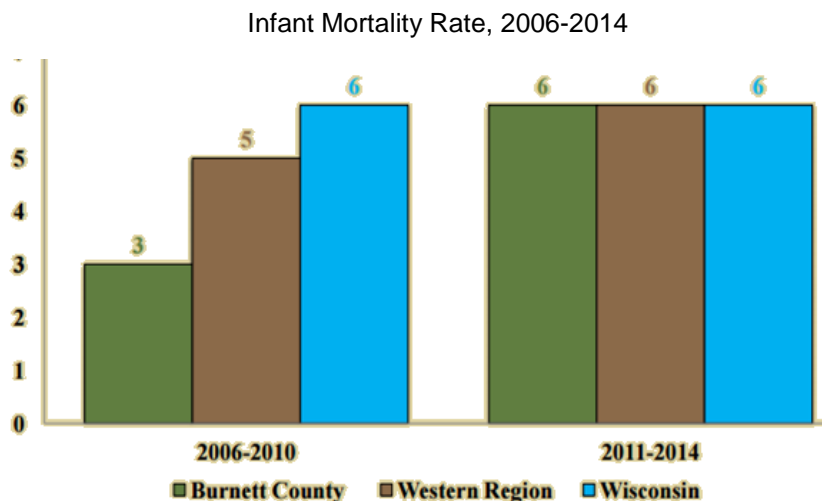
Source: Burden of Oral Disease in WI, 2010

## ii. Healthy Growth and Development

Healthy growth and development in early life have a profound effect on health across the life span. For healthy growth and development to occur, coordinated care and support is required prior to conception, and throughout prenatal periods, infancy, childhood, adolescence, and adulthood. Methods of supporting healthy growth and development include conducting prevention, screening, assessment, and intervention activities, and promoting holistic social, emotional, behavioral, cognitive, linguistic, sensory, and motor development (Healthiest Wisconsin 2020, 2013).

There are several health status indicators used to measure healthy growth and development, including birth rate, infant mortality rate, prenatal care, birth weight, tobacco use during pregnancy, and breastfeeding rates. Burnett County's birth rate—the number of live births per 1,000 population—for the years 2009 to 2013 is 9% which is lower than the Wisconsin average (12%) (Wisconsin Interactive Statistics on Health, 2015).

Between 2011 and 2014, Burnett County's infant mortality rate was 6 per 1,000 live births, which is similar to Wisconsin's infant mortality rate. Although Burnett County's infant mortality rate was the same as Wisconsin, mothers in Burnett County received less prenatal care. Considering births where prenatal care began in the first trimester, only 74% of births in Burnett County received care for the years 2009 to 2013, compared with 79% for Wisconsin (Wisconsin Interactive Statistics on Health, 2015).



Source: Wisconsin Interactive Statistics on Health, 2015

As another indicator of health status with respect to healthy growth and development, the percent of births with a low birth weight in Burnett County was 5% for 2009 to 2013, which is lower than Wisconsin (7%) and the national benchmark (7.8%) (Wisconsin Interactive Statistics on Health, 2015).

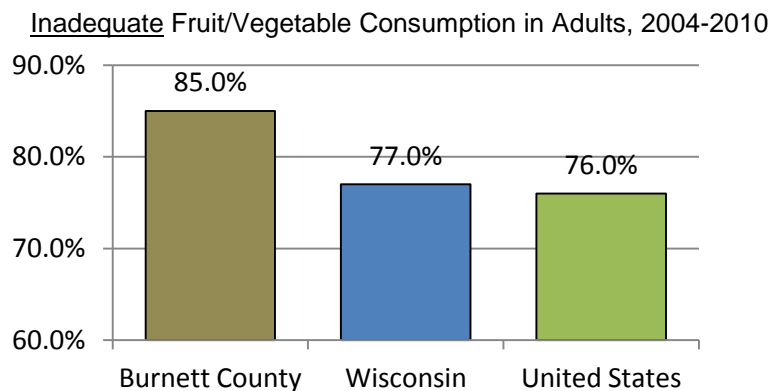
Breastfeeding is important to healthy growth and development as it benefits the health of both the child and the mother. In Burnett County, 68% of infants had ever breastfed, which is lower than Wisconsin (72%) for the years 2011 to 2014 (Wisconsin Department of Health Services, 2014). For those infants that breastfed at least 12 months, at 7.1%, Burnett County was also lower than Wisconsin (12.2%) (Wisconsin Interactive Statistics on Health, 2015).

Tobacco use during pregnancy is a risk factor for adverse birth outcomes. From 2009 to 2013, 31% of Burnett County mothers reported smoking during their pregnancy. This is more than double Wisconsin (14%) and is about twenty-two times more than the national benchmark (1.4%) (Wisconsin Interactive Statistics on Health, 2015).

### iii. Adequate, Appropriate and Safe Food and Nutrition

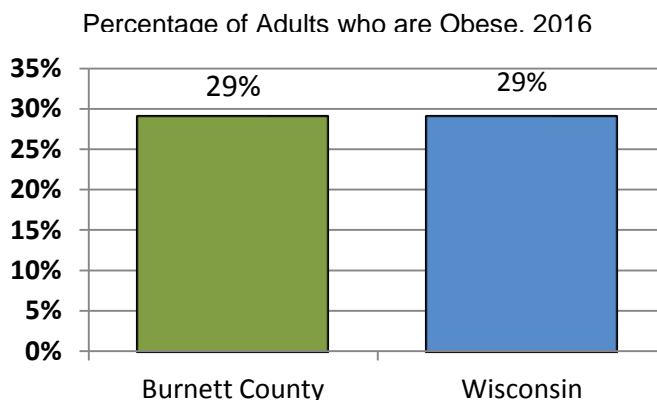
Adequate, appropriate and safe food and nutrition means the regular and sufficient consumption of nutritious foods across the life span to support normal growth and development of children. Good nutrition includes meeting nutrient recommendations yet keeping calories under control; safe handling, preparation, serving, and storage of foods and beverages; and ready and appropriate access to nutritious foods throughout the year. A healthy diet reduces risk of overweight/obesity, malnutrition, anemia, heart disease, high blood pressure, type 2 diabetes, osteoporosis, oral disease, and some cancers (Healthiest Wisconsin 2020, 2013).

In Burnett County, a significant portion of the population has inadequate fruit and vegetable consumption—measured by those that consume less than five servings of fruits and vegetables each day. The percent of those with inadequate fruit and vegetable consumption in Burnett County for the years 2004 to 2010 was 85%, which is higher than Wisconsin (77%) and the United States (76%) (Community Commons, 2015).



Source: Community Commons, 2015

The rate of obesity is also a health indicator of adequate and appropriate nutrition. Obesity is often the result of an energy imbalance due to poor diet and limited physical activity. In Burnett County, 29% of the population was obese, similar to Wisconsin (29%) (County Health Rankings, 2016).



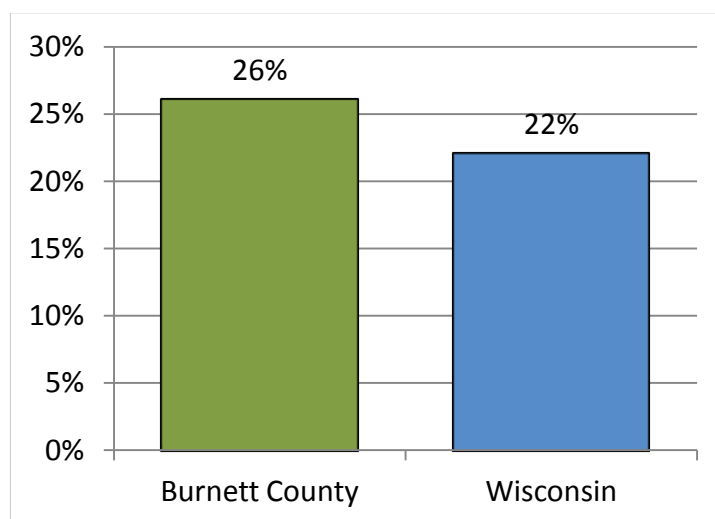
Source: County Health Rankings, 2016

Food security is also a critical component of accessing healthy and nutritious foods. Participation rates in county food stamp programs are indicative of food security challenges. In Burnett County, 23% of the population receives food share/food stamps, compared with 19% for Wisconsin (WI Department of Health Services, 2016).

#### iv. Physical Activity

Physical activity means any bodily activity that enhances or maintains physical fitness and overall health. Regular physical activity can lower the risk of early death, heart disease, stroke, high blood pressure, Type 2 diabetes, breast and colon cancer, falls, and depression. Physical inactivity, which is the estimated percent of adults, aged 20 and over who report no leisure time physical activity, is one indicator of physical activity. In Burnett County, 26% of residents reported no leisure time physical activity, which is higher than Wisconsin (22%) (County Health Rankings, 2016).

Estimated percent of adults aged 20 and over reporting no leisure time physical activity, 2016



Source: County Health Rankings, 2016

In considering the level of physical activity among youth in Burnett County, the rates are higher compared to adults.

In the 2014 Youth Risk Behavior Survey distributed to high school students in Burnett County, the following statistics were reported:

- 56% were physically active at least 60 minutes per day, which is higher than Wisconsin (50%) and the United States (50%) for 2014.
- 23% watched three or more hours per day of TV on an average school day, which is the same as Wisconsin (23%) and lower than the United States (33%) for 2013/2014.
- 43% played video or computer games or used a computer for something that was not school work three or more hours per day on an average school day, which is higher than Wisconsin (34%) and the United States (41%) for 2013/2014.

## v. Chronic Disease Prevention and Management

Chronic diseases are defined as illnesses that last a long time, do not go away on their own, are rarely cured, and often result in disability later in life. Examples include heart disease, stroke, cancer, diabetes, asthma and arthritis. Chronic diseases are among the most common and costly of all health problems in the United States, but they are also among the most preventable diseases. Four modifiable health risk behaviors— unhealthy diet, insufficient physical activity, tobacco use and secondhand smoke exposure, and excessive alcohol use — are responsible for much of the illness, suffering, and early death related to chronic diseases. Currently, 7 of the 10 leading causes of death in Wisconsin and the United States are due to chronic diseases, accounting for approximately 2 out of every 3 deaths annually. For Burnett County, among the top leading causes of death are cardiac related diseases, cancer, cerebrovascular disease, chronic obstructive pulmonary disease (COPD), and Alzheimer's (Healthiest Wisconsin 2020, 2013).

Cardiac related diseases such as heart disease, cardiac dysrhythmia, hypertension, congestive heart failure (CHF), and myocardial infarction (MI) are the leading cause of death in Burnett County in 2015. The death rate for heart disease among Burnett County residents at 66.8 per 100,000 population is lower than the Western Region (91.5) and WI (97.9) (Wisconsin Interactive Statistics on Health, 2015).

Deaths from cancer are the second most prevalent cause of death among Burnett County residents. However, the incidence rate of cancer for Burnett County (407.8 per 100,000 population) is lower than the Western Region (419.3) and Wisconsin (447.7) (Wisconsin Interactive Statistics on Health, 2015).

The stroke death rate of 27.5 per 100,000 population for Burnett County is lower than Wisconsin (37) and the western region (36.5) (Wisconsin Interactive Statistics on Health, 2015).

COPD is the fourth leading cause of death in Burnett County. The death rate for COPD among Burnett County residents is 47.8 per 100,000 population. This is higher than the Western Region (40.1) and WI (38.7) (Wisconsin Interactive Statistics on Health, 2015).

Diabetes is one of the most prevalent chronic diseases among Burnett County residents. 11% of adults age 20 and above are estimated to have diabetes, which is higher than the rate for Wisconsin (9%) and the United States (9.3%). The percent of diabetes-related hospitalizations was also higher for Burnett County (18.2% of all hospitalizations) compared to 15% in the Wisconsin and Western Region (Burden of Diabetes, 2011). Burnett County also had a higher death rate due to diabetes (25.5 per 100,000 population) compared to the Western Region (19.7) and Wisconsin (18) for the years 2006 to 2010 (Wisconsin Interactive Statistics on Health, 2015).

Leading Causes of Death in Burnett County, 2015

Cause of Death	Count
Cardiac	44
Cancer	39
Cerebrovascular Accident (CVA)	12
COPD	11
Other	9
Alzheimer's Disease/Dementia	7
Alcohol/Drug Related	4
Suicide	3
Pneumonia	2
Failure to Thrive	2

Source: Wisconsin Interactive Statistics on Health, 2015



## vi. Environmental and Occupational Health

Environmental and occupational health includes the regulatory and educational programs and services needed to prevent, identify, and mitigate illnesses and injuries resulting from hazards in the natural, built, and work environments. More specifically, environmental and occupational health pertains to worksite safety; inspections of restaurants, hotels, resorts, pools, campgrounds, and recreational/educational camps; water quality; air quality (outdoor and indoor); hazardous waste; housing issues such as lead exposure, mold, and radon; occupational illness and repetitive injuries; occupational diseases such as cancer related to asbestos and hearing loss due to noise; exposures affecting reproductive health; tick-borne diseases; and food and water-borne illnesses. In general, the air we breathe, water we drink, food we eat, and communities where we live are increasingly recognized as underlying determinants of health. (Healthiest Wisconsin 2020, 2013).

The number of individuals infected by food borne and waterborne diseases is one indicator of the environmental health of a community. In Burnett County there have been few incidences of such infection over the course of the years from 2013 to 2015.

Food borne and Waterborne Diseases Infecting Burnett County Residents, 2013-2015

Disease	2013	2014	2015	Total
Campylobacter	2	2	2	6
Cryptosporidium	1	0	1	2
Giardia	1	0	1	2
Norovirus Outbreak	0	1	0	1
Salmonellosis	6	3	1	10
Shigellosis	1	3	0	4

Source: WI Electronic Data Surveillance, 2016

Animal to human diseases infecting Burnett County residents are much more prevalent than food and waterborne disease. Lyme disease is of particular concern in Burnett County, with 42 individuals being infected from 2013 to 2015 (WI Electronic Data Surveillance, 2016). Compared to the rest of the state, Burnett County was in the middle range of incidence rate for Lyme disease at 38-74 per 100,000 population for 2014 (Wisconsin Department of Health Services, 2015).

Animal to Human Diseases Infecting Burnett County Residents, 2013-2015

Disease	2013	2014	2015	Total
Babesiosis	2	0	0	2
Ehrlichiosis / Anaplasmosis	7	7	18	32
Lyme	18	9	15	42

Source: WI Electronic Data Surveillance, 2016

## vii. Communicable Disease

Communicable diseases (infectious diseases) are illnesses caused by bacteria, viruses, fungi or parasites. Organisms that are communicable may be transmitted from one infected person to another or from an animal to a human, directly or by modes such as airborne, waterborne, food borne, or vector borne (tick, mosquito) transmission, or by contact with an inanimate object, such as a contaminated door knob. Communicable disease prevention and control protect both individuals and entire populations. Effective immunizations have drastically reduced many, once common communicable diseases. Prompt identification and control of communicable diseases reduces illness and premature deaths, health costs, and absenteeism (Healthiest Wisconsin 2020, 2013).

In Burnett County, Chlamydia, Hepatitis C, and Lyme have been found to be the most prevalent communicable diseases from 2013 to 2015 (WI Electronic Data Surveillance, 2016).

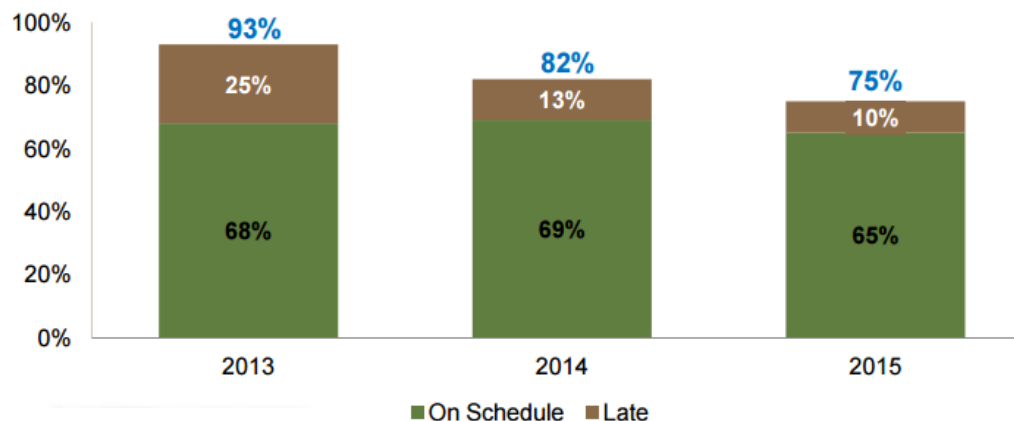
Communicable Diseases Infecting Burnett County Residents, 2013-2015

Disease	2013	2014	2015	Total
Chlamydia	26	24	32	82
Hepatitis C	7	13	22	42
Lyme	18	9	15	42
Ehrlichiosis/Anaplasmosis	7	7	18	32
Influenza Associated Hospitalization	8	7	2	17
Salmonellosis	6	<5	<5	10
Gonorrhea	<5	<5	6	9
Campylobacteriosis	<5	<5	<5	6
Shigellosis	<5	<5	<5	4
Hepatitis B	<5	<5	<5	3

Source: WI Electronic Data Surveillance

Great effort has been made in Burnett County to immunize residents. Since 2013, the number of residents who are 2 years old and receiving late vaccinations has been decreasing. However, the number of 2 year olds who are getting vaccinated has dropped from 93% in 2013 to 75% in 2015.

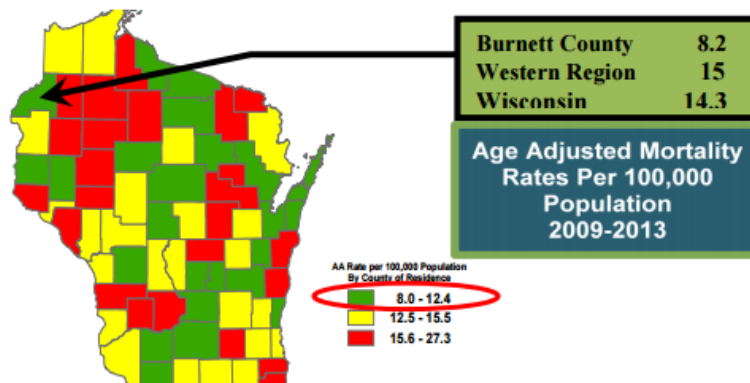
Immunizations Up-to-Date at Age 2 in Burnett County



Source: Wisconsin Immunization Registry, 2015

These types of efforts pay off since the death rate per 100,000 population due to influenza/pneumonia in Burnett County (8.2) was lower than Wisconsin on average (14.3) for 2009 to 2013 (Wisconsin Interactive Statistics on Health, 2015).

Influenza/Pneumonia Listed as Primary Cause of Death, 2009-2013



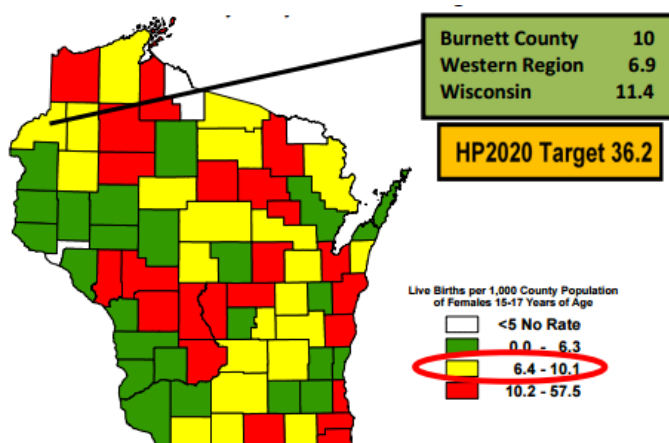
Source: Wisconsin Interactive Statistics on Health, 2013

### viii. Reproductive and Sexual Health

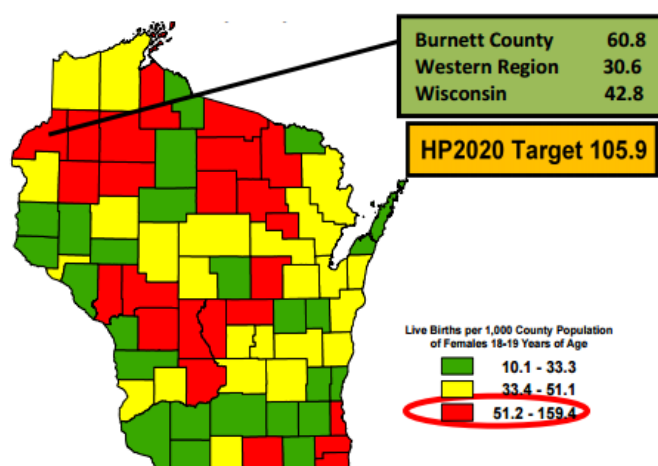
Reproductive and sexual health includes the factors that affect the physical, emotional, behavioral, and social well-being related to reproduction and sexuality across the life span. Unintended pregnancies and sexually transmitted diseases, including HIV infections, result in tremendous health and economic consequences for individuals and society (Healthiest Wisconsin 2020, 2013).

Burnett County had 10 births to mothers 15 to 17 years of age per 1,000 females from 2009 to 2013 which is lower than Wisconsin at 11.4. For the number of births to mothers 18 to 19 years of age, Burnett County was at 60.8, compared to Wisconsin at 42.8. However, compared to the national target delineated in the national health plan, Healthy People 2020, Burnett County's rates are much lower (Wisconsin Interactive Statistics on Health, 2015).

Teen Birth Rate Mothers 15-17 Years of Age



Teen Birth Rate Mothers 18-19 Years of Age



Source: Wisconsin Interactive Statistics on Health, 2015

Chlamydia has been found to be the most prevalent of the sexually transmitted diseases affecting Burnett County residents for the years 2013-2015 (Burnett County DHHS—Public Health, 2013).

Sexually Transmitted Diseases in Burnett County, 2013-2015

Disease	2013	2014	2015	Total
Chlamydia	26	24	32	82
Gonorrhea	3	0	6	9
Hepatitis B	0	1	2	3
Hepatitis C	7	13	22	42
HIV	<5	<5	<5	<5
STD Contacts Investigated / Notified	-	16	23	39

Source: WI Electronic Data Surveillance, 2016

Sexual behavior among youth is also indicative of reproductive and sexual health among Burnett County residents. In the 2014 Youth Risk Behavior Survey distributed to high school students in Burnett County, the following statistics were reported:

- 36.2% ever had sexual intercourse, which is higher than Wisconsin (35%) and lower than the United States (47%) for 2013.
- 8.6% had sexual intercourse with 4 or more people, which is lower than WI (10%) and lower than the US (15%) for 2013.
- 20.7% used a condom during their last sexual intercourse, which is lower than WI (63%) and the US (59%) for 2013.

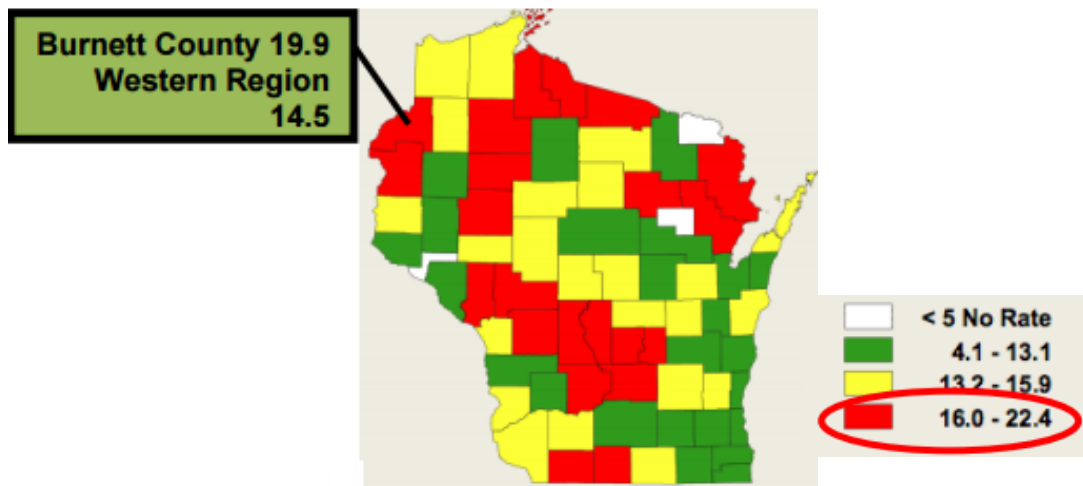
#### ix. Behavioral Health

Behavioral health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Behavioral and physical health are closely connected, hence the statement "there is no health without behavioral health". Behavioral health disorders are associated with increased rates of chronic health problems and risk factors such as smoking, physical inactivity, obesity, and substance abuse and dependence. Research indicates that one out of five people will experience a behavioral health problem of some type during a one-year period (Healthiest Wisconsin 2020, 2013).

In Burnett County, certain factors contribute to a poor state of behavioral health among residents, one being lack of access to behavioral health services. Like many counties in Wisconsin and throughout the United States, Burnett County is designated as a Behavioral Health Care Professional Shortage Area. Furthermore, behavioral health is a concern for children in Burnett County as there are no practicing child and adolescent psychiatrists.

Deaths from suicide are one indicator of the status of behavioral health among residents in the service area. In considering deaths due to suicide per 100,000 population in Burnett County, at 19.9, Burnett County had a rate higher than the Western Region (14.5) for 2009 to 2013 (Wisconsin Interactive Statistics on Health, 2015).

## Suicides (Age-adjusted mortality rate per 100,000 population)



Source: Wisconsin Interactive Statistics on Health, 2013

Data gathered on suicide from the 2014 Youth Risk Behavior Survey is also suggestive of status of behavioral health in Burnett County. The following statistics were reported for Burnett County high school students:

- 16.7% seriously considered suicide, which is higher than WI (13%) and higher than the US (14%) for 2013.
- 5.2% attempted suicide, which is lower than WI (6%) and lower than the US (8%) for 2013.
- 2.3% made a suicide attempt requiring medical treatment, which is lower than WI and the US (both 3%) for 2013.

### x. Tobacco Use and Exposure

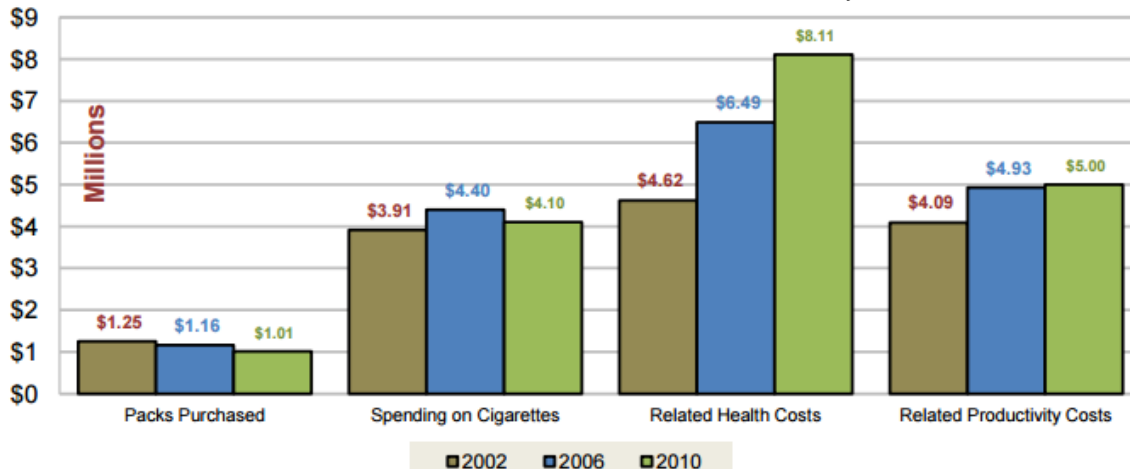
Eliminating tobacco use and exposure means improving health by preventing tobacco abuse, promoting tobacco dependence treatment, protecting all people from exposure to secondhand smoke, and identifying and eliminating tobacco-related disparities. Tobacco continues to be a devastating health and economic burden on Wisconsin. While tobacco use is the single most preventable cause of death and disease in the US, an estimated 8,000 people die of tobacco-related illnesses in Wisconsin each year. Tobacco use accounts for 11% of Medicaid costs and nearly 10% of Medicare costs, and annual health care costs are \$2,000 higher for smokers than nonsmokers (Healthiest Wisconsin 2020, 2013).

In Burnett County, the percent of adults who smoke has decreased over the past several years even though the percent of adults who smoke in Burnett County (23.8%) is higher than WI (19.3%) and higher than the HP2020 goal of 12% for 2011- 2014 (Wisconsin Interactive Statistics on Health, 2013). The percent of mothers that smoke during pregnancy, however, is still a major problem. The percentage for Burnett County at 31% is much higher than the Wisconsin average of 14% (County Health Rankings, 2016).

Although smoking rates in Burnett County are decreasing, related health care costs and productivity costs are increasing (Burden of Tobacco in Wisconsin, 2002, 2006, 2010).



### Economic Burden of Tobacco in Burnett County



Source: Burden of Tobacco in WI, 2002, 2006, 2010

Deaths from smoking-related diseases are also indicative of the impact of tobacco use and exposure in Burnett County. In 2010, 18% of all deaths in Burnett County were attributable to smoking, which is higher than Wisconsin at 15% (Burden of Tobacco, 2010). Rates of death from lung cancer were higher in Burnett County (65 per 100,000 population) compared to Wisconsin and above the national benchmark of 45.5 per 100,000 population for 2006 to 2010 (Wisconsin Interactive Statistics on Health, 2013). Deaths from smoking-related diseases such as Cerebrovascular Disease, Chronic Obstructive Pulmonary Disease (COPD), Ischemic/Coronary Heart Disease and Lung Cancer, were lower in Burnett County (204.9 per 100,000 population) than in Wisconsin (218.4) for 2006 to 2010 (Wisconsin Interactive Statistics on Health, 2015).

Tobacco use among youth is shown to be higher among Burnett County residents than Wisconsin and the United States. In the 2014 Youth Risk Behavior Survey distributed to high school students in Burnett County, the following statistics were reported:

- 10.9% smoked a whole cigarette for the first time before age 13, which is higher than WI (7%) and the US (9%) for 2013.
- 8.6% tried to quit smoking, which is lower than WI (46%) and the US (48%) for 2013.
- 10.9% used Chewing Tobacco, Snuff, or Dip, which is higher than WI (9%) and the US (8%) for 2013

#### xi. Alcohol and Drug Use

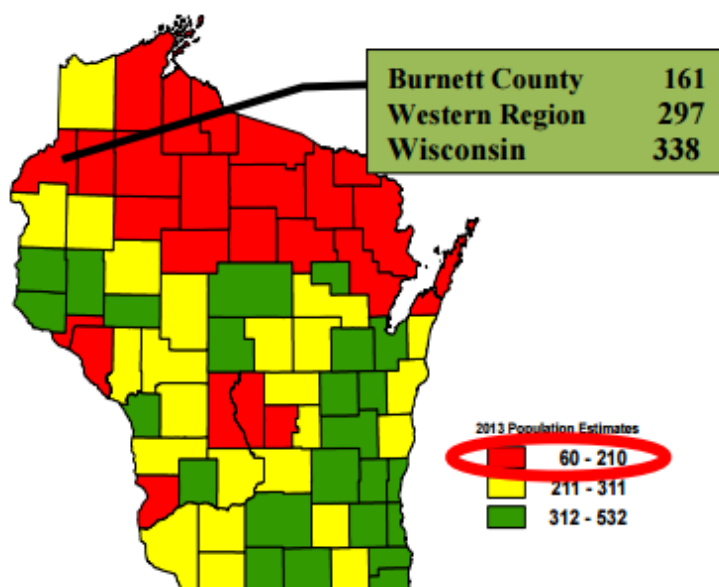
Alcohol and other drug use means any use of a substance that result in negative consequences. This encompasses a broad array of mood-altering substances that include, but are not limited to, alcohol, prescription medications, and illegal mood-altering substances. Abuse of alcohol and drugs has far-reaching consequences, including motor vehicle and other injuries; fetal alcohol spectrum disorder and other childhood disorders; alcohol- and drug-dependence; liver, brain, heart and other diseases; infections; family problems; and both nonviolent and violent crimes. In Wisconsin, alcohol-related deaths are the fourth leading cause of death (Healthiest Wisconsin 2020, 2013).

Wisconsin ranks extraordinarily high compared to other states on the nation's leading indicators of problem drinking, and Burnett County is no exception. For Burnett County adults, 21% have reported either binge drinking (women consuming more than 4 alcoholic beverages and men more than 5 on a

single occasion in the past 30 days) or heavy drinking (women consuming more than 1 drink and men more than 2 per day on average), which is lower than Wisconsin at 24 (County Health Rankings, 2016).

Access to alcohol—in terms of availability and cost—is one contributing factor to high levels of alcohol consumption in Wisconsin. In Wisconsin, the number of alcohol outlets per capita is double the national average. For Burnett County, the number of residents per liquor license is 161 for 2014 to 2015 which is higher than the Wisconsin average of (338) (Wisconsin Department of Revenue, 2014-2015).

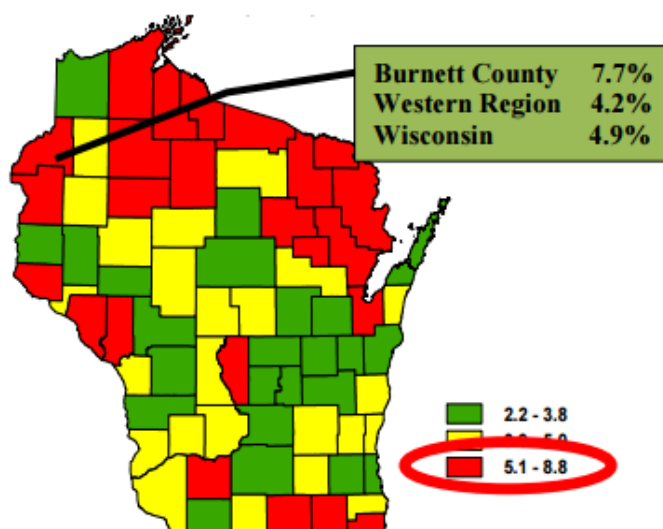
Number of Residents per Liquor License



Source: Wisconsin Department of Revenue, 2014-2015

As another indicator of alcohol use in a community, motor vehicle crashes related to alcohol are a concern in Burnett County. Compared to the rest of Wisconsin at 4.9%, for 2009 to 2013, Burnett County had a greater percent of alcohol-related crashes (7.7%) (Wisconsin Department of Transportation, 2013).

Percent of Alcohol-Related Motor Vehicle Crashes, 2009-2013



Source: WI Dept of Transportation, 2013

Alcohol use among youth is also a concern in Burnett County. In the 2014 Youth Risk Behavior Survey distributed to high school students in Burnett County, the following statistics were reported:

- 56.3% had at least one drink of alcohol, which is higher than WI (32.7%) and the US (34.9%) for 2013
- 12.6% had 5 or more drinks in a row, which is lower than WI (18.4%) and the US (20.8%) for 2013.
- 24.1% rode in a vehicle with a driver who was drinking, which is higher than WI (20.6%) and the US (21.9%) for 2013
- 6.3% drove after drinking, which is lower than WI (8.9%) and the US (10%) for 2013.

Although not as prevalent as in Wisconsin and the United States, drug use among youth in Burnett County is of concern. In the 2014 Youth Risk Behavior Survey distributed to high school students in Burnett County, the following statistics were reported:

- 16.7% used marijuana, which is lower than WI (17.3%) and the US (23.4%) for 2013
- 12.1% used inhalants to get high, which is higher than WI (5.9%) and the US (8.9%) for 2013.
- 12.6% were offered, sold or given an illegal drug on school property, which is lower than WI (18.3%) and the US (22.1%) for 2013.

## xii. Injury and Violence Prevention

Unintentional injuries are often referred to as accidents despite being highly preventable. Examples include falls, drowning, motor vehicle crashes, suffocation and poisoning. Intentional injuries include those that were purposely inflicted, with the intent to injure or kill someone (including self). Examples include homicide, child maltreatment, sexual assault, bullying and suicide. Injuries are the leading cause of death in Wisconsin residents 1-44 years of age, and are a significant cause of morbidity and mortality at all ages. Though many of these deaths due to injury are unintentional, the majority are also preventable (Healthiest Wisconsin 2020, 2013).

In Burnett County, the leading causes of injury mortality for the years 2010 to 2014 were motor vehicle traffic crash (20.7 per 100,000 population) and firearms (19.4 per 100,000 population), both of which were higher than the rate for Wisconsin (6.4 and 8.6 per 100,000, respectively) (Wisconsin Interactive Statistics on Health, 2015).

Top Causes of Injury Mortality, Rate per 100,000 population, 2010-2014

Rank	Cause of Mortality	Burnett County	Wisconsin
1	Motor Vehicle Traffic Crash (Occupant)	20.7	6.4
2	Firearms	19.4	8.6
3	Poisoning	16.8	14.4
4	Falls	12.9	19.4
5	Drowning	3.9	1.2

Source: Wisconsin Interactive Statistics on Health, 2015

Similarly, and not surprising considering the high percentage of older individuals residing in Burnett County compared to other counties in Wisconsin, the leading cause of Emergency Department Visits for the years 2010-2014 were falls (2448.8 per 100,000 population), followed by being struck by or against an object or person (1350.7) (Wisconsin Interactive Statistics on Health, 2015).

Top Cause of Injury-Related ED Visits, Rate per 100,000 population, 2010-2014

Rank	Cause of Emergency Dept. Visit	Burnett County	Wisconsin
1	Falls	2448.8	2111.8
2	Struck By or Against Object or Person	1350.7	1125.6
3	Overexertion	930.8	622.9
4	Cutting or Piercing Objects	909.1	651.8
5	Natural or Environmental Factors	693.7	356.0
6	Motor Vehicle Traffic Crashes	537.0	498.0
7	Poisoning	234.5	161.3
8	Fire, Heat, Chemical Burns	165.2	108.8
9	Machinery	91.1	59.2
10	Suffocating	17.6	11.5

Source: Wisconsin Interactive Statistics on Health, 2013

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## Qualitative Findings

### i. Focus Group and Key Informant Interview Results

Questions asked in the focus groups and key informant interview were designed to gather input on participants' views of the health status of Burnett County residents. Questions asked participants to share what they felt to be the biggest assets in Burnett County, the biggest health problems, and the biggest risky behaviors. They were then asked to offer ideas for solutions to the health problems identified.

From participants' responses, the following common themes were identified:

1. Behavioral health was a main theme due to the lack of resources and behavioral health professionals, large stigma associated with behavioral health, related to many other health issues, has effects on law enforcement and veteran population, and the veteran population has unique mental health needs. Some direct quotes from participants state, "Mental health, because not much has changed in recent year", "mental health, because it affects everyone and they use their own coping methods", and "mental health affects all other top identifiers".
2. Alcohol and other drug abuse (AODA) because it can be used as a means of self medication, relates to behavioral health and chronic disease, and relates to domestic violence.
3. Chronic Disease because it can be difficult to manage, is a generational problem meaning it largely impacts the elder population, and due to the lack of necessary insurance coverage.
4. Nutrition due to a limited access to healthy foods, relates to Burnett County's poverty level, high food insecurity, and high rate of obesity.
5. Physical Activity because it can be costly, there is a lack of physical activity facilities especially in the winter months, lack of transportation, and veterans have a great need for physical and mental activities.
6. Overall, the overarching theme is that there is a lack of resources and awareness in Burnett County. By having resources and awareness we could properly address these health needs by having more residents find assistance to improve their health.

### ii. Survey Results

The internet-based survey and paper survey of approximately 500 individuals was distributed to the following locations and populations:

- Burnett County Health Department staff and clients
- Burnett County Jail inmates
- Burnett Medical Center staff and clinic clients
- Burnett County Family Resource Center staff and clients
- Burnett County senior centers
- Grantsburg Chamber of Commerce Members
- Grantsburg Laundromats
- Grantsburg, Siren, and Webster School District staff
- Meals on Wheels clients
- Ruby's Food Pantry clients
- Siren Chamber of Commerce Members

- Siren Shell Lake Clinic clients

- St. Croix Regional Medical Center Ingalls Clinic clients
- WIC Clinic clients

The survey instrument was designed to develop an understanding of respondents' perception of the most significant health needs among Burnett County residents and their perception of solutions to the aforementioned health needs. The two questions in the survey instrument asked respondents to identify (1) the three biggest health problems, and (2) the two best ways to improve health in Burnett County among a list of options.

For question one, results for the top three most frequently chosen health problems were as follows:

Answer Options	Response Percent	Response Count
Alcohol and Drug Use (such as alcohol & drug related injuries/death, binge drinking, youth alcohol/drug use, drunk driving)	84.0%	420
Chronic Disease (such as diabetes, heart disease, cancers, stroke, asthma, and emphysema)	29.6%	148
Infectious Disease (such as influenza, tuberculosis, Lyme disease, whooping cough, food-borne illnesses, sexually transmitted diseases, measles)	8.2%	41
Environmental & Occupational Health (such as safe food & drinking water, air/water/noise pollution, safe work environments)	3.6%	18
Growth and Development (such as care before, during, and after pregnancy, including breastfeeding; achieving appropriate childhood developmental milestones)	9.6%	48
Injury and Violence (such as domestic abuse, youth violence, falls, car accidents, injury from recreational activities)	18.6%	93
Behavioral Health (including access to mental health professionals; conditions such as depression, anxiety, bipolar disorder, eating disorders, post-traumatic stress disorder; and suicide)	57.2%	286
Nutrition (such as access to healthy foods, having enough food, and eating fresh fruits and vegetables)	25.8%	129
Oral Health (such as having good dental health and accessing recommended dental care)	13.0%	65
Physical Activity (exercise, including walking, jogging, biking, etc.)	17.4%	87
Reproductive and Sexual Health (such as youth sexual behavior, teen births, sexually transmitted diseases, etc.)	11.6%	58
Tobacco Use (smoking, use of chewing tobacco, smoking during pregnancy, youth tobacco use)	25.4%	127
Other (please specify)	3.0%	15

As can be seen, alcohol and drug use, behavioral health, and chronic disease were the top three chosen health problems of those listed.

For question two, results were as follows:

Answer Options	Response Percent	Response Count
Holding community education/health classes (health fairs, quit smoking classes, etc.)	11.9%	59
Providing community fitness opportunities (biking, walking, ski trails, exercise classes, etc.)	16.2%	80
Working with lawmakers on policies to improve health	7.9%	39
Promoting worksite wellness	8.7%	43
Increasing access to healthy foods	19.6%	97
Increasing behavioral health awareness and services	31.4%	155
Increasing access to preventive health services	16.6%	82
Improving transportation services	11.5%	57
Decreasing poverty	40.3%	199
Providing alcohol and other drug abuse prevention and treatment services	29.6%	146
Violence prevention and victim services	8.1%	40
Health education in schools	17.2%	85
Parent education	17.8%	88
Other (please specify)	5.7%	28

Decreasing poverty, increasing behavioral health awareness and services, and providing alcohol and drug use prevention were shown to be the top three ideas for solving Burnett County's health needs.

## Community Partners

### i. CHNA Core Partners

Jodi Reed, Burnett County Health Officer and Public Health Supervisor

Sarah Miller, Burnett County WIC Director and Public Health Nutritionist

Gordy Lewis, Burnett Medical Center, CEO

Brittany Fry, Burnett County DHHS Public Health Specialist

### ii. Organizations Represented at Community Health Meeting

Aging and Disability Resource Center

Aurora

Burnett County Board of Supervisors

Burnett County Department of Health and Human Services

Burnett County Department of Health and Human Services—Public Health

Burnett County Sheriff

Burnett Medical Center

Community Care Connections of Wisconsin

Community Referral Agency

Family Resource Center

Grantsburg School District

Indianhead Community Action Agency

Lakeside Community Lutheran Church  
 Lean on Me Homecare  
 MTM  
 Polk County and W3TFL  
 Restorative Justice  
 Ruby's Pantry  
 Salvation Army  
 Siren School District  
 St. Croix Chippewa Housing Authority  
 St. Croix Hospice

St. Croix Regional Medical Center  
 St. Croix Tribal Center  
 St. Croix Tribal Health Clinic  
 U of M Nursing  
 UWEC Students and Advisor  
 UW Extension  
 Webster School District  
 Western Regional Office  
 Wisconsin Department of Health Services

### Existing Resources Available to Address Needs

Health Need Addressed	Organization Name/Measure	Description of Organization/Measure
<b>Alcohol and Drug Use</b>	Burnett County Adolescent AODA Prevention Coalition	Established in 2008 to address the issue of substance abuse among our youth. Working to increase community awareness of issues related to underage drinking and driving in Burnett County.
<b>Alcohol and Drug Use</b>	Drug and Alcohol Court	Mission is to reduce substance abuse and criminal behavior in order to improve the lives for offenders, families, and the community by providing intensive court supervision, drug testing, and substance abuse treatment.
<b>Alcohol and Drug Use</b>	Intoxicated Driver Intervention Program	Clients are given the opportunity to change their behavior, while gaining education related to impaired driving. Designed for clients with two or more OWI offenses. Overall goal is to reduce the likelihood of future offenses and to provide clients with an increased awareness of impaired driving.
<b>Alcohol and Drug Use</b>	Restorative Justice	A community-based response to crime that invites those affected, the victim, the community, and the offender to address the full impact of the crime and ways to repair them.
<b>Communicable Diseases</b>	Local pharmacies, including Yellow River Pharmacy, Olsen and Son Drug, and Wood River Pharmacy	Provide access to influenza vaccinations
<b>Communicable Diseases</b>	Local health clinics, including Burnett Medical Center, Ingalls, Siren Shell Lake Clinic, and St. Croix Tribal Health Clinic	Provide access to influenza vaccinations
<b>Communicable Disease</b>	School Disease Surveillance System	School district staff communicate to Public Health Officer the number of ill children and their ailments each week in order to monitor types of infection present within the community and to identify potential outbreaks of disease.
<b>Environmental and Occupational Health</b>	Burnett Medical Center Rehabilitation Department	Provide pre employment screens to area businesses which include physical performance testing and education on safe lifting techniques and proper body mechanics. Also provide onsite occupational health services for local businesses.

<b>Environmental and Occupational Health</b>	Burnett County DHHS	Have free radon and well water testing kits available to public.
<b>Healthy Growth and Development</b>	Early Childhood Interagency Council	Community partners work with early childhood families to collaborate and educate about resources and services available
<b>Healthy Growth and Development</b>	Burnett County Department of Health and Human Services	<ul style="list-style-type: none"> <li>• Birth to 3 Program serves families who have children with disabilities or developmental delays. Services are provided in the family's home by Social Workers, Special Education Teachers, Occupational Therapists, Physical Therapists, Speech Therapists, and/or Public Health Nurses.</li> <li>• Children's Waiver and Family Support provides support and services to children with severe disabilities.</li> <li>• Children and Youth with Special Health Care Needs offers support and resources by a Public Health Nurse for families who have a child with special needs.</li> </ul>
<b>Healthy Growth and Development</b>	Family Resource Center	<ul style="list-style-type: none"> <li>• Educational programs, resources, activities and support for families.</li> <li>• Home visitor program provides education and support by lay visitors for eligible families who are pregnant or who have newborn babies.</li> </ul>
<b>Healthy Growth and Development</b>	Prenatal Care Coordination Program (PNCC)	Nurses and Dieticians at Burnett County and St. Croix Tribal Health provide case management, education and support throughout pregnancy and early post-partum to promote a healthy pregnancy, baby, and families.
<b>Healthy Growth and Development</b>	Women, Infant, and Children (WIC)	Nutrition and diet assessment, along with height, weight, hemoglobin, lead, and brief developmental screenings offered through Burnett County and St. Croix Tribal Clinic.
<b>Healthy Growth and Development</b>	Headstart	Federally funded preschool program serving low-income families and children 3-5 years old. Prepares children for public school by promoting the development of social, emotional and academic skills; offered at Mina Copeland and St. Croix Tribe.
<b>Healthy Growth and Development</b>	Preschool	An education program offered at Bethany Lutheran Church and Grace Baptist Church.
<b>Healthy Growth and Development</b>	School Districts	<ul style="list-style-type: none"> <li>• Early Childhood Special Education is free education services for children 3-6 years old who qualify due to a developmental delay; offered in all school districts.</li> <li>• 4-Year-Old Kindergarten (4-K) is a free preschool program for children who turn 4 years old by September 1<sup>st</sup>. A play-based, developmentally appropriate curriculum that introduces learning in a fun and safe environment.</li> <li>• Hearing and vision screenings for students provided by school nurses and nursing students from Technical Colleges.</li> </ul>
<b>Healthy Growth and Development</b>	Well-Child Checks	Healthcare providers at local clinics perform complete physical exams to identify problems in growth and development.
<b>Injury and Violence Prevention</b>	Community Referral Agency	A Domestic Abuse Project serving Polk and Burnett Counties, with a branch office in Siren and the main office and shelter in Milltown. The shelter provides emergency housing for people who have experienced physical, sexual, and/or emotional abuse. They also provide 24 Hour Crisis Response. Support groups, community outreach and prevention education are also

		provided.
<b>Injury and Violence Prevention</b>	Highway Safety Committee	Interested partners assess causes of traffic and highway-related injuries, and then collaborate to prevent future injuries through activities such as public education, enforcement of current laws, and collaboration with partners to decrease known hazards.
<b>Oral Health</b>	Rural Dental Health in Schools	Provide cleaning, fluoride varnish and sealants at the elementary schools in all three school districts.
<b>Oral Health</b>	Local dental clinics, including Kaefer Family Dentistry in Grantsburg and Webster and Siren Dental Clinic	Provide dental services to area users.
<b>Oral Health</b>	Fluoride rinse	Offered weekly for students at Webster (K-4) and Grantsburg (K-6)
<b>Physical Activity</b>	Local fitness clubs, including Anytime Fitness in Danbury and Siren, Grantsburg 24 Hour Fitness, and Curves for Women in Webster.	In addition to the availability of exercise equipment, they also provide exercise classes and other fitness programs.
<b>Reproductive and Sexual Health</b>	Family Planning Only Services	Discounted access to birth control, STD testing, pregnancy testing, the “morning after pill”, tubal ligations and vasectomies.
<b>Reproductive and Sexual Health</b>	Reproductive Health Education in Schools	Teachers, School Nurses, Burnett Medical Center providers and Public Health Nurses provide education about reproductive and sexual health to students in all districts.
<b>Tobacco Use and Exposure</b>	Wisconsin WINS Program	Designed to decrease youth access to tobacco products through local initiatives including retailer education and training, compliance checks, media outreach, and community education.
<b>Tobacco Use and Exposure</b>	First Breath	Program coordinated by the Wisconsin Women’s Health Foundation that helps pregnant women in Wisconsin quit smoking. Tobacco cessation strategies are integrated into existing Prenatal Care Coordination Services at the Local Health Department.
<b>Tobacco Use and Exposure</b>	The Wisconsin Tobacco Quit Line, 1-800-QUIT-Now	Offers a single access point to tobacco addiction treatment.
<b>Tobacco Use and Exposure</b>	Western Wisconsin Working for Tobacco-Free Living (W3TFL)	Multi-Jurisdiction Coalition that includes Burnett, Pierce, Polk, Rusk, and St. Croix Counties. The mission is to prevent, reduce exposure to, and eliminate the use of tobacco products through policy work, education, and informational/service efforts.
<b>Behavioral Health</b>	24 Hour Behavioral Health Crisis & Hotline Number	Number for people to call with behavioral health issues
<b>Behavioral Health</b>	Aurora Counseling	Provides individual therapy for youth and adults. Behavioral health and substance abuse therapy.
<b>Behavioral Health</b>	Families First Counseling	Provides individual, child, couple, and family counseling, including in-home family therapy
<b>Behavioral Health</b>	St. Croix Tribal Counseling	Provides AODA and Behavioral Health outpatient therapy
<b>Behavioral Health</b>	Travis Hinze, PhD – Psychology Services at Burnett Medical Center	Provides psychological and neuropsychological evaluations and individual psychotherapy. Also provides ADD/ADHD, memory, IQ, personality, learning problems, depression, anxiety, bariatric surgery evaluations, and others. Serves children age 5 and up and adults.
<b>Behavioral Health</b>	Burnett County Department of Health and Human Services	Information and referral to outpatient behavioral health, AODA and psychiatry counseling services. Sliding-fee payment options available.
<b>Behavioral Health</b>	Behavioral Health Task Force	Increases awareness of behavioral health concerns, specifically suicide, including developing a Suicide

		Task Force through mentorship from the Behavioral Health Task Force of Polk County.
<b>Behavioral Health</b>	St. Croix Regional Medical Center	Provides assessment, intervention, evaluation, and treatment services for children, adolescents and adults. Psychological testing, referral services, clinical diagnostic services, and individual and group therapy are also available. Psychiatry services available.
<b>Behavioral Health</b>	Northwest Journey, Siren	A community based treatment option that offers comprehensive services aimed at creating family stability and individual success. Behavioral Health Day Treatment Program for Youth.
<b>Behavioral Health</b>	Northwest Passage, Frederic, WI	<ul style="list-style-type: none"> <li>• Child &amp; Adolescent Center-comprehensive 30 day clinical behavioral and behavioral health assessment program for clients 6-17 years of age.</li> <li>• Passage I-comprehensive treatment program for adolescent males 12-17 years of age who are experiencing significant emotional and behavioral needs.</li> <li>• Passage II-Short-term, challenge-based residential behavioral health treatment program for males 12-17 years of age.</li> <li>• Passage III-intensive residential services for adolescent females 12-17 years of age who are experiencing significant emotional and behavioral needs.</li> </ul>
<b>Behavioral Health</b>	On-call Crisis Oversight Committee	Representatives from area schools, Law Enforcement, Behavioral Health Counseling facilities, Crisis line staff, and Medical providers, amongst others, meet quarterly to review community needs, recent trends in crisis contacts, and how best to adjust to those trends. Frequent review of cases and updates for all providers involved in behavioral health crisis. Review of Emergency Detention protocol and resources available in the community.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Nutrition Coalition	Community members collaborate to promote adequate and appropriate nutrition and regular physical activity to prevent hunger, obesity, and chronic disease in Burnett County.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Women, Infants and Children (WIC)	Supplemental foods, nutrition education and health screening program for income eligible pregnant, post-partum, and breastfeeding women, infants, and children up to age 5; offered at Burnett County and St. Croix Tribe. This includes vouchers to use at local Farmer's Markets.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Certified Lactation Counselors and Educators for both WIC programs in county, Burnett Medical Center and St. Croix Regional Medical Center	Help educate and support breastfeeding women, including access to breast pumps.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Breastfeeding Group	Regional Dieticians and Lactation Consultants meet to share best practice ideas.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Breastfeeding Peer Counselor Program	Provides support and education for WIC breast feeding mothers; offered at Burnett County and St. Croix Tribe.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Senior Dining Sites (6 sites) and Home Delivered Meals	Meals available for people age 60 and older.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Farmer's Markets	Provide fresh produce and other goods at Siren, Grantsburg, Alpha, and Hertel locations.



<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Local food shelves, including Ruby's Pantry, Connections, Grantsburg Area Food Shelf, and A & H Crescent Lake Outreach	Food provided at low cost or for free to those in need.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Master Gardener Club	Master Gardeners are trained volunteers who aid UW-Extension staff by helping the community better understand horticulture and their environment. They can provide education and support with many different growing/gardening projects in the county.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	UW Extension Nutrition Program	Food, basic nutrition and food safety education from a nutrition educator for students at schools with $\geq 50\%$ free/reduced school lunches. Currently schools in all Burnett County school districts are included; also for the WIC Program participants, food shelf participants, and other programs or services where the majority of participants are FoodShare participants or of low income.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Registered Dieticians at Burnett Medical Center, Ingall's Clinic-St. Croix Regional Medical Center, St. Croix Tribal Clinic, the Aging & Disability Resource Center, and Burnett County DHHS-Public Health.	Provide nutrition consultation and other related services to area users.
<b>Chronic Disease Prevention and Management</b>	Burnett Medical Center	Offers direct access testing for the identification and monitoring of chronic diseases. In addition, BMC sponsors community education outreach.
<b>Chronic Disease Prevention and Management</b>	Wisconsin Well Woman Program	Provides breast and cervical cancer screenings to women in Burnett County with little or no health insurance coverage (Burnett County and St. Croix Tribal).

# Implementation Strategy

This document provides a summary of Burnett Medical Center's plan to address the significant health needs among Burnett County residents identified through the FY 2016 Community Health Needs Assessment conducted by Burnett Medical Center, in collaboration with Burnett County DHHS-Public Health and the St. Croix Tribal Health Clinic.

## Strategy and Plan Development

The significant health needs were determined through an assessment process that began in the spring of 2015. Using the State of Wisconsin health plan—Healthiest Wisconsin 2020—as a framework, quantitative and qualitative data collection methods were employed to assess the health needs of Burnett Medical Center's service area. Quantitative data was collected to examine the health of the community with regards to the 12 health focus areas from Healthiest Wisconsin 2020, as well as socioeconomic indicators intended to shed light on Burnett County's status with respect to access to care. Qualitative data was gathered from community members and agencies to develop an understanding of community perceptions of the service area's health needs. This data was gathered through (1) an internet-based survey and paper survey of approximately 500 individuals, (2) focus groups, and (3) key informant interview.

After completion of the assessment, CHNA partners facilitated a Community Health Meeting in which representatives of other healthcare providers, community groups, and local non-profit organizations that have an interest and expertise in the health of Burnett County residents were invited to offer input and help prioritize Burnett County's health needs. Results of the assessment process were presented, the needs discussed and prioritized, and input provided to help in the identification of possible goals and interventions to address the prioritized health needs.

In prioritizing the health needs, attendees voted on three of the 12 health focus areas from the Healthiest Wisconsin 2020 framework. When voting, participants were asked to evaluate each health focus area in light of the assessment results presented and against the following five criteria:

1. Viable strategies exist to impact the need
2. Resources are available to impact the need
3. There is a high importance placed by the community on addressing the need (i.e. considering qualitative assessment results)
4. The need has an extensive impact on population health, both in the number of individuals affected and in the degree to which it influences health outcomes
5. The need is not adequately being served by current resources and organizations in the community

Out of the voting process, the following top three health focus areas were selected:

1. Alcohol and other drug abuse
2. Behavioral health
3. Tobacco use and exposure

While the above criteria were used by community partners to prioritize the health focus areas, hospital leaders evaluated the 12 health focus areas against an additional criterion: the hospital's ability to address the need based on the hospital's expertise and resources. Out of this process, chronic disease prevention and management, most notably prevention and management of diabetes, was also identified as a significant health need. Although not one of the 12 health focus areas, access to care, which is an area of focus in the state health plan and an indicator of health status, was also identified as a significant need.

## Approach to addressing health needs

In addressing the identified needs, Burnett Medical Center considered existing programs and resources targeted to meet these specific needs and explored other opportunities to impact the needs, both through collaboration with other community groups and by deploying additional Burnett Medical Center resources. As one means to encourage this collaboration, Burnett Medical Center formed “Healthy Burnett” in partnership with Burnett County Department of Health and Human Services—Public Health. Healthy Burnett creates an infrastructure for continual health improvement by bringing together key community stakeholders to align activities and resources to enhance how the community addresses identified health needs.

To address the identified needs, programming and resources outlined in the below Implementation Strategy will be deployed to meet the following objectives:

1. Improve identification of those at risk of behavioral illness
  2. Increase awareness of behavioral health services
  3. Promote adequate and appropriate nutrition and regular physical activity to prevent and reduce obesity and chronic disease
  4. Increase access to preventative and chronic disease management education and services
- i. Alcohol and Other Drug Abuse
    - a. Objective #1: Improve access to counseling
      - i. Implementation Activities:
        1. Burnett Medical Center will keep an updated list of AODA counseling services, including NA/AA groups.
        2. Through Healthy Burnett, Burnett Medical Center will collaborate with AODA stakeholders to identify avenues of increased services.
      - ii. Anticipated Impact:
        1. It is anticipated that these activities will assist the community in early referral and potential treatment for AODA associated behaviors.
    - b. Objective #2: Decrease the incidents of perinatal drug use and its impact on newborns
      - i. Implementation Activities:
        1. Burnett Medical Center will screen all women of child bearing age for alcohol and other drug use and appropriately counsel on the importance of abstinence. Referrals will be made as appropriate.
        2. Burnett Medical Center will actively participate in the Perinatal Illicit Drug Use Task Force which reports to Healthy Burnett.
      - ii. Anticipated Impact:
        1. It is anticipated that these activities will assist in early identification and counseling and/or treatment concerning perinatal drug use and potentially decrease the incidence of adverse outcomes for newborns.
    - c. Objective #3: Education and promotion of current resources
      - i. Implementation Activities:
        1. Burnett Medical Center will provide educational resources targeted to this issue on our website and Facebook page.
        2. Burnett Medical Center will host educational events, such as a mock bedroom demonstration where participants try to find drugs and drug paraphernalia that are hiding in plain sight. An event like this educates and provides adults with awareness about alcohol and other drug abuse.

- ii. Anticipated Impact:
          - 1. It is anticipated that these activities will provide resources to community members on the risks of alcohol and other drug use, as well as methods of identification of AODA behaviors.
    - ii. Behavioral Health
      - a. Objective #1: Improve access to behavioral health services
        - i. Implementation Activities:
          - 1. Burnett Medical Center will begin offering Adult Psychiatric services via telemedicine.
          - 2. Research viability of adding Pediatric/Adolescent Psychiatry services via telemedicine.
        - ii. Anticipated Impact:
          - 1. It is anticipated that the addition of these services at Burnett Medical Center will assist in reducing wait times for psychiatric services and provide timelier treatment.
      - b. Objective #2: Increase awareness of behavioral health services
        - i. Implementation Activities:
          - 1. Burnett Medical Center will have the “Behavioral Health Providers” brochures available in all areas of the facility for patients and providers to reference.
          - 2. Burnett Medical Center will support activities identified through Healthy Burnett that are designed to increase awareness of behavioral health issues and services.
        - ii. Anticipated Impact:
          - 1. It is anticipated that these activities will assist in early appropriate referral of patients to behavioral health services as well as provide education and awareness of this issue in the community.
  - iii. Tobacco Use and Exposure
    - a. Objective #1: Educate patients on the importance of tobacco abstinence/cessation
      - i. Implementation Activities:
        - 1. Burnett Medical Center providers will offer cessation counseling to all patients identified as current tobacco users including information for the Wisconsin Tobacco Quit Line.
        - 2. Burnett Medical Center providers will educate adolescents on the importance of tobacco abstinence at an age appropriate level.
      - ii. Anticipated Impact:
        - 1. It is anticipated that these activities will assist in decreasing tobacco use among our patient population.

**Anticipated Impact:**

It is anticipated that programs put on by Burnett Medical Center will increase access to and education about preventative health services and healthy behaviors for diabetic, low-income, and medically underserved populations, in particular. With respect to Burnett Medical Center’s support of Citizens Against Poverty’s transportation initiatives, it is anticipated that access to transportation will increase for Burnett County residents.

**Plan to Evaluate Impact:**

In order to evaluate the anticipated impact of these activities on the identified health needs, means of tracking the effectiveness of these activities will be established. For instance, approximate participation

and utilization numbers will be recorded for programs and services in order to gauge program and service effectiveness. Although not immediately evident, it is the intent that increased utilization of services and programs directed at addressing identified health needs will result in improved health outcomes. Based upon evaluation results, appropriate actions will be taken and incorporated into Burnett Medical Center's next Community Health Needs Assessment and Strategic Planning Process.

### Needs Not Addressed

Of the 12 health focus areas outlined in Healthiest Wisconsin 2020, Burnett Medical Center chose not to address several of them. Described in the table below, certain needs will not be addressed due to either lack of hospital resources or expertise, the need being of relatively low priority, and/or the need being currently addressed by others.

Community Need	Reasons Needs Not Addressed
<b>Alcohol and Drug Use</b> <i>(Included in our Implementation Strategy)</i>	Hospital lacks resources and expertise and need is currently addressed by Burnett County Adolescent AODA Prevention Coalition, Drug and Alcohol Court, Intoxicated Driver Intervention Program, and Restorative Justice.
<b>Communicable Diseases</b>	Need is of low priority and is currently addressed by Burnett County Health Department, community healthcare providers, and local pharmacies.
<b>Environmental and Occupational Health</b>	Need is of low priority and is currently addressed by Burnett County Health Department, local businesses, Burnett Medical Center Rehabilitation Department, and local clinics.
<b>Healthy Growth and Development</b>	Need is of low priority and is currently addressed by Early Childhood Interagency Council, Family Resource Center, Prenatal Care Coordination Program, local school districts, and local healthcare providers.
<b>Injury and Violence Prevention</b>	Need is of low priority and is currently addressed by Community Referral Agency, Highway Safety Committee, and county and city police departments.
<b>Oral Health</b>	Hospital lacks resources and need is currently addressed by Rural Dental Health in Schools, dental clinics, and fluoride in schools.
<b>Physical Activity</b>	Need also addressed by Burnett County Nutrition and Physical Activity Coalition, local school districts, local health clubs, local organizations that host fitness-related events.
<b>Reproductive and Sexual Health</b>	Need is of low priority and is currently addressed by Burnett County Health Department, local clinics, Burnett Medical Center, local school districts, and Family Planning Only Services.
<b>Tobacco Use and Exposure</b> <i>(Included in our Implementation Strategy)</i>	Need is currently addressed by Burnett County Health Department, Western Wisconsin Working for Tobacco-Free Living, Wisconsin Tobacco Quit Line, First Breath, Wisconsin WINS Program, and local healthcare providers.
<b>Behavioral Health</b> <i>(Included in our Implementation Strategy)</i>	Need also addressed by Clinical Psychologist at Burnett Medical Center, Northwest Journey and Northwest Passage, Burnett County Health Department, Counseling services at Aurora Community Counseling, Families First, St. Croix Tribal Health Clinic, and On-Call Crisis Oversight Committee.
<b>Adequate, Appropriate and Safe Food and Nutrition</b>	Need also addressed by Burnett County Nutrition and Physical Activity Coalition, Women, Infants and Children (WIC), UW Extension Nutrition Program, Feed My Sheep, Food Shelves, Schools/Headstarts, Senior Dining Sites, Farmer's Markets.
<b>Chronic Disease Prevention and Management</b>	Need also addressed by: Healthcare providers at clinics, Wisconsin Well Woman Program, Aging and Disability Resource Center (ADRC) preventative health outreach activities and events provided by Burnett Medical Center.

## Committed Resources

As determined through integration into Burnett Medical Center's annual budgeting and Strategic Planning processes, Burnett Medical Center will appropriate staff personnel and financial resources as necessary to execute the planned programs and activities outlined in the Implementation Strategy.

## Approval

This report was prepared in response to the tri-annual requirement as established by the Affordable Care Act, and for review by the Burnett Medical Center Board of Directors. As this is a living document, it is subject to periodic review and revision.

Please know that our full intent, as faithful stewards of those resources entrusted to us, is to ensure that Burnett Medical Center continues to strategically focus limited resources on the most significant health needs identified through the FY 2016 Community Health Needs Assessment.

While the Board of Directors approves this most recent Community Health Needs Assessment Report and the Implementation Strategy articulated (beginning on page 37, herein) readers and recipients are encouraged to share their thoughts and feedback.

Burnett Medical Center Board of Director's Approval:

/s/ Pat Taylor

President, Burnett Medical Center Board of Directors

9/27/16

Date

/s/ Gordon A. Lewis

Chief Executive Officer, Burnett Medical Center

9/27/16

Date

