

2016

Polk County Community Health Needs Assessment



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Message from the Community Services Division Director

I am pleased to present the 2015 Polk County Community Health Needs Assessment (CHNA). The health of our population is crucial to the well-being of our community. Healthy people lead more productive lives, contribute more to society and keep our economy strong. Prevention of chronic disease such as diabetes, heart disease and cancer not only assures a strong quality of life, but also results in a decreased economic burden on our health care system. This report gives a snapshot of the current health status of Polk County citizens.



Many community members and key stakeholders participated in the CHNA community forums and examined current data relevant to the health of Polk County citizens. They ultimately selected four priority focus areas that could benefit from a coordinated and collaborative community planning effort. A Community Health Improvement Plan (CHIP) is being developed as a companion to the CHNA and will detail goals, objectives and action plans for each of the four health focus areas.

Sincere appreciation is extended to Amery Hospital and Clinic, Osceola Medical Center and St. Croix Regional Medical Center for ongoing participation and fiscal support during the CHNA process. Additional thanks goes to Elizabeth Hagen and Mary Boe, Health Department health educators, for coordinating the entire CHNA process and community activities with our staff and partners.

For online access to the Polk County CHNA and CHIP, please take a minute to visit www.healthypolkcounty.com. We hope to keep this website updated with progress on Polk County's 2016 Community Health Improvement Plan.

Warm Regards and Sincere Wishes for Good Health,

A handwritten signature in cursive script that reads "Gretchen Sampson".

Gretchen Sampson RN MPH

Community Services Division Director

Polk County

ACKNOWLEDGEMENTS

The 2016 Polk County Community Health Needs Assessment (CHNA) represents the collaborative effort of the following four key partners, who provided direction and leadership to the CHNA, assured compilation and shared data and engaged residents of Polk County through a series of forums and surveys:

Polk County Health Department (PCHD)

Amery Hospital and Clinic (AHC)

Osceola Medical Center (OMC)

St. Croix Regional Medical Center (SCRMC)

The collaborative team acknowledges and extends sincere appreciation to the following community partners for their contributions to the Polk County CHNA process.

650 + Community Members	Bob Wolf, OMC
Bonnie Leonard, PCHD	Gretchen Sampson, PCHD
Charlotte Gillen, Amery Congregational Church	Rev. Barry Shafer, Amery Congregational Church
Corby Stark, Polk County Behavior Health	Rick Gates, Polk County Veteran's Affairs
Dan Steffen, Polk County District Attorney	Julie Neumann, St. Croix Falls School District
Deanna Nelson, SCRMC	Megan Doble, SCRMC
Elizabeth Hagen, PCHD	Deb Rudquist, AHC
Jaime Weness, Polk County Department of Children and Families	Lynn Engelbrecht, Salvation Army
Jennifer Baldini, PCHD	Kathy Weeks, SCRMC
Kristi Durand, SCRMC	Carrie Myers, ADRC
Pat Schmidt, Polk County Board of Health	Tim Ritten, Polk County Land and Water Department
Patty Draxler, Family Resource Center, St. Croix Valley	Tony Gould, AHC
Sally Bajak, SCRMC	Sue Gerlach, Osceola Community Health Foundation
Tom Brock, Mental Health Task Force of Polk County	Katy Ellefson, AHC
William Johnson, Polk County Board Chairman	Bill Alleva, Polk County Board of Health & Human Services
Mary Boe, PCHD	

PROCESS

The Polk County Health Department, in collaboration with Amery Hospital and Clinic, Osceola Medical Center and St. Croix Regional Medical Center, began the process of conducting a new Community Health Needs Assessment in mid-2015. The ultimate goal of an assessment is to identify priority health issues to be used as a guide to develop strategies to impact and improve the overall health of the community. This effort included a comprehensive review of health and lifestyle data from primary and secondary data sources including a community survey.

This assessment was developed as a tool to help identify and prioritize areas for collaborative action toward positive change.

The community survey was administered at all of the local medical centers and at the Health Department, the Polk County Fair, as well as advertised with a published web link in the local newspapers. The web link was posted on all four of the partner organization's websites, a total of 650 surveys were completed by county residents. The comprehensive data review, in combination with the community survey results culminated in the identification of the top 5 health focus areas for Polk County. The top 5 health focus areas identified were:

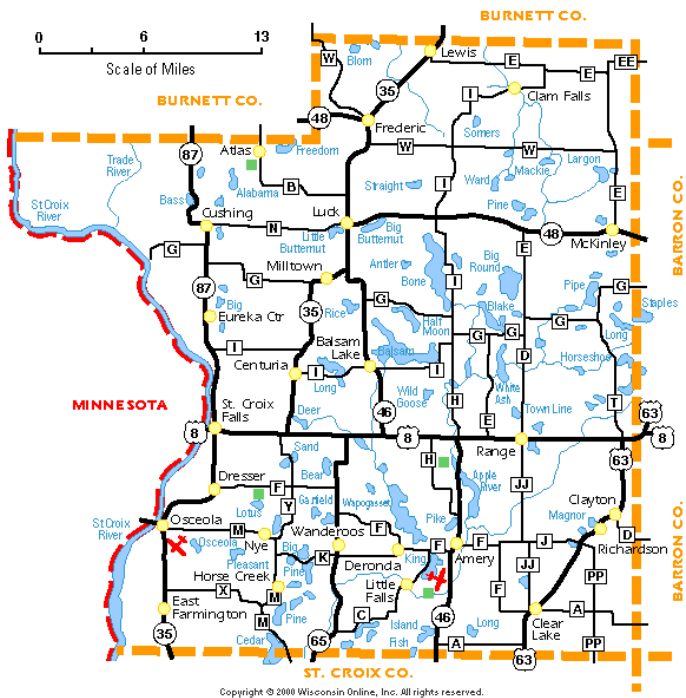
- Unhealthy Alcohol Use
- Mental Health
- Obesity
- Access to Care
- Drug Use

Four community forums were sponsored in Balsam Lake, St. Croix Falls, Amery and Osceola. The community members in attendance offered input and suggestions on the health focus areas. In addition, a partner meeting was held in April targeting key organizations and stakeholders as well as local health-related coalition representatives. At each of these venues, attendees had the opportunity to provide input on the top health focus areas.

The final top health focus areas selected by participants in the CHNA process were:

1. Mental Health
2. Substance Abuse
3. Access to Care
4. Obesity

See Appendix A, on page 29, for a complete description of methods used.



COUNTY DEMOGRAPHIC PROFILE

- Polk County is located in scenic northwestern Wisconsin, about 50 miles northeast of St. Paul, Minnesota. The total population of Polk County is 44,205. The county has 48 persons per square mile, a density which ranks 37th out of the 72 counties in the state. The ethnic make-up is 96.4% white. The county seat, Balsam Lake, is populated by 1,009 persons. According to the U.S. Census Bureau, the county has a total area of 956 square miles; of that, 917 square miles is land and 39 square miles or 4.08% is water.

- From 2000 to 2010, the overall population of Polk County grew 7% to 44,205, a rate of increase slightly higher than the 6% increase

observed statewide. All of the growth was among adults 45 years and older. The percentage of adults 65 years and older is somewhat higher in Polk County (15%) than it is statewide (13%). Among children (0-17) and adults (18-44), the population declined 3% and 7%, respectively.

Assessment findings suggest that when compared to the overall state population, the population of Polk County is somewhat older, considerably less diverse and far more rural.

Polk County Population by Age

Age Group	Total	Percent
0-4	2,410	5.52%
5-17	7,498	17.16%
18-24	2,937	6.72%
25-34	4,561	10.44%
35-44	5,241	11.99%
45-54	6,993	16%
55-64	6,536	14.96%
65+	7,522	17.21%

Source: US. Census Bureau, American Community Survey. 2010-2014.

- Given this pattern, it's not surprising that almost all of the growth is due to migration into the county, as opposed to a natural increase from a rising birthrate. The overall population size is projected to increase steadily to almost 53,000 in 2020.

- Polk County is considerably more rural than the state of Wisconsin. In Polk County, 85% of the population resides in a rural area, compared to 30% of the overall state population.
- The population of Polk County is also considerably whiter than the state (96% compared to 87%). Hispanic/Latino residents comprise the second largest racial/ethnic group in Polk County (1.6%), which is still considerably lower than the population of Hispanic/Latino residents statewide (6.2%).
- Less than one percent of the Polk County population lacks proficiency in English, compared to 3% of the state population.

Race/Ethnicity in Polk County and Wisconsin

Racial/Ethnic Group	Polk County	Wisconsin
White, non-Hispanic/Latino	96.4%	86.73%
Black	0.37%	6.25%
American Indian and Alaskan Native	0.93%	0.87%
Asian	0.51%	2.4%
Persons reporting two or more races	1.05%	2.11%
Hispanic/Latino	1.62%	6.21%

Source: US. Census Bureau, American Community Survey. 2010-2014.

Income and Poverty in Polk County

- Median household income (in 2014 dollars), 2010-2014 \$49,679
- Per capita income in past 12 months (in 2014 dollars), 2010-2014 \$26,356
- Persons in poverty, percent 11.2%

Source: US. Census Bureau, American Community Survey. 2010-2014.

FACTORS THAT INFLUENCE COMMUNITY HEALTH

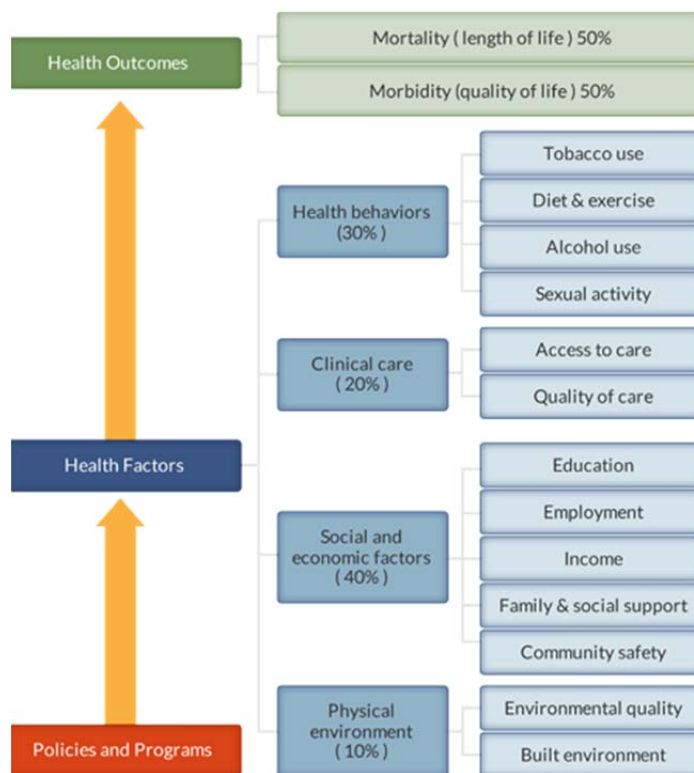
People typically think first about the leading causes of death, illness or injury when considering the health of the community they live in. In assessing a community's health, it is also important to carefully consider the factors that lead to poor health outcomes. This approach helps people to focus on prevention strategies to identify the greatest opportunities to improve health.

Often people believe that individual health behaviors (an action taken by an individual or group of individuals to change or maintain their health status or prevent illness or injury) and quality health care are the dominant factors that shape health, but two other major influences play a very important role – the social and economic factors and the physical environment. This community health needs assessment examines all of these factors.

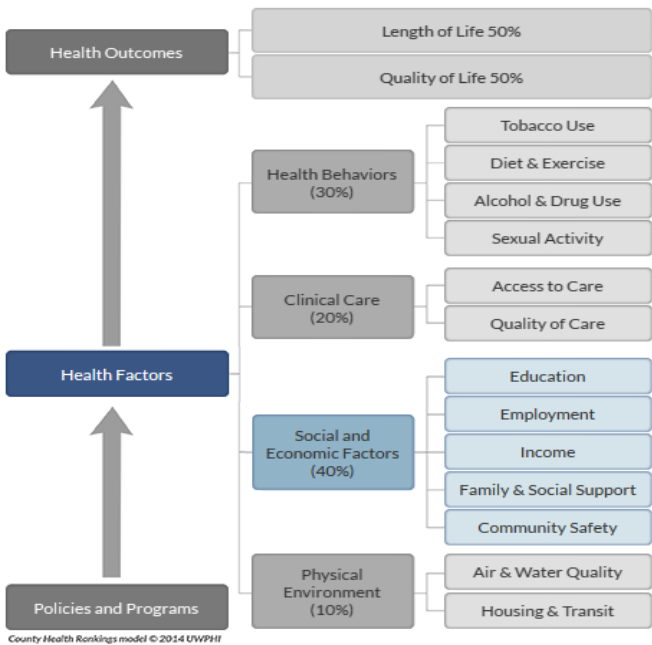
The County Health Rankings Model, shown below, was created by University of Wisconsin Population Health Institute to show the many factors that influence the health of the whole population. The factors include health behaviors, clinical care, social and economic factors and the physical environment.

In addition, the health focus areas targeted for analysis are many of those contained within Wisconsin's state health plan, Healthiest Wisconsin 2020. The Rankings model is used to frame the data section of this document and will be a key factor in subsequent work to create a community health improvement plan.

County Health Rankings Model



County Health Rankings model ©2012 UWPHI



SOCIAL AND ECONOMIC FACTORS

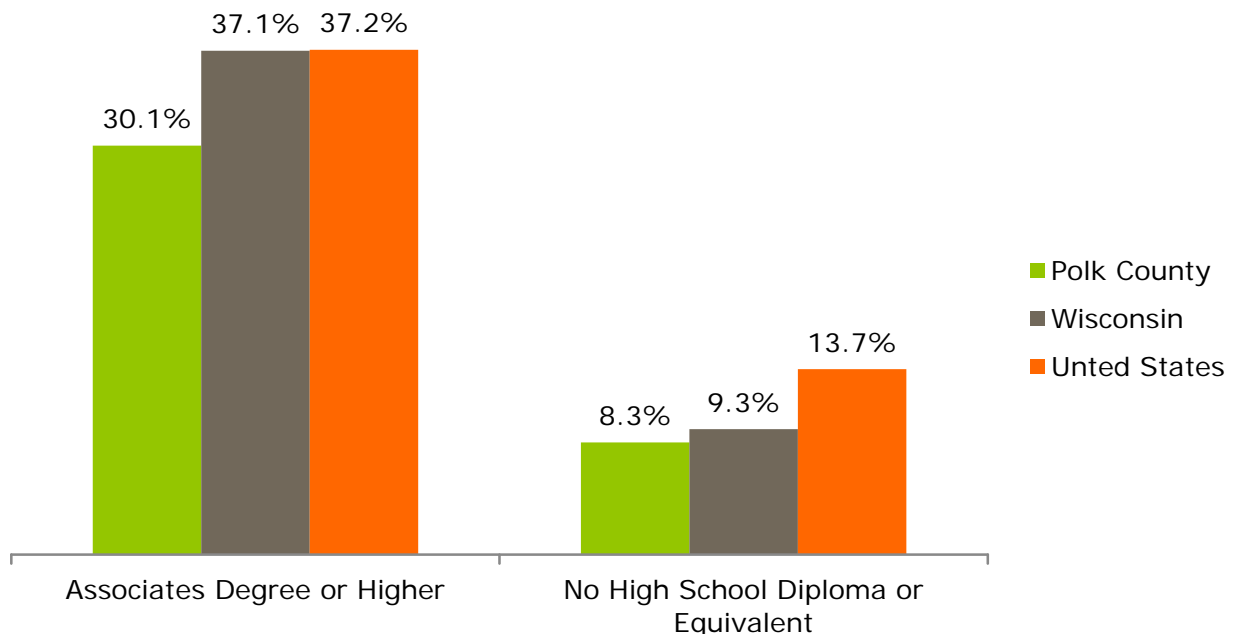
Social and economic factors consist of education, employment, income, family and social support and community safety. Forty percent of a person's health is influenced by these factors. This assessment of key social and economic factors suggests that some important aspects of the broader environment are not as favorable in Polk County as in Wisconsin as a whole. In particular, added stress from low income status and unemployment may have negative health implications for Polk County residents.

Education

The relationship between educational attainment and improved health outcomes is well known. Better educated individuals live longer, healthier lives than those with less education and their children are more likely to thrive.

Polk County residents are far more likely to have a high school degree (40%) compared to the state (35%) and nation (30%). However, Polk County residents are far less likely to have a college degree. The percentage of adult's age 25 and older with an associate's degree or higher in Polk County (30%) is lower than the percentage statewide (37%).

Educational Attainment of Population 25 Years and Over



Source: US. Census Bureau, American Community Survey. 2010-2014.

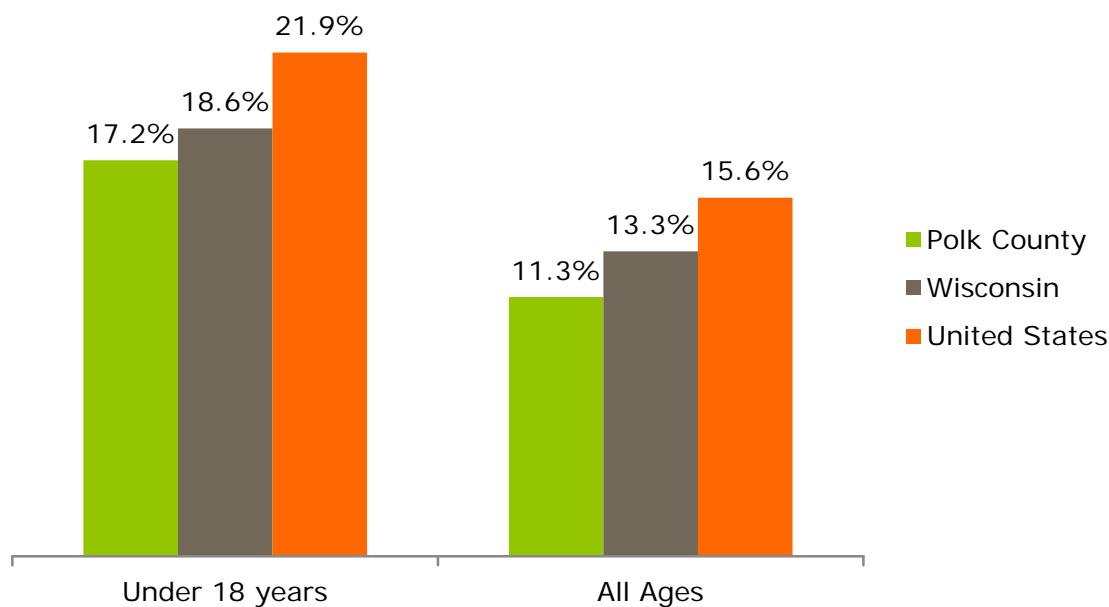
Employment and Income

Employment positively impacts health and is linked with slower declines in health status over time. Unemployment can lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet and exercise. These poor health behaviors can lead to increased risk for disease or mortality. Income and financial resources are important to good health. Individuals need adequate income so that they can obtain health insurance, pay for medical care, afford healthy food and secure safe housing and other basic goods.

- The 2011 median household income in Polk County (\$60,414) trailed the median income of the state (\$67,232) and nation (\$65,443).
- Based on the unemployment rate for January 2016, unemployment in Polk County is higher than both the state (5.2%) and the nation (5.3%) at 6.9%.
- In 2014, 11.3% Polk County residents lived below the federal poverty level. More children live under poverty than the overall population. Approximately 17% of Polk County children under 18 years of age live below the federal poverty line, compared to 18.6% statewide and 22% nationally.
- The percentage of students in Polk County who receive free or reduced school lunch varies widely, from just over 30% in Osceola to approximately 60% in Frederic. The percentage of students eligible for free or reduced school lunch is higher than the state average (42%) in four of the county's eight school districts.

Location	Data Type	2012	2013
Amery School District	Number	706	705
	Percent	43%	44%
Clayton School District	Number	192	206
	Percent	51%	53%
Clear Lake School District	Number	264	252
	Percent	43%	41%
Frederic School District	Number	274	279
	Percent	61%	61%
Luck School District	Number	212	224
	Percent	48%	52%
Osceola School District	Number	517	490
	Percent	31%	29%
Saint Croix Falls School District	Number	475	483
	Percent	43%	42%
Unity School District	Number	615	596
	Percent	59%	61%

Percent of Population Living Below Federal Poverty Level



Source: US Census Bureau, American Community Survey, 2010-2014.

Family and Social Support

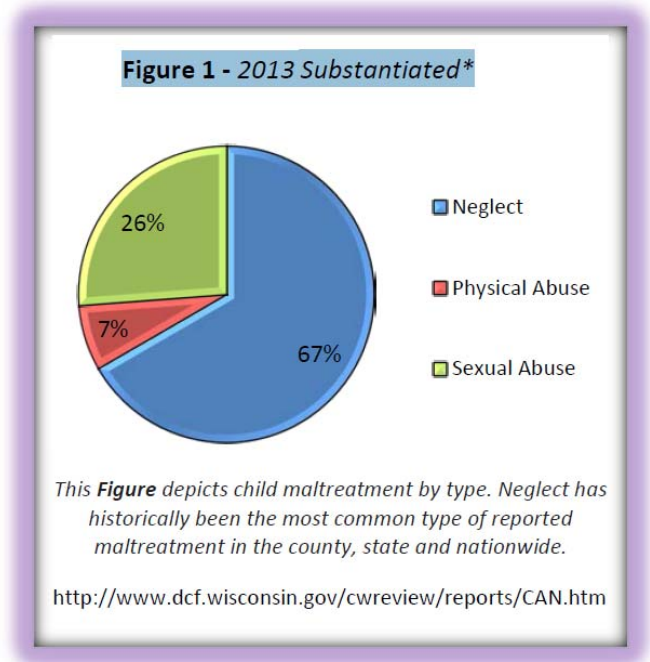
A lack of family and social support (the quality of relationships among family members and friends, as well as involvement in community life) is associated with increased illness and premature death.

- 86% of Polk County high school students reported having one or more adult besides their parents who they feel comfortable seeking help from if they had an important question affecting their life, this compares favorably with the state at 74%.
- In Polk County, 12.4% of adults lack social/emotional support (i.e., report that they 'never', 'rarely' or 'sometimes' get the support they need). This compares favorably to Wisconsin (16.1%), and the nation (20.7%).

Community Safety

The health impacts of community safety are far-reaching. They vary from the obvious impact of violence on the victim to the less obvious health impact of children not being able to play outdoors in their neighborhoods. Community safety impacts other health factors and outcomes as well, including birth weight, diet and exercise and family and social support.

- The rate of substantiated child abuse and neglect in Polk County for 2013 can be seen in the graph below. Substantiation is determined as information gathered during the Child Protection Services (CPS) Initial Assessment and provides a preponderance of evidence that the maltreatment allegation made in the CPS report or identified during a CPS Initial Assessment has occurred.



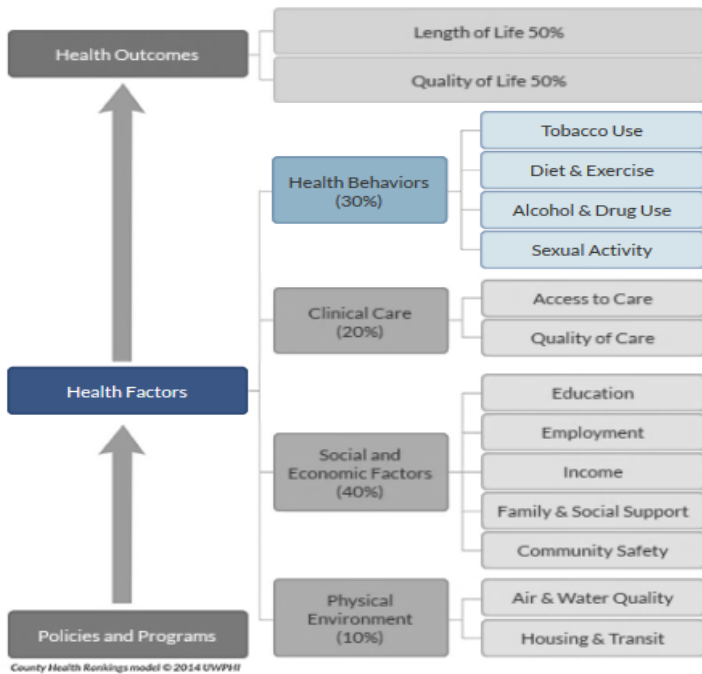
<http://www.dcf.wisconsin.gov/cwreview/reports/CAN.htm>

- Since January 1, 2014 the Polk County Sheriff's Department has handled 67 domestic battery cases and made 46 incident arrests.
- The rate of violent crime is lower in Polk County than in Wisconsin (246 offenses in Polk County compared to 262 offenses in Wisconsin per 100,000 population), though more than three times the national goal (73 per 100,000).

Crime Rates per 100,000 Population – 2014

CRIMES	2,378 POLK COUNTY	2,379 WISCONSIN TOTAL	2,962 NATIONAL TOTAL
Violent Crime	414	290	366
Murder	0	3	5
Forcible Rape	0	29	37
Robbery	0	88	102
Aggravated Assault	207	170	233
Property Crime	1,965	2,088	2,596
Burglary	414	369	543
Larceny Theft	1,344	1,548	1,837
Motor Vehicle Theft	207	172	216

Source: <http://www.homefacts.com/crime/Wisconsin/Polk-County.html>



HEALTH BEHAVIORS

The following sections of this assessment present data on health-related behaviors, along with some aspects of the environment that influence those behaviors, either positively or negatively. Health behavior also reflects a person's health beliefs. Some common health behaviors are exercising regularly, eating a balanced diet and getting the recommended amount of sleep.

Alcohol and Drug Use

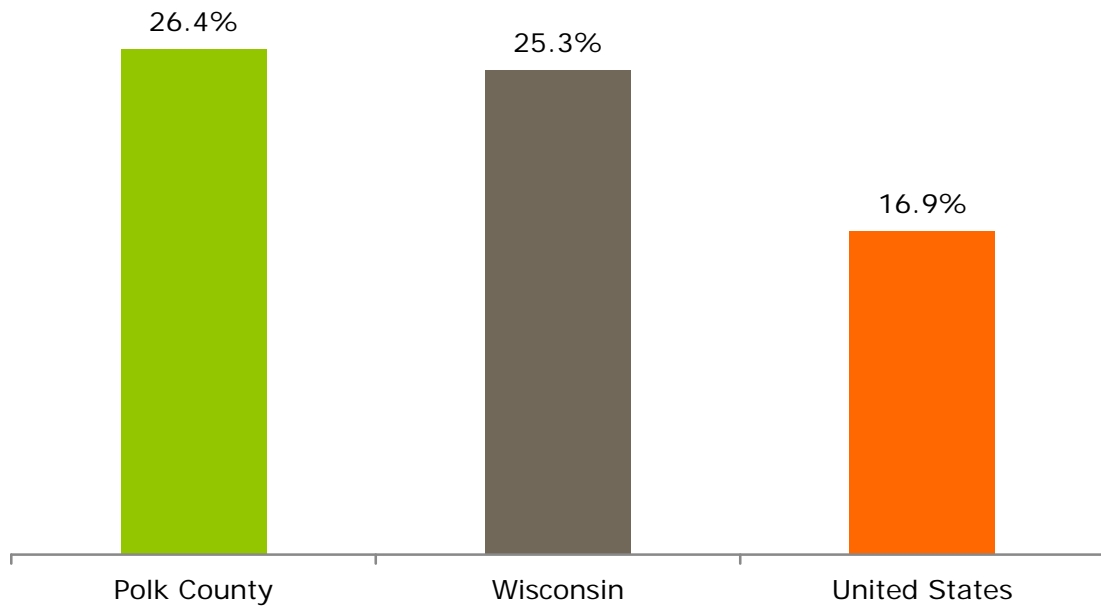
Consumption of too much alcohol is a risk factor for a number of adverse health outcomes. These include alcohol poisoning,

high blood pressure, heart attack and relational violence. Approximately 80,000 deaths are attributed annually to excessive drinking. It is the third leading lifestyle-related cause of death for people in the United States each year.

- An estimated 22 million people per year in the US experience drug and alcohol problems which contribute to physical, mental and public health issues. Important indicators of high-risk alcohol use include binge drinking, heavy drinking and excessive drinking.
- Binge drinking is defined as consuming four or more alcoholic beverages for women and five or more alcoholic beverages for men on a single occasion in the past month. On the community health survey, approximately 35% of respondents (n=606) reported binge drinking in the past month.
- Excessive drinking is defined as engaging in either binge or heavy drinking, with heavy drinking defined as having more than one (women) or two (men) drinks on a typical day. The prevalence of excessive drinking in Polk County (26%) and Wisconsin (25%) far exceeds the national goal of 8%.

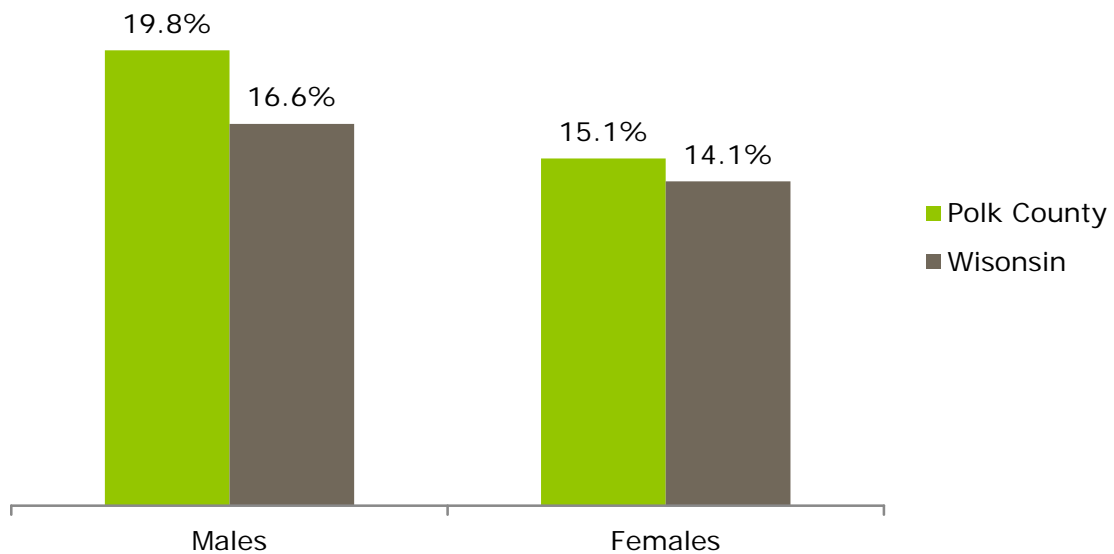
Several indicators related to alcohol use among adults and children are of particular concern in Polk County, including excessive drinking among adults, early initiation among young boys and alcohol-related motor vehicle crashes.

Percent of the Adult Population that Reported either Binge Drinking or Heavy Drinking



Source: Center for Disease Control and Prevention, Behavior Risk Factor Surveillance System, 2006-2012

Percent of High School Students who had their First Drink of Alcohol other than a Few Sips before Age 13



Source: Wisconsin Youth Risk Behavior Survey, YRBS 2015

- Approximately 20% of boys and 15% of girls in Polk County report having had their first drink of alcohol before age 13 (other than a few sips).

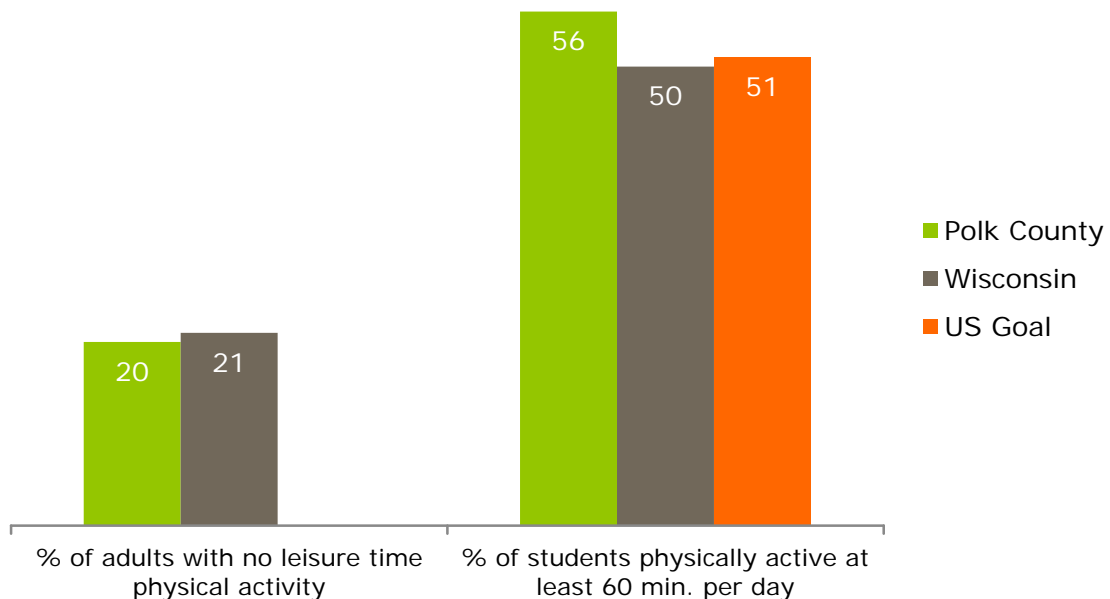
- In 2013, there were 239 total reported motor vehicle crashes in Polk County. Of those crashes, 29 were documented as alcohol related.
- Drug related arrests in Polk County remain static. In 2014, 370 arrests were made and 364 arrests occurred in 2015.

Physical Activity

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

- Approximately 20% of Polk County adults aged 20 and up report having no leisure time physical activity.
- 29% of respondents to Polk County’s community health survey reported leisure time physical activity on one or fewer days.
- 29% also reported leisure time physical activity on most (four or more) days.
- 89 % of Polk County High School Students, in 2015, reported being physically active for a total of at least 60 minutes per day on 5 or more days out of the week.

Indicators for Physical Activity



Sources: Behavioral Risk Factor Survey (2006-2012), Youth Risk Behavior Survey (2011) and DHS Pediatric Nutrition Surveillance System (2012).

Obesity

Obesity has a strong relationship to many negative health conditions and outcomes and is a contributing factor for skyrocketing health care costs. The increase in annual health care costs for every obese adult, exceeds \$1,400. Obese youth are much more likely to become obese

adults, putting them at risk of having lifelong health consequences. Obesity is interconnected with proper nutrition and physical activity level.

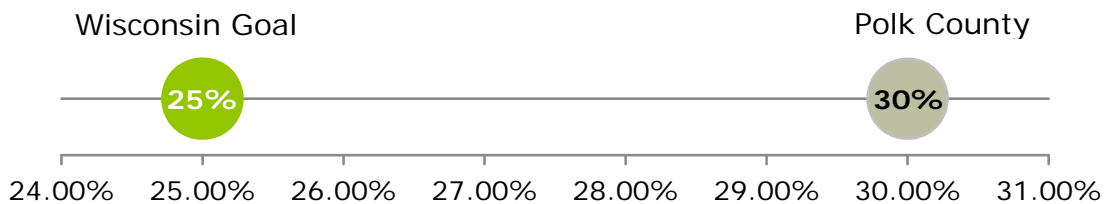
Body Mass Index (BMI) is a number calculated from a person's weight and height. It is an inexpensive and easy-to-perform method of screening for weight categories, with relatively high accuracy levels. In the chart below the World Health Organization's classification of weight status (BMI) is defined:

WHO CLASSIFICATION OF WEIGHT STATUS	
WEIGHT STATUS	BODY MASS INDEX (BMI), kg/m ²
Underweight	<18.5
Normal range	18.5 – 24.9
Overweight	25.0 – 29.9
Obese	≥ 30
Obese class I	30.0 – 34.9
Obese class II	35.0 – 39.9
Obese class III	≥ 40

Adapted from the 1998 WHO report "Report of a WHO consultation on obesity. Obesity: preventing and managing the global epidemic."

- With an obesity rate of 30%, Polk County exceeds the state number of 28%. The state's goal is by 2020, decrease the percentage of adults who are obese from 28% to 25%. The national goal is 25% by 2020, with 36% of adults currently obese nationally.
- When asked on the community health survey to describe their own weight, just over one-third of respondents described their weight as "healthy." 42% of respondents reported they were "slightly overweight" and 17% said they were "very overweight."

Percentage of Polk County Adults who are Obese



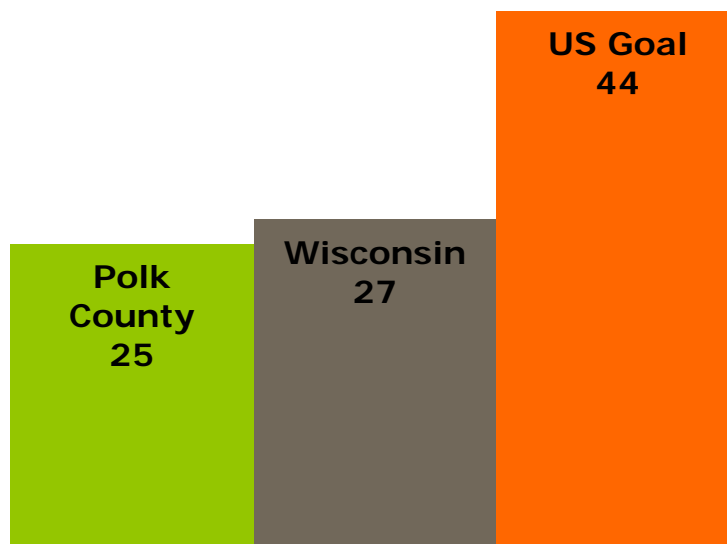
Sources: Behavioral Risk Factor Survey (2006-2012)

Self-Assessed Weight Status of Polk County Adults, 2015



Source: Polk County Community Health Assessment 2015

% of Infants Receiving WIC Breastfed Exclusively through 3 Months



Source: Polk County WIC 2015

- Childhood obesity is an epidemic. In the US, 1 preschooler in 5 is at least overweight, and half of these are obese. Breastfeeding helps protect against childhood obesity. A baby's risk of becoming an overweight child goes down with each month of breastfeeding.
- In Polk County, 25% of WIC (Women, Infants and Children) newborns are breastfed exclusively for 3 months, compared to 27% of WIC newborns statewide. The comparable national goal is 44%.

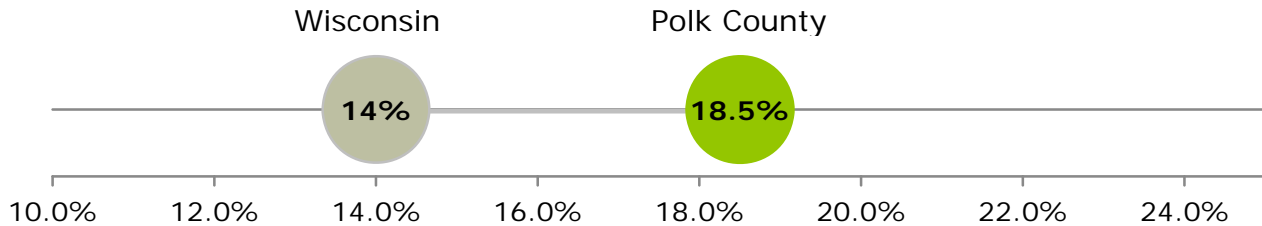
Tobacco Use

Tobacco use remains the single most preventable cause of death and disease in the United States. Approximately 8,000 deaths are related to tobacco use in Wisconsin each year. Secondhand smoke exposure can also lead to heart disease, lung cancer, asthma attacks, respiratory infections and ear infections.

- The percentage of Polk County adults who are current smokers (19%) is slightly higher than the percentage statewide (18.7%), and exceeds the national goal (14%).
- In Polk County, the percentage of students who report smoking cigarettes in the past month is comparable to the percentage statewide (11.6% and 12%), but the percentage who reported using chewing tobacco, snuff or dip in last month is higher (10.8% compared to 8%).
- In 2015, approximately 8.7% of licensed tobacco retailers in Polk County sold tobacco to minors, down from 10.2% in 2014. Polk County is now below the statewide benchmark of 10%.
- A substantially higher percentage of women in Polk County report smoking during pregnancy (18.5%) than in Wisconsin (14%).

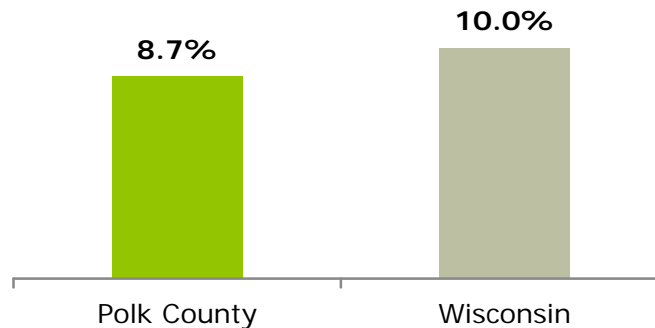
- E-cigarette use among teens, nationally, tripled in 2014. Polk County is seeing similar rates. This is highly concerning because of all of the health effects and is normalizing regular tobacco/cigarette use again.

Percent of Mothers who Report Smoking during Pregnancy



Source: County Health Rankings/WI Department of Health Services WISH

Percent of Illegal Tobacco Sales to Minors



Source: Wisconsin WINS 2015

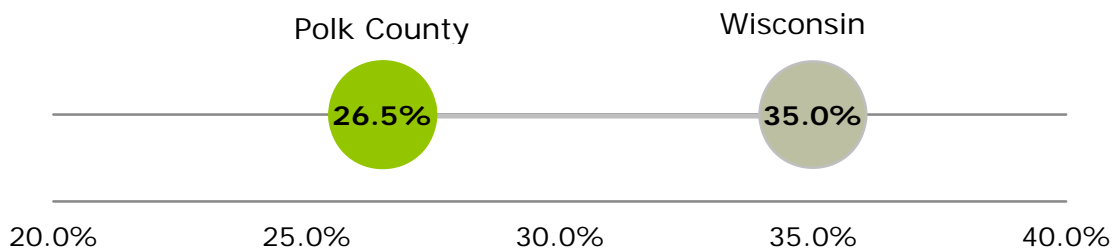
Reproductive and Sexual Health

Family planning services help improve health outcomes for infants, children, women and families. These services also help prevent sexually transmitted infections which lead to reproductive health problems, fetal health problems and long-term health problems.

- Chlamydia is the most frequently reported sexually transmitted infection in Polk County and Wisconsin. The rate of Chlamydia per 100,000 population in Polk County is significantly less than the rate statewide (174 per 100,000 compared to 402 cases per 100,000).
- The teen birth rate is lower in Polk County (25 per 1,000 females ages 15-19) than in the state as a whole (27 per 1,000), though county and state rates exceed the national goal (22 per 1,000).

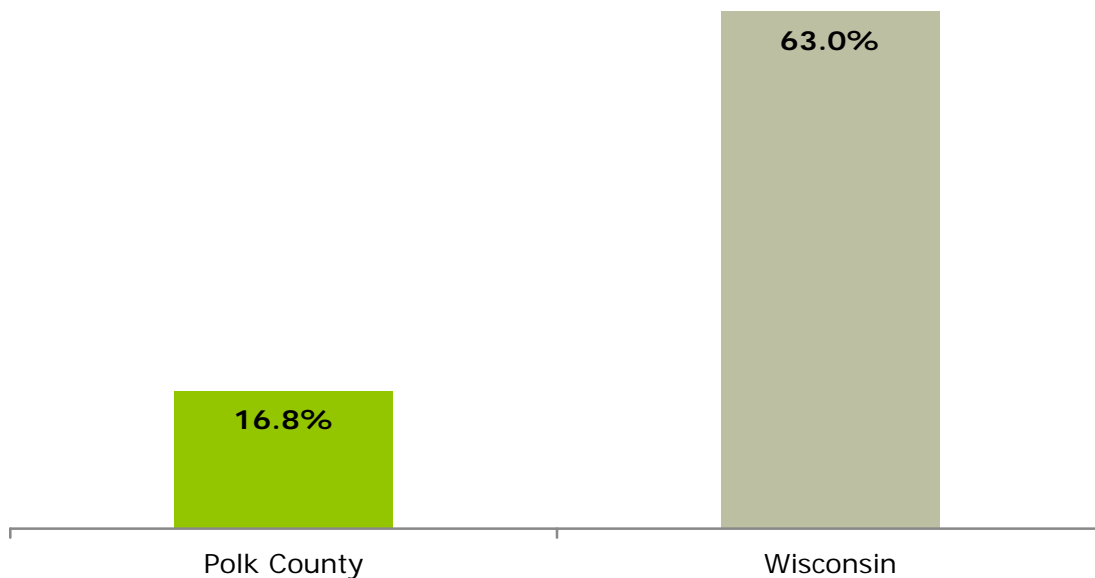
- A large percentage of women in Polk County are receiving prenatal care during the first trimester at 84%.
- The percentage of Polk County students who report ever having sexual intercourse (26.5%) is lower than the state (35%).
- The percent of students who (or whose partner) used or a condom the last time they had sexual intercourse is dramatically lower than the state at only 16.8%. The state percentage is 63%.

Percent of Students who have ever had Sexual Intercourse



Source: Youth Risk Behavioral Survey (YRBS) 2013

Percentage of Sexually Active Students who used a Condom during last Sexual Intercourse



Source: Youth Risk Behavioral Survey (YRBS) 2013

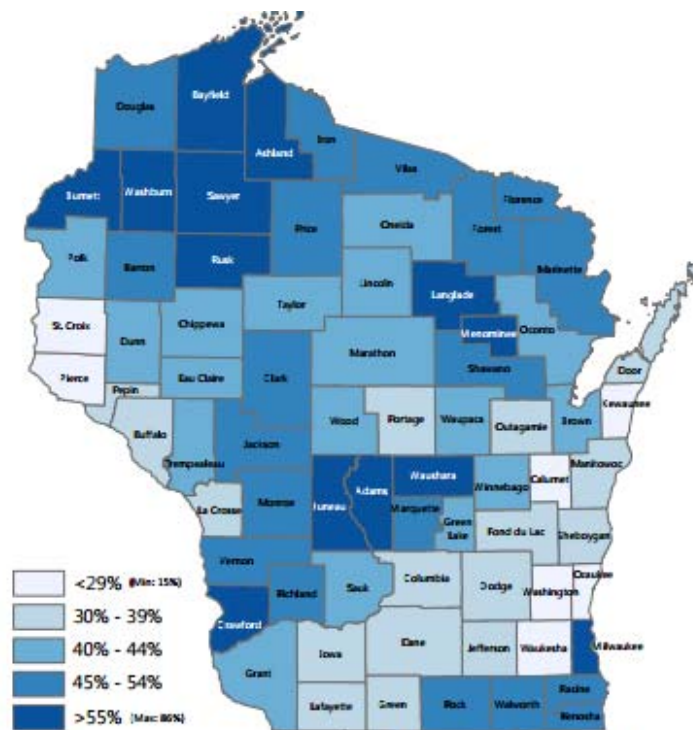
Nutrition

A healthy diet reduces the risk of being overweight and obese, having heart disease, Type 2 diabetes and osteoporosis. Good nutrition is important for individuals to ensure a healthy weight and healthy growth and development.

- The community health survey compiled data from respondents on fruit and vegetable consumption. When asked to report on the typical number of fruits and vegetable servings (1/2 cup) consumed in a day, the most frequent response was two servings (27%). This is far short of the recommended five servings per day, which was reported by only 8% of respondents.
- School lunch is a major source of calories and nutrition for school age children, particularly for children that come from low-income families. The map below depicts the percentages of percentages statewide.

Percentage of Students Receiving Free and Reduced Meals at School by District

2012-2013 School Year



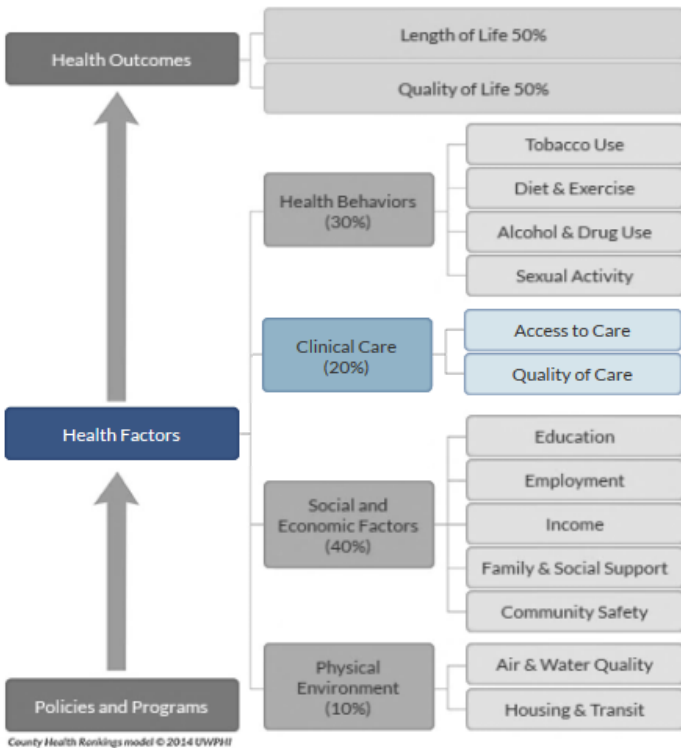
Source: Wisconsin Department of Public Instruction as cited by Wisconsin Food Security Project: foodsecurity.wisc.edu

- Approximately one-third of the restaurants in Polk County are fast food restaurants, compared to 40% statewide, and a national goal of 25%. Although fast food restaurants provide some healthy options, a well-balanced selection is important for health outcomes.

Unintentional Injury

Injury is the leading cause of disability. It also is the leading cause of death among 1-44 year olds. Many think of injuries as “accidents” or “acts of fate” but most injuries are predictable and preventable. Data on intentional injury are included under Community Safety, starting on page 10.

- The leading causes of injury death in Polk County are motor vehicle crashes, suicide and falls. The rate of death due to each of these injuries in Polk County is substantially higher than the rates of death statewide.
- The percentage of high school students reporting that they rarely or never wear a seat belt when riding in a car driven by someone else is higher in Polk County than in the state as a whole (10.6% compared to 10.3%). The national goal is 7.7%.



CLINICAL CARE

Clinical care includes services for medical, dental and mental health care. Important aspects of access include the availability of insurance coverage for preventive services and having a designated provider for routine services.

Access to Care

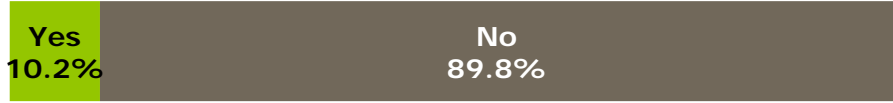
Access to health care impacts overall physical, social and mental health status; prevention of disease and disability; detection and early treatment of health conditions; quality of life; and preventable death and life expectancy. Access to health care services help to ensure the health and economic security of Wisconsin families. Approximately 11% of the Polk County

population younger than 65 years old is not covered by health insurance, a figure equal to the percentage statewide.

Approximately 90% of the community survey respondents reported that all individuals in their household are covered by insurance. More than 1 in 10 respondents to the survey reported that cost prevented them from taking prescribed medicine in the past 12 months. On a follow-up question, expense was the dominant explanation for what prevented respondents from seeking care, “My deductible is too high”.

Barriers to Health Care in Polk County

In the last 12 months was there something that prevented you from getting the medical care you needed?



In the last 12 months have you not taken prescribed medication due to prescription costs?



Source: Polk County Health Survey, 2015

The County Health Rankings report for Polk County used Medicare data to estimate the hospitalization rate for types of conditions where timely and effective ambulatory care can reduce the likelihood of hospitalization. In Polk County, the rate of preventable hospitalizations per 1,000 Medicare enrollees was higher (65 hospitalizations/1,000 enrollees), than the comparable rate statewide (50 hospitalizations per 1,000 enrollees).

Dental Health Services and Oral Health

Good oral health can prevent tooth decay, tooth loss and pain.

- The percentage of the population with access to water fluoridated at recommended levels is dramatically lower in Polk County than in the state as a whole (26% vs. 64%).
- The population-to-dentist ratio in Polk County is about 20% higher than the state as a whole, suggesting that dentists are “not as available” locally as they are in other areas of the state.
- Compared to Wisconsin as a whole, for the four year period 2006-10, a substantially higher percentage of Polk County residents reported that they did not have a dental visit in the past year (33% vs. 25%).
- Approximately 1 in 5 third grade children in the western region of the state have untreated tooth decay (21%), and more than half of third graders have one or more dental cavities (54%). These figures are comparable percentages statewide.
- Cost appears to be a significant barrier to care for many. Approximately 4 in 5 respondents to the community health survey reported that they had been to the dentist in the past year. Almost all of the 20% who had not been to the dentist provided an explanation. More than half of those who hadn't been to the dentist (56%) pointed to cost

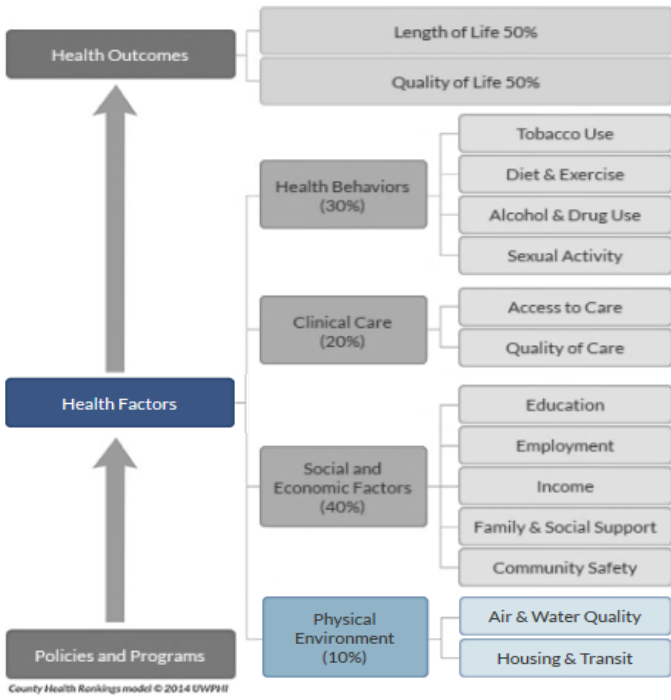
as the reason why, "Cannot afford to go", "Insurance doesn't cover it" and "Dentists do not accept my insurance".

Mental Health Services and Mental Health

Just as physical health is important, so is good mental health. Mental health issues present themselves in a variety of different forms and in different degrees of severity.

Nationwide, 13 million adults have seriously debilitating mental illness each year. Suicide is the 10th leading cause of death.

- Self-harm is the second leading cause of hospitalization in Polk County, though the county rate trails the state rate (58 vs. 98 per 100,000 population).
- The suicide rate in Polk County is nearly double that of the state (23 vs. 13 per 100,000).
- The actual number of suicides had been going down; 2012 (7), 2013 (6) and 2014 (5), until this past year when there was a steep increase to 14.
- Approximately 15% of Polk County youth have reported that they seriously considered suicide in the past year. The youth rate statewide is 13%.
- On the Community Health Survey, 23% of respondents indicated that they had been told they have depression or a mental health disorder and 15% indicated that they had felt sad or depressed on three or more days in the past two weeks. More than half (56%) said they had not felt sad or depressed on any days in the preceding two weeks.
- The 4% of respondents to the Community Health Survey who reported that they had considered suicide in the past year were asked what they are doing about it. Just over 1 in 4 (26%) reported that they are doing "nothing." Others indicated that they are taking medication (26%), increasing healthy behaviors (8%), or talking to a counselor, trusted friend or health care provider (30%).

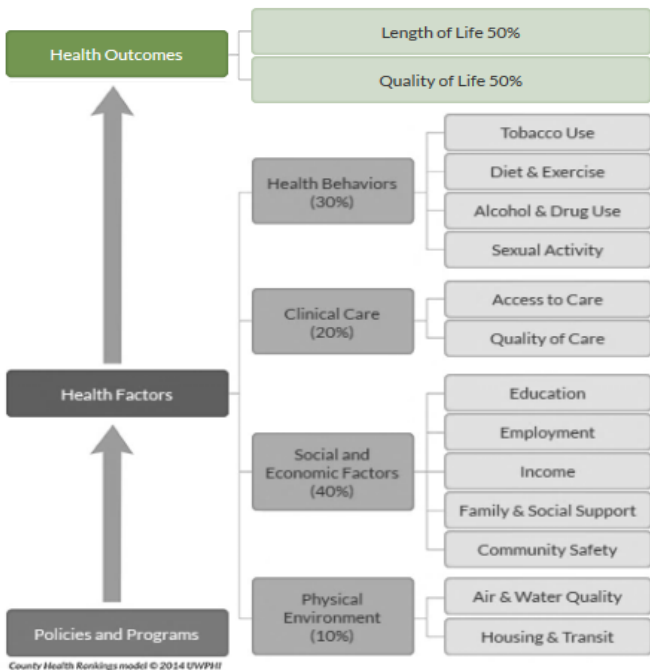


PHYSICAL ENVIRONMENT

The built environment includes human-made resources and infrastructure such as buildings, roads, parks, restaurants and grocery stores. Healthy food choices and leisure time physical activity are more likely in environments that make these behaviors easy, safe and appealing.

- Approximately 1% of people living in poverty in Polk County live far from a grocery store (10 miles in rural areas or one mile in urban areas). This compares favorably to the state of Wisconsin (6%)
- The density of fast food outlets is more favorable in Polk County than in Wisconsin overall, but still considerably higher than the national goal.

- Polk County community water systems do not exceed maximum levels of arsenic or nitrates.



HEALTH OUTCOMES

Length of life (mortality) and quality of life (morbidity) are crucial considerations for the health of a community.

Length of Life

The County Health Rankings estimates the burden of premature deaths. Premature deaths are deaths that occur before a person reaches life expectancy (75 years). Deaths before age 75 are often considered to be preventable. Every death occurring before the age of 75 contributes to the total number of years of potential life lost. For example, a person dying at age 25 contributes 50 years of life lost, whereas a person who dies at

age 65 contributes 10 years of life lost. All of these "lost" years are added together to estimate the extent of premature death in a community.

In general, Polk County has a somewhat higher rate of premature death than the state as a whole. In 2012, Polk County ranked in the bottom half of Wisconsin counties (50th). This means that residents of Polk County are more likely to die before the age 75, than their counterparts

around the state. Each year, premature deaths of Polk County residents result in an estimated 6,600 “lost” years.

The rate of infant death in Polk County (9 deaths in the first year per 1,000 live births) is above the rate in Wisconsin (5.2 per 1,000) and the state target (6.0 per 1,000).

Quality of Life

Quality of life is the term that refers to how healthy people are during their lifetime.

- Several indicators are often combined to gauge the extent of healthy growth and development within a community. These indicators relate to breastfeeding, low birth-weight birth, teen birth rate, prenatal care, youth overweight, smoking during pregnancy and youth smoking. The data in Polk County for most of these indicators are at or below the state average. However, the rate of smoking during pregnancy is far higher in Polk County (18.5%) than in the state as a whole (14%).
- The percentage of low birth-weight infants in Polk County (5.6%) is below the state of Wisconsin (7%) and slightly below the national goal (6.0%).
- Approximately 11.7% of Polk County adults rate their own health status as fair or poor, marginally lower than the percentage statewide (11.8%), but higher than the national goal (10%).
- Rates of hospitalization for heart disease and stroke are lower in Polk County than in Wisconsin, as is the age adjusted cancer incidence rate. The percentage of adults in Polk County with diagnosed diabetes (8%) is on par with the percentage statewide.

Indicators of Quality of Life

Title	Measure	Polk	WI	Nat'l Target	Year(s) Data Used
Poor or Fair Health	% of adults self-reporting poor or fair health, adjusted for age	11.7%	11.8%	10%	2014
Low Birth Weight	% of birth weights below 2,500 grams	5.6%	7%	6%	2006-2012
Diabetes	% of adults age 20 and above with diagnosed diabetes	8.7%	7.9%		2012
Hypertension	% of adults age 18 and over with hypertension	23.2%	25.2%		2006-2012
Coronary Heart Disease	Rate per 100,000 population	3.5%	3.9%		2011-2012
Preventable Hospital Stays	Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	65.8	50.6		2012
Diabetic Screening	% of diabetic Medicare enrollees that received HbA1c screening in past year	87.5%	89.6%	89%	2012
Mammography Screening	% of female Medicare enrollees age 67-69 that received mammography screening over two years	60.9%	70.2%	74%	2012

HEALTH DISPARITY AND HEALTH EQUITY

The phrase health disparity refers to the differences in health status between groups. Public health research consistently points to significant health disparities in most communities, often by racial/ethnic group, income and health insurance status.

The University of Wisconsin Population Health Institute has created a report card to depict the health status for the state population and for four life stages (infants; children and young adults ages 1-24; working age adults ages 25-64; and adults 65 and older). The 2010 report scores for all four stages were either "B" or "C." This alone might motivate communities to strive toward "A" grades.

State Score Card

Life Stage	Health Grade Score	Health Disparity Grade
Infants (less than 1 year of age)	C	D
Children and young adults (age 1-24)	B	D
Working-age adults (age 25-65)	B	C
Older adults (ages 65+)	C	D
All ages	B-	D

Source: Health of Wisconsin Report Card 2013

A closer look at the health data for sub populations (by gender, education, geography and race/ethnicity) will likely motivate even more concerted action because the report card points to dramatically different health experience across subgroups.

- When looking at the health of children and young adults, the score for Native Americans drops from B to F, while the score for Asian children climbs to an A.
- The scores for rural children and young adults fall to a D, whereas the scores for their non-urban and suburban peers hold steady at a B.
- The data for older adults show a similar pattern. The health score for seniors with some post-secondary education is markedly higher (B) than that of those with a high school education or less (D).

Because of the relatively homogenous population and the expense often involved in data collection, there is a limited amount of population health information currently available within Polk County to compile by racial/ethnic group, or for subpopulations that are uninsured and/or low income. Available information related to health disparities is summarized below.

Some indicators suggest that oral health of low income populations in Polk County is better than low income population statewide.

- A higher percentage of Medicaid recipients in Polk County are using Medicaid to receive dental service than are Medicaid recipients statewide (30% vs. 23%).

- When compared to the state as a whole, a markedly lower percentage of children in western Wisconsin who enrolled in Head Start have untreated decay (26% vs. 21%) or dental caries (36% vs. 25%).

In Polk County 25% of WIC newborns are breastfed exclusively for three months, compared to 27% of WIC newborns statewide. The comparable national goal is 44%.

These indicators suggest that income-related health disparities in oral health and breastfeeding are not as apparent in Polk County as in Wisconsin overall. Nonetheless, it is highly likely that underlying health disparities are prevalent, though currently not measured, within the county.

Disparities noted elsewhere in the report relating to age, gender and geography include:

- Seniors in Polk County are far more likely to experience preventable hospitalization than younger residents.
- High schools boys are substantially more likely than high school girls to report early initiation of alcohol use and use of chewing tobacco, snuff or dip.
- Among residents in Polk County that rely on a public water supply for residential use (36% of all residents), 71% have access to optimally fluoridated water. There has been controversy in some of the local villages in the past 3 years, over community water fluoridation. This resulted in at least one village discontinuing community water fluoridation.

PRIORITY FOCUS AREAS FOR IMPROVEMENT

Partners convened four community forums around the county and a partner meeting to review assessment findings and participate in a voting process. The following five priority problems were identified consistently across all of the forums: mental health, obesity, alcohol, other drugs and access to care. At the April 12, 2016 partner meeting, the consensus was to continue work on the previous focus areas of mental health and obesity while broadening the unhealthy alcohol use focus area to substance abuse thus including other drugs, and to add the focus area of access to care. The CHHA final top four priority focus areas are:

1. Mental Health
2. Substance Abuse
3. Access to Care
4. Obesity

Community members and key stakeholders continue to affirm that there is still work to be done in improving mental health and preventing obesity. A key change in this CHNA process is the determination, from process participants, that there is a community need to address access to care in Polk County. These four health issues will be critically examined in the CHIP process which began in spring 2016 and will result in the creation of a new CHIP for Polk County.

Polk County lags substantially behind Wisconsin or national goals in several important areas that were not chosen as high priority health focus areas at this time. These areas include oral health, injury, reproductive health and communicable disease.

These health issues still require public health attention, but were not selected as priority health focus areas in this CHNA process.

NEXT STEPS

The assessment findings point to numerous improvement opportunities and strategies, including community-based education (e.g., encouraging good role models for eating and activity) to more widespread availability of services and healthy options (e.g., more accessible chemical dependency and mental health services and more community grocery stores to increase year round access to fruits and vegetables). Improvement opportunities also extend to policy, systems and environmental changes, including continued improvements in school lunches and reduced access to tobacco at retail outlets. Polk County has already enjoyed some success in these areas (e.g., smoke-free restaurants) and has many assets on which to draw (e.g., numerous parks, lakes and trails provide nearby options for outdoor recreation).

This assessment is part of a larger ongoing process of assessment and improvement. The collaborative group of the Polk County Health Department, the three medical centers and many other community organizations engages community members and works collectively with partners to improve the health of the community through assessment, prioritization, effective planning, collaborative implementation and evaluation.

COMMUNITY ASSETS FOR HEALTH

Despite the size and rural nature of Polk County, there are considerable resources available to utilize for health improvement. In the community health survey, some respondents noted county assets that support health, particularly schools and businesses, community programs and events, lack of traffic and the slower pace and lifestyle of a rural setting. Listed below are resources identified for the top three health priority areas.

Resources to Address Mental Health

- Amery Regional Medical Center Behavioral Health (715) 268-0060
- Aurora Community Counseling (715) 235-1839
- Family Based Therapy Associates (Chisago City, MN) (651) 257-2733
- Midwest Psychological Services (715) 381-1980
- Northwest Counseling & Guidance Clinic (715) 327-4402
- Northwest Passage, Ltd (715) 327-4402
- Osceola Medical Center (715) 294-2111
- Peace Tree Counseling (715) 755-2233

- Polk County Mental Health & Chemical Dependency (715) 485-8400
- St. Croix Regional Medical Center Counseling and Psychological Services
(715) 483-0243
- Visit www.mentalhealthpolk.org for additional resources for mental health in Polk County
- Visit www.polkunited.org for additional resources for mental health in Polk County

Resources to Address Substance Abuse

- Aurora Community Counseling (715) 235-1839
- Northwest Counseling & Guidance Clinic (715) 327-4402
- Northwest Passage, Ltd (715) 327-4402
- Peace Tree Counseling (715) 755-2233
- Polk County Mental Health & Chemical Dependency (715) 485-8400
- St. Croix Regional Medical Center Counseling and Psychological Services
(715) 483-0243
- Visit www.polkunited.org for additional resources for substance abuse in Polk County

Resources to Address Access to Care

- ABC for Rural Health
- Healthwatch Coalition
- Family Health Benefits Counselor for PCHD
- Great Rivers Income Maintenance Consortium
- Polk County Community Services

Resources to Address Obesity

- Amery Regional Medical Center (715) 268-8000
- Osceola Medical Center (715) 294-2111
- St Croix Regional Medical Center (715) 483-3221
- Visit www.polkunited.org for additional resources for physical activity and nutrition in Polk County

Community Health Needs Assessment Process

Comprehensive Review of Health Data

This assessment is largely based on the Recommended Core Data Set for Community Health Improvement version 1.0; 9/2012 (Final version due spring 2014). This data set draws heavily on information compiled for the annual county health rankings report through on-going data collection systems (e.g., Behavioral Risk Factor Surveillance System, Youth Risk Behavior Survey, US Census, American Community Survey, Uniform Crime Reporting Program and the National Vital Records System). Other state-specific sources of data used in this assessment include the Make Your Smile Count Survey, Public Water Fluoridation Census, Wisconsin Inpatient Hospitalization Discharge file and Wisconsin Hospital Emergency Department data system. Additional county-level data was provided by CESA 11, area medical centers, the Polk County Sheriff's Department and the Polk County Health Department.

Key online data sources include:

WI Department of Health Services, 2010 Profile for Polk County

<http://www.dhs.wisconsin.gov/localdata/pdf/10pubhlth/polk10.pdf>

WI Department of Health Services, Wisconsin Interactive Statistics on Health (WISH) data query system <http://www.dhs.wisconsin.gov/wish/>

University of Wisconsin Population Health Institute, County Health Rankings for Polk County

<http://www.countyhealthrankings.org>

US Department of Commerce, U.S. Census Bureau, American Fact Finder

<http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

University of Wisconsin Population Health Institute, Health of Wisconsin Report Card, 2010

<http://uwphi.pophealth.wisc.edu/programs/match/healthiest-state/report-card/2010/reportCard.pdf>

This assessment drew heavily from resources available through the CHIPP Infrastructure Improvement Project. This project provided numerous tools for local health departments to “test” in the CHNA process. Specific tools used during the CHNA process included a model core data set, a guide to primary data collection, a community engagement guidance tool and a guide to stakeholder engagement.

Limitations

Although this assessment reflects the most recent and best available health information for Polk County, there are important limitations to note.

- There can be a long lag time between data reporting and availability (i.e., the timeliness of data).
- Small numbers can make comparisons difficult.
- Health information is generally not available for jurisdictions smaller than counties (e.g., individual communities within Polk County).
- There is inadequate data for some topic areas.
- There are jurisdictional challenges within data collection systems (e.g., reporting issues across county and state lines).

Community Forums and Meetings

Efforts were made to share the results of the data compilation with the community. Four community forums were sponsored in Balsam Lake, St. Croix Falls, Amery and Osceola. Citizens present offered their input and suggestions on various health focus areas. In addition, two partner meetings were held in Dresser and Balsam Lake targeting top leadership of key stakeholder organizations as well as representatives of local health-related coalitions. At each of these venues, attendees had the opportunity to provide input on the health focus areas as well as vote on their selections of the top five issues.

Participants were asked to consider the questions below when voting for the top three focus areas at the April 12, 2016 Partner meeting.

1. *Size and Prevalence of the Issue*

- How many people does this affect?
- How does the prevalence of this issue in Polk County compare with its prevalence in other counties, the Western Region and the State of Wisconsin?
- How serious are the consequences?

2. *Effectiveness of Interventions*

- How likely is it that action taken will make a difference?
- How likely is it that action will improve quality of life?
- How likely is it that progress can be made in both the short term and the long term?
- How likely is it that the community will experience reduction of long-term cost?

3. *Community Capacity*

- Are people likely to support actions around this issue?
- Will it be necessary to change behaviors and attitudes in relation to this issue?
- Are the necessary resources and leadership available to us now?

Data Sources

1. 2010-2014 US Census Bureau
2. NCES Common Core of Data Public Elementary/Secondary School Universe Survey (2013)
3. Feeding America. 2013
4. US Department of Education, EDFacts. 2013-14
5. National Center for Education Statistics, NCES - Common Core of Data. 2008-09
6. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12
7. US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2006-12
8. US Department of Labor, Bureau of Labor Statistics. 2016
9. Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2010-12
10. Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network. 2012
11. US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2010
12. US Department of Housing and Urban Development. 2015
13. US Department of Housing and Urban Development. 2013
14. Federal Financial Institutions Examination Council, Home Mortgage Disclosure Act. 2014.
15. US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2013
16. Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2012
17. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12
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25. Centers for Disease Control and Prevention, National Vital Statistics System. 2009-13
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27. County Health Rankings
28. WI Department of Health Services
29. Polk County Sheriff's Department
30. Polk County Community Health Assessment 2015
31. Healthy People 2020
32. Healthiest Wisconsin 2020
33. Health of Wisconsin Report Card
34. Youth Risk Behavior Survey 2011-2015
35. Northwood's Coalition Epidemiological Profile: Alcohol Opioids (Prescription Drug Abuse and Heroin Use) and Other Drugs 2015