Florence County Health Department 2015-2020

Community Health Improvement Plan

Connecting You to a Better Life
The Collaborative Process

Mobilizing for Action through Planning and Partnerships (MAPP)
The Health Department decided to base our Community Health Assessment and Community Health Improvement Plan on the national model which consists of six phases:
- Organizing: Preparing for the process and inviting members to participate
- Visioning: After group is assembled, determine a shared vision and mission
- Assessments: Assess data and analyze results
- Strategic Issues: Identify top concerns as identified by various data sources
- Goals/Strategies: Develop goals related to mission and strategic issues
- Action Cycle: Ongoing cycle of Planning for Action, Implementation and Evaluation

Florence County Community Health Assessment and Improvement Plan Committee Participants

Facilitators:
Angela Nimsgern .......... Wis. Div. of Public Health; Director/Northern Region
James Lawrence .......... Wis. Div. of Public Health; Health Ed. Consultant/NR

Members:
Allysa Kerscher .......... Florence County Human Services Social Worker
Jen Steber ................. Florence County Human Services Director
Janet Nanninga .......... Florence County Human Services Social Worker
Ann Price ................. Florence County Health Department; RN
Annette Seibold .......... Florence County Health Department Health Officer
Mary Blazer ................. Florence County Health Department; RN
Sarah Giddings .......... Florence County Health Department Admin. Assistant
Pat Dooley ................. Community Member; Registered Nurse
Carolyn Lemanski ......... Community Volunteer, Board of Health
Anna Savino ............... Rescue Squad Volunteer; RN
Jim Dagostino ............ Rescue Squad Volunteer; EMT
Karen Wertanen .......... Retired Health Officer, Registered Nurse
Cindy Kmecheck .......... Florence County Board of Health
Holly Stratton ............. Florence County Board of Health Chairperson
Cassie Dumke ............. TORPEDOs - Florence High School student
Emily Macha .............. TORPEDOs - Florence High School student
Gail Poquette .......... Volunteer for St Vincent de Paul; RN
Karen Harrison .......... Florence County Schools; Physical Ed. Teacher
Sue Mattson ............... Golden Living Center Director
Kurtis Rollin .............. Golden Living Center Intern
Chris Gall ................. St. Mary's Catholic Church Parish Director
Lori Friberg .......... ADRC Information and Assistance Specialist
Margie Yadro ............ Florence County Land Conservation Administrator
Meg Dallapiazza .......... UW Extension 4-H Youth Development Agent
Jeanne Richard .......... UW Extension Nutrition Educator
Jenette Gunville .......... UW Extension Family Living Agent
Terri Miller .......... UW Extension Nutrition Education Coordinator
Corrin Seaman .......... UW Extension Community Development Agent
Ron Yadro ................. Florence County School Board
Heather Steiner .......... University of Phoenix
The Collaborative Process

Organizing
- September 11, 2014 - Representatives from the Northern Regional Office (NRO) met with Florence County Health Department staff to discuss the Community Health Assessment process and do a preliminary review of data.
- September 15-17, 2014 - Health Officer and Public Health Nurse created a list of potential participants from many sectors of the community. Agendas and materials sent.
- October 2, 2014 - 23 participants attended “Data in a Day” Community Health Assessment meeting to discuss data from twelve Healthiest Wisconsin 2020 focus areas.
- November 19, 2014 - 19 committee members met to discuss results of “Data in a Day”, identify themes and create subcommittees to work on future goals and strategies.

Visioning
The group agreed that the Florence County CHIP will be guided by the same vision and goals statements as the state health improvement plan, Healthiest Wisconsin 2020.

Healthiest Wisconsin 2020 Vision and Goals:

**Vision:**
- Everyone Living Better, Longer

**Goals:**
- Improve health across the life span
- Eliminate health disparities and achieve health equity
FCHD Community Health Priorities
Priority One: Alcohol and other Drug Abuse
Priority Two: Mental health awareness and suicide prevention

Community Health Assessment

The group convened on October 2, 2014 for “Data in a Day” session led by Northern Regional Health Department facilitators, Jim Lawrence and Angela Nimsgern.

The group of 23 participants representing different sectors of the community (see member list, page 3) reviewed data compiled from multiple sources, including the Youth Behavioral Risk Survey (YBRS), U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Wisconsin Department of Transportation, Wisconsin Department of Justice, Wisconsin Department of Public Instruction, and *The Burden Of Excessive Alcohol Use in Wisconsin* - University of Wisconsin Population Health Institute. In addition, results of a local “Health Florence County” survey were considered.

After reviewing data, group members were asked to rank their top three concerns. Results were calculated using a weighted scale. Twenty ballots were submitted; three ballots were invalid. Alcohol and Drug use was a clear concern and Mental Health was determined to be a second important area.

There are overlaps in some areas and many were ranked lower because participants felt there were already resources in place.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Healthiest Wisconsin 2020 Focus Areas</th>
<th>Number of Votes</th>
<th>Weighted Score (1=3 pts, 2=2 pts, 3=1 pt)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1   2   3</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Alcohol and Drug Use</td>
<td>13   1   2</td>
<td>16</td>
</tr>
<tr>
<td>2</td>
<td>Mental Health</td>
<td>0    3   9</td>
<td>12</td>
</tr>
<tr>
<td>3</td>
<td>Chronic Disease Prevention and Manag-</td>
<td>1    3   1</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Tobacco Use and Exposure</td>
<td>0    4   1</td>
<td>9</td>
</tr>
<tr>
<td>5</td>
<td>Injury and Violence Prevention</td>
<td>1    1   0</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>Healthy Growth and Development</td>
<td>1    0   1</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>Physical Activity</td>
<td>0    1   2</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>Reproductive and Sexual Health</td>
<td>0    2   0</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>Environmental and Occupational Health</td>
<td>1    0   0</td>
<td>1</td>
</tr>
<tr>
<td>7</td>
<td>Nutrition and Healthy Foods</td>
<td>0    1   1</td>
<td>2</td>
</tr>
<tr>
<td>8</td>
<td>Communicable Diseases</td>
<td>0    1   0</td>
<td>1</td>
</tr>
<tr>
<td>0</td>
<td>Oral Health</td>
<td>0    0   0</td>
<td>0</td>
</tr>
</tbody>
</table>
Coalitions

*After determining the top two focus areas for the county, participants signed up to continue to work on identified issues in coalitions that meet on a monthly or quarterly basis.*

**AODA Coalition members**
Cindy Kmecheck, Board of Health  
Ann Price, Public Health Nurse  
Jen Steber, HSD Director  
Janet Nanninga, Social Worker  
Alyssa Kerscher, Social Worker  
Carolyn Lemanski, Board of Health  
Karen Harrison, Florence Schools  
Ron Yadro, School Board  
Sarah Foster, School Psychologist  
Zach Wedge, High School Counselor  
Jeff Rickaby, Sheriff  
Barb Bauer, ADRC  
Sue Hoogland, Tavern owner  
Chris Gall, St. Mary’s Catholic Church

**Mental Health Coalition members**
Ann Price, Health/ADRC  
Jen Steber, HSD Director  
Janet Nanninga, HSD Social Worker  
Alyssa Kerscher, HSD Social Worker  
Cassie Dumke, TORPEDOS  
Emily Macha, TORPEDOS  
Meg Dallapiazza, UWEX  
Gail Poquette, St. Vincent dePaul  
Karen Wertanen, RN, Community  
Margie Yadro, Land Conservation  
Annette Seibold, Health  
Sarah Giddings, Health  
Barb Bauer, ADRC Director

**Coalition Building**

Coalitions can increase their potential power by ensuring that they include not only the “movers and shakers,” but also the “grassroots” folks who have strong links within the community.

**Twelve Key Sectors for Effective Coalitions**
1. Youth  
2. Parents  
3. Business community  
4. Media  
5. Schools  
6. Youth-serving organizations  
7. Law enforcement agencies  
8. Religious or fraternal organizations  
9. Civic and volunteer groups  
10. Healthcare professionals  
11. State/local/tribal agencies with expertise in substance abuse  
12. Other organizations involved in reducing substance abuse

Source: Objectives with Focus v 1.1: February 2015  
[www.wicommunityhealth.org](http://www.wicommunityhealth.org)  
Wisconsin Community Health Improvement Plans and Processes (CHIPP) Infrastructure Improvement Project
Goals and Strategies

**Alcohol and Drug Use**

**Goal 1:**
Decrease binge drinking among all Florence County residents from 28% to 23% by December 31, 2020.

**Strategy 1:**
**Implement school curriculum - Lion’s Quest**
During the 2015-2016 school year, Zach Wedge, Karen Harrison and Sara Foster will gather information and receive additional training on Lion’s Quest, a K-12 comprehensive youth development program that promotes social and emotional learning (SEL), character education, bullying prevention, drug awareness, and service-learning.

**Expected Beneficial Outcomes**
- Reduced excessive drinking
- Reduced drug use
- Engage students, families, schools and community members
- Provide opportunities for young people to learn essential life skills
- Increase protective factors and reduce risk factors
- Engage young people in the practice of good citizenship
- Strengthen young people’s commitment to family, positive peers, school and community

**Evidence Base**
According to What Works for Health Wisconsin, there is some evidence that universal school-based programs reduce alcohol misuse among youth aged 18 and younger.

In addition, the report states that programs that target use of alcohol and other drugs as well as antisocial behavior may be more effective than programs that focus on alcohol alone. Programs that also focus on developing peer resistance and other skills (i.e., psychosocial programs) appear more likely to have positive effects than alcohol programs alone.

**Status**
The school already purchased the curriculum, but due to high demands to meet other curriculum requirements, along with staff turnover, implementation of the program has been inconsistent.

School staff said that it should be possible to begin more uniform implementation within a year and develop staff and administration “buy-in” over the course of the next five years.
Goals and Strategies

Alcohol and Drug Use
Goal 1 (continued):
Decrease binge drinking among all Florence County residents from 28% to 23% by December 31, 2020.

Strategy 2:
Media campaign
Mass media campaigns utilize television, radio, print, and social media to increase awareness of underage drinking and its consequences. Campaigns may also include efforts to provide adults with the knowledge and skills to take actions that help prevent underage drinking.

Expected Beneficial Outcomes
• Reduced underage drinking
• Reduced excessive drinking
• Increased adult awareness of underage drinking

Evidence Base
Available evidence suggests that media campaigns effectively disseminate information; in general, campaigns may be more effective when paired with enforcement efforts (see information about local social host ordinance, next page).

Status
The coalition will implement several aspects of the campaign during 2015-2016 including:
• National campaign - Above the Influence
• School and community presentations, including motivational speakers and addiction and recovery speakers.
• Press releases, print ad
• Radio PSAs

Next Steps
Efforts will be evaluated yearly and initiatives added or modified, depending on outcomes. Social media (Twitter, Instagram) will be utilized in the future, however more planning and investigation is needed.
Goals and Strategies

**Alcohol and Drug Use**

**Goal 1 (continued):**
Decrease binge drinking among all Florence County residents from 28% to 23% by December 31, 2020.

**Strategy 3:**

**Social Host Ordinance**

Social host liability refers to laws that hold non-commercial individuals responsible for underage drinking events on property they own, lease, or otherwise control. Whereas laws prohibiting furnishing alcoholic beverages to underage persons target providing alcoholic beverages to underage persons, social host laws target providing the venue where underage drinking takes place.

**Evidence Base**

Social host ordinances are rated by What Works for Health as effective based on “expert opinion,” meaning that there is evidence that this strategy is effective, however further study is recommended.

For high school and college students, teen parties are a primary avenue for underage drinking, high consumption of alcohol, and binge drinking. Mayer, Forster, Murray, and Wagenaar (1998) found that the most common setting for drinking among high school seniors was someone else’s home. High consumption (five or more drinks) is associated with drinking in larger groups. Interventions that modify the environments in which adolescents find themselves have an impact on alcohol consumption levels. “Policies aimed at increasing the liability of adults who provide alcohol to or drink with minors may help to reduce underage drinking.” (Mayer et al: 214).

**Status**

The “Parents Who Host Lose the Most” campaign has been in place for several years in our county and was used to initiate a community discussion that lead to passage of a social host ordinance in April 2015, shortly after the new Community Health Assessment was completed and coalitions restructured. The Florence County Human Services Department was the lead agency in work on the ordinance. The AODA coalition supported a minimum of $500 and a maximum of $1000 fine.

**Next Steps**

The coalition is now working on plans to grow public support and encourage enforcement.
Goals and Strategies

Alcohol and Drug Use
Goal 2: Decrease % of Florence County residents using prescription drugs for recreation or without a prescription by 5% by December 31, 2020.

Strategies:
By January 2016, increase the proportion of the twelve key sectors for local coalitions that are represented on the Florence County AODA Coalition.

Evidence Base
“Broad based community coalitions to assess specific issues and recommend alternatives” is rated by What Works for Health as effective based on “Expert Opinion”.

While many prevention strategies focus on raising public awareness and helping individuals make healthy choices, lasting behavioral change requires a focus on community systems, policies and local conditions to affect the environment in which substance abuse occurs. The seven strategies include:
- Providing information
- Enhancing skills
- Providing support
- Enhancing access/reducing barriers
- Changing consequences (incentives/disincentives)
- Physical design
- Modifying/changing policies

Drug take-back days & sharps disposal
Proper drug disposal programs accept expired, unwanted, or unused medicines from designated users and dispose of them responsibly. Programs can be administered by state or local governments, municipal trash and recycling services, pharmacies, hospitals, clinics, or community organizations partnered with law enforcement.

Expected Beneficial Outcomes
- Reduced illicit drug use
- Reduced unintentional poisoning
- Reduced water pollution
- Improved water quality

Evidence Base
According to the report What Works for Health in Wisconsin, proper drug disposal programs are a suggested strategy to reduce illicit drug use and unintentional poisoning, reduce pharmaceutical contamination of fresh water, and improve water quality.

Status
Drug take-back day held at Health Department Saturday, May 2, 2015, with collaboration of the health department, human services, and sheriff. Sharps disposal $2/lb. during office hours at the Health Department. Annual take-back days and press releases about programs planned.
Goals and Strategies

Mental Health

Goal 1:
By December 31, 2020 there will be a decrease in hospitalizations or completed suicides among Florence County residents from 12 to 10.

Goal 2:
Increase percentage of emergency contacts with HSD resulting in a diversion/safety plan from 63% to 73% by Dec. 31 2020

Lack of resources for community members with mental health problems was the primary reason the group chose this area as the second focus area. Both goals focus on reducing completed suicides while increasing awareness about the resources available in the community.

Strategies:

- Education campaign
  - Impact of Suicide training
  - Advertise current available resources
  - Bright Minds
  - Northpointe Mental Health First aid course for coalition members
  - Newspaper articles/advertisements

- Mentoring programs
  - Rainbows
  - KAMO (Kids and Mentors Outdoors)
  - Support school Positive Behavior Integration System (PBIS)

- Positive Alternative Activities
  - Parent Cafes
  - Summer School
  - Food, Fun & Fitness
  - USDA Food program
  - Swimming and ski lessons
  - Archery program
  - Strengthening Families classes
Action Cycle

Alcohol and Drug Use
Mental Health

Planning
Two coalitions were formed and have been meeting monthly or bi-monthly to determine goals and strategies and to plan activities to work toward goals.

Implementation
Some short-term projects have been implemented, including:
- Motivational speaker Mike McGowan at Florence High School on May 13, 2015
- Drug take-back day held at Health Department Saturday, May 2, 2015.
- Above the Influence Campaign
- Social Host ordinance passed April 21, 2015
- Smoke-free ordinance added e-cigarettes.
- Evaluated “Reality Tour” program for future implementation

Evaluation
- Tools for evaluation need to be developed
- Individual projects will be evaluated and progress toward goals monitored on yearly basis
- Strategies and plans will evolve and change based on results