Community Health Needs Assessment

Mayo Clinic Health System – Franciscan Healthcare in Sparta

October 31, 2016
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Executive Summary

**Enterprise Overview:**
Mayo Clinic is a nonprofit, worldwide leader in patient care, research and education. Each year, Mayo Clinic serves more than 1 million patients from communities throughout the world, offering a full spectrum of care from health information, preventive and primary care to the most complex medical care possible. Mayo Clinic provides these services through many campuses and facilities, including 24 hospitals located in communities throughout the United States, including Arizona, Florida, Iowa, Minnesota and Wisconsin.

Mayo Clinic provides a significant benefit to all communities, local to global, through its education and research. Mayo Clinic reinvests its net operating income funds to advance breakthroughs in treatments and cures for all types of human disease and brings this new knowledge to patient care quickly. Through its expertise and mission in integrated, multidisciplinary medicine and academic activities, Mayo Clinic is uniquely positioned to advance medicine and bring discovery to practice more efficiently and effectively.

Through its Centers for the Science of Health Care Delivery and Population Health Management, Mayo Clinic explores and advances affordable, effective health care models to improve quality, efficiency and accessibility in health care delivery to people everywhere.

**Entity Overview:**
Mayo Clinic Health System - Franciscan Healthcare provides community-based care at 10 locations across southwestern Wisconsin, southeastern Minnesota and northeastern Iowa. Employing 3,500 people, including 200 providers, Mayo Clinic Health System – Franciscan Healthcare is one of the region's largest employers.

**Locations**
- Wisconsin: Arcadia, Holmen, La Crosse, Onalaska, Prairie du Chien, Sparta and Tomah
- Minnesota: La Crescent and Caledonia
- Iowa: Waukon and Decorah

**Care and services**
Clinical care includes hospitals in La Crosse and Sparta, 10 community clinics and related clinical services.

The La Crosse location offers a full spectrum of health care services, including family medicine, behavioral health, emergency and urgent care, surgery, obstetrics and gynecology, neonatal intensive care, cancer treatment, medical imaging, occupational medicine, home nursing, home medical equipment, pharmacy and laboratory. The Sparta location is a critical access hospital offering family medicine, emergency services, general surgery and a transitional care unit.
Education affiliations

- Franciscan Healthcare School of Anesthesia (Wisconsin’s only Certified Registered Nurse Anesthetist program, in conjunction with the University of Wisconsin - La Crosse)
- La Crosse-Mayo Family Medicine Residency (family medicine training with an emphasis on community-based care)

Research
Mayo Clinic Health System - Franciscan Healthcare professionals team up with scientists at Mayo Clinic and research centers across the country to evaluate new treatments and make cutting-edge technologies available to our patients. A variety of clinical trials related to breast cancer; other cancers, heart disease and geriatrics are offered.

Provider-owned health plan
Health Tradition Health Plan is licensed in Wisconsin and offers insurance plans for individuals and businesses.

Community benefit
Mayo Clinic Health System – Franciscan Healthcare participates in broader community partnerships that improve health and wellness.

It serves as a host for the St. Clare Health Mission (La Crosse and Sparta campuses), whose volunteer staff provides care for uninsured and underinsured individuals who are not eligible for government-funded medical assistance programs

We are a founding partner of the La Crosse Medical Health Science Consortium, whose initiatives include building a strong local health care workforce; supporting healthy foods/active lifestyles; promoting mental health and well-being; preventing violence; and decreasing communicable diseases

Our approach to community wellness focuses on gardening and healthy foods and includes:

- Promotion of local, sustainable food systems to address issues of obesity, chronic disease and food availability
- Donations of space for community gardens on our La Crosse and Onalaska campuses, with 10 percent of the produce donated to local food pantries
- A mobile teaching kitchen, used to engage people in easy ways to prepare delicious, fresh, healthy foods

Collaborative partnerships with the University of Wisconsin – La Crosse, Western Technical College, Viterbo University, Hillview Urban Agriculture Center, GROW La Crosse, WisCorps, Boys & Girls Club of Greater La Crosse and others.
Summary of Community Health Needs Assessment:
The Community Health Needs Assessment was a collaborative effort undertaken as part of COMPASS NOW, a comprehensive assessment of community needs facilitated by Great Rivers United Way. The 2015 COMPASS NOW is the report’s fifth iteration, with previous reports published in 1995, 2001, 2007 and 2012. COMPASS NOW assesses needs in four categories: health, community, education and income/economic.

Partners in the Health Needs Assessment included Mayo Clinic Health System – Franciscan Healthcare, Great Rivers United Way, other area health care organizations and county health departments.

Under the direction of the COMPASS NOW Steering Committee (see Attachment A), a broad spectrum of community information was gathered in four ways:

1. Random household survey
2. Convenience survey used to reach under-represented groups
3. Community conversations
4. Extensive review of available health and socio-economic indicators, which provided an inventory of community resources

Widespread community involvement was integral to the COMPASS NOW needs assessment. More than 1,700 people contributed to the results of this report, by completing the household survey, participating in the convenience sampling, engaging in a community conversation, or serving as a COMPASS NOW steering committee or council member.

In the health category, COMPASS NOW 2015 identified the following top priority needs:

- Chronic disease and contributors to chronic disease
- Mental health and/or substance abuse
- Oral health

After reviewing the information and data contained within COMPASS NOW and considering the findings of the community health needs assessment, Mayo Clinic Health System – Franciscan Healthcare in Sparta adopted two top priority needs of equal importance as the focus for its community health improvement plan. They are:

- Chronic disease and contributors to chronic disease
- Mental health and/or substance abuse
Our Community

**Geographic Area:**
Mayo Clinic Health System — Franciscan Healthcare in Sparta’s hospital is located in west-central Monroe County. This is a critical access hospital and offers emergency services, as well as general surgery and a transitional care unit. Clinical and administrative support is provided by the Mayo Clinic Health System – Franciscan Healthcare in La Crosse. Patients of the Sparta hospital come from Monroe County. The largest employer in the area is Fort McCoy, a U.S. Army installation.

![Map of Monroe County, Wis.](image)

**Demographics:**

**Monroe County, Wis.**
- Population: 44,673
- Population in poverty: 14.4 percent
- Unemployment rate: 6.3 percent
- Uninsured ages 18-64: 22.3 percent
- Uninsured under age 18: 13.7 percent
- Adults 25+ years with a high school education or less: 27.9 percent

**La Crosse County, Wis.**
- Population: 114,638
- Population in poverty: 14 percent
- Unemployment rate: 5.9 percent
- Uninsured ages 18-64: 18.7 percent
- Uninsured under age 18: 2.7 percent
- Adults 25+ years with a high school education or less: 29.9 percent
Trempealeau County, Wis.
Population: 28,816
Population in poverty: 11.9 percent
Unemployment rate: 5.6 percent
Uninsured ages 18-64: 21.2 percent
Uninsured under age 18: 10 percent
Adults 25+ years with a high school education or less: 55.3 percent

Vernon County, Wis.
Population: 29,773
Population in poverty: 14.5 percent
Unemployment rate: 5.5 percent
Uninsured ages 18-64: 28.3 percent
Uninsured under age 18: 25.8 percent
Adults 25+ years with a high school education or less: 55.7 percent

Houston County, Minn.
Population: 19,027
Population in poverty: 10.9 percent
Unemployment rate: 5.8 percent
Uninsured ages 18-64: 11.3 percent
Uninsured under age 18: 3.1 percent
Adults 25+ years with a high school education or less: 39.1 percent

The racial make-up for the five-county region is predominately white with the largest ancestry groups in the region being German, Norwegian and Irish. The two largest ethnic populations are Hispanic/Latino and Asian. According to the 2010 U.S. Census, 5.8 percent of the population of Trempealeau County is Latino, up from only 0.9 percent a decade before. During the same period, the Hmong population increased by nearly 1,000 citizens in La Crosse County; they now make up 4.1 percent of the total population.
Assessing the Needs of the Community

Overview:
Mayo Clinic Health System — Franciscan Healthcare is a member of the Great Rivers United Way COMPASS NOW coalition. Coalition members include:

- Great Rivers United Way
- La Crosse Community Foundation
- Otto Bremer Foundation
- Gundersen Health System
- Gundersen St. Joseph’s Hospital and Clinics
- Gundersen Tri-County Hospital and Clinics
- Mayo Clinic Health System – Franciscan Healthcare in La Crosse
- Mayo Clinic Health System – Franciscan Healthcare in Sparta
- Tomah Memorial Hospital
- Vernon Memorial Healthcare
- Houston County Health Department
- La Crosse County Health Department
- Monroe County Health Department
- Trempealeau County Health Department
- Vernon County Health Department

The COMPASS NOW report includes needs assessments in four categories: community, education, income/economic and health, which also is known as the community health needs assessment). The COMPASS NOW Health Council (see Attachment B) was charged with reviewing and evaluating health data for the five-county region. The group then recommended three health needs to the COMPASS NOW Steering Committee as top priorities.

Mayo Clinic Health System — Franciscan Healthcare also convened an Internal Review Committee (see Attachment C) to review and consider the outcome of the community health needs assessment. This committee included the regional CEO and leadership from the Sparta and La Crosse hospitals.

Community Input:
The COMPASS NOW survey was mailed to 5,000 randomly selected households in the five-county area to ensure that every household in the region had an equal chance of being selected to receive a survey. Ninety-seven percent of the survey respondents were Caucasian, compared to about 94 percent of the general population in the region (see Attachment D).
In addition to the random household survey, a convenience sample was used to reach specific subgroups (see Attachment E). The overall objective of this sampling was to collect feedback from populations within the community that potentially were underrepresented in the random household survey due to their small numbers. These smaller populations included, but were not limited to, African-Americans, Hispanics, LGBT youth, at-risk youth, low-income adults and seniors. Among those responding to the convenience survey, 74.5 percent were Caucasian, 6.5 percent Hispanic, 4.9 percent African-American, 4.4 percent Hmong and 1.2 percent Native American.

Feedback also was gathered via five separate community conversations (see Attachment F). These gatherings took place in La Crosse and Monroe counties in order to engage their larger Hmong and Hispanic minority populations, respectively.

**Process and Methods:**

COMPASS NOW gathered information in multiple ways:

- 90-item household survey mailed to 5,000 randomly selected households in the five counties
- Additional 753-participant convenience sampling, focusing on members of smaller and potentially underrepresented subgroups
- Community conversations
- COMPASS council meetings to identify priority issues and identify resources in the community

Over 1,700 community members contributed to the results of the COMPASS NOW report. The data collected guided the development of four profiles that create the building blocks to a better life: Health, Income, Education and Community.

COMPASS NOW is intended to serve as a foundation for the development of action plans that solve problems, long term. Great Rivers United Way uses COMPASS NOW to guide its grant allocation process and develop its strategic plan. Health care organizations and county health departments use COMPASS NOW to develop government-mandated community health improvement plans.

The full COMPASS NOW report, including all appendices, can be viewed at:
Addressing the Needs of the Community

Overview:
COMPASS councils – comprised of local experts in the fields of education, income, health and a variety of community issues – were convened to serve as advisory groups. The Health Council, responsible for the community health needs assessment, reviewed data, analyzed survey and community conversation results, and offered professional insights about topic-specific issues.

Identified Health Needs:
The Health Council identified 12 significant community health issues:

- Maternal and child health
- Communicable disease prevention and control
- Mental health
- Oral health
- Prenatal care
- Teen births
- Chronic disease
- Suicide
- Substance use
- Lifestyle factors
- Prescription and illegal drugs
- Lyme disease

Prioritization Process and Criteria
Health Council members then ranked these issues using the following criteria:

1. How widespread is the issue in our community?
2. How serious are the effects of the issue in our community?
3. How important is the issue to the community?

Based on their rankings, the Health Council recommended three top priority health issues for review by the COMPASS NOW steering committee.

Identified Priorities
As a result of this process, the COMPASS NOW community health needs assessment cites three top priority health issues (in alphabetical order):

- Chronic disease and contributors to chronic disease
- Mental health and/or substance abuse
- Oral health
The Mayo Clinic Health System — Franciscan Healthcare internal review committee met on June 13, 2016 to examine the health-related data and findings contained within COMPASS NOW.

In reviewing the three top priority health needs identified in COMPASS NOW, the internal review committee considered the Sparta hospital’s capacity to address each priority and to affect change in the community. The hospital does not have a dental or oral surgery practice, so it lacks the expertise and resources necessary to address oral health in a meaningful way. Because of this, oral health will not be included in the hospital’s implementation plan, though the hospital will support community initiatives that address oral healthcare needs and expand access to services.

The Sparta hospital will develop an implementation plan to address two top priority needs, of equal importance, identified in the community health needs assessment:

- Chronic disease and contributors to chronic disease
- Mental health and/or substance abuse

**Available Resources**

Great Rivers 2-1-1 provides a single access point for complete and current information for over 4,200 community and human service programs offered by a variety of organizations and agencies. Its database encompasses:

- Support groups
- In-home services
- Alcohol and drug abuse
- Suicidal thoughts and feelings
- Community/cultural events
- Landlord/tenant issues
- Relationship/family problems
- Stress
- Parenting concerns
- Depression
- Unplanned pregnancy
- Adult and child abuse
- Victim of sexual abuse
- Temporary shelter/housing
- Food resources

The resources of Great Rivers 2-1-1 can be accessed by dialing 2-1-1 or 800-362-8255 (TTY 866-884-3620). Calls are toll-free in Wisconsin, Minnesota and Iowa, and language interpretation is available. Resources also may be accessed by visiting: [http://www.greatrivers211.org](http://www.greatrivers211.org)
Evaluation of Prior CHNA and Implementation Strategy

Mayo Clinic Health System — Franciscan Healthcare in Sparta’s hospital published its first community health needs assessment on October 31, 2013. To date, no written public comments have been received regarding the report or its corresponding implementation plan.

2015 Community Health Needs Assessment Implementation Plan Report:
The Sparta hospital worked to address identified community health needs via three approaches: patient care services, community programs and community investment. This three-pronged approach allows the hospital to enhance the overall health of the community by providing high-quality health care, promoting healthy behaviors within the community, and building partnerships with like-minded organizations to address community health needs on a larger scale.

Community partnerships have proven an effective means for stretching resources and reaching more people. As a partner in efforts to address identified health needs, the Sparta hospital may provide monetary support, in-kind support, health care staff and expertise, or any combination of these resources. In 2015, the Sparta hospital provided more than $3.3 million in reportable community benefit to improve the overall health of people in Monroe County.

Identified need: Alcohol use
Mayo Clinic Health System — Franciscan Healthcare in Sparta (MCHS-Sparta) continues to provide alcohol and other drug treatment and prevention services that address the needs of its patients.

MCHS-Sparta also participated in Monroe County’s alcohol and other drug-abuse initiative and worked with Tri-County Heroin Addiction coalition as a treatment resource for the law enforcement agencies in Monroe, La Crosse and Vernon counties. In-kind contributions total $5,274.

Identified need: Access to health care
MCHS-Sparta operates St. Clare Health Mission of Sparta, a free, basic health care clinic that serves individuals living in Monroe County and who have no medical insurance or do not qualify for public assistance. Physicians and staff volunteer at the clinic. The clinic fills prescriptions written at the mission free of charge at the on-site pharmacy.

MCHS-Sparta also continues to provide prevention and treatment services that address patients’ needs and participates in the Wisconsin Well Woman Program, providing uninsured and underinsured patients with access to screenings. During this period, a total of 73 area women were enrolled in the Wisconsin Well Woman Program.
MCHS-Sparta serves as a partner facility for Scenic Bluffs Community Health Center, which operates locations in Cashton and Norwalk, Wis. The center offers primary and behavioral health care and outreach services to patients on a sliding-fee scale, including insured patients with high deductibles. During the period, Scenic Bluffs Health Center provided medical services to 2,692 patients during 7,408 visits. In addition to serving as a partner facility, MCHS-Sparta provided contributions totaling $1,100.

**Identified need: Mental health**
MCHS-Sparta continues to offer mental health treatment and prevention services that address the needs of its patients.

It participates in Monroe County mental health work group initiatives, which include increasing individual and community knowledge of depression symptoms and suicide. MCHS Sparta also participates in the county’s educational sessions on anti-bullying.

MCHS-Sparta designated community investment dollars for the National Alliance for Mental Illness (NAMI) of Monroe County for programs that educate the community about mental illness. Cash contribution totaled $1,200.

**Identified need: Obesity**
MCHS-Sparta continues to offer healthy-eating, physical activity and stress-reduction programs that meet the needs of patients and employees, including a community supported agriculture (CSA) benefit as part of its health plan.

The hospital installed three edible-landscape planters at its main entrance to demonstrate small-space gardening techniques and engage patients, visitors and staff in conversations about growing and consuming healthy foods.

It participated in Monroe County programs to increase individual and community knowledge related to nutrition and physical activity. And MCHS-Sparta designated community investment dollars to support a healthy-living program offered by the Tomah Area School District. Cash contribution totaled $500.

**Identified need: Dental care access and cost**
MCHS-Sparta operates an oral-surgery program that provides dental surgery access and minor restorative procedures to pediatric patients who are not able to be seen by area dentists. During the period, these services were provided to 57 patients.

MCHS-Sparta also supported dental care for low-income and rural residents of Monroe County through its support of Scenic Bluffs Community Health Center. The center provided dental services to 6,421 patients.
Appendix A: 2015 COMPASS NOW, Steering Committee

Pauline Byom, Mayo Clinic Health System
Tracy Herlitzke, Cooperative Educational Service Agency (CESA) #4
Catherine Kolkmeier, La Crosse Medical Health Science Consortium
Jenny Kuderer, Wisconsin Economic Development Corporation
Jason Larsen, La Crosse Area Family Collaborative
Mary Meehan-Strub, La Crosse County University of Wisconsin Extension
Eric Prise, Tomah Memorial Hospital
Heather Quackenboss, La Crosse Community Foundation
Brenda Rooney, Gundersen Health System
Shelly Teadt, CouleeCap
Mary Kay Wolf, Great Rivers United Way
Appendix B: 2015 COMPASS NOW, Health Council

Sandra Brekke, St. Clare Health Mission
Ben Crenshaw, Mayo Clinic Health System
Jessie Cunningham, Vernon Memorial Healthcare
Kayleigh Day, Monroe County Health Department
Christine Dean, Gundersen St. Joseph’s Hospital & Clinics
Karen Ehle-Traastad, Vernon County UW Extension
Mari Freiberg, Scenic Bluffs Community Health Centers
Lori Freit-Hammes, Mayo Clinic Health System
Beth Hartung, Consultant, WFPRHA
Sarah Havens, Gundersen Health System
Beth Johnson, Vernon County Health Department
Betty Jorgenson, Mayo Clinic Health System
Mary Koenig, Vernon Memorial Healthcare
Keith Lease, Western Technical College
Patricia Malone, Trempealeau County UW Extension
Mary Meehan-Strub, La Crosse County UW Extension
Heather Myhre, Houston County Health Department
Sharon Nelson, Monroe County Health Department
Eric Prise, Tomah Memorial Hospital
Sarah Spah, Mayo Clinic Health System
Cheryl Rhoda, Trempealeau County Health Department
Brian Theiler, Gundersen Tri-County Hospital & Clinics
Appendix C: Mayo Clinic Health System-Franciscan Healthcare, Internal Review Committee

Cheristi Cognetta-Rieke, RN, Patient Care Administrator
Ben Crenshaw, director, Practice Operations
Katherine Erlandson, director, Practice Operations
Lori Freit-Hammes, director, Health Promotion
Peter Grabow, administrator, External Affairs and Volunteer Services
Diane Holmay, RN, chief nursing officer
Tanner Holst, vice president, Specialty Care
Peter Hughes, vice president, Planning Services
Ajay Jayakumar, manager, Quality Performance and Analysis
Timothy Johnson, MD, chief executive officer
Diane Otte, RN, director, Oncology
David Rushlow, MD, chief medical officer
Teri Wildt, director, Community Engagement
Appendix D: Random Household Survey Results—Aspects of Health

### County Comparisons

<table>
<thead>
<tr>
<th>Overall Rating of Community as a Place to Live</th>
<th>La Crosse (55.4%)</th>
<th>Monroe (15.8%)</th>
<th>Trempealeau (8.8%)</th>
<th>Vernon (11.5%)</th>
<th>Houston (8.5%)</th>
<th>Difference in rating by county</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor/fair</td>
<td>7.4%</td>
<td>20.8%</td>
<td>25.4%</td>
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<td>Good</td>
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<td>Excellent</td>
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<td>Mean Score</td>
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<td>3.32</td>
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Trempealeau County respondents rated their community as a place to live lower than the other communities. 25% indicated their community rated fair or poor on this.

### Aspects of Health

<table>
<thead>
<tr>
<th>Overall Health</th>
<th>La Crosse (55.4%)</th>
<th>Monroe (15.8%)</th>
<th>Trempealeau (8.8%)</th>
<th>Vernon (11.5%)</th>
<th>Houston (8.5%)</th>
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### Overall Mental Health

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<tr>
<td>Poor/fair</td>
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<td>Good</td>
<td>54.0%</td>
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<td>52.2%</td>
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### Overall Dental Health

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<th>Houston (8.5%)</th>
<th>Difference in rating by county</th>
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<tr>
<td>Excellent</td>
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<td>24.6%</td>
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### Access to Health Care

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<tr>
<td>Poor/fair</td>
<td>5.1%</td>
<td>11.4%</td>
<td>27.5%</td>
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<tr>
<td>Good</td>
<td>30.6%</td>
<td>45.5%</td>
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<tr>
<td>Excellent</td>
<td>64.4%</td>
<td>43.1%</td>
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### Access to Mental Health Care

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<tr>
<td>Poor/fair</td>
<td>11.2%</td>
<td>16.0%</td>
<td>29.5%</td>
<td>16.0%</td>
<td>17.2%</td>
<td>0.0001</td>
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<tr>
<td>Good</td>
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<td>37.5%</td>
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<tr>
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<td>45.3%</td>
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<td>Poor/fair</td>
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<td>6.0%</td>
</tr>
<tr>
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<td>Good</td>
<td>31.6%</td>
<td>45.2%</td>
<td>30.4%</td>
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<td>38.8%</td>
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<tr>
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<td>3.01</td>
<td>3.24</td>
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<td>Poor/fair</td>
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<td>19.4%</td>
<td>26.1%</td>
<td>15.7%</td>
<td>9.0%</td>
</tr>
<tr>
<td></td>
<td>Good</td>
<td>37.4%</td>
<td>47.6%</td>
<td>39.1%</td>
<td>37.1%</td>
<td>44.8%</td>
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<tr>
<td></td>
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<td>45.2%</td>
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<td>32.6%</td>
<td>34.3%</td>
</tr>
<tr>
<td></td>
<td>Good</td>
<td>43.2%</td>
<td>38.7%</td>
<td>45.6%</td>
<td>50.6%</td>
<td>46.3%</td>
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<td>37.9%</td>
</tr>
<tr>
<td></td>
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<td>42.9%</td>
<td>41.7%</td>
<td>37.5%</td>
<td>46.5%</td>
<td>45.5%</td>
</tr>
<tr>
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<td>12.5%</td>
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<td>33.7%</td>
<td>40.3%</td>
<td>41.2%</td>
<td>37.8%</td>
<td>32.8%</td>
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<tr>
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<td>44.4%</td>
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<td>47.8%</td>
<td>47.8%</td>
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<tr>
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<td>15.3%</td>
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<td>2.62</td>
<td>2.62</td>
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<td>Ability to pay for healthy food choices</td>
<td>Poor/fair</td>
<td>23.1%</td>
<td>32.3%</td>
<td>29.4%</td>
<td>23.6%</td>
<td>25.8%</td>
</tr>
<tr>
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<td>Good</td>
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<td>50.8%</td>
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<td>45.5%</td>
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<td>2.97</td>
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<td>Quality of water in the rivers and lakes in your community</td>
<td>Poor/fair</td>
<td>34.9%</td>
<td>31.7%</td>
<td>40.3%</td>
<td>27.8%</td>
<td>47.8%</td>
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<tr>
<td></td>
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<td>51.5%</td>
<td>60.2%</td>
<td>44.8%</td>
<td>51.1%</td>
<td>43.3%</td>
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<tr>
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<td>8.1%</td>
<td>14.9%</td>
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<td>9.0%</td>
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<tr>
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<td>2.74</td>
<td>2.70</td>
<td>2.90</td>
<td>2.49</td>
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<tr>
<td>Everyone have Insurance (% yes)</td>
<td>Poor/fair</td>
<td>93.9%</td>
<td>92.7%</td>
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<td>60.2%</td>
<td>44.8%</td>
<td>51.1%</td>
<td>43.3%</td>
</tr>
<tr>
<td></td>
<td>Excellent</td>
<td>13.6%</td>
<td>8.1%</td>
<td>14.9%</td>
<td>21.1%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Mean Score</td>
<td></td>
<td>2.73</td>
<td>2.74</td>
<td>2.70</td>
<td>2.90</td>
<td>2.49</td>
</tr>
<tr>
<td>Avoid seeing a doctor in past 12 months because of cost (% yes)</td>
<td>Poor/fair</td>
<td>26.6%</td>
<td>29.0%</td>
<td>24.6%</td>
<td>29.2%</td>
<td>27.3%</td>
</tr>
<tr>
<td></td>
<td>Good</td>
<td>51.5%</td>
<td>60.2%</td>
<td>44.8%</td>
<td>51.1%</td>
<td>43.3%</td>
</tr>
<tr>
<td></td>
<td>Excellent</td>
<td>13.6%</td>
<td>8.1%</td>
<td>14.9%</td>
<td>21.1%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Mean Score</td>
<td></td>
<td>2.73</td>
<td>2.74</td>
<td>2.70</td>
<td>2.90</td>
<td>2.49</td>
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## Appendix E: Convenience Sample Results - Aspects of Health

### Overall Rating of Community as a Place to Live

<table>
<thead>
<tr>
<th>Rating</th>
<th>Random Sample</th>
<th>Convenience Sample</th>
<th>Difference between surveys</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fair/poor</td>
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<td>132</td>
<td>11.0%</td>
</tr>
<tr>
<td>Good</td>
<td>414</td>
<td>404</td>
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</tr>
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### Aspects of Health

#### Overall Health (q4a)

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<th>Convenience Sample</th>
<th>Difference between surveys</th>
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</thead>
<tbody>
<tr>
<td>Fair/poor</td>
<td>98</td>
<td>144</td>
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</tr>
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<td>Good</td>
<td>498</td>
<td>431</td>
<td>63.0%</td>
</tr>
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#### Mental Health (q4b)

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<th>Difference between surveys</th>
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</thead>
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<tr>
<td>Fair/poor</td>
<td>56</td>
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</tr>
<tr>
<td>Good</td>
<td>434</td>
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#### Dental Health (q4c)

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</thead>
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<td>Fair/poor</td>
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<td>Good</td>
<td>412</td>
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<td>Excellent</td>
<td>246</td>
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#### Access to Health Care (q4d)

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<th>Convenience Sample</th>
<th>Difference between surveys</th>
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<tr>
<td>Fair/poor</td>
<td>68</td>
<td>132</td>
<td>8.6%</td>
</tr>
<tr>
<td>Good</td>
<td>278</td>
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<td>Excellent</td>
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#### Access to Mental Health Care (q4e)

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<th>Difference between surveys</th>
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<td>Fair/poor</td>
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<td>11.9%</td>
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<td>Good</td>
<td>309</td>
<td>258</td>
<td>39.1%</td>
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<td>Excellent</td>
<td>333</td>
<td>160</td>
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#### Access to Dental Care (q4f)

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<td>207</td>
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<td>281</td>
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</tr>
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<td>Excellent</td>
<td>425</td>
<td>253</td>
<td>53.7%</td>
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<td>0.0001</td>
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<td>11.5%</td>
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<td>-----------</td>
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<td>Excellent</td>
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<td>303</td>
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</tr>
<tr>
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<td>274</td>
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<tr>
<td>Everyone have insurance (q20) % no</td>
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<td>6.9%</td>
<td>147</td>
</tr>
<tr>
<td>Avoid care in past 12 months because of cost (q21) % yes</td>
<td>212</td>
<td>27.1%</td>
<td>259</td>
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</table>
Appendix F: Convenience Sample Results

COMMUNITY CONVERSATION #1
Date: May 14, 2015
Time: 6:00 to 8:00 p.m.
Location: Southside Community Center, 1300 S. 6th St., La Crosse, WI 54601
Target Audience/Participant: African American Community
Identified Community Needs:
- Alcohol and drug use
- Children with no direction/guidance*
- Community Communication*
- Education*
- Racial Relations

Additional Feedback/Comments:
Participants recognized the need for more community outlets by youth and youth mentoring coming directly from positive peers within the neighborhoods vs. outsiders coming in to work with youth. Also, the group felt more faith-based, neighborhood-focused opportunities to keep youth on a positive path would be helpful.

COMMUNITY CONVERSATION #2
Date: June 26, 2015
Time: 5:30 to 7:00 p.m.
Location: Boys & Girls Clubs of Greater La Crosse, 811 8th St. S., La Crosse, WI 54601
Target Audience/Participant: Low-Income Adults
Identified Community Assets:
- Neighborhood
- Resources*
- School

Identified Community Needs:
- Bullying
- Crime
- Housing*
- Jobs*
- Parks
- Roads*
- Trains

COMMUNITY CONVERSATION #3
Date: June 26, 2015
Time: 5:30 to 7:00 p.m.
Location: Boys & Girls Clubs of Greater La Crosse, 811 8th St. S., La Crosse, WI 54601
Target Audience/Participant: Youth At-Risk
Identified Community Assets:
- Activities*
- Environment
- Friends
- Safety*
- Schools*

Identified Community Needs:
- Activities
- Schools*
- Environment*
- Friends
COMMUNITY CONVERSATION #4

Date: October 1, 2015
Time: 6:00 to 8:00 p.m.
Location: Lugar de Reunion, 201 E. Franklin St., Room B3, Sparta, WI 54656

Target Audience/Participant: Hispanic Community

Identified Community Assets:
- Healthy food choices/farmer’s market
- Clean community
- Safe community
- Good education system for children
- Having a community center for the Hispanic community

Identified Community Needs:
- Child Care
- Transportation
- Safety
- Adult Education
- Health
- Respect
- The need for more interpreters
- Access to healthy food
- The need for more recreational activities

Additional Feedback/Comments:
- Abuse
- At-risk youth
- Food availability
- Jobs with adequate income
- Poverty
- Substance use, abuse, and dependency
COMMUNITY CONVERSATION #5

Date: October 2, 2015
Time: 10:00 a.m. to 12:00 p.m.
Location: Lugar de Reunion, 201 E. Franklin St., Room B3, Sparta, WI 54656

Target Audience/Participant: Hispanic Community

Identified Community Assets:
- Support for Hispanic community
- Work opportunities
- Children’s education

Identified Community Needs:
- Child Care
- Access to driver’s license
- Training for immigrants
- Discrimination (police and in the workforce)
- Education
- The need for more bilingual people and interpreters at places of business, clinics, and hospitals
- Accessible banks

Additional Feedback/Comments:
- At-risk youth
- Availability of quality housing
- Discrimination towards Hispanics
- Drivers licensing – limit barriers to obtaining
- Food availability
- Help with housing repairs
- Jobs with adequate income
- Medical health
- Need for more personal bilingual instructors in public hospitals
- Organization that helps pay medical bills for those who cannot pay
- Poverty
- Substance use, abuse and dependency