

Community Health Needs Assessment 2022

Mayo Clinic Health System-Northland





Table of contents

SECTION 1 - Executive Summary

- 4 Enterprise Overview
- 5 Entity Overview
- 6 Summary of Community Health Needs Assessment

SECTION 2 - Our Community

8 Demographic Overview

SECTION 3 - Assessing the Needs of the Community

- 10 Community Input
- 10 Process and Methods

SECTION 4 - Addressing the Needs of the Community

- 19 Prioritization Process and Criteria
- 20 Identified Needs
- 22 Available Resources within the Community to Address the Identified Needs

SECTION 5 - Evaluation of Prior CHNA and Implementation

- 23 Evaluation of impact since previous CHNA
- 29 References
- 30 Appendix A Barron County Demographics
- 32 Appendix B Barron County Core Data Sets
- 36 Appendix C Thrive Barron County Steering Committee Members



Executive Summary

Enterprise Overview



MAYO CLINIC

Mayo Clinic is a not-for-profit organization with a mission to inspire hope and promote health through integrated clinical practice, education, and research. Mayo Clinic serves more than 1.4 million patients annually from every U.S. state and communities throughout the world, offering a full spectrum of care from health information, preventive, and primary care to the most complex medical care. Mayo Clinic has locations in Rochester, MN; Scottsdale and Phoenix, AZ; Jacksonville, FL; and many Mayo Clinic Health System sites in Minnesota and Wisconsin.

COMMITMENT TO COMMUNITY

Through its interdisciplinary expertise in medical practice, research and education, Mayo Clinic serves communities everywhere. Mayo Clinic reinvests its net operating income to advance breakthroughs in diagnoses, treatments and cures for all varieties and complexity of human disease and quickly translates this new knowledge to advance the practice of medicine. One example illuminating this is how Mayo Clinic responded to the COVID-19 pandemic, which intensified existing community health needs. Mayo Clinic's front-line and virtual reams cared for more than 160,000 patients with COVID-19 in 2021. Mayo staff tested more than 1.1 million people for COVID-19, administered more than 500,000 COVID-19 vaccinations, and provided more than 19,000 monoclonal antibody infusions. In addition to its extensive medical, public health and research response, Mayo Clinic also cared for broader aspects of community need, including assistance to local non-profits,



schools and government agencies, human service collaborative efforts and small local businesses to help stabilize and sustain the economies of its local communities.

Entity Overview

Mayo Clinic Health System (MCHS) was created to fulfill Mayo Clinic's commitment to bring quality health care to local communities. MCHS has a physical presence in 44 communities and consists of 53 clinics, 16 hospitals and other facilities that serve the health care needs of people in Iowa, Minnesota, and Wisconsin. The more than 900 community-based providers, paired with the resources and expertise of Mayo Clinic, enable patients in the region to receive the highest-quality physical and virtual health care close to home. MCHS is recognized as one of the most successful regional health care systems in the U.S.

MCHS was developed to bring a new kind of health care to communities. By putting together integrated teams of local doctors and medical experts, we have opened the door to information sharing in a way that allows us to keep our family, friends, and neighbors healthier than ever before.

The system also provides patients with access to cutting-edge research, technology, and resources. Our communities have the peace of mind that their neighbors are working together around the clock on their behalf.

Mayo Clinic Health System – Northland in Barron is a 25-bed critical-access hospital located in Barron, Wisconsin. Since 1959, the hospital has been dedicated to promoting health and meeting the health care needs of its patients.

Barron is part of the Northwest Wisconsin region of MCHS, which includes hospitals in Eau Claire, Bloomer, Menomonie, and Osseo. Mayo Clinic Health System – Northland in Barron supports the community through inpatient and outpatient services, as well as health and wellness. Although MCHS - Northland serves patients from several communities in northwestern Wisconsin, the majority are from Barron County. For the purposes of MCHS – Northland's CHNA, the community is defined as Barron County.

In 2021, MCHS in Barron provided over \$1.8 million in charity care and more than \$3.5 million in bad debt. The organization also provided more than \$103,000 through philanthropic donations to support programs such as the Alzheimer's Association, Boys & Girls Club of Barron County, Benjamin's House Emergency Shelter, and the Salvation Army of Barron County.

Health education is also communicated through numerous blog postings, newsletter articles and informal presentations. Through online tracking and other measures, it is estimated we reached another 13,000 residents by providing health information on topics affecting immediate health issues and helpful tips on general wellness.



The MCHS Community Health Needs Assessment (CHNA) process advances and strengthens our commitment to community health and wellness activities by focusing on high-priority community needs and bringing additional ones to light.

Summary of the Health Needs Assessment

The MCHS – Northland community assessment process was led by a multisector community collaborative, Thrive Barron Steering County Committee, that encompasses the Barron County Health Department, local health care organizations, community groups and residents working together to identify Barron County's top health concerns. The committee met virtually beginning in September 2021 to determine an approach to evaluating the health needs of the greater Barron County area.

The primary input into the assessment and prioritization process was the Barron County 2021-22 Community Health Needs Assessment Survey. The 2021-22 Community Health Needs Assessment (CHNA) was designed to be a reaffirmation survey based on the findings of the extensive CHNA of 2019. The main reason for choosing this design for the CHNA, is like many others, the ongoing pandemic has limited the resources and capacity for a full needs assessment.

In early 2020, Barron County Public Health and all healthcare organizations in Barron County swiftly shifted to emergency response mode when COVID-19 began to greatly impact our community. Due to the derailment and pause of ordinary procedures and work, as well as the lack of adequate resources and staff to devote to the CHNA, the decision was made to use a reaffirmation survey.

This assessment was used to make sure that the previous community identified health priority needs within the 2019 CHNA survey are still what our Community Health Improvement Plan (CHIP) should be based around. In addition, written comments related to the previous CHNA were invited, however, no written comments were received.

Qualitative and quantitative data collection methods included:

- Analysis of existing population health data gathered from a variety of sources, including census data, government reports, health department statistics, Youth Risk Behavior Study and information collected from local hospitals and local community service organizations. Gathering this breadth of quantitative data facilitated the evaluation of how Barron County compared to state and national averages and benchmarks.
- Community input via a community perception survey was widely distributed to community resource organization representatives and residents, with 370 responses received from county residents. The survey produced quantitative data to inform the assessment process.



- The electronic survey was promoted via social media and email communication, in addition to a press release published in area newspapers announcing the initiative and asking for community participation.
- Input and information were also gathered from the Barron County Community Connections to Prosperity Coalition. This coalition is a group of organizations, businesses, and community members in Barron County, whose focus is on addressing poverty and social determinants of health and equity with a vision of helping everyone in Barron County live their best lives.
 - Members of this team include those from Benjamin's House Emergency Shelter, Aging and Disability Resource Center of Barron, Rusk & Washburn Counties, Rice Lake Area School District, UW - Madison Office of Extension, Northlakes Community Clinic and Barron County Public Health (including assistance from the Community Health Workers representing and serving the Somali and Hispanic populations.) This collaboration and outreach have allowed the assessment team to garner more valuable qualitative data as part of the assessment process.

The County Health Rankings, a joint effort of the Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute, also were considered.



Our Community



GEOGRAPHIC AREA

MCHS – Northland in Barron is in Barron County in northwestern Wisconsin. Barron has a population of 3,306, while Barron County has 45,244 residents. Barron County is considered 66% rural. MCHS – Northland's primary service area is Barron County; this report is based on the needs of the residents of Barron County. For this assessment, our community is defined geographically as Barron County, since this is where the majority of the hospital's patients live.





DEMOGRAPHICS

The population in the Northland region is young, with 22% under 18 years of age and 30% percent between the ages of 18 and 44. Currently, 23% of the regional population are over age 65. However, the 65+ age group is growing at a rapid pace, and currently is the second-largest population segment. The population is made up primarily of high school graduates and individuals who have some college education. Forty five percent of the children in Barron County are eligible for free or reduced-price lunch.

The largest ethnic populations identified by the 2021 County Health Rankings are Hispanic/Latino at 2.7% and 1.5% Non-Hispanic Black. (See Appendix A for more demographic detail.)

The largest industries in Barron County are manufacturing, health care and social assistance, and retail.



Assessing the Needs of the Community



MCHS – Northland in Barron actively contributed to the assessment process in Barron County. A comprehensive process was used to gather input from a cross-section of our community, including direct input from community members. The assessment was aimed particularly at understanding the needs of the traditionally underserved.

Process and Methods

The assessment process began with the community health planning efforts of the Thrive Barron County Steering Committee. In January 2011, a group of health care leaders formed a steering committee to lead the CHNA for Barron County. Thrive Barron County is a collaboration of various healthcare organizations and community members and agencies working together to assess and positively impact the health of Barron County. The committee was created to combine effort and resources, all with the common goal of assessing the needs of our community. This group, now called the Thrive Barron County Steering Committee, coordinated joint hospital and public health assessments in 2012, 2015 and 2018.

The steering committee also engages the Department of Health Services Western Regional Office in meetings for expertise and innovative solutions. The 2012 CHNA was conducted based on guidelines from the Healthy Wisconsin 2020 initiative. From 2012 to 2018, community health action teams made progress toward goals set after determining that the top health priorities of the county were alcohol, tobacco, and other drug abuse; chronic disease; and mental health.

However, the COVID-19 pandemic has greatly affected and impacted all of us, this includes the members of the Thrive Barron County Committee, Barron County Public Health Department, and all healthcare systems. We recognized in 2021 that the survey would need to be done differently. The



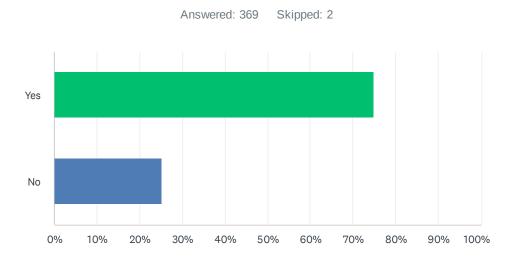
steering committee referred to the County Health Rankings and input from steering committee members to organize Barron County's 2021 Community Health Needs Assessment survey. A community reaffirmation survey was agreed upon, to affirm the priority health issues and dig deeper into root causes of, and potential strategies to address, the identified health issues. The results of the survey validated that health priorities identified in 2012, 2015 and 2018 remain the community's top health concerns for 2021-22.

Community perception survey

The collaborative health assessment process began by engaging the public through a community health needs survey. The reaffirmation survey was distributed in late 2021. The objective was to increase understanding of the community's health needs and perception of the main challenges facing the residents of Barron County.

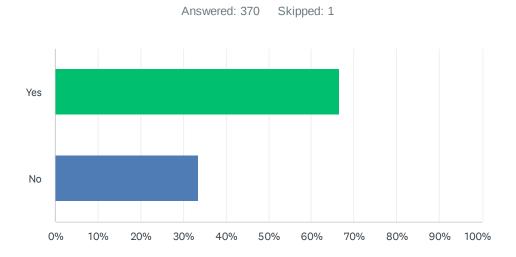
The following pages represent the questions and responses from the 2021 Barron County Community Health Needs Affirmation Survey.

Q1 Do you consider mental health a top health priority within Barron County?



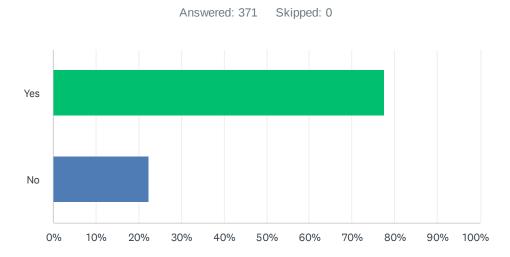
ANSWER CHOICES	RESPONSES	
Yes	74.80%	276
No	25.20%	93
TOTAL		369

Q2 Do you consider chronic disease prevention a top health priority within Barron County?

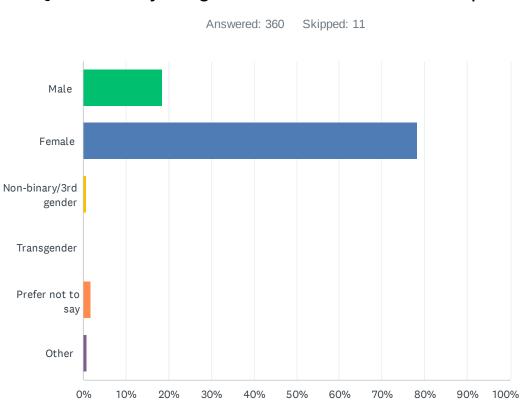


ANSWER CHOICES	RESPONSES	
Yes	66.49%	246
No	33.51%	124
TOTAL		370

Q3 Do you consider prevention and treating alcohol, tobacco, and drug misuse a top health priority within Barron County?



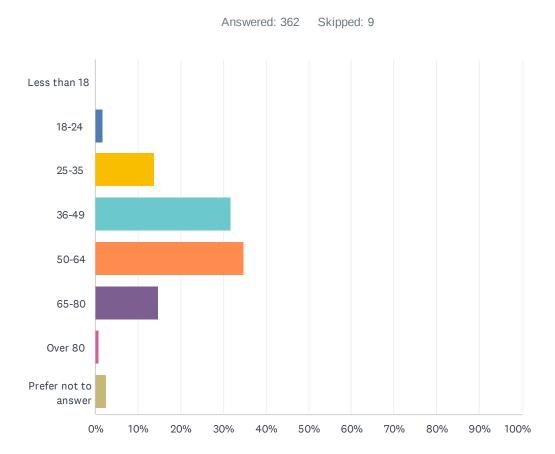
ANSWER CHOICES	RESPONSES	
Yes	77.63%	288
No	22.37%	83
TOTAL		371



ANSWER CHOICES	RESPONSES
Male	18.61% 67
Female	78.33% 282
Non-binary/3rd gender	0.56% 2
Transgender	0.00% 0
Prefer not to say	1.67% 6
Other	0.83% 3
TOTAL	360

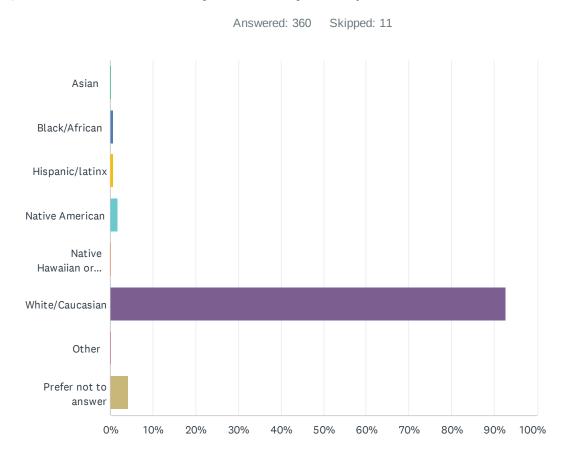
Q4 What is your gender? Please select one option.

Q5 Which category below includes your age? Please select one option



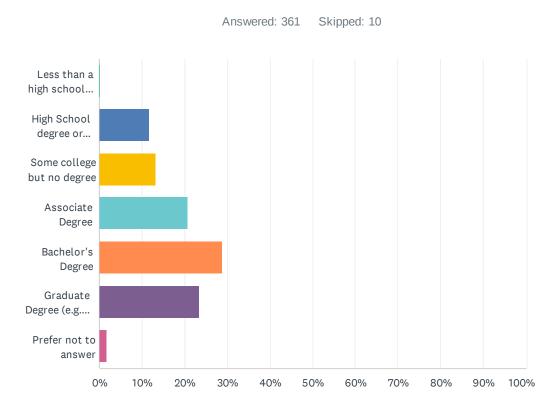
ANSWER CHOICES	RESPONSES
Less than 18	0.00% 0
18-24	1.66% 6
25-35	13.81% 50
36-49	31.77% 115
50-64	34.81% 126
65-80	14.64% 53
Over 80	0.83% 3
Prefer not to answer	2.49% 9
TOTAL	362

Q6 Race and ethnicity: I identify as...please select all that apply.



ANSWER CHOICES	RESPONSES	
Asian	0.28%	1
Black/African	0.56%	2
Hispanic/latinx	0.56%	2
Native American	1.67%	6
Native Hawaiian or Pacific Islander	0.28%	1
White/Caucasian	92.78%	334
Other	0.28%	1
Prefer not to answer	4.17%	15
Total Respondents: 360		

Q7 What is the highest level of school you have completed or the highest degree you have received? Please select one.



ANSWER CHOICES	RESPONSES	
Less than a high school degree	0.28%	1
High School degree or equivalent (e.g GED)	11.63%	42
Some college but no degree	13.30%	48
Associate Degree	20.78%	75
Bachelor's Degree	28.81%	104
Graduate Degree (e.g. Masters, PhD, M.D., etc)	23.55%	85
Prefer not to answer	1.66%	6
TOTAL		361



A press release was sent to area newspapers announcing the initiative and asking for community participation. In addition, the survey was promoted on social media and through email communication channels.

A total of 371 online surveys were completed. Based on the surveys returned, community members felt the top health issues in Barron County were:

- Prevention and treating alcohol and drug abuse
- Mental health
- Chronic disease prevention

In the June 2021 meeting, the Thrive Barron County Steering Committee also reviewed the primary and secondary data collected and community rankings provided by County Health Rankings (See Appendix C.)

Launched in 2010, the County Health Rankings program aimed to produce rankings for all 50 states. County Health Rankings identify the multiple health factors that determine a county's health status and indicate how it can be affected by where we live. Factors determining the health status of a community include environment, education, jobs, individual behaviors, access to services and health care quality.

Prioritization Process and Criteria

The MCHS CHNA committee in the Northwest Wisconsin region (NWWI) used the data sources and priorities from the Barron County 2021 CHNA Survey and County Health Rankings to compile and submit the top identified community health priorities — mental health, substance abuse and alcohol misuse, and chronic disease prevention — to the MCHS NWWI Regional Board of Directors.

Both community input and quantitative data from the Thrive Barron County assessment process were provided to help frame these top identified community health priorities. Data from the assessment findings, along with priority health area recommendation, were presented. Areas of high community need, and priority focus were identified, including data indicating a need for focus on inequity, disparity and poverty needs within the population. Much of this data indicated that Barron County outcomes are worse than state or national outcomes, and established collaboration and continuing momentum of existing work is needed.

Board members confirmed that by prioritizing mental health, substance abuse and alcohol misuse, and chronic disease and obesity, MCHS – Northland will align with other partners of Thrive Barron County to make an impact on Barron County's top health needs.



Addressing the Needs of the Community

Identified Health Needs



An extensive review and analysis of the 2019-21 Barron County Community Health Improvement Plan, 2021 Barron County CHNA survey results, 2020 & 2021 County Health Rankings and other quantitative and qualitative data identified the priority community health needs for MCHS – Northland in Barron remain the same.

Each of these health focus areas are equally important, however, they are ranked in this order:

- 1. Mental health
- 2. Substance abuse and alcohol misuse
- 3. Chronic disease prevention and obesity

The CHNA committee believed it was vital to address these priorities and that MCHS should be addressing them. Given the interrelated nature of some of the health topics and related interventions, it was agreed to combine obesity with chronic disease and substance abuse with alcohol misuse. The committee agreed that working on each of these three focus areas will allow for widespread impact on population health.

To effectively measure impact and based on our area of expertise and availability of resources, Mayo Clinic Health System has selected the top three health priorities that were reaffirmed as significant needs in Barron County to focus our efforts on – Mental Health, Substance Abuse and Alcohol Misuse and Chronic Disease and Obesity. Additionally, the interconnectedness of various health issues, as recognized by participants in the CHNA process, is expected to produce additional benefits in other health areas examined during the assessment process.



Identified Health Need

Mental Health

This focus area refers to the services and support needed to address how we think, act, and feel as we cope with life. Mental health is essential for personal well-being, caring for family and interpersonal relationships, and meaningful contributions to society. Mental health conditions may include, but are not limited to, isolation, depression, anxiety, and posttraumatic stress disorder.

Good mental health allows us to form positive relationships, use our abilities to reach our potential and deal with life's challenges. Mental illnesses are medical conditions that impair a person's thinking, mood, ability to relate to others and ability to cope with the daily demands of life.

Mental illnesses often are associated with physical health problems and risk factors, such as smoking, physical inactivity, obesity, and substance abuse: factors that can lead to chronic disease, injury, and disability.

In Barron County:

- 75% of survey respondents still consider mental health a top health priority within Barron County.
- The ratio of population to mental health providers is 1,130:1 in Barron County, which is higher than the state rate of 440:1 and U.S. performance of 270:1.
- The rate of death by suicide is 17 per 100,000 people.

Identified Health Need

Substance Use and Alcohol Misuse

Substance use is defined as the use of and negative effects from mood-altering substances (marijuana, heroin) or misuse of prescription drugs. Across the country and in Wisconsin, there has been a surge in the use of prescription drugs for nonmedical purposes. The misuse of these substances is most prevalent among young adults. From 2021-2020 the count of opioid-related deaths in Wisconsin changed by 46.2%.

Alcohol misuse is defined as underage alcohol consumption, consumption during pregnancy, binge drinking (four or more drinks per occasion for women, five or more for men), and heaving drinking (one or more drinks per daily average for women, two or more for men).

In Barron County:

• Twenty-six percent of the adult population reports either binge drinking or heavy drinking within the last 30 days.



- 78% of survey respondents still consider prevention and treating of alcohol, tobacco, and drug misuse a top health priority within Barron County.
- 13% percent of the arrests in Barron County were related to drug possession, compared to the state at 7.3 %.

Identified Health Need

Chronic Disease Prevention & Management (with emphasis on obesity)

According to the CDC (Centers for Disease Control) National Center for Chronic Disease and Health Promotion, chronic disease prevention and management typically focus on behavioral interventions such as healthy eating, increased physical activity and cessation of unhealthy practices such as tobacco and alcohol use. In many cases, obesity is a contributing factor for preventing and maintaining chronic diseases, especially heart disease and diabetes. Prevention is not always possible, so it is important that effective management is also part of the health care system.

Although chronic diseases usually become clinically apparent in adulthood, the exposures and risk factors that precede disease onset occur at every stage of life. Childhood and adolescence are critical times to deliver and reinforce health education messages.

Chronic diseases, such as heart disease, stroke, cancer, diabetes, asthma, and arthritis, are among the most common and costly of all health problems in the U.S. Currently, six in ten Americans live with at least one chronic disease. Maintaining a healthy weight is important for reducing the risk of developing chronic conditions that may have a major impact on quality of life. Healthy weight management promotes good mental health, healthy nutrition, physical activity, and a longer life.

In Barron County:

- Sixty-six percent of survey respondents still consider chronic disease prevention a top health priority within Barron County.
- 41% of adults in Barron County are considered obese compared to the state average of 32% and U.S. Top Performers at 26%.
- In Barron County, only 74% of residents live close to a location for physical activity (e.g., parks and recreational facilities.)



Available Resources within the Community

Health care providers

There are two other hospitals in Barron County: Lakeview Medical Center in Rice Lake and Cumberland Health Care in Cumberland. There are three hospitals in neighboring Eau Claire County that provide secondary and tertiary level care (MCHS in Eau Claire, HSHS Sacred Heart Hospital, and Marshfield Medical Center-Eau Claire). MCHS in Eau Claire also provides Level II trauma care.

As a member of MCHS, Barron County has seamless access to the care offered in Eau Claire, as well as the world-renowned Mayo Clinic in Rochester, Minn. In addition, the residents of Barron County have access to the following resources:

Healthcare services (chronic disease prevention/management and obesity)

- Marshfield Medical Center, Rice Lake
- Sensible Solution Care Clinic, Barron
- Northlakes Community Clinic, Turtle Lake
- Rice Lake Area Free Clinic
- Prevea Rice Lake Health Center

Mental health clinics

- Barron County Community Support Program, Rice Lake
- Callier Clinic, Rice Lake
- Marshfield Clinic, Rice Lake
- NAMI
- Lutheran Counseling & Family Services
- Omne Clinic, Barron
- Prevea Behavioral Care
- Rice Lake Area Free Clinic
- Vantage Point Clinic & Assessment Center, Barron
- Several independent counselors

Drug treatment facilities

- ABR Counseling, Rice Lake
- Ain Dah Ing, Inc. Halfway House
- Arbor Place, Rice Lake
- Barron County Health & Human Services, Barron
- Lakeview Medical Center Rehab Center
- Lutheran Counseling & Family Services



Evaluation of Prior CHNA and Implementation Strategy

Impact of 2019-2022 Implementation



The 2019 Community Health Needs Assessment final report for Mayo Clinic Health System -Northland has been posted on the Mayo Clinic Health System Community Engagement internet page for public review and comment. No written comments have been received.

Prioritized needs & objectives per the 2019 Implementation Plan:

Mental Health – Increase strong, healthy social connections among residents across all life stages to promote mental wellness.

Substance Abuse & Alcohol Misuse – Reduce substance abuse by providing education and advocacy around substance abuse in the community.

Chronic Disease & Obesity – Reduce chronic disease by promoting health and wellness lifestyle choices in the community.

COVID-19 emerged as the leading community health priority in 2020

In February 2020, the COVID-19 virus became a pandemic throughout the U.S. and within Eau Claire County. Mayo Clinic responded to this challenge in a multitude of ways to protect the health of its local and regional communities as well as contributing to the national and global response, including:

- Restructuring patient care services to ensure capacity for intensive care for community needs. This required significant interruptions to normal operations as non-emergency care services were deferred to increase COVID19 response capacity.
- Expanding virtual care capabilities to advance home care and treatment to safely improve access for community and rural patients.



- Rapid development and dissemination of public and consumer information about the COVID-19 virus to help the public (consumers, government, peer medical providers, etc.). understand the risks and take actions to prevent and/or care for the infection.
- Development and dissemination of rapid COVID-19 testing resources to strengthen efforts of local public health and other health care organizations in serving community needs.
- Refocused research efforts to bring greater understanding, therapies, and potential vaccine solutions for the COVID-19 virus, including antibody testing capabilities, blood plasma therapies and effectiveness and safety of various pharmaceutical therapies.
- Sharing knowledge and collaborating broadly with other academic health centers and businesses to expand understanding and resources to address and contain the disease. Examples include using AI to model and forecast hotspots across the U.S., as well as developing tools to standardize contact tracing and exposure management. These systems were also shared with Public Health departments to inform changing health safety policies as the pandemic has evolved locally.

These efforts, combined with the capacity challenges of local non-profits and other sectors delayed some of the 2020 community health improvement (implementation plan) strategies.

COVID-19 disclaimer: With the COVID-19 pandemic lingering as a crisis in 2021, education and communication about COVID-19 safety measures, including vaccination, often took priority over CHNA efforts. Many activities that supported CHNA priority areas were held virtually or cancelled to support community safety considering COVID-19 positivity.

Here are highlights of the accomplishments of the community health implementation plan for each of the priority health focus areas in Barron County.

Mental Health

The following efforts have been implemented to impact mental health and related health concerns:

Monetary support:

- Barron Public library \$3,500 (Fall Wellness Programming)
- Boys and Girls Club of Barron County \$22,000 (2020 Covid Operations, 2021 Advocate for Change)
- Hunt Hill \$2,000 (Active Outdoor Sponsorship)
- Barron Area Community Center \$680 (Annual renewal Programming)
- Barron Senior Center \$1,500 (Programming)
- Benjamin's House Emergency Shelter \$3,000 (Programming)
- Forrest Run Foundation \$1,000 (Support for cancer research)
- NAMI Barron County \$2,000 (Programming)
- Rice Lake Public Library \$1,500 (Programming)
- United Way of Rice Lake \$1,000 (Programming)
- WITC Foundation Rice Lake \$500 (Programming)



Grants:

- The Salvation Army of Barron County \$25,000 (Programming)
- Benjamin's House Emergency Shelter \$10,000 (Programming)
- River Middle School \$5,000 (Positive Behavior Rewards Programming)
- Cameron Elementary School \$5,000 (Book Vending Machine Programming)
- Chetek-Weyerhaeuser Area School District \$5,000 (Social/Emotional Improvement)
- Turtle Lake Middle and High School \$3,000 (Everyone has a home)

Programming and Education:

- Car seat training checks in Barron County (50 people attended)
- Fall Into Wellness virtual program Distributed materials for the Fall into Wellness virtual program to the general population, key organizations, and area schools. This program, delivered in a points-based, friendly month-long competition, helped highlight small, simple changes to manage stress, eat nutritionally balanced foods and get regular physical activity. Presentations are available to view on YouTube following the live webinars.
- **Community Contribution funding for mental well-being initiatives** facilitated grant invitations and review for those community organizations with initiatives supporting the Community Health Needs Assessed areas. Activity included grant review and approvals and follow-up with the organizations.
- **Discover Gratitude** invited educators, social service agencies and community members to participate in this free, self-guided virtual program that helps improve mental well-being through daily journaling, with emphasis on gratitude for improved mental well-being. This was held in November with 256 journal clicks and 204 watched the video for the NWWI region.
- **Blogs** provided subject matter on a variety of topics focusing on CHNA to community members through web access and newsletters.

Community Involvement:

- Barron Chamber of Commerce (Board of Director and committee member)
- Career presentations to Cameron High School (A total of 10 people attended).
- Chetek and Dallas Ambulance Service/EMS
- Community Response to Poverty Summit (Committee member)
- Free Clinic Lab oversite, compliance and assist with point of care. (Volunteer)
- Kiwanis (Presentation on COVID)
- Rice Lake Farm Days (400 people were in attendance).

Substance Use & Alcohol Misuse

The following efforts have been implemented to impact substance abuse & alcohol misuse and related health concerns:

Monetary support:

• Barron High School – \$50 (Post Prom sponsor)



Grants:

• Barron County Restorative Justice Programs - \$10,000 (Behavior intervention programming)

Research:

• Study finds changes in substance abuse among young adults during pandemic; findings were reported in local media.

Community Involvement:

• School District of Turtle Lake – Wellness Committee (Volunteer)

Chronic Disease & Obesity

The following efforts have been implemented to impact chronic disease & obesity and related health concerns:

Monetary support:

- Barron Area Community Center \$3,000 (Triathlon)
- Chetek-Weyerhaeuser Scholarship \$2,000 (2020 Fishy Four 4K community race)
- Midwest Power Soccer \$833.34 (Chippewa Valley Hooligans wheelchair powered soccer for disabled)
- Rice Lake Area School District \$1,000 (Snacks for success)
- American Red Cross \$2,000 (Heroes Breakfast Programming)
- Barron Chamber of Commerce \$1,000 (Annual Fall Fest Celebration Children's Games)
- Barron County Dairy Promoters, Inc. \$400 (Handwashing stations)
- Barron County Development Services \$1,500 (Sustainable water source for community garden)
- Beaver Creek Reserve \$500 (Programming)
- Hunt Hill \$1,200 (Programming)
- Prairie Farm Lions Club \$600 (Handwashing stations)
- Village of Ridgeland-Ridgeland Fair \$300 (Handwashing stations)
- Alzheimer's Association \$1,500 (Walk Sponsorship)

Grants:

- Ruby's Pantry Cameron \$10,000 (Increased Food Security)
- Turtle Lake School \$4,000 (Backpack program and free swim/gym and free snacks)

Programming and Education:

- **Blood Pressure Screening** Knowing your numbers can help you maintain your health. Get your blood pressure checked regularly.
- Morning Yoga This class combines flow movements, and holding postures to improve strength, flexibility, and balance. Beginners will learn the basics, while more experienced students can take postures to a deeper level. (4 sessions held with 30 people in attendance).



- **Rock 'N' Roller Skating** Lace up your roller skates and gather your friends for some fastpaced fun and exercise. (166 people participated).
- **Snowshoe and Winter Hike** Bundle your family for a free winter wonderland hike. Warm up afterward with a light snack and hot beverage. A limited number of snowshoes are available.
- (25 people attended).
- **Chronic disease webinars-** designed to educate the community about chronic disease prevention. The topics of the three webinars include: healthy eating strategies, chronic pain management and Yoga to relieve pain and stress. Presentations were available to view on YouTube following the live webinars.
- Community Contribution funding for Chronic Disease Prevention facilitated grant invitations and review for those community organizations with initiatives supporting the Community Health Needs Assessed areas. Activity included grant review and approvals and follow-up with the organizations.
- **Vaccinations** Promote COVID vaccination to community groups with education on symptoms, vaccine safety, availability, and community collaboration.
- Myeloma Support Group Open to the community.
- Breast Cancer Support Group Open to the community.
- **Community communication** COVID updates and other health related topics. (18 emails sent)

Community Involvement:

- American Red Cross Board Member and attend meetings on a regular basis, host, and champion local blood drives.
- Barron County Health Department county health coalition member.
- Healthcare Emergency Readiness Coalition member (COVID preparedness, other state discussions).
- School District of Turtle Lake (Committee member of wellness committee).

Despite the actions taken since the prior CHNA to address mental health, substance use and alcohol misuse and chronic disease/obesity, the results of the reaffirmation survey in 2021 concluded these priorities continue to be health concerns in the community and will continue to be addressed by MCHS-Northland.



Mayo Clinic Health System Individuals Involved in CHNA

Community Health Needs Assessment Committee: Richard Helmers, MD, Regional Vice President, Mayo Clinic Health System, Northwest Wisconsin Karolyn Bartlett, Manager, Operations Brook Berg, Community Engagement Director Tasha Bjork, Administration, Operations Cory Carlson, RN, Behavioral Health Supervisor Andrew Calvin, MD, Cardiology Jason Craig, Administration, Regional Chair Marquita Davis, Quality, Performance Improvement Advisor Jen Drayton, RN, Nurse Administrator Joni Gilles, RN, EMS Coordinator Frances Jordahl, Social Work Supervisor Jenny Jorgenson, Community Engagement Specialist Carie Martin-Krajewski, Vice Chair, Administration Sarah McCune, RN, Operations, Administration Maria Seibel, Community Engagement Specialist Tina Tharp, Community Engagement Specialist Pam White, RN, Chief Nursing Officer



References

2019-2021 Barron County Community Health Improvement Plan

<u>CDC National Center for Chronic Disease and Health Promotion</u> (NCCDPHP)

County Health Rankings & Roadmaps

U.S. Census QuickFacts Barron County, WI

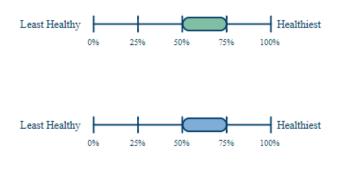
Wisconsin Department of Health Services WISH Data Sources



Appendix A

Source: County Health Rankings and Roadmaps

Barron (BA)



Health Outcomes

Barron (BA) is ranked in the higher middle range of counties in Wisconsin (Higher 50%-75%)

Health Factors

Barron (BA) is ranked in the higher middle range of countie in Wisconsin (Higher 50%-75%)

Download Wisconsin Rankings Data

County Demographics -

	County	State
Population	45,244	5,822,434
% below 18 years of age	21.5%	21.8%
% 65 and older	22.6%	17.5%
% Non-Hispanic Black	1.5%	6.4%
% American Indian & Alaska Native	1.1%	1.2%
% Asian	0.7%	3.0%
% Native Hawaiian/Other Pacific Islander	0.0%	0.1%
% Hispanic	2.6%	7.1%
% Non-Hispanic White	93.0%	80.9%
% not proficient in English	1%	1%
% Females	50.0%	50.2%
% Rural	65.9%	29.8%



	Barron (BA) County	Error Margin	Top U.S. Performers ①	Wisconsin		
Flu vaccinations	<u>45%</u>		55%	53%		
Additional Clinical Care (not included in ov	erall rankin	g) –				
Uninsured adults	9%	7-10%	7%	8%		
Uninsured children	7%	5-8%	3%	4%		
Other primary care providers	750:1		620:1	810:1		
Social & Economic Factors						
High school completion	90%	89-91%	94%	92%		
Some college	60%	55-64%	73%	70%		
Unemployment	4.0%		2.6%	3.3%		
Children in poverty	<u>12%</u>	7-16%	10%	14%		
Income inequality	4.0	3.7-4.2	3.7	4.2		
Children in single-parent households	21%	17-26%	14%	23%		
Social associations	16.8		18.2	11.5		
Violent crime	46		63	298		
Injury deaths	90	77-102	59	84		
Additional Social & Economic Factors (not	included in	overall ranking) –				
High school graduation	95%		95%	90%		
Disconnected youth	6%	3-10%	4%	5%		
Reading scores	<u>2.9</u>		3.3	3.0		
Math scores	<u>2.8</u>		3.4	3.0		
Median household income	<u>\$54,400</u>	\$49,700 to \$59,100	\$72,900	\$64,200		
Children eligible for free or reduced price lunch	45%		32%	39%		
Residential segregation - Black/white	79		23	76		
Residential segregation - non-white/white	44		14	55		
Homicides	3	2-6	2	4		
Suicides	17	11-23	11	15		
Firearm fatalities	13	9-18	8	11		
Juvenile arrests	6					

Appendix B Barron County Core Data Sets

Category	Tiala	Magazine	Targets and Top Performers*	Barron County 2004	Wisconsin 2001	Year(s) Data	Barron County 2020	Wissonsin 2022				
Category Demographics	Title Below 18 Years	Measure % of population below 18 years of		Barron County 2021		Used		Wisconsin 2020		 	 	
Demographics	65 and Older	age % of population aged 65 years		21.60%	22.10%	2015-2019	21.70%	23.00%		 	 	
		and older		21.40%	16.50%	2015-2019	20.90%	14.40%		 		
Demographics	Race/ Ethnicity	% of population that is African American, Asian, American Indian or Alaskan Native, or Hispanic		4.10%	24.70%	2019						
Demographics		% of population that is not proficient in English	Site Unavailable	4.10%	24.70%	2019					 	
Demographics	English Rural		Site Unavailable									
Demographics	Population Estimates	Population numbers by age group and gender										
Demographics	Population Change	% of change in population 2010 - 2014		See table at the bottom		2014						
Mortality	Premature	years of potential life lost before	5,400 per 100,000	0.2%	0.3%	2018-2019	0%	0%		 	 	
	Death	age 75 per 100,000 population (age-adjusted)	(Top Performer)	6,600 per 100,000	6,300 per 100,000	2017-2019	6,500 per 100,000	6,400 per 100,000		 		
Mortality	-	Rate per 1,000 live births	1.8 per 1000 (HP2020)	4.5 per 1000	6 per 1000	2020	4.2 per 1000	5.8 per 1000				
Measures of Overall Health	Poor or Fair Health		14% (Top Performer)	17%	15%	2018	14%	17%				
Measures of Overall Health		Average number of physically unhealthy days self-reported in adults in past 30 days (age-	3.4 (Top Performer)									
Measures of Overall Health	Low Birth Weight	adjusted) % of birth weights <2,500 grams	6% (Top Performer)		3.7		3.7	3.9				
Chronic Disease	Diabetes	% of adults age 20 and above with diagnosed diabetes	6% (Top Performer)			2013-2019	6%	7%				
Chronic Disease	Cancer	Incidence per 100,000 population by cancer site (age-adjusted)		11% 473.27 per 100,000			12%	9%		 		
Chronic Disease	Coronary Heart Disease	Coronary heart disease hospitalization rate per 1,000								 		
Chronic Disease	Cerebrovascula	Cerebrovascular disease hospitalization rate per 1,000			3.2 per 1,000	2017						
Chronic Disease	r Disease Youth Asthma	Cases under age of 18 sent to the Emergency Room for asthma			2.5 per 1,000	2017						
Oral Health	Fluoride in Public Water	% of public water supplies with fluoride content at 0.7 PPM or		25.63	23.4	2020						
Oral Health	Oral Health of 3rd Grade	% of untreated decay	20% (HP2010 target)	Only Rice Lake		2020				 		
Communicable	Children Childhood		80% (HP2020	18.40%		2017-2018		used West region		 		
Disease	Immunizations	months who received the recommended doses of DTaP, polio, MMR, Hib, hepatitis B,	target)									
Communicable	Communicable	varicella, and PCV Population of top reportable		65%	70%	2020	65	72.1		-		
Disease Mental Health	Disease Poor Mental	communicable diseases Average number of mentally	3.8 (Top Performer)	124	36,263	2017				 	 	
ivicitai i icalui	Health Days	unhealthy days reported in past 30 days (age-adjusted)	3.6 (TOP Fendinier)	4.3	4	2018	3.8	4				
Mental Health	Intentional Injury	Self-inflicted hospitalization rate per 100,000 population		23.9 per 100,000	28.2 per 100,00	2017		99 per 100,00				
Mental Health	Youth Suicide	% who seriously considered attempting suicide during the 12		15.70%								
Injury and Violence	Youth Injury	% who rarely or never wore a seat belt when riding in a car driven by		5.00%	6.50%	2019						
Injury and Violence	Injury Hospitalizations	Ranked causes of hospitalizations for injuries (age-adjusted per		352.00	471.2							
Injury and Violence		Injury deaths due to falls for age 65 and older (per 100,000		93 per 100.000	235.4 per 100,000		119.6 per 100.000	146.7 per 100,000				
Alcohol & Other Drugs	Drinking		15% (Top Performer)									
		drinking, defined as drinking more than 1 (women) or 2 (men) drinks per day on average		26%	27%	2018		24%				
Alcohol & Other Drugs	impaired driving	Proportion of driving deaths with alcohol involvement	11% (Top Performer)									
Alcohol & Other Drugs	deaths Drug Overdose	# of drug poisoning deaths per		15%		2015-2019	7%	36%		-		
Alcohol & Other Drugs	Deaths Drug Arrests	100,000 population Number of arrests for drug		10		2017-2019	12	19		 _		
	ļ	possession		13%	7.30%	2012				 		

	Alcohol-related	Rate of alcohol-related													
-	hospitalizations	hospitalizations per 1,000		1.9 per 1,000	2.2 per 1,000	2017									
Alcohol & Other Drugs	Youth Drug and Alcohol Use	% of students who had at least one drink of alcohol on one or more of the past 30 days													
				29.80%	29.20%	2019	19.2	19.3							
Alcohol & Other Drugs	Youth Drug and Alcohol Use	% of students who had their first drink of alcohol other than a few sips before age 13		16.50%	15.00%	2019	16.4	14.6							
Insufficient Sleep	Insufficient Sleep	% of adults who report fewer than 7 hours of sleep on average (age													
Physical Activity and Nutrition	Adult Obesity	adjusted) % adults (age 20 +)with BMI > 30	26% (Top Performer)	34%	33%		32%								
Physical Activity and Nutrition		Estimated percent of adults aged		20%	20%		23%								
Physical Activity and Nutrition	Access to exercise	Percentage of individuals in a county who live reasonably close	91% (Top Performer)	20%	20%	2017	237	21%							
	opportunities	to a location for physical activity (e.g., parks and recreational facilities)		74%	85%	2010 & 2019	58%	81%							
Physical Activity and Nutrition	Youth Dietary Behavior	Percentage of students who ate fruits less than five times per day						0170							
Physical Activity and Nutrition	Youth Dietary Behavior	Percentage of students who ate vegetables less than five times per		5.70%	5.6										
Physical Activity and Nutrition	Behavior/	day Percentage of students overweight		5.90%	6.3							_	 		
Physical Activity and Nutrition	Overweight Youth Physical Activity	Percentage of students physically active at least 60 minutes per day		14.60%	16%	2019		used how do you des	cribe your weigh	ıt.	 				
Disselant Anti-Incored		on less than 5 days		55.30%	55.90%	2019									
Nutrition		% of infants receiving WiC breastfed exclusively through three months		84%	81%	2018-2019									
Tobacco	Adult Smoking	% adults self-reporting smoking > 100 cigarettes in their lifetime and currently smoking (every day or most days)	16% (Top Performer)												
Tobacco	Adult Smokeless	% of persons aged ≥18 years who reported currently using chewing		21%	17%	2018	17%	16%							
	Tobacco Use	tobacco, snuff, or snus (a small pouch of smokeless tobacco) every day or some days													
Tobacco	Constring During	% of mothers who report smoking	109/	N/A	3.70%	2009									
Tobacco	Pregnancy	during pregnancy	1078	18%	12%	2021	20%	13%							
Tobacco	Tobacco Sales to Minors	% of illegal tobacco sales to minors		4.10%	14.1	2021									
Tobacco	Youth Tobacco Use	% of students who smoked cigarettes on one or more of the	16% (HP2020)									_			
Tobacco	Youth Tobacco Use	past 30 days % of students who used chewing tobacco, snuff, or dip on one or		5.70%	6.00%	2019									
Торассо	Electronic	more of the past 30 days % of students who ever used		3.30%	3.80%	2019							 		
	Vapor Products Sexually	electronic vapor products	161 cases per	45.50%	50.10%	2019									
Sexual Health	Transmitted Infections	population	100,000 (Top Performer)	278 per 100,000	484 per 100,000	2018	243 per 100,000	479 per 100,000							
Reproductive and Sexual Health	Teen Birth Rate	Birth rate per 1,000 females age 15-19	12 (Top Performer)	18 per 1,000	15 per 1,000	2017	19 per 1,000	17 per 1,000							
Reproductive and Sexual Health	Prenatal Care	Adequacy of prenatal care per Kessner or Kotelchuck indices													
Sexual Health		% of births < 37 weeks gestation		97%	9.90%										
Reproductive and Sexual Health	Youth Sexual Behavior	% of students who have ever had sexual intercourse		34.60%	38.40%										
Reproductive and Sexual Health	Youth Sexual Behavior	Among students who had sexual intercourse during the past three months, the percentage who did not use a condom during last sexual intercourse													
Access to Care	Preventable Hospital Stays	Hospitalization rate for ambulatory- care sensitive conditions per 100,000 Medicare enrollees	2565 per 100,000 (Top Performer)	25.00%	27.40%	2019	3,841 per 100,000					_			

Access to Care	Uninsured under Age 65	% population under age 65 that has no health insurance coverage		8%	7%	2018	8%	6%				
Access to Care	Primary care physicians	Ratio of population to primary care physicians	e 1030:1 (Top Performer)	890 to 1	1270 to 1	2018		1270 to 1				
Access to Care	Mental health	Ratio of population to mental	270:1 (Top					490 to 1				
Access to Care	providers Dental	health providers % of Medicaid members receiving	Performer)	1130 to 1	470 to 1	2020		490 to 1		 		
Access to Care	Utilization Dentists	a dental service Ratio of population to dentists	1210:1 (Top	30.02%	23.43%	2008						
Access to Care	No recent	% of population age 2+ that did	Performer)	1460 to 1	1410 to 1	2019	1560 to 1	1460 to 1				
	dental visit	not have a dental visit in the past year		33%	26%	2017						
Access to Care	Local Health Department Staffing	Fulltime equivalents of local health department staff per 1,000 population		13.2 per 1,000	13.3 per 1,000	2016						
Access to Care	Flu Vaccination 65+	% of fee-for-service (FFS) Medicare enrollees that had an	55% (Top Performer)									
Chronic Disease	Cervical Cancer	annual flu vaccination % of women 18+ who had a pap		45%	53%	2018	47%	52%				
Management	Screening	test in last 3 years		no data								
Chronic Disease Management	Colon Cancer Screening	% of 50+ population who ever had a sigmoidoscopy or colonoscopy	ł									
Chronic Disease	Diabetic	% of diabetic Medicare enrollees	90% (Top	no data								
Management	Screening	that received HbA1c screening in past year		91%	90%	2017	91%	90%				
Chronic Disease Management	Mammography Screening	% of female Medicare enrollees aged 65-74 that received annual mammography screening	51% (Top Performer)									
Chronic Disease	Cholesterol	% of adults ever had cholesterol	94% (Top	51%	49%	2018	50%	50%		 	 	
Management Education	Screening High School	checked % of adults ages 25 and over with	Performer)	90%	92%	2015-2019				 	 	
	Completion	a high school diploma or equivalent		90%	92%	2015-2019						
Education	-	% of adults age 25-44 with some post-secondary education	Performer)	60%	70%	2015-2019	58%	69%				
Education	Reading Proficiency	Average grade level performance for 3rd graders on English Language Arts Standardized tests										
Employment	Unemployment	% of population age 16+ unemployed but seeking work	2.6% (Top Performer)	2.9	3	2018		3				
Employment	W2 Enrollment	Count of Individuals enrolled in W- 2 (Wisconsin Works) on the last	,	4.00%	3.30%	2019		3.00%			 	
Adequate Income	Median	Median household income (all		41	14,439	2017		11,039				
Adequate Income	Household Poverty, All	residents of a household over age % of population living below the		\$54,400	\$64,200	2019		\$60,800		 	 	
Adequate Income	Ages Poverty,	Federal Poverty Line (FPL) % of children under 18 living	10% (Top	11%	12%	2017	11%	12%		 	 	
Adequate Income	Children	below the Federal Poverty Line % of children enrolled in public	Performer)	14%	17%	2019	15%	14%		 	 	
	Eligible for Free Lunch	schools that are eligible for free school lunch		45%	39%	2018-2019	39%	37%				
Adequate Income	Severe Housing Problems	least 1 of 4 housing problems: overcrowding, high housing costs)								
		or lack of kitchen or plumbing facilities		9%	14%	2013-2017	10%	14%				
Community Safety	Violent Crime	Violent crime rate per 100,000 population (includes offenses that	63 per 100,000 (Top Performer)	46 per 100,000	298 per 100,000	2014 & 2016	46 per 100,000	298 per 100,000				
Community Safety	Child Abuse	Child abuse rate per 1,000 population (allegation of		9 per 1,000	4 per 1,000	2018	3 per 1,000	4 per 1,000				
Community Safety	Youth Violence	% of students who have been bullied on school property during		22%	19.50%	2019						
Community Safety	Youth Violence	% of students who have ever been physically forced to have sexual intercourse when they did		2270	10.00%							
Health Literacy	Illiteracy	not want to % of the population age 16 and older that lacks basic prose		6.90%	7.3	2019						
Social Support	Inadequate Social Support	literacy skills % adults without social/emotional support (self reported that 'never',	Performer)	8%	7%	2003						
		'rarely', or 'sometimes' get support they need)	L L L L L L L L L L L L L L L L L L L	21%	23%	2015-2019	32%	32%				
Social Support	Single-parent	% of children that live in a household headed by a single	14% (Top Performer)	2170	2070		32.70	52.70		1		
Casial Current	Households	parent	r enormet)	21%	23%	2015-2019	32%	32%		 		
Social Support	Older Living Alone	% 65 years and older who live alone		28%	29%	2017		29%				
Racism	Hate Crimes	Hate crime rate		28	72	2020						

Built Environment		% population who are low income													
		and do not live close to a grocery store (10 miles rural/one mile													
		urban)		3%	5%	2015		3%	5%	 					
Built Environment		Percent of people who do not have adequate access to food													
		during the past year		9%	9%	2018		10%	10%						
Built Environment	Lead Poisoned Children	Prevalence of elevated blood lead levels among children age six and													
		under		1	678	2014									
Built Environment	Year Structure Built	% of housing units built prior to 1950		29%	26%	2017		27%	26%						
Natural Environment	Air Pollution	The average daily measure of fine	5.2 (Top Performer)												
		particulate matter in micrograms per cubic meter (PM2.5) in a													
	watter	county		6.4	7	2.16		7.2	8.6						
Natural Environment		The 8-hour ozone concentration in parts per million, converted to	0 (Top Performer)												
		an air quality index level													
				N/A	N/A			N/A	N/A	 				 	
Natural Environment	Drinking Water Violations	Indicator of the presence of health- related drinking water violation.													
	violations	Yes-violations No-no violations													
				No		2019		Yes		 				 	
* Targets: Obtained f	rom Healthy People	2020 or 2010 (HP2020 and HP2010	0).												
* Top Performers: Se	e the County Health	Rankings and Roadmaps (CHRR) I	Exploring the Data (ht	tp://www.countyhealthra	ankings.org/using-the-	rankings-				_				 	
	a) for more information	on on this metric. The "Top Perform	er" is the value for wh	ich only 10% of countie	s in the country are do	ing better.									
Population Data															
Barron County	2014 Data	Change from 2010-2014		Wisconsin			Percent							 	
Age Group	Males	Female	Percent Change	Age Group	Male	Female	Change								
0-17	4,934	4,719	-5%	0-17	664,657	636,188	-3%			 		_		 	
18-44	6,939	6,503	-3%	18-44	1004757	973,698	-1%								
45-64	6.714	6.587	-2%	45-64	794.628	799.615	1%								
	0,714	0,007	-2.70	10 01	134,020	. 55,015	170								
65+	4,336	5,159	14%	65+	390,698	483,717	12%			 					
	1										1		1		



Appendix C

Thrive Barron County Steering Committee Members:

- Aging and Disability Resource Center of Barron, Rusk & Washburn Counties
- Amery Hospital and Clinic
- Barron County Department of Health and Human Services
- Barron County Sheriff's Department
- Benjamin's House Emergency Shelter
- Community Connections to Prosperity
- Cumberland Healthcare
- Disability Rights Wisconsin
- Marshfield Clinic Health System
- Mayo Clinic Health System Northland
- Rice Lake Area Free Clinic
- NAMI Barron County
- Northlakes Community Clinic
- Northwoods Technical College
- Prevea Health
- University of Wisconsin Eau Claire
- UW Madison Division of Extension Barron County