



LA CROSSE COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN 2016-2021



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ACKNOWLEDGEMENT



The community spoke and we listened. This document, developed in accordance with the standards of the Public Health Accreditation Board, includes engagement with the community who helped to shape the priorities, goals, and objectives. This is the community's plan to be implemented by the Health Department, in conjunction with community partners. It is supported through our mission: to protect, promote and improve the health of all people to enhance the quality of life. The La Crosse County Health Department would like to thank the following individuals and organizations for participating in the planning sessions that led to the creation of the La Crosse County Community Health Improvement Plan (CHIP).

✂ Jennifer Rombalski, Health Officer

CHIP Development Team

LA CROSSE COUNTY HEALTH DEPARTMENT STAFF:

*Christine Gillespie, Public Health Nursing Manager
Joseph Larson, Public Health Nurse
Jennifer Loging, Nutrition Manager
Abbie Loos, Nutrition Educator
Brenda Lutz-Hanson, Health Educator
Diane Panzer, Office Supervisor
Jennifer Rombalski, Director
Paula Silha, Health Education Manager

CHIP Community Leadership Team

Kim Cable, Coulee CAP and Health & Human Services Board
Christa Cupp, WI Division of Public Health
Christine Gillespie, La Crosse County Health Department
Adam Glahn, Express Employment Professionals
Mark Glahn, Express Employment Professionals
Sarah Havens, Gundersen Health System
Diane Holmay, Mayo Clinic Health System
Catherine Kolkmeier, La Crosse Medical Health Science Consortium (LMHSC)
Jason Larsen, La Crosse County Human Services
Joseph Larson, La Crosse County Health Department
Jennifer Loging, La Crosse County Health Department
Bob Matysik, Scenic Rivers Area Health Education Center
Curtis Miller, Faith Community
*Jennifer Rombalski, La Crosse County Health Department
Amanda Running, Express Employment Professionals
Paula Silha, La Crosse County Health Department
Mary Kay Wolf, Great Rivers United Way
Pat Stevens, La Crosse County Convention & Visitors Bureau
Maomoua Vue, Hmong Community & La Crosse County Health Department

Community Partners Meetings

Sandy Brekke, St Clare Health Mission
Kim Cable, Couleecap, La Crosse County Board Supervisor
Christa Cupp, Div. of Public Health-Western Region Office
Sheila Garrity, La Crosse Community Foundation
Steph Genz, Mayo Clinic Health System
Christine Gillespie, La Crosse County Health Department
Sharon Hampson, La Crosse County Board Supervisor
Sarah Havens, Gundersen Health System
Diane Holmay, Mayo Clinic Health System
Marilynn Huckenpoehler, The Parenting Place
Ann Kappauf, New Horizons
Lacie Ketelhut, Gundersen Health System
Catherine Kolkmeier, LMHSC
Catherine Lange, Mayo Clinic Health System
Jason Larsen, La Crosse Area Family Collaborative, La Crosse County Human Services
Joseph Larson, La Crosse County Health Department
Jennifer Loging, La Crosse County Health Department
Megan Marks, Ho-Chunk Nation
Bob Matysik, Scenic Rivers Area Health Education Centers
Vonter Moua, Social Security Administration
Nancy Pohlman, La Crosse County Human Services
Teresa Pulvermacher, Logistics Health
Jennifer Rombalski, La Crosse County Health Department
Katie Rommes, Healthy Families
Brenda Rooney, Gundersen Health System
Vicky Sanwick, Mayo Clinic Health System
Paula Silha, La Crosse County Health Department
Sarah Spah, Mayo Clinic Health System
Matt Strittmater, La Crosse County Human Services
Mary Temp, 4-H
Sandy Valentine, Veteran's Service Office
Alex Vang, La Crosse Police Department
Sam Van Riper, Trane Company
Maomoua Vue, La Crosse County Health Department
Mary Kay Wolf, Great Rivers United Way
Tita Yutuc, Family and Children's Center

*denotes leader or facilitator

CHIP Work Groups

Mental Health

Sue Bennett, La Crosse County Health Department
 Mary Dahlby, La Crosse County Health Department
 Catherine Kolkmeier, La Crosse Medical Health Science Consortium
 Jason Larsen, La Crosse County Human Services
 *Joseph Larson, La Crosse County Health Department
 Jennifer Loging, La Crosse County Health Department
 Susan Lundsten, Gundersen Health System
 *Jen Rombalski, La Crosse County Health Department
 Regina Siegel, La Crosse School District
 Paula Silha, La Crosse County Health Department
 Anneliese Skoda, La Crosse County Human Services
 Matt Strittmater, La Crosse County Human Services
 Judi Zabel, La Crosse County Health Department

Substance Abuse

Susan Bennett, La Crosse County Health Department
 Al Bliss, La Crosse County Health Department
 Mary Dahlby, La Crosse County Health Department
 *Christine Gillespie, La Crosse County Health Department
 Cheryl Hancock, Coulee Council on Addictions
 Monica Kruse, La Crosse County Health & Human Services Board
 Joseph Larson, La Crosse County Health Department
 Susan Lundsten, Gundersen Health System
 Erin Malak, La Crosse County Human Services
 *Jen Rombalski, La Crosse County Health Department
 Sue Schreiner, La Crosse County Health Department
 Paula Silha, La Crosse County Health Department
 Anneliese Skoda, La Crosse County Human Services
 Judi Zabel, La Crosse County Health Department

Social Determinants

*Christa Cupp, Division of Public Health Western Region Office
 Julie Dietz, La Crosse County Health Department
 Nate Fleming, Gundersen Health System
 *Christine Gillespie, La Crosse County Health Department
 Sarah Havens, Gundersen Health System
 Jennifer Kleven, Healthy Living Collaborative, Gundersen Health System Pediatrician
 Joseph Larson, La Crosse County Health Department
 *Jennifer Loging, La Crosse County Health Department
 Brenda Lutz-Hanson, La Crosse County Health Department
 Tom Miller, La Crosse Human Services (Economic Support)
 Diane Panzer, La Crosse County Health Department
 Jen Rombalski, La Crosse County Health Department
 Jenny Schroeder, La Crosse County Human Services
 Ruthann Schultz, YWCA
 Lindsey Schwarz-Nichols, La Crosse County Health Department
 Jim Steinhoff, La Crosse County Health Department



Mental Health/Substance Abuse Work Group Meeting

*denotes leader or facilitator

Plan Approval

This Community Health Improvement Plan was approved by the La Crosse County Health & Human Services Board on July 12, 2016. The plan is available to the public through our website www.lacrossecounty.org/health or upon request.

About Our Community

La Crosse County was created in 1851 from previously unorganized territory, and is named for the Native American game "lacrosse." Located in southwest Wisconsin, the county seat is the city of La Crosse. La Crosse County is the largest populated county on Wisconsin's western border. The geography is diverse and includes prairies, bluffs, forests, lakes, and rivers. County residents share an appreciation for the beauty of their natural surroundings and the abundance of resources offered throughout the area. La Crosse County is bordered by Trempealeau and Jackson counties to the north, Monroe County to the west, Vernon County to the south, and Houston County, Minnesota to the west.



La Crosse is home to several health care institutions, which provide medical services to the region. Gundersen Health System and Mayo Clinic Health System – Franciscan Healthcare serve the health needs of both La Crosse County residents as well as many people from surrounding areas including Iowa and Minnesota.

La Crosse is also known for its excellent post-secondary education. The University of Wisconsin La Crosse, Viterbo University, Western Technical College, and Globe University all provide a variety of educational opportunities.

La Crosse County has a population of approximately 114,638. There are 18 different local governments, including towns, villages, and cities. Median household income is \$50,769. Our population is predominately white (91.8%), Asian (4.6%) and African American (1.5%). In 2015, La Crosse County was ranked 15th in overall health comes within the State of Wisconsin.

La Crosse County Health Department (LCHD) structure includes Administration, Environmental Health, Health Education, Laboratory, Nutrition, Public Health Nursing and Vector Control. Visit our website at <https://lacrossecounty.org/health> for information on services provided.

Determining Health Priorities

How did we get here?

The community health improvement process is a comprehensive approach to both assessing community health and developing and implementing action plans to improve community health through community partnership engagement. The CHIP process includes two distinct yet connected components:

1. The **Community Health Assessment (CHA)** process engages community members and partners to collect and analyze health-related data and information from a variety of sources. The findings of the CHA inform community members and partners in prioritizing health concerns. The La Crosse County CHA is available at:
<http://www.lacrossecounty.org/health/docs/Administration/HD%20Reports/CHA-Full%20Plan.pdf>

2. The purpose of this document, **Community Health Improvement Plan (CHIP)**, is to describe how La Crosse County Health Department and the community it serves will work together to improve the health of the population in La Crosse County



Community Forum
January 28, 2016

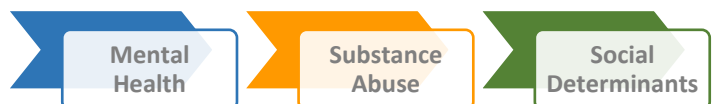
Collaboration

The La Crosse County CHIP was developed by the La Crosse County Health Department (LCHD) CHIP Development Team in collaboration with community members and partners through a series of meetings over a four month time period. These meetings were largely informed by the results of our CHA and followed the Wisconsin Association of Local Health Departments and Boards (WALHDAB), “The Wisconsin Guidebook on Improving the Health of Local Communities”. Key elements include:


- Identifying strategic issues based on the CHA
- Prioritizing the issues
- Identifying goals
- Identifying assets and resources
- Developing strategies to achieve goals
- Writing SMART objectives with performance measures to monitor progress

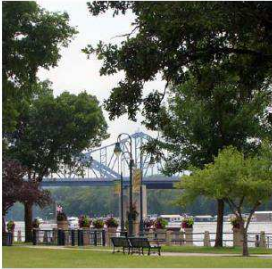

Priority Areas

Three priority focus areas were identified through this process:





La Crosse County



**La Crosse County Health Department
Community Health Assessment
2016**

MAKING THE HEALTHY CHOICE TOGETHER
"Protect, promote and improve the health of all people to enhance the quality of life."

Priority Area #1 – Mental Health

GOAL: To improve mental health for La Crosse County residents.

PERFORMANCE MEASURES How We Will Know We are Making a Difference

OBJECTIVE	INDICATORS OR MEASURES (LIST SOURCE) <i>*Indicators are the data trends. They are not intended to be measures of success.</i>
By December 31, 2021, measure and reduce stigma of suicide and mental illness in La Crosse County.	Average number of mentally unhealthy days reported in past 30 days (age-adjusted). (County Health Rankings) Percentage of adults reporting more than 14 days of poor mental health per month. (County Health Rankings) Overall mental health rating. (COMPASS) Calls for resources related to mental health or mental illness. (211 Call Data) Community Stigma Measure (To be developed)

ALIGNMENT

LCHD CHA	Healthiest Wisconsin 2020	Healthy People 2020
Mental health was rated as the highest concern in the La Crosse County Health Department Community Health Assessment which included data from the COMPASS NOW 2015 survey, key informant interviews, community forums, and community leader rankings.	Mental Health Objective 2: By 2020, reduce disparities in suicide and mental health disorders for disproportionately affected populations, including those of differing races, ethnicities, sexual identities and orientations, gender identities, educational or economic status.	(MHMD-1) Reduce the suicide rate (MHMD-9) Increase the proportion of adults with mental health disorders who receive treatment. (MHMD-10) Increase the proportion of persons with co-occurring substance abuse and mental health disorders who receive treatment for both disorders.

OBJECTIVE: By December 31, 2021, measure and reduce stigma of suicide and mental illness in La Crosse County.

BACKGROUND ON STRATEGY
Source: Substance Abuse and Mental Health Services Administration (SAMHSA) Prevention of Substance Abuse and Mental Illness
Evidence Base or Promising Practice (List link/source): Evidence Based (<http://www.samhsa.gov/prevention>)
Policy Change (Y/N) and list policy/link to policy): Yes; New policy to be developed to measure and address stigma within the community and/or Health Department employees.
Contributing factors and causes (include behavioral risk factors, environmental, social-economic factors, health status disparities, health equity and health risk population): Limited access to treatment and preventative services as well as prohibitive costs disproportionately affect populations with lower socio-economic status (La Crosse County Health Department, Community Health Assessment – Mental health and Social Determinants)

ACTION PLAN					
Activities:	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Comments
1. Identify and meet with leaders of existing coalitions and campaigns (i.e. Mental Health Coalition and Campaign to Change Direction) to determine alignment with CHIP goal.	06/30/2017	La Crosse County Health Department (LCHD) staff time, Community Partners, WISE Toolkit	LCHD with Community Partners	Determine alignment and gaps between chip goals and existing programs	Connect with behavioral health change maker grant project
2a. Develop a tool to assess the level of stigma within the community.	12/31/2017	Consultants LCHD Staff, Community Partners, including Campaign to Change Direction	LCHD	Stigma assessment tool developed	Tool should assess projection of and receipt of stigma
2b. Implement assessment tool.	12/31/2018	Consultants, LCHD Staff, Community Partners	LCHD	Raw data	
2c. Compile and analyze results.	12/31/2019	Consultants, LCHD Staff, Community Partners	LCHD	Baseline data	Consider publication
2d. Identify gap areas.	12/31/2019	LCHD staff time, WISE Toolkit, Community Partners	LCHD	Focus Area/s Identified	
3. Develop and implement a strategy to reduce stigma.	12/31/2020	LCHD and Community Partners	LCHD with Community Partners	Strategy	Evaluation of strategy to occur with next community health assessment
4a. Identify and implement a tool to measure baseline stigma in LCHD employees.	12/31/2017	LCHD Staff Time, Stigma Assessment Questionnaire	LCHD	Tool and baseline data	

ACTION PLAN					
Activities:	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Comments
4b. Identify and implement training or interventions aimed at increasing stigma awareness within LCHD employees.	06/30/2019	LCHD Staff time, WISE Toolkit	LCHD	Training/Education	
4c. Measure stigma awareness in LCHD staff following intervention.	6/30/2020	LCHD Staff time, Stigma Assessment Questionnaire	LCHD	Data	3 assessments
4d. Follow up on stigma awareness assessment to identify additional needs.	12/31/2021	LCHD Staff Time	LCHD	Identification of additional training needed and resources/tools	

Priority Area #2 – Substance Abuse

GOAL: To reduce substance abuse in La Crosse County.

PERFORMANCE MEASURES How We Will Know We are Making a Difference

OBJECTIVE	INDICATORS OR MEASURES (LIST SOURCE) <i>*Indicators are the data trends. They are not intended to be measures of success.</i>
<p>By December 31, 2021, reduce substance abuse by increasing awareness of, and assuring access to, comprehensive services in La Crosse County.</p>	<p>Percentage of adults reporting binge or heavy drinking. (County Health Rankings)</p> <p>Percentage of persons aged 12 years and older who needed alcohol treatment and/or illicit drug treatment that reported that they received specialty treatment for abuse or dependence in the past year. (Healthy People)</p> <p>State and local rankings of youth and adult behaviors related to unhealthy and risky alcohol and other drug use. (Wisconsin Department of Health Services, Behavioral Risk Factor Survey, Youth Risk Behavior Survey)</p> <p>Calls for resources related to substance abuse. (211 Call Data)</p>

ALIGNMENT

LCHD CHA	Healthiest Wisconsin 2020	Healthy People 2020
<p>Substance abuse was rated as the second highest concern in the La Crosse County Health Department Community Health Assessment which included data from the COMPASS NOW 2015 survey, key informant interviews, community forums, and community leader rankings.</p>	<p>Alcohol and Other Drug Use Objective 1: By 2020, reduce unhealthy and risky alcohol and other drug use by changing attitudes, knowledge, and policies, and by supporting services for prevention, screening, intervention, treatment and recovery.</p>	<p>(SA-8) Increase the proportion of persons who need alcohol and/or illicit drug treatment and received specialty treatment for abuse or dependence in the last year.</p> <p>(SA-13) Reduce past-month use of illicit substances.</p> <p>(SA-14) Reduce the proportion of persons engaging in binge drinking of alcoholic beverages.</p>

OBJECTIVE: By December 31, 2021, reduce substance abuse by increasing awareness of, and assuring access to, comprehensive services in La Crosse County.

BACKGROUND ON STRATEGY
Source: National Institute on Drug Abuse
Evidence Base or Promising Practice (List link/source): Evidence Based - Research-based prevention programs focus on intervening early in a child’s development to strengthen protective factors (self-control, parental monitoring, academic competence, anti-drug use policies, strong neighborhood attachment) before problem behaviors develop ([National Institute on Drug Abuse](#))
Policy Change (Y/N) and list policy/link to policy): Y, Heroin Task Force is lead on policy and education changes
Contributing factors and causes (include behavioral risk factors, environmental, social-economic factors, health status disparities, health equity and health risk population): early aggressive behavior/i individual, lack of parental

supervision/family, substance abuse/peers, drug availability/school, poverty/community ([National Institute on Drug Abuse](#))

ACTION PLAN					
Activities:	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Comments
1. Continue leadership and participation with the Heroin and Other Illicit Drug Task Force to provide education regarding available services.	Ongoing	La Crosse County Health Department (LCHD) Staff Time, Community Partners	LCHD, Heroin and Other Illicit Drug Task Force leadership	Education programs and policies, awareness campaign	
2. Develop a community navigator system to connect people with resources. <i>(For detailed action plan, see Social Determinants section of the LCHD CHIP).</i>	12/31/2021	LCHD Staff Time, Community Partners, Grant Funding	LCHD with Community Partners	A systems change through development of a neighborhood web of supports (web)	
3. Continue active participation in groups / coalitions focusing on prevention and strengthening protective factors.	Ongoing	LCHD Staff Time, Community Partners	LCHD with Community Partners	Education programs and policies, awareness campaign	Foster community environment for prevention & support

Priority Area #3 – Social Determinants

GOAL: To create social and physical environments that promote good health for all.

PERFORMANCE MEASURES How We Will Know We are Making a Difference

OBJECTIVE	INDICATORS OR MEASURES (LIST SOURCE) <i>*Indicators are the data trends. They are not intended to be measures of success.</i>
By December 31, 2021, assure that a system exists that connects people in need to available resources in La Crosse County.	Percent of adults 18 years and over who report not receiving sufficient social-emotional support (BRFSS) Community perception of health, safety, education, quality of life, and economic aspects as well as access to care (COMPASS) Calls for resources related to social determinants. (211 Call Data)

ALIGNMENT

LCHD CHA	Healthiest Wisconsin 2020	Healthy People 2020
Social Determinants was rated as the third highest concern in the La Crosse County Health Department Community Health Assessment which included data from the COMPASS NOW 2015 survey, key informant interviews, community forums, and community leader rankings.	Health Literacy Objective 2: By 2020, increase effective communication so that individuals, organizations, and communities can access, understand, share, and act on health information and services.	(AHS-6.1) Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines.

OBJECTIVE: By December 31, 2021, assure that a system exists that connects people in need to available resources.

BACKGROUND ON STRATEGY
Source: What Works for Health (<http://www.countyhealthrankings.org/policies/social-service-integration>) - County Health Rankings and Roadmaps (webinar: <http://www.countyhealthrankings.org/webinars/rankings-action-exploring-community%E2%80%99s-innovative-social-service-model>)
Evidence Base or Promising Practice (List link/source): Promising Practice - Community Hub Model
Policy Change (Y/N) and list policy/link to policy): Yes, Policies to be determined as implementation of system change occurs
Contributing factors and causes (include behavioral risk factors, environmental, social-economic factors, health status disparities, and health equity and health risk population): Those with lower socioeconomic status experience disproportionate health disparities that may stem from unequal access to resources. (LCHD CHA – Access to Care and Social Determinants)

ACTION PLAN					
Activities:	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Comments
1. Actively participate in community conversations regarding current and proposed systems.	12/31/2016	La Crosse County Health Department (LCHD) Staff Time, Community Partners	LCHD with Community Partners	Action plan	Conversations currently underway with community partners
2. Assist in development of an enhanced or new system.	12/31/2017	LCHD Staff Time, Community Partners, Funding For Project Staff And Supplies	LCHD with Community Partners	A systems change through development of a neighborhood web of supports (web)	
3. Participate in grant application(s) to support a pilot project of the enhanced or new system.	12/31/2017	LCHD Staff Time, Community Partners	LCHD with Community Partners	Funding secured	
4. Offer direct and/or in-kind resources to the pilot project of the enhanced or new system.	12/31/2018	LCHD staff time	LCHD	Pilot to implementation	
5. Offer direct and/or in-kind resources to sustain the system.	12/31/2021	LCHD staff time	LCHD	System sustained	

Implementation

The implementation of goals, objectives and activities as outlined in this document for each priority area will be coordinated and tracked by the La Crosse County Health Department using the Community Health Improvement Plan Program Tracking Tool. Progress will be monitored and reported quarterly to the La Crosse County Health & Human Services Board and annually through our annual report.

Record of Change

The La Crosse Community Health Improvement Plan is not a stagnant plan but a plan that can change to meet the needs of the community. Therefore it is important that records of these changes are kept in order to monitor the evolution of this plan. All changes to this plan will be approved by the La Crosse County Health Department CHIP Team. Changes to this Community Health Improvement Plan will be recorded below.

Description of Change	Page	Date	Rationale

**LA CROSSE COUNTY
HEALTH DEPARTMENT
300 4th St N
La Crosse WI 54601
(608)785-9872**

Visit our website at:

<http://www.lacrossecounty.org/health>

