2019

Richland County Area Community Health Needs Assessment (CHNA)

THE RICHLAND HOSPITAL, INC.
"Serving Since 1924"

Extension
UNIVERSITY OF WISCONSIN-MADISON
RICHLAND COUNTY

RICHLAND SCHOOL DISTRICT
BUILDING FUTURES
ONE CHILD AT A TIME

RICHLAND COUNTY HEALTH & HUMAN SERVICES

2019 Richland County Area Community Health Needs Assessment (CHNA)

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COMMUNITY IMPACT

Since the completion of the 2016 Community Health Needs Assessment, Richland County community coalitions, businesses and organizations have stepped forward with initiatives to positively impact the following important health care needs:

- Mental Health
- Substance Abuse
- Obesity

This Community Health Needs Assessment (CHNA) identifies and prioritizes the health and wellness needs of individuals in the communities served by The Richland Hospital, Inc. The priorities identified in this report will help guide the hospital's community health improvement plan and community benefit activities, as well as its collaborative efforts with other agencies and organizations that share the mission to improve community health.

All non-profit hospitals are required to conduct Community Health Needs Assessments every three years. This assessment meets the requirements of the Patient Protection and Affordable Care Act (ACA), IRS Code 501(r) (3). The Richland Hospital, Inc. has a long tradition of working with partners and key community stakeholders outside the hospital to meet the health needs of the community. In 2013 and 2016, The Richland Hospital collaborated with community stakeholders to complete the CHNA. In 2016, Richland Hospital invited multiple key stakeholders to become part of the Health Assessment and Wellness Commission (HAWC). Partnering with Richland County Health and Human Services, UW-Madison Division of Extension Richland County, and the Richland School District, jointly completed the 2016 Richland County Area Community Health Needs Assessment. In that CHNA, the following three priorities were identified: Mental Health Treatment, Substance Abuse Treatment and Prevention, and Obesity Treatment and Prevention. Since that assessment, community coalitions, businesses, organizations and key stakeholders have begun work to address these CHNA priorities. The following graphic serves to inform the reader of the vast body of work that has been done since 2016.

Mental Health Needs in the Community

2017 – Southwestern Wisconsin Community Action Program's (Southwest CAP or SWCAP's) Behavioral Health Partnership and the Richland County Children and Family Advocacy Council (RCCFAC) conducted an asset mapping event resulting in organizational discussions to bring National Alliance on Mental Illness (NAMI) back to Richland County. NAMI offers Peer-to-Peer and Family-to-Family support groups.

2017 – Southwest CAP held Mental Health First Aid Training in Richland Center. These classes familiarize community members with common mental health and substance abuse disorders.

2017 – Richland Hospital signed the Community Coalition Partnership Agreement with Southwest CAP to support the Southwestern Wisconsin Behavioral Health Partnership. This alliance sought to foster acceptability, improve accessibility, and increase the availability of behavioral health services and resources in Southwestern Wisconsin.

2017 – Richland Hospital introduced a new service called Senior Life Solutions (SLS). This program is an intensive outpatient group counseling program designed to meet the unique needs of individuals over the age of 65 who struggle with depression and anxiety, often related to aging. By bringing this program to Richland County, the number of mental health providers increased in our area.

2017 – Richland Hospital's Senior Life Solutions program created a mental health resources binder, which connected those in the community needing mental health assistance with local resources.

2017 – Richland Hospital made a commitment to support and promote locally held Grief Support Group meetings with internal and external promotion. Meetings included: Drop-In Grief Support, RTS Bereavement Services for loss of infants and pregnancy loss, When Mourning Dawns, and Grief Through the Holidays.

2017 – Richland Hospital explored the Rural Wisconsin Healthcare Cooperative's Behavioral Tele-health program. After several meetings, it was determined that the program was a better fit for a primary medical practice than a critical access hospital. The hospital shared this information with the local physician's group.

2018 – Richland School District, in partnership with Richland County Health and Human Services, provided an additional mental health therapist to work onsite with students at the Richland School District.

2018 – Richland School District entered into a Memorandum of Understanding (MOU) with Passages, LLC to provide mentoring services to students through their Youth Services Program.

2018 – Richland School District Foundation, through the Schreiber SEEK Grant, expanded the Family Mentor Program to connect families in need with family units that have more support to mentor them.

2018 – More local meetings were held to discuss how to bring a NAMI Chapter to Richland County.

2018 – Richland Hospital partnered with Susan Springer Judd from the Suicide Prevention Coalition of Iowa County to provide 2 QPR Training (Question. Persuade. Refer.) sessions and a Community Talk "Coping with Suicide through the Holidays" for anyone in the community.

2018 – Richland Hospital filled the first track of the Senior Life Solutions program and began the process of adding a second track. The additional track doubled the number of patients being served and the number of mental health providers available.

2018 – Richland Hospital put the mental health resource, created by Senior Life Solutions, on their website to make it accessible to anyone needing to know how to access local resources.

2018 – Richland Hospital met with Richland Middle School to discuss implementing a HOPE Squad or a similar program for suicide prevention.

2019 – Richland Hospital, UW Extension, Richland School District, Ithaca School District, Richland County Health and Human Services, and Pauquette Center joined the Richland Mental Health Coalition.

2019 – Richland School District expanded the services provided in the school building to include any mental health service providers contracted with Richland County Health and Human Services.

2019 – Richland Hospital hosted a meeting of multiple community stakeholders and Southwest Wisconsin NAMI to create a plan to bring NAMI to Richland County. Peer and family mediator training was discussed along with costs and timelines. As a result, NAMI Peer Support Group Meetings began in October at the Richland Hospital.

2019 – A new youth mental health coalition was organized in response to community needs. The new partnership between Richland and Ithaca School Districts is called Richland County Healthy Connections. The coalition was awarded a $75,000 Department of Public Instruction grant to implement an evidence-based program, "Sources of Strength," in the schools and the broader community. The program launched in the fall of 2019 with peer-led and advisor events.

2019 – Richland Hospital's Senior Life Solutions Director participated in the planning for SWCAP Behavioral Health Partnership's 2019 Fall Mental Health Matters Summit. This free event:

- Celebrated accomplishments in Southwest Wisconsin to address mental health needs.
- Provided participants an opportunity to learn and network with others in the region and across the state.
- Served as a platform for planning future partnership activities.

2019 – The Richland Hospital, Inc. and UW Extension – Richland County assisted SWCAP Behavioral Health Partnership to launch an interactive, online, regional behavioral health resource guide.

Substance Abuse Needs in the Community

2016 – Richland County Children and Family Advocacy Council (RCCFAC) joined the Alliance for WI Youth (AWY). The AWY brings together coalitions, individuals and resources for a common goal that affects young people through the promotion of positive youth development.

2016 - 2019 – Richland Hospital offered Free Smoking Cessation Classes

2016 – As part of membership benefits, AWY provided training to Richland County Children and Family Advisory Council (RCCFAC) on the basics of evidence-based substance abuse prevention.

2017 – RCCFAC held five Community Education events that were attended by over 250 people. The goal of these events was to raise awareness and build the capacity for Richland County to reduce substance abuse.

- During two panel presentations, attendees were educated about the local state of affairs from a substance use perspective. Panel members represented school administration, youth, health and human services, medical providers, judiciary branch, and clergy.
- A presentation outlined state alcohol and other drugs "Pillar" recommendations for Harm Reduction, Prevention, Treatment, Law Enforcement and Businesses.
- A community resource assessment event discussed and created an assets/resource list. (Appendix A)

2017 – Richland Hospital committed to continued support of SMART Recovery, a global community of mutual support groups, which holds meetings at the hospital.

- At meetings, **S**elf-**M**anagement **A**nd **R**ecovery **T**raining (SMART) participants help one another resolve problems with any addiction, from drugs or alcohol to activities such as gambling or over-eating.
- Guided by our science-based and sensible 4-Point Program, participants find and develop the power within themselves to change and lead fulfilling and balanced lives. (This program ended in 2017 due to lack of participation.)

2017 - 2018 – Richland and Ithaca School Districts strengthened and expanded their policies around the vaping epidemic.

2017 - 2019 – Richland Hospital supported Post-Prom parties hosted at high schools in Richland Center, Muscoda, Ithaca, and Spring Green.

2017 - 2019 – Muscoda Health Center and Richland Medical Center began offering addiction medicine to patients in their primary medical settings. The number of providers increased by 75%.

2017 - 2019 – RCCFAC sent three chaperones and eight youth to the Alliance for WI Youth (AWY) Summit in East Troy, WI. This was a 2-day gathering with professional trainers.

2017 – Richland School District Board voted to reinstate the Youth Risk Behavior Survey.

2017 - 2019 – In response to analysis of data and local conditions through the prevention process, RCCFAC implemented the "Parents Who Host, Lose the Most" (PWHLM) campaign. The campaign educates parents about the health and safety risks of providing alcohol to

teenagers and increases awareness of and compliance with underage drinking laws.

2017 - 2019 – With Richland County Health and Human Services as the fiscal agent, RCCFAC received two WI DHS State Targeted Response grants to address the opioid crisis. Prescription drug lock boxes, drug deactivation kits and two new permanent drug drop boxes were distributed. Narcan training sessions were held, a media campaign was provided and the community had four Drug Take Back Days.

2017 – Richland Hospital promoted Drug Take Back days in Richland Center, Muscoda, Spring Green, and Richland County.

2018 – RCCFAC, Richland School District, and Richland Hospital sponsored the movie "Straight Forward." One hundred twenty five people attended the movie and viewed the "Hidden in Plain Sight"display. A panel discussion followed the movie. Richland Medical Center physician, Doctor Andrew Wright, and Richland Center High School students served as panel members. Rx Drug Lock Boxes, PWHLM yard signs and drug deactivation kits were distributed.

2018 - 2019 – RCCFAC held showings of the movie "Written Off" in four communities. "Written Off" is a documentary taken from the gripping and honest personal journals of a young man who, after obtaining an innocent prescription for painkillers, struggled secretly to conceal his 10-year addiction to opiates and the stigma that surrounded it. "Written Off" leads us through entries he wrote, humanizing his addiction for others to better understand those struggling with addiction.

2018 – Richland Hospital hosted a viewing of the movie "Written Off" to staff.

2018 – Southwestern Wisconsin Community Action Program (SouthwestCAP) hired a Director of Sober Housing.

2018 – RCCFAC hosted a community education event called "Recovery Rediscovered," where a visual presentation of local substance abuse data was shared. Dr. David May from the Richland Medical Center was the featured speaker who provided information on current addiction medicine practices. Kimberly Hill provided a progress update on the Sober Housing project in Richland County.

2018 – Four RCCFAC members attended Substance Abuse Prevention Specialist Training (SAPST) hosted by the Alliance for WI Youth.

2018 – RCCFAC expanded into two groups to address Substance Abuse and Prevention and Child Abuse/Neglect-Trauma Informed Care.

2018 – Adverse Childhood Experiences (ACE's) Training was provided by UW extension school staff.

2019 – Richland Hospital added an online resource to their website providing anyone access to information about the local resources for the three 2016 CHNA priorities of Mental Health, Substance Abuse, and Obesity.

2019 – RCCFAC and Richland Hospital sponsored Drug Information Training for Educators and other Professionals (DITEP) provided by the Alliance for WI Youth. Several school district administrators, faculty and staff attended this training.

2018 - 2019 – Richland school district offered an alcohol-free summer concert series each year.

2019 – The new substance abuse coalition of the RCCFAC adopted a new mission statement and name: Partners for Prevention. Strategic planning sessions resulted in action plans to address underage drinking, non-Rx drug misuse impacting youth, tobacco use and vaping.

2019 – SWCAP's Behavioral Health Partnership program and UW extension partnered to form an Addiction Resource Mapping group. The diverse participants developed a developed a treatment tool using the NIATX model. This is a process improvement model.

2019 – RCCFAC voted to fund alcohol age compliance checks at $500 to reduce youth retail access to alcohol. Partners for Prevention Coalition works to increase county readiness and builds the capacity to implement the biannual checks.

2019 – Crimestoppers voted to approve funding to cover the cost of showing the film, "Heroin's Grip." The film was part of an event hosted by the Partners for Prevention Coalition aimed at reducing addiction stigma and increasing support for treatment and recovery.

2019 – RCCFAC's Partners for Prevention, with the Richland School District as the fiscal agent, applied for $1-million-dollar federal Drug Free Communities grant.

2019 – Richland Hospital began exploration and planning for participation in the ED2 Recovery program through SWCAP and Wisconsin Voices for Recovery.

Obesity Prevention and Treatment Needs in the Community

2016 – Richland FIT completed the community garden project. Richland Center Parks and Recreation Department later assumed responsibility for the project.

2016 - 2017 – Richland FIT holds the two Ugly Sweater Fun Walk/Runs in partnership with Symons Recreation Complex and UW Platteville Richland. Participants enjoyed their choice of three healthy soups following the event. Educational information was provided and participants brought healthy food donations for the local food pantry. Symons sustains the event in 2018 and 2019.

2016 - 2017 – Richland FIT and Richland Medical Center physicians partner to offer Food for Life cooking classes at Richland High School.

2016 - 2019 – Richland FIT participates in the Healthy Wisconsin Leadership Institute (HWLI). With the support of the Coalition Partners, Richland FIT applied and was accepted for the HWLI in an effort to move toward a sustainable model to continue its work. After the two year process, Richland FIT applied and was accepted as part of the HWLI Coach Program to work further and build on its successes.

2016 - 2019 – Richland FIT's Farm to School program provided outreach (local procurement) and nutrition education in the schools. They also installed gardens.

2017 – Richland FIT formed a partnership with G.R.A.C.E. to encourage healthy choices at food fundraisers to strengthen cancer prevention.

2017 – Richland Hospital partnered with Metastar who trained peer educators to provide Diabetes Prevention and Support Group programs in Richland Center and the surrounding areas.

2017 – Dr. Jillian Scherer of the Richland Medical Center began offering Complete Health Improvement Program (CHIP) in Richland County. The nine-week, plant-based nutrition program included additional sessions on stress management, relationships, spirituality, and physical activity.

2017 – Richland Hospital supported Southwest Partners recreational events to promote activities such as: canoeing, kayaking, bicycling, snowshoeing, cross country skiing, and the Safe Routes to School initiative.

2017 – Richland Hospital Foundation provided scholarships to Richland Hospital Sports Medicine's ACE Camp. Participating in this program helped students develop core strength, decrease muscle imbalances and improve agility, so that they were able to be competitive, stay in sports, and maintain an active lifestyle for the rest of their lives. ACE Camp ended after 2017 because of low participation numbers.

2017 – Richland Hospital committed to supporting Richland Center School District in their application for a grant to get an Americorps volunteer who would oversee the Farm to School program.

2017 - 2019 – Richland Hospital maintained Baby-Friendly designation. Breastfeeding reduces the risk of childhood obesity. The Baby-Friendly Hospital designation made the Richland Hospital part of a global program that was launched by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) in 1991 to recognize hospitals and birthing centers that offer an optimal level of care for infant feeding and mother-baby bonding.

2017 - 2018 – Richland Hospital Dietitians supported Richland Fitness In Total (FIT) with their Point of Purchase Program. This represented one of several FIT strategies ongoing in the county since 2012 when a UW Partnership Program grant was awarded. The idea was to partner with food sellers and servers to create an environment where making the healthy choice was an easier option.

2017 - 2019 – Richland Hospital supported numerous local walk, run, and bike events.

2017 - 2019 – The Richland Hospital, in partnership with MetaStar, Inc., continued support of the Diabetes Prevention and Support program by providing 12 community workshops in 6 communities throughout the county. Each of the 79 residents attended at least 3 sessions, which was 50% of the program.

2018 – Richland FIT's Healthy Kids Meal project was part of a statewide project sponsored by the Medical College of Wisconsin and UW Madison to evaluate children's meal options at local restaurants.

2018 – Grassroots community group organized to fundraise and plan for a new outdoor aquatics center in Richland Center. To be completed by summer 2020.

2018 – The Richland Hospital's milk depot collected human milk donations from healthy, lactating women who were approved donors through Mothers' Milk Bank of the Western Great Lakes. The donations were then sent to the milk bank, where they are pasteurized to eliminate any viruses and bacteria. After pasteurization, the milk was tested once again for safety and distributed to hospitals.

2018 – Richland Medical Center developed a "Get FIT" program geared toward monitored weight loss options for the community.

2018 – TOPS (Taking Off Pounds Sensibly), a community support group, resumed in Richland Center.

2018 – Richland Hospital Athletic Trainers supported existing summer fitness programs at Richland Center High School and Riverdale High School. These programs were offered for a class credit and were available to all students.

2018 – The Richland County Breastfeeding Task Force conducted 1:1 interviews to gather data from local employers regarding breastfeeding policies at the workplace.

2019 – Transition of the Diabetes Prevention and Support Program to Richland County Aging and Disability Resource Center is currently in process, facilitated by a Certified Diabetes Educator from Richland Hospital.

2019 – Richland FIT prioritized work on school district student wellness policies, provided technical assistance in assessing district needs and reviewed comparable policies and leadership development to rewrite policy.

2019 – Symons Recreation Center began plans to expand their fitness center to combine with UW Platteville - Richland gymnasium, and expanded the scope of programming.

2019 CHNA Process

Health Assessment and Wellness Commission (HAWC) recognized the collective efforts being made in the community to address the prioritized health needs identified in the 2016 CHNA. That recognition in conjunction with secondary and primary quantitative and qualitative data were important considerations taken into account in creating the 2019 CHNA. The 2019 HAWC was made up of members of the partner organizations and includes the following individuals:

Jarred Burke
Richland School District,
District Administrator

Marcia Carlson
Richland Hospital,
Registered Dietitian and
Certified Diabetes Educator

Cindy Chicker
Richland Hospital, Vice President
of Professional Services

Chris Drea
Richland Hospital, Director of
Community Relations and Marketing

Rose Kohout
Richland County Health and
Human Services – Public Health,
County Health Officer

Betsy Roesler
Richland County Public Health,
Health and Wellness Coordinator
and Prevention Specialist

Megan Ryan
Richland Hospital,
Administrative Assistant

Shaun Tjossem
Richland School District,
Special Education Director

Chelsea Wunnicke
UW-Madison Division of Extension
Richland County, Extension Educator

Richland Hospital Overview

The Richland Hospital, Inc. was founded in 1924. Today, it is a 25-bed Critical Access Hospital on a 164,000 square foot campus in Richland Center, WI (Richland County, WI). It serves persons who are representative of the population of Richland County. The hospital offers: inpatient medical care; outpatient medical care; a swing bed program; general, orthopedic, gynecological, ophthalmological and podiatric surgery; emergency medical services; rehabilitation services (physical therapy, occupational therapy, speech therapy, cardiac rehabilitation, pulmonary rehabilitation, sports medicine and wound care); medical imaging; pharmacy; intensive outpatient behavioral health counseling for seniors; laboratory services; intensive care medicine; diabetes education; and specialty medical services.

The Richland Hospital, Inc. owns and operates two Rural Health Clinics. One, pictured upper left, is located in Spring Green, WI (Sauk County, WI) and the other, pictured lower left, is located in Muscoda, WI (Grant County, WI). The clinics provide primary medical care and preventative wellness care.

Committed to "Soaring to Excellence," the Richland Hospital embraces 7 C's of Culture. The 7 C's include: customer service, communication, commitment, compassion, competence, civility, and community. Our focus on community is defined as, *"Our team strives to identify and prioritize the health and wellness of the people in our service area."*

The hospital has an employee-driven Soaring Team called Community Connections. This team oversees the Community Health Improvement Plan and supports priority champions as they work with hospital staff and community members to improve the health and wellness of the people they serve. In addition, they work to make sure The Richland Hospital maintains its integration in supporting the community.

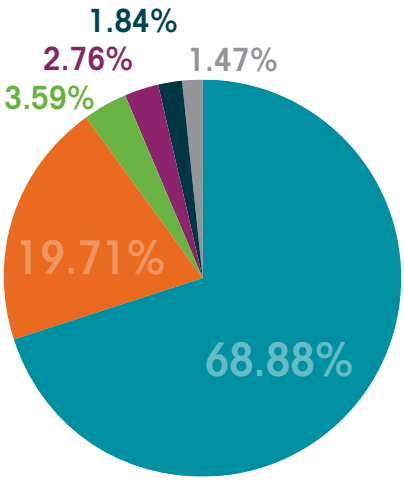
The Richland Hospital's primary service area is defined geographically with zip codes including Blue River (53518), Lone Rock (53556), Muscoda (53573), Richland Center (53581), and Spring Green (53588).

We designate these areas as our primary service area based on traditional definitions (>50% of market) and based on the geographic location of the hospital and its two Rural Health Clinics. For the purposes of this assessment, however; we will be using Richland County as our definition of Community. Our partners in this process are Richland County based and more data is available at a county level than at the zip code level. In addition, nearly 70% of patients using The Richland Hospital, Inc. reside in Richland County. The data below was taken from Intellimed. *(Intellimed combines statewide healthcare data from Wisconsin Hospital Association in a web based support engine that allows us to analyze our market.)*

It is important to note that residents from our Primary Service Area and Richland County do seek services in surrounding communities as well as in Madison, WI and La Crosse, WI. Equally important to note is that residents outside the Primary Service Area and Richland County seek healthcare services from the Richland Hospital. Additionally, strong Community Health Needs Assessments are regularly conducted in Sauk and Grant Counties.

% OF INPATIENT CASES AT RICHLAND HOSPITAL BY COUNTY

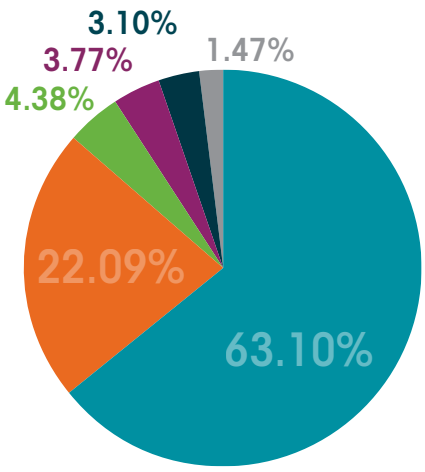
The identified counties represent 98.25% of Richland Hospital's market. The remaining 1.75% of Inpatient Cases come from additional counties. This represents data from Quarters 2,3 & 4 of 2018 and Quarter 1 of 2019.



Data compiled from: Version 9.877, Copyright © Intellimed International, Corp., 2019, All Rights Reserved. (Appendix A)

% OF OUTPATIENT CASES AT RICHLAND HOSPITAL BY COUNTY

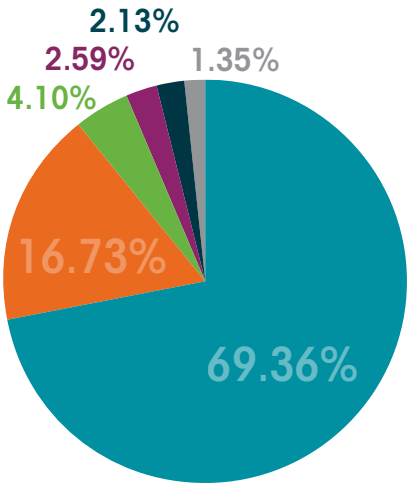
The identified counties represent 98.33% of Richland Hospital's market. The remaining 1.67% of Outpatient Cases come from additional counties. This represents data from Quarters 2,3 & 4 of 2018 and Quarter 1 of 2019.



Data compiled from: Version 9.877, Copyright © Intellimed International, Corp., 2019, All Rights Reserved. (Appendix B)

% OF EMERGENCY DEPTARTMENT CASES AT RICHLAND HOSPITAL BY COUNTY

The identified counties represent 96.26% of Richland Hospital's market. The remaining 3.74% of Emergency Department Cases come from additional counties. This represents data from Quarters 2,3 & 4 of 2018 and Quarter 1 of 2019.



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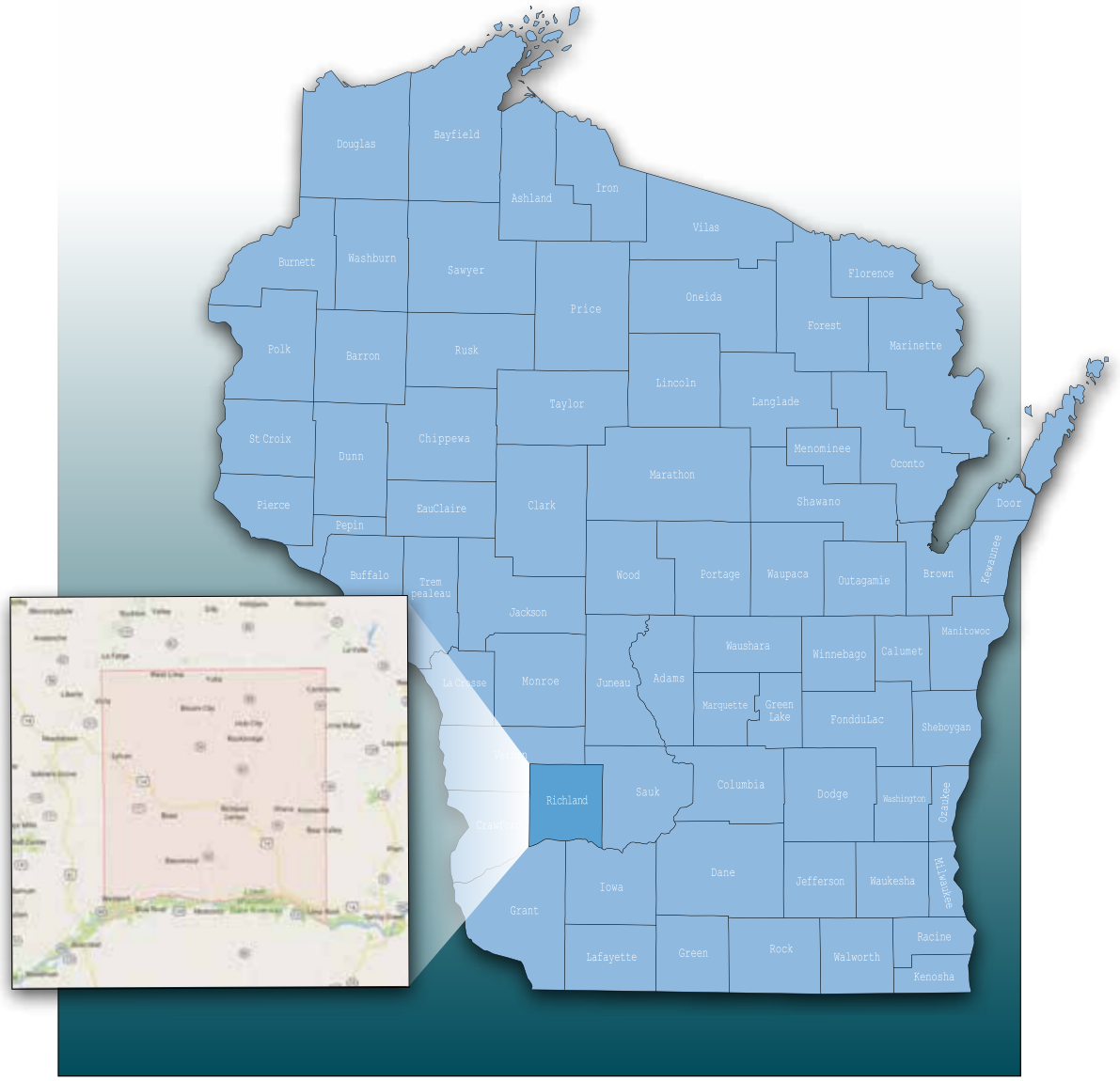
Richland Grant Sauk Iowa Verona Crawford

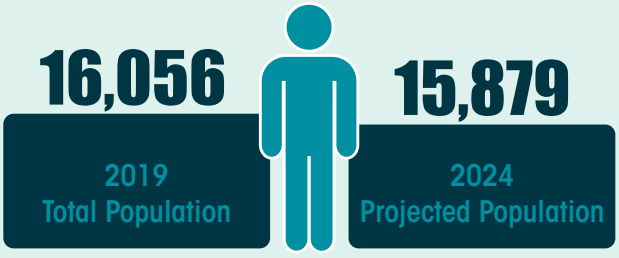
Richland County, WI



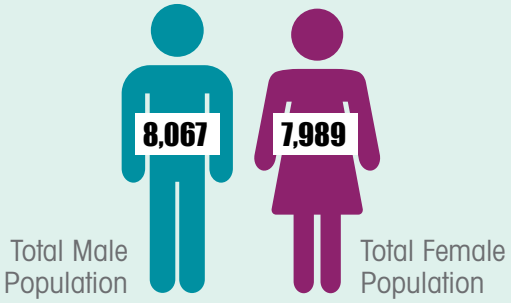
SOCIO-DEMOGRAPHIC PROFILE OF RICHLAND COUNTY

The overall population of Richland County is 16,056 and is projected to remain very stable, with negligible (1.1%) decline projected over the next five years. Population facts and comparisons from the 2016 CHNA:

RICHLAND COUNTY POPULATION EXPECTED TO DECLINE

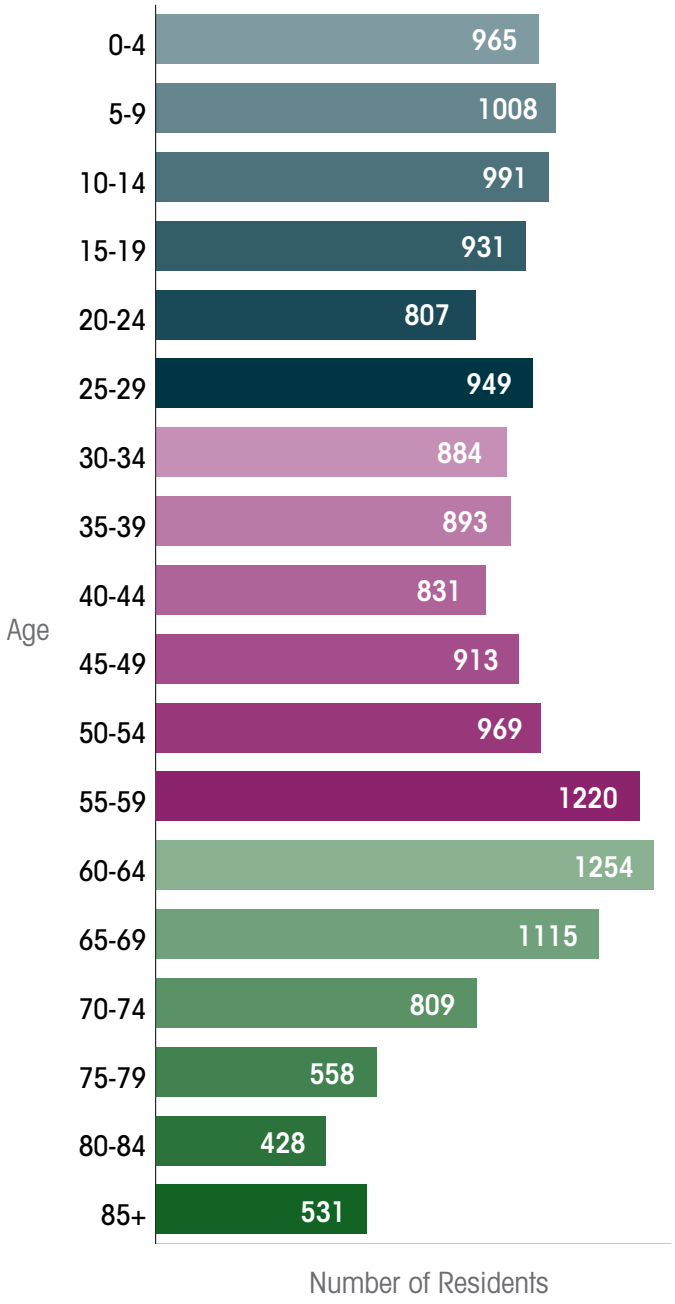


POPULATION BY GENDER (2019)



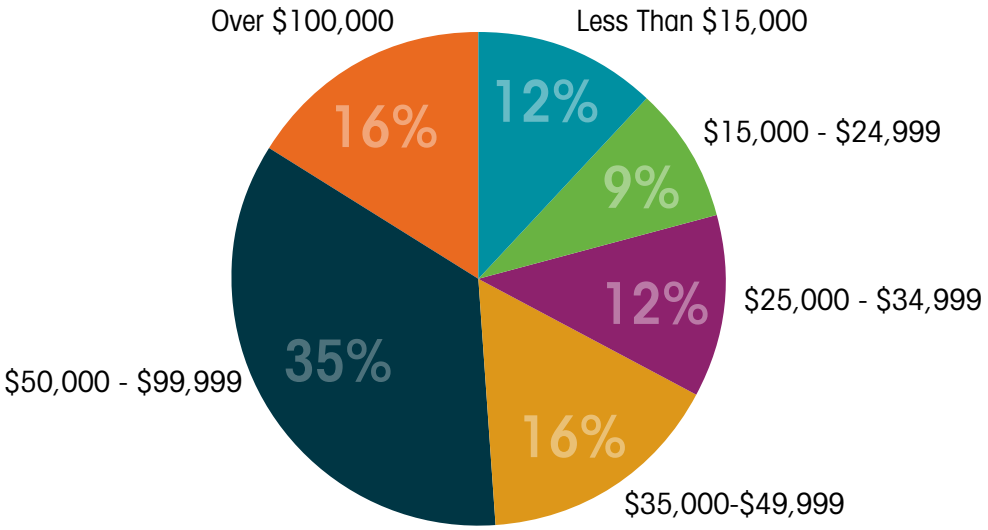
ESRI Demographic Snapshot, INTELLIMED Demographic Profile System, Richland County, WI (Appendix D)

POPULATION BY AGE DISTRIBUTION (2019)



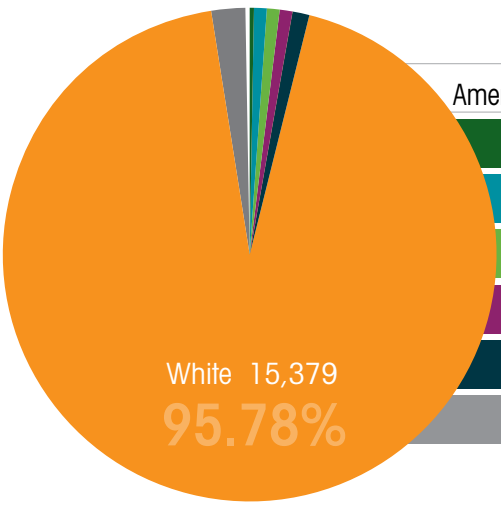
ESRI Demographic Snapshot, INTELLIMED Demographic Profile System, Richland County, WI (Appendix D)

POPULATION BY HOUSEHOLD INCOME (2019)



ESRI Demographic Snapshot, INTELLIMED Demographic Profile System, Richland County, WI (Appendix D)

POPULATION BY RACE (2019)



Race/Ethnic Breakdown	Number of Residents	Percent of Population
American Indian/Alaska Native	70	0.44%
Asian	124	0.77%
Black/African American	148	0.92%
Other	126	0.78%
Pacific Islander	3	0.02%
Two or More Races	206	1.28%
Hispanic	362	2.3%

ESRI Demographic Snapshot, INTELLIMED Demographic Profile System, Richland County, WI (Appendix D)

RICHLAND COUNTY HEALTH ASSET ANALYSIS

The Richland Hospital, Inc. is the only hospital in Richland County. It joins one primary medical clinic, one mental health facility, and Health and Human Services in caring for people in this area. There is a free clinic, but it is not a Federally-Qualified Health Center.

During a community-led asset-mapping meeting in October of 2017, additional assets were identified by Richland County residents who noted key resources that have contributed to, and will continue to contribute to, improving community health initiatives. (Appendix E)

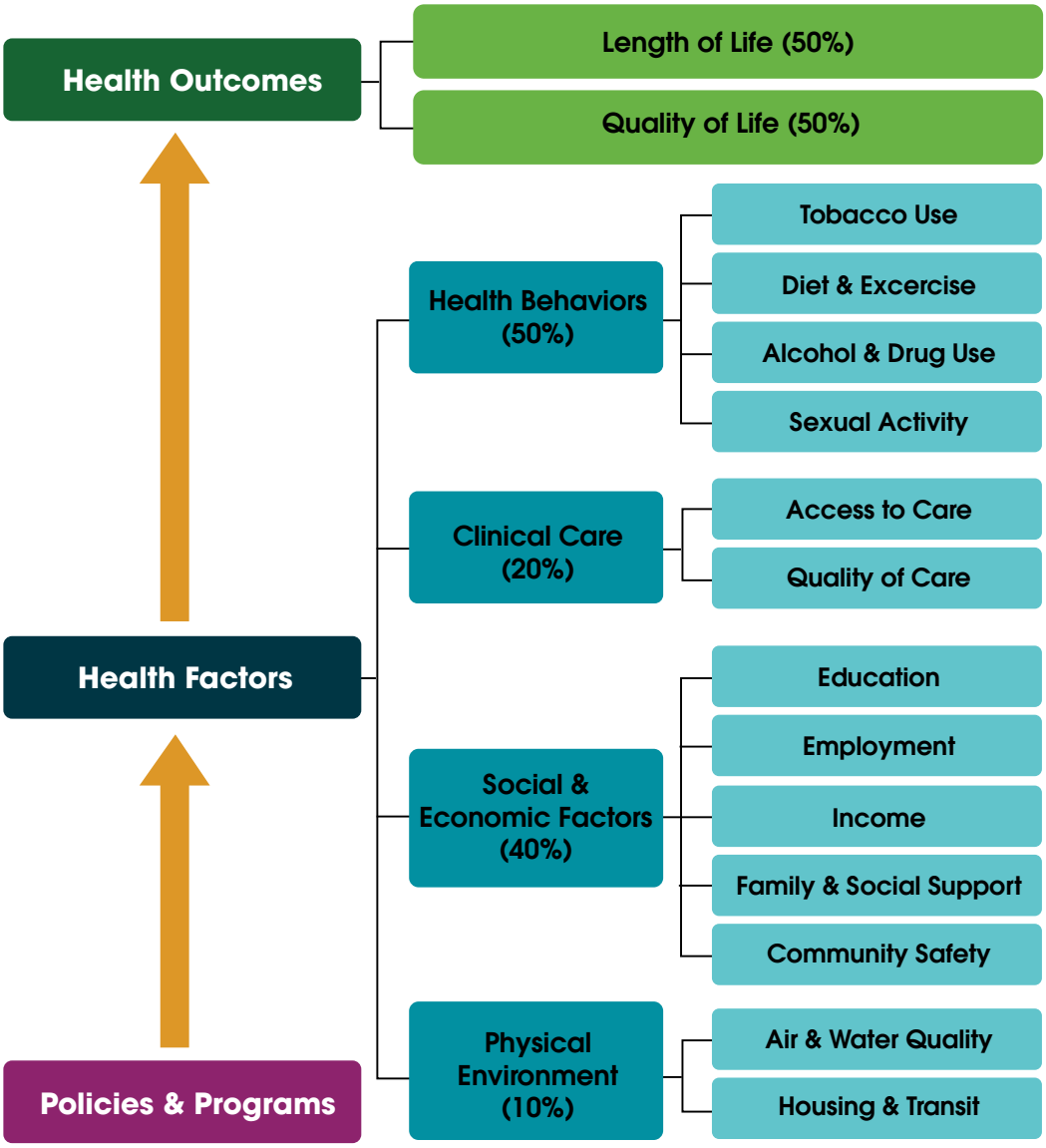
ASSESSMENT PROCESS AND METHODS

Secondary and primary data were collected to complete the CHNA. Secondary data were collected from a variety of local, county, and state sources to present community demographics, social determinants of health, health care access, birth characteristics, leading causes of death, acute and chronic disease, health behaviors, mental health, substance use and misuse, and preventive practices. The analysis of secondary data yielded a preliminary list of significant health needs, which then informed the primary data collection.

UNIVERSITY OF WISCONSIN POPULATION HEALTH INSTITUTE. COUNTY HEALTH RANKINGS & ROADMAPS 2019

Community health is impacted by many factors that happen outside of healthcare facilities. The County Health Rankings Model below illustrates how multiple factors influence the quality of an individual's life.

> County Health Rankings & Roadmaps, a collaboration between the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, is working to improve health outcomes for all and to close the health gaps between those with the most and least opportunities for good health. This work is rooted in a deep belief in health equity, the idea that everyone has a fair and just opportunity to be as healthy as possible, regardless of race, ethnicity, gender, income, location, or any other factor.
> https://www.countyhealthrankings.org/explore-health-rankings/measures-data-sources/county-health-rankings-model

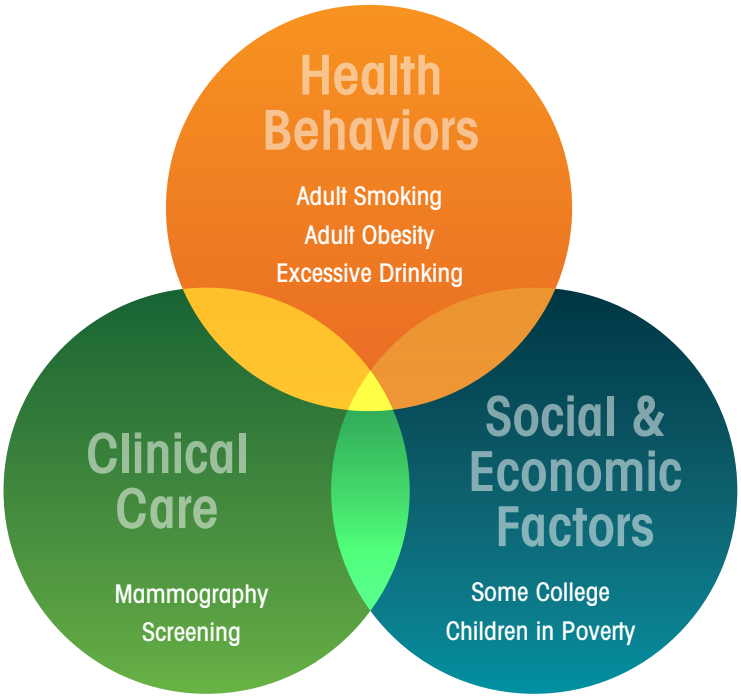


County Health Rankings model © 2014 UWPHI

COUNTY HEALTH RANKINGS & ROADMAPS OFFERS **AREAS TO EXPLORE**

According to County Health Rankings & Roadmaps, **Areas to Explore** highlights measures that are potential challenges our community may want to examine more closely. Accounting for the relative impact of each measure on health outcomes, County Health Rankings used a variety of techniques to identify the Health Factor measures for our county that seem to have the greatest potential opportunity for improvement. They identified measures where there are meaningful differences between Richland County's values and either the Wisconsin average, the national benchmark, or the state average in the best state.

The 2019 County Health Rankings and Roadmaps recommends "**Areas to Explore**" as a starting point in the journey toward improving health in our community.



Adult smoking
- Percentage of adults who are current smokers.

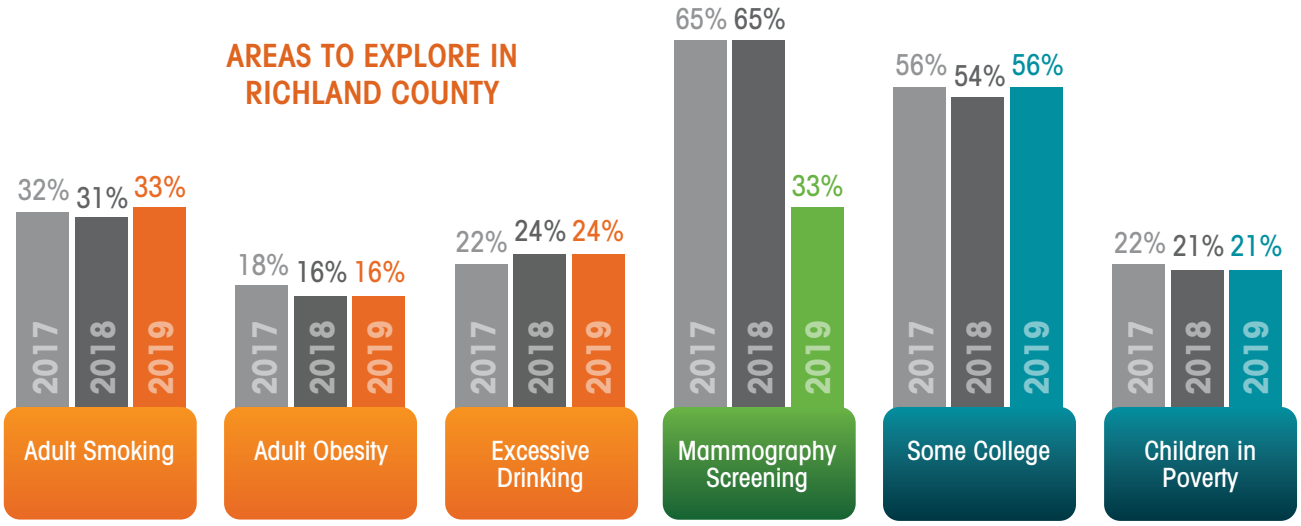
Adult obesity
- Percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2.

Excessive drinking
- Percentage of adults reporting binge or heavy drinking.

Mammography Screening
- Percentage of female Medicare enrollees ages 67-69 that receive mammography screening.

Some College
- Percentage of adults ages 25-44 with some post-secondary education.

Children in Poverty
- Percentage of people under age 18 in poverty.



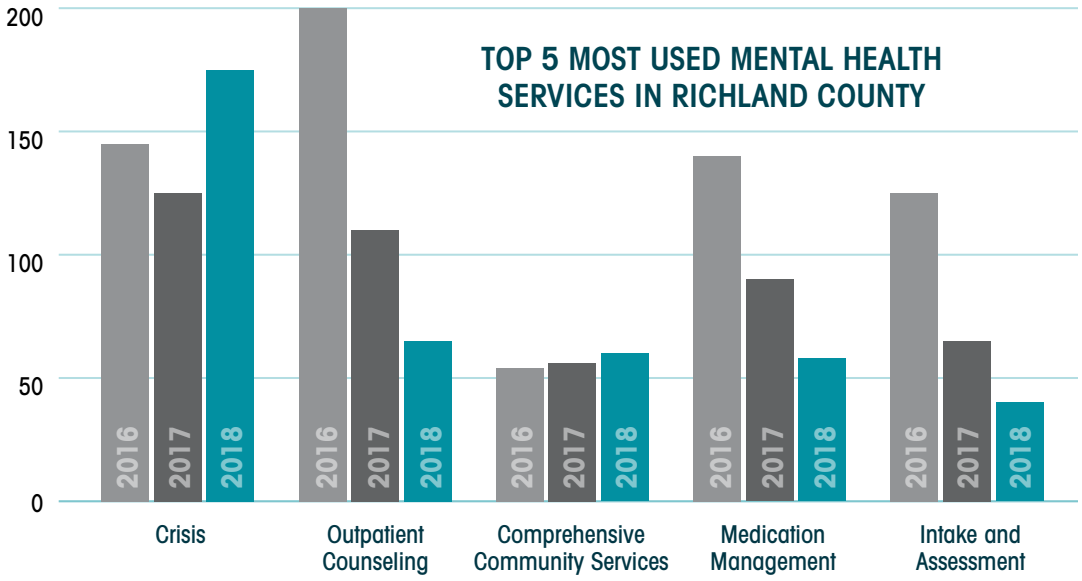
County Health Rankings & Roadmaps 2019 (Appendix F)

WISCONSIN DEPARTMENT OF HEALTH SERVICES

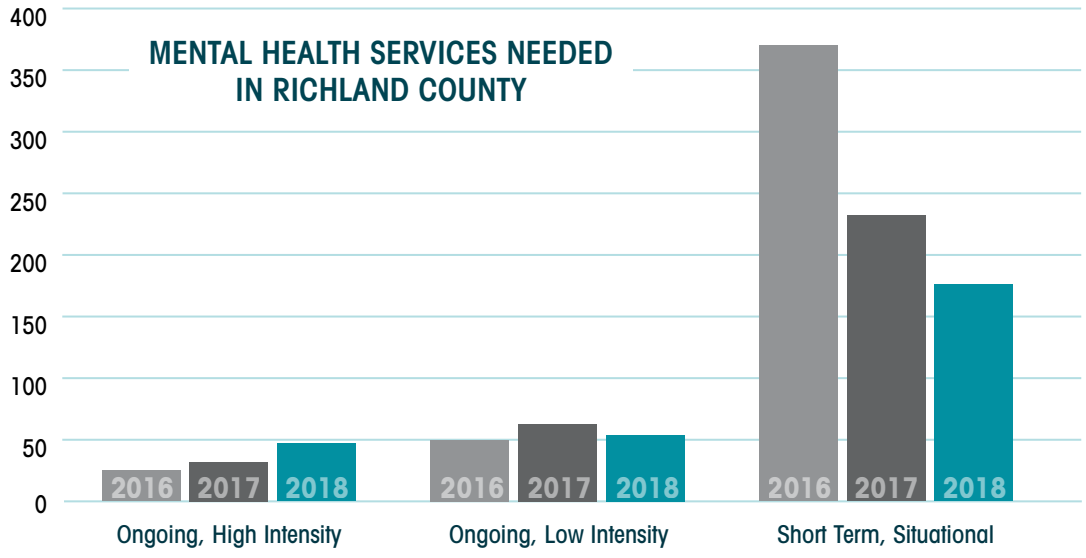
Wisconsin Department of Health Services provides information on the types of substance use and mental health services provided in the Wisconsin public behavioral health system, as well as demographic breakdowns of service recipients. This data is from the Program Participation System. It is self-reported by county behavioral health agencies.

MENTAL HEALTH

The five most used services in 2018 were crisis, outpatient counseling, comprehensive community services, medication management, and intake and assessment.



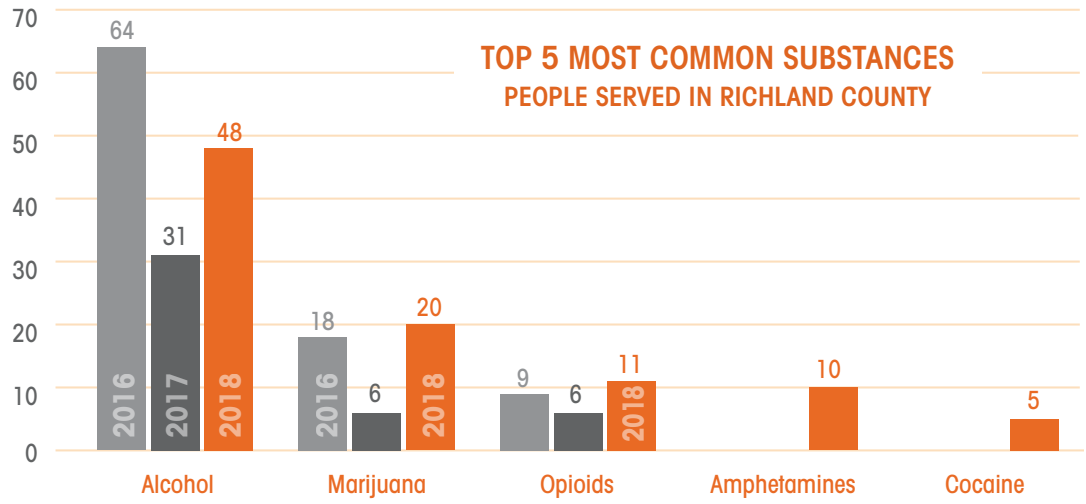
(Appendix G1, G2, G3)



(Appendix G1, G2, G3)

SUBSTANCE USE

The five most common substances in 2018 were alcohol, marijuana, opioids, amphetamines, and cocaine. The following charts show the trends.



(Appendix H1, H2, H3)

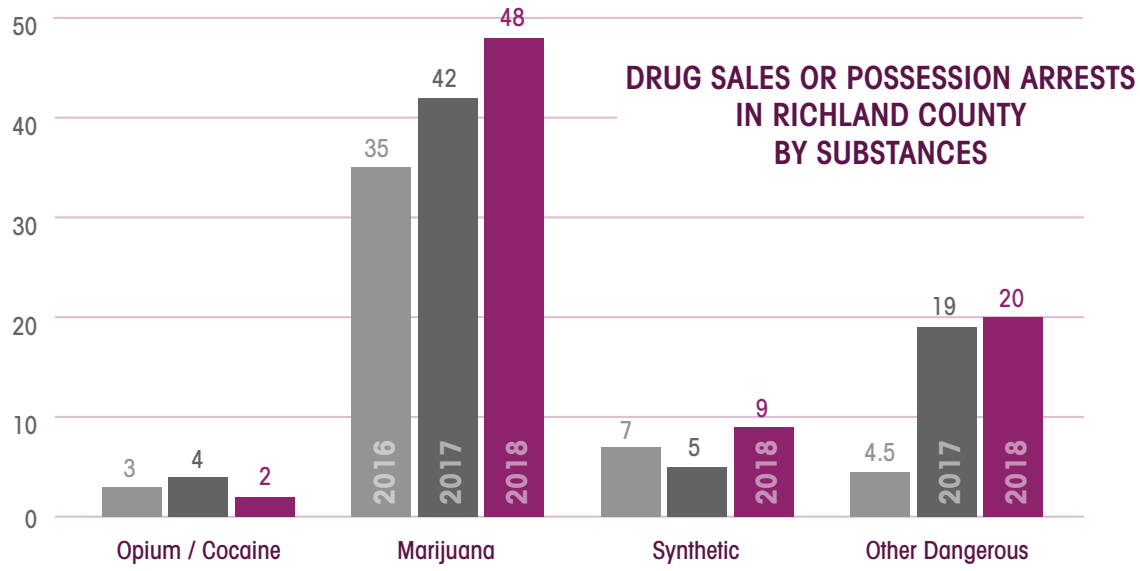
WISCONSIN DEPARTMENT OF JUSTICE DATA

The Bureau of Justice Information and Analysis (BJIA) was recently formed within the Department of Justice, Division of Law Enforcement Services, and is responsible for conducting research, analysis, and program evaluation to support evidence-based decision making and policy development. The BJIA also serves as the Statistical Analysis Center (SAC) for the State of Wisconsin and oversees the Wisconsin Uniform Crime Reporting (UCR) program.

TOTAL DRUG CRIMES ARRESTS

2016: **57**
2017: **70**
2018: **79**

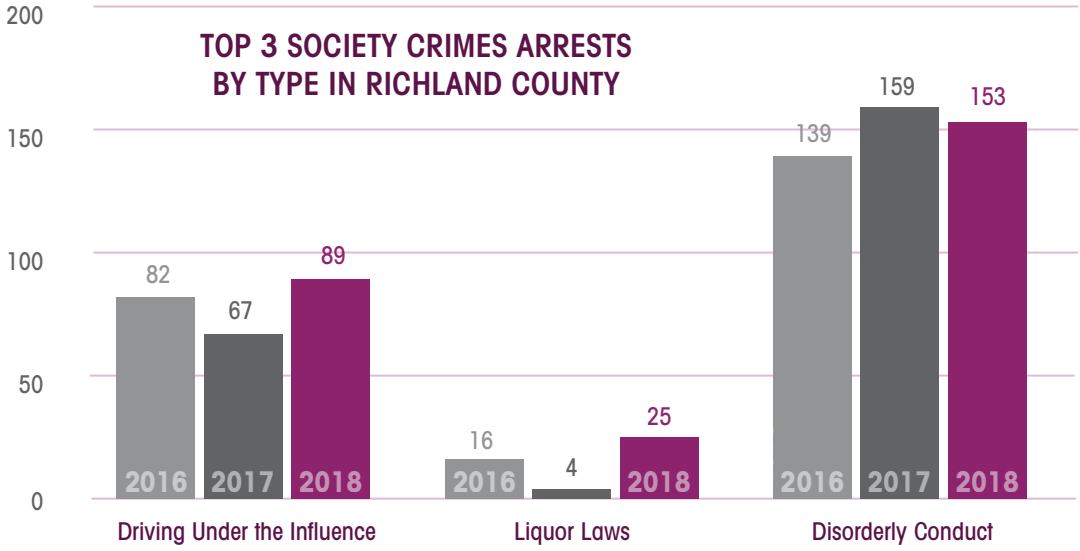
Drug Crime Arrests, Society Crime Arrests, and Violent Crime Arrests are on the rise in Richland County.



Wisconsin Department of Justice. UCR Arrest Data, 2019 (Appendix I1, I2, I3)

TOTAL SOCIETY CRIMES ARRESTS

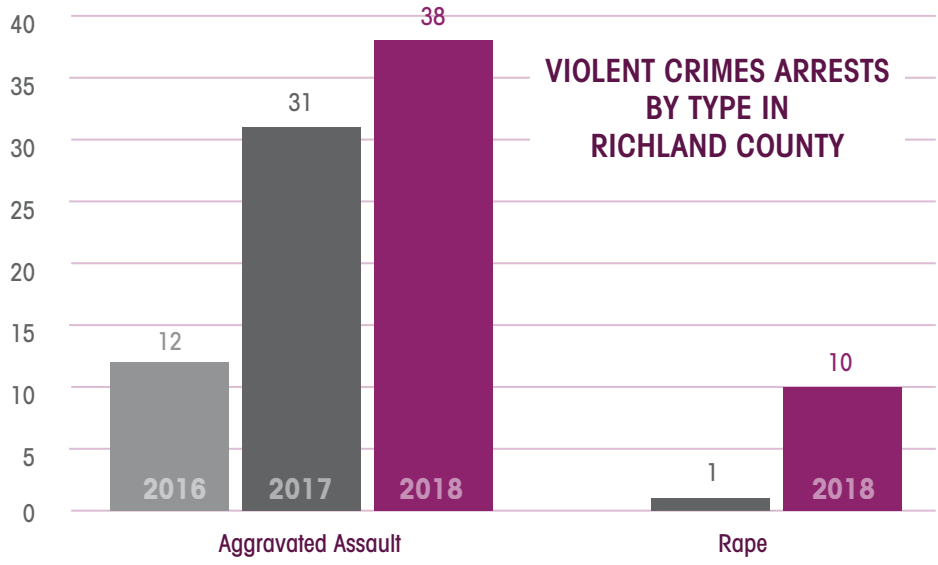
2016: 249 2017: 241 2018: 284



Wisconsin Department of Justice. UCR Arrest Data, 2019 (Appendix J1, J2, J3)

TOTAL VIOLENT CRIMES ARRESTS

2016: 12 2017: 32 2018: 48

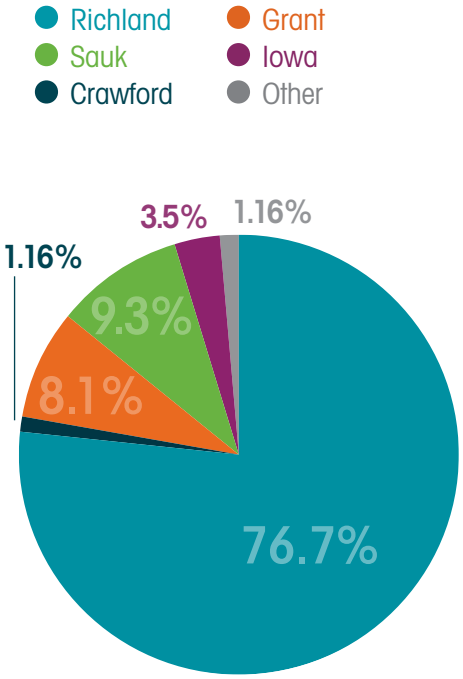


Wisconsin Department of Justice. UCR Arrest Data, 2019 (Appendix K1 ,K2, K3)

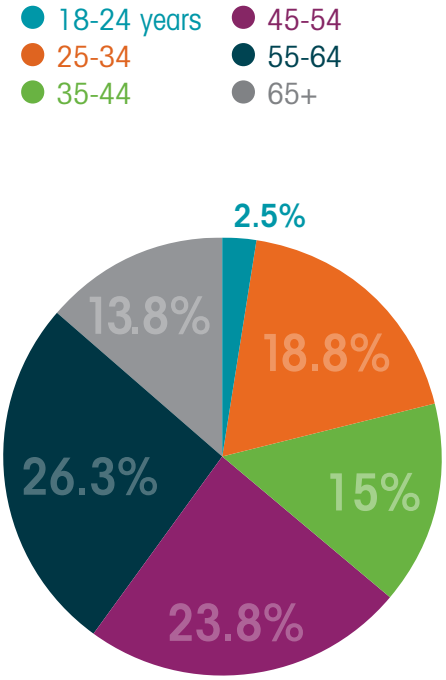
COMMUNITY HEALTH SURVEY

The community health survey was available to the public from September 16, 2019 through October 7, 2019. The survey was promoted on social media (reach 3,319), via email, and in newspapers in Richland Center, Muscoda, Spring Green and Boscobel the weeks of September 23, 2019 and September 30, 2019. Eighty-six surveys were completed. (Appendix L & M)

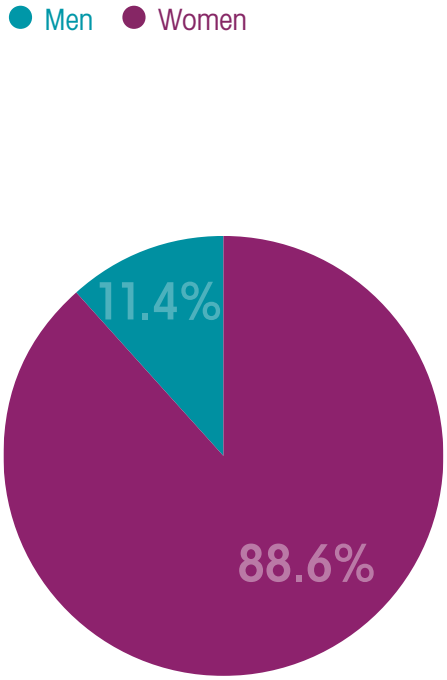
Who does the survey data represent? Nearly 80% of the respondents were from Richland County.



Diversity of the respondents' age ranges. In 2016, 63% of the respondents in the Community Survey identified themselves as older than age 62. In 2019, there was more diversity in the age of the respondents.

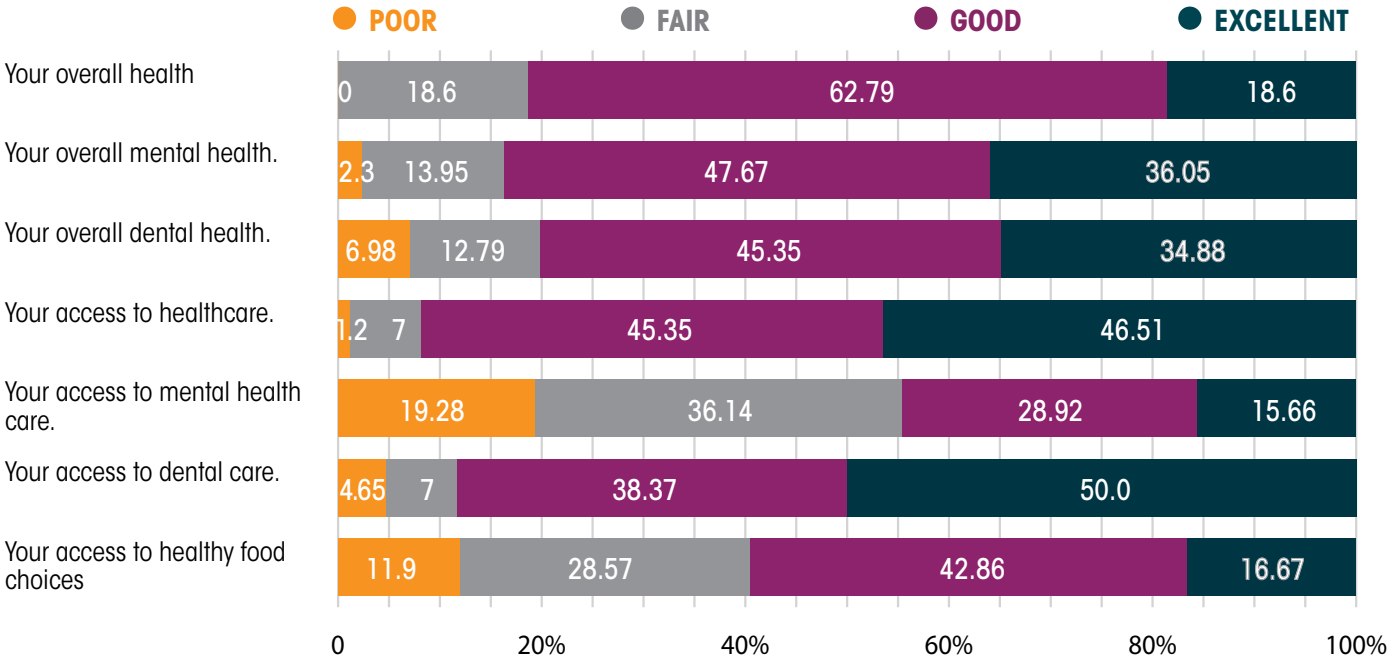


Women were the majority of the survey respondents. In 2016, 63% of the respondents in the Community Survey identified themselves as older than age 62. In 2019, there was more diversity in the age of the respondents.



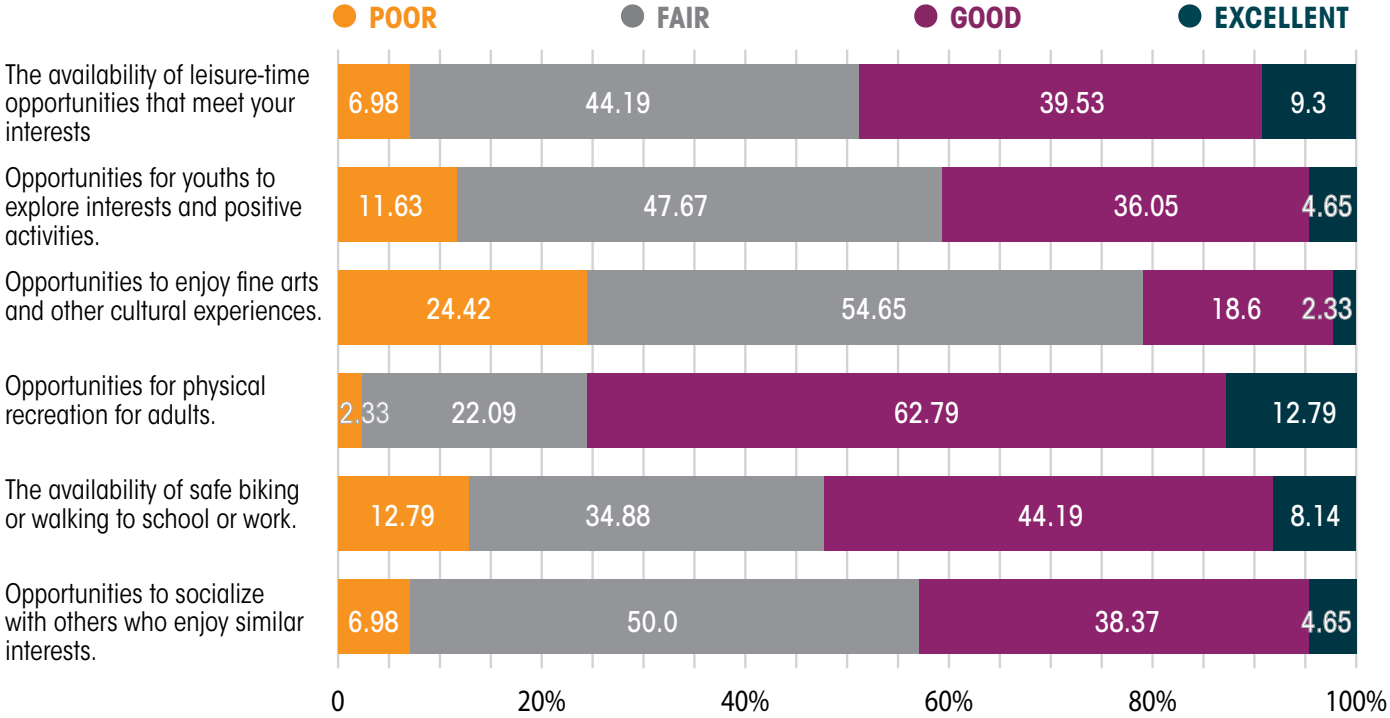
Respondents' self-evaluation of health aspects. Access to mental health care and access to healthy food choices are the larger concerns for respondents.

How would you rate the following aspects of health?



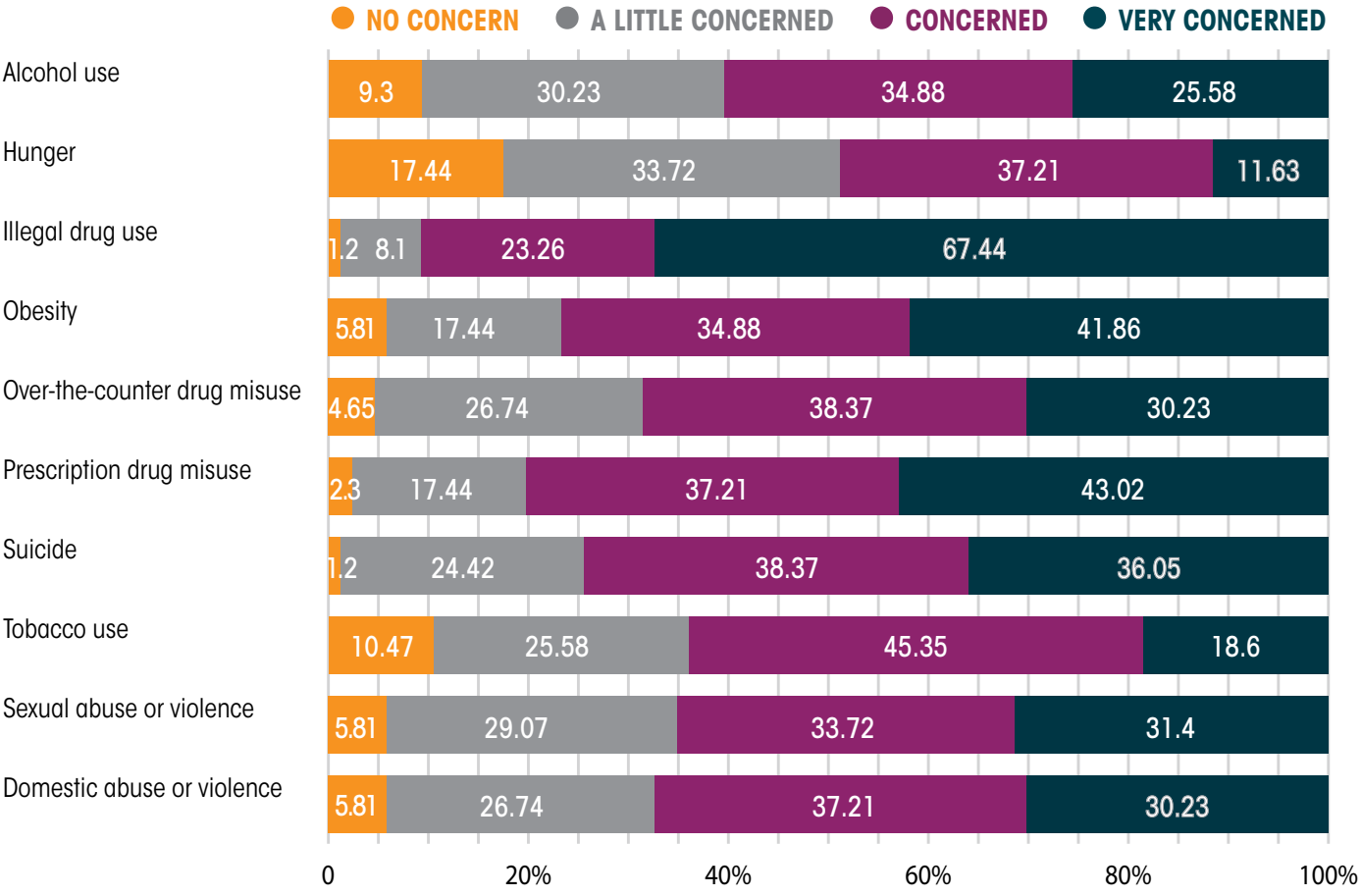
Respondents' evaluation of their community. Opportunities to enjoy fine arts and other cultural experiences (for example, music, theater, art, museums, historical) was the largest concern for respondents. The ability to safely bike or walk to school or work was the second most-frequently identified concern.

How would you rate the following aspects of life in your community?



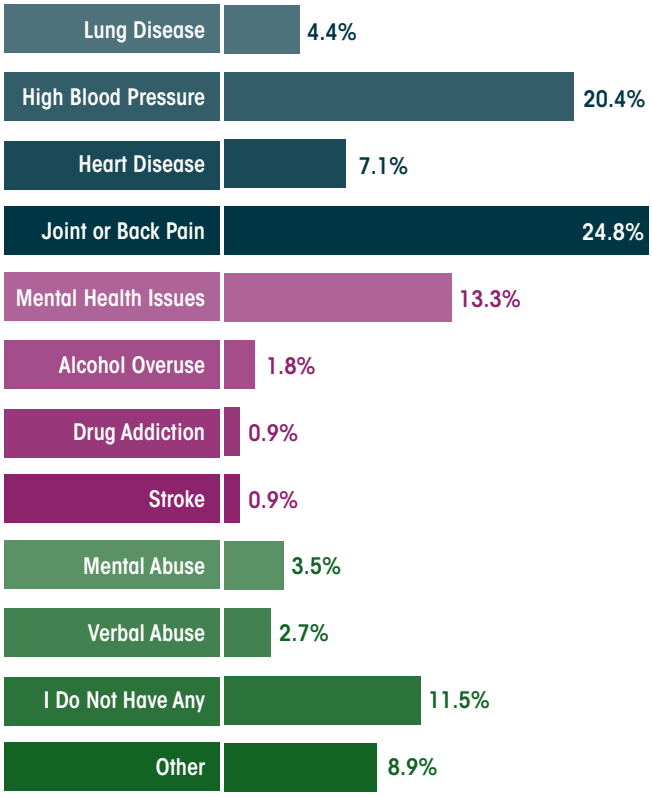
Respondents' evaluation of concerns they have with specific issues in their community. Drug use and obesity are the respondents' greatest concerns.

How would you rate your level of concern on the following issues?



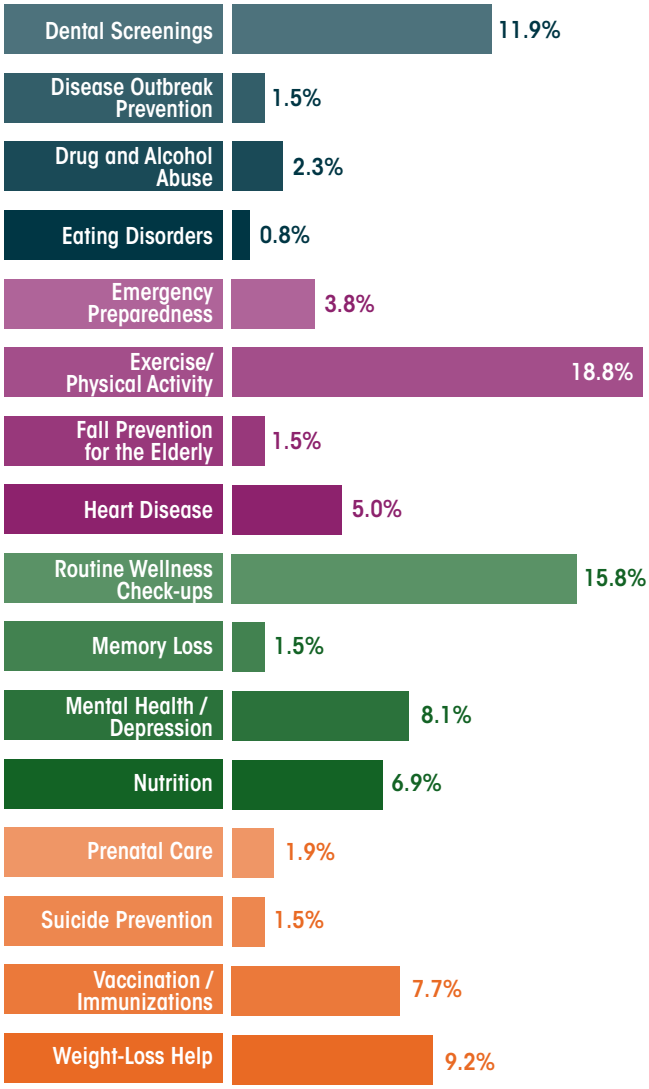
Respondents chose up to 5 Health Challenges they face. Joint or back pain, high blood pressure, and mental health were the three challenges chosen the most.

What health challenges do you face?



Respondents chose up to 5 Health screenings or services they felt would improve their health or the health of their family. Exercise/ physical activity, routine wellness checks, and dental screenings received the most responses.

What types of health screenings or services do you need to stay healthy?



Richland County Health and Human Services collects data annually and posts a public report. In carrying out the mission of the agency, all staff and programs shall:

- Treat others fairly and with respect in a friendly, courteous, responsive and confidential manner.
- Demonstrate integrity and commitment in all actions.
- Create an environment of hope and positive expectation.
- Recognize and respect the uniqueness of individuals and families and foster collaborative decision-making.
- Value diversity.
- Provide individualized services in the least intrusive and least restrictive manner possible.
- Promote collaboration within the agency and with community partners.
- Provide quality services through continuous improvement and outcome measurement.
- Manage public resources responsibly.

RICHLAND COUNTY HHS CLINICAL SERVICES UNIT

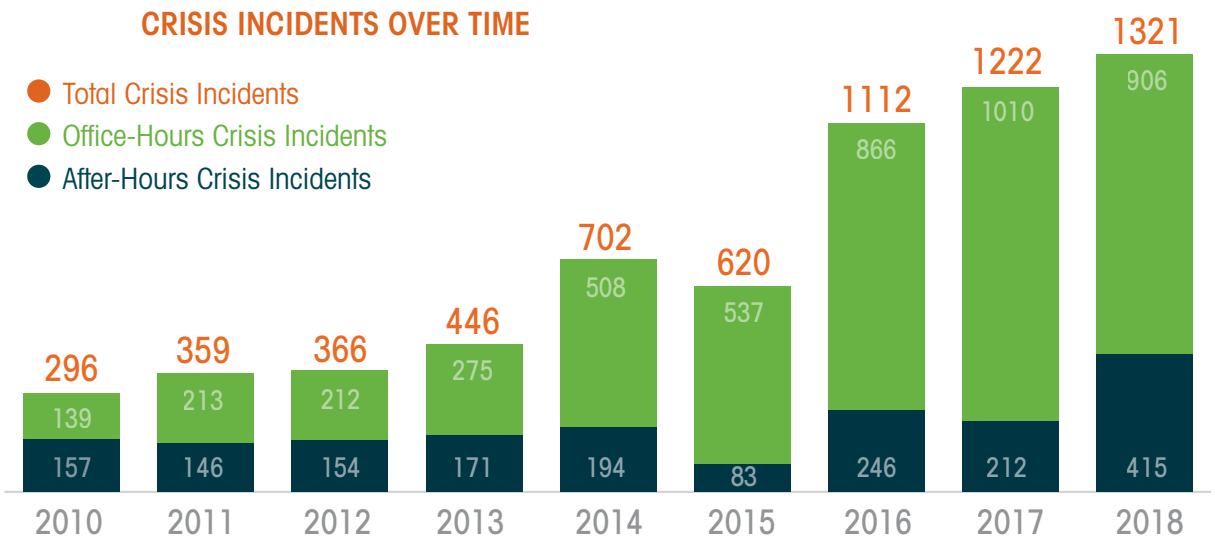
Clinical Services provides a continuum of behavioral health services to Richland County residents that range from brief crisis intervention to intensive long-term treatment services. Clinical Services helps individuals and families who are experiencing acute emotional crises, addiction, short-term mental health issues, or persistent mental illnesses and substance use disorders. In 2018, Clinical Services staff assisted 454 individuals in one or more of its programs.

RICHLAND COUNTY HHS CRISIS INTERVENTION SERVICES

Every county in Wisconsin is required to provide emergency mental health and substance abuse services. The types of services that may be provided include:

- Evaluation, crisis counseling and mental health care to persons experiencing emotional distress, suicidal ideation or mental health crisis.
- Response to outpatient emergencies related to substance abuse, including the provision for examination and evaluation of a person's need for detox.
- Arranging for emergency hospitalization and detox when appropriate.

The types of responses to a crisis situation may be conducted by the 24-hour emergency telephone system, walk-in emergency services during business hours, or by mobile response to the crisis location when needed.

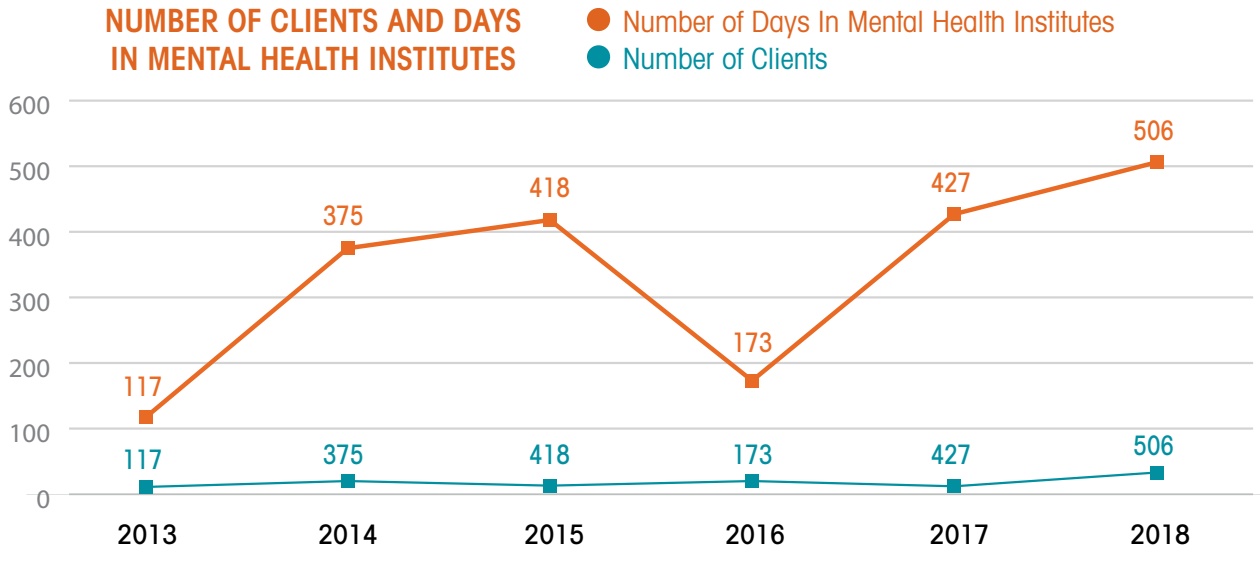


RICHLAND COUNTY HHS INPATIENT PSYCHIATRIC AND INSTITUTIONAL SERVICES

Clinical Services facilitates voluntary and involuntary hospitalization for individuals who need this inpatient psychiatric service. Involuntary hospitalizations (sometimes called emergency detentions) occur when a person is determined to present a substantial risk of harm to him- or herself to others, due to a suspected mental illness. The person is detained by law enforcement or the court and placed at a psychiatric facility in order to be evaluated. If the person is determined to pose an ongoing risk to him- or herself or to others, a civil commitment process may be pursued to assure that the person gets necessary treatment.

RICHLAND COUNTY HHS MENTAL HEALTH INSTITUTIONAL PLACEMENTS

For long-term care and treatment needs in 2018, Richland County placed individuals at the Winnebago Mental Health Institute or Mendota Mental Health Institute for geriatric or forensic patients. This facility was used as a last-resort placement when an acute psychiatric unit was not available for short-term emergency hospitalization. The chart below shows the total number of days of institutional care funded annually by Richland County.

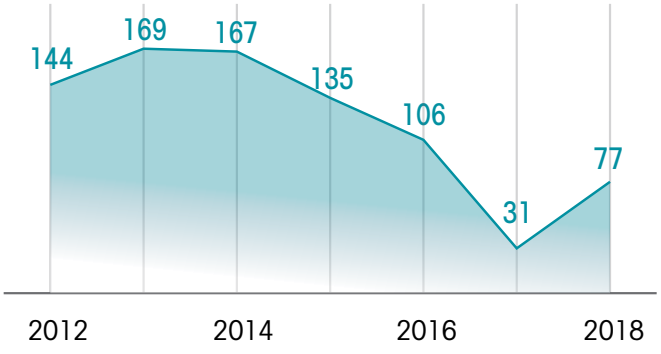


RICHLAND COUNTY HHS SUBSTANCE ABUSE TREATMENT SERVICES

Substance abuse counseling is a specialized treatment focused on assisting individuals to stop or minimize the negative effects of addiction on their lives. In 2018, the Clinical Services substance abuse counselor provided assessment, referral, and treatment to 77 adults and teens struggling with substance use disorders. In addition to individual outpatient counseling, group programs were also provided, utilizing the evidence-based curriculum called PRIME for Life. Research conducted on these programs demonstrated effectiveness in helping participants reduce or eliminate high-risk substance use.

The number of individuals who received substance abuse assessment and outpatient treatment services was on the decline, but, recently, is beginning to increase.

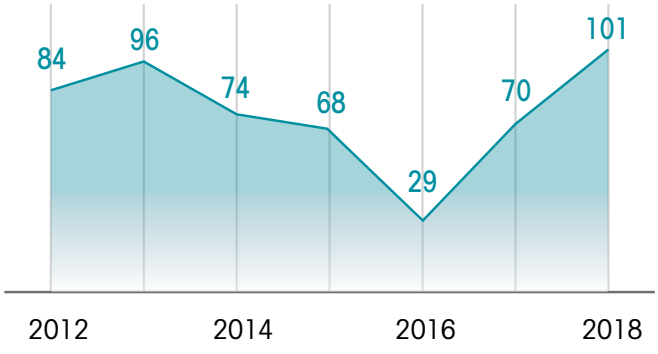
NUMBER OF ADULTS AND TEENS WHO RECEIVED CLINICAL SUBSTANCE ABUSE COUNSELING



RICHLAND COUNTY HHS INTOXICATED DRIVERS PROGRAM

Alcohol and other drug abuse is a significant health and public safety problem. Each year in Wisconsin, there are over 800 documented deaths, 10,000 traffic crashes, resulting in 8,000 injuries, and over 90,000 arrests, all attributable to alcohol and other drugs. Impaired drivers present a danger to themselves and the community. In addition to fines and criminal penalties, when an individual is convicted of operating a motor vehicle while intoxicated, state law mandates that he or she be ordered to complete an Intoxicated Drivers Program (IDP) Assessment. The IDP assessor conducts a specific type of assessment for this program and, based on the results, the offender is referred to the appropriate education or treatment program.

NUMBER OF INDIVIDUALS ORDERED TO PARTICIPATE IN INTOXICATED DRIVERS PROGRAM (IDP)



Key Stakeholder Focus Groups

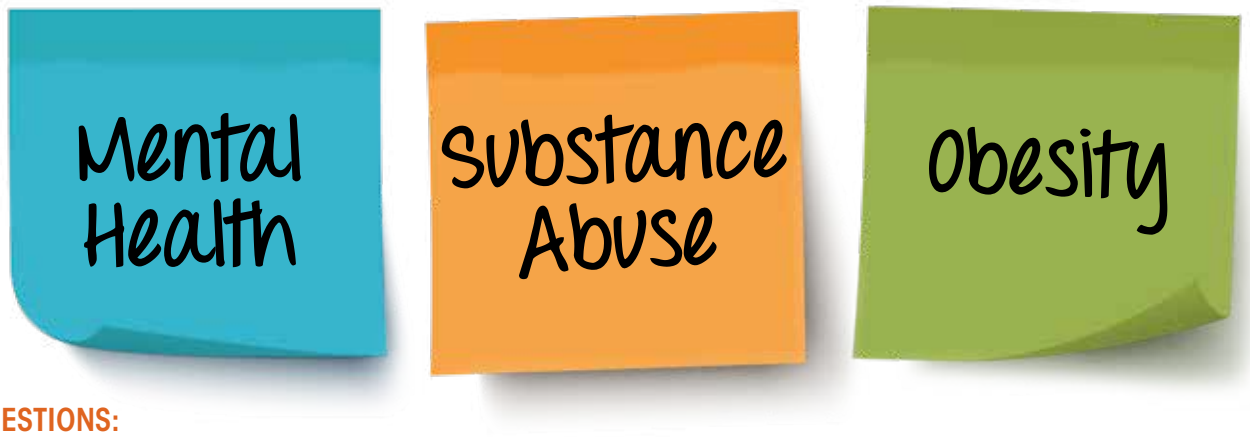
The 2019 Health Assessment and Wellness Commission (HAWC) hosted a dually focused event. The group wanted to celebrate the work previously done to address the priorities identified identified in the 2016 CHNA, as well as gather ideas from key stakeholders on how to address the 2019 priorities.

This Community Health Needs Assessment Focus Group event was held at Richland Center High School, September, 16, 2019. Key informants, who had participated in the 2016 CHNA process, were invited via personal emails. Ads ran in Richland Center, Muscoda, Boscobel, and Spring Green newspapers the weeks of September 2nd and September 9th, 2019, inviting up to 30 interested community members to attend and participate in the event. (Appendix N)

At the event, attendees networked and enjoyed a healthy meal. Jo Anne Preston from Rural WI Health Cooperative highlighted the important work that has been done addressing the priorities identified in the 2016 Community Health Needs Assessment. In addition, she discussed the importance of staying the course to make lasting changes in Substance Abuse, Mental Health and Obesity.

Prior to the event, HAWC determined the areas of focus in which attendees would participate. These areas were chosen based on the key stakeholders' collective knowledge of the community and secondary- and primary-data analysis.

Three focus groups were held simultaneously. Each focus group facilitator used the same three questions. Notetakers captured attendees' thoughts on large, wall-mounted sticky notes. (Appendixes O and P)



QUESTIONS:

1. Over the past 3 years, within this community area, what are the areas of strength and success you have seen?

A. Mental Health Focus Group respondents listed the addition and enhancement of services available in the county including: Senior Life Solutions, NAMI and the focus on mental health at Ithaca and Richland School Districts.

B. Substance Abuse Focus Group respondents recognized an increased level of awareness about substance abuse in the community that has led to the development of coalitions and campaigns like "Parents Who Host, Lose the Most." They talked about the importance of the Richland School Board's decision to participate in the Youth Risk Behavior Survey again.

C. Obesity Focus Group respondents noted important work being done, from community gardens to the availability of the Supplemental Nutrition Assistance Program (SNAP) at the local Farmers Market, as well as the partnership between Richland FIT and G.R.A.C.E. Stakeholders felt important work is being done to ensure there are healthy food options available to individuals and to those attending public events. Community events and activities like Richland Rocks have amplified opportunities to be active.

2. Are there areas that need additional support to be successful?

A. Mental Health Focus Group participants talked about the ongoing need for more mental health providers and more training for those working with those who live with mental health problems. They identified a need for reducing the stigma associated with mental illness that would make seeking help easier and the need for anti-bullying policies to be created and/or policed at local schools.

B. Substance Abuse Focus Group participants voiced the need for continued education, improved support for those trying to get sober, and greater government support from a position of understanding how substance abuse begins. The group said that while state government has earmarked more funds for substance abuse treatment and prevention, for many years there has been little movement to raise the alcohol tax. Since alcohol is a gateway drug proven to lead to future substance abuse, attendees wondered if an increased sales tax could be used for treatment and prevention? They believe more needs to be done to support bringing a Sober House to our community.

C. Obesity Focus Group participants believe that providing simple tools such as, giving overweight value and improving the mindset surrounding exercise could help people with obesity. They pointed out the opportunity for hosts of food stands to influence obesity by making healthy choices available. Improved bike trails and creating Safe Routes to School also needs more support.

3. Are there new initiatives that we should be considering?

A. Mental Health Focus Group participants stressed the need for continued community work on issues regarding mental health. Churches, schools, and healthcare providers were encouraged to seek creative and innovative ways to work together to make mental health programs available to anyone, regardless of insurance or ability to pay. Examples included: "Drop In" centers for parents and kids, a Boys and Girls Club, and educating kids and the general public on coping skills.

B. Substance Abuse Focus Group attendees spotlighted work to be done with the Healthy Communities Grant, including potential screenings and the upcoming Sources of Strength program taking place at Ithaca and Richland School Districts. Additionally, the group discussed how much more cost-effective prevention is than treatment, and the important work that still needs to be done.

C. The Obesity Focus Group members highlighted opportunities like reinvigorating Food for Life, expanding community gardens, connecting CSA to the Food Pantry, and creating a culture where food is medicine.

Conclusion

In Richland County, the process of comprehensively assessing the community's health needs was led by a diverse group of community stakeholders from the sectors of healthcare, public health, Extension, and education. This Health Assessment and Wellness Commission (H.A.W.C.) was established in 2016 and came together again in 2019 to revisit the priorities established in the 2016 CHNA and to look for changes in community needs. This 2019 CHNA report includes their review of multiple sources of secondary data, whereby the broad trends in community health were assessed for the region. Additionally, they created an online survey to seek input from the general community. To gain in-depth knowledge from community leaders and residents, they hosted community focus groups on the priorities identified: Mental Health, Substance Abuse, and Obesity. Each of these assessment strategies added value to the 2019 CHNA process and pointed to the continued prioritization of Mental Health Treatment, Substance Abuse Prevention & Treatment, and Obesity Prevention & Treatment for the 2019 CHNA.

- Review of multiple sources of secondary data revealed that these priorities continue to be concerns for Richland County. County Health Rankings & Roadmaps 2019 (Appendix F) indicated the continued prevalence of adult obesity (33% of population) and adult excessive drinking (24% of population). Richland County Health and Human Services data showed an annual increase in the number of crisis services they provided for mental health over the past several years. Wisconsin Department of Justice noted the number of drug arrests for possession or sale of illegal substances continued to increase annually.
- Results of the online survey indicated that top health concerns of respondents include concern over illegal drug use (67%) and obesity (42%), and that a majority (50%+) believe their access to mental health care is poor or fair.
- Participants in the focus groups shared multiple suggestions about new strategies that could be implemented in each area to continue to improve outcomes. This shows sustained community interest and willingness to work on the priorities of Mental Health Treatment, Substance Abuse Prevention & Treatment, and Obesity Prevention & Treatment.

With those priorities having been first identified in the 2016 CHNA, multiple organizations made CHIPs to improve outcomes in those areas. Reflecting on community progress showed a notable increase in the diversity of programs and community responses in all three prioritized areas. Prioritization helps multiple sectors focus their energies on addressing different facets of the concern to improve outcomes.

The conclusion of the H.A.W.C. is that continuing to support community coalitions in their work on Mental Health Treatment, Substance Abuse Prevention & Treatment, and Obesity Prevention & Treatment is the best way to make progress in Richland County. With these needs reaffirmed by the 2019 CHNA assessment process, the H.A.W.C members feel that continuing to support coalitions as they implement grassroots and evidence-based responses, while providing shared metrics for success, is how Richland County will see continued progress in these areas.

Inpatient Market Share for Richland County

10/3/2019

Market Share

Page 1 of 2

INTELLIMED Market Share Profile System

WI State Limited: Q08A-Q19A

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:24

Facility	Volume			% of Facility Total			Percentage of Report Total			
	Cases	Days	Charges	Cases	Days	Charges	Cases	Cum.	Days	Charges
The Richland Hospital Inc	748	2,570	12,592,478	100.00%	100.00%	100.00%	41.83%	41.83%	27.94%	19.18%
Uw Hospital and Clinics	345	1,960	26,621,411	100.00%	100.00%	100.00%	19.30%	61.13%	21.31%	40.56%
Gundersen Health System	144	596	4,557,036	100.00%	100.00%	100.00%	8.05%	69.18%	6.48%	6.94%
Meriter Hospital	141	738	6,626,124	100.00%	100.00%	100.00%	7.89%	77.07%	8.02%	10.09%
Sauk Prairie Memorial Hospital	79	154	1,616,991	100.00%	100.00%	100.00%	4.42%	81.49%	1.67%	2.46%
Vernon Memorial Healthcare	79	208	1,502,451	100.00%	100.00%	100.00%	4.42%	85.91%	2.26%	2.29%
St Mary`s Hospital	77	465	4,576,397	100.00%	100.00%	100.00%	4.31%	90.21%	5.06%	6.97%
Reedsburg Area Medical Center	38	98	457,567	100.00%	100.00%	100.00%	2.13%	92.34%	1.07%	0.70%
Winnebago Mental Health Institute	30	423	485,134	100.00%	100.00%	100.00%	1.68%	94.02%	4.60%	0.74%
Upland Hills Health Inc	18	40	156,430	100.00%	100.00%	100.00%	1.01%	95.02%	0.43%	0.24%
Uw Health Rehabilitation Hospital	17	204	737,127	100.00%	100.00%	100.00%	0.95%	95.97%	2.22%	1.12%
Southwest Health Center	14	156	379,114	100.00%	100.00%	100.00%	0.78%	96.76%	1.70%	0.58%
Gundersen St Joseph`s Hospital and Clinics	11	31	171,928	100.00%	100.00%	100.00%	0.62%	97.37%	0.34%	0.26%
Mayo Clinic Health System - Franciscan Healthcare in La Crosse	8	43	243,631	100.00%	100.00%	100.00%	0.45%	97.82%	0.47%	0.37%
Rogers Memorial Hospital Inc	8	60	188,505	100.00%	100.00%	100.00%	0.45%	98.27%	0.65%	0.29%
Select Specialty Hospital - Madison	5	155	605,331	100.00%	100.00%	100.00%	0.28%	98.55%	1.69%	0.92%
Beloit Health System	3	8	101,624	100.00%	100.00%	100.00%	0.17%	98.71%	0.09%	0.15%
Mendota Mental Health Institute	3	1,201	3,499,551	100.00%	100.00%	100.00%	0.17%	98.88%	13.06%	5.33%
Gundersen Boscobel Area Hospital and Clinics	2	3	19,908	100.00%	100.00%	100.00%	0.11%	98.99%	0.03%	0.03%
Mayo Clinic Health System in Eau Claire	2	9	51,029	100.00%	100.00%	100.00%	0.11%	99.11%	0.10%	0.08%
Mercy Hospital and Trauma Center	2	7	71,658	100.00%	100.00%	100.00%	0.11%	99.22%	0.08%	0.11%
Aspirus Wausau Hospital	1	1	6,769	100.00%	100.00%	100.00%	0.06%	99.27%	0.01%	0.01%
Aurora Medical Center in Kenosha	1	2	10,782	100.00%	100.00%	100.00%	0.06%	99.33%	0.02%	0.02%
Aurora Psychiatric Hospital	1	4	15,303	100.00%	100.00%	100.00%	0.06%	99.38%	0.04%	0.02%
Aurora St Luke`s Medical Center	1	4	45,513	100.00%	100.00%	100.00%	0.06%	99.44%	0.04%	0.07%
HSHS - Sacred Heart Hospital	1	3	4,650	100.00%	100.00%	100.00%	0.06%	99.50%	0.03%	0.01%
Memorial Medical Center	1	2	33,900	100.00%	100.00%	100.00%	0.06%	99.55%	0.02%	0.05%
Milwaukee County Behavioral Health Complex	1	9	17,514	100.00%	100.00%	100.00%	0.06%	99.61%	0.10%	0.03%
Ministry Saint Clare`s Hospital	1	4	13,454	100.00%	100.00%	100.00%	0.06%	99.66%	0.04%	0.02%

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Inpatient Market Share for Richland County

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WI State Limited: Q08A-Q19A

Market Share
INTELLIMED Market Share Profile System

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:24

Facility	Volume			% of Facility Total			Percentage of Report Total			
	Cases	Days	Charges	Cases	Days	Charges	Cases	Cum.	Days	Charges
Ministry Saint Joseph`s Hospital	1	2	70,551	100.00%	100.00%	100.00%	0.06%	99.72%	0.02%	0.11%
Ministry Saint Michael`s Hospital	1	4	21,832	100.00%	100.00%	100.00%	0.06%	99.78%	0.04%	0.03%
Rehabilitation Hospital of Wisconsin	1	21	59,571	100.00%	100.00%	100.00%	0.06%	99.83%	0.23%	0.09%
Rogers Memorial Hospital - Milwaukee	1	6	18,593	100.00%	100.00%	100.00%	0.06%	99.89%	0.07%	0.03%
St Clare Hospital and Health Services	1	4	32,623	100.00%	100.00%	100.00%	0.06%	99.94%	0.04%	0.05%
Uw Health Partners Watertown Regional Medical Center	1	2	25,374	100.00%	100.00%	100.00%	0.06%	100.00%	0.02%	0.04%
Report Total	**1,788**	**9,197**	**65,637,854**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**

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Outpatient Market Share for Richland County

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Ambulatory Market Share
INTELLIMED Market Share Profile System

WI State Limited: Q08A-Q19A

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:30

Facility	Volume		Percentage of Hospital Total		Percentage of Report Total		
	Visits	Charges	Visits	Charges	Visits	Cum. Visits	Charges
The Richland Hospital Inc	937	7,599,789	100.00%	100.00%	37.45%	37.45%	28.03%
Uw Hospital and Clinics	299	4,400,873	100.00%	100.00%	11.95%	49.40%	16.23%
Gundersen Health System	255	3,724,284	100.00%	100.00%	10.19%	59.59%	13.74%
Meriter Hospital	155	4,178,914	100.00%	100.00%	6.20%	65.79%	15.42%
Sauk Prairie Memorial Hospital	104	995,531	100.00%	100.00%	4.16%	69.94%	3.67%
Madison Surgery Center Inc	99	543,965	100.00%	100.00%	3.96%	73.90%	2.01%
Vernon Memorial Healthcare	97	729,662	100.00%	100.00%	3.88%	77.78%	2.69%
Pain Centers of Wisconsin - Sauk Prairie	96	577,816	100.00%	100.00%	3.84%	81.61%	2.13%
Surgicenter of Greater Madison	93	682,358	100.00%	100.00%	3.72%	85.33%	2.52%
Reedsburg Area Medical Center	72	590,476	100.00%	100.00%	2.88%	88.21%	2.18%
Surgery and Care Center	48	414,296	100.00%	100.00%	1.92%	90.13%	1.53%
St Mary`s Hospital	47	1,000,014	100.00%	100.00%	1.88%	92.01%	3.69%
Novamed Surgery Center of Madison Llp	43	248,742	100.00%	100.00%	1.72%	93.73%	0.92%
Davis Duehr Surgery Center	33	291,579	100.00%	100.00%	1.32%	95.04%	1.08%
Upland Hills Health Inc	22	180,016	100.00%	100.00%	0.88%	95.92%	0.66%
Gundersen St Joseph`s Hospital and Clinics	18	254,678	100.00%	100.00%	0.72%	96.64%	0.94%
St Clare Hospital and Health Services	17	107,139	100.00%	100.00%	0.68%	97.32%	0.40%
Mayo Clinic Health System - Franciscan Healthcare in La Crosse	16	176,244	100.00%	100.00%	0.64%	97.96%	0.65%
Uw Health Transformation Surgery Center LLC	15	102,172	100.00%	100.00%	0.60%	98.56%	0.38%
Mile Bluff Medical Center	6	40,842	100.00%	100.00%	0.24%	98.80%	0.15%
Pain Centers of Wisconsin - Fort Atkinson	5	25,129	100.00%	100.00%	0.20%	99.00%	0.09%
Waukesha Memorial Hospital	3	38,156	100.00%	100.00%	0.12%	99.12%	0.14%
Gundersen Boscobel Area Hospital and Clinics	2	14,397	100.00%	100.00%	0.08%	99.20%	0.05%
Prohealth Care Moreland Surgery Center	2	5,946	100.00%	100.00%	0.08%	99.28%	0.02%
Tomah Memorial Hospital	2	14,937	100.00%	100.00%	0.08%	99.36%	0.06%
Aurora St Luke`s Medical Center	1	9,218	100.00%	100.00%	0.04%	99.40%	0.03%

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Outpatient Market Share for Richland County

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Ambulatory Market Share

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INTELLIMED Market Share Profile System

WI State Limited: Q08A-Q19A

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:30

Facility	Volume		Percentage of Hospital Total		Percentage of Report Total		
	Visits	Charges	Visits	Charges	Visits	Cum. Visits	Charges
Children`s Hospital of Wisconsin	1	7,161	100.00%	100.00%	0.04%	99.44%	0.03%
Columbia St Mary`s Inc - Ozaukee Campus	1	5,885	100.00%	100.00%	0.04%	99.48%	0.02%
Grant Regional Health Center	1	3,679	100.00%	100.00%	0.04%	99.52%	0.01%
Marshfield Clinic - Wausau Center Asc	1	2,672	100.00%	100.00%	0.04%	99.56%	0.01%
Mayo Clinic Health System - Franciscan Healthcare in Sparta	1	8,790	100.00%	100.00%	0.04%	99.60%	0.03%
Mercy Medical Center	1	6,645	100.00%	100.00%	0.04%	99.64%	0.02%
Midwest Orthopedic Specialty Hospital	1	11,059	100.00%	100.00%	0.04%	99.68%	0.04%
Ministry Saint Clare`s Hospital	1	9,548	100.00%	100.00%	0.04%	99.72%	0.04%
Monroe Clinic	1	40,217	100.00%	100.00%	0.04%	99.76%	0.15%
Orthopaedic Hospital of Wisconsin	1	28,336	100.00%	100.00%	0.04%	99.80%	0.10%
Pain Centers of Wisconsin - Beaver Dam	1	4,940	100.00%	100.00%	0.04%	99.84%	0.02%
Prairie Du Chien Memorial Hospital	1	9,469	100.00%	100.00%	0.04%	99.88%	0.03%
Southwest Health Center	1	9,480	100.00%	100.00%	0.04%	99.92%	0.03%
Stoughton Hospital Association	1	8,862	100.00%	100.00%	0.04%	99.96%	0.03%
Wild Rose Community Memorial Hospital	1	4,329	100.00%	100.00%	0.04%	100.00%	0.02%
Report Total	**2,502**	**27,108,245**	**100.00%**	**100.00%**	**100.00%**	**100.00%**	**100.00%**

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Intellimed Emergency Market Area Analysis for The Richland Hospital, Inc.

Ed Market Share for Richland County

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ED Data Market Share
INTELLIMED ED Module
WI State Limited: Q08A-Q19A

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:54

Facility	Volume		Percentage of Total	
	Visits	Charge	Visits	Charge
The Richland Hospital Inc	3,942	12,007,877	71.54%	65.99%
Vernon Memorial Healthcare	439	1,508,949	7.97%	8.29%
Uw Hospital and Clinics	203	1,288,842	3.68%	7.08%
Reedsburg Area Medical Center	194	678,373	3.52%	3.73%
Sauk Prairie Memorial Hospital	190	620,033	3.45%	3.41%
Upland Hills Health Inc	108	405,575	1.96%	2.23%
Gundersen St Joseph`s Hospital and Clinics	85	287,153	1.54%	1.58%
Gundersen Health System	65	282,449	1.18%	1.55%
Gundersen Boscobel Area Hospital and Clinics	57	123,678	1.03%	0.68%
St Mary`s Hospital	49	290,008	0.89%	1.59%
Meriter Hospital	43	231,510	0.78%	1.27%
St Clare Hospital and Health Services	28	96,318	0.51%	0.53%
Mayo Clinic Health System - Franciscan Healthcare in La Crosse	13	21,568	0.24%	0.12%
Mile Bluff Medical Center	9	21,181	0.16%	0.12%
Moundview Memorial Hospital and Clinics Inc	7	32,115	0.13%	0.18%
Divine Savior Healthcare	6	15,441	0.11%	0.08%
Southwest Health Center	6	6,360	0.11%	0.03%
Mayo Clinic Health System - Franciscan Healthcare in Sparta	5	5,014	0.09%	0.03%
Monroe Clinic	5	73,500	0.09%	0.40%
Tomah Memorial Hospital	5	14,137	0.09%	0.08%
Black River Memorial Hospital	4	16,007	0.07%	0.09%
Mercy Hospital and Trauma Center	4	58,746	0.07%	0.32%
Prairie Du Chien Memorial Hospital	4	4,476	0.07%	0.02%
Fort Healthcare	3	8,530	0.05%	0.05%
Ministry Sacred Heart Hospital	3	19,663	0.05%	0.11%
Baldwin Area Medical Center	2	7,073	0.04%	0.04%
Beaver Dam Community Hospitals Inc	2	6,136	0.04%	0.03%
Berlin Memorial Hospital	2	1,716	0.04%	0.01%
Flambeau Hospital	2	6,775	0.04%	0.04%
Grant Regional Health Center	2	1,165	0.04%	0.01%
Memorial Medical Center	2	2,023	0.04%	0.01%
Ministry Saint Joseph`s Hospital	2	8,109	0.04%	0.04%
Agnesian Healthcare/St Agnes Hospital	1	1,493	0.02%	0.01%

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Intellimed Emergency Market Area Analysis for The Richland Hospital, Inc.

Ed Market Share for Richland County

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ED Data Market Share
INTELLIMED ED Module
WI State Limited: Q08A-Q19A

Period: 2019 1st Quarter, 2018 4th Quarter, 2018 3rd Quarter, 2018 2nd Quarter; (County):Richland County, WI Elapsed: 00:00:54

Facility	Volume		Percentage of Total	
	Visits	Charge	Visits	Charge
Aurora Baycare Medical Center in Green Bay	1	788	0.02%	0.00%
Aurora Medical Center in Kenosha	1	618	0.02%	0.00%
Aurora Medical Center in Oshkosh	1	1,126	0.02%	0.01%
Froedtert Memorial Lutheran Hospital Inc	1	1,477	0.02%	0.01%
Lakeview Medical Center	1	661	0.02%	0.00%
Mayo Clinic Health System - Northland in Barron	1	814	0.02%	0.00%
Mercy Medical Center	1	171	0.02%	0.00%
Milwaukee County Behavioral Health Complex	1	689	0.02%	0.00%
Ministry Door County Medical Center	1	1,100	0.02%	0.01%
Ministry Eagle River Memorial Hospital	1	3,206	0.02%	0.02%
Ministry Health Care`s Howard Young Medical Center	1	2,414	0.02%	0.01%
Ministry Saint Clare`s Hospital	1	9,548	0.02%	0.05%
Ripon Medical Center Inc	1	5,598	0.02%	0.03%
Riverside Medical Center	1	2,433	0.02%	0.01%
St Croix Regional Medical Center	1	2,071	0.02%	0.01%
Uw Health Partners Watertown Regional Medical Center	1	8,022	0.02%	0.04%
Wheaton Franciscan - Elmbrook Memorial Campus	1	834	0.02%	0.00%
Wheaton Franciscan Healthcare - Franklin	1	3,085	0.02%	0.02%
Report Total	5,510	18,196,648	100.00%	100.00%

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ESRI Demographic Snapshot 10/22/2019

INTELLIMED Demographic Profile System Page 1 of 1

(County):Richland County, WI WI State Limited

	Area	USA
2019 Total Population	16,056	332,417,848
2024 Total Population	15,879	345,487,589
% Change 2019 - 2024	-1.1%	3.9%
2019 Average Household Income	$62,245	$87,124
2024 Average Household Income	$70,723	$99,360
2019 Per Capita Household Income	$25,680	$33,010

	2019	2024	% Change
Total Male Population	8,067	8,005	-0.8%
Total Female Population	7,989	7,874	-1.4%
Female Child Bearing Age (15 - 44)	2,549	2,478	-2.8%
Male Median Age	42.0	44.4	5.7%
Female Median Age	46.2	45.4	-1.6%

	Age Distribution					USA
Age Group	2019	% of Total	2024	% of Total	% Change	% Change
Age 0-4	965	6.01%	944	5.9%	-2.2%	4.1%
Age 5-9	1,008	6.28%	977	6.2%	-3.1%	1.3%
Age 10-14	991	6.17%	1,029	6.5%	3.8%	1.9%
Age 15-19	931	5.80%	995	6.3%	6.9%	3.0%
Age 20-24	807	5.03%	708	4.5%	-12.3%	-2.7%
Age 25-29	949	5.91%	729	4.6%	-23.2%	-6.5%
Age 30-34	884	5.51%	945	6.0%	6.9%	9.7%
Age 35-39	893	5.56%	871	5.5%	-2.5%	6.7%
Age 40-44	831	5.18%	911	5.7%	9.6%	11.6%
Age 45-49	913	5.69%	837	5.3%	-8.3%	-3.0%
Age 50-54	969	6.04%	895	5.6%	-7.6%	-1.6%
Age 55-59	1,220	7.60%	977	6.2%	-19.9%	-8.1%
Age 60-64	1,254	7.81%	1,171	7.4%	-6.6%	4.0%
Age 65-69	1,115	6.94%	1,167	7.3%	4.7%	11.2%
Age 70-74	809	5.04%	1,000	6.3%	23.6%	16.3%
Age 75-79	558	3.48%	724	4.6%	29.7%	30.2%
Age 80-84	428	2.67%	464	2.9%	8.4%	23.2%
Age 85+	531	3.31%	535	3.4%	0.8%	6.6%
Total	**16,056**	**100.00%**	**15,879**	**100.0%**	**-1.1%**	**3.9%**

	Race / Ethnicity Distribution				
Race / Ethnicity	2019	% of Total	2024	% of Total	% Change
American Indian/Alaska Nativ	70	0.4%	85	0.5%	21.4%
Asian	124	0.8%	153	1.0%	23.4%
Black/African American	148	0.9%	186	1.2%	25.7%
Other Race	126	0.8%	144	0.9%	14.3%
Pacific Islander	3	0.0%	3	0.0%	0.0%
Population of 2 or More Races	206	1.3%	256	1.6%	24.3%
White	15,379	95.8%	15,052	94.8%	-2.1%
Total	**16,056**	**100.0%**	**15,879**	**100.0%**	**-1.1%**
Hispanic	362	2.3%	405	2.6%	11.9%

	# of Households				
Household Income	2019	% of Total	2024	% of Total	% Change
< $15,000	817	12.4%	717	10.9%	-12.2%
$15,000 - $24,999	610	9.2%	526	8.0%	-13.8%
$25,000 - $34,999	791	12.0%	691	10.5%	-12.6%
$35,000 - $49,999	1,078	16.3%	987	15.1%	-8.4%
$50,000 - $99,999	2,284	34.5%	2,326	35.5%	1.8%
Over $100,000	1,032	15.6%	1,310	20.0%	26.9%
Total	**6,612**	**100.0%**	**6,557**	**100.0%**	**-0.8%**

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Appendix E

Richland County Health and Human Services Community Health Improvement Plan, 2016 – 2021. Additional assets identified during community led asset mapping meeting in October of 2017.

INDIVIDUALS

Larry Engel
Jay Mueller
Sheila Troxel
Chuck Miller
Jose & Jenny Marroquin
Paul Corcoran
Janis Peterson
Ron Fruit
Sharon Schmitz
Mike Breininger
Dwayne Fisher
Victim witness coordinator
Dawn Kiefer
Mick Cosgrove
Henk Newenhouse
Andy Wright
Pedro Gomez
Ronaldo & Claudia Merlos
Robin Cosgrove
Andrea Fields
Marty Clearfield
Dale Bender
Spanish interpreters

INFORMAL NETWORKS

Southwest Partners
Multi-Cultural Center
Richland County Children & Family Advocacy Council
Youth Rec Sports Leagues
Richland FIT Family Fun Nights
Freedom from Smoking classes
Community Players
Youth and Family Recreation Center, Family Crossroads
Rotary
Lions
Knights of Columbus
Kiwanis
G.R.A.C.E
Richland Parks Summer program
Youth groups
St. Vincents
Crimestoppers
Drug Take-Back Day
Gap Fit-n-Fun
PATT, PTSA
Salvation Army

INSTITUTIONAL ORGANIZATIONS

Richland Hospital
Our House
Harvest Guest Home
Pine Valley Community Village
Schmitt Woodland Hills
Senior Life Solutions
Harmony House
Passages- domestic violence agency
Ada James
Law Enforcement
Veteran's Services
State Mental Health Institute- Winnebago and Mendota
Tellurian
Commission on Aging
VARC, ADRC, Richland Center Taxi (Transportation Services)
Sobriety Court
Recidivism
WRCO
Nova Video
Paquette Center
Youth and Family Initiative
RC Health and Human Services
Richland Medical Center
Physicians willing to use MAT for addiction treatment
Thrifty White, Family Prescription, Walmart (Pharmacies)
Fire Department and Emergency Medical Services
Journey Mental Health
Rogers Memorial Hospital
Child Protection Services
Free Clinic
Symons
Home Health United Grief Counseling
UW-Extension
Senior Center
ARCW, Lifepoint
Pharmacy Needle Exchange
Kinship
Agrace Hospice and Palliative Care
County and City governments
Hillsboro, Richland, Ithaca, Riverdale, Kickapoo, Weston (Schools)
Great Rivers 211
Trempealeau Inst. Mental Disease
Lutheran Social Services
Churches
Richland County Ministerial Association
SWCAP
SW Tech
UW-Richland
Ricky Bishop- Independent Living Resource
Joshua's House
Parole and Probation Officers
Small Business Center
Private Counselors
United Givers

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

Richland (RI)
2016 Rankings

County Demographics

	County	State
Population	17,662	5,757,564
% below 18 years of age	22.3%	22.6%
% 65 and older	19.5%	15.2%
% Non-Hispanic African American	0.6%	6.3%
% American Indian and Alaskan Native	0.4%	1.1%
% Asian	0.6%	2.6%
% Native Hawaiian/Other Pacific Islander	0.0%	0.0%
% Hispanic	2.4%	6.5%
% Non-Hispanic white	95.2%	82.2%
% not proficient in English	1%	2%
% Females	49.7%	50.3%
% Rural	72.1%	29.8%
Male population 0-17 *	2,097	664,657
Male population 18-44 *	2,670	1,004,757
Male population 45-64 *	2,666	794,628
Male population 65+ *	1,551	390,698
Total male population *	8,984	2,854,740
Female population 0-17 *	1,994	636,188
Female population 18-44 *	2,439	973,698
Female population 45-64 *	2,607	799,615
Female population 65+ *	1,858	483,717
Total female population *	8,898	2,893,218
Population growth *	-1%	1%

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Health Outcomes					10
Length of Life					18
Premature death	5,200	4,000-6,500	5,200	6,000	
Quality of Life					10
Poor or fair health **	14%	13-14%	12%	15%	
Poor physical health days **	3.4	3.2-3.6	2.9	3.7	
Poor mental health days **	3.5	3.3-3.7	2.8	3.7	
Low birthweight	5%	4-6%	6%	7%	
Additional Health Outcomes (not included in overall ranking)					
Premature age-adjusted mortality	280	240-320	270	300	
Child mortality			40	50	
Infant mortality			5	6	
Frequent physical distress	10%	10-11%	9%	11%	
Frequent mental distress	11%	10-11%	9%	11%	
Diabetes prevalence	10%	10-11%	9%	9%	
HIV prevalence	34		41	113	
Communicable disease *	739			803	
Coronary heart disease hospitalizations *	3			3	
Cerebrovascular disease hospitalizations *	3			3	
Self-inflicted injury hospitalizations *	69	47-91		96	
Health Factors					34
Health Behaviors					43
Adult smoking **	16%	15-17%	14%	17%	
Adult obesity	33%	27-39%	25%	29%	
Food environment index	7.8		8.3	7.9	
Physical inactivity	19%	14-24%	20%	22%	
Access to exercise opportunities	32%		91%	81%	
Excessive drinking **	22%	21-23%	12%	23%	
Alcohol-impaired driving deaths	57%	48-65%	14%	38%	
Sexually transmitted infections	129.1		134.1	411.6	
Teen births	22	17-27	19	26	
Additional Health Behaviors (not included in overall ranking)					
Food insecurity	11%		11%	12%	
Limited access to healthy foods	8%		2%	5%	
Drug overdose deaths			8	14	
Drug overdose deaths - modeled	8.1-10.0		6.1-8.0	15.1	
Motor vehicle crash deaths	15	9-24	9	11	
Insufficient sleep	28%	27-29%	28%	31%	
Smoking during pregnancy *	17%			14%	
Drug arrests *	76			27,733	
Alcohol-related hospitalizations *	1			2	
Motor vehicle crash occupancy rate *	37			42	
On-road motor vehicle crash-related ER visits *	436	380-492		578	
Off-road motor vehicle crash-related ER visits *	85	61-110		65	
Clinical Care					27
Uninsured	12%	11-13%	11%	11%	
Primary care physicians	1,360:1		1,040:1	1,220:1	
Dentists	2,940:1		1,340:1	1,590:1	
Mental health providers	980:1		390:1	640:1	
Preventable hospital stays	48	39-56	38	48	

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Diabetes monitoring	95%	83-100%	90%	90%	
Mammography screening	68%	56-81%	71%	71%	
Additional Clinical Care (not included in overall ranking)					
Uninsured adults	14%	12-16%	13%	13%	
Uninsured children	6%	5-8%	5%	5%	
Health care costs	$7,304			$8,322	
Other primary care providers	2,944:1		919:1	1,240:1	
No recent dental visit *	7%	0-15%		26%	
Did not get needed health care *	2%	0-5%		2%	
Childhood immunizations *	59%			71%	
Local health department staffing *	4			3	
Social & Economic Factors					34
High school graduation	96%		93%	88%	
Some college	56%	50-62%	72%	67%	
Unemployment	5.1%		3.5%	5.5%	
Children in poverty	22%	16-27%	13%	18%	
Income inequality	4.2	3.7-4.6	3.7	4.3	
Children in single-parent households	24%	18-29%	21%	31%	
Social associations	11.3		22.1	11.8	
Violent crime	28		59	255	
Injury deaths	61	46-80	51	65	
Additional Social & Economic Factors (not included in overall ranking)					
Median household income	$44,000	$40,300-47,800	$61,700	$52,600	
Children eligible for free or reduced price lunch	43%		25%	35%	
Residential segregation - Black/White			23	78	
Residential segregation - non-white/white	31		15	57	
Homicides			2	3	
Reading proficiency *	27%			36%	
W-2 enrollment *	47			19,511	
Poverty *	14%	11-16%		13%	
Older adults living alone *	30%			30%	
Hate crimes *	0			1	
Child abuse *	5			4	
Injury hospitalizations *	1,015	868-1,162		830	
Fall fatalities 65+ *	104	40-168		115	
Physical Environment					42
Air pollution - particulate matter	11.9		9.5	11.5	
Drinking water violations	No				
Severe housing problems	15%	13-17%	9%	15%	
Driving alone to work	81%	78-83%	71%	80%	
Long commute - driving alone	31%	28-34%	15%	26%	
Additional Physical Environment (not included in overall ranking)					
Year structure built *	38%			26%	

^ 10th/90th percentile, i.e., only 10% are better.
* Data supplied on behalf of state
** Data should not be compared with prior years due to changes in definition/methods
Note: Blank values reflect unreliable or missing data

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

Richland (RI)
2017 Rankings

County Demographics

	County	State
Population	17,495	5,771,337
% below 18 years of age	22.3%	22.4%
% 65 and older	20.3%	15.6%
% Non-Hispanic African American	0.7%	6.3%
% American Indian and Alaskan Native	0.4%	1.1%
% Asian	0.7%	2.8%
% Native Hawaiian/Other Pacific Islander	0.0%	0.1%
% Hispanic	2.1%	6.6%
% Non-Hispanic white	95.3%	81.9%
% not proficient in English	1%	2%
% Females	49.6%	50.3%
% Rural	72.1%	29.8%
Male population 0-17 *	2,094	663,229
Male population 18-44 *	2,616	1,002,728
Male population 45-64 *	2,650	794,253
Male population 65+ *	1,595	405,018
Total male population *	8,955	2,865,228
Female population 0-17 *	1,966	634,058
Female population 18-44 *	2,415	972,041
Female population 45-64 *	2,588	798,878
Female population 65+ *	1,890	496,369
Total female population *	8,859	2,901,346
Population growth *	-1%	1%

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Health Outcomes					30
Length of Life					33
Premature death	5,800	4,500-7,200	5,200	6,000	
Quality of Life					24
Poor or fair health **	14%	13-15%	12%	14%	
Poor physical health days **	3.6	3.4-3.8	3.0	3.4	
Poor mental health days **	3.6	3.4-3.8	3.0	3.5	
Low birthweight	5%	4-7%	6%	7%	
Additional Health Outcomes (not included in overall ranking)					
Premature age-adjusted mortality	300	260-350	270	300	
Child mortality			40	50	
Infant mortality			5	6	
Frequent physical distress	11%	10-11%	9%	10%	
Frequent mental distress	11%	10-11%	9%	10%	
Diabetes prevalence	10%	7-13%	8%	9%	
HIV prevalence			42	115	
Communicable disease *	755			839	
Coronary heart disease hospitalizations *	3			3	
Cerebrovascular disease hospitalizations *	3			3	
Self-inflicted injury hospitalizations *	67	45-89		99	
Cancer incidence *	437	400-477		468	
Health Factors					48
Health Behaviors					54
Adult smoking **	18%	17-19%	14%	17%	
Adult obesity	32%	26-38%	26%	30%	
Food environment index	7.8		8.4	8.0	
Physical inactivity	19%	14-24%	19%	20%	
Access to exercise opportunities	32%		91%	81%	
Excessive drinking **	22%	21-23%	12%	24%	
Alcohol-impaired driving deaths	50%	39-60%	13%	37%	
Sexually transmitted infections	231.4		145.5	403.2	
Teen births	22	18-27	17	24	
Additional Health Behaviors (not included in overall ranking)					
Food insecurity	11%		10%	12%	
Limited access to healthy foods	8%		2%	5%	
Drug overdose deaths			9	15	
Motor vehicle crash deaths	15	9-24	8	10	
Insufficient sleep	28%	27-29%	28%	31%	
Smoking during pregnancy *	16%			13%	
Drug arrests *	16			26,182	
Alcohol-related hospitalizations *				2	
Motor vehicle crash occupancy rate *	31			40	
On-road motor vehicle crash-related ER visits *	389	336-441		585	
Off-road motor vehicle crash-related ER visits *	86	61-110		65	
Clinical Care					44
Uninsured	10%	9-12%	8%	9%	
Primary care physicians	1,610:1		1,040:1	1,240:1	
Dentists	2,500:1		1,320:1	1,560:1	
Mental health providers	920:1		360:1	600:1	
Preventable hospital stays	46	38-54	36	45	

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Diabetes monitoring	91%	79-100%	91%	90%	
Mammography screening	65%	54-77%	71%	72%	
Additional Clinical Care (not included in overall ranking)					
Uninsured adults	12%	10-13%	10%	10%	
Uninsured children	6%	5-8%	4%	5%	
Health care costs	$7,320			$8,412	
Other primary care providers	2,499:1		853:1	1,156:1	
No recent dental visit *	10%	1-19%		26%	
Did not get needed health care *	1%	0-3%		2%	
Childhood immunizations *	61%			71%	
Local health department staffing *	4			3	
Social & Economic Factors					39
High school graduation	92%		95%	88%	
Some college	56%	50-62%	72%	67%	
Unemployment	4.3%		3.3%	4.6%	
Children in poverty	22%	16-27%	12%	17%	
Income inequality	4.2	3.8-4.7	3.7	4.3	
Children in single-parent households	22%	18-27%	21%	31%	
Social associations	10.8		22.1	11.7	
Violent crime	14		62	283	
Injury deaths	59	44-77	53	69	
Additional Social & Economic Factors (not included in overall ranking)					
Disconnected youth	10%		10%	11%	
Median household income	$47,000	$43,600-50,400	$63,300	$55,600	
Children eligible for free or reduced price lunch	52%		33%	41%	
Residential segregation - Black/White			22	78	
Residential segregation - non-white/white	37		14	56	
Homicides			2	3	
Firearm fatalities			7	9	
Reading proficiency *	43%			52%	
W-2 enrollment *	49			14,439	
Poverty *	14%	11-17%		12%	
Older adults living alone *	30%			29%	
Hate crimes *				1	
Child abuse *	6			4	
Injury hospitalizations *	840	706-974		806	
Fall fatalities 65+ *	90	31-149		123	
Physical Environment					47
Air pollution - particulate matter **	9.3		6.7	9.3	
Drinking water violations	No				
Severe housing problems	17%	14-19%	9%	16%	
Driving alone to work	81%	79-83%	72%	81%	
Long commute - driving alone	33%	29-36%	15%	26%	
Additional Physical Environment (not included in overall ranking)					
Year structure built *	38%			26%	

^ 10th/90th percentile, i.e., only 10% are better.
* Data supplied on behalf of state
** Data should not be compared with prior years
Note: Blank values reflect unreliable or missing data

County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

Richland (RI)
2018 Rankings

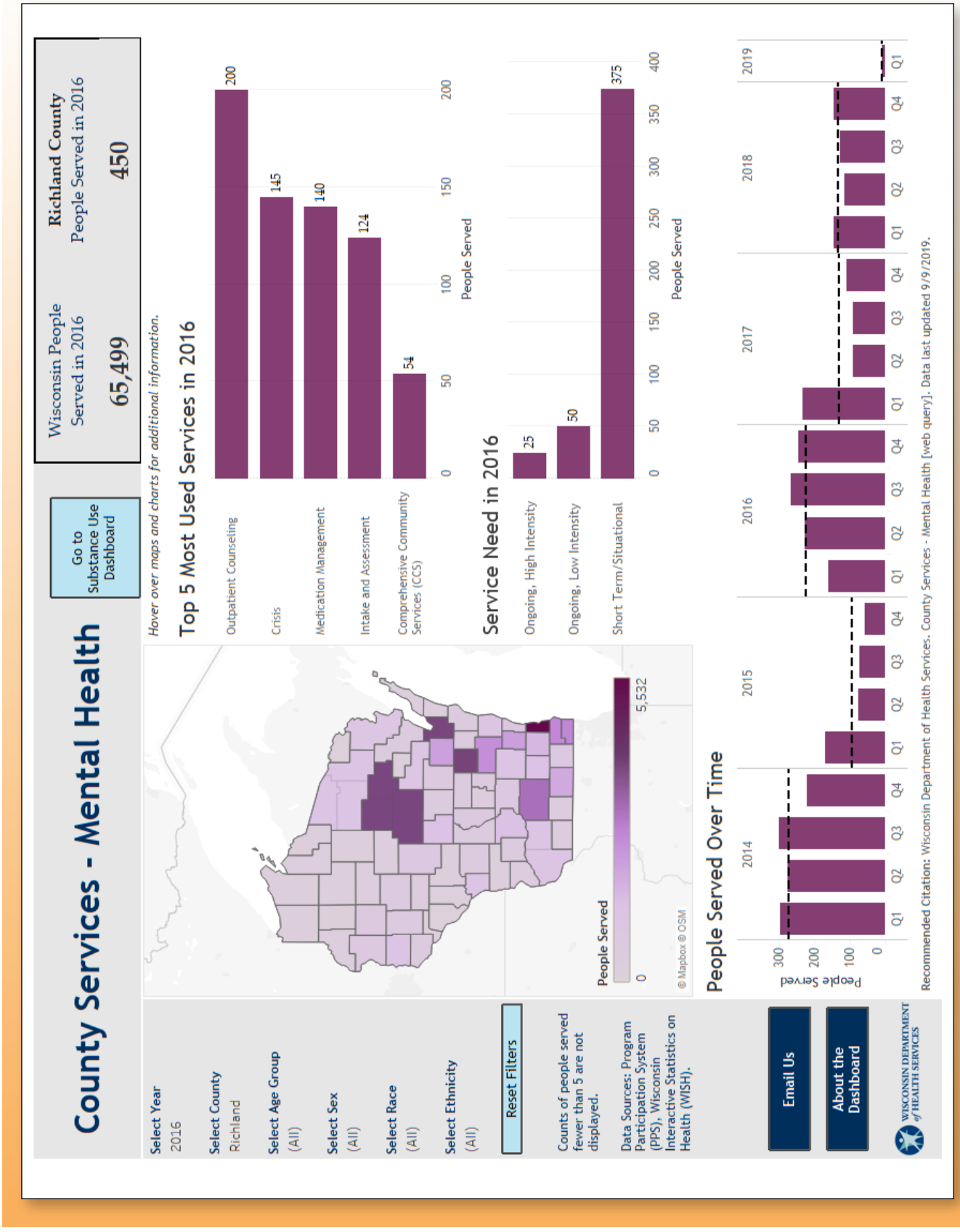
County Demographics

	County	State
Population	17,476	5,778,708
% below 18 years of age	22.0%	22.3%
% 65 and older	21.5%	16.1%
% Non-Hispanic African American	0.7%	6.3%
% American Indian and Alaskan Native	0.4%	1.1%
% Asian	0.7%	2.8%
% Native Hawaiian/Other Pacific Islander	0.1%	0.1%
% Hispanic	2.2%	6.7%
% Non-Hispanic white	95.1%	81.7%
% not proficient in English	0%	1%
% Females	49.6%	50.3%
% Rural	72.1%	29.8%
Male population 0-17 *	2,091	659,600
Male population 18-44 *	2,592	1,003,259
Male population 45-64 *	2,602	789,397
Male population 65+ *	1,660	419,300
Total male population *	8,945	2,871,556
Female population 0-17 *	1,962	630,421
Female population 18-44 *	2,399	968,609
Female population 45-64 *	2,557	795,855
Female population 65+ *	1,944	508,536
Total female population *	8,862	2,903,421
Population growth *	-1%	1%

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Health Outcomes					29
Length of Life					42
Premature death	6,200	4,700-7,600	5,300	6,000	
Quality of Life					15
Poor or fair health **	15%	14-15%	12%	15%	
Poor physical health days **	3.6	3.4-3.8	3.0	3.6	
Poor mental health days **	3.6	3.4-3.8	3.1	3.8	
Low birthweight	5%	4-6%	6%	7%	
Additional Health Outcomes (not included in overall ranking)					
Premature age-adjusted mortality	300	260-350	270	300	
Child mortality	80	40-130	40	50	
Infant mortality			4	6	
Frequent physical distress	11%	10-11%	9%	11%	
Frequent mental distress	11%	11-12%	10%	12%	
Diabetes prevalence	9%	7-12%	8%	9%	
HIV prevalence			49	122	
Communicable disease *	714			882	
Self-inflicted injury hospitalizations *	67	45-89		99	
Cancer incidence *	429	392-469		469	
Health Factors					46
Health Behaviors					25
Adult smoking **	16%	15-17%	14%	17%	
Adult obesity	31%	25-38%	26%	31%	
Food environment index	8.0		8.6	8.8	
Physical inactivity	19%	14-25%	20%	21%	
Access to exercise opportunities	62%		91%	86%	
Excessive drinking **	24%	22-25%	13%	26%	
Alcohol-impaired driving deaths	39%	26-51%	13%	36%	
Sexually transmitted infections	113.2		145.1	423.5	
Teen births	18	14-23	15	20	
Additional Health Behaviors (not included in overall ranking)					
Food insecurity	11%		10%	11%	
Limited access to healthy foods	8%		2%	5%	
Drug overdose deaths			10	16	
Drug overdose deaths - modeled	12-13.9		8-11.9	19.3	
Motor vehicle crash deaths	19	12-29	9	10	
Insufficient sleep	32%	31-33%	27%	32%	
Smoking during pregnancy *	15%			13%	
Drug arrests *	40			25,990	
Motor vehicle crash occupancy rate *	47			51	
On-road motor vehicle crash-related ER visits *	389	336-441		585	
Off-road motor vehicle crash-related ER visits *	86	61-110		65	
Clinical Care					44
Uninsured	7%	6-9%	6%	7%	
Primary care physicians	1,590:1		1,030:1	1,250:1	
Dentists	2,180:1		1,280:1	1,520:1	
Mental health providers	870:1		330:1	560:1	
Preventable hospital stays	52	42-61	35	45	
Diabetes monitoring	91%	79-100%	91%	90%	
Mammography screening	65%	54-77%	71%	72%	

	Richland County	Error Margin	Top U.S. Performers ^	Wisconsin	Rank (of 72)
Additional Clinical Care (not included in overall ranking)					
Uninsured adults	8%	7-10%	7%	8%	
Uninsured children	5%	4-7%	3%	4%	
Health care costs	$8,031			$8,696	
Other primary care providers	2,185:1		782:1	1,055:1	
No recent dental visit *	10%	1-19%		26%	
Did not get needed health care *	1%	0-3%		2%	
Childhood immunizations *	63%			73%	
Social & Economic Factors					44
High school graduation	92%		95%	88%	
Some college	54%	48-60%	72%	68%	
Unemployment	3.8%		3.2%	4.1%	
Children in poverty	21%	15-27%	12%	16%	
Income inequality	4.0	3.5-4.5	3.7	4.3	
Children in single-parent households	25%	20-29%	20%	32%	
Social associations	10.3		22.1	11.6	
Violent crime	14		62	283	
Injury deaths	69	53-89	55	73	
Additional Social & Economic Factors (not included in overall ranking)					
Disconnected youth	10%		10%	11%	
Median household income	$50,300	$46,900-53,700	$65,100	$56,800	
Children eligible for free or reduced price lunch	52%		33%	40%	
Residential segregation - Black/White			23	77	
Residential segregation - non-white/white	35		14	56	
Homicides			2	3	
Firearm fatalities			7	10	
Reading proficiency *	43%			52%	
W-2 enrollment *	30			11,039	
Poverty *	13%	10-16%		12%	
Older adults living alone *	28%			29%	
Hate crimes *				1	
Child abuse *	5			4	
Injury hospitalizations *	840	706-974		806	
Fall fatalities 65+ *	49	6-91		128	
Physical Environment					63
Air pollution - particulate matter **	9.3		6.7	9.3	
Drinking water violations	Yes				
Severe housing problems	16%	14-18%	9%	15%	
Driving alone to work	81%	79-83%	72%	81%	
Long commute - driving alone	33%	30-36%	15%	27%	
Additional Physical Environment (not included in overall ranking)					
Year structure built *	39%			26%	

^ 10th/90th percentile, i.e., only 10% are better.
* Data supplied on behalf of state
** Data should not be compared with prior years
Note: Blank values reflect unreliable or missing data


County Services - Mental Health
Go to Substance Use Dashboard
Wisconsin People Served in 2016
65,499
Richland County People Served in 2016
450
Hover over maps and charts for additional information.
Top 5 Most Used Services in 2016
Outpatient Counseling
Crisis
Medication Management
Intake and Assessment
Comprehensive Community Services (CCS)
200
145
140
124
54
People Served
Service Need in 2016
Ongoing, High Intensity
Ongoing, Low Intensity
Short Term/Situational
25
50
375
People Served
People Served Over Time
2014
2015
2016
2017
2018
2019
Select Year
2016
Select County
Richland
Select Age Group
(All)
Select Sex
(All)
Select Race
(All)
Select Ethnicity
(All)
Reset Filters
Counts of people served fewer than 5 are not displayed.
Data Sources: Program Participation System (PPS), Wisconsin Interactive Statistics on Health (WISH).
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WISCONSIN DEPARTMENT of HEALTH SERVICES
Recommended Citation: Wisconsin Department of Health Services. County Services - Mental Health [web query]. Data last updated 9/9/2019.

County Services - Mental Health

Go to Substance Use Dashboard

Wisconsin People Served in 2017	Richland County People Served in 2017
71,178	335

Select Year
2017

Select County
Richland

Select Age Group
(All)

Select Sex
(All)

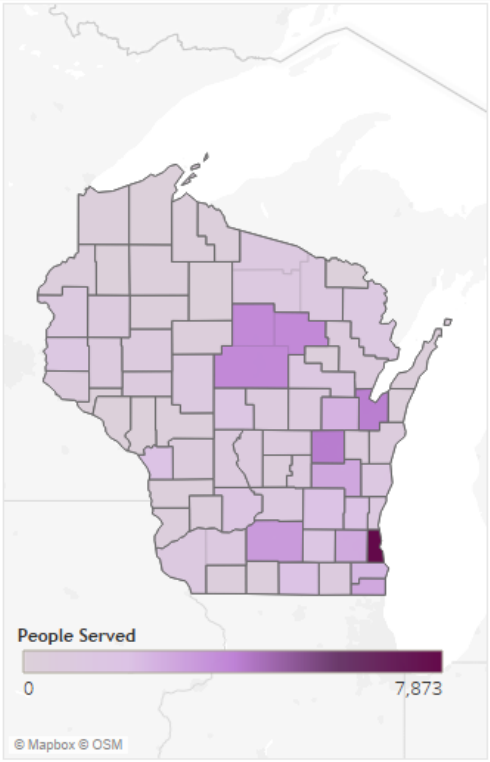
Select Race
(All)

Select Ethnicity
(All)

Reset Filters

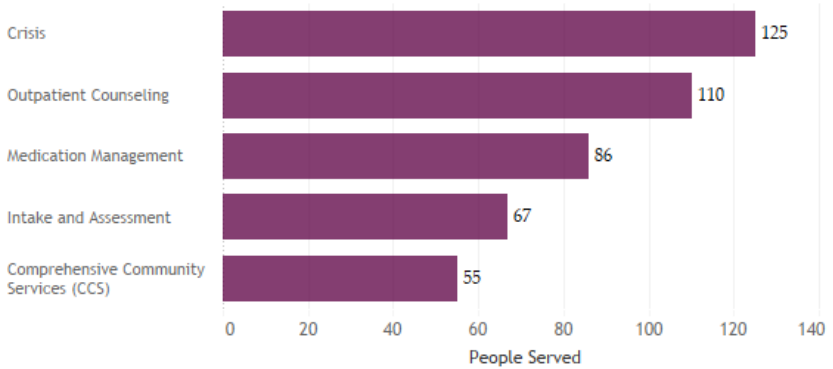
Counts of people served fewer than 5 are not displayed.

Data Sources: Program Participation System (PPS), Wisconsin Interactive Statistics on Health (WISH).

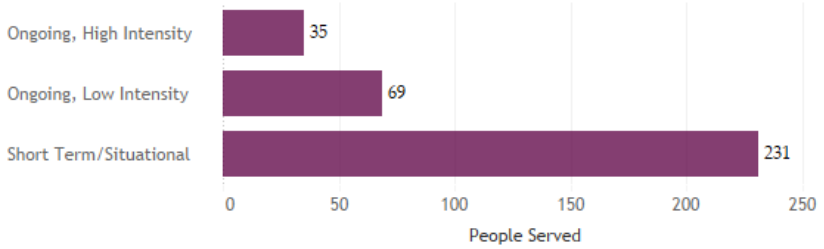


Hover over maps and charts for additional information.

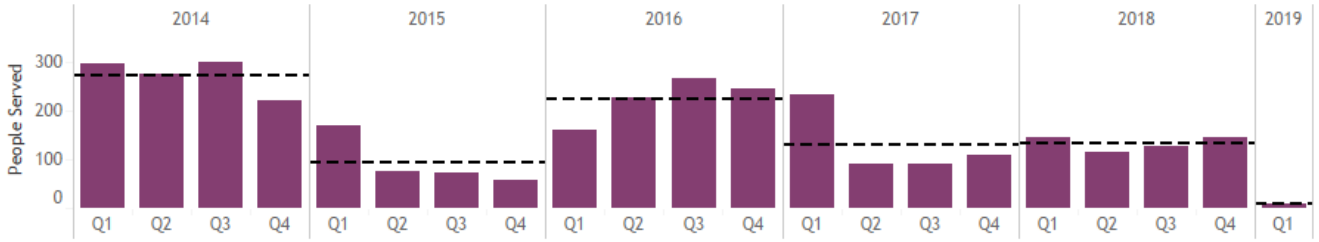
Top 5 Most Used Services in 2017



Service Need in 2017



People Served Over Time



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WISCONSIN DEPARTMENT of HEALTH SERVICES

Recommended Citation: Wisconsin Department of Health Services. County Services - Mental Health [web query]. Data last updated 9/9/2019.

County Services - Mental Health

Go to Substance Use Dashboard

Wisconsin People Served in 2018	Richland County People Served in 2018
73,085	277

Select Year
2018

Select County
Richland

Select Age Group
(All)

Select Sex
(All)

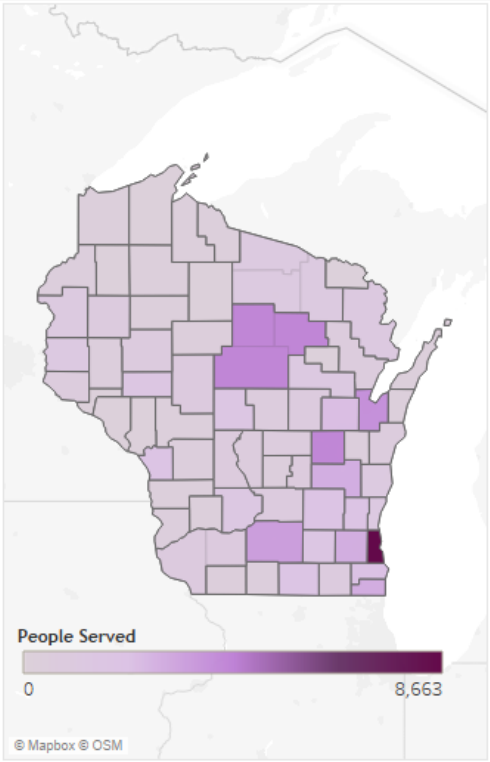
Select Race
(All)

Select Ethnicity
(All)

Reset Filters

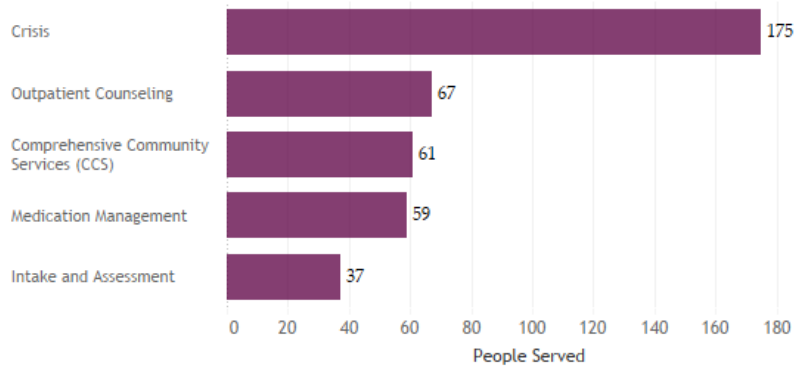
Counts of people served fewer than 5 are not displayed.

Data Sources: Program Participation System (PPS), Wisconsin Interactive Statistics on Health (WISH).

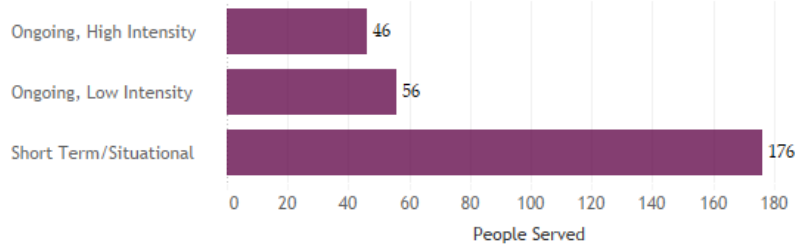


Hover over maps and charts for additional information.

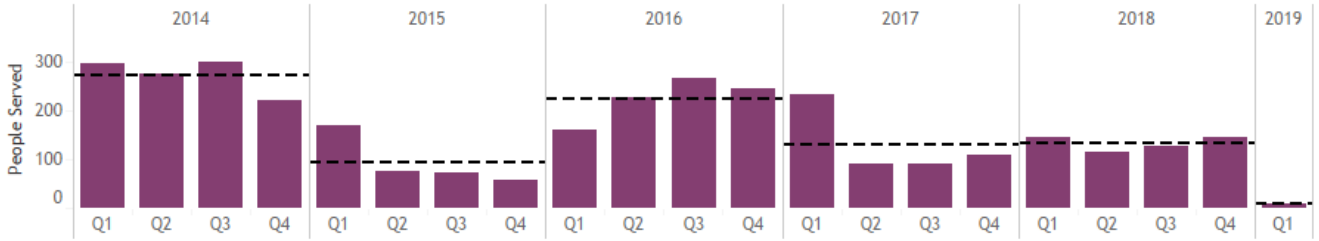
Top 5 Most Used Services in 2018



Service Need in 2018



People Served Over Time



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WISCONSIN DEPARTMENT of HEALTH SERVICES

Recommended Citation: Wisconsin Department of Health Services. County Services - Mental Health [web query]. Data last updated 9/9/2019.

County Services - Substance Use

Go to Mental Health Dashboard

Wisconsin People Served in 2016	Richland County People Served in 2016
31,772	119

Select Year
2016

Select County
Richland

Select Age Group
(All)

Select Sex
(All)

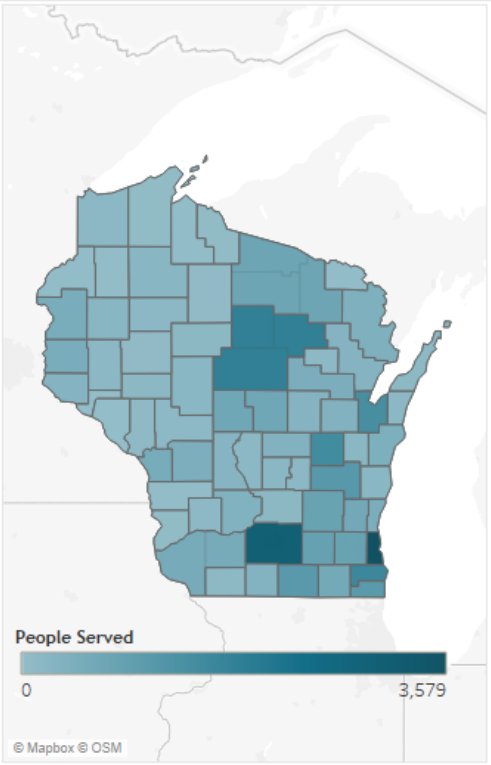
Select Race
(All)

Select Ethnicity
(All)

Reset Filters

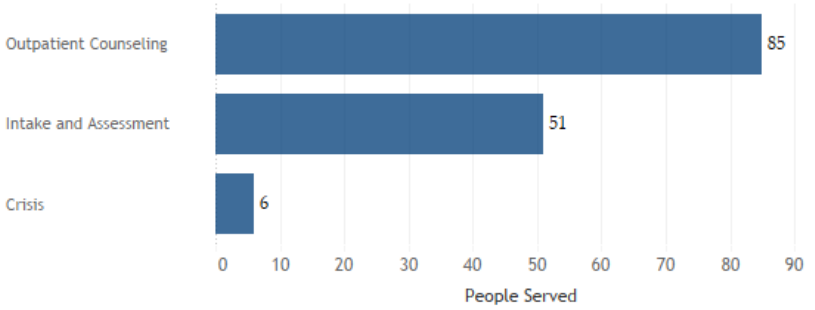
Counts of people served fewer than 5 are not displayed.

Data Sources: Program Participation System (PPS), Wisconsin Interactive Statistics on Health (WISH).

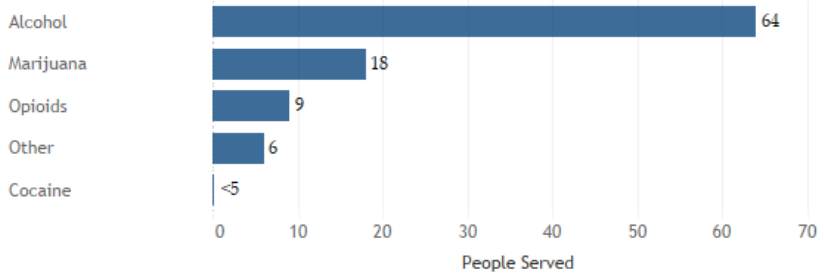


Hover over maps and charts for additional information.

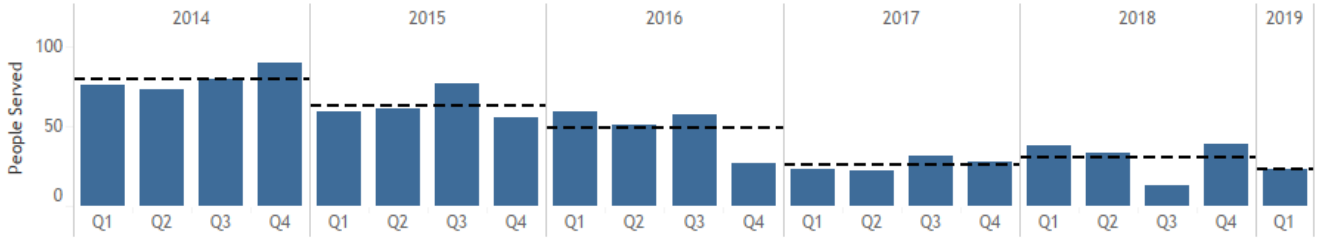
Top 5 Most Used Services in 2016



Top 5 Most Common Substances in 2016



People Served Over Time



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Recommended Citation: Wisconsin Department of Health Services. County Services - Substance Use [web query]. Data last updated 9/9/2019.

County Services - Substance Use

Go to Mental Health Dashboard

Wisconsin People Served in 2017	Richland County People Served in 2017
31,513	95

Select Year
2017

Select County
Richland

Select Age Group
(All)

Select Sex
(All)

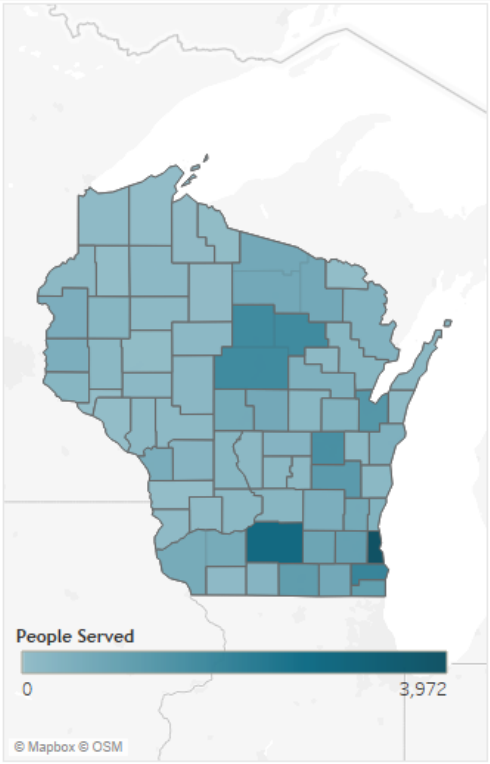
Select Race
(All)

Select Ethnicity
(All)

Reset Filters

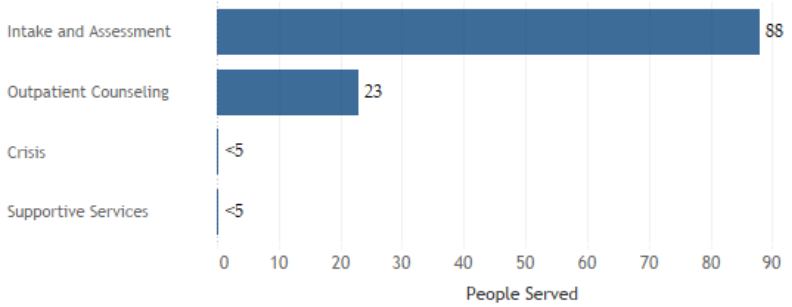
Counts of people served fewer than 5 are not displayed.

Data Sources: Program Participation System (PPS), Wisconsin Interactive Statistics on Health (WISH).

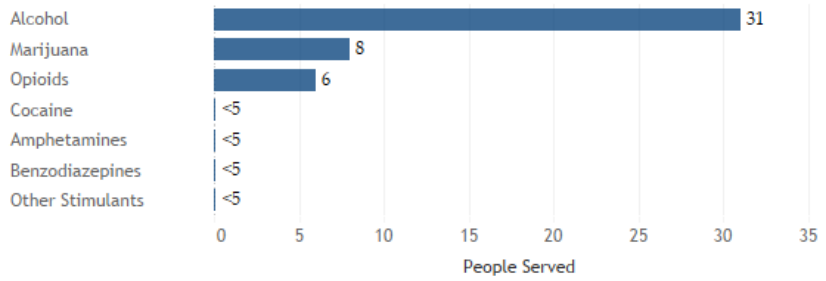


Hover over maps and charts for additional information.

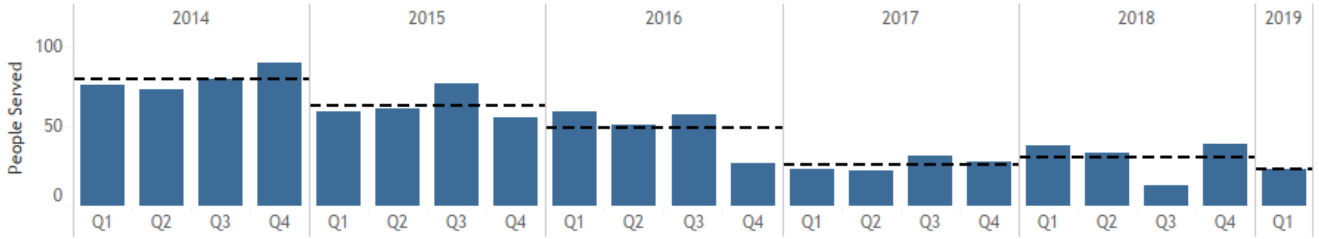
Top 5 Most Used Services in 2017



Top 5 Most Common Substances in 2017



People Served Over Time



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About the Dashboard

WISCONSIN DEPARTMENT of HEALTH SERVICES

Recommended Citation: Wisconsin Department of Health Services. County Services - Substance Use [web query]. Data last updated 9/9/2019.

County Services - Substance Use

Go to Mental Health Dashboard

Wisconsin People Served in 2018	Richland County People Served in 2018
31,158	71

Select Year
2018

Select County
Richland

Select Age Group
(All)

Select Sex
(All)

Select Race
(All)

Select Ethnicity
(All)

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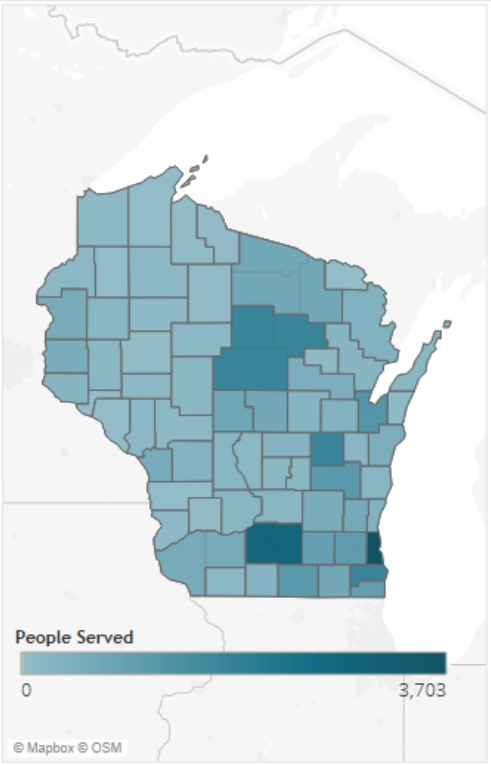

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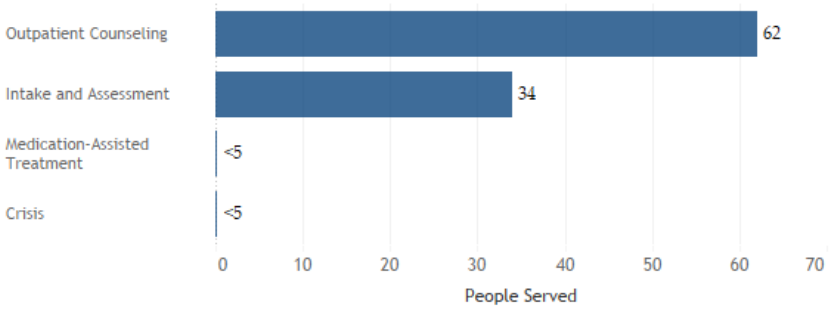
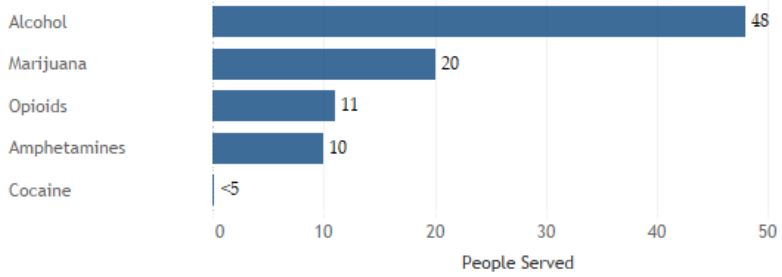
Top 5 Most Used Services in 2018



Top 5 Most Common Substances in 2018



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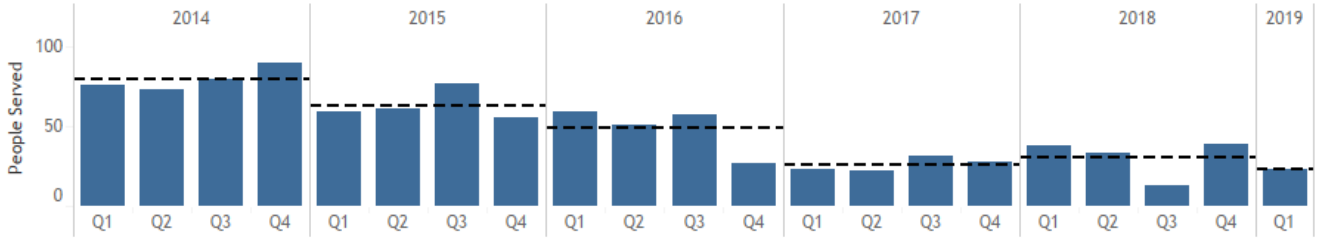

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Arrests by County and Type

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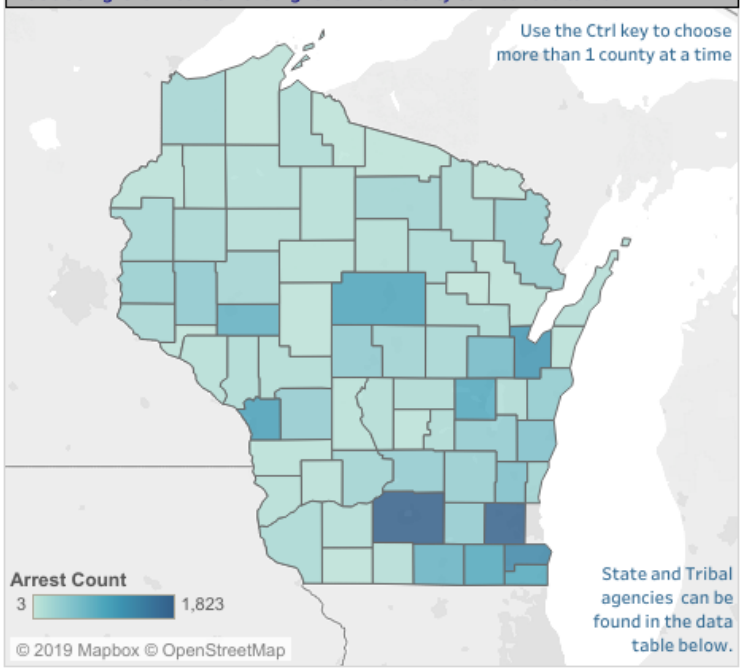

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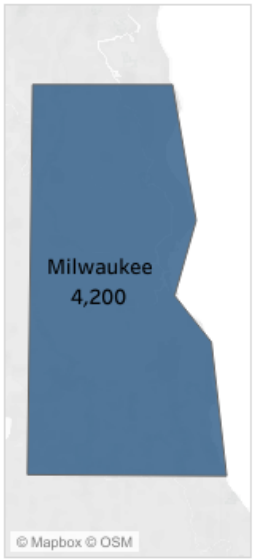

Use the Age Group, Arrest Year, and Arrest Category filters to change data in the map and data table.

Age Group	Arrest Year	Arrest Category
○ Adult	○ 2014	○ Violent Crimes
○ Juvenile	○ 2015	○ Property Crimes
◉ Total	◉ 2016	○ Society Crimes
	○ 2017	◉ Drug Crimes
	○ 2018	○ Other Crimes
		○ Grand total

Click here twice slowly to reset table to all agencies

Data were last refreshed on: 04/29/19

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Arrests by Agency Table - hover over any number in the table to see how many months of data were submitted

County	Agency Name	Drug Sale - Opium/Coc..	Drug Sale - Marijuana	Drug Sale - Synthetic	Drug Sale - Other Dan..	Drug Possessio..	Drug Possession..	Drug Possessio..	Drug Possessio..	Drug - Unknown	Total
Richland	Richland Center PD	2	4	2	2	1	22	4	4	0	**41**
	Richland Co SO	0	3	0	3	0	6	1	3	0	**16**
	Total	**2**	**7**	**2**	**5**	**1**	**28**	**5**	**7**	**0**	**57**

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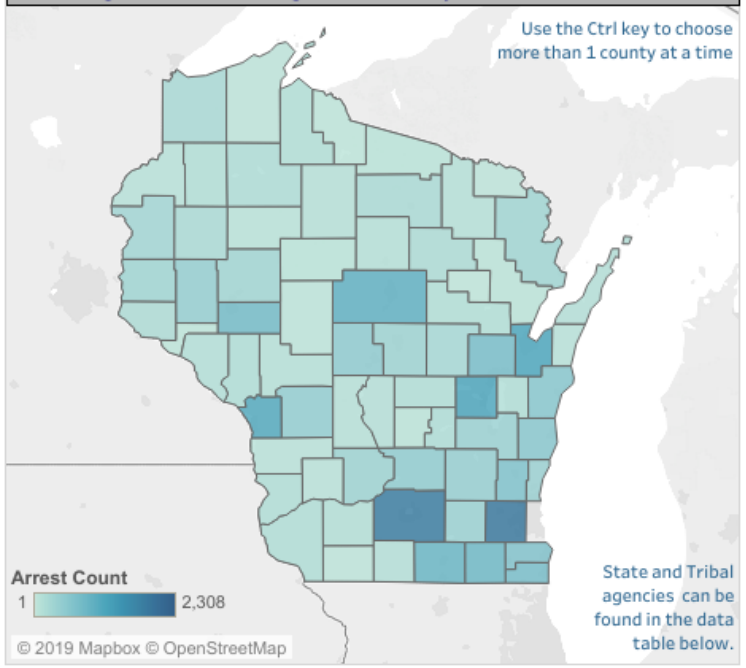

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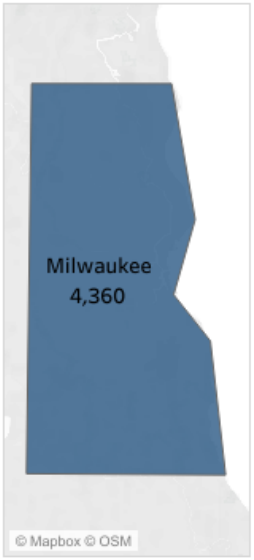

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County	Agency Name	Drug Sale - Opium/Coc..	Drug Sale - Marijuana	Drug Sale - Synthetic	Drug Sale - Other Dan..	Drug Possessio..	Drug Possession..	Drug Possessio..	Drug Possessio..	Drug - Unknown	Total
Richland	Richland Center PD	3	10	1	3	0	17	3	6	0	43
	Richland Co SO	0	3	0	4	1	12	1	6	0	27
	Total	3	13	1	7	1	29	4	12	0	70

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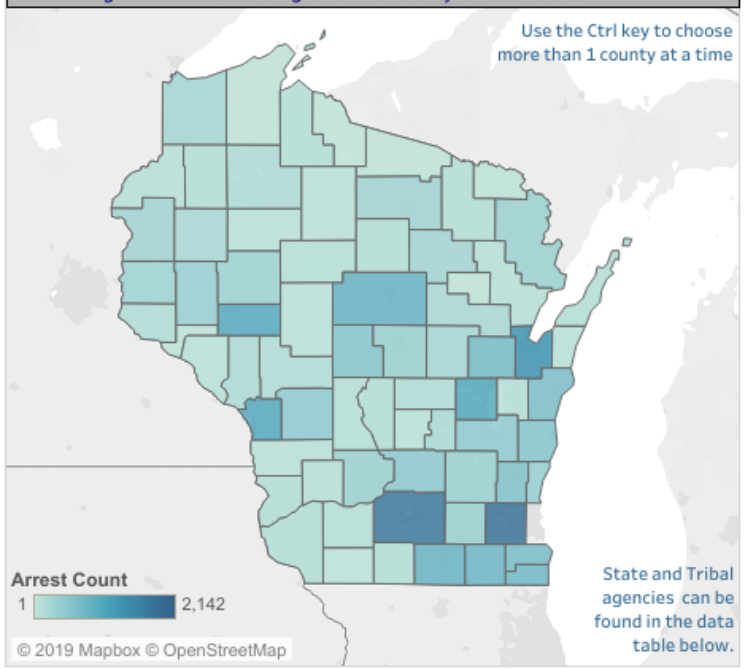

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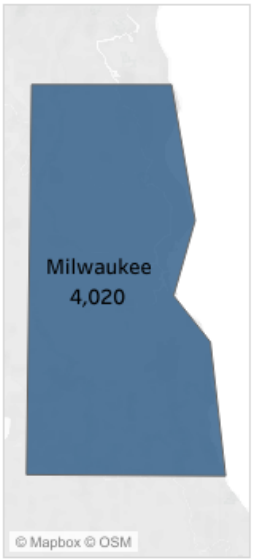

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County	Agency Name	Drug Sale - Opium/Coc..	Drug Sale - Marijuana	Drug Sale - Synthetic	Drug Sale - Other Dan..	Drug Possessio..	Drug Possession..	Drug Possessio..	Drug Possessio..	Drug - Unknown	Total
Richland	Richland Center PD	0	11	0	1	0	23	3	15	0	**53**
	Richland Co SO	1	1	1	1	1	13	5	3	0	**26**
	Total	**1**	**12**	**1**	**2**	**1**	**36**	**8**	**18**	**0**	**79**

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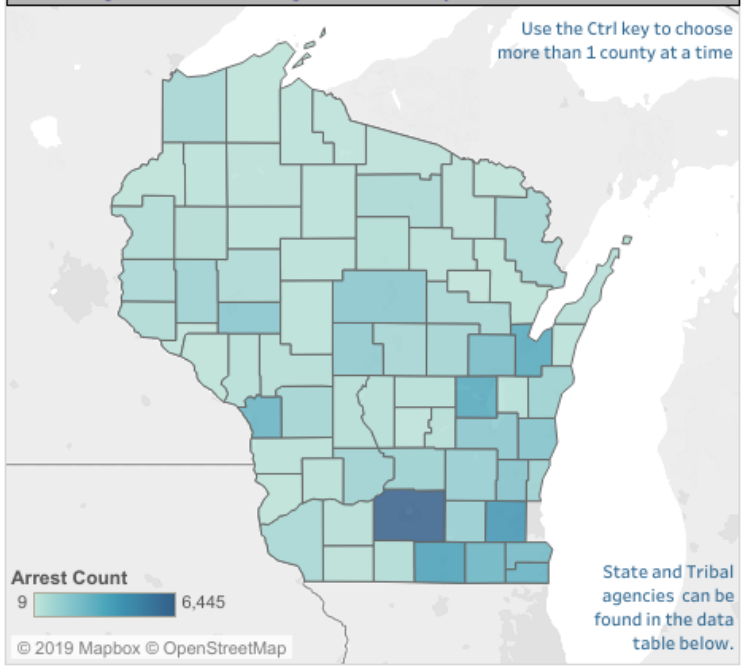

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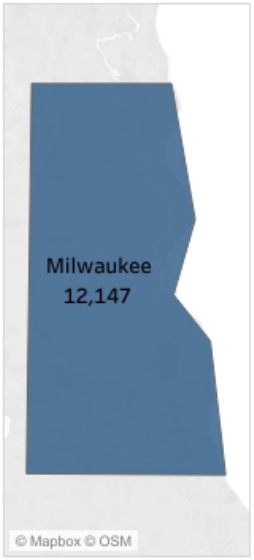

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Age Group	Arrest Year	Arrest Category
Adult	2014	Violent Crimes
Juvenile	2015	Property Crimes
Total	2016	Society Crimes
	2017	Drug Crimes
	2018	Other Crimes
		Grand total

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Arrests by Agency Table - hover over any number in the table to see how many months of data were submitted

County	Agency Name	Weapons	Prostitution & Commer..	Gambling	Driving Under the ..	Liquor Laws	Disorderly Conduct	Vagrancy Violations	Curfew/ Loitering V..	Sex Offenses - ..	Total
Richland	Richland Center PD	4	0	0	50	16	100	0	0	3	173
	Richland Co SO	2	0	0	32	0	39	0	0	3	76
	Total	6	0	0	82	16	139	0	0	6	249

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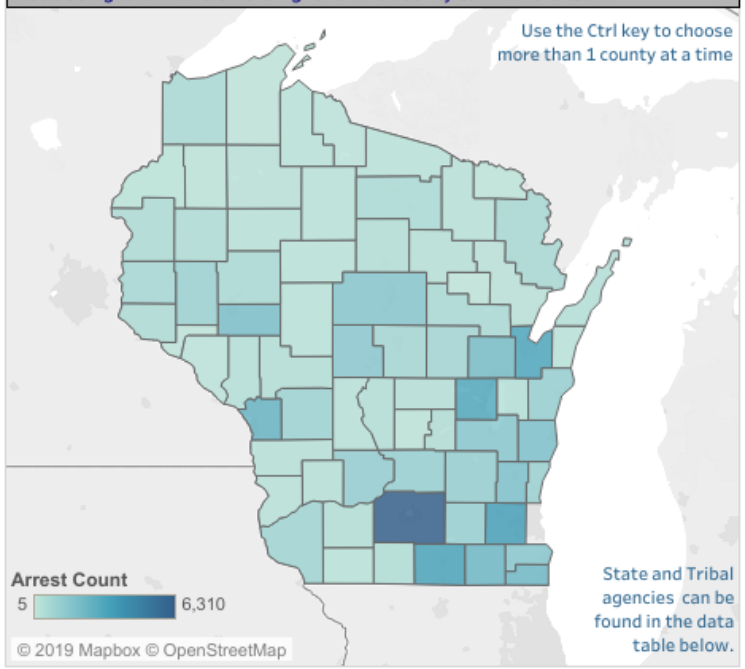

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County	Agency Name	Weapons	Prostitution & Commer..	Gambling	Driving Under the ..	Liquor Laws	Disorderly Conduct	Vagrancy Violations	Curfew/ Loitering V..	Sex Offenses - ..	Total
Richland	Richland Center PD	3	0	0	48	4	123	0	0	1	179
	Richland Co SO	1	0	0	19	0	36	0	0	6	62
	Total	4	0	0	67	4	159	0	0	7	241

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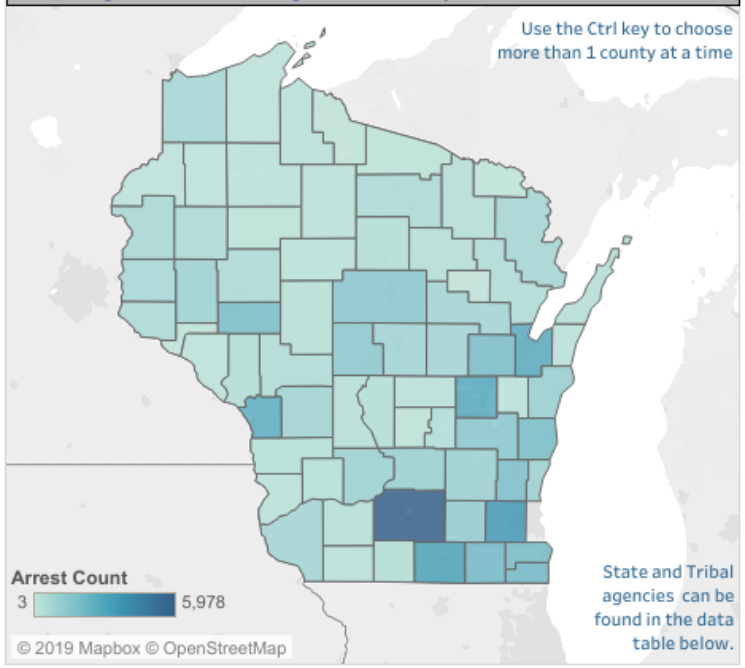

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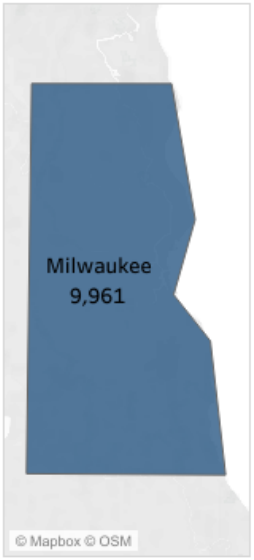

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County	Agency Name	Weapons	Prostitution & Commer..	Gambling	Driving Under the ..	Liquor Laws	Disorderly Conduct	Vagrancy Violations	Curfew/ Loitering V..	Sex Offenses - ..	Total
Richland	Richland Center PD	3	0	0	71	23	114	0	6	4	221
	Richland Co SO	0	0	0	18	2	39	0	0	4	63
	Total	**3**	**0**	**0**	**89**	**25**	**153**	**0**	**6**	**8**	**284**

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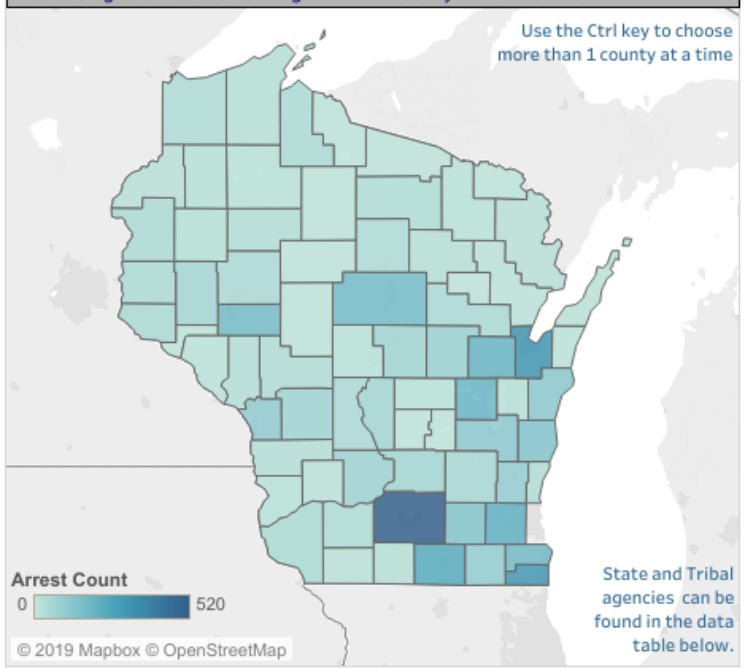

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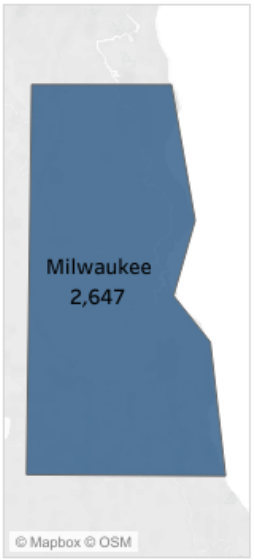

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Arrests by Agency Table - hover over any number in the table to see how many months of data were submitted

County	Agency Name	Murder & Nonnegligent Manslaughter	Rape - prior to 2017	Robbery	Aggravated Assault	Total
Richland	Richland Center PD	0	0	0	12	**12**
	Richland Co SO	0	0	0	0	**0**
	Total	**0**	**0**	**0**	**12**	**12**

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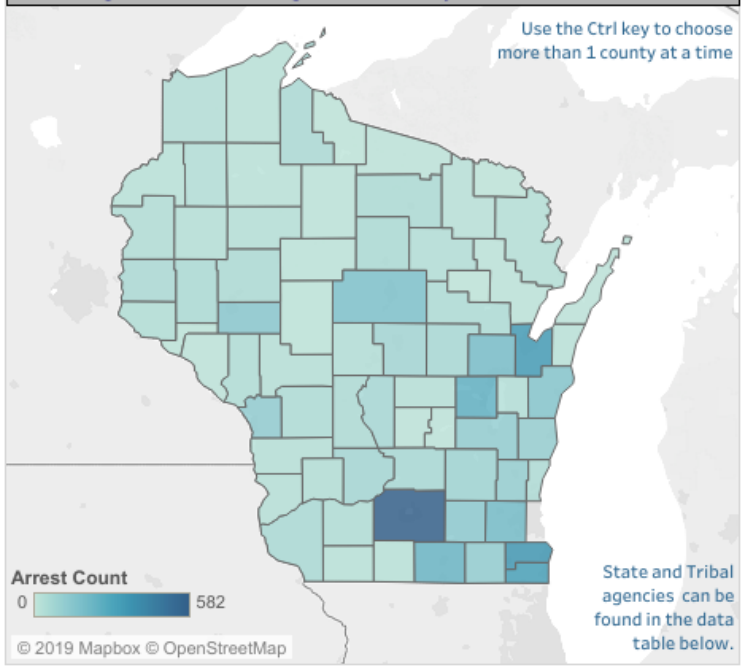

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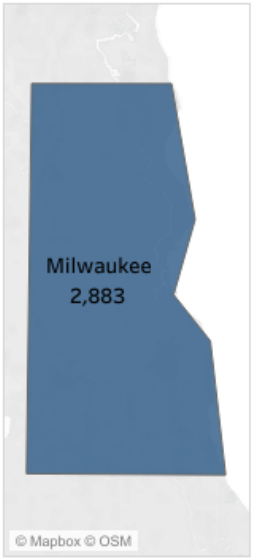

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County	Agency Name	Murder & Nonnegligent Manslaughter	Rape - 2017	Robbery	Aggravated Assault	Total
Richland	Richland Center PD	0	1	0	29	**30**
	Richland Co SO	0	0	0	2	**2**
	Total	**0**	**1**	**0**	**31**	**32**

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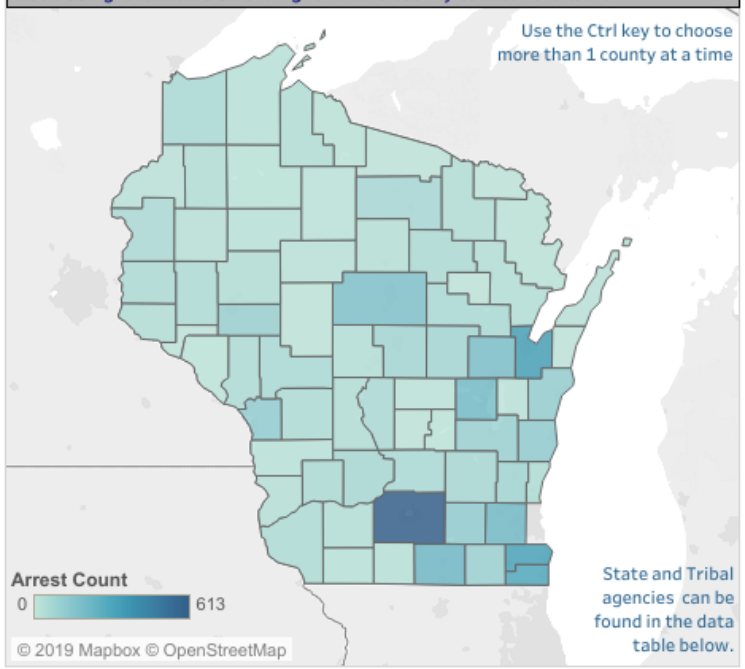
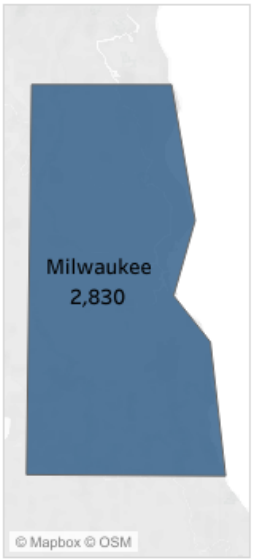


Please see the "Read Me! (Data Notes)" tab for documentation and disclaimers regarding UCR data, including the rape def..



Use the Age Group, Arrest Year, and Arrest Category filters to change data in the map and data table.

Age Group	Arrest Year	Arrest Category
○ Adult	○ 2014	◉ Violent Crimes
○ Juvenile	○ 2015	○ Property Crimes
◉ Total	○ 2016	○ Society Crimes
	○ 2017	○ Drug Crimes
	◉ 2018	○ Other Crimes
		○ Grand total

Click here twice slowly to reset table to all agencies

Data were last refreshed on: 04/29/19

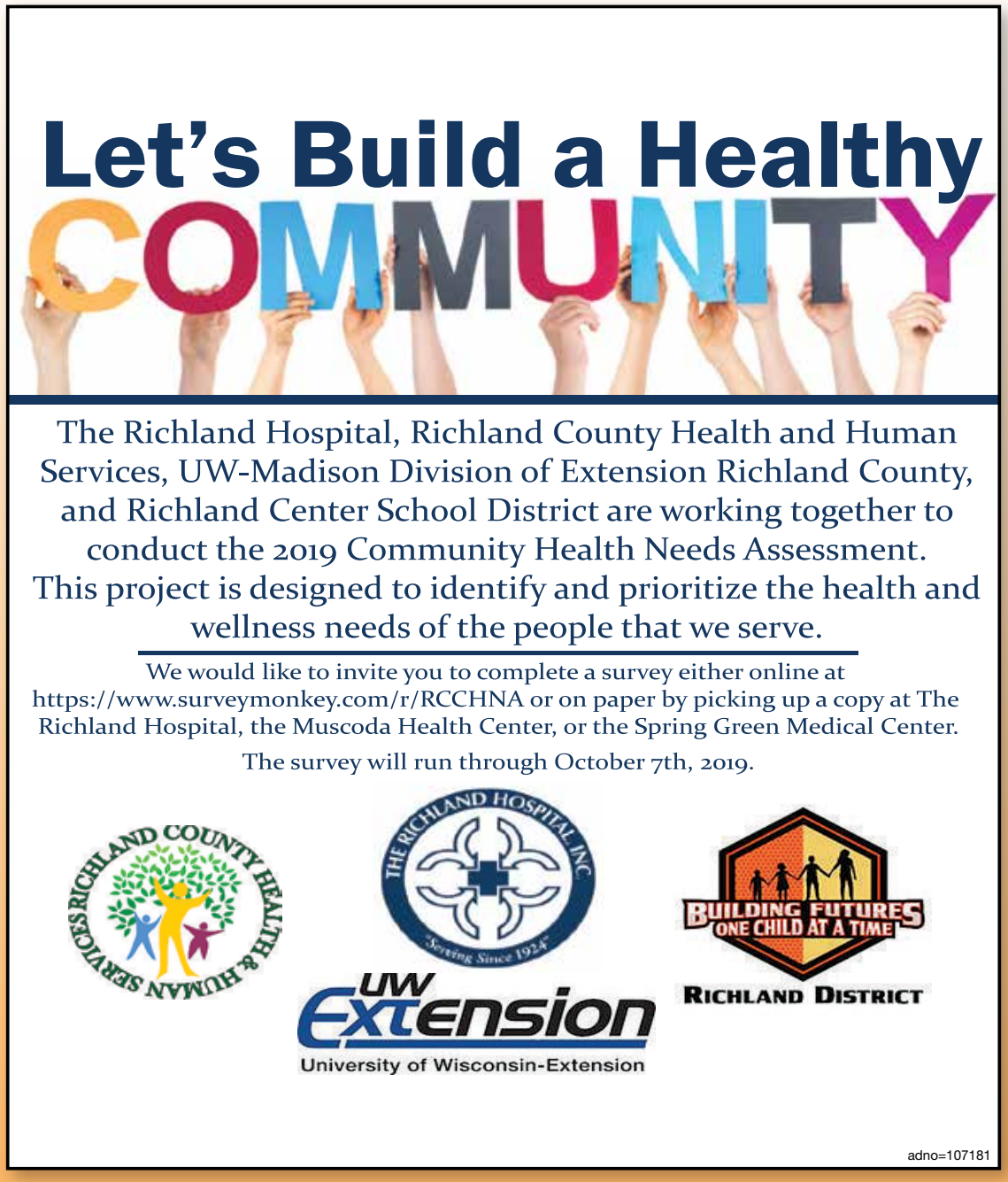
This dashboard was supported by Grant No. 2013-BJ-CX-K049 awarded by the Bureau of Justice Statistics, Office of Justice Programs, United States Department of Justice (US DOJ). Neither the US DOJ nor any of its components operate, control, are responsible for, or necessarily endorse, this Web site (including, without limitation, its content, technical infrastructure, and policies, and any services or tools provided).

Arrests by Agency Table - hover over any number in the table to see how many months of data were submitted

County	Agency Name	Murder & Nonnegligent Manslaughter	Rape - 2017	Robbery	Aggravated Assault	Total
Richland	Richland Center PD	0	10	0	31	**41**
	Richland Co SO	0	0	0	7	**7**
	Total	**0**	**10**	**0**	**38**	**48**

Arrests in the UCR program are defined as: All persons processed by arrest (booking), citation, or summons (when served by an officer) for committing an offense in its jurisdiction. Arrest counts are based on the most serious charge reported to the UCR program, rather than the number of charges.

Newspaper Ad inviting community to participate in CHNA.



Community Insights

By completing this survey, you will help us better understand families' resources and needs in the communities we serve. You will be asked to answer survey questions that include education, employment, housing, healthcare and other basic needs. This will take approximately 5 minutes of your time. **The deadline to participate in this survey is Monday, October 7, 2019 at 5:00 pm.**

This information will be publicly available to support anyone looking to address services that are needed. There are no risks to you for participating in this study, and no penalty for not participating.

* 1. In what county do you live in?

- ○ Richland County
- ○ Crawford County
- ○ Grant County
- ○ Sauk County
- ○ Iowa County
- ○ Other (please specify)

2. In what ZIP code is your home located? (enter 5-digit ZIP code; for example, 53581 or 53556)

3. Thinking of the following aspects of health, how would you rate each of the following?

	Poor	Fair	Good	Excellent
Your overall health.	○	○	○	○
Your overall mental health.	○	○	○	○
Your overall dental health.	○	○	○	○
Your access to healthcare.	○	○	○	○
Your access to mental health care.	○	○	○	○
Your access to dental care.	○	○	○	○
Your access to healthy food choices.	○	○	○	○

Pg 1

* 4. Thinking of the following aspects of life in your community, how would you rate the following?

	Poor	Fair	Good	Excellent
The availability of leisure time opportunities that meet your (and/or your family's) interests.	○	○	○	○
Opportunities for youth to explore interests and participate in positive activities.	○	○	○	○
Opportunities to enjoy fine arts and other cultural experiences (for example, music, theater, art, museums, historical).	○	○	○	○
Opportunities for physical recreation for adults (for example, safe bike trails, sports, exercise programs, parks, outdoor activities).	○	○	○	○
The availability of safely bike or walk to school or work.	○	○	○	○
Opportunities to socialize with others in the community who enjoy similar interests.	○	○	○	○

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* 5. How concerned are you about the following issues in your community?

	No Concern	A Little Concerned	Concerned	Very Concerned
Alcohol use	○	○	○	○
Hunger	○	○	○	○
Illegal drug use	○	○	○	○
Obesity	○	○	○	○
Over-the-counter drug misuse	○	○	○	○
Prescription drug misuse	○	○	○	○
Suicide	○	○	○	○
Tobacco use	○	○	○	○
Sexual abuse or violence	○	○	○	○
Domestic abuse or violence	○	○	○	○

Another issue I am Very Concerned about is...

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You and Your Family

To help us better understand the results of the survey, please answer a few questions about you and your family.

6. What is your age?

- ○ Under 18
- ○ 18-24
- ○ 25-34
- ○ 35-44
- ○ 45-54
- ○ 55-64
- ○ 65+

7. Including yourself, how many people live in your household?

8. To which gender identity do you most identify?

- ○ Female
- ○ Male
- ○ Transgender Female
- ○ Not listed
- ○ Transgender Male
- ○ Gender Variant / Non-conforming
- ○ Prefer not to answer

* 9. Please select up to five health challenges you face.

- ☐ Cancer
- ☐ Diabetes
- ☐ Overweight / Obesity
- ☐ Lung disease
- ☐ High blood pressure
- ☐ Heart disease
- ☐ Joint or back pain
- ☐ Mental health issues
- ☐ Other (please specify)
- ☐ Alcohol overuse
- ☐ Drug addiction
- ☐ Stroke
- ☐ Physical abuse
- ☐ Mental abuse
- ☐ Verbal abuse
- ☐ I do not have any health challenges

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* 10. What types of health screenings or services are needed to keep you and your family healthy? (Check up to 5)

- [ ] Blood pressure
- [ ] Cancer
- [ ] Cholesterol
- [ ] Dental screenings
- [ ] Disease outbreak prevention
- [ ] Drug and alcohol abuse
- [ ] Eating disorders
- [ ] Emergency preparedness
- [ ] Exercise / physical activity
- [ ] Falls prevention for the elderly
- [ ] Heart disease
- [ ] HIV / AIDS & STDs
- [ ] Routine wellness check-ups
- [ ] Memory loss
- [ ] Mental health / depression
- [ ] Nutrition
- [ ] Prenatal care
- [ ] Quitting smoking
- [ ] Suicide prevention
- [ ] Vaccination / immunizations
- [ ] Weight-loss help
- [ ] Other (please specify)

* 11. Where do you get most of your health and wellness information?

- [ ] Doctor / health care provider
- [ ] Facebook or Twitter
- [ ] Family or friends
- [ ] Health department
- [ ] Hospital
- [ ] Internet
- [ ] Library
- [ ] Newspaper / magazines
- [ ] Radio
- [ ] School or college
- [ ] TV
- [ ] Worksite

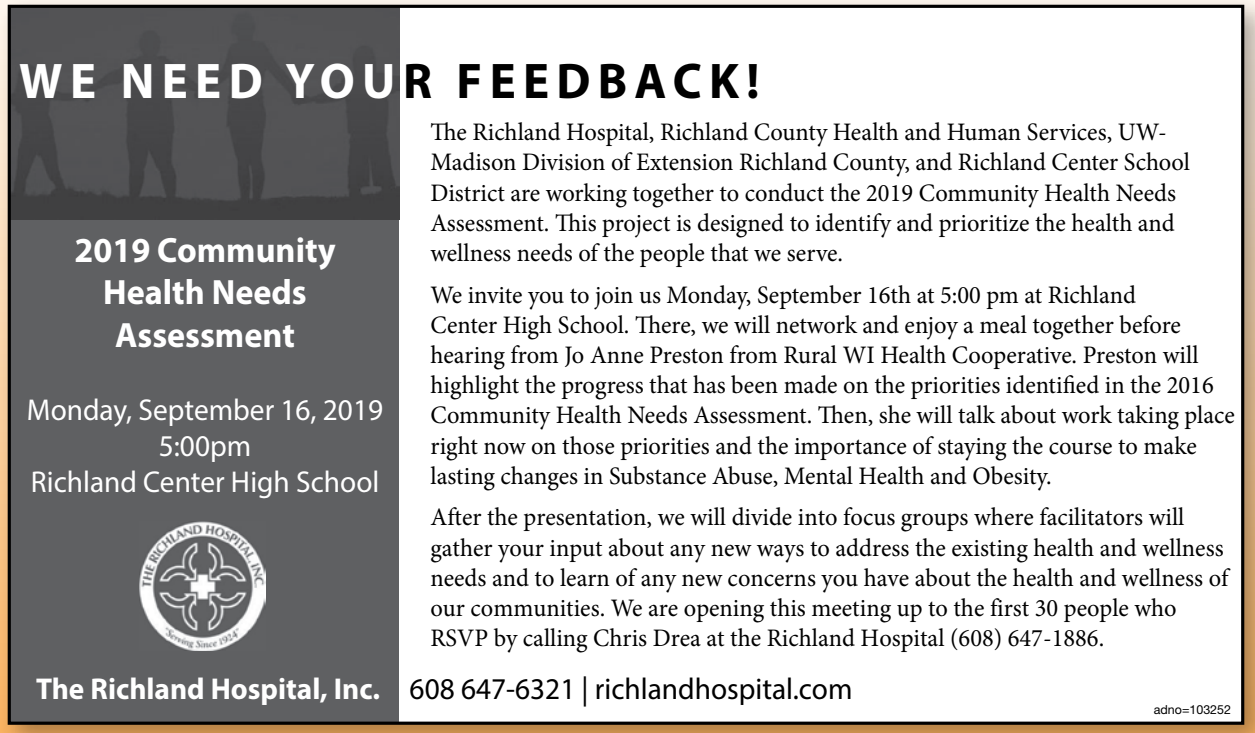
* 12. Please choose all the statements that apply to you.

- [ ] I exercise at least three times per week.
- [ ] I eat at least five servings of fruits or vegetables each day.
- [ ] I smoke cigarettes, cigars, a pipe, or vape.
- [ ] I chew tobacco.
- [ ] I use illegal drugs.
- [ ] I abuse or overuse prescription drugs.
- [ ] I have more than four alcoholic drinks (if female) or five (if male) per day.
- [ ] I have access to a wellness program through my employer.
- [ ] None of the above apply to me.

Pg 5

Appendix N

Newspaper Ad inviting community to participate in CHNA.



Appendix O: Focus Group Participants

Attendees to the Focus Group event at RCHS on Monday, September 16, 2019

Angela Metz	The Richland Hospital, Inc.
Betsy Roesler	Richland County Health and Human Services
Brandon Fetterly	UW Platteville – Richland
Bruce Roesler	The Richland Hospital, Inc.
Charles Burnley	The Richland Hospital, Inc.
Chelsea Wunnicke	UW-Madison Division of Extension Richland County
Chris Drea	The Richland Hospital, Inc.
Cindy Chicker	The Richland Hospital, Inc.
Jerry Gander	Dairy Consultant
Ginny Moore	The Richland Hospital, Inc.
Heidi Unbehaun	The Richland Hospital, Inc.
Henk Newenhouse	Community Member
Jarred Burke	Richland School District
Julie Prouty	Ithaca School District
Linda Gentes	Richland County Board
Marilyn Rinehart	Richland Community Free Clinic
Mary Nee	Community Member
Melody Wiinamaki	Richland Center High School
Mike Breininger	Southwest Partners
Robert Smith	Richland Medical Center
Ron Fruit	WRCO Radio
Rose Kohout	Richland County Health and Human Services
Marcia Carlson	The Richland Hospital, Inc.
Aleksandra Shepard	Wallace Cooper and Elliott Insurance Agency
Jenna Sebranek	Gundersen Health
Karee Gander	Community Member

MENTAL HEALTH PRESERVATION AND TREATMENT

Over the past 3 years, within this community area, what are the areas of strength and success you have seen with mental health?

- Senior Life Solutions
- HHS and RH Psych in person
- High School partner with Richland County HHS – shared mental health staff
- Senior Center – Dementia Activities
- University – student mental health – training staff and students
- Mental Health grant – Richland Center and Ithaca Schools
- Richland County Children and Family Advocacy Council
- NAMI Chapter coming to Richland Center

Are there areas that need additional support to be successful?

- Psychiatrists – Live providers needed.
- Health and Human Services – stigma (deficit)
- Wait time to be seen… loop counselor
- 72 Hour hold – (nuclear option)
- Call 911 in a crisis – police are not trained in mental health
- Court and Community monthly meetings. Hope for law enforcement. Participation none. Restorative justice.
- Senior Life Solutions – mental health therapist needed.
- Sources of Strength – Part of the mental health grant at Richland and Ithaca Schools.
- Volunteers from the community caring, positive and connected.
- Self-care. Prevention – Fast Support – before medication
- School board Bullying Policy.
  - Definition
  - Technology to limit / oversee
  - Social media
  - Parents
- Addiction to social media
- Fear of singled out / left out
- Parents want students to have access
- Delayed gratification
- Professional interaction - Support in your defense.
- Vaping believed to be a healthy alternative to smoking
- Self-medication / stimulant
- Vaping. Alcohol. Medication. Adderall. Dew.

Are there any new initiatives that we should be considering?

- Parent education
- Teach healthy coping skills – youth and general
- Poverty – Advertise help and costs – insurance - programs to pay.
- Youth and Family Initiative – More volunteers. Next?
- Church affiliations
- Other numbers vs. 911 for trauma. Publicize it. 211, Suicide #, HHS Crisis Line, App for this?
- Farmer Mental Health Resource Grant
- Students and universities help with challenges
- "Drop-In" center – parents and kids, extension of HHS
- Boys and Girls Club
- Churches work with seniors
- Community Service
- Activity bus
- Support after school activities

SUBSTANCE ABUSE PREVENTION AND TREATMENT

Over the past 3 years, within this community area, what are the areas of strength and success you have seen with mental health?

- Increased awareness
- Medical professionals are more cautious about prescribing narcotics.
- There is more training for medical staff about substance abuse
- More awareness nationally
- Some doctors are trained to provide addiction medicine
- Coalitions have been developed. There is an engaged citizenry interested in changing culture.
- Richland Center School District completed the Youth Risk Behavior Survey (YRBS) which gives us local data.
- There is more grant funding available locally and regionally to help.
- We have a Richland County Drug Court.
- Compliance Checks
- Awareness – Mock Crash was helpful.
- Presentations provided about how brain development is affected by drinking young.
- Some shift in thoughts, but it is slow. Still a mentality of getting caught or having an accident being worse than the long lasting effects of youth substance use.
- Dry graduation parties. Once was unheard of. Today it is seen more.
- Parents Who Host, Lose the Most

Are there areas that need additional support to be successful?

- Continue to educate people about what it means, "Parents Who Host, Lose the Most". Don't stop because we think it is hardwired.
- Family support for dysfunctional families so that substance abuse can be prevented.
- Youth and Family Initiatives can help families re-socialize to a better / healthier culture.
- If a new family moves into the area, put them in touch with a mentor family to set up a situation that highlights what we want to be the social / behavioral norms.
- Improve the MOU relationship between schools and law enforcement so that more information can be shared to better help kids who may have had a rough time and need a little extra tolerance or help because of a situation they experienced.
- MAPPA – Multi Agency Public Protection Arrangements is a framework that joins up the agencies who manage offenders. Could this model be used to better support at risk kids?
- Ask the state to raise the alcohol tax which is very low. Use the tax dollars to fund treatment and prevention.
- Create and use a consistent message that when planning a social event, alcohol does not need to be a part of the event.
- Improve the help available to women who are pregnant and have substance abuse issues. Doctors can call HHS, but what happens after that?
- Help bring the Sober House to our community to help those wanting to get sober get the support they need to continue to fight.
- Educate at a younger age to help kids understand the differing genetic risks some have. Not all are affected by substances the same. Prevention through education.
- No standards in place for eCigarettes. People can put anything they want into them.
- Vaping is not better than smoking. Educate about the risks. Vaping is a leading cause of smoking.
- Find ways to overcome the stigma of past substance abuse.
- People with a history of substance abuse struggle to get help.
- Getting anyone help with substance abuse is tough. It is based on insurance availability.
- Some may have to go a great distance for help.

- Government is putting more money towards this.
- There is a link between substance abuse and mental health.
- We can catch kids struggling before they turn to substances to self-medicate.
- Lack of mental health counseling available.
- Many healthcare facilities have gone away from providing mental health (inpatient) because it is cost prohibitive to the point of closing facilities down. There is also a shortage of mental health providers.
- Richland Center School District is researching options of possibly having mental health services at school. Dental services at school currently.
- Peer counseling training for kids at school and for adults. Sometimes something as simple as saying "How are you doing?" can stop suicidal thoughts.

Are there any new initiatives that we should be considering?

- Support the work being done by the Healthy Communities Grant
- Sources of Strength.
- Screenings are also available as part of this grant.
- Richland Hospital is beginning a project with Wisconsin Voices for Recovery called ED 2 Recovery.
- Prevention is much more cost effective than treatment. We need to find ways to educate, support, and improve parenting. Change the attitudes about what is happening at home.
- Doctors working side by side with counselors or other mental health providers to create an easy access to mental health services and to create a trusting relationship right away.
- Is there a way to create a care team wrap around to strengthen care?
- Setting up better coordination of care to create standards that allow doctors to know about and discuss follow-up care or how it is going?
- Break down barriers that make is difficult to create a care team.

OBESITY PREVENTION AND TREATMENT

Over the past 3 years, within this community area, what are the areas of strength and success you have seen with mental health?

- Community garden. Transitioned to park department
- Safe routes to school
- More stories about exercise and activity
- Better availability of good food choices
- Opportunities / options to be active
- Richland FIT partnership with GRACE
- More healthy options at concession stands
- More awareness of obesity as a problem
- Availability of unsweetened beverages
- Farmers Market can use SNAP (Supplemental Nutrition Assistance Program?)
- Increase awareness of the impact of mental health
- Increased CSA (Community Supported Agriculture?)
- Richland Rocks

Are there areas that need additional support to be successful?

- What is "Normal" re: obesity? Especially in children?
- Increase in trust of caring. Willingness to help. Not just critical.
- Senior Meal Sites – food is donated and meal is not great quality.
- Improve Safe Routes to School. Bike routes.
- Help community leaders realize the impact of messages regarding health.
- Availability of good food – location and variety
- How to deliver message of obesity – negative blowback
- Give overweight people value
- Simple tools to achieve and communicate
- Senior citizens / GRACE others (food stands) Recognize choices and influence
- Mindset around exercise – everyone can
- Champion example – media portray larger people

Are there any new initiatives that we should be considering?

- With Richland Hospital / Richland Medical Center merger, tackle obesity – Diabetes Management Prevention
- New campus for RH – combine hospital and exercise opportunities
- Media needs to be out there with bits of information
- Food for Life – reinvigorated
- Culture where food is medicine
- Expand community garden
- Food Pantry connect to CSA & healthy options
- Allow dietitians to participate
- Snacks at home
- Partnering with businesses
- Involved in initiatives. WI Active Communities – better and safer options
- Transportation – outlying exercise equipment and parks.

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