

COMMUNITY HEALTH IMPROVEMENT PLAN 2022-2024



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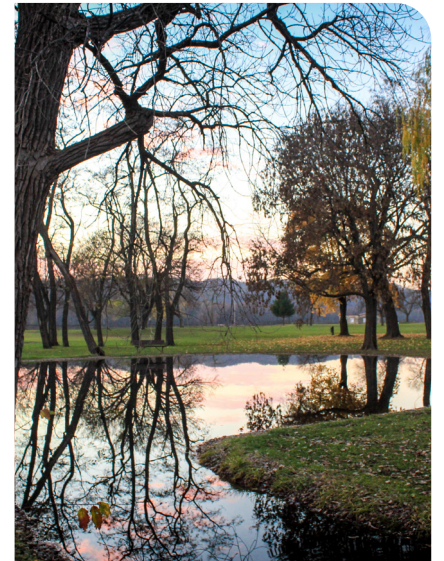
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*The 2022-2024 Community Health Improvement Plan
was provided for review and formally approved by
Crossing Rivers Health Board of Directors on April 18, 2022.*

Purpose

The purpose of the Community Health Needs Assessment (CHNA) is to identify and prioritize the health and wellness needs of individuals in the Crossing Rivers Health service area, including Clayton and Allamakee Counties in Iowa and Grant and Crawford Counties, in Wisconsin. All not-for-profit hospitals are required to conduct a needs assessment every three years and adopt a Community Health Improvement Plan (CHIP), such as this, to meet the identified health needs under the Affordable Care Act, IRS Code 501(r)(3). This process is a primary tool used to determine healthcare organization's community benefit plan, education, outreach, and services needed to address health needs affecting our residents.

Health departments must regularly and systematically, collect, analyze and make available information about the health of the community (Wisconsin State Statute 251.05). This includes statistics on health status, community health needs and epidemiological and other studies of health problems. Health departments are also required to develop public health policies and procedures which involve engaging policymakers and the general public to determine and develop a Community Health Improvement Plan every five years. The required process directly aligns with Crawford County Health & Human Services mission to promote and strengthen the safety and wellbeing of Crawford County residents by building hope and health for a lifetime.

Partners

- Aging and Disability Resource Center of Eagle Country
- Crawford County Health & Human Services
- Crossing Rivers Health
- UW-Madison Extension Crawford County
- Crawford County Behavioral Health Coalition

Population

While the identified partners may have unique populations or service areas, the Community Health Improvement Plan primarily focuses on addressing the needs within Crawford County, WI.

Process

Collaborative partners and other regional healthcare and resource agencies joined forces to conduct a community health needs assessment in 2021. The efforts resulted in a shared Community Health Improvement Plan, outlining goals and tactics designed to address the needs, gaps and barriers to services and wellness identified through the CHNA.

SWOT Analysis



Hospitals and partners' efforts to address community health needs may be affected by a wide array of strengths, weaknesses, opportunities and threats, all of which impact their individual and collective ability to positively impact health and wellness.

The consortium members agreed upon a number of factors in each of the following areas:



Weaknesses

- Limited local mental health resources
- High cancer, diabetes, obesity, heart disease substance use rates
- Limited transportation
- High deductible health plans
- Culture of poor eating habits
- Culture of heavy and binge drinking
- Limitations of data
- Limited staff availability for outreach
- High Poverty rate/low living wage
- Aging population
- Narrowing networks
- Access to dental care for Medicaid population
- Limited cultural diversity and acceptance
- Staff burnout and retention
- Access to childcare
- Wait times for specialty care
- Lack of time, ability, desire to change behaviors and lead a healthier life
- Low community engagement in education and health improvement efforts
- Communication between health facilities, providers, resources



Threats

- ⚡ Increase in Sexually Transmitted Diseases
- ⚡ Social isolation
- ⚡ Unaddressed mental health issues
- ⚡ Decline in reimbursement
- ⚡ Limited access to mental health services
- ⚡ Limited access to dental services for Medicaid population
- ⚡ Lack of time, ability, desire to change behaviors and lead a healthier life
- ⚡ Aging, declining population
- ⚡ Disproportionate affect of poverty and chronic conditions on certain populations, including young and elderly
- ⚡ Healthcare workforce shortages
- ⚡ Insurance limitations
- ⚡ Low immunization rates
- ⚡ Mistrust of health organizations and guidance
- ⚡ Governmental policy regulation
- ⚡ Culture of heavy alcohol consumption
- ⚡ Supply chain issues
- ⚡ Substance misuse
- ⚡ Preventative care not a priority
- ⚡ Lack of transportation (including public)
- ⚡ Lack of awareness of community resources
- ⚡ Affects of COVID-19 on population and healthcare systems



Strengths

- + Multiple healthcare options within 45 miles
- + Increase in some healthcare services available locally ie: specialty services, telemedicine
- + Quality primary care providers
- + Healthcare facility and infrastructure improvements
- + Improved recreational opportunities
- + Emergency preparedness and response for the communities' benefit
- + Electronic medical record is improving quality of data available
- + Medical community is strong and helps patients find appropriate care
- + Number of uninsured declining
- + Wide variety of county resources available
- + Safe, tight knit communities
- + High quality educational systems



Opportunities

- Increase community involvement, education and outreach efforts
- Grant funding and collaboration
- Increase access to primary care
- Prevention and early intervention
- Further reduce stigma of mental health
- Continued growth in telehealth, homecare, and alternative treatment options
- Improve patient navigation, literacy, and advocacy
- Encourage diversity and acceptance
- Pandemic recovery efforts - transitioning to a new normal
- Strengthen community mental health coalition
- Need for more specialty care
- Improve access and timeliness of mental health treatment and resources
- Expand and improve substance abuse resources
- Expand childcare options
- Partner with local employers

Prioritized Health Needs

Prioritized Health Needs

The collaborative partners involved in this Community Health Needs Assessment process share a common vision of improving the health and wellness of their communities, and beyond. Each participating organization has different resources, work with a different set of specific community attributes, and each will ultimately address community health needs in somewhat different ways. Nevertheless, the partners agree on the following, identified health needs listed below:

Empowering people through awareness and education

- Reduce/eliminate barriers to access
- After hour care
- Transportation
- Creating opportunities for screenings/early intervention
- Mental Health
- Suicide
- Cancer
- Diabetes
- Sexually Transmitted Diseases
- Alzheimer's/Dementia
- Cardiovascular disease/Stroke
- Providing health and wellness education
- Reducing the stigma of mental health
- Providing parenting education



Creating a healthy environment and a culture of wellness across the lifespan

- Promote healthy eating, active living, and healthy choices
- Increase access to healthy foods and activities
- Increase education and access to immunizations
- Engage in injury awareness activities, including ergonomics
- Support prevention of drug and excessive alcohol use
- Support opportunities to decrease social isolation
- Promote diversity, equity and inclusion



Connecting people to services and resources

- Improve patient advocacy and healthcare literacy
- Increase access to clinical services
- Mental health
- Preventive services
- Family medical care
- First-trimester care
- Alzheimer's care
- Diabetes care
- Specialty care
- Offer important community services
- Smoking cessation
- Pregnancy, labor and delivery classes
- Free or low-cost health and wellness classes
- Senior specific programs
- In-network dental providers for Medicaid patients
- Improve access to childcare services



Next Steps

The community health needs identified in this report are shared throughout our neighboring counties, and consortium members will all create their own individualized Community Health Improvement Plan with goals and specific measurable objectives.

It is the intent of the consortium partners to collaborate further and combine resources to address specific needs, whenever possible.

However, the leadership of each healthcare organization will set their own priorities, determine their own level of urgency associated with each need, evaluate their own communities' strengths and weaknesses and readiness, consider their own additional potential community partners, and determine how best to utilize their own existing and future resources to address these identified issues.



Primary Priority: MENTAL HEALTH

Background:

Mental and behavioral health concerns, including psychiatric disorders, other problems with mental and social well-being such as problems with adjustment, anxiety, depression, coping, behavior etc. have been identified as needs that continue to present issues for individuals locally and nationally.

The wide array of challenges related to mental and behavioral health include education, awareness, access to available services and a need for expanded services, as well as cultural, environmental and other factors that pose issues locally, across all demographics.

Data points:

(example)

Mental Health Days

Grant County | 4.2
Crawford County | 4.2
Wisconsin | 4

Clayton County | 3.7
Allamakee County | 3.8
Iowa | 3.5

Suicide

Grant County | 14
Crawford County | 19
Wisconsin | 15

Clayton County | 13
Allamakee County | 18
Iowa | 15



Stakeholders were later asked what they felt were the top 4 barriers to better mental health treatment in our community. (Choices provided).

- 1 Lack of mental health professionals
- 2 Lack of available services
- 3 Cost
- 4 Stigma



Target Populations

- Major employers
- Schools
- Youth
- Entire community



Partners

- Mental Health Coalition
- School Districts

Considerations

- Transportation
- Diversity, equity, inclusion
- Reducing social isolation



Short-Term Goal

Strengthen existing coalition, increase awareness and education efforts and increase access to existing services.

Long-Term Goal

Reduce poor mental health days and suicide and improve access to tools, resources and services to improve safety net, coping and resiliency skills of residents within our service area.

STRATEGY

Empowering people through awareness and education

MENTAL HEALTH

GOAL: Training community members Collaborative and Stepped Care in Mental Health, or COMET, approach to intervene when encountering someone in a vulnerable space and help shift mind-set

OBJECTIVE 1: UW-Madison Crawford County Extension will implement four COMET training sessions by August of 2023

TACTICS:

- Reach out to major employers to identify individuals to participate in COMET training
- Partner with farming business within the county to host COMET
- Provide virtual and in-person training for interested community members

MENTAL HEALTH

GOAL: Increase suicide prevention efforts and reduce stigma

Objective 1: Crossing Rivers Health QPR trained staff will train at least 10 additional community members to facilitate Question, Persuade, Refer (QPR) by May of 2023

TACTICS:

- Reach out to major employers and community organizations to identify individuals to complete the train the trainer

Objective 2: Each QPR trainer will host at least two community training sessions between July of 2023 - December of 2024

TACTICS:

- Trainers to host session for interested community groups, schools, businesses, etc.
- Provide virtual and in-person training for interested community members

STRATEGY

Connecting people to services and resources

MENTAL HEALTH

GOAL: Strengthen Mental Health Coalition

OBJECTIVE 1: Create a sustainable coalition structure by Spring of 2023

TACTICS:

- Request point person and commitment from each of the participating agencies
- Appoint facilitators for key roles

OBJECTIVE 2: Develop a strategic plan by December, 2023

TACTICS:

- Incorporate strategies to address community needs identified through the CHNA.
- Conduct depression and suicide screening assessment training for EMS, law enforcement, etc.
- Identify Alcohol and Other Drug Abuse (AODA) efforts
- Increase access to care in non-traditional settings, including schools, businesses, etc.

OBJECTIVE 3: Implement two key strategic plan initiatives by December, 2024

MENTAL HEALTH

GOAL: Crossing Rivers Health will provide integrated primary care services to promote a whole-person care delivery model

OBJECTIVE 1: Increase access to behavioral health services and social support in the primary care clinics

TACTICS:

- Build primary care clinic with integrated behavioral health by Spring, 2023
- Research need and effectiveness of social worker support in the primary care setting

STRATEGY

Creating a healthy environment and a culture of wellness across the lifespan

MENTAL HEALTH

GOAL: Strengthen network of support for school districts to increase mental health efforts in all area schools

OBJECTIVE 1: Invite school representation to join mental health coalition

OBJECTIVE 2: Mental Health Coalition will assist schools in developing and maintaining policies and framework for ongoing education, suicide prevention and response

TACTICS:

- Review current policies and guidelines to ensure they include best practices in preventing and addressing suicide within area school districts by Summer of 2024
- Develop mental health awareness, education and QPR curriculum for students
- Incorporate mental health awareness efforts into existing and new school events

Priority: Empowering people through awareness and education

ALZHEIMER'S, DEMENTIA AND BRAIN HEALTH

Background:

Alzheimer's Disease is the fourth leading cause of death in Crawford County. Even though there is no cure for this disease, early intervention and prevention methods such as living a healthier lifestyle and earlier screenings could help slow the progression.



Target Populations

- Primary target population 60 and older
- The entire community



Partners

- Crossing Rivers Health
- Mayo Clinic Health System - Prairie du Chien
- Gundersen Clinic - Prairie du Chien
- Aging and Disability Resource Center of Eagle Country

Considerations

- Transportation
- Diversity, equity, inclusion

Data points:

Leading Cause of Death- Grant & Crawford Counties

1. Cancer
2. Heart Disease
3. Lung Disease
4. Alzheimer's Disease
5. Unintentional Injury
6. Diabetes



Short-Term Goal

Increase the number of completed memory screenings.

Long-Term Goal

Create a community mindset that brain health is as important as physical health. Community culture of early intervention and detection.



Stakeholders were given list of health conditions and disabilities and asked, "Which of these conditions have the most impact on the quality of life in our community?"

- 1 Depression and anxiety
- 2 Addiction
- 3 Memory loss/Alzheimer's disease and dementia

STRATEGY

Empowering people through awareness and education

ALZHEIMER'S, DEMENTIA, BRAIN HEALTH

GOAL: Educate stakeholders on importance of screenings and early intervention

OBJECTIVE 1: Each partner will Increase the number of completed memory screenings by 10% by 2024

TACTICS:

- Educate clinics and providers on importance of memory screening
- Educate community members on importance of screenings and self-advocacy

GOAL: Complete Dementia training at least two times per year throughout all of Crawford County to focus on becoming a more dementia friendly community

OBJECTIVE 1: Create a calendar of trainings to be provided starting May, 2022

TACTICS:

- Schedule and partner with local organization and businesses to secure locations and marketing of the event

GOAL: Complete Dementia education and awareness in the high school districts through education classes by offering Dementia Friendly Training

OBJECTIVE 1: Meet with school districts to introduce the Dementia Friendly Training as well as the menu of other options of training

TACTICS:

- Schedule trainings within each school district

Priority: Empowering people through awareness and education

COLLABORATIVE COMMUNITY CAMPAIGNS

Background:

For the prevention of prevalent morbidity, mortality, behavioral and mental health issues, there is a need to inform, educate and increase literacy and self-advocacy.

Efforts will also be made to address the identified need to improve accessibility of the medical records and navigation of healthcare technology/resources and promote advocating for and owning one's own health. A focus on health maintenance, continuity of care, preventive care, and providers and patients relationships will be key.

Data points:

Mammography Screenings

Grant County		39%
Crawford County		53%
Wisconsin		49%
Clayton County		51%
Allamakee County		56%
Iowa		52%

Leading Cause of Death- Grant & Crawford Counties

1. Cancer
2. Heart Disease
3. Lung Disease
4. Alzheimer's Disease
5. Unintentional Injury
6. Diabetes

Top Five Cancer Diseases- Crawford

1. Lung
2. Breast
3. Prostate
4. Colorectal
5. Leukemia



Respondents were asked to state an answer in their own words to, "What educational program do you think should be provided in your community?"

Over 31% included comments regarding mental health, suicide awareness, coping, or similar.

Over 20% of responses mentioned healthy eating, exercise, daily habits.

Over 16% mentioned parenting, family, or child development.



Target Populations

- Residents of screening gender/age
- Elderly populations
- Technologically disadvantaged population



Partners

- Area Clinics
- Mental Health Coalition
- State and national organizations
- Crawford County Health & Human Services
- UW-Madison Extension - Crawford County
- Aging and Disability Resource Center of Eagle Country

Considerations

- Transportation
- Diversity, equity, inclusion
- Medical record accessibility, interoperability and continuity of care



Short-term Goal:

Establish the framework and identify partners for collaborative campaigns.

Long-Term Goal:

Increase awareness, literacy, and utilization of preventive care to decrease morbidity, mortality and improve awareness and utilization of mental health care and treatment.

Potential Focus topics:

Diabetes
Breast cancer
Colorectal cancer
Lung cancer
Cervical cancer
Prostate cancer
Mental Health
Heart Disease
Drug/Alcohol Use
Parenting skills and resources

STRATEGY

Empowering people through awareness and education

COLLABORATIVE COMMUNICATION CAMPAIGNS

GOAL: Develop the calendar for implementation

OBJECTIVE 1: Establish the framework for the communication campaigns by June 1, 2022

TACTICS:

- Research National Health Observance calendar, community events calendar
- Identify theme, content, media channels and events

OBJECTIVE 2: Contact community health partners to confirm participation

TACTICS:

- Schedule meeting to plan campaign
- Establish roles and budget
- Confirm implementation timeframe

OBJECTIVE 3: Implement initial campaign, beginning July 1st, 2022 with each of the subsequent four campaigns being implemented approximately every six months thereafter

Priority: Connecting People to Services & Resources

NO WRONG DOOR INITIATIVE

Background:

Organizations have many services to offer in Crawford County, yet it is difficult for individuals to find these resources and get connected. This priority is focused on connecting people to available services. There is a lack of knowledge between organizations knowing what each other offers as well as for individuals trying to find the services on their own.

Data points:

What Services or Resources Are Lacking in Our Community

- Mental health screening and treatment
- Availability of specialists in smaller communities
- Education - wellness and preventative health resources
- Assistance in navigating the healthcare system
- Access to fresh produce and healthy food options



Target Populations

- Resource agencies
- Social and service organizations



Partners

- Crawford County Health and Human Services
- UW-Madison Extension - Crawford County
- Area service and civic organizations
- Collaborative healthcare providers

Considerations

- Transportation
- Diversity, equity, inclusion



Short-Term goal

Create a strong network amongst public and private service organizations and a hub for agencies and community members to connect to education, resources and services.

Long-Term Goal

Improve awareness and utilization of available services and resources.

Barriers Mentioned Most Often

Insurance limitations or lack of insurance

Lack of behavioral and mental health resources

Lack of public transportation

Lack of patient advocates to help navigate healthcare, services, resources and insurances

Lack of access to specialists

Limited healthcare services within rural communities

Difficulty in finding and staying with a long-term provider

Lack of health education offered and/or lack of public health literacy

Lack of wellness and health education

People not seeking healthcare when needed (insurance deductibles, out-of-pocket costs, perceived hoops to jump through, etc.)

Culture of bad habits including: poor nutrition, lack of exercise

Lack of access to year-round physical activity opportunities

Transition to telehealth/virtual services, and online scheduling makes it difficult for older population

Misinformation

STRATEGY

Connecting People to Services & Resources

NO WRONG DOOR INITIATIVE

GOAL: Strengthen knowledge and communication between community organizations and within organizations so that individuals will be connected to local services that they need to live a healthy life

OBJECTIVE 1: Update, modernize, and promote the community resource guide

TACTICS:

- Utilize current process to update existing guide until the new hub can be developed

OBJECTIVE 2: Starting in 2022, host quarterly/semi-annual communication between organizations to share current services and resources

TACTICS:

- Identify key stakeholders to attend meetings regularly
- Hold a network meeting for organizations and businesses

OBJECTIVE 3: Connect the community to the services and resources they need

TACTICS:

- Plan the framework for an online resource hub, available for agencies and community members to find resources and services
- Develop an online hub connecting agencies and community members to the most current resources and services, including online referral and request forms
- Develop process to update it by all agencies with the ability for adding services and events real-time

OBJECTIVE 4: Promote the hub to create awareness and regular use

TACTICS:

- Develop a campaign that highlights the hub and the benefit

Priority: Creating a healthy environment and culture of wellness across the lifespan - HEALTHY ROOTS COALITION

Background:

The Healthy Roots Coalition is a broad cross section of community members working to create a culture of wellness in Crawford County. The mission is to promote healthy living across the lifespan for all residents with a focus on community level changes that impact health. The vision is for everyone to have an equal opportunity to be healthy.

Primary focus was to increase access to active places and spaces, healthy food options and community resources. This coalition started in 2012 and stopped meeting in 2020 due to the COVID-19 pandemic.

Data points:



The four environmental factors respondents indicated made the biggest impact on their quality of life:

- 1 Culture of unhealthy eating
- 2 Limited access to healthy foods
- 3 Shortage of health professionals/service
- 4 Limited access to healthy recreation alternatives



The most prevalent causes of death in our region that concerned survey respondents the most were:

- 1 Cancer
- 2 Heart disease
- 3 Suicide
- 4 Stroke



Target Populations

- Community Governments
- Area businesses
- School Districts



Partners

- Crawford County Health and Human Services
- UW-Madison Extension - Crawford County
- Crossing Rivers Health
- Mayo Health System
- Gundersen Health System
- School Districts within the service area

Considerations

- Transportation
- Diversity, equity, inclusion



Short-Term Goal

To reestablish the Healthy Roots Coalition to improve the environment and culture which impact healthy lifestyle.

Long-Term Goal

Improve policy, promote leading by example and increase access to active places and spaces, healthy food options and community resources.

STRATEGY Creating a healthy environment and culture of wellness across the lifespan

HEALTHY ROOTS COALITION

GOAL: Healthy Roots coalition will partner with public and private community organizations to impact healthy environment and the culture of wellness so that the healthy choice is the easy choice for community members

OBJECTIVE 1: Reinstate the Healthy Roots coalition by Fall of 2022 to focus on strengthening healthy environments in the communities we serve

TACTICS:

- Recruit a diverse team to be part of the coalition including past and new members
- Develop goals and a work plan that takes into consideration the Community Health Needs Assessment and Improvement Plan for the next three years
- Meet regularly and report to the CHIP team

Priority: Creating a healthy environment and culture of wellness across the lifespan- SUBSTANCE ABUSE PREVENTION

Background:

There is a need to increase prevention efforts related to substance abuse for all ages, primarily for area youth. A focus will be encouraging a culture of healthy lifestyle and activities that do not incorporate alcohol consumption.



Target Populations

- Youth
- Adults



Partners

- Mental Health Coalition
- Law Enforcement
- First responders
- Schools
- Children's Advisory Board

Considerations

- Transportation
- Diversity, equity, inclusion

Data points:

Excessive Drinking

Grant County		28%
Crawford County		26%
Wisconsin		27%
Clayton County		25%
Allamakee County		23%
Iowa		26%

Alcohol-impaired driving deaths

Grant County		33%
Crawford County		29%
Wisconsin		36%
Clayton County		33%
Allamakee County		55%
Iowa		27%



Short-Term Goal

Increase education and prevention efforts as well as parental awareness of substance use and abuse.

Long-Term Goal

Reduce excessive drinking, substance abuse and alcohol-impaired driving deaths in the service area.



Top five behavioral factors that affect quality of life in the community:

- 1 Other drug use
- 2 Drinking and driving
- 3 Lack of parenting skills
- 4 Misuse of prescription drugs
- 5 Binge/heavy drinking

STRATEGY Creating a healthy environment and culture of wellness across the lifespan

SUBSTANCE ABUSE PREVENTION

GOAL: Decrease substance abuse through increased prevention efforts

OBJECTIVE 1: Increase opportunities for involvement in the community as a deterrent to substance abuse

TACTICS:

- Collaborate with Crawford County Children's Advisory Board (CAB) to identify gaps that exist in the community for youth wellness
- Participate in regular Children's Advisory Board meetings
- Identify available community youth programs and connect to the Hub to increase awareness of opportunities.
- Promote community events absent of alcohol

OBJECTIVE 2: Increase parental awareness of risky behavior and/or drug use for preteens and teenagers.

TACTICS:

- Increase awareness through community interactive display (Hidden in Plain Sight)
- Partner with schools to increase parental participation

OBJECTIVE 3: Screen for unhealthy alcohol use in the primary care settings

TACTICS:

- Education to providers about resources
- Connect individuals who identify with risky behaviors to appropriate resources

Areas not addressed

- Childcare - Community Childcare Taskforce formed which collaborative partners are represented on.
- Transportation - While considered a barrier to overcome in CHIP strategies and goals, there is county Transportation Commission established.

Community Health Data Sources

County Health Rankings

[Grant County](#)
[Crawford County](#)
[Clayton County](#)
[Allamakee County](#)

Iowa Department of Public Health - Health Indicators Report

[Clayton County](#)
[Allamakee County](#)

[WI Interactive Statistics on Health \(WISH\)](#)

Wisconsin Public Health Profiles

[Grant County](#)
[Crawford County](#)

[Health Resources Services Administration \(HRSA\)](#)

[Wisconsin Behavioral Risk Factor Survey](#)

SWCAP/Coulee CAP Needs Assessment

Not available for Grant County
[Crawford County](#)

Burden of Tobacco

<http://www.dhs.wisconsin.gov/tobacco/data.htm>
<https://www.dhs.wisconsin.gov/publications/p43073.pdf>

[Health Care Professional Shortage Areas](#)

[Workforce Profile Data](#)

Environmental Health Profile

[Crawford County](#)
[Grant County](#)

[Wisconsin Food Security Project](#)

[Obesity, Nutrition, and Physical Activity in Wisconsin](#)

[Gundersen Health System 22-County Health Indicator Report](#)

[Allamakee County Community Health Needs Assessment Report](#)

[Clayton County Community Health Needs Assessment Report](#)

[Grant County Community Health Needs Assessment Report](#)

[Crawford County Community Health Needs Assessment Report](#)