CHIPPEWA COUNTY

HEALTH & HUMAN SERVICES BOARD

REGULAR MEETING

JUNE 17, 2021

CHIPPEWA COUNTY COURTHOUSE, RM 302

7:45 AM

1. CALL TO ORDER

2. ROLL CALL

Attendee Name	Organization	Title	Status	Arrived
John Halbleib	Chippewa County	Citizen Rep (Chair)	Present	
Don Hauser	Chippewa County	District 6 (Vice-Chair)	Present	
Harold Steele	Chippewa County	District 1	Present	
Tom Thornton	Chippewa County	District 5	Present	
Charlene Kervina	Chippewa County	District 10	Present	
Kari Ives	Chippewa County	District 12	Present	
Keith Tompkins	Chippewa County	Citizen Rep	Present	
Stacey Sperlingas	Chippewa County	Citizen Rep	Absent	
Jenny Happel	Chippewa County	Citizen Rep	Present	

Others Present: Angie Weideman County Health Officer/Public Health Director; Tim Easker, Human Services Director; Pauline Spiegel, Human Services Administrative Assistant; Sarah McQuillan, Public Health Fiscal Manager; Audra Knowlton, Public Health Administrative Assistant; Randy Scholz, County Administrator; Ashley Bailey, Fiscal Manager; Public Health Komi Modji; Leslie Fijalkiewicz, ADRC Division Manager; Friend of Public Health: Chris Vetter

3. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

There were no members of the public wishing to be heard.

4. CONSENT AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Tom Thornton, District 5
SECONDER:	Kari Ives, District 12
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Tompkins, Happel
ABSENT:	Sperlingas

1. Approve the agenda
2. Approve the Minutes

   Health & Human Services Board - Regular Meeting - May 20, 2021 7:45 AM
3. Schedule next meeting date - July 15, 2021

5. REPORTS

1. Minutes of Advisory Committees/Boards/Councils (Review)
   The minutes of May 13, 2021 Aging & Disability Resource Center Board Meeting, May 14, 2021, Professional Advisory Council, and May 25, 2021 Criminal Justice Collaborating Council were reviewed and discussed.

   Additional discussion regarding the Aging & Disability Resource Center (ADRC) program ranking discrepancies/gaps between ADRC staff and the Board. ADRC Manager Leslie Fijalkiewicz addressed this, stating this was primarily due to 2020 (COVID) related anomalies. This ranking is considered one of the tools that would be utilized if program elimination decisions needed to be made. A suggestion was made to have a third ranking column that would be a consensus of the other two.

   RESULT: **DISCUSSED**

2. Annual "Friend of Public Health" Recognition - Angie Weideman
   Public Health Director Angie Weideman presented the Friend of Public Health Award for the Healthiest County to Play, which was awarded to Chippewa Falls Mayor Greg Hoffman and Leader Telegram Reporter Chris Vetter because of their outstanding partnerships with the County. She also shared some examples of their collaboration.

   RESULT: **DISCUSSED**

3. Community Health Assessment Results - Komi Modji
   Public Health Epidemiologist Komi Modji reviewed the results/summary of the 2021 Chippewa County Community Health Assessment and other information on the identified top health concerns.

   RESULT: **DISCUSSED**

4. Human Services Director's Program and Financial Report - Tim Easker
   The Human Services Director's Program and Financial Report was reviewed and discussed. Tim Easker provided budget updates of the Joint Finance Committee. There will be no additional funding for Children & Families but there is 4.7 million for Youth Justice (statewide), around one million for prevention, and some for law enforcement partnership training. Most of the proposed funding was eliminated. The 17-year-olds will not become part of the adult system.

   Easker highlighted several budget related items from the report including out-of-home and mental health placements and costs, noting there is a growing lack of available foster homes, and looking at ways to resolve this.

   RESULT: **DISCUSSED**

5. Public Health Director's Program and Financial Report – Angie Weideman
   COVID STATS
   - Worldwide: 177,105,723 cases; 3,834,719 deaths
   - United States: 33,499,190 cases; 600,656 deaths
   - Wisconsin: 611,844 cases; 7,230 deaths
   - Chippewa County: 7,508 cases; 4 hospitalized (291 total hospitalized to date); 94 deaths
   - States of California (3.8 million); Texas (2.9 million); and Florida (2.3 million) continue to have highest

number of cases
- India has 29.7 million cases and Brazil 17.6 million cases

VACCINE DASHBOARD
Wisconsin: 2.8 million first dose (49.2 percent); 2.5 million completed doses (44.6 percent)
Chippewa: 29,068 first dose (45.1 percent); 27,392 completed doses (42.4 percent)

OTHER COVID INFO
There has been a decrease in vaccinations. Establishing pop-up clinics in rural areas and doing outreach to the Hispanic and Hmong population. Working with large event organizers (e.g. Rockfest and Countryfest) for onsite vaccine clinics and also COVID testing.

Weideman highlighted several items from her report in the board packet.

Discussion on logistics and correlation of COVID information distributed to the Chippewa County public with CDC and State of Wisconsin.

RESULT:	**DISCUSSED**

6. BUSINESS ITEMS

1. Public Health 2022 Financial User Fees - Angie Weideman/Sarah McQuillan
Sarah McQuillan reviewed the Public Health financial user fees for 2022, showing and explaining any changes. She also requested approval for correcting the Medicaid consumer fee for 2021 since it is unlawful to bill for a Medicaid fee.

Public Health 2022 financial user fees approved along with also correcting the 2021 Medicaid fee wording.

RESULT:	**APPROVED [7 TO 0]**
MOVER:	Kari Ives, District 12
SECONDER:	Don Hauser, District 6 (Vice-Chair)
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Happel
ABSENT:	Sperlingas
AWAY:	Tompkins

2. Human Services 2022 Financial User Fees - Tim Easker/Ashley Bailey
Human Services Fiscal Manager Ashley Bailey reviewed the proposed 2022 financial consumer user fee changes and provided explanation for changes. The 2022 Human Services consumer fees approved as presented.

RESULT:	**APPROVED [7 TO 0]**
MOVER:	Harold Steele, District 1
SECONDER:	Kari Ives, District 12
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Happel
ABSENT:	Sperlingas
AWAY:	Tompkins

7. AGENDA ITEMS FOR FUTURE CONSIDERATION

8. ADJOURN

Meeting adjourned at 9:30 a.m.

RESULT:	**APPROVED [7 TO 0]**
MOVER:	Kari Ives, District 12
SECONDER:	Tom Thornton, District 5
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Happel
ABSENT:	Sperlingas
AWAY:	Tompkins

CHIPPEWA COUNTY

HEALTH & HUMAN SERVICES BOARD

REGULAR MEETING

MAY 20, 2021

WEBEX CONFERENCE CALL

7:45 AM

DUE TO THE COVID-19 PANDEMIC, THIS MEETING IS BEING HELD VIA WEBEX CONFERENCE CALL TO COMPLY WITH THE SOCIAL DISTANCING GUIDELINES. IF YOU ARE A MEMBER OF THE PUBLIC AND WISH TO SPEAK, PLEASE CALL THE PHONE NUMBER LISTED BELOW AND THE BOARD CHAIR WILL ACKNOWLEDGE YOU DURING THE PUBLIC COMMENT SECTION ON THE AGENDA.

IF YOU NEED TO EITHER MUTE OR UNMUTE YOURSELF DURING THE MEETING, PRESS *6.

MEETING PHONE NUMBER: 1-415-655-0001

MEETING NUMBER (ACCESS CODE): 182 844 2904

MEETING PASSWORD: 7816

1. CALL TO ORDER

2. ROLL CALL

Attendee Name	Organization	Title	Status	Arrived
John Halbleib	Chippewa County	Citizen Rep (Chair)	Present	
Don Hauser	Chippewa County	District 6 (Vice-Chair)	Present	
Harold Steele	Chippewa County	District 1	Present	
Tom Thornton	Chippewa County	District 5	Present	
Charlene Kervina	Chippewa County	District 10	Present	
Kari Ives	Chippewa County	District 12	Present	
Keith Tompkins	Chippewa County	Citizen Rep	Present	
Stacey Sperlingas	Chippewa County	Citizen Rep	Present	
Jenny Happel	Chippewa County	Citizen Rep	Present	

Others Present: Tim Easker, Human Services Director; Angela Weideman, Public Health Director; Audra Knowlton, Public Health Administrative Assistant; Randy Scholz, County Administrator; Paul Brenner, Chippewa County Senior Fiscal Manager; Nikki Hoernke, Community Health Planning and Promotion Specialist; Nikki Clements, Drug Free Communities Project Coordinator; Tom Diel, Recovery & Wellness Consortium Division Manager; Kyra Secraw, Children with Differing Abilities/Youth Justice Services Manager; Kari Kerber, Child Protective Services/Birth-3 Manager; Ashley Brott, Children, Youth, and Families Lead Worker; and Member of the Public: Lisa Mancl

3. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

Lisa Mancl thanked Weideman for connecting her with Komi Modji, Community Health Epidemiologist, for explanation of the local metrics on the website. Mancl voiced her concern on how the vaccine may affect

Minutes Acceptance: Minutes of May 20, 2021 7:45 AM (Consent Agenda)

children, and her concern on the push out there to vaccinate 12-15 year olds. She would like to see schools fully open in person for the next school year.

4. CONSENT AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 12
SECONDER:	Charlene Kervina, District 10
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Tompkins, Sperlingas, Happel

1. Approve the agenda

2. Approve the Minutes

   Health & Human Services Board - Regular Meeting - Apr 15, 2021 7:45 AM

3. Schedule next meeting date - June 17, 2021

5. REPORTS

1. Annual "Friend of Public Health" Recognition - Angie Weideman

   Public Health Director Angie Weideman presented the Friend of Public Health Award for the Healthiest County to Work, which was awarded to Kwik Trip and Nursing Homes in Chippewa County for exemplifying and modeling public health values in the community and supporting and encouraging others to be supportive of public health. Kristen Kelm, Community Health Division Manager worked a great deal with the nursing homes during the pandemic.

   Weideman shared examples of their partnership with the honorees. Honorees in (virtual) attendance were: Karen Davis and Jill Gengler-Chippewa Manor, Jennifer Burklund and Bambi Sikora-Cornell Health Services, Evan Powell-Kwik Trip.

   Also recognized (but not present): Megan Corcoran-Chippewa Veterans Home, Joseph Muench-Dove Healthcare in Bloomer, Cayci Wathke-Dove Healthcare in Chippewa Falls, Anna Henek-Meadowbrook, Brad Fogarty and Terry Hanley-Kwik Trip (Chippewa Falls), Angela Ames, Jay Ellingson-Kwik Trip (La Crosse).

   A “thank you” was extended to all for their collaboration during the pandemic.

RESULT:	**DISCUSSED**

2. Public Health Tobacco, Alcohol, and Other Drug Use in Youth Presentation - Public Health Staff

   Weideman gave a brief history of the Tobacco, Alcohol and Other Drug Use program. A video narrated by Kelsey Shuda, intern with the Chippewa County Public Health Department, was shared highlighting the Wisconsin WINS program and the Drug Free Communities (DFC) program. These programs address tobacco, alcohol and drug use in the youth within our community. Shuda reviewed the work that is being completed through partnerships to reduce use within youths.

Minutes Acceptance: Minutes of May 20, 2021 7:45 AM (Consent Agenda)

Information from the Youth, Risk, and Behavior Survey (YRBS) was shared. The program focuses on both middle school and high school. Contact has been made with schools to prepare for the next school year. The DFC grant contains local partners to address concerns within the community to create community change. Weideman shared the Preventure program was designed to be used for eighth graders, however, with the data collected, it was determined to begin the program in sixth grade.

RESULT:	**DISCUSSED**

3. Human Services Placement Data Presentation - Human Services Staff

Tom Diel presented on the Adult and Mental Health placements, which includes substance abuse. Diel highlighted DHS Chapter 51:15 which pertains to emergency detention, access to treatment, and determining the next course of action. Diel shared the different facilities utilized and their cost, compared out-of-home expenses, and the Institute for Mental Disease (IMD) expenses over the past several years.

Kyra Secraw presented on Youth Justice placements, which are governed by WI Statute 938. She highlighted Statute 938.13 and the Juveniles in Need of Protection or Services (JIPS), continuum of care options, out-of-home care and placement comparison, 2020 increase in mental health, delinquency, and disrupted guardianship or adoption. Secraw talked about why parents seek placement and the process in place along with the costs and budgets.

Kari Kerber presented on Child Protective Services, which is governed by Wisconsin Statutes Chapter 48, and what the Children's Code 48.01 consists of. The cases have increased over time due to methamphetamine or heroin use. They try to place children in foster care or treatment foster care when it is not possible to keep them in the home. Kerber shared the cost over the past several years.

Paul Brenner presented on the children out-of-home expenses compared to the total budgeted and the historical surplus/deficit in funding. Brenner noted the reduced loss in 2020 is due in part to getting funding from the CARES Act and less traveling expenses due to the pandemic.

Easker stated they are always looking at how to address the funding and meet the needs of the consumers. Human Services staff will also give this presentation to the County Board in June.

RESULT:	**REVIEWED**	**Next: 6/8/2021 6:00 PM**

4. Public Health Director's Program and Financial Report – Angie Weideman

COVID STATS

- Worldwide - 164,981,323 positive cases; 3,419,700 deaths
- United States - 33,027,220 positive cases; 587,875 deaths
- Wisconsin - 607,138 positive cases; 6,976 deaths
- Chippewa County - 7,422 positive cases, 0 currently hospitalized, 94 deaths
- States of California, Florida, and Texas continue to have the highest number of cases
- India has 25.7 million cases, which is higher now than Brazil at 15.8 million

VACCINE DASHBOARD

- Wisconsin: 2.6 million first does (45.7 percent); 2.3 million second does (39.8 percent)
- Chippewa: 27,375 first doses (42.3 percent); 25,055 second doses (38.8 percent)

Minutes Acceptance: Minutes of May 20, 2021 7:45 AM (Consent Agenda)

OTHER COVID INFO

- About two percent of the population vaccinated in Chippewa County have missed their second dose and Public Health encourages residents to get their second dose.
- The new CDC updated mask recommendations for individuals fully vaccinated was shared.
- When Weideman receives requests to provide COVID vaccinations at large events, she coordinates with Emergency Management Director Dennis Brown to request collaboration with the National Guard.

Weideman reported Epidemiologist Komi Modji will attend next month to share the Community Health Assessment (CHA) results.

Steele stated Public Health has done a fantastic job of getting out into the community and has kept their trust. Discussion was held on reaching out to trusted community leaders, churches, large organizations, etc. for support on the importance of getting vaccinated. Weideman stated schools has been a large advocate for supporting vaccinations. Outreach has been completed with area businesses and local partners to share the message about the importance of COVID vaccinations. ADRC has coordinated getting television spots to promote getting the COVID vaccine. Weideman encouraged leaders to take a picture when they get their vaccine and post on social media. Weideman has not seen difficulty in the community receiving the vaccine as Public Health is providing vaccine to the homebound. Public Health is looking at providing pop-up clinics over the next few months. The Epidemiologist has been looking at where the pockets are in the community to provide outreach for those not vaccinated.

Scholz congratulated Weideman on being awarded the “Be Your Best Award” through REALiving.

RESULT:	**DISCUSSED**

5. Human Services Director's Program and Financial Report - Tim Easker

The Human Services Director’s Program and Financial Report was reviewed and discussed. Easker brought attention to the Child Welfare Transformation. The Division of Children and Families goal of this process is to focus on enabling a strategic shift from serving children out-of-home, to serving more children and families in-home.

Easker brought attention to the Consumer/Caseload Data, specifically the Institute for Mental Disease (IMD) expenditures. Easker noted in March they had a record number of individuals in Winnebago costing the County $144,000 of their $300,000 IMD budget. Eighty percent of cases that went to Winnebago were due to methamphetamine usage and aggression.

RESULT:	**DISCUSSED**

6. BUSINESS ITEMS

7. AGENDA ITEMS FOR FUTURE CONSIDERATION

8. ADJOURN

The meeting adjourned at 9:46 am.

Minutes Acceptance: Minutes of May 20, 2021 7:45 AM (Consent Agenda)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Kari Ives, District 12
SECONDER:	Keith Tompkins, Citizen Rep
AYES:	Halbleib, Hauser, Steele, Thornton, Kervina, Ives, Tompkins, Sperlingas, Happel

Minutes Acceptance: Minutes of May 20, 2021 7:45 AM (Consent Agenda)

STATEMENT OF EXPLANATION
MINUTES OF ADVISORY COMMITTEES/BOARDS/COUNCILS (REVIEW)

Review of Advisory Committee/Boards/Council Minutes:

- May 13, 2021, Aging & Disability Resource Center (ADRC) Board
- May 14, 2021, Professional Advisory Committee (PAC)
- May 25, 2021, Criminal Justice Collaborating Council (CJCC)

CHIPPEWA COUNTY

ADRC (AGING & DISABILITY RESOURCE CENTER) BOARD

REGULAR MEETING

MAY 13, 2021

WEBEX CONFERENCE CALL

4:45 PM

DUE TO THE COVID-19 PANDEMIC, THIS MEETING IS BEING HELD VIA WEBEX CONFERENCE CALL TO COMPLY WITH THE SOCIAL DISTANCING GUIDELINES. IF YOU ARE A MEMBER OF THE PUBLIC AND WISH TO SPEAK, PLEASE CALL THE PHONE NUMBER LISTED BELOW AND THE BOARD CHAIR WILL ACKNOWLEDGE YOU DURING THE PUBLIC COMMENT SECTION ON THE AGENDA.

IF YOU NEED TO EITHER MUTE OR UNMUTE YOURSELF DURING THE MEETING, PRESS *6.

MEETING PHONE NUMBER: 1-415-655-0001

MEETING NUMBER (ACCESS CODE): 182 832 4386

MEETING PASSWORD: 7816

1. CALL TO ORDER

2. ROLL CALL

Attendee Name	Organization	Title	Status	Arrived
Kari Ives	Chippewa County	District 12 (Chair)	Present	
Larry Marquardt	Chippewa County	Citizen Rep	Present	
Patricia German	Chippewa County	Citizen Rep	Present	
David Alley	Chippewa County	Citizen Rep	Present	
Mary Quinlan	Chippewa County	Citizen Rep	Absent	
Janet Mayer	Chippewa County	Citizen Rep	Absent	
Glen Howell	Chippewa County	Citizen Rep	Present	

Others Present: Leslie Fijalkiewicz, ADRC Manager; Tim Easker, Human Services Director; Pauline Spiegel, Administrative Assistant; ADRC Staff: Kelly Zimmerman , Kay Hebert, Jessica Gibson, Sandy Winrich, Jordy Miles

3. ELECTION OF VICE-CHAIR

Larry Marquardt was nominated and approved as vice-chair.

Attachment: 5.1a ADRC Board Minutes 05-13-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Larry Marquardt, Citizen Rep
SECONDER:	Glen Howell, Citizen Rep
AYES:	Ives, Marquardt, German, Alley, Howell
ABSENT:	Quinlan, Mayer

4. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

There were no members of the public wishing to be heard.

5. CONSENT AGENDA

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Patricia German, Citizen Rep
SECONDER:	David Alley, Citizen Rep
AYES:	Ives, Marquardt, German, Alley, Howell
ABSENT:	Quinlan, Mayer

1. Approve the agenda

2. Approve the Minutes

   ADRC (Aging & Disability Resource Center) Board - Regular Meeting - Mar 11, 2021 4:45 PM

3. Schedule next meeting date - July 8, 2021

6. REPORTS

1. Nutrition Advisory Council Minutes
   The May 5, 2021 Nutrition Advisory Council Minutes were reviewed and discussed.

RESULT:	**DISCUSSED**

2. Aging & Disability Resource Center Manager Report
   The Aging & Disability Resource Center's Manager's Report was reviewed and discussed. Highlighted items of the report included: Cadott Nutrition Program changes, re-opening of ADRC lobby, starting in-home visits again, Aging Unit survey, replacement for Mary Quinlan on Nutrition Advisory Council, and fiscal information.

RESULT:	**DISCUSSED**

3. Aging & Disability Resource Center Advocacy Report
   The advocacy information was reviewed and discussed. ADRC staff Sandy Winrich and Kay Hebert attended the Joint Finance Committee session in April. Elder Benefits Specialist Jordy Miles and ADRC Board Member Patricia German attended the Aging Advocacy Day May 12. ADRC Board Member Larry

Attachment: 5.1a ADRC Board Minutes 05-13-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

ADRC (Aging & Disability Resource Center) Board

Minutes **May 13, 2021**
Regular Meeting **Webex Conference Call** **4:45 PM**

Marquardt attended a recent Town Hall meeting. They all provided an overview of this positive experience.

RESULT:	**DISCUSSED**

4. COVID-19 Relief Grants and Funding
The grants and funding designated for COVID-19 relief and how they have and will be used were reviewed and discussed.

RESULT:	**DISCUSSED**

7. BUSINESS ITEMS

1. 2021 Aging & Disability Resource Center Program Prioritization
The ADRC program priority rankings as determined by the ADRC Board Members were reviewed and approved.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Glen Howell, Citizen Rep
SECONDER:	Patricia German, Citizen Rep
AYES:	Ives, Marquardt, German, Alley, Howell
ABSENT:	Quinlan, Mayer

2. Transportation Co-pay
The transportation program co-pay had been waived through June 2021. The recommendation to reinstate the transportation co-pay of $3.00 per one way trip as of July 1, 2021 was discussed and approved.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Patricia German, Citizen Rep
SECONDER:	Glen Howell, Citizen Rep
AYES:	Ives, Marquardt, German, Alley, Howell
ABSENT:	Quinlan, Mayer

8. AGENDA ITEMS FOR FUTURE CONSIDERATION

9. ADJOURN

Meeting adjourned at 5:31 p.m.

Attachment: 5.1a ADRC Board Minutes 05-13-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

ADRC (Aging & Disability Resource Center) Board

Minutes **May 13, 2021**
Regular Meeting **Webex Conference Call** **4:45 PM**

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Alley, Citizen Rep
SECONDER:	Glen Howell, Citizen Rep
AYES:	Ives, Marquardt, German, Alley, Howell
ABSENT:	Quinlan, Mayer

Attachment: 5.1a ADRC Board Minutes 05-13-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

Aging & Disability Resource Center

Form for ADRC Board Ranking Programs

Program or Service	2021 ADRC Division 1-12	2021 ADRC Board 1-12
Bridging Chippewa County	10	**10**
Caregiver Support (AFCSP and NFCSP)	6	**4***
Dementia Care Specialist	5	**8**
Disability Benefits Counseling	3	**2***
Elder Benefits Counseling	2	**1**
Health & Wellness Programs	12	**11**
In-home Support Services	9	**6***
Meals on Wheels	4	**6***
Memory Screening	11	**12**
Options Counseling	1	**2***
Senior Dining	8	**9**
Transportation	7	**4***

- Disability Benefits Counseling and Options Counseling tied for #2
- Caregiver Support and Transportation tied for #4
- In-home Support Services and Meals on Wheels tied for #6

Attachment: 5.1b ADRC Program Rankings 2021 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

CHIPPEWA COUNTY
Public Health
Prevent. Promote. Protect.

Professional Advisory Committee Meeting

Friday, May 14, 2021
1:00 p.m. to 1:55 p.m.
Virtual GoToMeeting

Please join my meeting from your computer, tablet or smartphone.
https://www.gotomeet.me/ChippewaCounty/pac

You can also dial in using your phone.
United States: +1 (646) 749-3122

Access Code: 758-163-429

New to GoToMeeting? Get the app now and be ready when your first meeting starts:
https://global.gotomeeting.com/install/758163429

Team Members Invited	
Team Member Name:	Attendance: Present/Absent
James Fenno	Present
Linda Lorentz	Present
Karen Maddox	Absent
Mary Proue	Absent
Stacey Sperlingas	Present
Judy Fedie	Present
Sam Flatland	Present
Kristen Kelm	Absent
Dawn Stark	Absent
Angie Weideman	Present
Others Present: Audra Knowlton Komi Moji	

DRAFT MINUTES

Prepared by: Audra Knowlton

Topic	Domain #	Description	Action Items/Notes
Welcome/ Introductions			Weideman welcomed everyone. Introductions were held.
Review minutes	#3 Inform & Educate	• Review and Approve February 10, 2021 minutes (Attached)	Motion (Fenno/Lorentz) to approve the minutes as presented. Motion carried.
Community Health Assessment (CHA)	#3 Inform & Educate	• Update on Community Health Assessment – Komi	Weideman stated Komi Modji has been the Public Healtl representative for this round of the Community Health Assessment (CHA). Modji noted the printed copies will be available soon. Modji shared a power presentation on the CHA. The CH is a partnership with the Chippewa Health Improvement

Attachment: 5-14-21 DRAFT PAC Minutes (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

		(Attached-a hard copy will be provided after they have been printed)	Partnership, Eau Claire City-County Health Department, Eau Claire Health Communities, health care systems, and United Way. The timeline was reviewed, 637 surveys we completed, demographics were shared, community strengths, community concerns and how serious they are. The top five health priorities identified are mental health, drug use, alcohol misuse, obesity, communicable disease prevention and control, and chronic disease. Virtual community conversations were held and Modji reviewed the themes that emerged from the conversations and the priorities compared between the surveys and conversations. He reviewed the percentage for the health concerns between Chippewa County, state, and the nation Modji reviewed some of the achievements that occurred a result of the last CHA. Weideman stated there is interconnection between the health challenges. This assessment is used locally by partners when applying for grants. The Community Health Improvement Plan (CHIP) will b created to determine an action plan of what we are going to do as a result of the CHA. Weideman thanked Dr. Modji on all his hard work on the CHA during the last nine months with our local partners.
COVID-19 Update	#3 Inform & Educate	• Update on COVID-19 – Angie	Weideman shared the county webpage, the COVID-19 Hub, which is updated daily by staff. She reviewed what falls under the tabs at the top. She highlighted the Our Numbers page and reviewed Wisconsin vaccine data and Chippewa County data. Weideman shared the state approved vaccinating the 12-15 year-old population with the Pfizer vaccine. Weideman reviewed the local metrics section on the website for disease occurrence, healthcare availability, public health response. Eleven metrics are reviewed to make recommendations to the community. Weideman and Modji work with the Department of Administration to monitor the progress of the Emergency Order. The Order will be lifted when there are two consecutive 28 day cycles in the green and/or 80 percent of the community is vaccinated. Outreach is continuing t educate and encourage the community to get vaccinated. Discussion was held on how to increase the vaccination rate and interest. Weideman stated they received a grant t conduct outreach on vaccine and health equity. They are working on hiring two individuals to work with the Spanish and Hmong population, school districts to get messaging on social media and messaging venues, reaching out to neighboring counties and homebound vaccinations. A survey was completed to answer questio about getting the vaccine. A few results were: people felt they are being researched and safety of the vaccine.

Attachment: 5-14-21 DRAFT PAC Minutes (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

			Discussion was held on some of the reasons why individuals may not get the vaccine including a concern for infertility among women and men. Dr. Sperlingas shared 99.2 percent of Marshfield doctors are vaccinated which show they feel it is a worthwhile cause. Ideas from the Committee no how to get more of the community vaccinated: • Gimmicks or incentives to get the vaccine. • A request was made to have on-site vaccination clinic at the fests this year. However, there is a concern about the number of attendees at the fest and exposure to staff. • Farmers Markets-Weideman noted staff are working with Farmers Markets at this time. • Fedie is surveying their WIC participants to see i they would be interested in getting their COVID vaccine when they pick up their Farmers Market checks. • Poke and Pump • Sit outside grocery stores or gas stations • Weideman noted they are looking at other optior with local partners: onsite at some of the larger farms, businesses, and meet people where they are.
Other Issues or Items Follow-up to Questions	All Domains	• REALiving Be Your Best Award – Congratulations to Angie Weideman	Weideman thanked Judy Fedie, Audra Knowlton, and Ti Easker for putting a nomination in for the "Be Your Best Award".
Adjourn			Motion (Fenno/Sperlingas) to adjourn. Carried. The next meeting will be August 13, 2021

Attachment: 5-14-21 DRAFT PAC Minutes (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

DRAFT

CHIPPEWA COUNTY

CRIMINAL JUSTICE COLLABORATING COUNCIL

REGULAR MEETING

May 25, 2021

CHIPPEWA COUNTY COURTHOUSE, RM 302

7:45 AM

1. CALL TO ORDER

Chair Gibbs called the meeting to order at 7:55 a.m. Waited for a Quorum to arrive.

2. ROLL CALL

Attendee Name	Position	Status	Arrived
Judge Steve Gibbs (Chair)	Presiding Judge for Chippewa County or Designee	Present	
Tim Easker (Vice-Chair)	Director of Chippewa County Department of Human Services or Designee	Present	
Randy Scholz	County Administrator	Present	
Jim Kowalczyk	County Sheriff or Designee (Chris Kowalczyk)	Present	
Curt Dutton	Jail Administrator or Designee (Dan Modl)	Present	
Kyra Secraw	Youth Justice/CWDA Manager	Present	
Matt Kelm	Chief of Police - Chippewa Falls or Designee	Absent	
Louis Eslinger	Chief of Police - Outlying Community or Designee	Absent	
Wade Newell/ Roy Gay	District Attorney or Designee (Scott Zehr)	Both Present	Scott-7:50 Wade-8:10
Kirby Harless	Representative of the State Public Defender Office	Present	8:00
Karen Hepfler	Clerk of Circuit Court or Designee	Absent	
Megan Popenhagen/ Melissa Buesgen	Department of Corrections Supervisor for Chippewa County or Designee	Melissa Present	
Denise Shervey	Child Support Director or Designee	Absent	
Lee McMenamin	County Board Supervisor	Present	
Geri Segal	Citizen Member	Absent	
Steve Norlander (Jail Chaplain)	Citizen Member	Present	
Vacant	Citizen Member		

Others Present: Rose Baier, Criminal Justice Services Director

3. MEMBERS OF THE PUBLIC WISHING TO BE HEARD

There were no members of the publish wishing to be heard.

Attachment: 5.1c CJCC Minutes 05-25-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

4. CONSENT AGENDA

RESULT:	APPROVED [10 TO 0]
MOVER:	Scholz
SECONDER:	Easker
AYES:	Gibbs, Easker, Scholz, Kowalczyk, Modl, Secraw, Zehr, Buesgen, McMenamin, Norlander
ABSENT:	Harless, Hepfler, Kelm, Shervey, Segal
AWAY:	

1. Approve the Agenda
2. Minutes of February 23, 2021 Meeting
3. Schedule Next Meeting Date – August 24, 2021

5. BUSINESS ITEMS

1. Application for New CJCC Member

Baier reviewed the application for new CJCC membership with the committee. Nichole Wallsch applied to be a new Citizen Member. She was unable to be at today's meeting due to being on vacation. The group unanimously agreed to her addition to the CJCC. Scholz will bring his recommendation forward to the June County Board Meeting.

RESULT:	APPROVED [11 TO 0]
MOVER:	McMenamin
SECONDER:	Secraw
AYES:	Gibbs, Easker, Scholz, Kowalczyk, Modl, Secraw, Zehr, Buesgen, McMenamin, Norlander, Harless
ABSENT:	Hepfler, Kelm, Shervey, Segal
AWAY:	

6. REPORTS

1. Take a Stand Against Meth Campaign Update

Baier updated the group on the goals of the campaign and explained they are working on prioritizing and action planning. The group is recommending becoming a part of the Crime Stoppers program. Baier provided a presentation on what crime stoppers is, the benefits and next steps. The group agreed this would be a great opportunity.

RESULT: DISCUSSED

2. Proxy Tool Discussion

Currently proxy tools are completed on all criminal arrests. Baier suggested now that we have Pretrial Services and the PSA, more information is available then we previously had. Therefore, it is recommended that jurisdictions only need to complete the Proxy on all first-time offenders for potential referral to the FTO program. The group discussed this and agreed. Baier will meet with area chiefs to discuss this change.

RESULT: DISCUSSED

Attachment: 5.1c CJCC Minutes 05-25-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

3. Poverty Simulation

The group is still interested in hosting a poverty simulation sometime toward the end of summer or Fall. It was suggested to have it at a larger event location such as high school gym or NWSF grounds. Baier will look into options for availability and potential site locations.

RESULT: DISCUSSED

4. Program Updates

- Recovery Court Report: RC will be participating in a National Drug Court Institute Tune-Up training June 1 and 2. This will be a great opportunity to look at the program as a whole and make changes to align with Key Components. Baier submitted a four-year enhancement Federal Grant primarily for treatment services, to support Hope House, and Recovery Coaches. Discuss was held around the referrals to Recovery Court and numbers being down at this time.
- First Time Offender – FTO program is doing fine. The numbers were down significantly last year due to COVID.
- Front-End Intervention Treatment – Baier and Lawcewicz will be presenting at the Pretrial Service Professionals training this summer related to FIT and FTO programs in Chippewa County. FIT program continues to have positive results.
- Programming – All programs have returned to in-person. Baier has been working with Jeanne Walsh from UW-Extension related to staring some programs in the jail including a Book Literacy program and Moral Reconation Therapy. These will be virtual.
- Pre-Trial – Pretrial is going well. Judge Lane and Baier will be on a panel discussion for the state related to pretrial July 8th and Judge Gibbs will be on a Judge's Panel on July 22. The state is in the first steps of rolling pretrial out to the other counties not in the pilot.
- CJS will have three interns this summer working with the various programs.

RESULT: DISCUSSED

7. OTHER EMERGING ISSUES

8. AGENDA ITEMS FOR FUTURE CONSIDERATION

Poverty Simulation

IX. ADJOURN

Meeting adjourned without objection at 9 a.m.

Attachment: 5.1c CJCC Minutes 05-25-21 (6404 : Minutes of Advisory Committees/Boards/Councils (Review))

STATEMENT OF EXPLANATION
ANNUAL "FRIEND OF PUBLIC HEALTH" RECOGNITION - ANGIE WEIDEMAN

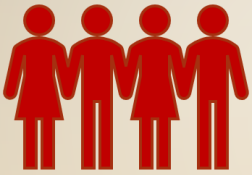
The Friend of Public Health Award is to honor and recognize a person or agency who has exemplified and modeled public health values in the community and has supported and encouraged others to be supportive of public health. The Health Department usually makes one Friend of Public Health award in the spring of the year for the previous year. The Pandemic of 2020 created many stresses and hardships and it also allowed for amazing community partnerships to build and grow. This year the Chippewa County Department of Public Health Leadership team and the Professional Advisory Committee decided to award numerous friends of public health related to the vision of the department, which is "The Healthiest County to Live, Learn, Work, and Play" We will be awarding friends of public health from March to June 2021.

The Healthiest County To Live- Awarded to Sheriff and Chief Deputy, Local Municipality Police Chiefs, Jail Captain, and Chippewa Falls Fire and Emergency Services Department Chief (Honored in March)
The Healthiest County to Learn- Awarded to School Superintendents (Honored in April)
The Healthiest County To Work- Awarded to Kwik Trip and Nursing Homes in Chippewa County (Honored in May)
The Healthiest County to Play-Awarded to Chris Vetter from the Leader Telegram and Mayor Greg Hoffman from the City of Chippewa Falls (Honored in June)

STATEMENT OF EXPLANATION
COMMUNITY HEALTH ASSESSMENT RESULTS - KOMI MODJI

Community Health Epidemiologist Komi Modji will give a presentation on the 2021 Chippewa County Community Health Assessment along with information on the identified top health concerns.

The electronic copy of the 2021 Chippewa County Community Health Assessment is attached.



CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT UPDATE

June 17, 2021

COMMUNITY HEALTH ASSESSMENT PLANNING PARTNERSHIP

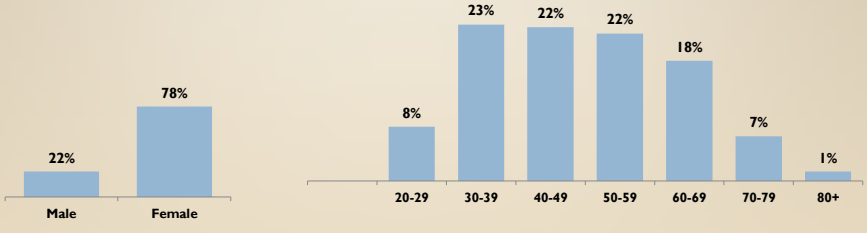
- Chippewa County Department of Public Health
- Chippewa Health Improvement Partnership
- Eau Claire City-County Health Department
- Eau Claire Healthy Communities
- Marshfield Clinic Health System
- Mayo Clinic Health System
- HSHS Sacred Heart Hospital
- HSHS St. Joseph's Hospital
- United Way of the Greater Chippewa Valley

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

COMMUNITY HEALTH ASSESSEMENT (CHA) TIMELINE

September 2020	Planning partnership convened to plan the CHA
December 2020	Community Health Surveys distributed online for each county
December 2020	Survey status reviewed, additional outreach conducted
January 2021	Secondary (quantitative) health care data compiled
February 2021	Community Conversations held to identify top health priorities
March 2021	Coalition meetings held to determine top health priorities
March 2021	Priority rankings finalized
May 2021	CHA report completed and publicized

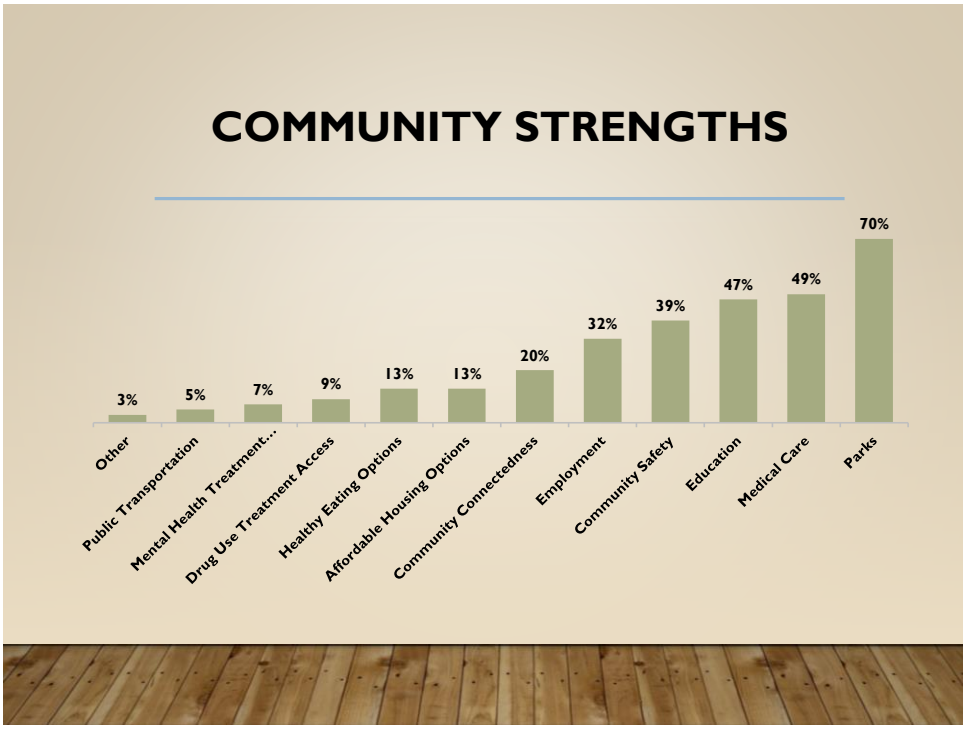
DEMOGRAPHICS

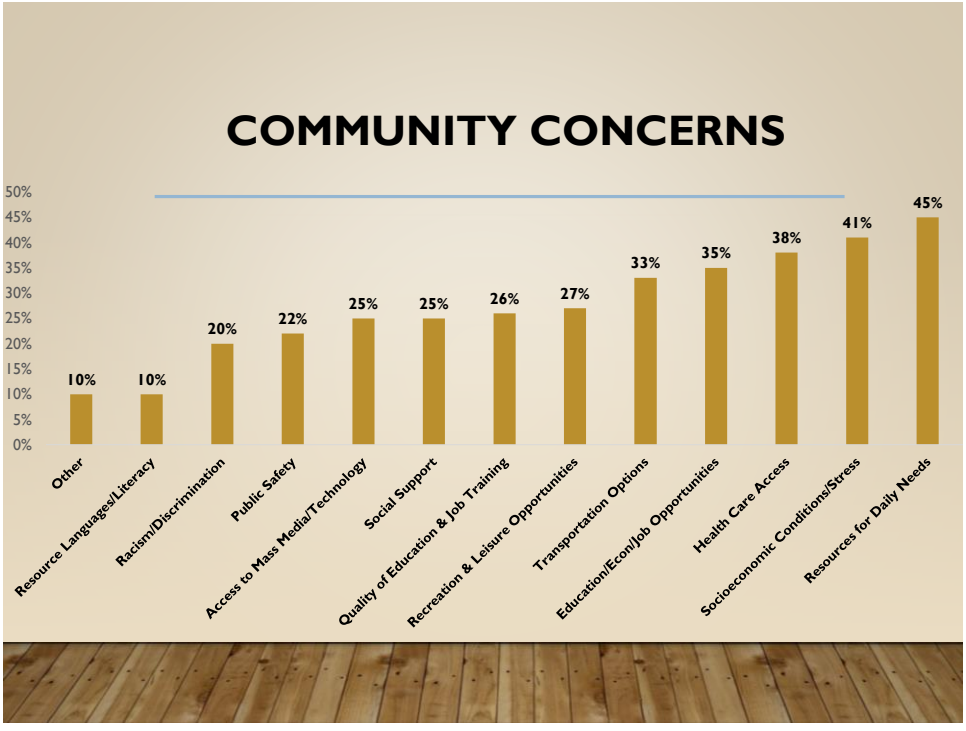


637 Completed Responses

2020-21 Chippewa County Community Health Survey

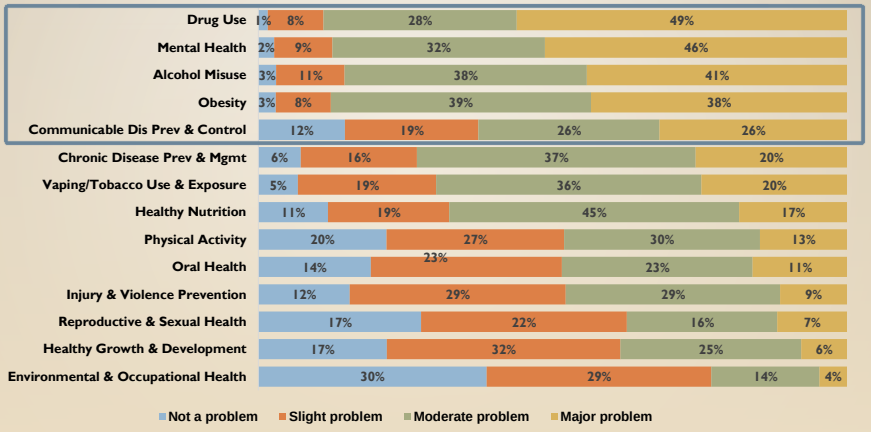
Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)





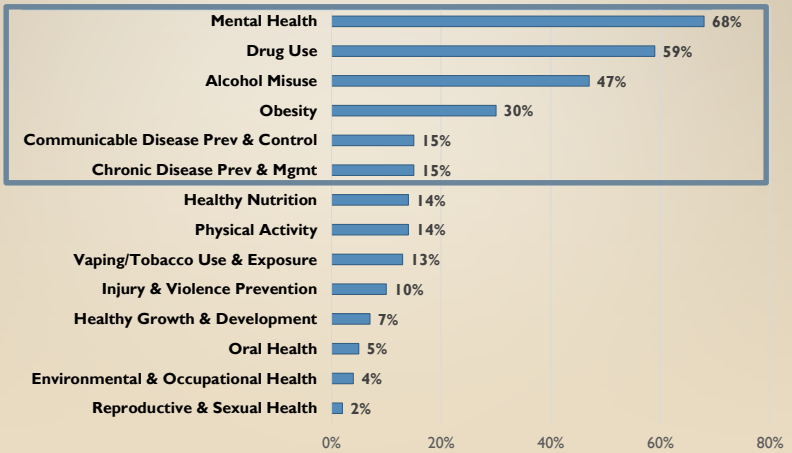
Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

HOW SERIOUS IS IT?



2020-21 Chippewa County Community Health Survey

HEALTH PRIORITIES



2020-21 Chippewa County Community Health Survey

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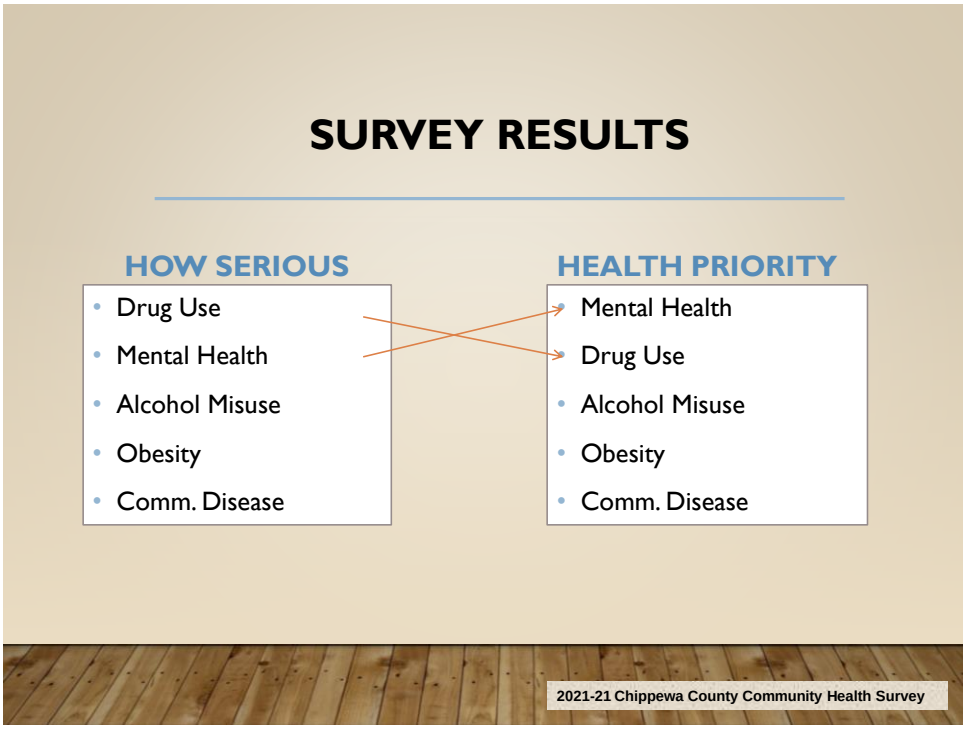

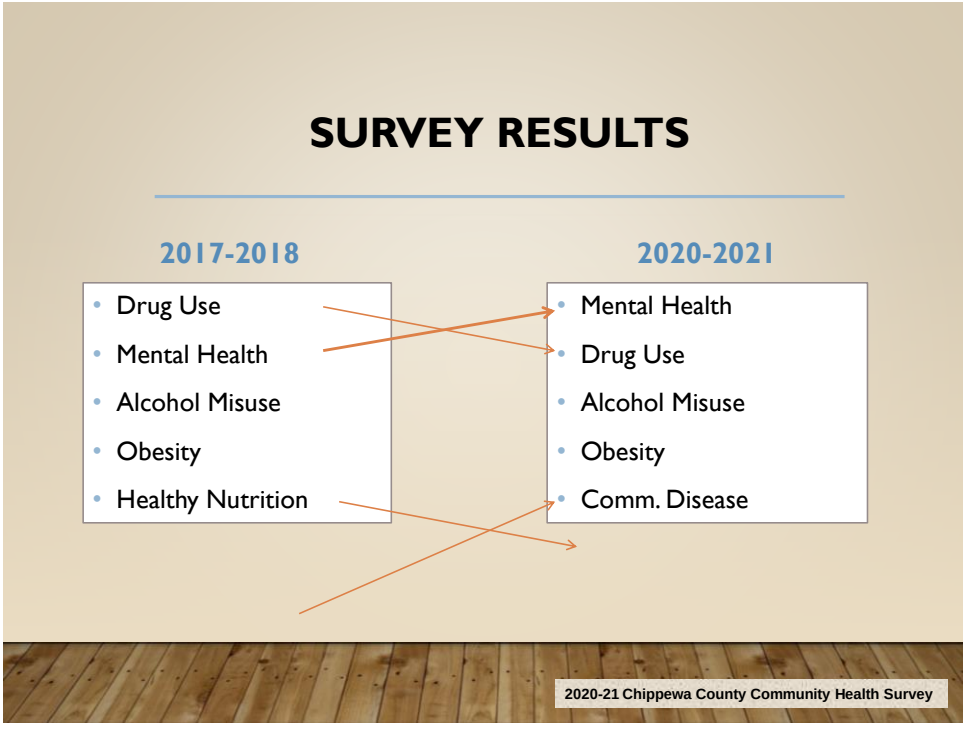

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COMMUNITY HEALTH ASSESSEMENT (CHA) TIMELINE

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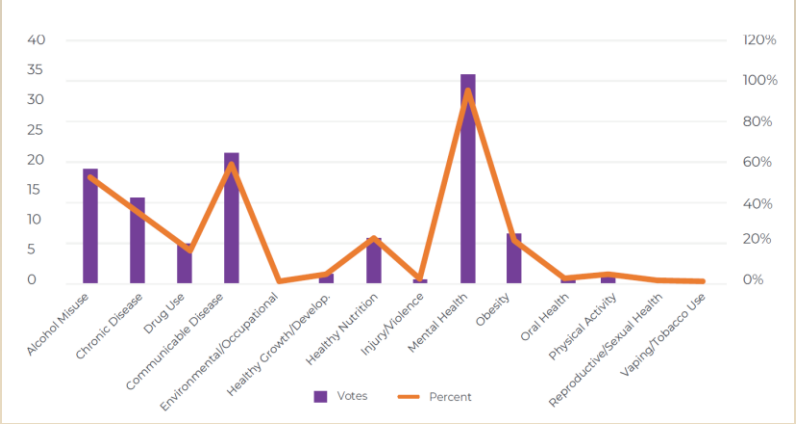
May 2021	CHA report completed and publicized

COMMUNITY CONVERSATIONS

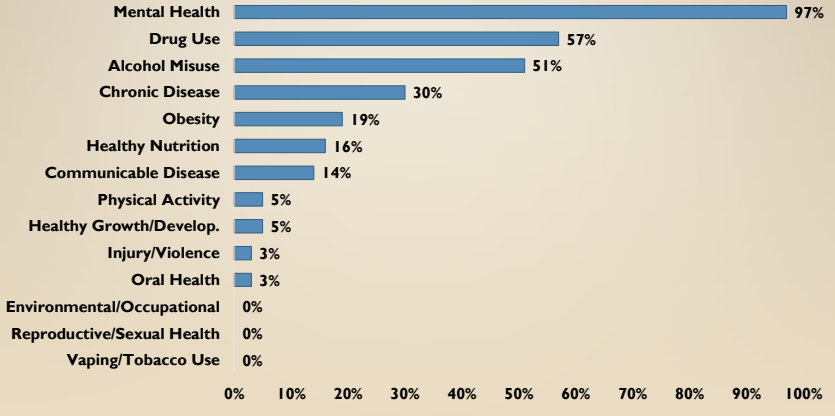


Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

COMMUNITY CONVERSATIONS - *THEMES*

- Mental Health is the top priority – and we are ready for change!
- Alcohol Misuse is a critical area. Are we ready for change?
- Drug Use poses some of the most serious impacts/concerns.
- Many health issues are inter-related.
- Healthy nutrition and physical activity are important because they contribute to mental health, as well as overall health.
- COVID has made many health areas worse – especially MH.
- Trauma and trauma/resiliency training must be addressed.

COMMUNITY CONVERSATIONS - *PRIORITIES*



Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

PRIORITIES – *SURVEYS vs CONVERSATIONS*

SURVEYS	CONVERSATIONS
• Mental Health	• Mental Health
• Drug Use	• Drug Use
• Alcohol Misuse	• Alcohol Misuse
• Obesity	• Chronic Disease
• Communicable Disease	• Obesity

MENTAL HEALTH

133 → **50** Chippewa County

99 → **51** Wisconsin

Hospitalizations for self-inflicted injuries per 100,000 people[1]

3.5 Chippewa County

4.0 Wisconsin

Number of mentally unhealthy days in the past 30 days[2]

20 Chippewa County

15 Wisconsin

14 Nationally

Suicide death rate per 100,000 people[3]

[1]2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2016-2018)
[2]2020 County Health Rankings (Behavioral Risk Factor Surveillance System; 2017)
[3]2020 County Health Rankings (National Center for Health Statistics; 2014-2018)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

DRUG USE

42.0 Wisconsin
23.4 Chippewa

Opioid-Related Hospitalizations per 100,000 people[1]

1.8 Chippewa

1.6 Wisconsin

Rate of meth overdose deaths per 100,000 people[2]

12% Chippewa County

11% Wisconsin

High School students who have misused prescription pain medication

[1]WI DHS (Data Direct, Opioid Hospitalization Module; 2018)
[2] Wisconsin Dept. of Health Services (2014-2019)
[3]Youth Risk Behavior Surveillance System (2019)

ALCOHOL MISUSE

37% Chippewa County
36% Wisconsin
28% Nationally

Percentage of driving deaths with alcohol involvement[1]

37% Chippewa County
30% Wisconsin

Students that reported consuming at least one drink in the past 30 days[2]

26% Chippewa County
24% Wisconsin
19% Nationally

Adults that reported engaging in excessive drinking[3]

[1]2020 County Health Rankings (Fatality Analysis Reporting System; 2014-2018)
[2]Youth Risk Behavior Surveillance System (2019)
[3]2020 County Health Rankings (Behavioral Risk Factor Surveillance System; 2017)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

OBESITY

28% Chippewa County

31% Wisconsin

Adults 20+ with a body mass index over 30 (considered obese)[1]

31.3%
Chippewa County

32.3 % Wisconsin

Children 2 – 5 years old in WIC (Women, Infants, Children) overweight or obese[2]

29.1%
Wisconsin

31.6%
Nationally

H.S. students overweight or obese (BMI ≥ 85th percentile of CDC growth chart)

[1]2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)
[2] Chippewa County Department of Public Health (2017)
[3]Youth Risk Behavior Surveillance System (2019)

COMMUNICABLE DISEASE PREVENTION AND CONTROL

53%
Chippewa County

46%
Nationally

Population over age 65 that had flu shot in last 12 months[1]

7
Nationally

56
Chippewa County

38
Wisconsin

Positive Lyme disease cases out of every 100,000 people[2]

76%
Chippewa County

72%
Wisconsin

Children that received recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and Pneumococcal[3]

[1]2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)
[2]Wisconsin Environmental Public Health Data Tracker; 2019)
[3]2017 County Health Rankings (Wisconsin Immunization Registry, 2018)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

CHRONIC DISEASE PREVENTION AND MANAGEMENT

10%
Chippewa County

9%
Wisconsin

Adults diagnosed with diabetes[1]

16.9
Chippewa County

31.8
Wisconsin

Deaths from Alzheimer's disease per 100,000 people[2]

487
Chippewa County

438
Nationally

Cancer incidence per 100,000 people[3]

[1] U.S. Diabetes Surveillance System (2016)
[2]Wisconsin Interactive Statistics on Health (2018)
[3]2020 County Health Rankings (Wisconsin Cancer Reporting System, 2012-2016)

HEALTHY NUTRITION

10%
Chippewa County

10%
Wisconsin

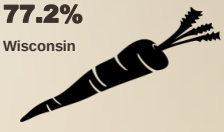
Percent who lack adequate access to food[1]

44.7%
Chippewa County

26%
Wisconsin

Infants in WIC (Women, Infants, Children) exclusively breastfed for three months[2]

77.2%
Wisconsin



79.7%
Nationally

Percent of adults who consume vegetables at least once per day[3]

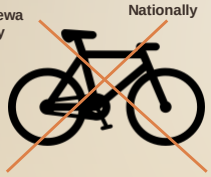
[1]2020 County Health Rankings (Map the Meal Gap; 2017)
[2] Chippewa County Dept. of Public Health Breastfeeding Composite (2017)
[3]State Cancer Profiles (2019)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

PHYSICAL ACTIVITY

20% Chippewa County

23% Nationally



Adults report no leisure time physical activity[1]

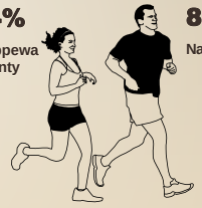
44% Chippewa County

49% Wisconsin

High school students who spend 3+ hours/day on phone/Xbox/other device[2]

64% Chippewa County

84% Nationally



Residents with adequate access to a physical activity location[3]

[1]2020 County Health Rankings (National Diabetes Surveillance System, 2016)
[2] Youth Risk Behavior Surveillance System (2019)
[3]2017 County Health Rankings (ArcGIS, 2010 & 2019)

VAPING AND TOBACCO USE

15% Chippewa County

16% Wisconsin

5% National Target

Adults who report smoking most days or everyday[1]

46% Chippewa County

46% Wisconsin

50% Nationally

High School students who ever tried Vaping or e-cigarettes[2]

15% Chippewa County

11% Wisconsin

Mothers who report smoking during pregnancy[3]

[1]2017 County Health Rankings (Behavioral Risk Factor Surveillance System, 2017)
[2]Youth Risk Behavior Surveillance System (2019)
[3]2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2015-2018)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

INJURY AND VIOLENCE PREVENTION

424 Chippewa County

421 Wisconsin

Injury hospitalizations per 100,000 people[1]

143 Wisconsin

132

98 Chippewa County

Injury deaths due to falls per 100,000 people, for adults over 65[2]

125 Chippewa County

298 Wisconsin

Violent crimes per 100,000 people[3]

[1] Wisconsin Interactive Statistics on Health (2018)
[2]Wisconsin Interactive Statistics on Heath (2015-2017)
[3]2020 County Health Rankings (FBI- Uniform Crime Reporting; 2014 & 2016)

HEALTHY GROWTH AND DEVELOPMENT

8% Nationally

6% Chippewa County

Live births from 2008-2014 considered low birth weight[1]

53%

46% Chippewa County

52% Wisconsin

Fourth grade students proficient or advanced in reading[2]

65% Chippewa County

69% Wisconsin

Adults 25-44 with some college or associate's degree[3]

[1]2020 County Health Rankings (National Vital Statistics System; 2012-2018)
[2]2020 County Health Rankings (Department of Education; 2017-2018)
[3]2020 County Health Rankings (American Community Survey; 2014-2018)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

ORAL HEALTH

79% Chippewa County

79% Wisconsin

High School students who saw a dentist in the past year[1]

1,830 : 1
Chippewa County

1,460 : 1
Wisconsin

Ratio of population to dentists

15.5%
Chippewa County

88.4%
Wisconsin

Residents on municipal water with fluoride content at the recommended level[3]

[1]Youth Risk Behavior Surveillance System (2019)
[2] 2020 County Health Rankings (Area Health Resource File/National Provider Identification; 2018)
[3]Wisconsin Environmental Public Health Data Tracker (2017)

ENVIRONMENTAL AND OCCUPATIONAL HEALTH

49% Chippewa County

Radon tests that exceeded the recommended level of 4 picocuries per liter[1]

25% Chippewa County

25% Wisconsin

Percent of housing units built before 1950s[2]

2% Chippewa County

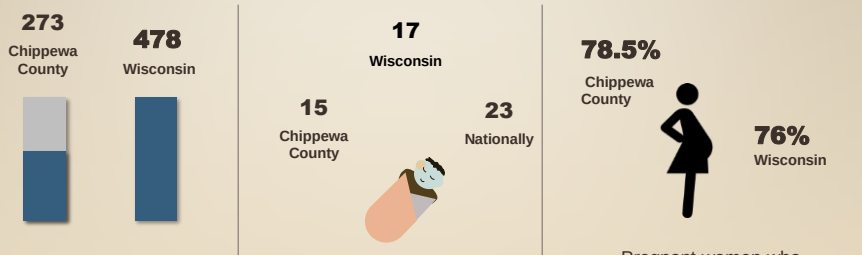
5% Wisconsin

Children Lead Poisoning Percent with blood lead ≥5µg/dL[3]

[1] Eau Claire City-County Health Department (2017-2020)
[2]2020 County Health Rankings (American Community Survey, 2014-2018)
[3]Wisconsin Environmental Public Health Tracking (2016)

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

REPRODUCTIVE AND SEXUAL HEALTH



[1]2020 County Health Rankings (National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention; 2017)
[2] 2020 County Health Rankings (National Vital Statistics System (2012-2018)
[3]Wisconsin Interactive Statistics on Health (2018)

FINAL PRIORITIZATION

TOP 2015 HEALTH PRIORITIES
Mental Health
Obesity
Alcohol Misuse
Drug Use
Healthy Nutrition

TOP 2021 HEALTH PRIORITIES
Mental Health
Alcohol Misuse
Chronic Disease
Drug Use
Obesity

TOP 2018 HEALTH PRIORITIES
Mental Health
Alcohol Misuse
Drug Use
Obesity
Physical Activity

ADDITIONAL 2021 HEALTH PRIORITIES

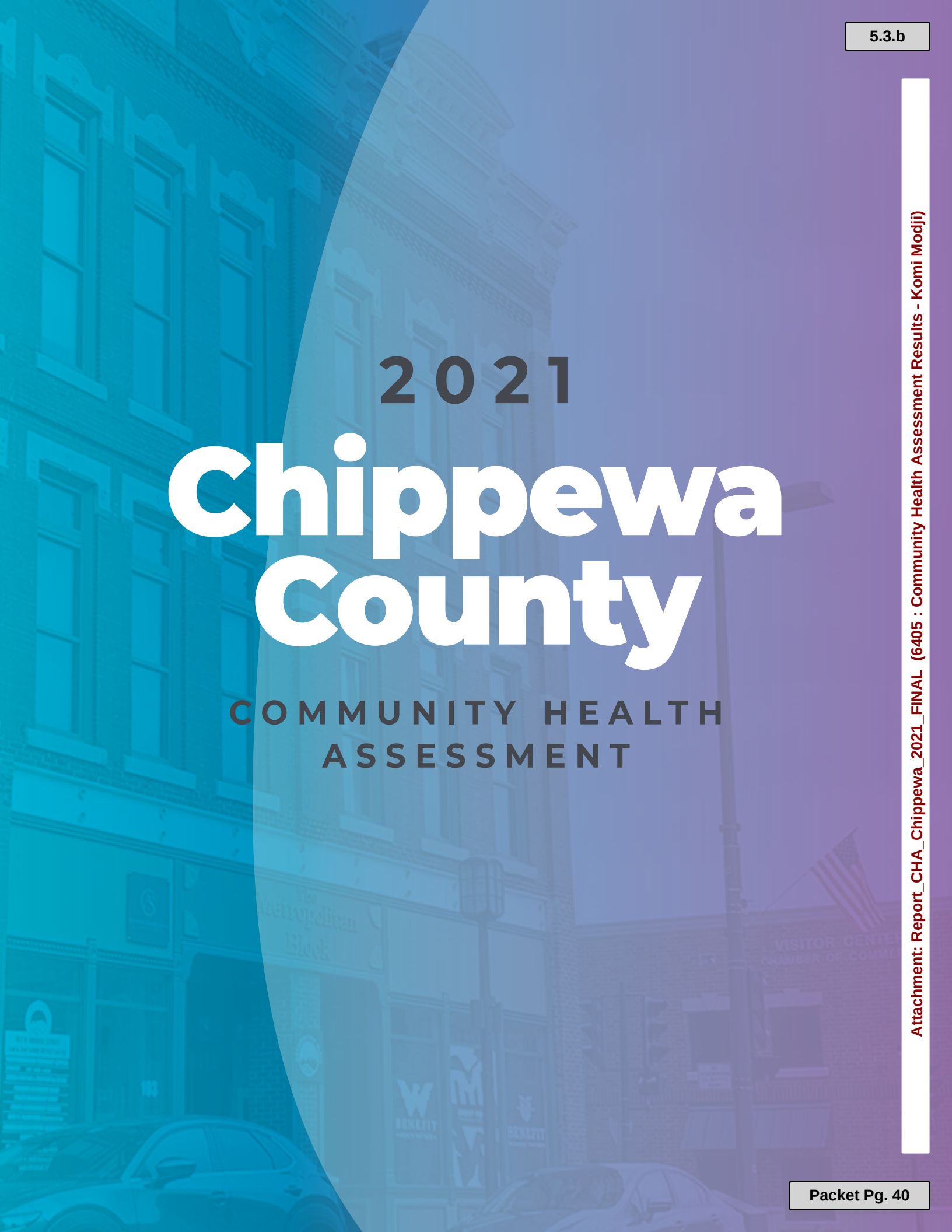
Communicable Disease
Physical Activity
Healthy Nutrition
Oral Health
Vaping/Tobacco Use and Exposure
Healthy Growth and Development
Injury and Violence Prevention
Environmental and Occupational Health
Reproductive and Sexual Health

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)

PAST ACHIEVEMENTS

- Created and maintained board book supply for the WIC Program for children to receive a book at their health exams every 6 months.
- Designed and distributed materials for the Good Night Project, building understanding of the importance of routine and sleep for social-emotional health.
- Distributed Those Who Host Lose the Most signs and placed stickers on concession items at HS football games.
- Applied for and received a Drug Free Community Grant.
- Developed and held Kids in the Kitchen community cooking class program.

Attachment: CHA Presentation (6405 : Community Health Assessment Results - Komi Modji)



2021 Chippewa County

COMMUNITY HEALTH ASSESSMENT

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

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Cover Image by Neary Studios.

EXECUTIVE SUMMARY

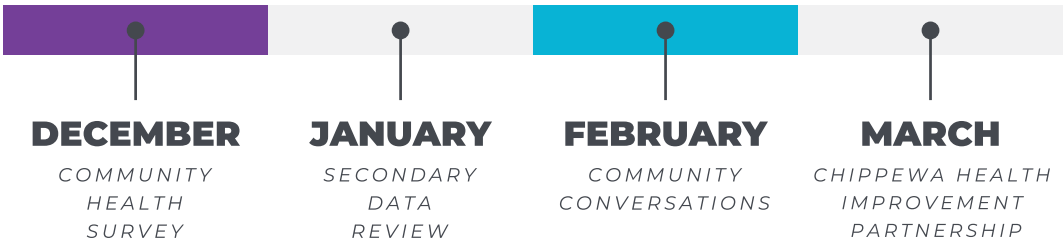
The World Health Organization has defined health as "a state of complete physical, social, and mental well-being, and not merely the absence of disease or infirmity" (WHO, 1948). As a condition of their tax-exempt status, non-profit hospital systems are required to conduct a Community Health Needs Assessment every three years and adopt implementation strategies to meet the health needs identified through the assessment process. Likewise, both state regulations and federal accreditation standards require public health departments to conduct a Community Health Assessment every five years. In conducting these local health evaluations, organizations must gather information from various sectors of the community, summarize the input received, and describe the community resources that may be available to help address the health needs identified.

2021 Chippewa County Community Health Assessment Community Health Assessment (CHA) was conducted collaboratively by the Community Health Assessment Planning Partnership Committee (also referred to in this report as the CHA partners). This partnership, which includes county health departments, local healthcare facilities, and community organizations, was established to optimize the coordination and use of resources while reducing duplicative efforts. Although this report is specific to Chippewa County, the partners used a parallel process to assess health needs in Eau Claire County as well. The shared process in Chippewa and Eau Claire counties recognizes overlapping service areas and resources in these communities.

The purpose of the assessment process is to identify and prioritize significant community health needs, as well as to identify potential resources to address those needs. The CHA partners factored data from several sources into a prioritization matrix to identify those health areas on which to focus local health improvement efforts. Those sources included a Community Health Survey; secondary health data involving local and national comparisons; a series of virtual Community Conversations with county residents and stakeholders; and the Chippewa Health Improvement Partnership, a local coalition whose mission is to "serve as a catalyst for the enhancement of community health and quality of life through educational and preventative initiatives" in Chippewa County. Each of these sources examined 14 health areas based on the state health plan (Healthiest Wisconsin 2020). This process, involving the four primary inputs in conjunction with the weighted matrix, identified the following top priorities: ***Mental Health, Alcohol Misuse, Chronic Disease Prevention and Control, Drug Use,*** and ***Obesity.***

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

TIMELINE



The Community Health Assessment in turn serves as an input to the three-year, county-wide Community Health Improvement Plan (CHIP), which includes goals, measurable objectives, and implementation strategies that address the county's top health priorities. Data from this report will be used by the Chippewa Health Improvement Partnership to create the plan. While the assessment itself involves county residents in identifying which health areas most need improvement, the CHIP process provides an opportunity for community members to determine how to make those improvements in Chippewa County. In addition, each of the CHA partners will use information gathered during the assessment process to inform the work of their organizations. The results of this assessment thus will be used individually and jointly by the partner organizations to develop and implement strategies for improving community health in the identified priority areas.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

CONTENTS

Executive Summary 03.

Table of Contents 05.

Acknowledgements 06.

Community Profile 07.

Overview 09.

Data Collection Methods 11.

Community Health Assessment Timeline 11.

Community Health Survey 11.

Secondary Data 13.

Community Conversations 14.

Coalition Meeting 16.

Final Priorities 16.

Data Use 17.

Social Determinants of Health 18.

Health Disparities and Inequities 20.

Community Assets Inventory 22.

Health Focus Area Summaries 24.

Mental Health 25.

Alcohol Misuse 27.

Chronic Disease Prevention & Management 29.

Drug Use 31.

Obesity 33.

Communicable Disease Prevention & Control 35.

Physical Activity 36.

Healthy Nutrition 37.

Oral Health 38.

Vaping/Tobacco Use & Exposure 39.

Healthy Growth & Development 40.

Injury & Violence Prevention 41.

Environmental & Occupational Health 42.

Reproductive & Sexual Health 43.

Appendix I: Demographic Profiles 45.

Appendix II: Community Health Survey 51.

Appendix III: Core Data Set 56.

Appendix IV: Community Assets Inventory 64.

LIST OF FIGURES

FIGURE 1: Take Action Cycle 10.

FIGURE 2: Community Health Survey Prioritization 14.

FIGURE 3: Community Conversations Prioritization 16.

FIGURE 4: Social Determinants of Health 20.

FIGURE 5: Equality Vs. Equity 22.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ACKNOWLEDGEMENTS

The Community Health Assessment (CHA) Planning Partnership Committee consisted of representatives from nine community organizations in Chippewa and Eau Claire counties. These organizations signed a Memorandum of Understanding (MOU) that outlined agreed upon goals, activities, and contributions from each of the partner organizations. The Eau Claire City-County Health Department served as the fiscal agent for the partnership and contracted for a part-time, limited-term project manager to facilitate and coordinate the assessment process.

Members of the Community Health Assessment Planning Partnership Committee included:

Laura Baalrud	Outreach Facilitator, HSHS Sacred Heart Hospital and St. Joseph's Hospital; Director of Chippewa Health Improvement Partnership
JoAnna Bernklau	Community Benefits Coordinator, Marshfield Clinic Health System
Sara Carstens	Director of Community Engagement and Wellness, Mayo Clinic Health System
Cortney Draxler	Policy and Systems Division Manager, Eau Claire City-County Health Department
Melissa Ives	Community Health Assessment Project Manager, Report Author
David Lally	Director of Community Benefits and Advocacy, Hospital Sisters Health System
Allie Machtan	Director of Community Health, Marshfield Clinic Health System
Komi Modji	Epidemiologist, Chippewa County Department of Public Health
Andy Neborak	Executive Director, United Way of the Greater Chippewa Valley
Maria Seibel	Community Engagement and Wellness Specialist, Mayo Clinic Health System

Several individuals also supported this process by providing technical assistance behind the scenes and/or during meetings. These included Peggy O'Halloran, Evaluator, Eau Claire City-County Health Department; Gina Schemenauer, Public Health Specialist, Eau Claire City-County Health Department; Ashley Hahn, Intern, Eau Claire City-County Health Department; Cortney Nicholson, Community Health Educator, Eau Claire City-County Health Department; and Nikki Hoernke, Community Health Planning Promotion Specialist, Chippewa County Department of Public Health.

In addition, we benefited from the assistance of several other organizations and individuals who helped publicize, distribute, and collect the Community Health Survey and share information about the Community Conversations with county residents and stakeholders.

Finally, we could not have completed the assessment process without the active involvement of numerous professionals and members from the community at large – including those who completed the Community Health Survey, engaged in Community Conversations, and/or participated in the Chippewa Health Improvement Partnership discussion and prioritization exercise.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

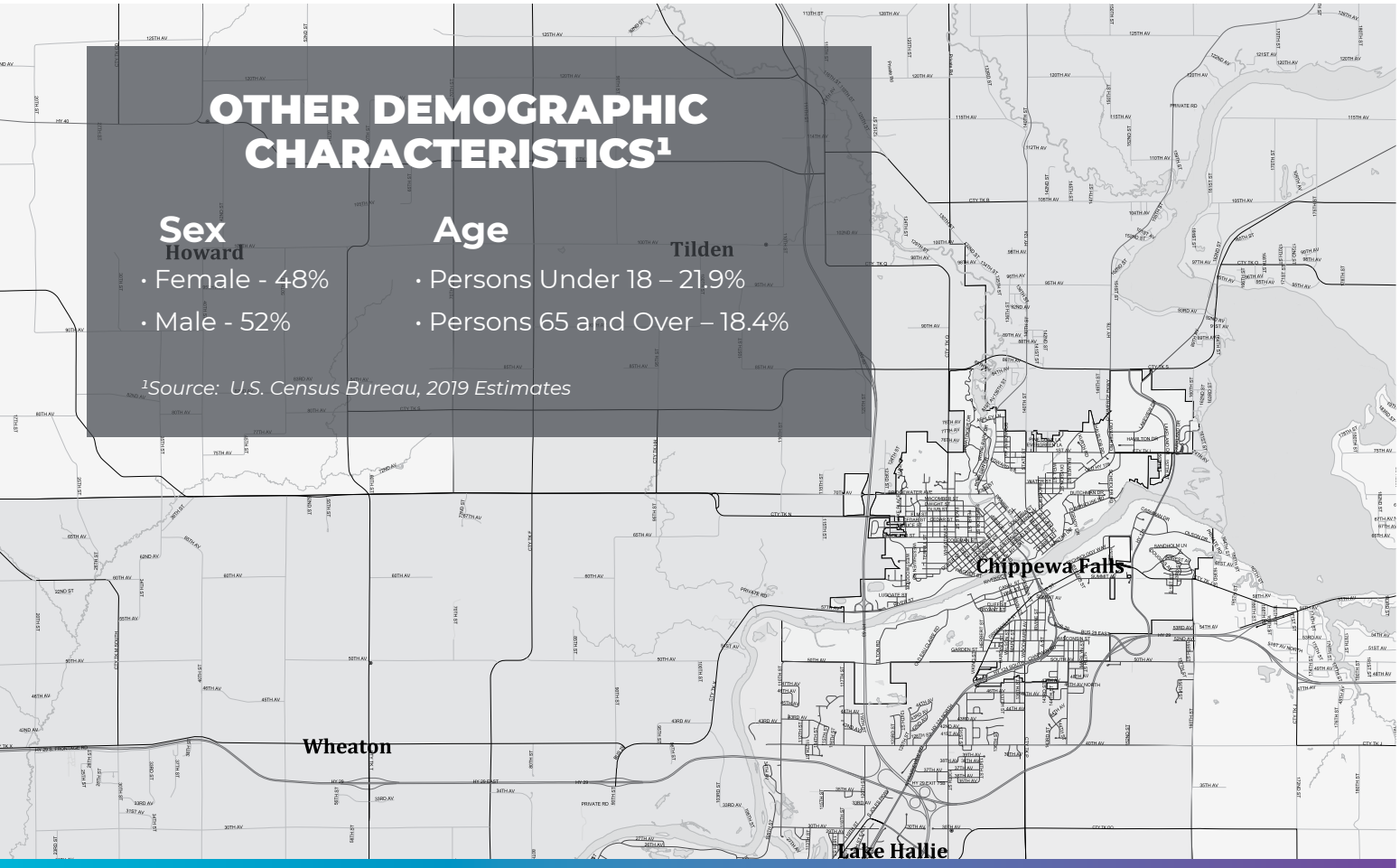
COMMUNITY PROFILE

CHIPPEWA COUNTY

Named for the American Indians who once populated the area, Chippewa County covers just over 1,000 square miles of land in the Chippewa Valley of west-central Wisconsin. The county is comprised of five cities (Bloomer, Chippewa Falls, Cornell, Eau Claire, and Stanley), four villages (Boyd, Cadott, Lake Hallie, and New Auburn), and 23 townships. Bordering counties include Barron and Rusk to the north; Barron and Dunn to the west; Eau Claire to the south; and Clark and Taylor to the east. As of 2019, the U.S. Census Bureau estimated the county's population to be 64,658.[1]

Chippewa Falls, the county seat, is home to 14,366 residents and encompasses a little more than 11 square miles.[1] The city lies approximately 90 miles east of Minneapolis/St. Paul (MN), 180 miles west of Green Bay, and 100 miles north of La Crosse (WI). The main transportation corridors through the area include U.S. Highway 53 and State Highway 29.

Major industries include health care, manufacturing, retail trade, production agriculture, and seasonal tourism. Hospital Sisters Health System (St. Joseph's Hospital), Prevea Health, Marshfield Clinic Health



OTHER DEMOGRAPHIC CHARACTERISTICS[1]

Sex

- Female - 48%
- Male - 52%

Age

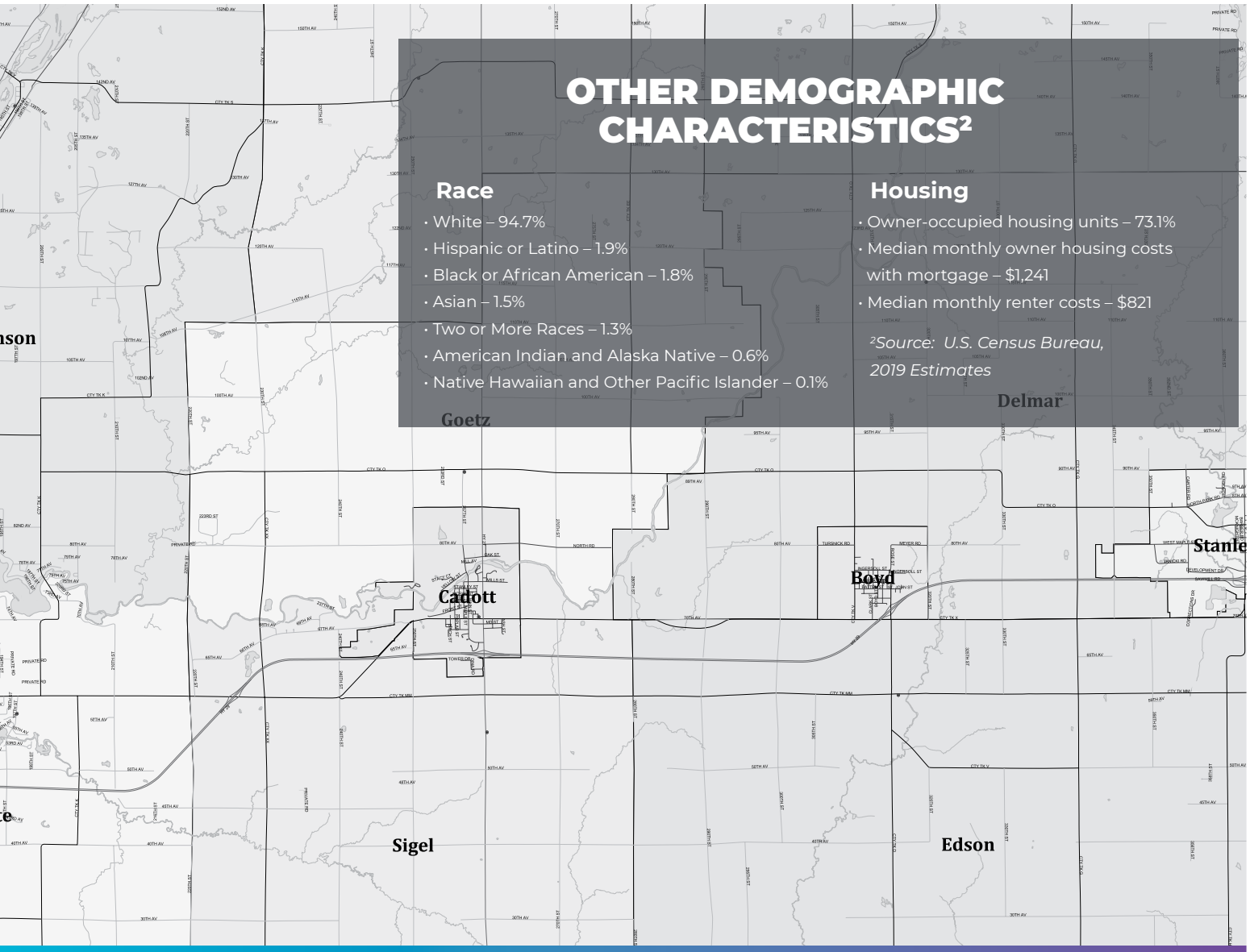
- Persons Under 18 – 21.9%
- Persons 65 and Over – 18.4%

[1]*Source: U.S. Census Bureau, 2019 Estimates*

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

System, Mayo Clinic Health System, and OakLeaf Clinics offer a wealth of health care resources within the county. Other prominent employers include Cray Inc./Hewlett Packard Enterprise, Leinenkugel's, Mason Shoe, and Chippewa Springs Water. Meanwhile 34,500 acres in the Chippewa County Forest, including 22 miles of Ice Age Trail, Lake Wissota State Park, and numerous other lakes, parks, and campgrounds, provide plenty of opportunities for outdoor recreation. Median household income within the county is $59,742, with 8.8% of the population estimated to live in poverty.[1] According to United Way's ALICE (Asset Limited, Income Constrained, Employed) Report, 22% of Chippewa County households in 2018 earned more than the federal poverty level but less than the basic cost of living.

Chippewa Valley Technical College and Lakeland University-Chippewa Valley Center serve as significant hubs of higher education within the county. Just over 20% of residents aged 25 and older have earned at least a bachelor's degree, while nearly 93 percent of the 25+ population have received a high school diploma (or its equivalent).[1]



OTHER DEMOGRAPHIC CHARACTERISTICS[2]

Race

- White – 94.7%
- Hispanic or Latino – 1.9%
- Black or African American – 1.8%
- Asian – 1.5%
- Two or More Races – 1.3%
- American Indian and Alaska Native – 0.6%
- Native Hawaiian and Other Pacific Islander – 0.1%

Housing

- Owner-occupied housing units – 73.1%
- Median monthly owner housing costs with mortgage – $1,241
- Median monthly renter costs – $821

[2]Source: U.S. Census Bureau, 2019 Estimates

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

OVERVIEW

This Community Health Assessment represents the combined efforts of CHA partners in Chippewa and Eau Claire counties. Since both public health departments and non-profit hospital systems are required to conduct such assessments, collaborating on this process reduces duplication of effort, avoids overwhelming the public with numerous, similar surveys and meetings, produces a common understanding of community needs, and fosters synergy in addressing those needs.

As referenced in the **Acknowledgements** section of this report, partners in this effort included:

- **Chippewa County Department of Public Health**
- **Chippewa Health Improvement Partnership**
- **Eau Claire City-County Health Department**
- **Eau Claire Healthy Communities**
- **HSHS Sacred Heart Hospital**
- **HSHS St. Joseph's Hospital**
- **Marshfield Clinic Health System**
- **Mayo Clinic Health System**
- **United Way of the Greater Chippewa Valley**

The 2021 report represents the third consecutive three-year cycle these organizations have worked together on the CHA. These partners also produced joint reports in 2015 and 2018. Each of the public health departments and hospitals, as well as United Way, signed the MOU outlining the purpose of the collaboration and the commitment of each organization. Specifically, each of these organizations provided both a financial contribution and in-kind resources in the form of organizational support (personnel and expertise) to this effort. The two coalitions – Chippewa Health Improvement Partnership and Eau Claire Healthy Communities – provided direct support through participation in the prioritization process; these coalitions also were represented indirectly in the planning partnership by members who also work for one of the other partner organizations.

The Eau Claire City-County Health Department (ECCCHD) served as the fiscal agent for this initiative. In this role, ECCCHD hired a part-time project manager to guide the CHA process, including survey development and distribution, data collection, public meeting facilitation, media contacts, and report writing. Other project expenses included office supplies, advertising, graphic design, and printing.

The CHA partners convened in September 2020 and met bi-monthly until May 2021 to plan and implement the assessment. Due to COVID-19, all planning and public meetings were held virtually – the first time this process has been conducted almost entirely online.

The purpose of the CHA was to engage the public systematically in the identification of health needs and priorities in each county, as well as to encourage participation in positive change through involvement in one of the local health coalitions (Chippewa Health Improvement Partnership or Eau Claire Healthy Communities) or another organization working to address these issues. The results of the

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

CHA serve as the foundation for selecting projects and strategies to improve community health overall, as well as to advance outcomes for specific populations. In particular, coalitions will use data collected through this process to identify and address health disparities and inequities within the county.

The CHA partners modeled their work after the County Health Rankings and Roadmaps Take Action Cycle.As illustrated in FIGURE 1, this cycle depicts a series of steps for transforming community health. This continuous sequence begins with working together to assess community needs and resources and establish points of focus (i.e., set priorities). Communication with and among diverse stakeholders is essential to effective transformation.

For this assessment, the process involved identifying top health priorities through the public evaluation of 14 different health areas based on the state health plan (Healthiest Wisconsin 2020, Wisconsin Department of Health Services). Due to longstanding concerns about both drug use and alcohol misuse and the recognition that community members may hold different perceptions about these issues, the CHA process in Chippewa and Eau Claire counties broke these into separate health areas (versus combining them, as in the state health plan). For similar reasons, the local process also separated out obesity from chronic disease. The 14 health areas evaluated through the CHA process were:

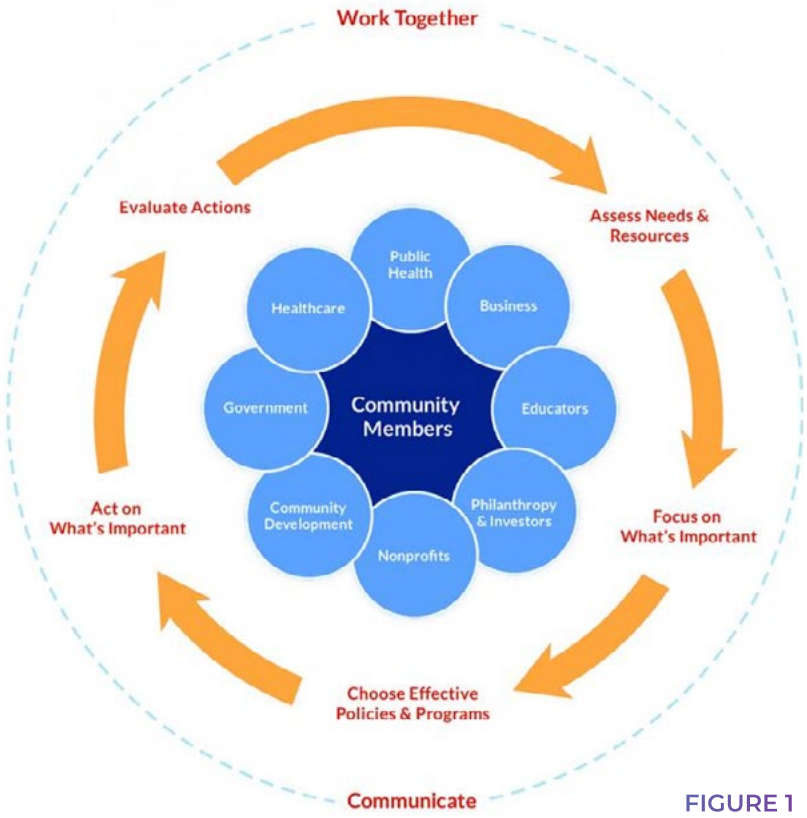


FIGURE 1
Take Action Cycle
Source: County Health Rankings.

- **Alcohol Misuse**
- **Chronic Disease Prevention and Management**
- **Communicable Disease Prevention and Control**
- **Drug Use**
- **Environmental and Occupational Health**
- **Healthy Growth and Development**
- **Healthy Nutrition**
- **Injury and Violence Prevention**
- **Mental Health**
- **Obesity**
- **Oral Health**
- **Physical Activity**
- **Reproductive and Sexual Health**
- **Vaping/Tobacco Use and Exposure**

The CHA partners used several methods to collect both qualitative and quantitative information through the assessment process. The four primary strategies utilized for gathering the data needed to complete this report involved distributing a Community Health Survey, compiling secondary

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data (health comparisons), holding Community Conversations, and meeting with health coalitions (Chippewa Health Improvement Partnership and Eau Claire Healthy Communities). These sequential steps essentially built on each other, as participants in the Community Conversations reviewed both survey results and secondary (local, state, and national) health data, while the coalition meetings also incorporated discussion about themes and priorities emerging from the Community Conversations.

COMMUNITY HEALTH ASSESSEMENT (CHA) TIMELINE

September 2020	Planning partnership convened to plan the CHA
December 2020	Community Health Surveys distributed online for each county
December 2020	Survey status reviewed, additional outreach conducted
January 2021	Secondary (quantitative) health care data compiled
February 2021	Community Conversations held to identify top health priorities
March 2021	Coalition meetings held to determine top health priorities
March 2021	Priority rankings finalized
May 2021	CHA report completed and publicized

DATA COLLECTION METHODS

COMMUNITY HEALTH SURVEY

The CHA partners began their work by developing a Community Health Survey that asked residents of each county about their perceptions of the degree to which each health area poses a problem in their community and the reasons why they considered these areas to be problematic. "Unsure" was added to the list of possible responses this year (see sample question on next page). Respondents also were offered an opportunity on the survey to provide additional comments about each health area. Finally, the survey asked respondents to identify the top three health areas they thought were in need of improvement in their county.

While the survey largely mirrored past versions, two questions added during this cycle sought to inquire about social determinants of health (i.e., social and economic factors that may influence health outcomes). First, individuals were asked about county strengths that support community health. Next, respondents were asked about factors that contribute to community health concerns. In Chippewa County, residents pointed to *parks, health care, and education* as the greatest community strengths

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

and cited the *availability of resources to meet daily needs, socioeconomic conditions and poverty,* and *access to health care* as the greatest concerns.

The survey also asked several demographic questions to identify basic characteristics of respondents. These questions centered around age, gender, race, ethnicity, income, education, employment, housing, and household composition. While these questions were optional, approximately 75% of respondents chose to answer these questions. Responses indicated survey takers were most likely to be White, non-Hispanic females in their 30s, 40s, or 50s. Respondents also tended to have at least a bachelor's degree; be employed full-time; report a higher household income; and own a home. More than half of respondents came from one- or two-person households, and most reported no children under 18 in the household. This information provided insight into which sectors of the population did – and did not – complete the survey. Appendix I compares the demographic profile of survey respondents with that of the county as a whole.

sample question

HOW BIG OF A PROBLEM IS *HEALTHY NUTRITION* IN YOUR COMMUNITY?

- **Not a problem** ☐
- **Slight problem** ☐
- **Moderate problem** ☐
- **Major problem** ☐
- **Unsure** ☐

Several versions of the survey were developed, including full-length, online versions in both English and Spanish on SurveyMonkey and both full-length and "short" paper versions in English and Spanish. The alternate versions were developed as a strategy to solicit greater feedback from non-English speakers and individuals with limited computer access or proficiency. Descriptions of the health areas were simplified per the recommendations of Wisconsin Health Literacy to aid in reading comprehension. Appendix II provides the short English version of the survey.

The CHA partners conducted survey outreach through a variety of methods. These included sharing the SurveyMonkey site through partner distribution lists (including dozens of community organizations), websites, and social media; purchasing ads through Volume One and Facebook; distributing flyers through community organizations such as Feed My People; conducting specific outreach to vulnerable populations through groups such as JONAH (Joining Our Neighbors Advancing Hope), El Centro, and the Eau Claire Area Hmong Mutual Assistance Association; and distributing paper surveys through the Aging and Disability Resource Center (via Meals on Wheels) and Chippewa County Jail. A press release to local media outlets also accompanied release of the survey. Precautions around COVID-19 prevented the more targeted, in-person outreach efforts conducted during past assessment cycles, and the heavy reliance on virtual communication appeared to pose a significant obstacle to more comprehensive community outreach and survey completion.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

A total of 637 Chippewa County residents – slightly more than half of the number from 2018 – completed the survey. Another 132 individuals answered only the first two questions of the survey (pertaining to residency), and these surveys were excluded from the total count, as were another 97 responses that indicated residency in neither Chippewa or Eau Claire counties (non-residents were not allowed to complete the survey).

Those health areas identified most frequently as a "major" concern by survey takers included *Mental Health, Drug Use,* and *Alcohol Misuse,* followed by *Obesity* and *Communicable Disease Prevention and Control*. As shown in FIGURE 2, *Mental Health, Drug Use, Alcohol Misuse,* and *Obesity* topped the list of health areas most in need of improvement.

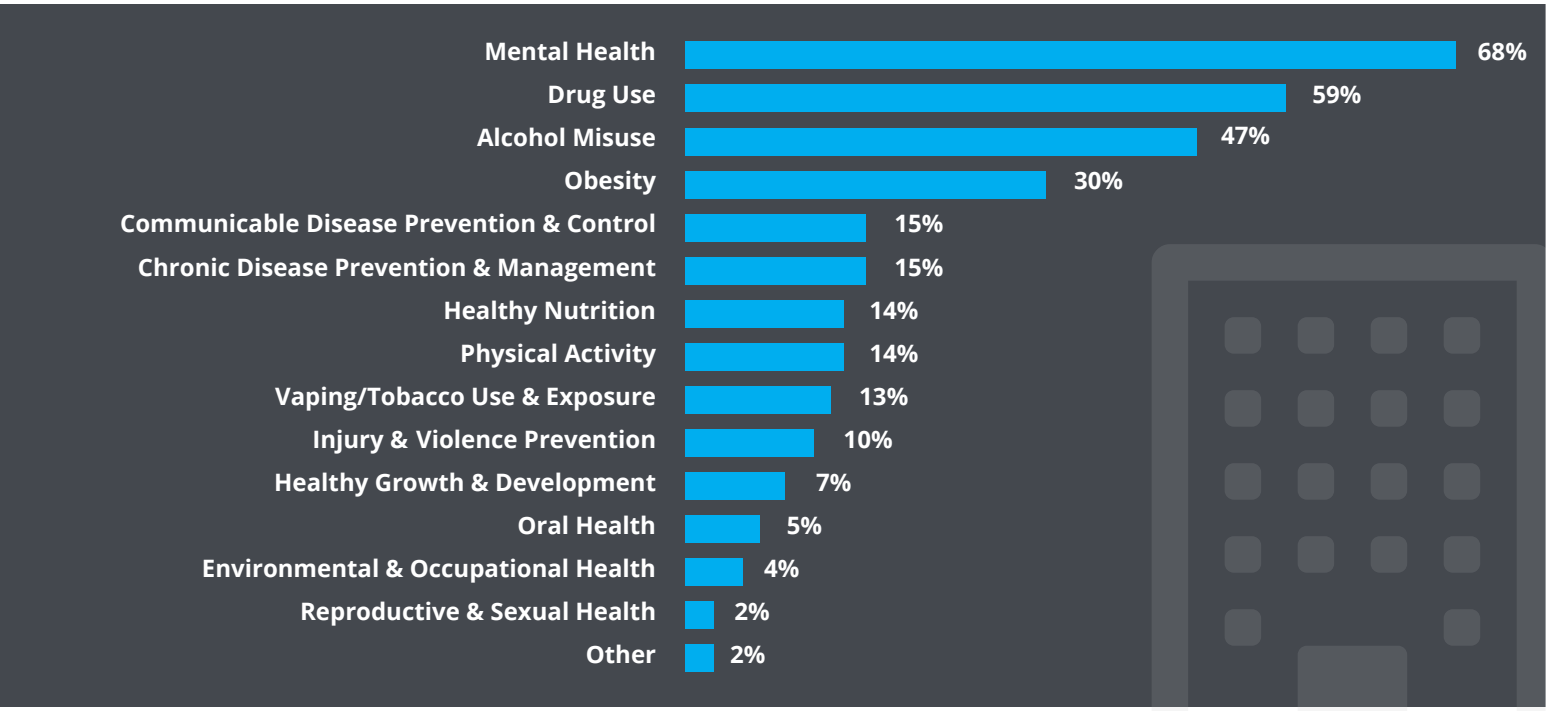

FIGURE 2 Community Health Survey Prioritization

SECONDARY DATA

The next step in the assessment process involved the collection and review of local, state, and national data comparisons in each of the 14 health areas. Although most of these performance indicators followed the recommendations of the Wisconsin Association of Local Health Departments and Boards, the core set of measures was modified based on recent data availability and comparability (based on sources and timeframes). Data sources included the 2020 County Health Rankings, Centers for Disease Control and Prevention (Behavioral Risk Factor Surveillance System, Youth Risk Behavior Surveillance System, etc.), Wisconsin Department of Health Services, and other public resources.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

The information collected through this process provided an objective manner in which to measure overall county health in each of the focus areas. This data, in combination with the survey results, formed the basis for discussion during the subsequent Community Conversations. Comparisons between county and national data also were factored into the final health area prioritization.

Appendix III lists the entire core dataset. Since time limitations prohibited review of every measure during the Community Conversations and coalition meeting, those discussions referenced just a snapshot of the data available for each health focus area. The more comprehensive data compilation remains available for use by the Chippewa Health Improvement Partnership and other organizations and coalitions as they seek to target their efforts and measure progress in community health over time.

NOTE: The Community Health Survey results reveal local perceptions about each of the 14 health areas,

while county, state, and national health data comparisons provide some context for understanding the extent to which these areas are problematic in Chippewa County. The **Health Focus Area Summaries** section of this report provides an overview of both resident perceptions and key secondary data.

COMMUNITY CONVERSATIONS

The survey results and secondary data points were presented during a series of three online public Community Conversations in February. Sessions were held at different times – morning, afternoon, and evening – over the course of two days (Feb. 10 and 11) to provide multiple opportunities for participation. Once again, these events were publicized widely through e-mail, websites, social media, and other means. The CHA partners conducted outreach to and through health care and other service providers, local government, libraries, senior centers, educational institutions, churches, and the Chamber of Commerce, among other community organizations. A press release to local media outlets also preceded the conversations.

discussion questions

WHICH HEALTH AREAS HAVE THE LARGEST COMMUNITY IMPACT?

Consider which areas have a high number of people affected, which areas affect certain groups more than others, and how big the problem is in our community.

WHICH HEALTH AREAS HAVE THE MOST SERIOUS IMPACT?

Which areas result in disability, death, have long-term effects, or need action right now? Is the problem getting worse? Will the problem get worse if no action is taken?

WHICH AREAS ARE OUR COMMUNITY READY TO CHANGE?

Will the community accept new or added programs? Are new programs wanted in certain areas? Is change on a local level reasonable?

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

These sessions provided an opportunity to dig deeper into local health impacts and prioritization criteria through focused breakout room discussions. The CHA partners facilitated these small groups to help participants work through a series of questions intended to pinpoint community health needs. These groups then reconvened in the large group and reported out major discussion points. Each session culminated in an online health focus area prioritization poll.

Once again, participants indicated the top three health areas they would like to target for improvement in Chippewa County. *Mental Health, Drug Use, Alcohol Misuse, Chronic Disease Prevention and Control* and *Obesity* topped this list (see FIGURE 3). Thirty-seven individuals, representing many different sectors of the community (health care, education, hunger relief, aging, etc.), participated in the prioritization exercise.

An evaluation conducted following the Community Conversations provided participants with an opportunity to indicate interest in joining Chippewa Health Improvement Partnership to work on addressing priority health needs. Nearly a third of respondents indicated they were or may be interested in joining this coalition, which seeks to improve the health and quality of life in the county.

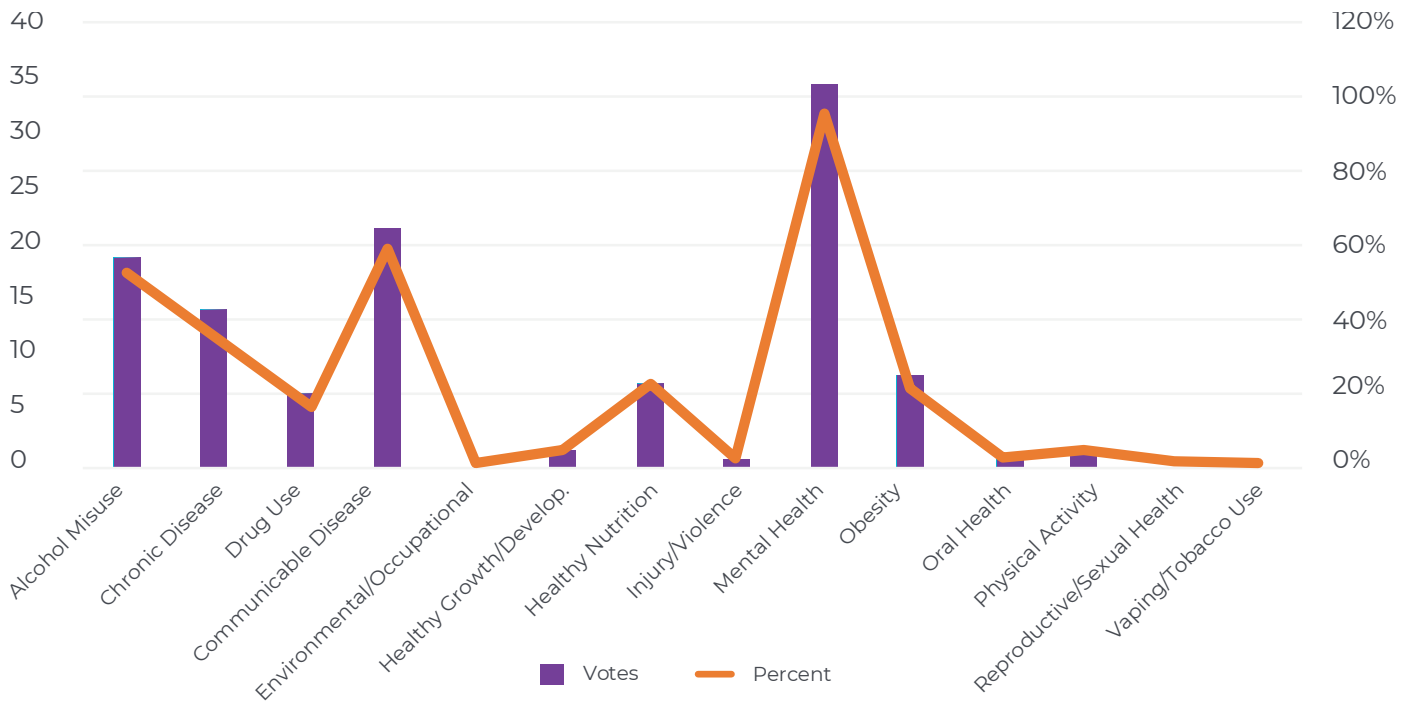

FIGURE 3 Community Conversations Prioritization

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COALITION MEETING

Meeting with members of Chippewa Health Improvement Partnership served as the final major step of the assessment process. The CHA project manager provided an overview of the previous three components to more than two dozen coalition members on March 5. This background provided context for additional small group discussions. Those present represented a wide range of community backgrounds and health interests, lending broad expertise to this exercise. The CHA partners facilitated virtual breakout room discussions around the same set of questions posed during the Community Conversations and then summarized key takeaways upon reconvening the full group. Prior to adjourning, participants indicated their top three health priorities via an online poll.

Once again, *Mental Health* dominated both the online discussion and voting landscape, and consensus around the importance of addressing this issue was near unanimous. *Drug Use* and *Alcohol Misuse* also received a majority of votes. The interconnectedness of many health areas also emerged as a common theme within group conversations.

FINAL PRIORITIES

As noted previously, the CHA partners used a weighted matrix to determine a priority order for each of the 14 health focus areas. This part of the process involved scoring each of the areas based on the results of the prioritization question in the survey, comparison of local and national data, and voting by participants in the Community Conversations and coalition meeting. The secondary data comparison involved an examination of comparable performance indicators using like sources and timeframes. This calculation excluded measures that lacked a direct comparison of local and national data (e.g., in some cases, only local and state or state and national data were available from the same source). A ratio system then was used to determine the degree to which Chippewa County exceeds or falls below national averages for each of the measures. The four components were weighted as follows: Community Health Survey – 35%, secondary data – 35%, Community Conversations – 20%, and coalition meeting (Chippewa Health Improvement Partnership) – 10%.

Final scoring via the prioritization matrix revealed ***Mental Health*** as the county's top health priority. Indeed, this topic rose to the forefront of nearly every small group discussion not just for its individual impact but for its bearing on nearly every other health issue as well. Meeting participants often noted a link between *Mental Health, Drug Use, Alcohol Misuse, Physical Activity, Healthy Nutrition, Obesity,* and *Chronic Disease*, for example. This health area easily out distanced all others in the final ranking.

Alcohol Misuse ranked next in the final prioritization order. Again, this ranking largely mirrored public perception as indicated by survey data and the discussions that took place during both the Community Conversations and coalition meeting. Meeting participants did question community readiness for change in this area due to the cultural acceptance of alcohol use in Wisconsin.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

Chronic Disease, Drug Use, and ***Obesity*** followed in the health rankings. It is important to note again that much discussion took place regarding the inter-relatedness of these issues with other health areas, including *Healthy Nutrition, Physical Activity,* and *Mental Health*. Consequently, many discussion groups noted the importance of attacking "root causes" to improve health in a more comprehensive manner.

While *Communicable Disease* received more attention during this assessment cycle due to COVID-19, concern about this area was not significant enough to elevate it into the top tier of health priorities. Nonetheless, many discussion groups reported the negative impact of the pandemic on virtually every other health area.

The top five health priorities over the past three cycles are listed below, along with the 2021 ranking of the other health focus areas. Other than *Chronic Disease*, these rankings reflect fairly consistent perceptions about the highest-ranking priorities over an extended period of time.

TOP 2015 HEALTH PRIORITIES

Mental Health
Obesity
Alcohol Misuse
Drug Use
Healthy Nutrition

TOP 2021 HEALTH PRIORITIES

Mental Health
Alcohol Misuse
Chronic Disease
Drug Use
Obesity

TOP 2018 HEALTH PRIORITIES

Mental Health
Alcohol Misuse
Drug Use
Obesity
Physical Activity

ADDITIONAL 2021 HEALTH PRIORITIES

Communicable Disease
Physical Activity
Healthy Nutrition
Oral Health
Vaping/Tobacco Use and Exposure
Healthy Growth and Development
Injury and Violence Prevention
Environmental and Occupational Health
Reproductive and Sexual Health

DATA USE

Chippewa County has several collaborative partnerships that benefit from a wealth of community support and sustainable resources to improve programs and policies around community health. The CHA report will be used by these coalitions, as well as individual organizations, to prioritize funding applications, build on existing strengths, support continuous quality improvement, address health needs and disparities, and engage stakeholders and policy makers in system-level change to improve community health in Chippewa County. This CHA and supporting documentation will be shared among partner organizations and made available publicly on partner and coalition websites.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

Chippewa Health Improvement Partnership, in particular, will use this information to identify collaborative goals and evidence-based strategies that address complex health issues through development of a Community Health Improvement Plan. This plan in turn provides a framework for guiding the work of the coalition action teams during the three-year period between health assessments.

SOCIAL DETERMINANTS OF HEALTH

The CHA partners feel strongly about referencing Social Determinants of Health (SDOH) as a framework for understanding and improving community health. As defined by the U.S. Department of Health and Human Services, SDOH are "the conditions where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks." The national health plan, Healthy People 2030, divides these factors into five separate domains as described below.

Economic Stability underscores the connection between financial resources and health. Consequently, issues like employment, food security, housing stability, and poverty fall under this domain.

Education Access and Quality links education to health and well-being. Early childhood education, literacy, high school graduation, and higher education all fall into this realm.

Health Care Access and Quality involves the connection between understanding health services, accessing those services, and personal health. Issues like health literacy and insurance access fall under this category.

FIGURE 4 Social Determinants of Health | *Source: Healthy People 2020*

Neighborhood and Built Environment involves the association between where a person lives (housing, neighborhood, and environment) to health and well-being. Examples of issues under this domain include air and water quality, transportation, and crime.

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Social and Community Context relates health and well-being to the context within which people live, learn, work, and play. Community cohesion, discrimination, workplace conditions, and incarceration all serve as important indicators within this category. FIGURE 4 depicts these five domains as working together to support community health.

This model recognizes that not all people receive the same opportunities to thrive and that inequity in these life conditions contributes to disparities in well-being. Consequently, improving health requires addressing the root causes that influence health outcomes. In other words, socioeconomic conditions and the physical environment, in addition to health behaviors and clinical care, must be addressed to provide all members of society with the opportunity to achieve optimal health.

This CHA cycle began to incorporate consideration of SDOH by asking survey respondents to identify those community factors that support health and those issues that serve as barriers to well-being.

survey questions

What are the greatest strengths in your county in relation to community health?

Which of the factors contribute most to your top community health concerns?

As noted earlier in the report, *parks, health care,* and *education* were named most often as community strengths. Conversely, issues like *mental health* and *substance use treatment access* and *transportation options* received relatively few mentions as strengths.

Meanwhile, issues like the *availability of resources to meet daily needs, socioeconomic conditions and poverty,* and *access to health care* topped the list of conditions that pose health concerns.

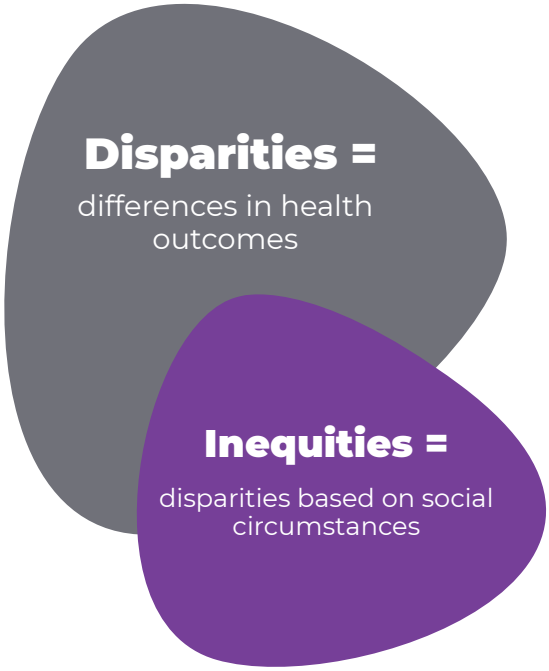
There was some evidence that discussion group participants factored these issues into their conversations. For example, some groups asked how parks could be leveraged more as a strength to support community health.

Organizations can work together to impact social determinants (i.e., root causes) through unified planning and policy. This approach requires community partners across public and private sectors to incorporate health considerations into all policy decisions in order improve health outcomes and quality of life for every segment of society.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

HEALTH DISPARITIES AND INEQUITIES

Improving the health of all people in the community by nature mandates a focus on identifying health disparities and addressing inequities. Health disparities are population-based differences in health outcomes linked to social, economic, and/or environmental disadvantages. Under this premise, equal outcomes cannot be realized until individuals receive the same opportunities to achieve health and wellness. Consequently, more or different resources may need to be directed toward certain sectors of the community in order to produce the same results found elsewhere.



In other words, equity must precede equality. While equality assumes that similar inputs will produce the same outcomes, equity recognizes that people start from dissimilar places and thus benefit differently from those same inputs. FIGURE (5) illustrates the difference between a one-size-fits-all approach (equality) and a targeted approach that meets the needs of specific populations (equity).

While county-level data on health disparities is limited, the assessment process provided at least some insight into existing inequities. Examples of these societal disadvantages as they relate to the Social Determinants of Health are described below.

The issue of *Economic Stability* is referenced in the 2018 United Way ALICE Report for Chippewa County, which estimates the number and percentage of households with income below the poverty level or above the poverty level but below the basic cost of living for the area. The report indicates that individuals aged 65 and older comprise a little over a quarter of households within the county – and the largest percentage of households (37%) that fall within the ALICE income threshold. The report also provides a revealing glimpse into the locations within the county most affected by lower incomes. For example, 45% of households in the Village of Cadott, 44% in the City of Chippewa Falls, 43% in the City of Stanley, 42% in the City of Cornell, and 41% in the City of Bloomer report income at the poverty or ALICE level. This indicates many older adults and families in the county may struggle to pay for everyday expenses such as food, healthcare, technology, and transportation.

Additionally, the County Health Rankings indicate that 9% of households in Chippewa County face a severe housing cost burden – that is, housing costs account for at least 50% of household income for these individuals and families. This burden leaves even fewer resources to meet other basic needs, resulting in further financial stress.

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It may not be surprising then that survey respondents reported affordability concerns in many health focus areas, including *Mental Health, Drug Use, Healthy Nutrition,* and *Chronic Disease* or that these individuals indicated the *availability of resources to meet daily needs* and *socioeconomic conditions* pose significant obstacles to community health.

The County Health Rankings also report the county's income equality ratio at 4.0 – that is, households with income at the 80th percentile make four times the income of households at the 20th percentile. CHR notes that income inequality serves as a social stressor by highlighting differences in social class and status and decreasing social connectedness, a concern highlighted in the *Social and Community Context* domain of the SDOH.

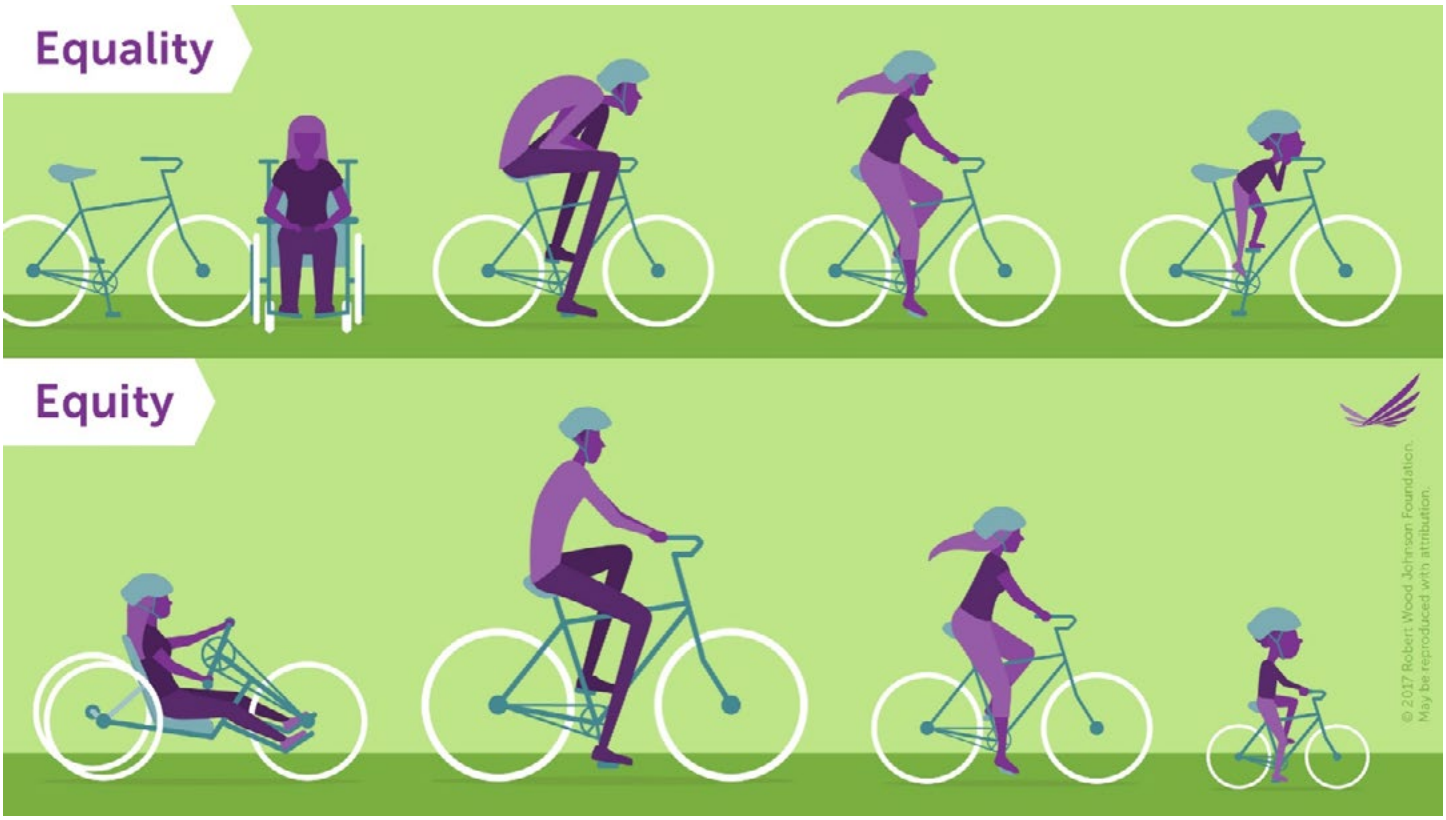

FIGURE 5 **Equality Vs. Equity** | *Source: Robert Wood Johnson Foundation (2017)*

Meanwhile, *Health Care Access* poses other obstacles to community health in Chippewa County. Most survey respondents who indicated *Mental Health* is a problem within the county cited the cost of services, awareness of services available, and access to those services as reasons for the problem. Access concerns may stem in part from the ratio of population to mental health providers in the county, which is more than twice that of the state rate and nearly three times that of the national rate. Similarly, the majority of respondents who indicated *Oral Health* is a problem in the county specified the lack of dental clinics accepting BadgerCare (for lower income residents) and other access issues as barriers to care. The ratio of residents to dentists in Chippewa County also exceeds the state rate by a significant margin. Provider availability serves as one important component of *Health Care Access*.

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Finally, the rural nature of the county may explain why only 15.5% of county residents have a fluoridated municipal water system – a stark difference from the state rate of 88.4%. This example demonstrates how the *Neighborhood and Built Environment* can impact community health.

A new Community Health Needs Assessment tool developed by the Wisconsin Hospital Association may help pinpoint the actual health disparities influenced by these inequities by hospital service areas and zip codes in the future. Greater clarity around these issues will aid development of effective plans and strategies to address community health needs.

The assessment process did seek to incorporate the input of populations that may face health disparities and inequities by reaching out to a variety of community organizations and agencies – from meal sites to jails to senior centers to churches – to distribute flyers and surveys, as well as to publicize the Community Conversations. While professionals within the community lent a great deal of expertise to this exercise, the CHA partners recognize more participation from individuals within vulnerable population groups would have contributed valuable input to the assessment process.

COMMUNITY ASSETS INVENTORY

Finally, Chippewa County is home to many service providers and other organizations committed to improving community health and well-being. Many of these entities are actively involved in collaborative and individual efforts to address health needs within the county. These organizations serve as community strengths that support well-being in Chippewa County. In conjunction with the assessment process, the CHA partners collected and shared information to develop the resource inventory provided in Appendix IV of this document. While not exhaustive, this list offers a glimpse into local assets that may be leveraged to improve community health.

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Health Focus Area

Summaries

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

MENTAL HEALTH

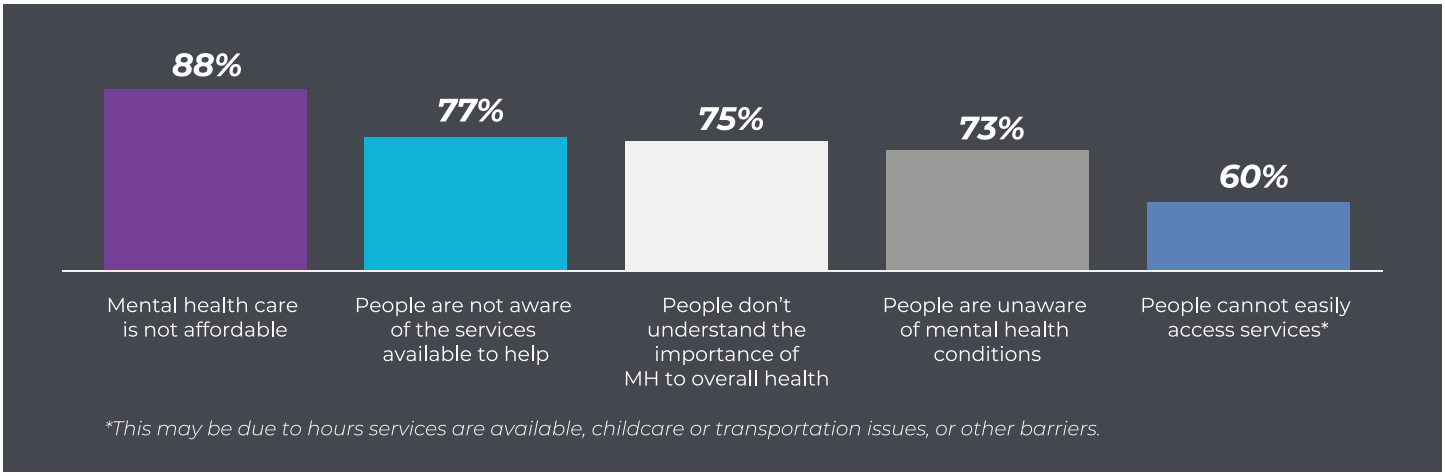
#1 HEALTH PRIORITY

Communities are healthier when all people can get help with mental health conditions like:

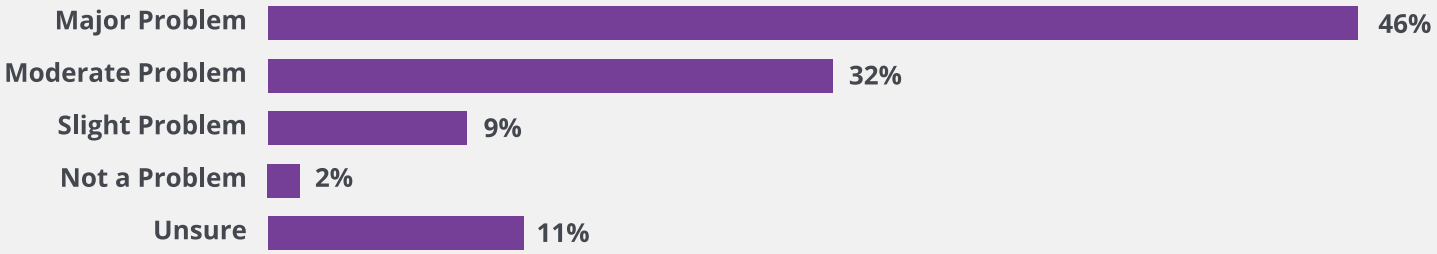
- Depression
- Post-Traumatic Stress Disorder (PTSD)
- Suicidal Thoughts
- Anxiety
- Bi-Polar Disorder

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Mental Health a problem in our county?



How serious is this health area in Chippewa County?



did you know?

According to Prevent Suicide Wisconsin, the state's suicide rate increased by 40% between 2000-2017.

- The majority of suicide deaths were male (2013-2017).
- Suicide rates were highest among American Indians/Alaskan Natives and Whites (2013-2017).
- Suicide rates were highest among ages 45-54 (2013-2017).

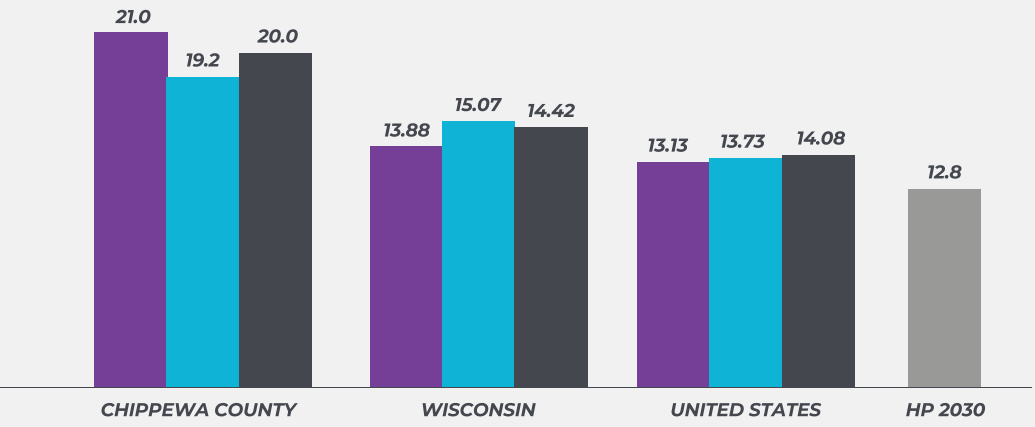
Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

MENTAL HEALTH

#1 HEALTH PRIORITY

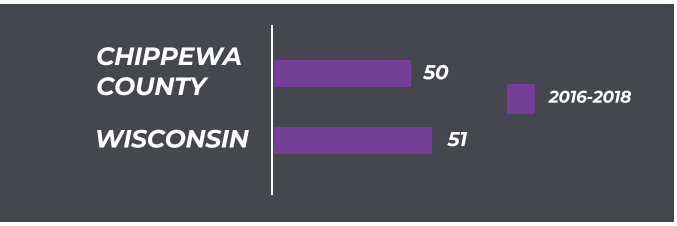
CONTINUED

Suicide Rate per 100,000 People (age-adjusted)[1]



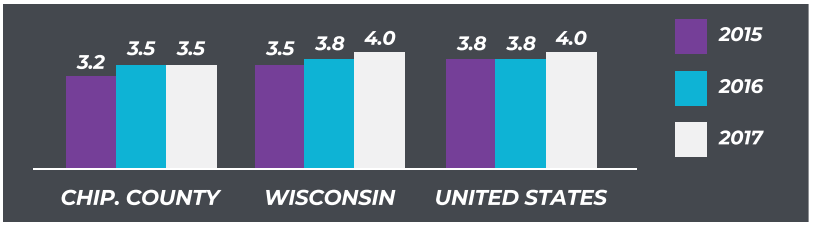
[1]CDC Web-based Injury Statistics Query and Reporting (WISQARS, 2018-2019)

Self-inflicted Injury Hospitalizations per 100,000 People[2]



[2]County Health Rankings (Wisconsin Interactive Statistics on Health)

Average Number of Mentally Unhealthy Days Reported in the Past 30 Days (age-adjusted)[3]



[3]County Health Rankings (Behavioral Risk Factor Surveillance System)

The Ratio of Population to Mental Health Providers[4] in Chippewa County is higher than that of both the state and the nation. A higher ratio generally indicates lesser service availability.

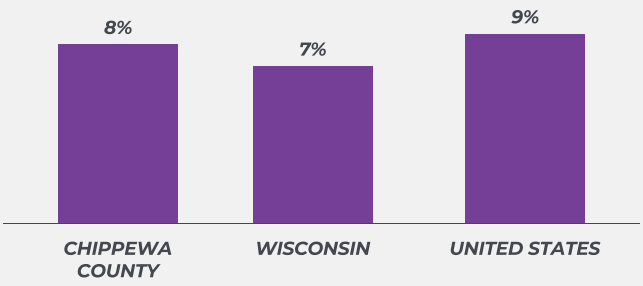
1,110 to 1 Chippewa County

490 to 1 Wisconsin

400 to 1 United States

[4]2020 County Health Rankings (CMS, National Provider Identification file, 2019)

Percent of High School Students Who Attempted Suicide in the Past 12 Months[5]



[5]Youth Risk Behavior Surveillance System (2019)

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ALCOHOL MISUSE

HEALTH PRIORITY #2

Alcohol misuse is when using alcohol can cause problems. It can affect the community and cause:

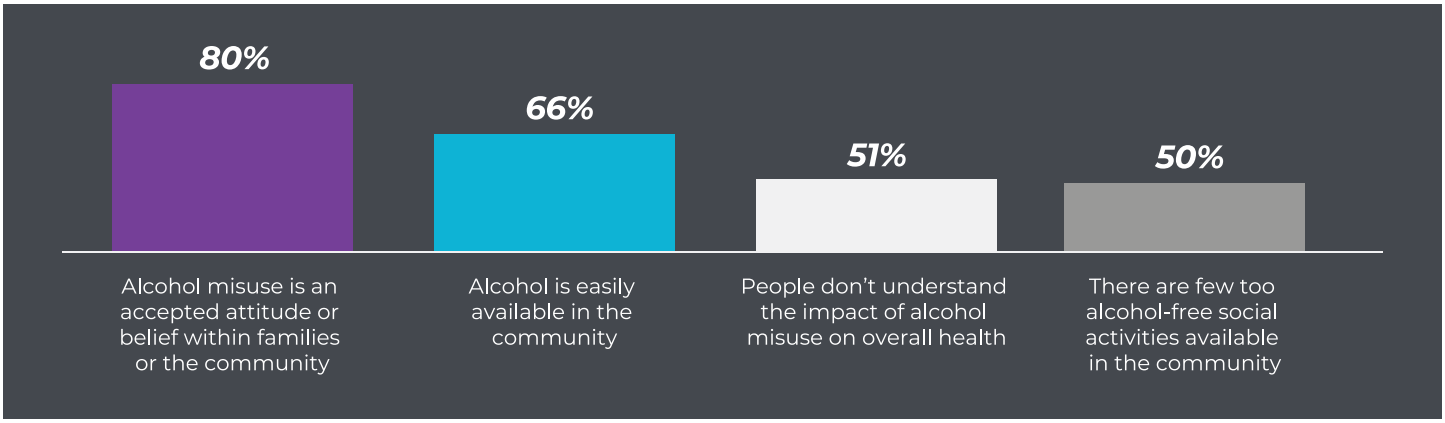
- Car Crashes
- Crimes and Violence
- Injuries or Death
- Alcohol Addiction and Dependence

Alcohol misuse is when:

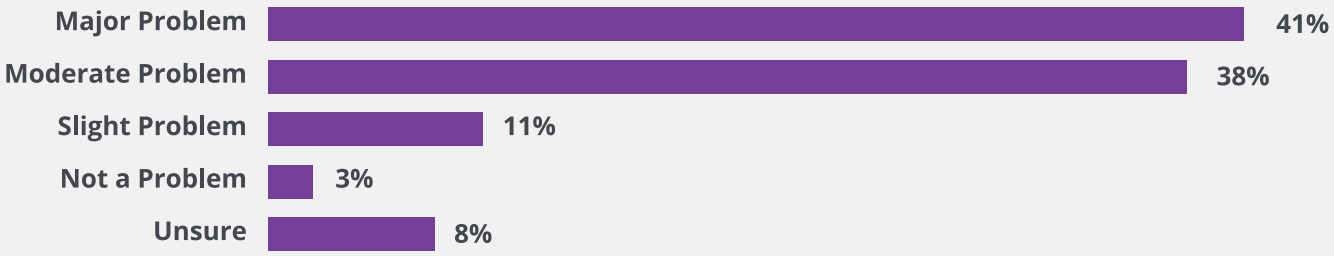
- People under 21 years old drink alcohol
- Pregnant women drink alcohol
- Any person binge drinks (4+ drinks a day for women, 5+ drinks a day for men)

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Alcohol Misuse a problem in our county?



How serious is this health area in Chippewa County?



did you know?

Binge Drinking - When women consume more than 4 alcoholic beverages or men consume more than 5 alcoholic beverages over about a 2-hour period of time.

Heavy Drinking - When women drink more than 1 alcoholic beverage per day on average or men consume more than 2 alcoholic beverages per day on average.

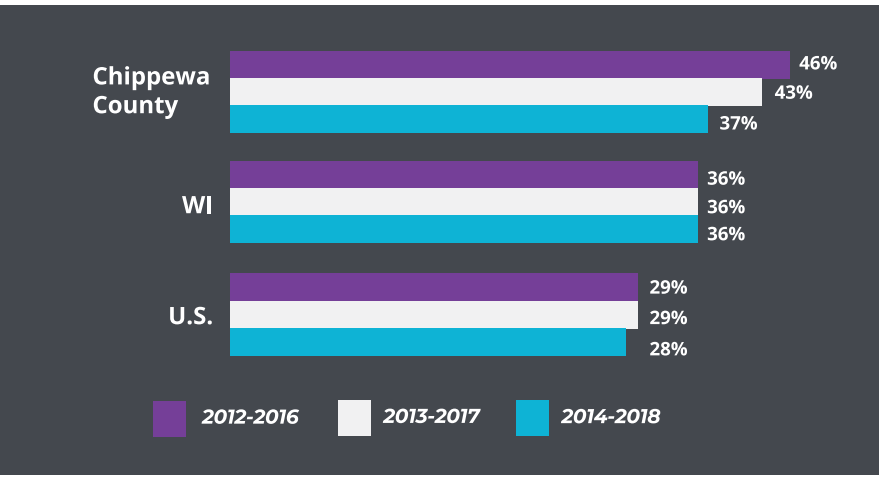
Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ALCOHOL MISUSE

HEALTH PRIORITY #2

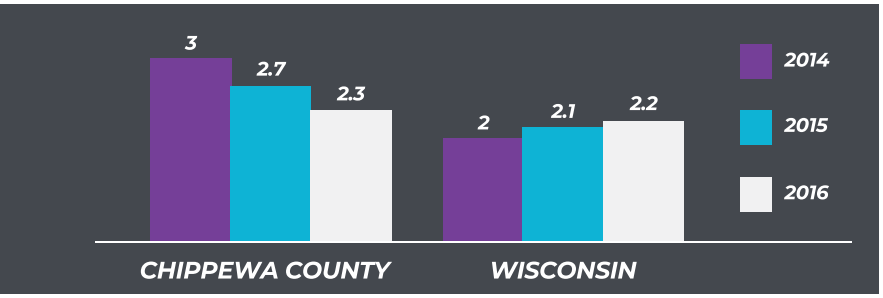
CONTINUED

Percent of Motor Vehicle Deaths Involving Alcohol[1]



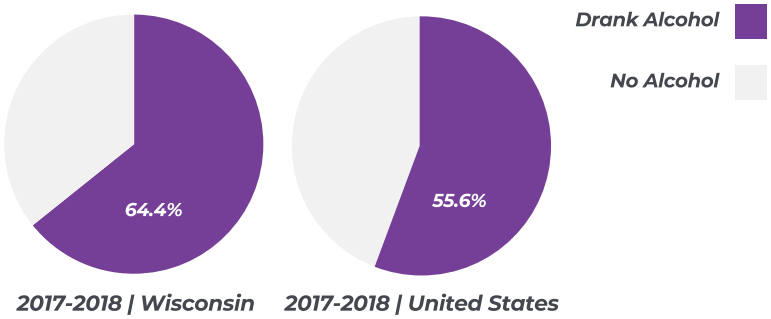
[1]County Health Rankings (Fatality Analysis Reporting System)

Alcohol-related Hospitalizations per 1,000 People[3]



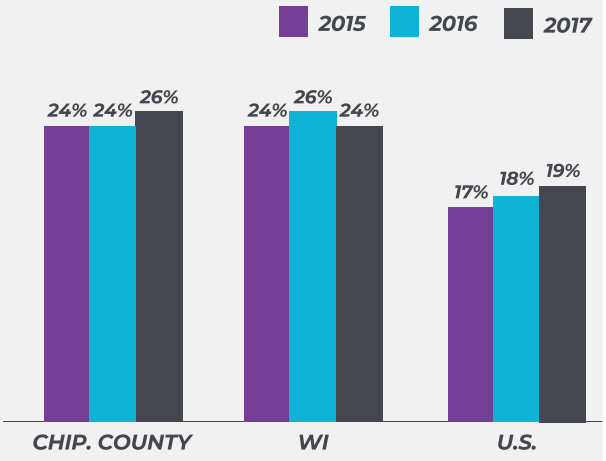
[3]County Health Rankings (WI Public Health Profiles)

Percent of Adults (18+) Drinking Alcohol in the Past 30 Days[4]



[4]National Survey on Drug Use and Health

Percent of Adults Who Engage in Excessive Drinking (binge drinking or heavy drinking)[2]



[2]County Health Rankings (Behavioral Risk Factor Surveillance System)

Percent of High School Students Drinking Alcohol in the Past 30 Days[5]

37% Chippewa County

30% Wisconsin

29% United States

6.3% *Healthy People 2030* target (for ages 12-17)

[5]Youth Risk Behavior Surveillance System (2019)

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

CHRONIC DISEASE PREVENTION & MANAGEMENT

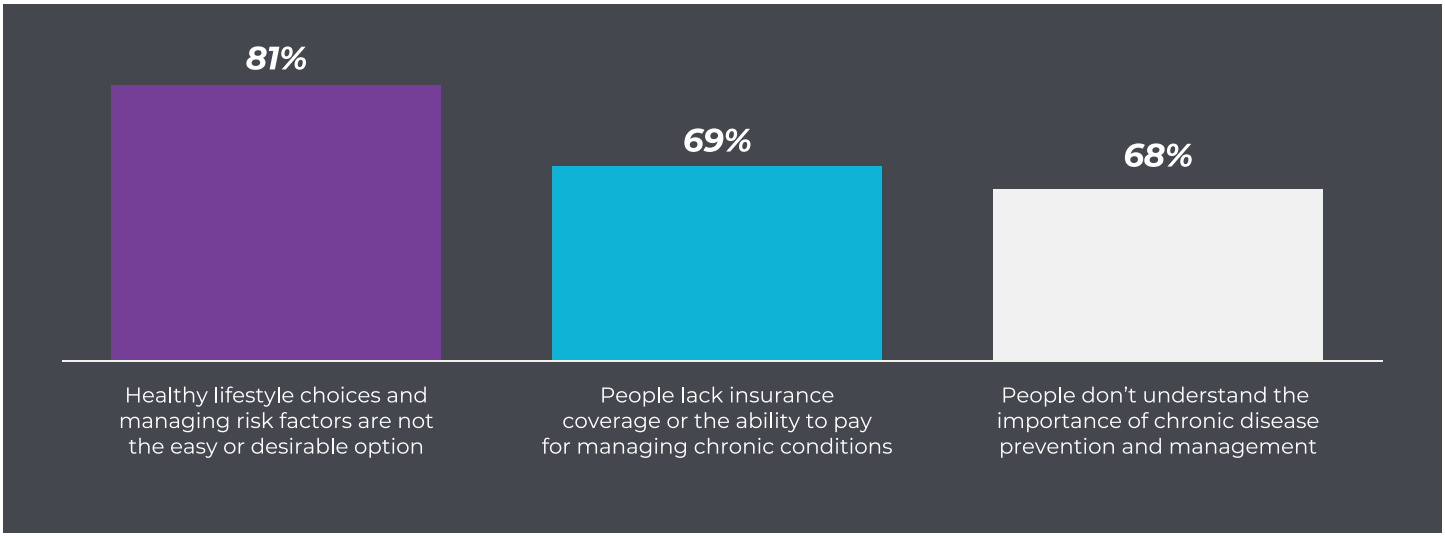
HEALTH PRIORITY #3

Healthier communities help people prevent and manage chronic diseases like:

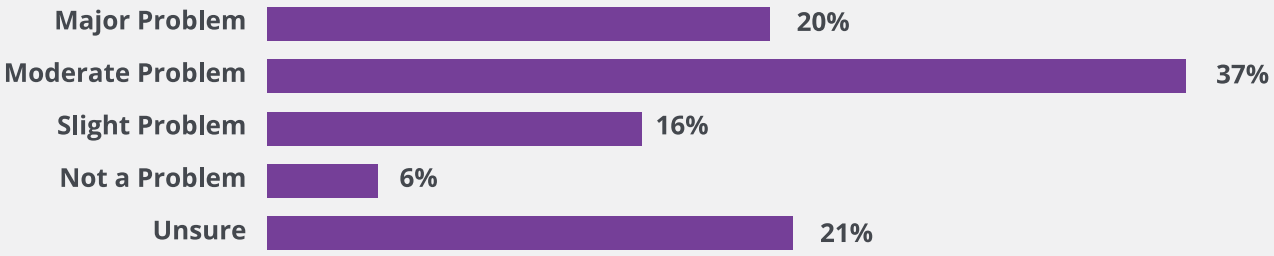
- Heart Disease
- Cancer
- Diabetes
- Asthma
- Arthritis
- Alzheimer's Disease and/or Related Dementia

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Chronic Disease Prevention & Management a problem in our county?



How serious is this health area in Chippewa County?



Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

CHRONIC DISEASE PREVENTION & MANAGEMENT

HEALTH PRIORITY #3

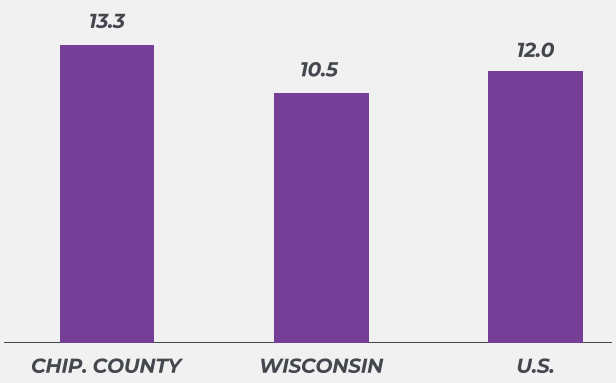
CONTINUED

Rate of New Cancer Diagnoses per 100,000 People (age-adjusted)[1]

Location	Male	Female	Total
Chippewa County	526	452	483
Wisconsin	504	438	465
United States	489	422	449

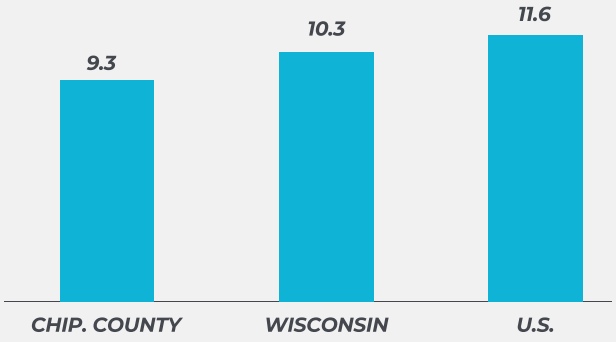
[1] Centers for Disease Control and Prevention (United States Cancer Statistics: Data Visualizations, 2013-2017)

Coronary Heart Disease Hospitalizations per 1,000 Medicare Beneficiaries 65+[2]



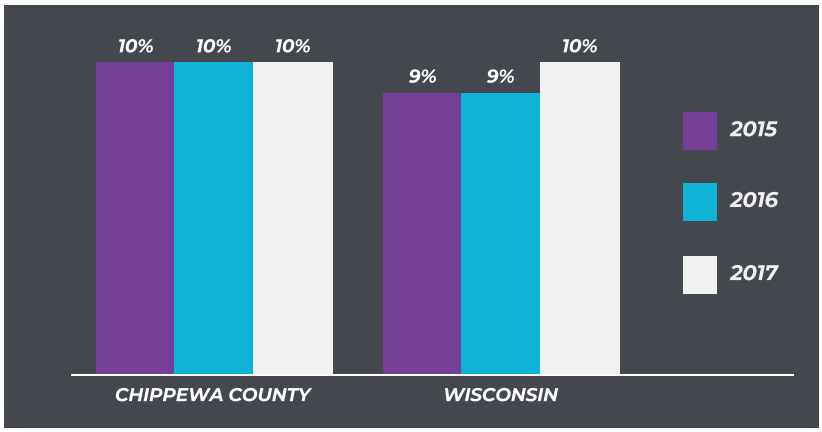
[2] CDC (Interactive Atlas of Heart Disease and Stroke, 2015-2017)

Stroke Hospitalizations per 1,000 Medicare Beneficiaries, 65+[3]



[3] DC (Interactive Atlas of Heart Disease and Stroke; 2015-201

Percent of Adults Age 20+ with Diagnosed Diabetes[4]



[4]CDC (Diabetes Interactive Altas)

Percent of Diabetic Medicare Enrollees Ages 65-75 Who Received HbA1c Screening in Past Year[5]

Chippewa County	**92.1%**
Wisconsin	**91.0%**
United States	**85.7%**

[5] Dartmouth Atlas of Health Care (2015)

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DRUG USE

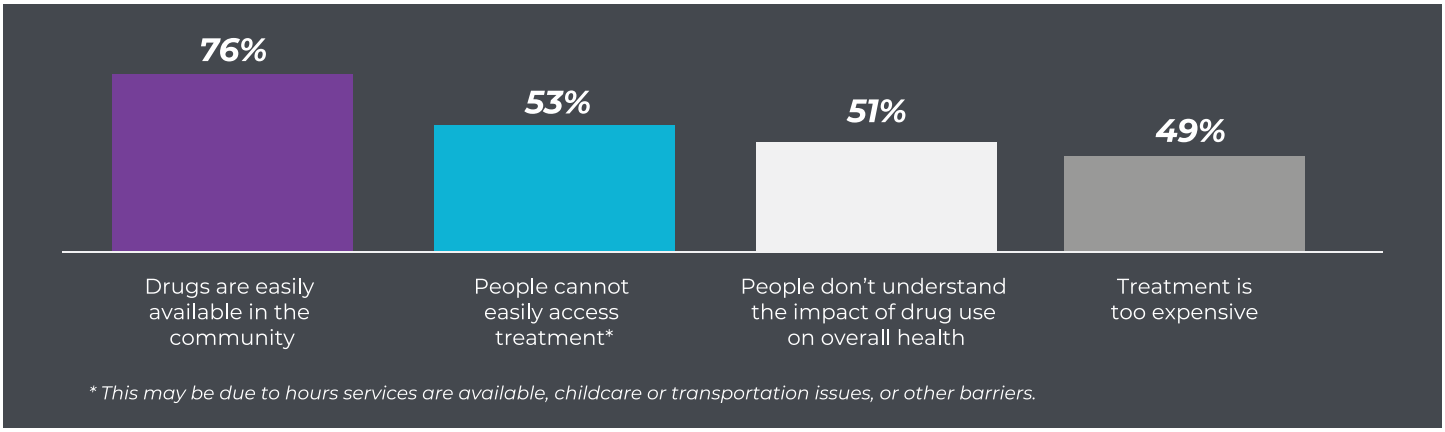
HEALTH PRIORITY #4

Misuse of prescription drugs and use of illegal drugs (marijuana, heroin, methamphetamine, and others) can affect the community and cause:

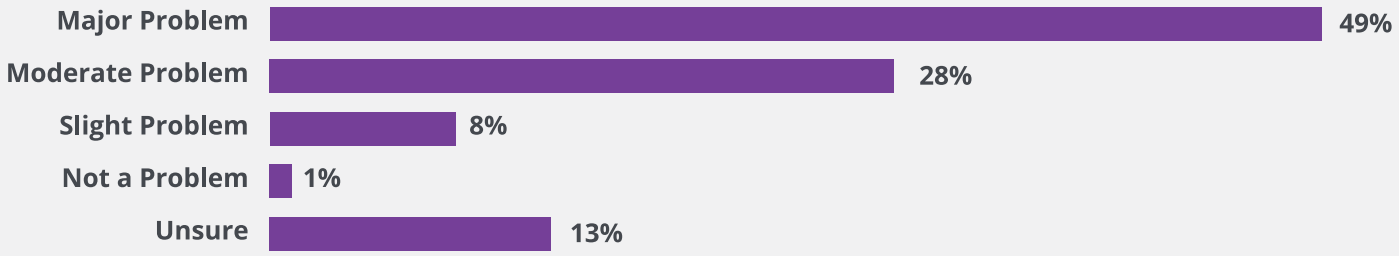
- Car crashes
- Crimes and violence
- Injury or death
- Drug addiction and dependence

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Drug Use a problem in our county?



How serious is this health area in Chippewa County?



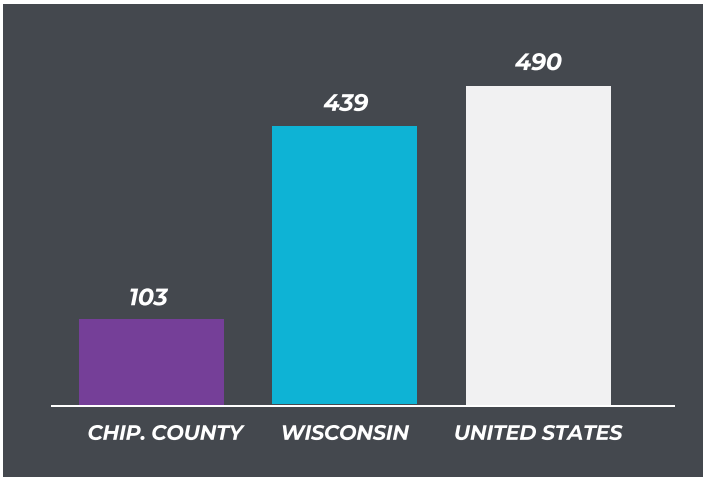
did you know?

- According to the federal Substance Abuse and Mental Health Services Administration (SAMHSA), methamphetamine is not only highly addictive but poses extreme health risks.
- *Short-term effects* can include: higher blood pressure and body temperature; rapid or irregular heartbeat; disturbed sleep patterns; and bizarre, aggressive, or violent behavior.
- *Long-term effects* can include: permanent heart and brain damage; paranoia, delusions, or violent behavior; skin sores from intense itching and scratching; and severe dental problems.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

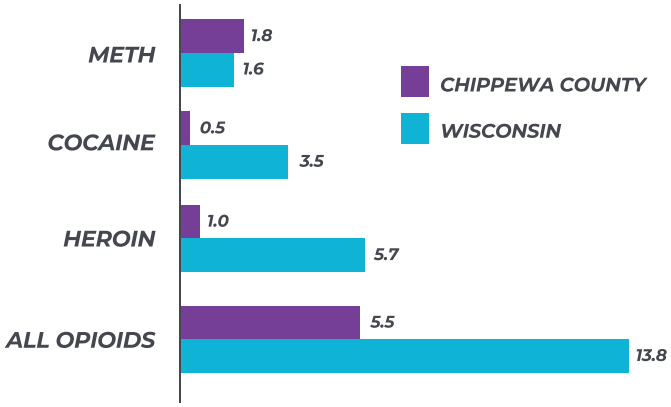
DRUG USE

Drug Arrests per 100,000 People[1]



[1]2016 Wisconsin Epidemiological Profile on Alcohol and Other Drug Use (2014)

Rate of Drug Overdose Deaths per 100,000 People[2]



[2]WI Department of Health Services (Substance Use: Drug Overdose Deaths Dashboard, 2014-2019)

Rate of Emergency Room Visits for Opiod Overdoses per 100,000 People[3]

23.4 Chippewa County

42.0 Wisconsin

[3]WI Department of Health Services (Data Direct, Opioid Hospitalization Module, 2018)

Overall Rate of Drug Poisoning Deaths per 100,000 People[5]

13 Chippewa County

19 Wisconsin

[5]2020 County Health Rankings (National Center for Health Statistics – Mortality Files, 2016-2018)

High School Student Drug Use[4]

Measure	Chip. County	WI	U.S.
% who used Marijuana in the past month	15%	20%	22%
% who used Meth one or more times	3%	2%	2%
% who used ever misused Prescription Pain Medication	12%	11%	14%

[4]Youth Risk Behavioral Surveillance System (2019)

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OBESITY

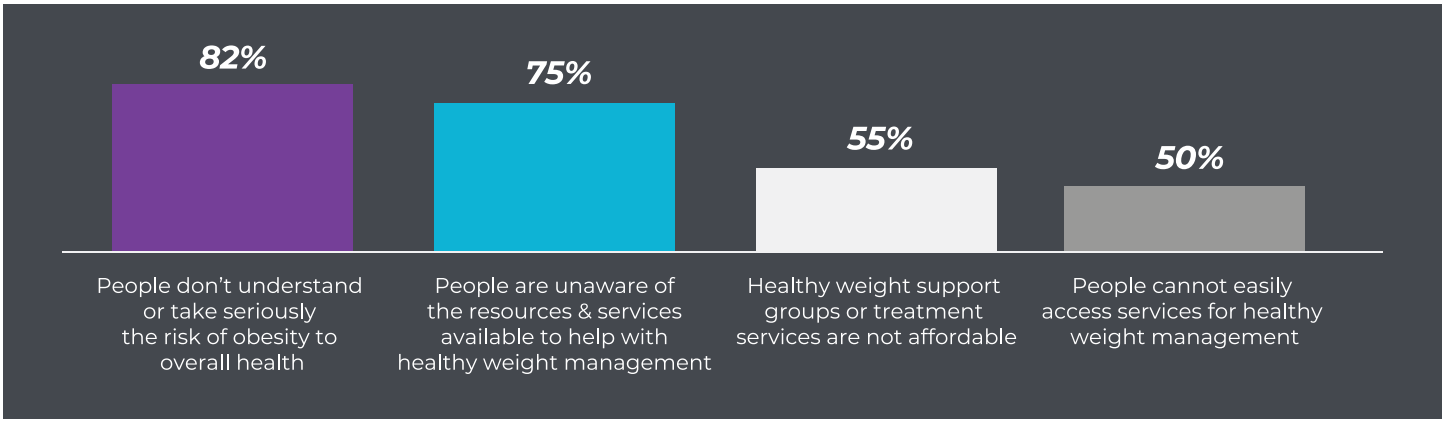
HEALTH PRIORITY #5

People who are obese, or have too much body fat, have more risk for:

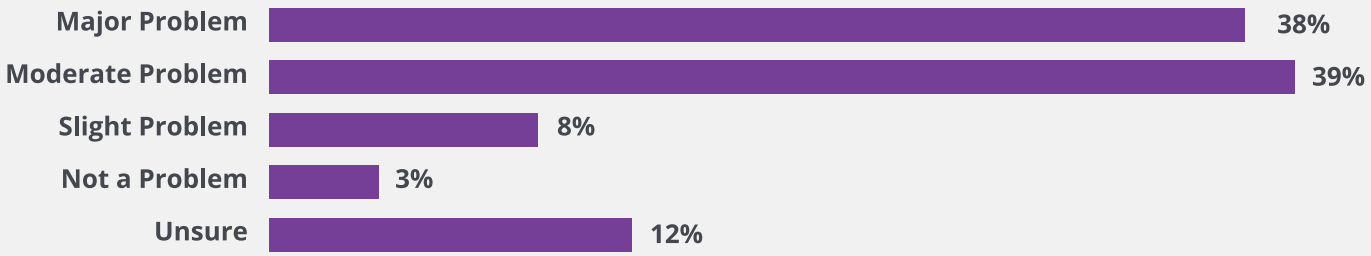
- Heart Disease
- Type 2 Diabetes
- Stroke
- Certain Types of Cancer

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Obesity a problem in our county?



How serious is this health area in Chippewa County?



did you know?

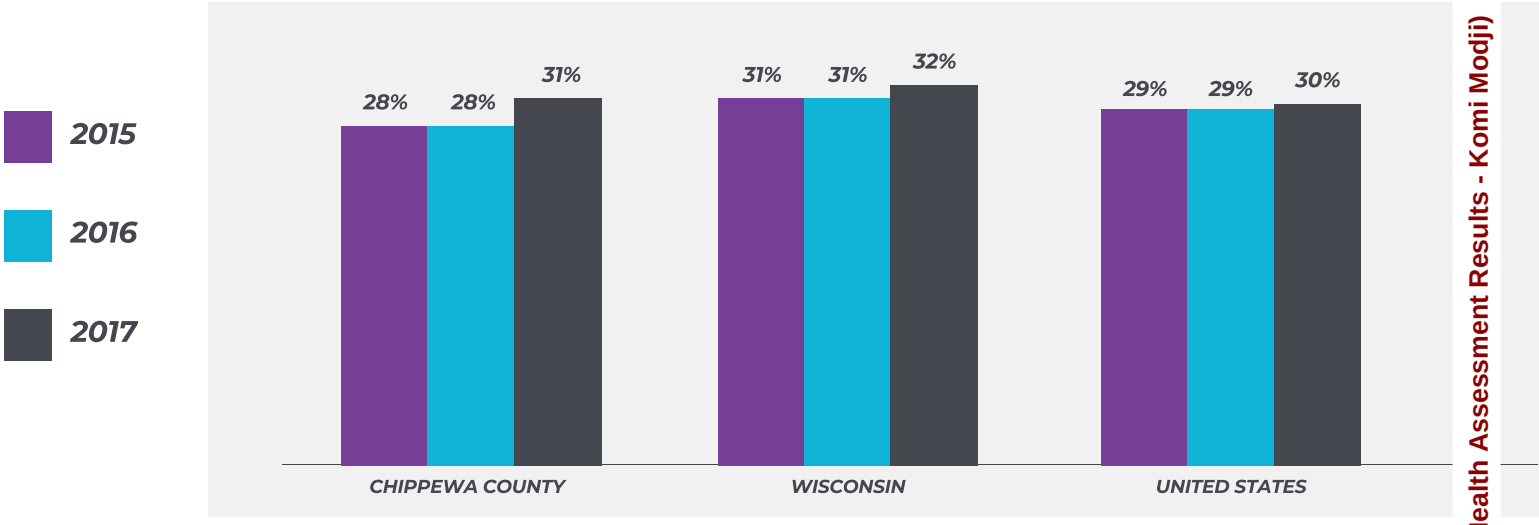
- The prevalence of obesity among adults in the United States increased from 30.5% to 42.4% between 1999-2000 and 2017-2018.
- Both obesity and severe obesity were most common in non-Hispanic Black adults (49.6%), followed by Hispanic adults (44.8%) and non-Hispanic White adults (42.2%).
- Obesity-related conditions are some of the leading causes of preventable, premature death.

Source: Centers for Disease Control and Prevention

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

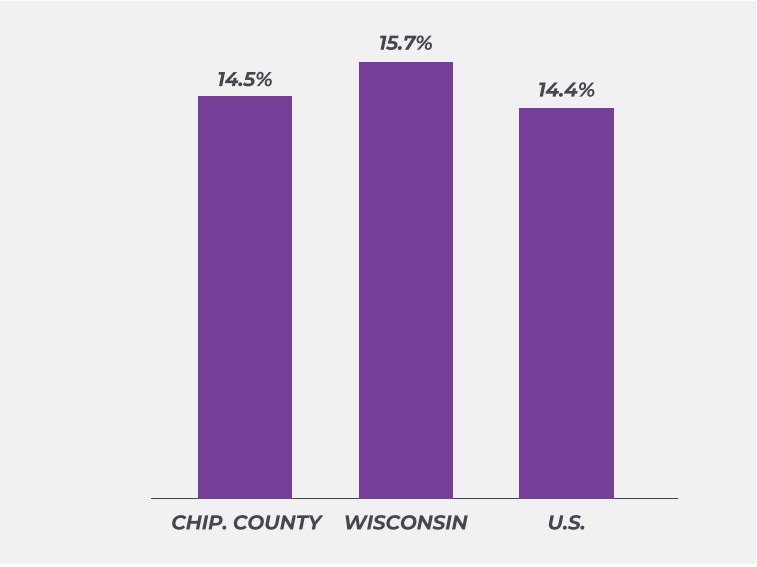
OBESITY

Percent of Adults (Age 20 +) with BMI > 30 (Obese)[1]



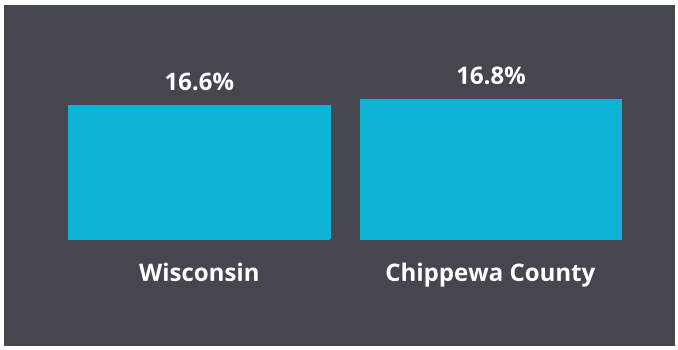
[1]County Health Rankings (CDC Diabetes Interactive Atlas)

Percent of Children Ages 2-5 Enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Considered Obese[2]



[2]Eau Claire City-County Health Department (2019), Wisconsin Department of Health Services/Division of Public Health (2019), CDC/Division of Nutrition, Physical Activity, and Obesity (2018)

Percent of Children Ages 2-5 Enrolled in WIC Considered Overweight[3]



[3] Eau Claire City-County Health Department (2019), Wisconsin Department of Health Services/Division of Public Health (2019)

Percent of High School Students Who Are Overweight or Obese (BMI is ≥85 percentile based on CDC growth chart)[4]

29.1% Wisconsin

31.6% United States

[4]Youth Risk Behavior Surveillance Survey (2019)

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

COMMUNICABLE DISEASE PREVENTION & CONTROL

HEALTH PRIORITY #6

Healthier communities prevent diseases that are caused by bacteria, viruses, fungi, or parasites and can pass from person to person or animal to person. Examples include:

- Influenza
- COVID-19
- Salmonella
- Measles
- West Nile Virus
- Lyme Disease

Healthier communities control the spread of these diseases with:

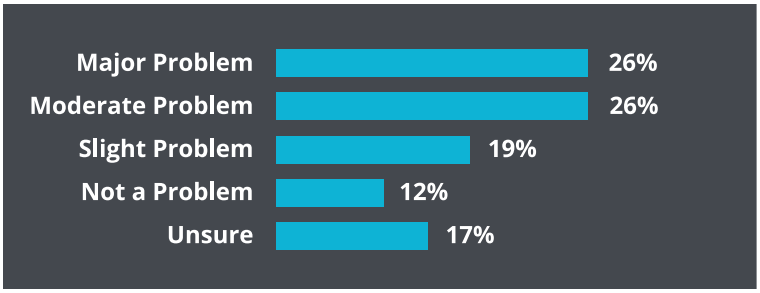
- Immunizations (like vaccines)
- Formal health care (like yearly check-ups)
- Personal health habits (like washing hands)

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Communicable Disease Prevention & Control a problem in our county?

People don't understand importance of communicable disease prevention and control	**76%**
Control practices are not the easy or desirable option	**73%**
Prevention methods are not the easy or desirable option	**46%**

How serious is this health area in Chippewa County?

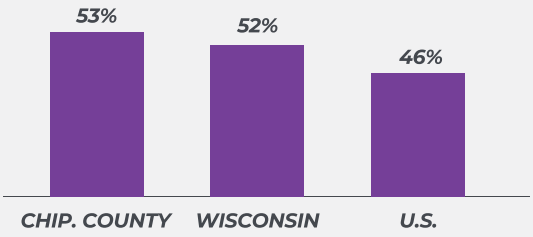


Percent of Children Ages 19 to 35 Months Who Received the Recommended Doses of DTaP, polio, MMR, Hib, Hepatitis B, Varicella, and PCV[1]

76.0% Chippewa County
72.0% Wisconsin
70.4% United States

[1] 2020 County Health Rankings (WI Immunization Registry, 2018), CDC (National Immunization Survey, 2017)

Percent of Fee-for-Service (FFS) Medicare Enrollees Who Received an Annual Flu Vaccination[2]



[2] 2020 County Health Rankings (CMS Mapping Medicare Disparities Tool, 2017)

Rate of New Cases of Reportable Communicable Diseases per 100,000 People[3]

Location	2016	2017	2018
Chip. County	682	827	754
Wisconsin	882	1,033	923

[3] County Health Rankings (WI Public Health Information Network Analysis, Visualization, and Reporting)

Rate of Confirmed Lyme Disease Cases per 100,000 People[4]

Chippewa County	**55.7**
Wisconsin	**37.7**
United States	**7.2**

[4] WI Department of Health Services (Environmental Public Health Data Tracker, 2019), CDC (Lyme Disease Data Tables, 2018)

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

PHYSICAL ACTIVITY

HEALTH PRIORITY #7

People are healthier when they are active. Healthier communities have programs to help people:

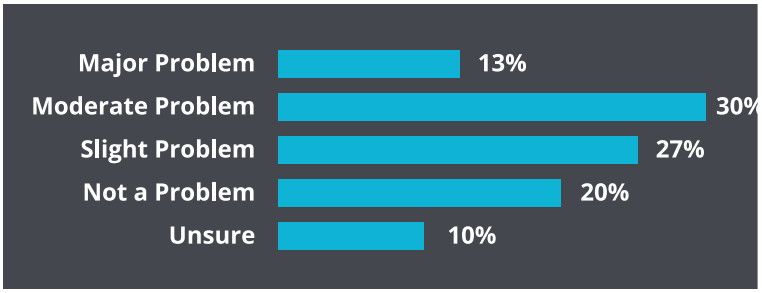
- Walk
- Swim
- Participate in Team Sports
- Bike
- Lift Weights

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Physical Activity a problem in our county?

People do not realize the impact of physical health on overall health	**79%**
People don't know where to go to be physically active	**65%**
People suffer from health problems that prevent physical activity	**52%**
Public Resources (trails, playgrounds, etc.) are not available or well-maintained	**51%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS...

Percent of Population with Adequate Access to a Location for Physical Activity[1]

64.0%	Chippewa County
85.0%	Wisconsin
84.0%	United States

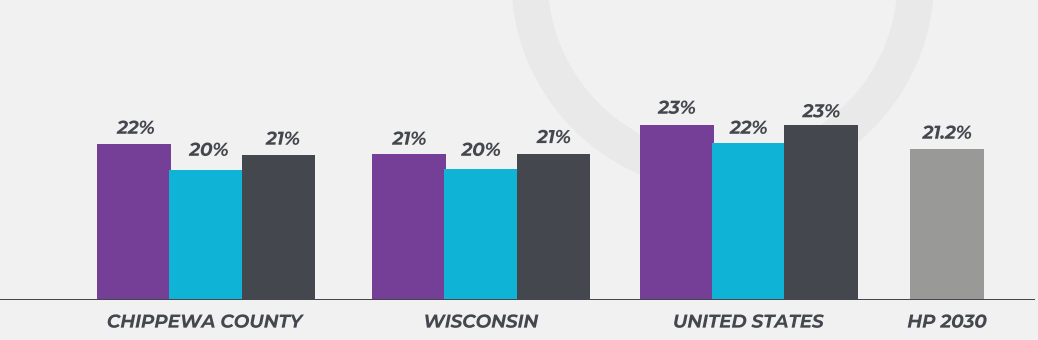
[1] 2020 County Health Rankings (ArcGIS, 2010 & 2019)

Percent of High School Students Physically Active at Least 60 Minutes per Day 5+ Days (during the past week)[3]

Chippewa County	**60%**
Wisconsin	**57%**
United States	**44%**

[3] Youth Risk Behavior Surveillance System (2019)

Percent of Adults Age 20+ Who Report No Leisure Time Physical Activity[2]



[2]County Health Rankings (CDC Diabetes Interactive Atlas)

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HEALTHY NUTRITION

HEALTH PRIORITY #8

Communities are healthier when all people (babies, children, adults, and seniors) can always eat healthy food and have enough:

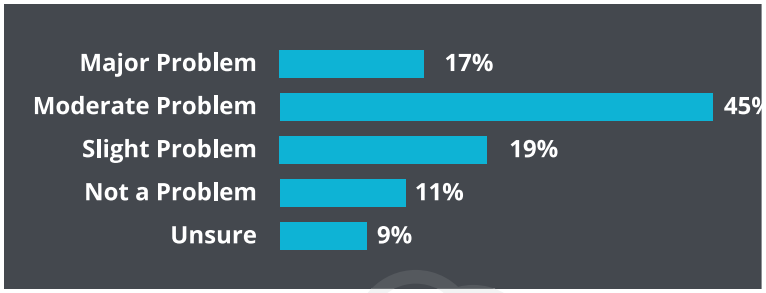
- Fruits and vegetables
- Fresh foods properly stored, prepared, and refrigerated
- Meals with a good balance of protein, carbohydrates, vegetables, and fat
- Drinks and foods with low sugar and low fat
- Breastfeeding support

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Healthy Nutrition a problem in our county?

Some people cannot afford enough food	**67%**
People don't have enough time to make healthy food	**64%**
Healthy food is too expensive	**60%**
The healthy choice is not the easy or desirable option	**57%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS..

Percent of Population Lacking Adequate Access to Food (i.e., food insecure)[1]

Location	2016	2017	2018
Chippewa County	10%	10%	9%
Wisconsin	11%	10%	9%
United States	13%	12.5%	11.5%

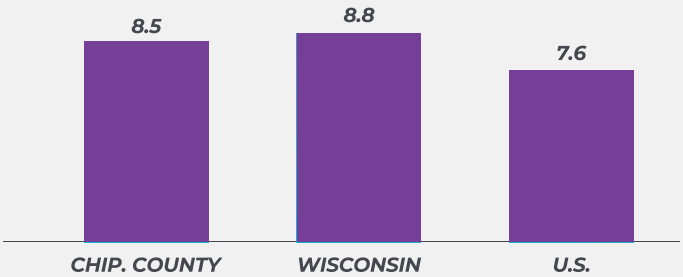
[1]*County Health Rankings (Map the Meal Gap)*

Percent of Infants in WIC Breastfed Exclusively Through Three Months[3]

Chippewa County	**44.7%**
Wisconsin	**26.0%**
United States	**46.9%**

[3]*Eau Claire City-County Health Dept. Composite Report (2020), CDC/Division of Nutrition, Physical Activity, and Obesity (2017)*

Food Environment Index (factors that contribute to a healthy food environment, 0 [worst] to 10 [best])[2]



[2] *County Health Rankings (USDA, 2015 & 2017)*

did you know?

- For *infants*, breastfeeding reduces the risk of many health conditions, including asthma, obesity, Type 1 diabetes, ear infections, and gastrointestinal infections.
- For *mothers*, breastfeeding can help lower the risk for high blood pressure, Type 2 diabetes, ovarian cancer, and breast cancer.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ORAL HEALTH

HEALTH PRIORITY #9

Communities are healthier when all people can keep their teeth, gums, and mouth healthy and can get care for:

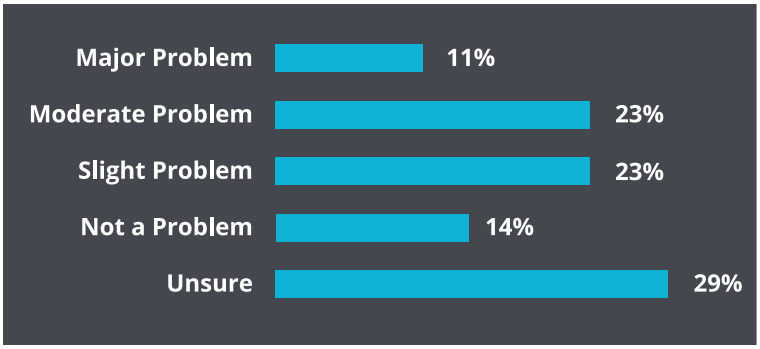
- Mouth Pain
- Tooth Loss
- Tooth Decay
- Mouth Sores

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Oral Health a problem in our county?

Too few dental clinics accept BadgerCare	**75%**
People lack awareness of personal dental care practices to prevent gum disease, tooth decay, etc.	**62%**
People cannot easily access services for dental care	**58%**
People don't understand impact of oral health on overall health	**54%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS...

Ratio of Population to Dentists[1]

1,830 to 1	Chippewa County
1,460 to 1	Wisconsin
1,450 to 1	United States

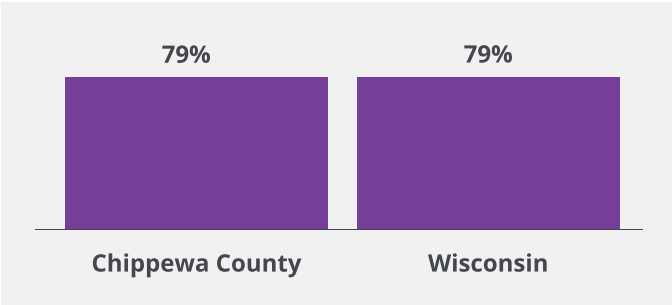
[1] 2020 County Health Rankings (Area Health Resource File/ National Provider Identification file, 2018)

Percent of Population with Fluoridated Public Water System[3]

Chippewa County	**15.5%**
Wisconsin	**88.4%**
United States	**73.0%**
Healthy People 2030 target	**77.1%**

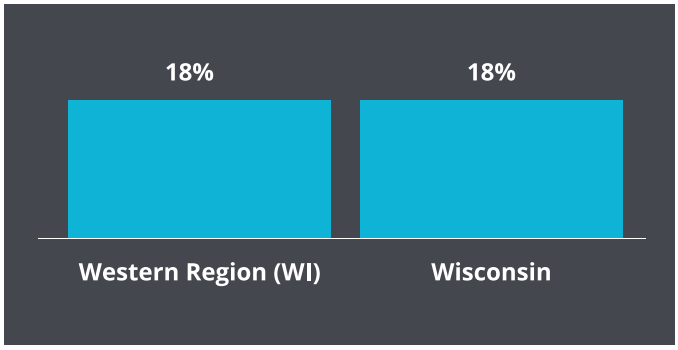
[3] Wisconsin Environmental Public Health Tracking Program (2017), CDC (Water Fluoridation Reporting System, 2018)

Percent of High School Students Who Saw Dentist in the Past 12 Months[2]



[2] Youth Risk Behavior Surveillance System (2019)

Percent of Third Graders with Untreated Tooth Decay[4]



[4] WI DHS (Healthy Smiles/Healthy Growth, 2017-2018)

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VAPING/TOBACCO USE & EXPOSURE

#10 HEALTH PRIORITY

All communities are healthier when communities offer programs to:

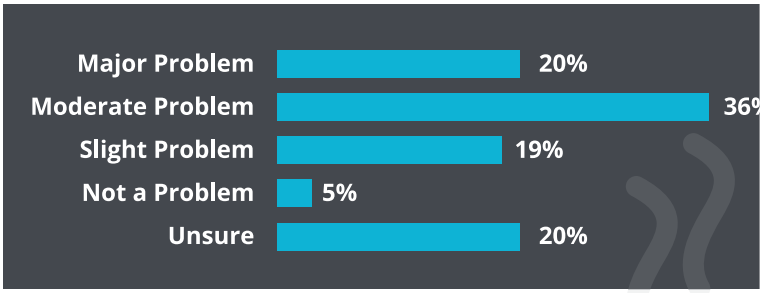
- Prevent tobacco use (stop people before they start vaping, smoking, or chewing)
- Provide treatment to help people who want to stop vaping, smoking, or chewing
- Protect people from second-hand smoke

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Vaping/Tobacco Use & Exposure a problem in our county?

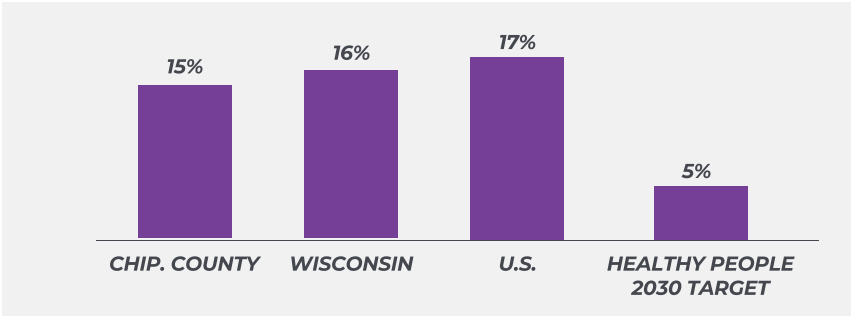
Products are easily available in the community	**66%**
Tobacco use is an accepted practice within families or the community	**66%**
People don't understand the impact of vaping/ tobacco use and exposureon overall health or take those risks seriously	**56%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS...

Percent of Adults Who Smoke Every Day or Most Days[1]



[1] 2020 County Health Rankings (BRFSS, 2017)

Percent of High School Students Who Smoked Cigarettes in the Past 30 Days[3]

Chippewa County	**10%**
Wisconsin	**6%**
United States	**6%**

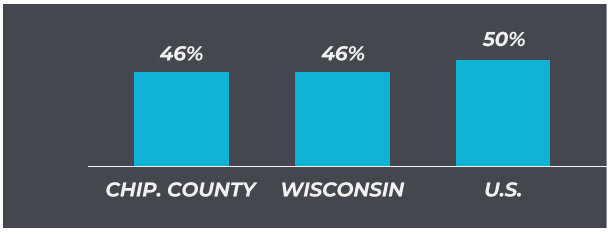
[3] Youth Risk Behavioral Surveillance System (2019)

Percent of Births Where Mother Reports Smoking During Pregnancy[2]

15%	Chippewa County
11%	Wisconsin
8%	United States

[2] 2020 County Health Rankings (Wisconsin Interactive Statistics on Health, 2015-2018), CDC (Pregnancy Risk Assessment and Monitoring System, 2017)

Percent of High School Students Who Ever Tried E-cigarettes/Vaping/Juul[4]



[4] Youth Risk Behavioral Surveillance System (2019)

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HEALTHY GROWTH & DEVELOPMENT

#11 HEALTH PRIORITY

Communities are healthier when children/adults can improve their physical, social, and emotional health with:

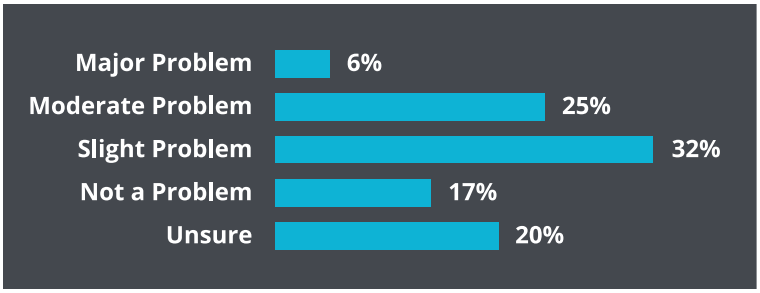
- Prenatal care
- Positive, caring relationships
- Regular health check-ups
- Early learning opportunities for infants and children
- Quality child and elder care

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Healthy Growth & Development a problem in our county?

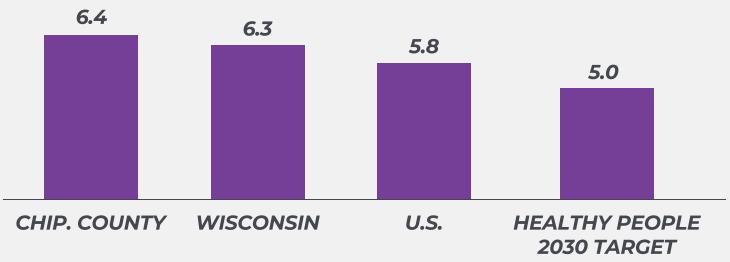
People don't understand its impact on overall health	**73%**
Help for children with special health care needs is not available to those who need it	**69%**
People are not aware of information or services available to aid in healthy growth and development	**54%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS...

Rate of Deaths for Children Under 1 Year per 1,000 Live Births[1]



[1] *WI Department of Health Services, Wisconsin Interactive Statistics on Health (2017)*

Percent of Live Births with Low Birth Weights[2]

Chippewa County	**6%**
Wisconsin	**7%**
United States	**8%**

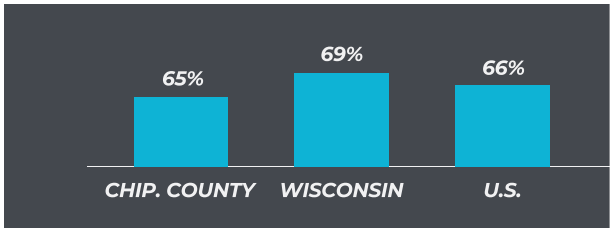
[2] *2020 County Health Rankings (National Vital Statistics System, 2012-2018)*

Percent of 9th Grade Cohort Who Graduate in Four Years[3]

90%	Chippewa County
89%	Wisconsin
85%	United States

[3] *2020 County Health Rankings (WI Department of Public Instruction, 2016-2017)*

Percent of Adults Ages 25-44 with Some Post-secondary Education[4]



[4] *2020 County Health Rankings (American Community Survey, 2014-2018)*

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

INJURY & VIOLENCE PREVENTION

HEALTH PRIORITY #12

All people are safer and healthier when communities have programs to prevent:

- Falls
- Car Crashes
- Child Abuse
- Accidental Poisoning
- Gun Violence
- Sexual Assault

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

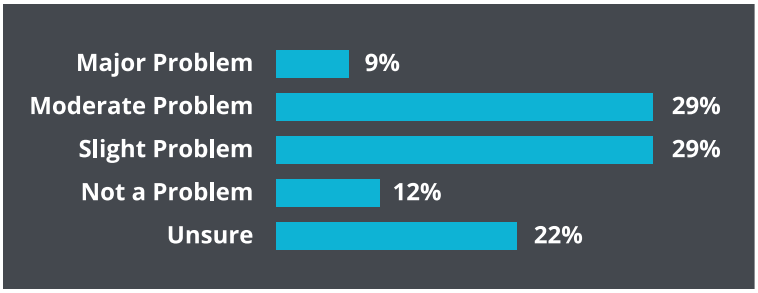
Why is Injury & Violence Prevention a problem in our county?

People do not feel safe in their home, neighborhood, or workplace — **80%**

Resources to prevent injury (car seats, fall prevention, etc.) are not available to those who need them — **60%**

People are unaware of resources available to victims of violence — **53%**

How serious is this health area in Chippewa County?



WHAT THE DATA SAYS...

Injury Deaths per 100,000 People[1]

Location	2013-2017	2014-2018	2015-2019
Chip. County	74	73	77
Wisconsin	77	80	84
United States	65	70	72

[1] *County Health Rankings (CDC WONDER Mortality Data)*

Number of Reported Violent Crime Offenses per 100,000 People[2]

Chippewa County **125**

Wisconsin **298**

United States **386**

[2] *2020 County Health Rankings (Uniform Crime Reporting- FBI, 2014 & 2016)*

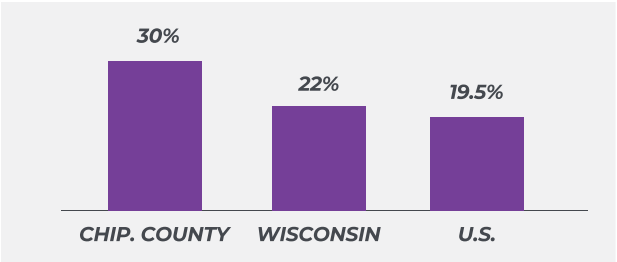
Number of Motor Vehicle Crash Occupants per 1,000 People[3]

39 Chippewa County

53 Wisconsin

[3] *2020 County Health Rankings (Crash Outcome Data Evaluation System, 2015-2017)*

Percent of High School Students Bullied on School Property in the Past Year[4]



[4] *Youth Risk Behavior Surveillance System (2019)*

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ENVIRONMENTAL & OCCUPATIONAL HEALTH

HEALTH PRIORITY #13

Healthier communities prevent sickness and injury from indoor and outdoor dangers like:

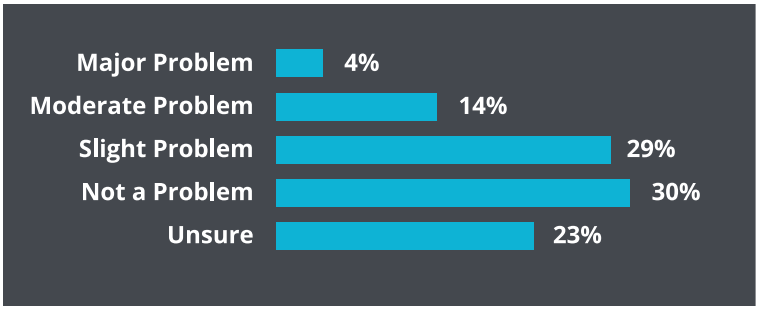
- Chemicals
- Contaminated food or water
- Work hazards (e.g., unsafe work practices/tools or exposure to chemicals or radiation)
- Polluted air
- Diseases that can pass from animals to human

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Environmental & Occupational Health a problem in our county?

Recreational areas are not safe for people to use (due to poor lighting, broken equipment, etc.)	**72%**
Home safety testing equipment (e.g., smoke or carbon monoxide) is not affordable	**68%**
People don't understand or take seriously the impact of environmental and occupational health	**60%**

How serious is this health area in Chippewa County?



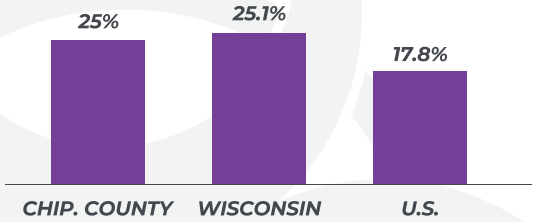
WHAT THE DATA SAYS...

Average Daily Measure of Fine Particulate Matter in Micrograms per Cubic Meter (PM2.5) [1]

7.9	Chippewa County
8.6	Wisconsin
8.6	United States

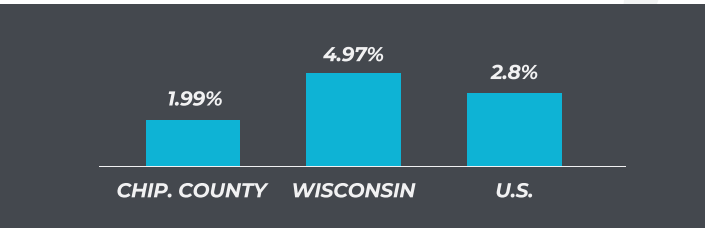
[1] *2020 County Health Rankings (Environmental Public Health Tracking Network, 2014)*

Percent of Housing Units Built Prior to 1950[3]



[3] *2020 County Health Ranking (American Community Survey, 2014-2018)*

Percent of Children ages Birth<6 with Blood Lead Level of >=5µg/dL[2]



[2] *WI Department of Health Services (Wisconsin Environmental Public Health Tracking, 2016)*

did you know?

Older housing units can pose a health hazard due to the presence of toxic substances like lead and asbestos.

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REPRODUCTIVE & SEXUAL HEALTH

#14 HEALTH PRIORITY

Healthier communities have education and healthcare services to:

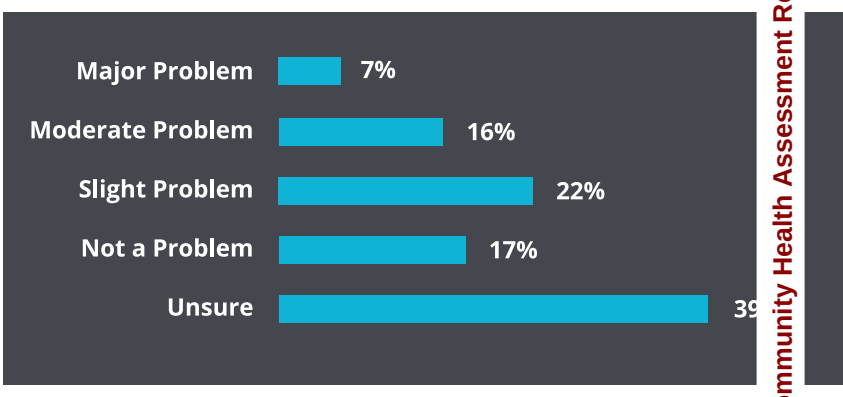
- Help people of all ages have good sexual health
- Prevent accidental pregnancy
- Prevent sexually transmitted infections (STIs) like chlamydia and gonorrhea

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Reproductive & Sexual Health a problem in our county?

Sexual health care or personal practices are not the easy or desirable choice	**75%**
People are not aware of reproductive or sexual health personal practices or benefits	**71%**
People don't know where to go to receive sexual health supplies or care	**59%**
People don't understand or take seriously the importance of reproductive or sexual health care	**52%**

How serious is this health area in Chippewa County?



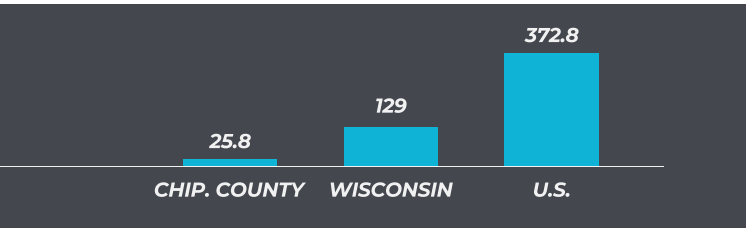
WHAT THE DATA SAYS...

Rate of Newly Diagnosed Chlamydia Cases per 100,000 People[1]

272.7	Chippewa County
478.6	Wisconsin
524.6	United States

[1] *2020 County Health Rankings (NCHHSTP, 2017)*

Rate of Human Immunodeficiency Virus (HIV) Infections per 100,000 People Age 13+[2]



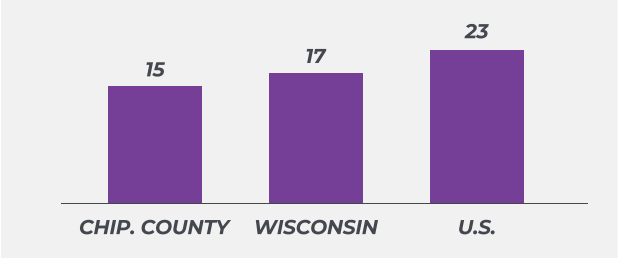
[2] *CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (Atlas Plus, 2018)*

Percentage of Births to Mothers Who Received 1st Trimester Prenatal Care[3]

Chippewa County	**80.0%**
Wisconsin	**75.8%**
United States	**77.3%**

[3] *WI Department of Health Services (Wisconsin Interactive Statistics on Health, 2017)*

Birth Rate per 1,000 Females Ages 15-19[4]



[4] *2020 County Health Rankings (National Vital Statistics System, 2012-2018)*

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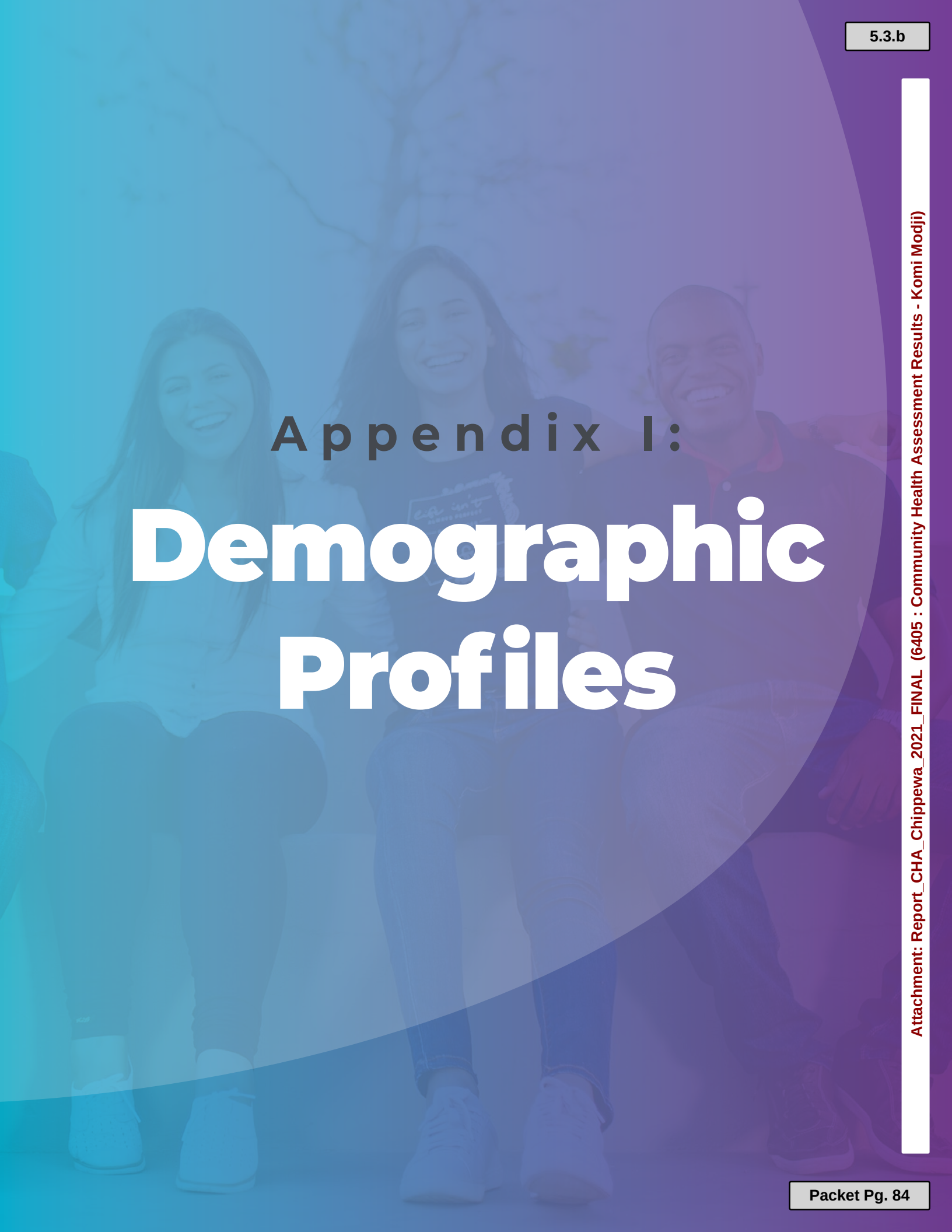
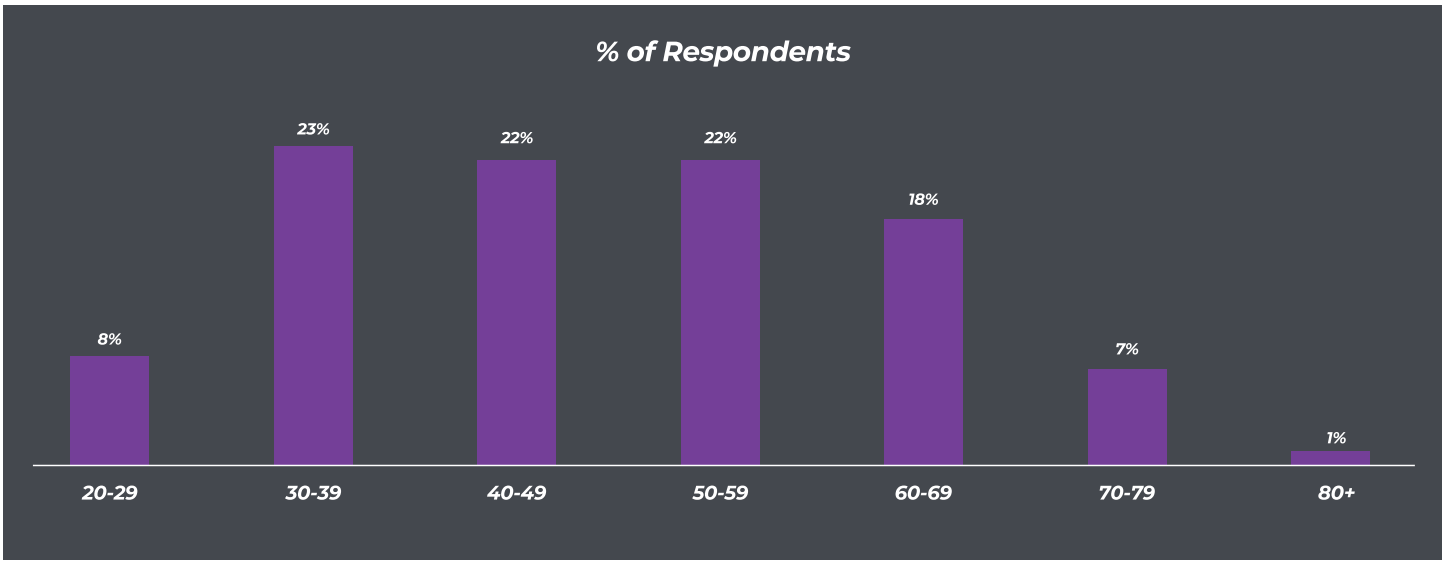


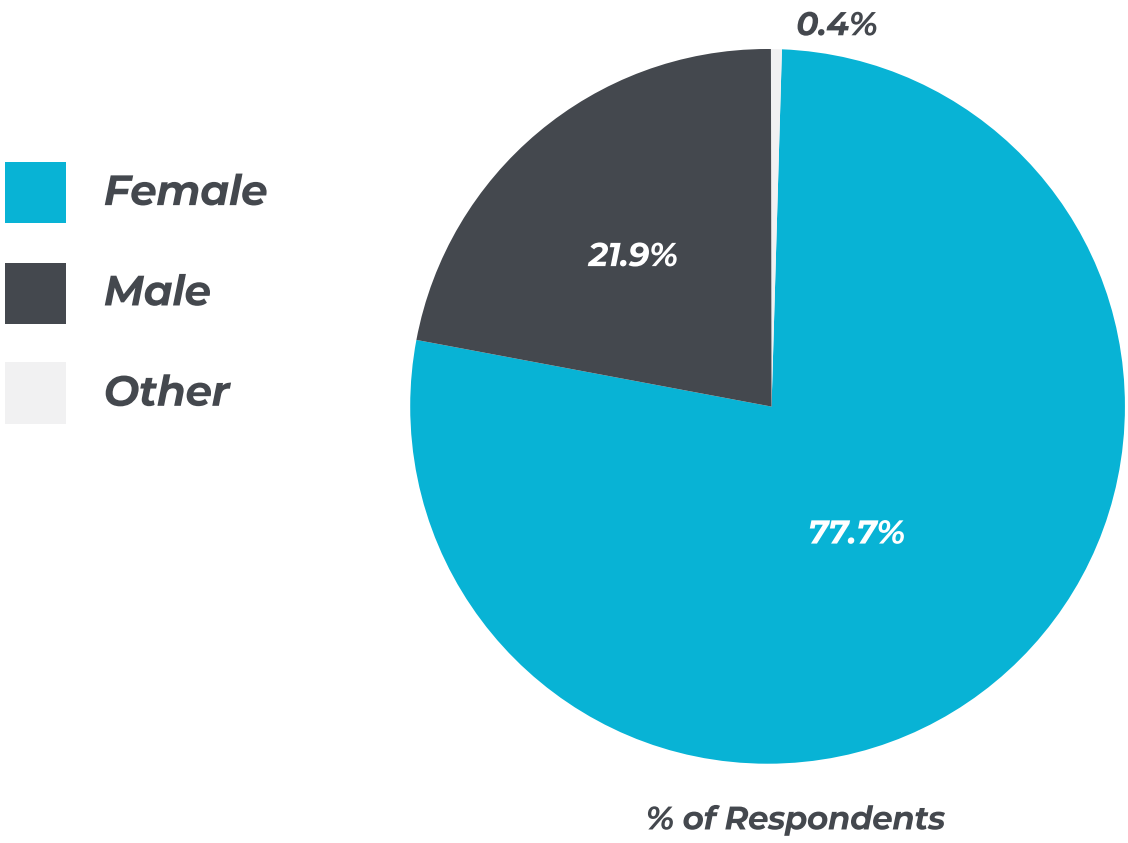
Appendix I:

Demographic Profiles

AGE DISTRIBUTION OF COMMUNITY HEALTH SURVEY RESPONDENTS

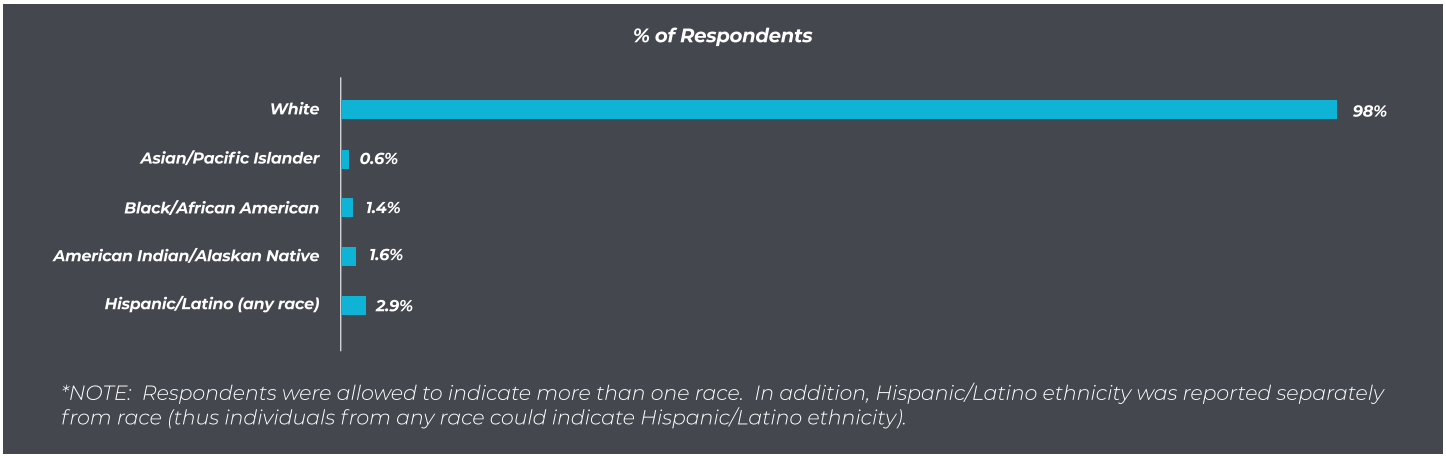


GENDER DISTRIBUTION OF COMMUNITY HEALTH SURVEY RESPONDENTS



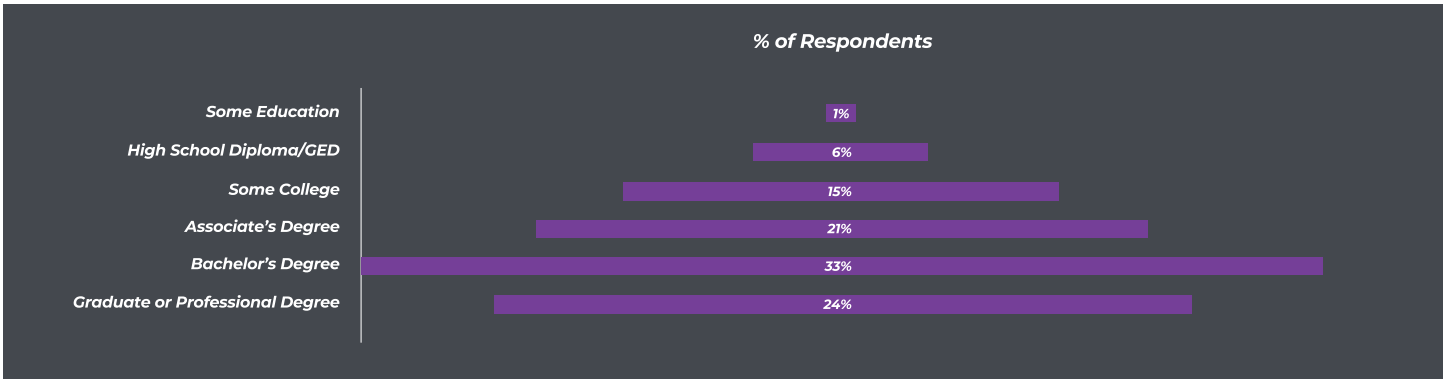
Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

RACIAL DISTRIBUTION OF COMMUNITY HEALTH SURVEY RESPONDENTS*

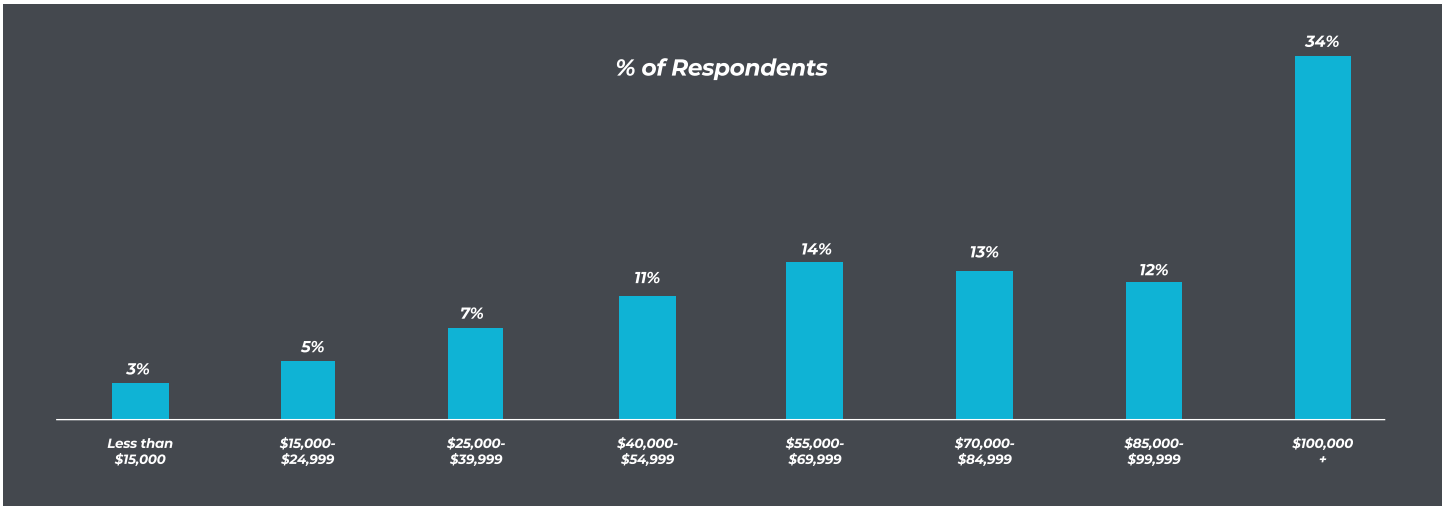


*NOTE: Respondents were allowed to indicate more than one race. In addition, Hispanic/Latino ethnicity was reported separately from race (thus individuals from any race could indicate Hispanic/Latino ethnicity).

HIGHEST EDUCATIONAL ATTAINMENT OF COMMUNITY HEALTH SURVEY RESPONDENTS



HOUSEHOLD INCOME OF COMMUNITY HEALTH SURVEY RESPONDENTS



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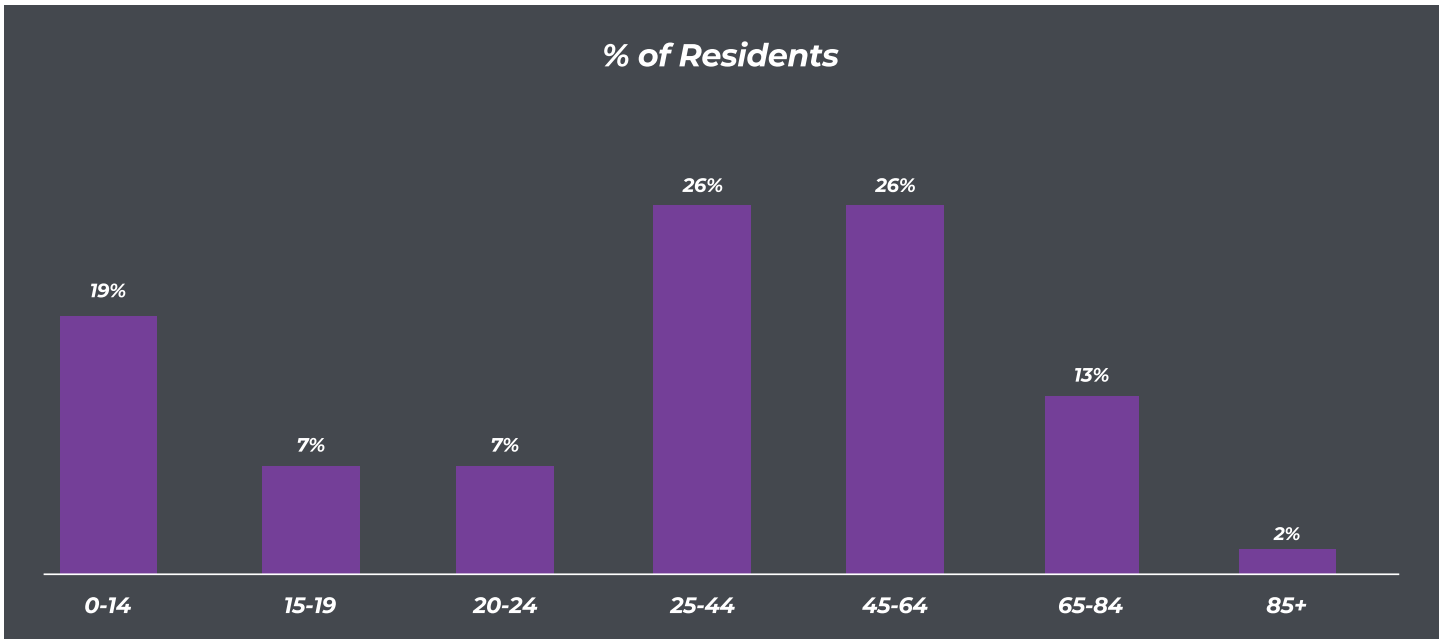
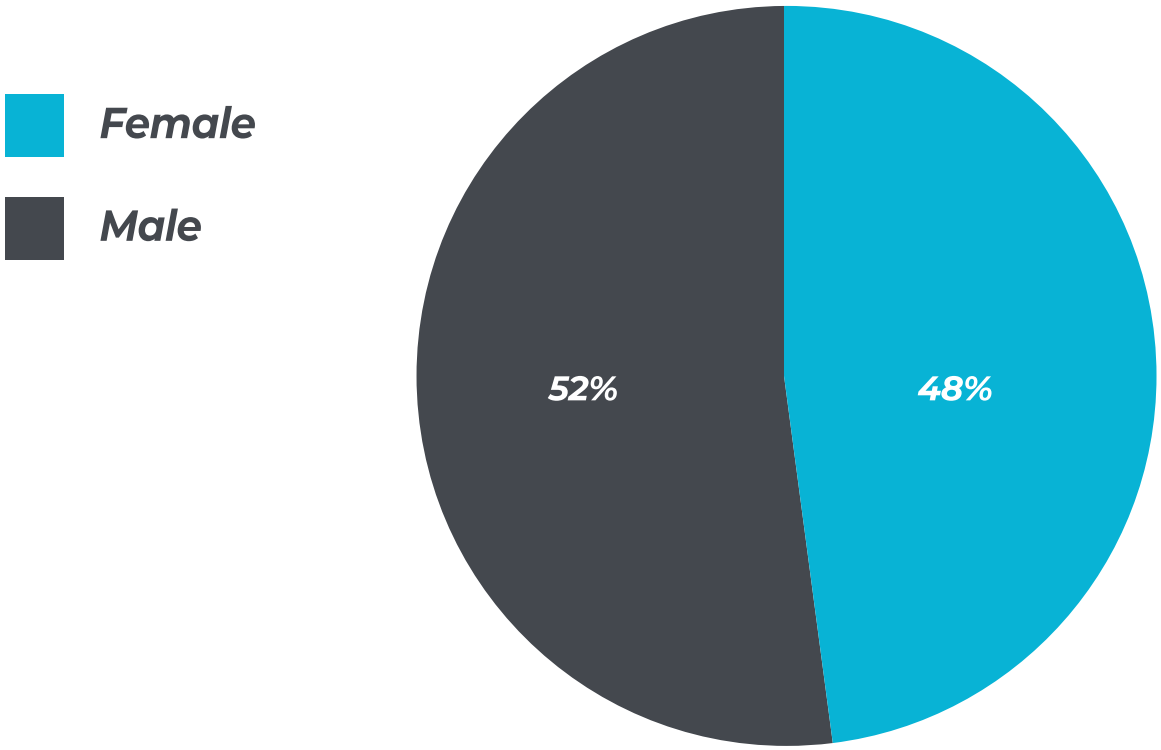
AGE DISTRIBUTION OF CHIPPEWA COUNTY RESIDENTS

(U.S. CENSUS BUREAU, 2019 ESTIMATES)



GENDER DISTRIBUTION OF CHIPPEWA COUNTY RESIDENTS

(U.S. CENSUS BUREAU, 2019 ESTIMATES)



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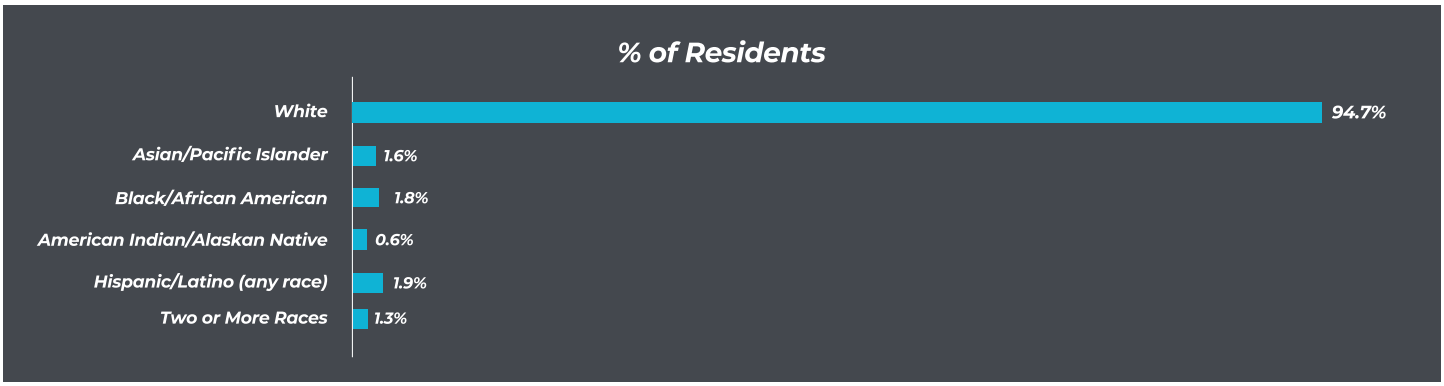
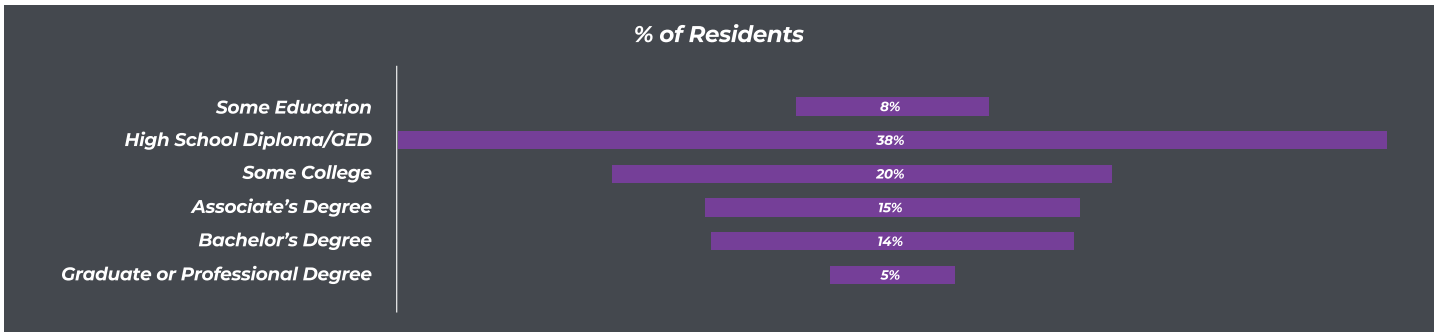
RACIAL DISTRIBUTION OF CHIPPEWA COUNTY RESIDENTS

(U.S. CENSUS BUREAU, 2019 ESTIMATES)



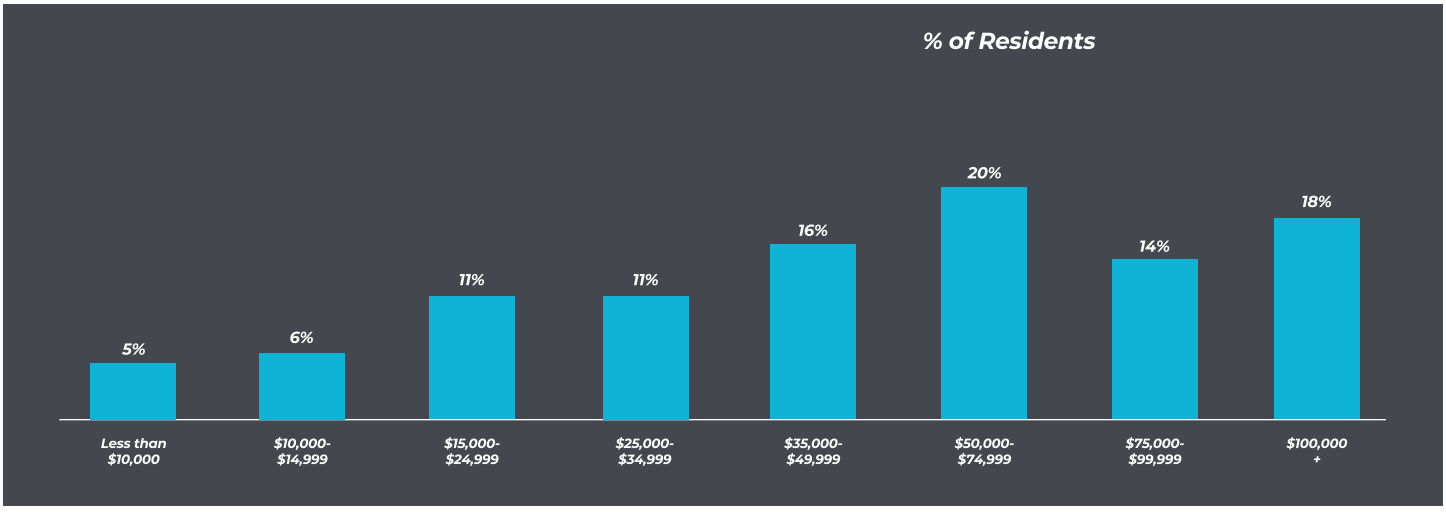
HIGHEST EDUCATIONAL ATTAINMENT BY CHIPPEWA COUNTY RESIDENTS

(U.S. CENSUS BUREAU, 2019 ESTIMATES)



HOUSEHOLD INCOME DISTRIBUTION OF CHIPPEWA COUNTY RESIDENTS

(U.S. CENSUS BUREAU, 2019 ESTIMATES)



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Appendix II:

Community Health Survey

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COMMUNITY HEALTH SURVEY FOR CHIPPEWA AND EAU CLAIRE COUNTIES

This survey is being conducted to better understand the health issues in Chippewa and Eau Claire counties and how to address them.

Participation in this survey is voluntary. Your answers will be anonymous, confidential, and combined with those of all other survey respondents. The results will be shared with community members who are interested in improving the health of our community. Estimated time to complete this survey is 5-10 minutes.

The questions in this survey are based on the Health Areas of the Wisconsin State Health Plan. For each health area, please indicate whether you feel the area is a problem in the Chippewa and Eau Claire County community and share your ideas about services and programs that would help improve community health.

Please note that this survey is intended to be completed by residents of Chippewa and Eau Claire counties only. The deadline for submission is January 10, 2021. Completed surveys may be put in an envelope marked "Attention to PH" and placed in the drop box outside Door 5 of the Chippewa County Courthouse, dropped off at the Eau Claire City-County Health Department, or mailed to the Eau Claire City-County Health Department at 720 2nd Ave., Eau Claire, WI 54703.

1. DO YOU LIVE WITHIN CHIPPEWA OR EAU CLAIRE COUNTY?

- ☐ **Yes- Chippewa County**
- ☐ **Yes- Eau Claire County**
- ☐ **No**

2. FOR EACH HEALTH AREA LISTED BELOW, PLEASE INDICATE IF YOU FEEL IT IS A PROBLEM IN YOUR COMMUNITY (CHIPPEWA OR EAU CLAIRE COUNTY).

	Not a Problem	Slight Problem	Moderate Problem	Major Problem	Unsure
Healthy Nutrition	☐	☐	☐	☐	☐
Alcohol Misuse	☐	☐	☐	☐	☐
Vaping/Tobacco Use & Exposure	☐	☐	☐	☐	☐
Substance Use	☐	☐	☐	☐	☐
Chronic Disease Prevention & Control	☐	☐	☐	☐	☐
Communicable Disease Prevention & Control	☐	☐	☐	☐	☐
Environmental & Occupational Health	☐	☐	☐	☐	☐
Healthy Growth & Development	☐	☐	☐	☐	☐
Injury & Violence Prevention	☐	☐	☐	☐	☐
Mental Health	☐	☐	☐	☐	☐
Oral Health	☐	☐	☐	☐	☐
Physical Activity	☐	☐	☐	☐	☐
Reproductive & Sexual Health	☐	☐	☐	☐	☐
Obesity	☐	☐	☐	☐	☐

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3. CHOOSE *3 AREAS* FROM THE LIST ON THE PREVIOUS PAGE THAT YOU THINK ARE THE BIGGEST PROBLEM IN YOUR COMMUNITY AND PLEASE COMMENT WHY.

Health Area 1: _____ is a problem in your community because....

Health Area 2: _____ is a problem in your community because....

Health Area 3: _____ is a problem in your community because....

What are the greatest strengths in your county in relation to community health?
(Check all that apply)

- ☐ **Education**
- ☐ **Employment**
- ☐ **Medical Care**
- ☐ **Healthy Eating Options**
- ☐ **Parks**
- ☐ **Affordable Housing**
- ☐ **Community Safety**
- ☐ **Public Transportation**
- ☐ **Community Connectedness**
- ☐ **Substance Abuse Treatment Access**
- ☐ **Mental Health Treatment Access**
- ☐ **Other** *(Please specify):*

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We know that many important issues in other areas of our lives also impact our health. Which of the factors below contribute most to your top community health concerns?
(Check all that apply)

- ☐ **Availability of resources to meet daily needs (e.g., safe housing and local food markets)**
- ☐ **Access to mass media and emerging technologies (e.g., cell phones, Internet, and social media)**
- ☐ **Resources provided for multiple languages and literacy levels**
- ☐ **Socioeconomic conditions (e.g., concentrated poverty and stressful conditions that accompany it)**
- ☐ **Racism and discrimination**
- ☐ **Social support**
- ☐ **Transportation options**
- ☐ **Public safety**
- ☐ **Opportunities for recreation and leisure**
- ☐ **Access to educational, economic, and job opportunities**
- ☐ **Access to health care services**
- ☐ **Quality of education and job training**
- ☐ **Other** *(Please specify):*

Age: _____ years

Gender: _____

Race *(Check all that apply):*

- ☐ **American Indian or Alaskan Native**
- ☐ **Asian or Pacific Islander**
- ☐ **Black/African American**
- ☐ **White**

Ethnicity:

- ☐ **Hispanic Origin**
- ☐ **Not of Hispanic Origin**

THANK YOU FOR COMPLETING THIS SURVEY!

Completed surveys may be put in an envelope marked "Attention to PH" and placed in the drop box outside Door 5 of the Chippewa County Courthouse, dropped off at the Eau Claire City-County Health Department, or mailed to the Eau Claire City-County Health Department at 720 2nd Ave., Eau Claire, WI 54703.

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Appendix III:

Core Data Set

Measure	Definition	Chippewa County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Alcohol Misuse Focus Area								
Alcohol Outlet Density	Alcohol outlet density per 500 people	1.79	Wisconsin Environmental Public Health Tracking Program(2017-2018)	1.47	Wisconsin Environmental Public Health Tracking Program(2017-2018)	n/a		
Alcohol Use	Alcohol use among adults 18+ during past 30 days			64.4%	National Survey on Drug Use and Health (2017-2018)	n/a	55.6%	National Survey on Drug Use and Health (2017-2018)
Alcohol-related Hospitalizations	Rate of alcohol-related hospitalizations per 1,000 population	2.3	2020 County Health Rankings (WI Public Health Profiles; 2016)	2.2	2020 County Health Rankings (WI Public Health Profiles; 2016)	n/a		
Alcohol-related Vehicle Deaths	Percentage of driving deaths with alcohol involvement	37%	2020 County Health Rankings (Fatality Analysis Reporting System; 2014-2018)	36%	2020 County Health Rankings (Fatality Analysis Reporting System; 2014-2018)	n/a	28%	2020 County Health Rankings (Fatality Analysis Reporting System; 2014-2018)
Binge Drinking	Engagement in binge drinking among adults 18+ years old in past month	19.4%	WI Department of Health Services (Adult Alcohol Use Dashboard, 2014-2019)	22.9%	WI Department of Health Services (Adult Alcohol Use Dashboard, 2014-2019)	25.4% (Ages 21+)	16.1%	WI Department of Health Services (Adult Alcohol Use Dashboard, 2019)
Excessive Drinking (Binge + Heavy Drinking)	Percentage of the adult population that reports either binge drinking, defined as consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days, or heavy drinking, defined as drinking more than 1 (women) or 2 (men) drinks per day on average	26%	2020 County Health Rankings (Behavioral Risk Factor Surveillance System; 2017)	24%	2020 County Health Rankings (Behavioral Risk Factor Surveillance System; 2017)	n/a (HP2020=25%	19%	2020 County Health Rankings (Behavioral Risk Factor Surveillance System; 2017)
Liquor Law Arrests	Violations of state or local laws or ordinances	129	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	300	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	n/a	101	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Student Alcohol Use	Percentage of high school students who drank alcohol on at least one of the past 30 days	37%	Chippewa County Youth Risk Behavior Survey (2019)	30%	Youth Risk Behavior Surveillance Sysvem (2019)	6.3% (adolescents - 12-17)	29%	Youth Risk Behavior Surveillance Sysvem (2019)
Student Alcohol Use	Percentage of high school students who had their first drink of alcohol other than a few sips before 13 years	11%	Chippewa County Youth Risk Survey (2019)	16.5%	Youth Risk Behavior Surveillance Sysvem (2019)	n/a	15%	Youth Risk Behavior Surveillance Sysvem (2019)
Chronic Disease Prevention & Management Focus Area								
Alzheimer's	Alzheimer's Disease deaths per 100,000 (age-adjusted)	16.9	WI DHS WISH (2018)	31.8	WI DHS WISH (2018)	n/a	37.3	Alzheimer's Associaton (Alzheimer's Disease Facts and Figures; 2018)
Cancer	Number of new cancer diagnoses per 100,000 population (age-adjusted)	483	Centers for Disease Control and Prevention (2013-2017)	465	Centers for Disease Control and Prevention (2013-2017)	n/a	449	Centers for Disease Control and Prevention (2013-2017)
Cancer Mortality	Cancer Mortality Rate per 100,000 population (age-adjusted)	164	Centers for Disease Control and Prevention (2013-2017)	160	Centers for Disease Control and Prevention (2013-2017)	122.7	158	Centers for Disease Control and Prevention (2013-2017)
Cerebrovascular Disease Hospitalizations	Cerebrovascular disease hospitalization rate per 1,000 people	2.3	2017 Wisconsin Public Health Profiles	2.6	2017 Wisconsin Public Health Profiles	n/a		
Cervical Cancer Screening	Percentage of women (21-65) who had a pap test in last 3 years			83.8%	CDC (BRFSS; 2018)	84.3%	80.2% (median)	CDC (BRFSS; 2018)
Cholesterol Screening	Percentage of adults had cholesterol checked in past 5 years			83.9%	CDC (BRFSS; 2019)	n/a	86.6% (median)	CDC (BRFSS; 2019)
Colorectal Cancer Screening	Percentage of adults (50-75) who have fully met the USPSTF recommendation			75.2%	CDC (BRFSS; 2018)	74.4%	69.7%	CDC (BRFSS; 2018)
Coronary Heart Disease Hospitalizations	Coronary heart disease hospitalization rate per 1,000 Mecicare Beneficiaries, 65+	13.3	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)	10.5	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)	n/a	12	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)
Diabetes	Percentage of adults age 20 and above with diagnosed diabetes	10%	2020 County Health Rankings (CDC Diabetes Interactive Altas; 2016)	9%	2020 County Health Rankings (CDC Diabetes Interactive Altas; 2016)	n/a	8.5% (ages 18+)	United States Diabetes Surveillance System (2016)
Diabetic Screening	Percentage of diabetic Medicare enrollees (ages 65-75) that received HbA1c screening in past year	92.1%	Dartmouth Atlas of Health Care (2015)	91.0%	Dartmouth Atlas of Health Care (2015)	n/a	85.7%	Dartmouth Atlas of Health Care (2015)
Mammography Screening	Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening.	56%	2020 County Health Rankings (Centers for Medicare & Medicaid Services Office of Minority Health; 2017)	50%	2020 County Health Rankings (Centers for Medicare & Medicaid Services Office of Minority Health; 2017)	n/a	42%	2020 County Health Rankings (Centers for Medicare & Medicaid Services Office of Minority Health; 2017)
Stroke Hospitalizations	Stroke hospitalization rate per 1,000 Mecicare Beneficiaries, 65+	9.3	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)	10.3	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)	n/a	11.6	CDC (Interactive Atlas of Heart Disease and Stroke; 2015-2017)

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Measure	Definition	Eau Claire County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Chronic Disease Prevention & Management Focus Area *CONTINUED*								
Youth Asthma	Percentage of high school students ever diagnosed with asthma	19%	Chippewa County Youth Risk Behavior Survey	20%	Wisconsin Youth Risk Behavior Survey (2019)	n/a	22%	Youth Risk Behavior Surveillance System (2019)
Communicable Disease & Prevention Focus Area								
Childhood Immunizations	Percentage of children aged 19 to 35 months who received the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and PCV	76.0%	2020 County Health Rankings (WI Immunization Registry; 2018)	72.0%	2020 County Health Rankings (WI Immunization Registry; 2018)	n/a	70.4%	CDC (National Immuinization Survey; 2017)
Communicable Diseases	Number of new cases of reportable communicable diseases per 100,000 population	754	2020 County Health Rankings (WI Public Health Information Network Analysis, Visualization, and Reporting; 2018)	923	2020 County Health Rankings (WI Public Health Information Network Analysis, Visualization, and Reporting; 2018)	n/a		
Influenza Immunization 65+	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.	53%	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)	52%	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)	n/a	46%	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)
Lyme Disease	Rate per 100,000 population of confirmed Lyme disease cases	55.7	DHS (Environmental Public Health Data Tracker; 2019)	37.7	DHS (Environmental Public Health Data Tracker; 2019)	n/a	7.2	CDC (Lyme Disease Data Tables; 2018)
Environmental & Occupational Health Focus Area								
Air Pollution -- Particulate Matter	The average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county	7.9	2020 County Health Rankings (Environmental Public Health Tracking Network; 2014)	8.6	2020 County Health Rankings (Environmental Public Health Tracking Network; 2014)	n/a	8.6	2020 County Health Rankings (Environmental Public Health Tracking Network; 2014)
Contaminants in Municipal Water	Average concentration of Aresenic in public water (µg/L)	0.4	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	1.4	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	n/a	2.2	CDC (National Environmental Public Health Tracking Network; 2016)
Contaminants in Municipal Water	Average concentration of Nitrate in public water (mg/L)	3.6	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	1.5	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	n/a	1.2	CDC (National Environmental Public Health Tracking Network; 2016)
Good' or 'Moderate' Air Quality Days	Percentage of measured days in given year (not every day was measured) that were 'good' or moderate' (Air quality index from 0-100)	n/a	U.S. Evironmental Protection Agency (Air Quality Index Report; 2017)	99.3%	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	n/a	98.3%	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)
Lead Poisoned Children	Percentage of children birth<6 with blood lead level of >=5µg/dL	1.99%	DHS (Wisconsin Environmental Public Health Tracking; 2016)	4.97%	DHS (Wisconsin Environmental Public Health Tracking; 2016)	n/a	2.0%	CDC (National Surveillance Data; 2015)
Carbon Monoxide Poisoning	Rate of emergency room visits related to Carbon Monoxide poisoning per 100,000 people (age-adjusted)	8.52	DHS (Wisconsin Environmental Public Health Tracking; 2010-2014)	8.43	DHS Wisconsin Environmental Public Health Tracking; 2014)	n/a	6.6%	CDC (National Environmental Public Health Tracking Network; 2014)
Radon Levels	Percentage of radon tests that exceeded the recommended level of 4 picocuries per liter	49%	Eau Claire City-County Health Department (2017-2020)			n/a		
Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	11%	2020 County Health Rankings (U.S. HUD Comprehensive Housing Affordability Strategy; 2012-2016)	14%	2020 County Health Rankings (U.S. HUD Comprehensive Housing Affordability Strategy; 2012-2016)	n/a	18%	2020 County Health Rankings (U.S. HUD Comprehensive Housing Affordability Strategy; 2012-2016)
Unhealthy Air Quality Days	Number of measured days in given year (not every day was measured in both counties) that were "unhealthy" (Air quality index above 101	n/a	U.S. Environmental Protection Agency (Air Quality Index Report; 2017)	0	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	n/a	0.4	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)
Year Structure Built	Percentage of housing units built prior to 1950	24.5%	2020 County Health Ranking (American Community Survey; 2014-2018)	25.1%	2020 County Health Ranking (American Community Survey; 2014-2018)	n/a	17.8%	American Community Survey (2014-2018)
Healthy Growth & Development Focus Area								
Infant Mortality	Rate (<365 days) per 1,000 live births	6.4	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2017)	6.3	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2017)	5.0	5.8	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2017)
Reading Proficiency	Percentage of fourth grade students proficient or advanced in reading	46%	2020 County Health Rankings (Department of Education; 2017-2018)	45%	2020 County Health Rankings (Department of Education; 2017-2018)	n/a		
High School Graduation	Percentage of 9th grade cohort that graduates in four years	90%	2020 County Health Rankings (WI DPI; 2016-2017)	89%	2020 County Health Rankings (WI DPI; 2016-2017)	90.7%	85%	2020 County Health Rankings (WI DPI; 2016-2017)
Low Birth Weight	Percentage of live birth weights <2,500 grams	6%	2020 County Health Rankings (National Vital Statistics System; 2012-2018)	7%	2020 County Health Rankings (National Vital Statistics System; 2012-2018)	n/a	8%	2020 County Health Rankings (National Vital Statistics System; 2012-2018)
Single-parent Households	Percentage of children that live in a household headed by a single parent	28%	2020 County Health Rankings (American Community Survey; 2014-2018)	32%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	33%	2020 County Health Rankings (American Community Survey; 2014-2018)
Some College	Percentage of adults age 25-44 with some post-secondary education	65%	2020 County Health Rankings (American Community Survey; 2014-2018)	69%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	66%	2020 County Health Rankings (American Community Survey; 2014-2018)

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Measure	Definition	Eau Claire County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Healthy Nutrition Focus Area								
Adult Dietary Behavior	Percentage of adults who consumed 1 or more fruits per day			61.1%	State Cancer Profiles, 2019	n/a	60.7	State Cancer Profiles, 2019
Adult Dietary Behavior	Percentage of adults who consumed 1 or more vegetables per day			77.2%	State Cancer Profiles, 2019	n/a	79.7	State Cancer Profiles, 2019
Breastfeeding	Percentage of infants in WIC breastfed exclusively through three months	44.7%	WI Department of Health Services (WIC and Nutrition Section; 2020)	26.0%	WI Department of Health Services (WIC and Nutrition Section; 2020)	n/a	46.9%	CDC Division of Nutrition, Physical Activity, and Obesity (2017)
Food Environment Index	Index of factors that contribute to a healthy food enviorment, 0 (worst) to 10 (best)	8.5	2020 County Health Rankings (USDA; 2015 & 2017)	8.8	2020 County Health Rankings (USDA; 2015 & 2017)	n/a	7.6	2020 County Health Rankings (USDA; 2015 & 2017)
Food Insecurity	Percentage of the population who lack adequate access to food	9.6%	2020 County Health Rankings (Map the Meal Gap; 2017)	10.0%	2020 County Health Rankings (Map the Meal Gap; 2017)	6%	12.5%	Map the Meal Gap (2017)
Injury & Violence Focus Area								
Child Abuse	Substantiated cases of child abuse per per 1,000 population	5	2020 County Health Rankings (Wisconsin Department of Children and Familes; 2018)	4	2020 County Health Rankings (Wisconsin Department of Children and Familes; 2018)	n/a	9.1	National Child Abuse and Neglect Data System; 2015
Falls Fatalities 65+	Injury deaths due to falls for age 65 and older (per 100,000 population)	132	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2015-2017)	143	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2015-2017)	63.4	61	National Vital Statistics System-Mortality (2015)
Hate Crimes	Hate crime rate per 100,000 population	n/a	2017 County Health Rankings (Uniform Crime Reporting; 2014)	1	2017 County Health Rankings (Uniform Crime Reporting; 2014)	n/a	1.9	Uniform Crime Report (2016)
Injury Deaths	Number of deaths due to injury per 100,000 population	73	2020 County Health Rankings (CDC, Wonder Mortality data; 2014-2018)	80	2020 County Health Rankings (CDC, Wonder Mortality data; 2014-2018)	63.1	70	2020 County Health Rankings (CDC, Wonder Mortality data; 2014-2018)
Injury Hospitalizations	Hospitalizations for injuries (age-adjusted per 100,000 population)	424	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2018)	421	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2018)	n/a	598.6	National Hospital Discharge Survey; 2010
Motor Vehicle Crash Deaths	Number of motor vehicle crash deaths per 100,000 population	9	2020 County Health Rankings (National Center for Health Statistics; 2012-2018)	10	2020 County Health Rankings (National Center for Health Statistics; 2012-2018)	10.1	10.9	National Vital Statistics System-Mortality (2015)
Motor Vehicle Crash Occupancy Rate	Number of motor vehicle crash occupants per 1,000 population.	39	2020 County Health Rankings (Crash Outcome Data Evaluation System; 2015-2017)	53	2020 County Health Rankings (Crash Outcome Data Evaluation System; 2015-2017)	n/a		
Violent Crime	Number of reported violent crime offenses per 100,000 population (includes offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault)	125	2020 County Health Rankings (Uniform Crime Reporting- FBI; 2014 & 2016)	298	2020 County Health Rankings (Uniform Crime Reporting- FBI; 2014 & 2016)	n/a	386	2020 County Health Rankings (Uniform Crime Reporting- FBI; 2014 & 2016)
Youth Injury	Percentage of high school students who wore a seat belt most of the time or always during the past 30 days	88%	Chippewa County Youth Risk Behavior Survey (2019)	88%	Youth Risk Behavior Surveillance System (2019)	n/a	94%	Youth Risk Behavior Surveillance System (2019)
Youth Violence	Percentage of high school students who have been bullied on school property during the past 12 months	30%	Chippewa County Youth Risk Behavior Survey (2019)	22%	Youth Risk Behavior Surveillance System (2019)	n/a	19.5%	Youth Risk Behavior Surveillance System (2019)
Mental Health Focus Area								
Disconnected Youth	Percentage of teens and young adults (16-19) who are neither working nor in school	6%	2020 County Health Rankings (American Community Survey; 2014-2018)	5%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a		
Intentional Injury Hospitalizations	Self-inflicted hospitalization rate per 100,000 population	50	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2016-2018)	51	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2016-2018)	n/a	62.2	CDC WISQARS (2018)
Mental Health Providers	Ratio of population to mental health providers	1,110 to 1	2020 County Health Rankings (CMS, National Provider Identification, 2019)	490 to 1	2020 County Health Rankings (CMS, National Provider Identification, 2019)	n/a	400 to 1	2020 County Health Rankings (CMS, National Provider Identification, 2019)
Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	3.5	2020 County Health Rankings (BRFSS; 2017)	4.0	2020 County Health Rankings (BRFSS; 2017)	n/a	4.0	2020 County Health Rankings (BRFSS; 2017)
Suicide	Numer of deaths due to suicide per 100,000 population (age-adjusted)	20	2020 County Health Rankings (National Center for Health Statistics; 2014-2018)	15	2020 County Health Rankings (National Center for Health Statistics; 2014-2018)	12.8	13.6	CDC WISQARS (2014-2018)
Suicide	Numer of deaths due to suicide per 100,000 population (age-adjusted)	20.0	CDC WISQARS (208-2019)	14.42	CDC WISQARS (2018-2019)	12.8	14.08	CDC WISQARS (2018-2019)
Youth Self-Harm	Percentage of high school students who hurt themselves on purpose in the past 12 months	22%	Chippewa County Youth Risk Behavior Survey (2019)	19%	Chippewa County Youth Risk Behavior Survey (2019)	n/a		

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Measure	Definition	Eau Claire County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Mental Health Focus Area *CONTINUED*								
Youth Suicide Attempt	Percentage of high school students who attempted suicide in the past 12 months	8%	Chippewa County Youth Risk Behavior Survey (2019)	7%	Youth Risk Behavior Surveillance System (2019)	1.8%	9%	Youth Risk Behavior Surveillance System (2019)
Youth Suicide Attempt - Injury	Percentage of high school students with a suicide attempt that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse during the past 12 months			2.0%	Youth Risk Behavior Surveillance System (2019)	n/a	2.5%	Youth Risk Behavior Surveillance System (2019)
Youth Suicide Attempt - Medical Attention	Of high school students who attempted suicide in past 12 months, percentage who received medical attention	30%	Chippewa County Youth Risk Behavior Survey (2019)	27%	Chippewa County Youth Risk Behavior Survey (2019)	n/a		
Obesity Focus Area								
Adult Obesity	Percentage of adults (age 20 +)with BMI > 30 (obese)	28%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)	31%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)	36%	29%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)
WIC Obesity	Obesity occurrence in children 2-5 yr. enrolled in WIC	14.5%	Chippewa County Department of Public Health (WIC program; 2019)	15.7%	WI Dept. of Health Services/Division of Public Health (2019)	15.5% (children 2-19)	14.4%	CDC (Division of Nutrition, Physical Activity, and Obesity; 2018)
WIC Overweight	Overweight occurrence in children 2-5 yr. enrolled in WIC	16.8%	Chippewa County Department of Public Health (WIC program; 2019)	16.6%	WI Dept. of Health Services/Division of Public Health (2019)	n/a		
Youth Obesity	Percentage of high school students who are overweight or obese (BMI is ≥85 percentile based on CDC growth chart)			29.1%	Youth Risk Behavior Surveillance System (2019)	15.5% (obese)	31.6%	Youth Risk Behavior Surveillance System (2019)
Oral Health Focus Area								
Dental Visits	Percentage of high school students who saw dentist in the past 12	79%	Chippewa County Youth Risk Behavior Survey (2019)	79%	Chippewa County Youth Risk Behavior Survey (2019)	n/a		
Dentists	Ratio of population to dentists	1,830 to 1	2020 County Health Rankings (Area Health Resource File/National Provider Identification file; 2018)	1,460 to 1	2020 County Health Rankings (Area Health Resource File/National Provider Identification file; 2018)	n/a	1,450 to 1	2020 County Health Rankings (Area Health Resource File/National Provider Identification file; 2018)
Fluoride in Public Water Supply	Percentage of population on fluoridated public water system	15.5%	Wisconsin Environmental Public Health Tracking Program (2017)	88.4%	Wisconsin Environmental Public Health Tracking Program (2017)	77.1%	73.0%	CDC (Water Flouridation Reporting System; 2018)
No Recent Dental Visit	Percentage of population age 2+ that did not have a dental visit in the past year	22%	2017 County Health Rankings (Wisconsin Family Health Survey; 2002, 2014 & 2015)	26%	2017 County Health Rankings (Wisconsin Family Health Survey; 2002, 2014 & 2015)	51%	56.8%	Office of Disease Prevention and Health Promotion (Medical Expenditure Panel Survey; 2014)
Oral Health of 3rd Grade Children	Percentage of third graders with untreated tooth decay	18% (Western Region)	WI DHS (Healthy Smiles/Healthy Growth; 2017-2018)	18%	WI DHS (Healthy Smiles/Healthy Growth; 2017-2018)	10.2% (ages 3-19)	16.2%	Office of Disease Prevention and Health Promotion (NHANES; 2013-2014)
Physical Activity Focus Area								
Access to Exercise Opportunities	Percentage of population with adequate access to location for physical activity	64%	2020 County Health Rankings (ArcGIS; 2010 & 2019)	85%	2020 County Health Rankings (ArcGIS; 2010 & 2019)	n/a	84%	2020 County Health Rankings (ArcGIS; 2010 & 2019)
Device Usage	Percentage of high school students who spent 3+ hours per day on a phone, Xbox, or other device on an average school day	44%	Chippewa County Youth Risk Behavior Survey (2019)	49%	Youth Risk Behavior Surveillance System (2019)	n/a	46%	Youth Risk Behavior Surveillance System (2015)
Physical Education	Percentage of students **not** attending physical education class on 1 or more days during the school week					n/a	48%	Youth Risk Behavior Surveillance System (2019)
Physical Inactivity	Percentage of adults aged 20 and over reporting no leisure time physical activity	21%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)	21%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)	21.2%	23%	2020 County Health Rankings (CDC Diabetes Interactive Atlas; 2016)
Television	Percentage of high school students who watched TV 3+ hours per day on an average school day	22%	Chippewa County Youth Risk Behavior Survey (2019)	18%	Youth Risk Behavior Surveillance System (2019)	n/a	20%	Youth Risk Behavior Surveillance System (2019)
Youth Physical Activity	Percentage of high school students physically active at least 60 minutes per day 5+ days (during past week)	60%	Chippewa County Youth Risk Survey (2019)	57%	Chippewa County Youth Risk Survey (2019)	n/a	44%	Youth Risk Behavior Surveillance System (2019)
Reproductive/Sexual Health Focus Area								
Chlamydia Infections	Number of newly diagnosed chlamydia cases per 100,000 population	272.7	2020 County Health Rankings (NCHHSTP; 2017)	478.6	2020 County Health Rankings (NCHHSTP; 2017)	n/a	524.6	2020 County Health Rankings (NCHHSTP; 2017)
HIV Prevalence	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population	25.8	CDC NCHHSTP (Atlas Plus; 2018)	129.0	CDC NCHHSTP (Atlas Plus; 2018)	n/a	372.8	CDC NCHHSTP (Atlas Plus; 2018)
Prenatal Care	Percentage of births to mothers who received 1st trimester prenatal care	80.0%	DHS WISH (2017)	75.8%	DHS WISH (2017)	n/a	77.3%	DHS WISH (2017)
Preterm Births	Percentage of births < 37 weeks gestation	9.7%	DHS WISH (2018)	9.9%	DHS WISH (2018)	9.4%	10.02%	National Vital Statistics System (2018)

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Measure	Definition	Eau Claire County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Reproductive/Sexual Health Focus Area *CONTINUED*								
Teen Birth Rate	Birth rate per 1,000 females age 15-19	15	2020 County Health Rankings (NVSS; 2012-2018)	17	2020 County Health Rankings (NVSS; 2012-2018)	n/a	23	2020 County Health Rankings (NVSS; 2012-2018)
Youth Sexual Behavior	Percentage of high school students who have ever had sexual intercourse	38%	Chippewa County Youth Risk Behavior Survey (2019)	35%	Youth Risk Behavior Surveillance System (2019)	19.2% (ages 15-17)	38%	Youth Risk Behavior Surveillance System (2019)
Youth Sexual Behavior	Percent of high school students who had sex without any pregnancy prevention method (of those who have had sex)	6%	Chippewa County Youth Risk Behavior Survey (2019)	12%	Youth Risk Behavior Surveillance System (2019)	n/a	12%	Youth Risk Behavior Surveillance System (2019)
Substance Use Focus Area								
Drug Arrests	Violation of laws prohibiting the production, distribution, possession, or transportation per 100,000 population	103	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)	439	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)	n/a	490	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Drug Hospitalizations	Drug-related hospitalization rate per 100,000	307	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	261	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	n/a		
Opioid-related Hospitalizations	Emergency Room visits for opioid overdoses per 100,000 population	23.8	Wisconsin Dept. of Health Services (Data Direct, Opioid Hospitalization Module; 2018)	45.5	Wisconsin Dept. of Health Services (Data Direct, Opioid Hospitalization Module; 2018)	n/a		
Methamphetamines	Percentage of high school students who used methamphetamines one or more times during their life	3%	Chippewa County Youth Risk Behavior Survey (2019)	2%	Youth Risk Behavior Surveillance System (2019)	n/a	2%	Youth Risk Behavioral Surveillance System (2019)
Meth Overdose Deaths	Rate of meth overdose deaths per 100,000	1.8	Wisconsin Dept. of Health Services (2014-2019)	1.6	Wisconsin Dept. of Health Services (2014-2019)	n/a		
Marijuana	Percentage of high school students who recently used marijuana (w/in last 30 days)	15%	Chippewa County Youth Risk Behavior Survey (2019)	20%	Youth Risk Behavior Surveillance System (2019)	n/a	22%	Youth Risk Behavioral Surveillance System (2019)
Prescription Abuse	Percentage of high school students who ever misused prescription pain medication	12%	Chippewa County Youth Risk Behavior Survey (2019)	11%	Youth Risk Behavioral Surveillance System (2019)	n/a	14%	Youth Risk Behavioral Surveillance System (2019)
Student Drug Suspensions	Drug-related suspension & expulsion in public schools per 1,000 students	5.1	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	3.2	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	n/a		
Tobacco Use & Exposure Focus Area								
Adult Smokeless Tobacco Use	Percentage of persons aged ≥18 years who reported currently using chewing tobacco, snuff, or snus (a small pouch of smokeless tobacco) every day or some days			3.1%	CDC (BRFSS; 2019)	n/a	4.0% (median)	CDC (BRFSS; 2019)
Adult Smoking	Percentage of the adult population in a county who both report that they currently smoke every day or most days and have smoked at least 100 cigarettes in their lifetime	15%	2020 County Health Rankings (BRFSS; 2017)	16%	2020 County Health Rankings (BRFSS; 2017)	5%	17%	2020 County Health Rankings (BRFSS; 20017)
Smoking During Pregnancy	Percentage of births where mother reports smoking during pregnancy	15%	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2015-2018)	11%	2020 County Health Rankings (Wisconsin Interactive Statistics on Health; 2015-2018)	n/a	8.1%	CDC (Pregnancy Risk Assessment and Monitoring System; 2017)
Tobacco Sales to Minors	Percentage of illegal tobacco sales to minors (retailer violation rate)	0.0%	Wisconsin Wins (2019)	7.1%	Substance Abuse and Mental Health Services Administration (Annual Synar Reports; 2018)	n/a	9.6%	Substance Abuse and Mental Health Services Administration (Annual Synar Reports; 2018)
Student Smokeless Tobacco Use	Percentage of high school students who used smokeless tobacco (chew, etc.) during the past 30 days	8%	Chippewa County Youth Risk Survey (2019)	3%	Youth Risk Behavioral Surveillance System (2019)	2.3%	4%	Youth Risk Behavioral Surveillance System (2019)
Student Tobacco Use	Percentage of high school students who smoked cigarettes on one or more of the past 30 days	10%	Chippewa County Youth Risk Survey (2019)	6%	Youth Risk Behavioral Surveillance System (2019)	n/a	6%	Youth Risk Behavioral Surveillance System (2019)
Student Vaping	Percentage of high school students who ever tried e-cigarettes/vaping/juul	46%	Chippewa County Youth Risk Survey (2019)	46%	Youth Risk Behavioral Surveillance System (2019)	n/a	50%	Youth Risk Behavioral Surveillance System (2019)
Student Vaping	Percentage of high school students who used e-cigarettes/vape/juul in the past 30 days	23%	Chippewa County Youth Risk Survey (2019)	21%	Youth Risk Behavioral Surveillance System (2019)	10.5% (grades 6-12)	33%	Youth Risk Behavioral Surveillance System (2019)
Miscellaneous Data								
65 and Older	Percentage of the population 65 and older	18.0%	2020 County Health Rankings (US Census; 2018)	17.0%	2020 County Health Rankings (US Census; 2018)	n/a	15.2%	American Community Survey; 2014-2018)
Below 18 Years	Percentage of the population below 18 years of age	22.1%	2020 County Health Rankings (US Census; 2018)	22.0%	2020 County Health Rankings (US Census; 2018)	n/a	22.8%	American Community Survey; 2014-2018)
Child Mortality	Number of deaths among children under age 18 per 100,000 people	50	2020 County Health Rankings (National Center for Health Statistics; 2015-2018)	50	2020 County Health Rankings (National Center for Health Statistics; 2015-2018)	n/a	n/a	

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Measure	Definition	Eau Claire County	Source (year of Data)	Wisconsin	Source (year of Data)	Healthy People 2030 Target	National Rate	Source (year of Data)
Miscellaneous Data *CONTINUED*								
Children Eligible for Free Lunch	Percentage of children enrolled in public schools that are eligible for free school lunch	37%	2020 County Health Rankings (National Center for Education Statistics; 2017-2018)	37%	2020 County Health Rankings (National Center for Education Statistics; 2017-2018)	n/a	52.6%	National Center for Education Statistics; 2017-2018
Children in Poverty	Percentage of children under 18 living in poverty	15%	2020 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2018)	14%	2020 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2018)	n/a	18%	2020 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2018)
Driving Alone to Work	Percentage of the workforce that drives alone to work	82%	2020 County Health Rankings (American Community Survey; 2014-2018)	81%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	76%	2020 County Health Rankings (American Community Survey; 2014-2018)
Health Care	Percentage of population that did not receive needed health care in the past year	2%	2017 County Health Rankings (Family Health Survery; 2012, 2014 & 2015)	2%	2017 County Health Rankings (Family Health Survery; 2012, 2014 & 2015)	n/a		
Health Care Costs	Amount of price-adjusted Medicare reimbursements per enrollee	$8,615	Dartmouth Atlas of Health Care (2017)	$9,030	Dartmouth Atlas of Health Care (2017)	n/a	$10,437	Dartmouth Atlas of Health Care (2017)
Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.0	2020 County Health Rankings (American Community Survey; 2014-2018)	4.3	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	4.9	2020 County Health Rankings (American Community Survey; 2014-2018)
Local Health Department Staffing	Fulltime equivalents of local health department staff per 10,000 population	3.2	Chippewa County Public Health Profile, DHS (2016)	3.2	Wisconsin Public Health Profiles (2016)	n/a	n/a	
Long Commute - Driving Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes	26%	2020 County Health Rankings (American Community Survey; 2014-2018)	27%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	36%	2020 County Health Rankings (American Community Survey; 2014-2018)
Median Household Income	Median household income	$59,500	2020 County Health Rankings (Small Area Income and Poverty Estimates program; 2018)	$60,800	2020 County Health Rankings (Small Area Income and Poverty Estimates program; 2018)	n/a	$61,937	Small Area Income and Poverty Estimates (2018)
Not Proficient in English	Percentage of population that is not proficient in English	0%	2020 County Health Rankings (American Community Survey; 2014-2018)	1%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a		
Older Living Alone	Percentage of 65 years and older who live alone	28%	2020 County Health Rankings (American Community Survey; 2014-2018)	29%	2020 County Health Rankings (American Community Survey; 2014-2018)	n/a	42.8%	American Community Survey; 2014-2018)
Poor or Fair Health	Percentage of adults self-reporting poor or fair health (age-adjusted)	13%	2020 County Health Rankings (BRFSS; 2017)	17%	2020 County Health Rankings (BRFSS; 2017)	n/a	17%	2020 County Health Rankings (BRFSS; 2017)
Poor Physical Health Days	Average number of physically unhealthy days self-reported in adults in past 30 days (age-adjusted)	3.4	2020 County Health Rankings (BRFSS; 2017)	3.9	2020 County Health Rankings (BRFSS; 2017)	n/a	3.8	2020 County Health Rankings (BRFSS; 2017)
Population Change	Percentage change in population since last decennial U.S. Census	3%	2020 County Health Rankings (DHS WISH; 2018, 2010)	2%	2020 County Health Rankings (DHS WISH; 2018, 2010)	n/a		
Poverty, All Ages	Percentage of population living below the Federal Poverty Line	11%	2020 County Health Rankings (Small Area Income and Poverty Estimates program; 2018)	11%	2020 County Health Rankings (Small Area Income and Poverty Estimates program; 2018)	n/a	13.1%	Small Area Income and Poverty Estimates (2018)
Premature Death	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	6,000	2020 County Health Rankings (National Center for Health Statistics; Compressed Mortality File; 2016-2018)	6,400	2020 County Health Rankings (National Center for Health Statistics; Compressed Mortality File; 2016-2018)	n/a	6,900	2020 County Health Rankings (National Center for Health Statistics; Compressed Mortality File; 2016-2018)
Preventable Hospital Stays	Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	4,708	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)	3,940	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)	n/a	4,535	2020 County Health Rankings (CMS Mapping Medicare Disparities Tool; 2017)
Primary Care Physicians	Ratio of population to primary care physicians	1,180 to 1	2020 County Health Rankings (Area Health Resource File/American Medical Association; 2017)	1,270 to 1	2020 County Health Rankings (Area Health Resource File/American Medical Association; 2017)	n/a	1,330 to 1	2020 County Health Rankings (Area Health Resource File/American Medical Association; 2017)
Race/Ethnicity	Percentage of population that is African American, Asian, American Indian or Alaskan Native, or Hispanic	5%	2020 County Health Rankings (Census Bureau's Populations Estimates Program; 2018)	16.9%	2020 County Health Rankings (Census Bureau's Populations Estimates Program; 2018)	n/a		
Rural	Percentage of population living in a rural area	46%	2020 County Health Rankings (US Census Bureau Population Estimates Program; 2010)	29.8%	2020 County Health Rankings (US Census Bureau Population Estimates Program; 2010)	n/a	19.3%	2020 County Health Rankings (US Census Bureau estimates; 2010)
Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	11%	2020 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2012-2016)	14%	2020 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2012-2016)	n/a	18%	2020 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2012-2016)
Social Associations	Number of membership associations per 10,000 population	11.3	2020 County Health Rankings (County Business Patterns; 2017)	11.6	2020 County Health Rankings (County Business Patterns; 2017)	n/a	9.3	2020 County Health Rankings (County Business Patterns; 2017)
Unemployment	Percentage of population age 16+ unemployed but seeking work	3.3%	2020 County Health Rankings (Bureau of Labor Statistics; 2018)	3.0%	2020 County Health Rankings (Bureau of Labor Statistics; 2018)	n/a	3.9%	2020 County Health Rankings (Bureau of Labor Statistics; 2018)
Uninsured Children	Percentage of children under age 19 without health insurance	4%	2020 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2017)	4%	2020 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2017)	n/a		
Uninsured Under Age 65	Percentage of population under age 65 that has no health insurance coverage	6%	2020 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2017)	6%	2020 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2017)	7.9%	10%	2020 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2017)
W2 Enrollment	Count of Individuals enrolled in W-2 (Wisconsin Works) on the last working day of the month	44	2020 County Health Rankings (Wisconsin Works; 2018)	7,505	2020 County Health Rankings (Wisconsin Works; 2018)	n/a		

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Appendix IV:

Community Assets Inventory

RESOURCE DIRECTORIES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Aunt Bertha	www.findhelp.org	A free and easy-to-use resource that helps connect individuals in the community to free and reduced-cost programs and services. Search by zip code to find local resources.
Great Rivers 2-1-1	(800) 362-8255 www.greatrivers211.org	Provides offers free, confidential community information and referrals 24 hours/day. Also offers a 24/7 Crisis Hotline.

Note: Resources specific to the top five health area priorities identified through the Community Health Assessment process are listed on the following pages. While not comprehensive, these listings provide a glimpse into local organizations and services that may be used to help improve community health in Eau Claire County.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

MENTAL HEALTH SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Aging and Disability Resource Center (ADRC)	711 N. Bridge Street Chippewa Falls, WI 54729 (715) 726-7777	Provides services, information, referrals, and advocacy to older adults, adults with mental health or substance abuse disorders, and their families and caregivers.
Alzheimer's Association of Greater Wisconsin- Chippewa Valley Outreach Office	404 1/2 N. Bridge Street Chippewa Falls, WI 54729 (715) 861-6174 www.alz.org/gwwi	Provides information, consultation, and emotional support for persons with Alzheimer's, their families, caregivers, and the general public.
Aurora Community Counseling and Employee Support Services	345 Frenette Drive, Ste #3 Chippewa Falls, WI 54729 (888) 261-5585 www.auroraservices.com	Counseling services address addictions, mood disorders, eating disorders, grief and loss, and marital issues.
Big Brothers Big Sisters of Northwestern Wisconsin	424 Galloway Street Eau Claire, WI 54703 (715) 835-0161 www.bbbsnw.org/	Creates and supports one-on-one mentoring relationships for youth facing adversity, including those living in single parent homes, growing up in poverty, and coping with parental incarceration.
Chippewa Falls Area Senior Center	1000 E. Grand Ave Chippewa Falls, WI 54729	Services and programs to enhance physical, mental, and social wellbeing of people ages 55 and over.
Chippewa Valley Family Caregiving Alliance	info@chippewavalleycargiving.org	Provides support and strengthens family caregivers of older adults through advocacy, education, and community resources.
Chippewa Valley VA Clinic	475 Chippewa Mall Drive, Suite 418 Chippewa Falls, WI 54729 (715) 720-3780	Provides mental health services with on-site staff and telemedicine capability linked to providers in Minneapolis. Must be enrolled in the Minneapolis VA Health Care System to receive treatment at this clinic.
Family Support Center	403 N. High St. Chippewa Falls, WI 54729 (715) 723-1138 www.familysupportcentercf.com	Provides counseling, advocacy, and other services to victims of domestic violence and sexual assault. Also provides parenting education and community referrals.
Hmong Mutual Assistance Association	423 Wisconsin Street Eau Claire, WI 54703 (715) 832-8420	Provides support for healthy mental, emotional, and physical development for Hmong families.
L.E. Phillips Libertas Center	2661 County Hwy I Chippewa Falls, WI 54729 www.libertascenter.org	In-patient and outpatient mental health services.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

MENTAL HEALTH SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Marriage and Family Health Services	405 Island Street Chippewa Falls, WI 54729 (715) 832-0238 www.marriageandfamilyhealthservices.com	Offers a full range of assessments and therapeutic services for children, teens, adults, couples, and families.
Marshfield Clinic - Chippewa Falls Center	2655 County Hwy I Chippewa Falls, WI 54729 (715) 726-4200	Multi-specialty clinic includes Primary Care and Child Psychology.
Mayo Clinic Health System - Chippewa Valley	1501 Thompson St. Bloomer, WI 54724 1-888-662-5666	Behavioral health services for people of all ages.
Mentor Chippewa	750 Tropicana Blvd. Chippewa Falls, WI 54729 (715) 726-2400 www.mentorchippewa.org	Provides weekly mentoring services to students in Kindergarten through 12th grade in the Chippewa Falls Area Unified School District and McDonnell Area Catholic Schools.
National Alliance on Mental Illness - Chippewa Valley	Banbury Place Omni Office Center Building #2D, Suite 420F 800 Wisconsin St. Eau Claire, WI 54703 (715) 450-6484 www.namicv.org	Provides education, advocacy, and support to families and individuals living with a mental illness.
Northwest Connections	888-552-6642 (Crisis Line)	Provides emergency mental health services to Chippewa County residents (via contract with the Department of Human Services).
Open Door Clinic	First Presbyterian Church 130 W. Central Chippewa Falls, WI 54729 (715) 720-1443 www.chippewaopendoor.org	Provides basic health care services and a connection to community resources for Chippewa County residents without a healthcare alternative. Includes mental health services via telehealth.
Vantage Point Clinic & Assessment Center	2005 Highland Ave. Eau Claire, WI 54701 (715) 832-5454 www.vantagepointclinic.com	Provides counseling services to children, adolescents, adults, couples, and families with behavioral health concerns.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

MENTAL HEALTH SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Vivent Health	505 S. Dewey Street Eau Claire, WI 54701 (715) 836-7710 www.viventhealth.org/locations/eau-claire/	Provides mental health services for individuals who are HIV positive or have AIDS.
Wellness Shack	505 S Dewey St. Suite 101 Eau Claire WI 54701 (715) 855-7705 www.wellnessshack.org	Peer-run mental health recovery center for people who live with severe or persistent mental health disorders. Offers individual and group peer support, education, advocacy, and socialization.
Western Region Recovery and Wellness Consortium (Chippewa County)	711 N. Bridge St. Room 118 Chippewa Falls, WI 54729 (715) 726-7788	Regional consortium provides services to individuals with mental health and substance use disorders. Eligibility is based on functional and financial criteria.
Western WI Regional Center for Children and Youth with Special Health Care Needs	711 N. Bridge St. Chippewa Falls, WI 54729 (715) 726-7907	Supports and provides information for families through a statewide coordinated system of information, referral and follow-up, parent to parent support and service coordination.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ALCOHOL MISUSE SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Aging and Disability Resource Center (ADRC)	711 N. Bridge Street Chippewa Falls, WI 54729 (715) 726-7777	Provides services, information, referrals, and advocacy to older adults, adults with mental health or substance abuse disorders, and their families and caregivers.
Al-Anon	2926 Pomona Dr. Eau Claire, WI 54701 (715) 833-1878 www.area61afg.org	Twelve-step support group for families of alcoholics.
Alano Club 76	76 East Central St. Chippewa Falls, WI 54729 (715) 723-7626	A place for people in recovery and their families to enjoy fellowship and fun events. Twelve-step meetings held regularly.
Alcoholics Anonymous - Chippewa Valley Intergroup	(715) 835-5543 chair@chippewavalleyintergroup.org	Maintains a 24-hour hotline for assistance and sponsors workshops and social gatherings for supporting individuals who abuse alcohol. Provides 12-step support groups for alcoholics.
Aurora Community Counseling and Employee Support Services	345 Frenette Drive, Ste #3 Chippewa Falls, WI 54729 (888) 261-5585 www.auroraservices.com	Counseling services address addictions, mood disorders, eating disorders, grief and loss, and marital issues.
Chippewa Health Improvement Partnership - Voices in Prevention Action Team	www.chippewahealth.org (715) 717-7647 info@chippewahealth.org	Community coalition coordinating comprehensive community awareness campaign on current drug trends including prescription drug abuse, alcohol misuse, heroin, and other illegal drug use.
Community Counseling Services	16947 Cty Hwy X Chippewa Falls, WI 54729 (715) 723-1221 communitycounselingservices@gmail.com	Provides educational program for individuals with legal or personal problems related to the misuse of alcohol or other drugs.
Hope Gospel Mission	2650 Mercantile Dr. Eau Claire, WI (715) 552-5566 www.hopegospelmission.org	Faith-based organization that serves the lost, homeless, hungry, hurting, abused, and addicted men and women of western Wisconsin. Home to the Hope Renewal Center for Women and Children program.
L.E. Phillips Libertas Center	2661 County Hwy I Chippewa Falls, WI 54729 www.libertascenter.org	Provides inpatient detox and residential treatment for substance use disorders.
Lutheran Social Services – Chippewa Area Recovery Resource	Chippewa, WI (715) 726-9023	Addiction treatment program provides evidence-based substance abuse treatment service. Includes assessments, intensive outpatient treatment, continuing care services, and trauma treatment.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

ALCOHOL MISUSE SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Lutheran Social Services – Fahrman Center	3136 Craig Rd. Eau Claire, WI 54701 (715) 835-9110	Provides residential and transitional (halfway house) services to adults with substance use disorders.
Marriage and Family Health Services	405 Island Street Chippewa Falls, WI 54729 (715) 832-0238 www.marriageandfamilyhealthservices.com	Offers a full range of assessments and therapeutic services for children, teens, adults, couples, and families.
Mayo Clinic Health System - Chippewa Valley	1501 Thompson St. Bloomer, WI 54724 1-888-662-5666	Alcohol and drug dependency counseling services for people of all ages.
Vantage Point Clinic & Assessment Center	2005 Highland Ave. Eau Claire, WI 54701 (715) 832-5454 www.vantagepointclinic.com	Provides counseling services to children, adolescents, adults, couples, and families with behavioral health concerns.
Vivent Health	505 S. Dewey Street Eau Claire, WI 54701 (715) 836-7710 www.viventhealth.org/locations/eau-claire	Provides alcohol and drug treatment services for individuals who are HIV positive or have AIDS.
Western Region Recovery and Wellness Consortium (Chippewa County)	711 N. Bridge St. Room 118 Chippewa Falls, WI 54729 (715) 726-7788	Regional consortium provides services to individuals with mental health and substance use disorders. Eligibility is based on functional and financial criteria.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

DRUG USE SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Aging and Disability Resource Center (ADRC)	711 N. Bridge Street Chippewa Falls, WI 54729 (715) 726-7777	Provides services, information, referrals, and advocacy to older adults, adults with mental health or substance abuse disorders, and their families and caregivers.
Aurora Community Counseling and Employee Support Services	345 Frenette Drive, Ste #3 Chippewa Falls, WI 54729 (888) 261-5585 www.auroraservices.com	Counseling services address addictions, mood disorders, eating disorders, grief and loss, and marital issues.
Chippewa Health Improvement Partnership - Voices in Prevention Action Team	(715) 717-7647 www.chippewahealth.org info@chippewahealth.org	Community coalition coordinating comprehensive community awareness campaign on current drug trends including prescription drug abuse, alcohol misuse, heroin, and other illegal drug use.
Community Counseling Services	16947 Cty Hwy X Chippewa Falls, WI 54729 (715) 723-1221 communitycounselingservices@gmail.com	Provides educational program for individuals with legal or personal problems related to the misuse of alcohol or other drugs.
Eau Claire Comprehensive Treatment Center	3440 Oakwood Hills Pkwy Eau Claire, WI 54701 (715) 802-2260	Provides medication-assisted treatment (MAT) and therapy in an outpatient setting to adults with opioid use disorders.
Hope Gospel Mission	2650 Mercantile Dr. Eau Claire, WI (715) 552-5566 www.hopegospelmission.org/	Faith-based organization that serves the lost, homeless, hungry, hurting, abused, and addicted men and women of western Wisconsin. Home to the Hope Renewal Center for Women and Children program.
L.E. Phillips Libertas Center	2661 County Hwy I Chippewa Falls, WI 54729 www.libertascenter.org	Provides inpatient detox and residential treatment for substance use disorders.
Lutheran Social Services – Chippewa Area Recovery Resource	Chippewa, WI (715) 726-9023	Addiction treatment program provides evidence-based substance abuse treatment service. Includes assessments, intensive outpatient treatment, continuing care services, and trauma treatment.
Lutheran Social Services – Fahrman Center	3136 Craig Rd. Eau Claire, WI 54701 (715) 835-9110	Provides residential and transitional (halfway house) services to adults with substance use disorders.

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DRUG USE SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Marriage and Family Health Services	405 Island Street Chippewa Falls, WI 54729 (715) 832-0238 www.marriageandfamilyhealthservices.com	Offers a full range of assessments and therapeutic services for children, teens, adults, couples, and families.
Mayo Clinic Health System – Chippewa Falls	611 First Ave., Chippewa Falls, WI 54729 (715) 708-6248	Offers outpatient addiction treatment services.
Mayo Clinic Health System - Chippewa Valley	1501 Thompson St. Bloomer, WI 54724 (888) 662-5666	Offers outpatient addiction treatment services.
Vantage Point Clinic & Assessment Center	2005 Highland Ave. Eau Claire, WI 54701 (715) 832-5454 www.vantagepointclinic.com	Provides counseling services to children, adolescents, adults, couples, and families with behavioral health concerns.
Vivent Health	505 S. Dewey Street Eau Claire, WI 54701 (715) 836-7710 www.viventhealth.org/locations/eau-claire/	Provides alcohol and drug treatment services for individuals who are HIV positive or have AIDS.
Western Region Recovery and Wellness Consortium (Chippewa County)	711 N. Bridge St. Room 118 Chippewa Falls, WI 54729 (715) 726-7788	Regional consortium provides services to individuals with mental health and substance use disorders. Eligibility is based on functional and financial criteria.

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CHRONIC DISEASE PREVENTION & CONTROL SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Aging and Disability Resource Center	711 N. Bridge Street Chippewa Falls, WI 54729 (715) 726-7777	Provides services, information, referrals, and advocacy related to aging and/or living with a disability. Offers a Dementia Care Specialist.
Ascension Our Lady of Victory	1120 Pine St. Stanley, WI 54768 (715) 644-5530	Offers Family Medicine.
Chippewa County Department of Public Health	711 N. Bridge St. Room 121 Chippewa Falls, WI 54729 (715) 726-7900	Promotes community health by providing information, health clinics, and other services to Chippewa County residents.
HSHS St. Joseph's Hospital	2661 County Hwy I Chippewa Falls, Wisconsin 54729 (715) 723-1811	Offers Heart Care, Renal Dialysis, and other services.
Marshfield Clinic – Bloomer Center	1711 York St Bloomer, WI 54724 (715) 568-6220	Offers Family Medicine services.
Marshfield Clinic – Cadott Center	305 S Highway 27 Cadott, WI 54727 (715) 289-3102	Offers Family Medicine services.
Marshfield Clinic – Chippewa Falls Center	2655 County Highway I Chippewa Falls, WI 54729 (715) 726-4200	Offers Adult Primary Care, Pediatrics, Cardiology, Oncology, and other services.
Mayo Clinic – Bloomer	1501 Thompson St., Bloomer, WI 54724 (715) 861-1398	Services include Family Medicine, Cardiology, Diabetes Education, and other specialties.
Mayo Clinic – Chippewa Falls	611 First Ave., Chippewa Falls, WI 54729 (715) 708-6248	Services include Family Medicine, Cardiology, Diabetes Education, Rheumatology, and other specialties.
OakLeaf Clinics – Chippewa Falls	855 Lakeland Drive Chippewa Falls, WI 54729	Offers Family Medicine, Cardiology, Pulmonary Care, and other specialties.
Open Door Clinic	First Presbyterian Church 130 W. Central Chippewa Falls, WI 54729 (715) 720-1443 www.chippewaopendoor.org	Provides basic health care services and a connection to community resources for Chippewa County residents without a healthcare alternative.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

CHRONIC DISEASE PREVENTION & CONTROL SERVICES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Prevea – Chippewa Falls Health Center	2509 County Hwy I, Chippewa Falls, WI 54729 (715) 723-9138	Offers Family Medicine, Pediatrics, and other specialties.
Prevea – Cornell Health Center	320 N. 7th St. Cornell, WI 54732 (715) 239-0337	Offers Family Medicine and other services.
YMCA of the Chippewa Valley	611 Jefferson Ave. Chippewa Falls, WI 54729 (715) 723-2201 www.ymca-cv.org	Offers Evidence-based Health Intervention programs targeted toward specific conditions and wellness needs, including arthritis, Alzheimer's, diabetes prevention, and cancer.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

OBESITY RESOURCES

SERVICE NAME	CONTACT INFO	DESCRIPTION
Marshfield Clinic – Chippewa Falls Center	2655 County Highway I Chippewa Falls, WI 54729 (715) 726-4200	Provides weight management program and nutrition services.
Marshfield Clinic – Cadott Center	305 S Highway 27 Cadott, WI 54727 (715) 289-3102	Provides Family Medicine, including nutrition services.
Marshfield Clinic – Cornell Center	600 Woodside Drive Cornell, WI 54732 (715) 239-6344	Provides family medicine, including nutrition services.
Mayo Clinic Health System – Bloomer	1501 Thompson St., Bloomer, WI 54724 (715) 861-1398	Provides family medicine, including nutrition services.
Mayo Clinic Health System – Chippewa Falls	611 First Ave., Chippewa Falls, WI 54729 (715) 708-6248	Provides family medicine, including nutrition services.
Prevea – Chippewa Falls Health Center	2509 County Hwy I, Chippewa Falls, WI 54729 (715) 723-9138	Offers Ideal Weigh weight loss program.
Weight Watchers	1000 E. Grand Ave. Chippewa Falls, WI 54729 (800) 651-6000	Provides personal assessment, action plan, and support to help with weight loss.
YMCA of the Chippewa Valley	611 Jefferson Ave. Chippewa Falls, WI 54729 (715) 723-2201 www.ymca-cv.org	Offers numerous programs, classes, and fitness opportunities.

Attachment: Report_CHA_Chippewa_2021_FINAL (6405 : Community Health Assessment Results - Komi Modji)

STATEMENT OF EXPLANATION
HUMAN SERVICES DIRECTOR'S PROGRAM AND FINANCIAL REPORT - TIM EASKER

Tim Easker, Human Services Director, provides a department program and financial report for review and discussion.

Director's Report to the Health & Human Services Board
Tim Easker

Board Meeting Date: June 17, 2021

1. WCHSA Updates

Division of Children's and Families (DCF)

- **DCF Secretary Meeting** – The quarterly meeting with the DCF Secretary was held on 5/26/2021. Topics discussed included placement resources for children with complex needs, the 2021-23 e biennial budget, youth justice system reform proposals, QRTP legislation, county and tribal OE activities, the WCHSA workgroup on allocation methodology for the Children and Families Allocation, and federal American Rescue Act Plan funds.
- **Family First Town Hall Meetings** – DSP completed several Family First two hall meetings in May, including sessions with legal system partners and service providers. The town hall presentation is on the DCF website.
  https://dcf.wisconsin.gov/files/images/family-first/town-hall-presentation-may-2021.pdf
- **Child Welfare Transformation** – Change management training sessions were started in May and are continuing into June to introduce counties to the Root Learning Compass Experience. The training is being offered in several cohorts coordinated by the Wisconsin Child Welfare Professional Development System.
- **QRTP Legislation** – Legislation authorizing DCF to establish requirements for Qualified Residential Treatment Programs was approved by the Legislature in May and signed as 2021 Wis. Act 42. DSP is now proceeding to issue an emergency administrative rule for QRTPs.
  https://docs.legis.wisconsin.gov/2021/related/acts/42.pdf

Youth Justice Program - Division of Safety and Permanence (DSP)

- **Supporting Foster Youth** – Following up on DSP Information Memo 2021-12 released in April, DSP is conducting several regional sessions in June to explain the funding available to help youth remain in the current placements and provide assistance to youth that previously exited out-of-home care. The sessions are organized by the DCF Youth Services Regions.
  https://dcf.wisconsin.gov/files/cwportal/policy/pdf/memos/2021-12i.pdf

Child Care Program - Division of Early Care and Education (DECE)

- Fingerprint Background Checks - 6/1/2021 was the deadline for county child care agencies to complete fingerprint background checks for certified child care providers. Fingerprint background checks were waived due the COVID pandemic under a DCF emergency rule that expired in February.
- **CY 2020 Child Care Administration Contract Reob/Deobs** – DECE is processing de-obligations and re-obligations for the CY 2020 child care administration contract. There is sufficient underspending to cover the costs for all county child care agencies that overspent any of the funding allocations within the contract.
- Child Care Provider Assistance -DECE is making funds available through two new programs in June to support child care providers. The funds are from the federal Coronavirus Response and Relief Supplemental Appropriations Act of 2021. The programs provide financial incentives to the child care workforce and access to technology.
  - Workforce Retention and Recognition Stipend Program – applications by individual child care educators can be submitted in two rounds, depending on providers being current with fingerprint background checks.
  - Technology Access Program – applications can be submitted by child care providers for technology devices and software to support business operations

Attachment: 5.4a DHS Director Report 06-17-21 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

Division of Health Services (DHS)

- **Wisconsin Medicaid Expansion-** Wisconsin's budget committee voted to turn down the opportunity to expand the state's Medicaid program, thereby eliminating the opportunity to provide health care and long-term care services for more Wisconsinites and declining more than $1.6 billion in federal funding.
- **DHS Advocates for Medicaid Expansion-**DHS continues to call for Medicaid expansion after new research released by Kaiser Family Foundation, a non-partisan non-profit, found significant health and economic benefits in states that had expanded Medicaid.
- **Mendota Juvenile Treatment Center-**DHS Secretary-designee Karen Timberlake released this statement regarding the Committee's approval for DHS to proceed with construction of a 50-bed expansion of the Mendota Juvenile Treatment Center (MJTC).
- **New Resources to Support Local Child Find Efforts: First 1,000 Days Campaign-**DHS is excited to launch the First 1,000 Days Wisconsin Child Find Campaign. Through this campaign, DHS aims to help more families who have children with delays or disabilities access the Birth to 3 Program.
- **CLTS Waiver Renewals Posted for Public Comment** DHS is seeking public comment on its waiver renewal applications. Your input on the changes is important. Public comments are due by June 4, 2021. The draft waiver renewal applications and more information on the proposed changes are available on the CLTS Waiver Renewal Initiative webpage. You may submit your comments by email or mail them to:

  State of Wisconsin Department of Health Services, Division of Medicaid Services Bureau of Children's Services
  Attn: CLTS Waiver Renewal
  1 W. Wilson St., Room 418
  PO Box 309
  Madison, WI 53701-0309

2. Department and Division Updates

Department Updates:

- During our last WCHSA meeting, Birth to Three program reviews were discussed. The reviews are being conducted by MetaStar a contracted agency. The issue surrounds a new tool implemented which is causing concern across the state. Specifically, counties which had received high marks for years began receiving the lowest score possible. Counties believe the new instrument is partially to blame but Chippewa's experience two years ago was that MetaStar was part of the issue as well. We received low marks for not having the Individual Family Service Plans (IFSP) in the file. These were in every file however, reviewers were looking for Individual Service Plans (ISPs) which are found in the Children's Long-Term Support program. Counties have banded together and will not be participating in the reviews until the state discusses our concerns with WCHSA. Chippewa was scheduled to have our review in July.
- Budget season is underway. We just received news that the preliminary health insurance increase is 5.8% for 2022. Negotiations are still underway between our Department of Administration and Security Health and we are hoping this can come down. We have had our preliminary budget meetings between each division, fiscal, and myself. We also looked at year to date spending.
- The leadership team had began reading the book "Results that Last" by Quint Studer, which is a book about evidenced-based leadership principles I was introduced to the book while employed by Children's Hospital of Wisconsin. We are going through one chapter per month having discussions during one of our two regularly scheduled leadership meetings.
- We would like to recognize the following dedicated staff for her years of service, Kristen Wojtalewicz, (CPS) one year: Ashley Starck and Beth Holm (CPS), Hannah Kleist (CWDA) two years; Kari Kerber (CPS), Cheryl Kivi-Lemanski and Danielle Jones (ES) four years; Melinda Steele (ES) six years. THANK YOU!

Attachment: 5.4a DHS Director Report 06-17-21 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

Divisions:

Aging & Disability Resource Center (ADRC)

- There are many things happening in the Nutrition Program right now. As previously mentioned, Jack Kuechenmeister has retired. His last day was June 11, so we are in the process of hiring for that position. In addition, we are working on plans to reopen our Senior Dining sites. It is very likely that the dates for reopening will be different in each community but we are hoping for July for most locations. And, of course, we are still working on identifying a new provider for meals in the Cadott area. That process is a bit lengthy but we are working as fast as possible to get something in place.
- Our soft opening of the ADRC went smoothly and based on what other ADRC's have reported, we aren't expecting a great deal of walk-in traffic now that our doors are advertised as open. With the exception of the Administrative Assistance and myself, the remaining office staff are all telecommuting half time. It's definitely going to be strange having more people in the office but I think we are all excited about gaining some normalcy. Best of all our customers now have the option of a home visit and staff have been over-the-moon happy about being able to do these again!
- We had 165 responses from our Three-Year Plan survey. No surprise, many people expressed concerns about their future needs for help with rides to medical appointments, inside chores, and home repairs and upkeep. Ninety-two percent of respondents were age 60 or better and nearly 14% were over the age of 90. We had a nice mix of responses from people who live in town and those who live in the country. The responses also were consistent with our population distribution by zip code. The first draft of our three-year plan is due mid-July so we are working on incorporating the survey results into our goals.
- At this time, we don't know what, if anything, the State Biennial Budget will include for ADRC's. We do know that the ADRC is receiving some funds through American Rescue Plan Act. However, these funds are **very targeted** in their use and cannot be used to fund the activities that were included in the county resolution approved earlier this year.

Children, Youth & Families Division

- **Child Protective Services** is continuing to be busy with new assessments and cases transferring to Ongoing Services. The Department has seen an increase in sexual abuse cases within the last few months. The Department will be recruiting to fill a Social Work position due to a soon to be vacant position in Initial Assessment.
- **Birth-to-Three** has been very busy; they have several referrals, several children and families with significant needs, and they are also processing Child Abuse Prevention and Treatment Act (CAPTA) referrals. Birth-to-Three continues to collaborate with Eau Claire County Birth-to-Three on the Social/Emotional Grant.

Youth Justice

- Interstate Compact for Juveniles (ICJ) which governs and monitors adjudicated juveniles across state lines, has adopted a national data platform called UNITY, which all staff are training in virtually when time allows.
- Continued influx of truancy referrals through the end of the school year are being processed. There are two major concerns as we head into the fall semester; first, the transition "back to normal" full time in person school, and second, student lack of academic achievement during the pandemic. Both of these issues have a real potential for disengagement in school, resulting in increased truancy this coming school year.
- As we await the state to make decisions regarding the budget and the impact on our caseload, we have researched numbers, examined practices, and are exploring potential initiatives.

Attachment: 5.4a DHS Director Report 06-17-21 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

- At the last regional supervisors meeting, a request was made for state administrators of DCF and DHS to join one of our future meetings to discuss the ongoing prevalence of counties being forced to look out of state for placement resources to meet the needs of our youth.
- Manda and Dianna have started another session of Aggression Replacement Training (ART), this time focusing on male youth.
- We are preparing for Kaitie's impending FMLA in August, planning for case coverage, etc.

Economic Support Division

COVID policy waivers remain in effect for all Income Maintenance programs. The attached are the most recent projected timelines for waiver expiration

Fiscal & Contracts

- DHS Fiscal has been hard at work getting our County Auditors everything they need to complete their audit. We also are making changes in our systems to allow greater ease during our Reconciliation process which is coming up in the next month. That will be a big process that everybody will be involved in as well to help get out the door.
- We also have been working on getting our Electronic Health Record importing at a sustainable level, with our two new staff assisting with that.
- We are busy with our day-to-day tasks of contracting and accounts payable as well, but with our additional staff members on board, we have been using their time and talents to keep us in a great spot!

Recovery & Wellness Consortium (RWC) Division

- RWC participated in Harm Reduction training approach to addressing the treatment needs of people who chose to engage in illicit drug use. Objectives to the seminar include understanding why someone chooses to use drugs, barriers to treatment, use of motivational interview to create opportunities for change in patterns of use. Focus on engagement and developing alliance with the individual. Become an advocate for the person using drugs to reduce stigma, promoting inclusion into our communities.

Attachment: 5.4a DHS Director Report 06-17-21 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

3. 2021 Monthly Fiscal Information

Through Month of: May 2021

2021 Prorated Budget (total is $23,021,372):	$9,592,238
Expenses paid through May:	8,002,068
Variance to Budget:	$1,590,170

2021 Kinship Placement with a Relative

Month	Kinship	Projected Cost	2021 Budget	Over/(Under)
January	86	$263,100	$331,350	($68,250)
February	104	$299,892	$331,350	($31,458)
March	103	$304,315	$331,350	(27,035)
April	104	$305,199	$331,350	(26,161)
May	105	$324,085	$331,350	($7,265)

2021 Children and Youth in Out-of-Home Placement

Month	Out of Home*	Out of Home**	Projected Cost*	2021 Budget	Over/(Under)
January	81	36	$2,729,256	$1,379,760	$1,349,496
February	84	39	$2,879,963	$1,379,760	$1,500,203
March	76	36	$2,649,114	$1,379,760	$1,269,354
April	72	37	$2,399,243	$1,379,760	$1,019,483
May	82	31	$2,301.282	$1,379,760	$951,522

* Children and Youth in Placement: Foster Care, Treatment Foster Care, Group Home, Residential Care
**Additional children placed with relatives (unpaid)

2021 Adult Mental Health and AODA Out-of-Home Placements:

Month	Out of Home	Projected Cost	2021 Budget	Over/(Under)
January	14	$574,611	$637,987	($63,376)
February	18	$520,066	$637,987	($117,921)
March	14	$445,742	$637,987	(192,245)
April	20	$534.146	$637,987	($103,841)
May	16	$478,410	$637,987	($159,577)

Attachment: 5.4a DHS Director Report 06-17-21 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

Estimated End Dates for Temporary COVID-19-Related Policies
(based on a Federal Public Health Emergency end date of 12/31/2021)
Updated May 25, 2021

Program	Policy	Description	End date
Health care	Continuous health care coverage	Coverage will be maintained for all BadgerCare Plus and Medicaid members enrolled on or after 3/18/20, except in cases of death, moving out of state, and voluntary disenrollment.	1/1/22 or later
Health care	Suspension of premiums	MAPP members and BadgerCare Plus members do not owe premiums.	1/1/22 or later
Health care	MAPP work requirement exemption	MAPP members are exempt from MAPP work requirements.	1/1/22 or later
Health care	Treatment needs question not required	Answering the treatment needs question is not an eligibility requirement for childless adults.	1/1/22 or later
Health care	Expansion of Presumptive Eligibility	People who qualify for Medicaid for the Elderly, Blind or Disabled can be temporarily enrolled using the Presumptive Eligibility process.	1/1/22 or later
Health care	Postponement of health care renewals	Members are not required to complete health care renewals to maintain eligibility.	1/1/22 or later
Health care and FoodShare	"Best available" information as verification	Information reported by applicants and members is the best information available. In most cases, it is considered verified without further verification.	1/1/22 or later
FoodShare	15% increase to maximum allotments	Maximum FoodShare benefits have been increased by 15%.	9/30/21
FoodShare	Issuance of emergency allotments (EA)	All households receive a minimum $95 EA issuance for each month EA is authorized. The EA is the larger of $95 or the difference between the household's normal allotment and the maximum allotment for their household size.	This is being approved on a month-to-month basis, and is expected to end the month following the end of the state's public health emergency.
FoodShare	Waived interview requirements	FoodShare interviews are not required at initial application or renewal.	10/1/21 or later
FoodShare	Changes to eligibility for students	Students enrolled at least half time in an institution of higher learning can qualify for FoodShare under two new exemptions.	2/1/22 or later
FoodShare	Suspension of drug testing for drug felons	Applicants and members convicted of a drug felony do not have to submit to and pass a drug test to be eligible.	1/1/22 or later
FoodShare	Suspension of work registration sanctions	Members and applicants unable to meet the work registration requirements will not be sanctioned.	1/1/22 or later
FoodShare	Postponement of renewals	Most FoodShare renewals have been postponed 12 months from their 2020 renewal dates.	Some FS renewals are due starting 4/30/21
FoodShare	No six-month reporting requirements	Requirements to complete Six-Month Report Forms (SMRFs) have been waived.	SMRFs are due starting 7/1/2021

Attachment: 5.4b ES COVID Policy End Dates Summary June 2021 (6414 : Human Services Director's Program and Financial Report - Tim

Department of Human Services – Consumer/Caseload Data

Child Protective Services (CPS) Screened-in CPS Reports Yearly Comparison

Year	Screened in CPS Reports 01-01-21 to 05-31-21	Number of IA Workers	Projected End of Year based on 01-01-21 to 05-31-21	Actual End of Year
2021	110	4	264	N/A
2020	128	4	307	261
2019	129	4	310	272
2018	120	4	288	250
2017	79	3	190	186

WCHSA Caseload Recommendations

Initial Assessments: 11 cases per worker with no more than 6 new assessments per worker per month
Ongoing: 10 cases per worker with no more than 15 children per worker

Current CPS Family Caseloads (06-09-21)

Caseload Type	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1 FTE	1FTE	1 FTE	1 FTE	1 FTE
Initial Assessment	20	10	11	14						
Ongoing					18	14	15	11	11	12

Total Families/Cases Open: Initial Assessment = 55; Ongoing = 81; equals 136 Total

Out-of-Home Placement Yearly Comparison

Total Children/Youth Served January 1 to Current Date of Each Year (includes Kinship)

2021	2020	2019	2018	2017	2016	2015
158	140	164	178	148	83	51

Children/Youth Opened in CCS and/or CLTS (06-09-21)

Children/Youth Opened	8
Children Waiting to be Screened to Determine Eligibility	18

Current IMD Expenditures - Estimate

Children/Youth – IMD	$ 89,282
Adults – IMD	$ 223,625
Projected IMD Amount (Q1 $299,419) X 5	$ 938,901
IMD Budget	$ 301,392
Overage if we continue at this rate	$ 637,509

Yearly Comparison Crisis: January – March

	Adults	Children
2021	168	60
2020	217	76
2019	220	55
2018	189	45
2017	169	43

Yearly Comparison Youth Justice Referrals

Year	Jan-March	End of Year
2021	59	236 (Projected)
2020	98	243
2019	90	362
2018	123	351
2017	116	405

Attachment: 5.4c DHS Consumer-Caseload Data June 2021 (6414 : Human Services Director's Program and Financial Report - Tim Easker)

STATEMENT OF EXPLANATION
PUBLIC HEALTH DIRECTOR'S PROGRAM AND FINANCIAL REPORT – ANGIE WEIDEMAN

Angie Weideman, Public Health Director, provides a department program and financial report.

Chippewa County Health and Human Services Board

Department of Public Health
Angie Weideman's Director's Report

June 2021

COVID-19 Updates

The Public Health Director will give an update of disease numbers reported from the world level down to the Chippewa County level at the meeting. Attached is the Chippewa County COVID-19 case updates for Tuesday, June 8.

Friend of Public Health

The Friend of Public Health Award is to honor and recognize a person or agency who has exemplified and modeled public health values in the community and has supported and encouraged others to be supportive of public health. The Public Health Department usually makes one Friend of Public Health award in the spring of the year for the previous year. The Pandemic of 2020 created many stresses and hardships and it also allowed for amazing community partnerships to build and grow. This year the Chippewa County Department of Public Health Leadership Team and the Professional Advisory Committee decided to award numerous friends of Public Health related to the vision of the department, which is "The Healthiest County to Live, Learn, Work, and Play." We will be awarding friends of Public Health from March to June 2021.

- The Healthiest County To Live - Awarded to the Chippewa County Sheriff and Chief Deputy, Local Municipality Police Chiefs, Chippewa County Jail Captain, and Chippewa Falls Fire and Emergency Services Department Chief (Honored in March).
- The Healthiest County to Learn - Awarded to School Superintendents (Honored in April).
- The Healthiest County To Work - Awarded to Kwik Trip and Nursing Homes in Chippewa County (Honored in May).
- The Healthiest County to Play - Awarded to Chris Vetter from the Leader Telegram and Mayor Greg Hoffman from the City of Chippewa Falls (Honored in June).

June Awardees Supporting the Healthiest County to Play

Mayor Gregg Hoffman on behalf of the City of Chippewa Falls
Chris Vetter, Leader-Telegram, Chippewa News Bureau

Administration Division

As summer is approaching the Admin Team has geared up and started doing Beach Water testing. This year we are going to be testing the water weekly at 11 beaches. In May, we sent out the FSRL license renewals to all facilities and we have already seen a lot of payments coming in.

We sent reminder letters to individuals in Chippewa County who have not completed their second dose in a two-dose vaccination series. With mailing these letters, we have seen an increase in phone calls and have been able to update data in the Wisconsin Immunization Registry.

Attachment: June 2021 Angie Board Report (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

We are continuing to see a lot of activity with our loan closet; a lot of equipment is going out and being returned. We have also recently mailed letters to individuals with overdue equipment rentals. We should see an increase in returns in the next few weeks.

The Public Health Department has resumed regular immunization clinics. Our admins provide support at these clinics. We also continue to offer assistance in scheduling vaccination appointments, providing support at the COVID vaccination clinics, car seat questions, Breastfeeding Peer Counseling, Fit Testing as requested, and general Public Health questions.

Community Health Division

As the number of individuals seeking COVID-19 vaccination begins to decrease, our team is having to become more creative! In the past two weeks, we have done three pop-up clinics at locations off site. These locations included food pantries and a business in Bloomer. We will continue with pop-up clinics and our regularly schedule clinics at the health department as long as we have interest. Clinics at the health department are by appointment and walk-ins are welcomed. Public health has made requests for the National Guard to do on-site vaccinations at Country Fest, Rock Fest, and the Northern Wisconsin State Fair. We are waiting to see if these sites will be approved.

We also are working to ensure that those who received the first dose of Pfizer or Moderna are aware that they need a second dose. Letters were sent out to those that were over 42 days past the due date for their second dose. This mailing has helped us discover many individuals that did not have accurate records in the Wisconsin Immunization Registry. In most circumstances, the vaccinations were not entered or individuals received a dose out of state that was not entered into the system.

Work in other program areas is ramping up and we are transitioning team members back into old roles while still continuing with disease investigation and contact tracing.

Communicable Disease

The Health Officer is required by Wisconsin State Statute 252.05 to report information on current communicable disease reporting and follow-up to the Health and Human Services Board. In May, we received 1,117 new reports: 167 confirmed (143 Coronavirus, 7 Chlamydia, 7 Gonorrhea, and 3 Hepatitis C); 6 probable (2 Coronavirus, 3 E-Coli, and 1 Coronavirus Reinfection Investigation); and 904 that did not meet the definition of a case (881 Coronavirus, 4 Hepatitis C, and 8 Pertussis). See the attached report for further breakdown by disease type.

Environmental Health Division

In May, Sam and Kyle's Covid-19 related duties had mostly diminished allowing them to focus on routine inspections of licensed facilities. Together they conducted 64 inspections in May. Of these inspections, nine were pre-inspections of new facilities or facilities changing ownership. New licenses issued this month include: Bloomer Pub & Café changed ownership, Max's in New Auburn changed ownership, Sandbar added a mobile food pontoon to sell food and ice cream on Lake Wissota, 2 new tourist rooming houses, an on-the-farm meat freezer, a new mobile food truck and base facility, and a Herbalife nutrition location in New Auburn.

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Nutrition

Do you know the Public Health Department helps guide and implement the County Employee Wellness Program? Our Public Health Nutritionist Stephanie Abbe plays a key role in the program. Here is information for a wellness event happening in June. Employees and the public are welcome.

Red Cross Blood Drive

Our next blood drive is scheduled for Wednesday, June 30 from 10:00 AM to 4:00 PM in the Courthouse Lower Level Rooms 001/003. To schedule an appointment, please contact Stephanie Abbe by email at sabbe@co.chippewa.wi.us or by phone at (715) 726-7870 and she can assist you in scheduling.

At this time, the American Red Cross is still providing free COVID-19 Antibody Testing for those that successfully complete their blood donation. For more details on this, please go to https://www.redcrossblood.org/donate-blood/dlp/covid-19-antibody-testing.html

WIC Program Update

Staff have now begun implementation of the America Rescue Plan Act provision to provide WIC-enrolled women and children with increased fruit and vegetable cash value in the WIC food benefit package. Each woman and child will receive $35/month for four months this summer to purchase fresh, canned or frozen fruits and vegetables at WIC-authorized grocery stores. Some households could receive $105 in fruits and vegetables each of those month. Stephanie Abbe, RD, CD, developed a nutrition education tool to help families consider the many options to choose from in buying fresh and stocking freezers and pantries before the fall and winter months. The tool was shared with other WIC Programs across the Western Region and will be widely used. Kudos to Stephanie! To see the publication visit https://www.co.chippewa.wi.us/home/showpublisheddocument/31175/637581532994900000

WIC Program income guidelines increase annually on July 1 and will be posted for the public at https://www.dhs.wisconsin.gov/wic/income-guidelines.htm . Most pregnant and breastfeeding women, infants, and children who receive Medicaid health coverage are automatically considered adjunctively income eligible for WIC Program participation. New or returning families are welcome to apply this summer by calling 715-726-7903 or completing a quick pre-application online at www.co.chippewa.wi.us/wic . Referrals from our community partners are encouraged.

Diabetes Prevention Grant

Public Health will participate in a community-wide social media health promotion this summer as one deliverable in a diabetes prevention grant. Obesity and chronic disease management were identified as concerns in the Community Health Assessment completed by Chippewa, Dunn, and Eau Claire Counties. The local health coalitions from all three counties came together to implement the *Summer Activity Passport* to encourage families be physically active this summer. The Passport can be found at https://www.visiteauclaire.com/plan/social-media/giveaways/

Western Regional Center (WRC)

The Western Regional Center is working on a number of special projects with various partners. We are working with ABC for Health, one of our network partners, on a project through an Otto Bremer grant which they received to specifically help families who live in the western region. Thus far we have already been able to obtain costly medical equipment for a child with Type 1 diabetes, private duty nursing services for a child with complex medical needs who had previously received an insurance denial, and several other wins due to the increased involvement of ABC for Health's attorneys to assist us in

Attachment: June 2021 Angie Board Report (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

advocating for families from a legal perspective. We have several primary goals, one being development of a marketing tool to assist pharmacists with coding/billing issues to facilitate families receiving medically necessary services, supplies and equipment as outlined in Health Check services.

Dawn is working with a group in Barron County who have received a Wisconsin Integrated Planning Project (WITPP) grant to formalize a better process to assist transitioning teens and their families in the areas of health (WRC), education (school district) and employment (Division of Vocational Rehabilitation). This project will continue through August of 2021.

Harrison presented a Care Mapping Training in May for families at the Circles of Life Conference. The session was well-attended and received much positive feedback from families. Dawn attended the evening family listening session to explore how families are doing and what could be improved.

WRC met with the Western Region's Birth-To-Three representatives in May to provide updates and to encourage Birth-To-Three staff to refer families to WRC, especially when children age out of their program and still have special needs in order for less families to fall through the cracks between early childhood and adolescence.

WRC taped two presentations on youth health transitions, one for La Crosse County and one for Douglas County, to be used in conjunction with other transition-related presentations in these counties and to be more accessible to families who have been unable to attend any of the sessions previously offered earlier this year.

Anita has been catching up on functional screens and has resumed completing some of the referrals for Children's Waiver and Comprehensive Community Services programs. She continues to assist with some of the immunization clinics as needed. Anita will remain full-time for the rest of 2021 and will return to part-time in 2022.

Years of Service

CONGRATULATIONS to the following staff for their hard work and dedication to providing great customer service to the citizens of Chippewa County.

- Rachel Potaczek, Public Health Nurse – 7 years
- Dawn Stark, Western Regional Center Manager – 9 years

Attachment: June 2021 Angie Board Report (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

COVID-19 Case Updates

Data as of Tuesday, June 8

CHIPPEWA COUNTY Public Health
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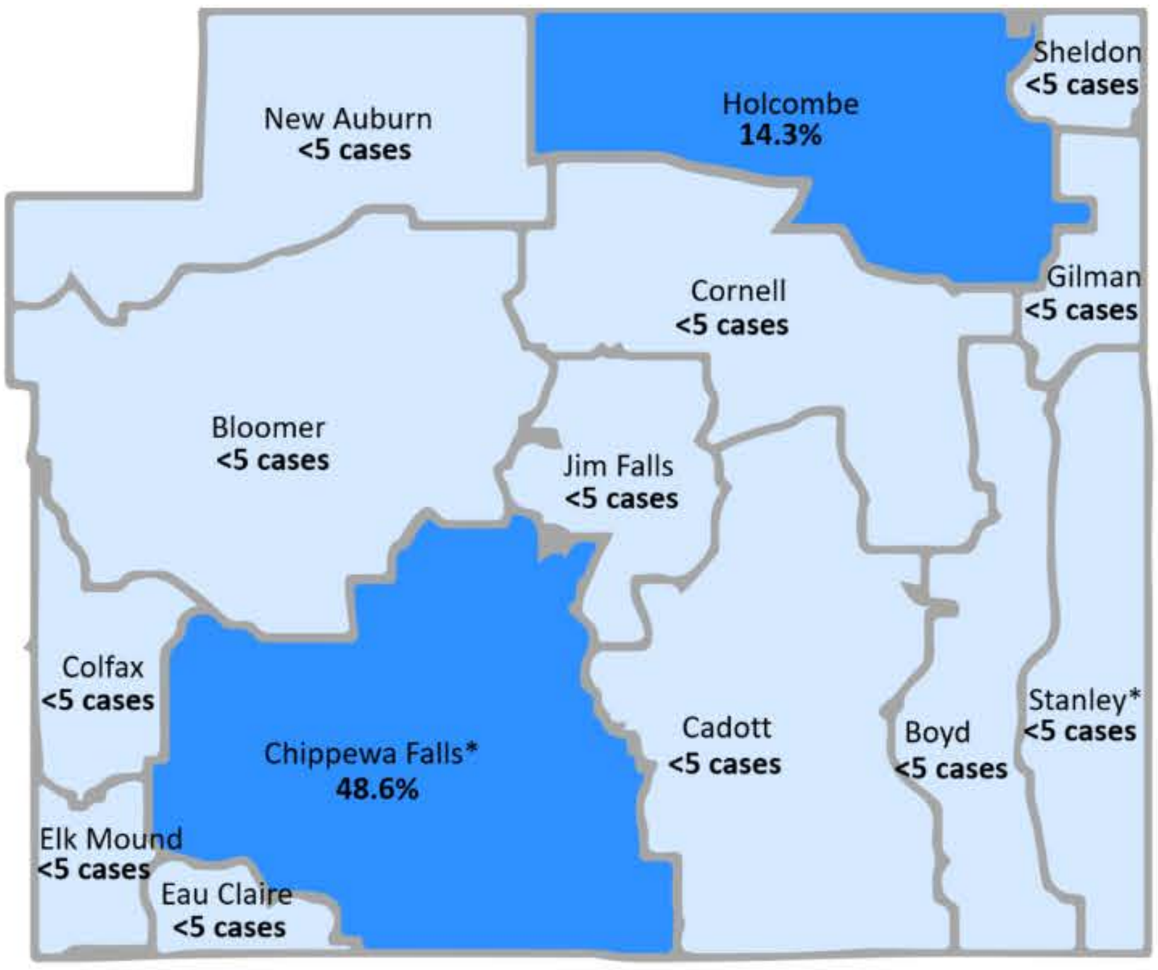
CASE OVERVIEW

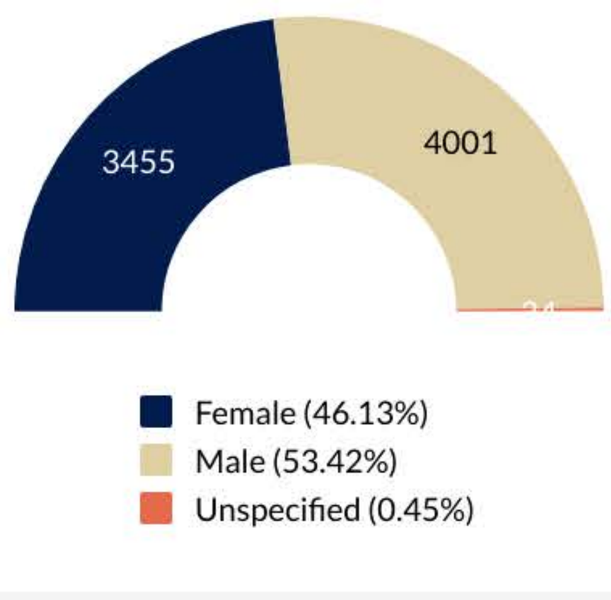
TOTAL POSITIVE CASES	CHANGE SINCE LAST WEEK	ACTIVE CASES	CURRENTLY HOSPITALIZED	DEATHS
7490	+17	35	3	94

WHERE ARE THE POSITIVE CASES LIVING, BY PERCENTAGE?

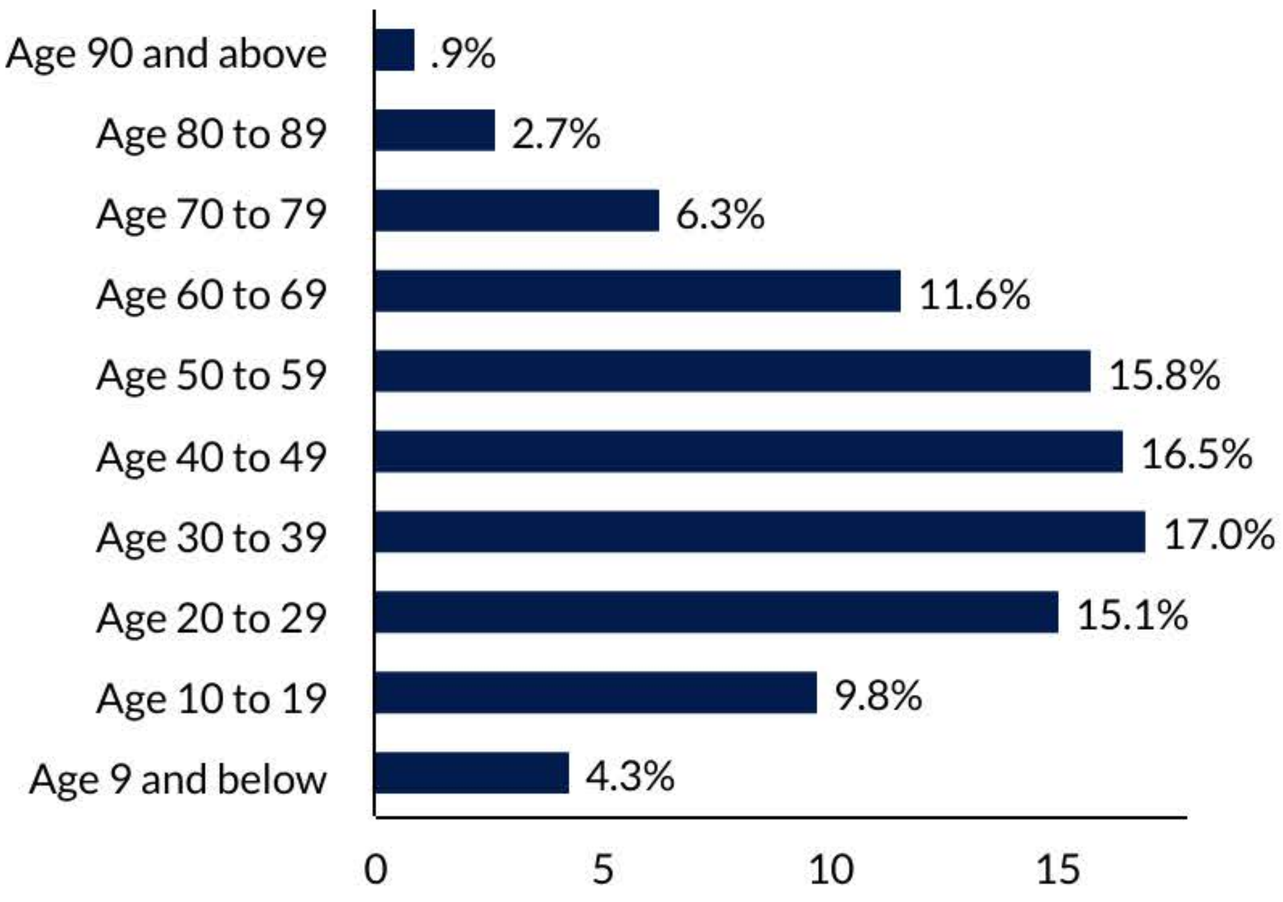


Places with < 5 cases are not reported, due to privacy reasons.
Eau Claire cases are only those in the Northern portion that sits in Chippewa County.
*Includes Department of Correction Facility

CONFIRMED CASES BY SEX



WHAT ARE THE AGES OF THE POSITIVE CASES, BY PERCENT?



CURRENT RISK LEVEL AND GUIDANCE

HIGH RISK

Gathering Recommendations:
- Indoor Gathering: 30 or less
- Outdoor Gathering: 100 or less
- Using Physical Distancing Measures

Wear a mask. Stay home when you're sick.

Disease Occurrence

Healthcare Availability

Public Health Response

View the Summary Data Document for June 8st on our website.

Attachment: 5.5b PH COVID Case Updates June 8 (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

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Wisconsin Department of Health Services
Division of Public Health
PHAVR - WEDSS

County Board of Health Report

Jurisdiction: Chippewa County

Received Date: 5/1/2021 to 5/31/2021

Disease	Confirmed	Probable	Suspect	Not A Case	Total
CORONAVIRUS, NOVEL 2019 (COVID-19)	143	2	15	881	1041
LYME LABORATORY REPORT	0	0	13	0	13
CHLAMYDIA TRACHOMATIS INFECTION	7	0	0	1	8
PERTUSSIS (WHOOPING COUGH)	0	0	0	8	8
GONORRHEA	7	0	0	0	7
HEPATITIS C, CHRONIC	3	0	0	4	7
ANAPLASMOSIS, A. phagocytophilum	1	0	1	1	3
CORONAVIRUS, NOVEL 2019 (COVID-19) REINFECTION INVESTIGATION	0	1	2	0	3
E-COLI, SHIGA TOXIN-PRODUCING (STEC)	0	3	0	0	3
HEPATITIS B, CHRONIC	0	0	3	0	3
STREPTOCOCCAL DISEASE, INVASIVE, GROUP B	1	0	1	1	3
CAMPYLOBACTERIOSIS	1	0	0	1	2
MYCOBACTERIAL DISEASE (NON-TUBERCULOUS)	2	0	0	0	2
SYPHILIS REACTOR	0	0	2	0	2
VARICELLA (CHICKENPOX)	0	0	1	1	2
BRUCELLOSIS	0	0	1	0	1
CRYPTOSPORIDIOSIS	1	0	0	0	1
INFLUENZA-ASSOCIATED HOSPITALIZATION	0	0	0	1	1
LYME DISEASE (B.BURGDORFERI)	1	0	0	0	1

Executed: 6/1/2021 2:17:21 PM

Attachment: May CD Report (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

Disease	Confirmed	Probable	Suspect	Not A Case	Total
MEASLES (RUBEOLA)	0	0	0	1	1
METHICILLIN- or OXICILLIN RESISTANT S. AUREUS (MRSA/ORSA)	0	0	0	1	1
RUBELLA	0	0	0	1	1
SALMONELLOSIS	0	0	0	1	1
SHIGELLOSIS	0	0	0	1	1
UNKNOWN DISEASE	0	0	1	0	1
Total	167	6	40	904	1117

Default Filters: 'State' EQUAL TO 'WI'

Attachment: May CD Report (6406 : Public Health Director's Program and Financial Report – Angie Weideman)

Public Health (Pre-Audited) Financial Results: May 2021

CHIPPEWA COUNTY Public Health
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		Revenue			Expense		
Fund	Description	Budget	Actual	% Collected	Budget	Actual	% Spent
54100	Community Health	$ (692,608.00)	$ (653,565.24)	94.4%	$ 692,608.00	$ 67,711.53	9.8%
54121	Nurse Family Partnership	(129,736.00)	(42,729.70)	32.9%	129,736.00	31,569.47	24.3%
54123	Farmers Market	(2,689.00)	(115.85)	4.3%	2,689.00	115.85	4.3%
54125	Prenatal Care Coordination	(70,713.00)	(3,316.58)	4.7%	70,713.00	6,114.49	8.6%
54128	Public Health Preparedness	(50,282.00)	(50,971.30)	101.4%	50,282.00	64,831.36	128.9%
54132	Drug Free Community Grant	(136,319.00)	(18,504.85)	0.0%	136,319.00	41,167.57	0.0%
54135	Bright Start River Source	(10,854.00)	(5,470.80)	50.4%	10,854.00	2,564.04	23.6%
54140	WIC	(424,079.00)	(120,247.75)	28.4%	424,079.00	134,792.80	31.8%
54142	Maternal & Child Health Program	(28,426.00)	(1,352.95)	4.8%	28,426.00	5,439.33	19.1%
54144	Wisconsin Wins	(5,172.00)	(485.55)	9.4%	5,172.00	1,275.68	24.7%
54149	Pre-Venture	(20,844.00)	(533.05)	2.6%	20,844.00	4,120.31	19.8%
54150	Prevention	(10,795.00)	(383.30)	3.6%	10,795.00	1,843.02	17.1%
54151	Equipment Loan Closet	(1,864.00)	(183.20)	0.0%	1,864.00	457.12	0.0%
54152	Western Regional Center	(194,827.00)	(36,527.25)	18.7%	194,827.00	70,261.37	36.1%
54154	Title X Reproductive Health	(15,085.00)	(4,632.05)	0.0%	15,085.00	13,977.48	0.0%
54156	FIT WIC	(37,789.00)	(5,586.18)	14.8%	37,789.00	13,016.02	34.4%
54157	Reproductive Health	(57,695.00)	(6,453.77)	11.2%	57,695.00	5,154.61	8.9%
54158	WIC BF Peer Counseling	(11,832.00)	(365.85)	3.1%	11,832.00	5,128.29	43.3%
54159	Diabetes Grant	(20,000.00)	(1,397.00)	0.0%	20,000.00	3,425.27	0.0%
54160	Home Health Care	(1,850.00)	1,336.51	-72.2%	1,850.00	3,035.24	164.1%
54161	Health Clinics	(35,673.00)	(1,043.33)	2.9%	35,673.00	8,035.80	22.5%
54162	Taking Care of You	(11,621.00)	(309.30)	2.7%	11,621.00	309.30	2.7%
54163	Overdose Fatality Review	(32,431.00)	(2,577.61)	0.0%	32,431.00	7,868.14	0.0%
54164	COVID Contact Tracing	-	(167,692.00)	0.0%	-	419,151.75	0.0%
54165	GYT - Get Yourself Tested	(5,159.00)	(53.70)	1.0%	5,159.00	53.70	1.0%
54171	Food Safety Recreation License	(292,081.00)	(111,936.85)	38.3%	292,081.00	66,112.14	22.6%
54172	Infant Immunization Grant	(15,905.00)	(539.45)	3.4%	15,905.00	889.56	5.6%
54173	Early Hearing Detection & Prev	(93,984.00)	(3,376.45)	3.6%	93,984.00	33,089.40	35.2%
54174	Forward Health Outreach	(22,639.00)	(3,646.01)	16.1%	22,639.00	7,804.43	34.5%
54176	Environmental Health	-	(209.07)	0.0%	-	820.04	0.0%
54180	DHS Agreement	(113,885.00)	(16,057.34)	14.1%	113,885.00	23,816.97	20.9%
54182	HCET (Health Care, Ed & Tr)	(7,927.00)	(144.45)	1.8%	7,927.00	144.45	1.8%
54184	Childhood Lead Poisoning Prev.	(10,072.00)	(1,312.80)	13.0%	10,072.00	1,636.60	16.2%
54186	Charity Outreach Program	(500.00)	-	0.0%	500.00	-	0.0%
54188	COVID Health Equity	-	-	0.0%	-	7,140.47	0.0%
54189	Epidemiology & Lab Capacity	-	(6,765.05)	0.0%	-	11,722.39	0.0%
54190	Public Health Donation Expendi	(1,000.00)	(9.00)	0.9%	1,000.00	-	0.0%
		$ 2,566,336.00	**$ 1,267,158.12**	**49.4%**	**$ 2,566,336.00**	**$ 1,067,903.08**	**41.6%**

Attachment: 05-21 PH Financial Reports (6406 : Public Health Director's Program and

Public Health Revenues vs Expenses Variance YTD through May 2021

CHIPPEWA COUNTY
Public Health
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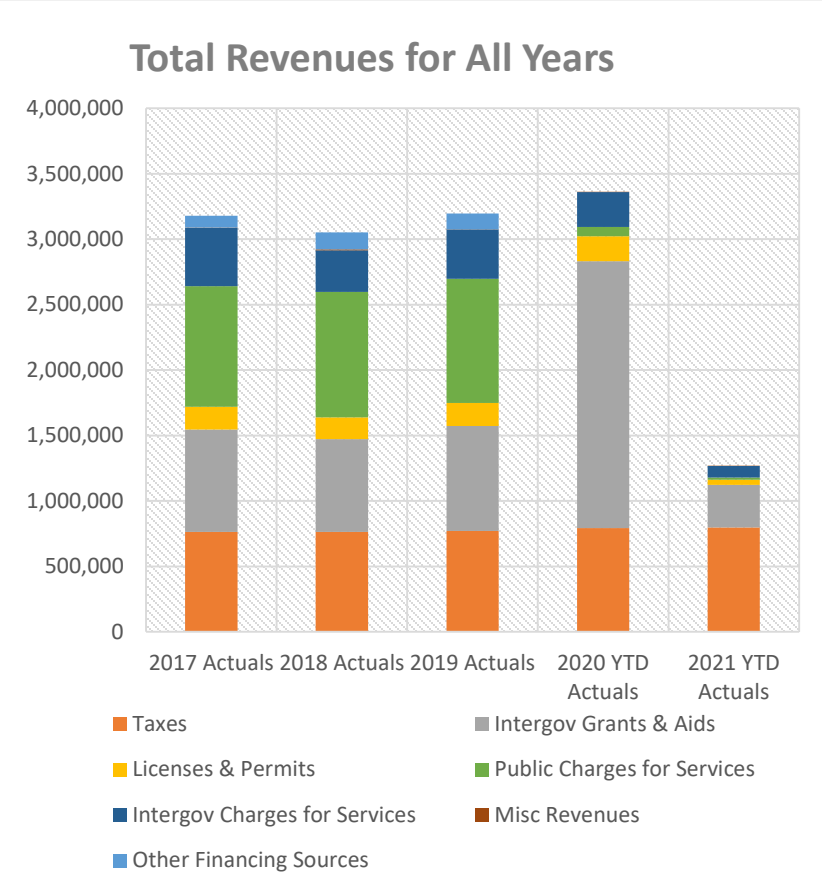

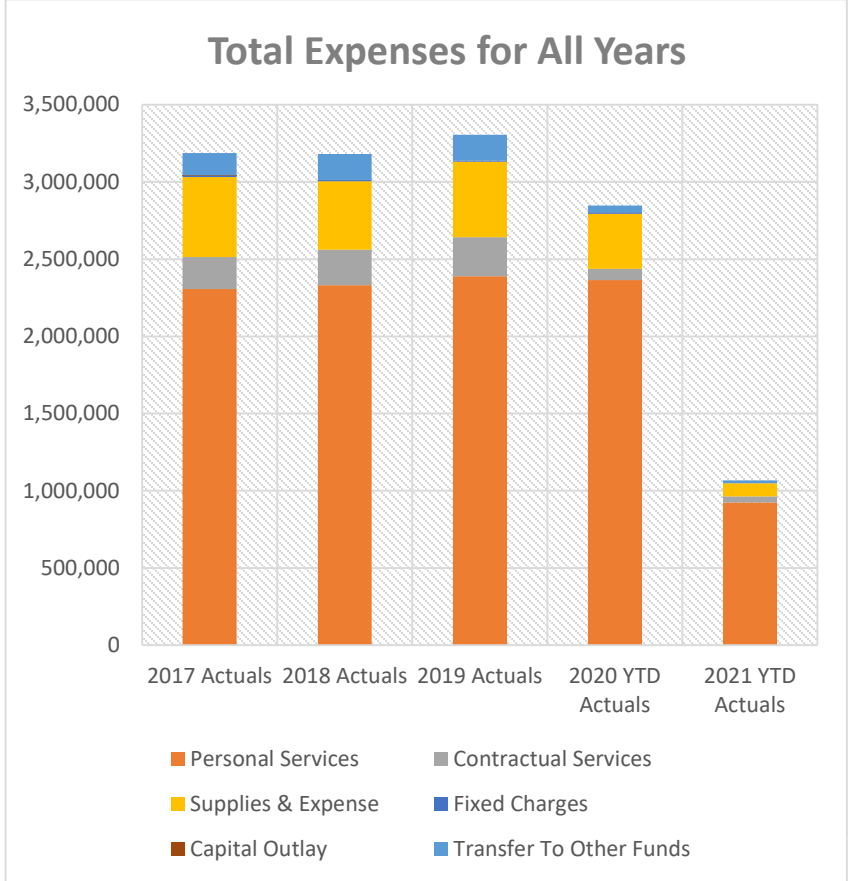

Attachment: 05-21 PH Financial Reports (6406 : Public Health Director's Program and

STATEMENT OF EXPLANATION
PUBLIC HEALTH 2022 FINANCIAL USER FEES - ANGIE WEIDEMAN/SARAH MCQUILLAN

The Public Health Director Angie Weideman and Public Health Fiscal Manager Sarah McQuillan will review the changes to the Public Health's 2022 Consumer Fees. The attached spreadsheet shows the changes reflected in red between 2021 and 2022.

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
COMMUNITY HEALTH				
	Mantou/TB (Chippewa Cty Resident)	$30.00	$30.00	$30.00
	Mantou/TB (NON Resident)	$30.00	$30.00	$30.00
	Influenza Vaccine	$40.00	$45.00 effective 9/1/20 for flu season	$45.00 effective 9/1/20 for flu season
	Hepatitis B (other county depts)	Actual Cost of Vaccine	Actual Cost of Vaccine	Actual Cost of Vaccine
	Hepatitis B (non county/gov't)	Actual Cost of Vaccine + $25.00 (staff time/supplies)	Actual Cost of Vaccine + $25.00 (staff time/supplies)	Actual Cost of Vaccine + $25.00 (staff time/supplies)
	Used sharps disposal & sharps container	$10.00 disposal fee, will also receive new container	$5 disposal fee per container $5 for new sharps container $10 for sharps container and disposal fee	$5 disposal fee per container $5 for new sharps container $10 for sharps container and disposal fee
Medicaid Services (Health Check, Targeted Case Management, Direct TB Services, and Prenatal Care Coordination)	**Health Check**			
	Immunization Administration	$25.00	$25.00	$25.00
	Mantoux/TB	$30.00	$30.00	$30.00
	Lab Handling Fee	$14.00	$14.00	$14.00
	Lead Inspection initial	$800.00 per Medicaid billing	$800.00 per Medicaid billing	$800.00 per Medicaid billing
	Lead Inspection, Follow up	$300 per Medicaid billing	$300 per Medicaid billing	$300 per Medicaid billing
	Educational Visit After Lead Inspection	$25.00/15 mins Nurse Education per Medicaid billing	$25.00/15 mins Nurse Education per Medicaid billing	$25.00/15 mins Nurse Education per Medicaid billing
	Targeted Case Management			
	Targeted Case Management	$65.00/hour	$65.00/hour	$65.00/hour
	Direct TB Services	$65.00/hr	$65.00/hr	$65.00/hr
	Prenatal Care Coordination			
	Risk Assessment	$96.00	$96.00	$96.00
	Initial Care Plan Development	$96.00	$96.00	$96.00
	Home Visit	$65.00/visit	$65.00/visit	$65.00/visit
	Ongoing Care Coordination and Monitoring	$65.00	$65.00	$65.00
	Health Education /Nutrition Counseling - Individual	$65.00/hr	$65.00/hr	$65.00/hr
	Health Education /Nutrition Counseling - Group	$25.00/hr	$25.00/hr	$25.00/hr
ADDITIONAL CHARGES				
	Fee for Copy of Document	$0.25 per page	$0.25 per page	$0.25 per page
BRIDGES Clinic - self pay sliding fee scale				
	Federal Poverty Level	<150%	<150%	<150%
	Office Visit-New			
	~~10-15 minutes~~	N/A	N/A	~~N/A~~
	~~15-30 minutes~~ 15-29 Minutes (Straight Forward)	N/A	N/A	N/A
	~~30-40 minutes~~ 30-44 Minutes (Low)	N/A	N/A	N/A
	~~40-60 minutes~~ 45-59 Min (Moderate)	N/A	N/A	N/A
	~~70+ minutes~~	N/A	N/A	~~N/A~~
	Office Visit-Continued			
	~~5 minutes~~ 0-9 Minutes (Minimal)	N/A	N/A	N/A
	~~10 minutes~~ 10-19 Minutes (Straight Forward)	N/A	N/A	N/A
	~~15 minutes~~ 20-29 Minutes (Low)	N/A	N/A	N/A
	~~25 minutes~~ 30-39 Minutes (Moderate)	N/A	N/A	N/A
	~~40+ minutes~~	N/A	N/A	~~N/A~~
	Phone Visit Shipping	$4.00	$4.00	$4.00
	Lab Services			
	Pregnancy Test	N/A	N/A	N/A
	Urine Test (LET/NIT)	N/A	N/A	N/A
	STD Screening			
	HIV	$14.00	$14.00	$14.00
	Chlamydia (SLH)	$50.00	$50.00	$50.00
	Gonorrhea (SLH)	$50.00	$50.00	$50.00
	Shipping/Handling Lab/STD	$14.00	$14.00	$14.00
	STD Medications			

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
	Doxycycline	Market Price	Market Price	Market Price
	Ceftriaxone	Market Price	Market Price	Market Price
	Zithro (market price)	Market Price	Market Price	Market Price
	Supplies			
	Emergency Contraception	Market Price	Market Price	Market Price
	Condoms and Lube	$0.25	$0.25	$0.25
	Non-latex Condoms	$1.00	$1.00	$1.00
	Dispensing & Education Fee	$35.00	$59.00	$59.00
	Nuva Ring	Market Price	Market Price	Market Price
	Depo-Provera	Market Price	Market Price	Market Price
	Oral Contraceptives	Market Price	Market Price	Market Price
	Cycle Beads	Market Price	Market Price	Market Price
	Female Condoms	Market Price	Market Price	Market Price
	Federal Poverty Level	<200%	<200%	<200%
	Office Visit-New			
	~~10-15 minutes~~	$25.00	$25.00	~~$25.00~~
	~~15-30 minutes~~ 15-29 Minutes (Straight Forward)	$39.00	$39.00	$39.00
	~~30-40 minutes~~ 30-44 Minutes (Low)	$56.00	$56.00	$56.00
	~~40-60 minutes~~ 45-59 Min (Moderate)	$81.00	$81.00	$81.00
	~~70+ minutes~~	$ --	$ --	~~$ --~~
	Office Visit-Continued			
	~~5 minutes~~ 0-9 Minutes (Minimal)	$14.00	$14.00	$14.00
	~~10 minutes~~ 10-19 Minutes (Straight Forward)	$25.00	$25.00	$25.00
	~~15 minutes~~ 20-29 Minutes (Low)	$32.00	$32.00	$32.00
	~~25 minutes~~ 30-39 Minutes (Moderate)	$49.00	$49.00	$49.00
	~~40+ minutes~~	$ --	$ --	~~$ --~~
	Phone Visit Shipping	$4.00	$4.00	$4.00
	Lab Services			
	Pregnancy Test	$9.00	$9.00	$9.00
	Urine Test (LET/NIT)	$4.00	$4.00	$4.00
	STD Screening			
	HIV	$18.00	$18.00	$18.00
	Chlamydia (SLH)	$63.00	$63.00	$63.00
	Gonorrhea (SLH)	$63.00	$63.00	$63.00
	Shipping/Handling Lab/STD	$14.00	$14.00	$14.00
	STD Medications			
	Doxycycline	Market Price	Market Price	Market Price
	Ceftriaxone	Market Price	Market Price	Market Price
	Zithro (market price)	Market Price	Market Price	Market Price
	Supplies			
	Emergency Contraception	Market Price	Market Price	Market Price
	Condoms and Lube	$0.25	$0.25	$0.25
	Non-latex Condoms	$1.00	$1.00	$1.00
	Dispensing and Education Fee	$35.00	$82.00	$82.00
	Nuva Ring	Market Price	Market Price	Market Price
	Depo-Provera	Market Price	Market Price	Market Price
	Oral Contraceptives	Market Price	Market Price	Market Price
	Cycle Beads	Market Price	Market Price	Market Price
	Female Condoms	Market Price	Market Price	Market Price
	Federal Poverty Level	<250%	<250%	<250%
	Office Visit-New			
	~~10-15 minutes~~	$30.00	$30.00	~~$30.00~~
	~~15-30 minutes~~ 15-29 Minutes (Straight Forward)	$47.00	$47.00	$47.00
	~~30-40 minutes~~ 30-44 Minutes (Low)	$68.00	$68.00	$68.00
	~~40-60 minutes~~ 45-59 Min (Moderate)	$90.00	$90.00	$90.00
	~~70+ minutes~~	$ --	$ --	~~$ --~~
	Office Visit-Continued			
	~~5 minutes~~ 0-9 Minutes (Minimal)	$17.00	$17.00	$17.00
	~~10 minutes~~ 10-19 Minutes (Straight Forward)	$30.00	$30.00	$30.00
	~~15 minutes~~ 20-29 Minutes (Low)	$39.00	$39.00	$39

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
	~~25 minutes~~ 30-39 Minutes (Moderate)	$60.00	$60.00	$60.00
	~~40+ minutes~~	$ --	$ --	~~$ --~~
	Phone Visit Shipping	$4.00	$4.00	$4.00
	Lab Services			
	Pregnancy Test	$10.00	$10.00	$10.00
	Urine Test (LET/NIT)	$5.00	$5.00	$5.00
	STD Screening			
	HIV	$19.00	$19.00	$19.00
	Chlamydia (SLH)	$77.00	$77.00	$77.00
	Gonorrhea (SLH)	$77.00	$77.00	$77.00
	Shipping/Handling Lab/STD	$14.00	$14.00	$14.00
	STD Medications			
	Doxycycline	Market Price	Market Price	Market Price
	Ceftriaxone	Market Price	Market Price	Market Price
	Zithro (market price)	Market Price	Market Price	Market Price
	Supplies			
	Emergency Contraception	Market Price	Market Price	Market Price
	Condoms and Lube	$0.25	$0.25	$0.25
	Non-latex Condoms	$1.00	$1.00	$1.00
	Dispensing & Education Fee	$35.00	$99.00	$99.00
	Nuva Ring	Market Price	Market Price	Market Price
	Depo-Provera	Market Price	Market Price	Market Price
	Oral Contraceptives	Market Price	Market Price	Market Price
	Cycle Beads	Market Price	Market Price	Market Price
	Female Condoms	Market Price	Market Price	Market Price
	Federal Poverty Level	Usual Customary	Usual Customary	Usual Customary
	Office Visit-New			
	~~10-15 minutes~~	$35.00	$35.00	~~$35.00~~
	~~15-30 minutes~~ 15-29 Minutes (Straight Forward)	$55.00	$55.00	$55.00
	~~30-40 minutes~~ 30-44 Minutes (Low)	$80.00	$80.00	$80.00
	~~40-60 minutes~~ 45-59 Min (Moderate)	$115.00	$115.00	$115.00
	~~70+ minutes~~	$ --	$ --	~~$ --~~
	Office Visit-Continued			
	~~5 minutes~~ 0-9 Minutes (Minimal)	$20.00	$20.00	$20.00
	~~10 minutes~~ 10-19 Minutes (Straight Forward)	$35.00	$35.00	$35.00
	~~15 minutes~~ 20-29 Minutes (Low)	$45.00	$45.00	$45.00
	~~25 minutes~~ 30-39 Minutes (Moderate)	$70.00	$70.00	$70.00
	~~40+ minutes~~	$ --	$ --	~~$ --~~
	Phone Visit Shipping	$4.00	$4.00	$4.00
	Lab Services			
	Pregnancy Test	$11.00	$11.00	$11.00
	Urine Test (LET/NIT)	$6.00	$6.00	$6.00
	STD Screening			
	HIV	$19.00	$19.00	$19.00
	Chlamydia (SLH)	$90.00	$90.00	$90.00
	Gonorrhea (SLH)	$90.00	$90.00	$90.00
	Shipping/Handling Lab/STD	$14.00	$14.00	$14.00
	STD Medications			
	Doxycycline	Market Price	Market Price	Market Price
	Ceftriaxone	Market Price	Market Price	Market Price
	Zithro (market price)	Market Price	Market Price	Market Price
	Supplies			
	Emergency Contraception	Market Price	Market Price	Market Price
	Condoms and Lube	$0.25	$0.25	$0.25
	Non-latex Condoms	$1.00	$1.00	$1.00
	Dispensing & Education Fees	$35.00	$117.00	$117.00
	Nuva Ring	Market Price	Market Price	Market Price
	Depo-Provera	Market Price	Market Price	Market Price
	Oral Contraceptives	Market Price	Market Price	Market P

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
	Cycle Beads	Market Price	Market Price	Market Price
	Female Condoms	Market Price	Market Price	Market Price
ENVIRONMENTAL HEALTH				
	Radon Kit	$10.00	$10.00	$10.00
	HepaVac	$25.00 refundable deposit	$25.00 refundable deposit	$25.00 refundable deposit
	HepaVac Bag	$2.50	$2.50	$2.50
	Meth testing of home enviornment	$350.00	$350.00	$350.00
	Temporary Food Vendor License	If NOT licensed from State: $170.00	If NOT licensed from State: $170.00	If NOT licensed from State: $170.00
	Temporary Food Vendor License - Non TCS Food			$75.00
		Temporary food stand Inspection Fee (Licensed by State or other County): $30.00	Temporary food stand: $30.00	Temporary food stand Inspection Fee (Licensed by State or other County): $30.00
		$15.00	$15.00	Temporary Food Stand Inspection Fee - Non TCS Foods (Licensed by State or Other County): $15.00
	Mobile Retail Food - Serving Meals			
		□ Full service-Simple* $550.00 ($230 permit fee + $320 preinspection fee)	□ Full service-Simple* $550.00 ($230 permit fee + $320 preinspection fee)	□ Full service-Simple* $550.00 ($230 permit fee + $320 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $240.00 Additional Re-inspections $320.00
		□ Full service-Moderate* $800.00 ($330 Permit fee + $470 preinspection fee)	□ Full service-Moderate* $800.00 ($330 Permit fee + $470 preinspection fee)	□ Full service-Moderate* $800.00 ($330 Permit fee + $470 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $353.00 Additional Re-inspections $470.00
		□ Full service-Complex* $1310.00 ($540 Permit fee + $770 preinspection fee)	□ Full service-Complex* $1310.00 ($540 Permit fee + $770 preinspection fee)	□ Full service-Complex* $1310.00 ($540 Permit fee + $770 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $578.00 Additional Re-inspections $770.00
				□ Full service-Prepackaged* $270.00 ($105 Permit fee + $165 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $98.00 Additional Re-inspections $130.00
	Mobile Retail Foods -Serving Meals - Service Base			
		□ Mobile Service Base-Must be an enclosed building $270.00 ($105 Permit fee + $165 preinspection fee)	□ Mobile Service Base-Must be an enclosed building $270.00 ($105 Permit fee + $165 preinspection fee)	□ Mobile Service Base-Must be an enclosed building $295.00 ($150 Permit fee + $145 preinspection fee) First Re-Inspection $0.00 Second Re-Inspection $98.00 Additional Re-Inspection $130.00
		□ Mobile Service Base-Simple* $550.00 ($230 permit fee + $320 preinspection fee)	□ Mobile Service Base-Simple* $550.00 ($230 permit fee + $320 preinspection fee)	□ Mobile Service Base-Simple* $625.00 ($275 permit fee + $350 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $240.00 Additional Re-inspections $320.00
		□ Mobile Service Base-Moderate* $800.00 ($330 Permit fee + $470 preinspection fee)	□ Mobile Service Base-Moderate* $800.00 ($330 Permit fee + $470 preinspection fee)	□ Mobile Service Base-Moderate* $920.00 ($395 Permit fee + $525 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $353.00 Additional Re-inspections $470.00

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
		□ Mobile Service Base-Complex* $1310.00 ($540 Permit fee + $770 preinspection fee)	□ Mobile Service Base-Complex* $1310.00 ($540 Permit fee + $770 preinspection fee)	□ Mobile Service Base-Complex* $1445.00 ($595 Permit fee + $850 preinspection fee) First Re-Inspection $0.00 Second Re-inspection $578.00 Additional Re-inspections $770.00
	Retail Food Establishments - Not Serving Meals			
	Food sales of at least $1,000,000 or more and processes potentially hazardous foods. Complex	License Fee $950.00 Preinspection Fee $250.00	License Fee $950.00 Preinspection Fee $250.00	License Fee $950.00 Preinspection Fee $250.00 First Re-Inspection $0.00 Second/Additional Re-inspections $495.00
	Food Sales of at least $25,000 but less than $1,000,000 and processes potentially hazardous foods.Moderate	License Fee $425.00 Preinspection Fee $125.00	License Fee $425.00 Preinspection Fee $125.00	License Fee $425.00 Preinspection Fee $125.00 First Re-Inspection $0.00 Second/Additional Re-inspections $209.00
	Food Sales of at least $25,000 and is engaged in food processing, but does not process potentially hazardous foods. Simple -TCS	License Fee $325.00 Preinspection Fee $95.00	License Fee $325.00 Preinspection Fee $95.00	License Fee $325.00 Preinspection Fee $95.00 First Re-inspection $0.00 Second Re-inspection $209.00
	Food sales of less than $25,000 and is engaged in food processing. Simple Non-TCS	License Fee $75.00 Preinspection Fee $25.00	License Fee $75.00 Preinspection Fee $25.00	License Fee $75.00 Preinspection Fee $25.00 First Re-inspection $0.00 Second Re-inspection $99.00
	Does not engage in food processing Pre-Packaged	License Fee $60.00 Preinspection Fee $20.00	License Fee $60.00 Preinspection Fee $20.00	License Fee $60 Preinspection Fee $20 First Re-Inspection $0.00 Second Re-inspection $99.00
Mobile Retail Food Establishment - Not Serving Meals				
	Complex			License Fee $950.00 Preinspection Fee $250.00 First Re-Inspection $0.00 Second/Additional Re-inspections $495.00
	Moderate			License Fee $425.00 Preinspection Fee $125.00 First Re-Inspection $0.00 Second/Additional Re-inspections $209.00
	Simple TCS			License Fee $325.00 Preinspection Fee $95.00 First Re-inspection $0.00 Second Re-inspection $209.00
	Simple Non-TCS			License Fee $75.00 Preinspection Fee $25.00 First Re-inspection $0.00 Second Re-inspection $99.00
	Prepackaged			License Fee $60 Preinspection Fee $20 First Re-Inspection $0.00 Second Re-inspection $99.00
	One Micro ~~Mart~~ Market		License Fee $44.00	License Fee $44.00 First Re-inspection $0.00 Second Re-inspection $99.00
	Two or More Micro ~~Marts~~ Markets Same Building		License Fee $66.00	License Fee $66.00 First Re-inspection $0.00 Second Re-inspection $99.00
	Temporary Retail Facility (at fairs and events)	Temporary Retail License per stand = $66	Temporary Retail License per stand = $66	Temporary Retail License per stand = $75
		Existing licensed = $15 per event per stand	Existing licensed = $15 per event per stand	Existing licensed = $15 per event per stand
	FOOD SERVICE PERMIT			

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
		Prepackaged off-premise $295.00 ($150.00 Permit fee + $145.00 Preinspection fee)	Prepackaged off-premise $295.00 ($150.00 Permit fee + $145.00 Preinspection fee)	Prepackaged off-premise $295.00 ($150.00 Permit fee + $145.00 Preinspection fee) First Re-Inspection $0.00 Second Re-inspection $98.00 Additional Re-inspections $130.00
		Full-service – Simple $625.00 ($275.00 Permit fee + $350.00 Preinspection fee)	Full-service – Simple $625.00 ($275.00 Permit fee + $350.00 Preinspection fee)	Full-service – Simple $625.00 ($275.00 Permit fee + $350.00 Preinspection fee) First Re-Inspection $0.00 Second Re-inspection $240.00 Additional Re-inspections $320.00
		Full-service – Moderate $920.00 ($395.00 Permit fee + $525.00 Preinspection fee)	Full-service – Moderate $920.00 ($395.00 Permit fee + $525.00 Preinspection fee)	Full-service – Moderate $920.00 ($395.00 Permit fee + $525.00 Preinspection fee) First Re-Inspection $0.00 Second Re-inspection $353.00 Additional Re-inspections $470.00
		Full-service – Complex $1445.00 ($595.00 Permit fee + $850.00 Preinspection fee)	Full-service – Complex $1445.00 ($595.00 Permit fee + $850.00 Preinspection fee)	Full-service – Complex $1445.00 ($595.00 Permit fee + $850.00 Preinspection fee) First Re-Inspection $0.00 Second Re-inspection $578.00 Additional Re-inspections $770.00
		Additional Food Prep Area (within establishment) $250.00	Additional Food Prep Area (within establishment) $250.00	Additional Food Prep Area (within establishment) $250.00
		Temporary Food License for 3 events in Chippewa County = $170 Existing mobile food licensed vendors = $30 per event per stand	Temporary Food License for 3 events in Chippewa County = $170 Existing mobile food licensed vendors = $30 per event per stand	Temporary Food License for 3 events in Chippewa County = $170 Existing mobile food licensed vendors = $30 per event per stand
	LODGING PERMIT			
		Number of Sleeping Rooms Tourist Rooming House (1-4 rooms) (Cabin, Cottage, etc.) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee)	Number of Sleeping Rooms Tourist Rooming House (1-4 rooms) (Cabin, Cottage, etc.) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee)	Number of Sleeping Rooms Tourist Rooming House (1-4 rooms) (Cabin, Cottage, etc.) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $128.00 Additional Re-inspection $170.00
		Hotel / Motel / Resort (5-30 rooms) $750.00 ($250.00 Permit fee + $500.00 Preinspection fee)	Hotel / Motel / Resort (5-30 rooms) $750.00 ($250.00 Permit fee + $500.00 Preinspection fee)	Hotel / Motel / Resort (5-30 rooms) $750.00 ($250.00 Permit fee + $500.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $218.00 Additional Re-inspection $290.00
		Hotel / Motel / Resort (31-99 rooms) $1050.00 ($350.00 Permit fee + $700.00 Preinspection fee)	Hotel / Motel / Resort (31-99 rooms) $1050.00 ($350.00 Permit fee + $700.00 Preinspection fee)	Hotel / Motel / Resort (31-99 rooms) $1050.00 ($350.00 Permit fee + $700.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $300.00 Additional Re-inspection $400.00
		Hotel / Motel / Resort (100-199 rooms) $1300.00 ($450.00 Permit fee + $850.00 Preinspection fee)	Hotel / Motel / Resort (100-199 rooms) $1300.00 ($450.00 Permit fee + $850.00 Preinspection fee)	Hotel / Motel / Resort (100-199 rooms) $1300.00 ($450.00 Permit fee + $850.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $379.00 Additional Re-inspection $505.00

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
		Hotel / Motel / Resort (200+ rooms) $1800.00 ($550.00 Permit fee + $1250.00 Preinspection fee)	Hotel / Motel / Resort (200+ rooms) $1800.00 ($550.00 Permit fee + $1250.00 Preinspection fee)	Hotel / Motel / Resort (200+ rooms) $1800.00 ($550.00 Permit fee + $1250.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $525.00 Additional Re-inspection $700.00
		Bed & Breakfast (8 or less rooms) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee)	Bed & Breakfast (8 or less rooms) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee)	Bed & Breakfast (8 or less rooms) $450.00 ($150.00 Permit fee + $300.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $128.00 Additional Re-inspection $170.00
	CAMPGROUND PERMIT			
		Campground (1-25 sites) $625.00 ($225.00 Permit fee + $400.00 Preinspection fee)	Campground (1-25 sites) $625.00 ($225.00 Permit fee + $400.00 Preinspection fee)	Campground (1-25 sites) $625.00 ($225.00 Permit fee + $400.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $180.00 Additional Re-inspection $240.00
		Campground (26-50 sites) $890.00 ($295.00 Permit fee + $595.00 Preinspection fee)	Campground (26-50 sites) $890.00 ($295.00 Permit fee + $595.00 Preinspection fee)	Campground (26-50 sites) $890.00 ($295.00 Permit fee + $595.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $263.00 Additional Re-inspection $350.00
		Campground (51-100 sites) $1100.00 ($350.00 Permit fee + $750.00 Preinspection fee)	Campground (51-100 sites) $1100.00 ($350.00 Permit fee + $750.00 Preinspection fee)	Campground (51-100 sites) $1100.00 ($350.00 Permit fee + $750.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $319.00 Additional Re-inspection $425.00
		Campground (101-199 sites) $1275.00 ($400.00 Permit fee + $875.00 Preinspection fee)	Campground (101-199 sites) $1275.00 ($400.00 Permit fee + $875.00 Preinspection fee)	Campground (101-199 sites) $1275.00 ($400.00 Permit fee + $875.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $375.00 Additional Re-inspection $500.00
		Campground (200+ sites) $1475.00 ($475.00 Permit fee + $1000.00 Preinspection fee)	Campground (200+ sites) $1475.00 ($475.00 Permit fee + $1000.00 Preinspection fee)	Campground (200+ sites) $1475.00 ($475.00 Permit fee + $1000.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $435.00 Additional Re-inspection $580.00
	RECREATIONAL & EDUCATIONAL CAMP PERMIT			
		$1750.00 ($550.00 Permit fee + $1200 Preinspection fee)	$1750.00 ($550.00 Permit fee + $1200 Preinspection fee)	$1750.00 ($550.00 Permit fee + $1200 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $540.00 Additional Re-inspection $720.00
	SWIMMING POOL PERMIT			
		$400.00 ($225.00 Permit fee + $175.00 Preinspection fee)	$400.00 ($225.00 Permit fee + $175.00 Preinspection fee)	$400.00 ($225.00 Permit fee + $175.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $50.00 Additional Re-inspection $75.00
	WATER ATTRACTION PERMIT			
		$425.00 ($225.00 Permit fee + $200.00 Preinspection fee)	$425.00 ($225.00 Permit fee + $200.00 Preinspection fee)	$425.00 ($225.00 Permit fee + $200.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $50.00 Additional Re-inspection $125.00

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

CHIPPEWA COUNTY DEPARTMENT OF PUBLIC HEALTH FEES FOR SERVICES

RED = Change January 1, 2022

	SERVICE	2020 FEE	2021 FEE	2022 FEE
		Slides $570.00 ($295.00 Permit Fee + $275.00 Preinspection fee)	Slides $570.00 ($295.00 Permit Fee + $275.00 Preinspection fee)	Slides $570.00 ($295.00 Permit Fee + $275.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $50.00 Additional Re-inspection $75.00
		Additional Slide $390.00 ($195.00 Permit Fee + $195.00 Preinspection fee)	Additional Slide $390.00 ($195.00 Permit Fee + $195.00 Preinspection fee)	Additional Slide $390.00 ($195.00 Permit Fee + $195.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $50.00 Additional Re-inspection $75.00
	TATTOO & BODY-PIERCING PERMIT			
		Tattoo Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee)	Tattoo Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee)	Tattoo Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $135.00 Additional Re-inspection $180.00
		Body-Piercing Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee)	Body-Piercing Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee)	Body-Piercing Establishments $475.00 ($175.00 Permit fee + $300.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $135.00 Additional Re-inspection $180.00
		Combined Tattoo / Body-Piercing Establishments $675.00 ($250.00 Permit fee + $425.00 Preinspection fee)	Combined Tattoo / Body-Piercing Establishments $675.00 ($250.00 Permit fee + $425.00 Preinspection fee)	Combined Tattoo / Body-Piercing Establishments $675.00 ($250.00 Permit fee + $425.00 Preinspection fee) First Re-inspection $0.00 Second Re-inspection $221.00 Additional Re-inspection $295.00
		Temporary Tattoo Establishments $150.00	Temporary Tattoo Establishments $150.00	Temporary Tattoo Establishments $150.00
		Temporary Body-Piercing Establishments $150.00	Temporary Body-Piercing Establishments $150.00	Temporary Body-Piercing Establishments $150.00
		Combined Temporary Tattoo / Body-Piercing Establishments $200.00	Combined Temporary Tattoo / Body-Piercing Establishments $200.00	Combined Temporary Tattoo / Body-Piercing Establishments $200.00

Attachment: 6.1 PH Fees for Services Spread Sheet 6-2-21 (6408 : Public Health 2022 Financial User Fees

STATEMENT OF EXPLANATION
HUMAN SERVICES 2022 FINANCIAL USER FEES - TIM EASKER/ASHLEY BAILEY

Health & Human Services Board approval requested for revisions to Consumer Financial Services user fees for 2022. Attached is a document showing the changes from 2021 to 2022. The first document is for all programs. The second document is without CCS (Comprehensive Community Services).

Consumer Financial Services 2022 Rates

Children and Families Services		
Service	2021	2022
Foster Home - Monthly	$254 - $2,000	$254 - $2,000
Treatment Foster Home - Monthly	$2,102 - $3,728	$2,216 - $2,504
Group Home – Monthly	$6,138 - $7,599	$7,028 - $8,102
Residential Care Center - Monthly	$10,509 - $26,102	$5,425 - $26,102
Institutional Placement - Daily	$1,392	$1,448
Respite - Daily	$90 - $240	$41 - $525
Daily Living Skills - Hourly	$32 - $64	$22 - $64
Mentoring – Hourly	$32 - $48	$32 - $37
Drug Screens – Per Screen	$10 - $298	$10 - $374
Family Interactions – Hourly	$77	$81
Family Outreach - Hourly (Formally Parent Outreach)	$73	$74
Family Centered Treatment - Hourly	$142	$145
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Children with Differing Abilities Services		
B-3 Service Coordination – Hourly	$109	$117
Therapy (Physical, Occupational, Speech)	$33.75/unit or $135/session	$33.75/unit or $135/session
Respite – Daily	$12 - $20	$12 - $20
Waiver Services Areas (Autism, Developmental Disabilities, Coordinated Service Team, Mental Health, Family Support, Physical Disabilities)		
• Daily Living Skills – Hourly	$38	$38
• Mentoring – Hourly	$24	$24
• Supportive Home Care – Hourly	$12 - $20	$12 - $20
• Counseling & Therapeutic Services - Hourly	85% of the Providers Usual & Customary Rate – Max of $170	85% of the Providers Usual & Customary Rate – Max of $170
Guardianship	$125	$125

Western Region Recovery & Wellness Consortium		
Buffalo Service Facilitation – Hourly	$125 - $130	$125 - $130
Chippewa Service Facilitation – Hourly	$108 - $121	$101 - $134
Pepin Service Facilitation – Hourly	$130 - $132	$130 - $132
Detoxification – Daily	$656 - $1,497	$656 - $1,497
Inpatient – Daily	$365 - $1,354	$370 - $1,549
Institutional Placement - Daily	$1,392	$1,448
Adult Family Home – Daily	$102 - $155	$100 - $277
Community Based Res. Home – Daily	$91 - $280	$91 - $280
Recovery House – Daily	$21	$21
Intake-Intoxicated Driver's Program – Hourly	$51	$51
Intake-AODA	$111 - $147	$100 - $148
Supportive Employment – Hourly	$38 - $39	$39
Crisis Intervention-Counseling/Transportation – Hourly	$275 - $330	$323 - $335
Drug Screens – Per Screen	$10 - $298	$10 - $374

Attachment: 6.2a DHS Financial Consumer Fees Annual Cost Comparisons 2021-22 (6415 : Human Services 2022 Financial User Fees - Tim

Consumer Financial Services 2022 Rates

Western Region Recovery & Wellness Consortium		
Medications	Full Rate	Full Rate
Community Recovery Services - Hourly	$187	$192
Medication Management – Hourly	$54 - $130	$54 - $117
Psychiatric Services – Hourly	$148 - $405	$148 - $405
Psychologist Services - Hourly	$126	$126
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Western Region Recovery & Wellness Consortium (CCS Program)		
Services	Full Cost of Service	Full Cost of Service
Screening and Assessment	$44.53 - $227.83/hour	$100.92 - $180.61/hour
Service Planning	$44.53 - $227.83/hour	$100.92 - $180.61/hour
Service Facilitation	$44.53 - $227.83/hour	$100.92 - $180.61/hour
Diagnostic Evaluations	$70.92 - $570.15/hour	$70.92 - $366.13/hour
Medication Management	$46.18 - $570.15/hour	$35.67 - $567.21/hour
Physical Health Monitoring	$70.28 - $404.41/hour	$35.67 - $336.96/hour
Peer Support	$67.68 - $145.79/hour	$67.68 - $145.79/hour
Individual Skill Development and Enhancement	$38.83 - $324.62/hour	$38.83 - $324.62/hour
Employment-Related Skill Training	$38.83 - $227.83/hour	$38.83 - $227.83/hour
Individual and/or Family Psychoeducation	$38.83 - $404.41/hour	$38.83 - $265.30/hour
Wellness Management and Recovery/Recovery Support Services	$38.83 - $404.41/hour	$38.83 - $336.96/hour
Psychotherapy	$46.97 - $570.15/hour	$60.81 - $265.30/hour
Substance Abuse Treatment	$61.55 - $255.55/hour	$61.55 - $255.55/hour

Youth Services		
Foster Home – Monthly	$254 - $2,000	$254 - $2,000
Treatment Foster Home – Monthly	$2,102 - $3,728	$2,216 - $2,504
Group Home – Monthly	$6,138 - $7,599	$7,028 - $8,102
Shelter-Non-secure Detention – Daily	$239	$261
Residential Care – Monthly	$10,509 - $26,102	$5,425 - $26,102
Secure Detention – Daily	$200	$200
Juvenile Correction – Daily	$300	$350
Institutional Placement – Daily	$1,392	$1,448
Respite Care – Daily	$90 - $240	$41 - $525
Daily Living Skills – Hourly	$32 - $64	$22 - $64
Juvenile Probation/Supervision – Monthly	$25	$25
Mentoring – Hourly	$32 - $48	$32 - $37
Drug Screen – Per Screen	$10 - $298	$10 - $374
Electronic Monitoring – Daily	$8 - $9	$8 - $9
Family Centered Treatment – Hourly	$142	$145
In Home Therapy - Hourly	$102	$104
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Attachment: 6.2a DHS Financial Consumer Fees Annual Cost Comparisons 2021-22 (6415 : Human Services 2022 Financial User Fees - Tim

Consumer Financial Services 2022 Rates

Children and Families Services		
Service	2021	2022
Foster Home - Monthly	$254 - $2,000	$254 - $2,000
Treatment Foster Home - Monthly	$2,102 - $3,728	$2,216 - $2,504
Group Home – Monthly	$6,138 - $7,599	$7,028 - $8,102
Residential Care Center - Monthly	$10,509 - $26,102	$5,425 - $26,102
Institutional Placement - Daily	$1,392	$1,448
Respite - Daily	$90 - $240	$41 - $525
Daily Living Skills - Hourly	$32 - $64	$22 - $64
Mentoring – Hourly	$32 - $48	$32 - $37
Drug Screens – Per Screen	$10 - $298	$10 - $374
Family Interactions – Hourly	$77	$81
Family Outreach - Hourly (Formally Parent Outreach)	$73	$74
Family Centered Treatment - Hourly	$142	$145
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Children with Differing Abilities Services		
B-3 Service Coordination – Hourly	$109	$117
Therapy (Physical, Occupational, Speech)	$33.75/unit or $135/session	$33.75/unit or $135/session
Respite – Daily	$12 - $20	$12 - $20
Waiver Services Areas (Autism, Developmental Disabilities, Coordinated Service Team, Mental Health, Family Support, Physical Disabilities)		
• Daily Living Skills – Hourly	$38	$38
• Mentoring – Hourly	$24	$24
• Supportive Home Care – Hourly	$12 - $20	$12 - $20
• Counseling & Therapeutic Services - Hourly	85% of the Providers Usual & Customary Rate – Max of $170	85% of the Providers Usual & Customary Rate – Max of $170
Guardianship	$125	$125

Western Region Recovery & Wellness Consortium		
Buffalo Service Facilitation – Hourly	$125 - $130	$125 - $130
Chippewa Service Facilitation – Hourly	$108 - $121	$101 - $134
Pepin Service Facilitation – Hourly	$130 - $132	$130 - $132
Detoxification – Daily	$656 - $1,497	$656 - $1,497
Inpatient – Daily	$365 - $1,354	$370 - $1,549
Institutional Placement - Daily	$1,392	$1,448
Adult Family Home – Daily	$102 - $155	$100 - $277
Community Based Res. Home – Daily	$91 - $280	$91 - $280
Recovery House – Daily	$21	$21
Intake-Intoxicated Driver's Program – Hourly	$51	$51
Intake-AODA	$111 - $147	$100 - $148
Supportive Employment – Hourly	$38 - $39	$39
Crisis Intervention-Counseling/Transportation – Hourly	$275 - $330	$323 - $335
Drug Screens – Per Screen	$10 - $298	$10 - $374

Attachment: 6.2b DHS Financial Consumer Fees Annual Cost Comparisons 2021-22 No CCS (6415 : Human Services 2022 Financial User Fees -

Consumer Financial Services 2022 Rates

Western Region Recovery & Wellness Consortium		
Medications	Full Rate	Full Rate
Community Recovery Services - Hourly	$187	$192
Medication Management – Hourly	$54 - $130	$54 - $117
Psychiatric Services – Hourly	$148 - $405	$148 - $405
Psychologist Services - Hourly	$126	$126
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Youth Services		
Foster Home – Monthly	$254 - $2,000	$254 - $2,000
Treatment Foster Home – Monthly	$2,102 - $3,728	$2,216 - $2,504
Group Home – Monthly	$6,138 - $7,599	$7,028 - $8,102
Shelter-Non-secure Detention – Daily	$239	$261
Residential Care – Monthly	$10,509 - $26,102	$5,425 - $26,102
Secure Detention – Daily	$200	$200
Juvenile Correction – Daily	$300	$350
Institutional Placement – Daily	$1,392	$1,448
Respite Care – Daily	$90 - $240	$41 - $525
Daily Living Skills – Hourly	$32 - $64	$22 - $64
Juvenile Probation/Supervision – Monthly	$25	$25
Mentoring – Hourly	$32 - $48	$32 - $37
Drug Screen – Per Screen	$10 - $298	$10 - $374
Electronic Monitoring – Daily	$8 - $9	$8 - $9
Family Centered Treatment – Hourly	$142	$145
In Home Therapy - Hourly	$102	$104
Guardianship	$125	$125
Assessments	Per Evaluation: Full Rate	Per Evaluation: Full Rate

Attachment: 6.2b DHS Financial Consumer Fees Annual Cost Comparisons 2021-22 No CCS (6415 : Human Services 2022 Financial User Fees -