

Healthy People
Healthy Oneida County



Community Health Plan
2007-2011

AN INVITATION TO THE COMMUNITY

This plan is the result of a community assessment process that brought together a broad representation of Oneida County constituencies; it is meant to be used as a guide by anyone in the community interested in improving the health of Oneida County citizens.

A plan is most valuable if action is taken, improvement is measured, and a new health status is celebrated. Community change and resulting health improvement is a laborious process that requires dedication and commitment. In order to meet the health status goals for Oneida County, collective action will be required among all citizens, businesses, government, and community sectors.

We wish to thank all members of the Community Assessment Team and Priority Workgroups whose efforts and knowledge are culminated in this document. We invite all Oneida County citizens to use this plan to improve individual, family, and community health. It is our hope that this document will be used as a reference and foundation for many efforts within our community.

Anyone wishing to participate in action teams addressing the health priorities identified in this document can contact the Oneida County Health Department or any member of the Healthy People Healthy Oneida County Steering Committee.

Sincerely,

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COMMUNITY HEALTH PLAN COMMITTEES

Thank you to the following individuals who took time from their busy schedules to participate in the development of Healthy People Healthy Oneida County Community Health Plan. A special thank you is extended to Joan Theurer, Angela Nimsgern, and Jim Lawrence from the Division of Public Health - Northern Region for their assistance in facilitating this process.

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EXECUTIVE SUMMARY

Healthy People Healthy Oneida County began in 1995 as a community wide initiative with the goal of establishing an ongoing process for identifying and addressing health needs in Oneida County. This new plan is a part of the ongoing planning process and commitment to our community. Data will be reviewed every five years both to monitor progress toward identified goals and to establish new goals and priorities.

The intent of the plan is to foster a successful partnership of many facets of our community in order to improve the health of our community. A community assessment team representing a broad spectrum of Oneida County constituencies including business, education, government, health care, law enforcement, not-for-profit agencies, and citizens reviewed county and state health data in relationship to State of Wisconsin health priorities and national health objectives for 2010. *Healthiest Wisconsin 2010: A Partnership to Improve the Health of the Public* was used as a guiding document to benchmark our community with state and national health goals. (See Appendix 1)

After reviewing data of the eleven health priorities identified in *Healthiest Wisconsin 2010*, Oneida County Community Assessment Team identified four priorities as areas of focus for the 2007 -2011 health plan:

- **Access to Health Care (With Emphasis on Mental Health, Primary Care, and Dental Access)**
- **Alcohol and Other Substance Abuse and Addiction**
- **Nutrition/Physical Activity**
- **Tobacco Use and Exposure**

While the remaining five priorities were not selected as the top health priorities, sustaining and building upon current community-wide efforts around all the health priorities will be critical in order to assure continual improvement in the health of Oneida County citizens and communities.* A brief summary of Oneida County data and strategies for the other five health priorities is included in Appendix 2.

Goals, strategies, outcomes, and key community partners for each of these priorities are included in the community health plan. Because we recognize that the success of the overall health of our community is linked to local, state, and national partners, those websites and links have been included in Appendix 3.

* Please note that the community assessment team recognized social/economic impact as an underlying issue with all identified health priorities. Also, for purposes of this plan, mental health has been combined with Access to Health Care and Adequate & Appropriate Nutrition and Obesity/Physical Inactivity were combined.

ACCESS TO PRIMARY AND PREVENTIVE HEALTH CARE

DEFINITION

Access means that primary and preventive health care services are available and organized in a way that makes sense to individuals and families. Access means that people have the resources, both financial and non-financial, needed to obtain and use available services. Accessible health care includes an infrastructure supporting a range of health services with the capacity to reach diverse people and adapt to the specific access issues that differ in communities.

IMPACT

When individuals and groups lack access to primary and preventive health care, critical opportunities are lost for the promotion of healthy lifestyle behaviors and for early diagnosis and treatment of health problems. Lack of access to care results in short and longer term adverse health consequences, including: higher mortality rates and years of productive life lost, greater rates of more advanced and difficult to treat disease (e.g., heart, cancer, and stroke), and increased rates of preventable disease (e.g., dental and osteoporosis). Inadequate access to health care services contributes to an overall poorer health status among the medically underserved (Lewin & Altman, 2000).

Ability to pay for needed care is one aspect of access to care and insurance coverage is a common indicator for financial access. In 2004 in Wisconsin an estimated 5% of the population was without any health insurance coverage for the entire year. This is a statistically significant increase from 2003 when 3% of the population was uninsured for the entire year.

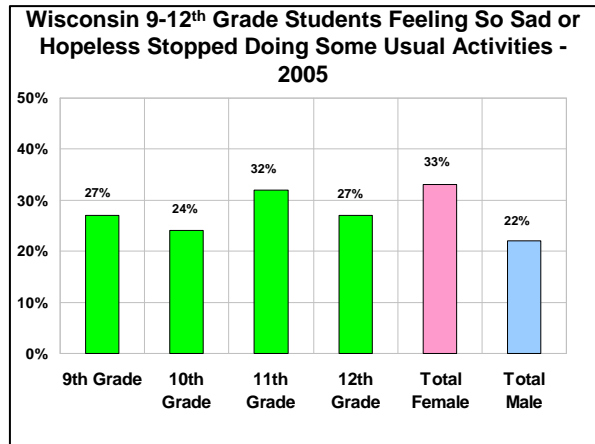
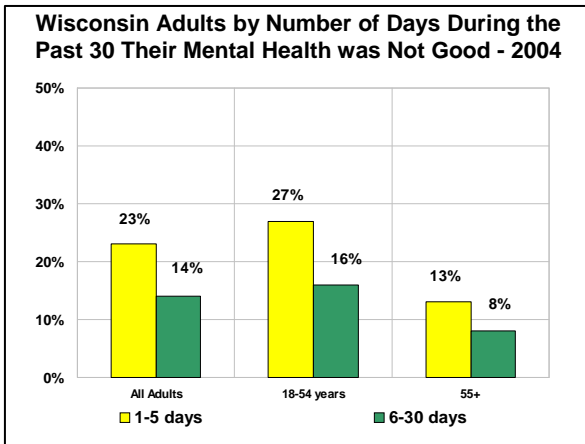
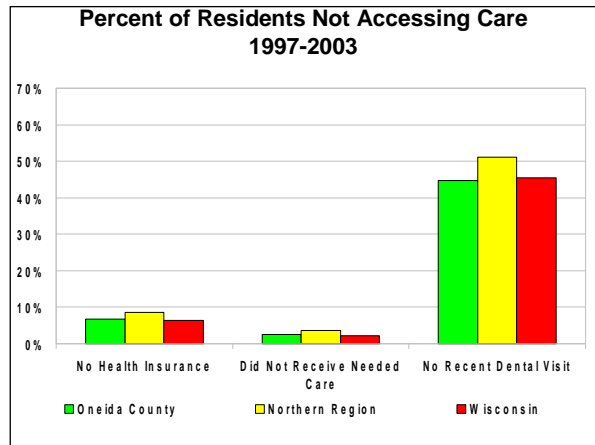
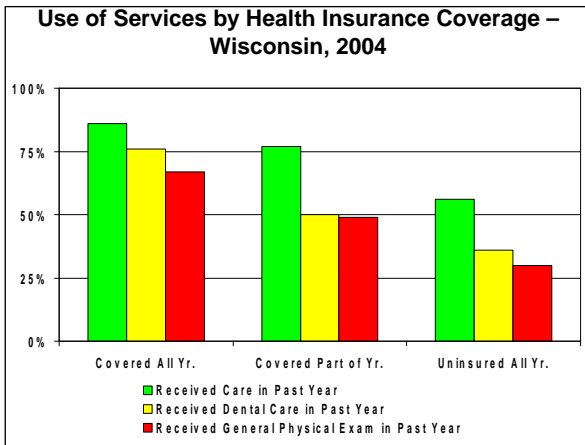
Of Wisconsin residents with no health insurance coverage for the entire year 56% had seen a doctor, nurse practitioner or physician assistant in the past 12 months. Of those who had insurance coverage all year 86% had received care in the past 12 months.

Those with no health insurance coverage for the entire year were less likely to have had a general physical exam (30%) than those who had coverage part of the year (49%) or those who had insurance coverage all year (67%).

Those with no health insurance coverage for the entire year were less likely to have received dental care in the past year (36%) than those who had coverage part of the year (50%) or those who had insurance coverage all year (76%).

In Oneida County between 1997 and 2003 an average of 6.7% of residents were without health insurance and 2.5% did not receive needed health care.

Other indicators of access to care include the availability of providers for medical, mental health and dental care, transportation, availability of child care and the ability to take time away from work to get care. These indicators are difficult to measure in our community but are also considerations.



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ACCESS TO HEALTH CARE

VISION FOR THE FUTURE:

All residents of Oneida County will have access to and the ability to pay for comprehensive preventive and primary health care to include, but not limited to: dental, medical, mental health and vision.

GOAL ONE

Representatives from business, tourism, economic development, education, transportation, social services, health care, insurance companies, and city/county government sectors will form either a “super council” or be part of an existing forum to develop a model(s) for purchasing affordable comprehensive health insurance for all businesses within Oneida County.

Suggested Strategies

- Explore what is happening at a state and national level as to development and funding of models for purchasing health care coverage among businesses.
- Connect with economic development groups (e.g., Oneida County Economic Development, Grow North).
- Apply for planning grants through Healthier Wisconsin Partnership Program as well as other state and federal grants.
- Pilot a demonstration model among Oneida County large and small businesses.
- Advocate with state and federal legislators for the funding and development of models to purchase health care coverage for businesses.
- Develop a public awareness campaign regarding the need and benefit of a one-party delivery health care model.

GOAL TWO

Oneida county health care and behavioral health providers, education, faith-based, volunteer, business and economic development sectors will adopt a county-wide behavioral health plan as a means to improve access and utilization of mental health and AODA services.

Suggested Strategies

- Create a council to develop a county-wide, comprehensive behavioral health plan for Oneida County. The plan to address: type of professionals by FTE and location, roles and responsibilities of professional types, a decision-tree protocol for referring to and among health care and behavioral medicine providers, identification of current gaps, exploration of alternative provider and delivery models, identification of professional types needed, collaborative recruitment agreements among providers, strategies for partnering with universities to provide educational offerings needed, funding streams for the uninsured and underinsured. Tie the planning and implementation of the future's plan to business, workforce, tourism, economic development, transportation sectors at a county and regional level.
- Work collaboratively with county and regional initiatives in the prevention and treatment of alcohol and other drugs.
- Encourage diverse partnerships within the county to create a comprehensive community recruitment council to increase the mental health providers in the area.
- Explore the feasibility of alternative models such utilizing Nurse Practitioners, and telemedicine.
- Explore recruitment and continuing education to increase the number and type of professionals needed in the area of behavioral medicine (sign-on bonus, stipends, and tuition reimbursement).
- Collaborate with state and federal legislative efforts to advocate for policy changes which will address known barriers to accessing mental health and AODA services (e.g., new models of delivery, Medical Assistance reimbursement rates, cost-based reimbursement system).
- Educate policy makers of the impact of mental health on economic development and issues of poverty related to mental health and AODA.
- Develop a public awareness campaign on the range of prevention and treatment services available and how to access resources (e.g., behavioral management, medication management).
- Empower community members and providers to contact legislators to advocate for policy changes and legislation.

GOAL THREE

Oneida county dental providers, health care providers, businesses and economic development sectors will adopt a county-wide oral health plan to improve access and utilization of preventive and restorative dental care services.

Suggested Strategies

- Create an oral health coalition to develop and implement a county-wide oral health plan. The plan to address: assessment of the number of dentists by location, those who accept Medical Assistance assignment, and the percentage who bill for services; assess the number of providers who recommend and provide preventive oral health services such as fluoride supplements, fluoride varnishes and sealants; explore models and strategies for addressing “no-show” rate; identify gaps and needs in the county; develop a monitoring system for tracking current practices and initiatives; explore alternative delivery models; and examine sustainability of collaborative efforts.
- Explore the merits of conducting universal screening of preschool and elementary school children.
- Collaborate with state and national legislative efforts to advocate for policy changes to address known barriers to accessing dental health services (e.g., new models of delivery, Medical Assistance reimbursement rates, cost-based reimbursement system).
- Explore models being implemented by other Wisconsin counties for improving access to dental services (e.g., hiring/contracting county dental hygienist).
- Conduct public awareness campaign to increase community's awareness of dental health care access issues across the lifespan.
- Empower community members and providers to advocate in support of policy changes to address barriers to dental health care (e.g., reimbursement rates, dental hygienist practice).
- Support current efforts in assuring a comprehensive service system for oral health.
- Monitor gaps in oral health services across the lifespan (infant to older adult).
- Develop a public education campaign on oral health prevention practices for individuals and families.

GOAL FOUR

The Rural Dental Health Clinic will have a site located in Oneida County.

Suggested Strategies

- Work with the Rural Dental Health Clinic to explore untapped resources to support the mission of the clinic.
- Advocate with state and national legislators on the benefit of having the Rural Dental Health Clinic and need for sustainable funding.
- Collaborate with the Rural Health Clinic in soliciting grants.
- Outreach to students attending Marquette University and regional dental schools.
- Promote collaborative partnerships to leverage needed oral health services (e.g., practice site, supplies, & materials).
-

GOAL FIVE

Oneida County will have a formal mechanism for monitoring gaps and trends in the delivery of a full array of health care services across the lifespan.

Suggested Strategies

- Identify subpopulations who are at risk to experience delays in services or inability to access health services.
- Explore community models that monitor gaps and trends.
- Explore the feasibility of conducting and expanding the Department of Public Instructions Youth Risk Behavior Survey. Implement changes based on the results of surveys conducted
- Identify data sources for monitoring gaps in services (e.g., local sources such as social services, schools, public health, behavior health, employers; state sources).
- Collaborate with community service providers and employers to expand data collection and analysis capability.
- Build upon existing community resources to meet identified gaps in service.

WHO TO REACH

Business, tourism, economic development, education, transportation, social services, health care, dental health care, behavioral health providers, community and service organizations, faith-based organization, volunteer organizations, consumer groups, residents of Oneida County, media, legislators and city/county government.

PROJECTED 2011 OUTCOMES

- Oneida County large and small businesses will be able to purchase affordable comprehensive health insurance for their full time and part-time employees.
- Oneida County individuals and families will have access to a full range of behavioral health services.
- Oneida County individuals and families will have access to a full range of preventative and restorative dental health services.
- Oneida County business, tourism, economic development, education, transportation, social services, health care, community and service organizations, faith-based organization, volunteer organizations, consumer groups and governmental sectors will demonstrate how their collaborative efforts have improved access to comprehensive health care services for the residents of Oneida County.

ALCOHOL & OTHER SUBSTANCE ABUSE USE & ADDICTION

DEFINITION

The American Psychiatric Association (1994) defines inappropriate use of a substance as use in a manner that exceeds the safe or prescribed amount and frequency or poses a health or safety risk to the user or others. Examples include: use during pregnancy, intoxicated driving, drinking to incapacitation, and underage drinking. It also includes the infrequent or experimental use of illegal street drugs.

The American Psychiatric Association has identified several disorders associated with alcohol and other substances.

- ABUSE - Results in negative consequences at school, work, neglect of children, legal problems, or arguments with family.
- DEPENDENCE - Involves significant impairment in at least three areas such as: tolerance, withdrawal symptoms or inability to cut down. It is a social and physical disorder.
- DEMENTIA - Relates to memory, language, emotional or motor impairments and other cognitive deficits.

IMPACT

Inappropriate use and abuse of alcohol and other drugs is a significant health, social, public safety and economic problem. It is associated with many societal problems including: suicide, homicide, accidental injury and death, assault, robbery, domestic violence, child abuse, delinquency, teen pregnancy, diabetes, hypertension, stroke, certain cancers, family dysfunction and break-up, lowered academic performance and lowered productivity. (U.S. Department of Health and Human Services, 1987)

Trend data on substance abuse problems and health risks can be approximated using indicators from state and national surveys. The Centers for Disease Control and Prevention (CDC) has identified three adult abuse risk indicators:

1. Heavy drinkers (adult men having more than two drinks per day and adult women having more than one drink per day).
2. Binge drinkers (adults having five or more drinks on one occasion).
3. Driving after drinking.

With 7.5% of adults identifying themselves as heavy drinkers in 2005 Wisconsin was first in the nation. Wisconsin was also first in the nation in 2005 for binge drinking with 22.1% of adults reporting five or more drinks on one occasion in the last month. For comparison, the national average for heavy drinking was 5% and binge drinking was 14%. (Centers for Disease Control, 2006).

The Wisconsin Behavior Risk Factor Survey from 1998-2004 indicates that 21% of Oneida County adults over age 18 reported having consumed 5 or more drinks on one occasion in the past 30 days. This compares with 24% in Wisconsin and ranks our county as number 23 out of 72 counties in the state.

Alcohol and other drug use problems among adolescents are also significant in Oneida County and Wisconsin. In 2005 31% of Wisconsin 9th through 12th grade students reported binge drinking in the past month.

The actions are related to rate of motor vehicle accidents related to alcohol that is above the state. For the period of 2000 to 2004 8.0% of Oneida County motor vehicle accidents was related to alcohol. This compares to 6.8% of all accidents for Wisconsin during the same period.

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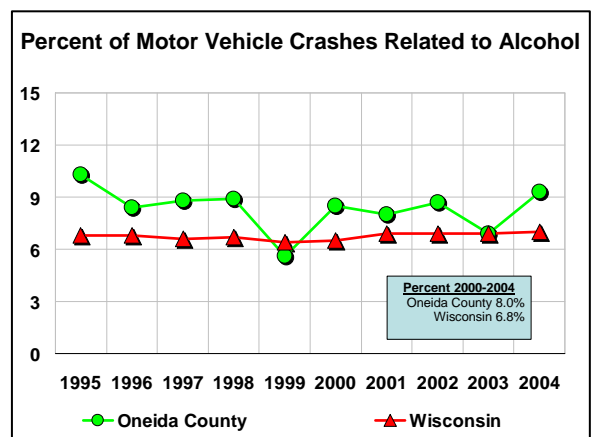
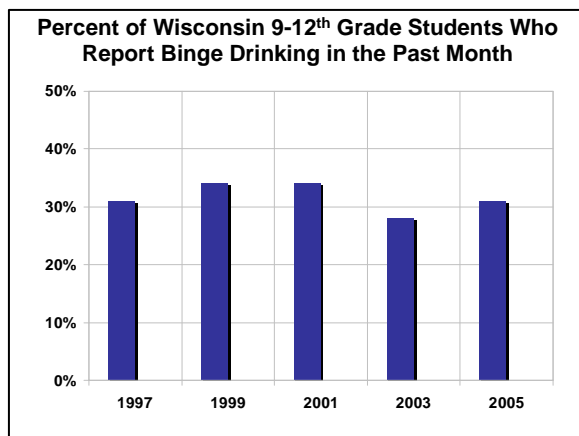
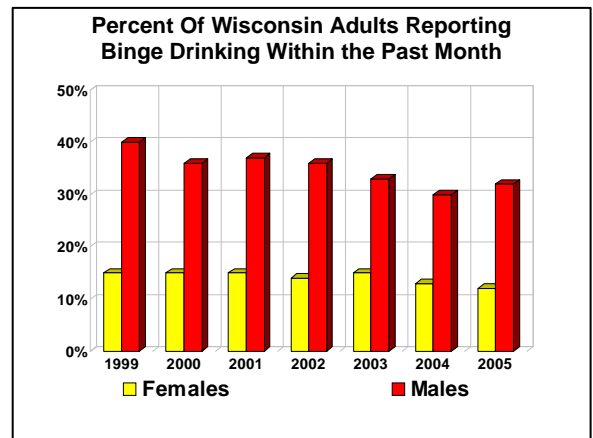
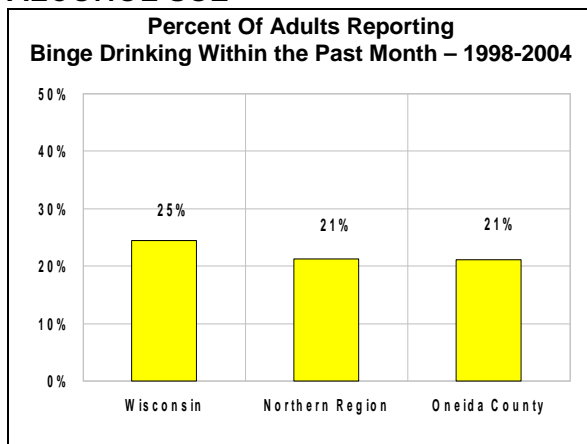
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ALCOHOL USE



ALCOHOL AND OTHER SUBSTANCE USE AND ADDICTION

Vision for the Future:

All residents of Oneida County will support and promote healthy behaviors in the use of alcohol and prescription drugs.

GOAL ONE

Oneida County will demonstrate two collaborative initiatives that result in an enhancement of prevention, intervention and/or treatment services.

Strategies

- Create a forum to bring existing coalitions, organizations and institutions to improve the coordination of prevention, intervention and treatment resources and expand the network of advocacy. Representation to include but not limited to law enforcement, health care, schools, youth organizations, community, and service organizations.
- Work with businesses, economic development and other sectors to tap into potential resources to support prevention and intervention efforts.
- Demonstrate the economic benefit of prevention and intervention in terms of the financial and social impact on a community from absences from work, illness, injury and premature death.
- Encourage joint planning and pursuit of grants with neighboring counties. Explore networking with Vilas County Positive Alternative Coalition.
- Promote consistent prevention and intervention messages at a regional level.
- Join efforts with state professional associations (e.g., State Medical Society).
- Advocate with state and federal legislators for resources to support and sustain county and regional-wide prevention and intervention initiatives. (e.g., alternative justice programs for under-age consumption.)

GOAL TWO

Oneida County will adopt two new initiatives that promote protective factors among youth including a sense of connectedness and resiliency.

Strategies

- Identify protective factors and resources for Oneida County youth.
- Encourage partnerships between community and service organizations and schools, after-school programs and youth organizations.
- Explore the feasibility of establishing mentoring programs for youth in area school districts, after-school programs and youth organizations.
- Expand current recreational and leisure time opportunities for all youth, particularly at-risk youth. Work with the YMCA, service and recreational clubs to sponsor events and scholarships. Explore strategies to engage parents and other family members in youth events and activities.
- Promote a research-based, youth led, drug and alcohol awareness and prevention program for all area schools that is accessible for all students.
- Explore feasibility of launching a Grandparent Program, utilizing the knowledge, skills and wisdom of older adults to support the development of Oneida County's youth.
- Re-evaluate current K-12 school curriculums in the area of tobacco, alcohol and other drugs. Explore the merits of adopting research-based prevention curriculum for all area school districts (e.g., Prevention Research Institute, Prime for Life Curriculum). Leverage financial and manpower resources to support the implementation of curriculum from community and service organizations.
- Consult with school administrators and school boards regarding gaps and successes in prevention programs and services and means by which they can be supported.
- Explore the feasibility of conducting and expanding the Department of Public Instructions Youth Risk Behavior Survey. Implement changes based on the results of surveys conducted.

GOAL THREE

Oneida County will demonstrate one youth led initiative that will lead to either a social norms practice or policy change in the use of alcohol, prescription and other drugs.

Strategies

- Develop an education campaign to increase adults, parents and youth understanding of the underlying causes and behaviors associated with misuse and abuse of alcohol and other drugs. Address the relationship between alcohol, tobacco and other obsessive-compulsive behaviors. Provide information on risk-reduction behaviors and positive risk taking behaviors.
- Ensure educational messages address the consequences of alcohol and drug use related to date rape, abuse and domestic violence.
- Promote alcohol-free community and family events.
- Develop a media campaign to create alcohol-free graduation, post-prom, and New Year's Eve, business parties. Work with schools, businesses, grocery and convenience stores to distribute alcohol-free drink recipes.
- Identify champions in business, media, policy makers and among youth.
- Utilize strategies from tobacco prevention that have demonstrated success (e.g., youth-led messages targeted at adults and liquor industry).
- Address the emerging use of methamphetamine in all public media and educational campaigns.
- Provide education on the prevalence and risks of prescription drug sharing, selling and misuse to school staff and parents.
- Provide education on the importance of appropriate prescribing of pharmaceuticals and the prevalence of prescription drug sharing, selling and misuse to pharmacists and health care providers including dentists.

GOAL FOUR

Oneida County will demonstrate two community led initiatives that will lead to either a social norms practice or policy change in the use of alcohol, prescription and other drugs.

Strategies

- Develop an education campaign to increase adults understanding of the underlying causes and behaviors associated with misuse and abuse of alcohol and other drugs. Address the relationship between alcohol, tobacco and other obsessive-compulsive behaviors. Provide information on risk-reduction behaviors and positive risk taking behaviors.
- Ensure educational messages address the consequences of alcohol and drug use related to date rape, abuse and domestic violence.
- Promote alcohol-free community and family events.
- Develop uniform prevention and intervention messages for pregnant women among health care and community service sectors (e.g., Baby and Me initiative).
- Develop a media campaign to create alcohol-free New Year's Eve and business parties. Work with businesses, grocery and convenience stores to distribute alcohol-free drink recipes.
- Identify champions in business, media, and policy makers.
- Utilize strategies from tobacco prevention that have demonstrated success (e.g., youth-led messages targeted at adults and liquor industry).
- Address the emerging use of methamphetamine in all public media and educational campaigns.
- Provide education on the prevalence and risks of prescription drug sharing, selling and misuse to adults.
- Provide education on the importance of appropriate prescribing of pharmaceuticals and the prevalence of prescription drug sharing, selling and misuse to pharmacists and health care providers including dentists.

GOAL FIVE

Oneida County will sustain uniform enforcement of alcohol, prescription and other drug laws and policies.

Strategies _____

- Develop a media campaign to inform adults of the legal and social consequences of furnishing alcohol and other drugs to minors. Address the impact of alcohol abuse among all socio-economic groups.
- Support the continual allocation of resources to enforce liquor law violations.
- Engage the Tavern League to support the enforcement of liquor laws.

GOAL SIX

Oneida County will adopt a county-wide prevention and intervention framework among AODA and mental health providers.

Strategies _____

- Develop a county-wide protocol among health care, educational, and social service sectors for discharge of youth from residential treatment services.
- Develop uniformed family and individual prevention and intervention messages.
- Assess and address gaps in service needs for individuals and families who have alcohol and other drug and mental health concerns.
- Develop a decision-tree protocol for referring individuals and families among AODA and mental health providers.

WHO TO REACH

Businesses, economic development, policy makers, law enforcement, educational institutions, community and service organizations, youth organizations, social services, health care and city/county government sectors.

PROJECTED 2011 OUTCOMES

- Oneida County will increase the sustainability of collaborative working partnerships in the area of the prevention, intervention and treatment of alcohol and other substances.
- Oneida County's community norms for youth will discourage the use of alcohol and illegal drugs and support the lawful and low-risk use of prescription drugs.
- Oneida County's community norms will support the lawful and low-risk use of alcohol and other drugs and dissuade the use of illegal drugs among adults.
- Oneida County will have a coordinated system when working with individuals and families who have at-risk behaviors in the area of alcohol, prescription and other drugs.
- Oneida County will adopt a county-wide protocol ensuring all youth have a comprehensive educational, medical and family plan of care prior to their return from residential treatment services.
- Oneida County business, tourism, economic development, educational, social services, health care, community and service, law enforcement, and government sectors will demonstrate how their collaborative efforts have increased the social and economic capital for Oneida County.

NUTRITION and PHYSICAL ACTIVITY

DEFINITION

The growing concern about unhealthy diets is related to the burden of chronic disease. Unhealthy diets, such as those high in fat, low in fiber, and low in fruits and vegetables, are associated with an increased risk for the top three causes of death in the country: heart disease, cancer, and stroke.; Unhealthy diets can also lead to overweight and obesity, hypertension, diabetes, and osteoporosis.

People are considered overweight or obese based on their Body Mass Index (BMI). BMI is a mathematical formula that is a ratio of weight and height correlated with body fat (kg/m²). BMI is a better predictor of disease than body weight alone.

Similar to obesity, levels of physical activity occur along a continuum. Healthiest Wisconsin 2010 has identified two goals related to physical activity: 37% of adolescents will engage in at least 30 minutes of moderate physical activity five or more times a week; 38% of adults will engage regularly, preferably daily, in moderate physical activity for 30 minutes or more.

IMPACT

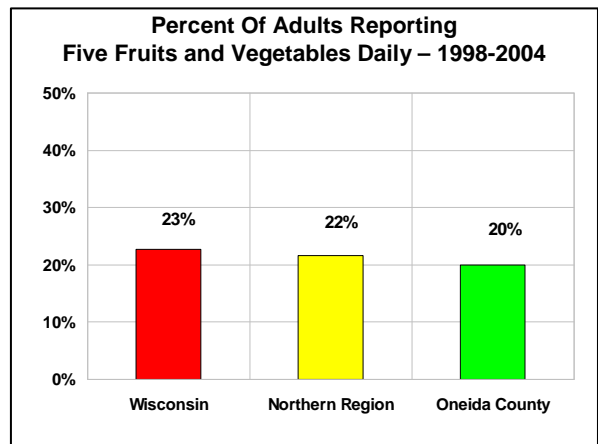
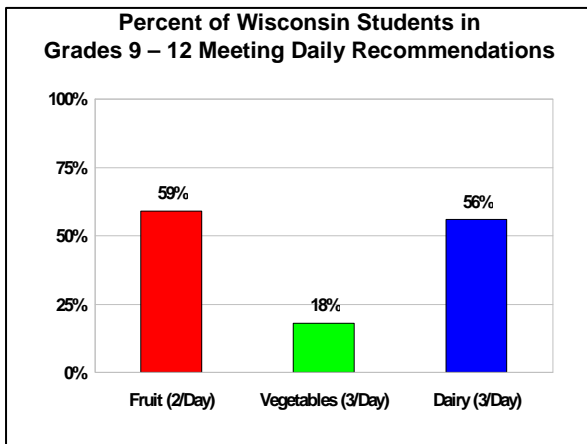
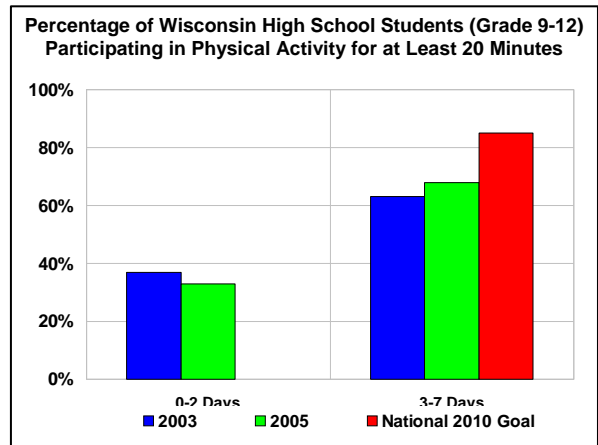
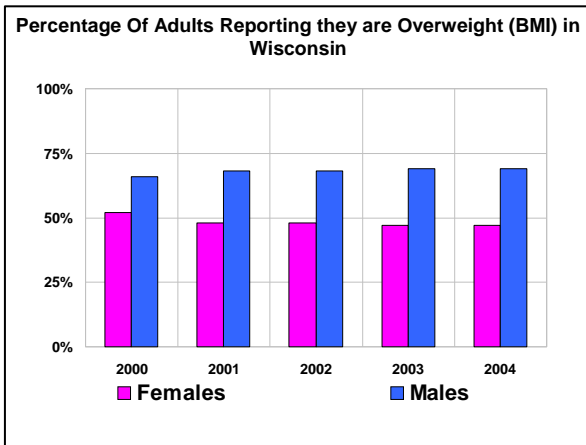
Overweight as well as obesity are common health conditions and their prevalence is increasing nationally and in Wisconsin. Excess weight is associated with an increased risk of many chronic conditions: cardiovascular disease, type 2 diabetes mellitus, hypertension, stroke, osteoarthritis and some cancers.

Obesity has increased in every state, in both sexes, and across all age groups, races, and education levels. The national 2010 goal is to increase the percentage of adults who are at a healthy weight to 60%. Currently in Wisconsin 43% of adults are at a healthy weight; 57% of adults are overweight and/or obese.

The national 2010 goal is to reduce the percentage of adolescents who are obese from 10% to 5%; for children the goal is to reduce the percentage from 11% to 5%. A recent American Academy of Pediatrics position paper on obesity stresses that pediatricians must focus on prevention of childhood obesity and inactivity. The paper stresses that comorbid conditions associated with obesity are likely to persist into adulthood.

In 2005 almost 40% of Wisconsin youth reported not getting at least 2 servings of fruit or 3 servings of dairy per day, and almost 80% reported not eating the recommended 3 servings of vegetables per day.

In comparison, between 1998 and 2004, an average of only 20% of Oneida County adults reported eating five servings of fruit and vegetables per day. The rate of reaching this recommendation was slightly better at 23% for adults in Wisconsin.



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NUTRITION AND PHYSICAL ACTIVITY

Vision for the Future:

All Oneida County residents will be physically active, make healthy food choices and achieve and maintain a healthy weight.

GOAL ONE

Oneida County will demonstrate two collaborative initiatives to promote physical activity and healthy eating as a way of life.

Strategies

- Explore pooling of resources between governmental and non-governmental sectors to expand current community opportunities for individuals and families (e.g., extended hours for physical activity in schools, increase in the number and type of “family night” outings).
- Promote the integration and consolidation of physical activities among organizations and agencies in Oneida County as a way to reduce costs to consumers (e.g., YMCA, Nicolet College, school districts, service organizations).
- Adopt county-wide policy that new construction projects are built with dual purpose in mind; physical activity, community friendly.
- Design the integration of activities across the lifespan (toddler to the frail older adult) with community programs and resources.
- Expand location and accessibility of walking and biking paths in city and rural areas (e.g., utilize business park and city/county parks to develop park walks).
- Involve Senior Citizens and volunteer groups in building, maintaining and providing on-site security for “park walks”.
- Continue to provide public education on safe walking and biking.
- Work with schools to arrange after school transportation to the YMCA and similar programs in the county and/or use schools for after school and summer activities.
- Encourage more physical activity opportunities that are free and non-competitive in nature.
- Develop a county-wide marketing campaign to create media messages which promote daily physical activity, healthy food choices and portion size as a way of life.
- Promote “community gardens” where people work, learn and play (e.g., school districts, Nicolet College, Senior Citizen Center).

- Work with area organizations sponsoring community events to encourage food vendors to offer healthy food choices and portion sizes.
- Develop a local public access cable television channel with local educational institutions to promote healthy lifestyles.
- Inventory Oneida County wellness resources and promote them in a printed and web directory.

GOAL TWO

Three businesses/work sites in Oneida County will adopt one strategy to promote physical activity and healthy food choices within the work environment (e.g., flexible work hours, walking program, stipends joining clubs/YMCA, Steps program).

Strategies

- Inventory businesses/worksites current practices to promote physical activity and healthy food choices (e.g., re-engineer physical activity into day-to-day activities).
- Develop tools and resources for businesses/worksites to encourage policy/practice changes to include: economic costs and benefits, menu of strategies, incentives.
- Feature businesses/worksites who have adopted a new strategy in terms of benefits realized to the employer and employees.
- Work with Oneida County Economic Development to plan green space within the industrial park.
- Create a county-wide forum to leverage resources and expand successful initiatives with broad community representation from multi-sectors to include, but not limited to: businesses, education, health care, community-based, faith-based, service organizations.
- Promote "healthy food" choices in vending machines where people learn, work and play.

GOAL THREE

At least one health care provider in Oneida County will adopt overweight/obesity as a 6th vital sign.

Strategies

- Oneida County will adopt a county-wide protocol among health care providers, school personnel, clergy, community-based, and service organizations, on how to counsel and work with an individual who is overweight and/or obese
- Develop key messages to incorporate into practice when working with individuals/families. (e.g. developing realistic goals and activities, accessible monitoring via BMI and weight-hip ratio)
- Provide education on effective strategies to use when working with individuals/families (e.g, readily accessible activity and healthy food choices).
- Encourage employers/employees to examine their own personal commitment to physical activity and healthy eating as a lifestyle (e.g., role model for the community).

GOAL FOUR

At least one strategy to promote daily physical activity and healthy food choices will be adopted by educational institutions and child-care organizations.

Strategies

- Inventory educational institutions and child care organizations current policies/practices to promote daily physical activity and health food choices.
- Develop tools and resources for educational institutions and child care organizations to encourage policy/practice changes to include: economic costs and benefits, menu of strategies, incentives.
- Promote and encourage the concept of shared responsibility between parents and schools in assuring 60 minutes of daily physical activity for children and adolescents.
- Evaluate current K-12th grade health class curriculums regarding nutrition and physical activity educational messages.
- Encourage schools to offer healthy alternative food choices such as salad and fruit bars.

GOAL FIVE

25% of Oneida County residents surveyed will be able to state one new behavior they have adopted in the area of physical activity and healthy eating.

Strategies

- Develop a social marketing campaign to increase awareness of the benefits of regular physical activity and healthy eating across the lifespan, with strategies for success (e.g., “readily accessible” and “day-to-day” activities). Incorporate “healthy lifestyle” as the new norm for all ages. Promote the food pyramid in creative ways. Educate the public on healthy weight being due to a balance of food intake to physical activity. Include suggestions of what can be done at home such as stairs, laps and acknowledging the physical aspect of housework.
- Explore the feasibility of conducting and expanding the Department of Public Instructions Youth Risk Behavior Survey. Implement changes based on the results of surveys conducted.
- Inventory what physical activity resources are available in the county being sure to include the low and no cost options available in our area (type of activity, location, days/hours, age, cost associated).
- Promote the utilization of current resources (e.g., Bike to Walk trails, YMCA and ability to pay, Nicolet College Institute for Retirement, Senior Citizen PACE and mealsites). Post resources on the web.
- Encourage residents to start their own work and neighborhood walking clubs.
- Promote “Farmers Market” among general public, including senior citizens and WIC participants.
- Develop a “Grow your Own” initiative among households, schools and businesses.
- Promote and support the creation of “Seniors Cooking for Seniors” and “Families Cooking for Families”.
- Publish “recipe of the week” in the local newspapers that are easy to make and healthy specifically designed for families and single households.
- Teach residents healthy eating habits (family dinners, television off, minimally processed foods)

GOAL SIX

Three restaurants, grocery, convenient stores, and/or food providers will adopt one new strategy to promote healthy food choices.

Strategies

- Work with the Wisconsin Restaurant Association to explore ways of designating menu items as healthy and offer recommended food portions.
- Encourage grocery and convenient stores to offer “healthy food choice” check out lanes, and delivery services.
- Encourage academic and day care facility kitchens to offer take-out services to provide ready-to-eat take-out meals for their students’ families and local senior citizens.
- Work with media to promote policy changes adopted by restaurants, grocery stores and food providers.

GOAL SEVEN

The percentage of women who give birth to a baby and choose to breastfeed 30 days or longer will increase by 5%.

Strategies

- Support the launching and maintaining of The Northwoods Breastfeeding Coalition, encouraging diverse representation from health care, learning institutions, and business sector.
- Develop a continuum of support for women who choose to breastfeed (e.g., breastfeeding classes, Lactation Consultants in area hospitals, health care providers having uniformed messages and practices, La Leche League).
- Encourage hospitals to become certified “Baby Friendly Hospitals”, pediatricians to have “Baby Friendly Practice”, and health department to become “Baby Friendly.”
- Encourage worksites to adopt “Breastfeeding Friendly” policy.
- Promote the social norm that breastfeeding is natural and the benefits to baby, mom and family.

WHO TO REACH

Chamber of Commerce, Oneida County Economic Development, Businesses, schools, child care, Nicolet College, Wisconsin Restaurant Association, restaurants, grocery and convenience stores, food providers, YMCA, recreational organizations, governmental sector, community and service organizations, health care providers, media, residents of Oneida County.

2011 OUTCOMES

- The places where people live, work, learn, and play in Oneida County will promote physical activity and healthy eating as a way of life.
- Individuals and families will incorporate physical activity and healthy eating as a way of life.
- Individuals and families will have greater access to healthy food choices.

TOBACCO USE AND EXPOSURE

DEFINITION

Tobacco use and exposure is the active or passive introduction into the human body of toxins found in tobacco products. Tobacco use and exposure is a complex web of social influences, physiological addiction, and marketing and promotion of tobacco products. Effective tobacco prevention and control efforts reduce youth initiation, promote cessation, eliminate environmental tobacco smoke, and address the disparate impact of tobacco on various populations. Comprehensive efforts include counter-marketing, community interventions, legislation and policy change, and evaluation and monitoring.

IMPACT

Tobacco use is the single most preventable cause of disease and death in Wisconsin and the U.S. More deaths can be attributable to tobacco use, than to alcohol, cocaine, heroin, homicide, suicide, motor vehicle crashes, and HIV/AIDS combined. In 1997, approximately 8,000 Wisconsin deaths were related to tobacco use. Leading tobacco-related injuries and illnesses are cardiovascular disease, lung cancer, other selected cancers, respiratory diseases, perinatal conditions, and fire-related burns.

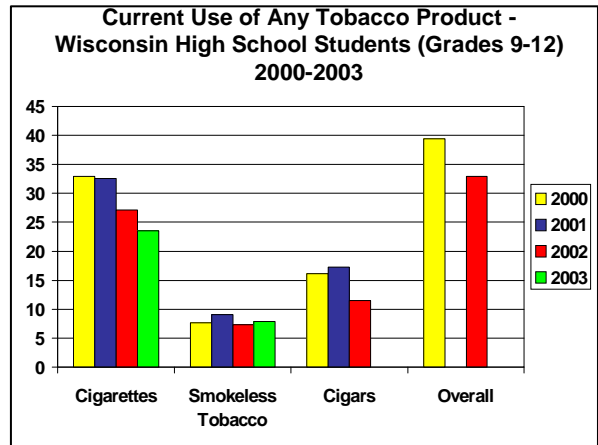
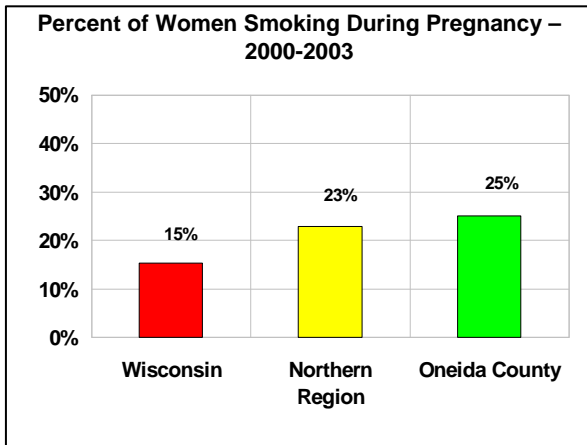
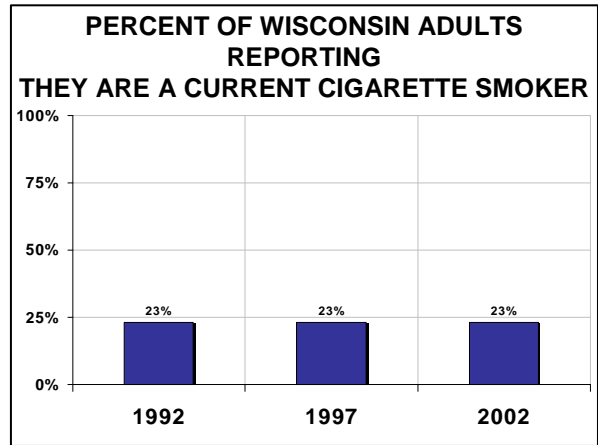
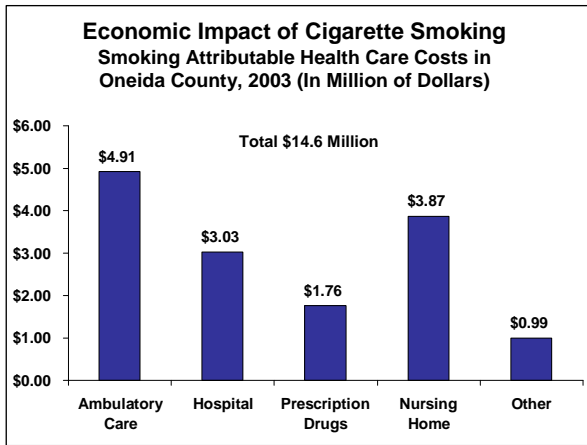
Evidence continues to document the health hazards of environmental tobacco smoke to non-smokers. Efforts to protect people in public spaces and occupational settings from environmental tobacco smoke exposure is of national significance.

In 1993, the cost of medical treatment for smoking-related illnesses in Wisconsin exceeded \$1 billion. Beyond health insurance, tobacco use drives up employers' disability costs and property insurance premiums due to increased fire risk. Tobacco use "saps" workforce productivity through time lost to cigarette breaks and sick days. Smokers are absent from work 50 percent more often than nonsmokers. These factors put the state at a competitive disadvantage for attracting new employers and retaining existing ones.

The impact in Oneida County is similarly large. Tobacco related health care costs in Oneida County were estimated to be \$14.6 million for 2003 with the majority of that cost being for ambulatory (out-patient clinic) care costs. Based on this it is estimated that cigarette smoking costs \$390 for every man, woman and child in Oneida County.

Oneida County adults smoke at about the same rate as adults in Wisconsin on average. The area of difference is in the rate of women who smoke during pregnancy. For this indicator 25.1% of women smoked during pregnancy while the rate for the state of Wisconsin was 15.3%. and the region was 23%.

For youth in Wisconsin approximately one third report smoking cigarettes and an average of one third use any form of tobacco.



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TOBACCO USE AND EXPOSURE

Vision for the Future:
Oneida County residents and visitors living free from the burden of tobacco.

GOAL ONE

A city, town, or municipality in Oneida County will adopt and implement a clean indoor air ordinance.

Strategies

- Increase the number of Oneida County towns and municipalities that ban smoking in their government buildings.
- Increase the number of traditional and non-traditional partners that actively support smoke-free air.
- Develop and implement a clean indoor air ordinance campaign.
- Coordinate an aggressive media campaign with consistent key messages which compliment state efforts.
- Recruit active spokespersons in a smoke free workplace ordinance campaign and provide on-going training and education.
- Motivate people to act in support of a workplace ordinance through increased participation in T-Fan data base.
- Promote smoke-free entertainment and restaurants to community.
- Provide educational opportunities for community on risks associated with second hand smoke.

GOAL TWO

Oneida County tobacco retailers will consistently achieve a rate of 92% or greater on the restriction of the sale or gift of tobacco products to minors.

Strategies

- Recruit & train youth to participate in tobacco compliance checks.
- Provide training materials and resources to law enforcement, town clerks, retail clerks, and owners/agents
- Provide in-depth training for tobacco license holders as needed.
- Conduct compliance checks with enforcement activity as needed.
- Promote WI WINS Program through various media outreach activities.

GOAL THREE

Oneida County will increase youth involvement in support of state and local tobacco policy initiatives.

Strategies

- Provide education to youth regarding pre-emption, fire safe cigarettes, state/local clean indoor air ordinances, tobacco treatment, and increase in tobacco tax.
- Plan strategies of action to include: public hearings, legislative breakfasts, family and community town suppers, peer to peer education, and letter writing campaigns.
- Increase FACT (Fighting Against Corporate Tobacco) membership.
- Provide resources and trainings to enhance and maintain media opportunities.
- Engage partners from the community to work with students.

GOAL FOUR

Five additional Oneida County worksites, schools, or health care providers will implement the "Fax to Quit" program.

Strategies

- Increase awareness of "Fax to Quit" program and worksites, schools or providers initiating through media releases and "business watch" monthly paper.
- Outreach and provide education to workplaces, schools and providers regarding "Fax to Quit" program.
- Promote and provide resources for Quit Now with workplaces, technical college, and service industry.
- Provide education/in-service to school nurses, guidance counselors, and liaison officers regarding the Fax to Quit program, Quit Now, and local tobacco treatment resources.
- Implement NOT Program in one Oneida County school.
- Contact community youth prevention providers, (Family Partners, Kids n Need, Impact, Family Resource Center, & Social Services) to provide tobacco treatment resources.
- Share resources with mental health, addiction and substance abuse providers: and providers of children's and adolescent's services within healthcare settings.

GOAL FIVE

The percent of Oneida County pregnant women who smoke will decrease by 15%.

Strategies

- Promote First Breath Program to Oneida County workplaces, Family Resource Connection, Family Reproductive Health Clinic, and WIC clients.
- Provide on-going education/in-service and materials to OB Departments. & hospitals regarding the Fax to Quit, First Breath, and Quit Now programs.
- Coordinate local media campaigns with state initiative.
- Enhance Motivational Interviewing skills for First Breath providers by promoting and providing resources for continuing education.)
- Provide on going tobacco treatment counseling to pregnant women and extended families as needed.
- Obtain financial support from business/civic organizations to provide for small rewards to women making progress in the program.

WHO TO REACH

Businesses, economic development, policy makers, law enforcement, educational institutions, community and service organizations, youth organizations, media, social services, health care and city/county government sectors.

2011 OUTCOMES

- Oneida County residents and visitors will be protected from involuntary exposure to second hand smoke.
- Tobacco use by Oneida County adults and young adults (18-24) will decrease by 20%.
- Tobacco use among Oneida County youth ages 11- 17 will decrease by 25%.
- Oneida County residents will have greater access to professional counseling, pharmacotherapies, and health systems that help tobacco users who want to quit.

APPENDIX 1

HEALTH PRIORITIES or MODIFIABLE RISK FACTORS	HEALTH CONDITIONS											
	AIDS or HIV	Breast Cancer	Cerebrovascular Disease (Stroke)	COPD	Diabetes	Heart Disease	Homicide	Infant Mortality	Lung Cancer	Motor Vehicle Crashes	Pneumococcal Infections	Suicide
Social/Economic Factor Impact	X	X	X	X	X	X	X	X	X	X	X	X
Access to Health Care	X	X	X	X	X	X	X	X	X		X	X
Inappropriate Use/Abuse of Alcohol and Other Substances	X		X			X	X	X		X		X
Adequate and Appropriate Nutrition		X	X		X	X		X			X	
Tobacco Use and Exposure			X	X		X		X	X		X	
Obesity/Physical Inactivity		X	X		X	X						X
Communicable Disease	X							X			X	
Environmental Occupation Exposures	X								X	X	X	
Intentional/Non-Intentional Injuries								X		X		X
High-Risk Sexual Behavior	X							X				
Mental Health								X				X

APPENDIX 2

OTHER COMMUNITY HEALTH PRIORITIES

The Community Health Improvement Process examined the health of Oneida County citizens based on Wisconsin's eleven 2010 Health Priorities. Data was reviewed in relationship to state and national 2010 goals. While the remaining health priorities were not selected as the top priorities for Oneida County Community Health Plan, sustaining and building upon current community-wide efforts around all of the health priorities will be critical in order to assure continual improvement in the health of Oneida County citizens and community.

SOCIAL AND ECONOMIC FACTORS IMPACTING HEALTH

A direct relationship exists between the socioeconomic status of a population and its health. People who are socio-economically better off, typically do better on most measures of health. Social and economic factors that impact the health of a population and the health of an individual is age composition, family structure, educational level, gender, race, ethnicity/culture, and income. Healthy People Healthy Oneida County Community Health Plan supports the Wisconsin's 2010 goal to improve individual and family economic status of:

- 70% or more of WI households will have annual income at or above 300% of the federal poverty level.
- Increase the literacy rate in WI to 91%.
- Have no family pay more than 20% of their income towards day care expenses.
- Have no more than 5% of families at or below 200% of the federal poverty level.

Strategies of action will include: continue to maximize federal and state aid and grants to provide programs and services through public and private partners for residents who are socially and economically disadvantaged, continue to support economic development efforts to attract well paying jobs that provide health insurance benefits, and increase awareness of social and economic factors facing Oneida County residents with policy makers.

COMMUNICABLE DISEASES

Communicable disease remains a major cause of illness, disability, and death. New infectious agents and diseases are being detected and some diseases considered under control have reemerged in recent years. Recent attention has been focused on increasing the surveillance ability of communities to detect and respond to emerging and re-emerging infectious diseases such as foodborne and waterborne outbreaks, pertussis, influenza, and biological threats. Healthy People Healthy Oneida County Community Health Plan supports the Wisconsin's 2010 goals of:

- Assure 90% or more children and adults are fully immunized
- Reduce disease caused by reportable foodborne and waterborne pathogens.
- Ensure the use of antibiotics and antimicrobials is appropriate.

Strategies of action will include: continue to support and collaborate with the Communicable Disease Coalition in Oneida County, continue public education on how to prevent and reduce exposure to communicable diseases, and continue to provide education and awareness of the appropriate use of antibodies.

INTENTIONAL AND UNINTENTIONAL INJURIES AND VIOLENCE

Injury is classified into two categories, unintentional and intentional. Unintentional, includes injuries such as falls, burns, motor vehicle crashes, poisonings and drowning. Intentional injuries include suicide, homicide, violent injury, and assaults such as sexual assault, intimate partner violence, child and elder abuse. Healthy People Healthy Oneida County Community Health Plan supports the Wisconsin's 2010 goals of:

- Reduce the number of children who are abused and neglected in Wisconsin by 10%.
- Decrease motor vehicle-related deaths and serious injuries.
- Reduce injury and deaths from falls among all populations in Wisconsin.

Strategies of action will include: continue to promote safe driving and seat belt safety, particularly among 16 to 24 year olds and over 65 age groups, increase awareness of abuse among children and the elderly, explore strategies to increase education and evaluate school curriculum around violence issues, educate and encourage community to support policy change reducing or preventing injuries and violence, and continue to encourage community and health care service providers to link individuals and families in need of help to available community services.

ENVIRONMENTAL AND OCCUPATIONAL HEALTH HAZARDS

Environmental and occupational health hazards continue to contribute significantly to disease, disability, and premature death in Wisconsin. Environmental and occupational health hazards are exposure to toxic substances, noise, vibration, and other hazardous agents in the environment or the workplace that can create or aggravate health conditions. Healthy People Healthy Oneida County Community Health Plan supports the Wisconsin's 2010 goals of:

- Decrease the incidence of illness resulting from microbial or chemical contamination of food and drinking water.
- Reduce the incidence of illness and death from respiratory diseases related to or aggravated by environmental and occupational exposures.
- Reduce the occurrence of occupational injury, illness, and death by 30%.
- Reduce by 50% the occurrence of illness and death related to chemical and biological contaminants in the home.

Strategies of action will include: Continue education and awareness of lead screenings, beach testing, well water testing, and radon testing kits available through Oneida County Health Department, support and encourage businesses that are environmentally friendly, continue to support public and private partnerships to reduce health hazards, provide education to food establishments through the Oneida County Sanitarian Program, and continue support of Tobacco-Free Oneida County Coalition to increase local and state policies that address exposure to second hand smoke.

HIGH RISK SEXUAL BEHAVIOR

High-risk sexual behavior is behavior that makes someone more susceptible to infectious diseases that include syphilis, gonorrhea, Chlamydia, hepatitis B, human immunodeficiency virus (HIV), and hepatitis C or that result in unplanned pregnancy. Healthy People Healthy Oneida County Community Health Plan supports the Wisconsin's 2010 goals of:

- Decrease the proportion of Wisconsin high school youth who report ever having sexual intercourse to 30%.
- Reduce the percentage of unintended pregnancies to 30%.
- Promote responsible sexual behavior throughout the life span to prevent sexually transmitted infection, including HIV infection.

Strategies of action will include: Continue support and promotion of Oneida County Reproductive Health/Woman's Health Clinic, coordinate strategies to increase awareness and education of high risk sexual behavior through public and private partnerships, continue to support programs and services that address healthy birth outcomes for women, and encourage policy makers to support guidelines that reduce unintended pregnancies and prevent sexually transmitted infections.

APPENDIX 3

Community change and health improvement requires dedication and commitment among citizens, businesses, government, and community sectors. We recognize the strategies and success of this plan overlap and compliment many of our key community partner's missions and strategies; therefore, we have included links to a wide selection of Oneida County Partners that are dedicated to improving the health of Oneida County.

LOCAL ADDRESSES

Alzheimers Association Greater WI Chapter	www.alzqw.org
American Cancer Society	www.cancer.org
CESA 9	www.cesa9.k12.wi.us
Downtown Rhinelander Inc.	www.downtownrhinelander.com
Family and Child Learning Center	www.familyandchild.org
Family Resource Connection	www.familyresourceconnection.org
Grow North	www.grownorth.org
Human Service Center	www.thehumanservicecenter.org
Intercultural Leadership Initiative, Great Lakes Inter-Tribal Council, Inc.	www.ilileadership.org
Koller Behavioral Health	www.ministryhealth.org
Lakeland Union High School	www.luhs.k12.wi.us
Marshfield Clinic-Lakeland Center	http://marshfieldclinic.org/lakeland/
Ministry Behavioral Health	www.ministrybh.org
Ministry Health Care	www.ministryhealth.org
Minocqua Chamber of Commerce	www.minocqua.org
Minocqua-Hazelhurst-Lake Tomahawk District	www.mhlt.org
Nicolet College	www.nicoletcollege.edu
Oneida County Department of Aging	www.co.oneida.wi.gov
Oneida County Health Department	www.co.oneida.wi.gov
Oneida County Sheriff's Department	www.oneidasheriff.org
Rhinelander Chamber of Commerce	www.rhinelanderchamber.com
Rhinelander District Library	wvls.lib.wi.us/RhinelanderDistrictLibrary
Rhinelander School District	www.rhinelander.k12.wi.us
Three Lakes Chamber of Commerce	www.threelakes.com
Three Lakes School District	www.threelakesd.k12.wi.us
Tobacco-Free Oneida County Coalition	www.tfocc.net
Tri-County Council on Domestic Violence	www.tri-countycouncil.org
U.W. Extension	www.uwex.edu/ces
YMCA of the Northwoods	www.ymcaofthenorthwoods.org

STATE & NATIONAL ADDRESSES

Centers for Disease Control & Prevention

www.cdc.gov

Department of Health and Family Services

www.dhfs.state.wi.us

Department of Health and Human Services

www.wisconsin.gov

Guide to Community Preventive Services

www.thecommunityguide.org