Community Health Status Assessment

Froedtert Health Community Memorial Hospital

Community Health Needs Assessment
Summary of Findings

June 2011
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Current Initiatives in FY 2011

Community Outreach Steering Committee Priorities

- Chronic Disease Management and Access to Care
  - Community Outreach Health Clinic – Provide health care services to the uninsured and underinsured in the CMH service area.
  - Community Influenza Clinics – Continue flu clinics for the general public and subsidized flu clinics for the underinsured and uninsured in the CMH service area.
  - Colorectal Cancer Awareness – Educate all populations living in the CMH service area on prevention and early detection related to colorectal cancer.

- Youth Tobacco, Drug and Alcohol Use
  - Every 15 Minutes Program – Participate in teen re-enactment of alcohol related auto accident repercussions with Germantown & Menomonee Falls High Schools.
  - Parents Who Host Lose the Most – Participate in statewide initiative to discourage underage alcohol use in parental settings.
  - Drug Free Communities of Waukesha County – Continue to participate in the annual drug collection and awareness event to keep medications out of the hands of children and water supply and serve on the coalition.

- Obesity and Lack of Physical Activity
  - Get Me Fit Program – Promote healthy family living through physical activity, nutrition, education and other hands on activities to reduce obesity in the CMH service area.

- Other Community Benefit Actions
  - Community outreach grants - Support of local health and wellness related activities according to established grant criteria
  - Health Career Academy – Partner with local school districts in offering a summer health career program.
  - Community Outreach Health Clinic – Manage daily operations and future planning of primary care services provided to the uninsured and underinsured in the CMH service area.
  - Specialized Transportation – Manage the subsidized transportation program.
  - Community Events – Coordinate participation in community health fairs and first aid events.
  - Leadership Council Participation – Monitor and coordinate CMH Leadership Council participation in community benefit activities that support the Community Outreach Steering Committee priorities.
  - Community Benefit Reporting – Track and submit all CMH community benefit data on an annual basis for internal and external reporting entities.
**Other Initiatives in the Market**

*State of Wisconsin – Healthiest People 2020 Areas of Focus*

- Access to high quality health services
- Collaborative partnerships for community health improvement
- Diverse, sufficient and competent workforce that promotes and protects health
- Emergency preparedness, response and recovery
- Equitable, adequate, and stable public health funding
- Health literacy
- Public health capacity and quality
- Public health research and evaluation
- Systems to manage and share health information and knowledge
- Adequate, appropriate, and safe food and nutrition
- Alcohol and other drug use
- Chronic disease prevention and management
- Communicable disease prevention and control
- Environmental and occupational health
- Healthy growth and development
- Injury and violence
- Mental health
- Oral health
- Physical activity
- Reproductive and sexual health
- Tobacco use and exposure

*Waukesha County Community Health Center – Tentatively opening September 2012*

Sixteenth Street Community Health Center located in Milwaukee is creating a satellite Federally Qualified Health Center (FQHC) in downtown Waukesha. This Health Center will serve the under and uninsured in all of Waukesha County, providing a medical home to address all their health care needs. By partnering with an existing FQHC, the Center will be eligible for enhanced reimbursement, and will be able to afford to serve more patients.

*Waukesha County Community Dental Clinic*

The Waukesha County Community Dental Clinic which opened in May of 2008 provides dental health services and education for children and adults in Waukesha County who are uninsured or underinsured. The clinic provides affordable dental care to low income children and pregnant women, and emergency dental services to adults.

*Waukesha County Public Health Department*

In April 2011, the Waukesha County Community Health Improvement Plan Process (CHIPP) Steering Committee came together to provide essential leadership to inform and support the county’s community health improvement planning and process.

The CHIPP Steering Committee’s role will be to:

- Years 2011-2012: Actively participating in data assessments meetings to determine the health priorities in conjunction with other community stakeholders who may contribute additional data ideas;
• Years 2012-2015: Engaging organizations who are a natural fit for implementing CHIPP-identified areas for improvement and holding an interim evaluation session of progress toward key indicator achievements;
• Years 2014-2015: Documenting the evaluation results and/or intervention outcomes toward community health improvement and determining the methods of informing the greater community.

Healthy People Project of Washington County
The key objective of Healthy People Project of Washington County is to implement proven strategies to improve nutrition and increase fruit and vegetable consumption, increase the amount of physical activity and improve the overall health of Washington County.

Washington County Health Improvement Plan
Washington County Health Improvement Plan started with a base of the State Health Plan 2020 Health Wisconsin objectives. Washington County based their priorities on meeting the highest identified needs.

Priorities - These priorities are based on the State priority areas which are performing poorly in Washington County.
• Obesity: nutrition and physical activity
• Addictions: tobacco and alcohol and other drugs
• Emergency Preparedness: proactive measures

Initiatives
• Healthy Washington County Committee - focus on analysis of community health status and opportunities for improvement.
• Washington County Prevention Network - reduce youth alcohol, tobacco and other drug use and abuse.
• Community Coalitions: Germantown Youth Futures, Hartford Cares for Kids, Kewaskum Cares About Kids.
Research Reviewed

In developing the CMH community health needs assessment, we utilized various distinct sources of health related data:

- **The Community Health Survey** – The Waukesha and Washington County Community Health Surveys was conducted by JKV Research, LLC, between 2008 and 2009. The data cited in this report is compiled from several different county and community-based surveys.

- **Community Informant Interviews** – Members of the Community Memorial Hospital Community Outreach Steering Committee and the hospital’s Community Outreach Department interviewed 35 non-profit health and human services focused organizations for assessing the needs and service gaps as it pertains to the general population and the disadvantaged populations; i.e., people with disproportionate unmet health needs in the hospital’s primary service area.

- **School District of Menomonee Falls** - The Wisconsin Youth Risk Behavior Survey (YRBS) is conducted as part of a national effort by the U.S. Centers of Disease Control and Prevention to monitor health-risk behaviors of the nation’s high school students. The behaviors monitored by the Wisconsin YRBS include traffic safety; weapons and violence; suicide; tobacco use and other drug use; sexual behavior; and diet, nutrition and exercise.

- **Waukesha and Washington County Health Rankings** – The 2011 County Health Rankings developed by the University of Wisconsin Population Health Institute show Wisconsin residents that where they live matters to their health. The health of a community depends on many different factors – factors ranging form individual health behaviors, education and jobs, to quality of health care, to the environment. The rankings help community leaders see that where we live, learn, work, and play influences how healthy we are and how long we live.

- **US Census Bureau** – The 2010 US Census Demographic Dashboard Report for Community Memorial Hospital’s Service Area generated from DataBay and prepared by Froedtert Health Planning and Strategic Support Department.
Community Memorial Service Area - 2010

Below is a map of the service area used for the custom survey breakout of community need. The Primary Market is pictured in blue, and the Secondary Markets in orange.

<table>
<thead>
<tr>
<th>Service Area Population Distribution</th>
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</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>2010 Population</td>
</tr>
<tr>
<td>--------------------------------------</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>Secondary - East</td>
</tr>
<tr>
<td>Secondary - Southwest</td>
</tr>
<tr>
<td>CMH/SJH Shared Service Area</td>
</tr>
<tr>
<td>CMH Service Area Total</td>
</tr>
</tbody>
</table>

Source: DataBay
Revision Date: 9/2/10
### Population Information

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population Total</td>
<td>389,703</td>
<td>411,747</td>
<td>419,323</td>
</tr>
<tr>
<td>Growth From 2000</td>
<td></td>
<td>5.66%</td>
<td>7.60%</td>
</tr>
<tr>
<td>Growth From 2010</td>
<td></td>
<td>1.84%</td>
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### Household Income

<table>
<thead>
<tr>
<th>Income Level</th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
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<tbody>
<tr>
<td>A. Less than $15,000</td>
<td>9.07%</td>
<td>7.42%</td>
<td>6.99%</td>
</tr>
<tr>
<td>B. $15,000 to $24,999</td>
<td>9.49%</td>
<td>7.86%</td>
<td>7.35%</td>
</tr>
<tr>
<td>C. $25,000 to $34,999</td>
<td>11.26%</td>
<td>8.90%</td>
<td>8.29%</td>
</tr>
<tr>
<td>D. $35,000 to $49,999</td>
<td>16.04%</td>
<td>14.28%</td>
<td>13.71%</td>
</tr>
<tr>
<td>E. $50,000 to $74,999</td>
<td>22.79%</td>
<td>21.11%</td>
<td>20.34%</td>
</tr>
<tr>
<td>F. $75,000 to $99,999</td>
<td>14.19%</td>
<td>15.32%</td>
<td>15.30%</td>
</tr>
<tr>
<td>G. $100,000 to $149,999</td>
<td>10.55%</td>
<td>15.65%</td>
<td>16.93%</td>
</tr>
<tr>
<td>H. $150,000 to $249,999</td>
<td>4.55%</td>
<td>4.88%</td>
<td>5.82%</td>
</tr>
<tr>
<td>I. $250,000 to $499,999</td>
<td>1.36%</td>
<td>3.58%</td>
<td>4.07%</td>
</tr>
<tr>
<td>J. $500,000 or more</td>
<td>0.71%</td>
<td>1.00%</td>
<td>1.21%</td>
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### Gender

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>48.05%</td>
<td>48.56%</td>
<td>48.61%</td>
</tr>
<tr>
<td>Female</td>
<td>51.95%</td>
<td>51.44%</td>
<td>51.39%</td>
</tr>
</tbody>
</table>

### Population Total

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population Total</td>
<td>389,703</td>
<td>411,747</td>
<td>419,323</td>
</tr>
</tbody>
</table>

### Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 0 - 4</td>
<td>6.99%</td>
<td>6.83%</td>
<td>6.89%</td>
</tr>
<tr>
<td>Ages 05 - 09</td>
<td>7.86%</td>
<td>6.76%</td>
<td>6.63%</td>
</tr>
<tr>
<td>Ages 10 - 14</td>
<td>8.11%</td>
<td>6.99%</td>
<td>6.63%</td>
</tr>
<tr>
<td>Ages 15 - 17</td>
<td>4.54%</td>
<td>4.72%</td>
<td>4.38%</td>
</tr>
<tr>
<td>Ages 18 - 20</td>
<td>3.08%</td>
<td>3.55%</td>
<td>3.63%</td>
</tr>
<tr>
<td>Ages 21 - 24</td>
<td>3.56%</td>
<td>4.79%</td>
<td>5.18%</td>
</tr>
<tr>
<td>Ages 25 - 34</td>
<td>12.19%</td>
<td>10.68%</td>
<td>11.49%</td>
</tr>
<tr>
<td>Ages 35 - 44</td>
<td>16.99%</td>
<td>12.53%</td>
<td>10.51%</td>
</tr>
<tr>
<td>Ages 45 - 49</td>
<td>7.82%</td>
<td>7.96%</td>
<td>6.58%</td>
</tr>
<tr>
<td>Ages 50 - 54</td>
<td>6.57%</td>
<td>8.06%</td>
<td>7.79%</td>
</tr>
<tr>
<td>Ages 55 - 59</td>
<td>5.00%</td>
<td>7.17%</td>
<td>7.77%</td>
</tr>
<tr>
<td>Ages 60 - 64</td>
<td>3.97%</td>
<td>5.77%</td>
<td>6.71%</td>
</tr>
<tr>
<td>Ages 65 - 74</td>
<td>7.02%</td>
<td>7.53%</td>
<td>8.96%</td>
</tr>
<tr>
<td>Ages 75 - 84</td>
<td>4.61%</td>
<td>4.69%</td>
<td>4.73%</td>
</tr>
<tr>
<td>Ages 85+</td>
<td>1.70%</td>
<td>1.97%</td>
<td>2.20%</td>
</tr>
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</table>

### Education

<table>
<thead>
<tr>
<th>Level</th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Less than 9th</td>
<td>3.24%</td>
<td>2.33%</td>
<td>2.34%</td>
</tr>
<tr>
<td>B. Some High School</td>
<td>8.20%</td>
<td>5.55%</td>
<td>5.58%</td>
</tr>
<tr>
<td>C. High School Graduate</td>
<td>28.61%</td>
<td>28.04%</td>
<td>28.18%</td>
</tr>
<tr>
<td>D. Some College</td>
<td>22.41%</td>
<td>22.18%</td>
<td>22.18%</td>
</tr>
<tr>
<td>E. Associate Degree</td>
<td>1.13%</td>
<td>1.08%</td>
<td>1.06%</td>
</tr>
<tr>
<td>F. Bachelor's Degree</td>
<td>20.97%</td>
<td>22.95%</td>
<td>22.86%</td>
</tr>
<tr>
<td>G. Graduate Degree</td>
<td>6.38%</td>
<td>7.86%</td>
<td>7.79%</td>
</tr>
<tr>
<td>H. Professional Degree</td>
<td>2.25%</td>
<td>2.34%</td>
<td>2.33%</td>
</tr>
<tr>
<td>I. Doctorate Degree</td>
<td>0.83%</td>
<td>1.08%</td>
<td>1.06%</td>
</tr>
</tbody>
</table>

### Adult Total

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Households</td>
<td>149,346</td>
<td>161,428</td>
<td>165,839</td>
</tr>
</tbody>
</table>

### Occupation 16+

<table>
<thead>
<tr>
<th>Occupation</th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accomm Food Services</td>
<td>4.24%</td>
<td>4.82%</td>
<td>4.83%</td>
</tr>
<tr>
<td>Agriculture</td>
<td>0.70%</td>
<td>0.67%</td>
<td>0.69%</td>
</tr>
<tr>
<td>Arts</td>
<td>1.26%</td>
<td>1.63%</td>
<td>1.63%</td>
</tr>
<tr>
<td>Business Management</td>
<td>3.20%</td>
<td>3.70%</td>
<td>3.70%</td>
</tr>
<tr>
<td>Construction</td>
<td>5.09%</td>
<td>5.54%</td>
<td>5.56%</td>
</tr>
<tr>
<td>Educational Services</td>
<td>7.96%</td>
<td>7.48%</td>
<td>7.45%</td>
</tr>
<tr>
<td>Finance</td>
<td>7.77%</td>
<td>8.47%</td>
<td>8.45%</td>
</tr>
</tbody>
</table>

### Race

<table>
<thead>
<tr>
<th>Race</th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>14.39%</td>
<td>16.61%</td>
<td>17.62%</td>
</tr>
<tr>
<td>Asian</td>
<td>2.16%</td>
<td>3.11%</td>
<td>3.59%</td>
</tr>
<tr>
<td>Native American</td>
<td>0.28%</td>
<td>0.34%</td>
<td>0.38%</td>
</tr>
<tr>
<td>Other Race</td>
<td>0.58%</td>
<td>0.83%</td>
<td>0.97%</td>
</tr>
<tr>
<td>Pacific Islander (Hawaiian)</td>
<td>0.03%</td>
<td>0.05%</td>
<td>0.06%</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>1.32%</td>
<td>1.79%</td>
<td>2.03%</td>
</tr>
<tr>
<td>White</td>
<td>81.23%</td>
<td>77.28%</td>
<td>75.35%</td>
</tr>
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</table>

### Ethnicity

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>7,237</td>
<td>11,621</td>
<td>14,081</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>382,466</td>
<td>400,126</td>
<td>405,242</td>
</tr>
<tr>
<td>Population Total</td>
<td>389,703</td>
<td>411,747</td>
<td>419,323</td>
</tr>
</tbody>
</table>

### Workforce Total

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Total</td>
<td>196,014</td>
<td>214,578</td>
<td>220,577</td>
</tr>
</tbody>
</table>
Community Health Status Assessment

Community Health Needs Assessment Results

The following needs assessment findings are a compilation of six different data reports and interviews with 35 different community informants throughout Waukesha and Washington Counties. This needs assessment is based upon available statistical data as well as anecdotal information from knowledgeable community informants. Since the assessment was prepared for guiding the CMH community outreach programs, the investigation focused on assessing the needs and service gaps as it pertains to the general population and the disadvantaged populations, i.e., people with disproportionate unmet health needs in the hospital’s primary service area.

Primary Data Findings from Informant Interviews

Access to Primary and Specialty Care/Chronic Disease Management and Support:

20.7% of the community informants interviewed indicated this as an important priority in our service area.

The Community Memorial Hospital service area is fortunate to have a broad array of primary and specialty care providers for the general population, our “safety net” medical clinics struggle to find certain medical specialists to care for the disadvantaged. Well intentioned medical specialists run the risk of being over-run with referrals and some medical specialties are almost totally unavailable for the underserved. Patients in our service area often must overcome enormous odds to get service. The following were said to be leading factors in this issue:

- Access for Medicaid patients. Many primary and specialty care physicians are not taking new patients. Physicians are capping the amount of Medicaid patients seen in their clinics.
- Patients who become enrolled in Medicaid can’t find physicians to accept them. Once enrolled in Medicaid those individuals no longer can access services by the free clinics in the area and often rely on emergency care or prolonging care.
- Post-operative charity care patients are often dropped by their physician soon after the procedure leaving them no where to go except area free clinics. Free clinics aren’t trained nor have the appropriate resources available to fully monitor/treat these individuals.

Mental Health Services:

15.8% of the community informants interviewed ranked this as an important issue in our service area.

The plea for more timely and affordable mental health services rings out from all sectors of the Community Memorial Hospital service area. Many of our community informants indicated they are seeing more individuals suffering from depression and anxiety. The following were said to be leading factors in contributing to the high incidence of mental health and addiction:

- Area Police/Fire/EMS Departments are seeing more mental health commitments that require multiple calls and are very time intensive. Individuals are either taken to area Emergency Departments only to be discharged or taken to jail with no availability for mental health evaluation. There is a great need for a mobile crisis intervention unit especially on weekends and evenings to respond to these situations.
- Access to mental health providers and treatment especially for Medicaid, uninsured and underinsured populations. It can take between one and three weeks for intake assessment and up to another three months for a person to get an appointment with a psychiatrist at a public health facility or private medical clinic.
- Severe persistent mental illness management and support with persons suffering from Schizophrenia, Bi-polar Disorder, Attention Deficit Disorder and Addiction with Alcohol and Other Drug Abuse going on at the same time.
**Prevention and Wellness:**
13.8% of the community informants interviewed indicated this as an important priority in our service area.

The need for education and outreach around prevention and early detection of disease in our service area continues to warrant our attention. Obesity, high blood pressure and high cholesterol continues to be high factors in the incidence of poor health for the general/disadvantaged populations. Waukesha County data shows statistically significant increases in all three of these factors. Effective change in people’s lifestyles is a difficult task but negative trends in these areas warrant our continued attention. The following were said to be the leading causes contributing to this trend:

- Children are following the unhealthy habits of their parents. Working families are too busy to prepare healthy meals so consequently they tend to feed their family convenience foods and fast food.
- Many community informants indicated they would like to see more health screenings, nutrition education and fitness outreach in area free clinics, food pantries and non-profit service agencies. Additionally, when screenings are offered to the underinsured/uninsured population and something is detected, often times it’s difficult to find medical services available to treat or manage the problem.
- Parents’ fears about letting their children play outside. Additionally the need for more sidewalks so kids can access parks, YMCA’s, and other outdoor recreational activity areas safely.

**Alcohol, Drug and Tobacco Abuse:**
14.8% of the community informants interviewed indicated this as an important priority in our service area.

Alcohol, drug and tobacco usage continues to be a critical issue in both Waukesha and Washington counties. Use of prescription drugs and opiates continues to grow both in the CMH service area. Youth risk prevention efforts around drugs, tobacco and alcohol usage continue to be successful but area school districts indicate that small percentages of middle and high school students routinely use or experiment with these products. More outreach is needed for those people who don’t think they have an addiction problem or have trouble accessing rehabilitative services. The following were said to be the leading causes contributing to this trend:

- Area police and fire departments have indicated increases in overdoses and overdose deaths related to heroin and prescription drug abuse in 2010 and 2011.
- Use of prescription drugs is a growing problem especially for young adults 18 – 30 years of age. Community informants indicated that many physicians in the area are overprescribing pain medications with little to no follow through. Drugs such as Methadone, Oxycontin and Suboxone are contributing to this problem.
- Alcohol and Other Drug Abuse – no long term help available and difficult for individuals with little or no insurance to access in-patient/outpatient addiction treatment.
Dental Services:
12.8% of the community informants interviewed indicated this as an important priority in our service area.

Low income adults in Waukesha County have virtually no convenient and affordable dental care resources other than emergency care. Consequently because of this issue, adults often have some or all of their teeth extracted because routine dental care isn’t available. In Washington County, access for low-income children and adult dental care is greatly needed and warrant attention. The following were said to be leading factors in this issue in both Waukesha and Washington Counties:

- Limited transportation resources available for low-income Menomonee Falls/Sussex area residents to access the Waukesha County Community Dental Clinic or the St Joseph’s Dental Clinic both located in downtown Waukesha.
- Difficult for adults on Medicaid or the uninsured to access dental services in both Washington and Waukesha Counties.
- No dental safety net for uninsured/underinsured in Washington County compared to Waukesha and Milwaukee Counties.

Transportation:
15.8% of the community informants interviewed ranked this an important issue in our service area.

Waukesha County has a wide variety of public, private and subsidized transportation services available, but a resident’s geographic location, age, mobility and income may significantly limit what transportation services are available in the CMH service area. Several non-profit/subsidized transportation companies exist within our general service area and those organizations do a wonderful job providing transportation to residents in need, however, demand out weighs the availability of these services. Area residents seeking transportation for non-hospital primary or specialty care, free clinic services, grocery shopping and other basic needs either have to wait a long period of time or put off going anywhere completely. The following were said to be major factors around transportation needs in the CMH service area:

- Affordable/accessible transportation for rural Waukesha and Washington County residents needing medical services from county health departments, free clinics, primary or specialty care clinics, food pantries and dental clinics. Some transportation companies can’t cross county lines or able to leave the city/town/village where services are provided.
- Lack of transportation services available for disabled 40 – 60 year olds.

Other:
Several of our informants have called attention to other important health or community issues affecting the general and underserved populations residing in the CMH service area. These issues include:

- Health literacy issues, especially for the underinsured and uninsured.
- Engaging local primary care physicians to become engaged in general community health initiatives.
- Lack of sidewalks and safe intersections throughout the CMH service area.
- Many non-profit health and human service agencies indicated that they don’t have enough bilingual staff or volunteers to appropriately communicate with their Hispanic clients.
Secondary Data Research Findings

Health and Wellness
Self Assessment
When asked to assess their overall health status in Waukesha County:
- 68% of the respondents assessed their health as very good or excellent
- 26% responded that it was fair or poor

Insurance coverage
- 8% of Waukesha County residents have no current health care insurance
- 9% of Washington County residents have no current health care insurance

Routine checkup
- 86% of Waukesha County residents had received a routine checkup within the past two years

Chronic health condition management
- 6% of Waukesha County residents have been told they have diabetes
- 24% of Waukesha County residents have been told that they have high blood cholesterol
- 22% of Waukesha County residents have been told that they have high blood pressure

Healthy Lifestyle
Nutrition
- 68% of Waukesha County residents consumed 2 servings of fruit per day
- 30% of Waukesha County residents consumed 3 or more servings of vegetables per day

Exercise
- 41% of Waukesha County residents exercised 5 times per week for 30 minutes
- 33% of Waukesha County residents exercised 3 times per week for 20 minutes
- 23% of Menomonee Falls School District students (6 – 12 grades) reported they are engaged in physical activity for 60 minutes per day on one or more days per week

Obesity
- 27% of Waukesha County residents have a Body Mass Index (BMI) greater than 30%
- 27% of Washington County residents have a Body Mass Index (BMI) greater than 30%
- 50% of Menomonee Falls School District students (6 – 12 grades) reported they are either trying to lose weight or maintain their weight

Mental Health
Depression
- 3% of Waukesha County residents indicated feeling sad or depressed within the past 30 days
- 5% of Waukesha County residents indicated feeling depressed nearly always or always
- 19% of Menomonee Falls School District students (6 – 12 grades) reported they stopped doing their usual activities because they felt sad or helpless
Suicide
- 4% of Waukesha County residents stated that in the last year they felt so overwhelmed that they considered suicide in the past year
- 7% of Menomonee Falls School District students (6 – 12 grades) reported they attempted suicide in the past 12 months
- 21% of Menomonee Falls School District students (6 – 12 grades) reported they attempted suicide needed treatment from a doctor or nurse for an injury, poisoning or overdose

Substance Abuse
Alcohol consumption
- 21% of Waukesha County residents consume 4 to 5 alcoholic beverages on a single occasion in the past 30 days
- 25% of Washington County residents consume 4 to 5 alcoholic beverages on a single occasion in the past 30 days
- 53% of Menomonee Falls School District students (6 – 12 grades) reported not having even one drink during the past 30 days
- 76% of Menomonee Falls School District students (6 – 12 grades) reported not drinking 5 drinks in a row, within a couple hours.

Tobacco
- 16% of Waukesha County residents smoke cigarettes every day or most days
- 19% of Waukesha County residents smoke cigarettes every day or most days
- 70% of Menomonee Falls School District students (6 – 12 grades) reported they have never smoked a cigarette in their life

Illegal Drugs
- 5.6% of Menomonee Falls School District students (6 – 12 grades) reported they used cocaine, crack or freebase drugs
- 24% of Menomonee Falls School District students (6 – 12 grades) reported they currently use marijuana
Recommendation

The recommendation of the Community Health Needs Assessment Team is to continue focusing on the Community Memorial Hospital primary service area with emphasis on:

1. Access to Primary or Specialty Care
2. Chronic Disease Management
3. Prevention and Wellness
4. Mental Health

These four areas are aligned with Community Memorial Hospital’s strategic priorities, State of Wisconsin 2020 goals and Waukesha and Washington Counties Community Health Improvement Plans.

Community Memorial Hospital can’t address and fix these issues on its own. Partnerships and collaboration with community non-profit health and human service agencies, county public health departments, schools, physicians and other community advocates. Also, it is crucial that CMH Leadership Council becomes more actively involved in targeted community health outreach efforts.
Community Health Needs Assessment Sources

Community Interview Sites:
Addiction Resource Council of Waukesha County – Claudia Roska, Executive Director
Albrecht Free Clinic – Jenny Zaskowski, Executive Director
Community Outreach Health Clinic at Community Memorial Hospital – Linda Smith, APNP
Falls Area Community Services – Kathy Wodushek, Executive Director
Germantown Area Chamber of Commerce – Lynn Grgich, Executive Director
Village of Germantown Fire Department – Mathew Karpinski, Captain
Germantown Police Department – Peter Hoell, Police Chief
Germantown Park & Recreation Department – Brett Altegrott, Park and Recreation Director
Germantown School District – Cindy Dieringer, District Nurse
Gloria Dei Lutheran Church – Julie Pekarske, Parish Nurse
Hartford Jt 1 School District – Joan Schultz, Pupil Service Administrator
Hartford Parks and Recreation Department – Mike Herman, Director
Hope Network Inc. – Laura Hensel, Director
Interfaith Caregivers of Washington County – Debbie Genthe, Executive Director
Interfaith Senior Programs Waukesha County – Margaret Cory, Mobility Manager
Menomonee Falls Chamber of Commerce – Sue Jeskewitz, Executive Director
Menomonee Falls Community Education & Recreation Department – Joan Erickson, Director
Menomonee Falls Fire Department – Jeff Hevey, Fire Chief
Menomonee Falls Police Department – Anna Ruzinski, Police Chief
Menomonee Falls School District – Julie Italiano-Thomas, District Nurse
Pregnancy Support Connection – Nancy Major, Executive Director
St. Boniface Food Pantry – Charlene Matson, Coordinator
St. Paul’s United Church of Christ – Laura Blanco, Pastor
Stillwaters Cancer Support Services – Theresa Reagan, Executive Director
Sussex Area Chamber of Commerce – Katriyn Wagner, Executive Director
Sussex Area Outreach Services – Aaron Schmalze, Executive Director
Sussex Hamilton School District – Kristin Hasbrook, Student Assistance Program Coordinator
Tri-County YMCA in Menomonee Falls – Geoff Mertens, Center Executive
University of Wisconsin Extension Washington County – Marma McIntee, Family Living Coordinator
Washington County Mental Health Department – Jim Strachota, Director
Washington County Public Health Department – Linda Walter, Health Officer
Waukesha County Community Dental Clinic – Renee Ramirez, Executive Director
Waukesha County Mental Health Department – Mike DeMares - Manager
Waukesha County Public Health Department – CHIPP Subcommittee

Data Sources:
2011 Waukesha County Health Ranking – (University of Wisconsin Population Health Institute)
2011 Washington County Health Ranking – (University of Wisconsin Population Health Institute)
Data Sources Continued:
Froedtert Health Community Memorial Hospital Demographic Dashboard 2010 Census Report – (Froedtert Health Planning and Strategic Support Department)
Community Outreach Health Clinic Statistical Reports 2003 – 2011 (Froedtert Health Finance Department)
2009 School District of Menomonee Falls Youth Risk Behavior Survey
2009 Waukesha County Community Health Survey – (Aurora/Center for Urban Population Health and Waukesha County Public Health)
2010 Washington County Community Health & Emergency Preparedness Survey Report – (JKV Research for Washington County Health Department)