

# Fillmore-Houston Community Health Service Community Health Improvement Plan 2015



**Public Health**  
Prevent. Promote. Protect.

Prepared by the Fillmore-Houston Quality Improvement Council

Implemented: December 23, 2014

Reviewed and Revised:

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Fillmore-Houston CHS Administrator:

Fillmore-Houston Joint Board of Health Chairperson:

## **Organization Jurisdiction**

The Fillmore-Houston Community Health Service (FHCHS) covers the entire areas of Fillmore and Houston County. Fillmore and Houston County are located in the very Southeast corner of Minnesota bordering on Wisconsin and Iowa. This area is 1,413.36 square miles and is comprised of 21 cities and 42 townships.

The FHCHS service area encompasses approximately 16,336 households. U.S. Census Data estimates from 2013 indicated that the total population for both counties was 39,634 people with Fillmore County having 20,835 residents and Houston County having 18,799 residents. The population of the Fillmore-Houston CHS services is predominantly white followed by people who define themselves as two or more races. Fillmore County also has and provides services to two Old Order Amish communities.

Of the Minnesota population over age 25, 92.1% are high school graduates and 32.6% hold a bachelor degree or higher. Exploration of the U.S. Census Data estimates from 2009-2013 identified that 89.3% of Fillmore County and 91.9% of Houston County residents over age 25 are high school graduates. In Fillmore County 18.4% of adults over age 25 have a bachelor degree or above as compared to 22.7% in Houston County.

Employment, income, and poverty are interrelated economic characteristics that play a role in both individual and community health. Effective October 2014, the unadjusted Minnesota unemployment rate was 3.2% while the Fillmore and Houston County unemployment rates were respectively 2.9% and 3.1%. Minnesota 2013 per capita income based upon U.S. Census estimates was \$30,913. The Fillmore County per capita income was \$25,249 and the Houston County per capita income was \$26,450. The percentage of people whose income was below the poverty level in the past twelve months in Minnesota was 11.5%. Approximately 12.1% of Fillmore County and 10.9% Houston County reported living in poverty in the past twelve months. The impact of poverty within the FHCHS is greatest among children of single parent households.

## **Health Equity**

Health equity is the state in which all people have the opportunity to be the healthiest they can be. As defined by the Minnesota Department of Health "health inequity is a difference in health status between more and less social and economically advantaged groups, caused by systemic differences in social conditions and process that effectively determine health. Health inequities are avoidable, unjust, and therefore actionable." The health inequities identified through the community health improvement process were age, socio-economic status, and culture. The social determinants of health playing a role in these inequities are job opportunities, wages, transportation options, housing, access to health care, and the availability of social support networks. Social determinants of health play a role in all three priorities selected through the Community Health Improvement Planning Process and will therefore be addressed during Community Health Improvement Plan strategy implementation.

## **Community Health Improvement Planning Process**

The Community Health Assessment and Community Health Improvement Process align with Public Health Accreditation Standard (PHAB) Standard 5.2. The process used to complete community health improvement planning for the Fillmore-Houston CHS was derived from Community Commons and Mobilizing for Action through Planning and Partnerships (MAPP). This process involved the following three steps.

1. Data Collection and Interpretation
2. Identification, Prioritization, and Selection of Health Needs and Assets
3. Asset Identification and Strategy Implementation Development

## **Community Stakeholders**

Fillmore and Houston County engaged both individuals and organizations in the prioritization process for identifying community health needs. Individual citizens participated in the process by completing a community health assessment while organizations were involved in the prioritization of community health needs, asset identification, and strategy development. Please see Appendix A for a comprehensive listing of participating organizations.

## **Data Collection and Interpretation**

Fillmore and Houston County developed and implemented a joint community health needs assessment process that was completed from February 2013 to January 2014. The assessment gathered information from individual participants regarding perceptions of community health, personal health behaviors, demographics, public health services, and the top three public health issues that should be addressed over the next five years. This survey was randomly sent to 2,400 FHCHS residents with 919 assessments or 38.3% being included in final analysis.

A summary of the health issues that survey participants felt had gotten worse, personal health behaviors, and the top health issues to address in the next five years are provided on Table 1 through Table 3. A full version of the community health assessment and its associated results are provided as Appendix B. Final Community Health Needs Assessment results were presented to the Fillmore-Houston Joint Board of Health on March 25, 2014.

Table 1. Community Health Assessment Data: Perception Health Issue Has Gotten Worse

	<b>Fillmore</b>	<b>Houston</b>
1	Financial Stress (59.9%)	Distracted Driving (70.2%)
2	Distracted Driving (59.1%)	Financial Stress (65.4%)
3	Healthy Weight (41.1%)	Drug Use (49.9%)
4	Physical Inactivity (36.9%)	Healthy Weight (48.7%)
5	Bullying (36.3%)	Parenting Skills (47.5%)
6	Parenting Skills (35%)	Physical Inactivity (46.6%)
7	Drug Use (32.6%)	Nuisances (46.5%)
8	Disaster Frequency (31.8%)	Bullying (40.6%)
9	Health Insurance Access (27%)	Disaster Frequency (38.1%)
10	Vectorborne Disease/Depression (26%)	Depression (36.8%)

Table 2. Community Health Assessment Data: Personal Health Behaviors

	<b>Fillmore</b>	<b>Houston</b>
1	Lack Preparedness Kit (63.3%)	Lack Preparedness Kit (61.5%)
2	Distracted Driving/Phone Use (56.2%)	Technology Use/Sedentary (55.7%)
3	Technology Use/Sedentary (56.2%)	Distracted Driving/Phone Use (54.8%)
4	Chronic Health Condition (52.3%)	Chronic Health Condition (47.1%)
5	Lack Preparedness Plan (45.7%)	Lack Preparedness Plan (47%)
6	Health Condition > 12 Months (45%)	Not Using PA Facilities (45.3%)
7	Poor Sidewalks (40.5%)	Health Condition > 12 Months (43.9%)
8	Low Fruit Intake (40.4%)	Low Fruit Intake (41.7%)
9	Not Using PA Facilities (40.1%)	Poor Sidewalks (37.3%)
10	Low Vegetable Intake (33.7%)	Low Vegetable/Soft Drink Intake (36.4%)

Table 3. Community Health Assessment Data: Top Three Public Health Issues

	<b>Fillmore</b>	<b>Houston</b>
1	Health Care Access	Health Care Access
2	Obesity	Alcohol, Tobacco, and Other Drugs
3	Alcohol, Tobacco and Other Drugs	Obesity
4	Environment	Environment
5	Mental Health	Mental Health

### Community Engagement

Upon completion of the community health needs assessment, additional data sources were gathered from local, state, and national resources to prepare for the prioritization process.

Fillmore County Public Health established three public meetings to address prioritization of community health needs and identify assets. Community partners were provided with either email or mailed invitations requesting their presence at the “Healthy Bluff Country Summit” event. Partners sent this invitation included municipal government, schools, worksites,

churches, childcare settings, non-profit organizations, health care organizations, long-term care providers, media, and MDH representatives.

Two meetings were held on April 23, 2014 and one on April 25, 2014 to address health priorities within Fillmore County. All three meetings were held using the same methodology which included providing information about Fillmore County Public Health, the Local Public Health Assessment and Planning Process, six Areas of Public Health Responsibility, and data for Fillmore County from local, state, and national sources. A total of 36 organizations participated in the Fillmore County prioritization process.

Houston County Public Health held four public meetings, one in each of the four major communities of the county: La Crescent, Caledonia, Houston, and Spring Grove. Invitations were sent via both email and mail. Meetings were held on April 16, 25, 28 and May 12, 2014 and they provided information about Houston County Public Health, the Local Public Health Assessment and Planning Process, six Areas of Public Health Responsibility, and data for Houston County from local, state, and national sources. A total of twenty-four organizations participated in the Houston County prioritization process.

### **Prioritization Process**

In Fillmore County, participants were placed into six groups and then guided through a prioritization process for twenty health topics. Groups were provided with a fact sheet about each health topic that contained local community health needs assessment data and other local, state, and national data points. Groups evaluated each of the twenty health topics individually based upon the size, seriousness, feasibility, and fairness criteria. A total score was then assigned to each health topic and the priority rankings for all twenty topics shared at the end of each meeting. Groups then proceeded to identify assets and resources within the community to aid in addressing the top ten health priorities. Final evaluation scores from all three meetings identified the top ten priorities of community members which are provided on Table 4.

In Houston County, participants were invited to participate in a casual conversation regarding their concerns for Houston County. As participants verbalized their concerns, a Public Health staff member recorded all communicated concerns on white board in front of the room. After all the concerns were listed and written out in front of the group, participants were asked to rank their priorities. Priorities for all four groups were tabulated together to create a top ten list of priorities which are provided on Table 4.

Table 4. Community Health Assessment Data: Top Three Public Health Issues Prioritization Meeting Data

	<b>Fillmore</b>	<b>Houston</b>
1	Nutrition	Active Living/Physical Activity
2	Vaccine Preventable Diseases	Mental Health
3	Traffic Safety	Healthy Eating/Nutrition
4	Water Quality	Access to Health Care (Including Dental)
5	Chronic Healthy Conditions	Environmental Health
6	Family Planning	Alcohol, Tobacco, and Other Drugs
7	Physical Activity	Chronic Health Conditions
8	Alcohol	Traffic Safety
9	Tobacco	Family Services
10	Access to Health Services	Adequate Safe, Low-Income Housing

### **Health Priority Justification**

The Fillmore-Houston CHS convened a workgroup to review internal and external data resources and prioritization results from both the community health needs assessment and community prioritization meeting process. The work group selected three health priorities which are Access to Health Care, Active Living, and Healthy Eating. Selection of these priorities is consistently supported by community health assessment results, community prioritization results, and other reliable data sources. All three of the FHCHS priorities align with Health Minnesota 2020 Statewide Health Improvement Framework and the four National Prevention Strategic Directions. Progress Indicator and Benchmark Resources for this plan are located in Appendix F.

### **Priority 1: Access to Health Care**

In the 2013 FHCHS Community Health Assessment, 93.7% of Fillmore and Houston County residents reported having health insurance or medical coverage. U.S. Census estimates suggest 10.7% of Fillmore and 7.7% of Houston County residents have no health insurance coverage. Reasons cited by residents as barriers for not getting medical and dental care included high cost, inadequate coverage, fear, and provider unwillingness to accept specific health insurance coverage.

Fillmore and Houston County adults were also surveyed about their access to and utilization of health care services. About 78.2% reported having a physical exam and 76.5% a dental exam within the last twelve months. Roughly 50% have health condition that requires them to take medication. The 2013 Minnesota Student Survey conducted with 5<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> graders indicated that between 52% and 79% of Fillmore and Houston County youth saw a medical professional in the last year for a check-up of physical exam. Between 72% and 91% of these same youth saw a dentist or hygienist during the last year for a cleaning and exam.

Access to quality health care services plays a significant role in creating health equity and maintaining long-term quality of life. Barriers to care such as lack of providers or services, lack of insurance coverage, inadequate coverage, high cost, and transportation all contribute to unmet health needs, prolonged poor health, and increased risk for hospitalizations. Strategies for removing these barriers include assisting clients with finding and enrolling in insurance, encouraging preventative screenings, connecting providers to better serve clients through integrated services and referrals, and addressing gaps in services through new and existing programs and partnerships. The strategies identified for addressing Access to Health Care in Fillmore and Houston County are identified within Appendix C.

**Priority 2: Active Living**

The Physical Activity Guidelines for Americans recommends that adults obtain 150 minutes of physical activity each week and youth obtain at least one hour of activity each day. However, nationally 40% of adults and 80% of adolescents do not reach these recommended activity levels. In Fillmore and Houston County, roughly 30% of adults participating in the community health assessment reported participating in less than 150 minutes of physical activity each week. Analysis of the 2013 Minnesota Student Survey found a range between 1% and 13% of Fillmore and Houston County youth have not been physically active for more than 60 minutes in the last seven days (See Table 5).

Table 5: Percentage of Fillmore and Houston County youth who reported having no days in the last seven days in which they were physically active for more 60 minutes.

	5 <sup>th</sup> Grade		8 <sup>th</sup> Grade		9 <sup>th</sup> Grade		11 <sup>th</sup> Grade	
	Male	Female	Male	Female	Male	Female	Male	Female
Fillmore	8%	7%	1%	1%	2%	2%	6%	13%
Houston	11%	11%	5%	7%	8%	8%	7%	7%

Regular physical activity reduces the risk of chronic health conditions, improves mental health, and is key to long-term balance, strength, flexibility, and weight management. Facilities or infrastructure that promote and encourage physical activity include playgrounds, parks, trails, and community buildings, and worksites. Currently, 57.3% of Fillmore and Houston County residents use these facilities to get physical activity. Sidewalk access and availability are a key factor in promoting physical activity for all members of the community. Adults completing the Fillmore-Houston CHS Community Health Assessment indicated that 61.1% of sidewalks are in good condition and easy to walk. Everyone deserves accessible and safe environments in which they can participate in physical activity while working, playing, and living therefore active transportation and recreation were selected as a priority area. Details regarding the associated strategies for Active Living Priority may be reviewed in Appendix D.

### Priority 3: Healthy Eating

It is estimated that 15% of households experience food insecurity which means their access to adequate food is limited by lack of money or other resources and this is linked increased risk for obesity and other preventable chronic diseases. According to the USDA Food Access Research Atlas, the Southwest corner of Fillmore County has a significant number of households that have low vehicle access or are more than twenty miles from the nearest supermarket which puts them at risk for food insecurity.

Results from the Fillmore-Houston CHS Community Assessment indicated that 59% of adults are consuming the recommended servings of fruit and 65% are eating the recommended servings of vegetables most days of the week.

Exploration of the Minnesota Student Survey conducted in 2013 yield the following results regarding youth fruit and vegetable consumption.

Table 6: Percentage of Fillmore and Houston County youth who reported not eating fruit in the last seven days.

	5 <sup>th</sup> Grade		8 <sup>th</sup> Grade		9 <sup>th</sup> Grade		11 <sup>th</sup> Grade	
	Male	Female	Male	Female	Male	Female	Male	Female
Fillmore	9%	0%	10%	5%	16%	7%	10%	16%
Houston	10%	7%	6%	5%	10%	5%	7%	7%

Table 7: Percentage of Fillmore and Houston County youth who reported not eating vegetables in the last seven days.

	5 <sup>th</sup> Grade		8 <sup>th</sup> Grade		9 <sup>th</sup> Grade		11 <sup>th</sup> Grade	
	Male	Female	Male	Female	Male	Female	Male	Female
Fillmore	17%	9%	11%	5%	21%	7%	13%	9%
Houston	15%	11%	6%	8%	20%	7%	5%	5%

Factors that influence healthy eating include knowledge, having access to healthy, safe and affordable food, and being surrounded by a culture that supports healthy food consumption. Strategies will be implemented to address these factors and are described under Appendix E

**Appendix A: Fillmore-Houston CHS Community Health Improvement Plan Stakeholders**

Fillmore County Organizations	Houston County Organizations
Chatfield School District	Bulman Insurance
City of Chatfield	Caledonia Rotary Club
City of Peterson	Caledonia School District
City of Preston	City of Caledonia
City of Rushford	City of Houston
Dietitian on Wheels	City of La Crescent
Fillmore Central School District	City of Spring Grove
Fillmore County Commissioners	Eitzen State Bank
Fillmore County Public Health	Gundersen Health System
Fillmore County Social Services	Houston County Attorney’s Office
Fillmore County SWCD	Houston County Commissioners
Fillmore County Veteran Services	Houston County News
Fountain Fire Department	Houston County Public Health
Good Samaritan Homecare	Houston County Public Health Advisory Board
Gundersen Harmony Care Center	Houston Public School District
Gundersen Health Harmony Clinic	La Crescent Chamber of Commerce
Harmony Lions	La Crescent-Hokah School District
Help Our Neighbors	La Crosse Outdoor Recreation Alliance
Kingsland Community Education	Licensed Massage Therapist
Kwik Trip	Neighbors in Action – La Crescent
Lanesboro Ambulance	Spring Grove Communications
Lanesboro Child Care Center	Spring Grove School District
Minnesota Department of Health	Spring Grove Swim Center
Mrs. Dorothy’s Daycare	University of Wisconsin – La Crosse
Norway Township	
Olmsted Medical Center	
Pilot Mound Township	
POET	
Republican-Leader Newspaper	
Rushford Ambulance	
Rushford Fire Department	
Rushford-Peterson School District	
Semcac and HeadStart	
Spring Valley Senior Living	
St. Patrick’s Catholic Church	
Zumbro Valley Mental Health Center	

## Appendix B: Fillmore-Houston Community Health Assessment

How has your community changed over the past year? A specific area may have gotten worse, stayed the same or gotten better. Please mark only one answer per line.

### Emergency Preparedness

<b>In the past year, . . .</b>	<b>Gotten Worse</b>	<b>Stayed the Same</b>	<b>Gotten Better</b>
The frequency of natural disasters like drought, floods, or tornadoes.	34.9%	59.6%	5.5%
The frequency of disease outbreaks.	7.5%	81.7%	10.8%
The number of people affected by disasters.	31.8%	61.8%	6.4%
The number of families who have plans and kits in order to prepare for disasters.	5.7%	78.2%	16.1%

### Environmental Health

<b>In the past year, . . .</b>	<b>Gotten Worse</b>	<b>Stayed the Same</b>	<b>Gotten Better</b>
The number of public health nuisances such as houses not disposing of garbage, septic system failures, bed bug infestations, or meth labs.	35.3%	55.0%	9.7%
Exposure to unsafe drinking water.	10%	74.4%	15.6%
Exposure to mold.	15.4%	73.9%	10.7%
Exposure to radon.	9.7%	76.0%	14.2%
Exposure to secondhand smoke.	5.2%	48.2%	46.6%
Exposure to environmental contamination from sewer run-off, hazardous materials, or industrial processes like frac sand mining.	19.8%	67.1%	13.1%
Exposure to diseases caused by vectors like mosquitoes or ticks.	31.1%	60.2%	8.7%

## Health Services

<b>In the past year, . . .</b>	<b>Gotten Worse</b>	<b>Stayed the Same</b>	<b>Gotten Better</b>
Availability of nutritious food.	7.0%	64.2%	28.8%
Access to immunizations.	1.7%	68.5%	29.8%
Access to medical care.	8.8%	69.4%	21.7%
Access to prescription medications.	8.3%	78.0%	13.7%
Access to dental care.	10.2%	78.9%	10.9%
Access to mental health services.	10.4%	77.7%	11.9%
Access to alcohol and/or drug treatment.	8.4%	81.0%	10.6%
Access to safe and/or affordable housing.	17.1%	74.8%	8.1%
Availability of family planning services.	6.0%	85.6%	8.4%
Availability of testing for sexually transmitted infections	4.0%	86.8%	9.2%
Access to health insurance or medical coverage.	26.4%	60.5%	13.1%
Services that allow people to live longer in their own homes.	4.0%	69.9%	26.1%
Availability of social activities and/or volunteer opportunities.	5.0%	74.1%	21.0%

## Healthy Communities

<b>In the past year, the . . .</b>	<b>Gotten Worse</b>	<b>Stayed the Same</b>	<b>Gotten Better</b>
Number of teen pregnancies and unplanned pregnancies.	13.3%	65.9%	20.8%
Number of women receiving prenatal care.	2.85%	74.4%	18.8%
Number of families with inadequate/poor parenting skills.	41.3%	52.3%	6.4%
Number of families experiencing financial stress.	62.7%	32.5%	4.8%
Number of sexually transmitted infections such as HPV, gonorrhea or chlamydia.	9.9%	79.9%	10.2%
Number of people who are a healthy weight.	44.9%	46.7%	8.3%
Number of people who are physically inactive.	41.8%	47.8%	10.4%
Number of people who are eating healthier.	17.6%	55.3%	27.0%
Number of people who use tobacco.	10.5%	56.7%	32.8%
Number of people who use illegal drugs.	41.3%	54.0%	4.7%
Number of drivers who drive while under the influence of alcohol or drugs.	22.7%	62.8%	14.5%
Number of drivers and passengers who use seat belts/car seats.	3.1%	49.2%	47.7%
Number of drivers who drive distracted.	64.6%	30.1%	5.3%
Number of people who have been bullied.	38.5%	55.3%	6.3%

Number of community members who have depression.	31.4%	66.8%	1.8%
Number of community members who have attempted and/or committed suicide.	16.6%	77.1%	6.3%
Number of people with chronic health conditions.	30.0%	67.0%	3.0%

### **Emergency Preparedness**

<b>Please check the response that applies to you for each statement below.</b>	<b>Yes</b>	<b>No</b>
I have been affected by a natural or other disaster like a flood, storm, fire, etc.	30.3%	69.7%
I have an individual or family emergency plan that identifies what to do and who to contact during an emergency.	53.6%	46.4%
I have an individual or family emergency kit of supplies.	37.6%	62.4%
In the last twelve months, I have volunteered within my community.	60.4%	39.6%

### **Environmental Health**

<b>Please check the response that applies to you for each statement below.</b>	<b>Yes</b>	<b>No</b>
I live in a building that has one of the following: water damage/mold, radon, pests, clutter that impacts daily living, etc.	14.9%	85.1%
I have limited mobility which prevents me from accessing all areas of my home.	3.2%	96.8%
I am able to afford the place where I live.	93.3%	6.7%
I feel safe in my home.	97.2%	2.8%
I feel safe in my neighborhood.	96.9%	3.1%
I am or have been in a relationship where I have been physically hurt, threatened, or made to feel afraid.	3.4%	96.6%

### **Health Services**

<b>Please check the response that applies to you for each statement below.</b>	<b>Yes</b>	<b>No</b>
My immunizations are current.	95.3%	4.7%
I have had a physical exam within the last twelve months.	78.2%	21.8%
I have been told by a doctor or health care professional that I have a health condition that I need to take medication for.	49.7%	50.3%
I have a physical health condition that has lasted at least twelve months.	44.5%	55.5%
I take medication for a health condition.	51.7%	48.3%
I have had a dental exam within the last twelve months.	76.5%	23.5%
I have health insurance or medical coverage.	93.7%	6.3%
I would prefer to receive health and medical care that will allow me to stay in my home as long as possible.	88.4%	11.6%

## Healthy Communities

<b>Please check the response that applies to you for each statement below.</b>	<b>Yes</b>	<b>No</b>
I feel healthy.	89.6%	10.4%
I consider myself to be a healthy weight.	65.3%	34.7%
I get 150 minutes of physical activity each week.	70.4%	29.6%
I have access to a safe place where I can exercise.	91.1%	8.9%
I live in area where the sidewalks are in good condition and easy to walk.	61.1%	38.9%
I know of places like trails, parks, pools, playgrounds, fitness centers, or community locations where I can participate in physical activity.	95.6%	4.4%
I use local trails, parks, pools, playgrounds, fitness centers, or community locations to get physical activity.	57.3%	42.7%
I spend more than two hours each day using a tablet, smart phone, television, or computer to play games, read, watch programs or movies, or to access the internet for non-work reasons.	56.0%	44.0%
I eat 1 ½ or more cups of fruit most days of the week.	59.0%	41.0%
I eat 2 or more cups of vegetables most days of the week.	65.0%	35.0%
I drink one or more soft drinks each day.	34.9%	65.1%
In the last twelve months, I have worried that my food would run out before I had money to buy more.	7.7%	92.3%
In the last twelve months, I have used a community food shelf.	2.5%	97.5%
I smoke cigarettes, cigars, and/or a pipe.	10.8%	89.2%
I use e-cigarettes.	2.9%	97.1%
I use chewing tobacco.	5.1%	94.9%
I am exposed to tobacco smoke.	15.3%	84.7%
I use illegal drugs like marijuana, cocaine, or methamphetamines.	0.3%	99.7%
I use prescription drugs not prescribed to me by a doctor to get high.	0.2%	99.8%
I had at least one alcoholic beverage in the past thirty days.	65.6%	34.4%
I drink at least one alcoholic beverage every day.	13.3%	86.7%
During the times I drink alcoholic beverages, I sometimes have five or more drinks in a row.	21.5%	78.5%
In the last twelve months, I have driven a motor vehicle after drinking an alcoholic beverage.	20.9%	79.1%
I always wear my seat belt while traveling in a motor vehicle.	91.9%	8.9%
While driving a vehicle, I use my phone to text or access the Internet.	7.8%	92.2%
While driving a vehicle, I use my phone to make and take calls.	55.5%	44.5%
I am often unhappy, depressed, or tearful.	9.9%	90.1%
I feel stressed or under pressure.	32.8%	67.2%

**Select which health services should be made available to the residents of your community.**

<b>My fellow county residents should be able to live in a community where:</b>	<b>Yes</b>	<b>No</b>
The health department has sufficient numbers of trained staff who can care for the public.	92.0%	8.0%
Healthy communities and healthy behaviors are encouraged.	95.3%	4.7%
Infectious diseases are prevented.	95.9%	4.1%
Environmental health hazards are controlled.	96.4%	3.6%
Disasters are prepared for and responded to quickly and effectively.	96.6%	3.4%
Health care and services are of good quality and easily accessible.	96.4%	3.6%

**Please identify the top three public health issues you believe that the local health department should address over the next five years.**

<b>1</b>	Health Care Access
<b>2</b>	Alcohol, Tobacco, and Other Drugs
<b>3</b>	Obesity

**Which county do you live in?**

Fillmore	447
Houston	447

**What is your zip code?**

55919	20	55949	40
55921	119	55954	36
55922	14	55961	4
55923	47	55962	16
55931	9	55965	67
55935	23	55971	55
55939	53	55974	53
55941	22	55975	79
55943	70	55990	24
55947	162		

**Select your age category.**

18-34	8.8%
35-44	10.6%
45-54	17.2%
55-64	23.7%
65-74	21.5%
75+	18.1%

**Which gender do you consider yourself?**

Female	63.6%
Male	36.4%

**Select the race(s) you identify with. Please check all that apply.**

White	97.9%
Not White	2.1%

**What is the highest level of education you have completed?**

Less than high school	3.8%
High school graduate or GED	26.8%
Some college/vocational school	25.3%
Associate's degree (Two-year degree)	14.5%
College graduate (Four-year degree)	18.0%
Graduate school or beyond	11.5%

**Which resource would you be most likely to use to learn more about health?**

Doctor or Health Care Provider	54.8%
Family/Friends	5.4%
Internet	23.6%
Newspaper	5.7%
Public Health	1.5%
Radio/TV	8.0%
Social Media/Face Book/Twitter	1.0%

**Which, if any, barriers do you have in getting medical/dental care? Please check all that apply.**

I am nervous or afraid.	37
I cannot get an appointment.	14
I do not have transportation.	8
The costs are too high.	249
My insurance does not cover the care I need.	120
I cannot find a provider who will take my insurance.	26
I have no barriers to getting medical or dental care.	571

**Appendix C: Fillmore-Houston CHS Health Priority 1 – Access to Health Care 2015-2020**

**Goal:** To increase the proportion of Fillmore and Houston County residents who have access to health care.

**Objectives:** By 2020, decrease the percentage of Fillmore and Houston County residents who are uninsured by 10%.

Evidence Based Actions	Partnership Sectors	Assets and Resources	Policy, System, or Environment Change Implementation	Health Outcomes	Progress Indicators or Benchmarks
Support equitable access to quality health care.	Dental Care Faith Health Care Long Term Care Public Health Mental Health Semcac Social Services WIC Veteran’s Services	Collaborative Care Plans Current partnerships Minnesota Health Care Programs (MHCP) PH-Doc	Support and promote enrollment in MNSure.  Educate MHCP and Medicare enrollees regarding available preventative benefits.	Increased access to insurance coverage.  Increased participation in Medicare wellness visits available through the Affordable Care Act.	FHCHS Community Health Assessment  Behavioral Risk Factor Surveillance System (BRFSS) MCHS Morbidity Table 17 (2012) and U.S. Census
Support and/or implement integrated, community-based, preventative services and linkages.	Dental Care Education Faith Health Care Long-Term Care Public Health Mental Health Semcac Social Services WIC Veteran’s Services	Current partnerships Great Rivers 2-1-1 Health Plans Minnesota Help.info PH-Doc Quit Plan	Work with providers to promote and provide access to dental, mental health, and immunization services.  Promote and connect clients with transportation services to increase participation in preventative services.	Increase in the number of providers and/or services listed with Great Rivers 2-1-1 and Minnesota Help.info regarding dental, mental health, immunizations, and transportation.  Creation and/or maintenance of access to fluoride varnish, immunization and mammography.	Minnesota Student Survey Table 20 (2013) Health Care Access  Diabetic Screening Levels  Cancer Screening Levels  Immunization Levels

**Appendix D: Fillmore-Houston CHS Health Priority 2 – Active Living 2015-2020**

**Goal:** To increase the proportion of Fillmore and Houston residents who are physically active.

**Objectives:** By 2020, decrease the percentage of Fillmore and Houston County residents who report no physical activity by 10%.

Evidence Based Actions	Partnership Sectors	Assets and Resources	Policy, System, or Environment Change Implementation	Health Outcomes	Progress Indicators or Benchmarks
<p>Encourage incorporation of active transportation within community design and development.</p> <p>Promote policies and programs that increase physical activity within sectors serving youth.</p> <p>Collaborate with partners to create safe, accessible, and affordable spaces where physical activity may occur.</p>	<p>Economic Development Education Law Enforcement Engineering Elected Officials Parks &amp; Recreation Public Health Tourism</p> <p>Child Care Education Non-Profit Agencies Parks &amp; Recreation Public Health</p> <p>Economic Development Education Law Enforcement Elected Officials Parks &amp; Recreation Public Health Worksites</p>	<p>Current partnerships League Cycling Instructor (LCI) Minnesota Center for Professional Develop (MCPD) Trainers Trails system Statewide Health Improvement Program (SHIP)</p> <p>Current partnerships SHIP UCare Foundation</p> <p>Current partnerships Community spaces</p>	<p>Development of a five-year strategic plan for active living.</p> <p>Implementation of Complete Streets, Safe Routes, Sidewalk or Comprehensive Plan with partners.</p> <p>Active classroom, child care, and recreation policies and practices.</p> <p>Joint use recreation agreements with communities and schools.</p> <p>Worksite physical activity policies and supports.</p>	<p>Increase the number of youth and adults who have access to places for physical activity with focus on walking and bicycling.</p> <p>Increase the number of local policies that include language that supports environmental changes for physical activity, emphasizing walking and bicycling.</p> <p>Increase the number of communities that develop and adopt transportation plans that include active transportation.</p>	<p>FHCHS Community Health Assessment</p> <p>Behavioral Risk Factor Surveillance System (BRFSS) MCHS Morbidity Table 19 (2012). Percentage of respondents who reported no physical activities during the past month, other than regular job. (MN 17.4%) (FC 18.7%) (HC 18.5%)</p> <p>Minnesota Student Survey Table 21 (2013) Physical Activity</p>

**Appendix E: Fillmore-Houston Health Priority 3 – Healthy Eating 2015-2020**

**Goal:** To increase the proportion of Fillmore and Houston residents who have access to and consume healthy food.

**Objectives:** By 2020, increase fruit and vegetable consumption among Fillmore and Houston County residents by 10%.

Evidence Based Actions	Partnership Sectors	Assets and Resources	Policy, System, or Environment Change Implementation	Health Outcomes	Progress Indicators or Benchmarks
<p>Partner to increase access to healthy and affordable foods.</p> <p>Work toward aligning nutrition standards and policies that increase access to healthy foods and beverages.</p> <p>Help people to recognize and make healthy food and beverages choices</p>	<p>Community Gardens Education Elected Officials Emergency Food Programs Faith Farmer’s Markets Food Retailers/Vendors Health Care Public Health Semcac</p> <p>Child Care Education Emergency Food Programs Semcac Worksites</p> <p>Education Emergency Food Programs Food Retailers/Vendors Public Health Worksites</p>	<p>Current partnerships Food Shelves Lanesboro Local Senior Dining SE ELCA SHIP U of MN Extension WIC</p> <p>Current partnerships Consulting Dietitians School Policies SHIP</p> <p>Current partnerships Consulting Dietitians Libraries SHIP U of MN Extension WIC</p>	<p>Develop and implement a five-year strategic plan for healthy food.</p> <p>Grow a healthier food environment by increasing farm-to-table efforts, gardens, and markets.</p> <p>School and worksite policies and practices related to healthy meals, snacks, beverages, and breastfeeding.</p> <p>Emergency food program healthy donation policies.</p> <p>Food purchasing and preparation education.</p>	<p>Increased access to and consumption of fresh fruits and vegetables.</p> <p>Reduced consumption of sodium, saturated fat, and added sugar.</p>	<p>FHCHS Community Health Assessment</p> <p>Food Access Research Atlas USDA Mapping</p> <p>Minnesota Student Survey Table 23A (2013) Nutrition</p> <p>WIC Fruit and Vegetable Voucher Usage Reports</p> <p>WIC Breastfeeding Initiation and Participation</p>

**Appendix F: Fillmore-Houston Progress Indicator and Benchmark Resources**

Progress Indicators or Benchmarks	Data Resource
County Health Rankings Mammography Screening Levels	<a href="http://www.countyhealthrankings.org/">http://www.countyhealthrankings.org/</a>
County Health Rankings Diabetic Screening Levels	<a href="http://www.countyhealthrankings.org/">http://www.countyhealthrankings.org/</a>
County Health Rankings Food Environment Index	<a href="http://www.countyhealthrankings.org/">http://www.countyhealthrankings.org/</a>
County Health Rankings Access to Exercise Opportunities	<a href="http://www.countyhealthrankings.org/">http://www.countyhealthrankings.org/</a>
FHCHS Community Health Assessment	Records on File
Food Access Research Atlas USDA Mapping	<a href="http://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas.aspx">http://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas.aspx</a>
Immunization Levels	
Minnesota Center for Health Statistics Behavioral Risk Factor Surveillance System (BRFSS) Morbidity Table 2 Childhood Immunizations	<a href="http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html">http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html</a>
Minnesota Center for Health Statistics Behavioral Risk Factor Surveillance System (BRFSS) Morbidity Table 17 Insurance Rates	<a href="http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html">http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html</a>
Minnesota Center for Health Statistics Behavioral Risk Factor Surveillance System (BRFSS) Morbidity Table 19 Behavior Risk Factor Surveillance System Data	<a href="http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html">http://www.health.state.mn.us/divs/chs/countytables/profiles2013/index.html</a>
Minnesota Student Survey Table 20 (2013) Health Care Access	<a href="http://www.health.state.mn.us/divs/chs/mss/countytables/">http://www.health.state.mn.us/divs/chs/mss/countytables/</a>

Progress Indicators or Benchmarks	Data Resource
Minnesota Student Survey Table 21 (2013) Physical Activity	<a href="http://www.health.state.mn.us/divs/chs/mss/countytables/">http://www.health.state.mn.us/divs/chs/mss/countytables/</a>
Minnesota Student Survey Table 23A (2013) Nutrition	<a href="http://www.health.state.mn.us/divs/chs/mss/countytables/">http://www.health.state.mn.us/divs/chs/mss/countytables/</a>
U.S. Census Bureau Health Insurance Coverage Rates	<a href="http://quickfacts.census.gov/qfd/states/27000.html">http://quickfacts.census.gov/qfd/states/27000.html</a>
WIC Breastfeeding Initiation and Participation	Reports compiled through WIC
WIC Fruit and Vegetable Voucher Usage Reports	Reports compiled through WIC