

GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

571 County Road A

PO Box 588

Green Lake WI 54941-0588

VOICE: 920-294-4070

FAX: 920-294-4139

Email: glcdhhs@co.green-lake.wi.us



FOX RIVER INDUSTRIES

222 Leffert St.

PO Box 69

Berlin WI 54923-0069

VOICE: 920-361-3484

FAX: 920-361-1195

Email: fri@co.green-lake.wi.us

Post Date: 4/22/16

The following documents were distributed at the Health Advisory Committee meeting held on Wednesday, April 13, 2016

- Agenda for April 13, 2016 meeting
- Draft Health Advisory Minutes – January 13, 2016
- Strategic Plan 2011-2016
- 2011-2016 Strategic Plan Evaluation
- Healthiest Wisconsin 2020 – Twelve Focus Areas and Objectives
- County Health Rankings 2016
- Planning Posters – Strengths, Weaknesses, Opportunities, Challenges
- Survey for Needs Assessment

Green Lake County Health Department
SWOC Planning and Priority Setting
08 April 2016

Prepared by Jay Dampier

A key component in almost every strategic planning process is known as the SWOC (Strengths, Weaknesses, Opportunities, Challenges) Analysis. An online survey was sent to Staff and Advisory Board Members. Results are included below and will be used to codify the Health Department's Strengths, Weaknesses, Opportunities and Challenges. Thirteen people responded; 9 staff and 4 advisory board members. Participants were asked to generate a complete list of the Health Department's Strengths, Weaknesses, Opportunities, and Challenges. They were asked to place an asterisk (*) next to the items they felt were most important.

After the online survey was closed, Kathy Munsey, Melanie Simpkins and I met on April 7, 2016 to consolidate the responses. Items were assigned priority if i) participants indicated a particular response was a priority as marked by an asterisk (*), and ii) responses are themes were repeated by two or more participants.

During the forthcoming sessions, I will read aloud each of the responses below and ask if any clarification is needed by participants. Participants will also be given a few minutes to add any missing items under Strengths, Weaknesses, Opportunities and Challenges. Then participants will be given the opportunity to vote on what they feel are the most important issues. Seven votes will be permitted, per participants for each category i.e. 7 for strength, 7 for weaknesses, 7 for opportunities, 7 for challenges. Participants will be permitted to double vote on items that they're most passionate about.

This exercise is a critical step, with the findings being used at the next phase, which include establishing strategic priorities. These priorities can be defined as a pattern of purposes, policies, programs, actions, decisions or resource allocations that define what the Health Department is, what it does and why it does it. Strategies can vary by level, function and time frame. Strategies are developed to address the identified strengths, weaknesses, opportunities and challenges. These forthcoming strategies will become the basis for the strategic plan.

STRENGTHS (Internal to the Health Department)

- Connected to county, regional and state coalitions and groups
- Good rapport with legislators
- Positive public perception of health department
- *Inclusive of community stakeholders at all times (hospitals, schools etc. in all three counties) Great communication with stakeholders .Good community relationships with health care providers, law enforcement and other stakeholders.
- Prevention emphasis through education*
- Training* Furthering education.
- State resources/guidance
- Knowledge of geographic area
- Awareness of needs State/federal mandates and requirements
- *Provide good local response to emergency situations and emerging diseases
- Assessments and Plans Evolving and fluid, not stagnant*
- *Experienced staff with good motivation. *Highly skilled and competent staff
- Relationship with other departments is strong
- *Very professional staff who take pride in their work *Engaged staff who care about the community
- ** Team Effort / Collaboration. Camaraderie with co-workers. ** Good Communication among Staff Good Morale
- Act as mentors to students to provide real-life work experiences
- *good morale-support of management and work well as team
- Fulfillment gained from job duties
- Supportive Health Advisory Board
- *on-going review of processes and quality improvement*Thirst for learning (always looking into new ways of providing services and more efficient ways)
- Always taking advantage of alternate funding sources (grants)
- Flexibility with work schedule
- We are moving forward in the journey of accreditation by thoughtfully visiting each domain.
- We have a current CHIP, CHA, strategic plan and performance management plan that help lead our actions to foster desired outcomes.
- Adoption of new performance reviews utilizing both mgmt. and employee points of view.
- Employees and management working together to further the department goals.
- *Good leadership. ** Excellent Management . Health Officer is organized, well-connected and showing leadership in the department and across her state colleagues.
- Effective Communication systems with effective goals/plans in place, always striving to meet goals and with ability to modify goals, when necessary.

WEAKNESSES (Internal to the Health Department)

- Need to fight for safety & common sense wellness issues with county
- -some staff deficiencies in skills sets / motivation needed for changing demands of public health
- inexperience in performance management
- -inconsistent performance management systems and some non-data driven decision making
- Do not educate others as to the value of our programs therefore we may not get "buy-in" or great participation from other departments or the community
- Internal communication is poor
- Communication FROM local partners
- Board connection weak *Lack of understanding by board members of what we actually do Limited network of providers/volunteers to help with our CHIP
- *Limited staff makes it hard to keep up with all new programs in a timely manner Small staff so each employee may need to be cross-trained*
- State sometimes has unrealistic expectations for what they want us to do (Unfunded mandates)
- State guidance people very often have less experience than we have-- so no expertise in some areas
- *Lack of understanding by many of the importance and cost-savings of prevention programs as opposed to crisis costs after the fact.
- *Limited funding or uncertain funding for certain programs jeopardizes quality. *funding cuts from State/Fed (or no increases from county) Never enough funding available to cover the needs of the department.* budget can affect programming options
- *Lack of leadership in HHS (vacant Director and Deputy Director) **Upper level management missing (Director)
- Concerns with past leadership and lack of support to direct service staff
- Future concerns over job duties and health dept. functions with retirements and possible funding and regional changes (Possible future regionalization of PH services)
- Inadequate mental health resources

OPPORTUNITIES (External to the Health Department)

- Equity across county
- Marketing what we do to promote access to care in our department Increase involvement of partners in wellness coalition
- ** New Funding Sources -New ACA requirements=funding opportunities via private partnerships *Theda Care taking over Berlin Hospital may provide more funding opportunities--need to develop strong relationship with them.
- *The partnerships that we have with our community partners (old or new) in the county help assure we are meeting our mission as a department. *Continue to establish partnerships outside of PH to continue progress with population based services
- Additional non-traditional partnerships such as faith-based sector etc.
- Opportunity to re-brand and promote our services -define our "business" of public health
- Trainings*
- Collaborative efforts with other agencies*
- Overlapping programs provide more educational opportunities*
- Working together with the various counties is both cost effective and allows employees to share their thoughts on how the accomplish a goal. Also, spreads the costs of programs among the various counties.
- Doing much work with 5 surrounding counties so opportunity for successful grant applications is increased.
- Write grants for new funding opportunities.
- Continue with innovative opportunities to apply for and receive grant funding
- *Continue to educate staff as opportunity presents to strengthen staff diversity
- ** Partnering with outside service providers (Dental)
- Nursing students placed in the Health Department can be used to support outreach efforts.

CHALLENGES (External to the Health Department)

- Requirements from State/Fed changing*
- Collaboration with other counties/coalitions
- Emerging pathogens or global threats "Buy in" from consumers
- *Aging workforce may mean retirements in near future
- *New county board members and county administrator may challenge current practices and programs.
- Pay for performance may cause strife with staff if it is based on merit pay.
- Workplace stress. Working to meet accreditation goals is very challenging with little funding to back the process.
- *Many of our programs are mandated yet funding has remained the same for several years while costs of providing services continue to rise. Continued decrease in funding from the State * Potential funding cuts
- **To overcome bad reputation/poor HHS leadership image within the community *In recent months the personnel issues within the department that have been made very public have had a negative effect on the reputation of the department. Historically the mental health department has had a negative reputation regarding working with community partners.
- *Potential concerns with finding a competent workforce interested in the Public Health field in the future
- Some individuals may not understand a particular need of the department and this may work against obtaining the funding for programs for people of "all" ages.*
- Public's lack of understanding - what the health department truly does
- In addition to the Board's fiscal responsibilities, ongoing consideration of employee morale and well-being remains a determining factor in best serving the needs of our community.*

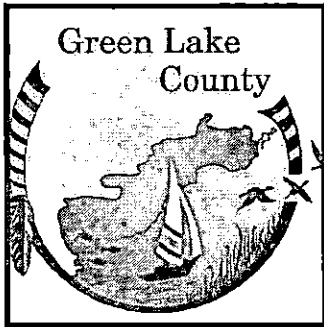


Strategic Plan 2011-2016

Green Lake County Health Department



TABLE OF CONTENTS	
Health Officer's Message	3
Green Lake County Demographics	4
A Brief Health Report Card	5
"Putting the Pieces Together"	6
Our Vision and Mission Statements	7
Our Core Values	8
Our Strategic Plan: Goal #1	9
Our Strategic Plan: Goal #2	10
Our Strategic Plan: Goal #3	11



HEALTH OFFICER'S MESSAGE



The Green Lake County Health Department has developed this strategic plan to spark leadership commitment to provide quality public health services to the residents of Green Lake County.

This plan will be used to prioritize and allocate resources in order to deliver services that will improve health outcomes in Green Lake County.

Our goal is to provide high-quality Public Health services that effectively engage the community in healthy initiatives. We want to celebrate living better, longer.

Kathy Munsey, RN, BSN
Health Officer



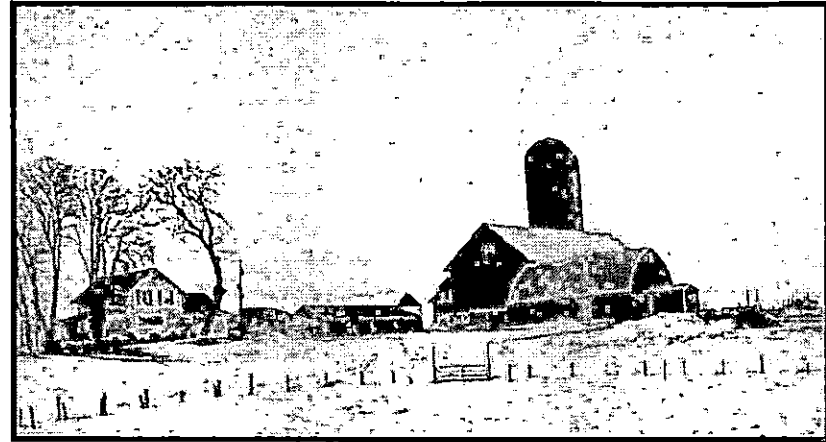
DEMOGRAPHICS



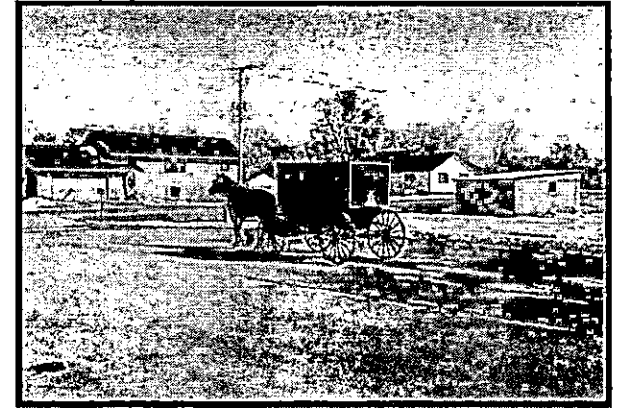
Green Lake County

- Pop- 19, 051
- Square miles in county: 380
- Average wage: \$25,226
- Amish communities, and a variety of ethnic descendants contribute to a unique mixture of culture and customs.
- County has a higher than state average of population older than 65.

ulation:



A rural community surrounded by farms, streams, lakes, forests and a wide variety of recreational opportunities.



A BRIEF HEALTH REPORT CARD

Green Lake County Health Rankings

	2010	2011
Health Outcomes	41	45
Mortality	35	35
Morbidity	44	55
Health Factors	34	25
Health Behaviors	43	42
Clinical Care	29	11
Social & Economic Factors	37	44
Physical Environment	27	11



What does this all mean?

Each year the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute compile the County Health Rankings, which reports on the overall health of each county in the state. The report ranks Wisconsin's 72 counties, with places receiving the lowest numbers (e.g., 1 or 2) being considered the healthiest.

- **Health outcomes** represents the health of a county and is based on measures of mortality and morbidity
- **Mortality** is a measure of premature death; the years of potential life lost prior to age 75.
- **Morbidity** measures quality of life and birth outcomes.
- **Health factors** are based on health behaviors, clinical care, social and economic factors and physical environment.
- **Health Behaviors** include smoking, diet, exercise, alcohol use & risky sex behavior.
- **Clinical Care** is access to care & quality of care.
- **Social & Economic Factors** are a measure of education, employment, income, family and social support and community safety.
- **Physical Environment** refers to environmental quality and the built environment.

University of Wisconsin Population Health Institute, *County Health Rankings 2010, 2011*, county-healthrankings.org

Striving for an image of our future through the impact of our work.

Vision

A brief statement defining our purpose.

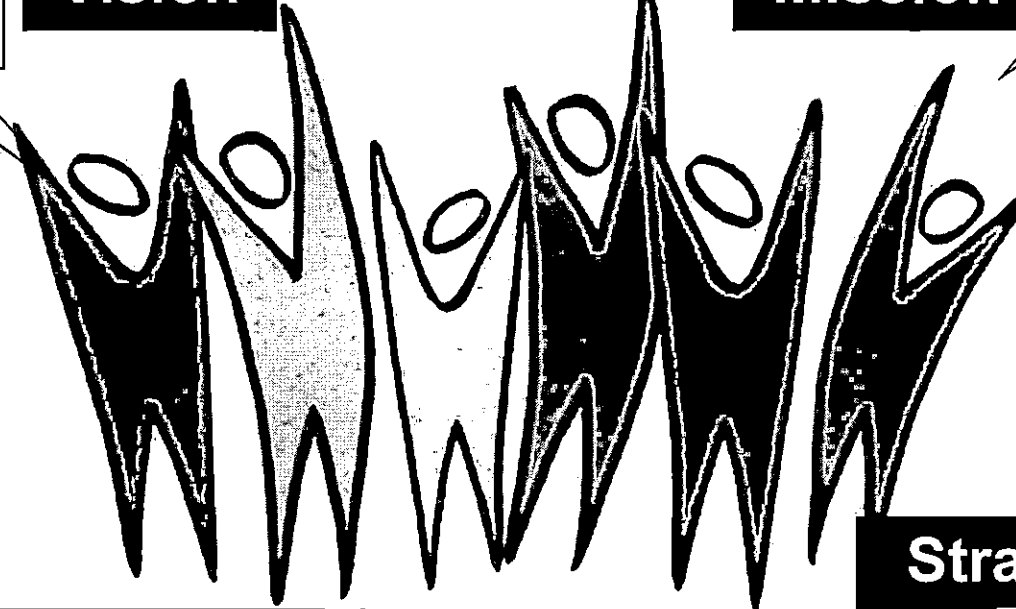
Mission

Core Values

Principles and beliefs which guide our planning, operations and programs.

Strategic Plan

A long-range planning tool providing guidance in fulfilling a mission with maximum efficiency and impact.



OUR VISION:

**Green Lake County:
Healthy People,
Communities and
Environment**

OUR MISSION:

**Assure the health of
Green Lake County by
promoting and protecting
health and preventing
disease.**

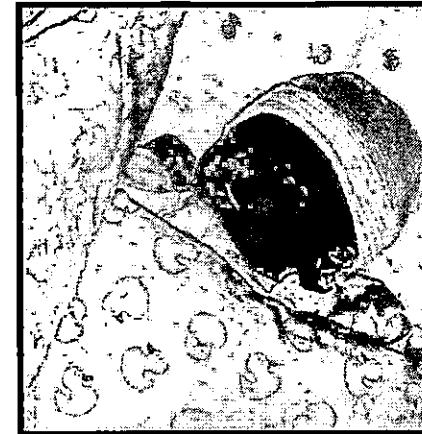




OUR CORE VALUES

Collaboration ~ Stewardship

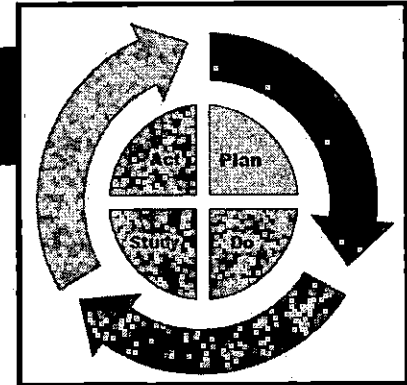
- **Prevention**— We take a proactive approach to community and individual health.
- **Professionalism**— We are accountable for acting in an honest and respectful way in dealing with ourselves and others. We deliver high-level services in a timely, caring manner.
- **Evidence-based Practices**— We research and utilize evidence-based practices that have proven to be effective.
- **Collaboration**— We work together for the overall good of the customer, team, organization and community.
- **Good Stewardship of All Resources**— We value fiscal and programmatic integrity.
- **Performance Improvement**— We strive to deliver optimum services. We use continuing education and the quality improvement process as tools for performance improvement.





GOAL #1

Provide High-Quality Public Health Services



Objective 1

Facilitate annual meetings with Green Lake County partners.

- Strategy 1.1.1
Identify existing community and professional partners by December, 2012.
- Strategy 1.1.2
Engage community in continuous planning and evaluation and use results for decision making.
- Strategy 1.1.3
Identify measurable outcomes in partnership with the community.

Rationale: Through the leadership of the health department, community partners are engaged in the process of improving the health of the community. By making this process a joint effort, the community as a whole benefits from the diversity of those involved.

Objective 2

Update the Green Lake County Health Department five-year strategic plan by June 1, 2016.

- Strategy 1.2.1
Ensure accountability through measurable outcomes.

Rationale: A strategic plan gives the health department direction and focus by creating goals and objectives that are consistent with our mission. By focusing on key priorities, organizational resources are used effectively.

Objective 3

Develop a written quality improvement plan by December, 2012.

- Strategy 1.3.1
Establish a quality improvement team to develop a plan with emphasis on efficiency and confidentiality.
- Strategy 1.3.2
Develop quality improvement materials and templates to be used.
- Strategy 1.3.3
Implement the quality improvement plan by January 1, 2012.

Rationale: In an ever changing world, it is important to regularly evaluate programs and services to assure we are meeting the needs of the community, providing services efficiently and continually looking for improvement.

Objective 4

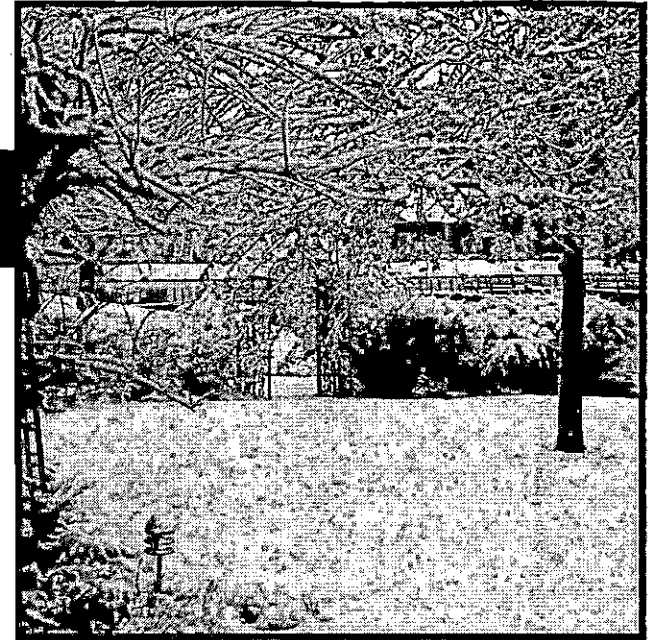
The Green Lake County Health Department will assess the feasibility of applying for national accreditation through Public Health Accreditation Board by December 31, 2016.

Rationale: The goal of the voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of state and local public health departments.



GOAL #2

Maximize Public Health Resources



Objective 1

Maintain a high level of workforce competency and capacity.

- Strategy 2.1.1
Assess scheduling, fiscal management and use of available resources.
- Strategy 2.1.2
Develop a plan to address identified weaknesses.
- Strategy 2.1.3
Implement recommendations and reassess annually.
- Strategy 2.1.4
Strengthen workforce satisfaction.

Rationale: Having a process in place to assess the workforce and the work environment as it relates to service delivery, efficiency, and client satisfaction fosters a positive experience for clients and staff. Employee satisfaction is directly related to a positive, productive work environment.

Objective 2

Utilize the most efficient delivery systems available.

- Strategy 2.2.1
Support the use of technologies to enhance delivery of services.
- Strategy 2.2.2
Provide training for staff as needed.
- Strategy 2.2.3
Investigate the use of new technologies as they apply to health department services.

Rationale: Enhancing and encouraging the use of current and undiscovered technology has the potential to greatly improve client service delivery, program efficiency, storage capacity and travel expenses.



GOAL #3

Strengthen Communication and Promote Public Health Services



Objective 1

Improve communication and expand public awareness.

- Strategy 3.1.1
Provide regular, timely, and effective health information to the general public.
- Strategy 3.1.2
Strengthen internal organizational communication.
- Strategy 3.1.3
Strengthen external communication with public health partners.

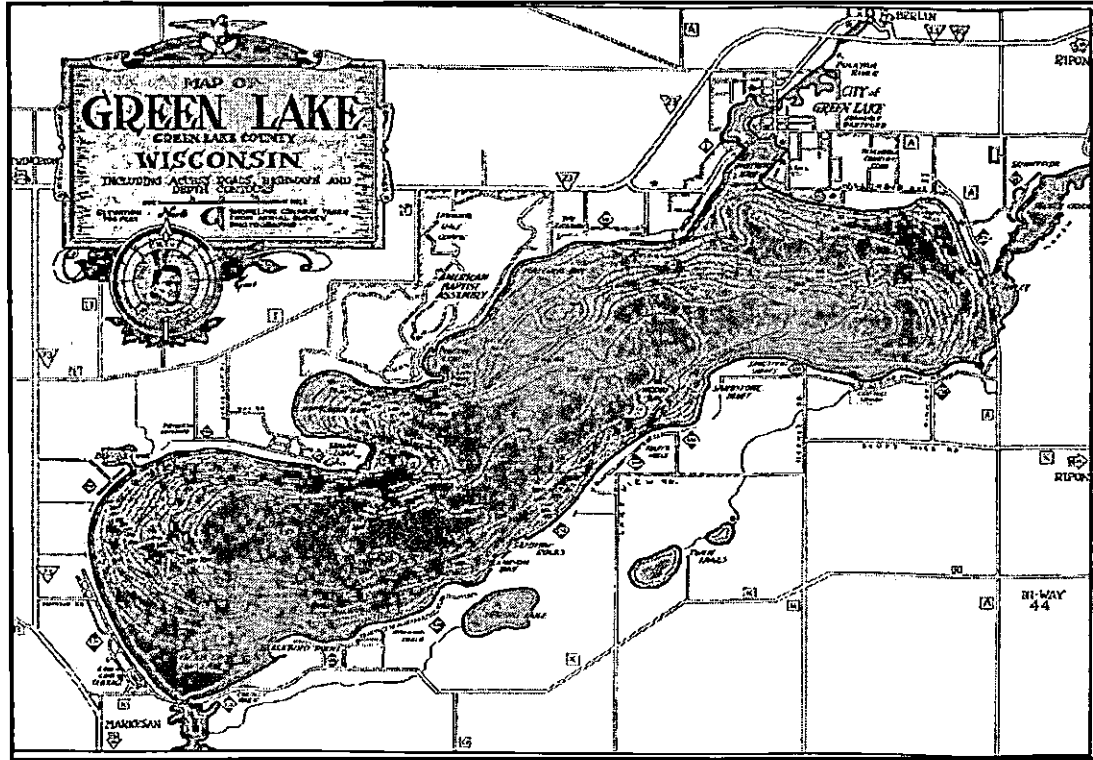
Rationale: Creating, communicating and delivering health information promotes and protects the health of diverse populations. Strengthening both internal and external communication will assure that the Green Lake County Health Department is able to provide effective and efficient public health services.

Objective 2

Enhance Board of Health understanding of public health programs and services.

- Strategy 3.2.1
Implement Board of Health orientation for all members by July 31 of each even calendar year.
- Strategy 3.2.2
Identify additional educational needs of the Board of Health and assign the health officer to provide access to resources as needed.
- Strategy 3.2.3
Launch the strategic plan with board support by January, 2012.

Rationale: Having a well-educated Board of Health will strengthen and improve our local public health governance. Well-informed members have the ability to effectively and competently serve the public health needs of the community.



October 2011

Published by the Green Lake County Health Department
571 County Road A
PO Box 588
Green Lake, WI 54941
(920) 294-4070

For more information about
GREEN LAKE COUNTY HEALTH DEPARTMENT
Visit: <http://www.co.green-lake.wi.us/>

Green Lake County Health Department

2011-2016 Strategic Plan Evaluation

This strategic plan had 3 goals with several objectives. This evaluation will review each goal and discuss what was done to achieve those goals.

Goal 1—Provide High-Quality Public Health Services.

The first objective was to facilitate meetings with community partners. This was accomplished by contacting our local hospital, Theda Care—Berlin, formerly Community Health Network to meet with clinic staff annually to discuss local concerns and provide contact information to the providers. In addition, we established a tracking system to evaluate our community commitment and found that staff is a part of 23 different coalitions or committees. Attendance at these meetings is tracked and it has improved our visibility in the community and we have seen improvement in our county health rankings for the first time in several years.

The second objective was to update the five-year strategic plan by June of 2016. We have utilized the expertise of Jay Dampier of our county UW-Extension office to facilitate this process. The new planning session was started in February of 2016 and we anticipate the completion of the updated plan by June of 2016. Our current performance management system will help assure that we have measurable programming outcomes.

The third objective was to develop a written Quality Improvement (QI) plan by December of 2012. Our plan was completed and has been used to guide us as we work on quality improvement projects. Two staff attended two of the National Network of Public Health Institutes seminars on QI and wrote for a grant to have mentors for our first QI project which evaluated immunization rates. All staff assisted with this project and was involved in the online mentoring sessions for our project. Regionally we have participated in Communities of Practice trainings related to QI over the past several years and staff has been involved in QI projects annually.

The fourth objective was to assess the feasibility of applying for national accreditation. All staff completed the Accreditation Planning Checklist and determined that many of the domains mirror the 140 Review process which is the state accreditation process so we will work towards national accreditation.

Goal 2—Maximize Public Health Resources

The first objective was to maintain a high level of workforce competency and capacity. Our first task was to develop a Workforce Development Plan. This defines roles, states competencies that are required and provides templates for identifying annual training plans. Staff uses the Public Health Core Competencies as well as other program requirements to determine level of competence and then schedule trainings based on gaps identified. This process has been successful. We are currently in the process of using a new performance-based management tool called NeoGov. This will be implemented in July of 2016 and we will revise our plan accordingly. I have also done employee satisfaction surveys and we had our first staff retreat to not only provide needed training, but also to do team building activities to increase morale.

The second objective was to utilize the most efficient delivery systems available. We continue to attend trainings to educate ourselves on programs for the WI Immunization Registry (WIR), the WI Electronic Disease Surveillance System (WEDSS), the Secure Public Health Electronic Record Environment (SPHERE) and more. These electronic records assist in early identification of disease trends and facilitate data collection. We also use technology for webinars or “Go to Meeting” to be more cost effective.

Goal 3—Strengthen Communication and Promote Public Health Services

The first objective was to improve communication and expand public awareness. We are using the county website as well as the Green Lake County Wellness Coalition website to provide current information to the public about health topics and events. The Community Health Needs Assessment as well as the Community Health Improvement Plan (CHIP) are distributed widely to our community partners. Every six months, a CHIP progress report is shared on our websites. Our internal communication has been enhanced by using formal agendas at all weekly staff meetings so everyone is aware of new projects or developments.

The second objective is to enhance Board of Health understanding of public health programs and services. Many of the meeting agendas include in-services or trainings on topics to educate board members. The board members have been kept abreast of accreditation progress and support the effort. The board is currently being surveyed along with staff for the new strategic plan. Although we have new board members, we will be working to orient them to the duties of a board member and provide them with training as indicated.

Overall, I believe the strategic plan was a good document that has guided us towards excellence. The core values remain very important to our practice today and as we update the plan we will determine if additional values need to be added to help us reach the overarching goal of eliminating health disparities in our community as we strive to make our county the healthiest in the state.

Kathy Munsey
Health Officer

February 29, 2016

Healthiest Wisconsin 2020

Twelve Focus Areas and Objectives

Alcohol and Drug Use

- Change underlying attitudes, knowledge and policies
- Improve access to services for vulnerable people
- Reduce risky and unhealthy alcohol and drug use

Chronic Disease Prevention and Management

- Promote sustainable chronic disease programs
- Improve equitable access to chronic disease management
- Reduce chronic disease health disparities

Communicable Diseases

- Immunize
- Prevent disease in high-risk populations

Environmental and Occupational Health

- Improve the quality and safety of the food supply and natural, built and work environments
- Promote safe and healthy homes in all communities

Healthy Growth and Development

- Assure children receive periodic developmental screening
- Improve women's health for healthy babies
- Reduce disparities in health outcomes

Injury and Violence Prevention

- Create safe environments and practices through policies and programs
- Improve systems to increase access to injury care and prevention services
- Reduce disparities in injury and violence

Mental Health

- Reduce smoking and obesity among people with mental disorders
- Reduce disparities in suicide and mental disorders
- Reduce depression, anxiety and emotional problems

Nutrition and Healthy Foods

- Increase access to healthy foods and support breastfeeding
- Make healthy foods available for all
- Target obesity efforts to address health disparities

Oral Health

- Assure access for better oral health
- Assure access to services for all population groups

Physical Activity

- Design communities to encourage activity
- Provide opportunities to become physically active
- Provide opportunities in all neighborhoods to reduce health disparities

Reproductive and Sexual Health

- Establish a norm of sexual and reproductive health across the life span
- Establish social, economic and health policies to improve equity in sexual health and reproductive justice
- Reduce disparities in sexual and reproductive health

Tobacco Use and Exposure

- Reduce use and exposure among youth
- Reduce use and exposure among adults
- Decrease disparities among vulnerable groups

County Health Rankings & Roadmaps
 Building a Culture of Health, County by County

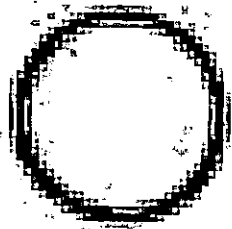
	Wisconsin	Adams (AD), WI	Green Lake (GL), WI	Juneau (JU), WI	Marquette (MQ), WI	Waushara (WR), WI	Waupaca (WP), WI
Health Outcomes		67 (63)	25 (52)	55 (67)	49 (65)	53 (60)	50 (55) → 2015
Length of Life		70	17	59	55	58	47
Premature death	6,000	8,300	5,200	7,500	7,000	7,300	6,400
Quality of Life		64	46	47	29	45	60
Poor or fair health	13%	14%	13%	15%	13%	14%	13%
Poor physical health days	3.4	3.6	3.5	3.6	3.4	3.4	3.3
Poor mental health days	3.4	3.3	3.5	3.4	3.4	3.4	3.4
Low birthweight	7%	7%	6%	6%	6%	6%	7%
Health Factors		70 (70)	35 (41)	65 (69)	58 (64)	56 (57)	24 (34)
Health Behaviors		57	25	69	40	53	17
Adult smoking	16%	16%	16%	18%	16%	17%	16%
Adult obesity	29%	31%	31%	34%	33%	32%	26%
Food environment index	7.9	7.8	8.3	7.7	8.4	8.6	8.0
Physical inactivity	22%	25%	23%	29%	25%	27%	25%
Access to exercise opportunities	81%	36%	56%	39%	15%	28%	63%
Excessive drinking	24%	23%	24%	23%	22%	22%	25%
Alcohol-impaired driving deaths	38%	61%	23%	42%	33%	36%	42%
Sexually transmitted infections	411.6	130.6	204.8	184.0	111.8	151.3	257.0
Teen births	26	44	25	36	27	39	28
Clinical Care		70	40	56	61	64	36
Uninsured	11%	13%	11%	13%	13%	14%	11%
Primary care physicians	1,220:1	20,480:1	900:1	1,210:1	15,180:1	4,050:1	1,630:1
Dentists	1,590:1	10,110:1	2,690:1	2,930:1	5,020:1	1,610:1	2,600:1
Mental health providers	590:1	2,890:1	1,350:1	1,890:1	1,370:1	1,100:1	1,580:1

	Wisconsin	Adams (AD), WI	Lake (GL), WI	Juneau (JU), WI	Marquette (MQ), WI	Waushara (WR), WI	Waupaca (WP), WI
Preventable hospital stays	48	56	52	60	50	59	41
Diabetic monitoring	90%	87%	89%	91%	90%	89%	85%
Mammography screening	71%	60%	64%	64%	66%	65%	72%
Social & Economic Factors		70	41	59	63	55	32
High school graduation	88%	88%	92%	92%	88%	89%	91%
Some college	67%	47%	54%	51%	50%	50%	54%
Unemployment	5.5%	8.8%	6.5%	6.7%	7.2%	7.2%	5.8%
Children in poverty	18%	29%	20%	21%	22%	22%	16%
Income inequality	4.3	3.5	3.9	4.0	3.7	3.9	3.6
Children in single-parent households	31%	36%	26%	32%	33%	24%	26%
Social associations	11.8	9.8	21.1	14.7	10.5	17.3	16.8
Violent crime	255	117	43	208	56	106	109
Injury deaths	65	98	75	100	97	65	76
Physical Environment		60	24	41	40	33	26
Air pollution - particulate matter	11.5	11.8	11.8	11.8	11.8	11.6	11.4
Drinking water violations		Yes	No	No	No	No	No
Severe housing problems	15%	14%	12%	15%	15%	15%	13%
Driving alone to work	80%	80%	79%	81%	79%	78%	82%
Long commute - driving alone	26%	41%	30%	30%	41%	37%	31%

Note: Blank values reflect unreliable or missing data

2016

***Instructions-we have \$10,000 to spend on programming. Based on the information you just received. How would you distribute those funds? Note: You can give all \$10,000 to one program or divide it. We will use this information to help us determine which areas the community sees as most important to address.**

\$10,000	\$10,000
Green Lake County Needs Assessment	
	
\$10,000	\$10,000
<p>_____ Alcohol & Drug Use</p> <p>_____ Communicable Disease Health</p> <p>_____ Healthy Growth & Development</p> <p>_____ Mental Health</p> <p>_____ Oral Health</p> <p>_____ Reproductive & Sexual Health</p>	<p>_____ Chronic Disease Prevention & Management</p> <p>_____ Environmental & Occupational Health</p> <p>_____ Injury & Violence Prevention</p> <p>_____ Nutrition & Healthy Foods</p> <p>_____ Physical Activity</p> <p>_____ Tobacco Use & Exposure</p>