

Family Health is central to our society's well-being. The health of the family plays an important role in both the health and disease of its members, in the prevention and treatment of individual illnesses, in the care of its children and dependent adults, and in the assurance of their emotional well-being.



Lincoln County's 2018 Family Health Services Annual Report



In this Annual Report:

- ❖ Program Updates
- ❖ Data Dashboard
- ❖ Performance Management Objectives
- ❖ Program Evaluation





Program Updates

➔ **Health Equity:** This year Lincoln County Health Department chose Health Equity as one of the grant objectives for the Maternal Child Health Program.

“Health equity means that everyone has a fair and just opportunity to be healthier. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.” - Robert Wood Johnson Foundation

On October 5, 2018, staff from MATCH (Mobilizing Action for Community Health) at the University of Wisconsin Population Health Institute presented two Health Equity 101 trainings; one to LCHD staff and a separate one to Lincoln County partners. Evaluations from both sessions indicated that 100% felt this training was applicable to the work they do and many indicated additional training and partner collaboration was needed.

➔ **Safe Sleep – Addition of Secondhand Smoke in the Messaging:** The ABCs of safe sleep message (A=Alone, B=Back, C=Crib) has been expanded to include “s” for smoke free environment. Messaging to the public including handouts were updated to reflect this change.

➔ **Gun Lock Kits-** 125 gun lock packets distributed were distributed at local businesses that sell guns with 5 evaluations completed. Of the 5 evaluations, 40% of individuals that returned the survey were familiar with the 11 Commandments of Gun Safety. All respondents were able to identify one gun safety measure they take in their own households. This program was funded by Ascension Good Samaritan Hospital

➔ **Adolescent Suicide** The Health Department worked with the Lincoln County Mental Health Coalition to coordinate the evidence-based suicide prevention practices with community groups. During 2018, three Mental Health First Aid Trainings were offered in Merrill and Tomahawk. A total of 53 individuals were trained. Mental Health First Aid is an 8-hour, evidence based course that teaches participants how to help someone who is developing a mental health problem or experiencing a mental health crisis. The training helps participants identify, understand, and respond to signs of addiction and mental illness. Financial support was provided by Ascension Good Samaritan Hospital.

➔ **Dental therapy legislation circulates** Representative Mary Felzkowski and Senator David Craig are promoting a pathway for licensing dental therapists in Wisconsin. Dental therapists must graduate from a training program accredited by the Commission on Dental Accreditation, the same entity which oversees the rigorous training of both dentists and dental hygienists. Dental therapists would be licensed by the Wisconsin Dentistry Examining Board and be required to complete 12 credits of continuing education each biennium between renewals. This provider would work under general supervision of a dentist and require a collaborative management agreement with a practicing dentist. Providing dental practices the option to include these well-trained dental professionals in their dental teams will allow for increased access, lower practice costs, and savings for the state, all without compromising quality of care.



Family Health Dashboard 2018



Injury Prevention

Preventable Child Deaths

0 | # of preventable child deaths
Lincoln County average: < 1

Suicides

7% | # of suicides
Lincoln County average: 3.5



Oral Health

Caries Experienced

24% | % caries experienced among Early Childhood and Head Start
Lincoln County Average: 22%

61% | % caries experienced among 2nd and 3rd grade
Lincoln County Average: 48%

55% | % caries experienced among 6th and 7th grade
Lincoln County average: 38%

Dental Sealants

106 | # of 2nd and 3rd graders that received dental sealants
Lincoln County average: 116

60 | # of 6th and 7th graders that received dental sealants
Lincoln County average: 61

Untreated Decay

12% | % untreated decay experienced among Early Childhood and Head Start
Lincoln County Average: 18%

35% | % untreated decay experienced among 2nd and 3rd grade
Lincoln County Average: 27%

41% | % untreated decay experienced among 6th and 7th grade
Lincoln County average: 21%

Urgent Care Follow-up

7% | % of students that participated in Seal-a-Smile program that received follow-up for urgent dental needs.
Lincoln County average: 4.3%



Maternal Child Health

Dental Care During Pregnancy

37% % of moms that had a visit with a LCHD nurse (telephone or face to face) who indicated they had dental care during their pregnancy.
Lincoln County Average: first tracked in 2018

Visit by Public Health Nurse

23% % of moms that received a telephone or face to face visit by public health nurse.
Lincoln County Average: 20%

Birthweight

17 # of infants born less than 2,500 grams
Lincoln County average: 12

Breastfeeding

83.2% % of infants ever breastfed
Wisconsin: 82.6

PNCC Enrollment

42% % of PNCC referrals that enroll in the PNCC program
Lincoln County Average: first tracked in 2018

PNCC Referral Follow-up

% % of PNCC clients that complete their follow-up to programs and resources referred to them by the public health nurse.
Not currently being tracked. Plan to track in 2020.

Smoking During Pregnancy

65 # of infants born to mothers who smoke during their pregnancy
Wisconsin: 13.7%
Lincoln County Average: 56

Depression

85% % of pregnant women enrolled in PNCC who received a depression screening.
Wisconsin Average:
Lincoln County Average:



Dashboard Data Detail

Below are the abbreviated references for the data presented in the dashboard. Note that some measures have more years of data available.



Injury Prevention

Preventable Child Deaths: Number of unnatural deaths that occurred in Lincoln County children under 18 years old. **Source:** Fatality Review Case Reporting System; **Year of Data:** 2018 **Lincoln County Average:** 2015-2018

Suicide Deaths: Number of suicide deaths that occurred in Lincoln County for all ages. **Source:** Wisconsin Vital Records. **Year of Data:** 2018 **Lincoln County Average:** 2015-2018



Oral Health

Caries Experienced: Percent of caries experienced among Early Childhood and Head Start.

Source: LCHD Database **Year of Data:** 2018 **Lincoln County Average:** 2014-2017

Percent of caries experienced among 2nd & 3rd grade; Percent of caries experienced among 6th & 7th grade

Source: Seal A Smile Database **Year of Data:** 2018 **Lincoln County Average:** 2015-2017

Untreated Decay:

Percent of untreated decay among Early Childhood and Head Start

Source: LCHD Database **Year of Data:** 2018 **Lincoln County Average:** 2014-2017

Percent of untreated decay among 2nd & 3rd grade; Percent of untreated decay among 6th & 7th grade

Source: Seal A Smile Database **Year of Data:** 2018 **Lincoln County Average:** 2015-2017

Dental Sealants: Number of 2nd & 3rd graders that received dental sealants; Number of 6th & 7th graders that received dental sealants **Source:** Seal A Smile Database **Year of Data:** 2018 **Lincoln County Average:** 2015-2017

Urgent Care Follow-up:

Percent of students that participated of Seal-a-Smile program that received follow-up for urgent dental needs. **Source:** Seal A Smile Database **Year of Data:** 2018 **Lincoln County Average:** 2015-2017



Maternal Child Health

Dental Care During Pregnancy: % of moms that had a visit (telephone or face to face) who indicated they had dental care during their pregnancy. **Source:** LCHD database **Year of Data:** 2018

Visit by Public Health Nurse: % of moms that received a telephone or face to face visit by public health nurse. **Source:** Lincoln County Health Department Records **Year of Data:** 2018 **Lincoln County Average:** 2015-2017

Birthweight: # of infants born less than 2,500 grams. **Source:** Wisconsin Interactive Statistics on Health **Year of Data:** 2017 **Lincoln County Average:** 2016-2014

Breastfeeding: % of infants ever breastfed **Source:** Wisconsin Department of Health MCH Profiles **Year of data:** 2009-2011 **Source:** **Year of Data:** **Lincoln County Average:**

PNCC Enrollment: % of PNCC referrals that enroll in the PNCC program. Lincoln County Average: **Source:** LCHD MCH database **Year of Data:** 2018 – began tracking for first time this year.

PNCC Referral Follow-up: Not currently being tracked; will begin in 2020.

Smoking During Pregnancy: # of infants born to mothers who smoke during their pregnancy **Source:** Wisconsin Interactive Statistics on Health **Year of Data:** 2017 **Lincoln County Average:** 2016-2014

Depression: % of pregnant women enrolled in PNCC who received a depression screening. **Source:** LCHD database **Year of Data:** 2018



Injuries are a leading cause of death for all ages in Wisconsin and the United States. Injury prevention programs aim to promote health and safety, while reducing risk for injury, both unintentional and intentional.

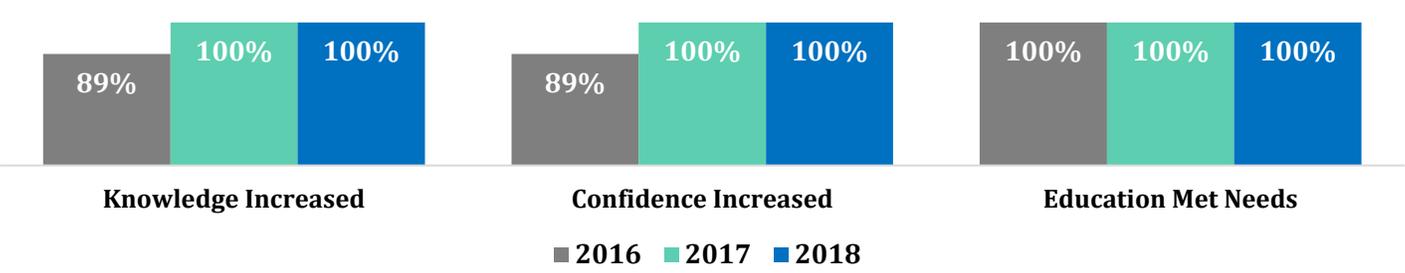
Program Performance Objectives

Car Seat Program

Goal: By December 31, 2018, 100% parents/guardians receiving a child passenger seat (CPS) through LCHD will report that education met their needs and that their knowledge and confidence in proper car seat installation increased “somewhat” or “significantly”.

A Majority of Car Seat Program Participants are Satisfied with the Program

All **2018** participants reported increased knowledge and confidence after their car seat appointment.



Results: Although Car Seat Program participants continue to report satisfaction with the program, the number of car seats issued has significantly decreased over the last 4 years. In 2018, only 5 car seats were issued (2017 – 6 seats, 2016 – 19 seats). Reasons for this reduction could be duplication of services; other agencies are now offering car seats to clients. In addition, we have a limited supply of car seats since we are no longer eligible for the Department of Transportation Grant. We no longer has convertible seats available, which is the most commonly requested seat. Referrals are often made to outside agencies to accommodate that need.

Mental Health Training

Goal: By December 31, 2018, 100% of Mental Health First Aid participants will report increased confidence in recognizing the signs that someone may be dealing with a mental health problem or crisis.

Results: In 2018, at total of 53 individuals from Merrill and Tomahawk participated in Adult and Youth Mental Health First Aid. A majority (91%) of participants reported increased confidence in recognizing the signs of a mental health or crisis after completing the training. This percentage was slightly lower than previous year’s averages (2017 – 98%, 2016 – 97%).

91%
Reported confidence in knowing the signs of a mental health problem or crisis



Oral Health

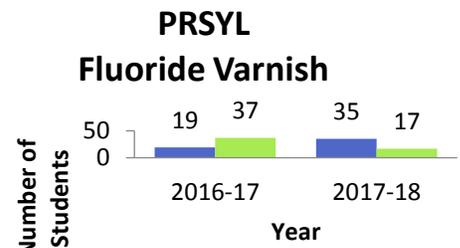
Oral health is essential to the general health and well-being of all Lincoln County residents. You cannot be healthy without oral health. Lincoln County continues to work on addressing the profound and consequential oral health disparities within our population primarily relate to income and age, so all can reach good oral health.

Program Performance Objectives

Fluoride Varnish Program

Goal: By June 31, 2018, there will be a 5% increase in the number of students who receive 3 out of 3 fluoride varnish applications at Pine River School for Young Learners (PRSYL).

Results: For the school year 2017-18, 52 students receive at least 3 fluoride varnishing which compares to 56 students in 2016-2017. Some students miss applications because they are absent on the days varnish clinics. A public health nurses does follow-up after each clinic in to reach students that were absent. There were 233 total varnish applications in 2017-18 compared to 206 total applications in 2016-17. This increased number of applications for the 2017-18 school year shows a greater turnover in student population and increased number of new students later in the year. These later students were not eligible to receive 3 or more varnishes during the same period as well as students leaving the program.

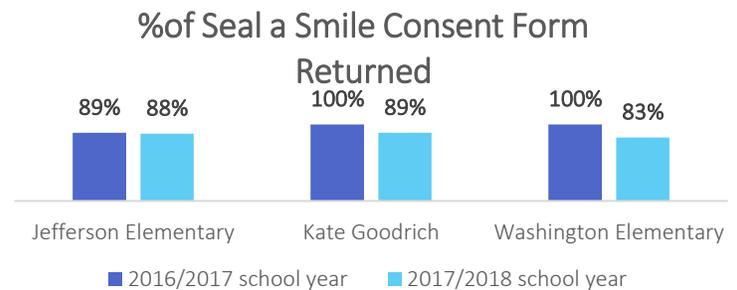


Increase Participation in Seal a Smile

Obtaining signed parental consent forms is a critical component of successful school-based sealant programs. In general, signed consent form return rates are between 40 to 60%. Some of the reasons why parents may not sign consent forms are: a) failure of the child to bring the consent form home or give it to the parents, b) parent's lack of knowledge about the benefits of sealants, c) other health, and social, cultural or family factors.

Goal: By June 30, 2018, Merrill Elementary schools participating in the Seal a Smile Program will have a 100% return of student consent forms.

Results: A total of 165 Seal A Smile consent forms were distributed in 2017-18 to students with 22 consents or 13% not being returned. Overall, our return rate for consents was 87%, which is higher than the general return rate. Encouraging the school staff by promoting the gift card for 100% return of consents was difficult for the 2017-18 year program in which only 2 out of 7 teachers/classrooms returned 100% consent forms. The teaching staff report it is very difficult to have certain families return paperwork to school at all.





Healthy Babies, Healthy Futures



Envision a nation where all mothers, children and youth and their families are healthy and thriving. The mission of Family Health Services is to improve the health and well-being of mothers, infants, children, and youth and their families by ensuring access to health and safety.

Program Performance Objectives

Promote Safe Sleep Messages

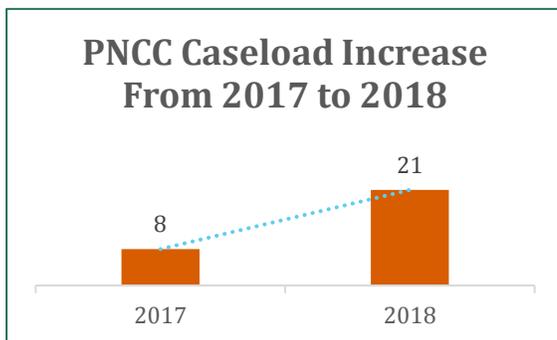
Goal: By December 31, 2018, LCHD will implement 3 strategies to promote safe sleep practices to the community using common messaging. This messaging was the ABCs of Safe Sleep: Alone, On Back, In a Crib and In a Smoke Free Environment.

Results:

Four strategies were implemented to promote safe sleep in our community using common messaging. Two Community Events were Children's Fest and Community Night Out. See diagram to the right.



Increase Prenatal Care Coordination Case Load



Goal: By December 31, 2018, Lincoln County Health Department will increase its PNCC caseload by 500%.

Results: In 2018, PNCC program materials were revised and distributed to agencies that provide referrals to LCHD for PNCC Services. The new format was more appealing and the content was updated. The PNCC referral form was combined with the Cribs for Kids and Car Seat referral forms making it easier for agencies to initiate a referral to any one of these LCHD programs. In 2018, 21 women were on the LCHD PNCC caseload. This represented a 162.5% increase from 2017. 26

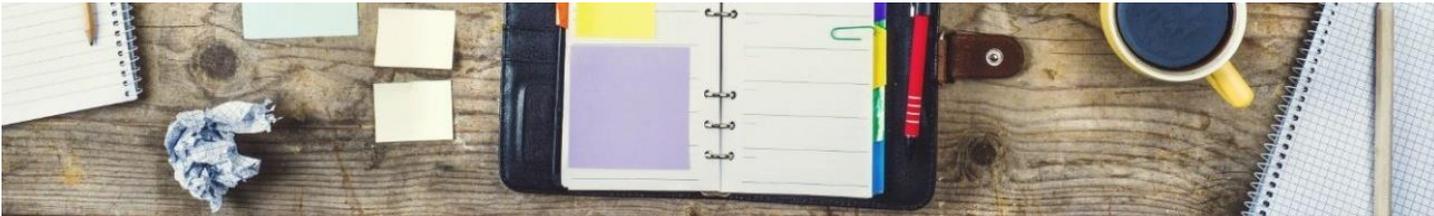
Referrals were provided to the program with most coming from health care providers and WIC.

Increase Awareness of Lead Poisoning Prevention

Goal: By December 31, 2018, LCHD will provide 4 media outreach efforts to provide lead information to Lincoln County residents.

Results: In 2016, 157 people were reached with 5 lead posts on Facebook. In 2017, 318 people were reached with 6 posts. This resulted in a 103% increase in the number of those reached.

In 2018, 363 people were reached with 4 lead posts on Facebook. This resulted in a 14% increase in the number of those reached from 2017. Data is saved on our quarterly Facebook Report.



Program Evaluation

Increase Participation of Postpartum Home Visits

Quality Improvement Project was completed in 2018 with the aim to increase postpartum face to face visits by 50% by establishing trust and perceived value of our services.

2017	2018
-16 face to face visits (10 home, 6 office, 4 PNCC clients)	-24 face to face visits (22 home, 2 office, 8 PNCC clients)
-27 telephone visits	-34 telephone visits

Current Process: The Director receives all postpartum referrals and birth reports and triages them based on risk factors into low, medium or high categories. They are then assigned to staff. Low postpartum families receive a mailing and a letter with the offer of a face to face visit if interested. Medium and high risk families are contacted by phone and offered a face to face visit. Fewer families are accepting a face to face visit; more, however, accept a telephone visit. A face to face visit can be in the home, the office or other mutually agreed upon location.

Strategies to reach this goal: The following are the strategies implemented during this QI project.

- Create a new materials for a mailing to be sent to client with a follow-up phone call.
- New materials include brochure, introductory letter, and business card with staff photo.
- Outreach to local physicians at provider meetings and mailing to OB-GYN providers
- Complete a Customer Satisfaction Survey at the telephone or face-to-face visit.

Results: Postpartum visits did increase by 50%. Staff and clients reports this process better prepared the clients with questions and has opened the door to more conversations. Nurses reported they have a better call back from families. Families were more likely to set up a time for the nurse to call them back if the timing was inconvenient. Some parents called LCHD ahead of staff calls or after because they had the nurse’s contact information. The new process will continue in 2019.

Postpartum Home Visit Customer Satisfaction Surveys

Customer Satisfaction Surveys: In 2018, staff completed 28 surveys after phone calls or face-to-face visits. 100% of respondents reported staff contacted them in an appropriate amount of time, 86% learned something as a result of contact with LCHD and 96% had their questions answered.

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