



## Community Health Needs Assessment 2022-2024

Approved by Board of Directors on December 20, 2021

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## WELCOME TO THE COMMUNITY HEALTH NEEDS ASSESSMENT

Sauk Prairie Healthcare (SPH) is pleased to present the 2022-2024 (2022 Tax Year) Community Health Needs Assessment (CHNA). A CHNA entails collecting demographic and health statistics of Sauk Prairie Healthcare's community, discussing issues with community leaders and organizations, and prioritizing the unmet health needs of area residents. The goal of this report is to provide residents with a deeper understanding of the health needs in their community, as well as help guide SPH in its community health planning efforts and development of an implementation strategy to address the needs described in this document. A plan to address the health needs of the community and implementing this plan based on the findings shared here will result in our Community Health Improvement Implementation Plan (CHIIP) which will be finalized by March 2022.



This document represents Sauk Prairie Healthcare's formal commitment to improving the health of our community. This commitment extends to the wonderful partnerships we have with residents and organizations throughout our service area. We are thankful for the engagement and collaboration of many organizations including Sauk Prairie Healthcare Foundation, Sauk County Health & Wellness Coalition, Sauk County Health Department, Prairie Clinic, S.C., the school districts of Lodi, River Valley, Sauk Prairie, and Wisconsin Heights, local and county law enforcement agencies, area fire departments, area ambulance services, Northwest Dane Senior Services, Reach Out Lodi, Sauk Prairie Wellness Movement, Sauk Prairie Chamber of Commerce, area nursing homes, members of the clergy, the cities and villages of Arena, Black Earth, Mazomanie, Merrimac, Lodi, Plain, Sauk City, Prairie du Sac, and Spring Green, and many other organizations and individuals.

How do we make a difference in the health of the community we serve? Due to the complexity of this question, relying only on impressions, opinions and anecdotes no longer works when identifying identified needs as getting better or worse. By using a process-and data-driven approach, we can determine if we are making real progress in areas identified as having the greatest need. As you will read, we held several focus groups, conducted an extensive survey of residents, and analyzed large amounts of health indicator data to identify the most important unmet health needs of the communities we serve.

There is no question that the COVID19 pandemic we continue to experience influences many aspects of health in the community, especially its impact on medically fragile individuals and marginalized sectors of the population. In the not-to-distant future, we will know much more about short-term and long-term medical and psychological issues caused by the SARS-CoV-2 virus, so you can expect to see more about that in future CHNA documents. Despite the pandemic, we continue to focus on high priority community health issues. We recognize that we cannot address every need in the community, so our focus is on those issues that are important to the community and that Sauk Prairie Healthcare can positively impact.

Yours in good health,

Shawn Lerch, FACHE  
Chief Executive Officer  
Sauk Prairie Healthcare

## Executive Summary

### Key Priorities

Sauk Prairie Healthcare determined priorities for the 2022-2024 CHNA and CHIIP. Priorities chosen are:

- Mental Health – access to services, training and education, reducing stigma
- Substance Misuse – use and abuse of alcohol, drugs, nicotine
- Healthy Lifestyles – eat smarter and move more to prevent chronic medical conditions
- Social Isolation – isolation caused by the lack of family and friends or geographic and/or transportation inaccessibility
- Housing – that is safe, and people can afford

### Setting Priorities

As part of the CHNA requirement, hospitals are required to evaluate the needs that are identified and validated through the data analysis. In order to do so, hospitals must establish specific criteria that will be used to assess each of the identified community needs.

A two-step prioritization process is recommended. Step one of this process focuses on community-specific criteria that are rated by community members to evaluate the identified needs. This step is subjective and measures community member's perceptions of the identified needs using a strongly agree to strongly disagree 5-point Likert scale. Once the community has evaluated their needs based on their perceptions, step two is that this list is sorted in descending order by priority and then reviewed by your internal prioritization team using system feasibility criteria. The internal criteria are more objective and focus on alignment to key strategies, resources, magnitude of issue, and overall capability. Based on internal prioritization, the top-ranking priorities establish the areas of focus for the Community Health Improvement Implementation Plan.

The Health & Wellness Steering Committee considered the Social Determinants of Health (SDoH) when developing the community health survey and identifying priority areas. These social determinants can either contribute to poor health outcomes or support a healthy community including Access to Care, Education, Community Support, Economic Stability and the Built Environment.



Upon completion of primary data collection, the Sauk County Data council met monthly to analyze the community health survey, community conversations, and key informant interview responses. The analysis consisted of creating a quantitative method for measuring the qualitative data and applying a healthy equity lens to fully understand each area of improvement identified by area residents.

Based on the input and research described throughout this document, key community health priorities were selected based on the criteria below:

- Magnitude: how many people are affected?
- Severity: how bad is it?
- Time Trend: is it getting better or worse?
- Comparisons: how do we compare to the state, etc.?
- Disparities: are some groups impacted more?
- Community Readiness: is it feasible to achieve success?

### Collaboration is Key



Sauk Prairie Healthcare is proud to be a partner of the Sauk County Health and Wellness Coalition which has been working together for more than 10 years. Through the collaborative efforts of our steering committee partners – Sauk County Health Department, SSM Health St. Clare Hospital, Reedsburg Area Medical Center – data collection, information sharing, and priority setting activities were leveraged and applied to each member’s CHNA. An extensive list of individuals and organizations who participated with our coalition are listed in the Appendix.

Since the adoption of the 2019-2021 CHNA, the Sauk Prairie Intergovernmental Planning Commission (consisting of representatives from the Town of Prairie du Sac and Villages of Sauk City and Prairie du Sac) worked to recognize our health priorities and incorporate them into the Sauk Prairie Comprehensive Plan ([Link to SP Comprehensive Plan](#) see pages 25-27). This action was a critical step in demonstrating that community leadership is invested in improving the health of residents. SPH anticipates working with other municipalities to incorporate health priorities into their Comprehensive Plans.



## About Sauk Prairie Healthcare

Sauk Prairie Healthcare (SPH), founded in 1956, is an independent, not-for-profit association model 501(c)(3) corporation headquartered in Prairie du Sac, Wisconsin. SPH is locally governed by an 11-member board of community members. SPH operates four primary care clinics, three surgical specialty clinics (orthopedics, general surgery, and urology), several specialty services (wound care, diabetes management, sleep center, audiology, cardiac and pulmonary rehabilitation) an outpatient rehabilitation and wellness facility, and a 36-bed acute care hospital. In 2014, SPH opened its new hospital facility on a new campus where there are also multi-specialty clinics operated by SSM-Dean Healthcare and the University of Wisconsin Hospital & Clinics, and a single-specialty clinic operated by Prairie Clinic, S.C., (OB/Gyn) and Associated Podiatrists.

## About Our Community

### Service Area

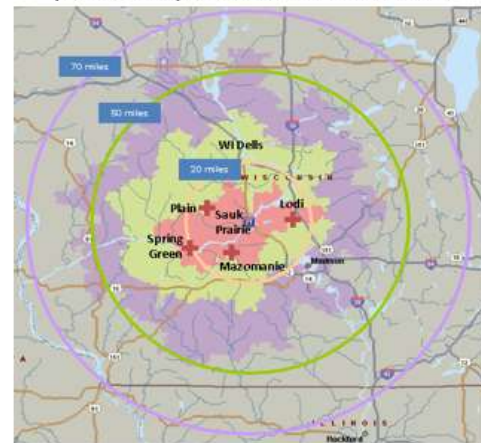
For market analysis purposes, Sauk Prairie Healthcare defines its primary service area as a 12 zip code area covering 700 square miles in which approximately 43,000 people reside. For purposes of this CHNA, a very similar boundary is used, but it is defined by the boundaries of the Lodi, Sauk Prairie, Wisconsin Heights, and River Valley school districts instead of zip code boundaries. The population of this area is 41,522. Although the differences between the two definitions in minimal, residents tend to identify with their school district, so for qualitative research we prefer using the school district boundaries instead of zip code and county lines. However, in almost all cases throughout this report, due to population-based reporting limitations, goals must be set and data must be reported at the county level.

Map of Sauk Prairie Healthcare's CHNA service area



The four school districts are outlined in red.

Map of the market reach for the services provided by Sauk Prairie Healthcare



Area shaded in pink represents the Primary Service Area.

## Demographic Snapshot

Current Demographics	SPH PSA	Sauk County	Columbia County	Wisconsin
Total Population	43,101	64,614	57,525	5,828,792
Households Count	17,865	27,155	23,946	2,417,076
Male Population Count	21,750	32,184	29,378	2,900,285
Female Population Count	21,351	32,430	28,147	2,928,512
Median Age	42	41	42	39
Median Household Income	75,758	64,611	72,640	68,762
Per Capita Income	40,537	32,822	38,075	36,232
Unemployment Rate	4.3%	4.7%	4.1%	4.8%

## Age Groups

The median age of the service area is 42 year while the State of WI is 39 years. Compared to the State, the Sauk Prairie Healthcare service area is slightly over represented in both the middle age (45-54) and the older age categories (55-64 and 65+). SPH's population is also slightly under represented in the young adult (20-24) and adult population (25-34) as compared with the State of Wisconsin.

Current Age Segmentation	SPH PSA	Sauk County	Columbia County	Wisconsin
Pop age 0-4	5.3%	5.9%	5.3%	5.6%
Pop age 5-9	6.0%	6.2%	5.6%	5.9%
Pop age 10-14	6.6%	6.4%	6.1%	6.2%
Pop age 15-19	6.1%	6.0%	5.8%	6.4%
Pop age 20-24	4.4%	5.5%	5.5%	6.6%
Pop age 25-29	5.1%	5.7%	5.9%	6.5%
Pop age 30-34	5.7%	6.0%	6.1%	6.3%
Pop age 35-39	6.4%	6.5%	6.4%	6.3%
Pop age 40-44	6.4%	5.9%	6.1%	5.9%
Pop age 45-49	6.4%	5.9%	6.1%	5.8%
Pop age 50-54	6.8%	6.2%	6.9%	6.3%
Pop age 55-59	7.8%	7.2%	7.8%	7.1%
Pop age 60-64	7.5%	7.1%	7.5%	6.9%
Pop age 65-69	6.7%	6.4%	6.5%	6.0%
Pop age 70-74	5.3%	5.2%	5.0%	4.7%
Pop age 75-79	3.3%	3.5%	3.3%	3.1%
Pop age 80-84	1.9%	2.2%	2.2%	2.1%
Pop age 85+	2.1%	2.4%	2.1%	2.2%

## Education

High school graduation rates are higher than comparison areas and the percent of population with bachelor or graduate is higher than Sauk and Columbia Counties.

Population Segmentation by Education	SPH PSA	Sauk County	Columbia County	Wisconsin
Pop 25+	30,858	45,226	41,254	4,035,073
Pop 25+ less than 9th grade	1.5%	2.4%	1.8%	2.5%
Pop 25+ 9th-12th grade no diploma	4.0%	6.1%	4.6%	4.8%
Pop 25+ HS graduate	32.0%	34.1%	33.5%	30.5%
Pop 25+ college no diploma	20.0%	20.5%	22.2%	20.0%
Pop 25+ Associate degree	13.0%	11.5%	13.2%	10.9%
Pop 25+ Bachelor's degree	19.8%	17.5%	17.4%	20.7%
Pop 25+ graduate or prof school degree	9.7%	7.9%	7.2%	10.7%

## Race/Ethnicity

There is little racial and ethnic diversity compared to the Wisconsin and the United States. The estimated population that is of Hispanic, Latino, or Spanish origin in the report area is 1,724. This represents 4.0% of the total report area population, which is significantly less than the state rate of 7.2%.

Current Population Segmentation by Race	SPH PSA	Sauk County	Columbia County	Wisconsin
White	94.5%	92.4%	93.9%	83.9%
Black	0.9%	1.5%	1.9%	6.8%
American Indian/Alaskan Native	0.4%	1.0%	0.5%	0.8%
Asian	0.8%	0.8%	0.8%	3.1%
Hawaiian/Pacific Islander	0.0%	0.0%	0.1%	0.0%
Other Race	1.9%	2.4%	1.1%	2.8%
Multirace	1.4%	1.8%	1.6%	2.5%
Hispanic	4.0%	5.5%	3.8%	7.2%
Non-Hispanic	96.0%	94.5%	96.2%	92.8%

## Income

Household and per capita income is relatively high and the unemployment rate is comparatively low. The per capita income for the report area is \$40,537. This includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. The per capita income in this report area is the average (mean) income computed for every man, woman, and child in the specified area. The SPH service area has a per capita income that exceeds the state. However, considerable disparity is when the per capita income is compared by ethnicity. Data indicates that the Hispanic/Latino population has per capita income less than half that of the Non-Hispanic/Latino population.



## Medical Insurance

Little variation in the distribution in type of medical insurance exists between the Sauk Prairie Healthcare service area and the surrounding areas.

Medical Insurance Source	SPH PSA	Sauk County	Columbi a County	Wisconsin
From a union	3.1%	2.9%	3.2%	3.2%
From a place of work	43.9%	41.7%	43.6%	43.3%
From a fraternal or other membership group	0.8%	0.9%	0.8%	0.7%
State or national healthcare exchange	4.7%	4.9%	4.9%	4.7%
Other government source	6.3%	6.5%	6.6%	6.4%
Through an agent representing one company	5.9%	6.0%	5.6%	5.1%
Agent (broker) representing more than one company	3.8%	4.2%	4.0%	3.7%
Mail advertising or Phone contact (no agent)	1.4%	1.3%	1.4%	1.2%
Through the Internet	2.3%	2.0%	2.2%	2.1%
Medical Insurance - Kind of Policy: HMO	15.3%	14.9%	15.8%	15.8%
Medicaid - Type of Policy	9.1%	9.2%	8.9%	9.1%
Medicare - Type of Policy	23.7%	24.7%	24.6%	22.6%

## Assessing the Health of Our Community

### Data Sources

Several sources of data, both primary and secondary, were used to produce this report. The primary data used in this report came from Sauk County Health & Wellness Coalition Survey 2021 and a series of Community Conversations and Key Informant Interviews conducted in the Summer of 2021. Important secondary data sources include the Wisconsin County Health Rankings, Centers for Disease Control and Prevention, 2020 US Census and the latest American Community Survey which includes up-to-date, publicly available data for approximately 100 community indicators. The following is a description of the data sources and summary findings from each source.

### Community Survey

An important source of primary data for this assessment was a survey that was distributed throughout Sauk County and communities in other counties served by the hospitals in the Sauk County Health & Wellness Steering Committee's Data Council. The survey captured responses from 1,612 respondents which is about 3% of the population. For the SPH-specific service area, 404 surveys were completed. Generally speaking, there were no significant differences between the findings from the SPH-specific responses and the survey group as a whole.

The Data Council created the 40-question survey and all question underwent a health literacy review. The survey was conducted over a four-month period. Information about the administration of the survey is shown below:

- The Council made the survey available both online and in written format. Diverse populations had access to translators to complete the survey form.
- The survey database (SurveyMonkey) used skip logic to only show questions relevant to the survey respondent regarding their answers to previous questions.
- The survey was promoted in various ways:
  - Newspaper ads in the Sauk Prairie Eagle, Baraboo News Republic, Reedsburg Times Press and the Wisconsin Dells Events
  - Online advertisements on websites and social media sites for each entity in the Health and Wellness Coalition
  - Media articles sharing purpose and information surrounding the survey
  - Internal communications within the Coalition entities
  - Flyers advertising the survey were created and distributed at events such as COVID19 vaccination clinics
  - Flyers were also handed out to local organizations including libraries, Aging and Disability Center (ADRC), Veteran's Office, The Department of Human Services, grocery stores and local businesses
- 592 surveys were needed to have a confidence level of 95% and a 4% margin of errors since the SPH service area has a total population of approximately 43,000. There were 404 valid responses to the survey from respondents from the SPH service area.
- Once the survey responses were tabulated, the survey results were evaluated and analyzed using descriptive statistical analysis and analysis of variance (ANOVA) procedures.
- The full results were distributed to, and discussed, by the Data Council.

### **Community Survey Findings Summary:**

Analysis of the survey results was done by comparing responses to “dependent” statements (i.e., “My community is a good place to raise children”) with “independent” variables (i.e., place of residence, age, race, income). Most statistical differences among survey respondents were found to be based on Race/Ethnicity, Educational Attainment, and Household Income.

Survey questions gauging the attitude of respondents were rated on a scale of 1 to 5 with 5=Strongly Agree, 4=Agree, 3=Neither Agree or Disagree, 2=Disagree, 1=Strongly Disagree. Questions with an average score below “3” include:

- My community has enough jobs that pay a living wage.
- There are enough safe, affordable houses and apartments in my community.
  - Especially those with HH income below \$50K.
- Decision in my community are made with resident participation.

- How would you rate our physical health, in general? (Scale of 1-5, 5=Excellent, 1=Poor)
- How would you rate your mental health, in general? (Scale of 1-5, 5=Excellent, 1=Poor)

Survey results also indicate that lower educational attainment and lower household income (<\$50K) predicted that respondents are less likely to:

- Get along with neighbors
- Gather in the community
- Feel decisions are made with resident participation
- Report good physical and mental health
- Have transportation

Overall, these findings come as no surprise, but they reinforce the need to focus efforts on under-represented or more vulnerable portions of the population. These are people who are at high risk of not receiving adequate medical care due to being uninsured/underinsured, are experiencing health disparities, or facing barriers related to geography, language, financial circumstances, transportation, stigma, accessibility to technology or knowledge or technology, medication compliance due to cost or coverage, access to healthy foods and low-income housing.

### **Survey Results: Statistical Differences and Identified Disparities**

#### **Race/Ethnicity**

Questions where there was a statistically significant difference in how white vs non-white people responded. For all these questions, people of color responded with lower scores.

- Question 2: Typically, there are opportunities for people like me to gather in my community.
- Question 4: Schools in my community provide a high-quality education for children.
- Question 6: My community is a good place to raise children.
- Question 7: I feel accepted in my community.
- Question 8: I receive useful information about health and services from my local public health department and/or healthcare providers.
- Question 11: Decisions in my community are made with resident participation.
- Question 12: My household has transportation that we can depend on to meet our daily needs.
- Question 13: My household can get healthy food to eat.
- Question 18: I and/or someone in my household experiences discrimination in my community.

## Educational Attainment

Questions where there was a statistically significant difference in how people with different education attainment levels responded. Education Attainment levels used: High School Graduate or Less, Some College, Bachelor's or More.

- Question 1: I get along with most of my neighbors.
  - Respondents with a HS Degree or Less are less likely to report that they get along with most of their neighbors than respondents with a Bachelor's Degree or more.
- Question 2: Typically, there are opportunities for people like me to gather in my community.
  - Respondents with HS Degree or Less are less likely to report that there are opportunities for people like me to gather in my community than those with a Bachelor's Degree or more.
- Question 4: Schools in my community provide a high-quality education for children.
  - Respondents with a Bachelor's Degree are more likely to report that the schools in my community provide a high-quality education than those with Some College or HS Grad or Less.
- Question 6: My community is a good place to raise children.
  - Respondents with a Bachelor's Degree are more likely to report that their community is a good place to raise children than respondents with a HS Grad or Less.
- Question 7: I feel accepted in my community.
  - Respondents with a Bachelor's Degree are more likely to report that they feel accepted in their community than respondents with a HS Grad or Less.
- Question 9: I feel safe in my community.
  - Respondents with Some College or HS Grad or Less are less likely to report that they feel safe in their community than respondents with a Bachelor's Degree or more.
- Question 10: The police help me feel safer in my community.
  - Respondents with a HS Grad or Less are less likely to report that the police help me feel safer in my community than respondents with a Bachelor's or More.
- Question 12: My household has transportation that we can depend on to meet our daily needs.
  - Respondents with HS Grad or less are less likely than respondents with a Bachelor's or More to report that they have transportation.
- Question 13: My household can get healthy food to eat.
  - Likelihood of ability to get healthy food increases with educational attainment level. HS Grad or Less are less likely than Some College, which are less likely than Bachelor's or More to report they can get healthy food to eat.
- Question 21: How would you rate your physical health, in general?

- Rating of general physical health improves with educational attainment level. HS Grad or Less are reported lower physical health than Some College, which is reported lower physical health than Bachelor's or more.
- Question 22: How would you rate your mental health, in general?
  - Respondents with a HS Degree or less are less likely to report that they are mentally healthy than respondents with a Bachelor's or more.

### Household Composition

Questions where there was a statistically significant difference in how people with different household composition types responded. Household Composition categories used: Not Married with Kids, Not Married without Kids, Married with Kids, Married without Kids

- Question 1: I get along with most of my neighbors.
  - Not Married Respondents with and without kids are less likely to report that they get along with most of their neighbors than those who are Married with and without kids.
- Question 2: Typically, there are opportunities for people like me to gather in my community.
  - Not Married Respondents with kids are less likely to report that there are opportunities for people like me to gather in my community than those who are Married with and without kids.
- Question 3: My community has enough jobs that pay a living wage.
  - Not Married Respondents without kids are less likely to report that my community has enough jobs that pay a living wage than Married respondents with and without kids.
- Question 4: Schools in my community provide a high-quality education for children.
  - Married Respondents without kids are more likely to report that Schools in my community provide a high-quality education for children than Not Married respondents with and without kids.
- Question 6: My community is a good place to raise children.
  - Not Married Respondents with kids are less likely to report that my community is a good place to raise children than Married Respondents with and without kids.
- Question 7: I feel accepted in my community.
  - Not Married Respondents with kids are less likely to report that they feel accepted in my community than Married Respondents with and without kids.
- Question 8: I receive useful information about health and services from my local public health department and/or healthcare providers.
  - Married Respondents without kids are more likely to report that they receive useful information about health and services from my local public health department and/or healthcare providers than Married Respondents with kids.
- Question 9: I feel safe in my community.
  - Married Respondents with kids are more likely to report that they feel safe in my community than Not Married Respondents with and without kids.



- Married Respondents without kids are more likely to report that they feel safe in my community than Not Married Respondents with kids.
- Question 10: The police help me feel safer in my community.
  - Not Married Respondents with and without kids are less likely to report that the police help me feel safer in my community than Married Respondents with kids.
- Question 12: My household has transportation that we can depend on to meet our daily needs.
  - Not Married Respondents without kids are less likely to report that their household has transportation that we can depend on than Married Respondents with kids.
- Question 13: My household can get healthy food to eat.
  - Married respondents with and without kids are more likely to report that their household can get healthy food to eat than Not Married respondents with and without kids.
- Question 21: How would you rate your physical health, in general?
  - Married Respondents with and without kids are more likely to rate their physical health better than Not Married Respondents with and without kids.
- Question 22: How would you rate your mental health, in general?
  - Married Respondents with and without kids are more likely to rate their mental health better than Not Married Respondents with and without kids.
  - Married Respondents without kids are most likely to rate their mental health better.

### **Household Income with and without kids**

Questions where there was a statistically significant difference in how people with different household income types responded. Household Income categories used: Under \$50K with Kids, Under \$50K without Kids, Over \$50K with Kids, Over \$50K without Kids.

- Question 1: I get along with most of my neighbors.
  - Respondents with Household income over \$50K with and without kids are more likely to report that they get along with most of their neighbors than those whose Household Income is under \$50k with and without kids.
- Question 2: Typically, there are opportunities for people like me to gather in my community.
  - Respondents with Income under \$50K with kids are less likely to report that there are opportunities for people like me to gather in my community than those who Income over \$50K.
- Question 3: My community has enough jobs that pay a living wage.
  - Respondents with Income under \$50K with kids are less likely to report that my community has enough jobs that pay a living wage than those who Income over \$50K with kids.
  - Respondents with Income under \$50K with no kids are less likely to report that my community has enough jobs that pay a living wage than those who Income over \$50K with and without kids.

- Question 4: Schools in my community provide a high-quality education for children.
  - Respondents with Income under \$50K with kids are less likely to report that Schools in my community provide a high-quality education for children than those whose Income is over \$50K with and without kids.
- Question 5: *There are enough safe, affordable houses and apartments in my community.*
  - Respondents with Income Under \$50K with Children are least likely to report that there are enough safe, affordable houses/apartments in my community.
- Question 6: My community is a good place to raise children.
  - Respondents with Income under \$50K with and without kids are less likely to report that my community is a good place to raise children than those whose Income is over \$50K with and without kids.
- Question 7: I feel accepted in my community.
  - Respondents with Income under \$50K with kids are less likely to report that they feel accepted in my community than those whose Income is over \$50K with and without kids.
- Question 9: I feel safe in my community.
  - Respondents with Income under \$50K with and without kids are less likely to report that they feel safe in my community than those whose Income is over \$50K with and without kids.
- Question 10: The police help me feel safer in my community.
  - Respondents with Income under \$50K with and without kids are less likely to report that the police help me feel safer in my community than those whose Income is over \$50K with and without kids.
- Question 11: Decisions in my community are made with resident participation.
  - Respondents with Income under \$50K without kids are less likely to report that decisions in my community are made with resident participation than those whose Income is over \$50K with and without kids.
- Question 12: My household has transportation that we can depend on to meet our daily needs.
  - Respondents with Household Income under \$50K with and without kids are less likely to report that their household has transportation they can depend on than households with income over \$50K.
  - Respondents with Household Income over \$50K with kids are also more likely than Households with income over \$50K without kids to report that they have transportation they can depend on.
- Question 13: My household can get healthy food to eat.
  - Respondents with Income under \$50K with and without kids are less likely to report that their household can get healthy food to eat than households with Income over \$50K with and without kids.
- Question 18: I and/or someone in my household experiences discrimination in my community.

- Respondents with income over \$50K and no kids were less likely to report that they experienced discrimination than those with income under \$50K with and without kids.
- Question 21: How would you rate your physical health, in general?
  - Respondents with Income over \$50K and without kids are more likely to rate their physical health better than Respondents with Income Under \$50K with and without kids.
- Question 22: How would you rate your mental health, in general?
  - Respondents with Income over \$50K and without kids are more likely to rate their mental health better than Respondents with Income Under \$50K with and without kids.

## Community Conversations and Key Informant Meetings

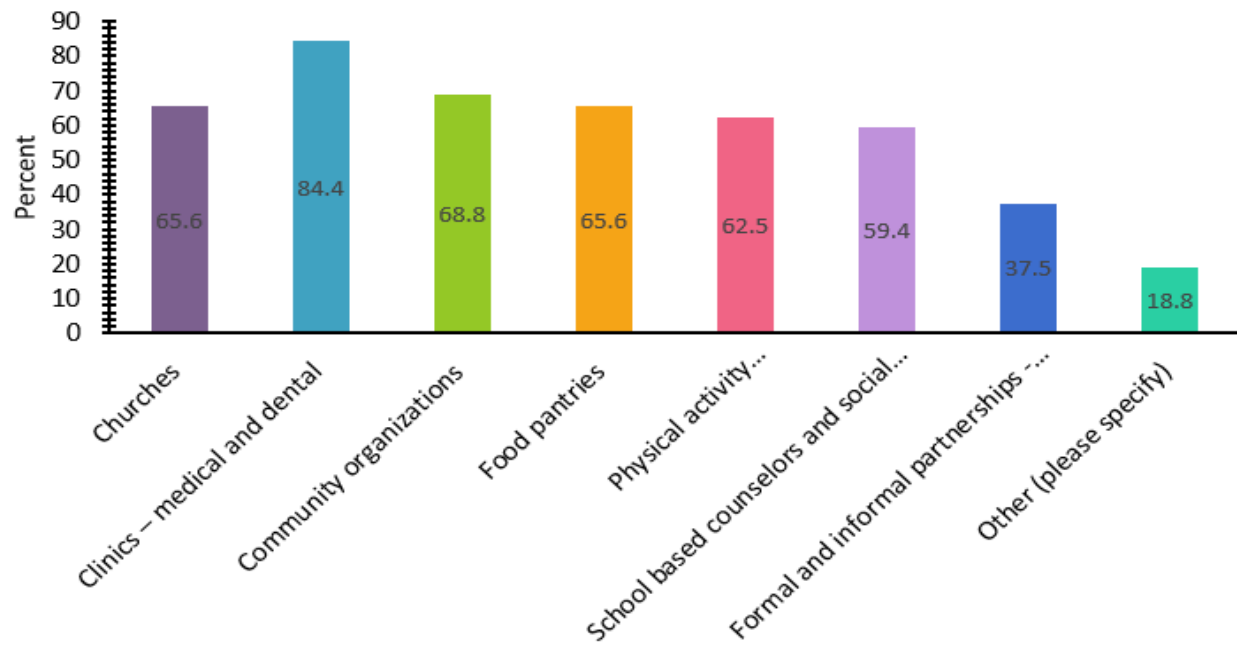
Key informant meetings and community conversations were conducted with members of area communities in order to hear personal perspectives on 1) What makes a healthy community? 2) What would make the community a healthier place?, and 3) What strengths can we build on to make the community healthier?

After all the key informant meetings were held, a follow-up survey designed to help prioritize issues raised was distributed to all who attended. The COVID19 pandemic created some issues that prevented meetings to be held in every community we serve. However, a plan is in place to conduct meetings in 2022 with key informants in Plain and Lodi. Follow up meetings with groups that were able to meet will also be held in 2022. The list of meetings held in 2021 appear in the Appendix.

### Community Conversations and Key Informant Meetings Summary:

#### *Obstacles preventing a healthy community:*

1. Lack of mental health services
2. Lack of affordable housing
3. Lack of affordable childcare
4. Alcohol and drug use/abuse
5. Social isolation due to geography or lack of social network (tied)

*Community attributes that can positively influence the health of the community:**Ideas to improve community health:**Top 5:*

1. Mental health support and teaching programs
2. Community shuttles to address isolation and lack of affordable transportation
3. Student community service programs
4. Grocery delivery programs
5. Volunteer chore services, Communication, Community events, Festivals (tied)



## County Health Rankings Key Findings

- Alcohol, tobacco, and other drug use is higher in Sauk County than in Wisconsin and is generally much higher than in top U.S. counties.
- Poor mental health days (4.3) exceed Wisconsin (4.0).
- Compared to the state and top U.S. counties, residents are more obese, BUT also more physically active.
- The “food environment” ranks highly. Good access but 8% food insecurity.
- Healthcare access rates relatively low for dental and mental health (compared to WI).
- Relatively high in avoidable hospital stays.
- Lagging in mammography screening and flu vaccinations.

## American Community Survey Key Findings:

- More than one-quarter (27.63%) of Sauk County households are “Cost Burdened” in which housing costs exceed 30% of income. Wisconsin is (2.6%).
- The annual rate of property crimes in Sauk County per 100,000 population is 2,401.70 compared to the State rate of 1,982.70.
- As of 2020, 93.07% of the population had access to high speed (>25MBPS) compared to 96.97% for Wisconsin.
- Sauk County has 9.68 liquor stores per 100,000 population compared to the State rate of 7.46.
- Sauk County has 93.58 fast food establishments per 100,000 population compared to the State rate of 66.50.
- Nearly one in five (18.7%) adults in Sauk County are smokers compared to the State average of 17.7%.
- The age-adjusted death rate (per 100,000 population) from cancer is 168.9 while the State rate is 154.2.
- The age-adjusted death rate (per 100,000 population) from coronary heart disease is 102.8 while the State rate is 87.0.
- The age-adjusted death rate (per 100,000 population) from stroke is 41.3 while the State rate is 33.6.



## The Role of Social Determinants in Promoting Health and Health Equity

Social determinants of health (SDOH) are the conditions in which people are born, grow, live, work and age that shape health. Improving the health of a community requires that we recognize the importance of SDOHs and their impact on the health delivery system.

The Kaiser Family Foundation offers the following construct for describing SDOH

- Social determinants of health include factors like socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care. Addressing social determinants of health is important for improving health and reducing longstanding disparities in health and health care.
- There are a growing number of initiatives to address social determinants of health within and outside of the health care system. Outside of the health care system, initiatives seek to shape policies and practices in non-health sectors in ways that promote health and health equity. For example, the availability and accessibility of public transportation affects access to employment, affordable healthy foods, health care, and other important drivers of health and wellness. Nutrition programs and policies can also promote health, for example, by supporting healthier corner stores in low-income communities, farm to school programs and community and school gardens, and through broader efforts to support the production and consumption of healthy foods. The provision of early childhood education to children in low-income families and communities of color helps to reduce achievement gaps, improve the health of low-income students, and promote health equity.

Within the health care system, there are multi-payer federal and state initiatives as well as Medicaid-specific initiatives focused on addressing social needs. These include models under the Center for Medicare and Medicaid Innovation, Medicaid delivery system and payment reform initiatives, and options under Medicaid. Managed care plans and providers also are engaged in activities to identify and address social needs. For example, 19 states required Medicaid managed care plans to screen for and/or provide referrals for social needs in 2017, and a recent survey of Medicaid managed care plans found that almost all (91%) responding plans reported activities to address social determinants of health.

Figure 1  
**Social Determinants of Health**

<b>Economic Stability</b>	<b>Neighborhood and Physical Environment</b>	<b>Education</b>	<b>Food</b>	<b>Community and Social Context</b>	<b>Health Care System</b>
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

**Health Outcomes**  
 Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



Unlike past CHNAs, participants in our community conversations and key informant interviews highlighted the both the high cost and limited availability of housing and the lack of social connectedness. Each of these are identified as Social Determinants of Health in the table shown above.

## KEY PRIORITIES

### Mental Health

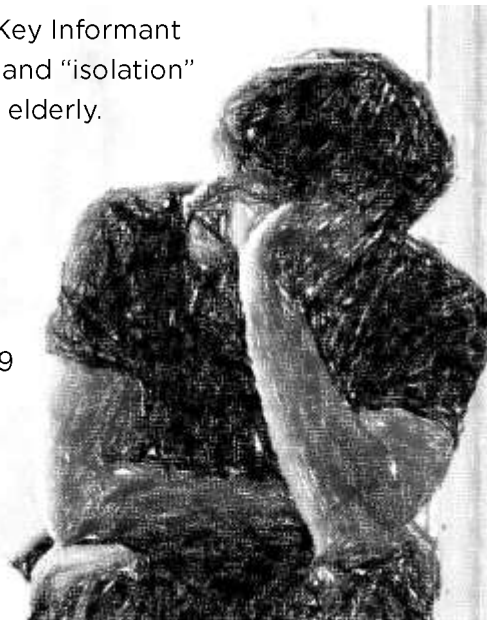
Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with normal stresses of life, can work productively and is able to make a contribution to his or her community (World Health Organization, 2014). Without treatment, the consequences of mental illness for the individual and society can include disability, unemployment, substance abuse, homelessness, incarceration, and suicide. Approximately 1 in 5 adults (18.6%) of SPH area community survey respondents rated their mental health as “Fair” or “Poor.” The economic cost of untreated mental illness is more than \$113 billion in lost earnings each year in the US (National Alliance on Mental Illness, 2018).

According to the National Institute for Mental Health in 2019 an estimated 13.1 million (5.2%) American adults have a seriously debilitating mental illness. Suicide is the 10th leading cause of death in the US, and more than 90% of people who die by suicide show symptoms of a mental health condition (National Institute of Mental Health).

The main concern with mental health in the community is limited access and the lack of mental health facilities and providers. There is also a need for more community education and awareness about mental health. As we learned during our 2019 listening sessions, our Key Informant groups in 2021 reinforced concerns about “alienation” and “isolation” as mental health-related factors among youth and the elderly.

#### Additional Information:

- The 2018 Wisconsin County Health Rankings show that in the past 30 days, residents had an average of 4.3 and 3.9 mentally unhealthy days in Sauk and Columbia Counties respectively. In comparison, Sauk County’s 2019 rate was 3.4 days.
- Statistics from the 2021 Sauk County Health & Wellness Coalition survey show (SPH area respondents only):
  - Nearly one-third (30.4%) of respondents report “challenges obtaining mental health services.”
- The WI Department of Health Services reports that 16% of individuals with Adverse Childhood Experiences (ACEs) experienced mental health issues in their household.



## Substance (Alcohol, Tobacco, and Other Drugs) Misuse

Substance misuse is a serious concern in our communities, in large part because this category of health issues is very broad; from illegal drug addiction to vaping to alcohol overuse, so many people are directly or indirectly impacted.

The Substance Abuse and Mental Health Services Administration (SAMSHA) reports the misuse and abuse of alcohol, tobacco, illicit drugs, and prescription medications by approximately 19.3 million people 18 or older in the past year (2020 National Survey on Drug Use and Health).

Drug overdose deaths are a leading contributor to premature death and are largely preventable.<sup>1</sup> Currently, the United States is experiencing an epidemic of drug overdose deaths. Since 2000, the rate of drug overdose deaths has increased by 137% nationwide. Opioids contribute largely to drug overdose deaths; since 2000, there has been a 200% increase in deaths involving opioids (opioid pain relievers and heroin).<sup>2</sup>

Cigarette use may be dropping among Wisconsin's youth, but newer, less recognizable tobacco products continue to gain popularity fast, and this is concerning because there's no such thing as a safe tobacco product. Despite the COVID19 pandemic that kept kids at home, there was strong agreement among all focus group participants that vaping is still a big problem in our area.

Vaping products are cheaper, more accessible, and easier to hide from adults than ever before. Designed to deliver nicotine, a highly addictive additive that can keep kids hooked for life, these new products come in a wide range of shapes and styles—from nicotine toothpicks, and little cigars, to disposable e-cigs and wearable vaping gear like hoodies and backpacks.

### Additional Information:

- The WI Department of Health Services reports that 26% of individuals with Adverse Childhood Experiences (ACEs) experienced substance abuse in their household.
- Among adult residents of Sauk County, 20% are current smokers (WI = 17%), 28% drink excessively (WI = 27%)
- During 2017-2019, the number of Drug Overdose Deaths per 100,000 people in Columbia County was 26 (n=44) and 21 (n=40) in Sauk County (National Center for Health Statistics-Mortality Files).

SPH is pleased to support and participate the Sauk County Partnership for Prevention which focuses the majority of its efforts on addressing three types of dangerous drug use in our communities:

- The use of alcohol by youth under age 21
- The use of vaping products by youth under age 21
- The misuse of prescription medication by residents age 12+

[1] Shiels MS, Berrington de Gonzalez A, Best AF, Chen Y, Chernyavskiy P, Hartge P, Khan SQ, Perez-Stable EJ, Rodriguez EJ, Spillane S, Thomas DA, Withrow D, Freedman ND. Premature mortality from all causes and drug poisonings in the US according to socioeconomic status and rurality: an analysis of death certificate data by county from 2000–15. *The Lancet Public Health*. 2019; 4(2); e97 - e106.

[2] Increases in Drug and Opioid Overdose Deaths — United States, 2000–2014. *Morbidity and Mortality Weekly Reports*. 2016; 64(50);1378-82.

## Healthy Lifestyles – Eat Smarter and Move More to Prevent Chronic Disease

Obesity is defined as a life-long, progressive, life-threatening, genetically related, and costly disease of excess fat storage. This disorder is associated with illnesses directly caused or worsened by significant weight. Morbid obesity (or clinically severe obesity) is defined as being over 200% of ideal weight, more than 100 lbs overweight, or a body mass index (BMI) of 40 or higher, at which serious medical conditions occur as



a direct result of the obesity. Obesity and unhealthy weight management can also contribute to the development of other diseases, such as diabetes and heart disease.

Throughout the US, the number of individuals considered overweight or obese continues to rise. In addition to being costly for the nation's health care system, obesity also can lead to, or complicate, other health conditions including heart disease, stroke, diabetes and certain types of cancer.

According to County Health Rankings, obesity continues to be a growing issue in the Sauk and Columbia County communities. Adult obesity rates in Sauk and Columbia Counties are 35% and 46% respectively (WI=32%).

Lack of physical activity is one of the main contributors of obesity. In Sauk County, Physical Inactivity rates better in Sauk County than the State (18%=Sauk, 20%=WI) but worse in Columbia County (25%).



## Social Isolation

According to the 2021 County Health Rankings, minimal contact with others and limited involvement in community life are associated with increased morbidity and early mortality. Research suggests that the magnitude of risk associated with social isolation is similar to the risk of cigarette smoking. Furthermore, social support networks have been identified as powerful predictors of health behaviors, suggesting that individuals without a strong social network are less likely to make healthy lifestyle choices than individuals with a strong network. One study found that people living in areas with high levels of social trust are less likely to rate their health status as fair or poor than people living in areas with low levels of social trust.<sup>3</sup> Researchers have argued that social trust is enhanced when people belong to voluntary groups and organizations because people who belong to such groups tend to trust others who belong to the same group.

There is not overwhelming quantitative evidence that social isolation is a problem. Specific data elements include the County Health Rankings measure of “Number of Social Associations” per 10,000 people and the Sauk County Community Health Survey item that asks respondents to



rate their agreement with the statement “There are opportunities for people like me to gather in my community.” Sauk and Columbia Counties do not differ from the State average on the Social Association metric and in the “Opportunities to gather” question, 12.6% of Sauk Prairie area respondents “strongly disagreed,” “disagreed,” or “neither agreed or disagreed” with the statement.

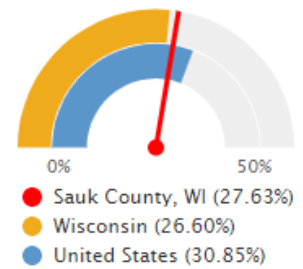
What is clear is the unanimous recognition by our Key Informants of social isolation as a problem to be addressed. Additionally, focus group members believe there is grassroots community support for attempting to address this problem.

[3] (Kawachi IK, Bruce P, Glass R. *Social capital and self-rated health: A contextual analysis. American Journal of Public Health. 1999; 89:1187-1193*)

## Housing That People Can Afford

Unlike the “Social Isolation” priority, sufficient quantitative data exists to demonstrate that housing cost and availability is an important issue in our area; and our area is not unlike the vast majority of the nation. Safe, affordable housing is connected to health in four pathways. First, the health impacts of not having a stable home (the stability pathway). Second, the health impacts of conditions inside the home (the safety and quality pathway), third, the health impacts of the financial burdens resulting from high-cost housing (the affordability pathway) and lastly, the health impacts of neighborhoods, including both the environmental and social characteristics of where people live (the neighborhood pathway). When more than one of these pathways is compounded on another, good physical and mental health are put at greater risk.

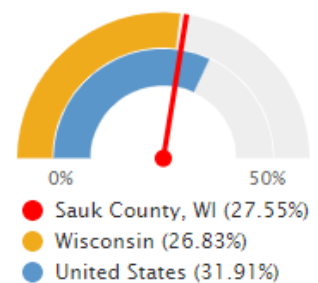
Percentage of Households where Housing Costs Exceed 30% of Income



The American Community Survey (2015-19) indicator reports the percentage of the households where housing costs are 30% or more of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.

Another indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard. Of the 24,112 total occupied housing units in the report area, 5,876 or 24.37% have one or more substandard conditions.

Occupied Housing Units with One or More Substandard Conditions, Percent



In comparison, Columbia County percentages for the two measures shown here are lower than Wisconsin. Sauk County exceeds the State averages.

Further, more than half (55.3%) of Community Survey respondents “Strongly Disagree” or “Disagree” that “There are enough safe, affordable houses and apartments in my community.”

Quantitative support aside, the issue of housing was listed by Key Informants as the number one issue affecting the health of our communities. To be clear, focus group members did not limit the “health of the community” to the physical health of individual residents, but rather, their responses had a broader context to include economic, environmental, and cultural vibrancy.

## Other Issues to Consider

During Key Informant interviews conducted by SPH and Coalition partners, the recurring issue regarding the lack of transportation available to those populations in need was brought to the surface. Specific issues cited include difficulty getting to and from medical and dental visits, grocery shopping, traveling to and from work, and the ability to attend social activities.

This issue was not identified by SPH and the Coalition as a community health priority, rather it is considered an issue that affects each of the stated priority areas of each organization. To the degree possible, Transportation will be addressed as a key component of our Community Health Improvement Implementation Plan (CHIIP).

## INFORMATION GAPS

### **That limit Sauk Prairie Healthcare's ability to assess all of the community needs**

Sauk Prairie Healthcare observes that, while some health status indicators for the areas we serve are better than average, they may still represent problems that are highly prevalent, place a heavy burden on our population and might be worsening or fall short of benchmarks.

In addition, aggregate health data for the entire population often masks the impact on a particular subset group. There may be an information gap from the input that was received from the Hispanic population. The Sauk County Health & Wellness Coalition found connecting with this population extremely challenging. SPH will work with local coalitions to obtain input for how to better serve these communities. Improving communication among all agencies, services, and community organizations was a desire expressed at each of the Key Informant meetings we held. As a result, SPH will commit to coordinating bi-annual coalition meetings in each of the communities (school districts) we serve. Currently, this approach is being used in Sauk Prairie with the Sauk Prairie Wellness Movement.

Finally, the COVID-19 pandemic presented information collection challenges, but also forced our Coalition to conduct meetings in a virtual environment, which in some cases increased participation. The medical and psychological implications of the pandemic will evolve over time, but SPH continues to monitor these effects on healthcare workers and resident and develop local responses.

## MAKING OUR CHNA WIDELY AVAILABLE TO THE PUBLIC

Upon approval by the SPH Board of Directors, this document will be made available through a variety of communication channels including: [posting on the Sauk Prairie Healthcare website](#), Facebook announcements, notification to all Key Informants who participated in focus groups, emails to Sauk Prairie Healthcare employees and medical staff, and notification to area newspapers.

## APPENDIX

### Community Meetings

6:8 Circles Community Conversation  
June 21, 2021  
Sauk City, WI

- Ken Carlson, Sauk Prairie Healthcare
- Brenda Humbracht, Sauk Prairie Healthcare
- John Ramthun, 6:8 Making Service Personal
- Sarah Ramthun, 6:8 Making Service Personal
- 16 in person community members
- 1 virtually attending community member

### Key Informant Meetings

Wisconsin Heights/Black Earth Community  
May 20, 2021  
Black Earth WI

- Ken Carlson, Sauk Prairie Healthcare
- Brenda Humbracht, Sauk Prairie Healthcare
- Dr. Janelle Hupp, Sauk Prairie Healthcare
- James Kartman, Black Earth Police Dept.
- Michelle Vinney, Black Earth Police Dept.
- Mari Beth Schall, Base Camp Café
- Deneen Greer, District One EMS
- Francine Rask, Heights Unlimited Community Service Center/Food Pantry
- Paulette Glunn, Northwest Dane Senior Services

Sauk Prairie/Merrimac Community  
June 16, 2021  
Sauk City, WI

- Ken Carlson, Sauk Prairie Healthcare
- Brenda Humbracht, Sauk Prairie Healthcare
- Susan Bauman-Duren, Sauk Prairie Schools
- Tywana German, Sauk Prairie Chamber of Commerce
- Julie Gorman, Sauk Prairie Healthcare
- Heidi Koch, Village of Sauk City
- Amy Lindloff, Prairie Clinic
- Ellen Mast, Good Neighbor Clinic
- John Ramthun, 6:8 Making Service Personal
- Eric Scheunemann, Sauk Prairie Schools
- Cliff Thompson, Sauk Prairie Optimists

Spring Green Community  
June 3, 2021  
Spring Green, WI

- Ken Carlson, Sauk Prairie Healthcare
- Brenda Humbracht, Sauk Prairie Healthcare
- Dr. Ellen Wermuth, Sauk Prairie Healthcare
- Tara Buringa, Spring Green EMT
- Jaime Radtke, Spring Green EMT

## Community Resources

### Aging and Disability Resources

Sauk County ADRC  
West Square Building Room #102  
505 Broadway  
Baraboo, WI 53913  
Phone: 608-355-3289  
Fax: 608-355-4375  
[www.co.sauk.wi.us](http://www.co.sauk.wi.us)

Columbia County Commission on Aging  
Columbia County Human Services  
ADRC  
P.O. Box 136  
111 East Mullet St.  
Portage WI, 53901  
Phone: 608-742-9227  
[www.co.columbia.wi.us/ColumbiaCounty](http://www.co.columbia.wi.us/ColumbiaCounty)

Dane County Area Agency on Aging

2865 N. Sherman Avenue  
Madison, WI 53704  
Phone: 608-261-9930  
<https://dcdhs.com/Area-Agency-on-Aging>

Northwest Dane Senior Services  
1940 Blue Mound Street, Suite 2  
Black Earth, WI 53515  
Phone: 608-767-3757  
<https://www.nwdss.org/>

Iowa County Commission on Aging  
Iowa County ADRC  
303 W. Chapel St.  
Dodgeville, WI 53533  
Phone: 608-930-9835  
Fax: 608-935-0355  
<https://adrcswwi.org/iowa/>

Richland County Elderly Services Unit

2024

221 W. Seminary St.  
Richland Center, WI 53581  
Phone: 608-647-4616  
Fax: 608-647-6611

[www.co.richland.wi.us/departments/hhs](http://www.co.richland.wi.us/departments/hhs)

Divine Savior Home Care  
2805 Hunters Trl  
Portage, WI 53901  
Phone: 608-745-6400, Fax: 608-745-6402

Hillside Home Care/Hospice  
709 S. University Avenue  
Beaver Dam, WI 53916  
Phone: 920-887-4050, Fax: 920-887-6185

SSM Health at Home  
Portage Area  
2825 Hunters Trl.  
Portage, WI 53901  
Phone: 608-742-7161

Homeward Bound  
1360 Jefferson Street  
Baraboo, WI 53913  
Phone: 608-356-4666, Fax: 608-356-5052

Home Instead  
1574 W. Broadway, Suite 101  
Madison, WI 53713  
Phone: 608-424-4291

Maxim Healthcare Services  
5100 Eastpark Blvd, Suite 100  
Madison, WI 53718  
Phone: 608-232-1000, Fax: 877-306-8303

UW Health Care Direct  
1345 Deming Way, Suite 200  
Middleton, WI 53562  
Phone: 608-203-2273, Fax: 608-203-2240

### **Area Nursing and/or Assisted Care Homes**

Columbia Health Care Center  
323 W. Monroe  
Wyocena, WI 53969

Phone: 608-429-2181, Fax: 608-429-2281  
[www.co.columbia.wi.us/ColumbiaCounty/carecenter](http://www.co.columbia.wi.us/ColumbiaCounty/carecenter)

Greenway Manor  
501 S. Winstead  
Spring Green, WI 53588  
Phone: 608-588-2586, Fax: 608-588-7410  
[www.greenwaymanor.com](http://www.greenwaymanor.com)

Heartland Country Village  
634 Center Street  
Black Earth, WI 53515  
Phone: 877-252-4469  
<https://www.nursinghomes.com/wi/black-earth/heartland-country-village/>

Ingleside  
407 N. 8th Street  
Mt. Horeb, WI 53562  
Phone: 608-437-5511, Fax: 608-470-4065  
<https://www.inglesidecommunities.org/>

Lodi Good Samaritan  
700 Clark Street  
Lodi, WI 53555  
Phone: 608-592-3241, Fax: 608-592-3293  
[www.good-sam.com](http://www.good-sam.com)

Maplewood  
245 Sycamore Street  
Sauk City, WI 53583  
Phone: 608-643-3383, Fax: 608-643-2629  
<https://www.maplewoodsaukprairie.com/>

Pine Valley Nursing Home  
25951 Circle View Drive  
Richland Center, WI 53581  
Phone: 608-647-2138, Fax: 608-647-8955  
[www.co.richland.wi.us/departments/pinevalley](http://www.co.richland.wi.us/departments/pinevalley)

Sauk County Health Care Center  
1051 Clark St.  
Reedsburg, WI 53959  
Phone: 608-524-7561, Fax: 608-524-7599  
<https://www.co.sauk.wi.us/healthcarecenter>

SSM Health St. Clare Meadows Care Center  
1414 Jefferson St.



2024

Baraboo, WI 53913  
 Phone: 608-356-4838, Fax: 608-356-5441  
<https://www.ssmhealth.com/locations/location-details/st-clare-meadows-care-center>

Tivoli At Divine Savior Healthcare  
 2805 Hunters Trail  
 Portage, WI 53901-0387  
 Phone: 608-745-5900, Fax: 608-745-4688

Upland Hills Nursing Home  
 800 Compassion Way  
 Dodgeville, WI 53533-0800  
 Phone: 608-930-7600, Fax: 608-930-7271  
[www.uplandhillshealth.org](http://www.uplandhillshealth.org)

Golden Living Center - Wisconsin Dells  
 300 Race Street  
 Wisconsin Dells, WI 53965  
 Phone: 608-254-2574, Fax: 608-253-7411  
<https://www.nshorehc.com/locations/wisconsin-dells-health-services/>

Waunakee Manor  
 801 S. Klein Dr.  
 Waunakee, WI 53597  
 Phone: 608-849-5016, Fax: 608-850-4689  
<https://waunakeemanor.com/>

### **Community-Based Residential Facilities (CBRF)**

A place where 5 or more unrelated people live together in a community setting. Services provided include room and board, supervision, support services, and may include up to 3 hours of nursing care per week.

Contact the Wisconsin Department of Health Services (<https://www.dhs.wisconsin.gov/regulations/cbrf/introduction.htm>) for questions regarding Community-Based Residential Facilities (CBRF) you may email the Division of Quality Assurance ([dhswebmaildqa@wisconsin.gov](mailto:dhswebmaildqa@wisconsin.gov)), attention Bureau of Assisted Living.

Medicare does not pay for CBRF's. These are usually paid for on a private pay basis. If you are seeking an

admission to a CBRF you should contact your county social services agency for an assessment prior to admission.

### **Hospice Agencies**

Agrace Hospice Care  
 1670 South Boulevard, Baraboo, WI 53913  
 Phone: 800-553-4289

Heartland  
 2810 Crossroads Drive, Suite 1300  
 Madison, WI 53718  
 Phone: 608-819-0033

Home Health United Hospice\*  
 1600 Jefferson Street, Suite 101, Baraboo, WI 53913  
 Phone: 800-924-2273

Home Health United Hospice\*  
 164 Second St., Reedsburg, WI 53959  
 Phone: 608-524-6607

Hospice Touch  
 1874 Hwy. 13, Adams, WI 53910  
 Phone: 608-339-7500

Hospice Touch  
 1050 Division St., Mauston, WI 53948  
 Phone: 608-847-6161

Madison Home Care LLC  
 2317 International Lane, Suite 114,  
 Madison, WI 53704  
 Phone: 608-665-3829

St. Croix Hospice  
 414 Broadway, Suite 200, Baraboo, WI 53913  
 Phone: 608-448-4200

Southern Care  
 402 Gammon Place, Ste 110, Madison, WI 53719  
 Phone: 608-833-3295

Upland Hills Hospice  
 800 Compassion Way, Dodgeville, WI 53533  
 Phone: 608-930-3000

2024

\*Affiliated with Sauk Prairie Healthcare

### **Community Resource Centers**

Good Neighbor Medical Clinic  
95 Lincoln Ave., Prairie du Sac WI 53578  
Phone: 608-643-4749 extension 14,  
Fax: 608-370-7567  
Hours: Mon and Wed: 11:30 AM – 5:00 PM

Dental Services Provided through St. Vincent De Paul Dental Clinic  
1906 North St, Prairie du Sac WI 53578  
Phone: 608-644-0504, ext. 10

Good Neighbor Clinic Prescription Assistance  
Phone: 608-643-4749  
Ask for a prescription assistance nurse

Alzheimer's and Dementia Caregivers Support  
<https://www.co.sauk.wi.us/adrc/dementia-initiatives-and-information>

Alcoholics Anonymous/Drug  
<https://alcoholicsanonymous.com/aa-meeting/sauk-prairie-group/>

St. Vincent de Paul CARE Sauk Prairie  
1906 North St, Prairie du Sac WI 53578  
Phone: 608-644-0504, ext. 12

St. Vincent de Paul Medical Loan Closet  
1906 North St, Prairie du Sac WI 53578  
Phone: 608-643-8905, ext. 10

### **Women, Infant, Children (W.I.C.)**

#### **Programs:**

Columbia County Dept. of Health & Human Services  
111 East Mullett St., Portage, WI 53901  
Phone: 608-742-9254

Public Health Madison & Dane County  
210 Martin Luther King Jr. Blvd.,  
Room 516B, Madison, WI 53703  
Phone: 608-267-1111

Southwestern Wisconsin Community Action Program (Iowa County)

149 North Iowa Street, Dodgeville, WI 53533  
Phone: 608-935-2326

Sauk County West Square Building  
Third Floor, Suite 372,  
505 Broadway, Baraboo, WI 53913  
Phone: 608-355-3290

### **Head Start Programs**

Sauk Prairie Head Start  
1906 North St., Prairie Du Sac, WI 53578  
Phone: 608-643-2788

Reedsburg Head Start  
400 Alexander Avenue, Reedsburg, WI 53959  
Phone: 608-524-2700

Head Start & Early Head Start  
(Grant, Iowa, Lafayette and Richland Counties)  
212 E. Chapel Street, Dodgeville, WI 5353  
Phone: 608-935-3379

Columbia County Family Resource Center  
2946 Red Fox Run, Portage, WI 53901  
Phone: 608-742-8482

### **Food Pantries**

Sauk Prairie Area Food Pantry  
821 Industry Rd, Sauk City, WI 53583  
Phone: 608-571-7737

Baraboo Food Pantry/St. Vincent de Paul  
100 South Boulevard, Baraboo, WI 53913  
Phone: 608-356-4649, 608-415-1626, or 608-370-9559

Merrimac Food Pantry  
607 Main St., Merrimac WI 53561  
Phone: 608-493-2545

Spring Green Community Food Panty/Spring Green Community Church  
151 E. Bossard Street, Spring Green, WI 53588  
Phone: 608-588-2442

Reedsburg Food Pantry

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134 S Locust St, Reedsburg, WI 53959

Phone: 608-524-6272

Second Harvest Foodbank Mobile Pantry  
Veterans Memorial Field,  
intersection of Griffith St. & Superior St., Portage

Second Harvest Foodbank Mobile  
Pantry/Reedsburg VFW  
200 Veterans Drive, Reedsburg  
Phone: 877-366-3635

Lone Rock Community Food Pantry  
Lone Rock Elementary School,  
222 W. Pearl Street, Lone Rock  
Phone: 608-583-2614

### **AIDSLine**

Wisconsin HIV/STD/Hepatitis C Information and  
Referral Center  
Phone: 800-334-2437

### **Sauk County Resource Guide**

<https://sauk.extension.wisc.edu/files/2021/02/Sauk-County-Resource-Guide-Jan-2021-FINAL.pdf>

### **Economic Support Programs**

6:8 Circles Sauk Prairie  
821 Industry Rd, Sauk City, WI 53583  
Phone: 608-658-4700

Columbia County Health and Human Services  
111 E Mullett St, Portage, WI 53901  
Phone: 608-742-9227

Columbia County Job Center  
2875 Village Rd #200, Portage, WI 53901  
Phone: 608-742-4181

Dane County Human Services Department  
1202 Northport Dr, Madison, WI 53704  
Phone: 608-242-6200

Dane County Job Center  
1819 Aberg Ave, Madison, WI 53704  
Phone: 608-242-4900

Iowa County Health and Human Services  
303 W Chapel St, Dodgeville, WI 53533  
Phone: 608-930-9800

Iowa County Job Center  
201 S Iowa St, Dodgeville, WI 53533  
Phone: 608-935-3116

Sauk County Human Services  
505 Broadway St #480, Baraboo, WI 53913  
Phone: 608-355-4200

Sauk County Job Center  
505 Broadway St #232, Baraboo, WI 53913  
Phone: 608-355-4810

### **Crisis Lines**

#### **Domestic Violence / Sexual Assault**

Hope House - South Central Wisconsin  
Phone: 608-356-7500 or 608-356-9123 or  
Crisis Phone: 1-800-584-6790

Passages – Richland Center  
Phone: 1-800-236-4325, 608-647-8775,  
or 608-647-6317 (Shelter)

Native American Suicide Prevention  
Phone: 1-800-273-8255

Sauk County Crisis line  
Phone: 1-800-533-5692

Dane County Domestic Abuse Program  
Phone: 1-800-747-4045 or 608-251-4445

### **Durable Medical Equipment**

Durable medical equipment (DME) is equipment that is used mostly for medical reasons at home, is needed due to an illness or disease, and is made for long-term use.

Aljan (Orthopedic Appliances)  
2008 Fish Hatchery Road  
Madison, WI 53713  
Phone: 608-257-4256, Fax: 608-257-7220

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Apria  
859 East Broadway  
Monona, WI 53716  
Phone: 1-800-589-5480 or 608-221-5480,  
Fax: 608-221-5485

SSM Health at Home / Baraboo  
1111 Eight St., Baraboo WI 53913  
Phone: 1-800-924-2273

SSM Health at Home / Reedsburg  
164 Second Street, Reedsburg, WI 53959  
Phone: 1-800-924-2273

Home Health United / Madison West  
4639 Hammersley Road Madison, WI 53711  
Phone: 1-800-924-2273 or 608-276-3420,  
Fax: 608-271-8945

UW Health Home Care  
Phone: 1-888-663-7043 or 608-203-2273,  
Fax: 608-203-2240

Walgreen's Home Care  
Phone: 1-888-492-5442, Fax: 888-246-6510

### Home Health Agencies

#### **Columbia County**

Divine Savior Home Care  
2805 Hunters Trl  
Portage, WI 53901  
Phone: 608-745-6400, Fax: 608-745-6402

Hillside Home Care/Hospice  
709 S. University Avenue  
Beaver Dam, WI 53916  
Phone: 920-887-4050, Fax: 920-887-6185

SSM Health at Home  
Portage Area  
2825 Hunters Trl.  
Portage, WI 53901  
Phone: 608-742-7161

Homeward Bound

1360 Jefferson Street  
Baraboo, WI 53913  
Phone: 608-356-4666, Fax: 608-356-5052

Home Instead  
1574 W. Broadway, Suite 101  
Madison, WI 53713  
Phone: 608-424-4291

Maxim Healthcare Services  
5100 Eastpark Blvd, Suite 100  
Madison, WI 53718  
Phone: 608-232-1000

UW Health Care Direct  
1345 Deming Way, Suite 200  
Middleton, WI 53562  
Phone: 608-203-2273, Fax: 608-203-2240

#### **Dane County**

Coram Healthcare  
5345 S Moorland Rd #101  
New Berlin, WI 53151  
Phone: 262-207-1590, Fax: 262-938-5900

Divine Savior Home Care 2805 Hunters Trl.  
Portage, WI 53901  
Phone: 608-745-6400, Fax: 608-745-6402

Edgerton Care Center  
313 Stoughton Rd  
Edgerton, WI 53534  
Phone: 608-884-1330, Fax: 608-884-1405

Fort Healthcare - Home Health 611 Sherman Ave. E.  
Fort Atkinson, WI 53538  
Phone: 920-568-5000, Fax: 920-568-5075  
[www.forthhealthcare.com](http://www.forthhealthcare.com)

Hillside Home Care/Hospice  
709 S. University Avenue  
Beaver Dam, WI 53916  
Phone: 920-887-4050, Fax: 920-887-6815

\*Home Health United, Inc.  
Portage Area

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611 E. Wisconsin Avenue  
Portage, WI 53901  
Phone: 800-924-2273

\*Home Health United, Inc. Madison West  
4639 Hammersley Road  
Madison, WI 53711

\*Home Health United, Inc. Janesville  
3700 E. Racine  
Janesville, WI 53546  
Phone: 800-924-2273

Independent Health Care, Inc.  
2970 Chapel Valley Rd #203  
Fitchburg, WI 53711  
Phone: 608-274-2097, Fax: 608-274-9181  
[www.indepenliving.com](http://www.indepenliving.com)

Interim Healthcare of Madison  
2801 Coho St. Suite 302  
Madison, WI 53713  
Phone: 608-238-0268, Fax: 608-238-7308  
[www.interimhealthcare.com](http://www.interimhealthcare.com)

Maxim Healthcare Services  
5100 East Park Blvd, Suite 100  
Madison, WI 53718  
Phone: 866-873-2345, Fax: 608-232-0200  
[www.maxhealth.com](http://www.maxhealth.com)

Mercy Assisted Care Home Health  
901 Mineral Point Avenue  
Janesville, WI 53548  
Phone: 608-754-2201, Fax: 608-754-1147

Meriter UnityPoint at Home  
2180 W. Beltline Hwy., P.O. Box 259993  
Madison, WI 53725  
Phone: 608-417-3700, Fax: 608-417-3755  
[www.unitypointhealth.org](http://www.unitypointhealth.org)

REM Health of Wisconsin, Inc.  
2005 W. Beltline  
Madison, WI 53713  
Phone: 608-274-8193, Fax: 608-274-8717  
[www.reminc.com](http://www.reminc.com)

Stoughton Hospital Home Health  
900 Ridge Street  
Stoughton, WI 53589  
Phone: 608-873-2366, Fax: 608-873-2398

Univ. Hosp. Home Health Agency  
2030 Pinehurst Drive  
Middleton, WI 53562  
Phone: 608-203-2273, Fax 608-203-2250

Upland Hills Home Care & Hospice  
800 Compassion Way  
Dodgeville, WI 53533  
Phone: 608-930-7210, Fax: 608-930-7265  
[www.uplandhillshealth.org](http://www.uplandhillshealth.org)

### Iowa County

Finley Home Health Care  
2282 University Ave  
Dubuque, IA 52001  
Phone: 563-588-8707, Fax: 563-583-8808

Homeward Bound Home Health  
130 W. Elm Street  
Lancaster, WI 53813  
Phone: 608-723-6601, Fax: 608-723-6616  
Medicare and Medicaid Certified

Maxim Healthcare Services  
5100 East Park Blvd Suite 100  
Madison, WI 53718  
Phone: 608-232-1000, Fax: 877-306-8303,  
[www.maxhealth.com](http://www.maxhealth.com)

Upland Hills Home Care & Hospice  
800 Compassion Way  
Dodgeville, WI 53533  
Phone: 608-930-7210, Fax: 608-930-7265,  
[www.uplandhills.org](http://www.uplandhills.org)

Medicare and Medicaid Certified  
Richland County  
Almost Family  
2346 Rose St  
LaCrosse, WI 54601  
Phone: 608-779-0900, Fax: 608-779-0903

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**\*SSM Health at Home**

164 Second Street  
 Reedsburg, WI 53959  
 Phone: 800-924-2273  
[www.homehealthunited.org](http://www.homehealthunited.org)

**Homeward Bound Home Health**

130 W. Elm Street  
 Lancaster, WI 53813  
 Phone: 608-723-6601, Fax: 608-723-6616

**Prairie Du Chien Memorial Hosp. HH**

705 E. Taylor Street  
 Prairie Du Chien, WI 53821  
 Phone: 608-357-2000, Fax: 608-357-2277

**Upland Hills Home Care & Hospice**

800 Compassion Way  
 Dodgeville, WI 53533  
 Phone: 608-930-7210, Fax: 608-930-7265,  
[www.uplandhillshealth.org](http://www.uplandhillshealth.org)

**Vernon Memorial Home Care & Hospice**

507 S. Main Street  
 Viroqua, WI 54665  
 Phone: 608-637-2101, Fax: 608-637-2101

\* Affiliated with Sauk Prairie Healthcare

**Sauk County**

SSM Health at Home  
 164 Second Street  
 Reedsburg, WI 53959  
 Phone: 800-924-2273, [www.homehealthunited.org](http://www.homehealthunited.org)

**SSM Health at Home**

611 E. Wisconsin Avenue  
 Portage, WI 53901  
 Phone: 800-924-2273, [www.homehealthunited.org](http://www.homehealthunited.org)

**Divine Savior Home Care**

2805 Hunters Trail  
 Portage, WI 53901  
 Phone: 608-745-6400, Fax: 608-745-6206

**Maxim Healthcare Services**

5100 East Park Blvd, Suite 100

Madison, WI 53718

Phone: 866-873-2345, Fax: 608-232-0200,  
[www.maxhealth.com](http://www.maxhealth.com)

**Recover Health**

520 South Blvd.  
 Baraboo, WI 53913  
 Phone: 608-356-7570, Fax: 608-356-2629,  
[www.recoverhealth.org](http://www.recoverhealth.org)

**Sauk County Home Care**

505 Broadway, Suite 372  
 Baraboo, WI 53913  
 Phone: 608-355-3290, [www.co.sauk.wi.us](http://www.co.sauk.wi.us)

**Homeward Bound**

1360 Jefferson Street  
 Baraboo, WI 53913  
 Phone: 608-356-4666, Fax: 608-356-5052,  
[www.hwbcare.com](http://www.hwbcare.com)

**Veterans Services Offices**

Columbia County Veteran's Service Office  
 112 E. Edgewater St., Portage, WI 53901  
 Phone: 608-742-9618

Dane County Veteran's Service Office  
 City-County Building, Room 108  
 210 Martins Luther King Jr. Blvd.  
 Madison, WI 53703  
 Phone: 608-266-4158

Iowa County Veteran's Service Office  
 303 W. Chapel St. #1300  
 Dodgeville, WI 53533  
 Phone: 608-930-9865

Richland County Veteran's Service Office  
 181 W. Seminary, Courthouse  
 Richland Center, WI 53581  
 Phone: 608-647-6101

Sauk County Veteran's Service Office  
 505 Broadway, Room 205  
 Baraboo, WI 53913  
 Phone: 608-355-3260



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Wisconsin Department of Veteran's Affairs  
2135 Rimrock Rd., Madison, WI 53713  
Phone: 800-947-8387 or 800-WIS-VETS

### **Wisconsin Veterans State Programs and Services**

#### Nursing Homes

Wisconsin Veteran's Home - King  
N2665 County Road QQ, King, WI 54946  
Phone: 715-258-5586 or 1-888-458-5586

Wisconsin Veteran's Home  
21425 Spring Street, Union Grove, WI 53182  
Phone: 262-878-6700

William S. Middleton Memorial Veterans Hospital  
(VA)  
2500 Overlook Terrace, Madison, WI 53705  
Phone: 308-256-1901

Tomah VA Medical Center  
500 E. Veterans Street, Tomah, WI 54660  
Phone: 608-372-3971

Tomah Memorial Hospital  
501 Gopher Ave., Tomah, WI 54660  
Phone: 608-372-2181