

COMMUNITY HEALTH NEEDS ASSESSMENT

COMMUNITY HEALTH NEEDS ASSESSMENT

2025-2027



Upland Hills
Health

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Message to Our Community

Upland Hills Health (UHH) is pleased to present the 2025 - 2027 Community Health Needs Assessment (CHNA). Our Community Health Needs Assessment is an expression of our Mission: *We are a community-minded healthcare system providing innovative, individualized, and compassionate care for every stage of life.*

We have collaborated with our community partners to review progress collectively made on our previous plan and to chart a new course for the upcoming three-years. Upland Hills Health is actively collaborating with the following community partners:

- Community Connections Free Clinic (Upland Hills Health Chief Financial Officer serves on the clinic board.)
- Southwestern Wisconsin Community Action Program (SWCAP)
- Iowa County Health Department
- Aging and Disability Resource Center (ADRC) of Southwest Wisconsin

In addition to these formalized partners, Upland Hills Health reached out to the communities in our service area for input. Community Forums were held within various communities in our service area. Additionally, Upland Hills Health circulated a QR Code that linked to a community survey. This was distributed through fliers, newspaper ads, and direct mail materials to residents throughout our service area.

We identified and prioritized community health needs based on:

- available data
- input from community members regarding perceived importance of health concerns, and
- our ability to make a significant impact.

We met with our community partners to compare the selected health need priorities with those established by the Iowa County Health Department, the Aging and Disability Resource Center, and Southwest CAP, to ensure that synergy would be maximized.

Priorities we will address over the next three years include:

1. Expanding mental health services.
2. Increasing the number of primary care providers/physicians.
3. Increasing the availability of fitness opportunities in areas that have no or few options for indoor physical activity.

Additionally, we will continue to support Iowa County Public Health in the community-led initiatives it lends to address the area of transportation and social isolation.

We pledge to work with our partners to develop plans that will address each of these areas to create a healthier Southwestern Wisconsin. Your ideas on how we may build a healthier community together are appreciated!

Sincerely,

Lisa Schnedler
President & CEO

Executive Summary

Background

The CHNA report provides an overview of the health need priorities in our service area. This report will also serve as a resource for community benefit planning and developing an implementation strategy for addressing our community’s health need priorities. The Upland Hills Health Board approved this CHNA on August 27, 2025.

The Patient Protection and Affordable Care Act (PPACA) requires 501(c)3, tax-exempt hospitals to conduct a CHNA every three years and adopt a strategic implementation plan to address the identified needs. The hospital last conducted a CHNA in 2022.

Health Need Priorities and Resources

Upland Hills Health identified the following three healthcare priorities to focus on in our 2025-2027 CHNA and strategic implementation plan. These healthcare issues and the resources and data available to define them include:

- **Increase the number of Mental Health Providers:** Resources include information and data provided by Aging and Disability Resource Center in Iowa County, Iowa County Health Department, Community Connections Free Clinic, Southwestern Wisconsin Community Action Program, and Upland Hills Health. Data included market survey responses, comparative national data, and patient/community member responses to surveys and at forums.
- **Increase exercise facility options in our service area communities:** Data supporting this initiative was derived from national comparative data and community residents expressed desires through surveys and at community forums.
- **Increase number of family practice providers:** This need is based on patient concerns about wait times for appointments and on comparative national statistics.

Goals

Increase the number of mental health providers.
Recruit one psychiatrist and one prescribing nurse practitioner.
Increase exercise facility options in our service area communities.
Explore implementing one fitness/workout area in one community per year for the next three years.
Increase the number of family practice providers.
Determine goal for fill rate of current providers to determine growth and need.

About Upland Hills Health

Mission

We are a community-minded healthcare system providing innovative, individualized and compassionate care for every stage of life.

Vision

To exemplify the highest standard of community healthcare and inspire patients to take an active role in their health through wellness-oriented care.

Values

Sensible – Approach decisions in a practical way, guided by common sense.

Holistic – Focus on the patient as a whole and not a set of symptoms.

Affordable – Bring care to all who need it.

Respectful – Treat all as we want to be treated.

Inspirational – Be the standard of community health and wellness.

Nurturing – Provide medical care with support and encouragement.

Genuine – Show honest concern for those we serve and passion for what we do.

Highlights of Services

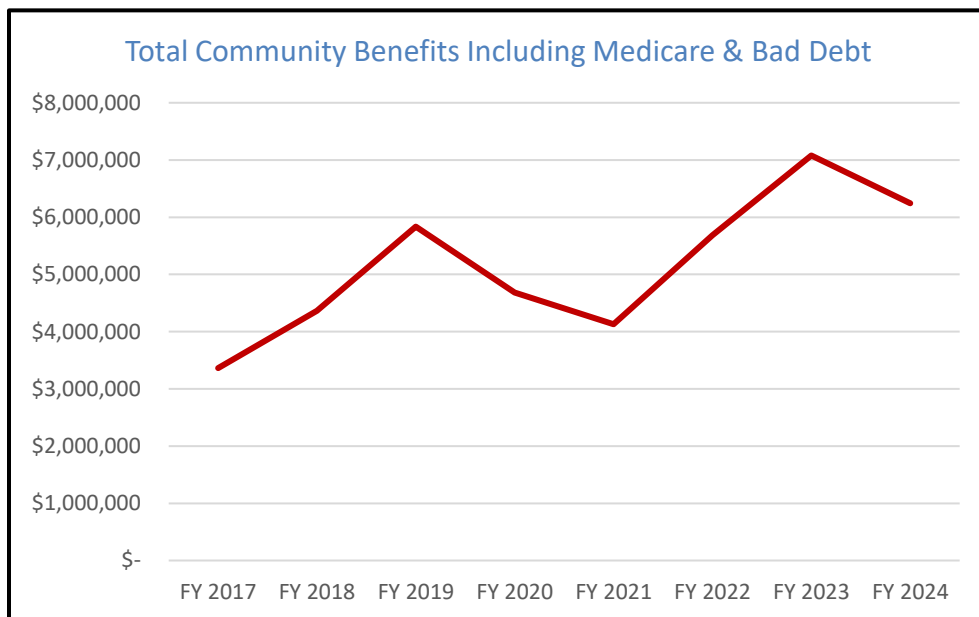
- Aesthetician Services
- Behavioral Health Counseling
- Birth Center & Obstetrics
- Breast Health
- Continuous Care Management
- Diabetes Management & Nutrition Counseling
- Dialysis Outpatient Services (Fresenius)
- Emergency and Urgent Care
- Family Medicine Clinics
- Heart, Lung & Sleep Center
 - Cardiopulmonary Rehabilitation
- Home Care
- Hospice Care
- Imaging Services
- Intensive Care/Medical Surgical Unit
- Laboratory Services
-
- Occupational Health (Employers)
- Palliative Care
- Patient Navigators
- Senior Living
 - Nursing & Rehabilitation Center
 - CrestRidge Assisted Living & Memory Care
- Surgery
- Swing Bed Rehabilitation
- Therapy & Wellness Center
- Upland Hills Health Specialty Clinics
 - General Surgery
 - OB/GYN
 - Orthopedic / Spine / Hand & Upper Extremities
 - Pain Management
 - Podiatry: Foot and Ankle
 - Wound Care
- Visiting Specialists
 - Allergy & Immunology
 - Audiology
 - Cardiology
 - Dermatology
 - ENT
 - Neurology
 - Oncology
 - Podiatry
 - Pulmonary & Critical Care
 - Rheumatology
 - Urology
- Upland Hills Hometown Medical Equipment

Community Benefits

	FY 2024
Community Health Improvement Services	\$ 16,202
Health Professions Education	\$ 210,780
Subsidized Health Services	\$ 2,570,527
Financial and In-Kind Contributions	\$ 94,415
Community Building Activities	\$ 2,360
Financial Assistance	\$ 573,000
Government Sponsored Healthcare Reductions in Payments	\$ 2,777,125
Total Community Benefits Including Medicare & Bad Debt	\$ 6,244,409

*Over 100 people served by our Community Benefits program.

Trend on Total Community Benefit Dollars Spent over Past 5 years



Our Affiliations

To ensure that Upland Hills Health stays current in changing healthcare regulations, industry trends and performance and quality standards, we are accredited by The Joint Commission and affiliated with the following organizations:

- SSM Healthcare of Wisconsin
- Rural Wisconsin Health Cooperative (RWHC)
- Wisconsin Hospital Association (WHA)

FY2024 Statistics

Admissions	1,158
Births	199
ER Visits	9,457
Outpatient Visits (includes Clinic Visits)	16,321
Therapy Outpatient Visits (not included above)	23,489
Imaging Outpatient Visits (not included above)	28,275
Lab Outpatient Visits (not included above)	12,460

Our Service Area

Upland Hills Health used discharge data from Intellimed to identify its Primary and Secondary Service Areas, in addition to Developing Markets. Approximately 83% of inpatient discharges originated from these locations. Upland Hills Health provides outpatient clinic services in seven community locations. Upland Hills Health has identified this region, collectively, as its “community” served for purposes of the 2025-2027 Community Health Needs Assessment (CHNA).

Redefined August 2017 for future Strategic Planning reports and general market share reporting purposes.

PSA Aug 2017		SSA Aug 2017		Developing Markets	
UHH Primary Service Area (PSA) Zip Codes		Service Area (SSA) Zip Codes			
53506	Avoca	53510	Belmont	53588	Spring Green
53507	Barneveld	53516	Blanchardville	53503	Arena
53533	Dodgeville	53517	Blue Mounds	53556	Lone Rock
53543	Highland	53530	Darlington		
53554	Livingston	53573	Muscoda		
53565	Mineral Point	53809	Fennimore	53572	Mount Horeb
53569	Montfort				
53582	Ridgeway				
Iowa County Masked*					
	Cobb 53526				
	Edmund 53535				
	Hollandale 53544				
	Linden 53553				
	Rewey 53580				

*Note on Intellimed data: In order to protect the privacy of patients, if there are fewer than 30 discharges or outpatient surgeries from a zip code in a quarter, or if the population of a zip code is under 1,000, then the data from the zip code for that quarter is added to the corresponding masked county zip code.

Our County by the Numbers

- Iowa County, which is defined by Upland Hills Health for this assessment as its primary county, has 16 zip codes
- Population (2024): 23,963 Male = 50.9% Female = 49.1%
- Population increase (2021-2024) of 1.0%
- Lower per capita income than USA as a whole
- Iowa County Rate of unemployment is lower (2.6%) than Wisconsin (3.2%) and the US (4.4%)
- Disparities:
 - Income. Non-Caucasian populations have lower per capita incomes
 - Education. Non-Caucasian populations are less likely to have high school or college diploma
- Overall, higher percentage of Caucasian residents than Wisconsin
- 21.7% of people in Iowa County are over the age of 65
- 29.9% of Iowa County residents over the age of 65 live alone
- 11.7% of Iowa County residents over the age of 65 are in poverty
- 16.6% of Iowa County residents over the age of 65 are still employed
- Mean travel time to work for workers age 16 years+ is 26.6 minutes

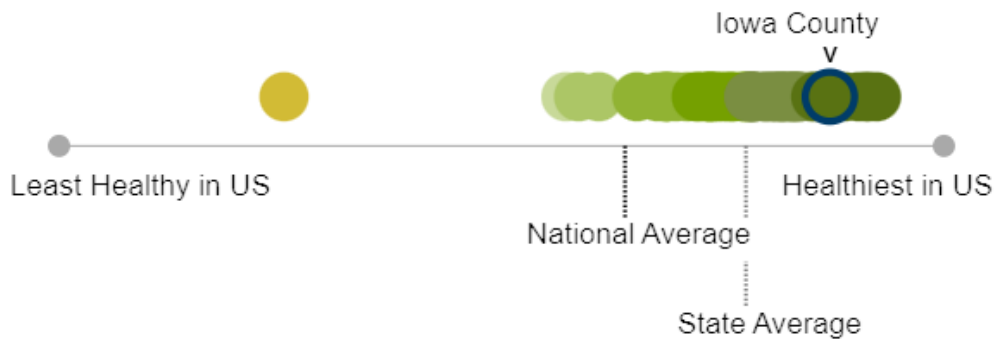
*Source: U.S. Census Bureau V2024: U.S. Census Bureau QuickFacts: Iowa County, Wisconsin
Iowa County, WI - Profile data - Census Reporter
Department of Workforce Development
Aging: Demographics in Wisconsin | Wisconsin Department of Health Services*

The Health of our Community

County Health Rankings 2025



Iowa County Population Health and Well-being - 2025



Iowa County is faring better than the average county in Wisconsin for Population Health and Well-being, and better than the average county in the nation.

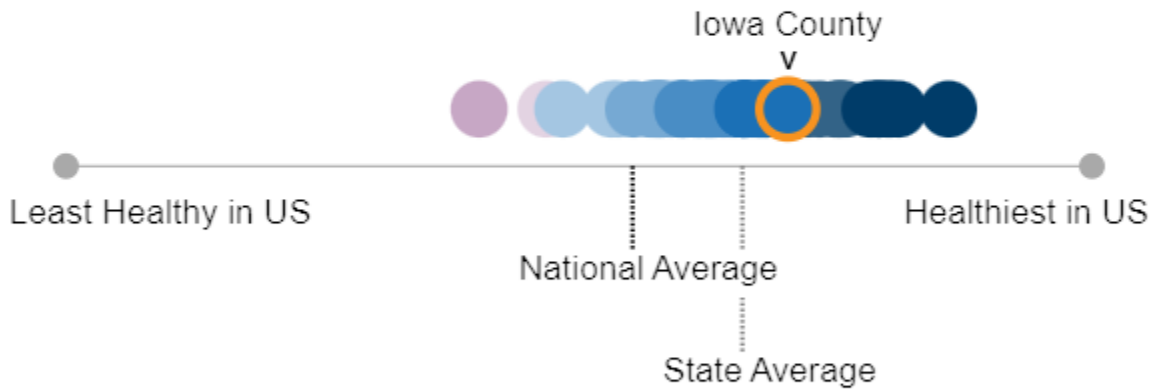
- In Iowa County, 79.3% of the population lives in a low population density area.

Population Health and Well-being			
Length of life	Iowa County	Wisconsin	United States
Premature Death	5,500	7,400	8,400
Additional Length of life (not included in summary)			
Quality of life	Iowa County	Wisconsin	United States
Poor Physical Health Days	3.8	3.9	3.9
Low Birth Weight	6%	8%	8%
Poor Mental Health Days	5.3	5.4	5.1
Poor or Fair Health	14%	16%	17%

Source: University of Wisconsin Population Health Institute County Health Rankings & Roadmaps 2025













Iowa County Community Conditions - 2025




Iowa County is faring about the same as the average county in Wisconsin for Community Conditions, and better than the average county in the nation.

COMMUNITY HEALTH NEEDS ASSESSMENT 2025 – 2027

Community Conditions				
Health infrastructure		Iowa County	Wisconsin	United States
Flu Vaccinations		46%	53%	48%
Access to Exercise Opportunities		41%	84%	84%
Food Environment Index		9.3	8.8	7.4
Primary Care Physicians		1,980:1	1,250:1	1,330:1
Mental Health Providers		1,260:1	370:1	300:1
Dentists		1,840:1	1,360:1	1,360:1
Preventable Hospital Stays		4,394	2,498	2,666
Mammography Screening		41%	50%	44%
Uninsured		5%	6%	10%

Additional Health infrastructure (not included in summary)		Iowa County	Wisconsin	United States
Limited Access to Healthy Foods		2%	5%	6%
Food Insecurity		9%	11%	14%
Insufficient Sleep		32%	34%	37%
Teen Births		7	11	16
Sexually Transmitted Infections		113.1	435.7	495.0
Excessive Drinking		25%	24%	19%
Alcohol-Impaired Driving Deaths		32%	33%	26%
Drug Overdose Deaths			29	31
Adult Smoking		14%	15%	13%
Physical Inactivity		19%	21%	23%
Uninsured Adults		5%	7%	11%
Uninsured Children		4%	5%	5%
Other Primary Care Providers		1,410:1	630:1	710:1

Physical environment		Iowa County	Wisconsin	United States
Severe Housing Problems		10%	12%	17%
Driving Alone to Work		75%	76%	70%
Long Commute - Driving Alone		40%	28%	37%
Air Pollution: Particulate Matter		8.5	7.7	7.3
Drinking Water Violations		No		
Broadband Access		88%	89%	90%
Library Access		3	3	2

Source: University of Wisconsin Population Health Institute County Health Rankings & Roadmaps 2025

Notable Iowa County Health Statistics



14% of Iowa County adults smoke every day or most days (Wisconsin rate is 15%)



19% of Iowa County adults age 20 and over report no leisure-time physical activity (Wisconsin rate is 21%)



39% of Iowa County adults report a Body Mass Index ≥ 30 which is classified as obese (Wisconsin rate is 38%)



40% of Iowa County workers who commute alone travel more than 30 minutes to get to work. (Wisconsin rate is 28%)



26% of adults reported binge or heavy drinking in the past 30 days. (Wisconsin rate is 24%)



There is 1 mental healthcare provider for every 1,260 people in Iowa County. (Average for the state of Wisconsin is 1 for every 370 people.)



41% of the Iowa County population feel they have adequate access to locations for physical activity

Voice of the Community

Community Forums and Surveys

In 2024-2025, Upland Hills Health conducted Community Forums in six different communities within our service area.

Upland Hills Health circulated a QR Code that linked to a community survey. This was distributed at community forums, though fliers, newspaper ads, and direct mail materials to residents throughout our service area. The community was asked basic demographic information and the following questions:

- What desires do you have regarding your own or your community’s health care needs?
- What specialist or health services do you feel Upland Hills Health could offer to better serve our area?
- What would you like to see Upland Hills Health (hospitals and/or clinics) do in the next three (3) years?
- In your opinion, what does Upland Hills Health do well?
- In your opinion, what can Upland Hills Health do to improve?
- Space for additional comments was included.

In addition to the community survey, Upland Hills Health employees provided feedback to the following questions:

- Where is growth possible (expanded or new services)?
- What goals should be set for quality; patient experience at UHH?
- What specific programs should we pilot during this three-year period? In what order of priority?
- How can UHH differentiate itself?
- What, in your opinion, are the critical success factors for UHH? What are the gaps we need to fill to achieve our vision?
- How can we strengthen UHH’s position as the “employer of choice” or “best places to work”?

The Upland Hills Health medical staff provided feedback on the following questions:

- What do you think Upland Hills Health should focus on for the next three years?
- What do you see as our biggest challenges for the next three years?
- What services should we explore offering?
- What services, if any should we stop offering?
- What actions can we take that will have the biggest impact on patient care in the next three years?
- What actions can we take that will have the biggest impact on market share/ financial solvency??
- How can Upland Hills Health differentiate itself?
- What, in your opinion, are the critical success factors for Upland Hills Health? What are the gaps we need to fill to achieve our vision?

The top themes from these forums were the desire that Upland Hills Health expand mental/behavioral health services/specialists; offer drug/alcohol rehab services; provide access to more specialty care providers; offer health and fitness opportunities and provide long term care options.

Community Input Summary

- Workout facilities / indoor track
- Parkinson / Alzheimer therapy
- More mental health assistance

- Better access / less wait for appointments to family practitioners
- Ability to get through phone system
- Preventive programs, e.g., weight loss, etc.

Data Review Summary

Community Need	Iowa County	Lafayette County	Grant County	Wisconsin	U.S.
Access to exercise equipment	41%	48%	67%	84%	84%
Primary care physicians	1980 : 1	4200 : 1	2370 : 1	1250 : 1	1330 : 1
Mental health providers	1260 : 1	530 : 1	560 : 1	370 : 1	300 : 1
Preventable hospital stays	4394	3260	3185	2498	2666

Collaboration with County’s Plan on Aging

- Every three years, the Aging and Disability Resource Center (ADRC) located in Iowa County includes the input of older people to develop a County Plan on Aging. This is a mandate of the Older American’s Act to secure funding. This plan outlines an agenda for developing and strengthening current programs to meet the needs of older people in Iowa County. The ADRC is continuously looking for feedback from the community and customers on services. Since the summer of 2023, the ADRC has been specifically collecting public input from Iowa county residents through public forms, surveys, and one-on-one conversations. There have been opportunities to do this verbally and in writing. There was also an online option, mail-in option or in-person option for the survey.
- The Aging and Disability Resource Center hosted a Health and Wellness EXPO in September 2024. This annual event has continuously grown. In 2015, UHH became co-sponsor of the event. This event continues to draw approximately 200 participants and includes over 20 community partners. This community event offers free health screenings and information about services that may benefit our aging population and their caregivers.

Collaboration with the Iowa County Health Department

The Iowa County Health Department is the lead governmental agency of the County responsible for the promotion of health, wellness, and the prevention of disease. A key component in achieving this is through activities involving assessment of the community, policy development and evaluation of programs. It’s Mission is to maximize quality of life across the lifespan, and its Vision is lifelong health and well-being for every person, family, and community in Iowa County.

Local health departments are required to complete a Community Health Assessment (CHA) every five years. It is a process to help select the most important activities impacting the health of our community. The ultimate goal of a Community Health Assessment is to spark change in a community for the better. The process includes reviewing statistics and data as well as surveying the community on issues affecting them. From there, top priorities are identified along with a plan to develop solutions and next steps in order to address these issues.

Partners are committed to the important implementation of this CHA process in furthering the health of our community, especially on the heels of such an extraordinary event such as the pandemic.

Healthcare Priorities for 2025 - 2027

UHH accessed a variety of data sources in the development of this plan. These data sources included the following:

- a. Internal patient usage data, patient feedback through various department surveys;
- b. Feedback from residents of the area through a community survey conducted in coordination with our local partners in 2024;
- c. Iowa County Public Health HeART survey (survey of senior residents of Iowa County conducted by University of Wisconsin);
- d. The Aging and Resource Disability Resource Center client feedback through its 205-2027 County Plan on Aging;
- e. Outside Data and Demographic sources including the State of Wisconsin County Health Rankings Data (2025), Wisconsin Immunization Registry, State Demographic Data (including census data) and projections;

The committee formed, which included representatives of each of our partnering agencies, met to determine the greatest areas of need as well as areas where collectively we could make an impact over the three-year period. It was these sources of data and this analysis which led to the top four health goals that were selected.

List of Identified Community Health Needs	2025-2027 Prioritized Community Health Needs
Access to Child Care	Increased Access to Mental Health Providers
Access to Transportation	Increased Availability of Exercise Facility Options
Addiction Medicine	Increased Numbers of Family Practice Providers
Affordable Housing Options	

The process the committee used in selecting these top three health goals included listing areas of need based on the data sources detailed above, determining efforts and committees currently addressing similar issues, determining the resources available to address the needs, and determining the feasibility of making an impact over the three-year period. Those areas that were already being addressed by other entities were eliminated. The remaining areas were prioritized by need, availability of resources, and feasibility of making an impact.

Problem: Mental Health and Alcohol/Drug Abuse/Misuse

Mental health and addiction need for services escalated during the pandemic. Great strides were made since our last CHNA; especially as they relate to access to suboxone. But, there remains more work to do to address these health concerns.

Facts:

- Addiction/chemical dependency escalated during the pandemic.
- Before the pandemic, there was a shortage of services and providers to address these needs, locally, statewide, and nationally.
- The many lifestyle and societal changes that accompanied the pandemic – isolation, loss of jobs, school closures, burn out compounded and dramatically increased the need for mental health and substance abuse services.
- The Upland Hills Health Emergency Department reports an escalation in patients requiring detoxification and in overdose cases.
- The Department of Health & Human Services combined Grant and Iowa County statistics for mental health services. For these two counties together in 2020, the top 5 services used for mental health were:
 - Crisis Intervention (205)
 - Outpatient Counseling (179)
 - Medication Management (18)
 - Community Support Program (10)
 - Case Management (5)
- According to countyhealthrankings.org (2022):
 - 27% of Iowa County residents report excessive drinking
 - 19% of driving deaths were attributable to alcohol-impaired driving
 - The ratio of mental health providers to residents is 1,260:1

Available Resources:

- Wisconsin Region of Narcotics Anonymous
 - Unified Community Services (Behavioral Health and Crisis Services)
 - The Iowa county 24-hour Crisis Help Line (1-800-362-5717)
 - National Suicide Hotline (1-800-273-8255)
 - Text HOPELINE to 74174.
-

Problem: Lack of Exercise Facilities Throughout Service Area

Inadequate level of physical activity contributes to obesity, one of the largest causes of preventative chronic disease. Lack of regular physical activity lead to obesity, which leads to chronic disease, increased and more frequent hospital stays and premature death.

Facts:

- Physical activity can improve health.
- People who are physically active live longer and have lower risk of heart disease, strokes, Type 2 diabetes, depression, and certain types of cancer.
- Obesity is a serious, chronic disease. It can lead to other health problems including diabetes, heart disease and some cancers.
- According to the www.countyhealthrankings.org (2022 & 2025):
 - 39% of adults in Iowa County are obese
 - 59% of Iowa County residents lack access to exercise opportunities
 - 4,394 hospital stays per 100,000 people enrolled in Medicare might have been prevented by outpatient treatment.
 - 22% of Iowa county residents are inactive

Available Resources:

- Upland Hills Health operates two fitness centers in Iowa County.
- Anytime Fitness offers a facility in Dodgeville, WI the Iowa County Seat.
- The Iowa County Health Department offers Type 2 Natural Diabetes Prevention program for those who are pre-diabetic.
- The ADRC offers a program “Stepping On” for fall prevention.

Problem: Access to Primary Care Providers

Facts:

- According to recent data, there is one primary care physician per 1,980 people in Iowa County.
- Sufficient availability of primary care physicians is essential for preventive and primary care and, when needed, referrals to appropriate specialty care.
- Community residents expressed concern about long wait times for appointments with primary care providers.
- Primary care providers are often the first source of help for patients with mental health concerns.
- Primary care providers are often the first point of contact for assistance for issues pertaining to obesity, need for physical exercise, social isolation, and other health indicators listed within the needs survey.

Available Resources:

- Upland Hills Health operates even primary care clinics within the region.
- SSM Health offers one clinic within the region.
- All private practice clinics within the region have closed or have been acquired.
- Many adjunct services – such as parish nurses or public health clinics – no longer provide services.

Evaluating Efforts Addressed in the 2022-2024 CHNA

A Community Health Needs Assessment was completed in 2022. Four areas of concern, regarding the health of our communities, were selected from the top issues and were targeted for improvement. These four areas of concern are listed below, followed by an accounting of actions taken to address each issue in the past three-year period. In addition to our evaluation of efforts made to address the concerns, public input was solicited at several community town hall meetings. Upland Hills Health also provides a public forum for comment through its website and social media platforms. These forums are monitored and tracked by the community relations staff at Upland Hills Health.

Mental Health and Alcohol/ Drug Abuse/Misuse

Goal 1:

Support Iowa County Health Department in its efforts to define goals and objectives in a county-wide Community Health Improvement Plan “Healthy Iowa County.”

Community Action Teams for each of the four priority topic areas will work to define goals and objectives:

- ✓ Mental Health and Alcohol/ Drug Abuse/Misuse
- ✓ Access to Transportation
- ✓ Healthy Eating/ Weight Loss and Exercise (Healthy Living)
- ✓ Aging Concerns

One goal in each of the Community Action Teams will include assembling an inventory/asset map/centralized repository of the efforts underway within other county coalitions, organizations to reduce duplication and create synergy. Eventually, a website will be built to house this inventory and additional data/metrics on each priority area, measuring progress in objectives as well as resources in the community.

Action Plan Progress:

- Assemble and inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy. Develop a centralized data bank.
 - COMPLETED: A centralized data bank was assembled, creating an inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy.
- Develop a website that will house the information.
 - COMPLETED: The Healthy Iowa County website was developed by Public Health personnel. Healthy Iowa County is a collaborative effort aimed at improving health outcomes and reducing health disparities in Iowa County. The initiative involves various organizations working together to enhance community awareness of health resources, services, and programs available in the area. The program focuses on promoting healthy living and well-being across different priority areas.
- Measure progress in objectives as well as resource availability in the community.
 - COMPLETED: The Healthy Iowa County website provides the community with multiple resources available in the community. The Community Events Calendar is a valuable resource that includes information regarding wellness and social activities, transportation services, mental health services, food pantry assistance, and other community resources.

Community Partners/Supporting Resources:

The following partners provided data to Iowa County Public Health to create the centralized repository of information.

- Aging and Disability Resource Center (ADRC)
- Iowa County Public Health (ICPH) (will chair and spearhead this effort).
- Southwestern Wisconsin Community Action Program (SWCAP)
- Upland Hills Health (UHH)
- All community groups and agencies are invited to make submittals.

Goal 2:

Further Develop Access to Mental Health Services on a Local Level.

Action Plan Progress:

- To develop addiction mental health services at the local level.
 - Upland Hills Health opened a Behavioral Health Clinic with two Licensed Clinical Social Workers seeing patients in Dodgeville, Wisconsin.
 - Upland Hills Health continues to recruit for additional mental health providers.
 - Wood Violet Recovery, LLC opened a private, 103-bed facility that offers detox, residential, and group therapy for substance and alcohol abuse disorders in Dodgeville, Wisconsin. Upland Hills Health is supporting detoxification needs through Emergency Department and Inpatient/ICU services.
 - Oregon Mental Health Services, LLC opened an outpatient mental health clinic in Dodgeville, Wisconsin.
- Increase access to mental health services through telehealth and tele support groups.
 - With the increase in direct providers within the area, these efforts were put on hold.

Community Partners/Supporting Resources:

- Iowa County Public Health identified Services that are available and that are needed, based on community input and data.
- Community Connections Free Clinic to identify patients who need enhanced mental health services.
- The Southwestern Wisconsin Community Action Program collaborated on associated programs that support mental health programming (e.g., transportation and housing).

Goal 3:

In collaboration with our providers, help direct appropriate patients to substance abuse treatment programs.

Action Plan Progress:

- Educate the public on what local providers can do within their scopes of practice to support recovery.
 - This goal was put on hold as providers/physicians within the various areas of mental health and addiction medicine were recruited.
- Seek to better understand, and catalog what services are available in the community.
 - This was completed and posted on the new Health Iowa County website.

Community Partners/Supporting Resources:

- Iowa County Public Health (ICPH)
- Unified Community Services
- Local Law enforcement entities

Evaluating Efforts Addressed in the 2022-2024 CHNA, continued

Access to Transportation

Goal 1:

Support Iowa County Health Department in its efforts to define goals and objectives in a county-wide Community Health Improvement Plan “Healthy Iowa County.”

Community Action Teams for each of the four priority topic areas will work to define goals and objectives:

- ✓ Mental Health and Alcohol/ Drug Abuse/Misuse
- ✓ Access to Transportation
- ✓ Healthy Eating/ Weight Loss and Exercise (Healthy Living)
- ✓ Aging Concerns

One goal in each of the Community Action Teams will include assembling an inventory/asset map/centralized repository of the efforts underway within other county coalitions, organizations to reduce duplication and create synergy. Eventually, a website will be built to house this inventory and additional data/metrics on each priority area, measuring progress in objectives as well as resources in the community.

Action Plan Progress:

- Assemble and inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy. Develop a centralized data bank.
 - COMPLETED: A centralized data bank was assembled, creating an inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy.
- Develop a website that will house the information.
 - COMPLETED: The Healthy Iowa County website was developed by Public Health personnel. Health Iowa County is a collaborative effort aimed at improving health outcomes and reducing health disparities in Iowa County. The initiative involves various organizations working together to enhance community awareness of health resources, services, and programs available in the area. The program focuses on promoting healthy living and well-being across different priority areas.
- Measure progress in objectives as well as resource availability in the community.
 - COMPLETED: The Health Iowa County website provides the community with multiple resources available in the community. The Community Events Calendar is a valuable resource that includes information regarding wellness and social activities, transportation services, mental health services, food pantry assistance, and other community resources.

Community Partners/Supporting Resources:

The following partners will provide data to Iowa County Public Health to create the centralized repository of information.

- Aging and Disability Resource Center (ADRC)
- Iowa County Public Health (ICPH) (will chair and spearhead this effort).
- Southwestern Wisconsin Community Action Program (SWCAP)
- Upland Hills Health (UHH)

Goal 2:

Summarize the transportation gaps from the previous committee's work and identified gaps/barriers.

Action Plan Progress:

- Explore after-hour coverage from 5pm to 8am Sunday through Saturday.
- Explore new options for local services during business hours.
- Reach out to community provider to request that expanded transportation options be made available through Iowa County ADRC, this will decrease the number of cancelled medical appointments and reduced social isolation in our rural areas.
- Continue to develop this program from where the previous transportation committee left off. Specifically focus on transportation options after business hours and weekends in order to reduce the utilization of law enforcement and EMS for transporting patients' home, including to assisted living facilities.
- Continue to partner with SSM Health-Dean Clinic and the Upland Hills Health transitional care resource nurse when discharging patients to make sure patients have transportation to get to and from their follow-up appointments.
- The anticipated outcome of the action plan is to move closer to offering patients without transportation options for 24-hour/7-days per week coverage.
 - These action plans were combined into one plan when a national transport medical service contacted Upland Hills Health and expressed interest into moving into our region. This service contracts with government payers on a regional basis providing needed transportation services for elderly and disabled residents to and from medical appointments. Our committee worked on the application with this provider for a state award of this contract. The application was not successful.
 - This process absorbed one to two years of this CHNA cycle. We hope to apply again. When this application was denied funding, rather than developing a competing Transportation Committee to the one formed by Public Health, UHH supported that committee's efforts by funding billboards and advertising for volunteer drivers.

Community Partners/Supporting Resources:

- Aging and Disability Resource Center (ADRC) of Southwest Wisconsin oversees the Mineral Point City Taxi, Dodgeville City Taxi, and Rural Iowa County Taxi Service which are new or expanded services. UHH will promote these services to patients and families. Information has been distributed to patient care areas, clinics, and UHH departments that have patient contact. The Health and Human Services of Iowa County Business Manager keeps the UHH transportation workgroup informed of county efforts to serve Iowa County Residents.
- Southwest Wisconsin Community Action Program oversees the LIFT program. LIFT is an important transportation service for UHH patients. The LIFT Coordinator participates in the UHH transportation meetings to keep the workgroup aware of funding, other transportation options, etc.
- Community Connections Free Clinic and Upland Hills Health work together to share transportation vouchers to patients who need rides to and from clinic appointments.
- Wisconsin Region of Narcotics Anonymous works with Upland Hills Health to ensure that there are transportation options available to patients who need medication assisted treatment in Madison to prevent relapse.
- SSM Health-Dean Clinic and Upland Hills Health work with the transitional care resource nurse when discharging patients to ensure patients have access to get to and from their follow-up appointments.
- Iowa County Public Health (ICPH) works with the above agencies and UHH to coordinate resources and to raise awareness of available transportation options.

Goal 3:

Implement secure transport service, Talon, for safe and secure Mental Health Transports-acute patients.

Action Plan Progress:

- Develop a contract with a secure transport service to provide safe and secure mental health transport services to acute patients.
- Continue working with Wisconsin Region of Narcotics Anonymous to ensure that there are transportation options available to patients who need medication assisted treatment in Madison to prevent relapse.
 - UHH continues discussions with the county government on seeking support in addition to our current system of contacting Unified Health for assessment and utilizing law enforcement for transport. Meetings continue between the county, UHH and Iowa County Public Health in attendance.

Community Partners/Supporting Resources:

- Wisconsin Region of Narcotics Anonymous works with Upland Hills Health to ensure there are transportation options available to patients who need medication assisted treatment in Madison to prevent relapse.
- Southwest Wisconsin Community Action Program sponsors the Opportunity House, ED2Recovery Program, and LIFT Program.
- Unified Community Services provides Medication Assisted Treatment options, Mental Health Services, Addiction Recovery, and evaluation and placement services.
- Iowa County Law Enforcement provides data on arrest rates in our community pertaining to substance misuse. Law enforcement also provides secure mental health transports.
- Iowa County Drug Treatment Court participates on the Substance Abuse-Prevention subcommittee.
- Madison Emergency Physicians provide treatment to patients who present to UHH with substance misuse conditions.
- Community Connections Free Clinic provides data on substance misuse concerns among our uninsured/underinsured community members and Mental Health Services.
- Aging and Disability Resource Center (ADRC) of Southwest Wisconsin provides data and promotes resources.
- Iowa County Public Health (ICPH) coordinates services and enhances awareness of such services.

Goal 4:

Explore community level transportation options.

Action Plan Progress:

- Establish funding source for prepaid vouchers for those in need of assistance with cost of transportation to medical appointments.
 - This was part of the application that was denied funding. As an interim approach, Southwest Wisconsin Community Action Program, UHH and Iowa County Public Health provide emergency funding.

Community Partners/Supporting Resources:

- Aging and Disability Resource Center (ADRC) of Southwest Wisconsin oversees the Mineral Point City Taxi, Dodgeville City Taxi, and Rural Iowa County Taxi Service which are new or expanded services. UHH will promote these services to patients and families. Information has been distributed to patient care areas, clinics, and UHH

departments that have patient contact. The Health and Human Services of Iowa County Business Manager keeps the UHH transportation workgroup informed of county efforts to serve Iowa County residents.

- Southwest Wisconsin Community Action Program oversees the LIFT program. LIFT is an important transportation service to UHH patients. Lift coordinator participates in the UHH transportation meetings to keep the workgroup aware of funding, other transportation options, etc.
- Community Connections Free Clinic and Upland Hills Health work together to share transportation vouchers to patients who need rides to and from clinic appointments.
- Wisconsin Region of Narcotics Anonymous works with Upland Hills Health to ensure that there are transportation options available to patients who need medication-assisted treatment in Madison to prevent relapse.
- SSM Health-Dean Clinic and Upland Hills Health work with the transitional care resource nurse when discharging patients to ensure that patients have access to get to and from their follow-up appointments.

Evaluating Efforts Addressed in the 2022-2024 CHNA, continued

Problem: Healthy Eating/ Weight Loss and Exercise (Health Living)

Goal 1:

Support Iowa County Health Department in its efforts to define goals and objectives in a county-wide Community Health Improvement Plan “Healthy Iowa County.”

Community Action Teams for each of the four priority topic areas will work to define goals and objectives:

- ✓ Mental Health and Alcohol/ Drug Abuse/Misuse
- ✓ Access to Transportation
- ✓ Healthy Eating/ Weight Loss and Exercise (Healthy Living)
- ✓ Aging Concerns

One goal in each of the Community Action Teams will include assembling an inventory/asset map/centralized repository of the efforts underway within other county coalitions, organizations to reduce duplication and create synergy. Eventually, a website will be built to house this inventory and additional data/metrics on each priority area, measuring progress in objectives as well as resources in the community.

Action Plan Progress:

- Assemble and inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy. Develop a centralized data bank.
 - COMPLETED: A centralized data bank was assembled, creating an inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy.
- Develop a website that will house the information.
 - COMPLETED: The Healthy Iowa County website was developed by Public Health personnel. Health Iowa County is a collaborative effort aimed at improving health outcomes and reducing health disparities in Iowa County. The initiative involves various organizations working together to enhance community awareness of health resources, services, and programs available in the area. The program focuses on promoting healthy living and well-being across different priority areas.
- Measure progress in objectives as well as resource availability in the community.

- COMPLETED: The Health Iowa County website provides the community with multiple resources available in the community. The Community Events Calendar is a valuable resource that includes information regarding wellness and social activities, transportation services, mental health services, food pantry assistance, and other community resources.

Community Partners/Supporting Resources:

The following partners will provide data to Iowa County Public Health to create the centralized repository of information.

- Aging and Disability Resource Center (ADRC)
- Iowa County Public Health (ICPH) (will chair and spearhead this effort).
- Southwestern Wisconsin Community Action Program (SWCAP)
- Upland Hills Health (UHH)

Goal 2:

Increase employee utilization of the Upland Hills Health Wellness Center by 25% by the end of December 2023.

Action Plan Progress:

- Host Open Houses in the Wellness Center for employees to provide orientation to the departments equipment and to re-energize employees' own fitness and weight-loss goals.
 - We did hold 1 open house with minimal attendance. We offered equipment training, Aesthetician and massage therapy were there as well to provide information and brief treatments.
- Educate staff regarding the use of exercise equipment through free orientation sessions by personal trainers.
 - We offered free orientation for equipment use to staff and the public.
- Resume exercise classes before-and after-regular working hours to improve staff accessibility.
 - An instructor provided a fall and partial winter session; however, classes were very poorly attended. Utilized social media, Unet and flyers to advertise.

Community Partners/Supporting Resources:

- Upland Hills Health Clinics will remind employees they have free access to Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.
- SSM Health-Dean primary health care providers will promote employee use of Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.

Goal 3:

Increase public membership of the Upland Hills Health Therapy & Wellness Center and the Mineral Point Fitness Center by 30% by the end of December 2024.

Action Plan Progress:

- Host Open Houses for community members to orient them to the Therapy and Wellness department and its resources.
 - Hosted one open house to the public which was not very well attended.
- Offer education to community members regarding the use of equipment through free orientation session by personal trainers.

- Personal trainers were present at the open house for equipment demonstration. We offer free demonstrations to use equipment for individuals with memberships.
- Resume exercise classes for those of various skill levels and age groups.
 - Nancy Anderson offered poorly attended classes. We marketed through Social media.
 - Strong Bodies classes resumed with fairly good attendance. Classe offered 2x week for individuals 55 and over.

Community Partners/Supporting Resources:

- Upland Hills Health Clinics promote public use of Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.
- SSM Health-Dean primary health care providers promote public use of Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.
- Iowa County Aging and Disabilities Resource Center promotes public use of Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.
- Iowa County Public Health promotes public use of Upland Hills Health fitness center locations in Mineral Point and at the Hospital location in Dodgeville.

Goal 4:

Pilot program for revised Living Well program will be initiated at Upland Hills Health by 3/1/2023 with a maximum of 12 participants.

Action Plan Progress:

- Create a Living Well 12-week pilot program focusing on supervised exercise plan by a personal trainer with nutritional classes developed by clinical dieticians.
 - This was put on hold due to lack of dietician and availability of therapy staff to provide this services.
- Pilot program will consist of 12 staff members from UHH.
 - This was put on hold due to lack of dietician and availability of therapy staff to provide this services.
- Data will be collected pre-and post-program to determine efficacy of the program through outcomes.
 - This was put on hold due to lack of dietician and availability of therapy staff to provide this services.
- Feedback from participants in the pilot program will be considered in adjusting program details before offering it to the public.
 - This was put on hold due to lack of dietician and availability of therapy staff to provide this services.

Community Partners/Supporting Resources:

- Upland Hills Health Clinics planned to promote UHH employee participation in the pilot Living Well Program.
- SSM Health-Dean primary health care providers planned to promote UHH employee participation in the pilot Living Well Program.

Goal 5:

Roll out revised Living Well Program to community members by August 2023.

Action Plan Progress:

- Identify frequency of class offerings according to staffing.
 - Plan was initiated, however due to lack of dieticians and availability of therapy staff we were unable to continue the program.
- Establish manageable fee for participants.
 - Plan was initiated, however due to lack of dieticians and availability of therapy staff we were unable to continue the program.
- Advertise Living Well program to the community.
 - Plan was initiated, however due to lack of dieticians and availability of therapy staff we were unable to continue the program.
- Collect data pre and post program to identify outcomes of the program for the participants.
 - Plan was initiated, however due to lack of dieticians and availability of therapy staff we were unable to continue the program.

Community Partners/Supporting Resources:

- Upland Hills Health Clinics promoted public participation in the Living Well Program.
- SSM Health-Dean primary health care providers promoted public participation in the Living Well Program.
- Iowa County Aging and Disabilities Resource Center promoted public participation in the Living Well Program.
- Iowa County Public Health promoted public participation in the Living Well Program.

Evaluating Efforts Addressed in the 2022-2024 CHNA, continued

Aging Concerns

Goal 1:

Support Iowa County Health Department in its efforts to define goals and objectives in a county-wide Community Health Improvement Plan “Healthy Iowa County.”

Community Action Teams for each of the four priority topic areas will work to define goals and objectives:

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- ✓ Access to Transportation
- ✓ Healthy Eating/ Weight Loss and Exercise (Healthy Living)
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Action Plan Progress:

- Assemble and inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy. Develop a centralized data bank.

- COMPLETED: A centralized data bank was assembled, creating an inventory/asset map/centralized repository of the efforts underway within other county coalitions and organizations to reduce duplication and create synergy.
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- Southwestern Wisconsin Community Action Program (SWCAP)
- Upland Hills Health (UHH)

Goal 2:

Explore current/establish new programs that provide support to caregivers including respite options.

Action Plan Progress:

- Inventory current programs in the area to better understand the service needs for the local senior-age population.
- Rather than doing a complete inventory, we brought together the Community Needs survey results that each agency completed (e.g. Public Health, ADRC, UHH). The greatest need expressed in each survey was for transportation, especially in light of the reduced number of volunteer drivers. UHH initially had its own transportation committee—but when we realized that Iowa County Public Health had its own committee, with similar members, we dissolved our committee and collaborated with theirs. Initially, we agreed upon the following goals:
 - Explore Current/ Establish New Programs that provide support to Caregivers including Respite Options
 - Explore the Development of a Senior Living Center with Multiple Housing / Care Options
 - Network with other service providers to address issues pertaining to isolation of seniors, particularly in the more rural areas
- Through our meetings, we developed the following goals/ areas of study:
 - Better Understand the availability of Respite Care – review and discuss how we could increase the volunteers on the Registry; better understand current providers
 - Explore the 211 Service – Upland Hills Health and Public Health chaired this effort. We did not know of this service until we began meeting as a group. 211 is a free and confidential service that connects residents with thousands of local programs and services. A Wisconsin resident dials 211 on his/ her phone to reach trained community resource specialists available 24 hours a day, 7 days a week. Or, they can do a web-based search for services available by ZIP code. Upland Hills Health arranged for a

presentation by the 211 State Director to our committee. Public Health was going to work with ADRC to ensure that all of the resources for seniors that they were aware of were on this site.

- Develop the Senior Living Campus – which included assisted living/ high needs assisted living/ Memory Care and could, in the future, include nursing home beds, respite care, a hospice room, and adult day care
- Continue supporting the development of Health Iowa County – a website that Iowa County Public Health sponsors which serves as a repository for all events/ classes/ workshops/ club meetings/ etc. in Iowa County. This was in response to the goal of reducing isolation, particularly among our seniors.
- Identify gaps in senior-age services as they relate to facilities and respite care.
 - The committee explored the need for Respite Care and learned that there is a designation/ certification for in-home respite care providers that the State of Wisconsin oversees and a web-based listing of certified providers. We had not realize it existed. ADRC noted that we had few residents willing to provide these services. They noted that we did have a few respite services that provided limited respite care within Iowa County. Upland Hills Health reviewed available respite providers for us and learned of two:
 - *Dalogasa Gardens Adult Family Home was called twice. The voice message referred to TLC home care, so we believe they transitioned from an adult family home to a supportive home care agency.
 - *Whispering Hope Adult Family Home is a 4-bed licensed facility for individuals with traumatic brain injury, developmentally disabled and/or mental illness. Residents are typically younger and ambulatory. They offer scheduled outings and social gatherings; residents can attend day centers, like the Hodan Center. They accept private pay, Inlusa Managed Medicaid, and Iris.
- Develop plan to develop three new programs/services that will assist in closing the identified gaps.

The committee decided to move its focus to:

- Exploring Palliative Care
- Moving forward with the Senior Living Campus and exploring other possible programs once it is up and running.
- Supporting Iowa County Public Health’s Transportation Committee and the Healthy Iowa County website
- Supporting ADRC in any efforts it must publicize the Certified Respite Care Providers and the training of others who might want to offer this service.
- Implement/evaluate these three programs/services to improve service offerings and enhance sustainability.
 - We paid for a study through a consulting group, 1,000 Partners, to review the need for Palliative Care in Iowa County and recommend steps forward. This service is now under development through Upland Hills Health.
 - The Senior Living campus is scheduled to open in the fall of 2026. Additional program offering will be studied after its opening.
 - Upland Hills Health provided Iowa County with \$3,000 to support its marketing efforts for volunteer drivers.
 - The committee cataloged available respite providers. Upland Hills Health decided to increase its swing bed program, which can care for respite patients. The committee explored a statewide effort, PACE (Program of All-Inclusive Care for the Elderly. PACE is a national program that provides older adults with:
 - Health care.
 - Long-term care.
 - Prescription drugs.

PACE aims to help its members live in a home setting for as long as they can.

But, we found out that in Wisconsin, PACE is an option only for people who live in Kenosha, Milwaukee, Racine, and Waukesha County. The state of Wisconsin determines which towns can participate.

Community Partners/Supporting Resources:

- Aging and Disabilities Resources Center of Iowa County serves as a reference guide for area services.
- Iowa County Public Health Department serves as a reference guide for area services.
- Southwest Wisconsin Community Action Program serves as a reference guide for area services and resources.

Goal 3:

Explore the development of a senior living center with multiple house / care options.

Action Plan Progress:

- Visit area senior living developments to understand new senior living models and trends.
 - Upland Hills Health representatives visited four campuses.
- Develop proformas on various scenarios for types of senior living to identify financial investment demands.
 - Six proformas based on six scenarios were developed in conjunction with Wipfli, Upland Hills Health’s accounting firm.
- Seek investors to sustain new senior living developments for the future.
 - Meetings were held with three developers. These meetings continue.
 - The senior living campus plans were completed and land purchased. Upland Hills Health is scheduled to break ground in the fall of 2025. We continue discussions with the county regarding the feasibility of the county building a nursing home on this campus. Upland Hills Health continues discussions with investors on their desire to build independent living options on this campus.

Community Partners/Supporting Resources:

- ElderSpan Management, LLC currently owns and operates multiple senior living facilities in the region. They are a trusted business partner and provide insight regarding senior living facilities and operations to the Upland Hills Health Governing Board.
- Iowa County is a past owner/operator of the Bloomfield Rehabilitation Center and the local government body which may be helpful in seeking investors.
- Aging & Disability Resource Center (ADRC) is a resource for the local aging population and provide insight regarding senior living and senior care needs.

Goal 4:

Network with other service providers to address issues pertaining to isolation of seniors, particularly in the more rural areas.

Action Plan Progress:

- Inventory current programs provided in the rural communities.
 - This was completed as part of the development of the Healthy Iowa County website.
- Identify gaps in services and if new programs are feasible to be established.

- This was completed through our community meetings and surveys. Plans were developed to offer exercise opportunities. Of these offerings, Strong Bodies, a program for those 55 years and older, was the most successful program.
- Develop plan to develop three new programs/services that will assist in closing the gaps.
 - Exercise programs including use of equipment, exercise routines, and Strong Bodies were offered. Strong Bodies was the most successful in terms of attendance, of the three. We have expanded these offerings into additional communities.
- Implement/evaluate these three programs/services to provide program sustainability into the future.
 - The strengthening program, Strong Bodies, will continue into the future as it is well received.

Community Partners/Supporting Resources:

- Aging and Disabilities Resources Center of Iowa County serves as a reference guide for area services.
- Iowa County Public Health Department serves as a reference guide for area services.
- Southwest Wisconsin Community Action Program serves as a reference guide for area services and resources.

APPENDICES

Demographics Information

Source: 2022 & 2025 County Health Snapshot, Robert Wood Johnson Foundation Program

COUNTY

Iowa, WI 2025 ▾

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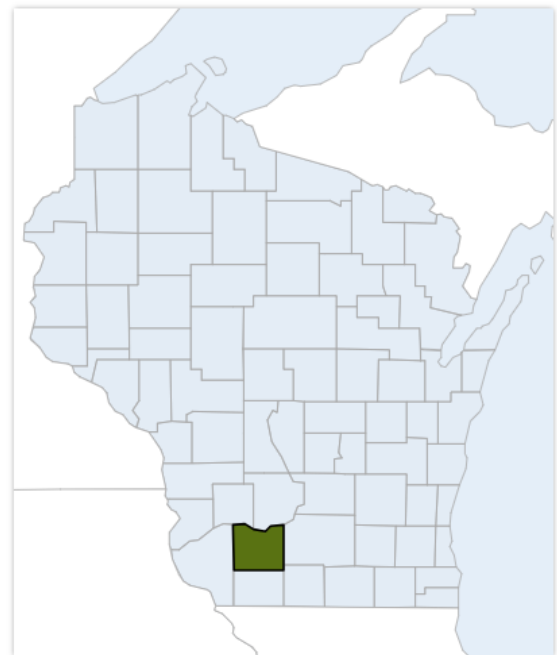
County Demographics

The health of a place results from past and present policies and practices. The land known as Iowa County, along with the entirety of the U.S., has been home for many thousands of years to hundreds of Indigenous nations. [Native Land Digital](#) "strives to create and foster conversations about the history of colonialism, Indigenous ways of knowing, and settler-Indigenous relations."

Iowa County, Wisconsin is Metropolitan 📍. In Iowa County, 79.3% of the population lives in a low population density area 📍.

	County	Wisconsin
% Below 18 Years of Age**	21.4%	21.1%
% 65 and Older**	21.7%	19.1%
% Female**	49.1%	49.9%
% American Indian or Alaska Native**	0.4%	1.2%
% Asian**	0.8%	3.3%
% Hispanic**	2.4%	8.1%
% Native Hawaiian or Other Pacific Islander**	0.0%	0.1%
% Non-Hispanic Black**	0.9%	6.3%
% Non-Hispanic White**	94.2%	79.5%
% Disability: Functional Limitations**	25%	28%
% Not Proficient in English**	0%	1%
Children in Single-Parent Households**	16%	22%
% Rural**	79.3%	32.9%
Population**	23,956	5,910,955

** Use caution if comparing these data with prior years



HeART Survey Results

[The Iowa County Health Department is the lead agency for the Healthy Aging in Rural Towns (HeART) Coalition.]

The Healthy Aging in Rural Towns (HeART) Coalition was a grant funded position, lasting through September of 2021. The 2018 survey was a one-time component of the initial planning phases of the grant period. Although the coalition still meets monthly for partner networking and sharing, the coalition is no longer actively working towards specific objectives and some of the initial strategies to address the objectives were not addressed or had to be modified due to the pandemic. **This HeART Coalition survey data was still considered during the 2022 – 2024 CHNA evaluation.**

Preventative Health and Wellness

ADULT – HeART Survey: July to August 2018, 254 participants between ages 70-79

Companionship:

- Loneliness and social isolation were identified as gaps in the health and well-being of older adults
- 89.9% of those surveyed selected that they did not utilize the companionship or visiting program because they did not need it
- Some individuals wished there was a companionship program
- Some individuals wished there was a hobby networking program/a group that played cards together

Services available:

- 70.6% of individuals are unsure of the services available that respond to the needs of people with Alzheimer’s disease or other dementias
- 58.6% of those surveyed have not utilized information from the Aging and Disability Resource Center (ADRC)

Of those:

- 78.4% said this was due to not needing the programs available
- 13.5% of those said that it was due to lack of knowledge of the programs the ADRC provides

Self-care/physical activity:

- 31.9% have utilized health or exercise classes such as (Stepping On, Living Well with Diabetes, Tai Chi and Yoga)
- 24.7% utilized health fairs
- 22.3% utilized free preventative screenings (weight, blood pressure checks, etc.)
- 73.7% received their flu shot
- 9.3% attended support groups
- 21.4% received education regarding specific health concerns such as heart disease or diabetes

Community outings:

- 77.8% attend events such as festivals, school sports, parades, town hall meetings, etc.
Of those:
 - 67.5% do so for the opportunity to be active member in the community
 - 50.8% for family-friendly environment
 - 42.9% for family involvement in the events
- Some do not attend community events due to language barriers and other social concerns

Assessment of home/community safety:

- 78.8% selected that they feel very safe in their community
- 35.8% live alone
- 54.5% have someone that regularly checks in with them (phone, text, email or visit)
- 93.6% have someone to call in an emergency other than 911

CAREGIVER (Majority between ages 60-69)

Category of caregiver:

- 43.1% care for individuals that live with the caregiver
- 43.1% care for individuals that live on their own
- 40.6% care for a parent or parent-in-law
- 37.5% care for a spouse

Self-care/self-management of caregiver:

- 60.8% struggle with managing their emotions
- 58.1% struggle with meeting their personal needs such as personal time, exercise or sleep
- 56.8% must adjust their work schedule in order to be a caregiver and an employee
- 34.1% have challenges with their work due to stress, feeling guilt and having to take off extra time for appointments for the one they are providing care
- 12.5% of caregivers have utilized spiritual and grief counseling in the past 12 months

Involvement of caregiver and individual receiving care:

- 52.5% of caregivers feel very comfortable managing socialization (getting to church, card group, or family outings)
- 46.4% of caregivers have utilized information regarding connection to services and resources in the past 12 months
- 26.8% of caregivers have used resources to assist with getting other family involved in the past 12 months
- 51.4% of the people that are being cared for by a caregiver attend events such as festivals, school sports, parades, etc.
- Some do not attend these events due to: Accessibility, Weather, Overwhelming environment, Excess walking, No one to go with, Too tired, Depression

Assistance that caregivers have access to and desire:

- Some caregivers would like to have responsible individuals play board games with their loved ones
- 88.89% of caregivers know that Seniors United for Nutrition (SUN) exists and provides meals on wheels
- 62.5% of those who provide care have not participated in the SUN program
- 32% of caregivers have attended educational opportunities regarding how to care for yourself while providing care for older adults

Utilization of the internet by caregivers:

- 25.8% of caregivers do not participate in educational opportunities due to the location and times not being convenient.
- 78.6% of caregivers use the internet as a way to learn about the illness or condition of the person they care for
- 31% of caregivers use the internet to find services in their community
- 21.4% of caregivers use the internet as a way to take a break from caregiving

Access to Transportation

ADULT – HeART Survey: July to August 2018, 254 participants between ages 70-79

Current Transportation Statistics:

- 92.2% currently drive
- 97.1% have a dependable vehicle or other form of transportation
- 10.4% need transportation assistance
- 5.4% have missed appointments or been unable to shop due to transportation issues in the last 6 months
- 91.4% drive themselves to appointments, meetings, errands and events
- 24.1% have a friend or relative provide transportation
- 11.4% walk
- 6.1% use other form of transportation
- 2.9% utilize an agency or service van for older adults and people with a disability (like Southwest CAP Lift or Driver Escort Program)
- 1.6% use their bicycle
- 0.8% use a taxi
- Many individuals wish there were places for individuals to be dropped off in parking lots. Also, priority parking may be beneficial

Transportation Services Utilization and Desires:

- 19.4% of those in the HeART survey had used transportation services in the past 6 months.
- 87.2% of those surveyed selected that they did not need to utilize the Transportation services
- 14.4% utilized pharmacy deliveries to home
- 92.4% of those surveyed selected that they did not need to utilize the pharmacy home delivery service.
- Some individuals wished there was a grocery delivery system
- Some individuals wished there was a transportation service specifically for doctor's appointments
- Some individuals wished there was a transportation service available for non-emergent needs
- Some individuals wished there was an easier accessible taxi service
- Some individuals indicated the desire for there to be a bus system so individuals that are located out of town are able

Seniors United for Nutrition Program (SUN):

- 91.5% selected that they knew of the Seniors United for Nutrition (SUN) Program that provides Meals-on-Wheels and Meal Sites.
- 80.2% selected that they have not utilized the Senior United for Nutrition (SUN) Program.
- 57.9% learned about SUN through the newspaper/agency newsletters
- 56.2% learned about SUN through the ADRC

Community Involvement:

- Reasons why individuals do not attend community events
 - Some individuals stated that they do not attend community events due to the traffic and poor driving conditions
 - Some individuals do not enjoy attending events for they do not want to go alone
 - Accessibility to affordable, accommodating transportation
 - Inadequate handicap parking
 - Distance

CAREGIVER (Majority between ages 60-69)

- 53.8% of caregivers feel very comfortable dropping of the person at a building entrance while they park the care
- 52.6% of caregivers feel very comfortable transferring person to and from the care and or wheelchair
- 12.5% of caregivers have used transportation services in the past 12 months

American Community Survey for Iowa County

Age Group Estimates	Wisconsin	Iowa County
Total Population - All Ages, All Races	5,892,023	23,832
60+	1,476,554	6,703
65+	1,062,121	4,738
75+	419,886	1,720
85+	124,201	506
<i>% 60+</i>	25.1%	28.1%
<i>% 65+</i>	18.0%	19.9%
<i>% 75+</i>	7.1%	7.2%
<i>% 85+</i>	2.1%	2.1%
Males age 65+	493,667	2,320
<i>Males as percent of 65+ population</i>	46.5%	49.0%
Females age 65+	568,454	2,418
<i>Females as percent of 65+ population</i>	53.5%	51.0%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B01001</i>		

Median Age in Years	Wisconsin	Iowa County
Total (Males and Females, All Races)	40.1	43.7
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B01002</i>		

Households with Older Members	Wisconsin	Iowa County
Total number of households	2,446,028	9,951
Households with one or more people 60 years and over:	1,008,389	4,536
<i>Percent with a member age 60+</i>	41.2%	45.6%
Households with one or more people 65 years and over:	753,722	3,344
<i>Percent with a member age 65+</i>	30.8%	33.6%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Tables B11006 and B11007</i>		

Marital Status by Sex	Wisconsin	Iowa County
Total Males, 65+	493,667	2,320
Males, 65+: Never Married	34,095	181
<i>% Males Never Married</i>	6.9%	7.8%
Males, 65+: Married, Spouse Present	333,452	1,596
<i>% Males Married, Spouse Present</i>	67.5%	68.8%
Males, 65+: Married, Spouse Absent (e.g., Separated)	14,490	74
<i>% Males Married, Spouse Absent</i>	2.9%	3.2%
Males, 65+: Widowed	48,838	208
<i>% Males Widowed</i>	9.9%	9.0%
Males, 65+: Divorced	62,792	261
<i>% Males Divorced</i>	12.7%	11.3%
Total Females, 65+	568,454	2,418
Females, 65+: Never Married	34,991	108
<i>% Females Never Married</i>	6.2%	4.5%
Females, 65+: Married, Spouse Present	266,520	1,207
<i>% Females Married, Spouse Present</i>	46.9%	49.9%
Females, 65+: Married, Spouse Absent (e.g., Separated)	13,969	27
<i>% Females Married, Spouse Absent</i>	2.5%	1.1%
Females, 65+: Widowed	165,733	655
<i>% Females Widowed</i>	29.2%	27.1%
Females, 65+: Divorced	87,241	421
<i>% Females Divorced</i>	15.3%	17.4%
Total Persons, 65+	1,062,121	4,738
Persons, 65+: Never Married	69,086	289
<i>% Total Never Married</i>	6.5%	6.1%
Persons, 65+: Married, Spouse Present	599,972	2,803
<i>% Total Married, Spouse Present</i>	56.5%	59.2%
Persons, 65+: Married, Spouse Absent (e.g., Separated)	28,459	101
<i>% Total Married, Spouse Absent</i>	2.7%	2.1%
Persons, 65+: Widowed	214,571	863
<i>% Total Widowed</i>	20.2%	18.2%
Persons, 65+: Divorced	150,033	682
<i>% Total Divorced</i>	14.1%	14.4%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B12002</i>		

Disability Status of Non-institutionalized Population by Sex	Wisconsin	Iowa County
Males, 65+, Total*	483,798	2,283
Males, 65+, With a Disability	140,746	625
<i>Males, 65+, % with a Disability</i>	29.1%	27.4%
Females, 65+, Total*	551,225	2,349
Females, 65+, With a Disability	155,654	632
<i>Females, 65+, % with a Disability</i>	28.2%	26.9%
All Persons, 65+*	1,035,023	4,632
Total Persons, 65+, With a Disability	296,400	1,257
<i>Total Persons, 65+, % with a Disability</i>	28.6%	27.1%

Ages 65 and Older, Living Alone	Wisconsin	Iowa County
Persons 65+	1,062,121	4,576
Persons 65+ living alone	309,685	1,366
<i>Persons, % living alone</i>	29.2%	29.9%
Males age 65+	493,667	2,320
Males age 65+ living alone	104,206	501
<i>Males, % living alone</i>	21.1%	21.6%
Females age 65+	568,454	2,418
Females age 65+ living alone	205,479	866
<i>Females, % living alone</i>	36.1%	35.8%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Tables B01001 and B09020</i>		

Population by Race and Ethnicity, July 2023	Wisconsin	Iowa County
Total - All Ages: Total Population	5,910,955	23,956
65+ All Races and Hispanic Ethnicity	1,129,802	5,207
<i>% of Total Population that is 65+</i>	19.1%	21.7%
<i>% of 65+ that is All Races and Hispanic Ethnicity</i>	100.0%	100.0%
Total - All Ages: White/Caucasian Alone, not Hispanic	4,699,967	22,555
65+ White/Caucasian	1,042,883	5,088
<i>% of White/Caucasian pop that is 65+</i>	22.2%	22.6%
<i>% of 65+ that is White/Caucasian</i>	92.3%	97.7%
Total - All Ages: Black/African American Alone, not Hispanic	370,554	207
65+ Black/African American	35,307	13
<i>% of Black/African American pop that is 65+</i>	9.5%	6.3%
<i>% of 65+ that is Black/African American</i>	3.1%	0.2%
Total - All Ages: Native American/Alaska Native Alone, not Hispanic	52,096	50
65+ Native American/Alaska Native	7,024	11
<i>% of Native American/Alaska Native pop that is 65+</i>	13.5%	22.0%
<i>% of 65+ that is Native American/Alaska Native</i>	0.6%	0.2%
Total - All Ages: Asian Alone, not Hispanic	191,911	184
65+ Asian	13,451	35
<i>% of Asian pop that is 65+</i>	7.0%	19.0%
<i>% of 65+ that is Asian</i>	1.2%	0.7%
Total - All Ages: Hawaiian/Pacific Islander Alone, not Hispanic	2,470	10
65+ Hawaiian/Pacific Islander	282	1
<i>% of Hawaiian/Pacific Islander pop that is 65+</i>	11.4%	10.0%
<i>% of 65+ that is Hawaiian/Pacific Islander</i>	0.0%	0.0%
Total - All Ages: Two or More Races, not Hispanic	115,668	371
65+ Two or More Races	5,272	27
<i>% of Two or More Races pop that is 65+</i>	4.6%	7.3%
<i>% of 65+ that is Two or More Races</i>	0.5%	0.5%
Total - All Ages: Hispanic/Latino (may be any race)	478,289	579
65+ with Ethnicity Hispanic/Latino	25,583	32
<i>% of Ethnicity Hispanic/Latino pop that is 65+</i>	5.3%	5.5%
<i>% of 65+ with Ethnicity Hispanic/Latino</i>	2.3%	0.6%
<i>Source: U.S. Bureau of the Census, Annual Population Estimates, July 2023 released Summer 2024</i>		

Highest Educational Attainment by Sex	Wisconsin	Iowa County
Males: 65 years and over:	493,667	2,320
65+ Males: Less than high school graduate	39,418	128
65+ Males: High school graduate (includes equiv.)	173,134	875
65+ Males: Some college or associate's degree	137,376	633
65+ Males: Bachelor's degree or higher	143,739	684
<i>% 65+ Males: Less than high school</i>	8.0%	5.5%
<i>% 65+ Males: High school only</i>	35.1%	37.7%
<i>% 65+ Males: More than high school</i>	56.9%	56.8%
Females: 65 years and over:	568,454	2,418
65+ Females: Less than high school graduate	41,238	123
65+ Females: High school graduate (includes equiv)	228,075	1,050
65+ Females: Some college or associate's degree	157,254	588
65+ Females: Bachelor's degree or higher	141,887	657
<i>% 65+ Females: Less than high school</i>	7.3%	5.1%
<i>% 65+ Females: High school only</i>	40.1%	43.4%
<i>% 65+ Females: More than high school</i>	52.6%	51.5%
Persons: 65 years and over:	1,062,121	4,738
65+ Persons: Less than high school graduate	80,656	251
65+ Persons: High school graduate (includes equiv)	401,209	1,925
65+ Persons: Some college or associate's degree	294,630	1,221
65+ Persons: Bachelor's degree or higher	285,626	1,341
<i>% 65+ Persons: Less than high school</i>	7.6%	5.3%
<i>% 65+ Persons: High school only</i>	37.8%	40.6%
<i>% 65+ Persons: More than high school</i>	54.6%	54.1%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B15001</i>		
Household Income	Wisconsin	Iowa County
Households with head age 65+	681,599	3,093
Household income below \$15,000	59,234	450
<i>% with HH income below \$15,000</i>	8.7%	14.5%
Household income below \$25,000	128,502	687
<i>% with HH income below \$25,000</i>	18.9%	22.2%
Household income below \$35,000	212,862	980
<i>% with HH income below \$35,000</i>	31.2%	31.7%
Household income below \$50,000	305,699	1,432
<i>% with HH income below \$50,000</i>	44.9%	46.3%
Household income below \$75,000	446,370	2,051
<i>% with HH income below \$75,000</i>	65.5%	66.3%
Household income below \$100,000	533,986	2,439
<i>% with HH income below \$100,000</i>	78.3%	78.9%
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B19037</i>		

Median Household Income	Wisconsin	Iowa County
Total, householders of all ages:	\$75,670	\$83,372
Householder under 25 years	\$43,435	\$53,269
Householder 25 to 44 years	\$86,719	\$97,340
Householder 45 to 64 years	\$92,539	\$95,612
Householder 65 years and over	\$55,271	\$55,130
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B19049</i>		

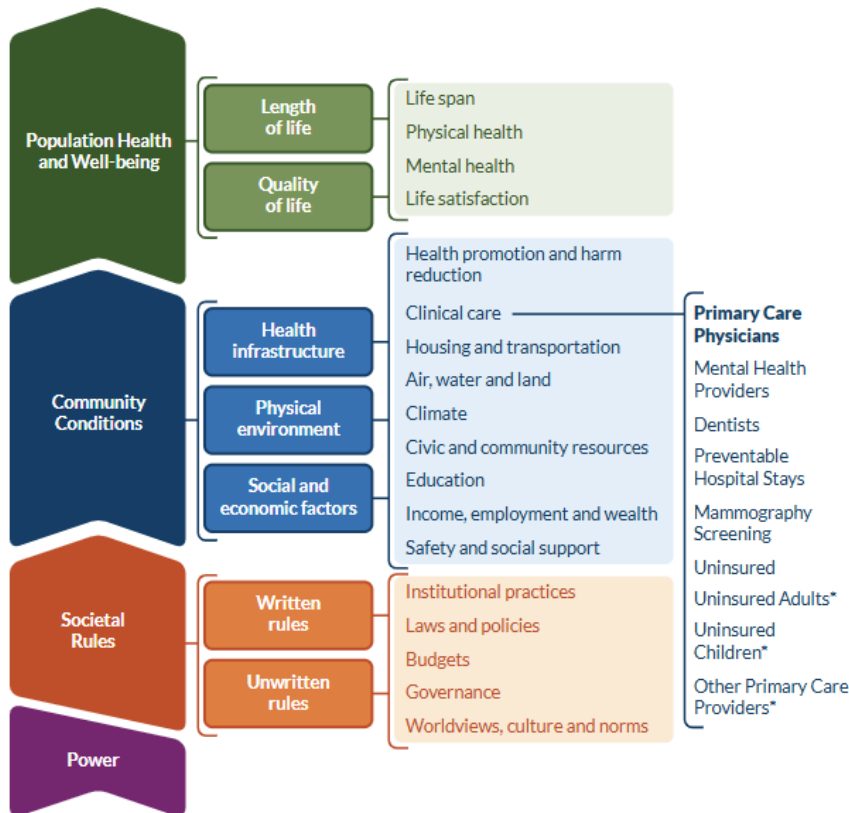
Poverty by Sex, Ages 65 and Older*	Wisconsin	Iowa County
Males age 65+	483,798	2,283
65+ Males in Poverty	34,113	267
<i>% of 65+ males in poverty</i>	7.1%	11.7%
Females age 65+	551,225	2,349
65+ Females in Poverty	54,981	274
<i>% of 65+ females in poverty</i>	10.0%	11.7%
Persons age 65+	1,035,023	4,632
Persons 65+ in poverty	89,094	541
<i>% of persons 65+ in poverty</i>	8.6%	11.7%
*Note: Totals for this table only include persons for whom poverty status can be determined.		
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B17001</i>		

Ratio of Income to Poverty: Ages 65 and Older*	Wisconsin	Iowa County
Total, Age 65+	1,035,023	4,632
Age 65+ below poverty	89,094	541
<i>% of 65+ Pop below poverty</i>	8.6%	11.7%
Age 65+: 150% of poverty or less	160,685	864
<i>% of 65+ Pop: 150% of poverty or less</i>	15.5%	18.7%
Age 65+: 185% of poverty or less	223,852	1,118
<i>% of 65+ Pop: 185% of poverty or less</i>	21.6%	24.1%
Age 65+: 200% of poverty or less	260,963	1,268
<i>% of 65+ Pop: 200% of poverty or less</i>	25.2%	27.4%
Age 65+: 300% of poverty or less	441,975	1,955
<i>% of 65+ Pop: 300% of poverty or less</i>	42.7%	42.2%
*Note: Totals for this table only include persons for whom poverty status can be determined.		
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B17024</i>		

Employment Status by Age and Sex	Wisconsin	Iowa County
MALES:		
Males age 65-74: Employed	83,391	470
<i>Males 65-74; % Employed</i>	26.5%	30.8%
Males age 65-74: Unemployed	1,792	0
<i>Males 65-74; % Unemployed</i>	0.6%	0.0%
Males age 75+: Employed	14,733	77
<i>Males 75+; % Employed</i>	8.2%	9.7%
Males age 75+: Unemployed	168	0
<i>Males 75+; % Unemployed</i>	0.1%	0.0%
FEMALES:		
Females age 65-74: Employed	67,603	453
<i>Females 65-74; % Employed</i>	20.6%	30.3%
Females age 65-74: Unemployed	1,378	3
<i>Females 65-74; % Unemployed</i>	0.4%	0.2%
Females age 75+: Employed	10,745	48
<i>Females 75+; % Employed</i>	4.5%	5.2%
Females age 75+: Unemployed	357	0
<i>Females 75+; % Unemployed</i>	0.1%	0.0%
TOTAL: Persons age 65+		
Persons age 65+: Employed	176,472	1,048
<i>Persons age 65+; % Employed</i>	16.6%	22.1%
Persons age 65+: Unemployed	3,695	3
<i>Persons age 65+; % Unemployed</i>	0.3%	0.1%
Note: Percent unemployed is not the same as the "unemployment rate"		
<i>Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Table B23001</i>		

Housing Unit Tenure and Housing Costs	Wisconsin	Iowa County
Housing units occupied by householders age 65+	681,599	3,093
Number of units that are rentals	152,147	503
<i>Percent of units that are rentals</i>	22.3%	16.3%
Rental costs less than 30% of income	56,084	131
<i>Percent with rental costs <30% of income</i>	36.9%	26.0%
Rental costs 30% of income or more	82,490	265
<i>Percent with rental costs >=30% of income or more</i>	54.2%	52.7%
Number of units that are owner-occupied	529,452	2,590
<i>Percent of units that are owner-occupied</i>	77.7%	83.7%
Monthly owner costs less than 30% of income	402,168	1,841
<i>Percent with monthly owner costs <30% of income</i>	76.0%	71.1%
Monthly owner costs 30% of income or more	123,407	661
<i>Percent with owner costs >=30% of income</i>	23.3%	25.5%
Note: Costs are not computed for all housing units so sum of the costs' percent shares may not total 100%.		
Source: U.S. Bureau of the Census, American Community Survey, 2019-2023 Five-year Estimates, Tables B25072 and B25093		

Prepared by Eric Grosso, Bureau of Aging and Disability Resources, January 2025



University of Wisconsin Population Health Institute Model of Health © 2025

Entities Involved in Developing the Plan

Community Health Needs Assessment Collaborative Group Team Members representing the medically underserved, low-income, and minority populations:

CHAIR: Lisa Schnedler, President & CEO, Upland Hills Health, Inc.

Marie Barry, Director of Community Economic Development, Rural WI Health Cooperative

Courtney Messer, Southwestern Wisconsin Community Action Program

Rachel Hartline, MD, Upland Hills Health, Inc.

Rachel LaCasse-Ford, Mt. Horeb Chamber of Commerce Director ??, Dodgeville Library

Jenny Huffman, ADRC Specialist, Aging and Disability Resource Center (ADRC) of Southwest Wisconsin, Iowa County

Debbie Siegenthaler, MS, RN, Director/Health Officer, Iowa County Health Department

Stefanie Sippl, MD, Upland Hills Health, Inc.

Carly Tibbits, RN, BSN, Iowa County Health Department

Leah Walrack, RN, Iowa County Health Department

Upland Hills Health

UHH Wellness Committee currently has 12 employees representing nursing, , therapy, wellness, and employee health. The goal of this group is to create a culture that supports health-promoting knowledge, attitudes, and behaviors in the UHH campus and/or community. The Committee focuses on the employee Health Risk Assessment results to identify top health concerns and priorities. The Committee implements employee and community events to promote wellness.

UHH staff identify, gather, and report UHH Community Benefits each year using CBISA Plus Software. Keeping track of Community Benefits is required by the IRS, but it also helps us with our CHNA. We are able to easily identify programs that are already in place that pertain to our Community Health Implementation Plan goals and continue to track our progress in between each CHNA.

Iowa County Health Department

Representatives from the Iowa County Health Department attended Upland Hills Community Needs Assessment meetings and provided data for committee members to review. The Health Department's primary purpose is to serve all residents of the county. The data provided by the State of Wisconsin through its County Health rankings report. The priorities set for this Community Health Needs Assessment came through these data sources and through discussions among the entities on those areas that the representatives believed that, by working together, a notable difference could be made during the three-year period.

The Aging and Disability Resource Center (ADRC) of Southwest Wisconsin

Representatives from the ADRC attended Upland Hills Community Needs Assessment meetings and provided information for committee members to review. The ADRC serves elderly and adults with disabilities. The ADRC also provides support and assistance to the families and caregivers of the individuals we serve. Criteria eligibility for services includes people age 60 and older, people (age 18 and older) with physical or developmental disabilities, people (age 18 and older) with mental health or substance abuse problems. The ADRC serves four counties in Southwest Wisconsin including Grant, Green, Iowa, and Lafayette County. A local office is located in each of the four

counties. The ADRC is accountable for the implementation of programs for older individuals and adults with disabilities. Their mission and focus is to help keep older adults and those with disabilities independent and safe in their homes through the delivery of services provided by the agency and through making connections to appropriate resources.

Community Members Provided Input

As part of its Strategic Planning process and need for stakeholder input, Upland Hills Health held seven Community Forum meetings in June 2024 in seven communities within the Upland Hills Health service area. The forums were a component of a regularly scheduled meeting of a community group (e.g., Lions Club) and were well attended. The top desired areas of focus noted by residents attending these meetings or submitting surveys were: expand mental/behavioral health services/specialists; offer drug/alcohol rehab services; provide access to more specialty care providers without driving to larger cities; offer health and fitness education, services, facilities; expand chronic disease management; provide long term care options; increase transportation options for medical appointments; develop community education/outreach.

In July of 2022, the CHNA partners developed and conducted a survey of community residents throughout the Upland Hills Health service area. The survey was available electronically at the Upland Hills Health website, the Iowa County Public Health website, as well as distributed through Upland Hills Health social media, and school email listserves in Barneveld, Dodgeville, Highland, Iowa Grant, and Mineral Point school districts. The ADRC provided the survey link to the ADRC Board. SWCAP provided the survey link to clients and staff. Upland Hills Health Clinics provided paper copies to patients. Community members shared their insight and suggestions for improving healthcare services in each of their rural areas. Upland Hills Health sent the survey link to all employees, as well as the Board of Trustees and Foundation Board.

The survey included demographic indicators and these questions:

- What desires do you have regarding your own or your community's health care needs?
- What specialist or health services do you feel Upland Hills Health could offer to better serve our area?
- What would you like to see Upland Hills Health (hospitals and/or clinics) do in the next three (3) years?
- In your opinion, what does Upland Hills Health do well?
- In your opinion, what can Upland Hills Health do to improve?

The top requests from the public were: for increased access to health services, including wellness/fitness, therapy, mental health, alcohol and drug abuse services, extended hours of business, access to transportation, medical specialists, and telemedicine.

Community Forum and Community Survey comments showed an increase in caregiver concerns related to mental health and aging.

NOTE: In 2025, Iowa County Public Health Department confirmed that the above 2022 survey data was still relevant, and the next community survey will be completed in the first half of 2027.











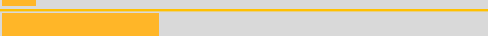
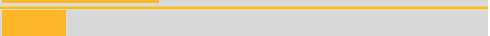
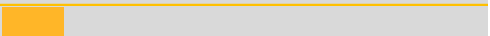

2022 Community Survey Summary (Source: Iowa County)



















Communitih Health Needs Assessment (CHNA) Survey Results		June-July 2022
How would you rate our community as a Healthy Community?		
	Counts	Percentages
Very healthy	8	2%
Healthy	103	32%
Somewhat healthy	180	55%
Unhealthy	32	10%
Very unhealthy	3	1%
How would you rate your own personal health?		
	Counts	Percentages
Very healthy	36	11%
Healthy	151	46%
Somewhat healthy	113	35%
Unhealthy	22	7%
Very unhealthy	3	1%
What are the most important issues in our community?		
	Counts	
Aging concerns	143	
Alcohol misues and abuse	149	
Other drug abuse	129	
Bullying	89	
Cancers	62	
Child abuse/neglect	34	
Dental concerns	28	
Diabetes	29	
Domestic violence	23	
Firearm-related injuries	7	
Heart disease and stroke	29	
High blood pressure	28	
Homicide	2	
Homelessness	12	
Affordable housing/options	111	
Hunger	28	
Infant death	3	
Infectious disease	26	
Access to childcare	122	
Access to healthcare	51	
Lead exposure	0	
Mental health concerns	206	
Motor vehicle crash	7	
Ability to afford living expenses	86	
Obesity	134	
Rape/sexual assault	8	
Respiratory/lung disease	9	
STIs	2	
Radon exposure	8	
Suicide	31	
Teen pregnancy	5	
Tobacco use	24	
Drinking water quality	33	
Senior living	86	
Social isolation/loneliness	56	

The committee decided to focus on areas that would have the greatest impact and that were not addressed by other partners or entities in the area.

The top five requests were:

1. Mental Health – Access to Services: The committee elected to include this in its plan.
2. Alcohol Misuse and Abuse/(other drug abuse): This was not included in our plan as a new service, Wood Violet, announced plans to open an inpatient alcohol/drug treatment service in our service area.
3. Aging Concerns: The committee elected to include this in its plan.
4. Obesity: The committee elected to address this in the CHNA plan through health and fitness opportunities.
5. Affordable Housing: The committee elected not to include this within this CHNA plan as Southwest Wisconsin Community Action Program and the county had separate committees addressing these concerns.

CommunitH Health Needs Assessment (CHNA) Survey Results		June-July 2022
Behaviors that have the greatest impact on our community?	Counts	
Alcohol misues and abuse	179	
Drug use and abuse	166	
Unsafe sex	13	
Dropping out of school	11	
Lack of exercise	163	
Poor eating habits	188	
Not getting vaccinated	56	
Unsecure firearms	13	
Texting/cell use while driving	77	
Tobacco use	37	
Not using seat belts	13	
Routine medical visits	61	
Violence	25	
Self-harm	24	

Community Health Needs Assessment (CHNA) Survey Results		
Health Care Access Questions		
Access to dental, mental, physical health services? n=317		
Always	172	
Often	97	
Sometimes	43	
Rarely	3	
Never	2	
Services which are difficult to access? n=210		
Dental	35	
Mental	149	
Physical	26	
Barriers to accessing dental, mental, and physical health services. n=189		
Cultural/religious beliefs	1	
Don't know how	2	
Don't understand need	5	
Don't feel welcome	10	
Fear	29	
Lack of availability	102	
Language barriers	0	
No insurance	11	
Unable to pay	25	
Transportation	5	

Community Health Needs Assessment (CHNA) Survey Results			
Health Care Access Questions			
Other Barriers Listed			
Lack of response from DHS with child abuse, neglect, parent bullying etc			
mental health stigma			
fatphobia and cost			
Mental health providers only seem available for emergent issues.			
Personal schedule			
Unwilling to admit we need medical care (not fear)			
insurance mandates Dane County providers			
Lack of follow-up by health professionals and lack of clarity in discussing conditions			
Doctors who are still practicing old school ways			
Have to drive to Platteville or Madison for some specialists.			
The overall cost of a health plan and services it pays			
Doctor not focused on aging issues - lack of experience in that area; feeling of lack of personal connection			
Kids have trauma which is not recognized because of stigma			
Timing. Cannot get timely appointments which leads to medication to mask the problem and then addiction.			
Mental health and dental health are not covered by my insurance			
medical care around here seems to only be all about pushing medications, antibiotics and vaccinations.			

Questions Asked to Develop the County Plan on Aging

Every three years, the Aging and Disability Resource Center, or ADRC, located in Iowa County includes the input of older people to develop a County Plan on Aging. This is a mandate of the Older American’s Act to secure funding. This plan also outlines an agenda for developing and strengthening current programs to meet the needs of older people in Iowa County. ADRC’s first step in Community Engagement is surveying the residents of Iowa County. All community members were encouraged to provide feedback as it relates to services their parents, grandparents or elderly and disabled neighbors may need to remain independent and healthy as they age.

Below is the 2024 survey:



Aging Plan Survey

We want to hear from you! Every 3 years, the Aging & Disability Resource Center (ADRC) creates a multi-year plan that helps guide the programs, services and resources that are offered in Iowa County. In 2024, we will be creating our plan for the years 2025-2027.

Our first step in Community Engagement is surveying the residents of Iowa County. If you think this survey isn't for you, consider what services your parents, grandparents or your neighbor may need to remain independent and healthy as they age.

Date: _____ **What county do you reside in?** _____

Do you live alone? (check one) Yes No

Are you a family caregiver? (check one) Yes No

1. Where do you gather information about your county's programs and services?

(check all that apply) Radio Website Facebook Newspaper

Other: _____

2. What Aging & Disability Resource Center (ADRC) services have you received?

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Caregiver Support | <input type="checkbox"/> Dine-in Meals/Home-delivered Meals |
| <input type="checkbox"/> Exercise Classes | <input type="checkbox"/> Help applying for BadgerCare, FoodShare, Social Security (SSI/SSDI) |
| <input type="checkbox"/> Finding Resources | <input type="checkbox"/> Other public benefits |
| <input type="checkbox"/> Fall Prevention Resources | |
| <input type="checkbox"/> Applying for Family Care | |
| <input type="checkbox"/> Medicare Part D Open Enrollment | |

3. Do you have enough support and/or resources to live safely and independently at home?

Yes

No (If no, please explain why)

4. What do you feel are the main challenges for older adults living in your county?
(Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Housing | <input type="checkbox"/> Opportunities to interact with others |
| <input type="checkbox"/> Nutrition/food resources | <input type="checkbox"/> Loneliness |
| <input type="checkbox"/> Finding in-home support | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Caregiver support | <input type="checkbox"/> Staying connected to family/friends |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Financial security |
| <input type="checkbox"/> Physical activity | <input type="checkbox"/> End of life preparedness |
| <input type="checkbox"/> Dementia | |
| <input type="checkbox"/> Other: _____ | |

5. What do you feel are the main challenges for adults living with a disability in this county? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Access to healthcare | <input type="checkbox"/> Physical activity |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Finding in home support |
| <input type="checkbox"/> Nutrition/food resources | <input type="checkbox"/> Financial security |
| <input type="checkbox"/> Mental health | <input type="checkbox"/> Opportunities to interact with others |
| <input type="checkbox"/> Employment/job training | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Staying connected to family/friends | |
| <input type="checkbox"/> Other: _____ | |

6. Are you interested in participating in a one-on-one follow up call to talk about the main issues and challenges older adults and adults with disabilities face in this county? If yes, please provide your contact information.

Name: _____ Phone: _____

Address: _____ Email: _____

7. What additional services and programs would improve the lives of older adults and adults living with a disability in our community?

Thank you for taking the time to complete our survey.

**By May 15, 2024, please return to:
ADRC, 303 W. Chapel Street, Suite 2300 Dodgeville, WI 53533
Or email at adrc@iowacounty.org**



Community Involvement in the Development of the Aging Plan

Community Engagement Report-2024 Survey Results

<p>Your County or Tribe: Iowa County</p>	<p>Date/s of Event or Effort: Feb-May 2024</p>
<p>Target audience(s): Adults</p>	<p>Number of Participants/ Respondents: 113</p>
<p>Describe the method used including partners and outreach done to solicit responses:</p> <p>This year, because we did not have the COVID Vaccine clinics available to distribute surveys, we partnered with AARP. They distributed them to consumers as they waited for their tax appointments. An ADRC incentive was offered if they agreed to complete the survey. The same survey was offered online to Iowa County residents and was printed in the April and May editions of the News & Views. A small number of surveys were completed online or by mail.</p>	
<p>What were the key takeaways/findings from the outreach?</p> <p>Of the 113 surveys completed:</p> <ul style="list-style-type: none"> 49% identified themselves as living alone 82.1% identified themselves as a caregiver 93% identified that they have what they need to live safely and independently in their home <p>This will provide an overview of top answers for the multiple-choice questions:</p> <p>Where do you gather information about your county's programs and services?</p> <ul style="list-style-type: none"> 59.6% Newspaper 23.2% Facebook 23.2% Website <p>The top three services that consumers have received from the ADRC or SUN Programs:</p> <ul style="list-style-type: none"> Dine in or Home Delivered Meals Help applying for Medicaid Help finding resources <p>The top three challenges for older adults living in Iowa County:</p> <ul style="list-style-type: none"> Transportation Finding in-home support Nutrition/food resources <p>The top three challenges for adults with disabilities living in Iowa County:</p> <ul style="list-style-type: none"> Mental health Transportation Housing 	