

La Crosse County Health Department

STRATEGIC PLAN

2018-2020



Healthy People in a Healthful Community.



Collaborate
Advocate
Lead
Serve
Communicate



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Acknowledgements

Thank you to everyone who assisted in updating the La Crosse County Health Department Strategic Plan including community partners and employees who completed the survey. A special thank you to the Strategic Plan Updating Committee whose engagement, passion, and commitment to the Health Department and our community is inspiring. Your insights will help the Health Department to prioritize our efforts in meaningful ways to improve health throughout La Crosse County.

Members of the Strategic Plan Updating Committee

La Crosse County Community Stakeholders:

- **Dr. Robyn Borge** – Health Department Medical Advisor and Gundersen Health System
- **Sandy Brekke** – Gundersen Health System and St. Clare Health Mission
- **Dr. Gary Gilmore** – University of Wisconsin-La Crosse
- **Tina Tryggestad** – Health & Human Services Committee Member

La Crosse County Health Department Representatives:

- **Rebecca Lakowske** – Health Education
- **Joe Larson** – Public Health Nursing
- **Jennifer Loging** – Nutrition
- **Jennifer Mullin** – Fiscal
- **Diane Panzer** – Administration
- **Jen Rombalski** -- Administration
- **Doug Schaefer** – Environmental Health

Student Support:

Heather Schmidtknecht -- Minnesota State University Mankato, DNP Student



Message from the Director



I am very proud to present the La Crosse County Health Department’s Strategic Plan to our community partners and residents.

The purpose of our strategic plan is to set the department’s direction for the next 3 years including goals and plans to attain our goals. The strategic planning process occurred over a 9 month period and allowed us the opportunity to step back from day-to-day work, assess data as well as both external and internal environments, and hear from our community partners.

The Health Department has many strengths. The most important ones are our employees and our relationships with community partners. Our strategic plan priority areas align with these strengths and move us toward more intentionality in both supporting staff, evaluating current programs and critically identifying new opportunities, and partnering to improve the community’s health.

As the Strategic Plan Updating Committee (SPC) discussed our future direction, prevention was fully recognized as a foundation for all that we do. Building upon this foundation, our nationally accredited health department strives for maximum quality and effectiveness. The SPC acknowledged an interest in embracing principles associated with high achieving governmental public health. Known as Chief Health Strategist, these principles include using real-time data to be an accurate resource in our community and showing flexibility to tackle evolving issues around health promotion, disease and injury prevention.

While we recognize that there will be challenges, we are prepared to address these while continuing to prioritize for the health and wellness of our community.

Here’s to the next three years!

Gratefully Yours,

A handwritten signature in black ink that reads "Jen Rombalski". The signature is fluid and cursive.

Jen Rombalski, MPH, RN

Director, La Crosse County Health Department

Introduction

The La Crosse County Health Department (LCHD) Strategic Plan for 2018-2020 will guide our department’s strategic direction and priorities over the coming three years. It highlights key areas where our department seeks to make significant improvements in order to have maximum positive impact on the health and well-being of La Crosse County residents. The plan not only sets forth what we will strive to achieve—it provides a road map for how we plan to achieve it.

Our department works to protect and benefit the public’s health in countless ways that range from restaurant inspections to disease investigation. Prevention has been, and will continue to be the cornerstone of public health. Our scope has been and will remain broad. This plan does not offer a comprehensive listing of all of the essential activities that are routinely conducted. Rather, it highlights key areas where we plan to effect meaningful change in the coming three years, and identifies four strategic priority areas that organize these directed efforts.

This plan was prepared following the framework outlined in the National Association of County and City Health Officials (NACCHO) Developing a Local Health Department Plan: A How-To Guide. A Strategic Plan Updating Committee (SPC) was formed to include employees from various divisions within our department, Health & Human Services board representation and community partners. A Strengths, Challenges, Opportunities and Threats (SCOT) analysis was conducted. Input was collected and analyzed from employees and the community, and a review of our current Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) was completed. With this information, the SPC focused on the key components of the plan: value statements, vision statement, mission statement and strategic priorities.

The Health Department has a history of strong partnerships and employees are respected and valued in the community. Building on these strengths is key to our success. Building a marketing/branding strategy is crucial to increase the visibility of our department’s work. Positioning ourselves as a source of accurate information was identified as a key element to build upon. Evaluating new and existing programs, collaborating with traditional and non-traditional partners, investing in our employees and working to become a leader in communicating important health information are a few of the strategies.



Mission, Vision and Value Statements

Mission Statement

Working collaboratively as a trusted leader and partner, preventing illness and injury, promoting health and well-being to protect and improve our community where we live, work, learn, and play.

Vision Statement

Healthy people in a healthful community.



Value Statements

Collaborate by leading, assisting, and guiding community partnerships.

Advocate for equity through innovative public health policy and community engagement.

Lead our community in building a culture of prevention and health.

Serve our community using evidence to provide resources and services.

Communicate timely, accurate, and relevant information with our community.

Summary of SCOT Analysis

The Strategic Plan Updating Committee (SPC) surveyed the employees of La Crosse County Health Department (LCHD) as well as multiple community partners in fall 2017. A summary of the surveys, as well as the responses received, are available in Appendix C and D of this document. The survey responses included a Strengths, Challenges, Opportunities and Threats (SCOT) Analysis; all responses collectively provided the foundation of the Strategic Plan for 2018-2020.

Strengths

The strengths of LCHD are many. Among employees and community partners alike, LCHD employees were recognized as the department's greatest strength. Employee responses reported coworkers whom are passionate about the work they do and are willing to go the extra mile for members of the community in need of their services. Community partners endorsed the expertise that LCHD employees bring to the table, highlighting their knowledge, dedication, and longevity. Additional reported strengths were the national public health accreditation of LCHD, the focused leadership that is being modeled throughout LCHD, the solid support of the Health and Human Services Committee, and the quality of the relationships between LCHD and community stakeholders.

Challenges

The challenges reported primarily centered around increasing complex public health needs, without proportionate funding increases to work to meet those needs. In addition, employees reported feeling as if communication could improve both internally and externally, to allow for a better understanding of the work of the LCHD as a whole. Community partners presented that mounting needs should be strategically addressed by reaching out to non-traditional partners and prioritizing efforts in a way that is evidence-based, clearly communicated, and transparent.

Opportunities

The opportunities brought forth by LCHD employees focused on ensuring that the community is aware of what LCHD can offer, suggesting that updating the LCHD website as well as establishing and maintaining a social media presence for LCHD may be key strategies. Community partner responses focused primarily on maintaining and expanding collaborations with others in the community, highlighting that there are many community players who are dedicated to improving health.

Threats

The threats presented by survey respondents again heavily focused on the uncertainty related to funding. Concerns were expressed that there are not monies available to fund the work of the LCHD that is so desperately needed to adequately address public health priorities. Employees conveyed fear that the policymakers and the public, as a whole, do not realize or appreciate the value of prevention. Community partners concurred, offering that often the focus is on providing services for acute needs rather than stepping back and looking at the bigger role that prevention should play in the health of La Crosse County.

Strategic Priorities, Goals and Objectives

With the voices of representative community partners and La Crosse County Health Department (LCHD) employees heard, the Strategic Planning Updating Committee (SPC) felt that four themes emerged from the data:

1. The value of LCHD employees' knowledge, dedication, and expertise;
2. The importance of building intentional relationships internally and externally;
3. The importance of ensuring LCHD has the right people working on the right projects;
4. The importance of improving the visibility and transparency of LCHD.

With these themes in mind, the SPC deliberated on how to move forward in creating a Strategic Plan that would work to improve the focus of LCHD and compound the impact of its work on the health of La Crosse County. In doing so, the SPC felt it was important to devise a plan that was accountable to the following questions:

- Does the plan promote the value of prevention?
- Does the plan commit to evidence-based practice?
- Does the plan insist on the need for health-related awareness?
- Does the plan endorse the value of LCHD employees?
- Does the plan convey the importance of building intentional relationships?
- Does the plan direct the need to program/staff with intention?
- Does the plan work to improve visibility/transparency of LCHD?

In our deliberations, it was important to the SPC that the new Strategic Plan inspire and direct *real* change; therefore, our process was driven by Results-Based Accountability (RBA). This is a way of thinking and planning that is more likely to result in a solid plan with meaningful *action*.

The SPC started by identifying the desired results and using data from various sources to develop a baseline and a forecast. We then investigated and discussed key factors that influenced the baseline, and then developed a plan to impact the baseline in a positive way, or "turn the curve". The new Strategic Plan is rooted in key partnerships with LCHD employees and La Crosse County community partners and residents; LCHD cannot do this important work single-handedly. Collaboration has been and will continue to be important to the health of La Crosse County.

Priority #1: Invest in LCHD Employees

Strategy: Ensure a work environment where employees feel supported and valued.				
Result: Develop and implement activities and interventions to both recognize and appreciate as well as support training and skill development of employees.				
Performance Measure 1 A: By December 31, 2020, Employee Feedback Survey data will reflect that 88% of employees feel they receive recognition and/or appreciation for a job well done. <i>(Baseline: 78% Dept, Target: 88%)</i>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measure Indicator
Create a team led by employees with facilitation (reference: LEAD360 - Harris County, TX).	Staff, Managers, Director	Jan. 2018 - Mar. 2018	Employee Leadership Team (LEAD 360) created, facilitator secured, and first meeting held.	LCHD is using survey data to recognize employees in a way that is meaningful to them.
Survey employees to determine what they would like to be recognized for and how they would like to be recognized.	LEAD 360 Team	Apr. 2018 - May 2018	Employee Feedback Survey revised to include employee recognition and appreciation.	
		June 2018	Employee Feedback Survey administered.	
Communicate expectations and possibilities for use of Employee Feedback Survey data to Division Managers/Director.	LEAD 360 Team	July 2018 – Nov. 2018	Review results of Employee Feedback Survey and develop recommendations for department improvements.	
		Dec. 2018	Meeting conducted with Managers and Director to share survey results and recommendations.	
Implement changes in department.	LEAD 360 Team, Employee Recognition Team	Jan. 2019 - Dec. 2020	Recommendations are being implemented.	
Performance Measure 1 B: By December 31, 2020, Employee Feedback Survey data will reflect that 97% of employees feel that training and skill development is effective. <i>(Baseline: 87% Dept, Target: 97%)</i>				
Performance Measure 1 C: By December 31, 2020, Employee Feedback Survey data will reflect that 75% of employees feel they have the opportunity to fully participate in LCHD committees, workgroups, etc. if they so desire. <i>(Baseline: unknown, Target: 75% Dept)</i>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measure Indicator
Survey employees to determine training wants/needs and to	LEAD 360 Team	Jan. 2019- Feb. 2019	Employee Feedback Survey revised to include employee training	LCHD is using survey data to offer trainings

learn about barriers to their full participation in LCHD committees, workgroups, etc.			wants/needs, as well as barriers to their full participation in LCHD committees, workgroups, etc.	and schedule committee meetings in a way that meets employee needs.
		Mar. 2019	Employee Feedback Survey administered.	
Communicate expectations and possibilities for use of Employee Feedback survey data to Division Managers/Director.	LEAD 360 Team	Apr. 2019 – Aug. 2019	Review results of Employee Feedback Survey and develop recommendations for department improvements.	
Implement changes in department.	LEAD 360 Team, Managers, Director	Sep. 2019 - Dec. 2020	Recommendations are being implemented and incorporated into the Workforce Development Plan.	

Priority #2: Build Intentional Relationships

Strategy: Build intentional relationships to support and enhance the work of LCHD.				
Result: Develop and strengthen relationships within the LCHD, relationships with other departments, and relationships with community partners.				
Performance Measure 2 A: By December 31, 2020, Employee Feedback Survey data will reflect that 85% of employees feel that information sharing and communication within LCHD is effective. <i>(Baseline: 67%, Target: 85%)</i>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measure Indicator
Create an internal communications team.	Staff, Division Managers, Director	Jan. 2018-Feb. 2018	Communications Committee formed and first meeting held.	Intranet application is being used to facilitate timely communication to/from/between LCHD employees.
Explore intranet applications that allow for communication within LCHD.	Communications Committee	Mar. 2018-Apr. 2018	Research models, determine 1-2 potentials, share with employees and gather feedback.	
	Communications Committee	May 2018	Recommendation presented to the Director.	
	Communications Committee	June 2018-July 2018	Teach LCHD employees how to use intranet application.	
Identify means for employees to contribute ideas easily.	Communications Committee	Aug. 2018-Sep. 2018	Establish and promote the use of a “parking lot” for employees to contribute ideas.	
Performance Measure 2 B: By December 31, 2020, Employee Feedback Survey data will reflect that 85% of employees feel that information sharing and communication between departments and with the community is improving. <i>(Baseline: unknown, Target: 85%)</i>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measure Indicator
Identify key partnerships that need to be established or strengthened (e.g. La Crosse County Human Services).	Staff, Division Managers, Director	Mar. 2018-Dec. 2020	Identify and implement strategies to create or strengthen key partnerships.	LCHD is making intentional efforts to establish and/or strengthen key partnerships within La Crosse County.

Priority #3: Program/Staff with Intention

<p>Strategy: Create a process to evaluate existing/proposed programs, as well as incoming funding.</p>				
<p>Result: Develop and implement checklists to ensure that existing and proposed programs are in alignment with department priorities (strategic plan, CHA, and/or CHIP).</p>				
<p>Performance Measure 3 A: By December 31, 2020, all non-mandated programs will be evaluated for alignment with department priorities. <i>(Baseline: 0, Target: 100%)</i></p>				
<p>Performance Measure 3 B: By December 31, 2020, five existing programs will be prioritized for evaluation of need, efficacy, evidence base, appropriateness of staffing and alignment with department priorities. <i>(Baseline: 0, Target: 5 programs)</i></p>				
<p>Performance Measure 3 C: By December 31, 2020, 100% of incoming funding for proposed programs will be evaluated to document need and alignment with department priorities (strategic plan, CHA, and/or CHIP). <i>(Baseline: unknown, Target: 100%)</i></p>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measure Indicator
Evaluate all non-mandated programs to ensure they align with department priorities.	Staff, Division Managers, Director	Jan. 2018- May 2018	Compile and revise existing forms to create a comprehensive tool or checklist for program evaluation.	LCHD is using evaluation data to determine if programs should continue as is, be revised, or be discontinued.
		June 2018- Aug. 2018	Existing programs prioritized for evaluation with rationale.	
Evaluate 5 programs for evaluation of documented needs, efficacy (cost benefit analysis), evidence base, and appropriateness of staffing.	Internal Data/Evaluation Team	Sept.2018- Nov. 2018	#1 priority program evaluated.	
		Dec. 2018	#1 priority program evaluation data reviewed by Director.	
		Jan.2019- Mar. 2019	#2 priority program evaluated.	
		Apr. 2019	#2 priority program evaluation data reviewed by Director.	
		Mar. 2019- July 2019	#3 priority program evaluated.	
		Aug. 2019	#3 priority program evaluation data reviewed by Director.	

		Sept. 2019- Nov. 2019	#4 priority program evaluated.	
		Dec. 2019	#4 priority program evaluation data reviewed by Director.	
		Jan. 2020- Mar. 2020	#5 priority program evaluated.	
		Apr. 2020	#5 priority program evaluation data reviewed by Director.	
Evaluate incoming funding for proposed programs to ensure they meet documented needs, are not duplication of services, and are in alignment with LCHD priorities.	Staff, Division Managers, Director	Jan. 2018- Mar. 2018	Evaluation tool for proposed programs developed or revised.	LCHD is evaluating all incoming funding for proposed programs prior to commencement to assure alignment, need, and fit.
		April 2018- Dec. 2020	Incoming funding for proposed programs evaluated and evaluation data reviewed by the Director.	

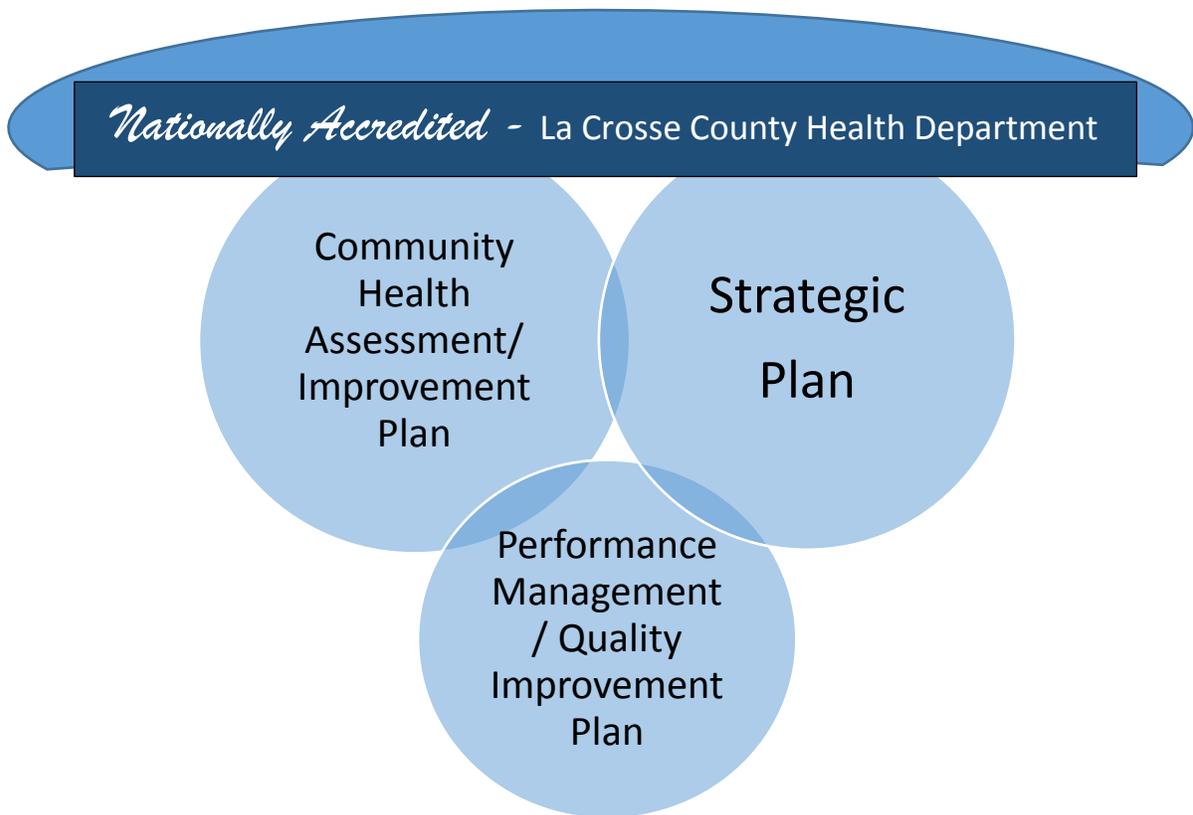
Priority #4: Improve Visibility and Transparency

Strategy: Make intentional efforts to improve visibility and transparency of LCHD.				
Result: Develop and implement measures to increase visibility and transparency of LCHD in all of La Crosse County.				
Performance Measurement 4 A: By December 2020, LCHD will develop a plan for marketing and branding. <i>(Baseline: no marketing plan, Target: marketing plan developed and implementation in process)</i>				
Programs Activities Interventions	Person/Group Responsible	Timeline	Process Indicator	Performance Measurement Indicator
Create a team for marketing.	Staff, Division Managers, Director	Jan. 2019- Mar. 2019	Marketing team formed.	Marketing Plan developed & implemented to include website (with dashboard), popular media and social media presence.
Develop and implement a marketing plan.	Marketing Team	Apr. 2019- Aug. 2019	Meet with consultant for guidance on plan development and implementation.	
		Sep. 2019- Dec. 2020	Develop the implementation plan.	
		Jan 2020- Dec 2020	Prioritize and implement plan activities.	

Linkages with the CHIP and PM/QI Plan

The La Crosse County Health Department Strategic Plan is linked with the La Crosse County Community Health Improvement Plan (CHIP) and Performance Management/Quality Improvement (PM/QI) Plans. The priorities within the 2018-2020 Strategic Plan drive assessment, evaluation and initiation of activities that address the top health priorities for county residents including mental health and stigma, substance use disorders, and social determinants of health.

As a nationally accredited health department by the National Public Health Accreditation Board, La Crosse County Health Department strives to achieve the highest quality plans and outcomes in accordance with accreditation requirements, which include the ten essential health services of assessment, investigation, informing/educating, community engagement, policies and plans, public health laws, access to care, quality workforce, quality improvement, evidence-based practice in addition to administration and governance.



Appendices

Appendix A: Glossary of Acronyms and Terms

CDC: Centers for Disease Control and Prevention

CHA: Community Health Assessment – Data collected to provide a general overview of the health of a community.

CHIP: Community Health Improvement Plan – A collaborative effort to address health problems, with the ultimate goal of improving the overall health of the community.

CHS: Chief Health Strategist

LCHD: La Crosse County Health Department

NACCHO: National Association of County and City Health Officials

PM: Performance Management

SPC: Strategic Plan Updating Committee

QI: Quality Improvement

WALHDAB: Wisconsin Association of Local Health Departments and Boards

Appendix B: Questionnaires

Community Partner Survey

- **65 community partners across multiple community sectors (ie-media, education, healthcare, etc) completed via Survey Monkey between 08/10/17 and 08/25/17**
- **Questions related to:**
 - Strengths, challenges, opportunities, and threats
 - How LCHD could best partner or work with them
 - What LCHD could do better
 - Ideas about how to increase visibility of LCHD in community
 - Rated LCHD on effectiveness, value, and influence in community change
 - Rated eight values (concepts selected for value statements) to describe LCHD
 - Rated LCHD on seven key practices of Chief Health Strategist
 - Any additional comments about the work of LCHD

LCHD Employee Survey

- **45 employees completed via Survey Monkey between 08/10/17 and 09/05/17**
- **Questions related to:**
 - Strengths, challenges, opportunities, and threats
 - What LCHD should start, continue, stop, and do better
 - Ideas about how to increase visibility of LCHD in community
 - Rated LCHD on effectiveness, value, and influence in community change
 - Rated eight values (concepts selected for value statements) to describe LCHD
 - Rated understanding of how proposed mission statement relates to daily work
 - Rated understanding of how proposed vision statement relates to daily work
 - Rated LCHD on seven key practices of Chief Health Strategist
 - Any additional comments about the work of LCHD

Appendix C: Qualitative Data

LCHD Employee and Community Partner Survey Response Themes

Survey Focus Area	Community Partner Themes	LCHD Employee Themes
How can LCHD best partner with you?	<ul style="list-style-type: none"> • Continue good communication • Provide accurate health info in a format that is ready to disburse to community members we work with • Share planning/work/credit • Be transparent about work being done & funding available 	<ul style="list-style-type: none"> • N/A
What should LCHD start doing?	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • Collaborate more with other divisions in LCHD and other departments in the building • Promote LCHD; become a “face” in the community • Establish social media presence • Attend/participate in more community events • Improve data collection to drive work of LCHD
What should LCHD continue doing?	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • Staff surveys • Excellent service, teamwork, quality improvement • Work to keep good employees
What should LCHD stop doing?	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • Programs driven by funding instead of need • Duplication of services
What could LCHD do better?	<ul style="list-style-type: none"> • Engagement/visibility • Communication/sharing • Work more strategically with others • Ensure current programs are needed and effective 	<ul style="list-style-type: none"> • New employee training • Email/phone communication standards • Increase online presence • Outreach to smaller communities • Program evaluation/data collection • Increase reporting of LCHD accomplishments/progress • Work to understand other divisions within LCHD and other departments within building

Appendix D: Committee Meeting Agendas/Minutes

April 25, 2017 – Strategic Plan Updating Committee (SPC) Meeting #1

- NACCHO guide module I: reviewed health department accreditation requirements and current strategic plan. Also provided overview of Chief Health Strategist principles.
- NACCHO guide module II: identified stakeholders to engage, available data to be reviewed and process/timeline for updating the new plan

May 18-22, 2017 – Meetings with SPC Additions (Medical Advisor and 2 Community Stakeholders)

- Same as April 25, 2017 meeting

May 30, 2017 – SPC Meeting #2

- NACCHO guide module III: Overview and brainstorming around mission, vision, and values in preparation for surveying employees and community partners.
- NACCHO guide module IV: shared data from 2016 annual report, Community Health Assessment (2016-2017), Community Health Improvement Plan (2017-2021), Customer Survey (2017), Employee Feedback Assessment (2017), Public Health Workforce Competency Assessment (2017), and Performance Management Plan 2016. Also received policy and legislative update.

[Surveys of employees and community partners conducted 8/10/17 – 9/5/17]

September 19, 2017 – SPC Meeting #3

- NACCHO guide module V: Reviewed employee and community partner surveys results and identified potential goals.

October 19, 2017 – SPC Meeting #4

- NACCHO guide module V: Identified cross-cutting themes.
- NACCHO guide module VI: Identified strategies within each theme (priority areas).

November 1, 2017 – SPC Meeting #5

- Finalized values, mission, and vision statements
- Continued discussion on strategies with each priority area.

November 14, 2017 – SPC Meeting #6

- Final discussion on strategies to inform goals and objectives.

Appendix E: References

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