



Lakeview Medical Center Inc. of Rice Lake d/b/a MMC-Rice Lake

# 2026-2028 Community Health Needs Assessment



Marshfield Clinic Health System

20124-002-

Dear Community Member,

We know that health is driven by more than what happens in the doctor's office. Emphasis needs to be on addressing health choices before medical needs arise through programs, services, public policy or other means wherever and whenever possible. Marshfield Clinic Health System's (MCHS) mission is to enrich lives and create healthy communities through accessible, affordable, compassionate health care, and that include your community. MCHS lives up to our mission and serves the community by conducting a Community Health Needs Assessment every 3 years and utilizing the data to inform our practices.

The 2026-2028 Community Health Needs Assessment (CHNA) process would not have been possible without several community partners who provided their time, knowledge, skills, and expertise. The process included key stakeholder meetings, surveys, community conversations, and a variety of primary and secondary data sources.

Through these collaborative efforts, the top health priorities have been identified through the 2026-2028 Community Health Needs Assessment process. MCHS will continue to support additional community health needs as they arise. The top health priorities for Lakeview Medical Center, Inc. of Rice Lake d/b/a Marshfield Medical Center-Rice Lake (hereafter referred to as MMC-Rice Lake) are:

- Substance Use
- Behavioral Health
- Community Capacity, Engagement, and Infrastructure
- Health Equity

This document summarizes key findings and reflects a point a time. Electronic versions and companion documents can be found at: <https://marshfieldclinic.org/about-us/community-health-needs-assessment-reports> The MCHS Hospital Board, Inc., authorized governing body, has adopted this needs assessment by December 31st, 2025.

We hope you find this document useful and welcome your comments and suggestions for improving the health of Barron County's citizens.

Yours in health,

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## Introduction

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Community Health Assessment (CHA) and Community Health Needs Assessment (CHNA) refer to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis. These assessments are conducted to identify the community's health needs, prioritize top health concerns, and encourage community members to improve their community's health. Health Departments are required to conduct a CHA at least every five years [1].

Non-profit (tax-exempt) hospitals are required by the Affordable Care Act to conduct a CHNA once every three years. Hospitals can choose to partner with local health departments and other local non-profit hospitals or agencies to conduct a CHA/CHNA [2].

MMC-Rice Lake partnered with Barron County Health Department, Cumberland Healthcare, Mayo Clinic Health System, Northlakes Community Clinic and other community agencies and individuals to carry out the CHNA process. A full list of those involved in the process can be found at Appendix B. This publication describes the process used to assess the health of the community, the results of that process, and prioritization of the health needs that will be addressed by MMC-Rice Lake. MMC-Rice Lake looks forward to collaborating with community partners to improve the health of the community.

If you would like to serve on a coalition that helps meet the aims of this report, or have a comment on this assessment, please contact the Marshfield Clinic Health System Center for Community Health Advancement at [communityhealth@marshfieldclinic.org](mailto:communityhealth@marshfieldclinic.org) or (715) 221-8400.

## Health System Overview

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Marshfield Clinic was founded in 1916 by six physicians practicing in Marshfield, a central city in rural Wisconsin. At its inception, Clinic founders saw research and education as critical to their practice of health care and that remains so today.

The Clinic became a 501(c)(3) nonprofit organization in 1992 and in 2014, Marshfield Clinic Health System, Inc., was formed. The Health System's mission is to enrich lives and create healthy communities through accessible, affordable, compassionate health care. The Health System believes individuals have the right to their highest potential level of health and well-being. We will achieve this by advancing health equity<sup>1</sup> with our patients, health plan members, employees and communities.

The Health System serves Wisconsin and Michigan's Upper Peninsula with more than 1,600 providers comprising 170 specialties, health plan, and research and education programs. Primary operations include more than 60 Marshfield Clinic locations, 11

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<sup>1</sup> See Appendix A for definition

hospitals, Marshfield Children's Hospital, Marshfield Clinic Research Institute, Security Health Plan and Marshfield Clinic Health System Foundation [3].

Unique to Marshfield Clinic Health System is its investment in the Center for Community Health Advancement (CCHA). CCHA is a department within MCHS that builds bridges between the Health System and the communities it serves. CCHA coordinates collaborative efforts between MCHS hospitals and local coalitions, businesses, educational systems, law enforcement agencies, Tribal Nations, local governments, and other entities to improve community health. This collaboration helps align local health improvement efforts of the community and hospital to the community health priorities<sup>2</sup> identified in the CHNA.

## **Hospital Overview**

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MMC-Rice Lake is a 40-bed full-service hospital in Rice Lake, Wisconsin. MMC-Rice Lake offers a variety of advance care services including:

- 24/7 Emergency Department
- Adult and Pediatric Primary Care
- Critical Care Transport
- Imaging and Lab Services
- Pharmacy
- Surgical Services and more [4]

Lakeview Medical Center, a nonprofit hospital serving Barron County became a Marshfield Clinic Health System entity in 2008 [5]. In 2018, Lakeview Medical Center and Marshfield Clinic Rice Lake Center were renamed to Marshfield Medical Center-Rice Lake. Both the hospital and clinic were part of the Marshfield Clinic Health System, and the name change was reflective of integrating to one system of care [6].

MMC-Rice Lake employs over 750 people, has performed over 4,700 surgeries, hosts many volunteers and is involved in community events such as National Night Out and the Barron County Fair.

## **Our Community**

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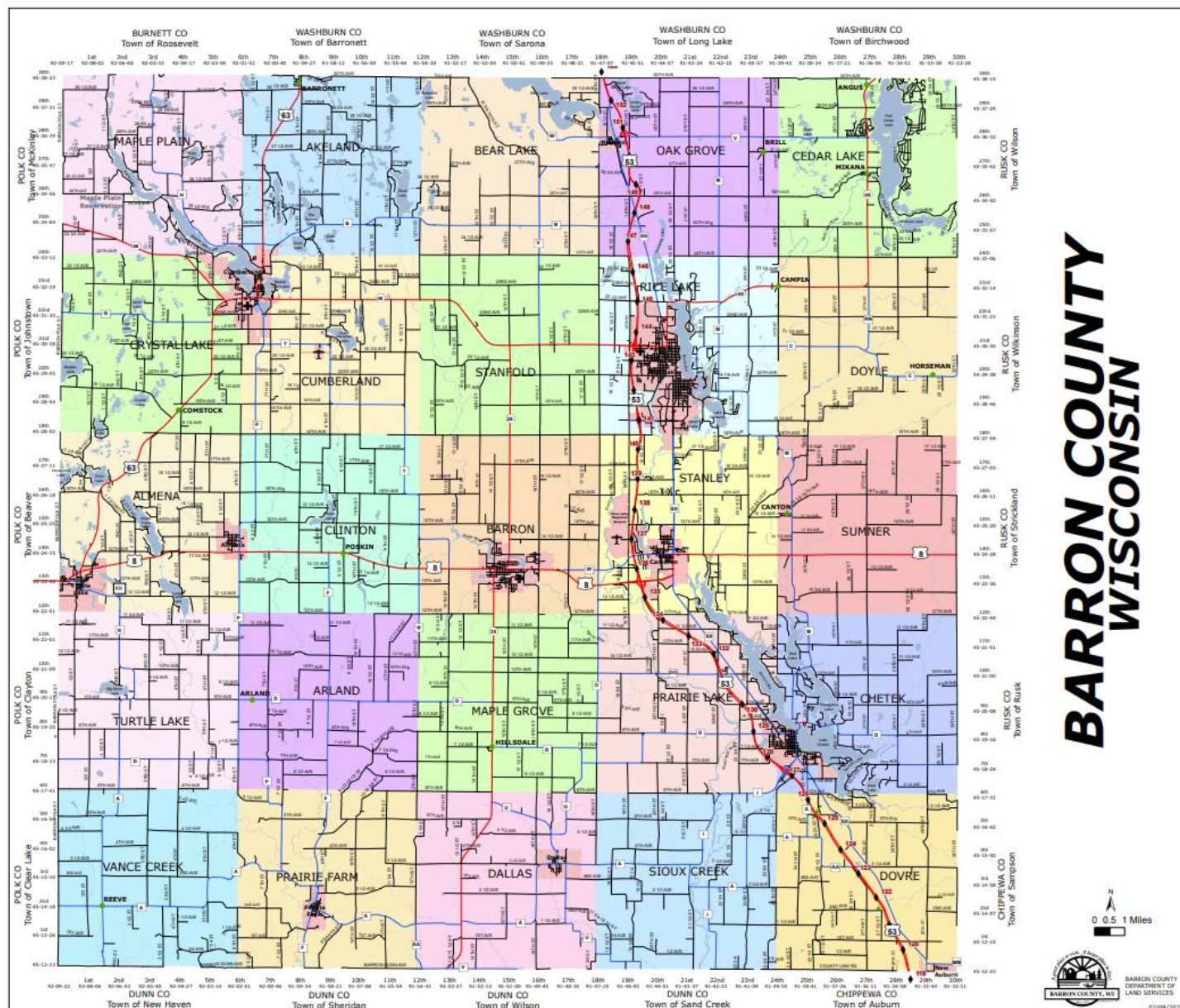
Marshfield Clinic Health System partnered with the Wisconsin Institute for Public Policy and Service (WIPPS) to develop a snapshot of demographic data of the Barron County community. Barron County, Wisconsin has 863 square miles of land area and is the 24th largest of Wisconsin's 72 counties by total land area [7], [8]. Barron County is located in northwest central Wisconsin and is bordered by Burnett, Washburn, St. Croix, Rusk, Chippewa, Dunn, Sawyer, and Polk Counties (see map). The county seat is located in Barron, Wisconsin; the county's other cities include Chetek, Cumberland, and Rice Lake, with Rice Lake being the county's largest population center [9], [10]. The county is also

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<sup>2</sup> See Appendix A for definition



comprised of the villages of Almena, Cameron, Dallas, Haugen, New Auburn, Prairie Farm, and Turtle Lake) and 25 townships [11].



Barron County is the 30th most populous county in Wisconsin with 46,833 residents [12]. Barron County's population grew slightly from 2020 to 2022 at a rate of 0.5%, which is slower than the state's growth rate of 0.9%. Still, this ranked Barron County within the top half of Wisconsin's counties for growth during this time period [10].

Barron County is more rural than Wisconsin overall, with 78% living in rural area (33% of Wisconsinites live in a rural area and 20% of U.S. residents live in a rural area) [8].

Industries in Barron County that account for the most employment include Manufacturing; Education and Health Services; and Trade, Transportation and Utilities. Leisure and Hospitality is also a large employment sector [10]. Top employers include Jennie-O Turkey Store, Rice Lake Weighing Systems, St. Croix Casino, Superior Silica Sands, Mayo Health Systems, and Marshfield Medical Center- Rice Lake [13].

Barron County has numerous recreational opportunities, including campgrounds; ATV routes; mountain biking trails and bicycle routes; river access points; parks; shooting ranges; walking/hiking paths, horseback riding, cross country skiing, and snowmobile trails [14], [15]. When asked to identify community strengths, “access to community parks and recreation areas (green spaces)” was the most frequently selected response by participants in Barron County’s 2024 Community Health Assessment Survey [16].

Cultural opportunities include the Chetek Area Museum, Turtle Lake Museum, and Pioneer Village, and theaters such as Northern Star Theater Company and the Red Barn Theater. Barron County also offers several golf courses, as well mini-golf, indoor golf, movie theaters, and bowling [14].

Barron County is home to higher education opportunities of UW-Eau Claire – Barron County, as well as Northwood Technical College; both have campuses in Rice Lake [13]. Barron County is also a UW-Extension location.

Across Barron County there are a variety of community-based resources, facilities, and organizations that provide fitness opportunities, social services, and/or access to civic, social, and cultural engagement. Examples of these include the Barron Area Community Center, a facility that offers a fitness center, pool, walking/running track, and performance theater; the Boys and Girls Club of Barron County; the Rice Lake Aquatics and Recreation Center; the Rice Lake Community Health Foundation; the Salvation Army – Barron County; Benjamin’s House Emergency Shelter; the Rice Lake Area Free Clinic; and the United Way of Rice Lake. The Rice Lake Chamber of Commerce, for example, also provides an extensive list of community civic and service organizations that provide opportunities for residents to connect with other community members (see <https://ricelakechamber.org/civic-and-service-organization>).

Within the county, public transportation services are limited, with Namekagon Transit providing “door stop bus service” with a varying daily schedule Monday through Thursdays.

## **Health Disparities**

Health Disparities are defined as a higher burden of illness, injury, disability, or mortality experienced by one group relative to another that is closely linked with economic, social, or environmental disadvantage.

“Health disparities adversely affect groups of people who have systematically experienced great social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.” [17]

Demographic data provides information on specific populations that can help to understand the health disparities experienced by those who live in Barron County.

## **Demographics**

Demographic data, such as age, race, sex, gender and socio-economic status, can provide more information beyond the size or growth of a population. This type of data gives insight on unique qualities and differences in communities. Demographic data provides a basis for understanding a community and allows for tracking changes over time to understand what strategies or policies are affecting a community, positively or negatively [18].

## **Rural**

There are many unique needs and challenges of those living in rural areas. Living in a rural area can result in disadvantages to accessing healthcare, employment and economic opportunities, education opportunities and quality, and many other factors that affect health. There are multiple ways to define 'rural'. This report uses the Wisconsin Office of Rural Health's (WORH) designations to determine whether a county is considered rural or not. The WORH considers:

- "Index of Relative Rurality" which accounts for counties' population size and density, the extent of their urbanized areas, and the distance to the nearest metro area.
- Rural-Urban continuum codes
- Rural population by census tract
- Rural-Urban Commuting Areas [19]

Based on the WORH designations, Barron County is defined as a rural county with 54.1 people per square mile [7]. To see a map of rural and urban counties in Wisconsin according to WORH please see appendix E.

## **Age**

Age is an important demographic to consider when looking at a community's health priorities because health needs differ over a lifespan. Strategies and interventions to address the health of the community will look different depending on the age of the intended population. The median age of Barron County residents is 44.8, which is older than the statewide median age of 40.5 [21]. Based on 2024 County Health Rankings<sup>3</sup> data, 23.7% of Barron County residents are over the age of 65, which is higher than the state rate of 18.7% and higher than the national rate of 17.3% [8]. The National Institute on Aging has noted that societal aging can affect economic growth, patterns of work and retirement, family dynamics, the ability of governments and communities to provide adequate resources for older adults, and the prevalence of chronic disease and disability [22]. When Barron County residents were asked in the 2024 Community Health Assessment survey to rank social and economic factors of most concern, "aging-

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<sup>3</sup> See Appendix A for definition



related concerns” and “family issues (absent parents, parenting, aging relatives) were identified among the top 5 most frequent concerns (17% and 13%, respectively) [16].

### **Socioeconomic Status (SES)**

Socioeconomic status is a concept used to describe people based on factors such as their education, income, living conditions, resources, and access to opportunities. "People with lower socioeconomic status usually have less access to financial, educational, social, and health resources than those who have a higher socioeconomic status. As a result, they are more likely to be in poor health and have chronic health conditions and disabilities." [23]

Barron County’s median household income of \$62,300 is about 12% below the statewide median income of \$67,200 and 17% below the national median income of \$74,800. About 13% of residents live in poverty compared to 11% statewide and 12% nationally. About 15% of children live in poverty, comparable to statewide (13%) and national (16%) estimates [8]. Approximately 30% of Barron County households met ALICE<sup>4</sup> criteria compared to 24% statewide. ALICE is defined as Asset Limited, Income Constrained, Employed, or households that earn more than the federal poverty level, but less than the basic cost of living in the county [24].

When Barron County residents were asked in the 2024 Community Health Assessment Survey to choose physical environment factors of most concern to them, “lack of safe and affordable housing” was identified as the most frequent concern (24%) [16]. Based on the County Health Rankings, 12% of households in Barron County met the criteria for a “severe housing problem,” defined as meeting at least one of the following: over-crowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities. One in 10 Barron County households have a “severe housing cost burden” (10%), defined as spending more than 50% of their household income on housing. This is similar to the statewide estimate of 11% while the national estimate is 14% [8].

About 43% of Barron County children enrolled in public schools are eligible for free or reduced-price lunch. This is higher than the state-wide estimate of 39%, but lower than the national estimate of 51% [8].

### **Racial/ethnic minorities**

Race is a concept of classifying people into groups based on physical characteristics such as skin color. Ethnicity classifies people into distinct groups on the basis of categories such as national origin, language, or cultural practices. Racial and ethnic differences are important demographics to consider because health outcomes often affect racial and ethnic minorities differently.

Ninety-two (92) percent of Barron County’s population is White; 3.2% are Hispanic or Latino; 1.8% are Black or African American; and 1.2% are American Indian or Alaska Native. Asian and Native Hawaiian and other Pacific Islanders each comprise less than

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<sup>4</sup> See Appendix A for definition

1% of the population. About 1.6% identify with two or more races. U.S. Census Bureau data estimates that 4% of households do not speak English as their primary language [7]. Spanish is the most common language spoken in households where English is not the primary language (2%). About 1% respectively speak an Indo-European language or another language; about 0.3% speak an Asian language as their primary household language [21].

It should also be noted that Barron County is home to a community of approximately 400 Somali refugees and their families. That population has grown since the 1990s when Somali refugees living in the Twin Cities moved to Barron for work at a turkey processing plant owned by Jennie-O [25], [26]. Barron County also has an Amish population, although estimates of the size of the population vary; data from 2019 indicate a population of approximately 80 residents [27].

### **Sexual and Gender Minority groups (SGM)**

Sexual and Gender Minority (SGM) populations include but are not limited to individuals who identify as gay, lesbian, bisexual, or transgender and others whose sexual orientation, gender identity or expression, or reproductive development is characterized by non-binary constructs. SGM groups experience higher risk for poor health outcomes and unhealthy lifestyle behaviors. They may also receive poor quality of health care due to stigma, their unique needs not being considered, or lack of provider awareness [28] .

At this time, sexual and gender minority data does not exist for Barron County as a whole. However, about 1% of Barron County's 2024 Community Health Assessment respondents identified as "non-binary/non-conforming" when asked "with what gender do you most identify." Caution to be taken when generalizing this result to the percentage of non-binary individuals in the Barron County population; the survey demographic profile was skewed more heavily towards older, female respondents and therefore may not be representative of the county's population demographic profile [16].

In Wisconsin, 3.8% of adults (18+) are LGBTQ (2019), and the total LGBTQ population (13+) totals 207,000 (2020). 29% of LGBTQ adults (25+) are raising children. Wisconsin's LGBT community experiences disparities in income (25% with incomes less than \$24K vs. 16% non-LGBT), food security (18% vs. 11% for non-LGBT) and has lower rates of attending and graduating from college than the non-LGBT population [29], [30].

### **People with Disabilities**

People with disabilities often experience health conditions that lead to poorer health and shorter lifespan. In addition, they often face discrimination, inequality and unjust structural practices which can further result in poorer health outcomes. Programs and policies often limit access to timely and comprehensive health care, which can also lead to poorer health outcomes for those with a disability [31]. About 9.7% of the Barron County population under the age of 65 years is living with a disability [7].

## Other

According to the County Health Rankings, access to reliable, high-speed broadband internet improves access to education, employment, and health care opportunities and is associated with increased economic development. The percentage of households in Barron County with broadband internet connection is 80%; this is lower than state and national estimates of 88%, respectively [8].

## Assessing the Needs of the Community

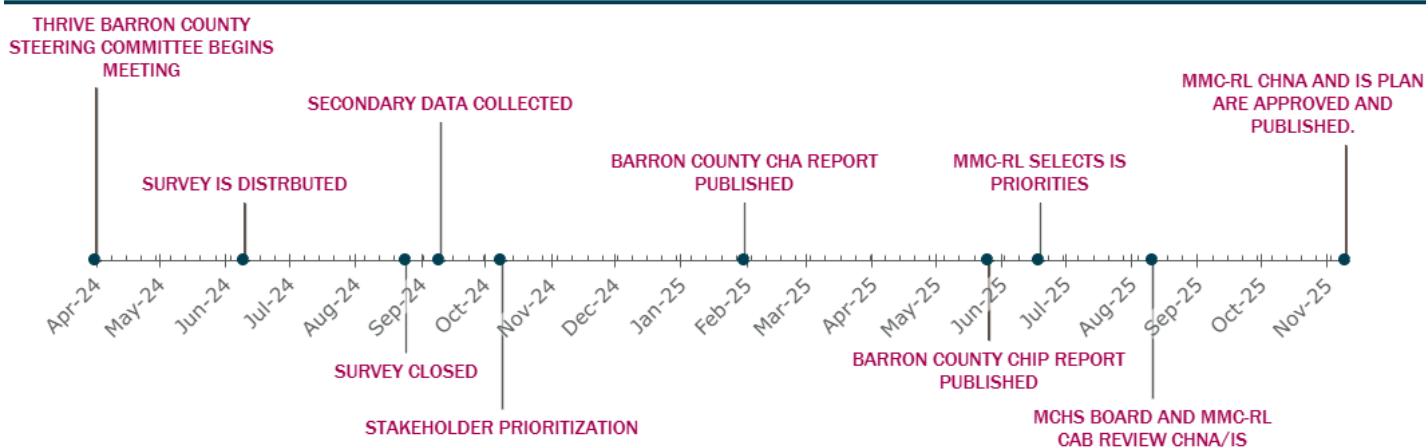
### Overview of Assessment Process and Timeline

The MMC-Rice Lake Community Benefit Workgroup (CBW), a local, internal workgroup, identified and prioritized community health needs through a comprehensive process that included primary and secondary quantitative data, qualitative data, and a collaborative review and assessment process. The MMC-Rice Lake CBW recognizes that health is determined by more than health care, therefore the Community Health Needs Assessment process is designed to assess the overall state and well-being of the community. The broad nature of the primary data questions and topics assured that, for the purposes of MMC-Rice Lake's CHNA, health equity data was also captured and analyzed.

To see a full list of individuals involved in the MMC-Rice Lake CBW see Appendix B.

**Figure 1: Community Health Needs Assessment (CHNA) Timeline**

## MMC-RL CHNA Timeline

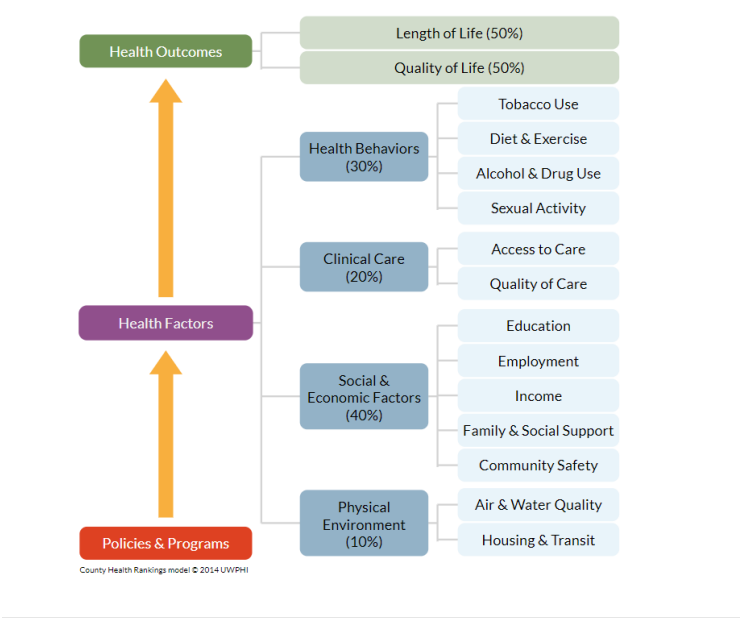


### Process and Methods

Under the umbrella of the Barron County Community Coalition, the Community Health Assessment Steering Committee was formed. The steering committee included

representatives from Barron County Public Health, Barron County Department of Health and Human Services, Northlakes Community Clinic, Mayo Clinic Health System, MMC-Rice Lake, Marshfield Clinic Health System, Cumberland Healthcare, Rice Lake Area Free Clinic, the University of Wisconsin-Eau Claire, and the Aging and Disability Resource Center of Barron County. The CHA Barron Steering Committee utilized the County Health Rankings Model throughout the community health assessment process.

**Figure 2: County Health Rankings Model [32]**



**Data Sources**

Both primary and secondary data collection methods were utilized to develop a thorough understanding of the health issues facing members of the Barron County Community. Primary data included a county-wide survey. Secondary data was compiled by the Wisconsin Institute for Public Policy and Service (WIPPS) into a data workbook, which gathered data from various sources, including U.S. Census, Centers for Disease Control and Prevention, Healthy People, and County Health Rankings.

**Primary Data Collection**  
*Community Health Assessment*

Primary data was collected by utilizing a survey that was available from July 2024-September 2024. The survey was open to anyone fifteen years of age or older who lives, works, or accesses services in Barron County. The survey was available online via the platform “SurveyMonkey” and paper copies were available through partnering community organizations or by request. Paper surveys were available in English, Spanish, and Somali (online surveys were available in English only).

The survey followed the “County Health Rankings and Roadmaps” model by asking participants to select social and economic factors of most concern, clinical care factors of most concern, health behaviors of most concern and physical environment factors of



most concern. Demographic information and top three greatest strengths of Barron County were included in the survey as well.

For a complete list of survey questions please see Appendix C.

Postcards were made with information about the community health survey, including a QR code for people to easily scan and take the survey on a mobile device. Postcards were distributed broadly throughout the community at many events including at the Barron County Fair, the farmers market, and National Night Out. Postcards were also distributed by many community organizations including the libraries, the schools, and food pantries. Paper surveys were also distributed widely through the community, including distribution to meals on wheels participants, being available to patients in the waiting room of the Barron County Free Clinic, the VA Clinic, and MMC-Rice Lake and delivered to the Plain community by the Barron County Health Department.

Over 1,000 residents responded to the survey, well above the number of responses needed to report validity at a 95% confidence level. The demographic data of the respondents closely mirrored the demographic make-up of Barron County in some areas but not all. 74% of survey respondents identified as female, whereas only 49.6% of Barron County residents are female [33]. 23% of Barron County residents are 65 years of age or older and 26% of survey respondents were 65 years of age or older [33]. Although 3.2% of the Barron County population identifies as Hispanic or Latino, only 2% of survey respondents identified as Hispanic or Latino [33]. 1.2% of the Barron County population is American Indian and Alaska Native Alone and 1.8% is Black or African American alone, however only 1% of survey respondents identified as either of these two races [33]. 21% of Barron County Residents have a bachelor's degree or higher, while 42% of survey respondents have a bachelor's degree or higher [33]. Majority of survey respondents (27%) have a yearly household income of \$100,000 or more, and the median household income for Barron County is \$62,000 [31]. Although efforts were made to sample a wide variety of Barron County residents, future survey distribution efforts will be increased to solicit more responses from underrepresented demographic groups.

## Primary Data Collection Results

### *Community Health Assessment*

Top Areas of Improvement for Barron County based on the CHA survey

#### Social and Economic Factors

- Aging related concerns
- Not enough money for safe housing, food, etc.
- Social media harming mental health

#### Physical Environment Concerns

- Lack of safe and affordable housing
- Limited access to transportation
- Access to healthy foods

#### Health Behaviors

- Drug use/misuse/overdose (prescribed and illegal)
- Poor mental health
- Alcohol use/misuse

#### Clinical Care

- Affordable healthcare
- Lack of mental health providers
- Lack of available appointments with healthcare providers

## Secondary Data Collection and Review

Local secondary quantitative data was compiled by WIPPS from a variety of sources based on the Wisconsin Association of Local Health Departments and Boards (WALHDAB) recommendations. Data sources included U.S. Census, Centers for Disease Control and Prevention, United Way reports, County Health Rankings, the Youth Risk Behavior Survey and more.

The information collected through the process provided an objective way to measure overall county health. The secondary data collected followed the County Health Rankings Model and was used to compare Barron County with state and national data to help further prioritize health needs. WIPPS compiled and organized secondary data, Youth Risk Behavior Survey data and Community Health Assessment survey data by Physical Environment, Social & Economic Factors, Clinical Care, and Health Behaviors. WIPPS also provided secondary data on length and quality of life of Barron County residents and compared Barron Counties ranking on those metrics to the rest of the state. This data was used to form the basis of the Barron County CHA stakeholder discussion.

## Secondary Data Results

Top areas of improvement for Barron County based on secondary data

### Health Outcomes

- Poor mental health days
- Frequent mental distress
- Poor physical health days

### Health Behaviors

- Adult smoking
- Adult obesity
- Access to exercise opprotunities

### Clinical Care

- Ratio of population to mental health providers
- Ratio of Population to dentists

### Social and Economic Factors

- Suicides
- Injury deaths
- Children in single parent households

### Physical Environment

- Broadband access

## Prioritizing Community Needs

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### Barron County Prioritization Process

The prioritization process of the health needs is summarized below.

#### *Community Health Survey: July–September 2024*

The Barron County CHA Steering Committee reviewed and analyzed Community Health Survey results. WIPPS also compiled survey data following the County Health Rankings Model to present to Barron County stakeholders at the October 30<sup>th</sup> CHA stakeholder meeting.

#### *Secondary Data Consideration: October 2024*

WIPPS was contracted by the Barron County CHA steering committee to compile secondary data for Barron County and compare secondary data to the Community Health Assessment Survey data. The secondary data provided an objective look at health of Barron County residents and was utilized to help prioritize the top health needs.

#### *CHA Partnership Meeting: October 2024*

On October 30, 2024, local stakeholders and leaders were brought together for a priority-setting meeting. Over 30 stakeholders were in attendance and provided a robust and rich discussion about the community survey, secondary data, and the Barron County community. After the data presentation by WIPPS, the stakeholders discussed community context, concerns and assets and shared qualitative data on the topic and local climate. Participants considered and discussed preventability of the problem, capacity to address the problem, and community support for the problem. The large group shared opportunities as well as existing resources, adding even more context to the data discussion.

The meeting concluded with a ranking of health needs, highlighting a clear consensus on the top health needs of Barron County. Participants went through a facilitated prioritization process where each participant was asked to select their top three health issues to focus on out of the 12 prioritized health issues. The following criteria was also considered in the prioritization process.

- Scope of problem (e.g., severity, number of people impacted)
- Health disparities (e.g., by income and/or race and ethnicity)
- Feasibility (e.g., are there known interventions, can we have an impact)
- Momentum/commitment (e.g., political will, community readiness)
- Alignment with others (e.g., local health department priorities)

The CHA stakeholders voted for the following as the top health priorities:



#### *Barron County CHA Steering Committee Meeting: November 2024*

The Barron County CHA steering committee met in November of 2024 to analyze the top health needs voted on by the community stakeholders and assess what needs should be prioritized for the Barron County Community Health Improvement Plan. Barron County Public Health wanted to limit the community health improvement plan to three priority areas to ensure adequate time and resources could be put into their efforts. Alignment between different organizations in the CHA steering committee was considered in order



to collaborate on health priorities and share resources and expertise. Feasibility of the Barron County CHA steering committee to create effective change, as well as what efforts and resources already exist in Barron County to address these issues were considered. The top three priorities chosen by the Barron County CHA steering committee for the Barron County CHIP are discussed later in this report.

### **MCHS Prioritization Process**

The Marshfield Clinic Health System Center for Community Health Advancement Strategic Areas of Focus (2024-27) are the result of an assessment process which included review of community health needs; discussion with community stakeholders, key subject matter experts, and the MCHS Community Health and Benefits Steering Committee; review of CCHA's Previous 2023 Strategic Priorities; assessment of interventions for value and impact, resources, and various industry factors (such as new regulations and requirements) and alignment of system imperatives.

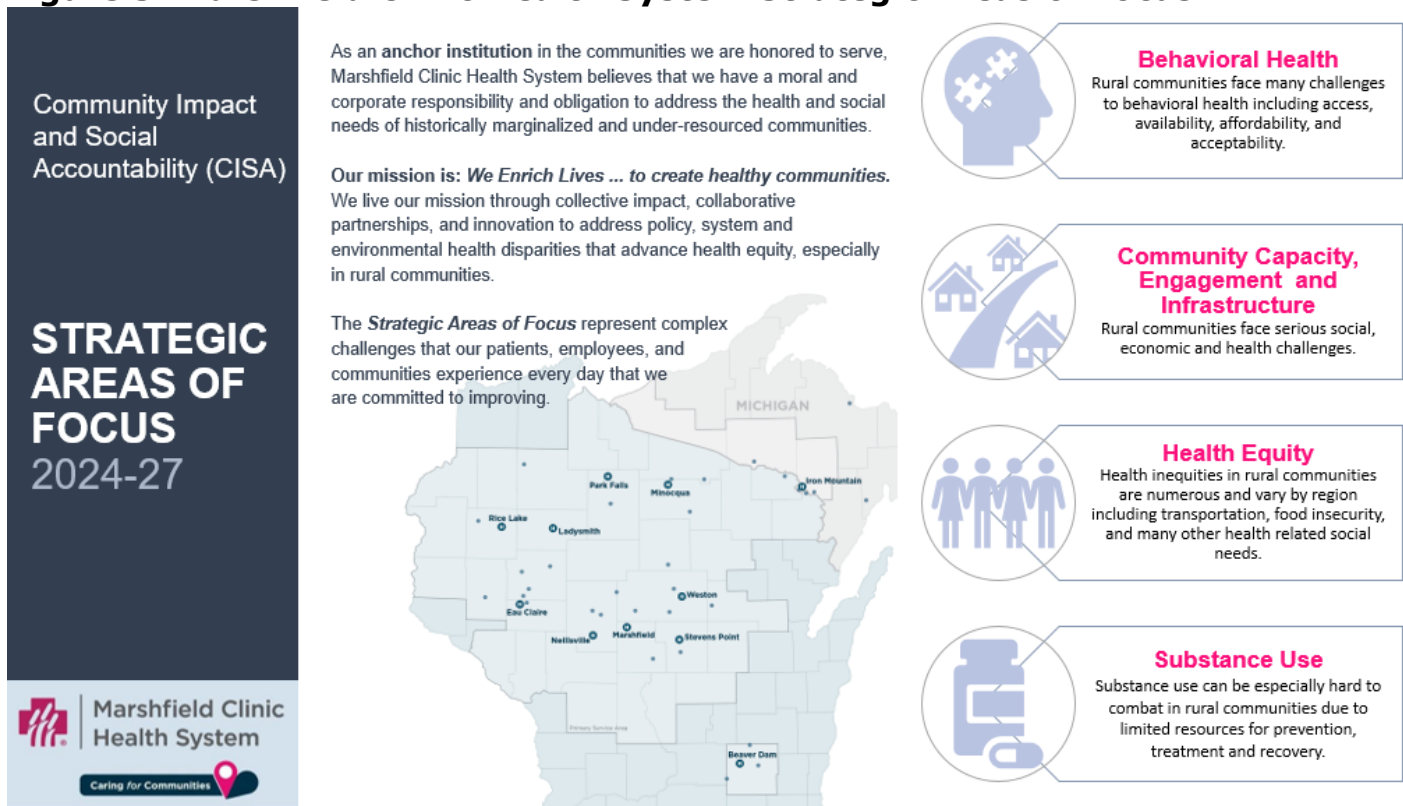
The 2024-2027 CCHA Strategic Areas of Focus are system-wide community health focus areas approved by the MCHS Community Health and Benefits Steering Committee. Subsequently, Strategic Focus Areas are integrated into MMC Implementation Strategy<sup>5</sup> (IS) plans and other MCHS and Security Health Plan plans to align system and regional efforts. The strategic focus areas are:

- Substance Use
- Behavioral health
- Health Equity
- Community Capacity, Engagement and Infrastructure

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<sup>5</sup> See Appendix A for definition

**Figure 3: Marshfield Clinic Health System Strategic Areas of Focus**



### MMC-Rice Lake CBW meeting- July 2025

The MMC-Rice Lake CBW met in July of 2025 to discuss the results of the CHNA and provide hospital approval. Additional consideration of alignment with the system-wide strategic areas of focus was made. Further criteria were used to determine health priorities including:

- The burden, scope, severity, or urgency of the health need
- The estimated feasibility and effectiveness of possible interventions
- The health disparities associated with the need
- The importance the community places on addressing the need [34]

### MMC-Rice Lake Health Priorities for 2026-2028

After completing extensive review of the Community Health survey and process, United Way ALICE data, Healthiest Wisconsin 2020, County Health Rankings, and other quantitative and qualitative data, the top community health priorities identified by MMC-Rice Lake are:

- **Substance Use**
- **Behavioral Health**
- **Health Equity**
- **Community Capacity, Engagement, and Infrastructure**

As these priorities are addressed, intentional efforts will be made to ensure appropriate resources are provided, and unfair and unjust obstacles are eliminated for all people and communities to reach their optimal health.

## **Description and Supporting Data of Prioritized Community Health Needs**

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The community health needs of substance use, behavioral health, health equity and community capacity, engagement, and infrastructure strongly impact individual and community health. These priorities are cross-cutting, therefore efforts made to address these health needs will also positively impact other health priorities and benefit community and individual health outcomes. These priorities affect health in the short and long term and MMC-Rice Lake will implement a variety of strategies to address not only the short- and long-term outcomes of these health needs, but also the root causes of these health issues and a focus on prevention. MCHS has system-wide initiatives that all hospitals support to address these health needs broadly in addition to spearheading local initiatives.

The following pages highlight primary and secondary data for the prioritized needs.

# Substance Use

**25%** of community health survey respondents selected drug use/misuse/overdose (prescribed and illegal) as the top health behavior of most concern to Barron County residents<sup>[1]</sup>.

## What is alcohol & substance misuse?

Alcohol misuse describes a pattern of excess daily alcohol consumption that poses adverse health and social consequences. This includes >1 drink per day for women and >2 drinks per day for men. Substance misuse refers to the use of illegal substances or the use of legal medications in a manner that deviates from medical prescriptions (Centers for Disease Control and Prevention, 2018).

## INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS<sup>[2]</sup>

The effects of alcohol and substance use can be far-reaching, heavily influencing both individual and community health in the following ways...

### Individual Impact

- heart disease
- liver disease
- overdose
- death

### Community Impact

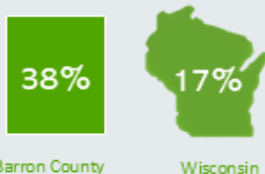
- unintentional injuries
- violence (e.g. homicide & suicide)
- family disruption
- infectious disease transmission (specific to substance misuse)

## THE SCOPE ACROSS BARRON COUNTY

**47%**  
or almost  $\frac{1}{2}$  of Barron County high school students has ever drank alcohol.<sup>[4]</sup>

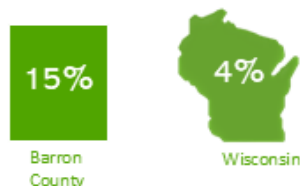


Rate of students who have ever drank alcohol that drank before age 13.<sup>[4]</sup>



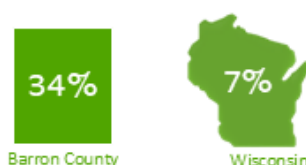
**17%** of Barron County high school students have ever used Marijuana <sup>[4]</sup>

Rate of students who have ever used marijuana who used before age 13. <sup>[4]</sup>



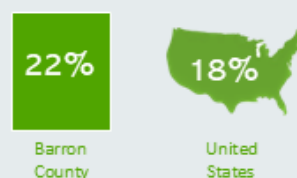
**16%** of Barron County high school students have ever tried cigarettes. <sup>[4]</sup>

Rate of students who have ever tried cigarettes before age 13. <sup>[4]</sup>

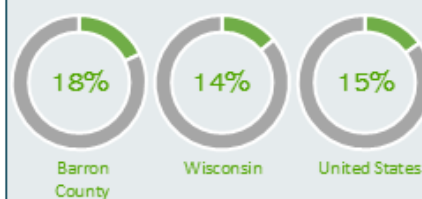


Barron County rates **higher** than national average for excessive drinking and adult smoking. <sup>[3]</sup>

Rates of Excessive Drinking<sup>[3]</sup>



Percent of adults who are current smokers <sup>[3]</sup>



1. Barron County 2024 Community Health Assessment  
2. Adapted from Centers for Disease Control and Prevention, 2023  
3. County Health Rankings, 2024

4. Barron County – 2021 Youth Risk Behavior Survey



# Behavioral Health

17% of community health survey respondents believe poor mental health is the top health behavior of most concern to Barron County Residents <sup>[1]</sup>

## What is behavioral health?

Behavioral health describes the behaviors and emotions that impact one’s overall wellbeing. It encompasses the prevention, intervention, personalized treatment plans, and recovery of mental health conditions, like depression and anxiety. Behavioral health professionals include psychologists, psychiatrists, counselors, and social workers (Centers for Medicare & Medicaid Services, 2023).

## INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS<sup>[2]</sup>

The impacts of a high prevalence of untreated behavioral health issues can be far-reaching, heavily impacting both individual and community health in the following ways...

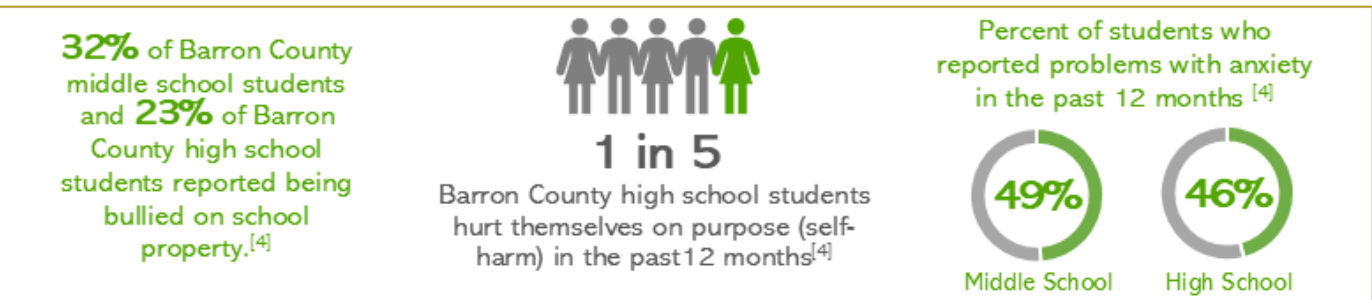
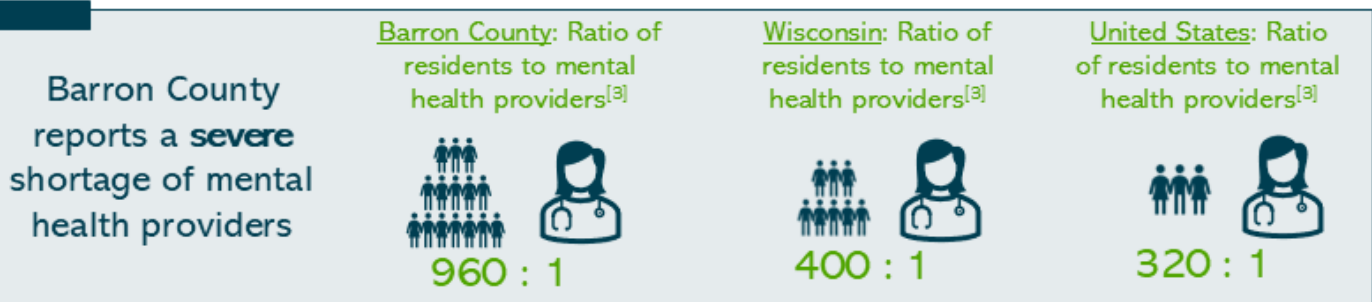
### Individual Impact

- isolation from loved ones
- unemployment and financial struggles
- poor quality of life

### Community Impact

- increased healthcare costs
- high rates of incarceration
- community-level economic strain

## THE SCOPE ACROSS BARRON COUNTY



1. Barron County 2024 Community Health Assessment

2. Adapted from Centers for Disease Control and Prevention, 2023

3. County Health Rankings, 2024

4. Barron County – 2021 Youth Risk Behavior Survey

5. County Health Rankings, 2017-2021

# Health Equity

**24%** of community health survey respondents said the lack of safe and affordable housing was a top concern to Barron County residents<sup>[1]</sup>.

## What is health equity?

Health equity is the state in which all people – regardless of race, ethnicity, socioeconomic status, gender identity, disability, education level, or geography - have a fair and just opportunity to maintain optimal health. Health equity includes addressing historical injustices and reducing preventable health disparities (Centers for Disease Control and Prevention, 2022).

## INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS<sup>[2]</sup>

The impacts of health inequities can be far-reaching, heavily impacting both individual and community health in the following ways...

### Individual Impact

- higher chance of developing chronic conditions
- increased mental health struggles
- lower life expectancy

### Community Impact

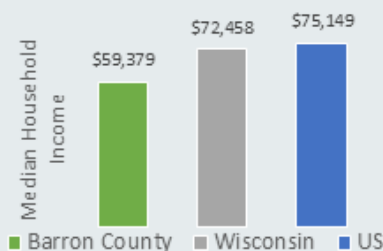
- economic strain on healthcare system
- reduced workforce productivity
- higher risk of infectious disease spread

## THE SCOPE ACROSS BARRON COUNTY

15% of the Barron County children are living below the federal poverty line.<sup>[1]</sup>



Barron County median household income is LOWER than the WI and US median household income.<sup>[1]</sup>



1 in 3 middle schoolers...



...and 1 in 5 high schoolers schoolers...

...experienced hunger due to a lack of food at home in the past 30 days.<sup>[4]</sup>

Among the social determinants of health, Barron County residents indicated the following concerns<sup>[1]</sup>...



**20%** of Barron County residents do not have access to broadband internet



Barron County childcare costs for a household with 2 kids is **27%** of the median household income.



**10%** of Barron County households spend **50% or more** of their income on housing

1. Barron County 2024 Community Health Assessment

2. Adapted from Centers for Disease Control and Prevention, 2023

3. County Health Rankings, 2023

4. Barron County – 2021 Youth Risk Behavior Survey

## **Partners and Collaboration**

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MMC-Rice Lake and Barron County Public Health will be working collaboratively on cross-cutting priorities. MMC-Rice Lake staff are actively participating as a part of the Thrive Barron County Coalition that has developed the Community Health Improvement Plan (CHIP) for Barron County. Barron County Public Health has prioritized the following health needs:

- Mental Health
- Substance Use
- Access to Health Care

MMC-Rice Lake staff are actively involved in Barron County community groups and coalitions that are working to address the above health issues in Barron County.

## **Health Needs Not Addressed**

---

Through the assessment process, other community health needs were identified that have not been addressed in this plan. In prioritizing community health needs, the MMC-Rice Lake CBW considered other organizations addressing the specific need, the ability of MMC-Rice Lake to impact change, availability of resources, as well as readiness of the community for interventions.

After consideration, the following health needs will not be addressed by MMC-Rice Lake as other community organizations are better equipped and have the resources in place to lead efforts to address them:

- Obesity, nutrition, physical inactivity
- Access to childcare
- Access to safe and affordable housing

## **Potential Resources to Address Health Needs**

---

Potential resources and assets in our community that will help address the identified health priorities as well as help develop the implementation plans include the following:

- Barron County Department of Health and Human Services (DHHS)
- Boys and Girls Club of Barron County
- Barron County Aging and Disability Resource Center (ADRC)
- United Way of Rice Lake
- Cumberland Healthcare
- Mayo Clinic Health System
- Barron County Community Coalition (BC3)
- Community Connections to Prosperity (CCP)
- Rice Lake Area Free Clinic

- Northlakes Community Clinic
- Embrace Inc.
- Habitat for Humanity
- Salvation Army

Having identified the health priorities that will be addressed, the next steps include collaboration with community partners through a variety of community coalitions, workgroups, and organizations. MMC-Rice Lake will leverage existing partnerships and community resources to coordinate strategic efforts to address identified community health priorities that can be monitored, evaluated, and improved upon over time.

The MMC-Rice Lake CBW will oversee the three-year implementation strategy plan. This group will develop a strategic plan that demonstrates the potential to have the most impact on improving selected health priorities, and that will focus on the social determinants of health<sup>6</sup> to subsequently reduce health disparities.

MMC-Rice Lake CBW will evaluate implemented programs and activities and track key performance indicators during each year of the implementation plan. With the help of respective partners, an analysis will be completed to identify new and current resources that can be better integrated and deployed to maximize positive impact on population health.

This CHNA will be shared among all partners and made publicly available.

## **Next Steps**

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### **Approval and Community Input**

This Community Health Needs Assessment (CHNA) report was adopted by the MCHS Hospitals Board Inc. by December 31<sup>st</sup>, 2025.

If you would like to serve on a coalition that helps meet the needs of the community, or have a comment on this assessment, please contact the Marshfield Clinic Health System Center for Community Health Advancement at [communityhealth@marshfieldclinic.org](mailto:communityhealth@marshfieldclinic.org) or (715) 221-8400.

## **Evaluation of the Impact of the Preceding Implementation Strategy**

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Health priorities identified in the preceding CHNA completed in 2022 were:

- Alcohol and Substance Abuse
- Behavioral Health
- Health Equity

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<sup>6</sup> See Appendix A for definition.



## Alcohol and Substance Abuse

Strategy	Summary of Actions from 2022-2025
Prevent alcohol and substance use by identifying and implementing individual and/or environmental prevention strategies.	<p>Promoted Botvin LifeSkills curriculum to Barron County Schools and afterschool programs.</p> <p>Supported Youth Alcohol Age Compliance checks.</p>
Participate in community-based workgroups	MMC-Rice Lake staff participated in community-based workgroups and coalitions such as the Barron County Community Coalition (BC3), Thrive Barron County, and Community Connections to Prosperity (CCP).

## Behavioral Health

Strategy	Summary of Actions from 2022-2025
Enhance community capacity to provide resources that increase social and emotional skill development and improve mental wellness of youth	Promoted and supported LifeTools, a social emotional program (SEL) for youth in Barron County.
Provide educational materials (using a variety of platforms) to increase caregiver mental health and wellbeing.	Promoted and connected schools to Wisconsin Out of School Time Alliance (WOSTA) resources and trainings.
Provide direct technical assistance and training to adults who work with and support youth around behavior guidance and youth mental wellness.	Promoted and supported b.e.s.t., (behavioral emotional social traits), a universal screening tool to help educators support the emotional health of students.
Enhance community members' skills to support mental wellness promotion and suicide prevention.	Promoted free virtual community Question Persuade Refer (QPR) suicide prevention trainings open to all in the community.
Participate in community-based workgroups	MMC-Rice Lake staff participated in community-based workgroups and coalitions such as the Barron County Community Coalition (BC3), Thrive Barron County, and Community Connections to Prosperity (CCP).

## Health Equity

Activity	Summary of Actions from 2022-2025
Address social needs of patients and communities by screening and connecting to resources.	Hosted a FindHelp (an online resource directory) training for community organizations in Barron County.
Increase community capacity to provide nutritious, local grown food and address food insecurity	<p>Supported the Barron County Backpack program which addresses food insecurity for youth.</p> <p>Supplied a hydroponic garden to the Barron County Boys and Girls Club so they could grow and produce their own food.</p>
Participate in community-based workgroups	MMC-Rice Lake staff participated in community-based workgroups and coalitions such as the Barron County Community Coalition (BC3), Thrive Barron County, and Community Connections to Prosperity (CCP).

## Appendix A: Definitions

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- **Health Equity:** Achieved when every person has the opportunity to attain one's fullest or highest level of health potential. Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health. Achieving this requires focused and ongoing societal efforts to address historical and contemporary injustices; overcome economic, social, and other obstacles to health and healthcare; and eliminate preventable health disparities. (Centers for Disease Control and Prevention, 2022)
- **Health Priority(ies):** Selected health issues to be addressed by hospitals based on a prioritization process and community input collected via survey, community conversations, focus groups, and/or coalition meetings; and secondary data review.
- **University of Wisconsin's Population Health Institute's County Health Rankings:** a program of the University of Wisconsin Population Health Institute that provides data, evidence, guidance, and examples of the multiple factors that influence health. The rankings have the ability to measure the health data of almost every county in the United States and are complemented by guidance, tools, and resources to accelerate community learning and action. (County Health Rankings, 2023)
- **United Way ALICE report:** ALICE is an acronym that stands for Asset Limited, Income Constrained, Employed. ALICE represents the households with income above the Federal Poverty Level but below the basic cost of living. United Way's ALICE Report provides current research-based data that quantifies who in Wisconsin is living on the edge of financial insecurity. (United for ALICE, 2023)
- **Implementation Strategy (IS):** a written plan that describes the actions and activities the hospital facility plans to implement or support to address each health need identified by the CHNA. The plan includes a written explanation if the hospital facility does not intend to address an identified health need. An authorized body of the hospital facility must adopt the implementation strategy on or before the 15<sup>th</sup> day of the fifth month after the end of the taxable year in which the hospital facility finished conducting the CHNA. (IRS, 2023)
- **Social Determinants of Health (SDoH):** the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Can be grouped into five domains: Economic Stability, Education Access and Quality, Health Care Access and Quality, Neighborhood and Built Environment, and Social and Community Context. (Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.)

## **Appendix B: Individuals Involved in the CHNA**

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### **MMC-Rice Lake Community Benefits Workgroup (CBW)**

- Bradley Groseth: MMC-Rice Lake President
- Barb Agen: MMC-Rice Lake Vice President-Operations and Patient Care Services
- Tammy Koger: MMC-Rice Lake Manager- Volunteer Services
- Mickey Ganschow: Marshfield Clinic Health System Community Benefits Coordinator
- Gina Leath: West Market Chief Nursing Officer
- Dr. Brandon Parkhurst: West Market Vice President of Medical Affairs
- Jenny Benrud: West Market Practice Management Administrator

### **CHA Steering Committee**

- Barb Agen: Director of Patient Care Services, Marshfield Medical Center-Rice Lake
- Jeanette Olson: University of Wisconsin Eau Claire
- Jennifer Jako: Director of Barron County Aging and Disability Resource Center
- Jennifer Jorgenson: Community Engagement Specialist, Mayo Clinic Health System
- Kelly Quick Hanson: Marketing Director, Cumberland Healthcare
- Kiersten Haugerud: Registered Dietician, Cumberland Healthcare
- Meekin Witthoft: Director of Nursing, Cumberland Healthcare
- Megan Hahn: Prevention Specialist, Barron County DHHS
- Melissa Price: Director, Rice Lake Area Free Clinic
- Mickey Ganschow: Community Benefit Coordinator, Marshfield Clinic Health System
- Nikki Liedl: Clinics Manager, Northlakes Community Clinic
- Patricia Wickman: Public Health Nurse, Barron County
- Sarah Turner: Public Health Specialist, Barron County
- Stacey Frolik: Director, Barron County DHHS
- Karla Potts-shufelt: Health Officer, Barron County

# Appendix C: Community Health Survey

Barron County Community Health Assessment

**We need your help! Please take a few minutes to complete this short, anonymous survey. We want to hear your thoughts on the biggest health-related issues in Barron County. Your answers will help us understand the problems we face as a community. Every opinion counts, so please share yours. Thank you for making a difference in our county's health!**

1. I live, work and/or use services in Barron County

- ☐ Yes
- ☐ No (clicking this option will take you to the end of the survey)

2. Choose the **THREE** social or economic factors you are most concerned about for Barron County

- |  |  |
|--|--|
| <input type="checkbox"/> Aging-related concerns  | <input type="checkbox"/> Not enough money for safe housing, food, etc. |
| <input type="checkbox"/> English as a second language barriers                               | <input type="checkbox"/> Not enough social or community support        |
| <input type="checkbox"/> Family issues (divorce, absent parents, parenting, aging relatives) | <input type="checkbox"/> Racial or ethnic discrimination               |
| <input type="checkbox"/> Gender and/or sexual identity discrimination                        | <input type="checkbox"/> Social media harming mental health            |
| <input type="checkbox"/> Lack of jobs that can support a family/myself                       | <input type="checkbox"/> Violence in homes and/or the community        |
| <input type="checkbox"/> Limited reading or math skills, or education in general             |  |
| <input type="checkbox"/> Other (please specify)  |  |
-

---

3. Choose your top **THREE** physical environment concerns for Barron County

- |   |  |
|---|--|
| <input type="checkbox"/> Access to healthy foods                              | <input type="checkbox"/> Lack of exercise opportunities                  |
| <input type="checkbox"/> Access to technology (internet, computer, cellphone) | <input type="checkbox"/> Lack of green space (trees, open spaces, parks) |
| <input type="checkbox"/> Air pollution  | <input type="checkbox"/> Limited access to transportation                |
| <input type="checkbox"/> Concerns about firearm safety                        | <input type="checkbox"/> Quality of drinking water                       |
| <input type="checkbox"/> Lack of safe and affordable housing                  |  |
| <input type="checkbox"/> Other (please specify)                               |  |

4. Choose the **THREE** health behaviors you are most concerned about in Barron County

- |  |   |
|--|---|
| <input type="checkbox"/> Alcohol use/misuse                                | <input type="checkbox"/> Poor nutrition   |
| <input type="checkbox"/> Drug use/misuse/overdose (prescribed and illegal) | <input type="checkbox"/> Poor oral or dental health   |
| <input type="checkbox"/> Intentional injuries (self-harm, suicide)         | <input type="checkbox"/> Sexually transmitted infections                                      |
| <input type="checkbox"/> Obesity/overweight                                | <input type="checkbox"/> Tobacco (cigarettes and chewing), vaping, e-cigarettes               |
| <input type="checkbox"/> Physical inactivity                               | <input type="checkbox"/> Unintentional injuries or accidents (auto, farm, UTV, drowning, etc) |
| <input type="checkbox"/> Poor mental health                                |   |
| <input type="checkbox"/> Other (please specify)                            |   |

5. Choose the **THREE** health care issues you are most concerned about for Barron County

- |   |  |
|---|--|
| <input type="checkbox"/> Affordable healthcare                                      | <input type="checkbox"/> Lack of mental health care providers                                      |
| <input type="checkbox"/> Availability of affordable dental care                     | <input type="checkbox"/> Lack of specialists in our county   |
| <input type="checkbox"/> Barriers to healthcare due to English as a second language | <input type="checkbox"/> Limited use of preventative services (yearly physicals, mammograms, etc.) |
| <input type="checkbox"/> Lack of available appointments with healthcare providers   | <input type="checkbox"/> Low vaccination rates (flu, childhood vaccines, etc.)                     |
| <input type="checkbox"/> Lack of in-home healthcare                                 | <input type="checkbox"/> Not able to afford medications  |
| <input type="checkbox"/> Other (please specify)                                     |  |



6. Choose the top **THREE** areas that you think Barron County should FOCUS ON over the next 5 years to improve the health of our communities

- |   |   |
|---|---|
| <input type="checkbox"/> Access to affordable and healthy food                  | <input type="checkbox"/> Domestic violence  |
| <input type="checkbox"/> Access to childcare                                    | <input type="checkbox"/> Drug use/misuse/overdose (prescribed and illegal)            |
| <input type="checkbox"/> Access to community parks and recreation (green space) | <input type="checkbox"/> Elder abuse/neglect  |
| <input type="checkbox"/> Access to dental care                                  | <input type="checkbox"/> Improved resources to age at home                            |
| <input type="checkbox"/> Access to exercise activities/facilities               | <input type="checkbox"/> Jobs and the economy (having enough income to live on)       |
| <input type="checkbox"/> Access to health care                                  | <input type="checkbox"/> Lack of access to technology (internet, computer, cellphone) |
| <input type="checkbox"/> Access to mental health care                           | <input type="checkbox"/> Limited reading or math skills, education in general (K-12)  |
| <input type="checkbox"/> Access to transportation                               | <input type="checkbox"/> Mental health and wellbeing of adults                        |
| <input type="checkbox"/> Air and water quality                                  | <input type="checkbox"/> Mental health and wellbeing of children and teens            |
| <input type="checkbox"/> Alcohol use/misuse                                     | <input type="checkbox"/> Safe and affordable housing                                  |
| <input type="checkbox"/> Child abuse/neglect                                    | <input type="checkbox"/> Social connectedness/isolation                               |
| <input type="checkbox"/> Crime/neighborhood safety                              | <input type="checkbox"/> Strength of families/relationships (parenting)               |
| <input type="checkbox"/> Discrimination and harassment                          | <input type="checkbox"/> Vaping and tobacco use                                       |
| <input type="checkbox"/> Other (please specify)                                 |   |

---

7. What are the **THREE** greatest strengths of Barron County?

- |   |  |
|---|--|
| <input type="checkbox"/> Access to affordable healthy foods                           | <input type="checkbox"/> Jobs that will support myself/my family                         |
| <input type="checkbox"/> Access to child care   | <input type="checkbox"/> Low amount of alcohol use/misuse                                |
| <input type="checkbox"/> Access to community parks and recreation (green space)       | <input type="checkbox"/> Low amount of discrimination and harassment                     |
| <input type="checkbox"/> Access to dental care  | <input type="checkbox"/> Low amount of domestic violence                                 |
| <input type="checkbox"/> Access to exercise activities/facilities                     | <input type="checkbox"/> Low amount of drug use/misuse/overdose (prescribed and illegal) |
| <input type="checkbox"/> Access to health care  | <input type="checkbox"/> Low crime rates (safe neighborhoods)                            |
| <input type="checkbox"/> Access to mental health care                                 | <input type="checkbox"/> Low rate of child abuse/neglect                                 |
| <input type="checkbox"/> Access to technology (internet, computer, cellphones)        | <input type="checkbox"/> Low rate of elder abuse/neglect                                 |
| <input type="checkbox"/> Access to transportation                                     | <input type="checkbox"/> Low vaping and tobacco use                                      |
| <input type="checkbox"/> Age-related resources and/or the ability to age in your home | <input type="checkbox"/> Mental health and well-being of adults                          |
| <input type="checkbox"/> Community events/social connectedness                        | <input type="checkbox"/> Mental health and well-being of children and teens              |
| <input type="checkbox"/> Clean environment (air and water quality)                    | <input type="checkbox"/> Respecting cultural differences                                 |
| <input type="checkbox"/> Good quality schools/K-12 education                          | <input type="checkbox"/> Safe and affordable housing                                     |
| <input type="checkbox"/> Having enough income to live on                              | <input type="checkbox"/> Strong family life/relationships (parenting)                    |
| <input type="checkbox"/> Other (please specify)                                       |  |

8. What affects your personal well-being the most?

9. What is your zip code?

---

10. What gender do you most identify with?

- ☐ Male
- ☐ Female
- ☐ Non-binary/non-conforming
- ☐ Other/not listed

11. What is your age group?

- |                             |                             |
|-----------------------------|-----------------------------|
| <input type="radio"/> 15-18 | <input type="radio"/> 55-64 |
| <input type="radio"/> 19-24 | <input type="radio"/> 65-74 |
| <input type="radio"/> 25-34 | <input type="radio"/> 75-84 |
| <input type="radio"/> 35-44 | <input type="radio"/> 85+   |
| <input type="radio"/> 45-54 |                             |

12. Which of the following best describes your ethnicity/race?

- |   |   |
|---|---|
| <input type="radio"/> White, not Hispanic/Latino        | <input type="radio"/> Asian                               |
| <input type="radio"/> Hispanic/Latino                   | <input type="radio"/> Native Hawaiian or Pacific Islander |
| <input type="radio"/> American Indian or Alaskan Native | <input type="radio"/> Two or more races                   |
| <input type="radio"/> Black/African American            |   |
| <input type="radio"/> Other (please specify)            |   |

13. What is your highest level of education?

- |  |  |
|--|--|
| <input type="radio"/> 8th grade or less                        | <input type="radio"/> Technical diploma or associate degree                    |
| <input type="radio"/> Some high school                         | <input type="radio"/> Bachelor's degree  |
| <input type="radio"/> High school diploma or equivalent degree | <input type="radio"/> Higher than a Bachelor's degree (Master, doctorate, etc) |
| <input type="radio"/> Some college or technical school         |  |

14. What is your current employment status?

- |  |                                      |
|--|--------------------------------------|
| <input type="radio"/> Employed                 | <input type="radio"/> Retired        |
| <input type="radio"/> Not working by choice    | <input type="radio"/> Disabled       |
| <input type="radio"/> Unemployed not by choice | <input type="radio"/> Unable to work |
| <input type="radio"/> Student                  |                                      |

15. What is your yearly household income?

- |  |  |
|--|--|
| <input type="radio"/> Less than \$24,999   | <input type="radio"/> \$50,000 to \$74,999 |
| <input type="radio"/> \$25,000 to \$34,999 | <input type="radio"/> \$75,000 to \$99,999 |
| <input type="radio"/> \$35,000 to \$49,999 | <input type="radio"/> \$100,000 or more    |

16. How many individuals, including yourself, live in your household

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4 or more

17. Are any of those children?

- ☐ Yes
- ☐ No

## **Appendix D: Community Health Survey Results**

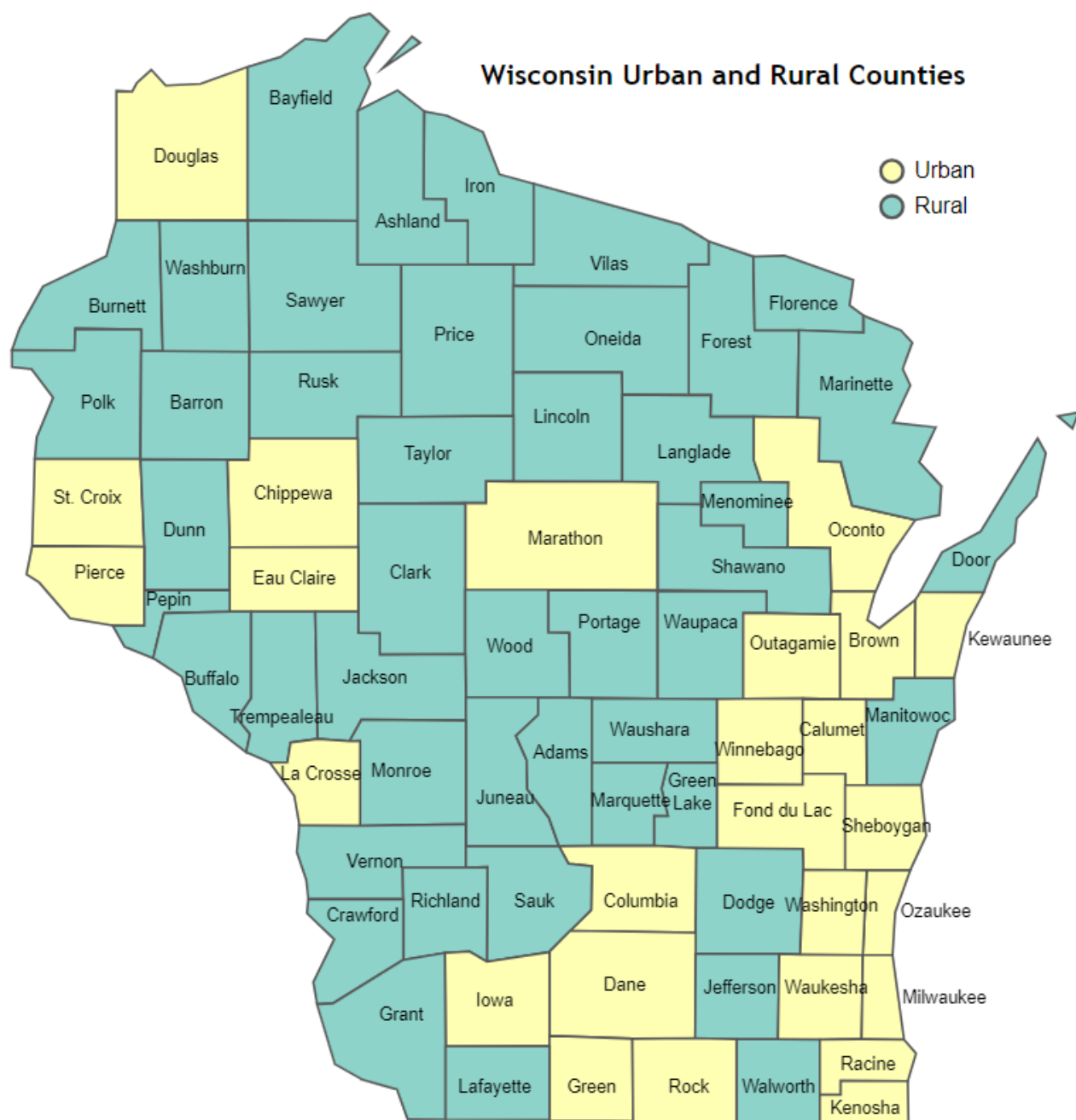
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2024 Barron County Community Health Survey Results:

[https://www.surveymonkey.com/results/SM-SdiyrubRZNJq8lms272SRA\\_3D\\_3D/](https://www.surveymonkey.com/results/SM-SdiyrubRZNJq8lms272SRA_3D_3D/)

## Appendix E: Rural and Urban County Map

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<https://www.dhs.wisconsin.gov/wish/urban-rural.htm>



## Appendix F: References

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