



Marshfield Clinic
Health System



Community Health Implementation Strategy

Marshfield Medical Center

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Executive Summary

Health System Overview

Marshfield Clinic was founded in 1916 by six physicians practicing in Marshfield, a rural central Wisconsin city. 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 today is an integrated system serving Wisconsin and beyond, with more than 10,000 employees including over 1,200 providers comprising 90 specialties and subspecialties. Its entities provide service and health care to more than two million residents through over 50 locations in 34 Wisconsin communities in northern, central and western Wisconsin.

MCHS primary operations include: Marshfield Clinic; Marshfield Medical Center hospitals in Marshfield, Eau Claire, Beaver Dam, Ladysmith, Minocqua, Neillsville, Rice Lake, Weston, Park Falls, and Marshfield Children's Hospital; Marshfield Clinic Research Institute, Security Health Plan and Marshfield Clinic Health System Foundation.

The Clinic operates several dental clinics in northern, central and western Wisconsin, providing general family dentistry and dental hygiene services to more than 60,000 unique patients per year. These centers were launched through a collaboration including Marshfield Clinic, Family Health Center of Marshfield, Inc., and federal and state agencies, to address the need for dental care in underserved areas. The centers serve all patients regardless of ability to pay or insurance status - uninsured/underinsured, private pay and commercial insurance.

Hospital Overview

Marshfield Medical Center (MMC) is a 315 bed full service hospital in Marshfield, Wisconsin, which offers primary, secondary, tertiary, and Level II Trauma Center hospital services provided by Marshfield Clinic specialists.

MMC offers a wide range of advance care services including but not limited to:

- Birth Center
- Cardiology
- Children's Hospital
- Endovascular services – coiling for aneurysm
- LifeLink transportation (helicopter, airplane)
- Telestroke consultations with northern Wisconsin hospitals
- 24/7 Emergency Department

Implementation Strategy Overview

This Implementation Strategy is specific to Marshfield Medical Center (MMC) and addresses the community health priorities identified through a collaborative Community Health Needs Assessment (CHNA) process. This document outlines the plans for MMC to support specific community improvement efforts.

This plan was reviewed and approved by the authorized governing body, MCHS Hospitals Board, Inc. on December 13, 2021, which is on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed. Evaluation of the previous Implementation Strategy can be found in the 2021 MMC CHNA report.

Community Health Needs Assessment Overview

The MMC CHNA was conducted through a partnership with Aspirus, Inc.

The MMC CHNA written report includes the process used to conduct the assessment and establish the community health priorities, and describes:

- The community served by the hospital and how it was determined
- Community demographics
- The process and methods used to conduct the assessment including data and other information used, methods of collection and analyzing information, cited external source material
- How the hospital accounted input from persons that represent the broad interests of the community
- How data was collected and what types of data were used in the assessment process
- Health priorities and concerns of all population groups including the medically underserved, low-income, and minority groups
- The identified health priorities of both the community and hospital, including the process and criteria used to identify and prioritize identified needs
- Existing resources in the community available to respond to identified priorities

Accessing the Full Report

The written report was completed November 2021, presented to the MCHS Hospitals Board, Inc. for discussion and was approved on December 13, 2021. The full CHNA report, which details the entire assessment and prioritization process, can be found on <https://marshfieldclinic.org/about-us/community-health-needs-assessment-reports>.

Prioritization Process

After completing an extensive analysis of quantitative and qualitative data, the National Association of County and City Health Officials (NACCHO) Prioritization Matrix was used by the committee to determine the health improvement priorities and included questions to answer the following:

- How is the county doing compared to the state and national goals?
- What health priorities have the largest community impact?
- What health priorities have the most serious impact?
- Is the community ready to change?
- Can these health priorities be changed over a reasonable period of time?
- Are there gaps in county efforts to address the health priority?
- Did the community and county data identify this as a health priority?

Health Priorities

After review of the data, the top community health priorities identified by Marshfield Medical Center in Marshfield are:

- Alcohol and Substance Abuse
- Behavioral Health
- Chronic Disease
- Social Determinants of Health

Due to the interconnected nature of these health priorities, a number of health priorities as shown in Table A were combined. However, MMC will continue to support additional community health needs as they arise.

2021 Community Health Survey Health Areas	Marshfield Clinic Health System ABCS Health Priorities
Alcohol Misuse	Alcohol and Substance Use
Substance Use	
Mental Health	Behavioral Health
Obesity	Chronic Disease
Physical Activity	
Healthy Nutrition	
Vaping/Tobacco Use and Exposure	
Chronic Disease Prevention and Management	
Social Determinants of Health	Social Determinants of Health
Health Equity	

MCHS is committed to improving the overall health and well-being of the communities we serve by strategically focusing on health equity. According to the World Health Organization, health equity implies that everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential. Therefore, the CBW-Marshfield will focus on improving health equity in our communities by implementing strategies that systematically focus on the social determinants of health and subsequently reduce health disparities.

Identified Health Needs Not Being Addressed

MMC is addressing all health priorities identified through the CHNA process.

Implementation Strategy

The Implementation Strategy is a part of a community effort to address identified health priorities. Many strategies will be implemented collaboratively with community and Marshfield Clinic Health System partners. Community change is a long-term process that no one organization can accomplish alone; therefore partnerships are essential for success.

Health Priority: Alcohol and Substance Abuse

Goal 1: Reduce youth substance use				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Support Alcohol and Other Drug (AOD) Prevention Curriculums in school and/or afterschool settings.	Identify evidence based curriculum. Support implementation of an AODA prevention curriculum.	Reduction of underage alcohol consumption. Reduction of substance abuse.	Staff time Program materials Funding as appropriate	Central Wisconsin Partnership for Recovery Northwoods Coalition School Districts Youth serving organizations
Goal 2: Reduce community impact related to substance abuse and misuse				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Support workplace drug prevention and recovery efforts.	Identify/develop curriculum. Recruit employers. Implement training. Evaluate training.	Increased employer understanding of recovery supportive practices. Improved recovery supportive employer policies. Increased number of recovery supportive workplaces.	Staff time Funding as appropriate Curriculum	Security Health Plan Central Wisconsin Partnership for Recovery Center for Community Health Advancement Workplaces

Goal 3: Engage in community efforts related to alcohol and substance use prevention efforts

Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in community based workgroups.	<p>Actively attend and participate in meetings.</p> <p>Promote and participate in events and initiatives.</p>	<p>Increased collaboration across sectors to advance prevention efforts around alcohol misuse and drug use.</p> <p>Increased community awareness related to alcohol and substance use prevention.</p>	<p>Staff time</p> <p>Funding as appropriate</p> <p>Space</p> <p>Materials</p> <p>Supplies</p>	<p>Health People Wood County</p> <p>Northwoods Coalition</p> <p>Marshfield Area Coalition for Youth</p> <p>Central Wisconsin Partnership for Recovery</p>

Health Priority: Behavioral Health

Goal 1: Decrease suicides rates for high risk populations				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Enhance community member's skills to support mental health promotion and suicide prevention.	<p>Identify curriculum/ training.</p> <p>Identify individuals to be trained.</p> <p>Implement curriculum/ training.</p> <p>Evaluate implemented curriculum/ training.</p>	<p>Decreased suicide rates.</p> <p>Increased capacity to support suicide prevention efforts.</p> <p>Increased access of mental health supports to bi/multilingual community members.</p>	<p>Staff time</p> <p>Program materials</p> <p>Funding as appropriate</p> <p>Space</p> <p>Technology</p>	<p>Healthy People Wood County</p> <p>Wood County Health Department</p> <p>Center for Community Health Advancement</p> <p>Schools</p> <p>Community based organizations</p>
Support suicide prevention community awareness events.	<p>Identify partner organizations.</p> <p>Plan event.</p> <p>Create and disseminate materials.</p> <p>Evaluate event.</p>	<p>Increased community awareness of the burden of suicide.</p>	<p>Staff time</p> <p>Program materials</p> <p>Funding as appropriate</p>	<p>Health People Wood County</p> <p>Center for Community Health Advancement</p> <p>Schools</p> <p>Community based organizations</p>
Goal 2: Improve social and emotional development of children and adolescents (YRBS)				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Enhance school capacity to provide high quality social, emotional assessment, support, and learning.	<p>Seek out partner organizations.</p> <p>Develop materials.</p> <p>Educate community groups or organizations.</p>	<p>Improved social and emotional development of children and adolescents.</p>	<p>Staff time</p> <p>Program materials</p> <p>Funding as appropriate</p>	<p>Local Schools</p> <p>Center for Community Health Advancement</p> <p>Security Health Plan</p>

Goal 3: Engage in community efforts related to supporting behavioral health efforts				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in community based workgroups.	<p>Actively attend and participate in meetings.</p> <p>Promote and participate in events and initiatives.</p>	<p>Increased collaboration across sectors to advance community support.</p> <p>Increased community awareness related to behavioral health.</p>	<p>Staff time</p> <p>Funding as appropriate</p> <p>Materials</p> <p>Supplies</p> <p>Space</p> <p>Technology</p>	<p>Healthy People Wood County</p> <p>Wood County Health Department</p> <p>Community-based Organizations</p> <p>Schools</p>

Health Priority: Chronic Disease

Goal 1: Improve access to healthy foods				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Increase community capacity to provide nutritious, locally grown food and address food insecurity.	Identify community partnerships. Maintain garden/unit. Distribute produce.	Improved access to healthy foods.	Staff time Funding as appropriate Equipment Space	Community based organizations
Goal 2: Reduce rates of preventable chronic conditions with focus on obesity and diabetes				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Enhance programming to impact chronic disease self-management and prevention with a focus on obesity and diabetes.	Identify community partners. Track and monitor progress of events. Refer community members to resources.	Improved self-management of chronic conditions. Decrease rates of unmanaged diabetes. Increased knowledge and awareness.	Staff time Program materials Funding as appropriate Space Equipment	Security Health Plan Community based organizations
Goal 3: Engage in community efforts related to chronic disease prevention efforts				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in community based workgroups.	Actively attend and participate in meetings. Promote and participate in events and initiatives.	Increased collaboration across sectors to decrease chronic diseases. Increased community awareness related to chronic disease prevention.	Staff time Program materials Funding as appropriate	Healthy People Wood County Wood County Health Department Community-based Organizations

Health Priority: Social Determinants of Health

Goal 1: Increase knowledge and awareness of health equity				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Conduct an organizational (internal) and community assessment (external) assessment of health disparities and health equity and develop a workplan to address those gaps.	Identify assessment tool. Assess results. Develop workplan.	Increased awareness and understanding of health equity. Improved access to resources.	Staff time Funding as appropriate	Center for Community Health Advancement Community based organizations
Goal 2: Improve health outcomes by connecting clinical practice to community efforts to address Social Determinants of Health barriers				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Support and connect patients and community members to resources to address socially determined needs.	Identify platform. Educate and engage community members. Support pilot of universal screening tool.	Increased awareness of resources. Improved access to resources.	Staff time Funding as appropriate Technology	Center for Community Health Advancement Community-based Organizations Universal Screening Company
Goal 3: Engage in community efforts related to advancing health equity and Social Determinants of Health				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in community based workgroups.	Actively attend and participate in meetings. Promote and participate in events and initiatives.	Increased collaboration across sectors to advance community support. Increased community awareness related to SDOH and Health Equity.	Staff time Program materials Funding as appropriate	Cultural Coalition of Southwood County Wisconsin Public Health Association Community-based Organizations

Next Steps

This implementation strategy outlines a three-year community health improvement process. Each year within this timeframe, MMC-Eau Claire will:

- Create an annual work plan with specific action steps for that year.
- Set and track annual performance indicators for each strategy, evaluate for effectiveness and areas of improvement.
- Track progress.
- Report progress toward the performance indicators to the hospital board.
- Share actions taken to address the needs with the community at large.

Approval and Community Input

This Implementation Strategy Report was adopted by the MCHS Hospitals Board, Inc. on December 13, 2021.

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 or (715) 221-8400.

References

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