



Marshfield Clinic
Health System



Community Health Needs Assessment

Marshfield Medical Center-Eau Claire

2021

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Dear Community Members,

Marshfield Clinic Health System's mission is to enrich lives and create healthy communities through accessible, affordable, compassionate health care. And that includes your community.

We know that health is driven by much more than what happens in the doctor's office. Wherever and whenever possible through programs, services, public policy or other means, emphasis needs to be placed on addressing health choices before medical needs arise.

That's why the MCHS Hospitals Board, Inc., authorized governing body, has adopted this needs assessment on December 13, 2021.

The Health System has collaborated with community partners to assess communities' health and needs. The process has included meetings, surveys, community conversations, key informant interviews and a variety of data sources.

This document summarizes these key findings. Electronic versions and companion documents can be found at: <https://www.marshfieldclinic.org/locations/eau-claire-marshfield-medical-center/community-health-needs>

Through these collaborative efforts, the top health priorities identified through the 2021 Community Health Needs Assessment process have been identified. MCHS will continue to support additional community health needs as they arise. The top health priorities for Marshfield Medical Center-Eau Claire are:

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

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

Yours in health,

Dr. Susan Turney, CEO
Marshfield Clinic Health
System

Bill Priest, CAO
Marshfield Medical Center
Eau Claire

Jay Shrader, Vice President
Community Health and
Wellness

Marshfield Medical Center – Eau Claire, EIN #81-0977948
2116 Craig Road, Eau Claire, Wisconsin 54701

Definition of Terms

- **Community Benefits Workgroup-Eau Claire (CBW-Eau Claire):** local and internal workgroup of Marshfield Medical Center in Eau Claire that contributes to the Health System’s community benefits and community health initiatives. Essential functions are to monitor key policies, including financial assistance, billing and collections, help to develop and sustain community relationships, participate in and develop the Community Health Needs Assessment and Implementation Strategy, and monitor and evaluate implementation of community benefits programs.
- **Community Health Assessment (CHA)/Community Health Needs Assessment (CHNA):** refers to a state, tribal, local or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis (Centers for Disease Control and Prevention, 2019). Health Departments are required to participate in a CHA every five years. Non-profit (tax-exempt) hospitals are required by the Affordable Care Act to conduct a CHNA once every three years. Hospitals have the option to partner with local health departments to simultaneously conduct a CHA/CHNA (Community Catalyst, 2013).
- **Community Health Assessment Planning Partnership Committee:** also referred to as “the CHA partnership”, is a regional collaborative partnership of stakeholders that assess health in Chippewa and Eau Claire Counties. Stakeholders include Eau Claire City – County Health Department, Chippewa County Department of Public Health, United Way of the Greater Chippewa Valley, Chippewa Health Improvement Partnership, Mayo Clinic Health System, Health Sisters Health System Sacred Heart and St. Joseph’s Hospital and Marshfield Clinic Health System-Eau Claire Center.
- **Community Health Improvement Plan (CHIP):** a long-term, systematic effort to address public health problems based on the results of community health assessment activities and the community health improvement process. A CHIP is typically updated every three to five years (Centers for Disease Control and Prevention, 2019).
- **Health Equity:** everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments and health care (University of Wisconsin, Population Health Institute, 2019).

- **Healthy People, Healthiest Wisconsin 2020 State Health Plan:** the public health agenda required by Wisconsin statute every 10 years, which is built upon the work of prior state health plans by identifying priority objectives for improving the health and quality of life in Wisconsin (Division of Public Health, 2019).
- **Health Priority(ies):** Health areas selected to be addressed by the hospital based off of community input collected via: survey, community conversations, focus groups and/or coalition meetings; and secondary data review.
- **Health Need(s):** the 14 health areas based on the Wisconsin Department of Health Services Health Plan, Healthiest Wisconsin 2020. Areas include: mental health, substance use, alcohol misuse, chronic disease prevention and management, obesity, physical activity, injury and violence prevention, healthy nutrition, healthy growth and development, communicable disease prevention and control, tobacco use and exposure, oral health, reproductive and sexual health and environmental and occupational health.
- **Implementation Strategy (IS):** a written plan to address the community health needs identified through an assessment and approved by an authorized governing board. Hospitals must use the CHNA to develop and adopt an implementation strategy (Community Catalyst, 2013).
- **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).
- **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 Way ALICE Project, 2018).
- **University of Wisconsin's Population Health Institute's County Health Rankings and Roadmaps:** a data source ranking nearly every county in the nation to identify the multiple health factors that determine a county's health status and indicate how it can be affected by where we live (University of Wisconsin Population Health Institute, 2019).

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., (MCHS) 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 12,000 employees including over 1,400 providers comprising 90 specialties and subspecialties. Its entities provide service and health care to more than two million residents through over 60 clinical locations and ten hospitals in communities across 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 – Eau Claire (MMC-Eau Claire) is a fully integrated medical campus that provides comprehensive inpatient and outpatient health care to residents in the Chippewa Valley and western Wisconsin.

MMC-Eau Claire offers a wide range of advanced care services including:

- Birth services
- Cancer care services
- Emergency department and urgent care
- General, orthopedic and spine surgery services
- Heart care

- Inpatient and outpatient physical therapy, rehabilitation and occupational therapy
- Medical offices and outpatient care
- Metabolic and bariatric surgery
- Occupational and employee health
- Pulmonary and critical care medicine

Our Community

MMC-Eau Claire strives to provide affordable and accessible health care for all, and focuses on serving the underserved in rural areas. Many patients and community members reside in rural areas of Eau Claire County and neighboring counties. MMC-Eau Claire’s service area is not defined by county borders, but serves those in high need areas with limited resources. MMC-Eau Claire is focused on serving patients outside clinic and hospital walls by addressing social determinant of health needs. However, for the purposes of this Community Health Needs Assessment (CHNA), the community served is defined by Eau Claire County borders.

Geographic Area

Eau Claire County covers 638 square miles located in the Chippewa Valley of west-central Wisconsin at the confluence of the Eau Claire and Chippewa Rivers. The county is comprised of three cities (Altoona, Augusta, and Eau Claire), two villages (Fairchild and Fall Creek) and 13 townships, with a total population of 104,646 (U.S. Census Bureau, 2019); approximately 23% of which is rural.

The city of Eau Claire (county seat) has a total population of 68,802 (U.S. Census Bureau, 2019) and is located approximately 90 miles east of the Twin Cities in Minnesota and 90 miles north of LaCrosse, Wisconsin.

Major industries include health care, social services, retail trade, manufacturing and education. The health care sector alone employs thousands of area residents. Three other hospitals serve Eau Claire County and are located within the city of Eau Claire; they are HSHS Sacred Heart Hospital, Mayo Clinic Health System, and Oakleaf Surgical Hospital.



Table A: Demographics

	County	Wisconsin	United States
Total Population	104,646	5,822,434	328,239,523
Age			
Persons under 5 years	5.5%	5.7%	6%
Persons under 18 years	20.1%	21.8%	22.3%
Persons 65 years and over	16.2%	17.5%	16.5%
Sex			
Female persons	50.5%	50.2%	50.8%
Race			
White alone, not Hispanic or Latino	91.7%	87%	76.3%
Hispanic or Latino	2.7%	7.1%	18.5%
American Indian and Alaska Native alone	0.6%	1.2%	1.3%
Black or African American alone	1.2%	6.7%	13.4%
Asian alone	4.3%	3%	5.9%
Native Hawaiian and other Pacific Islander alone	0.2%	0.1%	0.2%
Two or More Races	2.0%	2.0%	2.8%
Language other than English spoken at home	7.1%	8.7%	21.6%
Education			
High school graduate or higher	94.1%	92.2%	88%
Bachelor's degree or higher	32.3%	30.1%	32.1%
Income			
Median household income, 2015-2019	\$59,476	\$61,747	\$62,843
Persons in poverty	10.6%	10.4%	10.5%

Source: Eau Claire County Demographics, U.S. Census, 2019

Assessing the Needs of the Community

Overview

Community Benefits Workgroup (CBW)-Eau Claire identified and prioritized community health priorities through a comprehensive process that included input from multi-sector community partners and organization leadership. Direct community input was gathered and focused on understanding the priorities of the underserved in the community. The CBW-Eau Claire is committed to addressing health inequities and conducted the Community Health Needs Assessment (CHNA) using a health equity lens and seeks to address “types of unfair health differences closely linked with social, economic or environmental disadvantages that adversely affect a group of people” (Centers for Disease Control and Prevention, 2018).

The MMC-Eau Claire CHNA and community health prioritization process was led by the CBW-Eau Claire. The Chief Administrative Officer (CAO) of MMC-Eau Claire chaired the CBW-Eau Claire, which included hospital leadership. All members are committed to guiding community benefits efforts and improving health in the community of Eau Claire. The CBW-Eau Claire reviewed the Eau Claire County CHA, secondary quantitative data, and conducted community conversations with local stakeholders to develop this report. The CHNA is used to develop an Implementation Strategy (IS) tailored to meet the identified health priorities.

See Appendix A for a list of those involved in the CBW-Eau Claire.

Community Health Needs Assessment (CHNA) Timeline

September 2020	Planning began with the Community Health Assessment Planning Partnership Committee (the CHA Partnership)
December 2020	Distributed the community health survey throughout the community
January 2021	Began compiling secondary local health data
February 2021	Hosted community conversations to determine top health priorities
March 2021	Hosted Coalition meeting to determine top health priorities
May 2021	Completed and publicized the Eau Claire County CHA report
August 2021	Presented the MMC-EC CHNA to the CBW-Eau Claire for review and approval
October 2021	Presented the MMC-EC CHNA to the MMC-Eau Claire Community Advisory Board for approval
December 2021	Completed, approved and publicized the MMC-Eau Claire CHNA

Process and Methods

The assessment process began with a thorough review of the 2021 Eau Claire County CHA which was completed by the CHA Partnership and included MMC-Eau Claire representation. The purpose of the assessment was to identify the health needs of the community, prioritize top health concerns and encourage Eau Claire County residents to engage in improving the health of the community. Both primary and secondary data collection methods were utilized and various efforts were made to connect with several different demographic groups to develop a thorough understanding of health issues facing members of Eau Claire County communities.

A complete list of partner organization representatives who participated in the health assessment process is included as Appendix A. The complete Eau Claire County CHA report is available at <https://www.eauclairewi.gov/home/showpublisheddocument/25104/637558200633100000>

Eau Claire County partners of the CHA Partnership include:

- Eau Claire City-County Health Department
- Eau Claire Healthy Communities
- HSHS Sacred Heart Hospital
- Marshfield Clinic Health System
- Mayo Clinic Health System
- United Way of the Greater Chippewa Valley

All partners contributed personnel and financial resources to the assessment. Representatives from the partnership met bi-monthly, from September 2020 through May 2021, to plan and implement the CHA. Due to COVID-19, all planning and public meetings were held virtually, the first time this process has been conducted almost entirely online. Financial resources contributed were used to fund a part-time program manager who facilitated meetings and coordinated survey distribution, data collection and assessment activities. The shared partnership of the CHA implementation reduces duplication of effort and costs, promotes coordination of resources and results in a potentially more significant impact on the health needs of the community.

The partnership utilized the County Health Rankings and Roadmaps Take Action Cycle (Figure A) to guide the CHA process, which outlines the continuous process needed for community health improvement: assess needs and resources of the county, focus on the top health needs, develop action plans with effective policies and programs and evaluate actions taken.

The CHA Partnership utilized the *Healthiest Wisconsin 2020, Wisconsin Department of Health Services Health Plan* to determine the health needs to evaluate. Due to longstanding concerns about both drug use and alcohol misuse and the recognition that community members may hold different perceptions about these issues, the CHA Partnership decided to separate these areas (versus combining them, as in the state health plan). For similar reasons, the local process also separated out obesity from chronic disease.

Health needs evaluated in the 2021 CHA Process:

- Alcohol Misuse
- Chronic Disease Prevention and Management
- Communicable Disease Prevention and Control
- Drug Use
- Environmental and Occupational Health
- Healthy Growth and Development
- Healthy Nutrition
- Injury and Violence Prevention
- Mental Health
- Obesity
- Oral Health
- Physical Activity
- Reproductive and Sexual Health
- Vaping/Tobacco Use and Exposure

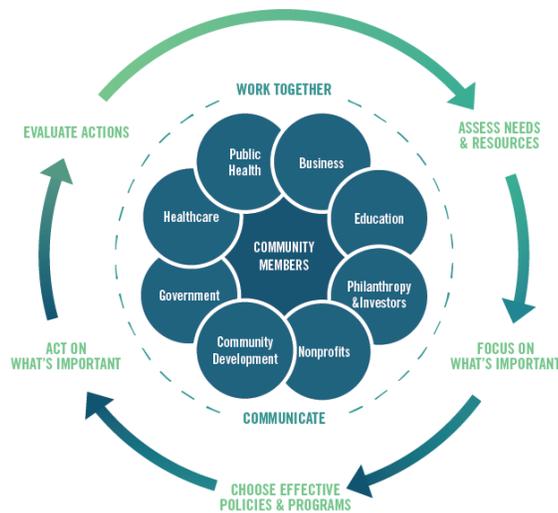


Figure A. County Health Rankings and Roadmaps Take Action Model

Identified Health Priorities Identified by Various Data Collection Methods	
Survey <ul style="list-style-type: none"> • Electronic and Paper • Targeted Outreach 	Mental Health Drug Use Alcohol Misuse
Community Conversations	Mental Health Drug Use Alcohol Misuse
Coalition Meeting	Mental Health Alcohol Misuse Drug Use

Data Sources

The CHNA included primary and secondary data. Primary data included a county-wide survey and community conversations. Secondary data was compiled into a data packet, which included data from various sources.

Primary Data Collection

Community Health Assessment Survey

Primary data collection began with a community health survey in December of 2020. An electronic survey was widely distributed by the CHA Partnership to Eau Claire County residents via partner distribution lists, websites and social media. Ads were purchased through Volume One and Facebook, and flyers distributed through community organizations such as Feed My People Food Bank. The CHA Partnership focused efforts to reach vulnerable populations through groups such as JONAH (Joining Our Neighbors Advancing Hope), El Centro and the Eau Claire Area Hmong Mutual Assistance Association; and distributed paper surveys through the Aging and Disability Resource Center (via Meals on Wheels) and Eau Claire County Jail. A press

release to local media outlets also accompanied release of the survey. Precautions around the COVID-19 pandemic prevented more targeted, in-person outreach efforts and required heavy reliance on virtual communication. This posed a significant obstacle to more comprehensive community outreach and survey completion.

Several versions of the survey were developed, including full-length, online versions in both English and Spanish and both full-length and shortened, paper versions in English and Spanish. Descriptions of the health needs were simplified per the recommendations of Wisconsin Health Literacy to aid in reading comprehension.

Appendix B provides the shortened English version of the survey.

The survey asked residents about their perceptions of the degree to which each health need poses a problem in their community and the reasons why they considered these areas to be problematic. Respondents also were given an opportunity to provide additional comments about each health need. Finally, the survey asked respondents to identify the top three health needs they thought were in need of improvement.

While the survey mirrored past versions, two questions were added to inquire about social determinants of health, or social and economic factors that influence health outcomes. Individuals were asked about county strengths that support community health and factors that contribute to community health concerns. Eau Claire County residents indicated parks, health care and education as the greatest community strengths and cited the availability of resources to meet daily needs, socioeconomic conditions, poverty and access to health care as the greatest concerns.

A total of 976 Eau Claire County residents completed the survey, slightly more than half of the number from 2018.

The survey also asked several optional demographic questions to identify basic characteristics of respondents. Approximately 75% of respondents chose to answer these questions. Fifty-nine percent of respondents fell between the ages of 30-59, 74.2% identify as “female” and 1.2% as “other”. Figure B highlights the racial distribution of survey respondents. Respondents were able to select multiple selections, Figure C highlights household income.

Thirty-six percent of respondents hold a bachelor’s degree, 28% hold a graduate/professional degree. Sixty percent of respondents came from one- or two-person households and nearly two-thirds reported no children under 18 in the household.

Figure B. Racial Distribution of Survey Respondents*

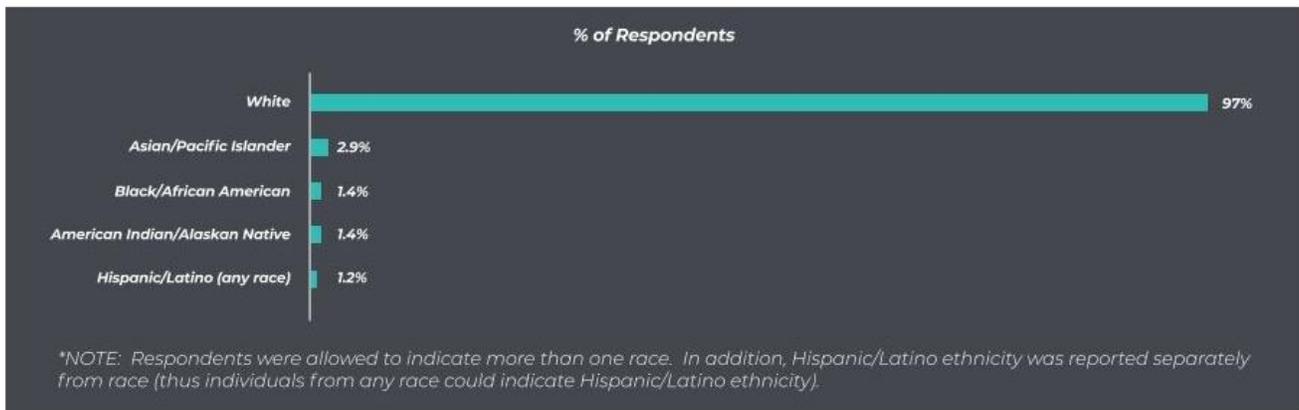
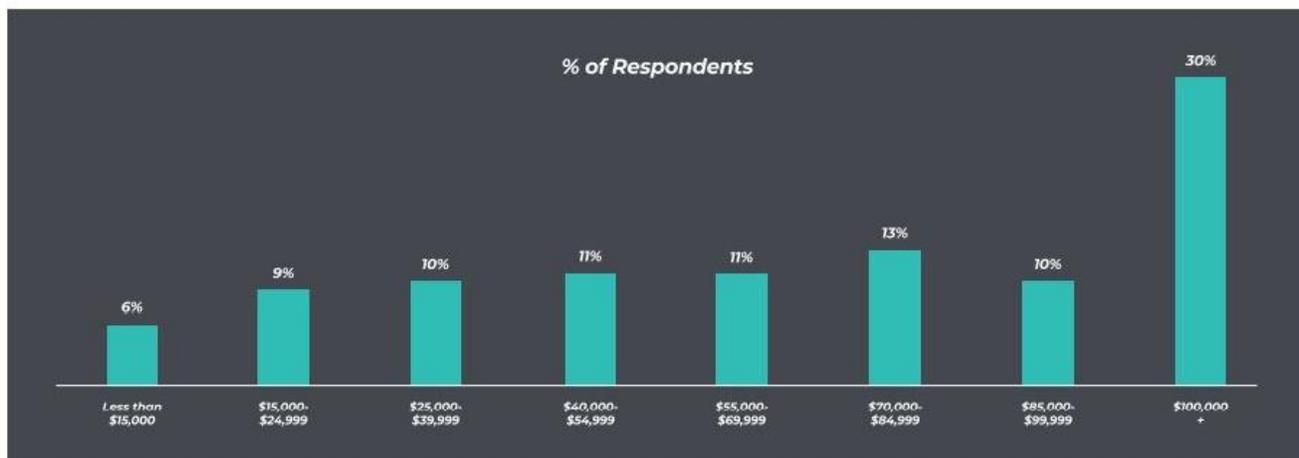


Figure C. Household Income of Survey Respondents



The survey results identified the following health needs as “major” areas of concern: **mental health, drug use and alcohol misuse.**

Appendix C provides the link to the full Eau Claire County CHA results and report.

Community Presentations and Conversations

Due to the limitations of the COVID-19 pandemic, three virtual community conversation sessions were held in February 2021. Sessions were held at different times – morning, afternoon and evening – over the course of two days (Feb. 9 and 10) to provide multiple opportunities for participation. These sessions were publicized widely through e-mail, websites, social media, and other means.

Overall, 44 Eau Claire County residents from diverse populations participated. The groups were presented with primary and secondary data points and were asked to prioritize the same fourteen health needs initially presented in the community survey.

The sessions began with a presentation of local data including survey results, and participants were asked to discuss the survey results and secondary data in small, virtual breakout rooms. Participants were able to develop a clearer picture of the health needs of the community, which subsequently helped the groups choose the top three health needs.

The community conversations identified the following health needs: **mental health, drug use, and alcohol misuse.**

Coalition Meeting

A final event, a coalition meeting, was held in March 2021 to get feedback on the preliminary CHA results. More than a dozen members participated in the Eau Claire Healthy Communities Council meeting, which represented a broad cross-section of community members and organizations with varying health interests and expertise. Utilizing the Prioritization Criteria questions (Table B), Council members participated in virtual small group discussions to refine the health needs.

The coalition meeting identified the following health needs: **mental health, alcohol misuse, drug use and chronic disease.**

Table B. Prioritization Criteria

1. Which health priorities have the largest community impact?	Consider which priorities have a high number of people affected, which priorities affect certain groups more than others and how big the problem is in our community.
2. Which health priorities have the most serious impact?	Which priorities result in disability, death, have long term-effects or need action right now? Is the problem getting worse? Will the problem get worse if no action is taken?
3. Which priorities are our community ready to change?	Will the community accept new or added programs? Are new programs wanted in certain areas? Is change on a local level reasonable?

Secondary Data Collection

Secondary quantitative health data was compiled from a variety of sources. Most indicators followed the recommendations of the Wisconsin Association of Local Health Departments and Boards, however the core set of measures was modified based on data availability and comparability. Sources included the 2020 County Health Rankings and Roadmaps, Behavioral Risk Factor Surveillance System, Youth Risk Behavior Surveillance System, Wisconsin Department of Health Services and other public resources.

A full list of data sources and references is included in Appendix D.

The information collected through this process provided an objective manner in which to measure overall county health in each of the health needs. This data, in combination with the survey results formed the basis for discussion during the community conversations. Comparisons between county and national data also were factored into the final health area prioritization.

Prioritization Process

The prioritization process of the health needs is summarized below.

Step 1: Community Conversations in February 2021

During these community conversations, participants went through a facilitated prioritization process where they were able to identify health needs based on primary and secondary data and local expertise. Each participant was asked to select their “top three health needs”.

Step 2: Coalition Meeting in March 2021

Eau Claire Healthy Community Council members reviewed the Community Health Survey results and insights from the community conversations. 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)

Step 3: CBW-Eau Claire Meeting in August 2021

The CBW-Eau Claire discussed the results of the Eau Claire County prioritization processes. Additional consideration of alignment with the ABCS Community Health Focus Areas of Marshfield Clinic Health System were made.

Step 4: MMC-Eau Claire Community Advisory Board (CAB) Meeting in October 2021

The MMC-Eau Claire CAB was presented with an overview of the CHNA process, results and selected health priorities for approval.

Addressing the Needs of the Community

Overview

After extensive review of the Eau Claire County CHA, United Way data, Healthiest Wisconsin 2020, County Health Rankings and other quantitative and qualitative data, the top community health priorities identified by Marshfield Medical Center in Eau Claire are:

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

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. Due to the interconnected nature of these health priorities, the CBW-Eau Claire chose to combine a number of health priorities as shown in Table C.

Table C. Health Priority Crosswalk

Healthy People, Healthiest Wisconsin 2020 Focus Areas	MMC-EC CHNA
Alcohol Misuse	Alcohol and Substance Abuse
Drug Use	
Mental Health	Behavioral Health
Obesity	Chronic Disease
Healthy Nutrition	

Health Priority: Alcohol and Substance Abuse

Alcohol misuse and drug use was identified as a top health priority in the Eau Claire County CHA. “Alcohol misuse is a pattern of drinking that result in harm to one’s health, interpersonal relationships, or ability to work” (Centers for Disease Control and Prevention, 2019). Substance abuse is “the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs” (i.e. marijuana, heroin, cocaine, and methamphetamine) (World Health Organization, 2019).

Consequences of alcohol and/or substance abuse is far reaching and includes motor vehicle and other injuries, fetal alcohol spectrum disorder and other childhood disorders, alcohol and/or drug dependence, liver, brain, heart, and other chronic diseases, infections, family problems, and both violent and nonviolent crimes.

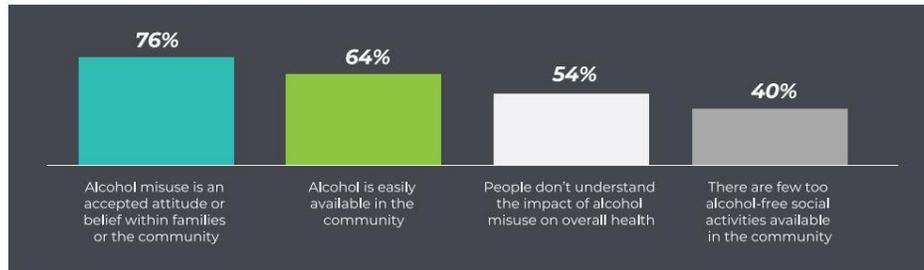
MMC-EC will complement local community efforts by focusing on the reduction of underage alcohol consumption and access, excessive alcohol consumption and reducing drug use, in addition to supporting community driven efforts through a variety of methods.

Data highlights

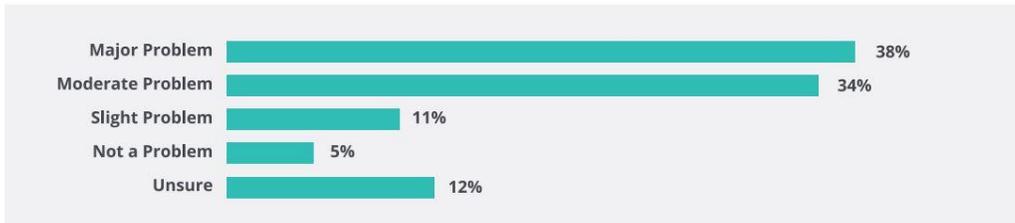
In 2018, the estimated cost of binge drinking in Wisconsin was \$3.9 billion, with \$80.4 million in Eau Claire County, of which “the greatest impact is felt by productivity losses. Productivity losses contribute to 66% of the total cost which is an estimated \$2.6 billion” (The Burden of Binge Drinking, 2019).

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

Why is Alcohol Misuse a problem in our county?



How serious is this health area in Eau Claire County?

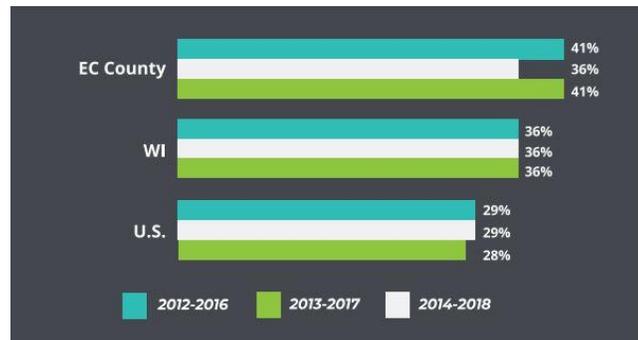


Percent of High School Students Drinking Alcohol in the Past 30 Days⁵

25% Eau Claire County
30% Wisconsin
29% United States
6.3% Healthy People 2030 target (for ages 12-17)

⁵Youth Risk Behavior Surveillance System (2019)

Percent of Motor Vehicle Deaths Involving Alcohol¹

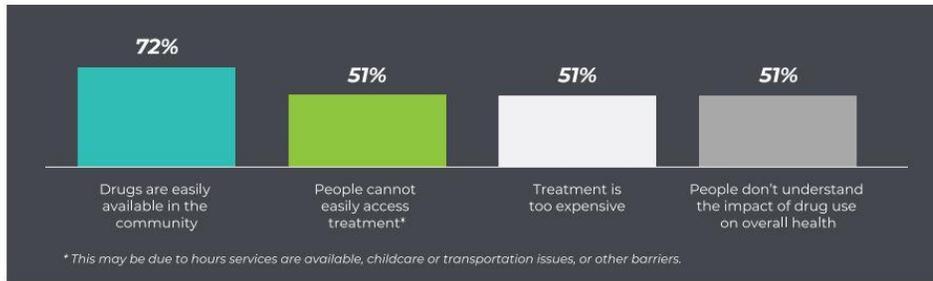


¹County Health Rankings (Fatality Analysis Reporting System)

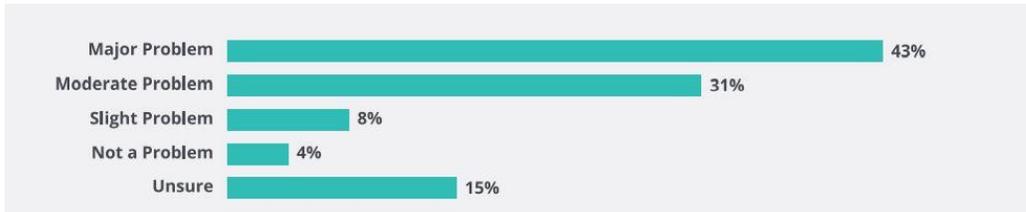
In 2019, the Eau Claire County rate of opioid-related hospitalizations per 100,000 people was 289.7, compared to 353.4 in Wisconsin. The rate of drug overdose deaths was 14.4 per 100,000 in Eau Claire County compared to 20.4 (per 100,000 people) in Wisconsin (Wisconsin Interactive Statistics on Health, 2019).

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

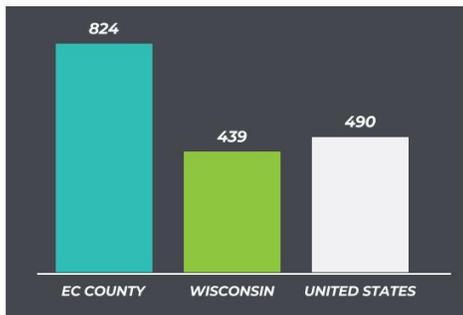
Why is Drug Use a problem in our county?



How serious is this health area in Eau Claire County?

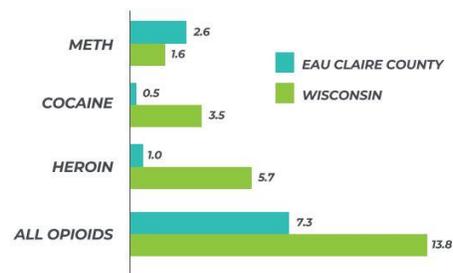


Drug Arrests per 100,000 People¹



¹2016 Wisconsin Epidemiological Profile on Alcohol and Other Drug Use (2014)

Rate of Drug Overdose Deaths per 100,000 People²



²WI Department of Health Services (Substance Use: Drug Overdose Deaths Dashboard, 2014-2019)

Health Priority: Behavioral Health

Mental Health was indicated as a top health priority in the Eau Claire County CHA. Mental health is “an important part of overall health and well-being. Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel and act. It also helps determine how we handle stress, relate to others and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood” (Centers for Disease Control and Prevention, 2019).

Mental illness affects all ages and influences many areas of one’s well-being. Mental health plays a role in the ability to maintain good physical health, while mental health issues are commonly associated with physical health issues and increased risk factors like substance abuse and obesity.

MMC-Eau Claire will complement local community efforts by focusing on decreasing suicide rates and improving social and emotional development of

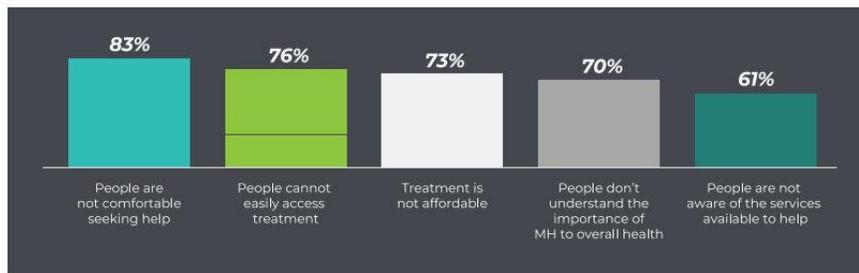
children and adolescents, in addition to supporting community driven efforts through a variety of methods.

Data highlights

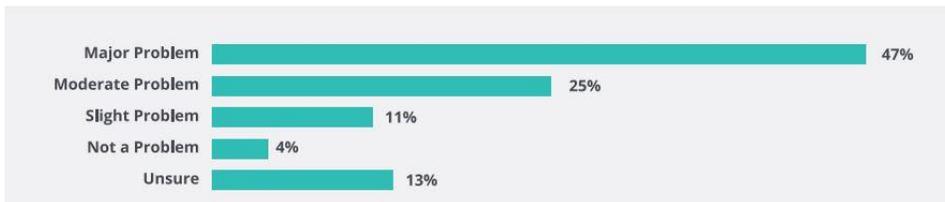
According to Wisconsin Interactive Statistics on Health (WISH), the state’s suicide rate has increased by 28% between the years 2000-2019, with a 25% increase among males and 37% increase among females. Rates of suicide were highest among American Indians/Alaskan Natives and White individuals, and highest among females ages 45-54 and males ages 75 and older, from 2015-2019 (Prevent Suicide Wisconsin, Suicide and Self-Harm Data Report, 2021).

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

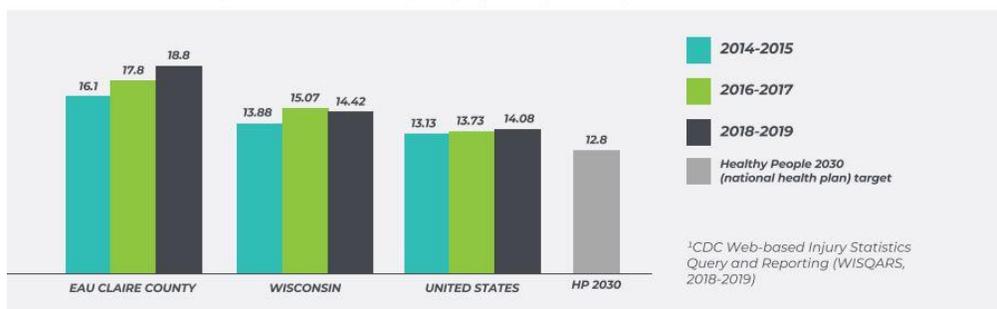
Why is Mental Health a problem in our county?



How serious is this health area in Eau Claire County?



Suicide Rate per 100,000 People (age-adjusted)¹



Self-inflicted Injury Hospitalizations per 100,000 People²



²County Health Rankings (Wisconsin Interactive Statistics on Health)

Average Number of Mentally Unhealthy Days Reported in the Past 30 Days (age-adjusted)³



³County Health Rankings (Behavioral Risk Factor Surveillance System)

The Ratio of Population to Mental Health Providers⁴ in Eau Claire County is below that of both the state and nation. A lower ratio generally indicates greater service availability.

320 to 1 Eau Claire County
490 to 1 Wisconsin
400 to 1 United States

⁴2020 County Health Rankings (CMS, National Provider Identification file, 2019)

Percent of High School Students Who Attempted Suicide in the Past 12 Months⁵



⁵Youth Risk Behavior Surveillance System (2019)

Health Priority: Chronic Disease

Healthy nutrition and obesity prevention was an indicated health priority in the Eau Claire County CHA. Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both (Centers for Disease Control and Prevention, 2019). Obesity results from a variety of factors, including individual behavior and genetics. Behaviors can include diet, physical activity levels, or medications. Additional contributing factors in our society include the food and physical activity environment, education and skills, and food marketing and promotion (Centers for Disease Control and Prevention, 2019).

“Chronic disease prevention and management aims to reduce overall risk in high-risk individuals and provide appropriate care by facilitating early case finding through affordable strategies and technologies, equitable and good quality health care for major chronic diseases.” (World Health Organization, 2019)

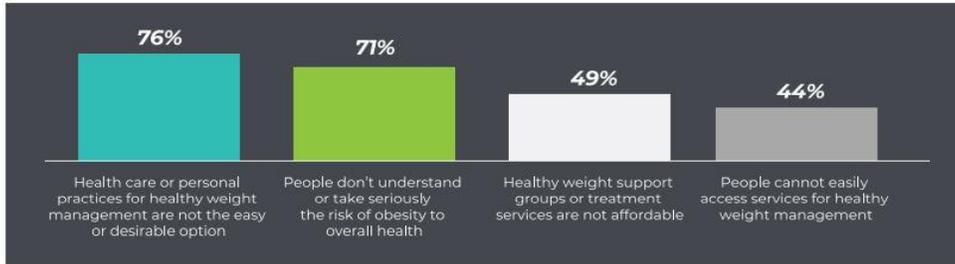
MMC-Eau Claire will complement local community efforts by focusing efforts to improve access to healthy foods and improving self-management of chronic conditions, in addition to supporting community driven efforts through a variety of methods.

Data highlights

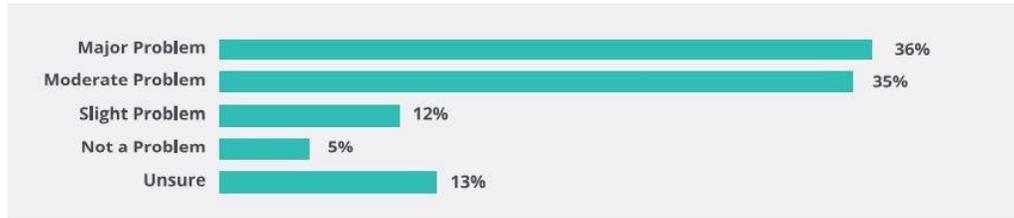
Seven out of ten leading causes of death in Wisconsin are due to chronic diseases and account for two out of every three deaths annually. According to the 2021 County Health Rankings, 10% of Eau Claire county residents ages 20 and above have been diagnosed with diabetes and 9% are considered food insecure.

WHAT PEOPLE SAID ON THE COMMUNITY HEALTH SURVEY

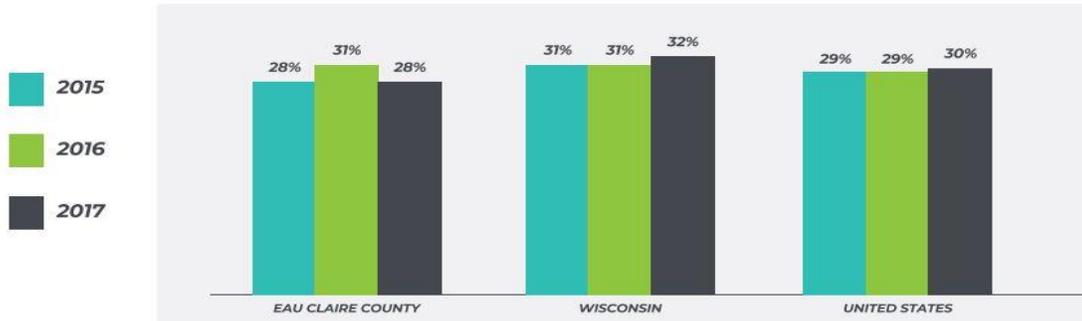
Why is Obesity a problem in our county?



How serious is this health area in Eau Claire County?



Percent of Adults (Age 20+) with BMI > 30 (Obese)¹



¹County Health Rankings (CDC Diabetes Interactive Atlas)

Percent of Children Ages 2-5 Enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Considered Obese²



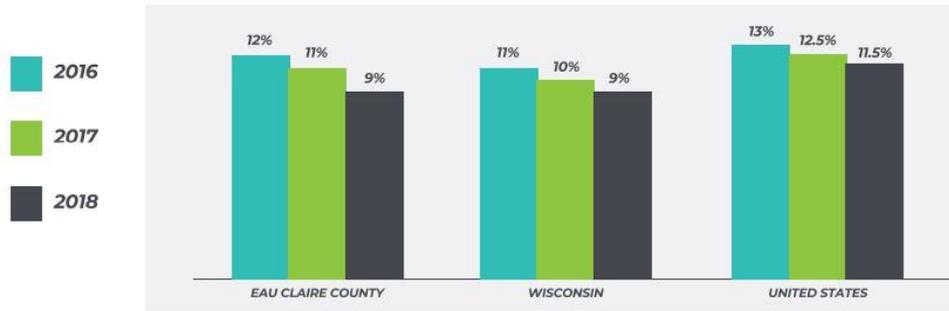
²Eau Claire City-County Health Department (2019), Wisconsin Department of Health Services/Division of Public Health (2019), CDC/Division of Nutrition, Physical Activity, and Obesity (2018)

Percent of High School Students Who Are Overweight or Obese (BMI is ≥85 percentile based on CDC growth chart)⁴

29.1% Wisconsin
31.6% United States

⁴Youth Risk Behavior Surveillance Survey (2019)

Percent of Population Lacking Adequate Access to Food (i.e., food insecure)²



²County Health Rankings (Map the Meal Gap)

Health Priority: Social Determinants of Health

Social determinants of health are “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” (Healthy People 2030, 2021). It is critical to address social determinants of health in order to improve health and reduce health inequities as 80% of what impacts our health is affected by these areas.

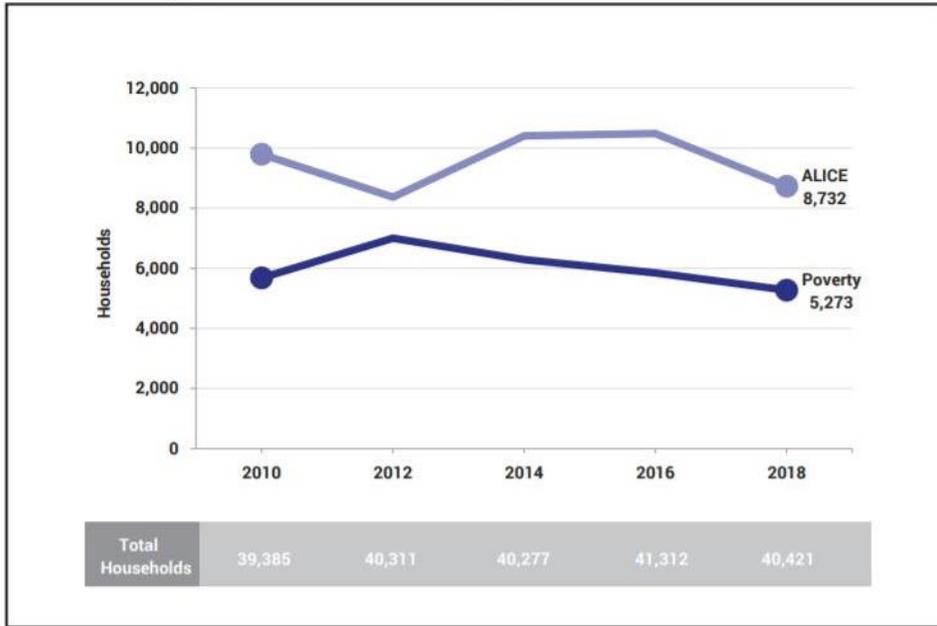
MMC-Eau Claire will focus on supporting access to basic needs, develop a work plan to address health equity gaps, both internally and within the community, and support partners in their work to address social determinants of health.

Data highlights

The 2020 United Way ALICE (Asset Limited, Income Constrained, Employed) report states that the unemployment rate in Eau Claire County is 3.9%, compared to the state average at 3.2%. The ALICE Threshold is defined as “households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county”. Living at or below the ALICE Threshold creates barriers to accessing basic needs such as housing, child care, food, transportation, health care, and a basic smartphone plan. From 2010 to 2018 conditions improved for some households but many continued to struggle (United Way 2020 ALICE Report, Point-in-time Data, 2021).

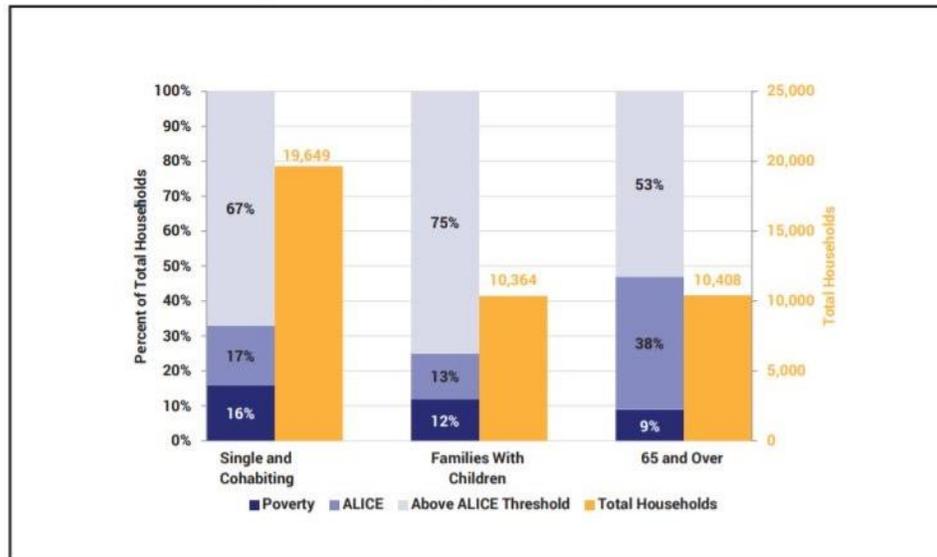
According to County Health Rankings, 34% of Eau Claire county children that are enrolled in public schools are eligible for free school lunch compared to the state at 37%. Thirteen percent of children under the age of 18 in Eau Claire County live in poverty compared to the state at 14%. In both the state and Eau Claire County, 6% of the population under the age of 65 have no health insurance coverage. From 2015-2019, the rate of owner-occupied housing in Eau Claire county was 64.5%, compared to the state rate of 67% (U.S. Census QuickFacts, 2021).

ALICE and Poverty Households Compared by Income



Sources: ALICE Threshold, 2010-2018; American Community Survey, 2010-2018

Household Income by Household Type



Sources: ALICE Threshold, 2018; American Community Survey, 2018

Health Needs Not Addressed

Through the assessment process, the CBW-Eau Claire determined that the Health Priorities being addressed through the MMC-Eau Claire CHNA align with those of the Eau Claire CHA. Therefore, all health needs will be addressed by MMC-EC.

Potential Resources to Address Health Priorities

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:

- Aging and Resource Disability Center of Eau Claire
- Alliance for Substance Abuse Prevention
- Eau Claire City County Health Department
- Eau Claire County Health and Human Services
- Eau Claire Healthy Communities Coalition:
 - Chronic Disease Prevention Action Team
 - Healthy Relationship Promotion Action Team
 - High-Risk Drinking Prevention Action Team
 - Mental Health Action Team
- HSHS Sacred Heart Hospital
- Marshfield Clinic Health System
- Mayo Clinic Health System
- Mental Health Matters Coalition
 - Team Education and Awareness
 - Team Mindfulness
- United Way of the Greater Chippewa Valley

Next Steps

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-Eau Claire 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.

Over the next months, the CBW-Eau Claire, a local and internal workgroup that contributes to the Health System's community benefits and community health initiatives, will develop a three-year implementation strategy plan that will integrate these health priorities into the strategic plan for resource investments and allocations. The CBW-Eau Claire will implement strategies that systematically focus on the social determinants of health, subsequently reducing health disparities and that demonstrate potential to have the most impact on improving selected health priorities.

CBW-Eau Claire will evaluate implemented programs and activities and track key performance indicators during each year of the implementation plan. This

analysis will be done in collaboration with respective partners with the intent 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.

Approval and Community Input

This Community Health Needs Assessment (CHNA) 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.

Evaluation of the Impact of the Preceding Implementation Strategy

Health priorities identified in the preceding CHNA completed in 2018 were:

- Alcohol and Substance Abuse
- Behavioral Health
- Chronic Disease

Health Priority: Alcohol and Substance Abuse

Activity	Summary of Actions Since 2018 CHNA
Engage in Alcohol and Other Drug Abuse (AODA) Prevention Workgroups	<p>Actively attended and participated in meetings.</p> <ul style="list-style-type: none"> • Alliance for Substance Abuse Prevention (ASAP) coalition • Healthy Communities - High Risk Drinking Prevention Action Team (HRDPAT) <p>Promoted and participated in events and initiatives.</p>
Support Implementation of an Alcohol and Other Drug Abuse (AODA) Prevention Curriculum	<p>Partnered with local organizations to support the implementation of an AODA prevention curriculum.</p> <ul style="list-style-type: none"> • Eau Claire City-County Health Department • Alliance for Substance Abuse Prevention Coalition • Eau Claire Area School District <p>Determined Botvin Lifeskills elementary curriculum will be implemented.</p> <p>Convened group to plan implementation and achieve district approval.</p>
Support Local Policy Related to Underage Drinking Prevention	<p>Convened group to determine interest and direction.</p> <p>Partners involved:</p> <ul style="list-style-type: none"> • Eau Claire City-County Health Department • Alliance for Substance Abuse Prevention • Eau Claire Healthy Communities - High Risk Drinking Prevention Action Team • University of Wisconsin-Eau Claire • Eau Claire Police Department • Altoona Police Department <p>Place of Last Drink (POLD) selected for implementation and expansion.</p> <p>Altoona Police Department began taking steps to implement.</p>

Health Priority: Behavioral Health

Activity	Summary of Actions Since 2018 CHNA
Engage in Mental Health Community Workgroups	<p>Actively attended and participated in meetings.</p> <ul style="list-style-type: none"> • Mental Health Matters Coalition • Healthy Communities – Mental Health Action Team • United Way of the Greater Chippewa Valley – Health Advisory Council <p>Promoted and participated in events and initiatives.</p>
Provide Community Training Related to Mental Health and Suicide Prevention	<p>Partnered with the Eau Claire City-County Health Department to provide QPR (Question, Persuade, Refer) Training of Trainers to school personnel.</p> <p>Training held 8/20/2019</p> <p>29 individuals trained</p> <p>Provided \$1,500 in funding in addition to training room space and staff support.</p>
Support Community Educational Event Related to Mental Health and/or Suicide Prevention	<p>Coordinated and provided three community awareness events and trainings utilizing “The Ripple Effect”, an award winning documentary.</p> <p>Events occurred on: 8/20/2019, 9/12/2019, and 12/4/2019</p> <p>258 individuals participated</p>

Health Priority: Chronic Disease

Activity	Summary of Actions Since 2018 CHNA
Engage in Chronic Disease Prevention Community Workgroups	<p>Actively attended and participated in meetings.</p> <ul style="list-style-type: none"> • Healthy Communities – Chronic Disease Prevention • United Way of the Greater Chippewa Valley – Health Advisory Council <p>Promoted and participated in events and initiatives.</p>
Address Food Insecurity and Chronic Disease- Food Pharmacy	<p>Convened community partners to create and implement a Food Pharmacy pilot program</p> <ul style="list-style-type: none"> • Addresses food insecurity • Seeks to manage Diabetes and other chronic conditions <p>Partners involved:</p> <ul style="list-style-type: none"> • Feed My People Food Bank • Second Harvest Heartland • Kwik Trip • Security Health Plan <p>Developed program</p> <p>Launched program in October 2020</p> <p>Enrolled 46 individuals</p>
Community Based Education Regarding Tobacco Control	<p>Supported the E-Cigarette Prevention Forum on 5/29/2019.</p> <p>Attendees included Healthcare Professionals, Human Services, Law Enforcement, Public Health and Prevention Professionals, School Administration and people who work with youth.</p> <p>Provided \$4,000 in stipends for prevention and awareness efforts.</p>
Implement a Community Initiative to Support Care Delivery of Chronic Disease Prevention	<p>MMC-EC supported the delivery of Living Well with Chronic Conditions, a six week evidence-based classes, to community members to address chronic diseases.</p> <p>Collaborative Partners</p> <ul style="list-style-type: none"> • ADRC of Eau Claire • Wisconsin Institute on Healthy Aging • Security Health Plan <p>Held weekly from April 15-May 20, 2019.</p> <p>7 Individuals participated</p>

Appendix A: Individuals Involved in the CHNA

2021 Eau Claire County Community Health Assessment Planning Partnership Committee

- Laura Baalrud, Outreach Facilitator, HSHS Sacred Heart Hospital and St. Joseph's Hospital; Director of Chippewa Health Improvement Partnership
- JoAnna Bernklau, Community Benefits Coordinator, Marshfield Clinic Health System
- Sara Carstens, Director of Community Engagement and Wellness, Mayo Clinic Health System
- Cortney Draxler, Policy and Systems Division Manager, Eau Claire City-County Health Department
- Melissa Ives, Community Health Assessment Project Manager, Report Author
- David Lally, Director of Community Benefits and Advocacy, Hospital Sisters Health System
- Allie Machtan, Previous Director of Community Health, Marshfield Clinic Health System
- Komi Modji, Epidemiologist, Chippewa County Department of Public Health
- Andy Neborak, Executive Director, United Way of the Greater Chippewa Valley
- Maria Seibel, Community Engagement and Wellness Specialist, Mayo Clinic Health System

Community Benefits Workgroup–Eau Claire

- Bill Priest, Chief Administrative Officer, MMC Eau Claire
- Dr. Humayun Khan, Vice President of Medical Affairs, MMC Eau Claire
- Pamela Jochimsen, Regional Chief Nursing Officer (West Region)
- Miriam Gehler, Administrative Director – Regional Operations
- Boyd Miller, Director of Finance/Market Chief Financial Officer (West Region)
- Jay Shrader, Vice President, Community Health, Wellness, and Health Equity, Marshfield Clinic Health System
- JoAnna Bernklau, Community Benefits Coordinator, MMC-Eau Claire

Appendix B: Community Health Survey

Community Health Survey for Chippewa and Eau Claire Counties

This survey is being conducted to better understand the health issues in Chippewa and Eau Claire counties and how to address them.

Participation in this survey is voluntary. Your answers will be anonymous, confidential, and combined with those of all other survey respondents. The results will be shared with community members who are interested in improving the health of our community. Estimated time to complete this survey is 5-10 minutes.

The questions in this survey are based on the Health Areas of the Wisconsin State Health Plan. For each health area, please indicate whether you feel the area is a problem in the Chippewa and Eau Claire County community and share your ideas about services and programs that would help improve community health.

Please note that this survey is intended to be completed by residents of Chippewa and Eau Claire counties only. The deadline for submission is **January 10, 2021. Completed surveys may be put in an envelope marked "Attention to PH" and placed in the drop box outside Door 5 of the Chippewa County Courthouse, dropped off at the Eau Claire City-County Health Department, or mailed to the Eau Claire City-County Health Department at 720 2nd Ave., Eau Claire, WI 54703.**

1. Do you live within Chippewa or Eau Claire County?

- Yes-Chippewa County
- Yes-Eau Claire County
- No

2. For each health area listed below, please indicate if you feel it is a problem in your community (Chippewa or Eau Claire County).

	Not a problem	Slight problem	Moderate problem	Major problem	Unsure
Healthy Nutrition	<input type="checkbox"/>				
Alcohol Misuse	<input type="checkbox"/>				
Vaping/Tobacco Use and Exposure	<input type="checkbox"/>				
Substance Use	<input type="checkbox"/>				
Chronic Disease Prevention and Management	<input type="checkbox"/>				
Communicable Disease Prevention and Control	<input type="checkbox"/>				
Environmental and Occupational Health	<input type="checkbox"/>				
Healthy Growth and Development	<input type="checkbox"/>				
Injury and Violence Prevention	<input type="checkbox"/>				
Mental Health	<input type="checkbox"/>				
Oral Health	<input type="checkbox"/>				
Physical Activity	<input type="checkbox"/>				
Reproductive and Sexual Health	<input type="checkbox"/>				
Obesity	<input type="checkbox"/>				

Community Health Survey for Chippewa and Eau Claire Counties

Choose 3 areas from the list on Page 1 that you think are the biggest problem in your community and please comment on why.

Health Area 1: _____ is a problem in your community because...

Health Area 2: _____ is a problem in your community because...

Health Area 3: _____ is a problem in your community because...

What are the greatest strengths in your county in relation to community health?
(Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Education | <input type="checkbox"/> Community Safety |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Public Transportation |
| <input type="checkbox"/> Medical Care | <input type="checkbox"/> Community Connectedness |
| <input type="checkbox"/> Healthy Eating Options | <input type="checkbox"/> Substance Abuse Treatment Access |
| <input type="checkbox"/> Parks | <input type="checkbox"/> Mental Health Treatment Access |
| <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Other (Please specify): |

Community Health Survey for Chippewa and Eau Claire Counties

We know that many important issues in other areas of our lives also impact our health. Which of the factors below contribute most to your top community health concerns?

- Availability of resources to meet daily needs (e.g., safe housing and local food markets)
- Access to mass media and emerging technologies (e.g., cell phones, Internet, and social media)
- Resources provided for multiple languages and literacy levels
- Socioeconomic conditions (e.g., concentrated poverty and stressful conditions that accompany it)
- Racism and discrimination
- Social support
- Transportation options
- Public safety
- Opportunities for recreation and leisure
- Access to educational, economic, and job opportunities
- Access to health care services
- Quality of education and job training
- Other (Please specify):

Age: _____ years

Gender: _____

Race (Choose all that apply):

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black/African American
- White

Ethnicity:

- Hispanic origin
- Not of Hispanic origin

Thank you for completing this survey!

Completed surveys may be put in an envelope marked "Attention to PH" and placed in the drop box outside Door 5 of the Chippewa County Courthouse, dropped off at the Eau Claire City-County Health Department, or mailed to the Eau Claire City-County Health Department at 720 2nd Ave., Eau Claire, WI 54703.

Appendix C: Community Health Survey Results

2021 Eau Claire County Community Health Assessment, Produced by the
Community Health Assessment Planning Partnership Committee.
Cover Image by Think Eau Claire.

<https://www.eauclairewi.gov/home/showpublisheddocument/25104/637558200633100000>

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