



Marshfield Clinic
Health System



Community Health Implementation Strategy

Marshfield Medical Center-Neillsville

2019-2022



Table of Contents

Page

Executive Summary.....	2
Overview of Community Health Needs Assessment.....	3
Implementation Strategy.....	5
Next Steps.....	13
Approval.....	13
Community Input.....	13
References.....	15

Executive Summary

Health System Overview

Marshfield Clinic was founded in 1916 by six physicians practicing in Marshfield, a rural, central Wisconsin city.

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, and compassionate health care.

The Health System includes Marshfield Clinics; Marshfield Medical Center hospitals in Marshfield including Marshfield Children's Hospital, Eau Claire, Rice Lake, Neillsville, Ladysmith, Minocqua, Beaver Dam, as well as a joint venture with Flambeau Hospital in Park Falls; Marshfield Clinic Research Institute; Security Health Plan of Wisconsin, Inc. (SHP); and Marshfield Clinic Health System Foundation.

Hospital Overview

Marshfield Medical Center-Neillsville (MMC-Neillsville) is a 25-bed, full-service, critical access hospital located in Neillsville, Wisconsin. MMC-Neillsville, previously Memorial Medical Center, was acquired by Marshfield Clinic Health System in November 2018.

MMC-Neillsville, offers a wide range of advanced care services including:

- Full scope of general and orthopedic surgery services
- 24/7 emergency department
- Inpatient and outpatient physical therapy, rehabilitation and occupational therapy
- Swing bed Program
- Cardiac Rehab
- Diabetic Education

Implementation Strategy Overview

This Implementation Strategy is specific to MMC-Neillsville and addresses the community health priorities identified through a collaborative Community Health Needs Assessment (CHNA) process. This document outlines the plans for MMC-Neillsville to support specific community improvement efforts as part of a larger community-wide plan.

This plan was reviewed and approved by the authorized governing body, MCHS Hospitals Board, Inc. on September 4, 2019, 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 2019-2022 CHNA for MMC-Neillsville.

Overview of Community Health Needs Assessment

The MMC-Neillsville CHNA was conducted in collaboration with Healthy Clark County, A collaborative partnership of stakeholders who lead the Clark County community health improvement process.

The MMC-Neillsville CHNA written report included a description of the community health needs assessment process, established the community health priorities, and described the following:

- 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 acquired 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 CHNA Report

The written CHNA report was completed August 2019, presented to the MCHS Hospitals Board, Inc. for discussion and approved on September 4, 2019. The full CHNA report, which details the entire assessment and prioritization process, can be found on the [Marshfield Medical Center-Neillsville website](#).

Prioritization Process

After completing an extensive analysis of the primary and secondary data, the National Association of County and City Health Officials

(NACCHO) Prioritization Matrix was used to determine the health priorities, which included the following criteria:

- 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

The health priorities identified by the Clark County Community Health Assessment (CHA) were:

- Alcohol and Substance Abuse
- Behavioral Health
- Chronic Disease

Significant Health Needs Not Being Addressed By MMC

MMC-Neillsville plans to address all health priorities identified in the CHA. As these health priorities are addressed, health equity and social determinants of health needs will be incorporated throughout various initiatives.

Implementation Strategy

The Implementation Strategy is part of a community effort to address identified health priorities. Strategies will be implemented collaboratively with internal and community partners.

Health Priority 1: Alcohol and Substance Abuse

Goal 1.1: Reduce underage and excessive alcohol consumption

Goal 1.2: Reduce tobacco use

Long-term Indicator	County	State	Nation	Healthy People 2020 Target
Percent of adults aged 18 years who over reported excessive drinking	24% ¹	26% ¹	18% ²	25.4% ³
Percent of high school students who had at least 1 drink of alcohol in the past 30 days	31% ⁴	30% ⁴	30% ⁵	29% ¹³
Percent of high school student who have used electronic vapor product during the past 30 days	24% ⁴	12% ⁴	13% ⁵	/

STRATEGY 1.1: SUPPORT IMPLEMENTATION OF AN ALCOHOL AND OTHER DRUG ABUSE (AODA) PREVENTION CURRICULUM

Objective 1.1.1: By December 2022, MMC-Neillsville will support the implementation of an AODA prevention curriculum to reduce underage alcohol consumption and/or prevent substance use and abuse.

Key Actions

- Help determine school partners to implement
- Help create and compile program materials
- Help develop schedule for implementation

Potential Collaborative Partners

- School Districts
- Local AODA prevention coalition

Resources

- Staff time
- Program materials and supplies
- Funding as appropriate to address community health priority

Target Population

- Youth

STRATEGY 1.2: SUPPORT COMMUNITY COLLABORATIVE APPROACH TO CREATE AWARENESS OF ELECTRONIC NICOTINE DELIVERY SYSTEMS (ENDS) USE

Objective 1.2.1: By December 2022, MMC-Neillsville will support an awareness and educational campaign in the community for ENDS (also known as e-cigs, vapes, Juuls etc.) and their impacts.

Key Actions

- Identify educational and awareness materials
- Identify community partners
- Attend planning and implementation meetings

Potential Collaborative Partners

- School Districts
- Clark County Health Department
- Clark County Prevention Partnership
- Mental and Behavioral Health Task Force
- Ascension Our Lady of Victory
- University of Wisconsin-Extension

Resources

- Staff time
- Program materials and supplies
- Funding as appropriate to address community health priority

Target Population

- Broader community, youth

STRATEGY 1.3: ENGAGE IN AODA PREVENTION COMMUNITY GROUP

Objective 1.3.1: By October 2019, MMC-Neillsville staff will actively engage in one community coalition that addresses AODA.

Key Actions

- Actively attend and engage in meetings
- Promote and participate in events and initiatives

Potential Collaborative Partners

- Healthy Clark County
- Clark County Prevention Partnership
- Mental and Behavioral Health Task Force
- Clark County Health Department

Resources

- Staff time
- Funding, supplies, and materials provided as appropriate to address community health priority

Target Population

- Broader community

Health Priority 2: Behavioral Health

Goal 2.1: Decrease suicide rates

Goal 2.2: Improve social and emotional development of children and adolescents

Long-term Indicator	County	State	Nation	Healthy People 2020 Target
Clark County suicide rate per 100,000	11.3 ⁶	15.4 ⁷	14 ⁷	10.2 ⁸
Percent of students who attempted suicide one or more times during the 12 months before the survey	6.3% ⁴	7.8% ⁴	7.4% ⁵	1.7% ⁹ (suicide attempt that caused serious injury)
Percent of high school students who felt so sad or hopeless almost every day for 2 weeks or more in a row that they stopped doing some usual activities	23.6% ⁴	27% ⁴	31.5% ⁵	/

STRATEGY 2.1: PROVIDE MENTAL HEALTH AND SUICIDE PREVENTION TRAININGS

Objective 2.1.1: By December 2022, MMC-Neillsville will partner with local community organizations to train 100 Clark County community members in Question, Persuade, Refer (QPR).

Objective 2.1.2: By December 2022, train MMC-Neillsville staff in using suicide preventative screening tools.

Key Actions

- Identify organizations and communities that need QPR training
- Conduct and/or help coordinate QPR trainings
- Identify suicide preventative screening tools
- Identify hospital staff that should be trained

Potential Collaborative Partners

- Clark County Health Department
- QPR trainers

Resources

- Staff time
- QPR Program materials
- Funding as appropriate to address community health priority

Target Population

- Broader community

STRATEGY 2.2: DEVELOP AODA AND MENTAL HEALTH RESOURCE APP

Objective 2.2.1: By September 2022, MMC-Neillsville will support the development of an app focused on providing community members access to information about existing AODA and mental health services and resources.

Key Actions

- Compile evidence-based substance use and mental health resources
- Engage students in assisting with development of app
- Contract with an app developer (Biomedical Informatics Research Center – BIRC)

- Identify local schools interested in piloting App
- Conduct youth focus groups to evaluate effectiveness and accessibility of App

Collaborative Partners

- National Institute of Mental Health (NIMH)
- Substance Abuse and Mental Health Services Administration (SAMSHA)
- National Institute of Drug Abuse (NIDA)
- Centers for Disease Control and Prevention (CDC)
- Local School Districts
- BIRC

Resources

- Staff time
- Print and advertising materials
- Funding as appropriate to address health priority

Target Population

- Youth

STRATEGY 2.3: SUPPORT A COMMUNITY KINDNESS CAMPAIGN

Objective 2.3.1: By December 2022, MMC-Neillsville will support a community-wide kindness campaign.

Key Actions

- Actively attend and engage in meetings
- Promote and participate in events and initiatives

Potential Collaborative Partners

- Healthy People Clark County
- Mental Health and Behavioral Health Task Force
- Clark County Health Department
- School Districts
- Youth serving community organizations

Resources

- Staff time
- Funding, supplies, and materials provided as appropriate to address community health priority

Target Population

- Broader community, youth

STRATEGY 2.4: ENGAGE IN MENTAL HEALTH COMMUNITY GROUPS

Objective 2.4.1: By December 2019, MMC staff will actively engage in a community mental health and/or behavioral health group.

Key Actions

- Actively attend and engage in meetings
- Promote and participate in events and initiatives

Potential Collaborative Partners

- Healthy People Clark County
- Mental Health and Behavioral Health Task Force
- Clark County Health Department
- Neillsville School District
- Ascension Our Lady of Victory

Resources

- Staff time
- Funding, supplies, and materials provided as appropriate to address community health priority

Target Population

- Broader community

Health Priority 3: Chronic Disease

Goal 3.1: Improve access to healthy foods and physical activity

Goal 3.2: Improve self-management of chronic conditions

Long-term Indicator	County	State	Nation	Healthy People 2020 Target
Adult obesity rate	33% ¹	31% ¹	29% ²	30.5% ¹⁰
Percent of children in WIC Obesity (ages 2-5, enrolled in WIC program)	/	15% ¹¹	14% ¹¹	9.4% ¹²
Adult physical inactivity	24% ¹	20% ¹	22%	/

STRATEGY 3.1: IMPROVE ACCESS TO HEALTHY NUTRITION

Objective 3.1.1: By December 2022, MMC-Neillsville will assess food options provided by the hospital cafeteria.

Key Actions

- Develop assessment tool
- Attend meetings

Potential Collaborative Partners

- Cafeteria director

Resources

- Staff time
- Materials and supplies
- Funding as appropriate to achieve health priority

Target Population

- MMC-Neillsville staff, patients and visitors

STRATEGY 3.2: PROMOTE BREASTFEEDING

Objective 3.2.1: By December 2021, MMC-Neillsville will assess its breastfeeding friendliness environment.

Objective 3.2.2: By December 2022, a breastfeeding room will be established in MMC-Neillsville.

Key Actions

- Identify breastfeeding friendly assessment tool
- Attend meetings to discuss assessment process
- Put a breastfeeding room into the design of the new hospital facility

Potential Collaborative Partners

- Eat Right Be Fit
- Clark County Health Department

Resources

- Staff time
- Funding as appropriate to achieve health priorities

Target Population

- Mothers who are breastfeeding, children who are breastfed

STRATEGY 3.3: PROMOTE PHYSICAL ACTIVITY

Objective 3.3.1: By December 2022, MMC-Neillsville will support dissemination of the Road Map to a Healthier You booklets to the community to increase awareness of physical activity options in Clark County.

Objective 3.3.2: By December 2022, MMC-Neillsville will collaboratively support promotion of two community active living activities.

Objective 3.3.3: By December 2022, MMC-Neillsville will collaborate with community partners to establish a community wellness center.

Key Actions

- Actively attend meetings to discuss physical activity promotion efforts
- Acquire Road Map to a Healthier You booklets
- Identify active living activities to implement
- Connect with communities with outdoor/playground equipment needs

Potential Collaborative Partners

- Eat Right Be Fit
- Health Clark County
- Clark County Health Department
- Ascension Our Lady of Victory
- Aging and Disability Resource Center
- University of Wisconsin-Extension

Resources

- Staff time
- Funding as appropriate to achieve health priorities

Target Population

- Broader Community

STRATEGY 3.4: ENGAGE IN CHRONIC DISEASE COMMUNITY GROUPS

Objective 3.4.1: By December 2019, MMC-Neillsville staff will actively engage in one community coalition that addresses chronic disease.

Key Actions

- Actively attend and engage in meetings
- Promote and participate in events and initiatives

Potential Collaborative Partners

- Healthy Clark County
- Eat Right Be Fit
- Clark County Health Department

Resources

- Staff time
- Funding as appropriate to address community health priority

Target Population

- Broader community

Next Steps

This implementation strategy outlines a three-year community health improvement process. Each year within this timeframe, MMC-Neillsville 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 toward long-term performance indicators
- Report progress toward the performance indicators to the hospital board
- Share actions taken to address the needs with the community at large

Approval

This Implementation Strategy Report was adopted by the MCHS Hospitals Board, Inc. on September 4, 2019.

Community Input

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's Center for Community Health
Advancement at communityhealth@marshfieldclinic.org or (715) 221-
8400.

References

1. County Health Rankings and Roadmaps. (2019). *Wisconsin-Clark County*. Retrieved from <https://www.countyhealthrankings.org/app/wisconsin/2019/rankings/clark/county/factors/overall/snapshot>
2. County Health Rankings. (2019). National Data. Retrieved from <https://www.countyhealthrankings.org/explore-health-rankings/rankings-data-documentation>
3. Healthy People 2020. (n.d.). *Reduce the proportion of adults who drank excessively*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/substance-abuse/objectives>
4. Clark County Health Department. (2018). *Clark County Youth Risk Behavior Survey*.
5. Center for Disease Prevention and Control. (2017). *Youth Behavioral Health Survey*. Retrieved from <https://www.cdc.gov/healthyyouth/data/yrbs/pdf/2017/ss6708.pdf>
6. Wisconsin Division of Health. (2013). *WISH Data Query System*. Retrieved from <https://www.dhs.wisconsin.gov/wish/index.htm>
7. Healthy People 2020. (n.d.). *Suicide (age adjusted, per 100,000 population)*. Retrieved from <https://www.healthypeople.gov/2020/data-search/Search-the-Data#objid=4804>;
8. Health People 2020. (n.d.). *Reduce the suicide rate*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders/objectives>
9. Healthy People 2020. (n.d.). *Suicide attempts by adolescents that required medical attention*. Retrieved from <https://www.healthypeople.gov/2020/data-search/Search-the-Data#objid=4810>;
10. Healthy People 2020. (n.d.). *Reduce the proportion of adults who are obese*. Retrieved from

-
- <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status/objectives#4968>
11. The State of Obesity. (2014). *Obesity Among WIC Participants Ages 2-4*. Retrieved from <https://www.stateofobesity.org/wic/>
 12. Health People 2020. (n.d.). *Reduce the proportion of children aged 2-5 years who are considered obese*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status/objectives#4968>
 13. Healthy Wisconsin. (2018). *Wisconsin State Health Improvement Plan 2018 Addendum*. Retrieved from <https://www.dhs.wisconsin.gov/publications/p01791a.pdf>