### MARSHFIELD CLINIC HEALTH SYSTEM AT A GLANCE

- **55** Clinical Locations in **34** Wisconsin Communities
- **1,150** Providers
- **328,000** Unique Patients
- **3.5M** Patient Encounters
- **72** Counties + **11** Tribes

### PHYSICAL PRESENCE

- **3** Hospitals
- **7** Urgent Cares
- **10** Dental Clinics
- **17** Pharmacies
- **33** Clinical Laboratories

### Community Partnerships

- Serving Wisconsin since **1916**
- Security Health Plan
  - 6th Largest Health Plan in Wisconsin
- 400 Community Organizations we collaborate with on community health initiatives

### Clinical Locations

- Hospitals
- SNFs
- ASCs
- Urgent Cares
- Dental Clinics
- Pharmacies
- Clinical Laboratories

### Wisconsin Communities

- **55** Locations
- **34** Communities
- **328,000** Patients
- **3.5M** Encounters

### Security Health Plan

- 6th Largest Health Plan
- Serving Wisconsin since 1916

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**Serving Wisconsin since 1916**

**Seventh Largest Health Plan in Wisconsin**

**328,000** Unique Patients

**3.5M** Encounters

**72** Counties + **11** Tribes

**400** Community Organizations we collaborate with on community health initiatives
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TELLING THE STORY

Marshfield Clinic Health System continues a journey that began more than 100 years ago to enrich lives and create healthy communities.

During those early days, the mission focused on taking care of patients. Over time, the mission and system have grown, implementing new and innovative ways to care for people inside and outside our four walls. We serve them as patients, members, partners in our communities as we increasingly engage with and support our communities.

Stories in this report are just a few examples of the extensive work being done throughout the system to make a difference in our communities and in people’s lives.
Dear colleagues and friends,

Thank you for taking time to read this report in which you'll learn about exciting ways we partner with our communities to enrich lives.

We believe today’s health system has to be one that extends its presence beyond its own walls and into the communities it serves. We know we can make our communities stronger, safer and healthier by working collaboratively with key partners.

Much of what keeps people healthy does not take place inside of a clinic but rather as a result of a person’s environment and the opportunities to make healthy lifestyle choices. That’s a major reason we are committed to improving the health of our communities and providing access to important health programs.

Whether it’s help with managing chronic diseases, advocating for farm safety or making sure children have safe spaces to grow and learn, we are proud of the work being done hand-in-hand with the people and places we serve. We are proud to continue our tradition of medical research, so we may discover new treatments and cures and enhance quality-of-life for our patients, families and communities.

This is an exciting time for Marshfield Clinic Health System as we continue our work of enriching lives.

Sincerely,

Dr. Susan Turney
Chief Executive Officer
Marshfield Clinic Health System
Dear friends,

I spent my career in public service and business and am proud to continue serving the public through my role as chair of Marshfield Clinic Health System’s Board of Directors.

During my time in government and the private sector, I learned that building partnerships and working together were essential components of progress. That’s part of the reason I’m so excited about the relationships and partnerships we have and continue to form with our health system communities.

It is deeply fulfilling to work toward such a noble goal – improving the health and wellbeing of the communities we serve.

As we move forward, these partnerships will only become more important. There is so much good we can do when we work together.

Sincerely,

Mark Bugher
MCHS Board Chair
Children begin learning as soon as they’re born and because evidence shows behavioral health is critical to learning and development, care for children’s behavioral health should begin early in life, too.

That’s why Security Health Plan of Wisconsin, Inc., has partnered with Mindfield, L.L.C., and Eric Hartwig, Ph.D., since 2013 to bring Wisconsin students the very best in behavioral health.

Hartwig is a school psychologist and former administrator of Pupil Services for the Marathon County Children with Disabilities Education Board. He developed the Behavioral, Emotional and Social Traits (b.e.s.t.) universal screening to quantify behavioral observations and determine if a child needs intensive, focused attention.

**b.e.s.t. universal screening:**

- Identifies and reinforces positive behavioral development for typically developing children
- Provides interventions for children with elevated risk status
- Develops focused intervention for children with targeted needs

This program came about because mental health services were few and community-based resources were needed. School personnel play an important role in early identification when they provide student support and connect students to effective services. With Hartwig’s support and Security Health Plan’s investment, schools are able to screen their students, interpret screening results and integrate interventions into their teaching practices.

Hartwig believes that other than family, no one spends more time with students than teachers, so it’s natural to use their observations for 26 specific behaviors that predict current and future problems and provide children with additional support.

“Mental health needs of our students have been increasing at the same time our budget is shrinking,” said Loyal District Administrator Cale Jackson. “Direct access to someone with Dr. Hartwig’s experience and ability is something we wouldn’t have been able to offer our staff without this generous grant.”

“We’re not about identifying students’ problems just to label them, though,” Hartwig said. “Problems have already happened. We can’t change them. We’re here to make a unified intervention and ruin the prediction.

“Success in school gives children an improved sense of wellbeing and helps them balance other life risks. The b.e.s.t. universal screening puts people together with the same information at the same time to think critically and make wise decisions about what children may need.”

Over 80 elementary schools use b.e.s.t. and some have used the screening for the last three years. During the past two years, more than 20,000 students have been screened with the b.e.s.t.
Imagine these scenarios:
- No water for three days and your brain registers your craving for it as the size of a softball.
- You’ve had no food for five days. Your craving is the size of a basketball.
- You have an opioid addiction and don’t have access to it. Your craving is now the size of a baseball field.

Pain/health psychology expert Michael Larson, Ph.D., who directs Marshfield Clinic-Minocqua Center’s Pain Clinic, said you’d go to great lengths to satisfy that craving “and anything Marshfield Clinic Health System does to treat your disorder will have to tackle a problem the size of that baseball field.”

More than 40 Americans die daily from prescription opioid overdoses, leading Security Health Plan of Wisconsin, Inc., to join Wisconsin’s state health plan, the Governor’s Task Force on Opioid Abuse and many communities to make drug abuse prevention a top health priority.

In 2017, Security Health Plan invested $137,000 in Prescription Drug Abuse Prevention Grants supporting community efforts to prevent prescription drug misuse/abuse. These grants dovetail with other health system efforts to fight the opioid epidemic and manage rising health care costs.

“With investments and how we choose to help manage our members’ prescriptions, Security Health Plan wants to help communities manage the frightening epidemic, improve our communities’ health and safety and relieve financial strains opioid abuse put on health systems,” said Sue Wilhelm, director, Security Health Plan Pharmacy Services.

**Partners fight the epidemic:**

**Bayfield County Health Department** – installed three medication drop boxes and three sharps containers and provided education about safe prescription medication and sharps disposal.

**Barron County Community Coalition** – created a life-size exhibit of a teen’s bedroom highlighting substance abuse red flags and a backpack portion educated school personnel about how teens hide drugs and cover up substance abuse.

**CouleeCap** – provided safe medication disposal practices education in Monroe County through school and community events, bulletin board and public service announcements, take-back days and life-size exhibits of a teen’s bedroom to show signs of substance abuse.

**Eau Claire City-County Health Department** – assessed and educated the community to increase medication label and disposal health literacy, especially among rural Hmong and Hispanic populations.

**Indianhead Community Action Agency** – implemented a school-based education curriculum about drug misuse/abuse prevention, educated families and issued public service announcements.

**Together for Jackson County** – educated providers about Centers for Disease Control and Prevention guidelines and American Medical Association recommendations for prescribing opioids and taught the community about prescription drug abuse dangers.

**Marathon County’s AOD Partnership** – collected area data on medication misuse, perception of availability through households or health care providers, perception of risk associated with misuse and local medication dispersion/disposal efforts. Data was used to I.D. trends for outreach and awareness activities.

**Taylor County Drug Opposition Partners** – had student workshops and parent/community presentations to create and support a healthy environment for youth with interventions designed to delay alcohol use onset and reduce drug use.

**Boys & Girls Club of the Wisconsin Rapids Area** – hosted a Skills, Mastery and Resistance Training family fun night to educate students, parents and communities about prescription drug abuse and have parents and children start talking about the topic.

**Winnebago County Drug & Alcohol Coalition** – collected and analyzed opioid abuse data to identify key community indicators, establishing a baseline and measuring opioid use, misuse and/or abuse changes.
A northern Wisconsin county is connecting its people and communities in innovative, supportive ways to build strong kids and strong family systems along with more connected communities.

And it’s as simple and enjoyable as a summer concert.

Strong Families/Strong Kids of Price County is a subcommittee of the Price County AODA/Mental Health Coalition, supported by Flambeau Hospital and Marshfield Clinic Health System. It was created to address family development through:

- assessing already-available family programs in the county
- determining what families need to enhance their family bonds
- providing support and education
- hosting family-friendly events in communities

“Strong families, strong kids and more connected communities create an environment which develops a more resilient population,” said Michelle Schmidt, Flambeau Home Health & Hospice. “This is resilience as it applies to physical and mental health, overall wellness and resistance to drug and alcohol abuse. These events have potential to forge new, healthy connections between and among youth and adults that might not otherwise have a chance to exist.”

The goal is to build active Strong Families/Strong Kids groups in at least three county communities - Park Falls, Phillips and Prentice. In 2017:

- Multiple generations of families enjoyed music and each other’s company when Strong Families/Strong Kids of Phillips introduced “Music in the Park.” Well over 2,000 people attended the six-week concert series. Thanks to Strong Families/Strong Kids working with the Phillips Lions Club, area residents saw first-hand the building of community connections. A “Music in the Park” Fall Family Fest in October was the program’s one fundraiser and communities are looking forward to the 2018 music series.

- Strong Families/Strong Kids of Park Falls set out to build community by joining together to spruce up Hines Park. The group worked with Park Falls city officials and Chequamegon School District representatives to enhance the park’s beauty. The effort meant more use of the park and increased ownership by the community’s kids.

- In December, the program worked with Chamber of Commerce organizations to bring “Santa Weekend” with food, games, Christmas lights, activities and most important, photos with Santa.

Strong Families/Strong Kids’ first year was successful. Communities and their families are looking forward to what the future holds while building more connected communities, one family event at a time.
About a year and a half ago, Josh Goebel retrofitted his tractor with a rollover protective structure (ROPS), motivated to do so because of a story he’d heard.

“I went to buy a haybine from this guy and he had a John Deere 3010 just like mine, with the narrow front end,” Goebel said. “He asked if I had a ROPS on my tractor and I said ‘no.’ Then he told me about an accident with his loader. He was dumping dirt when it tipped. Broke his leg in 20 spots, required 11 pins, he had broken ribs and a punctured lung.”

The fact is startling - tractors are the leading cause of deaths on farms.

And this farmer and fire captain from the southwest Wisconsin community of Darlington contacted the ROPS hotline to get his tractor retrofitted. Even with some out-of-pocket cost, retrofitting is “a lot cheaper than dying,” he said.

Goebel had called a hotline for the Wisconsin ROPS Rebate Program, under the auspices of the National Farm Medicine Center (NFMC). NFMC is a department of Marshfield Clinic Research Institute. Established in 1981 in response to occupational health problems seen in farm patients coming to Marshfield Clinic, NFMC has focused on evolving issues in agricultural health and safety encompassing behavioral, laboratory and clinical research.

A ROPS is an operator compartment structure, usually a cab or rollbar, intended to protect farmers from injuries caused by overturns or rollovers. A ROPS, when used with a seatbelt, is 99 percent effective in preventing injury or death in the event of an overturn. More than half the tractors in Wisconsin don’t have this protection and they didn’t become standard on U.S.-manufactured tractors until 1985.

The Wisconsin ROPS Rebate Program reimburses up to 70 percent or a maximum of $865 toward total cost of purchasing, shipping and installing individual ROPS. More than 200 have been installed since the program began in early 2013, made possible through philanthropic support from Auction of Champions, an annual fund-raising event for NFMC.

Goebel had intended to install a ROPS when he bought the tractor, but the earmarked money got diverted to unexpected repairs.

“The rebate – and the story - really helped me make the decision,” he said. The decision has been reinforced, too, because of his role as an emergency responder. Goebel says he’s been called to several tractor roll-over incidents and witnessed results of tractors without this protection. He’s become a strong advocate for the ROPS program, too, working with legislators on a bill to provide state funding for the ROPS rebate program. If the bill passes, Wisconsin would join New York and Minnesota as the only states to fund rebates for rollbar retrofits.
National Farm Medicine Center (NFMC), in partnership with Marshfield Clinic Dermatology, continues to bring skin cancer screening to new groups of farmers to help detect possible skin cancers as early as possible.

Several years ago, NFMC and Marshfield Clinic dermatologists conducted a research study based on data collected from a skin cancer screening that found farmers have high levels of occupational sun exposure and increased risk of skin cancer.

“This is an at-risk population, given their occupation exposes them constantly to the sun’s damaging rays,” said Dr. Erik Stratman, who chairs Marshfield Clinic’s Dermatology Department. “Farmers have increased risk of skin cancer and although most farmers understand their risk and believe sun-protective behaviors reduce skin cancer risk most do not routinely use adequate sun protection.”

Skin cancer is the most common form of cancer in the United States, according to the American Cancer Society, and warning signs of skin cancer can be detected early. About one in five people will develop some form of skin cancer during their lifetime.

Screenings were introduced because the earlier skin cancer is detected the more successfully it can be treated. Since 2011, NFMC has conducted seven screening events, checking 1,460 people and finding 80 presumed cancers.

Screenings have been conducted at Farm Technology Days events held annually in various Wisconsin counties. It is the largest agricultural show in Wisconsin and one of the largest in the nation. Other screenings have been held during other major agriculture events and trade shows.

Significant support for the screenings program comes from the Auction of Champions, a fundraiser for NFMC.

Marshfield Clinic Dermatologist Clayton Green, M.D., Ph.D., examines a farmer at Wisconsin Farm Technology Days.
Opioid misuse and abuse is a public health crisis in Wisconsin and through a network of partnerships comprising the HOPE Consortium, this major issue is being addressed.

The crisis is real. According to the Wisconsin Department of Health Services:

- In 2016, more than 4,000 Wisconsin older adults were hospitalized for opioid dependence or poison.
- In 2017, 883 people in Wisconsin died from opioid overdoses. This is more than the number killed in car crashes.
- Overdose deaths due to prescription opioids were up 600 percent from 2000 to 2016, from 81 to 568.

Opioids are powerful drugs - heroin, oxycodone, hydrocodone, morphine, codeine and fentanyl. They are used as pain relievers, can be addictive and deadly if taken in high doses, taken in combination with other drugs or by people with certain pre-existing medical conditions.

HOPE Consortium is battling the growing opioid addiction problem in northcentral Wisconsin through education, detoxification, treatment and recovery services. The goal? To improve quality of life in our communities and reduce deaths associated with opioid addiction.

With funds allocated as part of Wisconsin’s Heroin, Opiate, Prevention and Education (HOPE) Agenda, the Consortium was formed about three years ago, a partnership of 10 northcentral Wisconsin organizations including Marshfield Clinic Health System and Family Health Center of Marshfield Inc. (FHC). FHC’s Alcohol & Drug Recovery Center in Minocqua and the health system’s Center for Community Health Advancement (CCHA) are actively working with the Consortium to turn addiction statistics around.

“HOPE Consortium has been modeled like Northwoods Coalition, the successful network of substance abuse prevention coalitions,” said Danielle Luther, CCHA’s manager of Alcohol & Drug Programs. “The Consortium is about bringing together treatment providers and using each partner’s strengths to provide recovery-orientated systems of care.”

Those served include men, women and affected family members with priority for women of childbearing age living in Oneida, Vilas, Forest, Price or Iron counties or Forest County Potawatomi, Lac du Flambeau Chippewa or Sokaogon Chippewa Tribal Nations.

In 2017, HOPE Consortium partners provided substance use disorder treatment and care coordination services to 214 clients with an opioid use disorder, touching the lives of at least 268 minor children in the process. A goal is to reduce the number of opioid-affected infants. Clients included 115 women of childbearing age, 25 of whom were pregnant.

In addition, the HOPE Consortium supported regional distribution of 256 doses of the life-saving overdose reversal medication naloxone. Treatment outcomes are positive, with more than 80 percent of clients having appropriate urine results at six months post-enrollment in services, including 100 percent of pregnant women.

Also, retention in services have been impressive, said Sheila Weix, director of Substance Abuse Services, FHC Alcohol & Drug Recovery Center, with 97 percent of clients retained in services for at least 90 days. Eligibility will be extended to include individuals with a methamphetamine use disorder in 2018.

Besides providing treatment and recovery support services to individual clients, HOPE Consortium ensures regional providers have access to training and resources that support their practice in the field. Hope Consortium also plans conferences that serve as awareness-building and opioid use disorder education opportunities, for state officials to law enforcement to health care providers.

“HOPE is making a difference through these partnerships and it’s crucial we continue to reach out to each other to tackle this public health crisis,” Luther said.
CHILD LIFE: The importance of positive experiences

Hospitals, clinics, procedures, treatments, needles and everything that comes with them are scary for a child who’s sick or injured. They’re also scary if you’re that child’s parent or sibling.

But, a team of 11 trained specialists step up to turn scariness into understanding and coping, which helps children and families work through fears, treatments and hospitalizations.

Child Life and Expressive Therapies Manager Heidi Giese, Marshfield Medical Center, knows children need truth, honesty, security, comfort, acceptance, affection and a normal environment. So a hospital or clinic experience can be distressing, whether as the patient, parent, sibling or loved one.

That’s when Child Life and Expressive Therapies staff with Marshfield Children’s Hospital and Marshfield Clinic step in, every day. They teach, direct play and are present in the Hospital, Clinic and community settings to help children and families have positive experiences with not-so-positive circumstances. They provide chances for children and parents to learn in fun, innovative and meaningful ways in medical and community settings.

Through play
A stuffed animal clinic at an annual community Children’s Festival is thoroughly fun and educational. Each year, about 500 children shepherd critters through the clinic for a “check-up.” Through play, children interact with Child Life and Pediatrics staff in nontthreatening circumstances so when they have their own exams that experience is less scary. Exams are thorough, complete with an immunization and Band-aid, then child-owners are asked questions like “will you hug them? Will you smile at them? Will you make sure they eat well? Will you read to them?”

Through focus on siblings
It’s tough when a younger brother can’t walk, can’t talk, only eats sometimes. Siblings may feel forgotten, are just as affected as everyone in the family and need help learning to cope.

That’s when Child Life addresses family-centered care through its “Sib Shop” program. Offered in a community setting, this Saturday program is held every other month in donated space at Marshfield Clinic Health System YMCA. About 50 Sib Shops have been held since the program started in 2007. Children come to this fun setting to play games that help them learn about their feelings, siblings and family and that they are not alone. Through play, they also learn how hard it could be to have even the smallest of disabilities, to help build a greater sense of empathy. With Child Life specialists’ help, they also learn coping skills.

“Children know way more than we as adults give them credit for,” Giese said, “and it’s ok for them to ask questions and seek answers. We can clear up misconceptions. It’s our job to ask them what they understand - and then we know what they know and can help them.”
Most adults, if asked, would say they do not yet have an Advanced Care Plan (ACP) outlining their wishes if they become incapacitated and can’t make health care or end-of-life care decisions for themselves. They’ll get to it, though. Someday.

But “someday” doesn’t always come. And when it doesn’t, loved ones and health care providers may be left not knowing the person’s wishes or legally not able to make end-of-life decisions at all.

A Marshfield Clinic Health System initiative – Caring Conversations – is changing this scenario by reaching out and educating adults to talk about their wishes and document them in a legal document called an advance directive (power of attorney for health care). It is important to include the document in their medical record so a care team would know those wishes.

In Wisconsin, if a person cannot make medical decisions for himself, the health care team cannot look to the next of kin to make them. If the person does not have a power of attorney for health care, only a legally-authorized representative can provide informed consent to health care on the person’s behalf. Without this, a court-appointed guardian may be needed, which requires more time and money.

Otherwise, physicians provide care, not knowing patients’ end-of-life wishes.

Through Marshfield Clinic’s Institute for Quality, Innovation and Patient Safety (IQIPS), providers in clinical settings and facilitators in the health system’s communities are having Caring Conversations. They’re talking to patients and the public about ACPs and helping them normalize the topic, make plans and complete this crucial paperwork.

ACP is a process of understanding, reflection and compassionate discussion about documenting medical choices and identifying a legal decision maker so families understand individuals’ values and goals for care.

“Many people don’t understand that if you can’t make your own decisions you have to have something in writing,” said Leslie Borne, R.N., ACP coordinator.

Caring Conversations facilitators offer public education sessions, workshops and one-on-one discussions. It could be at senior expos in Eau Claire, a men’s health event in Park Falls, a Marshfield human resources directors meeting, a health fair in Mercer or programs in Rice Lake, Stevens Point and on the Lac du Flambeau reservation. In fiscal year 2017, 950 people attended 25 community events. The goal is higher for 2018.

“This is about quality care, education and prevention because many patients and community members don’t know what it does and doesn’t mean to have an ACP in place,” Borne said. “It’s our job to let them know. We want people to have this process completed before they need to be hospitalized, before they’re in distress. We like to say this is a gift to the family, providing direction and lifting that burden of making decisions when they don’t know.”
Marshfield Clinic’s Nurse Line provided triage and health advice to people over the phone for more than 20 years and based on that success, innovators looked for more ways to broaden care outside the Clinic’s four walls.

And Care My Way® - 844-CAREWAY (844-227-3929) - was launched in 2014, available daily and would be convenient, cost-effective, safe and at a lower cost than an office visit.

Why so important, then ... and now?

Access and convenience is more important than ever. Marshfield Clinic Health System’s service area is rural, with some people living several hours away from their provider. Transportation is a significant barrier for some, as is the cost to travel. This can place huge burdens on already-sick people who may have to take vacation from work and find child care to get the care they themselves need.

The service and types of conditions treated has grown and care is available for people from throughout Wisconsin, Michigan and Minnesota, all states with rural populations and people who don’t live close to health care.

Also, a new Care My Way virtual visit option was introduced in early 2017 so patients can use two-way video to talk with a nurse practitioner by phone or electronic device.

“This allows us to go beyond the walls of the Clinic while still providing the quality care the Clinic is known and respected for,” said Chris Meyer, director of Virtual Health. “It’s all about offering more access and providing the right care at the right time in a way that minimizes inconvenience and cost to the patient.”

Since Care My Way started, family practice-certified nurse practitioners have diagnosed and treated over 14,000 patients.

Patients say it best:

“The convenience was incredible, to get my problem taken care of over the phone instead of taking off work, making an appointment, waiting in the waiting room, etc. Simple clear-cut problem ... solved.”

“It was excellent service, fast and efficient. I didn’t even need to leave work for a walk-in appointment.”

“I feel like I had a choice in my health care.”

“Using this service was wonderful. It was very efficient, especially when my doctors are in Milwaukee and we were up north.”

“I have used this service three times and I love it. Not having to take off work to go sit in an Urgent Care or Walk-in waiting room full of sick people in flu season.”
Methamphetamine in Wisconsin impacts not only users but takes a dramatic toll on their families and communities.

An initiative is now in place to increase awareness of the highly addictive drug as its use grows in Wisconsin. Statistics are telling:

- According to the 2016 Wisconsin Methamphetamine Study, since 2011 meth availability in Wisconsin has increased 250-300 percent.

- The state Department of Justice reports meth cases analyzed by Wisconsin state crime labs have increased nearly 500 percent, from 302 cases in 2010 to 1,696 in 2017.

- Meth use costs Wisconsin $424 million each year.

“Initiatives around meth grew out of the need for a comprehensive, regional approach and through listening to our communities asking for help,” said Danielle Luther, manager of Alcohol & Drug Programs, Center for Community Health Advancement (CCHA), Marshfield Clinic Health System. “Much attention has been placed on opioids but meth use is rapidly increasing in communities throughout our service area and becoming the No. 1 problem in some areas.”

Even more telling is the toll meth takes. It significantly affects the brain by increasing levels of dopamine and its use can lead to addiction, affecting thinking, motor skills and memory.

It also tears families apart and impacts communities. “Children are being taken from homes because they’re being neglected and so we’re seeing a rise in human services cases,” Luther said. “It’s so important that we educate the public about meth.”

In response to growing concerns about meth use, Marshfield Clinic Health System, Northwoods Coalition and Alliance for Wisconsin Youth hosted regional forums to discuss meth use in affected communities and look for ways to collaborate and share ideas, strategies and resources.

The “kNOw Meth” public education and awareness campaign was adopted and a committee worked to identify and collect data to provide meaningful and useful information to local communities. Data was compiled into profiles for 35 counties and published in the 2017 Northwoods Coalition Epidemiological Profile on Alcohol and Other Drugs.

The Northwoods Coalition meth summit in April 2017 had nearly 300 people from 32 counties, seven tribes and 31 coalitions, including tribal and state government, prevention, law enforcement, human services, treatment and recovery. Their work resulted in a plan, “Northwoods Coalition kNOw Meth: Recommendations for Reducing the Use and Impact of Methamphetamine in Wisconsin,” with 45 recommendations for local-, regional- and state-level action.

“This summit was a significant sign of concern and a broad spectrum of disciplines was represented,” Luther said. “This motivates us to continue this important work and help individuals, their families and communities.”
Students learn when they have fun, interesting projects to challenge them by teachers who find subjects like science and math exciting and applicable to daily life.

That’s what Marshfield Clinic Research Institute (MCRI) and Marshfield Clinic volunteers do through Marshfield Clinic Health System’s sponsorship of the Marshfield chapter of the Science, Technology, Engineering and Math (STEM) program through the Samoset Boy Scout Council.

In 2016, the health system agreed to be a STEM Scout Charter Organization when the program was launched.

STEM Scouts uses hands-on lab projects to introduce concepts to energetic aspiring scientists in grades 3-5, in afterschool programs at Lincoln and Grant Elementary Schools. The Samoset Boy Scout Council provides the curriculum, equipment, supplies and insurance.

Labs of no more than 15 students each are conducted once a week for 30 weeks and students learn from volunteer scientists, teachers and other STEM professionals. Topics range from the nature of sound, light, matter and magnetism to fundamentals of archaeology, how our solar system looks to programming robots.

The favorite lab continues to be making ice cream in Ziploc® bags out of half-and-half or almond milk which demonstrates the concept of freezing point depression using salt.

The chapter is led by MCRI staff and their work is dedicated to Donna David, a former MCRI Integrated Research and Development Lab member who was fatally struck while bicycling. David was a scientist and educator who shared her passion for science throughout her 28-year career with MCRI. The “Donna E. David Memorial STEM Scout Lab” honors her memory and is an important community partnership.
The fear of falling can increase with age – and with good reason since more than a third of people age 65 or older fall each year.

According to the National Council on Aging, falls are the leading cause of fatal and non-fatal injuries for older Americans. Falls threaten older adults’ safety and independence and generate enormous economic and personal costs.

According to the U.S. Centers for Disease Control and Prevention:
- One in four Americans age 65 and older falls each year.
- Every 11 seconds, an older adult is treated in the emergency room for a fall; every 19 minutes, an older adult dies from a fall.
- Falls are the leading cause of fatal injury and the most common cause of nonfatal trauma-related hospital admissions among older adults.
- Falls result in more than 2.8 million injuries treated in emergency departments annually, including over 800,000 hospitalizations and more than 27,000 deaths.
- In 2015, the total cost of fall injuries was $50 billion. Medicare and Medicaid shouldered 75 percent of these costs.
- The financial toll for older adult falls is expected to increase as the population ages and may reach $67.7 billion by 2020.

Falls, with or without injury, also carry a heavy quality of life impact. A growing number of older adults fear falling and, as a result, limit their activities and social engagements. This can result in further physical decline, depression, social isolation and feelings of helplessness. That’s why Marshfield Clinic Health System through Security Health Plan of Wisconsin, Inc., supports the Wisconsin Institute for Healthy Aging (WIHA) in reducing falls incidence in Wisconsin by 50 percent for participants of WIHA’s Stepping On fall prevention workshop series.

In 2017, Security Health Plan partnered with WIHA to offer the seven-week program in Clark, Eau Claire, Oneida and Portage counties free of cost, Security Health Plan also helped advertise workshops across the state to ensure communities were aware of the free opportunity.

Workshops are led by a health professional and peer leader and often feature local guest experts. The program integrates balance and strength training with information on vision, medications, assistive devices, footwear and fall hazards. These are all factors in remaining upright, independent and part of the community.
Marshfield Clinic Health System Recovery Corps is the first AmeriCorps program in the nation to address substance abuse by engaging individuals with recovery experience as members.

Recovery coaches provide hope to people affected by a substance use disorder - individuals, families and friends - by sharing resources, connections to the recovery community and personal experiences. In its first five months, Recovery Corps served 66 recoverees, people interested in seeking recovery or active in recovery.

Recovery coaches are certified through the nationally-recognized Connecticut Community Addiction Recovery (CCAR) Recovery Coach Academy.

Based out of an office in Minocqua, recovery coaches provide quality, structured, peer-based recovery services to anyone affected by a substance use disorder in the HOPE Consortium service area. This may include a person suffering from a substance use disorder directly as well as friends or family members of a person with a substance use disorder.

“We are also implementing the Certified Addiction Recovery Empowerment Specialist (CARES) Ethical Behavior Code and the Faces and Voices of Recovery, Recovery Bill of Rights,” said Danielle Luther, manager, Alcohol and Drug Programs, Center for Community Health Advancement (CCHA). “As a program, our intentions are to support individuals affected by substance use disorders not only through direct coaching but also by offering people in recovery the opportunity to become a recovery coach. Further, recovery coaches work tirelessly to upend the stigma associated with substance use disorders and demonstrate to the community that recovery does happen.”

A new “Recovery Warmline” is available from 7 a.m. to 7 p.m. daily. Community members are encouraged to call for more information about Recovery Corps, referrals to Recovery Coach services, recovery advice, resources and support when struggling with recovery. Services are free within the HOPE Consortium services area - Oneida, Vilas, Forest, Price and Iron counties and Forest County Potawatomi, Lac du Flambeau Chippewa and Sokaogon Chippewa Tribal Nations.

“State and national leaders understand that it’s time to address the crisis of opioid use in our communities. We are dedicated to the wellness of all members of our communities.”

Becky Boquist, program manager AmeriCorps Recovery Corps program

Recovery Corps members pose with Marshfield Clinic Health System AmeriCorps staff at midterm training in Wisconsin Dells.
AMERICORPS AFTERSCHOOL PROMOTES STUDENTS’ SUCCESS

The AmeriCorps national service program engages Americans in service to meet critical community needs in education, public safety, health and environment and Marshfield Clinic Health System works with AmeriCorps to help students succeed.

How?

The health system through its Center for Community Health Advancement (CCHA) provided support in 2017 for three AmeriCorps programs including the AmeriCorps Afterschool program.

Afterschool programs from across the health system’s service area may apply annually to serve as AmeriCorps Afterschool host sites. In 2017, 26 AmeriCorps members were placed with 13 afterschool programs to support youth with academics, personal/social development, mental health support and healthy active living. Members provided over 630 students with direct services and recruited and mobilized 240 volunteers to provide further help for afterschool programs.

Throughout the year members track academic performance and social/emotional learning of children and youth by surveying teachers and parents and results are promising.

According to CCHA’s Randy Neve, Afterschool manager, AmeriCorps members help strengthen alignment between school and afterschool. Youth have shown improvements in academic performance, teachers reported 55 percent of enrolled students improved academic work habits and parents reported improved home life.

“We enrolled our foster daughter in the Youth Net afterschool program in Marshfield two weeks after she moved in with us and we’re so grateful for the warm welcome we all received. As working parents, it’s nice not to worry about the afterschool hours and to know our daughter is participating in something that is both educational and fun. She looks forward to going every day and has grown very close to the AmeriCorps Afterschool members and other staff she sees on a daily basis.”

Seth S., parent
Community Connections Team is pioneering new ways for clinic, campus and community partners to promote health. In the future, Wisconsin’s rural communities will have networks - within but also beyond clinics - bringing voices of individuals with social inequity to empower them to influence how campuses, clinics and communities collaborate to promote health equity. The program will be expanded to other Clinic and community sites using student and community volunteers.

Finally, continuous monitoring will be done on the impact of the program providing evidence that can sustainably inform future work in health equity.

Eighty percent of a person’s health is determined by social factors, like food and housing, access to health care, income and education.

To address these social determinants of health, Marshfield Clinic Health System, Family Health Center of Marshfield, Inc., and the University of Wisconsin-Eau Claire in 2015 launched a program, Community Connections Team, to engage volunteers, most of them university students, and provide referrals to community-based services for patients with unmet social needs.

This experience helps volunteers better understand how social, economic and environmental factors affect overall health and allows Marshfield Clinic health care providers to look beyond the usual scope of practice to improve health.

The program is available at four sites in the Chippewa Valley - Marshfield Clinic Eau Claire, Clairemont and Oakwood centers and Family Health Center Chippewa Falls Dental Center. During medical and dental visits, patients are screened for social needs and referred to volunteers who discuss needs, locate and share resources and provide follow-up to ensure patients are connected with community resources.

In 2017, 31 Community Connections Team volunteers served about 1,200 patients with unmet social needs and made more than 3,600 referrals to community agencies for needs related to utilities, food, clothing, housing, dental, transportation, child care, caregiver support and others.

“We are showing an impact on several patient health indicators such as improved blood sugar, cholesterol, BMI, along with decreased emergency department visits and appointment no-shows,” said Trevor Begin, program manager, Center for Community Health Advancement (CCHA).

CCHA successfully competed for a Wisconsin Partnership Program grant to fund expansion in late 2017. Beginning in January 2018, the Wisconsin Partnership Program provided $1 million over five years to support program refinement and expansion to other communities.

“At least once a week somebody called me and let me know again that I wasn’t alone, somebody cared... Thank you, I appreciate it, my family appreciates it and I’m so grateful. Thank you.”

Elizabeth Standifer, Eau Claire resident
Community Connections Team volunteers serve Eau Claire-area residents by connecting them to community-based services.
Taking medications doesn’t require a pharmacy degree but understanding how to take them safely and effectively does require some special attention.

Medicine label literacy could be a public health issue itself since nearly half of the U.S. population used at least one prescription drug in the past 30 days, according to the Centers for Disease Control and Prevention (CDC). That number rises to 90 percent for adults over age 65, which means making the most difference in increasing pharmacy literacy rates can be made with older adults.

Misunderstanding dosage instructions can lead to serious health consequences. This includes adverse drug events which are responsible for 3.6 million doctor’s office visits per year, 700,000 emergency room visits and 117,000 hospitalizations. Older adults are at a significantly greater risk of misunderstanding drug labels and misusing medications than other age groups.

Wisconsin Health Literacy, through grants from Security Health Plan of Wisconsin, Inc., and the Wisconsin Medical Society Foundation, started to tackle the issue by developing and delivering almost 80 one-hour interactive workshops on medication use to adults, especially older adults and English language learners (ELL) throughout Wisconsin.

Participants learned how to safely and effectively use medications which can lead to better health. Workshop topics included understanding main parts of a prescription medicine label, how to read and interpret special instructions on the label, types of containers and labels for solid and liquid medicines, dosage instructions and strategies to help remember to take one’s medicine, information about over-the-counter medicines and how they may interact with other medicines and basic storage techniques.

Phase I of the project began in 2013 with 12 workshops delivered in a year. Phase II, made possible by the Security Health Plan grant, saw 50 workshops delivered to adults, older adults and ELL within Security Health Plan’s 41-county service area. That year about 700 participants were reached in a wide geographic area from Douglas to Pepin to Green to Forest counties.

“A lot of people take different kinds of medication each and every day. But many of us don’t have a good understanding of when and how these medicines should be taken or of how they might react with other medications we’re taking.”

Kari LaScala, Wisconsin Health Literacy
During an early dismissal day from school, Youth Net elementary-age participants spent time at the Marshfield Clinic Health System YMCA in Marshfield and had access to everything the YMCA had to offer, including the pool.

One little girl selected swimming as her activity.

Through conversations with staff, it was discovered this little girl had never been in a pool, lake or pond and had never worn a bathing suit. So thanks to a swimsuit donation, Youth Net was able to give her the swimsuit and she spent the entire time swimming with a high school mentor who worked in her Youth Net classroom.

Since 1989, Youth Net has provided experiences children would not have otherwise. Last year, nearly 300 children benefitted from all Youth Net had to offer.

This comprehensive after-school educational and prevention program is administered by Marshfield Clinic Health System’s Center for Community Health Advancement (CCHA). Youth Net differentiates the health system from other health systems in Wisconsin and throughout the nation, said Randy Neve, CCHA Afterschool program manager.

Youth Net serves referred Marshfield area youth ages 8-18, with programming focusing on individual outcomes related to academic performance, social-emotional learning and healthy active living. It also provides a safe environment during the critical hours of 3-6 p.m. weekdays and supports working families.

Marshfield School District, Wood County Human Services, Marshfield Clinic Pediatrics and Behavioral Health Departments refer children and youth. Reasons for referral include school performance; a personal or disabling health condition; behavior issues; and/or serious emotional family conflict.

- 67 percent of teachers report improvement in students’ academic work habits;
- 83 percent of parents felt the program improved home life;
- 76 percent of students made friends at Youth Net.

“Youth Net is needed in our community and by students who participate,” said Neve. “Youth Net promotes educational and academic success, personal and social skills, community service opportunities, health and fitness and positive relationships. Students benefit from the structure, chances to learn beyond the regular school day, mentors who provide support, interaction with others and opportunities to just have fun.”
Dick Reiten of Rice Lake has learned that weight loss is definitely an advantage to staying healthy.

Reiten lost 25 pounds through the National Diabetes Prevention Program offered through Lakeview Medical Center (LMC) in Rice Lake so he knows first-hand about weight-loss benefits.

The impact of diabetes on individuals, families and communities is staggering. According to the American Diabetes Association, diabetes was the seventh leading cause of death in the United States in 2015, though this may be underreported.

The cost of diabetes also is staggering:
- $327 billion: Total costs of diagnosed diabetes in the United States in 2017
- $237 billion for direct medical costs
- $90 billion in reduced productivity

And this does not address issues like quality of life.

When it comes to diabetes, people may not know they could have it.

A program, “Know Your Numbers,” is offered annually at LMC. Of those people who’ve attended during the past three years, 33 percent did not know they were at risk for and could develop pre-diabetes. After learning these results, they are then directed to follow up with their primary care physician and could enroll in the diabetes prevention program.

“It’s made life easier physically as far as doing things around the house and taking care of my wife,” Reiten said. “Lifestyle habits I’ve learned will last me the rest of my life. It’s well worth it, especially considering the very low cost.”

Staying healthy and improving quality of life are just two benefits of this program for Reiten. He’s also gained a support network, a taste for healthy foods and a penchant for exercise.

The program offers weekly group meetings with a dietitian and other wellness experts who teach lifestyle changes and skills to help people at risk for diabetes lose weight and reduce their disease risk. After 16 weeks, the group moves to monthly meetings for six months.

“It wasn’t so much a diet program as it was a learning course on lifestyle changes,” Reiten said. “Some of the most helpful aspects were understanding portion control, knowing what foods are diabetes factors and balancing your diet with fruits, vegetables and proteins.”

Participants get a calorie counter book and learn to understand recommended calorie limits. Lifestyle coaches help set goals and track them week to week.

Another program benefit was a reduced rate for a four-month trial at the Health & Wellness Center and he discovered exercise helped keep him on track with his goals.

“Before the program, I thought walking 20-30 minutes a day was good enough for exercise,” Reiten recalls, “but I wasn’t losing weight because I wasn’t changing my eating habits or doing enough for exercise.”

Reiten set an exercise goal of 150 minutes a week it didn’t take long to bump up his gym time. He now maintains an exercise regimen of 45-60 minutes a day five days a week.

“I’m maintaining the weight loss even though the class is done,” Reiten said. “I developed habits during the class that have continued on.”

After completing the program he took advantage of a free “Know Your Numbers” screening at LMC which checked blood sugar, blood pressure, cholesterol and more. Results showed he no longer was at risk for developing diabetes.

Reiten, a retired Rice Lake firefighter, looks forward to continuing his healthy lifestyle as he enjoys retirement and helps care for his wife, Kathie, who has a disability. They also like spending time with their children and their families, including two granddaughters.

He recommends the program to anyone at risk for diabetes or who wants to improve their health.

“No matter what your weight loss or health goal is, this program helps,” he said.
Sara Scheu is busy in her community of Rice Lake, especially since she’s a mom with three children.

And as a Marshfield Clinic Health System employee, she’s busy giving back to her community through her volunteer efforts and Marshfield Clinic Health System’s Employee Volunteer Program.

Through this program, the health system annually recognizes employees who volunteer their time and talent to eligible organizations that enrich lives and improve the health and well-being of our communities. This is the health system’s mission.

Examples include:
• Aging and Disability Resource Center
• American Cancer Society
• American Red Cross
• Big Brothers/Big Sisters
• Boys and Girls Clubs
• Community meal site
• Food and clothing pantries
• Home Delivered Meals
• House of the Dove
• Literacy Council
• Personal Development Center
• Ronald McDonald House
• Rotary
• Saint Vincent de Paul
• Schools
• United Way

Employees volunteer a certain number of hours throughout the year, track those hours and apply for funding through the program. If approved by the health system’s Office of Community Engagement and Community Health, funds are then donated on the employees’ behalf.

Scheu, Marshfield Clinic Information Services Business Development director, is passionate about helping kids learn and teachers teach. She’s volunteered at her children’s school for 11 years in 19 different classrooms at Rice Lake School District’s Hilltop Elementary School and Rice Lake Middle School from pre-K to sixth grade. She’s helped kids with math, reading and writing and done administrative work like making copies.

Employees volunteer a certain number of hours throughout the year, track those hours and apply for funding through the program. If approved by the health system’s Office of Community Engagement and Community Health, funds are then donated on the employees’ behalf.

Scheu and her husband find time to volunteer for other community causes, too. “Life is so busy, but you can carve out time,” she said. “For me it’s finding a way to impact my children’s lives and community. To be able to do that is really important.”

Scheu is grateful for the monetary gift to Hilltop Elementary School and anticipates funding through the Employee Volunteer Program will be used for playground equipment or a walking track re-do.

She encourages everyone to “find your passion, then help out. Give of your time and use what the health system offers employees because this is a really great gift we can share with our communities.” □