



MCHS Hospitals Inc. d/b/a Marshfield Medical Center-Eau Claire
2025-2027 Community Health Needs Assessment



Marshfield Clinic Health System

Dear Community Member,

Marshfield Clinic Health System's (MCHS) 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 more than what happens in the doctor's office. Emphasis needs to be on addressing health choices before medical needs arise through programs, services, public policy or other means wherever and whenever possible.

That's why the MCHS Hospitals Board, Inc., authorized governing body, has adopted this needs assessment on December 12th, 2024.

The 2025 Community Health Needs Assessment (CHNA) process would not have been possible without several community partners and members who provided their time, knowledge, skills, and expertise. The process included key stakeholder meetings, surveys, community conversations, and a variety of primary and secondary data sources.

This document summarizes key findings and reflects a point in time. Electronic versions and companion documents can be found at: <https://marshfieldclinic.org/about-us/community-health-needs-assessment-reports>

Through these collaborative efforts, the top health priorities identified through the 2025-2027 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 MCHS Hospitals, Inc. d/b/a Marshfield Medical Center-Eau Claire (hereafter referred to as MMC-Eau Claire) are:

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

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. Brian Hoerneman, Interim CEO –Marshfield Clinic Health System

Bradley Groseth, President – MMC-Eau Claire

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Introduction

Community Health Assessment (CHA) and Community Health Needs Assessment (CHNA) refer to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis. These assessments are conducted to identify the community's health needs, prioritize top health concerns, and encourage community members to improve their community's health. Health Departments are required to conduct a CHA at least every five years [1]. Non-profit (tax-exempt) hospitals are required by the Affordable Care Act to conduct a CHNA once every three years. Hospitals can choose to partner with local health departments and other local non-profit hospitals or agencies to conduct a CHA/CHNA [2].

MMC-Eau Claire partnered with Eau Claire, Dunn, and Chippewa County Health Departments, Mayo Clinic Health System, United Way of the Chippewa Valley, HSHS Sacred Heart and Saint Joseph's Hospitals and others to carry out the CHNA process. A full list of those involved in the process can be found at Appendix B. This publication describes the process used to assess the health of the community, the results of that process, and prioritization of the health needs that will be addressed by MMC-Eau Claire. MMC-Eau Claire looks forward to collaborating with community partners to improve the health of the community.

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

Health System Overview

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

The Clinic became a 501(c)(3) nonprofit organization in 1992 and in 2014, Marshfield Clinic Health System, Inc., was formed. The Health System's mission is to enrich lives and create healthy communities through accessible, affordable, compassionate health care. The Health System believes individuals have the right to their highest potential level of health and well-being. We will achieve this by advancing health equity¹ with our patients, health plan members, employees and communities.

¹ See Appendix A for definition.

The Health System serves Wisconsin and Michigan's Upper Peninsula with more than 1,600 providers comprising 170 specialties, health plan, and research and education programs. Primary operations include more than 60 Marshfield Clinic locations, 11 hospitals, Marshfield Children's Hospital, Marshfield Clinic Research Institute, Security Health Plan and Marshfield Clinic Health System Foundation [3].

Unique to Marshfield Clinic Health System is its investment in the Center for Community Health Advancement (CCHA). CCHA is a department within MCHS that builds bridges between the Health System and the communities it serves. CCHA coordinates collaborative efforts between MCHS hospitals and local coalitions, businesses, educational systems, law enforcement agencies, Tribal Nations, local governments, and other entities to improve community health. This collaboration helps align health improvement efforts of the community and hospital with community health priorities² identified in the CHNA.

Hospital Overview

MMC-Eau Claire is a 56-bed hospital located in Eau Claire, Wisconsin. MMC-Eau Claire is a fully integrated medical campus and offers a variety of health care services to Eau Claire County residents and the surrounding communities.

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

- Birth services
- Cancer care services
- Emergency department and urgent care
- Advanced spine and orthopedic surgery
- Level III trauma center
- Cardiovascular services and more [4]

MMC-Eau Claire opened in 2018, however Marshfield Clinic Health System has been providing care to the Chippewa Valley for over 30 years. The Health System's network of care in the region includes multiple clinics, inpatient and outpatient physical therapy, a cancer center, and access to 197 primary and specialty care providers. MMC-Eau Claire provides access to over 100 specialties, employs 1,300 staff in the region, and provides many internship and clinical experiences for local college students. [4]

Our Community

MMC-Eau Claire is a fully integrated medical campus located in Eau Claire, Wisconsin.

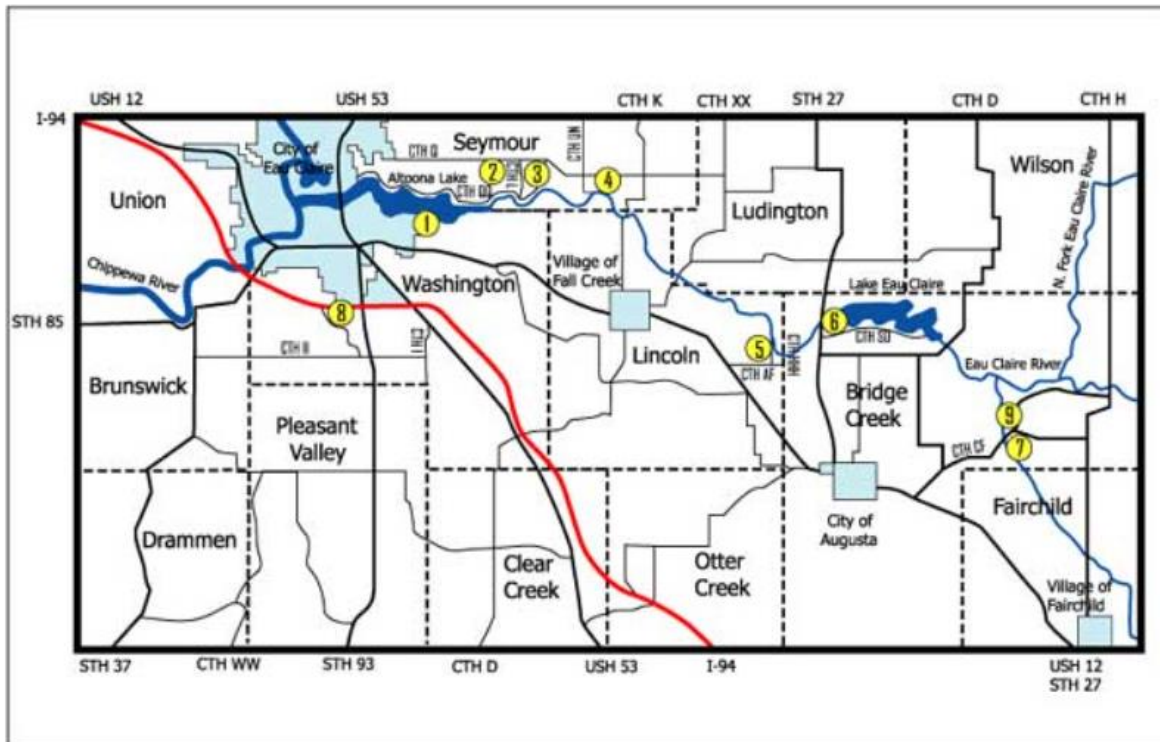
² See Appendix A for definition.

Eau Claire is one of three cities located in Eau Claire County and serves as the counties seat. MMC-Eau Claire serves patients and residents of Eau Claire County but also provides critical services to patients and community members in neighboring counties. However, for this report's purpose, the community served by MMC-Eau Claire is defined as Eau Claire County residents.

Geographic Area

Eau Claire County is located in the western region of Wisconsin about 85 miles east of Minneapolis-St. Paul [5]. Incorporated in 1872, Eau Claire County has 637.9 square miles of land area making it the 44th largest county in Wisconsin by total area [5], [6] The county is comprised of three cities (Eau Claire, Altoona, Augusta), three villages (Fairchild, Fall Creek, Lake Hallie) and 13 towns [7] with a total population of 105,710 [6]. The Wisconsin Office of Rural Health considers Eau Claire County one of the few urban counties in Western Wisconsin [8]. See the Wisconsin Urban and Rural Counties map in Appendix F.

Figure 1: Eau Claire County Map [9]



Local Industry, Resources, and Attractions

Eau Claire County is an urban county in western Wisconsin with many local resources and attractions. The county has many public and charter schools and some private schools, as well as three colleges including the University of Wisconsin-Eau Claire, Chippewa Valley Technical College, and Immanuel Lutheran College. Some of the county's top industries are manufacturing, information technologies, health care, and retail trade [5].

Eau Claire offers tourists and residence alike plenty of amenities and attractions to enjoy, such as over 70 miles of connected bike trails, many public parks and playgrounds, and many options for shopping, dining, and entertainment. The Eau Claire and Chippewa River both run through Eau Claire County offering fishing, swimming, and other water sports and recreation to the area. [10]

Eau Claire County is home to many festivals and events including the Silver Mine Ski Invitational, Banbury Art Crawl, Lake Martha Days, the Eau Claire Marathon, Country Fest, Country Jam, and many more. Eau Claire is also home to a Northwoods League baseball team: The Eau Claire Express. [11]

Eau Claire County offers many resources to its residence including a public transit system, hospitals and healthcare systems, multiple YMCA locations, assisted living and nursing home options, and more [12].

Health Disparities

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

"Health disparities adversely affect groups of people who have systematically experienced great social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion [13]."

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

Demographics

Demographic data, such as age, race, sex, gender and socio-economic status, can provide more information beyond the size or growth of a population. This type of data gives insight on unique qualities and differences in communities. Demographic data provides a basis for understanding a community and allows for tracking changes over

time to understand what strategies or policies are affecting a community, positively or negatively [14].

Age

Age is an important demographic to consider when looking at a community's health priorities because health needs differ over a lifespan. Strategies and interventions to address the health of the community will look different depending on the age of the intended population. The average age of Eau Claire County residents is 35.7 years [6]. Although Eau Claire County has residents of every age, the county has a large percentage of residents between the ages of 20-40. This population may be at higher risk for certain health conditions or needing certain healthcare services such as birth and reproductive services or preventative screenings and testing.

Socioeconomic Status (SES)

Socioeconomic status is a concept used to describe people based on factors such as their education, income, living conditions, resources, and access to opportunities. "People with lower socioeconomic status usually have less access to financial, educational, social, and health resources than those who have a higher socioeconomic status. As a result, they are more likely to be in poor health and have chronic health conditions and disabilities." [15]

The median household income for Eau Claire County is \$70,127, which is slightly below the Wisconsin median household income (\$72,458). Median gross rent in Eau Claire County is \$929, with 11.5% of the population living in poverty. The percentage of Eau Claire County residents who graduate from high school is higher than the state average (96.1% vs. 93.1% respectively) and the percentage of residents with a bachelor's degree or higher (35.4%) is also higher than the state average (32%). [16]

Racial/ethnic minorities³

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

88.7% of Eau Claire County residents identify as white alone, not Hispanic or Latino. 4.5% of the Eau Claire County population identifies as Asian alone, followed by 3.2% Hispanic, 2.2% two or more races, and 1.3% Black or African American alone. The following races are equal to or less than 1% of the Eau Claire County Population: American Indian or Alaskan Native, and Native Hawaiian and other Pacific Islander

³ See definition in Appendix A.

[16]. 9.3% of the households in Eau Claire County speak a language other than English in the home [6].

Sexual and Gender Minority groups (SGM)

Sexual and Gender Minority (SGM) populations include but are not limited to individuals who identify as gay, lesbian, bisexual, or transgender and others whose sexual orientation, gender identity or expression, or reproductive development is characterized by non-binary⁴ constructs. SGM groups experience higher risk for poor health outcomes and unhealthy lifestyle behaviors. They may also receive poor quality of health care due to stigma, their unique needs not being considered, or lack of provider awareness.

At this time, Sexual and Gender Minority data does not exist for Eau Claire County as a whole. However, 1.2% of Eau Claire County Community Health Assessment respondents identified as “non-binary/non-conforming” or “self-describe/other” when asked with what gender do you most identify.

In Wisconsin, 3.8% of adults (18+) are LGBTQ (2019), and the total LGBTQ population (13+) totals 207,000 (2020). 29% of LGBTQ adults (25+) are raising children. Wisconsin’s LGBT community experiences disparities in income (25% with incomes less than \$24K vs. 16% non-LGBT), food security (18% vs. 11% for non-LGBT) and has lower rates of attending and graduating from college than the non-LGBT population. [17], [18].

People with Disabilities

People with disabilities often experience health conditions that lead to poorer health and shorter lifespan. In addition, they often face discrimination, inequality and unjust structural practices which can further result in poorer health outcomes. Programs and policies often limit access to timely and comprehensive health care, which can also lead to poorer health outcomes for those with a disability [19]. 9.7% of the Eau Claire County population under the age of 65 years is living with a disability [16].

Other

After this Community Health Assessment was completed, Hospital Sisters Health System (HSHS) closed both its Sacred Heart hospital located in Eau Claire, WI, and St. Joseph’s hospital located in Chippewa Falls, WI. The closing of these hospitals severely impacted healthcare not just for Eau Claire County but for all Western Wisconsin. Another closure that impacted Eau Claire County residents was the closure of Prevea clinics in Western Wisconsin. Prevea Health Center owned and operated several clinics in Western Wisconsin, that closed in March of 2024 including Altoona, Chippewa Falls, and two Eau Claire locations. These closures affect the number of primary and specialty

⁴ See definition in Appendix A.

care providers in the area, as well as emergency services and employment of healthcare professionals. When the primary and secondary data was gathered for this assessment, these hospitals and clinics were still operating.

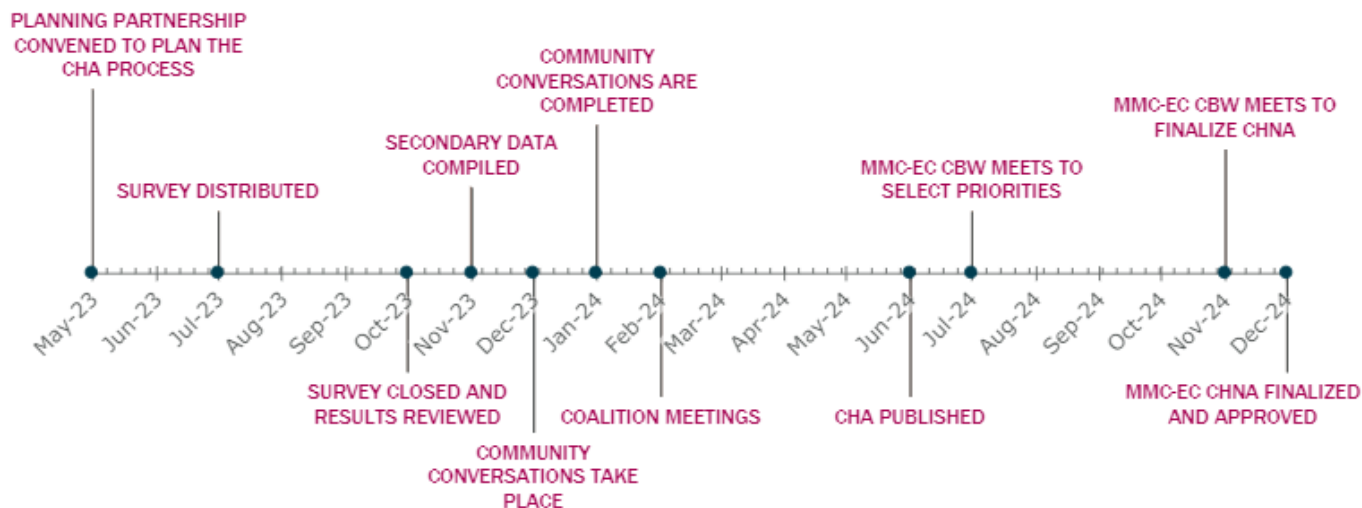
Assessing the Needs of the Community

Overview of Assessment Process and Timeline

The MMC-Eau Claire Community Benefit Workgroup (CBW) is a local internal workgroup of MMC-Eau Claire focused on community benefit. The CBW-Eau Claire identified and prioritized community health needs through a comprehensive process that included primary and secondary qualitative data, quantitative data, and a collaborative review and assessment process. The MMC-Eau Claire CBW recognizes that health is determined by more than just health care, therefore the community health assessment process is designed to assess the overall state of well-being of that community. The broad nature of the primary data questions and topics assured that, for MMC-Eau Claire’s CHNA purposes, health equity data was also captured and analyzed. For a complete list of those involved in the MMC-Eau Claire CBW please see Appendix B.

Figure 2: Community Health Needs Assessment (CHNA) Timeline

MMC-EC CHNA Timeline



Process and Methods

This CHA process included not only Eau Claire County but also, Chippewa Falls and Dunn County. This was done in order to share resources, reduce duplication of work, and understand the health needs of each community. Many residents may live in one community and work in another, or access resources such as healthcare across county

lines. While the process included the three counties, each county received its own assessment specific to the county.

Figure 3: Healthy People 2030 Social Determinants of Health⁵ Model [20]

Social Determinants of Health

What are social determinants of health?

Social determinants of health (SDOH) 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.

SDOH can be grouped into 5 domains:

 Economic Stability	 Education Access and Quality	 Health Care Access and Quality
 Neighborhood and Built Environment	 Social and Community Context	



[Download SDOH graphic \(141.23 KB\)](#)

Suggested citation 

The CHA planning committee followed the Healthy People 2030 Social Determinants of Health Model to frame the CHA process. The committee also drew from expertise, public comments made on the previous CHA, and experience from previous CHA processes. It was also important for the committee to make equity the foundation of the CHA, the goal being to identify starting points and address inequities to ensure everyone can achieve optimal health. [21]

Data Sources

Both primary and secondary data collection methods were utilized to develop a thorough understanding of the health issues facing members of the Eau Claire County community. Primary data included a county-wide survey and community and coalition conversations. Secondary data was compiled by using the Healthy People 2030 model to identify 25 issues that impact health and collecting local, state, and national data on those issues from a variety of sources including: 2023 County Health Rankings⁶, Center

⁵ See definition in Appendix A.

⁶ See definition in Appendix A.

for Disease Prevention and Control, Behavioral Risk Factor Surveillance System, and Wisconsin Department of Health Services.

For a complete list of data sets used please see Appendix E.

Primary Data Collection

Community Health Assessment

Primary data was collected through a community survey from July 2023 through September 2023. The survey was open to anyone 18 years of age or older who lives or works in Eau Claire County. Respondents were asked to choose the top five issues that are “the biggest problems for their community” based on a list of twenty-five issues that impact health. Respondents were then asked why they ranked those issues as the top five. Respondents also had the option to write-in issues not listed and their ideas for solutions to these problems. The survey was available electronically through the platform “SurveyMonkey” as well as in paper copy format. The survey was available in English, Hmong, and Spanish.

The survey was distributed widely, and intentional efforts were made to distribute the survey to historically underrepresented populations of this survey such as: men, people of color, families, and people with a lower socioeconomic status. Radio and newspaper ads were used to inform the community about the survey as well as social media posts, and flyers distributed to businesses and local organizations such as libraries and food pantries. Outreach was done with minority populations through partnership with groups such as Eau Claire Hmong Mutual Assistance Association and El Centro. Paper surveys were distributed to the Eau Claire County jail and Aging and Disability Resource Center of Eau Claire.

A total of 1,368 survey responses were received, well above the number of surveys needed to report validity at the 95% confidence level. CHA partners took steps to monitor survey respondents’ demographics throughout the process in an attempt to match county demographics as closely as possible and do more targeted outreach if necessary. While efforts were made to distribute the survey widely, some demographic groups answered the survey at a higher proportion than the demographics of Eau Claire County. Women made up about 70% of survey respondents although they make up 50.3% of the Eau Claire County population. 22% of survey respondents were between the ages 35-44, however that age range accounts for 12% of the Eau Claire County population. People with a bachelor’s degree or more advanced degree accounted for 62% of survey respondents but only 35.4% of the population. Those with a household income of \$75,000 or more a year (above the median household income for Eau Claire County) also accounted for a higher percentage of survey respondents than population. In the future, efforts will continue to more closely match the demographic data of Eau Claire County and demographic data of future CHA survey respondents. [21]

Primary Data Collection Results

Community Health Assessment

Top Areas of Improvement for Eau Claire County based on the CHA Survey

Lack of safe or affordable housing

Substance misuse

Poor mental health

Lack of access to childcare or unaffordable childcare

Alcohol misuse

Community Conversations

Community conversations were held in order to give Eau Claire County residents another opportunity to participate in the CHA process and to help prioritize top health needs for the community. Poster boards were used to display primary and secondary data on issues impacting the health of the community. Participants were encouraged to look through the data, ask questions, provide comments via anonymous sticky notes and then rank the top five health issues they felt affect their community the most. These community conversations were hosted in public places, oftentimes where events were already occurring so they would be highly trafficked. Effort was made to ensure the community conversations were held at a variety of locations, days, and times in order to get feedback from individuals or groups who cannot often participate in these conversations. Some conversations were also held virtually over Zoom and the same data was displayed via PowerPoint Presentation with an anonymous ranking survey provided at the end. [21]

The community conversations allowed for additional feedback from 153 community members. The in-person Eau Claire County community conversation locations included: The L.E. Phillips Senior Center in Eau Claire, The Community Table (a county meal site) in Eau Claire, A high school varsity hockey game in Eau Claire, Woodman's food market in Altoona, and Library story time in Fall Creek. The purpose of the community conversations was to take place of the traditionally held stakeholder meetings that

typically only allowed for those in professional roles available during the week to attend the data conversation and further prioritize for the CHA. [21]

Figure 4: Data Board Display [21]



Community Conversations

Top Areas of improvement for Eau Claire County based on Community Conversations

Lack of safe or affordable housing

Poor mental health

Substance misuse

Alcohol misuse

Lack of access to childcare or unaffordable childcare

Eau Claire Health Alliance Coalition Meeting

In February 2024, the Eau Claire Health Alliance (A local coalition who uses the CHA data to direct their work) was brought together to further prioritize the health issues that impact Eau Claire County. This group reviewed the data from the CHA, community conversations, and secondary data and provided a rich discussion of the data in context with Eau Claire County. Many members of this coalition have expertise and experience with working on improving the health of Eau Claire County. Participants considered and discussed preventability of the problem, capacity to address the problem, and community support for the problem. There were 37 participants, from a wide range of backgrounds and organizations, many with public health expertise. The meeting concluded with members getting three votes to rank the top health needs of Eau Claire County. Votes were conducted anonymously, and votes had to be used for a different health priority area. [21]

Coalition Conversations

Top Areas of improvement for Eau Claire County based on Coalition Conversations

Substance misuse

Poor mental health

Lack of safe or affordable housing

Alcohol misuse

Poor nutrition or unhealthy food

Secondary Data Collection and Review

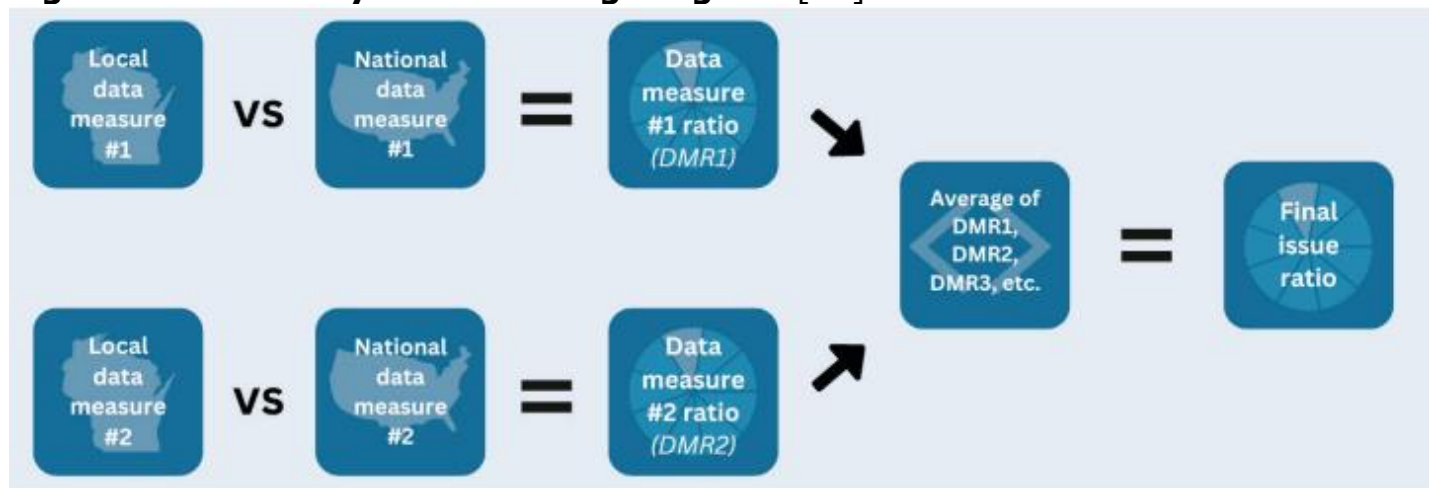
Local, state, and national quantitative data was gathered and reviewed by the CHA partnership using data sources that were recommended by the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and followed the Healthy People 2030 framework. Core data sets were used based on the following criteria:

- Were connected to one of the 25 chosen issues that impact health.
- Could be compared locally and nationally.
- Could be collected for all three counties.
- Had data values from the past five years. [21]

Data sources included Healthy People 2030 model to identify 25 issues that impact health and collecting local, state, and national data on those issues from a variety of sources including: 2023 County Health Rankings, Center for Disease Prevention and Control, Behavioral Risk Factor Surveillance System, and Wisconsin Department of Health Services (for a complete list of data sets used please see Appendix E).

“To rank the issues that impact health based on the secondary data, CHA partners compiled numerical data measures related to each of the issues that impact health at the local and national levels. State-level data was used if national-level data was not available. CHA partners then took a ratio of the local numerical value for a data measure and compared it against the national numerical value. A ratio value less than 1 indicated that the local value was worse than the national value. Similarly, a ratio value greater than 1 indicated that the local value was better than the national value. If an issue that impacts health had more than one data measure, an average of all the ratios was taken to create a single ratio. The issues were then ranked from lowest to highest, with the lowest ratio ranked #1 and the highest ratio ranked #25. This helped gauge how the county's issues that impact health stacked up against those of the entire country [21].”

Figure 5: Secondary Data Ranking Diagram [21]



Secondary Data Collection Results

Top Health Needs in Eau Claire County According to Secondary Data Review

Alcohol misuse

Vaping and
tobacco use

Not enough
green space

Poor nutrition
or unhealthy
food

Lack of access
to digital
resources

Prioritizing Community Needs

Eau Claire County Prioritization Process

The prioritization process of the health needs is summarized below.

Eau Claire County used a weighted prioritization matrix to do a final ranking of the issues that impact health. The matrix was based on a prioritization technique from the National Association of County and City Health Officials (NACCHO).

Figure 6: Eau Claire weighted prioritization matrix [21]



Prioritization Process Results

Final Weighted Rankings of the 2024 Health Priorities

1. Alcohol Misuse

2. Poor Mental Health

3. Lack of Access to Childcare or Unaffordable Childcare

4. Substance Misuse

5. Lack of Safe or Affordable Housing

6. Lack of Affordable or High Quality Health Insurance

7. Vaping and Tobacco Use

8. Poor Nutrition or Unhealthy Food

9. Health Care is Difficult to Access

10. Lack of Jobs That Can Support a Family/Myself

11. Healthy Food is not Affordable

12. Lack of Physical Activity

13. Lack of Affordable Treatments for Health Conditions

14. Environment or Water Pollution

15. Not Enough Green Space

16. Lack of Community Connectedness

17. Lack of Access to Digital Resources

18. Low-Quality Early Education

19. Lack of Higher Education Opportunities

20. Racism and Discrimination

21. Lack of Accessibility for People with Disabilities

22. Low-Quality or Lack of Public Transportation

23. Lack of Adult Education Opportunities

24. Community is not Safe

25. Limited Emergency Services Nearby

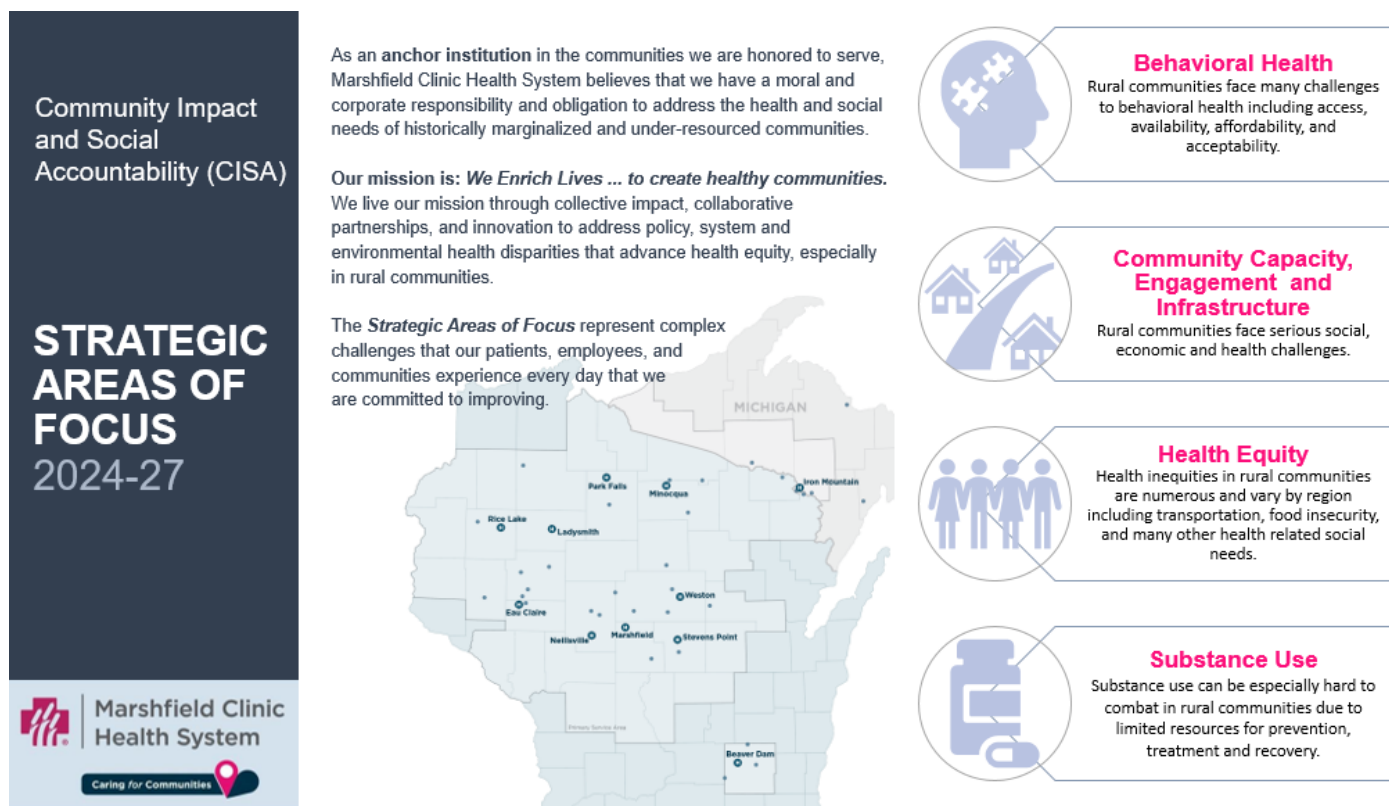
MCHS Prioritization Process

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

The 2024-2027 CCHA Strategic Areas of Focus are system-wide community health focus areas approved by the MCHS Community Health and Benefits Steering Committee. Subsequently, Strategic Areas of Focus are integrated into MMC Implementation Strategy⁷ (IS) plans and other MCHS and Security Health Plan (SHP) plans to align system and regional efforts. The strategic focus areas are:

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

Figure 7: Marshfield Clinic Health System Strategic Areas of Focus



⁷ See definition in Appendix A.

The CBW-Eau Claire met in June and October 2024 to discuss the results of the CHNA and provide hospital approval. Additional consideration of alignment with the system strategic priorities was made. Further criteria were used to determine health priorities including:

- The burden, scope, severity, or urgency of the health need.
- The estimated feasibility and effectiveness of possible interventions.
- The health disparities associated with the need.
- The importance the community places on addressing the need. [22]

MMC-Eau Claire Health Priorities for 2025-2027

After completing extensive review of the Community Health survey and process, United Way ALICE data⁸, Healthiest Wisconsin 2020, County Health Rankings, and other quantitative and qualitative data, the top community health priorities identified by MMC-Eau Claire are:

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

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

Description and Supporting Data of Prioritized Community Health Needs

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

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

⁸ See definition in Appendix A.

Substance Use

40% of community health survey respondents believe substance misuse decreases overall community cohesion^[1].

40% agree there are community safety issues, such as driving under the influence, when misusing substances^[1].


What is alcohol & substance misuse?

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





INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS^[2]

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

Individual Impact

-  heart disease
-  liver disease
-  overdose
-  death

Community Impact

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

THE SCOPE ACROSS EAU CLAIRE COUNTY

26%

or 1/4 of Eau Claire high school students has ever tried e-cigarettes/vape/Juul.^[4]

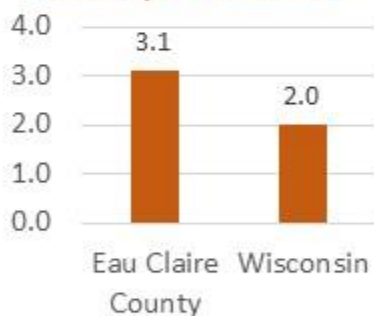


20%

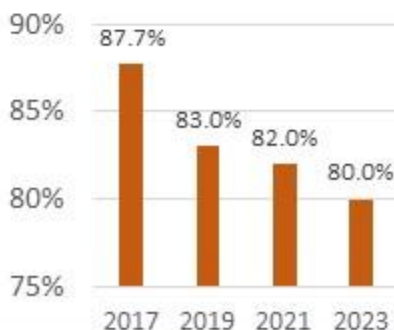
or 1/5 of Eau Claire high school students drank alcohol in the past 30 days.^[4]



Methamphetamine overdose deaths per 100,000^[5]

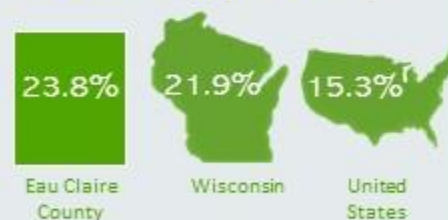


% of Eau Claire high school students who perceive Rx drug misuse as harmful^[6]

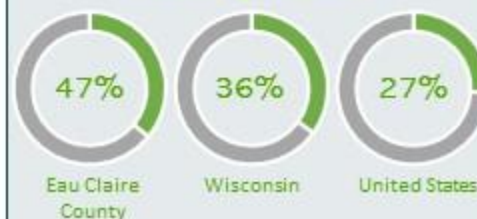


Eau Claire County rates **higher** than state and national averages for binge drinking and for driving deaths involving alcohol.

Rates of Binge Drinking^[1]



Driving Deaths Involving Alcohol^[1]



1. Eau Claire County 2024 Community Health Assessment

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

3. County Health Rankings, 2024

4. Eau Claire County – 2021 Youth Risk Behavior Survey

5. WI Dept of Health Services (2014-2020)

6. YRBS (Multiple years) <https://www.ehealthalliance.org/opioid-dashboard-part-i-use>

Behavioral Health

14% of community health survey respondents believe mental health is related to many of the other issues in the community^[1]

What is behavioral health?

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

INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS^[2]

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

Individual Impact

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

Community Impact

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

THE SCOPE ACROSS EAU CLAIRE COUNTY

Eau Claire County reports HIGHER RATES of self-harm than state averages.

Rate of self-inflicted Emergency Room visits per 100,000 residents^[1]

84.5

Eau Claire County

72.2

Wisconsin

Number of suicide deaths per 100,000 residents^[1]

17

Eau Claire County

15

Wisconsin

50%

of Eau Claire county middle and high school students had problems with anxiety in the past 12 months^[4]



1 in 5

Eau Claire county high school students hurt themselves on purpose (self-harm) in the past 12 months^[4]

Over 40%

of Eau Claire county high school students feel like they don't belong in school^[4]

Of the students who answered 'yes' to any of the mental health questions...

87%

...identify as LGBT^[4]

71%

...have a disability^[4]

72%

...are food insecure^[4]

Health Equity

50% of community health survey respondents said the county lacks necessary infrastructure to allow for accessibility^[1].

What is health equity?

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

INDIVIDUAL AND COMMUNITY HEALTH IMPLICATIONS^[2]

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

Individual Impact

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

Community Impact

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

THE SCOPE ACROSS EAU CLAIRE COUNTY

13% of the Eau Claire County Population is living below the federal poverty line.^[1]



10% of Eau Claire County homeowners are spending 50% or more of their household income on housing.^[1]



Housing Costs (50%)



1 in 3 middle schoolers...



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

...experienced hunger due to a lack of food at home in the past 30 days.^[4]

Among the social determinants of health, Eau Claire County residents indicated the following concerns^[1]...



89%

said wages are not keeping up with the current cost of living



61%

said childcare makes up a large percent of a household's income



60%

said housing is very expensive throughout the county

Partnerships and Collaboration

MMC-Eau Claire and Eau Claire City/County Public Health will be working collaboratively on cross-cutting priorities. MMC-Eau Claire staff are actively participating in development of the Eau Claire County Community Health Improvement Plan (CHIP), which began in Fall 2024. Eau Claire County Public Health has prioritized the following issues:

- Mental Health
- Physical Health
 - Chronic disease
 - Obesity
 - Nutrition
 - Physical inactivity
- Substance Use
- Basic Needs

MMC-Eau Claire staff are actively involved in Eau Claire Health Alliance and other community groups and coalitions that are working to address the above health issues in Eau Claire County.

Health Needs Not Addressed

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

After consideration, the following health needs will not be addressed by MMC-Eau Claire as other community organizations are better equipped and have the resources in place to lead efforts to address them. Cross-cutting efforts in MCHS's Strategic Areas of Focus may indirectly address some of these health needs:

- Physical Health
- Lack of access to childcare or unaffordable childcare
- Lack of safe or affordable housing

Potential Resources to Address Health Needs

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

- Eau Claire City/County Health Department
- Eau Claire Health Alliance:
 - Substance Misuse Action Team
 - Alcohol Misuse Action Team
 - Mental Health Action Team
 - Physical Health Action Team
 - Basic Needs Action Team
- Mayo Clinic Health System
- Aging and Disability Resource Center of Eau Claire
- Eau Claire County Health and Human Services
- United Way of the Greater Chippewa Valley
- Eau Claire County School District
- YMCA's of the Chippewa Valley
- Others

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.

The MMC-Eau Claire CBW will contribute to MMC-Eau Claire's community benefits and community health initiatives and will oversee the three-year implementation strategy plan. This group will develop a strategic plan that demonstrates the potential to have the most impact on improving selected health priorities, and that will focus on the social determinants of health⁹ to subsequently reduce health disparities.

MMC-Eau Claire CBW will evaluate implemented programs and activities and track key performance indicators during each year of the implementation strategy. With the help of respective partners, an analysis will be completed to identify new and current resources that can better be 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 12th, 2024.

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

⁹ See Appendix A for Definition

Evaluation of the Impact of the Preceding Implementation Strategy

Health priorities identified in the preceding CHNA completed in 2021 were:

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

Alcohol and Substance Abuse

Strategy	Summary of Actions Since 2021 CHNA
Support alcohol and other drug (AOD) prevention curriculums in school and/or afterschool setting.	Promoted BOTVIN Lifeskills curriculum to Eau Claire and Chippewa County Schools and after school programs.
Support community wide environmental strategies, prevention, and/or policy to address underage alcohol use.	Supported retailer trainings to educate on the impacts of underage drinking, how to correctly read an ID, how to spot fake IDs, and how to deny sales to minors.
Support workplace drug prevention and recovery efforts.	A variety of recovery supportive workplace resources were developed in partnership with Security Health Plan.
Participate in community-based workgroups.	<p>Participated in Hope Gospel Mission Board which oversees a recovery program for those who are struggling with substance misuse.</p> <p>Participated in Eau Claire Health Alliance AOD action teams.</p>

Behavioral Health

Strategy	Summary of Actions Since 2021 CHNA
Enhance community member's skills to support mental health promotion and suicide prevention.	<p>Provided a 2-part resiliency series with the Chippewa County Collaborative</p> <p>Promoted 4 virtual community Question Persuade Refer (QPR) suicide prevention trainings.</p>
Support suicide prevention community awareness events.	Supported screenings of "The Ripple Effect".
Enhance school capacity to provide high quality social, emotional assessment, support and learning.	<p>Promoted b.e.s.t., (Behavioral Emotional Social Traits), a universal screening tool to help educators support the emotional health of students.</p> <p>Promoted Life Tools, a social emotional program (SEL) for youth.</p> <p>Supported school pulse program.</p>
Participate in community-based workgroups.	<p>Participated in:</p> <ul style="list-style-type: none"> • Mental Health Matters • Eau Claire Health Alliance Mental Health Action Team • Chippewa health improvement partnership mental health action team • Chippewa Valley Suicide prevention

Chronic Disease

Activity	Summary of Actions Since 2021 CHNA
Increase community capacity to provide nutritious, locally grown food and address food insecurity.	Provided funding and support to the farmers markets to increase Market Match program funds.
Enhance programming to impact chronic disease self-management and prevention with a focus on obesity and diabetes.	Provided a free, virtual diabetes prevention program led by CDC-certified lifestyle coaches to empower participants to prevent or delay the onset of Type 2 Diabetes
Participate in community-based workgroups	Participated in: <ul style="list-style-type: none"> • Feed My People Food Bank- Board of Directors. • Eau Claire Health Alliance (ECHA) Chronic Disease action team • Chippewa health improvement partnership Chronic Disease Prevention Action Team & Farmer’s market workgroup

Social Determinants of Health

Activity	Summary of Actions Since 2021 CHNA
<p>Conduct an organizational (internal) assessment and community (external) assessment of health disparities and health equity and develop a work plan to address those gaps.</p>	<p>Established internal office of Health Equity, Diversity, and Inclusion.</p>
<p>Support and connect patients and community members to resources to address socially determined needs.</p>	<p>Integrated SDOH screening tool.</p> <p>Promoted Findhelp, a resource directory available for patients and community members.</p>
<p>Participate in community-based workgroups</p>	<p>Participated in:</p> <ul style="list-style-type: none"> • Chippewa health improvement partnership health equity team • United Way Health Advisory Council • United Way Community Impact Council • Eau Claire Pride event

Appendix A: Definitions

Health Equity: Achieved when every person has the opportunity to attain one's fullest or highest level of health potential. Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health. Achieving this requires focused and ongoing societal efforts to address historical and contemporary injustices; overcome economic, social, and other obstacles to health and healthcare; and eliminate preventable health disparities. (Centers for Disease Control and Prevention, 2022)

Health Priority(ies): Selected health issues to be addressed by hospitals based on a prioritization process and community input collected via survey, community conversations, focus groups, and/or coalition meetings; and secondary data review.

Implementation Strategy (IS): a written plan that describes the actions and activities the hospital facility plans to implement or support to address each health need identified by the CHNA. The plan includes a written explanation if the hospital facility does not intend to address an identified health need. An authorized body of the hospital facility must adopt the implementation strategy on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility finished conducting the CHNA. (IRS, 2023)

Minority: a part of a population thought of as differing from the rest of the population in some characteristics and often subjected to differential treatment (Merriam-Webster online dictionary, 2024)

Non-binary: relating to or being a person who identifies with or expresses a gender identity that is neither entirely male nor entirely female (Merriam-Webster online dictionary, 2024)

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 for ALICE, 2023)

University of Wisconsin's Population Health Institute's County Health Rankings: a program of the University of Wisconsin Population Health Institute that provides data, evidence, guidance, and examples of the multiple factors that influence health. The rankings have the ability to measure the health data of almost every county in the United States and are complemented by guidance, tools, and resources to accelerate community learning and action. (County Health Rankings, 2023)

Appendix B: Individuals Involved in the CHNA

Community Benefit Workgroup-Eau Claire

- Bradley Groseth: MMC-Eau Claire President
- Mickey Ganschow: Marshfield Clinic Health System Community Benefits Coordinator
- Gina Leath: West Market Chief Nursing Officer
- Dr. Brandon Parkhurst: West Market Vice President of Medical Affairs
- Jenny Benrud: West Market Practice Management Administrator

CHA Planning Partnership Committee

- Brooke Berg: Director of Community Engagement- Mayo Clinic
- Hailey Bomar: Planning & Promotion Specialist- Chippewa County Department of Public Health
- Alex Craker: Public Health Planner- Eau Claire City-County Health Department
- Brittnay Fortuna: Director/Health Officer- Chippewa County Department of Public Health
- KT Gallagher: Direct/Health Officer- Dunn County Health Department
- Mickey Ganschow: Community Benefits Coordinator- Marshfield Clinic Health System
- Luisa Gerasimo: Board Member- United Way of Dunn County
- Lieske Giese: Director/Health Officer- Eau Claire City-County Health Department
- Nikki Hoernke: Planning & Strategy Division Manager- Chippewa County Department of Public Health
- Isabella Hong: Community Impact Director- United Way of the Greater Chippewa Valley
- Kaitlin Ingle: Public Health Educator- Dunn County Health Department
- Melissa Ives: Outreach Facilitator- Hospital Sisters Health System
- Ryan Ludy: Executive Director- United Way of the Greater Chippewa Valley
- Kim Luz-Mobley: Community Health Director- Hospital Sisters Health System
- Maria Seibel: Community Engagement Specialist- Mayo Clinic Health System NWWI
- Cortney Sperber: Policy & Systems Division Manager- Eau Claire City-County Health Department
- Darcy Vanden Elzen: Director of Community Health- Marshfield Clinic Health System

Appendix C: Community Health Survey

<https://www.eauclairewi.gov/home/showpublisheddocument/46064/638568183295200000> p. 46-49

Appendix D: Community Health Survey Results

2023 Eau Claire County Community Health Survey Results:

<https://www.eauclairewi.gov/home/showpublisheddocument/46064/638670184508000000>

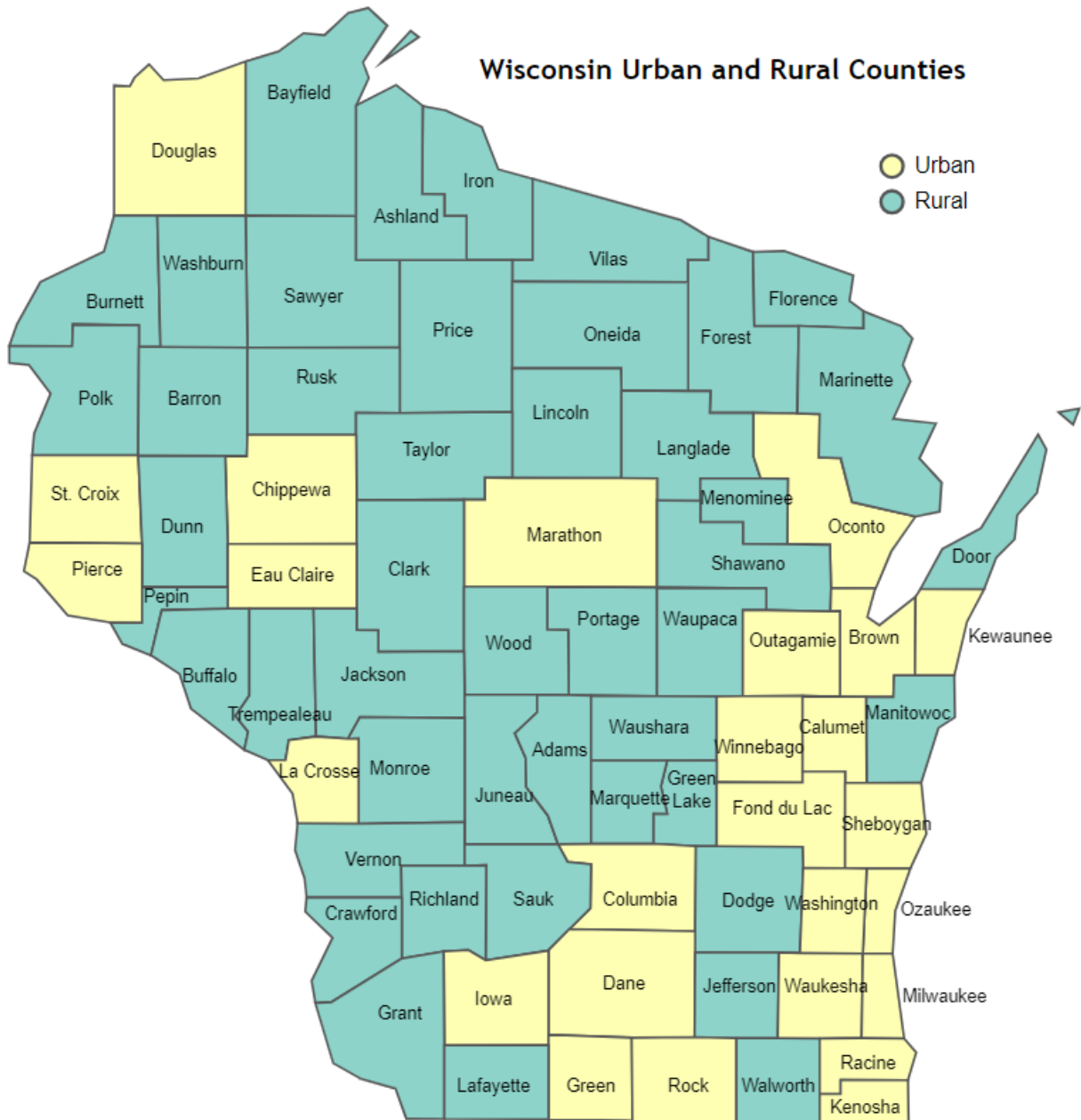
Demographics of survey respondents: p. 51-53

Survey results: Column 1 p. 73-74

Appendix E: Secondary Data Sources

<https://www.eauclairewi.gov/home/showpublisheddocument/46064/638568183295200000> P. 56-61

Appendix F: Rural and Urban County Map



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

Appendix G: References

- [1] "CDC: Public Health Professional Gateway," Centers for Disease Control and Prevention, 16 May 2024. [Online]. Available: <https://www.cdc.gov/public-health-gateway/php/public-health-strategy/public-health-strategies-for-community-health-assessment-health-improvement-planning.html>. [Accessed 16 August 2024].
- [2] "IRS," July 2024. [Online]. Available: <https://www.irs.gov/charities-non-profits/community-health-needs-assessment-for-charitable-hospital-organizations-section-501r3>. [Accessed 16 August 2024].
- [3] "Marshfield Clinic Health System History," Marshfield Clinic, [Online]. Available: <https://www.marshfieldclinic.org/about-us/history>. [Accessed 16 August 2024].
- [4] "Marshfield Medical Center Eau Claire," October 2023. [Online]. Available: <https://mflclin.sharepoint.com/sites/BrandHub/Shared%20Documents/Forms/AllItems.aspx?FolderCTID=0x01200091D3E30FE66CAC43AAA068AEF650D1B1&siteid=%7B6B5173B4%2D86FE%2D484B%2D8867%2D2B394C0D32F3%7D&webid=%7B019DE39A%2D2A32%2D41EF%2DB42D%2DAF386687EF5A%7D&un>. [Accessed 1 October 2024].
- [5] "History and General Information," Eau Claire Wisconsin, [Online]. Available: <https://www.eauclairewi.gov/our-city/history-and-general-information>. [Accessed 3 October 2024].
- [6] "Profile: Eau Claire County Wisconsin," United States Census Bureau, [Online]. Available: https://data.census.gov/profile/Eau_Claire_County,_Wisconsin?g=050XX00US55035. [Accessed 3 October 2024].
- [7] "Our Government: Municipalities," Eau Claire County, [Online]. Available: <https://www.eauclairecounty.gov/our-government/municipalities>. [Accessed 3 October 2024].
- [8] "Defining Rural For Wisconsin," Wisconsin Office of Rural Health, [Online]. Available: <https://worh.org/resources/data-maps/defining-rural-wisconsin/wisruralareas/>. [Accessed 20 August 2024].
- [9] "Parks Map and Points of Interest," Eau Claire County, [Online]. Available: <https://www.eauclairecounty.gov/our-government/departments-and-facilities/department-directory/parks-forest/reports-map-and-forms/parks-map-and-points-of-interest>. [Accessed 3 October 2024].

- [10] "Eau Claire Fast Facts," Visit Eau Claire, 2024. [Online]. Available: <https://www.visiteauclaire.com/plan/about-eau-claire/>. [Accessed 3 October 2024].
- [11] "Annual Events," Visit Eau Claire, 2024. [Online]. Available: <https://www.visiteauclaire.com/events-and-festivals/annual-events/>. [Accessed 3 October 2024].
- [12] "Resource Library," Eau Claire COunty, 2024. [Online]. Available: <https://www.eauclairecounty.gov/our-government/departments-and-facilities/department-directory/aging-disability-resource-center/resource-library>. [Accessed 3 October 2024].
- [13] "Common EDI terminology," [Online]. Available: <https://mflclin.sharepoint.com/sites/HEDI/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FHEDI%2FShared%20Documents%2FResources%2FCommon%20EDI%20Terminology%2Epdf&parent=%2Fsites%2FHEDI%2FShared%20Documents%2FResources>. [Accessed 16 August 2024].
- [14] D. Veroff, "What you Can Learn About Your Community From Demographics," UW Extension, [Online]. Available: <https://leadershipdevelopment.extension.wisc.edu/articles/what-you-can-learn-about-your-community-from-demographics/>. [Accessed 16 August 2024].
- [15] "NCI Definition of Cancer Terms," National Cancer Institute, [Online]. Available: <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/socioeconomic-status>. [Accessed 16 August 2024].
- [16] "Quickfacts: Eau Claire County," US Census, 2023. [Online]. Available: <https://www.census.gov/quickfacts/fact/table/WI,eauclairecountywisconsin,US/PST045223>. [Accessed 3 October 2024].
- [17] "Wisconsin Equity Profile," Movement Advancement Project, [Online]. Available: https://www.lgbtmap.org/equality_maps/profile_state/WI.. [Accessed 16 August 2024].
- [18] "LGBT Proportion of Population: Wisconsin," UCLA Williams Institute School of Law, [Online]. Available: <https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT&area=55#density>. [Accessed 20 August 2024].
- [19] "News and Events: News Releases," National Institutes of Health, 26 September 2023. [Online]. Available: <https://www.nih.gov/news-events/news-releases/nih-designates-people-disabilities-population-health-disparities>. [Accessed 16 August 2024].
- [20] "Social Determinants of Health," US Department of Health and Human Services, [Online]. Available: <https://health.gov/healthypeople/priority-areas/social-determinants-health>. [Accessed 4 October 2024].
- [21] "Eau Claire County CHA," July 2024. [Online]. Available: <https://www.eauclairewi.gov/home/showpublisheddocument/46064/638568183295200000>. [Accessed 3 October 2024].

- [22] "Guide to Prioritization Techniques," [Online]. Available: <https://www.naccho.org/uploads/downloadable-resources/Gudie-to-Prioritization-Techniques.pdf>. [Accessed 20 August 2024].

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