



MCHS Hospitals Inc. d/b/a Marshfield Medical Center-Minocqua  
2025-2027 Implementation Strategy



Marshfield Clinic Health System

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## Health System Overview

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

The Clinic became a 501(c)(3) nonprofit organization in 1992, and in 2014, Marshfield Clinic Health System, Inc., was formed. The Health System today is an integrated system whose mission is to enrich lives 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 equity<sup>1</sup> with our patients, health plan members, employees and communities.

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 [1].

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 the health improvement efforts of both the community and the hospital with community health priorities<sup>2</sup> identified in the CHNA with Health System priorities.

## Hospital Overview

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MCHS Hospitals, Inc. d/b/a Marshfield Medical Center-Minocqua (hereafter referred to as MMC-Minocqua) is a 31-bed full-service hospital in Minocqua Wisconsin. MMC-Minocqua is a fully integrated medical campus that offers a variety of medical services to care for Oneida County residents and the surrounding communities.

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

- Birth Services

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<sup>1</sup> See definition in Appendix A.

<sup>2</sup> See definition in Appendix A.

- Urgent Care
- Emergency Department
- Imaging services
- Private inpatient rooms
- Surgery center with operating and procedure rooms [2]

Construction of MMC-Minocqua began in late 2018 and was completed in 2020 [3]. MMC-Minocqua went through an expansion beginning in 2022 with the addition of a 45,000 square foot wing. This expansion almost doubled the number of inpatient beds while enhancing emergency and urgent care, expanding respiratory therapy services, enlarging the pharmacy and increasing the size of waiting areas and parking lots [4]. MMC-Minocqua provides internships and healthcare experience to many interns and students, hosts volunteers, and hosts many community events such as women’s day of caring and stop the bleed training.

MMC-Minocqua formed the Community Advisory Board-Minocqua (hereafter referred to as CAB-Minocqua) a local workgroup of MMC-Minocqua that contributes to the hospital’s community benefits and community health initiatives. The CAB-Minocqua provides input on the Community Health Needs Assessment and Implementation Strategy and the implementation of community benefit programs. See Appendix C for a complete list of CAB-Minocqua members.

## **Implementation Strategy<sup>3</sup> Overview**

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

This plan was reviewed and approved by the authorized governing body, MCHS Hospitals Board, Inc. on December 12<sup>th</sup>, 2020<sup>4</sup>. Which is on or before the 15<sup>th</sup> day of the fifth month after the end of the taxable year the CHNA was completed.

## **Community Health Needs Assessment Overview**

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MMC-Minocqua worked collaboratively with Oneida County Health Department, Vilas County Health Department, Forest County Health Department, and Aspirus Healthcare to conduct the CHNA.

The MMC-Minocqua CHNA written report is prepared using these key criteria:

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<sup>3</sup> See definition in Appendix A.

- Community demographics and a description of the community served by the hospital and how it was determined.
- The process and methods used to conduct the assessment.
- Input from persons who represent the broad interests of the community.
- Methods of collecting and analyzing data and other information used.
- A description of what types of data were used in the assessment process.
- Cited external source material.
- Health priorities and concerns of all population groups, including medically underserved, low-income, and minority groups.
- The identified health priorities of both the community and hospital, including the process and criteria used to identify and prioritize identified needs.
- Existing resources in the community that are available to respond to identified priorities.

### **Accessing the Full Report**

The written report was completed on October 1<sup>st</sup>, 2024, presented to the MCHS Hospitals Board, Inc. for discussion and was adopted on December 12<sup>th</sup>, 2024. The full CHNA report, which details the entire assessment and prioritization process, can be found on: <https://marshfieldclinic.org/about-us/community-health-needs-assessment-reports>.

## **Prioritization Process**

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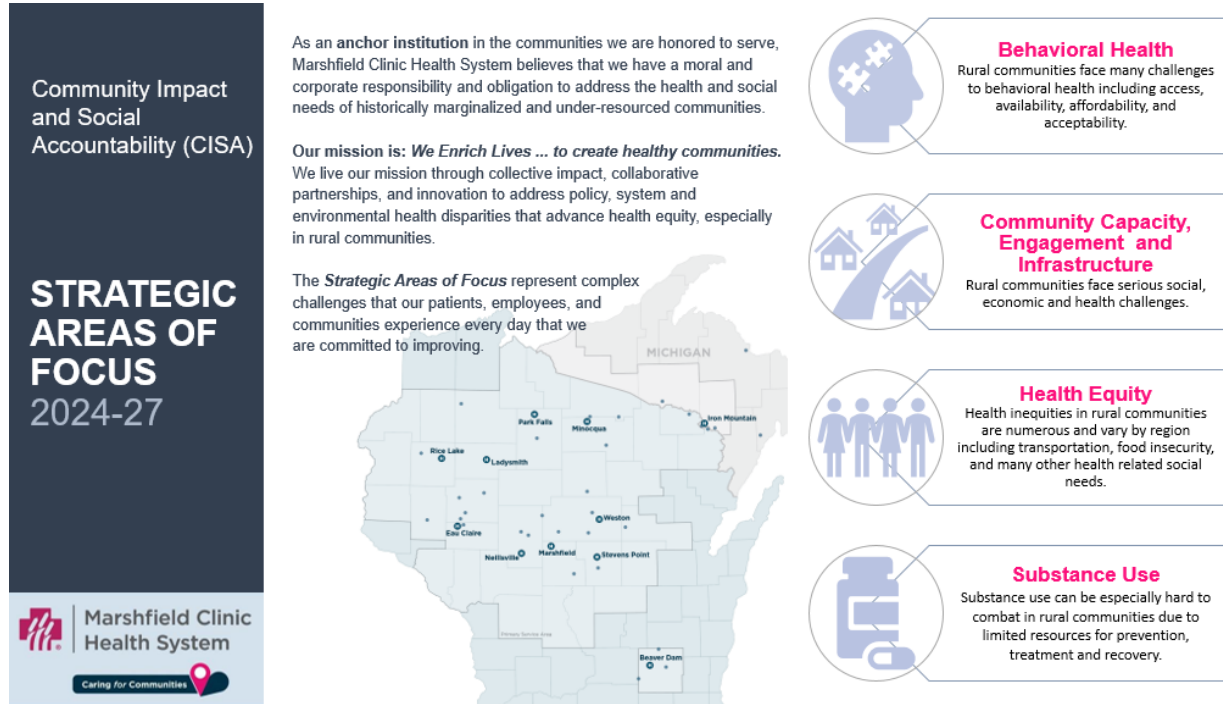
The Marshfield Clinic Center for Community Health Advancement Strategic Areas of Focus (2024-27) are the result of an assessment process which included review of community health needs; discussion with community stakeholders, key subject matter experts, and the MCHS Community Health and Benefits Steering 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 Focus Areas are system-wide community health focus areas approved by the MCHS Community Health and Benefits Steering Committee. Subsequently, Strategic Focus Areas are integrated into MMC Implementation Strategy (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 A: Marshfield Clinic Health System Strategic Areas of Focus**



**MMC-Minocqua CAB meeting: September 2024**

The CAB-Minocqua met in September 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. [5]

**Health Priorities**

After completing extensive review of the Community Health survey and process, United Way ALICE data<sup>4</sup>, Healthiest Wisconsin 2020, County Health Rankings<sup>5</sup>, and other quantitative and qualitative data, the top community health priorities identified by MMC-Minocqua are:

<sup>4</sup> See definition in Appendix A.

<sup>5</sup> See definition in Appendix A.

- **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.

### **Identified Health Needs Not Being Addressed**

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

After consideration, the following health needs will not be directly addressed by the MMC-Minocqua CBW 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:

- Obesity/nutrition
- Violence Prevention
- Housing
- Transportation
- Childcare

### **Implementation Strategy**

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Community change is a long-term process that a single organization cannot accomplish alone; partnerships are essential for success. The Implementation Strategy is only one part of community efforts to address identified health priorities. Many strategies will be implemented collaboratively with community and internal Marshfield Clinic Health System partners.

## Health Priority: Substance Use

<b>Goal 1: Improve access to substance use disorder services through connecting community and care delivery efforts</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Increase clinical and community knowledge and capacity on medications for Opioid Use Disorder (MOUD) and other substance use services and supports	<p>Provide educational opportunities to MMC and community providers on MOUD</p> <p>Educate community members on the continuum of care resources, services and supports</p>	<p>Increased providers who can prescribe medications for Opioid Use Disorder</p> <p>Increased awareness of resources, services, and supports</p>	<p>Staff time</p> <p>Materials</p> <p>Funding</p>	<p>MCHS Division of Education</p> <p>MCHS CCHA</p> <p>Community-Based Organizations</p>
<b>Goal 2: Engage in community efforts related to substance use and prevention</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in and support substance use and prevention coalitions and other community efforts	<p>Connect MMC-MQA Staff to local coalitions</p> <p>Identify and support staff to participate in coalitions</p> <p>Support community efforts to address substance use and prevention</p>	<p>Increased community capacity to address substance use and prevention efforts</p>	<p>Staff time</p> <p>Funding</p>	<p>COPE Coalition</p> <p>Oneida County Substance Use Coalition</p> <p>Oneida/Forest/Vilas County Health Department</p>



## Health Priority: Behavioral Health

<b>Goal 1: Improve access to behavioral health services through connecting community and care delivery efforts</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Improve access to behavioral health services, supports and community resources	Standardize templates and behavioral health processes  Monitor and improve referral backlog	Increased access to services and reduced barriers	Staff Time	MCHS Behavioral Health
<b>Goal 2: Engage in community efforts to address social emotional development and improve behavioral health</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in and support community based behavioral health coalitions and other community efforts	Connect MMC-MQA staff to local coalitions  Identify and support staff to participate in coalitions  Support community efforts to address behavioral health	Increased community capacity to address behavioral health	Staff Time  Funding	COPE Coalition  Oneida/Forest/Vilas County Health Department

## Health Priority: Health Equity

<b>Goal 1: Reduce health disparities related to social, economic, cultural, gender and/or community conditions</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Use demographic data to understand patient and	Provide training to collect data in culturally sensitive ways	Increased awareness of health disparities and	Staff Time  Funding	MCHS information systems

community representation , assess health disparities and community assets to provide culturally responsive care	Review and assess clinical and community data  Identify key actions to provide culturally responsive care	impact on health  Improved quality, reduced barriers, and enhanced access		Data Warehouse and Analytics departments  Quality and Safety  Patient Access  Clinical Staff  Health Equity Leadership
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**Goal 2: Engage in community efforts related to advancing health equity and social determinants of health<sup>6</sup>**

Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Participate in and support community based health equity coalitions and other community efforts	Connect MMC-MQA staff to local coalitions  Identify and support staff to participate in coalitions  Support community efforts to address health equity and social determinants of health	Increased capacity to address health equity and social determinants of health	Staff Time  Funding	Oneida County community agencies

<sup>6</sup> See definition in Appendix A.

## Health Priority: Community Capacity, Engagement and Infrastructure

<b>Goal 1: Improve MMC-Minocqua participation in the community through civic engagement activities that address health</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Increase the number of North Market executive leaders involved and engaged in the community	<p>Prioritize civic engagement by setting expectations for leaders/staff to participate</p> <p>Promote completion of Community Involvement form</p> <p>Promote and support opportunities for involvement</p>	Increased leadership support for community-based organizations	<p>Staff Time</p> <p>Funding as appropriate</p>	Oneida County community agencies
<b>Goal 2: Engage in community efforts to address health needs related to identified priorities; substance use, behavioral health or health equity</b>				
Strategy	Key Actions	Anticipated Outcomes	Resources	Partnerships
Host or participate in community events or initiative	Assess and determine community opportunities to participate	Increased community awareness of identified health need(s)	<p>Staff time</p> <p>Funding</p>	Oneida County community agencies

## Next Steps

This implementation strategy outlines a three-year community health improvement plan. MMC-Minocqua will:

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

## Approval and Community Input

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This Implementation Strategy Report was adopted by the MCHS Hospital Board, Inc. on December 12<sup>th</sup>, 2024.

If you would like to be involved in the community health needs assessment process, or have a comment on this assessment, please contact the Marshfield Clinic Health System Center for Community Health Advancement at [communityhealth@marshfieldclinic.org](mailto:communityhealth@marshfieldclinic.org) or (715) 221-8400.

## **Appendix A: Definitions**

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**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 15<sup>th</sup> day of the fifth month after the end of the taxable year in which the hospital facility finished conducting the CHNA. (IRS, 2023)

**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: References

- [1] "Marshfield Clinic Health System History," Marshfield Clinic Health System, [Online]. Available: <https://www.marshfieldclinic.org/about-us/history>. [Accessed 16 August 2024].
- [2] "Marshfield Clinic Health System- Minocqua: A Regional Hospital of Marshfield Clinic Health System," Marshfield Clinic Health System, [Online]. Available: <https://www.marshfieldclinic.org/locations/centers/Minocqua%20-%20Marshfield%20Medical%20Center>. [Accessed 16 August 2024].
- [3] "Newsroom- News Articles- Minocqua Hospital," Marshfield Clinic Health System, 13 May 2020. [Online]. Available: <https://www.marshfieldclinic.org/news/news-articles/minocqua-hospital..> [Accessed 16 August 2024].
- [4] "Newsroom- News Article- Minocqua hospital Expansion Groundbreaking," Marshfield Clinic Health System, 19 May 2022. [Online]. Available: <https://marshfieldclinic.org/news/news-article/minocqua-hospital-expansion-groundbreaking>. [Accessed 16 August 2024].
- [5] "Guide to Prioritization Techniques," [Online]. Available: <https://www.naccho.org/uploads/downloadable-resources/Gudie-to-Prioritization-Techniques.pdf> . [Accessed 16 August 2024].

## **Appendix C: Individuals Involved in the Implementation Strategy**

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### **Community Advisory Board- Minocqua**

- Timothy Melms
- Billy Fried
- Michaela Daubon
- Tera Fritz
- Jacquelyn Frombach
- Dr. Matthew Thomas
- Dr. Jan Goral
- Susan Mitchler
- Ty Erikson
- Dr. David Blair
- Patti Kerkorian
- Katie Weinberger
- Brandon Bay
- Beth Harrop

### **Community Benefits Workgroup- Minocqua**

- Ty Erikson- President MMC-Minocqua & MMC-Park Falls
- Mickey Ganschow- Community Benefit Coordinator
- Katie Weinberger- Administrative Director of Ambulatory Care Services, North Market
- Brandon Bay- Chief Financial Officer, North Market
- Laurie McKuen- Vice President of Operations and Clinical Care, Park Falls
- Dr. Tony Blair- Vice President Medical Affairs, North Market
- Patti Kerkorian- Chief Nursing Officer, North Market
- Beth Harrop- HR Business Partner Senior Manager, North Market



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