



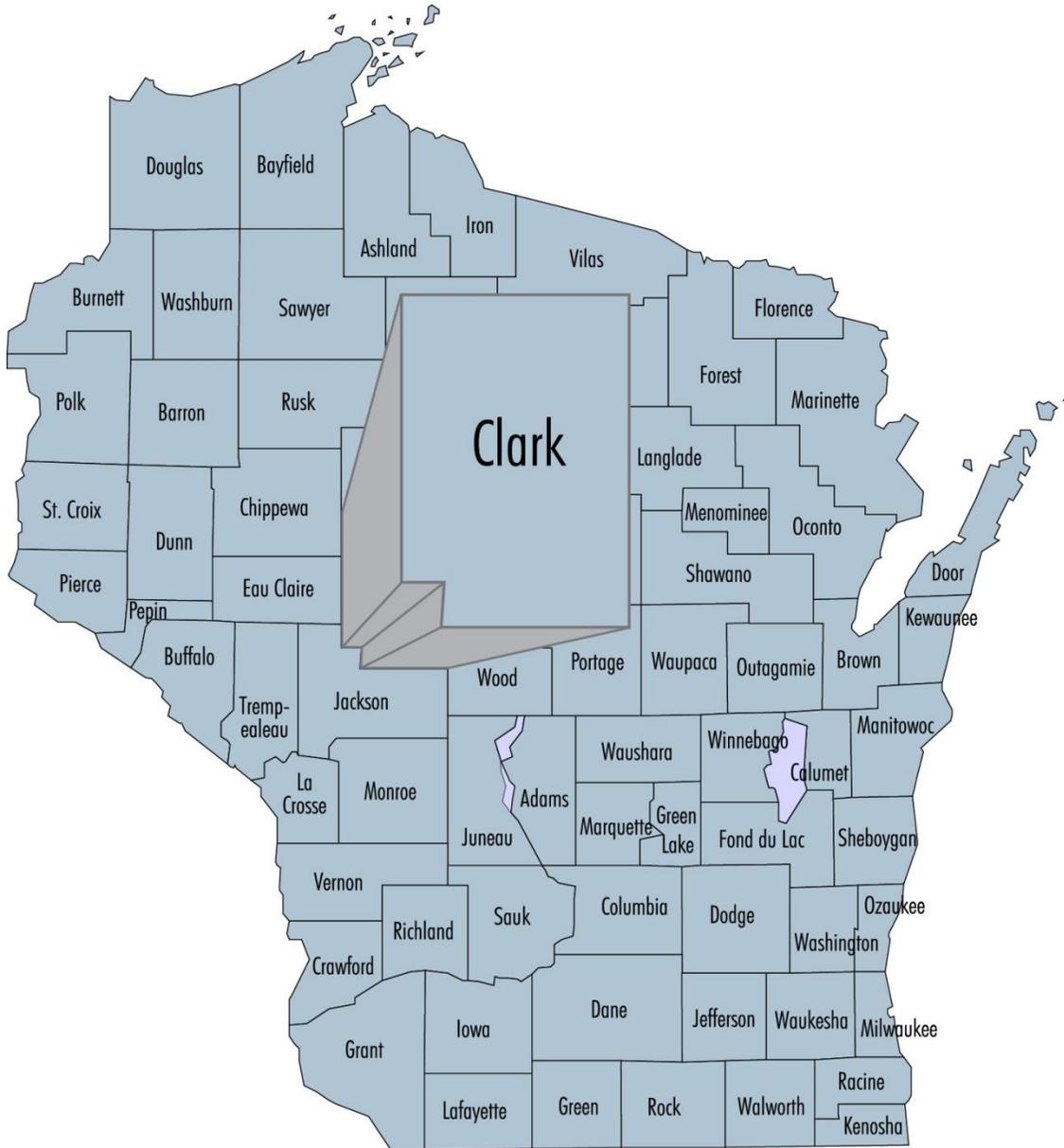
MINISTRY
Our Lady of Victory Hospital



COMMUNITY
HEALTH NEEDS ASSESSMENT

2016

Communities We Serve



 **MINISTRY**
Our Lady of Victory Hospital

1120 Pine Street, Stanley, Wisconsin 54768

Ministry Our Lady of Victory Hospital Community Health Needs Assessment

An assessment of Clark County conducted jointly with Ministry Our Lady of Victory Hospital (Stanley, Wisconsin), Memorial Medical Center (Neillsville, Wisconsin), Clark County Public Health, and Family Health Center of Marshfield, Inc. (Neillsville Dental Center, Neillsville, Wisconsin).

In 2015, a community health needs assessment (CHNA) was conducted by Ministry Our Lady of Victory Hospital (MOLVH), Memorial Medical Center, Clark County Public Health and Family Health Dental Center to validate the understanding and conclusions of work done in early 2014 by the Healthy Clark County Coalition.

MOLVH is a critical access hospital located in Stanley, Clark County, Wisconsin. MOLVH is part of Ministry Health Care, which is an integrated healthcare delivery network serving more than 1.1 million people across Wisconsin and eastern Minnesota. Ministry generates nearly \$2.2 billion in operating revenue with 15 hospitals, 45 clinics, and more than 12,000 associates including 650 physicians and advance practice clinicians. In 2013, Ministry Health Care joined Ascension, the largest Catholic and not-for-profit healthcare system in the nation.

Our mission as a Catholic healthcare system is to further the healing ministry of Jesus by continually improving the health and well-being of all people, especially the poor, in the communities we serve.

Ministry Health Care has a rich and long tradition of addressing the health of the community. This flows directly from our Catholic identity. In addition to the community health improvement efforts guided by our CHNA process, we contribute to other needs through our broader community benefit program. In 2014-2015, MOLVH's community benefit contributions were more than \$1 million.

Community Served by the Hospital

Clark County is recognized by the U.S. Department of Health & Human Services as a Medically Underserved Area. MOLVH is designated as a critical access hospital that serves community members that reside in Clark, Chippewa, Taylor and Eau Claire counties, with the majority of the population served in Clark County and the western fringe of Chippewa County where the City of Stanley is located. The hospital and its three separate rural health clinics are all located in Clark County. The hospital is approximately 30-45 miles from any county service agency.

Although MOLVH serves Clark County and beyond, for the purposes of the community health needs assessment, the hospital focused on the needs of Clark County. Our 'community served' was defined as such because (a) most community health data is available on at the county level; (b) most of our assessment partners define their service area at the county level; (c) Clark County includes the majority of our service area.

Demographic Profile of Clark County

Characteristics	Wisconsin 2014	Clark County 2014	Clark County 2010	% Change for County
Total Population*	5,757,564	34,423	34,691	-0.8%
Median Age (years)^	38.8	37.2	37.1	0.3%
Age*				
Persons under 5 years	5.9%	8.2%	8.4%	-2.4%
Persons under 18 years	22.6%	29.3%	29.1%	0.7%
Persons 65 years and over	15.2%	16.0%	15.6%	2.5%
Gender*				
Female	50.3%	49.5%	49.3%	0.4%
Male	49.7%	50.5%	50.7%	-0.4%
Race and Ethnicity*				
White alone	87.8%	97.5%	96.1%	1.4%
Black or African American alone	6.6%	0.5%	0.2%	60.0%
American Indian and Alaska Native alone	1.1%	0.7%	0.5%	28.6%
Asian alone	2.6%	0.5%	0.4%	20.0%
Two or more races	1.8%	0.7%	0.5%	28.6%
Hispanic or Latino	6.5%	4.2%	3.7%	11.9%
Speak a language other than English^				
	8.6%	15.7%	13.4%	14.6%
Median household income^				
	\$52,738	\$53,288	\$51,441	3.5%
Percent below poverty in the last 12 months^				
	13.3%	16.3%	12.8%	21.5%
High School graduate or higher, percent of persons age 25+ ^				
	90.8%	81.8%	80.7%	1.3%

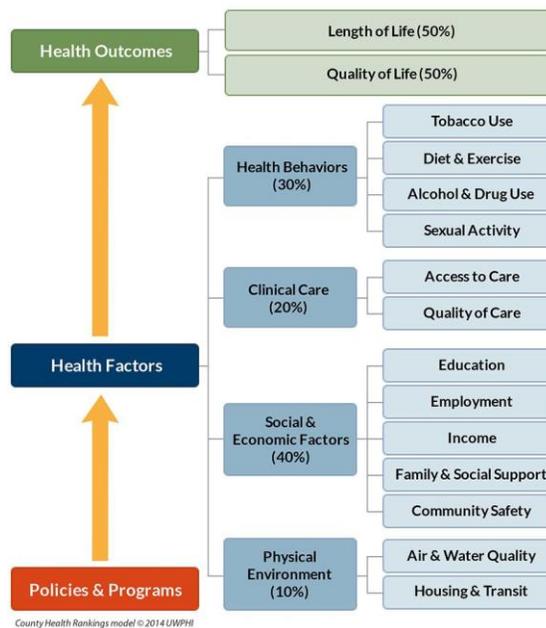
* Source: U.S. Census QuickFacts. Available at: <http://www.census.gov/quickfacts/table/PST045214/00>.

^ Source: U.S. Census Bureau, 2010-2014 and 2006-2010 American Community Survey 5-Year Estimates. Available through American FactFinder at: <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml###>.

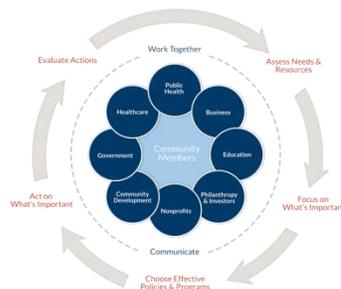
Process and Methods Used to Conduct the Assessment

Community Health Improvement Strategy

Ministry Health Care is committed to using national best practices in conducting the CHNA and implementing community health improvement strategies. Our approach relies on the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing in particular the determinants of health model and the model for community health improvement.



In addition, we utilize the *Wisconsin Guidebook on Improving the Health of Local Communities* (developed with funding from the University of Wisconsin School of Medicine and Public Health from the Wisconsin Partnership Program). This guidebook builds on the County Health Rankings and Roadmaps’ Action Center.



Based on all of these resources, our community health improvement strategy rests on the following principles to make our communities a healthy place to live, learn, work and play:

- Work collaboratively to effectively address health issues
- Pay attention to the forces that shape health outcomes
- Focus efforts on target populations with a disparate health burden
- Emphasize the powerful impact of policy- and system-based approaches on change
- Use the best evidence of effective strategies
- Identify and track specific, measurable performance indicators

Planning Process

The Clark County CHNA was led by MOLVH, Memorial Medical Center, Clark County Public Health Department and Family Health Center. A core group of representatives from the four facilities worked together to identify the data to be used, gather that data and prepare it to be presented. The following Vision and Values Statements were adopted from the Healthy Clark County Coalition:

Vision Statement

The Health Care Partnership of Clark County will:

- Strive to ensure that all Clark County residents have access to healthy choice options and healthcare services regardless of ability to pay.
- Strive to ensure a healthy and safe environment.
- Educate the community on existing, emerging and reemerging public health issues and services.

Values Statement

Through teamwork and willingness to explore change among individuals and groups, the Health Care Partnership for Clark County will explore change among individuals and groups, and will achieve improved health among Clark County residents by adopting and following these values:

- Collaborate with traditional and non-traditional partners.
- Seek cooperation from community members and stakeholders.
- Act with integrity on all accounts.
- Be aware that one size does not fit all.
- Be sensitive to religious and cultural backgrounds.

The organizing framework for the assessment data was the State Health Plan: Healthiest Wisconsin 2020. Indicators were identified within each category of this framework:

- AODA
- Chronic disease
- Communicable disease
- Environmental and occupational health
- Healthy growth and development
- Injury and violence
- Mental health
- Nutrition

- Oral health
- Physical activity
- Reproductive and sexual health
- Tobacco Use

Data Sources

- County Health Rankings
- Clark County Health Department
- Wisconsin Department of Health Services
- Healthiest Wisconsin 2020
- Healthy People 2020
- US & Wisconsin Census information
- Centers for Disease Control and Prevention (CDC)

Input from Persons Who Represent the Broad Interests of the Community

Ministry Our Lady of Victory Hospital is committed to addressing community health needs collaboratively with local partners. After the 2013 CHNA, the hospital has participated actively in a collaborative partnership in the Healthy Clark County Coalition. This year's assessment, built on that collaboration, actively looked for input from a broad cross section of community stakeholders with the goal of reaching consensus on priorities to mutually focus on.

Input From Community Stakeholders

In spring 2015, two input opportunities were held in Neillsville and Owen to ensure complete county representation. A total of 48 individuals attended the CHNA focus group meetings. At each meeting, stakeholders listened to a presentation about health data from the County and State Public Health Departments and then participated in a facilitated discussion about the community health data, progress on the previous priority areas, and any emerging needs. Community assets were identified and based on those assets and additional criteria, the group discussed and reached consensus on the health priorities for the next three years.

For the data presentation at the stakeholder focus groups, the 12 Health Focus Areas from "Healthiest Wisconsin 2020" were outlined. Then data was presented on the nine health focus areas that were most identified by the 2014 County-wide Community Health Assessment Survey which included:

- Chronic disease prevention and control
- Healthy growth and development
- Communicable disease prevention
- Environmental and occupational health
- Injury and violence prevention
- Mental/behavioral health

- Alcohol and drug use
- Oral health
- Reproductive and sexual health

Those who participated in the stakeholder focus groups represented various government, faith-based, community and healthcare organizations, many of whom represent the medically-underserved, low-income and/or minority populations they serve as indicated:

- Clark County Public Health Department (*a, b, c*)
- Department of Social Services (*a, b, c*)
- Clark County Emergency Services (*a, b, c*)
- Clark County Sheriff's Office (*a, b, c*)
- Clark County Birth to Three (*a, b, c*)
- Family Health Center Dental Clinic (*a*)
- Community Services (*a, b, c*)
- Clark County Veterans Administration (*a, b, c*)
- Clark County UW-Extension
- Memorial Medical Center (*a*)
- Clark County Health Care Center (*b*)
- Department of Aging (*a, b, c*)
- Head Start (*a, b, c*)
- United Church of Christ (*a, b, c*)
- County Board members
- Midwife services (*c*)
- Oakbrook Health and Rehab (*b*)
- Owen-Withee Enterprise (*b*)
- Wisconsin Department of Public Health – Western Region
- Ministry Our Lady of Victory Hospital (*a*)

a: Serves medically underserved population

b: Serves low-income population

c: Serves minority population

Input from members of Medically Underserved, Low-income and Minority Populations

Ascension Health and Ministry Health Care are fueled by a commitment to human dignity, the common good, justice and solidarity. We believe the CNHA process must be informed by direct input from the poor, vulnerable and disparate populations we aim to serve. The Healthier Clark County Coalition conducted a second survey to assess the priority health issues for these populations to further clarify the stakeholder focus groups held earlier in Clark County. The survey asked participants their perception of the top priority health needs in Clark County and about their own physical, mental and oral health status. The survey was distributed from November 2015 through the end of December 2015 at local healthcare and public health department sites that serve low-income, minority and medically-underserved populations.

Key findings from the survey included:

- The survey respondents indicated the five most important factors that define a healthy community are: access to healthcare and services, healthy behaviors and lifestyles, good jobs and healthy economy, good schools, and a strong family life.
- Unemployment, mental health issues, children in poverty, single parent households, cancer, and aging problems were seen to be the five most important problems in Clark County.
- Cost of services often was listed as a primary limitation to accessing healthcare for medical or dental care.
- Lack of access to mental health care due to a lack of providers was also a significant finding.
- Nearly 50 percent of the survey respondents travel outside of Clark County to receive medical care and 37 percent for dental care, often based on a lack of county-based services available.
- A total of 16.4 percent of the respondents indicate that they access emergency department/urgent care for their regular medical care.

Input on previous CHNA

No written comments were received regarding the previous CHNA.

Prioritized Significant Health Needs

PRIORITIZATION CRITERIA

The stakeholders at each of the two meetings broke out into smaller groups for discussion and were asked two prompting questions to identify three of the top priorities facing the residents of Clark County given the above eight health priorities:

- “Which priority areas are having the greatest impact on the community?”
- “Which areas can the community have the greatest impact on?”

After reviewing and discussing the community health data from the 2014-2015 Clark County CHA, stakeholders attending the focus groups were asked to provide input on the priority needs to be addressed throughout the next three years. They used the following criteria to consider the prioritization:

- Community resources/assets (Community groups, organizations, individuals, programs, funds, others)
- Research and survey data from presentation

PRIORITIZATION PROCESS

In each of the two stakeholder meetings, a three-step voting process was used to decrease the eight health priorities down to five with the first round of voting, and then down to the three top health priorities for Clark County. Using a multiple-round, three-choice selection process, the stakeholders were asked to consider what three priorities should be priorities for their local community and Clark County as a whole. Each of the two focus groups held on the southern and northern regions of the county identified the same three health need priorities.

PRIORITIES SELECTED

Based on this process, the following priorities were selected for Clark County:

- Mental health
- Alcohol and drug use
- Nutrition

Mental Health

Mental illness is the most common cause of disability in the United States. Mental health is essential to personal well-being, relationships, and the ability to contribute to society. Mental health issues are associated with increased rates of these risk factors: smoking, physical inactivity, obesity, substance abuse. These physical health problems can in turn lead to: chronic disease, injury and disability. (*Centers for Disease Control & Prevention; County Health Rankings & Roadmaps; Healthiest Wisconsin 2020; Healthy People 2020*)

Mental health issues continue to be a priority, if not the top priority in Clark County. Currently there are no county-based mental health providers to serve the residents of Clark County. In 2013, Clark County lost its only mental health provider for the county's 34,713 residents to retirement.

- Of the survey responses received in the 2014 CHA survey, 57.1 percent of the local organizations expressed moderate to significant concern for the area of mental/behavioral health.
- Clark County's 2011 percentage of adult deaths that are suicides is nearly double the state average 2.6 percent versus 1.53 percent.
- The percentage of Clark County students (6.7 percent) who have attempted suicide is beginning to out-pace the state average (6.0 percent).

Alcohol and Drug Use

According to Healthiest Wisconsin 2020, alcohol-related deaths are the fourth leading cause of death in Wisconsin. (*Centers for Disease Control & Prevention; County Health Rankings & Roadmaps; Healthiest Wisconsin 2020; Healthy People 2020*)

The state also ranks at or near the top among states in heavy alcohol drinking. Consequences of alcohol or drug abuse include: motor vehicle and other injuries, prenatal/postnatal childhood disorders, chronic organ disease, family/social problems, and violent/nonviolent crimes. The data reviewed in the 2014 CHA stakeholder meetings continue to indicate a need:

- The 2014 CHA survey showed that 42.9 percent of the organization respondents stated that alcohol use was a major problem for the community.
- The trends of binge drinking by adults, rate of alcohol-related fatalities, and juvenile arrests for OWI in Clark County all out-pace the state average.
- Drug arrests in Clark County are nearly double the state average.

Nutrition

Nutrition and healthy foods has been shown to be a top priority through that last two CHNA processes. Good nutrition, food security, healthy food options, access to healthy food and regular meal intake have all been concerns of the residents of Clark County. The data reviewed in the 2014 CHNA stakeholder meetings continue to indicate a need:

- The CHNA survey results show 31.8 percent of individuals indicated that nutrition was an issue
- Approximately 43 percent of local organizations reported healthy nutrition as a moderate problem
- Nearly 60 percent of students 9-12 grades indicated they did not eat breakfast regularly during a typical school week
- 29.8 percent of children in 2011 participated in the breakfast programs in Clark County
- 53.57 percent of Clark County students in 2013 were enrolled in free/reduced lunch

Potential Resources to Address the Significant Health Needs

As part of the community stakeholders' meeting, the group identified resources and assets in the community that currently support health or could be used to improve health. The following resources will be considered in developing implementation plans to address the prioritized community health needs:

Healthcare facilities:

- Memorial Medical Center
- Ministry Our Lady of Victory Hospital
- Family Health Dental Center
- Clark County Health Care Center

Other organizations/groups/services/programs:

- Wisconsin and county public health departments
- Local and county law enforcement
- Amish/Mennonite communities
- Local public school systems
- Church/faith-based organizations

Physical resources:

- Buildings/community meeting space
- Parks and green space
- Equipment

Community characteristics:

- Unique subset of Amish/Mennonite residents within Clark County
- Community/corporate philanthropy – grant monies and corporate donations

Next Steps

Having identified the priority health needs to be addressed, next steps include:

- Collaborating with community partners through Healthy Clark County Coalition
- Developing a three-year implementation strategy
- Creating a more specific Annual Action Plan during each year of the implementation strategy
- Integrating the health priorities and implementation strategy into organizational strategic planning and resource investments and allocations.

Evaluation of the Impact of the Preceding Implementation Strategy

Health priorities identified in the preceding CHNA (2013-2016) were:

- Access to Mental Health Care
- Access to Primary Care (including preventative services, prescription medications, transportation and community resources)

Evaluation

Access to Mental Health Care: QPR training was provided to over 90% of ED and Medical/Surgical staff and one associate is now a train-the-trainer. Efforts continued to expand tele-mental health services. A lack of mental health providers both in the county and for telehealth continues to be a serious challenge. A mental health Resource Guide was created for community distribution.

Access to Primary Care: Community Link services were provided to hundreds of people, linking them to needed services. Community health screenings were provided; individuals were assisted in enrolling for health care coverage; PT services were provided at the free clinic; assistance was provided for medication assistance applications; and transportation was provided to eligible community members.

Approval

This community health needs assessment (CHNA) report was adopted by the hospital's governing board on May 24, 2016.