Community Health Implementation Strategy

ASPIRUS HEALTH

2022-2025

ASPIRUS STANLEY HOSPITAL & CLINICS

1120 Pine Street
Stanley, WI 54768

Acknowledgements

Aspirus Stanley Hospital is excited to share this implementation strategy with the community. It was developed in Summer 2022 and is a companion document to the community health needs assessment. The implementation strategy reflects anticipated efforts on the part of the hospital – both individually and as part of area collaboratives. The community health priorities being addressed in this plan are complex, and the accompanying solutions require strong community partnerships. Aspirus Stanley Hospital looks forward to working across sectors to achieve our common goal of a healthier, happier community!

Respectfully,
Robert Holcomb
Chief Administrative Officer
Aspirus Stanley Hospital

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Aspirus Health and Aspirus Stanley Hospital Profile

Aspirus Health

Aspirus is a non-profit, community-directed health system based in Wausau, Wisconsin. Its 11,000 employees are focused on improving the health and well-being of people throughout Wisconsin and Upper Michigan. Aspirus serves communities through four hospitals in Upper Michigan and 13 hospitals in Wisconsin, 75 clinics, home health and hospice care, pharmacies, critical care and air-medical transport, medical goods, nursing homes and a broad network of physicians. Aspirus has been recognized by IBM Watson Health as a Top 15 Health System for four consecutive years in its annual studies identifying the top-performing health systems in the country.

Aspirus Stanley Hospital

Aspirus Stanley Hospital is a 24-bed critical access hospital that provides primary and specialty services in Stanley. The hospital is located conveniently on Highway 29 in central Wisconsin. Services include inpatient hospital care, 24/7 emergency department, urgent care, surgical services, imaging, laboratory and rehabilitation services. Wound care and cardiac rehabilitation services are being added in Fall 2022.

MAPS-074C_ASPIRUS HOSPITALS & CLINICS_10/2021

Prioritized Significant Community Health Needs

Based on the results of the most recent community health needs assessment (CHNA), Aspirus Stanley Hospital will formally address the following issues through its three-year implementation strategy:

- Mental Health
- Chronic Disease
- Physical Environment and Safety

Needs Not Selected

The three issues that were not selected and the corresponding rationale are:

- Substance use – Although this was a priority in the previous 3-year cycle, there was very little momentum or energy around it from other organizations, resulting in little progress. The hospital felt its resources were better directed to efforts that could result in collective impact.
- Communicable diseases – The hospital will work on this issue outside of the formal Implementation Strategy.
- Social determinants of health – The hospital will work to address social determinants, particularly those determinants that contribute to health inequities, as part of their efforts to address chronic disease, mental health and physical environment and safety.

For the purposes of this plan, the hospital's service area includes Clark County as well as portions of Chippewa County and other surrounding counties.

About the Implementation Strategy

For Aspirus, the community health needs assessment (CHNA) and the corresponding implementation strategy (IS) is one way to live our mission – to heal people, promote health and strengthen communities – and reach our vision – being a catalyst for creating healthy, thriving communities.

Definition / Purpose of a CHNA and Implementation Strategy

A CHNA is "a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize, plan and act upon unmet community needs."[1] The value of the CHNA lies not only in the findings but also in the process itself, which is a powerful avenue for collaboration and potential impact. An implementation strategy is "the hospital's plan for addressing community health needs, including health needs prioritized in the CHNA and through other means".[2]

Compliance

The completion of a needs assessment – and a corresponding implementation strategy – is a requirement for both hospitals and health departments. For non-profit hospitals, the requirement originated with the Patient Protection and Affordable Care Act (ACA). The IRS Code, Section 501(r)(3) outlines the specific requirements, including having the final, approved report posted on a public website. Additionally, CHNA and Implementation Strategy activities are annually reported to the IRS.

In Wisconsin, local health departments are required by Wisconsin State Statute 251.05 to complete a community health assessment and create a plan every five years. The statute indicates specific criteria must be met as part of the process.

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[1] Catholic Health Association of the United States, https://www.chausa.org
[2] Catholic Health Association of the United States, *A Guide for Planning & Reporting Community Benefit*

General Approach to Implementation

For its community health improvement efforts, Aspirus Health is using the following approaches:

- *Results-based accountability*. Aspirus Health is applying the results-based accountability (RBA)[3] framework to its implementation plans. RBA focuses on both population-level accountability as well as program-level accountability. The descriptions below are outlined in the RBA framework.
- *Continuum of care*. Aspirus Health is approaching complex community health issues from multiple levels, as outlined by the Institute of Medicine (IOM):[4]
  - Upstream prevention (also known as promotion): Strategies that are designed to "create environments and conditions that support behavioral health and the ability of individuals to withstand challenges. Promotion strategies also reinforce the entire continuum of behavioral health services."[5] Examples of upstream conditions include housing, community safety, education/learning, a living wage/income and more.
  - Prevention: Strategies that are designed to "prevent or reduce the risk of developing a behavioral health problem…."[6]
  - Treatment: Strategies that are designed for individuals "diagnosed with a substance use or other behavioral health disorder."[7]

Aspirus Stanley Hospital's approach to improving the health of the community includes a focus on health disparities and health inequities. As highlighted in the community health needs assessment, individuals who are Hispanic are at higher risk for numerous health issues. As part of the development of this implementation strategy, Aspirus Stanley Hospital and its partners conducted two focus groups with area individuals who are Hispanic. The results of those focus groups will be integrated with the plans outlined below.

A description of the plans to address mental health, chronic disease, and physical environment and safety – prefaced by data and community input gathered in the assessment – are on the next pages. The plans:

- Are described at a general level; plans with more specificity will be created annually.
- Reflect intended efforts; circumstances may affect the completion of the efforts.
- May be modified over the course of time.
- Include program evaluation measures in the "performance indicators" section of the table.

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[3] Clear Impact, https://clearimpact.com/results-based-accountability/
[4] Center for the Application of Prevention Technologies Fact Sheet, https://www.mass.gov/doc/samhsa-behavioral-health-continuum-of-care-overview-9232019/download
[5] Ibid
[6] Ibid
[7] Ibid

Mental Health

Why is it Important?

Approximately 20 percent of the population experiences a mental health problem during any given year.[1] Mental health issues are associated with increased rates of risk factors such as smoking, physical inactivity, obesity and substance abuse. As a result, these physical health problems can lead to chronic disease, injury and disability.[2] Economic challenges (e.g., unemployment, poverty) are associated with poor mental health.[3] During the COVID pandemic, depression, anxiety and suicidal ideation have increased and access to mental health providers and treatment has been limited.[4]

Sources: (1) National Institute for Mental Health; (2) Healthiest Wisconsin 2020; Healthy People 2020; (3) Macintyre, A., Ferris, D., Gonçalves, B.et al. What has economics got to do with it? The impact of socioeconomic factors on mental health and the case for collective action. Palgrave Commun4, 10(2018). https://doi.org/10.1057/s41599-018-0063-2 (4) Czeisler MÉ , Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057. DOI:http://dx.doi.org/10.15585/mmwr.mm6932a1
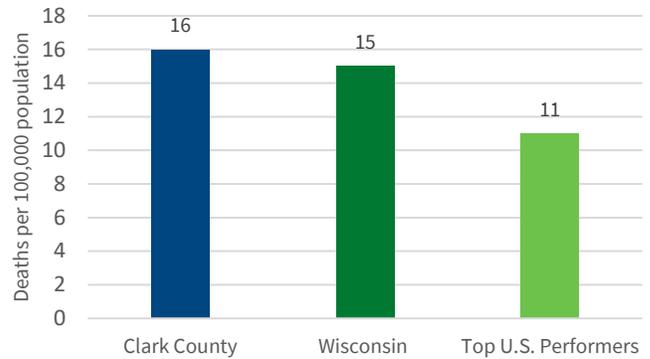
Disparities and Equity

- Individuals with less than a high school education are more than twice as likely to have frequent mental distress compared to those with a college degree.[5]
- Women have a 70% higher rate of depression compared to men.[5]
- Individuals who are multiracial or American Indian / Alaskan Native are three times as likely, and White individuals were 2.5 times as likely, to experience depression compared to individuals who are Asian/Pacific Islander. However, the rate of depression in individuals who are Asian/Pacific Islanders is increasing at a faster rate than other groups.[5]
- Poor family relationships can increase the likelihood of depression. Some individuals are at higher risk of poor family relationships, including persons: who identify as LGBTQ; with disabilities and their caretakers; and who suffered from child abuse and neglect.[6]
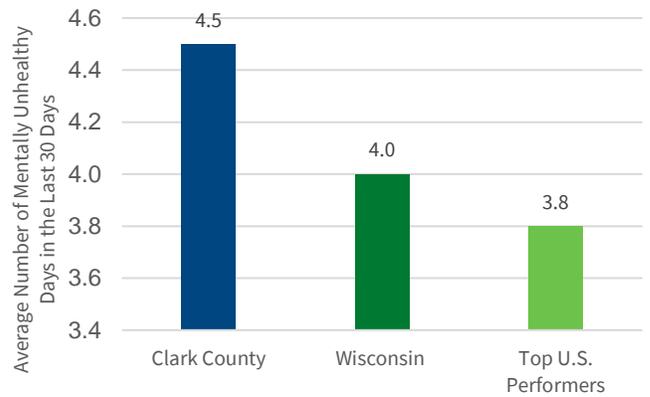
Sources: (5) 2021 America's Health Rankings, Executive Summary. https://assets.americashealthrankings.org/app/uploads/2021_ahr_health-disparities-report_executive_brief_final.pdf (6) Shim, Ruth S; Ye, Jiali; Baltrus, Peter; Fry-Johnson, Yvonne; Daniels, Elvan; Rust, George. Racial/Ethnic Disparities, Social Support, and Depression: Examining a Social Determinant of Mental Health. Ethn Dis. 2012 Winter; 22(1): 15-20. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4039297/

Data Highlights

Suicide Deaths

	Clark County	Wisconsin	Top U.S. Performers
Deaths per 100,000 population	16	15	11

Poor Mental Health Days

	Clark County	Wisconsin	Top U.S. Performers
Average Number of Mentally Unhealthy Days in the Last 30 Days	4.5	4.0	3.8

Sources: 2021 County Health Rankings

Community Perceptions & Challenges

- In the community survey, Mental Health was tied with Overweight/Obesity as the top-ranked health outcome
- It is a challenge to recruit and retain mental health care providers
- COVID-19 has exacerbated existing mental health issues

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Mental Health

Aspirus Stanley Hospital plans to address mental health through the strategies below.

Program Accountability		Population Accountability	
Strategies	**Performance Measures**	**Indicators**	**Results**
Prevention			
• Mental health and suicide prevention trainings (e.g., Question, Persuade, Refer, MH First Aid) • Anti-stigma campaign (e.g., coasters in bars) • Youth prevention efforts • Resource brochures • Depression and anxiety screenings in primary care	• # of trainings • # of training participants • Training evaluation results • Measures specific to the youth prevention efforts • # of brochures distributed	• Decrease the suicide rate (baseline is 16 deaths per 100,000 population (2015-2019)) • Decrease the average number of poor mental health days in the last 30 days (baseline is 4.5 (2018)) • Decrease the percent of middle school students who report being bullied in the last 12 months (baseline is 35% (2018-19)) • Decrease the percent of high schoolers who experienced prolonged, disruptive sadness in the last 12 months (baseline is 22% (2018-19)) • Decrease the percent of high schoolers that seriously considered suicide in the last 12 months (baseline is 14% (2018-19))	Community members have equal opportunities for mental well-being
Treatment			
• Direct care and/or referrals for mental health services	• TBD		

Collaborative Partners	Aspirus Resources
• Clark County Prevention Partnership • Marshfield Medical Center – Neillsville • County services (e.g., health department, community services, etc.) • Chippewa County Mental Health Action Team • Chippewa County Mental Health Matters Steering Committee • Central Wisconsin Partnership for Recovery, Youth Programming Workgroup • Schools • Area churches	• Funding • Staff time – coalition participation, event planning and promotion, resource identification • Printing services (in-kind) – community-facing health-focused materials • Space (pending COVID-19 restrictions) – hosting support groups, programs and meetings • Clinical services and related infrastructure – providing direct mental health care, FindHelp, etc.

Chronic Disease

Why is it Important?

Chronic diseases include, but are not limited to, heart disease, stroke, cancer, diabetes and asthma. Coronary heart disease is the leading cause of death in the U.S.; cancer is the second-leading cause.[1] Chronic diseases can often be prevented through healthy diet, physical activity and eliminating tobacco use and substance abuse. Chronic diseases are important because:

- They are very costly. Ninety percent of healthcare spending is generated by 50 percent of the population that has one or more chronic diseases (2016).[2]
- Effective management can prevent more serious complications.
- One in every four U.S. healthcare dollars is spent caring for people with diagnosed diabetes.[3]

Sources: (1) Centers for Disease Control and Prevention FastFacts (2) Centers for Disease Control and Prevention National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) (3) American Diabetes Association

Disparities and Equity

- The rate of 'multiple chronic diseases' (having three chronic diseases) has been increasing for some groups of people: adults with some college or a college degree; white adults; Black adults; women; American Indian / Alaska Native adults.[4]
- Women, compared to men, have higher rates of multiple chronic conditions, asthma and cancer. [4]
- Pre-existing chronic conditions have been associated with approximately two-thirds of covid hospitalizations. [4]
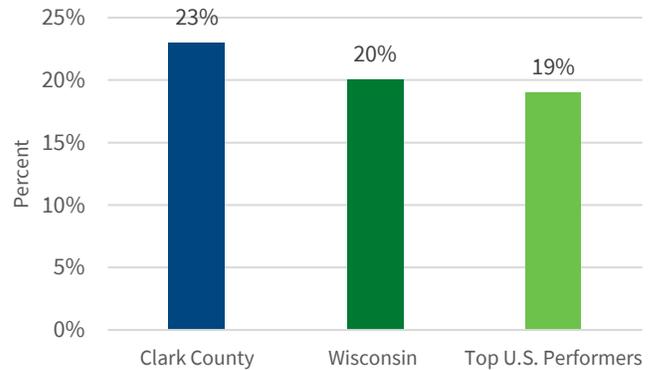
Sources: (4) 2021 America's Health Rankings Disparities Report

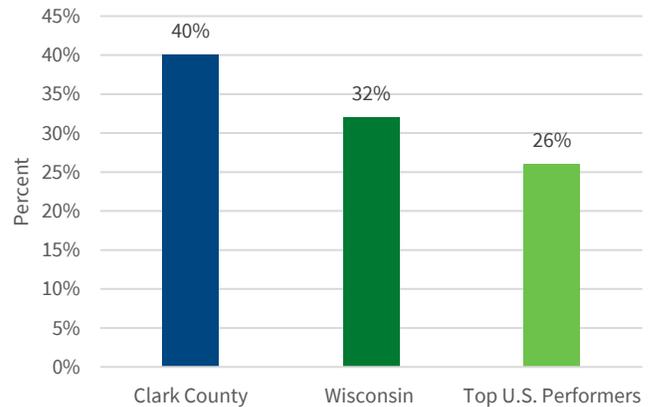### Community Perceptions & Challenges

- In the community survey, Obesity/Overweight was tied with Mental Health as the top-ranked health outcome
- Low income and limited access to resources is connected to poor health

Data Highlights

Percentage of Adults Age 20 and Over Reporting No Leisure-time Activity

	Percent
Clark County	23%
Wisconsin	20%
Top U.S. Performers	19%

Percentage of Adults Who are Overweight or Obese

	Percent
Clark County	40%
Wisconsin	32%
Top U.S. Performers	26%

Sources: 2021 County Health Rankings

Clark County Data Compared to Wisconsin

- Poor physical health days (in the last 30): 4.5 Clark / 3.7 WI
- Adults with no leisure time activity: 23% Clark / 20% WI
- Adults who are current smokers (a leading cause of chronic disease): 23% Clark / 17% WI

Sources: 2021 County Health Rankings

Chronic Disease

Aspirus Stanley Hospital plans to address chronic disease through the strategies below.

Program Accountability		Population Accountability	
Strategies	**Performance Measures**	**Indicators**	**Results**
Prevention			
• Strong Bones, Strong Bodies • Food gleaning • Hydroponic garden • StoryWalk • Bike Path (Stanley) • Conduct education and outreach activities	• # of sessions • # of session participants • Improvements in strength, balance & flexibility • # of active hydroponic gardens • # of students • Level of fresh food consumption (hydroponic garden) • # of path users (sample) • Measures specific to the education and outreach activities	• Decrease in the percentage of adults having no leisure-time activity (baseline is 23% (2017)) • Decrease in the percentage of adults who are overweight or obese (baseline is 40% (2017)) • Decrease in the percentage of the population who have adequate access to food (baseline is 9% (2018))	Community members have equal opportunities for physical well-being
Treatment			
• Fruit and vegetable prescription program (FVRx)	• # of vouchers given to patients • % of vouchers redeemed at the farmers markets		

Collaborative Partners	Aspirus Resources
• Clark County Eat Right, Be Fit Coalition • Marshfield Medical Center – Neillsville • County services (e.g., health department, etc.) • University of Wisconsin – Extension • Chippewa County Chronic Disease Prevention Partnership • Local food pantries • Schools • Area churches • Area civic groups (e.g., Lions Club)	• Funding • Staff time – coalition participation, event planning and promotion, resource identification • Printing services (in-kind) – community-facing health-focused materials • Space (pending COVID-19 restrictions) – hosting support groups, programs and meetings • Clinical services and related infrastructure – providing direct health care, FindHelp, etc. • Repurposed (untouched) cafeteria food

Physical Environment and Safety

Why is it Important?

The air we breathe and water we drink affects every moment of our lives. Poor air quality impacts asthma and lung-related diseases.[1] Poor water quality can lead to infection, illness and/or disease.[1]

Injury is the leading cause of death for children, adolescents and adults under age 45.[2]

Sources: (1) County Health Rankings and Roadmaps (2) Healthy People 2030

Disparities and Equity

People with low incomes are more likely to live in polluted areas and have unsafe drinking water. Children and pregnant women are at higher risk of health problems related to pollution.[3]
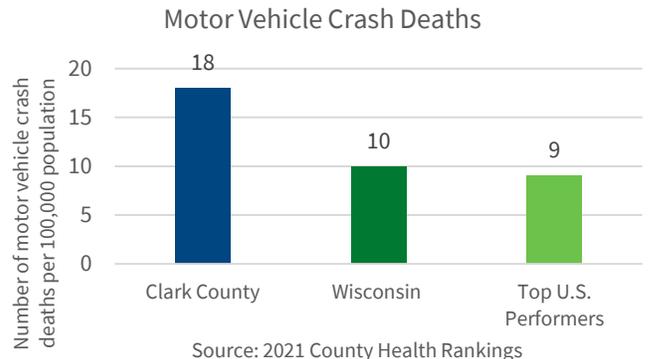
In 2013-2017 — before the pandemic — households headed by Hispanic (29.9%), Black (25.3%) and American Indian/Alaska Native (24.2%) individuals had roughly a two times higher rate of severe housing problems than households headed by white (13.4%) individuals. Amid the pandemic, studies documented that counties with a higher percentage of households living in poor housing conditions faced a higher rate of COVID-19 infection and associated mortality. A large share of those disproportionately impacted were people of color.[4]

Sources: (3) Copied verbatim from Healthy People 2030 (4) Copied verbatim from America's Health Rankings 2021 Health Disparities Report (page 32)

Community Perceptions & Challenges

- Working on these issues would be very tangible
- Physical environment and safety are not very political
- With this topic, there are opportunities to reach individuals from the Plain community

Data Highlights

Motor Vehicle Crash Deaths

Bar chart — Number of motor vehicle crash deaths per 100,000 population: Clark County 18, Wisconsin 10, Top U.S. Performers 9.

Source: 2021 County Health Rankings

2018 Blood Lead Testing - Children Under 6 *

County	Total Tested	Number ≥ 5 mcg/dL	Percent ≥ 5 mcg/dL
Chippewa	650	15	2.31%
Clark	415	18	4.34% (15th highest)
Eau Claire	1,132	23	2.03%
Jackson	252	6	2.38%
Marathon	1,271	20	1.57%
Taylor	152	1	0.66%
Wood	1,045	9	0.86%

*Source: WI Division of Public Health

Additional Clark County Data

- Households with severe housing problems: 14% Clark / 14% WI*
- Carbon monoxide poisoning (emergency room visits related to unintentional CO poisoning, age-adjusted per 100,000 people): 9.9 Clark / 8.1 WI**
- From 2016-2021, 5 Clark County children (under age 18) died in a farming-related accident (e.g., large animal or heavy machinery)***
- From 2016 through 2019, there were at least 13 farm-related or buggy-related injuries and deaths in Clark County***

* 2021 County Health Rankings
** Wisconsin Environmental Public Health Tracking Program
*** National Fatality Review Case Reporting System, accessed by the Clark County Health Department

Physical Environment and Safety

Aspirus Stanley Hospital plans to address physical environment and safety through the strategies below.

Program Accountability		Population Accountability	
Strategies	**Performance Measures**	**Indicators**	**Results**
Prevention			
• SafeKids Coalition work • Safe biking on trails • Support at least two collaborative efforts on environmental safety and injury prevention (e.g., agriculture-related) • Conduct education and outreach activities	• # of 'views' of the bike safety videos • Measures specific to the collaborative efforts • Measures specific to the education and outreach activities	• Reduce to 0 the number of farming-related child deaths (baseline is 5 (2016-2021)) • Decrease in the number of injury-related emergency department visits by children ages 0-17 (baseline is 510 (2021))	Community members have equal opportunities for safe and toxic-free surroundings

Collaborative Partners	Aspirus Resources
• Clark and Wood County SafeKids Coalition • Marshfield Medical Center – Neillsville • County services (e.g., health department, etc.) • University of Wisconsin – Extension • Schools • Area churches • Local law enforcement and emergency services	• Funding • Staff time – coalition participation, event planning and promotion, resource identification • Printing services (in-kind) – community-facing health-focused materials • Space (pending COVID-19 restrictions) – hosting support groups, programs and meetings • Clinical services and related infrastructure – providing age-appropriate safety screenings in primary care, FindHelp, etc.

Social and Economic Needs

Research shows that social and economic factors are significant 'upstream' contributors to individuals' overall health and well-being. Aspirus Stanley Hospital is committed to recognizing and addressing these 'root causes' as part of its overall community health improvement efforts. A number of strategies/approaches are being implemented within the hospital and clinics as well as with other community partners (e.g., Clark County Public Health).

One example of addressing social and economic needs is FindHelp.org. FindHelp.org is a database of resources – food, housing, cribs, etc. FindHelp.org is integrated into the electronic health record but is also available to the general public. Aspirus is able to track searches and referrals through FindHelp.org.

Approval by the Hospital Board

The implementation strategy report was reviewed and approved by the Aspirus Stanley Hospital Board of Directors on September 20, 2022.

Conclusion

Thank you to all the community members who provided thoughts, input and constructive feedback throughout the process. Aspirus Stanley Hospital will continue to work with its partners to address the health issues important to the community.

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September 2022