Executive Summary

Enterprise Overview:
Mayo Clinic is a nonprofit, worldwide leader in patient care, research and education. Each year, Mayo Clinic serves more than 1 million patients from communities throughout the world, offering a full spectrum of care from health information, preventive and primary care to the most complex medical care possible. Mayo Clinic provides these services through many campuses and facilities, including 24 hospitals located in communities throughout the United States, including Arizona, Florida, Georgia, Iowa, Minnesota and Wisconsin.

A significant benefit that Mayo Clinic provides to all communities, local to global, is through its education and research endeavors. Mayo Clinic reinvests its net operating income funds to advance breakthroughs in treatments and cures for all types of human disease, and bring this new knowledge to patient care quickly. Through its expertise and mission in integrated, multidisciplinary medicine and academic activities, Mayo Clinic is uniquely positioned to advance medicine and bring discovery to practice more efficiently and effectively.

In addition, through its Centers for the Science of Health Care Delivery and Population Health Management, Mayo Clinic explores and advances affordable, effective health care models to improve quality, efficiency and accessibility in health care delivery to people everywhere.

Entity Overview
Mayo Clinic Health System in Eau Claire is a 310-bed hospital located in Eau Claire, Wisconsin. Since 1905, the hospital has been dedicated to promoting health and meeting the health care needs of our patients.

Mayo Clinic Health System in Eau Claire is one of 17 hospitals within Mayo Clinic Health System. Eau Claire is part of the northwest Wisconsin region of Mayo Clinic Health System, which includes hospitals in Barron, Bloomer, Menomonie and Osseo. Mayo Clinic Health System in Eau Claire supports the community through inpatient and outpatient services.

Mayo Clinic Health System is a family of clinics, hospitals and health care facilities serving more than 70 communities in Georgia, Iowa, Minnesota and Wisconsin. It includes more than 900 providers and serves more than half a million patients each year. As part of Mayo Clinic, a leading caregiver with nearly 150 years of patient care, research and medical education expertise, the organization provides a full spectrum of health care options to local neighborhoods, ranging from primary to highly specialized care. Mayo Clinic Health System is recognized as one of the most successful regional health care systems in the United States.

Mayo Clinic Health System provides patients with access to cutting edge research, technology and resources. Our communities have the peace of mind that their neighbors are working together around the clock on their behalf.

Mayo Clinic Health System was developed to bring a new kind of health care to communities. By putting together integrated teams of local doctors and medical experts, we’ve opened the door to information sharing in a way that allows us to keep our family, friends and neighbors healthier than ever before.

Mayo Clinic’s greatest strength is translating idealism into action. It’s what our staff does every day for our patients, and it’s how we transform hope into healing.
Mayo Clinic Health System was created to fulfill the commitment to bring Mayo Clinic quality health care to local communities. As part of this commitment, the system has a long tradition of supporting community health and wellness. In 2014, Mayo Clinic Health System in Eau Claire provided $2.7 million in charity care, more than $8.7 million in Medicaid shortfall and more than $9.7 million in bad debt. The hospital provided more than $190,000 through philanthropic donations to support programs, such as the American Cancer Society, American Heart Association, Epilepsy Foundation, Camp Wabi (a 12-day camp for children dealing with obesity), local emergency medical services support, free clinic monies and services, United Way support and college scholarships, to name a few.

The organization also provides a wide range of wellness and prevention programs for the community, including free blood pressure, cholesterol, glucose and stroke screenings. In 2014, the hospital provided health and wellness activities at local health fairs, car control classes, prom trauma simulations, safety camps for children, growing up classes, cardiac education, grocery store tours, cooking classes for children and more. More than 25,000 residents were impacted by these offerings.

Annually, the hospital organizes a school supply drive to donate items to needy children. For the past 12 years, the organization has matched families in need with interested departments to buy, wrap and deliver Christmas gifts to those who would otherwise go without. In 2014, more than 50 families were helped.

The hospital also is a place of learning for many physicians, nurses, chaplains and pharmacists. In 2014, the cost of hosting these educational programs was valued at more than $1.8 million.

The Mayo Clinic Health System Community Health Needs Assessment (CHNA) process advances and strengthens our commitment to community health and wellness activities by providing focus on high-priority community needs and bringing additional ones to light.

**Summary of Community Health Needs Assessment**

The Mayo Clinic Health System in Eau Claire process was led by a regional Community Health Needs Assessment Committee (CHNAC). This committee followed a systematic process to evaluate the health needs of our communities and determine the health priorities.

The primary input into the assessment and prioritization process was the 2014-2015 Eau Claire County Community Health Assessment. This report was created through a joint effort of area health care organizations, the City-County Health Department, the United Way and the Eau Claire Healthy Communities Council. This effort, led by the Community Health Assessment Planning Partnership Committee, began with the goal of evaluating community health in order to improve the quality of life for everyone in the community.

Qualitative and quantitative data collection methods included:

- Analysis of existing data gathered from a variety of sources, such as census data, government reports, health department statistics and information collected from local hospitals and local community service organizations.
- Electronic and paper surveys widely distributed to community resource organization representatives and residents, with 1,322 responses received from county residents.
- Listening sessions with typically underserved populations.
- Community conversations with local governmental and resource organization leadership, as well as the general public.

The Wisconsin Department of Health Services recent health agenda, *Healthiest Wisconsin 2020*, as well as County Health Rankings, a joint effort of the Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute, also were taken into consideration.
Community Input

Community input was received at numerous stages and from a variety of levels of leadership throughout the CHNA process. The Community Health Assessment Planning Partnership Committee participated in gathering and analyzing local health data, as well as planning for and distributing community health surveys. Input also was received during the community conversations and collected from the traditionally underserved community through community health surveys distributed to the local senior center and community meal site. Surveys were also distributed to and received from representatives of local community resource organizations that serve traditionally underrepresented, medically underserved, low-income and minority populations. Organizations that received surveys include area schools, Aging and Disability Resource Center, Family Resource Center, Eau Claire County Extension, Bolton Refuge House, Eau Claire Chamber of Commerce and others. All surveys were received electronically or on paper within a month of survey launch. In addition, listening sessions with underrepresented groups were held at the L.E. Phillips Senior Center (Eau Claire), The Community Table (Eau Claire) and with Hmong elders at the Eau Claire Area Hmong Mutual Assistance Association in order to gather additional primary data on perceived community health needs and assets. Written comments were collected at the final community health improvement event in which community members, policy makers and resource organization representatives gathered to discuss evidence-based approaches to the priority health areas selected for Eau Claire County.

After completing an extensive analysis of the 2014-2015 Eau Claire County Community Health Assessment and other qualitative and quantitative data, the top community health needs identified by Mayo Clinic Health System in Eau Claire are listed below. Each of these health focus areas are equally important, however, they are ranked in this priority order:

- Mental health
- Obesity
- Chronic disease prevention and management
Geographic Area

Eau Claire County is located in west-central Wisconsin at the confluence of the Eau Claire and Chippewa Rivers. The county is comprised of three cities, two villages and 13 townships, with a total population of 100,600, approximately 23% of which is rural.

For the purpose of this assessment, Mayo Clinic Health System in Eau Claire’s community is defined geographically as Eau Claire County.

Demographics

Eau Claire County experienced a 6% increase in population from 2000 to 2010. Demographically, the county is 93% Caucasian, 3% Asian, and 1% African-American or another race and 2% of mixed race. The average annual income of an Eau Claire County resident is $48,090, which is less than the state average of $52,413.

The education level of Eau Claire County residents compares well to the statewide average. According to the latest census estimates, 94% of county residents have obtained a high school degree or higher. Approximately 43% of Eau Claire County residents have obtained a two-year college degree or higher. The estimated percentage of the population living in poverty is 15%. In 2014, the average unemployment rate was 4.6%. Additional demographic detail has been included in Appendix A.

Health Providers

The largest employers in Eau Claire County include manufacturing and construction, health care, University of Wisconsin-Eau Claire and computer information systems. Local residents are served by two additional hospitals in the city of Eau Claire: Sacred Heart Hospital and Oakleaf Surgical Hospital.

As a member of Mayo Clinic Health System, the hospital has seamless access to the care offered at the world-renowned Mayo Clinic in Rochester, Minnesota. In addition, the residents of Eau Claire County have access to the following:
Mental Health Services

A Better Life Counseling, Eau Claire
Aging and Disability Resource Center, Eau Claire
Caillier Clinic, Eau Claire
Clearwater Counseling, Eau Claire
Clinic for Christian Counseling, Eau Claire
Dept. of Human Services, Eau Claire
Eau Claire Metro Treatment Center, Eau Claire
First Things First Counseling, Altoona
Hmong Mutual Assistance Association, Eau Claire

Dental Clinics

Aspen Dental, Eau Claire
Augusta Family Dental, Augusta
Chippewa Valley Dental Health, Eau Claire
Chippewa Valley Endodontics, Eau Claire
CVTC Dental Clinic, Eau Claire
Eau Claire Family Dental, Eau Claire
Fall Creek Dental, Fall Creek
Hebert Dental, Eau Claire
Kenyon Family Dental, Altoona
Kristo Orthodontics, Eau Claire
Larson Orthodontic Specialists, Eau Claire
Lifetime Dental Care, Eau Claire
Mahler Family Dentistry, Eau Claire
Maple Ridge Dental, Eau Claire
Martin Dental, Eau Claire
Menomonie Street Dental, Eau Claire
Midwest Dental Oakwood, Eau Claire
OakPark Dental, Eau Claire
Oakwood Hills Family Dental, Eau Claire
Oral & Maxillofacial Surgery Associates, Eau Claire
Ostertag Orthodontics, LLC, Eau Claire
Regis Court Dental Associates, Eau Claire
River Prairie Dental, Eau Claire
Summit Dental Management, Eau Claire
Terpstra Orthodontics, Eau Claire
Turner Walter Pediatric Dentistry, Eau Claire

Assisted Living & Nursing Homes

Augusta Area Home, Augusta
Azura Memory Care, Eau Claire
Care Partners Assisted Living, Eau Claire
Clairemont Nursing and Rehabilitation, Eau Claire
Dove Healthcare, Eau Claire
Grace Edgewood Assisted Living, Altoona
Grace Willowbrook, Eau Claire
Grace Woodlands, Eau Claire
Mt. Washington Residence, Eau Claire
Oak Gardens, Altoona
Oakwood Villa, Altoona
Orchard Hills Assisted Living, Eau Claire
Syverson Lutheran Home, Eau Claire
Wunderhaven, Fall Creek

Drug & Alcohol Facilities

Affinity House, Eau Claire
First Things First Counseling, Altoona
Eau Claire Metro Treatment Center, Eau Claire

Omne Clinic, Eau Claire
Touchstone Center, Eau Claire
Assessing the Needs of the Community

**Overview**

Mayo Clinic Health System in Eau Claire identified and prioritized community health needs through a comprehensive process that included input from a cross-section of community and organizational leadership, as well as direct input from the community. The assessment process was particularly aimed at understanding the needs of the traditionally underserved in the community.

The Mayo Clinic Health System regional CHNAC led the process of evaluating the health needs of our communities and determining our health priorities. The committee was chaired by the regional CEO and included leadership from the northwest Wisconsin region of Mayo Clinic Health System, which is comprised of five hospitals located in Barron, Bloomer, Eau Claire, Menomonie and Osseo. Committee members were chosen for their expertise in directly providing services to meet the health needs of our communities and for their involvement in existing community programs and services. The committee was responsible for executing a thorough and organized needs assessment process, as well as developing an effective plan to meet those needs. (See Appendix B for Community Health Needs Assessment Committee membership.)

**Process and Methods**

The assessment process began with a thorough review of the 2014-2015 Eau Claire County Community Health Assessment, which was completed by a local coalition made up of local health care organizations (including Mayo Clinic Health System), the City-County Health Department, the United Way and the Eau Claire Healthy Communities Council. The purpose of this report was to assess the needs in our community, identify resources to address the most urgent needs and encourage action plans to solve community problems. This report is a resource for promoting greater collaboration among organizations working to improve the health and well-being of the population. The list of partner organization representatives who participated in the health assessment has been included as Appendix B.

[View the complete report](#)

The local partners involved in the 2014-2015 Eau Claire County community health assessment process included:

- Eau Claire City-County Health Department
- Eau Claire Healthy Communities Council
- HSHS Sacred Heart Hospital
- Marshfield Clinic
- Mayo Clinic Health System
- United Way of the Greater Chippewa Valley

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* Note that the Eau Claire County and Chippewa County health assessment processes were conducted concurrently by a single project manager. The Community Health Assessment Planning Partnership Committee oversaw assessment activities in both counties. This report highlights only data collection/analysis activities and community participation as it relates to Eau Claire County.
All partners contributed financial and personnel resources to the assessment and met twice a month from May 2014 through May 2015 to plan and implement the Community Health Assessment. These resources were used to fund a part-time, limited-term project manager who facilitated meetings between the planning committee, gathered data and coordinated assessment activities.

The collaborative health assessment process began by engaging the public through a community health needs survey. The objective of the survey was to increase understanding of the community’s needs and the perceived greatest health challenges facing the community. The survey was available online and by paper copies distributed widely through the community. Survey questions focused on 14 health areas based on the Wisconsin Department of Health Services health plan, *Healthiest Wisconsin 2020*. The health focus areas addressed in the survey were: alcohol misuse, chronic disease prevention and management, communicable disease prevention and control, environmental and occupational health, healthy growth and development, healthy nutrition, injury and violence, mental health, obesity, oral health, physical activity, reproductive and sexual health, substance use, and tobacco use and exposure. Survey respondents were asked to rate each of the health focus areas on a four-point scale indicating how much of a problem they felt each area to be for the community (1=not a problem, 4=major problem) and identify reasons they felt the area was a problem.

A total of 1,322 Eau Claire County residents responded to the survey. Survey respondents represented a wide range of county residents, including a variety of income and educational levels, age and household size. Survey analysis was completed by the Eau Claire Mayo Clinic Health System Marketing Research Department.

Analysis of the survey respondent demographics indicated that a relatively low number of surveys were received from the population in Eau Claire County over age 70 and residents who had not completed a college education. To gain additional input from these groups, targeted listening sessions were held to gather information on barriers to and resources for making healthy choices in the community. These sessions were held in November and December 2014 at the Eau Claire community meal site The Community Table, L.E. Phillips Senior Center and Hmong Wellness Day at Eau Claire Area Hmong Mutual Assistance Association. A key informant interview was also held with an Eau Claire City-County Health Department public health nurse who serves the Eau Claire County Amish population. Each listening session was conducted by at least one Community Health Assessment Planning Partnership organization representative. Session participants were asked a series of questions related to community health and their responses were recorded.

Recurring themes that arose through the listening sessions were affordability and accessibility of healthy food, as well as lack of employment as barriers to healthy choices. Many respondents felt that access to and awareness of physical activity opportunities would be helpful in making healthy choices on a more regular basis. Respondents generally indicated that a healthy community would be one that offered an aesthetically pleasing built environment that encouraged physical activity, as well as a community that was mutually supportive of one another. A summary of listening session responses are available in Appendix C.

Mayo Clinic Health System in Eau Claire was heavily involved in several events in which community feedback was sought during the assessment process. These events were open to the public and well attended by representatives of community resource organizations. These opportunities included five community conversations held in rural and urban areas of the county in which local health data and results from the survey were shared. Following facilitated discussion, participants were asked to prioritize the top health concerns of the county from the 14 health areas under consideration. The results of this prioritization indicated that the top three health priorities for Eau Claire County residents were mental health, alcohol misuse and obesity.
One subsequent public event provided a structured opportunity for discussion of root causes, resources and gaps in services for the top three priority areas identified. These discussions were recorded and included in the 2014-2015 Eau Claire County Community Health Assessment. A total of 139 community members representing sectors as broad as local and regional government, cooperative educational services, health care providers, university faculty and students, nonprofit organizations and retired citizens participated in the public discussion events. Data gathered at these events is being used to form specific community action plans to assist in creating real, lasting change in our area through the health department and other community health-oriented organizations.

Along with reviewing the 2014-2015 Eau Claire County Community Health Assessment evaluation and discussion of the county community health assessment included a thorough review of primary and secondary data collected throughout the year-long process, as well as community rankings as provided by County Health Rankings. Launched in 2010, the County Health Rankings program aimed to produce county-level health rankings for all 50 states. County Health Rankings identify the multiple health factors that determine a county’s health status and indicate how health status can be impacted by where we live. Factors that can determine the health status of a community include environment, education, jobs, individual behaviors, access to services and health care quality. The 2014 Eau Claire County Health Rankings report is included in Appendix D. Other data sources included in the Eau Claire County Community Health Assessment are the state health plan Healthiest Wisconsin 2020, U.S. Census, Behavioral Risk Factor Surveillance System, Youth Risk Behavior Surveillance System, Wisconsin Department of Public Health and other local and national sources.

**Prioritization Process and Criteria**

The CHNAC used these data sources to compile a listing of community health needs to be addressed. Community health needs were then evaluated using a matrix called the CHNA Process to Identify and Prioritize Needs. This process measured each need on a set of criteria: Comparison to State and National Performance, Community Impact, Ability to Impact, Community Readiness, Gaps in the Community, and Voice of the Local Customer. Following group discussion, each need was given a ranking of high, medium or low for each criterion. The rankings were then assigned a numerical value from 1 to 3, where 3 was equivalent to high.
Addressing the Needs of the Community

Overview
After completing an extensive analysis of the Eau Claire County Community Health Assessment data and County Health rankings, the top community health needs identified as Mayo Clinic Health System in Eau Claire priorities are:

- Mental health
- Obesity
- Chronic disease prevention and management

The prioritization matrix used during the analysis is included as Appendix E.

The Mayo Clinic Health System in Eau Claire priorities selected were among the top five priorities identified in the Eau Claire County Community Health Assessment process. Two additional priorities identified by the county health assessment process are alcohol misuse and healthy nutrition. The CHNAC felt that by identifying obesity as a hospital health priority, healthy nutrition would be addressed as a means for obesity prevention and management. Though alcohol misuse was not selected as a health priority, the CHNAC believes that this area is an important health need for the community. However, the committee did not feel that the community was ready to make improvements in this area or that the hospital possessed appropriate resources to propel community change at this time. The CHNAC resolved, when possible, to support other efforts to address alcohol misuse in the community, such as the work being done by Eau Claire Healthy Communities High Risk Drinking Prevention Action Team and the Alliance for Substance Abuse Prevention.

Identified Health Needs

Mental Health
The mental health focus area refers to services and support to address how we think, act and feel as we cope with life. Mental health is essential for personal well-being, caring family and interpersonal relationships, and meaningful contributions to society. Mental health conditions may include but are not limited to depression, anxiety, post-traumatic stress disorder and bipolar disorder.

Good mental health allows us to form positive relationships, use our abilities to reach our potential and deal with life’s challenges. Mental illnesses are medical conditions that impair a person’s thinking, mood, ability to relate to others and ability to cope with the daily demands of life.

Mental illnesses often are associated with physical health problems and risk factors, such as smoking, physical inactivity, obesity and substance abuse: factors that can lead to chronic disease, injury and disability. Additional information from the Healthyest Wisconsin 2020 plan can be found at https://www.dhs.wisconsin.gov/publications/p0/p00816-mental-health.pdf.

Data Highlights from Community Health Assessment
Population mental health is difficult to quantify outside of self-reported data. However, several measures can serve as a proxy for mental well-being in a community, such as adverse childhood experiences and self-inflicted injuries. In Eau Claire County, age-adjusted self-inflicted injury hospitalizations have exceeded the statewide average since 2000.
In Eau Claire County:

- Over 90% of Community Health Needs Assessment Survey respondents indicated mental health is a problem in our community.
- Sixteen percent of Eau Claire County 10th and 12th grade students have considered suicide sometimes, often or a lot.
- Eau Claire County residents reported an average of two mentally unhealthy days in the past 30 days.

Obesity

Obesity is defined as the presence of excessive body fat that can increase the risk of heart disease, high blood pressure, diabetes, cancer and other chronic diseases. A body mass index (BMI) over 30 is considered obese.

Obesity in our communities can contribute to increased medical costs and decreased productivity, resulting in significant economic impacts. The prevalence of Wisconsin adult obesity increased from 24% to 30% from 2004 to 2012 (Wisconsin Department of Health Services). Maintaining a healthy weight also is important for reducing the risk of developing chronic conditions that may have a major impact on quality of life. Healthy weight management promotes good mental health, healthy nutrition, physical activity and a longer life.

Obesity prevention focuses on increasing healthy eating habits and physical activity for our community members. However, busy lifestyles or lack of access to healthy food and recreational areas often are barriers to making healthy choices. To overcome these barriers, we must work to make the healthy choice the affordable and easy choice for everyone within our community. Additional information from the Healthiest Wisconsin 2020 plan can be found at https://www.dhs.wisconsin.gov/publications/p0/p00816-physical-activity.pdf and https://www.dhs.wisconsin.gov/publications/p0/p00816-nutrition.pdf.

Data Highlights from Community Health Assessment

Obesity is closely linked to many common chronic diseases, such as heart disease, high blood pressure and diabetes. Similar to statewide trends, obesity among adults in Eau Claire has increased steadily over the past 10 years.
In Eau Claire County:

- Eighty-one percent of Community Health Needs Assessment Survey respondents indicated obesity is a problem in our community.
- Twenty-nine percent of Eau Claire county children age 2 to 5 in WIC are overweight or obese.
- Over the past 10 years, the number of adults engaged in regular physical activity has declined.
- Fifty-four percent of Eau Claire County restaurants serve fast food, compared to 41% statewide.

Chronic Disease Prevention & Management

According to Healthiest Wisconsin 2020, the goals of chronic disease prevention and management are “to prevent disease occurrence, delay the onset of disease and disability, lessen the severity of disease, and improve the health-related quality and duration of the individual’s life.”

Four modifiable health risk behaviors — unhealthy diet, insufficient physical activity, tobacco use and secondhand smoke exposure, and excessive alcohol use — are responsible for much of the illness, suffering and early death related to chronic diseases. Prevention isn’t always possible, so it’s important that effective management is also part of the health care system.

Although chronic diseases usually become clinically apparent in adulthood, the exposures and risk factors that precede disease onset occur at every stage of life. Childhood and adolescence are critical times to deliver and reinforce health education messages. Additional information included in the Healthiest Wisconsin 2020 Health Focus Areas report can be found at https://www.dhs.wisconsin.gov/publications/p0/p00816-chronic-disease.pdf.

Data Highlights from Community Health Assessment

Chronic diseases, such as heart disease, stroke, cancer, diabetes, asthma and arthritis, are among the most common and costly of all health problems in the U.S. Currently, chronic diseases account for seven of the 10 leading causes of death in Wisconsin and account for approximately two out of every three deaths nationwide.
**In Eau Claire County:**

- Cancer and cardiovascular disease accounted for 47% of deaths in 2012.
- Ninety-one residents were hospitalized for asthma in 2012, with an average cost of $14,048 per admittance.
- Eighty-eight percent of Community Health Needs Assessment Survey respondents indicated chronic disease prevention and management is a problem in our community.

**Available Resources**

Community resources available to support and address the top community health concerns identified in the Eau Claire County community health assessment are provided as an appendix to the 2014-2015 Eau Claire County Community Health Assessment, which can be found at [http://eauclaire.wi.networkofcare.org/content/client/1148/2015-Eau-Claire-County-Community-Health-Assessment.pdf](http://eauclaire.wi.networkofcare.org/content/client/1148/2015-Eau-Claire-County-Community-Health-Assessment.pdf).
Evaluation of Prior CHNA and Implementation Strategy

In 2013, Mayo Clinic Health System in Eau Claire identified community engagement and wellness as a strategic priority and work began in identifying processes, programs, partnerships and sponsorships that would benefit our focus areas of physical activity, nutrition and chronic disease prevention and management.

Community Engagement and Wellness

A formal Community Engagement and Wellness Department (CEW) was created in 2014 with the primary focus of impacting change on the three identified health needs. The department has made significant strides in promoting capacity building, forming and growing community coalitions, building strong partnerships with local organizations and schools, increasing the number of community wellness activities to our residents and playing active roles in teams focused on improving health.

A CEW Committee, made up of organization leaders and others interested in community health is charged with supporting the development and implementation of the organization’s community wellness and engagement strategy. Members help coordinate and implement wellness programs and work with community partners to bring programming and education to the Eau Claire community.

A generous annual budget allows this team to provide support for existing community programs and to pay our employees to spend time organizing, implementing and becoming trainers for evidence-based programming.

In 2014, our community health education programming reached more than 11,000 people in the Eau Claire community. Whether we were teaching children about healthy eating, sharing safety information with teens regarding drinking and driving, or talking with seniors about healthy living, our wellness experts were in full force.

A snapshot of programs and activities created to impact our focus areas are described below:

- **Grocery Store Tours** — Dietitians and health educators show how to navigate the never-ending aisles of food products so healthy food choices are made. Participants also learn how to read and understand food labels and find healthy on-the-go options.
- **Train with the Eau Claire Express** — Youth learn drills and interact with local baseball team.
- **My Night to Cook** — Children learn quick and easy meals and snacks that they can prepare for the whole family.
- **Camp Wabi** — In a fun outdoor setting, children who struggle with obesity learn how to make lifestyle changes necessary to maintain a healthy weight. This is a 12-day summer camp held at the local YMCA Camp Manitou.
- **Family Fun Night** — Co-sponsored by the Eau Claire Express baseball team, families watch batting practice, play with inflatables and enjoy yard games.
- **Family Hike at Beaver Creek Reserve** — Families take part in naturalist hikes, children's games and activities and live music.
- **Make-and-Take Vegetable Garden Workshop** — Participants create a vegetable garden using a sub-irrigated gardening system.
- **Family Fun Concert** — Opportunity for family play. Children in third grade and younger clap, sing and dance to silly and inspiring musical games.
- **Let's Move** — Six-week class for children ages 2 through 6 and an adult. Kids learn stretching activities, participate in action songs, dancing, basic tumbling and obstacle courses.
• **Living Well with Chronic Disease** — Workshop for those who have or live with someone that has a chronic condition focusing on maintaining an active and fulfilling life.

• **Busy Bodies** — Co-sponsored by Lily Pad Labs, children and families incorporate movement and music into play.

• **Stepping On** — Seven-week, evidence-based prevention program works on improving balance, strength training, home environment safety and medication review

**Partnerships**

Strong partnerships with local organizations have only strengthened the impact of sharing healthy living messages in the community. In the past two years, relationships with the following organizations have been enhanced and/or developed:

- Aging & Disability Resource Center of Eau Claire County
- Beaver Creek Reserve
- Big Brothers Big Sisters
- Boys & Girls Club
- City of Eau Claire – Parks & Recreation
- Eau Claire City –County Health Department
- Eau Claire County UW-Extension
- Eau Claire Express (local minor league baseball team)
- Eau Claire Marathon
- Eau Claire YMCA
- Feed My People Food Bank
- Girls on the Run
- Girls Scouts of America
- L.E. Phillips Memorial Library
- Lily Pad Labs
- The Community Table of Eau Claire
- United Way
- Wisconsin Department of Natural Resources

**Hometown Health Grant**

In 2015, we introduced a Hometown Health grant, thanks to the Mayo Clinic Health System – Eau Claire Foundation. This grant supports innovative efforts to improve nutrition, increase physical activity and reduce chronic disease in local schools, workplaces and neighborhoods. This grant works in partnership with community-based organizations and residents to translate their vision for healthy communities into visible, concrete changes — and ultimately a healthier hometown.

More than $182,000 in grant money was awarded to nine nonprofits in our service area. The program opened to applicants in January 2015, and funds were awarded in June. We plan to offer grants yearly. We know that by investing in our community partners, we can make a bigger impact in improving the health of all in the area. Awardees in 2015 were:

- City of Eau Claire: Outdoor Fitness Zone at Owen Park, $25,000
- Eau Claire YMCA: YMCA Healthy Living, $25,000
- Boys and Girls Club of Chippewa, Dunn and Eau Claire counties: Drug, Alcohol & Positive Behavior Program, $25,000
- Barron Boys & Girls Club: Healthier Out of School Time (HOST), $25,000
• Stepping Stones of Dunn County: Project Share a Meal, $25,000
• Feed My People Food Bank of western Wisconsin: Nutritious Foods for All, $20,000
• Barron County Health & Human Services: Diabetes Prevention Program, $15,000
• Junior League of Eau Claire: Kids in the Kitchen, $12,000
• Community Table of Eau Claire: Senior Meals Project, $10,634

While it may be premature to measure significant behavioral change in our community, at this point, we believe the efforts above have made an impact in raising awareness that health is more than the absence of illness. It includes an environment that supports the physical, emotional and social well-being of those who live, work and play here.
## References

- 2014-2015 Eau Claire County Community Health Assessment
- Healthiest Wisconsin 2020
- County Health Rankings
- U.S. Census 2013 Estimates

For more information:

- Eau Claire County Public Health Profile 2012, Wisconsin Department of Health Services
Appendix A: Demographic Data

Eau Claire County Demographics

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<table>
<thead>
<tr>
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<tr>
<td>Sex:</td>
<td>51% Female, 49% Male</td>
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<tr>
<td>Median household income:</td>
<td>$48,090</td>
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<tr>
<td>Percentage of population in poverty:</td>
<td>15%</td>
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<tr>
<td>2014 average unemployment rate:</td>
<td>4.6%</td>
</tr>
<tr>
<td>Population growth rate:</td>
<td>6% from 2000 to 2010</td>
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Household income distribution in Eau Claire County (US Census, 2013 estimates)

- Less than $10,000: 7%
- $10,000 to $14,999: 6%
- $15,000 to $24,999: 13%
- $25,000 to $34,999: 11%
- $35,000 to $49,999: 14%
- $50,000 to $74,999: 19%
- $75,000 to $99,999: 12%
- Over $100,000: 17%

Highest education level attained by Eau Claire County residents over age 25 (U.S. Census, 2013 estimates)

- High school not completed: 7%
- High school or GED: 28%
- Some college: 23%
- Associate's degree: 12%
- Bachelor's degree: 20%
- Graduate or professional degree: 11%
Racial distribution in Eau Claire County (U.S. Census, 2013 estimates)

- White: 93.2%
- Two or more races: 2.0%
- Asian: 3.4%
- Other: 0.4%
- African American: 0.6%
- American Indian and Alaska Native: 0.4%

Age distribution of Eau Claire County residents (DHS public health profile, 2012)

- % Female
- % Male

- 0 - 14: 9% Female, 9% Male
- 15 - 24: 11% Female, 10% Male
- 25 - 44: 11% Female, 12% Male
- 45 - 64: 13% Female, 12% Male
- 65 - 84: 6% Female, 5% Male
- 85+: 2% Female, 1% Male
Appendix B: Individuals Involved in CHNA

2014-2015 Eau Claire County Community Health Assessment Planning Partnership

Community Health Assessment Project Manager
Division Director, 3D Community Health HSHS Sacred Heart and St. Joseph’s Hospitals;
   Director of Chippewa Health Improvement Partnership
Director of Community Wellness and Engagement, Mayo Clinic Health System
Community Health Educator, Eau Claire City-County Health Department
Public Affairs Director, Mayo Clinic Health System
Administrator, Marshfield Clinic – Eau Claire Center
Director/Health Officer, Eau Claire City-County Health Department
Director of Community Investment, United Way of the Greater Chippewa Valley
Marketing Specialist, HSHS St. Joseph’s Hospital; Chair of Chippewa Health Improvement Partnership
Executive Director, United Way of the Greater Chippewa Valley; Co-Chair Eau Claire Healthy Communities
Director/Health Officer, Chippewa County Department of Public Health
Public Affairs Account Coordinator, Mayo Clinic Health System
Community Health Educator, Eau Claire City-County Health Department
Division Director, Marketing Communication, HSHS Sacred Heart and St. Joseph’s Hospitals
Healthy Lifestyles Program Manager, Marshfield Clinic
Mayo Clinic Health System Marketing Research Supervisor, provided analysis of health needs survey data.

*Financial support for the assessment was provided by the nine partner organizations (represented above) and the Otto Bremer Foundation.

Community Health Needs Assessment Committee

Mayo Clinic Health System
Randall Linton, MD, CEO – Mayo Clinic Health System, Northwest Wisconsin
Susan Albee, RN – Nurse Administrator
Dean Eide – Vice President of Operations
Andra Palmer – Legal Counsel
Lynn Salter – Public Affairs Account Coordinator
Jay Edenborg – Public Affairs Director
Rita Sullivan – Vice President of Operations
Ed Wittrock – Vice President of Operations
Mary Bygd – Asst. Administrator
Sara Carstens – Community Engagement and Wellness Director
Susan Zukowski – Corporate Health Services Director
Lori Rongstad – Finance Manager
Benjamin Rindone – Hospital Medicine Director
Hannah Johnson – Administrative Fellow
Paul Bammel - Chief Financial Officer
## Appendix C: Listening session responses

<table>
<thead>
<tr>
<th>Session held by: Audrey</th>
<th>Session held by: Audrey</th>
<th>Session held by: Audrey, Lynn, Sara</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: 11/4/14</td>
<td>Date: 11/25/14</td>
<td>Date: 12/9/14</td>
</tr>
<tr>
<td>Location: The Community Table</td>
<td>Location: Hmong Wellness Day at Hmong Mutual Assn.</td>
<td>Location: L.E. Phillips Senior Center</td>
</tr>
<tr>
<td>Number in attendance: 11 people</td>
<td>Number in attendance: 12</td>
<td>Number in attendance: 26</td>
</tr>
</tbody>
</table>

### Question 1: What makes it hard for people to be healthy?

- Influence of other people
- Ebola
- Having enough money for good food
- Getting money
- Money
- Education
- Not having a job
- Location of services they need
- Lack of money/job
- Lack of drinking fountains or water in vending machines
- People don’t reach out for assistance (i.e. energy assistance)
- Budget
- Jobs
- Fear of leaving home to see what else is available, being out alone
- Lack of help w/exercise for those that suffer from pain (knee, leg, back, arm, chest)
- Existing pain makes exercise difficult
- Bad weather, snow, illness, age make exercise difficult
- Depression, specifically when there is no one available to help you or for you to depend on, to take you around town
- A special diet makes eating difficult
- Cost (food, prescriptions)
- Not enough information about health choices/programs—should have commercial, scrolling info at bottom of TV, senior center newsletter notifications
- Mobility (no car or unable to drive to appointments, etc.)
- Local government not accepting federal money to help the poor
- Physical environment (icy roads, uneven stairs, cold weather)
- Inactive/isolated people
- Alcohol use
- Don’t know neighbors
- Sex trafficking
- Accessibility to junk food
- Too much TV
- Poor variety in hospital food
- False information

### Question 2: What would help to make it easier to make healthy choices?

- Community activities, i.e. crafts, social/play time, community sledding/picnics
- More money
- Community Table have healthier options
- Somewhere to live
- More walking trails
- More benefit runs
- More Farmer’s markets
- More transportation options
- Personally selecting the healthier option
- Abide by laws
- More fruits & veggies offered when free food is available
- Less police enforcement—their presence increases blood pressure
- Casino is helpful to forget about depression
- Am able to go walking in summer time
- Having a caretaker to ease depression
- Having someone (family) w/ ulcer knowledge [to help me manage this condition], and a cane for walking
- Nutritional assistance [respondent must water-down food to make it easier to eat/digest].
- Icy-hot, exercises to help ease pain
- Having family close by and ability to exercise at home
- St. Joe’s seminar on diabetes & long-term care options at 29 Pines.
- More info needed, esp. calories & nutrition in food at restaurants in easy-to-see locations (and consideration of those w/bad vision)
- Lower cost housing
- No smoking
- No drinking
- Friendly neighborhoods
- Better accessibility to healthy foods
- Encouraging family members/support network
- Lower costs
- Welfare—helps food access
- Healthy restaurant offerings
- Family meals/home-cooked meals
- Exercise—programs that target seniors
- Parks and Rec options for seniors (need more)
- YMCA chair yoga (promote more)
### Question 3: Programs/services helping now to make healthier choices

- Positive Avenue activities
- Turkey & Chicken & garlic options at Subway
- Good friends
- Help for unstable housing
- Farmer’s markets
- Walking/bike trails
- Human Services
- Community Table (x2)
- Sometimes food pantry
- Food stamps
- Part-time work

- Wellness Days programming helps with exercise and movement (In discussion w/ translator, she suggested something like IRIS would be helpful to this population)

- ADRC
- Social Security office
- Selected insurance brokers
- Nutrition Action subscription
- E.C. Senior Center
- Abby Van
- Schools, churches, buses, police
- Wellness programs, gyms, yoga
- Hospitals & Clinics
- Newspaper articles
- Meals at senior center (ADRC)
- Health clubs
- Promoting existing programs
- Swimming classes (cold weather deters participants)
- Meals on Wheels

### Question 4: What does a healthy community look like?

- Clean
- Stress free
- Drama free
- Parks/playgrounds
- Well-lit streets
- Nice houses
- Fresh fruit & veggies
- Farmer’s markets, trails
- Help to find stable housing
- More voters

- Have people that help (family members, designated caretaker)
- Helping community
- Supportive community
- Programs for socialization/support among each other
- Activities for people to make friends and be more like a family
- More educated help the less educated, and wealthier help less wealthy

- Senior dinners
- People who are a healthy weight
- Many walkers, bikers, exercisers
- People planting own gardens
- Opportunities for exercise, recreation, mental stimulations, arts, physical appeal/beauty
- Supportive Community
- Eau Claire
- Green, no litter
- No ice on sidewalks
- Financial & physical volunteers
- Education, medical, police,
- Transportation, access
- People doing things like this (listening sessions)
- Building projects together
- Activities for those disabled/impaired
- Walking trails/biking trails
- Gatherings for people that don’t get out much
- Medical facilities
- Hard workers
- Less packaged foods
- Wall Street Journal reported 12/9 of MDS prescribing physical activity
- Hudson Hospital-obstetrics
### Eau Claire County: 2014 County Health Rankings Snapshot

<table>
<thead>
<tr>
<th>Category</th>
<th>Eau Claire County</th>
<th>Error Margin</th>
<th>Top U.S. Performers</th>
<th>Wisconsin</th>
<th>Rank of 72</th>
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</thead>
<tbody>
<tr>
<td>Health Outcomes</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Length of Life</td>
<td></td>
<td></td>
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<td>9</td>
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<tr>
<td>Premature death</td>
<td>4,773</td>
<td>4,290-5,256</td>
<td>5,317</td>
<td>5,878</td>
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<tr>
<td>Quality of Life</td>
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<td>22</td>
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<tr>
<td>Poor or fair health</td>
<td>11%</td>
<td>8-15%</td>
<td>10%</td>
<td>12%</td>
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<tr>
<td>Poor physical health days</td>
<td>3.1</td>
<td>2.2-4.0</td>
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<tr>
<td>Poor mental health days</td>
<td>1.2</td>
<td>1.4-2.7</td>
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<tr>
<td>Low birthweight</td>
<td>6.3%</td>
<td>5.4-6.5%</td>
<td>6.0%</td>
<td>7.0%</td>
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<tr>
<td>Health Factors</td>
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<tr>
<td>Health Behaviors</td>
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<tr>
<td>Adult smoking</td>
<td>17%</td>
<td>12-23%</td>
<td>14%</td>
<td>13%</td>
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<tr>
<td>Adult obesity</td>
<td>29%</td>
<td>24-34%</td>
<td>25%</td>
<td>29%</td>
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<tr>
<td>Food environment index</td>
<td>7.9</td>
<td>8.7</td>
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<tr>
<td>Physical inactivity</td>
<td>23%</td>
<td>19-28%</td>
<td>21%</td>
<td>22%</td>
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<tr>
<td>Access to exercise opportunities</td>
<td>68%</td>
<td>65%</td>
<td>78%</td>
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<tr>
<td>Excessive drinking</td>
<td>24%</td>
<td>18-30%</td>
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<tr>
<td>Alcohol-impaired driving deaths</td>
<td>39%</td>
<td>14%</td>
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<tr>
<td>Sexually transmitted infections</td>
<td>407</td>
<td>123</td>
<td>481</td>
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<tr>
<td>Teen births</td>
<td>17</td>
<td>15-18</td>
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<td>Clinical Care</td>
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<tr>
<td>Uninsured</td>
<td>10%</td>
<td>9-12%</td>
<td>11%</td>
<td>10%</td>
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<tr>
<td>Primary care physicians</td>
<td>793:1</td>
<td>1,051:1</td>
<td>1,238:1</td>
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<tr>
<td>Dentists</td>
<td>1,144:1</td>
<td>1,392:1</td>
<td>1,660:1</td>
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<tr>
<td>Mental health providers</td>
<td>763:1</td>
<td>521:1</td>
<td>1,024:1</td>
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<tr>
<td>Preventable hospital stays</td>
<td>58</td>
<td>53-62</td>
<td>46</td>
<td>55</td>
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<tr>
<td>Diabetic monitoring</td>
<td>93%</td>
<td>86-100%</td>
<td>90%</td>
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<tr>
<td>Mammography screening</td>
<td>75.5%</td>
<td>69.0-81.9%</td>
<td>70.7%</td>
<td>70.2%</td>
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<tr>
<td>Social &amp; Economic Factors</td>
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<td>16</td>
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<tr>
<td>High school graduation</td>
<td>87%</td>
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<td>87%</td>
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<tr>
<td>Some college</td>
<td>71.9%</td>
<td>68.2-75.6%</td>
<td>70.2%</td>
<td>65.3%</td>
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<tr>
<td>Unemployment</td>
<td>5.9%</td>
<td>4.4%</td>
<td>6.9%</td>
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<tr>
<td>Children in poverty</td>
<td>18%</td>
<td>14-22%</td>
<td>13%</td>
<td>18%</td>
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<tr>
<td>Inadequate social support</td>
<td>17%</td>
<td>13-23%</td>
<td>14%</td>
<td>17%</td>
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</tr>
<tr>
<td>Children in single-parent households</td>
<td>24%</td>
<td>21-28%</td>
<td>20%</td>
<td>30%</td>
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<tr>
<td>Violent crime</td>
<td>162</td>
<td>64</td>
<td>244</td>
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<tr>
<td>Injury deaths</td>
<td>52</td>
<td>45-58</td>
<td>49</td>
<td>62</td>
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<tr>
<td>Physical Environment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>32</td>
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<tr>
<td>Air pollution - particulate matter</td>
<td>11.6</td>
<td>95</td>
<td>11.5</td>
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<tr>
<td>Drinking water violations</td>
<td>2%</td>
<td>0%</td>
<td>6%</td>
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<tr>
<td>Severe housing problems</td>
<td>15%</td>
<td>13-16%</td>
<td>9%</td>
<td>15%</td>
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<tr>
<td>Driving alone to work</td>
<td>80%</td>
<td>79-82%</td>
<td>71%</td>
<td>80%</td>
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<tr>
<td>Long commute - driving alone</td>
<td>12%</td>
<td>10-13%</td>
<td>11%</td>
<td>26%</td>
<td></td>
</tr>
</tbody>
</table>

*90th percentile, i.e., only 10% are better

Note: Blank values reflect unreliable or missing data.
## Appendix E: Prioritization Matrix

<table>
<thead>
<tr>
<th>Community Need</th>
<th>Comparison to State and National Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How is Eau Claire County doing in comparison to Wisconsin and national performance?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Community Impact</th>
<th>How is Eau Claire County currently and in the future going to be affected by the health priority in terms of:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Number of people affected</td>
</tr>
<tr>
<td></td>
<td>- Costs associated in not doing something (health care, lost work, supportive living)</td>
</tr>
<tr>
<td></td>
<td>- Severity of the condition (chronic illness, disability, death)</td>
</tr>
<tr>
<td></td>
<td>- Impact on quality of life</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ability to Impact</th>
<th>Are there know strategies to make a difference? Are there adequate resources available in Eau Claire County to address the health priority? Are there adequate internal resources available to address the health priority?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Community Readiness</th>
<th>Is the community ready to address the health priority in terms of:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Stakeholders awareness of concern</td>
</tr>
<tr>
<td></td>
<td>- Community organization receptiveness to addressing the health priority</td>
</tr>
<tr>
<td></td>
<td>- Citizens being somewhat open to hearing more about the health priority</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gaps in Community</th>
<th>Is there a gap(s) in community efforts to address the health priority?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Voice of Local Customer</th>
<th>Did focus groups identify this as an issue? Did survey data identify this as an issue? Did conversations with people who represent the community served identify this as an issue?</th>
</tr>
</thead>
</table>