BUILDING STRONGER COMMUNITIES
Engaging with the communities we serve

Amid the pandemic, and the inherent challenges of rural health care, it is more important than ever that Marshfield Clinic Health System be deeply engaged with the communities we serve. It is essential that we work to embed our services, expertise, and support into the fabric of people’s everyday lives. This is how we can help build fundamentally healthier communities.

One critical way we do this is by working outside our own clinical and hospital walls and forming partnerships with local organizations that share our passion for creating healthy communities. Across our service area, we have hundreds of partnerships with community-based organizations addressing needs like nutrition insecurity, mental health, alcohol and substance misuse, social needs, health equity and more.

We’ve put together this report to show how a thoughtful, strategic and comprehensive approach to community partnerships is making a difference for the people we serve every day. We are proud to share these stories about the work we are doing through our Center for Community Health Advancement (CCHA) and other entities within the Health System, hand-in-hand with local partners across our service area. Together we are working to improve the health of our communities, where residents live, work and play.

This is an exciting time for us, and I am deeply proud of the people and programs you’ll learn more about in these pages.

Sincerely,

Dr. Susan Turney
Chief Executive Officer | Marshfield Clinic Health System
Partnering with local organizations to strengthen communities

Medicine is important to get people healthy; community health is important in keeping people healthy.

Many of today’s ailments are the result of the environment in which we live, work and play. Do community members have access to the information and resources they need to eat well, support a loved one in crisis, get to medical appointments, be physically active, or help children thrive? Are all community members provided with equal opportunities to achieve their best health and well-being? Medicine cannot fulfill these needs alone.

Beyond clinical walls is where health and medicine meet social care – and that’s where the Center for Community Health Advancement (CCHA) is working. As the community health arm of a rural health system, we are focused on delivering health care that improves lives through the success of our programs, services and staff to reach every county and tribe in our service area and beyond.

CCHA partners with community members and local agencies that are working hard to better the community. Together we identify the most pressing community health needs, then innovate and think differently about upstream solutions.

Our visionary leaders understand the importance of this work and their strong commitment to advancing community health places us as leaders in health care. This report includes information about some of those solutions. We invite you to connect with us any time about the programs in your community. We are available at communityhealth@marshfieldclinic.org or 715-221-8400.

Sincerely,

Jay Shrader
Vice President | Community Health, Health Equity, and Wellness
Marshfield Clinic Health System

We enrich lives

Marshfield Clinic Health System is an integrated health system whose mission is to enrich lives through accessible, affordable compassionate health care. As part of this mission, the Health System supports the Center for Community Health Advancement (CCHA) team of health educators, community health experts and volunteers to address the health needs of the communities we serve.
Supporting healthier communities in every way.

65 Clinical Locations in 45 Communities

10 Dental Centers • 11 Hospitals
19 Pharmacies • 36 Clinical Laboratories

3.7 million Patient Encounters
350,000 Unique Patients
13,000 Employees

$601.4 million Community Benefit

*Data as of CY2021
Each community has different needs, resources and personalities. CCHA engages with communities in ways that honor that uniqueness. Over the years, some strategies have become core to the way we work with communities:

### Collaboration
CCHA enhances collaboration between individuals and community agencies through two large networks: Northwoods Coalition and the Wisconsin Afterschool Network. CCHA staff also connect with local community-based organizations through coalitions and other partnerships.

### Community support
All communities have initiatives, programs or ideas that need support to be successful. CCHA supports hundreds of organizations with staff involvement, direct funding, resource sharing, and more.

### Evidence-based Programming
CCHA implements programs that directly affect the health of patients and community members.

### Resources
CCHA manages more than $4 million in state and federal funding to implement programs and directly fund community health work.

### Health education
CCHA experts provide education to individuals and professionals to address our communities’ most pressing health issues.

### Community Health Needs Assessments
A rigorous health needs assessment is completed for each hospital community every three years to help identify and address our communities’ most pressing health needs.
Screening platform aims to arm educators with positive behavioral interventions

The COVID-19 pandemic increased the need for mental health and social emotional services for everyone – including children. One in five Wisconsin children experience mental illness and less than half of those receive treatment. CCHA offers two school-based programs that seek to increase the emotional well-being of our communities’ most vulnerable members.

B.e.s.t® (Behavioral Emotional Social Traits) is a universal screening platform that provides early identification of behavioral, emotional and social health and risk factors in school-aged children. Based on screening results, educators receive positive behavioral interventions to support all students’ development as well as focused interventions to use with students exhibiting elevated risk factors.

Approximately 2,114 teachers in 50 Wisconsin school districts used the universal screening tool during the 2021-22 school year. This helped screen and match 36,500 students to positive behavioral interventions.

In another effort to address youth mental health, MCHS child psychologists Dr. Michael Schulein and Dr. Kelsie-Marie Offenwanger collaborated with CCHA to develop “Life Tools,” a program designed to provide children with practical skills to identify and manage their emotions. “Life Tools” is an eight-week program consisting of weekly one-hour group sessions facilitated by a school counselor and/or school social worker for identified youth experiencing emotional and/or mental health difficulties. Students learn skills and identify tools to recognize emotions, experience mindfulness and manage responses. The program includes engagement with parents and schools, and a Health System child psychologist provides technical assistance and consultation to school counselors to ensure quality and commitment to the program.

Life Tools is implemented in 29 schools and/or organizations serving youth throughout northcentral Wisconsin. To date, more than 500 students have participated in the program. Early data suggests an improvement in coping with and understanding one’s emotions, self-regulating anger and taking responsibility for one’s actions.
Strong coalitions create healthy communities

Formed through a partnership between Marshfield Clinic Health System and several community coalitions in 1995, Northwoods Coalition (NWC) is the largest and oldest network of coalitions dedicated to substance use prevention in Wisconsin. Representatives from coalitions in a 35-county region, including the 11 federally-recognized Wisconsin Tribal Nations, serve on a non-governing advisory board to shape policies, practices and programs to address public health issues arising from use of alcohol and other drugs. Since 2007, through a contract with Wisconsin Department of Health Services, the Health System has served as the Northern and Western Regional Prevention Center for the Alliance for Wisconsin Youth (AWY). The purpose of AWY is to enhance and support the capacity of coalitions in substance misuse prevention and youth development.

CCHA staff provide support through education, training, technical assistance, and other resources to NWC members. Each year, coalitions are invited to apply for funding and select projects that address substance use prevention in their community. These projects range from raising community awareness and implementing policy work and prevention programming to working on initiative sustainability and community assessment and action planning. Coalitions that are successful in completing projects receive funds to help offset the cost of implementation and planning. Coalitions are given the training to choose projects that best meet the needs of their communities and, as a result, contribute to collective impact in their regions. Since January 2021, over $100,000 has helped support substance use prevention initiatives in the NWC service area.

Expanding suicide prevention training to save lives

Suicide rates in Wisconsin rose 40% between 2000 and 2017, and pressures from the COVID-19 pandemic considerably elevated suicidal ideation in adults. In 2020, 866 Wisconsin residents died by suicide - and suicide is more likely to take place in rural counties served by Marshfield Clinic Health System than urban counties. In response, CCHA is expanding efforts to bring suicide prevention training to both community members and professionals.

Question, Persuade, Refer (QPR) is a national suicide prevention training program that teaches three simple steps anyone can learn to help save a life from suicide. Just like CPR saves lives, QPR saves lives by helping to recognize the warning signs of a suicide crisis and how to intervene. QPR can be learned in as little as one hour and anyone can be trained – parents, friends, students, teachers, ministers, law enforcement, caseworkers and more – to recognize and refer someone at risk of suicide.
A QPR committee developed and implemented a strategy to expand the internal and community capacity to provide QPR trainings throughout the Health System and service area. CCHA is increasing the number of certified QPR trainers in communities and adding a QPR master trainer to CCHA staff.

Since January 2021, the Health System has provided funding for 18 individuals to become certified QPR trainers, including nine from the Hmong and Spanish-speaking communities. The trainers used the provided resources to hold QPR trainings in their communities. The addition of so many trainers vastly increases the number of trainings that can be delivered and the number of people who can be taught these lifesaving techniques. In addition, CCHA continues to provide QPR training to communities upon request.

Between January 2021 and August 2022, CCHA staff held 18 QPR trainings and three more are planned for 2022 that coincide with suicide awareness month in September. Since January 2021, 642 individuals have received QPR training from CCHA staff.

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**Increasing capacity in communities to get things done**

CCHA manages two AmeriCorps programs that place nearly 100 individuals throughout Wisconsin to work on community health priorities. AmeriCorps is a voluntary civil program supported by the U.S. federal government that engages adults in public service work with a goal of “helping others and meeting critical needs in the community.” It has been described as a domestic Peace Corps. CCHA has over 20 years of experience in managing AmeriCorps programs.

AmeriCorps Recovery Corps and AmeriCorps Community Corps recruit individuals called members to serve at law enforcement agencies, county jails, community-based organizations, public health departments, social service departments, health care organizations, nonprofits and local coalitions. Members provide additional capacity to support programs and initiatives that improve community health.

AmeriCorps Recovery Corps members undergo Recovery Coach training using the Connecticut Community for Addiction Recovery (CCAR) model of recovery coaching. They do not offer clinical care, but instead focus on non-clinical care and support like help with employment, transportation, and other social needs that help support the recovery journey. By reducing substance use, Recovery Corps members are helping to build healthier communities.
AmeriCorps Community Corps members serve organizations that are addressing local community health priorities such as nutrition and physical activity, mental health, prevention of alcohol and substance misuse, healthy growth and development, and social emotional health.

CCHA placed 16 Recovery Corps and 42 Community Corps members throughout Wisconsin in 2021. Recovery Corps members reached over 3,600 people through advocacy and recovery coaching services. Of those who used recovery coach services, 99% reported the services helped them maintain sobriety and 60% of clients made progress toward at least one goal in their wellness plan. Community Corps members served 30 organizations in 54 counties and carried out a wide variety of activities including health education, vaccine clinic support, food pantry operations and many others.

Making an impact one connection at a time

Eighty percent of an individual's health outcomes are attributed to non-clinical factors such as health behaviors, social and economic factors and physical environment. Marshfield Clinic Health System's Community Connections Team partners with the University of Wisconsin-Stevens Point and University of Wisconsin-Eau Claire to recruit student volunteers that provide referrals to community-based services for patients with unmet social needs. This experience helps the future workforce better understand how social, economic and environmental factors affect overall health, and allows Marshfield Clinic health care providers to look beyond the usual scope of practice to improve health.

Health System patients are screened during health care visits to identify areas of need, such as food, transportation, clothing and utilities. When a need is identified, CCT volunteers connect individuals with community resources to address the underlying social needs that can negatively impact their health. Individuals learn more about resources such as food pantries, financial assistance and employment services. CCT is available to anyone who needs assistance, not just Health System patients.

From Jan. 1, 2021 through June 30, 2022, over 26,500 individuals have been screened. Of those, 1,600 indicated needs and 3,320 referrals were made to community organizations. Since its inception in 2015, 84% of participants said CCT was “Helpful” or “Very Helpful” and 69% of participants said they “Would not have” or “Probably would not have” looked for resources without CCT. Some of the most common reported needs include dental, utilities and transportation.
HEDI committed to increasing health equity education

The Office of Health Equity, Diversity and Inclusion (HEDI) was established in 2021 to coordinate efforts across Marshfield Clinic Health System to make health equity a strategic priority and demonstrate commitment to improving health equity at all levels of the organization. A cultural competency and organizational assessment was completed and the results are being used to inform and guide future strategies and interventions related to this important work. MCHS will continue to advocate for collection and use of health equity data, integrate health equity, diversity and inclusion into our employee engagement strategy and increase cultural competency and health equity knowledge across the Health System through training and education. The Health System became a certified equity and inclusion organization in 2022 and now has eight certified Equity, Diversity, and Inclusion trainers.

Community Health Grant Program meeting local needs

Marshfield Medical Center-Beaver Dam launched a Community Health Grant Program in 2021 as part of the hospital’s efforts for community benefit and health and well-being. The program provides local not-for-profit organizations with up to $10,000 to develop new ideas or enhance existing projects that improve the health of Dodge County area residents. The program was developed in response to Marshfield Medical Center-Beaver Dam’s most recent Community Health Needs Assessment (CHNA) for Dodge County. The assessment identified alcohol and substance use prevention, behavioral health, chronic disease prevention, and social determinants of health (the physical, social, and economic environment that influence a person’s ability to be healthy) as priority health concerns.

“We believe that engaged, community well-being work is best performed by those closest to the issues,” said Angelia Foster, Marshfield Medical Center-Beaver Dam chief administrative officer. “As we align our organizational community health efforts with the health concerns identified in the Community Health Needs Assessment, one way to begin efficiently addressing these issues is to provide funds to our local partners.”

Six community-based organizations received funding for a variety of projects, including starting a children’s grief support group, stocking personal care items at a food pantry, mentoring and tutoring youth, and offering parenting classes.

“We have had tremendous success in the past two months,” one recipient reported. “Our parenting seminars, one-on-one parent education, and restoration workshop have proven to be a huge asset to our program participants.”

The Marshfield Medical Center-Beaver Dam Community Health Grant was offered in 2021 and 2022 with hopes offer the grant in future years.
Community event made stronger with Dickinson support

For the past two years, Marshfield Medical Center-Dickinson (formerly Dickinson County Healthcare System) has been the primary sponsor of first aid and medical treatment for the Gus Macker 3-on-3 basketball tournament. The tournament, which included more than 230 teams in 2022, has been raising money for local charities for more than three decades.

Marshfield Medical Center-Dickinson, in collaboration with Integrity Care EMS, has treated nearly 100 players with assorted sports-related injuries, including sprains, strains, contusions, scrapes, jammed fingers and more. All of the proceeds from the event help fund Our Place Community Center-Imagination Factory Children’s Museum, a non-profit organization based in Dickinson County that enhances interactive learning, unique creative play and self-discovery for children.

“It is enjoyable to see community events like the Gus Macker bring people together and equally enjoyable to collaborate with our community partners, such as Integrity, in supporting the acute care needs of the athletes as they occur,” said Dr. Eric Johnson, Marshfield Medical Center-Dickinson’s chief medical officer and Emergency Department doctor.

A prescription to better health through food

CCHA and Security Health Plan recently partnered to pilot an innovative “food as medicine” program to help diabetes patients find better balance.

Instead of only managing diabetes symptoms, lifestyle coaching was offered to program participants that included access to Security Health Plan’s wellness coaches, meal kits, vouchers for milk, eggs and fresh produce, and cooking supplies.

To be recruited for the pilot program, patients had to come from a 30-mile radius of Marshfield Clinic-Lake Hallie Center and be diagnosed as patients with diabetes and a need for nutritious food. The program enrolled nearly 50 individuals and received positive feedback. One program participant stated: “You’ve been wonderful and very supportive. I like how you hold me accountable to doing what I need to do to take better care of myself.”

Results of the pilot program will be used to better understand how to improve health outcomes and quality of life for people with diabetes.
Marshfield Clinic Health System asked a diverse group of Rusk County agencies what the focus should be for addressing substance use in the area. The overwhelming answer was “Recovery.” Substance misuse was identified as a primary community health issue in the 2019 Rusk County Community Needs Assessment survey. Nearly 80% of survey respondents classified substance use as a “major problem” and 40 percent claimed, “people are not aware of the resources to stop or prevent substance use.”

Marshfield Medical Center-Ladysmith took a two-prong approach to create movement around recovery efforts in the county by helping to spearhead the formation of a task force and implementing Recovery Coaching services.

**Rusk County Recovery Task Force**

A group of 21 individuals representing 13 different agencies was convened to establish the foundation of a Recovery Oriented System of Care (ROSC) model. The evidence-based model focuses on long-term outcomes and linking initial treatment combined with active and ongoing care management. On behalf of this group of key stakeholders, Marshfield Medical Center-Ladysmith applied for and was awarded a Substance Use Disorder Grant from the Wisconsin Office of Rural Health. With the hospital serving as the backbone organization and providing the additional grant support, the newly named Rusk County Recovery Task Force began developing a roadmap for putting the model to work locally.

In its first year of existence, the Task Force achieved early success with the compilation, publication and distribution of the Rusk County Resource Guide for Substance Use and Mental Health. The guide’s intent is to help community members improve their own health and contribute to the overall health of the community.

**AmeriCorps Recovery Corps**

Recovery coaches are individuals with lived experience who provide hope to anyone affected by substance use disorder and assist individuals with navigating their path to recovery. They are also available to work with anyone who has a concern about someone else’s use of substances, work to promote recovery services, support the recovery community and reduce stigma.

Marshfield Clinic Health System began the Recovery Corps program in 2017. The program has been a great resource in communities across the Health System up to this point, but before 2021 the services had never been offered at one of the Health System’s primary care locations. The first recovery coach has now successfully integrated into primary care at Marshfield Medical Center-Ladysmith and is a referable support service in Ladysmith. This makes it possible for patients to meet with a coach at a convenient location, allows for on-site consultations and supports a recovery-oriented system of care.

The success of the pilot program in Ladysmith has sparked interest in the service being expanded to additional primary care locations in other communities across the Health System.
Annual conference helps local youth thrive

The Vilas County Youth Coalition works with Northwoods Coalition, a program of Marshfield Clinic Health System, and other local agencies to host the annual “Positive Alternatives Conference” to give sixth and seventh graders the opportunity to learn, collaborate, make new friends and have fun.

The conference hosts over 200 students and is the only event that draws students together from four different schools representing 12 towns in two counties. These students will eventually become classmates when they move on to high school. The goal of the conference is to introduce students to local resources and provide experiences that help them thrive. Seven different sessions are offered, which include information about outdoor skills, healthy relationships, impacts of substance use, Native American cultural activities, teambuilding opportunities and more.

Seventy percent of youth attendees rated the sessions as “Good” or “Excellent.” The most highly-rated sessions included “Cultural Connection & Awareness,” “Outdoor Education with the Great Lakes Indian Fish & Wildlife Commission,” and the team building sessions.

By encouraging collaborative learning across the school districts, students learn how to work together and often leave with a new friend or two. As one sixth-grader put it, “You never know who you can be friends with.”

Community Health Workers help increase health knowledge, self-sufficiency

After more than a year of planning, Marshfield Clinic Health System hired its first Community Health Workers to serve high-risk populations in several rural counties.

A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has a close understanding of the community served. This trusting relationship enables the CHW to serve as a liaison among the Health System, social services, and the community to facilitate access to health information and services. The Community Health Workers help individuals and the greater community increase health knowledge and self-sufficiency through a range of activities such as outreach, community education, social support and advocacy.

With support from a Health Resources and Services Administration grant, the Health System worked with the Marshfield Clinic Research Institute and the National Farm Medicine Center to establish the Western Wisconsin Rural Behavioral Health Network and began
building a CHW program roadmap to serve within MCHS clinical departments and at community-based organizations.

The first workers were hired to address COVID-19 vaccine hesitancy among the Plain and Hispanic communities. They have collaborated with public health departments on vaccine efforts, provided vaccine education at community events and took part in setting up a new vaccination clinic. One CHW attended a candlelight vigil for community members who lost their lives to COVID-19 and remarked, “The community members in attendance were happy to see someone working on hesitancy.”

CCHA is committed to advancing CHW opportunities, including taking an active role in standardizing the certification process and participating in discussions around Medicare/Medicaid reimbursement for long-term sustainability.

| Changing the landscape through alcohol education |

Marshfield Area Coalition for Youth (MACY) is addressing underage drinking, binge drinking, and overserving of alcohol in Marshfield through the Sober Truth on Preventing Underage Drinking Act (STOP) grant administered by CCHA.

A strategy currently being implemented is “Place of Last Drinking” (POLD). Beginning January 2021, MACY, in partnership with Wood County’s law enforcement agencies, has compiled POLD data from Operating While Intoxicated (OWI) citations issued in Wood County. Serving or selling alcohol to an intoxicated individual is illegal in Wisconsin. Since 2012, the National Highway Transportation Safety Administration (NHTSA) has recommended compiling and using POLD data to identify over-serving licensees with the goal of educating licensees and servers to reduce drunk driving. When compiled, patterns of over-serving by specific alcohol licensees emerge and the data is provided to the local law enforcement agency and the Judiciary and Licensing Committee in each respective city. All new and renewing alcohol licensees receive an annual letter as a reminder about this data collection and educational handouts to be reviewed with their employees outlining signs of intoxication and revenue lost due to overserving.

Data is reviewed every six months and establishments named under four times receive an additional letter and data report specific to their location so they know their business has been named and should address the overserving issue. Establishments named four or more times also receive the same information as well as a follow-up visit from the police department. This follow-up visit from the police representative ensures the overserving issue is addressed and to provide additional education to the establishment owners and employees as needed. It has been shown that once establishments are aware of an issue it is quickly corrected.
Hydroponic gardens teach youth, improve nutrition

Since 2019, CCHA has placed 35 hydroponic garden units in schools, service organizations and businesses to increase knowledge about nutrition and healthy eating as well as improve access to healthy foods throughout the year.

Each hydroponic garden produces up to 350 pounds of produce per year. The produce grown in the hydroponic gardens have been utilized by senior centers, schools, food pantries, shelters and many others. One recent recipient is the Chequamegon School District in Park Falls, which placed the garden in the entrance of Chequamegon Elementary School where students could see it every day.

The district received a hydroponic garden unit and one year’s worth of supplies to grow lettuce, basil and kale. The produce – approximately one five-gallon bucket per week – helped create daily salads served at lunch by the kitchen staff.

High school students from Class ACT Charter School, a project-based learning school within the Chequamegon district, tended and harvested the garden. The garden was then used for hands-on lessons for both elementary and high school students about plant growth, gardening, locally sourced foods, and hydroponic systems.

“Having the hydroponic garden gave students another avenue for their studies,” said Travis Augustine, charter school teacher. Kitchen staff reported that the produce the students grew was of high quality, and the students enjoyed seeing what they grew in their lunches. The garden was used for hands-on lessons that would ordinarily have been more difficult to do or would have required the purchase of live plants, giving them an appreciation for locally grown foods.
Assessing community needs to improve health

The Marshfield Medical Center-Rice Lake Community Benefit work group completed a community health prioritization process in 2021 that is being used to set the course of community health improvement in Barron County for the next several years.

The work group was chaired by Marshfield Medical Center–Rice Lake's chief administrative officer and included local Marshfield Clinic Health System leaders committed to improving health in Barron County communities. The work group conducted a community survey, held key informant interviews with local stakeholders, and reviewed secondary quantitative data to develop a Community Health Needs Assessment (CHNA) report. The CHNA was used to develop a community Implementation Strategy plan for the hospital to address the identified health priorities.

The community survey asked Barron County residents to evaluate 14 health needs based on the Wisconsin Department of Health Services State Health Plan, Healthiest Wisconsin 2020: Everyone Living Better, Longer. The key informant interviews collected in-depth, qualitative information from Barron County residents.

The community survey collected 250 responses between March and April 2021. Survey results and insights from the key informant interviews as well as secondary data helped identify the top community health priorities as alcohol and substance abuse, behavioral health, chronic disease, and social determinants of health.

In 2022, the Marshfield Medical Center-Rice Lake CHNA was utilized in the development of the Barron County Community Health Assessment and Community Health Improvement Plan. This process is led by Barron County Health Department and includes numerous partner such as the University of Wisconsin-Eau Claire, Mayo Clinic Health System, Cumberland Health Care, Amery Hospital and Clinic, Aging and Disability Resource Center (ADRC) of Barron, Rusk, and Washburn counties, and others.

Senior Stock Box program aids Portage County residents in need

Marshfield Medical Center-River Region at Stevens Point donated $2,000 to Central Rivers Farmshed, a non-profit that partners with small farms and food businesses, to supplement the monthly Senior Stock Box program with fresh, local nutritious food.

The Senior Stock Box is a program of the Hunger Task Force, a free and local food bank based in West Milwaukee, that provides a monthly box of healthy food to low-income seniors free of charge. Boxes include staples like cereal, milk, canned veggies, fruit, meats, rice, fruit juice and two pounds of fresh Wisconsin cheese. The Hunger Task Force partners with local agencies to coordinate the program. The Aging and Disability Resource Center (ADRC) of Portage County, UW-Madison Division of Extension, FoodWise, Central Rivers Farmshed, Curbwise LLC bicycle delivery service, and the Stevens Point Housing Authority brought the program to the area in 2021.
Marshfield Clinic Health System joined the effort in April 2022 with funding to support the addition of local eggs, greens, and fresh and freshly-frozen vegetables from Farmshed. More than 50 boxes are distributed monthly with five to 10 new recipients each month. Seniors unable to pick up a box at the ADRC of Portage County have boxes delivered by Curbwise LLC to an average of 16 people per month. In the first three months of adding fresh local food, the following were distributed:

- More than 240 pounds of fresh vegetables
- More than 150 pounds of freshly-frozen vegetables
- Approximately 90 dozen local eggs

Early survey results show that the highlight of the Senior Stock Box program is the addition of local foods and participants report the fresh food is filling a significant gap in their diets.

Medical Advisor program provides support to local schools

School nurses in Central Wisconsin are receiving professional support through the School Medical Advisor Program, a novel partnership between Marshfield Clinic Health System and Marathon County Special Education (MCSE) to support continuity of care for all students.

Dr. Jeffrey H. Lamont, a long-time Health System pediatrician and recognized state and national leader in school health, serves as medical advisor to school districts through MCSE, which provides a variety of programs and services to a consortium of schools in the Marathon County area. MCSE supports the consortium’s growing need for health services as the needs of school-aged children grow in scope and complexity and school nurse capacity is often lacking.

Dr. Lamont provides assistance with policy and procedures for student care, training and support to both licensed and unlicensed school personnel, coordination between providers and schools regarding continuity of care, and more. He works with school personnel and local boards on children’s health issues and collaborates with public health officials on areas of mutual interest.

Recent increases in participation serve as a testament to the value of the School Medical Advisor Program. Since 2019, the number of school nurses participating in monthly educational meetings has increased from 10 to 40. The number of school districts participating in the program has increased from 10 to 22. Initially designed to serve and support a few schools in the Marathon County area, the program has increased in scope and reach.

In collaboration with Dr. Lamont, school nurses formed an organization called Central Wisconsin School Nurses (CWSN). Dr. Lamont and CWSN are currently evaluating the program and plan to create new goals for the 2022-23 school year that will serve a larger audience of school nurses.
Although each of these stories reflects the work of multiple partners, it is only a hint of the breadth of partners that MCHS works with to improve the health of our communities.

MCHS engages with all local public health departments in our service area, many school districts, and state-level and local coalitions working on various community health initiatives. MCHS collaborates with United Way in many communities, local community foundations and other community funders, ADRCs, food pantries, shelters, churches, YMCAs, and so many more. In 2021, CCHA secured over $4 million in grants and contracts to provide local and regional resources and capacity to support communities in addressing critical community health needs. These funders include federal, state, private foundations and local entities.

MCHS could not do this work without partners. There truly are too many partners to name and too many unknown supporters to call out – an attempt to name them all would surely fail. To all our partners – from state coalitions to local health departments, small community organizations and large citizen groups, funders and program participants – our deepest thanks.
Center for Community Health Advancement Leadership Team

We enrich lives by addressing health priorities in our communities. Our Center for Community Health Advancement (CCHA) team of health educators, community health experts and volunteers collaborate and partner with a variety of local, state and national organizations to improve the health of the communities we serve.

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Vice President of Community Health, Wellness, and Health Equity

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