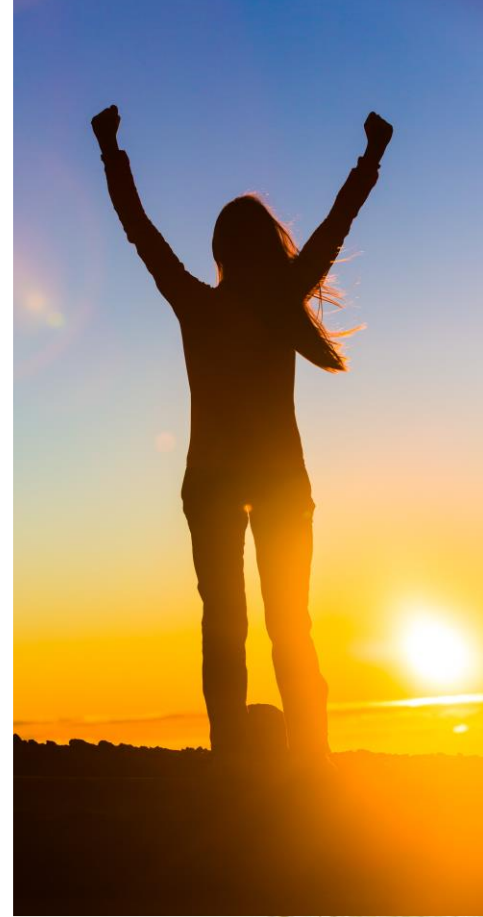


# Community Health Implementation Strategy



## 2024-2027

**ASPIRUS RIVERVIEW HOSPITAL & CLINICS**

410 Dewey Street

Wisconsin Rapids, WI 54494

## Acknowledgements

Aspirus Riverview Hospital is excited to share this Implementation Strategy with the community. This plan was developed in Spring 2024. It leans on Aspirus' strong Behavioral Health Service line, as well as collaborative efforts with the Wood County Health Department. We anticipate leading some local efforts as well as being a strong supporter of other efforts. Mental health and substance abuse – the community health priorities for the hospital – are complex and will require persistent partnerships. We look forward to continued collaboration to create a healthier Wood County for all.

Respectfully,



Brian Kief  
President  
Aspirus Southwest and South Wisconsin Divisions

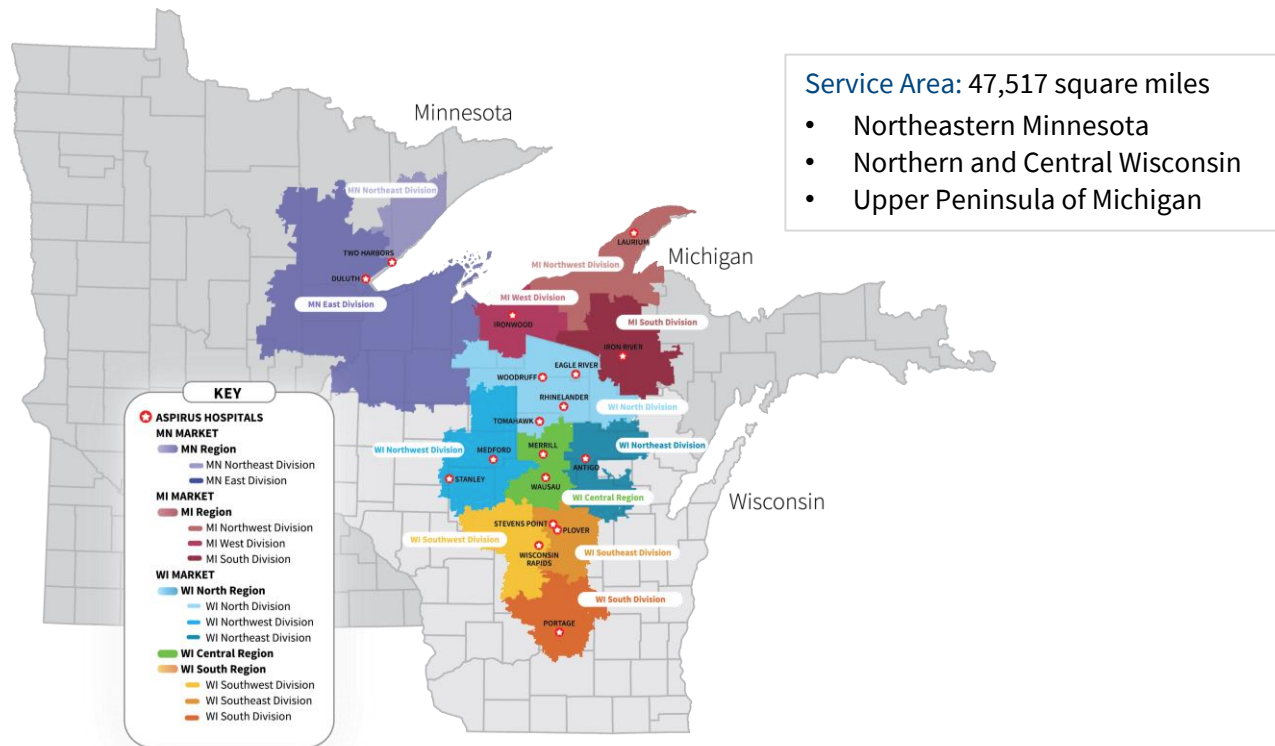
## Table of Contents

Acknowledgements.....	1
Aspirus Health and Aspirus Riverview Hospital Profile.....	3
Aspirus Health .....	3
Aspirus Riverview Hospital .....	3
Prioritized Significant Needs .....	4
Needs Not Selected .....	4
About the Implementation Strategy .....	4
Definition / Purpose of a CHNA and Implementation Strategy .....	4
Compliance.....	5
General Approach to Implementation .....	5
Mental Health .....	7
Substance Use .....	9
Social and Economic Needs.....	10
Approval by the Hospital Board.....	10
Conclusion.....	10

## Aspirus Health and Aspirus Riverview Hospital Profile

### Aspirus Health

Aspirus Health is a nonprofit, community-directed health system based in Wausau, Wisconsin, serving northeastern Minnesota, northern and central Wisconsin and the Upper Peninsula of Michigan. The health system operates 18 hospitals and 130 outpatient locations with nearly 14,000 team members, including 1,300 employed physicians and advanced practice clinicians. Learn more at [aspirus.org](https://www.aspirus.org).



### Aspirus Riverview Hospital

Aspirus Riverview Hospital is a thriving, community-directed hospital based in Wisconsin Rapids. The hospital is accredited by the Joint Commission and dedicated to serving residents of Wood and Adams counties and the surrounding communities. The hospital offers a wide range of services including state-of-the-art imaging and laboratory services, as well as surgical and emergency services. The hospital is supported by an onsite Aspirus Heart & Vascular Clinic, a Behavioral Health Clinic, Aspirus Riverview Therapies, a Cancer Center, a Wound and Hyperbaric Center, a Joint Center, as well as four primary care clinics offering various specialties and one of which offers a walk-in clinic.

## Prioritized Significant Needs

Over the next three years, Aspirus Riverview will formally address the following issues through its community health needs assessment and corresponding implementation strategy:

- Mental health
- Substance use

## Needs Not Selected

The health department priorities are: mental health; substance use; access to care; built environment (e.g., housing, transportation); financial stability.

Aspirus Riverview is not addressing the following needs for the following reasons:

- Access to Care (mental, medical and dental) – Access to care was not selected as a formal priority because maintaining high quality care and improving access to care is already the core business Aspirus implements to live our mission – to heal people, promote health and strengthen communities.
- Built Environment and Financial Stability – Built environment and financial stability were not selected because the hospital does not have expertise in those areas. Although Aspirus will not be leading initiatives in these areas, Aspirus is committed to being a community partner at the table to contribute to solutions. One way Aspirus will contribute is by screening for health-related social needs. Aspirus is monitoring the results of screening and using the FindHelp platform to refer patients. Over time, data will be analyzed and incorporated into the CHNA in identifying top health priorities and corresponding strategies.

## About the Implementation Strategy

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

## Definition / Purpose of a CHNA and Implementation Strategy

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

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<sup>1</sup> Catholic Health Association of the United States, <https://www.chausa.org>

<sup>2</sup> Catholic Health Association of the United States, *A Guide for Planning & Reporting Community Benefit*

## Compliance

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

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

## General Approach to Implementation

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

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

A description of the plans to address mental health and substance use, prefaced by data and community input gathered in the assessment, are on the next pages. The plans:

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

<sup>3</sup> Clear Impact, <https://clearimpact.com/results-based-accountability/>

<sup>4</sup> Center for the Application of Prevention Technologies Fact Sheet, <https://www.mass.gov/doc/samhsa-behavioral-health-continuum-of-care-overview-9232019/download>

<sup>5</sup> Ibid

<sup>6</sup> Ibid

<sup>7</sup> Ibid

## Mental Health

### Why is it Important?

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

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

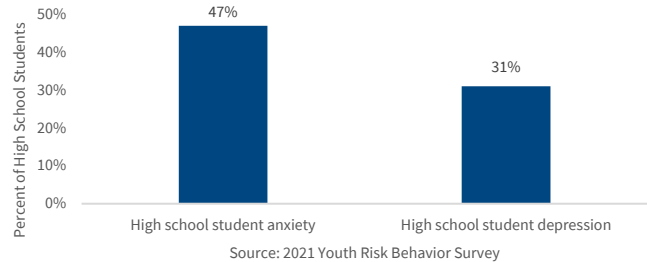
### Disparities and Equity

- Individuals with less than a high school education are more than twice as likely to have frequent mental distress compared to those with a college degree.<sup>5</sup>
- Women have a 70% higher rate of depression compared to men.<sup>5</sup>
- Individuals who are multiracial or American Indian / Alaskan Native are three times as likely, and White individuals were 2.5 times as likely, to experience depression compared to individuals who are Asian/Pacific Islander. However, the rate of depression in individuals who are Asian/Pacific Islanders is increasing at a faster rate than other groups.<sup>5</sup>
- Poor family relationships can increase the likelihood of depression. Some are at higher risk of poor family relationships, including individuals: who identify as LGBTQ; who have a disability and their caretakers; and who suffered from child abuse and neglect.<sup>6</sup>
- In Wisconsin: “Students who identify as LGBT, students with food insecurity, Hispanic/Latinx students, and students with low grades reported the highest rates of mental health concerns.”<sup>7</sup>

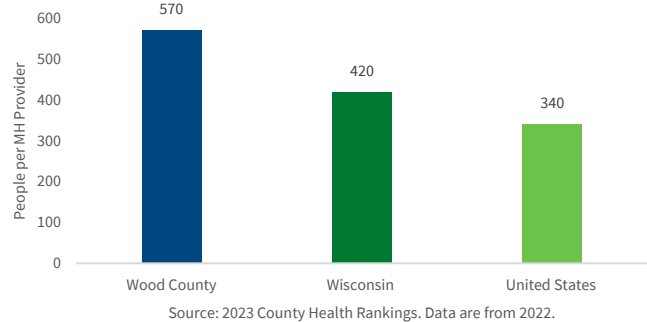
Sources: (5) 2021 America’s Health Rankings, Executive Summary. [https://assets.americashealthrankings.org/app/uploads/2021\\_ahr\\_health-disparities-report\\_executive\\_brief\\_final.pdf](https://assets.americashealthrankings.org/app/uploads/2021_ahr_health-disparities-report_executive_brief_final.pdf) (6) Shim, Ruth S; Ye, Jiali; Baltrus, Peter; Fry-Johnson, Yvonne; Daniels, Elvan; Rust, George. Racial/Ethnic Disparities, Social Support, and Depression: Examining a Social Determinant of Mental Health. *Ethn Dis*. 2012 Winter; 22(1): 15-20. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4039297/> (7) [Summary Report: 2021 Wisconsin Youth Risk Behavior Survey](#) (page 10)

### Data Highlights

#### Student Anxiety and Depression Wood County



#### Number of People per Mental Health Provider Wood County



#### Additional Data

- Number of suicide deaths per 100,000 population (age-adjusted) (2016-2020): 15 Wood County; 15 Wisconsin. (Source: County Health Rankings and Roadmaps)
- The number of self-harm emergency department visits for youth ages 0-17 more than doubled, from 14 in 2017 to 30 in 2022. (Source: Wisconsin Department of Health Services, Wisconsin interactive Statistics on Health, Injury-Related Emergency Department Visits Module)

### Community Perceptions & Challenges

- Mental health and suicide was the second-ranked issue for all community survey respondents. It was in the top three-ranked issues for other respondent groups: households with less than \$50K; Native American; Asian/Hmong; Hispanic; age 65+.
- The COVID-19 pandemic exacerbated mental health issues.

## Mental Health

Aspirus Riverview plans to address mental health through the strategies below. Strategies are a combination of existing, proposed, internal-only, and collaborative efforts.

Program Accountability		Population Accountability		
Strategies	Performance Measures	Indicators	Results	
<b>Upstream Prevention (Promotion)</b>				
<ul style="list-style-type: none"> <li>Social connectedness (e.g., Rise Up)</li> <li>Positive multi-cultural efforts (e.g., staff training, community advocacy)</li> <li>Youth academic and social skills (e.g., tutoring, jail reading program)</li> </ul>	<ul style="list-style-type: none"> <li># of participants</li> <li>Program/effort-specific measures</li> </ul>	<ul style="list-style-type: none"> <li>Increase third grade reading levels (baseline is 3.1 (2018))</li> <li>Increase third grade math levels (baseline is 3.0 (2018))</li> </ul>	Community members have equal opportunities for mental well-being.	
<b>Prevention</b>				
<ul style="list-style-type: none"> <li>Family / parenting support (e.g., Families and Schools Together)</li> <li>Mental health and suicide prevention trainings (e.g., Question, Persuade, Refer (QPR))</li> <li>Anti-stigma campaign (e.g., coasters in bars)</li> <li>Crisis hotline (988) promotion</li> <li>Positive youth efforts (e.g., Raise Your Voice)</li> <li>Strengthening referral pathways</li> </ul>	<ul style="list-style-type: none"> <li># of programs</li> <li># of program participants</li> <li>Program/effort-specific measures</li> <li># of materials distributed</li> </ul>	<ul style="list-style-type: none"> <li>Decrease the suicide rate (baseline is 15 deaths per 100,000 population (2016-2020))</li> <li>Decrease the average number of poor mental health days in the last 30 days (baseline is 4.7 (2020))</li> <li>Decrease the percent of high schoolers who experienced prolonged, disruptive sadness in the last 12 months (baseline is 31% (2021))</li> <li>Decrease the percent of high schoolers who experienced significant problems with anxiety in the last 12 months (baseline is 47% (2021))</li> </ul>		
<b>Treatment</b>				
<ul style="list-style-type: none"> <li>Tele-mental health</li> <li>Support groups</li> <li>Mental health services in jail</li> </ul>	<ul style="list-style-type: none"> <li># of patients or participants</li> <li># of participants who achieve self-determined goals</li> </ul>			

Collaborative Partners	Aspirus Resources
<ul style="list-style-type: none"> <li>Wood County Health Department</li> <li>Boys and Girls Club</li> <li>County services (e.g., jail, health department, social services, etc.)</li> <li>Schools</li> </ul>	<ul style="list-style-type: none"> <li>Funding</li> <li>Staff time – coalition participation, event planning and promotion, resource identification</li> <li>Space – hosting support groups and meetings</li> <li>Clinical services and related infrastructure – providing direct mental health care, FindHelp</li> </ul>



## Substance Use

### Why is it Important?

An estimated 22 million people per year in the U.S. have drug and alcohol problems. Ninety-five percent of them are unaware of their problem.<sup>1</sup> Approximately 88,000 deaths annually in the U.S. are attributed to excessive drinking (2006-2010).<sup>2</sup> Drug and alcohol use can also lead to costly physical, mental and public health problems such as teen pregnancy, HIV/AIDS and other STDs.<sup>1</sup> Interactions between prescription medications and alcohol can contribute to falls, which can result in injuries and death.<sup>3</sup>

COVID-19 has increased substance use in the US related to social isolation, loss of routines and norms, income related stress, anxiety and fear of the virus and loss of loved ones.<sup>4</sup>

Sources: (1) Healthy People 2020; (2) Center of Disease Control and Prevention; (3) Wisconsin Alcohol Policy Project; (4) Czeisler MĚ, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057. DOI: <http://dx.doi.org/10.15585/mmwr.mm6932a1>

### Disparities and Equity

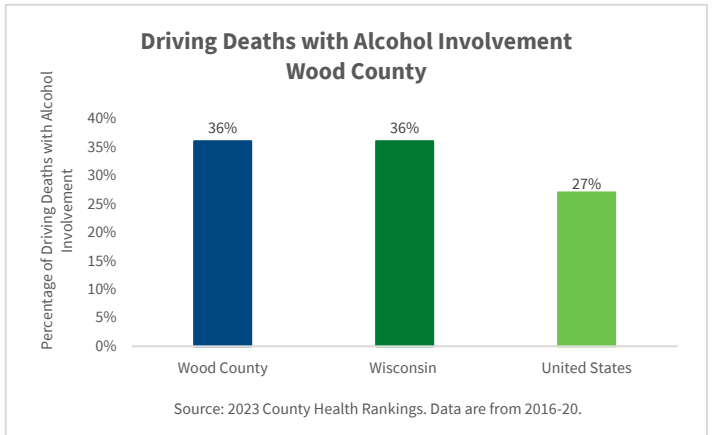
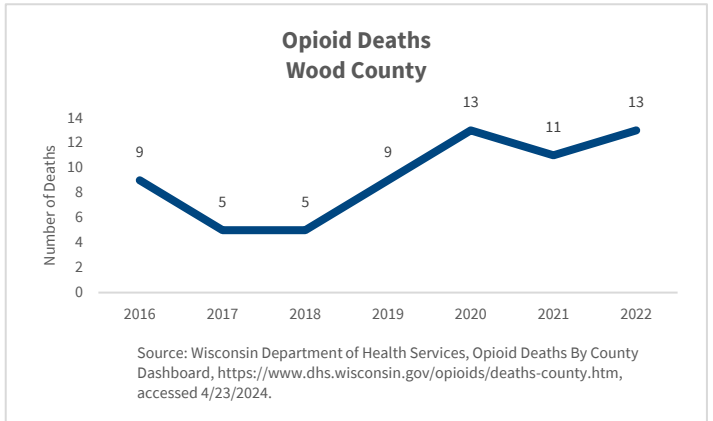
- Smoking rates have decreased for many populations – college graduates, individuals who are multi-racial, individuals who are Black and individuals who are white. Disparities, however, persist. Compared with individuals who are Asian / Pacific Islander, smoking occurs at higher rates with individuals who are American Indian / Native Alaskan (nearly 4x the rate), individuals who are multiracial (3x the rate) and individuals who are Black (2x the rate). Individuals with less than a high school education are approximately four times as likely to smoke when compared to individuals with a college degree.<sup>5</sup>
- Binge drinking is more common among individuals who are (any of the following): male, age 18-34, white or have an annual household income of more than \$50K.<sup>6</sup>

Sources: (5) [2021 America's Health Rankings Disparities Report](#); (6) Fact Sheet: Health Disparities in Binge Drinking (Findings from the CDC Health Disparities and Inequalities Report -- United States, 2011)

### Community Perceptions & Challenges

- Drug use was the top-identified issue for all community survey respondents, as well as for other respondent groups: households with less than \$50K; Native American; age 65+.
- The COVID-19 pandemic exacerbated substance use issues.

### Data Highlights



#### Additional Data

- Percentage of adults reporting binge or heavy drinking (age-adjusted) (2020): 26% Wood County; 26% Wisconsin; 19% United States. (Source: County Health Rankings and Roadmaps; data are from 2020)
- Percentage of high school students who used marijuana before age 13: 17% Wood County; 16% Wisconsin. (Source: 2021 Youth Risk Behavior Survey)
- Approximately 1 in 4 high school students used alcohol in the 30 days prior to completing the 2021 Youth Risk Behavior Survey.

### Substance Use

Aspirus Riverview plans to address substance use through the strategies below. Strategies are a combination of existing, proposed, internal-only, and collaborative efforts.

Program Accountability		Population Accountability		
Strategies	Performance Measures	Indicators	Results	
<b>Upstream Prevention (Promotion)</b>				
<ul style="list-style-type: none"> <li>Youth academic and social skills (e.g., tutoring, jail reading program)</li> </ul>	<ul style="list-style-type: none"> <li># of participants</li> <li>Program/effort-specific measures</li> </ul>	<ul style="list-style-type: none"> <li>Increase third grade reading levels (baseline is 3.1 (2018))</li> <li>Increase third grade math levels (baseline is 3.0 (2018))</li> </ul>	Community members of all ages and abilities are free from the physical, emotional, and social impacts of substance misuse.  <small>(Adapted from the Marathon County Health Department's plan)</small>	
<b>Prevention</b>				
<ul style="list-style-type: none"> <li>Multiple coalition efforts (e.g., medication disposal, place of last drink, documentary screenings, advocacy and education, etc.) and related education (e.g., after visit summary)</li> <li>Sharps disposal</li> <li>Positive youth efforts (e.g., Raise Your Voice)</li> <li>Alcohol screening in primary care</li> </ul>	<ul style="list-style-type: none"> <li># of pounds of medication collected</li> <li># of pounds of sharps collected</li> <li># of programs</li> <li># of program participants</li> <li>Program/effort-specific measures</li> </ul>	<ul style="list-style-type: none"> <li>Reduce the number of deaths due to drug overdose per 100,000 population (baseline is 30.7 (2022))</li> <li>Reduce the rate of opioid-related hospital discharges (baseline is 259.8 per 100,000 population (2022))</li> <li>Percent of high school youth who mis-used over-the-counter and/or prescription pain medicines (baseline is 9% (2021))</li> <li>Percent of high school youth who binge drank in the last 30 days (baseline is 9% (2021))</li> <li>Reduce the percent of disconnected youth (baseline is 5% (2017-2021))</li> </ul>		
<b>Treatment</b>				
<ul style="list-style-type: none"> <li>Medication-assisted treatment (MAT)</li> <li>Peer support for addiction recovery</li> <li>Support groups</li> </ul>	<ul style="list-style-type: none"> <li># of patients or participants</li> <li># of visits or appointments</li> <li>Sustained recovery</li> </ul>			

Collaborative Partners	Aspirus Resources
<ul style="list-style-type: none"> <li>Substance abuse prevention coalition (IMPACT)</li> <li>Three Bridges Recovery</li> <li>County services (e.g., jail, health department, social services, etc.)</li> <li>Schools</li> </ul>	<ul style="list-style-type: none"> <li>Funding</li> <li>Staff time – coalition participation, event planning and promotion, resource identification</li> <li>Space – hosting support groups and meetings</li> <li>Clinical services and related infrastructure – providing medication-assisted treatment and referrals to peer support and other recovery services , FindHelp</li> </ul>

## Social and Economic Needs

Research shows that social and economic factors are significant ‘upstream’ contributors to poor mental health and substance use issues (as well as many other health issues). Aspirus Riverview is committed to recognizing and addressing health-related social needs as part of its overall community health improvement efforts. A number of related strategies/approaches are being implemented within the hospital and clinics as well as with other community partners (e.g., Wood County Health Department).

- Connecting patients with food and other basic needs resources (through FindHelp.org)
- Food security

Program Accountability	
Strategies	Performance Measures
<ul style="list-style-type: none"> <li>• Screen for health-related social needs and connect patients with needed resources (FindHelp.org)</li> </ul>	<ul style="list-style-type: none"> <li>• # of searches</li> <li>• # of referrals</li> <li>• # of closed loop referrals</li> </ul>
<ul style="list-style-type: none"> <li>• Fruit and vegetable prescription program (FVRx)</li> </ul>	<ul style="list-style-type: none"> <li>• # of vouchers given to patients</li> <li>• % of vouchers redeemed at the farmers markets</li> </ul>

As appropriate, Aspirus Riverview Hospital staff also will be participating in coalitions and community-level efforts to address other health-related social needs (e.g., transportation, housing).

## Approval by the Hospital Board

The implementation strategy report was reviewed and approved by the Aspirus Riverview Hospital Board of Directors on June 20, 2024.

## Conclusion

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



[aspirus.org](https://www.aspirus.org)

June 2024