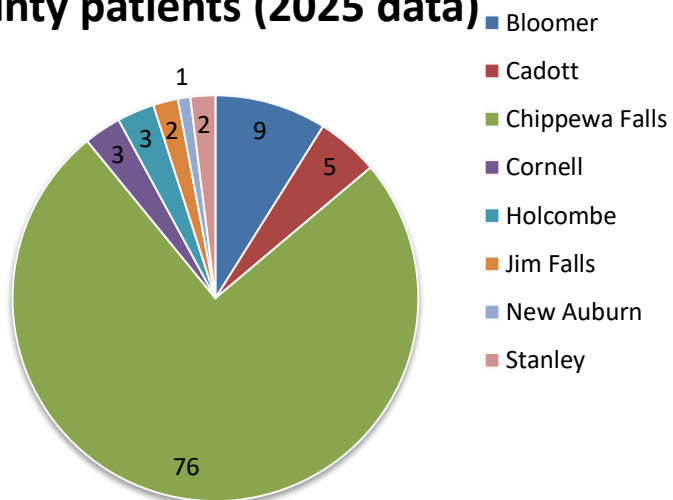


Open Door Clinic 2025 Review

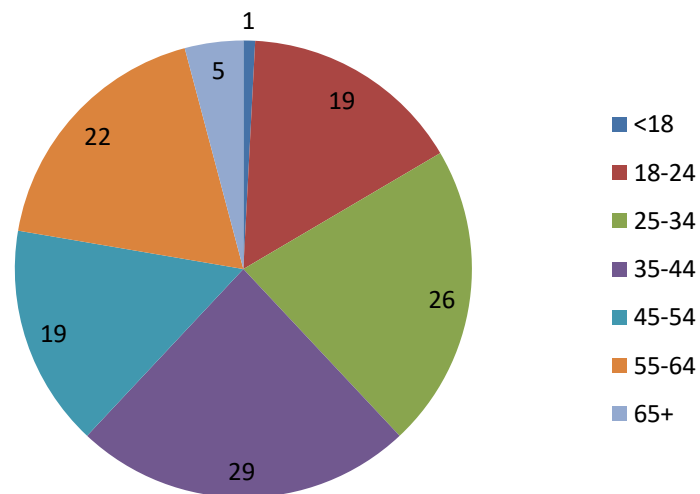
Patient Stats:

Year	2019	2020	2021	2022	2023	2024	2025	Change 2024-2025	Total % change	Total since 2006 (2025 numbers)
Patient Visits	597	430	315 (322 according to data run 1/12/23)	212	220	276	285	+9	3% increase	20,215
Intake Only	16	3	4	0	0	1	1	+1	--	113
New Patients	107	62	35	34	30	62	66	+4	6.5% increase	
Unique Patients	217	149	283 (103 according to data run 1/12/23)	74	71	108	121	+13	11% increase	3,977
Weekly Patient Average	12	8	6	4	4	5.5	5.8 Closed 3 weeks	+0.3	--	--
New patients as percentage of total	49%	41%	12% (34%)	46%	42%	57%	55%	--	--	--

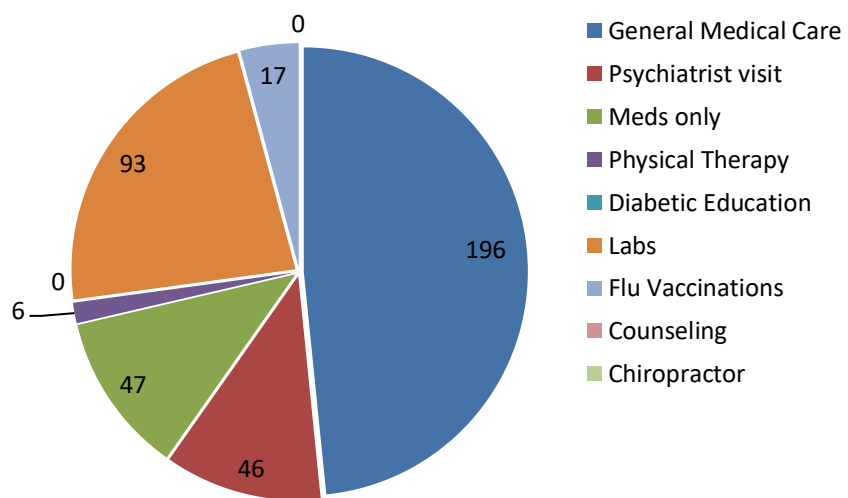
City of Residence for Chippewa County patients (2025 data)



Patient Ages (2025 data)



Services Provided (2025 data)



Referrals

YMCA
18
Dental
5

Radiology
7
Vision
4

Women's Wellness
1
Tobacco Quit Line
1

Counseling Statistics

	2025 WAFCC Telehealth	2025 Volunteer Counselor	2024 WAFCC Telehealth	2024 Volunteer Counselor	2023 WAFCC Telehealth	2023 Volunteer Counselor	2022 Volunteer Counselor
Referred	8	4	15	2			
Established	6	1	7	2			
Visits	15	4	13	11	8	28	9
No Shows	2	5	9	0	0		4

Medication Stats:

	2014*	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	CHANGE 2024-2025	Totals 2006-2025
Meds Dispensed	3135**	1179**	**1710	**1798	**1807	**1944	**1,303	**812	**573	593	1408	1,024	-384	45,308
Formulary	2341	908	1310	1364	1480	1557	1,035	579	319	417	952	759	-193	34,057
Formulary Cost (approx. \$)	14,698	5989	8501	6338	7042	9516	4,644	3,029	2,734	\$1,787	\$6,148	\$9,546	+ \$3,398	\$243,987
Pharmastar scripts	385	99	224	256	203	181	59	77	34	58	76	40	-36	4,993
Pharmastar costs	6845	3336	4248	4979	4490	2349	1,127	1,174	\$794 written off 9/1/22; \$703.72 9/1-12/31/22 (total \$1497.72)	\$1,082	\$2,774+	\$645.73	-\$2,128.27	\$176,369.73
Total Cost	21,543	9,325	12,749	11,317	11,532	11,865	5,771	4,203	4,231.72	\$2,869	\$8,922	\$10,191.73	+ \$1,269.73	\$420,374.73
PAP dispensed				178 \$38,993	124 \$30,727	206 \$34,845	209 \$34,779	194 \$23,708	140 \$12,496	119 \$10,117	44 \$4,016+	94 \$17,636+	- 75 - \$6,101	

*Adjustment from 2009, 2013, 2014 figures.

****Medication dispensed value does not include the 131 samples dispensed at approx. ??? value**

Quality Improvement (QI):

We continue to monitor the same quality indicators as 2023, which are reviewed at all Board of Director and Medical Committee meetings, & improvement plans are developed as needed:

- HgbA1C “good” control goal <7
- BP goal <130/80 for diabetic patients & <140/90 for non-diabetic patients.
- All diabetic patients prescribed a moderate-intensity statin, unless contraindicated.
- Monitor patients that use tobacco to ensure that at each clinic visit they are offered counseling on smoking cessation, referrals are made & replacement nicotine patches are prescribed if patient interested; check that this is documented by nursing and providers.

In order to achieve these QI goals:

- Charts of every diabetic, hypertensive, and tobacco-using patient from 2025 were reviewed by the Clinic Coordinator and physicians.
 - Diabetes-only patients = 4
 - Hypertension-only patients = 15
 - Patients with both diabetes and hypertension = 12

- Tobacco-using patients = 35
- The physicians provide patient orders for each of the patients to improve the quality of care following the determined indicators.
- The Clinic Coordinator reviews all quality indicators and reports any possible “red flags” to a provider on a weekly basis in order to make more real-time improvements in patient care. A spreadsheet is kept up to date for each patient with their quality indicators and a copy kept on the front of their chart for the providers to review at each clinic.
- For patients that use tobacco:
 - Triage RN:
 - Assesses all patients for tobacco use
 - Offers tobacco-using patients counseling with provider to quit and/or a referral to Tobacco Quit Line
 - Places red star on patient chart as a flag to the provider that they use tobacco
 - Providers:
 - Provides counseling to all patients that use tobacco at each visit
 - Prescribes nicotine patches if patient desires
 - Documents in dictation that counseling was provided
- Achievements:
 - 1 of the 4 diabetes-only patients reached the HgbA1C goal
 - 9 of the 15 hypertension-only patients reached the blood pressure goal
 - 3 of the 12 patients with both diabetes and hypertension reached the HgbA1C goal
 - 6 of the 12 patients with both diabetes and hypertension reached the blood pressure goal
 - Replacement nicotine patches prescribed to 5 patients
 - 2 patients report that they no longer use any type of nicotine

Our Volunteers:

- We currently have 121 volunteers (up from 105 volunteers at end of 2024).
- In 2025, volunteers donated **over 2150** hours of their time to the ODC.
- This work is valued at \$74,798.50 per the Bureau of Labor and Statistics.

Highlights of 2025

- 2025 brought us 24 new Spanish-speaking patients (we had 12 new Spanish-speaking patients in 2024)! A new Spanish interpreter, Gilda Marion, joined our 2 Spanish interpreter volunteers, Regi Akan & Kristen Brown, in taking turns being scheduled to be “on call” to come in to clinic whenever a Spanish-

speaking patient walks in the door. We also use Jeenie, an interpreter platform application, that we pay by the minute for virtual healthcare-trained interpreters, when multiple patients are in need of interpreters at the same time or when an interpreter is needed for a language other than Spanish.

- Alyssa Van Duyse joined our Board of Directors, bringing a wealth of marketing expertise!
- Elizabeth Buchanan returned as our Board Secretary & Katie King returned as Co-Treasurer!
- The Open Door Clinic continues to maintain high-quality relationships with our major partners to serve Chippewa County residents. They include Mayo Clinic Health System, Marshfield Clinic, and our host partner in Chippewa Falls, the First Presbyterian Church.
- Our contracted telehealth psychiatrist, Dr. Koplin, sadly passed away and has been missed by many.
- Dr. Ahmed Mahmoud joined us in February as our new contracted telehealth psychiatrist, available for walk-in patients the first three clinic nights per month. He also volunteers his time via telehealth the 4th Tuesday of every month, greatly helping with continuity in care for our patients.
- Via surveys, our patients indicate that they are either “very satisfied” or “satisfied” with our telehealth psychiatry services.
- Bilingual telebehavioral health counseling through the Wisconsin Association of Free and Charitable Clinics (WAFCC) is offered to patients using their own cell phones or devices outside of clinic time; they have the option of using one of the Clinic’s devices if they do not have their own. WAFCC revamped their program the first half of the year, during which time they did not have counselors available, therefore volunteer counselor, Delores Kessel, stepped in to ensure that all of our patients that desired counseling received it!
- We hosted our first UW Eau Claire social work student intern, Abby Mengelt, over the summer! Abby assisted the Clinic Coordinator, volunteered in the intake role during clinics, and revised the intake binder, ensuring that all of the community resources are up to date.
- We held a successful annual community fundraiser, Meet to Eat, again in August 2025, raising over \$9,000!
- Grants were received from the Burke Social Ministry Fund through Central Lutheran Church, the Community Foundation of Chippewa County, the Rutledge Foundation, Spirit Lutheran Church, United Way Greater Chippewa Valley, M3 Foundation, Rotary Club of Chippewa Falls, and the Green Bay Packers Foundation.
- We also received a \$2,000 grant from the American Heart Association to implement a home automatic blood pressure machine program. We are now able to loan out automatic blood pressure machines to patients so that they can monitor their blood pressures at home on a daily basis, allowing our providers to accurately prescribe medications and assess their effectiveness!

Our Challenges:

- Continuing to provide medications/supplies to meet the needs of our patients and find ways to control the costs is an ongoing challenge. We have seen an increase in medication/supply cost since the beginning of COVID-19.
- Our funding base has significantly decreased since the beginning of the COVID-19 pandemic and we anticipate that to continue to decrease with the current economic climate. Please let us know if you know of any possible grant opportunities!
- We continue to face challenges following the closure of HSHS as they supported many aspects of the clinic.
 - HSHS St. Joseph’s Hospital provided invaluable services such as sterilization of equipment, hazardous sharps disposal and printing services. The Open Door Clinic must now pay for sharps disposal and printing services. A replacement for sterilization of equipment has not yet been found.
 - Annual funding was provided by the San Damiano grant but is no longer an option as only non-profits located in HSHS geographical communities are eligible.

- The Wisconsin Department of Administration Equitable Recovery Grant provided a total of \$120,000 to the clinic over the past three years to assist with pandemic recovery. We lost this significant funding source on 12/31/24.
- We are preparing for an increased need for our services by our community members due to new Medicaid restrictions, greatly increased costs of Marketplace insurance, and economic instability.