



Community Health Needs Assessment



Mayo Clinic Health System in Cannon Falls, Lake City and Red Wing

November 2016



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Executive Summary

Enterprise Overview:

Mayo Clinic is a not-for-profit, 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 21 hospitals located in communities throughout the United States, including Arizona, Florida, Minnesota, Wisconsin and Iowa.

Mayo Clinic provides a significant benefit to all communities — local to global — 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 to bring this new knowledge quickly to patient care. With 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. 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 (MCHS) is a family of clinics, hospitals and health care facilities serving more than 70 communities in Iowa, Wisconsin and Minnesota. It encompasses more than 900 providers and serves more than half a million patients each year. As part of Mayo Clinic — a leading caregiver with over 150 years of patient care, research and medical education expertise — the organization provides health care options to communities ranging from primary to highly specialized care. MCHS is recognized as one of the most successful regional health care systems in the United States. MCHS 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.

The 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.

MCHS was created to fulfill the commitment to bring Mayo Clinic quality health care to local communities. As part of this commitment, the health system has a long tradition of supporting community health and wellness.



Cannon Falls, Lake City and Red Wing are part of the Southeast Minnesota region of Mayo Clinic Health System (MCHS), which also includes hospitals in Austin and Albert Lea, as well as the 17 hospitals throughout MCHS. Mayo Clinic Health System supports the community through inpatient and outpatient services.

- Mayo Clinic Health System in Cannon Falls (MCHS-Cannon Falls) is a 21-bed hospital in Cannon Falls, Minn.
- Mayo Clinic Health System in Lake City (MCHS-Lake City) is an 18-bed critical-access hospital in Lake City, Minn.
- Mayo Clinic Health System in Red Wing (MCHS-Red Wing) is a 50-bed hospital in Red Wing, Minn.



Summary of Community Health Needs Assessment

The key priorities for MCHS' locations in Cannon Falls, Lake City and Red Wing were assessed and prioritized by evaluating data and survey responses and include:

1. Obesity
2. Mental health
3. Health behaviors

Community Health Needs Assessment (CHNA) findings were shared with all three community boards and community leaders groups.



Our Communities

Cannon Falls:

Geographic area

Mayo Clinic Health System in Cannon Falls serves Cannon Falls and the surrounding area within Goodhue County. Cannon Falls is a rural community with a population of 4,068, as of July 2014. The service area population is 12,789. The Cannon Falls campus houses a 21-bed, critical-access hospital and a hospital-based clinic with 12 providers. An additional 27 visiting specialists provide services in Cannon Falls.

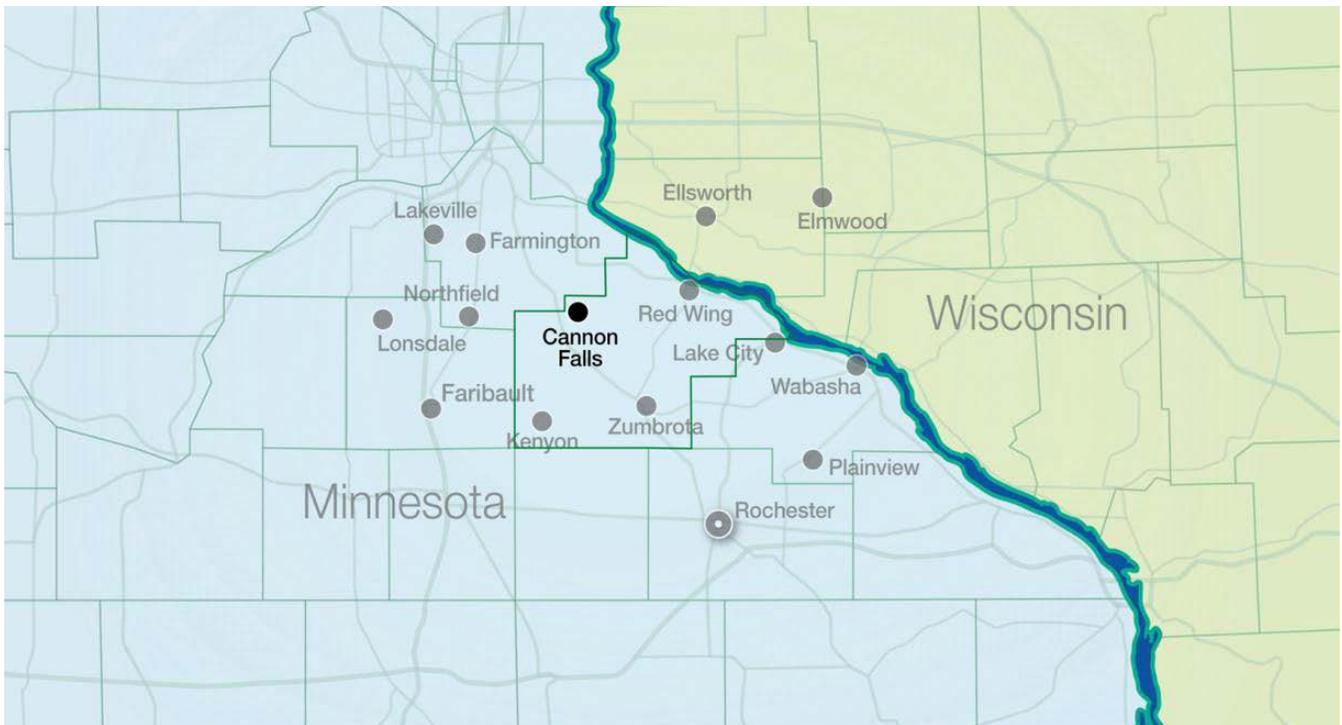


Figure 1: Mayo Clinic Health System Cannon Falls, Lake City and Red Wing and regional clinics.

Demographics

The population is 46.5 percent male and 53.5 percent female. The median age of residents is 42 years. The estimated median household income in Cannon Falls for 2013 was \$46,999. According to 2010 data, 5.6 percent of residents have an income below the poverty level, while 3.5 percent of residents have an income below 50 percent of the poverty level.



Lake City:

Geographic area

Mayo Clinic Health System in Lake City has locations in Lake City, Plainview and Wabasha, Minn., and Alma, Wis. The majority of Lake City's service area includes Goodhue and Wabasha counties in southeastern Minnesota; the Alma Clinic is in Buffalo County in southwestern Wisconsin. The community is defined as Wabasha and Goodhue County, based on the number of patients served. The main campus, located in Lake City, houses an 18-bed, critical-access hospital, a 90-bed nursing home and a hospital-based clinic with eight providers. An additional 28 visiting specialists offer shared services in Lake City.



Demographics

According to the U.S. Census Bureau, the 2014 population for Lake City is 4,957 and Wabasha County, which makes up most of Lake City's service area, is 21,443. A 2014 estimate reports that 23.4 percent of the population is under 18 years old, and 17.9 percent is 65 years old or older. The median household income is \$45,323 and an estimated .1 percent of individuals are living below poverty level.

Red Wing:

Geographic area

Mayo Clinic Health System in Red Wing has locations in Red Wing and Zumbrota, Minn., and Ellsworth, Wis. The majority of Red Wing's service area includes Goodhue County in southeastern Minnesota and Pierce County in west-central Wisconsin. The main campus, located in Red Wing, includes a hospital licensed for 50 beds, senior living community and a multi-specialty, hospital-based clinic with 65 providers. An additional 60 specialists offer shared services in Red Wing.



Demographics

According to the U.S. Census Bureau, the 2015 population estimate for Goodhue County, which makes up most of Red Wing's service area, is 46,435. A 2015 estimate reports that 22.5 percent of the population is under 18 years old, and 18.9 percent is 65 years old or older. The median household income (in 2014 dollars) is \$57,339 and an estimated 9.6 percent of individuals are living below poverty level.



Assessing the Needs of the Community

Overview:

Mayo Clinic Health System (MCHS) community assessment process was led by a regional Community Health Needs Assessment (CHNA) committee. The committee followed a systematic process to evaluate the health needs of our communities and determine health priorities. Committee members were chosen for their expertise in directly providing services and for their involvement in existing community programs and services. The committee was responsible for creating a thorough and organized needs assessment process, as well as for developing an effective plan to meet the identified needs.

Community input

Mayo Clinic Health System's locations in Cannon Falls, Lake City and Red Wing partnered with Goodhue County on its Goodhue County Adult Health Survey and used the findings as a key part of our process. Primary input for the assessment and prioritization process included community input through key-informant interviews, county-wide mail surveys, local focus groups, demographic data and local surveys completed by the school districts. MCHS would like to thank our partners in Goodhue County Public Health and United Way of Goodhue, Pierce and Wabasha County for their assistance with our CHNA. Serving on the Goodhue County committee was beneficial as a learning experience and for the data that was shared. We specifically would like to thank the Goodhue County Public Health team for their guidance:

- Goodhue County Health and Human Services, Public Health Division, Healthy Communities supervisor
- Goodhue County Health and Human Services, Public Health Division, Live Well Goodhue County coordinator
- United Way of Goodhue, Pierce and Wabasha County

The following organizations with special knowledge of or expertise in public health were consulted as part of this assessment:

- Director of Public Health, Wabasha County
- Community Relations, St. Elizabeth's
- Supervisor, Goodhue County Healthy Communities

The following leaders, representatives or members of medically underserved, low-income and minority populations, and populations with chronic diseases also were consulted:

- Director, CARE Clinic of Goodhue County.
- Public health nurse, Goodhue County. Public Health staff work with low-income, minority populations that are medically underserved.
- Hispanic Outreach of Goodhue County. Live Healthy Red Wing Survey
- Public health nurse, Wabasha County. Public Health staff work with low-income minority populations that are medically underserved.



The following are key comments from community stakeholders and partners:

Chronic disease management/wellness and access to care

Uninsured and low-income residents in Goodhue County lack sufficient resources to manage their chronic illness(es). Uncontrolled chronic illness is a detriment to overall health and ultimately can diminish quality of life. For patients who require treatment for one of our most common chronic conditions (diabetes, depression or hypertension), we work to coordinate care and follow-up, provide the resources needed to manage chronic illness, and collaborate with our clinical specialty directors to integrate our medical, dental, mental health, wellness coaching and social services.

CARE Clinic serves as a “one-stop-shop” to address overall health and well-being. We truly believe our patients, especially children, diabetics and other high-risk individuals, benefit from our integrated model.

Julie Malyon, director, CARE Clinic, 10/2016

Chronic disease management/wellness

Live Well Goodhue County, the local initiative of the Minnesota Statewide Health Improvement Program, is working to improve the health of our residents by making it easier to walk, bike, eat nutritious food and live tobacco-free. Live Well Goodhue County partners with child care providers, schools, worksites and communities to implement evidence-based initiatives to increase activity, access and availability to healthy foods, and tobacco-free living. We partner with MCHS on these initiatives, as well as evidence-based self-management programs, for example, I CAN Prevent Diabetes, Living Well with Chronic Conditions, and A Matter of Balance.

David Anderson, coordinator, Live Well Goodhue County

Mental health

The Make It OK campaign is an initiative to educate the public about mental illnesses and reduce the stigma associated with talking about it. The campaign was piloted in Red Wing 2013. In 2014, The Goodhue County Health and Human Services Board took the pledge to Make It OK and affirmed a commitment to continue Make it OK throughout the county.

In Goodhue County, stigma has been reduced by educating over 1,500 residents through presentations. We also have helped raise awareness of mental illness in Goodhue County by participating in community events and media campaigns. This work and our accomplishments would not have been possible without the work of our partners. We appreciate partnering with MCHS, and we believe this partnership has made an important difference in our community.

Jessica Seide, community health specialist, Goodhue County Health and Human Services, 10/2016



Prioritization process and criteria

Community health needs were identified and prioritized through a comprehensive process that included community and organizational leadership.

A community group comprised of United Way, Statewide Health Improvement Program, Goodhue County Public Health, Live Healthy Red Wing, MCHS and CARE Clinic representatives reviewed survey results, provided unique perspectives from each program and thoroughly discussed and vetted current gaps in health and wellness using this process:

- Progress towards goals and objectives identified in 2013 CHNA
- Community impact of 2013 CHNA Implementation Plan
- Goals and objectives of United Way and Goodhue County Assessments
- Current local programs already working to meet identified needs from 2016 CHNA survey and community input
- Ability to impact needs that rose to the top through surveying in input process
- Resources necessary to impact needs identified

The process was approved by the River Corridor Leadership Team, which included leaders from Cannon Falls, Lake City and Red Wing, and reports were shared with the joint board for approval and review in September 2016. Community Health Needs Assessment (CHNA) findings were shared with all three community boards and community leaders groups including Goodhue County Public Health Community Leadership Team.

County assessments

The assessment process began with a thorough review of the local county CHNAs. Collaboration with these assessments was key to gathering data and using local resources.

Goodhue County

MCHS employees serve on the Goodhue County Citizens Advisory Group. The process and data gathered for the county assessment also was used in the MCHS process. The Goodhue County 2017 CHNA currently is in process.

The full assessment for Goodhue County, Minn., can be found at:

<http://www.co.goodhue.mn.us/departments/publichealth/files/CommunityHealthAssessmentPriorityReport2012.pdf>

Goodhue 2012 findings:

- Family and parenting issues
- Mental health
- Unhealthy eating habits
- Lack of exercise
- Economic health
- Chemical health
- Driving behaviors



- Transportation options
- Obesity
- Health insurance concerns

2015 Goodhue County Adult Health Survey:

<http://www.co.goodhue.mn.us/981/Community-Health-Assessment>

Survey Data Book:

<http://www.co.goodhue.mn.us/DocumentCenter/View/11618>

Wabasha County

MCHS employees served on the implementation teams for Wabasha County.

Wabasha 2014 findings:

- Seniors health. Improving the health and well-being of aging population, which could allow them to remain in their own homes.
- Prevention and wellness. Reducing obesity and promoting healthy habits (nutrition and physical activity) to prevent and or manage chronic diseases.
- Mental health. Improving access to mental health services.
- Oral health. Improving oral health and access to affordable dental services.

The complete report can be found at:

http://www.health.state.mn.us/divs/opi/pm/lphap/2010-2014/chip/docs/wabasha_chip_rsz.pdf

River Falls Area Hospital / Pierce County Public Health Department, Wis.

Public Health Department 2012 Annual Report

Community Health Improvement Process (CHIP) was conducted with Allina Health-River Falls Hospital.

Pierce County 2014-2016 findings:

- Physical activity
- Healthy foods

The complete report can be found at:

http://www.co.pierce.wi.us/Public%20Health/PDF/Publications_Data/CHNA.full%20report.2013.River%20Falls-1.pdf

<http://www.co.pierce.wi.us/Public%20Health/PDF%20Files/2012%20Annual%20Report%20Final.pdf>



Key informant surveys

The three communities completed surveys (See Appendix A for survey). The findings identified top priorities as:

- Health concerns
- Mental health
- Economics
- Health care
- Environment
- Education
- Seniors

#1 Health concerns

Of 27 key informants interviewed, 20 (74 percent) chose “health” as one of their top three concerns. It was the number-one, most-frequently chosen concern. When asked about health concerns, the issues mentioned most often among all informants were:

- Weight, nutrition, and exercise (19 or 70 percent)
- Aging population (seven or 26 percent)
- Cost (seven or 26 percent)
- Mental health/preventative (seven or 26 percent)
- Personal behaviors (six or 22 percent)

#2 Mental health concerns

Of 27 key informants interviewed, 18 (66 percent) chose “mental health” as one of their top three concerns. It was the second most-frequently chosen concern. When asked about mental health concerns, the most frequently mentioned issues among key informants were:

- Access (seven or 26 percent)
- Anxiety/depression (six or 22 percent)

<http://mayoclinichealthsystem.org/-/media/local-files/red-wing/documents/chna/2016-ki-results-relating-to-access.pdf?la=en>

Red Wing key informant interviews

- Sheriff, Goodhue County
- Superintendent, Red Wing School
- Chief, Red Wing Police
- Chief, Red Wing Fire Department
- CEO, Medical Center
- Medical Center board member/philanthropy, Jones Family Foundation
- Community leader, women and children’s advocate
- Executive director, United Way of Goodhue, Wabasha and Pierce counties
- Director, CARE Clinic
- Administrator, City of Red Wing



- Executive director, Senior Housing
- Director, Red Wing Chamber of Commerce
- Directory, Live Healthy Red Wing
- Community leader, attorney, Every Hand Joined board member

Lake City key informant interviews

- Realtor and business owner, Kemp Insurance and Realty
- Retired teacher, business owner, Huettl's Meats, volunteer
- Ambulance director, Lake City Ambulance
- EDA director, Lake City Planning and Community Development
- Director, Lake City Area Chamber of Commerce
- Business owner, Anytime Fitness
- Veterinarian, Mayo Clinic Health System board member
- Pastor, Bethany Lutheran Church

Cannon Falls key informant interviews

- Superintendent, Cannon Falls Public Schools
- President, Cannon Falls Chamber of Commerce
- Pastor, St. Ansgar's Lutheran Church
- Director, Cannon Falls Ambulance Service
- Director, Shepherd's Center of the Cannon Valley (senior citizens)
- Executive director, Twin Rivers Senior Campus
- Owners, Cannon Realty
- Administrator, City of Cannon Falls



Mailed survey: Goodhue County Public Health

In addition to the above surveys, a written survey was mailed to 3,000 Goodhue County residents to ensure input from those with various levels of incomes, education and living situations. (See Appendix B for summary.)

The table reflects the key demographic data of 1,002 individuals who completed the survey. The response rate 33.4 percent.

Gender		Age	
Male	408	18-34	68
Female	574	35-44	86
Missing	20	45-54	150
		55-64	242
		65+	436
		Missing	20
Education			
Less than HS diploma no GED			41
High School diploma or GED			260
Some college, trade or Associate degree			377
Bachelor's degree or higher			295
Missing			29
Income			
<\$25,000			148
\$25-\$34,999			93
\$35-\$49,999			141
\$50-\$74,999			202
\$75 or more			308

Goodhue County is in the process of evaluating this survey and establishing the findings. The Summary of 2015 Goodhue County Community Health Needs Assessment Survey highlights differences in age and economic reporting. Those who were from lower-income households and those who are obese were more likely to report chronic health conditions, mental health conditions, limited physical activity and concerns about running out of food. Older and middle-age respondents were more likely to report chronic health conditions, such as anxiety or panic attacks and concerns about running out of food.

Three areas highlighted were chronic health conditions, nutrition, physical activity and alcohol use (Respondents age 35-44 were most likely to report heavy drinking.). Of the respondents, 19 percent reported they have been told by a health care professional that they had depression; 17 percent reported they have been told they had anxiety or panic attacks.



Focus groups and implementation planning

Healthy Habits Questionnaires were used to ensure adequate representation of minority and underserved groups. The table summarizes the key findings from the focus group sessions. (See Appendix C for Healthy Habits Questionnaires.) These focus groups revealed that although most respondents were satisfied with their health, the majority also had a desire to improve it and underscored the need for more information for success. Additional focus groups will be held with health leaders in the three communities to review the CHNA data, the United Way Health focus and the Goodhue County SHIP program.

Survey	
Number of surveys	45
From	Senior housing, community meetings, high school HOSA
Rate your health	Very Good 22 Good 16
Are you satisfied with your health?	Satisfied 18 responses Very Satisfied - 17 responses
1 dissatisfied to 7 satisfied	
Are you motivated to change fair or poor health?	Very Motivated 7 Somewhat Motivated 9
Why haven't you made changes?	I am overwhelmed with work, home and personal issues
I need more information about how to improve my health	18 responses

Focus groups held or surveys were completed:

- Shepherd Senior Center, Cannon Falls
- First Thursday, Cannon Falls
- Pepin Plaza Senior Living Community, Lake City
- Downtown Plaza, Red Wing



- CARE Clinic of Goodhue County
- Children First, Early Childhood Network
- Women’s Network
- Parent Natural Focus Groups, WIC, Community Education
- United Way, Goodhue Wabasha and Pierce County

Additional local, county and state data were used from the following sources:
U.S. Census Bureau State & County Quick Facts

People Quick Facts	Goodhue County	Wabasha County	Minnesota	Pierce County	Wisconsin
Population, 2015 estimate	46,435	21,239	5,489,594	40,889	5,771,337
Population, 2010 (April 1) estimates base	46,183	21,664	5,303,925	41,019	5,687,289
Population, percent change, April 1, 2010 to July 1, 2015	0.5%	-2.0%	3.5%	-0.30%	1.50%
Persons under 5 years, percent, 2015	5.6%	5.90%	6.4%	5.10%	5.90%
Persons under 18 years, percent, 2015	22.5%	22.1%	23.4%	21.0%	22.40%
Persons 65 years and over, percent, 2015	18.9%	17.0%	12.9%	10.40%	13.70%
White persons, percent, 2015 (a)	95.1%	97.30%	85.4%	96.60%	87.60%
Black persons, percent, 2015 (a)	1.2%	0.70%	6.0%	0.60%	6.60%
American Indian and Alaska Native persons, percent, 2015 (a)	1.5%	0.30%	1.3%	0.50%	1.10%
Asian persons, percent, 2015 (a)	0.6%	0.60%	4.9%	0.90%	2.80%
Persons reporting two or more races, percent, 2015	1.5%	1.00%	2.4%	1.40%	1.80%
Persons of Hispanic or Latino Origin, percent, 2015 (b)	3.3%	3.10%	5.2%	2.00%	6.60%
White persons not Hispanic, percent, 2015	92.9%	95.60%	81.0%	94.80%	81.90%
High school graduate or higher, percent of persons age 25+, 2010-2014	92.2%	92.70%	92.3%	93.90%	90.80%
Bachelor’s degree or higher, percent of persons age 25+, 2010-2014	23.5%	20.70%	33.2%	26.30%	27.40%
Veterans, 2010-2014	3657	1,885	355,366	2,754	395,931
Mean travel time to work (minutes), workers age 16+, 2010-2014	23.1	22.9	23.0	26.8	21.8
Median household income, 2010-2014	\$57,299	\$55,994	\$60,828	\$61,613	\$52,738
Persons below poverty level, percent, 2010-2014	9.6%	7.30%	11.5%	10.80%	13.20%
Geography Quick Facts	Goodhue County	Wabasha County	Minnesota	Pierce County	Wisconsin
Land area in square miles, 2010	756.84	522.98	79,626.74	573.75	54,157.80
Persons per square mile, 2010	61	41.4	66.6	71.5	105



- County Health Rankings and Roadmaps
<http://www.countyhealthrankings.org/our-approach>
- County Health Rankings-Goodhue
<http://www.countyhealthrankings.org/app/minnesota/2016/rankings/goodhue/county/outcomes/overall/snapshot>
- County Health Rankings-Wabasha
<http://www.countyhealthrankings.org/app/minnesota/2016/rankings/wabasha/county/outcomes/overall/snapshot>
- County Health Rankings-Pierce
<http://www.countyhealthrankings.org/app/wisconsin/2016/rankings/pierce/county/outcomes/overall/snapshot>
- Live Healthy Red Wing
<http://www.livehealthyredwing.org/>
- CARE Clinic
<http://www.careclinicrw.com/medical.html>
- Healthy People 2020 Report
<https://www.healthypeople.gov/2020/How-to-Use-DATA2020>
- Minnesota Student Survey 2010
<http://www.health.state.mn.us/divs/chs/mss/countytables/goodhue13.pdf>
<http://www.health.state.mn.us/divs/chs/mss/countytables/wabasha13.pdf>
- Living Wage Calculation for Goodhue County, Minn.
<http://livingwage.mit.edu/counties/27049>
- Center for Disease Control and Prevention
<http://www.cdc.gov/obesity/data/adult.html>
- Social Determinants of Health
http://www.euro.who.int/_data/assets/pdf_file/0005/98438/e81384.pdf
- United Way of Goodhue Wabasha and Pierce Counties
Health Goal Survey Results Summary
<http://new.hs.mayo.edu/-/media/local-files/red-wing/documents/chna/health-goals-survey-results-summary.pdf>



Addressing the Needs of the Community

Overview

Through the process described in the preceding section, the following health needs have been identified as high priorities:

1. Obesity

- Nutrition
- Activity
- Chronic disease
- Family and parenting
- Children

2. Mental Health

- Life balance
- Stigma
- Resilience
- Economics
- Access
- Situational depression

3. Health Behaviors

- Personal choices
- 12 habits of highly healthy people

Additional emphasis in the following areas will be considered for implementation:

Cannon Falls

Seniors

Lake City

Seniors

Red Wing

Seniors

Economic diversity

Identified health needs

Obesity

Obesity focuses on overweight and obese, not just clinical obesity. Nutrition is a key component in preventing obesity (breastfeeding, sufficient nutritious food for growth and development, nutrition at every age.) Limited physical activity is closely linked to obesity. Obesity and overweight pose a major risk for chronic diseases, including type 2 diabetes, cardiovascular disease, hypertension and stroke. (World Health Organization) Obesity can be reduced through the family, parenting and direct work with children. Obesity, the second leading cause of death in the U.S., has increased significantly from 2000 to 2010. This increase has occurred nationally, as well as within Minnesota and Wisconsin. These two states show a self-reported estimate of 27 to 31 percent obesity among adults.

Mental health

According to the World Health Organization, mental health is defined as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, work productively and fruitfully, and is able to make a contribution to his or her community.” This focus on mental health includes stigma, resiliency and life balance, as well as situational depression. Mental health resiliency is about adapting well to change and setbacks and continuing on in the face of adversity, including economic problems. This is not a focus on diagnosed mental illness, but rather a focus on being able to adapt to life’s misfortunes and challenges.



Health behaviors

Personal choices influence quality of life and quality of health. Small, manageable changes made over time can benefit health. Social determinants of health encompass three key areas: social and economic, physical environment and individual characteristics and behaviors.

In the County Health Rankings, the Robert Wood Johnson Foundation cited that health behaviors are responsible for 30 percent of health outcomes; social/economic factors are responsible for 40 percent. Many aspects of health can be acted upon to increase your health for those issues you cannot control. Providing education and tools to improve overall health will optimize an individual's opportunity for maximum health.

Here is the comparison between the social determinants of health and the role they play in overall health:

- Behaviors (eat, drink, activity) 40 percent
- Social (relationships, mental fitness, connectivity) 15 percent
- Environmental (physical space for work, play and living) 5 percent
- Health care (choices and access) 10 percent

Twelve habits of highly healthy people are behaviors individuals can measure and improve on to affect their current and future health.

Additional considerations

Seniors

Our counties have a higher percentage of seniors than in the state as a whole. Seniors may have specific needs related to transportation, access to mental health services and obesity.

Economics

Economic stability was the third most frequently mentioned concern in the key informant survey and was cited as an issue in the Goodhue County Health Survey. Of elementary children in Red Wing, 45 percent participate in the Free and Reduced Lunch program. Health disparity is linked to social and economic disadvantage and is an obstacle to health.

Health needs not addressed

Through the assessment process, there were identified needs that will not be addressed in this community health improvement plan. These are issues that may be addressed by other community organizations or are not within the scope of MCHS.

Needs not identified as high priorities

Access to care: Data shows the percentage of uninsured is historically low. MCHS will continue to support uninsured community members in partnership with the CARE Clinic, a free clinic for Goodhue County.

Tobacco: We will continue to support county programs for tobacco-use reduction and education.



Available resources

Continuing and expanding on much of the work from our 2013 CHNA Implementation Plan allows us to use resources already committed to funding projects in our communities. Partnerships with Goodhue County, Live Healthy Red Wing and the YMCA will continue their work and move into the 2017 implementation plans.

The community group discussing and prioritizing health needs highly supported an increased focus on personal responsibility as an effective way to improve health through education, awareness and wellness programs. Mayo Clinic printed resources, including “12 Habits of Highly Healthy People”, will be shared in the community and schools.

Goodhue County Public Health, in its recent five-year Community Health Improvement Plan (CHIP), identified three focus areas and continues to work in conjunction with these community efforts: Family Home Visiting, Mental Health Anti-Stigma Campaign and SHIP worksite Wellness Strategy. This work complements the MCHS CHNA.

The local Hunger Free Network and Every Hand Joined Collaborative continue to work with the community to provide healthy food for children. This includes breakfast, increasing participation in the Free and Reduced Lunch program and Summer Lunches.

Sharing leadership and facility resources, program promotion and referrals enhances effort such as these programs: First Aid for Mental Health, I CAN Prevent Diabetes, Living with Chronic Illness and the YMCA’s Get Ready to Ramble.

A Community Engagement specialist is part of the Public Affairs department and is dedicated to furthering the implementation plans for the current CHNA.



Evaluation of Prior CHNA and Implementation Strategy

Identified need: Obesity

Goal: Increase awareness of individual health and obesity-management options for youth and families

Awareness of the importance of exercise and nutrition has been increased through the use of social media platforms, based on tracking the number of “likes” to blogs written by providers on this subject.

Reducing screen time is a focus of the 5-2-1-0 program. While it is too early to assess the impact of this program, its reach and participation in it has increased each year. The 5-2-1-0 program is promoted in local elementary schools, day care programs and during clinical visits.

MCHS-Cannon Falls, MCHS-Lake City and MCHS-Red Wing continue to work within their respective communities to encourage healthy living through sponsorships of community events, such as bike rallies, run/walks, or providing nutritional education at community meetings/events. However, beyond increased participation, it is too early to gauge the impact of these activities.

Community partnerships have been formed in all communities to provide access to healthy food when children aren’t in school through Packing for the Weekend programs. The Baby Café and childbirth education programs in all communities provide the first step in obesity prevention through baby nutrition and lactation support. Baby Café opened in Lake City in 2015 and in Cannon Falls in 2016.

Identified need: Mental health

Goal: Educate and provide resources for the community by using social media

County-wide resource lists have been developed and were shared throughout the community.

A National Alliance on Mental Illness (NAMI) chapter was re-established in Goodhue County. However, in 2016, the chapter disbanded; services are now available through a Southeast Minnesota regional effort.

Make it OK, an anti-stigma program has become a county-wide training program for mental health awareness. Community training and training at county school districts attracted 1,500 attendees. A Make it OK volunteer program director has been hired to expand the program.

As a result of a grant for a Hispanic mental health program, the CARE Clinic partnership provides a bilingual therapist in addition to the psychology services offered at the free clinic. In 2014, 51 encounters were documented; 257 encounters for mental health were documented in 2015. Of



patients with depression, 60 percent have improved their scores; 40 percent achieved their goals for managing their depression. The program continued in 2016.

Licensed social workers and mental health providers were hired to increase access to care and to accommodate patient needs in clinical settings.

Identified need: Access

Goal: To support and promote community health care access

Nurse triage line

In 2013, MCHS took a step forward in redesigning care by introducing a standard, 24/7 nurse line across all primary care clinics. A central pool of staff nurses provides telephone advice and interventions to patients. Nurses follow evidence-based practices developed by a multidisciplinary team of Mayo Clinic physicians to provide health care advice and direct patients to the right level of care at the right time. By centralizing routine symptom calls, the nurse line opens access in the clinics for patients. It also saves community members unnecessary visits and provides over-the-counter alternatives. The goal is more affordable, accessible, high-quality care for patients.

CARE Clinic partnership

CARE Clinic's mission is represented in its name: Community – Access – Resources – Education. Since opening its doors in 2010, its primary aim has been to provide access to health care for uninsured low-income individuals of Goodhue County. Over 2,500 community members have accessed health care through free medical, dental and mental health services at CARE Clinic.

MCHS has been in integral partner in providing health care access through the following resources:

- Volunteer Mayo Clinic employees (by extending malpractice insurance for physicians/nurses/lab techs/etc.)
- In-kind lab and radiology services
- Donated clinic space
- Board leadership

The CARE Clinic provided service for 1,933 patient encounters for 567 unique patients in 2015, an increase of 200 encounters from 2014. Of these patients, 50 percent are under 100 percent of the Federal Poverty Level.

Access to care is not one of the top three assessed needs for 2017 to 2019. Minnesota has a new record-high level of insurance coverage, although the cost of care and high deductibles continue to limit access to some insured individuals. MCHS will continue to support CARE Clinic with facilities, insurance for employees and additional radiology and lab testing.

Identified need: Highway safety

The City of Cannon Falls specifically assessed the need to increase safety on Highway 52. After the assessment was complete, the state revealed plans to eliminate all cross traffic in Cannon Falls. These changes were implemented in 2014, as part of the Highway 52 reconstruction. The Highway 52



Corridor management plan includes goal for this to be a fully access-controlled freeway from St. Paul to south of Rochester. This is no longer an identified need for the Cannon Falls community.



Appendix A: Interview Questions

Demographic Information: Age: 19 and below 20-34 35-54 55-64 65-75 75 and up

Male Female

Occupation: Education Health Care Religion Industry Retail Government Agriculture Business

Homemaker Not employed Service Retired Other _____

Racial (Mark all that Apply): American Indian Asian/Pacific Islander Black, African American or African White Other _____

Ethnicity: Are you of Hispanic or Latino Origin Yes No

Date Interviewed _____ **Interviewer:** _____

1. What are the top three health concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

2. What are the top three chemical health problems in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

3. What are the top three concerns facing the diverse populations in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?



4. What are the top three economic concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

5. What are the top three educational concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

6. What are the top three environmental concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

7. What are the top three health care access concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

8. What are the top three housing concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

9. What are the top three mental health concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?



10. What are the top three safety concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

11. What are the top three concerns facing seniors in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

12. What are the top three transportation concerns facing people in Goodhue County?

- a. What makes you believe these are concerns and who is affected by them?
- b. What do you think could be done to address these concerns?

13. Of the issues listed above, what are the top three that are the most important?

- a. Chemical health
- b. Diverse populations
- c. Economics
- d. Education
- e. Environment
- f. Health Care Access
- g. Housing
- h. Mental health
- i. Safety
- j. Seniors
- k. Transportation

14. Are you aware of any activities or initiatives taking place in your community to address any of these problems/issues/concerns?

15. What resources are you aware of in your communities that are available to assist with any of these problems/issues/concerns?



16. Please share any suggestions you may have concerning how current community resources might be redesigned or redirected to be more effective.

17. Are there any other issues or concerns that are not being met in Goodhue County?
a. Yes No If yes, what are those issues or concerns?

Thank you for assisting Goodhue County Health and Human Services and Mayo Clinic Health System on this Community Health Needs Assessment.



Appendix B: Goodhue County Summary

Summary of 2015 Community Health Needs Assessment survey

Introduction

The 2015 Goodhue County Community Health Needs Assessment Survey was conducted to learn about the health of county residents. The data presented in this summary offer some key highlights from the survey findings in the areas of chronic health, mental health, access to medical and mental health care, nutrition, physical activity, and tobacco and alcohol use. The data was analyzed to identify potential differences based on the following demographic and health status categories:

- Gender
- Age (adults age 18-34, 35-44, 45-54, 55-64, and 65+)
- Race/ethnicity (white only and all other races/ethnicities combined)
- Annual household income (less than \$25,000; \$25,000-\$34,999; \$35,000-\$49,999; \$50,000-\$74,999; and \$75,000 or more)
- History of mental illness
- Weight status (not overweight or obese, overweight but not obese, obese)

The percentages referenced in this summary are rounded to the nearest whole number. All results can be accessed in the Goodhue County data book.

Methods

Goodhue County Health and Human Services conducted the Health Needs Assessment Survey. It was mailed to respondents, and each potential respondent received up to two reminders following the initial mailing. Households were randomly selected using address-based sampling, and the “most recent birthday” method of within-household respondent selection was used to randomly select one adult from each sampled household.

A total of 3,000 people in Goodhue County were invited to participate, and 1,002 completed a survey, a response rate of 33 percent. To ensure the survey results are representative of the adult population in the county, the data were weighted when analyzed. The weighting accounts for the sample design and for differential response among population groups.

Interpretation and limitations

In this summary, a threshold of 10 percentage points or more is used to identify potential differences between groups. However, caution should be used when interpreting the findings and reporting differences between population groups, particularly comparisons including respondents of color and those age 18-34, where estimates are based on the perceptions and experiences of relatively few individuals. Community residents, specifically from groups underrepresented in the survey, should be engaged in reviewing and interpreting the survey results to ensure the findings align with the



experience of Goodhue County residents. Additional data collection (interviews, focus groups and other survey data, etc.) should be used to examine more closely the potential differences between groups suggested by these findings and topics of interest to community residents.

Health equity

Goodhue County Health and Human Services is interested in understanding health inequities in the county. The Minnesota Department of Health defines health equity as “the opportunity for every person to realize their health potential — the highest level of health possible for that person — without limits imposed by structural inequities.”¹

Health inequities arise from disparities or differences in health between groups as a result of varying social, economic, environmental, geographic and political conditions, also known as the social determinants of health. Certain health disparities are the consequence of genetic or biological differences between groups, while health inequities result from social conditions that can be changed through the implementation of policies and practices.

The data referenced in this summary and the full data book offer a starting point to identify potential health disparities between groups and consider the need for additional research to better understand and address health inequities. There are limitations to these survey data, so discussion of health inequities should be informed by other data collection, analysis of the factors that influence health in Goodhue County (geography, employment and access to resources and services, etc.) and feedback from community residents, particularly groups who were not well-represented among the survey respondents.

Potential differences between groups

This section highlights some potential differences between respondent groups, which are described in greater detail in the “key findings” section of the summary. In general, respondents from lower-income households and those who are obese were more likely to report chronic health conditions, mental health conditions, limited physical activity, and concerns about running out of food. Older and middle-age respondents were more likely to report chronic health conditions. Respondents of color also were more likely to report certain health conditions, such as anxiety or panic attacks, and concerns about running out of food.

Chronic health conditions

- High blood pressure/hypertension and high cholesterol or triglycerides were reported more often among respondents who are obese or overweight, age 45-65+, or from households making less than \$25,000.
- Diabetes was reported more often among respondents who are age 65+.

¹ Minnesota Department of Health. (2014). Advancing Health Equity Legislative Report. Retrieved from the Minnesota Department of Health website: <http://www.health.state.mn.us/divs/chs/healthequity/legreport.htm>



- Depression was reported more often among respondents who are female, from households that make less than \$25,000, or who are obese.
- Anxiety or panic attacks were reported more often among respondents of color, from households making less than \$25,000 and \$75,000 or more, or age 35-44.
- Multiple groups were more likely to report delaying or not getting medical care, including respondents of color, from households making less than \$25,000, or who are obese.

Nutrition

- Respondents who are obese were less likely to report eating five or more servings of fruits and vegetables.
- Concerns about running out of food before having money to buy more were most often reported among respondents of color, from households that make less than \$25,000, or who are obese.

Physical activity

- Respondents who are age 18-34 or obese were less likely to report getting at least 30 minutes of moderate physical activity five days a week, during a typical week.
- Respondents who are age 65+, from households that make less than \$75,000 or who are obese, were less likely to report getting at least 20 minutes of vigorous physical activity three days a week, during a typical week.

Alcohol use

- Respondents age 35-44 were most likely to report heavy drinking.
- Binge drinking was reported at a higher rate among males and overweight respondents.



Appendix C: Healthy Habits Questionnaire



Healthy Habits Questionnaire

Instructions: Please complete this brief survey to help us determine the support needed for those who want to make healthy changes.

Part I: Your health

1. How would you rate your health? Please circle your answer.

Excellent Very Good Good Fair Poor

2. On a scale of 1 – 7, where “1” is “very dissatisfied ” and “7” is “very satisfied,” how satisfied are you with your general health (please circle your answer)?

1 2 3 4 5 6 7

3. If you rated your health as fair or poor, how motivated are you to make changes to improve your health?

Very motivated Somewhat motivated Not very motivated Not at all motivated Don't know

4. If you responded either “very motivated” or “somewhat motivated,” what changes have you made (are you making) this year to improve your health?

5. If you responded either “very motivated” or “somewhat motivated” and haven't made any changes this year, please choose one response that describes why you haven't made (or haven't tried to make) changes to improve your health? (Please check only one response.)

- Unable to make it a priority at this time.
- I am already overwhelmed with work, home, financial or other personal issues to deal with health.
- I just don't know where to start or what to do.
- I don't feel like I have support or the encouragement to make any changes.
- I'm afraid I would fail at trying to make changes.
- Other _____



Part II: Your resources

Please indicate your agreement with the following statements by checking the appropriate box. You may add a comment to explain your answer.

	Agree	Disagree	Comment
I know what to do to improve my health.	<input type="checkbox"/>	<input type="checkbox"/>	
I need more information about how to improve my health.	<input type="checkbox"/>	<input type="checkbox"/>	
I understand how to eat healthier.	<input type="checkbox"/>	<input type="checkbox"/>	
I can get to grocery stores, farmer’s markets, etc. to buy fruits and vegetables.	<input type="checkbox"/>	<input type="checkbox"/>	
I understand that regular physical activity (walking, biking, taking the stairs, etc.) is important to improve my health.	<input type="checkbox"/>	<input type="checkbox"/>	
There are parks, walking or biking trails, malls, stores, fitness clubs or a “Y” close to me where I could get physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	
I know what to do when I’m feeling stressed out, anxious or down.	<input type="checkbox"/>	<input type="checkbox"/>	
If I was struggling to deal with stress, anxiety or depression , I would seek help.	<input type="checkbox"/>	<input type="checkbox"/>	
I feel that my life is well balanced with work, family, social life, church, etc.	<input type="checkbox"/>	<input type="checkbox"/>	

Part III: Your concerns

Please share other health concerns affecting your life.

Part IV: About you

Your age:

- 18-34
- 35-44
- 45-54
- 55-64
- 65+

Your gender:

- Male
- Female

Your race/ethnicity:

- American Indian/Alaska Native
- Black or African American
- Asian/Pacific Islander
- Hispanic/Latino
- White
- Other _____

*Thank you for participating in our survey.
The results will be used to identify how to support people in making healthy lifestyle changes.*