

## **Stevens Community Medical Center**

### **Community Health Needs Assessment 2016**

Stevens Community Medical Center (SCMC) is a not-for-profit Critical Access Hospital located in west central Minnesota. SCMC has a CAH and clinic located in Morris, Minnesota and one free standing clinic in Starbuck, Minnesota. The organization also has a five resident adult foster care home care licensed facility located in Morris. SCMC provides inpatient, clinic based and outpatient services to a population of about 10,000-15,000 in Stevens County and contiguous counties.

While Minnesota is still far from the most diverse state in the United States, recent trends indicate this may be changing. Minnesota has 86.9% of its population classified as White, and the five counties within the Horizon Health area all have over 90% of their populations classified as White or White not Hispanic. Within the Horizon Community Health Board Region, Stevens County has the highest percentage of Black or African Americans, Asian, Hispanic or Latino Origin, and Native Hawaiian and Other Pacific Islander population compared to the other four counties. These high percentages can most likely be explained by the fact that the University of Minnesota, Morris is located within Stevens County and many students are considered into its population. Some of the largest demographic change seen in the Horizon region is the influx of Hispanic and Latino populations within each County.

Overall, the state of Minnesota and the Horizons Community Health Board Region do not have much difference in age groups. There is a high percentage of 45 to 54 year-olds and a low percentage of 35 to 44 year-olds. When looking at Stevens County, there is a large percentage of the population aged 15 to 24 years; this again is related back to the fact that the University of Minnesota, Morris is located within Stevens County and the students of the University are considered into the population counts. In terms of healthcare and demographics with respect to age, it is important to consider the aging baby boomer population.

People who are uninsured or underinsured typically receive less medical care than their insured counterparts. When they do receive care, it has often been significantly delayed (often due to concerns about cost), and their condition and final outcome is frequently worse than if they had received care right away. In this way, the lack of health insurance creates a financial risk and a burden when care is received. Hospital-based charity care helps uninsured and underinsured Minnesotans, but does not compensate for gaps in health insurance coverage.

As a retrospective to the impact of the 2013 Community Health Needs Assessment, particularly as it relates to Mental Health access, SCMC has increased its number of providers from 9 to 12. In addition, we are adding another therapist and a Child/Adolescent psychiatrist (via telehealth) in October 2017. In terms of client visits, in comparing the month of August 2013 to August 2017, the number of clients seen went from 591 to 801, which is a 35% increase. This is supported by data released by the University of Wisconsin Population Health Institute County Health Rankings which reports a current ratio of 650:1 for mental health providers in Stevens County. This is compared to a ratio of 1621:1 in 2013.

Additional data on the impact SCMC has seen since its last CHNA include those regarding the health impact of poor lifestyle choices. The weight loss program sponsored by our dietician reported a 3.5% average weight loss over the 3-month program in 2016 compared to 3.0% the prior year. As far as the previously mentioned County Health Rankings, however, the adult obesity rate in Stevens County has unfortunately risen from 27% in 2013 to 34% in 2017. The Minnesota average is 27%. On the positive

side, the Rankings reveal a slight decrease in physical inactivity, which moved from 22% to 21%. This is still above the Minnesota average of 19%. Diabetes prevalence remains unchanged at 8% in Stevens County. SCMC will definitely continue its efforts in these areas.

In order to gather local input, SCMC conducted a community conversation on November 28, 2016 as part of the Community Health Needs Assessment. The meeting consisted of 38 individuals from specific stakeholder groups in the community. These people represented organizations in the community and individual interests in the overall health of the community. Representatives included local school officials, public health staff, health care providers, local and county leadership, business representatives, and community leaders. The conversation was specifically designed for discussion and data collection. Tobias Spanier from the University of Minnesota Extension Service facilitated the “World Café” format discussion. The group was divided into smaller discussion groups to answer four specific questions. Each group reported back after each question to help with further discussion and data collection. Individuals rotated tables throughout the evening.

### **Question #1**

**From your perspective, what are the key elements that contribute to an individual’s ability to be healthy?**

Responses:

- Knowledge
- Money
- Outreach
- Education (diet, habits, smoking, exercise)
- Lifestyle
- Genetic knowledge
- Access to Healthy Foods
- Time
- Community that supports healthy living
- Supportive Environment
- Access to healthy food at a lower cost
- Motivation
- Infrastructure- air, clean water, environment.

### **Question #2**

**Of those elements, which do you consider strengths in this community?**

Responses:

- Lifelong Learning
- Community Partnerships and Engagement

- Choices for Medical and Dental providers
- Farmer's Market
- Farm to Table Healthy Foods
- Education, Supportive/Safe Communities
- Outdoor Activity Promotion for families and kids
- Access to Health Care- Public Health, Independent Hospital, Clinics in Chokio/Hancock
- Plethora of Activities
- Facilities that promote health- (parks, RFC, trails)
- Money available to make changes
- Summer outdoor Activities
- Choices for Physical Activity
- Access to Good Health Care and Programs

### Question #3

**What are the areas/services that could be strengthened or added to make this community's population healthier?**

Responses:

- Activities for the Winter
- Communication, New and Creative ways to make community resources known
- Mental Health Access
- Expand Transportation County Wide
- Outreach - welcoming of all services
- Housing- autism/special needs/memory care
- Programs (drug/alcohol abuse, violence prevention, EMS, culturally relevant healthcare)
- Access to healthy affordable foods
- Newcomers club
- Recognize the needs of children/youth as much as adults/seniors
- Translation
- Childcare
- Improve dental access for low income
- Increase health care workforce
- Environmental Protection
- Communicating healthy food options/diets/business offerings of health foods

### Question #4

**If we could look ahead a few years from now, what would you see to be the greatest health risks or conditions that would impact Stevens County? Prioritize them in order from highest to lowest need to address.**

Responses:

1. Table 1- Obesity and mental health/substance abuse
2. Table 2- Mental Health, Disconnected, Chemical impact to Food and Water
3. Table 3- Population Decline will affect mental health availability, healthcare provider access, loss of community services, Aging Population, Obesity, Diabetes
4. Table 4- Loss of Young People/Aging Population, Mental Health, Affordability of Health Care, Isolation Related to Drug/Alcohol/Electronics Addiction
5. Table 5- Communication about Services, Medicine/Healthcare/Insurance Costs, Housing for Aging, Transportation, Specialists (geriatric/peds/OB/GYN), Mental Health Providers
6. Table 6- Mental Health, Geriatric Services (medical/financial/transportation/housing), Lack of Health Care Providers for Rural Areas
7. Table 7- Health Care Workforce, Mental Health, Lifestyle choices, Aging Population Needs, Education/Communication

**COMMUNITY CONVERSATION PARTICIPANTS 2016 (38 IN ATTENDANCE)**

<u>First Name</u>	<u>Last Name</u>	<u>Organization</u>
Paula	Viker	Administrator West Wind Village
Ryan	Sleiter	Bank of the West
David	Paul	Board of Directors/Agriculture
Kerri	Barnstuble	Center for Small Towns
Toni	Hughs	Child Care Providers Association
Jeanne	Ennen	County Commissioner/Donnelly
Larry	Ringgenberg	Dacotah Bank
Karla	Sundheim	Director Behavioral Medicine
Tony	Reimers	Director of Community Education
Tara	Ludwig	Director of Golden Horizons
Liberty	Sleiter	Director Stevens County Social Services
Diane	Strobel	ECFE
Jacob	Just	FCCLA/ student at MAHS
Lynn	Nelson	Hancock School
Kelsey	Peterson	Horizon Public Health
Marcia	Schroeder	Horizon Public Health
Sandy	Tubbs	Horizon Public Health Director - Table Host
Jodi	DeCamp	Housing HRA
Sheldon	Giese	Mayor of Morris
Karen	Folkman	Morris Area School
Alyssa	Thooft	Registered Dietician
Wayne	Morford	RFC
Matt	Konz	Riverview Dairy
Benjamin and Vanessa	Hernandez Sandoval	Riverview Dairy Hispanic Community
Sergio	Vazquez	Riverview Dairy Hispanic Community
Doug	Ehlers	Riverwood Bank
Jason	Breuer	SCMC President/CEO
Joan	Spaeth	SCMC Community Outreach Coordinator
Kerrie	Erickson	SCMC Vice President of Finance
Brent	Barnstuble	SCMC Family Practice Physician
Cheryl	Kuhns	Stevens County Economic Improvement
Robi	Bowman	SCMC Social Worker
Sam	Deseth	SCMC Director of Business Office
Rose	Nielsen	SCMC Clinical Informatics Nurse
Nikki	Raths	SCMC Director of Courage Cottage
Selena	Reed	SCMC Clinic Coordinator
Marty	Ohren	Thrifty White
Sandy	Olson-Loy	UMM staff

**Invited but unable to attend:**

Randy	Koehl	Ag Representative
Barb	Tomoson	Alberta community
Amanda	Kells	C-A School/Special Education
Kay	Grossman	Chokio community/Chokio Review
Scott	Arndt	HR Superior Industries
Lauren	Hauger	Pastor Federated Church
Jason	Dingman	Stevens County Sheriff
Suzie	Eklund	SCMC Director of Quality