



# Community Health Needs Assessment



**Mayo Clinic Health System – St. James**

**November 15, 2013**



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# Executive Summary

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## ***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 24 hospitals in communities throughout the United States, including Arizona, Florida, Georgia, Minnesota, Wisconsin and Iowa.

A significant benefit that Mayo Clinic provides to all communities, local to global, is 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 to patient care quickly. Through 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. In addition, 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 in St. James provides a 13-bed critical-access hospital located in St. James, Minn. and has family medicine clinics in St. James and Trimont.

St. James is one of 17 hospitals within Mayo Clinic Health System (MCHS) and is part of MCHS' Southwest Minnesota region, which includes hospitals in Fairmont, Mankato, New Prague, Springfield, St. James and Waseca.

Mayo Clinic Health System in St. James supports the community through inpatient and outpatient services and offers:

- Inpatient acute services
- Emergency medicine
- Outpatient surgery and medical care
- Inpatient transitional care, which provides a step between hospital and home
- Urgent care
- Outpatient services in audiology, behavioral health, cardiac rehabilitation, cardiology, diabetes education, family medicine, gastroenterology, general surgery, hospice care, laboratory testing, medical specialty assessment and treatment, nutrition, obstetrics shared-care program, ophthalmology, orthopedics, otolaryngology, rehabilitation, speech therapy and urology.



Mayo Clinic Health System is a family of clinics, hospitals and health care facilities serving more than 70 communities in Iowa, Georgia, Wisconsin and Minnesota. It includes more than 900 providers and serves more than half a million patients each year. As part of Mayo Clinic — a leading caregiver with nearly 150 years of patient care, research and medical education expertise — the organization provides a full spectrum of health care options to local neighborhoods, ranging from primary to highly specialized care. Mayo Clinic Health System is recognized as one of the most successful regional health care systems in the United States.

Through the power of collaboration Mayo Clinic Health System provides patients with access to cutting-edge research, technology and resources that come from Mayo Clinic. Our communities have the peace of mind that their neighbors are working together around the clock on their behalf.

Mayo Clinic Health 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. We call this power "the Mayo Effect."

### ***Summary of Community Health Needs Assessment:***

For this Community Health Needs Assessment (CHNA), Mayo Clinic Health System in St. James partnered with local community leaders to engage with all available stakeholder groups in the community, review publicly available health-related data and survey individuals. The results of the assessment are being used to guide Mayo Clinic Health System in St. James' strategies and partnerships to maximize community health and wellness, patient care and population health management.

Mayo Clinic Health System is committed to studying and responding to health needs in the St. James area through a community-wide approach. The St. James CHNA project aims to leverage and strengthen existing relationships among health care providers, community services agencies, organizations and volunteers in new ways to understand and respond to local health needs, as well as invite renewed awareness and engagement with the community at large.

The St. James CHNA process identified and prioritized the following health needs:

1. Chronic disease
2. Access to health care

The Mayo Clinic Health System in St. James community assessment process was led by an internal MCHS committee comprised of representatives from hospital leadership, public affairs, compliance and fiscal services.

This committee viewed the CHNA as an opportunity to better understand known health care needs and, if possible, identify emerging needs within each of the six Mayo Clinic Health System communities



in the Southwest Minnesota region — Fairmont, Mankato, New Prague, Springfield, St. James and Waseca.

The committee also viewed this as an opportunity to begin assessing key elements of community receptivity to changes in care delivery, in particular the Mayo Clinic Health System objectives related to future care delivery, which are outlined by the Institute for Healthcare Improvement (IHI) Triple Aim Goal of:

1. Improving the patient experience of care, including quality and satisfaction
2. Improving the health of populations
3. Reducing the per capita cost of health care



# Our Community

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## **Overview:**

Mayo Clinic Health System in St. James serves communities in Watonwan County and portions of Blue Earth, Brown, Cottonwood and Martin counties in southwestern Minnesota. The main medical campus is in St. James and consists of a family medicine clinic and critical-access hospital, which is one of two hospitals in Watonwan County.



## **Demographics**

According to the 2010 U.S. Census:

### **Population**

St. James' population was 4,605, while Watonwan County's was 11,211.

Watonwan County's population decreased by 0.2 percent from 2010 to 2012, compared to a 1.4 percent increase in Minnesota's during the same period.

### **Age**

Watonwan County had 19 percent of its population over the age of 65, higher than the 13.6 percent of Minnesota's population in that age group.

### **Gender**

The ratio of males and females in Watonwan County was 50/50, which is similar to the Minnesota ratio of 49.7/50.3.



## **Racial demographics**

According to the U.S. Census Bureau:

- Watonwan County's population was 95.7 percent Caucasian, 1.2 percent African-American, 1.1 percent American Indian or Alaska Native, 1.1 percent Asian and 0.9 percent Other.
- Minnesota's population was 86.5 percent Caucasian, 5.5 percent African-American, 1.3 percent American Indian or Alaska Native, 4.4 percent Asian and 2.3 percent Other.

Ethnicity, which is measured separately from race, showed that 23.77 percent of the people in St. James identified themselves as Hispanic or Latino.

## **Economic Conditions**

According to County Health Rankings:

### **Single-parent households**

The percentage of children living in a single-parent household in Watonwan County was 34 percent, compared to 27 percent in Minnesota.

### **Access to healthy foods**

The percentage of low income families with limited access to healthy foods in Watonwan County was 1 percent, lower than the 6 percent of Minnesota's low-income families.

### **Employment**

The unemployment rate in Watonwan County was 6.8 percent, about the same as Minnesota's 6.4 percent.

### **Educational attainment**

Watonwan County had a high school graduation rate of 81 percent, higher than Minnesota's 77 percent.

### **Income**

According to the U.S. Census Bureau:

The median household income in Watonwan County was \$49,307, lower than the Minnesota median of \$58,476.

### **Poverty**

According to the U.S. Department of Agriculture:

The percentage of people in Watonwan County living in poverty was 11.8 percent, which was the same for Minnesota overall.

The percentage of children under 18 living in poverty in Watonwan County was 17.6 percent, slightly higher than Minnesota's percentage of 15.3



## **Health behaviors**

According to County Health Rankings:

### **Adult smoking**

The percentage of adults who smoke in Watonwan County was 12 percent, while Minnesota's percentage was 17.

### **Obesity**

The percentage of adults who are obese in Watonwan County was 28 percent, about the same as Minnesota's obesity rate of 26 percent.

### **Physical activity**

The percentage of residents in Watonwan County reporting doing "no physical activity" was 24 percent, which is higher than the 19 percent reported for Minnesota as a whole.

## **Clinical care**

According to County Health Rankings:

### **Health Insurance Coverage**

Of those under 65 in Watonwan County, 16 percent had no health insurance, while 10 percent of Minnesotans in that age group had no insurance.

### **Primary care physicians**

There were 1,871 people per primary care physician in Watonwan County, compared with 1,140 per physician in Minnesota.

### **Dentists**

There were 2,844 people per dentist in Watonwan County, with 1,660 in Minnesota.

### **Diabetic Screening**

The percentage of diabetics screened in the past year in Watonwan County was 85 percent, about the same as Minnesota's 88 percent.

## ***Other Available Resources***

Within the service area of Mayo Clinic Health System in St. James, there are other resources available to meet the identified community health needs, including another hospital in Watonwan County, Madelia Community Hospital.

### **Other health care-related organizations**

**Chiropractic**

St. James Family Chiropractic - St. James

David J. Haler, DC - St. James

James Hermoe, DC – St. James

**Dentistry**

St. James Family Dentistry – St. James

Steve Pitcher, DDS – St. James

**Fitness/exercise/wellness**

Anytime Fitness – St. James

**Food shelf**

Watsonwan County Food Shelf – St. James

Mountain Lake Community Food Shelf – Mountain Lake

**Free/reduced clinic**

Sage Screening Programs – St. James area with multiple locations

**Long-term care/memory care/senior care**

Trimont Health Care Center – Trimont

Good Samaritan Society – St. James

**Medical clinic**

Madelia Community Hospital and Clinic – St. James

Sanford Health Mountain Lake Clinic – Mountain Lake

**Outpatient physical therapy**

St. James Rehabilitation Services – St. James



# Assessing the Needs of the Community

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## **Overview:**

Mayo Clinic Health System in St. James identified and prioritized community health needs through a comprehensive process that included input from local community and organization leaders, public health officials, hospital leadership and other community stakeholders.

## **Community Input:**

Mayo Clinic Health System in St. James partnered with the City of St. James, the Watonwan Department of Public Health, St. James School District and local community leaders in health care, finance, agriculture and construction, who were also members of the hospital's board.

Representatives of the community were essential in driving the identification and prioritization of community health needs. They represented a broad range of the community including children, adults, seniors, families and underserved populations. These representatives were asked to meet in order to share information and discuss community health needs perceptions.

## **Public Health Department Input:**

The Watonwan County Health Department provided valuable information regarding community health needs and a unique perspective for underserved populations. This public health department represents all residents of Watonwan County, with several programs directed at low- to moderate-income individuals and families and the Latino community. Services provided include W.I.C., family health, family planning and Latino health.

## **Interviews and surveys specific to underserved residents**

An additional interview and survey were conducted by Mayo Clinic Health System October 3, 2013, with Rich Collins, Watonwan County director of public health, to research the community health needs for underserved residents.

Survey questions included:

1. What specific groups of people or demographic does your organization serve?
2. Based on your experience, what are the top three quality of life concerns for those whom you serve?
3. In your opinion, what are the top three health concerns of those whom you serve?
4. In your opinion, what could our community do to improve concerns you identified in #2 and #3?
5. In your opinion, what barriers exist in our community that prevent those whom you serve from being as healthy as they could be?



## Collaborating organizations

The following organizations participated in the CHNA:

When	Who	People or Demographic Served
10/30/2012 12/4/2012	<b>Joe McCabe</b> City of St. James City Administrator	All residents and organizations in St. James and local government
10/30/2012 12/4/2012	<b>Gary Sturm</b> City of St. James Mayor	All residents and organizations in St. James and local government
10/30/2012 12/4/2012	<b>Jason Monnens</b> City of St. James Fire Chief	All residents and organizations in St. James and local government
10/30/2012 12/4/2012	<b>Lori Nusbaum</b> City of St. James Chamber Director	All residents and organizations in St. James and local government
10/30/2012 12/4/2012	<b>Jeannie Dexheimer</b> City of St. James City Ambulance Director	All residents and organizations in St. James and local government
10/30/2012 12/4/2012	<b>Sue Harris</b> City of St. James Community Education Director	All residents and organizations in St. James and local government
10/30/2012 12/4/2012 10/3/2013	<b>Rich Collins</b> Watonwan County Public Health Director	All residents in Watonwan, County including underserved populations
10/30/2012 12/4/2012	<b>Sue Mohr</b> Watonwan County Public Health Retired Nurse	All residents in Watonwan County, including underserved populations
10/30/2012 12/4/2012	<b>Tammy Stevens</b> St. James Public Schools School Board Member	School-aged children, teens and their families
10/30/2012 12/4/2012	<b>Luisa Trapero</b> St. James Public Schools School Board Member	School-aged children, teens and their families
10/30/2012 12/4/2012	<b>Luisa Trapero</b> St. James Public Schools School Board Member	School-aged children, teens and their families and the Hispanic community



10/30/2012	<b>Karla Beck</b>	School-aged children and their families
12/4/2012	St. James Public Schools Elementary School Principal	
10/30/2012	<b>Jim Branstad</b>	Business community and its employees
12/4/2012	Financial Planner	
10/30/2012	<b>Karen Bottem</b>	Business community and its employees
12/4/2012	Agriculture	
10/30/2012	<b>Phil Buhler</b>	Business community and its employees
12/4/2012	Construction	
10/30/2012	<b>Bob Harder</b>	Business community and its employees
12/4/2012	Banking	
10/30/2012	<b>Steve Jeppson</b>	All residents in St. James needing eye care
12/4/2012	Optometrist	

### ***Process and Methods:***

In 2012, Mayo Clinic Health System started planning for the community health needs assessment. Plans were developed to facilitate stakeholder engagement, conduct and assemble research, and prioritize health needs.

The processes and methods used to conduct the CHNA involved working with community representatives and conducting primary and secondary data/research.

The community representatives met to discuss the reason and objectives of the CHNA. At the meetings, the hospital service area was defined by counties; local data and trends were shared by the county public health representative and hospital administrator; county, state and federal data were reviewed; and time was allotted for questions and answers.

### **Community health survey**

At the first meeting of community representatives, a survey tool (questionnaire) was given to everyone. Representatives took a minimum of 10 surveys for distribution throughout the community, in order to reach individuals who represent a wide range of community members, including underserved residents in the defined service area.

The survey contained questions regarding perceived quality of health care in the community, barriers to health care, use of health care, health care needs and demographic information. The survey was completed between October 30, 2012 and December 4, 2012. A total of 200 were distributed; 108 people in the hospital's service area responded, representing a 54 percent return rate.



## Secondary data/research

Secondary research consisted of gathering publicly available health-related data for the hospital's service area. Whenever possible, data was collected at the county level. Sub-county level data was not a focus of this research, but is provided, if available. This data was used to help determine and prioritize community health needs. Secondary data/research was accessed between August 2012 and September 2013.

Publicly available data included:

1. Socio-economic
2. Poverty rates
3. Health behaviors
4. Clinical care
5. Demographics
6. Obesity rates
7. Insurance coverage

### Data used in the community health needs assessment include:

Centers for Disease Control – Obesity Prevalence  
[cdc.gov/diabetes/atlas/countydata/obprev/data\\_Minnesota.pdf](http://cdc.gov/diabetes/atlas/countydata/obprev/data_Minnesota.pdf)

County Health Rankings  
[countyhealthrankings.org](http://countyhealthrankings.org), accessed 8/30/2013

Demographic Trends and Social Service Landscape  
[demography.state.mn.us/documents/SusanBrower\\_MSSA.pdf](http://demography.state.mn.us/documents/SusanBrower_MSSA.pdf)

Minnesota Community Measurement on Chronic Disease Management  
[rwjf.org/content/dam/web-assets/2008/06/mn-community-measurement--mncm-](http://rwjf.org/content/dam/web-assets/2008/06/mn-community-measurement--mncm-)

Population and Household Counts from the 2010 Census – Prepared by the Minnesota State Demographic Center  
[demography.state.mn.us/CityProfiles2010/cty015yr2010.pdf](http://demography.state.mn.us/CityProfiles2010/cty015yr2010.pdf)

State of Minnesota: State Demographers Office  
[demography.state.mn.us/index.html](http://demography.state.mn.us/index.html)

U.S. Census 2010 Population Finder  
[census.gov/popfinder/?fl=27:2761816:27015:27033:27127](http://census.gov/popfinder/?fl=27:2761816:27015:27033:27127)

U.S. Census Bureau  
[quickfacts.census.gov](http://quickfacts.census.gov), accessed 8/30/2013



U.S. Department of Agriculture: Economic Research Service

[ers.usda.gov/data-products/county-level-data-sets/poverty.aspx#UiDYsD-tnTo](http://ers.usda.gov/data-products/county-level-data-sets/poverty.aspx#UiDYsD-tnTo), accessed 8/30/2013

### **Information gaps**

Some gaps in the information may lead to an incomplete assessment of community health needs.

Gaps identified in this process include:

1. Total cost of care for our population served
2. Detailed data on all culturally diverse populations served, since much publicly available data is collated into general population information
3. Market use data for outpatient services

### **Analytical methods**

Mayo Clinic Health System compiled and analyzed data from the community health survey to identify community health needs.

During the December 4, 2012, meeting, secondary data/research and input from the county public health director also were reviewed by Mayo Clinic Health System in order to identify community health needs perceived by community representatives.

A final interview and survey with the county public health director was conducted October 3, 2013, to identify community health needs of all residents, including underserved populations.

### **Third-party assistance**

No third parties were contracted with or used to assist in conducting the CHNA.



# Addressing the Needs of the Community

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## **Overview:**

After reviewing and analyzing primary and secondary data collected from the community, Mayo Clinic Health System prioritized the community's health needs.

## **Prioritization Process:**

A second meeting of community representatives was held December 4, 2012. The objective was to review survey results, analyze data and identify community health care needs. Three questions were asked of the community representatives:

1. What can be done to improve the health and quality of life in our community?
2. What non-traditional methods (technology, team-based care, etc.) can we implement to improve access to health care in our community?
3. As health care premiums, co-pays, and deductibles rise, what health and wellness strategies or programs should we offer to keep our community healthy?

After the community representatives identified community health needs, the following question drove the prioritization process.

1. Of the community health needs identified, which would provide the greatest benefit to our community?

Mayo Clinic Health System then reviewed all of the available data and community input in order to prioritize the community's health needs.

## **Prioritized Community Health Needs:**

1. Chronic disease
2. Access to health care