



Community Health Needs Assessment



Mayo Clinic Health System – Waseca

November 15, 2013



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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 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 Waseca provides a 25-bed critical access hospital located in Waseca, Minn. It also has family medicine clinics in Janesville, Waseca and Waterville.

Waseca is one of 17 hospitals within Mayo Clinic Health System (MCHS). It is part of MCHS' Southwest Minnesota region, which includes hospitals in Fairmont, Mankato, New Prague, Springfield, St. James and Waseca. MCHS in Waseca supports the community through inpatient and outpatient services and offers:

- Emergency medicine
- Inpatient services, including transitional care
- Outpatient family medicine and multi-specialty clinic
- Outpatient surgery
- Urgent care
- Outpatient services in audiology, behavioral health, cardiac resting and rehabilitation, diabetes education, health promotion, laboratory testing, nutritional counseling, radiology and imaging, rehabilitation therapies, speech pathology and women's health services.

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, MCHS 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 local 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 Waseca partnered with local 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 Waseca's 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 Waseca area through a community-wide approach. The Waseca 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 Waseca CHNA process identified and prioritized the following health needs:

1. Chronic disease
2. Access to health care

The Mayo Clinic Health System in Waseca 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 community health needs assessment 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:

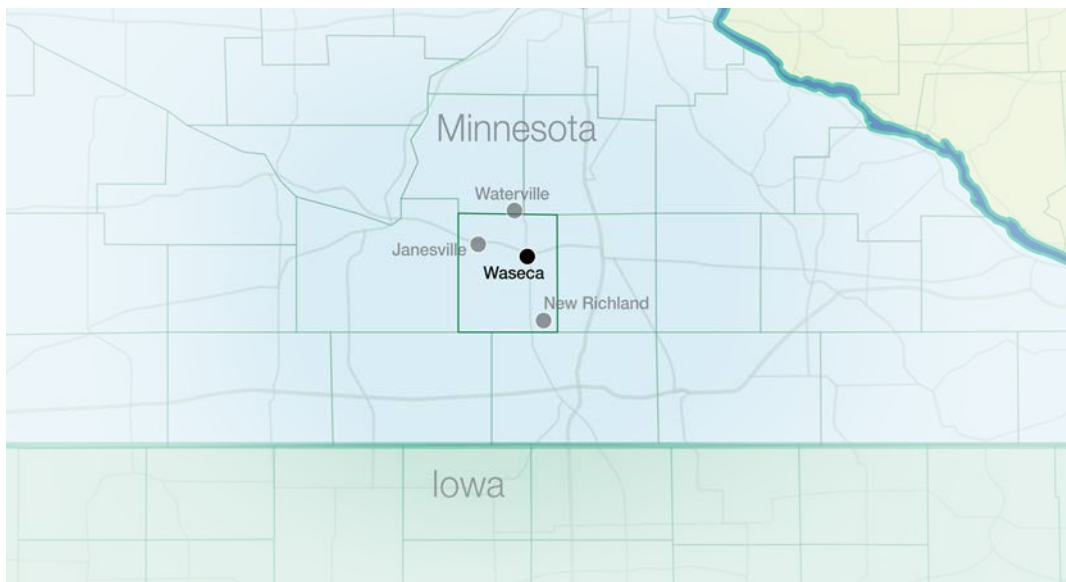
1. Improving the patient experience of care, including quality and satisfaction
2. Improving the health of populations
3. Reducing the per capita cost of health care



Our Community

Overview:

Mayo Clinic Health System in Waseca serves communities in Waseca County and portions of Blue Earth, Le Sueur and Steele Counties in southern Minnesota. The main medical campus is in Waseca and consists of multi-specialty clinic and critical access hospital, which is the only hospital in Waseca County.



Description

According to the 2010 U.S. Census:

Population

The City of Waseca's population was 9,410. Waseca County's population was 19,136. Waseca County increased its population by 0.5 percent from 2010 to 2012. Minnesota's population increased 1.4 percent during the same period.

Age

Waseca County had 15.3 percent of its population over the age of 65. In comparison, 13.6 percent of Minnesota's population is over the age of 65.

Gender

The ratio of males and females in Waseca County was 47.2/52.8. This is similar to the Minnesota ratio of 49.7/50.3.



Racial Demographics

According to the U.S. Census Bureau:

- Waseca County's population was 94.7 percent Caucasian, 2.4 percent African-American, 0.9 percent American Indian or Alaska Native, 0.7 percent Asian and 1.3 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 5.8 percent of the people in Waseca County 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 Waseca County was 25 percent, which compares with 27 percent in Minnesota.

Access to healthy foods

The percentage of low-income families with limited access to healthy foods in Waseca County was 7 percent. In Minnesota, that percentage is measured at 6 percent.

Employment

The unemployment rate in Waseca County was 6.3 percent, which is almost the same as Minnesota's 6.4 percent.

Educational attainment

Waseca County had a high school graduation rate of 88 percent, which is higher than that of 77 percent in Minnesota.

Income

According to the U.S. Census Bureau:

The median household income in Waseca County was \$52,357, lower than the state's median income of \$58,476.

Poverty

According to the U.S. Department of Agriculture:

The percentage of people in Waseca County living in poverty was 9.9 percent, lower than the state's percentage of 11.8.

The percentage of children under 18 living in poverty in Waseca County was 13.5 percent, compared to 15.3 percent of children across the state.



Health Behaviors

According to County Health Rankings:

Adult smoking

The percentage of adults who smoke in Waseca County was 14 percent, which is slightly lower than the state's 17 percent of adult smokers.

Obesity

The percentage of adults who are obese in Waseca County was 31 percent, higher than the 26 percent of obese adults in the state.

Physical activity

The percentage of residents in Waseca County reporting doing "no physical activity" was 24 percent, compared to 19 percent of Minnesota residents.

Clinical Care

According to County Health Rankings:

Health insurance coverage

Of those under 65 in Waseca County, 9 percent had no health insurance, while 10 percent of the same group across Minnesota had no insurance.

Primary care physicians

There were 1,914 people per primary care physician in Waseca County, compared to 1,140 people per physician in Minnesota.

Dentists

There were 3,414 people per dentist in Waseca County and 1,660 in Minnesota.

Diabetic screening

The percentage of diabetics screened in the past year in Waseca County was 76 percent, compared to 88 percent in Minnesota.

Other Available Resources

Within the service area of Mayo Clinic Health System in Waseca, there are other resources available to meet the identified community health needs.

Chiropractic

Beschnett & Harvey Chiropractic	Waseca
Arnfelt Chiropractic Center	Waseca
Waseca Family Chiropractic Center	Waseca



Dental

Main Street Dental Clinic	New Richland
Waseca Family Dentistry	Waseca
Alpha Orthodontics	Waseca
Kolpin & Chawra: Rodney A. Kolpin, DDS	Waseca
Prairie Dental Arts	Waseca
Bryan Anderson, DDS	Waseca

Fitness/exercise/wellness

Curves	Waseca
Workout Center Inc.	Waseca
Brickhouse Fitness	Waseca
Snap Fitness	Waseca
24 Hour Workout Center, Inc.	Waseca
Mayo Clinic Health System's exercise facility	Waseca

Food shelf

Waseca Area Neighborhood Service Center Food Shelf	Waseca
Janesville Community Food Shelf	Janesville
We Share Food Shelf	Elysian

Free/reduced clinic

Health Finders Collaborative - Faribault	Faribault
Sage Screening Program	Waseca and various locations

Long-term care/memory care/senior care

Good Samaritan Society	Waterville
Traditions of Waterville	Waterville
Lake Shore Inn Nursing Home	Waseca
Colony Court	Waseca
New Richland Care Center	New Richland



Assessing the Needs of the Community

Overview

Mayo Clinic Health System in Waseca 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 Waseca partnered with the City of Waseca, the Waseca County Health Department, the Waseca School District and Waseca Senior Center to gather community input.

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 need perceptions.

Public Health Department Input

The Waseca County Health Department, which represents all residents of the county, provided valuable information regarding community health needs and a unique perspective for underserved populations. It provides significant services to low- and moderate-income individuals and families. Services include home- and long-term-care assessments for the elderly and disabled, family planning, maternal and child care and environmental and emergency preparedness.

Interviews and Surveys Specific to Underserved Residents

An additional interview and survey were conducted by MCHS on October 2, 2013, with Amy Roenbach, Waseca County director of public health. The purpose was 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 on the Community Health Needs Assessment:

When	Who	People or Demographic Served
10/22/2012 12/10/2012	Roy Srp City of Waseca Mayor	All residents and organizations in Waseca, Minn., and local government
10/22/2012 12/10/2012	Crystal Prentice City of Waseca City Manager	All residents and organizations in Waseca, Minn., and local government
10/22/2012 12/10/2012	Penny Vought City of Waseca Police Chief	All residents and organizations in Waseca, Minn., and local government
10/22/2012 12/10/2012	Mike Hintz Waseca County Commissioner	All residents and organizations in Waseca County and county government
10/22/2012 12/10/2012	Cheri Lewer Waseca County Director of Public Health	All residents of Waseca County including underserved populations
10/02/2013 Interview and survey	Amy Roenbach Waseca County Director of Public Health	All residents of Waseca County including underserved populations
10/22/2012 12/10/2012	Trevor Kanewischer Waseca County Sheriff	All residents and organizations in Waseca County and county government
10/22/2012 12/10/2012	Brian Dietz Waseca Public Schools Superintendent	School-aged children, teens and their families; adult learners
10/22/2012 12/10/2012	Cori Sandle Waseca Public Schools Director of Community Education	School-aged children, teens and their families; adult learners
10/22/2012 12/10/2012	Lela Jones Waseca Senior Center Director	School-aged children, teens and their families; adult learners
10/22/2012 12/10/2012	Roger Haug Grace Lutheran Church Ministerial Association Pastor	All ages, backgrounds and economic classes
10/22/2012 12/10/2012	Kim Foels Waseca Area Chamber of Commerce Director	Business community and its employees
10/22/2012 12/10/2012	Rob Helms Brown Printing	Business community and its employees
10/22/2012 12/10/2012	Mark Denn Itron	Business community and its employees
10/22/2012 12/10/2012	Linda Grant Healing Hands	Business community and its employees



10/22/2012	Lois Lenz	Business community and its employees
12/10/2012	Lenz Landscaping	

Process and Methods

In 2012, Mayo Clinic Health System started planning for the community health needs assessment (CHNA). 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 to distribute 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 22 and December 10, 2012. A total of 160 were distributed, and 125 people in the hospital's service area responded, representing a 78 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 were 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

County Health Rankings
countyhealthrankings.org, accessed 8/30/2013

Demographic Trends and Social Service Landscape
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-

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

State of Minnesota: State Demographers Office
demography.state.mn.us/index.html

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

U.S. Census Bureau
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, 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
4. Limited access to indigent or transient population health information
5. Emergency department use factors



Analytical methods

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

During the October 15, 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 2, 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 community health needs assessment.



Addressing the Needs of the Community

Overview:

After reviewing and analyzing primary and secondary data collected from the community, MCHS prioritized the community's health needs.

Prioritization Process:

A second meeting of community representatives was held December 10, 2012. The objective was to review survey results, analyze data and identify community health care needs. Three questions were asked of the community advisory group members:

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 advisory group identified the 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?

MCHS 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