

# Community Health Needs Assessment and Implementation Plan

## 2020–2022

## Executive Summary

*The mission of Allina Health is to serve our communities by providing exceptional care as we prevent illness, restore health and provide comfort to all who entrust us with their care.*

### INTRODUCTION

New Ulm Medical Center (NUMC) is part of Allina Health, a nonprofit health system of clinics, hospitals and other health and wellness services, providing care throughout Minnesota and western Wisconsin. Every three years, NUMC conducts a federally-required Community Health Needs Assessment (CHNA) to examine health in the communities it serves, identify health priorities and develop strategies and action plans to pursue them. The hospitals conduct their CHNA in partnership with local public health departments, other hospitals and health systems, community organizations and residents.

### Hospital and Community Description

NUMC operates 45 inpatient beds. Annually, the hospital serves 25,000 patients. The hospital's primary service area (and focus of the CHNA) is Brown County, a rural community in southern Minnesota. NUMC's primary care clinics serve residents in a 25-mile radius of New Ulm, including Sleepy Eye, Searles, Courtland, Nicollet, Klossner, Lafayette, Hanska and Winthrop.

According to the [U.S. Census Bureau](#), 25,243 residents live in the 618-square mile area occupied by Brown County. The median age in Brown County is 42.5 years. Approximately 22 percent of the total population is under age 18 and 20 percent is age 65 years or older. Just over 5 percent of area residents are people of color: Hispanic or Latino (4.1 percent), Asian (0.7 percent) or Black (0.3 percent). The median household income was \$55,764 with 8.1 percent of residents living in households with income below the Federal Poverty Level (U.S. Census Bureau, 2013–2017 American Community Survey 5-Year Estimates).

### COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

NUMC collaborated with Brown County Public Health to complete its CHNA. The group used the Mobilizing for Action through Planning and Partnerships (MAPP) model, a community-driven strategic planning process for improving community health. The model has six phases: Organizing, Visioning, The Four Assessments, Identifying Strategic Issues, Formulating Goals and Strategies, and the Action Cycle. For the purposes of this report, the phases are condensed to data review and prioritization, community input and implementation plan. The process began in March 2018 and was completed in August 2019.

## EVALUATION OF 2017–2019 CHNA IMPLEMENTATION PLAN

Between 2017 and 2019, NUMC conducted activities to pursue the health priorities identified in its 2016 CHNA: increase access to physical activity and healthful foods, reduce the burden of mental health conditions and increase awareness of addiction and use of legal and illegal substances.

With community partners and as part of the Heart of New Ulm, NUMC helped to integrate health programming in schools, worksites and community organizations, engaged employees in volunteer opportunities and made charitable contributions to community organizations. Highlights include:

- Reaching 160 employees from 43 worksites with quarterly workplace wellness sessions.
- Successfully advocating for the Park and Recreation Commission's 100% Healthy Vending policy that went into effect in 2018.
- Awarding \$59,200 in Neighborhood Health Connection™ grants to 17 organizations in NUMC's region.
- Expanding the smoke-free zone at the Brown County Fair.

A complete description of 2017–2019 achievements is available online at

<https://www.allinahealth.org/about-us/community-involvement/need-assessments>.

### Data Review and Prioritization

A MAPP Committee comprised of community members and representatives from 15 agencies created a shared vision for health in the Brown County community, "Communities achieving improved health and quality of life by mobilizing partnerships and taking strategic action." Next, participants reviewed Allina Health patient data and state and local data available for Brown County such as the Minnesota Student Survey, 2016 Brown County Community Health Survey, the New Ulm Housing Study and secondary public health data available through the Minnesota Department of Health's Center for Health Statistics (MCHS)

website. These data included demographics, social and economic factors, health behaviors, prevalence of health conditions and health care access.

To prioritize the health issues, the group used the Hanlon Method for Health Issue Prioritization and the PEARL test. Through these processes, the committee selected three health priorities for the 2020–2022 CHNA cycle:

- **Obesity, including healthy eating and active living**
- **Substance use, including tobacco use**
- **Mental health**

### Community Input

To gain community members' perspectives on these priorities and ideas for addressing them, NUMC solicited feedback from additional stakeholders and community members. It hosted two community dialogues in October 2018 that were attended by 32 people representing 18 Brown County organizations.

Participants shared that winter weather, busy schedules, lack of child care and transportation were barriers to physical activity and healthy eating. They indicated that social media, availability of e-cigarettes and potential legalization of marijuana contribute to substance use. Mental health conditions are related to social isolation and shortages in mental health providers.

### Implementation Plan

Based on the community input, NUMC developed an implementation plan that outlines the strategies and activities it will pursue to address its health priorities. To make progress in achieving health equity among residents, NUMC will prioritize partnerships and activities that engage populations that are historically underserved.

## 2020–2022 IMPLEMENTATION PLAN

### Mental Health

**Goal 1:** Increase resilience and healthy coping.  
**Strategies**

- Increase resilience among adults and school-age youth.
- Reduce barriers to mental health for adolescents.
- Support grassroots community-based efforts around resilience, including social connectedness.

Activities will include offering [Change to Chill™](#) to additional schools; enhancing the mental health components of [Health Powered Kids™](#); creating an online mental health resource directory; providing ACES and QPR; making charitable contributions to community efforts to increase social connectedness and resilience; and continuing the Mental Health and Wellness Action Team.

**Goal 2:** Reduce barriers to mental health and substance use services.

#### Strategies

- Decrease stigma associated with seeking help for mental health and substance use conditions, with a particular focus on the experiences of racial and ethnic minorities and other historically underserved communities.
- Increase access to mental health services.

Activities will include offering [Change to Chill™](#) stigma-elimination programming; providing educational programs during Mental Health Awareness months and advocating to increase mental health services.

### Obesity, Including Healthy Eating and Active Living

**Goal:** Reduce barriers to active living and healthy eating.

#### Strategies

- Improve bicycle and pedestrian safety in New Ulm.
- Increase access to healthy food.
- Increase knowledge and skills related to healthy eating and active living.

Activities will include providing financial and in-kind support for free Family Fitness Nights in parks;

implementing recommendations of the Walkable Livable Communities Report and the Safe Routes to School Plan; providing financial support and volunteers to community food access projects; making Health Powered Kids website tools available; and implementing Food Rx programs.

### Substance Use, Including Tobacco

**Goal:** Decrease addiction rates and use of legal and illegal substances.

#### Strategies

- Reduce barriers to substance use services for adolescents.
- Reduce access to alcohol and tobacco.
- Improve resilience and refusal skills.

Activities will include supporting ordinances to reduce youth access to substances; creating an Addiction and Risky Use of Substances Action Team; implementing tobacco-free parks policies; increasing the number of worksites with tobacco-free grounds policies; providing education on e-cigarettes.

### Social Determinants of Health

Across Allina Health's service area, hospitals indicated that addressing social determinants of health is essential to the success of improving identified health priorities. In response, Allina Health identified a systemwide plan for addressing social determinants of health; NUMC will participate in the plan's implementation.

**Goal:** Reduce social barriers to health.

#### Strategies

- Establish a sustainable, effective model to systematically identify and support patients in addressing health-related social needs.
- Establish a sustainable network of trusted community organizations that can support patients with these needs.
- Increase policy and advocacy efforts to improve social conditions related to health.

Activities will include supporting implementation and evaluation of the Accountable Health Communities model and transitioning to a modified version; identifying community partners and a tracked referral process that connects patients to

them; and supporting coalitions aimed at improving access to transportation, housing and food.

### Community Partners

SHIP, NAMI ECFE, CAST, day cares, food shelves, Brown County Public Health, Heart of New Ulm, New Ulm Park and Recreation and Free Bikes4Kids.

### Resources

To fulfill the implementation plan, NUMC will contribute financial and in-kind donations such as personnel, charitable donations and Allina Health's systemwide programs. It will also encourage staff to volunteer with local organizations.

### Evaluation Plans

NUMC will monitor its progress on the implementation plan by tracking process measures such as number of programs delivered and people served, staff time dedicated and dollars contributed. Allina Health will also evaluate systemwide programs to assess their effects on intermediate outcomes (e.g., eating and physical activity), which evidence shows are likely to lead to improvement on population health measures such as obesity. To assess long-term effects, Allina Health will monitor population-level indicators related to New Ulm's health priorities and systemwide priorities.

## CONCLUSION

Through the CHNA, NUMC used data and community input to identify health priorities it will pursue in 2020–2022 with its own strategies and activities and the programs and initiatives of Allina Health.

The full report for the NUMC 2020–2022 Community Health Needs Assessment is available on the Allina Health website:

<https://www.allinahealth.org/about-us/community-involvement/need-assessments>.

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For questions about this plan or implementation progress, please contact: [Jen Maurer](#), Community Engagement Lead for Southwest Regional region or [Christy Dechaine](#), Community Benefit and Evaluation Manager.