

# Community Health Needs Assessment and Implementation Plan 2017-2019

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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.

# **Executive Summary**

Buffalo Hospital is a part of Allina Health, a not-for-profit health system dedicated to the prevention and treatment of illness in Minnesota and western Wisconsin. This report describes the current community health needs assessment (CHNA) process and results for Buffalo Hospital located in Wright County, Minnesota.

Every three years, Allina Health conducts a CHNA for each of its hospitals to systematically identify and analyze health priorities in the community and create a plan for how to address these priorities. The CHNA process is conducted in partnership with local public health departments, other hospitals and health systems and many other community partners. Through this process, Allina Health engages with community stakeholders to better understand the health needs of the communities it serves, identifies internal and external resources for health promotion and creates an implementation plan that leverages those resources to improve community health.

In late 2015, community members, community organizations, local public health and hospital/ health system staff participated in a process that identified the following priority areas for community health in the communities served by Buffalo Hospital:

- 1. Mental health and wellness
- 2. Obesity and physical activity
- 3. Access to care

In 2016, staff solicited community input, assessed existing resources and developed an implementation plan for 2017–2019 in order to address these priorities. This plan includes the following goals, each of which is supported by multiple objectives and will be implemented through a variety of strategies monitored for progress and outcomes over time.

#### Mental health goal:

Support mental health and wellness in Wright County by identifying and expanding the offering of community mental health and wellness and addiction resources and strengthening social connections and relationships.

#### Obesity and physical activity goal:

Reduce or maintain the level of obesity and increase physical activity among the population of Wright County through educational programming, activities and policies that promote and support healthy lifestyle.

#### Access to care goal:

Support community access to clinical and non-clinical services in Wright County by engaging providers and community partners in collaborative network and resource sharing.

## Introduction

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. Every three years, Allina Health conducts a community health needs assessment (CHNA) for each of its hospitals to systematically identify and analyze health priorities in the community and plan how we will address these priorities, including in partnership with local public health departments, other hospitals and health systems and many other community partners. The Internal Revenue Service provides guidelines for this process as part of meeting obligations under the Patient Protection and Affordable Care Act, which requires 501(c)(3) non-profit hospitals to conduct an assessment at least every three years.

Through this process, Allina Health aims to:

- Better understand the health status and needs of the communities we serve by considering the most recent health and demographic data as well as gathering direct input from community members.
- Gather perspectives from individuals representing the interests of the community, including those who have knowledge or expertise in public health and those who experience health inequity or are low-income and/or minority members of the community.
- Identify community resources and organizations that Allina Health can partner with and support in the priority areas for that community.
- Create a strategic implementation plan based on information gathered through the needs assessment.

Buffalo Hospital is part of Allina Health. The purpose of this report is to share the current assessment of community health needs most relevant to the community served by Buffalo Hospital and its implementation plan to address these needs in 2017–2019. This report also highlights activities conducted during 2014–2016 to address needs identified in the previous 2013 assessment.

# Allina Health Description

Allina Health is dedicated to the prevention and treatment of illness and enhancing the greater health of individuals, families and communities throughout Minnesota and western Wisconsin. A not-for-profit health care system, Allina Health cares for patients from beginning to end-of-life through its 90+ clinics, 13 hospitals, 13 retail pharmacies, specialty care centers and specialty medical services that provide home care, senior transitions, hospice care, home oxygen and medical equipment and emergency medical transportation services.

# Allina Health Service Area



# Hospital description and service area

Buffalo Hospital is a non-profit regional medical center committed to providing quality, patient-centered and comprehensive care to patients in and around Wright County. The hospital provides a full range of inpatient, outpatient and emergency care services and many specialty services. It has been nationally and locally recognized for its quality of care particularly its safety philosophy, Community Benefit practices and emergency care. Buffalo Hospital was also the first hospital in the state of Minnesota to be awarded the Pathway to **Excellence American Nurse Credentialing** designation and also received an award from the Minnesota Business magazine for developing wellness programs. Clinics affiliated with Buffalo Hospital include: Stellis Health clinics in Albertville, Buffalo and Monticello and Allina Health Clinics in Annandale, Buffalo, Cokato and St. Michael. The hospital also has a long history of working to improve the health of the communities it serves through charitable giving by the Buffalo Hospital Foundation and direct community health-improvement programming.

# Community served and demographics

Buffalo Hospital serves more than 70,000 patients every year. The hospital's primary service area is Wright County—a suburban and rural community on the western edge of the Twin Cities metropolitan area. Wright County was also the focus of inquiry for Buffalo Hospital's CHNA.

According to the U.S. Census Bureau's Decennial Census, a total of 131,311 residents live in the 661.28-square-mile area occupied by Wright County. The area's population density, estimated at 198.6 persons per square mile, is greater than

the national and Minnesota average. The median age in Wright County is 34.8 years; about 29% of the total population is under age 18. Approximately 7% of area residents are people of color—primarily Hispanic or Latino (2.7%), Asian (1.4%) or Black (1.2%). An additional 0.4% of the population identifies as American Indian or Alaska Native alone. In 2014, 2.6% of residents were foreign born and 1.5% had limited English proficiency (U.S. Census Bureau, American Community Survey (ACS), 2010–2014, 5-year estimates). The median income in 2014 was \$76,489, with 6% of residents living in households with income below the Federal Poverty Level (U.S. Census Bureau, ACS, 2010-2014, 5-year estimates).

Wright County residents face many of the same health concerns common across the United States. Although more people are insured than in the past, 21% self-report that they do not have a regular doctor. Further, the region has a 1036:1 ratio of mental health providers to residents compared with Minnesota's overall mental health provider ratio of 529:1 (County Health Rankings, 2015). Additionally, approximately 67% of area adults are overweight or obese and 9.4% report poor general health (U.S. Census Bureau, ACS, 2009–2013, 5-year estimates). Additional information about Wright County can be found online at Minnesota Compass.

# **Evaluation of 2014-2016 Implementation Plans**

During 2014–2016, Buffalo Hospital addressed needs identified in its 2013 assessment: obesity and physical activity, chronic disease prevention and management and mental health. Some initiatives were led by the hospital, while others were part of coordinated activities across the health system or conducted in partnership with local public health. The following describes significant initiatives and their outcomes.

# Systemwide activities

In 2013, two needs, obesity and mental health, were identified as systemwide priorities by Allina Health. Thus, 2014-2016 systemwide community health activities focused on those two priority areas:

## Change to Chill

Change to Chill™ (CTC) is a free, online resource that provides stress reduction tips, life balance techniques and health education services for teens. Since its launch in 2014, CTC has served more than 40,000 people, including teachers who use it in their classrooms, teens who use it in social groups and parents looking for ways to help their child stress less. In 2016, Allina Health piloted an in-person delivery model of the CTC program in a total of 11 middle schools, high schools and alternative learning centers throughout five communities Allina Health serves. Fifteen different groups of students participated in the project, representing a total of 253 student participants. Overall, the program was well-received by both participants and school liaisons. Many participants reported they intended to use what they learned and gave specific examples of how the program helped them. Participants also

showed an increase in knowledge about basic concepts related to stress and resiliency skills.

# Be the Change

As the largest provider of mental health and addiction care in the state, Allina Health believes it should lead the way in eliminating stigma within the industry. To this end, the recently launched internal program, Be the Change, is an effort to eliminate stigma around mental health conditions and addiction at Allina Health and ensure that all patients receive the same consistent, exceptional care. More than 500 Allina Health employees volunteered to lead this effort as trained Be the Change Champions and help educate and generate awareness among their colleagues about mental health conditions and addictions. The formal campaign extended from January-May 2016. During this time Champions presented at 492 meetings throughout the organization and reached 10,260, or 38%, of employees. While the formal campaign has come to an end, the work is ongoing and the campaign's goal is to reach all Allina Health employees.

## Neighborhood Health Connection

Neighborhood Health Connection<sup>™</sup> (NHC) is a community grants program that aims to improve the health of communities by building social connections through healthy eating and physical activity. Each year, Allina Health awards over 50 Neighborhood Health Connection grants, ranging in size from \$500-\$10,000, to local nonprofits and government agencies in Minnesota and western Wisconsin. Activities offered in 2014 and 2015 reached over 2,500 participants both years and a similar reach is expected in 2016. Evaluations of the NHC program find that the majority of people who participate in NHC-funded programs increase their social connections and make positive changes in their physical activity and healthy eating behavior. Further, 2014 and 2015 follow-up data revealed that these positive changes were maintained six months later and nearly 80% of grantees continued to offer their activity after the grant period ended

## Health Powered Kids

Health Powered Kids™ (HPK), launched in 2012, is a free community education program designed to empower children ages 3 to 14 years to make healthier choices about eating, exercise, keeping clean and managing stress. In 2015, approximately 9,500 people visited the HPK website and more than 5,500 children were reached by the program. In addition, 87% of respondents to a user survey described HPK as helpful, very helpful or essential to improving health at their home, school or organization. These results were similar to those achieved in 2014.

# Choose Healthy

At the beginning of 2016, Allina Health removed sugar-sweetened beverages and deepfried foods and increased healthy offerings in its facilities to model and support the dietary changes recommended by providers. Additionally, in May 2016, Abbott Northwestern Hospital removed a fast food restaurant from its campus. These changes support the health of Allina Health patients, visitors and employees.

# Hospital-specific activities

Goal 1: Reduce obesity and increase physical activity

Buffalo Hospital partnered with local food vendors and public health to raise community awareness about healthy eating and increase access to healthy foods. Activities included: raising awareness of local farms, providing education on how to identify healthy options at restaurants, supporting and promoting community gardens, providing community grocery store tours, expanding community supported agriculture (CSA) programs and conducting healthy food access policy work aimed at increasing healthy snacks at schools and community access to healthy foods.

Educational programs encouraging healthy lifestyles were also held for families and children. Allina Health's Health Powered Kids programming was promoted at the Buffalo Early Family Childhood Education family fun fairs and at a childcare provider workshop for the St. Cloud area. In 2013, a family health challenge was launched which, to date, has had 60 families register. In 2016, the hospital offered the Health Powered Families curriculum—a four-week series of classes which provides hands-on learning opportunities for families with children under the age of 10—to area residents.

Additionally, Let's Talk Wellness programs were held in workplaces around the community, with over 800 active participants between 2013 and 2014. Healthy Eating for Successful Living workshops were held for people over age 55 at various community sites and in hospital settings. From 2013-2014, 60 people participated in these workshops and 32 participated in 2015. Health for seniors was also pursued through financial support of the Silver Sneakers program in the community.

Goal 2: Increase early detection and improve self-management of chronic diseases.

A physician-to-coach referral process was implemented to connect more patients with health coaching resources. Over 800 coaching sessions were held in 2013 and 2014, which was expanded to over 1,000 sessions in 2015. Further, nine evidence-based Living Well with Chronic Disease workshops were held in the community, reaching 90 participants. These Living Well with Chronic Disease workshops were offered in cooperation with other local charities to ensure that there was a full spectrum of coverage while minimizing the overlap of services.

Programs were also implemented to increase chronic disease prevention and detection. Buffalo Hospital implemented a Walk with a Doc program in 2014, which allows community members to participate in low-impact exercise, receive education on healthy lifestyles and disease prevention and to interact with health care providers outside of the normal clinical setting. The first cycle of this program had 101 participants. Additionally, partnerships were established with local organizations and workplaces to hold screenings and wellness coaching events for employees. In 2013-14, 47 events were held which reached a total of 1,206 people.

Goal 3: Reduce stigma related to mental health conditions and increase awareness of mental health resources.

Hospital staff attended meetings with two local mental health groups, Wright County Mental Health Advisory Committee and Four County Mental Health Initiative, to identify resources and discuss issues in the community related to mental health. After, several events were held to link community members to these resources and to help reduce the stigma related to mental health. An example of one of these events is the Emotion in Motion 5k, which helps to raise mental health awareness and support families touched by suicide. This event had 300 participants. A study was also implemented in partnership with Duke University, which studies the promotion of health through happiness. Presentations about the project were given to students and groups in the community and over 2,700 people enrolled in the study. Results are expected in 2016. Hospital staff were also involved in community groups to help shape policy related to the mental health needs of youth and families.

# 2015-2016 CHNA Process and Timeline

Allina Health designed a process that engaged community stakeholders and included review of existing secondary public health data and collection of primary data through community dialogues.

The Community Benefit and Engagement department guided this process on behalf of the Allina Health system. Centralized System Office staff provided leadership for the process, and community engagement staff in nine regions

throughout the Allina Health system led each of the hospitals through a process designed to identify unique needs and develop localized action plans, while also identifying common themes for action systemwide.

Hospital leadership teams and, where appropriate, regional hospital boards received and approved individual hospital plans followed by final approval by the Allina Health Board of Directors.

TIMING	STEPS
JULY – SEPTEMBER 2015	—o ESTABLISH PLANNING TEAMS and COLLECT DATA  Staff identify and invite stakeholder groups for each hospital; share initial results from 2014–2016 implementation plan. Develop and distribute guidance and data packets and schedule local stakeholder meetings.
OCTOBER – JANUARY 2016	Review data with stakeholders and complete formal prioritization process, using Hanlon method. Review prioritized issues and summarize themes for the system.
FEBRUARY 2016	DESIGN COMMUNITY INPUT  Identify specific methods and audiences for community input on strategies, work with vendor to design process and questions/topics and recruit participants.
MARCH – JUNE 2016	GATHER COMMUNITY INPUT and DEVELOP IMPLEMENTATION PLAN Conduct focus groups or community health dialogues to solicit action and implementation ideas related to priority areas. Local teams develop action plan, metrics and resource inventory.
JULY – SEPTEMBER 2016	PREPARE REPORTS AND SEEK INTERNAL SUPPORT/APPROVAL  Share results and action plans with key stakeholders systemwide. Present plans to local boards/committees/leaders for approval.
OCTOBER – DECEMBER 2016	Staff present plan to Allina Health Board of Directors for final approval.

## Data Review and Issue Prioritization

Allina Health Community Benefit and Engagement staff used the most recent secondary data available via the CHNA toolkit—a free, web-based platform hosted by Community Commons—as well as additional state and local data resources available for Wright County such as the Minnesota Student Survey or the Minnesota Health Access Survey. Data for Minnesota and the United States were also provided for comparison and context. The data included approximately 75 indicators relating to demographics, social and economic factors, health behaviors, physical environment, health conditions and health care access.

Approximately 40 stakeholders representing broad interests of the community attended at least one of two meetings in November 2015 to review data together and discuss pertinent issues for Allina Health to address through this needs assessment and action plan. Agencies represented at these meetings include:

- Allina Health Clinics
- Buffalo Early Childhood Family Education
- Buffalo Hospital Manager group, Hospital Board and staff
- Buffalo School District
- CentraCare Health—Monticello Hospital
- Community Health Foundation of Wright County
- Discovery Elementary School
- Safe Communities of Wright County
- Strive Therapy
- Timberbay
- Wright County Area United Way
- Wright County Community Action, Head Start
- Wright County Crisis Nursery
- Wright County Emergency
- Wright County History Center
- Wright County Public Health

The review process included a formal prioritization process known as the Hanlon method, which ranks health priorities based on three primary criteria: the size of the problem, including projection of future trends; the seriousness of the problem, including disparate health burdens within the population; and the effectiveness and feasibility of interventions on the part of health care.

# Final priorities

Through this process, three priorities were identified for action in 2017-2019:

- 1. Mental health and wellness
- 2. Obesity and physical activity
- 3. Access to care

## Needs not addressed in the CHNA

Other prioritized health issues identified through the process were not included among the top three priorities. For some, such as seat belt use, immunizations and radon assessments, it was determined that although health care can play a role through provider interactions, public health agencies or existing coalitions are best able to address these issues and are supported by Buffalo Hospital. Other prioritized health issues not included will be addressed in part through the identified priorities. For example, alcohol and drug addiction will be partially addressed through the hospital's work on mental health and wellness, and is also targeted by numerous organizations in the region. Similarly, prediabetes/diabetes is addressed in part through the identified priorities of obesity and physical activity and access to care. Similarly, childhood poverty was identified as an issue, particularly in pockets of Wright County, and is addressed in part through the work that will be done through access to care.

# **Community Input**

Once priority issues were identified by the stakeholder team, Buffalo Hospital solicited broad feedback from the community on the appropriateness of the identified priority areas as well as how the hospital could most effectively address the needs. Community input was primarily gathered via community dialogues and/or focus groups (with an online survey option if interested persons could not attend) and via an online survey of Allina Health employees.

# Community dialogues/focus groups

Allina Health partnered with The Improve Group to design, plan and facilitate a total of 22 community health dialogues and focus groups between March and April 2016. The dialogues were open to all members of the community. The meetings were facilitated by The Improve Group and Allina Health staff and used a World Café methodology. Participants had a chance to engage in discussion about all topics during three, 20-minute rounds. When the group of participants was fewer than 15, the conversation was conducted as a focus group with one facilitator from The Improve Group. Participants were asked to share their vision for health in the community, clarify aspects of the priority health areas that are most important to address and discuss opportunities for Allina Health to support community health.

Key questions Allina Health sought to answer through the discussions were as follows:

- Does the community concur with/confirm our top priorities for the hospital?
- What specific aspect or components of the broad priorities should Allina Health work to improve?
- What strategies and partnerships should Allina Health implement in order to address the priorities?

Two community dialogues for Buffalo Hospital were held in Buffalo, MN on March 21 and 22, 2016. A total of 34 people attended, including participants from local government, law enforcement, non-profit organizations, area businesses, advocacy groups and community members.

# Community dialogues/ focus groups results

### Mental health and wellness

#### Vision for health

Participants envisioned a community where there are more people receiving the mental health care they need, including seeing a doctor or therapist. In 2019, they imagine there will be a greater focus on preventing mental health conditions, not just treating them. Additional services in the community allow people to access the appropriate level of care rather than going to the emergency room to address mental health needs. To achieve this goal, the community is working to address the factors that contribute to poor mental health such as income inequality, lack of housing and family trauma.

#### Existing strengths

Wright County has programs and services in place that provide support to the community around mental health including the Wright County Family Collaborative—a crisis line and 24-hour crisis response team. Allina Health offers several mental health programs including Bounce Back, Change to Chill and Health Powered Kids. Area organizations have worked to increase communication and collaboration around addressing mental health, and there is a perception that the community is more aware of issues related to mental health.

#### Allina Health's role and opportunities

During the community dialogues, participants discussed ways Allina Health could help address the priority area. Ideas that came out of the session include:

- Host additional community dialogues to continue the conversation about addressing mental health.
- Use multiple communication channels to promote mental health services and resources including social media, websites and apps and booths at community expos and events.
- Provide awareness education in schools, workplaces and the community to reduce the stigma of mental health and to increase early diagnosis and prevention.
- Offer wellness checks for mental health or include mental health screening questions during primary care visits.
- Provide training to health care professionals to improve referrals to community resources. Include resources on all topics that can influence mental health including health care, mental health, food access, housing and employment supports.
- Increase the amount of mental health services in the area by recruiting additional providers, offering telehealth and offering walk-in clinics with mental health screenings and referrals to programs.

## Obesity and physical activity

#### Vision for health

Participants envisioned a community where healthy food is affordable and accessible and older adults have support for preparing nutritious foods at home. They imagined that many of the barriers to eating healthy, including lack of knowledge about cooking nutritious meals, are addressed. Participants also said that people stay active by taking advantage of the existing trail system.

#### Existing strengths

The Buffalo area has several opportunities for education and screenings to help people maintain a healthy weight including many worksite wellness initiatives, health screenings and the dieticians at Cub Foods and Marketplace grocery stores. Classes through Community Education are also available to help people maintain a healthy lifestyle. The decision to remove sugar-sweetened beverages from all its health care facilities was identified as an important policy that makes a positive statement to the whole community about Allina Health's commitment to health.

#### Allina Health's role and opportunities

During the community dialogues, participants discussed ways Allina Health could help address the priority area. Ideas that came out of the session include:

- Offer educational opportunities to support wellness including classes on cooking, nutrition, buying healthy food on a budget and maintaining an active lifestyle.
- Develop a community-wide health initiative similar to Heart of New Ulm to encourage participation in wellness activities.
- Have physicians write prescriptions for healthy behaviors such as walking, biking or joining Community Supported Agriculture (CSA) programs.
- Partner with local food shelves to improve access to healthy food for low income families through healthy food policies and education.
- Work with local governments to improve active living infrastructure including sidewalks, trails, parks and community centers.

#### Access to care

#### Vision for health

Participants envisioned a future where everyone has access to affordable and reliable transportation to appointments and people do not need to leave the area to get specialized care or treatments. Better clinic hours, including evenings and weekends, and more providers reduces the reliance on urgent care and the emergency room. Participants also said the community is better educated about how to access services, including mental health services.

#### Existing strengths

Wright County has several services in place to help people access care, including communitybased screenings, programs and the Wright County Public Health Wellness on Wheels (WOW) van which goes to communities around Wright County. Some local employers, including the City of Buffalo, provide onsite wellness clinics, screenings and flu shots, making it easier for employees to get preventive care. Head Start also provides dental and vision screenings for preschoolers. Community-based supports are available for individuals with chronic illnesses. such as COPD and diabetes. Transportation to appointments is available in many parts of the county, although the hours and services areas are limited.

#### Allina Health's role and opportunities

During the community dialogues, participants discussed ways Allina Health could help address the priority area. Ideas that came out of the session include:

- Offer mobile wellness screenings in the community, at worksites and in schools.
- Make it easier for people to schedule appointments by offering evening and weekend hours at clinics, including lab and x-ray appointments.
- Increase access to specialists by recruiting additional providers or hosting monthly specialty clinics.
- Develop a Chamber of Wellness to help spread the word about what is happening in the community, including the types of services that are available, how to access services and how to find supports for accessing care.
- Continue to host community conversations on improving access to care.

## **Employee survey results**

Employees were asked to give their home address zip code and then rank the hospital's identified priorities. The most important priority was coded to a score of 1, so a lower average score indicates a higher priority to the employees. Respondents were then asked to select from among pre-identified options for the role that Allina Health could play in each priority area and were given an opportunity to share the most important thing Allina Health can do and offer any other comments.

#### Total Number of Respondents Buffalo Hospital: 42

#### Rank of priorities:

- 1. Mental health and wellness (1.43 mean score)
- 2. Access to care (1.88 mean score)
- 3. Obesity and physical activity (2.02 mean score)

#### Mental health and wellness:

- Allina Health's role (top 3):
  - 1. Make it easier to use our health care services
  - 2. Offer classes or support groups related to health issues
  - 3. (tie) Help create environments that make the healthy choice the easy choice
  - 3. (tie) Work to create policies that promote and support health
- Most important thing to do:
  - More health care professionals that can help with mental health conditions and addiction
  - Eliminate the stigma of mental health conditions
  - Increase access to mental health resources
- Comments:
  - Increase suicide prevention education and resources

#### Access to care:

- Allina Health's role (top 3):
  - 1. Make it easier to use our health care services
  - 2. Help create environments that make the healthy choice the easy choice
  - 3. Work to create policies that promote and support health
- Most important thing to do:
  - Create a less complicated referral system
  - Create a better appointment scheduling system
  - Increased education
- Comments:
  - Better Primary Care Provider hours
  - Education on insurance services

#### **Obesity and Physical Activity:**

- Allina Health's role (top 3):
  - 1. Offer classes or support groups related to health issues
  - 2. Help create environments that make the healthy choice the easy choice
  - 3. (tie) Share information about health through seminars, meetings or websites
  - 3. (tie) Make it easier to use our health care services
- Most important thing to do:
  - o Encourage healthy eating and physical activity programs in the community
  - o Have more nutrition/activity events in the community
  - o Offer reduced rates/discounts on gym memberships/exercise facilities
- Comments:
  - Education on healthy eating on a budget

#### **Additional comments:**

• Increased mental health resources in the community for all ages

# Implementation Plan

# Overview of process

After confirming the hospital's top three priorities with the community and gathering community ideas for action, Buffalo Hospital developed an implementation plan based on the input. This plan outlines the set of actions that the hospital will take to respond to the identified community needs including: goals, objectives and process and outcome indicators with which the actions will be assessed. Existing community resources that address the issue are also listed so as to reduce duplication and identify possible partners.

This implementation plan was developed based on reviewing the community health needs assessment data and having conversations with community leaders, hospital management and community groups. Additionally, individual conversations were held with a variety of community members to help develop this work for the next three years.

The following implementation plan is a threeyear plan depicting the overall work that Buffalo Hospital will conduct to address the priority areas. Yearly work plans will be developed to provide detailed actions.

# Priority 1: Mental health and wellness

**Resources:** Besides Buffalo Hospital, resources in the communities served by Buffalo Hospital include local health care providers such as CentraCare Health—Monticello Hospital; Allina clinics in Annandale, Buffalo, Cokato and St. Michael; Stellis Health clinics in Buffalo, Monticello and Albertville. Other important resources include Wright County Health and Human Services (Public Health), Central Minnesota Mental Health, Community Benefit Advisory Council, a variety of coalitions and community groups centered around mental health and wellness (Wright County Mental Health Advisory Committee, Four County Adult Mental Health Initiative, Safe Schools committee, Wright County child abuse team, Head Start Health Advisory Committee, Partnership for Youth and Families, etc.), the local schools and government organizations, faith-based community, Wright County area United Way and a new 24/7 call line for mental health and addiction conditions.

**Goal:** Support mental wellness in Wright County by identifying and expanding the offering of community mental health and wellness and addiction resources and strengthening social connections and relationships.

#### **Objectives:**

- 1. Promote the awareness of the stigma around mental health conditions and how it impacts willingness to seek treatment for mental health and medical conditions.
- 2. Advocate for and partner with communities to develop a comprehensive and reliable continuum of mental health and addiction care, including identifying and eliminating gaps in service.
- 3. Provide programming and hands-on resources for mental wellness.

# Priority 2: Obesity and physical activity

**Resources:** Buffalo Hospital already works with other local health care providers to address obesity and physical activity including CentraCare Health—Monticello Hospital; Allina clinics in Annandale, Buffalo, Cokato and St. Michael; Stellis Health clinics in Buffalo, Monticello and Albertville. Other key resources include Wright County Health and Human Services (Public Health), Community Benefit Advisory Council, local schools and government organizations, faith-based community, local grocery stores and farmer's markets, Local Roots Coop, Wright County Crow River Food Council, food shelves, University of MN Extension, master gardeners, Farm-to-School programs, Live Wright Statewide Health Improvement Program (SHIP), and the Wright County area United Way promoting nutrition and reducing barriers to healthy living.

**Goal:** Reduce or maintain the level of obesity and increase physical activity among the population of Wright County through educational programming, activities and policies that promote and support a healthy lifestyle.

#### **Objectives:**

- 1. Expand multi-component obesity interventions in the community for adult and youth populations.
- 2. Remove barriers around access to healthy food and physical activity options, especially for low-income and food insecure populations.
- 3. Promote the concept of taking responsibility for own health through collaborative community-wide initiatives and interventions.

## Priority 3: Access to care

**Resources:** Local health care providers including Buffalo Hospital and others such as CentraCare Health—Monticello Hospital; Allina clinics in Annandale, Buffalo, Cokato and St. Michael; Stellis Health clinics in Buffalo, Monticello and Albertville are key resources to address access to care. Other resources include Wright County Health and Human Services (Public Health), Community Benefit Advisory Council and the faith-based community.

Goal: Support community access to clinical and non-clinical services in Wright County by engaging providers and community partners in collaborative network and resource sharing.

#### **Objectives:**

- 1. Create options for patients unable to access services due to transportation issues.
- 2. Increase the availability of resources that promote mental wellness as well as available mental health services.

#### Resource commitments

Allina Health will commit both financial and in-kind resources during 2017-2019 to ensure effective implementation of its planned activities to meet the goals and objectives identified. Resources may include specific programs and services offered by the hospital, staff time devoted to collaborations with others to advance collective work, charitable contributions and employee volunteerism.

# Evaluation of objectives

Throughout the implementation phase, specific metrics will be tracked to document progress toward meeting goals and objectives and make adjustments to the implementation plan as needed. Specific evaluation plans will be established or continued for programs and initiatives as appropriate. Monitoring of population-level metrics and systemwide metrics will also provide context for the health status of the communities which Allina Health serves and the work of Allina Health overall (see Appendix).

# **Acknowledgments**

Staff at Allina Health would like to thank many partners who made this assessment and plan possible:

- Individual community members who offered their time and valuable insights;
- The Improve Group, who facilitated our community conversations;
- Partner organizations that met to review and prioritize data and develop implementation plans, and the individuals who contributed their expertise and experience to ensure a thorough and effective outcome;
- Allina Health and Buffalo Hospital staff who provided knowledge, skills and leadership to bring the assessment and plan to fruition, particularly Janna Netterfield; and
- Allina Health System Office staff and interns who supported the process throughout, including Christy Dechaine, Sarah Bergman, Brian Bottke and Axmed Siciid.

# Conclusion

Allina Health will work diligently to address the identified needs prioritized in this process by taking action on the goals and objectives outlined in this plan.

For questions about this plan or implementation progress, please contact:

- Mona Volden, Community Engagement Lead for Northwest region at Mona.Volden@allina.com or
- Debra Ehret Miller, Community Benefit and Evaluation Manager at Debra.EhretMiller@allina.com

Copies of this plan can be downloaded from our website: allinahealth.org/About-Us/Community-involvement/.

# **Appendix**

# Allina Health Systemwide Performance Indicators

#### Population Health Metrics

The following population-level indicators will be used to provide context and to monitor the community's status related to the identified priorities. Data will be analyzed at the county-level to match the hospital's defined community/communities in the CHNA process.

Healthy Eating and Active Livir	ng/Physical Activity		
Adult physical activity	Percentage of adults engaging in no leisure time physical activity	National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)	
Youth physical activity	Percentage of 9th graders who were physically active for 60 minutes or more on at least five of the last seven days	Minnesota Student Survey (MSS)	
Adult fruit and vegetable consumption	Percentage of adults eating less than five servings of fruit and vegetables daily	Behavioral Risk Factor Surveillance System (BRFSS)	
Youth fruit and vegetable consumption	Percentage of 9th graders consuming at least one serving of a) fruit and b) vegetables daily	MSS	
Adult BMI	Percentage of adults who are overweight or obese	BRFSS	
Mental Health and Wellness			
Youth suicidal thoughts	Percentage of 9th graders with suicidal thoughts in the past year	MSS	
Adult mental distress	Percentage of adults reporting more than 14 days of poor mental health per month	BRFSS	
Addiction			
Adult binge drinking	Percentage of adult males having five or more drinks on one occasion and females having four or more drinks on one occasion	BRFSS	
Youth drinking	Percentage of 9th and 11th grade students who reported using alcohol within the past 30 days	MSS	
Youth illicit drugs	Percentage of 9th and 11th grade students who reported using any illicit drugs (not alcohol or tobacco) during past 12 months	MSS	
Adult current smokers	Percentage of adults who currently smoke cigarettes some days or every day	BRFSS	
Youth smoking	Percentage of 9th graders who smoked one or more cigarettes, past 30 days	MSS	

Aging			
Fall related deaths, 65+	Number of adults age 65 and older who die as a result of a fall related injury (ICD10 codes W00 to W19)	Center for Disease Control and Prevention Wide-ranging Data for Epidemiologic Research (CDC WONDER))	
Chronic Conditions prevalence, 65+	Percent of adults age 65+ with a chronic condition	Minnesota Department of Health (MDH)	
Access to Care			
Uninsured	Percentage of population without health insurance coverage	MN Access Survey, MN Compass (Rice, Steele and Brown Counties)	
Lack of consistent primary care	Percentage of adults who self-report that they do not have a primary care provider	BRFSS	

#### Systemwide Metrics

The following process indicators will be used to monitor Allina Health progress across the health system during 2017–2019 CHNA implementation phase. These metrics will be pulled from Allina Health records by System Office staff as needed.

Mental Health and Wellness			
Employee volunteerism	Total number of volunteer hours tracked systemwide by Allina Health employees in community on projects and programs related to mental health and wellness.		
Charitable contributions	Percent of all charitable contribution dollars given by the Allina Health system to organizations addressing mental health and wellness.		
Healthy Eating and Active Living/Physical Activity			
Employee volunteerism	Total number of volunteer hours tracked systemwide by Allina Health employees in community on projects and programs related to healthy eating and/or active living		
Charitable contributions	Percent of all charitable contribution dollars given by the Allina Health system to organizations addressing healthy eating and/or active living.		
Access to Care			
Charitable contributions	Percent of all charitable contribution dollars given by the Allina Health system to organizations addressing health care access. (Reported for hospitals with health access as a priority in the CHNA).		



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