Allina Health

ABBOTT NORTHWESTERN HOSPITAL

2023–2025

Community Health Needs Assessment and Implementation Plan

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Introduction

Abbott Northwestern Hospital (Abbott Northwestern) 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. As part of its mission to serve communities, Allina Health and its hospitals conduct a Community Health Needs Assessment (CHNA) every three years. This process includes working with community members to systematically identify community health priorities and create a plan for addressing them. In addition to the formal CHNA activities described in this report, each CHNA uses learnings from the previous cycle and ongoing community dialogues and information-gathering by hospital staff.

The CHNA process is completed in partnership with local public health departments, other hospitals and health systems, community organizations and residents. The Patient Protection and Affordable Care Act of 2010 requires 501(c)(3) nonprofit hospitals to conduct an assessment at least every three years. The Internal Revenue Service provides guidelines for meeting this obligation.

Through the CHNA process, Allina Health aims to:

- Understand health priorities and opportunities to increase health equity as defined by community members and the most recent health and demographic data.
- Learn about factors preventing health equity and gain ideas to improve community health from organizations, institutions and community members — especially people from historically underserved racial, ethnic and cultural communities and others who experience health inequity.
- Identify community resources and organizations Allina Health can partner with and support to improve community health.
- Create an implementation plan outlining strategies and activities Allina Health and its hospitals will pursue to improve community health.

The purpose of this report is to share results from the current assessment of health needs in the community served by Abbott Northwestern and the implementation plan to address those needs in 2023–2025. This report also highlights the hospital's 2020–2022 activities to address needs identified in the 2019 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, 10 hospitals, 15 retail pharmacies, 52 rehabilitation locations, 2 ambulatory care centers, specialty care centers and specialty medical services that provide home care, hospice care and emergency medical transportation services.

MISSION

We serve our communities by providing exceptional care, as we prevent illness, restore health and provide comfort to all who entrust us with their care.

2023–2025 CHNA PRIORITIES

Based on the process described in this report, Abbott Northwestern will pursue the following priorities in 2023–2025:

Mental health and substance use encompasses overall mental, social and emotional well-being, including social connectedness; resilience; preventing, delaying or reducing harm associated with using substances; and access to the full continuum of mental health and addiction care and supports.

Preventative health education refers to the development and deployment of health education materials with special attention given to the perspectives and needs of culturally diverse community members.

Social determinants of health & health-related social needs are the community-wide social, physical and economic conditions that influence health (e.g. neighborhood conditions, employment opportunities) and the individual-level material needs and circumstances that impact health and well-being (e.g. food security, reliable transportation, social isolation).

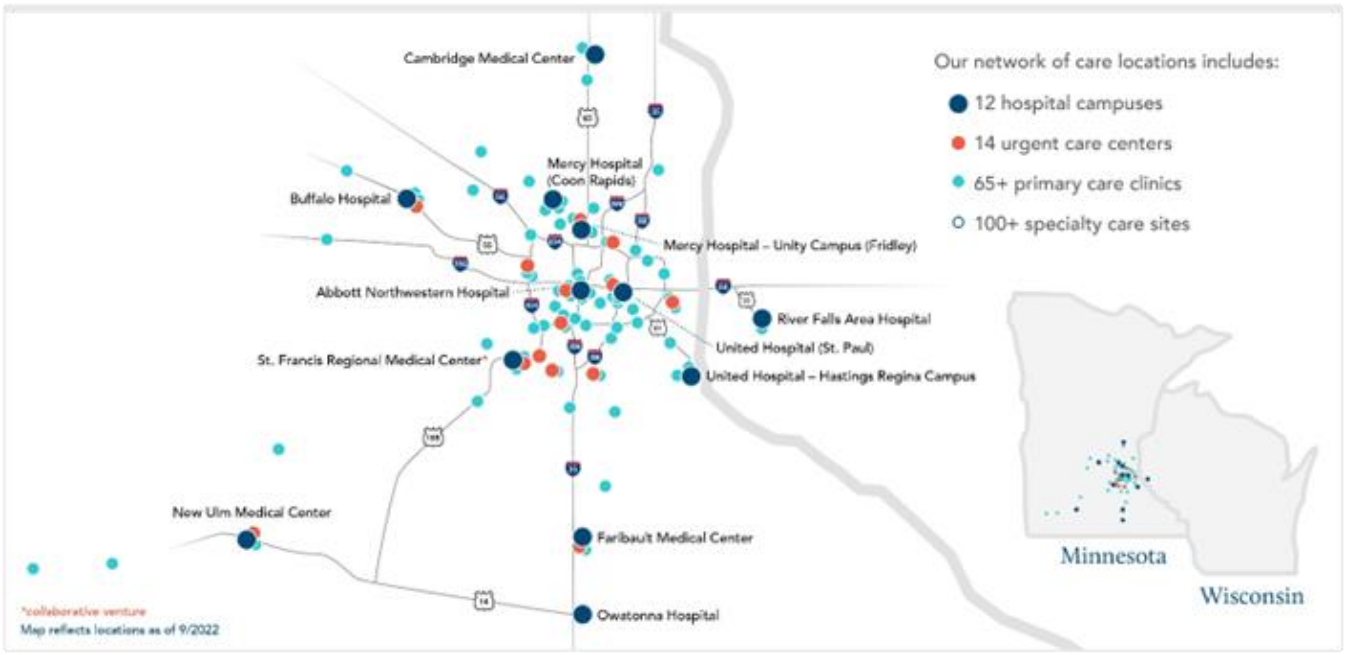
Access to culturally responsive care means availability of and proximity to services, programs and medical care that are culturally specific, honoring and appropriate. Examples include staff who are representative of the community, programs and services provided in one's preferred language and representative of one's lived experience and staff trained in the provision of culturally inclusive care.

Additionally, Abbott Northwestern prioritized the following communities for the 2023–2025 CHNA cycle:

- People with disabilities
- People living at or near poverty
- People who identify as Black, Indigenous and/or People of Color (BIPOC)
- People who identify as Lesbian, Gay, Bi-sexual, Trans, Queer and/or Questioning, and other historically underserved sexual and gender identities (LGBTQ+)

Hospital and community description

ALLINA HEALTH SYSTEM MAP



HOSPITAL DESCRIPTION AND SERVICE AREA

Located in south Minneapolis, Abbott Northwestern is the largest nonprofit hospital in the Twin Cities. Each year, Abbott Northwestern serves more than 200,000 patients and their families from across the Twin Cities and Upper Midwest. Though the hospital serves patients from a wide geographic area, its primary service area (and focus of the CHNA) is Hennepin County — a dense urban and suburban area that includes Bloomington, Minneapolis and its surrounding suburbs. The 2022 CHNA further focused on the experiences and needs of South Minneapolis.

The hospital is known across the United States for its centers of excellence: cancer care through the Allina Health Cancer Institute; cardiovascular services in partnership with the Minneapolis Heart Institute®; the Spine Institute; Neuroscience Institute; Orthopedic Institute; obstetrics and gynecology through the Mother Baby Center; and physical rehabilitation through the Courage Kenny Rehabilitation Institute®. Affiliated clinics include Bloomington, East Lake Street, Centennial Lakes, Greenway, Isles, Nicollet Mall, Uptown, Richfield, Plymouth, Sharpe Dillon & Cockson, Women's Health Consultants, Abbott Northwestern — WestHealth and the Abbott Northwestern Center for Outpatient Care.

The hospital has a long history of working to improve health in the community it serves through both charitable giving by the Allina Health Foundation — Abbott Northwestern Hospital Philanthropic Advisory Board and programming efforts that address health needs in the community.

DIVERSITY, EQUITY, INCLUSION AND BELONGING

Allina Health is committed to improving the health of all people in our communities by leveraging our collective organizational strength as a care provider, employer, purchaser and community partner to eliminate systemic inequities and racism. As a community partner, Allina Health collaborates with community members, organizations and policymakers to improve the health of all people in our communities and to focus our community health improvement initiatives and investments to improve health equity. These commitments serve as the guiding principles of our CHNA approach, including the assessment process, implementation of initiatives, partnerships, and methods of evaluation directed at tracking and addressing health disparities in our community.

Allina Health Diversity, Equity, Inclusion and Belonging Definitions

- **Diversity:** Embracing and investing in our differences to create a better us.
- **Inclusion:** Cultivating a safe environment where you always bring your whole self, contribute and thrive.
- **Equity:** Providing access to opportunities that support our communities' ability to reach its full potential. Creating solutions, informed by an understanding of unique needs that eliminate barriers to success and fill in opportunity gaps.
- **Health Equity:** "*Everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.*" — Robert Wood Johnson Foundation
- **Belonging**: When individuals or groups feel supported and safe because there is a sense of acceptance, inclusion and respect for who they are.

COMMUNITY DEMOGRAPHICS

Hennepin County is one of the most densely populated, diverse and fastest growing counties in the Twin Cities metro area. The demographic makeup of the population residing in Hennepin County has been rapidly changing over the last few years. According to County Health Rankings, the population is aging (almost 15 percent of the county residents are over the age of 65 in 2022 in comparison to only 13 percent in 2018) and becoming increasingly diverse. Hennepin County is ranked the 23rd healthiest county in Minnesota. There are significant disparities in health among people residing in different parts of Hennepin County.

According to the U.S. Census Bureau, an estimated 1,281,565 people reside in the 553.6-square mile area occupied by Hennepin County. The county has a higher-than-average percentage of residents who are foreign born compared to Minnesota as a whole – 14 percent in Hennepin County, compared to 8 percent in Minnesota (U.S. Census Bureau, 2020). In 2020, approximately 7 percent of residents had limited English proficiency. Ten percent of residents have a disability. The median household income in 2020 was $81,169 with more than 10 percent of residents living in households with income below the Federal Poverty Level (U.S. Census Bureau, 2016–2020 American Community Survey 5-Year Estimates).

Many Hennepin County residents face the same health concerns that are common across the United States. For example, residents report an average of more than three-and-a-half poor mental health days per month and 13 percent report poor general health. Approximately 25 percent of area adults are obese, which is an increase of 3 percent in comparison to the year 2019 (County Health Rankings, 2022). Many residents also struggle to access health care. Although more people are insured than in the past, 7 percent of residents are uninsured. Further, Hennepin County has a 210:1 ratio of residents to mental health providers. Minnesota's overall mental health provider ratio is 340:1 (County Health Rankings, 2022).

Most of a person's health is determined by factors outside of traditional medical care, such as race, income, ability and gender. Community health status is influenced by those factors. For example, Feeding America estimates close to 94,710 (nearly 8 percent) people in Hennepin County experienced food insecurity in 2020. An estimated 28 percent of households are considered cost burdened (U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates). Additionally, though renter-occupied households account for nearly 36 percent of all the housing in Hennepin County, an estimated 45 percent of those renter-occupied households are considered cost burdened. Additional information about Hennepin County can be found online at Minnesota Compass.

Evaluation of 2020–2022 implementation plan

In its 2020–2022 Community Health Needs Assessment and Implementation Plan, Abbott Northwestern adopted mental health and wellness; physical activity and nutrition; and healthcare access as its health priorities. It addressed these priorities between 2020 and 2022 through local and systemwide activities. Because mental health, including substance use, and obesity caused by physical inactivity and poor nutrition were identified as priorities for the entire service area, Allina Health also adopted them as 2020–2022 systemwide priorities. Additionally, social determinants of health, particularly access to healthy food and stable housing, were identified as key factors contributing to all elements of health.

The COVID-19 pandemic affected the scope and focus of work in 2020 and 2021 for all Allina Health hospitals and many activities were postponed or cancelled. While the pandemic hurt all communities, it did not do so equally. It is clear the disproportionate impact of COVID-19 on communities of color has been compounded by systemic inequities and the ongoing experiences of racial and community trauma. Many of the activities below reflect a focus on recovering from the effects brought forth in 2020 and 2021, along with a renewed commitment to reduce health disparities for every person in our community.

SYSTEMWIDE ACTIVITIES

Allina Health provided each of its hospitals with resources to address mental health and wellness, physical activity and active living and social determinants of health through the following activities:

Community health improvement programs

Allina Health's community health improvement programs offer free online resources to support community health and wellness at any stage of life.

Change to Chill

Change to Chill™ (CTC) supports teen mental health by partnering with schools and offering free online stress reduction tips, life balance techniques and health education services.

In 2020, COVID-19 provoked fear, stress and anxiety, with a large effect on youth and their mental wellness. The number of people visiting the Change to Chill website nearly doubled from approximately 25,000 to more than 58,000 people visiting the website that year. The program pivoted to meet the changing needs of community by offering a virtual care package for families to help them address mental health together. Change to Chill also transformed in-person trainings to virtual well-being classes for all, including more than 30 community presentations and trainings for school and staff. Change to Chill also began offering new online resources such as tools to help students sort out complicated feelings and cope with grief, loss and change and practice healthy communication during challenging times.

Additionally, in 2020 and 2021, Change to Chill partnered with Hennepin County Public Health to create and provide content on identity, discrimination and mental health. This work focused on providing culturally specific mental well-being resources for youth most impacted by COVID-19 including Black, Indigenous, Latine, and Lesbian, Gay, Bisexual, Transgender and/or Queer youth and their parents. Allina Health continued to build on these efforts in 2021 and launched Change to Chill in Spanish, which more than 2,000 people accessed in the first year. More resources tailored to the mental well-being of these youth and content on "Stress and Identity" will be launched in 2022.

To support a culture of well-being in local schools, the program has included the Change to Chill School Partnership (CTCSP) since 2018. Components of CTCSP include staff training on Change to Chill, a paid student internship and funding for a "Chill Zone" — a designated space in the school for students and staff to practice self-care. Evaluations of CTCSP have shown increases in confidence in ability to cope with stress among students who participate in program components. CTCSP has also received positive feedback from school staff regarding the highly effective nature of Chill Zones. From 2020–2022 Allina Health has partnered with 60 schools to deliver the program. Abbott Northwestern Hospital specifically supported three schools via continued partnership with Hopkins, Orono, and St. Louis Park High Schools. Abbott Northwestern also supported one new partnership with Minnesota Virtual Schools. In total, these efforts reached approximately 4,421 students, and 221 school staff completed a training with the program.

> **Students are entering and using the [Chill Zone] to take a break in order to return to class with a better mindset.**
>
> –School staff person

Health Powered Kids

Health Powered Kids™, launched in 2012, is a free community education program featuring 60+ lessons and activities designed to empower children ages 3 to 14 years to make healthier choices about eating, exercise, keeping clean and managing stress. More than 100,000 people visit the Health Powered Kids website each year. In a 2021 survey, 84 percent of people "agreed" or "strongly agreed" the program increased their knowledge of youth and/or adolescent health and wellness, and 87 percent "agreed" or "strongly agreed" it increased knowledge of health and wellness among the young people using the program.

Hello4Health

Hello4Health™ is a new online resource created in response to the 2019 CHNA which identified social isolation as a factor contributing to poor mental wellness among adults across all geographies. Allina Health developed the program in 2020 and launched it in April 2021 with a focus on older adults. Components include education on the important role social connections play in positive health outcomes, suggested activities and skill-building tools for connecting with others. Because older adults and people with disabilities disproportionately experience feelings of social isolation, we partnered with Accessible 360 to take steps to enhance the accessibility of the website and conform to Web Content Accessibility Guidelines (WCAG) 2.0, Level AA guidelines. In 2021, 9,488 people living in Minnesota or Wisconsin visited the Hello4Health website. In 2022, Allina Health began to refer patients who self-identify as lonely or socially isolated to the website.

Be the Change

Be the Change was a campaign to eliminate stigma around mental health and addiction conditions at Allina Health and ensure all patients receive the same consistent, exceptional care. At the campaign's launch, 500 Allina Health employees volunteered to lead the effort. They became trained Be the Change Champions and helped educate and generate awareness among their colleagues about mental health and addiction conditions through presentations and education events. In 2020, Be the Change transitioned from a campaign to an Employee Resource Group (ERG). The purpose of this group is to create an inclusive, welcoming and supportive environment for people living with disabilities, mental health conditions and/or addiction and continue to work to eliminate stigma around mental health, addiction and disability conditions. In 2021, 129 individuals participated in the ERG. Key activities included: providing $1,250 ($416/each) in charitable contributions to three organizations: Survivor Resources, Division of Indian Work and the Disability Law Center; hosting quarterly member meetings with guest speakers; and hosting or co-hosting eight events to promote stigma reduction across the entire organization.

Healthy Food Initiative

To address food insecurity, Allina Health launched a healthy food initiative in 2017 to ensure all people in its communities have access to healthy, fresh and affordable food. Through charitable contributions, Allina Health contributed $220,000 to healthy eating initiatives across its service area in 2020 and 2021, including $66,800 in Abbott Northwestern's region. Allina Health launched a partnership with the non-profit organization Every Meal to connect patients with crisis food support. Through this partnership, Allina primary care clinics can provide free bags of nutritious, non-perishable food to patients who identify as food insecure. These meal bags are tailored for a variety of dietary preferences including East African, Latine and Southeast Asian preferences.

> **[My navigator] helped me a lot. [Working with them] made me aware, when we run out of food, and we don't have anything, I have access to resources that I didn't know I had access to.**
>
> –Allina Health patient

Accountable Health Communities model and Health Related Social Needs Program

Because social conditions such as food and housing inhibit access to care and contribute to chronic disease, in 2018 Allina Health implemented the Accountable Health Communities (AHC) model through a cooperative agreement with the Centers for Medicare & Medicaid Services. In this model, care teams in 78 Allina Health sites screened patients with Medicare and/or Medicaid insurance for five health-related social needs: housing instability; food insecurity; transportation barriers; difficulty paying for heat, electricity or other utilities; and concerns about interpersonal violence. When patients identified needs, the care team provided a list of community resources. Some high-risk patients received assistance navigating to these resources.

From June 2018 through January 2022, more than 166,000 patients completed an AHC screening with 28 percent identifying at least one need (Hennepin County: 27 percent). The most frequently identified needs were food insecurity and housing instability. Patients with needs were more likely to be female; report a race of Black/African American, Multi-racial, or Native American/Alaska Native; report Hispanic ethnicity; and be younger than those without needs. Patients who use both Medicare and Medicaid insurance ("dual-eligible") were the most likely to report a need (46 percent) while those with only Medicare were least likely to report a need (14 percent). Every county demonstrated racial and ethnic disparities in need rates. Thirty-seven percent of Hennepin County equity patients identified a need compared to 22 percent of patients in the comparison population. Hennepin County had the highest racial/ethnic disparity in need rates of all counties in which Allina Health completed screenings. Allina Health defines its equity population as any patient who does not identify as white, non-Hispanic, U.S.-born, or note English as their preferred language (i.e., the "comparison population").

The AHC Cooperative Agreement ended in April 2022. At the end of 2021, Allina Health began developing an Allina Health-specific model for screening and addressing health-related social needs, the Health-Related Social Needs (HRSN) Program. In the first six months of implementing the HRSN Program, more than 85,000 patients were screened, 16 percent of whom identified a need. Additionally, more than 4,500 patients with need requested and received assistance navigating to these resources.

COVID-19 vaccine clinics

To promote equitable health care access, Allina Health partnered with community organizations from February through July 2021 to host free COVID-19 vaccine clinics. The clinics were located in and aimed at serving communities who have been disproportionately impacted by COVID-19 and have historically experienced health disparities. Allina Health invested nearly $350,000 in clinical staff time, changes to infrastructure, supplies and other expenses to offer these clinics. Additionally, nearly 300 of our dedicated employees and friends volunteered more than 1,000 hours of their time over the five-month period to serve in non-clinical roles like greeting individuals upon arrival, guiding individuals through the vaccine clinic and other activities. Through these COVID-19 vaccine clinics, Allina Health was able to vaccinate more than 4,400 people, most of whom lived in the neighborhoods surrounding Abbott Northwestern Hospital. Non-white and non-English speaking patients were also well-served. For example, the percentage of event attendees who identified as Hispanic/Latine was double that of the total eligible community population (8 vs. 4 percent). Similarly, 81 percent more Asian residents and 32 percent more Black residents attended than make up the total eligible community population (6 percent and 9 percent of attendees, respectively). Patients underutilizing healthcare were particularly well represented, with 49 percent of attendees having no eligible healthcare visits in the two years before their first community vaccination event.

In the spring of 2022, Allina Health partnered with long-time community partner, the Cultural Wellness Center and the Minnesota Department of Health to continue to provide regular, on-going access to COVID-19 vaccinations in a community setting. This partnership was highly successful with most of the vaccine recipients identifying as a person of color and in many cases, they were receiving their first dose of vaccine.

Impact Investment Portfolio and supplier diversity investments

In 2021, Allina Health allocated $30 million to create and fund the Allina Health Impact Portfolio, aimed at supporting local economic development opportunities. In the first year, $2 million of the portfolio was invested and the remaining funds are expected to be invested over a three-year period. The initial allocation of these dollars has been focused on supporting South Minneapolis. Additionally, Allina Health spent more than $18 million in supplier diversity investments. By providing capital through investments to local organizations, Allina Health can improve the health of our communities, while ensuring investments are equitable and aligned to our guiding principles and values.

LOCAL ABBOTT NORTHWESTERN HOSPITAL ACTIVITIES

Goal 1: Increase resilience and healthy coping skills in communities.

Abbott Northwestern Hospital worked to increase resilience and healthy coping skills in community by partnering with Hennepin County Public Health and numerous culturally focused community partners to expand the content, images and perspectives included in Change to Chill video and lesson offerings. This effort included the voices and perspectives of the Black/African American, Native American, Latine and LGBTQ+ communities. While the videos were created by and with youth and young adults from the neighborhoods surrounding Abbott Northwestern Hospital, they have been shared widely across the entire Allina Health system.

When the COVID-19 pandemic closed schools to in-person learning in early 2020, Allina Health and Abbott Northwestern Hospital opened its doors to allow children from the Minneapolis Public Schools to go to school virtually inside the Allina Commons. Nearly 100 students ranging in age from first grade to high school, attended school every day inside the corporate offices where they had adult supervision, access to stable internet connectivity, tutoring, meals and onsite mental health support provided.

Abbott Northwestern also supported numerous non-profit organizations that provide mental health support and services in the community by distributing more than $165,000 in charitable contributions to more than 20 organizations. By funding community partners to provide mental health support and services, we are extending the reach beyond what we can achieve with our clinical and virtual programs.

Goal 2. Reduce barriers to mental health and substance use services for adolescents.

Beginning in 2020, Abbott Northwestern focused its attention on 'going to where the kids are.'

Abbott Northwestern Hospital utilized its many community partnerships to reduce barriers to mental health and substance use services for adolescents during the COVID-19 pandemic. These partnerships included co-chairing the Hennepin County Community Health Improvement Partnership (CHIP), which distributes grant funding to 12–15 community-led groups and organizations every year working to address social isolation, community cohesion and access to mental health services. The Abbott Northwestern Hospital Foundation also distributed nearly one million dollars in grant funding to local non-profits providing emergency mental health services, culturally based community mental health support and job training and housing support. By supporting groups and organizations closest to the communities that were being hardest hit by both the pandemic and the civil unrest following the murder of George Floyd, Abbott Northwestern was able to reduce the barriers that so often prevent adolescents from accessing services and support.

Goal 3. Increase physical activity and healthy eating, promote nutrition and reduce barriers to healthy food access.

Abbott Northwestern provided food distribution opportunities in partnership with community partners The Food Group, Every Meal and Open Arms. The hospital also donated more than $100,000 to providing healthy food access programs and participated in March Food Share campaigns in both 2021 and 2022. To support active living, hospital distributed nearly 300 bicycles and helmets to first responders and children in our communities.

Goal 4. Community members access healthcare at the appropriate level in welcoming and culturally diverse facilities and settings.

In addition to the COVID-19 vaccination clinics and new Change to Chill content on identity, discrimination and mental health (described above), from 2020–2022, the hospital provided vision screenings and follow-up vision care or referrals to treatment for nearly 7,000 children in the Minneapolis and St. Paul Public Schools. Abbott Northwestern also supported access to culturally responsive care by providing more than $50,000 of charitable contribution funding to organizations that support LGBTQIA+ youth and adults, including to organizations such as myHealth for Teens and Young Adults who created a new mental health program at their Hopkins Clinic.

2021–2022 CHNA process overview

To respond to local needs and resources, each Allina Health hospital conducted its 2023–2025 CHNA independently, with support and guidance from Allina Health System Office staff. The CHNA process included involvement from local public health, residents, community partners and stakeholders. It occurred in three steps: data review and prioritization, community input and the development of a three-year implementation plan which includes both local and systemwide activities. The impact of these efforts will be tracked and evaluated over the three-year cycle.

Allina Health serves communities that are geographically, culturally, racially and socio-economically diverse. We know systemic inequity and structural racism has led to variation in community health status by factors such as race, ethnicity, income, gender, ability and more. To advance and improve health for all, Allina Health prioritizes investments to local populations facing the greatest need. To support these efforts, in 2022 Allina Health and each of its hospitals identified prioritized communities in addition to prioritized health topics.

Each CHNA builds on the learnings from the previous cycle. The 2020–2022 CHNA priorities adopted by Abbott Northwestern Hospital were mental health and wellness, physical activity and nutrition and healthcare access as its health priorities. These priorities are large and based on social determinants of health and ongoing experiences of community trauma. They require long-term effort to see significant, measurable improvement. Additionally, all these priorities were significantly exacerbated by the coronavirus pandemic, which emerged in 2020.

As a result, the goals of the 2022 CHNA process were to:

- Confirm identified priorities remain relevant and significant to communities.
- Refine our understanding of these priorities, in particular how the COVID-19 pandemic, civil unrest and increased attention on systemic inequity changed our understanding of these topics or approach to addressing them.
- Identify new or emerging community needs that may not be addressed through existing work.

Additionally, the Abbott Northwestern Hospital 2022 CHNA intentionally focused on the experiences and needs of South Minneapolis. Abbott Northwestern Hospital has been a part of this community for more than 140 years and the area was disproportionately impacted by the COVID-19 pandemic and the civil unrest following the killing of George Floyd. As such, Allina Health has committed to supporting the recovery and revitalization of the South Minneapolis community.

Abbott Northwestern Hospital Senior Leadership Team reviewed and approved the hospital plan. Allina Health Board of Directors gave final approval.

2021–2022 CHNA timeline

TIMING	STEPS
March–July 2021	**INITIAL PLANNING** Local and System Office staff meet to develop local 2022 CHNA plans, including expected CHNA teams and support and data needs
July–August 2021	**ESTABLISH PLANNING TEAMS and COLLECT DATA** Staff establish initial assessment plans, identify stakeholder groups for each hospital and share results from current implementation strategy, as appropriate
August 2021	**DATA REVIEW and ISSUE PRIORITIZATION** Regional teams meet with data review teams, using locally available data and working closely with public health. Allina Health data provided by System Office. Teams prioritize issues using locally agreed upon criteria.
September 2021	**DRAFT CHNA PRIORITIES** Community Benefit & Engagement staff review prioritized issues to summarize themes for the system. Draft system-wide implementation strategies shared with communities.
	DESIGN COMMUNITY INPUT Identify specific methods and audiences for community input on strategies, including process and questions/topics. Work with local stakeholders to recruit participants.
September–November 2021	**DATA COLLECTION** Conduct community input sessions to solicit action and implementation ideas related to priority areas identified in the data review and prioritization process and summarize information from each process.
January–September 2022	**ACTION PLANNING and REPORT WRITING** Present plans to local boards/committees/leaders for approval. Coordinate report writing and share results and action plans with key stakeholders system wide.
November–December 2022	**SEEK FINAL APPROVAL** Present plan for local approval to Abbott Northwestern Senior Leadership Team in November and final approval to the Allina Health Board of Directors in December.

Data review and issue prioritization

To complete its CHNA, Abbott Northwestern Hospital established a core planning team with representatives from the hospital's Community Engagement and Health Equity staff.

In May and June 2021, this core planning team reviewed select Allina Health patient data and public health data over three working sessions. Indicators were chosen based on priorities defined by the Center for Community Health and Allina Health equity priorities. Public health data resources included the 2019 Minnesota Student Survey, Hennepin County Public Health SHAPE 2018 Client Data Book and Adult Data Book, Bloomington Public Health 2018 Community Health Survey Databook, Minneapolis Health Status Indicators, Vital Statistics, 2015–2018 American Community Survey and the 211 dashboard. Where possible, the data was disaggregated by race and ethnicity to better understand opportunities to increase health equity in the community and among patients seen at Allina Health facilities.

Examples of indicators reviewed include, but are not limited to:

- Volume of Allina Health EMS ambulance runs by cities served in Hennepin County
- Patient and public health data by county of residence (Hennepin): demographic data (including race, ethnicity, language, age and insurance type), health-related social needs and select conditions
- Emergency room data: top three reasons for emergency room visits; suicide and self-inflicted injury encounters; and opioid overdose encounters
- Tobacco, alcohol and other drug use among adults and youth
- Rates of overweight and obesity among teens and adults
- Colorectal cancer screening rates
- Market analysis regarding expected demand for mental health and addiction services over time
- Suicide and self-harm ideation and deaths by suicide among adults and youth
- Substance use disorder treatment admissions for alcohol
- Count of deaths from opioid-related overdose
- Self-reported "bad" mental health days among adults
- Self-perceived availability of social and emotional support
- Self-perceived social isolation
- Perception of community safety
- Health insurance coverage and rates of forgone or delayed care

In total, data included more than 50 indicators related to demographics, social and economic factors, health behaviors, prevalence of health conditions and health care access.

Additionally, to ensure alignment with local public health, hospital staff reviewed preliminary findings from the Minneapolis Health Department's 2020 community health assessment (CHA), which was in draft at the time of the review. The review focused on the department's Forces of Change Assessment survey, aimed at identifying forces that affect the community and its public health. Through this survey, public health professionals were asked to provide their opinions on what current issues are influencing community health and the public health system in Minneapolis. Respondents ranked access to mental health services and medication, affordable housing and systemic racism as the top three priorities facing the community.

Findings from this data review were also summarized in an overview document, which was shared with individuals from whom CHNA feedback was later gathered. This overview described health concerns affecting residents of Hennepin County and included statistics around weight, physical activity, mental health and other factors that influence health (such as food insecurity, transportation and housing concerns).

PRIORITIZATION PROCESS

In August 2021, a survey based on the indicators listed above was shared with the West Metro Community Engagement team. This team is comprised of leaders from across the Allina Health system with representation from primary care, pharmacy, EMS, hospital operations, mental health and addiction. The function of this team is to guide the planning and deployment of Allina Health Community Engagement activities in the West Metro. The West Metro Community Engagement team members' perspective on the priority health needs of Hennepin County, based on the available data and their personal and/or professional experiencing living and working in the community, was collected via an online survey.

First, the survey asked respondents to identify the five most important health issues in Hennepin County, based on a list of 18 topics identified as concerns via the data review. Respondents could also choose to suggest additional topics for consideration. Next, respondents were asked to rank broad health categories based on a modified version of the Hanlon Method for Health Issue Prioritization. This method includes ranking health priorities based on three criteria: size of the problem and projection of future trends; seriousness of the problem; and effectiveness and feasibility of interventions. Respondents were also asked to rank each priority in terms of opportunity for improving health equity among historically underserved populations.

Fifteen individuals responded to the survey. Results were as follows:

Top five health issues facing Hennepin County:

(1) Access to mental health and substance use services (10 votes)
(2) Substance use, including drug use/abuse and alcoholism (9 votes)
(3) Housing instability and homelessness (8 votes)
(4) Poverty and income inequity (8 votes)
(5) Racial inequity (8 votes)

No additional issues were suggested for consideration.

Ranking of broad health topics (most to least important, based on modified Hanlon method):

(1) Mental health and wellness
(2) Healthcare access
(3) Substance use
(4) Social Determinants of health
(5) Healthy eating and physical activity
(6) Social isolation and community cohesion

FINAL PRIORITIES

After reviewing the results of the Hanlon prioritization survey, the CHNA core team selected these priorities for Abbott Northwestern Hospital:

- Mental health and substance use
- Preventative health education
- Social determinants of health and health-related social needs
- Access to culturally responsive care

Additionally, Abbott Northwestern Hospital prioritized the following communities for the 2023–2025 CHNA cycle:

- People with disabilities
- People living at or near poverty
- People who identify as Black, Indigenous and/or People of Color (BIPOC)
- People who identify as Lesbian, Gay, Bi-sexual, Trans, Queer and/or Questioning, and other historically underserved sexual and gender identities (LGBTQ+)

NEEDS NOT ADDRESSED IN THE CHNA

While almost all the needs identified during the CHNA process are addressed in some form through one or more of the articulated strategies, there were a few needs elevated in the CHNA assessment process that will not be addressed specifically by the implementation plan. These needs were so large that the response requires a multi-jurisdictional team to begin to address the concern. Needs such as lack of affordable housing, lack of affordable transportation and combating systemic racism will be addressed broadly in the context of the Access to Culturally Responsive Care and the Social Determinants of Health and Health Related Social Needs strategies. The goal is to develop new partnerships via these strategies which will inform future collaborations and goals to address priorities of this magnitude.

Community input

To further refine its priorities, Abbott Northwestern Hospital staff conducted key informant interviews and contracted with community partners to host focus groups with community members. Hospital staff also facilitated one focus group with community-based mental health professionals in South Minneapolis. Interviews and focus groups focused on gathering input from people living and working in South Minneapolis, specifically the area immediately surrounding the hospital and Allina Commons (Allina Health's corporate offices). Diversity of experience was sought in terms of gender, culture, and age, with a particular focus on the experiences of people who identify as Black or African American, Hispanic/Latine, Indigenous and/or Somali. These cultural communities were prioritized based on the demographics of the geographic area immediately surrounding the hospital and Allina Commons and opportunities for improving health equity.

From August through September 2021, hospital staff completed 16 key information interviews with nonprofit, faith and business leaders in South Minneapolis. Specifically, interviews were conducted with representatives from:

- St. Vincent de Paul, a non-profit that works to lift people out of poverty
- The Family Partnership, a mental health and educational agency
- Minneapolis Police Department (MPD) Crime Prevention
- Project for Pride in Living, an affordable housing and workforce development organization
- Cultural Wellness Center, an agency providing culturally based community health services and education
- REAL Minneapolis, a nonprofit focused on supporting the needs of those experiencing the greatest challenges in our community
- St. Peters African Methodist Episcopal (AME) Church
- Briva Health, a MNSure navigator organization that connects people to affordable health insurance
- Native American Community Development Institute (NACDI), an organization that supports the Native American community living in the Twin Cities
- Powderhorn Park Neighborhood Association, a coordinating organization working on behalf of neighbors near Abbott Northwestern Hospital
- Division of Indian Work (DIW), a Native American cultural and educational support organization
- Local business owners and residents

From September through October 2021, the hospital contracted with the following local nonprofits to host community dialogues with residents who identify as part of the following cultural groups:

- Banyan Community (South Minneapolis Hispanic/Latine community)
- Cultural Wellness Center (South Minneapolis Black and African American community)
- Division of Indian Work (Minneapolis Indigenous community)
- Open Path Resources (Twin Cities Somali community)

Contractors were chosen based on their proven capacity working with South Minneapolis residents who identify as part of the cultural communities listed. Each dialogue lasted approximately 60-minutes in length. The purpose of the dialogues was to explore resident perspectives on the proposed health priorities which the hospital will focus its community efforts on in 2023–2025, including recommended actions. The Abbott Northwestern Hospital CHNA team provided a draft discussion guide with which to conduct the community dialogues. The community facilitator consulted on the discussion guide, collaborated with Abbott Northwestern Hospital staff to design culturally appropriate community dialogues, advised on and assisted with recruitment strategies, facilitated the dialogues, and provided feedback on themes/results identified by hospital staff.

Hospital staff took notes during the dialogues, analyzed results, completed reports summarizing dialogue results and contracted with transcription and translation services, as needed.

An additional focus group with mental health providers occurred in October 2021 and was convened and facilitated by Allina Health Mental Health and Addiction staff. Participants included representatives from the following organizations providing mental health support in South Minneapolis:

- Cultural Wellness Center
- American Indian Community Development Corporation
- Creative Kuponya
- Minneapolis Park & Recreation Board

Prior to the interview or focus groups, participants were provided a list of proposed priorities and the overview of key Hennepin County health indicators described above.

The interviews and focus groups sought feedback on the following questions:

- What factors in the community most affect health?
- Are there new or emerging health priorities in your community?
- What are the most important factors affecting mental health (including substance use) in your community?
- What makes it hard for you and others in your community to access care when you need it? Are there any services that are particularly difficult to access? Why?
- How have you seen factors such as race, ethnicity and language impact the health of your community?
- How do you see Allina Health making it easier or more comfortable for ALL patients to access health care? What can Allina Health do better?
- By 2025, what is your vision of health for your community?

COMMUNITY INPUT RESULTS

Key informant interview results

Overall themes

Conversations identified three emerging themes among all the key informant interviews:

- Trauma, mental illness and substance abuse have been increasing in recent years
- Healthcare has a role to play in addressing homelessness
- Need to build trust with communities of color

Focus group results

Overall themes

Community conversations identified three emerging themes among all five focus groups:

- Provide care the way community needs it
- Preventative care and chronic care management
- Safety and security

The participants mentioned the need for more providers who share the same identities as the communities they serve (e.g., language, culture, age, race, sexual and gender identities) to deliver care. The groups expressed the need for additional preventative health education, as well as the need to provide culturally appropriate and responsive care. There is an acute need for integrative, holistic care and wrap-around services, especially when addressing substance abuse and opioid use.

Vision for health

Community conversation participants envisioned a community where there is no stigma or judgement attached to those patients who have different cultural heritage, beliefs and/or are from diverse communities. There is an increased awareness within the community regarding mental health conditions, use/misuse of substances and the resources available in the community. Participants envisioned holistic wrap-around, culturally responsive and inclusive care for all conditions. They also imagined a community that has an adequate number of providers that look like the communities they serve, availability of culturally appropriate care and diversity of clinical staff serving the patients. Participants shared a vision of a community where all people are treated equally with respect for their cultural background, beliefs and values. The participants also described a health care system that is deeply engaged and involved in the life of the community, supportive of community development and dedicated to creating the sense of safety and security for all.

Existing strengths

Focus group participants recognized the strong, impactful presence of various community organizations already working on addressing some of the health needs. There is an existing collaborative network of culturally diverse groups working to address the needs of the community. During the conversations, Allina Health was recognized as a community partner willing to lend resources (such as donation of space and charitable contributions), assist in creating safer communities, and listening to the feedback from the community organizations.

Allina Health's role and opportunities

- Expand holistic wrap-around mental health and addiction services in the community that support a patient's cultural heritage and identity.
- Include social service components (e.g., financial assistance, housing, navigation resources) into standard provision of care.
- Make trauma-informed, culturally responsive, inclusive, compassionate service a standard of care
- Focus on deeper and more intentional engagement with and support of community partners and organizations.
- Assets of faith community (mosques, gathering spaces, Imams) and family should be leveraged to deliver health information and build stronger healthcare/community connections.
- Spiritual health should be included in the definition of health and well-being.
- Allina Health should take an active role in recruiting, training and employing diverse providers of all levels who represent the communities served by the organization (race, culture, faith, sexual and gender identities).
- Actively address health related social needs (e.g., housing, transportation, food security) in the community.

SYSTEMWIDE COMMUNITY INPUT ACTIVITIES AND RESULTS

In addition to the local community engagement activities described above, Allina Health systemwide staff solicited feedback applicable to all Allina Health regions. This feedback focused on groups with which Allina Health has unique expertise regarding community needs and included conversations with Allina Health staff as well as patients/clients.

Based on their unique roles supporting patients, interviews were conducted with Allina Health staff from the following groups:

- Community Paramedics
- Language Services/Interpretation
- Spiritual Care

Additionally, community engagement staff partnered with staff from Courage Kenny Rehabilitation Institute (CKRI) to conduct three virtual community dialogues: two with individuals living with a disability and one with caregivers of people with a disability. Care was taken to recruit diverse participants in terms of geographic location, type of disability, gender and cultural group. Caregivers included those supporting family members with a disability as well as those working professionally in residential facilities (e.g., group homes).

In total, 12 interviews and focus groups took place between March and May 2022 with 27 people. The conversations were facilitated by Allina Health representatives. Each discussion lasted 60-minutes. 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. The conversations included topics such as health equity, access to services and care, culturally appropriate care, and many others.

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

- What factors in the community most affect health?
- Are there new or emerging health priorities in your community?
- How have you seen factors such as race, ethnicity and language impact the health of the patients you serve?
- How do you see Allina Health making it easier or more comfortable for ALL patients to access healthcare?
- In your opinion, what are the most important things Allina Health can do to help achieve health equity?
- By 2025, what is your vision of health for the community/patients you serve?

Community/stakeholder conversations' results

Overall themes

Community conversations identified mental health, substance use and social determinants of health as the most important priorities to address, with specific focus on housing and transportation needs. In general, social connectedness/isolation remains a key concern across all communities, along with the need for access to community-specific care and support navigating complex care systems. The participants identified an increased need for workforce education around stigma and diversifying clinical staff pool to be more representative of the communities served.

Vision for health

Community conversation participants envisioned a community where there is no stigma attached to those with mental health concerns and substance use or seeking help for both. There is an increased awareness within the community regarding mental health conditions, use/misuse of substances and the resources available in the community. Participants also described a health care system that allows doctors to have stronger personal connections with their patients and that involves more discussion, holistic care and fewer prescription medications. They also imagined a community that has an adequate number of providers that look like the communities they serve, availability of culturally appropriate care and diversity of clinical staff serving the patients. Participants shared a vision of a community where all people are treated equally with respect for their cultural background, beliefs and values.

Existing strengths

Participants identified strengths in their local community that contribute to addressing health needs, such as existing coalitions and groups working on social isolation, mental health and substance use priorities. Participants also felt there is a strong presence in the community services to help address HRSN; however, service availability varies based on geography. The greatest asset mentioned in the conversations was Allina Health staff, their compassion and resiliency.

Allina Health's role and opportunities

Community conversation participants discussed ways Allina Health could help address the priority areas. Ideas included:

- Create better access to community-specific care and support navigating complex care systems.
- Create better access to culturally appropriate, language-specific care.
- Employ more multi-lingual, culturally and racially diverse providers and other clinical staff.
- Create and strengthen partnerships with culturally focused community organizations.
- Engage in community-health care partnership and integration work.
- Continue to work on education and stigma reduction around disabilities, mental health conditions and substance use.

2023–2025 implementation plan

After the data review and community input phases, Abbott Northwestern Hospital's final phase of the CHNA process was to develop an implementation plan that includes goals, strategies, activities and indicators of progress.

As part of this phase, Abbott Northwestern Hospital staff met in March, April and July 2022 with leaders from each of Allina Health's nine community engagement regions to discuss the results of each hospital's data review, prioritization and community input processes. Together, they identified priority needs that occur in all Allina Health geographies.

Based on this process, Allina Health will pursue the following systemwide priorities in 2023–2025:

- Mental health and wellness
- Substance abuse prevention and recovery
- Social determinants of health and health-related social needs
- Access to culturally responsive care

The prioritized communities identified by each Allina Health hospital were also compared and the most common were identified for system action:

- People with disabilities
- People living at or near poverty
- People who identify as Black, Indigenous and/or People of Color (BIPOC)
- People who identify as Lesbian, Gay, Bi-sexual, Trans, Queer and/or Questioning, and other historically underserved sexual and gender identities (LGBTQ+)

Collectively and individually, these communities are not monolithic. They are large, diverse and intersect with one another. Specific activities will further refine intended audience based on disparities particular to the intended outcomes (e.g., social isolation, tobacco use) and factors such as community capacity to partner.

By developing systemwide initiatives to address these priorities, Allina Health ensures efficient use of resources across its service area and provides hospitals with programs they can adapt to meet their community's unique needs.

Abbott Northwestern Hospital's final implementation plan incorporates Allina Health's systemwide strategies and activities, as well as local ones. It integrates community input, evidence-based strategies (i.e., strategies whose effect has been proven) and promising ideas with potential for addressing the priorities. For the purposes of the implementation plan, the "Mental Health and Substance use"-priority was split into two priorities ("Mental Health and Wellness" and "Substance Use Prevention and Recovery"). The plan reflects programs and services available through other organizations in the community, Abbott Northwestern Hospital resources and Allina Health's systemwide contributions. To make progress in achieving health equity, Allina Health system resources will prioritize partnerships and activities that engage the four communities listed above. Abbott Northwestern Hospital will prioritize hospital-specific activities that engage the local prioritized communities.

PRIORITY 1: MENTAL HEALTH AND WELLNESS

Goal 1: Increase resilience and healthy coping skills in Hennepin County.

Strategies

- Implement initiatives that address trauma and increase community safety in Minneapolis.
- Improve social connections and social cohesion in the communities served by Allina Health.
- Increase resilience and support the creation and maintenance of environments that contribute to positive mental well-being among youth.
- Improve adults' confidence and skills around talking with youth about mental health, substance use and other issues affecting their mental well-being.

Activities

- Implement programs to reduce gun violence.
- Participate in Minneapolis-based community coalitions working to reduce violence, such as Minneapolis LEAD, HEALS 2.0 and targeted community safety initiatives.
- Provide leadership to Minneapolis-wide community safety strategy and initiatives such as the Lake Street Greenway Partnership and HEALS 2.0.
- Establish or strengthen partnerships with organizations who serve older adults in the prioritized communities to offer Hello4Health content/resources and opportunities for connection.
- Participate in community coalitions in Allina Health's service area aimed at improving social connections, social cohesion and a sense of belonging.
- Offer and support opportunities, resources and activities that foster belonging and social cohesion among community residents.
- Connect patients who screen positive for loneliness or social isolation with community resources that provide opportunities for social connection.
- Provide schools in the Allina Health service area with Change to Chill and/or Health Powered Kids content and tools; staff training; and financial support for creating a space for students and staff to relax, reflect and recharge.
- Co-create resources to build healthy coping skills and community protective factors with schools, community organizations, and other groups in which youth and families in the prioritized communities gather and feel belonging (shared with substance abuse prevention and recovery priority).
- Increase Change to Chill and Health Powered Kids content for adults who support school-age youth.
- Develop a process for providers to introduce guardians of school-age youth to Change to Chill and Health Powered Kids.

Community partners

- Lake Street Greenway Partnership leadership team
- Minneapolis LEAD program
- Lake Street Council
- Hennepin County Community Health Improvement Program (CHIP)
- Change to Chill School Partnership schools

Goal 2: Increase access to mental health services in Hennepin County.

Strategies

- Support public policy and advocacy efforts to improve access to mental health services.

Activities

- Lead and participate in community coalitions focused on improving access to mental health and addiction services.

- Support and advocate for local, state and federal policies aimed at increasing access to mental health services.

Community partners

- Hennepin County CHIP

PRIORITY 2: SUBSTANCE ABUSE PREVENTION AND RECOVERY

Goal 1: Decrease substance misuse in the communities served by Allina Health.

Strategies

- Improve environmental factors and individual knowledge and skills associated with decreased substance misuse, with a focus on youth, adolescents, and older adults.
- Improve adults' confidence and skills around talking with youth about mental health, substance use and other issues affecting their mental well-being.

Activities

- Incorporate age-appropriate substance use education into Allina Health community health improvement program content and resources.
- Participate in and support the expansion of community coalitions in Allina Health's service area aimed at improving community protective factors associated with decreased substance misuse.
- Co-create efforts to build healthy coping skills and community protective factors with schools, community organizations, and other groups in which youth and families in the prioritized communities gather and feel a sense of belonging.
- Increase Change to Chill and Health Powered Kids content for adults who support school-age youth.
- Advance local, state and federal policies aimed at making it more difficult and/or less appealing to access alcohol, tobacco and other drugs.

Community partners

- Hennepin County CHIP
- MyHealth Clinic for Teens and Young Adults
- Annex Teen Clinic
- Avivo

Goal 2: Decrease harm and deaths related to substance misuse, with a focus on opioids.

Strategies

- Decrease access to opioids within community.
- Improve access to continuum of substance use disorder care.
- Decrease youth access to substances.

Activities

- Provide and promote education, outreach and resources for proper disposal of prescription drugs.
- Provide planning, data and in-kind resources to support community planning efforts to deploy opioid settlement funds.
- Advance local, state and federal policies aimed at decreasing access to opioids in healthcare and community spaces.

- Advance local, state and federal policies aimed at increasing access to substance use care such as removing barriers to community and telephonic/virtual provision of care and other evidence-based treatment programs (e.g., Medically Assisted Treatment (MAT)).
- Strengthen internal and external education activities regarding when and how to access continuum of substance use and addiction care, including resources for secondary prevention, cessation and harm reduction.
- Offer and promote culturally responsive stigma elimination resources related to experiencing addiction and accessing substance use services.
- Lead and participate in community coalitions focused on improving access to mental health and addiction services.

Community partners

- Hennepin County CHIP
- Local faith community leaders
- Avivo

PRIORITY 3: SOCIAL DETERMINANTS OF HEALTH AND HEALTH-RELATED SOCIAL NEEDS

Goal 1: Improve access to community resources that provide food, housing, transportation and loneliness/social isolation support to Allina Health patients and communities.

Strategies

- Continue to build a sustainable network of trusted community partners who can support patients and community members in addressing their health-related social needs, with a focus on housing, food, transportation and loneliness/social-isolation.
- Reduce community resource gaps in the communities served by Allina Health.

Activities

- Increase number and type of social service agencies we refer patients to via HRSN Program, including those listed on patients' community resource summaries and those partnering in two-way referrals.
- Establish a model to increase community-based organizations' capacity to respond to patient and community needs through financial contributions, exploration of reimbursement and financing models, data-sharing, employee volunteerism and policy advocacy.
- Partner with community-based organizations to address select patient needs at point of care and connect qualifying patients to community programs or resources that support ongoing need.
- Establish a model to reduce resource gaps in the communities served by Allina Health. Elements to include but not limited to: (1) strategic financial contributions, (2) coalition participation and policy advocacy, and (3) exploration of opportunities to provide services to patients for which there are currently no or limited resources available.

Community partners

- Hennepin County CHIP
- Pillsbury United Communities
- Division of Indian Work
- Sabathani Community Center Food shelf

Goal 2: Improve the long-term social, physical and economic conditions in the communities served by Allina Health, to improve health and reduce the presence of health-related social needs.

Strategies

- Operate as an anchor institution by using the collective strength of Allina Health as a care provider, employer, purchaser and community partner to eliminate systemic inequities and racism.

Activities

- Direct charitable contribution dollars to organizations that improve the physical, social and economic vitality of communities served by Allina Health.
- Lead and participate in coalitions, policy and advocacy efforts to improve social conditions related to health equity and social justice.
- Invest Allina Health Impact Portfolio dollars in opportunities that support economic vitality in Allina Health service areas.
- Prioritize the inclusion of businesses owned by Black, Indigenous, people of color and other underrepresented and underserved people when purchasing goods or services.

Community partners

- Cultural Wellness Center
- Neighborhood Development Center
- Division of Indian Work
- Twin Cities LISC
- Lake Street Council
- Mortenson Construction
- JE Dunn

PRIORITY 4: ACCESS TO CULTURALLY RESPONSIVE CARE

Goal: Increase access to care, services and programs that are culturally specific, honoring and appropriate.

Strategies

- Improve the cultural responsiveness of Allina Health programs and services.
- Improve access to community resources who specialize in meeting the unique needs of prioritized communities.
- Increase diversity of Allina Health workforce, with a focus on leadership to ensure we reflect the communities in which we live and serve.
- Create new workforce development opportunities focused on jobs that recruit participants from diverse communities and provide living wage careers.
- Create culturally reflective spaces.

Activities

- Implement the Mortenson Community Workforce Program for the Abbott Northwestern Hospital Surgical and Critical Care Pavilion project.
- Develop new partnerships with Minneapolis area high schools to introduce youth to the career options at Abbott Northwestern Hospital.
- Contract with a Native American architect to plan and design a new Native healing space inside the future Abbott Northwestern Hospital.
- Utilize existing community- and patient-generated data sources to inform a human centered design strategy for the future Abbott Northwestern Hospital.

- Incorporate community artists in the creation of murals and art that is reflective of the culture and traditions of those living around Abbott Northwestern Hospital.
- Develop and strengthen community partnerships to co-create, implement, and evaluate culturally responsive community health improvement programming and resources.
- Provide a greater percentage of Allina Health community health improvement content compliant with ADA standards and in languages other than English.
- Increase staff training and education opportunities regarding the provision of culturally responsive, inclusive care to patients in the prioritized communities.
- Direct Allina Health resources to organizations that provide care tailored to meeting the needs of the prioritized communities.
- Improve processes and tools for referring to community-tailored social service agencies via HRSN Program, including those listed on patients' community resource summaries and those partnering in two-way referrals.
- Implement initiatives aimed at recruitment, retention, and promotion of diverse staff.

Community partners

- Cultural Wellness Center
- Neighborhood Development Center
- Division of Indian Work
- Mortenson Construction
- Minneapolis area high schools, including South High School, Cristo Rey Jesuit High School and Hope Academy
- City Mischief artist collective

PRIORITY 5: PREVENTATIVE HEALTH EDUCATION

Goal: Increase access to preventative health education in communities facing the greatest health disparities.

Strategies

- Create and deploy culturally specific preventative health education information by co-creating opportunities, tactics and messages with key stakeholders.
- Deploy culturally specific Change to Chill content to school partners and youth in the west metro.

Activities

- Create and deploy the Black/African American physical activity promotion program Helmet Hair widely in communities outside of South Minneapolis.
- Engage culturally specific media outlets (Spokesman Recorder, KALY radio, etc.) and deploy community-specific health information in the appropriate format and/or language.
- Work with Change to Chill School Partnership schools to deploy new videos and teaching materials and identify additional school partnership who would benefit from these resources.

Community partners

- Cultural Wellness Center
- Neighborhood Development Center
- Division of Indian Work
- Banyan Community
- Open Path Resources
- Annex Teen Clinic
- Urban Ventures

RESOURCE COMMITMENTS

To effectively implement these strategies and activities, Abbott Northwestern Hospital will commit financial and in-kind resources, such as specific programs and services and staff time to serve on community collaborations. The hospital will also encourage staff to volunteer with local organizations.

EVALUATION OF ACTIVITIES

Abbott Northwestern Hospital and Allina Health will continue to engage in assessment and engagement activities throughout the implementation phase. Abbott Northwestern Hospital will develop specific work plans for implementing the strategies and activities outlined in the implementation plan, including further refining intended audience for each activity.

During the 2023–2025 CHNA period, Abbott Northwestern Hospital will monitor the general health and wellness of the community by monitoring two county-level health indicators: (1) Average number of physically unhealthy days, and (2) Average number of poor mental health days residents report in the last 30 days, as measured by the Behavioral Risk Factor Surveillance System (BRFSS) and local public health surveys, as applicable.

Additionally, the hospital will establish or continue evaluation plans for specific programs and initiatives (e.g., HRSN Program). Evaluation plans will include process measures, such as participant or partner satisfaction, goal completion, people served and dollars contributed, to monitor reach and progress on planned activities. Where possible, Allina Health will also assess outcome metrics to evaluate the effects of its initiatives on health and related outcomes (see Appendix for examples).

Conclusion

Abbott Northwestern Hospital and Allina Health will work diligently to address the identified needs prioritized in this process by acting on the strategies and activities outlined in this plan.

For questions about this plan or implementation progress, please contact: Alison Pence, Community Engagement Lead for West Metro region, or Christy Dechaine, Community Benefit and Evaluation Manager.

Copies of this plan can be downloaded from Allina Health's website: https://www.allinahealth.org/about-us/community-involvement/need-assessments.

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- Allina Health System Office staff and interns who supported the process;
- Other staff at Allina Health and Abbott Northwestern Hospital who provided knowledge, skills and leadership to bring the assessment and plan to fruition.

Appendix: Example Allina Health systemwide performance indicators

Health Priority	CHNA Goals	Example progress indicators	Example program-specific, intermediate outcomes
Mental health and wellness	Increase resilience and healthy coping skills.	• Progress on workplan to implement process for providers to introduce patients to community health programs. • Number of middle and high schools with a Chill Zone • Participant satisfaction with community health programming	• Increase in coping self-efficacy among youth exposed to CTC content • Increased sense of social support among Hello4Health program participants
	Increase access to mental health services across the Allina Health services area.	• Changes to Allina Health, state and local policies aimed at improving access to mental health and substance use services successfully implemented	• Improved access to mental health services amongst Allina Health patients (specific indicator TBD)
Substance abuse prevention and recovery	Decrease substance misuse in the communities served by Allina Health.	• Number of people reached via CTC, HPK and/or Hello4Health substance use content	• Increase in confidence discussing substance use with school-age youth among adults exposed to CTC and HPK content
	Decrease harm and deaths related to substance misuse, with a focus on opioids.	• Pounds of prescription medication collected via Allina Health drug disposal boxes • Changes to Allina Health, state and local policies aimed at decreasing access to opioids and/or improving access to substance use care successfully implemented	• Improved access to addiction services amongst Allina Health patients (specific indicator TBD)
Social determinants of health and health-related social needs	Improve access to community resources that provide food, housing, transportation and loneliness/social isolation support to Allina Health patients and communities.	• Number of patients served via tracked referral partnerships • Qualitative feedback from key community partners • Estimated resource saturation in CHNA counties	• Reduced HRSN rate among Allina Health patients
	Improve the long-term social, physical and economic conditions in the communities served by Allina Health.	• Percent Impact Portfolio dollars invested	
Access to culturally responsive care	Increase access to care, services and programs that are culturally specific, honoring and appropriate.	• Percent CTC, HPK and/or Hello4Health content provided in languages other than English • Percent Allina Health managers and above who identify as people of color	• Outcome measure to be determined

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