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

Regina 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 Regina Hospital located in Dakota 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 Regina Hospital:

1. **Mental health**
2. **Overweight/obesity**
3. **Support services for the aging continuum**

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:**
Improve mental well-being of teens, adults and seniors in Dakota County.

**Overweight/obesity goal:**
Decrease the percentage of the population who is overweight or obese.

**Aging continuum goal:**
Broaden the array of programs and services available to support the aging continuum.
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.

Regina Hospital has been a part of Allina Health since 2014. The purpose of this report is to share the current assessment of community health needs most relevant to the community served by Regina 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 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.
Hospital description and service area

Regina Hospital is located 20 minutes southeast of the Twin Cities in Hastings, Minnesota. Faithful to its Catholic traditions of respect for human life, the medical center serves the community by providing exceptional care, preventing illness, restoring health and providing comfort to patients entrusted in its care. The medical center is comprised of a 57-bed acute care hospital with attached senior-living services, including a 130-unit assisted living and memory care, community adult day services, a 61-bed nursing home and three multi-specialty clinics, including a clinic in Prescott, Wisconsin. The center employs almost 400 employees. Regina Hospital has a long history of working to improve health in the community it serves through charitable giving and direct programming efforts which address health needs in the community. The Regina Foundation was established for the sole purpose of fundraising bequests and donations to support the activities of Regina Hospital and the neighboring Senior Living facility, which is owned and operated by the Benedictine Health System.

Community served and demographics

Regina Hospital’s primary service area is Dakota County—a suburban and rural community located southeast of St. Paul, Minnesota. Dakota County was also the focus of inquiry for Regina Hospital’s CHNA.

According to the U.S. Census Bureau’s Decennial Census, an estimated 414,686 people reside in the 562.02 square mile area occupied by Dakota County. The population density, estimated at 737.8 persons per square mile, is greater than the national average. The median age in Dakota County is 37 years, and approximately 25 percent of its total population is under age 18. As with Minnesota as a whole, Dakota County’s racial and ethnic diversity has increased in the past few years. Almost one-fifth (19.4%) of Dakota County residents are people of color—primarily Hispanic or Latino (6.7%), Black (5.9%) or Asian (5.0%). An additional 0.5% of the population identifies as American Indian or Alaska Native alone. In 2014, approximately 9.3% of residents were foreign born and 4.2% had limited English proficiency (U.S. Census Bureau, American Community Survey (ACS), 2010–2014, 5-year estimates). The median income in 2014 was $76,269 with 7.3% of residents living in households with income below the Federal Poverty Level (U.S. Census Bureau, 2014 Small Area Income and Poverty Estimates).

Dakota County residents face many of the same health concerns common across the United States. Although more people are insured than in the past, 17.4% self-report that they do not have a regular doctor (Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System). Further, the region has an 807:1 mental health provider to resident ratio, compared with Minnesota’s overall mental health provider ratio of 529:1 (County Health Rankings, 2015). Additionally, approximately 63% of area adults are overweight or obese and 9.8% report poor general health (U.S. Census Bureau, ACS, 2009-2013, 5-year estimates). Additional information about Dakota County can be found online at Minnesota Compass.
Evaluation of 2014-2016 Implementation Plans

During 2014–2016, Regina Hospital addressed needs identified in its 2013 assessment: obesity in children and adults, health care access, cancer, mental health and addiction. Some initiatives were led by the hospital while others were part of coordinated activities across the health system. 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™ (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 deep-fried 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, volunteers and employees.
Hospital-specific activities

Goal 1: Promote increased physical activity and proper nutrition to fight obesity in adults and youth.

Through a three-year Healthy Community Partnership grant, Regina Hospital provided over 800 health screenings, 200 health coaching sessions and dozens of other health promotion activities. Approximately 2,000 people were reached as a result of these activities.

Goal 2. Increase access to health care.

Regina Hospital has been participating in the MNSure Exchange to help patients enroll in health insurance plans. It has been playing an active role in helping our patients navigate the exchange to find public insurance plans or subsidized plans that will help them and their families maintain health care coverage. Additionally, Regina Hospital staff hosted an outreach event at a farm-truck food market gathering to help educate community members about MNSure.

Goal 3. Promote cancer screenings.

Over the course of 2013 and 2014, Regina Hospital hosted seven Mingle and Mammogram parties—events through which dozens of patients received mammogram screenings. To promote colorectal cancer screening, Allina Health Clinics staffed the Don’t Fear the Rear campaign and parade, providing information to an estimated 3,000 people.

Goal 4. Mental health improvement and suicide prevention

Change to Chill mental health and stress management resources were provided to area middle schools and high schools in October of 2014. Over 1,400 students were provided these resources to help find ways to better manage stress and balance their lives. Additionally, Allina Health began providing annual financial support for the Hastings High School Peer Helper program.

Goal 5. Provide patient education about misuse of prescription drugs.

Responding to a recent survey conducted by the Dakota County Public Health Department, which showed an increasing concern about misuse of prescription drugs in the community, Regina Hospital conducted a presentation with a question-and-answer session about the proper use of prescription drugs. The hospital has also partnered with the American Drug Council to increase awareness of prescription drug misuse.
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.

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<tr>
<th>TIMING</th>
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<tr>
<td>JULY – SEPTEMBER 2015</td>
<td><strong>ESTABLISH PLANNING TEAMS and COLLECT DATA</strong></td>
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<td>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.</td>
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<td>OCTOBER – JANUARY 2016</td>
<td><strong>REVIEW DATA and PRIORITIZE ISSUES</strong></td>
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<td>Review data with stakeholders and complete formal prioritization process, using Hanlon method. Review prioritized issues and summarize themes for the system.</td>
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<td>FEBRUARY 2016</td>
<td><strong>DESIGN COMMUNITY INPUT</strong></td>
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<td>Identify specific methods and audiences for community input on strategies, work with vendor to design process and questions/topics and recruit participants.</td>
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<td>MARCH – JUNE 2016</td>
<td><strong>GATHER COMMUNITY INPUT and DEVELOP IMPLEMENTATION PLAN</strong></td>
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<td>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.</td>
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<td>JULY – SEPTEMBER 2016</td>
<td><strong>PREPARE REPORTS AND SEEK INTERNAL SUPPORT/APPROVAL</strong></td>
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<td>Share results and action plans with key stakeholders systemwide. Present plans to local boards/committees/leaders for approval.</td>
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<tr>
<td>OCTOBER – DECEMBER 2016</td>
<td><strong>SEEK FINAL APPROVAL</strong></td>
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<td>Staff present plan to Allina Health Board of Directors for final approval.</td>
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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 Dakota 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 25 stakeholders representing broad interests of the community attended one or more meetings in November and December 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:

- City of Hastings
- Coborn’s Grocery
- Dakota County Public Health
- First Street Clinic, part of Allina Health
- Hastings Chamber of Commerce
- Hastings Community Center
- Hastings Community Education
- Hastings Family Services
- Hastings Public Schools (middle and high schools)
- Hastings Senior Center
- Hastings United Way
- Hastings Walgreens
- Hastings YMCA
- Pleasant Hill Public Library
- Regina Hospital Foundation
- Smead Manufacturing
- Spiral Natural Food Co-op

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
2. Overweight/obesity
3. Support services for the aging continuum

Needs not addressed in the CHNA

Many other issues were discussed and prioritized, but none scored as highly as the priorities that were ultimately chosen and some were able to be included within the top priorities, such as various aspects of the support services for the aging continuum.
Community Input

Once priority issues were identified by community stakeholders, Regina Hospital solicited broad feedback from the community on the appropriateness of the identified priority areas as well as how the medical center 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?

One community dialogue for Regina Hospital was held in Hastings, MN, on March 29, 2016, and one meeting with the Community Health Advisory Group was held on April 12, 2016. A total of 11 people attended, including participants from local government, non-profit organizations, area businesses, advocacy groups and community members. An online survey was offered for people who could not attend the community dialogues but wanted to provide input on the assessment. Twenty-four people completed the survey.

Community dialogues/ focus groups results

Mental health

Vision for health

Participants envisioned a community where residents have access to many different mental health services and treatment options. There are enough mental health practitioners so people can be seen in a timely fashion, and providers take a proactive approach to treatment. Additionally, there is no stigma surrounding people with a mental health diagnosis. The community also has the infrastructure to support family members of those affected by mental health conditions.

Existing strengths

Dakota County has a variety of effective programs to reduce the stigma of mental health conditions, including the “Make It OK” program. Additionally, Adult Mental Health First Aid, Adolescent Mental Health First Aid and QPR suicide prevention training are available to community members wanting to learn how to help and support individuals experiencing a mental health crisis.
Allina Health’s role and opportunities

During the community dialogues, participants discussed ways Allina Health could help address the priority area. Ideas include:

- Develop a media campaign that reduces stigma of mental health conditions.
- Educate people about employee assistance programs (EAPs) and encourage people to take advantage of that assistance.
- Partner with National Alliance on Mental Illness (NAMI) to offer trainings for peer-to-peer support programs.
- Provide supports and education such as a mentoring program, job coaching and de-escalation trainings to better equip local service providers working with individuals who live with mental health conditions.
- Offer evening and weekend appointments for mental health services, including psychiatric services, so people do not have to miss work to see their health care provider.

Overweight/obesity

Vision for health

Participants envisioned a community where residents have assistance in developing healthy habits, regardless of the setting. Programs reach out to youth and work with parents to approach these issues holistically. Participants described a desire for a paradigm shift so the focus is on healthy living. There is no stigma attached to people who deal with weight issues. Participants also envisioned a seamless referral process between medical providers and community organizations that offer things like nutrition and exercise classes.

Existing strengths

Dakota County has many community organizations that focus on providing resources for developing and maintaining a healthy lifestyle. For example, the YMCA’s REVIVE program is a new referral program for children which includes a YMCA membership for the entire family.

Allina Health’s role and opportunities

During the community dialogues, participants discussed how Allina Health could help address the priority area. Ideas include:

- Sponsor seminars, classes and programs to promote healthy living, including nutrition tours, cooking classes, support groups and wellness contests.
- Support the implementation of healthy food policies at worksites and schools.
- Partner with the YMCA to develop programs and help people achieve their weight-loss goals.
- Provide education about nutrition and physical activity through yearly consultations or free classes.
- Facilitate and coordinate more evidence-based programs like Health Powered Kids.
- Have a dietician available for consultations during annual patient visits.
Support services for the aging continuum

Vision for health

Participants envisioned a community that is designed to enable people of all ages to actively participate in community activities and to be treated with respect. They imagined an expanded base of local providers offering affordable homecare services that allow elderly residents to remain in their own homes as long as they wish. Participants also described a community that has greater resources and programs to support families in caring for their aging loved ones.

Existing strengths

The community has a very engaged senior center that many older adults utilize. They mentioned some transportation services that are in place for older adults, specifically Just Friends and DARTS. The Silver Fit and Silver Sneakers programs offered through the YMCA are good resources that help keep seniors physically active. Older adults also benefit from Meals on Wheels and other grocery delivery services.

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 and promote education or prevention classes for older adults and their families focused on health topics, including nutrition, physical activity, falls prevention and social connectedness.
- Provide memory care or respite care programs to those in need.
- Develop more transportation options for seniors to get to medical appointments or other activities in the community.
- Partner with the city or other organizations to pursue initiatives that allow older adults to age in place.
- Educate the community on what services are already available, possibly promoting resources like MNHelp.info or United Way 211.
- Participate in the Hastings Comprehensive Community Plan as an advocate for health equity policies, accessible housing, aging-in-place housing options and to ensure Hastings is an “age-friendly” community.
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 Regina Hospital: 84**

**Rank of Priorities:**
1. Mental health (1.62 mean score)
2. Overweight/obesity (1.78 mean score)
3. Support services for the aging continuum (1.86 mean score)

**Mental health:**
- Allina Health’s role (top 3):
  1. Offer classes or support groups related to health issues
  2. Share information about health through seminars, meetings or websites
  3. Make it easier to use our health care services
- Most important thing to do:
  - Increase access to mental health providers and clinics
  - Educate and eliminate stigma, especially in schools and community
  - Increase number of mental health providers
- Comments:
  - We need to make it OK to talk about mental health
  - Offer more support groups
  - Work with schools to provide more mental health resources

**Overweight/obesity:**
- Allina Health’s role (top 3):
  1. Help create environments that make the healthy choice the easy choice
  2. Offer classes or support groups related to health issues
  3. Share information about health through seminars, meetings or websites
- Most important thing to do:
  - Community classes for healthy eating/nutrition and physical activity at little or no cost
  - Educate and engage in schools
  - Have more affordable places to workout
- Comments:
  - Education on how to balance life with healthy lifestyles
  - More integrative medicine
  - Offer Weight Watchers classes
Support services for the aging continuum:

- Allina Health’s role (top 3):
  1. Offer classes or support groups related to health issues
  2. Make it easier to use our health care services
  3. Share information about health through seminars, meetings or websites

- Most important thing to do:
  - Offer classes/support groups on aging services
  - More accessible transportation to get to appointments
  - Have more community activities and resources

- Comments:
  - Have more geriatric health professionals
  - More education

Additional comments:

- Have a stronger presence in the community
- Increase number of providers
Implementation Plan

Overview of process

After confirming the hospital’s top three priorities with the community and gathering community ideas for action, Regina 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.

To develop the implementation plan, staff held three meetings, one of which included Regina leadership and Dakota County Public Health staff, as well as several individual conversations with public health, local schools and other local community leaders. Implementation planning was also an agenda item for two Community Health Advisory Group (CHAG) meetings in Hastings. The CHAG includes community leaders representing local nonprofits, civic and human service organizations, business leaders, the library, City of Hastings Parks and Rec staff, the local Community Center, local health and wellness service providers, food-shelf providers, local grocery stores and other community stakeholders.

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

Priority 1: Mental health

Resources: Several important resources exist to support mental health in the community including:

- Center for Community Health
- Dakota County Public Health Department
- Hastings High School Peer Helper Program
- Hastings Family Services
- Hastings Community Center
- Hastings Community Education Program
- Hastings Faith Community
- Make It OK Program
- Mental Health First Aid Program for Adults and Adolescents

Goal: Improve mental well-being of teens, adults and seniors in Dakota County.

Objectives:

1. 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.
2. Increase the number of local service providers, including public service and retail settings, who are trained in mental health intervention, stigma elimination and de-escalation techniques.
Priority 2: Overweight/obesity

Resources: Beyond Regina Hospital, other key community resources include:
- Hastings YMCA and other local health and wellness service providers
- City of Hastings, including Parks and Recreation Department
- Hastings Community Center
- Hastings Senior Center
- Hastings Community Education Program
- Pleasant Hill Library
- Hastings Faith Community
- Dakota County Public Health Department
- Dakota County Food-Shelf Network

Goal: Decrease the percentage of the population who is overweight or obese.

Objectives:
1. Implement at least three healthy-eating education opportunities annually in the community.
2. Fund at least one local NHC grant as part of a systemwide effort to distribute approximately 50 Neighborhood Health Connection Grants to support projects for the same group of adults, older adults and/or families to increase social connections through healthy eating and physical activity in their local communities.
3. Improve access to healthy food through charitable contributions, employee volunteer opportunities and innovative community partnerships.

Priority 3: Support services for the aging continuum

Resources: Several important resources exist to support healthy aging in the community including:
- Hastings YMCA and other local health and wellness service providers
- Faith Community
- DARTS
- City of Hastings, including Parks and Recreation Department
- Hastings Community Center
- Hastings Senior Center
- Hastings Community Education Program
- Pleasant Hill Library
- Hastings Faith Community
- Dakota County Public Health Department
- Dakota County Food-Shelf Network

Goal: Broaden the array of programs and services available to support the aging continuum.

Objectives:
1. Improve availability and community awareness of programs available to aging population and care providers.

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 Regina Hospital staff who provided knowledge, skills and leadership to bring the assessment and plan to fruition; 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:
- Heather Peterson, Community Engagement Lead for the East Metro region at Heather.Peterson@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

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.

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<th>Healthy Eating and Active Living/Physical Activity</th>
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<tr>
<td>Adult physical activity</td>
<td>Percentage of adults engaging in no leisure time physical activity</td>
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<td>Youth physical activity</td>
<td>Percentage of 9th graders who were physically active for 60 minutes or more on at least five of the last seven days</td>
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<tr>
<td>Adult fruit and vegetable consumption</td>
<td>Percentage of adults eating less than five servings of fruit and vegetables daily</td>
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<tr>
<td>Youth fruit and vegetable consumption</td>
<td>Percentage of 9th graders consuming at least one serving of a) fruit and b) vegetables daily</td>
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<td>Adult BMI</td>
<td>Percentage of adults who are overweight or obese</td>
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<th>Mental Health and Wellness</th>
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<td>Youth suicidal thoughts</td>
<td>Percentage of 9th graders with suicidal thoughts in the past year</td>
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<td>Adult mental distress</td>
<td>Percentage of adults reporting more than 14 days of poor mental health per month</td>
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<tr>
<th>Addiction</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult binge drinking</td>
<td>Percentage of adult males having five or more drinks on one occasion and females having four or more drinks on one occasion</td>
</tr>
<tr>
<td>Youth drinking</td>
<td>Percentage of 9th and 11th grade students who reported using alcohol within the past 30 days</td>
</tr>
<tr>
<td>Youth illicit drugs</td>
<td>Percentage of 9th and 11th grade students who reported using any illicit drugs (not alcohol or tobacco) during past 12 months</td>
</tr>
<tr>
<td>Adult current smokers</td>
<td>Percentage of adults who currently smoke cigarettes some days or every day</td>
</tr>
<tr>
<td>Youth smoking</td>
<td>Percentage of 9th graders who smoked one or more cigarettes, past 30 days</td>
</tr>
</tbody>
</table>
### Aging

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall related deaths, 65+</td>
<td>Number of adults age 65 and older who die as a result of a fall related injury (ICD10 codes W00 to W19)</td>
<td>Center for Disease Control and Prevention Wide-ranging Data for Epidemiologic Research (CDC WONDER)</td>
</tr>
<tr>
<td>Chronic Conditions prevalence, 65+</td>
<td>Percent of adults age 65+ with a chronic condition</td>
<td>Minnesota Department of Health (MDH)</td>
</tr>
</tbody>
</table>

### Access to Care

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured</td>
<td>Percentage of population without health insurance coverage</td>
<td>MN Access Survey, MN Compass (Rice, Steele and Brown Counties), State of WI</td>
</tr>
<tr>
<td>Lack of consistent primary care</td>
<td>Percentage of adults who self-report that they do not have a primary care provider</td>
<td>BRFSS</td>
</tr>
</tbody>
</table>

### 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.

### Employee Volunteerism

<table>
<thead>
<tr>
<th>Mental Health and Wellness</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee volunteerism</td>
<td>Total number of volunteer hours tracked systemwide by Allina Health employees in community on projects and programs related to mental health and wellness.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Healthy Eating and Active Living/Physical Activity</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee volunteerism</td>
<td>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.</td>
</tr>
</tbody>
</table>

### Access to Care

<table>
<thead>
<tr>
<th>Access to Care</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charitable contributions</td>
<td>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).</td>
</tr>
</tbody>
</table>