

Community Health Needs Assessment and Implementation Plan 2017-2019



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At St. Francis, we work together to provide all people the healing experience we would expect for ourselves and our families.

Executive Summary

St. Francis Regional Medical Center (St. Francis) is jointly owned by Allina Health, Health Partners/Park Nicollet Health Services and Essentia Health Critical Access Group. Its Catholic identity is sponsored by the Benedictine Sisters of the St. Scholastica Monastery. Every three years, St. Francis conducts a Community Health Needs Assessment (CHNA) to systematically identify and analyze health priorities in the community and plan how to address these priorities in partnership with public health departments, other hospitals and health systems and many other community partners. This report describes the current community health needs assessment process and results for St. Francis Regional Medical Center in Shakopee, Minnesota.

St. Francis Regional Medical Center's 2017-2019 CHNA was conducted as part of Allina Health. 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, public health and hospital/health system staff participated in a phased process that identified the following priority areas for community health in the communities served by St. Francis Regional Medical Center:

- 1. Teen resilience and mental wellness
- 2. Obesity among adults, children and teens
- 3. Health care access for the uninsured

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 additional objectives and will be implemented through strategies monitored over time.

Teen resilience and mental wellness goal:

Support the mental health and wellness of teens in our community.

Obesity goal:

Improve the health of people living in our community by encouraging physical activity, promoting nutrition and reducing barriers to healthy living.

Health care access for uninsured goal:

Meet community health care needs by increasing capacity and improving collaboration among community safety net providers.

Introduction

The mission of <u>St. Francis Regional Medical</u> Center (St. Francis) is to work together to provide all people the healing experience we would expect for ourselves and our families. As a not-for-profit hospital, St. Francis conducts a community health needs assessment (CHNA) every three years 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.

Though St. Francis Regional Medical Center is jointly owned by Allina Health, Health Partners/Park Nicollet Health Services and Essentia Health Critical Access Group, the medical center's current CHNA was conducted as part of Allina Health. 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.

Through the CHNA 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.

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

Allina Health Description

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

Allina Health Service Area



Hospital description and service area

St. Francis is a not-for-profit Catholic hospital founded in 1938 out of a spirit of love and concern for the community. St. Francis has been shaped by its roots in the Franciscan and Benedictine traditions. St. Francis Regional Medical Center is jointly owned by Allina Health, Health Partners/Park Nicollet Health Services and Essentia Health Critical Access Group. Its Catholic identity is sponsored by the Benedictine Sisters of the St. Scholastic Monastery. The partners believe that by working together, we can efficiently provide the best healing experience and a broad range of services to our communities.

This structure uniquely positions the hospital to combine the caring and compassion of a community hospital with the modern medical technology, specialties and services found in the metro area. St. Francis Regional Medical Care ranks in the top 10 percent of hospitals nationwide for care and quality and has been recognized for its excellent patient experience, particularly in emergency care. The hospital provides a full range of inpatient, outpatient and emergency care services on a collaborative medical campus with more than 30 other clinics and health care providers. St. Francis Regional Medical Center also has a long history of working to improve the health of the communities it serves through charitable giving and direct community health improvement programming.

Community served and demographics

In 2015, St. Francis served more than 170,000 patients and their families, with its primary service area consisting of Scott County and Carver County—a suburban area located in the

southern Twin Cities metro. These counties were also the focus of inquiry for the St. Francis CHNA.

According to the U.S. Census Bureau's Decennial Census, a total of 240,401 residents live in the 710.61 square mile area occupied by Scott and Carver County and Scott County is the fastest growing county in Minnesota. The area's population density, estimated at 338.3 persons per square mile, is greater than the national and Minnesota average. The median age in Scott County is 35 years and in Carver County is 37 years; about 28% of their total population is under age 18. As with Minnesota as a whole, Scott and Carver County's racial and ethnic diversity has increased significantly in the past few years. Approximately 14% of area residents are people of color—primarily Hispanic or Latino (4.6%), Asian (4.9%) or Black (2.9%). In 2014, 7.4% of residents were foreign born and 4% had limited English proficiency (U.S. Census Bureau, American Community Survey (ACS), 2010–2014, 5-year estimates). The mean per capita income in 2014 was \$36,285, with 5.3% of residents living in households with income below the Federal Poverty Level (U.S. Census Bureau, ACS, 2010–2014, 5-year estimates).

Scott and Carver County residents face many of the same health concerns common across the United States. Although more people are insured than in the past, almost 20% selfreport that they do not have a regular doctor. Further, the region has a 1099:1 ratio of mental health providers to residents compared with Minnesota's overall mental health provider ratio of 529:1 (County Health Rankings, 2015). Additionally, approximately 57% of area adults are overweight or obese and 8.7% report poor general health (U.S. Census Bureau, ACS, 2009-2013, 5-year estimates). Additional information about Scott and Carver counties can be found online at Minnesota Compass.

Evaluation of 2014-2016 Implementation Plans

During 2014–2016, St. Francis Regional Medical Center addressed needs identified in the 2013 assessment: mental health/substance use. nutrition/physical activity and access to care. Some initiatives were led by the hospital, while others were part of coordinated activities across health systems or conducted in partnership with local public health. The following describes significant initiatives and their outcomes.

Systemwide activities

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

Change to Chill

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

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

Be the Change

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

Neighborhood Health Connection

Neighborhood Health Connection[™] (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 and 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 reported 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-<u>fried foods</u> and increased healthy offerings in its facilities to model and support the dietary changes recommended by providers.

Additionally, in May 2016, Abbott Northwestern Hospital removed a fast food restaurant from its campus. These changes support the health of Allina Health patients, visitors and employees.

St. Francis Regional Medical Center-specific activities

Goal 1: Create a sustainable framework for improving mental health.

St. Francis has been working in partnership with the Scott County Mental Health Unit for several years, ever since staff at the county unit became interested in understanding the ways client mental health and physical health are related. Issues with diabetes were identified early on and St. Francis staff have consistently provided expertise in diabetes, physical activity and nutrition. In addition, each year St. Francis facilitates a health screening for clients of the Scott County Adult Mental Health Unit generating data the staff are able to use throughout the year to help their clients meet physical as well as mental health goals. The Scott County Adult Mental Health Unit has also received charitable contributions and Neighborhood Health Connection grants.

St. Francis nutrition educators and dieticians worked with staff at the Five Stars Recovery Center to implement better nutrition for residents. Kitchen staff at Five Stars started a garden at the center to increase fresh food availability for residents.

Launch Ministries received charitable contributions as well as Neighborhood Health Connection grants. Launch Ministry helps young adults transition into independence. Through the financial support of St. Francis, Launch was able to provide job-skill training at the Carver County Jail, mentoring for young adults and a parent support group for parents with adult children transitioning to independence.

Two "Successful Students" parent educational programs were held to address child and

adolescent health. The first focused on childhood anxiety and depression, with 350 parents in attendance. The second was geared towards keeping youth safe in a technological age and technology-free activities; 130 parents and educators attended this event.

Goal 2: Reduce obesity and hunger insecurity.

St. Francis supports numerous programs in the community aimed at increasing physical activity. Esperanza, a ministry of New Creation church, hosts a summer activity program for youth between kindergarten and sixth grade as well as a summer soccer program for middle schoolers. On average, a total of 350 students participate in these activities each year. A program for increasing physical activity and social connection among moms, the Esperanza Soccer Moms, receives financial support and was awarded a Neighborhood Health Connection grant. Students with disabilities are supported through a charitable contribution to the Saber Teens Around Shakopee (STARS) program.

To improve healthy eating and reduce hunger insecurity, support was given to the local food shelves through charitable contributions as well as donations from the St. Francis onsite employee garden where 12 plots are dedicated to growing food for the food shelf. St. Francis also helps support Good to Go Kids, ensuring over 300 students receive food each week during the school year. St. Francis employees also serve as volunteers at Loaves and Fishes program, serving nutritious, free meals to about 100 people each time they volunteer.

Goal 3: Increase access to health care in the community, especially among vulnerable populations.

For many years, St. Francis has been providing support to the River Valley Nursing Center and St. Mary's Health Clinics, both of which provide free care to uninsured community members. This support takes the form of financial charitable contributions, meeting space,

clinic space and supplies. In 2015, the River Valley Nursing Center served 337 clients who identified as uninsured during clinic sessions, and served an additional 337 people through five flu shot clinics. The Shakopee location of St. Mary's Health Clinic had 1,150 clinic visits from June 2013 to July 2014, filled 1,161 medically necessary prescriptions and provided 2,077 referrals. In 2015, St. Mary's Health Clinic served 474 patients in 1,253 visits. Of these visits, 89% were repeat visits for ongoing primary care services, care coordination and medications.

As a partner in the Scott County Health Care System Collaborative, St. Francis partnered with others to create a streamlined referral process for safety-net providers, remove redundancies from local health systems and increase access to the Scott County Mental Health Center.

St. Francis also participated in Scott/Carver Project Community Connect, a one-day event which provides a wide array of services to people who are homeless or living on little in the community. St. Francis staff helped to organize the event's health-services area. In 2016, St. Francis also supported people who are homeless through a charitable contribution to Beacon Interfaith Housing, which helps local families obtain stable housing each year in partnership with our local faith community.

In 2016, St. Francis made a contribution to Children's Dental Services to implement a culturally targeted and translated oral health curriculum and screening program for 500 low-income children across Scott, Carver and Dakota Counties. Easily accessible and childfriendly dental materials will be provided in Hmong, Oromo, Somali and Spanish, and presented by bilingual health educators.

2015-2016 CHNA Process and Timeline

St. Francis utilized a process designed by Allina Health that engaged community stakeholders throughout and included both review of existing secondary data and collection of primary data through community dialogues.

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

engagement staff in nine regions 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. This plan was approved by the St. Francis Regional Medical Center Board of Directors.

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

Data Review and Issue Prioritization

Allina Health Community Benefit and Engagement staff used the most recent secondary data available via the CHNA toolkit—a free, web-based platform hosted by Community Commons—as well as additional state and local data resources available for Scott and Carver Counties 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, prevalence of health conditions and health care access.

Approximately 36 stakeholders representing broad interests of the community served by St. Francis attended at least one of three meetings in late October and early November 2015 to review data and discuss pertinent issues for St. Francis to address through this needs assessment and action plan. Agencies represented at these meetings include:

- Carver County Public Health, Dakota County Public Health and Scott County Public Health
- City of Prior Lake Seniors/Club Prior
- Prior Lake-Savage Area Schools
- Shakopee Public Schools
- SouthWest Metro Education Cooperative
- Community Education-Prior Lake-Savage
- River Valley YMCA
- Community Action Program Agency Carver-Scott-Dakota
- River Valley Nursing Center
- St. Mary's Health Clinics
- Esperanza, New Creation Church
- Valley Rehabilitation Services
- St. Gertrude's Health and Rehabilitation Center
- Three Rivers Park District

- Scott County
- City of Shakopee Parks and Recreation
- Scott County Mental Health Center
- St. Francis staff
- Allina Health South Metro Ambulance and Courage Kenny Rehabilitation Institute
- Shakopee Diversity Alliance

The review process included a formal prioritization process known as the Hanlon method, which includes ranking 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. Teen resilience and mental wellness
- 2. Obesity among adults, children and teens
- 3. Health care access for the uninsured

Needs not addressed in the CHNA

Other health issues identified through the process but not included among the top three priorities include homelessness, dementia and an aging population and health equity. Health equity will be addressed in that it will be used as a lens through which all priority issues are viewed, ensuring it is accounted for throughout the 2017–2019 plan. St. Francis currently provides financial support to local homelessness initiatives and collaborates with community partners where helpful in addressing dementia and an aging population. Time and other resources necessitate that only three top priorities are chosen for the 2017–2019 community health workplan.

Community Input

Once priority issues were identified with the stakeholder team, St. Francis solicited feedback from the community on the appropriateness of the identified priority areas as well as how St. Francis 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

St. Francis through 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. Participants were asked to share their vision for health in the community, clarify aspects of the priority health areas that are most important to address and discuss opportunities for Allina Health to support community health.

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

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

Two community dialogues for St. Francis Regional Medical Center were held in Shakopee, MN on March 23 and April 5, 2016. The March dialogue included teens who participated as part of a school experience. The April dialogue was open to the community with broad invitations, and included members of the Latino community whose participation was aided by translators. A total of 35 people attended the two events. In addition to residents of communities served by St. Francis, other participants represented local government, law enforcement, non-profit organizations and area businesses.

Community dialogues/ focus groups results

Teen resilience and mental wellness

Vision for health

Participants envisioned a community where there is no stigma attached to mental health conditions and teens could talk openly about their mental health. Teens have access to the tools they need to manage stress levels, and ideally experience less stress at home and at school. Teens are also able to talk to mental health professionals in a timely manner without having to be put on a waitlist. Participants also imagined an environment that did not stigmatize those who turned to risky use of substances to deal with their mental health conditions. Teens know where they can go to get help and are not be afraid of being judged. Ultimately, teens are better equipped to handle challenging situations and this leads to them finding more success in school and in their personal lives.

Existing strengths

The Shakopee area has resources for students who are dealing with mental health conditions or addiction, including in-school counselors and community resources. At Shakopee High School, students learn about mental health and addiction in health class and also have

the option to take a "Teen Stress Class" as one of their electives. The school also has several clubs to help students form communities that positively influence their self-worth and mental health such as the Gay Straight Alliance and Students Against Destructive Decisions (SADD).

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:

- Provide culturally-appropriate training for school staff and parents so they can recognize signs of mental health conditions and know what steps they should take with students who exhibit symptoms.
- Increase marketing efforts to let students and families know about the available mental health resources in schools and in the community.
- Improve messaging to destigmatize addiction by emphasizing the health consequences of drug use and acknowledging the spectrum of people who misuse alcohol or drugs.
- Focus on early intervention and screen for mental health conditions and addiction during doctor appointments.

Obesity (adult, child, and teen)

Vision for health

Participants envisioned a community that promotes healthy eating and physical activity in all settings. In 2019, they imagined neighborhoods that have ample trails for biking and walking as well as playgrounds where kids and adults can both safely play and exercise outdoors. Programs and clubs are available for families to participate in activities together. In school, kids participate in physical education year-round and parents have work environments that promote employee wellness.

Participants also described a community that includes food markets where people access fresh fruit and vegetables at affordable prices. Restaurants and fast food locations provide healthy, cheap options and smaller portions. Community education classes are also available to help families learn how to cook nutritious meals at home.

Existing strengths

Participants shared that the Shakopee area has good parks to be physically active in the summer time. There are also a number of gyms in the community. Children are able to participate in sports through school, youth leagues, the YMCA and various community centers. The students noted the Shakopee Community Center offers reasonably-priced day passes for kids under age 18. Participants shared that the development of a new community center is also underway and that the new location will be bigger and have more amenities. Participants also mentioned that Scott County has the Statewide Health Improvement Program (SHIP) grant which has helped local schools create healthier environments for students.

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:

- Partner with schools to offer healthier breakfast, lunch and snack options.
- Support the development of more outdoor exercise spaces and community gardens.
- Conduct health fairs and other educational events for the entire family to learn about exercise and healthy eating.
- Encourage employers to give their employees time to exercise during the day.
- Educate patients so they know the all of the benefits of their health plans like Silver Sneakers.

Access to care for uninsured

Vision for health

Participants envisioned a community where accessing health care is convenient, services are easy to use and everyone can access the appropriate resources they need. Transportation to clinics is improved, and the cost is affordable. They also imagined a community where transportation is less of a barrier altogether as telemedicine is available for everyone to use or community health professionals can come directly to your home. Participants' vision for 2019 included greater focus on prevention as well as the availability of services for community members who are uninsured.

Existing strengths

The Shakopee area has a free clinic and some free dental care, but participants shared that people often experience long wait times when they try to access them. Scott County has the Scott County Mental Health Clinic, but participants said that county needs to build greater capacity in that area. They also shared that Scott County has a free mobile medical clinic that could be expanded to reach more people.

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:

- Provide educational opportunities for immigrants and people who are new to the system so they can learn how to use their insurance to the fullest.
- Expand the use of mobile clinics and focus on the neighborhoods that face barriers to accessing health care.
- Increase the number of local specialty services so people would not have to travel to receive specialized care.

Employee survey results

Employees were asked to give their home address with 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 St. Francis Medical Center: 69

Rank of Priorities:

- 1. Teen resilience and mental wellness (1.59 mean score)
- 2. Healthy weight (1.74 mean score)
- 3. Access to health care (2.11 mean score)

Teen resilience and mental wellness:

- 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. Make it easier to use our health care services
- Most important thing to do:
 - Improve access to care for teens and youth
 - Create awareness of mental health conditions
 - Collaborate with schools on support systems/resources for teens
- Comments:
 - o Offer free education and support
 - Need easier access to care for teens

Healthy weight:

- 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:
 - Educate the community on how to be healthy
 - Have weight reduction benefits
 - Offer reasonably priced exercise/weight loss programs
- Comments:
 - Need community partners to be on board with this priority
 - Make fruits and veggies available to people of low SES
 - Healthy weight needs to start with employees and then promoted in the community

Access to Care:

- Allina Health's role (top 3):
 - 1. Make it easier to use our health care services
 - 2. Work to create policies that promote and support health
 - 3. Help create environments that make the healthy choice the easy choice
- Comments:
 - Focus on access to transportation, childcare, cost of copays
 - Focus on the uninsured/underinsured

Additional comments:

 Bringing awareness and programs to the community to promote healthy habits, exercise, understanding mental health conditions

Implementation Plan

Overview of process

After confirming the hospital's top three priorities with the community and gathering community ideas for action, St. Francis Regional Medical Center 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.

The Community Engagement Lead for Allina Health's South Metro region worked closely with hospital and public health staff to develop a draft implementation plan and then hosted two meetings in June 2016 with community stakeholders to gather more input. Individual follow-up to solidify the plan included all three county public health agencies and St. Francis senior leadership. Finally, the Mission Committee reviewed and approved the plan in August in preparation for final approval by the Board of Directors in October 2016.

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

Priority 1: Teen resilience and mental wellness

Resources: Resources available in the community to address this priority include: local Mental Health Centers; school systems, including school-based mental health providers, school resource officers, special services and others; the Choose Not to Use coalition; and Scott Family Net.

Goal: Support the mental health and wellness of teens in our community.

Objectives:

- 1. Promote skill-building with area teens to increase resilience and prevent addiction.
- 2. Raise awareness of stigma connected with mental health conditions/addiction and how stigma impacts willingness to seek treatment.
- 3. Advocate and partner with communities to develop a comprehensive and reliable continuum of mental health and addiction care, including identifying and working to eliminate gaps in service.

Priority 2: Obesity among adults, children and teens

Resources: In Carver and Scott counties, resources to address this issue include but are not limited to: River Valley YMCA and several local community centers, local Parks and Recreation Departments, Three Rivers Park District, Community Education programs, Statewide Health Improvement Program (SHIP), several food shelves and local grocery retailers.

Goal: Improve the health of people living in our community by encouraging physical activity, promoting nutrition and reducing barriers to healthy living.

Objectives:

- 1. Increase access to healthy food, especially fruits and vegetables, for residents who experience food insecurity.
- 2. Increase opportunities for community members to increase physical activity and improve nutrition.

Priority 3: Health care access for the uninsured

Resources: Primary community resources that provide health care access for the uninsured include St. Mary's Health Clinics, River Valley Nursing Center, Scott County Mobile Health Clinic, My Health for Teens and other free and low cost clinics located in nearby Hennepin County.

Goal: Meet community health care needs by increasing capacity and improving collaboration among community safety net providers.

Objectives:

1. Increase capacity of local safety net organizations to provide care to Scott and Carver County residents who are uninsured or underinsured.

Resource Commitments

St. Francis and 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 Allina Health systemwide metrics will also provide context for the health status of communities St. Francis Regional Medical Center serves and the work of Allina Health overall (see Appendix).

Acknowledgments

Staff at St. Francis Regional Medical Center and 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 St. Francis Medical Center 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

St. Francis and 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:

- <u>Tamara Severtson</u>, Community Engagement Lead for South Metro region at Tamara.Severtson@allina.com or
- Debra Ehret Miller, Community Benefit and Evaluation Manager at Debra.Ehretmiller@allina.com.

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

Appendix

Allina Health Systemwide Performance Indicators

Population Health Metrics

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

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

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

Systemwide Metrics

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

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



1455 St. Francis Ave. Shakopee, MN 55379-3380 952-428-3000

stfrancis-shakopee.com