



MADISON
HEALTHCARE SERVICES

COMMUNITY HEALTH NEEDS ASSESSMENT

Prepared September 2022





Executive Summary

One of the primary focuses of any healthcare facility is identifying and addressing the health needs of the area they serve. Madison Healthcare Services (MHS) has put forth time, effort, and resources to doing just that. As a non-profit facility, MHS is dedicated to reinvesting in our healthcare system to meet the needs of the communities we provide services to. With the enactment of the Affordable Care Act, tax-exempt hospitals are required to conduct a Community Health Needs Assessment every three years. Madison Healthcare Services conducted a Community Health Needs Assessment on the county of Lac qui Parle in Minnesota, where the majority of our marketplace resides. The surrounding rural communities we serve within Lac qui Parle County include Madison, Marietta, Louisburg, Bellingham, Dawson, Nassau, Ortonville, and Boyd.

The CHNA consisted of a web-based survey, for respondents to voluntarily participate in. In conjunction with the survey, additional sources utilized included national, state and local demographic and community health databases, and MHS's utilization data. Multiple community partners helped us identify our community health needs.

The committee identified three main health needs:

- Mental Health
- Obstetrics & Gynecology Service
- Health & Wellness Education

Madison Healthcare Services is located in a rural area and understands the importance of collaborating with local members of our communities, public health officials, and numerous organizations to address these health concerns in the region. Together, we can recognize where improvements are needed and strive to increase the quality of care we provide to our patients.

Overview

Madison Healthcare Services is located in Southwest Minnesota in the rural community and county seat of Madison, MN. Madison Healthcare Services (MHS) is a critical access facility that includes the hospital, clinic, care center, assisted and independent living, and subsidiaries. Madison Healthcare Services exists as a non-profit Christian organization called by God to affirm the worth of all people, to provide health care, residential and community service in a competent and caring manner. Our vision is to provide healthcare services that exceed our customers' expectations. Our values are placing those we serve first, everyone at MHS is an equally important member of our team, each of us is personally responsible for continually finding ways to improve, and we practice the golden rule. The hospital is a critical access hospital licensed for 12 beds. The hospital practices general medicine and surgery with 6 staffed providers and 12 outreach physicians. In FY 2021, the hospital had 164 inpatient admissions and 12,498 outpatient visits. Below are the services offered at MHS.

Care & Services Offered at MHS

Activities	Ear, Nose & Throat	Palliative Care	Social Services
Audiology	Emergency Care	Pastoral Care	Surgical Services
Behavioral Health Services	Home Care	Physical Therapy	Swing Bed
Big Stone Therapies	Laboratory	Podiatry	Upper GI Endoscopy & Colonoscopy
Cardiology	Medical Oncology & Hematology	Prenatal	Urology
Care Center	MHS Virtual Visits	Radiology & Diagnostics	
Clinic	Occupational Therapy	Sleep Disorder Studies	
Direct Access Lab Testing	Orthopedics	Speech Therapy	

Other facilities on campus with the hospital include the clinic, care center, Prairie Winds Senior Living, and Hilltop Residence. The clinic had 6,752 clinic visits in FY 2021. Medical Staff for our facility consist of two family practice physicians, two physicians' assistants and two nurse practitioners. The care center is a skilled nursing facility licensed for 51 beds. Prairie Winds is our 12-unit senior and assisted living for those 55 and older. We also have Hilltop Residence on our campus, which is a secure 36-unit Housing and Urban Development (HUD) that is managed by Madison Healthcare Services. Residents receive many services provided by home health, the hospital, clinic, and the care center. These facilities are all conveniently attached allowing easy access to medical services for anyone on campus.

A few bordering hospitals to Madison Healthcare Services are Johnson Memorial Health Services located in Dawson, Appleton Area Health Services located in Appleton, and CCM Health located in Montevideo. Together, these four facilities make up the River Valley Health Network. The vision of the RVHN is to assist its members to strive toward continued independence using effective and purposeful leadership.

Process

Madison Healthcare Services partnered with Countryside Public Health, Prairie Five Rides, Lac qui Parle County Family Service Center, Lac qui Parle Valley School District, and the City of Madison in order to address health needs within the region. We began the assessment process by forming a Community Health Needs Committee. The focus of this committee was to branch out into the community in multiple ways in order to identify the health needs that we should address. The committee was formulated to plan, budget, implement, and monitor the entire process of our Community Health Needs Assessment. Once we established the health priorities affecting Lac qui Parle County, we devised implementation and action plans to address the health needs in our communities while collaborating with other local organizations.

Demographic Analysis

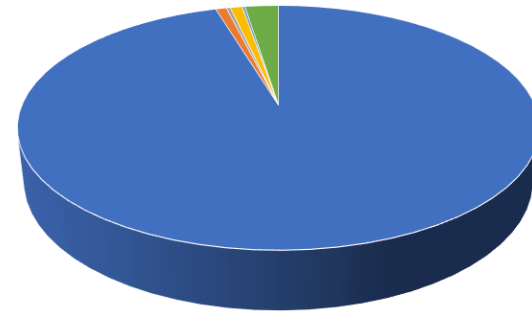
The initial data presented to the Community Health Needs Committee was the demographic analysis of Lac qui Parle County. Information was compiled using the U.S. Census Bureau and County Health Rankings. This information would be used to help our committee make decisions and form an analysis of the health needs of the community our facility serves. The demographic analysis we gathered from secondary data included the population trends, ethnic composition, age composition, educational attainment, and poverty rates of residents in Lac qui Parle County. We also presented statistics on the prevalence of health conditions and diseases, the number of residents uninsured, causes of death, and other health statistics of our area.

The initial data presented to the Community Health Needs Committee was the demographic analysis of Lac qui Parle County. Information was compiled using the U.S. Census Bureau and County Health Rankings. This information would be used to help our committee make decisions and form an analysis of the health needs of the community our facility serves. The demographic analysis we gathered from secondary data included the population trends, ethnic composition, age composition, educational attainment, and poverty rates of residents in Lac qui Parle County. We also presented statistics on the prevalence of health conditions and diseases, the number of residents uninsured, causes of death, and other health statistics of our area.

U.S. Census Bureau

According to the 2020 U.S. Census Bureau, Lac qui Parle County's population was estimated to be 6,719. The age group of the area was 4.8% persons under 5 years, 20.6% persons under 18 years, and 27.9% persons 65 years and over. The ethnic breakdown was 96.3% white, 0.8% Black or African American, 0.3% American Indian and Alaska Native, 0.9% Asian, 0.2% Native Hawaiian and other Pacific Islander, and 2.5% Hispanic or Latino. The median household income for the county from 2016-2020 was \$57,802, with the persons below poverty at 8.6% of the population.

Lac qui Parle Ethnic Composition (2020)
Total Population: 6,719



- White
- Black or African American
- American Indian and Alaska Native
- Asian
- Native Hawaiian or other Pacific Islander
- Hispanic or Latino


County Health Rankings









To further evaluate the demographics of the county, we used data from the county health rankings. Often, information gaps put a limit on the hospital's ability to assess all of the community needs. In our particular situation, information gaps that may have occurred in our assessment is that our needs may have developed on the basis of opinions from our Community Health Needs Committee and those that completed the survey. These opinions may not reflect the true needs of the population. After reviewing these statistics, we acknowledged that Lac qui Parle County fails to meet the national benchmark in some health behaviors but has also improved or has narrowed the gap between the national benchmarks. Adult obesity is at 35% in the county, which is only 5% more than the national benchmark. Physical inactivity within the county is at 23%, which is the same as the national benchmark. Access to exercise opportunities is at 27% compared to the national benchmark of 86%. Frequent mental distress is 13% for both Lac qui Parle County and the national benchmark. The statistics show that 7% of Lac qui Parle County adults are uninsured. Primary care physicians are 1,100 people per physician. Other social and economic factors of Lac qui Parle County include a high school graduation rate of 93% and an unemployment rate of 4.7%. Overall, Lac qui Parle County ranks 21st on health factors out of 87 counties in Minnesota.




The following pages document the demographics in Lac qui Parle county.




	Lac qui Parle (LQ) County	Trend	Error Margin	Top U.S. Performers	Minnesota
Health Outcomes					
Length of Life					
Premature death	5,600		3,700-8,200	5,600	5,600
Quality of Life					
Poor or fair health	15%		13-17%	15%	13%
Poor physical health days	3.4		3.1-3.7	3.4	3.1
Poor mental health days	4.2		3.9-4.4	4.0	4.0
Low birthweight	5%		3-7%	6%	7%
Additional Health Outcomes (not included in overall ranking) —					
COVID-19 age-adjusted mortality	90		50-148	43	72
Life expectancy	81.2		79.0-83.4	80.6	80.4
Premature age-adjusted mortality	320		250-400	290	280
Child mortality				40	40
Infant mortality				4	5
Frequent physical distress	11%		10-12%	10%	9%
Frequent mental distress	13%		12-15%	13%	12%
Diabetes prevalence	8%		7-9%	8%	8%
HIV prevalence				38	187

	Lac qui Parle (LQ) County	Trend	Error Margin	Top U.S. Performers	Minnesota
Health Factors					
Health Behaviors					
Adult smoking	19%		16-22%	15%	15%
Adult obesity	35%		33-36%	30%	30%
Food environment index	8.9			8.8	9.0
Physical inactivity	23%		21-26%	23%	20%
Access to exercise opportunities	27%			86%	81%
Excessive drinking	24%		23-25%	15%	23%
Alcohol-impaired driving deaths	67%		39-82%	10%	30%
Sexually transmitted infections	166.1			161.8	433.9
Teen births				11	12
Additional Health Behaviors (not included in overall ranking) —					
Food insecurity	9%			9%	8%
Limited access to healthy foods	3%			2%	6%
Drug overdose deaths				11	15
Motor vehicle crash deaths				9	8
Insufficient sleep	29%		28-31%	32%	29%

	Lac qui Parle (LQ) County	Trend	Error Margin	Top U.S. Performers	Minnesota
Clinical Care					
Uninsured	7%		6-8%	6%	6%
Primary care physicians	1,100:1			1,010:1	1,100:1
Dentists	2,180:1			1,210:1	1,320:1
Mental health providers	6,530:1			250:1	340:1
Preventable hospital stays	3,750			2,233	3,073
Mammography screening	54%			52%	52%
Flu vaccinations	23%			55%	55%
Additional Clinical Care (not included in overall ranking) —					
Uninsured adults	8%		7-9%	7%	7%
Uninsured children	5%		3-6%	3%	3%
Other primary care providers	730:1			580:1	730:1

	Lac qui Parle (LQ) County	Trend	Error Margin	Top U.S. Performers	Minnesota
Social & Economic Factors					
High school completion	93%		92-95%	94%	93%
Some college	68%		61-75%	74%	75%
Unemployment	4.7%			4.0%	6.2%
Children in poverty	<u>12%</u>		7-17%	9%	10%
Income inequality	4.0		3.4-4.7	3.7	4.3
Children in single-parent households	17%		10-24%	14%	20%
Social associations	18.1			18.1	12.6
Violent crime	36			63	236
Injury deaths	81		54-118	61	69

	Lac qui Parle (LQ) County	Trend	Error Margin	Top U.S. Performers	Minnesota
Additional Social & Economic Factors (not included in overall ranking) —					
High school graduation				96%	84%
Disconnected youth				4%	4%
Reading scores	3.1			3.3	3.1
Math scores	3.7			3.4	3.3
School segregation	0.08			0.02	0.25
School funding adequacy	\$720				\$2,384
Gender <u>pay</u> gap	0.71		0.62-0.81	0.88	0.82
Median household income	<u>\$65,400</u>		\$59,100 to \$71,800	\$75,100	\$75,500
Living wage	\$35.55				\$39.89
Children eligible for free or <u>reduced</u> <u>price</u> lunch	39%			32%	36%
Residential segregation - Black/white				27	64
Residential segregation - non- white/white	10			16	48
Childcare cost burden	22%			18%	22%
Childcare centers	6			12	4
Homicides				2	2
Suicides				11	14
Firearm fatalities				8	8
Juvenile arrests					22

Assessment Tools

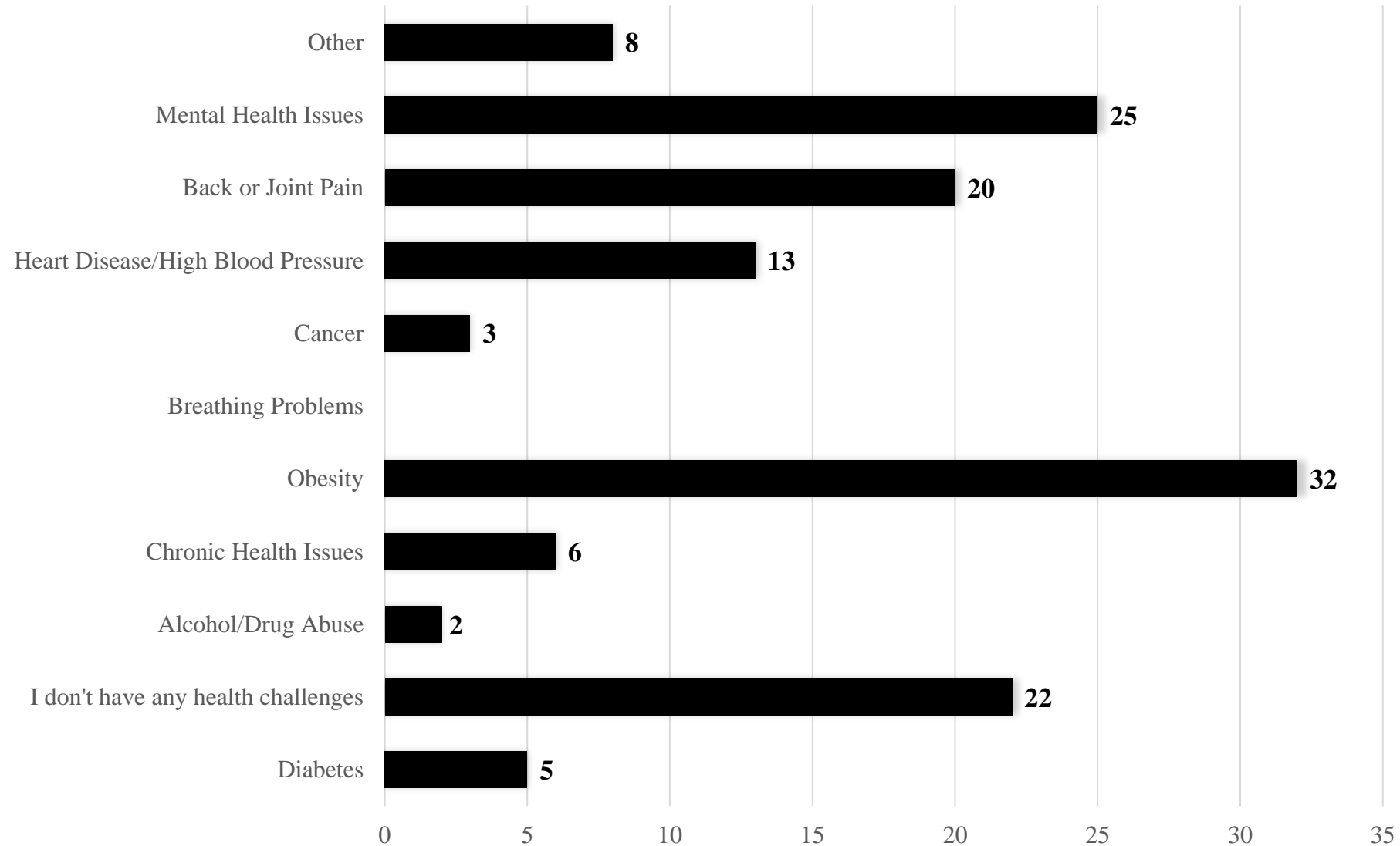
The Demographic Analysis provided an informational foundation that led us to dig deeper into statistical assessments of health and disease in Lac qui Parle County. We continued using sources such as the Minnesota Department of Health and Countryside Public Health to comprise additional secondary data. We compiled primary data through our community survey. This assessment would aid in the development and utilization of an implementation strategy to target our current health needs as a community.

Community Survey

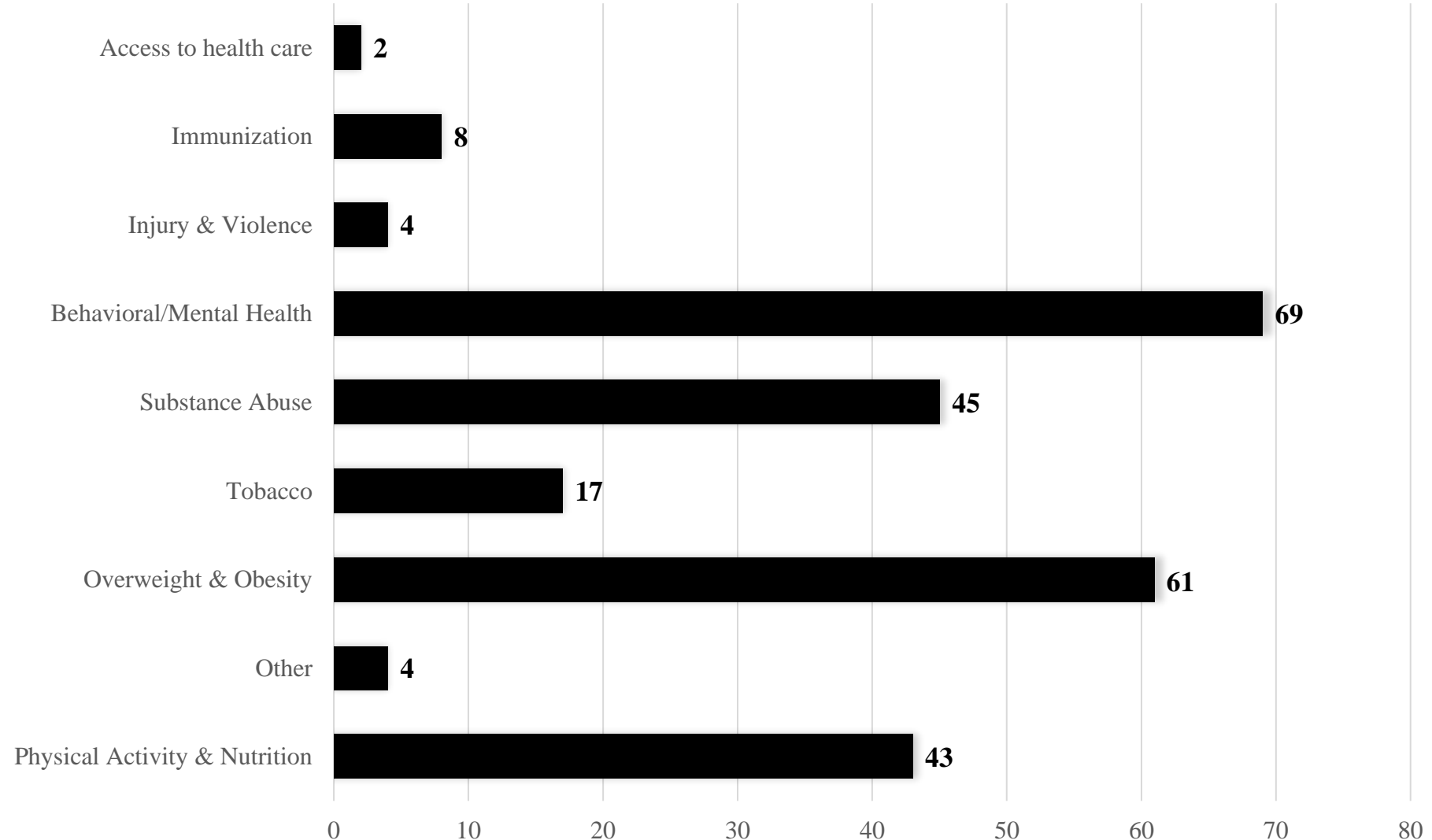
In the spring of 2022, we posted our Community Health Needs Assessment Survey on our website. There were a total of 118 respondents to the survey. Of the surveyors that responded, 92% were from the community of Madison, Minnesota, where Madison Healthcare Services is located. Based on the survey, about 91% of respondents go to their physician's office for routine healthcare. Of the 118 respondents, 100% responded that they are able to visit a healthcare provider when needed.

The graphs on the following pages summarize some of the results from the survey.

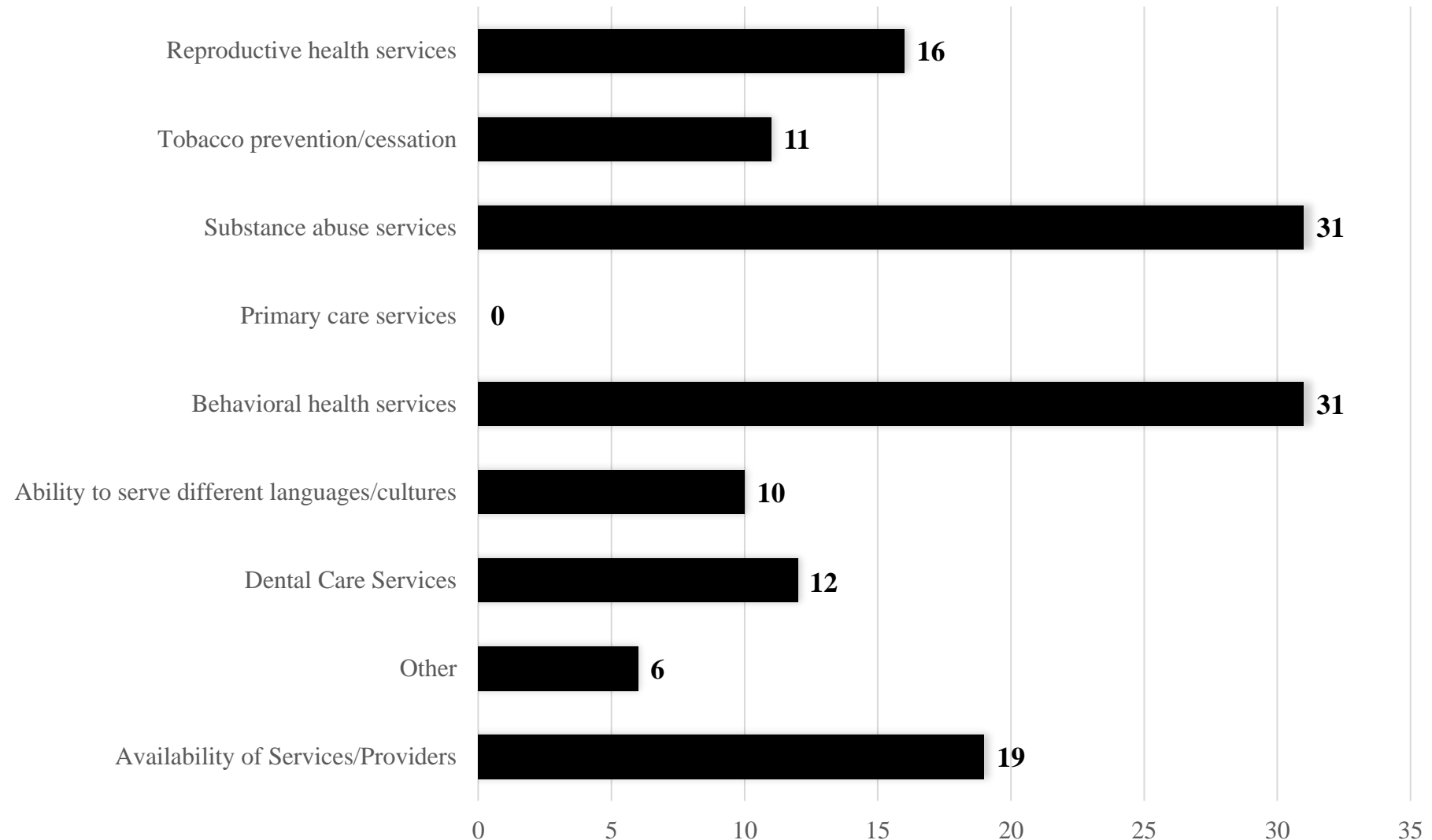
What are the top 3 health conditions you face?



What health issues do you see as a concern for the community?



What are the greatest gaps in healthcare services for our community?



Identify and Prioritize Health Needs

By utilizing both the primary and secondary data we researched and analyzed, the Community Health Needs Committee was able to identify and prioritize health needs in our community. Using resources with our community members and professionals, we decided to focus on three key health needs that our community would greatly benefit from. The three health needs identified and prioritized by our committee include mental health, obstetrics & gynecology, and health & wellness education.

1. Mental Health

Madison Healthcare Services continues to devote extensive time and money to provide complex therapy for mental and behavioral health patients. In 2018, we contracted with our first Psychiatric NP to provide medicine management to patients needing these services. Shortly after the addition of our Psychiatric NP, we added a Licensed Independent Clinic Social Worker to begin counseling services in our clinic and care center. Knowing the need for mental health services in our community is ongoing, MHS offers a Licensed Counselor and Psychiatric NP that see patients in the clinic three days each week to provide consistent and compassionate care. Both providers are devoted to the health of those they treat, and their services continue to be very successful. MHS also has partnerships with local school districts to ensure that mental health services are reaching children and young adults in our communities. There is also an area mental health provider group to provide support and resources for the mental health providers. In addition to the mental health provider group, we have a mental health support group for patients that is proving to be very beneficial. MHS will continue to grow the services they provide for all mental health patients and is dedicated to doing so.

2. Obstetrics & Gynecology

In an effort to keep as many services local for the patients that MHS serves, a contract was signed with an OB/GYN physician. MHS will begin providing monthly OB/GYN services starting in September 2022. Women's health is a top priority of MHS and one that will continue to be an area of growth with the addition of Dr. Lisa Baker. Office procedures such as colposcopies, biopsies, PAP smears, IUD insertions and removals, etc. will be provided, along with full consultative services. Gynecology will be the main focus of this new service line; however, obstetric patients will also be able to be seen in Madison prior to delivery. Due to low volumes, MHS discontinued newborn deliveries in 2018, however, prenatal services are still provided in our clinic. We are excited to start this new service line and look forward to providing exceptional care.

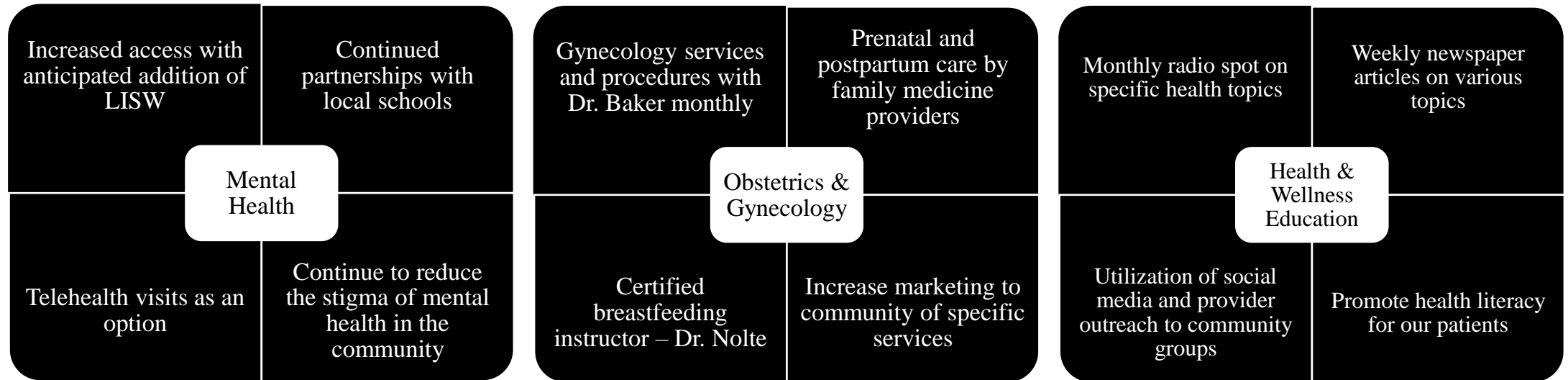
3. Health & Wellness Education

MHS is dedicated to providing patient education to ensure all patients needs are met and questions are answered regarding their health. We provide monthly radio spots by various providers on specific health topics to help educate on specific health questions. Weekly newspaper articles are written regarding specific health topics and shared with the local newspaper for publication. Along with the broad education that is provided, each patient that is seen in our clinic or hospital is given an education sheet at the conclusion of their appointment to help the patient understand exactly what the condition entails that they were being treated for. Various community support groups are available and provide support and education regarding many medical conditions.

Development of Implementation Plan

To provide quality, patient-centered care and improve the health of those we serve, we will work to meet the identified needs of our community. Low income and uninsured individuals and families affected suffer huge financial burdens. It is our desire to implement programs that help support our community financially, emotionally, and physically.

Below are diagrams of the goals and objectives our committee comprised in order to address our health needs identified.



Budget to Address Identified Needs

The Community Health Needs Committee devised a budget that was integrated into Madison Healthcare Services overall budget and strategic plan. The budget for provision of services in our needs assessment will include personnel, program development, and the implementation and monitoring of our plan. Our total budget dedicated to our Community Health Needs Assessment totaled to \$120,000.

Yearly Community Health Needs Assessment Budget		
Personnel	Addition of Social Worker, OB/GYN Provider	\$100,000
Education		\$20,000
Total Budget for Community Health Needs Assessment:		\$120,000

Execution & Monitoring of Implementation Plan

Mental Health Initiative

River Valley Health Network (RVHN), which includes Appleton Area Health (Appleton, MN), CCM Health (Montevideo, MN), Johnson Memorial Health Services (Dawson, MN), and Madison Healthcare Services (Madison, MN) created a strategic plan from which mental and behavioral health support emerged as a high priority. Increase visits to the emergency department and long waits for patients with need for behavioral health services were a main factor in identifying this gap in the health care systems for the community.

RVHN was awarded a Rural Health Network Development Program Grant. The Development Grant will build on the strategic plan created by the Planning Grant to build a sustainable system for providing integrated behavioral health and primary care. Woodland Centers Mental Health providers collaborated with RVHN on this project. The grant has two goals. One is to develop system efficiencies that lead to integrated behavioral health and primary care and shared cost savings in the River Valley Health Network region. In addition, they hope to reduce the stigma associated with seeking behavioral health wellness, prevention and treatment services and increase community awareness and understanding of behavioral health issues and resources available in the community.

Community Wellness Challenges

The River Valley Health Network hosted a 3K Mental Health Awareness Walk/Run in the spring of 2022. The RVHN also hosts a yearly wellness challenge. This 12-week challenge is designed to develop sustainable habits to improve health and wellbeing. It provides a fun and competitive program that provides great motivation and accountability.

Programs for Uninsured, Low-Income, and Minority Groups

In order to address the uninsured, low-income, and minority groups, by law our hospital cannot refuse to see anyone regardless of their ability to pay. The Direct Access Lab Program is another source for those who are uninsured and want lab work performed at a lower cost. Madison Healthcare Services also offers a 15% off uninsured discount for getting services here.

We also refer our patients to Lac qui Parle County Family Service Center in order to assist them in attaining the financial support and services they need. Through the pre-paid Medical Assistance (MA) they offer, clients are enrolled with health plans that provide a network of approved vendors. Family Services also provides MNsure application help to get people who are uninsured enrolled in healthcare plans. Each client is assigned a primary clinic, which can refer them to other providers and specialty services if needed. This program also assists with transportation through UCare Health Rides or Blue Plus Blue Ride systems for clients that need it. They also contract with Prairie Five RIDES, which is covered by the state MA program. Expenses of meals and lodging for medical appointments are approved through the county financial workers. These types of programs are also in place for children.

In addition, we practice a Charity Care Policy for patients who have demonstrated the inability to pay. Patients who meet the criteria for charity care will be eligible for a discount for all or part of a bill that a patient is normally expected to pay. We have funds available to provide financial assistance to qualifying patients to relieve them of their financial obligation in whole, or part, for health care services we provide. An inability to pay may be identified at any time. Various discounts will be applied to the patient's bill based on the poverty guidelines they are in. It is the policy of Madison Healthcare Services, consistent with our mission and values, to provide services to all persons, regardless of age, sex, race, religion, origin, or ability to pay.

Conclusion

The Community Health Needs Committee will diligently monitor our current programs to ensure they are meeting our identified community needs. The execution of our implementation plan has experienced many successes and continues to progress. Our focus will be to strengthen and grow our collaborations with other organizations to better our education, outreach, and resources for the communities we serve. Madison Healthcare Services values quality on all levels and works diligently to identify ways to make improvements on an ongoing basis. Services are monitored through our Quality Council, internal and external reviews, and participation in state and federal quality reporting measures.

Sources

- <https://www.census.gov/quickfacts/fact/dashboard/lacquiparlecountyminnesota/RHI125220#RHI125220>
- <https://www.countyhealthrankings.org/app/minnesota/2022/rankings/lac-qui-parle/county/outcomes/overall/snapshot>