



MADISON HEALTHCARE SERVICES

Community Health Needs Executive Summary

Madison Healthcare Services

Lac qui Parle County, Minnesota

January 31, 2025

I. Introduction

Madison Healthcare Services (MHS) is dedicated to assessing and addressing the healthcare needs of the residents of Lac qui Parle County. This Community Health Needs Assessment (CHNA) is designed to evaluate key health concerns, identify priority areas, and outline strategies to improve the overall well-being of the community. By leveraging local resources, partnerships, and public health initiatives, MHS aims to enhance access to essential health services and promote long-term community wellness.

The CHNA process involved a combination of data analysis, stakeholder engagement with Local Public Health, County Social Services and the City of Madison, and public input. This report outlines demographic trends, prevalent health challenges, and MHS's commitment to addressing these concerns through targeted programs. Our primary focus areas include **mental health, chronic disease management, and health education.**

Madison Healthcare Services has also identified cost of care/insurance issues, transportation and lack of specialty providers as health issues in our community. At this time these issues are outside of our scope or area of expertise to address.

II. Demographic Overview of Lac qui Parle County

Lac qui Parle County, situated in southwestern Minnesota, covers approximately 765 square miles and is characterized by a predominantly rural population. Understanding the county's demographic profile is essential to tailoring healthcare interventions effectively.

Population Trends:

- As of 2022, the county's estimated population is **6,736**, reflecting a gradual decline in recent years.
 - The **median age is 48.7 years**, significantly higher than the state median, indicating an aging population that may require increased healthcare services, particularly in geriatrics and chronic disease management.
 - The county's population density is low, at approximately **8.8 persons per square mile**, posing challenges for healthcare accessibility and service distribution.
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Racial and Ethnic Composition:

- **94.1% White (Non-Hispanic)**
- **1.96% Two or More Races (Non-Hispanic)**
- **1.28% Other (Hispanic)**
- **0.86% White (Hispanic)**
- **0.70% Asian (Non-Hispanic)**

Socioeconomic Factors:

- The **median household income** is **\$66,967**, slightly below the state median, indicating moderate economic stability but potential financial barriers to healthcare access.
- The **poverty rate** stands at **8.67%**, highlighting the need for affordable and accessible healthcare services.
- **Health insurance coverage:** While a majority of residents have health insurance, disparities exist in coverage quality and affordability, particularly for low-income and elderly populations.

III. Identified Health Priorities

Based on an in-depth analysis of health data, community feedback from surveys and stakeholder interviews, MHS has identified three key health priorities:

1. Mental Health

Current Initiatives:

- MHS collaborates Johnson Memorial Hospital to share mental health providers to deliver counseling and psychiatric services.
- Existing mental health services include outpatient therapy, and referrals to specialized care.

Challenges Identified:

- Limited access to psychiatric specialists.
 - Stigma surrounding mental health issues, particularly in rural communities.
 - A rising need for adolescent mental health support.
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Planned Actions:

- Expand community outreach by organizing mental health awareness events, workshops, and school-based programs.
 - Strengthen partnerships with mental health providers to increase service availability, including telehealth options.
 - Enhance crisis intervention services and support groups for individuals dealing with anxiety, depression, and substance abuse disorders.
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2. Chronic Disease Management

Current Initiatives:

- MHS currently provides care coordination services
- Disease management programs offer personalized treatment plans, medication management, and lifestyle counseling.

Challenges Identified:

- Higher prevalence of chronic conditions among the elderly population.
- Barriers to regular monitoring and follow-up due to transportation and financial constraints.
- Need for enhanced community engagement in preventive health measures.

Planned Actions:

- Expand remote patient monitoring services to ensure continuous oversight of chronic conditions with chronic illnesses such as diabetes, hypertension, and heart disease.
 - Provide assistance for rural residents to improve access to providers by offering remote monitoring services.
 - Offer community workshops on lifestyle changes, including nutrition and physical activity, to prevent disease progression.
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3. Health Education

Current Initiatives:

- MHS provides educational programming through monthly radio segments, lunch-and-learn sessions, and collaborations with public health organizations.
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- Information on disease prevention, mental health awareness, and general wellness is disseminated through these platforms.

Challenges Identified:

- Limited reach of current educational programs, particularly among lower-income residents.
- Need for interactive and technology-driven educational resources.
- Growing demand for specialized health education on topics such as substance abuse prevention and geriatric care.

Planned Actions:

- Introduce digital health education initiatives, including webinars and online workshops.
- Expand school and community-based health literacy programs to promote early intervention and preventive care.
- Strengthen collaborations with local organizations to enhance outreach and engagement.

IV. Implementation Strategy & Partnerships

Key Partnerships:

MHS will collaborate with the following organizations to implement its health initiatives:

- **Countryside Public Health** – For coordinating mental health and disease prevention programs.
- **Lac qui Parle Valley Schools** – To promote youth mental health awareness and healthy lifestyle programs.
- **Community-Based Organizations** – For outreach and engagement in underserved populations.
- **Telemedicine Providers** – To expand remote healthcare services.

Monitoring & Evaluation:

To assess the effectiveness of these initiatives, MHS will:

- Track participation rates in educational programs and outreach events.
 - Measure health outcomes, such as reductions in emergency room visits related to unmanaged chronic diseases.
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V. Conclusion

Madison Healthcare Services remains committed to improving the health and well-being of Lac qui Parle County residents. By focusing on **mental health, chronic disease management, and health education**, we aim to create a healthier, more informed community. Through targeted interventions, strategic partnerships, and ongoing evaluation, we will ensure that all residents have access to the care and support they need.

Moving forward, we invite continued community involvement to refine our programs and maximize their impact. We encourage residents to actively participate in health initiatives, provide feedback on services, and engage with local healthcare resources. Collaboration among healthcare providers, policymakers, and community members will be instrumental in achieving our shared goals.

Together, we can build a stronger, healthier future for Lac qui Parle County, fostering a community where healthcare is accessible, preventive measures are prioritized, and every individual has the opportunity to achieve optimal well-being.

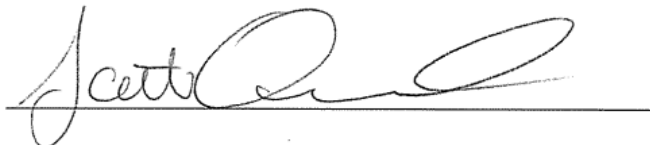


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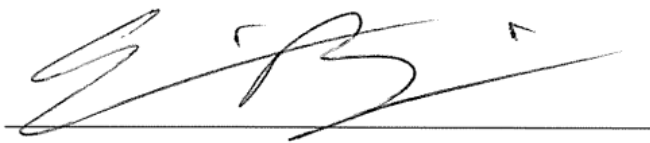
Board of Directors Resolution

The Board of Directors of Madison Healthcare Services hereby resolves to approve the Community Health Needs Assessment Executive Summary and Implementation Plan for January 1, 2025 through December 31, 2027.

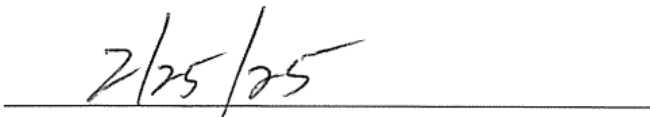
This resolution will continue in effect until December 31, 2027



Board President



MHS Chief Executive Officer



Date