

# COMMUNITY HEALTH NEEDS ASSESSMENT FISCAL YEAR 2019

An assessment of the health and wellness of Pope County conducted by Glacial Ridge Health System and community partners to better understand the needs and assets of the community we serve and to identify priority health needs.



#### **Executive Summary**

Glacial Ridge Hospital performs a Community Health Needs Assessment (CHNA) to assess the current health status of our community every three years. Hospitals utilize available public health data and community input to identify the needs of the community and direct their community benefit activities to address those needs.

During the CHNA process in 2019, Glacial Ridge Health System (GRHS) collaborated with Horizon Public Health, Pope County Human Services, Minnewaska Area Schools, and many community organizations, non-profits, local government, and community leaders.

GRHS' Community Partnership Team for the CHNA compiled applicable information from Horizon Public Health's 2017 Community Health Assessment (CHA), the 2016 Minnesota Student Survey, Pope County health rankings, US Census Bureau, and other public sources for analysis and discussion. The Community Partnership Team then listed community health needs and ranked them based on community impact, the potential for change, economic feasibility, community resources, and alignment to the mission of Glacial Ridge Health System.

Upon review of the 2019 CHNA, GRHS and community partners on the Community Partnership Team identified two priority community health needs.

- 1. ACEs (Adverse Childhood Experiences) and Developing Resiliency
- 2. Drug Misuse and Abuse

We are pleased to share the following report with you.

## Contents

Executive Summary	
Overview - GRHS and Service Area	
Methodology	6
Community Profile	10
Community Health Measures	
Health Issues Identified and Prioritized	18
CHNA Summary	19
Next Steps	21
Attachments	
GRHS 2016 Implementation Strategy Report	Α
List CHNA Community Stakeholders Report	B
Pope County Adult Health Infographic	
Pope County Youth Health Infographic	
Community Assets	F

#### **Overview**

Glacial Ridge Health System (GRHS) conducts a comprehensive Community Health Needs Assessment (CHNA) every three years to serve as a community-driven foundation for its community health improvement efforts. The CHNA is a requirement within the Patient Protection and Affordable Care Act of 2010 (ACA) which requires any hospital with a 501(c)(3) tax-exempt status to invest in community needs and conduct a community health needs assessment.

The objective of the assessment is to analyze health-related indicators, including social, demographic, economic, and environmental factors of the local community we serve. The CHNA reveals which community health indicators have worsening trends or higher occurrence rates in the hospital's primary service area (Pope County) compared to the counties around us and the state of Minnesota. After the data assessment, community health needs are identified and then prioritized.

The priority health needs selected during the CHNA will be addressed by developing and implementing interventions starting the year following the CHNA. The CHNA Implementation Plan will be measured and evaluated over the three-year period to determine if health needs are being met and if the interventions are effectively impacting the priorities identified.

To date, GRHS has sponsored three needs assessments – in 2013, 2016, and this current 2019 report.

#### **Glacial Ridge Health System and Service Area**

The mission of Glacial Ridge Health System is to provide the highest quality "heartfelt" care to the communities we serve. Glacial Ridge Hospital is an independent, not-for-profit, 22-bed Critical Access District Hospital located in Glenwood, Minnesota, approximately 120 miles northwest of

Minneapolis/St. Paul. Glacial Ridge Hospital is a rural health care facility and is not affiliated with a larger hospital system. Tertiary services are provided by St. Cloud Hospital in St. Cloud, approximately one hour from Glenwood.

The population that Glacial Ridge Hospital serves in Pope County alone is approximately 11,250, with a service area of approximately 15,000 encompassing portions of the adjoining counties: Stearns, Swift, Stevens, and Douglas. The primary and secondary service area was identified by zip code reports of patients utilizing healthcare at GRHS. Pope County is 670 square miles with a population density of 16.4 persons per square mile compared to the Minnesota state average of 87.4.

Glacial Ridge Health System encompasses a hospital, three primary care rural health clinics in Glenwood, Starbuck and Brooten; a wellness center; Homecare and Hospice programs; a full-service eye care center, and an advanced and basic life support ambulance service with ambulances stationed in Brooten, Glenwood, and Starbuck. Additionally, the Glacial Ridge Hospital Foundation supports and directs the operations of a 59-unit, independent living facility for seniors across the street from the hospital.

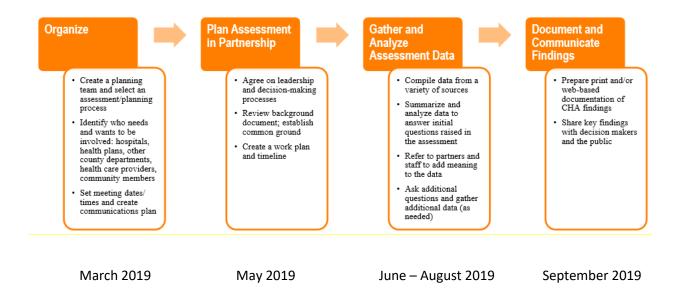
Acute care services provided at Glacial Ridge Hospital include inpatient, maternity, surgery (general, orthopedic, podiatric), emergency, radiology, laboratory, ambulance, pharmacy, and anesthesia.

Outreach services offered at the hospital continue to expand in terms of both scope and quantity of visits.

In FYE 2018, 55.4% of acute care volume was Medicare and 8% was Medicaid. The remaining 38% of the payer mix was divided among managed care, commercial insurance, self-pay, and charity care. The total Medicare mix between inpatient, outpatient, and clinic visits was 45.9% in FYE 2018.

#### Methodology

## Community Health Assessment: Process Overview



#### Organize

The Glacial Ridge Health System Community Health Needs Assessment process began in March 2019 with the identification of an internal task force to conduct the CHNA. Kirk Stensrud – CEO, Matt Campion – QAPI Specialist, Marketing and Communications Manager – Diane Meyer (also the CHNA facilitator), and Joanna Curry – GRHS' Marketing Specialist and Community Events Coordinator, make up the

internal task force. The task force agreed to use the Minnesota Department of Health Community

Health Assessment Model above as a framework for evaluating and analyzing community health needs.

The GRHS task force then asked community leaders to be on the Community Partnership Team (CPT).

This team includes the four individuals on the task force along with Pope County Supervisor Kay Lagren and Community Health Strategist Amy Reineke from Horizon Public Health, Jeanie Pederson —

Coordinator for Pope County Family Collaborative and Pope County EC/THRIVE Initiative, Discharge Planners/Social Service Designees — RNs Kelly Danter and Jamie Boelke at GRHS, Glacial Ridge Homecare and Hospice Manager Tina Blair, and Starbuck Police Chief Mitch Johnsrud.

CPT members and other community organizations that participated in the CHNA represent members of our community living in poverty, experiencing adverse impacts to their physical and mental health, classified as minorities, and are uninsured.

A comprehensive list of individuals from local organizations and businesses was created. These community leaders were invited to participate in the CHNA, providing more in-depth information and feedback that statistics alone don't show.

#### **Plan Assessment in Partnership**

The Community Partnership Team (CPT) agreed to collaborate and partner – to include the exchange and sharing of data, strategies, and processes – when common themes, priority health needs, and strategies to address them are identified. The team agreed with GRHS' plan to follow the MDH Community Health Assessment Model.

This process was designed to:

- Incorporate existing public data to access the health needs, disparities, assets, and forces of change in our community without duplication of resources
- Directly engage community stakeholders in conversation
- Collaborate with Horizon Public Health (HPH) in their recent Community Health Assessment
   (CHA) findings and identification of the top priority health needs

#### **Gather and Analyze Data**

The team began by reviewing the hospital's 2016 CHNA and progress on the 2016 implementation plan. It was noted Glacial Ridge Hospital didn't receive any public/community comments or feedback on the 2016 CHNA and Implementation Plan. If there were any, the CPT would have considered them during this 2019 CHNA.

From past local emergency training sessions, community events, CHNAs, and other collaborative initiatives, the CPT has developed strong cross-sector partnerships. In the data gathering and assessment, this team reviewed demographic, socioeconomic, behavioral risk factors, environmental, and quality of life indicators to gain a shared understanding of the current state of health of the community. CPT members received frequent email communication from one another, providing statistical data related to the community. By doing so, CPT members were able to review and gain an understanding of the data prior to the in-person meetings. During the meetings, the CPT discussed the data and input from members of the community as it relates to the CHNA. A list of current community assets, resources, and actions in each area of health need was identified as well.

Having Horizon Public Health's community strategist and our local public health supervisor on our Community Partnership Team was a great advantage. Horizon Public Health completed a Community Health Assessment (CHA) in 2017. Horizon Public Health is a five county agency that includes Pope County. While their CHA included five counties, they incorporated survey data obtained for each county when available, including the surrounding counties. The counties are generally similar in demographics and health concerns identified through public data and Horizon Public Health's recent CHA. Their assessment also included a more detailed analysis of data for Pope County regarding youth suicide rates, drug and alcohol use, obesity, and poverty rates. The results of their CHA overall, and health indicators from data specific to Pope County, were judiciously reviewed and analyzed by the CPT.

In addition, the 2016 Minnesota Student Survey of Minnewaska students, the primary school district encompassing most of the hospital's service area, was reviewed. The most recent health and environmental data profiles for Pope County, the 2017 Minnesota Health Statistics Annual Summary, and the 2017 Minnesota Statewide Health Assessment from the Minnesota Department of Health were discussed by the CPT.

In June 2019, the CHNA facilitator sent email invitations explaining the CHNA and made follow-up calls to community stakeholders, asking them to participate in our Community Health Needs Assessment process. The 2016 CHNA and the 2016 Implementation Plan Report (Attachment A), including the latest measurements of the identified goals and community actions, were shared with everyone in this group. Community stakeholders included individuals from Pope County Human Services, the school district, chambers, long-term care facilities, churches, transportation services, the food shelf, United Way, law

enforcement, large employers, and many community organizations. For the full list of all organizations and individuals invited to participate and provide feedback, please see Attachment B.

Between June and August 2019, many of these stakeholders representing a broad spectrum of Pope County resources and families of all demographics contributed through email, conversations with members of our CPT, or small groups. They provided input on community perceptions, resources, individual and group needs, and ideas for improving the health of the population and healthcare services.

#### **Community Profile**

The population of Pope County has remained stable and is homogenous. From the 2010 census to the current estimated population of Pope County from the US Census as of July 1, 2019, there has been minimal change in the community's population size and demographics. Future projections indicate a nearly steady population over the next twenty years.

#### Race

In Minnesota, 76.3% of its population is classified as white compared to 97% of the 11,250 residents of Pope County. The remaining population classifications are: African-American – 0.5%, American Indian – 0.5%, Asian – 0.6%, Hispanic/Latino – 2%.

#### <u>Age</u>

Pope County's population has an older median age than the state and a larger percentage of people aged 65 years and older. The population is aging, especially as the Baby Boom generation moves

through the population pyramid. 21.1% of the county is under 18 years of age, close to the state average of 22.3%. The biggest difference in the population comparatively is the number of people 65 years of age and older. Pope County has 24.7%, while the state average is 16.5%. There are 64.5% of residents 16+ in the workforce compared to 63% statewide. Pope County's median age is 45.8 years old while the state's median age is 38.3.

#### Education

Of Pope County residents, 94% have a high school diploma, including 22.9% who have a Bachelor's degree or higher. Minnesota's average education rate is 88% and 32.1%, respectively.

#### **Income and Poverty**

Minnesota has a much higher median income when compared to the hospital service area – Pope County, which is not surprising since metro areas typically have higher incomes which may drive the statewide average up. Pope County's poverty rate is 7.2% of the population compared to Minnesota's average of 9.7%.

#### **Transportation**

Many in Pope County and adjoining counties face a barrier due to the lack of adequate transportation services for individuals without a personal vehicle. In rural areas, this impacts the usage of health care services. Individuals without transportation are more likely to delay and forgo necessary appointments, preventative care, and health maintenance activities. Without reliable options for transportation, older adults are particularly vulnerable to isolation which can lead to increased risk of morbidity and mortality.

Beyond access to health care, lack of transportation impacts the well-being of rural residents from issues varying from access and obtaining food, social support, employment, education, recreation, and community services. (2017 Horizon Public Health's CHA)

#### **Childcare**

Childcare is critical to the workforce, particularly employing parents of young children. Licensed childcare is also critical in providing age-appropriate development for children. There is a significant shortfall in the number of spaces needed to accommodate families, as referenced in Horizon Public Health's 2017 CHA.

Without adequate and affordable childcare options, parents face financial and social barriers. Gaps exist in access, supply, demand, and reimbursement for childcare in Pope and surrounding counties.

#### **Community Health Measures**

#### **Health and Chronic Conditions**

Among the leading causes of death and years of potential life lost, chronic health conditions also contribute significantly to long-term disability and poor quality of life. Chronic diseases affect large numbers of adults in Minnesota and Pope County. The number of adults who experience more than one chronic condition is growing.

Many chronic diseases, such as heart disease, stroke, or diabetes, are preventable health conditions that are often linked to poor diet or lifestyle choices, which are environmental rather than genetic factors.

Some of the ways that individuals in the Pope County community can work towards preventing chronic

disease include staying physically active, maintaining a healthy weight, avoiding tobacco use, and eating a healthy diet. See Attachments C and D for Pope County adult and youth statistics presented as infographics from Horizon Public Health's 2017 CHA.

The leading cause of death in Pope County is cancer, followed by heart disease and unintentional injury.

Pope County residents rate their physical and mental health lower than state and national averages per the data reported in the 2017 CHA of Horizon Public Health.

#### **Adverse Childhood Experiences**

An adverse childhood experience (ACE) describes a traumatic experience in a person's life occurring before the age of 18 that the person remembers as an adult. ACEs may come in many forms, from physical and mental abuse to neglect and household dysfunction.

There is significant evidence of the psychological effects of ACEs on children and a direct correlation to future health conditions from recurring exposure to ACEs. The toxic stress from these experiences, when not adequately addressed and reduced, can lead to long-term behavior issues, health complications, and diseases that are caused by ACEs. With that knowledge, communities can interrupt these situations by providing safe, stable, nurturing environments while helping children build social-emotional skills and resilience. In the absence of protective factors, the greater the number of ACEs, the more likely the individual will have additional stress or other mental health issues.

## COMMUNITY HEALTH NEEDS ASSESSMENT FISCAL YEAR 2019

#### The nine ACEs are:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Divorce or separation of a parent
- Problematic drinking or alcoholism of a household member
- Mental illness of a household member
- Domestic violence towards a parent
- Incarceration of a household member
- Illegal street or prescription drug use by a household member

In the 2016 Minnesota student survey of 8<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> graders, 38-41% of Minnewaska students reported one or more ACEs. In the absence of protective factors, students are more likely to use tobacco, drugs, and alcohol. These tables reflect the rate of students using substances and experiencing mental health conditions corresponding with an increasing number of ACEs at schools in the Horizon Public Health service area, including Minnewaska. See next page for data tables.

Horizon Communities: Past 30-Day Substance Use among 8th, 9th and			
11 <sup>th</sup> Graders by ACE Score	0 ACEs	1 ACE	2+ ACEs
Alcohol Use	10.9%	19%	32.4%
Tobacco Use (Includes cigarettes, chewing tobacco, cigars, e-cigs and/or hookah)	8.28%	17.4%	32.3%
Marijuana Use	4.1%	11.5%	20.7%
Prescription drug misuse	4.1%	9.5%	14.4%

Horizon Communities: Mental Health Problems among 8th, 9th and 11th			
Graders by ACE Score	0 ACEs	1 ACE	2+ ACEs
Long-term mental, emotional or behavioral problems	8.3%	23.6%	38.4%
Past-year self-harm	7.4%	13.2%	40%
Past-year suicidal ideation	4.5%	14%	31.9%
Past-year suicide attempt	1%	1.2%	12.2%

Source: Minnesota Student Survey 2016

#### Mental Health

Mental health plays a major role in people's ability to maintain good physical health. Mental illness, such as depression and anxiety, affects people's ability to participate in health-promoting behaviors and how people cope with the everyday demands and stressors in life. Access to mental health services was identified as one of the top seven health issues in Horizon Public Health's 2017 CHA; there is a significant shortage of mental health providers with appointment availability in Pope County. According to the National Institute of Health (NIH), mental illness may contribute to substance use and addiction; correspondingly, substance use and addiction can contribute to mental illness.

#### Alcohol, Tobacco, and Marijuana Use

Excessive drinking is a risk factor for injury, unplanned pregnancy, poor birth outcomes and child development, violence, infectious diseases, and chronic diseases. The younger a person begins consuming alcohol, the greater the chance of developing alcoholism. In Pope County, 30% of adults have reported binge drinking in the past 30 days. Binge drinking is defined as 4+ drinks in one occasion for women and 5+ drinks in one occasion for men.

In youth, the measure of alcohol use was the percentage of students who reported drinking one or more alcoholic beverage(s) in the last 30 days. Of the 9<sup>th</sup> and 11<sup>th</sup> grade students, more females reported drinking than males. The survey of 9<sup>th</sup> graders reported 16% of females compared to 10% of males had a drink in the last 30 days. Similarly, 17% of females in 11<sup>th</sup> grade reported drinking versus 13% of males.

Smoking and other tobacco use are the single greatest preventable cause of death in the United States. The earlier age a person starts using tobacco, the more likely they are to continue using it as adults. For the first time since 2000, overall youth tobacco use in Minnesota has increased due to the rapid use of electronic cigarettes and other vaping devices. In our youth, 9.1% of 9<sup>th</sup> graders and 18% of 11<sup>th</sup> graders at Minnewaska report using tobacco of any kind. This includes cigarettes, e-cigarettes, and smokeless tobacco. Of adults in Pope County, 8.7% reported they currently use tobacco, including e-cigarettes.

Marijuana is by far the most used illegal drug among adults and youth in Minnesota. At Minnewaska, 10% of 9<sup>th</sup> grade males and 8% of females stated they had used marijuana in the past 30 days. Of 11<sup>th</sup> graders, 14% of males reported using, and no females reported they did.

A growing concern in Pope County and nationwide is the rising rates of improper prescription use. As a result of these rates, there are an increased number of accidental overdoses from prescription drugs and painkillers. Prescription opioids still account for the greatest number of overdose deaths in Minnesota.

The 2016 opioid dispensing rate per 1,000 individuals in Pope County is higher than the state's rate. Additionally, from the 2016 student survey at Minnewaska, 16% of 9<sup>th</sup> grade females and no 9<sup>th</sup> grade males reported prescription drug use (not prescribed to them) in the past 30 days. Of the 11<sup>th</sup> graders surveyed, 4% of female students and 8% of males had used. Many youth find prescription drugs a source of income, as they sell their prescription pills to others or sell those they have stolen from family or friends.

Additionally, of the substance and chemical abuse and misuse that is occurring, law enforcement indicated that prescription pills, along with methamphetamines, are the top two issues they see in the community.

#### Health Issues Identified and Prioritized

In discussion, the CPT agreed that the seven most significant health issues in Pope County identified in Horizon Public Health's 2017 CHA are still the prominent issues facing our community in 2019. Input from multiple stakeholders in the community during this assessment echoed these seven concerns:

- Lack of adequate and affordable transportation
- Drug use
- Access to mental health services
- Lack of community member engagement
- Adverse/negative childhood experiences (ACEs)
- Stigma associated with mental health
- Lack of adequate and affordable child care

The CPT agreed to prioritize and rank the most important health issues utilizing the following criteria:

- Most bang for your buck return on investment
- Size of population impacted
- Impact of issue on population affected
- Basic quality of life/safety
- Ease/difficulty of effective implementation
- Availability of resources and existing services in the community
- · Recognize short and long-term needs
- Results that may cross over to other issues
- Community buy-in/ownership

It was a unanimous vote of the hospital's Community Partnership Team by a show of hands that the community health needs of greatest significance are: Adverse Childhood Experiences (ACEs) and Drug Misuse and Abuse. This also aligns with the top two priorities of Horizon Public Health's 2017 CHA and their Community Health Improvement Plan for 2019-2022. The hospital service area, including all of

Pope County, will be best served by combining efforts and resources, including our community partners, to address these needs and impact change.

#### **CHNA Summary**

This assessment confirms the need for the wide range of programs and services offered by a comprehensive health system in Pope County. Through the community health needs assessment process, many important issues and topics that influence the health of our communities were revealed. Each of them has an impact on a segment of the population, yet not every possible issue could be addressed. The list of identified health needs and community organizations that assist in these areas is the same as those included in Attachment E compiled during Horizon Public Health's 2017 CHA. Glacial Ridge Hospital will continue to support the effort of these organizations and community event initiatives.

A growing understanding of the strong linkage between the Social Determinants of Health and the health status of our community will stimulate innovative and broad approaches that will slowly begin to undermine the negative impact of ACEs and drug use in our communities. Glacial Ridge Hospital's community health initiatives will address and support change in the two top health priorities identified by both the public health CHA in 2017 and this CHNA in 2019. GRHS will continue to work with the community and available resources over the next three years to ensure that this implementation plan is relevant and effective.

The hospital and medical centers are in a unique position to identify and address the health needs of the community, especially as those needs relate to providing acute, diagnostic, emergency, and specialty

services. Other ways in which GRHS will indirectly address local health needs include the availability of charity care, the support of Medicare and Medicaid programs, and discounts to the uninsured who are self-pay. Glacial Ridge Hospital also covers patient transportation costs on Rainbow Rider when identified patients do not have transportation to appointments or have no one to give them a ride home upon discharge from the hospital.

Additionally, as more emphasis is placed on reducing health care costs, keeping people well, improving the management of chronic illnesses, and meeting the needs of an aging population, GRHS is strengthening local and area partnerships and collaborations to fulfill these expectations.

As a non-profit health system, the mission of GRHS is to provide the highest quality "heartfelt" care to the communities we serve. The needs assessment and implementation plan illustrates the importance of collaboration between our hospital and its community partners. By working collaboratively and pooling resources, we can collectively have a positive impact on the health needs of our community.

The hospital service area, including all of Pope County, will be best served by combining efforts and resources, including our community partners, to address these needs and impact change.

#### **Next Steps**

- A formal document of the 2019 Community Health Needs Assessment will be created.
- This document will be directly shared with stakeholders in the community, including all involved
  in the CHNA, the Strategic Planning Committee at GRHS, and the Glacial Ridge Hospital Board of
  Directors. In addition, it will be publicly available and posted on the hospital's website.
- A CHNA Implementation Plan for the two priority health needs will be created that identifies the goal, objectives, strategy, and measurement.
- The Implementation Plan will be directly shared with stakeholders in the community, including
  all involved in the CHNA, the Strategic Planning Committee at GRHS, and the Glacial Ridge
  Hospital Board of Directors. This document will also be publicly available and posted on the
  hospital's website.
- Internally, GRHS will identify departments, services, and financial resources as needed to implement action plans.
- GRHS will gain commitment from community partners and identify roles, responsibilities, and funding resources needed to implement action plans.
- The CEO and Strategic Planning Committee will lead the CHNA Implementation Plan over the next three years.
  - The Strategic Planning Committee includes a community member, hospital board members, CEO, Director of Nursing, Clinic Manager, QAPI Manager, Marketing and Communications Manager, a doctor, and a nurse practitioner.
- The CHNA facilitator will be responsible for the ongoing evaluation, measurement, and progress reporting of plan status.
- An update on the 2019 CHNA Implementation Plan will be reported twice a year at a minimum
  to the Strategic Planning Committee. Glacial Ridge Hospital Board of Directors receives minutes
  from these monthly meetings. The CEO reviews the organization's Strategic Plan at the monthly
  board meetings. The board approves the last meeting minutes at the following meeting.

## Glacial Ridge Health System - Community Health Needs Assessment 2016 Implementation Strategy REPORT

This implementation strategy is a roadmap for Glacial Ridge Health System (GRHS) to help meet the needs of our community as identified in the Community Health Needs Assessment (CHNA) conducted in 2016. GRHS is committed to improving and supporting health and wellness within our community. In addition to focusing on priority needs, GRHS will:

- 1. Continue to collaborate with Horizon Public Health and other community resources to identify significant health risks and develop solutions to reduce community impact.
- 2. Identify new partnerships that can strengthen community health.
- 3. Collaborate our resources to meet the community health needs based on availability and relevance to planned interventions.

Through the CHNA, the two primary community health needs identified were:

- 1. Obesity
- 2. Youth Alcohol & Drug Use

For each of the needs, GRHS and community partners have identified goals, strategies and activities, local partnerships, and performance measures for the goals our community will address to improve the health of our community.

Note: For obesity, one of the strategies is to increase physical activity opportunities for adults and youth. This overlaps with the goal of reducing youth alcohol and drug use by having healthy, alternative places to be with friends. Further, because we do not have baseline student data to measure outcomes for drug use by youth, there is no specific measurement for this goal. We believe that strategies to address youth alcohol use will also address some of the issues affecting youth drug use.

The CHNA and implementation strategy has been shared with community partners, and together, we will work toward completing the strategies and activities to address our most important community health needs at this time.

Glacial Ridge Health System's Strategic Planning Committee will monitor and review progress annually at a minimum.

Goal: To prevent and reduce obesity in	Goal: To prevent and reduce obesity in adults and children by promoting healthy eating and physical activity			
Strategies / Activities	Lead / Role / Partners	Tracking and Performance	Comparison to the performance	
		Measurement	measurement	
Increase access to, and consumption of, healthy foods  - Work with area partners to increase availability of fruits and vegetables to higher-risk population groups (low-income, seniors, etc.)  - Improve availability of healthier food and beverage choices at schools and businesses	Horizon Public Health / Horizon SHIP (Statewide Health Improvement Program) / Glenwood Lakes Area Chamber / Pope County Food Shelf / Farmers Markets, Community Gardens  Minnewaska Area Schools / Glacial Ridge Health System / United Way — backpack attack program / Horizon Public Health	Short-Term Outputs: -Increase access to and public awareness of local Farmers Markets in the summer and year-round local online farmers market -Support community initiatives -Provide free seminars and articles/online posts to the community on healthy eating -Statewide initiatives supported (SHIP)		
- Provide support as needed to Minnewaska Area Schools in implementing USDA guidelines, policy, and menu changes that increase student consumption of healthy foods including more additional fruits and vegetables, as well as free breakfast for all PK-12, (Farm to School – MN Dept. of Ag program) lunch menu	GRHS Employees donate to United Way of Pope and Douglas Counties; \$14,647 in 2019; \$11,604 in 2018; \$11,836 in 2017  Minnewaska Area Schools – support  Minnewaska Area Schools collaborated with Alexandria Public Schools for Food Service and Nutrition Management. As a result, food quality increased and so did lunch and breakfast participation rates.	Medium-term Indicators: Increase number of students in Pope County who consume >5 servings of fruits/vegs from: -6th graders = 21.5% -9th graders = 22.1% -12th graders = 15% Source: 2011 MN Student Survey	Students that have eaten fruit/veggies 4 to 6 times in the last 7 days:  Fruit:  - 5 <sup>th</sup> graders = 19.2%  - 9 <sup>th</sup> graders = 16.4%  - 11 <sup>th</sup> graders = 21%  Veggies:  - 5 <sup>th</sup> graders = 20.5%  - 9 <sup>th</sup> graders = 14.5%  - 11 <sup>th</sup> graders = 19.4%  For an average of: 5 <sup>th</sup> grade = 19.8% 9 <sup>th</sup> grade = 15.5% 11 <sup>th</sup> grade = 20.2%  Source: 2016 MN Student Survey	

- Facilitate seminars and provide education through outreach services on healthier eating	Glacial Ridge Health System – lead  GRHS has provided quarterly, free supper and lunch educational seminars on health topics. Most of the medical condition topics cycled back to maintaining a healthy weight, eating a balanced diet to increase health and decrease risks. Dr. Laura Huggins	Long-term Indicators: Decrease the percentage of Pope County adults who are overweight and obese from 38% and 24.9%, respectively. Source: 2009 MN Department of Health, Behavioral Risk Factor Surveillance System	Update on the percentages of Pope County adults who are overweight and obese. Overweight: 35.1% Obese: 34.1% Not overweight: 30.8% Source: 2015 SHIP Survey
	presented a low-carb cooking demonstration at the Pope County Community Expo in 2019.	Decrease the percentage of overweight and obese adolescents in Pope County from:  Overweight:  - 9 <sup>th</sup> graders = 20.1% 12 <sup>th</sup> graders = 14%  Obese:  - 9 <sup>th</sup> graders = 8.1%  - 12 <sup>th</sup> graders = 10.8%  Source: MN Department of Health, Center for Health Statistics, 2010.	Update on the percentage of adolescents in Pope County that are overweight and obese.  Overweight:  - 9 <sup>th</sup> grade males= 13%  - 9 <sup>th</sup> grade females= 12%  - 11 <sup>th</sup> grade males = 8%  - 11 <sup>th</sup> grade females= 14%  Obese:  - 9 <sup>th</sup> grade males = 7%  - 9 <sup>th</sup> grade females= 12%  - 11 <sup>th</sup> grade females= 12%  - 11 <sup>th</sup> grade females= 10%  Source: 2016 MN Student Survey
- Participate in statewide initiatives that improve access, affordability, and availability of healthy foods (Ex. MN Good Food Access, MN for Healthy Kids Coalition Initiatives)	Glacial Ridge Health System – support	Short-Term Outputs: Number of initiatives sponsored align with GRHS' CHNA goals  Number of adults and children reached, increased physical activity offerings, statewide initiatives supported	ADD IN: Weight status of children 2-5 years of age (BMI)  - Normal weight= 70.51%  - Overweight= 12.82%  - Obese= 14.10% Source: MDH WIC Program, 2018

Increase access to physical activity	Horizon SHIP / Glenwood Complete	Medium-term Indicators:	
opportunities for adults and children	Streets Project – City and MNDOT /	Reduce the number of adults	Adults reporting they get at least 30
- Support community initiatives that	Glenwood & Beyond / Safe Routes to	who report they are physically	min of moderate physical activity
improve facilities/parks / paths	School / Walk, Bike, Explore	inactive in the past 30 days from 23.4%; 2009 survey	5+ days a week: - 27.1%
	Complete streets project started in April	references from CDC, National	Source: Horizon Public Health, 2019
	of 2018 and finished October of 2018	Center for Chronic Disease Prevention and Health	
	Barsness off-road bike trail opened to	Promotion, Division of	
	public in the Spring of 2019	Diabetes Translation	
- Encourage utilization of	Glacial Ridge Health System (Wellness	Increase the percentage of	During the last 7 days, students
community parks, walking paths,	Center) and Glacial Ridge Health System	students who are physically	reported being physically active for
bike paths, etc. by leading fun community challenges	Employee Advisory Committee - lead	active for 30 or more minutes on at least 5 of the last 7 days:	a total of at least 60 min per day: - 5 <sup>th</sup> grade males = 41%
	Fun runs for the entire family: Sweati	- 6 <sup>th</sup> graders = 72%	- 5 <sup>th</sup> grade females = 33%
	Yeti, Minnewaska Warm-up, Triathlon,	- 9 <sup>th</sup> graders = 62%	- 9 <sup>th</sup> grade males = 37%
	GRHS Scrub Run	- 12 <sup>th</sup> graders = 55%	- 9 <sup>th</sup> grade females = 24%
		Source: 2011 MN Student	- 11 <sup>th</sup> grade males = 37%
<ul> <li>Summer fitness programs for</li> </ul>	Glacial Ridge Health System (Wellness	Survey	- 11 <sup>th</sup> grade females = 13%
students	Center) – lead		Source: 2016 MN Student Survey
	FAST – Female Athletes Strength		
	Training – 9 participants		
		Long-term Indicators:	Update on the percentages of Pope
	Personal Trainers work with HS students	Decrease the percentage of	County adults who are overweight
	individually and in small groups	Pope County adults who are	and obese.
	2 7th	overweight and obese from	Overweight: 35.1%
	2-7 <sup>th</sup> grade Summer Athlete Club –	38% and 24.9% respectively.	Obese: 34.1%
	annual club had 6 kids participate this	Source: 2009 MN Department	Not overweight: 30.8%
	summer.	of Health, Behavioral Risk	Source: 2015 SHIP Survey
		Factor Surveillance System	

- Promote SilverSneakers and Insurance reimbursed health club memberships	Glacial Ridge Health System (Wellness Center) – lead  Significant increase in SIlverSneakers membership and class participation	Decrease the percentage of overweight and obese adolescents in Pope County from:  Overweight:  - 9 <sup>th</sup> graders = 20.1%  - 12 <sup>th</sup> graders = 14%  Obese:  - 9 <sup>th</sup> graders = 8.1%  - 12 <sup>th</sup> graders = 10.8%  Source: MN Department of Health, Center for Health  Statistics 2010	Update on the percentage of adolescents in Pope County that are overweight and obese.  Overweight:  - 9th grade males= 13%  - 9th grade females= 12%  - 11th grade males = 8%  - 11th grade females= 14%  Obese:  - 9th grade males = 7%  - 9th grade females= 12%  - 11th grade females= 12%  - 11th grade females= 10%  Source: 2016 MN Student Survey  ADD IN:  Weight status of children 2-5 years of age (BMI)  - Normal weight= 70.51%  - Overweight= 12.82%  - Obese= 14.10%  Source: MDH WIC Program, 2018
---	---	---	--

Goal: To prevent and reduce alcohol use, binge drinking, and drug use by youth.			
Strategies / Activities	Lead / Role / Partners	Tracking and Performance	Comparison to the performance
		Measurement	measurement
Decrease access to, and consumption of,	Glacial Ridge Health System -	Short-Term Outputs:	
alcohol by students at Minnewaska Area	support	- Support community	
Schools  - Support initiatives and programs of state, public health, and Minnewaska Area Schools  - Participate in community initiatives that create a safer environment for youth and educate the community on the risks of youth alcohol and drug use. (Ex. Against Substance Abuse in Pope County – [ASAP]), Students Against Destructive Decisions (SADD), Drug Abuse Resistance Education (DARE) program)	Horizon Public Health / Minnewaska Area Schools / Local Law Enforcement  Minnewaska Area Schools had student/parent/public presentations on what street drugs are in Pope Co. and with the kids and their addictions.  The biggest factor facing our students nationwide in terms of addiction is vaping and the JUUL.  GRHS medical staff, MAS Superintendent, students, and SADD members advocated for Tobacco 21 to the Pope County Commissioners. As a result, the county board passed the ordinance unanimously in December to raise the age to purchase Tobacco in Pope County to age 21. This went into effect Spring 2019.	initiatives  Increase community and parent awareness  Review alcohol, smoking, and drug use at each Child and Teen Checkup using the standard MN CTC form, and discuss/refer if needed.  Medium-term Indicators:  Number of students reached  Number of parents and community members reached  Long-term Indicators:  Decrease the percentage of adolescent binge drinking within the last 2 weeks from  9th graders = 13%  12th graders = 40%  Source: 2011 MN Student Survey	Students reporting drinking 1 or more drinks in the last 30 days:  - 9 <sup>th</sup> graders = 26%  - 11 <sup>th</sup> graders = 30%  Source: 2016 MN Student Survey

GRHS medical staff participate in	
the ECHO program. GRHS is	
implementing new procedures to	
identify potential risks for	
addiction before prescribing any	
opioids to patients. Even the	
surgeon at GRHS has alternative	
pain treatment options and works	
with patients to pursue them	
before seeking a prescription pain	
reliever. GRHS provider	
prescription rate for these	
prescriptions has decreased. 2	
doctors have licenses to distribute	
medical marijuana – medical	
purposes without the high.	

Provide a range of community-based		Short-Term Outputs:	
family and youth activities	Glenwood and Beyond /	- Identify community	
- Support community partnership	Minnewaska Area Schools / ECFE /	initiatives being worked	
initiatives	Glenwood Lakes Area Chamber /	on and planned	
	City of Glenwood – Barsness Park	- Support community	
	and City Park / 4-H / Leagues /	initiatives	
	Clubs	- Number of participants in	
		area fun runs	
	There are numerous activities in		
	our community all year long for	Medium-Term Indicators:	
	families and adults of all ages. Our	- Increased number of	
	community can learn about them	activities that are	
	from Facebook, the Minnewaska	accessible and available	
	Messenger, Chamber Comments,	for youth and families	
	newspaper ads/articles, and other	-	
	places.	Long-Term Indicators:	
		- Decrease in youth alcohol	
	Initiatives include Fellowship of	use	
	Christian Athletes, Be Kind	- Decrease in youth	
	Movement, Welcome Glenwood,	smoking/tobacco use	
	Waterama, Winterama, ECFE,	- Decrease in youth drug	
	clubs, and Chamber Sponsored	use	
	Activities	- Strong community	
		resources for parent and	
		youth support	
	Glacial Ridge Health System – lead		
- Encourage attendance and			
presence at community events by	GRHS Employees turn in a log of		
GRHS, providers, staff, and their	community events and volunteer		
families	hours they participate in. The		
	1		

purpose is to keep it top of mind.

#### **Pope County Community Stakeholders**

Name Organization

Laura Nordstrom Glenwood United Parish
Krista / Randy Glenwood Lutheran Church

Joe Vandeberg Sacred Heart & St. Bartholomew Catholic Church

Jeannie Pederson Pope County Family Collaborative, EC/Thrive

Anna Wasescha West Central Initiative CEO

Margaret Pederson Community Services/Outreach - Volunteer

Jen Jabas United Way Coordinator

Dale Danter Glenwood Police Department Chief

Tim Riley Pope County Sheriff

Mitch Johnsrud Starbuck Police Department Chief

Greg Meyers Glacial Ridge Ambulance Manager

Rachel Wagner Glacial Ridge Medical Centers - Clinic Manager

Tina Blair Glacial Ridge Homecare

Kelly Danter Glacial Ridge Hospital Discharge Planner
Jamie Boelke Glacial Ridge Hospital Discharge Planner

Kirk Stensrud Glacial Ridge Hospital CEO
Lynn Flesner Glacial Ridge Hospital DON

Diane Meyer Glacial Ridge Hospital Marketing/CHNA Facilitator
Matt Campion Glacial Ridge Hospital QAPI/Co-CHNA Facilitator
Austin Versteg Glacial Ridge Hospital Intern - Observation

Brenda Sack Glenwood Retirement Village Social Worker
Chris Knoll Minnewaska Community Health Services

Carli Stensrud Parkview Court Assisted Living

Ryan Voigt, Psy.D., LP

Carl Wallin

Lakeland Mental Health Center - Glenwood

Minnewaska Dental

Chip Rankin Minnewaska Area Schools (MAS) Superintendent

Mary Walsh Minnewaska Area Schools Social Worker

Leah Oeltjen WIN Mental Health Director
Kelly Quade WIN Program Director

Sara Nestor MAS - ECFE & School Readiness Director Kingdom

Angie Blair Kids Childcare Director

Teresa Jergenson Fast - HR

Katie Hallstrom American Solutions for Business - HR

Kersten Kappmeyer Pope County Coordinator

Pope County HRA/EDA

Janelle Negen Glenwood Chamber Director

Kay Blauert Glenwood Chamber - Welcome Center

Starbuck Chamber Starbuck Chamber

Ann Stehn Horizon Public Health Administrator

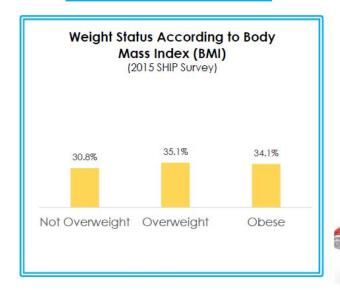
Kay Lagren Horizon Public Health - Supervisor Pope County
Amy Reineke Horizon Public Health - Community Health Strategist

Becca Zwonitzer Horizon Public Health - Health Educator



## POPE COUNTY ADULT STATISTICS

#### **WEIGHT STATUS**



#### PHYSICAL ACTIVITY

During an average week (5+ days per week), other than your regular job, adults reported getting at least 30 minutes of moderate physical activity (Moderate activities cause only light sweating and a small increase in breathing or heart rate).



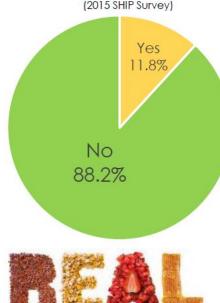
....................

## HEALTHY EATING

Of those earning less than \$35,000 a year, the percentage of adults that have used a community food shelf during the past 12 months

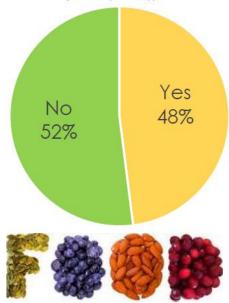
....................

(2015 SHIP Survey)



Of those earning less than \$35,000 a year, the percentage of adults that reported purchasing food from large grocery stores one or more times per week during the past 12 months

(2015 Ship Survey)



**TOBACCO USE** 

8%

of adults reported they are a current user of tobacco, including e-cigs

(MDH, Vital Statistics 2017)

**DRUG USE** 

2016 Opioid Dispensing Rate, per 1000 Residents

(Association of Minnesota Counties, 2016)

**Minnesota** 

615.2

**Pope County** 

808.1

## **CIGARETTE SMOKING DURING PREGNANCY**

. . . . . .

15.1%

Of pregnant women smoke, 2012-2015

(2017 MDH Vital Statistics)

Quit for you Quit for two

## **MENTAL HEALTH**

15.7%

. . . . . . . . . .

Adults reported in 30 days they had poor mental health for 1-9 days

(2015 SHIP Survey)

Percentage of adults reporting why they did not get or delayed the care they needed

(2015 SHIP Survey)

38.9%

Did not think it was serious enough

28.9%

Did not know where to go

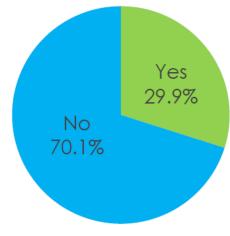
16.3%

Other reason

## **ALCOHOL USE**

In the past 30 days, adults have reported binge drinking (4+ drinks on one occasion for females)
(5+ drinks on one occasion for males)

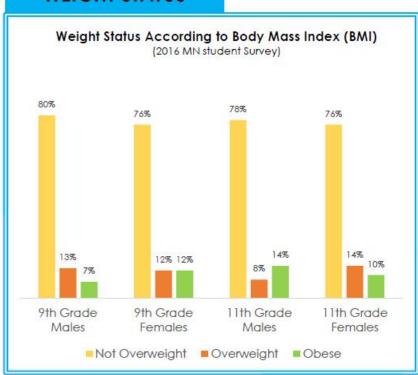
(2015 SHIP Survey)



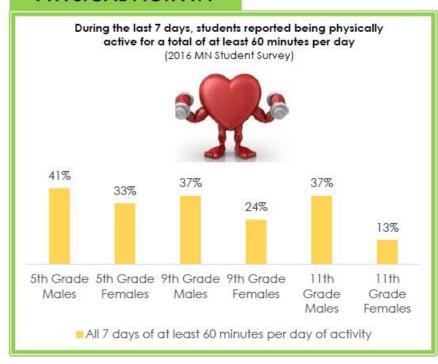


## POPE COUNTY YOUTH STATISTICS

## **WEIGHT STATUS**



## PHYSICAL ACTIVITY



## WEIGHT STATUS OF CHILDREN 2-5 YRS OF AGE (BMI)

(MDH WIC Program, 2018)

70.51% are

**NORMAL WEIGHT** 

12.82% are

**OVERWEIGHT** 

14.10% are

OBESE



#### **TOBACCO USE**

## TOBACCO USE AMONG POPE COUNTY

(2016 MN Student Survey)

## **9TH GRADE STUDENTS**

Smoke Cigarettes 5.5%

Use E-Cigarettes 3.6%

Use Smokeless Tobacco 5.5%

Use Any Tobacco 9.1%

## 11th GRADE STUDENTS

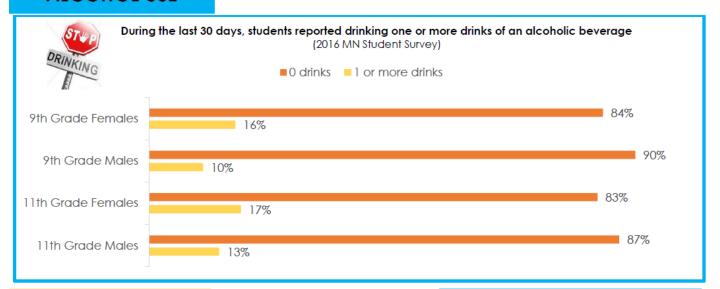
Smoke Cigarettes 13.1%

Use E-Cigarettes 9.8%

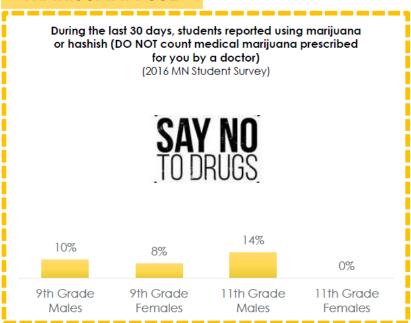
Use Smokeless Tobacco 6.6%

Use Any Tobacco 18%

## **ALCOHOL USE**



#### MARIJUANA USE



#### PRESCRIPTION DRUG USE

During the last 30 days, students reported using prescription drugs not prescribed to them

(2016 MN Student Survey)

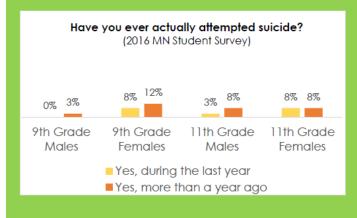
0% of 9<sup>TH</sup> GRADE MALES

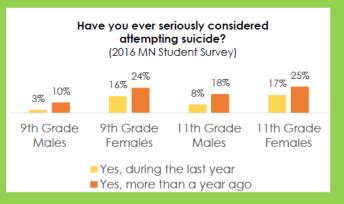
16% of 9<sup>TH</sup> GRADE FEMALES

8% of 11<sup>TH</sup> GRADE MALES

4% of 11<sup>TH</sup> GRADE FEMALES

#### SELF - INFLICTED INJURY







# COMMUNITY ASSETS AND RESOURCES AVAILABLE TO ADDRESS PRIORITY PUBLIC HEALTH ISSUES

PUBLIC HEALTH ISSUE	COMMUNITY ASSETS AND RESOURCES
Lack of adequate and affordable transportation	<ul> <li>Social Service Departments in Douglas, Grant, Pope, Stevens and Traverse Counties</li> <li>Rainbow Rider (public transportation system) in 5 counties, which includes volunteer driver services</li> <li>Morris Transit System in Stevens County</li> <li>Transportation Advisory Committee in Douglas County</li> <li>Taxi-cab services in Alexandria area (Douglas County)</li> </ul>
Drug Use – Prescription and street drugs	<ul> <li>County Sheriffs' Departments in Douglas, Grant, Pope, Stevens and Traverse Counties</li> <li>City Police Departments throughout the 5 counties</li> <li>West Central Drug Task Force</li> <li>Douglas County Opioid Abuse Prevention Task Force</li> <li>Prescription drop-off programs in all 5 counties</li> <li>Stevens County Drug Court</li> <li>Pope County Drug Free Community Coalition</li> <li>Hospital Emergency Departments in the 5 counties</li> <li>New Visions Treatment Program in Douglas County</li> <li>DARE programs at select school districts in the 5 counties</li> <li>Social Service Departments in the 5 counties (Rule 25 Chemical Dependency Assessments)</li> </ul>
Access to mental health services	<ul> <li>Social Service Departments in Douglas, Grant, Pope, Stevens and Traverse Counties</li> <li>Region IV South Adult Mental Health Initiative serving Douglas, Grant, Pope, Stevens and Traverse Counties</li> <li>Mental health providers including Lakeland Mental Health, Lutheran Social Services, Village Family Services, Stevens Community Medical Center's behavioral health program, and counseling services</li> <li>Acute mental health care providers including Behavioral Health Hospital and Emergency Departments at hospitals located in all 5 counties</li> </ul>

	<ul> <li>Douglas County Children's Mental Health Collaborative</li> <li>Family Service Collaboratives in Grant, Pope, Stevens and Traverse Counties</li> <li>Socialization Drop-in Centers in all 5 counties</li> <li>Local Advisory Councils in all 5 counties</li> <li>Post-secondary counseling services at University of MN</li> </ul>
	Morris and Alexandria Community and Technical College
Lack of community member engagement	<ul> <li>Conexiones, a Stevens County Initiative to enhance the integration of the Hispanic community into the general population</li> <li>Community Expos or Family events in Grant, Pope and</li> </ul>
	Stevens Counties
	"Community Night Out" events in the 5 counties
	YMCA in Douglas County
	Area churches including sponsorship of free community meals
	Love in the Name of Christ (Love Inc) in Douglas County
	<ul> <li>Mentorship programs/book clubs/public library events</li> </ul>
	Annual community celebrations
Adverse/negative childhood	Early Childhood Initiatives in Douglas, Grant, Pope, Stevens
experiences (ACEs)	and Traverse Counties
	Douglas County Children's Mental Health Collaborative     Most Control County in Assistant Health Collaborative
	<ul> <li>West Central Community Action Head Start</li> <li>Horizon Public Health and County Social Service Programs</li> </ul>
	Raise Up Stevens County (RUSC) Kinship Program
	Someplace Place for victims of domestic violence
	Intensive in-home treatment programs
	<ul> <li>ACEs cohort training opportunities and community-based ACEs training</li> </ul>
	School district programming including ECFE
Stigma associated with poor mental	Region IV South Adult Mental Health Initiative serving the
health	counties of Douglas, Grant, Pope, Stevens and Traverse
	Drop-in Socialization Centers located in each of the 5 counties    Drop-in Socialization Centers   Drop-in Socialization
	Local Advisory Councils in all 5 counties     School councilors and other staff providing education within
	<ul> <li>School counselors and other staff providing education within the school district</li> </ul>
Lack of adequate and affordable	Existing family-based and center-based child care providers in
child care	the 5 counties
	Knute Nelson Child Care Center in Alexandria, a new child care
	center in final stages of development
	<ul> <li>Chamber of Commerce/area businesses throughout the 5 counties</li> </ul>