

2013 COMMUNITY HEALTH NEEDS ASSESSMENT



North Memorial
Health Care

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INTRODUCTION



BACKGROUND

North Memorial Medical Center (NMMC) in Robbinsdale, Minn., has provided care to people in the northwest Twin Cities metro communities since 1954. The Patient Care and Affordable Care Act of 2010 requires that all 501(c)(3) hospitals conduct a community health needs assessment (CHNA) process to meet the U.S. Department of Treasury and Internal Revenue Service (IRS) rules. The overarching view of the community assessment must be health needs from the perspective of the community, not the perspective of the health providers.

During 2012 and 2013, NMMC conducted its first CHNA and adopted an implementation strategy based on community health needs identified through the assessment. Others will be done every three years. The CHNA took into account input from those who represent the broad interests of the NMMC community including:

- Persons with special knowledge of or expertise in public health
- Representatives of the medically underserved, low income and minority populations
- Populations with chronic disease needs

This report includes a description of the community served, the process and methods used to conduct the assessment and a prioritized description of all the community health needs identified through the CHNA.

COMMUNITY HEALTH NEEDS ASSESSMENT STEERING COMMITTEE

North Memorial established a CHNA Steering Committee to help guide the process through defining goals and target populations in the data gathering stage and help set future priorities based on results. The steering committee also assists in obtaining organizational support and alignment to defined priorities. Committee members are:

Tiffany Zitzewitz, Executive Sponsor

Angelique Brown, Operations Lead

Gerard Balan, CNP, Mental Health Provider

Mark Bixby, MD, Primary Care Provider

Teresa Bloom, Primary Care Administration

Joe Boston, NMHC Foundation

Annie Grapevine, Primary Care Administration

Wendy Jerde, Marketing

Lisa Job, Quality Director

Shirley Kern, Cancer Center

Susan Kramer, Stroke Center (Outreach)

LeeAnn Mortensen, Injury Prevention

LeeAnn Olson, Cancer Center

Peggy Snustad, Home Health

Michelle Sudduth, Human Resources

Emilie Hedlund, Jason Rusinak & Susan Wieker, Project Support

PURPOSE AND SCOPE

CHNA Objectives

- Determine which health factors/issues are most important to community members
- Gather suggestions for improving health and addressing disparities
- Elicit ideas about how NMMC could contribute to health improvements
- Engage community members on evaluating current health improvement efforts and programs

Geographic Area and Target Populations

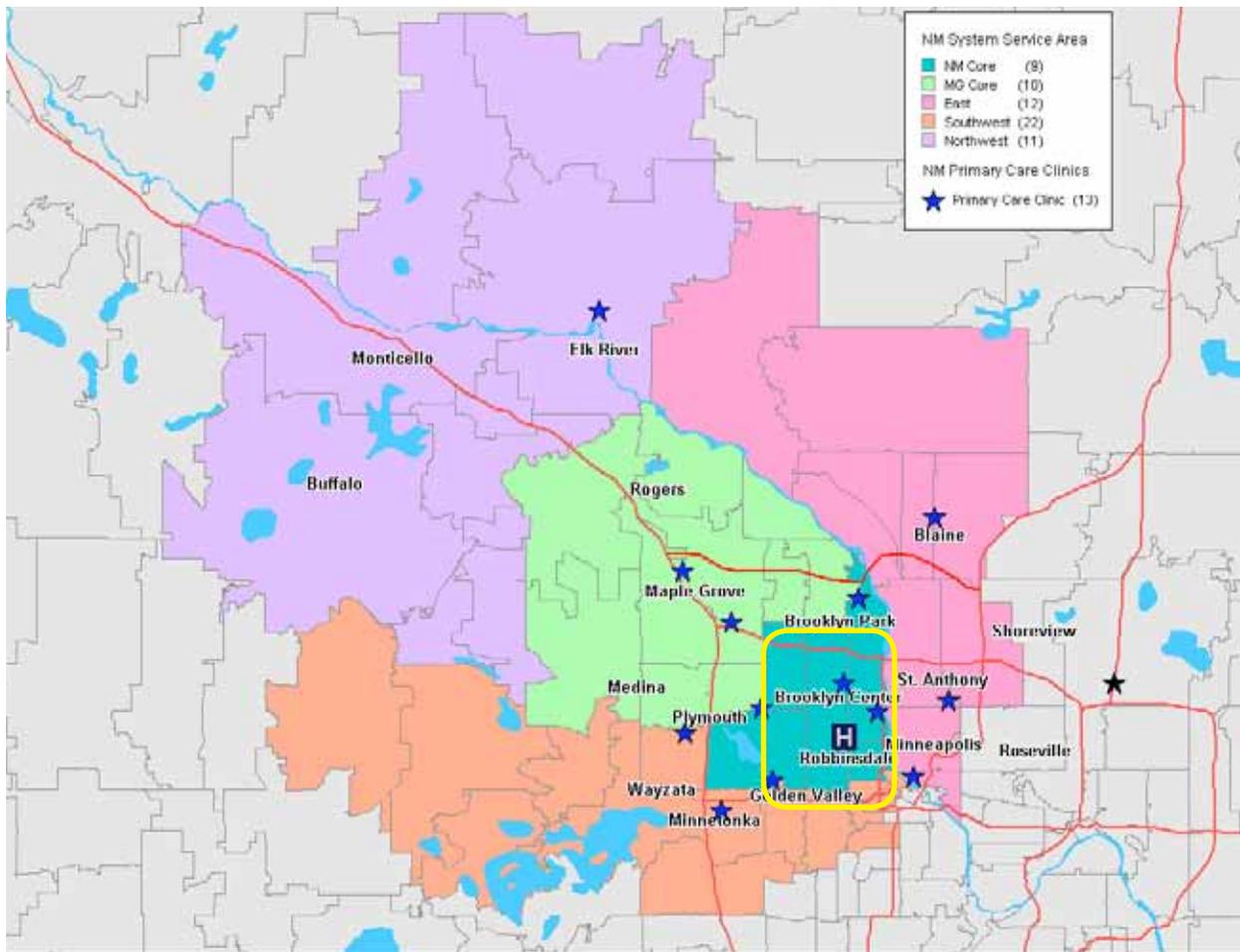
North Memorial services patients in the Northwest Twin Cities Metro Area. North Memorial's "core service area" is the primary focus for the CHNA.

This area includes:

Brooklyn Center, Crystal, Golden Valley, New Hope, North Minneapolis and Robbinsdale

Rationale:

- Covers geography immediately adjacent to NMMC
- Where 43% of 2012 NMMC inpatients and 64% of 2012 outpatient emergency department patients live
- Mirrors SHAPE data geographic regions identified as "Minneapolis – North" and "Northwest suburbs - inner ring"
- Background research showed this as an area with greatest health needs



RESEARCH METHODS

North Memorial collected primary and secondary data to conduct the assessment, determine top community health needs, and help inform the prioritization of action steps.

Secondary Research

North Memorial's CHNA project support team gathered and analyzed existing community information from a number of sources. Three that were invaluable to the process were:

- **SHAPE 2010** – **SHAPE (Survey of the Health of All the Population and the Environment)** is an ongoing public health surveillance and assessment project of the Hennepin County Human Services and Public Health Department. Beginning in 1998, they periodically survey and report on the health of children and adults in Hennepin County. The SHAPE 2010 report is the most recent, with plans being made to conduct the survey again in 2014.
- **Minnesota Hospital Association** – The Minnesota Hospital Association (MHA) is a trade organization representing hospitals and health systems in the state of Minnesota. MHA collects hospital-specific comparative data and provides data resources to members.
- **Nielsen Demographic Data** – The Nielsen Company provides area population estimates, five-year projections and many key demographic variables for community profile analysis.

Primary Research

After reviewing the information about NMMC's service area from the above sources, the CHNA Steering Committee recommended additional qualitative and quantitative research to further understand and focus on top health needs of the community.

Focus Groups - Four focus groups with target populations: North Minneapolis, Northwest Suburbs – inner ring, North (Brooklyn Center, Crystal and New Hope) and South (Robbinsdale & Golden Valley), as well as NMMC employees living in these communities.

Key Stakeholder Interviews - Interviews with community leaders representing local government, law enforcement, education, religious organizations, community-based organizations

Online Survey - Online survey for community members and North Memorial employees, wider geographic reach.

North Memorial retained **Batica & Associates** to lead the focus groups and participate in the key stakeholder interviews.

RESEARCH FINDINGS

SECONDARY RESEARCH SOURCES

During the fourth quarter of 2012, the CHNA Project Support Team gathered existing information about the health of the communities served by NMMC. Three primary sources were used to inform and educate the CHNA Steering Committee: SHAPE 2010 Data Book, Minnesota Hospital Association, and Nielsen population data.

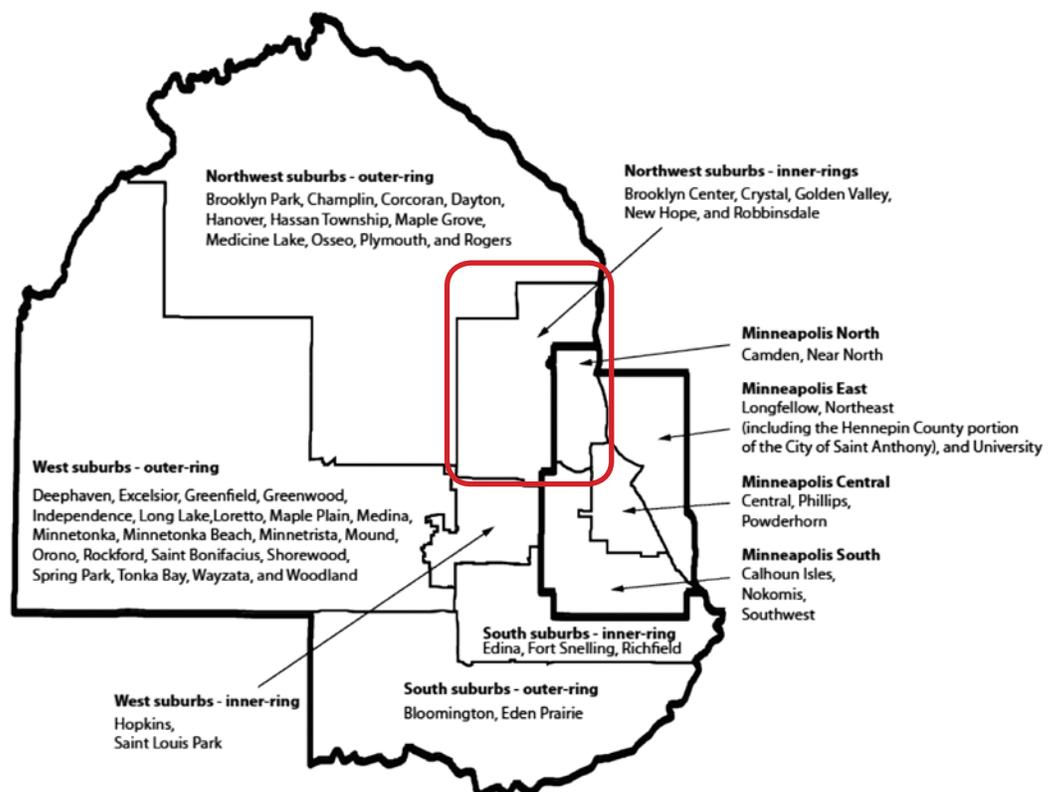
SHAPE DATA, 2010 ADULT SURVEY – SUMMARY OF FINDINGS

“SHAPE is an ongoing public health surveillance and assessment project of the Hennepin County Human Services and Public Health Department to periodically survey and report on the health of children and adults in Hennepin County.” The survey asks community members questions about 1) overall health, 2) healthy lifestyle and behaviors, 3) health care access and utilization, and 4) social-environmental factors.

Source: <http://www.co.hennepin.mn.us/SHAPE>

A review of the 2010 report led the project support team to recommend concentrating additional primary quantitative and qualitative research on two of the geographic reporting areas:

Minneapolis North and Northwest suburbs – inner rings. These areas are immediately adjacent to NMMC and are outlined in red on the map below. This area is the North Memorial core service area.



SHAPE 2010, Minneapolis North

- A large number of respondents reported poor health status & incidence of chronic disease (asthma, obesity, hypertension and heart disease).
- Respondents from this area also reported the highest smoking rate, lowest exercise rate, and lowest consumption of fruits and vegetables.
- Respondents in North Minneapolis were more likely to be uninsured or insured through public programs.
- Many responded that the financial impact of health care and prescriptions was very difficult to address. Over one-third of those on a medication failed to fill it within the last 12 months because they couldn't afford it.
- Greater than 10% of respondents identified the hospital emergency department as their primary source of care.
- Respondents from this neighborhood are less likely to receive routine screenings including mammogram, pap smear and colonoscopy.
- Poverty and violence concerns were highlighted, and this group is very likely to feel discriminated against when seeking health care.

SHAPE 2010, Northwest Suburbs – inner-rings

- The inner ring Northwest suburbs have a reported health status that is significantly worse than other suburban groups, reporting a higher number of days when both mental and physical health is poor.
- Respondents from this area report higher rates of chronic disease, especially heart disease – highest suburban rate of heart attack and coronary heart disease. The number of respondents reporting BMI as overweight or obese is highest in these suburbs.
- Respondents in this area are less likely to exercise, choose healthy food options and more likely to smoke (second only to North Minneapolis).
- Respondents in these cities have the highest suburban-reported uninsured rate – 8.5% – and a greater ratio of public to private payers.
- This group has a lower average income and is more likely to experience financial hardships.

MINNESOTA HOSPITAL ASSOCIATION DATA

North Memorial cared for over 40% of its core service area community members requiring inpatient care in 2012 and over 46% requiring outpatient emergency department care. Residents living in the Minneapolis North area had a significantly higher utilization of outpatient emergency care than other communities in the North Memorial Health System service area.

NIELSEN DEMOGRAPHIC DATA

Over 175,000 people live in the North Memorial core service area. This service area has lower household incomes, greater racial and ethnic diversity, and a higher percentage of uninsured than other areas in Hennepin County or the North Memorial Health System service area.

COMMUNITY ASSET MAP

North Memorial collected information on community based organizations in the area in order to develop a community asset map. An asset map identifies a community's strengths and is designed to promote connections or relationships between individuals and organizations. North Memorial contacted the Urban Research and Outreach-Engagement Center (UROC) in North Minneapolis in order to gather information on community based resources in the area. The mission of UROC is to link the University of Minnesota in vital public partnership with urban communities to advance learning, improve quality of life, and discover breakthrough solutions to critical problems. UROC has collected an extensive list of community based organizations the North metro. The list includes over 100 community-based social service and support organizations, nearly 50 churches and numerous parks and recreation sites. In addition to this, North collected information on the health care facilities in the area including hospitals, clinics, and Federally Qualified Health Care Centers. North and Northeast Minneapolis are designated Health Professional Shortage Areas (HPSAs) and Medically Underserved Areas (MUAs) by the by the Health Resources and Services Administration (HRSA) of the Department of Health & Human Services. HPSAs are designated as having shortages of primary medical care, dental or mental health. MUAs are areas or populations designated by HRSA as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population.

NORTH MEMORIAL MEDICAL CENTER'S PRIMARY RESEARCH

The goal of North Memorial's primary research was to take into account input from people representing the broad interests of the community served by the facility. North Memorial needed to engage a variety of community members and key stakeholders in providing input to inform the assessment.

COMMUNITY FOCUS GROUPS – SUMMARY OF FINDINGS

One research methodology to gather information was community focus groups. Four focus groups with 54 participants from the North Memorial core service area were conducted between February and May 2013:

North Minneapolis – held at the Harrison Park Community Center, hosted by the neighborhood association and the Lao Assistance Center of Minnesota (February 26)

Brooklyn Center, Crystal & New Hope – held at the Brooklyn Center Northwest Hennepin Human Services Council Conference Room (March 13)

Robbinsdale and Golden Valley – held at Robbinsdale United Church of Christ (April 7)

North Memorial Medical Center Staff – held at the North Memorial Outpatient Center (these were staff members who live in the North Memorial core service area, having both a medical center and community perspective) (May 9)

Key Themes: Healthcare Concerns

The questions asked at all focus groups mirrored that of the online survey. Here are some of the findings of the groups:

1. Accessibility and affordability of care
 - Care is difficult to access for certain populations (e.g., the elderly) and there is a lack of options in some neighborhoods.
 - Transportation option is very limited for several people (e.g., seniors, people with disabilities, and new Americans such as refugees and immigrants).
 - Care is expensive and difficult to afford.
2. Disconnected systems and lack of communication
 - Information does not flow across settings.
 - Patients receive conflicting information on their health.
3. Curative rather than preventive model
 - Care that is provided is focused too heavily on tests and cures for pre-existing conditions rather than keeping patients and communities healthy.
4. Culturally appropriate care
 - Patient demographics have changed but staff hasn't caught up.
 - There is a perceived cultural competence gap in community outreach.

Key Themes: Medical Concerns

1. Mental health came up as a major issue, including depression, availability and accessibility of mental health screening.
2. Aging and care for the elderly. Several focus group participants voiced care concerns for themselves and their parents. Several expressed a sense of fear and apprehension for what the future holds.
3. Diabetic care that is culturally appropriate.

STAKEHOLDER INTERVIEWS – SUMMARY OF FINDINGS

North Memorial conducted interviews between May and June 2013 with 12 health leaders from the eight organizations targeted by the steering committee. During each one-on-one interview, we asked the same questions: What are the greatest health issues you encounter? Do you have any thoughts about potential partnerships to make a bigger and better impact in the community?

Stakeholder Organization Representatives who Participated in the Interviews:

1. Annex Teen Clinic: Brian Russ, Executive Director; E. Brooke Stelzer, Director of Sexuality Education, and Diane Brooke, Medical director.
2. City of New Hope: Mayor Kathleen Hemken.
3. Hennepin County Health and Human Services: Jennifer DeCubellis, LPC, assistant County Administrator, Health; and Rex A. Holzemer, MSW, Assistant County Administrator, Human Services.
4. Metropolitan Area Agency on Aging: Dawn Simonson, Executive Director; and Kate Houston, Planning Director.
5. Minneapolis Health Department: Gretchen Musicant, Commissioner.
6. Neighborhood Healthsource: Steven J. Knutson, Executive Director.
7. NorthPoint Health & Wellness: Dr. Paul Erickson, Medical Director.
8. Northwest Hennepin Human Services Council: Susan Blood, Executive Director.

Key Themes:

Representatives of the organizations we visited mentioned a variety of issues. At least two organizations mentioned the issues listed below:

1. Cultural competence – Participants from five organizations mentioned the issue of culturally-appropriate care, culturally-relevant staff, and culturally-specific community outreach, identified as key in building innovative partnerships, creating and building respectful and trusting relationships.
2. Mental health care – Participants from three organizations mentioned mental health care, including behavioral issues and social connectedness, as an issue with which they are concerned and working to address. There is a capacity issue with long waiting for services as well as a need for better screening tools.
3. Funding, affordability and cost of care – Hispanics have the highest number of uninsured, which could be due to immigration status. But even insured persons find copay or deductible prohibitive.

4. Transportation – two organizations mentioned the wide-spread of service area as a challenge for patients to commute. Transportation service is shrinking over the years to almost non-existent. There is a need for coordinated services.
5. Accessibility – At least two organizations mentioned access to affordable care and specialty services as an area of concern. Other implied issues included language, medical literacy, service integration disconnect, database management and service locations.

COMMUNITY/EMPLOYEE ONLINE SURVEY – SUMMARY OF FINDINGS

An online survey was created using Survey Monkey to get responses from a wide group of people in our community. The invitation to complete the survey was sent out to people who have opted in to our Health eMinutes newsletter and social media followers. A link was also prominently placed on the homepage of North Memorial's website. The survey was fielded in March and April of 2013. A total of 275 people completed the survey.

Key Themes:

- Respondents most often identified heart disease, obesity, arthritis, depression and cancer as common medical issues.
- The survey revealed that in many cases, individuals and families are dealing with multiple health issues. Fifty-three respondents (19%) indicated they are dealing with four or more of these health issues and an additional 105 (38%) indicated two or three.
- Several identified time and financial constraints as common difficulties people experience when working to maintain their and their family's health.
- The most common difficulties respondents experience when seeking healthcare from a professional include accessibility and affordability of care.
- The majority of respondents (83%) do turn to their doctor or clinic when they need help with a health issue.

LIMITATIONS

Focus groups and stakeholder interviews gather information from a small but representative sample of community members. While providing an indication of how people like themselves might think and behave, the findings are subjective in nature and not reliably projectable to a larger population.

NOTE

Timing of the research and uninsured rates: Implementation of the ACA and MNSure in 2014 should increase the number of community members with insurance and basic health care benefits.

PRIORITIES

PRIORITIZATION PROCESS

Responses from the survey, focus group, and stakeholder interviews were summarized and presented to the Steering Committee for review. After an initial review of key findings, the Steering Committee engaged in a priority setting exercise facilitated by a neutral third party, Batica and Associates. Areas of need and opportunities for improvement were identified and ranked according to the following criteria:

- North Memorial Medical Center's strengths and values
- Organizational strategy
- Seriousness of the health need in the community
- Timeframe of implementation
- Costs of project
- Community partnerships available



Key areas of need and opportunities for improvement were then grouped into eight themes:

- Community collaboration and engagement
- Expanded access to care
- Patient-centered care model
- Care coordination
- Community-based health education programs
- Affordability of care
- Partnerships with community-based organizations
- Staff diversity

A subgroup of the steering committee then continued to align and refine the eight themes and formed a list of five areas of priority:

- Access and affordability
- Community collaboration/connecting community resources
- Cultural competency in treatment interactions
- Social and emotional wellbeing
- Health information

The steering committee approved five areas of focus and priority and submitted them to the senior leadership team of NMMC for review and development of implementation plans.

HOSPITAL SERVICES/COMMUNITY BENEFITS ACTION PLAN

Access and affordability

NMMC will address the issues of access and affordability of care through a series of initiatives that focus on the following activities:

- Education of community members on how to engage and interact with health care resources. North Memorial Clinic will support NMMC in the education of patients and community members through targeted outreach events. North Memorial Clinics will continue to assist patients and members of the community in accessing health care resources and navigating the health care system through the health care home care model.
- Strategic partnerships with community-based resources that support access and enrollment in health insurance programs.
- Delivery of care to the community through a series of events including screenings, condition-specific and lifestyle health education, all of which are designed to connect community members with care providers.

Community collaboration/connecting community resources

NMMC will facilitate connections with community-based organizations, key stakeholders and community leaders representing diverse cultures and interests through the following actions:

- Quarterly meetings initiated by the president of NMMC between key stakeholders, community leaders, representatives from community-based services and the leadership team of NMMC.
- Access to community-based resources into individualized patient care plans. North Memorial Clinic will continue to integrate referrals to community-based resources into patient care plans.

- Strategic partnerships with community-based resources like **Portico HealthNet** that support access and enrollment in health insurance programs.
- Partnerships with Lutheran Social Services, **Senior Corps** program.

Cultural competency in treatment interactions

NMMC will perform the following actions to address the issue of cultural competency in all care interactions:

- NMMC will perform a Cultural Competence Organizational Assessment or CLAS Assessment as a check up on organizational systems, policies and practices that affect the care of culturally- and linguistically-diverse patients.
- Form a diversity committee made up of NMMC staff members designed to discuss culture and diversity issues and provide recommendations to the organization.
- Develop a culturally-competent nurse midwife program at NMMC.
- Improve data collection when gathering patient information related to race, ethnicity, culture and communication preferences.

Social and emotional well being

North Memorial will seek to support the improvement of the social and emotional wellbeing of community members through the following actions and initiatives:

- Continued support and expansion of the **SafeJourney** program. SafeJourney: A Life Line for Surviving Domestic Abuse was founded in 1994 in response to community need and an emerging awareness of the crucial role health care providers can play in assisting abuse victims. North Memorial Health Care developed SafeJourney as a comprehensive, institutional response to proactively identify and respond to patients suffering from family violence. The Mission of SafeJourney is to provide the support, information and advocacy to individuals and families who do not feel safe in a relationship and empower them to implement a safety plan. It is a volunteer-driven program of North Memorial which offers victims of domestic violence – both adults and children – necessary medical, legal, social and emotional support services both immediately and with follow-up for one year.
- Continued development of the hospital-based **Post-Incidence Crisis Response** program that organizes community response after violent events.
- Expand mental health services available to community members including the day-treatment program and primary care clinic based services.
- Support the expansion of the **Catholic Charities Transitional Recovery-Care** pilot program from a pilot program to an ongoing service offering. In partnership with North Memorial Health Care and Hennepin County, the transitional recovery-care pilot program provides a safe, dignified recovery space for homeless patients after discharge from the hospital. The program aims to prevent patients from returning to homelessness and to reduce emergency room visits and re-hospitalization. The program provides patients respite in a stable, private setting with services at hand for ongoing continuity of care.



Health information

NMMC will expand upon the best-in-class health education and information services available to the community including:

- Injury Prevention through programs like the **Safe Kids NW Metro Minneapolis Coalition** and the **Partnership for Change (PFC)**. PFC is a local coalition of youth, parents, schools, law enforcement, faith communities and other community groups that are working together to reduce drug use among youth and young adults in northwest Hennepin County. The focus is to change the community environment that leads to youth substance use by identifying and implementing strategies that will affect community attitudes, perceptions, norms and beliefs around alcohol and other drugs. In order to ensure the continued success of PFC North Memorial will continue to support the coalition's work to develop environmental strategies that result in long-term solutions that reduce drug and alcohol use and abuse in the community.

Safe Kids NW Metro Minneapolis Coalition (SKWW) was created in April of 1992 as an agreement between Safe Kids Worldwide (SKWW) and NMMC. The purpose of the coalition is to work to prevent unintentional injuries to children ages 18 and younger in northwestern Hennepin County. This partnership allowed North Memorial Medical Center to create a childhood injury prevention program that has been in place for over 20 years. SKWW provides research, education and awareness programs, and public policy information and promotion and includes the following community-based activities: bike helmet safety, sales and fittings, water safety, child passenger safety seats and car safety. North Memorial Medical Center and clinics will continue to support SKWW and will identify new ways to engage with staff, patients, families and the broader community.

- Stroke awareness and prevention education is a facilitated through North Memorial's renowned stroke program. The stroke program focuses on specific direct intervention for stroke prevention, early recognition, early treatment and recovery. Other areas of focus include improving the knowledge of stroke for health care providers and increasing access to stroke specialists for patients. Key areas of focus include prevention of risk factors for stroke, early recognition and treatment and recovery and wellness.
- Cancer screening and prevention which includes education and support groups for the following types of cancer: Breast, Lung, Prostate, Leukemia, Lymphoma and Myeloma. Additional activities include Caregivers Education and Support Group, Survivorship Celebration, Grief Support Group and North Memorial Men's Health Event and participation in community events including Susan G. Komen Race for the Cure, Whiz Bang Days, MN Cancer Alliance and the Breath of Hope Lung Foundation Run/Walk.
- Advanced care planning education for patients and the general community through facilitated sessions and general education.

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