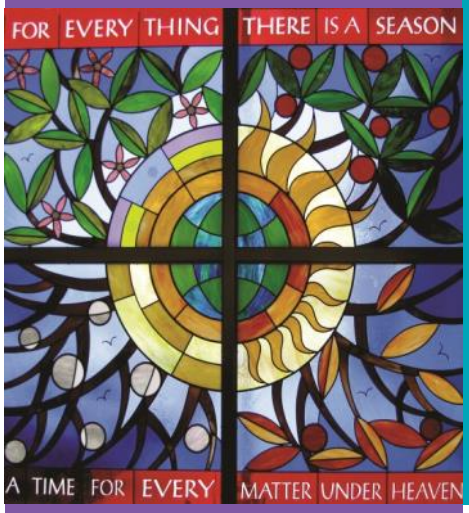
Community Health Needs Assessment

This document presents an assessment of the health data for Hubbard County, Minnesota

CHI St. Joseph's Health

2019



Our Mission

The mission of CHI St. Joseph's Health is to nurture the healing ministry of the Church, supported by education and research.

Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

Community Health Needs Assessment

Living Our Mission

Responding to the health needs of our Community, especially to the most vulnerable among us, is central to the mission of CHI St. Joseph's Health . One way we have achieved this goal is through our community benefit programs and activities that promote health and healing as a response to identified community needs. This assessment is an important step in developing these services.

Our Community: Hubbard County

CHI St. Joseph's Health, located in Park Rapids, is the sole area provider of hospital services for residents of Hubbard County, as well as portions of Becker, Cass, and Wadena counties (~3,800 square miles). The 2019 Community Needs Assessment is a summary report of the community health needs and assets that have been identified for Hubbard County, as surrounding counties have similar demographics.

Our Assessment Teams

In the fall of 2018 and early into 2019, we brought together people with expertise, interest, and knowledge of community health issues to develop and contribute to the assessment process. This included the CHI St. Joseph's Health Board of Directors, the Community Benefit Team, Healthy Park Rapids Area 2020, a community focus group, and 91community members that completed our survey. Additionally, 371 Hubbard County residents completed and returned an adult health behavior survey in early 2018.

The Community Health Department, which provides Public Health services for Hubbard County, has contributed to the document throughout the entire process.

The 2019 County Health Rankings report ranks Minnesota Counties on a variety of summary measures of health outcomes and health factors, including a rank for mortality, morbidity, health behaviors, clinical care, social and economic factors, and the physical environment.

Introduction

Hubbard County, Minnesota is a great place to live, as Minnesotans are on average among the healthiest people in the nation. Our lakes, fields, forests, and rivers provide a beautiful backdrop for everyday activities. Our people and our organizations share the mission of protecting, maintaining, and improving the health of our residents.

This document presents an assessment of health in Hubbard County, in the broadest sense of the concept. Health is defined by the World Health Organization as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." To reflect this understanding of health, this Community Health Assessment discusses a wide array of indicators and information; including the conditions and factors that affect health and the indicators of health status.

While this assessment presents many important issues and topics, it does not present every possible health-related issue. Health information and data has come primarily from Minnesota Department of Health [MDH] 2017 county-level health statistics.

The data from the *"How do we compare?"* section is from the *2019 County Health Rankings & Roadmaps: Minnesota,* a publication from the University of Wisconsin Population Health Institute.*

Data obtained on a source other than above sources is noted in the document. It is important to note, however, there is data that simply is not available from sources. We have included areas of needs and assets based on input from our community survey and focus group verbal comments when determining prioritized significant health needs.

The Implementation strategies will be available by November 2019.

*EDITOR'S NOTE: The report ranks 84 Minnesota Counties; those having high ranks (e.g., 1 or 2) are estimated to be the "healthiest." To see the complete document for their measures, data sources, and years of data, access the report at www.countyrankings.org/minnesota.

Description of Hubbard County

Hubbard County was founded on Feb. 26, 1883 and was named after Lucius F. Hubbard, the Governor of Minnesota from 1882-1887. It is a rural county located in north central Minnesota, approximately 200 miles northwest of Minneapolis, 135 west of Duluth, 80 miles east of Moorhead, and 180 miles south of the Canadian Border. It is bound on the north by Beltrami County, on the east by Cass County, on the south by Wadena County, and on the west by Becker and Clearwater Counties. It is regular in form and has a total area of 923 square miles.

- There are 28 townships.
- It is 42 miles from south to north and 24 miles east to west.
- There are approximately 140 lakes, with Lake Plantagenet in Rockwood and Helga Townships being the largest lake.
- The highest point is 1620 feet above sea level at Lake Alice Township; the lowest point is about 1300 feet above sea level at Steamboat River Township.
- The most prominent physical feature is the ridge of glacial moraines, which cuts across the center of the county from east to west.
- Itasca State Park is located on the western edge of the county and is the "Headwaters of the Mississippi River."
- A small portion of Leech Lake Indian Reservation is in northeastern Hubbard County.

The Crow Wing River and its tributaries flow south from the central ridge through rolling hills to a smooth outwash plain. The central ridge itself has rugged hills which rise over 100 feet above adjacent depressions. Most of the lakes lie in a belt of gravel hills just south of the ridge and on both sides of the central ridge.

NEEDS:

As a rural area in Minnesota, we have unique health concerns. Many of our residents, especially our low income residents, populations of color, and American Indians, experience inequitable living conditions in many aspects of their lives.

ASSETS:

Our diverse geography includes prairies, bluffs, forests, lakes, and rivers, including the mighty Mississippi. Hubbard County residents share an appreciation for the beauty of the area and the resourcefulness of their communities.

We rank 27th out of the 87 Minnesota Counties for our Physical Environment.

NEEDS:

Our growing population will require additional services throughout our county.

ASSETS:

Hubbard County has a history of community involvement by individuals, families, businesses, and other local agencies.

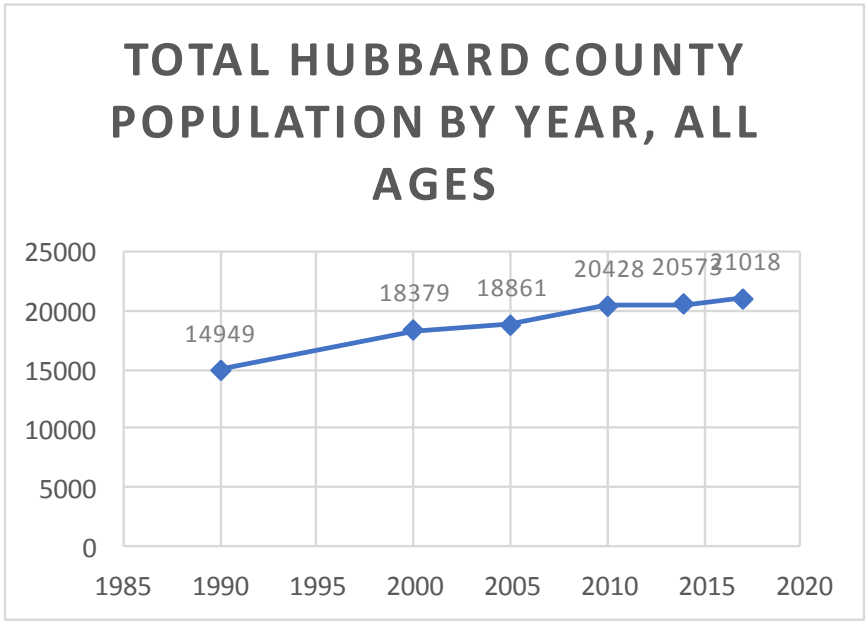
Hubbard County: Our People

With the untrod forests and our bitter winters, it is difficult to imagine what brought the early settlers to our area. As far back as 1860 the lumbermen discovered that this area was covered with majestic pine, but it wasn't until the late seventies when a depressed condition prevailed in the states south and east made living difficult that the settlers came.

Prior to the 1890's, coniferous forests of white, norway, and jack pine covered most of the land. This led to logging and sawmill operations being the principal industries for several decades. The early German, Norwegian, Irish, and English settlers farmed in the summer and worked the woods during the winter months. By 1935, the best timber had been cut and fires had consumed thousands of acres. Since much forest has been replaced, the tradition of "logging" continues throughout the area today.

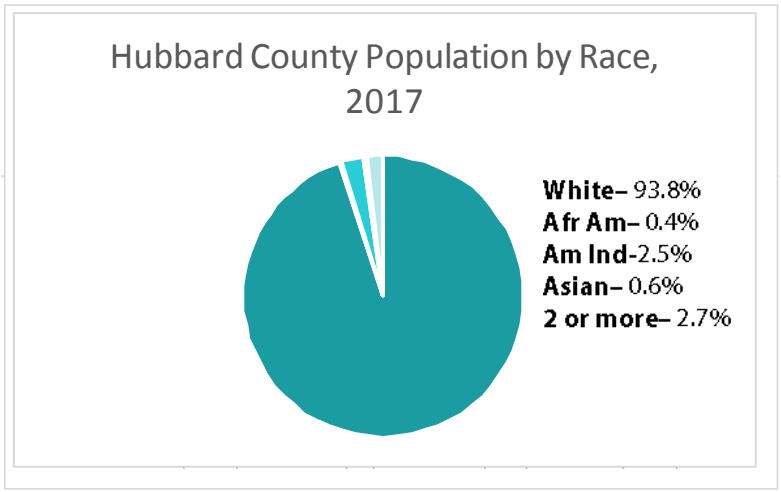
Today, the incorporated cities are Park Rapids (pop. 3276), Nevis (pop.364), Akeley (pop. 414), and Laporte (pop.145). The unincorporated towns include Dorset, Emmaville, Becida, Benedict, Chamberland, Guthrie, Hubbard, Nary, Lake George, and Kabekona.

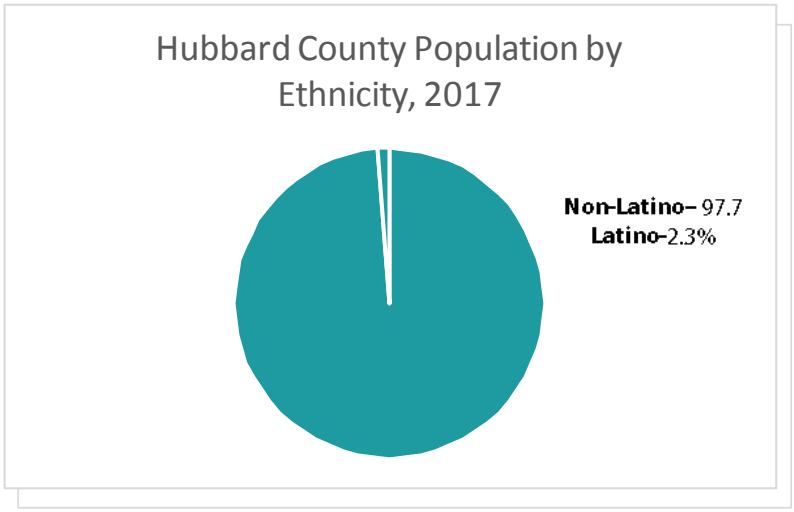
According to the MDH, the 2017 Hubbard County population is 21,018, an increase of 3% change from 2010 census data.



Race and Ethnicity

The racial and ethnic distribution of the 20,573 Hubbard County residents remains stable. The charts below illustrate the race and ethnicity distribution of the Hubbard County Population in 2017.





More on our Population

According to the MDH, of the 21,018 residents in 2017:

- 6.7% (1,134) are children under the age of 5 (down 43 from 2014)
- 22.9% (4,796) are children under the age of 18(up 80 since 2014)
- 23.6 % (5,229) are 65 years of age and over.

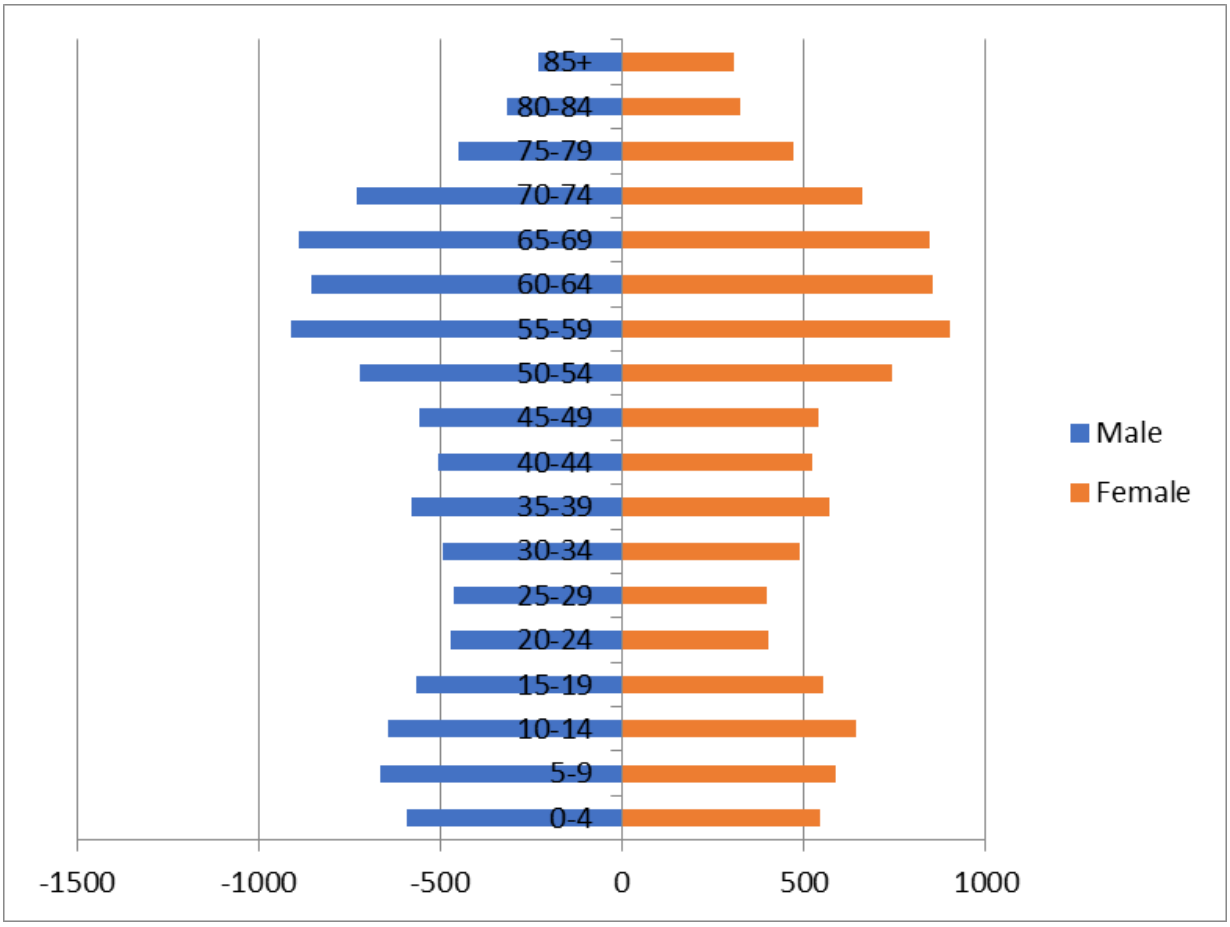
NEEDS:

Much about Hubbard County is changing. Once very demographically homogenous, our racial and ethnic diversity is slowing changing. As our county population changes, communities will be confronted with challenges in meeting the unique needs of older residents.

ASSETS:

Growing racial, ethnic, and cultural diversity brings significant economic contributions and a richness of perspectives, skills, and experiences.

The children of Hubbard County remain the future for us. They bring a passion for their world and they bring a commitment to make a difference.



2017 Estimates of the Population for Selected Age Groups by Sex for Hubbard County, MN
Source: U.S. Census Bureau, 2018

Hubbard county represents an elderly age dependency ratio of 51.59% which is more than twice the state average of 20.00%. This can mean that the burden of care for the elderly may be significant, especially as the population continues to age. Interestingly, the youth dependency ratio in Hubbard county is 47.32% which is nearly ten points higher than the state at 37.7% (U.S. Census Bureau, 2009). This might lead to the conclusion that there is a potential unmet need for care for both the young and elderly within the county.

Hubbard County has an aging population. This is true of all of Minnesota's population, but it is especially true in the rural areas where the aging population is expected to grow more substantially than that in the Twin Cities.

It is predicted that 31.0% of the total population will be age 65 and over for Hubbard County in the year 2035. (Center for Rural Policy and Development)

NEEDS:

Additional health care providers and services will be necessary to meet the needs of the aging population.

ASSETS:

Older residents provide an invaluable source of wisdom and experience to share with others.

NEEDS:

Hubbard County residents and agencies need to be prepared for weather extremes, including blizzards and tornadoes.

Climate changes may affect health for our residents with increased heat episodes and increase insect populations.

ASSETS:

Hubbard County's mild springs, dry autumns, warm summers, and snowy winters bring tourists to the area to appreciate the changing seasonal opportunities, including summer vacations at the lake, spring fishing, winter snowshoeing, and fall hunting.

Hubbard County: Our Place

The natural beauty of the area and the climate can bring an excess of 50,000 tourists to our area to enjoy the many lakes and recreational activities.

Our Weather

The State of Minnesota typically has cold, snowy winters and hot, humid summers. Hubbard County, as well as all of Northwest Minnesota, is subject to extreme weather conditions with long, frigid winters, where air temperatures and wind chill can crop below zero. The average snowfall is 37 inches. In the summer, temperatures hover around the high 70's, but can reach the 90s. The coldest temperature record in Minnesota is -60 degrees F; the warmest 114 degrees F.

Weather data for Minnesota show a trend toward increasing warmth and more frequent heavy downpours with four of the five warmest years on record occurring in the last ten years.

How Do We Compare?

Physical Environment: Air Pollution-Particulate Matter

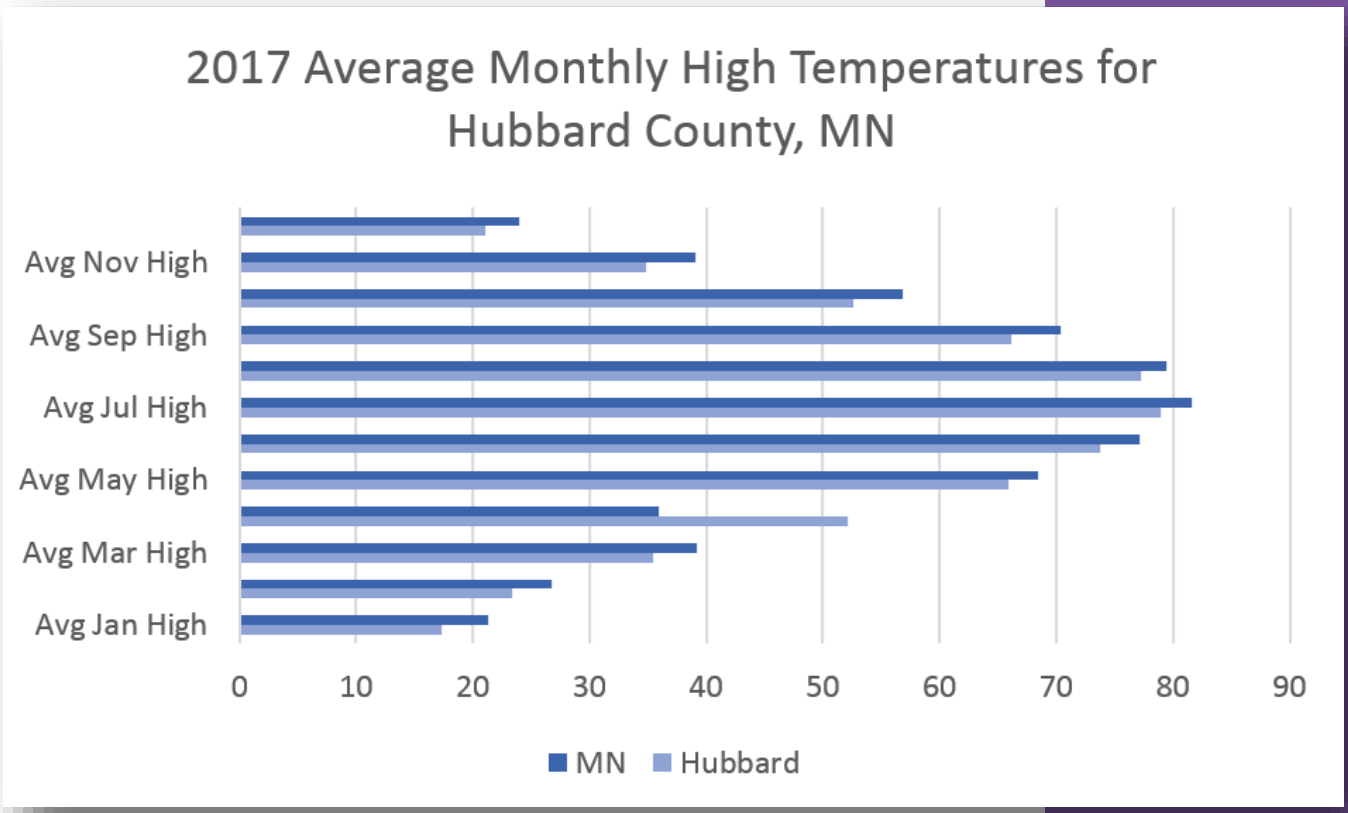
MN	Becker	Beltrami	Cass	Wadena	Hubbard
6.9	6.8	6.6	6.6	6.4	6.4

Drinking Water Violations

MN	Becker	Beltrami	Cass	Wadena	Hubbard
	Yes	No	No	Yes	No

SOURCE: University of Wisconsin, 2019

The 2017 Hubbard County Hazard Mitigation Plan lists Severe Weather Events and Wildfires as top threats for Hubbard County.



NEEDS:

Nearly every Hubbard County Resident comes into daily contact with roads and highways in order to reach the places where he or she lives, works, and learns.

ASSETS:

Our airport and our Public Transportation Program are meeting a great need for our county.

Roads, Highways, and Transportation

Access throughout the county is relatively easy with six State (34, 64, 87, 113, 200 and 226) and two US Highways (2 and 71) providing 282 miles of paved roadways. There are 240 miles of gravel and dirt roads in the county.

Park Rapids Municipal Konshok Field Airport is located on the southern edge of Park Rapids on Highway 71 and is known for being the fifth busiest jet airport in Minnesota. The airport offers services such as tie-downs, refueling, hangar storage, aircraft painting, and avionics installations. The airport has 44 T-hangars, with one main runway stretching 5500 feet north to south. Recent additions to the airport include a municipal sewer and water with fire hydrants. The crosswind runway was paved in 2011, making Park Rapids well known for being the smallest town with a paved crosswind runway at its local airport.

Hubbard County offers a Public Transportation Program that provides curb to curb transportation services for all residents of Hubbard County. The Park Rapids City Bus Services is a 12 passenger, wheelchair accessible vehicle. There is a General Route bus that runs through areas of the county with destinations of Park Rapids and Bemidji. The service information is available at their website www.co.hubbard.mn.us or by calling 732-3500 or 732-9328.

Dial-A-Car is group of volunteer drivers who will transport to medical appointments. The fare is based on mileage, and a ride can be reserved by calling 732-9328. Park Rapids has a taxi service with designated service hours.

Jefferson Line Bus Service provides transportation to the south and to the north with pick-up at the Holiday Station in Park Rapids. The schedule of transport and the purchase of tickets can be made online at www.jeffersonlines.com or by calling 1-800-451-5333.

The nearest Amtrak railroad station is located in Detroit Lakes, and ticket services are arranged on line at www.amtrak.com

Transportation

A TOP RECURRING THEME BROUGHT FORWARD BY THE COMMUNITY NEEDS FOCUS GROUP

ASSETS:

We are fortunate to have a variety of transportation for our rural county, including a cab service, a city bus service, and a county bus.

Our Parks and Trails

Hubbard County is home to Itasca State Park in the northern section of our county. The park offers 32,000 acres to explore, to snowshoe, to bike and to cross country ski on their 70 miles of trail, including a 16 mile long paved trail.

We also have 3 State Trails that transverse our county: The Paul Bunyan State Trail connects the 110 miles from Bemidji to Baxter/Brainerd by crossing the communities of Guthrie and Laporte; The Heartland Trail provides 27 miles of paved trail between Park Rapids to Walker; and The North Country Hiking Trail, which is part a 4,600 mile National Trail stretching from New York to North Dakota, enters Hubbard County west of Walker in Cass County and transverses the Paul Bunyan State Forest to capture the scenic Itasca Moraine landscape. It comes close to the communities of Akeley and Lake George and reaches Itasca State Park at Lake Itasca.

Soaring Eagle Cross Country Ski Trails are located 8 miles north of Park Rapids and consists of 10km of marked and groomed trails through balsam pines and spruce. The trails were built and are maintained by Itascatur for winter enjoyment by the public.

There are 5 community parks in Park Rapids, including Depot, Deane, Red Bridge, Lindquist, and Rice. The communities of Nevis and Akeley have community-sponsored parks. Hubbard County maintains four parks: Heartland in Park Rapids, Lake George Community Park in Lake George on Paine Lake, Laporte Picnic area, and Farris Park located in Farden Township. Heartland Park is the start of the Heartland Trail. The County also maintains 18 public lake accesses and one swimming beach.

The Opportunity for Health in Hubbard County

Opportunities for health for Hubbard County residents begin within their families, neighborhoods, worksites, and schools. This is where we live, play, work, and learn.

How Do We Compare in the 87 Counties?

Health Outcomes: Equal Rating of Mortality & Morbidity Measures

MN	Becker	Beltrami	Cass	Wadena	Hubbard
NA	68	83	86	85	56

Health Factors

MN	Becker	Beltrami	Cass	Wadena	Hubbard
NA	73	86	83	79	75

Health Behaviors

MN	Becker	Beltrami	Cass	Wadena	Hubbard
NA	77	86	83	66	73

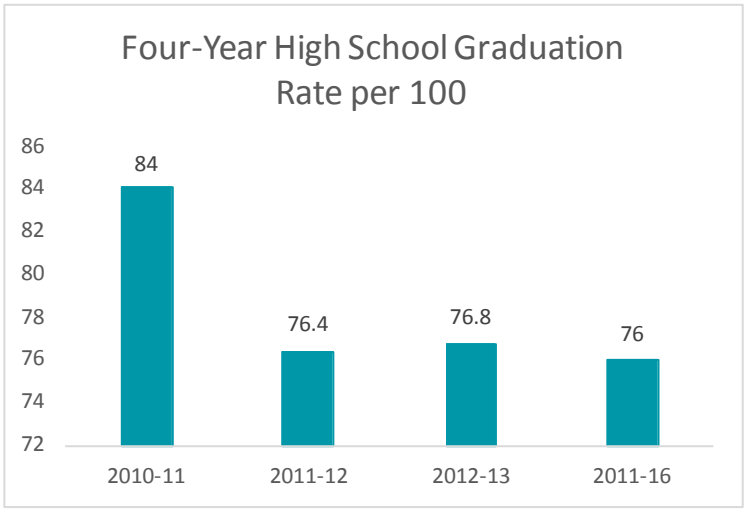
SOURCE: University of Wisconsin, 2019

As we explore the opportunity for health, the chart on the left compares our ranking for Mortality (length of life) and Morbidity (quality of life) health outcomes for Hubbard County with our four surrounding counties and with the State of Minnesota.

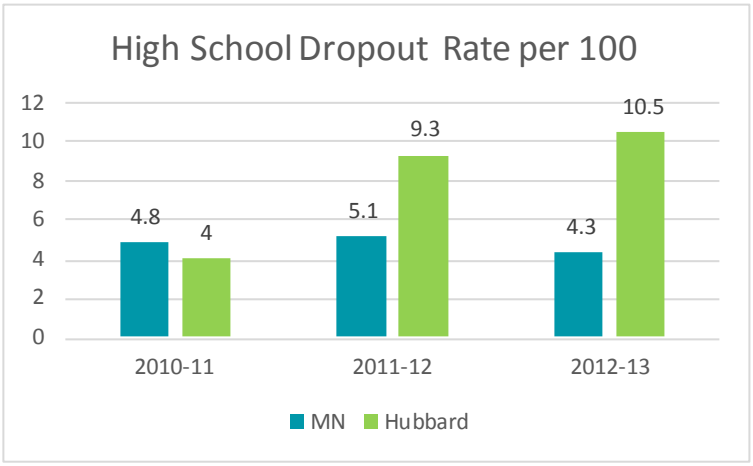
Education and Employment

Health and Learning are closely connected, and education is an important predictor of health because it both shapes and reflects multiple factors that affect people's life choices.

Hubbard County has public schools in three communities; Park Rapids School District 309 has a PK-12 enrollment of around 1615; Nevis School District 308 has a K-12 enrollment of around 602; and Laporte School District 306 has a K-12 enrollment of 366. There are private and home-school opportunities in Hubbard County.



It is estimated that 7.3% aged 25 years and older have less than or equal to a high school education or equivalent (e.g. GED) in Hubbard County.



How Do We Compare?

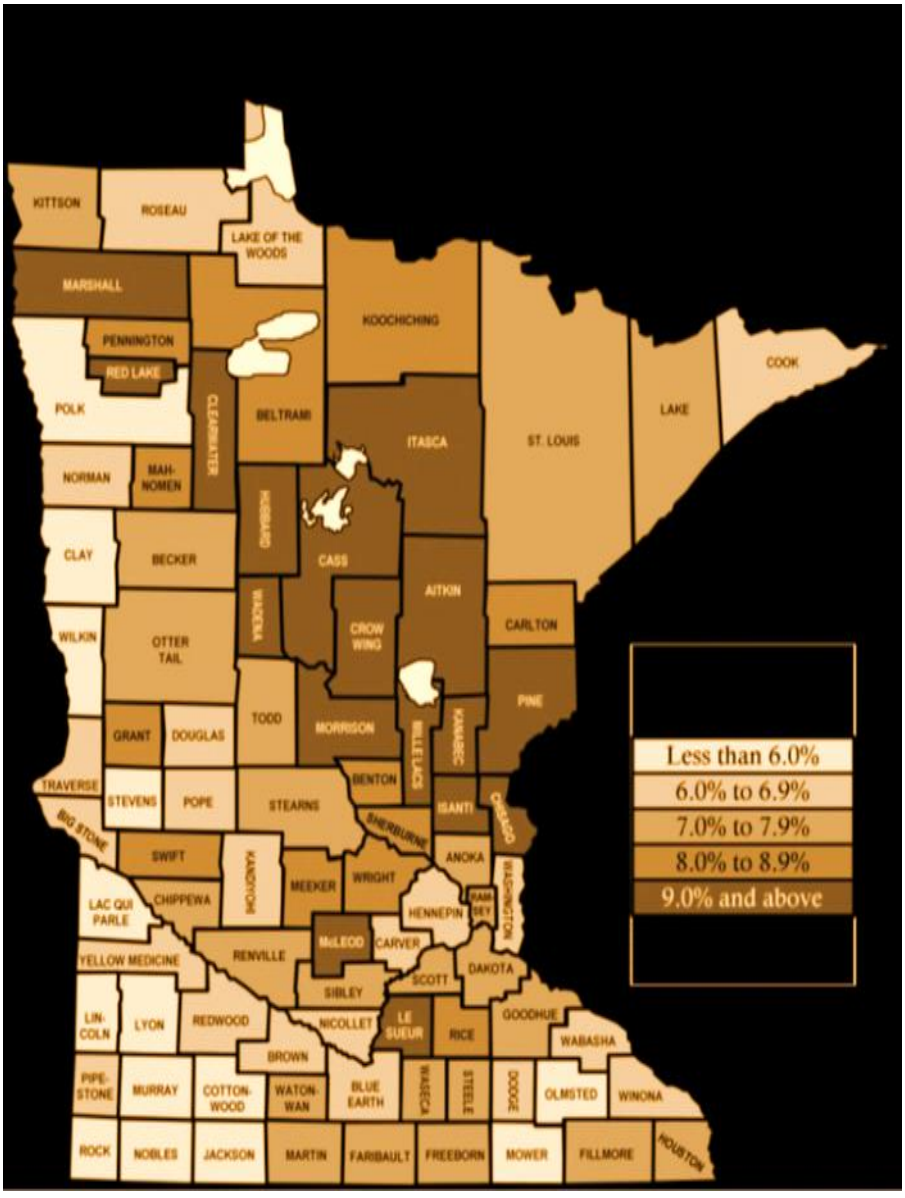
Social & Economic Factors: High School Graduation

MN	Becker	Beltrami	Cass	Wadena	Hubbard
83%	86%	66%	72%	84%	76%

Social & Economic Factors: Some College

MN	Becker	Beltrami	Cass	Wadena	Hubbard
75%	67%	66%	63%	66%	64%

SOURCE: University of Wisconsin, 2019

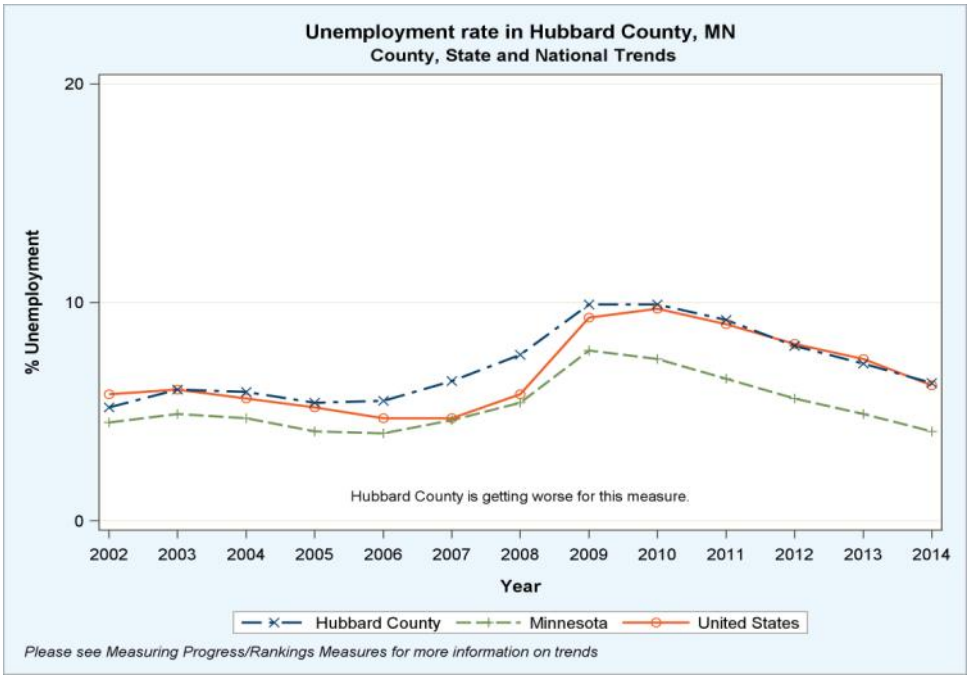


Education is a gateway to employment, which is a source of income and health insurance for residents. The chart above shows the Average annual unemployment in Minnesota, 2010.

NEEDS:

Ability to make a living was identified in our client survey as an issue in our community.

The following chart compares the Hubbard County Unemployed Annual Average % from 2002 through 2010.



ASSETS:

Hubbard County leaders are known for their strong business community and their innovative and effective solutions to challenging problems.

How Do We Compare?

Social & Economic Factors: Unemployment

MN	Becker	Beltrami	Cass	Wadena	Hubbard
3.5%	4.2%	4.9%	5.9%	5.6%	5.6%

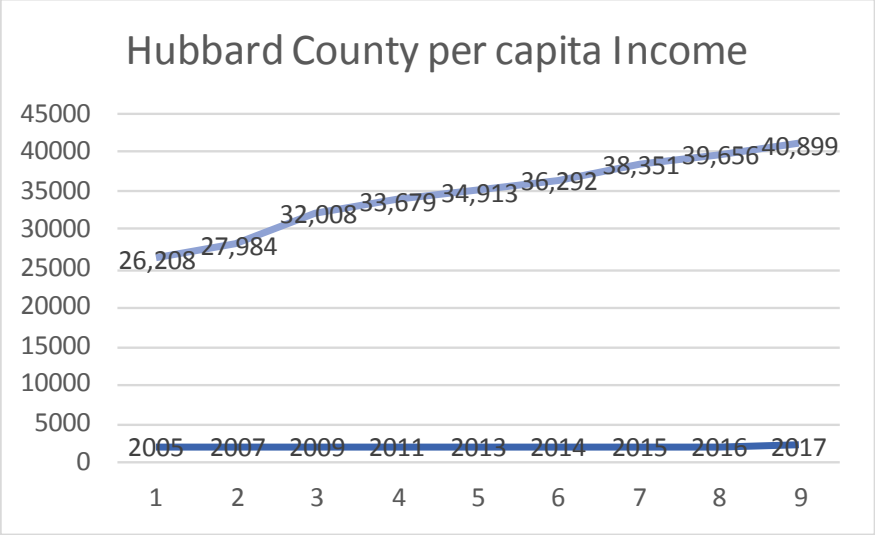
SOURCE: University of Wisconsin, 2019.

Income

Employment is important, yet income involves more than money earned from a job. According to MDH, it also includes assets and access to a variety of economic resources.

A Median Household Income (MHI) is simply the amount that divides the income distribution into two equal groups; half having income above that amount, and half having income below that amount. In 2017, the Minnesota MHI was $60,664, while the Hubbard County MHI was $46,530.

The per capita Income (PCI) is defined as the "average" income. The chart below reflects the PCI over the past 9 years for Hubbard County.



NEEDS:

Poverty, often resulting from lack of income, is linked to health in many ways. It limits choices in education, employment, and living conditions, among others.

ASSETS:

Action Park Rapids is a collaboration of citizens who strategize to create a healthier community. This is a sustained civic effort to identify and address issues, as well as collectively implement and support initiatives of community growth and development.

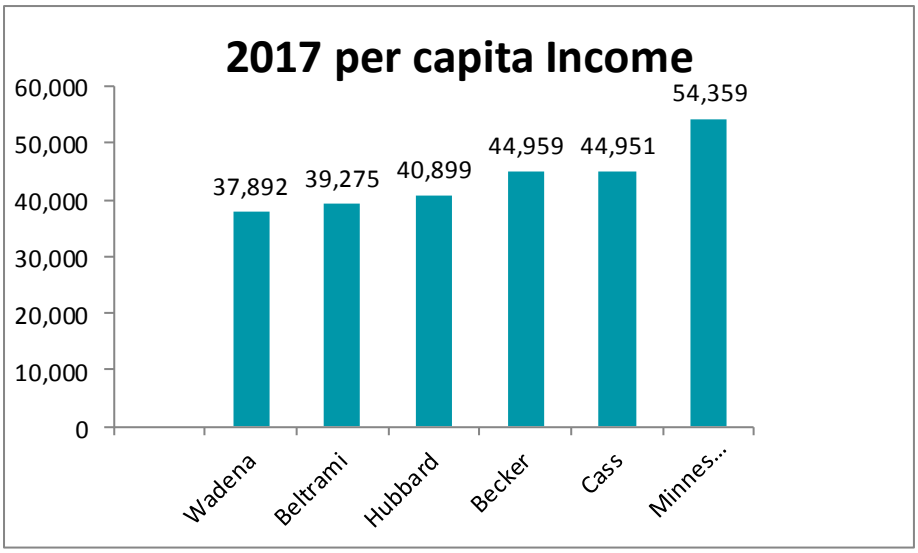
NEEDS:

While our Per Capita income is increasing, it remains below the Minnesota Per Capita Income.

ASSETS:

For our five surrounding counties, we are ranked third in per capita income.

The 2017 Minnesota Per Capita Income was $54,359. The chart below shows the Per Capita Income of Hubbard County and the four surrounding counties in 2017. The Hubbard County per capita income was $34,913 in 2017.



2018 Income inequality in Hubbard County is rated at….. 3.9.

Income inequality is the ratio of household income at the 80th percentile to income at the 20th percentile. According to the County Health Rankings, the Minnesota ratio is 4.3 with the overall range in Minnesota being 3.2-5.3.

How Do We Compare?

Ranking of Counties in Social & Economic Factors

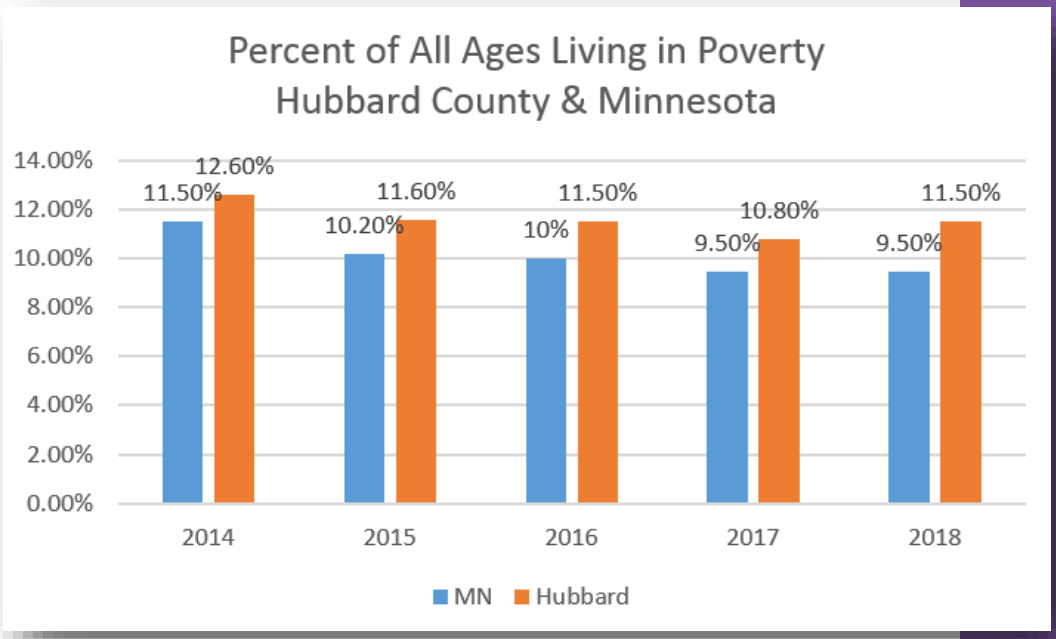
MN	Becker	Beltrami	Cass	Wadena	Hubbard
NA	64	85	84	77	76

SOURCE: University of Wisconsin, 2019

Poverty

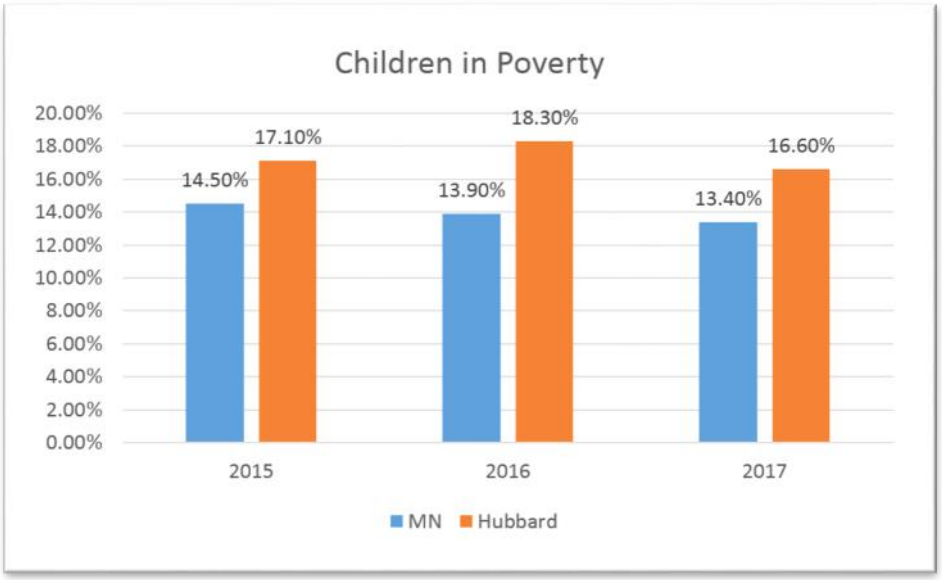
Poverty, often resulting from limited income or lack of income, is linked to health in several ways; it limits choices in education, in employment, and in living conditions. It limits access to safe places to live, work and play, and places to buy healthy foods.

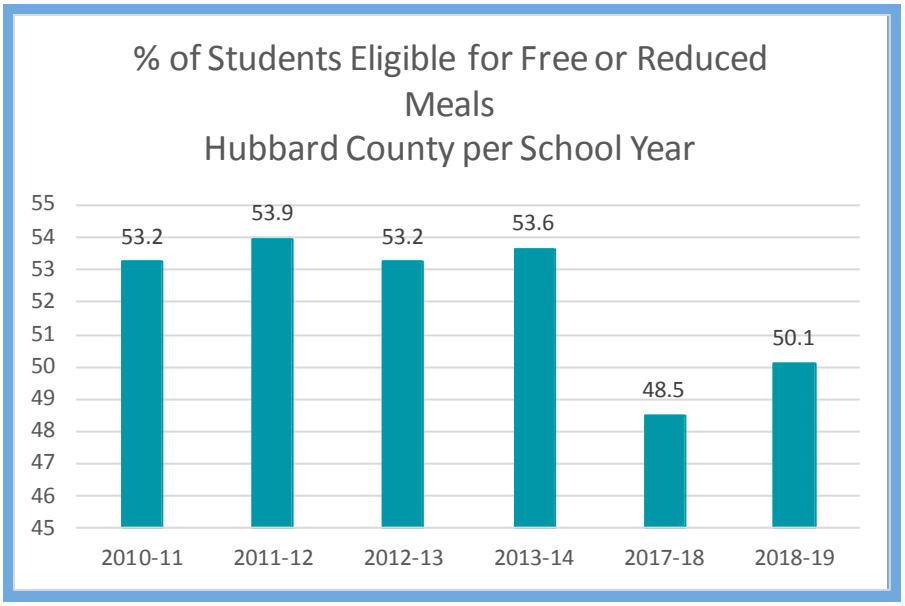
The following chart shows the Percent of All Ages Living in Poverty for both Minnesota and Hubbard County, as estimated by the U.S. Census.



The US Census Bureau determines poverty following the Office of Management and Budget's Statistical Policy Directive 14. The policy uses a set of money income thresholds that vary by family size and composition to determine who is in poverty. If a family's total income is less than the family's threshold, then that family and every individual in it is considered in poverty. The official poverty thresholds do not vary geographically, but they are updated for inflation using Consumer Price Index (CPI-U). The official poverty definition uses money income before taxes and does not include capital gains or noncash benefits (such as public housing, Medicaid, and food stamps).

Children in Poverty





How Do We Compare?

Social & Economic Factors: Children in Poverty

MN	Becker	Beltrami	Cass	Wadena	Hubbard
12%	17%	25%	24%	21%	17%

SOURCE: University of Wisconsin, 2019

Housing and Home Ownership

As part of the build environment, housing is a key factor for health. Older housing, in particular can present threats to health, such as lead-based paint.

Home ownership gives the occupants more control over their living environment and can be a source of financial stability as an asset in time of need. It is estimated that there are 1,257 occupied units paying rent in Hubbard County, with the median gross rent from 2013-2017 being $648.

Per the client needs survey…

"More housing is needed for low income seniors and families"

Hubbard County Housing Facts
(U.S. Census Bureau, 2010)

Housing Units, 2017	**14,808**
Homeownership rate, 2013-2017	**82.3%**
Housing units in multi-unit structures, % 2006-2010	**5.3%**
Median value of owner-occupied housing units, 2013-2017	**$182,700**
Households, 2017-2017	**8,758**

SOURCE: https://www.census.gov/quickfacts/fact/table/hubbardcountyminnesota/PST045218

How Do We Compare?

Severe Housing Problems

MN	Becker	Beltrami	Cass	Wadena	Hubbard
14%	14%	15%	18%	15%	13%

SOURCE: University of Wisconsin, 2019

Business

From the 2016 U.S. Census statistics, Hubbard County had:

- 575 Employer establishments
- 4,545 Private non-farm employment
- -1.1% Private non-farm employment change, 2015-2016
- 1,745 Non-employer establishments
- $216,089 Retail sales, 2007 ($1,000)
- $30,278 Accommodation and food services sales, 2012 ($1,000)

Farmland

Hubbard County has about 50,000 acres of crop land, which includes corn, edible beans, wheat, and potatoes. Hubbard is among Minnesota's top edible bean producers.

SOURCE: Hubbard County Farm Services Agency, 2012

Hubbard County's Leading Employers

- Lamb-Weston/RDO Frozen
- CHI St. Joseph's Health
- Wal-Mart
- Park Rapids Area Schools
- TEAM Industries
- Hubbard County
- Hugo's Family Marketplace
- Potlatch
- Heritage Living Center
- NorthStar Orthodontics

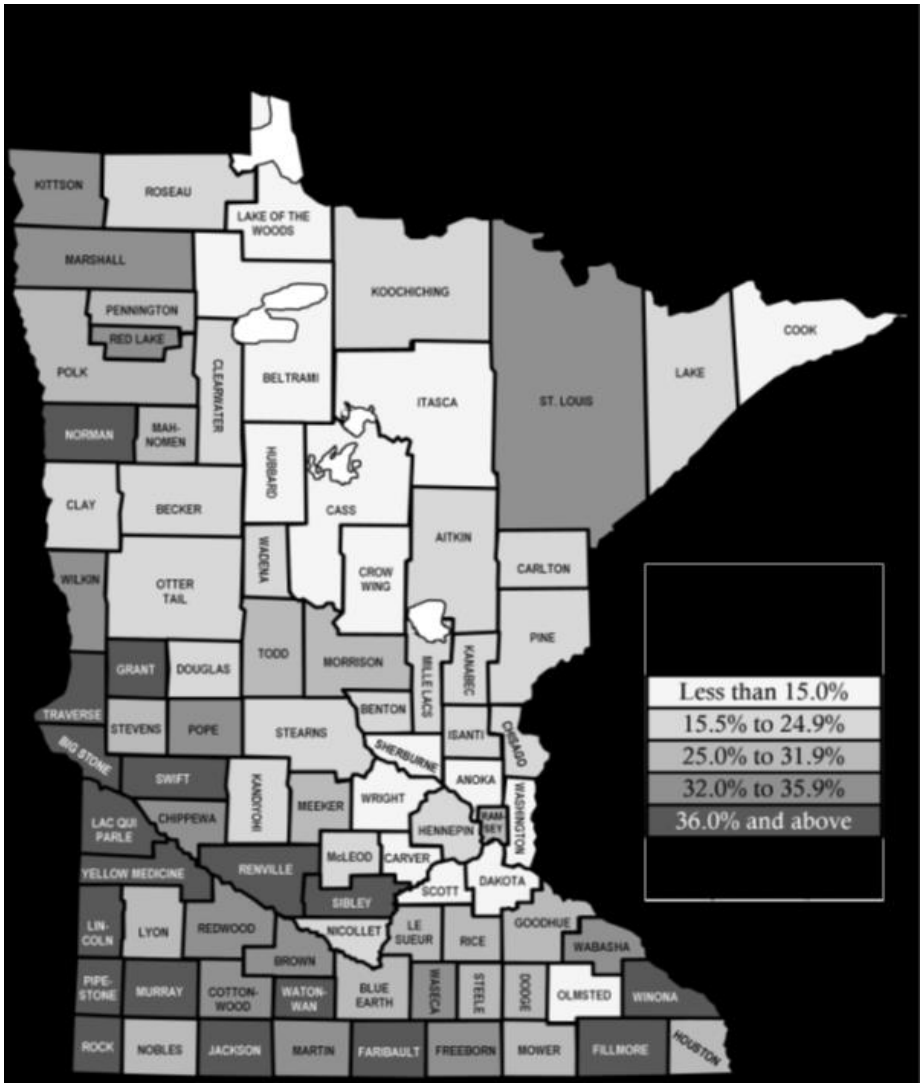
SOURCE: Hubbard County Regional Economic Development Commission, 2018

Lead and the Housing Connection

Hubbard County residents are exposed to lead in homes and in certain occupations. The older a home is, the more likely to contain lead-based paints. It is estimated that there are 2,577 homes built in 1949 or earlier. Lead-based paints were phased out of use in the 1950's and fully banned by 1978. Younger children who spend time in homes with chipping or peeling paint built before 1978 are at greatest risk.

In 2017, 162 children under the age of 6 were tested for Lead in Hubbard County, with 0 elevated venous blood leads reported.

The chart below reflects housing built before 1940 in Minnesota.



Social Connectedness

People at all stages of life need social connection for optimum health.

Single-Parent Families

Overall, the proportion of Minnesota children living in families with single parents has been slowly growing over the past decade. From 2015-2018, 29% of Hubbard County children under the age of 18 lived in single parent headed households. From 2010-2017, it increased to 29% for Hubbard County children under the age of 18.

Growing Older

Social Connectedness is a challenge for the aging. Approximately 12% of households in which the resident are 65 and older are living by themselves in 2010. People living alone are 25% more likely of experiencing loneliness and almost a 20% chance of having no one to care for them if they become ill or disabled.

How Do We Compare?

Social & Economic Factors: Social Associations

MN	Becker	Beltrami	Cass	Wadena	Hubbard
13	20.5	11.3	20.7	21.1	15.4

Social & Economic Factors: Children in Single-parent Households

MN	Becker	Beltrami	Cass	Wadena	Hubbard
28%	27%	46%	40%	31%	29%

SOURCE: University of Wisconsin, 2019

NEEDS:

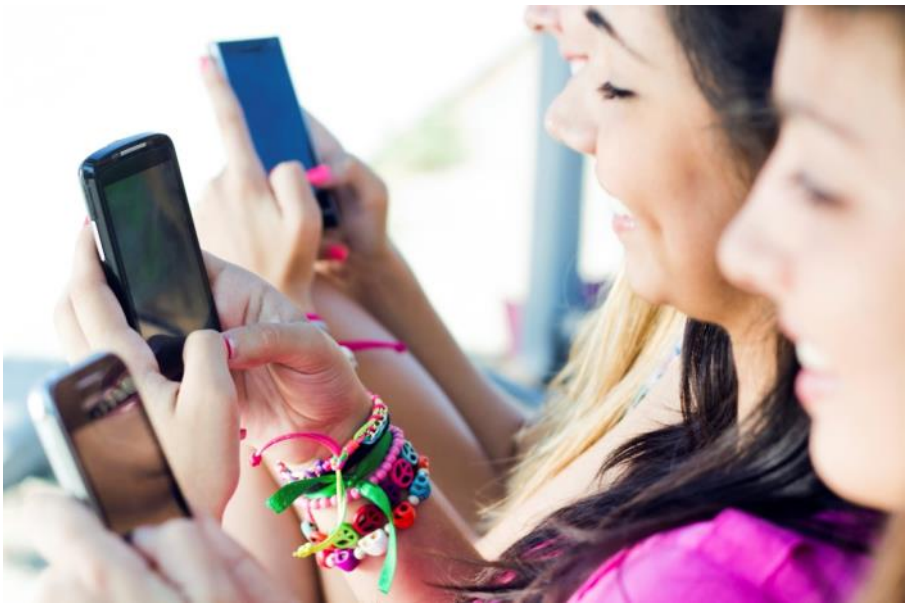
Both adults and children in households with a single parent are at greater risk for adverse health.

■

A TOP RECURRING THEME BROUGHT FORWARD BY THE COMMUNITY NEEDS FOCUS GROUP AND CLIENT SURVEY

~

Youth Center or Community Center



Our Students

ASSETS:

Our youth actively participate in school, faith based, and community work activities.

Hubbard County Student Survey

	2016
Spend one day a week attending church-related activities, 9th graders	26.5%
Spend one day a week or more in a school Sport team, 9th graders	5.6%

SOURCE: Minnesota Student Survey, 2019

Community and Personal Safety

The same factors that influence where people live and the opportunity they have to be healthy are also linked to the experience of violence. The following chart displays the rate of serious crime in Minnesota.

NEEDS:

Violence and crime affect health in multiple ways. Individuals who experience crime, as well as those who witness or hear about it, experience a range of effects from a delay in cognitive development for children to poor mental health.

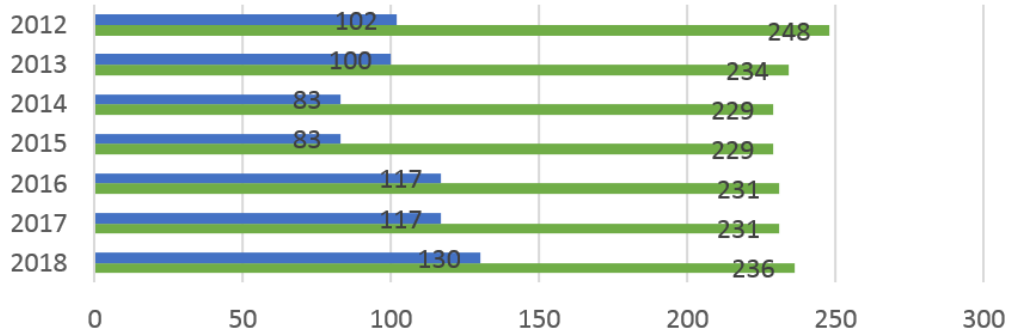
ASSETS:

Protective factors like the involvement of caring friends and adults moderate the effects of negative life experiences and improve the opportunity for positive health outcomes.

- In 2017, there were 403 unique children named as subjects of maltreatment in Hubbard County. There were 489 family assessments completed, and 11 investigations resulted in maltreatment being determined.
- In 2017, Hubbard County had 90 unique children (0-17 years old) in out-of-home care, which is 20.4 children per 1,000. (MN =9.5 children per 1,000).
- In 2017, there were 3 suicides reported in Hubbard County.

In the chart below, Violent & Property Crime rate is defined as the number of violent & property crimes reported per 100,000 population. They are offenses that involved face-to-face confrontation between victim and the perpetrator, including homicide and robbery as well as property crimes.

Violent & Property Crime Rate in Hubbard County and State



	2018	2017	2016	2015	2014	2013	2012
Hubbard	130	117	117	83	83	100	102
Minnesota	236	231	231	229	229	234	248

How Do We Compare?

Social & Economic Factors: Violent Crime

MN	Becker	Beltrami	Cass	Wadena	Hubbard
256	75	257	236	79	130

SOURCE: University of Wisconsin, 2016

Our Students

Hubbard County Student Survey Results

	2016
Strongly agreed or agreed to feeling safe in school, 9th graders	88%
Reported that a student threatened them in the past 30 days, 1x a week or more, 9th graders	12%
Was bullied through email, chatrooms, IM, websites or texting within past 30 Days 9th graders	19%
Has a parent or other adult in your Household ever hit, beat, kicked, or Physically hurt you in any way, 9th graders.	18%
Ever been in a dating or Serious relationship who hit, slapped, Or physically hurt you on purpose, 9th graders	4%
Have YOU ever hit, slapped or physically Hurt a boyfriend/girlfriend on purpose?	1% of 9th Grade Girls
Ever forced to have sex or do something sexual when they did not want to, 9th graders	11%

SOURCE: 2013 Minnesota Student Survey County Tables 2016

NEEDS:

The Client Needs Survey ranked discipline and bullying as the 4th greatest health need.

ASSETS:

87.5% of 9th graders reported that their parents cared "very much" or "quite a bit" about them in the 2016 MN Student survey.

Park Rapids Area Kinship, a mentoring program, was identified as an asset for our youth in our most recent Focus Group, although the need for volunteer mentors is great.

NEEDS:
A place for youth to gather and for wellness activities to occur has been identified as one of the greatest health needs in our community.

■

A TOP RECURRING THEME BROUGHT FORWARD BY THE FOCUS GROUP AND CLIENT SURVEY

~

Youth Center or Community Center

When asked what barriers exist that prevent those most in need of health care and education from accessing current services, the Focus Group said that the lack of a community center was a missed opportunity in our community. It could be a place to congregate, a place to help overcome loneliness experienced by our residents. It would be a benefit in recruiting professionals into our community.

Our Focus Group not that training in parenting skills, life skills, and home skills are a need for our community.

ASSETS:

8th Hour Mentoring and Anti-Bullying Programming through Community Health at the Park Rapids Schools

Access to Health Care

Several factors shape the opportunity for health in Hubbard County, education, employment, and transportation, for example. The same factors also affect access to health care. The health care workforce that carries out our routine and preventive care primarily consists of primary care physicians and dentists.

Hubbard County has a 25-bed Critical Access community hospital with a Level 4 trauma unit, 2 medical clinics, and 5 dental clinics.

The Child and Teen Check-ups Program administers health screenings to public program enrollees from birth through age 20. The State participation goal is for 80% of the public program enrollees to receive an age appropriate screening. Our Hubbard County participation rates were:

- 62.0% in 2015
- 62.0% in 2017
- 64.0% in 2016

And our survey said….

19.6% of our 2017 survey respondents (n=131) replied yes to delaying their medical care. Of those that replied yes, 2% stated the delay was due to not being able to get an appointment, 13% stated it was of the cost, and 5% thought it was not serious enough.

How Do We Compare?

Clinical Care

MN	Becker	Beltrami	Cass	Wadena	Hubbard
NA	49	65	78	75	63

Clinical Care: Primary Care Physicians

MN	Becker	Beltrami	Cass	Wadena	Hubbard
1,120:1	1,160:1	1,210:1	2,230:1	1,530:1	1,290:1

Clinical Care: Preventable Hospital Stays

MN	Becker	Beltrami	Cass	Wadena	Hubbard
5,703	6,148	4,984	5,926	6,311	5,592

Clinical Care: Mammography Screening

MN	Becker	Beltrami	Cass	Wadena	Hubbard
46%	50%	45%	45%	46%	45%

SOURCE: University of Wisconsin, 2019

A TOP RECURRING THEME BROUGHT FORWARD BY BOTH THE COMMUNITY NEEDS FOCUS GROUP AND CLIENT NEEDS SURVEY

~

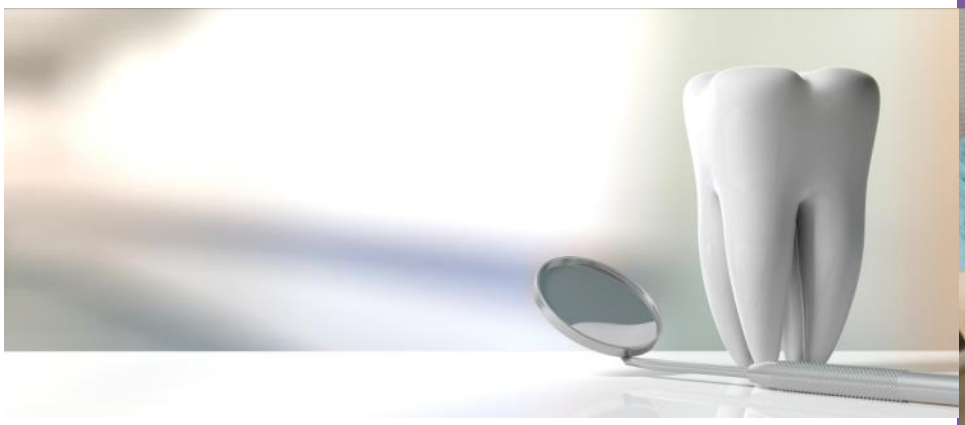
Knowledge of All of the Support Services Available in our Service Area

ASSETS:

We are fortunate to have a variety of health care resources in our rural county.

Physicians in Minnesota: 2011

The above chart reflects the Physicians per 10,000 residents.



In the 2019 County Health Ranking report, Hubbard County had 4,200:1 dentists practicing in our county. The Minnesota ratio is 1,410:1.

CHI St. Joseph's Health Community Dental Clinic provided 6,090 dental visits in 2018.

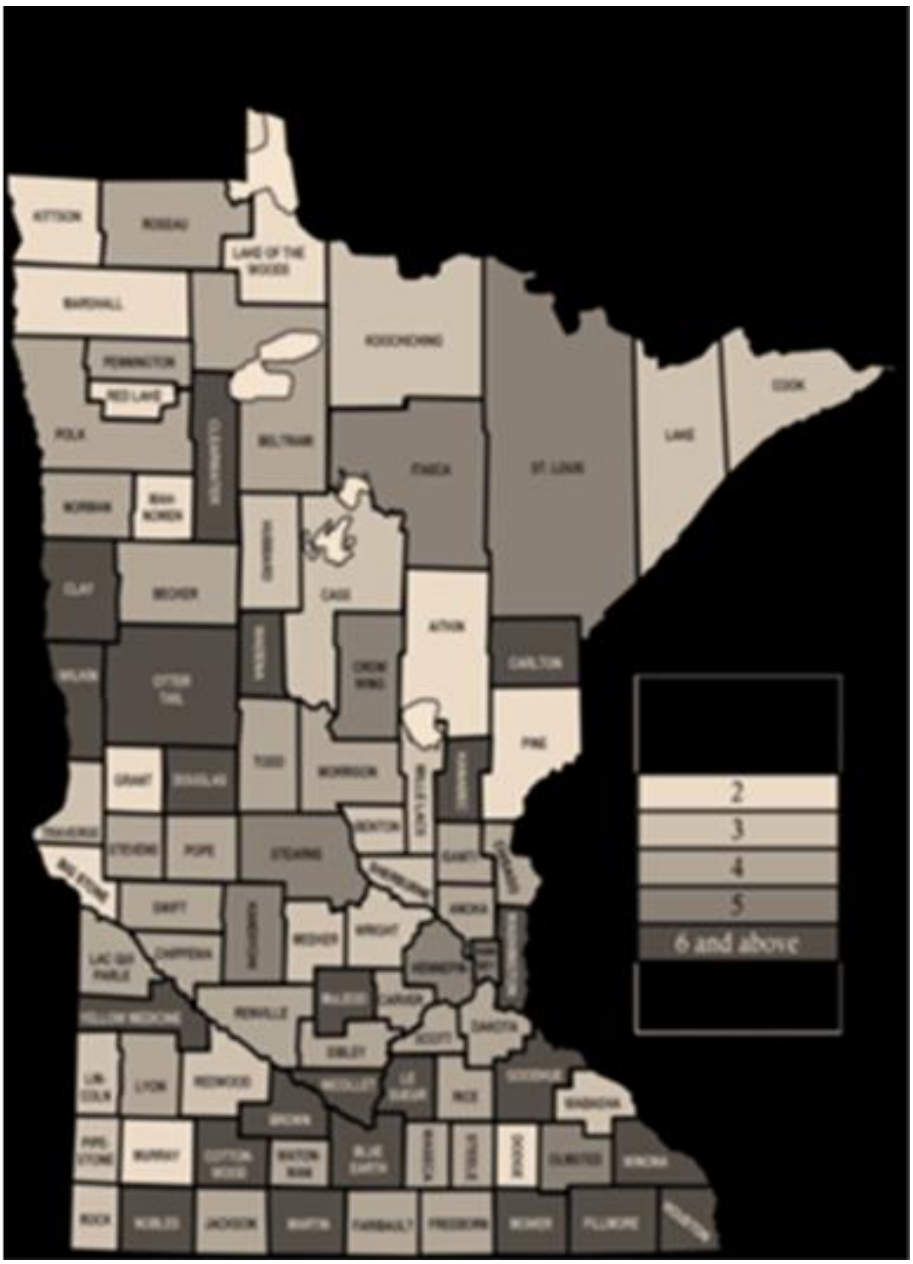
Our Provider Focus Group ranked Access to Dental Care as the #8 greatest need.

NEEDS:

Ten percent of Minnesota's population resides in northwestern Minnesota, but the region hosts only 6 percent of the state's primary care physicians and 8 percent of the dentists.

ASSETS:

We have a hospital-based dental clinic for the public-program enrollees , which provides dental services to the northwest region.



Dentists in Minnesota: 2011

The above chart reflects the Dentists per 10,000 residents.

Access to Nutrition Information

Women, Infants, and Children (WIC) Program

The Hubbard County WIC program provides nutrition education and food vouchers to income-eligible residents including infants and children to age 5 as well as pregnant, post-partum, and breast-feeding mothers.

Clinics are held in Park Rapids and Laporte.

In 2018, there were 486 families enrolled in the WIC program in any given month in Hubbard County.

Our survey said….

41.8% of respondents travel 11 miles or more to the nearest grocery store

Park Rapids is considered Low Income/Low Access, "where a significant number or share of residents is more than ½ mile (urban) or 10 miles (rural) from the nearest supermarket." Source: USDA Economic Research Service, 2019.

And our survey said….

Only 39.3% of the 2017 survey respondents stated they ate five or more fruits and vegetables in a day.

How Do We Compare?

Food Insecurity

MN	Becker	Beltrami	Cass	Wadena	Hubbard
9%	10%	13%	12%	12%	10%

SOURCE: University of Wisconsin, 2019

Insurance Coverage

Health care coverage is provided through a system of multiple health insurances. In Minnesota, more than half receive coverage from an employer, and a third are covered by public programs.

In Hubbard County, the average monthly enrollment for all families and children in Minnesota Medical Assistance is 3,539 and 200 in MinnesotaCare.

The average monthly enrollment for Adults with No Kids is 91 for Medical Assistance and 224 for MinnesotaCare.

It is reported that 7 %of the adults in Hubbard County are uninsured, compared to 5 % of all Minnesotans.

And our survey said….

6.4% of our 2017 survey respondents replied they did not have medical insurance. 13% of our respondents replied they had medical assistance.

Minnesota County Health Tables

Hubbard Counties average monthly enrollment in 2016 was 5,134 and MnCare was 530 for a total of 27% of our county population.

How Do We Compare?

Clinical Care: Uninsured Adults

MN	Becker	Beltrami	Cass	Wadena	Hubbard
5%	8%	10%	8%	7%	7%

Source: University of Wisconsin, 2019.

Healthy Living in Hubbard County

Hubbard County Natality	1996-2000	2001-2005	2006-2010	2014	2017
Number of births	879	1022	1154	232	216
Birth rate per 1,000 population	10.3	11.0	12.0	11.3	10.3
Low birth weight Less than 5 pounds, 8 ounces	48 5.5%	44 4.6%	56 5.0%	7 3.2%	13 6%
Premature births less than 37 weeks gestation	64 9.0%	74 8.6%	91 9.0%	19 9.0%	18 8%
Received prenatal care in the first trimester	77.3%	78.4%	76.7%	82.7%	81.5%
Births to unmarried women	34.4%	34.7%	37.1%	42.7%	37.5%
Number of infant deaths by birth year 1994-2013	2 1994-98	8 1999-03	5 2004-08	3 2009-13	5 2012-16
Teen birth rate per 1,000 15- to 19-year-olds	41.8	31.1	34.1	26.0	14:5

In 2017, 73.5% of the infants enrolled in the Hubbard County Women, Infants, and Children (WIC) program were ever breastfed.

How Do We Compare?

Health Outcomes: Low Birth Weight

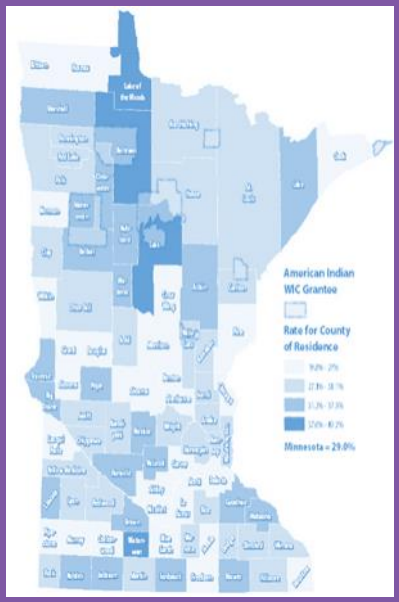
MN	Becker	Beltrami	Cass	Wadena	Hubbard
6%	7%	6%	7%	7%	6%

How Do We Compare?

Health Behaviors: Teen Birth Rate

MN	Becker	Beltrami	Cass	Wadena	Hubbard
16	22	35	40	33	24

SOURCE: University of Wisconsin, 2019



Physical Activity and Eating Habits Our Students

Hubbard County Student Survey Results

	2010	2013	2016
Physically active for at least 30 minutes for at least 5 of the past seven days.	52% Grade 6	37.5% Grade 5	58% Grade 5
At the present time, do you think you are underweight?	7.5% Grade 6	15.0% Grade 5	N/A
At the present time, do you think you are overweight?	17.5% Grade 6	16.5% Grade 5	17% Grade 8
Consumed 5 or more servings of fruit or vegetables. In the previous day,9th Grade	16.5%	N/A	5%

SOURCE: Minnesota Student Survey (2010, 2013, 2016)

8.5% of the Hubbard County 9th graders reported that they had to skip a meal because their family did not have enough money to buy food in the 2016 Minnesota Student Survey.

How Do We Compare?

Health Outcomes: Poor or Fair Health

MN	Becker	Beltrami	Cass	Wadena	Hubbard
2%	14%	16%	15%	14%	13%

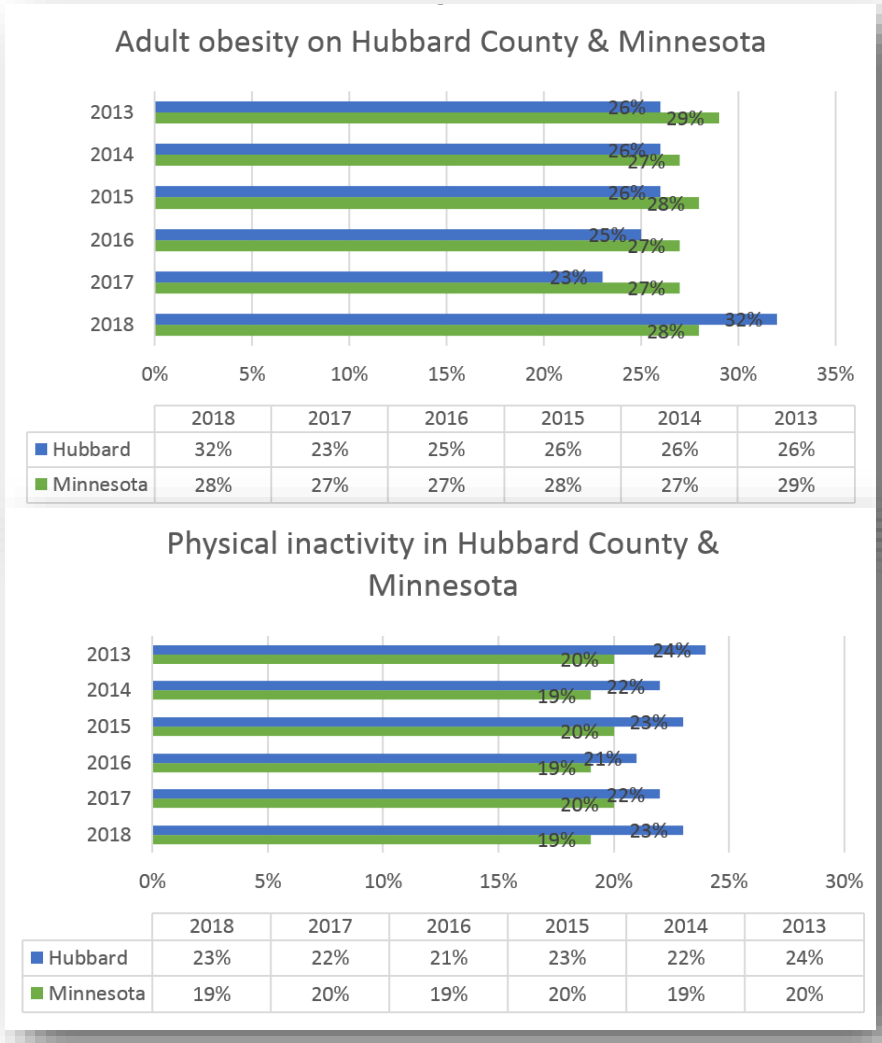
Health Outcomes: Poor Physical Health Days

MN	Becker	Beltrami	Cass	Wadena	Hubbard
3	3	3.7	3.4	3.3	3.1

The 2016 County Rankings defines Poor Physical Health days as the average number of physically unhealthy days reported in the past 30 days (age adjusted) as cited in the Behavioral

SOURCE: University of Wisconsin, 2019

Our Adults



	2018	2017	2016	2015	2014	2013
Hubbard	32%	23%	25%	26%	26%	26%
Minnesota	28%	27%	27%	28%	27%	29%

	2018	2017	2016	2015	2014	2013
Hubbard	23%	22%	21%	23%	22%	24%
Minnesota	19%	20%	19%	20%	19%	20%

And our survey said….

66.1% of the 2017 survey respondents self-reported being overweight or obese.

How Do We Compare?

Health Behaviors: Adult Obesity

MN	Becker	Beltrami	Cass	Wadena	Hubbard
28%	32%	34%	30%	32%	32%

Health Behaviors: Physical Inactivity

MN	Becker	Beltrami	Cass	Wadena	Hubbard
19%	24%	21%	26%	23%	23%

SOURCE: University of Wisconsin, 2019

NEEDS:

Adult Obesity is increasing in Hubbard County

Per our survey, weather is noted as the greatest reason for lack of physical activity, followed by "lack of time"

Alcohol, Tobacco, and Drugs
Our Students

Hubbard County Student Survey

	2013	2016
Engaged in binge drinking (5 or more drinks) on 10 or more occasions the past year, 9th graders	6.0%	3.5%
Use of any tobacco product during the past 30 days, 9th graders (including e-cigs)	17.5%	27.5%
Did not use any alcohol and/or other drug use the past year, 9th graders	59.5%	60%
Has not used any chewing tobacco, snuff , or dip, 9th graders	86.5% past 30 days	88.5% past 30 days
Age of the first drink of alcohol other than a few sips, 9th graders	17.5% at 10 years of age	8% at 10 years of age
Used marijuana during the past 12 months, 9th grade	16.5%	21.5%
Taken other people's prescription drugs during the past 30 days, 9th graders	6%	10%
Take your own or someone else's ADHD (like Ritalin) to get high in the past 12 months, 9th graders	1.5%	3.5%
Used stimulants like diet pills not prescribed by a doctor Or took to get high in the past 12 months, 9th graders	0%	1.5%
Used Oxycontin, Percocet or other pain reliever that were not prescribed by a doctor or took to get high in the past 12 months, 9th graders	0.5%	3.5%

SOURCE: Minnesota Student Survey (2013, 2016)

Our Adults

73% of females report drinking vs. 60% of males
88% of individuals from higher income households (>$75,000) reported drinking compared to 49% of household income of $34,000 or less.

How Do We Compare?

Health Factors: Rankings of Social, & Economic Factors

MN	Becker	Beltrami	Cass	Wadena	Hubbard
N/A	61	85	84	77	76

Health Factors: Adult Smoking

MN	Becker	Beltrami	Cass	Wadena	Hubbard
15%	16%	20%	18%	16%	16%

Health Factors: Excessive Drinking

MN	Becker	Beltrami	Cass	Wadena	Hubbard
23%	23%	23%	20%	19%	20%

SOURCE: University of Wisconsin, 2019

TOP IDENTIFIED NEED FROM THE CLIENT NEED SURVEY AND THE COMMUNITY NEEDS FOCUS GROUP

~

Substance Abuse

TOP NEED IDENTIFIED BY THE CLIENT NEED SURVEY

~

Mental Health
"There are a lot of people who need help here"

Promoting Mental Health Our Students

Hubbard County Student Survey

	2013	2016
Have ever ran away from home during the last 12 months, 9th graders	14.0%	8.5%
Feel your parents care about you "quite a bit" or "very much," 9th graders	81.0%	87.5%
Feel other adults in their community care about them "quite a bit" or "very much", 9th graders	29.0%	30%
Can talk to their father about problems they are having "most or some of the time," 9th graders	32.0% of males 31.0% of Females	74% of males 57% of Females
Can talk to their mother about problems they are having "most or some of the time," 9th graders	67.0% of males 62.0% of Females	79% of males 77% of Females
Felt nervous, worried, or upset during the past 12 months, 9th graders	43.0%	32%
Ever thought about killing themselves, 9th graders	36.0% of females/ 11% of Males	19% of Females 13% of Males
Ever tried to kill themselves, 9th graders	18.0% Females	13% Female 9% Male

How Do We Compare?

Heath Outcomes: Poor Mental Health Days

MN	Becker	Beltrami	Cass	Wadena	Hubbard
3.2	3.0	3.7	3.4	3.3	3.1

Average number of mentally unhealthy days reported in past 30 days (age-adjusted) as reported in the Behavioral Risk Factor Surveillance System.

SOURCE: University of Wisconsin, 2019

Chronic Diseases and Injury

Cancer and Heart Disease have been the leading causes of death in Hubbard County and Minnesota for decades. In 2000, Cancer eclipsed heart disease as the leading cause of death for both Hubbard County and Minnesota.

NEEDS:

Cancer prevention efforts and screenings remain a priority for our residents.

ASSETS:

Heart Disease management is improving the life expectancy of our residents.

How Do We Compare?

Mortality: Premature Death

MN	Becker	Beltrami	Cass	Wadena	Hubbard
5,300	6,400	8,500	10,300	10,800	5,900

Premature Death is determined by the years of potential life lost before age 75 per 100,000 population (age-adjusted).

SOURCE: University of Wisconsin, 2019

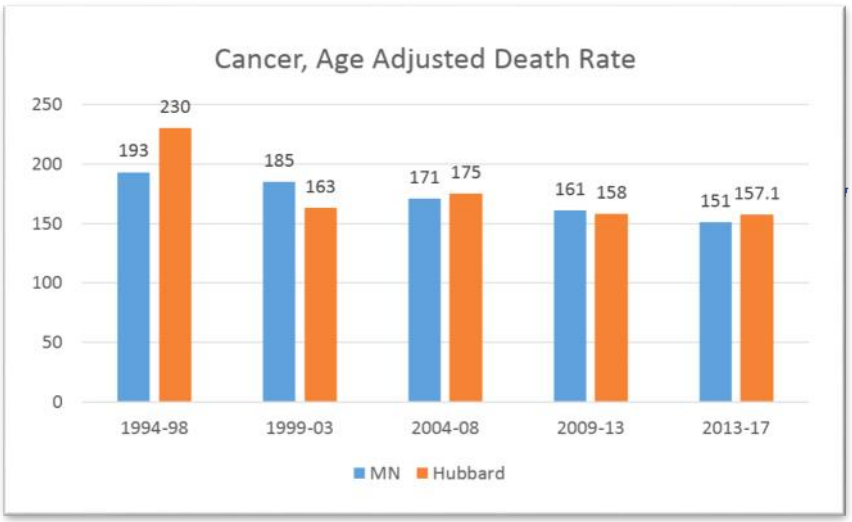
Hubbard County Mortality, 2017

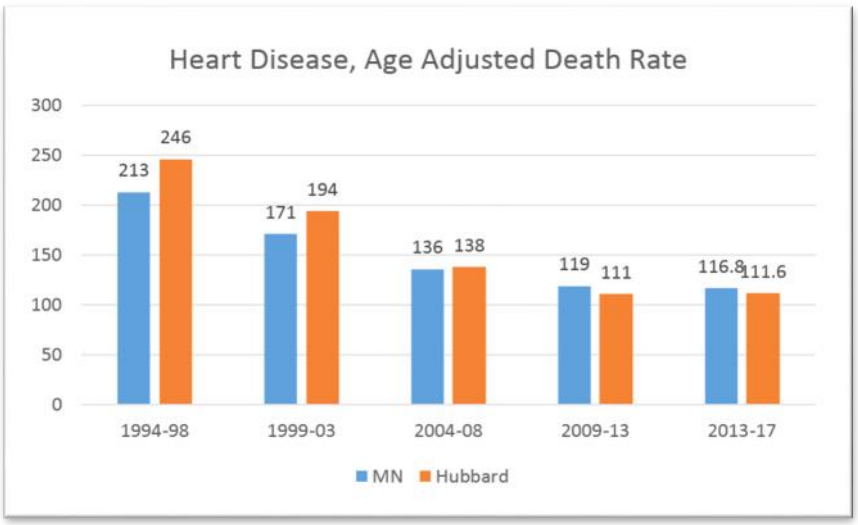
	0-4	5-19	20-34	35-49	50-64	65-79	80+	All Ages
Total Number of Deaths by Age Group	2	1	1	2	28	84	98	216

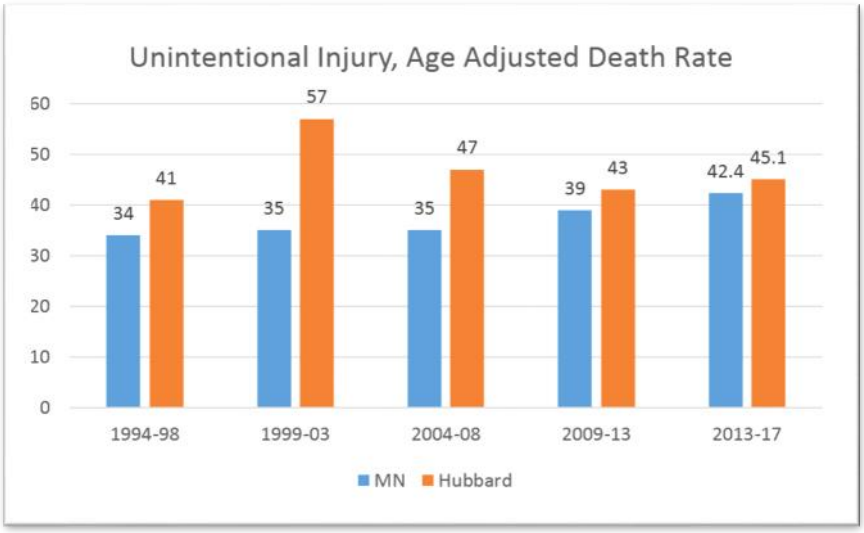
Hubbard County 5 Leading Causes of Death, 2017

- Cancer– 68
- Heart Disease– 36
- Alzheimer's– 18
- Diabetes– 11
- Chronic Lung/Respiratory Disease– 11

In the year 2010, it is estimated that there are 552.5 Years of Potential Life Lost to Hubbard County Residents aged 65, and 1,151Years of Potential Life Lost to Hubbard County Residents aged 75 and older.







NEEDS:

Falls in all age groups are a leading cause of not only death, but also of injury for our residents.

And our survey said…..

In our 2017 Survey , of the 376 respondents, the % of yes were as follows:

- *11.0% had cancer*
- *37% had diabetes*
- *33.6% had high cholesterol*
- *34.4% had high blood pressure*
- *30% had arthritis*

57.5% rated their health as poor, fair, or good.

NEEDS:

There is an increase in the number of tick-related illnesses in Hubbard County. The Hubbard County School Immunization rates have fallen below the Minnesota rates, however have shown declines over the past five years. The number of children age 24-35 months are not up-to-date for the recommended vaccine series.

Number of Cases of Sexually Transmitted Diseases Reported in Hubbard County, 2017

Chlamydia	24
Gonorrhea	7
Syphilis-all stages	0

How Do We Compare?
Health Behaviors: Sexually Transmitted Infections

MN	413
Becker	362
Beltrami	427
Cass	334
Wadena	209
Hubbard	261

SOURCE: University of Wisconsin, 2016

Infectious and Vaccine Preventable Diseases

Number of Cases of other Selected Diseases Reported in Hubbard County, 2017

Campylobacteriosis	5	Giardiasis	0
Lymes Disease	24	Human Anaplasmosis	24
West Nile	0	Salmonellosis	3
Shigellosis	0	Tuberculosis	0

Number of Cases of Vaccine-Preventable Diseases Morbidity in Hubbard County, 2017

Mumps	0	Pertussis	4
Hepatitis A	0	Hepatitis B	0

Childhood Immunizations

In 2018, 64.7 % of Hubbard County children age 24-35 months are up-to-date for the recommended vaccine series, as compared to 67.8% of all Minnesota Children.

Alcohol-Impaired Driving

There were 91 DWI convictions in Hubbard County in 2017. Of those convictions:

39 were 1st time offenders
26 were for a 2nd offense
14 were 3rd offenses
12 were for a 4th offense or more.

12.8 % of the Hubbard County population has an impaired driving offense on record at the end of 2017, including:

6.9% with one incident
2.9% with two incidents
3% with three or more incidents on record.

NEEDS:

Hubbard County had 96 DWI Arrests in 2017, down from 128 in 2016 and 141 in 2015.

ASSETS:

The Hubbard County Safe Roads Coalition focuses on community policies and strategies to decrease impaired driving in Hubbard County. .

Sources: MN Impaired Driving Facts 2017, MN Crash Facts 2017

How Do We Compare?

Health Behaviors: Alcohol Impaired Driving Deaths

MN	Becker	Beltrami	Cass	Wadena	Hubbard
29%	43%	36%	45%	27%	59%

Source: University of Wisconsin, 2019

Alcohol-related Motor Vehicle Fatalities & Injuries in Hubbard County, 2017

Total Fatalities	1
Alcohol Related Fatalities	0
Total Injuries	65
Alcohol-related Injuries	16 (24.6%)
Cost of Alcohol-related Crashes, Fatalities, and Injuries	$665,200

Seatbelt Use by Vehicle Occupant Killed or Injured Northwest Region, 2017

Used a Seatbelt	76.7%
No Seatbelt Used	9.3%
Seatbelt use Unknown	14%
Total Killed or Injured	493

Sources: MN Impaired Driving Facts 2017, MN Crash Facts 2017

Our Community Benefit Committee Members

Ben Koppelman

CHI St. Joseph's Health President/CEO

Jay Ross

CHI St. Joseph's Health Vice President of Finance

John Tormanen

CHI St. Joseph's Health Director of Human Resources

Marlee Morrison

CHI St. Joseph's Health Community Health Director

Sonja Day

CHI St. Joseph's Health Foundation Director and Communication/ Marketing Manager

Ann Hensel

CHI St. Joseph's Health Accounting Manager

Katie Thompson

CHI St. Joseph's Health Patient Financial Services

Luke Preussler

CHI St. Joseph's Health Lead Mission Leader

Tina Thompson

CHI St. Joseph's Health Eligibility & Enrollment Services Supervisor

CHI St. Joseph's Health

Community Health Needs Assessment

Focus Groups

Questions posed to our Community Health Needs Assessment Focus Groups:

1. What are the health needs of our area's most vulnerable populations?

2. What resources are already available in our community to respond to the health needs of the community?

3. What barriers do you think exist that prevent those most in need of health care and education from accessing current services?

Please note that some comments made by respondents within this document may be offensive to the reader. Comments and opinions do not necessarily reflect the opinions or values held by CHI St. Joseph's Health.

2019

Total Focus Group Participants 14

Cory Aukes	Hubbard County Sheriff
Jill Dickinson	Park Rapids Schools Community Education
Amy Morris	CHI St. Joseph's Health Com Health Nurse
Jessica Jensen	CHI St. Joseph's Health Hospice Care
Joe Johnson	CHI St. Joseph's Health The FATHER Project
Alicia Reardon	CHI St. Joseph's Health Weight Mgmt Center
Kim May	Essentia Health Clinic Manager
Chandler Esslinger	Mahube-Otwa Family Health Coordinator
Deb Vizecky	Hubbard Cty Social Services Director
Rosy Hjermstad	Kinship of Park Rapids Executive Director
Michele Thieman, MD	Essentia Health Clinic
Kiah Staloch	A Better Connection
Joanna Wallenberg	Stellher Human Services/Park Rapids Schools
John Tormanen	CHI St. Joseph's Health HR/Mission

Greatest Needs

Prioritized by participants in order of importance

1. **Community/Recreation Center**
   Promote an active lifestyle for all ages. Community space for families and children, space for exercise and community activities/classes.
2. **Lack of Parenting/Life/Home Skills**
   Basic life skills such as cooking, housekeeping etc., are not taught at school, and some families are not teaching these skills at home. Parenting education in the home and life skills in schools would be beneficial.
3. **ACES**
   Recognizing Adverse Childhood Experiences and their long term effects and how being trauma-informed can improve the community.
4. **Substance Abuse /Addiction**
   Prevalent throughout the community, youth and adults.
5. **Obesity**
   Barriers to physical activity and nutrition education and knowledge.
6. **Transportation**
   Ongoing issue that drastically affects low income populations and their ability to work and obtain needed services.
7. **Mental Health**
   Affects all ages and economic groups. Lack of providers or knowledge of resources.
8. **Dental Access**
   Limited availability for those on medical assistance.
9. **Family Planning**
   Lack of education and services for reproductive life planning.
10. **Housing**
    Housing is limited. Safe and affordable housing is a big need.
11. **Collaboration of Community Resources /Awareness of Community Resources**
    Lack of awareness of community resources available, both among the population and even among providers.

Greatest Needs...Continued

Prioritized by participants in order of importance

12. Other needs identified but not given priority:

Livable Wage

Education

Stigma of asking for help/awareness that help is needed

Finances

Access to child care

Trust in providers and the system

Targeted services for an increasingly diverse population

LGBT awareness for services

Disabilities

Meeting people where they are at

Discipline

Social-Emotional Learning

Resources & Assets

- Greater number of mental health care providers
- Greater number of health care providers
- Action Park Rapids
- Living At Home—Dementia Friendly Community Initiative
- ACES training and awareness
- Social Services and Mahube: help with housing, Habitat for Humanity
- 8th Hour mentoring
- FATHER Project—parenting and relationship training
- Family home visiting
- Hubbard In Prevention
- After school programs
- Kinship

Barriers

- All providers don't collaborate to educate each other on all the services that are offered and available
- Lack of Community Center to congregate; low/mid/high income opportunity; will draw professions of all types; help overcome loneliness along with helping create healthy communities
- Transportation – cost and availability
- Technology
- Mental Health
- Substance Abuse
- ACES
- Lack of Parenting/Life/Home Skills

CHI St. Joseph's Health

Community Health Needs Assessment

Survey Results

2019

General Health

Poor	Fair	Good	Very Good	Excellent
3.7%	10.5%	43.3%	30.5%	12%

High Blood Pressure

No	Yes	Pregnancy
63.3%	35%	1.7%

Diabetes

No	Yes	Pregnancy
85.7%	13.8%	0.5%

Overweight

No	Yes
62.1%	37.9%

Cancer

No	Yes
88.1%	11.9%

Chronic Lung Disease

No	Yes
91.6%	8.4%

Heart Trouble or Angina

No	Yes
86.6%	8.4%

Stroke or Stroke-Related Heart Problems

No	Yes
93.9%	6.1%

High Cholesterol or Triglycerides

No	Yes
64.7%	35.4%

Arthritis

No	Yes
68.8%	31.2%

Depression

No	Yes
73.5%	26.5%

Anxiety or Panic Attacks

No	Yes
80.3%	19.7%

Other Mental Health

No	Yes
93.3%	6.7%

Obesity

No	Yes
83.4%	16.6%

Asthma

No	Yes
90.8%	9.2%

Last Check-Up

Within the last year	74%
Within the past 2 years	14.7%
Within the past 5 years	5.1%
5 or more years	5.7%
Never	0.4%

Medical Care Delay

Yes	No
19.6%	80.4%

Reasons for Delay

Could not get appointment	2.3%	Not Covered by insurance	4.5%
Not serious enough	5.2%	Deductible too expensive	7.4%
Transportation problems	1.5%	Other	0.9%
Cost	12.7%		
No insurance	4.5%		

General Mental Health

Poor	1.3%
Fair	8.5%
Good	30.4%
Very Good	35.2%
Excellent	24.6%

Feelings of Mental Distress

Yes	No
17.5%	82.5%

Mental Health Care Delay

Yes	No
18%	82%

Reasons for Delay

Could not get appointment	1%	No insurance	4.4%
Not serious enough	14.7%	Not Covered by insurance	4.4%
Too nervous or afraid	7.8%	Did not know where to go	6.6%
Transportation problems	1%	Deductible too expensive	3.6%
Cost	12.4%	Other	3.6%

Insurance Thru Work

No	Yes
47.9%	52.1%

Insurance Self Purchased

No	Yes
69.8%	30.2%

Indian or Tribal Health

No	Yes
98.2%	1.8%

Medicare

No	Yes
63.6%	36.4%

Medicaid or MA

No	Yes
87.1%	12.9%

MnCare

No	Yes
94.6%	5.4%

MN Sure

No	Yes
92.6%	7.4%

CHAMPUS

No	Yes
92.2%	7.8%

No Insurance

No	Yes
93.6%	6.4%

Calculated Variable: Current Insurance Status

Currently uninsured	Currently Insured
6.4%	93.6%

Fruit Servings Yesterday

0 servings	24.5%
1-2 servings	61%
3-4 servings	12.5%
5 or more servings	2.0%

Vegetables Servings Yesterday

0 servings	13.8%
1-2 servings	61.6%
3-4 servings	21.1%
5 or more servings	3.5%

Calculated Variable: Number of Fruits & Vegetables Yesterday

0 servings	4.4%
1-2 servings	27.3%
3-4 servings	29%
5-9 servings	39.3%
10 or more servings	6.9%

Supermarket or large grocery store

Never/less than once per month	3.7%
Once per month	8.6%
2-3 times per month	31.3%
Once per week	36.2%
2 + times per week	20.2%

Small or Local Grocery Store

Never/less than once per month	26.3%
Once per month	12.9%
2-3 times per month	34.6%
Once per week	18.1%
2 + times per week	8.1%

Food Shelf or Pantry

Never/less than once per month	92.2%
Once per month	3.7%
2-3 times per month	4.1%

Some Other Place

Never/less than once per month	80%
Once per month	9.9%
2-3 times per month	5.9%
Once per week	3.9%
2 + times per week	0.4%

How Far To Get Groceries

Less than 2 miles	20.5%
2-5 miles	17.2%
6-10 miles	20.5%
11-20 miles	27.7%
21-30 miles	7.6%
Over 30 miles	6.5%

Past Month Participate In Any Physical Activities or Exercise

Yes 70% No 30%

Moderate Exercise Per Week

0 Days /Week	1-4 Days/Week	5+ Days/Week
14.8%	64%	21.2%

Vigorous Exercise per week

0 Days /Week	1-4 Days/Week	5+ Days/Week

Calculated Variable: Smoking Status

Current smoker 12.2% Former smoker 34.2% Never smoked 55.3%

Past 12 Months Stopped Smoking 1+ Days Trying To Quit

Yes	No
46.1%	53.9%

Smokeless Status

Non-user 96% Current User 4%

E-Cigarette Status

Non-user	Current User
99.2%	0.8%

Any Alcohol Drinking In Past 30 Days

No Drinking	Any Drinking
66.1%	33.9%

Have any of the below had harmful effects on you/family member

Alcohol	Yes- 24.7%	No– 75.3%
Tobacco	Yes- 24.2%	No– 75.8%
Marijuana	Yes- 5.5%	No– 94.5%
Drugs	Yes- 6.7%	No– 93.3%

Calculated Variable: Weight Status According to BMI

Not Overweight	33.9%
Overweight by not obese	32.2%
Obese	32.9%

Access To Vehicle

Yes	No
94.6%	5.4%

Afford Gas For Car

Never 0.5%	Seldom 0.6%	Sometimes 12.7%	Always 86.1%

CHI St. Joseph's Health

Community Health Needs Assessment

Client Needs Survey

Community Health surveyed 91 participants from WIC, the FATHER Project, Family Home Visiting, Foot Care, and the Dental Clinic.

Clients were asked to choose from a list of previously identified Community Health Needs, those that are most pressing at this time. Clients added to the list if needed, and provided comments.

Please note that some comments made by respondents within this document may be offensive to the reader. Comments and opinions do not necessarily reflect the opinions or values held by CHI St. Joseph's Health.

2019

Community Health Needs Assessment Survey

Please select the top 5 issues from the list below that you feel are the greatest needs for our community, and add any comments you may have:

	Issue	Comments
	Mental Health	
	Transportation	
	Substance Abuse	
	Youth/Community Center needed	
	Knowledge of Support Services	
	Ability to make a living	
	Ambulance transport	
	Limited Support Network	
	Cost of Health Care	
	Discipline/bullying	
	Obesity	

Other Comments or issues (use back if necessary)

Thank you!

Greatest Needs

Ranked by Client Survey results

1. **Mental Health**
   - "Difficult to get help for someone who really needs it"
   - "I think there are a lot of options out there. It's just that those in need don't reach out for help"
   - "We need good access to mental health care"
   - "For men, there is not enough immediate support"
   - "There are a lot of people who need help here"
2. **Substance Abuse/Addiction**
   - "Needs to be taken care of"
   - "Very huge problem"
   - "Quite obvious"
   - "People need to understand what it does to people"
3. **Youth/Community Center**
   - "Our Community would benefit greatly from a community center, give kids something to do to keep them out of trouble"
   - "For sure a community for kids, possibly a pool"
   - "We need one, too many kids are doing drugs"
   - "The kids need a safe place to go, especially in these cold winter months"
   - " This would be good for kids, and for adults to come with their kids"
4. **Discipline/Bullying**
   - "Parenting classes"
   - "Community Center would help with this"
   - "Needs to be handled differently"
   - "My husband and I are youth pastors in town. We have had four kids contemplate or attempt suicide since September"
5. **Ability to Make Living/Cost of Health Care (tie)**
   - "Business opportunities in the community, promote education to earn a better living"
   - "Many people can't afford it (health care)"
   - "People are very racist in this town"

Greatest Needs

Ranked by Client Survey results

6. Knowledge of Support Services

"Being married to someone in a support service, even I don't know as much as her"

7. Transportation

"We could use more"

8. Limited Support Network

"All I know of is the Fatherhood Project. Besides that, there's not much else for dads"

9. Obesity

"Help the community to realize how unhealthy the 'norm' for peoples eating habits are"

"A huge issue"

"It costs and arm and a leg to get thin"

10. Ambulance Transport

"Too expensive"

Others issues listed:

"The courts letting people off with a slap on the hand!"

"We as a community need to also help those coming out of jail and help them get a job. Some places will not hire people with things on their background even though they could be a great person"

"We need to have more affordable housing for those that are homeless and in need"

"More housing available for low income seniors and families"

CHI St. Joseph's Health

Community Health Needs Assessment

Evaluation of Impact

2016

Evaluation of Impact

CHI St. Joseph's Health
Experience better health.

2016 CHNA Implementation Strategies

Indicators	Improving	Staying the Same	Needs Improvement
I. Mental Health and Violence			
Violent Crime Rate			
Mental Health Issues – Qualitative Data			
Bullying in the Schools – 9th Graders			
II. Community Wellness			
Obesity			
Physical Activity			
Tobacco Use by 9th Graders			
Tobacco Use by Adults			
Health Outcomes – Mortality and Morbidity			
III. Substance and Chemical Dependency			
Alcohol-Impaired Driving Deaths			
Alcohol Use by Hubbard County Students as reported by MN Student Survey			
Substance Abuse-Qualitative Data			
IV. Economic Factors to Influence Wellness			
Children in Poverty			
Unemployment Rate			
Uninsured			
V. Specialized Health Services			
Dental Clinic Services			
Orthopedic Services			

CHI St. Joseph's Health

EVALUATION OF IMPACT

Worksite Wellness: Increasing Opportunities for Good Health

Obesity and physical inactivity were identified by the focus group as areas of need for Hubbard County. The State Health Improvement Partnership (SHIP) grant funds were used for a Worksite Wellness Collaborative in Hubbard County in 2016-2017.

Program Goals

The Worksite Wellness Collaborative under SHIP works to create healthy environments where people live, work, play and learn. When the healthy choice becomes the easy choice, people are less likely to have health issues that relate to chronic disease. Each business chose a strategy, including healthy snack coolers, time for employees to get up and move/be active, providing breastfeeding support, and encouraging tobacco cessation.

How many were served?

Eight organizations including ten partner sites participated in the collaborative: CHI St. Joseph's, Northwoods Bank, Nevis School, Itasca-Mantrap Rural Electric, Dogs Paw Grooming and Kennel, Heritage Living Center, and Cornerstone Nursing and Rehab.

Participant Comments:

"This has been a team building experience"

"The SHIP tools have been helpful"

"I would recommend this to other businesses to participate in a collaborative"

The Wellness committee at Itasca Mantrap Rural Electric Coop

Highlighted Strategies:

- Community Wellness
- Mental Health and Violence.
- Economic Factors to Influence Wellness
- Substance and Chemical Dependency

Graduate of the Evidence Based Home Visiting Program

Evidence Based Home Visiting

St. Joseph's Community Health has partnered with the North Country Community Health Board as well as Beltrami CHB, Quin CHB, and the Leech Lake Band of Ojibwe in a large partnership providing Evidence Based Family Home Visiting.

Utilizing the Healthy Families America (HFA) and Family Spirit Models, enrolled families are assigned a nurse or home visitor who works with them intensely from the prenatal period through age 3. Curriculum and activities are outlined for the families.

Improved Outcomes

The Evidence Based Home Visiting (EBHV) grant through the Minnesota Department of Health specifies .home visiting models that have proven outcomes with families. Our home visitors form close relationships with the families as they learn about parenting and child development.

Why home visiting matters:

A referral was received and a postpartum visit was made. The family and 3 week old baby were enrolled in the HFA program. Because mom's parental rights had been terminated with her other children, a CPS investigation was initiated, and Baby was removed from the home. The Public Health Nurse (PHN) continued to visit weekly during supervised visits, offering support and parenting tools to mom. In a few months, the CPS case was closed. Mom was able to retain full custody. The family was reunited! Fast forward 3 years and 77 visits! This little baby is now a preschooler and has graduated from our HFA program. He attends daycare 3 days/week, and is meeting developmental milestones. He loves to read books and interact with others, especially during home visits. Mom states, "we are so excited when the PHN comes." Mom works part time, and shares that since enrolling in Family Home Visiting, she is better able to cope with problems/stress and has an improved understanding of child development and parenting.

Adverse Childhood Experiences

Mental Health and Violence were two unmet needs from our 2016 CHNA. Adverse Childhood Experiences (ACE's) have been shown to have a powerful impact on health and behavioral and social problems, including poor mental health and chronic disease. There is an increasing understanding about resilience and what we can do to protect children and to support adults with ACE's.

CHI St. Josephs has been part of a community-wide initiative to make Park Rapids and the surrounding area Trauma-Informed. .

In 2019 we helped host the first annual ACES Summit at the Park Rapids High School with National and State experts in ACES. The work of this group will continue.

ACES Committee at the 2019 ACES Summit with Speakers Jim Sporleder, Shaun Floerke, Heather Bell, and Jerry and Wendell Waukau

FATHER Project Graduates

The FATHER Project

The FATHER Project began in 2011, as a program designed to help low-income, noncustodial fathers learn healthy parenting skills and behaviors, as well as overcome barriers that have prevented them from providing emotional and financial support for their children.

The FATHER Project has grown over the last three years, with groups in now in Park Rapids, Detroit Lakes, and Walker. The FATHER Project contributes to the ACES initiative in Park Rapids, as well as countless other community endeavors

Helping Fathers Be Great Dads

Through the development of their individual fatherhood goals, the FATHER Project Case Manager provides consultation on issues facing fathers and support for effective parenting. Along with emotional support, fathers are connected with needed services to help fathers understand and improve their situation.

An Employment Readiness Coordinator provides employment readiness training. The number of fathers served grows daily, and with that their entire families are strengthened. Under our current grant starting in October of 2017, we have served XX fathers. Since inception, we have served XX fathers and families.

A Worthwhile Cause!

The FATHER Project has received support from local businesses, churches, and community members, as well as grants from state and community agencies.

Our FATHER Project Coordinator has testified in front of the state legislature on behalf of fathers and this programming. Our program is known throughout the state as an

Hubbard In Prevention

Hubbard in Prevention (HIP) was started in 2011 by a grant to focus on prevention and changing the environment on underage drinking.

The work of the HIP Coalition is showing results. The rate of alcohol use among 9th graders in Hubbard County has decreased from 38% in 2004 to 23% in 2016, per the most recent Minnesota Student Survey

We are currently in year 3 of the 5 year Drug Free Communities Grant, and the HIP Coalition continues it's work in the schools and the community.

While numbers show improvement, substance abuse and addiction remain a high community need. Alcohol and drug dependency prevention remains a priority for the members of HIP.

Hubbard In Prevention (HIP)