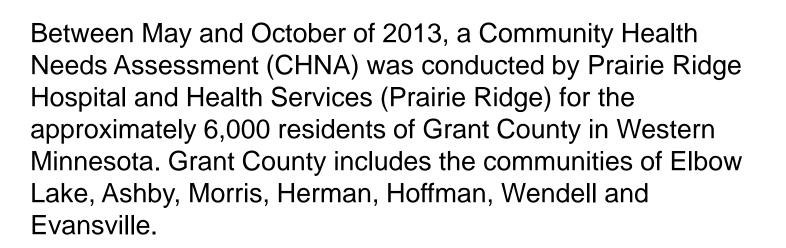
Prairie Ridge Hospital and Health Services

Community Health Needs Assessment - 2013



CPAs & BUSINESS ADVISORS





Prairie Ridge operates a 20 bed hospital and clinic in Elbow Lake and has additional clinic locations in Morris, Ashby, Evansville and Hoffman. Prairie Ridge provides primary care services, outpatient surgical services, lab, x-ray, and mobile and out-reach services to the community. In addition, they operate a wellness center and emergency room. CHNA





The assessment process was initiated and led by Prairie Ridge in collaboration with Eide Bailly LLP an accounting and consulting firm specializing in consulting with healthcare organizations.

To ensure input from persons with broad knowledge of the community, a community advisory committee was convened of individuals representing various communities in the service area and representing people with different interests. Representatives from local health care providers and the county public health department were included to bring in additional professional perspective. Populations with special health needs such as elderly, uninsured and unemployed were represented by individuals who provide services to these populations.





Community Advisory Committee Participants		
Individual	Position	
Missy Wetterling	Director of Marketing, Prairie Ridge	
Sandy Alvstad	Board member, Prairie Ridge	
Sandy Tubbs	Director, Horizon Public Health	
Debbie Eiler	Licensed Social Worker, Hoffman Good Samaritan Center	
Mary Scherr	Branch Manager, Knute Nelson Home Care	
Deb Hengel	Facilitator, Grant County Child and Youth Council	
Angela Paulson	Counselor, West Central Area Schools	
Keith Swanson	Commissioner, Grant County	
Stacy Hennen	Social Services Director, Grant County	
Harold Nelson	Dean of Students, West Central Area Schools	





An initial meeting with the Community Advisory Committee on June 13 began with a discussion of the role of the Community Advisory Committee and a review of the applicable Internal Revenue Service requirements for non-profit hospitals. These rules require input from the community in identifying and prioritizing the health needs of the community and an implementation strategy for addressing the needs identified.

The first issue addressed by the Community Advisory Committee was the applicable service area to be considered in determining the community served.





Prairie Ridge personnel presented information on the community origin of its patients based on admissions from the past year. More than 84% of its patients reside in the communities within Grant County surrounding and including Elbow Lake. Based on this, the community was defined as Grant County.

City	Counts	% of Total
Elbow Lake	19,487	51.6%
Barrett	4,503	11.9%
Ashby	2,342	6.2%
Evansville	2,054	5.4%
Hoffman	1,892	5.0%
Wendell	1,458	3.9%
	31,736	84.0%
Remaining Volume	6,045	16.0%
Total	37,781	100.0%





The Committee then reviewed demographic and health information for the community based on information from the *Health of Horizon Report* prepared by the Horizon Community Health Board and additional information from county, state and national sources.





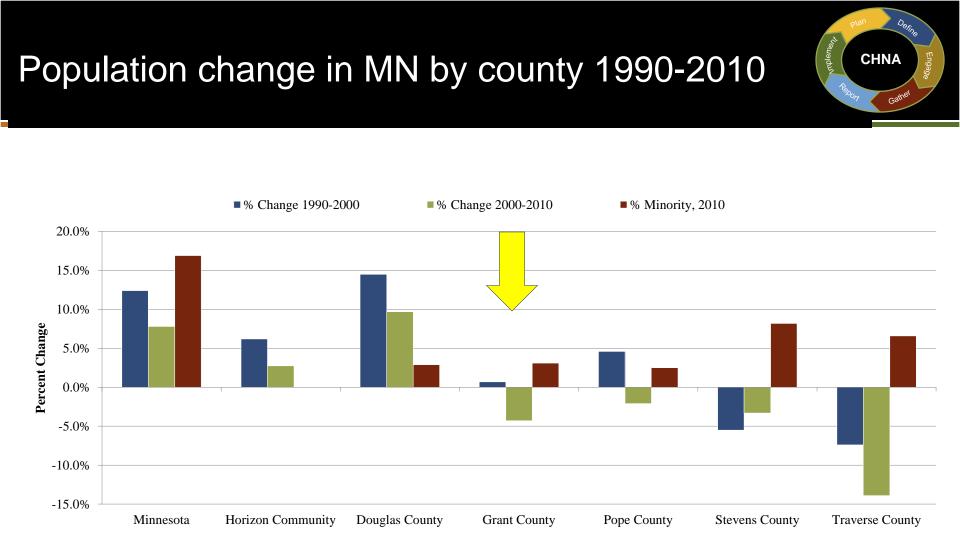
Grant County is a predominantly rural area in Northwestern Minnesota. The 2000 census showed a population of 6,289 and an average population density of 12 residents per square mile. The estimated population as of 2012 was just under 6,000. As of 2012, 23% of the population in Grant County was people aged 65 and over. This number is anticipated to increase to over 32% by 2035.

The 2011 median household income in the service area is \$43,711. The median household income in the State of Minnesota is \$58,906 and the United States \$51,371 based on May 2013data. 12.4% of the population is below the poverty level as compared to 11% in the state of Minnesota.





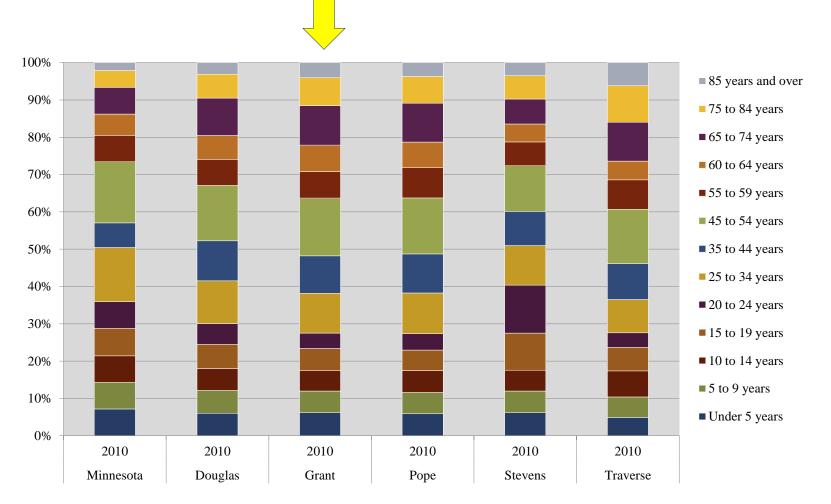
The unemployment rate for Grant County for May of 2013 was 5.5%. This rate compares to the state of Minnesota at 5.3% and the United States at 7.6%. The majority of workers (72%) in Grant County work in private industry. Primary industries include education, health and social services; agriculture; retail and construction.



The Health of Horizon-A Presentation to the Horizon Community Health Board—May 3, 2012 Source: Minnesota Department of Administration. Geographic and Demographic Analysis Division

www.eidebailly.com

Population Distribution 2010



The Health of Horizon-A Presentation to the Horizon Community Health Board—May 3, 2012 Source: Minnesota Department of Health

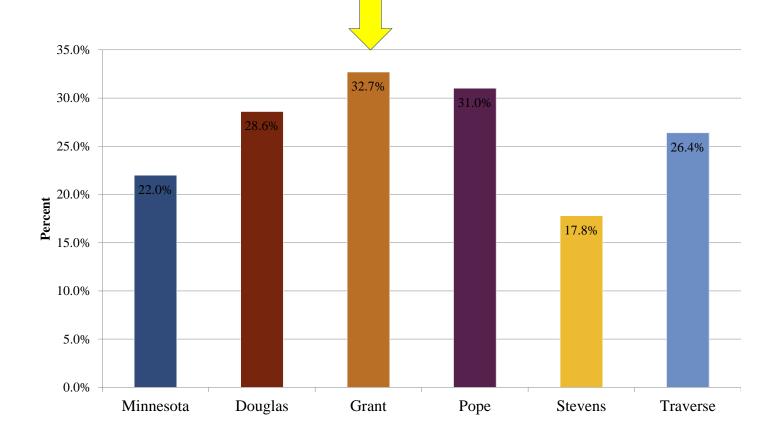
www.eidebailly.com

Define

CHNA

Gathe

Projected Population Age 65 and Over by 2035



Define

CHNA

Gathe

The Health of Horizon-A Presentation to the Horizon Community Health Board—May 3, 2012 Source: Minnesota Department of Health

www.eidebailly.com





Next the Committee reviewed information from the Health of Horizon report which was prepared by the Horizon Community Health Board. This report included data on five local counties (Douglas, Grant, Pope, Stevens and Traverse) in addition to state of Minnesota data. The report provides an array of indicators and information about the conditions and factors affecting health, as well as indicators of health status. The report was modeled after the Minnesota Statewide Health Assessment Report developed by the Minnesota Department of Health. Both physical, social and behavioral factors for health and health outcomes related to disease and injury were assessed.





The Community Advisory Committee discussed the health factors and outcomes for Grant County identified in the Health of Horizon Report to determine if the information was consistent with their understanding of the needs of the community. The health trends were categorized into three categories:

- Community advantages
- Community on par
- Community needs



Community Advantages



The service area ranks above peers in the following which are indicative of positive health outcomes or are positive health factors:

- Heart Disease mortality
- Stroke mortality
- HIV and Aids
- STDs
- Foodborne and Waterborne diseases
- Unintentional deaths
- Suicides
- Teen birth rates

- Children eating fruits and vegetables
- Smoking and tobacco use

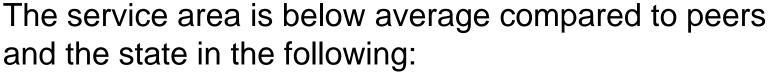




The service area is on par with the peers and the state in the following which are indicative of positive health outcomes or are positive health factors:

- Motor Vehicle fatalities
- Weapons on school property
- Cancer mortality
- Students feeling unsafe at school
- Uninsured population





- Obesity
 - 9th Grade
 - 13th Grade
 - Age 2-5 (receiving WIC)
 - Women (receiving WIC)
- Tick-borne diseases
- Fighting at school
- Physical Inactivity
- Unemployment rate

- Households earning less than \$50,000
- People living in Poverty
- Number of healthcare providers and dentists
- Children immunizations
- Age 65+ immunizations
- Teenage mental health



Community Needs





The discussion of the health trends led to the development of a survey tool to gather additional information on the community health needs, as perceived by others not already participating in the Community Advisory Committee.

The survey was distributed to others in the community by the Advisory Committee, through the hospital and through various community groups. The survey results were analyzed by Eide Bailly LLP. 37 surveys were returned. Due to the number of surveys returned, there is a potential information gap in the results of the survey as it does not represent a statistically significant portion of the population. However, the information provided did provide insight from the broader community.





The results of the survey were communicated to the Community Advisory Committee at its second meeting on August 26th.

Based on the health needs identified in the review of Horizon Report, Community Advisory Committee feedback and survey results, a list of 16 potential community needs was developed. There were no primary and chronic disease or other specific health needs specifically identified related to low income or chronically ill populations.

Summary Health Issues and Need.

CHNA

- 1. Elderly health and other issues
- 2. Mental health
- 3. Cancer Services
- 4. Substance abuse
- 5. Access to specialists
- 6. Obesity/physical inactivity
- 7. Diabetes
- 8. Cost of healthcare
- 9. Transportation options



- 10. Improvements to facility and equipment
- 11. Home health services
- 12. Access to physicians
- 13. Women's health issues
- 14. Overall care coordination and access
- 15. Suicide
- 16. Assisted living



The Community Advisory Committee members agreed on a set of criteria to use to evaluate the list of potential needs identified through the fact finding process. The criteria included:

- a. Potential to Impact Community Health
- b. Cost to the Community
- c. Community Urgency

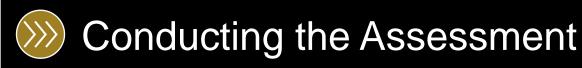
The Community Advisory Committee discussed each of the 16 identified health issues in terms of whether it truly was an issue, the potential health improvement impact, cost and urgency. Committee members then individually identified five of the issues they felt had the highest community priority. Once each member identified their priorities, a group discussion occurred which allowed for exchange of ideas and formation of priorities.





The prioritization process resulted in a number of the needs being summarized within broader topics. The following were the priority issues for the community, presented in rank order:

- 1. Preventative Care including such things as obesity, physical inactivity and diabetes
- Access to Care including increased specialty services, physician services and women's health and overall care coordination
- 3. Elderly Health Services including assisted living and home health
- 4. Mental Health Services
- 5. Transportation





During the discussion on health needs, the Committee identified other resources in the community that may be available to work in collaboration with Prairie Ridge to address the needs identified including:

- Schools
- Churches
- Nursing homes
- County Health Department
- Rainbow Rider
- Other hospitals
- VA



Next Steps

Prairie Ridge is required to adopt an organization specific implementation strategy in response to the Community Health Needs Assessment report. In the coming months, this implementation strategy will be discussed and approved by the Board of Directors of Prairie Ridge, and will be reviewed on an annual basis. The CHNA process and public report will be repeated every three years, as required by federal regulations.

CHNA





Community Contact Information for CHNA

Community members who would like to provide input on the next CHNA process, would like to comments on the needs identified or would like to review detailed community health statistics and data gathered and reviewed by the committee, are encouraged to contact Prairie Ridge with their inquiries, suggestions or comments.

Missy Wetterling Director of Marketing and Public Relations Prairie Ridge Hospital and Health Services Elbow Lake, MN 218-685-6768