

RiverView Health

Community Health Needs Assessment

2022



Introduction

RiverView Health is a non-profit rural healthcare system based in Crookston, Minnesota, that offers a comprehensive continuum of services that include primary care, home care, and long-term care services.

RiverView Health is a local healthcare system dedicated to serving the needs of our region. Since 1898, we've been committed to providing the best quality healthcare for our patients. Our commitment to serving the Red River Valley is long-established and we are constantly investing time, energy, and resources to provide the best possible healthcare for our region. We are dedicated to reaching out to the community, and to putting our resources into local groups and organizations that help to make a difference in the health and quality of life in our area. Working together as a team, RiverView Health takes a leadership role in improving the health of the communities we serve.

Our mission – We deliver a healthcare experience that consistently exceeds patients' expectations through:

Exceptional People – Our people are our foundation. We employ trusted, dedicated professionals who serve with compassion, empathy, and respect.

Exceptional Care – Our patients are our focus. We build relationships to deliver personalized care.

Exceptional Outcomes – Our passion is to enhance lives. We engage in best practices to heal people and promote healthy communities.

Our vision – RiverView Health provides world-class healthcare through a culture of excellence.

RiverView Health provides a continuum of services – medical clinics, surgery, outpatient care, inpatient hospital care, rehabilitation services, a skilled nursing facility, and home care. RiverView Hospital is a 25-bed acute care hospital. Our services include:

- Chemical Dependency Treatment
- Dermatology
- Diagnostic Imaging
- Direct Laboratory Access
- Emergency Department
- Home Care
- Memory Care
- Obstetrics
- Orthopaedics
- Rehabilitation
 - Cardiopulmonary Rehab
 - Occupational Therapy
 - Physical Therapy
 - Respiratory Therapy
 - Speech Therapy
- Sleep Center
- Sports Physicals
- Surgical Services
- Telehealth

In addition to the hospital, RiverView Health includes:

- RiverView Home Care
- RiverView Clinic – Crookston
- RiverView Clinic – East Grand Forks
- RiverView Clinic – Fertile
- RiverView Clinic – Red Lake Falls
- RiverView Clinic – Thief River Falls
- RiverView Rehab Services – Fertile

RiverView Health’s commitment to delivering excellence has been recognized by numerous organizations. RiverView Health has received the Joint Commission’s Gold Seal of Approval. The laboratory on RiverView’s main campus has also been accredited by the College of American Pathologists with the gold standard stamp of quality for laboratories.



RiverView Health is pleased to submit this Community Health Needs Assessment Report. We do so both as a matter of compliance with Section 501(r)(3) of the Internal Revenue Code, as mandated in the Patient Protection and Affordable Care Act, and as an obligation to those we serve. As an organization, we have taken this change in law as an opportunity to improve our community service and continuously focus on meeting the changing health care needs of our community.

Consistent with the requirements of Section 501(r)(3), our Community Health Needs Assessment Report is organized as follows:

- Review of Previous Community Health Needs Assessments
- Our Community
- Community Health Needs Assessment Methodology
- Prioritized Community Health Needs
- Health Resources

Review of Previous Community Health Needs Assessments

RiverView Health conducted community health needs assessments in 2013, 2016 and 2019 and published the related reports in September of 2013, 2016, and 2019, respectively. In those assessments, the following significant community health needs were identified:

- Obesity, including joint/back pain and high blood pressure
- Substance abuse and mental health

Between October 2019 and September 2022, RiverView Health took the following actions to address the previously identified community health needs:

Obesity

RiverView Health continues to employ a Licensed Registered Dietician (LRD) that focuses on the healthy eating habits of the patients in our community. This position served in a capacity for 1:1 care plan development and group education as well as community presentations relating to healthy intake and weight/metabolic control. Frequency of referrals from providers for 1:1 counseling with the Registered Dietician has more than doubled in the past three years. As an integral part of the team the dietician works with providers and health coaches to manage the health of patients. RiverView has worked toward improving patients that struggle with eating habits and weight control. This improvement is specifically measured through a goal that states: RiverView will improve overall control of adult diabetic patient blood sugar levels to at least 80% of patients having a HgbA1C measurement of less than 8%. RiverView has met the goal in each year since inception.

In addition to employing a registered dietician RiverView sponsors community events to improve the health and well-being of our community. The following list includes examples:

- The Power of Produce: For the past three years RiverView has sponsored the Power of Produce to provide free whole fruits and vegetables to kids and senior citizens at the local Farmers Market.
- RiverView 2k Walk and Roll: An event focused on promoting and encouraging activity and movement
- Diabetes Support Group: Peer group that supports and promotes healthy activities and habits.
- Health Habits Cooking Videos: example - <https://youtu.be/UnD3qJQZzfs>
- Medical Minute Videos: example - <https://youtu.be/5r-Er6KcRzA>

Substance Abuse

RiverView continues to offer substance abuse treatment. To increase access to treatment, RiverView Recovery Center started offering electronic options for services. With the use of a smart phone or tablet clients can connect with counselors for a variety of assessment and treatment options. This strategy has decreased the amount of no shows for treatment appointments and allows the client flexibility for treatment. Treatments include:

- Comprehensive Health Assessments: A comprehensive chemical health assessment.
- Individual Counseling Sessions: Provided for individuals that have completed treatment and are struggling with thoughts of using.
- Intensive Outpatient Treatment: Intensive outpatient therapy includes three group counseling meetings per week. One weekly individual counseling session and regular urine drug and alcohol screening for individuals struggling with addiction that do not meet the criteria for residential treatment.
- Relapse Prevention: Relapse prevention includes one individual counseling session per week as well as regular urine drug and alcohol screening tests for individuals that have completed treatment, inpatient or intensive outpatient, in the last three years and are struggling with addiction. Relapse prevention is intended for individuals that are not using daily but want to stop the cycle.

- Driving with Care 1: For the first time DWI offender with a blood alcohol level of less than .15 at the time of arrest. Driving with Care 1 is a group education and training program that has proven to reduce the recurrence of DWI. New classes begin quarterly.
- Driving with Care 2: For the first time DWI offender with a blood-alcohol level of more than .15 at the time of arrest, or multiple DWI offenses. Driving with Care 2 is a group education and training program that has proven to reduce the recurrence of DWI. New classes begin quarterly.

Mental Health

RiverView continues to partner with Alluma to ensure the community has adequate access to mental health services. Some of the collaborations with Alluma include:

- Suicide prevention – RiverView Health focuses on suicide prevention, mental health, and mental wellness. RiverView Health has a suicide prevention steering committee utilizing the Zero Suicide Initiative. RiverView partners with the Minnesota Department of Health and Alluma with the Zero Suicide Initiative action plan.
- Crisis Team – Alluma has a Crisis Response Team that will respond to our Emergency Department if a need arises. The Crisis Response Team allows for greater care coordination and ensures the patients have access to the services they need.

Our Community

RiverView Health is in Crookston, Polk County, Minnesota. We have historically defined our “community” as a much broader regional service area that includes portions of Polk and Red Lake Counties.

To more accurately identify the individuals who access RiverView Health for medical care, we analyzed our inpatient and outpatient volume by zip code for calendar year 2021. Based on that analysis, we define our community as individuals who reside in the following zip codes:

- | | | |
|---------|---------|---------|
| • 56517 | • 56556 | • 56723 |
| • 56523 | • 56716 | • 56736 |
| • 56535 | • 56721 | • 56750 |
| • 56540 | • 56722 | |

This area, covering the southeastern area of Polk County and the eastern area of Red Lake County, captures over 70% of the hospital’s inpatient volume and over 80% of the hospital’s outpatient volume during 2021. While we recognize that many individuals travel greater distance to receive their healthcare at RiverView Hospital, we’re limiting our community to this geographic area to facilitate analysis of significant health needs. We believe that an expanded definition of our community would result in substantively identical findings.



For all qualitative data collected during the community health needs assessment, our community is the area defined above. However, for quantitative analysis, we are defining our community as Polk and Red Lake Counties. We do this because a significant amount of publicly available data is provided at the county level and because we believe the portions of Polk and Red Lake Counties outside of our defined community are similar enough to our community that the county-level data also fairly represents our community.

In 2020, the U.S. Census Bureau conducted the nation’s most recent census and published that data by county. Similarly, the Population Health Institute collects and reports health data and demographic data by county on an annual basis. U.S. census data is primarily from the 2020 census, with some figures being estimated based on that census and others being actual data from subsequent years. Population Health Institute data is as of July 2021.

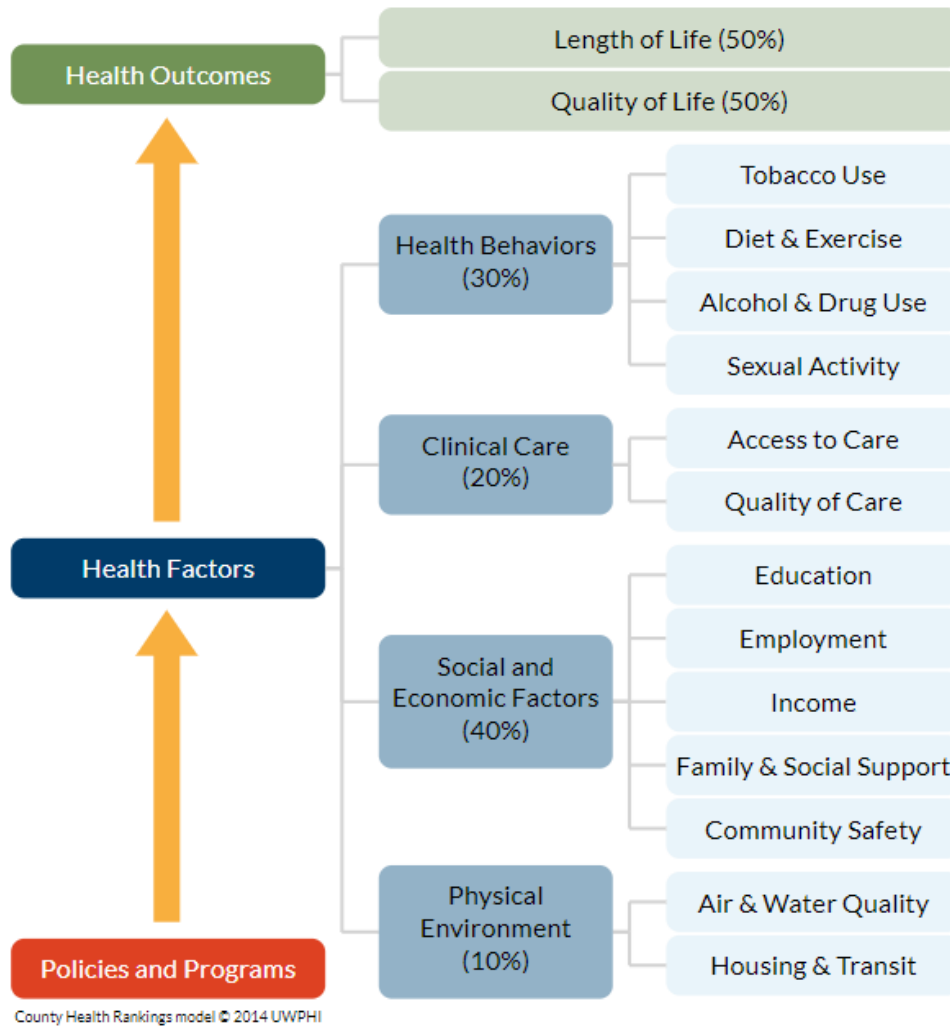
	Polk 2018	Polk 2021	Polk Change	Red Lake 2018	Red Lake 2021	Red Lake Change	MN 2018	MN 2021	MN Change
Population	31,529	30,757	-2.4%	3,999	3,933	-1.7%	5,611,179	5,707,390	1.7%
Age < 18	24.2%	24.8%	0.6%	24.2%	24.2%	0.0%	23.2%	23.1%	-0.1%
Age 65+	18.0%	18.8%	0.8%	20.9%	22.3%	1.4%	15.9%	16.7%	0.8%
Female	49.8%	49.4%	-0.4%	48.9%	48.4%	-0.5%	50.2%	49.9%	-0.3%
Caucasian	92.0%	91.4%	-0.6%	94.8%	93.8%	-1.0%	84.1%	83.0%	-1.1%
African American	2.9%	3.1%	0.2%	0.7%	0.9%	0.2%	6.8%	7.4%	0.6%
American Indian	1.8%	1.9%	0.1%	2.2%	2.3%	0.1%	1.4%	1.4%	0.0%
Asian	1.2%	1.0%	-0.2%	0.5%	0.4%	-0.1%	5.1%	5.4%	0.3%
Hispanic	6.6%	7.1%	0.5%	4.0%	3.7%	-0.3%	5.5%	5.8%	0.3%
Median Household Income	\$55,393	\$58,682	5.9%	\$52,500	\$59,698	13.7%	\$68,388	\$73,382	7.3%
Persons in Poverty	11.6%	10.6%	-1.0%	10.3%	8.3%	-2.0%	9.5%	8.3%	-1.2%
Uninsured Adults	6.0%	6.5%	0.5%	7.0%	7.7%	0.6%	5.0%	6.9%	1.9%
Uninsured Children	4.0%	3.4%	-0.6%	4.0%	3.7%	-0.3%	3.0%	3.1%	0.1%
Adult Obesity	37.0%	34.0%	-3.0%	34.0%	33.1%	-0.9%	28.0%	30.0%	2.0%

Both Polk and Red Lake Counties shrank in population between 2018 and 2021 while Minnesota’s population increased by approximately 2%. Polk and Red Lake Counties are primarily Caucasian, with most minority populations comprising a smaller portion of the community than in Minnesota as a whole. The two exceptions are American Indians, which are more common in both counties than in Minnesota, and Hispanics, which are more common in Polk County than in Minnesota. Between 2018 and 2021, the prevalence of Caucasians decreased slightly in Polk and Red Lake Counties and in the state. Most minority groups saw low growth numbers in each county between 2018 and 2021.

Both Polk and Red Lake Counties have a larger-than-average proportion of elderly individuals. Between 2018 and 2021, both Red Lake County and the state experienced similar increases in the percentage of elderly individuals, although Polk County’s growth was smaller. Additionally, both Polk and Red Lake Counties experienced an increase in the prevalence of children while Minnesota experienced a decrease.

Both Polk and Red Lake Counties have a median household income significantly below the state average. The growth in median household income is faster in Red Lake County and slower in Polk County than in the state, which indicates that the significant gaps in household income are shrinking in Red Lake County but growing in Polk County.

The Population Health Institute (“PHI”) publishes annual health data for every county in the United States. The data is aggregated into health outcomes and health factors. The PHI separates health outcomes into mortality (length of life) and morbidity (quality of life). Health factors are separated into four factors that largely influence the health outcomes: physical environment, society and economics, clinical care, and health behaviors.



Between 2013 and 2022, Red Lake County’s overall health factors ranking has fluctuated, but remained ranked 49 out of 87 counties. In that same time, Polk County’s ranking has improved from 79 to 54 out of 87 counties. Between 2013 and 2022, Red Lake County has experienced a significant decline in overall health outcomes, dropping from 14 to 68 out of 87 counties. Polk County was experiencing a similar decline in overall health outcomes, but that trend reversed between 2019 and 2022 and now shows overall improvement since 2013. Because today’s health factors lead to tomorrow’s health outcomes, these rankings indicate that our community is currently experiencing a decline in their length and quality of life because of historic health factors and that this trend is likely to continue in the future unless significant changes can be made.

2022 County Health Rankings for the 87 Ranked Counties in Minnesota

County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors
Aitkin	65	80	Fillmore	19	34	Martin	33	52	Rock	67	16
Anoka	15	20	Freeborn	55	72	McLeod	25	43	Roseau	59	31
Becker	73	62	Goodhue	45	45	Meeker	14	53	Scott	2	5
Beltrami	86	81	Grant	80	30	Mille Lacs	84	83	Sherburne	10	17
Benton	50	59	Hennepin	23	11	Morrison	52	68	Sibley	26	63
Big Stone	66	40	Houston	7	10	Mower	64	69	St. Louis	72	61
Blue Earth	42	29	Hubbard	60	70	Murray	35	23	Stearns	41	51
Brown	34	13	Isanti	47	57	Nicollet	8	6	Steele	22	39
Carlton	49	66	Itasca	77	74	Nobles	71	82	Stevens	9	9
Carver	1	1	Jackson	20	19	Norman	83	71	Swift	78	73
Cass	85	84	Kanabec	69	79	Olmsted	5	2	Todd	56	77
Chippewa	63	44	Kandiyohi	37	47	Otter Tail	40	33	Traverse	36	65
Chisago	24	25	Kittson	30	26	Pennington	39	32	Wabasha	11	21
Clay	43	14	Koochiching	81	76	Pine	76	85	Wadena	82	78
Clearwater	79	86	Lac qui Parle	21	42	Pipestone	57	56	Waseca	27	58
Cook	53	38	Lake	13	27	Polk	44	54	Washington	4	3
Cottonwood	62	41	Lake of the Woods	31	50	Pope	58	15	Watonwan	70	75
Crow Wing	48	46	Le Sueur	16	36	Ramsey	54	55	Wilkin	38	18
Dakota	6	7	Lincoln	51	22	Red Lake	68	49	Winona	32	28
Dodge	12	12	Lyon	28	24	Redwood	61	37	Wright	3	4
Douglas	29	8	Mahnomen	87	87	Renville	74	67	Yellow Medicine	18	60
Faribault	75	64	Marshall	46	35	Rice	17	48			

Minnesota County Health Rankings (Out of 87 Counties)								
	Polk County				Red Lake County			
	2022	2019	2016	2013	2022	2019	2016	2013
Length of Life	44	71	80	65	47	65	46	46
Quality of Life	35	63	46	39	76	28	3	1
Overall Health Outcomes	44	71	69	60	68	48	20	14
Health Behaviors	58	79	77	86	78	67	75	46
Clinical Care	18	46	41	63	16	77	74	41
Social & Economic Factors	60	57	50	61	40	64	52	54
Physical Environment	59	83	46	29	9	12	8	33
Overall Health Factors	54	72	60	79	49	70	68	49

Community Health Needs Assessment Methodology

RiverView Health’s executives led the planning, conduct, and reporting of the community health needs assessment. We contracted with CliftonLarsonAllen LLP, a professional services firm, to conduct community interviews and to assist in preparing this Community Health Needs Assessment Report and the hospital’s Implementation Strategy.

Interviews

We gathered qualitative information and perspectives on community health needs through one-on-one and small group interviews with key community stakeholders. These interviews were conducted in August and September 2022. The primary goal of these interviews was to ascertain a range of perspectives on the community's health needs. We gathered information from the following specified groups within our community:

- People with special knowledge or expertise in public health
- Government health departments and other government agencies
- Leaders, representatives or members of medically underserved populations
- Leaders, representatives or members of low-income populations
- Leaders, representatives or members of minority populations.

The following agencies, organizations and businesses participated in the community health needs assessment process by contributing their perspectives, opinions and observations. We thank them for their past and continued assistance.

- Pennington & Red Lake County Public Health & Home Care
- Red Lake County Social Services
- Polk County Social Services
- Polk County Sheriff's Department
- RiverView Health
- Tri-Valley Opportunity Council
- Alluma

Quantitative Data

The community health needs assessment included consideration and analysis of the following publicly available data:

- American Lung Association
 - <https://www.lung.org/quit-smoking/smoking-facts/health-effects>
- Center for Rural Health
 - <https://www.ruralhealthinfo.org/charts/7?state=MN>
- Centers for Disease Control Obesity
 - <https://www.cdc.gov/obesity/data/adult.html>
 - <https://www.cdc.gov/obesity/data/childhood.html>
 - <https://www.cdc.gov/childrensmentalhealth/data.html>
- Diabetes Research Institute
 - https://www.diabetesresearch.org/diabetes-statistics?gclid=EAlaIqobChMliJa3p8Sy5AIVph6tBh3tXQL6EAAYASAAEgKCq_D_BwE

- Merritt Hawkins, an AMN Healthcare Company
 - https://www.merrithawkins.com/uploadedFiles/Merritt_Hawkins_2018_incentive_review.pdf
 - https://www.merrithawkins.com/uploadedFiles/MerrittHawkins/Content/News_and_Insights/Thought_Leadership/mhawwhitepaperpsychiatry2018.pdf
- National Institutes of Health
 - <https://www.niaaa.nih.gov/publications/brochures-and-fact-sheets/alcohol-facts-and-statistics>
 - <https://www.nih.gov/news-events/nih-research-matters/trends-us-methamphetamine-use-associated-deaths>
 - <https://nida.nih.gov/publications/research-reports/methamphetamine/what-are-long-term-effects-methamphetamine-misuse>
- Population Health Institute’s county health rankings
 - <https://www.countyhealthrankings.org/app/minnesota/2022/downloads>
- The Mayo Clinic, Obesity
 - <https://www.mayoclinic.org/diseases-conditions/obesity/symptoms-causes/syc-20375742>
- U.S. Census Bureau’s Census QuickFacts
 - <https://www.census.gov/quickfacts/fact/table/redlakecountyminnesota,polkcountyminnesota,MN/PST045221>
- RiverView Health
 - <https://www.RiverViewhealth.org>

Information Gaps

RiverView Health did not receive direct input from members of the low-income, minority and medically underserved populations in our community, instead obtaining input from individuals and organizations that work with those individuals daily. Although we are unable to identify any specific information gaps, we recognize that members of those populations may have provided different information if they directly participated. Additionally, we recognize that other individuals who weren’t invited to participate may have provided different input.

Request for Feedback

RiverView Health was willing to consider written comments related to its 2013, 2016 and 2019 Community Health Needs Assessment Reports and Implementation Strategies but received no such input. If any reader would like to provide input on this community health needs assessment, they can submit their comment(s), in writing, to the following address:

Attention: Chief Operating Officer
 RE: Community Health Needs Assessment
 RiverView Health
 323 South Minnesota Street
 Crookston, MN 56716

Determination of Significance

While many needs were identified during the community health needs assessment process, this report focuses on those needs that were deemed significant by RiverView Health. A health need's significance was evaluated based on many factors. The factor given the most weight was the relative importance placed on the health need by the community participants as a whole. Other factors included the number of people in our community impacted by the health need, the impact of that health need on quality of life and length of life, and the impact on low-income, minority, and other medically underserved populations. The decision was made by RiverView Health's executive leadership team.

Prioritization of Significant Community Health Needs

The significant community health needs were then prioritized by RiverView Health based on various factors including the number of people impacted, the impact of that health need on quality of life and length of life, RiverView Health's ability to respond effectively to the health need, and the estimated effectiveness of feasible interventions. This decision was also made by RiverView Health's executive leadership team.

Prioritized Community Health Needs

Through the community health needs assessment, RiverView Health identified the following significant community health needs and prioritized them in the given order:

1. Obesity
2. Substance abuse and mental health

Obesity and Diabetes

Obesity was identified as one of the significant community health needs in each of our prior community health needs assessments and the community is still concerned with the situation in 2022. As indicated above in the "Our Community" Section, one out of every three adults in Polk and Red Lake Counties is obese, slightly higher than the rate throughout Minnesota. Community participants indicated a multitude of factors that impact obesity, such as:

- Excessive use of electronics like video games, social media and television
- Too much time spent working leaves little time or energy for physical activity
- Limited availability of healthy foods through local stores and restaurants
- The cost of healthy foods such as lean meats, fruits and vegetables
- A shortage of affordable, convenient exercise options for adults and youth

The concerns above can be summarized as two overall factors that are likely to impact obesity in our area: healthy eating and active living.

Throughout our rural community, access to healthy foods such as fresh fruits, vegetables and meats is a significant concern. While approximately 1% of individuals in our nation have limited access to healthy food outlets, the rate in Minnesota in 2022 is 5.7% and the rates in Polk and Red Lake Counties are 8.6% and 26.3%, respectively. While Minnesota is holding steady at 6% when compared to 2018 data on the same topic, both Red Lake and Polk Counties saw

improvements, although Red Lake County has a much more significant problem than does Minnesota overall. There are a handful of grocery stores located throughout our community. Residents can purchase food at grocery stores in Crookston, East Grand Forks, Red Lake Falls and Fertile. Aside from those towns, residents can generally only access the limited foods that are available at gas stations and similar businesses throughout the County.

The relatively small number of grocery stores poses an increasing challenge for individuals with transportation difficulties, such as more rural individuals, low-income individuals, the elderly, and adolescents. Some individuals do not have their own personal transportation, may not be able to afford frequent longer drives, and/or may not have any friends or family upon which they can rely for transportation assistance. In addition to traditional costs like repairs, maintenance and insurance, vehicles have recently become an even larger cost due to the rapid increase in the price of gasoline in early 2022. The further a person lives from a town with a grocery store, the larger the financial challenge for that individual.

If healthy foods were to become more easily accessible in our area, community participants expressed concern that healthy eating would still not be instantly achieved, for a couple of reasons. First, community members may not have sufficient cooking experience and knowledge to be able to turn healthy foods into meals that they and their families would happily eat. Improvement in this area would likely require significant education on meal preparation and recipes. Second, as adults in our community work very hard to support themselves and their families, they may not have sufficient time and/or energy to prepare a healthy meal. One reason for the popularity of fast food and packaged meals is that they tend to be prepared quickly. Improvement in this area would likely require either education on efficient meal preparation or occupational/living changes that provide community members with more time to prepare healthy meals.

Our rural community has very few exercise and activity options outside of Crookston and East Grand Forks. may not be easily accessible to low-income individuals, community members who need to work long hours or multiple jobs, youth and elderly individuals. While 81% of Minnesotans live within a half mile of a park or three miles of a recreational facility, only 61% of Polk County residents and 49% of Red Lake County residents meet this criterion. Furthermore, the majority of our community that lives relatively close to a park or recreation center are the individuals living in or around the cities of Crookston, East Grand Forks and Red Lake Falls. Individuals living throughout the rest of the counties do not have such access. Like accessing healthy foods, the distance to physical activity options poses an increasing challenge for individuals with transportation difficulties, such as more rural individuals, low-income individuals, the elderly and adolescents.

Obesity is a major concern across the United States because of the related health issues that it can cause. Obesity has been linked to more than 60 chronic diseases, including some of the most significant illnesses our nation faces: diabetes, coronary heart disease, hypertension, stroke, high cholesterol, liver disease, gallbladder disease, sleep apnea, osteoarthritis,

depression, and several types of cancer. According to the Mayo Clinic, people with obesity are more likely to develop several potentially serious health problems, including:

- Heart disease and strokes: obesity makes you more likely to have high blood pressure and abnormal cholesterol levels, which are risk factors for heart disease and strokes.
- Type 2 diabetes: obesity can affect the way the body uses insulin to control blood sugar levels, which raises the risk of insulin resistance and diabetes.
- Certain cancers: obesity may increase the risk of cancer of the uterus, cervix, endometrium, ovary, breast, colon, rectum, esophagus, liver, gallbladder, pancreas, kidney and prostate.
- Digestive problems: obesity increases the likelihood of developing heartburn, gallbladder disease and liver problems.
- Sleep apnea: people with obesity are more likely to have sleep apnea, a potentially serious disorder in which breathing repeatedly stops and starts during sleep.
- Osteoarthritis: obesity increases the stress placed on weight-bearing joints, in addition to promoting inflammation within the body, which may lead to complications such as osteoarthritis.
- Severe COVID-19 symptoms: obesity increases the risk of developing severe symptoms if you become infected with the virus that causes coronavirus disease 2019 (COVID-19), which may require treatment in intensive care units or even mechanical assistance to breathe.

Because of its close connection to obesity, diabetes was frequently raised as a concern by community participants. According to the Diabetes Research Institute,

“Diabetes is caused by the body’s inability to create or effectively use its own insulin, which is produced by islet cells found in the pancreas. Insulin helps regulate blood sugar (glucose) levels – providing energy to body cells and tissues.

- “Without insulin, the body’s cells would be starved, causing dehydration and destruction of body tissue.
- “People with type 1 diabetes must have insulin delivered by injection or a pump to survive.
- “Many people with type 2 diabetes can control their blood glucose by following a healthy meal plan and a program of regular physical activity, losing excess weight, and taking medications. Medications for each individual with diabetes will often change during the course of the disease. Insulin also is commonly used to control blood glucose in people with type 2 diabetes.”

The diabetes rate in Minnesota is slightly lower than the national rates, with 7.8% of Minnesota adults diagnosed as diabetic in 2022. Unfortunately, the rates in Polk and Red Lake Counties are closer to the national average at 8.6%.

Like obesity, people with diabetes are at an increased risk of serious health complications including vision loss, heart disease, stroke, kidney failure, lower limb amputation, and premature death.

Substance Abuse and Mental Health

Substance abuse covers a broad range of health issues, including tobacco, alcohol, prescription drugs, and illicit drugs. Each of these is a health need in our state and community, although community participants identified the following as the most significant:

- Methamphetamines (“meth”)
- Adult alcohol consumption
- Opiates and heroine
- Smoking, vaping and similar nicotine-based activities

Community participants consistently expressed concern over abuse of these substances and a need for additional treatment resources including more education. Respondents suggested continuing to work with doctors to decrease opiate prescriptions and would like to see better access to care through inpatient acute and emergency care, inpatient post-acute care, outpatient care, and long-term counseling and follow-up services. Community participants also felt co-morbidities—defined as the simultaneous occurrence of multiple mental health, physical health, and/or substance abuse problems—play a large roll in substance abuse in our community and must be addressed to gain treatment success.

Community participants almost unanimously identified methamphetamines (“meth”) as the most significant substance abuse concern in our area. According to the National Institutes of Health, meth use in the United States increased by 43% between 2015 and 2019, but the rates of overdose deaths attributable to meth close to tripled in the same time period, implying a much greater risk of overdosing if you use meth. The data further suggested that people who use methamphetamine have become more diverse. Historically, methamphetamine use has been prevalent among middle-aged white people. But the researchers found a tenfold increase in methamphetamine-use disorder (“MUD”) without injection among Black people. This was much larger than among other racial and ethnic groups. MUD without injection also quadrupled among people aged 18-23 years, much larger than the growth among older age groups. At the national level, several socioeconomic factors are also associated with methamphetamine use and MUD. These include low educational attainment, low household income, lack of insurance, housing instability, and involvement with the criminal justice system, generally indicating that it has a great impact on lower-income individuals. There were also stronger relationships between meth use and other illnesses, such as hepatitis, HIV/AIDS, sexually transmitted diseases, or depression.

Community participants expressed concerns about meth primarily because of the major consequences of its use. According to the National Institutes of Health, people who use meth long-term may exhibit symptoms that can include significant anxiety, confusion, insomnia, mood disturbances, and violent behavior. They may also display a number of psychotic features

including paranoia, visual and auditory hallucinations, and delusions. Psychotic symptoms may last for months or years after a person quits using meth, and stress has been shown to precipitate spontaneous recurrence of meth psychosis. These and other problems reflect significant changes to the brain caused by meth use. Neuroimaging studies have demonstrated alterations in the activity of the dopamine system that are associated with motor speed and impaired verbal learning, as well as severe structural and functional changes in areas of the brain associated with emotion and memory. In addition to the neurological and behavioral consequences of meth abuse, long-term users also suffer physical effects such as weight loss, severe tooth decay and tooth loss, and skin sores.

In 2022, the percentage of adults in Red Lake County who report excessive alcohol consumption (23.7%) is relatively similar to Minnesota's average (23.5%), but Polk County's rate is slightly higher at 26.2%. In other words, one in four adults in our community reports regularly drinking excessive amounts of alcohol. Consuming Alcohol is viewed as socially acceptable in our society and in our community, and it can take a serious toll on your health. According to the National Institutes of Health, alcohol is the most commonly abused substance in the United States. In a 2019 survey, 85.6% of adults reported drinking alcohol at some point in their lifetime and 54.9% reported that they drank alcohol in the last month. In the same survey, 39.7% of youth ages 12-20 reported drinking alcohol at some point in their lifetime and 18.5% reported drinking alcohol in the last month. 25.8% of adults reported that they engaged in binge drinking within the last month. The same study found that 1.7% of youth between the ages of 12 and 17 had alcohol use disorder, a chronic brain disorder marked by compulsive drinking, loss of control over alcohol use, and negative emotions when not drinking. AUD in this age-group was more common among girls than boys. Unfortunately, only 7% of people who had AUD reported receiving any kind of treatment within the last year. Alcohol abuse is a significant concern because of its commonality and the major impacts it has on our community.

- In the United States, the rate of alcohol-related emergency department visits increased 47% between 2006 and 2014, which translates into approximately 210,000 additional visits per year.
- In 2017, approximately 10.5% of U.S. children lived with a parent who has AUD.
- Overall, alcohol contributes to about 18.5% of all emergency department visits.
- An estimated 95,000 people die from alcohol-related causes annually, making it the third-leading cause of preventable death in the United States.
- In 2019, alcohol-impaired driving accounted for 28% of all driving deaths.
- In 2010, alcohol misuse cost the United States approximately \$249 billion, with three-quarters of that being attributable to binge drinking.
- Research indicates that alcohol use during the teenage years can interfere with normal adolescent brain development and increase the risk of developing AUD.

Heroin abuse made a resurgence in the late 1990s and early 2000s when a nationwide effort was made to crack down on meth production in the United States by limiting access to the necessary ingredients for its production. While those efforts were effective in reducing the

manufacture of meth in the U.S., the long-term results were (a) that meth production moved to other countries who could then import it to the U.S. and (b) the decline of meth was accompanied by an increase in heroin abuse. Heroin can cause damage to various organs, including the heart, lungs, liver and kidneys. It can also cause breathing problems, collapsed veins, and poses special problems related to the transmission of HIV, Hepatitis C, and other diseases that can occur with sharing needles. The resurgence of opiate-related problems in the United States has increased emergency room visits, crime, homicides, high school drop-outs, and loss of employment across the nation.

The percentage of adults who smoke is approximately 5% higher in our community than throughout Minnesota, with rates of 19.4% in Polk County and 20.1% in Red Lake County, compared to 15.0% in Minnesota. According to the American Lung Association, is the number one cause of preventable disease and death worldwide. Smoking related illness in the U.S. costs more than \$600 billion a year, including over \$241 billion in direct medical care for adults and \$184 billion in lost productivity. Smoking harms almost every organ in the human body, and is a main cause of lung cancer and chronic obstructive pulmonary disease (COPD), causing approximately 90% of lung cancer deaths and 80% of deaths related to COPD. Smoking also causes coronary heart disease, stroke, emphysema, chronic bronchitis, gum disease, fertility issues, erectile dysfunction, blindness, type 2 diabetes, various types of cancer, and rheumatoid arthritis.

With the rise in certain types of substance abuse, treatment facilities in our area have seen a matching rise in demand, outpacing their ability to care for needy individuals. The greatest needs expressed by community participants are for additional inpatient and transitional care facilities, although the availability of care depends on a person's financial position. Insurance companies have various positions on whether substance abuse treatment is eligible for coverage and, if so, which facilities may be used. As the distance to an allowed facility with current capacity increases, the difficulty of accessing that facility (time, cost, etc.) naturally increase for lower-income individuals. Closer for-profit and non-profit facilities are available, although their availability is based on a person's ability to pay. The facilities, providers, and programs that are willing to serve low-income, uninsured and underinsured individuals are generally overwhelmed by the number of people in need of their services.

A common concern among community members was mental health among both adults and children. Depression and anxiety were frequently identified for children and young adults while depression, loneliness, dementia and Alzheimer's disease were identified for older adults. Although each of these issues have been a concern in our community for a long time, community participants agreed that each issue worsened during the COVID pandemic, including the following factors:

- Economic/financial struggles among adults and the resulting impact on their children
- General isolation and loneliness across all demographics during the COVID pandemic

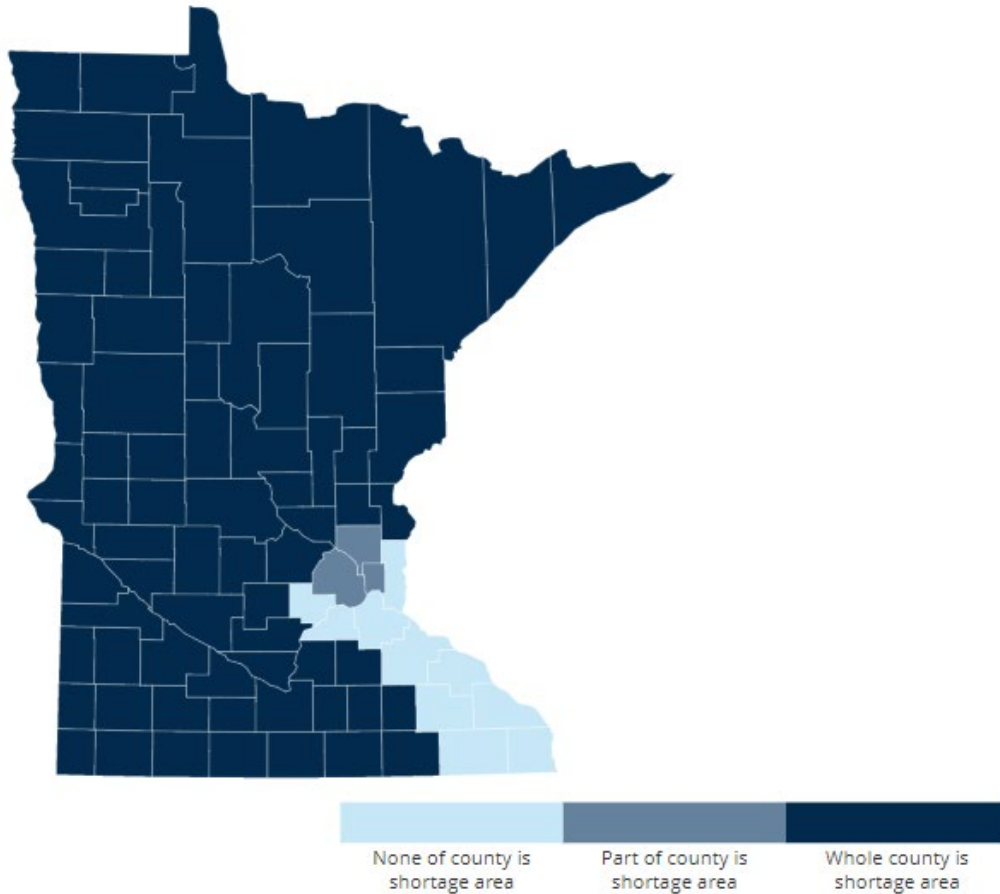
- Increased time on social media and playing video games, primarily among children but also among adults, with more exposure to bullying and similar negative influences through those apps and games
- Lack of emotional development by adolescents during the COVID pandemic leading to disproportionately strong responses to seemingly minor issues, lack of social skills, panic attacks and similar issues

Based on publicly available data, more of our community members suffered from mental distress (9.5% of adults) approximately the same as across Minnesota in 2018 (10%), but the percentage in our community increased to 13.5% by 2021 while only increasing to 12.1% across Minnesota. This means the ratio of adults suffering from frequent mental distress increased from 1-out-of-10 to 1-out-of-7 in recent years.

While community participants expressed concern for the mental health condition of adults, they expressed far more concern for the condition of youth in our area. According to Centers for Disease Control and Prevention, in 2017, one in six U.S. children were diagnosed with a mental, behavioral, or developmental disorder. According to the U.S. Department of Health & Human Services, the prevalence is even higher among low-income youth (21%), youth in the child welfare system (50%) and youth in the juvenile justice system (70%). Additionally, an estimated 49.5% of adolescents have had a mental health disorder at some point in their lives. Among children ages 3-17, 9.8% were diagnosed with ADHD, 9.4% were diagnosed with anxiety, 4.4% were diagnosed with depression, 2.9% were diagnosed with eating disorders, and 8.9% were diagnosed with various behavior problems.

Community participants indicated that the rising mental health struggles may relate to a lack of effective coping mechanisms in our youth and young adult populations when facing a negative life situation. The general stigma related to mental health, both across the nation and in our community, may prevent individuals from self-identifying a problem and seeking treatment before an emergency arises, although community participants see this as less of a concern in younger adults and adolescents. Respondents feel we should reframe mental illness into mental well-being or a spectrum of well-being to try and alleviate this issue. They also suggest creating a guide of potential resources for behavioral problems that are not yet acute to aid in earlier discovery and treatment.

Health Professional Shortage Areas: Mental Health, by County, 2022 - Minnesota



While suicidal tendencies tend to be treated quickly in our community, it is harder to gain treatment for chronic, serious mental health disorders. The lack of accessibility in obtaining diagnoses and effective treatment is a concern. Individuals in our community feel we are lacking psychiatrists, geriatric psychiatrists, pediatric psychiatrists, and other professionals. Additionally, our community's resources that are available to low-income individuals face excessive demand. The shortage of mental health professionals is not unique to our own community or even to Minnesota. It is a nationwide problem, and one that does not have an easy fix. Merritt Hawkins, a physician-recruitment firm based in Texas, released their 2018 Review of Physician and Advanced Practitioner Recruiting Incentives and a white paper, *The Silent Shortage*, which provides insight into the growing issue of mental health care in the US. Below is an excerpt listing drivers of the shortage:

“The shortage of psychiatrists in the United States is driven in part by a growing need for psychiatric services. Consider:

- One in every five adults in America experiences some form of a mental illness.
- Nearly one in 20 adults in America (13.6 million) live with a serious mental illness.

- 60% of adults with a mental illness received no mental health services in the prior year.
- Suicide is the 3rd leading cause of death in youths age 10-24, and the 10th leading cause of death for adults in the U.S.
- The average delay between onset of mental health symptoms and intervention is 8-10 years.
- Over \$193 billion dollars in lost earnings a year result from serious mental illness.
- 24% of state prisoners have “a recent history of a mental health condition.”

According to these reports, the average per capita number of psychiatrists in the U.S. is 9.35 per 100,000 people, while Minnesota has 8.18 psychiatrists per 100,000 people. Psychiatry also holds the second spot as the most requested physician placement search for the third consecutive year. 59% of the nation’s 30,451 psychiatrists are at least 55-year-old, and many will retire in the near future. In reviewing data related to resident census in psychiatry, we will continue to see demand increase while supply dwindles as new members of the profession are not currently growing at the same rate as attrition due to retirement. To further complicate the issue, Merritt Hawkins reported that psychiatrists prefer to work in outpatient settings and it’s becoming increasingly difficult to recruit them for hospital positions.

Conclusion

RiverView Health conducted this community health needs assessment to better understand our community and the individuals we serve. The hospital will develop a strategy to respond to the significant community health needs and will create an Implementation Strategy to formalize those responses. That Implementation Strategy will be approved by RiverView Health’s board of directors no later than February 15, 2023 and will be used by the organization as a guide for thoughtful, impactful decisions and actions in the coming years.

The following pages include a list of resources currently available in our community to address the significant community health needs discussed in this report. Despite our efforts, we recognize that this list may not be all-inclusive and welcome any information to add available resources and increase its usefulness. Such information can be sent to the address provided on page 10 of this report.

Health Resources

The following resources are available in our community to address the significant health needs that were identified in this community health needs assessment.

The counties' health and social services departments provide support to our community members in numerous ways, including nutrition, physical activity, mental health, substance abuse, violence prevention, and financial support. We recommend that you visit your county's health and/or social services department to obtain further information about the services and programs it offers.

- Polk County Public Health Department
 - 816 Marin Avenue, Suite 125, Crookston
 - (218) 281-3385
 - <https://www.co.polk.mn.us/191/Public-Health>
- Polk County Social Services Department
 - 612 North Broadway, Room 302, Crookston
 - (218) 281-3127
 - <https://www.co.polk.mn.us/250/Social-Services>
- Pennington & Red Lake County Public Health & Home Care
 - 124 Langevin Avenue NW, Red Lake Falls
 - (218) 253-4378
 - <http://www.intercountynursingservice.com/>
- Red Lake County Social Services Department
 - 125 Edward Avenue NW, Red Lake Falls
 - (218) 253-4131
 - https://redlakecounty.govoffice3.com/index.asp?SEC=C626CF10-DE7F-4E15-B023-BB1D111D3817&Type=B_BASIC&pri=0

In addition to governmental support, the following health care facilities and related organizations are currently available within our community:

Hospitals

- RiverView Hospital
 - 323 South Minnesota Street, Crookston
 - (218) 281-9200
 - <http://www.RiverViewhealth.org/>

Medical Clinics

- RiverView Clinic-Crookston – 323 S Minnesota Street, Crookston
- RiverView Home Care – 721 S Minnesota Street, Crookston
- Altru Clinic – 400 South Minnesota Street, Crookston
- Community Health Service – 310 S Broadway, Crookston
- RiverView Clinic-East Grand Forks – 1428 Central Avenue NW, East Grand Forks

- Sanford Health Clinic – 929 Central Avenue NW, East Grand Forks
- Sanford Health Clinic – 621 Demers Avenue, East Grand Forks
- Sanford Health Occupational Medicine Clinic – 625 Demers Avenue, East Grand Forks
- Sanford Home Care – 404 Demers Avenue, East Grand Forks
- Altru Clinic – 607 Demers Avenue, East Grand Forks
- Altru Outreach Therapy – 411 2nd Street NW, East Grand Forks
- RiverView Clinic-Fertile – 306 Mill Street, Fertile
- RiverView Rehab Services-Fertile – 101 S Mill Street, Fertile
- Altru Clinic – 23076 347th Street SE, Erskine
- RiverView Clinic-Red Lake Falls – 105 International Drive, #25, Red Lake Falls
- Altru Clinic – 312 International Drive, Red Lake Falls

Mental Health and Chemical Dependency

- Alluma – 603 Bruce Street, Crookston
- Prairie Psychological Services – 205 W Fletcher Street, Crookston
- RiverView Recovery Center, 23616 US-2, Crookston
- REM North Star – 220 Johnson Place, Crookston
- Playworks Therapy – 203 W Fletcher Street, Crookston
- Alluma – 1422 Central Avenue NW, East Grand Forks
- Glenmore Recovery Center, 1424 Central Avenue NW, East Grand Forks
- Douglas Place Residential Treatment, 1111 Gateway Drive NE, East Grand Forks
- Red Lake Alcohol Rehab Program – 114 Main Street, Red Lake