

# Community Health Needs Assessment for Madison Lutheran Home

## *Executive Report*



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**FY2013**

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## *Executive Summary*

One of the primary focuses of any healthcare facility is identifying and addressing the health needs of the area they serve. Madison Lutheran Home (MLH) has put forth time, effort, and resources to doing just that. As a non-profit facility, MLH is dedicated to reinvesting in our healthcare system to meet the needs of the communities we provide services to. With the enactment of the Affordable Care Act, tax-exempt hospitals are required to conduct a Community Health Needs Assessment every three years. Madison Lutheran Home conducted a Community Health Needs Assessment on the county of Lac qui Parle in Minnesota, where the majority of our marketplace resides. The surrounding rural communities we serve within Lac qui Parle County include Madison, Marietta, Louisburg, Bellingham, Dawson, Nassau, Ortonville, and Boyd.

First we performed a demographic analysis of Lac qui Parle County using data from the U.S. Census Bureau and County Health Rankings. Then we utilized additional resources including the Minnesota Department of Health, Countryside Public Health, and Wilder Research to further our assessment. We finished our evaluation with primary data we compiled through a community survey and three different interviews. We interviewed and collaborated with a provider on our medical staff, a resident of the community, and a public health official from Countryside Public Health. Using all this information, our Community Health Needs Committee determined the health needs for the county. The next step for MLH was forming collaborations with the Lac qui Parle Health Network, Lac qui Parle School District, and the Madison Healthcare Auxiliary to approach and execute an implementation strategy.

The committee identified three main health needs in our area including diabetes, heart disease, and stroke. Our area experiences lack of education, outreach, and prevention when facing these chronic diseases. Since we are located in a rural area, we realize the importance of collaborating with local members of our communities, public health officials, and numerous organizations to address health concerns in the region. Together, we can recognize where improvements are needed and strive to increase the quality of care we provide. In order to address these chronic diseases, we want to positively influence the health habits of people in our region by providing education on preventing and managing these diseases. One approach we took to doing this was by developing a community wellness program to motivate participants to live a healthier lifestyle. Our goal is to take initiatives to close any health service gaps we are facing in Lac qui Parle County in order to better the health of our communities.

## Overview of Madison Lutheran Home

Madison Lutheran Home is located in Southwest Minnesota in the rural community and county seat of Madison, MN. Madison Lutheran Home (MLH) is a critical access facility that includes Madison Lutheran Home, Madison Hospital, Lac qui Parle Clinic, and subsidiaries. Madison Lutheran Home exists as a non-profit Christian organization called by God to affirm the worth of all people, to provide health care, residential and community service in a competent and caring manner.

**Madison Hospital** is a critical access hospital licensed for 12 beds. The hospital practices general medicine and surgical with 4 staffed physicians and 10 outreach physicians. In FY2012, Madison Hospital had 226 inpatient admissions and 8,233 outpatient visits. The services offered include:

- ✚ Allergy, Asthma, & Immunology
- ✚ Audiology
- ✚ Bone Densitometry
- ✚ Cardiology & Cardiac Rehab
- ✚ Digital Mammography
- ✚ Emergency Care with 24-Hour Emergency Coverage
- ✚ Home Health
- ✚ Hospice
- ✚ In-House CT Scanner
- ✚ In-House Ultrasound
- ✚ Laboratory including Direct Access Lab Testing
- ✚ Medical & Surgical Care
- ✚ MRI
- ✚ Nephrology
- ✚ Nuclear Imaging
- ✚ Obstetrics
- ✚ Occupational, Physical, and Speech Therapy—Big Stone Therapy
- ✚ Oncology & Hematology
- ✚ Ophthalmology & Optometry
- ✚ Orthopedic Consultations & Surgery
- ✚ Outpatient Services
- ✚ Pharmacy
- ✚ Podiatry
- ✚ Radiology & Diagnostics Imaging
- ✚ Registered Dietician
- ✚ Respite Program
- ✚ Sleep Studies
- ✚ Social Services
- ✚ Stress EKG Testing
- ✚ Surgical Services
- ✚ Swing Bed Program
- ✚ Telehealth (eConsult & eEmergency)
- ✚ Upper GI Endoscopy & Colonoscopy
- ✚ Urology

Other facilities on campus with Madison Hospital include Lac qui Parle Clinic, Madison Lutheran Home, and Hilltop Residence. Lac qui Parle Clinic had 5,943 clinic visits in FY2012. Medical Staff for our facilities consist of two family practice physicians and two mid-level providers. Madison Lutheran Home is a skilled nursing facility licensed for 80 beds, and Hilltop Residence is a secure 36-unit apartment building that is managed by

Madison Lutheran Home. Residents receive many services provided by Home Health, Madison Hospital, and Madison Lutheran Home. These facilities are all conveniently attached allowing easy access to medical services for anyone on campus.

Madison Hospital is located approximately 12 miles northwest of Johnson Memorial Health Services in Dawson, MN, and 21 miles southwest of Appleton Area Health Services in Appleton, MN. Together, these three facilities make up the Lac qui Parle Health Network (LqPHN). The vision of the LqPHN is to assist its members in building and maintaining quality healthcare services to the populations of Lac qui Parle and Swift Counties.

### **Collaboration**

Madison Lutheran Home partnered with Countryside Public Health, Lac qui Parle County Family Service Center, Lac qui Parle Health Network, Madison Healthcare Auxiliary, the local Lac qui Parle Valley School District, the Ministries, and local Chamber groups and area banks in order to address health needs within the region. We began the assessment process by forming a Community Health Needs Committee. The focus of this committee was to branch out into the community in multiple ways in order to identify the health needs that we should address. The committee was formulated to plan, budget, implement, and monitor the entire process of our Community Health Needs Assessment. Once we established the health priorities affecting Lac qui Parle County, we devised implementation and action plans to address the health needs in our communities while collaborating with other local organizations.

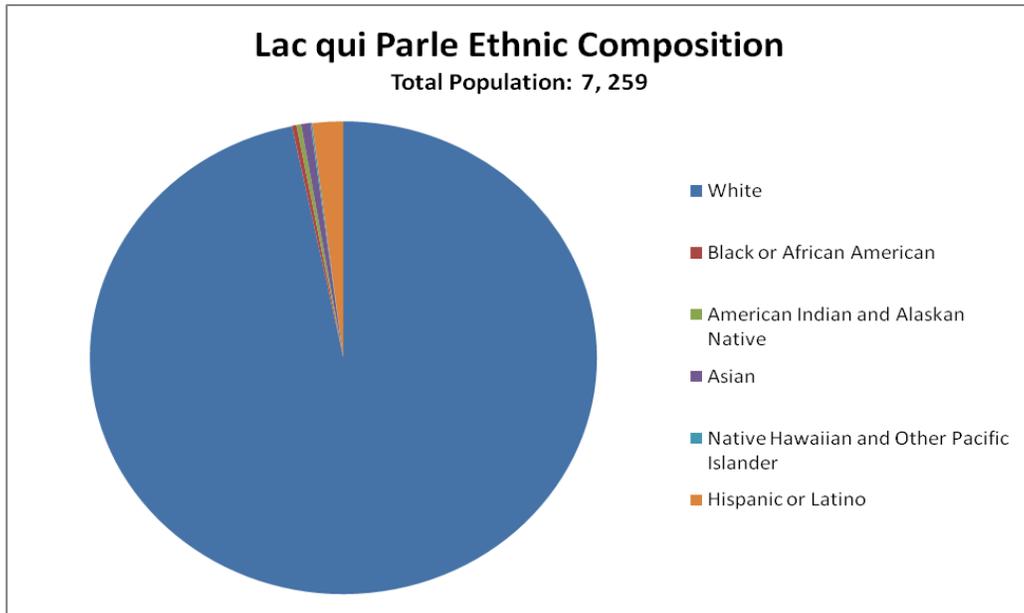
### ***Demographic Analysis***

The initial data presented to the Community Health Needs Committee was the demographic analysis of Lac qui Parle County. Information was compiled using the U.S. Census Bureau and County Health Rankings. This information would be used to help our committee make decisions and form an analysis of the health needs of the community our facility serves. The demographic analysis we gathered from secondary data included the population trends, ethnic composition, age composition, educational attainment, and poverty rates of residents in Lac qui Parle County. We also presented statistics on the prevalence of health conditions and diseases, the number of residents uninsured, causes of death, and other health statistics of our area.

### **U.S. Census Bureau**

According to the 2010 U.S. Census Bureau, Lac qui Parle County's population was 7,259, which makes up about 0.14% of Minnesota's population. The estimated population for 2012 of the county is 7,109; in other words, the county experienced a 2.1% decrease in

population from 2010. The age group of the area is 5.2% persons under 5 years, 21.2% persons under 18 years, and 24.2% persons 65 years and over. The ethnic breakdown is 97.9% white, 0.3% black or African American, 0.3% American Indian and Alaska Native, 0.6% Asian, 0.1% Native Hawaiian or other Pacific Islander, and 2% Hispanic or Latino. The median household income for the county from 2009-2011 was \$48,269, with the persons below poverty at 9.1% of the population (U.S. Census Bureau, 2013).



### County Health Rankings

To further evaluate the demographics of the county, we used data from County Health Rankings. After reviewing these statistics, we acknowledged that Lac qui Parle County fails to meet the National Benchmark in some health behaviors. Adult obesity is at 30% in the county, which is 5% more than the National Benchmark. Physical inactivity within the county is at 22%, which could contribute to the number of people who are obese. Other National Benchmarks that are not met within clinical care include diabetic screening, which is at 85% and 5% below the National Benchmark. The statistics show that 10% of Lac qui Parle County is uninsured. Primary care physicians are 1,477 people per physician. Lac qui Parle is at 82 preventable hospital stays surging past the National Benchmark of 47. Other social and economic factors of Lac qui Parle County include a high school graduation rate of 93% and an unemployment rate of 5.3%. Overall, Lac qui Parle County ranks 31 on health outcomes and 15 on health factors out of 87 counties in Minnesota that were ranked (County Health Rankings, 2013). Below is the complete table from County Health Rankings on Lac qui Parle County.

## Lac qui Parle (LQ)

	Lac qui Parle County	Error Margin	Minnesota	National Benchmark*	Rank (of 87)
<b>Health Outcomes</b>					31
<b>Mortality</b>					62
Premature death	6,039	4,781-7,527	5,126	5,317	
<b>Morbidity</b>					2
Poor or fair health	15%	8-26%	11%	10%	
Poor physical health days	1.9	1.0-2.9	2.9	2.6	
Poor mental health days			2.7	2.3	
Low birth weight	4.6%	2.8-6.4%	6.5%	6.0%	
<b>Health Factors</b>					15
<b>Health Behaviors</b>					52
Adult smoking			17%	13%	
Adult obesity	30%	23-37%	26%	25%	
Physical inactivity	22%	16-29%	19%	21%	
Excessive drinking			20%	7%	
Motor vehicle crash death rate	29	16-48	10	10	
Sexually transmitted infections	28		276	92	
Teen birth rate	18	12-26	26	21	
<b>Clinical Care</b>					43
Uninsured	10%	9-12%	10%	11%	
Primary care physicians**	1,447:1		1,140:1	1,067:1	
Dentists**	1,847:1		1,660:1	1,516:1	

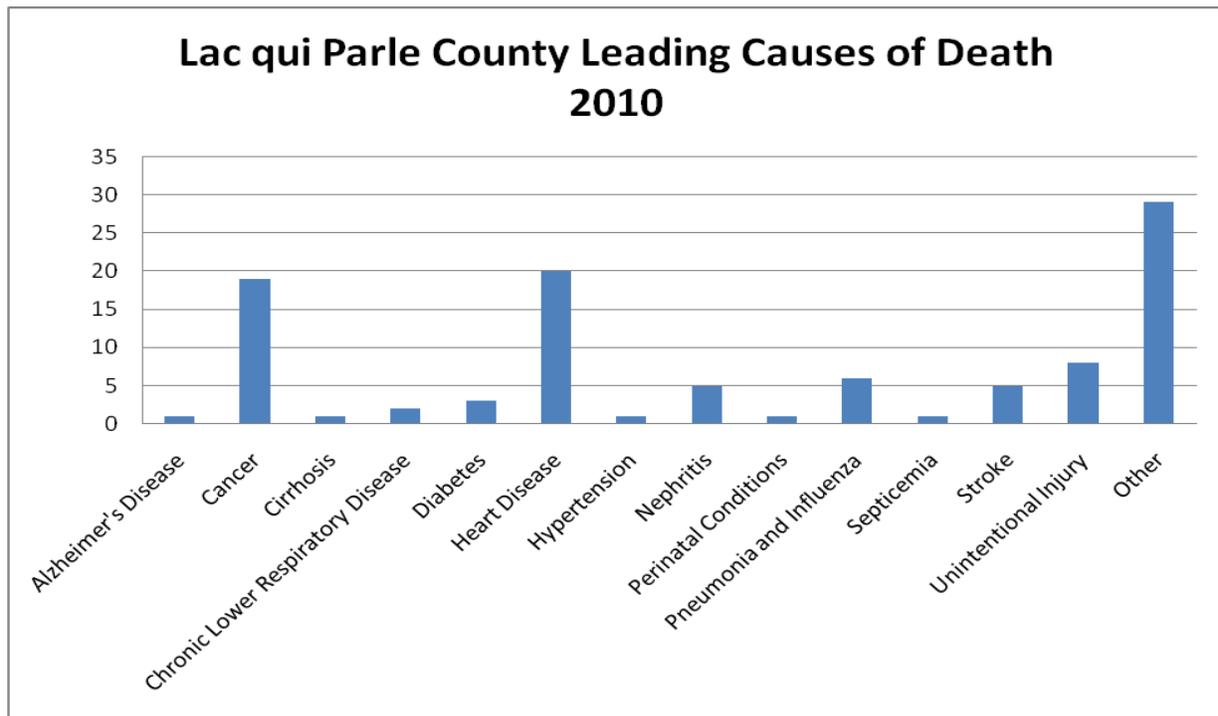
	Lac qui Parle County	Error Margin	Minnesota	National Benchmark*	Rank (of 87)
Preventable hospital stays	82	66-98	51	47	
Diabetic screening	85%	60-100%	88%	90%	
Mammography screening	92%	65-100%	73%	73%	
<b>Social &amp; Economic Factors</b>					9
High school graduation**	93%		77%		
Some college	66%	59-73%	72%	70%	
Unemployment	5.3%		6.4%	5.0%	
Children in poverty	15%	11-19%	15%	14%	
Inadequate social support	10%	4-24%	14%	14%	
Children in single-parent households	20%	15-26%	27%	20%	
Violent crime rate	47		248	66	
<b>Physical Environment</b>					25
Daily fine particulate matter	10.7	10.6-10.8	10.0	8.8	
Drinking water safety	0%		1%	0%	
Access to recreational facilities	14		11	16	
Limited access to healthy foods**	4%		6%	1%	
Fast food restaurants	38%		47%	27%	
* 90th percentile, i.e., only 10% are better. ** Data should not be compared with prior years due to changes in definition. Note: Blank values reflect unreliable or missing data Source: <a href="http://www.countyhealthrankings.org">www.countyhealthrankings.org</a>					2013

## Assessment Tools

The Demographic Analysis provided an informational foundation that led us to dig deeper into statistical assessments of health and disease in Lac qui Parle County. We continued using sources such as the Minnesota Department of Health, Countryside Public Health, and Wilder Research to comprise additional secondary data. We compiled primary data through our community survey and personal interviews with members of the community and health professionals. This assessment would aid in the development and utilization of an implementation strategy to target our health needs.

### **Minnesota Department of Health**

The Minnesota County Health Tables provided by the Minnesota Department of Health, Center for Health Statistics, indicated the leading cause of death in Lac qui Parle County in 2010 was heart disease. Heart disease and stroke combined was responsible for about 24.5% of fatalities, and cancer caused 18.6% of deaths (Minnesota Department of Health, Center for Health Statistics, 2010). In 2011, heart disease remained the leading cause of death followed by cancer and stroke.



Source: Minnesota Department of Health, Center for Health Statistics

The Minnesota Department of Health developed a report entitled the “Health Status of Rural Minnesotans.” Minnesota was broken down into six different regions with Lac qui Parle County being part of the Southwest Region. The Southwest Region is mostly small rural or considered an isolated rural population. The results showed that the Southwest Region has a relatively high rate of diabetes and heart disease mortality. Also, this region has a high percent of population over the age of 65. In this 65+ population, there is high diabetes, pneumonia and influenza, heart disease, and stroke mortality rate. The Southwest Region of Minnesota had the highest rate of stroke mortality among the 65+ age group. The region also experiences high rates of food-borne illness (Minnesota Department of Health, 2011).

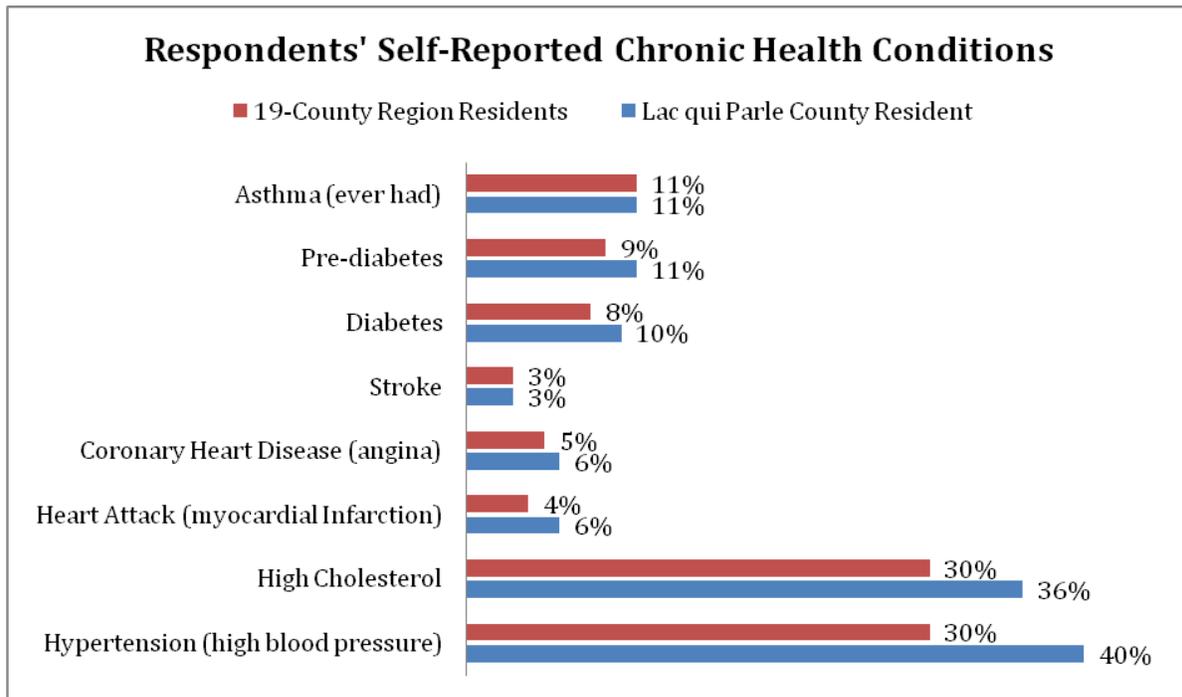
By evaluating these leading causes of death, we can pinpoint the chronic diseases that affect our area. Then we need to assess whether the care, education, and resources our facility provides for patients who suffer these diseases is the best it can possibly be or whether improvements must be made. By determining what services our area lacks and health gaps we are experiencing, our facility can work to modify and add services to better serve the health needs of our communities.

### **Countryside Public Health and Wilder Research**

Countryside Public Health is a local Community Health Service Agency that provides services to five different counties including Lac qui Parle. This organization helped in our assessment process of the county by providing us with additional demographic information as well as attending some of our Community Health Needs Assessment Committee Meetings. Countryside Public Health also developed a 2010 Southwest/South Central Adult Health Survey that they conducted with Wilder Research. The survey covered 19 counties in Southwest and South Central Minnesota; however, for our purposes we just evaluated data from Lac qui Parle County. The purpose of the survey was to learn about the health and health habits of the area by surveying on individual’s nutrition, physical activity, and tobacco use. The survey was given to 1,600 potential participants in Lac qui Parle County with 530 being completed, which resulted in a response rate of 33.1%. Therefore, all data is subject to a sampling error of +/- 4.1%.

Respondents were required to self-report chronic health conditions they had. The results of Lac qui Parle were then compared to the results of the 19-county region residents. Findings from this portion of the survey concluded that residents of Lac qui Parle County were somewhat more likely to have heart disease and related conditions and slightly more likely to have diabetes and pre-diabetes. A graph from the survey is displayed on the following page showing the results of the respondents’ self-reported chronic health conditions.

The survey also revealed that 7 out of 10 residents were overweight with 34% obese. The Body Mass Index was determined using participant’s self-reported height and weight. The level of physical activity revealed that only 36% of residents meet the recommended amount of moderate activity and only 21% meet the recommended level of vigorous activity. In addition, 25% reported that they hadn’t done any physical activity in the past 30 days other than their job. Participants felt that the lack of self-discipline or willpower, lack of time, and the cost of programs is the biggest barrier to attaining physical activity. According to the survey, 58% of residents have never smoked, 17% are current smokers, and 25% are former smokers (Wilder Research, 2010).

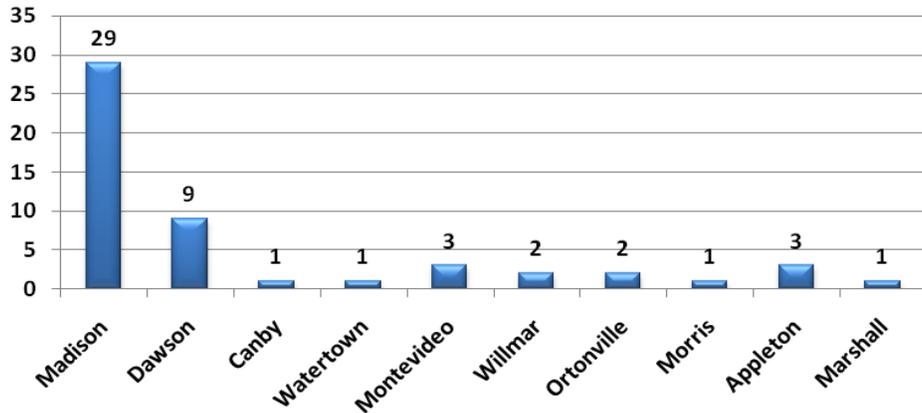


Source: Wilder Research, 2010

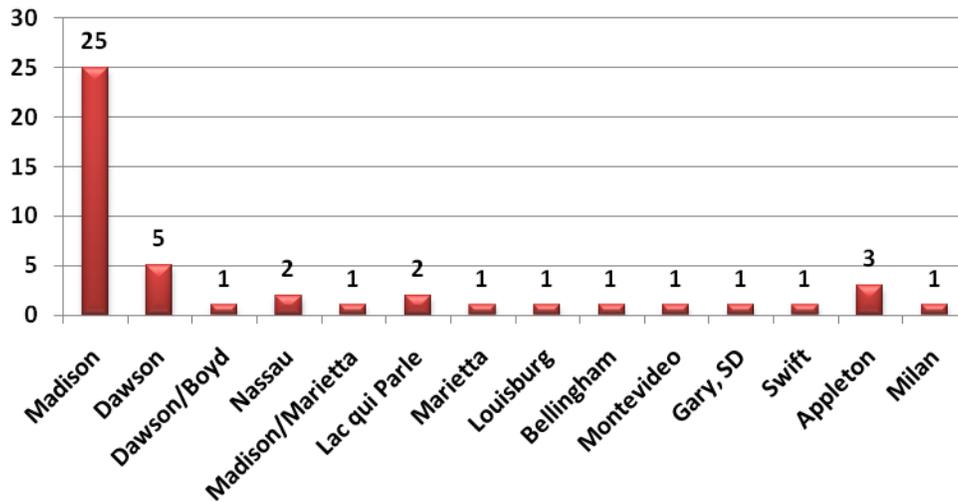
### Community Survey

Once we gathered in-depth secondary data, we decided to use a survey to collect our own primary data. We distributed a community survey during the Lac qui Parle Farm and Home Show at Lac qui Parle High School, where we received 46 completed surveys. The data on the following page summarizes the results of the 46 surveys taken.

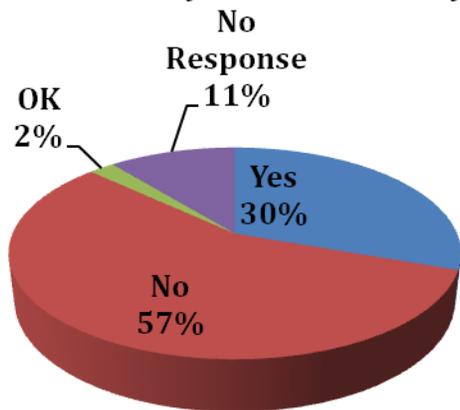
### Where do you and your family go for health care services? (can be more than one)



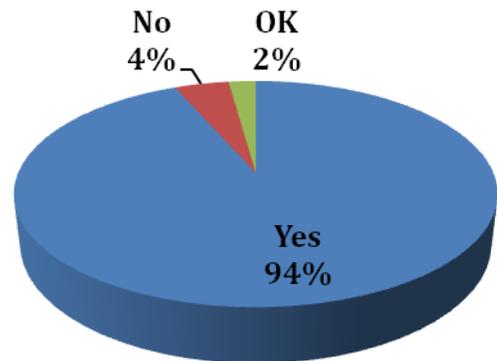
### What community are you from?



### Are there health services you feel are not available in your community?

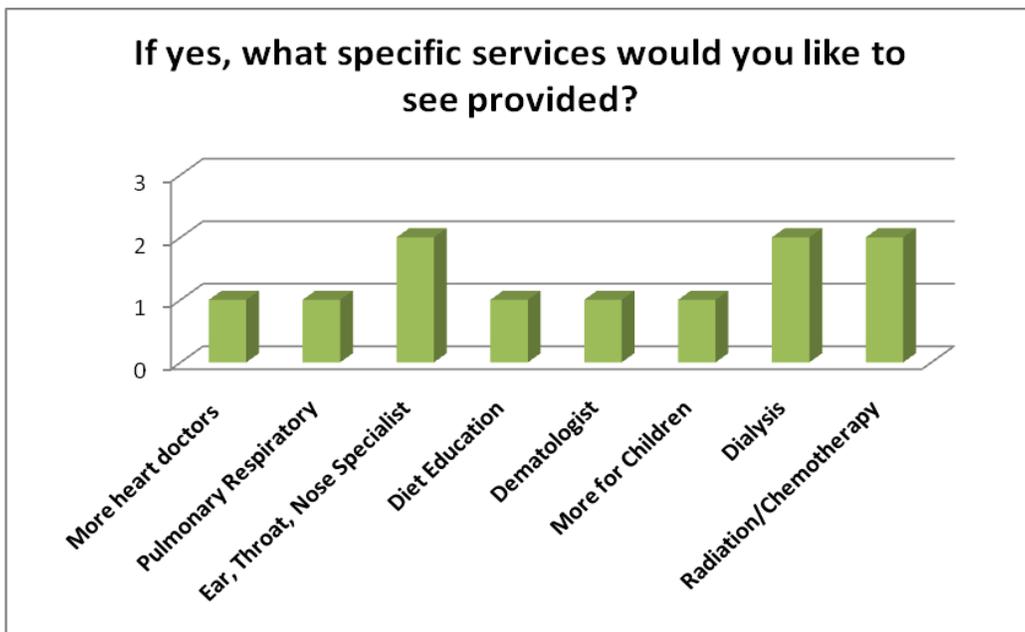


### Are your health services being adequately met in your community?



Around 54.3% of surveyors were from the community of Madison, MN, where Madison Lutheran Home is located. About 63% of surveyors seek health services for themselves and their families in Madison. Of the 46 participants, 94% feel that the health care services they receive are being adequately met in their community; however, 30% of respondents feel that there are health services that are not available in their community.

The survey allowed respondents to write what specific services they would like to see provided in our area. The chart below displays the number of respondents who would like to see certain services added to our area.



## Interviews

After we completed our community survey, we interviewed several people concerning the health needs in our community. We wanted to get an array of input, so we interviewed a provider at our facility, a woman in the community of Madison, and consistently met with a Public Health Nurse.

From these interviews, we determined there was a definite need for those who suffer from chronic diseases. There is a lack of education and outreach for both children and adults when it comes to those with diabetes. Our provider confirmed that we have diabetic issues in our community along with an older population that is strongly affected by both diabetes and cardiovascular disease. Another area of concern that was addressed was mental health and psychological wellness. Programs to aid the uninsured, low-income, and minority groups were also evaluated to ensure that their needs were being met in our community.

## *Identify and Prioritize Health Needs*

By utilizing both the primary and secondary data we researched and analyzed, the Community Health Needs Committee was able to identify and prioritize health needs in our community. Significant data analyzed and developed provided evidence that care in our area was experiencing health gaps when it came to the services we provided for these health conditions. Using reliable sources and key interviews with our community members and professionals, we decided to focus on three key health needs that our community would greatly benefit from. The three health needs identified and prioritized by our committee include:

### **1. Diabetes**

Our committee put Diabetes at the top of the health needs to be addressed. This chronic disease affects all ages, and our area needs to provide increased education and services to better manage diabetes in the community. Statistics support that this is an issue in our area, and we need to increase diabetic screenings and implement programs to educate and provide guidance to those with diabetes. Key interviews also stressed the need for diabetic outreach and the development of resources for this chronic disease.

### **2. Heart Disease/Stroke**

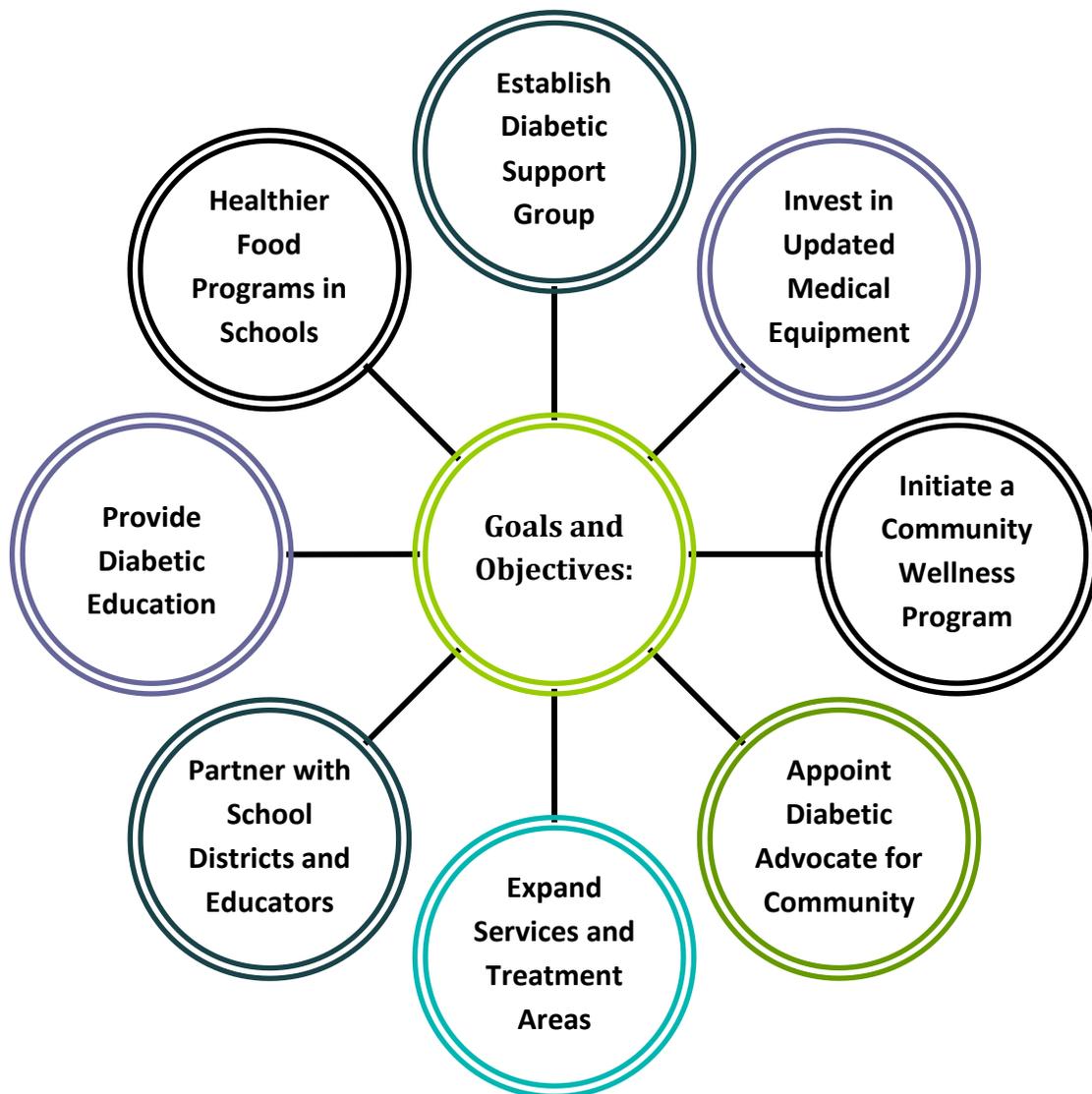
As reported in our statistics, heart disease and stroke combined cause 24.5% of fatalities in our country. Many contributing factors such as obesity, high cholesterol, high blood pressure, and high diabetics were revealed during our secondary data of our assessment. Our community survey supported that they felt our area experienced a need for more cardiologists and care for the heart.

Often, information gaps put a limit on the hospital's ability to assess all of the community needs. In our particular situation, information gaps that may have occurred in our assessment is that our needs may have developed on the basis of opinions from those we interviewed, our Community Health Needs Committee, and those we surveyed. These opinions may not reflect the true needs of the population. In our assessment, we were able to collect sample data of Lac qui Parle County rather than attaining everyone's input. Sample data is titled to bias because the entire population is unable to contribute input. Even though attaining population data would display our needs more accurately, it would be difficult and costly to carry out. Thus, compiling sample data is a realistic approach for our rural hospital, but again it is subject to information gaps.

## *Development of Implementation Plan*

We want to treat each of these chronic diseases as a separate health need since they all will require different measures to be taken to address the issues. The community issues concerning these chronic diseases are the lack of outreach, education and resources, and preventative action. Chronic diseases take a toll on whoever they affect. Low-income and uninsured individuals and families who are affected by chronic disease suffer huge financial burdens. We want to implement programs that help support these people financially, emotionally, and psychologically.

Below is a diagram of all the goals and objectives our committee comprised in order to address our health needs identified.



## 1. Diabetes:

Our community lacks in education on diabetes for all ages. We plan to appoint a diabetic advocate for our community that can help educate and assist diabetics. In addition, we will initiate a diabetic support group for the community. Services such as Direct Access Lab Testing and I-Pro Testing will be offered and promoted to diabetic patients. Community education will be provided through presentations by our staff. Also, we will focus our June 2013 Health Benefit on Diabetes. We will partner with Lac qui Parle Health Network to develop a Community Wellness Program, which our staff will provide free glucose testing. Other actions will be taken to partner with local school districts to offer diabetic training to staff and promote a healthier menu for children as well.

## 2. Heart Disease/Stroke

Our assessment displayed a high rate of heart disease and stroke along with contributing factors such as high blood pressure and obesity in Lac qui Parle County. In order to address these chronic diseases, Madison Lutheran Home plans to take action to promote preventative care. We will implement a Community Wellness Program that will motivate, reward, and educate participants to live a healthier lifestyle. We plan to expand and update our Cardiac Rehab Department in order to better serve our patients.

### Budget to Address Identified Needs

The Community Health Needs Committee devised a budget that was integrated into Madison Hospital's overall budget and strategic plan. The budget for provision of services in our needs assessment will include personnel, program development, and the implementation and monitoring of our plan. Our total budget dedicated to our Community Health Needs Assessment totaled to \$70,000.

<b>Community Health Needs Assessment Budget</b>		
Personnel	Staff time for the development, management, and monitoring.	\$20,000
Program Development, Implementation, and Monitoring	Community Wellness Program, Support Groups, Conducting Research, Direct Access Program, Upgraded Equipment, Lab Testing	\$50,000
<b>Total Budget for Community Health Need Assessment:</b>		<b>\$70,000</b>

## *Execution & Monitoring of Implementation Plan*

### **Community Wellness Program**

The Lac qui Parle Health Network (LqPHN) is a non-profit tax-exempt hospital services cooperative for three local, rural community hospital-based provider organizations including **Madison Lutheran Home**, Johnson Memorial Health Services, and Appleton Area Health Services. The Office of Community Engagement (OCEH) of the Clinical and Translational Science Institute (CTSI) at the University of Minnesota awarded the Rural Community Capacity Enhancement Grant, a total of \$38,000, to the Lac qui Parle Health Network. This grant was used for the Community Wellness Program called Live Well. Be Well.

The purpose of this Community Wellness Program was to improve the wellness of the Madison, Appleton, and Dawson communities. Members of the community would form teams of 4 participants that would participate in weekly challenges in order to accumulate points. These activities were structured to encourage participants to improve their overall health as well as increase camaraderie in our communities. The program ran from April 1, 2013, to June 28, 2013 and allowed participants to take advantage of health and fitness knowledge and resources using a supportive environment. Some of the options to accumulate points included: planting a garden, volunteering, giving blood, doing 90-150 minutes of weekly activities. Weekly tracking sheets were filled out and the top three teams received \$500. The top three individuals also received prizes.

Madison Hospital Laboratory offered glucose testing to all the Live Well. Be Well. participants. Since the glucose testing was a part of the Community Wellness Challenge, Madison Hospital Laboratory was able to diagnose 5 potential diabetic patients out of 80 tested. In addition to the free glucose testing, Madison Hospital Laboratory also provided free cholesterol testing for these 80 participants.

Dawson had a total of 21 participating teams, Madison with 20 participating teams, and Appleton with 7 teams. A total of 175 participants competed in the Community Wellness Program. This community awareness campaign was well received by our local community.

Below are the Community Wellness Program challenges that were offered week by week during the program.

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**Challenge**    **Watch 23 1/2 Hours and Follow Advice**

**#1:**    Watching this YouTube clip is a great reminder of the benefits of exercise. Exercise improves your health and can help you live longer. Making lifestyle changes to increase physical activity can lower your chances of chronic disease like obesity, diabetes, heart disease, hypertension, depression, etc. Physical activity is any type of activity that gets your body moving. According to national guidelines the most important kinds of activities are aerobic exercise and muscle-strengthening activities.

*\*Keep doing this throughout the entire challenge and earn an additional point each week!*

**Challenge**    **Drink 64 ounces of Water Daily.**

**#2:**    Your body is estimated to be about 60 to 70 percent water. Blood is mostly water, and your muscles, lungs, and brain all contain a lot of water. Your body needs water to regulate body temperature and to provide the means for nutrients to travel to all your organs. Water also transports oxygen to your cells, removes waste, and protects your joints and organs.

*\*Keep doing this throughout the entire challenge and earn an additional point each week!*

**Challenge**    **Keep a Food Diary**

**#3:**    US researchers working on a study comparing approaches to weight loss, found that keeping a food diary can double weight loss as part of a managed program; they said that the more food records they kept, the more weight the participants lost. The study was carried out by investigators from Kaiser Permanente's Center for Health Research.

*\*Keep doing this throughout the entire challenge and earn an additional point each week!*

*Check out My Fitness Pal and Spark People for some excellent FREE options.*

**Challenge**    **Eat 5 Fruits & Vegetables each day.**

**#4:**    Eating vegetables provides health benefits — people who eat more fruits and vegetables as part of an overall healthy diet are likely to have a reduced risk of some chronic diseases. Vegetables provide nutrients vital for health and maintenance of your body.

*\*Keep doing this throughout the entire challenge and earn an additional point each week!*

**Challenge**    **Track Your Fiber**

**#5:**    Eat more fiber. You've probably heard it before. But do you know why fiber is so good for your health? Dietary fiber — found mainly in fruits, vegetables, whole grains and legumes — is probably best known for its ability to prevent

or relieve constipation. But fiber can provide other health benefits as well, such as lowering your risk of diabetes and heart disease. Selecting tasty foods that provide fiber isn't difficult. According to the American Heart Association, the average American takes in 15 grams of fiber. The American Dietetic association recommends 25 - 35 grams a day. If your intake is 15 grams or less and you want to increase your fiber intake, increase it gradually. If you jump from 15 to 35 grams a day, it may cause stomach cramping and gas.

**Challenge**    **Turn off the TV & Screen Time**

**#6:**

The statistics are pretty alarming. Television has become the central focus in too many homes. The average American watches four hours of television each day and parents on average spend less than 40 minutes each week in meaningful conversations with their children. Television is a pervasive influence at home. It tends to be the center of entertainment and social interaction. With news, sports, entertainment, educational programming and more, it is often our window to the world. Finding ways to turn off the TV and tune into your family can have important results. Connecting with your children, enhancing your marital relationship and more can be possible as you create positive memories and experiences that don't involve television. This week pick three nights to turn off the TV (including and your screen time on computers and notebooks) and tune into your friends and/or family.

**Challenge**    **Relaxation/Meditation for 15 Minutes Daily**

**#7:**

During the course of this week, you will be challenged to set aside at least 15 minutes out of the day and find a healthy way to relax. The American Psychological Association recent report indicates that nearly 75% of Americans who responded to their survey reported stress levels are so high they feel unhealthy. We are all able to do simple relaxation activities. This week take 15 minutes for yourself and relax, you can listen to music, do a crossword puzzle, read a book or play a game. Whatever you choose make sure it is stress free!

**Challenge**    **The Breakfast Club**

**#8:**

A good way to keep a body fit is to eat a balance of healthy meals throughout the day, including a good meal at breakfast. After a good night's rest, your blood sugar, or glucose levels, are very low since you've been asleep without a meal for 6-10 hours. Your body is basically running on empty in the morning. Skipping breakfast is a common strategy for people who are trying to lose weight, but it's usually not a successful one. Your body (or maybe your brain) expects to be refueled a few times each day, so when you skip meals you may feel so hungry that when lunch time comes, you over-eat or maybe you choose foods that are not the healthiest choices. Breakfast should include protein and plenty of fiber; the combination will help satisfy your hunger and will keep you feeling full until lunch time.

**Challenge**    **Create a Family Budget**

**#9:**    The family budget is nothing more than a tool that benefits the financial future of the entire household. The beauty of making a budget is that it doesn't matter how much money you have you will still benefit from its use. The point is to first find out where your money is going and then once you take back control you can tell it what to do for you and your family. It will be hard at first to stick to your plan but as you work your average family budget it will soon become a necessary habit that you can't live without.

**Challenge**    **Social Wellness**

**#10:**    Social Wellness is very important to our overall health. A person who is socially healthy has the skills to socialize, be confident and function in all situations that involve other people. A person lacking social wellness tends to lack the ability to adjust to social situations. One of the greatest things that you can do for yourself and others is to become a contributing member of your community. This week socialize with a friend, volunteer your services, just get out there and improve your social wellness.

**Challenge**    **Sleep 6-8 Hours per Night**

**#11:**    Sleep has many positive effects on health and well-being, but many people report getting insufficient sleep each night. It's necessary to develop good sleep habits in order to stay healthy and help your body and mind to rest and recharge!

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**Established Education Resources**

One of the biggest challenges in our rural communities was the lack of education provided about diabetes, heart disease, and stroke. There were not many resources people could turn to if they needed guidance with properly dealing with diabetes and other health issues. Madison Lutheran Home appointed one of our staff as an Insulin Pump Trainer and Diabetic Advocate for our community. She works with patients to get their insulin pump set-up correctly with the correct insulin dosing per physician orders. She also has been in contact with Medtronic in order to arrange an informational meeting for all diabetic patients from our community.

We have also established a Diabetes Support Group for the community that meets once each month. Another education resource that we implemented was having one of our providers go live on the local radio station to discuss stroke and cardiovascular disease. He reminded people to get their annual check-ups in order to consistently monitor their blood pressure, cholesterol, and so on. By using the radio, we also allowed people to call in with questions they wanted to ask our providers.

## **Direct Lab Access Program**

Madison Hospital Lab Department has implemented a Direct Access Lab Program that allows a person to order and receive lab work without a physician's order and on cash basis. This program is beneficial to those with a high deductible or no insurance at all. A number of diabetic patients have utilized this program. We are also noticing that these patients are following up on their diabetic care more thoroughly due to the availability of this program.

## **Programs for Uninsured, Low-Income, and Minority Groups**

In order to address the uninsured, low-income, and minority groups, by law our hospital cannot refuse to see anyone regardless of their ability to pay. Also, the Direct Access Program discussed previously is another source for those who are uninsured and want lab work performed at a lower cost.

We also refer our patients to Lac qui Parle County Family Service Center in order to assist them in attaining the financial support and services they need. Through the Pre-paid Medical Assistance (MA) they offer, clients are enrolled with health plans that provide a network of approved vendors. Each client is assigned a primary clinic, which can refer them to other providers and specialty services if needed. This program also assists with transportation through UCare Health Rides or Blue Plus Blue Ride systems for clients that need it. They also contract with Prairie Five RIDES, which is covered by the state MA program. Expenses of meals and lodging for medical appointments are approved through the county financial workers. These types of programs are also in place for children.

In addition, we practice a Charity Care Policy at Madison Hospital for patients who have demonstrated the inability to pay. Patients who meet the criteria for charity care will be eligible for a discount for all or part of a bill that a patient is normally expected to pay. We have funds available to provide financial assistance to qualifying patients to relieve them of their financial obligation in whole or part for health care services we provide. An inability to pay may be identified at any time. Various discounts will be applied to the patient's bill based on the poverty guidelines they are in. It is the policy of Madison Hospital/Lac qui Parle Clinic, consistent with our mission and values, to provide services to all persons, regardless of age, sex, race, religion, origin, or ability to pay.

## **Contract with Lac qui Parle School Districts**

Madison Hospital Laboratory has contracted with the Lac qui Parle School Districts (LqPV) to provide health screenings to their employees once a year. A portion of the health screening includes glucose testing, which can aid in the detection of diabetes, and a lipid

profile. This year 50 Lac qui Parle Valley employees, roughly 75%, participated in the health screening performed by Madison Hospital Laboratory Staff. We also worked with the local school districts and a dietician to modify school menus to make them healthier.

### **Diabetic Presentation for Community**

An on-staff RN hosted a diabetic presentation for the public at Madison Lutheran Home. Using a PowerPoint presentation, she provided education on what diabetes and pre-diabetes is, how they can be prevented, and how they can be treated. She informed attendees the importance of nutrition and regular exercise. A lot of diabetic patients need to be educated on the types of foods they need to eat and the balance of sugars, salts, and fats. There were 17 attendees at this particular presentation, and she will continue to provide the public with educational seminars on diabetic prevention and management.

### **Health Benefit Focused on Diabetes and Healthy Living**

Each year, Madison Lutheran Home partners with Madison Healthcare Auxiliary to host a Health Benefit at the Madison Country Club. This year, the benefit focused on the treatment and care of diabetes as well as healthy eating using portion sizing. Home Medical Equipment out of Madison displayed diabetic shoes and socks to further educate individuals on caring for their diabetes. Thrifty White Pharmacy of Madison gave blood pressure tests. Countryside Public Health displayed a booth on healthy eating and the benefits of portion sizing. Direct Access Lab was also available for testing to the public during this benefit at discount rates. Thirteen vendors were at the event to educate the public on diabetes and living a healthier lifestyle.

### **Upgraded Equipment, Services, and Expanded Space**

Madison Hospital Laboratory implemented I-pro testing in our facility. The lab staff was trained on how to apply the sensors. An I-Pro is a continuous glucose monitor that helps a person's healthcare provider fine-tune a patient's diabetes treatment. These therapy adjustments have been shown to reduce a patient's A1C level and in return, reduce the risk of eye, kidney, nerve, and heart complications. The I-Pro captures glucose levels continuously 24 hours a day. It records while a patient works, sleeps, or even exercises. After 5-7 days of continuous readings, the patient presents the device back to our lab so that the sensor can be removed. A detailed report is then given to the patient's healthcare provider in order to allow proper adjustments to be made in the patient's diabetic therapy.

Madison Hospital Laboratory also has acquired two new chemistry analyzers. The Beckman AU480 helps diagnose and treat diseases such as diabetes. The new coagulation analyzer called IL TOP 300 is used to perform a variety of coagulation testing including

tests that check for bleeding problems, effectiveness of blood-thinning medications such as Coumadin, and can diagnose conditions related to thrombosis as well as strokes. New lab equipment helps us address chronic diseases in our area.

Our Cardiac Rehab Department is also currently undergoing construction in order to relocate and expand the area. We have also recently partnered with the Madison Healthcare Auxiliary to purchase a new treadmill that will help serve our patients.

## **Conclusion**

**The Community Health Needs Committee will diligently monitor our current programs to ensure they are meeting our identified community needs. The execution of our implementation plan has experienced many successes and continues to progress. Our focus will be to strengthen and grow our collaborations with other organizations to better our education, outreach, and resources for the communities we serve.**

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