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Executive Summary

**Enterprise Overview:**

Mayo Clinic is a not-for-profit, worldwide leader in patient care, research and education. Each year Mayo Clinic serves more than 1 million patients from communities throughout the world, offering a full spectrum of care from health information, preventive and primary care to the most complex medical care possible. Mayo Clinic provides these services through many campuses and facilities, including 24 hospitals located in communities throughout the United States, including Arizona, Florida, Georgia, Minnesota, Wisconsin and Iowa.

A significant benefit that Mayo Clinic provides to all communities, local to global, is its education and research endeavors. Mayo Clinic reinvests its net operating income funds to advance breakthroughs in treatments and cures for all types of human disease, and to bring this new knowledge to patient care quickly. Through its expertise and mission in integrated, multidisciplinary medicine and academic activities, Mayo Clinic is uniquely positioned to advance medicine and bring discovery to practice more efficiently and effectively. In addition, through its Centers for the Science of Health Care Delivery and Population Health Management, Mayo Clinic explores and advances affordable, effective health care models to improve quality, efficiency and accessibility in health care delivery to people everywhere.

**Entity Overview:**

Mayo Clinic Health System in Mankato is a 272-bed, acute-care hospital, as well as family medicine clinics in Mankato (Northridge and Eastridge campuses), Lake Crystal, St. Peter and Le Sueur.

Mankato is one of 17 hospitals within Mayo Clinic Health System (MCHS) and is part of its Southwest Minnesota region, which includes hospitals in Fairmont, Mankato, New Prague, Springfield, St. James and Waseca.

Mayo Clinic Health System in Mankato supports the community through inpatient and outpatient services and offers:

- Inpatient services in emergency medicine, labor and delivery, multi-specialty and general surgery
- Medical care with hospital-based programming, including Family Birthing Center, Regional Joint Center, Andreas Cancer Center, bariatric surgery, dialysis, hospice, hospital medicine, internal medicine, pulmonary medicine, medical oncology, medical transportation, neurology, neurosurgery, general surgery, obstetrics/gynecology, orthopedic surgery, palliative care, pediatrics and adolescent medicine, sleep medicine and women’s health
- Outpatient services in allergy treatment, anticoagulation follow-up, asthma and immunology, audiology, behavioral health, cardiac rehabilitation, pediatric and adolescent medicine, diabetes education, dialysis, digestive care, ear/nose/throat, emergency medicine, hospice
home care, family medicine, imaging, infectious diseases, infusion therapy, internal medicine, laboratory testing, pulmonary rehabilitation, medical supply store, neurology, obstetrics shared-care program, occupational health, rehabilitation therapies, radiation oncology, skin care, speech pathology, urology, weight management, women’s health and wound-ostomy

Mayo Clinic Health System is a family of clinics, hospitals and health care facilities serving more than 70 communities in Iowa, Georgia, Wisconsin and Minnesota. It encompasses more than 900 providers and serves more than half a million patients each year. As part of Mayo Clinic — a leading caregiver with nearly 150 years of patient care, research and medical education expertise — the organization provides a full spectrum of health care options to communities ranging from primary to highly specialized care. Mayo Clinic Health System is recognized as one of the most successful regional health care systems in the United States.

Through the power of collaboration, Mayo Clinic Health System provides patients with access to cutting-edge research, technology and resources that comes from Mayo Clinic. Our communities have the peace of mind that their neighbors are working together around the clock on their behalf.

Mayo Clinic Health System was developed to bring a new kind of health care to communities. By putting together integrated teams of local doctors and medical experts, we've opened the door to information sharing in a way that allows us to keep our family, friends and neighbors healthier than ever before.

Mayo Clinic's greatest strength is translating idealism into action. It's what our staff does every day for our patients, and it’s how we transform hope into healing. We call this power "the Mayo Effect."

**Summary of Community Health Needs Assessment:**

For this Community Health Needs Assessment (CHNA), Mayo Clinic Health System in Mankato partnered with local community leaders to engage with all available stakeholder groups in the community and review publicly available health-related data. The results of the assessment are being used to guide Mayo Clinic Health System in Mankato’s strategies and partnerships to maximize community health and wellness, patient care and population health management.

Mayo Clinic Health System is committed to studying and responding to health needs in the Mankato area through a community-wide approach. The Mankato CHNA project aims to leverage and strengthen existing relationships among health care providers, community services agencies, organizations and volunteers in new ways to understand and respond to local health needs, as well as invite renewed awareness and engagement with the community at large.

The Mankato CHNA process identified and prioritized the following health needs for the Mankato area:

1. Chronic disease
2. Health promotion and disease prevention
The Mayo Clinic Health System in Mankato CHNA process was led by an internal Mayo Clinic Health System committee comprised of representatives from hospital leadership, public affairs, compliance and fiscal services.

This committee viewed the community health needs assessment as an opportunity to better understand known health care needs and, if possible, identify emerging needs within each of the six Mayo Clinic Health System communities in the Southwest Minnesota region — Fairmont, Mankato, New Prague, Springfield, St. James and Waseca.

The committee also viewed this as an opportunity to begin assessing key elements of community receptivity to changes in care delivery, in particular the Mayo Clinic Health System objectives related to future care delivery, which are outlined by the Institute for Healthcare Improvement (IHI) Triple Aim Goal of:

1. Improving the patient experience of care, including quality and satisfaction
2. Improving the health of populations
3. Reducing the per capita cost of health care
Our Community

Overview:

Mayo Clinic Health System in Mankato primarily serves communities in Blue Earth, Le Sueur and Nicollet counties in southern Minnesota. The main medical campus is in Mankato, located in Blue Earth County, and is designated as a sole community hospital and rural referral center for Medicare purposes. Mayo Clinic Health System in Mankato is the only hospital in Blue Earth County.

Description

According to the 2010 U.S. Census:

Population

- Mankato: 39,309
- North Mankato: 13,369
- Blue Earth County: 65,091. Increased by 1.7 percent from 2010 to 2012.
- Le Sueur County: 27,677. Decreased by 0.1 percent during that period.
- Nicollet County: 32,929. Increased by 0.6 percent during that period.

Minnesota’s population increased by 1.4 percent from 2010 to 2012.

Age

Population over age 65:

- Blue Earth County: 12.2 percent
- Le Sueur County: 15.4 percent
- Nicollet County: 13 percent
• Minnesota: 13.6 percent

Gender
Ratio of males and females:
• Blue Earth County: 50.2/49.8
• Le Sueur County: 50.4/49.6
• Nicollet County: 49.8/50.2
• Minnesota: 49.7/50.3

Racial Demographics
According to the U.S. Census Bureau:
• Blue Earth County: 92.8 percent Caucasian, 3.1 percent African-American, 0.3 percent American Indian or Alaska Native, 2.3 percent Asian and 1.5 percent Other
• Le Sueur County: 97.5 percent Caucasian, 0.5 percent African-American, 0.4 percent American Indian or Alaska Native, 0.6 percent Asian and one percent Other
• Nicollet County: 94.6 percent Caucasian, 2.2 percent African-American, 0.4 percent American Indian or Alaska Native, 1.4 percent Asian and 1.4 percent Other
• Minnesota: 86.5 percent Caucasian, 5.5 percent African-American, 1.3 percent American Indian or Alaska Native, 4.4 percent Asian and 2.3 percent Other

Ethnicity, which is measured separately from race, showed that 2.8 percent of the population in Blue Earth County, 5.5 percent in Le Sueur County and 3.9 percent in Nicollet County identified themselves as Hispanic or Latino.

Economic conditions
According to County Health Rankings:

Single-parent households
Percentage of children living in a single-parent household:
• Blue Earth County: 24 percent
• Le Sueur County: 26 percent
• Nicollet County: 28 percent
• Minnesota: 27 percent

Access to healthy foods
Percentage of low-income families with limited access to healthy foods:
• Blue Earth County: 16 percent
• Le Sueur County: 1 percent
• Nicollet County: 8 percent
• Minnesota: 6 percent
Employment
Unemployment rate:
- Blue Earth County: 5.3 percent
- Le Sueur County: 8.2 percent
- Nicollet County: 5.1 percent
- Minnesota: 6.4 percent

Educational attainment
High-school graduation rates:
- Blue Earth County: 82 percent
- Le Sueur County: 82 percent
- Nicollet County: 83 percent
- Minnesota: 77 percent

Income
According to the U.S. Census Bureau, the median household income was:
- Blue Earth County: $44,911
- Le Sueur County: $58,047
- Nicollet County: $59,877
- Minnesota: $58,476

Poverty
According to the U.S. Department of Agriculture, the percentage of people living in poverty was:
- Blue Earth County: 18.3 percent
- Le Sueur County: 9 percent
- Nicollet County: 10.3 percent
- Minnesota: 11.8 percent

The percentage of children under 18 living in poverty was:
- Blue Earth County: 17.3 percent
- Le Sueur County: 11.2 percent
- Nicollet County: 12 percent
- Minnesota: 15.3 percent

Health behaviors

According to County Health Rankings:

Adult Smoking
The percentage of adults who smoke was:
- Blue Earth County: 18 percent
- Le Sueur County: 14 percent
- Nicollet County: 6 percent
Obesity
The percentage of adults who are obese was:
- Blue Earth County: 27 percent
- Le Sueur County: 30 percent
- Nicollet County: 28 percent
- Minnesota: 26 percent

Physical activity
The percentage of residents reporting doing “no physical activity” was:
- Blue Earth County: 25 percent
- Le Sueur County: 22 percent
- Nicollet County: 17 percent
- Minnesota: 19 percent

Clinical care
According to County Health Rankings:

Health insurance coverage
Those under 65 who have no health insurance:
- Blue Earth County: 11 percent
- Le Sueur County: 11 percent
- Nicollet County: 8 percent
- Minnesota: 10 percent

Primary-care physicians
Number of people per primary-care physician:
- Blue Earth County: 1,144
- Le Sueur County: 4,616
- Nicollet County: 1,364
- Minnesota: 1,140

Dentists
Number of people per dentist:
- Blue Earth County: 1,459
- Le Sueur County: 3,496
- Nicollet County: 1,970
- Minnesota: 1,660

Diabetic screening
The percentage of diabetics screened in the past year:
• Blue Earth County: 48 percent
• Le Sueur County: 77 percent
• Nicollet County: 56 percent
• Minnesota: 88 percent

**Other Available Resources:**

Within the service area of Mayo Clinic Health System in Mankato, there are other resources available to meet the identified community health needs.

**Other health care-related organizations**

**Chiropractic**
- Chiropractic Family Clinic, PA – Lake Crystal
- Lovett Chiropractic – Madelia
- Madelia Chiropractic Office – Madelia
- Anderson Family Chiropractic - Mankato
- Andrew Family Chiropractic - Mankato
- Barnett Chiropractic & Acupuncture Clinic - Mankato
- Chrysalis Chiropractic LLC – Mankato
- Hoyt Chiropractic – Mankato
- Mortenson Chiropractic & Wellness - Mankato
- River Ridge Chiropractic - Mankato
- Saggau Chiropractic, Ltd. - Mankato
- Sister Rosalind Gefre Massage and Wellness Centers – Mankato
- Skrien Chiropractic Clinic - Mankato
- Thiele Chiropractic Office - Mankato
- Village East Chiropractic Center - Mankato
- Petron Family Chiropractic – New Ulm
- Verschaetse Chiropractic Clinic – New Ulm
- Guse Chiropractic Office – New Ulm
- New Ulm Chiropractic – New Ulm
- Advanced Chiropractic of Mankato – North Mankato
- Back to Wellness Chiropractic of Mankato – North Mankato
- Charles T. Uhler, DC – St. Peter
- Hulsebus Chiropractic – St. Peter
- Rising Sun Chiropractic – St. Peter
- St. Peter Chiropractic & Acupuncture – St. Peter
- Steven J. Moore, DC – St. Peter

**Dental**
- Apple Tree Dental - Madelia
- Advanced Dental Solutions - Mankato
- Associates in Oral & Maxillofacial Surgery - Mankato
Broad Street Family Dental - Mankato  
Commerce Drive Dental - Mankato  
Douglas Vose, DDS – Mankato  
James Kalina, DDS - Mankato  
Madison Avenue Dental - Mankato  
Midwest Dental - Mankato  
Minnesota State University Dental Clinic - Mankato  
North Mankato Family Dentistry - Mankato  
Oz Family Dentistry - Mankato  
Peter C. Roth, DDS - Mankato  
River City Dental Care, Inc. - Mankato  
River Valley Dental of Mankato - Mankato  
Southeastern Oral & Maxillofacial Surgery - Mankato  
Anderson Orthodontics – St. Peter  
Snyder, Mary, DDS – St. Peter  
St. Peter Family Dental – St. Peter  
Valley View Dental – St. Peter  

**Fitness/exercise/wellness**  
Snap Fitness – Le Center  
Snap Fitness – Le Sueur  
Anytime Fitness Gyms - Madelia  
Anytime Fitness Gyms - Mankato  
Body Beautiful Weight Loss Spa - Mankato  
Build n Tone Fitness - Mankato  
Curves - Mankato  
Inspired Aging–Integrative Therapies - Mankato  
Sun Moon Yoga - Mankato  
YMCA - Mankato  
Broadway Chiropractic – New Ulm  
Snap Fitness – New Ulm  
Snap Fitness – North Mankato  
Anytime Fitness Gyms – St. Peter  
Cornerstone Wellness Center – St. Peter  
The Pulse Fitness – St. Peter  

**Food shelf**  
Le Sueur Emergency Food Shelf – Le Sueur  
Le Sueur Food Shelf – Le Sueur  
Madelia Emergency Food Shelf - Madelia  
New Ulm Area Emergency Food Shelf – New Ulm  
New Ulm Area Food Emergency Distributors – New Ulm  
SHEAF–Sleepy Eye Area Food Shelf – Sleepy Eye
Free/reduced clinic
Open Door Health Care Center (medical/dental)
Sage Screening Program–MCHS and others

Free/reduced clinic
Open Door Health Care Center (medical/dental) - Mankato
Sage Screening Program–MCHS and others – Various locations

Hospital/clinic
River's Edge Hospital–Le Center Clinic – Le Center
Minnesota Valley Health Center, Inc. (Essentia Health) - LeSueur
Madelia Community Hospital and Clinics - Madelia
New Ulm Medical Center (Allina Health) – New Ulm
Sleepy Eye Medical Center – Sleepy Eye
River's Edge Hospital – St. Peter

Long-term care/memory care/senior care
Autumn Grace - Mankato
Cedar Haven - Mankato
Mankato House Healthcare Center - Mankato
Oak Terrace - Mankato
Oaklawn Health Care Center - Mankato
Pathstone Living - Mankato
The Thro Company - Mankato
Mapleton Community Home - Mapleton
Good Samaritan Society – St. Peter

Medical Clinic
Mankato Clinic–Lake Crystal Family Practice – Lake Crystal
Mankato Anesthesia Associates, Ltd - Mankato
Mankato Clinic–Express - Mankato
Mankato Clinic–J. Scott Sanders Center for Sleep Medicine - Mankato
Mankato Clinic at Adams Street (Urgent Care and Occupational Medicine) - Mankato
Mankato Clinic at Madison East - Mankato
Mankato Clinic at Main Street - Mankato
Mankato Clinic at Wickersham - Mankato
Ophthalmology Associates - Mankato
Orthopaedic & Fracture Clinic - Mankato
Mankato Clinic at Mapleton - Mapleton
Mankato Clinic–North Mankato Family Practice – North Mankato
Mankato Clinic–Daniels Health Center – St. Peter

Outpatient physical therapy
Orthopaedic & Fracture Clinic Physical Therapy/Sports Medicine Center - Mankato
Assessing the Needs of the Community

Overview:

Mayo Clinic Health System in Mankato identified and prioritized community health needs through a comprehensive process that included input from local community and organization leaders, public health officials, hospital leadership and other community stakeholders.

Community Input:

Mayo Clinic Health System in Mankato partnered with the City of Mankato, Blue Earth Sheriff’s Department, Blue Earth County Health Department, Mankato School District 77, United Way of Greater Mankato, Mankato Diversity Council and local faith communities.

Representatives of the community were essential in driving the identification and prioritization of community health needs. They represented a broad range of the community including children, adults, seniors, families and underserved populations. These representatives were asked to meet in order to share information and discuss community health need perceptions.

Public Health Input:

Blue Earth’s Community Health department provided valuable information regarding community health needs and a unique perspective for underserved populations. This agency represents all residents of Blue Earth County and has several services and programs for low- to moderate-income residents and other underserved populations.

Interviews and surveys specific to underserved residents

Additional interviews and a survey were conducted by Mayo Clinic Health System in September and October 2013 with community leaders representing underserved residents. The purpose was to research community health needs for underserved residents.

Survey questions included:

1. What specific groups of people or demographic does your organization serve?
2. Based on your experience, what are the top three quality of life concerns for those whom you serve?
3. In your opinion, what are the top three health concerns of those whom you serve?
4. In your opinion, what could our community do to improve concerns you identified in #2 and #3?
5. In your opinion, what barriers exist in our community that prevents those whom you serve from being as healthy as they could be?
<table>
<thead>
<tr>
<th>When</th>
<th>Who</th>
<th>People or Demographic Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/20/2013</td>
<td>Sarah Kruse</td>
<td>Low income, medically underserved, no insurance minority populations, south-central Minnesota with mobile locations in Marshall, Gaylord, and Dodge Center</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Bukata Hayes</td>
<td>Domestic minorities (Latinos, black), also Somali, Sudanese, and Mexican immigrants, and minorities with physical disabilities</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Kelly Haeder</td>
<td>Low-income adult and children's mental health, child support, supportive housing, day care assistance, disability services, adult and child protection and licensing</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Jay Dahlvang</td>
<td>Christian church serving both elderly and younger congregants. All economic classes represented with upper-middle class well represented. Primarily white and well educated. Approximately 500 families and 1,400 congregants, total.</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Tanya Ange</td>
<td>All residents and commercial and private nonprofit organizations within the city and those visiting, includes a significant daytime spike in city population.</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Patrick Patterson</td>
<td>Christian church serving all ages and background. All economic classes represented. Primarily white Middle-class with active community outreach. Over 500 congregants.</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Jan Derksen, RN</td>
<td>Elementary through high school students who are served by non-public schools. Typically faith-based students and parents representing all socio-economic levels. Services also provided in mental health. Focus is on education and how to assist students dealing with a physical or mental issue to be academically successful. Includes early childhood</td>
</tr>
</tbody>
</table>
Volunteer caregiving organization supporting adults in mid-life and beyond, including low-wage workers. Programs include: Hot Meals on Wheels, Health Care Transitions, Transportation, People to Jobs, Chores and Modifications, Medical Equipment Closet, Caregiver Consultant, Social Model Respite and In-Home Volunteer Respite.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name</th>
<th>Position/Role</th>
<th>Organization/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/18/2012</td>
<td>Pam Determan</td>
<td>Executive director VINE</td>
<td>Volunteer caregiving organization</td>
</tr>
<tr>
<td>9/25/2013</td>
<td>Mary O’Sullivan</td>
<td>Program director VINE</td>
<td>VINE workers</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Rich Murray</td>
<td>Blue Earth Sheriff's Department</td>
<td>All residents and organization in Blue Earth County</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Andrew Reeves</td>
<td>Physician Mayo Clinic Health System</td>
<td>Medical community</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Al Lawrence</td>
<td>Principal Mankato Public Schools</td>
<td>School-aged children and their families</td>
</tr>
<tr>
<td>12/18/2012</td>
<td>Laura Bowman</td>
<td>Executive director Greater Mankato United Way</td>
<td>All people in the greater Mankato area, low-income residents, young children, at-risk youth, adults, seniors and local nonprofit agencies</td>
</tr>
</tbody>
</table>

**Process and Methods:**

In 2012, Mayo Clinic Health System started planning for the CHNA. Plans were developed to facilitate stakeholder engagement, conduct and assemble research, and prioritize health needs.

The processes and methods used to conduct the CHNA involved working with community representatives and conducting primary and secondary data/research.

The community representatives met to discuss the reason and objectives of the community health needs assessment. At the meetings, the hospital service area was defined by counties; local data and trends were shared by the county public health representative and hospital administrator; county, state and federal data were reviewed; and time was allotted for questions and answers.

**Secondary data/research**

Secondary research consisted of gathering publicly available health-related data for the hospital’s service area. Whenever possible, data was collected at the county level. Sub-county level data was not a focus of this research, but is provided, if available. This data was used to help determine and prioritize community health needs. Secondary data/research was accessed between June 2012 and October 2013.
Publicly available data included:

1. Socio-economic
2. Poverty rates
3. Health behaviors
4. Clinical care
5. Demographics
6. Obesity rates
7. Insurance coverage

Data used in the community health needs assessment includes:

Centers for Disease Control – Obesity Prevalence

County Health Rankings
countyhealthrankings.org, accessed 8/30/2013

Demographic Trends and Social Service Landscape
demography.state.mn.us/documents/SusanBrower_MSSA.pdf

Minnesota Community Measurement on Chronic Disease Management. rwjf.org/content/dam/web-assets/2008/06/mn-community-measurement--mncm-

Minnesota Hospital Association: Readmissions and Safe Transitions of Care

MRCI survey data
Conducted in September and October 2013

Population and Household Counts from the 2010 Census – Prepared by the Minnesota State Demographic Center
demography.state.mn.us/CityProfiles2010/cty015yr2010.pdf

State of Minnesota: State Demographers Office
demography.state.mn.us/index.html

U.S. Census 2010 Population Finder
census.gov/popfinder/?fl=27:2761816:27015:27033:27127

U.S. Census Bureau
quickfacts.census.gov, accessed 8/30/2013

U.S. Department of Agriculture: Economic Research Service
Information gaps

Some gaps in the information may lead to an incomplete assessment of community health needs. Gaps identified in this process include:

1. Total cost of care for our population served
2. Detailed data on all culturally diverse populations served, since much publicly available data is collated into general population information
3. Market use data for outpatient services

Analytical methods

Mayo Clinic Health System compiled and analyzed data from publicly available data and from meetings, interviews and surveys involving community representatives.

Third-party assistance

No third parties were contracted with or used to assist in conducting the community health needs assessment.
Addressing the Needs of the Community

Overview:

After reviewing and analyzing primary and secondary data collected from the community, Mayo Clinic Health System prioritized the community’s health needs.

Prioritization process

During the December 18, 2012, meeting with community representatives, data was shared and analyzed. Three questions were asked of the community representatives:

1. What can be done to improve the health and quality of life in our community?
2. What non-traditional methods (technology, team-based care, etc.) can we implement to improve access to health care in our community?
3. As health care premiums, co-pays, and deductibles rise, what health and wellness strategies or programs should we offer to keep our community healthy?

After the community representatives identified community health needs, the following question drove the prioritization process.

1. Of the community health needs identified, which would provide the greatest benefit to our community?

Mayo Clinic Health System then reviewed all of the available data and community input in order to prioritize the community’s health needs.

Prioritized Community Health Needs:

1. Chronic disease
2. Health promotion and disease prevention