

Implementation Plan December 2015



A comprehensive, six-step community health needs assessment ("CHNA") was conducted for HealthPartners and its hospitals (Regions Hospital, Lakeview Hospital, Hudson Hospital & Clinic, Westfields Hospital & Clinic, Amery Hospital & Clinic, and Park Nicollet Methodist Hospital) by Community Hospital Consulting. This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in Dakota, Hennepin, Ramsey, Scott, and Washington Counties in Minnesota and Polk and St. Croix Counties in Wisconsin. Amery Hospital & Clinic's specific study area is defined as Polk County, but health data for the remaining counties are used for comparison in this CHNA.

The CHNA Team, consisting of leadership from HealthPartners and its hospitals, met with staff from Community Hospital Consulting on August 24, 2015 to review the research findings and prioritize the community health needs. Four significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a roundtable discussion to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and the hospital's capacity to address the need. Once this prioritization process was complete, the health system and hospital leadership discussed the results and decided to address all of the prioritized needs in various capacities through hospital specific implementation plans.

HealthPartners and hospital leadership developed the following principle to guide this work: **Through collaboration, engagement and** partnership with our communities we will address the following priorities with a specific focus on health equity in special populations.

The final list of prioritized needs, in descending order, is listed below:

- 1. Mental and Behavioral Health
- 2. Access and Affordability
- 3. Chronic Disease and Illness Prevention
- 4. Equitable Care

Priority #1: Mental and Behavioral Health

- The ratio of the population to mental health providers in Polk County is markedly higher than the state (15:1, compared to 8:1), suggesting that mental health providers are relatively scarce in Polk County, compared to the state as a whole.
- The Healthiest Wisconsin 2020: Everyone Living Better, Longer Health Focus Areas include mental health and unhealthy alcohol and drug use.
- On the Community Health Survey, 16% of respondents said they have been diagnosed with depression or a mental health disorder.
- Self-harm is the second leading cause of hospitalization in Polk County.
- The suicide rate in Polk County is nearly twice the state's rate (23 vs. 13 per 100,000).
- Approximately 15% of Polk County youth reported that they seriously considered committing suicide in the past year, which is higher than Wisconsin's rate at 13%.
- Between 2007 and 2009, 17 children were hospitalized in Polk County for self-harm.
- Of the 4% of respondents on the Community Health Survey who reported they have considered suicide, 22% reported that they are doing "nothing" to address these concerns.
- Illegal drug use (particularly prescription drugs, heroin and meth) is gaining the attention of local law enforcement, the judicial system and school officials. The Polk County Sheriff's Department convened a group of key stakeholders around the drug abuse issue and it is likely that communities will work together to impact this problem in Polk County throughout the next 3 years.
- The prevalence of excessive drinking in Polk County (23%) and Wisconsin (24%) far exceeds the national goal of 8%. Approximately 24% of boys and 16% of girls in Polk County report having had their first drink of alcohol before age 13.
- On the Community Health Survey, approximately 30% of respondents reported binge drinking in the past month.
- Motor vehicle crashes are the leading cause of death in Polk County, with a rate more than twice the state's rate. Alcohol is involved in three times as many fatal car crashes than in the state overall.
- Participants in the community conversation conducted by Amery Hospital & Clinic identified access to mental health services as a significant concern in Polk County. It was mentioned that services are limited in Polk County, including inpatient, outpatient and crisis services. It was also mentioned that many people do not want to seek treatment because there is a stigma associated with having a mental health condition. Participants in the community conversation conducted by Amery Hospital & Clinic also identified alcohol and chemical abuse as significant concerns in Polk County. It was noted that there are limited drug and alcohol treatment services and children can be some of those that are most at risk.

Priority #1: Mental and Behavioral Health

		H	lospital Role(s	5)		Estir	nated `	Y ear	ı	Progres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Reduce stigma surrounding mental illnesses	Implement Make It OK anti-stigma campaign	Community Health	х		HealthPartners Valley Hospitals, Public Health, Make it OK, and Community Partners		Ongoing		2010	2017	2010	, pp. 0p. 12.0.,
	Integrate Make It OK into employee wellness programs for hospital	Community Health	х		HealthPartners Valley Hospitals and Make it OK	(Ongoing	3				
	Support efforts to raise stigma awareness including participating in annual NAMI walk and the "Back of the Door Campaign" poster series	Marketing and Medical Leadership	х	x	HealthPartners Valley Hospitals, NAMI, Polk County Mental Health Taskforce, and Community Partners	(Ongoing	5				
Improve access to mental health services	Develop strategies to improve patient and community connection to mental and behavioral health care including seeking funding for a navigation model	Medical Leadership	х		HealthPartners Valley Hospitals and Community Partners	C	Ongoing	5				
	Develop partnerships and models to embed behavioral health in primary care	Medical Leadership	х		HealthPartners Valley Hospitals and Community Partners	Ó	Ongoing	5				

Priority #1: Mental and Behavioral Health

		ŀ	lospital Role(s	s)		Esti	mated	Year	F	rogres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Improve access to mental health services	Evaluate and develop inpatient treatment capacity for behavioral health care in the St. Croix Valley area	Medical Leadership	х		HealthPartners Valley Hospitals and Community Partners		Ongoin					
	Improve processes for behavioral health patients in emergency department	Medical Leadership	х		HealthPartners Valley Hospitals and Community Partners	Ó	Ongoin	g				
	Actively participate and represent one of six hospitals that comprise the Valley Co-op Behavioral Health Team	Hospital Leadership	х	х	Behavioral Health Staff, Amery, Baldwin, Hudson, Osceola, Westfields, and St. Croix Falls Hospitals	(Ongoin	g				
	Reduce intake timeline for behavioral health inpatient admission	Medical Leadership	х		Health Care Providers	(Ongoin	g b				
	Expand mental health services coverage to satellite clinics	Medical Leadership	х		Heath Care Providers, Clinic Leadership	(Ongoin	5				

Priority #1: Mental and Behavioral Health

		H	lospital Role(s	5)		Estimated Y CY CY	Year	F	rogres	S	Key Results	
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	_	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Increase education around mental and behavioral health	Offer and promote ongoing community education classes including classes on stigma, depression, dementia, and various other mental health issues	Community Health	x		Valley Community Education, Health Care Providers, and Public Health	Ó	Ongoinį	5				
	Offer "Beating the Blues" online program for both patients and employees to learn ways to better manage mood, stress and anxiety	Community Health, Hospital Leadership	х	х	HealthPartners Valley Hospitals, Health Care Providers, Community Health	Ó	Ongoinį	5				
	Provide safe, comfortable, and engaging environments for individuals with memory loss and their care partners through Memory Cafés	Medical Leadership	х	х	Health Care Providers, Behavioral Health Staff, Burnett County ADRC, and Community Partners	ff,	5					

Priority #1: Mental and Behavioral Health

		F	Hospital Role(s	5)		Esti	mated	Year		Progres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Increase education around mental and behavioral health	Support and offer staff education on mental and behavioral health issues including mental health crisis training for Hospital and Emergency Department staff	Medical and Nursing Leadership	х	x	Health Care Providers, Behavioral Health Staff		Ongoin	g				
	Participate in "Success by 6," which aims to support parents and children ages 0-6 to have the necessary physical, mental, emotional and social development to successfully grow and learn	Hospital	x	x	United Way St. Croix Valley, Community Health, and Community Partners	(Ongoin	g				
Reduce risky and unhealthy alcohol and drug use	Support Clayton community's Mock Crash Event, organized for high school students, which demonstrates the cause and effects of drunk driving	Medical Leadership	х		Health Care Providers, EMS, and Community Partners	(Ongoin	g				

Priority #1: Mental and Behavioral Health

		ŀ	lospital Role(s	5)		Esti	mated `	Year		rogres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY	CY	CY	CY	CY	CY	(As Appropriate)
Reduce risky and unhealthy alcohol and drug use	Support Amery community's driver's education by providing drinking and driving education	Medical Leadership	х	x	Health Care Providers, EMS, and Community Partners	2016	2017 Ongoing	2018	2016	2017	2018	Арргорпасе
	Screen for risky and unhealthy alcohol and drug use in prenatal, well child, and annual preventative care visits and offer education and appropriate resources to patients	Medical Leadership	edical Health Care Providers Ongoing Community Health, Polk	7								
	Participate in Brief Screening Intervention training for healthcare providers in Polk County	Medical Leadership and Community Health		х	Community Health, Polk County Health Department, Health Care Providers		x x					
	Offer evidence-based programming on alcohol and drug diversion to adolescents and their families via court order or parental request	Medical Leadership and Community Health	x	х	Community Health, Public Health, Health Care Providers		×	x				

Priority #1: Mental and Behavioral Health

		ŀ	Hospital Role(s	5)		Esti	mated	Year		rogres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Reduce risky and unhealthy alcohol and drug use	Conduct mass media campaigns that raise awareness on the social and economic impact of alcohol impaired driving and binge drinking to emphasize responsible drinking/moderate drinking levels	Community Health, Marketing	х	x	Public Health and Community Partners	(Ongoin	g				
Reduce use and exposure of tobacco among youth and adults	Screen for tobacco use in prenatal, well child, and annual preventative care visits and offer cessation education to patients and the community	Community Education and Medical Leadership	х		Community Health, Health Care Providers	(Ongoin	g				
	Employ a certified tobacco cessation counselor	Hospital Leadership	х		HealthPartners Valley Hospitals, Health Care Providers	Ongoing						
	Participate in the Tobacco Free Living Coalition	Community Health		х	Western Wisconsin Working for Tobacco- Free Living Coalition and Community Partners	(Ongoin	g				

Priority #2: Access and Affordability

- Polk County has the lowest median household income out of the seven counties served by HealthPartners' hospital (approximately \$49,000). Polk County's median household income is also lower than Wisconsin's median household income (\$51,974).
- Poverty is a significant barrier in Polk County. For example, 10.5% of overall residents and 15% of children in Polk County are living in poverty (2013).
- Polk County's unemployment rate is 5.9%, compared to 5.5% in Wisconsin.
- Nearly 27% of Wisconsin residents have a Bachelor's Degree or higher, compared to less than 20% in Polk County (2009-2013).
- The Healthiest Wisconsin 2020: Everyone Living Better, Longer Infrastructure Focus Areas include: access to quality health services; collaborative partnerships for community health improvement; equitable, adequate, stable public health funding; public health capacity and quality; and systems to manage and share health information and knowledge.
- Participants in the community conversation conducted by Amery Hospital & Clinic identified healthcare system barriers and misuse as a concern in Polk County. This includes barriers such as transportation, medication management and misuse, accessing the appropriate level of care, and community education.

THOTICY #2.	Access and Anordasin	-	Hospital Role(s	5)		Esti	mated `	Year		Progress	5	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Improve connections of people to health care and community resources	Compile local community resources and share with staff, partners and patients via multiple methods including web and staff training	Community Health	х	x	Valley Community Health, Health Care Providers		Ongoin	g				
	Continue to support employee wellness through: annual health fair, health screenings, quarterly lunch & learns, garden club, and various other events	Employee Wellness Committee	х	х	Community Health, Health Care Providers, Human Resources		Ongoin	5				
	Continue to financially support community organizations and programs that help connect people to services including Baby & Me classes	Hospital Leadership, Amery Foundation	х		Community Health, Health Care Providers, Social Worker, Employee Wellness		Ongoin	g				
Increase access and affordability of primary and preventative healthcare	Provide community residents with transportation services within a 15-mile radius to the health campus for a nominal fee	Transportati on/Facilities	х		Social Worker		Ongoin	g				

			Hospital Role(s	s)		Esti	mated '	Year		Progres	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Increase access and affordability of primary and preventative healthcare	Continue providing direct access lab testing which helps to lower out-of-pocket expense for consumers/patients who are uninsured or have a high deductible or need more frequent testing than their health care insurance plans will cover	Director of Lab Services	x		Health Care Providers		Ongoin	7				
	Continue financial counseling program (1.0 FTE) to help secure a payment source for un-insured and under-insured patients. Specifically, the Patient Financial Services Representative will help patients with financial assistance applications, setting up payment plans, enrolling in government programs, finding other sources of payment, or accessing services beyond medical care.	Patient Financial Services	x		Health Benefits Counselors, Social Worker		Ongoin					

			Hospital Role(s	s)		Esti	mated '	Year		Progress	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Increase access and affordability of primary and preventative healthcare	Continue Scholarship Program to help increase the number of qualified providers in the community; seven scholarship awards will be offered to graduating high school seniors	Amery Foundation	x		Community Partners, Amery High School		Ongoin	5				
	Assist patients with accessing affordable medication and medication monitoring through Drug Assistance Program, onsite retail pharmacy, and Patient Emergency Fund	Patient Financial Services, Social Services, Medical Leadership	х		Health Benefits Counselors, Social Worker, Pharmacists		Ongoin	50				
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Utilize the electronic medical record system, which reduces the opportunity for error, expedites the patient transfer process, and allows for easier scheduling of appointments	Hospital Leadership	х	х	HealthPartners Valley Hospitals, Health Care Providers, Patient Registration		Ongoin	5				
	Continue Total Cost of Care Task Force efforts to reduce the total cost of care for patients served by the hospital	Valley Leaders	х	х	HealthPartners Valley Hospitals		Ongoin	g S				

			Hospital Role(s	s)		Esti	mated	Year		Progress	S	Key Results
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	(As Appropriate)
Increase access and affordability of primary and preventative healthcare	Transition select hospital services from hospital to outpatient billing to lower cost and copays for patients	Finance	х	х	HealthPartners Valley Hospitals		Ongoin	5 0				
	Expand clinic hours and services to satellite clinics	es to satellite clinics Leadership X Providers, Clinic Ungoing Leadership		g								
	Continue athletic trainer presence at Luck and Amery High Schools to support athlete health and sports medicine	Medical Leadership	х		Health Care Providers		Ongoin	g 5				
Improve quality of care	Collaborate around quality improvement to identify and improve quality gaps including training in quality improvement for leaders	Valley Leaders	х	x Valley Hospitals Ongoing		<u>.</u>						
	Improve continuity of care in nursing home setting	Medical Leadership	х		Health Care Providers	,	Ongoin	5				

Priority #3: Chronic Disease and Illness Prevention

- The Healthiest Wisconsin 2020: Everyone Living Better, Longer Health Focus Areas also include: chronic disease prevention and management; communicable disease prevention and control; physical activity; healthy growth and development; adequate, appropriate, and safe food and nutrition; and tobacco use and exposure.
- In regards to obesity, both Polk County and Wisconsin's rates (28%) exceed the national goal of 25%.
- The increase in annual health care costs for every obese adult exceeds \$1,400.
- Obese youth are more likely to become obese adults, putting them at risk of having lifelong health consequences.
- On the Community Health Survey, just over one-third of respondents described their weight as "healthy", nearly half reported they were "slightly overweight", and 14% said they were "very overweight".
- In the first six months of 2012, approximately 65% of patients were screened for height and weight in medical centers in Polk County. More than 40% of screened patients were obese and nearly 30% were overweight.
- Participants in the community conversation conducted by Amery Hospital & Clinic identified nutrition and physical activity as concerns in Polk County. This includes access to healthy lifestyle resources related to physical activity, information regarding appropriate sugar intake, and populations who may be at the highest risk, such as low income community members.

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	Н	lospital Role(s)	Partnerships	Estir	nated `	Year	F	Progres	s	Key Results (As
Goal	Strategies/ Activities	Lead	Collaborate	Participate	raitheiships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Make better eating and physical activity easy, fun and popular for children and families through PowerUp Initiative	Consult with community partners and provide resources to create a healthier food and physical activity environment through open gyms, farmer's markets, school policy and practice changes, improving foods at community and school events and concessions.	Community Health	×	×	Valley Community Health, Community Partners	C	Ongoing	5				
	Engage the community and develop PowerUp partnership through website resources, social media, ongoing newsletters and communications, community outreach and opportunities to advise and participate in priority program development.	Community Health, Marketing	x	x	Valley Community Health, Community Partners	C)ngoin _l	3				
	Focus community attention on healthier communities for children through PowerUp for Kids Week and ongoing community outreach.	Community Health	x	x	Valley Community Health, Community Partners	C	Ongoinį	5				

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	F	lospital Role(5)	Partnerships	Estimated Year	ı	Progres	s	Key Results (As
Goal	Strategies/Activities	Lead	Collaborate	Participate	rattherships	CY CY CY 2016 2017 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Make better eating and physical activity easy, fun and popular for children and families through PowerUp Initiative	Deliver PowerUp School Challenge and School Change Toolkit in all interested school in target school districts in Washington and St. Croix Counties.	Community Health	x	x	Valley Community Health, Community Partners	Ongoing				
	Provide ongoing educational opportunities for kids and families including cooking classes and educational resources.	Community Health	х	х	Valley Community Health, Community Partners	Ongoing				
Improve the health of children in early childhood	Develop and implement Children's Health Initiative strategies including: Read, Talk Sing resources; Social Emotional Development identification; Promote drug and alcohol free pregnancies; Breast-Feeding Promotion; Standard Workflows; OB-Pediatric coordinated care; Postpartum Depression; Decrease Teen Pregnancy; Supporting High-Risk Families; Early Childhood Experience screening	Medical Leadership, Community Health	x	x	HealthPartners Valley Hospitals, Health Care Providers	Ongoing				

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	Hospital Role(s)			Partnerships	Estimated Year				Progres	Key Results (As	
Cour	otheregies/ Activities	Lead	Collaborate	Participate	Tartherships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Increase access to fruits, vegetables and health food	Continue to increase healthier, less processed food options in hospital café and meetings	Nutrition Services	х	х	HealthPartners Valley Hospitals, Community Health	(Ongoin	g				
	Support Community Gardens	Community Health	х	х	Community Partners, City of Amery, Wellness Committee	(Ongoing					
	Offer Community Supported Agriculture (CSA) and other sources of local produce at the hospital	Wellness Committee, Nutrition Services	х		Community Partners, Community Health	x	х					
Decrease access to high calories, highly processed, low nutrient beverages and foods	Reduce Sugar Sweetened Beverages in hospital and clinic campuses to no more than 20% of total beverages and foods offered	Nutrition Services	х	х	HealthPartners Valley Hospitals	х						
	Reduce high sugar/low nutrient foods in hospital and clinic campuses to no more than 20% of total beverages and foods offered	Nutrition Services	x	x	HealthPartners Valley Hospitals		х	х				
	Create food and beverage guidelines for hospital and clinic meetings	Community Health, Nutrition Services	х	х	HealthPartners Valley Hospitals	(Ongoin	g				

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	H	lospital Role(5)	Partnerships	Estimated Year			ı	Progres	Key Results (As	
Cour	Strategies/ Activities	Lead	Collaborate	Participate	r artiferships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Decrease access to high calories, highly processed, low nutrient beverages and foods	Consult with and support partners to reduce high sugar/low nutrient food and sugar sweetened beverage offerings at community events and food pantry (See PowerUp)	Community Health	x	x	HealthPartners Valley Hospitals, Community Partners	(Ongoin	g				
Increase access to physical activity	Increase availability of free and low-cost physical activity options for children and families (See PowerUp)	Community Health	x	x	HealthPartners Valley Hospitals, Community Partners	(Ongoing					
	Partner with local, state and national park, recreation clubs, youth sports, schools and others to increase opportunities for youth, families and general community to be physically active	Community Health	х		Community Partners	(

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	Hospital Role(s)			Partnerships	Estimated Year			F	Progres	Key Results (As	
Goal		Lead	Collaborate	Participate	rattherships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Provide health education and support to patients and community members	Collaborate to provide high quality Diabetes education to patients and families, including standardized processes and educational materials	Diabetes Educators	х		Valley Diabetes Education, Health Care Providers	Ongoing						
	Continue to educate hospital and clinic staff on diabetes education principles through trainings, newsletters and communication through EPIC	Diabetes Educators	х		Valley Diabetes Education, Health Care Providers	(Ongoin	g				
	Provide expectant parent classes and breastfeeding classes four times per year at no charge	OB RN	х		Health Care Providers, Community Partners	(Ongoing					
	Provide ongoing educational opportunities for kids and families including cooking classes and educational resources (See PowerUp)	Community Health	x		Valley Community Health, Community Partners	Ongoing						
	Employ hospital dietitians to promote nutrition awareness and education to patients, their families, and the community	Dietitians	x		Valley Dietitians, Community Health, Health Care Providers	Ongoing						

Priority #3: Chronic Disease and Illness Prevention

Goal	Strategies/Activities	Hospital Role(s)			Partnerships	Estimated Year			F	rogres	Key Results (As	
Goal	Strategies/ Activities	Lead	Collaborate	Participate	raitiieisiiips	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Provide health education and support to patients and community members	Provide diabetes and new parent education and support groups; continue to review opportunities in relation to programming and service line development	Diabetes Educators, OB, Community Health	x		Health Care Providers, Community Partners	Ongoing						
	Provide Lactation Support; encouraging breastfeeding and providing access to certified lactation consultants and breastfeeding education	ОВ	x		Health Care Providers							
	Provide a wide variety of community education classes and support groups	Community Health	х	х	Valley Community Health, Health Care Providers, Community Partners	C	Ongoing					
Improve health awareness, knowledge and literacy in the community	Participate in and support community health fairs and events to share health information and resources with the community	Community Health		x	Community Partners, Health Care Providers	Ongoing						
	Host health outreach events to specific populations to share health information and resources with the community (Hops for Health; Women's Event; Diabetes event etc.)	Valley Marketing, Community Health	х	x	Valley Community Health, Health Care Providers, Community Partners	Ongoing		g				

Priority #4: Equitable Care

- There are approximately 43,437 residents in Polk County. Polk County is the least populated county in HealthPartners' study area, and it experienced a decline between 2010 and 2014.
- The 65 and older population experienced the greatest percentage increase of all age groups in Polk County and in Wisconsin (2010-2014), and Polk County's median age is increasing at 44.7, compared to 39.2 in Wisconsin. Black and Asian populations in Polk County also increased between 2010 and 2014. For example, the Black population increased by 68.8%.
- Participants in the community conversation conducted by Amery Hospital & Clinic noted that medication management may be a concern among the aging population.
- Data indicates that there is inequity among diverse populations. For example, in Wisconsin there are significant disparities in completion rates across racial groups (2013-2014).
 - American Indian/Alaska Native: 79.1%
 - Black: 65.9%Hispanic: 79.1%White: 93.3%
- Overall, 21.8% of children in Polk County are food insecure (2013) and 11% of seniors in Wisconsin are threatened by hunger (2013). Child food insecurity rates are also higher in Polk County than in Wisconsin.
- The Healthiest Wisconsin 2020: Everyone Living Better, Longer Infrastructure Focus Areas include: diverse, sufficient, competent workforce that promotes and protects health: health literacy and education: and equitable, adequate, stable public health funding.

Priority #4: Equitable Care

	Strategies/Activities	Hospital Role(s)				Esti	Estimated Year			rogres	Key Results (As				
Goal		Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)			
Deliver equitable care	Train leaders and staff in diversity, health literacy and cultural humility	Community Health	х	х	HealthPartners Valley Hospitals	Ongoing		Ongoing		Ongoing					
	Explore, develop and promote policies to address health equity	Community Health	x		HealthPartners Valley Hospitals, Community Health, Wellness Committee and Human Resources	(Ongoin	g							
	Explore issue of equitable care and adept changes and measures	Hospital Leadership	х		HealthPartners Valley Hospitals and Community Health	Ongoing									
	Provide financial counseling to help secure a payment source for un-insured and under-insured patients (see also Access and Affordability)	Patient Financial Services	x	x	Health Benefits Counselors, Social Worker	Ongoing									
	Continue to financially support community organizations and programs that help connect people to services including Baby & Me classes (see also Access and Affordability)	Hospital Leadership, Amery Foundation	х	х	Community Health, Health Care Providers, Social Worker	Ongoing									

Priority #4: Equitable Care

		Hospital Role(s)				Estimated Year			F	rogres	Key Results (As	
Goal	Strategies/Activities	Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Facilitate improved access to services and resources for low income and diverse populations	Increase number of PowerUp, diabetes and other hospital materials available in other languages (Spanish)	Community Health and Diabetes Educators	х		Valley Community Education, Valley Diabetes Education, Translators		Ongoin					
	Improve and connect health service systems to community member (see also Access and Affordability)	Hospital Leadership	x		Valley Community Health, Health Care Providers		Ongoin	g 5				
	Increase availability of free and low cost physical activity options for children and families (see also Chronic Disease and Illness Prevention: PowerUp)	Community Health	х	х	HealthPartners Valley Hospitals, Community Partners	(Ongoin	g				

Priority #4: Equitable Care

Goal	Strategies/Activities	Hospital Role(s)				Estimated Year				rogres	Key Results (As	
		Lead	Collaborate	Participate	Partnerships	CY 2016	CY 2017	CY 2018	CY 2016	CY 2017	CY 2018	Appropriate)
Align efforts and collaborate with community	Actively participate in Polk County Community Health Improvement Plan and taskforces for priority areas	Community Health, Medical Leadership	x	х	Health Care Providers, Public Health, Community Partners		Ongoin	g				
partners	Actively participate in the Mental Health Taskforce of Polk County	Medical Leadership	х	х	Health Care Providers/Behavio ral Health, Community Partners		Ongoin	g				