Ministry Saint Michael’s Hospital
Community Health Needs Assessment
An assessment of Portage County conducted jointly by Ministry Saint Michael’s Hospital United Way of Portage County and Portage County Health Department.

Ministry Saint Michael’s Hospital (MSMH) is a community hospital located in Stevens Point, Portage County, Wisconsin. The community health needs assessment (CHNA) was conducted in 2015 and focused on the needs of individuals in Portage County.

MSMH is part of Ministry Health Care, which is an integrated healthcare delivery network serving more than 1.1 million people across Wisconsin and eastern Minnesota. Ministry generates nearly $2.2 billion in operating revenue with 15 hospitals, 45 clinics, and more than 12,000 associates including 650 physicians and advance practice clinicians. In 2013, Ministry Health Care joined Ascension, the largest Catholic and not-for-profit healthcare system in the nation.

*Our mission as a Catholic healthcare system is to further the healing ministry of Jesus by continually improving the health and well-being of all people, especially the poor, in the communities we serve.*

Ministry Health Care has a rich and long tradition of addressing the health of the community. This flows directly from our Catholic identity. In addition to the community health improvement efforts guided by our CHNA process, we contribute to other needs through our broader community benefit program. In 2014-2015, MSMH’s community benefit contributions were more than $13.5 million.

Community Served by the Hospital

Although MSMH serves Portage County and beyond, for the purposes of the community health needs assessment, the hospital focused on the needs of Portage County. Our “community served” was defined as such because (a) most community health data is available on at the county level; (b) most of our assessment partners define their service area at the county level; (c) Portage County includes the majority of our service area.
### Demographic Profile of Portage County

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Wisconsin 2014</th>
<th>Portage County 2014</th>
<th>Portage County 2010</th>
<th>% Change for County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population*</td>
<td>5,757,564</td>
<td>70,482</td>
<td>70,019</td>
<td>0.7%</td>
</tr>
<tr>
<td>Median Age (years)^</td>
<td></td>
<td>38.8</td>
<td>36</td>
<td>1.1%</td>
</tr>
<tr>
<td>Age*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons under 5 years</td>
<td>5.9%</td>
<td>5.0%</td>
<td>5.6%</td>
<td>-12.0%</td>
</tr>
<tr>
<td>Persons under 18 years</td>
<td>22.6%</td>
<td>19.7%</td>
<td>20.8%</td>
<td>-5.6%</td>
</tr>
<tr>
<td>Persons 65 years and over</td>
<td>15.2%</td>
<td>14.6%</td>
<td>12.8%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Gender*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>50.3%</td>
<td>49.8%</td>
<td>50.0%</td>
<td>-0.4%</td>
</tr>
<tr>
<td>Male</td>
<td>49.7%</td>
<td>50.2%</td>
<td>50.0%</td>
<td>0.4%</td>
</tr>
<tr>
<td>Race and Ethnicity*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White alone</td>
<td>87.8%</td>
<td>94.6%</td>
<td>94.2%</td>
<td>0.4%</td>
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<tr>
<td>Black or African American alone</td>
<td>6.6%</td>
<td>0.8%</td>
<td>0.5%</td>
<td>37.5%</td>
</tr>
<tr>
<td>American Indian and Alaska Native alone</td>
<td>1.1%</td>
<td>0.5%</td>
<td>0.4%</td>
<td>20.0%</td>
</tr>
<tr>
<td>Asian alone</td>
<td>2.6%</td>
<td>2.9%</td>
<td>2.8%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>1.8%</td>
<td>1.3%</td>
<td>1.2%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>6.5%</td>
<td>3.0%</td>
<td>2.6%</td>
<td>13.3%</td>
</tr>
<tr>
<td>Speak a language other than English^</td>
<td>8.6%</td>
<td>6.2%</td>
<td>6.4%</td>
<td>-3.2%</td>
</tr>
<tr>
<td>Median household income^</td>
<td>$52,738</td>
<td>$50,837</td>
<td>$51,456</td>
<td>-1.2%</td>
</tr>
<tr>
<td>Percent below poverty in the last 12 months^</td>
<td>13.3%</td>
<td>14.7%</td>
<td>12.1%</td>
<td>17.7%</td>
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<td>High School graduate or higher, percent of persons age 25+ ^</td>
<td>90.8%</td>
<td>92.0%</td>
<td>90.5%</td>
<td>1.6%</td>
</tr>
</tbody>
</table>

* Source: U.S. Census QuickFacts. Available at: [http://www.census.gov/quickfacts/table/PST045214/00](http://www.census.gov/quickfacts/table/PST045214/00)

Community Health Improvement Strategy
Ministry Health Care is committed to using national best practices in conducting the CHNA and implementing community health improvement strategies. Our approach relies on the model developed by the County Health Rankings and Roadmaps, and the Robert Wood Johnson Foundation, utilizing in particular the determinants of health model and the model for community health improvement.

In addition, we utilize the Wisconsin Guidebook on Improving the Health of Local Communities (developed with funding from the University of Wisconsin School of Medicine and Public Health from the Wisconsin Partnership Program). This guidebook builds on the County Health Rankings and Roadmaps’ Action Center.
Based on all of these resources, our community health improvement strategy rests on the following principles to make our communities healthy places to live, learn, work and play:

- Work collaboratively to effectively address health issues
- Pay attention to the forces that shape health outcomes
- Focus efforts on target populations with a disparate health burden
- Emphasize the powerful impact of policy- and system-based approaches on change
- Use the best evidence of effective strategies
- Identify and track specific, measurable performance indicators

**Planning Process**

The Portage County CHNA was led by MSMH, Portage County Health and Human Services, and United Way of Portage County. This core group of representatives worked together to identify the data to be used, gathered the data and prepared it to be presented.

**Data Sources**

The primary source of this data was received from a survey mailed to 4,000 randomly selected Portage County residents by a third party entity, JHL Digital Direct. Additionally, 100 copies of the survey were distributed to targeted areas focused on serving the poor and vulnerable in Portage County:

- Ministry Dental Center
- Portage County Meals on Wheels recipients
- Portage County Health & Human Resources WIC Program recipients
- Portage County Department of Aging clients

Secondary data sources were taken into consideration, including MSMH and Ministry Medical Group (MMG) patient data, Wisconsin State Health Data, US Census, Behavioral Risk Factor Surveillance System, County Health Rankings and other Centers for Disease Control and Prevention (CDC) data sources.

**Input From Persons Who Represent the Broad Interests of the Community**

Ministry Saint Michael’s Hospital (MSMH) and Ministry Medical Group-Central Region (MMG-CR) are committed to addressing community health needs collaboratively with local partners. After the 2013 community health needs assessment, MSMH and MMG-CR have continued to collaborate on the top health priorities with each of the 2013 partners. This year’s assessment built on that collaboration, actively seeking input from Portage County resident surveys and data from collaborative agencies.
Input From Community Stakeholders

Stakeholders of all three partnering organizations, including MSMH and MMG stakeholders, were asked to participate in the planning process. Community survey data and other local health data were reviewed at an in-person meeting. In reviewing the data, participating individuals were asked to come to the meeting prepared to discuss:

- Outstanding gaps/needs related to the three current health priorities
- Emerging issues demonstrated by the data
- Other additional observations in the data

A total of four individuals representing the three partnering organizations met to review the survey and discuss previous priority areas and gaps that remain. After that, eight internal MHC stakeholders attended a CHNA meeting on October 21, 2015. At the meeting, these stakeholders discussed the community health data, progress on the previous priority areas, emerging needs and the process in which to identify priorities. Community assets were identified and based on those assets and additional criteria, the group discussed and reached consensus on the health priorities for the next three years.

Those who participated in one or both of those meetings represented:

- Portage County Public Health (Public Health Officer)
- United Way of Portage County (serves poor, disparate and vulnerable community members)
- MSMH
- Ministry Medical Group (MMG)
- Ministry Dental Center (serves the poor, disparate and vulnerable population)
- Employer Solutions

Input from Members of Medically-underserved, Low-income and Minority Populations

Ascension Health and Ministry Health Care are fueled by a commitment to human dignity, the common good, justice and solidarity. We believe the CNHA process must be informed by direct input from the poor, vulnerable and disparate populations we aim to serve. MSMH included feedback from poor, vulnerable and disparate populated areas in Portage County to ensure their voices were included in the prioritization of Portage County’s health issues. The survey asked participants their perception of the top priority health needs in Portage County. The survey was distributed in the month July-August 2015 at community sites that serve low-income, minority and medically-underserved populations. The results were summarized and included in the full survey report.

Five top areas of concern from data collected through survey included:

- Obesity/overweight
- Oral health
- Alcohol and other drug misuse and abuse
- Vandalism
- Domestic violence
**Input on previous CHNA**

No written comments were received regarding the previous CHNA.

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**Prioritized Significant Health Needs**

**PRIORITIZATION CRITERIA**

After reviewing and discussing the community health data, stakeholders provided input on the top five priorities that need to be addressed throughout the next three years. They used the following criteria to consider the prioritization:

- Gaps in services/program in Portage County
- Number of persons affected
- Seriousness of issue
- Number of affected persons living in poverty in Portage County
- Feasibility of MSMH/MMG influencing the issue
- MSMH/MMG campus priorities strongly align with the issue

**PRIORITIZATION PROCESS**

Using a rubric scoring mechanism, the stakeholders were asked to consider the three previous priorities and decide if they should continue to be priorities for the community. Then, they identified and discussed additional issues that had arisen from the data and group discussion. Using this tool, the group decided to continue focus on the obesity and oral health initiatives.

**PRIORITIES SELECTED**

Based on this process, the following priorities were selected:

- Obesity
- Oral health

Alcohol and other drug misuse, and abuse, vandalism and domestic violence were not selected as priorities because the team felt as though there were stronger resources available to address these issues, and the organizations addressing these important issues were better positioned to impact those issues than MSMH and MMG-CR.
OVERVIEW OF PRIORITIES

Obesity
Obesity issues continue to be a priority in Portage County. Survey data and other relevant data reviewed continue to indicate a need in this area that 67.1 percent of survey respondents agreed that obesity is a community concern.

Obesity is a critical community health issue identified in the 2015 Portage County LIFE Survey. Obesity impacts, and is linked to, other health related issues, including mental health, oral health, healthy aging and chronic disease. According to data, 67.1 percent of the 2015 LIFE Report survey respondents agreed that obesity is a concern in the community. Recent health data indicates that obesity is a growing concern, up to 30 percent for adults in Portage County in the most recent County Health Rankings (University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation). Obesity overlaps with other health concerns and priorities, and can lead to compromised health and work performance. The 2012 Portage County LIFE report also affirmed that adequately funded community-based programs that address insufficient physical activity, poor diet and eating habits yield a five-year return rate of $6.20 for every $1.00 spent. Moreover, obesity is a critical contributor to chronic disease, which decreases one’s quality of life.

Oral Health
Oral health continues to be an area of focus in Portage County. Survey data and other relevant data reviewed continue to indicate a need in this area:

- Ministry Dental Center has provided care to approximately 4,600 patients annually on average in the last two years. In 2015, 1,061 new patients were seen, and 211 adult patients remain on the waiting list. (Source: Ministry Dental Center Annual Report, 2015)
- 2,265 children between ages 0-18 use Ministry Dental Center as their home dental center. (Source: Ministry Dental Center Annual Report, 2015)
- More than 60 patients received hospital care at MSH in 2015 as a result of chronic decay or operative care due to their special needs. (Source: Ministry Dental Center Annual Report, 2015)
- There were more than 370 emergency/urgent care visits for oral pain in past 2015. (Source: Ministry Dental Center Annual Report, 2015)

Potential Resources to Address the Significant Health Needs

As part of the community stakeholders’ meeting, the group identified resources and assets in the community that currently support health or could be used to improve health. The following resources will be considered in developing implementation plans to address the prioritized community health needs.
Healthcare facilities:
- MSMH
- MMG – Central Region
- Ministry Dental Center
- Aspirus Stevens Point Clinic
- Marshfield Clinic Stevens Point Center

Other organizations/groups/services/programs:
- Portage County Health and Human Services
- Portage County CAN
- Healthy People Portage County
- Boys & Girls Club of Portage County
- Stevens Point Area YMCA
- Central Rivers Farmshed
- High quality K-12 school system
- University of Wisconsin-Stevens Point and Mid-State Technical College
- An abundance of outdoor recreation and opportunities
- Unique dental health resource (Ministry Dental Center)
- Community initiatives focused on nutrition, physical activity and worksite wellness

Community characteristics:
- High level of community partnerships
- An evolving creative economy supporting entrepreneurs, non-profits and entertainment
- A diversified business and economic base
- A volunteer community that graciously gives time and talents

Next Steps

Having identified the priority health needs to be addressed, next steps include:
- Collaborating with community partners
- Developing a three-year implementation strategy
- Creating a more specific Annual Action Plan during each year of the implementation strategy
- Integrating the health priorities and implementation strategy into organizational strategic planning and resource investments and allocations
Evaluation of the Impact of the Preceding Implementation Strategy

Health priorities identified in the preceding CHNA (2013-2016) were:

- Mental Health
- Obesity
- Oral Health

Evaluation

Mental Health: The hospital provided Crisis Intervention Team (CIT) training to officers in three law enforcement agencies in Portage County, increasing their ability to respond effectively during situations involving a mental health crisis. Additionally, the hospital sponsored mental health presentations for the community and professionals. Community attendees indicated an increase in knowledge of mental illness and comfort level in asking for help for themselves or others.

Obesity: The hospital hosted an annual Wellness Summit to increase knowledge of healthy eating and exercise. The hospital provided financial support for the Triple Play program at the Boys and Girls Club which demonstrated an increase in the average number of minutes of physical activity for participants. Finally, the YMCA 5210 program was also supported financially and showed an increase in the percent of participants who exercises for 60 minutes or more per day.

Oral Health: The hospital continued to provide care to low income individuals through the Ministry Dental Center. Particular focus was on children ages 0-3 with an increase in the number of children that age seen at the Center and a subsequent decrease in the rate of decay seen in the children served aged 0-3 (from 29% to 20%). In addition, the rate of dental decay in children of any age (0-18) decreased from 70% to 33%.

Approval

This community health needs assessment (CHNA) report was adopted by the hospital’s governing board on May 24, 2016.