Using data from the Central Minnesota Community Health Survey for Programming and Policy Decisions

Panelists: Amanda J. Petersen, MPP, Wilder Research
David Tilstra, MD, President, CentraCare
Renee Frauendienst, RN, PHN, BSN, CPI, Public Health Division Director, Stearns County Human Services
Agenda

- Brief introduction
- Study methodology
- Background on partnership
- Survey development
- Data book examples
- How Stearns County is using the data
- How CentraCare is using the community assessment data to inform wellness strategies
What is Wilder Research?

- Nonprofit, part of an operating Foundation
- Research and evaluation in education, health, and human services
- About 70 researchers and 30 support staff
Wilder’s work

- Benton County Community Health Profile
- Blue Earth County Community Health Profile
- St. Paul Public Housing/Ramsey County SHIP partnership evaluation
- SHIP grant evaluations in 2011
  - Brown/Nicollet
  - Anoka County
  - Cottonwood/Jackson
- Upcoming—Metro SHAPE study and EAT IV
Learn about health status, health behaviors, and perceptions of health concerns in Central Minnesota Communities

- Fulfill requirements of ACA to conduct Community Health Assessment (CHA)
- Use data to plan for and make decisions regarding programming, procedures, and policies
Study area

- Benton
- Chisago
- Mille Lacs
- Sherburne
- Stearns
Methods

- Survey was designed by the Minnesota Community Health Survey working group
- An address-based sample was used to determine participants
- Participants were contacted 3 times by mail
- Survey data was weighted by age, gender, and the number of people in the household
Methods: Sample and response rate

- 14,152—number of households sampled
- 2,930 completed surveys (20.7% response rate)
- Survey data was compiled, cleaned, coded and analyzed
- Produced 13 data books for each of the 5 counties including city-specific, metro and rural areas
“What I do you cannot do, but what you do, I cannot do. The needs are great, and none of us, including me, ever do great things. But we can all do small things, with great love, and together we can do something wonderful.”

Mother Teresa
Background information

Chapter 145A
Local Public Health Act
Community Health Assessment
Community Health Improvement Plan
Regional Data Group
- Hospitals
- Local PH Departments
- MDH
Meeting Agenda

- Overview of Public Health Assessment process
- Walk through of Community Assessment requirements for Public Health
- Overview of Hospital Assessment requirements
- Sharing of progress
- How to work together
  - Sharing data
  - Working on assessment together
Ongoing meetings

- September 2012 through current

Regional

- Stearns County Hospitals
- County Public Health Agencies
- Minnesota Department of Health

Stearns County Public Health working as the lead
Activities over 2012 and 2013

- Identified partners
- Created questionnaire
- Pooled money
- Contracted with Wilder Research
Identified Partners

- 14 County Public Health Agencies
- 21 Hospitals in Region
- MDH-Helpful in options
Identified Partners

- Working out who wanted to work on this process:
  - Already working on their assessments and helped bring Public Health and Hospitals together
  - Initiated collaborative work on assessments
  - Working together/working separate (cost)
  - Stearns, Benton, Sherburne, Mille Lacs, Chisago
  - St. Cloud, Albany, Paynesville, Melrose and Sauk Centre Hospitals

- December 2012-partnership identified
Created Questionnaire

- Worked with Minnesota Department of Health
  - Ann Kinney
  - Kim Edelman
- Brought resources
- Help guide discussion
- Helped explore needs
  - Hospitals-zip code
  - Counties-opinion and risk behavior data
- Craft Questions-allow comparatives
  - Regional
  - Others
  - Student Survey
Pooled Money

- No one had budgeted for this!
  - Creative financing
  - Some needed to encumber in 2012
  - Some needed to spend in 2013

- Partners contributed
  - Not all could contribute financially
  - Input
Thank you to these funders who made this study possible.

Fiscal agency was provided by the CentraCare Health Foundation with the support of CentraCare Health
Contracted with Wilder

- Worked with Wilder to develop budget
  - Survey
    - Pooled partner dollars
  - Data Books
    - Separate budget
  - Data Books
    - Grants from Medica, Ucare, Otto Bremer Foundation

- CentraCare Foundation fiscal host and contractor
St. Cloud Metro Area Community Health Data Book

Detailed results from the 2013 Central Minnesota Community Health Survey

April 2014

For more information, contact:
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Senior Research Manager, Wilder Research
651-280-2892
nicole.martinrogers@wilder.org

This report was prepared by Wilder Research
www.wilderresearch.org

451 Lexington Parkway North | Saint Paul, Minnesota 55104
651-280-2700 | www.wilderresearch.org
### Behavior information

#### In your opinion, how much of a problem is each of these issues in your county? Too few dental providers

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<tr>
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Central Minnesota
Community Health Survey

Survey Instrument

General Health and Health Care

1. In general, would you say that your health is:
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor

2. About how long has it been since you last visited a doctor or other health care professional for a routine check-up?
   - Within the past year
   - Within the past 2 years
   - Within the past 3 years
   - 5 or more years ago
   - Never

3. During the past 12 months, was there a time when you thought you needed medical care but did not get it or delayed getting it?
   - Yes
   - No  ➔ IF NO, GO TO QUESTION 5

4. Why did you not get or delay getting the medical care you thought you needed? Please check all that apply.
   - The care I needed cost too much
   - My co-pay was too expensive
   - My deductible was too expensive
   - My insurance did not cover it
   - I did not have insurance
   - I could not get an appointment
   - I did not think it was serious enough
   - I had transportation problems
   - Other reason: ____________________________

5. How would you rate your overall level of stress?
   - High
   - Medium
   - Low

6. During the past 30 days, for about how many days have you felt sad, blue, or depressed? ________ days

7. During the past 12 months, was there a time when you wanted to talk with or seek help from a health professional about emotional problems such as stress, depression, excess worrying, troubling thoughts, or emotional problems, but did not or delayed talking with someone?
   - Yes
   - No  ➔ IF NO, GO TO QUESTION 9 ON NEXT PAGE

8. Why did you not get or delay getting the care you thought you needed? Please check all that apply.
   - The care I needed cost too much
   - My co-pay was too expensive
   - My deductible was too expensive
   - My insurance did not cover it
   - I did not have insurance
   - I was too nervous or afraid
   - I could not get an appointment
   - I did not think it was serious enough
   - I had transportation problems
   - I did not know where to go
   - Other reason: ____________________________
How Stearns is using the information

- **CHIP**
  - Development of top 10 priorities
    - Used opinion as basis
    - Used data from survey
    - Used other supporting data
  - Used raw data to dig deeper
    - Smoking and Women

- **SHIP**
  - Directing programs
  - Basis for future data
    - BMI
  - Use additional data to expand to Hispanic and Somali populations
CHIP Example - STI's

**STI's**

In your opinion, how much of a problem is... Sexually transmitted diseases such as chlamydia, syphilis, or HIV/AIDS (Source: Central Minnesota Community Health Survey - February 2013)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>12-30</th>
<th>31-50</th>
<th>51-70</th>
<th>71-100</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>20.0%</td>
<td>32.4%</td>
<td>35.8%</td>
<td>30.4%</td>
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</tbody>
</table>

**STI Cases**

CH and GC Cases - Stearns County

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
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<tbody>
<tr>
<td>Cases</td>
<td>370</td>
<td>43</td>
<td>323</td>
<td>346</td>
<td>412</td>
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<tr>
<td>%</td>
<td>100%</td>
<td>10%</td>
<td>0%</td>
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</table>

Source: MHD STD Surveillance Statistics
Smoking

Smokers

Stearns: 9%
Region: 14%
Smoking by women

How often do you smoke cigarettes among men:
- Every day: 95%
- Some days: 1%
- Never: 4%

How often do you smoke cigarettes among women:
- Every day: 10.5%
- Some days: 2.6%
- Never: 86.9%

(Source: Central Minnesota Community Health Survey - 2013)
(Source: Central Minnesota Community Health Survey - February 2013)
Future plans

“Experience is the name everyone gives their mistakes”

Oscar Wilde
Future Plans

- What more can we do with this data?
- What other data may we want from both partners?
- How do we prepare for the next assessments?
  - Hospitals
  - Public Health
- Do we want to be even more collaborative in not only our assessments but also our improvement plans?
- Do we expand beyond the 5 counties and involve the 14 counties?
Thank you!
Our Approach to Using Data to Inform Strategy and Programming

- Began with the data; one source is insufficient
- Multi-faceted approach to identify focus areas
  - Objective: Measures and risk stratification
  - Subjective: Our community
  - *Which areas / conditions show up as an area of opportunity multiple times?*

- Data sources
  - Community Health Assessment
  - CCH Enterprise Data Warehouse (EDW)
  - HCDS/IHP (state shared savings risk program)
  - Minnesota Community Measures
Using the Community Health Assessment for Population Health Strategy

- Goal: Understanding the “where” and “what”
- Selected 31 questions to indicate greatest opportunities to focus programming in:
  - Prevention
  - Chronic Illness
  - Lifestyle
- Opportunity areas: +/- 2 standard deviations from the mean
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<td>General Health</td>
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<td><strong>PREVENTION</strong></td>
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<tr>
<td>Self: Routine Checkups</td>
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<td><strong>Red</strong></td>
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<td><strong>Red</strong></td>
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<tr>
<td>Self: Monthly self exams</td>
<td></td>
<td><strong>Red</strong></td>
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<td><strong>Green</strong></td>
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<td>Self: Yearly flu shot</td>
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<tr>
<td>Adult immunizations</td>
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<td>Child immunizations</td>
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<td><strong>CHRONIC ILLNESSES</strong></td>
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<td>Depression:</td>
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<td>Self: Days Depressed</td>
<td><strong>Green</strong></td>
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<td>Self: Delayed help</td>
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<td>Youth depression</td>
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<td>Adult depression</td>
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<td>Mental Illness</td>
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<td>Diabetes:</td>
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<td>Self: Diabetes</td>
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<td>Diabetes</td>
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<td>Self: High BP</td>
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<td>Self: High Cholesterol</td>
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<td>Heart Disease &amp; Stroke</td>
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<td>Other Chronic Illness</td>
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*Red = Area of Opportunity*

*Green = Area of Best Practice or Better Performance*
## Community Health Assessment Summary

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<td><strong>Diet, Exercise &amp; Obesity</strong></td>
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<td>Self: Fast Food</td>
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<td>Self: 30 mins exercise</td>
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<td>Child obesity</td>
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<td><strong>Drugs, Tobacco &amp; Alcohol</strong></td>
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<td>Youth illegal drug use</td>
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<td>Adult illegal drug use</td>
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<td>Self: Smoke cigarettes</td>
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<td>Self: Chew tobacco</td>
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<td>Self: cigars, cigarillos</td>
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<td>Self: Alcohol (Females)</td>
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<td>Self: Alcohol (Males)</td>
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**Red** = Area of Opportunity  
**Green** = Area of Best Practice or Better Performance
Health is at CentraCare’s Core

“To improve the health of every patient, every day.”

— CentraCare Mission Statement
CentraCare Health & Wellness: Strategy to Achieving Mission

Fostering Health & Wellness

Commitment to Care
Quality & Value

Solid Structures
Support
Health & Wellness
Today’s Patient-Centered Health For Central Minnesota

- Individual Programs Coach Health
- Community Policies Support Health
- Patient-Centered System
- Clinical Care Treats & Prevents
- New Payment Models Incentivize Population Prevention Strategy

Data Systems Enable Real-Time Decision Making
Segregate the population

- **High-Risk Patients**: 5% of patients; usually with complex disease(s), comorbidities.
  - Trade high-cost services for low-cost management.
- **Rising-Risk Patients**: 15%-35% of patients; may have conditions not under control.
  - Avoid unnecessary higher-acuity, higher-cost spending.
- **Low-Risk Patients**: 60%-80% of patients; any minor conditions are easily managed.
  - Keep patient healthy, loyal to the system.

The Advisory Board 2013
Targets for Wellness Populations

Internal
- Specialty Care
  - Bariatrics
  - CV
  - Diabetes

Primary Care
- Wellness Center

External
- Employer Wellness
- Community Wellness

Diagram:
- High-Risk Patients: 5% of patients; usually with complex disease(s), comorbidities
  - Trade high-cost services for low-cost management
- Rising-Risk Patients: 15%-35% of patients; may have conditions not under control
  - Avoid unnecessary higher-acuity, higher-cost spending
- Low-Risk Patients: 60%-80% of patients; any minor conditions are easily managed
  - Keep patient healthy, loyal to the system

The Advisory Board 2013
Health Happens Everywhere

A majority of our health is determined by our community:

Where we live
Where we work
What access we have to foods and exercise

HEALTH DETERMINANTS

Community 50%
Health system 20%
Personal choice 30%

CentraCare
Informing the Wellness Strategy

- Comparison of the Community Health Assessment with data in our health record
  
  “Do females really smoke at higher rates in Stearns Co than males”

- Policies, Systems, Environment

- Using zip code to focus intervention

- Obesity, smoking, diabetes

- Making choices about where we prioritize

  Comparing both data sets we can look for “two-fers”

  where we could have potentially greater impact
What was the value of the survey?

- Provided key information by geography
- Supported existing focus areas identified via other data sources
- Important to include the voice of our communities in the development of programming
- Opportunity for longitudinal study to evaluate our PSE work over 5, 10, 20 years
- Info will be used to tell our story