

OLMSTED COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP) 2024 ANNUAL REPORT

**A Collaborative Community Effort Led by: Olmsted County Public
Health Services, Olmsted Medical Center, and Mayo Clinic**

Effective Date: January 2025



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Executive Summary

The Community Health Assessment and Planning (CHAP) process is about improving the health and well-being of residents in Olmsted County. Every three years the community conducts a health needs assessment to determine Olmsted County's health priorities; formulates a plan to address the needs; and publishes an annual progress report. Olmsted County Public Health Services (OCPHS), Mayo Clinic, and Olmsted Medical Center (OMC) engage with diverse partners across our community to lead this process.

The core values of the CHAP process are:

- Actionable and Sustainable.
- Collaboration.
- Community Focus.
- Data Driven.
- Health Equity.

The purpose of the 2024 CHIP Annual Report is to highlight the work completed for the first year of this three-year CHIP cycle. This report describes the efforts being taken by organizations throughout Olmsted County to address the three community health priorities:

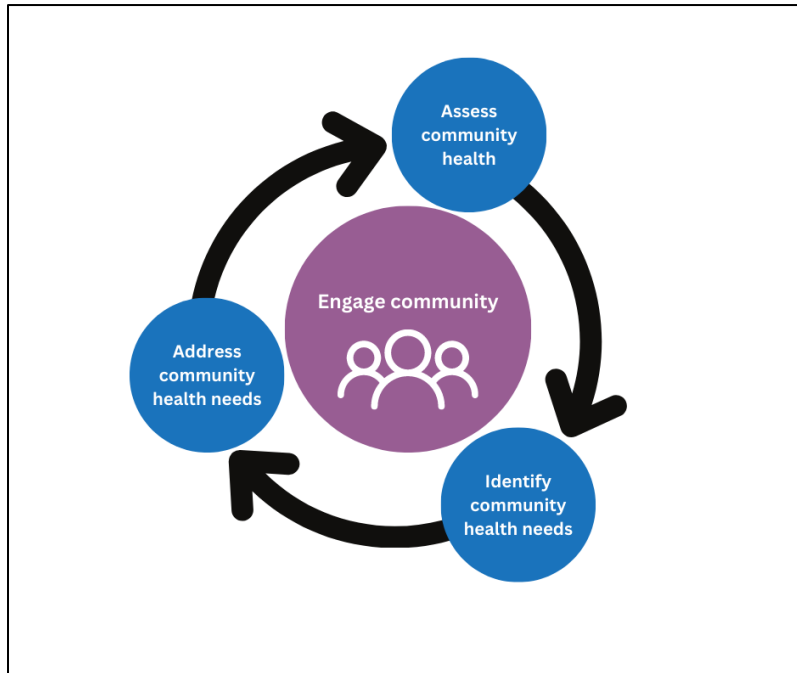
1. Mental Health.
2. Drug Use.
3. Access to (Health) Care.

This cycle, a "collective impact" approach is being piloted to address these complex issues. This new approach's primary goal is to expand the individual and collaborative efforts to include more Olmsted County partners over the course of the three-year cycle, thus having more impact on the priorities. The commitment by many organizations throughout Olmsted County demonstrates the excitement for implementing this pilot approach and dedication by partners to impact these health priorities. Despite 2024 being the first year of implementation, the strategies being implemented are already making an impact.

CHAP Process Overview

CHAP Process Statement and Visual:

The Community Health Assessment and Planning (CHAP) Process is about improving the health and well-being of residents in Olmsted County. Every three years the community conducts a [health needs assessment](#) to determine Olmsted County's health priorities; formulates a plan to address the needs; and publishes an annual progress report. OCPHS, Mayo Clinic, and OMC engage with diverse partners across our community to lead this process.



CHAP Requirements:

Nonprofit Hospitals

Since its passage into law in 2013, the Patient Protection and Affordable Care Act (PPACA) requires hospitals to conduct a community health needs assessment and adopt an implementation strategy every three years in order to maintain their tax-exempt status.

Additional Information can be found on the Internal Revenue Service (IRS) website: [CHNA for Charitable Hospital Organizations – Section 501\(r\)\(3\)](#).

Local Public Health Departments

A thorough and valid community health assessment and health improvement plan are customary practices and are core functions of public health. Additionally, health assessments and health improvement plans are a national standard for all public health departments. Since the passage of the Local Public Health Act in 1976, Minnesota community health boards (CHBs) have been required to engage in a community health improvement process, beginning with a community health assessment.

Additional information can be found on the Minnesota Department of Health's website: [Assessment and Planning for Local Public Health](#).

Public Health Accreditation

OCPHS is a nationally accredited local health department through the Public Health Accreditation Board (PHAB)—a national voluntary accreditation program for public health agencies. The goal of the voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of public health departments. Accreditation standards define the expectations for all public health departments—for a public health department to be accredited, it must meet stringent requirements for the 10 essential services of the core public health functions and demonstrate a commitment to constant improvement. Specifically, to meet national reaccreditation related to CHIP activities, local public health agencies are required to conduct a comprehensive planning process resulting in a community health improvement plan that includes broad participation of community partners; uses assessment data to identify priority issues; develops and implements strategies for action; and establishes accountability to ensure measurable health improvement.

Additional information can be found within the Public Health Accreditation Board's (PHAB) Guide to Reaccreditation: 2022 Standards.

2024 – 2026 CHIP Priorities

After a community-based prioritization process, the following three health issues were identified as community health priorities for 2024 to 2026:

- Mental Health.
- Drug Use.
- Access to Care.



2024 CHIP Annual Report Overview

Purpose:

The purpose of the CHIP Annual Report is to highlight the work completed for the first year of this three-year CHIP cycle. This report shares work being completed to address the three community priorities by organizations throughout Olmsted County.

The CHIP and its related strategies are dynamic and updated as needed. Changes and revisions are driven by the organizations leading specific strategies.

Framework:

The 2024 – 2026 CHIP is piloting a “collective impact” approach to address the top health priorities. Core Group, the CHAP process’s leadership team, approved this pilot approach in January 2023. The collective impact approach brings in principles of [Results Based Accountability \(RBA\)](#). In short, RBA allows communities to track data-driven population indicators over time. The goal is to “turn-the-curve” and advance health outcomes that need improvement; in this case, the three priorities.

For this CHIP cycle, Olmsted County as a whole will be attempting to improve population indicators for each of the three community health priorities. To do this, organizations throughout the community have offered strategies that they will implement between January 2024 and December 2026 as an effort to improve outcomes. These strategies are either brand new, or enhancements to current efforts. The goal is, with multiple agencies offering different solutions, our community will see **measurable impact on these issues in the next few years**.

In addition to specific organizations’ individual work to collectively impact these issues, there is space for collaborative strategies (two or more agencies working on the same strategy), particularly for existing partnerships and groups. For example, the Coalition for Community Health Integration (CCHI) is implementing a collaborative strategy around access to care, the Olmsted County Mental Health Education Workgroup is implementing a collaborative strategy for mental health, and the Substance Use Workgroup is implementing a collaborative strategy for drug use.

Organizations Contributing to One or More Priorities:

- Individual Organizations:
 - Mayo Clinic.
 - Medica.
 - OCPHS.
 - OMC.
 - Rochester Public Schools (RPS).
 - UCare.
 - United Way of Olmsted County (UWOC).
 - Zumbro Valley Health Center (ZVHC).
- Groups:
 - CCHI.
 - Includes all of the individual organizations listed, along with Blue Cross Blue Shield and Rochester Area Foundation.
 - Olmsted County Mental Health Education Workgroup.
 - OCPHS, Pine Island Schools, and RPS.
 - CHIP Substance Use Workgroup.
 - Organizations include a mixture of Olmsted County government, substance use treatment providers, and non-profit partners.

2024 CHAP Satisfaction Survey Overview

Overview:

Every year, the CHAP process implements a CHAP Satisfaction Survey of its partners. The goal of this survey is to assess how well the CHAP process is doing and serves as an opportunity to identify continuous improvement initiatives. For example, one of the largest initiatives coming from a previous survey was the **CHIP collective impact approach**. Typically, 20 - 30 partners complete the survey.

Data:

Here are a few select data highlights:

- Overall satisfaction with the CHAP process increased, on a four point scale, from an average of 3.3 in 2023 to 3.35 in 2024.
- Themes from open-ended questions asking for improvements of the CHAP process were:
 - Meeting structure and amount.
 - Engagement.
 - Communications.
- The average, on a scale of zero to 10, for partners to recommend the CHAP process to someone else increased from 7.71 in 2023 to 8.35 in 2024.
- One of the lowest averages, on a scale of one (strongly disagree) to four (strongly agree), is “the community understands the CHAP process’s purpose” at 2.46.
- Partners shared that they have used the Community Health Needs Assessment (CHNA) in multiple ways, including with grant applications, board reports, miscellaneous projects, and sharing information with others.

Next Steps:

The results of the survey, along with a corresponding conversation at the September 2024 Health Assessment Planning Partnership (HAPP), resulted in the following next steps:

1. A new workgroup was formed in late 2024 to focus on increasing the portion of Olmsted County residents who are aware of the CHAP process.
2. At the December 2024 HAPP meeting, a detailed overview of the CHAP process was shared to ensure understanding of how the process works as a whole.
3. The CHAP leadership team (Core Group) revisited the current CHAP group structure and eliminated one standing meeting to streamline communications and reduce redundancy.
4. The CHAP process will continue to highlight how CHIP priorities are being addressed, through annual reports and community-wide communications.
5. The CHAP process will begin developing occasional newsletters to better communicate with partners.

Access to Care

Goal and Population Indicator:

Overall Goal: Reduce Olmsted County residents who delay health care.

Population Indicator(s):

1. Decrease the % of adults who delay any care (including medical, mental health, and/or dental care) from 31.8% in 2022 to 25% in 2028 (*Community Health Needs Assessment*).

Collective Impact Strategies, Work Plans, and Organizations Implementing the Work:

Organization:

- Olmsted County Public Health Services.

Goal and Strategies:

- Increase access to care for LGBTQIA+ residents by reducing the portion of non-heterosexual adult residents who have delayed medical care in the past 12 months.
 - Improve navigation of the health care system for LGBTQIA+ residents (Coalition for Community Health Integration led strategy).
 - Improve local health-related resource wayfinding for LGBTQIA+ residents.
 - Improve health care staff training to increase safety and comfortability for LGBTQIA+ residents.

Data:

- Baseline (2022): 31%.
- Target (will be tracked in 2025):29%.

Update/Next Steps:

- LGBTQIA+ resource wayfinding hub:
 - This [hub](#) soft-launched in mid-September 2024. Currently, 97 resources are available specifically related to increasing access to care for the LGBTQIA+ community within this hub on CredibleMind. In the reporting period 9/1/2024 to 10/25/2024, among the 17.7% of registered users (registration is optional), the portion identifying as non-binary increased to 6.9% compared to 5.5% since the Olmsted County CredibleMind platform launched. In addition, LGBTQIA+ ranked fifth in the top 25 topics searched across all site content in the reporting period 9/1/2024 to 10/25/2024. Also during this reporting period, Local Social LGBTQIA+ Resources & Organizations ranked first among the top resources viewed, Gender-Affirming Care ranked third, Affirming Mental Health Care ranked fourth, and LGBTQIA+ Hotlines ranked fifth. Qualitative feedback has also been positive:
 - "Thanks again for putting all this together!! It's definitely needed in Rochester!"
 - "This is AMAZING!!!! Thank you so much for sharing."
 - "This is so wonderful. This work by Olmsted County is going to help so many community members. So thank you!"
- Training for health care staff on providing queer-competent care:
 - This strategy, which includes three training modules developed and delivered by the LGBTQIA+ co-design team, is currently in the testing phase. In pre-post testing of Module 1, Advocacy & Trust: Intake, Referrals, and Privacy, delivered to the Public Health Leadership Team on

9/17/24, the portion of trainees agreeing with each of the following statements increased after receiving the training:

- I feel knowledgeable about LGBTQIA+ terms and identities (67% pre, 70% post).
- I understand the health needs and concerns of Queer individuals (50% pre, 80% post).
- I am confident in my ability to work with Queer individuals with compassion and care (75% pre, 80% post).
- I understand the biases and assumptions that can affect working with LGBTQIA+ individuals (83% pre, 90% post).
- Qualitative feedback was also positive, particularly around the use of vignettes or personal stories:
 - "I enjoyed hearing the stories from individuals who have experienced barriers when trying to find/get proper health care they need as part of the LGBTQIA+ community."
 - "I thought the scenarios/vignettes were extremely helpful. It helps understand perspective in a much clearer way."
 - "Getting to hear another perspective, even when trying your hardest to be compassionate and an advocate, there are things you may miss without personal experience or hearing from someone with the lived experience."
- LGBTQIA+ health care navigator position:
 - This strategy is being led by CCHI. The group of LGBTQIA+ co-designers have developed a job description for this position. CCHI agencies are collaborating to identify funding for this role. Once the role is created, both quantitative and qualitative metrics will be identified.

Organization:

- Mayo Clinic.

Goal and Strategies:

- Increase the number of primary care patients in Rochester and Kasson who are screened for social determinants of health for community patients and referred for food insecurity concerns.
 - Refer community patients presenting with food insecurity social determinant of health challenges to local resources using community health workers and [findhelp.org](https://www.findhelp.org).

Data:

- In 2024 7,247 patients screened positive for food insecurity concerns and 813 patients accepted assistance from Intercultural Mutual Assistance Association (IMAA) Community Health Workers. Attempts were made to reach as many of the patients who screened positive as possible with available staff capacity. Of the 40% who were reached, not everybody accepted help.

Update/Next Steps:

- During 2025, Mayo Clinic plans to continue social determinants of health screening and referral for community patients.

Organization:

- Medica.

Goal and Strategies:

- Increase usage of Intensive Community Based Services (ICBS) by Olmsted County residents who are Medica members each year from 2024 to 2026.
 - Contract with a local provider to offer ICBS program in Olmsted County.
 - Refer Medica members to the program.

Data:

- Still working on getting first Olmsted County users.

Update/Next Steps:

- Continue to promote the ICBS program with area providers and Medica Care Coordinators. They will schedule a meeting with Zumbro Valley in Q1 of 2025 to discuss internal referral process whereby they identify members who could benefit from the services.

Organization:

- Olmsted Medical Center.

Goal and Strategies:

- Improve access to and awareness of non-traditional care (eVisits, virtual care, on-demand, after-hours, asynchronous) by enhancing patient communication and promoting alternative methods of appointment scheduling as appropriate.

Data:

- Almost 10% of patients receive care outside of traditional hours.

Update:

- Their commitment to advancing health-care services and expanding access to care at OMC is evident through several strategic initiatives. The utilization of Virtual Care/On-Demand video visits has shown a significant uptrend throughout 2024, with an average of over 30 on-demand video visits per month and an average of 350 overall video visits per month. This highlights the growing demand for convenient virtual care options.
- Other non-traditional types of care added in 2024 include:
 - Drive Thru Vaccination Clinic.
 - STI/HIV Testing at various community events.
 - WIC Partnership.
 - Sensory Friendly Vaccine Clinic.

Organization:

- United Way of Olmsted County.

Goal and Strategies:

- Improve access to information about community care resources by increasing use of 211.
 - Work with community partners to disseminate information and materials into the community.
 - Use 211 data to inform community partners about needs and gaps in the community and spread awareness about issues and available resources (including 211).

- Issue an all agency message to the organizations currently listed in the 211 database to encourage them to update their information regularly and remind them of the importance of 211.
- Use social media to spread awareness.
- Continue participating in events and tabling opportunities.

Data:

- 5,272 211 requests as of mid-November 2024. This compares to 4,494 users in 2022.

Update/Next Steps:

- In addition to making progress on the strategies outlined above, UWOC is now collaborating with the City of Rochester's 311 service to ensure that no matter which service people access, our community members are being directed and connected with the right resources at the right time. This collaboration will, in turn, help to better inform their work and the work of other community partners.
- In September, United Way of Minnesota also launched a valuable data report on ALICE (Asset Limited, Income Constrained, Employed) families in our community, which shows (what many of us have already been seeing and experiencing) that one out of three households in Olmsted County are unable to meet their basic needs. This information has allowed us to better understand how the 211 service can provide support for the ALICE families and individuals who live above the Federal Poverty Level but who still cannot afford the cost of basics like health care, childcare, healthy food, transportation, housing and technology. The ALICE data set also illuminates what resources are needed to close the gap between financial hardship and financial stability for these families and individuals in our community.
 - ALICE data will be incorporated into the Olmsted County [CHNA](#) in early 2025.

Organization:

- Zumbro Valley Health Center.

Goal and Strategies:

- Increase access to dental care by clients.
 - Establish baseline of percentage of ZVHC clients seen for dental care per year in 2024.
 - Supporting Apple Tree Dental to increase dentist and hygienist capacity (space).
 - Standardizing dental screening and referrals.

Data:

- In 2024:
 - 150 referrals made.
 - 790 screenings.
 - 40% of eligible population completing a dental exam.

Update/Next Steps:

- ZVHC continues to discuss expanded capacity and additional on-site dental services in collaboration with Apple Tree Dental. They have not been able to move forward with this project yet, however, are still planning to do so when able.

Drug Use

Goal and Population Indicators:

Overall Goal: Reduce drug use among Olmsted County residents.

Population Indicator(s):

1. Decrease the number of overdose fatalities among Olmsted County residents from 42 in 2022 to 0 in 2028 (*Minnesota Department of Health*).
2. Increase the % of students who reported that they feel using marijuana and/or prescription drugs is a risk from 72.4% (marijuana) and 82.6% (prescription drugs) in 2022 to 80% (marijuana) and 88% (prescription drugs) in 2028 (*Minnesota Student Survey*).
3. Decrease the % of 8th, 9th, and 11th graders who have used any drugs in past 12 months from 16.8% in 2022 to 12% in 2028 (*Minnesota Student Survey*).

Collective Impact Strategies, Work Plans, and Organizations Implementing the Work:

Organization:

- CHIP Substance Use Workgroup.

Goal and Strategies:

- Implement at least three strategies to increase drug use education for school staff, families, and students by the end of 2024.

Data:

- Three strategies implemented in 2024.

Update/Next Steps:

- The CHIP Substance Use Workgroup continues to collaborate with partners throughout Olmsted County to educate youth, parents, and guardians. Two initiatives completed in 2024 were:
 - A virtual, community forum in April 2024. The forum's agenda included discussion on current trends in youth use, prevention approaches and strategies, evidence-based resources, and stories from youth with lived experience.
 - The creation of a [Facebook page](#), which shares sober community social events.
- Looking ahead to 2025, the following initiatives will be considered:
 - Participation in substance-free events (i.e.: Social Ice, Safe City Nights, etc.).
 - Creation of a resource that shares substance use treatment availability and gaps among providers in Olmsted County.
 - The distribution of wellness kits, which will provide stress-free swag and local community resources for youth.

Organization:

- Mayo Clinic.

Goal and Strategies:

- Identify more adolescents at risk for substance use disorder.
 - Improve screening rates for substance use disorders in adolescents (ages 12 - 18) at three primary care pilot sites (Northeast Clinic, Southeast Clinic, Red Wing).

- Improve provider awareness and skills in identifying and treating substance use disorders.
 - Increase substance use disorder educational efforts for health care professionals inside and outside of Mayo Clinic.
- Improve access to Naloxone to treat opioid overdose.
 - Advocate to influence policy to keep Naloxone as affordable as possible.#

Data:

- In 2024: The total percent of eligible adolescent patients (326) who completed screening was 79.1%. Out of the 258 patients who were screened, 4.2% screened positive.
- 2,446 Mayo Clinic employees completed the Mayo Clinic Opioid Drug Enforcement Agency course between 01/01/24 and 10/31/24. 935 Mayo Clinic employees completed the Ending the (Opioid) Crisis Audiobook between 01/01/24 and 10/31/24.
- Mayo Clinic covers Naloxone at its lowest co-pay for its two most popular prescription coverage plans.
- Pharmacists have the authorization through the MN Protocol to generate a prescription for patients to allow for the cheapest pricing.
- The Mayo Stewardship Program hosted the National DEA Drug back day at NE Clinic on 10/26/24.

Update/Next steps:

- Mayo Clinic plans to continue to explore optimal ways to screen adolescents and adults for substance use and intervene when substance use is identified, including increasing access to medications for opioid use disorder (MOUD) when indicated.
- Mayo Clinic plans to continue to offer the Opioid Drug Enforcement Agency Course and Ending the Crises Audiobook for employees and non-employees during 2025.
- Mayo Clinic is committed to supporting policy and system change both within and outside of the organization to effectively prevent and treat opioid overdose.

Organization:

- Medica.

Goal and Strategies:

- Increase usage of Intensive Community Based Services (ICBS) by Olmsted County residents who are Medica members each year from 2024 to 2026.
 - Contract with a local provider to offer ICBS program in Olmsted County.
 - Refer Medica members to the program.

Data:

- Still working on getting first Olmsted County users.

Update/Next Steps:

- Continue to promote the ICBS program with area providers and Medica Care Coordinators. They will schedule a meeting with Zumbro Valley in Q1 of 2025 to discuss internal referral process whereby they identify members who could benefit from the services.

Organization:

- Olmsted County Public Health Services.

Goal and Strategies:

- Support the passing of a local cannabis ordinance(s) and establish a system to license, regulate, and educate the public.#
 - 2024—Support the development of a potential cannabis ordinance(s) in Olmsted County. Investigate best practices and draft a potential plan for local licensing, regulation and education.
 - 2025—Finalize and roll out plan for local licensing policy, regulation and education.
 - 2026—Cannabis education will be mandatory in schools. Therefore, OCPHS's School Age Services team will engage with schools to offer this and set a specific goal at that time.

Data:

- Passage and updates of several cannabis-related county ordinances.

Update/Next Steps:

- The Olmsted County Board of Commissioners amended Chapter 2150 on November 19, 2024 which regulates registration of cannabis businesses within Olmsted County, provides for age compliance checks of those businesses, creates standards for temporary cannabis events and clarifies violations and penalties applicable to the various sections of the ordinance.
- It can be anticipated that the ordinance will be amended in the future to further define the process for registration of cannabis retailers and add additional regulations to protect the public's health. As these ordinance updates occur, a communications campaign for the general public and cannabis businesses will be implemented.

Organization:

- Olmsted Medical Center.

Goal and Strategies:

- Improve Medication Assisted Treatment (MAT) clinic access and program adherence through expanded services.
 - Introduce an integrated alcohol and drug counseling program within the MAT clinic.
 - Conduct outreach services in collaboration with community partners.

Data:

- Continuing to refine the data collection methods for this measure.

Update:

- OMC was awarded the Tackling Overdose with Networks (TOWNS) grant which focuses on efforts to reduce opioid overdoses and increase access to medications for opioid use disorder (MOUD) treatment. They are utilizing this grant to expand MOUD treatment and other substance use treatment to our branch clinics and for collaboration with other community entities (i.e., Department of Corrections).
- Provide outreach services.

- Safe City Nights.
- MAT Clinic added to findhelp.com.
- Drug Take Back Day.

Organization:

- UCare.

Goal and Strategies:

- Reduce substance use for Olmsted County residents who are UCare members by increasing utilization of ICBS.
- Increase Olmsted County stakeholder awareness of program and referral pathways.

Data:

- 42 were referred to the ICBS program.

Update/Next Steps:

- Of the 42 referrals:
 - 25 were closed to goals met.
 - Six are still in active ICBS.
 - Six were unable to be reached.
 - Five termed insurance.
- UCare continues to meet with ZVMS quarterly to talk about opportunities for internally identified referrals.
 - The most recent meeting was scheduled for early January 2025.

denotes recommendations related to policy—either new policies or changes to existing policies.

Mental Health

Goal and Population Indicators:

Overall Goal: Increase overall mental wellbeing among Olmsted County residents.

Population Indicator(s):

1. Decrease the number of deaths by suicide in Olmsted County from 25 in 2022 to 0 in 2028 (Syndromic Surveillance - ESSENCE).
2. Decrease the % of Olmsted County adults with a WHO Well-Being Index Below 51 from 20.8% in 2022 to 13% in 2028 (*Community Health Needs Assessment*).
3. Decrease the % of adolescents reporting emotional distress from 76.2% in 2022 to 72% in 2028 (*Minnesota Student Survey*).

Strategies, Work Plans, and Organizations Implementing the Work:

Organization:

- Olmsted County Mental Health Education workgroup (OCMHE).

Goal and Strategies:

- Educate all school districts in Olmsted County about the School Health Assessment and Performance Evaluation (SHAPE) system and related educational materials.
 - Promote "Stay Connected Minnesota" campaign with Olmsted County Schools (Q1 2024).
 - Educate all public and private schools in Olmsted County about the SHAPE system, along with the latest statewide SHAPE cohort (Q2 2024).
 - Determine next steps with Olmsted County school teams as state cohort program finishes (Q4 2024).
 - Educate schools in Olmsted County on CredibleMind resource (Q4 2024).

Data:

- Eight school districts educated in 2024.

Update/Next Steps:

- Q1 - There was a pause on utilizing the Minnesota Department of Health's "Stay Connected Minnesota" campaign as updates appeared to be paused at the state level.
- Q2 - Emails were sent to schools/districts regarding the SHAPE system and 2024 - 2025 Minnesota Department of Education cohort opportunity.
- Q3 - Qualitative survey with one participating district explored their experience participating in the 2023 - 2024 MDE cohort and adapting the SHAPE system to their work. The workgroup continued to adapt their approach in supporting schools based on survey and other feedback.
- Q4 activities were:
 - Continued discussion on how to adapt Olmsted County workgroup to best meet need.
 - Shared upcoming CredibleMind school resource page with school contacts previously reached.
 - Continued providing technical assistance and networking support for schools utilizing SHAPE system.
 - Participated in Olmsted County school newsletter by submitting SHAPE and school mental health resources for sharing.

Organization:

- Mayo Clinic.

Goal and Strategies:

- Decrease the wait time for initial psychotherapy consults at Mayo Clinic through the Integrative Behavioral Health Program at Baldwin Clinic.
- Prevent escalation of undiagnosed mental health conditions among young children.
 - Increase the number of autism (M-CHAT) and social-emotional screens (PPSC) completed each month at Mayo Clinic in children under age 6 years old.

Data:

- Between May and October 2024, the wait time for psychotherapy appointments was down from a baseline level of 30 days (late 2023) to 15 days (February to April 2024) and 18 days (May to October 2024).
- From January 1, 2024 to October 2024, there were PPSC 477 screens per month (baseline 179 in 2023) and 348 M-CHAT screens per month (baseline 333/month in 2023) completed.

Update/Next Steps:

- Mayo Clinic is committed to improving access to mental health care and plans to spread this initial appointment scheduling intervention with the Integrative Behavioral Health Program to other primary care sites during 2025.
- Mayo Clinic plans to continue to systematically screen for mental health concerns within primary care and intervene with appropriate internal and local external resources.

Organization:

- Medica.

Goal and Strategies:

- Increase usage of Intensive Community Based Services (ICBS) by Olmsted County residents who are Medica members each year from 2024 to 2026.
 - Contract with a local provider to offer ICBS program in Olmsted County.
 - Refer Medica members to the program.

Data:

- Still working on getting the first users from Olmsted County.

Update/Next Steps:

- Continue to promote the ICBS program with area providers and Medica Care Coordinators. They will schedule a meeting with Zumbro Valley in Q1 of 2025 to discuss internal referral process whereby they identify members who could benefit from the services.

Organization:

- Olmsted County Public Health Services.

Goal and Strategies:

- Increase usage of the CredibleMind platform.

Data:

- 4,592 users in 2024.

Update/Next Steps:

- Marketing materials have been created and will be published on an updated Olmsted County CredibleMind webpage. These materials will make utilizing CredibleMind for community partners, worksites, schools easier. Materials include already written newsletter articles, created social media graphics, and posts and posters for general public to print and use directly from our webpage.
- Rochester Chamber of Commerce: Leadership Greater Rochester (LGR) cohort had CredibleMind as one of their community initiative projects this year and assisted in creating the posters mentioned above and also created Forest Bathing posters that have been installed in local parks in Olmsted County with a QR code directing park users to CredibleMind - Forest Bathing content.
- Additional funds were also used within CredibleMind to purchase Google Ads to promote CredibleMind to our local residents. Google Ads pushed residents to complete assessments. As of November 2024, 505 users have taken the 'Are Your Off Days A Sign of Depression' assessment and 164 have taken the 'Mental Health Check-in' assessment which have been two of the top assessments that is being advertised within Google Ads.
- The health promotion team has conducted 15 presentations to local organizations since the launch last year.

Organization:

- Olmsted Medical Center.

Goal and Strategies:

- Improve mental health service accessibility by diversifying support beyond Psychiatry/Psychology Departments.
 - Introduce nurse visits for ongoing assistance between provider appointments, encompassing medication review, monitoring, and addressing patient concerns.
- Expand outreach services to branch offices, additional departments, and community partners, ensuring comprehensive coverage and support.

Data:

- Over 100 nurse visits in six months in 2024.
- Over 15% of psych visits completed via telemedicine.

Update:

- Over 30% of all telemedicine visits were in the Psychiatry/Psychology department in 2024.
- Procedures for treatment of patients with suicide ideation were implemented in 2024. Active Aging Services providers are available 24/7 to staff, patients, and support persons in need. Clinical Social Services continues to meet with the department of Psychiatry and Psychology leadership three times a week to discuss strategies to maintain/improve access for mental health, be aware of upcoming recruitment needs, and discuss ongoing ways to collaborate and implement specialty care for patients with suicide ideation. In addition, all social workers and two Active Aging Services nurses became certified in Mental Health First Aid in 2024.
- In 2024, the Psychiatry and Psychology department added additional services to care for the mental health population. This includes group therapy sessions, specialized visits at the Northwest Clinic, non-

traditional visits (telehealth, phone), and psychiatry and psychology availability at Active Aging Services appointments. In addition, monthly psychotherapy services are provided to University of Minnesota Rochester students by a clinical social worker as well as a pilot program for patients with sleep insomnia.

- In addition, the Psychiatry nursing team offers long-acting psychotropic injection services and nursing visits for patients seen in the department. These nursing visits enable patients to receive timely care when an appointment with their primary care provider is unavailable. The nursing team works closely with the patient's provider to address immediate needs and provide additional support as necessary, enhancing access to services in the department. Additionally, the Psychiatry nursing team offers behavioral activation therapy for patients referred by Psychiatry and Psychology providers.

Organization:

- Rochester Public Schools.

Goal and Strategies:

- Implement universal mental health screening in all school buildings within the Rochester Public School district.
 - In school years 23 - 24, pilot two validated and normed mental health screeners in eight buildings who have self-selected screening as a goal.
 - Using data and feedback from the two screeners, select one for universal adoption in Rochester Public Schools.
 - Screening will be implemented three times a year and be used to identify students for referral to intervention resources as appropriate.
 - Screening data will also be used to inform building-wide and district-wide initiatives.

Data:

- As of early November 2024, 10 buildings were participating in screening efforts, with a total of roughly 900 students screened.

Update/Next Steps:

- RPS will continue to work towards full implementation of universal mental health screening. RPS has increased the number of students screened for the 24 - 25 school year and will work towards further increasing that number in the 25 - 26 school year.

Conclusion

Despite 2024 being the first year of the new three-year CHIP cycle, and the beginning of the pilot of the “collective impact” approach, there was incredible energy around the work. Eight different organizations identified specific strategies to contribute to the collective impact approach, and three additional groups implemented collaborative strategies. Given this community-wide energy, the CHAP process has begun identifying opportunities to expand the collective impact approach with other organizations in the community.

A few common themes from the various strategies include:

- Assessment of current situations and data-driven solutions.
- Partnership establishment and expansion.
- Information sharing with clients and patients.
- Increasing accessibility of services.
- Educating the community.

Additionally, the identification of access to care as one of the health priorities (2024 was the first year with it as a priority) has influenced work throughout the community.

Communication about CHIP progress occurs in different settings. Firstly, every quarter, the CHAP process hosts a community-wide meeting called the Health Assessment Planning Partnership (HAPP). Beginning in 2024, time has been devoted for organizations contributing to the CHIP to share progress on their efforts on an annual basis. Secondly, every January, the CHAP process will continue to release this CHIP annual progress report to the community.

The CHAP process is looking forward to continued expansion, collaboration, and impact of this work.

Record of Changes

Date	Changes/Updates Summary	Responsible Person(s)

Acknowledgements

A special thank you to all the individuals, organizations, and partners that have been involved throughout the CHAP process!

The development of the CHIP Annual Report would not have been feasible without the leadership, guidance, direction, and dedication from the:

- CHAP Core Group.
- Coalition for Community Health Integration.
- Health Assessment Planning Partnership.
- Organizations implementing strategies to address the health issues.

Questions regarding the CHIP document or process can be directed to:

OCPHS

Performance Management, Quality Improvement, and Accreditation Team

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Appendix A- Non-Collective Impact Strategies

Below are some additional efforts being implemented around each priority that are not part of the collective impact approach. The list is not exhaustive.

Access to Care

- Expansion of specialty care clinics at [Salvation Army's Good Samaritan Clinic](#).
- [Mayo Clinic's Cancer Care Beyond Walls](#) initiative to reach families in their homes and local communities.
- OCPHS leading workgroups and strategies on a variety of vaccine preventable diseases and other diseases, including STIs/STD, HIV, and tuberculosis.
- OCPHS's Healthy Homes [website](#).
- OCPHS continues to partner with local health care providers to increase childhood lead testing.
- OCPHS and Cradle 2 Career led co-design efforts to better understand barriers in accessing prenatal care.
- [OMC](#) working on telehealth in rural communities.
- Intercultural Mutual Assistance Association's (IMAA) Community Health Worker outreach to the immigrant and refugee community.
- Children's Dental Health Taskforce relaunched with support from OCPHS.
- [The Landing's](#) effort to increase access to services for those experiencing homelessness.
- The [Southeast Regional Crisis Center's \(SERCC\)](#) work to increase services for those facing mental health crisis.
- OCPHS' Women Infant and Children (WIC) program being on-site at OMC's NW clinic, along with WIC allowing online scheduling and grocery shopping.
- [Zumbro Valley Health Center's](#) social determinants of health screening with clients and then connecting them with resources.
- Zumbro Valley Medical Society's [Street Medicine Initiatives](#).
- Philanthropic programs prioritizing and increasing grants to community health priorities in Olmsted County.

Drug Use

- OCPHS ran [Be in the Know](#) campaign around opioid misuse this past summer.
- Olmsted County [DART \(Drug and Alcohol Response Team\)](#) is implementing alcohol and drug prevention and mitigation efforts.
- Mayo Clinic's Opioid Stewardship Program to limit unnecessary use of opioids with medical treatment.
- OCPHS collects real-time emergency room data to drive strategy and decision-making for partners throughout the community.
- OCPHS developing and sharing data with health care and community partners around overdoses and suicides.
- OCPHS's Cannabis Substance Use Prevention Grant, which is funding to address cannabis and other drug use prevention work.
- Community Engagement Response Team (CERT) members Thursday evening group titled "Hustlers Anonymous."
- Participation in events like Safe City Nights to educate the community about substances.
- Peer Specialist benefit expanded for commercial and Medicare Advantage prescription drug plan (MAPD) members, in addition to Medicaid.

- [RPS](#) has hired licensed drug and alcohol counselors for their schools.
- Substance use screenings and referrals by multiple agencies.
- Tackling Overdose with Networks (TOWNS) grant through the Minnesota Department of Health, and received by OMC, to develop an alcohol and drug counselling program.

Mental Health

- Development and pilot of the Mental Health Advisor Screening and Intervention Program within Mayo Clinic primary care.
- [Family Service Rochester](#) is building a resource center, that will provide comprehensive resources for families.
- [Fernbrook](#) is changing the way they bring services to families through in-home and telemedicine, along with now offering autism testing.
- Informal LGBTQIA+ mental health and older adult outreach by various Olmsted County organizations.
- Mayo Clinic is building an EmPATH Center, which will create a more comprehensive psychiatric emergency service.
- Mental health screenings and referrals by multiple agencies.
- Nature Rx class at RPS's Alternative Learning Center.
- OCPHS classroom education for schools throughout Olmsted County, focused on mental health and suicide awareness.
- OCPHS's Healthy Children and Family's mothers and babies intervention, and training home visiting nurses in evidence-based mental health initiative.
- OCPHS's mental health first aid and refugee health programs.
- OCPHS's suicide prevention grant work.
- OMC's nurse-led SIAD program.
- OMC has added clinical health psychology, child psychiatrists, and group therapy to their services.
- OCPHS' promotion of the [Family Acceptance Project, a support for LGBTQIA+ youth and their families.](#)

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