



COMMUNITY HEALTH NEEDS ASSESSMENT

Greater Staples and Motley Community

2025 Report



A MESSAGE FROM THE CEO

Dear Lakewood Health System Community,

I am pleased to announce that the results of the 2025 Community Health Needs Assessment (CHNA) are now publicly available. This comprehensive report, our fifth since 2013, offers an in-depth analysis of our community's health status and outlines the key priorities for improvement.

The CHNA process involved significant input from community members, partners, and our employees, providing invaluable insights into local health needs and service gaps. The findings have led to the identification of three main priority areas that will guide our strategic initiatives and investments in the immediate, near-term, and long-term future.

To honor our mission and our belief that every person deserves the opportunity to lead a healthy and fulfilling life, Lakewood Health System is placing health equity at the center of these three core areas for improvement.

1. **Elevate Community Well-Being:** Cultivate robust community networks that promote a strong sense of belonging, support mental health, and expand services beyond traditional healthcare settings.
2. **Ensure Access to Resources and Care:** Break down financial, logistical, and social barriers that prevent vulnerable community members from accessing vital health services and life-stabilizing resources.
3. **Foster Vibrant Communities:** Improve physical infrastructure and community environments to promote active and healthy lifestyles.

Lakewood Health System extends its sincere gratitude to all those who participated in the CHNA process. Your engagement is fundamental to this process, ensuring that the CHNA accurately reflects the aspirations and health needs of the region. Your continued engagement and partnership will be vital as we develop and implement new strategies.

The full report is available for review at www.lakewoodhealthsystem.com. We invite all community members to explore the results and see how their voice is helping to shape the future of health in our community and in the region.

Sincerely,



Lisa Bjerga,
President and Chief Executive Officer



—”—
To provide quality,
personalized
healthcare for a
lifetime.

—”—
LAKEWOOD HEALTH SYSTEM
MISSION STATEMENT

ACKNOWLEDGEMENT

Lakewood Health System CHNA Team

Executive Sponsor

Alicia Bauman,
Chief Talent Officer

Senior Lead

Becky Misegades,
Care Management Director

Project Lead

Amy Wiese,
Community Health Supervisor

Data Leads

Chandler Trout,
Strategic Business Analyst

Karen Knoll,
RN Clinical Informaticist

Community Affairs

Mary Theurer,
Board of Directors, Member

Marketing and Communication Lead

Aly Twardowski,
Sr. Marketing & Event Project
Manager

Author, Compliance and Creative Design Lead

Kathy Geislinger,
Grant Manager

CHNA Collaborative

Nate Bertram, Morrison County Public
Health - Health and Human Services
Director

Carmen Bakowski, Morrison County
Public Health - Environmental
Specialist and Community Health
Educator

Emily Loomis, Morrison County Public
Health - Community Health Educator

Cindy Nienaber, Morrison County
Public Health - Nursing Supervisor

Katherine Mackedanz, Todd County -
Community Health Manager

Sergio Aguilera, Todd County -
Health Education Coordinator

Sarah Ness, Wadena County - Public
Health Director

Carrie Gjovik, Wadena County -
Health Educator

Laure Laughlin, Wadena County -
Health Educator

Amy Yaeger, Astera Health - Director
of Strategic Marketing and Business
Development

Charlotte Merchlewicz, CentraCare -
Long Prairie - Community Health
Specialist

Josiah Hoagland, CHI St. Gabriel's
Health - Mission Director

Ashley Carroll, CHI St. Gabriel's Health
- Director, Healthy Communities &
Population Health

Alicia Bauman, Lakewood Health
System - Chief Talent Officer

Amy Wiese, Lakewood Health
System - Community Health
Supervisor

Ann Kinney, Minnesota Department of
Health - Senior Research Scientist

ABOUT THE COMMUNITY HEALTH NEEDS ASSESSMENT

Lakewood Health System collaborates with community partners every three years to conduct a Community Health Needs Assessment (CHNA). Mandated by the Affordable Care Act (ACA) for tax-exempt hospitals, this process systematically evaluates community health. It identifies critical health challenges and service gaps by gathering and analyzing both qualitative and quantitative data.

To comply with the ACA, the CHNA requires nonprofit hospitals to collect input from a broad and diverse group of community members. For Lakewood Health System, community members include rural residents, representatives of medically underserved populations, and individuals from low-income and minority groups. These insights are then used to inform strategic initiatives aimed at addressing the most pressing health challenges.

Lakewood Health System participated in the regional CHNA Collaborative to pool resources and expertise with local public health and hospitals. This joint assessment process benefits the populations of the Morrison, Todd, and Wadena County region by providing a comprehensive overview of local health needs. The collaborative has sponsored regular assessments, with previous surveys issued in 2012, 2015, 2018, and 2021.

The Lakewood Health System Board of Directors has approved and adopted this report, which fulfills the CHNA requirements mandated by the ACA.



A digital copy of this CHNA is publicly available: <https://www.lakewoodhealthsystem.com/patients-visitors/community-health/>

Adopted by Lakewood Health System's Board of Directors on December 18, 2025.

Made publicly available on December 31, 2025.

To receive a hardcopy of this report or view survey results, email amywiese@lakewoodhealthsystem.com

TABLE OF CONTENT

Accomplishments	6
Executive Summary	13
Data Collection and Methodology	17
The Staples-Motley Community	21
Priority #1: Elevate Community Well-Being	35
Priority #2: Ensure Access to Resources and Care	44
Priority #3: Foster Vibrant Communities	58
CHNA Resources	69

ACCOMPLISHMENTS

The following pages highlight Lakewood Health System's strategic investments and the measurable outcomes achieved across the top three priority community health needs between 2022-2024:

- Promoting Quality of Life
- Improving Access to Resources & Care
- Enhancing the Built Environment



ACCOMPLISHMENTS

The 2022 CHNA served as a roadmap for Lakewood Health System to improve the health and well-being of the Staples-Motley community and the Morrison, Todd, and Wadena County region. By focusing on the top three priority health needs, the organization was able to inform investments, allocate resources, and improve care across hospitals, clinics, and health programs.

The 2022 CHNA placed a strong emphasis on addressing the underlying Social Determinants of Health (SDOH) and promoting health equity. It specifically focused on individuals and families who were living in poverty, ethnically diverse, aged 60 or older, and living in remote rural communities.

Lakewood Health System is pleased to report its achievements from 2022 to 2024, which have enhanced health outcomes and promoted health equity within the community and across the region.

2022 CHNA: Top Three Priority Community Health Needs

1

Promoting
Quality of Life

2

Improving
Access to Resources
and Care

3

Enhancing the
Built Environments



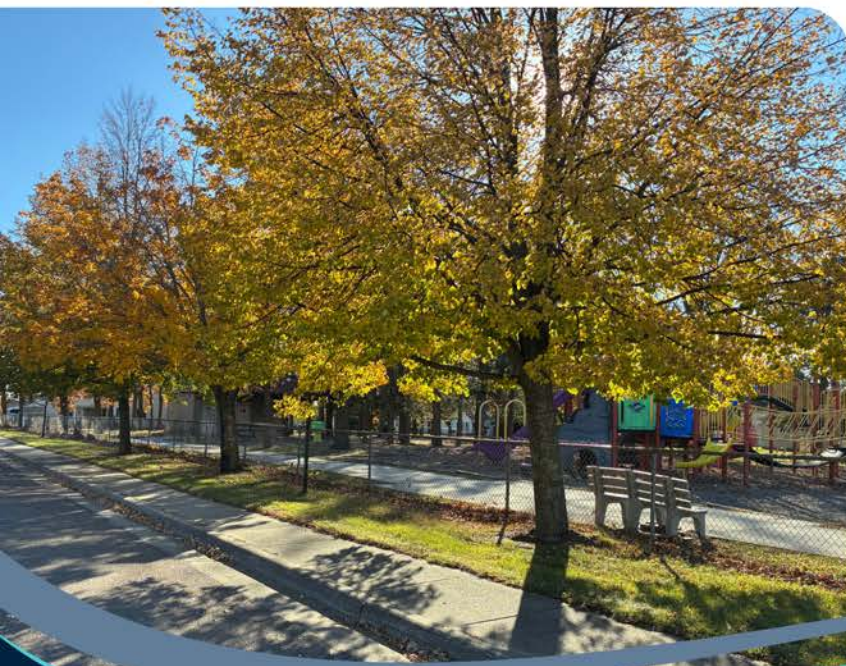
ACCOMPLISHMENTS

Promoting Quality of Life

The “Promoting Quality of Life” priority area implemented strategies to improve how well and how healthy a person feels. When a person feels physically, mentally, and socially healthy, their quality of life improves significantly.

- **Walk with A Doc:** Launched in May 2022, the Walk with A Doc program successfully hosted weekly walking sessions from spring through fall, engaging an average of 12 patients per session. Each week, providers shared health and wellness education and answered patient questions during a casual walk.
- **LEAP:** Lakewood Health System’s CEO was a member of a local advocacy group called LEAP, which stands for Leadership, Engagement, Advocacy, and Positiveness. The non-profit’s purpose is to create a stronger, healthier Staples community by engaging community and seeking funds to support local initiatives. LEAP helped to reestablish the Staples Trails Committee, restructure the Staples Motley Arts Council, and launched a community capital campaign to support local projects. LEAP is also the fiscal host to more than 20 community clubs and organizations, allowing those groups to seek donations and grants.
- **Cycling without Age:** The Care Center’s Cycling Without Age program used trained staff ambassadors to provide trishaw rides around the community to residents.
- **Alzheimer’s Support Group:** Lakewood Health System successfully facilitated a recurring Alzheimer’s Support Group. This group was held on the first Wednesday of each month, providing ongoing emotional support, resources, and a safe space for five to six participants regularly.

- **Grief Support:** Lakewood Health System offered 90-minute grief support sessions, twice annually in the spring and fall, for individuals navigating the death of a loved one. Sessions were guided by three trained facilitators and supported an average of eight community members.
- **Prepared Childbirth Class:** The Prepared Childbirth Class was attended by 66 parents-to-be who were in their fifth to eighth month of pregnancy. The class focused on topics related to labor and delivery.
- **Sibling Preparation Class:** Lakewood Health System offered Sibling Preparation Classes to help prepare children for a new baby in the home. The class provided 24 participants with age-appropriate activities and skills to handle and help care for a newborn.
- **Essentials of Breastfeeding Class:** Lakewood Health System offered an Essentials of Breastfeeding class to 14 pregnant women and their support persons. The class was taught by International Board-Certified Lactation Consultants (IBCLC) and covered the fundamentals of breastfeeding topics.
- **CLC Mental Health:** Lakewood Health System collaborated with Central Lakes College (CLC) to provide mental health therapy for college students. When the initiative started in 2022, behavioral health specialists provided an average of eight to nine hours of therapy each week, growing to 16 - 20 hours per week in 2024. The partnership connected 723 college students to mental health services.
- **Staples-Motley Beyond Poverty:** The Community Health Supervisor served as co-chair and chair of the Staples-Motley Beyond Poverty committee in 2023 and 2024. The non-profit hosted multiple events and educational sessions in the past three years that connected hundreds of individuals and families with local and regional resources.
- **Todd County Promotores:** Through the Todd County Promotores program, funded by a Blue Cross Blue Shield of MN grant, Lakewood Health System supported Hispanic families by employing a Spanish-speaking Community Health Worker (CHW) to assist peripartum women navigate resources and healthcare. The CHW screened mothers and children for social needs and disparities, connecting them to vital supports and services in-house or to local agencies. Since 2023, 97 mothers and 135 children received resources, health services, and legal aid to help close gaps in health equity.
- **Mental Health Anti-Stigma Campaign:** To address the mental health needs of Todd County’s expanding Hispanic population, a Spanish-language anti-stigma campaign was launched in December 2024. The initiative actively engaged the community by publishing informational articles written by behavioral health providers in the local Spanish-language newspaper. In addition, magnets and other practical mental health resources were disseminated to both residents and service agencies.



ACCOMPLISHMENTS

Improving Access to Resources and Care

The “Improving Access to Resources and Care” priority area implemented strategies that helped individuals and families navigate and access county and government resources, insurance coverage, healthcare services, and support from local or regional agencies. These resources and care services are essential to improving health outcomes and quality of life.

Navigating Food Resources

- **Social Determinants of Health Screening:** This system-wide initiative screens patients for health-related social needs – transportation, utilizes, relationship safety, and financial resource strain – during clinic visits and at hospital discharge. Out of 149,092 screenings, 2,310 patients were referred to the Community Health team for further support. Ultimately, 7,564 patients and family members received connections to food provisions and other vital resources.
- **Meals at Discharge:** This recovery meals initiative provided over 5,410 nutritious meals to 387 patients. Designed to aid in home recovery, the program supported an average of 11 new patients each month, providing each patient with up to 14 prepared meals.
- **Meals at Baby:** The hospital's recovery meal program distributed more than 1,170 nutritious meals to a total of 390 obstetrics patients and their family members. This included an average of 17 patients per month, with each receiving up to three meals to support their healing.
- **Food Farmacy:** Through this monthly food share initiative, Lakewood Health System addressed food insecurity by providing vital nutrition to 130 families, which included 367 individuals. Each month, the program delivered robust food boxes containing eight to ten pounds of lean protein and 12–15 pounds of fresh produce or farmers market incentives, providing consistent access to healthy food for a vulnerable population.
- **Cardinal Pax:** To combat weekend food insecurity, Lakewood Health System provides 75 students from the Staples-Motley Elementary School with backpack meals each Friday during the school year. The backpacks contain nutritious provisions, including two breakfasts and two lunches.
- **Fresh Delivered:** Throughout the year, Lakewood Health System delivered food shares to two senior housing complexes, directly benefitting 75 older adults experiencing food insecurity. The program supplied each recipient with eight to ten pounds of lean protein and 12–15 pounds of fresh produce every month.
- **Acute Care Boxes:** Lakewood Health System's clinics provided a one-time emergency food share – an Acute Care Box – to an average of 14 patients per month. These patients screened positive for food insecurity and needed immediate support. Following the distribution, patients were referred to the Community Health team for further assistance with health-related social needs.
- **Culturally Inclusive Meals:** In a joint effort with Lutheran Social Services, Lakewood Health System's CHW distributed 1,420 prepared meals that meet the diverse tastes, hunger needs, and preferences of the Hispanic community.
- **Nourish Health:** The Nourish Health pilot program was launched in the fall of 2024 with the objective of addressing food insecurity within the behavioral health patient population. Through a dedicated screening process, the project identified 22 patients in need and equipped them with essential food and household resources, including prepared meals, kitchen supplies, small appliances, and pantry items.
- **SNAP Benefits:** Lakewood Health System's Community Health team provided one-on-one assistance to 36 patients and community members to help them navigate the application process, which included eligibility screening and help with submitting documents.
- **Market Bucks:** Lakewood Health System is proud to be an authorized SNAP retailer. The Market Bucks program allows customers to convert their SNAP and The Food Group benefits into tokens for use at the Lakewood Farmers Market. This initiative has put more than \$15,430 directly into the hands of shoppers, helping them afford nutritious food while supporting our local vendors.



ACCOMPLISHMENTS



- **Quick Care and Same Day Clinics:** In 2024, Lakewood Health System served 10,293 patients through its Quick Care (Mon–Fri) and Same-Day (Mon–Sat) clinics, ensuring rapid, reliable access to essential services.
- **Sports Physicals:** Collaborated with TCO to offer free sports physicals to 39 students. Sports physicals are crucial for the safety and well-being of young athletes as they identify underlying health conditions or issues that could pose risks during sports participation.
- **Child and Teen Check-up Outreach:** Lakewood Health System achieved a 70.5% completion rate for Child and Teen Check-Ups in 2024. This success was driven by the Community Health team's proactive engagement with families via direct calls, digital MyChart alerts, and traditional mail.
- **Live Well Events:** Annually, Lakewood Health System's "Live Well: A Celebration of Aging" event connected 125 older adults with regional and state experts on aging.
- **Melanoma Monday:** Lakewood Health System's dermatology team offered free screenings to raise awareness and promote early detection of skin cancer. Nearly 60 patients attended these screening events.
- **Car Seat Clinics:** In partnership with local public health, Lakewood Health System hosted free car seat clinics during the farmers market, conducting 21 car seat safety checks for community members.
- **Minnesota Path to Value (MNPTV):** As a partner of the MNPTV, Lakewood Health System implemented a demonstration project for patients with congestive heart failure (CHF). The initiative sought to reduce hospital readmissions and improve patient outcomes by connecting clinical care with support for social needs. Key strategies included Walk with a Doc, remote monitoring, expanded clinical screenings, and cross-sector partnerships.
- **Reach Out and Read:** The Reach Out and Read program promotes early literacy by providing age-appropriate books to children during pediatric well-child visits. Lakewood Health System's clinics distributed 9,164 books to children aged six months to five years. These books helped to build a love for reading and strengthen parent-child bonds.

Accessing Healthcare Services

- **MNsure Navigators:** Lakewood Health System added four MNsure navigators who have helped 367 individuals and families gain or renew their healthcare coverage. This critical support, available to both new applicants and those needing to renew plans, was provided by specialists across two departments: the Community Health team and the Cancer Center team.
- **Transition of Care:** In October 2024, Lakewood Health System implemented a transition of care program led by an Advanced Practice Provider (APP). This initiative provided comprehensive support for hospitalized patients and included 115 timely post-discharge follow-up visits. As a result, the hospital saw a decrease in readmission rates and a significant improvement in the continuity of patient care.
- **Cancer Services:** Lakewood Health System expanded its cancer services by hiring new providers and care team members. This expansion, along with a multimillion-dollar investment, will bring a new cancer center to the community in Fall 2025, offering closer-to-home diagnosis and treatment for rural patients.
- **Optimize and Establish New Service Lines:** Lakewood Health System expanded its services to improve community health outcomes and reduce wait times by ensuring residents can access crucial services locally. The system added new physicians and mid-level and specialty providers, as well as enhanced and expanded service lines, including oncology, urology, rheumatology, palliative care, hematology, chiropractic, and orthopedics.
- **Access to Primary Care:** With the addition of 28 new providers, Lakewood Health System has improved patients' ability to schedule primary care appointments. This progress is reflected in the decreased waiting period for the third next available appointment, an industry-standard metric for measuring access to care.
- **New ACO Partner:** Since joining the Aledade Accountable Care Organization (ACO) in 2023, participation in the Medicare Shared Savings Program (MSSP) has enabled Lakewood Health System to transform how it cares for Medicare patients. The organization invested resources in dedicated care teams and data-driven technology which provided more effective care coordination, proactive population health management, and access to enhanced services.
- **Rural Residency Programs:** Building on its successful collaboration with the University of Minnesota's Rural Physician Associate Program (RPAP), Lakewood Health System secured a Health Resources and Services Administration (HRSA) grant in August 2024 to establish a new rural residency program in Staples, MN. The program will strengthen the system's dedication to developing the next generation of rural healthcare professionals.

ACCOMPLISHMENTS

Enhancing the Built Environment

The “Enhancing the Built Environment” priority area implemented strategies to improve the physical spaces where people live, learn, work, and play. The built environments that make up a community can profoundly impact health, social well-being, and quality of life.

- **The Nest:** The Nest is the result of a joint venture between Lakewood Health System and the Staples-Motley School District to expand health and fitness resources for the community. Completed and opened in December 2024, the facility is conveniently located at the high school and offers multi-generational spaces for community members. It is accessible to the public through affordable monthly membership options. Lakewood Health System invested \$6 million to the project.
- **Senior-Friendly Fitness Equipment:** Lakewood Health System was awarded a \$50,000 grant to enhance senior and community wellness. The funding was used to purchase specialized “senior-friendly” fitness equipment, enabling older adults in the community to safely engage in resistance and cardio training.
- **Dino Park:** Lakewood Health System owns a community park in the city of Staples, affectionately known as Dino Park, a popular gathering place for neighborhood children and a local childcare center. The park's upkeep, including aesthetics and cleanliness, is managed by the organization's maintenance and housekeeping departments during the 28-week park season.
- **Lakewood Farmers Market:** Lakewood Health System allocated \$83,240 to its Farmers Market Bucks program in the past three years, benefiting patients, employees, and local growers. The Lakewood Farmers Market operated from May through October, attracting an average of 200 visitors weekly.



- **Housing:** Lakewood Health System's CEO is a member of the Staples-Motley Housing Group, LLC – a collaborative of community-based organizations and businesses who share a collective interest in enhancing housing options within the Staples community. The Staples Housing Group purchased seven vacant parcels of land from the city of Staples in 2022, with the intent to construct seven single-family homes. To date, four homes have been constructed and sold.
- **The Plaza:** Lakewood Health System purchased a 1.789-acre plot of land in the city of Staples to construct a mixed-use building. The Plaza features a ground floor with 16,786 square feet of commercial and retail space and a second floor with 11 residential apartments for lease. This project is intended to increase access to healthcare, offer affordable housing, and spur economic growth by providing new business opportunities. The Plaza opened for business on January 3, 2024, with two new tenants, Twin Cities Orthopedics (TCO) – Staples Therapy and Longbella Drug by Lakewood.
- **Magic Forest Childcare Center:** Lakewood Health System provided rental space for a local company to operate a childcare center in the City of Staples. The center served nearly 50 area children between the ages of six weeks and five years old.

ACCOMPLISHMENTS

Community Benefits and Contributions

The CHNA is foundational to the organization's mission, guiding Lakewood Health System's strategic decision-making and Community Benefit investments. From 2022 to 2024, Lakewood Health System delivered significant contributions designed to elevate the quality of patient care and tackle critical health priorities within the Staples-Motley community and surrounding three-county region. Below is a snapshot of Lakewood Health System's financial commitment and impact during this three-year period.



Source: Lakewood Health System - Fiscal Department, 2025.



EXECUTIVE SUMMARY

Lakewood Health System is at the heart of a collaborative network spanning the Staples-Motley community and a three-county region. By uniting social service agencies, hospitals, civic organizations, and nonprofits, the network works to understand and address the most pressing health challenges of rural residents. This integrated approach allows partners to collectively improve community health and well-being.



ABOUT LAKEWOOD HEALTH SYSTEM

Lakewood Health System (LHS) is an independent and non-profit rural healthcare system located in Staples, Minnesota. It was founded in 1936 and has grown from a small city-owned hospital to a nationally recognized leader in healthcare for serving the community and surrounding region with innovative patient care and rural health initiatives.

Lakewood operates a critical access hospital, five (5) rural health clinics, a long-term care facility, and two (2) assisted living facilities.

The hospital is home to acute care services such as surgery (general and orthopedic), radiology, laboratory, emergency department (9 beds), Staples Ambulance, rehab, pharmacy, and anesthesia.

Primary care is provided at Lakewood Health System's five clinics in Browerville, Eagle Bend, Motley, Pillager, and at the main hospital campus location in Staples. Clinic services include women's health, Medical Home (aka Health Care Home), and behavioral health/psychiatry, psychology, clinical social work, and clinical counseling.

Specialty care services can be found at the hospital and at clinic locations, including cardiology, ear nose and throat, audiology, chiropractic, dentistry, dermatology, endocrinology, nephrology, obstetrics and gynecology, oncology, ophthalmology, orthopedics, pain clinic, pediatrics, podiatry, pulmonology, rheumatology and urology. Specialty service lines are provided by both internal and contracted providers.

Lakewood Health System offers comprehensive senior services located in Staples, including home care, hospice, palliative care, memory care, Care Van transportation, social services, and spiritual care.



Lakewood Health System's hospital is one of four located in the three-county region and located within a 40-mile radius of Staples. The nearest hospital is Astera Health (Wadena County) which is approximately 21 miles northwest. CentraCare-Long Prairie (Todd County) is roughly 32 miles south. While CHI St. Gabriel's Hospital (Morrison County) is just over 37 miles southeast.

A Snapshot of Lakewood Health System



Source: Lakewood Health System - Human Resources, 2025.

COMMUNITY SERVED

Past and current CHNA processes have helped Lakewood Health System develop strategies and prioritize investments that have improved the health and well-being of residents in the Staples-Motley community. Throughout the years, the assessment process has fostered and strengthened relationships among public health agencies and neighboring hospitals.

In 2013, the Morrison-Todd-Wadena Community Health Board (MTW-CHB), the legal governing authority responsible for providing public health services to Morrison, Todd, and Wadena County (three-county region), created the CHNA Collaborative to eliminate duplicative health needs assessment efforts between local public health and hospitals. Every three years, subsequent to 2013, the MTW-CHB has guided the CHNA Collaborative on a journey to gain a deeper understanding of the most critical needs in the three-county region.

In addition to the Staples-Motley community, Lakewood Health System places an emphasis on learning about the health needs, assets and priorities of individuals and families living in the three-county region. Since 60% of Lakewood Health System's patient population resides in these three counties, it is important to understand the health and social conditions that affect this whole geographic region.

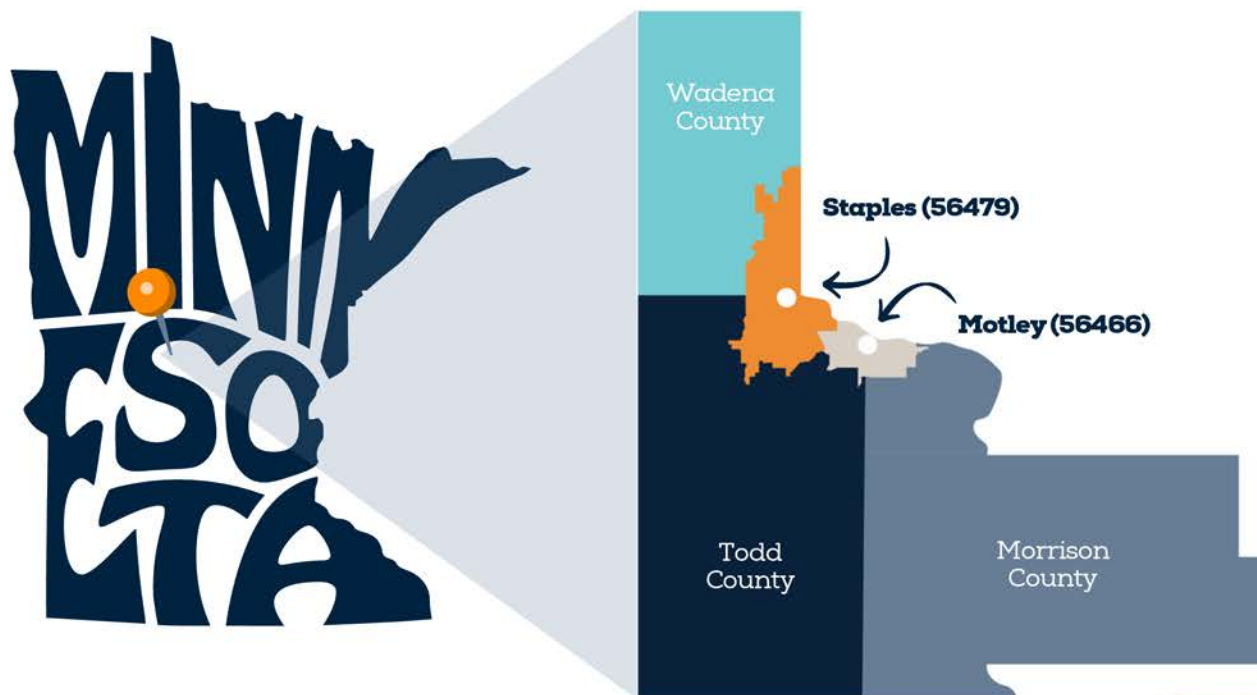
When possible, this report includes data comparisons between the Staples-Motley community, the three-county region, and the state of Minnesota.

For the purpose of this report, the following definition of "community" has been adopted by Lakewood Health System.

The community served is defined by the zip code tabulation areas for Staples (56479) and Motley (56466) - herein referred to as the Staples-Motley community.

The Staples-Motley community is home to more than 8,540 individuals and is geographically located in portions of Morrison, Todd and Wadena Counties - herein referred to as the three-county region.

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.



PRIORITY HEALTH NEEDS

Top Three Priority Health Needs

In its 2025 assessment, Lakewood Health System confirmed that the top three priority health needs identified in 2022 remain highly relevant. The organization selected these priorities based on a data-driven analysis of recent trends, community prevalence, potential impact on health outcomes, and organizational capacity to achieve meaningful improvements.

Lakewood Health System is committed to health equity – ensuring all individuals can attain their highest possible level of health by actively working to remove systemic barriers. This commitment is central to the organization's strategy as it addresses the community's primary health needs.

Elevate Community Well-Being

How well a person feels physically and mentally significantly shapes their health outcomes and quality of life.

Ensure Access to Resources and Care

Access to healthcare, insurance, and public resources is vital for overall health and well-being.



Community Health Implementation Strategy Plan

The 2025 Community Health Needs Assessment (CHNA) provides the strategic foundation for Lakewood Health System's response to the community's unmet health needs. The health system's Community Health Implementation Strategy Plan translates the CHNA findings into a set of actionable initiatives. The plan can be found on at <https://www.lakewoodhealthsystem.com/patients-visitors/community-health/community-health-needs-assessment/>

The initiatives will be implemented over a three-year period, from January 2026 to December 2028, to advance the health and well-being of the community.

All implemented strategies will be measured and evaluated to determine if health needs are being met.

DATA COLLECTION AND METHODS

Health is not just a service – it's a community-wide commitment. Lakewood Health System stands at the center of this collaborative effort, working as a dedicated partner alongside a network of social service agencies, hospitals, civic organizations, and nonprofits. This alliance engages directly with residents to understand the unique challenges they face, driving forward progress that helps achieve the highest possible health outcomes for everyone.



DATA COLLECTION

To develop this CHNA report, Lakewood Health System used secondary and primary data to characterize the health of the Staples-Motley community.

Secondary Data:

Quantitative data and indicators collected by publicly available sources and internal electronic health records (EHR) data.

Primary Data:

Qualitative and quantitative data collected by the online 2024 Tri-County Community Health Survey. The data was analyzed and interpreted by a consultant to ensure a thorough and objective assessment of community health needs was conducted.

Secondary Data Collection

Lakewood Health System used multiple sources to collect and analyze secondary data with direct relevance to the CHNA process. The following list represents the public sources utilized:

- Centers for Disease Control and Prevention (CDC)
 - Behavioral Risk Factor Surveillance System (BRFSS)
 - National Center for Chronic Disease Prevention and Promotion
 - National Vital Statistics System
 - PLACES: Local Data for Better Health
- Community Commons - Spark Maps
- Feeding America
- Healthy People 2030 - U.S. Department of Health and Human Services (HP 2030)
- Lakewood Health System
- Minnesota Department of Agriculture (MDA)
- Minnesota Department of Employment and Economic Development (MN DEED)
- Minnesota Department of Health (MDH)
- Minnesota Department of Human Services (DHS)
- United States Census Bureau (U.S. Census Bureau)
- United States Department of Agriculture (USDA)
- United States Health Resources and Services Administration (HRSA)
- University of Wisconsin Population Health Institute - County Health Rankings Report

Data Guides Decision-Making

As a result of collecting and analyzing robust secondary and primary data, a list of priority health needs emerged. Lakewood Health System's CHNA Team used the following criteria to further distinguish the top three community health needs.

- Data trends - comparing local, state, and national norms, where possible.
- Resident input on what factors affect their personal health and the health of the community.
- Ability to have an impact on the identified health needs.
- Alignment with Lakewood Health System's annual Strategic Plan.
- Prospective collaboration with multi-sector efforts focused on the same service area, population, and priorities.
- Current Lakewood Health System and local public health priorities and programs.
- Effectiveness of any existing programs and a gap analysis of where additional efforts are needed.



COLLECTION METHODS

Primary Data Collection

2024 Tri-County Community Health Survey: The Tri-County Community Health Survey was conducted between July 3 and September 13, 2024.

Survey Instrument: The CHNA Collaborative, with technical assistance from the Minnesota Department of Health's Center for Health Statistics, made a few key changes to the 2024 Tri-County Community Health Survey. The collaborative developed the survey questions, shortened the length of the survey, and conducted the survey primarily in digital format. The survey was available in both English and Spanish and was built using ArcGIS Survey123.

Survey Administration: The CHNA Collaborative distributed the survey link through email, social media, newsletters, and websites. Survey opportunities were also shared during community gatherings. Paper copies were available upon request and were manually entered into the electronic system by public health staff. Additionally, resources such as targeted marketing and paper copies were made accessible.

Methods: The 2024 Tri-County Community Health Survey was administered across Morrison, Todd, and Wadena Counties. A total of 1,861 adults completed the survey, representing a response base drawn from a tri-county population of 55,815. The survey instrument was designed to capture demographically representative insights across county lines and key subgroups.

Sampling was stratified to reflect geographic and demographic diversity, yielding a balanced dataset with confidence levels ranging from 85% to 95%, depending on subgroup size using American Community Survey Census (2022) data.

Margins of error were calculated for each county, gender, and Hispanic subgroup. At the regional level, the overall margin of error was $\pm 2.3\%$, while county-specific margins ranged from $\pm 3.5\%$ to $\pm 4.7\%$. Higher margins were observed in smaller subgroups, particularly Hispanic male and female respondents in Wadena County ($\pm 12\%$).

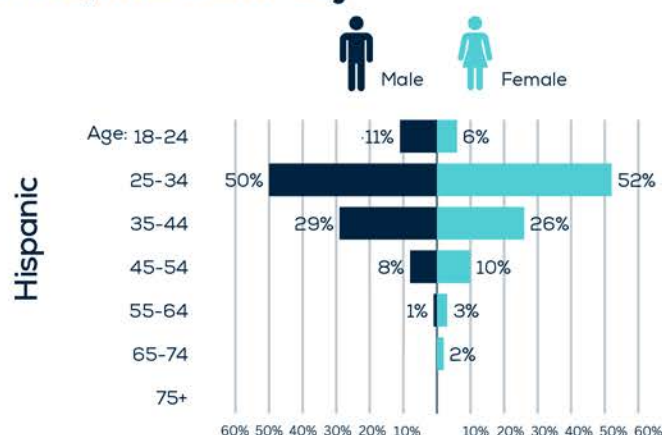
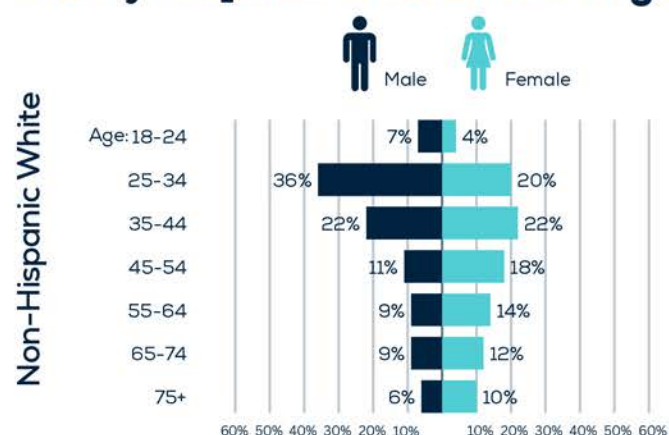
Confidence levels were assigned as follows: bold values reflect a 95% level; * denotes a 90% level; and ** indicates an 85% confidence level. These levels signify the reliability of the estimates. For example, a 95% confidence level suggests that repeated surveys would yield results within the given margin of error ($\pm$) 95 out of 100 times.

CONFIDENCE LEVELS - MARGIN OF ERROR						
	COUNTY	MALE	FEMALE	HISPANIC	H-MALE	H-FEMALE
MORRISON	3.5%	*4.8%	4.4%	4.5%	*4.7%	5.9%
TODD	3.8%	5.7%	4.6%	*5.5%	*8.5%	*7.0%
WADENA	4.7%	*7.0%	*4.8%	*8.8%	**12.0%	**12.0%
THREE-COUNTY REGION	2.3%	*3.3%	2.8%	3.9%	4.8%	4.5%

Data Reliability and Analysis: All survey data were thoroughly checked for completeness and consistency. The distribution of responses was examined across key demographic variables: age, gender, ethnicity, and geography. Statistical analyses, including chi-square tests, were performed to identify meaningful differences across counties and subpopulations. Subgroups with higher margins of error or lower confidence levels were interpreted with caution.

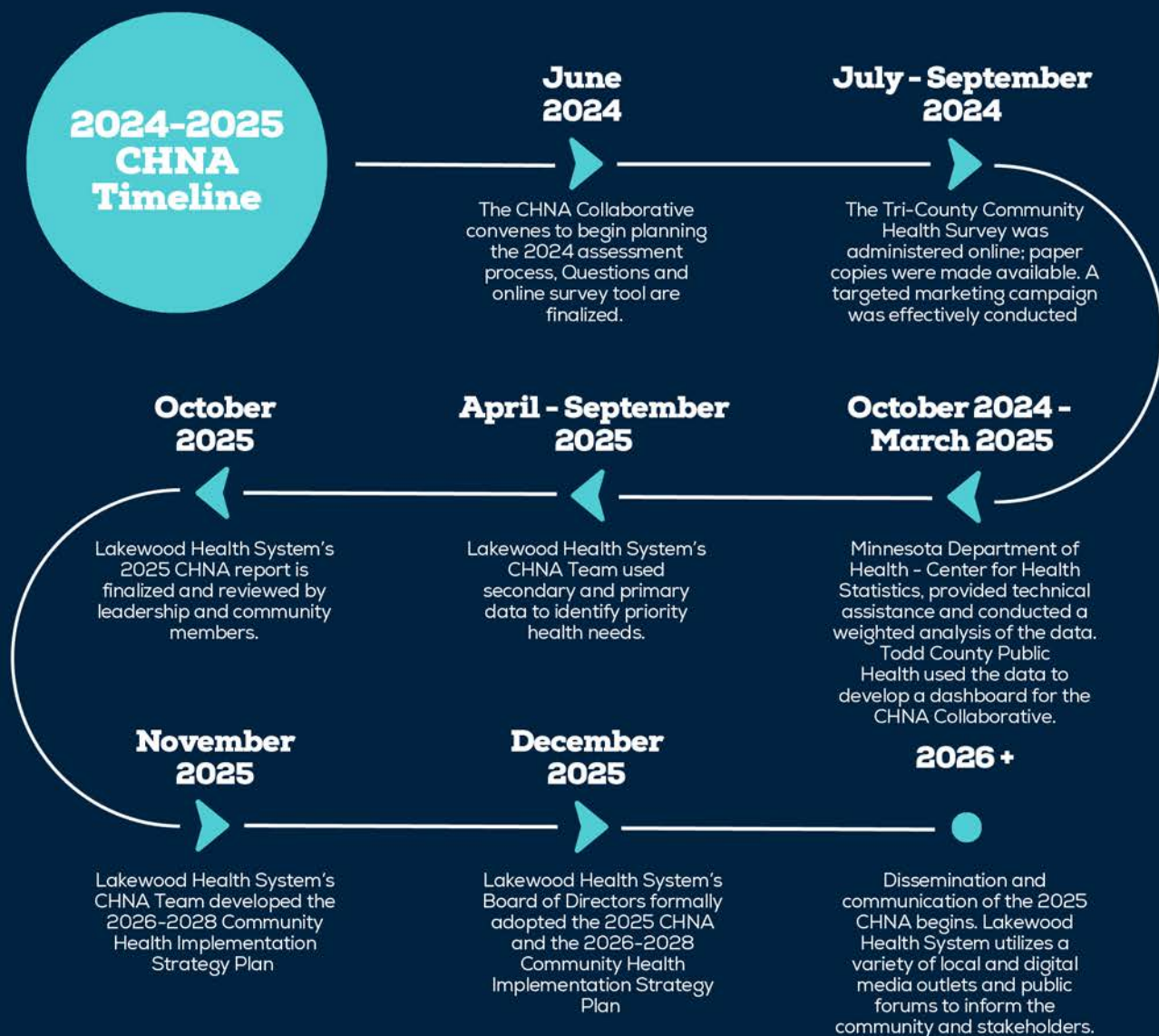
The final results highlight areas where the data is statistically sound, providing a strong foundation for effective public health and community planning.

Survey Response Distribution - Age, Gender, Race, and Ethnicity



Source: Tri-County Community Health Survey. Accessed on 7/29/2025.

CHNA PROCESS AND TIMELINE



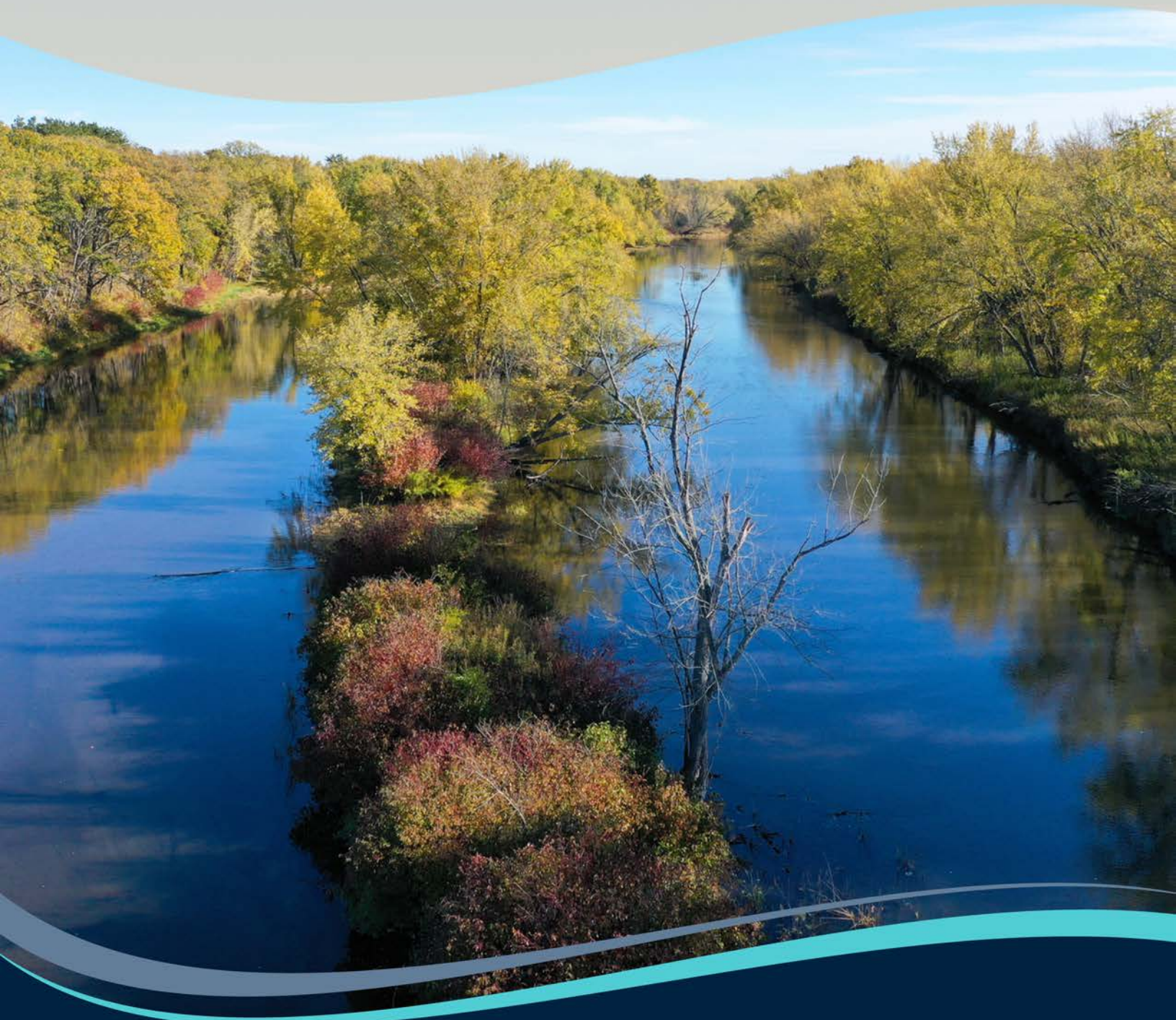
Report Limitations

Despite best efforts, it is important to note there may be limitations to the data collection process and the information found in this publication. Due to variations, timing and methodology of data sources, some population data and health indicators will present more recent and/or comprehensive data than others. Further, many health indicators of interest are available only at the county or state level and not at a granular or community level.

The information found in this CHNA report may differ from previous years and from neighboring hospitals and public health agencies who participated in the CHNA Collaborative. Differences in data sources, the communities and counties which were assessed, and prioritization processes may contribute to variances in findings.

THE STAPLES-MOTLEY COMMUNITY

The Staples-Motley community, located in the heart of central Minnesota, consists of two quintessential small towns that offer residents a unique blend of small-town charm and convenient amenities. This area features abundant outdoor recreation, a vibrant arts and culture scene, and a robust local business environment with strong roots in manufacturing. The community is further supported by key pillars such as Central Lakes College, the Staples-Motley School District, and Lakewood Health System.



POPULATION AND AGE

Staples-Motley Community:

A total of **8,144** people reside in the 384.85 square mile area of the Staples-Motley community. The population density is estimated at **21.16** persons per square mile.

Morrison, Todd and Wadena County:

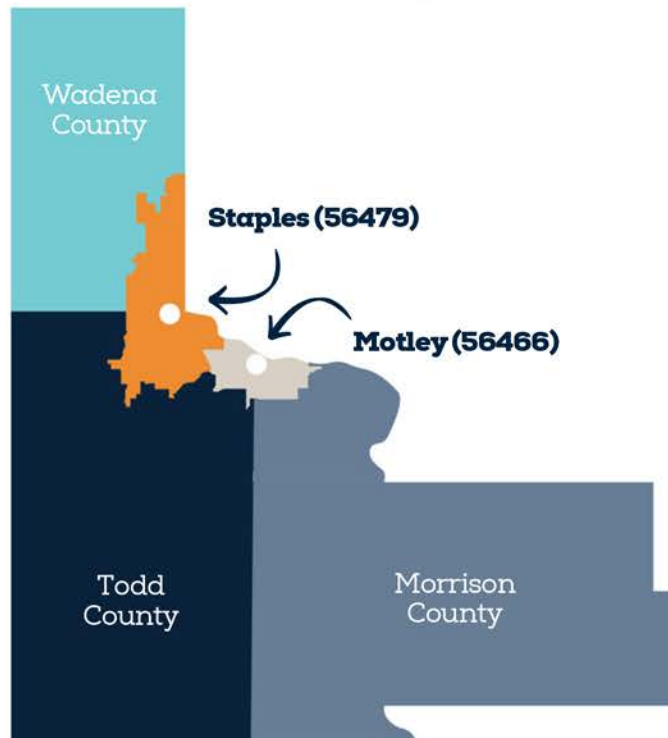
A total of **73,668** people live in the 2,606.32 square mile three-county region of Morrison, Todd and Wadena. The population density for this region is estimated at 28.27 persons per square mile.

Minnesota:

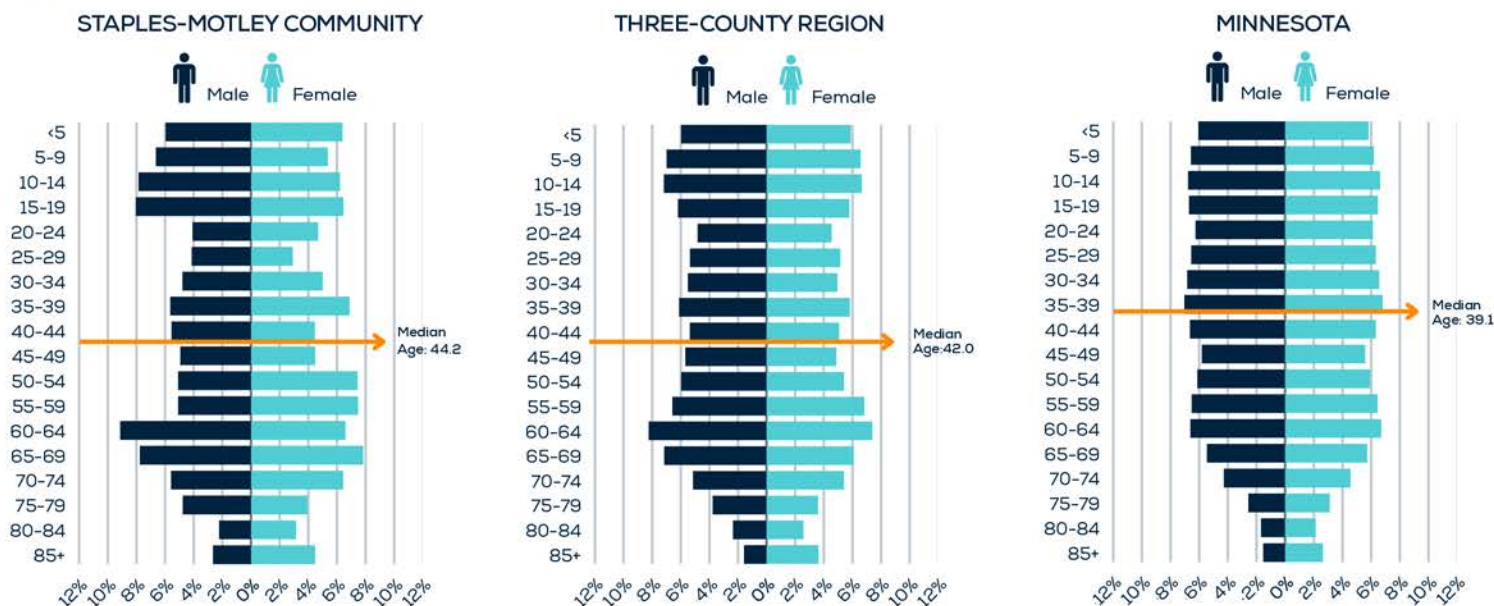
A total of **5,713,716** people live in the 79,625.54 square mile state of Minnesota. The average population density is estimated at 71.76 persons per square mile.

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.

Map of Staples-Motley Community and Three-County Region



Age Distribution by Gender



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.

RACE AND ETHNICITY

The Staples-Motley Community and the surrounding three-county region are seeing an increase in racial and ethnic diversity.

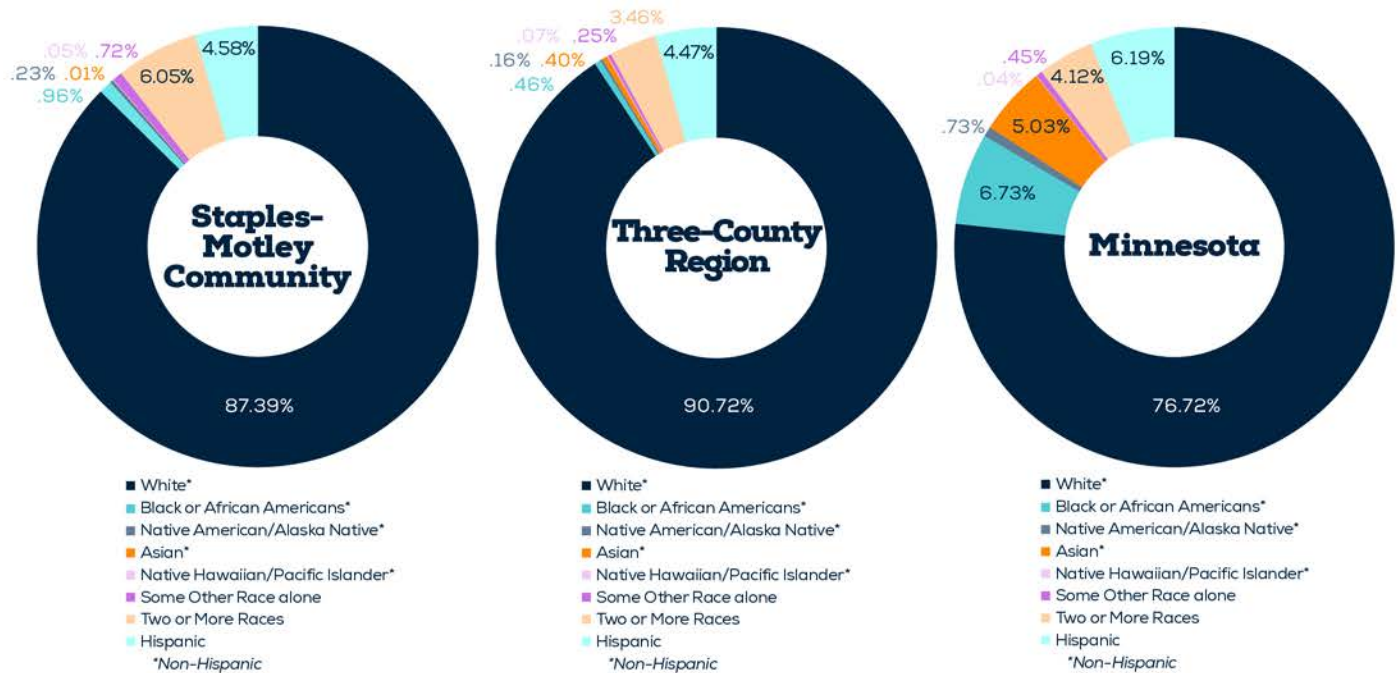
The White, non-Hispanic population still represents the largest demographic in the area; however, the proportion of this group has shifted, decreasing by nearly 10 percentage points from 96.5% in 2013 to 87.4% in 2023, according to data from the U.S. Census Bureau. This change highlights the growing presence of other racial and ethnic groups in the community.

CITIZENSHIP & LANGUAGE			
	STAPLES-MOTLEY COMMUNITY	THREE-COUNTY REGION	MINNESOTA
FOREIGN BORN	0.64%	2.29%	8.60%
NOT FLUENT IN ENGLISH <i>Speak English less than "very well" (age 5+ years)</i>	0.25%	5.70%	4.34%

BOLDED values indicate an increase compared to the 2022 CHNA baseline.

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.

Racial and Ethnic Diversity



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.



SELECTED SOCIAL CHARACTERISTICS

Housing

HOUSEHOLD BY TYPE			
	STAPLES-MOTLEY COMMUNITY	THREE-COUNTY REGION	MINNESOTA
TOTAL HOUSEHOLDS	3,350	29,798	2,282,967
% OF TOTAL HOUSEHOLDS WITH INDIVIDUALS UNDER AGE 18	27.2%	28.4%	27.7%
% OF TOTAL HOUSEHOLDS WITH INDIVIDUALS AGE 65+	40.1%	35.1%	30.5%
% OF TOTAL HOUSEHOLDS LIVING ALONE, AGE 65+	14.9%	13.3%	12.1%
AVERAGE HOUSEHOLD SIZE	2.38	2.42	2.44
HOUSEHOLDS IN POVERTY	N/A	3,401	215,597

HOUSING UNITS AND OCCUPANCY			
TOTAL HOUSING UNITS	4,434	36,123	2,519,538
% OF OCCUPIED HOUSING UNITS	75.6%	82.5%	90.6%
% OF OWNER-OCCUPIED HOUSING UNITS	81.0%	81.9%	72.4%

HOUSING COST BURDEN			
% OF HOUSEHOLDS SPENDING 30% OR MORE OF INCOME ON HOUSING	25.6%	23.9%	24.5%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/11/2025.

Homeownership

Affordable, quality housing is the foundation of a healthy and thriving community. Homeownership provides stability, fostering better physical and mental health by reducing financial stress and residential instability. This stability helps families set down roots, build stronger neighborly relationships, and increase overall quality of life.

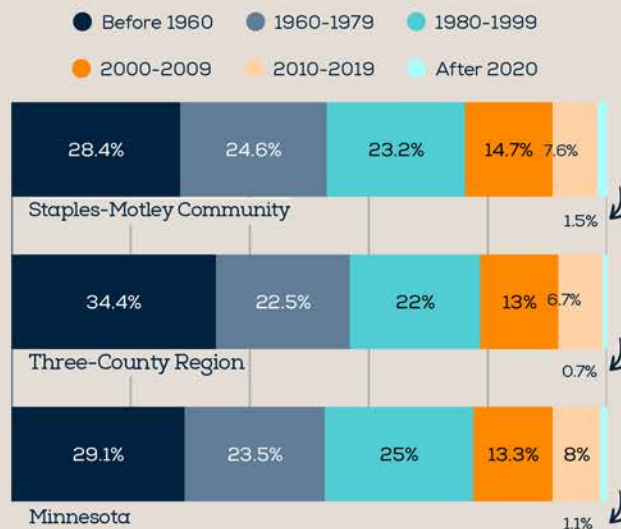
In the Staples-Motley community, a total of 2,715 are housing units owned by the residents, and 635 are renter-occupied housing units.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/5/2025.

Housing Stock - Age

The median year houses were built in the Staples-Motley community is 1978, the three-county region is 1976, and the state of Minnesota is 1978.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.



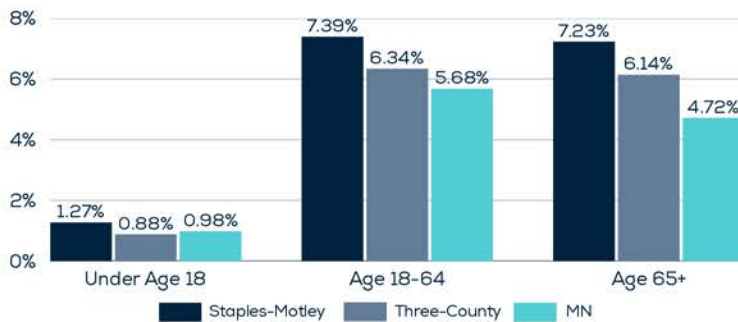
SELECTED SOCIAL CHARACTERISTICS

Disability Status

A person with a disability is someone who has difficulty with specific functional abilities, such as hearing, seeing, concentrating, walking, or performing daily tasks due to a physical, mental, or emotional condition.

Staples-Motley Community	1,273 (15.9%)
Three-County Region	9,711 (13.4%)
Minnesota	642,876 (11.4%)

Disability by Age Group:



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.

Educational Attainment

Educational attainment data focuses on the population age 25 and older. White, non-Hispanic individuals have an increased high school completion rate among all races and ethnic groups; Hispanics have the lowest. Adults without a disability are more likely to have at least a high school diploma and a bachelor's degree or more compared to adults with a disability

High School Graduate or Higher:

Staples-Motley Community	93.2%
Three-County Region	91.2%
Minnesota	94.3%

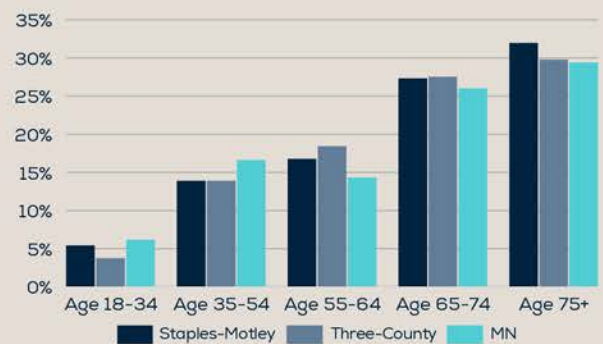
Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.

Veteran Population

A veteran is a civilian 18 years of age or older who has served on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or Coast Guard and is not currently on active duty or served in the U.S. Merchant Marine during World War II.

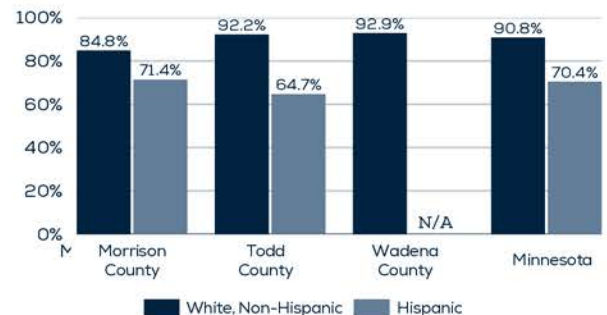
Staples-Motley Community	626
Three-County Region	4,736
Minnesota	267,133

Veteran by Age Group:



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/22/2025.

High School Graduation Rate by Race and Hispanic Ethnicity:



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/29/2025.



EMPLOYMENT AND INCOME

Employment

EMPLOYMENT CHARACTERISTICS, 2023				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
IN LABOR FORCE (available workers)	17,299	11,968	7,012	3,116,290
LABOR FORCE PARTICIPATION RATE	63.8%	60.3%	64.5%	68.5%
UNEMPLOYMENT RATE	3.5%	4.5%	5.8%	3.9%

Source: MN DEED, Data Tools - Minnesota County Profiles. Access on 8/5/2025.

Cost of Living for an Individual

Ages 19-50 years old

Three-County Region **\$32,016**

Minnesota **\$36,768**

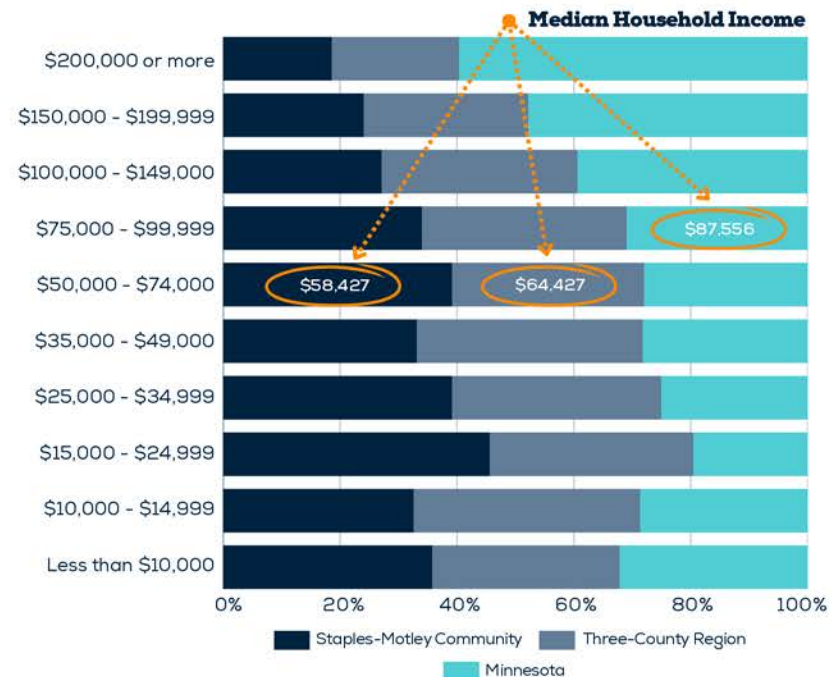
Age 51+

Three-County Region **\$32,292**

Minnesota **\$37,068**

Source: MN DEED, Data Tools - Cost of Living 2023. Access on 8/7/2025.

Income Per Household

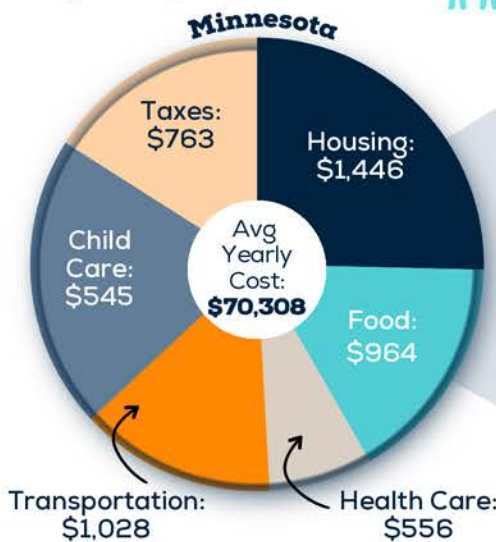


Source: MN DEED, Data Tools - Cost of Living 2023. Access on 8/7/2025.

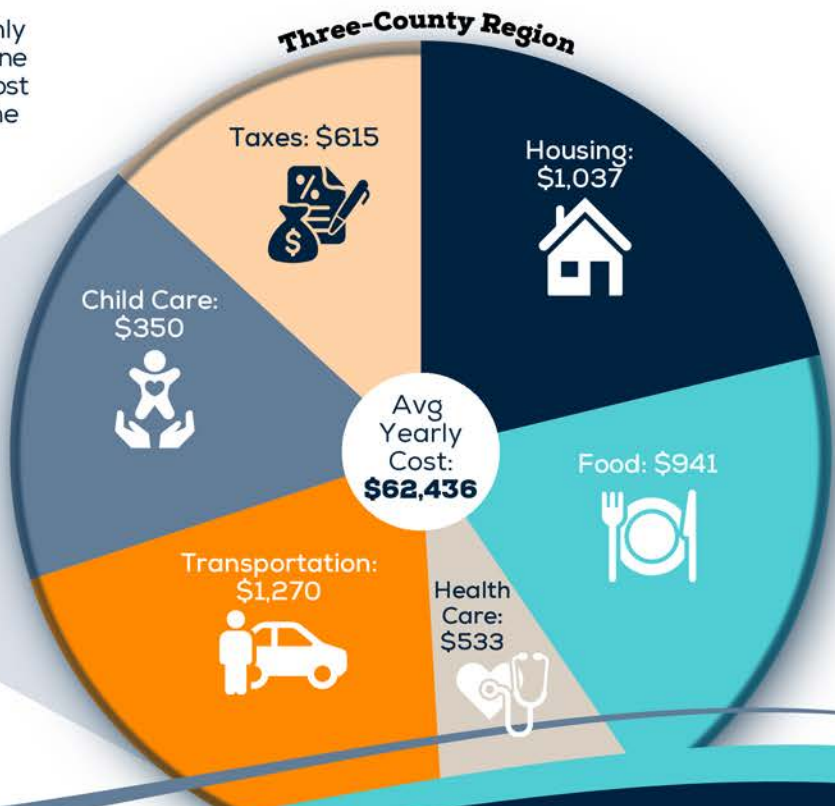
Cost of Living Comparison

The data presented below is an estimate of the monthly basic needs cost for a typical family with two adults (one working full-time, one part-time) and one child. The Cost of Living charts compare the three-county region to the state of Minnesota.

Average family size in Minnesota:



Source: MN DEED, Data Tools - Cost of Living 2024. Access on 8/5/2025.



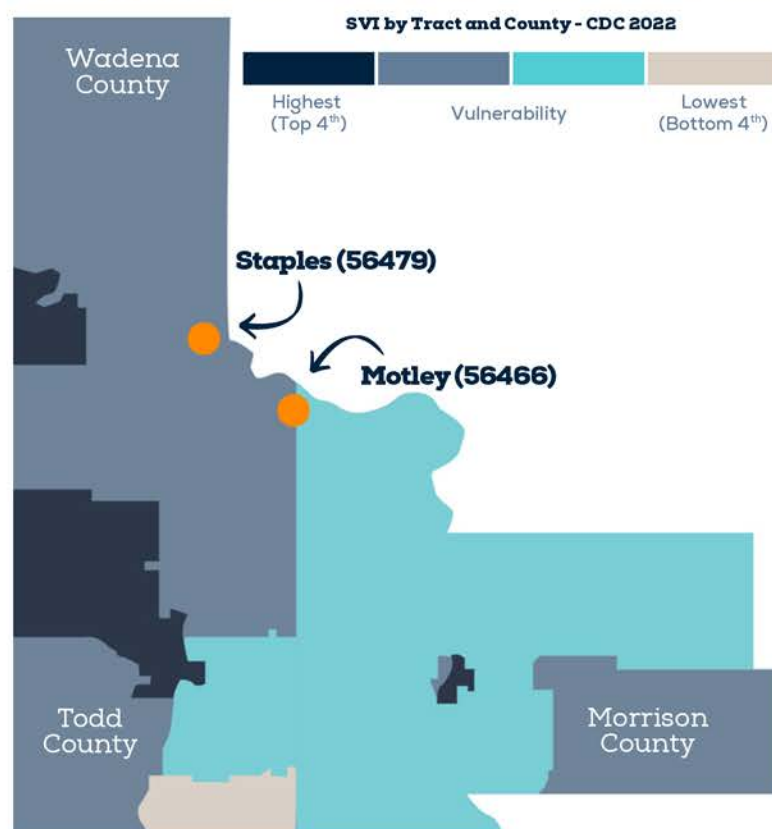
SOCIAL VULNERABILITY INDEX (SVI)

The Social Vulnerability Index (SVI) uses U.S. Census Bureau data to determine the relative “social vulnerability” of every census tract and county. The SVI ranks each tract on 15 social factors and groups them into these four themes.

- **Socioeconomic Status**
- **Household Composition**
- **Racial and Ethnic Minority Status**
- **Housing and Transportation**

Tracts and counties receive a separate ranking for each theme, as well as an overall ranking. The SVI can identify socially vulnerable populations and can help public health officials and local partners prepare for and mitigate the impact of potential disasters on specific communities.

Overall SVI



Source: CDC/ATSDR SVI 2022. Accessed on 8/8/2025.

Tract and County SVI Rankings

The SVI provides a data-driven approach to better understand and address the social determinants of health that can exacerbate the impacts of emergencies on vulnerable populations. A higher SVI ranking means

that community or county may need more social resources to thrive. The chart below provides the vulnerability rankings for the Staples-Motley community and the three-county region.

SVI THEME	SOCIAL VULNERABILITY INDEX (SVI)				
	REPORT AREA				
	CENSUS TRACT 7901 (STAPLES)	CENSUS TRACT 7801 (MOTLEY)	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY
SOCIOECONOMIC STATUS	0.55	0.30	0.22	0.40	0.50
HOUSEHOLD COMPOSITION	0.89	0.18	0.14	0.78	0.76
RACIAL AND ETHNIC MINORITY STATUS	0.22	0.01	0.05	0.36	0.23
HOUSING & TRANSPORTATION	0.86	0.67	0.30	0.73	0.98
OVERALL SVI SCORE	0.74	0.34	0.14	0.59	0.74

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Source: CDC/ATSDR SVI 2022. Accessed on 8/8/2025.

COUNTY HEALTH RANKINGS AND ROADMAPS

The 2025 County Health Rankings and Roadmaps model features a significant update that broadens the understanding of health. The traditional categories of "Health Outcomes" and "Health Factors" have been refined into "Population Health and Well-Being" and "Community Conditions".

- Population Health and Well-Being (formerly Health Outcomes): Expands the focus from length and quality of life to include overall well-being and life satisfaction.
- Community Conditions (formerly Health Factors): Highlights that community environments are intentionally shaped by societal influences. The key areas are:
 - Social and Economic Factors
 - Physical Environment
 - Health Infrastructure:

Key Model Shift: The most notable change in the 2025 model is explicitly naming Power and Societal Rules (written policies, laws, and unwritten cultural norms) as the root causes that shape Community Conditions. This shift guides communities to take action on the underlying, structural determinants of health to build power for health and equity.

2025 University of Wisconsin Population Health Institute Model of Health

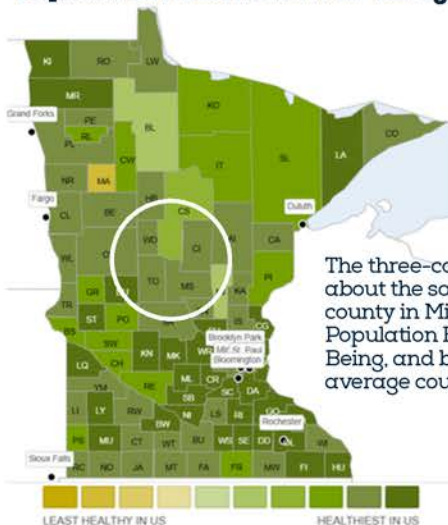


Graphic courtesy of The University of Wisconsin, Population Health Institute.

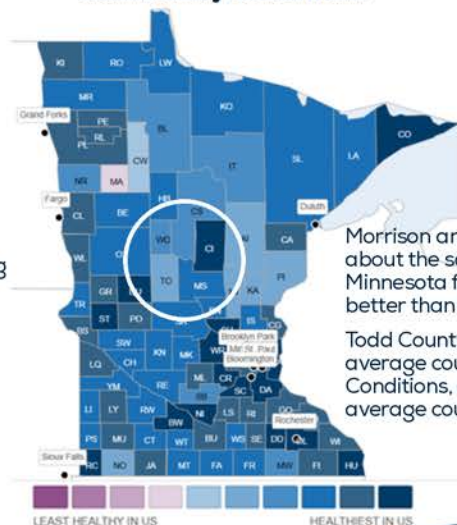
County Health Snapshot

The County Health Rankings & Roadmaps website offers extensive county-level data for nearly every county in the U.S. The website utilizes annual "snapshots" to benchmark a county's outcomes across more than 80 health-related metrics and organizes them into the two categories: Population Health & Well-Being and Community Conditions. Users are able to compare metrics against other counties within their state and nationwide. For the 2025 CHNA, Lakewood Health System compares each respective county or the entire three-county region to the state of MN and the U.S. when possible.

Population Health and Well-Being



Community Conditions

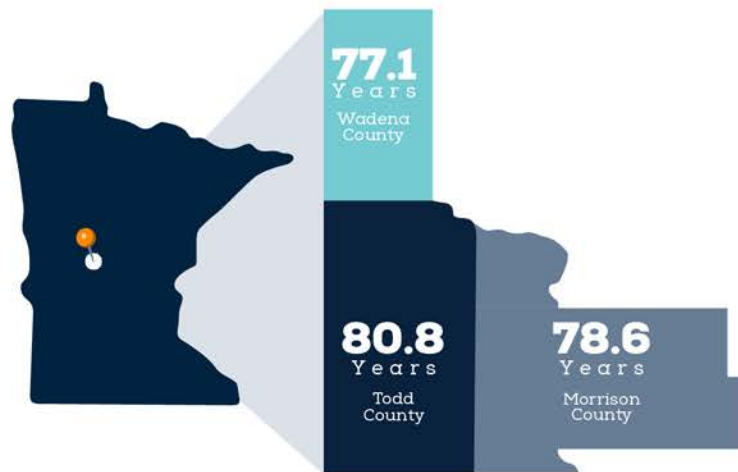


Data Source: The University of Wisconsin, Population Health Institute, County Health Rankings and Roadmaps, 2025. Accessed on 12/1/2025

LIFE EXPECTANCY AND MORTALITY

Life Expectancy at Birth

Life expectancy at birth is defined as how long, on average, a newborn can expect to live, if current death rates do not change. The current life expectancy for the state of Minnesota as a whole, based on the most recent available data from the CDC, is 78.8 years.



Source: CDC, National Center for Health Statistics, National Vital Statistics System, 2021 data. Accessed on 9/20/2025

The three-county region experiences higher overall and premature death rates compared to the state of Minnesota. These persistent gaps suggest the region may be grappling with underlying challenges that influence overall health outcomes. Potential contributing factors include limited access to healthcare, persistent socioeconomic challenges, and a higher prevalence of health risk behaviors and chronic conditions.

Death Rate:

Total # of deaths, per 100,000 persons

Three-County Region **1,233.1**
Minnesota **857.5**

Premature Death Rate:

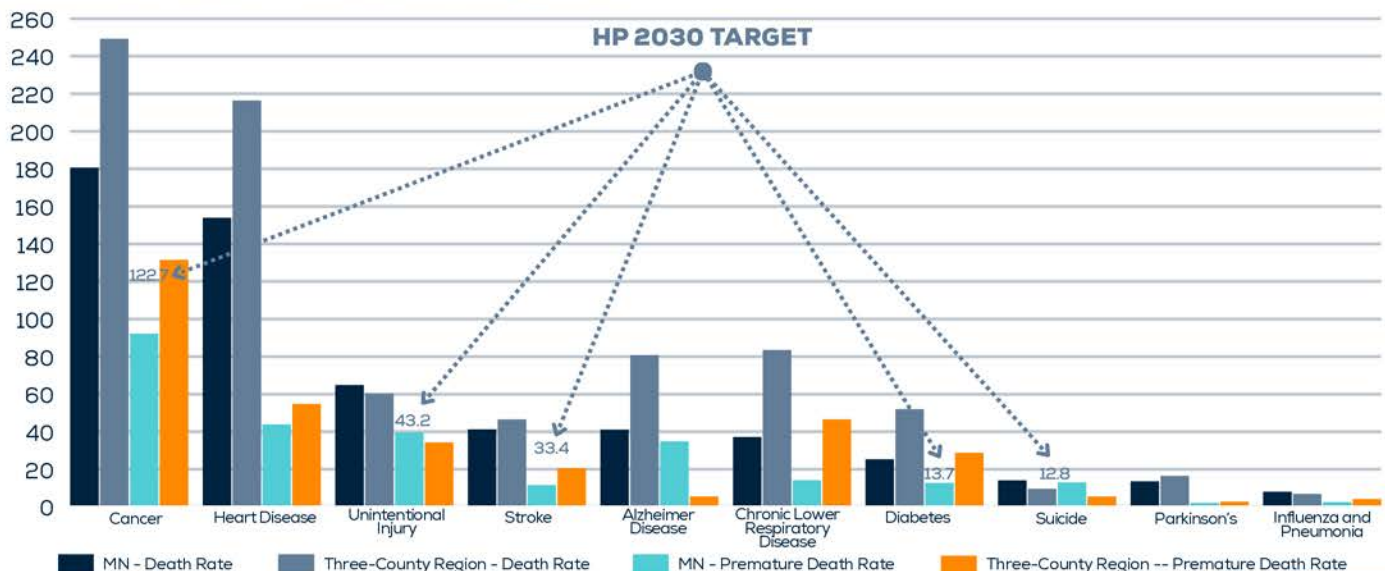
Total # of deaths under age 75, per 100,000 persons

Three-County Region **324.0**
Minnesota **271.0**

Source: MDH - MN County Health Tables, 2023. Accessed on 8/16/2025.

Leading Cause of Death

The chart below details the top ten causes of death in the three-county region, compared to the state of Minnesota. Figures are reported as crude rates per every 100,000 total population.



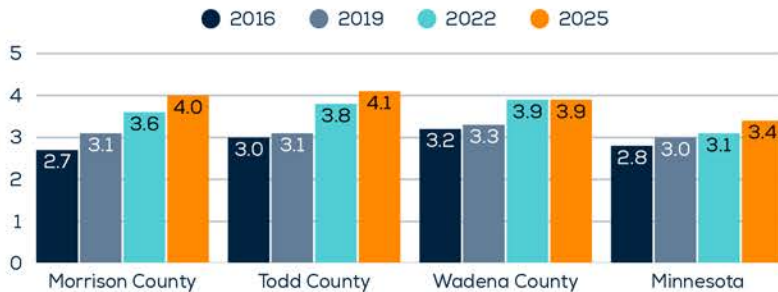
Source: MDH - MN County Health Tables, 2023. Accessed on 9/16/2025

GENERAL HEALTH AND CHRONIC DISEASE

Health behaviors are choices and actions, such as diet and exercise, that affect health. Unhealthy choices like poor nutrition and physical inactivity are linked to many chronic diseases, while positive behaviors can improve health outcomes.

General Physical Health - Adults

Average number of physically unhealthy days reported in past 30 days.



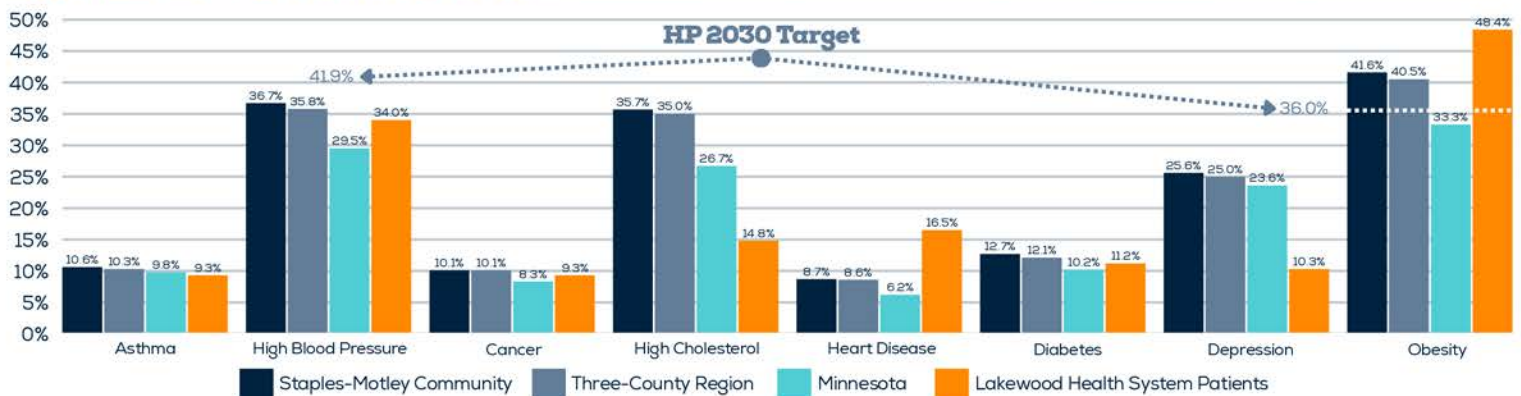
Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2023. Accessed on 8/7/2025

Healthy People 2030

Healthy People 2030 (HP 2030) is a 10-year initiative from the U.S. Department of Health and Human Services that establishes evidence-based, measurable goals to enhance the nation's health and well-being.

HP 2030 provides accurate data to guide targeted efforts in communities experiencing poor health, working to eliminate health disparities and promote equitable, healthy lives for all Americans.

Chronic Disease Prevalence



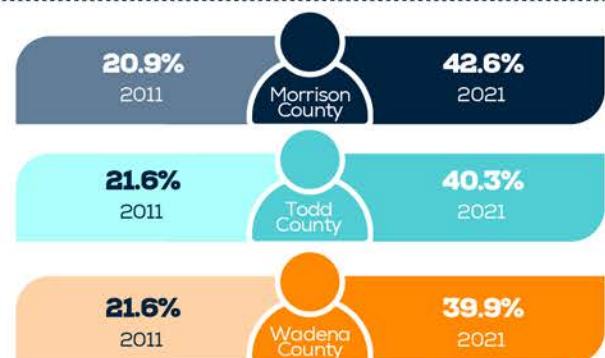
Sources: CDC - Places, BRFSS Prevalence & Trend Data, 2022 and 2021. Accessed on 8/28/2025. Healthy People 2030. Accessed on 8/28/2025.

Obesity Prevalence in Adults

Healthy body weight plays an important role in preventing chronic diseases. Lifestyle choices, such as regular physical activity and a nutritious diet, can help to achieve and maintain a healthy weight.

More than 33% of Minnesota adults (age 18 and older) meet standard definitions for obesity, which is having a body mass index (BMI) of 30 or greater. Based on obesity data captured in the chart above and to the right, the prevalence of obesity overall and by county has increased steadily over the past decade.

Source: CDC - Places, BRFSS Prevalence & Trend Data, 2022 and 2021. Accessed 9/8/2025.



MATERNAL, INFANT, AND CHILD HEALTH

Maternal, infant and child health is an important public health issue. Far too many women, babies and children experience limited access to essential and quality healthcare services and education, safe sleep environments, and nutrition.

Their physical, mental, intellectual, social and emotional well-being determines the health of the next generation for families, communities, and the health systems that deliver care to them.

Three-County Region Summary

914 LIVE BIRTHS were recorded with a birth rate of 12.4 per 1,000 total population. In MN, the birth rate is 11.2.

10.2% WERE BORN PRE-TERM (before 37 weeks of gestation). In MN, 9.4% were pre-term.

6.6% OF LIVE BIRTHS WERE LOW BIRTHWEIGHT. In MN, 7.4% were low birthweight (<2,500 grams of 5.5 pound).

2 INFANTS DIED BEFORE REACHING THEIR FIRST BIRTHDAY. In MN, there were 294 infant deaths.

80.1% INFANTS were born to women receiving adequate/adequate plus prenatal care. In MN, the rate is 78.7%.

24.8% OF LIVE BIRTHS WERE CESAREAN DELIVERIES. In MN, 30.2% were cesarean deliveries.

27 (2.9%) LIVE BIRTHS WERE DELIVERED BY TEEN MOTHERS between the ages of 15-19 years old. In MN, the rate is 2.4%.

35.8% OF MOTHERS HAD PUBLIC INSURANCE at the time of birth. In MN, the rate is 34.4%.

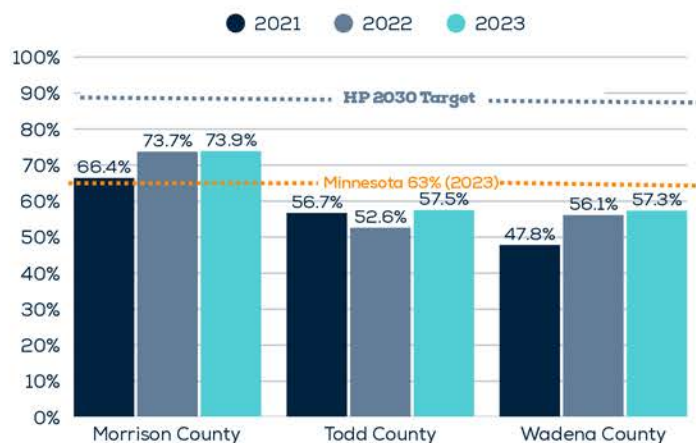
6.23% OF ALL BIRTHS WERE TO MOTHERS BORN OUTSIDE THE U.S. In MN, the rate is 21%.

Source: MDH, Center for Health Statistics, 2023. Accessed on 8/11/2025.



Childhood Immunizations

Percent of children ages 24-35 months with complete childhood immunization series - receiving all vaccinations in the childhood immunization series.



Source: Childhood Immunizations Map: MNPH Data Access - MN Dept. of Health (state.mn.us). Accessed on 8/20/2025.

LAKEWOOD HEALTH SYSTEM PATIENTS

Number of Patients

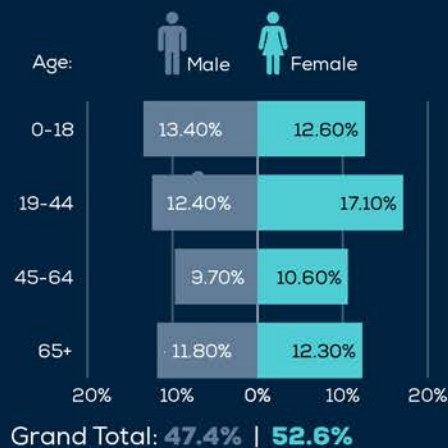
Annual Patient Count: 32,304

Total number of unique, unduplicated patients who received healthcare services in 2024 from a provider or facility, regardless of whether they are formally part of a patient panel.

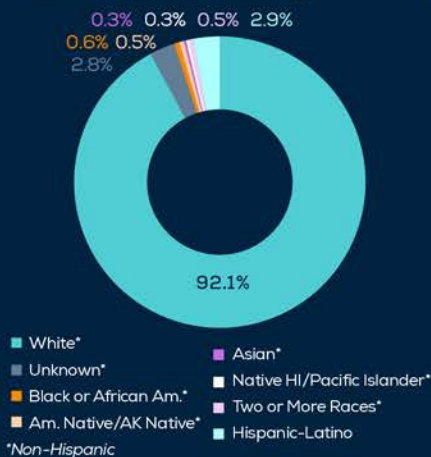
Active Patient Panel: 20,154

Total number of unique, unduplicated patients who were formally attributed to a provider or practice in 2024.

Age and Gender Distribution



Racial and Ethnic Diversity



Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

Lakewood Health System offers comprehensive and accessible healthcare services to ensure patients receive the right care at the right time and in the right setting.

Lakewood Health System delivers **Primary Care** for general health needs, **Specialty Care** for specific conditions, **Acute Care** for immediate illnesses or injuries, and **Senior Services and Home Care** for the unique needs of older adults.

Preferred Language

English: 98.2%

Spanish: 1.3%

Other: 0.5%

Population Density Map

In the population density map, areas of high patient concentration are shown using a color gradient with navy blue indicating high-density areas and light blue indicating low-density areas.

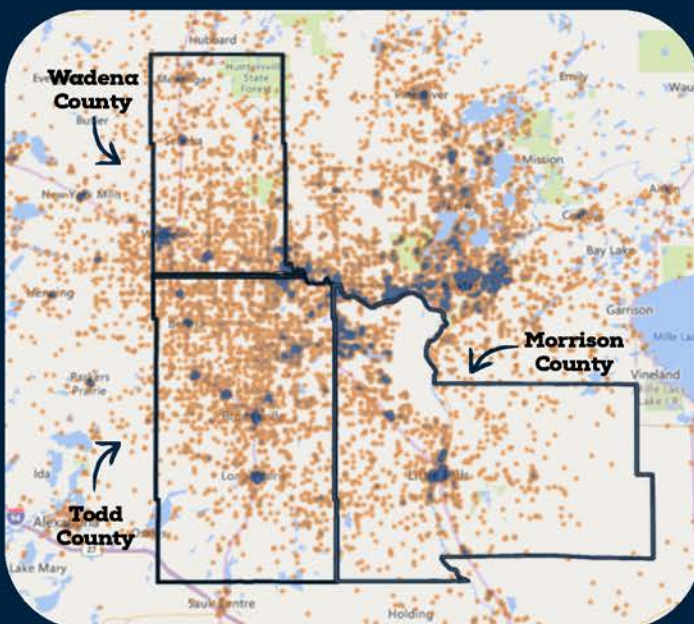
Total # of Active Patient Panel by County

4,926 Morrison County

8,072 Todd County

5,290 Wadena County

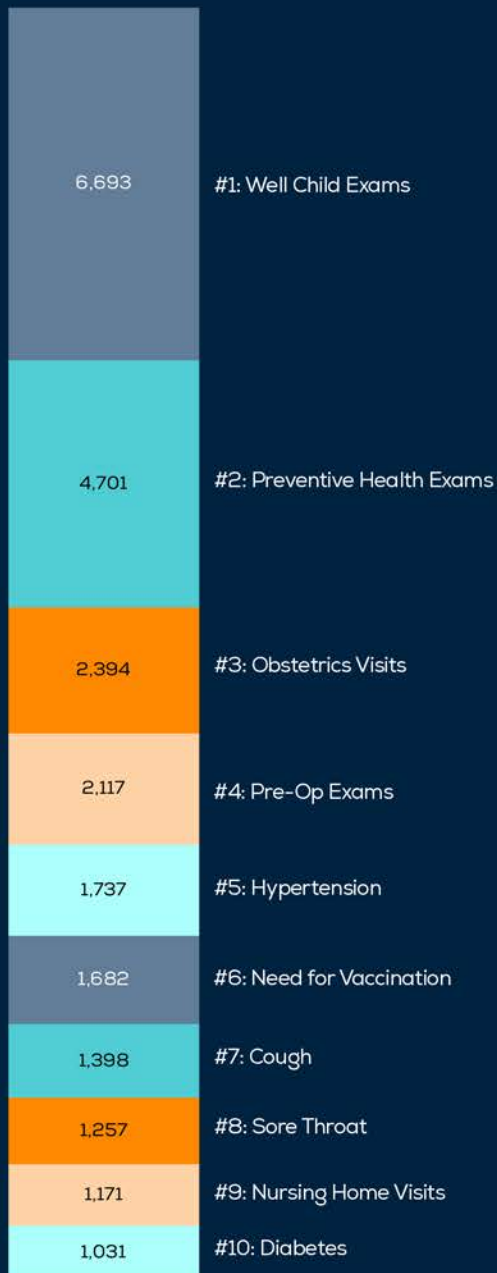
Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.



LAKEWOOD HEALTH SYSTEM PATIENTS

Top 10 Reason for Encounter

The chart below lists the top chief complaint - the primary symptom or concern described by a patient - that prompted them to seek medical attention at Lakewood Health System.



Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

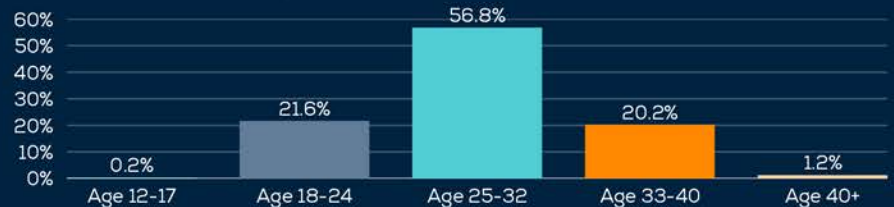
Total Visits and Admissions



Births

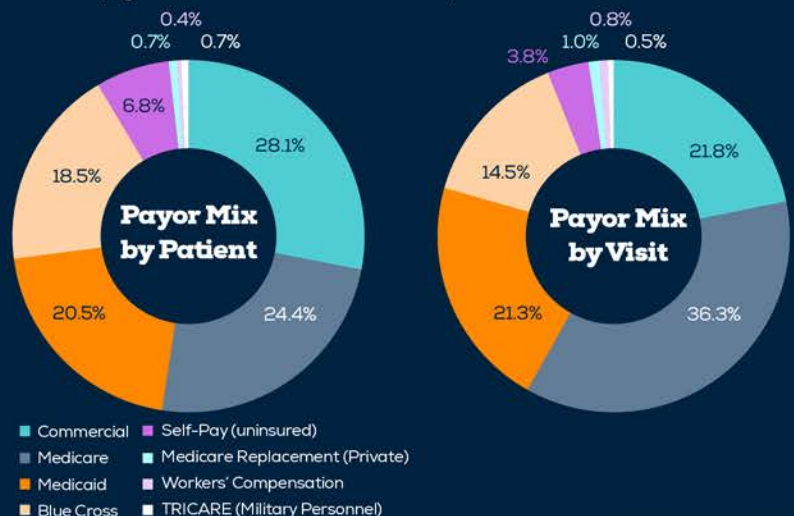
486 Number of Babies Delivered at Lakewood Health System in 2024.

Age of Mother at Childbirth



Payor Mix

Payor mix refers to the percentage of patients with government health plans (Medicare and Medicaid) versus commercial or private insurance. For Lakewood Health System, government health plan recipients account for a disproportionately high share of services. While they represent 45% of patients, they generate almost 58% of all patient visits.



MEDICAID POPULATION (IHP)

Medical Assistance (MA) is Minnesota's Medicaid program. It is the state's largest health care program and **serves children and families, pregnant women, adults without children, seniors and people who are blind or have a disability.**

The Minnesota Department of Human Services (DHS) measures health outcomes and social risk factors among its adults and children who utilize MA. DHS provides this data to healthcare systems across the state as part of their Integrated Health Partnerships (IHP) program.

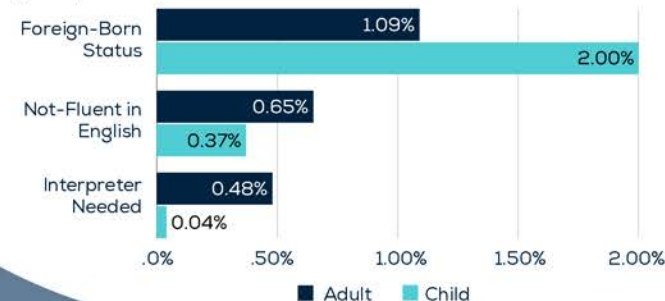
Additional IHP data, found on pages 42 and 56, identifies the non-clinical factors that may contribute to poor health outcomes among Lakewood Health System's MA population.

Age Groups



Citizenship & Language

Knowing the citizenship and language preference of a patient population is vital to provide equitable, high-quality, and patient-centered care.

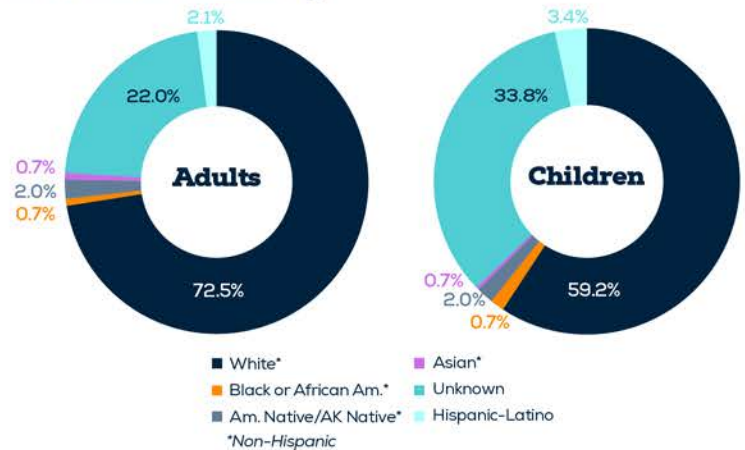


Attributed Patients

Lakewood Health System provides care to a total of 4,735 adults and children enrolled in MA.



Race and Ethnicity



IHP Data

The table below illustrates the prevalence of health outcomes among Lakewood Health System's attributed population.

PREVALENCE OF OUTCOMES AMONG ATTRIBUTED PATIENTS - ADULTS

HEALTH OUTCOMES	LHS	MN MA
TYPE 2 DIABETES	8.12%	9.70%
ASTHMA	11.22%	12.53%
ESSENTIAL HYPERTENSION	17.02%	20.07%
HEART DISEASE OR HOSPITALIZED STROKE/HEART ATTACK	2.53%	4.01%
CHRONIC OBSTRUCTIVE PULMONARY DISEASE	3.32%	2.81%
LUNG OR LARYNGEAL CANCER	0.13%	0.16%
HIV	0.04%	0.75%
HEPATITIS C	0.39%	1.00%

PREVALENCE OF OUTCOMES AMONG ATTRIBUTED PATIENTS - CHILDREN

HEALTH OUTCOMES	LHS	MN MA
ASTHMA	8.76%	9.22%
HIGH NEEDS NEWBORN (0-1 YEARS OLD)	6.71%	15.67%

BOLD values show a negative change when compared to the 2022 CHNA baseline.

Source: DHS, IHP Data for Lakewood Health System, 2025

PRIORITY AREA #1

Elevate Community Well-Being

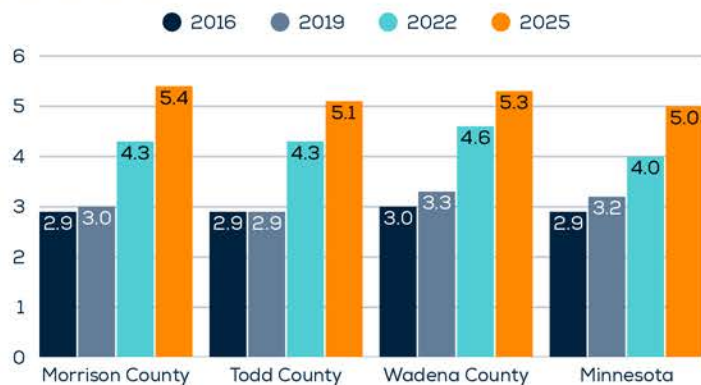


MENTAL HEALTH AND WELL-BEING

Mental health is just as important as a person's physical health. While it is easier to see physical health, mental health is often invisible because it primarily involves internal, complex psychological and emotional states that do not have obvious outward signs like a physical injury.

General Mental Health - Adults

Average number of mentally unhealthy days reported in past 30 days.



Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2023. Accessed on 8/7/2025



Suicide

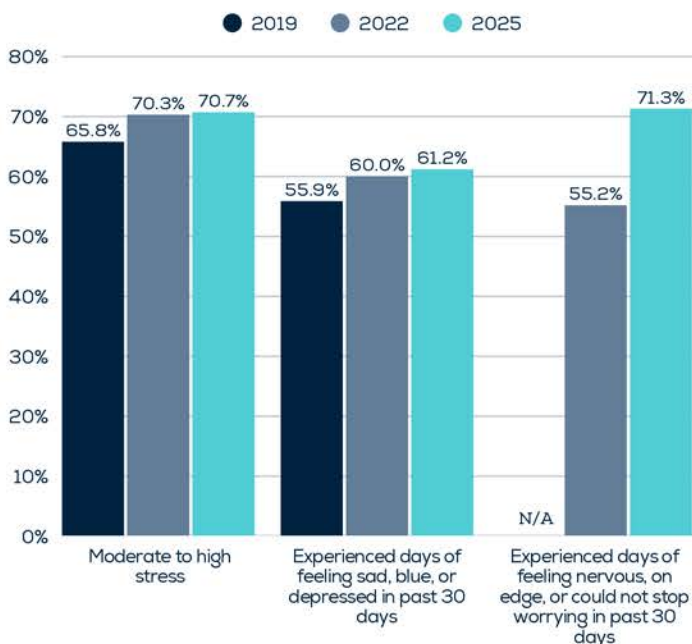
Suicide serves as an important measure of a county's mental health status. In the three-county region, suicide is the eighth leading cause of death and claimed the lives 56 people between 2019-2023.

DEATHS BY SUICIDE (2019-2023)				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
INTENTIONAL DEATHS (SUICIDE)	23	22	11	4,068
CRUDE DEATH RATE (PER 100,000 POPULATION)	13.6	17.5	N/A	14.3

Source: CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023. Accessed on 9/17/2025.

Tri-County Community Health Survey - Spotlight

Mental Health Status



Source: 2024 Tri-County Community Health Survey. Accessed on 9/10/2025.

Impact on Daily Living

Nearly 20% of survey respondents were generally the same individuals who indicated high stress impacts their daily lives.



Mental Health in the Home

To better to understand the broader impact of mental illness on families and communities, the Tri-County Community Health Survey asked respondents how often they experience mental health challenges in the home.



SOCIAL AND ECONOMIC FACTORS

Social and economic conditions are foundational to health and well-being across the entire life course. Collectively known as the social determinants of health (SDOH), these non-medical factors – such as economic stability, access to quality education and healthcare, neighborhood safety, and strong social connections – profoundly shape a person's health and longevity.

Poverty Status

A negative cycle exists between poverty and health. The stresses and disadvantages of poverty are a major cause of both poor physical and mental health, leading to lower overall quality of life and significant health disparities. This situation is worsened when poor health affects a person's ability to work, resulting in job loss or reduced earnings that can push them deeper into poverty.

Poverty is determined by two measures 1) POVERTY THRESHOLDS, produced by the U.S. Census Bureau, and 2) FEDERAL POVERTY LEVEL GUIDELINES (FPL), produced by the Department of Health and Human Services (HHS). Poverty thresholds are used to measure poverty, whereas poverty guidelines are used to determine eligibility for certain federal and state programs.

In the Staples-Motley community, the U.S. Census reported 1,067 residents were living in poverty in 2023, based on official poverty thresholds. Nearly 390 people fell below 50% of the poverty threshold (deep poverty) and 2,647 people lived below the 200% poverty threshold (low-income).

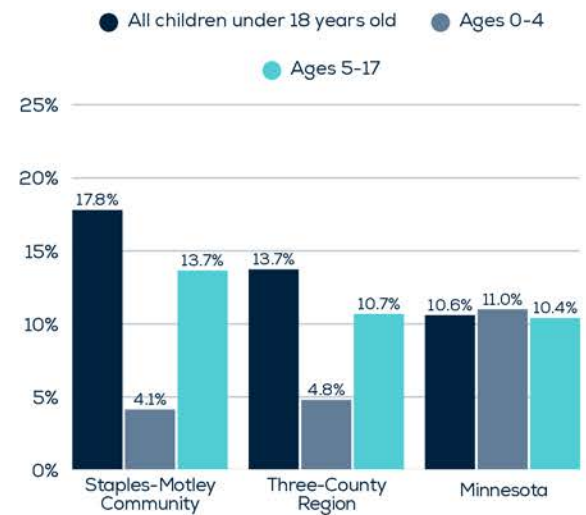
Numerous social safety net and relief programs are accessible to individuals and families whose income is below 200% of the federal poverty level. The chart below illustrates the percentage of low-income individuals in the Staples-Motley community and the three-county region who may be eligible to receive benefits such as healthcare, nutrition, cash, and shelter assistance.

POVERTY STATUS IN THE PAST 12 MONTHS			
	STAPLES-MOTLEY COMMUNITY	THREE-COUNTY REGION	MINNESOTA
ALL	13.1%	10.9%	9.2%
WHITE ALONE (NON-HISPANIC)	1.3%	31.6%	14.8%
HISPANIC-LATINO	11.2%	9.6%	7.2%
INDIVIDUALS 65+	2.9%	2.1%	8.4%
DEEP POVERTY - ALL INDIVIDUALS (below 50% of the poverty threshold)	4.8%	4.3%	4.2%
LOW-INCOME INDIVIDUALS (below 200% of the poverty threshold)	32.5%	30.0%	22.0%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/31/2025.

Poverty Status - Children

In the Staples-Motley community, there are 340 children (17.8%) ages 0-17 who were living in households with incomes below the 100% poverty threshold in 2023.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/31/2025.



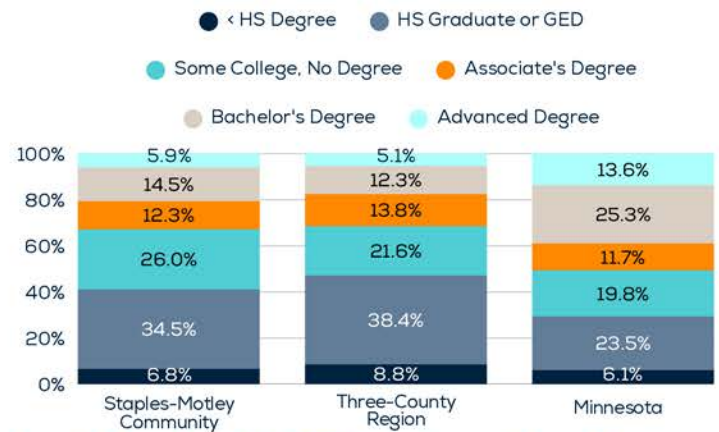
SOCIAL AND ECONOMIC FACTORS

Educational Attainment

Higher levels of education are linked to numerous positive outcomes, including improved health, healthier behaviors, and a reduced risk of chronic conditions.

A high school degree, in particular, is associated with a greater likelihood of increased life expectancy and an overall better quality of life. This connection is supported by research which shows that more educated individuals can access better resources, such as higher-paying jobs, leading to better housing and living conditions, which in turn promote better health.

In the Staples-Motley community, 383 adults (age 25 and older) have less than a high school diploma, 4,473 adults in the three-county region do not have a high school diploma.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 9/15/2025.

Employment Status

The quality of employment is directly linked to an individual's health and well-being. A job with fair compensation and comprehensive benefits provides the financial stability needed to support positive lifestyle choices related to housing, education, childcare, and healthcare. Quality employment also provides a safety net through health insurance and paid sick leave, as well as opportunities for social engagement through workplace wellness and networks.

Unemployment significantly diminishes overall well-being by negatively impacting both mental and physical health, often leading to heightened stress, anxiety, and depression, as well as reduced self-esteem.

EMPLOYMENT STATUS OF THE CIVILIAN NONINSTITUTIONAL POPULATION			
	STAPLES-MOTLEY COMMUNITY	THREE-COUNTY REGION	MINNESOTA
LABOR FORCE - TOTAL # OF THE POPULATION (16+)	3,777	36,112	3,115,750
LABOR FORCE - TOTAL # OF FEMALE (16+)	1,789	16,848	1,482,081
LABOR FORCE - TOTAL # OF MALE (16+)	1,988	19,264	1,633,669
PERCENTAGE OF UNEMPLOYED FEMALE (16+)	0.6%	3.7%	3.6%
PERCENTAGE OF UNEMPLOYED MALE (16+)	5.4%	4.8%	4.5%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 9/16/2025.

Unemployment Rates

In the Staples-Motley community, **120 individuals in the civilian labor force (aged 16 and older) are unemployed.**

In the surrounding three-county region, that figure exceeds 1,550 individuals, while across all of Minnesota, approximately 122,320 people are without a job.

Staples-Motley Community: **3.2%**

Three-County Region: **4.3%**

Minnesota: **3.9%**

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 7/31/2025.



SOCIAL AND ECONOMIC FACTORS

Family and Social Support

Individuals with robust social support networks **experience less isolation, participate in meaningful interpersonal relationships, and tend to live longer and healthier lives** compared to those who are socially isolated and lack adequate social support.

Conversely, socially isolated individuals are at a higher risk for poor health outcomes due to lack of family support and social connections.

Social Associations

Social isolation and a lack of community engagement contribute significantly to adverse health outcomes. In stark contrast, the presence of strong social support networks actively promotes well-being, with individuals in robust networks more likely to exhibit healthy behaviors and make positive lifestyle choices

Social associations are voluntary membership organizations that provide a platform for people to connect around a shared purpose. Beyond simply being a collection of members, these associations foster community, offer resources, and enable members to work together toward collective goals. Their diverse forms range from professional and business associations to recreational clubs, religious organizations, and political or labor groups.

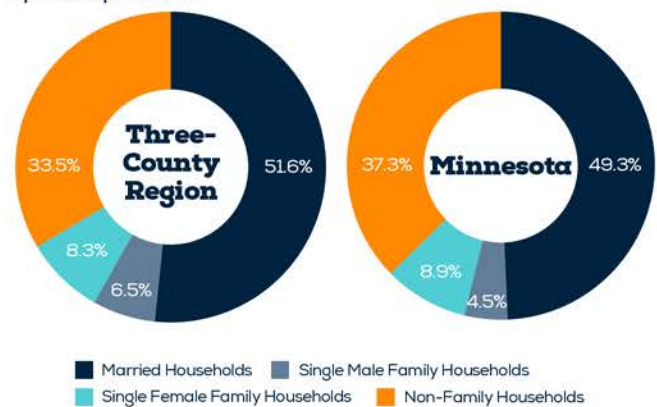
SOCIAL ASSOCIATIONS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
MEMBERSHIP ASSOCIATIONS	61	49	26	7,087
RATE OF MEMBERSHIP ASSOCIATIONS PER 10,000 POPULATION	17.8	19.2	18.2	12.4

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 8/1/2025.

Single-Parent Households

Adults and children in single-parent households face a heightened risk of adverse health outcomes, which are linked to increased stressors and resource deprivation. This elevated risk includes a greater likelihood of mental health problems like depression and substance abuse, and unhealthy behaviors such as food insecurity and excessive alcohol consumption. Research also indicates that the challenges of single parenthood can result in diminished self-reported health, with lone mothers reporting worse health outcomes than mothers living as a couple.

Among the single parent households in the three-county region, the majority are female householders with no spouse present.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/6/2025.

Tri-County Community Health Survey - Spotlight

In-Person Interactions

The survey revealed **50.3%** more than half of respondents spent fewer than 10 days in an average month engaging in face-to-face interactions with family, friends, or neighbors.

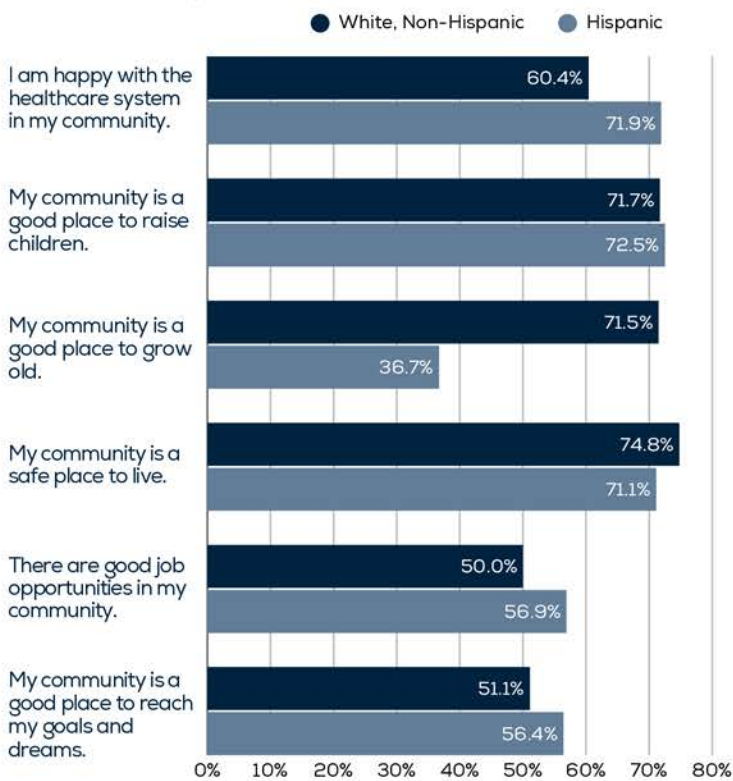
Source: 2024 Tri-County Community Health Survey. Accessed on 9/10/2025.

COMMUNITY SAFETY

A feeling of safety and belonging in one's community is essential for a high quality of life. It enables individuals and families to participate in their community, build wealth, and enjoy their lives. However, for those living in unsafe neighborhoods, chronic stress from the fear of violence can lead to poor health outcomes.

Community-Based Quality of Life

This chart shows the percentage of respondents who "Agreed" or "Strongly Agreed" with statements about their community.



Source: 2024 Tri-County Community Health Survey. Accessed on 9/10/2025.



Discrimination

Discrimination involves the unjust or prejudicial treatment of individuals or groups based on certain attributes, including race, gender, sexuality, gender identity, disability, and age. Exposure to discrimination can cause significant stress, which is known to contribute to negative mental and physical health outcomes.

Tri-County Community Health Survey - Spotlight

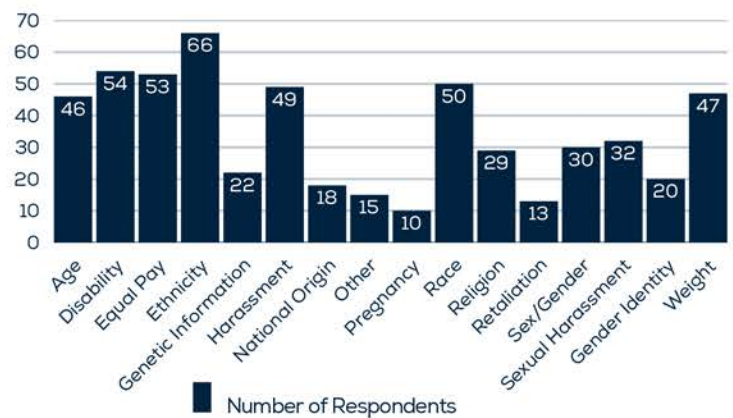
Experienced Discrimination in the Past 12 Months

The survey revealed a **11.4%** significant issue: more than one in every ten participants had experienced discrimination in the past year. **The results were particularly striking in Todd County, where 20.7% of Hispanic respondents reported high rates of discrimination.** This figure is more than double the 9.4% recorded in 2022.

Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

Forms of Discrimination

Based on the Tri-County Community Health Survey, the most common types of discrimination reported are:

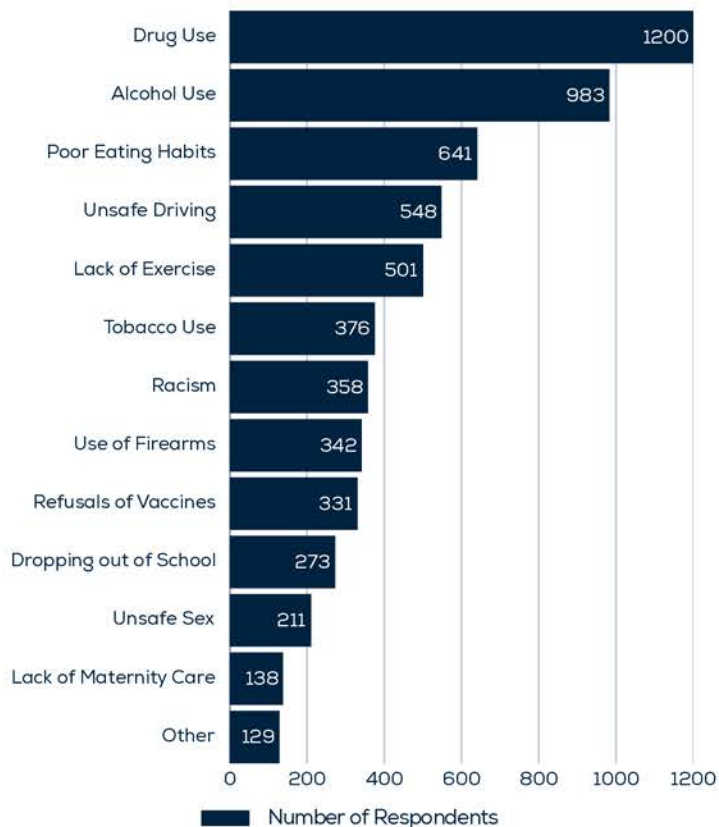


Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

COMMUNITY SAFETY

Most Harmful Behaviors in the Community

The Tri-County Community Health Survey reveals the unique challenges rural residents face and uncovers how they perceive and experience harm.



Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

Gun Ownership & Safety

More than 88% of gun owners report they store their firearms in a gun safe, lock box, or with a trigger/cable lock, and away from ammunition.

GUN OWNERSHIP			
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY
ALL GUN OWNERS	52.4%	52.8%	59.5%
MALE	57.0%	50.0%	52.9%
FEMALE	50.6%	54.3%	63.1%
WHITE, NON-HISPANIC	53.0%	60.6%	62.3%
HISPANIC	37.6%	39.8%	53.5%

Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

Tri-County Community Health Survey - Spotlight

Gun Ownership, by Ethnicity

Based on survey results, white non-Hispanic adults have a higher rate of gun ownership than Hispanic adults.



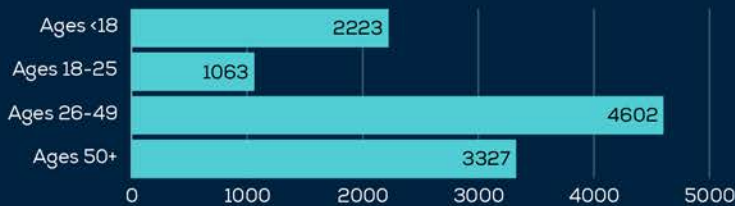
Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.



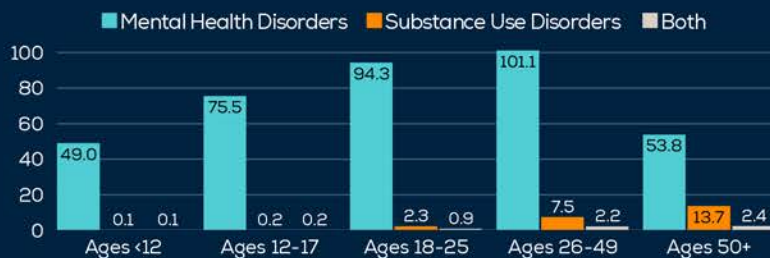
LAKEWOOD HEALTH SYSTEM PATIENTS

Behavioral Health Visits in Clinics

Total number of clinic visits for adolescents and adults with mental health disorders and substance use disorders.

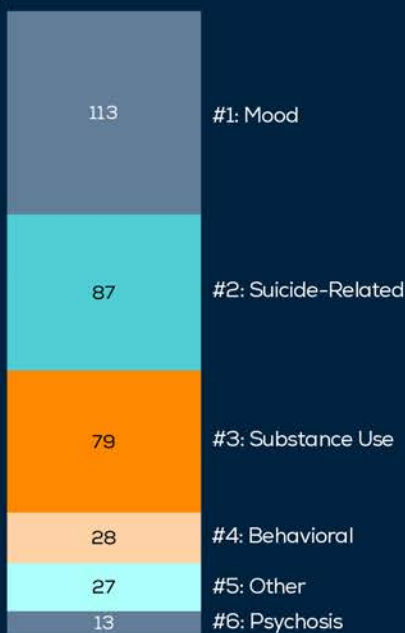


Visit rate for adolescents and adults with mental health disorders, substance use disorders, or both, by age groups. Rate: per 1,000 people.



Top Behavioral Health Diagnoses in the ED

The most common behavioral health presentations in the Emergency Department (ED) in 2024.



Behavioral Health in the ED

9,954 Emergency Department (ED) Visits

3.5% Behavioral Health-Related Visits

➔ **268** Mental Health Disorders

➔ **79** Substance Use Disorders

Boarded Patients

In 2024, Lakewood Health System's ED boarded 15 patients who had been admitted to the hospital but were still awaiting an inpatient bed or transfer to another facility. The length of stay for these patients varied dramatically, from a minimum of 26 hours to a maximum of 1,548 hours.

Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

15
Boarded Patients
Accumulated
2,271
Total Hours



Lakewood Health System has **12 Behavioral Health providers** - psychiatrists, psychologists, clinical social workers, and nurse practitioners - who deliver mental health and substance use services and supports at the Staples, Motley, and Pillager Clinics.

The Behavioral Health team completed **11,215 clinic visits** in 2024, **10,679 mental health disorder visits** and **375 substance use disorder visits**.

The three most prevalent mental health conditions were anxiety disorder, major depressive disorder, and post-traumatic stress disorder

MEDICAID POPULATION (IHP)



IHP Data

The table below shares the social risk factors and health outcomes that impacts the quality of life for the IHP patient population attributed to Lakewood Health System.

PREVALENCE OF SOCIAL RISK FACTORS AMONG ATTRIBUTED PATIENTS - ADULTS

SOCIAL RISK FACTORS	LHS	MN MA
SUBSTANCE USE DISORDER	10.74%	18.30%
SERIOUS AND PERSISTENT MENTAL ILLNESS <i>(Subset of individuals with SMI)</i>	7.46%	8.70%
SERIOUS MENTAL ILLNESS (SMI)	39.28%	36.41%
DEEP POVERTY (<-50% FPL)	31.76%	41.17%
HOMELESSNESS	3.84%	8.35%
PAST PRISON INCARCERATION	2.44%	4.38%

PREVALENCE OF HEALTH OUTCOMES AMONG ATTRIBUTED PATIENTS - ADULTS

HEALTH OUTCOMES	LHS	MN MA
POST-TRAUMATIC STRESS DISORDER	22.57%	23.52%
INJURY DUE TO ACCIDENT	24.84%	17.14%
INJURY DUE TO VIOLENCE	1.35%	2.58%

PREVALENCE OF SOCIAL RISK FACTORS AMONG ATTRIBUTED PATIENTS - CHILDREN

SOCIAL RISK FACTORS	LHS	MN MA
CHILD PROTECTION INVOLVEMENT	6.46%	5.14%
PARENTAL SUBSTANCE USE DISORDER	14.08%	14.51%
PARENTAL SERIOUS AND PERSISTENT MENTAL ILLNESS <i>(Subset of individuals with SMI)</i>	8.63%	6.84%
PARENTAL SERIOUS MENTAL ILLNESS (SMI)	42.18%	32.72%
DEEP POVERTY (<-50 FPL)	18.12%	27.07%
HOMELESSNESS	0.29%	1.19%
PARENTAL PAST INCARCERATION	6.34%	5.89%

PREVALENCE OF HEALTH OUTCOMES AMONG ATTRIBUTED PATIENTS - CHILDREN

HEALTH OUTCOMES	LHS	MN MA
POST-TRAUMATIC STRESS DISORDER (PTSD)	13.13%	11.13%
SUBSTANCE USE DISORDER (15 - 17 YEARS OLD)	2.92%	3.59%
INJURY DUE TO ACCIDENT	23.53%	12.60%
INJURY DUE TO VIOLENCE	1.35%	1.51%

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Source: DHS, IHP Data for Lakewood Health System, 2025

PRIORITY #2

Ensure Access to Resources and Care



CLINICAL CARE

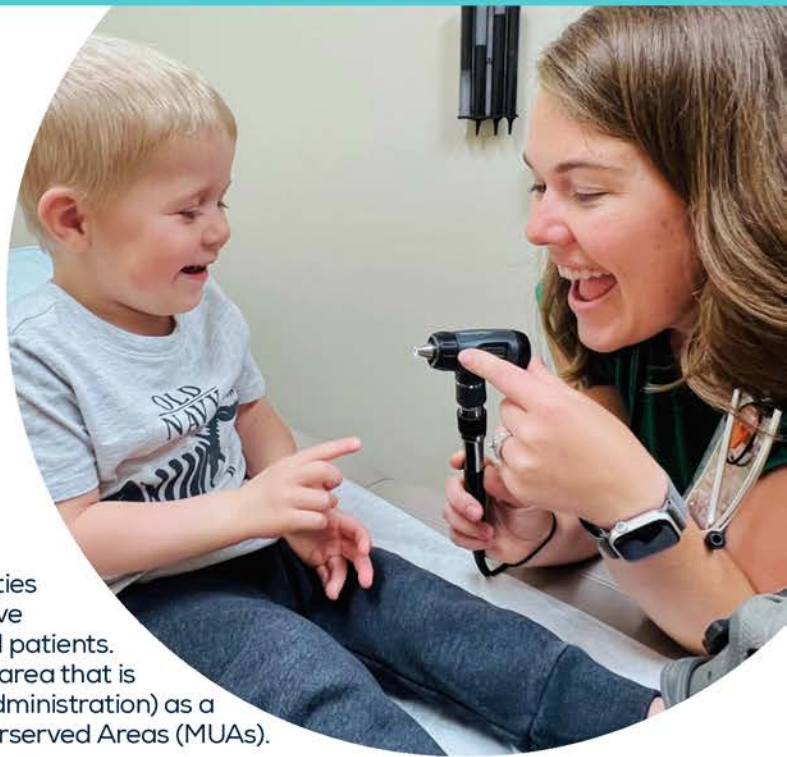
Access to Clinical Care

Access to affordable, quality, and timely physical, dental, and mental health care allows individuals to prevent and detect health issues sooner, leading to longer, healthier lives. Crucial factors influencing this access include comprehensive health insurance, local availability of primary and specialty care, and a consistent source of medical services. By addressing these elements, along with ensuring cultural competence in care delivery, healthcare can be more easily accessed, navigated, and paid for by patients.

When people lack affordable and convenient access to clinical care, chronic conditions can worsen, complications may develop, and emergencies and hospital admissions can increase.

Rural Health Clinics

Rural Health Clinics (RHCs) are federally certified outpatient facilities located in designated rural, underserved areas that aim to improve access to primary and preventive care for Medicare and Medicaid patients. To receive a RHC determination, clinics must be located in a rural area that is currently designated by HRSA (Health Resources and Services Administration) as a Health Professional Shortage Areas (HPSAs) or a Medically Underserved Areas (MUAs). All Lakewood Health System clinics are classified as RHCs.



HRSA DESIGNATIONS

	RURAL HEALTH CLINIC (RHC)			HPSA DESIGNATION TYPE			MUA
	PRIMARY CARE	DENTAL HEALTH	MENTAL HEALTH	PRIMARY CARE	DENTAL HEALTH	MENTAL HEALTH	
LAKEWOOD CLINIC - BROWERVILLE	X	X	X	HPSA POPULATION	HPSA POPULATION	GEOGRAPHIC HPSA	X
LAKEWOOD CLINIC - EAGLE BEND	X	X	X	HPSA POPULATION	HPSA POPULATION	GEOGRAPHIC HPSA	X
LAKEWOOD CLINIC - MOTLEY	X	X	X	HPSA POPULATION	HPSA POPULATION	GEOGRAPHIC HPSA	
LAKEWOOD CLINIC - PILLAGER	X	X	X	HPSA POPULATION	HPSA POPULATION	GEOGRAPHIC HPSA	X
LAKEWOOD CLINIC - STAPLES	X	X	X	HPSA POPULATION	HPSA POPULATION	GEOGRAPHIC HPSA	

Definitions for HRSA Designations

Types of HPSA	HPSA Population	Geographic HPSA	MUA
	Focus: A specific group of people who share certain characteristics and have limited access to care within a broader geographic area. Reason for Designation: This specific group faces barriers like economic hardship, cultural differences, or lack of resources that prevent them from accessing care, even if the general area might have sufficient providers for others.	Focus: The entire population within a clearly defined geographical boundary, such as a town, county, or region. Reason for Designation: The shortage of providers affects everyone in that area, regardless of their specific demographic or health status.	Focus: A geographic area with a shortage of primary care services. Reason for Designation: These designations are achieved through the Index of Medical Underservice (IMU) calculation, and they help to direct resources to communities with the greatest need for healthcare access and services

Source: Health Resources and Services Administration | HRSA, HPSA
Find. Accessed on 10/1/2025.

CLINICAL CARE

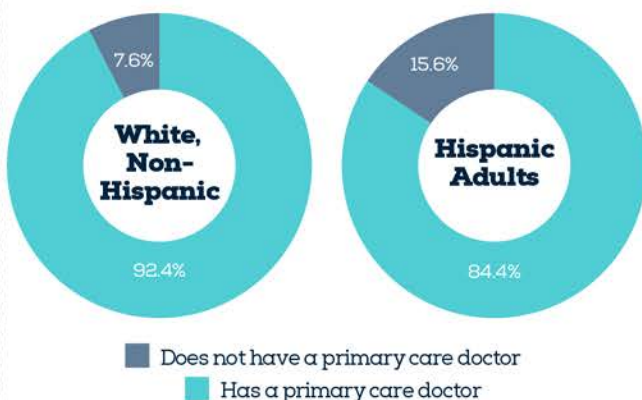
Primary Care Providers

Primary care providers improve health outcomes through preventive care, early disease detection, chronic disease management, and by coordinating a whole-person approach to health.

Tri-County Community Health Survey - Spotlight

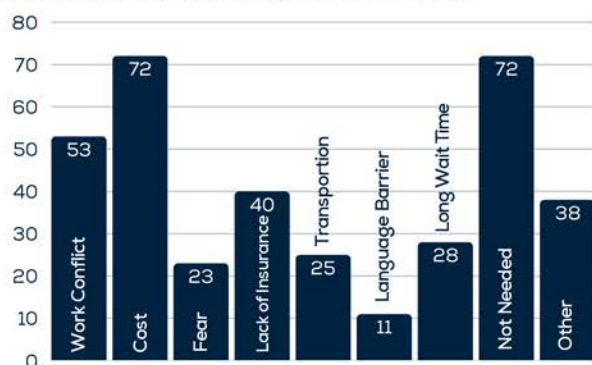
Have a Primary Care Doctor

Based on survey results, White, non-Hispanic adults are more likely to have a primary care doctor than Hispanic adults.



- White females: **93.03%**
- White males: **91.37%**
- Hispanic females: **82.61%**
- Hispanic males: **87.03%**

Reasons Survey Respondents Do Not Have a Primary Care Doctor



Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

Availability of Primary Care Physicians and Providers

The charts below detail the ratio of population to primary care physicians and other primary care providers, such as nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists who can provide routine and preventive care.

PRIMARY CARE PHYSICIANS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
2016	1,730:1	1,280:1	1,530:1	1,100:1
2019	1,640:1	1,350:1	1,530:1	1,120:1
2022	1,901:1	1,170:1	1,710:1	1,100:1
2025	2,040:1	1,220:1	1,800:1	1,120:1

OTHER PRIMARY CARE PROVIDERS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
2019	1,945:1	2,724:1	371:1	955:1
2022	1,440:1	2,470:1	370:1	730:1
2025	1,440:1	2,360:1	310:1	600:1

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/6/2025.



CLINICAL CARE

Mental Health Providers

Mental health providers improve health outcomes by providing therapy, managing medications, and promoting behavioral change to address both mental and physical health needs. The chart below shows the ratio of population to mental health providers have mostly improved across the three-county region and in Minnesota since 2016.

MENTAL HEALTH PROVIDERS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
2016	840:1	3,030:1	430:1	490:1
2019	770:1	2,720:1	330:1	430:1
2022	870:1	2,250:1	290:1	340:1
2025	660:1	4,330:1	250:1	260:1

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/6/2025.

Dentists

Dentists improve health outcomes by focusing on preventive care, early detection of systemic diseases, and managing oral health's link to overall well-being. The chart below shows the ratio of population to dentists.

DENTISTS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
2016	3,280:1	2,430:1	1,720:1	1,500:1
2019	2,540:1	2,450:1	1,720:1	1,410:1
2022	2,070:1	2,250:1	1,720:1	1,320:1
2025	2,630:1	2,140:1	1,290:1	1,280:1

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/6/2025.

Calculating the Population Ratio

The ratio represents the population served by one primary care doctor, one mental health provider, or one dentist if the entire population of a county were distributed equally across all practicing providers. For example, if a county has a population of 50,000 and has 20 primary care physicians, the county ratio would be: 2,500:1. The value on the right side of the ratio is always 1 or 0; 1 indicates that there is at least one primary care physician in the county, and zero indicates there are no registered primary care physicians in the county.



HEALTH INSURANCE STATUS

Health Insurance

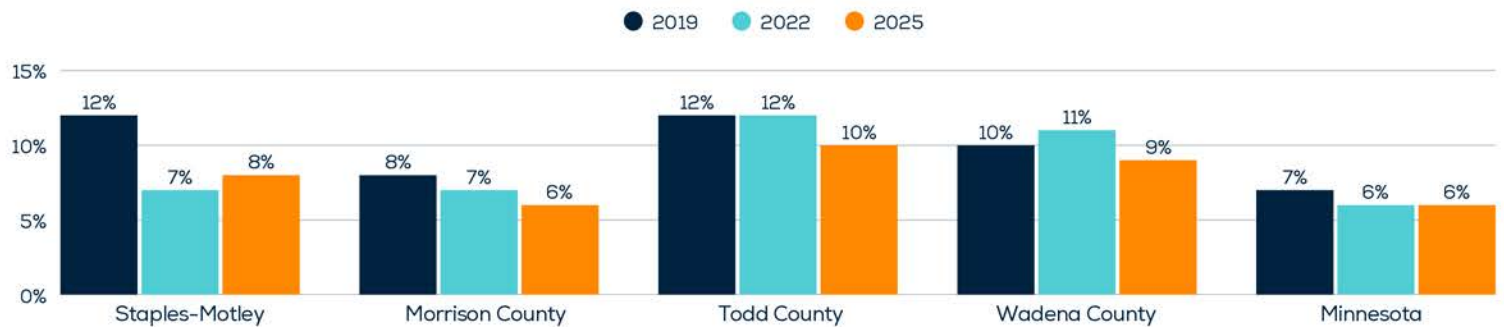
Health insurance significantly enhances access to and utilization of essential medical, dental, and mental health services. This access leads to earlier diagnoses and treatment of health conditions, ultimately improving health outcomes. Beyond the direct health benefits, comprehensive health coverage—whether through private plans, employer-sponsored insurance, Medicaid, or Medicare—provides individuals and families with critical financial security and protection from catastrophic healthcare costs.

Lack of Insurance

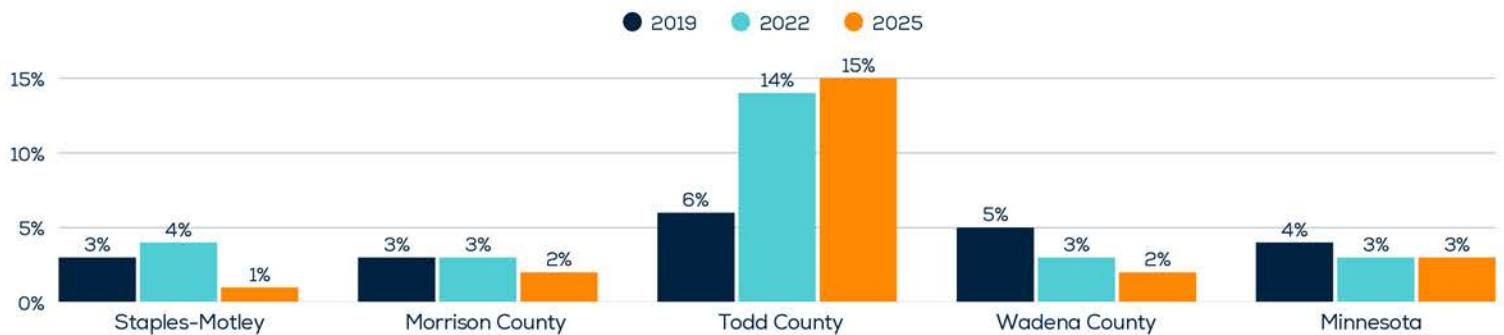
The lack of health insurance is widely regarded as a primary barrier to accessing quality care and is a critical determinant of overall health status.

In the Staples-Motley community, there are approximately 307 adults (under age 65) and 23 children (ages 0 - 17) without health insurance. According to the U.S. Census, the uninsured population has decreased overall since the 2019 CHNA report, except for children in Todd County.

Uninsured Adults



Uninsured Children



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/6/2025.



FOOD AND NUTRITION SECURITY

People in households experiencing food insecurity have much higher rates of diet-related chronic diseases and poor nutrient intake, along with increased mental health issues, healthcare costs, and hospitalizations.

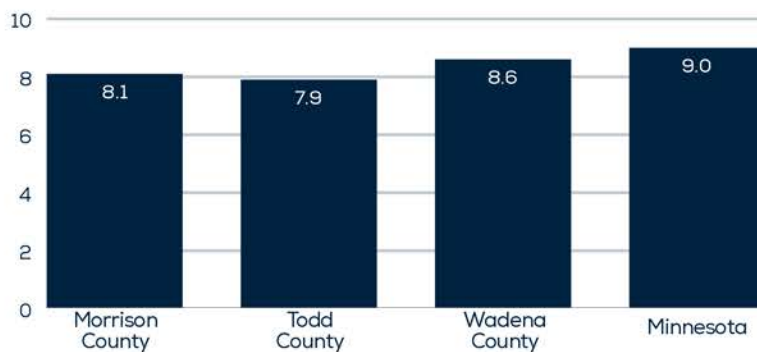
Unlike food insecurity, nutrition insecurity goes beyond having enough food to eat; it highlights the challenge of accessing nutritious, safe, and culturally appropriate food to support overall well-being. The presence and availability of nutrient-dense foods like fruits, vegetables, and whole grains is essential for preventing and managing health conditions. Nutrition insecurity can occur with or without food insecurity.

Food Environment Index

The Food Environment Index, as measured by the County Health Rankings, assesses the accessibility and affordability of healthy food within a community by equally weighting these two key factors:

1. **Access to Healthy Foods (proximity)** - the proximity of residents to grocery stores and supermarkets, along with the presence of locations offering healthy food options, and
2. **Food Insecurity (income)** - the barriers faced by individuals due to cost limitations when accessing healthy food.

The Food Environment Index ranges from a score of 0 (worst) to 10 (best).



Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/7/2025.

Limited Access to Healthy Foods

LIMITED ACCESS TO HEALTHY FOODS				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
# OF PEOPLE WITH LIMITED ACCESS TO HEALTHY FOODS	3,101	2,834	1,700	302,030
% OF PEOPLE WITH LIMITED ACCESS TO HEALTHY FOODS	9%	11%	12%	6%

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/7/2025.

Food insecurity occurs when people do not have consistent access to enough food to live an active and healthy lifestyle. It is often caused by financial hardship, scarcity of grocery stores, or transportation barriers.

Nutrition insecurity occurs when people do not have equitable or consistent access to nutritious food that promotes optimal well-being.

To improve health outcomes, both food insecurity and nutrition insecurity need to be reduced.



FOOD AND NUTRITION SECURITY

Food Insecurity

While poverty is a primary driver of food insecurity, the two are distinct, many individuals with incomes above the federal poverty line still experience food instability. Food-insecure households must often make difficult trade-offs between meeting basic needs, such as housing and medical bills, and acquiring adequate, nutritious food. For instance, a household could experience a period of temporary job loss or a financial emergency that depletes its food budget.

Although most low-income individuals facing food insecurity are eligible for government assistance, a significant number of food-insecure individuals do not qualify for programs like the Supplemental Nutrition Assistance Program (SNAP) and the Women, Infants, and Children (WIC) program. Eligibility for these nutrition assistance programs is determined by a household's income relative to federal poverty guidelines, but other financial and systemic barriers can prevent access to assistance.

Food insecurity has profound and lasting impacts on children's physical, cognitive, and psychosocial development. Because children are in a constant state of growth, even short-term nutritional gaps can result in permanent physiological changes.



OVERALL FOOD INSECURITY - ALL INDIVIDUALS (2023)

		MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
# OF FOOD INSECURE INDIVIDUALS (ALL AGES)		3,950	2,890	1,780	596,190
% OF FOOD INSECURITY (ALL AGES)		11.6%	11.4%	12.6%	10.4%
AMONG ALL FOOD INSECURE INDIVIDUALS	% OF THOSE ABOVE THE SNAP THRESHOLD AND LIKELY INELIGIBLE	34.0%	21.0%	22.0%	42.0%
	% OF THOSE AT OR BELOW THE SNAP THRESHOLD AND LIKELY ELIGIBLE	67.0%	80.0%	78.0%	58.0%
WHITE, NOT-HISPANIC		9.0%	9.0%	12.0%	8.0%
HISPANIC		23.0%	28.0%	N/A	25.0%

Source: Feeding America, Map the Meal Gap, 2023. Accessed on 10/7/2025.

OVERALL FOOD INSECURITY - CHILDREN UNDER AGE 18 (2023)

		MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
# OF FOOD INSECURE CHILDREN		1,240	1,050	640	185,010
% OF FOOD INSECURITY CHILDREN		15.7%	16.9%	17.5%	14.3%
AMONG ALL FOOD INSECURE CHILDREN	LIKELY INELIGIBLE FOR FEDERAL NUTRITION PROGRAMS (ABOVE 185% FPL)	38.0%	11.0%	26.0%	32.0%
	INCOME ELIGIBLE FOR FEDERAL NUTRITION PROGRAMS (AT OR BELOW 185% FPL)	62.0%	89.0%	75.0%	68.0%

Source: Feeding America, Map the Meal Gap, 2023. Accessed on 10/7/2025.

FOOD AND NUTRITION SECURITY

Nutrition Assistance Programs

Food assistance programs help individuals and families afford a variety of nutritionally adequate food items. The most widely used nutrition assistance programs are the Supplemental Nutrition Assistance Program (SNAP) and Women, Infant & Children Nutrition Program (WIC).

SNAP

SNAP (Supplemental Nutrition Assistance Program) is a county-run, state-supervised Federal program that helps low-income individuals and families get the food they need for their households. In 2022, Minnesota became the 20th state in the nation to raise the gross income threshold for SNAP to 200% of the federal poverty level.

WIC

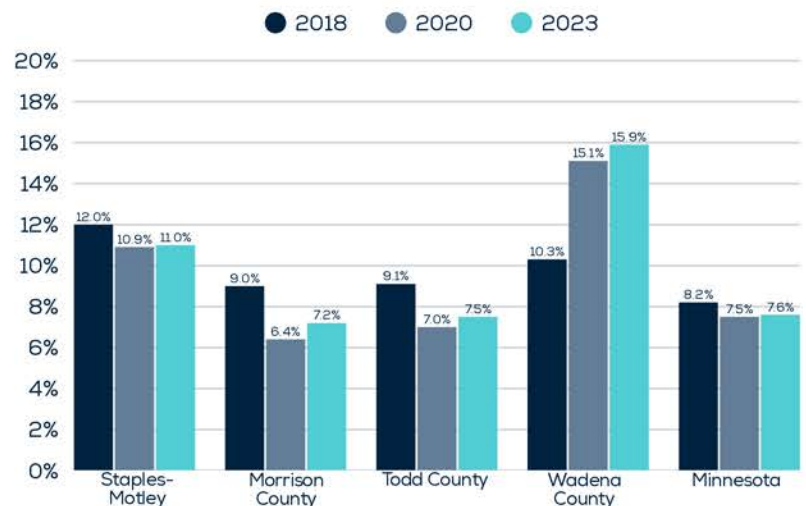
(WIC) Women, Infant, & Children Nutrition Program helps eligible families – pregnant women, new mothers, babies and young children – achieve better health and nutrition through a combination of food benefits, personalized guidance, and connection to healthcare and community resources, aiming to support healthy development and outcomes.

Total WIC Participants - Three-County Region



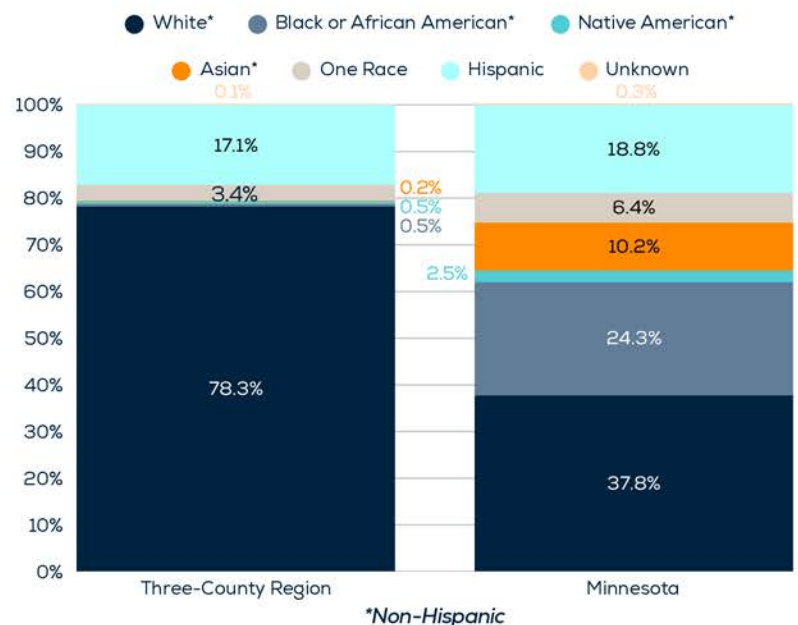
Source: MDH, Minnesota WIC Information System, Minnesota WIC Participation by Unduplicated Race/Ethnicity and CHB of Residence for Calendar Year 2022. Minnesota WIC Program, 2023. Accessed on 8/6/2025.

Households Receiving SNAP



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/6/2025.

WIC Participation by Race and Ethnicity - Three-County Region



Source: MDH, Minnesota WIC Information System, Minnesota WIC Participation by Unduplicated Race/Ethnicity and CHB of Residence for Calendar Year 2022. Minnesota WIC Program, 2023. Accessed on 8/6/2025.

COUNTY AND GOVERNMENT RESOURCES

Rural Health Disparities

People in rural areas **face significant health challenges** due to factors like **limited healthcare access, higher poverty rates, and greater distances to services.**

These disparities, including a shortage of healthcare providers and lack of insurance, lead to increased risks for chronic conditions, unintentional injuries, and premature death.

Tri-County Community Health Survey - Spotlight

Accessing Resources

While nearly 14% of all respondents **24.6%** in the three-county region were unsure how to access resources; **this challenge is especially acute for one in four men between the ages of 25 - 65 earning under \$35,000.**

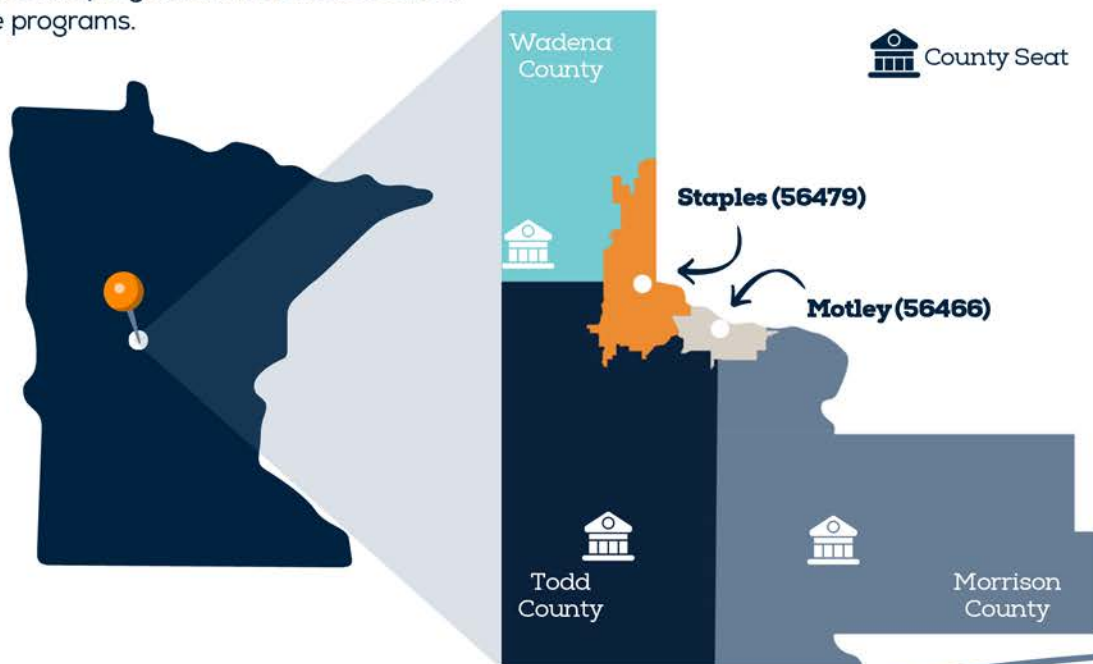
Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.

Distance to County Seat

The communities of Staples and Motley are uniquely positioned across the boundaries of Morrison, Todd, and Wadena counties. Unfortunately, neither is the county seat for any of these jurisdictions. This geographic reality creates a significant obstacle for residents who must travel to distant administrative centers – Little Falls for Morrison County, Long Prairie for Todd County, and Wadena for Wadena County – to utilize essential health and human services, such as health programs, financial assistance, and child welfare programs.

Distance to the county seat for residents in the Staples-Motley community:

- Motley to Little Falls (Morrison County): 33 miles
- Motley to Long Prairie (Todd County): 35 miles
- Staples to Long Prairie (Todd County): 30 miles
- Staples to Wadena (Wadena County): 20 miles



LAKEWOOD HEALTH SYSTEM PATIENTS

Primary Care

Primary care serves as the essential first point of contact and entry point into the healthcare system for most patients, providing ongoing care and coordinating services for a wide range of needs from routine check-ups and preventive care to chronic disease management.

of Clinic Visits in 2024: **66,867**

Chronic Care Management (CCM)

CCM is considered an extension of primary care that focuses on managing the health of patients with chronic conditions between office visits.

of Patients in CCM: **350 Patients**

Lakewood Health System's CCM program is staffed by a team of seven clinicians, including two Registered Nurses (RNs) and five Licensed Practical Nurses (LPNs), who conduct monthly outreach with enrolled patients.

Third Next Available Appointment

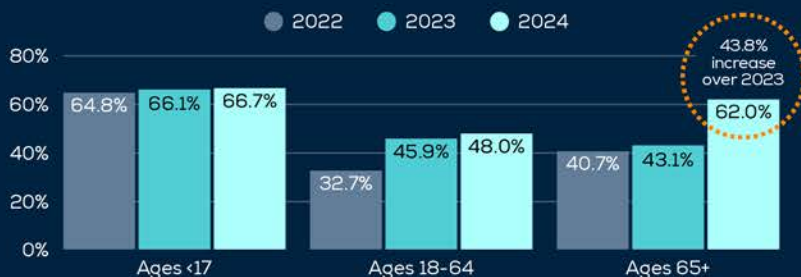
The "Third Next Available Appointment" (TNAA) measures how soon a patient can secure a visit with a provider. It focuses on the third available time slot, rather than the first or second, to provide a more accurate picture of true availability. A high TNAA can lead to poor access, delayed care, and potentially higher no-show rates.

THIRD NEXT AVAILABLE APPOINTMENT (IN BUSINESS DAYS)

TYPE OF PROVIDER	2023	2024
PRIMARY CARE PROVIDERS	7.4	5.7
NONSURGICAL SPECIALTY PROVIDERS	5.3	8.7
SURGICAL SPECIALTY PROVIDERS	9.9	11.5

Compliance with Preventive Care

Annual preventive visits are crucial for the early detection and prevention of diseases, effective management of chronic conditions, and establishing a health baseline with providers. In 2024, Lakewood Health System patients had an overall 58.6% compliance rate for these visits.



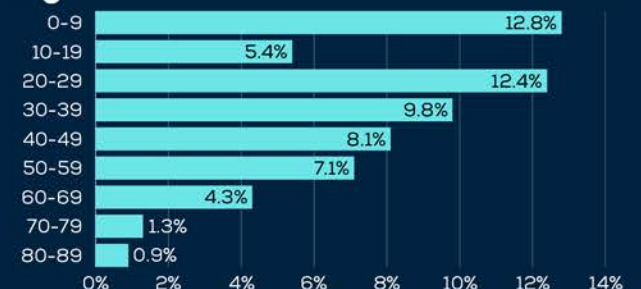
Lakewood Health System offers comprehensive and accessible healthcare services to ensure patients receive the right care at the right time and in the right setting.

Lakewood Health System delivers **Primary Care** for general health needs, **Specialty Care** for specific conditions, **Acute Care** for immediate illnesses or injuries, and **Senior Services and Home Care** for the unique needs of older adults.

Demographic Profile of Uninsured Patients

The charts below break down the 2,190 (6.8%) uninsured patient population by age, gender, and race/ethnicity.

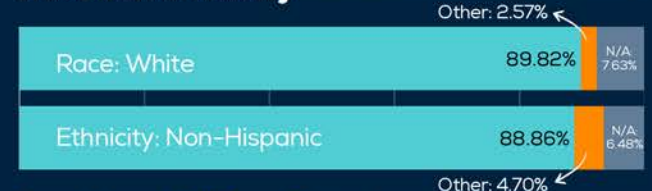
Age



Gender



Race and Ethnicity

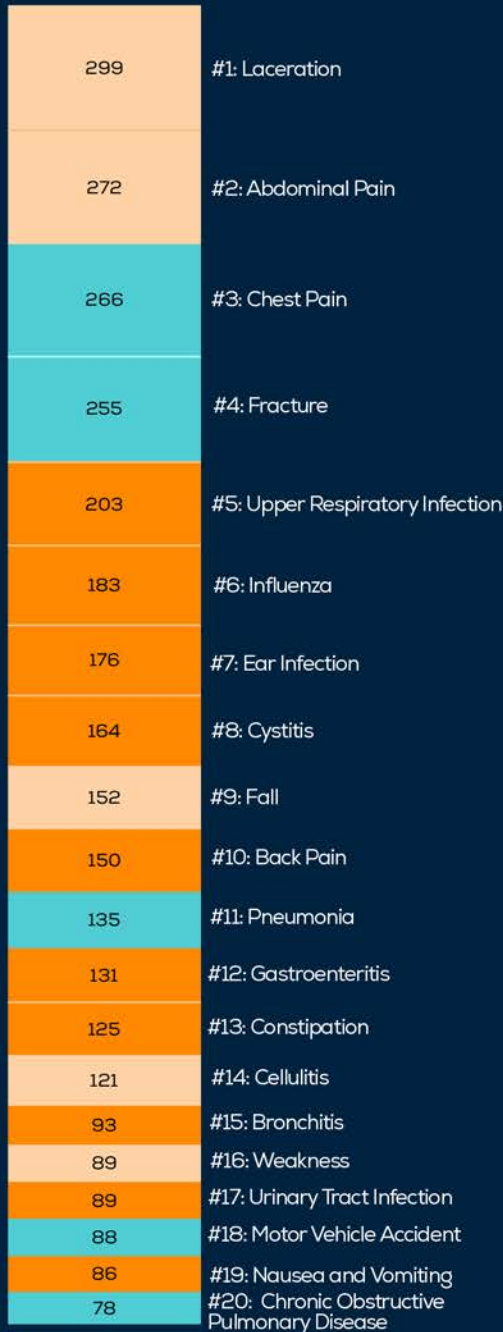


Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

LAKEWOOD HEALTH SYSTEM PATIENTS

Top ED Visit Diagnoses

Reasons patients visited Lakewood Health System's ED in 2024.

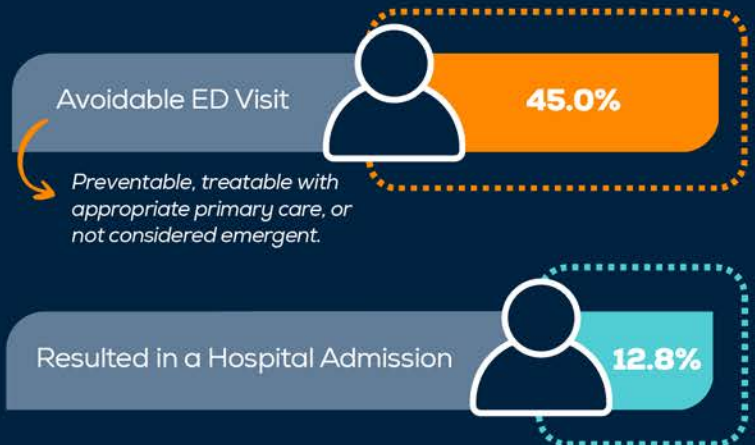


- Avoidable
- Either Avoidable or Unavoidable
- Often Unavoidable

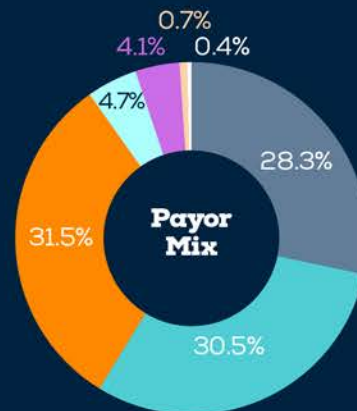
Avoidable ED Visits

The emergency department (ED) provides services to all who seek emergency care, regardless of ability to pay. The ED is also an important source of admissions for hospitals. Lakewood Health System charted 9,954 ED visits in 2024, with nearly 1,280 visits resulting in a hospital admission. More than 4,475 of the total ED visits were avoidable.

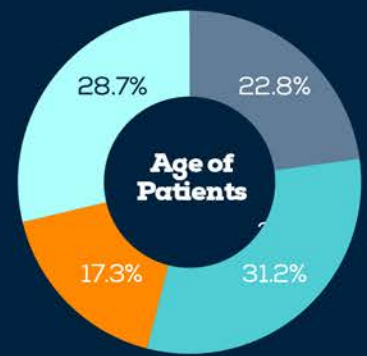
Avoidable ED visits are non-emergent visits for conditions that could have been safely and effectively treated in a primary care setting or prevented with adequate care.



ED Visits by Payor and Age



- Commercial/Private
- Medicare
- Medicaid
- Self-Pay (Uninsured)
- VA Health Care
- Workers' Compensation
- None Listed



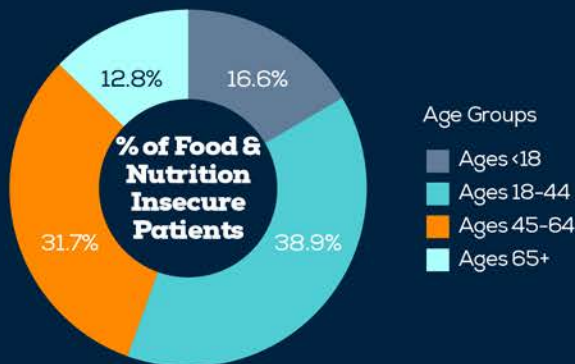
- Ages <18
- Ages 18-44
- Ages 45-64
- Ages 65+

Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

LAKEWOOD HEALTH SYSTEM PATIENTS

Food and Nutrition Insecure Patients

Lakewood Health System completed a total of 34,565 patient screens for food and nutrition insecurity. Among those screened, 398 were identified as having limited or uncertain availability of nutritionally adequate and safe food and referred to the Community Health Team.



Food Security Programs

In 2024, Lakewood Health System's Community Health Team implemented eight* targeted initiatives to combat food and nutrition insecurity. These programs required substantial institutional investment, including dedicated staff time and financial resources, to deliver vital nutritional support to 1,992 individuals and families – including older adults, students, new mothers, employees and household members.



* Two additional food and nutrition security interventions are discussed on pages 55 and 65.

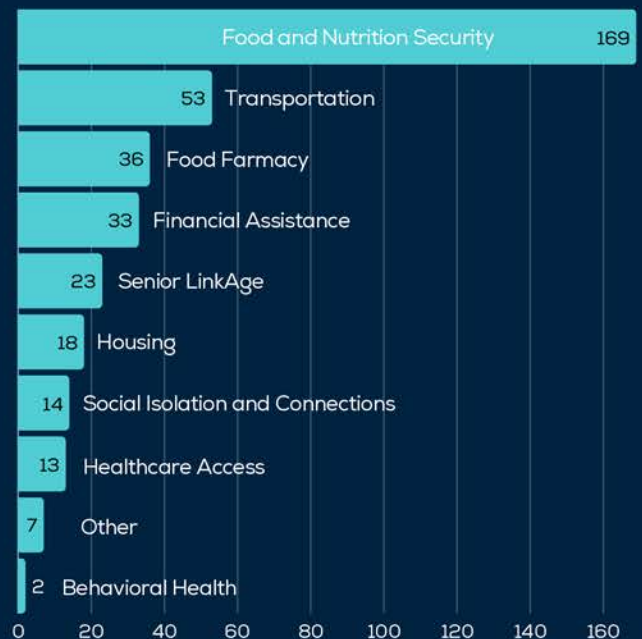
Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

Lakewood Health System employs a three-member Community Health Team who addresses the health-related social needs of its most vulnerable patient population. **During all visit encounters and hospital discharges, care teams screen patients to identify and assess food and nutrition insecurity**, tracking the responses in the organizations electronic health records (EHR) system.

When those screenings reveal an unmet social need, patients are immediately referred to the Community Health Team.

Closed Loops

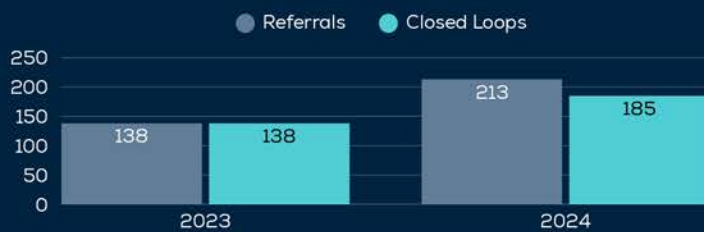
The Community Health Team connected patients with health-related social needs (HRSNs) to social care. The team closed the loop on 186 of 267 referrals. The chart below illustrates the services accessed and provided to patients.



LAKEWOOD HEALTH SYSTEM PATIENTS

MNsure Navigation

Lakewood Health System's Community Health Team, staffed by certified MNsure Navigators, experienced a significant increase in demand for its services in 2024. The team provided expert, no-cost guidance to individuals and families seeking health insurance through the Minnesota Marketplace. This notable rise in requests for assistance over the previous year highlights the increasing need for professional, community-based support in navigating the healthcare insurance enrollment process.



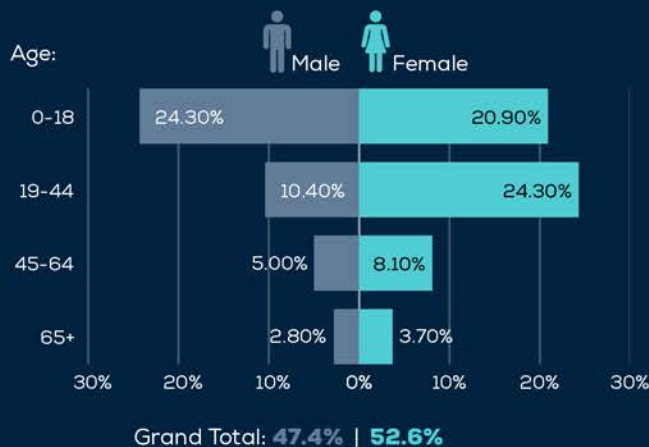
Hispanic Patient Population

Hispanic individuals are the largest ethnic minority in the Staples-Motley community, the broader three-county region, and Lakewood Health System's patient population.

647 Annual Patient Count

540 Active Patient Panel

Age and Gender Distribution



Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

Top 10 Social Risk Factors

In 2024, Lakewood Health System's Community Health Team enrolled 139 Hispanic individuals (48 mothers, 91 children). The team identified and provided referrals for the following top health-related social needs.



Food Security Program



Culturally Inclusive Meals:
80 Hispanic-Latino Individuals.

MEDICAID POPULATION (IHP)

IHP Data

The table below provides the rate of prevalence at which Lakewood Health System's IHP-attributed patients access medical and dental care.

PREVALENCE OF OUTCOMES AMONG ATTRIBUTED PATIENTS - ADULTS		
HEALTH OUTCOMES	LHS	MN MA
ED VISIT: EMERGENT - ED CARE NEEDED - PREVENTABLE/AVOIDABLE	19.43%	20.19%
ED VISIT: EMERGENT - PRIMARY CARE TREATMENT	28.87%	30.79%
ED VISIT: NON-EMERGENT	20.57%	19.45%
POTENTIALLY PREVENTABLE ADMISSION	1.96%	3.61%
ALL-CAUSE READMISSION (WITHIN 30 DAYS OF A HOSPITAL DISCHARGE)	0.39%	0.94%
ANNUAL PREVENTIVE VISIT (HIGHER RATE IS BETTER)	59.45%	62.58%
ANNUAL DENTAL VISIT (HIGHER RATE IS BETTER)	48.01%	46.21%

PREVALENCE OF OUTCOMES AMONG ATTRIBUTED PATIENTS - CHILDREN		
HEALTH OUTCOMES	LHS	MN MA
ED VISIT: EMERGENT - ED CARE NEEDED - PREVENTABLE/AVOIDABLE	26.54%	19.17%
ED VISIT: EMERGENT - PRIMARY CARE TREATMENT	21.23%	23.15%
ED VISIT: NON-EMERGENT	20.60%	23.45%
ANNUAL PREVENTIVE VISIT (HIGHER RATE IS BETTER)	82.87%	77.68%
ANNUAL DENTAL VISIT (HIGHER RATE IS BETTER)	63.51%	63.91%

BOLDED values show a negative change when compared to the 2022 CHNA baseline.

Data Source: DHS, IHP Data for Lakewood Health System, 2025

Partnership with DHS

Lakewood Health System has participated in the Minnesota Department of Human Services (DHS) Integrated Health Partnerships (IHP) program since 2015. The organization works directly with DHS in multi-year contracts to improve the quality of care and reduce costs for Minnesota's Medicaid population.

- **2015-2017:** First contract with DHS IHP.
- **2018-2021:** "IHP 2.0" was introduced, placing health equity as a central tenet of DHS's strategy.
- **2022-2024:** DHS prioritized health equity to address social determinants of health (SDOH) and reduce disparities.
- **2025-2028:** DHS seeks to improve integrated behavioral and physical health care, address SDOH, promote health technology and interoperability, and expand IHP services into new geographic areas.



Foster Vibrant Communities



PUBLIC PLACES AND SPACES

Staples, Minnesota

City Parks

- Dower Lake Recreational Area
- Lincoln Park
- Northern Pacific Park
- Odden Park
- Pine Grove Park
- Veterans Park
- Wilson Park

Other City Parks

- Lakewood Community Park
- Living Legacy Gardens
- Sacred Health Playground
- Staples-Motley Elementary Park
- Staples Motley Schools Athletic Complex

Community Fitness and Recreation Centers

- The Nest
- Staples Community Center
- Legacy Trail

Arts and Other Opportunities

- Staples Library
- Batcher Block Opera House
- Staples-Motley High School Centennial Auditorium
- Staples Golf Course
- The Vintage Golf Club
- Ten Churches

Motley, Minnesota

City Parks

- Veterans Park
- Pet Stop and Rec Area
- Farber Park
- Converse Park

Arts and Other Opportunities

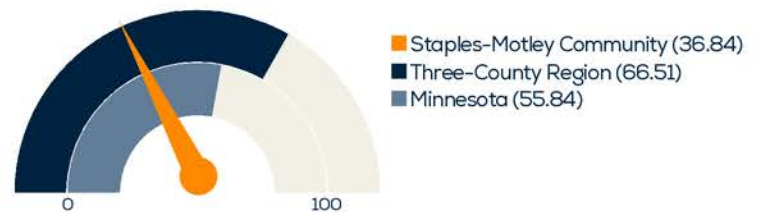
- Motley Fairgrounds
- Motley Golf Course
- Pine Ridge Golf Club
- Four Churches

Public Places and Spaces

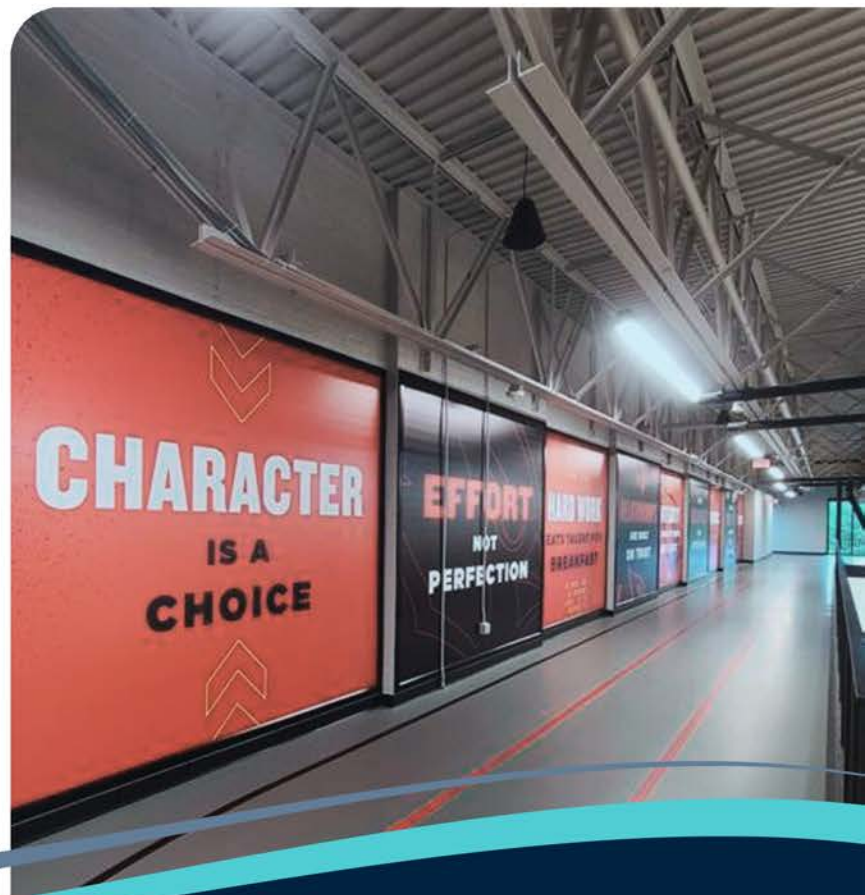
A vibrant community possess accessible, well-designed environments that promote community interaction, cultural activity, and physical and mental well-being. Features like green spaces and safe infrastructure contribute to their vitality. These public places and spaces play an important role in addressing health outcomes and mitigating risk factors by encouraging healthier lifestyles and fostering stronger social connections.

Although the Staples-Motley community has many opportunities to enjoy recreational, fitness and social opportunities, the prevalence of public places and spaces is much lower than in the three-county region and across the state of Minnesota.

Rate per 100,000 population.



Source: U.S. Census Bureau: 2023 County Business Patterns Accessed on 8/12/2025.



SAFE HOUSING

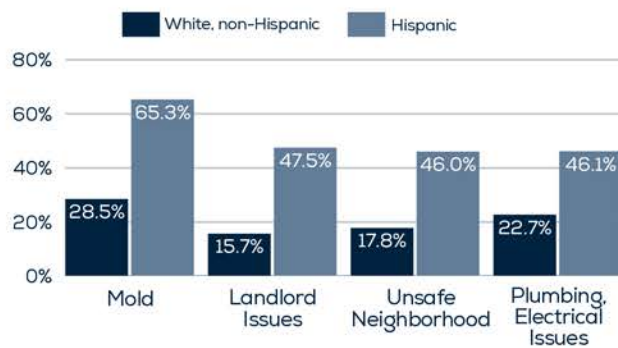
Tri-County Community Health Survey - Spotlight

Housing Concerns

Among survey participants with frequent housing concerns, there are significant racial and ethnic disparities in housing quality. Compared to their white, non-Hispanic counterparts, Hispanic respondents reported disproportionately higher rates of issues:

- **Mold:** Hispanics were approximately 2.3 times more likely to report mold problems than white respondents.
- **Landlord Issues:** Hispanic respondents were about three times more likely to report problems with landlords.
- **Unsafe Neighborhoods:** The rate of living in unsafe neighborhoods is 2.58 times higher for Hispanic respondents.
- **Plumbing, Electrical, and Appliance Issues:** The rate of these maintenance problems is more than two times higher for Hispanic respondents.

Safe housing is a foundational component of vibrant communities, as it directly impacts residents' health, stability, and sense of belonging. Vibrant communities are characterized by safe neighborhoods and access to stable housing, which allows residents to thrive, connect with one another, and access opportunities like jobs and education.



Source: 2024 Tri-County Community Health Survey. Accessed on 10/16/2025.

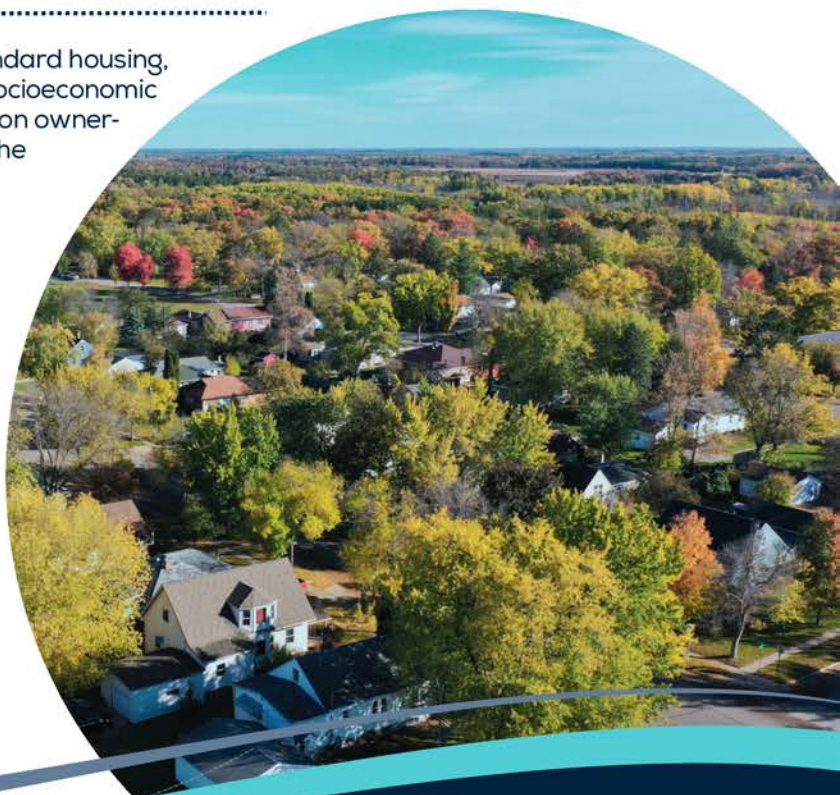
Housing Quality

The quality of housing, particularly the prevalence of substandard housing, can have a profound impact on the health, well-being, and socioeconomic outcomes of individuals and communities. The data is based on owner- and renter-occupied housing units that have at least one of the following conditions:

1. Lacking complete plumbing facilities,
2. Lacking complete kitchen facilities,
3. One or more occupants per room,
4. Selected monthly owner costs as a percentage of household income greater than 30%, and
5. Gross rent as a percentage of household income greater than 30%.

SUBSTANDARD HOUSING		
	OCCUPIED HOUSING UNITS WITH ONE OR MORE SUBSTANDARD CONDITIONS.	
	NUMBER	PERCENTAGE
MORRISON COUNTY	3,466	25.0%
TODD COUNTY	2,552	25.4%
WADENA COUNTY	1,511	25.6%
MINNESOTA	600,767	26.3%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/11/2025.



TRANSPORTATION

Rural Health Disparities

For rural residents, particularly those living more than five miles from a city or town, transportation options are severely limited. This forces a heavy reliance on personal vehicles, which are essential for daily activities such as accessing food and healthcare. Reliable and affordable transportation also connects residents to jobs, education, and community life, including family, friends, and faith communities. Consequently, job security and overall quality of life are critically dependent on reliable and affordable transportation.

Households Without a Motor Vehicle

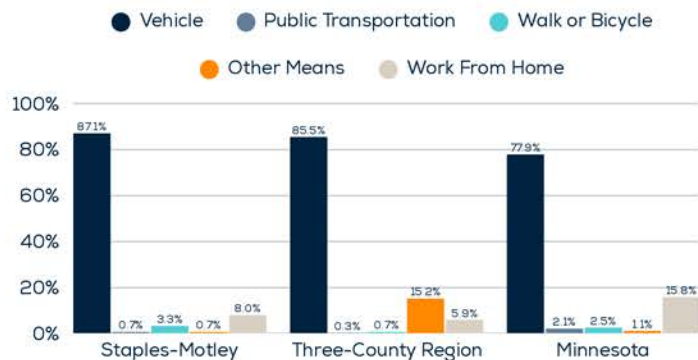
5.4% 180 in the Staples-Motley Community

6.1% 1,807 in the Three-County Region

6.5% 149,094 in Minnesota

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/5/2025.

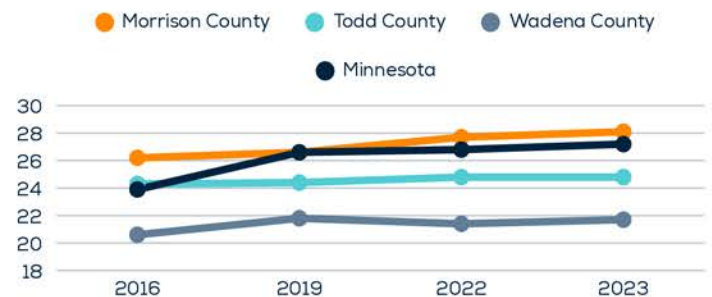
Transportation to Work



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/5/2025.



Commute Time to Work



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 10/15/2025.

DIGITAL INFRASTRUCTURE

Households with a Computer and Reliable Internet

Access to reliable, high-speed internet empowers individuals with critical connections to education, employment, and healthcare, powering services such as telehealth consultations and secure patient portals like MyChart. Internet access also links people to state and federal programs, such as SNAP, and is a critical source of information. Beyond practical benefits, it promotes social connection and opportunity, helping to combat loneliness and isolation, especially among older adults.

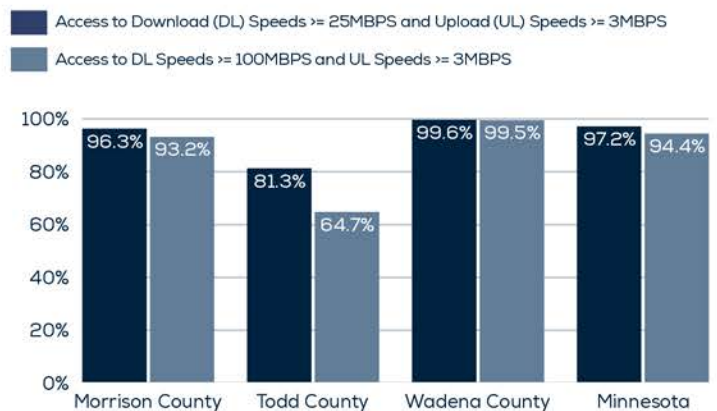
Overall, the proportion of residents in the Staples-Motley community and three-county region who own a computer and has reliable internet has increased since the 2022 CHNA report. However, the rates are lower than the state of Minnesota.

HOUSEHOLDS WITH A COMPUTER AND RELIABLE INTERNET			
	STAPLES-MOTLEY	THREE-COUNTY REGION	MINNESOTA
WITH A COMPUTER	93.28%	92.93%	97.34%
WITH A BROADBAND INTERNET SUBSCRIPTION	88.63%	86.43%	93.46%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/5/2025.

Broadband Access

Broadband is important for health outcomes because it is a significant social determinant of health that improves access to medical care and other health-related resources. It enables telehealth, which provides remote consultations and specialist access, and allows for remote patient monitoring. Additionally, broadband facilitates access to health information, and improves access to jobs and education, which are all critical factors influencing health.



Source: FCC FABRIC Data. Additional data analysis by CARES. December 2024. Accessed on 10/22/2025.

Tri-County Community Health Survey - Spotlight

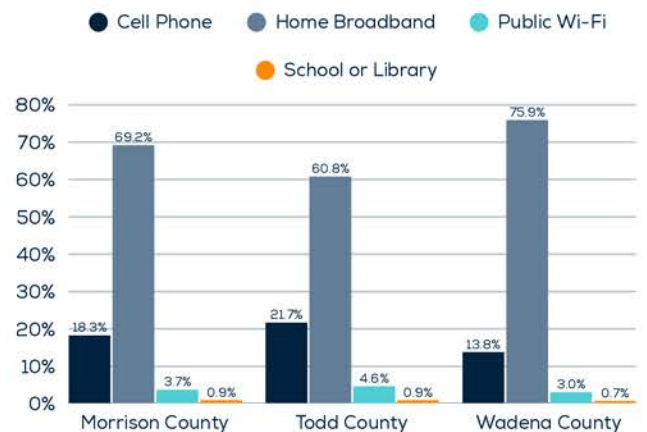
Digital Divide

The Tri-County Community Health Survey has revealed a significant digital divide. While 7.2% of all residents across the three-county region lack reliable internet access, this issue is far more pronounced within certain groups.

For instance, more than 18% of low-income residents and nearly 12% of older adults (65+) do not have reliable internet. The disparity is particularly stark for low-income older adults, with nearly one in three (32.1%) lacking reliable access.

This challenge is most severe in Todd County, where a staggering 40% of low-income older adults are without reliable internet. This connectivity gap hinders their ability to access essential services and stay connected with family.

Accessing the Internet



Source: 2024 Tri-County Community Health Survey. Accessed on 10/22/2025.

QUALITY CHILDCARE

The first five years of life are foundational for a child's development, shaping their learning, behavior, and lifelong outcomes. Access to affordable, high-quality, and reliable child care with sufficient capacity is essential. It not only allows parents to work, increasing their productivity and social independence, but also strengthens the local economy and builds supportive communities. In the three-county region, most licensed child care is provided through family and in-home settings, with 135 such providers compared to only 23 child care centers.

Unfortunately, many child care providers do not participate in Minnesota's subsidized child care program, the Child Care Assistance Program (CCAP). This limits access for low-income families, who rely on CCAP to afford child care while they work or go to school. The program, operated by the Minnesota Department of Human Services, provides financial aid so parents can find stable employment and children receive quality care to prepare them for kindergarten.

CHILD CARE CENTERS			
	CERTIFIED CHILD CARE CENTER	CHILD CARE CENTER	FAMILY CHILD CARE
STAPLES-MOTLEY COMMUNITY	1	2	5
THREE-COUNTY REGION	7	16	135
MINNESOTA	598	1,779	5,530

Source: Minnesota Department of Human Services (DHS), Glossary of Terms for DHS Licensing Information Lookup. Accessed on 10/27/2025.



Definition for Licensed Child Care in Minnesota

Child Care Center: Programs licensed to provide care to children for less than 24 hours a day in a commercial setting.

Certified Child Care Center: Child care providers that are not required to be licensed but are certified by DHS to be eligible to accept Child Care Assistance Program payments.

Family Child Care: Programs licensed to provide care to children for less than 24 hours a day, typically in the provider's home or a local space, including a church.

Ratio of Child Care Centers

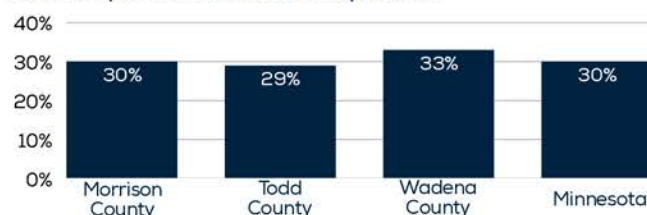
The below dataset includes center-based child day care locations (including those in schools and religious institutions) and does not account for other forms of care, such as family-based child care.

RATIO OF CHILD CARE CENTERS	
	PER 1,000 CHILDREN UNDER AGE 5
MORRISON COUNTY	5
TODD COUNTY	6
WADENA COUNTY	3
MINNESOTA	6

Source: The University of Wisconsin, Population Health Institute, County Health Rankings, 2025. Accessed on 10/23/2025.

Child Care Cost Burden

Child care cost burden is the percentage of a family's income spent on child care expenses.



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates. Accessed on 8/23/2025.

HEALTHY FOOD ENVIRONMENT

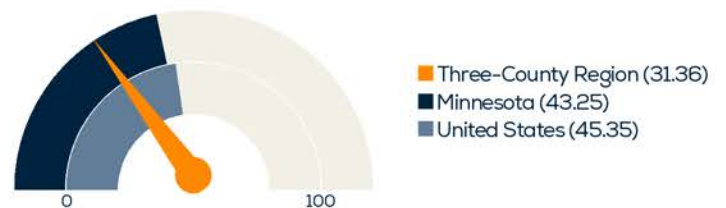
The food environment in a community creates the context in which individuals and families acquire and consume food. Everything from a supermarket's location to a restaurant's atmosphere influences people's food choices, shaping their access, affordability, and desire for certain items. These food environments ultimately promote or hinder healthy eating patterns.

- **Grocery Stores:** This indicator is important because access to healthy foods is a critical factor influencing positive dietary behaviors, with grocery stores serving as a primary source for these items.
- **Full-Service Restaurants:** This indicator is relevant because it provides insight into local food environments, dining habits, and access to potentially healthier or more diverse food choices.
- **Fast-Food Restaurants:** The prevalence of fast-food restaurants, combined with measures of local healthy food options, provides a more accurate picture of environmental influences on dietary behaviors.

Food Environment - All Retail Food Outlets

Retail food outlets include all establishments primarily engaged in selling food and beverages for off-site or immediate consumption, encompassing grocery stores, supermarkets, convenience stores, specialty food stores (such as meat or produce markets), restaurants and food and beverage vendors. The three-county region has fewer options than the state of Minnesota and the nation, overall.

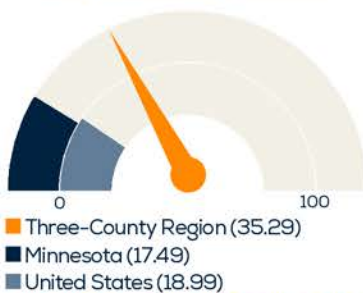
Rate per 100,000 population.



Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2023. Accessed on 8/11/2025.

Grocery Stores

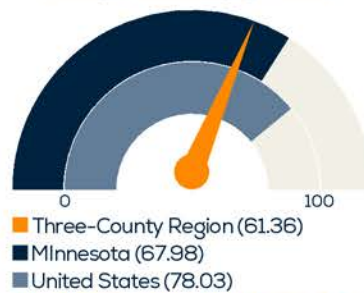
Rate per 100,000 population.



Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2023. Accessed on 8/11/2025.

Full-Service Restaurants

Rate per 100,000 population.



Fast-Food Restaurants

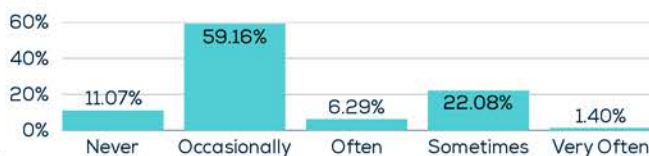
Rate per 100,000 population.



Tri-County Community Health Survey - Spotlight

Eating Out Habits

Based on survey results, nearly 90% of respondents eat out at a restaurant at least one time in a typical week. **88.9%**



Source: 2024 Tri-County Community Health Survey. Accessed on 9/25/2025.



SNAP AND WIC AUTHORIZED FOOD RETAILERS



SNAP Authorized Farmers Markets

Farmers markets can become authorized SNAP retailers, enabling them to accept Supplemental Nutrition Assistance Program (SNAP) benefits. In Minnesota, many markets further increase food accessibility by participating in Market Bucks, a program that offers a triple match for SNAP beneficiaries. This means a participant can spend \$10 in SNAP benefits and receive an additional \$20 in matching bucks to purchase fresh, local produce.

Lakewood Farmers Market is one of two SNAP-authorized markets in Todd County, but the only market that offers the Market Bucks program.

FMNP and SFMNP Authorized Farmers Markets

Farmers markets may also be authorized to accept vouchers from the Farmers Market Nutrition Program (FMNP) and the Senior Farmers Market Nutrition Program (SFMNP). The FMNP and SFMNP are federal programs designed to help provide fresh, local produce to eligible women, infants, children, and seniors.

Lakewood Health System operates Todd County's only farmers market authorized to accept vouchers from the FMNP and SFMNP, both administered by the Department of Agriculture.

Authorized Farmers Markets in the Region

As of 2025, the regional food landscape across Morrison, Todd, and Wadena counties is anchored by six SNAP-authorized farmers markets. These locations directly advance health equity by providing accessible, affordable, and nutritious food through state-authorized nutrition assistance programs.

AUTHORIZED FARMERS MARKETS (2024)				
	MORRISON COUNTY	TODD COUNTY	WADENA COUNTY	MINNESOTA
SNAP AUTHORIZED FARMERS MARKETS	3	2	1	181
MARKET BUCKS OFFERED AT FARMERS MARKETS	1	1	1	107
FMNP AND SFMNP OFFERED AT FARMERS MARKETS	0	1	1	106

Source: Minnesota Department of Agriculture - Authorized Farmers Markets. Accessed on 10/15/2025.

SNAP AND WIC AUTHORIZED FOOD RETAILERS

SNAP Authorized Food Stores

Stores authorized to accept SNAP benefits include grocery stores, supercenters, specialty food stores, and convenience stores

SNAP-authorized food stores, rate per 10,000 population



Source: USDA Food and Nutrition Service - SNAP Retailers. Accessed on 10/15/2025.

WIC Authorized Food Stores

WIC authorized food stores in Minnesota include major retailers as well as many smaller grocery stores and authorized farmers markets.

WIC-authorized food stores, rate per 10,000 population



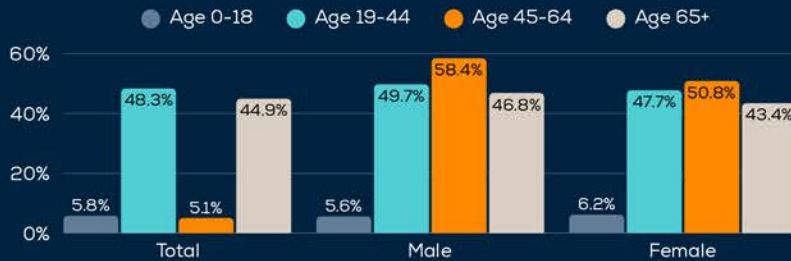
Source: Minnesota Department of Health - WIC Program, WIC Grocery Store Search. Accessed on 10/15/2025.



LAKEWOOD HEALTH SYSTEM PATIENTS

Obesity Rates

Obesity affects over 42% of the patient population at Lakewood Health System. Obesity is clinically defined by a body mass index (BMI) of 30 or greater.



Low Physical Activity

When asked about their ability to engage in physical activity, 642 of 1,060 Lakewood Health System patients (60.6%) reported low activity levels.



Lakewood Farmers Market

The Lakewood Health System-operated farmers market utilized financial incentives - including produce prescriptions for 367 patients who participated in the Food Farmacy and Fresh Delivered programs and dollar-for-dollar matching programs for 139 SNAP recipients and 301 employees - to make local food more affordable.

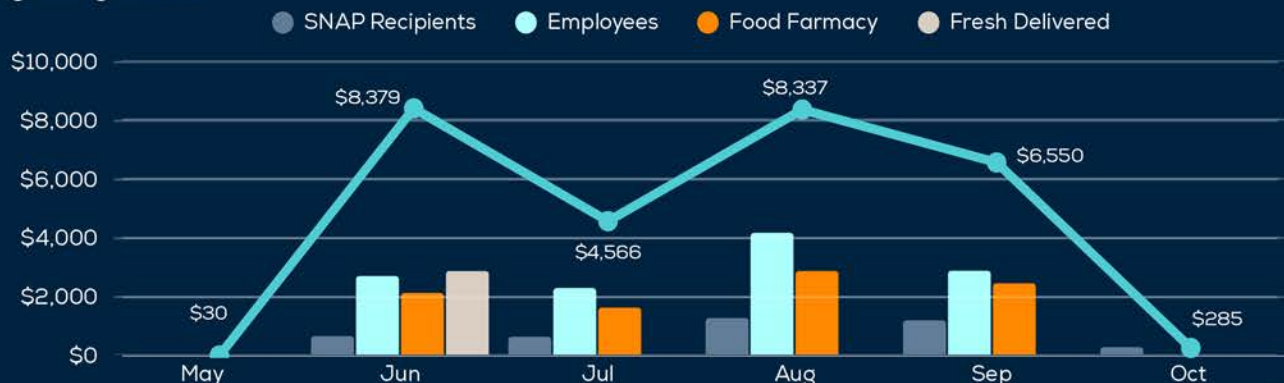
Beyond individual health, the market infused \$28,147 into local economies through direct sales in 2024, playing a significant role in supporting local growers



Food Security Program



Farmers Market:
807 Individuals.



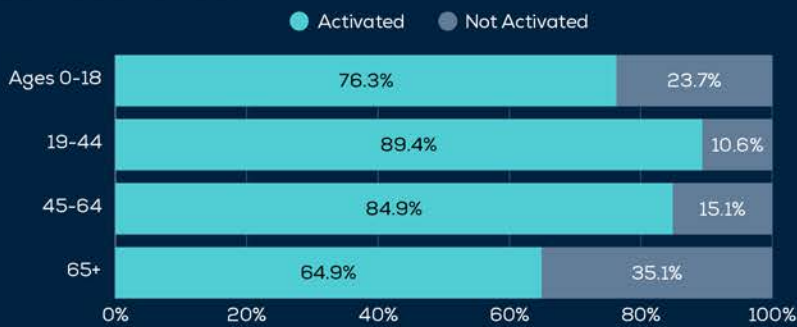
Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

LAKEWOOD HEALTH SYSTEM PATIENTS

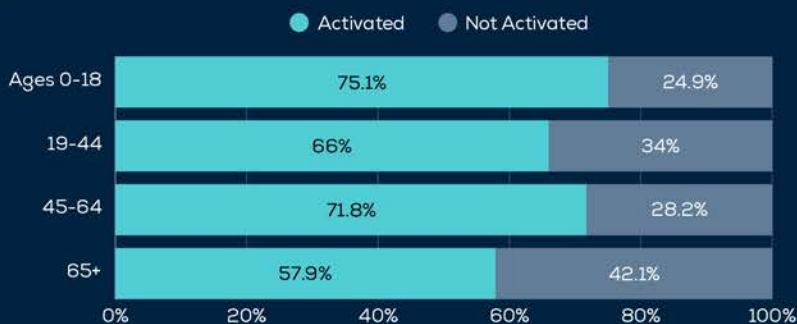
MyChart Utilization

The charts below illustrate the percentage of Lakewood Health System patients who have activated their MyChart account, by gender and age.

Female Patients



Male Patients



Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.

MyChart

MyChart is a secure, online platform that empowers patients to take a more active role in their healthcare. Once activated, Lakewood Health System patients can view medical records and test results, schedule appointments, complete e-check-in, and send secure messages to care teams. MyChart also strengthens patient-provider communication and improves engagement.

Low MyChart activation can worsen existing health inequities by disproportionately affecting vulnerable populations who already experience barriers to quality care, including lower-income individuals, racial and ethnic minorities, older adults, and those with lower digital and health literacy.

The Care Van

To address the challenges of rural healthcare access and transportation barriers, Lakewood Health System offers a state-approved Care Van service for non-emergency medical appointments. The organization has a dedicated team of nine trained drivers who provide personal assistance, helping patients safely get into and out of their homes and the vans.

In 2024, the fleet of four Care Vans traveled 126,270 miles and successfully provided 1,837 rides to help patients access the healthcare they needed.

Source: Lakewood Health System Electronic Health Records, Calendar Year 2024.



CHNA RESOURCES

References: Secondary and Primary Data Sources and Descriptions

Survey Tool: Tri-County Community Health Survey



REFERENCES

Secondary Data Sources & Descriptions

Centers for Disease Control and Prevention (CDC) - Behavioral Risk Factor Surveillance System (BRFSS)

- Provides state and county statistical area data from this survey tool - collecting information from adults about health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury.

<https://www.cdc.gov/>

Community Commons

- This site provides an immediate secondary data report, called Spark Maps, which can customize reports by county and by indicators.

<https://www.communitycommons.org/>

Feeding America

- Feeding America uses data to analyze the complex relationship between food insecurity and socioeconomic factors.

<https://www.feedingamerica.org/>

Healthy People 2030 (HP 2030) - U.S. Department of Health and Human Services

- This source uses valid and reliable data derived from currently established and, where possible, nationally representative data systems.

<https://www.healthypeople.gov/>

Minnesota Department of Human Services (DHS) - Integrated Health Partnerships (IHP)

- DHS measures health outcomes and social risk factors among the adults and children utilizing Medical Assistance (MA), providing data to healthcare systems across the state.

<https://mn.gov/dhs>

Minnesota Department of Human Services (DHS) - Child Care Licensing Lookup

- DHS offers an online database of licensed providers to search the license status, inspection documentation, names of license holders, addresses, and more information about thousands of entities.

<https://licensinglookup.dhs.state.mn.us/>

Minnesota Department of Agriculture (MDA)

- MDA maintains a list of authorized farmers markets where they are located.

<https://www.mda.state.mn.us>

Minnesota Department of Employment and Economic Development (MN DEED)

- MN DEED has a wide range of data tools that tracks employment, cost of living, county profiles and more for regions throughout the state.

<https://mn.gov/deed/data/data-tools/>

Minnesota Department of Health (MDH) - Minnesota Center for Health Statistics

- This MDH division collects, analyzes and shares data to better understand health issues and inform public health policy decisions in Minnesota.

<https://www.health.state.mn.us/data/>



REFERENCES

Secondary Data Sources & Descriptions

MDH - Women, Infants & Children (WIC)

- MDH maintains a list of WIC-approved grocery stores available in Minnesota by store name, county, city, or zip code.

<https://www.health.state.mn.us>

United States Census Bureau (U.S. Census Bureau)

- As the federal government's largest statistical agency, the Census Bureau provides current facts and figures about America's people, places, and economy.

<https://www.census.gov/>

United States Department of Agriculture (USDA)

- The USDA has a SNAP Retailer Locator which allows anyone to search and locate nearby SNAP-authorized retailers.

<https://www.fns.usda.gov/snap/retailer-locator>

United States Health Resources and Services Administration (HRSA)

- HRSA offers the HRSA Data Warehouse (including the HPSA Find Search Tool) and the Geospatial Data Warehouse to identify medical, dental, and mental health shortage areas.

<https://data.hrsa.gov/>

University of Wisconsin Population Health Institute - County Health Rankings and Roadmaps

- The annual County Health Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. This source provides a snapshot of how health is influenced by where we live, learn, work and play.

<https://www.countyhealthrankings.org/>

Lakewood Health System - Electronic Health Records (EHR)

- EHR is primarily used by hospitals and health systems to access, organize, store and share patients' health-related information. Lakewood Health System used EHR to extract calendar year 2024 patient data to analyze and compare with other secondary and primary data sources.

Lakewood Health System - Human Resources (HR)

- HR maintains a comprehensive list of its healthcare professionals - those who serve in patient care roles and those who provide administrative support.

Lakewood Health System - Fiscal

- Fiscal tracks community benefit spending to meet IRS reporting requirements. The data is used to report various community benefits, such as charity care, community health improvement services, and financial assistance for Medicaid patients, in order to maintain their tax-exempt status.

<https://www.lakewoodhealthsystem.com/>



TRI-COUNTY COMMUNITY HEALTH SURVEY

2024 Community Health Needs Survey

This survey is for adults (age 18 and over) who currently live in Morrison, Todd, or Wadena Counties.

Completing this survey is completely voluntary. **All answers to the questions are strictly confidential and no personal information will be linked to any of the responses.**

Thank you for your input and helping us to improve the health of our communities!



Are you:*

☐ Male ☐ Female ☐ Other/Unspecified

Your age group:*

☐ 18-24 years ☐ 25-34 years ☐ 35-44 years ☐ 45-54 years ☐ 55-64 years ☐ 65-74 years ☐ 75+ years

How many adults (including yourself) live in your household? *Number of adults 18 or older (including yourself)

How many children live in your household? *Number of children under age 18

Are you Hispanic or Latino/Latina?*

☐ Yes ☐ No

Are you a veteran?*

☐ Yes ☐ No

Which of the following best describes you? *Mark ALL that apply

☐ American Indian or Alaska Native ☐ Asian or Pacific Islander ☐ Black or African American ☐ White ☐ Other

What was your household's total income from all earners and all sources in 2023?*

☐ Less than \$20,000 ☐ \$20,000-\$34,999 ☐ \$35,000-\$49,999 ☐ \$50,000-\$74,999 ☐ \$75,000-\$99,999
☐ \$100,000-\$149,999 ☐ \$150,000 or more

Do you have access to reliable internet?*

☐ Yes ☐ No

TRI-COUNTY COMMUNITY HEALTH SURVEY

How do you access the internet?*

☐ Home broadband/modem ☐ Cell phone data ☐ Public Wi-Fi ☐ School/Library ☐ Other

What is your current housing status?*

☐ Own a home ☐ Renting an apartment ☐ Renting a home ☐ Living with a friend or family member ☐ Other

Which of the following Counties do you live in?*

☐ Morrison ☐ Todd ☐ Wadena ☐ Other

What is the ZIP code of your current home address?*

Were you born in a different country, outside of the United States?*

☐ Yes ☐ No

What country were you born in?

Which of the following best describes your current relationship status?*

☐ Married ☐ Living with a partner ☐ Separated ☐ Widowed ☐ Divorced ☐ Single

What is the highest level of education you have completed?*

☐ Some high school ☐ GED or completed high school ☐ Trade/Technical degree ☐ Bachelor's degree ☐ Master's degree ☐ Doctorate

Do you currently have a primary care doctor?*

☐ Yes ☐ No

What are the main reasons you do not have a primary care doctor? Mark ALL that apply

☐ Cost ☐ Lack of transportation ☐ Language barrier ☐ Lack of insurance ☐ Long wait times for appointments
☐ Conflicts with work schedule/work does not allow ☐ Not needed ☐ Embarrassed or afraid ☐ Other

Quality of Life

Please rate your agreement with each statement about your community

Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

Are you satisfied with the health care system in your community?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

TRI-COUNTY COMMUNITY HEALTH SURVEY

Is your community a good place to raise children?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Is your community a good place to grow old?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Are there good job opportunities in your community?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Is your community a safe place to live?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Is your community a place to reach your future goals and dreams?* Use the following scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

In a typical month, how many times do you interact (text, call, social media) with family, friends, or neighbors?*

☐ 0 days ☐ 1-9 days ☐ 10-19 days ☐ 20-29 days ☐ All 30 days

In a typical month, how many times do you get together in-person with family, friends, or neighbors?*

☐ 0 days ☐ 1-9 days ☐ 10-19 days ☐ 20-29 days ☐ All 30 days

How would you rate your overall level of stress in the last month?*

☐ High ☐ Medium ☐ Low

Has this stress prevented you from attending work, school, or social events?

☐ Yes ☐ No

During the past 30 days, for about how many days have you felt nervous, on edge, or could not stop worrying?

☐ 0 days ☐ 1-9 days ☐ 10-19 days ☐ 20-29 days ☐ All 30 days

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

☐ 0 days ☐ 1-9 days ☐ 10-19 days ☐ 20-29 days ☐ All 30 days

In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?*

☐ Yes ☐ No

TRI-COUNTY COMMUNITY HEALTH SURVEY

How often are you concerned about the following in your home?

Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

Mold* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

Issues with landlord* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

Unsafe neighborhood* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

Plumbing, electric, or appliances not working properly* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

Mental health in the home* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

Substance use in the home* Please rate each item on a scale from 1 to 4, where 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, NA = Not Applicable

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ NA

In the following list, what do you think are the three most "harmful behaviors" in my community?* Those behaviors which have the most negative impact on overall health

☐ Alcohol use ☐ Dropping out of school ☐ Drug use ☐ Lack of exercise ☐ Lack of maternity care ☐ Poor eating habits ☐ Not getting shots to prevent disease ☐ Racism ☐ Tobacco use ☐ Unsafe driving ☐ Use of firearms ☐ Unsafe sex ☐ Other

In a typical week, how many meals do you eat out at restaurants, including carryout/takeout/delivery?*

☐ Never ☐ Occasionally (1-2 meals) ☐ Sometimes (3-4 meals) ☐ Often (5-6 meals) ☐ Very Often (7 or more meals)

How many days a week do you eat dinner at the table together with your family?*

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7

TRI-COUNTY COMMUNITY HEALTH SURVEY

Do you have any firearms present in the home?*

☐ Yes ☐ No

Are the firearms stored in a gun safe, lock box, or with a trigger/cable lock, and away from ammunition?

☐ Yes ☐ No

Do you know how to access resource information in the community if you need it? * Such as, food shelves, mental health services, domestic violence supports, Supplemental Nutrition Assistance Program (SNAP), housing services, etc.

☐ Yes ☐ No

Have you experienced discrimination in the past 12 months?*

☐ Yes ☐ No

In what area(s) have you been discriminated against? * Select all that apply

☐ Ethnicity ☐ Disability ☐ Equal pay/compensation ☐ Genetic information ☐ Harassment ☐ National origin
☐ Pregnancy ☐ Race/Color ☐ Religion ☐ Retaliation ☐ Sexual harassment ☐ Sexual orientation and gender identity ☐ Sex ☐ Age ☐ Weight ☐ Other

If you experienced discrimination in the past 12 months, in which of the following situations? * Select all that apply

☐ Applying for a job ☐ Working at a job ☐ Receiving medical care ☐ Looking for a house or apartment
☐ Applying for a credit card, bank loan or mortgage ☐ Accessing education for yourself or your child ☐ Shopping at a store or eating at a restaurant ☐ Applying for social services or public assistance ☐ Dealing with the police
☐ Appearing in court ☐ Other

Would you like to enter our raffle for a chance to win a \$100 VISA gift card?*

☐ Yes ☐ No

Full Name

Phone Number

Mailing Address

Thank you for completing this survey!

Tri-County Community Health Survey Results

For inquiries regarding the full results of the Tri-County Community Health Survey and detailed data sets, please contact Amy Wiese, Community Health Specialist, at amywiese@lakewoodhealthsystem.com



49725 County 83
Staples, MN 56479

218.894.1515
LakewoodHealthSystem.com