

# COMMUNITY HEALTH NEEDS ASSESSMENT

## COMMUNITY MEMORIAL HOSPITAL

2025



|  |           |
|--|-----------|
| <b>Background.....</b>                                     | <b>2</b>  |
| About Community Memorial Hospital.....                     | 2         |
| About Community Health Needs Assessments .....             | 4         |
| Service Area .....   | 6         |
| Processes and Methodology .....                            | 7         |
| Resources and Secondary Information.....                   | 8         |
| Parameters for Data Collection .....                       | 9         |
| Demographics .....   | 9         |
| <b>Developing the CHNA.....</b>                            | <b>16</b> |
| Meetings with Community Members and Focus Groups.....      | 16        |
| Initial Meeting.....                                       | 16        |
| Distribution of Survey .....                               | 17        |
| Community Engagement .....                                 | 17        |
| <b>The Survey Results.....</b>                             | <b>18</b> |
| Awareness of Services at Community Memorial Hospital ..... | 18        |
| Services Used at Other Locations .....                     | 19        |
| Health Priorities in the Community .....                   | 20        |
| Chronic Conditions .....                                   | 21        |
| The Elderly .....  | 23        |
| Aspects of Healthcare .....                                | 25        |
| Additional Thoughts from the Survey .....                  | 25        |
| <b>Implementation Plan .....</b>                           | <b>27</b> |
| Expand Specialty Services within the Hospital.....         | 28        |
| Explore Gaps in Behavioral Health .....                    | 29        |
| Explore Gaps in Women's Health .....                       | 30        |
| Address Areas of Preventative Care .....                   | 31        |
| Address Areas of Chronic Care.....                         | 32        |
| Conclusion.....  | 33        |
| <b>Appendix .....</b>                                      | <b>35</b> |
| Photos: .....  | 35        |

# BACKGROUND

## ABOUT COMMUNITY MEMORIAL HOSPITAL

The story of Community Memorial Hospital (CMH) in Cloquet began with a shared vision—a vision rooted in the belief that access to healthcare is as vital to a community as fire and police protection. That vision became reality on July 27, 1958, when CMH opened its doors

on land generously donated by the Northwest Paper Company, now known as Sappi. Driven by determination, local residents and businesses rallied together to raise the necessary funds, united by a common goal: to bring hospital care close to home.

As medical needs evolved, so did CMH. In 2004, the hospital embarked on a major renovation project, breaking ground on a series of upgrades that would modernize its infrastructure and expand its services. With strong backing from the local community, the hospital added a new emergency department, surgical suites, imaging facilities, and a remodeled laboratory. All of these were critical enhancements for providing 21st-century care in northern Minnesota.

The following year, on January 1, 2005, CMH received its designation as a Critical Access Hospital (CAH), a federally supported classification aimed at strengthening healthcare in rural areas. This designation not only acknowledged CMH's importance to the region but also helped safeguard its future in an ever-changing healthcare landscape.

Growth continued into the next decade. By 2013, the completion of phase two of the hospital's expansion brought more than 80,000 additional square feet to the facility. This phase included a new inpatient unit with private rooms and intensive care services, an infusion therapy center, the CMH Specialty Clinic, and enhanced public spaces like a new cafeteria, meeting rooms, a chapel, and an expanded gift shop.

### *CMH Mission:*

“Your Neighbors Caring for You”

### *Our Vision*

Community Memorial Hospital is the local health system of choice for quality health care, ensuring local access in collaboration with our local and regional partners.

In January 2020, CMH took another significant step forward by merging with Raiter Family Clinic, a trusted neighbor that had served the community independently since 1960. This integration further strengthened CMH's ability to deliver comprehensive, coordinated care to the region.

Today, Community Memorial Hospital stands as more than just a hospital. It is an independent, full-service healthcare campus serving Cloquet, Carlton County, and surrounding communities. With its Critical Access Hospital designation, CMH remains focused on its purpose: to



**CMH VSO Scholarship recipient Allie Jones.**

provide essential, high-quality healthcare close to home—today, and for generations to come.

## ABOUT COMMUNITY HEALTH NEEDS ASSESSMENTS

The Affordable Care Act (ACA), which was enacted March 23, 2010, added new requirements that hospital organizations must satisfy in order to be described in section 501(c)(3) as a nonprofit hospital. It also instituted new reporting and excise tax.

These new requirements for Charitable 501(c)(3) Hospitals are articulated in section 501(r). The ACA imposes the following new requirements on organizations that operate one or more hospital facilities (Hospital Organizations). Each 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis:

- Establish written financial assistance and emergency medical care policies
- Limit amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy
- Make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial policy before engaging in extraordinary collection actions against the individual
- Conduct a Community Health Needs Assessment (CHNA) and adopt an implementation strategy at least once every three years

These CHNA requirements are effective for tax years beginning after March 23, 2012. They carry the minimum requirement of once every three years; however, hospitals are not penalized for doing them more often.

IRS ruling 69-545 established the community benefit standard as the basis for a tax exemption. Community benefit is determined if the hospital promotes the health of a broad class of individuals in the community, based on factors that include:

- Emergency room care is open to all, regardless of ability to pay
- Surplus funds are used to improve patient care, expand facilities, train staff, etc.
- The hospital is controlled by independent civic leaders
- All available qualified physicians are privileged

The healthcare reform law, the Patient Protection and Affordable Care Act, added a new provision to the IRS code for not-for-profit hospitals. Under this provision, not-for-profit hospitals must conduct a Community Health Needs Assessment (CHNA) every three years.

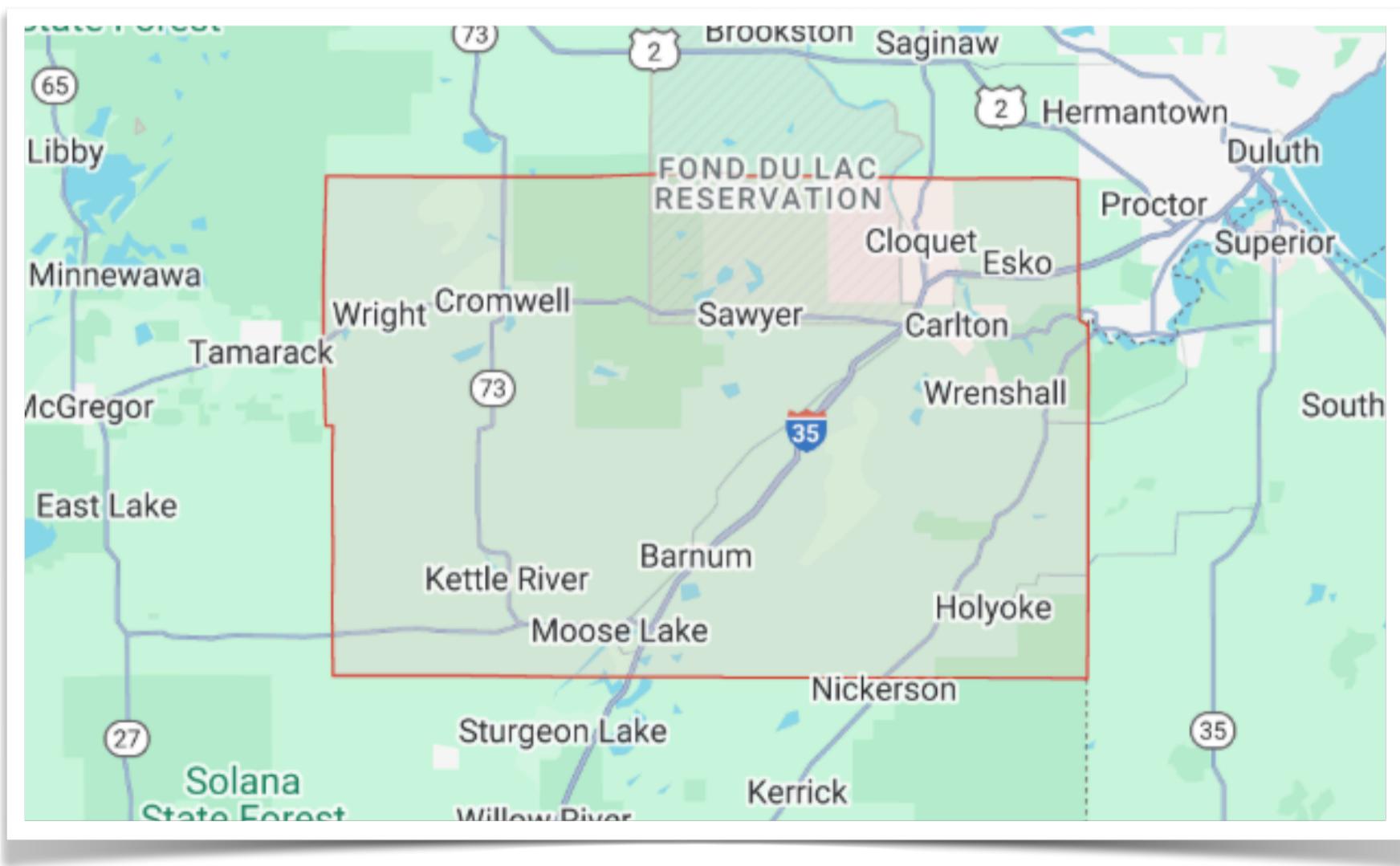
The health needs identified in the CHNA must be addressed in an action or Community Health Implementation Plan (CHIP). Other requirements of the new IRS provision include:

- The CHNA must take into account the broad interests of the community
- The assessment must involve individuals with expertise in public health
- The findings must be made widely available to the public

IRS requirements also specify that the deadline for completion of the CHNA is the end of the hospital's tax year starting after March 2012. Failure to complete a CHNA could result in a \$50,000 excise tax and possible loss of tax-exempt status.

Community Memorial Hospital engaged Cycle of Business (COB) to assist in:

- Completing a Community Health Needs Assessment
- Provide Community Memorial Hospital with the requirement necessary to be compliant on the IRS Form 990
- Create an initial Community Health Implementation Plan (CHIP) that addresses items to improve the health of the community



## SERVICE AREA

For purposes of this CHNA, we defined the Community Memorial Hospital Service Area as an area which covers Carlton County, Minnesota. The area covers a population of approximately 36,745 people. Carlton County lies on the eastern edge of Minnesota where it meets the western border of Wisconsin. The county is rectangular in shape and extends north to just above Cloquet, west to just west of Wright, and south to just below Moose Lake.

Data describing health status rankings at the zip code level was difficult to find. Therefore, data from Carlton County was used to represent the service area. Special note was taken when the focus group took exception with the data provided about the county in general.

Community Memorial Hospital has defined its primary and secondary service areas to include the following zip codes:

| Community                           | Zip Code | Population-2020 | Population-2023 |
|-------------------------------------|----------|-----------------|-----------------|
| Barnum                              | 55707    | 3,670           | 3,207           |
| Carlton                             | 55718    | 3,267           | 3,068           |
| Cloquet                             | 55720    | 17,131          | 17,480          |
| Cromwell                            | 55726    | 1,059           | 1,065           |
| Esko                                | 55733    | 5,032           | 5,180           |
| Holyoke                             | 55749    | 414             | 539             |
| Kerrick*                            | 55756    | 331             | 286             |
| Kettle River                        | 55757    | 690             | 696             |
| Moose Lake                          | 55767    | 4,297           | 4,994           |
| Sawyer                              | 55780    | 176             | 245             |
| Sturgeon Lake*                      | 55783    | 2,330           | 2,487           |
| Tamarack*                           | 55787    | 628             | 585             |
| Wrenshall                           | 55797    | 1,588           | 1,372           |
| Wright                              | 55798    | 602             | 611             |
| Estimated Service Area Population** |          | 41,215          | 41,815          |

\* Cities that are not in Carlton County, but part of the primary or secondary service areas

\*\*Population numbers vary due to zip codes outside of county that are still in primary and secondary service areas

## PROCESSES AND METHODOLOGY

Completion of the CMH Community Health Needs Assessment (CHNA) followed a modified outline designed by the Center for Rural Health at the University of North Dakota for the North Dakota Critical Access Hospitals. The sections of this CHNA generally follow their suggested methodology, but have been modified to meet the needs of Community Memorial Hospital and Carlton County.

An initial meeting with various representatives of the community was held to discuss what we currently understood of healthcare needs in the county. General health information about the county was discussed to ensure committee members understood the current state of health in the hospital's service area. The participants were asked to review the survey that would be distributed to the public ensuring the overall healthcare needs in the county were being addressed. Their input was assimilated into the survey to ensure we addressed the needs of the communities they represent.

The survey was then given to the members of the committee to distribute throughout the community to try to get a broad and diverse response. The goal was to ensure CMH understood the health needs and desires of the community. Understanding where people were receiving healthcare outside of the community was important in understanding how to provide the services and resources necessary for a healthier county.

The Senior Leadership Team wanted to ensure the CHNA dealt with the opinions of the community and make sure they had created a data driven plan to address what would be appropriate for the hospital to accomplish. The hospital team selected several goals to work on over the next few years that would allow them to better serve the community. These goals were then compiled into a Community Health Implementation Plan (CHIP) for



**Hand therapy is a specialized program offered by Occupational Therapy & Rehabilitation Services**

tracking progress. That plan was started in Cycle of Business' Strategy management system, an online tool to track and monitor progress on the CHIP.

This process allowed CMH to share with the public actions the hospital would take to improve the health in the community. The Hospital CHNA was prepared and taken to the Board of Directors for their input and final approval.

## **RESOURCES AND SECONDARY INFORMATION**

The CHNA for Community Memorial Hospital utilized data from:

**County Health Rankings.** Since it began in 2010, County Health Rankings ranks the health of nearly every county in the nation and is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The program awards grants to local coalitions and partnerships working to improve the health of people in their communities. The information received from this website appears to be from 2019.

**Current Census Data.** The United States Government conducts a census every few years to gather data on certain demographics in the country. The last census data for Carlton County, Minnesota, was conducted in 2022.

**Survey Conducted through the Hospital and Community.** A survey was designed with the help of CMH and the focus team to gather information from the community on the immediate needs of the population.

**Bridge to Health.** A valued source of information on key health indicators for adults in the Northeastern Minnesota/Northwestern Wisconsin region for more than 25 years.

**Fond Du Lac Reservation Housing and Community Needs Assessment.** A 2023 assessment specifically designed to gather health information from the Indigenous people of the area.

**Broad Interests of the Community were Considered.** Community Memorial Hospital took special care to find individuals who could help define the healthcare needs of the community representing the youth, the elderly, and varied demographics. The information from their survey was utilized in the creation of the hospital CHNA and CHIP.

The individuals involved in the initial meeting were asked to review the survey, the community demographics, and give their input on the health and wellness needs of the

community. Additional efforts were made to reach out to the community in general for input on the survey. A link to the survey was sent out to the major employers in the area, emailed to community partners, and disbursed via social media to extend the reach as far as possible. After a few months, the survey had received responses from the community representing all demographics. That information was then brought back to the hospital and community members to discuss what was most important to the community and what the hospital could do to help improve the health and availability of healthcare in the community.

## **PARAMETERS FOR DATA COLLECTION**

COB and CMH used the most recent population and demographic information available to ensure community needs were being met. This included gathering national statistics, as well as the demographics of the service area. The federal government tracks certain health statistics across the U.S. by county. This information was compiled to give a baseline, to show where certain health needs were being met and areas that needed improvement. Areas that needed improvement were considered when working on the implementation plan.

## **DEMOGRAPHICS**

Demographics for the area were collected through the use of census data and other reports. The latest data was as recent as the 2022 Census. Although exact population and demographic information may vary slightly from that articulated in the CHNA, the outcomes of the CHNA will not be affected by any minor discrepancies.

The population of Carlton County, CMH's primary service area, is approximately 36,745 as of 2024. The following is a basic understanding of the demographics and health situation in Carlton County:

- 51% of the population are between the ages of 20 and 59
- 26% are aged 60 or older
- 47% of the population are female
- 87% are White
- 3% are Native American

## Age

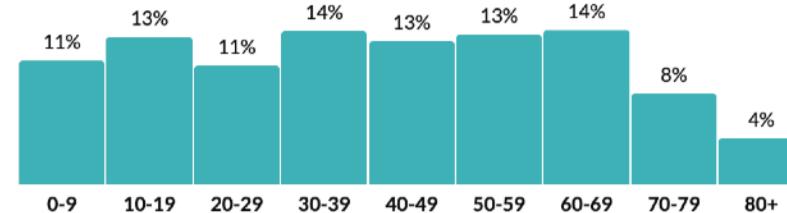
**41.7**

### Median age

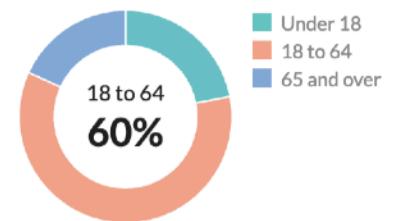
about 10 percent higher than the figure in Minnesota: 38.6

about 10 percent higher than the figure in United States: 38.7

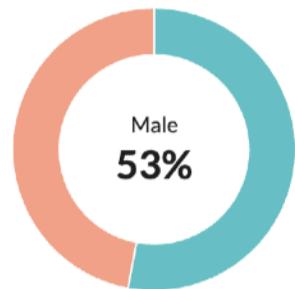
### Population by age range



### Population by age category

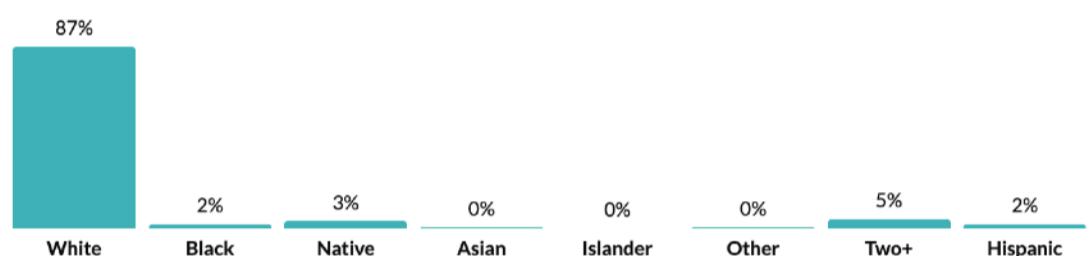
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## Sex



Male  
Female

## Race & Ethnicity

[Show data / Embed](#)

\* Hispanic includes respondents of any race. Other categories are non-Hispanic.

[Show data / Embed](#)

[censusreporter.org](#)

- 93.5% of Carlton County residents have graduated from high school compared to the Minnesota average of 93.9%
- 25.5% of Carlton County residents have a Bachelor's degree or higher

## Educational attainment

**93.5%**

### High school grad or higher

about the same as the rate in Minnesota: 93.9%

a little higher than the rate in United States: 89.4%

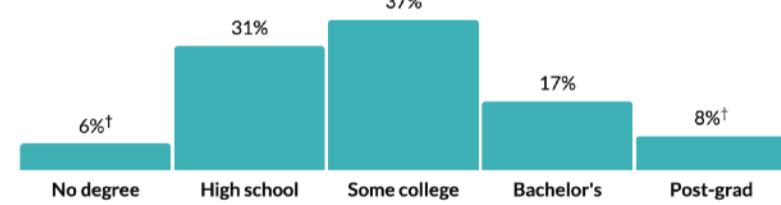
**25.5%**

### Bachelor's degree or higher

about two-thirds of the rate in Minnesota: 38.8%

about three-quarters of the rate in United States: 35%

### Population by highest level of education

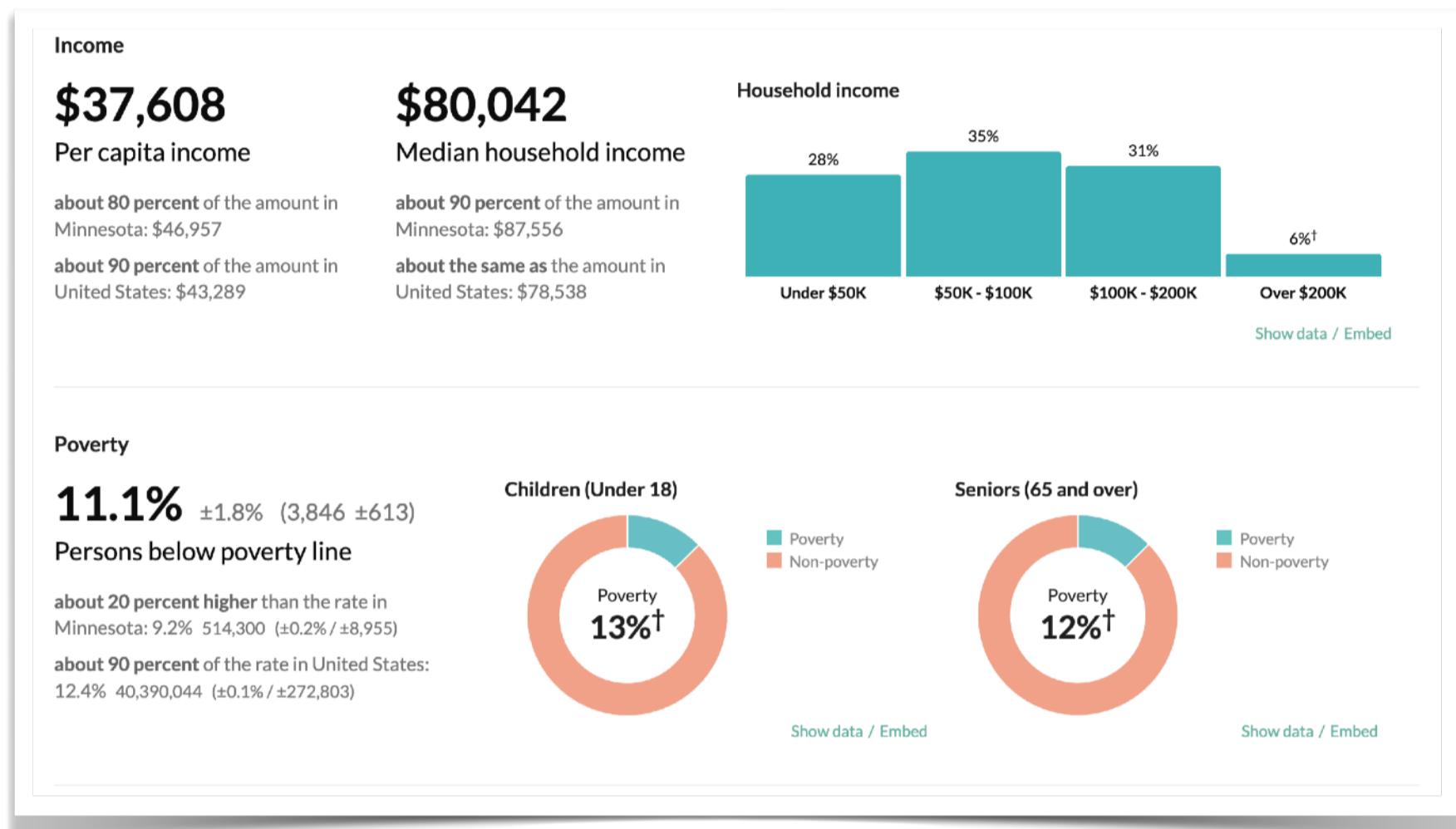


\* Universe: Population 25 years and over

[Show data / Embed](#)

[censusreporter.org](#)

- The median household income in Carlton County is \$80,042 with a per capita income of \$37,608
- 11.1% of the population live in poverty as opposed to 9.2% in the State of Minnesota
- 13% of children live in poverty



[censusreporter.org](http://censusreporter.org)

When it comes to health, Carlton County is not too far away from national United States Averages or the Minnesota averages. In a few areas, the state of Minnesota has better health statistics than the top performing areas of the country.

- People in Carlton County report 3.8 Poor Physical Health Days per person, per year. United States Averages in the U.S. report 3.9 days per person, while the State of Minnesota reports 3.4 days per person.
- People in Carlton County report experiencing 5.5 Poor Mental Health Days per person. This number is slightly higher than Minnesota or United States Averages.
- Air Pollution is at 1.3 compared to 7.3 for United States Averages and 6.0 for Minnesota.

|                                  | 2022 Carlton County | 2025 Carlton County | United States Averages | Minnesota |
|----------------------------------|---------------------|---------------------|------------------------|-----------|
| <b>Poor Physical Health Days</b> | 3.5                 | 3.8                 | 3.9                    | 3.4       |
| <b>Poor Mental Health Days</b>   | 4.2                 | 5.5                 | 5.1                    | 5.0       |
| <b>Air Pollution</b>             | 4.6                 | 1.3                 | 7.3                    | 6.0       |

countyhealthrankings.org

- Primary Care Physicians in Carlton County are at a Patient to Physician ratio of 1140:1. National United States Averages are 1330:1.
- Dentists in the county are at a ratio of 1530:1. National United States Averages are 1360:1.
- Mental Health Providers are at a 440:1 ratio compared to 300:1 for United States Averages.

|                                | 2022 Carlton County | 2025 Carlton County | United States Averages | Minnesota |
|--------------------------------|---------------------|---------------------|------------------------|-----------|
| <b>Primary Care Physicians</b> | 1330:1              | 1140:1              | 1330:1                 | 1130:1    |
| <b>Dentists</b>                | 1560:1              | 1530:1              | 1360:1                 | 1290:1    |
| <b>Mental Health Providers</b> | 610:1               | 440:1               | 300:1                  | 280:1     |

countyhealthrankings.org

Carlton County has mixed statistics when it comes to the following health risk factors:

- 14% of the population reported Poor Health. This is 3% lower than United States Averages and equal to the Minnesota state averages.
- Adult Smoking is 16% which is 3% higher than the Minnesota average and United States Averages level.
- Adult obesity is currently reported at 41%, compared to both the Minnesota and U.S. averages of 34%. This represents a 10% increase over the past three years.
- Excessive Drinking affects nearly a quarter of the population at 24%. Carlton County is slightly worse than the Minnesota average of 23%.
- Alcohol-Impaired Driving Deaths sit at 33% and are worse than both the Minnesota (31%)rate and the rate of United States Averages (19%).

|  | 2022 Carlton County | 2025 Carlton County | United States Averages | Minnesota |
|--|---------------------|---------------------|------------------------|-----------|
| <b>Poor Health</b>                     | 15%                 | 14%                 | 17%                    | 14%       |
| <b>Adult Smoking</b>                   | 20%                 | 16%                 | 13%                    | 13%       |
| <b>Adult Obesity</b>                   | 31%                 | 41%                 | 34%                    | 34%       |
| <b>Excessive Drinking</b>              | 26%                 | 24%                 | 19%                    | 23%       |
| <b>Alcohol-Impaired Driving Deaths</b> | 33%                 | 33%                 | 19%                    | 31%       |

countyhealthrankings.org

Teen sexuality was low and seems to be improving in the area in 2024:

- Sexually Transmitted Infections are currently sitting at 264.2 per 100,000 people. These are much lower than we are seeing in United States Averages of 495 and Minnesota averages at 386.1.
- Teen Births are still high compared to United States Averages, but lower than the numbers for Minnesota.
- An important note is that HIV Prevalence has declined 3% since 2022. There were only 70 cases reported per 100,000 people in Carlton County. These numbers are dramatically lower than the National Average of 382 cases and Minnesota cases at 197.

|  | 2022 Carlton County | 2025 Carlton County | United States Averages | Minnesota |
|--|---------------------|---------------------|------------------------|-----------|
| <b>Sexually Transmitted Infections</b> | 409.8               | 264.2               | 495                    | 386.1     |
| <b>Teen Births</b>                     | 17                  | 16                  | 12                     | 9         |
| <b>HIV Prevalence</b>                  | 73                  | 70                  | 382                    | 197       |

[countyhealthrankings.org](http://countyhealthrankings.org)

### Other areas deserving review:

- The average Life Expectancy for residents of Carlton County is 76.3 as compared to 77.1 for United States Averages and 79.3 for Minnesota. In other words people in Carlton County are expected to live about as long as the national average but not quite as long as the average Minnesotan.
- Premature Age Adjusted Mortality designates the people who died before their 75th birthday per 100,000. This means that if Carlton County had a population of 100,000 we should expect 380 to pass away before the age of 75. This is lower than the United States Average, but higher than the Minnesota number.

- Mammography Screenings were low, but improving at 42%; a 5% increase from Carlton County's 2022 data. United States Averages are at 44%. Minnesota is at 52%. leading us to believe there is still work to be done here.
- Flu Vaccinations reported at 50% are 2% higher than those of United States Averages 48% but still shy of the rate in Minnesota at 53%.
- Physical Inactivity was at 19% compared to 23% for United States Averages and 20% for Minnesota.
- Access to Exercise was at 63% compared to 56% in 2022 and 84% for United States Averages and 86% for Minnesota. This means people in Carlton County are becoming more active, even though they may not have the facilities to workout.

|   | 2022 Carlton County | 2025 Carlton County | United States Averages | Minnesota |
|---|---------------------|---------------------|------------------------|-----------|
| <b>Life Expectancy</b>                  | 78.4                | 76.3                | 77.1                   | 79.3      |
| <b>Premature Age Adjusted Mortality</b> | 320                 | 380                 | 410                    | 320       |
| <b>Mammography Screenings</b>           | 37%                 | 42%                 | 44%                    | 52%       |
| <b>Flu Vaccinations</b>                 | 52%                 | 50%                 | 48%                    | 53%       |
| <b>Physical Inactivity</b>              | 22%                 | 19%                 | 23%                    | 20%       |
| <b>Access to Exercise</b>               | 56%                 | 63%                 | 84%                    | 86%       |

countyhealthrankings.org

### A few highlights from this data for Carlton County:

- Mammography Screenings are up by 5% but there is more opportunity there to help the women of the county
- Access to exercise has increased by 7% since 2022 but given other health factors could use promotion
- Sexually Transmitted Infections and Teen Births have both gone down since 2022
- Adult Smoking has been reduced by 4%

# DEVELOPING THE CHNA

## MEETINGS WITH COMMUNITY MEMBERS AND FOCUS GROUPS

### INITIAL MEETING

In May 2025, the Community Memorial Hospital partnered with Cycle of Business to initiate a Community Health Needs Assessment (CHNA). Cycle of Business began by collecting data and input from the community to develop a survey designed to inform both the CHNA and the Community Health Improvement Plan (CHIP).



The 2025 Care Award honoree was pharmacist Melissa Gotchnik

An initial meeting was held with a diverse group of community members, including representatives from the healthcare sector and individuals reflecting the county's demographic makeup. This engagement ensured a wide range of voices and perspectives were considered in the assessment process.

The public survey was launched later that month to gather critical feedback from residents. Over the following months, responses were collected and analyzed to guide the formation of focus groups. These groups consisted of the first group of people from the community and a second group of hospital

leadership. Both groups met on July 28, 2025, to identify and discuss Carlton County's most pressing health concerns. Their input was collected and input into the strategy management web tool and then refined into initial plans for the hospital to address.

Recognizing that many health-related challenges identified through the CHNA extend beyond the hospital's direct influence, Community Memorial Hospital reviewed the findings to determine which needs it could realistically address. The goal was to ensure the hospital's efforts would have measurable impact within its capacity and role.

The final CHNA and Community Health Implementation Plan were developed in collaboration with Cycle of Business, aligning the data with actionable priorities specific to Community Memorial Hospital.

## DISTRIBUTION OF SURVEY

Community Memorial Hospital worked diligently to maximize the distribution reach of the survey within the community to ensure the validity of the data received. In partnering with the committee members and other stakeholders, the survey was distributed to a large number of community members. Community members were given one month to complete the survey. In total 110 members of the community responded, providing an accurate representation of the needs relevant in the community.

## COMMUNITY ENGAGEMENT

During the process the first meeting focused on a review of the demographics for Carlton County, the health and wellness needs of the community, and the development of a community survey.

The second meeting involved a presentation and discussion regarding the responses from the completed community survey. Cycle of Business sorted and prioritized the survey data to identify the most important and relevant health issues in the county.

Following the collection and analysis of survey responses, two additional focus group meetings were held. The first meeting included individuals selected to represent health care workers in the community. This group reviewed the survey findings and shared insights on the most pressing health and wellness concerns across Carlton County. The second meeting consisted of hospital representatives who evaluated the feedback in the context of the hospital's mission, capacity, and strategic priorities. Both groups also discussed which issues could be addressed by community partners and which fell outside the hospital's direct purview, helping to ensure a collaborative and realistic approach to improving community health.



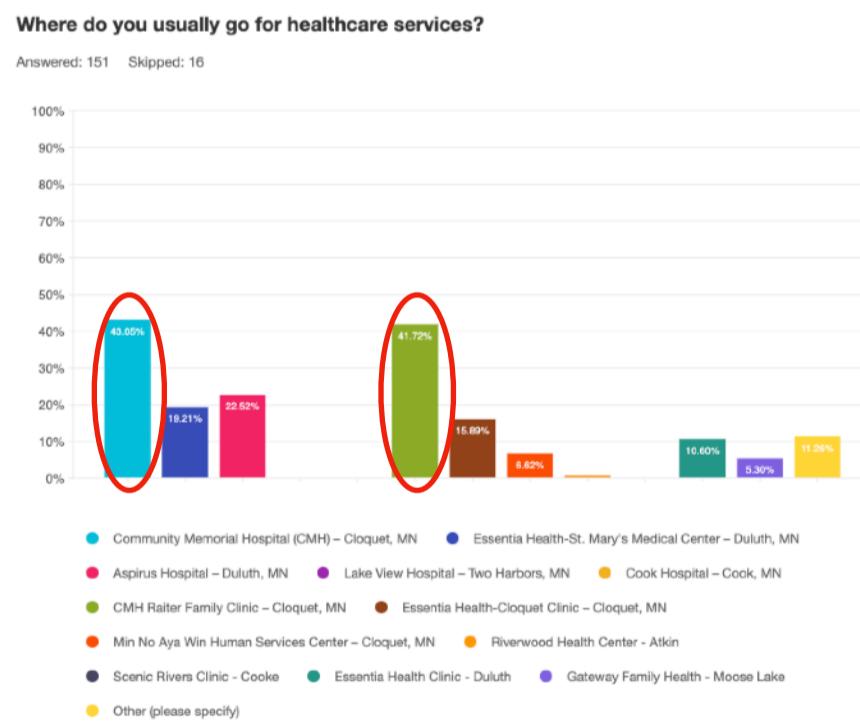
CMH Annual Event: Mocktails & Medicine

# THE SURVEY RESULTS

Before distributing the surveys to the community, questions from COB's previous surveys were reviewed and incorporated. The goal was to inform the hospital about current community conditions and how its services were being utilized. The survey addressed various aspects of healthcare including general healthcare needs, specialties, the elderly, and general community concerns. These insights provided the hospital with a comprehensive understanding of how to better meet community needs and identify areas that could increase services offered.

## AWARENESS OF SERVICES AT COMMUNITY MEMORIAL HOSPITAL

In the survey, **84.77% of respondents** indicated that they use CMH or one of its clinics for their primary healthcare needs. While this reflects a strong level of community engagement, it also highlights that over 15% of residents continue to seek care outside the local system. This trend is not uncommon among rural hospitals, where concerns around privacy often



play a role in patients' decisions. In small communities, individuals may feel uncomfortable receiving care from friends, acquaintances, or neighbors who work at the hospital. This perceived lack of anonymity can lead patients to travel to other facilities, even for routine services.

Beyond privacy concerns, some residents leave the area to access services that CMH does not currently provide. In many cases, the patient volume is not high enough to support certain specialties, making it impractical to recruit and retain providers in those areas. CMH understands its responsibility to provide accessible, high-quality healthcare services that are both needed and viable. This includes a focus on **primary care, emergency services, and targeted specialties** that align with community needs and available resources.

Importantly, the survey also revealed a gap in awareness regarding services CMH *does* offer. Several participants identified receiving care elsewhere for services that are, in fact, available locally. This disconnect suggests that some residents are unaware of the full scope of care

provided by the hospital and its clinics. The most frequently mentioned services being accessed outside the community included **Colonoscopy, Radiology/Imaging, Orthopedics, Primary Care, and Laboratory Services**—all of which are currently offered by CMH.

Improving communication to the community and increasing awareness of available services presents a clear opportunity. By better informing the public, CMH can reduce unnecessary outmigration, increase local utilization, and ensure that more residents receive care close to home. This not only enhances patient convenience and continuity of care, but also strengthens the hospital's ability to remain financially sustainable and responsive to the evolving needs of the community. CMH realizes this important fact and decided it would be more important to include that in a strategic plan rather than the Community Health Implementation Plan to reduce the likelihood of it being misinterpreted as self serving to the hospital.

## S E R V I C E S   U S E D   A T   O T H E R   L O C A T I O N S

The survey revealed that a significant number of patients sought certain healthcare services outside of CMH, offering valuable insight into patient preferences and gaps in local service utilization. Services were ranked by the total number of respondents who reported receiving them elsewhere.

The top services with the highest number of patients going elsewhere included:

- Family Medicine & Primary Care – 51 patients
- Laboratory Services – 48 patients
- Gynecology – 44 patients
- Vaccines/Immunizations – 43 patients
- Imaging & Radiology – 41 patients

|   | Used at CMH | I went somewhere else for this service. | Total Use       |
|---|-------------|---|-----------------|
| Family Medicine & Primary Care Clinic Visits  | 57          | 51                                      | 108             |
| Laboratory Services (bloodwork, testing)  | 61          | 48                                      | 109             |
| Gynecology Clinic Visits or Procedures (women's health)   | 26          | 44                                      | 70              |
| Vaccines/Immunizations  | 36          | 43                                      | 79              |
| Imaging & Radiology (X-ray, MRI, CT, Ultrasound, Mammogram, DEXA scan, CT Calcium Scoring, etc.)  | 72          | 41                                      | 113             |
| Dermatology Clinic Visits (skin care)   | 5           | 41                                      | 46              |
| Women's Health: Cervical Cancer (Pap Test/HPV Test)   | 18          | 38                                      | 56              |
| Urgent Care   | 60          | 36                                      | 96              |
| General Surgery (clinic visits or procedures)   | 40          | 33                                      | 73              |
| Emergency Department Services   | 78          | 29                                      | 107             |
| Pediatrics (children's healthcare)  | 11          | 29                                      | 40              |
| Mental Health Services: Therapy Services (including Licensed Clinical Social Workers (LCSW), Licensed Mental Health Counselors (LMHC), & other therapy providers) | 2           | 29                                      | 31              |
| Mental Health Services: Psychology (therapy, counseling, & mental health testing)   | 1           | 28                                      | 29              |
| Women's Health: Mammogram (Breast Cancer)   | 44          | 26                                      | 70              |
| Orthopedics Clinic Visits or Procedures (bone & joint care)   | 33          | 25                                      | 58              |
| Medicare Annual Wellness Visits   | 19          | 25                                      | 44              |
| Portal Pharmacy (outpatient medication pickup)  | 6           | 25                                      | 31              |
| Mental Health Services: Psychiatrist (mental health & medication management)  | 5           | 25                                      | 30              |
|   | Above 25%   | Above 25%                               | Top 11 Combined |

- **Dermatology** – 41 patients
- Cervical Cancer Screening – 38 patients
- **Urgent Care** – 36 patients
- General Surgery – 33 patients
- **Pediatrics** – 29 patients
- Mental Health Therapy Services – 29 patients

Based on these findings, CMH has clear opportunities to improve access and retention in high-demand areas, particularly in **Primary Care, Laboratory Services, Gynecology, Vaccinations, Imaging, Dermatology, Women's Health screenings, Urgent Care, and Pediatrics**.

The data also reflected that between 25% and 29% of the community were utilizing Mental health options outside of the hospital—such as **Mental Health Therapy, Psychology, and Psychiatry**—indicating additional access gaps that may be addressed through targeted initiatives.

## HEALTH PRIORITIES IN THE COMMUNITY

One of the key reasons for conducting a Community Health Needs Assessment is to better understand concerns in the community. Understanding what is most important to the community helps the hospital remain relevant and act as a partner in the overall health of

the people. When asked about the most important health priorities, the top 10 concerns fell into a few key categories.

|   | Plenty Available | We need more | Not sure |
|---|------------------|--------------|----------|
| Dermatology (skin care)   | 7                | 70           | 33       |
| Mental Health Services  | 9                | 69           | 33       |
| Long-Term Care (includes nursing homes, assisted living, memory care, & other facilities for ongoing care for seniors or those with disabilities) | 9                | 68           | 33       |
| Holistic Medicine (massage, herbal medicine, naturopathy, etc.)   | 6                | 65           | 38       |
| Psychiatry (mental health & medication management)  | 9                | 65           | 36       |
| Psychology (therapy & counseling)   | 9                | 65           | 35       |
| Therapy Services (Licensed Clinical Social Workers (LCSW), Licensed Mental Health Counselors (LMHC), etc.)  | 13               | 54           | 44       |
| Home-Visit Doctor or Direct Primary Care (doctor visits patients at home for medical care)  | 4                | 52           | 55       |
| Women's Health  | 15               | 52           | 41       |
| Help Enrolling in Insurance (private, medicare, medicaid)   | 10               | 51           | 51       |
|   |                  | Top 10       |          |

**Specialties:** Several of the top concerns throughout the survey, were related to specialty care. This included Dermatology, Pediatrics, Allergy, and Orthopedics.

**Behavioral Health:** As mentioned previously, another prominent theme in the top concerns was related to Behavioral Health issues. Mental Health Services ranked second highest when asked if Carlton County needed more of these services. There are two areas of Behavioral Health that are important to explore. Substance abuse is one area and Therapy/Counseling is another. Over the next three years Community Memorial Hospital will explore how to best improve both of these services in the community.

**Women's Health:** This is an area CMH was well aware of as a concern in the community. Women are primary decision makers in many households, and development of robust, comprehensive offerings in this specialty will help close care gaps currently present.

While many of these issues are already being addressed by the hospital, some will require partnerships with other entities in the community. By focusing on these identified priorities, CMH can better serve the community's needs and improve overall health outcomes.

## CHRONIC CONDITIONS

Community Memorial Hospital's Community Health Needs Assessment identified five chronic conditions as the most prevalent in the service area: high cholesterol, high blood pressure, mental health issues, arthritis, and diabetes. Each of these conditions has significant implications for overall health, quality of life, and healthcare costs, making them critical areas for community

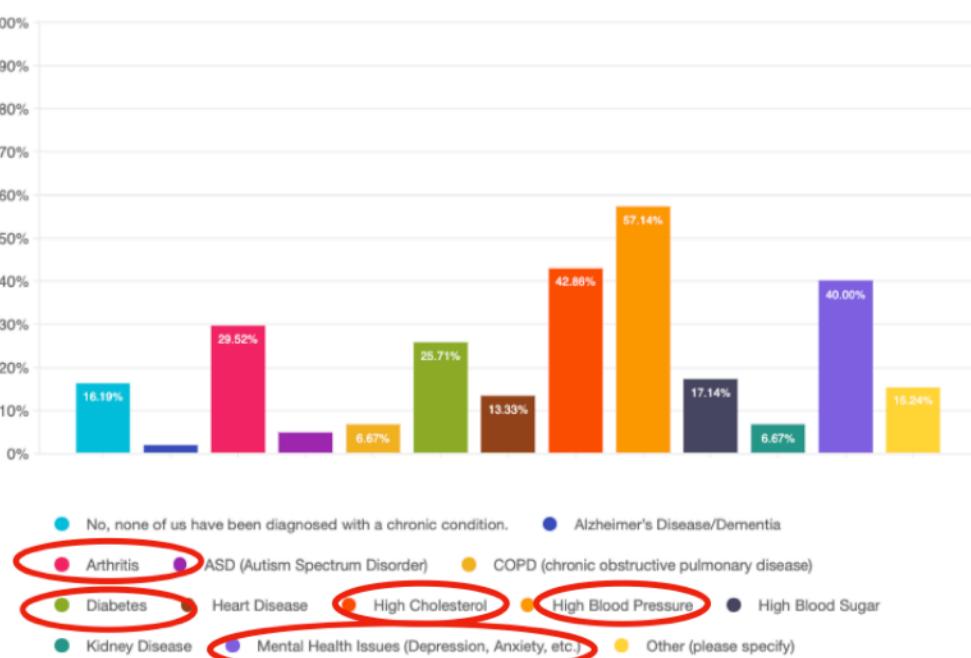
health.

- **High Cholesterol & High Blood Pressure**  
These cardiovascular risk factors are closely linked and often co-exist, increasing the likelihood of heart disease and stroke. CMH may want to consider expanding preventive care initiatives, such as community screening events, heart-healthy

*Has a doctor or healthcare provider ever told you or anyone in your household that you have any of these conditions?*

*(select all that apply)*

Answered: 105 Skipped: 62



education programs, nutrition counseling, and partnerships with local gyms or wellness centers to encourage physical activity. Early detection and consistent management through primary care providers are essential in reducing long-term complications.

- **Mental Health Issues**

Mental health continues to be a growing concern, impacting all age groups and often intersecting with physical health conditions. CMH could explore strengthening

mental health services by expanding access to counseling, integrating behavioral health into primary care settings, and using telehealth to reach patients who may face transportation or stigma-related barriers. Building collaborations with schools, employers, and community organizations can further support mental health awareness and early intervention.



- **Arthritis**

As a leading cause of disability, arthritis limits mobility and independence for many community members. CMH may benefit from offering or partnering on physical therapy programs, low-impact exercise classes, and joint health education.

Integrating pain management strategies and ensuring timely referrals to specialists can help patients maintain activity levels and quality of life.

- **CMH Library Programming**

- **Diabetes**

Diabetes management requires a comprehensive approach, including patient education, nutritional support, medication management, and regular monitoring. CMH could enhance care by offering diabetes education classes, promoting screening events, and expanding access to endocrinology services—potentially via telehealth. Partnering with local grocers or community gardens could also promote healthier eating options for at-risk populations.

## **Integrating Efforts for Greater Impact**

While each condition presents unique challenges, they share common risk factors such as poor diet, inactivity, and limited access to preventive care. Addressing these conditions collectively through integrated wellness programs, community partnerships, and strong

primary care engagement can yield the most meaningful health improvements. CMH's role in leading and coordinating these efforts can help reduce the prevalence and impact of these chronic conditions, ultimately improving the health and vitality of the entire community.

## THE ELDERLY

Carlton County's elderly residents face a complex set of interconnected needs that influence their health, independence, and quality of life. The community has identified eleven key areas as being of extreme importance, signaling both urgent challenges and opportunities for targeted action.

The highest priorities center on **Affordable & Stable Housing (73)** and **Long-Term Care (71)** options, including nursing homes

|  | Extremely relevant | Somewhat relevant | Not relevant | Combined (B&C) Percentages |
|--|--------------------|-------------------|--------------|----------------------------|
| Long-Term Care (nursing homes, assisted living)  | 71                 | 18                | 2            | 89                         |
| Affordable & Stable Housing  | 73                 | 14                | 1            | 87                         |
| Food Insecurity & Poor Nutrition   | 71                 | 16                | 0            | 87                         |
| Independent Living Options (seniors who are mostly self-sufficient but enjoy services like meals, housekeeping, & social activities) | 63                 | 22                | 2            | 85                         |
| Depression, Anxiety & Mental Health Support & Evaluations  | 67                 | 17                | 2            | 84                         |
| Memory Care and Evaluations (care for individuals with memory loss)  | 67                 | 16                | 3            | 83                         |
| Caregiver Support & Resources  | 64                 | 18                | 0            | 82                         |
| Access to Dental Care  | 59                 | 22                | 2            | 81                         |
| Senior Care Planning   | 53                 | 27                | 0            | 80                         |
| Transportation to Medical Appointments   | 61                 | 18                | 3            | 79                         |
| In-Home Health Services  | 62                 | 16                | 1            | 78                         |
| Top 10 extremely relevant  |                    |                   |              | Top 10 combined            |

and assisted living facilities. Many seniors are living on fixed incomes, making stable housing essential to maintaining health and avoiding displacement. For those requiring higher levels of care, ensuring that local long-term care facilities are accessible, adequately staffed, and financially sustainable is critical.

Closely tied to these issues is **Food Insecurity & Poor Nutrition (71)**. Adequate, nutritious food plays a fundamental role in managing chronic health conditions and supporting overall well-being. Programs that provide meals, grocery assistance, and nutrition education can directly impact seniors' health outcomes.

Maintaining independence is another priority, reflected in the need for **Independent Living Options (63)**—housing and services for seniors who can live mostly on their own but benefit from amenities such as meal programs, housekeeping, and opportunities for social engagement. This aligns closely with the community's call for **In-Home Health Services**

(62), which help seniors remain in their homes while still receiving the medical and personal care they need.

Mental and cognitive health emerged as a major focus. **Depression, Anxiety & Mental Health Support (67)** and **Memory Care & Evaluations (67)** were identified as equally pressing. Many older adults face social isolation, grief, or cognitive decline, and expanding local mental health resources, memory screening programs, and dementia care options will be vital in meeting this need.

Recognizing the strain on those who care for seniors, **Caregiver Support & Resources (64)** ranked highly, reflecting the community's awareness that sustainable elder care depends on supporting family members and professional caregivers with training, respite services, and emotional support.



**CMH Library Programming**

Access to basic health services also remains a concern. **Transportation to Medical Appointments (61)** is a significant barrier for many elderly residents, especially in rural areas, while **Access to Dental Care (59)**—often excluded from Medicare—remains an unmet need affecting nutrition, self-esteem, and overall health.

Finally, **Senior Care Planning (53)** was identified as an important area for improvement. This includes advance care planning, legal and financial guidance, and helping seniors and their families navigate the often-complex healthcare and service landscape.

Together, these priorities paint a clear picture: Carlton County's elderly population requires a coordinated, multi-faceted approach that addresses housing stability, nutrition, healthcare access, mental and cognitive health, and support for caregivers. By investing in these areas, the county can significantly improve the well-being, dignity, and independence of its older residents, ensuring they can age in place safely and with the resources they need.

## ASPECTS OF HEALTHCARE

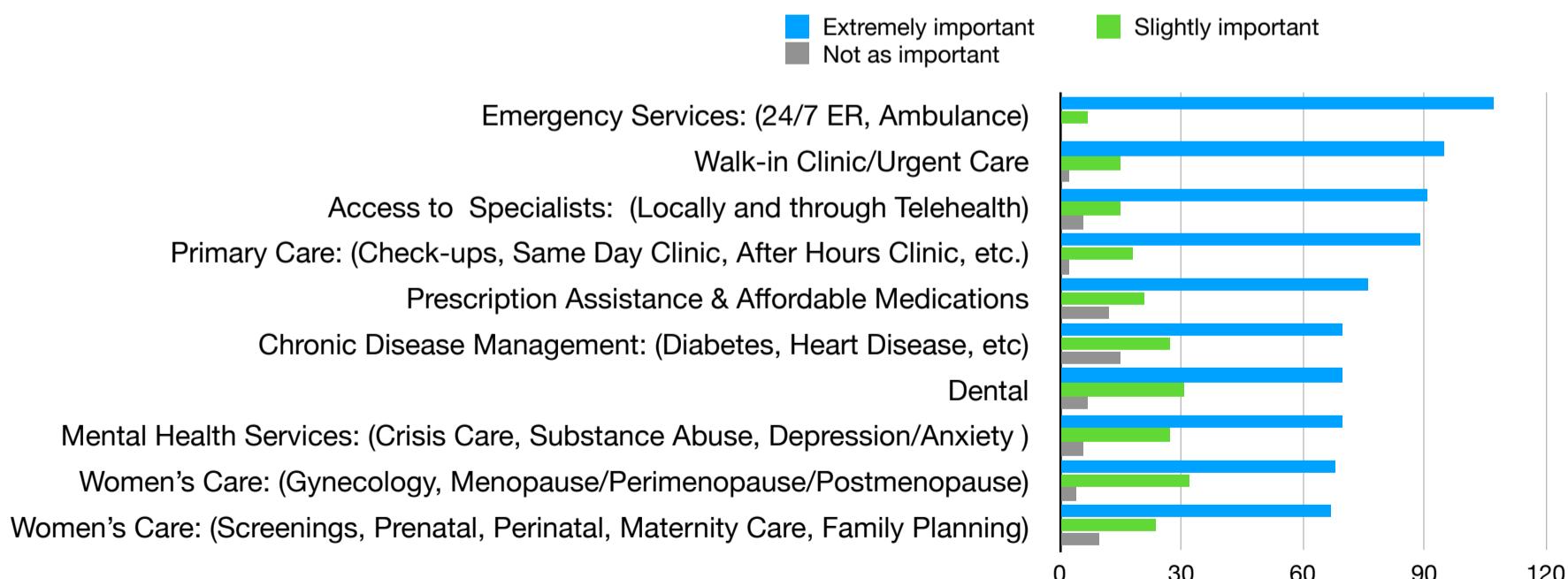
CMH sought to understand the healthcare aspects most important to their community. Not surprisingly, urgent care services such as Emergency Room and Ambulance Services topped the list. Walk-in Clinics came next, followed by the need for a larger range of healthcare services in the area through access to specialties.

The next three areas of healthcare prioritized include expanding access to Primary Care, getting Prescriptions at affordable prices, and how to manage Chronic Conditions to stay healthier longer. Other areas that landed in the top 10 were around Dental Care, Behavioral Health and Women's Care.

These insights emphasize the need for CMH to keep improving their urgent care and look at extending walk-in clinics hours. In addition this survey reinforces the need to expand the range of services and specialists that the hospital offers in order to better serve the community closer to home. Ultimately these aspects of healthcare are the basis of what CMH decided to focus on for their end of service.

## ADDITIONAL THOUGHTS FROM THE SURVEY

Community Memorial Hospital remains committed to addressing the health priorities identified through this Community Health Needs Assessment. One clear area of opportunity is improving cancer screening rates. Currently, 59.43% of residents have received a colon



cancer screening in the last ten years, 57.84% of women have had a mammogram in the past five years, and 67.96% have received a Pap smear within the last five years. Increasing

participation in these preventive services will be a focus, as early detection is critical to improving outcomes and reducing long-term healthcare costs.

The community also expressed strong interest in expanded access to specialty services, with nearly 76% of survey participants indicating they would be open to using TeleHealth if those services were available through CMH. This presents a valuable opportunity to bring specialty care closer to home, reduce travel burdens, and ensure residents can access high-quality care without leaving the community.

Beyond medical services, the CHNA highlighted the importance of support systems for caregivers—both for the elderly and for children—as well as for individuals facing mental health and substance use challenges. Seniors in general were identified as a population in need of targeted support, ensuring they can maintain independence, health, and quality of life.

Finally, several community-wide health factors emerged as top concerns. These include access to health insurance coverage, the quality of healthcare in the community, general access to healthcare services, affordable housing, and access to healthy food. Each of these social and economic factors plays a critical role in overall community health and will be important considerations as CMH works with partners to address these needs.

By acting on these findings, Community Memorial Hospital aims to not only meet identified needs but to strengthen trust, expand access, and improve the overall well-being of the community it serves.

# IMPLEMENTATION PLAN

In addition to the Community Health Needs Assessment (CHNA), hospitals are required to develop a Community Health Implementation Plan (CHIP) to outline their strategies for addressing the issues identified in the CHNA. This plan enables the IRS to evaluate how hospitals are meeting community needs and helps justify their 501(c)(3) status.

Community Memorial Hospital's Community Health Implementation Plan (CHIP) reflects staff decisions, combined with input from the community, regarding the actions needed to address these needs. The following five areas will guide CMH in better serving the healthcare requirements of the community:

- 1. Expanding Specialty Care:** CMH will explore options to identify the best specialty services to meet the community's needs. Emphasis will be placed on specialties that align with the priorities identified in the survey. Areas such as Dermatology, Pediatrics, Allergy, and others will be evaluated, with plans developed based on assessed needs and demand.
- 2. Exploring Gaps in Behavioral Health.** CMH is committed to providing residents with the best Mental Healthcare which can be divided into two areas. The first is substance abuse and addiction recovery.

***"[I] had spinal fusion surgery with Dr Davies. I can't possibly say what a wonderful experience this was. All the staff were extremely pleasant and professional and knowledgeable."***

***—Ronna V.***

Addiction has become a reality for many Americans and rural communities are not immune. The other area the community is in need of is in the area of counseling and therapy services. Mental health challenges are on the rise with conditions like ADHD, Depression, Anxiety, PTSD and other issues affecting the daily lives many people.

- 3. Exploring the Gaps in Women's Health.** Community Memorial Hospital recognizes the importance of addressing women's health as a key priority for the community. The need for comprehensive women's health services remains strong. Moving forward, CMH is committed to strengthening access to gynecology, preventative care, and routine screenings, including mammograms and Pap smears. By focusing on these critical services, CMH aims to close existing gaps in care, promote early detection of health issues, and ensure women in the community have consistent access to the specialized care they need.

4. **Addressing Areas of Preventative Care.** Community Memorial Hospital is committed to strengthening preventive care as a cornerstone of community health. Early detection and timely intervention are key to reducing the impact of serious illnesses, improving outcomes, and lowering long-term healthcare costs. CMH will actively encourage regular checkups and promote essential screenings, including mammography, Pap smears, colorectal cancer screening, prostate exams, and diabetes testing, among others. By working closely with patients, providers, and community partners, CMH aims to increase awareness, remove barriers to access, and ensure residents have the opportunity to identify and address health concerns before they become serious. This proactive approach will help foster a healthier, more resilient community.
5. **Addressing Areas of Chronic Care.** Community Memorial Hospital recognizes the significant impact chronic conditions have on the health and quality of life of local residents. Conditions such as arthritis, allergies, high cholesterol, high blood pressure, diabetes, and mental health challenges are prevalent in the community and require consistent, coordinated care. CMH is committed to expanding and enhancing services that support early detection, effective management, and patient education for these conditions. By strengthening primary care, improving access to specialty consultations, and providing resources for self-management, CMH aims to reduce complications, improve outcomes, and help individuals maintain better health over the long term.

By focusing on these areas, CMH aims to address the community's healthcare needs more effectively and fulfill its mission as a 501(c)(3) organization.

## **EXPAND SPECIALTY SERVICES WITHIN THE HOSPITAL**

Community Memorial Hospital (CMH) recognizes the community's growing need for expanded specialty care services. Feedback gathered through the CHNA survey and community focus groups has highlighted a strong interest in having greater access to specialized care locally. In response, CMH is prioritizing the development of new specialty services that address both medical demand and gaps in local access, while also supporting the long-term sustainability of the hospital.

### **6.1 Expand Specialties within the hospital**

**6.1.1 Dermatology**

**6.1.2 Pediatrics**

**6.1.3 Allergy**

Initially, CMH will explore the addition of key specialties including dermatology, pediatrics, and allergy care. These services were identified as high-value areas that not only meet expressed community needs but also have the potential to generate revenue that can help offset the cost of offering other essential, yet less financially viable, services.

In considering how to deliver these new specialties, CMH will assess a range of options such as employing physicians directly, establishing partnerships with outside providers to offer services on a rotating schedule, and incorporating tele-health to increase flexibility and access. Each approach will be carefully evaluated for effectiveness, cost-efficiency, and long-term sustainability.

Once service models are finalized, CMH will turn its focus to promoting these expanded capabilities. Outreach efforts will target both community members and local providers, encouraging in-network referrals and increasing awareness of new specialty offerings. Through this structured and responsive approach, CMH aims to elevate the level of care available in the community—ensuring that patients can access high-quality specialty services close to home.

## **EXPLORE GAPS IN BEHAVIORAL HEALTH**

Community Memorial Hospital (CMH) recognizes that behavioral health—including mental health and substance use—remains one of the most pressing and complex challenges facing individuals and families in the community. Feedback from the CHNA survey and focus groups reinforced what providers and residents already know: access to timely, comprehensive, and compassionate behavioral health care is critical to the well-being of the community.

In response, CMH is committed to expanding its behavioral health services to address a broad spectrum of needs. This includes building out access to therapy and treatment programs for common mental health conditions such as anxiety, depression, and trauma, while also enhancing the hospital's capacity to respond to more acute psychiatric needs. At the same time, CMH will work to strengthen services for individuals struggling with addiction and substance use, recognizing that these issues often overlap with other behavioral health conditions and require a coordinated, long-term approach.

### **6.2 Explore Gaps in Behavioral Health**

#### **6.2.1 Substance Abuse**

#### **6.2.2 Therapy Services**

To effectively meet these needs, the hospital will explore a variety of service delivery models. This may include direct hiring of licensed clinical therapists, substance abuse counselors, and psychiatric providers, and/or exploring partnerships with regional mental health organizations or implementing tele-health based care models. These options will be evaluated based on their sustainability, accessibility, and ability to provide personalized care for patients at different stages of their recovery or mental health journey.

As these services are developed, CMH will focus on increasing awareness and access through public outreach, and partnerships with local schools, employers, law enforcement, and social services. By expanding and integrating behavioral health into the broader healthcare system, CMH aims to create a continuum of care that treats the whole person—mind and body—while reducing stigma and improving health outcomes for the entire community.

## **EXPLORE GAPS IN WOMEN'S HEALTH**

Community Memorial Hospital (CMH) recognizes that women's health is a vital component of overall community wellness and that significant gaps remain in access to comprehensive, specialized care for women throughout all stages of life. Insights from the CHNA survey and community discussions have made it clear that renewed focus is needed in key areas such as gynecology, obstetrics, preventative care, and routine screenings.

CMH is committed to addressing these gaps by exploring the expansion of its women's health services. This includes strengthening gynecological care—ensuring women have access to routine exams, reproductive health services, and management of common conditions such as endometriosis, menopause, and hormonal disorders.

Preventative screenings such as Pap smears, mammograms, and HPV testing will also be prioritized, with efforts made to increase screening rates and early detection through education and outreach.

### **6.3 Explore Gaps in women's health**

#### **6.3.1 Gynecology**

#### **6.3.2 Obstetrics**

#### **6.3.3 Preventative Care and Screenings**

While CMH has a rich history of full scope obstetrics offerings, it must determine the best models for providing prenatal, labor, and postnatal care in the future, given the changing realities of healthcare. The goal is to ensure that women in the community can access safe, consistent, and personalized maternal care close to home.

In addition, CMH will assess other critical areas of women's health that may be underserved, including access to menopause care, family planning resources, infertility support, and chronic condition management that disproportionately affects women. Each service will be evaluated for community need, operational feasibility, and long-term impact on health outcomes.

As services are expanded or reintroduced, CMH will also focus on improving awareness and utilization through targeted outreach and internal provider referrals. These efforts are aimed at ensuring that women in the community receive high-quality, accessible care tailored to their specific health needs—supporting not only individual wellness but also the long-term health of families and the broader community.

## **ADDRESS AREAS OF PREVENTATIVE CARE**

Preventative care remains one of the most powerful tools in improving health outcomes and reducing the long-term cost of chronic disease in the community. Community Memorial Hospital (CMH) is continuing its focus on preventative health by expanding screening efforts and building a culture of early detection and proactive health management. The CHNA findings clearly highlighted the need to improve rates of key screenings and regular checkups, particularly in cancer detection and chronic disease prevention.

### **6.4 Address areas of Preventative Care from CHNA Survey**

**6.4.1 Colorectal Cancer Screenings**

**6.4.2 Prostate Cancer Screenings**

**6.4.3 Diabetes Screenings**

**6.4.4 Women's Health Screenings**

**6.4.5 Other Cancer Screenings**

CMH will prioritize increasing access and awareness around critical screenings such as colorectal cancer, prostate cancer, breast and cervical cancer, and diabetes. These screenings play a vital role in identifying serious conditions early—often before symptoms arise—giving patients the best chance for successful treatment and improved quality of life. In particular, efforts will be made to close

gaps in colorectal cancer screening rates, encourage more men to complete routine prostate exams, and improve the frequency of screenings related to women's health, such as mammograms and Pap smears.

In addition to cancer screenings, the hospital is committed to promoting diabetes prevention and management through early testing and lifestyle-focused education. CMH will also evaluate other high-impact preventative services that can be introduced or strengthened to better meet community needs.

To achieve these goals, CMH will implement a combination of patient education, community outreach, internal referral processes, and reminder systems. The hospital will also explore partnerships with regional providers and public health organizations to support awareness campaigns and remove barriers to access. These efforts will help ensure that every individual in the community is empowered with the information and access needed to take control of their health before problems escalate.

By embedding preventative care into its everyday operations and strategic planning, CMH aims to shift the focus from reactive treatment to proactive health, fostering a healthier, more resilient community over the long term.

## **ADDRESS AREAS OF CHRONIC CARE**

Community Memorial Hospital (CMH) is committed to improving the health of individuals living with chronic conditions—many of which were identified in the CHNA survey and focus group discussions as top concerns for local residents. Chronic illnesses often require long-term management, continuous support, and personalized treatment plans, and CMH recognizes the importance of building strong, coordinated care pathways to meet those needs.

The hospital will focus on enhancing care for several of the most commonly reported chronic conditions in the community: allergies, arthritis, high cholesterol, high blood pressure, diabetes, and mental health issues. These conditions not only impact patients' daily lives but are also closely linked to higher rates of hospitalization and long-term complications when left unmanaged. CMH will work to

### **6.5 Address areas of Chronic Care from CHNA survey**

**6.5.1 Allergy**

**6.5.2 Arthritis**

**6.5.3 High Cholesterol**

**6.5.4 High Blood Pressure**

**6.5.5 Diabetes**

**6.5.6 Mental health Issues**

improve early detection, patient education, medication adherence, and routine follow-up care to help individuals better control their conditions and avoid preventable health crises.

Expanding access to specialty care—through direct hiring, visiting providers, or tele-health will also be explored to ensure patients can access services such as rheumatology for arthritis, endocrinology for diabetes and cholesterol management, and ongoing allergy care. Likewise, CMH will strengthen coordination between primary care and behavioral health services to ensure that mental health is treated as a core part of chronic disease management, not as a separate issue.

In support of these efforts, CMH will enhance internal referral processes, build out patient

education resources, and collaborate with community partners to promote lifestyle changes and community-based support services. By taking a proactive, comprehensive approach to chronic care, CMH aims to reduce long-term health risks, improve quality of life, and empower patients to take an active role in managing their health.

***“I love [CMH] Raiter Family Clinic, and [Community] Memorial Hospital. I have had many serious [health] issues over the past several years, and everything was taken care of...”***

***— Daniel G.***

## **CONCLUSION**

Community Memorial Hospital (CMH) stands at a promising crossroads—one shaped by the voices, concerns, and aspirations of the communities it serves. Through this Community Health Needs Assessment, CMH has listened closely, engaged meaningfully, and charted a course of action that directly responds to the most pressing health challenges facing the residents of this county.

The path forward is filled with opportunity. By expanding specialty care in areas such as dermatology, pediatrics, and allergy, CMH is creating access to services that once required travel and time many families could not afford. Renewed focus on mental and behavioral health, including substance abuse treatment, therapy, and long-term support, reflects a deep understanding of the complex and personal nature of health. Women’s health will be strengthened through targeted improvements in gynecology, obstetrics, preventative screenings, and lifelong care. Investments in chronic care and preventative health—such as diabetes management, cancer screenings, and education—will help keep people healthier, longer.

But CMH is not doing this alone. The hospital recognizes that achieving sustainable, community-wide health improvements requires collaboration. Whether through local partnerships, shared outreach efforts, or joint program development, CMH is committed to working hand-in-hand with community leaders, organizations, and residents. Together, these partnerships will amplify the hospital's impact and ensure that care is accessible, equitable, and relevant.

The hospital's dedication to innovation, responsiveness, and inclusivity signals a bright future—not just for CMH, but for the entire county. As these plans take shape and new services emerge, the hospital will remain a constant and trusted presence—rooted in the community and driven by a shared mission to improve health and quality of life for all. The future of healthcare in this region is strong, and CMH is proud to lead the way forward.

***"I was admitted...for [an] episode of diverticulitis. The emergency room was so efficient. The nurses and physicians were so caring... Everyone was amazing and my call lights were answered in seconds. The dietary ladies were all so sweet and caring. I can't thank everyone that I had contact with enough. This was my first time ever in this hospital and my husband and I were so pleased with the amazing and efficient care that I received. "***

***— Bonnie T.***

# APPENDIX

## PHOTOS:

### CMH VSO Scholarship:

CMH's Volunteer Services Organization/Auxiliary is an active, vibrant part of the hospital. Each year, community volunteers of all ages donate 5,000+ hours to support service line departments, improve patient experience, and fundraise for hospital improvement projects. A major initiative of the VSO is awarding scholarships to local students who are pursuing a career in healthcare. Last year, the VSO awarded \$6,000 in scholarships to students pursuing degrees in speech-language pathology, nursing, community health, and more.



Allie Jones (on left) is a 2025 scholarship recipient and is pursuing a degree in community public health. She's pictured with VSO board members Rosemary Tobin, Mary Bakken, and Barb DeLovely.

### CMH Hand Therapy:



CMH is proud to provide access to a broad range of healthcare services like hand therapy. Hand therapy is a specialized program offered by Occupational Therapy & Rehabilitation Services. For local community members like Fran White, access to hand therapy meant being able to return to her lifelong passion of sewing and beading. As a member of the neighboring Fond du Lac Reservation, Fran enjoys making jingle dresses and traditional grass dance regalia for children in Fond du Lac's Head Start Program. When arthritic hand pain slowed her down, she found long-term relief with the help of CMH and occupational therapist, Arianna Culbert.

### CMH Care Award:

Each year, CMH presents the Care Award to an outstanding employee who exemplifies our mission. The 2025 Care Award honoree was pharmacist Melissa Gotchnik (pictured with CEO Rick Breuer). Melissa was chosen for her warmth, kindness, and support of patients and staff.



### CMH Mocktails & Medicine:



Each May during Women's Health Month, CMH hosts an event called 'Mocktails & Medicine.' The event features presentations and a Q&A session on topics such as pelvic health, perimenopause/menopause, nutrition, and more. Pictured are 2024 CMH staff presenters.

## CMH Library Programming:

CMH has forged a strong partnership with our local public library. Throughout the year, we're pleased to offer free programming to age groups across the lifespan. From outdoor fitness for kids to accessible heart health for older adults, our staff enjoy connecting with the community and promoting health beyond hospital & clinic walls.



To learn more about CMH's service lines and staff, please visit our social media pages.

Facebook: Cloquet Community Memorial Hospital

Instagram: @ccmhm



**CONDUCTED BY**  
**CYCLE OF BUSINESS**  
**2025**