

Community Health Needs Assessment and Implementation Strategy

Establishing Health Priorities Reporting Document

Introduction

Rainy Lake Medical Center (RLMC), a 25-bed critical access hospital in International Falls, Minnesota, within Koochiching County, contracted with Rural Health Innovations (RHI), a subsidiary of the National Rural Health Resource Center, to provide Community Health Needs Assessment (CHNA) services.

In June 2025, RHI conferred with leaders from RLMC to discuss the objectives of a regional CHNA. It was decided that this CHNA would include a series of focus groups, key informant interviews, and secondary data from national sources. In October 2025, the report findings were presented via webinar to the RLMC leadership and a facilitated community health priority setting workshop was held. Also in October 2025, RHI facilitated an implementation planning session with seven hospital leaders to develop strategic actions.

Description of Community Served

Input for the focus groups and key informant interviews was sought from residents in the MN cities of Big Falls, International Falls, Littlefork, Mizpah, Northome, Ranier, and South International Falls. The service area is defined as those in the 56649, 56668, 56683, 56669, 56670, 56676, 56681, and 56684 zip codes within Koochiching County.

Input from Broad Interests

Four focus group interviews (FGs) were held from August 5-6, 2025, to obtain information from residents about the health of the community. The hospital provided names, demographics, and contact information for 44 potential attendees. Hospital leadership contacted all nominees, informing them of the email invitation to come from RHI and encouraged attendance. RHI contacted all nominees with an invitation to participate. All four focus groups were held in-person at the Backus Community Center in International Falls, Koochiching County, MN.

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Attendees included seniors, businesses representatives, healthcare consumers, active healthcare providers, parents, school representatives, and lifelong county residents. Thirteen community members attended the FGs. Attendees were asked to anonymously complete a questionnaire to gather demographic information of the FG participants.

Three key informant interviews (KIIs) were held between July 30-August 14, 2025, to obtain information from community residents about the health of the community. The hospital provided names, demographics, and contact information for 10 potential interviewees and four additional potential participants were provided by a FG attendee. Hospital leadership contacted all nominees, informing them of the email invitation to come from RHI and encouraged attendance. RHI contacted all nominees with an invitation to participate. All interviews were held virtually. Participants included representatives from healthcare, service agencies, faith-based groups, and lifelong community members. Interviewees were asked to anonymously complete a questionnaire to gather demographic information about the participants.

Each focus group was two hours in length and each KII was approximately one hour in length. The FG and KII sessions included an overview of the CHNA purpose. Secondary data was presented to participants at the beginning of each focus group and included information about the community population by race and ethnicity, age range, the percentage of unemployment and percentage of those living in poverty. Data was shared regarding quality-of-life variables such as rates of diabetes, coronary heart disease, chronic obstructive pulmonary disease, and suicide. Ratios of population to primary care providers, dentists, and mental health providers were also presented. The same questions were asked at each FG and KII.

Prioritized Health Needs

In October 2025, twelve RLMC senior leaders assembled to:

- Explore findings from the CHNA report
- Identify community health priorities based on the findings

During this meeting the report's findings were discussed at a high level. Through a consensus-based discussion, the group decided to address the three community health priorities below:

- Working together with local and regional organizations to ensure the best care for our population
- Expanding access to care
- Offering access to affordable preventative care

In October 2025, the team of seven senior leaders used the implementation planning session to identify actions to support the health priority of Working together with local and regional organizations to ensure the best care for our population. The group members began by individually brainstorming potential actions to address their selected priority. RHI utilized a facilitation method designed to achieve group consensus-based decisions that respect the diversity of participant perspectives, inspire individual action and move the group toward joint resolve and action. This method creates awareness about new relationships between data and acknowledges the level of the group's consensus at any given moment. The conversation is aimed at identifying actions they can take to address the community's top health needs.

The list of potential actions developed in this session will be reviewed by hospital leadership and integrated with the organizations' strategic plans where applicable. Hospital leadership will review progress and determine additional actions to be added to the identified actions to support the health priority. Additionally, hospital leadership will identify actions to add to the implementation plan addressing the two remaining community health priorities:

- Expanding access to care
- Offering access to affordable preventative care

Rainy Lake Medical Center
November 11, 2025

Implementation Plan #1				
Priority: Working together with local and regional organizations to ensure the best care of our population				
Task Group	Success Statement <i>What does success look like?</i>	Lead and Key Partners <i>Who will lead this action?</i>	Launch Step <i>What is the first step to reach success? What is the due date?</i>	Resources Needed <i>What funding, personnel, or infrastructure is needed?</i>
Transportation	Patients are able to get to their appointments on time and care is kept local.	Lead: Clinic staff (perhaps Christian, Angie) Partners: County staff, local cab company, Arrowhead Transit	Create list of local transportation companies and reach out to determine who will partner, what the partnership will look like (by Q1 2026)	Coordinate with Angel (patient coordination), list of transportation companies
Looking for opportunities to partner with competitors for betterment of community	Patients are not missing appts/procedures due to lack of transportation, services are not duplicated, and pathways of care involving both entities are identified.	Lead: Administration Partners: All of leadership	Reach out to competitors to schedule a conversation and gauge interest (by end of Q1 2026)	Support of Board of Trustees
Ensuring strong partnerships with community organizations	There is a strong referral pattern to and from the facility, knowledge of what is available, and collaboration around community projects.	Lead: Administration, depending on partnership Partners: Providers, leadership, dept. directors	Reach out to community organizations to schedule a conversation and gauge interest (by Q2-Q3 2026)	TBD
Different outreach	There is strong collaboration which is recognized by the	TBD	TBD	TBD

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	community and local organizations			
Community education	Increased student partnership, patient awareness of facility offerings, and care is kept local	TBD	TBD	TBD
Preventative care	increased screening/preventative care volume	TBD	TBD	TBD

Implementation Plan #2

Priority: Expanding access to care

Task Group	Success Statement <i>What does success look like?</i>	Lead and Key Partners <i>Who will lead this action?</i>	Launch Step <i>What is the first step to reach success? What is the due date?</i>	Resources Needed <i>What funding, personnel, or infrastructure is needed?</i>
Transportation	Patients can get to their appointments on time and care is kept local.	Lead: Someone in the clinic (Christian, Angie) Partners: County staff, local cab company, arrowhead transit	Create list of local transportation companies and reach out to determine who will partner, what the partnership will look like (by Q1 2026)	Coordinate with Angel (does some patient coord.), list of transportation companies
Outreach	Promote care	Mickie	TBD	TBD
Community Outreach	Facilitate and plan for community outreach opportunities	Clinic – Christian?	TBD	TBD
Health Fair/Events	Organize and participate in local health events	Mickie	TBD	TBD

Implementation Plan #3

Priority: Offering access to affordable preventative care

Task Group	Success Statement <i>What does success look like?</i>	Lead and Key Partners <i>Who will lead this action?</i>	Launch Step <i>What is the first step to reach success? What is the due date?</i>	Resources Needed <i>What funding, personnel, or infrastructure is needed?</i>
Transportation	Patients can get to their appointments on time and care is kept local.	Lead: Someone in the clinic (Christian, Angie) Partners: County staff, local cab company, arrowhead transit	Create list of local transportation companies and reach out to determine who will partner, what the partnership will look like (by Q1 2026)	Coordinate with Angel (does some patient coord.), list of transportation companies
Community Outreach	Facilitate and plan for community outreach opportunities	Clinic lead – Christian or Mel	TBD	TBD
Community Education	Increased partnership, patient awareness of facility offerings and care is kept local	Leadership Team	TBD	TBD
Preventative Care	Facilitate and offer increased screenings and preventative care volumes	Clinic lead – Christian or Mel?	TBD	TBD

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Dissemination

- Rainy Lake Medical Center posted a summary of the Community Health Needs Assessment and implementation strategy online at https://rainylakemedical.com/wp-content/uploads/2025/12/CHNA-Final-Report_Rainy-Lake-Medical-Center-2025.pdf

Implementation Strategy

- Rainy Lake Medical Center leadership assembled to operationalize the community health assessment implementation plan which identifies the objectives, partner opportunities, activity leads, a timeline, and how the objective will be measured for success (see Community Health Assessment Implementation Plan above).

Resolution to Approve Community Health Needs Assessment Implementation Plan

Whereas the board of Rainy Lake Medical Center approved of and oversaw the implementation of a Community Health Needs Assessment process for the purpose of improving community health status and meeting Internal Revenue Service mandates enacted through the Patient Protection and Affordable Care Act.

Now therefore it is resolved that the board of Rainy Lake Medical Center does hereby adopt this resolution to accept the Community Health Needs Implementation Plan presented on this day to address the following prioritized health needs:

- Working together with local and regional organizations to ensure the best care for our population
- Expanding access to care
- Offering access to affordable preventative care

Upon vote taken, the following voted:

For: 6 (one absent)

Against: 0

Whereupon said Resolution was declared duly passed and adopted this 26th day of February 2026.



Board chair

Richard A. Peterson

Board chair



Attest: Board Secretary

Brian Briggs

Attest: Board Secretary