



Community Health Needs Assessment 2025

Mayo Clinic Health System in Waseca



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Mayo Clinic Overview

Mayo Clinic is the largest integrated, not-for-profit medical group practice in the world. With this influence, we are committed to innovating in clinical practice, education and research and providing compassion, expertise and answers to everyone who needs healing.

We are focused on building the future, one where the best possible care is available to everyone, and more people can heal at home. Through our research, we relentlessly pursue breakthroughs that yield earlier diagnoses and new cures.

In 2024, Mayo Clinic cared for patients from every state and 135 countries, covering the full spectrum of patient needs from health information and preventive services to serious and complex care. Mayo Clinic has three destination medical center campuses and several hospitals, with locations in Arizona, Florida, Minnesota and Wisconsin. Further extending our reach, Mayo Clinic provided over a million digital outpatient appointments in 2024, an increase of more than 17% from 2023.



Innovating for new solutions

Mayo Clinic’s unwavering mission is to enhance medical care for the benefit of patients everywhere. Our experts work together to solve patients’ most challenging unmet needs, inspired by our founders’ earliest vision.

Over 150 years ago, brothers Will and Charlie Mayo pioneered an integrated, team-based approach to medicine. Today, that trailblazing spirit drives innovations like Mayo Clinic Platform — a collaborative, digital ecosystem powering new technologies to change how care is delivered everywhere. Mayo Clinic Platform expanded its scope to include data from more than 56 million patients across four continents, enabling solutions that provide earlier, more accurate diagnoses, personalized care, hospital-level care at home and enhanced access to trusted expertise.



Top rankings for quality care

Our commitment to transforming healthcare has earned Mayo Clinic more top rankings for high-quality patient care than any other healthcare organization. This includes more No. 1 rankings than any other hospital from U.S. News & World Report.



Building a healthier world

We think big and act boldly to improve the health of communities. We share our knowledge globally, shape policy and partner with others to create lasting — and much-needed — change for a healthier world.

Mayo Clinic Health System Overview



Mayo Clinic Health System (MCHS) provides quality healthcare to local communities by bringing the Mayo Clinic Model of Care closer to home. MCHS consists of 45 clinics, 16 hospitals and other facilities across multiple communities in Minnesota and Wisconsin. MCHS providers bring the knowledge and expertise of Mayo Clinic to these communities and surrounding areas to ensure our patients receive world-class healthcare. MCHS serves more than 600,000 patients each year and is recognized as one of the most successful community healthcare systems in the U.S.

MCHS is elevating and redefining community and rural healthcare. With more than 100 clinical specialties

(medical and surgical services), patients have access to a full spectrum of healthcare options. To best meet the unique needs of the communities, patients receive quality healthcare at MCHS and have access to highly specialized care at Mayo Clinic’s campus in Rochester, Minnesota.

The Bold. Forward. strategy centers on establishing MCHS as a category-of-one community health system by 2030. This strategic approach focuses on people and communities and is supported by three key pillars: Cure, Connect, and Transform. This framework aims to reimagine care in an evolving healthcare landscape, ensuring that diverse patient needs are met through advanced in-person services and innovative digital solutions.

Mayo Clinic Health System (MCHS) in Waseca is a 35-bed, critical-access hospital in Waseca, Minnesota. It is part of Mayo Clinic Health System in Minnesota, which also includes hospitals in New Prague, Mankato, Fairmont and St. James.

Dedicated to putting the needs of our patients first, MCHS in Waseca promotes health and wellness in the community through inpatient and outpatient services, education through blog postings, articles and presentations, staff volunteerism and community giving.

In 2024, MCHS in Waseca provided over \$1 million in charity care. In addition, the hospital supported health

and wellness in the community by partnering with high schools and higher-education institutions to introduce students to careers in rural healthcare, and invested over \$25,000 in health and wellness programs, including the Waseca Area Neighborhood Service Center Food Shelf, Big Brothers Big Sisters of Southern Minnesota, and Bethlehem Inn of Waseca.

The MCHS Community Health Needs Assessment (CHNA) process advances and strengthens our commitment to health and wellness activities by focusing on high-priority needs in our clinics and community.



Summary of Community Health Needs Assessment

Mayo Clinic Health System in Minnesota used a systematic process to evaluate the health needs of our communities and determine health priorities.

The primary quantitative input into the assessment and prioritization process was the Southern Minnesota Needs Assessment data report. This report was created by Joe Visker, PhD, Minnesota State University Mankato. This report includes an analysis of existing data gathered from various sources, such as census data, government reports, health department statistics and school surveys.

The primary qualitative input into the process was the collection of community input through a key informant survey, where four leaders provided input on the top health concerns. Local public health departments reviewed and provided input on the survey questions during the development process. In addition, a community health prioritization activity was held with stakeholders from local government, business and nonprofit leaders, including an in-person community stakeholder prioritization event on May 5, 2025, with over 20 community stakeholders in attendance. A community health survey distributed by Waseca County was also reviewed and provided insight.

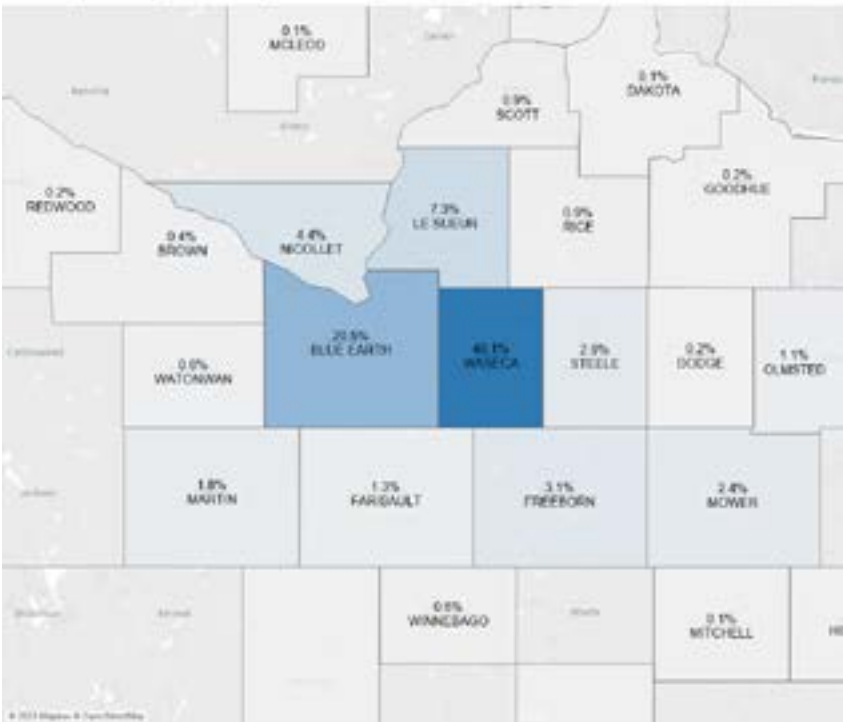


Our Community

GEOGRAPHIC LOCATION

Mayo Clinic Health System in Waseca serves communities in Waseca County and portions of Blue Earth, Le Sueur and Steele counties in southern Minnesota. The main medical campus is in Waseca and consists of a multi-specialty clinic and a critical access hospital, which is the only hospital

in Waseca County. Although MCHS in Waseca serves patients from other counties, the majority (49%) are from Waseca County. For the purposes of the CHNA, the community is defined as Waseca County.



Waseca Inpatients by Patient County

DEMOGRAPHICS

Population – Number (#) of residents by age (2025 projection)

Source: Minnesota State Demographic Center. (2025). Our projections. Data and reports <https://mn.gov/admin/demography/data-by-topic/population-data/our-projections/>

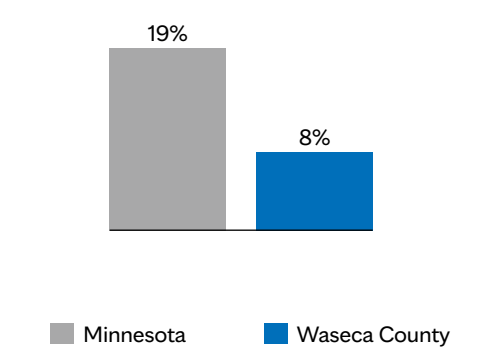
AREA	SEX	0-17	18-64	65+
Waseca	Male	2043	5201	1845
	Female	2017	5896	1992

Population by Race – Population by race (#) (individual races identified as one race) (2020)

Source: US Census Bureau. (2025). Selection Map. https://data.census.gov/map/050XX00US27013,27043,27047,27049,27079,27091,27099,27103,27139,27161,27165/DECENNIALSF22010/PCT42?t=001:Race%20and%20Ethnicity&layer=VT_2022_050_00_PY_D1&loc=44.1598,-93.7084,z7.4807

AREA	WHITE ALONE	BLACK OR AFRICAN AMERICAN ALONE	AMERICAN INDIAN AND ALASKA NATIVE ALONE	ASIAN ALONE	NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER ALONE	SOME OTHER RACE ALONE	TWO OR MORE RACES	HISPANIC OR LATINO
State	4,423,146	398,434	68,641	299,190	2918	168,44	345,721	345,640
Waseca	17040	359	149	111	14	389	906	1271

Percent of residents eligible for **Medical Assistance** by County, 2020



Source: Minnesota Department of Health County Health Tables

SOCIAL AND ECONOMIC FACTORS

Poverty - % of individuals with income below poverty (2018-2022)

Source: Minnesota Compass. (2025). Location profiles by county. <https://www.mncompass.org/profiles/county>

AREA	INDIVIDUALS WITH INCOME BELOW THE POVERTY LINE (%)
State	9.6
Waseca	6.6

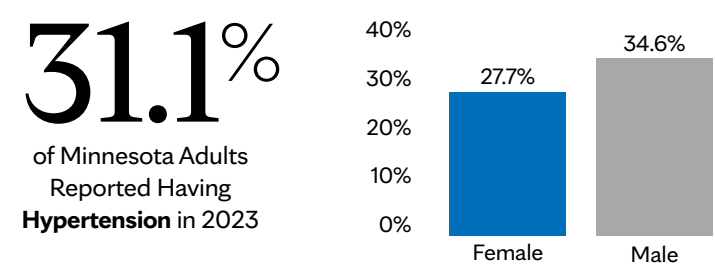
CHRONIC CONDITIONS

Ten Leading Causes of Death – Cause specific death counts (n) (2020)

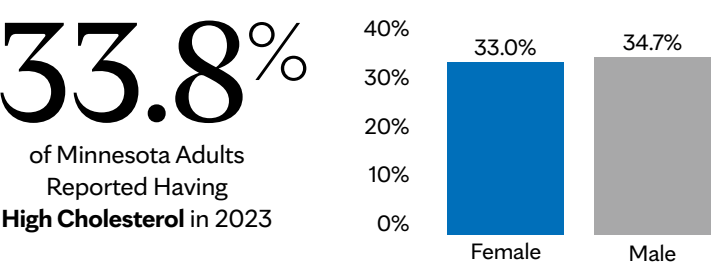
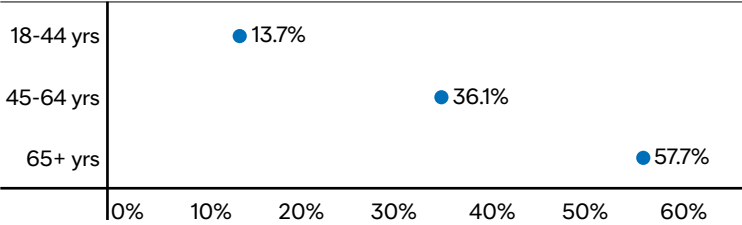
Source: Minnesota Department of Health. (2023). 2020 Minnesota county health tables. 2020 Data by State, County, and Community Health Board (2/15/2023).

AREA	CANCER (n)	HEART DISEASE (n)	COVID-19 (n)	UN- INTENTIONAL INJURY (n)	ALZHEIMER'S (n)	STROKE (n)	CLRD (n)	DIABETES (n)	CHRONIC LIVER DISEASE (n)	HYPER- TENSION (n)
State	9,940	8,562	5,214	3,308	2,587	2,316	2,211	1,492	895	841
Waseca	38	45	18	8	5	6	11	8	3	6

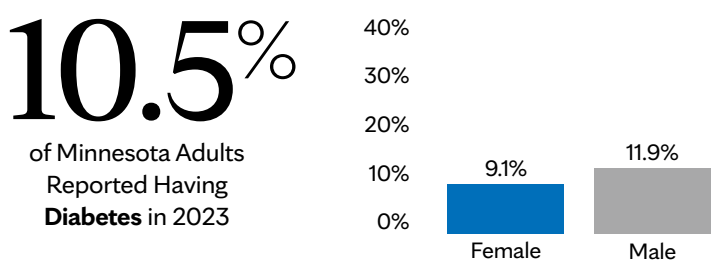
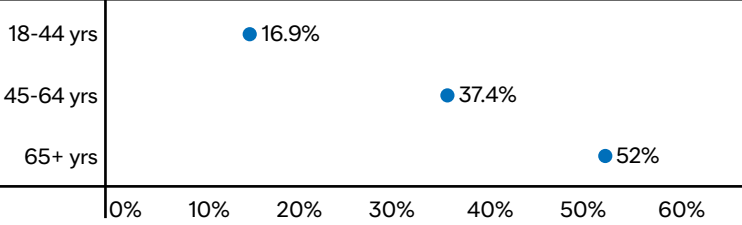
CHRONIC DISEASE PREVALENCE DASHBOARD - MN DEPT. OF HEALTH



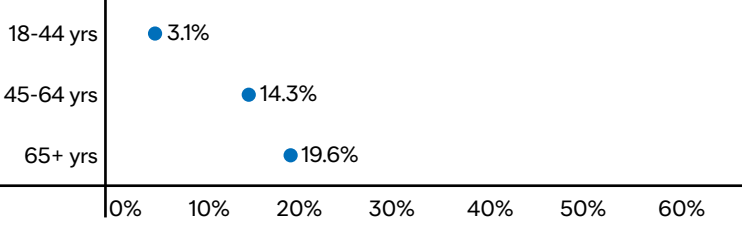
The percent of people who report having Hypertension increases with age.



The percent of people who report having High Cholesterol increases with age.



The percent of people who report having Diabetes increases with age.



Assessing the Needs of the Community

OVERVIEW

In 2022, Mayo Clinic Health System in Waseca identified and prioritized community health needs in Waseca County through a comprehensive process that included input from local community and organization leaders, public health officials and hospital leaders. The 2022 Community Health Needs Assessment final report has been posted on the Mayo Clinic Health System “Community Health Needs Assessment” internet page for public review and comment. A link for questions and comments was clearly identified on the CHNA report page. However, no comments have been submitted.

In 2025, the Mayo Clinic Health System in Minnesota CHNA process was led by an internal MCHS work group with members from community relations and site leadership; input was provided by Minnesota health system leadership and practice operations. This interdisciplinary work group viewed the community health needs assessment as an opportunity to understand known healthcare needs better and, if possible, identify emerging needs within each of the MCHS communities in Minnesota.

COMMUNITY INPUT

Community input was received at numerous stages and from a variety of levels of leadership throughout the CHNA process. Mayo Clinic Health System in Waseca hosted a community leadership luncheon, which included facilitating a community health prioritization activity, in which 20 attendees participated. In addition, Mayo Clinic Health System sent out key informant surveys to 21 community stakeholders in Waseca County, receiving 4 responses. Mayo Clinic Health System also reviewed and considered results from recent public health adult community surveys for Waseca County.

PROCESS AND METHODS

Quantitative Data

Primary quantitative data was collected and analyzed by Minnesota State University, Mankato Health Science

department, led by Dr. Joseph Visker. Dr. Visker and his team pulled data from a variety of publicly available sources for the 11 regional counties included in the Southwest and Southeast Minnesota assessment. The full data report and all sources are available in the Southern Minnesota Needs Assessment (Appendix A) prepared by Dr. Visker.

Community Input

A key informant survey was sent to community stakeholders, including representatives from traditionally underrepresented, medically underserved, low-income and minority populations. The key informant survey included these questions:

- Name
- Email
- Sector
- County
- Ability to select up to three top health concerns, and asked to share:
 - Concern
 - Who is affected by this concern/issue?
- Please describe how this issue impacts your community.
- Contributing factors.
- Resources available to address.
- Suggestions.
- Demographics
 - Which gender description best describes you?
 - Age category
 - Race/Ethnicity
 - Additional comments

Mayo Clinic Health System sent key informant surveys to 21 community stakeholders in Waseca County. Four responses were received representing social services/ nonprofits, the arts/culture and the faith community.

The key concerns were:

TOPIC	#1 CONCERN	#2 CONCERN	#3 CONCERN	TOTAL VOTES
Mental Health	1	2		3
Access		1		1
Basic Needs	3		1	4
Chronic Disease			1	1
Substance Use		1	1	2
Infectious Disease				0
Maternal Child Health				0

County Public Health sent out adult community health surveys in the Fall of 2022. To reduce duplication, local county public health shared results of the adult community health surveys which included information on overall health, chronic health conditions, emotional and mental health conditions, healthcare providers and insurance coverage, preventive care, reasons for not receiving or delaying needed care, nutrition, physical activity, food accessibility and security, alcohol, tobacco and other drugs, overweight and obese, ways to get around, personal and community safety, caregiving, COVID-19, community amenities, and respondent characteristics. These results were reviewed and considered by Mayo Clinic Health System as we selected our community health priorities. This survey is available in Appendix B.

MCHS Waseca hosted a community leader luncheon on May 5, 2025. One of the goals of the luncheon was to ask stakeholders to prioritize community health needs. Data slides were presented on these categories:

- Mental health
- Substance use
- Maternal and child health
- Access to healthcare and community services
- Infectious disease
- Chronic conditions
- Basic needs that influence health

Attendees were then given three dots to place on posters representing each category. The green dot represented their No. 1 priority area, and the two blue dots were their second and third priority areas. Attendees were to draw on the data, their experiences in and knowledge of the community, to vote for three priority areas they’d suggest Mayo Clinic Health System focus on in the next three years.

Priority selection considerations were also shared, including the size of the problem, availability of solutions, effectiveness of health interventions to impact the problem, seriousness of the problem, potential to positively impact health disparities and momentum in the community.

The Waseca meeting had 21 people voting. Organizations represented included county public health, representatives from medically underserved, low-income and minority populations, government, education, business and more:

- United Prairie Bank
- Thrivent
- Keen Bank
- Waseca Public Schools*
- Growing Roots Chiropractic
- Waseca County Public Health*
- Janesville-Waldorf-Pemberton Schools*

- Waseca EDA
- City of Waseca*
- Waseca Area Foundation*
- Center for Rural Policy & Development
- Colony Court Senior Living Solutions

*Denotes organizations that work with and would provide input related to community members from medically underserved, low-income or minority populations.

The top health priorities were:

HEALTH PRIORITY	1ST CHOICE VOTE	VOTE	TOTAL VOTES
Access to Health Care & Community Services	0	15	15
Mental Health	19	2	21
Basic Needs that Influence Health	1	9	10
Substance Use	0	9	9
Chronic Conditions	1	3	4
Maternal and Child Health	0	2	2
Infectious Disease	0	0	0

Participants were then asked to select one of the top three results, access to healthcare and community services, mental health or basic needs that influence health, and work as a table to answer these questions:

- Which information stands out to you?
- Which findings align with what you already know about residents?
- What opportunities or potential barriers do you see in addressing this health concern?

Participants were informed of the following steps and how their feedback would be considered when priorities were selected. Feedback from this session can be found in Appendix C.



Photo from Waseca meeting.

Addressing the Needs of the Community

After completing an extensive analysis of the data available and community input, the top community health needs were identified by MCHS in Waseca. Each of these focus areas is equally important; however, they have been ranked by priority:

These top three health priorities are:

- 1 Mental Health
- 2 Access to Care
- 3 Basic Needs that Influence Health



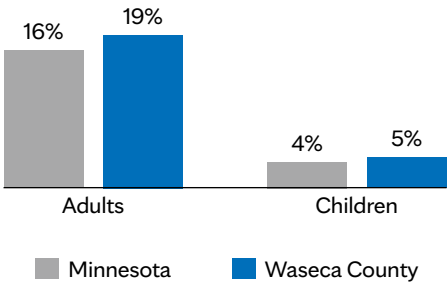
MENTAL HEALTH

This focus area refers to the services and support needed to address how we think, act and feel as we cope with life. Mental health is essential for personal well-being, caring for family, inter-personal relationships

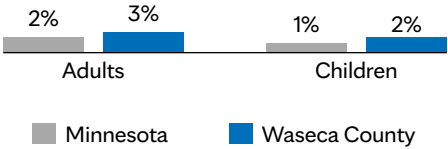
and meaningful contributions to society. Mental health conditions may include, but are not limited to, depression, anxiety and post-traumatic stress disorder. This focus area will also include substance use.

Mental Health

Prevalence of **depression** among working age adults (18-64) and children (0-17), 2023

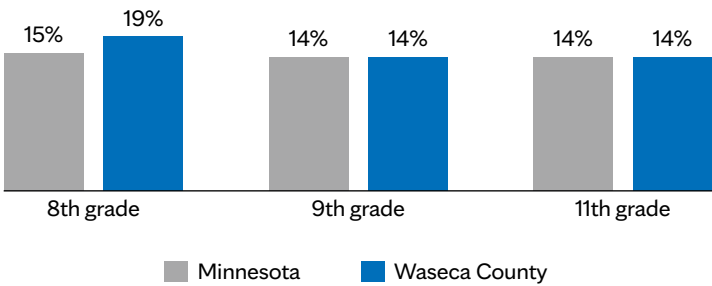


Prevalence of **suicidal ideation or recent attempt** among working age adults (18-64) and children (0-17), 2023



Source: Minnesota Electronic Health Records Consortium, Health Trends Across Communities.

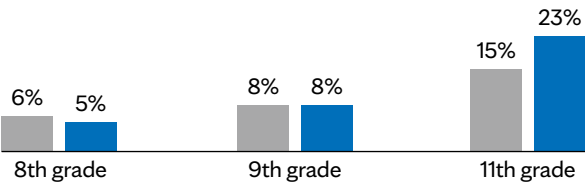
Suicidal ideation among secondary students, 2022



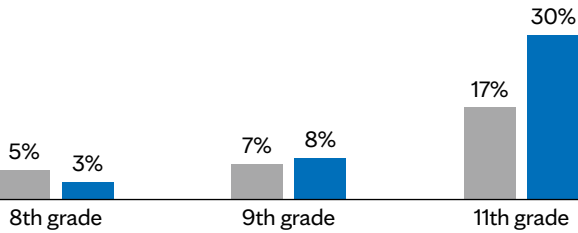
Source: Minnesota Student Survey.

Substance Use

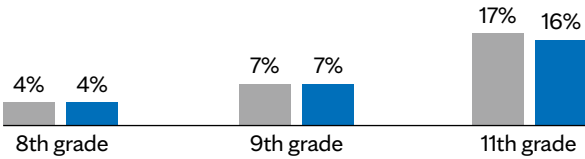
Secondary students that report **tobacco** use in the past **month**, 2022



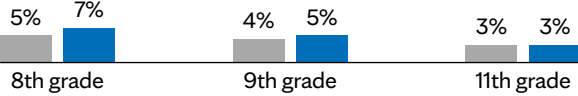
Secondary students that report **alcohol** use in the past **month**, 2022



Secondary students that report **marijuana** use in the past **year**, 2022



Secondary students that report **opioid** use in the past **year**, 2022



Source: Minnesota Student Survey.

Bullying/Harassment - % of students who have been bullied in the last 30 days (2022)

Source: Minnesota Department of Education. (2025). Minnesota student survey reports: 2013-2022. <https://public.education.mn.gov/MDEAnalytics/DataTopic.jsp?TOPICID=242>

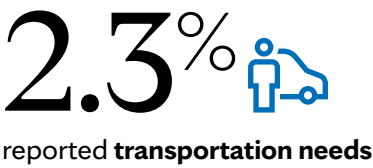
AREA	BULLIED IN THE LAST 30 DAYS – 8TH GRADE (%)		BULLIED IN THE LAST 30 DAYS – 9TH GRADE (%)		BULLIED IN THE LAST 30 DAYS – 11TH GRADE (%)	
	ONCE OR MORE	WEEKLY OR MORE	ONCE OR MORE	WEEKLY OR MORE	ONCE OR MORE	WEEKLY OR MORE
State	56.1	22.7	49.6	19.3	43.0	16.9
Waseca	69.4	32.2	48.1	21.0	45.2	22.6

ACCESS TO CARE

This focus area refers to the ability and ease of accessing healthcare and community services. Access to care considers barriers such as transportation, knowledge and education of available services, and ease of accessing care through outreach and virtual options. By focusing on

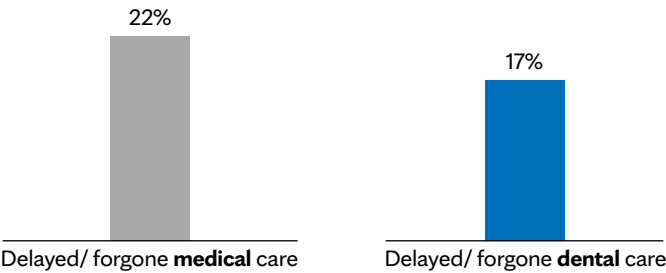
access, we aim to reduce disparities, improve health outcomes, and ensure that everyone can live a healthier, more empowered life regardless of background or circumstance.

Of the 13,999 Waseca Mayo Clinic Health System patients surveyed between January 2024 and January 2025...





Access to Health Care & Community Services

Residents reported that they delayed or did not receive health care they thought they needed



Source: Community Health Survey, 2021-2023

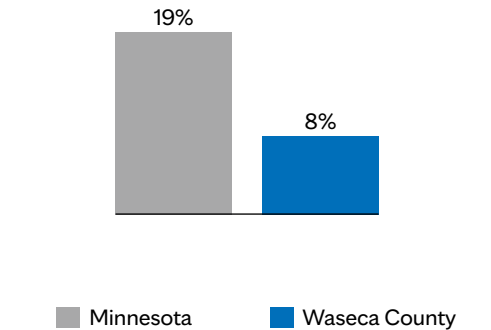
TOP REASONS FOR DELAYED OR FORGONE CARE

-  It costs too much.
-  I didn't think it was serious enough.


BASIC NEEDS THAT INFLUENCE HEALTH

This focus area refers to the non-medical factors that influence health outcomes. These conditions are the conditions in which people are born, grow, work, live, and age—examples include access to food and housing. Addressing a patient's basic needs has been shown to improve their health outcomes.

Percent of residents eligible for **Medical Assistance** by County, 2020




Source: Minnesota Department of Health County Health Tables



There is **1 dentist** for every...

- 1,290 Minnesotans
- 1,580 Waseca County residents

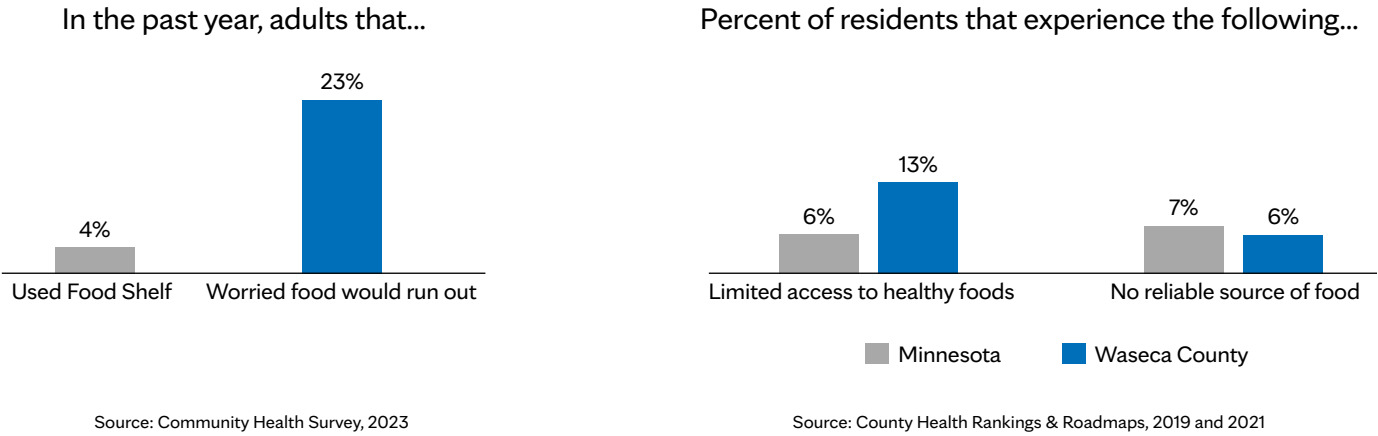


There is **1 mental health provider** for every...

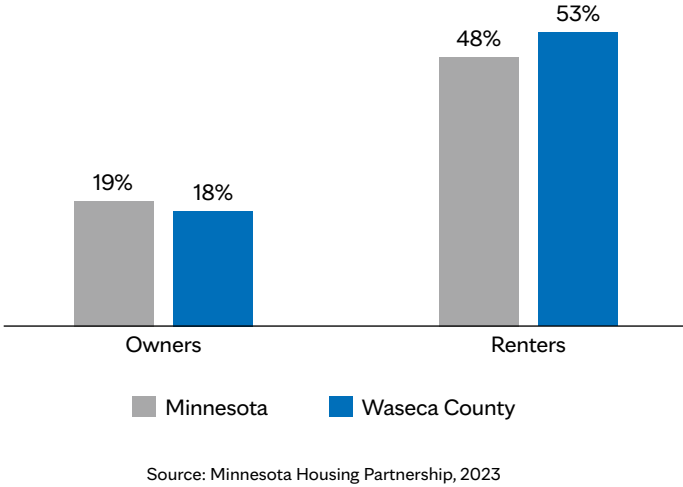
- 280 Minnesotans
- 1,170 Waseca County residents

Source: County Health Rankings and Roadmaps

Between January 2024 to January 2025, **823 Mayo patients** of the 13,999 surveyed in Waseca reported they have experienced **food insecurity** in the past year. This represents **5.9%** of patients surveyed.



Percent of households that are **cost-burdened** by home ownership status



PRIORITIZATION PROCESS AND CRITERIA

Data analysis identified significant community needs, including mental health, substance use, maternal and child health, access to healthcare and community services, infectious disease, chronic conditions and basic needs that influence health.

When asking for prioritization of these needs, the following priority selection considerations were shared, which included: size of the problem, availability of solutions, effectiveness of health interventions to impact the problem, seriousness of the problem, potential to positively impact health disparities and momentum in the community.

The Mayo Clinic Health System Minnesota Administrative Leadership Team, comprised of practice operations and nursing leaders, presented background information on the CHNA process, initial assessment outcomes and top community health themes based on the criteria provided at the June 19, 2025, meeting. Over 100 Mayo Clinic Health System Minnesota leaders were part of this meeting. The group supported the priority recommendations of mental health, access to care and basic needs that influence health as the selected health

concerns for 2026-2028. The group was also asked to provide feedback via Forms on any projects or initiatives they are involved with that would fit under these priority needs to help identify strategies and tactics.

The Mayo Clinic Health System Minnesota Executive Operating Team, comprised of top MCHS Minnesota executives, was presented with the priorities for a vote on July 23, 2025. 10 voting members were present. The group was presented with background information on the CHNA process, initial assessment outcomes and top community health themes based on the criteria provided. Dr. Ghosh, Vice President, Mayo Clinic Health System in Minnesota, motioned to approve mental health priorities, access to care and basic needs that influence health as the selected health concerns for 2026-2028. All voted in favor. No opposition, and the motion passed.

Other needs that were strongly considered were substance abuse and chronic disease. These needs will be addressed through our selected health concerns – mental health, access to care and basic needs that influence health - but given limited resources and other organizations working to address these other needs, they will not be addressed as selected health concerns in this report.

Available Resources to Meet Health Needs



Mental Health:

- Compassionate Counseling Services
- South Central Human Relations Center
- Fernbrook Family Center
- Minnesota Prairie County Alliance
- Committee Against Domestic Abuse (CADA)
- Wright and Associates

Access to Care:

- Dental Care, including, but not limited to, Open Door Health Center, Waseca Dental Care, and Waseca Family Dentistry.
- Medical Care, including, but not limited to, Open Door Health Center and Olmsted Medical Center.
- Transportation assistance, including, but not limited to, Southern Minnesota Area Rural Transit, and SEMCAC
- Vision Care, including, but not limited to, Clark Family Eye Care.
- Help pay for healthcare, including, but not limited to, emergency medical assistance, Minnesota family planning program, Sage, community alternative care waiver and prescription savings program.

Basic Needs that Influence Health:

- Food assistance, including, but not limited to, Waseca Area Neighborhood Services Food Shelf, Meals on Wheels and Janesville Community Food Shelf.
- Housing assistance, including, but not limited to, Minnesota Valley Action Council, Waseca Housing Authority, South Central Multi-County HRA, and Minnesota Prairie County Alliance.
- Substance use, including, but not limited to, House of Hope, Inc., Beyond Brink, Fountain Centers, and Minnesota Prairie County Alliance.
- Financial strain, including, but not limited to, Waseca County Human Services, Minnesota Department of Human Services, Minnesota Valley Action Council, Salvation Army, and Minnesota Prairie County Alliance.

Evaluation of Prior CHNA and Implementation Strategy

Impact of 2022-2024



Prioritized health needs from the 2022 CHNA included:

- Mental Health
- Addressing Social Determinants of Health

Updates on strategy accomplishments

- Below are some key implementation actions taken to address the prioritized health needs from the 2022 CHNA. The intended impact of committing financial and human resources to conduct such actions was to provide awareness, education, and assistance to the community to reduce issues related to mental health and social determinants of health.

Mental Health

- Collaborated with Waseca Public Schools and Janesville-Waldorf-Pemberton elementary schools to host Wellness Week to reinforce healthy habits at school and home. Over 900 students participated each year.
- Developed the Journey to Wellness program, a free yearlong, virtual, self-guided program designed to make the wellness journey easier. All new monthly topics were developed in 2023 and 2024. Three thousand five hundred program participants were from Southwest Minnesota.
- MCHS representative on the Waseca Suicide Prevention Committee.

- MCHS had two physicians and one allied health staff member represented on the Youth Mental Health and Suicide Prevention community coalition, which provided community presentations and developed and launched an online mental health website called Greater Mankato Mental Health Hub, making it easier for families to find Mental Health Resources. MCHS staff dedicated over 125 hours starting in 2023 and paid \$3,800 to help with marketing, printing and advertising costs to build community awareness of the website.

Addressing Social Determinants of Health

- Provided over \$26,000 in funding to address social determinants of health (SDOH) to organizations, including Waseca Area Neighborhood Service Center Food Shelf, Bethlem Inn Shelter, Waseca Area Citizens Center, and Big Brothers Big Sisters of Southern MN.
- Provided three free community education presentations at Waseca Area Senior Citizens Center – Chair Yoga for Older Adults, Healthy Eating as we Age, Safe Movements for Older Adults. Average of 12 participants per session.
- MCHS dietitian provided nutrition education at the food shelf on their senior day.
- MCHS dietitian provided diabetes education to inmates at the Waseca prison.

Appendices

Appendix A – [Southern MN Needs Assessment](#)

Appendix B – [Waseca County Adult Community Survey](#)

Appendix B – [Waseca Community Feedback Results](#)

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