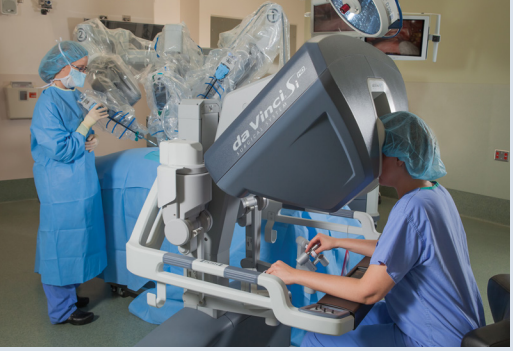


















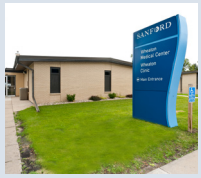


SANFORD HEALTH

Sanford Health Network

2018 Community Health Needs Assessment

dba Sanford Jackson Medical Center EIN# 46-0388596

Dear Community Members,

Sanford Jackson Medical Center is pleased to present the 2018 Community Health Needs Assessment (CHNA).

Sanford completes a community health needs assessment every three years. It is through this work that we identify the unmet needs in the community and strategically plan how we can best address those needs. The CHNA process aligns with Sanford's mission - *Dedicated to the work of health and healing.*

During 2017 and 2018, members of the community were invited to complete a survey to help identify the unmet needs. Key stakeholders completed a survey to identify concerns for the community related to economic well-being, transportation, children and youth, the aging population, safety, access to services, and mental and behavioral health. Sanford analyzed the data from the primary research and met with key stakeholders to prioritize the identified needs. Our strategies to address the needs are included in this report.

Sanford will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- *Children and Youth*
- *Mental Health/Behavioral Health and Substance Abuse*

The CHNA also focused on the strengths of our community and includes the many community assets that are available to address the community health needs. We have also included an impact report from our 2016 implementation strategies.

Sanford Jackson is committed to extending care beyond our bricks and mortar. We are committed to meeting the health care needs of the broader community. Together, we can fulfill our mission.

Sincerely,

Dawn Schnell

Dawn Schnell
Senior Director
Sanford Jackson Medical Center

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Executive Summary

Purpose

The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues within our community. Findings from the assessment serve as a catalyst to align expertise and develop a Community Investment/Community Benefit plan of action. There is great intrinsic value in a community health needs assessment when it serves to validate, justify and defend the not-for-profit status and create opportunity to identify and address public health issues from a broad perspective. A community health needs assessment identifies the community's strengths and areas for improvement. A community health needs assessment is critical to a vital Community Investment/Community Benefit Program that builds on community assets, promotes collaboration, improves community health, and promotes innovation and research. A community health needs assessment also serves to validate progress made toward organizational strategies and provides further evidence for retaining our not-for-profit status.

Our Guiding Principles

- All health care is a community asset
- Care should be delivered as close to home as possible
- Access to health care must be provided regionally
- Integrated care delivers the best quality and efficiency
- Community involvement and support are essential to success
- Sanford Health is invited into the communities we serve

Regulatory Requirements

Federal regulations stipulate that non-profit medical centers conduct a community health needs assessment at least once every three years and prioritize the needs for the purpose of implementation strategy development and submission in accordance with the Internal Revenue Code 501(r).

Internal Revenue Code 501(r) requires that each hospital must have: (1) conducted a community health needs assessment in the applicable taxable year; (2) adopted an implementation strategy for meeting the community health needs identified in the assessment; and (3) created transparency by making the information widely available.

The regulations stipulate that each medical center take into account input from persons who represent the broad interests of the community. We are required to seek at least one state, local, tribal or regional government public health department or state Office of Rural Health with knowledge, information or expertise relevant to the health needs of the community.

Non-profit hospitals are required to seek input from members of medically underserved, low income, and minority populations in the community, or organizations serving or representing the interest of such populations, and underserved populations experiencing disparities or at risk of not receiving adequate care as a result of being uninsured or due to geographic, language, financial or other barriers.

The community health needs assessment includes a process to identify community resources that are available to address the assessed needs and a prioritization of the needs.

Hospitals are to address each and every assessed needs or defend why we are not addressing the needs. Once the needs have been identified and prioritized, hospitals are required to develop an implementation strategy to address the top needs. The strategies are reported on IRS Form 990 and a status report must be provided each year on IRS 990 Schedule H.

Finally, hospitals are to be transparent with the findings and make the written CHNA report available to anyone who asks for the report. Sanford places the CHNA reports and the implementation strategies on the Sanford website. Hospitals are required to keep three cycles of assessments on the web site. The 2018 report will be Sanford's third report cycle since the requirements were enacted in 2010.

Study Design and Methodology

1. Primary Research
   A. *Key Stakeholder Survey*
   An online survey was conducted with identified community key stakeholders. The study concentrated on the stakeholders' concerns for the community specific to economic well-being, transportation, children and youth, the aging population, safety, health care and wellness, mental health and substance abuse. The study was conducted through a partnership between Sanford Health and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Sanford Health distributed the survey link via email to stakeholders and key leaders located within the Jackson community and Jackson County. Data collection occurred during December 2017. A total of 42 community stakeholders participated in the survey.

   B. *Resident Survey*
   The resident survey tool included questions about the respondent's personal health. An online survey was developed in partnership with public health experts from across the Sanford footprint. The Minnesota Health Department reviewed and advised Sanford about key questions that they request of the Statewide Health Improvement Partnership (SHIP) surveys and those questions were included in the resident survey. Questions specific to American Indian residents were developed by the North Dakota Public Health Association. The survey was posted on Facebook and a notice was posted in the local newspaper to invite residents to take the survey. The newspaper post included a URL for the survey. A total of 80 community residents participated in the survey.

   C. *Community Asset Mapping*
   Asset mapping was conducted to find the community resources available to address the assessed needs. Each unmet need was researched to determine what resources were available to address the needs. Once gaps were determined, the prioritization exercise followed with key stakeholder groups determining the top needs.

   D. *Community Stakeholder Discussions*
   Community stakeholders were invited to attend a presentation of the findings of the CHNA research. Facilitated discussion commenced and each participant was asked to consider his or her top two or three priorities that should be further developed into implementation strategies. The meeting served to inform the group of the findings but also served as a catalyst to drive collaboration.

E. *Prioritization Process*
The primary and secondary research data was analyzed to develop the top unmet needs. The analyzed list of needs was developed into a worksheet. A multi-voting methodology from the American Society for Quality was implemented to determine what top priorities would be further developed into implementation strategies. Key community stakeholders met with medical center leaders to complete the multi-voting exercise.

2. Secondary Research
   A. The 2018 County Health Rankings were reviewed and included in the report and in the asset mapping process.
   B. The U.S. Census Bureau estimates were reviewed.
   C. Community Commons were reviewed and specific data sets were considered. The Community Commons link is https://www.communitycommons.org/maps-data/

Limitations of the Study

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in Jackson and Jackson County, Minnesota. A good faith effort was made to secure input from a broad base of the community. However, when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates from the U.S. Census Bureau, there was improvement over the last several CHNAs but there is still a need to capture demographic that better represents the community. This is part of our CHNA continuous improvement process.

The Internal Revenue Code 501(r) statute requires that a broad base of key community stakeholders have input into the needs of the community. Those community members specified in the statute include persons who represent the broad interests of the community served by the hospital facility including those with special expertise in public health; Federal, tribal, regional, state and or local health or other departments or agencies with information relevant to the health needs of the community served; and leaders, representatives, or members of medically underserved, low income, and minority populations.

Sanford extended a good faith effort to engage all of the aforementioned community representatives in the survey process. We worked closely with public health experts throughout the assessment process.

Public comments and responses to the community health needs assessment and the implementations strategies are welcome on the Sanford website or contact can be made at https://www.sanfordhealth.org/contact-us/form.

Key Findings

Community Health Concerns

The key findings are based on the key stakeholder survey, the resident survey and secondary research. The key stakeholder survey ranked key indicators on a Likert scale with 1 meaning no attention needed and 5 meaning critical attention needed. Survey results ranking 3.5 or above are considered to be high ranking. Sanford is addressing many of the needs that ranked below 3.5; however, the high ranking needs of 3.5 or above are considered for the prioritization process. The resident survey addresses personal health needs and concern. The secondary research provides further understanding of the health of the community and in some cases the indicators are aligned and validate our findings.

Economic Well-Being
Community stakeholders did not have concerns that ranked over 3.5 for this set of indicators.

Children and Youth
Community stakeholders are most concerned about the availability and cost of quality childcare (ranking 3.89), childhood obesity (3.65), bullying (3.50), the availability and cost of services for at-risk youth (3.47), substance abuse by youth (3.28), teen tobacco use (3.20), and opportunities for mentoring (3.03).

Aging Population
Community stakeholders are most concerned about the cost of long-term care (3.85), the cost of memory care (3.82), and the availability of memory care (3.53).

Safety
Community stakeholders did not have concerns that ranked over 3.5 for this set of indicators.

Health Care Access
Community stakeholders are most concerned about the availability of mental health providers (4.11), access to affordable health insurance (3.89), the availability of behavioral health (substance abuse) providers (3.81), access to affordable health care (3.68), the availability of non-traditional hours (3.56), access for affordable dental insurance (3.54), and access to affordable prescription drugs (3.54).

Mental Health and Substance Abuse
Community stakeholders are most concerned about depression (3.75), drug use and abuse (3.67), alcohol use and abuse (3.56), and dementia and Alzheimer's disease (3.51).

- 39% of resident survey participants report that they have been diagnosed with depression
- 43% of residents report a diagnosis of anxiety/stress

Resident survey participants are facing the following issues:

- 68% report that they are overweight or obese
- 38% self-report binge drinking at least 1X/month
- 38% have a diagnosis of high cholesterol
- 33% have not visited a dentist in more than a year
- 32% have a diagnosis of hypertension
- 18% self-report that they have drugs in their home they are not using
- 18% report that alcohol use has had a harmful effect on them or a member of their family in the past two years
- 15% report running out of food before having money to buy more
- 11% currently smoke cigarettes

Community stakeholders worked through a multi-voting prioritization process to determine the top priorities and needs of the community.

Sanford Jackson will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- *Children and Youth*
- *Mental Health/Behavioral Health and Substance Abuse*

Implementation Strategies

Priority 1: Children and Youth

According to the Centers for Disease Control, obesity is a complex health issue to address. Obesity can be caused from a combination of contributing factors such as behavior and genetics. Behaviors can include dietary patterns, physical activity, inactivity, medication use, and other exposures. Additional contributing factors in our society include the food and physical activity environment, education and skills, and food marketing and promotion.

Obesity is a serious concern because it is associated with poorer mental health outcomes, reduced quality of life, and is associated with morbidity and illnesses including diabetes, heart disease, stroke, and some types of cancer.

Sanford Jackson has made physical health specific to obesity a significant priority and has developed strategy to improve physical health and reduce the negative health effects of obesity.

Priority 2: Mental Health/Behavioral Health and Substance Abuse

Mental health is important at every stage of life and affects how people think, feel, and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental, and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health and behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Jackson Medical Center

Community Health Needs Assessment

2018

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Acknowledgements

Sanford Health would like to thank and acknowledge the Steering Committees for their assistance and expertise while conducting the assessment and analysis of the community needs.

Sanford Steering Group:

- Sara Ballhagen, Administrative Assistant, Sanford Wheaton
- Stacy Barstad, Senior Director, Sanford Tracy and Sanford Westbrook
- Rob Belanger, Clinic Director, Sanford Bagley
- Catherine Bernard, Tax Manager, Corporate Accounting, Sanford Health
- Michelle Bruhn, Senior Vice President, Finance, Health Services Division, Sanford Health
- Randy Bury, Chief Administrative Officer, Sanford Health
- Brian Carlson, Executive Director, Sanford Thief River Falls
- Denise Clouse, Marketing Coordinator, Sanford Tracy
- Ashley Erickson, Senior Director, Sanford Aberdeen
- JoAnn Foltz, Senior Director, Sanford Wheaton

- Isaac Gerdes, Senior Director, Sanford Webster
- Paul Gerhart, Director of Fiscal Services, Sanford Canton
- Julie Girard, Improvement Advisor, Sanford Vermillion
- Paul Hanson, President, Sanford Sioux Falls
- Joy Johnson, VP, Operations, Sanford Bemidji
- JoAnn Kunkel, Chief Financial Officer, Sanford Health
- Mary Lake, Executive Assistant, Sanford Health Network Fargo Region
- Amber Langner, Senior Director of Finance, Corporate Accounting, Sanford Health
- Scott Larson, Senior Director, Sanford Canton
- Tiffany Lawrence, VP, Finance, Sanford Fargo
- Martha Leclerc, VP, Corporate Contracting, Sanford Health
- Tammy Loosbrock, Senior Director, Sanford Luverne and Sanford Rock Rapids
- Carrie McLeod, Director, Sanford Community Health Improvement/Community Benefit
- Jac McTaggart, Senior Director, Sanford Hillsboro and Sanford Mayville
- Rick Nordahl, Senior Director, Sanford Sheldon
- Erica Peterson, Senior Director, Sanford Chamberlain
- Gwen Post, Director of Nursing and Clinical Services, Sanford Worthington
- Dawn Schnell, Senior Director, Sanford Jackson
- Lori Sisk, Senior Director, Sanford Canby and Sanford Clear Lake
- Jennifer Tewes, Clinic Supervisor, Sanford Jackson
- Tim Tracy, Senior Director, Sanford Vermillion
- Ruth Twedt, Manager of Ancillary Services, Sanford Clear Lake
- Marnie Walth, Senior Legislative Affairs Specialist, Sanford Bismarck
- Jennifer Weg, Executive Director, Sanford Worthington

We express our gratitude to the following community collaborative members for their expertise during the planning, development and analysis of the community health needs assessment:

- Clinton Alexander, Fargo Moorhead Native American Center
- Kristin Bausman, Becker County Public Health
- Justin Bohrer, Fargo Cass Public Health
- Cynthia Borgen, Beltrami Public Health
- Jackie Buboltz, Essentia Health
- Anita Cardinal, Pennington County Public Health
- Leah Deyo, Essentia Health
- Peter Ekadu, Nobles County Public Health
- Stacie Golombiecki, Nobles County Public Health
- Christian Harris, New American Consortium
- Caitlyn Hurley, Avera Health
- Deb Jacobs, Wilkin County Public Health
- Joy Johnson, Sanford Health
- Ann Kinney, Minnesota Department of Health
- Krista Kopperud, Southwest Health and Human Services
- Ann Malmberg, Dakota Medical Foundation Mayors' Blue Ribbon Commission on Addiction
- Kathy McKay, Clay County Public Health
- Jac McTaggert, Sanford Health
- Mary Michaels, Sioux Falls Department of Health
- Teresa Miler, Avera Health
- Renae Moch, Burleigh County Public Health

- Brittany Ness, Steel County Public Health
- Ruth Roman, Fargo Cass Public Health
- Kay Schwartzwalter, Center for Social Research, NDSU
- Becky Secore, Beltrami Public Health
- Julie Sorby, Family HealthCare Center
- Brenda Stallman, Traill County Public Health
- Diane Thorson, Ottertail County Public Health
- Juli Ward, Avera Health
- MayLynn Warne, North Dakota Public Health Association

We extend our special thanks to the community and county leaders, public health administration, physicians, nurses, legislators and community representatives for diverse populations for their participation in this work. Together we are reaching our vision “to improve the human condition through exceptional care, innovation and discovery.”

The following Jackson community stakeholders participated in community discussions and helped to formulate the priorities for our implementation strategies:

- Allison Eckert, Jackson Public Health
- Gail Eike, Sanford Health
- Shawn Haken, Sheriff
- Tom Nelson, Economic Development
- Detasha Place, Sanford Health
- Laura Potthoff, Sanford Health
- Dawn Schnell, Sanford Health
- Matt Skraret, City of Jackson
- Jen Tewes, Sanford Health

Description of Sanford Jackson Medical Center

Sanford Jackson Medical Center is a 20-bed hospital serving people in Jackson County and the surrounding area. It provides 24/7 emergency care with an on-site heliport for transporting critically ill patients to a tertiary medical center when needed.

A variety of surgical procedures are performed daily in the surgical suite at Sanford Jackson Medical Center, including orthopedic surgery. Laboratory and x-ray services are available 24 hours a day, with staff serving both the hospital and the attached medical clinic. Clinic services include family medicine, cardiology, orthopedics, OB/GYN and oncology.

Sanford Jackson employs 5 clinicians, including physicians and advanced practice providers, and 65 employees.

Description of the Community Served

Jackson is a charming city nestled in the valley west of the Des Moines River in southwestern Minnesota. With a population of 3,300, Jackson is the largest city and the county seat of Jackson County. In 2010, the county was designated as “the healthiest county in Minnesota” and routinely ranks in the top ten.

A beautiful and historic county courthouse is centrally located on a downtown hillside, and a historic downtown district features a variety of strong retail and service-based businesses, including a classic sidewalk movie theatre offering the latest releases.

Jackson also boasts a 300-acre industrial park with strong and expanding industrial residents, such as AGCO, Pioneer Seed, Technical Services for Electronics, Accent, Ziegler, Last Deck, HitchDoc, and USF Holland.

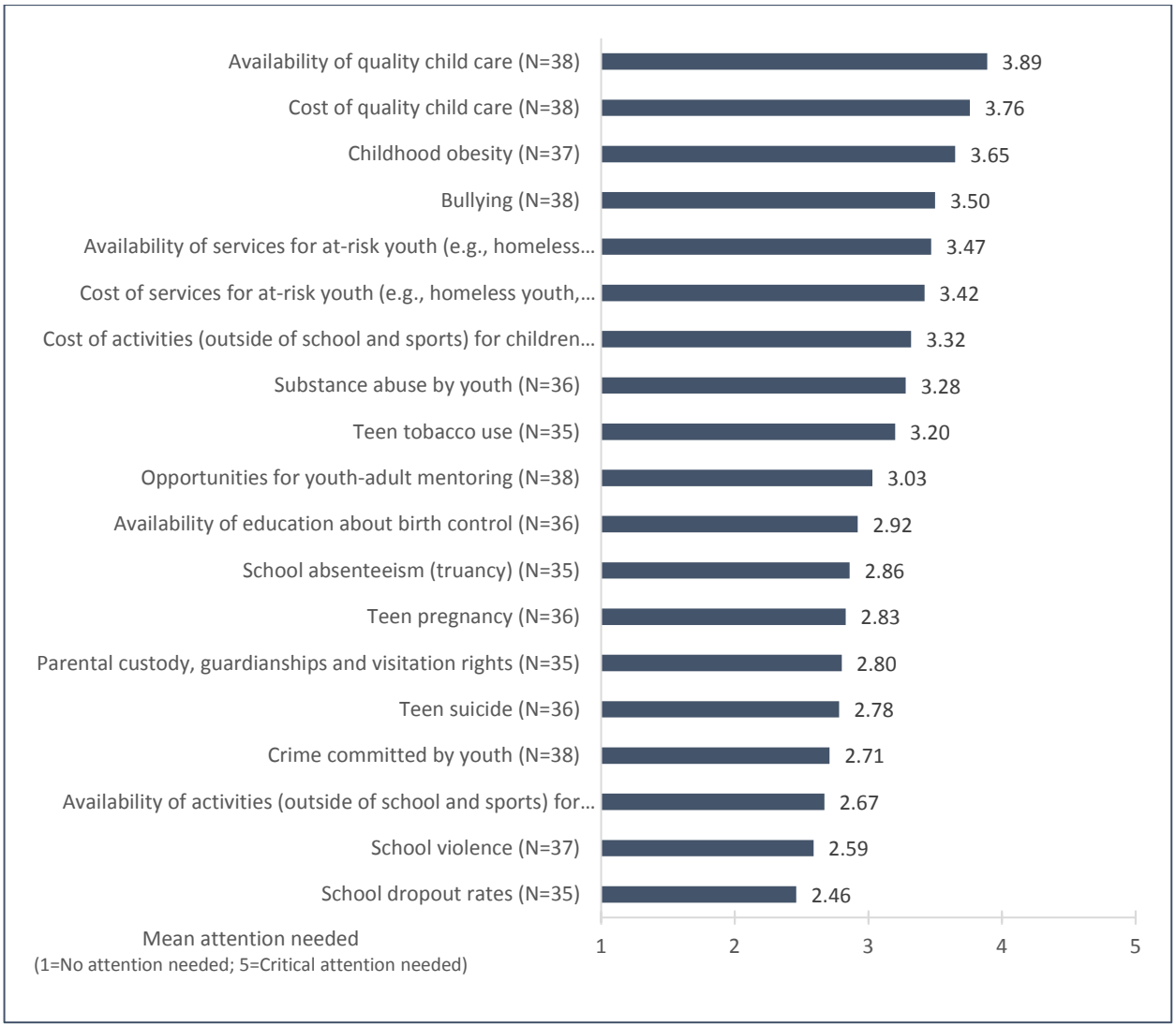
Outdoor enthusiasts will find a city park, a beautiful and expanding biking and walking trail system, a disc golf course, a skate park, baseball and softball complexes, numerous other parks, and fishing opportunities along the river.

Key Findings

Community Health Concerns

The key findings are based on the key stakeholder survey, the resident survey and secondary research. The key stakeholder survey ranked key indicators on a Likert scale with 1 meaning no attention needed and 5 meaning critical attention needed. Survey results ranking 3.5 or above are considered to be high ranking. Sanford is addressing many of the needs that ranked below 3.5; however, the high ranking needs of 3.5 or above are considered for the prioritization process. The resident survey addresses personal health needs and concerns. The secondary research provides further understanding of the health of the community, and in some cases the indicators align with and validate our findings.

Children and Youth: The concern for children and youth is highest for the availability and cost of quality childcare, childhood obesity and bullying.



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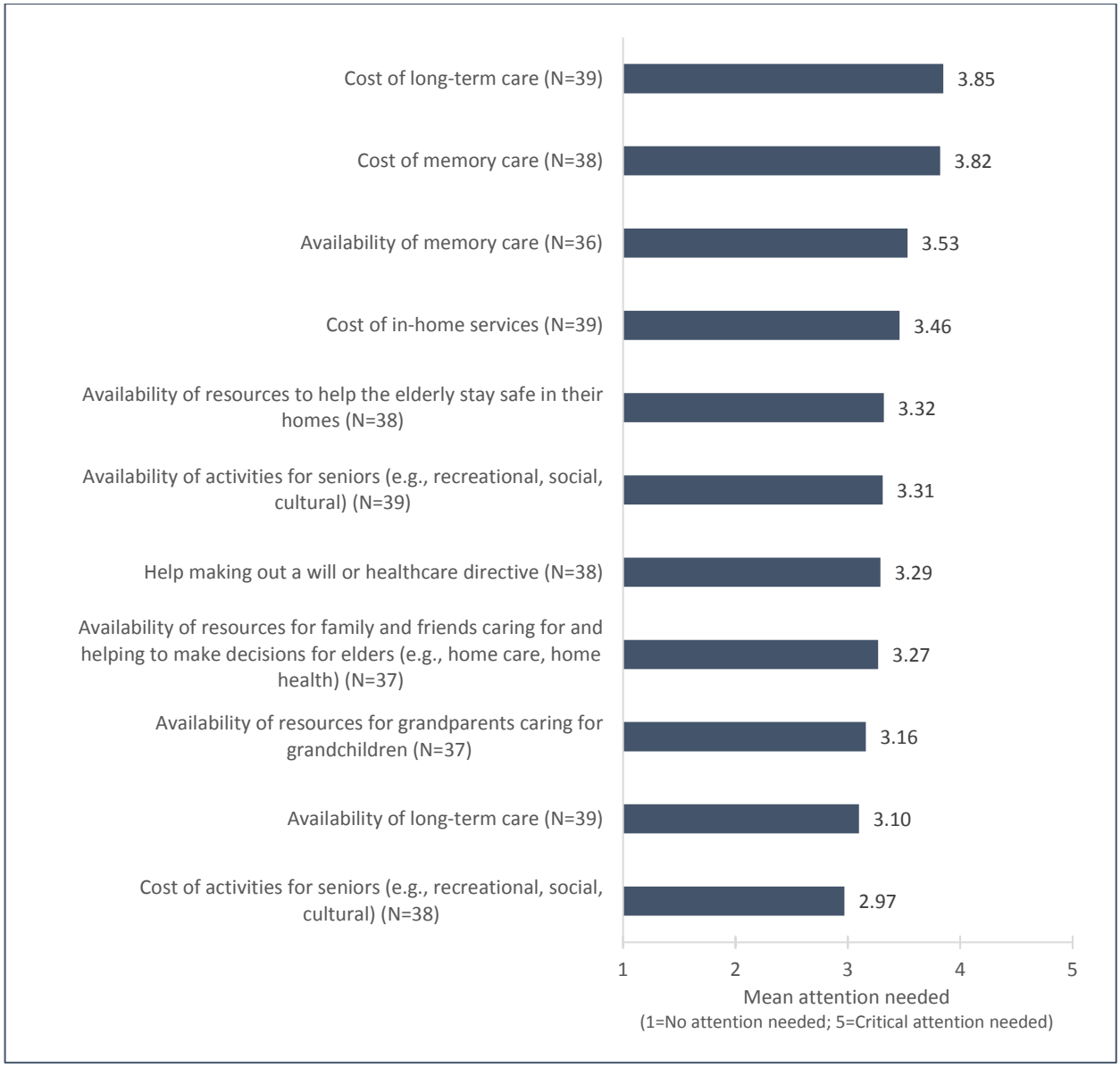
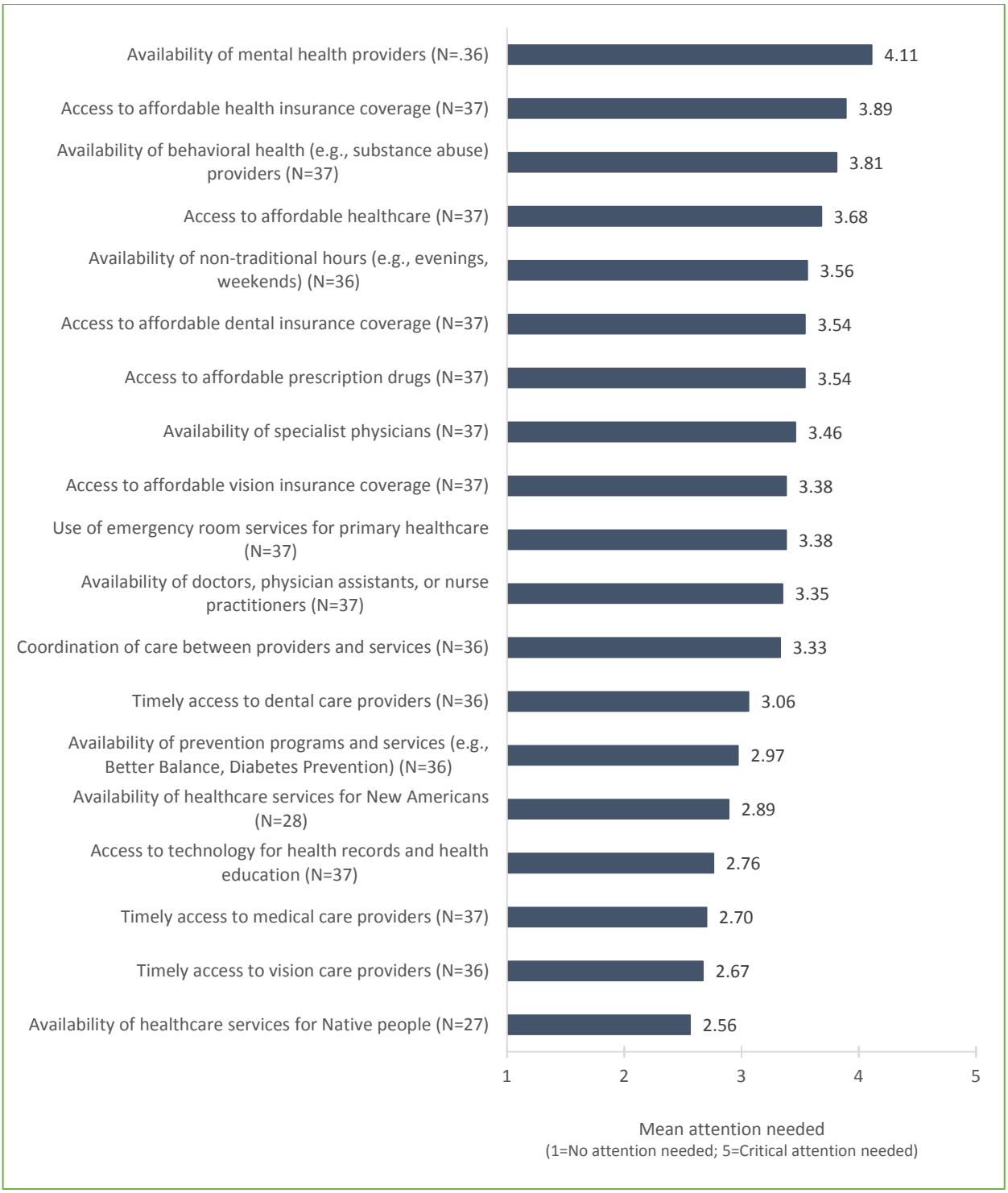
Obesity is a serious concern because it is associated with poorer mental health outcomes, reduced quality of life, and is associated with morbidity and illnesses including diabetes, heart disease, stroke, and some types of cancer.

Aging Population: The cost of long-term care and the cost and availability memory care are top concerns again and were top concerns during the 2016 CHNA cycle.



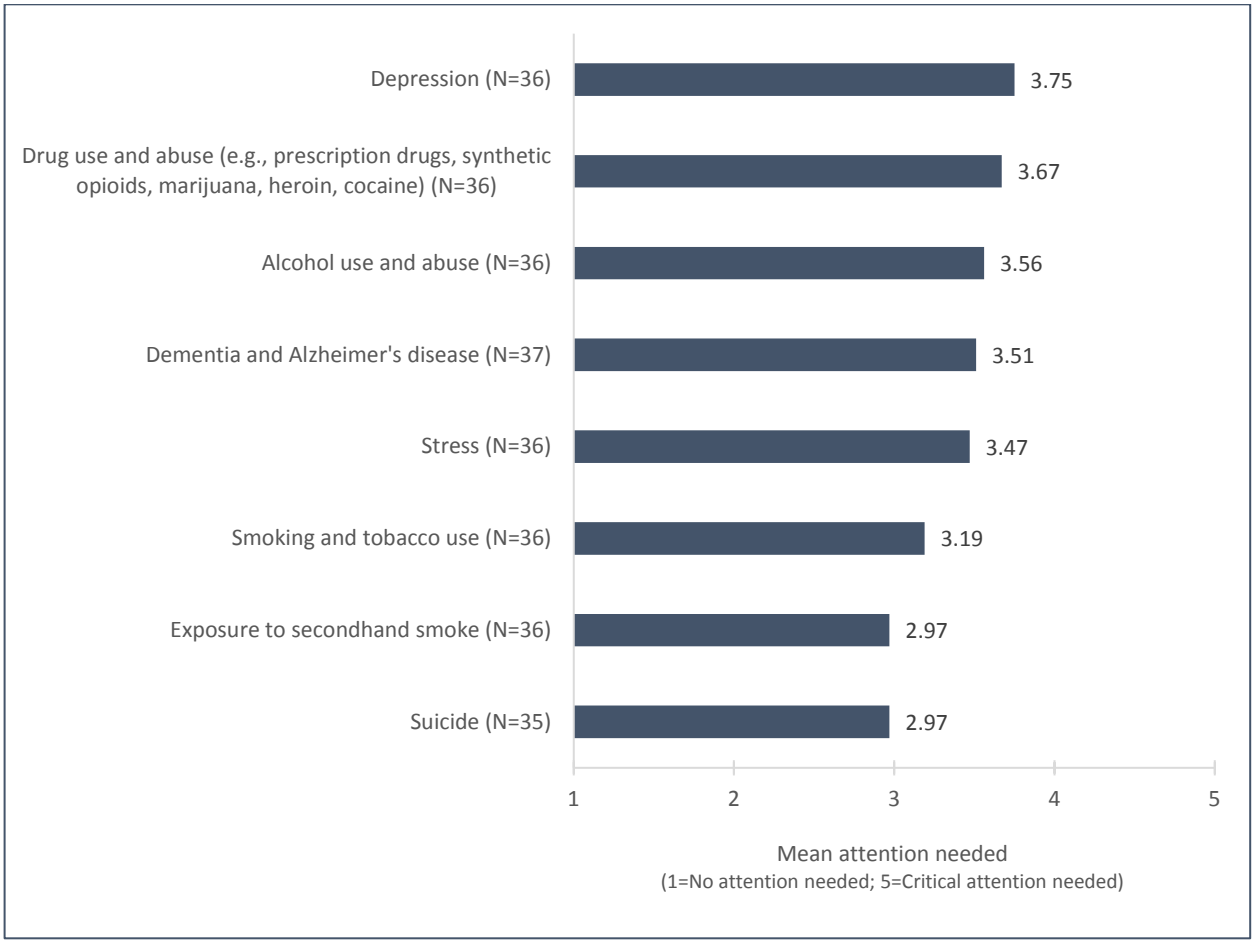
According to the U.S. Health and Human Services Administration on Aging, the cost of long-term care depends on the type and duration of care you need, the provider you use, and where you live. Sanford providers work to help seniors live healthy independent lives. Sanford social workers, case managers, and discharge planners refer patients to area service providers to make certain that patients receive a safe discharge and transition to the appropriate levels of care.

Health Care and Wellness: The availability of mental health and behavioral health providers is ranked very high among the top concerns for the community.



According to the Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, Health Professional Shortage Area (HPSA) designations are used to identify areas and population groups within the United States that are experiencing a shortage of health professionals. The 2016 HRSA report projected that the supply of workers in selected behavioral health professions would be approximately 250,000 workers short of the projected demand by 2025.

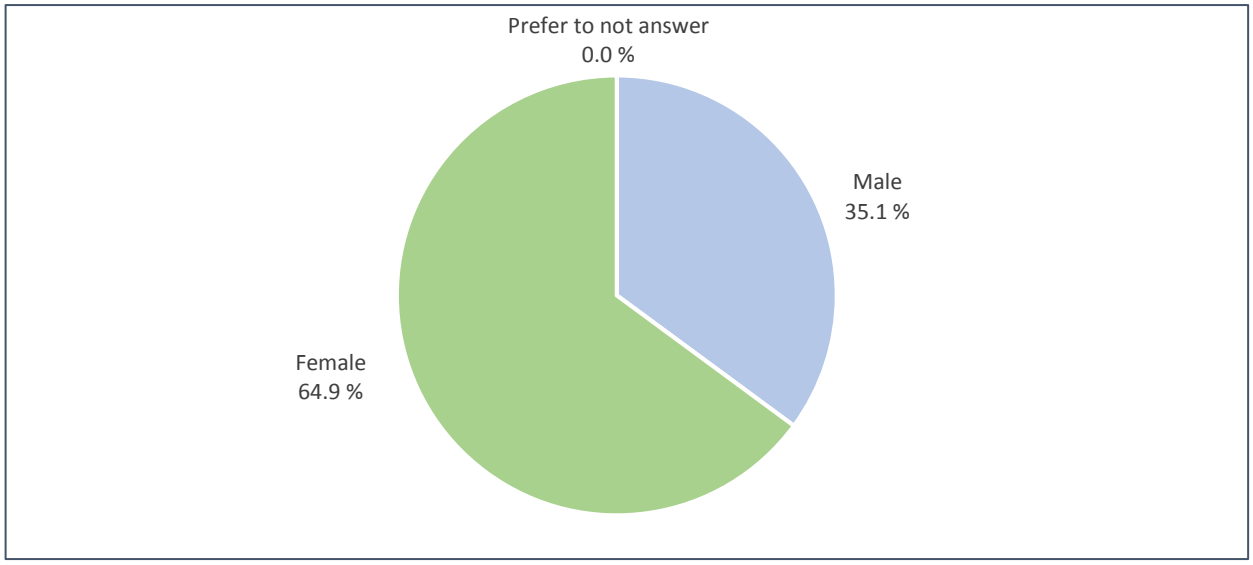
Mental Health and Substance Abuse: Depression, drug use and abuse, stress, alcohol use and abuse and dementia are top concerns for the community.



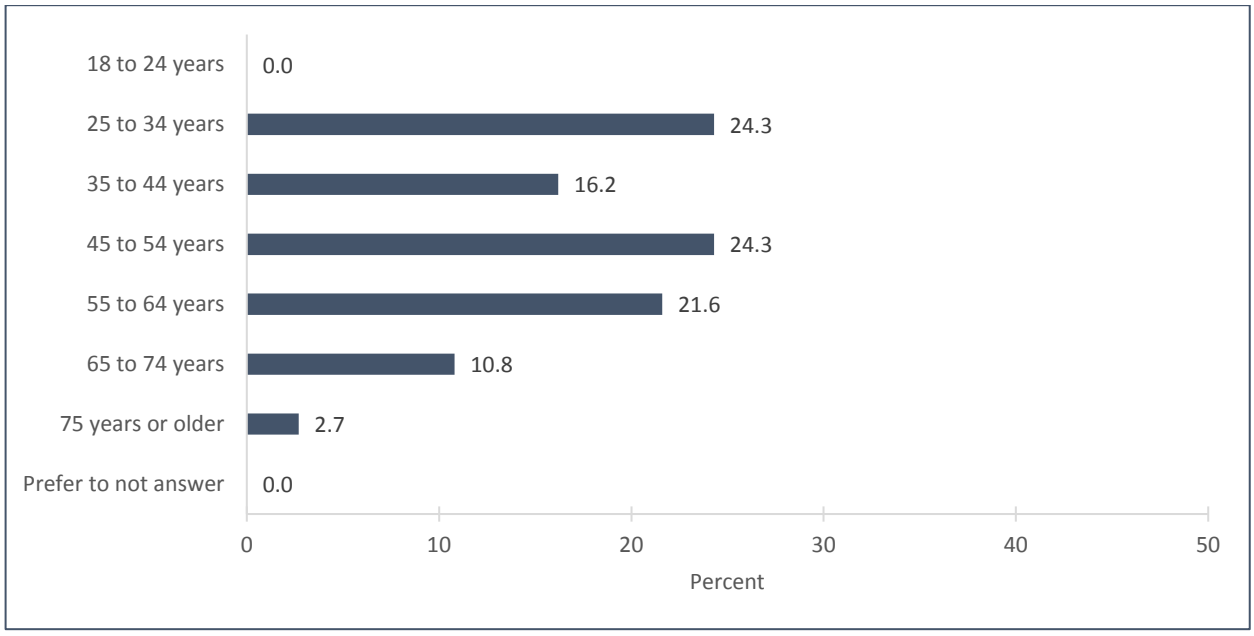
The Substance Abuse and Mental Health Services Administration reports that "Mental and substance use disorders can have a powerful effect on the health of individuals, their families, and their communities. In 2014, an estimated 9.8 million adults age 18 and older in the United States had a serious mental illness, and 1.7 million of whom were age 18 to 25. Also, 15.7 million adults (age 18 or older) and 2.8 million youth (age 12 to 17) had a major depressive episode during the past year. In 2014, an estimated 22.5 million Americans age 12 and older self-reported needing treatment for alcohol or illicit drug use, and 11.8 million adults self-reported needing mental health treatment or counseling in the past year. These disorders are among the top conditions that cause disability and carry a high burden of disease in the United States, resulting in significant costs to families, employers, and publicly funded health systems. By 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide."

Demographic Information for Key Stakeholder Participants

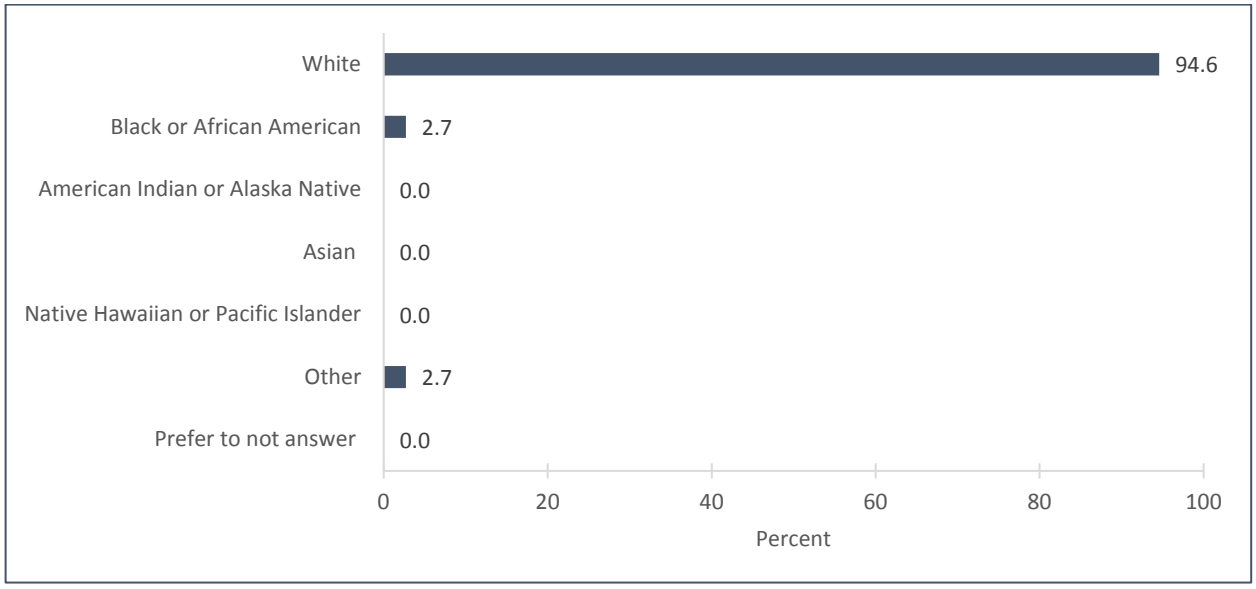
Biological Gender



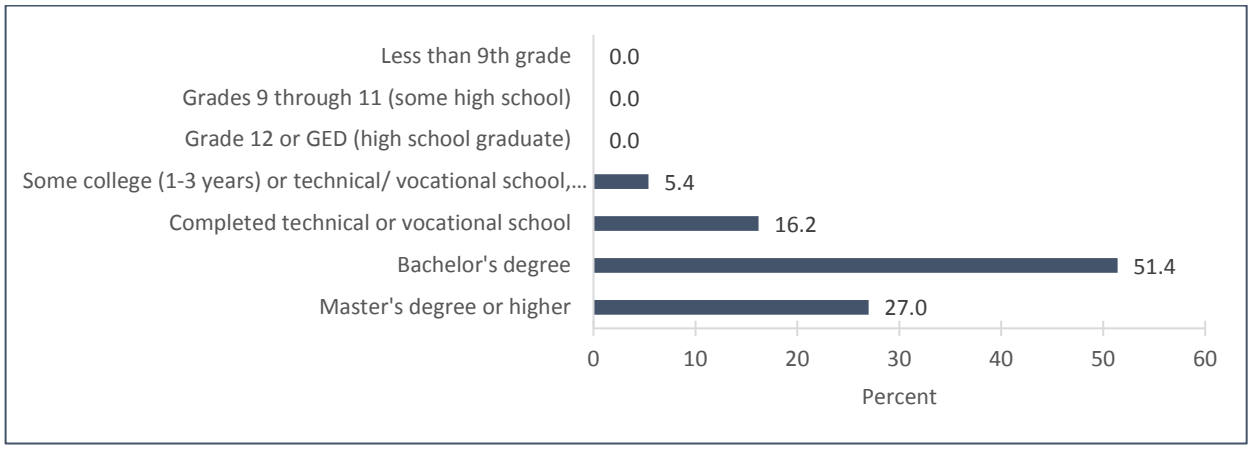
Age of Participants



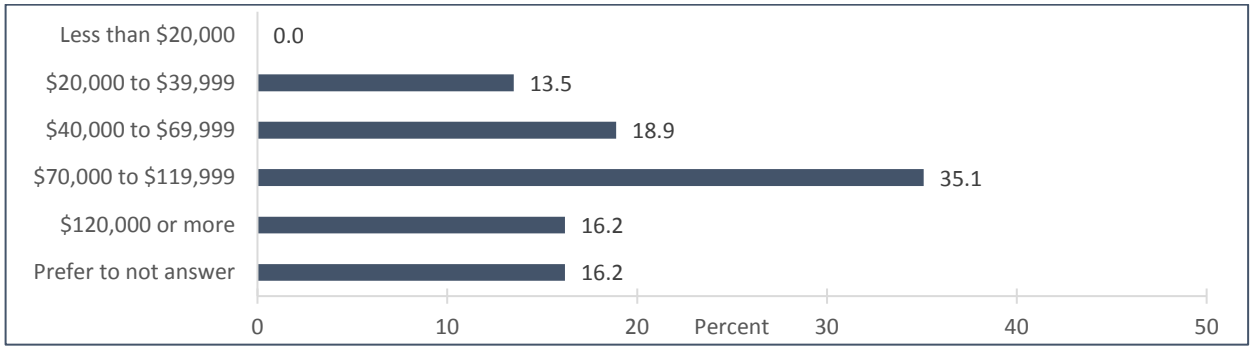
Race of Participants



Highest Level of Education Completed



Annual Household Income of Respondents, from all sources, before taxes



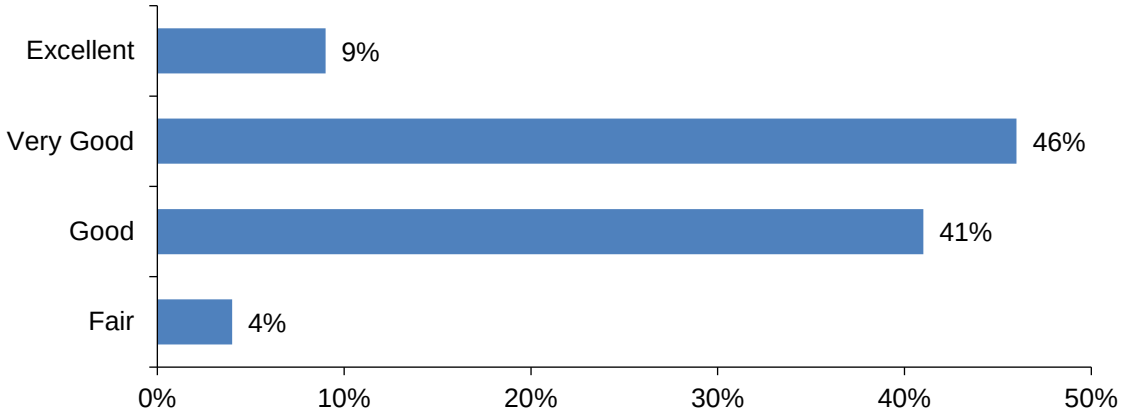
Residents' Health Concerns

Health is personal and it starts in our homes, schools, workplaces, neighborhoods, and communities. Eating well and staying active, not smoking, getting the recommended immunizations and screening tests, and seeing a doctor for routine check-ups can positively influence our health.

The resident survey asks questions specific to the participants' personal health and health behaviors.

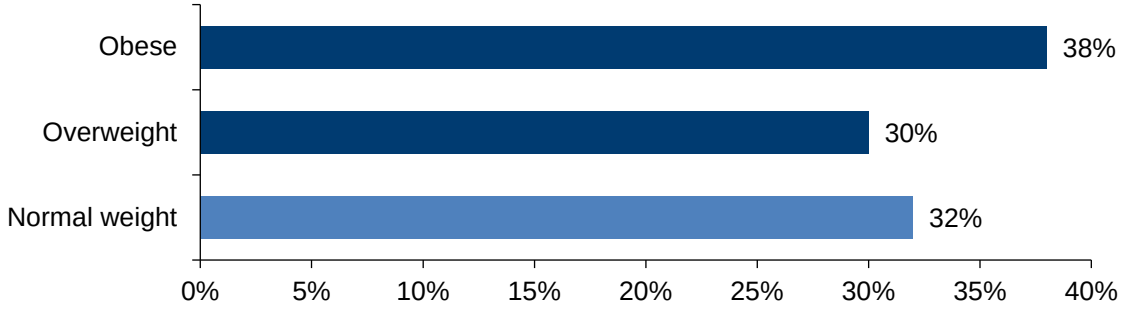
How would you rate your health?

Ninety-six percent of survey participants rated their health as good or better.



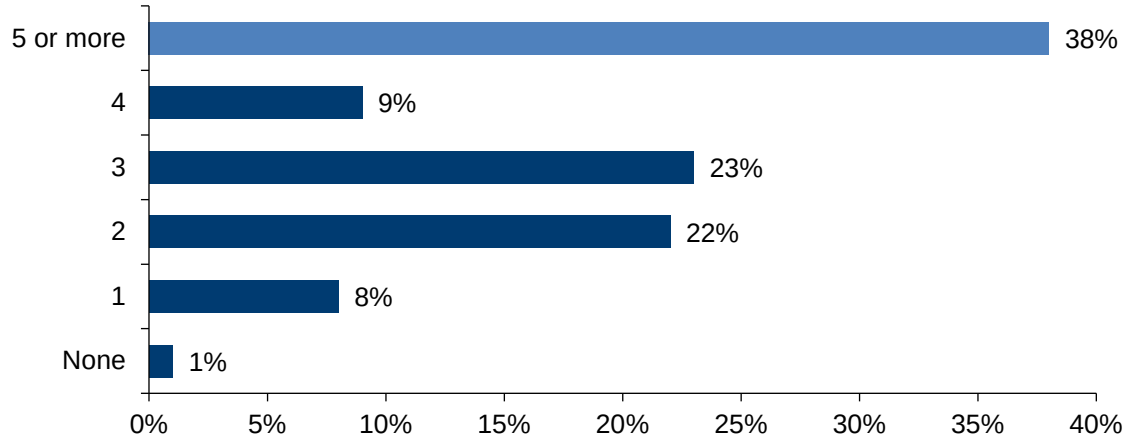
Body Mass Index

Sixty-eight percent of participants are overweight or obese.



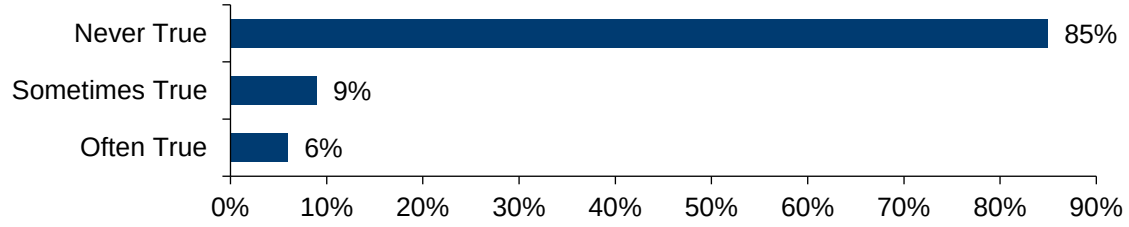
Total daily servings of fruits and vegetables

Only 38% are getting their recommended five or more a day servings of fruits and vegetables.



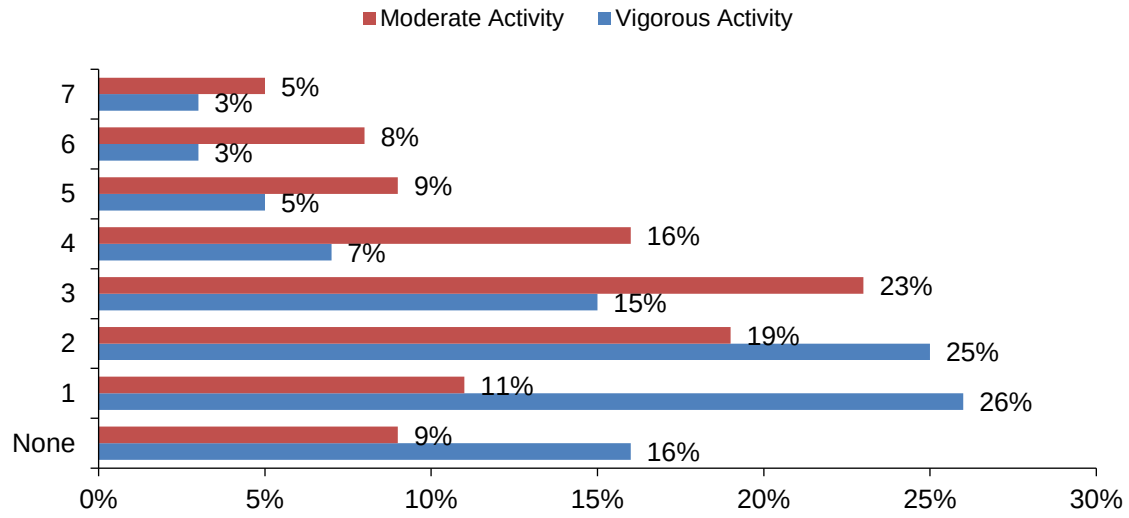
Food did not last until there was money to buy more

Fifteen percent of survey participants run out of food before they have money to purchase more.



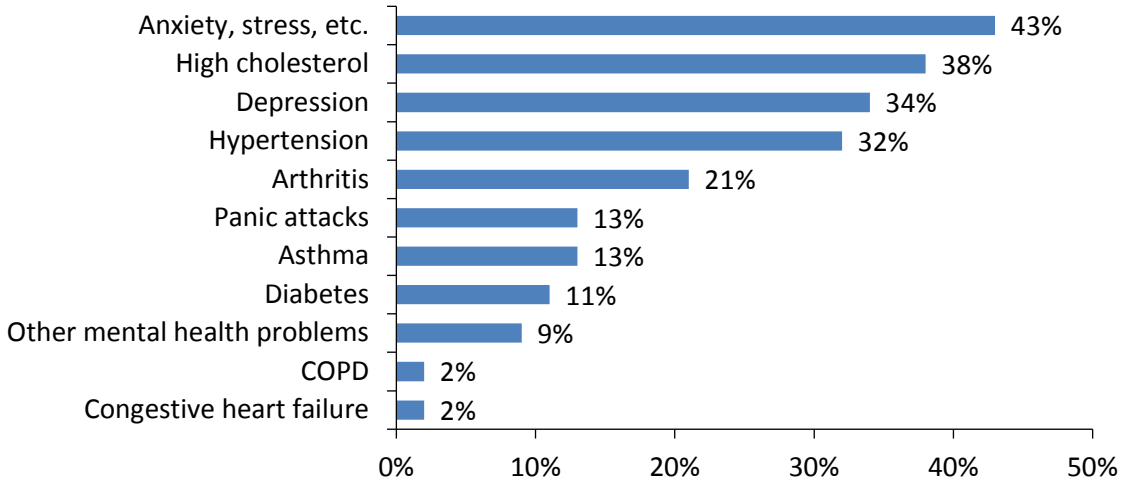
Days per week of physical activity

Sixty-one percent of survey participants have moderate physical activity three or more times each week.



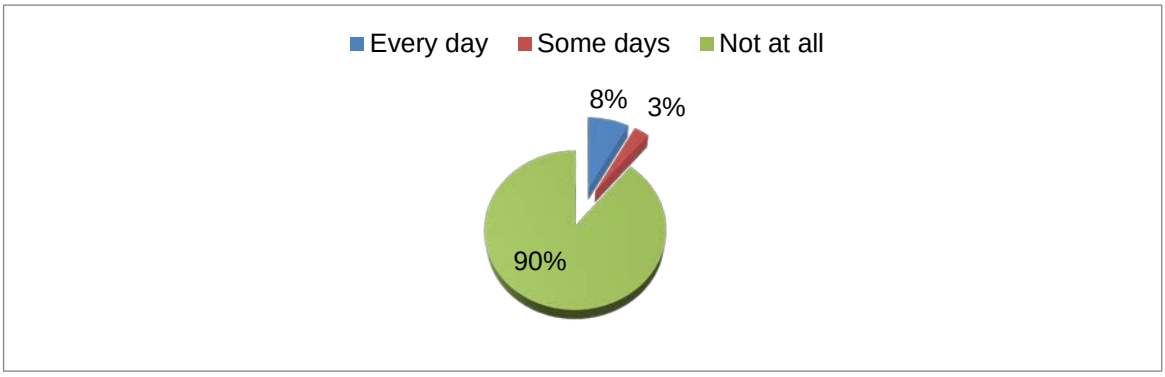
Past diagnosis

Depression and anxiety rank very high among survey participants. High cholesterol, hypertension, and arthritis are the top chronic disease issues among survey participants.



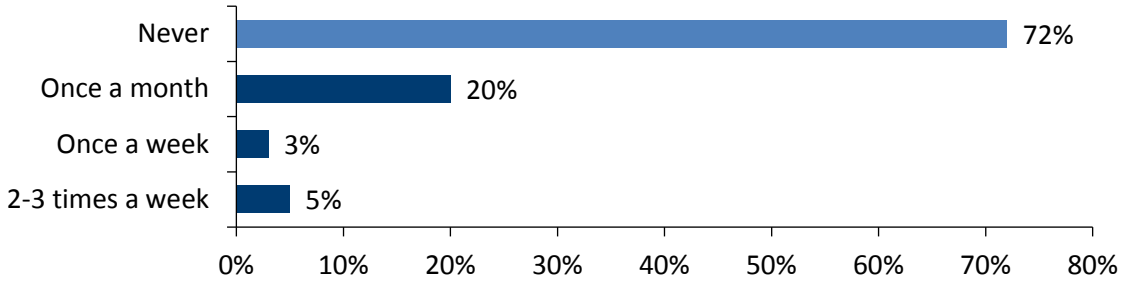
Tobacco use

Eleven percent of survey participants currently smoke cigarettes. Sixteen percent smoke cigarettes every day.

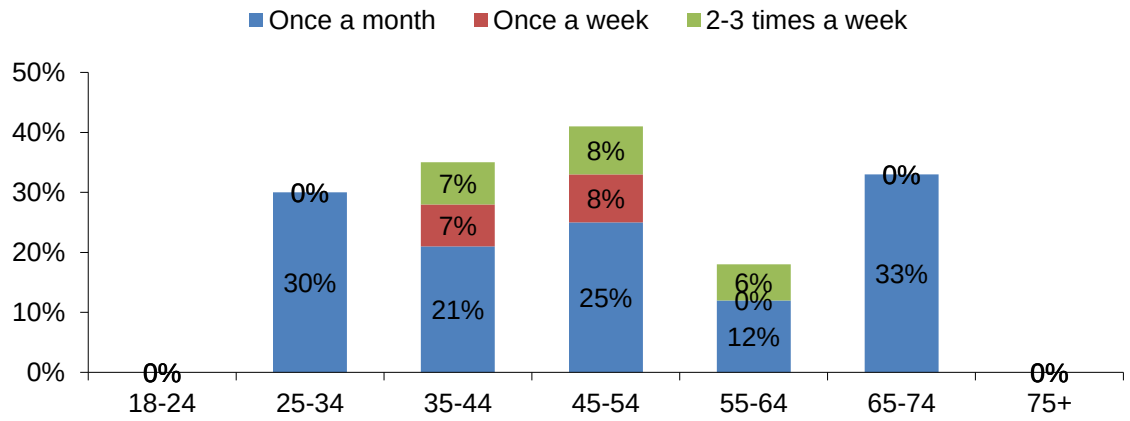


Binge drinking

Twenty-eight percent of survey participants self-report that they binge drink at least once per month and twenty percent binge at least weekly.

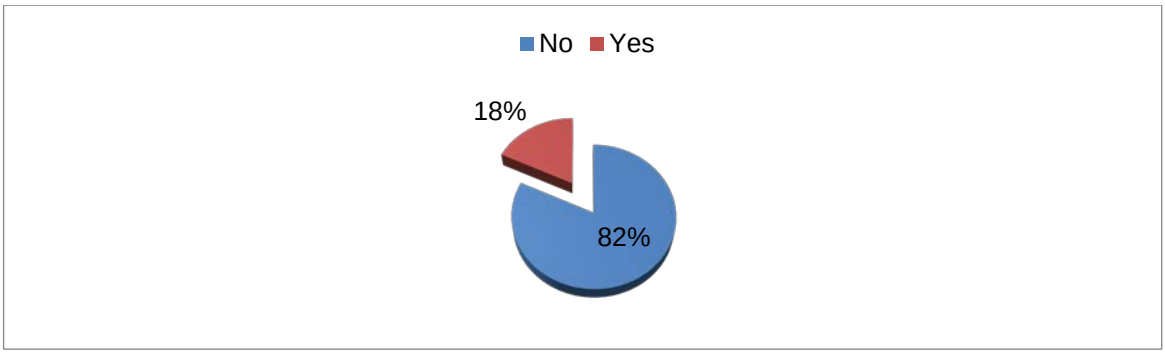


Binge drinking by age



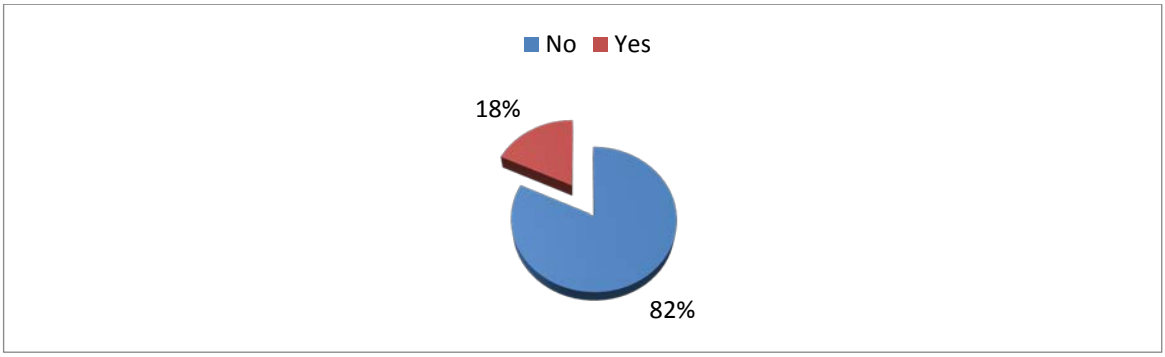
Has alcohol had a harmful effect on you or a family member in the past two years?

Eighteen percent of survey participants report that alcohol has had a harmful effect on themselves or a family member within the past two years.



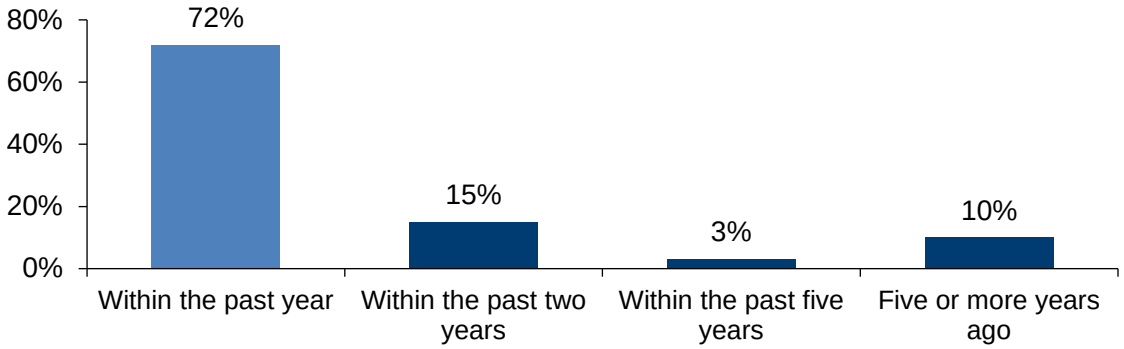
Do you have drugs in your home that are not being used?

Eighteen percent have drugs in their home that they are no longer using.



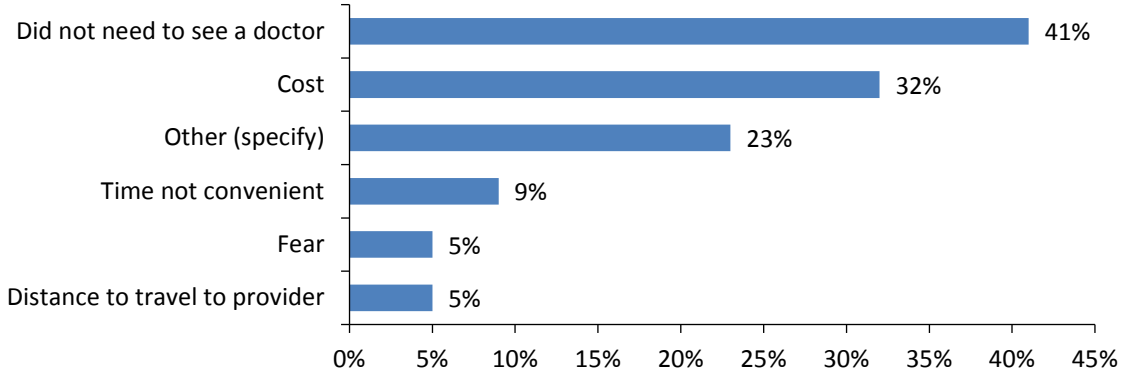
How long has it been since you visited a doctor or health care provider for a routine check-up?

Twenty-eight percent of survey participants have not had a routine check-up in more than a year.



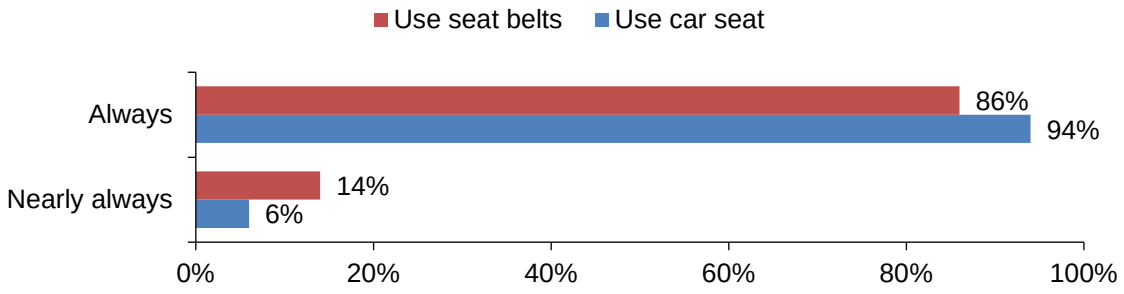
Barriers to routine check-up

Forty-one percent of survey participants stated that they did not need to see a doctor in the past year and thirty-two percent stated that cost was a barrier.



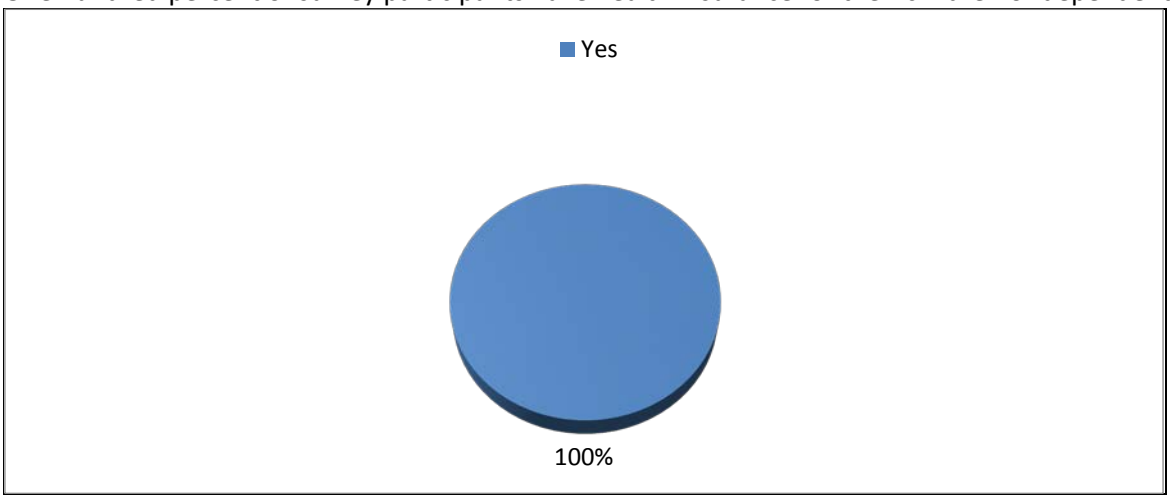
Child car safety

Fourteen percent do not always use seat belts for their children and six percent do not always use car seats.



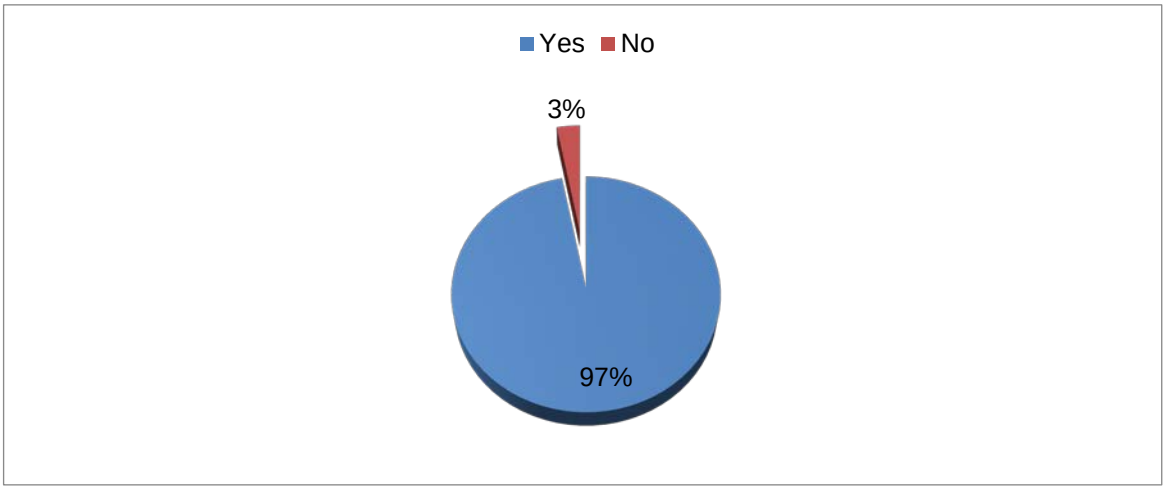
Do you have health care coverage for your children or dependents?

One hundred percent of survey participants have health insurance for their children or dependents.



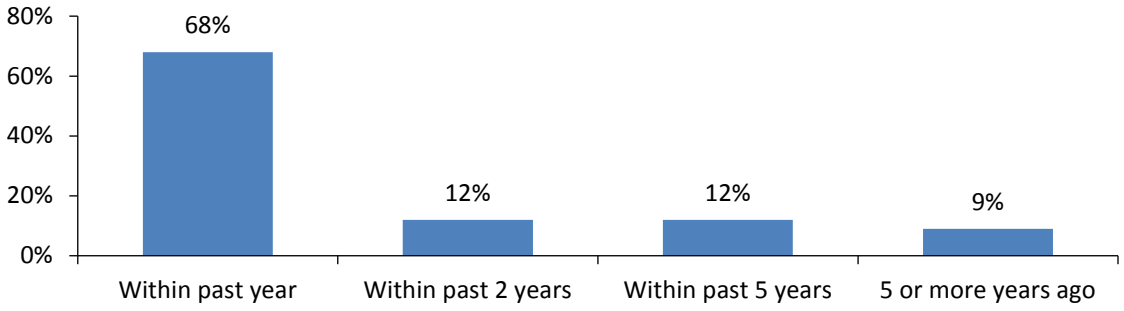
Do you currently have any kind of health insurance?

Only 3% of survey participants do not have health insurance.



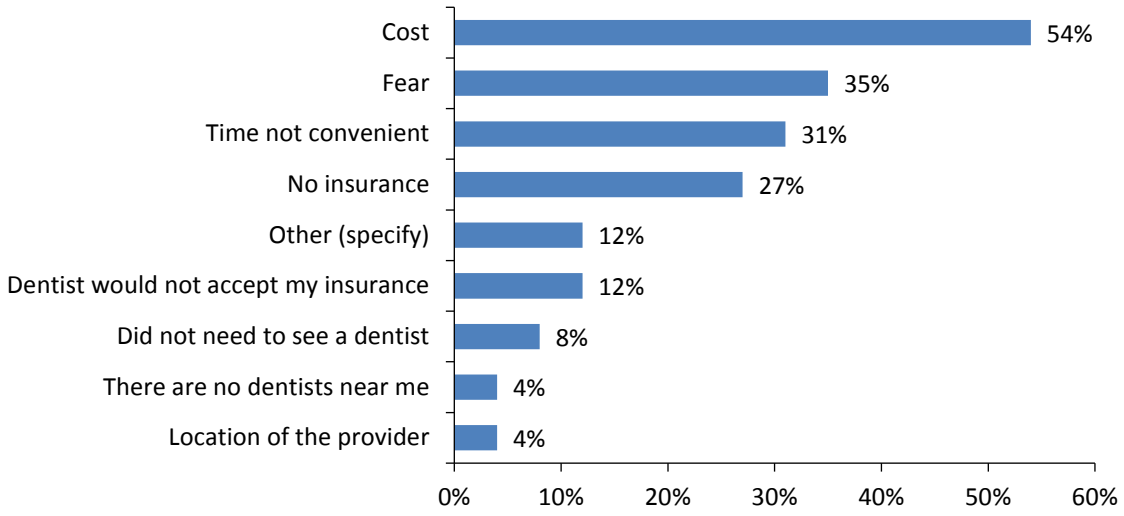
How long has it been since you visited a dentist?

Thirty-three percent of survey participants have not visited a dentist in more than a year.



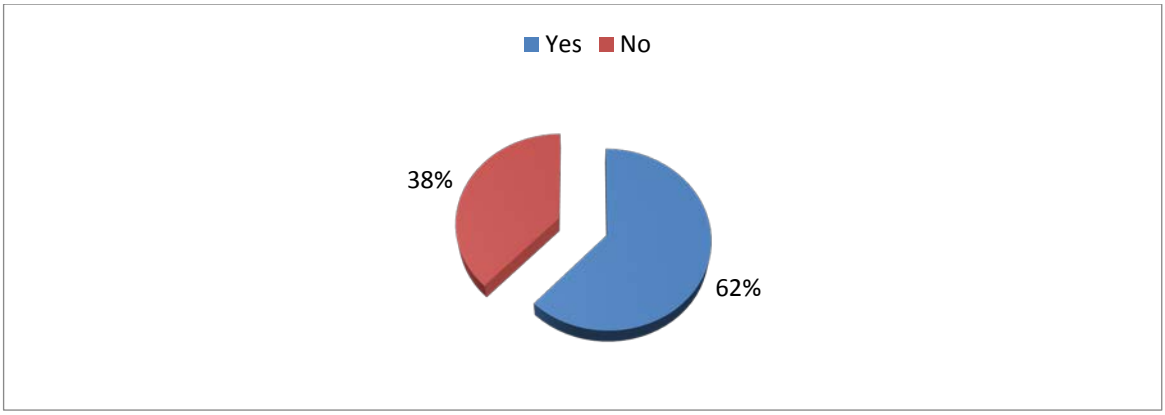
Barriers to visiting a dentist

Cost, fear, convenient time and no insurance are reported barriers to visiting a dentist.



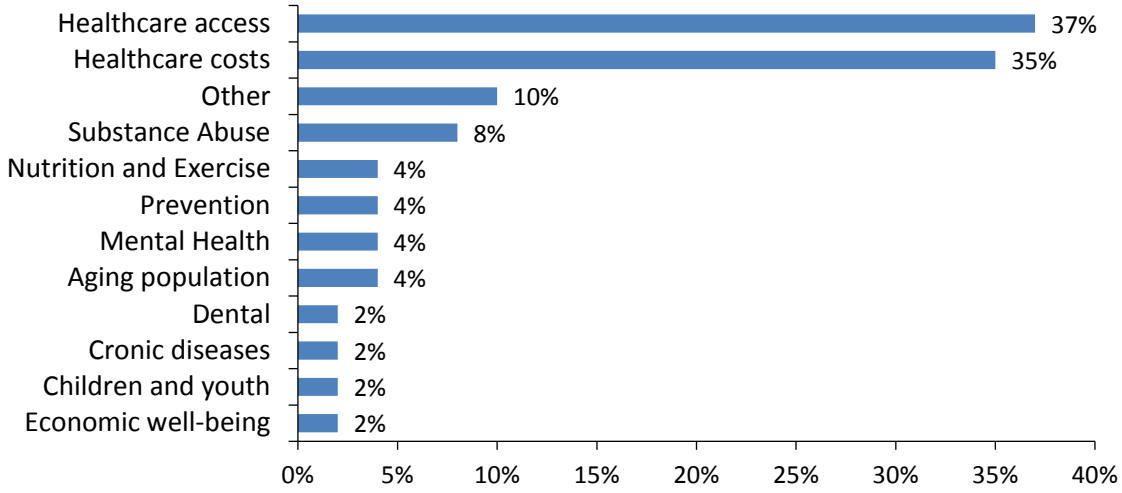
Do you have any type of dental insurance coverage?

Thirty-eight percent of survey participant do not have dental insurance.



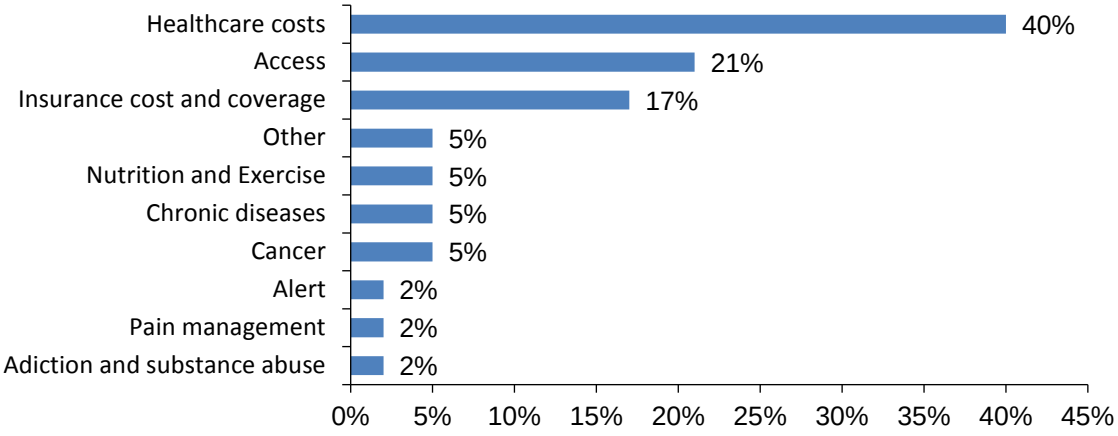
What are the most important community issues for you?

Health care access and the cost of health care are high concerns for survey participants. Substance abuse is the second highest concern.



What are the most important community issues for your family?

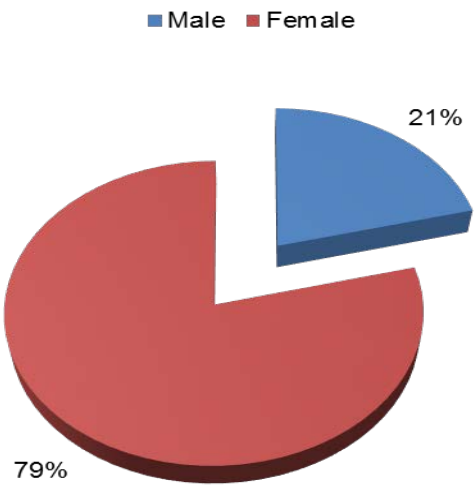
When asked what is the most important issue for the participant's family, health care costs, access and insurance cost and coverage were the top concerns.



Demographic Information for Community Resident Participants

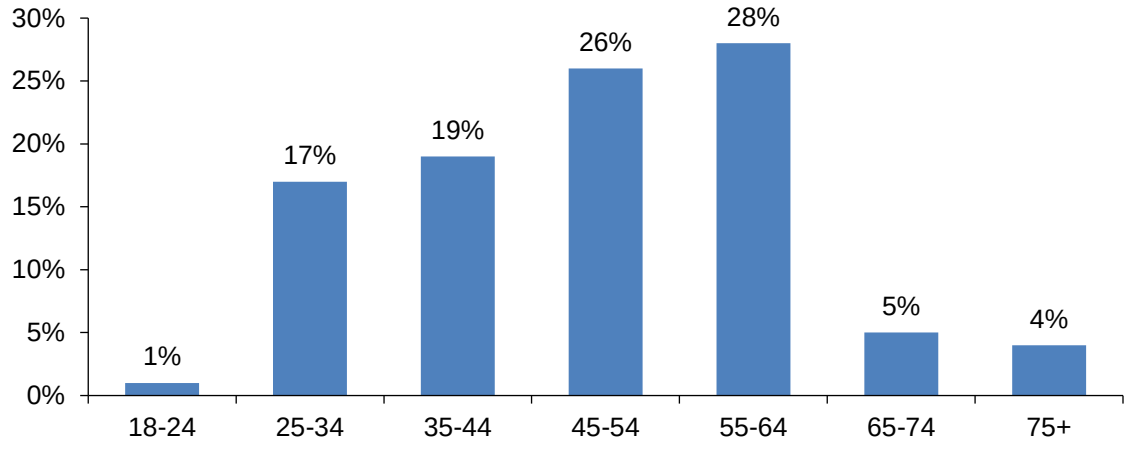
Biological Gender

Only 21% of the survey participants were male.

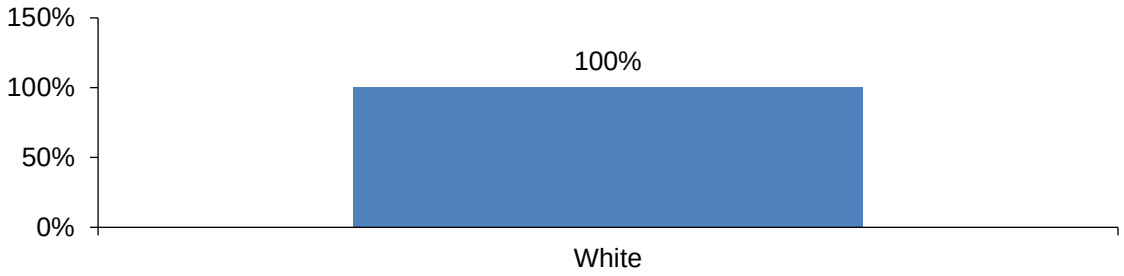


Age

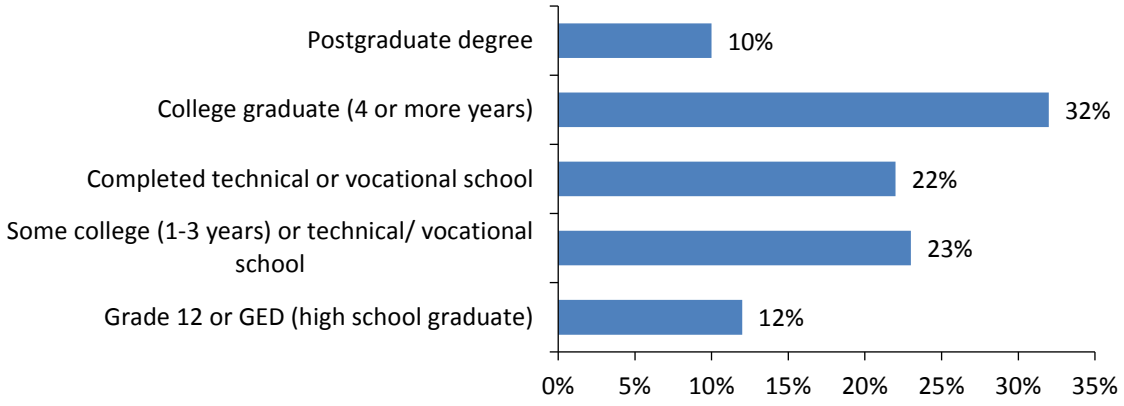
Every age group was represented among the survey participants; however, only 1% fell into the 18-24 age group.



Ethnicity

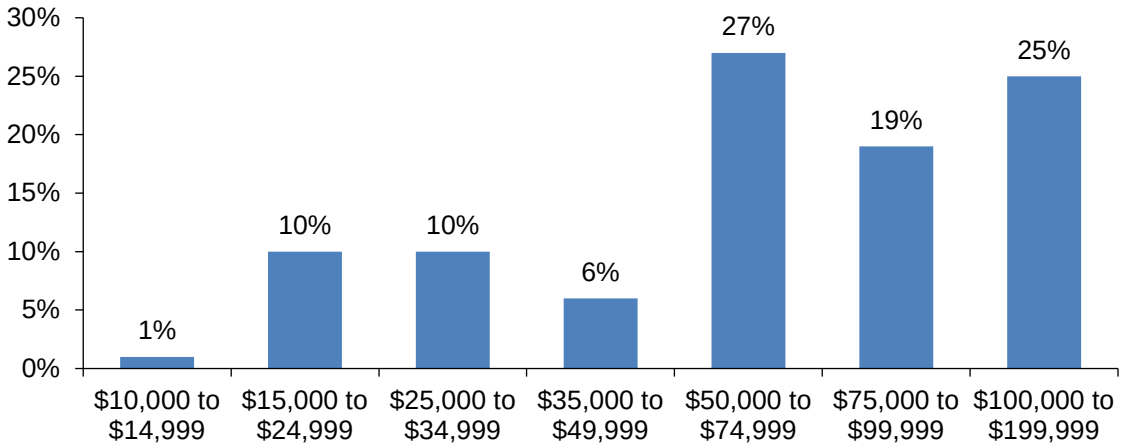


Education Level



Total Annual Household Income

Eleven percent of survey participants have an annual household income at or below the Federal Poverty Level (FPL) for a family of four.



Secondary Research Findings

Census Data

Population of Jackson County, Minnesota	9,944
% below 18 years of age	21.9
% 65 and older	20.9
% White – non-Hispanic	93.2
American Indian	0.4
Hispanic	3.1
African American	0.7
Asian	1.7
% Female	48.9
% Rural	69.1

County Health Rankings

	Jackson County	State of Minnesota	U.S. Top Performers
Adult smoking	15%	15%	14%
Adult obesity	29%	27%	26%
Physical inactivity	20%	20%	20%
Excessive drinking	22%	23%	13%
Alcohol related driving deaths	20%	30%	13%
Food insecurity	9%	10%	10%
Uninsured adults	5%	6%	7%
Uninsured children	3%	3%	3%
Children in poverty	12%	13%	12%
Children eligible for free or reduced lunch	37%	38%	33%
Diabetes monitoring	90%	88%	91%
Mammography screening	77%	65%	71%
Median household income	$58,800	$65,100	$65,600

Health Needs and Community Resources Identified

The Internal Revenue Service requires that a community health needs assessment include an inventory of resources that are available to address the unmet needs. This document is referred to as an asset map. Sanford Health conducted asset mapping by reviewing the primary and secondary research and identifying the unmet needs from the various surveys and data sets. Each unmet need was researched to determine what resources are available in the community and county to address the needs. The asset map was reviewed by Sanford leadership and by community key stakeholders to validate the assets. The asset map helped to identify gaps in services. Once gaps were determined the key stakeholder group proceeded to the prioritization discussion and multi-voting exercise. The group was asked to prioritize the top two concerns that would be further developed into implementation strategies.

The process executed in the work was based on the McKnight Foundation model "Mapping Community Capacity" by John L. McKnight and John Kretzmann, Institute for Policy Research at Northwestern University.

The asset mapping process identified needs from the following:

- Key stakeholder survey
- Resident survey
- Facilitated discussion by the key stakeholders
- Secondary research
- Community resources that are available to address the needs

Please see the asset map in the Appendix.

Prioritization Worksheet

A multi-voting methodology was implemented to determine what top priorities would be further developed into implementation strategies. Key community stakeholders met with medical center leaders to discuss community needs and complete the multi-voting exercise. The following needs were brought forward for prioritization:

Criteria to Identify Priority Problem

- Cost and/or return on investment
- Availability of solutions
- Impact of problem
- Availability of resources (staff, time, money, equipment) to solve problem
- Urgency of solving problem (Ebola or air pollution)
- Size of problem (e.g. # of individuals affected)

Criteria to Identify Intervention for Problem

- Expertise to implement solution
- Return on investment
- Effectiveness of solution
- Ease of implementation/maintenance
- Potential negative consequences
- Legal considerations
- Impact on systems or health
- Feasibility of intervention

Health Indicator/Concern
Economic Well-Being • 15% of residents report running out of food before having money to buy more
Children and Youth • Availability of quality childcare 3.89 • Cost of quality childcare 3.76 • Childhood obesity 3.65 • Bullying 3.50
Aging Population • Cost of ling-term care 3.85 • Cost of memory care 3.82 • Availability of memory care 3.53
Safety • 18% report that they have drugs in their home that they are not using • 14% do not always use seat belts
Health Care Access • Availability of mental health providers 4.11 • Access to affordable health insurance coverage 3.89 • Availability of behavioral health 3.81 • Access to affordable health care 3.68 • Availability of non-traditional hours 3.56 • Access to affordable dental insurance coverage 3.54 • Access to affordable prescription drugs 3.54
Mental Health and Substance Abuse • Depression 3.75 • Drug use and abuse 3.67 • Alcohol use and abuse 3.56 • Dementia and Alzheimer's disease 3.51 • 43% report that they have a diagnosis of anxiety/stress • 34% report that they have a diagnosis of depression • 10% currently smoke cigarettes • 38% self-report binge drinking at least 1X/month (5% at least 2-3X/week)
Wellness • 38% report that they have a diagnosis of high cholesterol • 32% report that they have a diagnosis of hypertension • 21% report that they have a diagnosis of arthritis • 38% of residents report that they are obese • 30% report that they are overweight • 62% of residents do not get the recommended 5 or fruits/vegetables each day • 39% are not getting moderate exercise at least 3X/week • 28% have not had a routine checkup in more than 1 year • 46% have not had a flu shot this year • 33% have not seen their dentist in more than 1 year

Please see the multi-voting prioritization worksheet in the Appendix.

Implementation Strategies

How Sanford Jackson is Addressing the Needs

Sanford is addressing all of the assessed needs that fall within our scope of work. In some cases, the need is one where we do not have the expertise to adequately address the need. However, Sanford leaders will communicate the findings to community experts and leaders.

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
ECONOMIC WELL BEING	
Run out of food before they have money to buy more – 15%	• The Food Rx Program is a referral program for our patients which was developed in collaboration with the RN Health Coach and local resource directors as a means to provide education to patients in need of food assistance. The Jackson Healthcare Foundation grant funds supported the initiation of the community-wide program. Resources that patients are referred to include: Supplemental Nutrition Assistance Program (SNAP), Women, Infants, Children (WIC), Jackson Food Shelf Inc., Lakefield Food Shelf, Heron Lake/Okabena Food Shelf, Nutrition Assistance Program for Seniors (NAPS), Free/Reduced School Meals, Food 4 Kids Backpack Program, JCC Middle School Food Pantry, Senior Dining/Meals on Wheels, and Ruby's Pantry. • The Sanford RN Health Coach is active member on the Jackson Food Shelf Board and UCAP Hunger Team. The Leadership Team and Sanford Jackson also volunteer with Jackson Food Shelf, Ruby's Pantry, Senior Dining/Meals on Wheels Delivery, and the Food 4 Kids Back Pack Program. • Financially, we support the Jackson County Food 4 Kids and recently, the Jackson Food Shelf, with monetary support to purchase their building. A food shelf is needed for residents of the city of Jackson.
CHILDREN & YOUTH	
Availability of quality childcare	Sanford Jackson will not directly address the availability of quality childcare; however, Jackson Economic Development and Jackson Area Chamber have completed and are reviewing a childcare needs survey. Findings from the Community Health Needs Assessment were shared at community stakeholder meeting on June 26, 2018.
Cost of quality childcare	Sanford Jackson will not directly address the availability of quality childcare; however, Jackson Economic Development and Jackson Area Chamber have completed and are reviewing a childcare needs survey. Findings from the Community Health Needs Assessment were shared at community stakeholder meeting on June 26, 2018.
Childhood obesity	• Now in its tenth year, Sanford is the title sponsor for the *Sanford Tri for Health*. The event welcomes youth age 4-14 to participate in an age-appropriate triathlon (swim, bike, run). Sanford has also made the commitment to activity for area youth by our financial commitment to construction of the Jackson Splash Pad in the city of Jackson. Financially, Sanford supports other activities for youth in our area including 4-H, Easter egg hunts, library programs, Sports Boosters, etc. • Sanford *fit* Kids curriculum is distributed throughout the year at various community events such as Family Fun Night, Jackson summer parade, and the school's free summer lunch program. • Sanford Jackson has representation with the SHIP Community Leadership Team (Community Wellness Partners), which is a group of community population health advocates focused on making healthier lifestyle choices more accessible

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
	in our community. Ultimately, the goal is to improve health through increased physical activity, healthier eating, and less use or exposure to tobacco products. Sanford Jackson collaborates with SHIP to encourage, support healthier living, and address health disparities through evidenced-based strategies. Sanford Jackson also participates in the Community Action Team which is a group of community organizations focusing on providing adequate services and opportunities for people, especially addressing social determinants of health. • Sanford Jackson's RN Health Coach also accepts referrals or self-made appointments for goal setting and health behavior discussion with families, parents and children.
Bullying	Sanford Health will convey these findings to school leadership along with future support of public service announcements on the topic.
AGING POPULATION	
Cost of long-term care	Sanford Jackson will not directly have an impact on cost of long-term care. Sanford Health provides a discharge planner and RN Health Coach to work with patients, families and other facilities for appropriate placement and use of resources. Through our relationships with Des Moines Valley Health and Human Services, home health and the area nursing homes, we can assist with coordination of hospice, home medical, home health and nursing home services.
Cost of memory care	Sanford Jackson will not directly have impact on cost and availability of memory care; however, Sanford Health provides a discharge planner and RN Health Coach to work with patients, families and other facilities to address these issues.
Availability of memory care	Sanford Jackson will not directly have impact on cost and availability of memory care; however, Sanford Health provides a discharge planner and RN Health Coach to work with patients, families and other facilities to address these issues.
SAFETY	
Have drugs in their home that are not being used – 18%	Sanford Jackson provides mandated reporter training annually to their staff. We facilitate the Jackson Behavioral Health Task Force, which has a meeting each quarter with a focus on substance abuse and behavioral health crisis prevention. Recently, the Jackson County Sherriff provided opioid use education to providers and staff. Sanford Jackson's Senior Director represents the facility on the Addiction Prevention Coalition, which is a community-wide partnership.
Do not always use seat belts – 14%	Sanford shared results with public health and law enforcement and will support any future initiatives. Sanford providers address appropriate seat belt use at well child appointments.
HEALTH CARE ACCESS	
Availability of mental health providers	We facilitate the Jackson Behavioral Health Task Force, which has a meeting each quarter with a focus on substance abuse and behavioral health crisis prevention. Cooperation with Southwestern Mental Health Center for crisis intervention and referrals has led to a decrease in patients discharged from emergency room to an inpatient behavioral health facility over the past year. In addition, we have a Psychiatrist available to see patients twice a month in our Jackson clinic. Sanford Jackson offers their patients appointments with mental health providers locally and in surrounding communities to ensure a quicker response time when possible. Sanford Jackson has offered psychiatry services via telemedicine appointments when they are available in the Sanford network. Sanford Jackson patients are encouraged to take advantage of employer benefits that may cover counseling sessions or phone counseling.

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
Access to affordable health insurance coverage	Hospital Presumptive Eligibility and Sanford Financial Assistance programs are available for uninsured and under-insured patients.
Availability of behavioral health	We facilitate the Jackson Behavioral Health Task Force, which has a meeting each quarter with the focus on substance abuse and behavioral health crisis prevention. Cooperation with Southwestern Mental Health Center for crisis intervention and referrals has led to a decrease over the past year in patients discharged from the emergency room to an inpatient behavioral health facility. In addition, we have a Psychiatrist available to see patients twice a month in our Jackson clinic.
Availability of non-traditional hours	Sanford On Call offers three convenient ways for patients to get the care they need: • Patients can walk in to our clinics • Call in after hours and on weekends to My Sanford Nurse • Log into My Sanford Chart for video and e-visits or to send messages to their provider
Access to affordable dental insurance coverage	Sanford Jackson will not directly have an impact on affordable dental insurance coverage; however, our providers can refer to Open Door HealthCare Center or area dentists.
Access to affordable prescription drugs	Sanford Jackson will not directly have an impact on affordable prescription drugs; however, providers can refer patients to prescription assistance programs or co-pay cards. Referrals are also made to Human Services for financial assistance.
MENTAL HEALTH & SUBSTANCE ABUSE	
Depression	• Sanford Jackson follows Sanford depression standard practice guidelines. The PHQ-9 is a patient health questionnaire screening tool that is administered to every patient annually or more frequently as appropriate according to workflow. Providers and care team members follow the standard practice guidelines for treatment and follow up expectations. • Sanford Jackson has maintained a close relationship with Southwestern Mental Health Center's crisis team and refers patients to local counselors or specialists as needed. • Sanford Jackson facilitates a community behavioral health task force to address crisis prevention and awareness of mental health disorders such as depression.
Drug use & abuse	We facilitate the Jackson Behavioral Health Task Force, which meets quarterly with a focus on substance abuse and behavioral health crisis prevention. Cooperation with Southwestern Mental Health Center for crisis intervention and referrals has led to a decrease in patients discharged over the past year from the emergency room to an inpatient behavioral health facility. In addition, we have a Psychiatrist available to see patients twice a month in our Jackson clinic. In addition, Sanford Jackson was the host site for a *Living Well with Chronic Pain* course and we have provided education to the community in regards to the Medication Take Back Program, which is available at the County Law Enforcement Center.
Alcohol use & abuse	• Referral as needed. • Radio and newspaper sponsorships – education on the risks of drinking and driving.
Dementia & Alzheimer's Disease	Sanford Health will convey these findings to community health partners.
Diagnosis of anxiety/stress – 43%	Sanford Health will convey these findings to the Integrated Behavioral Health Task Force and consider supporting future initiatives. We will continue to refer to Southwest Mental Health as patients are identified.

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
Diagnosis of depression – 34%	Sanford Jackson follows the Sanford depression standard practice guidelines in diagnosing depression. Clinical interview may include using DSM-V criteria, detailed history, rule out of secondary causes, and consideration of special population factors.
Currently smoke cigarettes – 10%	• The Sanford Jackson RN Health Coach is certified in Freedom From Smoking and is a Tobacco Treatment Specialist. The RN Health Coach meets with patients to help them create an individualized quit plan. Sanford Jackson also refers patients to Quit Plan or MN Quit Fax Referral if they would prefer phone counseling. • Sanford Jackson communicates their commitment to decreasing tobacco use through education in the local newspaper and radio interviews to discuss tobacco cessation resources available in the area. • Sanford Jackson discusses tobacco use rates and the impact on care for people with diabetes and vascular disease specifically; our performance improvement team monitors these measurements quarterly and action plans are continuously updated and discussed with all care team members.
Binge drink at least 1x/month – 38%	Findings from the Community Health Needs Assessment were shared at a stakeholder meeting on June 26, 2018. Public health and law enforcement were both present.
Binge drink at least 2-3 x / week – 5%	Findings from the Community Health Needs Assessment were shared at a stakeholder meeting on June 26, 2018. Public health and law enforcement were both present.
WELLNESS	
Diagnosis of high cholesterol – 38%	• Sanford Jackson provides patients with appropriate referrals in response to confirmed high cholesterol or risk factors that could lead to high cholesterol. Sanford Jackson provides a RN Health Coach in the clinic for behavioral health counseling and goal setting as well as diabetes education and dietician services in outpatient areas. Sanford Jackson also hosts an *I Can Prevent Diabetes* course on site which is designed for people who would like to lose weight and improve their health but have not yet been diagnosed with diabetes. Sanford Jackson also refers to credible programs provided in the community including Sanford Profile, Taking Off Pounds Sensibly, and community education courses. • Sanford Jackson also provides heart and vascular screenings via mobile services that are on site at least twice every year. • Sanford Jackson offers wellness screenings to area businesses in Jackson/Lakefield. Sanford Jackson also participates in educational opportunities such as Heart Healthy education at the 2018 Farm and Home Show or Kiwanis.
Diagnosis of hypertension – 32%	• Sanford Jackson provides patients with appropriate referrals in response to confirmed hypertension or risk factors that could lead to hypertension. Sanford Jackson provides an RN Health Coach in the clinic for behavioral health counseling and goal setting as well as diabetes education and dietician services in outpatient areas. Sanford Jackson also hosts an I Can Prevent Diabetes course on-site, which is designed for people who would like to lose weight and improve their health but have not yet been diagnosed with diabetes. Sanford Jackson also refers to credible programs provided in the community including Sanford Profile, Taking Off Pounds Sensibly, and community education courses. • Sanford Jackson also provides heart and vascular screenings via mobile services that are on site at least twice every year.

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
	• Sanford Jackson offers wellness screenings to area businesses in Jackson/Lakefield. Sanford Jackson also participates in educational opportunities such as Heart Healthy education at the 2018 Farm and Home Show or Kiwanis. • Sanford Jackson follows Sanford's standard protocol workflow for diagnosis, treatment, and follow up for high blood pressure.
Diagnosis of arthritis – 21%	Sanford Jackson collaborated with Minnesota River Area Agency on Aging to host a *Living Well with Chronic Pain* course in 2018. Patients are referred to credible local programs such as fitness or chronic disease self-management classes.
Obese – 38% Overweight – 30%	• Now in its tenth year, Sanford is the title sponsor for the *Sanford Tri for Healt*h. The event welcomes adults to participate in a triathlon (swim, bike, run). • Sanford Jackson has representation with the SHIP Community Leadership Team (Community Wellness Partners) which is a group of community population health advocates focused on making healthier lifestyle choices more accessible in our community. Ultimately, the goal is to improve health through increased physical activity, healthier eating, and less use or exposure to tobacco products. Sanford Jackson collaborates with SHIP to encourage, support healthier living, and address health disparities through evidenced-based strategies. • Sanford Jackson's RN Health Coach also accepts referrals or self-made appointments for goal setting and health behavior discussion. Sanford Jackson follows Sanford's standard protocols related to obesity including diagnosis, treatment, goal setting, and follow up. • Sanford Jackson offered blood pressure and glucose testing at the local Farm and Home Show. A weight loss surgery support group is offered once a month via video conference at Sanford Jackson Medical Center. • Sanford Jackson provides an RN Health Coach in the clinic for behavioral health counseling and goal setting as well as diabetes education and dietician services in outpatient services. Sanford Jackson also hosts an *I Can Prevent Diabetes* course on site, which is designed for people who would like to lose weight and improve their health but have not yet been diagnosed with diabetes. • Sanford Jackson also refers to credible programs provided in the community including Sanford Profile, Taking Off Pounds Sensibly, and community education courses. • Sanford Jackson created a brochure titled *Guide to Local Fitness and Weight Loss Resources* which is distributed to patients and community partners.
Do not get 5+ fruits/vegetables each day – 62%	• The Food Rx Program is a referral program for our patients which was developed in collaboration with the RN Health Coach and local resource directors as a means to provide education to patients in need of food assistance. Resources that patients are referred to include Supplemental Nutrition Assistance Program (SNAP), Women, Infants, Children (WIC), Jackson Food Shelf Inc., Lakefield Food Shelf, Heron Lake/Okabena Food Shelf, Nutrition Assistance Program for Seniors (NAPS), Free/Reduced School Meals, Food 4 Kids Backpack Program, JCC Middle School Food Pantry, Senior Dining/Meals on Wheels and Ruby's Pantry. • Sanford RN Health Coach is an active member on the Jackson Food Shelf Board and UCAP Hunger Team. The Leadership Team and Sanford Jackson also volunteers with Jackson Food Shelf, Ruby's Pantry, Senior Dining/Meals on Wheels Delivery, Food 4 Kids Back Pack Program. • Financially, we support the Jackson County Food 4 Kids and recently, the Jackson Food Shelf with monetary support to purchase their building

Identified Concerns	How Sanford Jackson is Addressing the Community Needs
	addressing the need for a food shelf in the securing the service to those residents in the city of Jackson for the future. • Sanford Jackson also educates patients about the importance of 5+ fruits and vegetables a day and the positive health impact; the goal to increase fruit and vegetable intake is often added to patient follow-up goals if the patient agrees that this is an area they would like to improve in.
Do not get moderate exercise at least 3x/week – 39%	Sanford is the title sponsor for the *Sanford Tri for Health*. Sanford Jackson patients are educated on the importance of regular physical activity and the positive health impact; the goal to increase physical activity is often added to patient follow-up goals in the EMR if the patient agrees that this is an area they would like to improve in. Sanford Jackson created a brochure titled *Guide to Local Fitness and Weight Loss Resources* which is distributed to patients and community partners.
Have not had a routine check-up in more than 1 year – 28%	Sanford offers well child and teen checkups, annual physicals along with mobile mammography and other preventive services in in Jackson and Lakefield. Findings from the Needs Assessment were shared at our stakeholder's meeting in June 2018 in which Public Health was present.
Have not had a flu shot this year – 46%	Sanford offers flu shots on site at both Jackson and Lakefield clinics long with offering to emergency room and inpatients. We are also available to do flu shots at area businesses in the community.
Have not seen a dentist in more than 1 year – 33%	Sanford providers will refer as needed and share scores with public health and support future initiatives as applicable.

Implementation Strategies – 2017-2019

Priority 1: Children and Youth

According to the Centers for Disease Control, obesity is a complex health issue to address. Obesity can be caused from a combination of contributing factors such as behavior and genetics. Behaviors can include dietary patterns, physical activity, inactivity, medication use, and other exposures. Additional contributing factors in our society include the food and physical activity environment, education and skills, and food marketing and promotion.

Obesity is a serious concern because it is associated with poorer mental health outcomes, reduced quality of life, and is associated with morbidity and illnesses including diabetes, heart disease, stroke, and some types of cancer.

Sanford Jackson has made physical health specific to obesity a significant priority and has developed strategy to improve physical health and reduce the negative health effects of obesity.

Priority 2: Mental Health/Behavioral Health and Substance Abuse

Mental health is important at every stage of life and affects how people think, feel, and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental, and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health and behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Jackson

Implementation Strategy Action Plan 2019-2021

Priority 1: Children and Youth

Projected Impact: Increased participation of youth in healthy activities

Goal 1: Create awareness of health behaviors for children and parents

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Sponsorship of annual *Kids Tri for Health*	Participation; June of each year	Monetary support; Staff volunteers	Senior Director, Marketing Specialist	*Tri for Health* board of directors and planning committee; Area businesses
Utilize Sanford *fit* Kids resources throughout the community	Number of events participated in to create awareness	Sanford Jackson Leadership Team	Senior Director, Marketing Specialist	Schools, Daycares, Family Services Network

Priority 2: Mental Health/Behavioral Health and Substance Abuse

Projected Impact: Decrease number of patients presenting to the emergency room with behavioral health disorder, depression, anxiety, or substance abuse as primary encounter diagnosis

Goal 1: Decrease substance abuse within the community

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Jackson County Sherriff education to Providers	Number or providers in attendance	Monthly Provider Meeting	Senior Director	Jackson County Sherriff
Educate providers and care team about best practices for tobacco cessation and motivational interviewing for health behavior change	Number of staff in attendance	Provider meeting Funding for education of RN Health Coach is supported by Community Wellness Grant	Health Coach	Community Wellness Partners
Use Sanford enterprise standardized best practice workflow for opioid prescribing for the clinics	Percent of opioid prescriptions reduced	Medical Director, Administration	Sanford Clinic Board of Governors	All community pharmacies
Sanford hospital controlled substance prescriptions are submitted to Minnesota Prescription Monitoring Program	Ongoing – get report annual basis	Sanford Jackson Leadership Team	Senior Pharmacist	Minnesota Prescription Monitoring Program All community pharmacies

Goal 2: Decrease the occurrence of mental health crisis events for patients at Sanford Jackson

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Continued participation with Integrated Behavioral Health Community Task Force	Meet Quarterly – ongoing	Sanford Jackson Leadership Team	RN, RN Health Coach, Senior Director	Southwest Mental Health, law enforcement, clergy, schools, human services, other health care facilities in community
Continue to monitor number of patients presenting to ER with behavioral health disorder, depression, anxiety, or substance abuse as primary encounter diagnosis	Number of patients per quarter	Sanford Jackson Leadership Team	RN RN Health Coach, Senior Director, Performance Improvement, Director of Nursing	Southwest Mental Health, law enforcement, clergy, schools, human services, other health care facilities in community

Goal 3: Community Education

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Participation in Addiction/ Prevention/Safety Coalition	Ongoing quarterly meeting attendance	Sanford Jackson Leadership Team	Senior Director	Human services, schools, law enforcement, county attorney, etc.
Educate public on take back program in community through *Ask the Expert*	Publish education piece in 2019 and 2020	Sanford Jackson Leadership Team Newspaper article	Marketing	Law enforcement center

Demonstrating Impact – FY 2017-2019 Strategies

Priority 1: Children and Youth
Projected Impact: Cost of activities for children and youth
Goal 1: Sanford *fit* program information to schools and daycares

Actions/Tactics	Measureable Outcomes	Dedicated Resources	Leadership	Note any community partnerships and collaborations (if applicable)
Become familiar with Sanford's *fit* initiative	Review website	Website	Marketing/ Health Coach	
• Visit with Jackson County Central representatives • Bring education of curriculum to the schools • They recently completed School Health Index and are developing action plan	Discussion	Website	Marketing/ Health Coach	Jackson County Central School nurse and nutrition
Utilize a *fit* program tools at Family Fun Night – sponsored by Family Services Network	Complete Family Fun Night	Website	Marketing	Family Services Network Youth in Community in attendance
Tri for Health	Annual support of event	Provide *fit* curriculum in athlete bags	Marketing	*Tri for Health* planning committee

Priority 2: Mental Health
Projected Impact: Positive change in mental health collaboration
Goal 1: Drug Use and Abuse

Actions/Tactics	Measureable Outcomes	Dedicated Resources	Leadership	Note any community partnerships and collaborations (if applicable)
Educate public on Take Back Program in Community – *Ask the Expert*		Pilot/Standard local newspapers	Marketing	

Goal 2: Explore Minnesota Department of Human Services mobile mental health crisis teams

Actions/Tactics	Measureable Outcomes	Dedicated Resources	Leadership	Note any community partnerships and collaborations (if applicable)
Research availability/use of mobile mental health in Jackson County	Complete call with Human Services		CEO/Leadership team	DesMoines Valley Health and Human Services

Demonstrating Impact – 2017-2019

During the 2016 Community Health Needs Assessment research cycle community members were invited to discuss community needs, provide recommendations, and vote on the top priorities to address over the following three years. At Sanford Jackson Medical Center, the top priorities addressed through an implementation strategy process included:

1. Children and Youth
2. Mental Health

Goal 1 - Children and Youth

Goals to support this priority included distribution of Sanford *fit* program information to schools and daycares, along with utilizing the program information at events in the community and continued support of title sponsorship with the annual *Sanford Tri for Health*. Sanford Jackson distributed the Sanford fit program information to the schools and daycare centers in the Jackson/Lakefield area. In May of 2016, 2017 and 2018 we promoted the Sanford *fit* program at the annual Family Fun Night. Over 300 parents and children attended this event each year. The annual *Sanford Tri for Health* for youth celebrated its 10th year in 2018 with over 120 youth age 4-14 participating. Sanford Jackson Medical Center continued to support free activities in the community such as Jackson Food 4 Kids, which provides weekly food packs for food-insecure children, the summer library programs and the free summer lunch programs. With the financial support of Sanford Jackson and Sanford Sioux Falls, Sanford committed to a multi-year pledge in support of building a splash pad in Jackson. The Splash Pad will have free admission from May-September and construction is planned for spring 2019.

Goal 2 - Positive Change in Mental Health Collaboration

Underage drug use and abuse was identified as a concern. Sanford Jackson committed to doing education to the community on the topic of the Take Back program. An *Ask the Expert* column in the local newspaper featured this program.

Another successful tactic in relation to mental health collaboration was facility leadership participation in the integrated Behavioral Health Strategic Planning session with community partners. From this planning session, a community task force was developed that meets quarterly. Key project measures included:

- Decrease percentage of behavioral health patients discharged from the emergency room to an inpatient behavioral health facility. Pre-project value, April-June 2017, was 47%. April-June 2018 value 23%.
- Decrease median length of stay (time in emergency room) for patients with behavioral health primary encounter diagnosis. Pre-project value, April-June 2017 4:48 hours. April-June 2018 value 2:45 hours.
- Project success story presented by Detasha Place, RN, RN Health Coach at the *Rural Health Innovations Conference* in June 2018.
- Explore Minnesota Department of Human Service mobile mental health crisis team. After researching the Minnesota Department of Human Service mobile mental health crisis team, we learned that this service was not available for our area.

Community Feedback from the 2016 Community Health Needs Assessment

Sanford Health is prepared to accept feedback on the 2016 Community Health Needs Assessment and has provided online comment fields on our website for ease of access. There have been no comments or questions about the Sanford Jackson Medical Center's CHNA.

Appendix

Primary Research

Jackson Asset Map

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
Economic Well Being	15% of residents report running out of food before having money to buy more	15% of residents report running out of food before having money to buy more	Food insecurity 9%	Food resources: • Jackson Co. Food 4 Kids, 164 Industrial Pkwy., Jackson • Summer lunch program, Riverside Elementary. Free to children, • FLIP (free lunch in the park) Lakefield Women of Today, Lakefield • Jackson Co. Extension (nutrition information), 607 S. Hwy. 86, Jackson • Food Shelf, 1229 North Hwy., Jackson • Food Shelf, 416 Broadway Ave, Lakefield • Ruby's Pantry, 108 Co. Rd. 51, Jackson • Riverside Farmers Market, Ashley Park, Jackson • WIC program, 235 – 9th Avenue, Windom • SNAP program, 402 White St., Jackson • Grocery stores: o Sunshine Foods, 908 Hwy. 71 North, Jackson o Maynard's, 207 Main St, Lakefield	
Children & Youth	Availability of quality child care 3.89 Cost of quality child care 3.76 Childhood obesity 3.65 Bullying 3.50		Children in poverty 13% children eligible for free or reduces price lunch 36%	Child Care resources in Jackson: • Little Huskies, 111 Torgerson LN, Jackson • Discovery Place Preschool, 820 Park St., Jackson • Head Start, 115 So. Hwy., Jackson • In-home day cares: o Paulette Anderson – 507-847-4286 o Jody Brinks – 507-227-5783 o Chelsey Censky – 507-847-4967 o Theresa Luhmann – 507-847-2436 o Cara Scholten – 507-841-3428 o Amy Schuett – 507-841-0514 o Amy Singvongsa – 507-841-1366 o Hope Vee, 507-841-1259 o Traci Wieneke – 507-841-1554 o Deb Bonnicksen – 507-841-3594 o Crystal Dehn – 712-330-7518 o Misty Fisk – 507-841-3601 o Mini Me's – 507.841-0705 Childhood Obesity resources:	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				• Sanford Jackson Clinic, 1430 N. Highway, Jackson • Sanford dieticians, 1430 N. Highway, Jackson • Sanford FIT – sanfordFIT.org • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson • Jackson School activities, PO Box 119, Jackson • Jackson Co. School activities, PO Box 119, Jackson • Boys & Girls T Ball & Softball, JCC Community Education, 1128 N. Hwy., Jackson • Soccer, JCC Community Education, 1128 N. Hwy., Jackson • Gymnastics, JCC Community Education, 1128 N. Hwy., Jackson • Basketball, JCC Community Education, 1128 N. Hwy., Jackson • Park District activities, 53053 – 780th St., Jackson • Bowling – Bowler's Inn, 103 Main St., Lakefield • Jackson Golf Club, N. Hwy. 71, Jackson • Loon Lake Golf Club, 8 miles SW of Jackson • Emerald Valley Golf Course, 101 Valleybrook Rd., Lakefield • Softball – Jackson Co. Central, 1128 North Hwy, Jackson • Skate Park, 80 W. Ashley St., Jackson • Swimming – JCC High School, 1128 North Hwy, Jackson • Volleyball, Sandy Point Park, 41699 – 850th St., Lakefield • Disc Golf, River St. & Petersburg Dr., Jackson • Biking/Hiking Trail – Ashley Park Trail, State St. & Riverside Dr., Jackson • Biking/Walking Trail – goes around the city of Jackson • Hiking Trails – Kilen Woods State Park, 12 miles NW of Jackson • Archery Club, PO Box 173, Jackson • Ice Skating, Bayou Jackson Pond, Jackson • Cross Country Skiing on the Des Moines River, Jackson • Parks & Playgrounds: o Albertus Field, 99 – 1st St., Jackson o Ashley Park, State St. & Riverside Dr., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				○ Benes Recreation Area, River St. & Petersburg Dr., Jackson ○ Central Park, White & 6th, Jackson ○ Dann's Island Park, Hwy 71 & Kimball, Jackson ○ Dumont Park, Sherman & N Sverdrup Ave., Jackson ○ Festival park, 2nd & North Hwy, Jackson ○ Getty Park, West Ashley St. & River St., Jackson ○ Patterson Park, 208 Thomas Rd, Jackson ○ Sunset Park, Louis Ave., Jackson ○ Zimmerli Park, Branch St., Jackson Bullying resources: • Jackson School District counselors, 1128 North Hwy., Jackson • Lakefield Police, 301 Main St, Lakefield • Jackson Co. Sheriff, 400 Sherman St., Jackson	
Aging Population	Cost of long term care 3.85 Cost of memory care 3.82 Availability of memory care 3.53		20.5 % 65 and older	Long Term Care resources: • Good Samaritan, 601 West St., Jackson • Jackson Pines, 1508 North Hwy, Jackson • Sunrise Estates, 200 Hwy 71 S., Jackson Memory Care resources: • Good Samaritan, 601 West St., Jackson • Jackson Pines, 1508 North Hwy, Jackson • Sunrise Estates, 200 Hwy 71 S., Jackson • Alzheimer's Assn. - Alz.org	
Safety	18% report that they have drugs in their home that they are not using 14% do not always use seat belts	18% report that they have drugs in their home that they are not using 14% do not always use seat belts	Alcohol-impaired driving deaths 13%	Substance Abuse resources: • Addiction/Prevention Coalition, drugfreejackson.com (meets at United Way Center, 800 E. Main St., Marshall) • Family Services Network, 402 White Street, Jackson	
Health Care Access	Availability of mental health providers 4.11 Access to affordable health insurance coverage 3.89		Primary care physicians 5,130:1 Dentists 2,520:1 Mental health providers 1,440:1 Uninsured 6%	Mental Health resources: • Sanford Clinic, 1430 N. Highway, Jackson • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson • Southwest Mental Health Center, 401 West St., Jackson • Veterans Service Center, 400 White St., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
	Availability of behavioral health 3.81 Access to affordable health care 3.68 Availability of non-traditional hours 3.56 Access to affordable dental insurance coverage 3.54 Access to affordable prescription drugs 3.54			• Jackson Co. Human Services, 402 White St., Jackson • Public Health, 407 – 5th St., Jackson Health Insurance resources: • MN Sure – MNSURE.org • Sanford Health Plan, 300 Cherapa Place, Sioux Falls • Complete Insurance Services, 616 – 2nd St., Jackson • United Prairie Insurance, 202 Grant St., Jackson Health Care resources: • Sanford Jackson Clinic/RN Health Coach/Medical Home, 1430 N. Highway, Jackson • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson • Des Moines Valley home care, 402 White St., Jackson • Good Samaritan home care, 710 Fuller Dr., Windom • Sanford HME, 402 White St., Windom • Sanford HME, 1151 Ryan's Rd., Worthington Dental Insurance resources: • Complete Insurance Services, 616 – 2nd St., Jackson • United Prairie Insurance, 202 Grant St., Jackson Prescription Assistance programs: • CancerCare co-payment assistance, 800-813-4673 • Freedrugcard.us • Rxfreecard.com • Medsavercard.com • Yourrxcard.com • Medicationdiscountcard.com • Needymeds.org/drugcard • Caprxprogram.org • Gooddaysfromcdf.org • NORD Patient Assistance Program, rarediseases.org • Patient Access Network Foundation, panfoundation.org • Pfizer RC Pathways, pfizerRX pathways.com • RXhope.com • Prescriptionassistance.info • Minnesota Care – 1-800-657-3761 • MN Drug Card – mndrugcard.com	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				• Partnership for Prescription Assistance – pparx.org/intro.php • Benefitscheckup.org • RxAssist – rxassist.org • RxOutreach – rxoutreach.com • Together RX Access Program – togetherrxaccess.com • Glaxo Smith Kline – bridgestoaccess.gsk.com • Merck – merck.com/merkhelps • Novartis – patientassistncenow.com • Pfizer – pfizerhlepfulanswers.com • AARP Prescription Discount Program – aarppharmacy.com • PlanPlus – planplushealthcare.com • FamilyWize – familywise.org	
Mental Health & Substance Abuse	Depression 3.75 Drug use and abuse 3.67 Alcohol use and abuse 3.56 Dementia and Alzheimer's Disease 3.51 43% report that they have a diagnosis of anxiety/stress 34% report that they have a diagnosis of depression 10% currently smoke cigarettes 38% self-report binge drinking at least 1x/month (5% at least 2-3x/wk)	43% report that they have a diagnosis of anxiety/stress 34% report that they have a diagnosis of depression 10% currently smoke cigarettes 38% self-report binge drinking at least 1x/month (5% at least 2-3x/wk)	Excessive drinking 20% Adult smoking 16%	Mental Health resources: • Sanford Clinic, 1430 N. Highway, Jackson • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson • Southwest Mental Health Center, 401 West St., Jackson • Veterans Service Center, 400 White St., Jackson • Jackson Co. Human Services, 402 White St., Jackson • Public Health, 407 – 5th St., Jackson Substance Abuse resources: • Addiction/Prevention Coalition - drugfreejackson.com (meets at United Way Center, 800 E. Main St., Marshall) • Family Services Network, 402 White Street, Jackson Dementia/Alzheimer's resources: • Good Samaritan, 601 West St., Jackson • Jackson Pines, 1508 North Hwy, Jackson • Sunrise Estates, 200 Hwy 71 S., Jackson • Alzheimer's Assn. - Alz.org Tobacco Cessation resources: • Sanford Jackson, 1430 North Hwy, Jackson • Public Health, 407 – 5th St., Jackson • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				• QuitPlan, MN Dept. of Health – 651-201-5000 • Southwest Health & Human Services, 607 W. Main, Marshall • ClearWay MN – Clearwaymn.org	
Wellness	38% report that they have a diagnosis of high cholesterol 32% report that they have a diagnosis of hypertension 21% report that they have a diagnosis of arthritis 38% of residents report that they are obese 30% report that they are overweight 62% of residents do not get the recommended 5 or more fruits/vegetables each day 39% are not getting moderate exercise at least 3x/week 28% have not had a routine check-up in more than 1 year 46% have not had a flu shot this year 33% have not seen their dentist in more than 1 year		Adult obesity 32% Physical inactivity 19%	Chronic Disease resources: • Sanford Jackson, 1430 North Hwy, Jackson • Sanford Medical Home, 1430 North Hwy, Jackson • Sanford's Better Choices Better Health, 300 Cherapa Place, Sioux Falls • Public Health Dept., 407 – 5th St., Jackson • American Heart Assn. – heart.org • Arthritis Foundation – arthritis.org Obesity resources: • Sanford Jackson Clinic, 1430 North Hwy., Jackson • Sacred Heart Mercy Health Care Center, 803 – 4th St., Jackson • Public Health, 407 – 5th St., Jackson • Jackson Co. Extension Office nutrition information, 607 S. Hwy 85, Jackson • Anytime Fitness, 508 – 2nd St., Jackson • Prairie Rehab & Fitness, 816 – 3rd St., Jackson • Park District activities, 53053 – 780th St., Jackson • Bowling – Bowler's Inn, 103 Main St., Lakefield • Jackson Golf Club, N. Hwy. 71, Jackson • Loon Lake Golf Club, 8 miles SW of Jackson • Emerald Valley Golf Course, 101 Valleybrook Rd., Lakefield • Softball – Jackson Co. Central, 1128 North Hwy, Jackson • Skate Park, 80 W. Ashley St., Jackson • Biking/Hiking Trail – Ashley Park Trail, State St. & Riverside Dr., Jackson • Biking & Walking Trail – 4.5 miles around the city of Jackson • Hiking Trail, Kilen Woods State Park, 12 miles NW of Jackson • Swimming – 1128 North Hwy., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?

				• Archery Club, PO Box 173, Jackson
				• Ice Skating, Bayou Jackson Pond, Jackson
				• Cross Country Skiing on the Des Moines River, Jackson
				• Volleyball, Sandy Point Park, 41699 – 850th St., Lakefield
				• Disc Golf, River St. & Petersburg Dr., Jackson
				• Parks & Playgrounds:
				  o Albertus Field, 99 – 1st St., Jackson
				  o Ashley Park, State St. & Riverside Dr., Jackson
				  o Benes Recreation Area, River St. & Petersburg Dr., Jackson
				  o Central Park, White & 6th, Jackson
				  o Dann's Island Park, Hwy 71 & Kimball, Jackson
				  o Dumont Park, Sherman & N Sverdrup Ave., Jackson
				  o Festival park, 2nd & North Hwy, Jackson
				  o Getty Park, West Ashley St. & River St., Jackson
				  o Patterson Park, 208 Thomas Rd, Jackson
				  o Sunset Park, Louis Ave., Jackson
				  o Zimmerli Park, Branch St., Jackson
				
				Healthy Eating resources:
				• Jackson Co. Extension (nutrition information), 607 S. Hwy. 86, Jackson
				• Public Health (nutrition info), 407 – 5th St., Jackson
				• Riverside Farmers Market, Ashley Park, Jackson
				• Grocery stores:
				  o Sunshine Foods, 908 Hwy. 71 North, Jackson
				  o Maynard's, Lakefield, MN
				
				Physical Fitness/Activities resources:
				• Anytime Fitness, 508 -2nd St., Jackson
				• Prairie Rehab & Fitness, 816 – 3rd St., Jackson
				• Jackson Co. School activities, PO Box 119, Jackson
				• Boys & Girls T Ball & Softball, JCC Community Education, 1128 N. Hwy., Jackson
				• Soccer, JCC Community Education, 1128 N. Hwy., Jackson
				• Gymnastics, JCC Community Education, 1128 N. Hwy., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				• Basketball, JCC Community Education, 1128 N. Hwy., Jackson • Park District activities, 53053 – 780th St., Jackson • Bowling – Bowler's Inn, 103 Main St., Lakefield • Golf – Jackson Golf Club, N. Hwy. 71, Jackson • Golf – Loon Lake Golf Club, 8 miles SW of Jackson • Golf – North Valley Golf Course, 101 Valleybrook Rd., Lakefield • Swimming, 1128 No. Hwy, Jackson • Swimming, Lakefield Pool (summer) • Softball – Jackson Co. Central, 1128 North Hwy, Jackson • Skate Park, 80 W. Ashley St., Jackson • Biking/Hiking Trails – Ashley Park Trail, State St. & Riverside Dr., Jackson • Hiking – Killen Woods State Park, 12 miles NW of Jackson • Walking Trail – 4.05 miles around the city of Jackson • Archery Club, PO Box 173, Jackson • Volleyball – Sandy Pt. Park, 41699 – 850th St., Lakefield • Disc Golf, River St. & Petersburg Dr., Jackson • Parks & Playgrounds: o Albertus Field, 99 – 1st St., Jackson o Ashley Park, State St. & Riverside Dr., Jackson o Benes Recreation Area, River St. & Petersburg Dr., Jackson o Central Park, White & 6th, Jackson o Dann's Island Park, Hwy 71 & Kimball, Jackson o Dumont Park, Sherman & N Sverdrup Ave., Jackson o Festival park, 2nd & North Hwy, Jackson o Getty Park, West Ashley St. & River St., Jackson o Patterson Park, 208 Thomas Rd, Jackson o Sunset Park, Louis Ave., Jackson o Zimmerli Park, Branch St., Jackson Routine Check-up/Flu Shots resources: • Sanford Jackson Clinic, 1430 N. Highway, Jackson • Sacred Heart Mercy Health Care Center, 800 – 4th St., Jackson	

Identified concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap?
				• Public Health, 407 – 5th St., Jackson • Pharmacies that give flu shots: o Lewis Family Drug, 326 Main St, Lakefield, MN o Lewis Family Drug, 825 – 3rd St., Jackson Dental resources: • Deborah Christopher, DDS, 302 – 2nd St., Jackson • Paul Roggow, DDS, 604 – 2nd St., Jackson • Kevin Dunlavey, DDS, 607 – 2nd St., Jackson	

Key Stakeholder Survey

Sanford Jackson Medical Center

Community Health Needs Assessment
Results from an October 2017 Non-Generalizable

Online Survey of Community Stakeholders

December 2017


SANFORD

STUDY DESIGN and METHODOLOGY

The following report includes non-generalizable survey results from an October 2017 online survey of community leaders and key stakeholders identified by Sanford Jackson Medical Center. This study was conducted through a partnership between the Community Health Collaborative and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Members of the Community Health Collaborative distributed the survey link via e-mail to stakeholders and key leaders, located within various agencies in the community, and asked them to complete the online survey. **Therefore, it is important to note that the data in this report are not generalizable to the community.** Data collection occurred during the month of October and the first three weeks of November. A total of 42 respondents participated in the online survey.

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SURVEY RESULTS

Current State of Health and Wellness Issues Within the Community

Using a 1 to 5 scale, with 1 being “no attention needed”; 2 being “little attention needed”; 3 being “moderate attention needed”; 4 being “serious attention needed”; and 5 being “critical attention needed,” respondents were asked to, based on their knowledge, select the option that best describes their understanding of the current state of each issue regarding ECONOMIC WELL-BEING, TRANSPORTATION, CHILDREN AND YOUTH, the AGING POPULATION, SAFETY, HEALTHCARE AND WELLNESS, and MENTAL HEALTH AND SUBSTANCE ABUSE.

Figure 1. Current state of community issues regarding ECONOMIC WELL-BEING

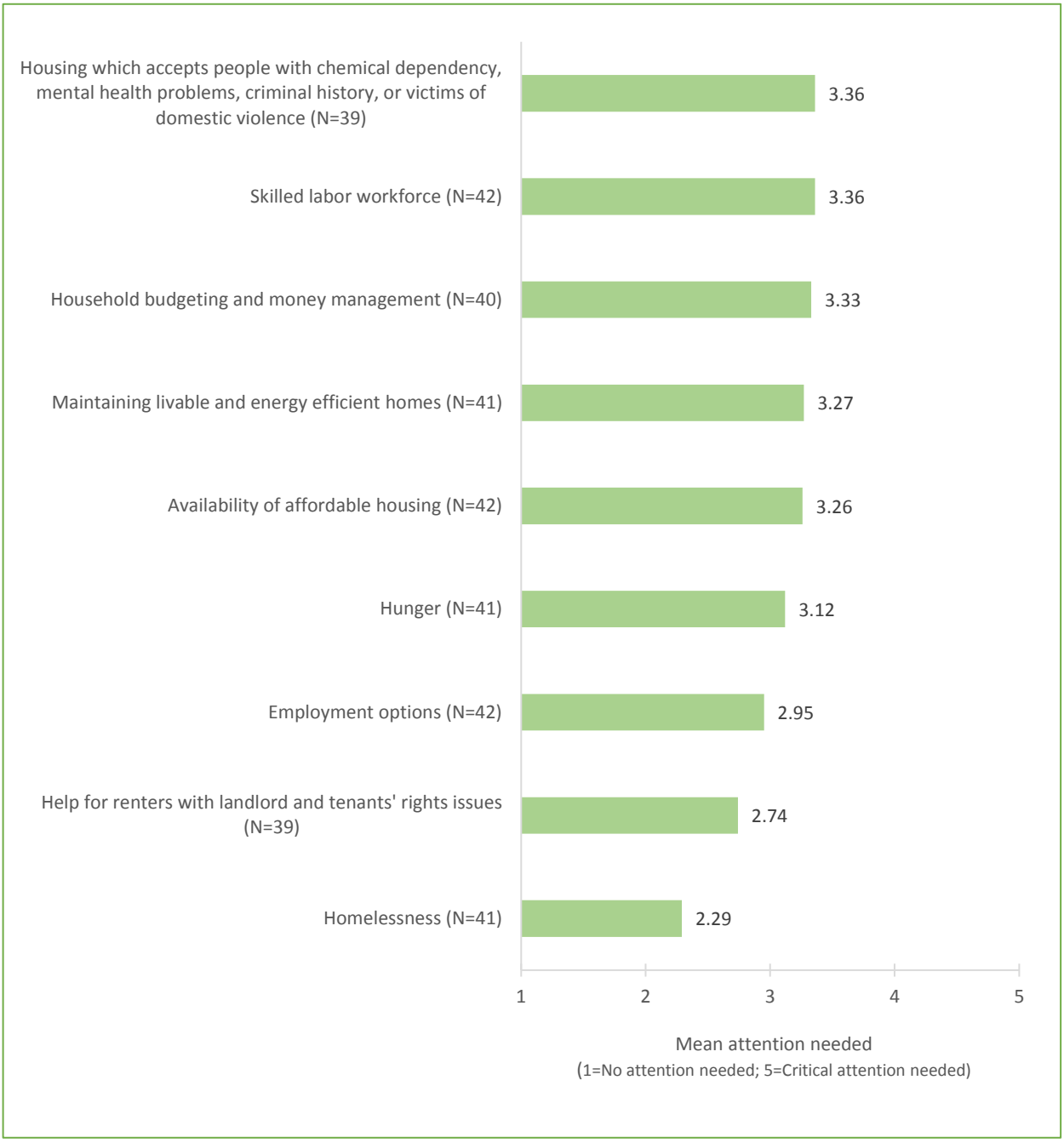


Figure 2. Current state of community issues regarding TRANSPORTATION

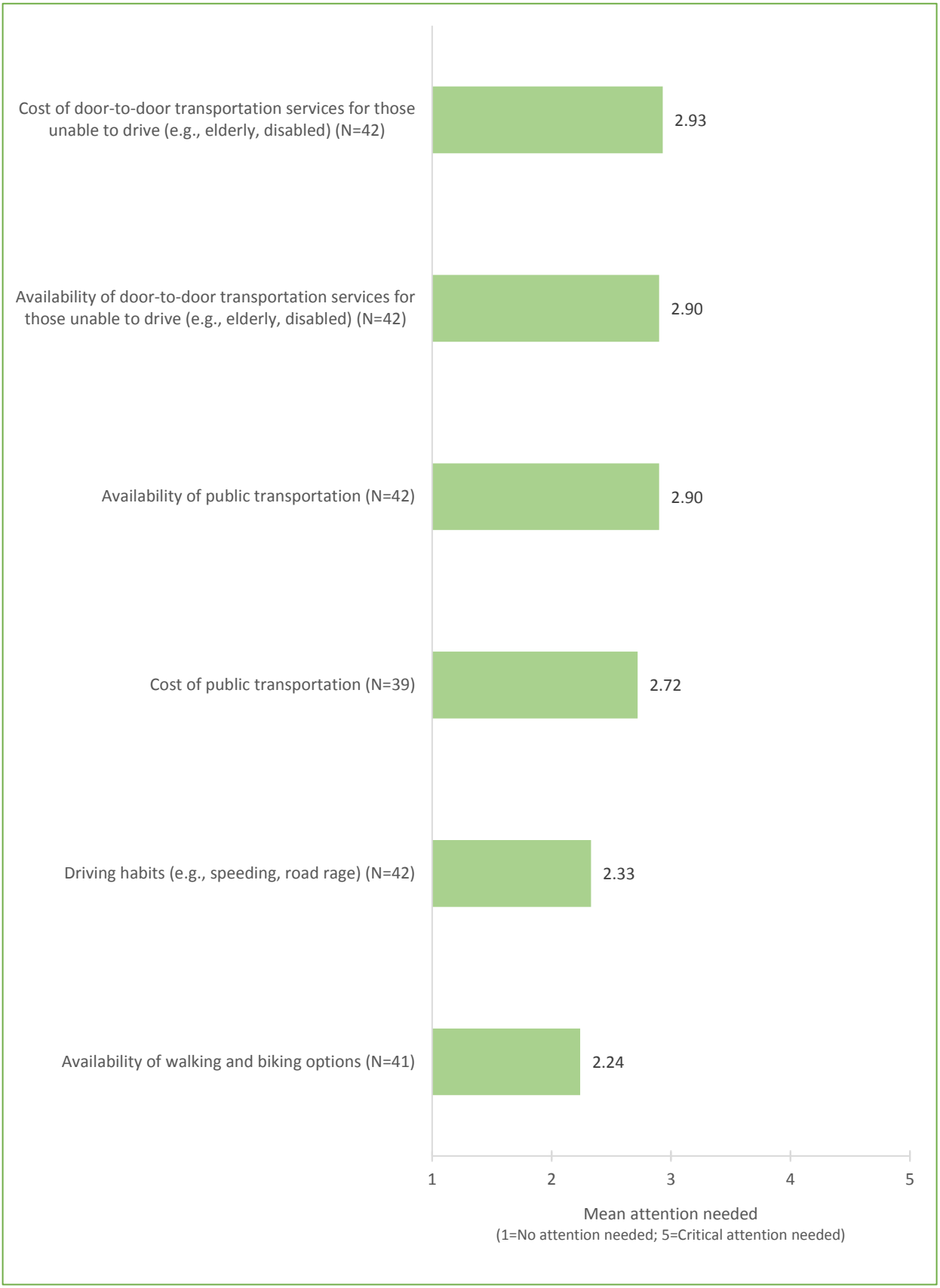


Figure 3. Current state of community issues regarding CHILDREN AND YOUTH

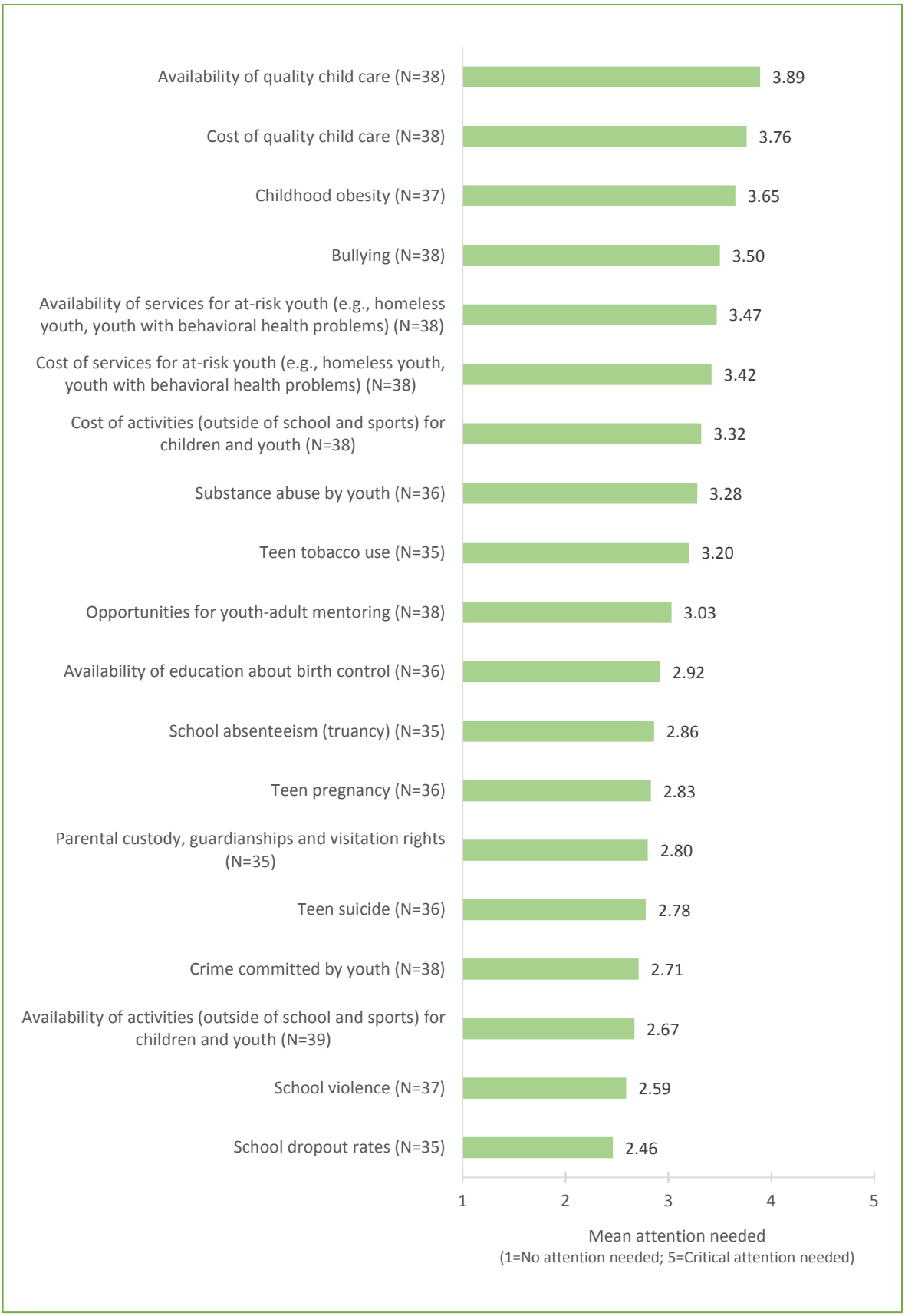


Figure 4. Current state of community issues regarding the AGING POPULATION

Figure 5. Current state of community issues regarding SAFETY

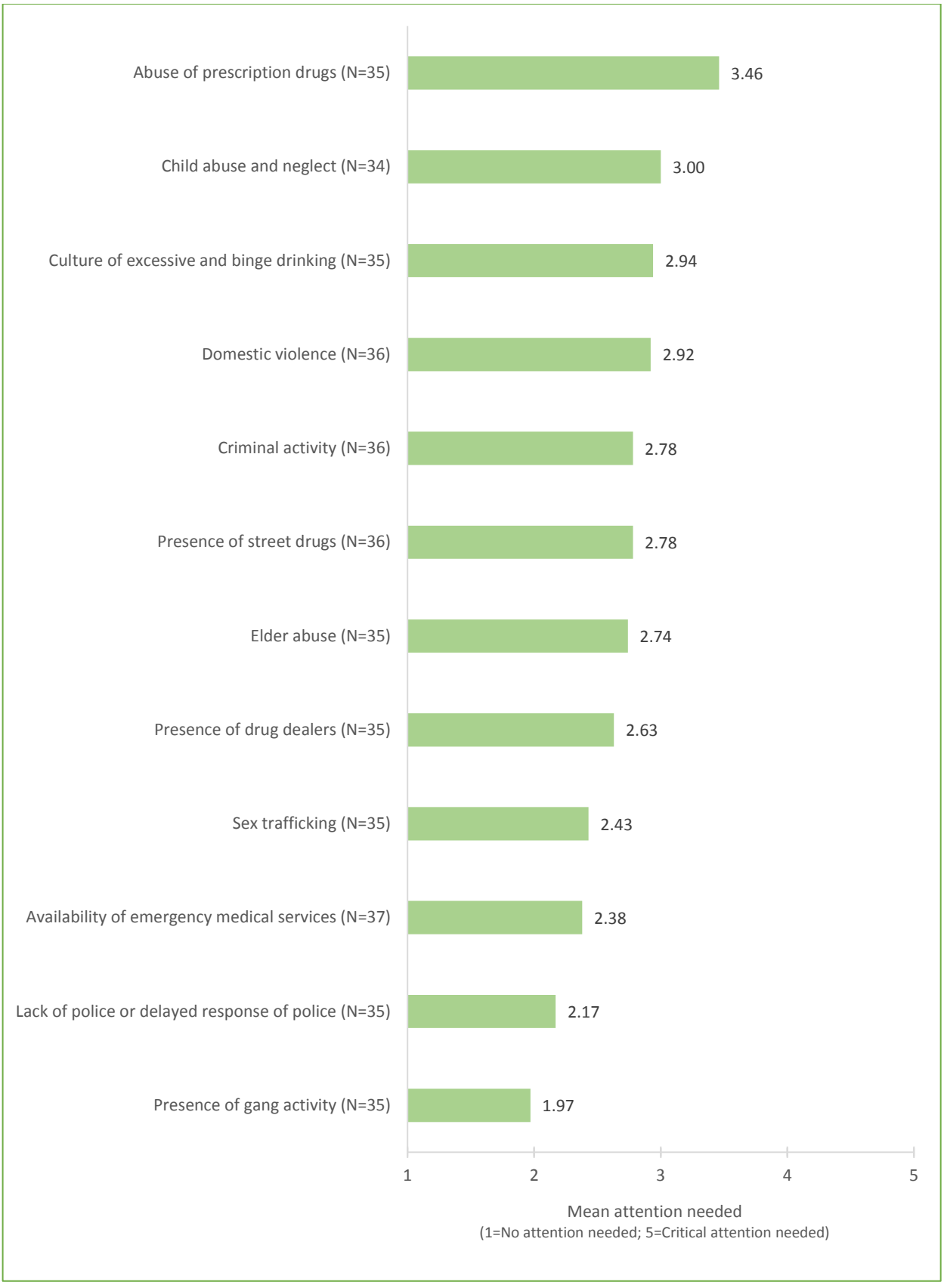
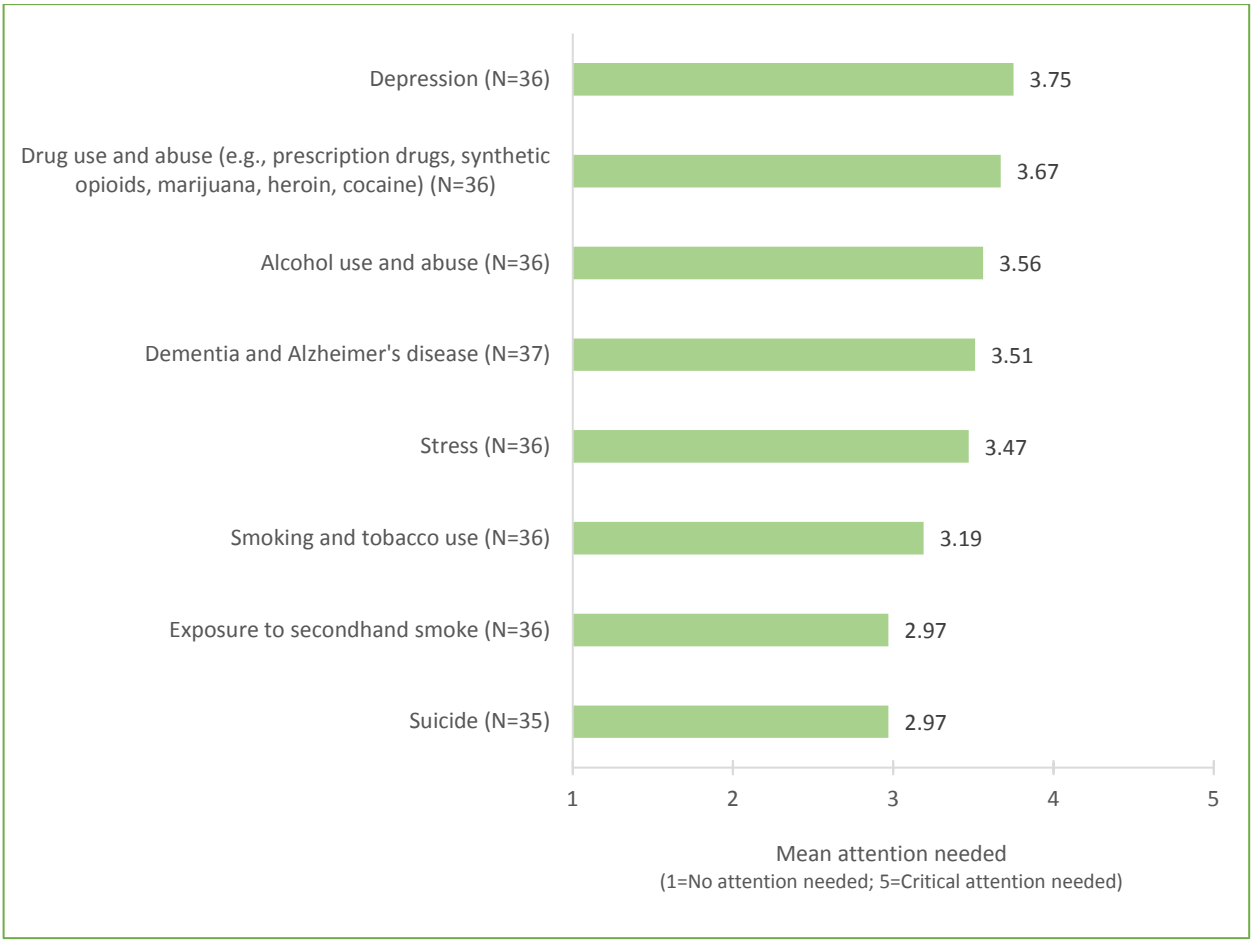


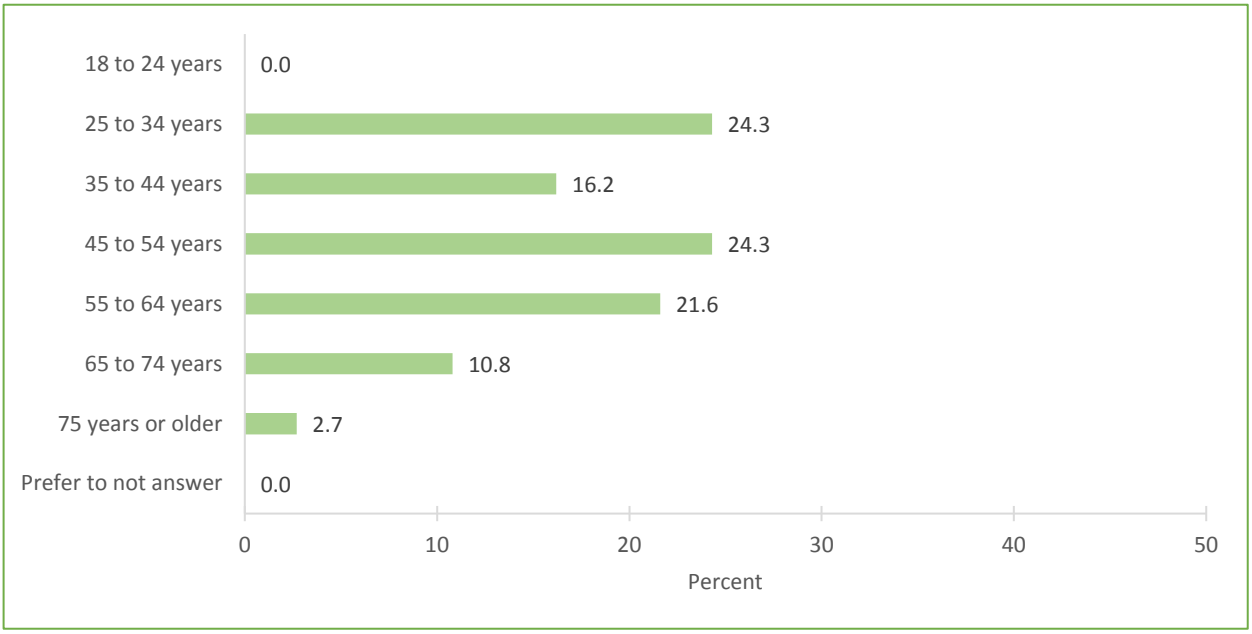
Figure 6. Current state of community issues regarding HEALTH CARE AND WELLNESS

Figure 7. Current state of community issues regarding MENTAL HEALTH AND SUBSTANCE ABUSE



Demographic Information

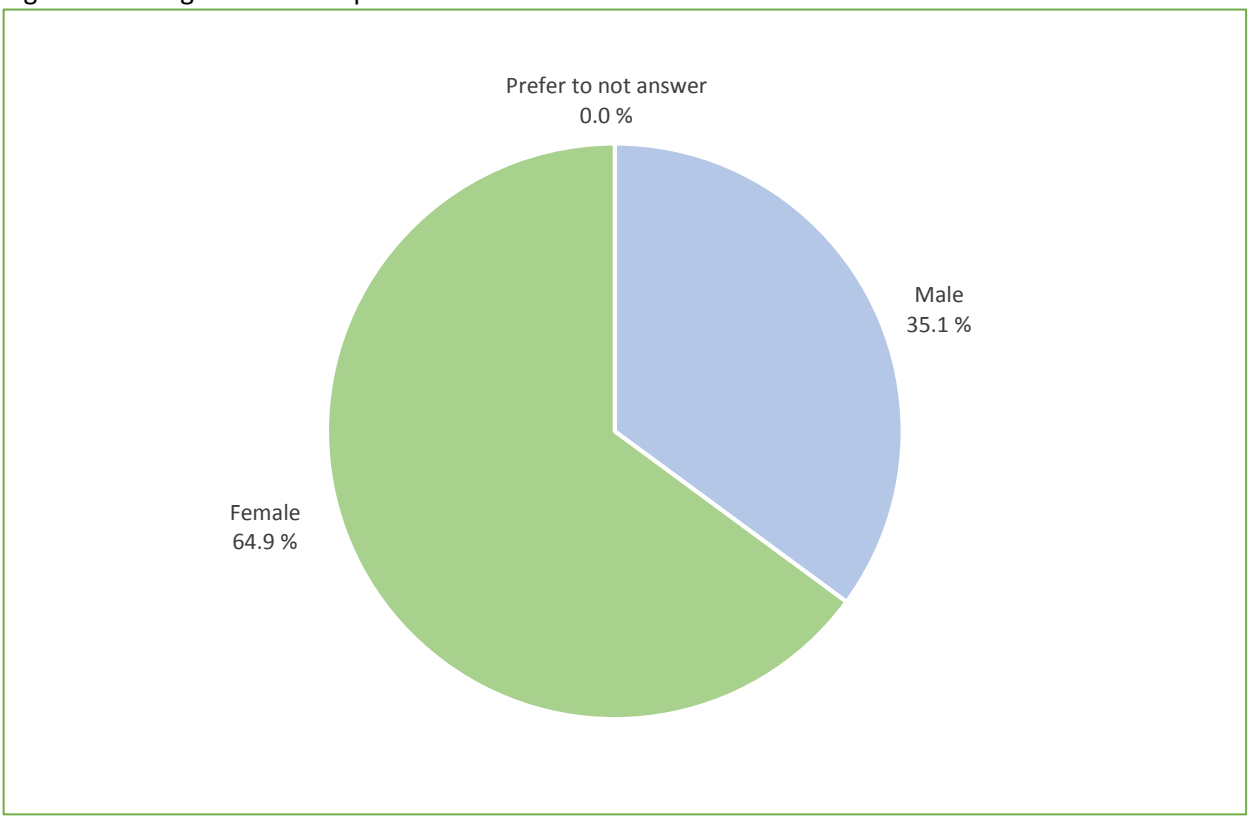
Figure 8. Age of respondents



N=37

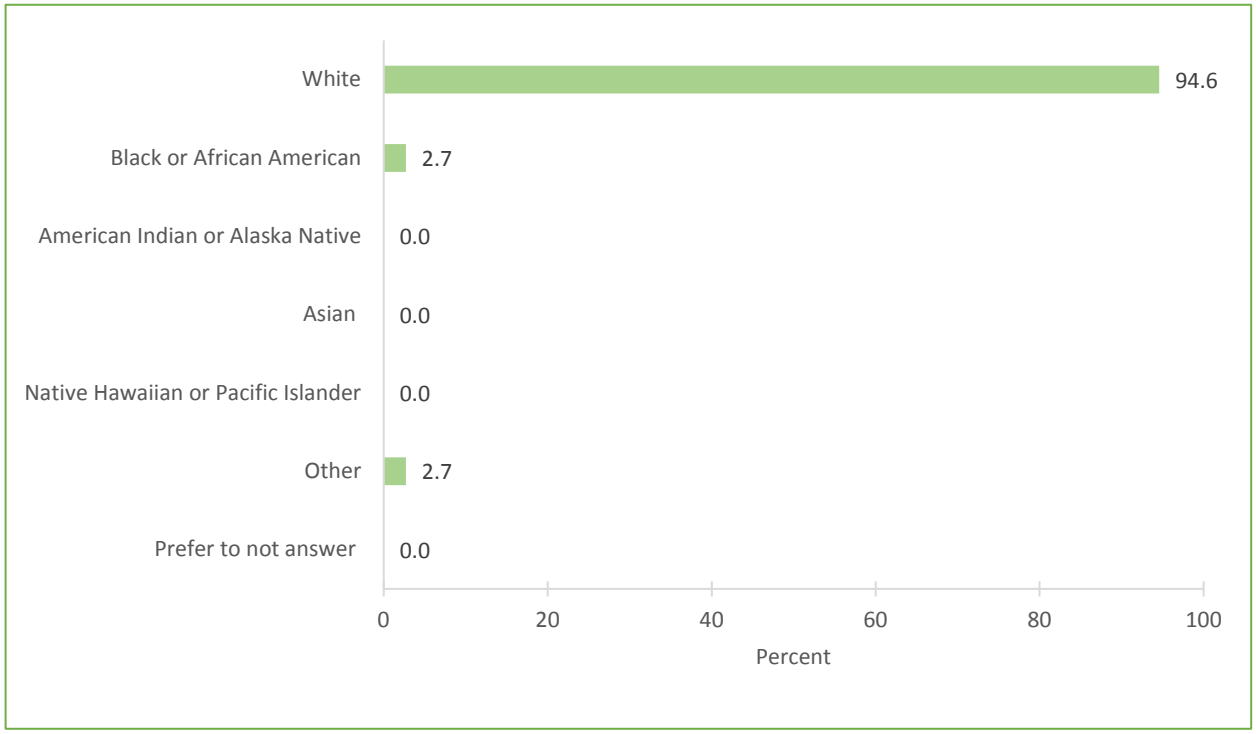
*Percentages do not total 100.0 due to rounding.

Figure 9. Biological sex of respondents



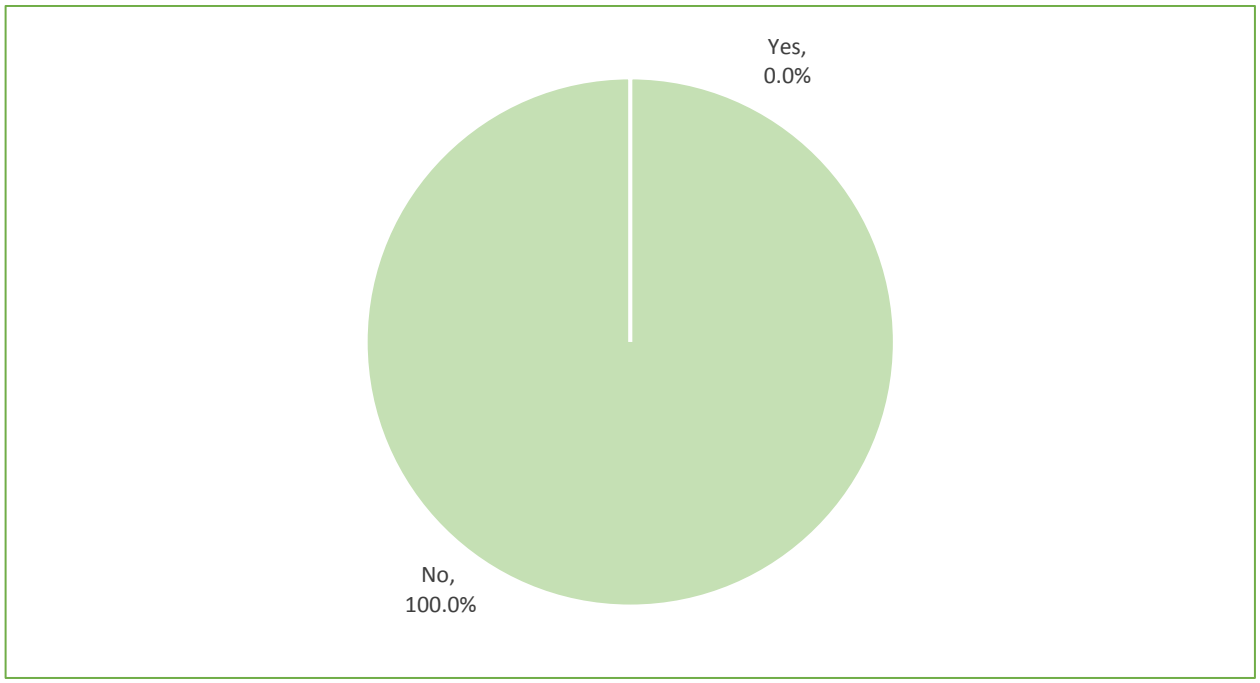
N=37

Figure 10. Race of respondents



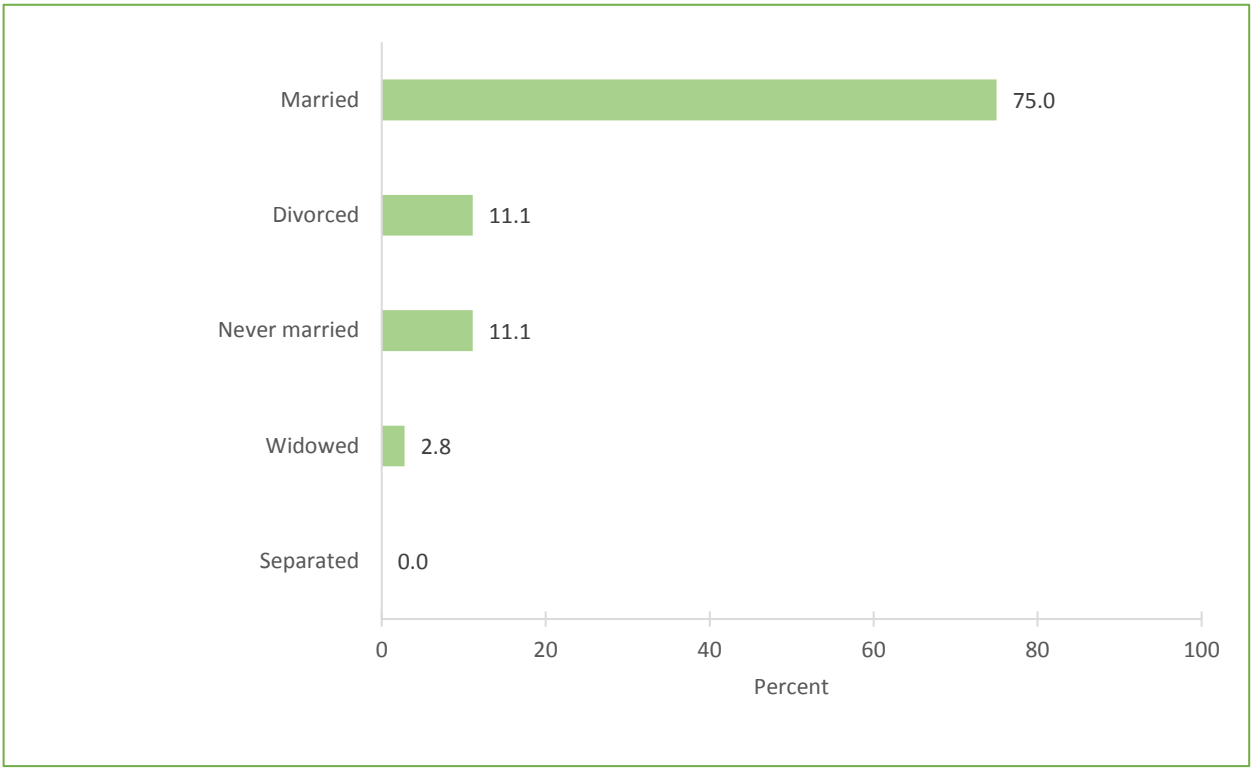
N=37

Figure 11. Whether respondents are of Hispanic or Latino origin



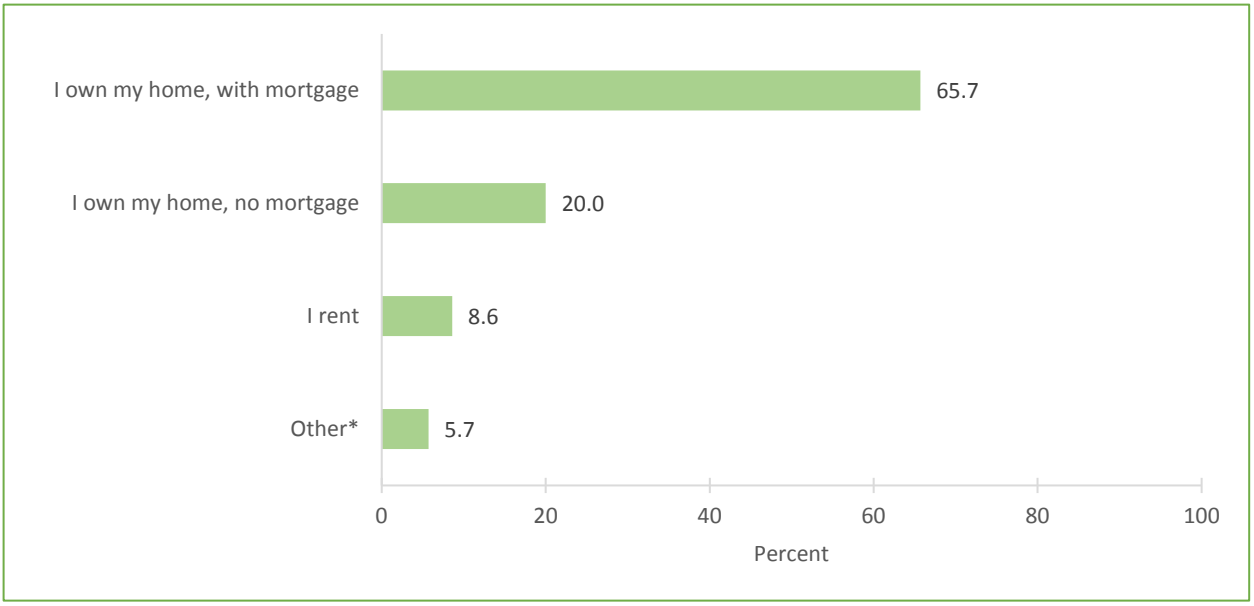
N=35

Figure 12. Marital status of respondents



N=36

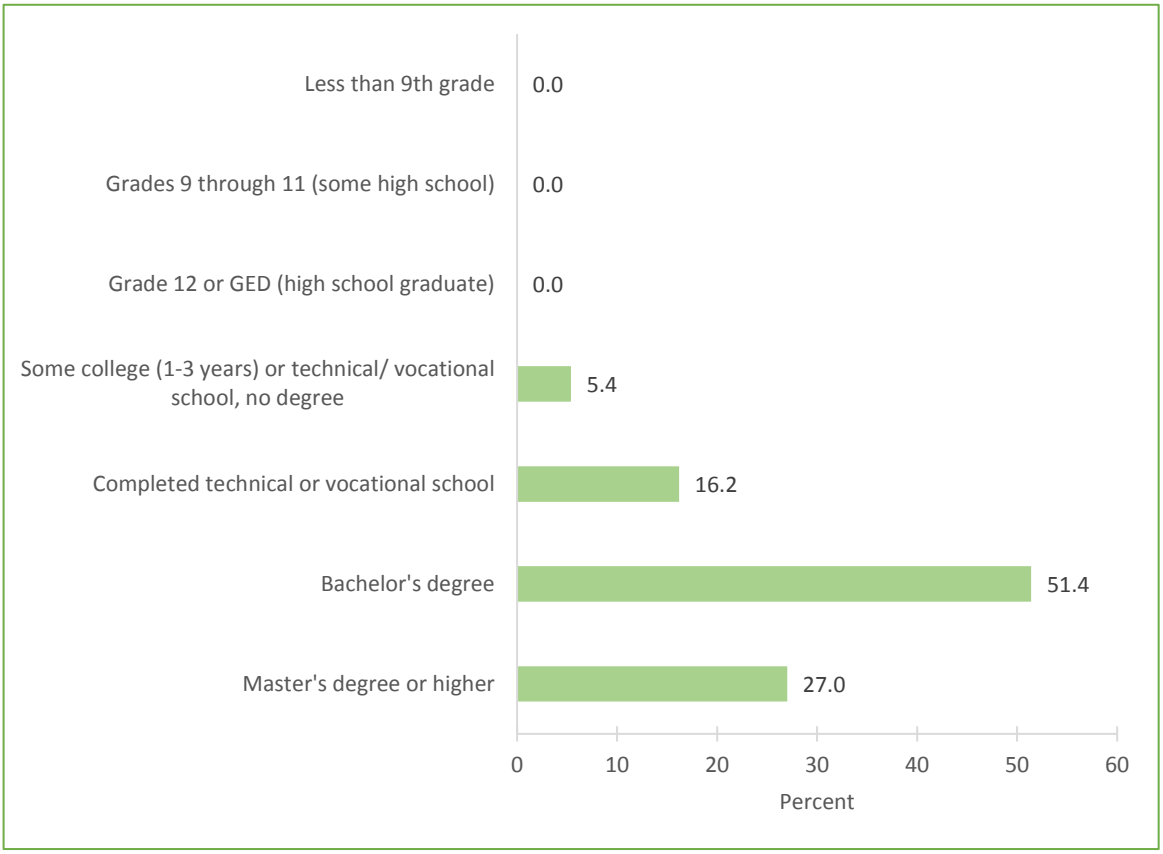
Figure 13. Living situation of respondents



N=35

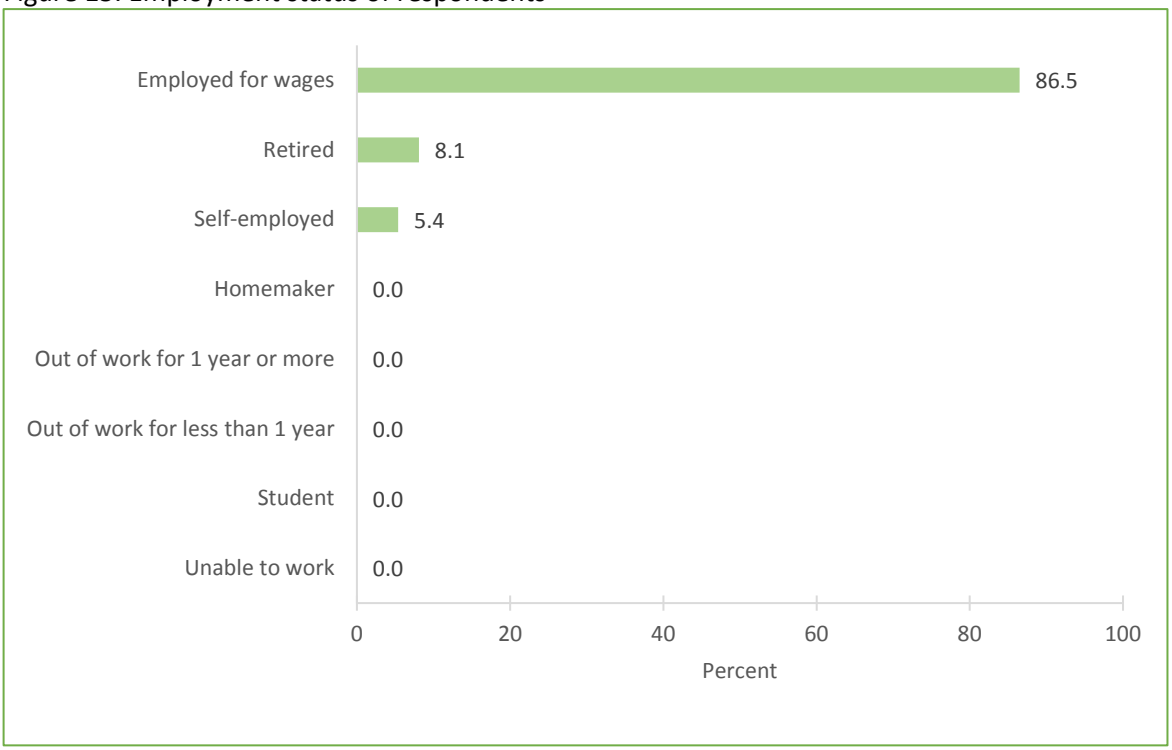
*Other responses include: “Home provided as part of employment” and “Live in home with others”.

Figure 14. Highest level of education completed by respondents



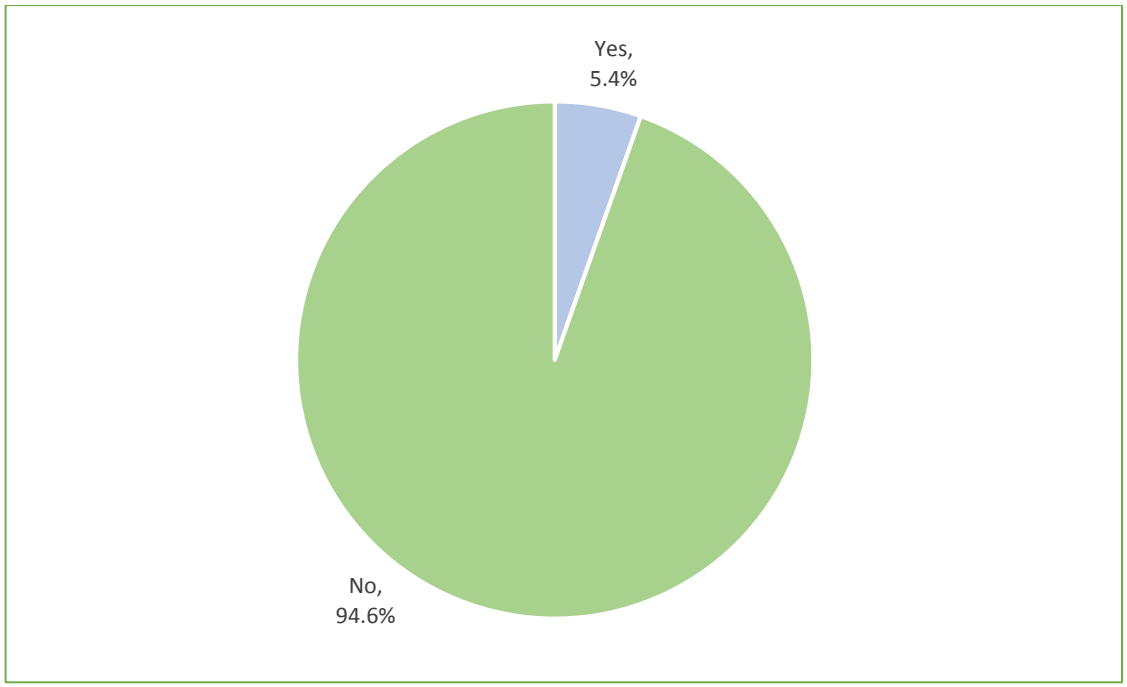
N=37

Figure 15. Employment status of respondents



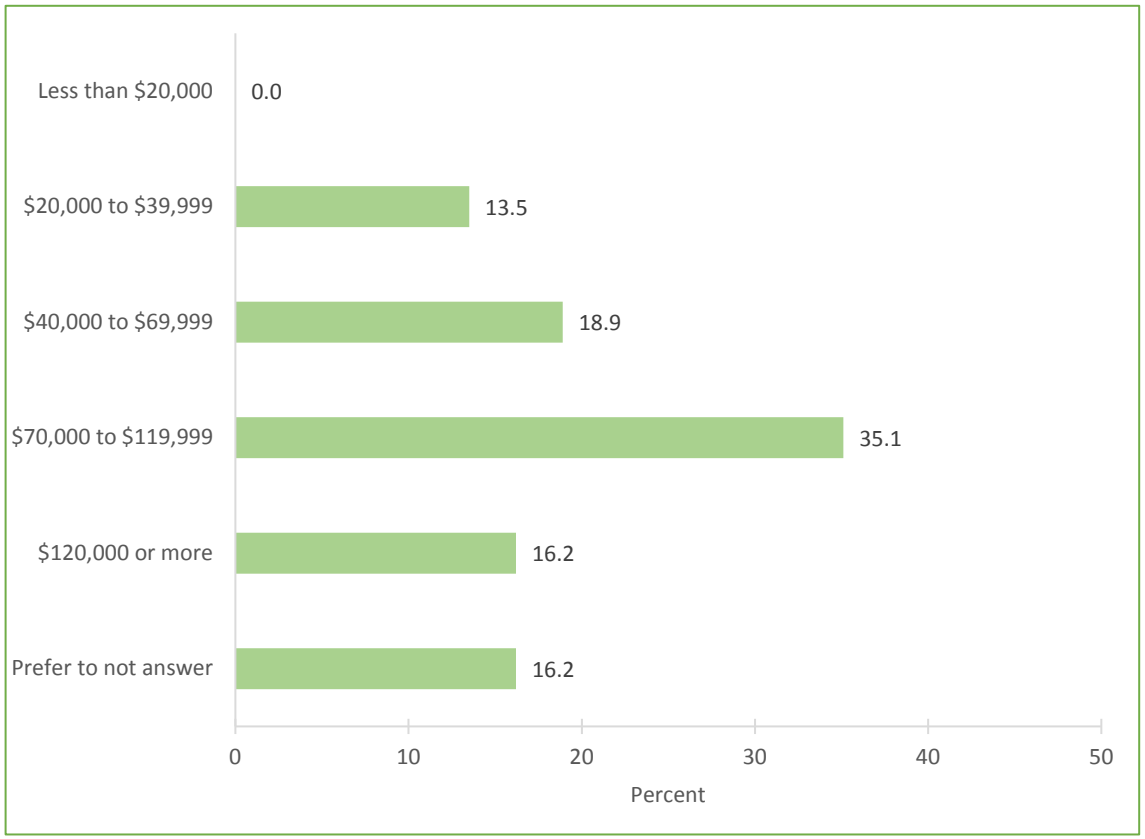
N=37

Figure 16. Whether respondents are military veterans



N=37

Figure 17. Annual household income of respondents, from all sources, before taxes



N=37

*Percentages do not total 100.0 due to rounding.

Table 1. Zip code of respondents

Zip code	Number of respondents
56143	23
56150	5
56101	2
56176	2
51360	1
56081	1
56181	1

N=35

Table 2. Comments from respondents

Comments
I work in the aging area. Our cities do not provide the same parity of services for the aging as they do for children/youth. There is no senior programming/activities from the city level, instead relying on senior meal providers who do not get funding for programming.
There is available, affordable transportation within the county, but not for rides to locations out of the county, such as Sioux Falls, Mankato for medical appointments. Nor is the transportation for evenings and weekends.

APPENDIX TABLE

Appendix Table 1. Current state of health and wellness issues within the community

Statements	Mean**	Percent of respondents*						
		Level of attention needed						
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	Total
ECONOMIC WELL-BEING ISSUES								
Availability of affordable housing (N=42)	3.26	2.4	9.5	54.8	26.2	7.1	0.0	100.0
Employment options (N=42)	2.95	0.0	21.4	64.3	11.9	2.4	0.0	100.0
Help for renters with landlord and tenants' rights issues (N=41)	2.74	2.4	36.6	41.5	12.2	2.4	4.9	100.0
Homelessness (N=41)	2.29	9.8	61.0	19.5	9.8	0.0	0.0	100.1
Housing which accepts people with chemical dependency, mental health problems, criminal history, or victims of domestic violence (N=41)	3.36	4.9	14.6	34.1	24.4	17.1	4.9	100.0
Household budgeting and money management (N=41)	3.33	0.0	12.2	53.7	19.5	12.2	2.4	100.0
Hunger (N=41)	3.12	2.4	12.2	61.0	19.5	4.9	0.0	100.0
Maintaining livable and energy efficient homes (N=41)	3.27	2.4	9.8	53.7	26.8	7.3	0.0	100.0
Skilled labor workforce (N=42)	3.36	0.0	19.0	42.9	21.4	16.7	0.0	100.0
TRANSPORTATION ISSUES								
Availability of door-to-door transportation services for those unable to drive (e.g., elderly, disabled) (N=42)	2.90	7.1	23.8	52.4	4.8	11.9	0.0	100.0
Availability of public transportation (N=42)	2.90	7.1	26.2	42.9	16.7	7.1	0.0	100.0
Availability of walking and biking options (N=41)	2.24	14.6	53.7	24.4	7.3	0.0	0.0	100.0

Statements	Mean**	Percent of respondents*						
		Level of attention needed						Total
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	
Cost of door-to-door transportation services for those unable to drive (e.g., elderly, disabled) (N=42)	2.93	9.5	26.2	38.1	14.3	11.9	0.0	100.0
Cost of public transportation (N=41)	2.72	9.8	29.3	36.6	17.1	2.4	4.9	100.1
Driving habits (e.g., speeding, road rage) (N=42)	2.33	9.5	59.5	21.4	7.1	2.4	0.0	99.9
CHILDREN AND YOUTH								
Availability of activities (outside of school and sports) for children and youth (N=39)	2.67	0.0	48.7	35.9	15.4	0.0	0.0	100.0
Availability of education about birth control (N=36)	2.92	2.8	27.8	50.0	13.9	5.6	0.0	100.1
Availability of quality child care (N=38)	3.89	0.0	7.9	26.3	34.2	31.6	0.0	100.0
Availability of services for at-risk youth (e.g., homeless youth, youth with behavioral health problems) (N=38)	3.47	0.0	7.9	44.7	39.5	7.9	0.0	100.0
Bullying (N=38)	3.50	0.0	7.9	42.1	42.1	7.9	0.0	100.0
Childhood obesity (N=37)	3.65	0.0	8.1	35.1	40.5	16.2	0.0	99.9
Cost of activities (outside of school and sports) for children and youth (N=38)	3.32	0.0	18.4	44.7	23.7	13.2	0.0	100.0
Cost of quality child care (N=38)	3.76	0.0	0.0	42.1	39.5	18.4	0.0	100.0
Cost of services for at-risk youth (e.g., homeless youth, youth with behavioral health problems) (N=38)	3.42	0.0	15.8	34.2	42.1	7.9	0.0	100.0
Crime committed by youth (N=38)	2.71	0.0	39.5	50.0	10.5	0.0	0.0	100.0
Opportunities for youth-adult mentoring (N=38)	3.03	0.0	23.7	52.6	21.1	2.6	0.0	100.0
Parental custody, guardianships and visitation rights (N=37)	2.80	0.0	40.5	32.4	21.6	0.0	5.4	99.9

Statements	Mean**	Percent of respondents*						
		Level of attention needed						Total
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	
School absenteeism (truancy) (N=37)	2.86	0.0	37.8	35.1	18.9	2.7	5.4	99.9
School dropout rates (N=37)	2.46	2.7	51.4	35.1	5.4	0.0	5.4	100.0
School violence (N=37)	2.59	0.0	51.4	40.5	5.4	2.7	0.0	100.0
Substance abuse by youth (N=36)	3.28	0.0	13.9	55.6	19.4	11.1	0.0	100.0
Teen pregnancy (N=36)	2.83	0.0	33.3	50.0	16.7	0.0	0.0	100.0
Teen suicide (N=36)	2.78	0.0	38.9	44.4	16.7	0.0	0.0	100.0
Teen tobacco use (N=35)	3.20	0.0	17.1	48.6	31.4	2.9	0.0	100.0
THE AGING POPULATION								
Availability of activities for seniors (e.g., recreational, social, cultural) (N=39)	3.31	0.0	5.1	66.7	20.5	7.7	0.0	100.0
Availability of long-term care (N=39)	3.10	0.0	20.5	56.4	15.4	7.7	0.0	100.0
Availability of memory care (N=36)	3.53	0.0	11.1	41.7	30.6	16.7	0.0	100.1
Availability of resources for family and friends caring for and helping to make decisions for elders (e.g., home care, home health) (N=37)	3.27	2.7	8.1	51.4	35.1	2.7	0.0	100.0
Availability of resources for grandparents caring for grandchildren (N=38)	3.16	0.0	15.8	55.3	21.1	5.3	2.6	100.1
Availability of resources to help the elderly stay safe in their homes (N=38)	3.32	2.6	10.5	44.7	36.8	5.3	0.0	99.9
Cost of activities for seniors (e.g., recreational, social, cultural) (N=39)	2.97	0.0	30.8	38.5	28.2	0.0	2.6	100.1
Cost of in-home services (N=39)	3.46	0.0	7.7	38.5	53.8	0.0	0.0	100.0
Cost of long-term care (N=39)	3.85	0.0	0.0	23.1	69.2	7.7	0.0	100.0
Cost of memory care (N=39)	3.82	0.0	2.6	23.1	61.5	10.3	2.6	100.1
Help making out a will or health care directive (N=38)	3.29	2.6	10.5	52.6	23.7	10.5	0.0	99.9

Statements	Mean**	Percent of respondents*						
		Level of attention needed						Total
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	
SAFETY								
Abuse of prescription drugs (N=35)	3.46	2.9	8.6	34.3	48.6	5.7	0.0	100.1
Availability of emergency medical services (N=37)	2.38	8.1	56.8	24.3	10.8	0.0	0.0	100.0
Child abuse and neglect (N=34)	3.00	0.0	23.5	55.9	17.6	2.9	0.0	99.9
Criminal activity (N=36)	2.78	0.0	33.3	55.6	11.1	0.0	0.0	100.0
Culture of excessive and binge drinking (N=35)	2.94	0.0	20.0	65.7	14.3	0.0	0.0	100.0
Domestic violence (N=36)	2.92	0.0	22.2	63.9	13.9	0.0	0.0	100.0
Elder abuse (N=35)	2.74	0.0	42.9	42.9	11.4	2.9	0.0	100.1
Lack of police or delayed response of police (N=35)	2.17	14.3	60.0	20.0	5.7	0.0	0.0	100.0
Presence of drug dealers (N=35)	2.63	2.9	48.6	31.4	17.1	0.0	0.0	100.0
Presence of gang activity (N=35)	1.97	22.9	62.9	8.6	5.7	0.0	0.0	100.1
Presence of street drugs (N=36)	2.78	2.8	30.6	52.8	13.9	0.0	0.0	100.1
Sex trafficking (N=35)	2.43	8.6	48.6	34.3	8.6	0.0	0.0	100.1
HEALTH CARE AND WELLNESS								
Access to affordable dental insurance coverage (N=37)	3.54	2.7	13.5	32.4	29.7	21.6	0.0	99.9
Access to affordable health insurance coverage (N=37)	3.89	2.7	2.7	21.6	48.6	24.3	0.0	99.9
Access to affordable healthcare (N=37)	3.68	2.7	5.4	35.1	35.1	21.6	0.0	99.9
Access to affordable prescription drugs (N=37)	3.54	2.7	13.5	29.7	35.1	18.9	0.0	99.9
Access to affordable vision insurance coverage (N=37)	3.38	2.7	13.5	43.2.	24.3	16.2	0.0	99.9
Access to technology for health records and health education (N=37)	2.76	5.4	32.4	45.9	13.5	2.7	0.0	99.9

Statements	Mean**	Percent of respondents*						
		Level of attention needed						Total
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	
Availability of behavioral health (e.g., substance abuse) providers (N=37)	3.81	2.7	5.4	35.1	21.6	35.1	0.0	99.9
Availability of doctors, physician assistants, or nurse practitioners (N=37)	3.35	5.4	8.1	45.9	27.0	13.5	0.0	99.9
Availability of health care services for Native people (N=33)	2.56	15.2	27.3	24.2	9.1	6.1	18.2	100.1
Availability of health care services for New Americans (N=34)	2.89	8.8	23.5	26.5	14.7	8.8	17.6	99.9
Availability of mental health providers (N=36)	4.11	0.0	2.8	27.8	25.0	44.4	0.0	100.0
Availability of non-traditional hours (e.g., evenings, weekends) (N=36)	3.56	0.0	11.1	41.7	27.8	19.4	0.0	100.0
Availability of prevention programs and services (e.g., Better Balance, Diabetes Prevention) (N=36)	2.97	2.8	25.0	47.2	22.2	2.8	0.0	100.0
Availability of specialist physicians (N=37)	3.46	0.0	13.5	37.8	37.8	10.8	0.0	99.9
Coordination of care between providers and services (N=36)	3.33	2.8	8.3	52.8	25.0	11.1	0.0	100.0
Timely access to medical care providers (N=37)	2.70	10.8	24.3	51.4	10.8	2.7	0.0	100.0
Timely access to dental care providers (N=36)	3.06	5.6	19.4	50.0	13.9	11.1	0.0	100.0
Timely access to vision care providers (N=36)	2.67	8.3	30.6	50.0	8.3	2.8	0.0	100.0
Use of emergency room services for primary healthcare (N=37)	3.38	2.7	16.2	35.1	32.4	13.5	0.0	99.9
MENTAL HEALTH AND SUBSTANCE ABUSE								
Alcohol use and abuse (N=36)	3.56	0.0	5.6	44.4	38.9	11.1	0.0	100.0
Dementia and Alzheimer's disease (N=37)	3.51	0.0	5.4	54.1	24.3	16.2	0.0	100.0

Statements	Mean**	Percent of respondents*						
		Level of attention needed						Total
		1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	
Depression (N=36)	3.75	0.0	5.6	27.8	52.8	13.9	0.0	100.1
Drug use and abuse (e.g., prescription drugs, synthetic opioids, marijuana, heroin, cocaine) (N=36)	3.67	0.0	8.3	27.8	52.8	11.1	0.0	100.0
Exposure to secondhand smoke (N=36)	2.97	0.0	30.6	47.2	16.7	5.6	0.0	100.1
Smoking and tobacco use (N=36)	3.19	0.0	16.7	55.6	19.4	8.3	0.0	100.0
Stress (N=36)	3.47	0.0	13.9	33.3	44.4	8.3	0.0	99.9
Suicide (N=35)	2.97	0.0	37.1	34.3	22.9	5.7	0.0	100.0

*Percentages may not total 100.0 due to rounding.

**NA (not applicable) responses were excluded when calculating the Means. As a result, the number of responses (N) in Appendix Table 1, which reflect total responses, may differ from the Ns in Figures 1 through 7, which exclude NA.

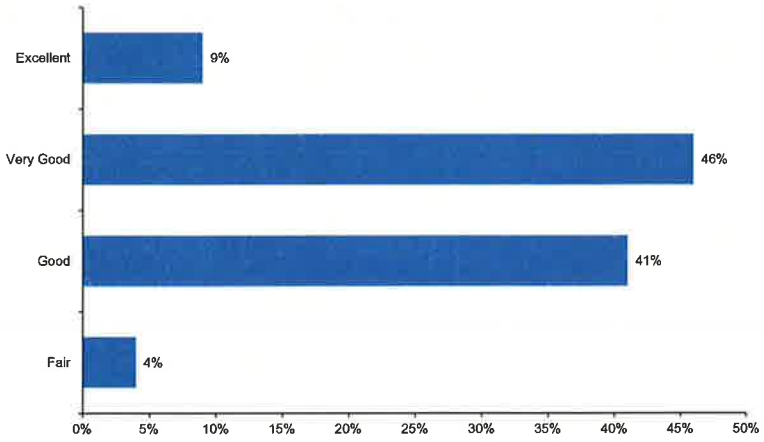
Resident Survey

Jackson CHNA Survey Report

February 27, 2018

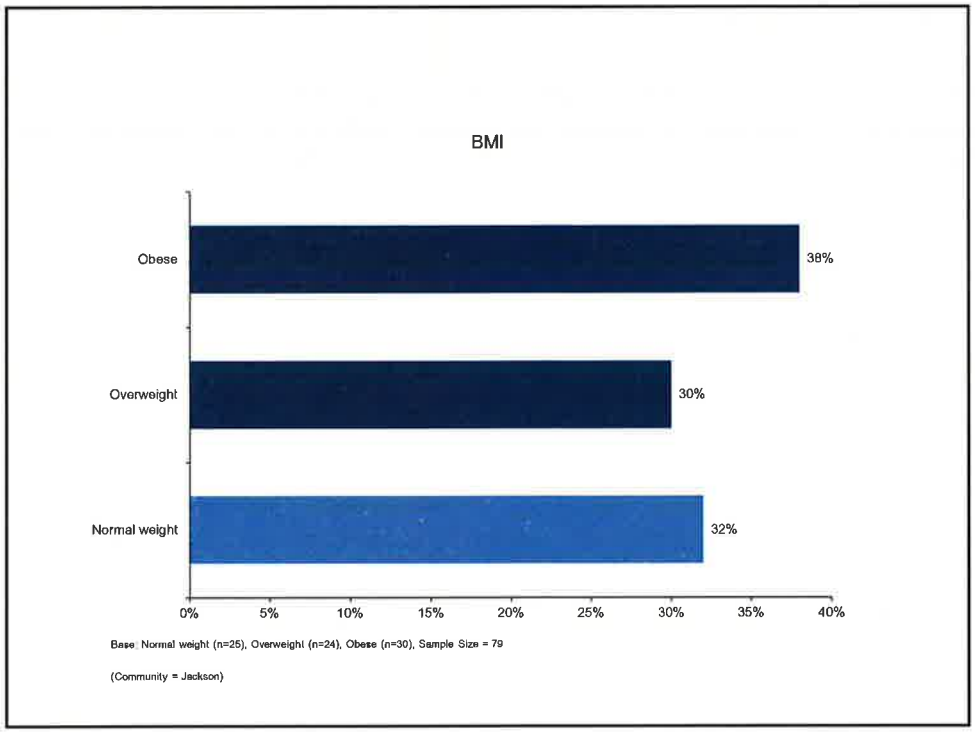
Charts Exported by MarketSight®

How would you rate your health?



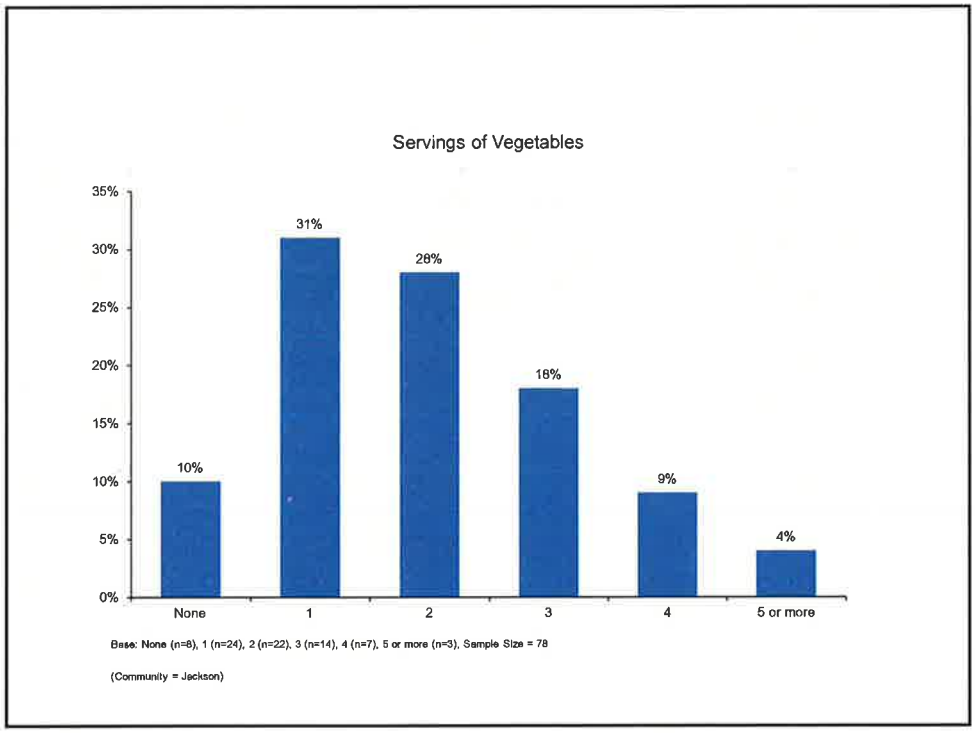
Base: Fair (n=3), Good (n=33), Very Good (n=37), Excellent (n=7), Sample Size = 80

(Community = Jackson)



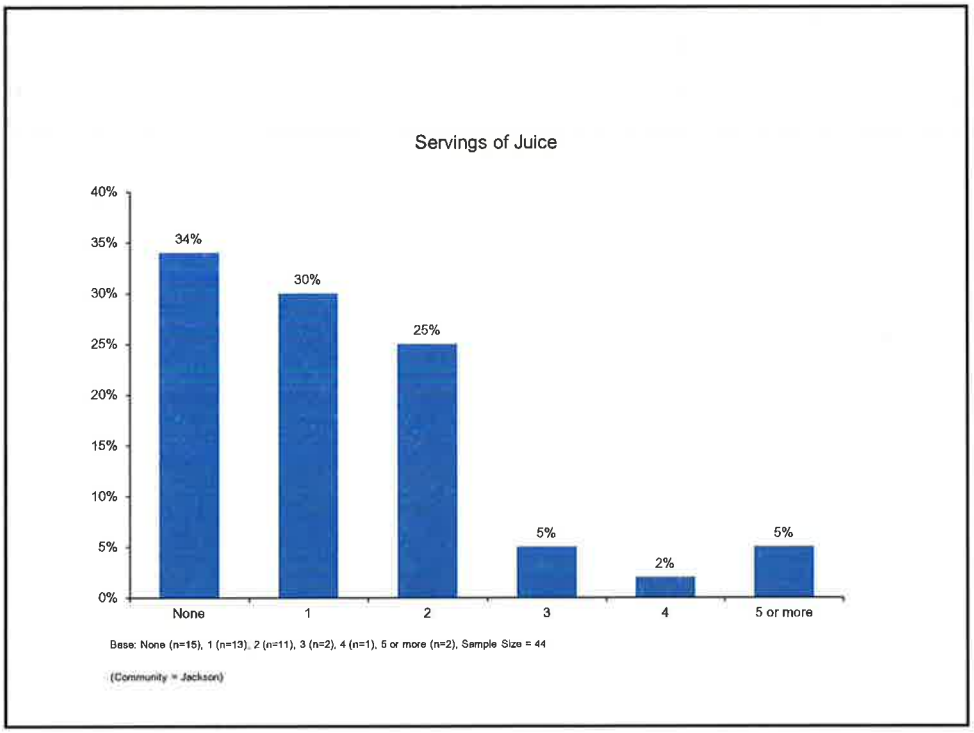
Base: Normal weight (n=25), Overweight (n=24), Obese (n=30), Sample Size = 79

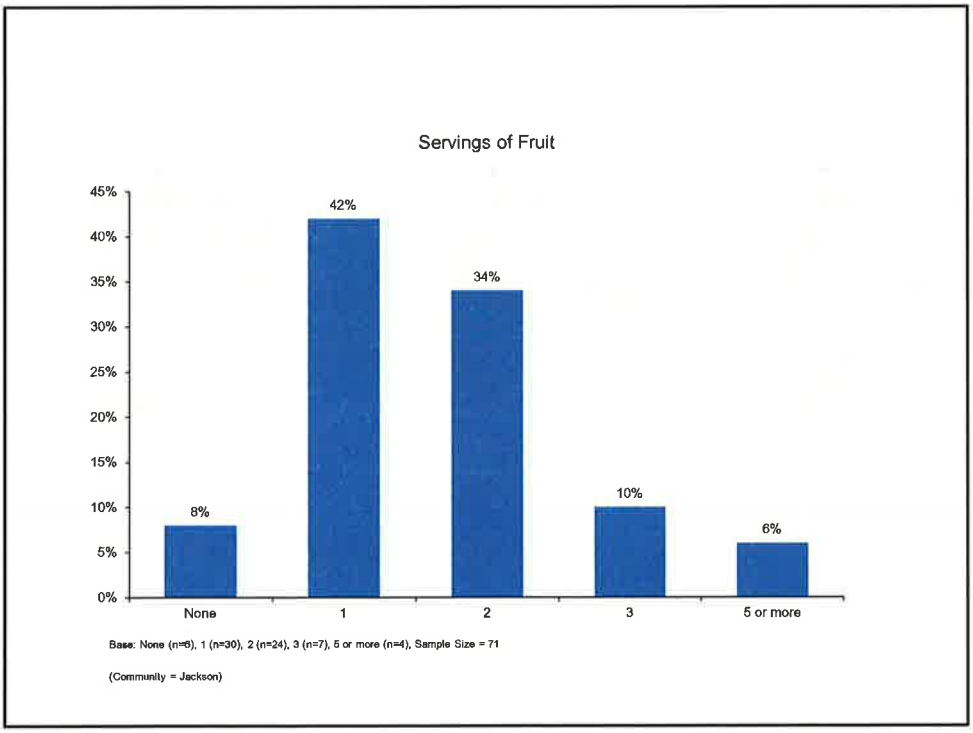
(Community = Jackson)

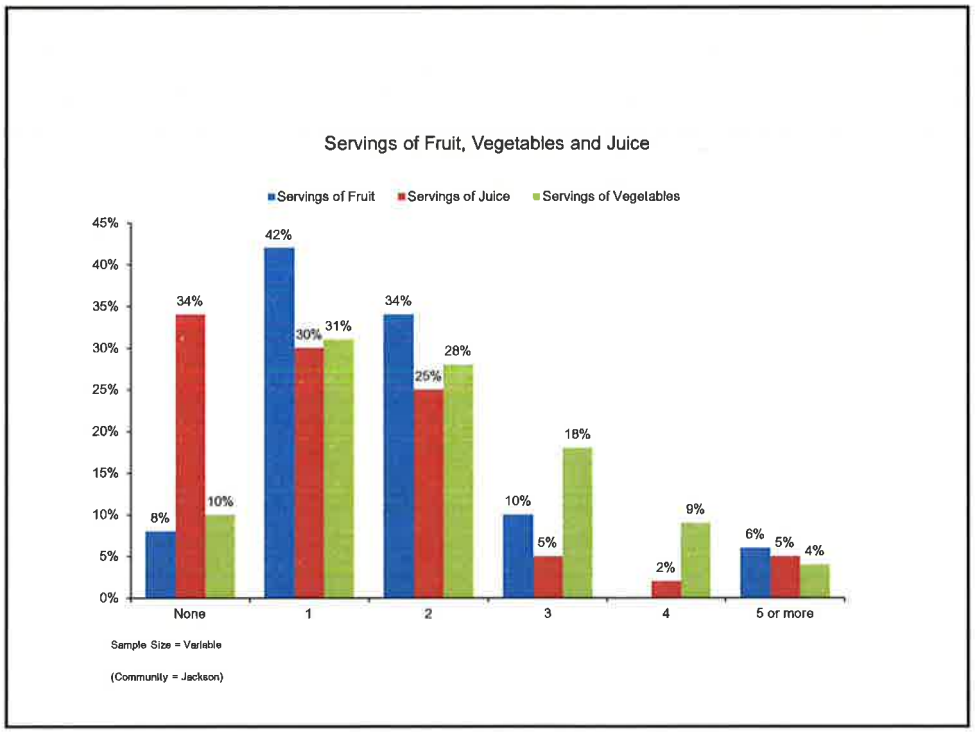


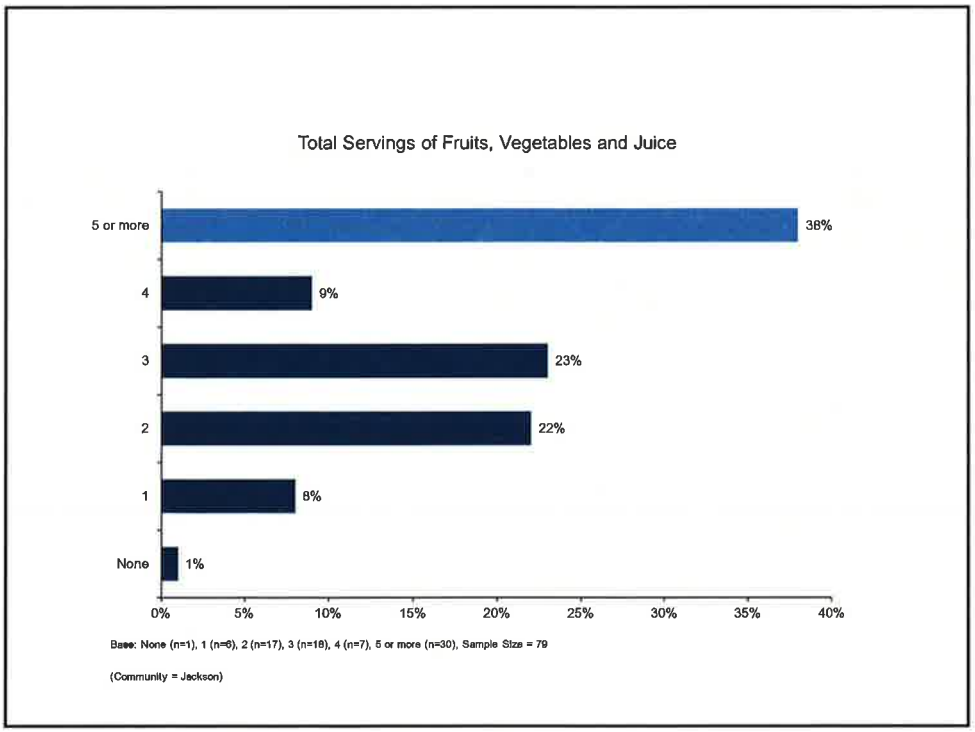
Base: None (n=8), 1 (n=24), 2 (n=22), 3 (n=14), 4 (n=7), 5 or more (n=3), Sample Size = 78

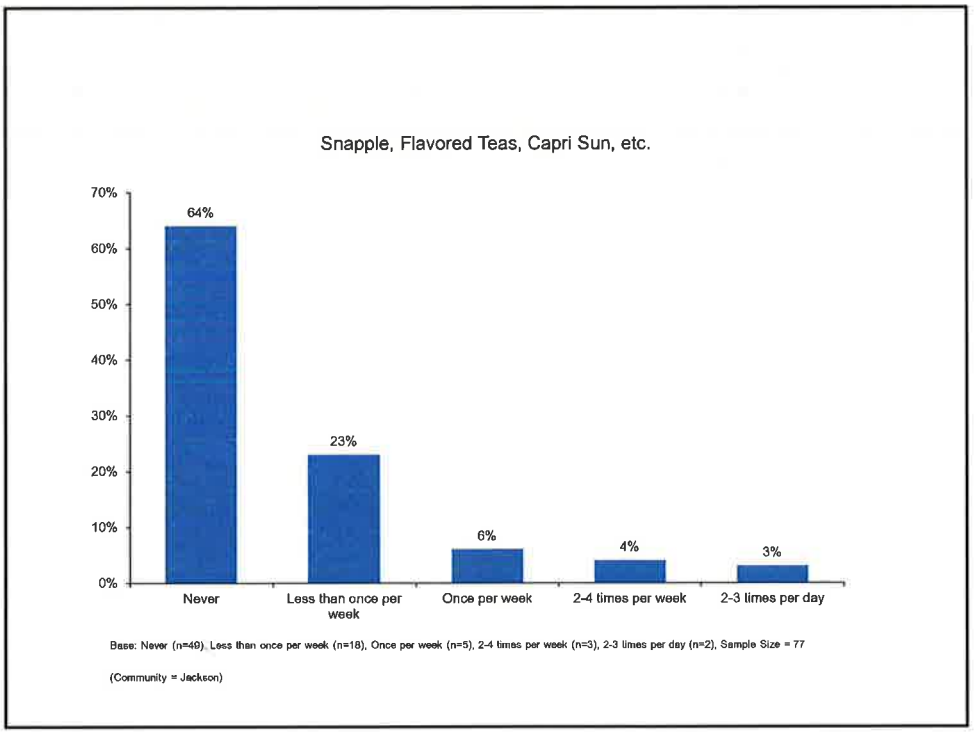
(Community = Jackson)

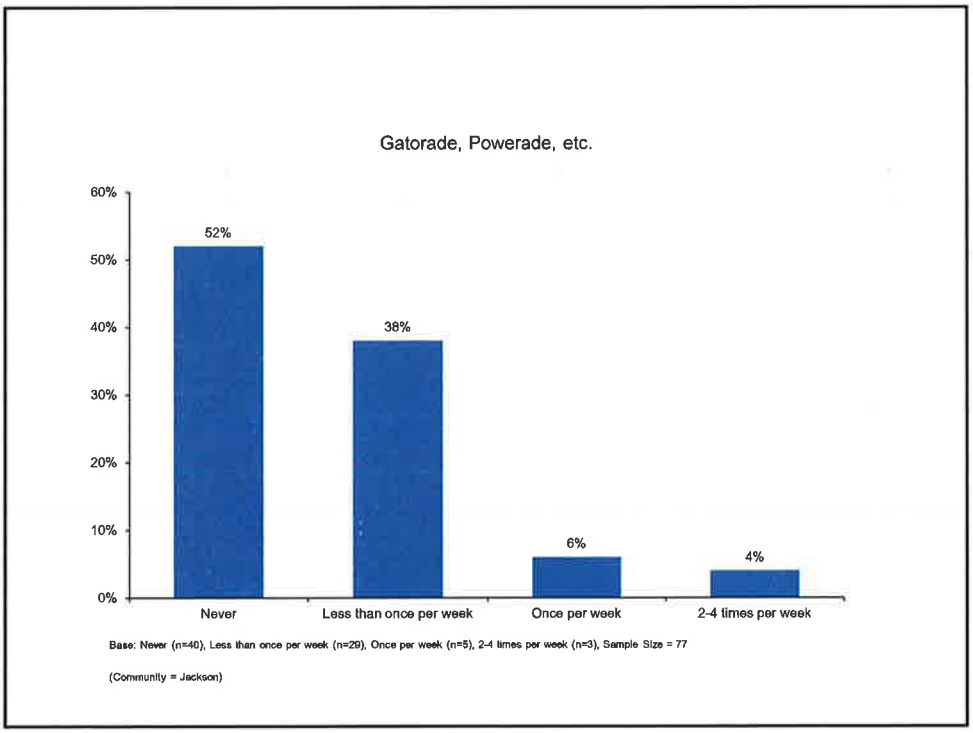

Servings of Juice
40%
35%
30%
25%
20%
15%
10%
5%
0%
34%
30%
25%
5%
2%
5%
None
1
2
3
4
5 or more
Base: None (n=15), 1 (n=13), 2 (n=11), 3 (n=2), 4 (n=1), 5 or more (n=2), Sample Size = 44
(Community = Jackson)


Servings of Fruit
45%
40%
35%
30%
25%
20%
15%
10%
5%
0%
8%
42%
34%
10%
6%
None
1
2
3
5 or more
Base: None (n=6), 1 (n=30), 2 (n=24), 3 (n=7), 5 or more (n=4), Sample Size = 71
(Community = Jackson)

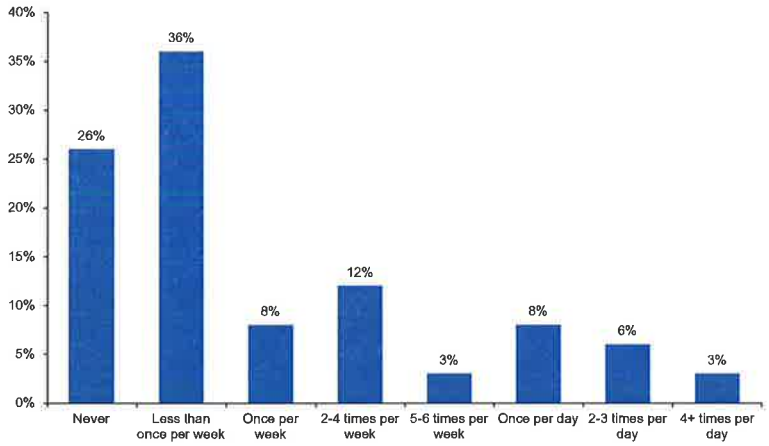

Servings of Fruit, Vegetables and Juice
Servings of Fruit
Servings of Juice
Servings of Vegetables
45%
40%
35%
30%
25%
20%
15%
10%
5%
0%
8%
34%
10%
42%
30%
31%
34%
25%
28%
10%
5%
18%
2%
9%
6%
5%
4%
None
1
2
3
4
5 or more
Sample Size = Variable
(Community = Jackson)


Total Servings of Fruits, Vegetables and Juice
5 or more
38%
4
9%
3
23%
2
22%
1
8%
None
1%
0%
5%
10%
15%
20%
25%
30%
35%
40%
Base: None (n=1), 1 (n=6), 2 (n=17), 3 (n=18), 4 (n=7), 5 or more (n=30), Sample Size = 79
(Community = Jackson)


Snapple, Flavored Teas, Capri Sun, etc.
70%
60%
50%
40%
30%
20%
10%
0%
64%
23%
6%
4%
3%
Never
Less than once per week
Once per week
2-4 times per week
2-3 times per day
Base: Never (n=49), Less than once per week (n=18), Once per week (n=5), 2-4 times per week (n=3), 2-3 times per day (n=2), Sample Size = 77
(Community = Jackson)


Gatorade, Powerade, etc.
60%
50%
40%
30%
20%
10%
0%
52%
38%
6%
4%
Never
Less than once per week
Once per week
2-4 times per week
Base: Never (n=40), Less than once per week (n=29), Once per week (n=5), 2-4 times per week (n=3), Sample Size = 77
(Community = Jackson)

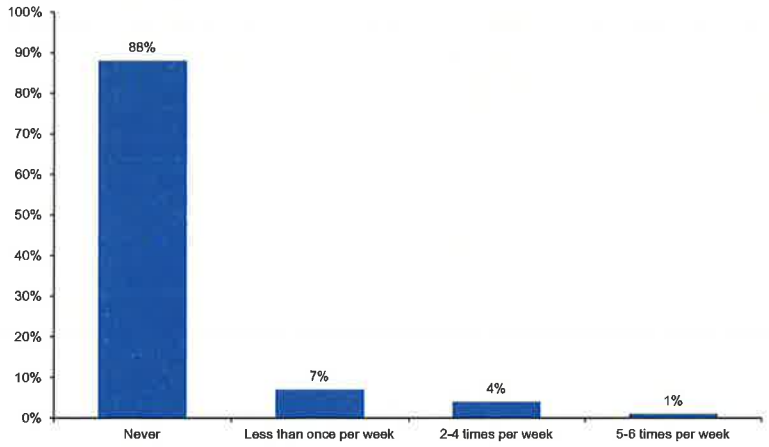
Soda or Pop



Base: Never (n=20), Less than once per week (n=28), Once per week (n=8), 2-4 times per week (n=9), 5-6 times per week (n=2), Once per day (n=6), 2-3 times per day (n=5), 4+ times per day (n=2), Sample Size = 78

(Community = Jackson)

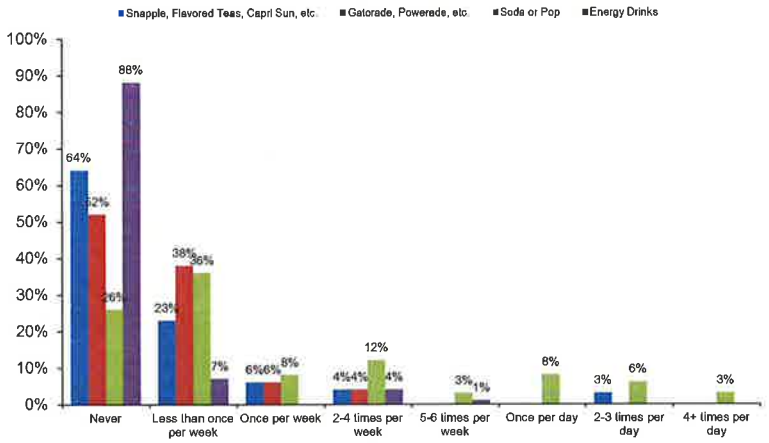
Energy Drinks



Base: Never (n=67), Less than once per week (n=5), 2-4 times per week (n=3), 5-6 times per week (n=1), Sample Size = 76

(Community = Jackson)

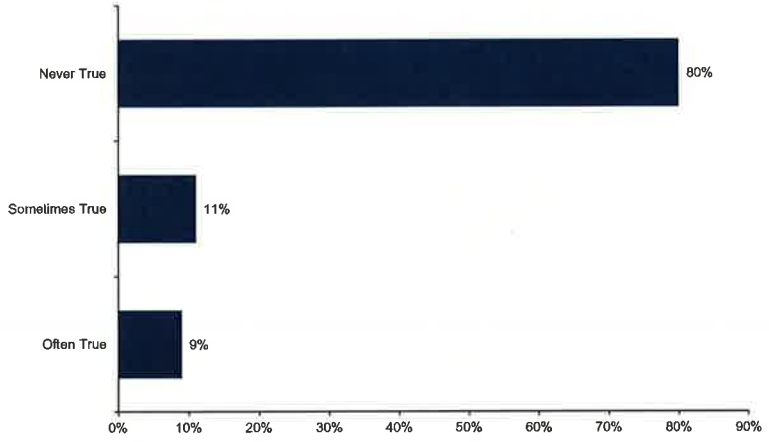
Sugar Sweetened Drinks



Sample Size = Variable

(Community = Jackson)

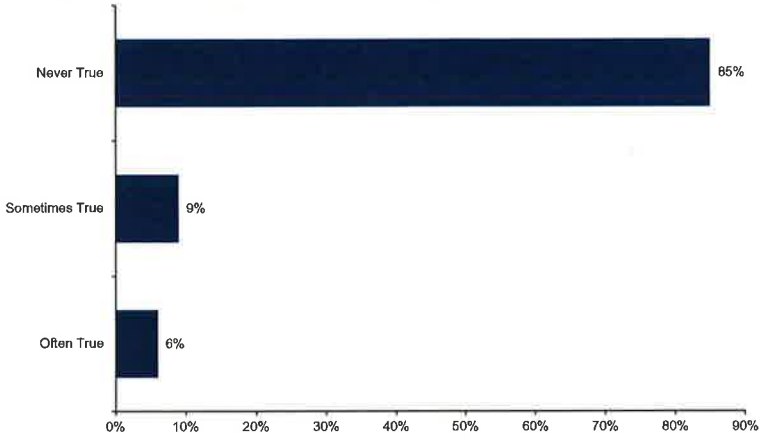
Worried whether our food would run out before we got money to buy more.



Base: Often True (n=7), Sometimes True (n=9), Never True (n=63), Sample Size = 79

(Community = Jackson)

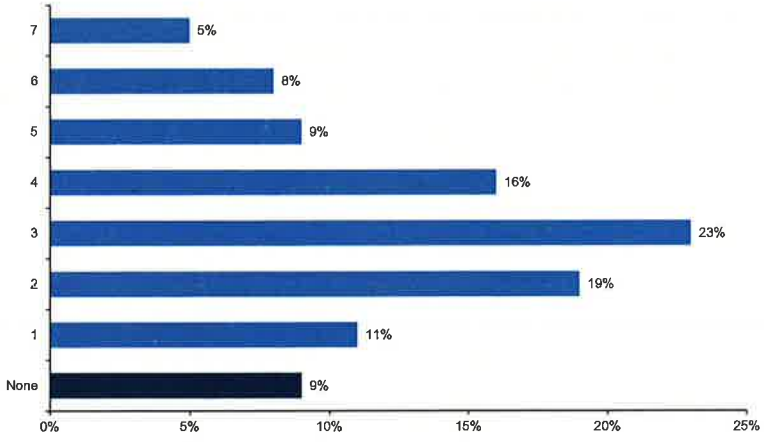
The food that we bought just didn't last, and we didn't have money to get more.



Base: Often True (n=5), Sometimes True (n=7), Never True (n=67), Sample Size = 79

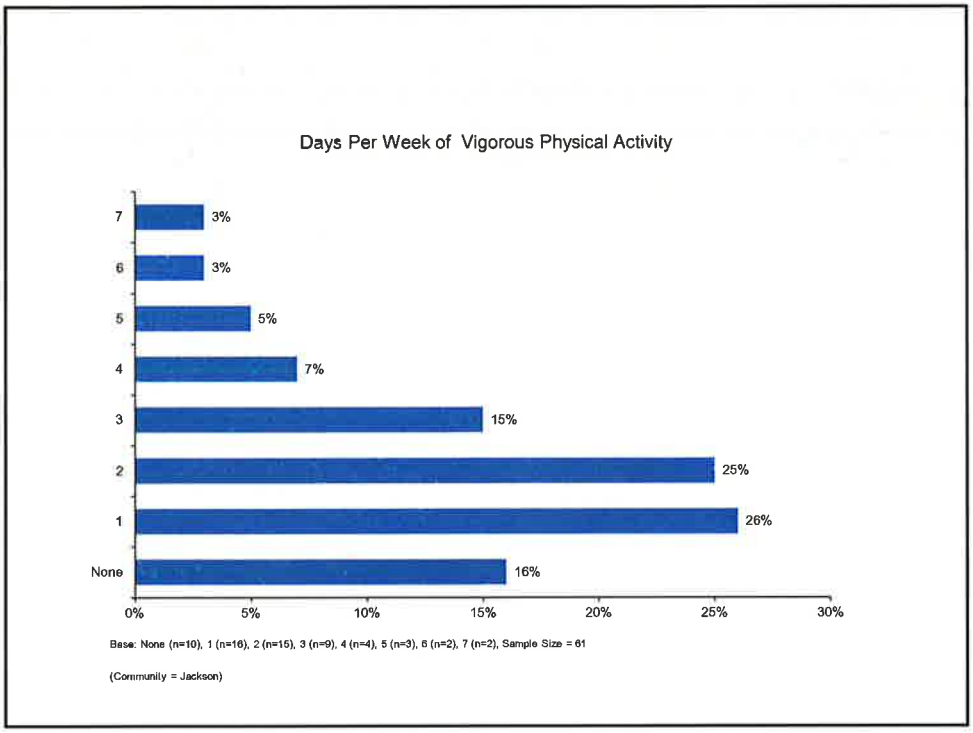
(Community = Jackson)

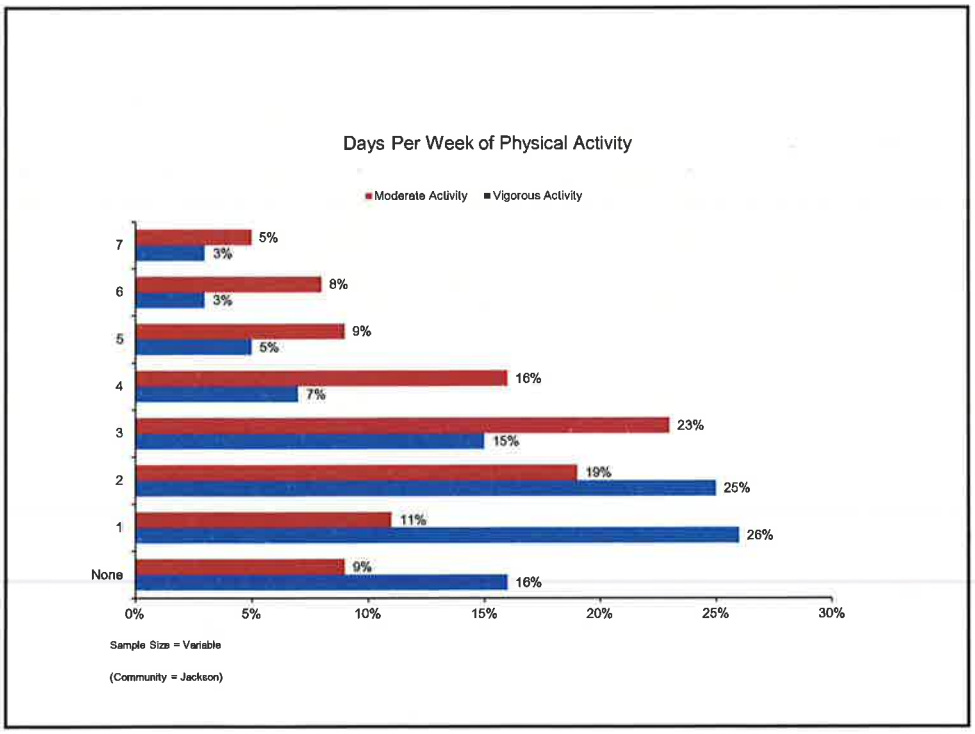
Days Per Week of Moderate Physical Activity

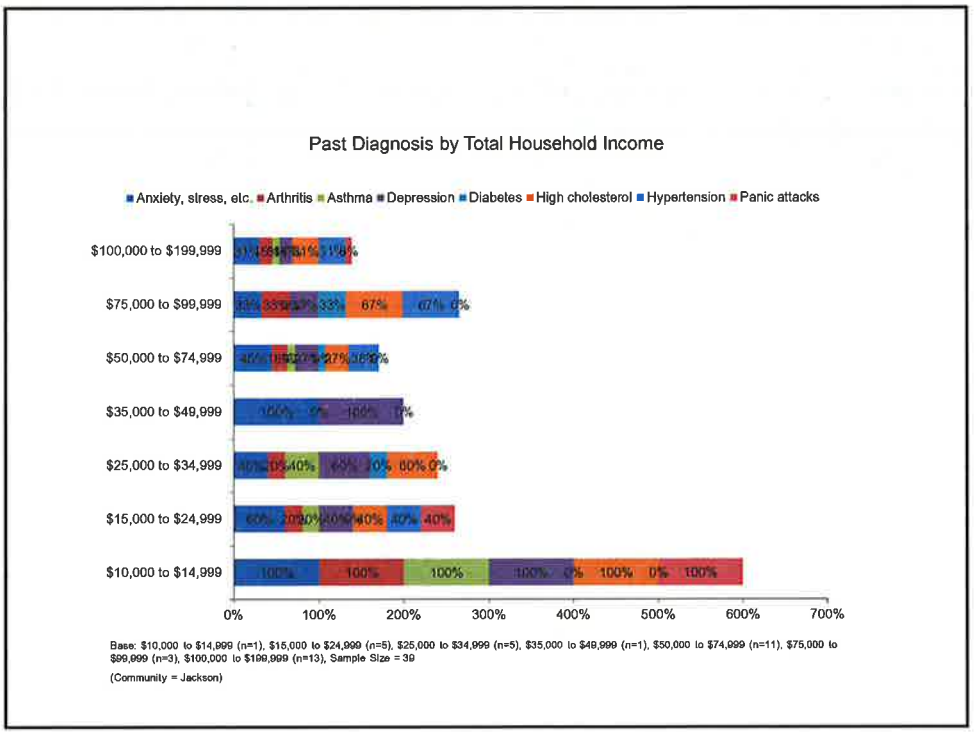


Base: None (n=7), 1 (n=8), 2 (n=14), 3 (n=17), 4 (n=12), 5 (n=7), 6 (n=6), 7 (n=4), Sample Size = 75

(Community = Jackson)

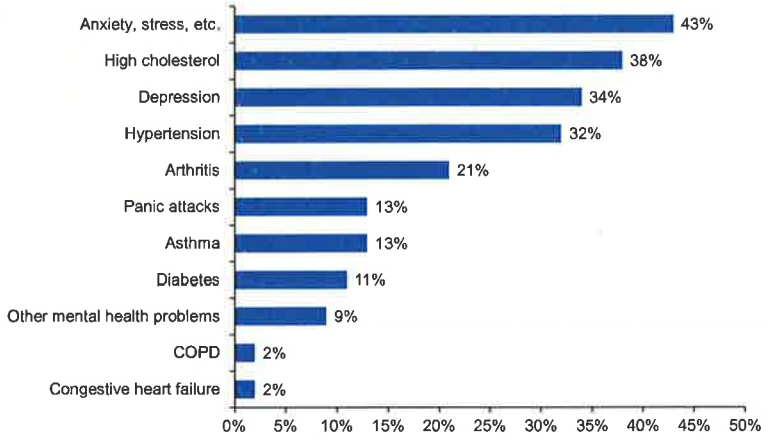

Days Per Week of Vigorous Physical Activity
7
6
5
4
3
2
1
None
3%
3%
5%
7%
15%
25%
26%
16%
0%
5%
10%
15%
20%
25%
30%
Base: None (n=10), 1 (n=16), 2 (n=15), 3 (n=9), 4 (n=4), 5 (n=3), 6 (n=2), 7 (n=2), Sample Size = 61
(Community = Jackson)


Days Per Week of Physical Activity
Moderate Activity
Vigorous Activity
7
6
5
4
3
2
1
None
5%
3%
8%
3%
9%
5%
16%
7%
23%
15%
19%
25%
11%
26%
9%
16%
0%
5%
10%
15%
20%
25%
30%
Sample Size = Variable
(Community = Jackson)

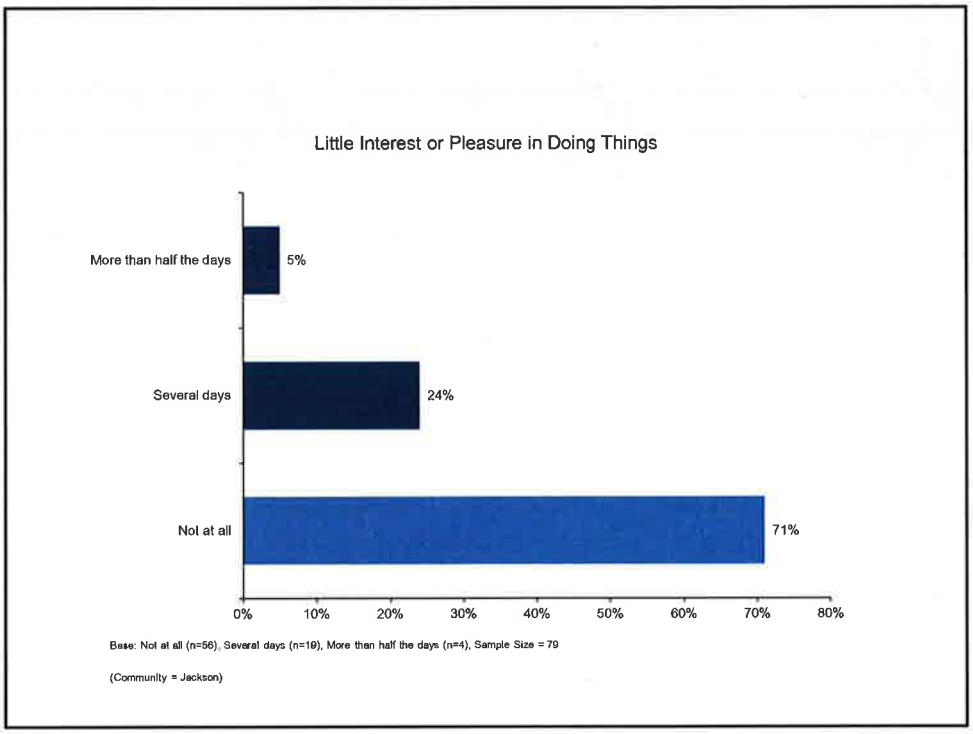


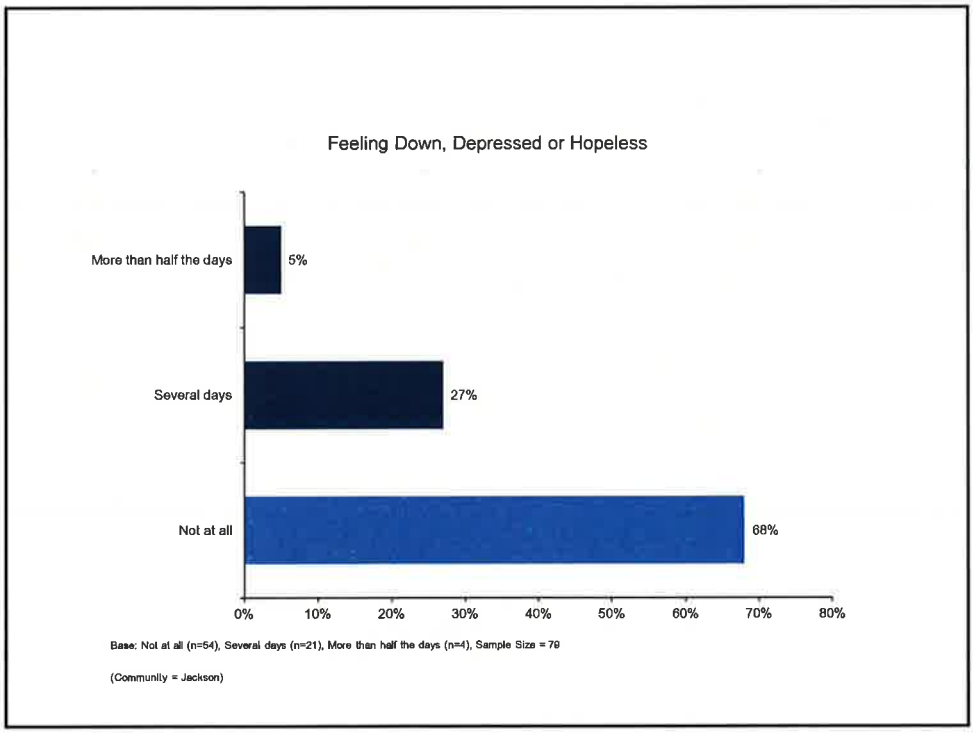
Base: $10,000 to $14,999 (n=1), $15,000 to $24,999 (n=5), $25,000 to $34,999 (n=5), $35,000 to $49,999 (n=1), $50,000 to $74,999 (n=11), $75,000 to $99,999 (n=3), $100,000 to $199,999 (n=13), Sample Size = 39

(Community = Jackson)

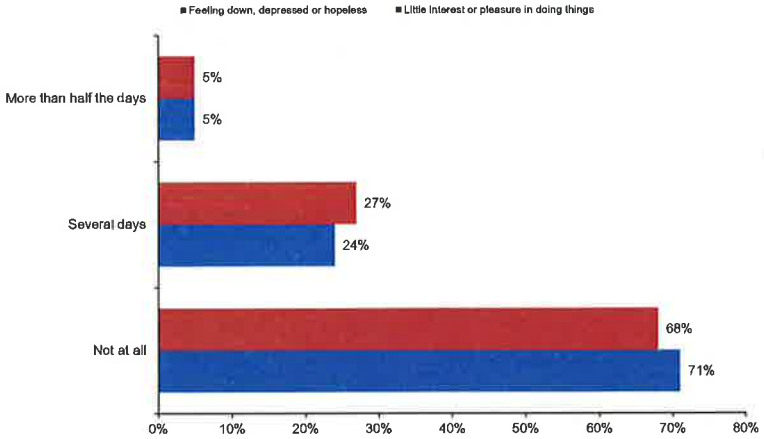


Base: Anxiety, stress, etc. (n=20), Arthritis (n=10), Asthma (n=6), Congestive heart failure (n=1), COPD (n=1), Depression (n=16), Diabetes (n=5), High cholesterol (n=18), Hypertension (n=15), Other mental health problems (n=4), Panic attacks (n=6), Sample Size (Community = Jackson)


Little Interest or Pleasure in Doing Things
More than half the days
5%
Several days
24%
Not at all
71%
0%
10%
20%
30%
40%
50%
60%
70%
80%
Base: Not at all (n=56), Several days (n=19), More than half the days (n=4), Sample Size = 79
(Community = Jackson)


Feeling Down, Depressed or Hopeless
More than half the days
5%
Several days
27%
Not at all
68%
0%
10%
20%
30%
40%
50%
60%
70%
80%
Base: Not at all (n=54), Several days (n=21), More than half the days (n=4), Sample Size = 79
(Community = Jackson)

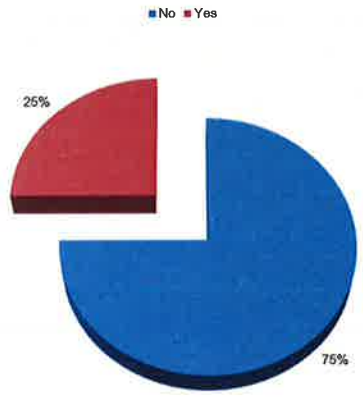
Over the past two weeks, how often have you been bothered by either of the following issues?



Sample Size = 79

(Community = Jackson)

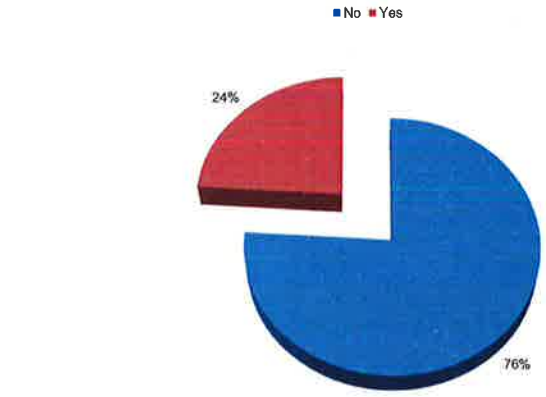
Have you smoked at least 100 cigarettes in your entire life?



Base: Yes (n=19), No (n=58), Sample Size = 77

(Community = Jackson)

Has someone smoked cigarettes, cigars or used vape pens anywhere inside your home?



Base: Yes (n=19), No (n=60), Sample Size = 79

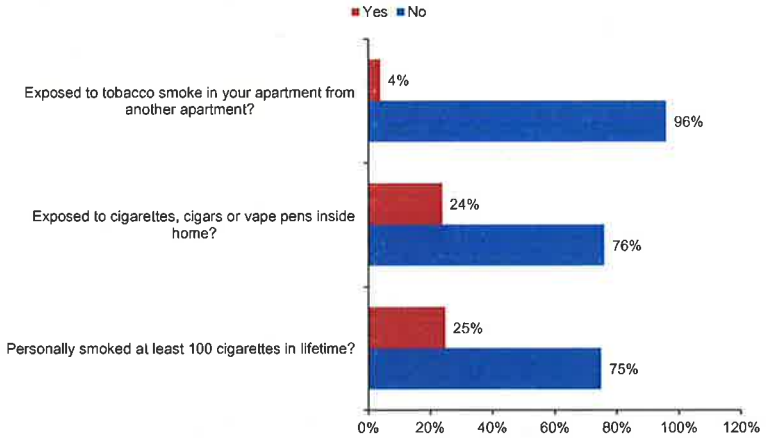
(Community = Jackson)

Have you smelled tobacco smoke in your apartment that comes from another apartment?

Base: Yes (n=3), No (n=76), Sample Size = 79

(Community = Jackson)

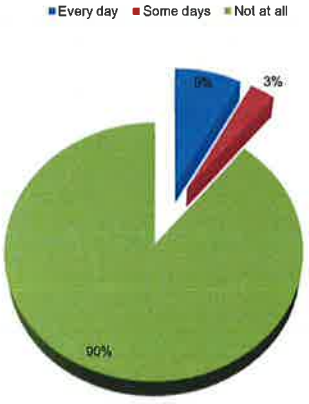
Exposure to Tobacco Smoke



Base: Personally smoked at least 100 cigarettes in lifetime? (n=77), Exposed to cigarettes, cigars or vape pens inside home? (n=79), Exposed to tobacco smoke in your apartment from another apartment? (n=79), Sample Size = Variable

(Community = Jackson)

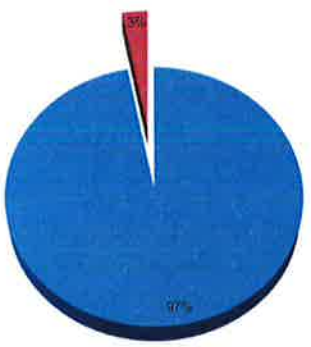
Do you currently smoke cigarettes?



Base: Not at all (n=71), Some days (n=2), Every day (n=6), Sample Size = 79

(Community = Jackson)

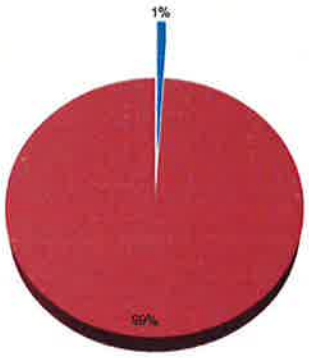
Do you currently use chewing tobacco?



Base: Not at all (n=77), Every day (n=2), Sample Size = 79

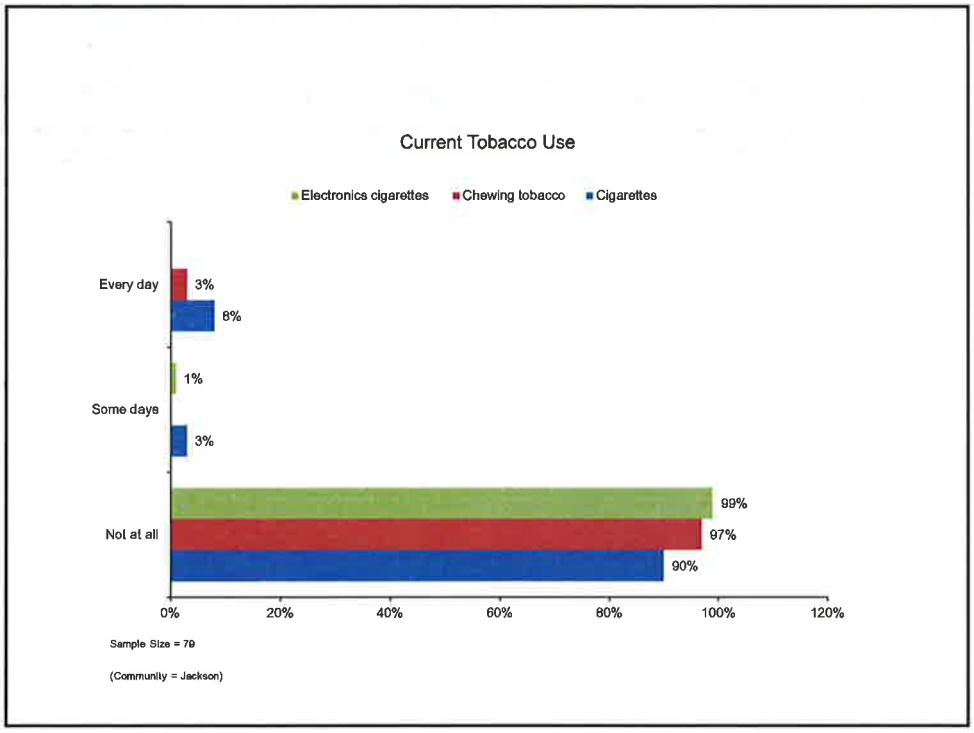
(Community = Jackson)

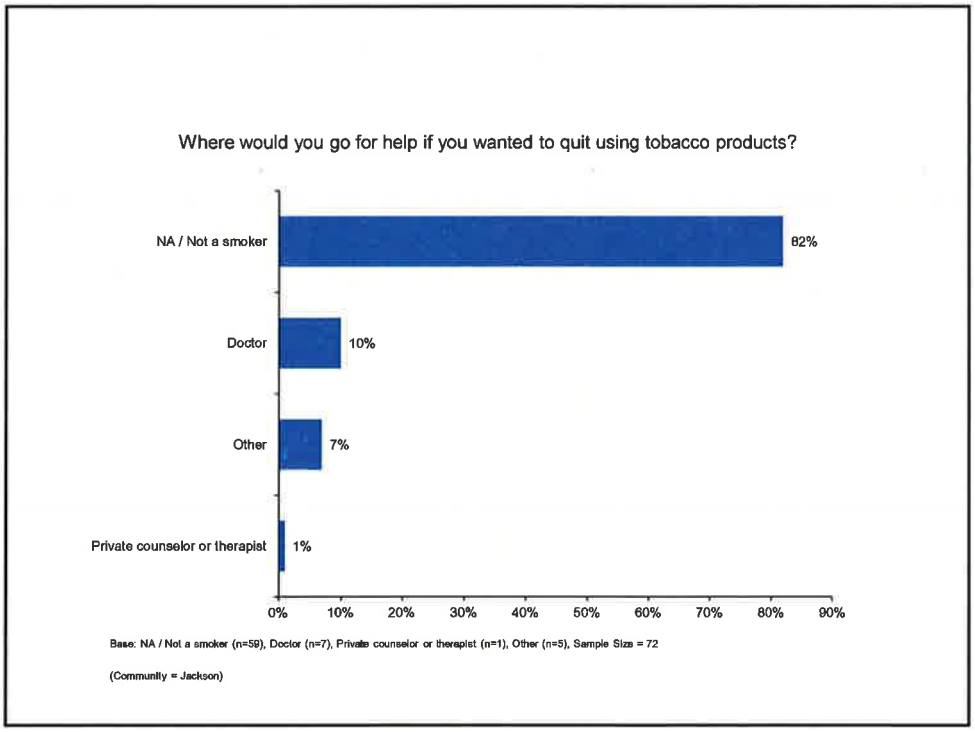
Do you currently use electronics cigarettes or vape?



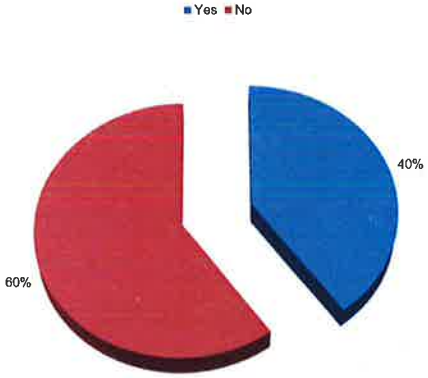
Base: Not at all (n=78), Some days (n=1), Sample Size = 79

(Community = Jackson)


Current Tobacco Use
Electronics cigarettes
Chewing tobacco
Cigarettes
Every day
3%
6%
Some days
1%
3%
Not at all
99%
97%
90%
0%
20%
40%
60%
80%
100%
120%
Sample Size = 79
(Community = Jackson)


Where would you go for help if you wanted to quit using tobacco products?
NA / Not a smoker
82%
Doctor
10%
Other
7%
Private counselor or therapist
1%
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
Base: NA / Not a smoker (n=59), Doctor (n=7), Private counselor or therapist (n=1), Other (n=5), Sample Size = 72
(Community = Jackson)

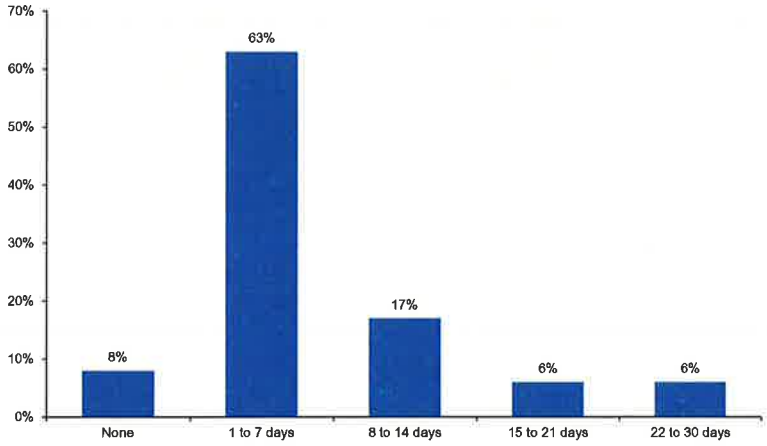
During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit? (Smokers only)



Base: Yes (n=4), No (n=6), Sample Size = 10

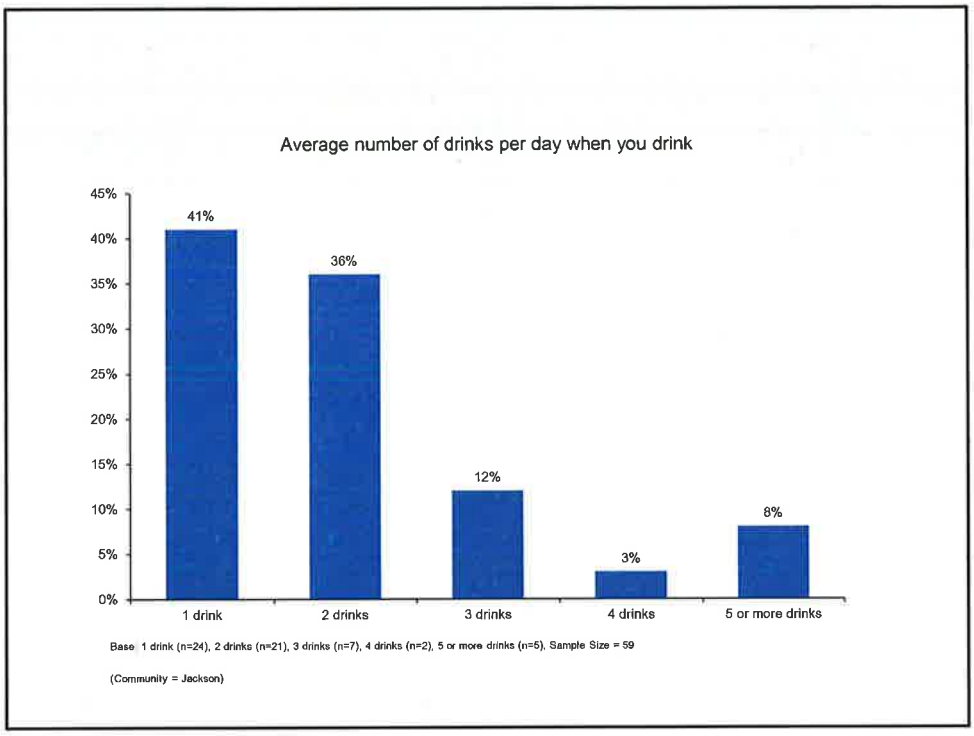
(Community = Jackson)

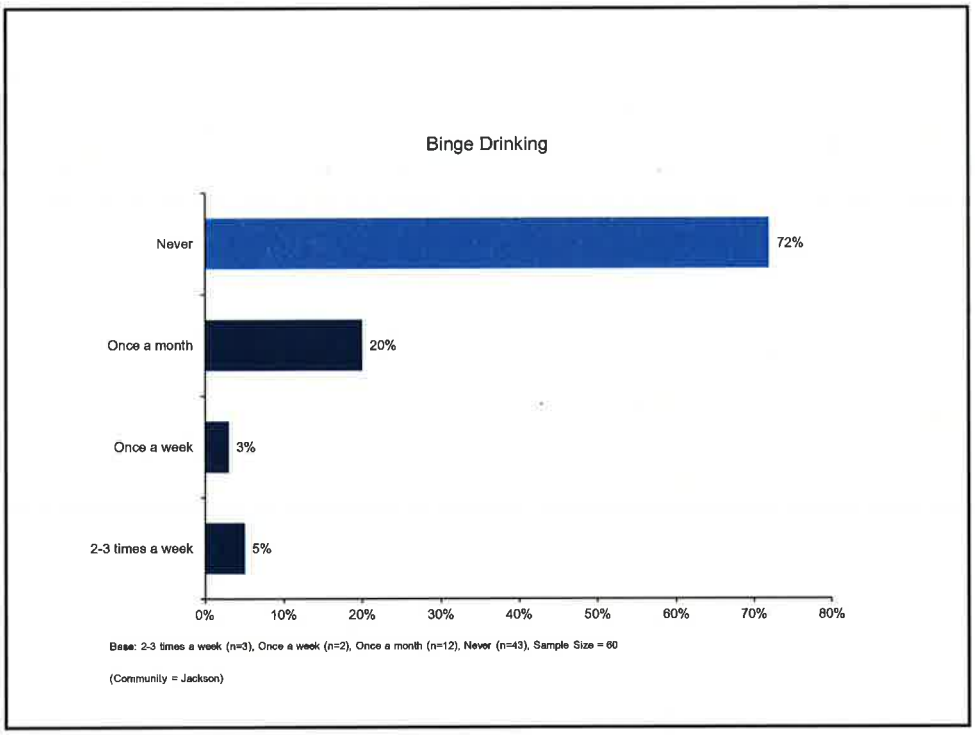
Number of days with at least 1 drink in the past 30 days



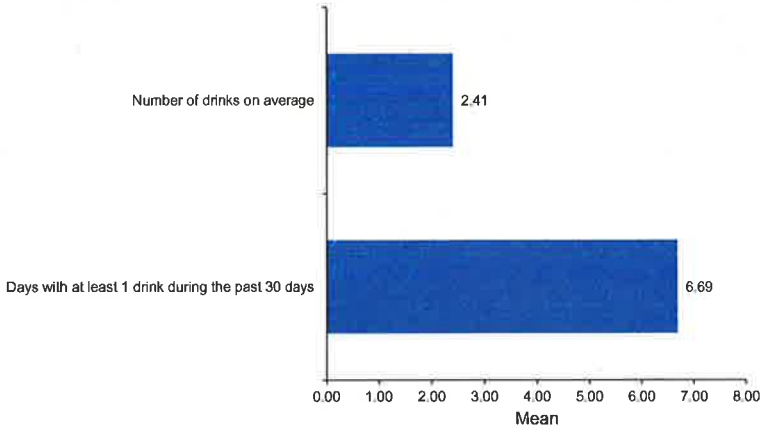
Base: None (n=5), 1 to 7 days (n=41), 8 to 14 days (n=11), 15 to 21 days (n=4), 22 to 30 days (n=4), Sample Size = 65

(Community = Jackson)


Average number of drinks per day when you drink
45%
40%
35%
30%
25%
20%
15%
10%
5%
0%
41%
36%
12%
3%
8%
1 drink
2 drinks
3 drinks
4 drinks
5 or more drinks
Base: 1 drink (n=24), 2 drinks (n=21), 3 drinks (n=7), 4 drinks (n=2), 5 or more drinks (n=5), Sample Size = 59
(Community = Jackson)


Binge Drinking
Never
Once a month
Once a week
2-3 times a week
72%
20%
3%
5%
0%
10%
20%
30%
40%
50%
60%
70%
80%
Base: 2-3 times a week (n=3), Once a week (n=2), Once a month (n=12), Never (n=43), Sample Size = 60
(Community = Jackson)

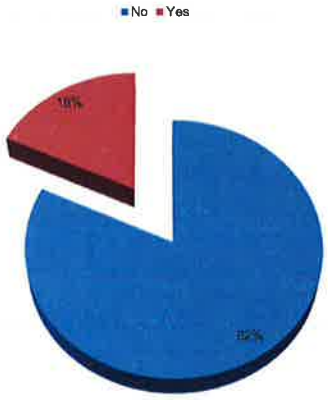
Average Alcohol Use During the Past 30 Days



Base: Days with at least 1 drink during the past 30 days (n=65), Number of drinks on average (n=59), Sample Size = Variable

(Community = Jackson)

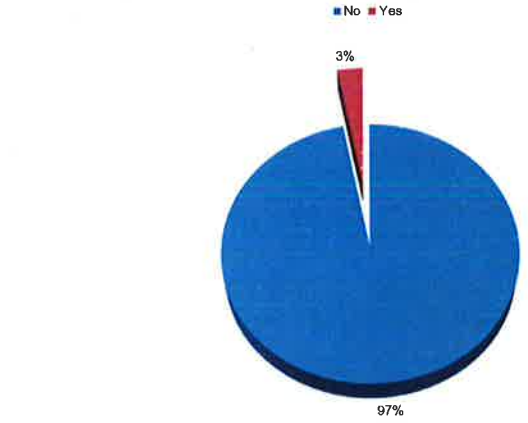
Has alcohol use had a harmful effect on you or a family member in the past two years?



Base: Yes (n=14), No (n=65), Sample Size = 79

(Community = Jackson)

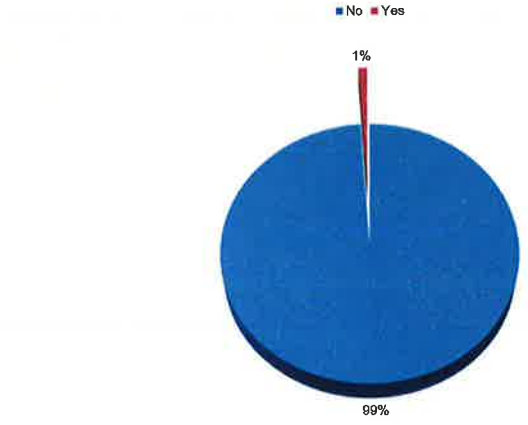
Have you ever wanted help with a prescription or non-prescription drug use?



Base: Yes (n=2), No (n=77), Sample Size = 79

(Community = Jackson)

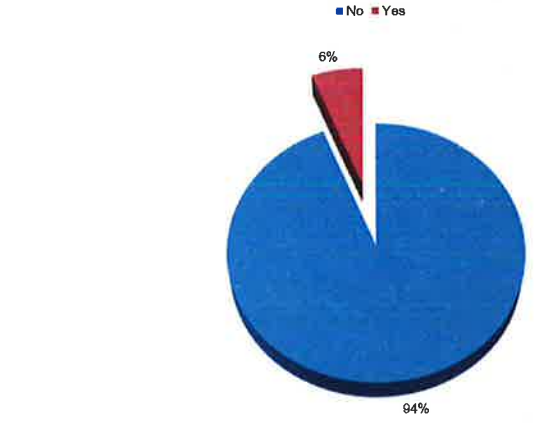
Has a family member or friend ever suggested that you get help for substance use?



Base: Yes (n=1), No (n=78), Sample Size = 79

(Community = Jackson)

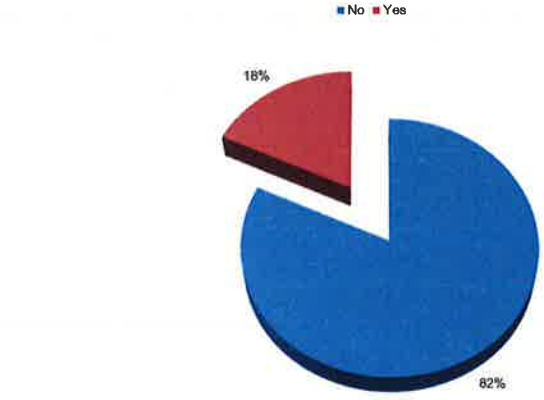
Has prescription or non-prescription drug use had a harmful effect on you or a family member in the past two years?



Base: Yes (n=5), No (n=74), Sample Size = 79

(Community = Jackson)

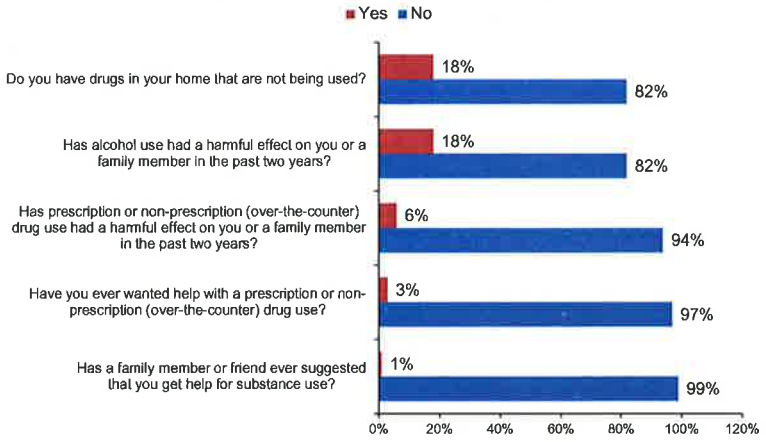
Do you have drugs in your home that are not being used?



Base: Yes (n=14), No (n=64), Sample Size = 78

(Community = Jackson)

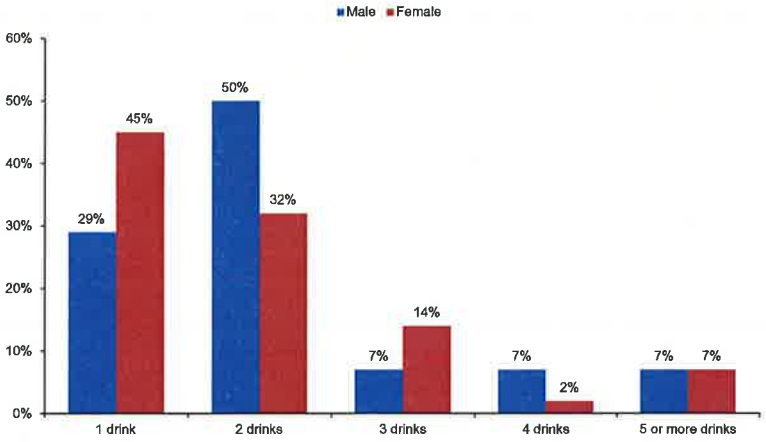
Drug and Alcohol Issues



Sample Size = Variable

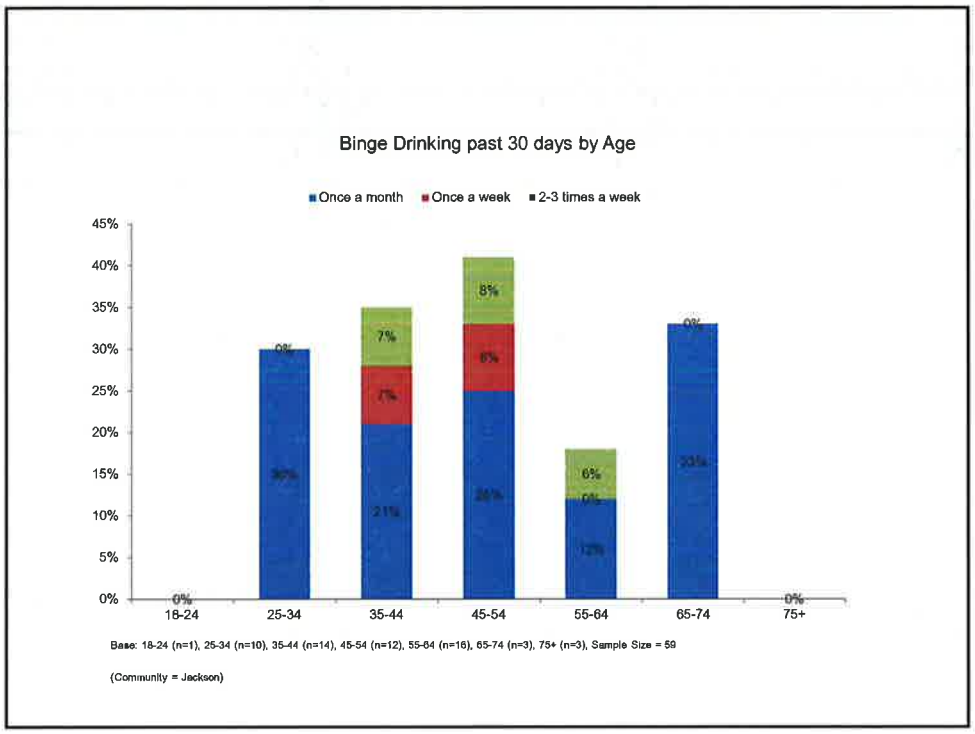
(Community = Jackson)

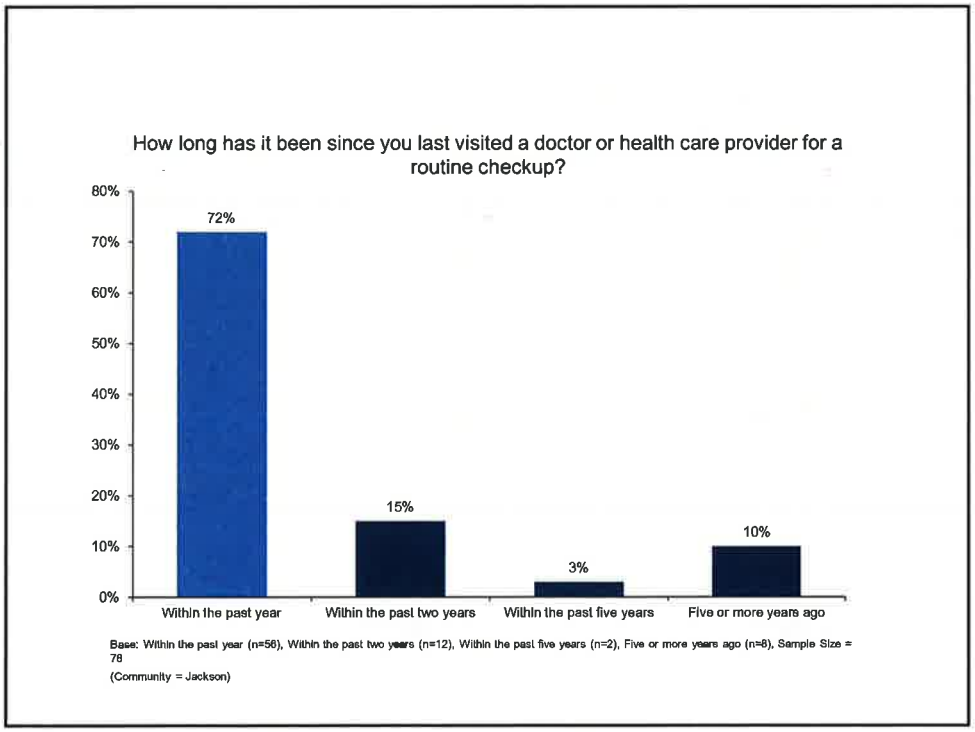
Average number of drinks per day when you drink by gender



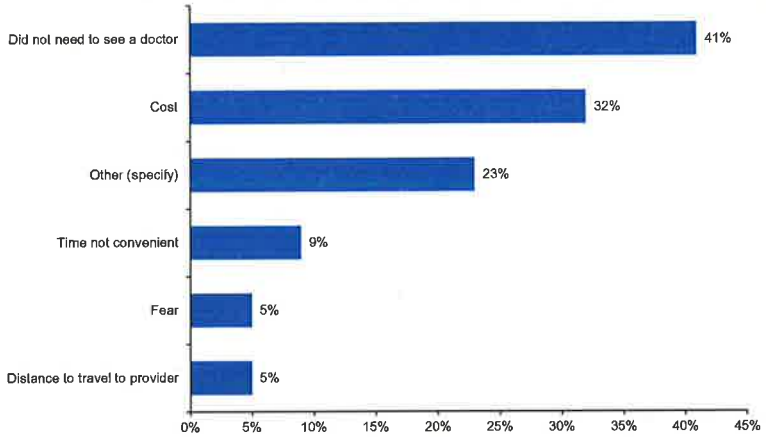
Base: 1 drink (n=24), 2 drinks (n=21), 3 drinks (n=7), 4 drinks (n=2), 5 or more drinks (n=4), Sample Size = 58

(Community = Jackson)


Binge Drinking past 30 days by Age
Once a month
Once a week
2-3 times a week
45%
40%
35%
30%
25%
20%
15%
10%
5%
0%
0%
30%
21%
7%
7%
8%
6%
25%
6%
0%
12%
33%
0%
18-24
25-34
35-44
45-54
55-64
65-74
75+
Base: 18-24 (n=1), 25-34 (n=10), 35-44 (n=14), 45-54 (n=12), 55-64 (n=16), 65-74 (n=3), 75+ (n=3), Sample Size = 59
(Community = Jackson)


How long has it been since you last visited a doctor or health care provider for a routine checkup?
80%
70%
60%
50%
40%
30%
20%
10%
0%
72%
15%
3%
10%
Within the past year
Within the past two years
Within the past five years
Five or more years ago
Base: Within the past year (n=56), Within the past two years (n=12), Within the past five years (n=2), Five or more years ago (n=8), Sample Size = 78
(Community = Jackson)

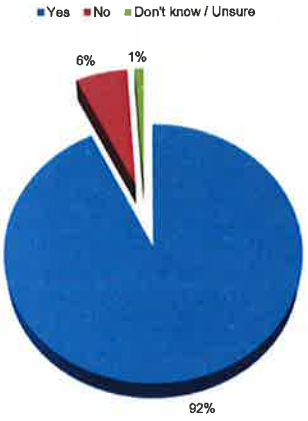
Barriers to Routine Checkup



Base: Distance to travel to provider (n=1), Cost (n=7), Fear (n=1), Time not convenient (n=2), Did not need to see a doctor (n=9), Other (specify) (n=5), Sample Size = 22

(Community = Jackson)

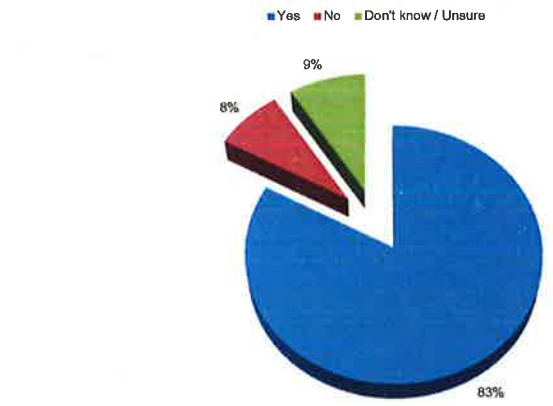
Has your medical provider reviewed the risks and benefits of screenings and preventive services with you?



Base: Yes (n=72), No (n=5), Don't know / Unsure (n=1), Sample Size = 78

(Community = Jackson)

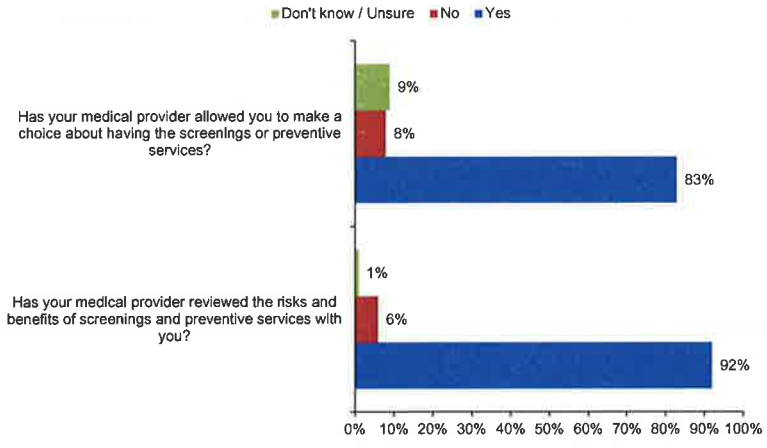
Has your medical provider allowed you to make a choice about having screenings or preventive services?



Base: Yes (n=64), No (n=6), Don't know / Unsure (n=7), Sample Size = 77

(Community = Jackson)

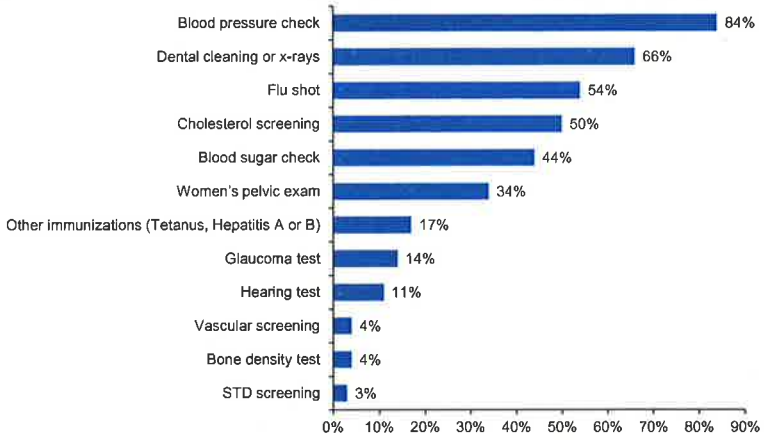
Screenings



Base: Has your medical provider allowed you to make a choice about having the screenings or preventive services? (n=77), Has your medical provider reviewed the risks and benefits of screenings and preventive services with you? (n=78), Sample Size = Variable

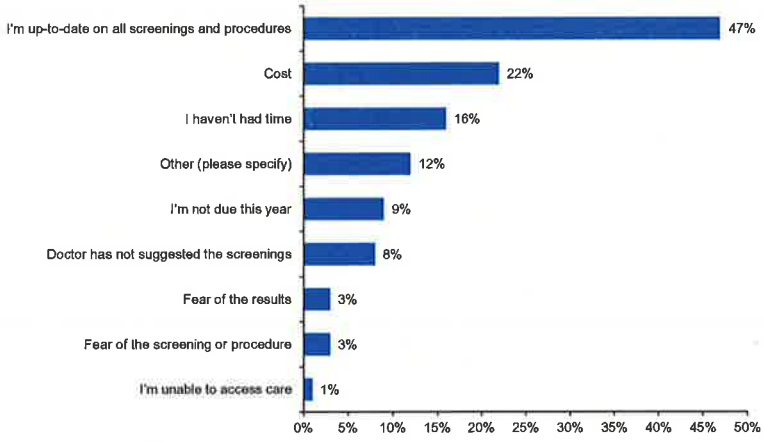
(Community = Jackson)

Preventive Procedures Last Year

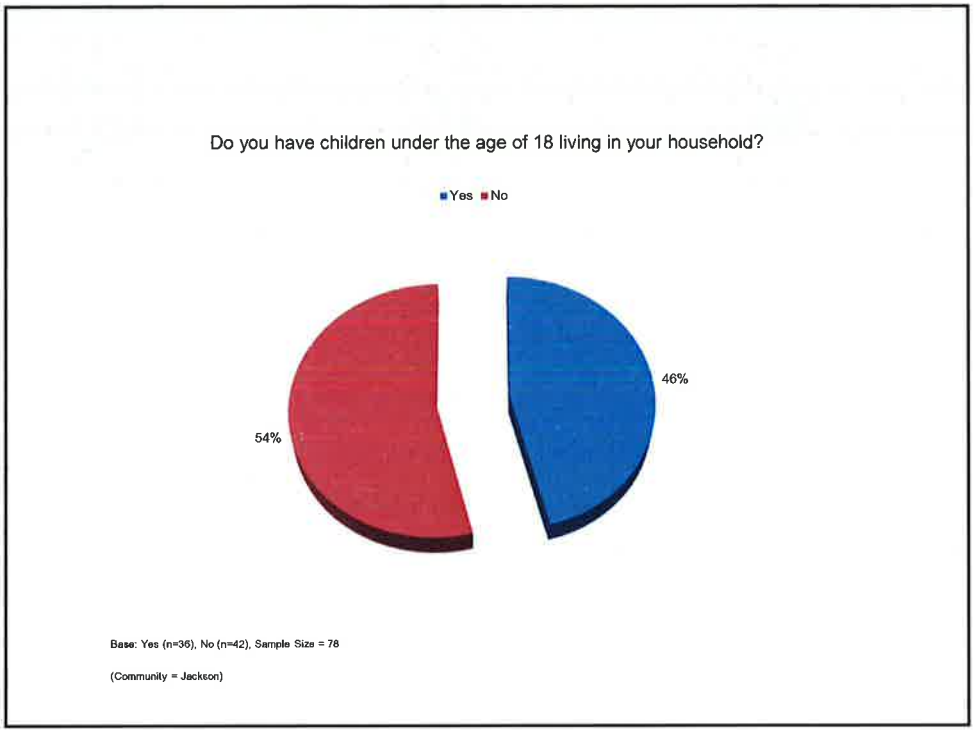


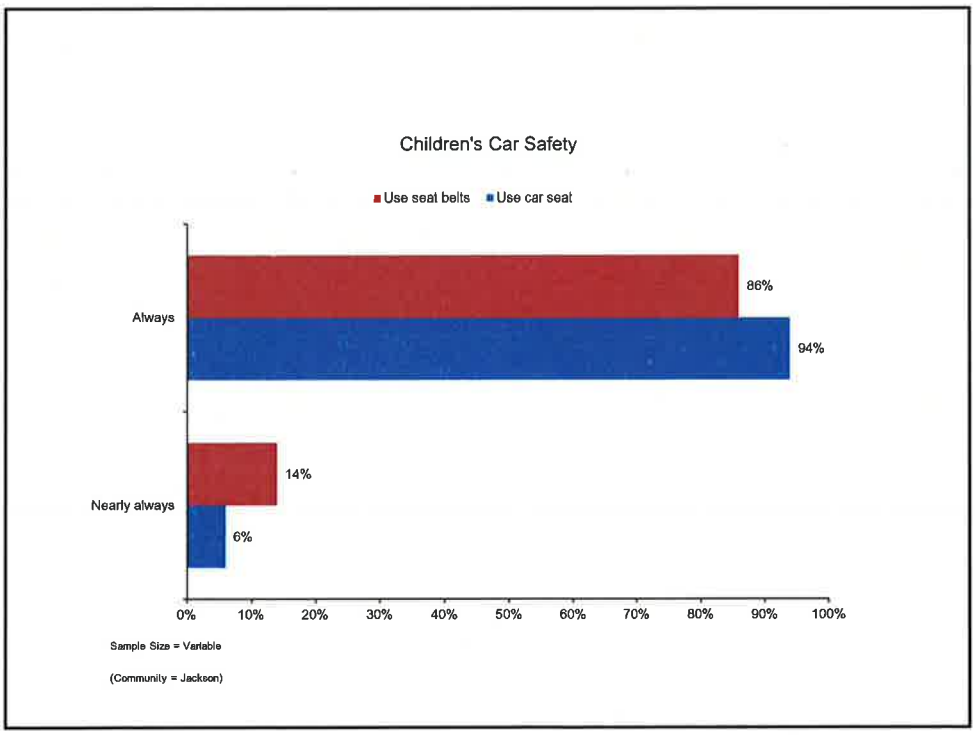
Base: Blood pressure check (n=59), Blood sugar check (n=31), Bone density test (n=3), Cholesterol screening (n=35), Dental cleaning or x-rays (n=46), Flu shot (n=38), Other immunizations (Tetanus, Hepatitis A or B) (n=12), Glaucoma test (n=10), Hearing test (n=8), Women's pelvic exam (n=24), STD screening (n=2), Vascular screening (n=3), Sample Size = 70
(Community = Jackson)

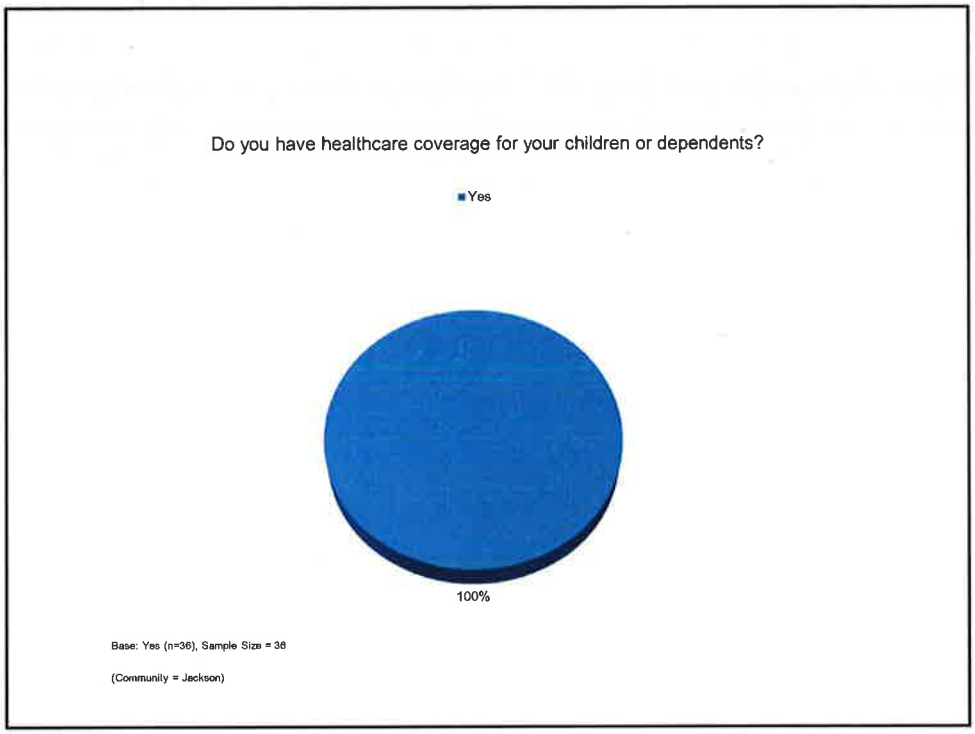
Barriers for Preventive Procedures

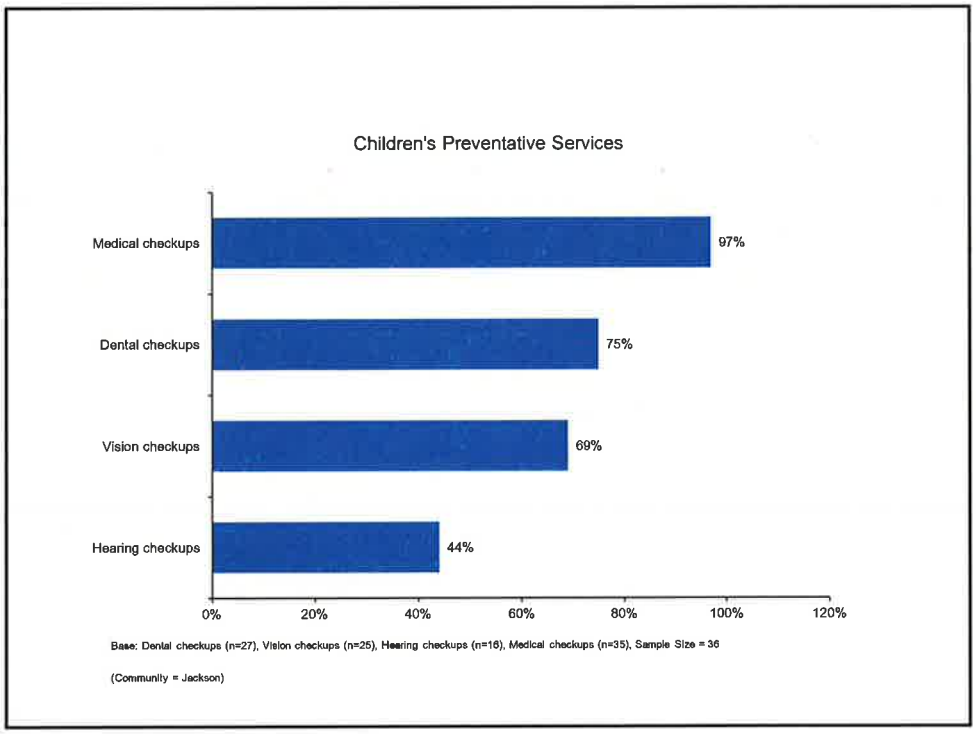


Base: I'm up-to-date on all screenings and procedures (n=36), Doctor has not suggested the screenings (n=6), Cost (n=17), I'm unable to access care (n=1), Fear of the screening or procedure (n=2), Fear of the results (n=2), I'm not due this year (n=7), I haven't had time (n=12), Other (please specify) (n=9), Sample Size = 77
(Community = Jackson)

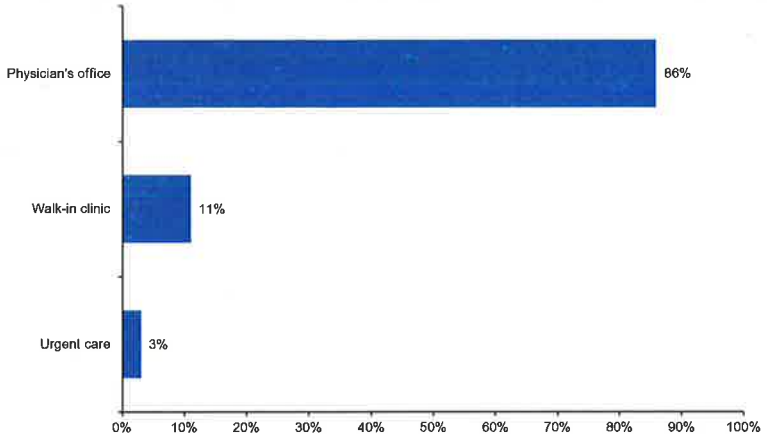

Do you have children under the age of 18 living in your household?
Yes
No
46%
54%
Base: Yes (n=36), No (n=42), Sample Size = 78
(Community = Jackson)


Children's Car Safety
Use seat belts
Use car seat
Always
Nearly always
86%
94%
14%
6%
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
100%
Sample Size = Variable
(Community = Jackson)


Do you have healthcare coverage for your children or dependents?
Yes
100%
Base: Yes (n=36), Sample Size = 36
(Community = Jackson)


Children's Preventative Services
Medical checkups
97%
Dental checkups
75%
Vision checkups
69%
Hearing checkups
44%
0%
20%
40%
60%
80%
100%
120%
Base: Dental checkups (n=27), Vision checkups (n=25), Hearing checkups (n=16), Medical checkups (n=35), Sample Size = 36
(Community = Jackson)

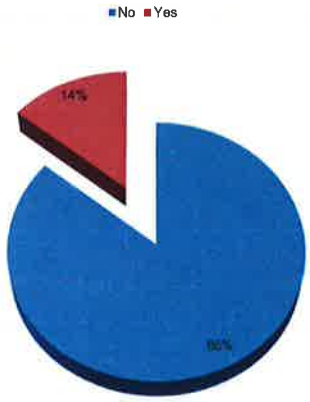
Where do you most often take your children when they are sick and need to see a health care provider?



Base: Physician's office (n=31), Urgent care (n=1), Walk-in clinic (n=4), Sample Size = 36

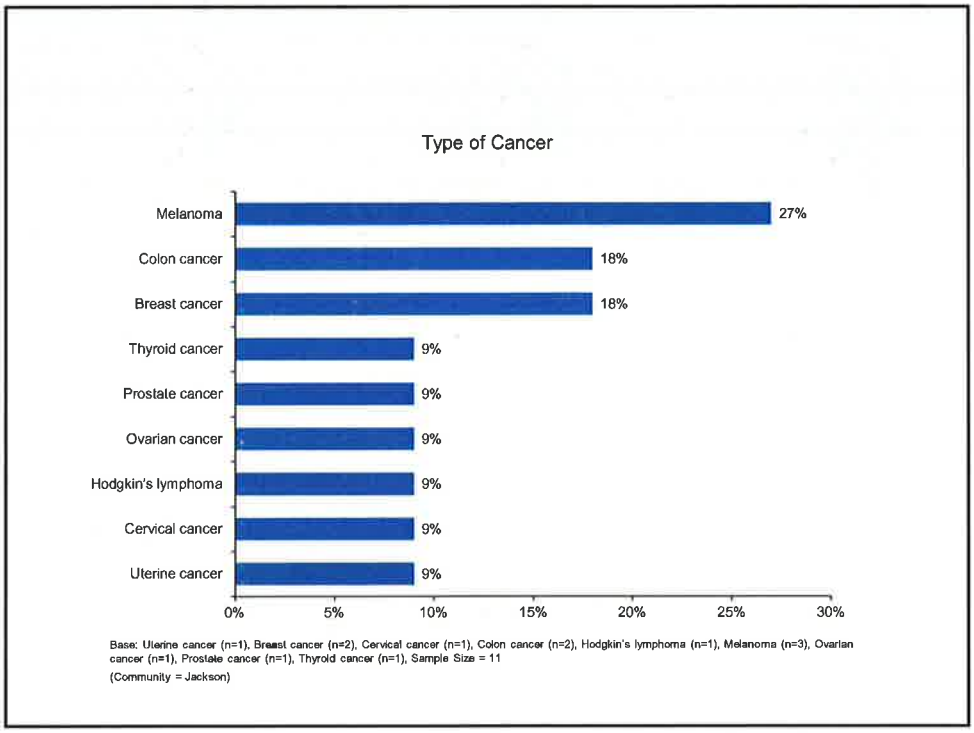
(Community = Jackson)

Have you ever been diagnosed with cancer?



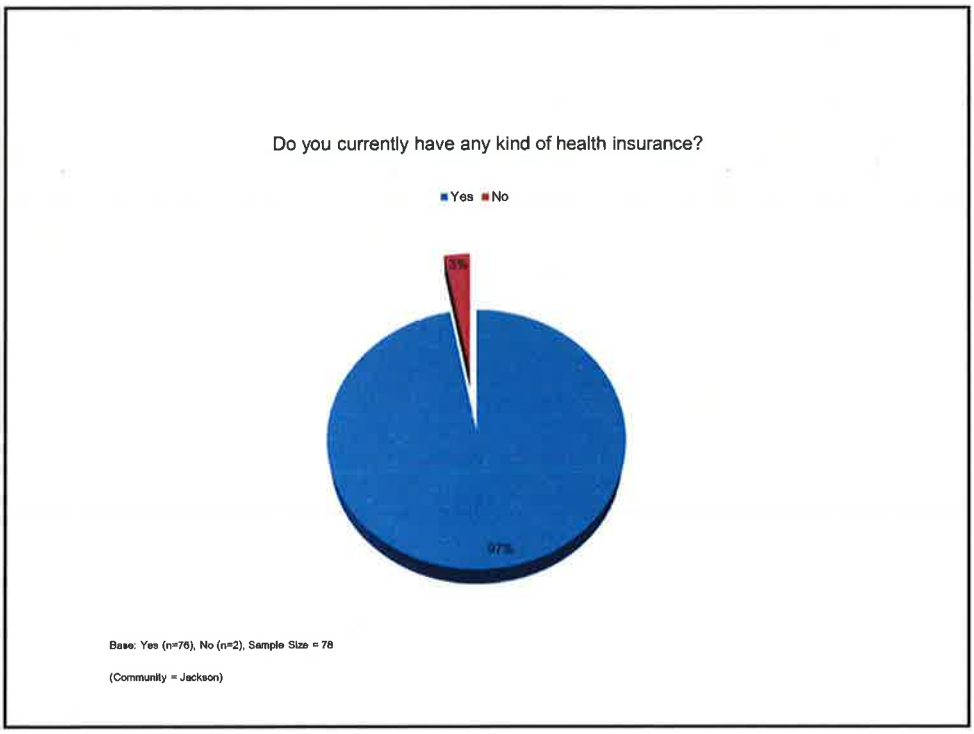
Base: Yes (n=11), No (n=67), Sample Size = 78

(Community = Jackson)



Base: Uterine cancer (n=1), Breast cancer (n=2), Cervical cancer (n=1), Colon cancer (n=2), Hodgkin's lymphoma (n=1), Melanoma (n=3), Ovarian cancer (n=1), Prostate cancer (n=1), Thyroid cancer (n=1), Sample Size = 11

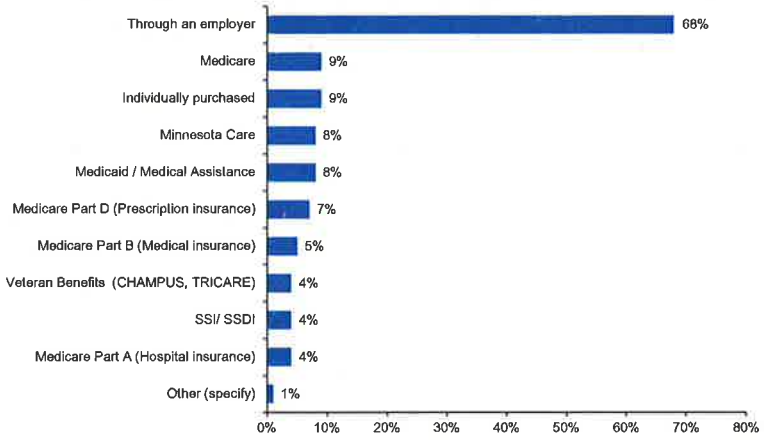
(Community = Jackson)



Base: Yes (n=76), No (n=2), Sample Size = 78

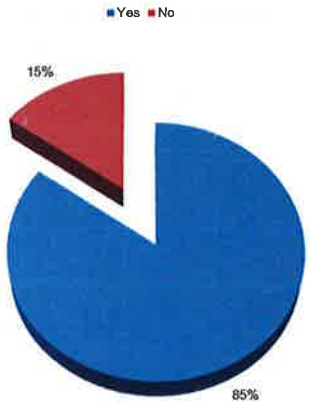
(Community = Jackson)

Type of Insurance



Base: Through an employer (n=52), Individually purchased (n=7), Medicare (n=7), Medicare Part A (Hospital insurance) (n=3), Medicare Part B (Medical insurance) (n=4), Medicare Part D (Prescription insurance) (n=5), SSI/ SSDI (n=3), Medicaid / Medical Assistance (n=6), Minnesota Care (n=6), Veteran Benefits (CHAMPUS, TRICARE) (n=3), Other (specify) (n=1), Sample Size = 76
(Community = Jackson)

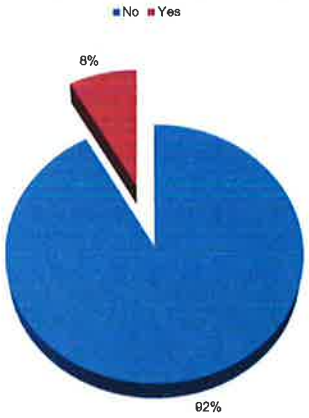
Do you have an established primary healthcare provider?



Base: Yes (n=66), No (n=12), Sample Size = 78

(Community = Jackson)

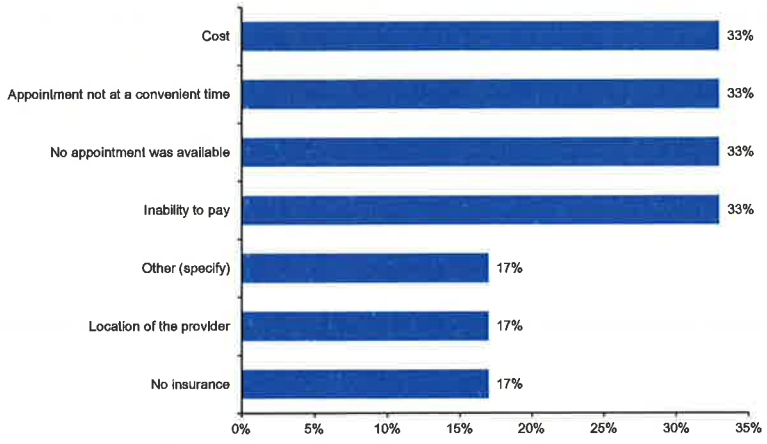
In the past year, did you or someone in your family need medical care, but did not receive the care they needed?



Base: Yes (n=6), No (n=72), Sample Size = 78

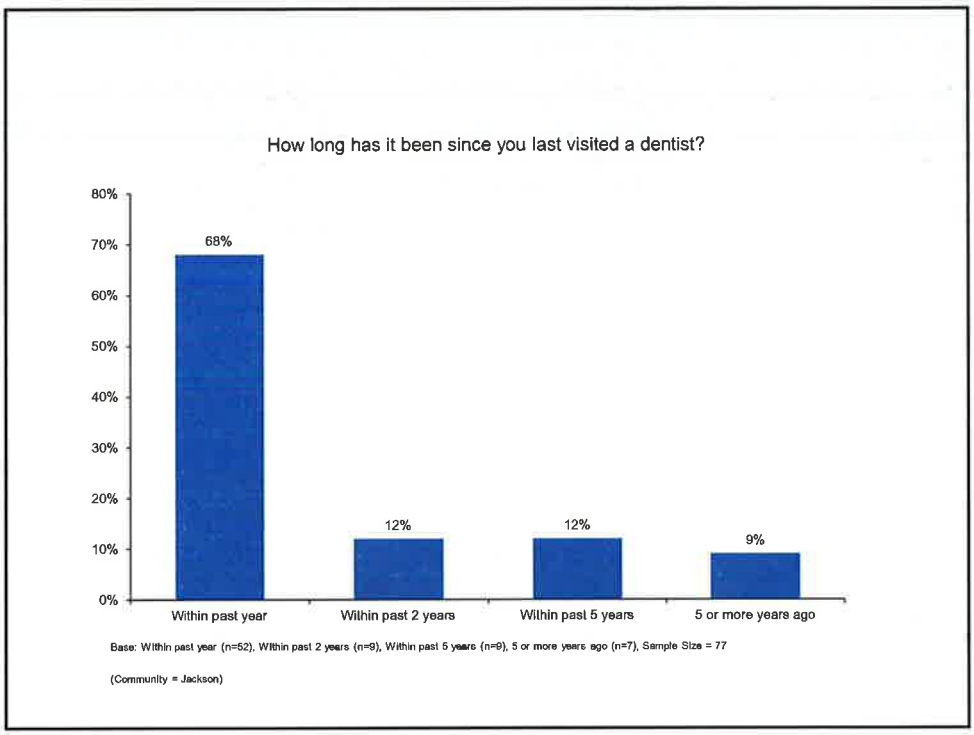
(Community = Jackson)

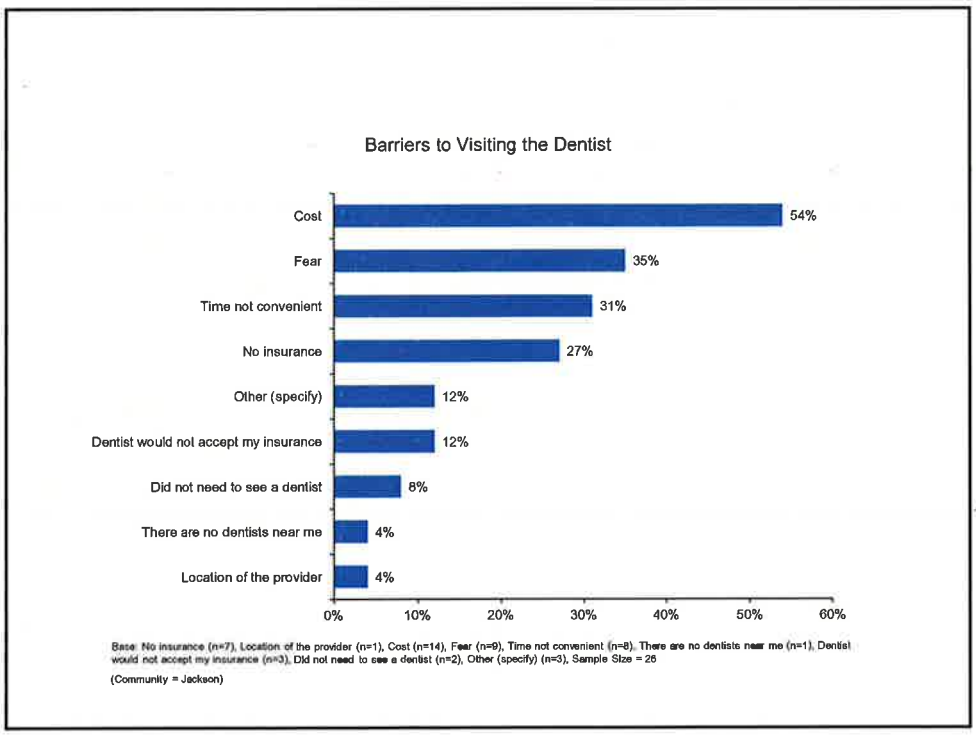
Barriers to Receiving Care Needed



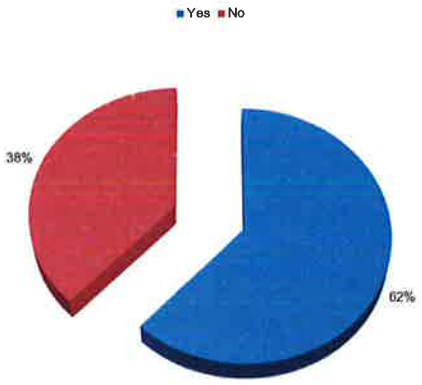
Base: Inability to pay (n=2), No appointment was available (n=2), Appointment not at a convenient time (n=2), No insurance (n=1), Location of the provider (n=1), Cost (n=2), Other (specify) (n=1)

(Community = Jackson)


How long has it been since you last visited a dentist?
80%
70%
60%
50%
40%
30%
20%
10%
0%
68%
12%
12%
9%
Within past year
Within past 2 years
Within past 5 years
5 or more years ago
Base: Within past year (n=52), Within past 2 years (n=9), Within past 5 years (n=9), 5 or more years ago (n=7), Sample Size = 77
(Community = Jackson)


Barriers to Visiting the Dentist
Cost
Fear
Time not convenient
No insurance
Other (specify)
Dentist would not accept my insurance
Did not need to see a dentist
There are no dentists near me
Location of the provider
54%
35%
31%
27%
12%
12%
8%
4%
4%
0%
10%
20%
30%
40%
50%
60%
Base: No insurance (n=7), Location of the provider (n=1), Cost (n=14), Fear (n=9), Time not convenient (n=8), There are no dentists near me (n=1), Dentist would not accept my insurance (n=3), Did not need to see a dentist (n=2), Other (specify) (n=3), Sample Size = 26
(Community = Jackson)

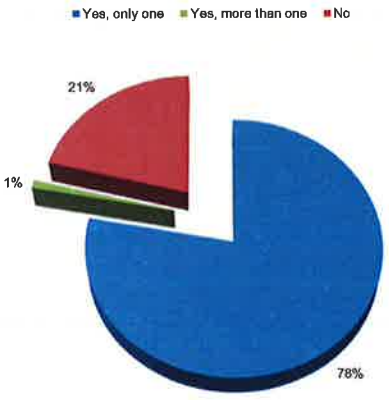
Do you have any kind of dental care or oral health insurance coverage?



Base: Yes (n=48), No (n=30), Sample Size = 78

(Community = Jackson)

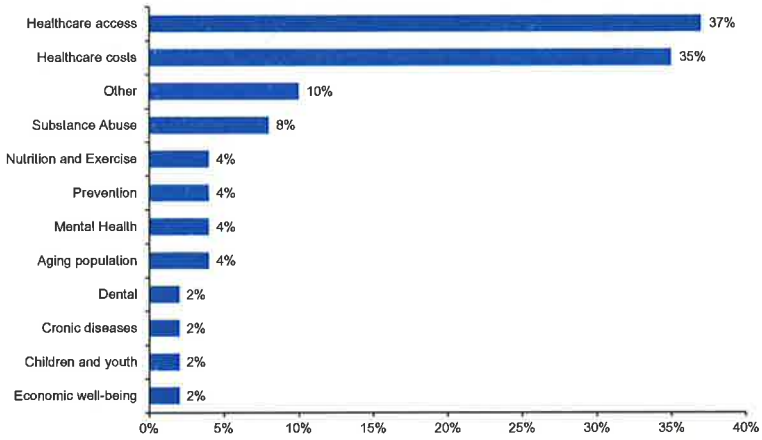
Do you have a dentist that you see for routine care?



Base: Yes, only one (n=61), Yes, more than one (n=1), No (n=16), Sample Size = 78

(Community = Jackson)

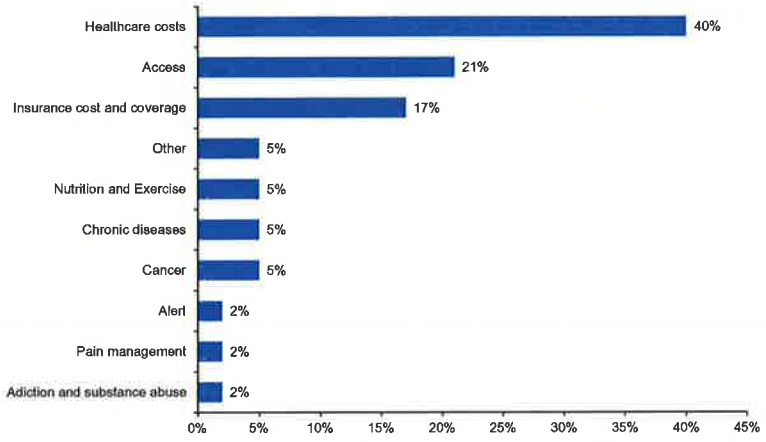
Most Important Community Issues



Base: Economic well-being (n=1), Children and youth (n=1), Aging population (n=2), Healthcare access (n=19), Mental Health (n=2), Substance Abuse (n=4), Cronic diseases (n=1), Healthcare costs (n=18), Dental (n=1), Prevention (n=2), Nutrition and Exercise (n=2), Other (n=5), Sample Size = 53

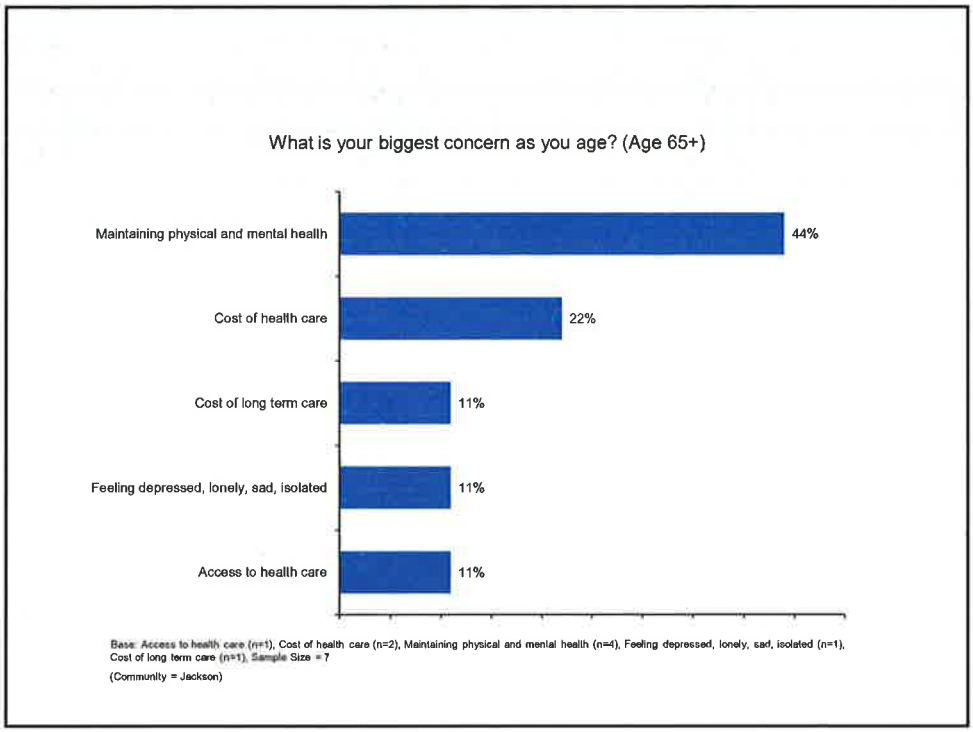
(Community = Jackson)

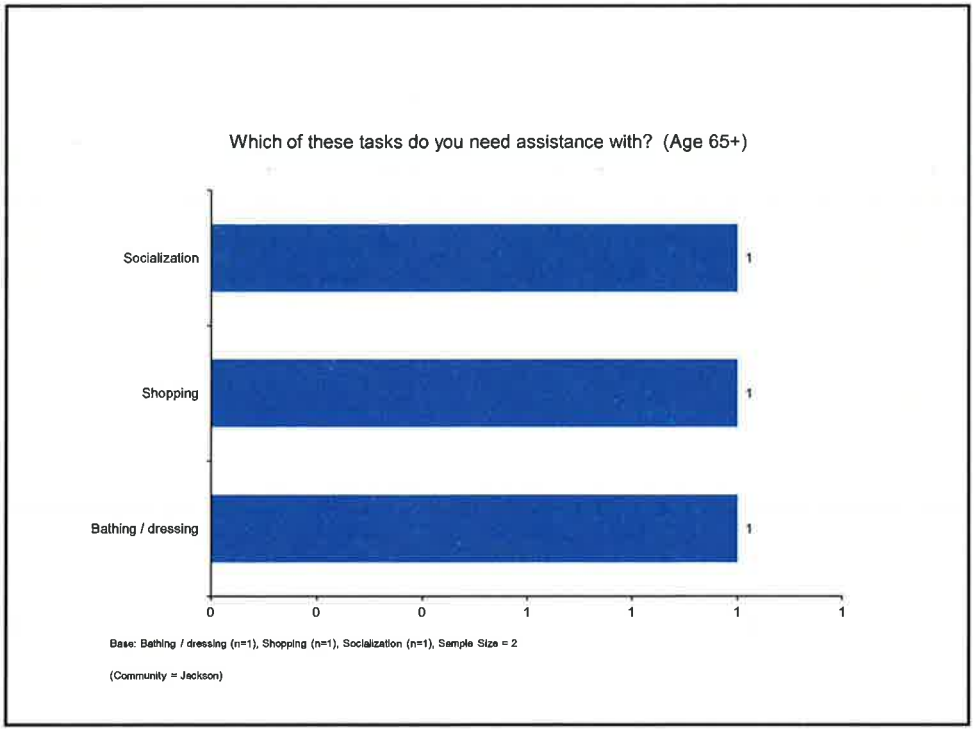
Most Important Issue for Family



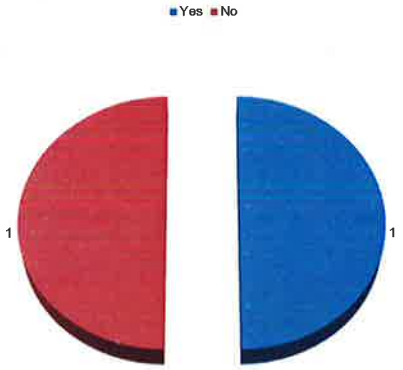
Base: Access (n=9), Adiction and substance abuse (n=1), Cancer (n=2), Chronic diseases (n=2), Healthcare costs (n=17), Nutrition and Exercise (n=2), Insurance cost and coverage (n=7), Pain management (n=1), Alert (n=1), Other (n=2), Sample Size = 51

(Community = Jackson)


What is your biggest concern as you age? (Age 65+)
Maintaining physical and mental health
44%
Cost of health care
22%
Cost of long term care
11%
Feeling depressed, lonely, sad, isolated
11%
Access to health care
11%
Base: Access to health care (n=1), Cost of health care (n=2), Maintaining physical and mental health (n=4), Feeling depressed, lonely, sad, isolated (n=1), Cost of long term care (n=1), Sample Size = 7
(Community = Jackson)


Which of these tasks do you need assistance with? (Age 65+)
Socialization
1
Shopping
1
Bathing / dressing
1
0
0
0
1
1
1
1
Base: Bathing / dressing (n=1), Shopping (n=1), Socialization (n=1), Sample Size = 2
(Community = Jackson)

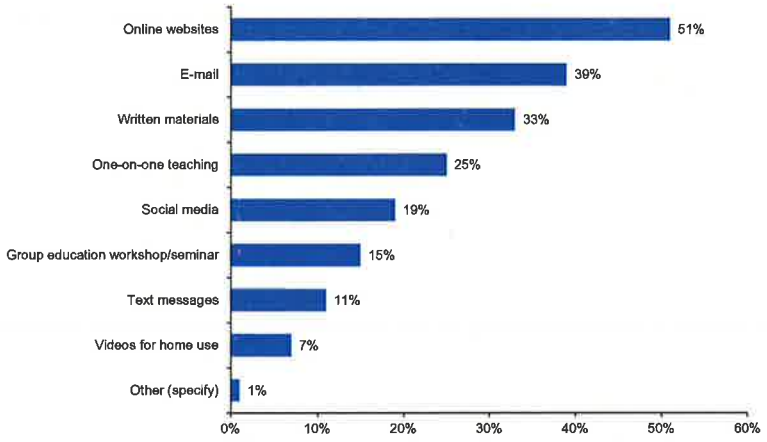
Do you know where to go to get help with the tasks you need assistance with? (Age 65+)



Base: Yes (n=1), No (n=1), Sample Size = 2

(Community = Jackson)

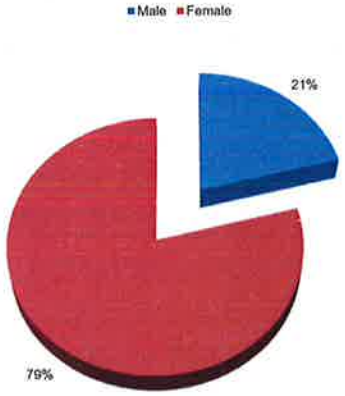
What method(s) would you prefer to get health information?



Base: Written materials (n=25), Videos for home use (n=5), Social media (n=14), Text messages (n=8), One-on-one teaching (n=19), E-mail (n=29), Group education workshop/seminar (n=11), Online websites (n=38), Other (specify) (n=1), Sample Size = 75

(Community = Jackson)

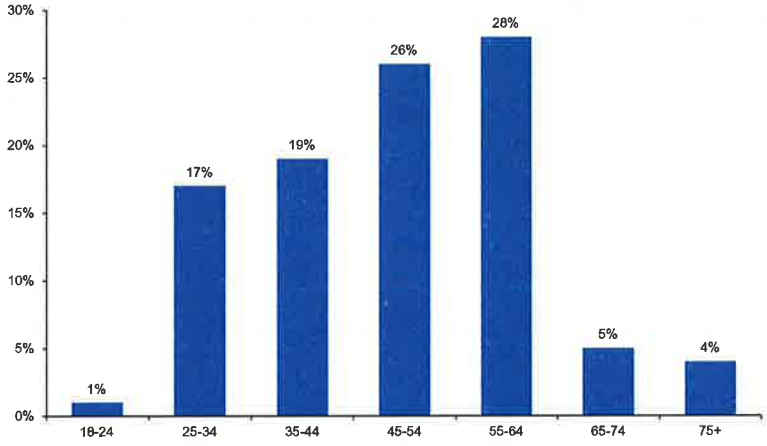
Gender



Base: Male (n=16), Female (n=62), Sample Size = 78

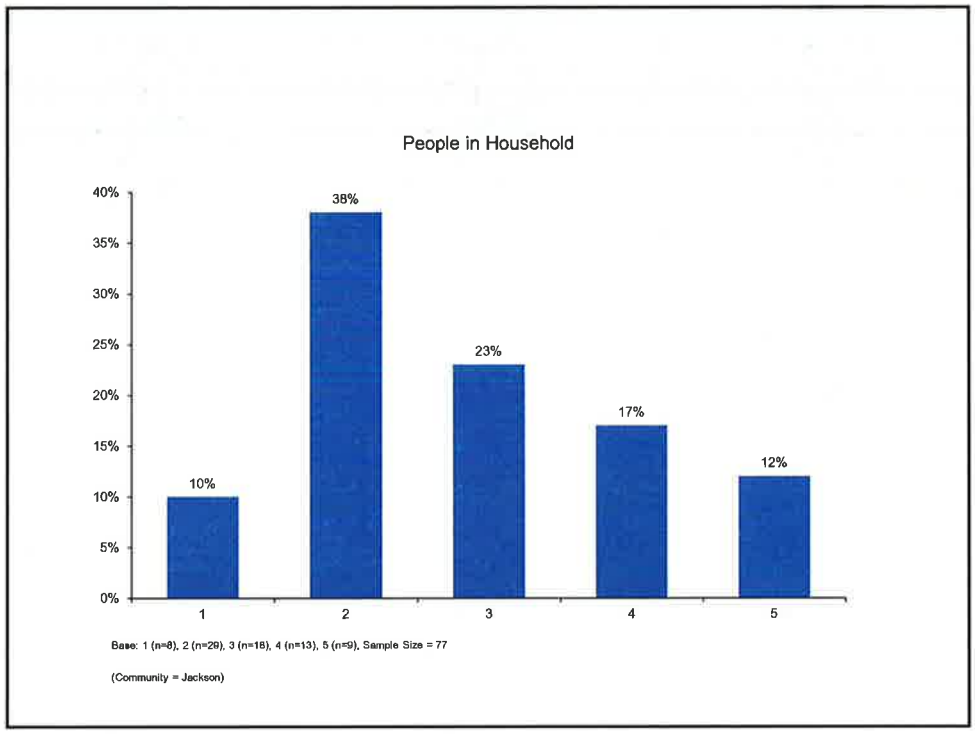
(Community = Jackson)

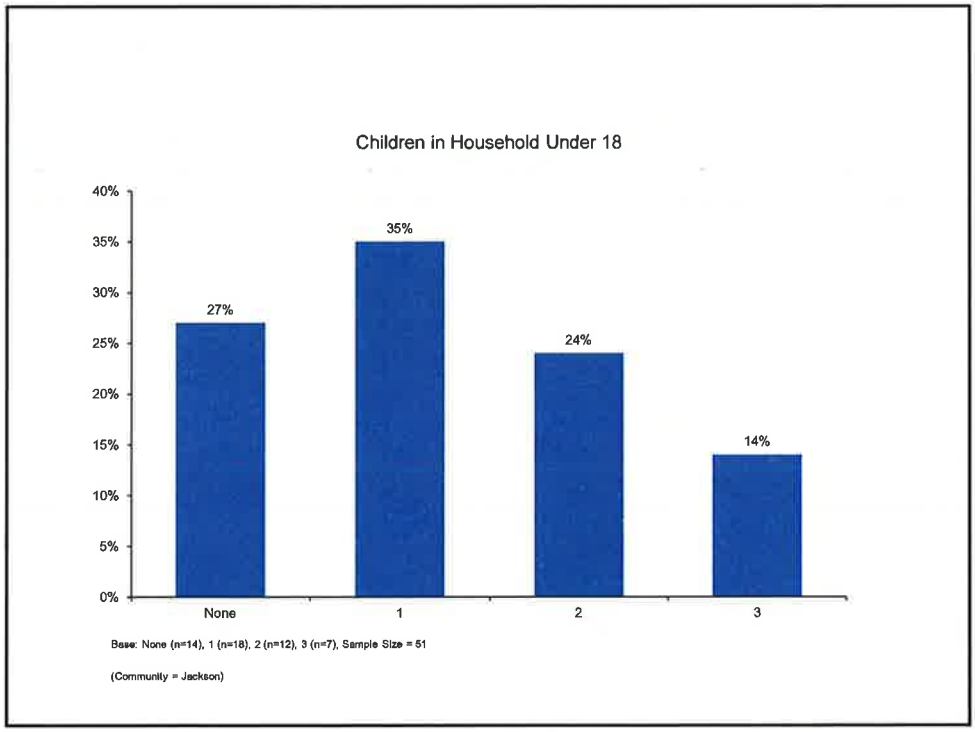
Age

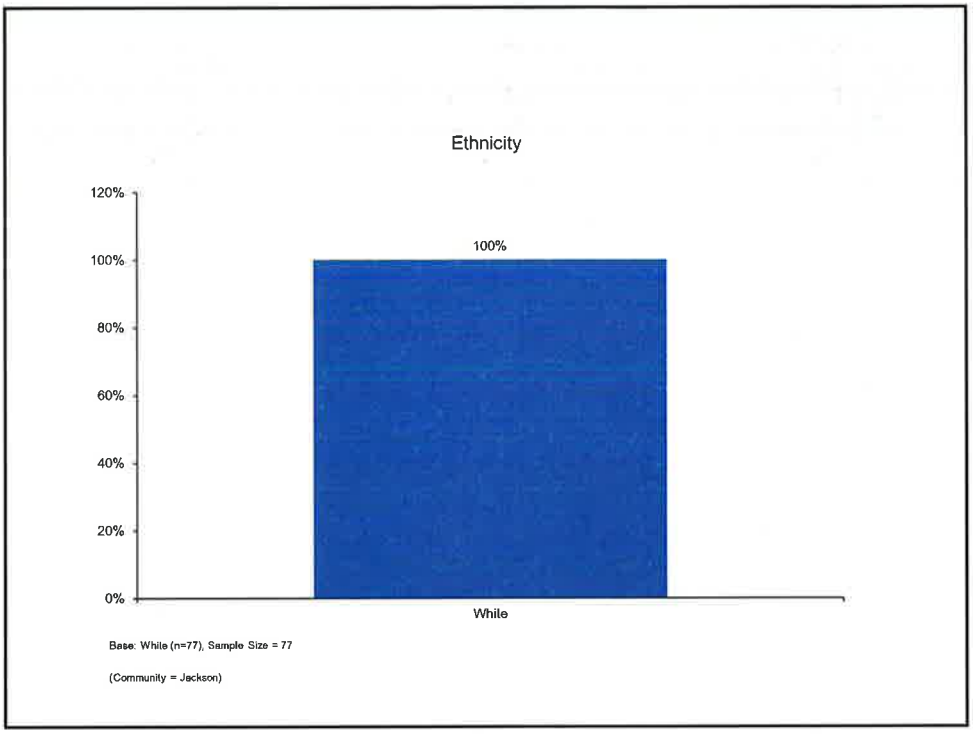


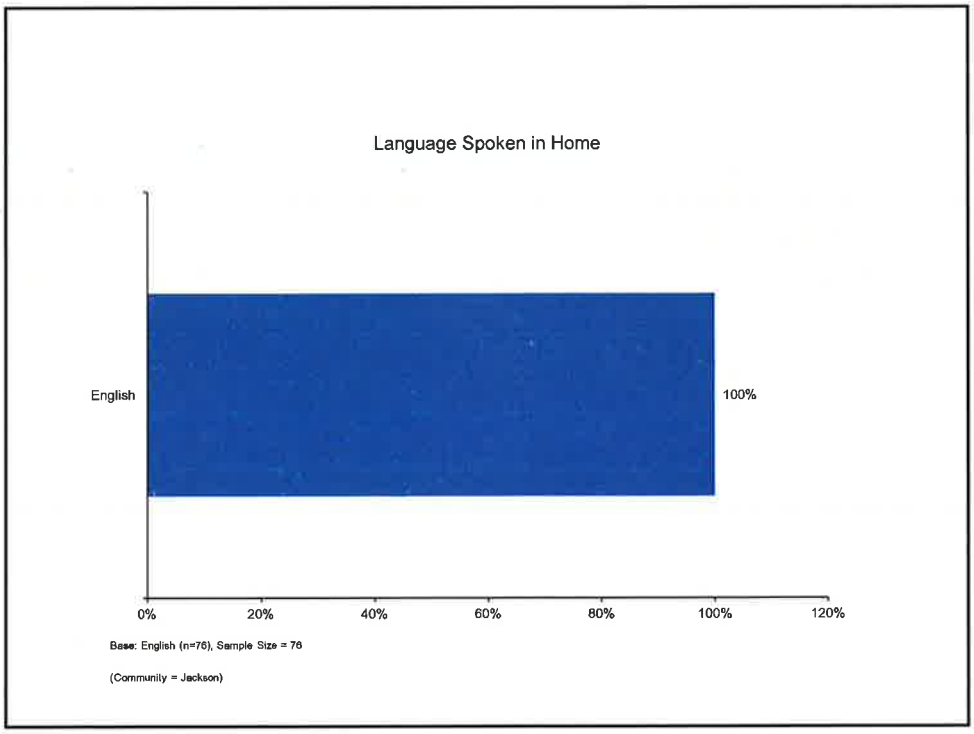
Base: 18-24 (n=1), 25-34 (n=13), 35-44 (n=15), 45-54 (n=20), 55-64 (n=22), 65-74 (n=4), 75+ (n=3), Sample Size = 78

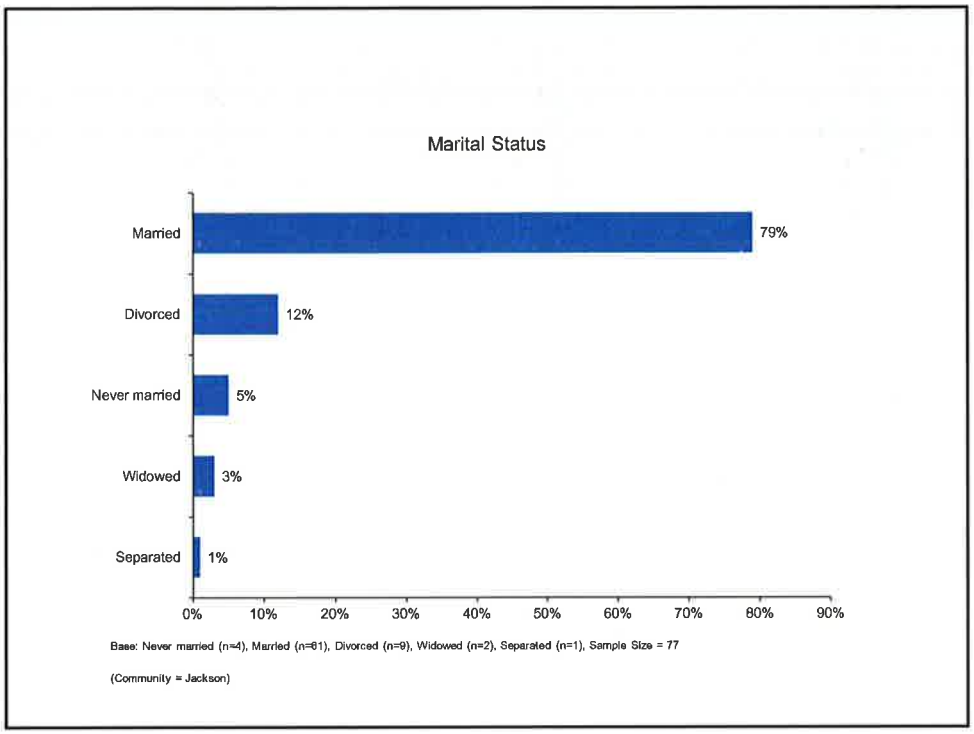
(Community = Jackson)

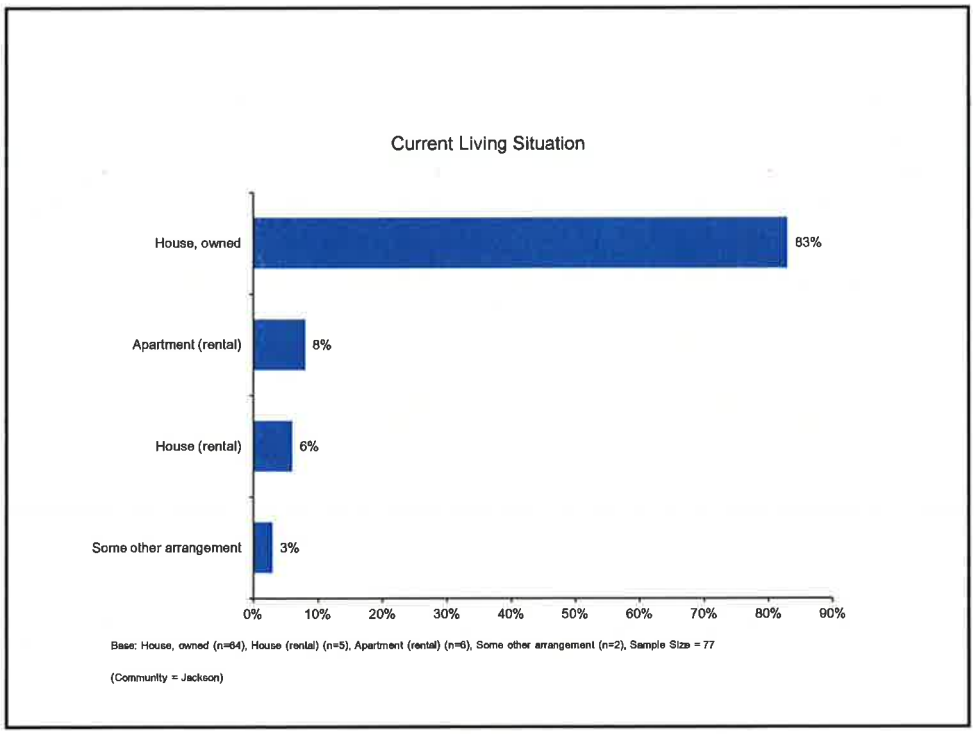

People in Household
40%
35%
30%
25%
20%
15%
10%
5%
0%
10%
38%
23%
17%
12%
1
2
3
4
5
Base: 1 (n=8), 2 (n=29), 3 (n=18), 4 (n=13), 5 (n=9), Sample Size = 77
(Community = Jackson)

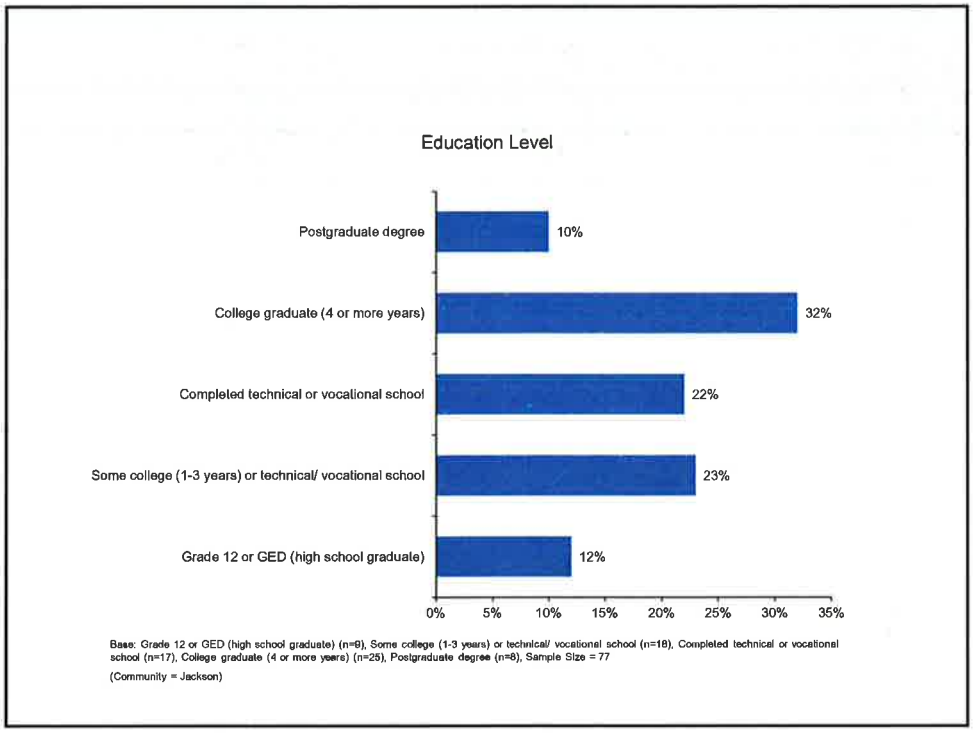

Children in Household Under 18
40%
35%
30%
25%
20%
15%
10%
5%
0%
27%
35%
24%
14%
None
1
2
3
Base: None (n=14), 1 (n=18), 2 (n=12), 3 (n=7), Sample Size = 51
(Community = Jackson)


Ethnicity
120%
100%
80%
60%
40%
20%
0%
100%
White
Base: White (n=77), Sample Size = 77
(Community = Jackson)


Language Spoken in Home
English
100%
0%
20%
40%
60%
80%
100%
120%
Base: English (n=76), Sample Size = 76
(Community = Jackson)

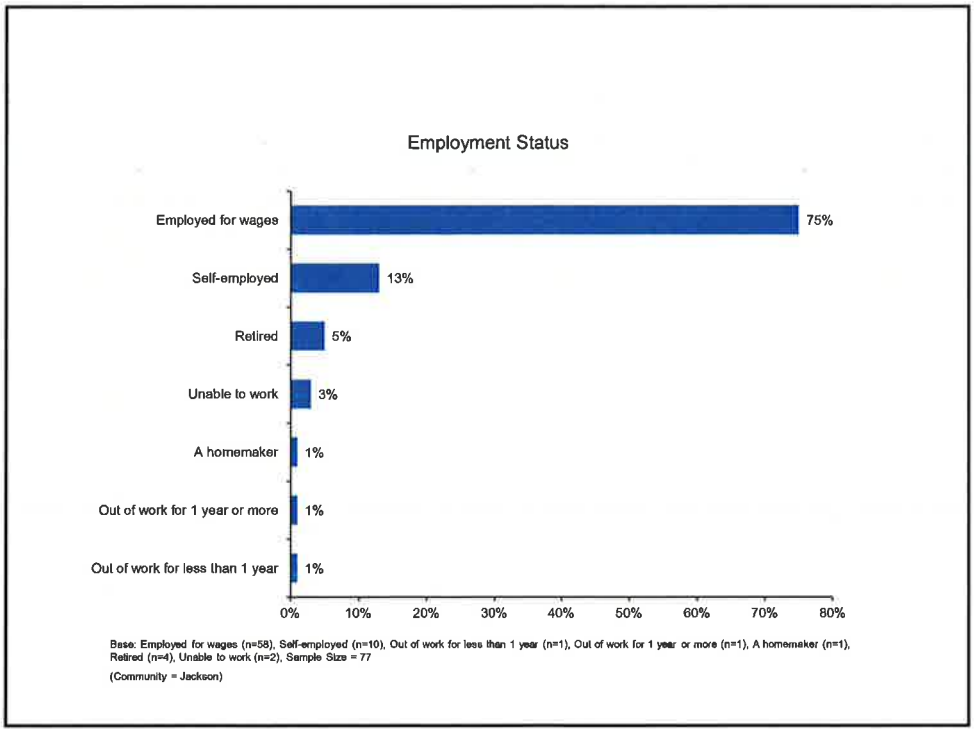

Marital Status
Married
Divorced
Never married
Widowed
Separated
79%
12%
5%
3%
1%
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
Base: Never married (n=4), Married (n=61), Divorced (n=9), Widowed (n=2), Separated (n=1), Sample Size = 77
(Community = Jackson)


Current Living Situation
House, owned
Apartment (rental)
House (rental)
Some other arrangement
83%
8%
6%
3%
0%
10%
20%
30%
40%
50%
60%
70%
80%
90%
Base: House, owned (n=64), House (rental) (n=5), Apartment (rental) (n=6), Some other arrangement (n=2), Sample Size = 77
(Community = Jackson)



Base: Grade 12 or GED (high school graduate) (n=9), Some college (1-3 years) or technical/ vocational school (n=18), Completed technical or vocational school (n=17), College graduate (4 or more years) (n=25), Postgraduate degree (n=8), Sample Size = 77

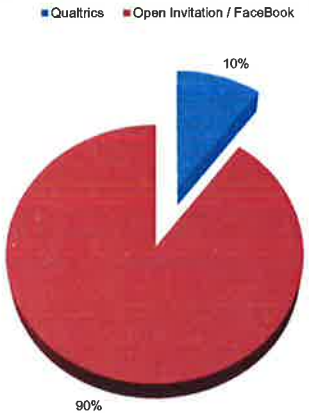
(Community = Jackson)



Base: Employed for wages (n=58), Self-employed (n=10), Out of work for less than 1 year (n=1), Out of work for 1 year or more (n=1), A homemaker (n=1), Retired (n=4), Unable to work (n=2), Sample Size = 77

(Community = Jackson)

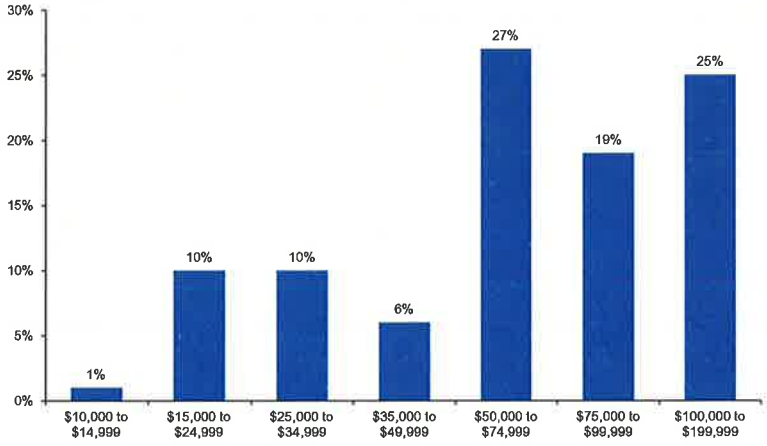
Sample Source



Base: Qualtrics (n=8), Open Invitation / FaceBook (n=72), Sample Size = 80

(Community = Jackson)

Total Household Income



Base: $10,000 to $14,999 (n=1), $15,000 to $24,999 (n=7), $25,000 to $34,999 (n=7), $35,000 to $49,999 (n=4), $50,000 to $74,999 (n=18), $75,000 to $99,999 (n=13), $100,000 to $199,999 (n=17), Sample Size = 67

(Community = Jackson)

Prioritization Worksheet

Criteria to Identify Priority Problem

- Cost and/or return on investment
- Availability of solutions
- Impact of problem
- Availability of resources (staff, time, money, equipment) to solve problem
- Urgency of solving problem (Ebola or air pollution)
- Size of problem (e.g. # of individuals affected)

Criteria to Identify Intervention for Problem

- Expertise to implement solution
- Return on investment
- Effectiveness of solution
- Ease of implementation/maintenance
- Potential negative consequences
- Legal considerations
- Impact on systems or health
- Feasibility of intervention

Health Indicator/Concern	Round 1 Vote	Round 2 Vote	Round 3 Vote
Economic Well-Being • 15% of residents report running out of food before having money to buy more	2		
Children and Youth • Availability of quality childcare 3.89 • Cost of quality childcare 3.76 • Childhood obesity 3.65 • Bullying 3.50	4		
Aging Population • Cost of long-term care 3.85 • Cost of memory care 3.82 • Availability of memory care 3.53			
Safety • 18% report that they have drugs in their home that they are not using • 14% do not always use seat belts			
Health Care Access • Availability of mental health providers 4.11 • Access to affordable health insurance coverage 3.89 • Availability of behavioral health 3.81 • Access to affordable health care 3.68 • Availability of non-traditional hours 3.56 • Access to affordable dental insurance coverage 3.54 • Access to affordable prescription drugs 3.54	2		
Mental Health and Substance Abuse • Depression 3.75 • Drug use and abuse 3.67 • Alcohol use and abuse 3.56 • Dementia and Alzheimer's disease 3.51 • 43% report that they have a diagnosis of anxiety/stress • 34% report that they have a diagnosis of depression • 10% currently smoke cigarettes • 38% self-report binge drinking at least 1X/month (5% at least 2-3X/week)	9		
Wellness • 38% report that they have a diagnosis of high cholesterol • 32% report that they have a diagnosis of hypertension • 21% report that they have a diagnosis of arthritis • 38% of residents report that they are obese • 30% report that they are overweight • 62% of residents do not get the recommended 5 or fruits/vegetables each day • 39% are not getting moderate exercise at least 3X/week • 28% have not had a routine checkup in more than 1 year • 46% have not had a flu shot this year • 33% have not seen their dentist in more than 1 year	2		

Secondary Research

Definitions of Key Indicators

A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

This Excel file contains the ranks and scores for each county in your state and the underlying data details for the measures used in
calculating the 2018 *County Health Rankings*. In addition, the file contains additional measures that are reported on the *County*
Health Rankings web site for your state.

For additional information about how the *County Health Rankings* are calculated, please visit www.countyhealthrankings.org

Contents:

* 95% confidence intervals are provided where applicable and available.
** Z-scores are "adjusted" z-scores (e.g., multiplied by -1 if a positively framed measure, set to zero for missing and unreliable
values for ranked counties, and truncated at -3 or +3 if county population is less than 20,000).

Measure	Data Elements	Description
Geographic identifiers	**FIPS**	Federal Information Processing Standard
	State	
	County	
Premature death	**Years of Potential Life Lost Rate**	Age-adjusted YPLL rate per 100,000
	95% CI - Low	95% confidence interval reported by National Center for Health Statistics
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	Years of Potential Life Lost Rate (Black)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Blacks
	Years of Potential Life Lost Rate (Hispanic)	Age-adjusted YPLL rate per 100,000 for Hispanics
	Years of Potential Life Lost Rate (White)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Whites

Measure	Data Elements	Description
Poor or fair health	**% Fair/Poor**	Percentage of adults that report fair or poor health
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Poor physical health days	**Physically Unhealthy Days**	Average number of reported physically unhealthy days per month
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Poor mental health days	**Mentally Unhealthy Days**	Average number of reported mentally unhealthy days per month
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Low birthweight	Unreliable	Value reported but considered unreliable since based on counts of twenty or less.
	% LBW	Percentage of births with low birth weight (<2500g)
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% LBW (Black)	Percentage of births with low birth weight (<2500g) for non-Hispanic Blacks
	% LBW (Hispanic)	Percentage of births with low birth weight (<2500g) for Hispanics
	% LBW (White)	Percentage of births with low birth weight (<2500g) for non-Hispanic Whites
Adult smoking	**% Smokers**	Percentage of adults that reported currently smoking
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Adult obesity	**% Obese**	Percentage of adults that report BMI >= 30
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Food environment index	**Food Environment Index**	Indicator of access to healthy foods - 0 is worst, 10 is best
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Physical inactivity	**% Physically Inactive**	Percentage of adults that report no leisure-time physical activity
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Access to exercise opportunities	**% With Access**	Percentage of the population with access to places for physical

Measure	Data Elements	Description
		activity
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Excessive drinking	**% Excessive Drinking**	Percentage of adults that report excessive drinking
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Alcohol-impaired driving deaths	# Alcohol-Impaired Driving Deaths	Number of alcohol-impaired motor vehicle deaths
	# Driving Deaths	Number of motor vehicle deaths
	% Alcohol-Impaired	Percentage of driving deaths with alcohol involvement
	95% CI - Low	95% confidence interval using Poisson distribution
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Sexually transmitted infections	# Chlamydia Cases	Number of chlamydia cases
	Chlamydia Rate	Chlamydia cases per 100,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Teen births	**Teen Birth Rate**	Births per 1,000 females ages 15-19
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	Teen Birth Rate (Black)	Births per 1,000 females ages 15-19 for Black non-Hispanic mothers
	Teen Birth Rate (Hispanic)	Births per 1,000 females ages 15-19 for Hispanic mothers
	Teen Birth Rate (White)	Births per 1,000 females ages 15-19 for White non-Hispanic mothers
Uninsured	# Uninsured	Number of people under age 65 without insurance
	% Uninsured	Percentage of people under age 65 without insurance
	95% CI - Low	95% confidence interval reported by SAHIE
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Primary care physicians	# Primary Care Physicians	Number of primary care physicians (PCP) in patient care
	PCP Rate	Primary Care Physicians per 100,000 population
	PCP Ratio	Population to Primary Care Physicians ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Dentists	# Dentists	Number of dentists
	Dentist Rate	Dentists per 100,000 population
	Dentist Ratio	Population to Dentists ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Mental health providers	# Mental Health Providers	Number of mental health providers (MHP)
	MHP Rate	Mental Health Providers per 100,000 population
	MHP Ratio	Population to Mental Health Providers ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	# Medicare Enrollees	Number of Medicare enrollees

Measure	Data Elements	Description
Preventable hospital stays	**Preventable Hosp. Rate**	Discharges for Ambulatory Care Sensitive Conditions per 1,000 Medicare Enrollees
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Diabetes monitoring	# Diabetics	Number of diabetic Medicare enrollees
	% Receiving HbA1c	Percentage of diabetic Medicare enrollees receiving HbA1c test
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Receiving HbA1c (Black)	Percentage of Black diabetic Medicare enrollees receiving HbA1c test
	% Receiving HbA1c (White)	Percentage of White diabetic Medicare enrollees receiving HbA1c test
Mammography screening	# Medicare Enrollees	Number of female Medicare enrollees age 67-69
	% Mammography	Percentage of female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Mammography (Black)	Percentage of Black female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
	% Mammography (White)	Percentage of White female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
High school graduation	Cohort Size	Number of students expected to graduate
	Graduation Rate	Graduation rate
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Some college	# Some College	Adults age 25-44 with some post-secondary education
	Population	Adults age 25-44
	% Some College	Percentage of adults age 25-44 with some post-secondary education
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Unemployment	# Unemployed	Number of people ages 16+ unemployed and looking for work
	Labor Force	Size of the labor force
	% Unemployed	Percentage of population ages 16+ unemployed and looking for work
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)

Measure	Data Elements	Description
Children in poverty	**% Children in Poverty**	Percentage of children (under age 18) living in poverty
	95% CI - Low	95% confidence interval reported by SAIPE
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Children in Poverty (Black)	Percentage of non-Hispanic Black children (under age 18) living in poverty - from the 2012-2016 ACS
	% Children in Poverty (Hispanic)	Percentage of Hispanic children (under age 18) living in poverty – f rom the 2012-2016 ACS
	% Children in Poverty (White)	Percentage of non-Hispanic White children (under age 18) living in poverty - from the 2012-2016 ACS
Income inequality	80th Percentile Income	80th percentile of median household income
	20th Percentile Income	20th percentile of median household income
	Income Ratio	Ratio of household income at the 80th percentile to income at the 20th percentile
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Children in single-parent households	# Single-Parent Households	Number of children that live in single-parent households
	# Households	Number of children in households
	% Single-Parent Households	Percentage of children that live in single-parent households
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Social associations	# Associations	Number of associations
	Association Rate	Associations per 10,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Violent crime	# Violent Crimes	Number of violent crimes
	Violent Crime Rate	Violent crimes per 100,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Injury deaths	# Injury Deaths	Number of injury deaths
	Injury Death Rate	Injury mortality rate per 100,000.
	95% CI - Low	95% confidence interval as reported by the National Center for Health Statistics
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Air pollution - particulate matter	**Average Daily PM2.5**	Average daily amount of fine particulate matter in micrograms per cubic meter
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Drinking water violations	**Presence of violation**	County affected by a water violation: 1-Yes, 0-No
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Severe housing problems	# Households with Severe Problems	Number of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities

Measure	Data Elements	Description
	% Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Driving alone to work	**% Drive Alone**	Percentage of workers who drive alone to work
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Drive Alone (Black)	Percentage of non-Hispanic Black workers who drive alone to work
	% Drive Alone (Hispanic)	Percentage of Hispanic workers who drive alone to work
	% Drive Alone (White)	Percentage of non-Hispanic White workers who drive alone to work
Long commute - driving alone	# Workers who Drive Alone	Number of workers who commute in their car, truck or van alone
	% Long Commute - Drives Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)

County Health Rankings for Jackson County, Minnesota

	County	State
Population	9,944	5,519,952
% below 18 years of age	21.9%	23.3%
% 65 and older	20.9%	15.1%
% Non-Hispanic African American	0.7%	6.0%
% American Indian and Alaskan Native	0.4%	1.3%
% Asian	1.7%	4.9%
% Native Hawaiian/Other Pacific Islander	0.0%	0.1%
% Hispanic	3.1%	5.2%
% Non-Hispanic white	93.2%	80.6%
% not proficient in English	0%	2%
% Females	48.9%	50.2%
% Rural	69.1%	26.7%

	Jackson County	Error Margin	Top U.S. Performers	Minnesota	Rank (of 87)
Health Outcomes					41
Length of Life					35
Premature death	5,200	4,200-6,500	5,300	5,100	
Quality of Life					61
Poor or fair health **	11%	10-11%	12%	12%	
Poor physical health days **	2.8	2.7-3.0	3.0	3.0	
Poor mental health days **	3.0	2.8-3.2	3.1	3.2	
Low birthweight	7%	5-9%	6%	6%	
Additional Health Outcomes (not included in overall ranking) +					
Premature age-adjusted mortality	230	180-290	270	260	
Child mortality			40	40	
Infant mortality			4	5	
Frequent physical distress	9%	8-9%	9%	9%	
Frequent mental distress	9%	9-10%	10%	10%	
Diabetes prevalence	9%	7-12%	8%	8%	
HIV prevalence	71		49	171	
Health Factors					14
Health Behaviors					19
Adult smoking **	15%	14-15%	14%	15%	
Adult obesity	29%	23-35%	26%	27%	
Food environment index	8.8		8.6	8.9	
Physical inactivity	20%	15-25%	20%	20%	
Access to exercise opportunities	68%		91%	88%	
Excessive drinking **	22%	21-23%	13%	23%	
Alcohol-impaired driving deaths	20%	7-35%	13%	30%	

	Jackson County	Error Margin	Top U.S. Performers	Minnesota	Rank (of 87)
Sexually transmitted infections	185.0		145.1	389.3	
Teen births	17	12-24	15	17	
Additional Health Behaviors (not included in overall ranking) +					
Food insecurity	9%		10%	10%	
Limited access to healthy foods	4%		2%	6%	
Drug overdose deaths			10	11	
Drug overdose deaths - modeled	8-11.9		8-11.9	12.5	
Motor vehicle crash deaths			9	8	
Insufficient sleep	28%	27-29%	27%	30%	
Clinical Care					29
Uninsured	4%	4-5%	6%	5%	
Primary care physicians	5,040:1		1,030:1	1,110:1	
Dentists	2,490:1		1,280:1	1,440:1	
Mental health providers	1,240:1		330:1	470:1	
Preventable hospital stays	41	30-51	35	37	
Diabetes monitoring	90%	72-100%	91%	88%	
Mammography screening	77%	57-97%	71%	65%	
Additional Clinical Care (not included in overall ranking) +					
Uninsured adults	5%	4-6%	7%	6%	
Uninsured children	3%	2-4%	3%	3%	
Health care costs	$7,854			$8,250	
Other primary care providers	1,989:1		782:1	1,020:1	
Social & Economic Factors					13
High school graduation	97%		95%	83%	
Some college	69%	62-76%	72%	74%	
Unemployment	4.5%		3.2%	3.9%	
Children in poverty	12%	9-16%	12%	13%	
% Children in Poverty % Children in Poverty (Hispanic) % Children in Poverty (White)	12% 43% 13%		x		
Income inequality	3.7	3.2-4.2	3.7	4.4	
Children in single-parent households	25%	19-32%	20%	28%	
Social associations	31.7		22.1	13.0	
Violent crime	58		62	231	
Injury deaths	55	37-80	55	62	
Additional Social & Economic Factors (not included in overall ranking) +					
Disconnected youth			10%	9%	
Median household income	$58,800	$53,000-64,700	$65,100	$65,600	
Household Income Household income (Hispanic) Household income (White)	$58,800 $41,100 $55,800		x		

	Jackson County	Error Margin	Top U.S. Performers	Minnesota	Rank (of 87)
Children eligible for free or reduced price lunch	37%		33%	38%	
Residential segregation - black/white			23	62	
Residential segregation - non-white/white	26		14	49	
Homicides			2	2	
Firearm fatalities			7	7	
Physical Environment					33
Air pollution - particulate matter **	9.4		6.7	9.3	
Drinking water violations	No				
Severe housing problems	9%	7-12%	9%	14%	
Driving alone to work	82%	79-84%	72%	78%	
Long commute - driving alone	17%	15-20%	15%	30%	

Areas to ExploreAreas of Strength

^ 10th/90th percentile, i.e., only 10% are better.

Note: Blank values reflect unreliable or missing data

** Data should not be compared with prior years

SANFORD HEALTH

019012-00347 9/18