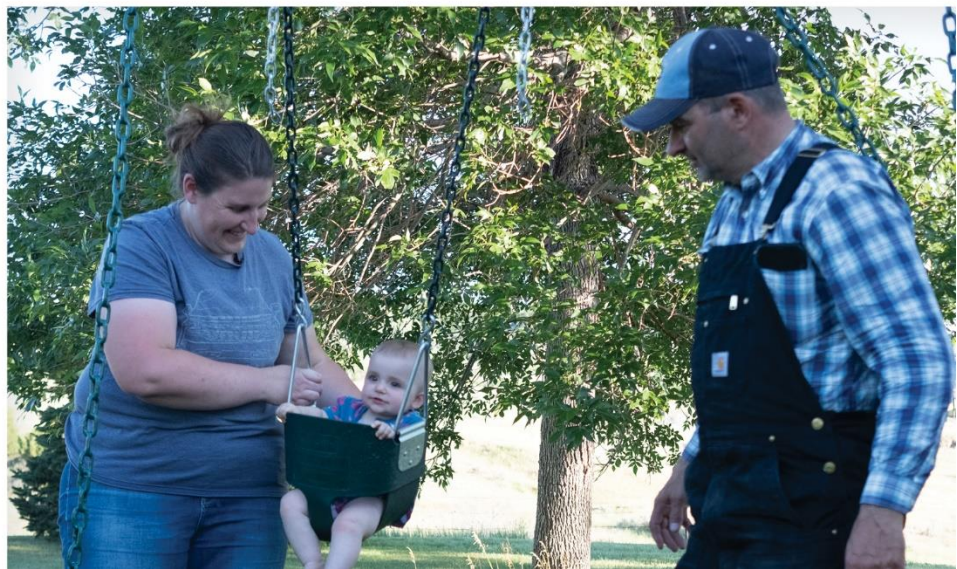




Community Health Needs Assessment

SANFORD HILLSBORO MEDICAL CENTER
2025-2027



Dear Community Members,

It is once again my privilege to share with you Sanford the Community Health Needs Assessment report. Our hospital completes a community health needs assessment every three years to identify opportunities to improve the health and wellness of our community.

The report and implementation plan that follows will guide our work over the next three years and builds upon previous progress made in our community.

The Community Health Needs Assessment is a rigorous process in which we sought input from community members, leaders, and organizations including public health. Additionally, Sanford Health partnered with the North Dakota State University Center for Social Research to incorporate additional data analysis and provide an independent assessment. Together, these elements paint a picture of the current needs facing the community, opportunities for partnership with area businesses and organizations, and resources available to address identified needs.

On behalf of the Sanford Hillsboro Medical Center team, thank you for your continued support of the Community Health Needs Assessment process.

Sincerely,

Jac McTaggart
Chief Executive Officer / Administrator
Sanford Hillsboro Medical Center

BACKGROUND

Community Description

Sanford Hillsboro Medical Center is located in Hillsboro, a city of 1,600 people located on the banks of the Goose River in the heart of the Red River Valley of eastern North Dakota. It serves as the county seat for Traill County. Hillsboro was founded in 1869 by German settlers and named for railroad baron James J. Hill, who stopped in the area in the late 1870s and found hospitality from a homesteader.

Hillsboro is conveniently located halfway between the metropolitan cities of Grand Forks and Fargo on Interstate 29. The surrounding area is prime farmland, and agriculture has dominated the area's economy from the beginning. One of the major industries and employers is American Crystal Sugar, which operates a large sugar beet processing plant north of the city. The plant has been responsible for both an increase in population and a steady stream of available jobs.

Hillsboro has a strong economy with more than 60 businesses. It offers many amenities usually found in larger cities, including K-12 education, medical facilities, parks, a pool, golf course and fitness center.

The community as defined for purposes of the Community Health Needs Assessment includes Traill and Steele Counties in North Dakota and represent a majority of the volumes to the Sanford Hillsboro Medical Center. No populations were intentionally excluded during the process of defining the community or within the CHNA process. Demographic detail for the counties is included in the appendix.

Partners

The Community Health Needs Assessment builds on the work of previous cycles and is the result of the coordinated efforts of many internal and external partners. Sanford Health would like to thank and acknowledge the following and their teams for their assistance. This program would not be possible without their expertise.

Sanford Health

- Erika Batcheller, Executive Vice President, Chief External Affairs Officer
- Nick Olson, Executive Vice President, Chief Financial Officer
- Corey Brown, Senior Vice President, Government Affairs
- Amber Langner, Senior Vice President, Treasury
- Blayne Hagen, Vice President, General Counsel, Sioux Falls
- Lindsay Daniels, Vice President, Care Management
- Doug Nowak, Vice President, Data Analytics
- Natasha Smith, Head of Diversity, Equity and Inclusion
- Catherine Bernard, Director, Tax
- Karla Cazer, Clinical Nurse Specialist, Faith Community Nursing Center
- Deana Caron, Senior Tax Accountant
- Kurt Brost, Senior Director, Community Relations
- David Hill, Director, Chief Privacy Officer
- Jessica Sexe, Senior Director, Communications
- Phil Clark, Director, Marketing Insights
- Shawn Tronier, Lead Marketing Analyst
- Chase Gerar, Strategic Planning Advisor, Fargo
- Brian Ritter, Head of Market Affairs, Bismarck
- Kayla Winkler, Lead Community Relations Specialist, Bemidji

System Partners

- Sister Nancy Miller, Director Mission Integration, CHI St. Alexius Health
- Julie Ward, VP of Diversity, Equity & Inclusion, Avera McKennan Hospital & University Health Center
- Angela Schoeffelman, Community Program Manager, Avera Community Health Resource Center
- Alli Fast, Community Health Program Manager, Essentia Health
- Nancy Hodur, Director, North Dakota State University Center for Social Research
- Karen Olson, Research Specialist, North Dakota State University Center for Social Research
- Kathy McKay, Public Health Administrator, Clay County Public Health
- Desi Fleming, Director of Public Health, Fargo Cass Public Health
- Justin Bohrer, Public Health Analyst & Operational Planning Lead, Fargo Cass Public Health
- Julie Sorby Engen, Director of Community Development, Family HealthCare
- Shelby Kommes, Public Health Coordinator, Sioux Falls Health Department
- Renae Moch, Public Health Director, Bismarck-Burleigh Public Health and Immediate Past President, North Dakota Public Health Association
- Erin Ourada, Administrator, Western Plains Public Health
- Joe Kippley, Public Health Director, Sioux Falls

Hillsboro-Mayville Partners

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:

- Dan Olson, Sanford VP of Operations
- Jac McTaggart, Sanford CEO/Administrator of Hillsboro & Mayville
- Andrew Wiese, Sanford Head of Strategic Intelligence
- Sandra Buchholz, Sanford Lead Community relations Specialist
- Melissa Mostad, Sanford Director of Nursing and Clinical Services of Hillsboro & Mayville
- Jenny Jacobson, Sanford Director of Ancillary of Hillsboro & Mayville
- Marie Riemer, Sanford Hillsboro Nurse Manager
- Stephanie Fugleberg, Sanford Mayville Nurse Manager
- Melissa Stern, Community Health Worker
- Kari Matthys, Clinical Care Leader
- Sam Thykeson, RN Care Manager
- Jim Murphey, Traill County EDC Director
- Steven Hunt, Traill County Sheriff
- Brenda Stallman, Traill County District Health Unit Director

Sanford Hillsboro Medical Center Description

Sanford Hillsboro includes a 16-bed Critical Access Hospital, two provider-based Rural Health Clinics, a 30-bed long-term care facility, and 16 assisted living units. The medical center employs approximately 130 people, including two family medicine physicians, a family medicine physician assistant, and family medicine NP.

Services available at Sanford Hillsboro include 24/7 emergency care, general acute care, physical, occupational and speech therapy, radiology, IV therapy, lymphedema management, nutrition consultation, respite care, bariatric, pathology, tele-psychiatry and FM Ambulance services.

CHNA 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. 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 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. It also serves to support progress made toward organizational strategies.

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)(3).

The 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. Hospitals are required to seek input from 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 also 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. This includes underserved populations experiencing disparities or at risk of not receiving adequate care due to being uninsured or due to geographic, language or financial or other barriers.

The community health needs assessment includes a process to identify community resources available to address identified and prioritized needs. Hospitals are to address each assessed need or explain why they are not addressing a need. Once needs have been identified and prioritized, hospitals are required to develop an implementation strategy for each. The strategies are reported on the IRS 990 and a status report must be provided each year on IRS form 990 Schedule H.

Finally, hospitals are required to be transparent with the findings and make the written CHNA report available to anyone who requests it. All CHNA reports and implementation strategies are housed on the Sanford website at www.sanfordhealth.org. Hospitals must keep three cycles of assessments on their website.

Sanford extended a good faith effort to engage all aforementioned community representatives in this process. We worked closely with public health experts throughout the entire assessment process. Public comments and responses to the community health needs assessment and the implementation strategies are welcome on the Sanford website or

contact can be made at <https://www.sanfordhealth.org/about/community-health-needs-assessment>. No community comments or questions regarding the previous CHNA have been made via the website link or email address.

CHNA Process

Sanford Health, in coordination with public health experts, community leaders, and other health care providers, within the local community and across Sanford's care delivery footprint, developed a multi-faceted assessment program designed to establish multiple pathways for health needs assessment.



Limitations

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in the community. A good faith effort was made to secure input from a broad base of the community. However, gaps in individual data sources may arise when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates. For example, these gaps may occur due to the difficulty in reaching respondents through the survey process.

To mitigate limitations, the CHNA evaluates community health from several perspectives: a stakeholder and community survey, meetings with community leaders that have special knowledge and expertise regarding populations, secondary data sources such as the U.S. Census Bureau and County Health Rankings, public comments from previous assessments, and institutional knowledge by Sanford employees locally and across the Sanford enterprise.



Following the completion of the 2022-2024 report, Sanford Health determined that the survey collection process was an area for improvement. As noted above, the multi-step process minimizes limitations that exist among individual components. Sanford Health and system partners determined there is greater interest in the survey findings, as such, efforts to improve representation across demographics is a focus for the current and future cycles.

Sanford invested in a multifaceted campaign that included an earned media campaign on local media outlets and the public-facing Sanford Health News (<https://news.sanfordhealth.org/>). The system also promoted the survey internally through the organization's intranet, all-staff emails, and newsletters.

Internal efforts were supported with a robust advertising campaign that included, among other efforts, a digital media program yielding 3.6 million impressions and a print ad campaign encouraging Native American communities to participate through placements in DeBahJiMon Magazine, Anishinaabeg Magazine and MHA Times (Mandan, Hidatsa, Arikara). Further support was given to collecting surveys at various community events. The goal of

these efforts was to increase participation by those underrepresented the previous cycle, including lower income, minority, and medically underserved populations.

Overall, survey respondents were much more aligned to community demographics. The investment made by the system and partners to improve representation provides a base of learnings for future CHNA cycles.

Community and Stakeholder Survey

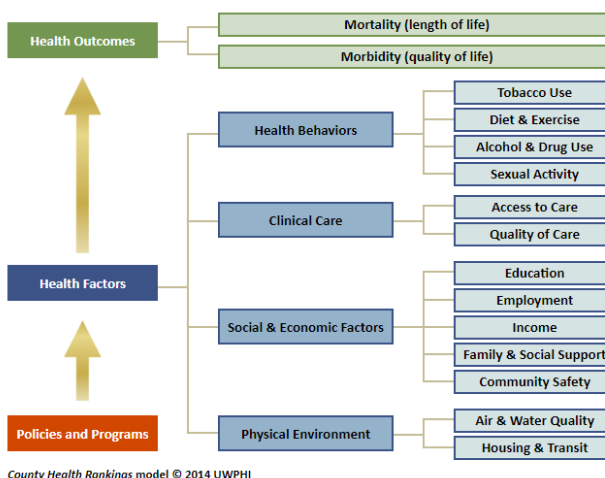
Community residents were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand health needs. Survey design is based on the UW Population Health Institute model. Each respondent was asked to rate community drivers from poor to excellent. Any response other than excellent was offered a follow-up opportunity to comment on the reason for their ranking. Respondents were also asked a series of questions specific to their health care access, health care quality, barriers to care, travel to care, and insurance. The survey was sent to a sample of the Traill and Steele County, ND, populations secured through Qualtrics, a qualified vendor. The full set of questions is available in the appendix.

The survey was the first of multiple efforts to engage community stakeholders and elected officials with knowledge and connections amongst medically underserved, low income, or minority populations. Stakeholders were sent the survey and asked to complete the instrument and then forward the survey to their respective populations for greater involvement. Additional investments to increase involvement in the survey are noted in the “Limitations” section of the report.

Survey data for the local community should be considered directional and best utilized in conjunction with additional data. A total of 168 respondents from the CHNA area completed the survey. Promotion investments by the system yielded a total of 9,714 completed surveys from across the Sanford footprint, an increase from 6,748 the previous cycle. The responses generated 48,643 open-ended responses and 1.76 million pieces of data (cells).

Secondary Data

County Health Rankings are based upon the UW Population Health model and serve as the main secondary data source utilized for the community health needs assessment. Alignment of the survey and secondary data within the UW Population Health model allows for greater connection of the data sets. Population data are sourced to the U.S. Census Bureau. Additional data sources may be used and are sourced within the document.



Health Needs Identification Methodology

The Center for Social Research at North Dakota State University was retained to develop the initial community health needs list for each community, building upon their involvement during the previous cycle. The following methodology was used to develop the significant health needs presented later in the report:

- Survey data was stratified into representative groups based upon population: large urban communities, medium sized communities, and rural communities. The three groups were analyzed separately. Hillsboro and Mayville are included with Bagley, MN;

Canby, MN; Canton-Inwood, SD-IA; Chamberlain, SD; Clear Lake, SD; Jackson, MN; Luverne, MN; Sheldon, IA; Tracy, MN; Webster, SD; Westbrook, MN; and Wheaton, MN.

- To identify community health care needs, each community's score by question was compared to the average stratified composite of the comparative group. For example, if the composite stratified system-wide average score is 4 and an individual community's average response was 2.5, which would suggest an issue of concern and a potential community health care need to be highlighted in the summary findings.
- Upon determination of a potential strength or need, County Health Rankings (<https://www.countyhealthrankings.org/>) and responses from open-ended questions provided additional insights into the drivers of the respective needs.
- A similar methodology was also used to provide additional insights into findings from County Health Rankings data with relevant health needs highlighted in the survey findings.
- Health needs identified through either the survey or County Health Rankings data but not both were also included in the findings.
- The Center for Social Research validates the findings of the primary research by engaging at least two internal reviewers. Each reviewer has their own technique and strengths to review the findings; however, they check for accuracy in the data by reviewing the code/syntax, the output, the correct representation of the data in the report, verbiage, consistency, context, and overall readability. Both reviewers also supported previous CHNA reports.

Community Asset Mapping

Asset mapping was conducted to locate community resources available to address the assessed needs. Each unmet need was researched to determine what local resources are available. Once gaps were determined, the prioritization exercise followed with key stakeholder groups determining top needs for their community.

A positive development since the previous CHNA report is the integration of findhelp.com into the Sanford Health digital ecosystem. In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health-related social care needs. The system is available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to Sanford Health patients and is available on Sanfordhealth.org and in MyChart. Patients can receive information in the format that is meaningful to them (electronic or paper) and in their preferred language. The tool is used to identify local resources as part of the community asset mapping section of this report.

Community Stakeholder Meetings

Community stakeholders and elected officials with knowledge and connections amongst medically underserved, low income, or minority populations were further included in the process during the community stakeholder meetings. During the meetings, survey findings were presented to community stakeholders. Facilitated discussion commenced and each participant was asked to consider the needs identified that should be further developed into implementation strategies. Health needs identified during the previous cycle but not raised through the survey or County Health Rankings were also considered. The meeting served to inform the group of the findings but also served as a catalyst to drive collaboration and prioritization of local needs.

The participants provided information to answer the following types of questions as it relates to identified needs:

- What are the biggest challenges currently with these needs in the community?
- Does the community have gaps in services, access, outreach, etc.?
- What opportunities exist, where can we have greatest impact in addressing these needs?
- Which are most urgent in nature?
- Is there already work being done on these needs?
- What are the resources currently not utilized within the community that could address this topic?
- Which needs fall within the purview of health care system and which do not? Can the non-healthcare needs be shared with other entities or organizations?
- Is there anything you consider an urgent need that we have not discussed?

At the end of the meeting the hospital administrator proposed the specific health needs to be addressed within the Implementation plan and the community members and they indicated support. Administrator recommendations are based on all factors, including primary and secondary data, input from the community stakeholder meeting, and scalability of current hospital programs and resources to address the identified needs efficiently and effectively. All identified needs not addressed in the implementation plan were shared with other community partners for action.

COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

The overall health of the community can be described as good. Survey respondents, supported by data from the County Health Rankings, indicated high marks for safety, high feelings of safety due to low crime levels, and positive perceptions of employment opportunities. However, six areas of concern were brought forth for discussion to the Community Stakeholder Meeting for discussion (below).

The top health needs presented below were identified through a mix of primary and secondary research conducted by the North Dakota State University Center for Social Research, which was commissioned by Sanford Health to analyze the data, and Sanford Health. Priority was given to the key topics ranked lowest by community survey with further analysis provided through secondary research. Areas of focus that may not have been raised by the community survey but shown to be an area of focus through secondary research, were also included.

Each health need includes the drivers behind its inclusion in the list, including qualitative survey results, qualitative responses from the survey, and stratified results from the enterprise results that provide clarity to the local discussion. Secondary research from County Health Rankings and other sources were also provided. Insight from the community stakeholder meetings was included as a valuable tool for understanding the needs, and importantly, how to address each issue

For the purposes of this assessment, the Hillsboro-Mayville market area is defined as Traill and Steele counties in North Dakota. The community health summary and identified health needs presented below were identified through a mix of primary and secondary research. Priority was given to the key topics rated lowest by respondents of the community survey, with further analysis provided through secondary research using the 2023 County Health Rankings (CHR) data. Areas of focus that may not have been raised by the community survey but shown to be an area of focus through secondary research, are also included. To further assist in identifying community health needs, survey and CHR data were collected for similar-sized market areas served by Sanford Health. Similar-sized market areas identified for and included in this analysis include Bagley, MN; Canby, MN; Canton-Inwood, SD-IA; Chamberlain, SD; Clear Lake, SD; Hillsboro-Mayville, ND; Jackson, MN; Luverne, MN; Sheldon, IA; Tracy, MN; Webster, SD; Westbrook, MN; and Wheaton, MN. For each measure, averages were calculated for each of the market areas and for the group as a whole for comparison purposes. Context and research provided to explain the importance of a particular health topic were obtained from CHR unless otherwise noted. A total of 168 respondents from the Hillsboro-Mayville area completed the survey.

Community Health Summary

Survey respondents were asked to rate various issues impacting health in their community and issues impacting their personal health and wellness on the following 1 to 5 scale: 1= poor, 2= fair, 3= good, 4= very good, 5= excellent.

Overall, perceptions among survey respondents in the Hillsboro-Mayville area regarding the following community health issues were positive (average score of 3.00 or higher):

- Community safety (average score=4.06)
- Environmental health (average score=3.97)
- Health care quality (average score=3.96)
- Long-term care, nursing homes, and senior housing quality (average score=3.85)
- Access to exercise opportunities (average score=3.64)

- Access to healthy foods (average score=3.57)
- Employment and economic opportunities (average score=3.30)
- Early child care quality (average score=3.23)

With the exception of access to exercise opportunities, average scores in the Hillsboro-Mayville area were higher than the comparison group average for each of these issues. In addition, the average score in the Hillsboro-Mayville area for long-term care, nursing homes, and senior housing quality was the highest among similar-sized markets served by Sanford Health.

When asked about their personal health, survey respondents in the Hillsboro-Mayville area rated their current health and wellness as good (average score=3.41) and their current ability to access health care services as very good (average score=4.01) — and both scores are higher than the comparison group average.

CHR data indicate that Traill County is among the healthiest counties in North Dakota. Steele County ranks in the lower-middle range of North Dakota counties in terms of overall health. The following areas of concern were identified for further discussion (in no particular order).

Top Health Needs

Access to Health Care Providers

Survey respondents in the Hillsboro-Mayville area rated their own ability to access health care as very good (average score=4.01), and higher than the comparison group average. In fact, most respondents in the Hillsboro-Mayville area have a primary care provider (97%), have been in for a routine checkup or screening in the past year (90%), and have received necessary health care for themselves and their family in the past year (82%). However, 79 percent of respondents have traveled for care in the past three years, a rate which is higher than the comparison group average. When asked why, most respondents indicated the travel was due to needing specialty care that was not available locally (75%), followed by 35 percent who were referred by a physician and 14 percent who traveled for better or higher quality care. The need to travel for care is evidenced in CHR data which indicate that when compared to similar-sized markets, the Hillsboro-Mayville area has higher-than-average ratios of population to providers, with 3,283 people for every one primary care physician, 4,907 people for every dentist, and 9,813 people per mental health care provider. In addition, CHR data show that the Hillsboro-Mayville area has lower-than-average broadband access (76%) when compared to similar-sized markets served by Sanford Health.

Nearly half of survey respondents in the Hillsboro-Mayville area indicated that there are health care services they would like to see offered or improved in their community (46%). When these respondents were asked which health care services they would like to see offered or improved, most said behavioral and mental health services (73%), followed by addiction treatment (32%), walk-in/urgent care (29%), OBGYN/women's care (18%), dental care (18%), and dermatology (17%).

Community stakeholders discussed accessibility as a need and how services differ (and coordinate) between the two hospitals. Sanford currently offers outreach to the respective communities, but further expansion is limited due to space constraints, particularly in Hillsboro. Participants discussed access for several service lines, including Dermatology which has significant coverage in the community. Participants did note that the community could likely support additional dermatology procedure offerings to complement the current services available locally. For walk-in, the communities maintain appointments reserved for walk-in patients but may face limitations due to some of the times being taken for primary care demand. Mayville, having limited the availability of walk-in services due to staffing, is set

to resume Saturday walk-ins in the near future through expanded coverage from a Mayville provider. The expanded hours may also assist emergency room volumes for individuals that have no other place to go. Mental health access was discussed as a component of the access need and is addressed in the next section. Participants agreed that mental health access is a need to address in the Implementation Plan.

Local Asset Mapping	
<p>Mental Health/Behavioral Health resources:</p> <ul style="list-style-type: none"> · Traill District Health Unit, PO Box 58, Hillsboro · Veterans Services, 339 Center Ave S, Mayville · Counseling for MSU students, Classroom Building 108D, Stan Dakken Dr, Mayville · Steele Co. Veterans Service Office, 201 Wash. Ave. W., Finley · VA Mental Health Services, 2101 Elm St N, Fargo · SE Human Service Center, Region V, 2624 9th Ave. S., Fargo · Sanford Behavioral Health, 100 4th St. S., Fargo · ND Department of Health and Human Services, 600 E Boulevard Ave, Bismarck 	<p>Health Care resources:</p> <ul style="list-style-type: none"> · Sanford Medical Center, 42 6th Ave. SE, Mayville · Sanford Clinic, 315 E. Caledonia, Hillsboro · Sanford Clinic, 407 Washington Ave E, Finley · CPT Medical Center, 101 C 3rd St. W. Finley · Sanford Home Care, 49 7th Ave. SE, Mayville · Steele Co. Health Nurse, 201 Washington Ave., Finley <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Mental Health

Mental health includes our emotional, psychological, and social well-being and affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood].

When survey respondents in the Hillsboro-Mayville area were asked about the most important health care issues impacting their community, mental health was the top issue. In addition, of survey respondents in the Hillsboro-Mayville area who would like to see specific services offered or improved in their community, most said behavioral and mental health services (73%) followed by 32 percent who said addiction treatment. This response is reflected in CHR data which indicate that the Hillsboro-Mayville area has the worst ratio of population to mental health care providers when compared to similar-sized markets served by Sanford Health at 9,813 people for every one mental health provider.

Even so, when compared to similar-sized markets, CHR data indicate that the Hillsboro-Mayville market area has a lower-than-average rate of individuals experiencing frequent mental distress (12 percent of adults average at least 14 days of mental distress per month).

Participants in the community stakeholder meeting agreed that mental health is a community need. The system conducts social determinant screenings with patients but indicated that mental health providers are not always available for referral. It is worth noting that patients with significant immediate needs are able to receive mental health care. The system has expanded access by offering virtual mental health care, which has been utilized by patients. However, face-to-face meetings are often still preferred by many patients. For patients unsure of virtual care coverage by their insurance, resources are available to patients and health care staff to look up coverage levels for their plan, but service may not always be

known or utilized. Another barrier for some patients is the lack of high-speed internet to perform virtual care. Public partnerships have been formed in recent years to offer access to wifi at select public locations for these types of services. Although beneficial for some residents, it remains difficult for seniors to travel to the location. Further challenges exist with seniors that do not know how to operate the technology required to connect to the appointment. Law enforcement is also utilizing virtual behavioral health care when responding to crisis incidents, which has been seen as beneficial but not a long-term solution as follow up care is typically needed. Stigma surrounding behavioral health still exists among children and adults so engaging the community to decrease stigma may reduce barriers for individuals to seek care. Further engagement of students in the area schools is a need. Stakeholders agreed that mental health access is a need to address in the Implementation Plan.

Local Asset Mapping	
<p>Mental Health/Behavioral Health resources:</p> <ul style="list-style-type: none"> · Traill District Health Unit, PO Box 58, Hillsboro · Veterans Services, 339 Center Ave S, Mayville · Counseling for MSU students, Classroom Building 108D, Stan Dakken Dr, Mayville · Steele Co. Veterans Service Office, 201 Wash. Ave. W., Finley · VA Mental Health Services, 2101 Elm St N, Fargo · SE Human Service Center, Region V, 2624 9th Ave. S., Fargo · Sanford Behavioral Health, 100 4th St. S., Fargo · ND Department of Health and Human Services, 600 E Boulevard Ave, Bismarck 	<p>Dementia/Alzheimer's resources:</p> <ul style="list-style-type: none"> · Alzheimer's Association, 2631 12th Ave. S. a, Fargo · Luther Memorial Home, 750 Main St. E., Mayville · Sanford Health Hillsboro Clinic, 315 E. Caledonia Ave, Hillsboro · Steele Co. Social Services (Alzheimer's support), PO Box 276, Finley · Mayville Senior Citizen's Center (provides adult day care) 224 E. Main St., Mayville
<p>Substance Abuse resources:</p> <ul style="list-style-type: none"> · Traill Co. Social Services, 114 W. Caledonia Ave, Hillsboro · Steele Co. Social Services, 201 Washington Ave., Finley · Veteran's Office, 114 W. Caledonia Ave, Hillsboro · Veteran's Office, 201 Washington Ave. W, Finley 	<p>Drug Take-Back Programs:</p> <ul style="list-style-type: none"> · Traill Co, Sheriff, 118 W. Caledonia Ave, Hillsboro · Sanford Mayville, 42 6th Ave. SE, Mayville · Hillsboro Drug, 13 N. Main St., Hillsboro <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Access to Affordable Health Care

Cost and the ability to afford needed health care was identified as the top health care concern that survey respondents and their families in the Hillsboro-Mayville area face on a regular basis – this, despite respondents rating the employment and economic opportunities in their community as good (average score=3.30) and better than the comparison group average for similar-sized markets served by Sanford Health. In addition, CHR data indicate that when compared to these similar markets, the Hillsboro-Mayville area has a higher-than-average median household income (\$74,667), a lower-than-average child poverty rate (10%), and a similar uninsured rate (8%).

Stakeholder meeting participants discussed the need to engage the community early on many of the healthy living basics to lower long-term healthcare costs by catching potential issues early. Supporting components elevated in the Healthy Living section would have a positive impact on costs. In addition to the cost of chronic conditions, participants also discussed indirect costs on healthcare, including travel, housing, and health foods, and their impact on the community. The need was not included in the Implementation Plan as others were deemed higher priority for purposes of the Community Health Needs Assessment

Local Asset Mapping	
<p>Health/Vision/Dental Insurance resources:</p> <ul style="list-style-type: none"> · Healthy Steps (medical coverage for uninsured children), 114 W. Caledonia Ave, Hillsboro · Erickson Agency, 502 W. Caledonia Ave, Hillsboro · Ihry Insurance, 520 1st Ave. NW, Hillsboro · David Johnson Insurance, 233 3rd St. SE, Mayville · Rexine Family Eyecare, 32 Main St W, Mayville · Rothfusz Family Dental, 7 W. Caledonia Ave, Hillsboro · Goose River Dental, 37-1/2 Main St. E., Mayville 	<p>Prescription Assistance programs:</p> <ul style="list-style-type: none"> · Prescription Connection, 888-575- 6611 · Prescription Assistance, 624 Main Ave #5, Fargo · Healthy Steps, 600 E. Boulevard Ave, Bismarck · Partnership for Prescription Assistance, www.pparx.org · NeedyMeds.org · CHIP, 877-543-7669 · ND RX Card, northdakotarxcard.com <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Healthy Living

Survey respondents in the Hillsboro-Mayville area rated their own personal health and wellness as good (average score=3.41) and the quality of health care in their community as very good (average score=3.96). Despite this, when survey respondents were asked about the biggest health concerns for themselves and their family (concerns they face on a regular basis), chronic health issues along with diet and exercise were among the top concerns, after cost and access to health care. Even so, CHR data indicate that when compared to similar-sized markets served by Sanford Health, the Hillsboro-Mayville area has better-than-average rates of diabetes (8%), obesity (33%), adult smokers (17%), and food insecurity (3%).

Stakeholder meeting participants noted the role nutrition plays in overall healthy living. Sanford launched wellness pantries in the clinic two years ago to provide patients that screen for food insecurity. Staff noted the success of the program. Hillsboro has a fitness center that offers a number of classes, such as Tai Chi and Yoga, that are widely available to the community. Participants mentioned that some residents regularly use the center and its offerings, while many do not. In some cases, the lack of usage may be the result of financial constraints while others may not be familiar with the full range of options. The group agreed that physical health is connected to mental health as it provides an avenue to engage with others. In addition to physical activity, the participants indicated that Medicare Wellness visits are underutilized by area seniors as they are not aware of the benefit. An opportunity may exist to educate eligible residents on the service and the benefits it may bring. Utilization of the program could have a potential downstream impact on access and cost as potential health issues could be identified earlier and less costly to treat. Participants agreed that healthy living would be appropriate for inclusion in the Implementation Plan.

Local Asset Mapping

<p>Chronic Disease resources:</p> <ul style="list-style-type: none"> • Sanford’s Better Choices Better Health: 701-417-4905 • Sanford Medical Home, c/o Sanford Mayville or Sanford Hillsboro Clinics • Sanford Hillsboro, 315 E. Caledonia, Hillsboro • Sanford Mayville, 42 6th Ave. SE, Mayville • Sanford Finley, 407 Washington Ave E, Finley • Steele Co. Public Health, 201 Washington Ave W, Finley • Traill Co. Public Health, 114 W. Caledonia Ave, Hillsboro • Arthritis Foundation, PO Box 1208, Fargo • American Heart Assn - heart.org 	<p>Healthy Nutrition/Foods resources:</p> <ul style="list-style-type: none"> • Dale’s Food, 13 1st St. SW, Hillsboro • Miller’s Fresh Foods, 201 1st Street NE, Mayville • Stones Market, 100 4th St., Finley • Town Square Farmers Market, 3rd St. & Demers, Grand Forks • Greater Grand Forks Farmers Market, South Forks Plaza Parking Lot, Grand Forks • Farmers Market, Island Park, Mayville
<p>Obesity resources:</p> <ul style="list-style-type: none"> • Sanford Mayville, 42 6th Ave. SE, Mayville • Sanford Hillsboro, 315 E. Caledonia Ave, Hillsboro • Town Square Farmers Market, 3rd St. & Demers, Grand Forks • 4th St Farmer’s Market – 151 S 4th St, Grand Forks • Farmers Market, Island Park, Mayville 	<p>Physical Activity resources:</p> <ul style="list-style-type: none"> • HERD Wrestling, 128 4th St. SE, Hillsboro • Goose River Golf Course, 700 6th St. NW, Hillsboro • Mayville Golf Course, 34 Westwood Dr., Mayville • Frisbee Disc Golf, 460-492 Main St. W., Mayville • Swimming, 415 Woodland Park Dr., Hillsboro • Hillsboro Fitness Center, 12 4th St. NE, Hillsboro • Hillsboro T-Ball & Little League, hillsbororecreation@hillsboro-nd.us • Sledding Hill, Hwy 200, Mayville • Indoor Ice Arena, 338 2nd Ave. NW, Mayville • Hockey Club in Hillsboro, icedawgshockey.com
<p>Physical Activity Resources Cont.:</p> <ul style="list-style-type: none"> • Woodland Park activities, 415 Woodland Park Dr., Hillsboro • Walking opportunities/Parks & Playgrounds: <ul style="list-style-type: none"> o Island Park, ND Hwy 200, Mayville o Rainbow Garden & Sculpture Walk, 401-425 3rd St SW, Mayville o Southside Park, 414 4th St. SE, Mayville o Water Tower Park, 532-608 Main St E, Mayville o Pioneer Park, ND Hwy 200, Mayville o Military Park, 101-199 1st St. SW, Mayville o Woodland Park, 415 Woodland Park Dr., Hillsboro o Buffalo River Park, I-29, Hillsboro 	<p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Public Transportation

Transportation systems help ensure that people can reach everyday destinations, such as jobs, schools, healthy food outlets, and health care facilities, safely and reliably. Public transportation services play an important role for people who are unable to drive, people without access to personal vehicles, children, individuals with disabilities, and older adults.

Survey respondents in the Hillsboro-Mayville area rated community access to daily transportation as less than good (average score=2.13) and lower than any other community health issue. When asked to explain why they rated community access to daily transportation the way they did, respondents noted that with the exception of variable senior rides, there is very limited to non-existent public transportation options in their community.

Stakeholder participants indicated that more transportation options would benefit the community, but recent economic analysis indicates that it would not be financially viable on its own. Veterans have access to travel for health care services, but it varies by community. The service will pick up veterans in Hillsboro and it is the responsibility of the patient to find travel to Hillsboro from other communities. In addition to veteran services, participants noted that Medicaid and some insurance companies will cover health-related travel and there may be an opportunity to promote the service to patients. Sanford will continue to support efforts to improve transportation, but is not including the need in the Implementation Plan as it was deemed a lower priority for purposes of the Community Health Needs Assessment.

Local Asset Mapping

Transportation resources:

- Valley Senior Services, 205 N. Main St, Hillsboro & 39 1st Ave NE, Mayville
- Traill County – Transportation – (701)636-5953 or (800)845-1715
- Finley Senior Center, 301 Central Ave., Finley
- Medical Transportation DAV, 2101 Elm St N, Fargo

For Additional Resources Reference:

<https://sanford.findhelp.com/>

Affordable Housing

There is a strong and growing evidence base linking stable and affordable housing to health. As housing costs have outpaced local incomes, households not only struggle to acquire and maintain adequate shelter, but also face difficult trade-offs in meeting other basic needs. When the majority of a paycheck goes toward the rent or mortgage, it can be difficult to afford doctor visits, healthy foods, utility bills, and reliable transportation to work or school. This can, in turn, lead to increased stress levels and emotional strain.

Survey respondents in the Hillsboro-Mayville area rated the availability of affordable housing in their community as less than good (average score=2.56). When asked to explain why they rated community access to affordable housing the way they did, responses focused on a lack of affordable and income-restricted housing options for individuals and families looking for safe and reasonable housing to own or rent.

CHR data indicate that 7 percent of households in the Hillsboro-Mayville area have severe housing problems (i.e., overcrowded, high housing costs, lack of kitchen facilities, or lack of plumbing facilities) and 7 percent of households spend at least 50 percent of their household income on housing costs – both rates are among the lowest when compared to similar-sized markets.

Participants in the community stakeholder meeting agreed that housing that is affordable to local families is a need for the community. The cost of building housing, regardless of whether it is a single-family home, duplexes, or apartments, continues to rise. The cost pressures impact not only the development of starter homes, but also limit the ability of others to build a new home and move out of older homes that would be more affordable to lower income residents. Discussions of likely economic development opportunities and new businesses will only exacerbate housing costs. Affordable housing is not included in the Implementation Plan as other organizations are better positioned to address the need.

Local Asset Mapping	
<p>Housing resources:</p> <ul style="list-style-type: none"> • Traill County Housing Authority, 335 Kiwanis Dr #7, Hillsboro • Economic Assistance of Steele County, 201 Washington Ave W, Finley • VA Supportive Housing, 2101 Elm St N, Fargo • Viking Insurance & Realty, 111 Main St W, Mayville • Valley Land Investments Real Estate, 27 Main St E, Mayville • Goose River Realty, 506 4th St SE, Hillsboro • FM Home Pros, 5012 53rd St S Ste G, Fargo 	<p>Low Income Apts.:</p> <p>Hillsboro:</p> <ul style="list-style-type: none"> • Hillsboro Development Association, 335 Kiwanis Dr • Park Apartments, 217 4th St SW <p>Mayville:</p> <ul style="list-style-type: none"> • Mayville Housing, 33 8th Ave SE, Mayville • Trail County Housing (several locations) – Trailcountyedc.com/living-here/rental-properties <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Sanford Area of Focus

The significant health needs noted above were brought forward as topics of discussion at the local stakeholder meeting, which convened a range of community leaders with knowledge of medically underserved, low income, or minority populations. Members of the local public health agency and Sanford Health were also present. A list of attendees can be found in the introduction. Stakeholders discussed the health needs, potential causes, and provided additional insight for their local populations and community resources. Participants were also encouraged to offer additional needs that may not have been raised during the research process; no additional needs were brought forward.

The Community Health Needs Assessment identified two specific areas for focus for Sanford during the 2025-2027 implementation cycle:

1. Reduce physical and perceptual barriers to seeking mental health care. Includes access to health care and mental health needs noted above.
2. Promotion of Healthy Active lifestyle.

Implementation Plan for Prioritized Needs

Priority 1: Reduce physical and perceptual barriers to seeking mental health care

Current Activities

Sanford currently provides mental health screenings within the clinic. Integrated Health Therapists have been available in the past, primarily through virtual care, but were limited due to a resignation. The system provides Sanford.findhelp.com as a consumer facing resource to find care and mental health resources.

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see an increase of patients screened for depression and greater awareness resources available locally

Goal 1: Reduce stigma and increase screenings for behavioral health care.

Action/Tactic	Measurable Outcomes & Timelines	Resources	Leadership	Community Partnerships and Collaborations - if applicable
Further increase utilization of the PHQ-9 assessment tool in PCP visits	% of patients with major depression or dysthymia and an initial PHQ-9 score of 9 or greater whose 6-month PHQ-9 score was less than 5	Senior Clinic Leadership	Local leadership team	
Reduce community stigma surrounding mental health care and educate on the value of the PHQ-9 assessment and role of IHTs	Presentations held in the school and in the community Explore role of Sanford <i>fit</i> to expand student engagement IHT utilization	Staff resources	Local leadership team	TBD based upon partner availability
Conduct review of internal data to identify populations with lower screening and utilization rates	Conduct the study and develop action plan in year one. Implement plan starting in year two.	Staff resources	Local leadership team	

	Screening rates and utilization			
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Goal 2: Improve access to mental health resources in the community.

Action/Tactic	Measurable Outcomes & Timelines	Resources	Leadership	Community Partnerships and Collaborations - if applicable
Partner with community resources to promote wifi locations for virtual care appointments as noted in the CHNA findings.	Appointments held	Marketing/Communication	Local leadership	School district, county and city governments, respective staff
Explore technology educational opportunities with local vendors	Identify community partners with resources and knowledge base to education on connectivity Explore engagement opportunities with medically underserved with limited to little access Number of appointments among community, percentage of visits conducted virtually	Staff time, marketing and communication in the clinic.	Local leadership and Sanford IT	Potential collaborations with local telecom providers
Increase utilization of Integrated Health	Number of visits	Leadership, time during primary care appointments	Sanford leadership and clinic staff	

Therapists in the primary care setting to assess This tactic also supports the first goal.				
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Priority 2: Promotion of Healthy Active lifestyle

Current Activities

Sanford currently supports the Hillsboro Running Clubs run/walk event in June and supports the Mayville Youth Center. The Bridging Centers in both Mayville and Hillsboro promote the Better Choices Better Health class and our Dietatians in both campuses provide nutritional education

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see an increase in residents utilizing local resources and a decline in related visits at the clinic.

Goal 1: Provide opportunities for adult and youth to meet recommended physical activity

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Restart “Walk with us Wednesdays” in Mayville Armory	Number of walking events that occur per year	Staff time, marketing and communication in the community	Sanford leadership	
Work Closely with Park Boards and Traill County Public Health to expand Community Knowledge of existing Activities.	Number of communications shared with public including education on activity importance and activity options available in our area	Staff time	Sanford leadership, Sanford Community Relations	Hillsboro and Mayville Park Boards, Traill County Public Health

Goal 2: Develop sustainable strategies that encourage residents to make healthy choices

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Increase access to/availability to healthy food choices through	% of patients screened in clinics	Staff time, financial	Local staff	Great Plains Food Bank

our Wellness Pantry				
Promote Better Choices Better Health Classes throughout County	Increase number of referrals to BCBH course	Staff time, marketing and communication in the community	Sanford Community Relations, Sanford Staff	Sanford enterprise education team

Needs Not Addressed

Needs identified during the CHNA process that are not prioritized in the preceding implementation plan were deemed to be less urgent in nature, are being addressed by other community individuals, resources, or organizations, or the hospital does not currently have the appropriate resources to prioritize the work at this time. For more information on needs not addressed, refer to the sections on each specific need above.

Although not included in the Implementation Plan, the hospital supports efforts to address community needs, such as viewing the information collected within the Community Health Needs Assessment as a community benefit and sharing survey and assessment information with community partners to support the expansion or establishment of programs that reduce community needs. Additionally, Sanford Health further supports through its findhelp resource tool that informs patients and consumers of national and local resources. In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health related-social care needs. The system is available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to patients and is available on Sanfordhealth.org and MyChart.

EVALUATION OF 2022-2024 CHNA

System-wide Support and Utilization of the Community Health Needs Assessment Program

Sanford Health continues to integrate the CHNA report, supporting data, and Implementation Plans across the organization, including in the annual strategic planning program and operations. The Sanford Health Board of Trustees incorporated population health as an aspirational target metric necessary to become the “premier rural health system” in the country. The population health target aligns the work conducted through the CHNA with the overall evaluation of Sanford’s success.

CHNA data is made available throughout the planning process as needed as part of the annual strategic planning process, both internally and to external organizations that partner with the system. Sanford also incorporated the CHNA into the capital expenditure request process to give a voice to the needs and concerns of this population.

In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health related-social care needs. The system is available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to patients and is available on Sanfordhealth.org and MyChart. Findhelp generated nearly 28,000 internal and external searches from within CHNA-defined communities on CHNA topics in 2022 and over 19,000 in 2023. The Hillsboro CHNA area had 436 searches in 2022 and 2023.

Mental Health Services

Sanford Hillsboro has established two goals for the mental health services priority. The first is improving PHQ-9 scores for patients with depression. The second is to provide for improved access to Mental Health/Behavioral Health Services. Although the findhelp tool is not specific to mental health, residents of the CHNA community conducted 436 searches on the findhelp platform in 2022 and 2023, with 35% on health-related topics.

Sanford Mayville continues to use the PHQ2 for all patient health questionnaires on initial appointments to ensure those in need of mental health services are identified and offered treatment. The panel management team is completing follow-up for new depression diagnosis. Sanford Hillsboro started the same process in Quarter two of 2023 with great compliance by the staff. We have shown success in screening our patients in both facilities.

Both Sanford Mayville and Sanford Hillsboro had implemented integrated health therapists (IHTs) into the Clinics, primarily via telehealth, but the IHT resigned.

Hillsboro continued to offer the Senior Life Solutions outpatient group therapy program restarted early 2023 and we had 5-7 patients per day participating in the program throughout 2023.

Transportation

Sanford seeks to address transportation priorities by providing a comprehensive direction of options available within the county. Community residents conducted 436 searches on the findhelp platform in 2022 and 2023, with 11% on transit-related topics. Search terms include "help pay for transit," "transportation," and "help pay for gas." The CHNA area has over 79 food-related programs and organizations available to local residents through the findhelp tool. These programs and organizations can maintain their contact information and resources and can receive referrals through the system, if desired. Of the 79 organizations, 51 are state-based and 2 are local.

A list of transportation options continues to be available across the county by Sanford Hillsboro and Sanford Mayville in coordination with Traill County. The community has a bus/van available for use and indications are it is well-received in the community. A limitation to the program is driver availability.

Sanford supports the use of virtual care as an alternative to in person visits for several types of care. AS such, Sanford Hillsboro and Sanford Mayville promotes virtual care—including video visits, telehealth, and e-visits—to patients as appropriate.

CONTACT INFORMATION

The Community Health Needs Assessment, Implementation Plan, and survey data are available online at <https://www.sanfordhealth.org/about/community-health-needs-assessment>. The website includes current and historical reports.

Anyone wishing to receive a free printed copy, obtain information on any topic brought forth in the report, or offer public comments for consideration during the implementation plan or future Community Health Needs Assessment work, please contact us at Community.Benefits.Sanford@SanfordHealth.org or visit <https://www.sanfordhealth.org/about/community-commitment/community-health-needs-assessment>

APPROVAL

Local CHNA priorities were reviewed and approved by the respective governing boards and the Sanford Health Board of Trustees approved all of the Sanford Community Health Needs Assessments and Implementation Plans.

APPENDIX

Expanded Demographics¹

Steele County with a population of 1,782 and Traill County with a population of 7,908 have both had population decreases with a change of -0.7% and -1.10% respectively. In the same time frame of April 2020 to July 2023, North Dakota had an increase in population growth with a rate of 0.6%. The populations for both Steele and Traill Counties have a higher percentage of those 65 years and over.

Residents for both counties have lower housing values than the state average but both Steele and Traill Counties have higher median household income than the average for North Dakota by \$11,791 and \$7,198 respectively. Both counties have less access to broadband internet and less households have a computer than the rest of the state. The workforce for both these counties is lower than the state average with 60-65% in the civilian labor force, the state average being 68%

Fact	Steele County, ND	Traill County, ND	North Dakota
Population estimates, July 1, 2023, (V2023)	1,782	7,908	783,926
Population estimates base, April 1, 2020, (V2023)	1,795	7,998	779,079
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	-0.70%	-1.10%	0.60%
Persons under 5 years, percent	5.80%	5.90%	6.40%
Persons under 18 years, percent	22.50%	23.20%	23.50%
Persons 65 years and over, percent	26.20%	20.70%	16.70%
White alone, percent	96.10%	94.00%	86.60%
Black or African American alone, percent	0.50%	1.10%	3.60%
American Indian and Alaska Native alone, percent	1.30%	1.50%	5.30%
Asian alone, percent	0.20%	0.60%	1.70%
Native Hawaiian and Other Pacific Islander alone, percent	0.00%	0.10%	0.10%
Two or More Races, percent	1.80%	2.70%	2.60%
Hispanic or Latino, percent	2.70%	4.20%	4.60%
White alone, not Hispanic or Latino, percent	93.70%	90.60%	83.00%
Housing Units, July 1, 2023, (V2023)	1,104	3,663	380,841
Owner-occupied housing unit rate, 2018-2022	77.40%	73.00%	63.20%
Median value of owner-occupied housing units, 2018-2022	\$119,900	\$172,700	\$232,500
Median selected monthly owner costs -with a mortgage, 2018-2022	\$1,538	\$1,438	\$1,653
Median selected monthly owner costs -without a mortgage, 2018-2022	\$491	\$594	\$551
Median gross rent, 2018-2022	\$594	\$709	\$912

¹ <https://www.census.gov/quickfacts>

Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	1.70%	2.80%	6.70%
Households with a computer, percent, 2018-2022	83.20%	91.80%	93.20%
Households with a broadband Internet subscription, percent, 2018-2022	73.00%	77.70%	85.80%
High school graduate or higher, percent of persons age 25 years+, 2018-2022	96.20%	93.70%	93.50%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	30.00%	30.60%	31.40%
With a disability, under age 65 years, percent, 2018-2022	5.10%	7.40%	7.70%
Persons without health insurance, under age 65 years, percent	6.80%	9.70%	7.50%
In civilian labor force, total, percent of population age 16 years+, 2018-2022	61.10%	65.40%	68.00%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	54.40%	62.10%	64.00%
Mean travel time to work (minutes), workers age 16 years+, 2018-2022	16.8	18.9	17.9
Median household income (in 2022 dollars), 2018-2022	\$85,750	\$81,157	\$73,959
Per capita income in past 12 months (in 2022 dollars), 2018-2022	\$40,435	\$40,942	\$40,748
Persons in poverty, percent	7.80%	8.60%	11.50%
Total employer establishments, 2021	60	286	24,816
Total employment, 2021	469	2,565	332,684

Community Health Needs Assessment Survey

The survey tool was delivered online via Qualtrics. The survey questions in printed format are presented below as a reference. Surveys made available in English, Spanish, Somali, and Sudanese.

Thank you for your interest in the Community Health Needs Assessment. Your confidential responses are vital to helping understand the factors driving the health needs of the community.

RESIDENCE

Please enter your county of residence: _____

Please enter your zip code: _____

What is your current age? _____

COMMUNITY

How would you rate the quality of HEALTH CARE available in your community?

Poor

Fair

Good

Very Good

Excellent

Don't Know

In your opinion, what is the most important HEALTH CARE issue your community faces?

How would you rate the quality of LONG-TERM CARE, NURSING HOMES & SENIOR HOUSING services in your community?

Poor

Fair

Good

Very Good

Excellent

Don't Know

Why did you give it that rating?

How would you rate the quality of CHILDCARE, DAYCARE & PRE-SCHOOL services in your community?

Poor

Fair

Good

Very Good

Excellent

Don't Know

Why did you give it that rating?

090305-01832 101

1

How would you rate the availability of AFFORDABLE HOUSING in your community?

Poor Fair Good Very Good Excellent Don't Know
○ ○ ○ ○ ○ ○

Why did you give it that rating?

How would you rate the ability of residents to ACCESS DAILY TRANSPORTATION in your community?

Poor Fair Good Very Good Excellent Don't Know
○ ○ ○ ○ ○ ○

Why did you give it that rating?

How would you rate your community's EMPLOYMENT & ECONOMIC OPPORTUNITIES?

Poor Fair Good Very Good Excellent Don't Know
○ ○ ○ ○ ○ ○

Why did you give it that rating?

How would you rate your community as being a SAFE place to live?

Poor Fair Good Very Good Excellent Don't Know
○ ○ ○ ○ ○ ○

Why did you give it that rating?

How would you rate the ENVIRONMENTAL health of your community?

(clean air, clean water, etc.)

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

How would you rate the ability of residents to access HEALTHY & NUTRITIONAL FOODS in your community?

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

How would you rate the ability of residents to access PHYSICAL ACTIVITY & EXERCISE OPPORTUNITIES in your community?

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

YOUR HEALTH AND WELLNESS

Overall, how would you rate YOUR current state of health & wellness?

- Poor Fair Good Very Good Excellent Don't Know

What is the biggest HEALTH CARE concern you or your family face on a regular basis?

Are there any health care services that you would like to see OFFERED or IMPROVED in your community?

- Yes Please answer next question
- No Skip to 'Your Health Care Usage' section

Please select the health care services you would like to see OFFERED or IMPROVED in your community. (Select all that apply)

- | | |
|--|--|
| <input type="radio"/> Addiction Treatment | <input type="radio"/> Heart Care |
| <input type="radio"/> Behavioral Health / Mental Health | <input type="radio"/> Labor and Delivery |
| <input type="radio"/> Cancer Care | <input type="radio"/> Long-Term Care / Nursing Homes |
| <input type="radio"/> Chiropractic Care | <input type="radio"/> Orthopedics and Sports Medicine |
| <input type="radio"/> Dental Care | <input type="radio"/> OBGYN / Womens' Care |
| <input type="radio"/> Dermatology | <input type="radio"/> Pediatrics / Childrens' Care |
| <input type="radio"/> Emergency / Trama | <input type="radio"/> Walk-in / Urgent Care |
| <input type="radio"/> Eye Services (<i>Ophthalmology, Optometry</i>) | <input type="radio"/> Other (<i>please specify</i>): |
| <input type="radio"/> Family Medicine / Primary Care | |
| <input type="radio"/> General Surgery | |

YOUR HEALTH CARE USAGE

Do you currently have a primary care physician or provider who you go to for general health issues?

- Yes No

How long has it been since you last visited a physician / provider for a routine check up or screening?

- | | |
|---|---|
| <input type="radio"/> Within the past year | <input type="radio"/> More than 5 years ago |
| <input type="radio"/> Within the past 2 years | <input type="radio"/> Never |
| <input type="radio"/> Within the past 5 years | |

What has kept you from having a routine check-up? (Select all that apply)

- | | |
|--|--|
| <input type="radio"/> Cost/Inability to Pay | <input type="radio"/> No child care |
| <input type="radio"/> COVID-19 | <input type="radio"/> Wait time for appointments are too long |
| <input type="radio"/> Don't feel welcomed or valued | <input type="radio"/> Clinic hours are not convenient |
| <input type="radio"/> Don't have insurance | <input type="radio"/> Fear / I do not like going to the doctor |
| <input type="radio"/> My insurance is not accepted | <input type="radio"/> Nothing / I do not need to see a doctor |
| <input type="radio"/> Lack of transportation | <input type="radio"/> Don't have a primary care physician |
| <input type="radio"/> Distance / lack of local providers | <input type="radio"/> Other (please specify): |
| <input type="radio"/> Getting time off from work | |

How would you rate your current ability to ACCESS health care services?

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor | Fair | Good | Very Good | Excellent |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Why did you give it that rating?

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

- Yes No Unsure

What are the reasons you or a family member did not receive the care needed?

- | | |
|--|--|
| <input type="radio"/> Cost/Inability to Pay | <input type="radio"/> No child care |
| <input type="radio"/> COVID-19 | <input type="radio"/> Wait time for appointments are too long |
| <input type="radio"/> Don't feel welcomed or valued | <input type="radio"/> Clinic hours are not convenient |
| <input type="radio"/> Don't have insurance | <input type="radio"/> Fear / I do not like going to the doctor |
| <input type="radio"/> My insurance is not accepted | <input type="radio"/> Nothing / I do not need to see a doctor |
| <input type="radio"/> Lack of transportation | <input type="radio"/> Don't have a primary care physician |
| <input type="radio"/> Distance / lack of local providers | <input type="radio"/> Other (please specify): |
| <input type="radio"/> Getting time off from work | |

TRAVELING FOR CARE

Have you or a member of your family TRAVELED to receive health care services outside of your community within the past 3 years?

- Yes
- No

If yes, Where did you travel to? *(If you traveled more than once, enter the most recent place you traveled to?)*

City _____ State _____

What was the main reason you traveled for care? *(select all that apply)*

- Referred by a physician
- Better / higher quality of care
- Medical emergency
- Needed a specialist / service was not available locally
- Second opinion
- Other *(please specify)*
- Immediate / faster appointment
- On vacation / traveling / snowbirds
- Cost or insurance coverage
- Don't feel welcomed or valued by local providers

YOUR HEALTH INSURANCE

Do you currently have health insurance?

- Yes
- No

Please indicate the source of your health insurance coverage.

- Employer *(Your employer, spouse, parent, or someone else's employer)*
- Individual *(Coverage bought by you or your family)*
- Federal Marketplace *(Minnesota Care / Obamacare / Affordable Care Act)*
- Medicare
- Medicaid
- Military *(Tricare, Champus, VA)*
- Indian Health Service *(IHS)*
- Other *(please specify)*

DEMOGRAPHICS

What is your sex?

- Male
- Female
- Prefer not to answer

Do you, personally, identify as lesbian, gay, bisexual, transgender or queer?

- Yes
- No
- Prefer not to answer

How many people live in your house, including yourself? _____

How many children under age 18 currently live with you in your household? _____

Are you Spanish, Hispanic, or Latino in origin or descent?

- Yes
- No

What is your race? *(Select all that apply)*

- American Indian or Alaska Native
- Caucasian or White
- Asian
- Native Hawaiian or Pacific Islander
- Black or African American

Other *(please specify)*

How long have you been a US Citizen?

- I am not a US citizen
 - Are you planning to become a US citizen? Yes No Prefer not to answer
- 0 - 5 years
- 6 - 10 years
- More than 10 years

What language is spoken most frequently in your home? _____

What is your current marital status?

- Married
- Single, never married
- Unmarried couple living together
- Divorced
- Widowed
- Separated

Which of the following best describes your current living situation?

- House (*owned*)
- Apartment or House (*rental*)
- Homeless
- Some other arrangement

What is your primary mode of daily transportation?

- Automobile/Truck (*owned or leased*)
- Online Ride Service (*Uber / Lyft*)
- Taxi Service
- Public Transportation (*bus / subway / rail*)
- Other (*please specify*)
- Walk
- Bicycle
- Family, Friends or Neighbors
- I do not have a primary mode of daily transportation

What is the highest level of school you have completed or the highest degree you have received?

- Less than high school degree
- High school graduate (*high school diploma or equivalent including GED*)
- Some college but no degree
- Associate degree in college (*2-year*)
- Bachelor's degree in college (*4-year*)
- Master's degree
- Doctoral degree
- Professional degree (*JD, MD*)

Your current employment status is best described as:

- Employed (*full-time*)
- Employed (*part-time*)
- Self-employed
- Furloughed
- Not employed, looking for work
- Not employed, not looking for work
- Retired
- Disabled or unable to work

What is your total household income from all sources?

- Less than \$20,000
- \$20,000 - \$24,999
- \$25,000 - \$29,999
- \$30,000 - \$34,999
- \$35,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- \$100,000 - \$199,999
- \$200,000 or more

Thank you for completing the survey. Your responses ensure more accurate and targeted solutions to address identified health issues.