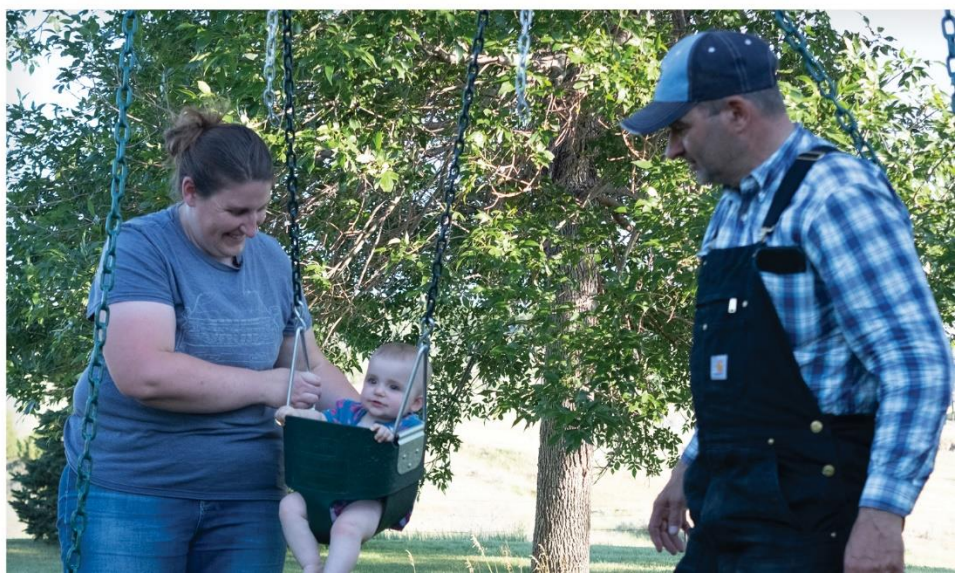




# Community Health Needs Assessment

SANFORD JACKSON MEDICAL CENTER  
2025-2027



Dear Community Members,

It is once again my privilege to share with you Sanford Jackson Medical Center's 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 build 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 Jackson Medical Center team, thank you for your continued support of the Community Health Needs Assessment process.

Sincerely,

Dawn Schnell  
Chief Executive Officer  
Sanford Jackson Medical Center

## BACKGROUND

### Community Description

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Sanford Jackson Medical Center is located in Jackson, Minnesota. 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, Corteva, Technical Services for Electronics, Ziegler, Last Deck, Hitch Doc, and C&B Operations.

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

The community as defined for purposes of the Community Health Needs Assessment includes Jackson County, Minnesota and represents a majority of the volumes to the Sanford Jackson Medical Center. No populations were intentionally excluded during the process of defining the community or within the CHNA process. Demographic detail for the county is included in the appendix.

### Partners

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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

### **Jackson 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:
- Dawn Schnell, Sanford Jackson, CEO
- Janette Simon, Des Moines Valley Health and Human Services, Community Health Planner
- Jared Gilliland, Lewis Drug, Head Pharmacist
- Jeff Johnson, Sanford Jackson Medical Center Community Board Member
- Grant Landbo, Jackson Ambulance, EMS Chief – City of Jackson
- Elijah Camarillo, Jackson Ambulance, Interim Assistant Ambulance Director
- Roger Pohlman, Lakefield Police Department, Chief – City of Lakefield
- Jen Tewes, Sanford Jackson, Site Supervisor
- Amanda Rehnelt, United Community Action Partnership, Volunteer Specialist
- Carrie Schuller, Jackson Atty Office- Victim/Witness Advocate and Coordinator
- Doug Busch, Sanford Jackson Medical Community Board Member
- Mike Brinkman, Sanford Jackson Medical Community Board Member
- David Herbster,, Sanford Sioux Falls, Lead Community Relations Specialist
- Andy Wiese, Sanford Health, Head of Strategic Intelligence
- Darnell Johnson, United Community Action Partnership,, Self Sufficiency Case Manager
- Jessica Grant, Sanford Worthington, Integrated Health Therapist
- Lindsey Pytleski, Sanford Jackson, Director of Nursing

## **Sanford Jackson Description**

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Sanford Jackson Medical Center (SJMC) 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 in the surgical suite at Sanford Jackson Medical Center. Laboratory and radiology services are available 24 hours a day, with staff serving both the hospital, attached medical clinic, and two satellite clinics. Clinic services include family medicine and various specialty outreach services. Sanford Jackson employs nine clinicians, including physicians and advanced practice providers, and 75 employees.

## **CHNA Purpose**

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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**

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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](http://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**

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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 in the current cycle were more aligned to respective 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

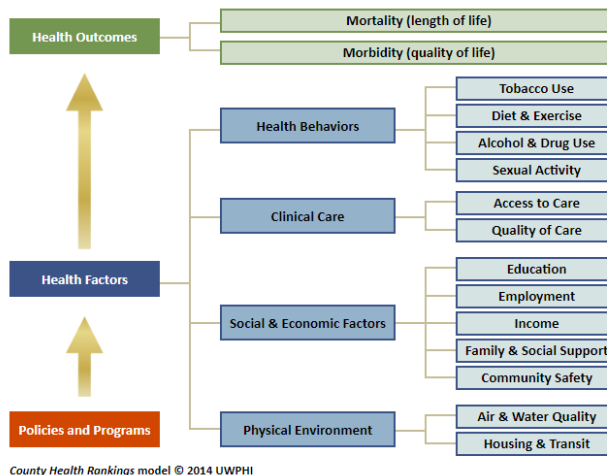
Community residents were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand health needs. Survey design is based on the UW Population Health Institute model. Each respondent was asked 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 Jackson County, MN, population 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 135 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. Jackson is included with Bagley, MN; Canby, MN; Canton-Inwood, SD-IA; Chamberlain, SD; Clear Lake, SD; Hillsboro-Mayville, ND; 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 the 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?

Three health needs were identified and proposed by the Dawn Schnell, Jackson CEO and her leadership team after careful consideration following the community stakeholder meeting. There was consensus among the leadership team for inclusion in the implementation plan. Consensus was based upon 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. Requests for survey data and other CHNA assets by public health organizations, governmental bodies, and community partners were and continue to be supported.

## 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, five 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 was 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 Jackson market area is defined as Jackson County in Minnesota. 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 135 respondents from the Jackson 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 Jackson area regarding the following community health issues were positive (average score of 3.00 or higher):

- Access to exercise opportunities (average score=4.00)
- Environmental health (average score=3.81)
- Community safety (average score=3.80)
- Access to healthy foods (average score=3.56)
- Employment and economic opportunities (average score=3.55)

- Health care quality (average score=3.38)
- Early childcare quality (average score=3.25)
- Access to daily transportation (average score=3.10)
- Long-term care, nursing homes, and senior housing quality (average score=3.06)

Apart from long-term care, health care quality, environmental health, and community safety, average scores in the Jackson area were higher than the comparison group average for each of these issues. In addition, average scores in the Jackson area for employment/economic opportunities and access to exercise opportunities were the highest among similar-sized markets served by Sanford Health.

When asked about their personal health, survey respondents in the Jackson area rated their current health and wellness as good (average score=3.28) and their current ability to access health care services as slightly better (average score=3.77); however, both scores are lower than the comparison group average.

CHR data indicates that Jackson County ranks in the lower-middle range of Minnesota 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 Medical Care and Health Care Providers**

Survey respondents in the Jackson area rated their own ability to access health care as good (average score=3.77), but lower than the comparison group average. In addition, when survey respondents in the Jackson market area were asked about the most important health care issues impacting their community, having access to medical care and health care providers was the top issue, more so than cost.

While many survey respondents in the Jackson area have a primary care provider (83%), have been in for a routine checkup or screening in the past year (82%), and have received necessary health care for themselves and their family in the past year (74%), these percentages are among the lowest when compared to similar-sized markets served by Sanford Health. In addition, 75 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, two-thirds of respondents indicated that travel was due to needing specialty care that was not available locally (67%), followed by 34 percent who traveled for better or higher quality care and 26 percent who were referred by a physician. The need to travel for care is evident in CHR data which indicate that when compared to similar-sized markets, the Jackson area has higher/worse-than-average ratios of population to providers, with 9,768 people for every one primary care physician, 2,498 people for every dentist, and 999 people per mental health care provider.

Nearly two-thirds of survey respondents in the Jackson area indicated that there are health care services they would like to see offered or improved in their community (62%). When these respondents were asked which health care services they would like to see offered or improved, most said behavioral and mental health services (62%), followed by walk-in/urgent care (38%), addiction treatment (33%), heart care (27%), family medicine/primary care (27%), dental care (25%), long-term care/nursing homes (23%), OBGYN/women's care (22%), dermatology (22%), pediatrics/children's care (20%), and cancer care (20%).

The community stakeholder meeting discussion indicated that local health care providers offer a range of services for the size of the community, but the proximity to Sioux Falls may impact expectations for providers and residents. However, the primary topic of conversation was the potential lack of awareness of the offerings by consumers as a barrier to access. Hospital leaders discussed the role of their staff and public health referenced a resource guide they have developed for residents wanting more information on available resources. Opportunities remain for translating the guide and other resources, so they are more accessible to residents.

Local Asset Mapping	
<p><b>Mental Health resources:</b></p> <ul style="list-style-type: none"> <li>Sanford Clinic, 1430 N. Highway, Jackson</li> <li>Sanford Clinic, 209 Main Street, Lakefield</li> <li>Southwest Mental Health Center, 1210 5<sup>th</sup> Ave, Worthington</li> <li>Veterans Service Center, MN West College Campus - Door #2 - 401 West Street, Jackson</li> <li>Des Moines Valley Health and Human Services, 407 5<sup>th</sup> Street, Jackson</li> </ul>	<p><b>Health Care resources:</b></p> <ul style="list-style-type: none"> <li>Sanford Clinic, 1430 N. Highway, Jackson</li> <li>Sanford Clinic, 209 Main Street, Lakefield</li> <li>Good Samaritan Home Care, 710 Fuller Dr., Windom</li> <li>Sanford Health Equip, 1151 Ryan's Rd., Worthington</li> </ul> <p><b>For Additional Resources Reference:</b>  <a href="https://sanford.findhelp.com/">https://sanford.findhelp.com/</a></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 Jackson area face on a regular basis. In addition, the cost of health care and a lack of health insurance were primary reasons cited by survey respondents who delayed regular checkups and did not get needed medical care.

Even with these affordability concerns, survey respondents in the Jackson area rated the employment and economic opportunities in their community as good (average score=3.55) and the highest score when compared to similar-sized markets served by Sanford Health. In addition, CHR data indicate that when compared to these similar markets, the Jackson area has a similar-to-average median household income (\$64,052) and unemployment rate (3%), and a better-than-average child poverty rate (13%) and uninsured rate (7%).

Stakeholder meeting participants discussed how perceptions of cost are driving consumer responses, given the relatively low unemployment rate and positive economic statistics. First responders noted that many of the residents with which they engage often don't have insurance.

Local Asset Mapping	
<p><b>Health Insurance resources:</b></p> <ul style="list-style-type: none"> <li>MN Sure – MNSURE.org</li> <li>Sanford Health Plan, 300 Cherapa Pl St 201, Sioux Falls</li> <li>Complete Insurance Services, 616 2nd St., Jackson</li> <li>United Prairie Insurance, 803 3<sup>rd</sup> St., Jackson</li> <li>State Farm, 313 Sherman St, Jackson</li> </ul>	<p><b>Dental Insurance resources:</b></p> <ul style="list-style-type: none"> <li>Complete Insurance Services, 616 2nd St., Jackson</li> <li>United Prairie Insurance, 803 3<sup>rd</sup> St., Jackson</li> </ul> <p><b>For Additional Resources Reference:</b>  <a href="https://sanford.findhelp.com/">https://sanford.findhelp.com/</a></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 Jackson area were asked about the most important health care issues impacting their community, mental health was the second leading issue (behind access to medical care and providers). According to CHR, adults in the Jackson area average 4.4 mentally unhealthy days each month and 14 percent of adults average at least 14 days of mental distress per month (rates which are higher than the comparison group average). In addition, there are 999 people for every one mental health care provider in the Jackson area, which is also higher than the comparison group average.

Of survey respondents in the Jackson area who would like to see specific services offered or improved in their community, most respondents said behavioral and mental health services (62%), followed by walk-in/urgent care (38%) and addiction treatment (33%).

Health literacy, stigma, and the increasing role of peer-to-peer resources were discussed during the community stakeholder meeting. Attendees noted that progress is being made towards reducing the stigma and increasing the availability of mental health care. It was acknowledged that further improvements can be made. Public health elevated the work to promote the 988 number as a benefit to access as it allows for users to engage in services with additional privacy, similar to the virtual care offered through the hospital. First responders noted that portions of the population will not see a mental health care professional because of the stigma and will engage their staff for “someone to talk to.” As stigma has fallen, the community has seen organic peer-to-peer groups develop to fill the service need. This was viewed as a positive by community stakeholders. Participants noted that additional resources are needed in the community for adult and pediatric patients. One example noted was the need for additional engagement opportunities for crime victims. The potential need for additional substance abuse services with the further legalization of marijuana was also considered.

<b>Local Asset Mapping</b>	
<p><b>Mental Health resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Clinic, 1430 N. Highway, Jackson</li> <li>• Sanford Clinic, 209 Main Street, Lakefield</li> <li>• Southwest Mental Health Center, 1210 5<sup>th</sup> Ave, Worthington</li> <li>• Veterans Service Center, MN West College Campus - Door #2 - 401 West Street, Jackson</li> <li>• Des Moines Valley Health and Human Services, 407 5<sup>th</sup> Street, Jackson</li> </ul>	<p><b>Substance Abuse resources:</b></p> <ul style="list-style-type: none"> <li>• Addiction/Prevention Coalition - drugfreejackson.com (meets at United Way Center, 800 E. Main St., Marshall)</li> <li>• Family Services Network, 402 White Street, Jackson</li> </ul>
<p><b>Dementia/Alzheimer’s resources:</b></p> <ul style="list-style-type: none"> <li>• Good Samaritan, 601 West St., Jackson</li> <li>• Colonial Manor, 403 Colonial Ave, Lakefield</li> <li>• Temperance Lake Ridge Senior Living, 410 Fox Lake Ave, Sherburn</li> <li>• Alzheimer’s Assn. - Alz.org</li> </ul>	<p><b>Tobacco Cessation resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Jackson, 1430 North Hwy, Jackson</li> <li>• Sanford Clinic, 209 Main Street, Lakefield</li> <li>• Des Moines Valley Health and Human Services, 402 White St. #201, Jackson</li> <li>• QuitPlan, MN Dept. of Health – 651-201-5000</li> <li>• Southwest Health &amp; Human Services, 607 W. Main, Marshall</li> <li>• ClearWay MN – Clearwaymn.org</li> </ul> <p><b>For Additional Resources Reference:</b></p>

**Healthy Living**

Survey respondents in the Jackson area rated their own personal health and wellness as good (average score=3.28), but lower than the comparison group average. When survey respondents were asked about the biggest health concerns for themselves and their family (concerns they face on a regular basis), chronic conditions were the second leading concern, after cost.

CHR data indicate that when compared to similar-sized markets served by Sanford Health, the Jackson area has better-than-average rates of diabetes (8%), obesity (32%), and adult smokers (19%) – but worse-than-average rates of excessive drinking (23%) and alcohol-impaired driving deaths (100%).

Community members discussed healthy living from several vantage points during the stakeholder meeting. Participants acknowledged that the social isolation caused by the pandemic continues to impact mental health across age groups. Social media further exacerbates the issue—and others—by decreasing interaction with and understanding of others, particularly intergenerationally. Additional activities for kids are needed locally that appeal to a diverse set of interests so that kids can socialize in a setting where they feel comfortable. Beyond social isolation, the need to build upon current efforts to counter vaping trends was identified as an opportunity. The school has hired a social worker and expanded their efforts to reduce smoking, drug use, and vaping.

Local Asset Mapping	
<p><b>Healthy Eating resources:</b></p> <ul style="list-style-type: none"> <li>• Jackson Co. Extension (nutrition information), 607 S. Hwy. 86, Jackson</li> <li>• Des Moines Valley Health and Human Services, 402 White St. #201, Jackson</li> <li>• Riverside Farmers Market, Ashley Park, Jackson</li> <li>• Jackson Food Shelf, 1229 N Hwy, Jackson</li> <li>• Grocery stores:</li> <li>• Sunshine Foods, 908 Hwy. 71 North, Jackson</li> <li>• Hy-Vee, 1500 18<sup>th</sup> St, Spirit Lake</li> <li>• Fareway, 1906 Keokuk Ave, Spirit Lake</li> <li>• Wilder Thymes Natural Foods, 711 16<sup>th</sup> St, Spirit Lake</li> <li>• Walmart, 2200 17<sup>th</sup> St, Spirit Lake</li> <li>• Hy-Vee, 192 10<sup>th</sup> St, Windom</li> </ul>	<p><b>Chronic Disease resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Jackson, 1430 North Hwy, Jackson</li> <li>• Sanford Clinic, 209 Main Street, Lakefield</li> <li>• Sanford Medical Home, 1430 North Hwy, Jackson</li> <li>• Sanford's Better Choices Better Health – (701)417-4905</li> <li>• Des Moines Valley Health and Human Services, 402 White St. #201, Jackson</li> <li>• American Heart Assn. – heart.org</li> <li>• Arthritis Foundation – arthritis.org</li> </ul>
<p><b>Obesity resources:</b></p> <ul style="list-style-type: none"> <li>• Sanford Jackson Clinic, 1430 North Hwy, Jackson</li> <li>• Sanford Clinic, 209 Main Street, Lakefield</li> <li>• Des Moines Valley Health and Human Services, 402 White St. #201, Jackson</li> <li>• Jackson Co. Extension Office nutrition information, 607 S. Hwy 85, Jackson</li> </ul>	

<p><b>Physical Fitness/Activities resources:</b></p> <ul style="list-style-type: none"> <li>· Sanford Clinic, 209 Main Street, Lakefield <ul style="list-style-type: none"> <li>· Des Moines Valley Health and Human Services, 402 White St. #201, Jackson</li> <li>· Jackson Co. Extension Office nutrition information, 607 S. Hwy 85, Jackson</li> </ul> </li> <li>· Anytime Fitness, 508 2nd St., Jackson</li> <li>· Prairie Rehab &amp; Fitness, 816 3rd St., Jackson</li> <li>· Jackson Co. School activities, PO Box 119, Jackson</li> <li>· Boys &amp; Girls T Ball &amp; Softball, JCC Community Education, 1128 N. Hwy., Jackson</li> <li>· Soccer, JCC Community Education, 1128 N. Hwy., Jackson</li> <li>· Gymnastics, JCC Community Education, 1128 N. Hwy., Jackson</li> <li>· Basketball, JCC Community Education, 1128 N. Hwy., Jackson</li> <li>· Bowling – Dudley’s, 103 Main St., Lakefield</li> <li>· Golf – Jackson Golf Club, N. Hwy. 71, Jackson</li> <li>· Golf – Loon Lake Golf Club, 73209 490<sup>th</sup> Ave, Jackson</li> <li>· Golf – North Valley Golf Course, 101 Valleybrook Rd., Lakefield <ul style="list-style-type: none"> <li>· Frisbee Golf 1505 N. Hwy, Jackson</li> </ul> </li> <li>· Splash Pad, 813 Frost Ave, Jackson</li> <li>· Swimming, 1128 N. Hwy, Jackson</li> <li>· Swimming, Lakefield Pool, 706 Menage Ave (summer)</li> <li>· Softball – Jackson Co. Central, 1128 North Hwy, Jackson</li> <li>· Skate Park, 80 W. Ashley St., Jackson <ul style="list-style-type: none"> <li>· Biking/Hiking Trail – Ashley Park Trail, State St. &amp; Riverside Dr., Jackson</li> <li>· Biking &amp; Walking Trail – 4.5 miles around the city of Jackson</li> </ul> </li> <li>· Hiking Trail, Kilen Woods State Park, 50200 860<sup>th</sup> St, Lakefield</li> </ul>	<p><b>Physical Fitness/Activities Resources Cont.:</b></p> <ul style="list-style-type: none"> <li>· Archery Club, 78198 Riverside Dr, Jackson</li> <li>· Volleyball – Sandy Pt. Park, 41699 850th St., Lakefield</li> <li>· PATH JCC High School</li> <li>· Parks &amp; Playgrounds: <ul style="list-style-type: none"> <li>o Albertus Field, 99 1st St., Jackson</li> <li>o Ashley Park, State St. &amp; Riverside Dr., Jackson</li> <li>o Central Park, White &amp; 6th, Jackson</li> <li>o Dann’s Island Park, Hwy 71 &amp; Kimball, Jackson</li> <li>o Dumont Park, 1015 Sherman St., Jackson</li> <li>o Festival park, 2nd &amp; North Hwy, Jackson</li> <li>o Getty Park, West Ashley St. &amp; River St., Jackson</li> <li>o Patterson Park, 208 Thomas Rd, Jackson</li> <li>o Sunset Park, Louis Ave., Jackson</li> <li>o Zimmerli Park, Moore St &amp; Branch St., Jackson</li> </ul> </li> <li>· Archery Club, 78198 Riverside Dr, Jackson</li> <li>· Ice Skating, Jackson</li> <li>· Cross Country Skiing on the Des Moines River, Jackson</li> <li>· Volleyball, Sandy Point Park, 41699 850th St., Lakefield</li> </ul> <p><b>For Additional Resources Reference:</b>  <a href="https://sanford.findhelp.com/">https://sanford.findhelp.com/</a></p>
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**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.

Respondents in the Jackson area rated the availability of affordable housing in their community as less than good (average score=2.67) and lower than any other community health issue. When asked to explain why they rated community access to affordable housing the way they did, responses focused on a general lack of affordable, quality housing for

lower- and middle-income individuals and families to own or rent – and fewer options for income-restricted housing.

CHR data indicate that 8 percent of households in the Jackson 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 lower than the comparison group average.

The availability of affordable housing locally was discussed as one of the potential drivers of the cost of health care noted earlier in the report. Housing, coupled with other daily expenses such as vehicles and food, are consuming a greater share of paychecks. The need to offer additional rental and single-family homes is an opportunity locally.

<b>Local Asset Mapping</b>	
<p><b>Housing Resources:</b></p> <ul style="list-style-type: none"> <li>• Ashley Estates – 1<sup>st</sup> Street Jackson, MN</li> <li>Jackson Housing Authority, 116 State St # 414, Jackson</li> <li>• EXIT Realty-Great Plains, 402 2<sup>nd</sup> St, Jackson</li> <li>• Bull Market Realty, 208 Sherman St, Jackson</li> <li>• Hometown Realty of Jackson County LLC, 212 Jackson 3<sup>rd</sup> St, Jackson</li> </ul>	<p><b>Low Income Housing:</b></p> <ul style="list-style-type: none"> <li>• Eagle Ridge Townhomes, 100 Homedale Drive, Jackson</li> <li>• River Bluff Townhomes, 300 U.S. 71, Jackson</li> <li>• Sunrise Estates, 200 Highway 71 S, Jackson</li> <li>• Jackson River Valley Homes, 116 State St, Jackson</li> <li>• Riverine Apartments, 105 S Highway, Jackson</li> </ul> <p><b>For Additional Resources Reference:</b>  <a href="https://sanford.findhelp.com/">https://sanford.findhelp.com/</a></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 three specific areas for focus for Sanford during the 2025-2027 implementation cycle:

1. Reduce physical and perceptual barriers to those seeking mental health care.
2. Access to Medical Care and Healthcare Providers
3. Substance Abuse

## Implementation Plan for Prioritized Needs

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

### Current Activities

Facilitate community behavioral health task force meetings where mental health issues are identified and key stakeholders are available to collaborate, make recommendations and instill change. Sanford Jackson has a number of resources and providers, such as Integrated Health Therapists available locally. Mental health was included in the previous Community Health Needs Assessment and a summary of those efforts are available later in the report.

### Projected Impact

Upon completion of the three-year Implementation Plan, the community would see increased awareness and coordination of mental health services within the community.

**Goal 1:** To advance integrated healthcare in the community

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
Hire an additional Integrated Health Therapist	December 2025. Mental health utilization	Provider recruitment Senior Leadership	Senior Leadership, Sanford Jackson	Southwest Mental Health, Des Moines Valley Health and Human Services
Continue to Collaborate with the Behavioral Health Task Force.	Ongoing	Community Key Stakeholders	CEO, Sanford Jackson	Des Moines Valley Health and Human Services, Community Stakeholders
Virtual Behavioral Health/Psychiatric care in our Emergency Department	Ongoing. Patients receiving mental health services in the ER	Staff at Sanford Jackson Emergency Department	Director of Nursing Sanford Jackson, Virtual Care Team, Sioux Falls	

**Goal 2:** To increase and awareness and provide education on suicide prevention

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
BeHeard training for SJMC Leadership/ Supervisors	December 2025. Participation rates	Jackson leadership	CEO, Sanford Jackson	Local Media
Participate with Public Health in implementing their plans that	Support DVHHS on their mental health strategies related to their	Jackson leadership and team	CEO, Sanford Jackson	Des Moines Valley Health and Human Services

are parallel to our own.	CHIP (Community Health Improvement Plan)			
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**Priority 2: Access to Medical Care and Healthcare Providers**

**Current Activities**

Sanford Jacksons offers a variety of services locally through locally based and outreach providers. Laboratory and radiology services are available 24 hours a day, with staff serving the hospital, attached medical clinic, and two satellite clinics. Clinic services include family medicine and various specialty outreach services. A variety of surgical procedures are performed in the surgical suite at Sanford Jackson Medical Center. Sanford Jackson employs seven clinicians, including physicians and advanced practice providers. Periodic marketing is in place to gain exposure of primary care services and providers via media outlets such as radio, print and social media.

**Projected Impact**

Upon completion of the three-year Implementation Plan, the community would see increased utilization of telehealth services and in-person appointments.

**Goal 1: Increase Telehealth offerings of Specialty Providers**

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
Piloting Dr. Crabtree Telehealth	December 2025. Available appointments	Sanford Jackson and Virtual Care Team Sioux Falls	CEO, Site Supervisor, Supervisor, Ambulatory Care	Local Media
Virtual Behavioral Health in ER/Psychiatric care.	Ongoing. Patients receiving mental health services in the ER	Staff at Sanford Jackson Emergency Department	Director of Nursing Sanford Jackson, Virtual Care Team, Sioux Falls	Local Media Des Moines Valley Health and Human Services

**Goal 2: Physician recruitment**

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
Collaborate with Sanford Recruitment for provider recruitment, with a focus on medically-	December 2027. Measures TBD based upon service lines.	Jackson Leadership and providers, Sanford Physician Recruitment	Local leadership, Sanford Health Network Leadership	State of MN loan forgiveness programs

underserved services				
Explore Nontraditional Provider agreements to increase rural provider availability	December 2027	Jackson Leadership and providers, Sanford Physician Recruitment	Local leadership, Sanford Health Network Leadership	NA

**Priority 3: Substance Abuse**

**Current Activities**

Sanford Jackson Medical Center partners with several community organizations and coalitions to provide education and raise awareness regarding substance abuse. These partnerships include:

- Des Moines Valley Health and Human Services,
- Positive Community Norm and the Positive Actions Through Health (PATH) coalition,
- Jackson County Addiction Prevention and Safety Coalition,
- Jackson County Law Enforcement.

In March 2025, the organization “Be Extraordinary, Be you!” is planning a presentation targeting middle school and high school students at Jackson County Central. This event will include a “Cannabis Panel,” featuring local leaders who will discuss the impacts of marijuana use and related effects. Additionally, in June, Jackson County law enforcement will provide training for Sanford Jackson Medical Center providers focusing on the various substances being identified in our community. This initiative aims to equip healthcare professionals with the necessary knowledge to address substance-related issues more effectively. Moving forward, Sanford Jackson remains committed to identifying additional opportunities to address and combat substance abuse in our community, fostering partnerships and innovative approaches to promote health and safety.

**Projected Impact**

Upon completion of the three-year Implementation Plan, the community would see increased coordination of substance abuse resources and opportunities to address the need.

**Goal 1:** Support and continue to engage in partnerships with Community Programs with other community members committed to reducing substance abuse.

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
Collaborate/Support PATH program currently ran by the Local School district.	Ongoing. Program utilization	Site Supervisor	Local leadership	Jackson County Central Schools
Collaborate and support the Addiction	Ongoing. Program utilization	CEO	Sanford Jackson Leadership	Des Moines Valley Health and Human Services, Jackson County Central,

Prevention Safety Coalition			Des Moines Valley Health and Human Services	Jackson area law enforcement, United Community Action Team, ect
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**Goal 2:** Increase education for staff about substance abuse so they can better serve our patients.

<b>Actions/Tactics</b>	<b>Measurable Outcome &amp; Timeline</b>	<b>Resources to be Committed</b>	<b>Leadership</b>	<b>Community partnerships and collaborations, if applicable</b>
Local law enforcement to present current concerns in the community related to substance abuse to staff	December 2026. Identification of outcomes will be based upon findings and resources.	Provider and nursing team, Sanford Jackson Department Managers	Sanford Jackson Leadership	Jackson County Law enforcement and Des Moines Valley Health and Human Services
Engage internal resources to provide creative education to staff members on substance abuse trends, including any SDOH impacts and identify follow up actions	December 2025. Identification of outcomes will be based upon findings and resources.	Internal staff newsletter Administrative Assistant	Sanford Jackson CEO	Sanford Health staff resources/education, Des Moines Valley Health and Human Services resources, PATH data

**Needs Not Addressed**

Below are the needs identified during the CHNA process—as referenced in the Community Health Needs Assessment Report above—that are not addressed as a significant need for the purpose of this process. 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.

### **Access to Affordable Housing**

Affordable Housing is not included in the Implementation Plan as other organizations have the competencies to improve the need. Sanford Jackson leadership will share the results of the CHNA research with the leaders of the City of Jackson and United Community Action Partnership. On an ongoing basis, Jackson Medical Center staff assist patients to access local resources as needed.

### **Access to Affordable Health Care**

Community stakeholders deemed access to affordable healthcare a lower priority for the purposes of the Community Health Needs Assessment due to being unable to control health care premium costs locally. Internally we will continue to inform patients of Hospital Presumptive Eligibility and Sanford Financial Assistance programs when paying for healthcare is identified as a hardship. Insurance professionals in the community are available to guide those seeking coverage.

### **Healthy Living**

The stakeholder group indicated other facilities or organizations in the community are addressing or better positioned to address the need for Healthy Living. Sanford Jackson will continue to work closely with the City of Jackson and the Chamber of Commerce to assist with solutions if requested. Sanford Jackson will also continue to monitor Clinic Quality scores related to diabetes, mental health, chronic disease management and cancer screening to address the need. CHNA information will be shared with partners as appropriate.

## **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 Jackson CHNA area had 436 searches in 2022 and 2023.

### **Mental Health**

Sanford Jackson is working on the goals of advancing integrated healthcare in the community and increasing awareness and providing education on suicide prevention in

support of the priority.

After joining the Stigma Free campaign at the end of 2022, the Sanford Jackson Medical Center (SJMC) leadership began to engage its employees in the campaign to underscore the importance of the campaign. The message of the campaign is to break down barriers and encourage residents of all ages to be mindful of mental health and ask for help when needed without fear of stigma.

During the month of May, mental health was the theme of the SJMC's hospital week celebration and the kickoff to mental health month. Employees attended educational visits with Janette Simon, the Community Health Planner from Des Moines Valley Health and Human Services and head of the Stigma Free Campaign. The team also signed the commitment poster to hang in the clinic waiting area to show support and engagement of the campaign to the public. Mrs. Simon also visited our Advisory Board and Patient Advisory Board to help educate individuals on the campaign and its important message. A Stigma Free Champion was selected from the SJMC staff, and they attend quarterly Stigma Free Champion Meetings and engage the community during events such as the annual Sanford Tri 4 Health and the annual Tri 4 Health Obstacle Course.

In May of 2022 Sanford Jackson Medical Center's Integrated Health Therapist along with a family nurse practitioner completed a Behavioral Health Education, Awareness and Response Development course. This course helps increase knowledge, skills, and confidence to support people with behavioral health concerns. Its focus is to assist attendees to support patients struggling with a wide range of behavioral health concerns.

In 2022 Sanford Jackson Medical Center sought to maintain and fill open Integrated Health Therapist positions. Staff members worked tirelessly with Sanford Talent Advisors and other internal contacts to attract candidates and maintain relationships.

SJMC also worked tirelessly to explore options to provide Integrated Health Therapy services again. Despite several roadblocks, SJMC has engaged Sanford Worthington in a partnership that will provide telehealth services with Jessica Grant, MSW, LICSW, beginning in early 2024. The search for a second Integrated Health Therapist to fill the area's patient load continues, with new interest from applicants. We anticipate having a second IHT on staff by mid-2024.

The IHT and other staff members were also involved in a Strategic Planning Suicide Prevention Cohort facilitated by Minnesota Department of Public Health alongside Des Moines Valley Health and Human Services (Public Health) and various other local community stakeholders. This specific group began meeting monthly in September 2021.

2022 saw an increase in patients for psychiatry services and therefore Dr. Moeller, the contracted psychiatrist, was able to increase the number of days treating patients onsite and offsite at the local nursing home in Jackson during 2023. Additionally in 2023, SJMC also completed the construction of a dedicated telemedicine suite. The suite features a large screen, camera, and microphones to visit with off-site providers such as Dr. Eggers the pediatric psychiatrist, with the intention of providing a more personal experience. With the addition of the self-scheduled MyChart virtual visits as well as the success and positive patient feedback, the SJMC leadership determined they needed to continue improving access to telemedicine providers. It was thus decided at the end of 2023 to add another dedicated telemedicine suite. Construction on the second suite is scheduled to be completed mid-2024.

Multiple staff members have continued to attend monthly meetings and actively participate

in community groups geared towards improving mental health like the Behavioral Health Community Task Force and the Jackson County Central School district's Positive Actions Toward Health (PATH) Program.

On December 2, 2022, the Sanford Jackson Medical Center administrator signed the Stigma Free Resolution to recognize the community needs and agree to join the collaborate campaign against the stigma of mental illness. Sanford Jackson Medical Center was established as a Stigma-Free Zone and will continue to help raise awareness of resources and encourage patients, residents, and fellow staff members to engage in care as soon as the need is identified so recovery can begin.

### **Access to Health Care Providers**

To increase access to health care providers, the medical center is working to create community awareness of provider offering local care and working to increase specialty care access at the Sanford Jackson Medical Center.

To increase awareness, Sanford Jackson Medical Center provided biometric screenings to six area employers and screened 188 people in 2022. The results were given to patients with instructions to follow up with their Primary Care Provider (PCP) or seek medical care if any of the measures fell outside of the normal range. Additionally in March 2022 Sanford Jackson Medical center participated in the Martin County Star Health and Wellness Edition. The medical center provided a "Here for your Health in Jackson" ad and article "When Should I find a Primary Care Provider?" to help generate awareness about the importance of having a PCP. Sanford Jackson Medical Center also continued to receive feedback and community input from both our Advisory Board and Patient Advisory Board.

Sanford Jackson Medical Center was fortunate to add two talented professionals to its staff in 2022. In January of 2022, Kaitlin Johnson accepted the role as the new supervisor over therapy and rehabilitation. Kaitlin brings with her a background that specializes in women's health, Parkinson's, pediatrics, geriatrics, continence, post-surgery, as well as sports, and orthopedic injuries. She also brings with her new therapies that are now available locally such as dry needling, cupping, taping, balance therapy, manual/hands on therapy and the Graston Technique.

The late 2022 addition of Dr. Rodney Dynes to the surgical staff has significantly increased the number of procedures performed at SJMC. In 2021 only 82 procedures were performed, 2022 saw an increase to 128 procedures, while 2023 had a total of 223 procedures performed. Dr. Dynes is currently performing colonoscopies, endoscopies, vasectomies, hemorrhoidectomy, and lipoma removals, and has ambitious plans for expanding procedures offered in the future.

Sanford Jackson Medical Center (SJMC) added two excellent providers to staff in 2023. Amy Winter, CNP, joined in August and provides a variety of services, including acute care, preventive care, minor procedures, and more. Amy is also a Department of Transportation Certified Medical Examiner and can perform physical qualification examination for commercial drivers. She receives high praise from her patients and has proven to be a very valuable asset to the provider team.

Another standout addition to the staff is Dr. Travis Rath D.O. who joined the team in October. Dr. Rath is a Family Medicine Doctor who is also an LGBTQ+ Affirming Provider. His enthusiasm and compassion for his patients is remarkable. His patients often comment that they feel completely taken care of and comment things like, "He is the best of the best," and



“never has a doctor been so thorough before, he’s awesome”. In 2023, we had 195 patients seeing a new provider versus 177 in 2022.

2023 saw the completion of dedicated telemedicine suite and offered a more comfortable experience for patients to see offsite providers as well as a larger variety of providers. Mental Health, Vascular, and Nephrology are just a few areas that SJMC can now accommodate. The positive feedback from patients lead to the decision to construction of another dedicated telemedicine suite. The number of telemedicine visits has increased from 42 in 2021 to 187 in 2023.

Due to recent changes in health insurance, some plans require a Home Sleep Study rather than the previous inpatient traditional sleep study. After training was completed, SJMC became licensed to provide both Home Sleep Studies as well as an onsite Sleep Study. Another area that saw improvement in 2023 was the Biometric Screenings offered to local business. Five organizations with a total of 160 staff were screened and given a more comprehensive explanation of their results with details on the importance of following up with a PCP and an invitation to assist in helping them find the right provider in our facility.

Due to marketing budget cuts, SJMC was unable to follow through with widespread marketing as planned, but still engaged in local marketing including advertising in the local newspaper, The Jackson County Pilot. SJMC had noticeable advertising space in the spring “Living Well” special edition on the importance of a Primary Care Provider and again in the summer “Progress” special edition. The local paper also featured SJMC’s newest providers in a news article and focused attention to flu shot availability and various drive-up flu shot clinics in the fall of 2023.

Sanford Jackson Medical Center also continued to receive feedback and community input from both our Advisory Board and Patient Advisory Board with quarterly meetings held throughout the year.

## 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](mailto: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 Demographics<sup>1</sup>

Jackson County had a population of 9,919 as of July of 2023 with a growth rate of -0.8%, when Minnesota had a growth rate of 0.5% for the same period of time (2020-2023). Compared to the state the county has a higher rate of those 65 years and older than the average for the state.

The median value of housing units for Jackson County is on average valued at over half of the state average, the county average being \$146,300 less than the state. The median household income is less than the state average with residents averaging an income of \$68,368, which is \$15,945 less. The poverty rate for Jackson County is less than the Minnesota average and they have 66.5% of those 16 years and older in the civilian labor force, averaging 2.1% less than the state average.

Fact	Jackson County, MN	Minnesota
Population estimates, July 1, 2023, (V2023)	9,919	5,737,915
Population estimates base, April 1, 2020, (V2023)	9,994	5,706,804
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	-0.80%	0.50%
Persons under 5 years, percent	5.50%	5.80%
Persons under 18 years, percent	21.10%	22.60%
Persons 65 years and over, percent	23.60%	17.40%
White alone, percent	94.30%	82.60%
Black or African American alone, percent	1.10%	7.60%
American Indian and Alaska Native alone, percent	0.60%	1.40%
Asian alone, percent	1.90%	5.50%
Native Hawaiian and Other Pacific Islander alone, percent	0.20%	0.10%
Two or More Races, percent	1.90%	2.80%
Hispanic or Latino, percent	4.60%	6.00%
White alone, not Hispanic or Latino, percent	90.50%	77.60%
Housing Units, July 1, 2023, (V2023)	4,909	2,575,411
Owner-occupied housing unit rate, 2018-2022	80.80%	72.30%
Median value of owner-occupied housing units, 2018-2022	\$140,500	\$286,800
Median selected monthly owner costs -with a mortgage, 2018-2022	\$1,194	\$1,818
Median selected monthly owner costs -without a mortgage, 2018-2022	\$468	\$639
Median gross rent, 2018-2022	\$764	\$1,178
Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	4.50%	12.00%

<sup>1</sup> <https://www.census.gov/quickfacts>

Households with a computer, percent, 2018-2022	90.40%	94.50%
Households with a broadband Internet subscription, percent, 2018-2022	84.90%	89.70%
High school graduate or higher, percent of persons age 25 years+, 2018-2022	93.50%	93.70%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	23.10%	38.20%
With a disability, under age 65 years, percent, 2018-2022	8.00%	7.70%
Persons without health insurance, under age 65 years, percent	5.40%	5.30%
In civilian labor force, total, percent of population age 16 years+, 2018-2022	66.50%	68.60%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	63.00%	65.00%
Mean travel time to work (minutes), workers age 16 years+, 2018-2022	17.5	23.3
Median household income (in 2022 dollars), 2018-2022	\$68,368	\$84,313
Per capita income in past 12 months (in 2022 dollars), 2018-2022	\$37,818	\$44,947
Persons in poverty, percent	9.10%	9.60%
Total employer establishments, 2021	298	152,836
Total employment, 2021	3,928	2,627,416

### **Leading Causes of Death**

The Minnesota Department of Health publishes the annual Minnesota County Health Tables, which includes county-level counts for ten leading causes of death. Counts for the counties included within the CHNA community are in the table below. Data for calendar year 2020 is presented alongside the total for 2016-2020.

Heart disease, followed by cancer, were the leading cause of death in the counties for the five-year period and for calendar year 2020 for the causes listed.

Leading Causes of Death											
Cause-Specific Death Counts for Ten Leading Causes											
County	Cancer	Heart Disease	COVID--19	Unintent. Injury	Alzheimer's	Stroke	CLRD	Diabetes	Chronic Liver Disease	Hypertension	Years
Jackson	20	27	11	4	5	5	3	2	3	1	2020
Jackson	120	146	--	26	--	31	--	--	--	--	2016-2020
<a href="https://www.health.state.mn.us/data/mchs/genstats/countytables/index.html">https://www.health.state.mn.us/data/mchs/genstats/countytables/index.html</a>											

## 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?

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**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
- Immediate / faster appointment
- On vacation / traveling / snowbirds
- Cost or insurance coverage
- Don't feel welcomed or valued by local providers

Other *(please specify)*

**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?**

- |  |                                 |
|--|---------------------------------|
| <input type="radio"/> Married                          | <input type="radio"/> Divorced  |
| <input type="radio"/> Single, never married            | <input type="radio"/> Widowed   |
| <input type="radio"/> Unmarried couple living together | <input type="radio"/> 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.