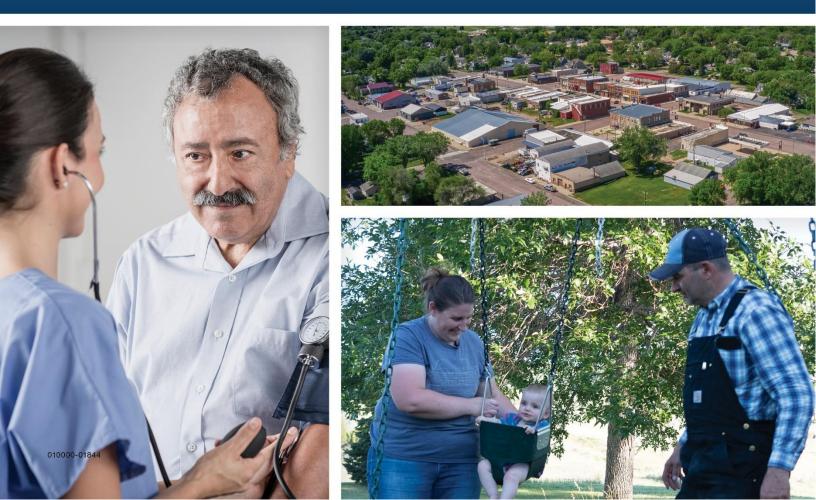


Community Health Needs Assessment

SANFORD SOUTH UNIVERSITY MEDICAL CENTER 2025-2027



Dear Community Members,

It is my privilege to share with you 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 Fargo team, thank you for your continued support of the Community Health Needs Assessment process.

Sincerely,

Tiffany Lawrence President and Chief Executive Officer Sanford Fargo

BACKGROUND

Community Description

The Sanford Fargo Medical Center is located in Fargo, North Dakota. Fargo is a diverse, dynamic, family-oriented community on the eastern border of North Dakota. It is the largest city in North Dakota, accounting for nearly 16 percent of the state population. Fargo is the county seat of Cass County. Fargo and its twin city of Moorhead, MN, adjacent West Fargo, ND, and Dilworth, MN, form the core of the metro area, which in 2018 had a population of 240,000.

Founded in 1871, Fargo is the economic center of southeastern North Dakota. It is a culture, retail, health care, education, and industry hub for the region. The Fargo-Moorhead metro area is home to three universities: North Dakota State University, Concordia College, Minnesota State University Moorhead, and numerous other private and state colleges and technical schools and is home to over 38,000 students.

Although the economy of the Fargo area has historically been dependent on agriculture, the city now has a growing economy based on food processing, manufacturing, technology, retail trade, higher education, and health care. US News & World Report ranked Fargo as the #1 city for finding a job, Farmers Insurance named it the #3 most secure place to live, and Moving.com named it #5 on its list of best places to live in America.

Fargo-Moorhead is home to a growing number of innovative technology and biomedical companies, attracted to the community by its educated workforce, low labor costs, favorable tax climate, advanced telecommunications infrastructure and available energy and water supplies. Education and health services account for the largest non-agricultural industries.

The community as defined for purposes of the Community Health Needs Assessment includes Cass County, ND, and Clay County, MN and represent a majority of the volumes to the Sanford Fargo medical centers. 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 Gerer, 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

Fargo 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:

- Barb Davis, Adult Services Supervisor, Moorhead Public Library
- Chelsea Matter, ED of Government Programs, Blue Cross Blue Shield of North Dakota
- Amanda Richter, Director of Network Integration and Engagement, Arkos Health
- Jeff Wallin, Fire Chief, City of Moorhead
- Shelly Carlson, Mayor, City of Moorhead
- Karen Nitzkorski, Suicide Prevention, Clay County Public Health
- Patti Senn, Executive Director, Soul Solutions Recovery Center
- Sarah Roth, Manager, Nursing and Clinical Services, Sanford Health
- Gabe Tweten, Emergency Management Director, Clay County
- Liz Bjur, Family Health Supervisor, Clay County Public Health
- Brandon Lunak, Superintendent, Moorhead Public Schools
- Bailey Thompson, Main Street Director, City of Barnesville
- Sandy Tibke, Executive Director, Foundation for a Healthy North Dakota
- Rashid Hussein, Community Health Specialist, Essentia Health
- Erin Prochnow, Executive Director, YWCA Cass Clay
- Chad Olson, Mayor, City of Dilworth
- Margaret Asheim, CEO, Family HealthCare
- Arlette Preston, Commissioner, City of Fargo

- Rory Beil, Health Promotion Director, Clay County
- Peyton Mastera, City Administrator, City of Dilworth
- Jim Kapitan, County Commissioner, Cass County
- Susan Jarvis, Chief Operating Officer, Sanford Health
- Brittany Rasmussen, Crisis Prevention and Response Planner, City of Fargo
- Dan Hannaher, North Dakota Field Representative, Global Refuge
- Sara Bond, Community Relations, Sanford Health
- Sandra Buchholz, Community Relations, Sanford Health
- Amanda Even, Communications Manager, Family HealthCare
- Michelle Draxten, Dietician, Fargo Cass Public Health
- Patty Lopez, Health and Safety Manager, CAPLP Head Start
- Alanna Zeller, Regional Director, Southeast Human Service Center
- Tim Mahoney, Mayor, City of Fargo
- Taylor Syvertson, Director Community Impact, United Way of Cass Clay
- Katarina Domitrovich, Community Engagement Specialist, ND HHS
- Megan Krueger, Director, Moorhead Public Library
- Chase Gerer, Strategic Planning Advisor, Sanford Health
- Kathy McKay, Public Health Administrator, Clay County Public Health
- Becky Schmidt, Public Health Strategist, Clay County Public Health
- Tom Hill, Community Relations, Essentia Health
- Katie Vasey, Community Health, Essentia Health
- Alexis Burke, Administrative Intern, Family HealthCare
- Kory Wolden, Director of Operations, Family HealthCare
- Catlyn Christie, Assistant Planner, City of Fargo
- Julie Sorby Engen, Director of Community Development, Family HealthCare

Sanford Broadway Medical Center Description

Sanford South University Medical Center has 115 licensed beds and serves as a hub for orthopedic surgery and rehabilitation with inpatient units for these services. South University also currently houses highly specialized services, including a behavioral health inpatient and partial hospitalization unit, ophthalmology, a center for cardiac and vascular screening, and a bio-skills and cadaver lab for medical residents. In total, Sanford has 764 inpatient beds within the city.

Sanford Health is a major teaching hospital in partnership with the University of North Dakota School of Medicine and Health Sciences. They have collaborated to launch several new residency and fellowship programs in the last five years, including orthopedics, neurology, oncology, and family medicine.

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 local communities and across Sanford's care delivery footprint, developed a multi-faceted assessment program. The process is designed to establish multiple pathways to health needs assessment. Sanford Health, Essentia Health, Family HealthCare, Clay County Public Health, and Fargo Cass Public Health, which are referred to as the "Cass-Clay Working Group," coordinated the community survey and stakeholder meeting. Priority health needs for individual implementation plans were identified by each organization, based on current capacities, expertise, strategic alignment, and service areas, among other relevant factors.



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 (<u>https://news.sanfordhealth.org/</u>). The system also promoted the survey internally through the organization's intranet, allstaff 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

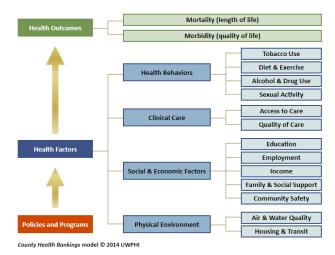
Community residents were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand health needs. Survey design is based on the UW Population Health Institute model. Each respondent was asked 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 Cass County, ND, and Clay County, MN, 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 1,865 of 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. Fargo is included with Sioux Falls SD and Bismarck ND.
- 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. The Cass-Clay Working Group held a joint meeting in which community stakeholders were invited to attend a presentation of the findings of the CHNA research. Facilitated discussion commenced with the participants divided into small groups. Each participant was asked to consider the needs identified through the survey 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.

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

- What surprises you about the data?
- What are any concerning or growing issues that you feel are on the rise that weren't discussed?
- Based on the information you heard today, and what you know about your community, what do you feel the top needs in the community are?
- What disparities exist related to those areas?
- What ideas do you have that should move forward to address these priorities?
- How do you think your organization/group/community can help with each?

Each group was asked to submit their top three priorities at the end of the meeting based upon the survey data and stakeholder meeting discussions. Sanford Health Leadership selected the needs for their implementation plan based upon their current capacities, areas of expertise, alignment with strategic plans, and service areas, among other drivers.

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, seven 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 Fargo market area is defined as the combination of Cass County in North Dakota and Clay 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 Bismarck, ND; Fargo, ND; and Sioux Falls, SD. 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 1,865 respondents from the Fargo 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 Fargo area regarding the following community health issues were positive. Average scores for environmental health (average score=3.86), health care quality (average score=3.69), access to exercise opportunities (average score=3.66), employment and economic opportunities (average score=3.64), access to healthy foods (average score=3.50), community safety (average score=3.45), and senior housing quality (average score=3.12) in the Fargo market were all above 3.00. However, average scores for survey respondents in the Fargo area were lower than the comparison group average for community safety, access to exercise opportunities, and health care quality.

When asked about their personal health, survey respondents in the Fargo area rated their current health and wellness as good (average score=3.19) and their current ability to access health care services as slightly better (average score=3.63). However, both scores were lower than the comparison group average. Despite lower rankings when compared to similar-sized markets, it is important to note that average scores in all three markets were very similar. CHR data indicate that Cass County is among the healthiest counties in North Dakota and Clay County ranks in the middle range of Minnesota counties in terms of overall health. However, the following areas of concern were identified for further discussion (in no particular order).

Top Health Needs

Access to Affordable Health Care

When respondents in the Fargo area were asked about the most important health care issues impacting their community, cost and affordability was cited as the top issue. Cost and the ability to afford needed health care was also the top health care concern that respondents and their families face on a regular basis.

While survey respondents in the Fargo area rated their own ability to access health care as good (average score=3.63), when the 13 percent of respondents who rated their access to health care as poor or fair were asked why they did so, health care costs and insurance premiums were among the top reasons. Most respondents have a primary care provider (85%) and have been in for a routine checkup or screening in the past year (86%). However, when respondents in the Fargo area who had not been in for a routine checkup in the past year were asked why, the third leading reason was cost and the inability to afford care (21%), behind not needing care (27%) and getting time off work (27%). In addition, one in five survey respondents in the Fargo area indicated that they or a family member needed medical care in the past year but did not receive it (22%). When asked why, the main reasons were due to cost and long wait times (41% and 40%, respectively).

According to CHR, 7 percent of people in the Fargo area are uninsured, a rate which is similar to the comparison group average.

Stakeholders reported that one area of access discussed in the meeting but not directly addressed in the survey was the availability of affordable dental care for uninsured and Medicaid patients. Another discussion topic focused on the cost of care overall, with the main issues being inadequate funding for behavioral health and fundraising not being able to keep up with the growing population.

Local Asset Mapping	
Health Insurance resources:	Health Care resources:
• Blue Cross, 4510 – 13th Ave. S., Fargo	• Essentia Charity Care program (all locations)
• Medica, 4340 18 th Ave S. STE 100, Fargo	 Essentia Clinics (several locations)
• Sanford Health Plan, 1749 38 St. S., Fargo	• Fargo HealthCare Center, 301 Northern
Dental resources:	Pacific Ave., Fargo
• Family HealthCare Center dental clinic, 715 N.	• Family HealthCare Center, 4025 9th Ave. S,
11th St., Moorhead	Fargo
 Fargo HealthCare Center, 301 Northern 	• Family HealthCare Center, 726 13th Ave. E.,
Pacific Ave., Fargo	West Fargo
• Family HealthCare Center, 4025 9th Ave. S,	• Health Care for Homeless Veterans, 2101 Elm
Fargo	St NE., Fargo

West Fargo	 Homeless Health, 301 Northern Pacific Ave, Fargo Sanford Charity Care program (all locations)
• Homeless Health, 301 Northern Pacific Ave, Fargo	 Sanford Clinics (several locations) VA Clinic, 2101 Elm St NE., Fargo
• RRV Dental Access Project, 1900 28 th Ave S.,	• VA Clinic, 2101 Eliti St NE., Faigo
Moorhead	
Vision coverage:	
• Fargo HealthCare Center, 301 Northern	
Pacific Ave., Fargo	
• Family HealthCare Center, 4025 9th Ave. S,	
Fargo	
• Family HealthCare Center, 726 13th Ave. E.,	
West Fargo	
•	Dental Resources Cont.:
	Fargo
	• Robert A Saunders DDS PC & Brittany C Krog
	DDS, 2834 S University Dr, Fargo
-	· Corwin Family Dentistry, 827 28^{th} St S Suite A,
•	
	• Majidian Dental, 1231 27th St S Suite B, Fargo
•	• Dakota Pediatric Dentistry 4423 45 th St S,
0	• Vetter Dental, 3207 11 th St S., Fargo
	• Valley Dental, 1338 Gateway Dr S #5, Fargo
program,	Cornerstone Dental, 3030 49 th St S, Fargo
Dental Resources:	Dahl and Mack Dental, 1324 23 rd St S, Fargo System Dental, 1320 Main Ave, #220 Farge
• Fargo HealthCare Center, 301 Northern	• Evergreen Dental, 1220 Main Ave #220, Fargo • Tronsgard & Sullivan DDS, PC, 1231 27 th St S
, 5	STE C, Fargo
	• Northern Lights Dental, 4150 19th Ave S#301,
5	Fargo
	• Southpointe Dental – Dr Susan Althoff, 3210
5	18 th St S suite a, Fargo
Fargo	• Crossroads Dental, 1918 9th St E, West Fargo
	• Dental Care Fargo: Carrie Peterson, DDS,
5	3226 13 th Ave S, Fargo
	• Smile Care, 3011 25 th St S STE 1, Fargo
11th St. N. #106B, Moorhead	• South University Dental Associates, 3115 S
	University Dr, Fargo
	• Designer Smiles, 3525 25 th St S, Fargo
2704 12 th St S, Moorhead	
• Melinda Harr Dental, 1509 32 nd Ave S, Fargo	
• Dental Care Fargo, 3226 13th Ave S, Fargo	
• Fargo Moorhead Dental & Dentures, 4302 13 th	
Ave S Suite 10, Fargo	
• Lundstrom Family Dentistry, 4110 40 th St S	
#102, Fargo	
• Aspen Dental 1650 45 th St S STE 108, Fargo	
• Arch Dental, 321 4 th ST N, Fargo • Dakota Smiles 3170 44 th St S #100, Fargo	

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• Saving Smiles Dentistry, 5285 42 nd St S.,	
Fargo • Serenity Valley Family Dentistry, 3633 Lincoln	
St S STE C, Fargo	
• Blake Ristvedt Dental, 29 N University Dr.,	
Fargo	
Acute Care Providers:	Urgent Care Providers:
• Sanford Medical Center Fargo, 5225 23rd Ave	• Sanford Children's Urgent Care Clinic, 2701
S, Fargo	13 th Ave S, Fargo
• Essentia Health Fargo, 3000 32nd Ave S,	• Sanford South University Urgent Care, 1720 S
Fargo	University Dr, Fargo
 Sanford South University Medical Center, 	•Sanford Orthopedics and sports walk in clinic,
1720 S University Dr, Fargo	1720 S University Dr, Fargo
• Sanford Broadway Medical Center, 801	•UrgentMED, 2829 S University Dr #101, Fargo
Broadway N, Fargo Providers:	Providers Cont.:
• Fargo VA Health Care System, 2101 Elm St	• West Fargo Eyecare Associates, 3139
NE, Fargo	Bluestem Dr #112, West Fargo
•Sanford Fargo N Clinic, 2601 Broadway N,	• Internal Medicine Associates (IMA
Fargo	Healthcare), 4450 31st Ave S #102, Fargo
• DMS Health Technologies Inc, 728 E Beaton	• Sanford Orthopedics, 2301 25 th St S, Fargo
Dr Ste 101, Fargo	• Sanford Southpointe, 2400 32 nd Ave S, Fargo
• Lamb Plastic surgery Center, 1507 S	• Heartland Healthcare Network, 3453
University Dr, Fargo	Interstate Blvd S Suite A, Fargo
Sanford Health Occupational Medicine Clinic	
3838 12th Ave N, Fargo	Ness, 3173 43rd St S., Fargo
• Sanford West Fargo clinic, 1220 Sheyenne St,	Sanford Reproductive Medicine Clinic, 1111
West Fargo	Harwood Dr S, Fargo
• Essentia Health-West Fargo Clinic, 1401 13th Ave E, West Fargo	• Center For Special Surgery, 350 23 rd Ave E Ste 201, Fargo
	• Thom Eye & Laser Clinic, 3171 44th St S, Fargo
Ave S, Fargo	• Sanford South University Medical Center,
	1720 S University Dr, Fargo
E., West Fargo	• Valley Medical Clinic, 3280 20 th St S Ste A,
• Sanford Dermatology & Laser Clinic, 4656	Fargo
40th Ave S, Fargo	• Northern Plains Surgery Center, 2829 S
• DaVita Fargo Dialysis Center, 4474 23rd Ave	University Dr #103, Fargo
S Ste M, Fargo	• Family HealthCare, 301 Northern Pacific Ave,
Sanford Dialysis, 2801 S University Dr, Fargo	Fargo
• Bagan Strinden Vision, 4344 20th Ave S, Eargo	• Sanford Transplant Center, 736 Broadway N,
Fargo • Kari Wessman MD, PC, 3000 32nd Ave S,	Fargo • Essentia Health-Moorhead Clinic, 801 Belsly
Fargo	Blvd, Moorhead
• Essentia Health-West Acres Clinic, 3902 13th	• Concordia College Health Services (Essentia
Ave S, Fargo	Health), 720 Main Ave, Moorehead
• Fargo Cass Public Health, 1240 25th St S,	• Birthright of Fargo Moorhead, 715 11th St N,
Fargo	Moorhead
 Sanford Children's Urgent Care Clinic, 2701 	
13th Ave S, Fargo	
Employment Resources:	Major Employers:
• Spherion, 2730 7 th Ave S, Fargo	•Sanford Health, 5225 23 rd Ave, S, Fargo

	1
	•North Dakota State University, 1340 Administration Ave, Fargo
• Volt Services Group, 4201 38th St SW #108,	Blue Cross Blue Shield of North Dakota, 4510
•	, 13th Ave S, Fargo
• Kelly Services, 4501 15 th Ave S Ste 102, Fargo	•Fargo Public Schools, 3901 40th Ave S, Fargo
• Prairie Staffing, 1128 Westrac Dr Suite B,	•Essentia Health-Fargo, 3000 32nd Ave S,
Fargo	Fargo
• Express Employment Professionals, 1100 19th	• US Bank, multiple locations
Ave N Ste R1, Fargo	•Microsoft, 3900 Great Plains Dr, Fargo
• Aerotek, 3154 41st ST S #1, Fargo	•Fargo VA Hospital, 2101 Elm St NE, Fargo
• Job Service, 1350 32 nd St S, Fargo	• Concordia College 901 8th St S, Moorhead
• Experience Works, 118 Broadway N, Fargo	•Minnesota State University Moorhead, 1104
• HireQuest Direct of Fargo, 1335 2 nd Ave N	7th Ave S, Moorhead
suite a, Fargo	• City of Fargo, 225 4th St N, Fargo
• CareerForce in Moorhead, 715 11 th St N #302,	•Moorhead Public Schools, 2410 14th St S #1,
Moorhead	Moorhead
•Labor Masters, 1404 33 rd St SW C, Fargo	
• Heartland Labor, 813 N University Dr, Fargo	
• Community Options, 2701 9th Ave S, Fargo	
• Vocational Rehabilitation Services, 2086, 715	
11th St N #302b, Moorhead	
• PeopleReady, 723 Norther Pacific Ave, Fargo	
• ProSource 1121 Westrac Dr, Fargo	
• O'Leary & Co, 607 Northern Pacific Ave # 200,	
Fargo	
Quentin N. Burdick Job Corps, 3310 Fiechtner	
Dr S, Fargo	
• Soma Employment Solutions, 3401 10th St S,	
Moorhead	
	For Additional Resources Reference:
	https://sanford.findhelp.com/

Access to Health Care Providers and Quality Care

When respondents were asked about the most important health care issues impacting their community, having access to health care was one of the top issues, behind cost. And when respondents who rated their own ability to access health care as poor or fair were asked why they rated access as they did, issues of limited hours, wait times, limited locations, and lack of providers and specialty care were among the top concerns (more so than cost issues).

While most respondents in the Fargo area have a primary care provider and have been in for a routine checkup or screening in the past year, one in four respondents in the Fargo area reported traveling outside of their community to receive health care services in the past three years (25%) (which is similar to the comparison group average). When asked why, most of those who traveled for care indicated that they needed specialty care or the needed services were not available locally (57%), followed by 32 percent who traveled for better or higher quality care.

When asked which health care services they would like to see offered or improved in their community, one in four respondents said walk-in/urgent care (29%), family medicine or primary care (27%), and dental care (27%). According to CHR, the Fargo area has one primary care physician for every 1,249 people (which is slightly worse than the comparison group

average) and one dentist for every 1,356 people (which is slightly better than the comparison group average).

Meeting participants discussed the need for more continuum of care for behavioral health, housing and support overall. The need for more Urgent Care access and availability of hours was discussed, in addition to ensuring care is available to the populations that require it. The need for additional community education on the utilization of Emergency Room versus Urgent Care versus Walk-In Care was also highlighted. Additional education, including ensuring lists of available care are made accessible to the community.

Local Asset Mapping	
Local Asse Health Care Education Resources: -Sanford Health.org -Essentia Health - Cass-Clay Public Health - Health Resources & Services Administration Health Insurance resources: - Blue Cross, 4510 13th Ave. S., Fargo - Medica, 1711 Gold Dr. Ste 210, Fargo - Medica, 1711 Gold Dr. Ste 210, Fargo - Sanford Health Plan, 1749 38th St. S., Fargo Dental resources: - Family HealthCare Center dental clinic, 715 N. 11th St. N #106B, Moorhead - Fargo HealthCare Center, 301 Northern Pacific Ave., Fargo - Family HealthCare Center, 726 13th Ave. S, Fargo - Family HealthCare Center, 726 13th Ave. E., West Fargo - Homeless Health, 301 Northern Pacific Ave, Fargo - RRV Dental Access Project, 1900 28 th Ave S., Moorhead Vision coverage: - Fargo HealthCare Center, 301 Northern Pacific Ave., Fargo - Family HealthCare Center, 301 Northern Pacific Ave., Fargo - Fargo HealthCare Center, 301 Northern Pacific Ave., Fargo - Family HealthCare Center, 301 Northern Pacific Ave., Fargo - Family HealthCare Center, 4025 9th Ave. S, Fargo	 Social Services Organization: Cass County Social Services, 1010 2nd Ave S #2, Fargo Health Care resources: Essentia Financial Assistance Program (all locations) Essentia Clinics (several locations) Fargo HealthCare Center, 301 Northern
• Family HealthCare Center, 726 13th Ave. E., West Fargo	
 Prescription Assistance resources: Fargo HealthCare Center, 301 Northern Pacific Ave., Fargo Family HealthCare Center, 4025 9th Ave. S, Fargo Family HealthCare Center, 726 13th Ave. E., West Fargo Homeless Health, 301 Northern Pacific Ave, Fargo Prescription Assistance Program, 624 Main Ave., Fargo 	 Dental Resources Cont.: Dental Care Fargo, 3226 13th Ave S, Fargo Northern Lights Dental, 4150 19th Ave S #301, Fargo Robert A Saunders DDS PC & Brittany C Krog DDS, 2834 S University Dr, Fargo Corwin Family Dentistry, 827 28th St S Suite A, Fargo Majidian Dental, 1231 27th St S Suite B, Fargo Dakota Pediatric Dentistry 4423 45th St S, Fargo

 Prescription Connection, 1640 Burnt Boat Dr., Bismarck Salvation Army prescription assistance program Dental Resources: Fargo HealthCare Center, 301 Northern Pacific Ave., Fargo Family HealthCare Center, 4025 9th Ave. S, Fargo Family HealthCare Center, 726 13th Ave. E., West Fargo Homeless Health, 301 Northern Pacific Ave, Fargo RRV Dental Access Project, 1900 28th Ave S., Moorhead Family HealthCare Center Dental Clinic, 715 11th St. N. #106B, Moorhead Smile Solutions, 1910 42nd St S suite a, Fargo Southview Dental Care: Dr. David Tranby, 2704 12th St S, Moorhead Melinda Harr Dental, 1509 32nd Ave S, Fargo Fargo Moorhead Dental & Dentures, 4302 13th Ave S Suite 10, Fargo Lundstrom Family Dentistry, 4110 40th St S #102, Fargo Aspen Dental 1650 45th St S STE 108, Fargo Arch Dental, 321 4th ST N, Fargo Dakota Smiles 3170 44th St S #100, Fargo Saving Smiles Dentistry, 5285 42nd St S., Fargo Serenity Valley Family Dentistry, 3633 Lincoln St S STE C, Fargo Blake Ristvedt Dental, 29 N University Dr., Fargo 	
Acute Care Providers:	Urgent Care Providers:
 Sanford Medical Center Fargo, 5225 23rd Ave S, Fargo Essentia Health Fargo, 3000 32nd Ave S, Fargo Sanford South University Medical Center, 1720 S University Dr, Fargo Sanford Broadway Medical Center, 801 Broadway N, Fargo 	-
Providers:	Providers Cont.:
 Fargo VA Health Care System, 2101 Elm St NE, Fargo Sanford Fargo N Clinic, 2601 Broadway N, Fargo DMS Health Technologies Inc, 728 E Beaton Dr Ste 101, Fargo Lamb Plastic surgery Center, 1507 S University Dr, Fargo 	 West Fargo Eyecare Associates, 3139 Bluestem Dr #112, West Fargo Internal Medicine Associates (IMA Healthcare), 4450 31st Ave S #102, Fargo Sanford Orthopedics, 2301 25th St S, Fargo Sanford Southpointe, 2400 32nd Ave S, Fargo Heartland Healthcare Network, 3453 Interstate Blvd S Suite A, Fargo

Ave S, Fargo • Vance Thompson Vision – Fargo354 23 rd Ave E., West Fargo • Sanford Dermatology & Laser Clinic, 4656 40th Ave S, Fargo	Ness, 3173 43rd St S., Fargo • Sanford Reproductive Medicine Clinic, 1111 Harwood Dr S, Fargo • Center For Special Surgery, 350 23 rd Ave E Ste 201, Fargo • Thom Eye & Laser Clinic, 3171 44th St S, Fargo • Sanford South University Medical Center, 1720 S University Dr, Fargo • Valley Medical Clinic, 3280 20 th St S Ste A, Fargo • Northern Plains Surgery Center, 2829 S
• Sanford Dermatology & Laser Clinic, 4656	Fargo
 DaVita Fargo Dialysis Center, 4474 23rd Ave S Ste M, Fargo Sanford Dialysis, 2801 S University Dr, Fargo 	University Dr #103, Fargo • Family HealthCare, 301 Northern Pacific Ave, Fargo
• Bagan Strinden Vision, 4344 20th Ave S, Fargo	• Sanford Transplant Center, 736 Broadway N, Fargo
 Kari Wessman MD, PC, 3000 32nd Ave S, Fargo Essentia Health-West Acres Clinic, 3902 13th 	 Essentia Health-Moorhead Clinic, 801 Belsly Blvd, Moorhead Concordia College Health Services (Essentia
Ave S, Fargo • Fargo Cass Public Health, 1240 25th St S,	Health), 720 Main Ave, Moorehead • Birthright of Fargo Moorhead, 715 11th St N,
Fargo • Sanford Children's Urgent Care Clinic, 2701	Moorhead
13th Ave S, Fargo	For Additional Resources Reference: https://sanford.findhelp.com/

Healthy Living

In the United States, many leading causes of death and disease are attributed to unhealthy behaviors. For example, poor nutrition and low levels of physical activity are associated with higher risk of cardiovascular disease, type 2 diabetes, and obesity. Tobacco use is associated with heart disease, cancer, and poor pregnancy outcomes if the mother smokes during pregnancy. Excessive alcohol use is associated with injuries, certain types of cancers, and cirrhosis.

When survey respondents in the Fargo area were asked about their biggest health care concerns for themselves and their family (concerns they face on a regular basis), chronic health issues along with diet and exercise were top concerns (behind affordability). And the most commonly cited chronic health concerns involved weight loss, obesity, diabetes, and the heart. Diabetes is an important marker for a range of health behaviors. CHR data indicate that nearly one in ten adults in the Fargo area has diabetes (8%) and one in three adults has obesity (36%), both of which are about average for similar-sized market areas served by Sanford.

Regarding tobacco and alcohol usage, CHR data indicate that one in six adults in the Fargo area is a smoker (17%) and 23 percent of adults drink excessively – both percentages are similar to the comparison group average. However, CHR data also indicate that 38 percent of all driving deaths in the Fargo area are alcohol-impaired (which is higher than the comparison group average).

Healthy living was not identified as a priority issue to address in the Fargo community by the stakeholder meeting participants. The main conversations about healthy living in the group

breakout discussions had to do with meeting participants expecting higher rates for diabetes and vaping, but also wanting food insecurity to be discussed more in the presentation and during group discussions.

Local Asset Mapping	
Fitness resources:	Fitness Resources Cont.:
 Anytime Fitness, 1801 45th St. S., Fargo Anytime Fitness, 5050 Timber Pkwy S., Fargo Anytime Fitness, 2614 N. Broadway, Fargo Anytime Fitness, 935 37th Ave. S., Moorhead Courts Plus, 3491 S. University Dr., Fargo Empower Min Body Soul, 1620 1st Ave. N., Fargo. Edge Fitness, 6207 53rd Ave. S. NW, Fargo Fargo Park District, 6100 38th St S., Fargo Health Pros personal training, 1800 21st Ave S., Fargo Max Training, 1518 29th Ave. S., Moorhead Metro Rec Ctr., 3110 Main Ave, Fargo Moorhead Park District, 324 24th St. S., Moorhead CrossFit 701, 3309 Fiechtner Dr. S. #4, Fargo Fly Fitness Fargo, 235 Roberts St N, Fargo 	 Planet Fitness, 800 Holiday Dr., Moorhead Red River Traditional Taekwondo, 3509 4th Ave S., Fargo Family Wellness, 2960 Seter Pkwy, Fargo Take Off Pounds Sensibly, TOPS.org TNT Kids' Fitness, 2800 Main Ave, Fargo Total Balance, 1461 Broadway N., Fargo West Fargo Fitness Center, 215 Main Ave., West Fargo YMCA, 400 1st Ave. S., Fargo YMCA, 4243 19th Ave. S., Fargo Academy of Combat Arts Fargo, 3332 4th Ave S suite d, Fargo Fargo Brazilian Jiu-jitsu & Kickboxing Academy, 1335 2nd Ave N, Fargo Orangetheory Fitness, 4501 15th Ave S, Fargo Wallman Wellness Center, 1707 Centennial Blvd, Fargo
• Planet Fitness, 5100 14th Ave. S., Fargo	• HOTWORX, 835 23 rd Ave E., Fargo
 Obesity resources: Eating Disorders Support Group, Sanford, 1720 S. University, Fargo. Essentia Dieticians, 3000 32nd Ave. S., Fargo Gastric Bypass Support Group, Atonement Lutheran, 4201 S. University, Fargo Sanford Dietitians, 801 Broadway N., Fargo Sanford Eating Disorders & Wt. Management Center, 1717 S. University Dr., Fargo Sanford Shared Medical Appointments, 2400 32nd Ave. S., Fargo No More Diets Support Group Overeaters Anonymous, OA.org 	 Health care resources for high cholesterol/hypertension: Clay Co. Public Health, 715 11th St. N. #303, Moorhead Essentia Health clinics (several locations) Family HealthCare Center, 301 Northern Pacific Ave., Fargo Family HealthCare Center, 4025 9th Ave. S, Fargo Family HealthCare Center, 726 13th Ave. E., West Fargo Fargo Cass Public Health, 1240 25th St. S., Fargo Fargo VA, 2101 Elm St. NE., Fargo Homeless Health, 301 Northern Pacific Ave, Fargo Sanford Health clinics
 Healthy Food resources: Cash Wise (several locations) Family Fare (several locations) Hornbacher's (several locations) Tochi, 1111 – 2nd Ave. N., Fargo Natural Grocers, 4517 13th Ave. S., Fargo Moorhead Farmer's Market, 202 1st Ave N., Moorhead Red River Market, 201 Broadway N, Fargo 	Nutrition Information: • Cass Co. Extension Service nutrition classes, 1010 2nd Ave. S., Fargo • Cass Co. SNAP, 1010 2nd Ave. S, Fargo • Cass Co. WIC, 1240 25th St. S., Fargo • Clay Co. Public Health, 715 11th St. N., Moorhead • Clay Co. SNAP, 715 11th St. N., Moorhead • Clay Co. WIC, 715 11st St. N., Moorhead • Essentia Dieticians, 3000 32 Ave. S., Fargo

• Hildebrant Farmers Market, 349 Main Ave. E.,	• Fargo Cass Public Health, 1240 25th St. S.,
West Fargo	Fargo
• The Market, 3902 13th Ave. S., Fargo	· Sanford Dieticians, 801 Broadway. N., Fargo
• Dilworth Farmers Market, 4th St. NE & Center	
Ave, Dilworth	For Additional Resources Reference:
	https://sanford.findhelp.com/

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 adulthood1.

When survey respondents in the Fargo area were asked about the most important health care issues impacting their community, mental health was among the top three issues. Mental health was also among the top four health care concerns that respondents and their families face on a regular basis. When survey respondents in the Fargo area were asked which health care services they would like to see offered or improved in their community, most said behavioral and mental health services (72%) followed by addiction treatment (46%).

According to CHR, adults in the Fargo market average 4.1 mentally unhealthy days each month and 13 percent of adults average at least 14 days of mental distress per month (both rates are the highest when compared to similar-sized markets). One of the most important measures of mental health within a community is suicide. CHR data indicate that there are 17 suicides for every 100,000 people in the Fargo area, a rate similar to those in the Sioux Falls and Bismarck market areas served by Sandford Health. In addition, there are 10 drug overdose deaths for every 100,000 people in the Fargo area (also similar to the comparison group average).

According to CHR, the Fargo area has one mental health provider for every 330 people (which is similar to the comparison group average).

Mental health, behavioral health and homelessness were all identified as top priority issues for the Fargo community. A leading component of mental health that nearly every group discussion brought up was the prevalence of homelessness in the Fargo community and how mental and behavioral health both influence someone experiencing homelessness. Group discussions also elevated the connection mental health and homelessness have into employment and whether someone can obtain and keep a job, especially if they are substance abuse issues or physical health problems.

Local Asset Mapping	
Mental health resources:	Mental Health Resources Cont.:
• Alzheimer's Association, 2631 12th Ave. S.,	• Lutheran Social Services of ND, 3911 20th Ave.
Fargo	S., Fargo
• ARC of West Central MN, 810 4th Ave. S. #134,	• Lutheran Social Services of MN, 3101 S
Moorhead	Frontage Rd #100., Moorhead
• Catholic Family Services, 5201 Bishops Blvd.	• Mental Health America of ND, PO Box 4106,
Ste B, Fargo	Bismarck
• Clay Co. Public Health, 715 11th St. N.,	• Mobile Mental Health Crisis Team, 2624 9th
Moorhead	Ave. S., Fargo
	• Prairie St. John's, 510 4th St. S., Fargo

 Clay Co. Social Services, 715 11th St. N., Moorhead Community Outreach Center (on MSUM Campus), Lommen Hall 113, Moorhead Creative Care for Reaching Independence (CCRI), 2903 15th St. S., Moorhead Essentia (Fargo & Mhd locations) Fargo VA, 2101 Elm St. NE., Fargo Fargo Cass Public Health, 1240 25th St. S., Fargo FirstLink, 4357 13th Ave. S. #107L, Fargo Human Service Associates, 403 Center Ave. #405, Moorhead Heartland Industries, 2510 16th Ave. S., Moorhead Lakeland Mental Health, 1010 32nd Ave. S., Moorhead Living Free, Jail Chaplains, P. O. Box 6444, Fargo 	 Prairie St. John's, 2925 20th St. S., Moorhead Rape & Abuse Crisis Center, 317 8th St. N., Fargo Red River Health Services Foundation, 1104 2nd Ave. S., Fargo Safe Haven, 1015 30th Ave S., Moorhead Sanford Health Behavioral Health, 100 4th St. S., Fargo SENDCAA, 3233 S University Dr., Fargo SE Human Services, 2624 9th Ave. S., Fargo Solutions Behavioral Healthcare Professionals, 1547 30th Ave S., Moorhead Village Family Service Center, 815 37th Ave S Ste 100., Moorhead Virtual Counseling – vosburgcounseling.com
o Insight (women) o Stepping into Freedom (men) o Anger: Our Master (men)	For Additional Resources Reference: https://sanford.findhelp.com/

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 adults2.

Respondents in the Fargo area rated community access to daily transportation as slightly less than good (average score=2.98). When respondents who rated community access to daily transportation as poor or fair were asked why they did so, responses acknowledged a reasonable bus system in the core Fargo metro area; however, lines do not reach all neighborhoods or business districts and employment locations – nor do they offer extended hours/options for residents working late or weekend shifts (Sunday specifically). Respondents indicated that public transportation options outside the metro are even more scarce, if available.

Public transportation was discussed as an issue in the community stakeholder meeting. Any group who identified public transportation as a top priority issue discussed how transportation can be a hinderance in being able to access any form of care, housing, employment or food. Stakeholder meeting participants, in addition to survey respondents, noted the current public transportation system has limited hours of operation, locations, poor timing of stops and poor frequency of stops. Participants also noted the impact limited staffing is having on the transportation system.

Local Asset Mapping	
Transportation resources:	Transportation resources cont.:
• Anytime Transportation, 1403 13-1/2 St. S.,	• Metro Transit (paratransit buses), 650 23rd St.
Fargo	N., Fargo
• Doyle Taxi, 1418 Main Ave., Fargo	• Uber, phone app
• Handi-Wheels, 2525 Broadway. N. #2, Fargo	• Lyft, phone app

• Lucky 7 Taxi, 909 14th St. N., Fargo • Metro Senior Ride Service, 2801 32nd Ave. S.,	
Fargo	
	For Additional Resources Reference:
St. N., Fargo	https://sanford.findhelp.com/

Quality Child Care

Participation in high-quality early childhood care and education programs can have positive effects on children's cognitive, language, and social development, particularly among children at risk for poor outcomes3.

Survey respondents in the Fargo area rated the quality of child care, day care, and preschool as slightly less than good (average score=2.97). When asked to explain why, respondents cited an overall workforce shortage and lack of child care providers in their community, along with limited capacity, restricted options, and higher costs among existing providers.

The U.S. Department of Health and Human Services has historically considered child care affordable if the total expense consumes less than 10 percent of household income, and more recently proposed an affordability threshold set at 7 percent of household income4. According to CHR, the average household in the Fargo area spent 27 percent of its income on child care, which is nearly four times the proposed threshold for affordability – and higher than similar-sized market areas served by Sanford Health.

Quality Child Care was a top issue for seven of the nine groups. The main problems with child care identified by the group discussions and the survey results were the cost of child care in the area and the lack of child care providers. Participants also noted that the lack of child care in the community is forcing residents in the community to seek out alternative child care options and employers to provide assistance.

Local Asset Mapping				
Services for at-risk youth:	Child care resources:			
• Boys & Girls Club, 2500 18th St. S., Fargo	• ABC Sandcastle, 2502 18th St. S., Fargo			
• Cass Co. Social Services, 1010 2nd Ave S. #2,	• ABC 123, 1710 Center Ave. W. #130, Dilworth			
Fargo	• Academy for Children, 20 8th St. S., Fargo			
• Cass Co. Family Services Division, 211 9th St.	• Bright Futures – 6244 51st Ave & 2511 53rd Ave			
S., Fargo	S, Fargo			
• Cass Co. Youth Commission, 211 9th St. S.,	• Child Care Resource & Referral, 715 11th St. N.			
Fargo	Ste 402, Fargo			
• Catholic Family Services, 5201 Bishops Blvd.	• Child Care Assistance Program, ND Dept. of			
Ste B, Fargo	Health Services, 600 E. Blvd. Ave, Bismarck			
• CHARISM, 122 1/2 N. Broadway, Fargo	• Cobber Kids Corner, 1306 3rd St S, Moorhead			
• Christian Family Life Services, 2360 7th Ave.	• Early Explorers, 2935 13th St. S., Moorhead			
E., West Fargo	• Early Einsteins Learning Center, 1209 Center			
• Clay Co. Social Services, 715 11th St. N.,	Ave. W., Dilworth			
Moorhead	• Happy Days, 2824 Broadway N, Fargo			
 Early Intervention Program, SE Human 	• Here We Grow, 3247 39th St. S., Fargo			
Service Center, 2624 9th Ave. S., Fargo	• Hope Lutheran, 2900 Broadway N, Fargo			
 Family HealthCare Center, 301 Northern 	• Kids Being Kids, 1004 Westrac Dr. S., Fargo			
Pacific Ave., Fargo	• Kiddiland, 1027 15 St. S., Fargo			
• Fargo Youth Initiative, 225 4th St. N., Fargo	• Sanford Child Development Center, 502 7th			
 Follow Along Program, MN Department of 	St. N., Fargo			
Health, Box 64975, St. Paul, MN	• Inspiring Minds, 4656 40th Ave. S., Fargo			

• Head Start, 3233 S. University Dr., Fargo	• Lil Bloomers, 5170 Prosperity Way, Fargo
• Head Start, 715 11th St. N., Fargo	• MSUM Early Education Center, 1213 6th Ave.
• Lutheran Social Services of ND, 3911 20th Ave.	S., Moorhead
S., Fargo	• Our Redeemer, 1000 14th St. S., Moorhead
Parenting Resource Center (NDSU	• Sheyenne Learning Academy, 521 32nd Ave.
Extension), 1010 2nd Ave. S., Fargo	W., West Fargo
• Right Track (ND Dept. of Human Services),	• Small Wonders, 4745 Amber Valley Pkwy S,
2624 9th Ave. S., Fargo	Fargo
• SENDCA, 3233 University. Dr., Fargo	• Tot Spot, 820 Page Dr., Fargo
• Stepping Stones Resource Center, 721 S	• YMCA Child Care, 400 1st Ave S, Fargo
University Dr., Fargo	
• Youthworks, 317 S. University Dr., Fargo	
• Youth Center at Rose Creek, 4809 S.	For Additional Resources Reference:
University Dr., Fargo	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.

Respondents in the Fargo area rated the availability of affordable housing in their community as less than good (average score=2.29) and lower than any other community health issue. When asked to explain why they rated community access to affordable housing the way they did, respondents suggested that housing prices in general (purchase costs and rental rates) are inflated and continue to rise at a pace that exceeds any rise in wages for middle- and low-income individuals. Respondents added that lower income properties, if available, are often poor in quality and present safety concerns.

CHR data indicate that 13 percent of households in the Fargo area have severe housing problems (i.e., overcrowded, high housing costs, lack of kitchen facilities, or lack of plumbing facilities) and 11 percent of households spend at least 50 percent of their household income on housing costs – both rates are higher than the comparison group average.

Stakeholder meeting participants discussed the growing costs and issues with affordable housing in the Fargo area and the impact housing has on different aspects of health. The groups highlighted the need for everyone to have the same definition of affordable housing. The lack of affordable housing and the need for more permanent supportive housing in the community are increasing as home prices and rental rates are rising.

Local Asset Mapping				
Housing resources:	Housing resources cont.:			
• Cass Co. Housing Authority, 805 Sheyenne St.,	 Rental Assistance - ND Dept. of 			
West Fargo	Commerce, 1600 E. Century Ave., Bismarck			
• Cass Co. Social Services (help w/utility costs),	• ReStore (thrift store for construction,			
1010 2nd Ave. S., Fargo	homes, etc.), 210 N. 11th St., Moorhead			
• Clay Co. Housing Authority, 116 Center Ave. E.,	• Salvation Army (provides assistance with			
Dilworth	hsg. & utilities), 304 Roberts St N, Fargo			
• ND Housing & Finance Agency, 2624 Vermont	• Section 8 Hsg. Choice Voucher Program,			
Ave., Bismarck	325 Broadway N, Fargo			

• Fargo Hsg. & Redevelopment Authority, 325	 SENDCAA weatherization program & low
 Broadway N, Fargo Housing Rehab Program, 200 3rd St. N., Fargo Jeremiah Program, 3104 Fiechtner Dr., Fargo Lake Agassiz Habitat for Humanity, 210 N. 11th St. N, Moorhead LSS HUD Housing Counseling, 1325 11th St. S., Fargo Presentation Partners in Housing, 219 7th St S., Fargo 	income hsg., 3233 S University Dr, Fargo • SENDCA (emergency rent/ utilities), 3233 S. Univ. Dr., Fargo • Wells Fargo Assist (to help those with payment challenges), 1-800- 678-7986 • ND Housing & Finance Agency, 2624 Vermont Ave., Bismarck • Moorhead Public Housing, 800 2nd Ave. N., Moorhead
Transitional housing resources:	Homelessness resources cont:
 Centre, Inc., 123 15th St N, Fargo Lakes & Prairies Transitional Housing Program, 715 11th St N #101, Moorhead Red River Recovery Center, 701 Center Ave. E., Dilworth SE Human Service Center Alcohol & Drug Abuse Unit, 2624 9th Ave S, Fargo ShareHouse, 4227 9th Ave S, Fargo YMCA, 3100 12th Ave. N., Fargo Youthworks, 317 S. University Dr, Fargo Homelessness resources: Churches United, 1901 1st Ave N, Moorhead Dorothy Day House, 714 – 8th St. S., Moorhead Family HealthCare Center (main clinic), 301 Northern Pacific Ave, Fargo FHC Moorhead Dental Clinic, 715 11th St. N., Moorhead 	 FHC S. Fargo clinic, 4025 9th Ave. S., Fargo FHC West Fargo clinic, 726 13th Ave. E., West Fargo Fraser, Ltd., 2902 S. University Dr S, Fargo Gladys Ray Shelter & Veteran Drop In Center, 1519 1st Ave. S., Fargo Homeless Health Services, 301 Northern Pacific Ave, Fargo Open Doors 65, 307 Main Ave, Fargo Native American Center, 109 9th St. S. Fargo New Life Center, 1902 3rd Ave. N., Fargo Stepping Stones, 2901 S. University Dr, Fargo Youthworks, 317 S. University Dr, Fargo YWCA Shelter, 3000 S. University Dr, Fargo Cooper House, 414 11th St. N., Fargo
Low income/subsidized housing resources:	Low income/subsidized housing
• Amber Valley Apts., 4854 Amber Valley Pkwy S.,	
Fargo • Arbor Park Village, 530 30th St. N., Moorhead • Bluestem Townhomes, 4518 Blue Stem Ct. S., Fargo • Burrel Apts., 409 4th St. N., Fargo • Candlelight, 2000 21st Ave. S., Fargo • Century Square, 3820 25th St. S., Fargo • Chestnut Ridge, 3141 32nd St. S, Fargo • Chestnut Ridge, 3141 32nd St. S, Fargo • Church Townhomes, 1538 16-1/2 St. S., Fargo • Colonial Apts., 355 – 4th Ave. N., Fargo • Colonial Apts., 355 – 4th Ave. N., Fargo • Community Homes I, 702 23rd St. S., Fargo • Community Homes II, 2210 6th Ave. S., Fargo • Cooper House, 414 11th St. N., Fargo • Country Edge Townhomes, 3343 31 st Ave S, Fargo • Crossroads Senior Living, 1670 E Gateway Cir. S., Fargo • Fieldcrest Townhomes, 1801 Belsly Blvd., Moorhead • Fieldstone Village, 4574 44th Ave. S., Fargo	 Jadestone, 1544 E. Gateway Cir. S., Fargo Maybrook, 3219 18th St. S., Fargo New Horizons, 325 N. Broadway, Fargo Northland Apartments, 1115 23rd St. S., Fargo Park Place, 2701 32nd Ave. S., Fargo Park View Terrace Apts., 100 3rd St. N., Moorhead Riverview Hts, 800 2nd Ave. N., Moorhead River Square I & II, 1250- 1251 – 54th Ave. S., Fargo Sunrise North, 350 26th Ave. N., Fargo Sterling Park, 3140-3160 33rd St. S., Fargo University Drive Manor, 1201 2nd Ave. N., Fargo Village Green Manor, 3517 Village Green Dr., Moorhead Windwood Townhomes, 4427 44th St. S., Fargo

• Graver Inn, 123 Roberts St N, Fargo		For Additional Resources Reference:	
	• Hazelwood Townhomes, 3031 33rd St., Fargo	https://sanford.findhelp.com/	

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

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

- 1. Mental Health / Behavioral Health and Substance Abuse
- 2. Access to Health Care Providers and Quality Care

Implementation Plan for Prioritized Needs

Priority 1: Mental Health / Behavioral Health and Substance Abuse

Current Activities

Sanford Fargo is continuing its efforts to improve access to mental health/behavioral health and substance abuse services. Utilization of virtual visits for behavioral health has continued to grow and contribute toward improved access. Timely access to adult psychiatry continues to be an area we are working to improve and monitor progress quarterly. Sanford currently offers mental health and substance abuse providers in community through various delivery opportunities. Depression screening will be utilized in the rooming navigator in all clinics to help identify those in need of care. Our Suboxone Clinic continues to serve patients in addiction recovery and engages in hospital peer coaching. Sanford Fargo is continuing a partnership with Clay County Detox to ensure coordinated utilization of medical and law enforcement support for individuals actively in detox.

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see increased utilization of behavioral health and substance abuse services for those that need them in the community.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Student led clinic (master's level therapists)	Number of added students	Emily Gard Paid internship (student) positions – investment	Kathryn Norby	All area universities with programs
Scholarships for recruitment (educational programs)	Number of retained/hired students Timing dependent upon budget variables	HR Investment of scholarship (forgivable with work commitment following completion)	Kathryn Norby	All area universities with programs
Develop BH outreach strategy for homeless population and at risk	Psychiatry outreach visits to YWCA shelter, number of patients Served Engage stakeholders in 2025 with outreach plan	Laurie Carey Psychiatry Residents will provide psychotherapy sessions (non- billable) at YWCA	Kathryn Norby	Shelters, YWCA, Public Health Agencies

Goal 1: Improve timely access to mental/behavioral health care services

based upon those		
engagements		

Goal 2: Enhance and expand services to effectively support and treat patients with substance
use disorders.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Substance Use Disorder Clinic	Number of patients served Volume of naloxone distribution. Launch in 2025	Emily Gard & Amy Dockter Additional staff to be added as programming grows.	Kathryn Norby	Collaborate with other area agencies offering similar services
Pursue options to serve as a clinical rotation site for LACs	Number of clinical rotations/students Timing to be determined	Emily Gard & Amy Dockter Investment as a clinical site rotation	Kathryn Norby	

Priority 2: Access to Health Care Providers and Quality Care

Current Activities

Sanford Fargo increased home-based primary care access and continues to utilize this approach to improve access as all primary care providers now have access to this option. Provider recruitment plays a major role in our ability to increase our capacity. Investing in our educational programs to serve as a pipeline for providers continues to be a priority. See the appendix for an expanded description of offerings at Sanford's three medical centers in the community.

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see increased collaboration with external partners and improved access to care.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Family Medicine outreach provided by Residency Program	Outreach Visits completed Number of patients served	Andy Larson Family Medicine Residents	Kathryn Norby	YWCA New Life Center
Grow access through educational programs and	Peds Residents Cardiology Fellows	Hailey Schepp (SME)	Hailey Schepp (SME)	UND

Goal 1: Improve access to primary and specialty care.

residency program expansion	Residents retained within our service area Evaluate opportunities with underserved populations in 2025	Residents & Attending physicians		
Develop marketing and operational plan to increase access to primary care with a focus on producing material in multiple languages	Number of new patients established with primary care Launch in 2025	Marketing	Kathryn Norby	

Goal 2: Collaboratively share CHNA information with public and private partners.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Collaboration with state health departments and DHHS	Participation and implementation of task force initiatives	Key point of contact TBD. Members from the quality, strategic reimbursement, public policy and operations team will be involved.	Tiffany Lawrence	DHHS
Engage with local agencies and non-profits to identify key opportunities for coordination.	Collaboration initiatives conducted	Melissa Erickson, Shari Lee, Jason Nelson, Sherm Syverson, Kathryn Norby & others who regularly attend/engage in community meetings	Melissa Erickson	Participants of Community Collaboration meetings (ex. Sanford-hosted meeting attendees, Shelters, Family Healthcare, SEHSC, Churches United, Prairie St. John's, Fargo Cass Public Health, Clay County Public Health, Rape and abuse crisis center, Adult Protective Services, Clay County Suicide and Substance Prevention Coalition, Fargo Police and City of Fargo, and others)

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 Health Care

Part of Sanford Fargo's three-year implementation plan focuses on community partnerships to better understand community services available, finding opportunities to partner, and helping connect patients to the services they need. Affordability also remains part of Sanford Health's ongoing operational efforts. Sanford Health works with patients who do not hold health insurance and assists them to find an appropriate insurance plan or government program to improve their ability to afford care. In the event a patient is unable to acquire insurance coverage, they are referred to our Charity Care program. Sanford Fargo also helps support Family Health Care with lab support. For these reasons the need is not highlighted directly within the Implementation Plan, but it is likely that the need will be addressed indirectly through the work.

Healthy Living

Healthy Living is not included in the Implementation Plan as it was deemed a lower priority for purposes of the Community Health Needs Assessment by the community stakeholder participants based upon the ranking submitted by each group. Sanford is working to reduce chronic diseases through a variety of programs and investments, including expanding access to primary care services through new facilities and providers, expanded hours of service, and promotion of telemedicine visits. Community education remains a key role Sanford plays in helping the community remain healthy. Additionally, the system works to expand check ups and improve vaccination rates within its clinics and through partnerships with community organizations. The hospital also utilizes the Sanford *fit* program to educate youth on healthy habits to address the issue upstream.

Public Transportation

Public transportation was highlighted as a priority by a majority of the stakeholder participant groups. However, hospital leadership determined that other organizations, including those listed in the asset map, are better positioned or already meeting the need and have the expertise and competencies to effectively engage the issue. Sanford Health will continue to address the need through continued partnership with Handi-Wheels, United Way, and advancing virtual care to reduce barriers transportation may have in receiving necessary care. Additionally, information from the Community Health Needs Assessment process will be shared with stakeholders addressing the issue, as requested.

Quality Child Care

Stakeholder meeting participants deemed childcare as one of the community's priority needs based upon the rankings. Hospital leadership will continue to seek opportunities to support the childcare needs in the community and are committed to sharing the data collected during the CHNA process to advance community solutions to this need. Additionally, the hospital partners with various organizations, including the YMCA and Youthworks and Village Family Service Center to improve childcare access and support. Childcare was not included in the Implementation Plan as other organizations, including those listed in the asset map, are better positioned or already meeting the need and have the expertise and competencies to effectively engage the issue.

Affordable Housing

Affordable housing is not included in the Implementation Plan as other organizations, including those listed in the asset map, are better positioned or already meeting the need and have the expertise and competencies to effectively engage the issue. Sanford Health partners with the Chamber of Commerce, YWCA and the Greater Fargo Moorhead Economic Development Corporation to coordinate efforts on economic development, workforce and housing needs. In addition, Sanford Fargo helps support organizations that can make a more direct impact on affordable housing, such as United Way. Information from the CHNA process will be shared with community partners as requested.

EVALUATION OF 2022-2024 CHNA

Goal 1: Access to Affordable Health Care

To increase primary care availability, the Family Medicine Residency program began outreach to Jefferson Elementary (Fargo Public Schools) in 2022 and later expanded to Youthworks. Jefferson Elementary had approximately 288 students, 231 of which were eligible to participate in the Free Lunch and Reduced-Price Lunch Programs, according to the National Center for Education Statistics. Youthworks is a 501c3 non-profit dedicated to providing youth and family services throughout North Dakota. This strategy will continue to help improve access for vulnerable and underserved residents of the Fargo/Moorhead metro area. In 2023, the Family Medicine Residency Program provided medical care to patients at the YWCA, New Life Center, Youthworks, and Jefferson School. In 2023, 170 patients were served in these locations

To increase access to primary care availability, Sanford Fargo increased home-based primary care access. Sanford Fargo/Moorhead metro area Internal Med and Family Medicine providers conducted about 500 home visits for 2023 visits.

Sanford Fargo opened the Horace Clinic on November 8, 2023. One physician and three advanced practice providers began providing care in Horace, with the ability to expand to seven clinicians in the future. From opening date through the end of 2023, clinicians conducted 615 visits. With Horace rapidly growing, this clinic will allow Sanford Fargo to continue to keep patients in toward the south end of the metro area and beyond connected to care.

All Sanford Fargo primary care providers are now able to provide virtual visits to patients which will help serve patients who may be experiencing barriers to care such as limited access to transportation. Sanford Fargo/Moorhead metro area providers conducted 1,015 video visits in primary care for 2023.

Goal 2: Mental Health / Behavioral Health and Substance Abuse

To increase access to mental health care, Sanford Fargo expanded its partnership with regional schools to provide student placement for Master's Level Therapists into the Internal Medicine department. In 2023, the Student Led Clinic provided clinical internships for 14 students completing their Master's Level Therapist programs in Social Work or Counseling. Of these, 9 were hired as master's level therapists following completion of program.

Coordination of care with primary care, emergency department, and hospital care coordination has resulted in the wait list for behavioral health and psychiatry appointments decreasing from 2,000 patients to 180 patients waiting to be scheduled in 2022. Furthermore, access to supportive behavioral health services and resources have improved in the hospital with the creation of a dedicated unit at the Sanford Medical Center Fargo for patients admitted for medical care who require additional behavioral health support.

In 2022, Sanford Fargo completed 10,083 completed video visits, 144 traditional telemedicine and 90 Verbal Visits. Sanford ambulance reported 1,200 patients receiving care related to alcohol use, 1,350 related to Behavioral Health/Psychiatric Episode. Sanford Fargo conducted a depression screening initiative throughout Sanford-Fargo clinics to support community mental health promotion. The promotion resulted in 40,000 depression screenings completed by Internal Medicine, Family Medicine, and OB/GYN providers and Residency Clinics in 2022. For all positive depression screenings, there was a documented follow-up plan within 14 days of the screening.

Sanford Fargo is actively recruiting a new provider to support Suboxone clinic for patients working on addiction and recovery to decrease substance abuse. Further support is provided through hospital peer coaching, with continued work with F5 and The Lotus Center throughout 2022 to provide peer coaching in the hospital. Sanford Fargo also engages in a partnership with Cass County's Withdrawal Management Unit to ensure coordinated utilization of medical and law enforcement support for individuals actively in detox.

Access to adult psychiatry services at Sanford Fargo continues to undergo improvement. Wait times to be seen for an adult psychiatry appointment improved from roughly 6 months at end of 2022 to about 10-12 weeks by the end of 2023. Sanford Fargo/Moorhead metro area providers completed about 7,927 behavioral health video visits in 2023.

About 92,865 patients seen in the Fargo region without a diagnosis of depression or bipolar disorder were screened for depression with documented follow up when appropriate though Sanford Health sites in 2023. Of 6593 eligible patients who met the criteria for depression remission tracking, 528 reached remission.

Sanford ambulance reported about 1,590 patients receiving care for a primary impression related to alcohol use, withdrawal, or alcohol overdose for the Fargo/Moorhead area, along with about 2,486 patients with a primary impression related to behavioral health/psychiatric episode, anxiety, mental disorder, suicidal ideation, or suicide attempt in 2023.

Sanford Fargo is continuing a partnership with Clay County Detox to ensure coordinated utilization of medical and law enforcement support for individuals actively in detox.

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

Sanford Medical Centers in Fargo

Sanford Medical Center Fargo is North Dakota's largest medical center and one of three Sanford medical center campuses in Fargo. It serves as a regional health care hub with 60 percent of patients coming from outside the metro area. It is North Dakota's only Level I Adult Trauma Center, North Dakota's only Level II Pediatric Trauma Center, designated as a comprehensive stroke center and has an AirMed transport service covering a three-state area.

The one-million-square-foot Sanford Medical Center Fargo, which opened in 2017, provides services including emergency/trauma, Family Birth Center, Children's Hospital, brain and spine surgery, cardiovascular surgery, interventional cardiology, general surgery and more. As of 2024, Sanford Medical Center Fargo has 292 licensed beds. Sanford Medical Center Fargo takes care to the next level, combining expertise, state-of-the-art technology and compassionate patient care. With technologically advanced ORs and growing digital pathology capabilities, surgeons can connect across campuses and consult with specialists across the nation. Patient rooms are designed around the patient for efficiency, safety and optimal care.

Sanford Medical Center Fargo is a major teaching hospital in partnership with multiple area universities and technical colleges to provider clinical training for nurses, allied health and non-health care fields. As well as partnership with the University of North Dakota School of Medicine and Health Sciences to provide clinical training for hundreds of medical students, medical residents and fellows. Sanford also offers many activities and programs to attract high school and younger students to the health care field through our Aspire programs. Community involvement has played an important role in Sanford Medical Center's mission for over 100 years.

Beyond providing medical care, Sanford supports and partners with local and national organizations that know and serve the communities across our region. Together, we work to provide health care awareness, education, prevention, fundraising and research for the health care issues that matter most to our communities. Sanford also supports the region's critical access hospitals so they can continue to provide vital services in their communities, ensuring that all people have access to high quality health care close to home. Sanford Health is the largest employer in the Fargo metro area with over 9,400 Sanford employees in Fargo-Moorhead-West Fargo, including over 500 board-certified physicians and more than 300 advanced practice providers (APPs). It is accredited by The Joint Commission.

Sanford Broadway Medical Center, located in downtown Fargo, is the oldest of three Sanford Health medical center campuses in Fargo with 357 licensed beds. It is the site of the original St. Luke's Hospital which was established in 1908.

The Broadway campus is undergoing extensive remodeling following the opening of Sanford Medical Center Fargo in July 2017 and the relocation of many services to that location. The longer-term mission for the Broadway facility is a greatly expanded Roger Maris Cancer Center which will anchor the Broadway campus and provide many new services and specialties. In addition to an extensive array of cancer services provided, including a bone marrow transplant program, and an inpatient oncology unit, Sanford Broadway is currently home to the Cardiovascular clinic, CV diagnostic services, inpatient hospice unit, inpatient ICU, Urgent Care, same day surgery, inpatient eating disorder unit and others. It is connected

to Sanford Broadway Clinic, which is the region's largest multi-specialty clinic offering over 50 medical specialties including numerous pediatric sub-specialties.

Sanford South University Medical Center has 115 licensed beds and serves as a hub for orthopedic surgery and rehabilitation with inpatient units for these services. South University also currently houses highly specialized services, including a behavioral health inpatient and partial hospitalization unit, ophthalmology, a center for cardiac and vascular screening, and a bio-skills and cadaver lab for medical residents.

Sanford Health is a major teaching hospital in partnership with the University of North Dakota School of Medicine and Health Sciences. They have collaborated to launch several new residency and fellowship programs in the last five years, including orthopedics, neurology, oncology, and family medicine.

Expanded Demographics

Clay County, Minnesota, with a population of 66,258, has a growth rate of 1.40% from April of 2020 to July of 2023. This rate exceeds the Minnesota state average of 0.5% growth for the same period. Cass County, North Dakota, has a population of 196,362, which grew 6.4% from 2020 to 2023 compared to 0.6% for the state of North Dakota. The age and race demographic for both counties and states are similar with minimal variance.

Median household income for Clay County is less than the Minnesota median income with a difference of almost \$9,500. However, the Cass County median household income is only \$710 less than the state average. The value of housing units in Clay County is less than both Minnesota and Cass County but more than North Dakota's average. Both counties have better percentages of those with access to a computer and broadband internet than North Dakota and are slightly less than Minnesota. With the workforce for Cass and Clay Counties, the percentage of the population in the civilian labor force is higher than in both states which they reside.

Fact	Clay County, MN	Minnesota	Cass County, ND	North Dakota
Population estimates, July 1, 2023, (V2023)	66,258	5,737,915	196,362	783,926
Population estimates base, April 1, 2020, (V2023)	65,316	5,706,804	184,517	779,079
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	1.40%	0.50%	6.40%	0.60%
Persons under 5 years, percent	6.60%	5.80%	6.20%	6.40%
Persons under 18 years, percent	24.60%	22.60%	21.90%	23.50%
Persons 65 years and over, percent	14.20%	17.40%	13.10%	16.70%
White alone, percent	88.30%	82.60%	85.90%	86.60%
Black or African American alone, percent	5.40%	7.60%	6.90%	3.60%
American Indian and Alaska Native alone, percent	1.90%	1.40%	1.60%	5.30%
Asian alone, percent	1.40%	5.50%	3.20%	1.70%
Native Hawaiian and Other Pacific Islander alone, percent	0.10%	0.10%	0.10%	0.10%
Two or More Races, percent	2.80%	2.80%	2.40%	2.60%

Hispanic or Latino, percent	5.10%	6.00%	3.20%	4.60%
White alone, not Hispanic or Latino, percent	84.30%	77.60%	83.20%	83.00%
Housing Units, July 1, 2023, (V2023)	27,851	2,575,411	90,898	380,841
Owner-occupied housing unit rate, 2018- 2022	66.10%	72.30%	52.30%	63.20%
Median value of owner-occupied housing units, 2018-2022	\$241,400	\$286,800	\$270,300	\$232,500
Median selected monthly owner costs - with a mortgage, 2018-2022	\$1,712	\$1,818	\$1,740	\$1,653
Median selected monthly owner costs - without a mortgage, 2018-2022	\$638	\$639	\$636	\$551
Median gross rent, 2018-2022	\$972	\$1,178	\$909	\$912
Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	8.20%	12.00%	9.10%	6.70%
Households with a computer, percent, 2018-2022	93.20%	94.50%	95.60%	93.20%
Households with a broadband Internet subscription, percent, 2018-2022	87.70%	89.70%	88.40%	85.80%
High school graduate or higher, percent of persons age 25 years+, 2018-2022	94.30%	93.70%	95.60%	93.50%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	36.70%	38.20%	42.60%	31.40%
With a disability, under age 65 years, percent, 2018-2022	8.70%	7.70%	6.90%	7.70%
Persons without health insurance, under age 65 years, percent	4.70%	5.30%	8.00%	7.50%
In civilian labor force, total, percent of population age 16 years+, 2018-2022	70.70%	68.60%	75.60%	68.00%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	67.90%	65.00%	72.00%	64.00%
Mean travel time to work (minutes), workers age 16 years+, 2018-2022	20	23.3	17.5	17.9
Median household income (in 2022 dollars), 2018-2022	\$75,006	\$84,313	\$73,249	\$73,959
Per capita income in past 12 months (in 2022 dollars), 2018-2022	\$36,586	\$44,947	\$43,474	\$40,748
Persons in poverty, percent	11.40%	9.60%	11.80%	11.50%
Total employer establishments, 2021	1,325	152,836	5,804	24,816
Total employment, 2021	16,849	2,627,416	106,024	332,684

<u>Community Health Needs Assessment Survey</u> 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.

lease enter yo	ur zip code:		-		
/hat is your cu	rrent age?				
	rate the qualit		ARE available in		tv2
Poor O	Fair O	Good O	Very Good O	Excellent O	Don't Knov O
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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
0	0	0	0	0	0

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				
O	O	O	O	O	O				
Why did y	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
0	0	0	0	0	0

Why did you give it that rating?

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

Poor O	Fair O	Good O	Very Good O	Excellent O	Don't Know O				
Why did y	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 y	ou give it that	rating?	0	0	0

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

Poor	Fair O	Good O	Very Good O	Excellent O	Don't Know O				
	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
0	0	0	0	0	0

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
0	0	0	0	0	0

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?

- O Yes Please answer next question
- O 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)

O Addiction Treatment

O Behavioral Health / Mental Health

- O Cancer Care
- O Chiropractic Care
- O Dental Care
- O Dermatology
- O Emergency / Trama
- O Eye Services (Ophthalmology, Optometry)
- O Family Medicine / Primary Care
- O General Surgery

- O Heart Care
- O Labor and Delivery
- O Long-Term Care / Nursing Homes
- O Orthopedics and Sports Medicine
- O OBGYN / Womens' Care
- O Pediatrics / Childrens' Care

O Walk-in / Urgent Care

O Other (please specify):

YOUR HEALTH CARE USAGE

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

O Yes O No

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

- O Within the past year O Within the past 2 years
- O Within the past 5 years

O More than 5 years ago O Never

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

O Cost/Inability to PayO No child careO COVID-19O Wait time for appointments are too longO Don't feel welcomed or valuedO Clinic hours are not convenientO Don't have insuranceO Fear / I do not like going to the doctorO My insurance is not acceptedO Nothing / I do not need to see a doctorO Lack of transportationO Don't have a primary care physicianO Distance / lack of local providersO Other (please specify):

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

Poor	Fair	Good	Very Good	Excellent	
O	O	O	O	O	

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?

O Yes O No O Unsure

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

- O Cost/Inability to Pay
- O COVID-19
- O Don't feel welcomed or valued
- O Don't have insurance
- O My insurance is not accepted
- O Lack of transportation
- O Distance / lack of local providers
- O Getting time off from work

- O No child care
- O Wait time for appointments are too long
- O Clinic hours are not convenient
- O Fear / I do not like going to the doctor
- O Nothing / I do not need to see a doctor
- O Don't have a primary care physician

O Other (please specify):

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?

O Yes O No

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

City _____

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

State ____

- O Referred by a physician
- O Better / higher quality of care O On vaca
- O Medical emergency
- O Needed a specialist / service was

not available locally

O Second opinion

O Other (please specify)

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

YOUR HEALTH INSURANCE

Do you currently have health insurance?

O Yes O No

Please indicate the source of your health insurance coverage.

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

DEMOGRAPHICS

What is your sex?

O Male O Female O Prefer not to answer

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

O Yes O No O 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?

O Yes O No

What is your race? (Select all that apply)

O American Indian or Alaska Native

O Caucasian or White

O Asian

O Native Hawaiian or Pacific Islander

O Black or African American

O Other (please specify)

How long have you been a US Citizen?

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

What language is spoken most frequently in your home?

What is your current marital status?

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

Which of the following best describes your current living situation?

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

What is your primary mode of daily transportation?

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

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

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

Your current employment status is best described as:

- O Employed (full-time) O Employed (part-time) O Self-employed
- O Furloughed

- O Not employed, looking for work
- O Not employed, not looking for work
- O Retired
- O Disabled or unable to work

What is your total household income from all sources?

O Less than \$20,000 0 \$20,000 - \$24,999 0 \$25,000 - \$29,999 0 \$30,000 - \$34,999 0 \$35,000 - \$49,999

0 \$50,000 - \$74,999 0 \$75,000 - \$99,999 0 \$100,000 - \$199,999 O \$200,000 or more

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