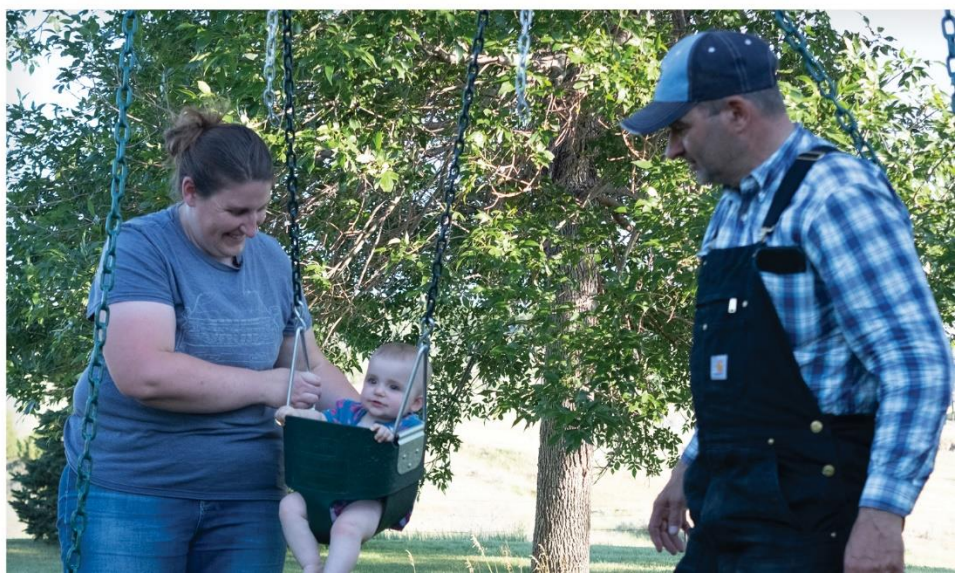




Community Health Needs Assessment

SANFORD SHELDON MEDICAL CENTER
2025-2027



Dear Community Members,

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

The report and implementation plan that follows will guide our work over the next three years and 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 collaborated 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 entire Sanford Sheldon team, thank you for your continued support of the Community Health Needs Assessment process.

Sincerely,

Rick Nordahl
President Chief Executive Officer
Sanford Sheldon Medical Center

BACKGROUND

Community Description

The Sanford Sheldon Medical Center is located in Sheldon, Iowa. Sheldon has a population of 5,128, and is the largest city in O'Brien County Iowa, which has a total population of 13,835. Sheldon has always been a hub of transportation, located at the crossroads of Highway 60 and 18. It is predominantly a farming community with other larger employers in finance, manufacturing, health care and education. Sheldon is home to Northwest Iowa Community College, and near Dordt College and Northwestern College.

The city has many parks with softball fields, basketball courts, picnic shelter, campsites, biking and walking trails and a skate park for skate boarding and rollerblading. Other recreational facilities include the Sheldon Golf and Country Club and the Sheldon Outdoor Family Aquatic Center.

The community as defined for purposes of the Community Health Needs Assessment includes O'Brien and Sioux Counties in Iowa and represent a majority of the volumes to the Sanford Sheldon Medical Center. No populations were intentionally excluded during the process of defining the community or within the CHNA process. Demographic detail for the counties is included in the appendix.

Partners

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

Sanford Health

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

System Partners

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

Sheldon 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:

- Stan Knobloch, Finance Director, Sanford Health
- Rick Nordahl, Chief Executive Officer and Administrator, Sanford Sheldon Medical Center
- Shawn Dreesen, Patient access Supervisor, Sanford Sheldon Medical Center
- Heidi Brown, Vice President, Citizens State Bank of Sheldon & Boyden, IA
- Tim Lammers, Senior Engineer, Demco
- Barry Whitsell, President and Chief Executive Officer, Village Northwest Unlimited
- Amber Frerk, Human Resources Advisor, Sanford Health
- Jessica Justi, Nursing and Clinical Services Director, Sanford Sheldon Medical Center
- Korrie Ewoldt BSN, RN, O'Brien County Public Health Nurse Administrator
- Cole Kantos, Clinic Director, Sanford Sheldon Clinic
- Christy Ward, Senior Strategic Planning Advisor, Sanford Health
- David Herbster, Lead Community Relations Specialist, Sanford Health
- Maddie Jerabek, Strategic Planning and Development Intern

Sanford Sheldon Description

Sanford Sheldon Medical Center is a 25-bed Critical Access Hospital providing inpatient, acute and long-term care. In addition, Sanford Sheldon offers a broad range of outpatient services, which includes Sanford Sheldon Clinic, Sanford Boyden Clinic, Sanford Sanborn Clinic, Sanford Hartley Clinic and Sanford Health Lake Park Clinic operating as medical center departments.

Sanford Sheldon provides healthcare services to over 10,000 residents of O'Brien County and portions of Sioux, Osceola, and Lyon counties in northwest Iowa. The nearest tertiary care centers are Mercy Medical in Sioux City, Iowa, and Sanford USD Medical Center, which is approximately 70 miles west.

Sanford Sheldon employs nine medical clinicians (physicians and APPs) and 317 employees. As a member of the Sanford Network, Sanford Sheldon offers consulting medical specialists who provide outreach services on a regular basis in areas including general and specialized surgery, cardiology, otolaryngology, urology, obstetrics/gynecology, orthopedics, vascular and podiatry.

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 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. The process 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 community representatives in this process. We worked closely with public health experts throughout the entire assessment process. Public comments and responses to the community health needs assessment and the implementation strategies are welcome on the Sanford website or contact can be made at <https://www.sanfordhealth.org/about/community-health-needs-assessment>. No community comments or questions regarding the previous CHNA have been made via the website link or email address.

CHNA Process

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



Limitations

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

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



CHILD GETS CRITICAL

Three-year-old Kiera and mom Corrie Ann stuff a lot into their regular visits to Sanford Children's Hospital.

"Today we are here for Kiera's doctor's appointments," Corrie Ann said. "We are so happy that we live here in South Dakota. That we are able to access this hospital." Coincidentally, Kiera has been coming to Sanford Children's known as the Castle of Care, since she was a baby. That's when a potty rash led to a biopsy.

"It came back as a very rare blood disease called Longman's cell histiocytosis," Corrie Ann said. Pediatric oncologist Ryan Wagner, M.D., says "It's where your immune system basically attacks some of your normal cells. So, we have to give chemotherapy to help get that under control."

Dr. Wagner says Kiera gets a week of chemo each month for the cancer-like blood disease. "It is unique that we're able to provide that care," Dr. Wagner said. "It requires specialty training like someone with an oncology background like we all have. So, it's great to be able to provide that for families so they don't have to leave the area."

It saves Kiera's family time and money, allowing them to focus on Kiera's health.

- Read the full article from Sanford Health News: 3-year-old with rare cancer-like disease gets care near home.
- 2ND ANNUAL SUMMIT
- The health of rural America is taking center stage thanks to the Summit on the Future of Rural Health Care hosted by Sanford Health in Sioux Falls, South Dakota.
- Industry leaders, health care advocates and national policymakers descended on the Sanford Center for

existing discussions surrounding workforce challenges and solutions at the second annual day-long summit.

Bill Gassen, president and CEO of Sanford Health, kicked off the event by making a pledge to people living in rural communities.

"We are going to guarantee that our ZIP codes will not limit the level of care that they receive," Gassen said. "We believe that the 20% of the United States that lives in rural America deserves the same access to world-class care."

A True magazine report adds 60% of health outcomes are determined by a person's ZIP code. Shortages of health care providers in rural areas can worsen rural health disparities, according to the National Rural Health Association.

"The key risk to us achieving those aspirational targets is the fact your only real role and role on our workforce," Gassen said regarding physicians, nursing staff and more. "Those incredible caregivers and those who support our caregivers. We need to make sure we not only retain them but we think about how do we continue that pipeline into the future."

Read the full article from Sanford Health News: Health care workers in rural America.



Following the completion of the 2022-2024 report, Sanford Health determined that the survey collection process was an area for improvement. As noted, the multi-step process minimizes limitations that exist among any one individual component. Efforts to improve representation across demographics is a focus for the current and future cycles.

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

Internal efforts were supported with a robust advertising campaign that included, among other efforts, a digital media program yielding 3.6 million impressions and a print ad campaign encouraging Native American communities to participate through placements in DeBahJiMon Magazine, Anishinaabeg Magazine and MHA Times (Mandan, Hidatsa, Arikara). Further support was given to collecting surveys at various community events. The goal of these efforts was to increase participation by those underrepresented the previous cycle, including lower income, minority, and medically underserved populations.

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

Community and Stakeholder Survey

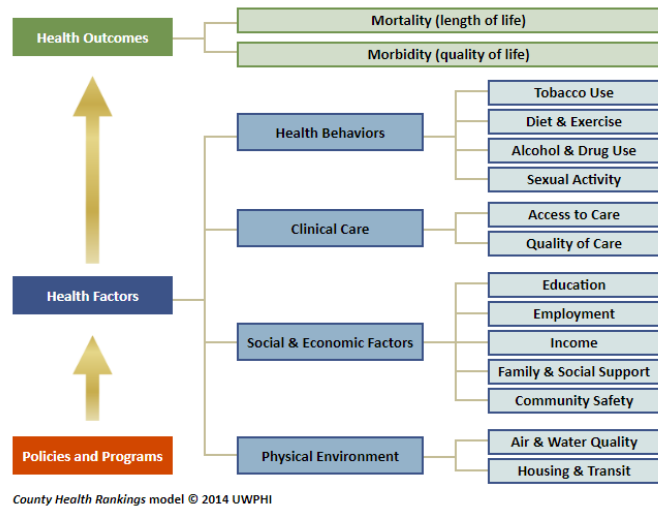
Community residents were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand health needs. Survey design is based on the UW Population Health Institute model. Each respondent was asked to rate community drivers from poor to excellent. Any response other than excellent was offered a follow-up opportunity to comment on the reason for their ranking. Respondents were also asked a series of questions specific to their health care access, health care quality, barriers to care, travel to care, and insurance. The survey was sent to a sample of the O'Brien and Sioux Counties, Iowa, 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 to 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 networks 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 148 respondents from the CHNA area completed the survey. Promotional 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. Sheldon is included with Bagley, MN; Canby, MN; Canton-Inwood, SD-IA; Chamberlain, SD; Clear Lake, SD; Hillsboro-Mayville, ND; Jackson, MN; Luverne, MN; Tracy, MN; Webster, SD; Westbrook, MN; and Wheaton, MN.
- To identify community health care needs, each community's score by question was compared to the average stratified composite of the comparative group. For example, if the composite stratified system-wide average score is 4 and an individual community's average response was 2.5, which would suggest an issue of concern and a potential community health care need to be highlighted in the summary findings.
- Upon determination of a potential strength or need, County Health Rankings (<https://www.countyhealthrankings.org/>) and responses from open-ended questions provided additional insights into the drivers of the respective needs.
- A similar methodology was also used to provide additional insights into findings from County Health Rankings data with relevant health needs highlighted in the survey findings.
- Health needs identified through either the survey or County Health Rankings data but not both were also included in the findings.
- The Center for Social Research validates the findings of the primary research by engaging at least two internal reviewers. Each reviewer has their own technique and strengths to review the findings; however, they check for accuracy in the data by reviewing the code/syntax, the output, the correct representation of the data in the report, verbiage, consistency, context, and overall readability. Both reviewers also supported previous CHNA reports.

Community Asset Mapping

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

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

Community Stakeholder Meetings

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

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

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

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

COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

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

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 Sheldon market area is defined as O'Brien and Sioux counties in Iowa. The community health summary and identified health needs presented below were identified through a mix of primary and secondary research. Priority was given to the key topics rated lowest by respondents of the community survey, with further analysis provided through secondary research using the 2023 County Health Rankings (CHR) data. Areas of focus that may not have been raised by the community survey but shown to be an area of focus through secondary research, are also included. To further assist in identifying community health needs, survey and CHR data were collected for similar-sized market areas served by Sanford Health. Similar-sized market areas identified for and included in this analysis include Bagley, MN; Canby, MN; Canton-Inwood, SD-IA; Chamberlain, SD; Clear Lake, SD; Hillsboro-Mayville, ND; Jackson, MN; Luverne, MN; Sheldon, IA; Tracy, MN; Webster, SD; Westbrook, MN; and Wheaton, MN. For each measure, averages were calculated for each of the market areas and for the group as a whole for comparison purposes. Context and research provided to explain the importance of a particular health topic were obtained from CHR unless otherwise noted. A total of 148 respondents from the Sheldon 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 Sheldon area regarding the following community health issues were positive (average score of 3.00 or higher):

- Community safety (average score=4.03)
- Environmental health (average score=3.88)
- Access to healthy foods (average score=3.78)
- Access to exercise opportunities (average score=3.76)

- Health care quality (average score=3.73)
- Employment and economic opportunities (average score=3.53)
- Quality early child care (average score=3.53)
- Long-term care, nursing homes, and senior housing quality (average score=3.33)

With the exception of environmental health, which is similar to the comparison group average, scores in the Sheldon area were higher than the comparison group average for each of these issues. In addition, average scores for quality early child care and access to healthy foods in the Sheldon area were the highest when compared to similar-sized markets served by Sanford Health.

When asked about their personal health, survey respondents in the Sheldon area rated their current health and wellness as good (average score=3.35) and their current ability to access health care services as very good (average score=4.01); both scores are higher than the comparison group average.

CHR data indicate that Sioux County ranks among the healthiest counties in Iowa and O'Brien County is more similar to the average county in the state.

The following areas of concern were identified for further discussion, in no particular order.

Top Health Needs

Access to Affordable Health Care

Cost and the ability to afford needed health care was identified as the top health care concern that survey respondents and their families in the Sheldon area face on a regular basis. It was also the second leading community health care issue, behind general access issues. Concerns around the cost of health care exist despite a positive perception of employment and economic opportunities (average score=3.53) by survey respondents in the Sheldon area. In addition, CHR data indicate that the Sheldon area has better-than-average rates of uninsured individuals (6%) and child poverty (10%), and a higher-than-average median household income (\$73,621) when compared to similar-sized communities served by Sanford Health.

Group members discussed different topics surrounding access to affordable health care and the effects on the community and delivery of care. With affordable health care there were discussions about the need for better education on programs offered in the community for financial assistance, along with health insurance literacy. Sanford Sheldon Medical Center, along with community stakeholders, decided to include this as a priority area in the next three-year implementation plan.

Local Asset Mapping	
<p>Resources for a skilled labor workforce:</p> <ul style="list-style-type: none"> • Sheldon Economic Develop., 416 9th St., Sheldon • Hartley Economic Development Committee, 11 S. Central Ave., Hartley • NW Iowa Planning & Development Commission (serves O'Brien Co.), 217 W. 5th St., Spencer • Aventure Staffing, 327 9th St., Sheldon 	<p>Major Employers:</p> <ul style="list-style-type: none"> • Aventure Staffing, 327 9th St., Sheldon • Sekisui Aerospace, 403 14th St. SE, Orange City • Casey's General Stores, 504 2nd Ave. & 1401 Park St., Sheldon • Dollar General, 101 N. 4th Ave., Sheldon • Hope Haven, Inc., 2400 Park St Ste A, Sheldon

<ul style="list-style-type: none"> • Hope Haven, Inc., 2400 Park St Ste A, Sheldon (employment services) • Northwest Iowa Community College (high school equivalency diploma), 603 W. Park St., Sheldon • Iowa State University extension & outreach – O’Brien County, 340 2nd St. SE, Primghar 	<ul style="list-style-type: none"> • Interstates – 712-722-1662 • Maintainer Corp., 1701 2nd Ave., Sheldon • Rosenboom Machine & Tool, 1530 Western Ave., Sheldon • Sanford Health, 118 N. 7th Ave., Sheldon
<p>Resources for household budgeting & money management:</p> <ul style="list-style-type: none"> • O’Brien County Extension classes, 340 2nd St. SE, Primghar • O’Brien County Outreach (budget counseling), 140 2nd St SE, Primghar • Sheldon Community Education classes, 1700 E. 4th St., Sheldon • Hartley/Sanborn Community Education, 240 1st St. SE, Hartley • Northwest Iowa Community College, 603 W. Park St., Sheldon • NWICC Lifelong Learning & Recreation Center, 600 College Dr., Sheldon • Northwestern Bank, 934 3rd Ave., Sheldon • Iowa State Bank, 627 2nd Ave., Sheldon • Citizens State Bank, 808 3rd Ave., Sheldon • Peoples Bank, 2400 Park St., Sheldon • Savings Bank, 80 S. Central Ave, Hartley • United Community Bank, 117 S. Central Ave, Hartley • Citizens State Bank, 817 Main St., Boyden • Sanborn Savings Bank, 219 Main St, Sanborn • Iowa State Bank, 203 W. 7th St. #1094, Sanborn 	<p>Poverty Resources:</p> <ul style="list-style-type: none"> • O’Brien County Outreach (energy assistance, temporary shelter, weatherization, emergency vouchers, food bank, emergency food pantry, WIC program), 140 2nd St. SE, Primghar • SNAP – O’Brien County Dept. of Human Services, 160 2nd St. SE, Primghar • Upper Des Moines Opportunity Food Pantry – 712-957-1023 • Living Water Community Church Food Pantry, 610 2nd Ave., Sheldon • Sheldon United Methodist Church Food Pantry & Summer Lunch Program for Kids, 506 8th St., Sheldon • Bread of Life, Crossroads Community Church, 730 Western Ave., Sheldon • Love, Inc. (offers vouchers for groceries & meat), 611 Park Row Ave., Sheldon • 1st Presbyterian Food Pantry, 103 W. Groesbeck St., Paullina • Back Pack Program – East Elementary/Middle School, 501 Normal College Ave., Sheldon • Village Treasure Chest thrift store, US 18, Sheldon • Vintage Therapy Consignment, 2203 Park St, Sheldon
<p>Vision Insurance:</p> <ul style="list-style-type: none"> • Farm Bureau, 816 4th Ave., Sheldon • State Farm, 101 N Runger Ave Ste D, Sheldon • Prins Insurance, 809 3rd Ave., Sheldon • Perspective Insurance, 2534 Park St., Sheldon 	<p>Affordable Health Insurance:</p> <ul style="list-style-type: none"> • Farm Bureau, 816 4th Ave., Sheldon • State Farm, 101 N Runger Ave Ste D, Sheldon • Prins Insurance, 809 3rd Ave., Sheldon • Perspective Insurance, 2534 Park St., Sheldon
<p>Prescription Assistance programs:</p> <ul style="list-style-type: none"> • O’Brien County Human Services (Iowa Health & Wellness Plan), 160 2nd St. SE, Primghar • Iowa Drug Card – iowadrugcard.com • CancerCare co-payment assistance, 800-813-4673 • Freedrugcard.us • Rxfreecard.com • Medsavecard.com • rxgo.com 	<p>Prescription Assistance Programs Cont.:</p> <ul style="list-style-type: none"> • RXhope.com • Partnership for Prescription Assistance – pparx.org • Benefitscheckup.org • RxAssist – rxassist.org • RxOutreach – rxoutreach.org • Together RX Access Program – togetherrxaccess.com • Glaxo Smith Kline – gskforyou.com

<ul style="list-style-type: none"> • Needymeds.org • americasdrugcard.org • mygooddays.org • NORD Patient Assistance Program, rarediseases.org • Patient Access Network Foundation, panfoundation.org • Pfizer RC Pathways, pfizerRXpathways.com 	<ul style="list-style-type: none"> • AARP Prescription Discount Program – aarp-pharmacy.com • Parent Cue – theparentcue.org <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>
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Access to Medical Care and Health Care Providers

Survey respondents in the Sheldon area rated their own ability to access health care as very good (average score=4.01), and higher than the comparison group average. However, when survey respondents in the Sheldon market area were asked about the most important health care issues impacting their community, having access to medical care and health care providers was the leading issue (more so than cost).

Most survey respondents in the Sheldon area have a primary care provider (89%), have been in for a routine checkup or screening in the past year (83%), and have received necessary health care for themselves and their family in the past year (83%). In addition, 50 percent of respondents have traveled for care in the past three years, a rate which is the second lowest percentage when compared to similar-sized markets served by Sanford Health. For those respondents who have traveled for care, most respondents indicated the travel was due to needing specialty care that was not available locally (76%), followed by 45 percent who were referred by a physician and 20 percent who traveled for better or higher quality care.

CHR data indicate that when compared to similar-sized markets, the Sheldon area has a similar-to-average ratio of population to providers, with 1,317 people for every one primary care physician and 1,848 people per dentist. That said, the Sheldon area has a higher/worse-than-average ratio of people per mental health care provider (891 people for every provider).

Less than half (43%) of survey respondents in the Sheldon area indicated that there are health care services they would like to see offered or improved in their community. When these respondents were asked which health care services they would like to see offered or improved, the largest proportion said behavioral and mental health services (43%), followed by dermatology (38%), walk-in/urgent care (34%), orthopedics and sports medicine (33%), dental care (31%), cancer care (30%), addiction treatment (26%), long-term care and nursing homes (25%), and OBGYN/women’s care (20%).

Access to medical care and health care providers was an important issue for group participants and survey respondents. The need for more specialty care and providers who accept Medicaid, especially dental care, was agreed upon by community members present at the stakeholder meeting. Sanford Sheldon Medical Center decided to continue the current efforts towards promoting access to health care providers by increasing community awareness of services available including educational events, healthcare screenings and vaccinations.

Local Asset Mapping	
<p>Health Care resources:</p> <ul style="list-style-type: none"> • Sanford Clinic Sheldon, 800 Oak St., Sheldon • Sanford Boyden Clinic, 3971 320th St., Boyden • Sanford Hartley Clinic, 512 3rd St. NE, Hartley • Sanford Sanborn Clinic, 321 Main St., Sanborn • Mercy Family Care Hartley, 231 N. 8th Ave. W., Hartley • Align Chiropractic, 109 Main St, Sanborn • Sanborn Chiropractic Clinic, 220 Main St, Sanborn • Choice Chiropractic, 712 4th Ave., Sheldon • Sheldon Family Chiropractic, 910 Park St., Sheldon • Schierholz Chiropractic, 128 S. Central Ave., Hartley • Hartley Chiropractic, 200 S. Central Ave., Hartley • O'Brien County Public Health, 155 S. Hayes, Primghar 	<p>Mental Health resources:</p> <ul style="list-style-type: none"> • Sanford Clinic Sheldon, 800 Oak St., Sheldon • Sanford Boyden Clinic, 3971 320th St., Boyden • Sanford Hartley Clinic, 512 3rd St. NE, Hartley • Mercy Family Care Hartley, 231 N. 8th Ave. W., Hartley • Sanford Sanborn Clinic, 321 Main St., Sanborn • Hope Haven, Inc., 2400 Park St Ste A, Sheldon • Creative Living Center, 1022 3rd Ave., Sheldon • Plains Area Mental Health Center, 180 10th St SE, Le Mars • Seasons Center for Behavioral Health, 201 E. 11th St., Spencer
<p>Substance Abuse resources:</p> <ul style="list-style-type: none"> • AA, meets at 610 2nd Ave, Sheldon • NA, meets at 611 7th St, Sheldon • NA, meets at 361 N. 8th Ave. W., Hartley • Seasons Center for Behavioral Health, 118 N 2nd Ave, Sheldon • Compass Point, 1104 Broadway St #1713, Emmetsburg 	<p>In-Home Services:</p> <ul style="list-style-type: none"> • Sanford Home Care & Hospice, 118 N. 7th Ave., Sheldon • Stay in Home Health Care (serves NW Iowa) – stayinhomecare.com • O'Brien County Outreach (chore service for age 60+), 140 2nd St. SE, Primghar, IA <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

Healthy Living

Survey respondents in the Sheldon area rated their own personal health and wellness as good (average score=3.35) and higher than the comparison group average. However, when survey respondents were asked about the biggest health concerns for themselves and their family (concerns they face on a regular basis), chronic conditions were the second leading concern, after cost.

CHR data indicate that when compared to similar-sized markets served by Sanford Health, the Sheldon area has similar-to-average rates of diabetes (8%), obesity (35%), and excessive drinking (23%); and better-than-average rates of adult smokers (17%), alcohol-related driving deaths (13%), and access to exercise opportunities (80%).

Community members and Sanford Sheldon representatives considered the different issues that arise with healthy living. The primary issue the group discussed was around healthy eating, especially eating healthy affordably, as well as chronic health issues. After these discussions Sanford Sheldon decided not to adopt health living as a CHNA priority as specific

patient needs can be addressed by use of the health coach, diabetic education and/or dietician.

Local Asset Mapping	
<p>Chronic Disease resources:</p> <ul style="list-style-type: none"> · Sanford's Better Choices Better Health Program, c/o 800 Oak St., Sheldon · Sanford Clinic Sheldon, 800 Oak St., Sheldon · Sanford Boyden Clinic, 3971 320th St., Boyden · Sanford Hartley Clinic, 512 3rd St. NE, Hartley · Sanford Sanborn Clinic, 321 Main St., Sanborn · Mercy Medical Clinic, 231 N. 8th Ave. W., Hartley · Arthritis Foundation – arthritis.org · American Heart Association – Heart.org 	<p>Healthy Eating resources:</p> <ul style="list-style-type: none"> · Farmers Market, 1200 S. 2nd Ave., Sheldon · Getting's Garden, 2861 Pierce Ave., Sanborn · Cottonwood Farm CSA, 3143 Nest Ave., Sheldon · Hy-Vee, 1989 Park St., Sheldon · Fareway Grocery, 2603 Park St., Sheldon · La Mexicana, 926 – 3rd Ave., Sheldon · Fiesta Foods, 130 – 3rd St. NE · Sanborn Foods, 302 Main, Sanborn
<p>Obesity resources:</p> <ul style="list-style-type: none"> · Profile Plan Sheldon, 118 N 7th Ave, Sheldon · Hy-Vee Dietician, 1989 Park St, Sheldon · Sheldon Parks Dept. activities, 416 9th St., Sheldon · Sanborn Parks Dept. activities, 102 Main St, Sanborn · Hartley Parks Dept. activities, 11 S. Central Ave, Hartley · Courtyard Fitness, 315 N 18th Ave., Sheldon · Hills Gym, 220 Marietta Rd, Sheldon · Hartley Health & Fitness, 155 S. Central Ave, Hartley · Complete 180 Fitness, 207 Main St, Sanborn · NWICC Lifelong Learning & Recreation Center, 600 College Dr., Sheldon · Sheldon Aquatic Center, 415 19th Ave., Sheldon 	<p>Obesity Resources Cont:</p> <ul style="list-style-type: none"> · Hartley Community Center, 820 2nd St NE · Hartley Swimming Pool, 361 S. Central, Hartley · Aquatic Center, 510 Main St., Sanborn · Sheldon Golf Course, 3040 Nest Ave., Sheldon · Sanborn Golf Course, 901 Sanborn St., Sanborn · Meadowbrook Golf & Country Club, 3558 Vine Ave, Hartley · Otter Valley Golf Course, 2669 Kennedy Ave, George · Disc Golf, 200 Marietta Rd., Sheldon · Disc Golf, Centennial Park, Boyden · Disc Golf, Miller Park, Sanborn · Bowling - Bowl Mor, 203 Main, Sanborn
<p>Physical Activity resources:</p> <ul style="list-style-type: none"> · Courtyard Fitness, 315 N 18th Ave, Sheldon · Hills Gym, 220 Marietta Rd, Sheldon · Hartley Health & Fitness, 155 S. Central, Hartley · Complete 180 Fitness, 207 Main St, Sanborn · NWICC Lifelong Learning & Recreation Center, 600 College Dr., Sheldon · Sheldon Public School phy ed program, 310 23rd Ave., Sheldon · St. Patrick's Catholic School phy ed program, 1020 4th Ave., Sheldon · Hartley/Sanborn school phy ed activities, 300 N. 8th Ave. W., Hartley · Boyden school phy ed activities, 801 1st St., Hull 	<p>Physical Activity Resources Cont.:</p> <ul style="list-style-type: none"> · Hartley Parks Dept. activities, 11 S. Central Ave, Hartley · Hartley Swimming Pool, 361 S. Central, Hartley · Aquatic Center, 510 Main St., Sanborn · Sheldon Golf Course, 3040 Nest Ave., Sheldon · Sanborn Golf Course, 901 Sanborn St., Sanborn · Meadowbrook Golf & Country Club, 3558 Vine Ave, Hartley · Otter Valley Golf Course, 2669 Kennedy Ave, George · Disc Golf, 200 Marietta Rd., Sheldon · Disc Golf, Centennial Park, Boyden

<ul style="list-style-type: none"> • Sheldon Parks Dept. activities, 416 9th St., Sheldon • Sheldon Aquatic Center, 415 19th Ave., Sheldon • Sanborn Parks Dept. activities, 102 Main St, Sanborn 	<ul style="list-style-type: none"> • Disc Golf, Miller Park, Sanborn • Bowling - Bowl Mor, 203 Main, Sanborn <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>
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Public Transportation

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

Respondents in the Sheldon area rated community access to daily transportation as less than good (average score=2.89). When asked to explain why they rated community access to daily transportation the way they did, most respondents noted a complete lack of any public transportation options in their community.

The availability of public transportation in the Sheldon community is an issue covered in discussions by the group. While community members and representatives of Sanford Sheldon agree public transportation is a barrier to care, there are already local organizations working to resolve this issue. Sanford Sheldon will continue to promote access to resources for transportation in the community, but will not make this issue a priority need in the implementation plan for 2025-2027.

Local Asset Mapping
<p>Transportation Resources:</p> <ul style="list-style-type: none"> • Sheldon Public Works Department, community building, 416 9th St, Sheldon • RIDES/Regional Transit Authority <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>

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 Sheldon area rated the availability of affordable housing in their community as less than good (average score=2.80) 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 highlighted a lack of housing options (to purchase or rent) that are affordable for those with lower- and fixed-incomes.

CHR data indicate that 9 percent of households in the Sheldon area have severe housing problems (i.e., overcrowded, high housing costs, lack of kitchen facilities, or lack of plumbing facilities) and 7 percent of households spend at least 50 percent of their household income on housing costs – both rates are similar to the comparison group average.

Affordable housing was an issue identified in the community not only by survey respondents but in stakeholder meeting discussions as well. Sanford Sheldon ultimately decided to not prioritize this issue, due to other organizations in the community working toward improvements. The Sanford Sheldon team will promote the resources available in the community for affordable housing and organizations working on affordable housing.

Local Asset Mapping	
<p>Housing resources:</p> <ul style="list-style-type: none"> • Northwest Realty, 934 3rd Ave, Sheldon • Action Real Estate, 910 Park St., Sheldon • Vander Werff & Associates, 215 Main St., Sanborn • Elgersma Agency, 313 Main St., Sanborn • ISB Insurance Inc, 203 W. 7th St., Sanborn • Klaasen Realty, 43 1st St. SE, Hartley • Treimer's Realty, 91 3rd St NW, Hartley 	<p>Low Income Housing resources:</p> <ul style="list-style-type: none"> • Prairie Ridge Apts., 1011 16th St., Sheldon • Sheldon Independent Living, 524 Oak St., Sheldon • East Oak Apts., 1651 Oak St., Sheldon • Autumn Park Apts., 131 Washington Ave. #101, Sheldon • Maple Grove Apts., 711 1st St. NE., Hartley
<p>Resources for a skilled labor workforce:</p> <ul style="list-style-type: none"> • Sheldon Chamber and Development, 416 9th St., Sheldon • Hartley Economic Development Committee, 11 S. Central Ave., Hartley • NW Iowa Planning & Development Commission (serves O'Brien Co.), 217 W. 5th St., Spencer • Aventure Staffing, 327 9th St., Sheldon • Hope Haven, Inc., 2400 Park St Ste A, Sheldon (employment services) • Northwest Iowa Community College (high school equivalency diploma), 603 W. Park St., Sheldon • Iowa State University extension & outreach – O'Brien County, 340 2nd St. SE, Primghar 	<p>Major Employers:</p> <ul style="list-style-type: none"> • Aventure Staffing, 327 9th St., Sheldon • Sekisui Aerospace, 403 14th St. SE, Orange City • Casey's General Stores, 504 2nd Ave. & 1401 Park St., Sheldon • Dollar General, 101 N. 4th Ave., Sheldon • Hope Haven, Inc., 2400 Park St Ste A, Sheldon • Interstates – 712-722-1662 • Maintainer Corp., 1701 2nd Ave., Sheldon • Rosenboom Machine & Tool, 1530 Western Ave., Sheldon • Sanford Health, 118 N. 7th Ave., Sheldon
<p>Resources for household budgeting & money management:</p> <ul style="list-style-type: none"> • O'Brien County Extension classes, 340 2nd St. SE, Primghar • O'Brien County Outreach (budget counseling), 140 2nd Street SE, Primghar • Sheldon Community Education classes, 1700 E. 4th St., Sheldon • Hartley/Sanborn Community Education, 240 1st St. SE, Hartley • Northwest Iowa Community College, 603 W. Park St., Sheldon • Northwestern Bank, 934 3rd Ave., Sheldon • Iowa State Bank, 627 2nd Ave., Sheldon • Citizens State Bank, 808 3rd Ave., Sheldon • Peoples Bank, 2400 Park St., Sheldon • Savings Bank, 80 S. Central, Hartley • United Community Bank, 117 S. Central Ave, Hartley • Citizens State Bank, 817 Main St., Boyden 	<p>Poverty Resources:</p> <ul style="list-style-type: none"> • O'Brien County Outreach (energy assistance, temporary shelter, weatherization, emergency vouchers, food bank, emergency food pantry, WIC program), 140 2nd St. SE, Primghar • SNAP – O'Brien County Dept. of Human Services, 160 2nd St. SE, Primghar • Upper Des Moines Opportunity Food Pantry – 712-957-1023 • Living Water Community Church Food Pantry, 610 2nd Ave., Sheldon • Sheldon United Methodist Church Food Pantry & Summer Lunch Program for Kids, 506 8th St., Sheldon • Bread of Life, Crossroads Community Church, 730 Western Ave., Sheldon • Love, Inc. (offers vouchers for groceries & meat), 611 Park Row Ave., Sheldon • 1st Presbyterian Food Pantry, 103 W. Groesbeck St., Paullina

<ul style="list-style-type: none"> • Sanborn Savings Bank, 219 Main, Sanborn • Iowa State Bank, 203 W. 7th St. #1094, Sanborn 	<ul style="list-style-type: none"> • Back Pack Program – East Elementary/Middle School, 501 Normal College Ave., Sheldon • Village Treasure Chest thrift store, US 18, Sheldon • Vintage Therapy Consignment, 2203 Park St, Sheldon <p>For Additional Resources Reference: https://sanford.findhelp.com/</p>
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Sanford Areas of Focus

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

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

1. Access to Affordable Health Care
2. Access to Health Care Providers

Implementation Plan for Priority Needs

Priority 1: Access to Affordable Health Care

Current Activities

Sanford Sheldon continues to offer Heart/Vascular screenings to enhance preventative care and reduce out of pocket costs. In addition, direct access laboratory services is an option for patients that have a high insurance deductible and have concern with the costs.

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see increased numbers of residents receiving recommended preventive screenings and recommended vaccinations.

Goal 1: Promote importance of getting recommended screenings and vaccinations

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Increase participation in screenings	# screenings conducted	Clinical Care Staff	Rick Nordahl Shawn Dreesen	Local public health
Increase rates of recommended vaccinations	# vaccines administered	Clinical Care Staff	Rick Nordahl Shawn Dreesen	Local public health

Goal 2: Keep more patients in the area versus traveling to receive care

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Reduce # of patients leaving the community for services provided within Sanford Sheldon	Volumes	Clinical Care Staff, Marketing	Rick Nordahl Shawn Dreesen	

Priority 2: Access to medical care and health care providers

Current Activities

Sanford Sheldon continues to work on educating the community on our full scope of locally available services. Recruitment of open health care provider positions is an ongoing effort.

Projected Impact

Upon completion of the three-year Implementation Plan, the community would see increased awareness of locally available services and a reduction in people traveling for care.

Goal 1: Market and promotional activities to increase awareness of Sanford Sheldon services.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Utilize local organizations and local news media for low cost community awareness.		Marketing, IT	Rick Nordahl Shawn Dreesen	Community partners
Social media posts and information	# posts	Marketing, IT	Rick Nordahl Shawn Dreesen	

Goal 2: Ensure appointment availability to healthcare providers.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Recruitment of providers so adequate appointments are available.	# providers recruited	Leadership, Marketing, Physician Recruitment Team	Rick Nordahl Shawn Dreesen	

Needs Not Addressed

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

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

EVALUATION OF 2022-2024 CHNA

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

Sanford Health continues to integrate the CHNA report, supporting data, and Implementation Plans across the organization, including in the annual strategic planning

program and operations. The Sanford Health Board of Trustees incorporated population health as an aspirational target metric necessary to become the “premier rural health system” in the country. The population health target aligns the work conducted through the CHNA with the overall evaluation of Sanford’s success.

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

In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health related-social care needs. The system is available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to patients and is available on Sanfordhealth.org and MyChart. Findhelp generated nearly 28,000 internal and external searches from within CHNA-defined communities on CHNA topics in 2022 and over 19,000 in 2023. The Sheldon CHNA area had 938 searches in 2022 and 2023.

Access to Affordable Health Care

Sanford set two goals in an effort to increase access to affordable health care. The first is to educate the community on the full scope of services available locally. The second goal is to offer community educational and screening events to enhance preventative care and reduce out-of-pocket costs.

Community education has improved via various methods of increased community exposure. News media interviews and educational stories have increased. In 2023 stories were completed on educational topics such as colon cancer, stroke care, heart health, farm safety, and heat safety. Press releases were also distributed for employee awards received in 2023. The recognition highlights medical services that are provided locally. Sanford Health launched two campaigns focusing on primary care in calendar year 2022. “Care close to home” advertisements were created for all Sanford clinic locations and utilized within the Sheldon market. The Boyden, Sheldon, Sanborn, Hartley and Lake Park clinics listed their specific hours and available providers within the campaign. “Here For All. Here For Good” was the second campaign that was digitally launched within the Sheldon market.

A listing of services flyer was created locally and distributed at speaker’s bureau events which lists all services provided at Sanford Sheldon including our outlying medical clinics in Boyden, Hartley, Sanborn and Lake Park. Throughout the year leaders of the organization speak at different groups such as Sheldon Noon Kiwanis and Prairie Queen Kiwanis.

Promotion of the Sanford Sheldon facility at community events was also successful in 2023 including local community events such as Ladies Day Out, Ladies Shopping night at Bomgaars, community parades, RiseFest music festival. The staff also participated in high school career tours which consist of educating High School Junior students on the many different types of careers within healthcare, which increases the awareness of the services we offer. Due to covid positivity rates Sanford Sheldon did not hold any in house community education events in 2022.

The organization assisted O’Brien County Public Health with vaccine assistance. In calendar year 2022 approximately 130 individuals received a vaccine at events. Additionally, Sanford Sheldon staff traveled to Sioux City IA to assist with National Guard covid testing for approximately 110 troops that were being deployed.

Heart, vascular screenings were held in 2022 and 2023 as well as flu shot clinics promoting improving health for the communities we serve.

Direct access labs was also a new service that is provided to patients in Sheldon. The patient can have specific labs performed without a specific physician order.

Access to Health Care Providers

Additional outreach services began in 2023 with Dr. Dayama and Dr. Elshami.

With the retirement of clinic provider in our outlying clinics we were able to recruit providers for our Hartley and Lake Park outreach clinics to continue to provide care in those communities.

In July 2023 our clinic expansion was completed. This provides Sanford Sheldon clinic an additional 4,000 square feet of space for providers to see patients. This also provides one convenient entrance for patients for clinic appointments as well as outpatient services.

In 2023, Sanford Sheldon expanded mental health services with the addition of Darienne Driesen, Integrated Health Therapist. Driesen brings the total number of mental health providers available at Sanford Sheldon to six. Cynthia Kantos joins Jason Chester, LISW and Stacey Jumbeck PMHNP, APRN, CNP as in house providers. Matthew Eggers, DO and Mark Daniels, PhD provide mental health services via telemed.

In 2023 Sanford Sheldon began participating in an O'Brien County Mental Health group meeting with individuals from MercyOne, Elderbridge, O'Brien County Public Health, Upper Des Moines Opportunity, Veterans Affairs, Seasons Center, Creative Living, Rosecrance, Creative Living and Plains. This group works together to help tell the story of the importance of mental health resources available in the county plus those that are needed.

As noted in the previous goal, Sanford Health launched two campaigns focusing on primary care in the calendar year 2022. "Care close to home" advertisements were created for all Sanford clinic locations and utilized within the Sheldon market. The Boyden, Sheldon, Sanborn, Hartley and Lake Park clinics listed their specific hours and available providers within the campaign. "Here For All. Here For Good" was the second campaign that was digitally launched within the Sheldon market.

CONTACT INFORMATION

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

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

APPROVAL

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

APPENDIX

Expanded Demographics¹

The estimated 2023 combined population by the U. S. Census Bureau for Sioux and O'Brien Counties is 50,258. This represents a 0.4% increase from 2020. The growth is a result of Sioux County, which increased by 1.1% while O'Brien declined by 1.2% during the period. For comparison, the state of Iowa increased 0.5% during the same period. Both counties have relatively similar demographics, but O'Brien has a higher share of the population that is over the age of 65. Sioux County has a higher share of the population that is Hispanic or Latino.

Sioux and O'Brien vary in economic metrics with Sioux having a higher median value of owner-occupied housing, which translates into higher mortgage and rent costs. Similarly, Sioux County has higher median household income rates.

Fact	Sioux County, IA	O'Brien County, IA	Iowa
Population estimates, July 1, 2023, (V2023)	36,246	14,012	3,207,004
Population estimates base, April 1, 2020, (V2023)	35,863	14,181	3,190,427
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	1.10%	-1.20%	0.50%
Persons under 5 years, percent	7.00%	6.40%	5.80%
Persons under 18 years, percent	26.60%	24.00%	22.80%
Persons 65 years and over, percent	16.90%	22.10%	18.60%
White alone, percent	96.60%	95.70%	89.60%
Black or African American alone, percent	0.90%	1.60%	4.50%
American Indian and Alaska Native alone, percent	0.80%	0.50%	0.60%
Asian alone, percent	0.90%	0.80%	2.70%
Native Hawaiian and Other Pacific Islander alone, percent	0.10%	0.10%	0.30%
Two or More Races, percent	0.80%	1.30%	2.20%
Hispanic or Latino, percent	12.00%	6.50%	7.40%
White alone, not Hispanic or Latino, percent	85.70%	90.20%	83.10%
Housing Units, July 1, 2023, (V2023)	13,385	6,580	1,449,340
Owner-occupied housing unit rate, 2018-2022	79.20%	76.00%	71.50%
Median value of owner-occupied housing units, 2018-2022	\$220,700	\$141,900	\$181,600
Median selected monthly owner costs -with a mortgage, 2018-2022	\$1,455	\$1,265	\$1,444
Median selected monthly owner costs -without a mortgage, 2018-2022	\$580	\$474	\$572

¹ <https://www.census.gov/quickfacts>

Median gross rent, 2018-2022	\$795	\$691	\$914
Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	8.90%	5.70%	8.70%
Households with a computer, percent, 2018-2022	94.10%	92.00%	92.70%
Households with a broadband Internet subscription, percent, 2018-2022	90.70%	89.10%	86.30%
High school graduate or higher, percent of persons age 25 years+, 2018-2022	91.60%	90.70%	93.00%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	31.30%	21.60%	30.30%
With a disability, under age 65 years, percent, 2018-2022	5.40%	11.50%	8.40%
Persons without health insurance, under age 65 years, percent	6.60%	5.90%	5.40%
In civilian labor force, total, percent of population age 16 years+, 2018-2022	71.80%	63.90%	66.50%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	65.90%	56.00%	62.30%
Mean travel time to work (minutes), workers age 16 years+, 2018-2022	12.8	17	19.6
Median household income (in 2022 dollars), 2018-2022	\$81,914	\$65,076	\$70,571
Per capita income in past 12 months (in 2022 dollars), 2018-2022	\$34,914	\$32,460	\$37,949
Persons in poverty, percent	8.00%	8.70%	11.00%
Total employer establishments, 2021	1,348	489	83,560
Total employment, 2021	19,812	5,222	1,386,299

Community Health Needs Assessment Survey

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

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

RESIDENCE

Please enter your county of residence: _____

Please enter your zip code: _____

What is your current age? _____

COMMUNITY

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

Poor Fair Good Very Good Excellent Don't Know

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

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

Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

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

Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

010005-01832 1/21

1

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

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

Why did you give it that rating?

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

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

Why did you give it that rating?

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

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

Why did you give it that rating?

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

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

Why did you give it that rating?

How would you rate the ENVIRONMENTAL health of your community?

(clean air, clean water, etc.)

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

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

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

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

- Poor Fair Good Very Good Excellent Don't Know

Why did you give it that rating?

YOUR HEALTH AND WELLNESS

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

- Poor Fair Good Very Good Excellent Don't Know

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

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

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

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

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

YOUR HEALTH CARE USAGE

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

- Yes No

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

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

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

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

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

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

Why did you give it that rating?

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

- Yes No Unsure

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

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

TRAVELING FOR CARE

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

- Yes
- No

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

City _____ State _____

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

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

Other *(please specify)*

YOUR HEALTH INSURANCE

Do you currently have health insurance?

- Yes
- No

Please indicate the source of your health insurance coverage.

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

Other *(please specify)*

DEMOGRAPHICS

What is your sex?

- Male Female Prefer not to answer

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

- Yes No Prefer not to answer

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

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

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

- Yes No

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

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

Other *(please specify)*

How long have you been a US Citizen?

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

What language is spoken most frequently in your home? _____

What is your current marital status?

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

Which of the following best describes your current living situation?

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

What is your primary mode of daily transportation?

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

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

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

Your current employment status is best described as:

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

What is your total household income from all sources?

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

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