

# Community Health Needs Assessment

CHI St. Alexius Health – Turtle Lake, ND Approved April 2025



NDSU Center for Social Research Report #116
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### Acknowledgements

The CHNA process is a significant undertaking resulting from the vision and leadership of numerous individuals and governing bodies. It is important to acknowledge those who have dedicated time and energy to ensure that thoughtful planning and long-range strategic vision serve as the basis for policy and decision-making regarding community health needs.

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### **Executive Summary**

### **Purpose**

The purpose of this community health needs assessment (CHNA) is to identify and prioritize significant health needs of the community served by CHI St. Alexius Health Turtle Lake. The priorities identified in this report help to guide the hospital's community health improvement programs and community benefit activities, as well as its collaborative efforts with other organizations that share a mission to improve health. This CHNA report meets requirements of the Patient Protection and Affordable Care Act that not-for-profit hospitals conduct a community health needs assessment at least once every three years.

### CommonSpirit Health Commitment and Mission Statement

The hospital's commitment to engaging with the community, assessing priority needs, and helping to address them with community health program activities is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

### **CHNA Collaborators**

CHI St. Alexius Health Turtle Lake contracted with the North Dakota State University Center for Social Research to conduct the CHNA. The Center for Social Research developed community profiles and developed and conducted a community feedback survey that provided the foundation for this needs assessment. CHI St Alexius Turtle Lake collaborated with CHI St. Alexius Health Garrison on this CHNA.

### Community Definition

CHI St. Alexius Health Turtle Lake is located in Turtle Lake, North Dakota. The hospital primarily serves McLean County where Turtle Lake is located. Additionally, CHI St. Alexius Health Turtle Lake serves Sheridan and Oliver counties. In addition to CHI St. Alexius Health Turtle Lake, McLean County is home to CHI St. Alexius Health Garrison located in Garrison, ND.

McLean County is designated as a Health Professional Shortage Area (HPSA) and as a Medically Underserved Area (MUA) by the United States Health Resources & Services Administration. McLean County is a rural county located in west central North Dakota and has an estimated population of 9,781.

### Assessment Process and Methods

Community health needs were assessed using secondary data from national and state sources and primary data gathered from community members during a two-month survey period. CHI St. Alexius Health Turtle Lake representatives solicited additional input from local community organizations to review, validate, and prioritize identified needs at a community meeting held January 8, 2025.

Multiple data sources with various indicators that inform social considerations were compiled and analyzed. Data sources include but are not limited to County Health Rankings, the American Community Survey (ACS), the Bureau of Economic Analysis (BEA), and the Centers for Disease Control and Surveillance (CDC). All community level data were compared to state and national data for context. Community member input was solicited via an online survey and a community input meeting.

The survey was administered using a QR code for public distribution using various online and print media, and a survey link that was distributed by hospital personnel. At least one public health organization was invited to participate in distribution of the community survey. Upon conclusion of the survey fielding period, data were compiled and analyzed. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents.

CHI St. Alexius Health Turtle Lake solicited feedback on survey findings at a community input meeting on January 8, 2025. A presentation that summarized the community profile and highlighted key survey findings was used to report and validate priority needs identified in the survey results and guide discussion of needs and priorities for community health improvement planning.

### Prioritized Significant Health Needs

Based on an analysis of survey data, the following were identified as issues with the greatest degree of consensus among survey respondents. Secondary data are provided in support of these findings.

- Community services. Nearly 3 in 4 respondents (73 percent) disagreed that their community has adequate child care services. Child care services was identified as a priority need in the previous CHNA conducted in 2022 and 58 percent of survey respondents indicated that the availability of child care services has worsened since then. More than 4 in 5 respondents (83 percent) disagreed that their community has adequate vision care providers, 63 percent disagreed that their community has adequate public transportation services, and 51 percent disagreed their community has adequate mental health services. A slightly lower percentage (48 percent) disagreed that their community has adequate dental care providers. Respondents' perception of the availability of health care providers is consistent with secondary data on the ratio of residents per provider. The ratio of population to primary care physicians, mental health care providers, and dental providers was substantially higher in McLean County than in North Dakota and the nation overall.
- Affordability of health care services and prescriptions. The price of prescription drugs, even with
  insurance, was considered at least somewhat of a barrier to 51 percent of respondents; 15 percent
  considered the price of prescription drugs an extreme barrier. A similar percentage (50 percent)
  considered the price of health care services, even with insurance, to be at least somewhat of a barrier
  to accessing care.
- **Psychological abuse and crime.** Respondents expressed moderate levels of concern related to child abuse and cyber bullying in their community. Forty-five percent of respondents were at least somewhat concerned about child abuse, 22 percent were very concerned. Fifty-seven percent of respondents were at least somewhat concerned about cyber bullying.
- Mental health (anxiety, stress, depression). The ratio of population to mental health providers was substantially higher in McLean County (2,460:1) than in North Dakota (420:1). Consistent with the lack of mental health care providers in their community, 69 percent of respondents were at least somewhat concerned about mental health in their community.
- Substance misuse. Most respondents were at least slightly concerned about substance misuse in
  their community (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs) (93 percent); 43
  percent were very concerned, 31 percent were somewhat concerned, and 19 percent were slightly
  concerned. Respondents had the highest level of agreement regarding substance misuse in their
  community among all various concerns included in the guestionnaire.

During the January 8, 2025 community input meeting, attendees discussed survey findings, whether survey findings aligned with their perceptions of their community's needs, and the demographics of survey respondents. Meeting attendees indicated that the issues identified in the presentation accurately reflected issues of concern in their community. In discussing the lack of child care, attendees indicated that while cost was not a concern, there were issues with staffing, retention, and compliance with regulations. As well, the high cost of prescription drugs was discussed, as was wellness in the community. Attendees were positive about changes in fitness access, but less positive about things like cooking skills and healthy meal options. Local optometry and dentistry options were discussed, as well as issues related to the need of travel for health care, for dialysis treatments in particular.

### Resources Potentially Available

Resources, programs, and organizations in the community that are potentially available to address the significant health needs were identified by key informants giving input to this process. While not exhaustive, this list draws on the experiences and knowledge base of those directly serving the community. A list of community resources can be found in a separate resource section later in the report.

### Report Adoption, Availability, and Comments

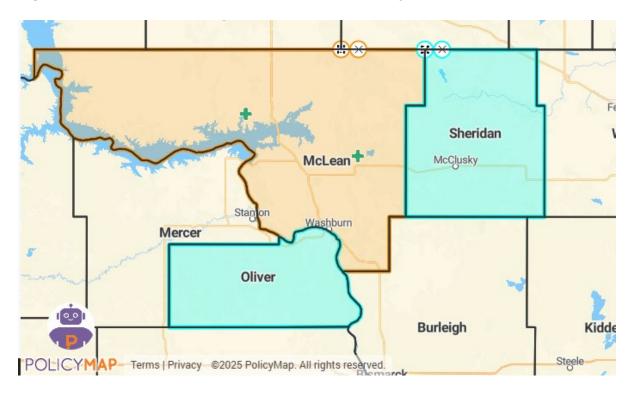
This CHNA report was adopted by the CHI St. Alexius Health Turtle Lake Board of Directors in April 2025. The report is widely available to the public on the hospital's web site, and a paper copy is available for inspection upon request at the Administration Office of CHI St. Alexius Health Turtle Lake. Written comments on this report can be submitted via mail to CHI Health, The McAuley Fogelstrom Center, (12809 W Dodge Rd, Omaha, NE 68154, Attn. Healthy Communities) – or electronically at https://forms.gle/KGRq62swNdQyAehX8 – or by calling Ashley Carroll, Market Director, Community and Population Health, at (402) 343-4548.

### **Community Definition**

CHI St. Alexius Health Turtle Lake identified McLean County, North Dakota as the primary service area for this CHNA. Sheridan and Oliver counties in North Dakota are considered the secondary service area (Figure A). As a Critical Access Hospital, CHI St. Alexius Health Turtle Lake's primary service area is considered the county in which it is located (McLean County, ND). CHI St. Alexius Health Turtle Lake also serves residents of Sheridan and Oliver counties, where there are no local hospitals. McLean County is also home to CHI St. Alexius Health Garrison in Garrison, ND.

McLean County is designated as a Health Professional Shortage Area (HPSA) and a Medically Underserved Area (MUA) by the United States Health Resources & Services Administration. McLean County is a rural county located in west central North Dakota and has an estimated population of 9,781.

Figure A: CHI St. Alexius Health Turtle Lake Community Health Needs Assessment Service Area





The following zip codes correspond to 80 percent of patient admissions to CHI St. Alexius Health Turtle Lake: 58463, 58477, 58559, 58575, 58576, 58577, 58579, 58723, and 58792.

Core demographics for McLean County are summarized in Table 1.

Table 1. Core Demographic Summary, McLean County, North Dakota				
Measure	McLean County, ND			
Community Description	Rural			
Population	9,781			
Racial and Ethnic Distribution				
White, non-Hispanic alone	87.7%			
American Indian and Alaska Native alone	6.4%			
Black or African American alone	0.4%			
Asian or Pacific Islander alone	1.1%			
Some other race alone	1.0%			
Two or more races	2.9%			
Hispanic Origin (of any race)	2.7%			
Median Household Income	\$80,556			
Percent of Persons below Poverty Rate	6.9%			
Unemployment Rate	3.1%			
Percent Population with less than High School Diploma	6.8%			
Percent of People 5 and Older who are Non-English Speaking	1.0%			
Percent of People without Health Insurance	10.0%			
Percent of People with Medicaid	8.7%			
Health Professional Shortage Area	Yes			
Medically Underserved Area	Yes			
Number of Hospitals in the County	2			

### **Hospital Description**

CHI St. Alexius Health Turtle Lake, a critical access hospital located in Turtle Lake, North Dakota, has a long and storied history dating back to 1947. Established through the efforts of the Turtle Lake Hospital Association, the hospital was built with the mission of providing excellent health care services in a patient-centered environment, prioritizing the well-being of every individual.

The hospital's journey has been marked by significant milestones, including its affiliation with St. Alexius Medical Center in Bismarck in 1987 and its subsequent integration into Catholic Health Initiatives (CHI) in 2015. This affiliation has allowed the hospital to expand its services and access a wider network of health care resources.

Despite its rural location, CHI St. Alexius Health Turtle Lake has thrived due to strong community support. The local residents value having a professional medical facility close to home, recognizing its importance for their health and well-being. The hospital's commitment to serving the community is evident in its dedication to providing quality medical treatment and its continuous efforts to upgrade its services.

As a 25-bed critical access hospital with a Level V Emergency Department, CHI St. Alexius Health Turtle Lake offers a range of services, including 24/7 emergency care, swing-bed programs, acute care services, an onsite lab, radiology, CT, and physical therapy services. In addition, the hospital manages two rural health clinics in Turtle Lake and Washburn. The hospital's professional and caring staff is dedicated to ensuring patients receive compassionate and excellent care.

The hospital's commitment to accessibility is reflected in its policy of not denying services due to the inability to pay. A discounted/sliding fee schedule is available based on family size and income, ensuring that everyone in the community has access to quality health care.

CHI St. Alexius Health Turtle Lake's journey is a testament to the power of community support and the dedication of its staff to providing high-quality health care in a rural setting. The hospital's continued growth and expansion are a testament to its commitment to serving the needs of its community and ensuring that everyone has access to the care they need.

### **Assessment Process and Methods**

Community health needs were assessed using a two-pronged analysis approach: secondary data from national and state sources; and primary data gathered from community members during a two-month survey period. CHI St. Alexius Health Turtle Lake solicited input from community organizations representing health, education, law enforcement, victim advocacy, social services, and the medically underserved to review and validate community health needs at a community input meeting held January 8, 2025.

### Secondary data: community profiles

Community profiles are an integral part of assessing community health needs. To get a complete sense of the community, multiple data sources with various indicators that inform social considerations were compiled and analyzed. Data sources include but are not limited to County Health Rankings, the American Community Survey (ACS), the Bureau of Economic Analysis (BEA), and the Centers for Disease Control and Surveillance (CDC). All community level data were compared to state and national data for context.

### Primary data: health needs survey and community discussion

To help supplement secondary data sources, community member input was solicited via an online survey and a community input meeting. The online survey was administered using the Qualtrics online survey platform from August 12 to October 16, 2024. The survey was administered using a QR code for public distribution using various online and print media and a survey link that was distributed by hospital personnel. At least one public health organization was invited to participate in the distribution of the community survey. The survey tool can be found in Appendix D.

The survey solicited feedback on respondents' perceptions of various issues and topics in six broad categories: people in my community, services in my community, concerns in my community, concerns about violence, medical services, and barriers to care. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents. Survey findings are detailed later in this assessment. The questionnaire can be found in Appendix D and detailed results in Appendix E.

### Community Input

After the conclusion of the survey fielding period and the analysis and compilation of a draft report of the findings, NDSU CSR team members compiled the findings for a presentation in Turtle Lake on January 8, 2025 for community member discussion and feedback. There were 17 attendees, including representatives from:

CHI St. Alexius Health Turtle Lake

Lord's Pantry



- Chamber Progress
- TruCommunity Bank
- Turtle Lake Ambulance
- Northland Health Center

- CHI St. Alexius Health Bismarck
- McClusky/Turtle Lake Methodist
- Turtle Lake Hospital Association

The hospital invited written comments on the most recent CHNA report and Implementation Strategy both in the documents and on the website where they are widely available to the public. No written comments have been received.

CHI St. Alexius Health Turtle Lake collaborated with CHI St. Alexius Health Garrison on this CHNA. CHI St. Alexius Health Turtle Lake contracted with the North Dakota State University Center for Social Research to conduct the CHNA. The Center for Social Research developed community profiles and developed and conducted a community feedback survey that provided the foundation for this needs assessment.

### **Assessment Data and Findings**

The following sections provide a detailed community profile and survey results. Secondary data for Oliver and Sheridan counties are available in Appendices B and C.

### Community Profile

McLean County is a rural county in west central North Dakota. The county seat is Washburn and its largest city is Garrison. With 9,781 residents, McLean County is North Dakota's 15<sup>th</sup> most populous county. Like most of North Dakota, McLean County's racial composition is largely white, but there is a substantial American Indian population as well. The median household income in McLean County is higher than the median in North Dakota and the nation overall; however, home values are lower, as are the costs associated with home rental and ownership. McLean County's poverty rate is lower than both the statewide and national average.

McLean County has higher rates of adult smoking and adult obesity than the United States and North Dakota on average. The adult excessive drinking rate in McLean County is lower than the statewide average, 19 percent in McLean County compared to 23 percent statewide; however, half of all driving deaths involve alcohol. The county's leading causes of death in 2021 were malignant neoplasms, diseases of the heart, and accidents. McLean County has a lower annual flu shot rate than both North Dakota and the nation. McLean County has substantially more people per primary care physician, mental health care provider, and dentist than North Dakota and the nation overall.

McLean County faces relatively moderate to very high risk of loss due to various winter weather conditions including ice storms and strong winds. However, McLean County's overall risk due to natural hazards is relatively low. McLean County's social vulnerability is rated as very low. McLean County's community resilience is rated as very high. These factors combined give McLean County a relatively low National Risk Index Score, which is worse than most North Dakota counties but better than the average for counties nationally.

### Community Demographics

The American Community Survey's (ACS) most recent five-year estimate of McLean County's population is 9,781, making it the state's 15<sup>th</sup> most populous county. About 1 in 5 residents in McLean County are under the age of 18, and 1 in 4 are aged 65 and older (Table 2). The county's racial composition is largely non-Hispanic white (87.7 percent). The American Indian/Alaska Native population in McLean County comprised 6.4 percent of total population, which is slightly higher than the statewide average of 4.7 percent. The county's gender split is skewed slightly male, at 48.1 percent female and 51.9 percent male.

Table 2: Population Estimates, McLean County, ND, North Dakota, and United State	s, by Age,
Race/Ethnicity, and Sex (2022)	

raco/Ethinotty, and Ock (2022)						
Age Group	McLean Population	McLean Percentages	North Dakota Percentages	United States Percentages		
	•					
0-4	523	5.3%	6.7%	5.7%		
5-17	1,614	16.5%	16.9%	16.4%		
18-24	551	5.6%	11.3%	9.4%		
25-44	2,028	20.7%	27.1%	26.6%		
45-64	2,657	27.2%	22.2%	25.3%		
65 and older	2,408	24.6%	15.9%	16.5%		
Total	9,781	100.0%	100.0%	100.0%		
Race and Ethnicity*						
White, non-Hispanic alone	8,582	87.7%	83.0%	58.9%		
American Indian and Alaska Native	628	6.4%	4.7%	0.8%		
Asian alone	83	0.8%	1.6%	5.8%		
Black or African American alone	40	0.4%	3.2%	12.5%		
Native Hawaiian and Pacific Islander	32	0.3%	0.2%	0.2%		
Some other race alone	93	1.0%	1.4%	6.0%		
Two or more races	281	2.9%	4.4%	8.8%		
Hispanic Origin (of any race)	261	2.7%	4.3%	18.7%		
Sex						
Female	4,705	48.1%	48.6%	50.4%		
Male	5,076	51.9%	51.4%	49.6%		
Total	9,781	100.0%	100.0%	100.0%		
*Overlapping racial/ethnic categories mean that the percen	ntages will not total to 10	0% of the population.				

<sup>\*</sup>Overlapping racial/ethnic categories mean that the percentages will not total to 100% of the population. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Estimates from the ACS indicate that there are 4,176 households in McLean County with an average of 2.3 persons per household. Median household income is \$80,556 in McLean County, which is higher than the median household income for North Dakota (\$73,959) and the nation overall (\$75,149) (Table 3). About 83 percent of households are owner-occupied and median owner costs are \$1,537 per month including the mortgage. Median rent in McLean County is \$766 per month. Both median owner costs and median rent are lower in McLean County than in North Dakota and the United States overall. About 1 in 4 households are occupied by householders living alone and about 1 in 4 households have children in residence (Table 4). The percentage of householders living alone, households with residents aged 65 and older, and householders aged 65 and older living alone in McLean County are generally in line with averages for North Dakota and the U.S. overall.

Table 3: Household Demographics, McLean County, ND, North Dakota, and United States (2022)					
Item	McLean County	North Dakota	United States		
Total households	4,176	320,038	125,736,353		
Owner-occupied housing rate	82.9%	63.2%	64.8%		
Average household size (persons per household)	2.3	2.3	2.6		
Median value of owned-occupied housing	\$222,100	\$232,500	\$281,900		
Median monthly owner costs (with mortgage)	\$1,537	\$1,653	\$1,828		
Median monthly owner costs (without mortgage)	\$534	\$551	\$584		
Median gross rent	\$766	\$912	\$1,268		
Median household income \$80,556 \$73,959 \$75,149					
Source: U.S. Census Bureau, 2018-2022 American Community Surve	ey (ACS) 5-year estimates.				

Table 4: Household Characteristics, McLean County, ND, North Dakota, and United States (2022)					
McLean % of McLean Percent of F County County North Dakota Ur					
Households	Households*	Households*	Households*		
1,153	27.6%	27.8%	30.2%		
1,609	38.5%	26.7%	30.8%		
1,114	26.7%	33.2%	28.3%		
507	12.1%	11.8%	11.5%		
	McLean County Households 1,153 1,609 1,114 507	McLean County Households         % of McLean County Households*           1,153         27.6%           1,609         38.5%           1,114         26.7%           507         12.1%	McLean County Households         % of McLean County Households*         Percent of North Dakota Households*           1,153         27.6%         27.8%           1,609         38.5%         26.7%           1,114         26.7%         33.2%		

<sup>\*</sup>Overlapping household characteristics mean that the percentages of households will not total to 100% of the total number of households. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Estimates from the ACS indicate there are 4,493 adults in the workforce in McLean County. The largest industries in the county by percentage of the workforce are educational services, health care, and social assistance; agriculture, forestry, fishing, hunting, and mining; and transportation and warehousing, and utilities, which account for 23.2 percent, 18.5 percent, and 9.8 percent, respectively (Table 5). Other industries that employ substantial portions of the county's workforce include retail; construction; public administration; and arts, entertainment, recreation, accommodation, and food service. In 2023, the county's three largest employers were The Falkirk Mining Co., CHI St. Alexius Health Garrison, and the Garrison School District (NDLMI 2024).

Table 5: Employment by Industry, McLean County, ND (2022)					
Sector	<b>Estimated Workers</b>	Percent of Workforce			
Educational services, health care and social assistance	1,044	23.2%			
Agriculture, forestry, fishing, hunting and mining	830	18.5%			
Transportation and warehousing, and utilities	439	9.8%			
Retail	337	7.5%			
Construction	313	7.0%			
Public administration	279	6.2%			
Arts, entertainment, recreation, accommodation, food svc	276	6.1%			
Other	1,414	31.47%			
Total workforce 4,493 100.0%					
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.					

The poverty rate in McLean County is 6.9 percent, which is higher than the poverty rate in North Dakota (10.8 percent) and the nation overall (12.5 percent) (Table 6). Less than 1 in 10 (7.6 percent) children in McLean County live below the poverty line compared to 11.3 percent statewide and 16.7 percent nationally. One in five school-aged children in McLean County are eligible for free or reduced-price school lunch (20.6 percent), which is lower than both North Dakota overall (23.2 percent) and the national average (50.8 percent).

Table 6: Poverty Characteristics, McLean County, ND, North Dakota, and United States (2022)					
	McLean	McLean	ND	U.S.	
Poverty Characteristics	Estimate	Percent*	Percent*	Percent*	
All persons below poverty level (% of total population)	661	6.9%	10.8%	12.5%	
All persons below 200% poverty level % of total population)	1,677	17.4%	24.7%	28.8%	
Children aged 0-17 below poverty level (% of children 0-17)	161	7.6%	11.3%	16.7%	
Adults aged 65+ below poverty level (% of adults 65+)	136	5.8%	9.1%	10.0%	
Eligible recipients of free or reduced-price school lunch	362	20.6%	23.2%	50.8%	

<sup>\*</sup>Differing populations and overlapping categories mean that percentages will not total to 100%.

Sources: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates; 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute



Most residents in McLean County aged 25 and older have at least some college experience (61 percent); 22.2 percent have attained at least a bachelor's degree. This is lower than in North Dakota and the nation overall, where 31.4 percent and 34.3 percent of the population aged 25 and older, respectively, have at least a bachelor's degree. Fewer than one in 10 residents aged 25 and older in McLean County did not complete high school (6.8 percent), which is higher than in North Dakota (6.5 percent) but lower than the national average (10.9 percent) (Table 7).

Table 7: Educational Attainment for Persons Aged 25 and Older, McLean County, ND, North Dakota, and United States (2022) **McLean County North Dakota United States** Percent of McLean Percent of Percent of **Population 25** Population 25 **Population 25** County **Level of Education Attained Estimate** and Older and Older and Older Less than high school 481 6.8% 6.5% 10.9% High school diploma or GED 2,283 32.2% 26.1% 26.4% Some college or Associate's degree 2.751 38.8% 36.0% 28.5% Bachelor's degree 1,294 18.2% 22.3% 20.9% Graduate or professional degree 9.1% 284 4.0% 13.4% 7.093 100.0% 100.0% 100.0%

### Community Health Factors and Outcomes

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Total population aged 25 and older

As of 2021, McLean County has a slightly higher prevalence of adult cigarette smokers than in the U.S. and North Dakota overall; 17 percent of adult residents of McLean County smoke cigarettes compared to 16 percent of North Dakotans and 15 percent of Americans overall (Table 8). The adult obesity rate in McLean County (41 percent) is also higher than the rate in North Dakota and the nation overall (36 percent and 34 percent, respectively). Adults in McLean County were equally likely to report a lack of physical activity outside of work when compared to North Dakota overall (25 percent each), and slightly more likely when compared to the national average (23 percent). Although the percentage of adults who reportedly engage in excessive drinking is lower in McLean County than it is in North Dakota (19 percent compared to 23 percent, respectively), it is higher than the national average (18 percent) – and 50 percent of all driving deaths involve alcohol. About 4 in 10 adult residents of McLean County report that they have access to exercise opportunities (39 percent), which is much lower than North Dakota overall (76 percent) and the national average (84 percent).

The prevalence of McLean County residents reporting poor mental health days in the past month (3.7 days) is lower than North Dakota overall (4.0 days) and the national average (4.8 days).

Table 8: Health Behaviors, McLean County, ND, North Dakota, and the United States (2021)						
Health Behavior McLean County North Dakota United States						
Adult Smoking	17%	16%	15%			
Adult Obesity	41%	36%	34%			
Adult Excessive Drinking	19%	23%	18%			
Alcohol-Impaired Driving Deaths	50%	39%	26%			
Physical Inactivity <sup>1</sup>	25%	25%	23%			
Access to Exercise Opportunities <sup>2</sup>	39%	76%	84%			
Poor Mental Health Days <sup>3</sup>	3.7	4.0	4.8			

Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute. 1Physical Inactivity refers to the percent of adults who report participating in no physical activity outside of work. 2Access to Exercise Opportunities refers to the percent of adults who report living close to a park or recreation facility. 3The average number of self-reported mentally unhealthy days in the past 30 days.

Leading causes of death for residents under age 75 in McLean County were malignant neoplasms and diseases of the heart, followed by accidents (Table 9). Life expectancy in McLean County is 77.6 years. This is lower than the life expectancy in North Dakota (78.1 years) but similar to the national average (77.6 years) (County Health Rankings & Roadmaps, 2024).

Table 9: Leading Causes of Death in McLean County, ND Residents Under Age 75 (2019-2021)					
Cause of Death Deaths Rate Per 100,000 Population Under 75					
Malignant Neoplasms 41 158.6					
Diseases of the heart 36 139.3					
Accidents <sup>1</sup> 13 Unreliable					
Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute.  ¹Crude rates per 100,000 population under 75 are unreliable due to the small number of deaths.					

The rate of people under age 65 without health insurance in McLean County is similar to the rate in North Dakota and the nation overall. In McLean County, 10 percent of people under the age of 65 did not have health insurance, compared with 10 percent of all North Dakotans and 9 percent nationally (Table 10).

The annual flu shot rate in McLean County is 41 percent, which is eight percentage points lower than the North Dakota rate overall (49 percent) and five percentage points lower than the national average (46 percent).

The Food Environment Index is a measure of food security and access to healthy foods with a ranking system ranging from 0 (worst) to 10 (best). The McLean County Food Environment Index score was 8.7, which is lower than North Dakota's score of 9.1 but higher than the national score of 7.7 (Table 10).

Table 10: Other Health Factors, McLean County, ND, North Dakota, and United States					
Description of Factor	McLean County	North Dakota	United States		
Uninsured Rate, 2021	10%	9%	10%		
Medicaid Coverage, 2022	8.7%	11.9%	20.4%		
Unemployment Rate, 2022	3.1%	2.1%	3.7%		
Low Birthweight Rate, 2016-2022	6%	7%	8%		
Annual Mammogram Rate, 2021 <sup>1</sup>	48%	53%	43%		
Annual Flu Shot Rate, 2021 <sup>2</sup>	41%	49%	46%		
Food Environment Index, 2019-2021 <sup>3</sup>	8.7	9.1	7.7		

Sources: US Census Bureau's Small Area Health Insurance Estimates (SAHIE) program, 2021; The Local Area Unemployment Statistics (LAUS) program of the Bureau of Labor Statistics, 2022; Map the Meal Gap, Feeding America, 2021; The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD) Tool, 2021. <sup>1</sup>Percentage of female Medicare enrollees who received an annual mammogram. <sup>2</sup>Percent of Medicare enrollees who received an annual flu shot. <sup>3</sup>The Food Environment Index is a measure of food environment that combines food insecurity rates with rates of access to healthy foods. It is scored on a scale from 0 (worst) to 10 (best).

The ratio of McLean County residents to primary care physicians, mental health care providers, and dentists is higher for each type of provider when compared to North Dakota and the nation overall (Table 11). McLean County is designated as a Health Professional Shortage Area (HPSA) and a Medically Underserved Area (MUA) by the United States Health Resources & Services Administration. McLean County is also served by CHI St. Alexius Health Garrison.

Table 11: Number of Residents Per Health Care Provider in McLean County, ND, and the U.S.					
Type of Provider	McLean County	North Dakota	United States		
Primary Care Physicians, 2021	3,270:1	1,290:1	1,330:1		
Mental Health Care Providers, 2024	2,460:1	420:1	300:1		
Dentists, 2022 3,270:1 1,420:1 1,360:1					
Sources: Health Resources & Services Administration, Area Health Resource Files; CMS, National Provider Identification Registry.					

### National Risk Index

The Federal Emergency Management Agency (FEMA) administers the National Risk Index, a dataset and tool that estimates the risk level for natural disasters at the county level. A county's Risk Index is calculated using three metrics: Expected Annual Loss, Social Vulnerability, and Community Resilience. A community's exposure to and ability to cope with hazardous conditions can have a substantial impact on factors that inform community health outcomes, such as the strain on that community's health care system and its ability to make sure that residents have access to essential goods and services in times of crisis.

Overall, McLean County's National Risk Index rating is Relatively Low. This indicates a fairly strong general preparedness for and ability to recover from natural and manmade hazards. Three-fourths (77.4 percent) of North Dakota counties have a lower National Risk Index score than McLean County and 54.2 percent of counties nationally have a lower score (Table 12).

Table 12: National Risk Index Percentiles for McLean County, ND when compared to North Dakota Counties and U.S. Counties (2024)

	Percentile within North	U.S.
Index	Dakota	Percentile
Expected Annual Loss	75.5	57.3
Social Vulnerability	20.8	4.9
Community Resilience	73.6	80.6
National Risk Index	77.4	54.2

Note: The Risk Index can be read as "77.4% of counties in North Dakota have a lower Risk Index than McLean County; 54.2% of U.S. counties have a lower Risk Index than McLean County."

Sources: FEMA, National Risk Index; CDC/ATSDR Social Vulnerability Index 2022; University of South Carolina's Hazards and Vulnerability Research Institute (HVRI)'s Baseline Resilience Indicators for Communities (HVRI BRIC).

### **Expected Annual Loss**

Expected Annual Loss scores are calculated by combining a community's exposure to natural hazards, annualized frequency of hazards, and the historic loss ratio for various natural hazards. McLean County's overall Expected Annual Loss is rated as Relatively Low overall on a five-point scale: Very Low, Relatively Low, Relatively Moderate, Relatively High, and Very High (NRI 2024). However, the county faces very high winter weather hazards. Expected annual loss caused by ice storms, strong winds, winter weather, and cold waves is also rated either relatively moderate or relatively high. McLean County's expected annual loss is higher than 75.5 percent of North Dakota counties and 57.3 percent of counties nationally (Table 12).

### Social Vulnerability Index

Social vulnerability is a concept related to a community's ability to prepare for and respond to hazardous events. A community's social vulnerability is gauged using the Social Vulnerability Index (SVI) (ATSDR) (CDC, 2024): an aggregated index of 16 socioeconomic factors categorized into four themes: socioeconomic status, household characteristics, racial and ethnic minority status, and housing type/transportation. SVI is a nationally recognized measure of a location's social vulnerability, and therefore its ability to prepare for and respond to disasters. While the SVI technically is a measure of ability to respond to natural disasters and aid emergency planning, the index is an accepted tool to gauge overall community socioeconomic well-being. A higher SVI indicates a higher vulnerability to hazard.

McLean County's Social Vulnerability is rated Very Low. Overall, McLean County has higher social vulnerability than 20.8 percent of North Dakota counties and 4.9 percent of counties nationally. For a more thorough breakdown of McLean County's Social Vulnerability see Appendix A.

### **Community Resilience**

A community's Community Resilience score is defined as its ability to prepare for, withstand, and recover from

hazardous events (Cutter et al. 2014). Categories considered in the compilation of scores include Human Well-Being, Economy, Infrastructure, Governance, Community Capacity, and Environment. McLean County's Community Resilience ranking is Very High. McLean county has higher community resilience than 73.6 percent of North Dakota's 53 counties and 80.6 percent of counties nationally. Community resilience indicators suggest the county is well-prepared to respond to hazardous events.

### Community Health Survey Analysis

The survey solicited feedback on respondents' perceptions of various issues and topics in six broad categories: people in my community, services in my community, concerns in my community, concerns about violence, medical services, and barriers to care. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents. Detailed survey findings can be found in Appendix E.

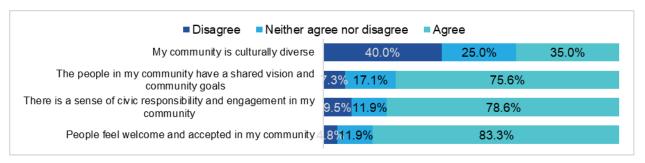
### Respondent Demographics

Forty-two people responded to the Turtle Lake CHNA survey with a mean age of 52 years; more than half (56 percent) of respondents were aged 45 to 64 years. Ninety-three percent of respondents were female and the same percentage identified as white. Sixty percent of respondents reported an annual household income of \$75,000 or more and 90 percent had at least some post-secondary schooling; 41 percent had a bachelor's or graduate degree. Seventy-two percent of respondents were employed full-time, 15 percent were employed part-time, and 13 percent were retired.

### Findings

Respondents were asked a series of statements about the people in their community. Overall, most agreed that people feel welcome and accepted in their community (83 percent) and that there is a sense of civic responsibility and engagement in their community (79 percent). Seventy-six percent of respondents agreed the people in their community have a shared vision and community goals. However, far fewer respondents (35 percent) agreed their community is culturally diverse; 25 percent neither agreed nor disagreed and 40 percent disagreed with this statement (Figure 1).

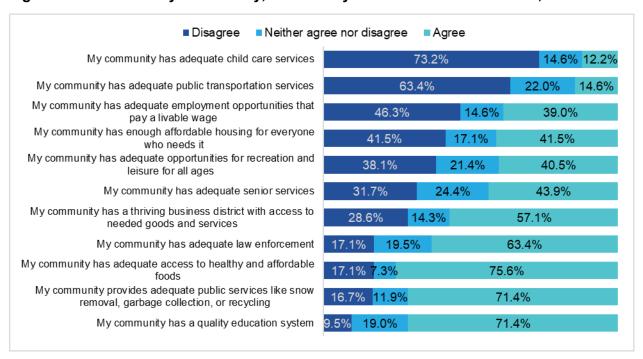
Figure 1: People in My Community, Community Health Needs Assessment, 2024



Respondent n: 40-42.

About three-quarters (76 percent) of respondents agreed their community has adequate access to healthy and affordable foods. Seventy-one percent agreed their community has a quality education system and another 71 percent agreed their community provides adequate public services (such as snow removal). A similar percentage (73 percent) disagreed that their community has adequate child care services and just under two-thirds (63 percent) disagreed that their community has adequate public transportation services (Figure 2).

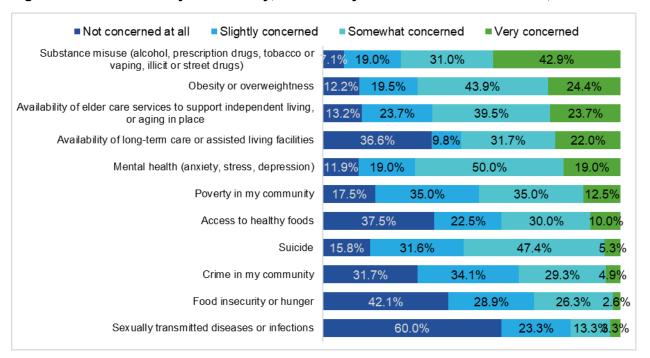
Figure 2: Services in My Community, Community Health Needs Assessment, 2024



Respondent n: 41-42.

Most respondents were at least slightly concerned about substance misuse in their community; 43 percent were very concerned, 31 percent were somewhat concerned, and 19 percent were slightly concerned. This issue had the highest percentage of respondents who were very concerned. About one-fourth of respondents were very concerned about obesity or overweightness in their community (24 percent) and about the availability of elder care services to support independent living (aging in place) (24 percent). Twenty-two percent of respondents were very concerned about the availability of long-term care or assisted living facilities; however, 37 percent were not at all concerned about this issue. Sixty percent of respondents were not concerned at all about sexually transmitted diseases or infections (STIs) (Figure 3).

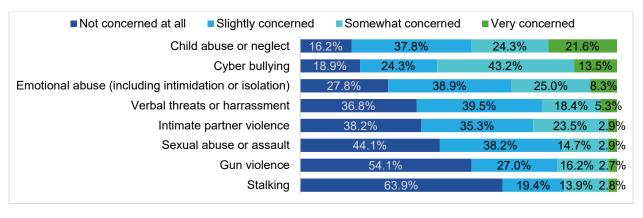
Figure 3: Concerns in My Community, Community Health Needs Assessment, 2024



Respondent n: 30-42.

When asked about specific violence concerns in their community, most respondents expressed at least slight concern about child abuse or neglect; 22 percent were very concerned, 24 percent were somewhat concerned, and 38 percent were slightly concerned about this issue. Cyber bullying was at least a slight concern for 81 percent of respondents; 14 percent were very concerned. Stalking was of no concern to 64 percent of respondents and gun violence was of no concern to 54 percent of respondents (Figure 4).

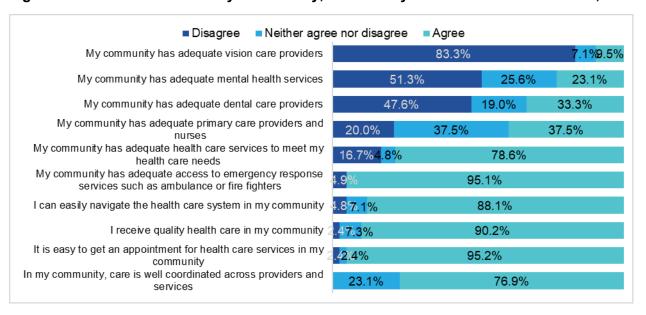
Figure 4: Violence Concerns in My Community, Community Health Needs Assessment, 2024



Respondent n: 34-38.

Most respondents were positive about the medical services in their community. While 23 percent of respondents neither agreed nor disagreed with the statement that care is well-coordinated across providers and services in their community, 77 percent agreed with this statement (no one disagreed). Ninety-five percent of respondents agreed that it is easy to get an appointment for health care services in their community and the same percentage agreed their community has adequate access to emergency response services (such as an ambulance). However, 83 percent of respondents disagreed their community has adequate vision care providers and 51 percent disagreed their community has adequate mental health services. A slightly lower percentage (48 percent) disagreed their community has adequate dental care providers (Figure 5).

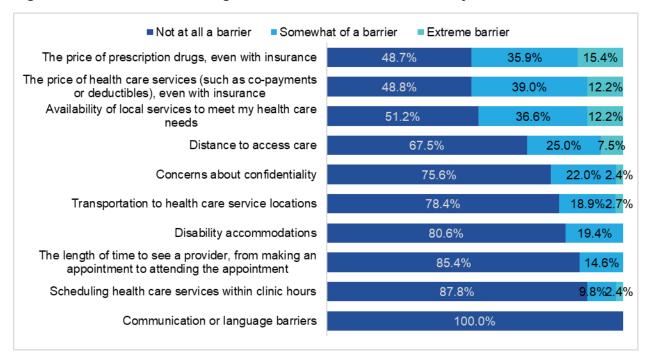
Figure 5: Medical Services in My Community, Community Health Needs Assessment, 2024



Respondent n: 39-42.

Respondents were comfortable with most elements of accessing health care in their community, citing few barriers. However, the price of prescription drugs, even with insurance, was considered at least somewhat of a barrier to 51 percent of respondents (15 percent considered this an extreme barrier). A similar percentage (50 percent) considered the price of health care services, even with insurance, to be at least somewhat of a barrier to accessing care. Additionally, the availability of local services to meet needs was considered at least somewhat of a barrier for 49 percent of respondents (Figure 6).

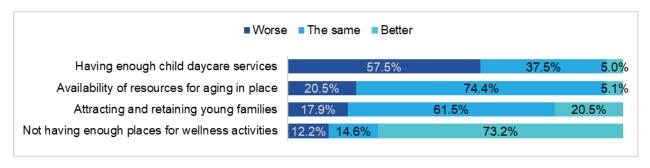
Figure 6: Barriers to Accessing Health Care Services, Community Health Needs Assessment, 2024



Respondent n: 36-41.

Respondents were asked about the issues identified in the previously conducted CHNA in 2022 and perceptions of change since then. While 73 percent of respondents saw improvement in having enough places for wellness activities, 58 percent said that having enough child daycare services has worsened since 2022. Most respondents thought the availability of resources for aging in place is about the same (74 percent) as was attracting and retaining young families (62 percent) (Figure 7).

Figure 7: Previous CHNA Issues, Community Health Needs Assessment, 2024

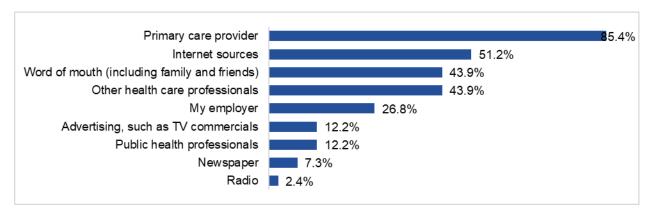


Respondent n: 39-41.

In the past year, most respondents (82 percent) had an annual physical exam, 77 percent had a blood pressure or cholesterol screening, 69 percent received a vaccination, 62 percent had a dental exam, and 62 percent had a vision exam (Appendix E).

Nearly all respondents (95 percent) said they have a primary care doctor and 85 percent cited their primary care provider as their source for health information. Fifty-one percent said they used internet sources and 44 percent received health information from other health care professionals. The same percentage (44 percent) received health information from word-of-mouth sources such as friends or family (Figure 8).

Figure 8: Sources of Health Information, Community Health Needs Assessment, 2024



Respondent n: 41. Respondents were permitted to select more than one response.

Most respondents had health insurance through an employer (85 percent) and 12 percent had health insurance through a private source or government program (Appendix E).

### Significant Community Health Needs

Based on an analysis of survey data, the following were identified as issues with the greatest degree of consensus among survey respondents. Secondary data are provided in support of these findings.

- Community services. Nearly 3 in 4 respondents (73 percent) disagreed that their community has adequate child care services. Child care services was identified as a priority need in the previous CHNA conducted in 2022 and 58 percent of survey respondents indicated that the availability of child care services has worsened since then. More than 4 in 5 respondents (83 percent) disagreed that their community has adequate vision care providers, 63 percent disagreed that their community has adequate public transportation services, and 51 percent disagreed their community has adequate mental health services. A slightly lower percentage (48 percent) disagreed that their community has adequate dental care providers. Respondents' perception of the availability of health care providers is consistent with secondary data on the ratio of residents per provider. The ratio of population to primary care physicians, mental health care providers, and dental providers was substantially higher in McLean County than in North Dakota and the nation overall.
- Affordability of health care services and prescriptions. The price of prescription drugs, even with
  insurance, was considered at least somewhat of a barrier to 51 percent of respondents; 15 percent
  considered the price of prescription drugs an extreme barrier. A similar percentage (50 percent)
  considered the price of health care services, even with insurance, to be at least somewhat of a barrier
  to accessing care.
- Psychological abuse and crime. Respondents expressed moderate levels of concern related to child
  abuse and cyber bullying in their community. Forty-five percent of respondents were at least somewhat
  concerned about child abuse, 22 percent were very concerned. Fifty-seven percent of respondents
  were at least somewhat concerned about cyber bullying.
- **Mental health (anxiety, stress, depression).** The ratio of population to mental health providers was substantially higher in McLean County (2,460:1) than in North Dakota (420:1). Consistent with the lack of mental health care providers in their community, 69 percent of respondents were at least somewhat concerned about mental health in their community.
- Substance misuse. Most respondents were at least slightly concerned about substance misuse in
  their community (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs) (93 percent); 43
  percent were very concerned, 31 percent were somewhat concerned, and 19 percent were slightly
  concerned. Respondents had the highest level of agreement regarding substance misuse in their
  community among all various concerns included in the questionnaire.

During the January 8, 2025 community input meeting, attendees discussed survey findings, whether survey findings aligned with their perceptions of their community's needs, and the demographics of survey respondents. Meeting attendees indicated that the issues identified in the presentation accurately reflected issues of concern in their community. They discussed a lack of child care – cost was not a concern, but staffing, retention, and compliance with regulations were concerns. As well, the high cost of prescription drugs was discussed, as was wellness in the community; attendees were positive about changes in fitness access, but less positive about things like cooking skills and healthy meal options. Local optometry and dentistry options were discussed, as well as issues related to the need for travel for health care, in particular for dialysis treatments.



Some of the health needs listed for prioritization were not flagged in the survey as problematic by respondents; however, the demographic that responded to the survey may not have reflected all high-needs populations in the community.

### Resources Potentially Available to Address Needs

Programs, resources, and organizations in the community that are potentially available to address the significant health needs were identified by key informants giving input to this process. While not exhaustive, the list draws on the experiences and knowledge base of those directly serving our community. The following potential partners may be useful resources as CHI St. Alexius Health Turtle Lake strives to meet community needs.

- The Lord's Pantry
- The Share Exchange
- Turtle Lake Clinic
- Turtle Lake Rexall Drug
- Northland Health Center
- North Dakota Aging and Disabled Resources Link
- National Health Service Core
- CHI St. Alexius Health at Home
- Meals on Wheels
- MedicAlert Systems
- Veteran Services
- Hospital Auxiliary
- Turtle Lake Chamber of Progress
- Hospital Association Board
- Turtle Lake Ambulance Services



# Impact of Actions Taken Since Preceding CHNA

### 2023-2025 Community Health Implementation Strategy

Health Need: Availability of resources to help the elderly stay in their homes



### Health Need: Availability of resources for elderly to stay in their homes

Strategy or Program	Summary Description
Strategy 1.1	Investigate existing resources available within the county that provide assistance to the elderly population.
Strategy 1.2	Become an Advocate to our elderly population by making information about availability of resources either within the county or our own hospital services.
Strategy 1.3	Investigating QSP services and compile a list of QSP providers within our region to offer respite and adult caregiver services.
	FY2023 Key Activities:
	<ol> <li>Work in partnership with CHI St. Alexius Health at Home for patients needing medical assistance at home. Providers have been educated on the availability of Health at Home.</li> <li>Hold a Fall Prevention Program on a yearly basis for the public. Our Physical Therapy Assistant held an education and exercise session at one of the local churches twice a week for 2 months teaching balance and strengthening exercises.</li> <li>Provide information regarding Meals on Wheels, MedicAlert systems, Veteran Services and McLean or Sheridan County provided programs to elderly population. A social worke designee was recently hired who will be involved in making our patients as well as the public aware of services available. The position had been empty for five months.</li> <li>Market the availability of Day Care and Respite services available at CHI St. Alexius Health Turtle Lake for Care-givers needing time away from elderly family. Activity did not occur due to staffing and resource constraints. We intend to resume this program in FY24. We have recently hired a social worker designee who will be involved in making our patients as well as the public aware of services available. The position had been empty for five months.</li> <li>Participate with Hospital Auxiliary during their public programs with guest speakers on issues involving the elderly. Our Auxiliary did not hold any meetings for the elderly this past year. Local Senior Center was demolished and they are looking for a place to gather Will resume meetings after a site has been secured.</li> </ol>
	FY23 Measures:
	<ol> <li>Number of patients added since the education of our providers and nursing staff to home health: 5</li> <li>Individuals reached/trained for balance and strengthening exercises: 25</li> <li>No measures to report during this period.</li> <li>Expectation is that we will be marketing our Adult Day care Services and Respite Services this coming year and have measures to report in FY24.</li> <li>Number of Auxiliary meetings for the elderly held during this period: 0</li> </ol>



# FY2024 Key Activities:

- 1. Working in partnership with CHI St. Alexius Health at Home for patients needing medical assistance at home. Providers continue to be educated on the availability of Health at Home.
- 2. Our Physical Therapy Assistant held an education and exercise session at one of the local churches twice a week for 2 months teaching balance and strengthening exercises.
- 3. Provide information regarding Meals on Wheels, MedicAlert systems, Veteran Services and McLean or Sheridan County provided programs to elderly population. A social worker designee is involved in making our patients as well as the public aware of services available.
- 4. Market the availability of Day Care and Respite services available at CHI St. Alexius Health Turtle Lake for Care-givers needing time away from elderly family. Activity did not occur due to staffing and resource constraints.
- 5. Participate with Hospital Auxiliary during their public programs with guest speakers on issues involving the elderly.

### FY24 Measures:

- 1. Number of patients added since the education of our providers and nursing staff to home health: 5
- 2. Individuals reached/trained for balance and strengthening exercises: 25
- 3. No measures to report during this period.
- 4. Expectation is that we will be marketing our Adult Day care Services and Respite Services this coming year and have measures to report in FY25.
- 5. Number of Auxiliary meetings for the elderly held during this period: 0

# Anticipated Impact

They do have the capability to do telehealth visits in their home due to the pandemic. Health at Home came to the medical staff meeting to inform medical providers of the services they provide to keep patients in their homes. With the opening of the RHC clinic in the Turtle Lake Hospital they are beginning to consider implementing chronic care management (CCM) through their RHC.

# Planned Collaboration

Information will be made available in conjunction with Health at Home, meals on wheels, MedicAlert, public health, and veteran services.



# Health Need: Not having enough places for exercise and wellness activities

Health	Need: Not having enough places for exercise and wellness activities
Strategy or Program	Summary Description
Strategy 2.1	Work with supporting Hospital Boards to provide activities that encourage wellness and exercise opportunities.
Strategy 2.2	Work with the Turtle Lake Ambulance. The Ambulance is putting in an exercise facility within their building. We will discuss the options of opening it to the public for exercise and wellness activities.
	FY2023 Key Activities:
	<ol> <li>Make Health Fairs an annual event in conjunction with the Dakota Feeder Calf Show. Health Fair held October 2022. Checked Blood Pressure blood sugars and Hemoglobins at Health Fair. This will be an annual event.</li> <li>Offer yearly Wellness Challenges for the general public to participate in and provide educational opportunities in areas of nutrition, exercise, etc., during the challenge. Completed a 6-week Wellness Challenge 3/23. Plan to continue this offering.</li> <li>Offer Adult Fitness program and make available exercise equipment to the general public for use. On-going work in conjunction with the community in opening a wellness center at the community center that will be open to the public. Yoga classes are being offered at the community center.</li> </ol>
	FY23 Measures:
	<ol> <li>Number of community members attended the Health Fair: 25</li> <li>Number of community members participated in the yearly Wellness Challenge: 25</li> <li>Will track usage and number of participants for next fiscal years as this facility only recently opened.</li> </ol>
	FY2024 Key Activities:
	<ol> <li>Held a Health Fair in conjunction with the Dakota Feeder Calf Show. Checked Blood Pressure blood sugars and Hemoglobins at Health Fair.</li> <li>Offer yearly Wellness Challenges for the general public to participate in and provide educational opportunities in areas of nutrition, exercise, etc., during the challenge.</li> <li>Offer Adult Fitness program and make available exercise equipment to the general public for use. On-going work in conjunction with the community in opening a wellness center at the community center that will be open to the public. Yoga classes are being offered at the community center.</li> </ol>
	FY24 Measures:
	<ol> <li>Number of community members attended the Health Fair: 30</li> <li>Number of community members participated in the yearly Wellness Challenge: 50</li> <li>Will track usage and number of participants for next fiscal years as this facility only recently opened.</li> </ol>



Anticipated Impact	CHI St. Alexius Health Turtle Lake has offered "fitness" challenges with incentives for community members. These challenges are usually offered once or twice a year. With COVID-19, they were unable to do so in 2020 and 2021. CHI St. Alexius Health Turtle Lake did offer a fitness challenge for their employees that went over very well. CHI St. Alexius Health Turtle Lake has also participated in a variety of health fairs.
Planned Collaboration	Health fairs and wellness challenges are done in collaboration with Hospital Association and Auxiliary. Turtle Lake Ambulance Service is planning on putting in a fitness center in their planned ambulance bay which will be opened to the public.

# Health Need: Having enough child daycare services

Hea	Ith Need: Having enough child daycare services
Strategy or Program	Summary Description
Strategy 3.1	Increase available daycare services for working families.
Strategy 3.2	Work with the public health, city board, economic development, to look into options for a community daycare.
	<ol> <li>FY2023 Key Activities:</li> <li>Work with supporting Hospital Boards to support any local effort to open a community daycare center. Turtle Lake Area Chamber of Commerce is leading this effort. Minimal progress has been made due to the condition of the property identified as a site.</li> <li>Work with the public health unit to offer safe sitter classes to students in the community to increase available trained babysitters.</li> </ol>
	<ol> <li>FY23 Measures:         <ol> <li>Project is ongoing with planning. There are no measures to report at this time.</li> <li>Project is ongoing with planning for next fiscal year. There are no measures to report at this time.</li> </ol> </li> </ol>
	<ol> <li>FY2024 Key Activities:         <ol> <li>Work with supporting Hospital Boards to support any local effort to open a community daycare center. Turtle Lake Area Chamber of Commerce is leading this effort. Minimal progress has been made due to the condition of the property identified as a site.</li> <li>Worked with the public health unit to plan offering safe sitter classes to students in the community to increase available trained babysitters (tentatively scheduled in FY25).</li> </ol> </li> <li>FY24 Measures:</li> </ol>
	<ol> <li>Project is ongoing with planning. There are no measures to report at this time.</li> <li>Project is ongoing with planning for next fiscal year. There are no measures to report at this time.</li> </ol>
Anticipated Impact	With collaborative efforts the community will work towards providing additional services for children. This includes opening additional daycare services which allow parents to have more options in regards to care for their children while they pursue their chosen careers.
Planned Collaboration	CHI St. Alexius Health Turtle Lake will work in collaboration with the hospital association and auxiliary boards and the Turtle Lake Chamber of Progress.



Health Need: Health-Related Social Needs (HRSN) with the goal of improving patient health

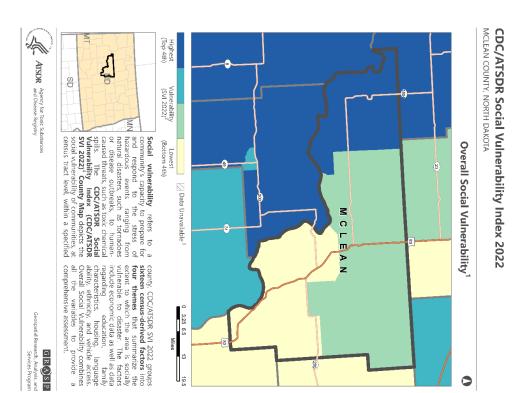
Heal	th Need: Health-Related Social Needs (HRSN) with the goal of improving patient health
Strategy or Program Name	Summary Description
Strategy 4.1	Identify patients' HRSN through screening and referrals to community-based organizations.
	FY2023 Key Activities:
	<ol> <li>Hire a Community Healthcare Worker (CHW).</li> <li>We will begin screening patients for HRSN in FY24 and connecting them to community resources (e.g., food, transportation, etc.).</li> </ol>
	FY24 Measures: Reporting will begin FY24 when the CHW is hired (FY24:Q2).
	FY2024 Key Activities:
	<ol> <li>Hire a Community Healthcare Worker (CHW).</li> <li>Continue screening patients for HRSN in FY25 and connecting them to community resources (e.g., food, transportation, etc.).</li> </ol>
	<b>FY24 Measures:</b> Reporting will begin FY25. CHW was primarily working in the Garrison service area. CHW only recently expanded to the Turtle Lake area.

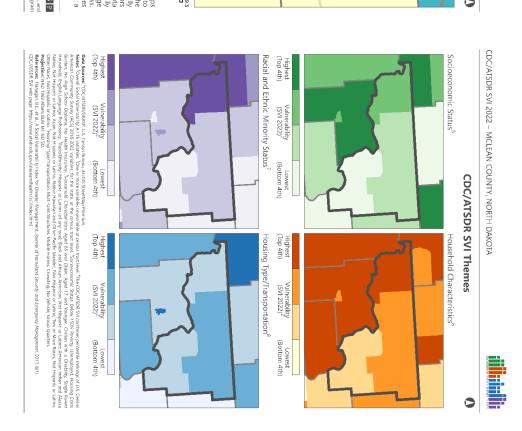
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# **Appendices**

# Appendix A: CDC/ATSDR Social Vulnerability Index 2022 for McLean, Oliver, and Sheridan Counties, ND





DN

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characteristics, housing, language ability, ethnicity, and vehicle access. Overall Social Vulnerability combines all the variables to provide a comprehensive assessment.

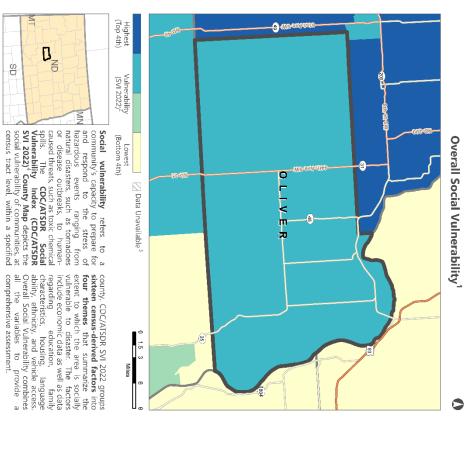
Geospatial Research, Analysis, and Services Program

GRASP

ATSDR Agency for Toxic Substances and Disease Registry

# CDC/ATSDR Social Vulnerability Index 2022

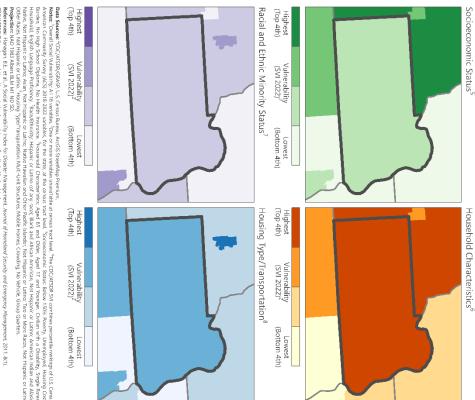
OLIVER COUNTY, NORTH DAKOTA



CDC/ATSDR SVI 2022 - OLIVER COUNTY, NORTH DAKOTA

**CDC/ATSDR SVI Themes** 





References: Hanagan, B.E., et al., A Social Vulnerability Index for Disaster Management, Journal of Homeland Security and Emergency Management, 2011. 8(1). CDC/NTSDR SM web page: https://www.abdr.cdc.gov/placeandhealtn/svi/index.html.

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Social vulnerability refers to a community's capacity to prepare for and respond to the stress of MN hazardous events ranging from natural disasters, such as tormadoes or disease outbreaks, to human-racused threats, such as toxic chemical polis. The CDC/ATSDR Social vulnerability Index (CDC/ATSDR SVI 2022) County Map depicts the social vulnerability of communities, at a census tract level, within a specified

a county. CDC/ATSDR SVI 2022 groups ristreen census-derived factors into four themes that summarize the extent to which the area is socially vulnerable to disaster. The factors include economic data as well as data regarding education.

characteristics, housing, language ability, ethnicity, and vehicle access. Overall Social Vulnerability combines all the variables to provide a comprehensive assessment.

Geospatial Research, Analysis, and Services Program

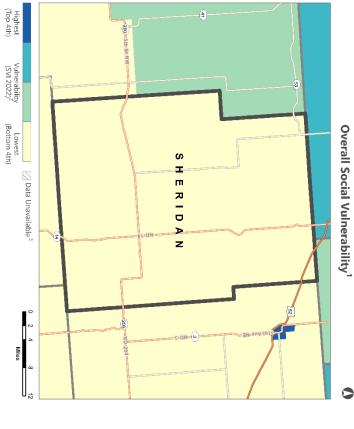
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ATSDR Agency for Toxic Substances and Disease Registry

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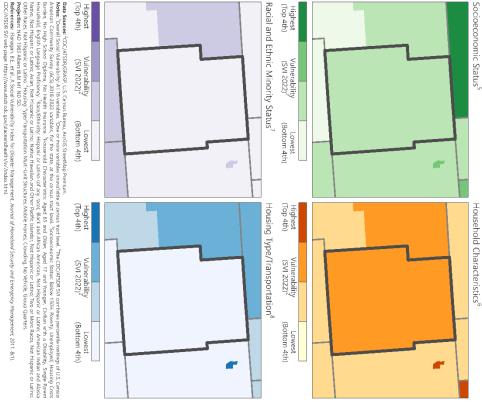
# CDC/ATSDR Social Vulnerability Index 2022

SHERIDAN COUNTY, NORTH DAKOTA



CDC/ATSDR SVI 2022 - SHERIDAN COUNTY, NORTH DAKOTA







### Appendix B: Secondary Data Tables for Oliver County

Table B1: Population Estimates, Oliver County, ND, North Dakota, and United States, by Age, Race/Ethnicity, and Sex (2022) **Oliver County Oliver County North Dakota United States Population** Percentages **Age Group Percentages** Percentages 0-4 128 7.0% 6.7% 5.7% 5-17 343 18.7% 16.9% 16.4% 18-24 76 4.1% 11.3% 9.4% 25-44 321 17.5% 27.1% 26.6% 45-64 506 27.6% 22.2% 25.3% 65 and older 458 25.0% 15.9% 16.5% Total 1,832 100.0% 100.0% 100.0% Race and Ethnicity\* White, non-Hispanic alone 1,683 91.9% 83.0% 58.9% American Indian and Alaska 8 4.7% 0.8% Native alone 0.4% 6 1.6% 5.8% Asian alone 0.3% Black or African American 0 0.0% 3.2% 12.5% alone Native Hawaiian and Pacific 7 0.2% 0.2% 0.4% Islander alone 0.0% 1.4% 6.0% Some other race alone 0 Two or more races 128 7.0% 4.4% 8.8% Hispanic Origin (of any 3.3% 4.3% 18.7% 61 race) Sex Female 859 46.9% 48.6% 50.4% Male 973 53.1% 51.4% 49.6%

1.832

Table B2: Household Demographics, Oliver County, ND, North Dakota, and United States (2022)				
Item	Oliver County	North Dakota	United States	
Total households	698	320,038	125,736,353	
Owner-occupied housing rate	87.4%	63.2%	64.8%	
Average household size (persons per household)	2.6	2.3	2.6	
Median value of owned-occupied housing	\$226,900	\$232,500	\$281,900	
Median monthly owner costs (with mortgage)	\$1,683	\$1,653	\$1,828	
Median monthly owner costs (no mortgage)	\$604	\$551	\$584	
Median gross rent	\$594	\$912	\$1,268	
Median household income \$69,722 \$73,959 \$75,149				
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.				

100.0%

100.0%

Total

100.0%

<sup>\*</sup>Overlapping racial/ethnic categories mean that the percentages will not total to 100% of the population. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.



Household Characteristics	Oliver County Households	Percent of Oliver County Households*	Percent of North Dakota Households*	Percent of United States Households*
Households with children aged 0-17	211	30.2%	27.8%	30.2%
Households with adults aged 65+	299	42.8%	26.7%	30.8%
Householders living alone	122	17.5%	33.2%	28.3%
Householders aged 65+ living alone	66	9.5%	11.8%	11.5%

<sup>\*</sup>Overlapping household characteristics mean that the percentages of households will not total to 100% of the total number of households. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Table B4: Employment by Industry, Oliver County, ND (2022)				
Sector	Estimated Workers	Percent of Workforce		
Agriculture, forestry, fishing, hunting and mining	146	18.7%		
Educational services, Health care and social assistance	131	16.8%		
Transportation, warehousing, and utilities	97	12.4%		
Retail	58	7.4%		
Construction	52	6.7%		
Professional, scientific, technical, administrative, and waste management service	51	6.5%		
Arts, entertainment, recreation, accommodation and food service	50	6.4%		
Manufacturing	49	6.3%		
Public administration	39	5.0%		
Other	107	13.7%		
Total workforce	780	100.0%		
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.				

Table B5: Poverty Characteristics, Oliver County, ND, North Dakota, and United States (2022)					
Poverty Characteristics	Oliver County Estimate	Oliver County Percent*	North Dakota Percent*	United States Percent*	
All persons below poverty level (% of total population)	211	11.5%	10.8%	12.5%	
All persons below 200% poverty level (% of total population)	526	28.7%	24.7%	28.8%	
Children aged 0-17 below poverty level (% of children 0-17)	78	16.6%	11.3%	16.7%	
Adults aged 65 and older below poverty level (% of adults 65 and older)	64	14%	9.1%	10.0%	
Eligible recipients of free or reduced-price school lunch	61	23.8%	23.2%	50.8%	

\*Differing populations and overlapping categories mean that percentages will not total to 100%.
Sources: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates; 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute



Table B6: Educational Attainment for Persons Aged 25 and Older, Oliver County, ND, North Dakota, and United States (2022)

Level of Education Attained	Oliver County Estimate	Oliver County Percent of Population 25 and Older	North Dakota Percent of Population 25 and Older	United States Percent of Population 25 and Older	
Less than high school	69	5.4%	6.5%	10.9%	
High school diploma or GED	397	30.9%	26.1%	26.4%	
Some college or Associate's degree	541	42.1%	36.0%	28.5%	
Bachelor's degree	206	16%	22.3%	20.9%	
Graduate or professional degree	72	5.6%	9.1%	13.4%	
Total population aged 25 and older	1,285	100.0%	100.0%	100.0%	
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.					

Table B7: Health Behaviors, Oliver County, ND, North Dakota, and the United States (2021) **Health Behavior Oliver County North Dakota United States** 17% Adult Smoking 16% 15% **Adult Obesity** 37% 36% 34% Adult Excessive Drinking 20% 23% 18% Alcohol-Impaired Driving Deaths 75% 39% 26% Physical Inactivity<sup>1</sup> 25% 23% 25% Access to Exercise Opportunities<sup>2</sup> 45% 76% 84% Poor Mental Health Days<sup>3</sup> 3.9 4.0 4.8

**Table B8**: Due to Oliver County's small population, no reliable Cause of Death data exists.

Table B9: Other Health Factors, Oliver County, ND, North Dakota, and United States				
Description of Factor	Oliver County	North Dakota	United States	
Uninsured Rate, 2021	8%	9%	10%	
Medicaid Coverage, 2022	9.3%	11.9%	20.4%	
Unemployment Rate, 2022	3.3%	2.1%	3.7%	
Low Birthweight Rate, 2016-2022	-	7%	8%	
Annual Mammogram Rate, 2021 <sup>1</sup>	60%	53%	43%	
Annual Flu Shot Rate, 2021 <sup>2</sup>	31%	49%	46%	
Food Environment Index, 2019-2021 <sup>3</sup>	7.8	9.1	7.7	

Sources: US Census Bureau's Small Area Health Insurance Estimates (SAHIE) program, 2021; The Local Area Unemployment Statistics (LAUS) program of the Bureau of Labor Statistics, 2022; Map the Meal Gap, Feeding America, 2021; The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD) Tool, 2021

Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute.

<sup>&</sup>lt;sup>1</sup>Physical Inactivity refers to the percent of adults who report participating in no physical activity outside of work.

<sup>&</sup>lt;sup>2</sup>Access to Exercise Opportunities refers to the percent of adults who report living close to a park or recreation facility.

<sup>&</sup>lt;sup>3</sup>The average number of self-reported mentally unhealthy days in the past 30 days.

<sup>&</sup>lt;sup>1</sup>Percentage of female Medicare enrollees who received an annual mammogram.

<sup>&</sup>lt;sup>2</sup>Percent of Medicare enrollees who received an annual flu shot.

<sup>&</sup>lt;sup>3</sup>The Food Environment Index is a measure of food environment that combines food insecurity rates with rates of access to healthy foods. It is scored on a scale from 0 (worst) to 10 (best).

7.4



Community Resilience

National Risk Index

### Table B10: Number of Residents Per Health Care Provider in Oliver County, ND, North Dakota, and the United States **Type of Provider Oliver County North Dakota United States** Primary Care Physicians, 2021 1,870:0 1,290:1 1,330:1 Mental Health Care Providers, 2024 450:1 320:1 1,420:1 Dentists, 2022 1,860:0 1,360:1

Sources: Health Resources & Services Administration, Area Health Resource Files; CMS, National Provider Identification Registry.

Counties and U.S. Counties (2024)					
Index	Percentile within North Dakota	U.S. Percentile			
Expected Annual Loss	17.0	9.2			
Social Vulnerability	64.2	20.9			
Community Resilience	71.7	80.4			

Table B11: National Risk Index Percentiles for Oliver County, ND when compared to North Dakota

Note: The Risk Index can be read as "15.1% of counties in North Dakota have a lower Risk Index than Oliver County; 7.4% of U.S. counties have a lower Risk Index than Oliver County."

15.1

Sources: FEMA, National Risk Index; CDC/ATSDR Social Vulnerability Index 2022; University of South Carolina's Hazards and Vulnerability Research Institute (HVRI)'s Baseline Resilience Indicators for Communities (HVRI BRIC).



## Appendix C: Secondary Data Tables for Sheridan County

Table C1: Population Estimates, Sheridan County, ND, North Dakota, and United States, by Age, Race/Ethnicity, and Sex (2022)

Race/Ethnicity, and Sex (2022)						
	Sheridan County	Sheridan County	North Dakota	United States		
Age Group	Population	Percentages	Percentages	Percentages		
0-4	51	3.8%	6.7%	5.7%		
5-17	153	11.4%	16.9%	16.4%		
18-24	80	6.0%	11.3%	9.4%		
25-44	262	19.6%	27.1%	26.6%		
45-64	344	25.7%	22.2%	25.3%		
65 and older	448	33.5%	15.9%	16.5%		
Total	1,338	100.0%	100.0%	100.0%		
Race and Ethnicity*						
White, non-Hispanic alone	1,280	95.7%	83.0%	58.9%		
American Indian and Alaska Native alone	18	1.3%	4.7%	0.8%		
Asian alone	0	0.0%	1.6%	5.8%		
Black or African American alone	0	0.0%	3.2%	12.5%		
Native Hawaiian and Pacific Islander alone	0	0.0%	0.2%	0.2%		
Some other race alone	0	0.0%	1.4%	6.0%		
Two or more races	38	2.8%	4.4%	8.8%		
Hispanic Origin (of any race)	6	0.4%	4.3%	18.7%		
Sex						
Female	656	49.0%	48.6%	50.4%		
Male	682	51.0%	51.4%	49.6%		
Total	1,338	100.0%	100.0%	100.0%		
*Overlanning regial/otheric entergories many that the percentages will not total to 100% of the penulation						

<sup>\*</sup>Overlapping racial/ethnic categories mean that the percentages will not total to 100% of the population. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Table C2: Household Demographics, Sheridan County, ND, North Dakota, and United States (2022)					
liam.	Sheridan	Novth Dekete	United States		
Item	County	North Dakota	United States		
Total households	644	320,038	125,736,353		
Owner-occupied housing rate	82.9%	63.2%	64.8%		
Average household size (persons per household)	2.1	2.3	2.6		
Median value of owned-occupied housing	\$108,500	\$232,500	\$281,900		
Median monthly owner costs (with mortgage)	\$1,477	\$1,653	\$1,828		
Median monthly owner costs (without mortgage)	\$455	\$551	\$584		
Median gross rent	\$439	\$912	\$1,268		
Median household income	\$68,684	\$73,959	\$75,149		
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.					



Household Characteristics	Sheridan County Households	Percent of Sheridan County Households*	Percent of North Dakota Households*	Percent of United States Households*
Households with children aged 0-17	105	16.3%	27.8%	30.2%
Households with adults aged 65 and older	327	50.8%	26.7%	30.8%
Householders living alone	234	36.3%	33.2%	28.3%
Householders aged 65 and older living alone	149	23.1%	11.8%	11.5%

<sup>\*</sup>Overlapping household characteristics mean that the percentages of households will not total to 100% of the total number of households. Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Table C4: Employment by Industry, Sheridan County, ND (2022)					
Sector	Estimated Workers	Percent of Workforce			
Agriculture, forestry, fishing, hunting and mining	172	27.3%			
Educational services, Health care and social assistance	115	18.3%			
Construction	96	15.3%			
Retail	51	8.1%			
Transportation and warehousing, and utilities	37	5.9%			
Arts, entertainment, recreation, accommodation and food service					
	36	5.7%			
Other	122	19.4%			
Total workforce	629	100.0%			
Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.					

Table C5: Poverty Characteristics, Sheridan County, ND, North Dakota, and United States (2022)				
Poverty Characteristics	Sheridan County Estimate	Sheridan County Percent*	North Dakota Percent*	United States Percent*
All persons below poverty level (% of total population)	92	6.9%	10.8%	12.5%
All persons below 200% of poverty (% of total population)	300	22.6%	24.7%	28.8%
Children aged 0-17 below poverty (% of children 0-17)	9	4.6%	11.3%	16.7%
Adults aged 65 and older below poverty level (% of adults 65 and older)	31	6.9%	9.1%	10.0%
Eligible recipients of free or reduced- price school lunch	40	35.7%	23.2%	50.8%

\*Differing populations and overlapping categories mean that percentages will not total to 100%.

Sources: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates; 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute

Table C6: Educational Attainment for Persons Aged 25 and Older, Sheridan County, ND, North Dakota, and United States (2022)

Level of Education Attained	Sheridan County Estimate	Sheridan County Percent of Population 25 and Older	North Dakota Percent of Population 25 and Older	United States Percent of Population 25 and Older
Less than high school	101	9.6%	6.5%	10.9%
High school diploma or GED	421	39.9%	26.1%	26.4%
Some college or Associate's degree	381	36.1%	36.0%	28.5%
Bachelor's degree	143	13.6%	22.3%	20.9%
Graduate or professional degree	8	0.8%	9.1%	13.4%
Total population aged 25 and older	1,054	100.0%	100.0%	100.0%
Source: U.S. Census Bureau, 2018-2022 American Com	munity Survey (A0	CS) 5-year estimates.		

Table C7: Health Behaviors, Sheridan Coul	tv. ND. North Dakota	a. and the United States (2021)
		,

Health Behavior	Sheridan County	North Dakota	United States
Adult Smoking	18%	16%	15%
Adult Obesity	36%	36%	34%
Adult Excessive Drinking	17%	23%	18%
Alcohol-Impaired Driving Deaths	0%	39%	26%
Physical Inactivity <sup>1</sup>	26%	25%	23%
Access to Exercise Opportunities <sup>2</sup>	38%	76%	84%
Poor Mental Health Days <sup>3</sup>	3.9	4.0	4.8

Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute.

**Table C8**: Due to Sheridan County's small population, no reliable Cause of Death data exist.

Description of Factor	Sheridan County	North Dakota	United States
Uninsured Rate, 2021	13%	9%	10%
Medicaid Coverage, 2022	12.3%	11.9%	20.4%
Unemployment Rate, 2022	2.6%	2.1%	3.7%
Low Birthweight Rate, 2016-2022	-	7%	8%
Annual Mammogram Rate, 2021 <sup>1</sup>	44%	53%	43%
Annual Flu Shot Rate, 2021 <sup>2</sup>	42%	49%	46%
Food Environment Index, 2019-2021 <sup>3</sup>	7.1	9.1	7.7

Sources: US Census Bureau's Small Area Health Insurance Estimates (SAHIE) program, 2021; The Local Area Unemployment Statistics (LAUS) program of the Bureau of Labor Statistics, 2022; Map the Meal Gap, Feeding America, 2021; The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD) Tool, 2021; NDHHS COVID-19 Vaccine Dashboard; CDC COVIDVaxView

<sup>&</sup>lt;sup>1</sup>Physical Inactivity refers to the percent of adults who report participating in no physical activity outside of work.

<sup>&</sup>lt;sup>2</sup>Access to Exercise Opportunities refers to the percent of adults who report living close to a park or recreation facility.

<sup>&</sup>lt;sup>3</sup>The average number of self-reported mentally unhealthy days in the past 30 days.

<sup>&</sup>lt;sup>1</sup>Percentage of female Medicare enrollees who received an annual mammogram.

<sup>&</sup>lt;sup>2</sup>Percent of Medicare enrollees who received an annual flu shot.

<sup>&</sup>lt;sup>3</sup>The Food Environment Index is a measure of food environment that combines food insecurity rates with rates of access to healthy foods. It is scored on a scale from 0 (worst) to 10 (best).



Table C10: Number of Residents Per Health Care Provider in Sheridan County, ND, North Dakota, and the United States								
Type of Provider	Sheridan County	North Dakota	United States					
Primary Care Physicians, 2021	1,270:0	1,290:1	1,330:1					
Mental Health Care Providers, 2024	-	450:1	320:1					
Dentists, 2022	1,300:0	1,420:1	1,360:1					
Sources: Health Resources & Services Administration, Area	a Health Resource Files; CMS,	National Provider Identification	Registry.					

Table C11: National Risk Index Percentiles for Sheridan County, ND when compared to North Dakota	
Counties and U.S. Counties (2024)	

Index	Percentile within North Dakota	U.S. Percentile
Expected Annual Loss	52.8	31.2
Social Vulnerability	13.2	3.3
Community Resilience	24.5	41.7
National Risk Index	47.2	21.9

Note: The Risk Index can be read as "47.2% of counties in North Dakota have a lower Risk Index than Sheridan County; 21.9% of U.S. counties have a lower Risk Index than Sheridan County."

Sources: FEMA, National Risk Index; CDC/ATSDR Social Vulnerability Index 2022; University of South Carolina's Hazards and Vulnerability Research Institute (HVRI)'s Baseline Resilience Indicators for Communities (HVRI BRIC).



### Appendix D: Survey Instrument

Please note: the instrument below has been formatted to allow for mail completion and may look slightly different than presented online. The questions are the same.

# **COMMUNITY HEALTH NEEDS ASSESSMENT 2024**

Every three years, we conduct a Community Health Needs Assessment (CHNA) to better understand health and well-being at individual and community levels. This survey will ask you a few questions about the challenges in your community, and how you think they should be approached. It will also ask a few questions about you, so we can understand more about your individual experiences as they relate to your health and well-being. There are no wrong answers to these questions, and your answers are anonymous. Your name will not be on any reports, and your answers will be grouped with those from other people who respond.

This survey will take about 10 minutes to complete. Your participation is voluntary. If you do not want to participate at all, or if you do not want to answer a particular question, that's okay. If you choose to do the survey, your answers will be kept anonymous and confidential and will be used only to answer questions related to the purpose of this study. What we learn from the survey will be used to plan communication strategies to help people in your community.

You have the option to include your email address in a gift card prize draw! Simply complete the survey, include your email address at the end, and return the survey to us for your chance to win!

Your contact information will not be used for any other purpose than the prize draw. It will not be used in analysis or reporting.

If you have any trouble with any question, please refer to the following resources:

#### **Center for Social Research**

Nancy Hodur nancy.hodur@ndsu.edu (701) 231-8621

Kaeleigh Schroeder kaeleigh.schroeder@ndsu.edu

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**CommonSpirit Healthy Communities liaison** 

Ashley Carroll ashley.carroll@commonspirit.org

Completing the survey means that you give your consent to participate in this Community Health Needs Assessment.

# COMMUNITY HEALTH NEEDS ASSESSMENT

What is your zip code?						
What is the state where you live?						
What is the county where you live?						
Please indicate your level of agreement for community.	each of the	following sta	atements abo	out the people	e in your	
			Neither			
	Strongly Disagree	Somewhat Disagree	Agree nor Disagree	Somewhat Agree	Strongly Agree	I don't know
My community is culturally diverse						
People feel welcome and accepted in my community						
There is a sense of civic responsibility and engagement in my community						
The people in my community have a shared vision and community goals						
Is there anything you would like to add abo	out the peop	ole in your co	mmunity?			
						_
						_



Please indicate your level of agreement for each of the following statements about services in your community.

	Neither					
	Strongly Disagree	Somewhat Disagree	Agree nor Disagree	Somewhat Agree	Strongly Agree	I don't know
My community has adequate opportunities						
for recreation and leisure for all ages	Ш				ш	
My community has a thriving business						
district with access to needed goods and						
services						
My community provides adequate public						
services like snow removal, garbage						
collection, or recycling						
My community has adequate child care services						
My community has adequate senior services						
My community has a quality education system						
My community has adequate public						
transportation services	Ц	Ц	Ц	Ш	Ц	
My community has adequate employment						
opportunities that pay a livable wage	Ш				ш	
My community has adequate law						
enforcement.	Ш				ш	
My community has enough affordable						
housing for everyone who needs it						
My community has adequate access to						
healthy and affordable foods	<u> </u>				<u> </u>	
Is there anything you would like to add abo	ut services i	n your comm	unity?			
						-
						_



How concerned are you about each of the following in your community?

	Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	I don't know	Not applicable to my community
Substance misuse (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs)						
Mental health (anxiety, stress, depression)						
Suicide						
Access to healthy foods						
Food insecurity, hunger						
Poverty in my community						
Sexually transmitted diseases						
Crime in my community						
Availability of long-term care or assisted living facilities						
Availability of elder care services to support independent living, or aging in place		_				
Obesity or overweightness						
Negative effects of social media						
Are there other issues in your commu	unity that yo	u are concern	ned about?			

# COMMUNITY HEALTH NEEDS ASSESSMENT

How concerned are you about the following types of violence in your community?

	Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	l don't know	Not applicable to my community	
Cyber bullying							
Child abuse or neglect							
Intimate partner violence							
Emotional abuse (including: intimidation, isolation, verbal threats, economic abuse/withholding funds)							
Sexual abuse or assault							
Stalking							
Verbal threats or harassment							
Gun violence							
Are there other types of violence in your community that you are concerned about?							



Please indicate your level of agreement with the following issues related to medical services in your community.

			Neither			
	Strongly Disagree	Somewhat Disagree	Agree nor Disagree	Somewhat Agree	Strongly Agree	I don't know
It is easy to get an appointment for health						
care services in my community	<u>—</u>				<u>-</u>	
My community has adequate primary care providers and nurses						
My community has adequate health care services to meet my health care needs						
My community has adequate dental care providers						
My community has adequate vision care providers						
My community has adequate mental health services						
My community has adequate access to emergency response services such as ambulance or fire fighters						
I can easily navigate the health care system in my community						
I receive quality health care in my community						
In my community, care is well-coordinated across providers and services						
Do you have any other concerns about acc	cess to heal	lth care servi	ces in your c	ommunity?		



Which preventative health care measures have you received	l in the last y	year? Select all that	apply.	
☐ Vaccinations ☐ Annual physical exam	,	Counseling for toba	vioral health	nol use,
☐ Mammogram		Depression screening	ıg	
☐ Colonoscopy		STD/STI screening		
☐ Blood pressure or cholesterol screening		Vision exam		
		Dental exam/annua	l checkup	
To what degree are each of the following a barrier to your a	bility to acce	ess health care servi	ces?	
	Not at all a barrier	Somewhat of a barrier	Extreme barrier	l don't know
Transportation to health services locations				
Availability of local services to meet my health care needs				
Ability to see the same provider over time				
Scheduling health care services within clinic hours				
The price of prescription drugs, even with insurance				
The price of health care services (such as co-payments or deductibles), even with health insurance				
Communication or language barriers				
Difficulty using or accessing technology to communicate with provider or system				
Concerns about confidentiality				
Disability accommodations				
Health insurance coverage				
The length of time to see a provider, from making an appointment to attending the appointment				
Distance to access care				
Are there other barriers to your ability to access health care	in your com	munity?		-
				_



Do you cur	rently have a primary care doctor?		
	Yes		
	No		
	Prefer not to respond		
Where do	you find out about health information? Select all that apply	٧.	
	Primary care provider		My employer
	Other health care providers		Newspaper
	Public health professionals		Radio
	Internet sources		Other (please specify
	Word of mouth		
	Advertising, such as TV commercials		)
What type	of health insurance coverage do you currently have? Selec	t all	that apply.
	Commercial private health insurance (coverage purchased	by y	ou or your employer)
	Medicare		
	Medicaid etc.)		
	Indian Health Service (IHS)		
	Military (Tricare, Champus, VA)		
	Other (please specify)		
	No health insurance (GO TO Q3.7)		
	Prefer not to say		
	u NOT have health insurance? Select all that apply.		
_	OT RESPOND IF YOU DO HAVE HEALTH INSURANCE		
	Too expensive		
	Too difficult or complex to obtain health insurance		
	I have a pre-existing condition that is not covered		
	I am healthy and do not need insurance		
	I do not qualify for Medicaid		
	I was disenrolled from Medicaid		
	Another reason (please specify)		
Ц	Prefer not to say		
What spec	ific health care services, if any, do you think should be adde	ed lo	ocally?
-	-		

Dia you mo	ve to your cor	mmunity in the	past year?				
	Yes						
	No (GO TO Q	4.3)					
	Prefer not to	respond ( <b>GO TO</b>	Q4.3)				
How difficu	It was it to do	the following?					
		Not difficult	Slightly	Somewhat	Very	I don't know/I'm	Not applicable
		at all	difficult	difficult	difficult	not sure	to me
nroll children	in school						
ind housing							
ind healthcar	е						
ind a job							
ind childcare							
Have you ex	xperienced dis	scrimination in t	the past 12 m	onths?			
	Yes						
	No (GO TO Q	4.6)					
	Prefer not to	respond ( <b>GO TO</b>	Q4.6)				
		experienced dis	scrimination?	Select all that a			
	Race				☐ Disab	•	
	Ethnicity				☐ Religi		
	Sex				☐ Anot	ner area (specify:	
	Gender identi	ity					
	Sexual orienta	ation				)	
	Age				☐ Prefe	r not to say	
	Weight						
In which of	the following	situations did y	ou experienc	e discrimination	n? Select all	that apply.	
	Applying for a	a job					
	At a job, work	or my place of	employment				
	Receiving me	dical care					
	Looking for ho	ousing					
	Applying for a	credit card, bar	nk loan, or mo	rtgage			
	Shopping at a	store or eating	at a restaurar	nt			
		ocial services or					
	Interacting wi		•				
	Appearing in						
		(specify)					
	Prefer not to						
_		,					



Not difficult at all   Slightly difficult   Somewhat difficult   Very difficult   I don't know/l'm not sure    In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?   Yes   No   Prefer not to say    What is your age?   Male   Female   Prefer not to say    What is your gender?   Male   Prefer not to say    Which one of these groups best represents your race? Select all that apply.   American Indian or Alaska Native   Black or African American   Asian   Native Hawaiian or Pacific Islander   Two or more races   White   Other (please describe: )    Do you identify as Hispanic, Latine, or of Spanish origin?   Yes   No   Prefer not to say    What is your estimated household income?	How difficu	ult is it for you to pay for heating, housing, or m	nedical care?	
Somewhat difficult   very difficult   Idon't know/l'm not sure  In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?   Yes   No   Prefer not to say  What is your age?   Male   Female   Non-binary/third gender   Other (please describe:)   Prefer not to say  Whith one of these groups best represents your race? Select all that apply.   American Indian or Alaska Native   Black or African American   Asian   Native Hawaiian or Pacific Islander   Two or more races   White   Other (please describe:)  Do you identify as Hispanic, Latine, or of Spanish origin?   Yes   No   Prefer not to say		Not difficult at all		
Somewhat difficult   very difficult   Idon't know/l'm not sure  In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?   Yes   No   Prefer not to say  What is your age?   Male   Female   Non-binary/third gender   Other (please describe:)   Prefer not to say  Whith one of these groups best represents your race? Select all that apply.   American Indian or Alaska Native   Black or African American   Asian   Native Hawaiian or Pacific Islander   Two or more races   White   Other (please describe:)  Do you identify as Hispanic, Latine, or of Spanish origin?   Yes   No   Prefer not to say		Slightly difficult		
I don't know/i'm not sure  In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?   Yes				
I don't know/i'm not sure  In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?   Yes		Very difficult		
In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?    Yes		•		
in a place not meant for sleeping?    Yes		·		
No			lter, in your car,	at a family member or friend's house, or
What is your age?  What is your gender?  Male Female Non-binary/third gender Other (please describe: Prefer not to say  Which one of these groups best represents your race? Select all that apply.  American Indian or Alaska Native Black or African American Asian Native Hawaiian or Pacific Islander Two or more races White Other (please describe: No Prefer not to say		Yes		
What is your gender?  What is your gender?  Male Female Non-binary/third gender Other (please describe: Prefer not to say  Which one of these groups best represents your race? Select all that apply.  American Indian or Alaska Native Black or African American Asian Native Hawaiian or Pacific Islander Two or more races White Other (please describe:  Do you identify as Hispanic, Latine, or of Spanish origin?  Yes No Prefer not to say		No		
What is your gender?    Male		Prefer not to say		
Male   Female   Non-binary/third gender   Other (please describe:)   Prefer not to say   Which one of these groups best represents your race? Select all that apply.   American Indian or Alaska Native   Black or African American   Asian   Native Hawaiian or Pacific Islander   Two or more races   White   Other (please describe:)   Do you identify as Hispanic, Latine, or of Spanish origin?   Yes   No   Prefer not to say	What is yo	ur age?		
Male   Female   Non-binary/third gender   Other (please describe:)   Prefer not to say   Which one of these groups best represents your race? Select all that apply.   American Indian or Alaska Native   Black or African American   Asian   Native Hawaiian or Pacific Islander   Two or more races   White   Other (please describe:)   Do you identify as Hispanic, Latine, or of Spanish origin?   Yes   No   Prefer not to say	_		_	
Female   Non-binary/third gender   Other (please describe:	What is yo	ur gender?		
Non-binary/third gender   Other (please describe:		Male		
Other (please describe:) Prefer not to say  Which one of these groups best represents your race? Select all that apply.  American Indian or Alaska Native Black or African American Asian Native Hawaiian or Pacific Islander Two or more races White Other (please describe:)  Do you identify as Hispanic, Latine, or of Spanish origin?  Yes No Prefer not to say		Female		
<ul> <li>□ Prefer not to say</li> <li>Which one of these groups best represents your race? Select all that apply.</li> <li>□ American Indian or Alaska Native</li> <li>□ Black or African American</li> <li>□ Asian</li> <li>□ Native Hawaiian or Pacific Islander</li> <li>□ Two or more races</li> <li>□ White</li> <li>□ Other (please describe:</li></ul>				
Which one of these groups best represents your race? Select all that apply.  American Indian or Alaska Native Black or African American Asian Native Hawaiian or Pacific Islander Two or more races White Other (please describe:  Po you identify as Hispanic, Latine, or of Spanish origin?  Yes No Prefer not to say		Other (please describe:		)
☐ American Indian or Alaska Native   ☐ Black or African American   ☐ Asian   ☐ Native Hawaiian or Pacific Islander   ☐ Two or more races   ☐ White   ☐ Other (please describe:		Prefer not to say		
□ Black or African American   □ Asian   □ Native Hawaiian or Pacific Islander   □ Two or more races   □ White   □ Other (please describe:	Which one	of these groups best represents your race? Sel	ect all that apply	<i>/</i> •
Asian Native Hawaiian or Pacific Islander Two or more races White Other (please describe:)  Do you identify as Hispanic, Latine, or of Spanish origin? Yes No Prefer not to say		American Indian or Alaska Native		
Native Hawaiian or Pacific Islander Two or more races White Other (please describe:  Do you identify as Hispanic, Latine, or of Spanish origin?  Yes No Prefer not to say		Black or African American		
<ul> <li>□ Two or more races</li> <li>□ White</li> <li>□ Other (please describe:)</li> </ul> Do you identify as Hispanic, Latine, or of Spanish origin? <ul> <li>□ Yes</li> <li>□ No</li> <li>□ Prefer not to say</li> </ul>		Asian		
<ul> <li>□ White</li> <li>□ Other (please describe:)</li> <li>Do you identify as Hispanic, Latine, or of Spanish origin?</li> <li>□ Yes</li> <li>□ No</li> <li>□ Prefer not to say</li> </ul>		Native Hawaiian or Pacific Islander		
Other (please describe:)  Do you identify as Hispanic, Latine, or of Spanish origin?  Yes No Prefer not to say		Two or more races		
Do you identify as Hispanic, Latine, or of Spanish origin?  Yes  No Prefer not to say		White		
☐ Yes ☐ No ☐ Prefer not to say		Other (please describe:		)
☐ No ☐ Prefer not to say	Do you ide	ntify as Hispanic, Latine, or of Spanish origin?		
☐ Prefer not to say		Yes		
		No		
What is your estimated household income?		Prefer not to say		
	What is yo	ur estimated household income?		
□ Less than \$15,000 □ \$75,000 - \$99,999	П	Less than \$15.000	П	\$75.000 - \$99.999
□ \$15,000 - \$24,999 □ \$100,000 - \$149,999				
□ \$25,000 - \$49,999 □ \$150,000 and over			_	
□ \$50,000 - \$74,999 □ Prefer not to say			_	



Wha	t is the	e highest level of education you have completed?		
		Less than 9th Grade 9th to 12th Grade, no diploma High school graduate or equivalent Some college, no degree		Associate's degree Bachelor's degree Graduate or professional degree Prefer not to say
Whi	ch of th	nese categories best describes your employment sta	tus	?
		Employed full time Employed part time Unemployed Retired		Student Disabled Prefer not to say
Wha	t is yo	ur marital status?		
		Single Married or in a domestic partnership Divorced or separated Widowed Prefer not to say		
	-	people live in your household? Use numbers only. In the second of the se	f yo	u live alone, put "1".
<i></i> ,		Yes No Prefer not to say		
How	did yo	ou access this survey?		
	Hospit Hospit Econo Church Other Newsl	tal or public health website  tal or public health social media page (e.g., Facebook)  tal or public health employee directly  mic development website or social media  h bulletin  website or social media page (please specify)  etter (please specify from where)  paper advertisement  of mouth		
	Direct	email (please specify from where)er way (please specify)		



-	ld like to ente	 	 	
-		 	 	 
-		 	 	 
-		 	 	 
			 	 <del></del>

Thanks for completing our survey!
We appreciate your time, and your responses will help inform health care decisions in your community.

If you entered your name to be included in our draw, we'll contact the winners BY EMAIL once the survey has closed. Good luck!



# Appendix E: Survey Frequencies

Completing the	Completing the survey means that you give your consent to participate in this Community Health Needs Assessment.						
Frequency Percent Valid Percent Cumulative Percent							
Valid	I consent	42	100.0%	100.0%	100.0%		

What is you	r zip code?				
		Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>
Valid					
	58463	1	2.4%	2.4%	21.4%
	58531	1	2.4%	2.4%	23.8%
	58559	2	4.8%	4.8%	28.6%
	58565	1	2.4%	2.4%	31.0%
	58575	25	59.5%	59.5%	90.5%
	58577	2	4.8%	4.8%	95.2%
	58579	1	2.4%	2.4%	97.6%
	58778	1	2.4%	2.4%	100.0%
	Total	42	100.0%	100.0%	

What is the state	What is the state in which you live?									
		Frequency	Percent	Valid Percent	Cumulative Percent					
Valid	North Dakota	42	100.0%	100.0%	100.0%					

What is the county where you live in North Dakota?									
		Frequency	Percent	Valid Percent	Cumulative Percent				
Valid	McLean	41	97.6%	97.6%	97.6%				
	Sheridan	1	2.4%	2.4%	100.0%				
Total	•	42	100.0%	100.0%					



## **People in Your Community**

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for each	Count	3	13	10	11	3	40
of the following statements about the people in your community My community is culturally diverse	Row N %	7.5%	32.5%	25.0%	27.5%	7.5%	100.0%
Please indicate your level of agreement for each	Count	0	2	5	17	18	42
of the following statements about the people in your community People feel welcome and accepted in my community	Row N %	0.0%	4.8%	11.9%	40.5%	42.9%	100.0%
Please indicate your level of agreement for each	Count	0	4	5	11	22	42
of the following statements about the people in your community There is a sense of civic responsibility and engagement in my community	Row N %	0.0%	9.5%	11.9%	26.2%	52.4%	100.0%
Please indicate your level of agreement for each	Count	1	2	7	20	11	41
of the following statements about the people in your community The people in my community have a shared vision and community goals	Row N %	2.4%	4.9%	17.1%	48.8%	26.8%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: People in your community - My community is	Count	16	10	14	40
culturally diverse	Row N %	40.0%	25.0%	35.0%	100.0%
RECODE: People in your community - People feel welcome	Count	2	5	35	42
and accepted in my community	Row N %	4.8%	11.9%	83.3%	100.0%
RECODE: People in your community - There is a sense of civic	Count	4	5	33	42
responsibility and engagement in my community	Row N %	9.5%	11.9%	78.6%	100.0%
RECODE: People in your community - The people in my	Count	3	7	31	41
community have a shared vision and community goals	Row N %	7.3%	17.1%	75.6%	100.0%



## **Services in Your Community**

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for	Count	3	13	9	11	6	42
each of the following statements about services in your community My community has adequate opportunities for recreation and leisure for all ages	Row N %	7.1%	31.0%	21.4%	26.2%	14.3%	100.0%
Please indicate your level of agreement for	Count	4	8	6	20	4	42
each of the following statements about services in your community My community has a thriving business district with access to needed goods and services	Row N %	9.5%	19.0%	14.3%	47.6%	9.5%	100.0%
Please indicate your level of agreement for	Count	1	6	5	15	15	42
each of the following statements about services in your community My community provides adequate public services like snow removal, garbage collection, or recycling	Row N %	2.4%	14.3%	11.9%	35.7%	35.7%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community My community has adequate child care services	Count	13	17	6	3	2	41
	Row N %	31.7%	41.5%	14.6%	7.3%	4.9%	100.0%
Please indicate your level of agreement for	Count	5	8	10	16	2	41
each of the following statements about services in your community My community has adequate senior services	Row N %	12.2%	19.5%	24.4%	39.0%	4.9%	100.0%
Please indicate your level of agreement for	Count	1	3	8	10	20	42
each of the following statements about services in your community My community has a quality education system	Row N %	2.4%	7.1%	19.0%	23.8%	47.6%	100.0%
Please indicate your level of agreement for	Count	14	12	9	6	0	41
each of the following statements about services in your community My community has adequate public transportation services	Row N %	34.1%	29.3%	22.0%	14.6%	0.0%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community My community has adequate employment opportunities that pay a livable wage	Count	3	16	6	12	4	41
	Row N %	7.3%	39.0%	14.6%	29.3%	9.8%	100.0%

# COMMUNITY HEALTH NEEDS ASSESSMENT

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for	Count	1	6	8	12	14	41
each of the following statements about services in your community My community has adequate law enforcement	Row N %	2.4%	14.6%	19.5%	29.3%	34.1%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community My community has enough affordable housing for everyone who needs it	Count	5	12	7	12	5	41
	Row N %	12.2%	29.3%	17.1%	29.3%	12.2%	100.0%
Please indicate your level of agreement for	Count	2	5	3	14	17	41
each of the following statements about services in your community My community has adequate access to healthy and affordable foods	Row N %	4.9%	12.2%	7.3%	34.1%	41.5%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Services in your community - My community has	Count	16	9	17	42
adequate opportunities for recreation and leisure for all ages	Row N %	38.1%	21.4%	40.5%	100.0%
RECODE: Services in your community - My community has	Count	12	6	24	42
a thriving business district with access to needed goods and services	Row N %	28.6%	14.3%	57.1%	100.0%
RECODE: Services in your community - My community	Count	7	5	30	42
provides adequate public services like snow removal, garbage collection, or recycling	Row N %	16.7%	11.9%	71.4%	100.0%
RECODE: Services in your community - My community has	Count	30	6	5	41
adequate child care services	Row N %	73.2%	14.6%	12.2%	100.0%
RECODE: Services in your community - My community has	Count	13	10	18	41
adequate senior services	Row N %	31.7%	24.4%	43.9%	100.0%
RECODE: Services in your community My community has	Count	4	8	30	42
a quality education system	Row N %	9.5%	19.0%	71.4%	100.0%
RECODE: Services in your community My community has	Count	26	9	6	41
adequate public transportation services	Row N %	63.4%	22.0%	14.6%	100.0%
	Count	19	6	16	41



		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Services in your community My community has adequate employment opportunities that pay a livable wage	Row N %	46.3%	14.6%	39.0%	100.0%
RECODE: Services in your community My community has	Count	7	8	26	41
adequate law enforcement	Row N %	17.1%	19.5%	63.4%	100.0%
RECODE: Services in your community My community has	Count	17	7	17	41
enough affordable housing for everyone who needs it	Row N %	41.5%	17.1%	41.5%	100.0%
RECODE: Services in your community My community has	Count	7	3	31	41
adequate access to healthy and affordable foods	Row N %	17.1%	7.3%	75.6%	100.0%

## **Community Concerns**

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about each of the	Count	3	8	13	18	42
following in your community? - Substance misuse (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs)	Row N %	7.1%	19.0%	31.0%	42.9%	100.0%
How concerned are you about each of the following in your community? - Mental health (anxiety, stress, depression)	Count	5	8	21	8	42
	Row N %	11.9%	19.0%	50.0%	19.0%	100.0%
How concerned are you about each of the	Count	6	12	18	2	38
ollowing in your community? - Suicide	Row N %	15.8%	31.6%	47.4%	5.3%	100.0%
How concerned are you about each of the	Count	15	9	12	4	40
following in your community? - Access to healthy foods	Row N %	37.5%	22.5%	30.0%	10.0%	100.0%
How concerned are you about each of the	Count	16	11	10	1	38
following in your community? - Food insecurity or hunger	Row N %	42.1%	28.9%	26.3%	2.6%	100.0%
How concerned are you about each of the	Count	7	14	14	5	40
following in your community? - Poverty in my community	Row N %	17.5%	35.0%	35.0%	12.5%	100.0%
How concerned are you about each of the	Count	18	7	4	1	30
following in your community? - Sexually transmitted diseases or infections	Row N %	60.0%	23.3%	13.3%	3.3%	100.0%
	Count	13	14	12	2	41



		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about each of the following in your community? - Crime in my community	Row N %	31.7%	34.1%	29.3%	4.9%	100.0%
How concerned are you about each of the	Count	15	4	13	9	41
following in your community? - Availability of long-term care or assisted living facilities	Row N %	36.6%	9.8%	31.7%	22.0%	100.0%
How concerned are you about each of the	Count	5	9	15	9	38
following in your community? - Availability of elder care services to support independent living, or aging in place	Row N %	13.2%	23.7%	39.5%	23.7%	100.0%
How concerned are you about each of the	Count	5	8	18	10	41
following in your community? - Obesity or overweightness	Row N %	12.2%	19.5%	43.9%	24.4%	100.0%

## **Violence Concerns in Community**

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about the	Count	7	9	16	5	37
following types of violence in your community? - Cyber bullying	Row N %	18.9%	24.3%	43.2%	13.5%	100.0%
How concerned are you about the	Count	6	14	9	8	37
following types of violence in your community? - Child abuse or neglect	Row N %	16.2%	37.8%	24.3%	21.6%	100.0%
How concerned are you about the	Count	13	12	8	1	34
following types of violence in your community? - Intimate partner violence	Row N %	38.2%	35.3%	23.5%	2.9%	100.0%
How concerned are you about the	Count	10	14	9	3	36
following types of violence in your community? - Emotional abuse (including intimidation or isolation)	Row N %	27.8%	38.9%	25.0%	8.3%	100.0%
How concerned are you about the	Count	15	13	5	1	34
following types of violence in your community? - Sexual abuse or assault	Row N %	44.1%	38.2%	14.7%	2.9%	100.0%
How concerned are you about the	Count	23	7	5	1	36
following types of violence in your community? - Stalking	Row N %	63.9%	19.4%	13.9%	2.8%	100.0%



		Not concerned at	Slightly	Somewhat	Very	Total
		all	concerned	concerned	concerned	
How concerned are you about the	Count	14	15	7	2	38
following types of violence in your community? - Verbal threats or harassment	Row N %	36.8%	39.5%	18.4%	5.3%	100.0%
How concerned are you about the	Count	20	10	6	1	37
following types of violence in your community? - Gun violence	Row N %	54.1%	27.0%	16.2%	2.7%	100.0%

## **Medical Services in Your Community**

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement	Count	0	1	1	6	34	42
with the following issues related to medical services in your community It is easy to get an appointment for health care services in my community	Row N %	0.0%	2.4%	2.4%	14.3%	81.0%	100.0%
Please indicate your level of agreement	Count	3	1	3	11	24	42
with the following issues related to medical services in your community My community has adequate primary care providers and nurses	Row N %	7.1%	2.4%	7.1%	26.2%	57.1%	100.0%
Please indicate your level of agreement	Count	1	6	2	9	24	42
with the following issues related to medical services in your community My community has adequate health care services to meet my health care needs	Row N %	2.4%	14.3%	4.8%	21.4%	57.1%	100.0%
Please indicate your level of agreement	Count	4	16	8	8	6	42
with the following issues related to medical services in your community My community has adequate dental care providers	Row N %	9.5%	38.1%	19.0%	19.0%	14.3%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community	Count	27	8	3	1	3	42
	Row N %	64.3%	19.0%	7.1%	2.4%	7.1%	100.0%



		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
My community has adequate vision care providers				_			
Please indicate your level of agreement	Count	7	13	10	8	1	39
with the following issues related to medical services in your community My community has adequate mental health services	Row N %	17.9%	33.3%	25.6%	20.5%	2.6%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community My community has adequate access to emergency response services such as ambulance or fire fighters	Count	0	2	0	4	35	41
	Row N %	0.0%	4.9%	0.0%	9.8%	85.4%	100.0%
Please indicate your level of agreement	Count	0	2	3	8	29	42
with the following issues related to medical services in your community I can easily navigate the health care system in my community	Row N %	0.0%	4.8%	7.1%	19.0%	69.0%	100.0%
Please indicate your level of agreement	Count	0	1	3	7	30	41
with the following issues related to medical services in your community I receive quality health care in my community	Row N %	0.0%	2.4%	7.3%	17.1%	73.2%	100.0%
Please indicate your level of agreement	Count	0	0	9	10	20	39
with the following issues related to medical services in your community In my community, care is well coordinated across providers and services	Row N %	0.0%	0.0%	23.1%	25.6%	51.3%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Medical services in your community It is	Count	1	1	40	42
easy to get an appointment for health care services in my community	Row N %	2.4%	2.4%	95.2%	100.0%
	Count	4	3	35	42



		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Medical services in your community My community has adequate primary care providers and nurses	Row N %	9.5%	7.1%	83.3%	100.0%
RECODE: Medical services in your community My community has adequate health care services to meet my health care needs	Count Row N %	7 16.7%	2 4.8%	33 78.6%	42 100.0%
RECODE: Medical services in your community My community has adequate dental care providers	Count Row N %	47.6%	8 19.0%	14 33.3%	42 100.0%
RECODE: Medical services in your community My community has adequate vision care providers	Count Row N %	35 83.3%	3 7.1%	9.5%	42 100.0%
RECODE: Medical services in your community My community has adequate mental health services	Count Row N %	20 51.3%	10 25.6%	9 23.1%	39 100.0%
RECODE: Medical services in your community My community has adequate access to emergency response services such as ambulance or fire fighters	Count Row N %	2 4.9%	0 0.0%	39 95.1%	41 100.0%
RECODE: Medical services in your community I can easily navigate the health care system in my community	Count Row N %	2 4.8%	3 7.1%	37 88.1%	42 100.0%
RECODE: Medical services in your community I receive quality health care in my community	Count Row N %	1 2.4%	3 7.3%	37 90.2%	41 100.0%
RECODE: Medical services in your community In my community, care is well coordinated across providers and services	Count Row N %	0 0.0%	9 23.1%	30 76.9%	39 100.0%

### **Last CHNA Needs**

		Much worse	Somewhat worse	About the same	Somewhat better	Much better	Total
Three years ago, the last Community	Count	1	6	24	7	1	39
Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? – Attracting and retaining young families	Row N %	2.6%	15.4%	61.5%	17.9%	2.6%	100.0%
Three years ago, the last Community	Count	1	7	29	2	0	39
Health Needs Assessment identified the following issues as community health	Row N %	2.6%	17.9%	74.4%	5.1%	0.0%	100.0%



		Much worse	Somewhat worse	About the same	Somewhat better	Much better	Total
needs. To what degree do you believe these issues have changed? – Availability of resources for aging in place							
Three years ago, the last Community	Count	8	15	15	2	0	40
Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? – Having enough child daycare services	Row N %	20.0%	37.5%	37.5%	5.0%	0.0%	100.0%
Three years ago, the last Community	Count	1	4	6	15	15	41
Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? - Not having enough places for wellness activities	Row N %	2.4%	9.8%	14.6%	36.6%	36.6%	100.0%

		Worse	The same	Better	Total
RECODE: Previous issues – Attracting and	Count	7	24	8	39
retaining young families	Row N %	17.9%	61.5%	20.5%	100.0%
RECODE: Previous issues – Availability of	Count	8	29	2	39
resources for aging in place	Row N %	20.5%	74.4%	5.1%	100.0%
RECODE: Previous issues – Having	Count	23	15	2	40
enough child daycare services	Row N %	57.5%	37.5%	5.0%	100.0%
RECODE: Previous issues – Not having	Count	5	6	30	41
enough places for wellness activities	Row N %	12.2%	14.6%	73.2%	100.0%

### **Preventative Health Care Measures**

Multiple Response						
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ5.1ª	39	92.9%	3	7.1%	42	100.0%



		Responses		Percent of
		N	Percent	Cases
MRQ5.1ª	Which of the following preventative health care measures have you received in the last year? Vaccinations	27	15.1%	69.2%
	Which of the following preventative health care measures have you received in the last year? Annual physical exam	32	17.9%	82.1%
	Which of the following preventative health care measures have you received in the last year? Mammogram	19	10.6%	48.7%
	Which of the following preventative health care measures have you received in the last year? Colonoscopy	9	5.0%	23.1%
	Which of the following preventative health care measures have you received in the last year? Blood pressure or cholesterol screening	30	16.8%	76.9%
	Which of the following preventative health care measures have you received in the last year? Counseling for tobacco use, alcohol dependency, weight loss, behavioral health	5	2.8%	12.8%
	Which of the following preventative health care measures have you received in the last year? Depression screening	9	5.0%	23.1%
	Which of the following preventative health care measures have you received in the last year? Vision exam or annual checkup	24	13.4%	61.5%
	Which of the following preventative health care measures have you received in the last year? Dental exam or annual checkup	24	13.4%	61.5%
Total		179	100.0%	459.0%

		Not at all a barrier	Somewhat of a barrier	Extreme barrier	Total
To what degree are each of the following issues a barrier to your	Count	29	7	1	37
ability to access health care services? - Transportation to health care service locations	Row N %	78.4%	18.9%	2.7%	100.0%
To what degree are each of the following issues a barrier to your	Count	27	10	3	40
ability to access health care services? - Distance to access care	Row N %	67.5%	25.0%	7.5%	100.0%
To what degree are each of the following issues a barrier to your	Count	31	9	1	41
ability to access health care services? - Concerns about confidentiality	Row N %	75.6%	22.0%	2.4%	100.0%
	Count	21	15	5	41



		Not at all a barrier	Somewhat of a barrier	Extreme barrier	Total
To what degree are each of the following issues a barrier to your ability to access health care services? - Availability of local services to meet my health care needs	Row N %	51.2%	36.6%	12.2%	100.0%
To what degree are each of the following issues a barrier to your	Count	40	0	0	40
ability to access health care services? - Communication or language barriers	Row N %	100.0%	0.0%	0.0%	100.0%
To what degree are each of the following issues a barrier to your	Count	29	7	0	36
ability to access health care services? - Disability accommodations	Row N %	80.6%	19.4%	0.0%	100.0%
To what degree are each of the following issues a barrier to your	Count	36	4	1	41
ability to access health care services? - Scheduling health care services within clinic hours	Row N %	87.8%	9.8%	2.4%	100.0%
To what degree are each of the following issues a barrier to your	Count	35	6	0	41
ability to access health care services? - The length of time to see a provider, from making an appointment to attending the appointment	Row N %	85.4%	14.6%	0.0%	100.0%
To what degree are each of the following issues a barrier to your	Count	19	14	6	39
ability to access health care services? - The price of prescription drugs, even with insurance	Row N %	48.7%	35.9%	15.4%	100.0%
To what degree are each of the following issues a barrier to your	Count	20	16	5	41
ability to access health care services? - The price of health care services (such as co-payments or deductibles), even with insurance	Row N %	48.8%	39.0%	12.2%	100.0%

Do you currently have a primary care doctor?								
		Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>			
Valid	Yes	40	95.2	95.2	95.2			
	No	2	4.8	4.8	100.0			
	Total	42	100.0	100.0				

Multiple Respor	ise					
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ5.5 <sup>a</sup>	41	97.6%	1	2.4%	42	100.0%
a. Dichotomy gro	up tabulated at value	e 1.		•	1	•



		Responses		Percent of	
		N	Percent	Cases	
MRQ5.5ª	Where do you find out about health information? Other health care professionals	18	15.4%	43.9%	
	Where do you find out about health information? Primary care provider	35	29.9%	85.4%	
	Where do you find out about health information? Public health professionals	5	4.3%	12.2%	
	Where do you find out about health information? Internet sources	21	17.9%	51.2%	
	Where do you find out about health information? Word of mouth (including family and friends)	18	15.4%	43.9%	
	Where do you find out about health information? Advertising, such as TV commercials	5	4.3%	12.2%	
	Where do you find out about health information? My employer	11	9.4%	26.8%	
	Where do you find out about health information? Newspaper	3	2.6%	7.3%	
	Where do you find out about health information? Radio	1	0.9%	2.4%	
Total		117	100.0%	285.4%	

Multiple Respon	ise					
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ5.6a	41	97.6%	1	2.4%	42	100.0%
a. Dichotomy gro	up tabulated at value	e 1.			<b>I</b>	

		Responses		Percent of
		N	Percent	Cases
MRQ5.6a What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Insurance through employer (either your own or a family member's)	35	76.1%	85.4%	
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Private health insurance (coverage purchased by you)	5	10.9%	12.2%



	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Government program (Medicare, Medicaid, etc.)	5	10.9%	12.2%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Other (please specify)	1	2.2%	2.4%
Total		46	100.0%	112.2%
a. Dichotor	my group tabulated at value 1.			

### SOCIAL HARDSHIP AND DISCRIMINATION

Did you move to your community in the past year?							
		Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>		
Valid	Yes	1	2.4%	2.4%	2.4%		
	No	40	95.2%	97.6%	100.0%		
	Total	41	97.6%	100.0%			
Missing	System	1	2.4%				
Total	·	42	100.0%				

		Not difficult at all	Slightly difficult	Somewhat difficult	Very difficult	Total
How difficult was it to do the following	Count	0	0	0	0	0
things? - Enroll children in school	Row N %	0.0%	0.0%	0.0%	0.0%	0.0%
How difficult was it to do the following	Count	0	0	0	1	1
things? - Find housing	Row N %	0.0%	0.0%	0.0%	100.0%	100.0%
How difficult was it to do the following	Count	0	0	1	0	1
things? - Find health care	Row N %	0.0%	0.0%	100.0%	0.0%	100.0%
How difficult was it to do the following	Count	0	0	0	0	0
things? - Find a job	Row N %	0.0%	0.0%	0.0%	0.0%	0.0%
How difficult was it to do the following	Count	0	0	0	0	0
things? - Find child care	Row N %	0.0%	0.0%	0.0%	0.0%	0.0%



Have you experienced discrimination in the past 12 months?							
		Frequency	Percent	Valid Percent	<b>Cumulative Percent</b>		
Valid	No	40	95.2%	100.0%	100.0%		
Missing	Prefer not to respond	1	2.4%				
	System	1	2.4%				
	Total	2	4.8%				
Total	•	42	100.0%				

How difficult is it f	or you to pay for heating, housing, or m	edical care?			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Not difficult at all	28	66.7%	73.7%	73.7%
	Slightly difficult	3	7.1%	7.9%	81.6%
	Somewhat difficult	5	11.9%	13.2%	94.7%
	Very difficult	2	4.8%	5.3%	100.0%
	Total	38	90.5%	100.0%	
Missing	Prefer not to respond	3	7.1%		
	System	1	2.4%		
	Total	4	9.5%		
Total	·	42	100.0%		

In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?							
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	No	41	97.6%	100.0%	100.0%		
Missing	System	1	2.4%				
Total	·	42	100.0%				



Statistics						
What is your age? - Select your age on the slider						
N	Valid		39			
	Missing		3			
Mean	•		52.1538			
Median			55.0000			

RECODE: Age					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 18 years	1	2.4%	2.6%	2.6%
	18 to 34 years	2	4.8%	5.1%	7.7%
	35 to 44 years	8	19.0%	20.5%	28.2%
	45 to 64 years	22	52.4%	56.4%	84.6%
	65 to 84 years	6	14.3%	15.4%	100.0%
	Total	39	92.9%	100.0%	
Missing	System	3	7.1%		
Total	·	42	100.0%		

What is your gender? - Selected Choice							
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Male	3	7.1%	7.3%	7.3%		
	Female	38	90.5%	92.7%	100.0%		
	Total	41	97.6%	100.0%			
Missing	System	1	2.4%				
Total		42	100.0%				

Multiple Respon	ise					
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ7.3a	41	97.6%	1	2.4%	42	100.0%
	up tabulated at value		<u> </u> '	2.170	12	100.070



		Response	es	Percent of Cases
		N	Percent	
MRQ7.3ª	Which of these groups best represents your race? Select all that apply Selected Choice White	38	92.7%	92.7%
	Which of these groups best represents your race? Select all that apply Selected Choice Asian	1	2.4%	2.4%
	Which of these groups best represents your race? Select all that apply Selected Choice Prefer not to say	2	4.9%	4.9%
Total		41	100.0%	100.0%

Do you identify as Hispanic, Latine, or of Spanish origin?						
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	No	39	92.9%	100.0%	100.0%	
Missing	Prefer not to say	2	4.8%			
	System	1	2.4%			
	Total	3	7.1%			
Total	<u>.</u>	42	100.0%			

What is your es	timated annual household income?				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than \$15,000	1	2.4%	3.3%	3.3%
	\$15,000 - \$24,999	1	2.4%	3.3%	6.7%
	\$25,000 - \$49,999	4	9.5%	13.3%	20.0%
	\$50,000 - \$74,999	6	14.3%	20.0%	40.0%
	\$75,000 - \$99,999	6	14.3%	20.0%	60.0%
	\$100,000 - \$149,999	9	21.4%	30.0%	90.0%
	\$150,000 and over	3	7.1%	10.0%	100.0%
	Total	30	71.4%	100.0%	
Missing	Prefer not to say	7	16.7%		
-	System	5	11.9%		
	Total	12	28.6%		
Total	•	42	100.0%		



What is the high	hest level of education you have completed?				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	High school graduate or equivalency	4	9.5%	10.3%	10.3%
	Some college, no degree	10	23.8%	25.6%	35.9%
	Associate's degree	9	21.4%	23.1%	59.0%
	Bachelor's degree	9	21.4%	23.1%	82.1%
	Graduate or professional degree	7	16.7%	17.9%	100.0%
	Total	39	92.9%	100.0%	
Missing	System	3	7.1%		
Total		42	100.0%		

Which of these	categories best describes your employ	ment status?			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed full time	28	66.7%	71.8%	71.8%
	Employed part time	6	14.3%	15.4%	87.2%
	Retired	5	11.9%	12.8%	100.0%
	Total	39	92.9%	100.0%	
Missing	Prefer not to say	1	2.4%		
_	System	2	4.8%		
	Total	3	7.1%		
Total	•	42	100.0%		

What is your marital status?						
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Single	4	9.5%	9.8%	9.8%	
	Married or in a domestic partnership	32	76.2%	78.0%	87.8%	
	Divorced or separated	3	7.1%	7.3%	95.1%	
	Widowed	2	4.8%	4.9%	100.0%	
	Total	41	97.6%	100.0%		
Missing	System	1	2.4%			
Total	·	42	100.0%			



Statistics		
How many people live in your ho	usehold? Use numbers only. If you live alone, put "1".	
N	Valid	41
	Missing	1
Mean		2.7561
Median		2.0000

RECODE: How ma	ny people live in your household	1			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 person	5	11.9%	12.2%	12.2%
	2 to 4 people	31	73.8%	75.6%	87.8%
	5 or more people	5	11.9%	12.2%	100.0%
	Total	41	97.6%	100.0%	
Missing	System	1	2.4%		
Total	·	42	100.0%		

Do you have acces	Do you have access to reliable internet in your home?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Yes	41	97.6%	100.0%	100.0%		
Missing	System	1	2.4%				
Total		42	100.0%				

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Hospital or public health website	9	21.4%	22.0%	22.0%
	Hospital or public health social media page (e.g. Facebook)	1	2.4%	2.4%	24.4%
	Hospital or public health employee directly	11	26.2%	26.8%	51.2%
	Economic development website or social media page	1	2.4%	2.4%	53.7%
	Other website or social media page (please specify)	7	16.7%	17.1%	70.7%
	Direct email (please specify from where)	7	16.7%	17.1%	87.8%
	Another way (please specify)	5	11.9%	12.2%	100.0%
	Total	41	97.6%	100.0%	
Missing	System	1	2.4%		
Total	·	42	100.0%		



Distribution Channel					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	anonymous	38	90.5%	90.5%	90.5%
	qr	2	4.8%	4.8%	95.2%
	Total	1	2.4%	2.4%	97.6%
		42	100.0%	100.0%	