2025 Community Health Implementation Strategy and Plan

CHI St. Alexius Health - Bismarck, ND

Board Approved October 2025

CHI St. Alexius Health™

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At-a-Glance Summary

Community Served 	CHI St. Alexius Health Bismarck is located in the capital of the state of North Dakota and the county seat of Burleigh County. Burleigh and adjoining Morton County were designated as the primary service area for the 2024/ 2025 Community Health Needs Assessment (CHNA)/ Implementation Strategy (IS) plan. The U.S. Census population estimate for Bismarck in 2024 was 74,146 people and 98,443 for Burleigh County. Bismarck is the second most populous city in the state of North Dakota. The City of Mandan, population 24,586 (2023) is directly across the Missouri River from Bismarck. The U.S. Census population estimate for Morton County was 34,047 (2023).
Significant Community Health Needs Being Addressed 	The significant community health needs the hospital intends to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs the hospitals intends to address with strategies and programs are: • Behavioral Health • Social Determinants of Health
Strategies and Programs to Address Needs 	The hospital intends to take actions and to dedicate resources to address these needs, including: **Behavioral Health** • Mental Health First Aid/Community Training • Expand Inpatient Psychiatric Care • Expand Partial Hospitalization (Adolescent and Adult) **Social Drivers of Health** • Support Medical Respite for People Experiencing Homelessness • Connect community members in need to community-based services for unmet needs • Develop a transportation plan to improve access to care • Improve food access

Planned resources and collaborators to help address these needs, as well as anticipated impacts of the strategies and programs, are described in the “Strategies and Program Activities by Health Need” section of the document.

This document is publicly available online at the hospital’s website. Written comments on this strategy and plan can be submitted to the Administration Office of CHI St. Alexius Health Bismarck. 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); electronically at: https://forms.gle/KGRq62swNdQyAehX8 or by calling Ashley Carroll, Market Director, Community and Population Health, at: (402) 343-4548.

Our Hospital and the Community Served

About the Hospital

CHI St. Alexius Bismarck is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 2,200 care sites in 24 states coast to coast, serving patients in big cities and small towns across America.

CHI St. Alexius Health Bismarck has a rich history dating back to 1885. Founded to serve the health needs of the region, it has grown into a comprehensive health care provider offering a wide range of services, including inpatient and outpatient care, as well as primary and specialty physician clinics. The organization's commitment to quality and compassionate care is rooted in its Catholic faith, adhering to the Ethical and Religious Directives for Catholic Health Care Services.

The organization's mission is to provide high-quality, affordable health care to all, working towards creating innovative and value-based delivery models. It is proud of its history of serving the region and continues to expand its services and programs to meet the evolving needs of its communities. CHI St. Alexius Health Bismarck is sponsored by the Sisters of St. Benedict of the Annunciation Monastery, Bismarck, ND, and its commitment to faith-based care is evident in its dedication to providing compassionate and holistic care to all patients. CHI Alexius Health Bismarck is a 286-bed Tertiary Center, Level 2 Trauma Center and Level 3 NICU Center.

Our Mission

The hospital’s dedication to assessing significant community health needs and helping to address them in conjunction with the community 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.

Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay.

This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

CHI St. Alexius Health Bismarck is located in Bismarck, North Dakota. The hospital primarily serves Burleigh County, North Dakota, as well as Morton County, North Dakota. In addition to CHI St. Alexius Health Bismarck, Burleigh County is home to Sanford Health Bismarck and Morton County is home to Vibra Hospital of the Central Dakotas. The primary service area for this community health needs assessment is Burleigh and Morton counties in central North Dakota.

Several communities in Morton County are designated as a Health Professional Shortage Area (HPSA) and as a Medically Underserved Area (MUA) by the United States Health Resources & Services Administration. Burleigh County is an urban county located in central North Dakota and has an estimated population of 98,443. Morton County is also an urban county located in central North Dakota, and has an estimated population of 33,192. A summary description of the community is below, and additional details can be found in the CHNA report online.

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

The following zip codes correspond to 80 percent of patient admissions at CHI St. Alexius Health Bismarck: 56623, 58341, 58428, 58430, 58438, 58444, 58451, 58463, 58477, 58482, 58487, 58494, 58495, 58501, 58502, 58503, 58504, 58520, 58521, 58523, 58524, 58528, 58529, 58530, 58532, 58533, 58535, 58538, 58540, 58541, 58544, 58545, 58549, 58552, 58554, 58558, 58559, 58560, 58561, 58562, 58563, 58564, 58566, 58568, 58569, 58570, 58571, 58572, 58573, 58575, 58576, 58577 58579, 58580, 58631, 58638, 58639, 58646, 58652, 58701, 58703, 58735, 58758, 58763, 58770 and 58775.

Core demographics for Burleigh and Morton counties are summarized in Table 1.

Table 1. Core Demographic Summary, Burleigh County and Morton County, North Dakota		
Item	**Burleigh County**	**Morton County**
Community Description	Urban	Urban
Population	98,443	33,192
Racial and Ethnic Distribution		
White, non-Hispanic alone	86.4%	87.8%
American Indian and Alaska Native alone	3.6%	3.4%
Black or African American alone	1.9%	1.3%
Asian or Pacific Islander alone	1.5%	0.6%
Some other race alone	0.8%	2.6%
Two or more races	4.7%	3.6%
Hispanic Origin (of any race)	2.9%	4.2%
Median Household Income	$82,141	$79,555
Percent of Persons Below Poverty Rate	7.9%	8.1%
Unemployment Rate	1.9%	2.5%
Percent Population with less than High School Diploma	5.1%	6.4%
Percent of People 5 and Older who are Non-English Speaking	1.5%	1.2%
Percent of People without Health Insurance	7.0%	8.0%
Percent of People with Medicaid	9.8%	10.7%
Health Professional Shortage Area	No	No
Medically Underserved Area	Yes	Yes
Number of Hospitals in the County	2	1

Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health implementation strategy and plan were identified in the most recent CHNA report, which was adopted in April 2025. The CHNA report includes:

- description of the community assessed consistent with the hospital's service area;
- description of the assessment process and methods;
- data, information and findings, including significant community health needs;
- community resources potentially available to help address identified needs; and
- impacts of actions taken by the hospital since the preceding CHNA.

Additional details about the needs assessment can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors or health care services, and also health-related social and community needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Affordable Housing	Availability of affordable housing in the community is poor.	No
Quality Child Care	Child care, daycare and preschool services were ranked poor or fair. Cost is also a concern.	No
Quality Long-Term Care	Long-term care, nursing homes and senior housing are lacking.	No
Affordable Healthcare Services	Cost of healthcare services was identified as a barrier.	No
Access to Transportation	Transportation to and from medical appointments is lacking	Yes
Access to Healthcare	There are long wait times for appointments.	No
Access to Mental Health	Instances of mental health crises continue. There is also a lack of mental health providers.	Yes
Healthy Living	Chronic health issues along with diet and exercise are top concerns. Obesity, diabetes and heart health were among the concerns cited.	No

Significant Needs the Hospital Does Not Intend to Address

Below are the needs identified during the CHNA process that are not addressed by this Strategic Implementation Plan. Although not included, CHI St. Alexius Health Bismarck supports efforts to address community needs with community partners to support the expansion or establishment of programs that reduce community need.

Affordable Housing - The essential need for affordable housing involves a more community wide effort. We will collaborate with other agencies as requested and able.

Quality Child Care - At this time this community need is beyond the capacity and services of the hospital.

Quality Long-Term Care - Our focus will be on short-term care, especially for our homeless population that need minimum care and observation until stable enough to be on their own.

Affordable Healthcare Services - The hospital does not have the resources to address this particular need.

Access to healthcare will be addressed through our plan for transportation.

2025 Implementation Strategy and Plan

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Implementation Strategy

CHI St. Alexius Health is dedicated to improving community health and delivering community benefit with the engagement of its staff, clinicians and board, and in collaboration with community partners.

On June 10, 2024, in collaboration with Bismarck/Burleigh County Health, Western Plains Public Health, and Sanford Health, feedback was solicited at a community input meeting. There were approximately 70 stakeholders representing various organizations that were present for this meeting representing the following sectors:

- Healthcare/Hospitals/Public Health
- Law Enforcement
- Government Agencies
- Elected Officials
- Human and Social Service Organizations

CHI St. Alexius Health Bismarck solicited feedback on survey findings at a second community input meeting on January 13, 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, as well as guided discussion of needs and priorities for community health improvement planning.

CHI St. Alexius Health Bismarck 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. There were 30 attendees representing the following organizations:

- CHI St. Alexius Health Bismarck
- Ministry on the Margins
- Stepping Stone Ministries
- Dream Center Bismarck
- Conifer
- Bismarck/Burleigh Public Health
- NDSU Center for Social Research

Input from these meetings was then given to the CHI St. Alexius Health Equity Steering Committee. This committee is made up of a cross section of departments and areas that are pertinent to the work of community benefit including:

- Mission
- Care Coordination
- Nurses
- Foundation
- Human Resources
- Health Equity Liaison
- Quality
- Social Work
- Mental Health
- Other care disciplines

The programs and initiatives described here were selected on the basis of utilizing existing programs and partnerships with evidence of success. We also use the following criteria to help us prioritize health needs/ strategies:

- magnitude of the issue
- impact- ability to track and measure outcomes
- evidence- based interventions available
- hospital/ health system expertise and available resources

Community Health Core Strategies

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources. CommonSpirit Health has established three core strategies for community health improvement activities.

These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

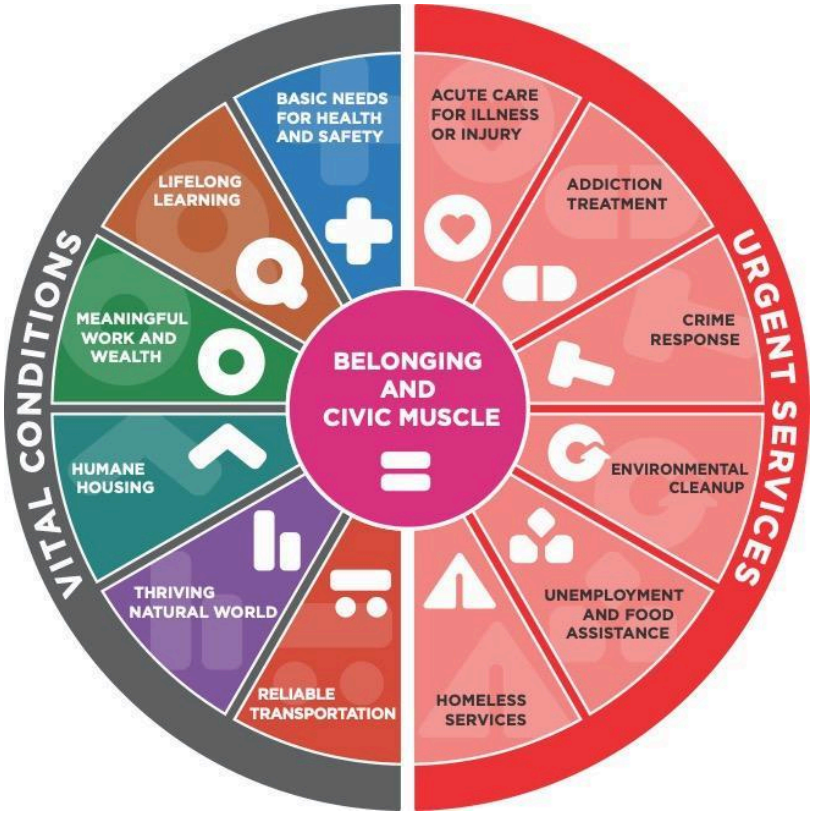
- **Core Strategy 1**: Extend the care continuum by aligning and integrating clinical and community-based interventions.
- **Core Strategy 2**: Implement and sustain evidence-informed health improvement strategies and programs.
- **Core Strategy 3**: Strengthen community capacity to achieve equitable health and well-being.

Vital Conditions and the Well-Being Portfolio

Community health initiatives at CommonSpirit Health use the Vital Conditions framework and the Well-Being Portfolio[1] to help plan and communicate about strategies and programs.

Investments of time, resources, expertise and collaboration to improve health and well-being can take different approaches. And usually, no single approach can fully improve or resolve a given need on its own.

One way to think about any approach is that it may strengthen "vital conditions" or provide "urgent services," both of which are valuable to support thriving people and communities. A set of program activities may seek to do one or both. Taken together, vital conditions and urgent services compose a well-being portfolio.



What are Vital Conditions?
These are characteristics of places and institutions that all people need all the time to be healthy and well. The vital conditions are related to social determinants or drivers of health, and they are inclusive of health care, multi-sector partnerships and the conditions of communities. They help create a community environment that supports health.

[1] The Vital Conditions framework and the Well-Being Portfolio were created by the Rippel Foundation, and are being used with permission. Visit https://rippel.org/vital-conditions/ to learn more.

What are Urgent Services?
These are services that anyone under adversity may need temporarily to regain or restore health and well-being. Urgent services address the immediate needs of individuals and communities, say, during illness.

What is Belonging and Civic Muscle?
This is a sense of belonging and power to help shape the world. Belonging is feeling part of a community and valued for what you bring. Civic muscle is the power of people in a society to work across differences for a thriving future.

Well-Being Portfolio in this Strategy and Plan

The hospital's planned strategies and program activities that follow are each identified as aligning with one of the vital conditions or urgent services in this figure.

This helps to identify the range of approaches taken to address community needs, and also acknowledges that the hospital is one community resource and stakeholder among many that are dedicated to and equipped for helping to address these needs and improve health.

Strategies and Program Activities by Health Need

Health Need:	Mental and Behavioral Health				
Population(s) of Focus:	General population, youth experiencing mental distress				
Strategy or Program	**Summary Description**	**Strategic Alignment**			
		Strategy 1: **Extend care continuum**	Strategy 2: **Evidence-informed**	Strategy 3: **Community capacity**	**Vital Condition (VC) or Urgent Service (US)**
Mental Health First Aid/Community Training	Provide mental health first aid training for staff and community	●	●	●	US
Inpatient Psychiatric Care	Expand capacity by increasing the number of licensed beds and recruiting additional providers	●	●	●	US
Partial Hospitalization for Mental Health	Expand services for Adolescents and prepare for eventual expansion into Adult	●	●	●	US
Planned Resources:	Grant awarded by the state, human resources, marketing, recruitment, education				
Planned Collaborators:	State Government, Care Providers				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Improved access to behavioral/mental health care	% of respondents who reported needing mental health care or substance use and did not receive it	CHNA

Health Need:	Social Drivers of Health				
Population(s) of Focus:	low income residents, people experiencing homelessness, patients with unreliable transportation				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: **Extend care continuum**	Strategy 2: **Evidence-informed**	Strategy 3: **Community capacity**	**Vital Condition (VC) or Urgent Service (US)**
Medical Respite Care Program	With Stepping Stone Ministries, develop and utilize a medical respite care facility for those who are experiencing homelessness	●	●	●	US
Total Health Road Map - Connecting community-based services for unmet needs	Screen patients for Health Related Social Needs (e.g. food insecurity, housing and transportation instability, violence, etc.) and connect patients to community resources to address their needs	●	●	●	US
Access to Care-Transportation	Convene a transportation collaborative and provide transportation for patients	●	●	●	US
Food Access	Stock Little Free Pantries Sponsor/Serve the BANQUET quarterly	●	●	●	US
Planned Resources:	Mission and Ministry Grant, Community Health Improvement Grant, Staff Time, Meeting Space,				
Planned Collaborators:	Stepping Stone Ministries, Dream Center Bismarck, other local agencies				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Decrease in people experiencing unsheltered homelessness Decrease in people experiencing food insecurity Increase in patients referred to community agencies to address HRSNs	Lower percentage of identified need	Point in Time count CHNA Community Health Survey Clinical Data; not shared externally