

















SANF#RD° HEALTH

















Dear Community Members,

Sanford Medical Center Canton-Inwood is pleased to present the 2018 Community Health Needs Assessment (CHNA).

Sanford completes a community health needs assessment every three years. It is through this work that we identify the unmet needs in the community and strategically plan how we can best address those needs. The CHNA process aligns with Sanford's mission - *Dedicated to the work of health and healing*.

During 2017 and 2018, members of the community were invited to complete a survey to help identify the unmet needs. Key stakeholders completed a survey to identify concerns for the community related to economic well-being, transportation, children and youth, the aging population, safety, access to services, and mental and behavioral health. Sanford analyzed the data from the primary research and met with key stakeholders to prioritize the identified needs. Our strategies to address the needs are included in this report.

Sanford will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- Economic Well-Being Affordable Housing
- Behavioral Health and Mental Health Access Substance Abuse by Youth

The CHNA also focused on the strengths of our community and includes the many community assets that are available to address the community health needs. We have also included an impact report from our 2016 implementation strategies.

Sanford Canton-Inwood is committed to extending care beyond our bricks and mortar. We are committed to meeting the health care needs of the broader community. Together, we can fulfill our mission.

Sincerely,

Scott Larson Senior Director

Sanford Canton-Inwood Medical Center

Table of Contents

	Page
Executive Summary	4
Community Health Needs Assessment	11
• Purpose	12
Our Guiding Principles	12
Regulatory Requirements	12
Study Design and Methodology	13
Limitations of the Study	14
Acknowledgements	14
Description of Medical Center	17
Description of Community Served	17
Key Findings	18
Demographic Information for Key Stakeholder Participants	26
Demographic Information for Community Resident Participants	38
Secondary Research Findings	40
Health Needs and Community Resources Identified	41
Prioritization Worksheet	42
How Sanford Canton-Inwood is Addressing the Needs	43
Implementation Strategies	47
o Implementation Strategies – 2018	
o Implementation Strategy Action Plan – 2019-2021	
o Demonstrating Impact - 2017-2019 Action Plan	
 Demonstrating Impact – 2017-2019 Strategies 	
Community Feedback from the 2016 Community Health Needs Assessment	53
Appendix	54
Primary Research	
o Asset Map	
 Results from Non-Generalizable Online Survey of Community 	
Stakeholders	
 Resident Survey 	
 Prioritization Worksheet 	
Secondary Data	
 Definitions of Key Indicators 	
 County Health Rankings 	

Sanford Canton-Inwood Medical Center 2018 Community Health Needs Assessment Executive Summary

Purpose

The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues within our community. Findings from the assessment serve as a catalyst to align expertise and develop a Community Investment/Community Benefit plan of action. There is great intrinsic value in a community health needs assessment when it serves to validate, justify and defend the not-for-profit status and create opportunity to identify and address public health issues from a broad perspective. A community health needs assessment identifies the community's strengths and areas for improvement. A community health needs assessment is critical to a vital Community Investment/Community Benefit Program that builds on community assets, promotes collaboration, improves community health, and promotes innovation and research. A community health needs assessment also serves to validate progress made toward organizational strategies and provides further evidence for retaining our not-for-profit status.

Our Guiding Principles

- All health care is a community asset
- Care should be delivered as close to home as possible
- Access to health care must be provided regionally
- Integrated care delivers the best quality and efficiency
- Community involvement and support are essential to success
- Sanford Health is invited into the communities we serve

Regulatory Requirements

Federal regulations stipulate that non-profit medical centers conduct a community health needs assessment at least once every three years and prioritize the needs for the purpose of implementation strategy development and submission in accordance with the Internal Revenue Code 501(r).

The Internal Revenue Code 501(r) requires that each hospital must have: (1) conducted a community health needs assessment in the applicable taxable year; (2) adopted an implementation strategy for meeting the community health needs identified in the assessment; and (3) created transparency by making the information widely available.

The regulations stipulate that each medical center take into account input from persons who represent the broad interests of the community. We are required to seek at least one state, local, tribal or regional government public health department or state Office of Rural Health with knowledge, information or expertise relevant to the health needs of the community.

Non-profit hospitals are required to seek input from members of medically underserved, low income, and minority populations in the community, or organizations serving or representing the interest of such populations, and underserved populations experiencing disparities or at risk of not receiving adequate care as a result of being uninsured or due to geographic, language, financial or other barriers.

The community health needs assessment includes a process to identify community resources that are available to address the assessed needs and to prioritize the needs.

Hospitals are to address each and every assessed need or defend why we are not addressing the needs. Once the needs have been identified and prioritized, hospitals are required to develop an implementation strategy to address the top needs. The strategies are reported on the IRS 990 and a status report must be provided each year on IRS 990 Schedule H.

Finally, hospitals are to be transparent with the findings and make the written CHNA report available to anyone who asks for it. Sanford places the CHNA reports and the implementation strategies on the Sanford website. Hospitals are required to keep three cycles of assessments on the web site. The 2018 report will be Sanford's third report cycle since the requirements were enacted in 2010.

Study Design and Methodology

1. Primary Research

A. Key Stakeholder Survey

An online survey was conducted with identified community key stakeholders. The study concentrated on the stakeholder's concerns for the community specific to economic well-being, transportation, children and youth, the aging population, safety, health care and wellness, mental health and substance abuse. The study was conducted through a partnership between Sanford Health and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Sanford Health and the Sioux Falls Department of Health distributed the survey link via email to stakeholders and key leaders located within Lincoln County, South Dakota and Lyon County, Iowa. Data collection occurred during November 2017. A total of 22 community stakeholders participated in the survey.

B. Resident Survey

The resident survey tool includes questions about the respondent's personal health. An online survey was developed in partnership with public health experts from across the Sanford footprint. The Minnesota Health Department reviewed and advised Sanford about key questions that they request of the SHIP surveys and those questions were included in the resident survey. Questions specific to American Indian residents were developed by the North Dakota Public Health Association. The survey was posted on Facebook and a link to the survey was sent by email to members of the community. A total of 105 community residents participated in the survey.

C. Community Asset Mapping

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

D. Community Stakeholder Discussions

Community stakeholders were invited to attend a presentation of the findings of the CHNA research. Facilitated discussion commenced and each participant was asked to consider his or her top two or three priorities that should be further developed into implementation strategies. The meeting served to inform the group of the findings but also served as a catalyst to drive collaboration.

E. Prioritization Process

The primary and secondary research data was analyzed to develop the top unmet needs. The analyzed list of needs was developed into a worksheet. A multi-voting methodology from the American Society for Quality was implemented to determine what top priorities would be further developed into implementation strategies. Key community stakeholders met with medical center leaders to complete the multi-voting exercise.

2. Secondary Research

- A. The 2018 County Health Rankings were reviewed and included in the report and in the asset mapping process.
- B. The U.S. Census Bureau estimates were reviewed.
- C. Community Commons were reviewed and specific data sets were considered. The Community Commons link is https://www.communitycommons.org/maps-data/.

Limitations of the Study

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in Lincoln and Lyon counties. A good faith effort was made to secure input from a broad base of the community. However, when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates from the U.S. Census Bureau, there was improvement over the last several CHNAs but there is still a need to capture demographics that better represent the community. This is part of our CHNA continuous improvement process.

Internal Revenue Code 501(r) requires that a broad base of key community stakeholders have input into the needs of the community. Those community members specified in the statute include persons who represent the broad interests of the community served by the hospital facility including those with special expertise in public health; Federal, tribal, regional, state and or local health or other departments or agencies with information relevant to the health needs of the community served; and leaders, representatives, or members of medically underserved, low income, and minority populations.

Sanford extended a good faith effort to engage all of the aforementioned community representatives in the survey process. We worked closely with public health experts throughout the assessment process.

Public comments and responses to the community health needs assessment and the implementation strategies are welcome on the Sanford website or contact can be made at https://www.sanfordhealth.org/contact-us/form.

Key Findings

Community Health Concerns

The key findings are based on the key stakeholder survey, the resident survey and secondary research. The key stakeholder survey ranked key indicators on a Likert scale with 1 meaning no attention needed and 5 meaning critical attention needed. Survey results ranking 3.0 or above are considered to be high ranking. Sanford is addressing many of the needs that ranked below 3.0; however, the high ranking needs of 3.0 or above are considered for the prioritization process. The resident survey addresses personal health needs and concerns. The secondary research provides further understanding of the health of the community and in many cases the indicators are aligned and validate our findings.

Economic Well-Being

Community stakeholders are most concerned that there is a need for affordable housing (ranking 4.24), employment options (3.33), a skilled labor force (3.24), household budgeting and money management (3.10), and maintaining livable and energy efficient homes (3.05).

Transportation

Community stakeholders are most concerned about the availability of walking and biking paths (3.27) and the driving habits related to speed and road rage (3.05).

Children and Youth

Community stakeholders are most concerned about substance abuse by youth (3.47), the cost of activities for children (3.44), the availability of activities for children (3.42), the availability of quality childcare (3.41), the availability of services for at-risk youth (3.41), bullying (3.41), the cost of quality childcare (3.35), the cost of services for at-risk youth (3.35), childhood obesity (3.33), teen tobacco use (3.29), teen suicide (3.24), and opportunities for youth mentoring (3.06).

Aging Population

Community stakeholders are most concerned about the cost of long term care (3.63) and memory care (3.59), the cost of in-home services (3.32), the availability of memory care (3.28), the availability of resources to help the elderly stay in their homes (3.16), and the availability of resources for caregivers (3.00).

Safety

Community stakeholders are most concerned about abuse of prescription drugs (3.47) and the presence of drug dealers (3.06).

Health Care Access

Community stakeholders are most concerned about access to affordable health insurance coverage (3.82), access to affordable health care (3.72), the availability of health care services for Native American people (3.41), access to affordable vision insurance (3.20), the availability of mental health providers (3.22), the availability of non-traditional hours (3.19), access to affordable dental insurance (3.18), the availability of behavioral health providers (3.18), availability of prevention programs (3.12), and the availability of specialist physicians (3.00).

Mental Health and Substance Abuse

Community stakeholders are most concerned about depression (3.71), stress (3.59), dementia and Alzheimer's disease (3.53), drug use and abuse (3.47), smoking and tobacco use (3.35), alcohol use and abuse (3.24), and exposure to second hand smoke (3.06).

Resident survey participants are facing the following issues:

- 72% report that they are overweight or obese
- 55% self-report binge drinking at least 1X/month
- 36% have been diagnosed with depression
- 25% report running out of food before having money to buy more
- 31% have been diagnosed with high cholesterol
- 26% currently smoke cigarettes

Community stakeholders worked through a multi-voting prioritization process to determine the top priorities and needs of the community.

Sanford Canton-Inwood will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- Economic Well-Being Affordable Housing
- Behavioral Health and Mental Health Access Substance Abuse by Youth

Implementation Strategies

Priority 1: Economic Well-Being - Affordable Housing

Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.

Priority 2: Behavioral Health and Mental Health Access - Substance Abuse by Youth

Mental health is important at every stage of life and affects how people think, feel and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health and behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Canton-Inwood Medical Center Community Health Needs Assessment 2018

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Acknowledgements

Sanford Health would like to thank and acknowledge the Steering Committees for their assistance and expertise while conducting the assessment and analysis of the community needs.

Sanford Steering Group:

- Sara Ballhagen, Administrative Assistant, Sanford Wheaton
- Stacy Barstad, Senior Director, Sanford Tracy and Sanford Westbrook
- Rob Belanger, Clinic Director, Sanford Bagley
- Catherine Bernard, Tax Manager, Corporate Accounting, Sanford Health
- Michelle Bruhn, Senior Vice President, Finance, Health Services Division, Sanford Health
- Randy Bury, Chief Administrative officer, Sanford Health
- Brian Carlson, Executive Director, Sanford Thief River Falls
- Denise Clouse, Marketing Coordinator, Sanford Tracy
- Ashley Erickson, Senior Director, Sanford Aberdeen
- JoAnn Foltz, Senior Director, Sanford Wheaton
- Isaac Gerdes, Senior Director, Sanford Webster
- Paul Gerhart, Director of Fiscal Services, Sanford Canton

- Julie Girard, Improvement Advisor, Sanford Vermillion
- Paul Hanson, President, Sanford Sioux Falls
- Joy Johnson, VP of Operations, Sanford Bemidji
- JoAnn Kunkel, Chief Financial Officer, Sanford Health
- Mary Lake, Executive Assistant, Sanford Health Network Fargo Region
- Amber Langner, Senior Director of Finance, Corporate Accounting, Sanford Health
- Scott Larson, Senior Director, Sanford Canton
- Tiffany Lawrence, VP, Finance, Sanford Fargo
- Martha Leclerc, VP, Corporate Contracting, Sanford Health
- Tammy Loosbrock, Senior Director, Sanford Luverne and Sanford Rock Rapids
- Carrie McLeod, Sanford Community Health Improvement/Community Benefit Director
- Jac McTaggart, Senior Director, Sanford Hillsboro and Sanford Mayville
- Rick Nordahl, Senior Director, Sanford Sheldon
- Erica Peterson, Senior Director, Sanford Chamberlain
- Gwen Post, Director of Nursing and Clinical Services, Sanford Worthington
- Dawn Schnell, Senior Director, Sanford Jackson
- Lori Sisk, Senior Director, Sanford Canby and Sanford Clear Lake
- Jennifer Tewes, Clinic Supervisor, Sanford Jackson
- Tim Tracy, Senior Director, Sanford Vermillion
- Ruth Twedt, Manager of Ancillary Services, Sanford Clear Lake
- Marnie Walth, Senior Legislative Affairs Specialist, Sanford Bismarck
- Jennifer Weg, Executive Director, Sanford Worthington

We express our gratitude to the following community collaborative members for their expertise during the planning, development and analysis of the community health needs assessment:

- Clinton Alexander, Fargo Moorhead Native American Center
- Kristin Bausman, Becker County Public Health
- Justin Bohrer, Fargo Cass Public Health
- Pam Bonrud, Northwestern Energy
- Cynthia Borgen, Beltrami Public Health
- Jackie Buboltz, Essentia Health
- Anita Cardinal, Pennington County Public Health
- Leah Deyo, Essentia Health
- Peter Ekadu, Nobles County Public Health
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- Christian Harris, New American Consortium
- Caitlyn Hurley, Avera Health
- Deb Jacobs, Wilkin County Public Health
- Joy Johnson, Sanford Health
- Ann Kinney, PhD, Minnesota Department of Health
- Krista Kopperud, Southwest Health and Human Services
- Ann Malmberg, Dakota Medical Foundation Mayors' Blue Ribbon Commission on Addiction
- Kathy McKay, Clay County Public Health
- Jac McTaggert, Sanford Health
- Mary Michaels, Sioux Falls Department of Health
- Teresa Miler, Avera Health

- Renae Moch, Burleigh County Public Health
- Brittany Ness, Steele County Public Health
- Ruth Roman, Fargo Cass Public Health
- Kay Schwartzwalter, Center for Social Research, NDSU
- Becky Secore, Beltrami Public Health
- Julie Sorby, Family HealthCare Center
- Brenda Stallman, Traill County Public Health
- Diane Thorson, Ottertail County Public Health
- Juli Ward, Avera Health
- MayLynn Warne, North Dakota Public Health Association

We extend our special thanks to the community and county leaders, public health administration, physicians, nurses, legislators and community representatives for diverse populations for their participation in this work. Together we are reaching our vision "to improve the human condition through exceptional care, innovation and discovery."

The following Canton-Inwood community stakeholders participated in community discussions and helped to formulate the priorities for our implementation strategies:

- Robert Bauer, Keystone
- Andrew Bauman, AR Electric LLC
- Karen Brandes, Love Inc. of Greater Canton
- Dawn Creech, Home Medical Equipment
- Ginny Crawford, Crawford Counseling
- Kristine DeJaecfrer-Tillelt, Crawford Counseling
- Jean Fossum, Sanford Medical Center
- Paul Gerhart, CFO, Sanford Medical Center
- Sterling Heath, Canton Home & Farm
- Sherry Kurtz-Anderson, Lead to Inspire Trainer
- Scott Larson, CEO, Sanford Medical Center
- Myron Moore, Long Term Care Administrator, Good Samaritan
- Melissa Schutte, Sanford Medical Center
- Jonathan Toso, Optometrist, Sanford Medical Center
- Steve Ziebarth, Pastor

Description of the Medical Center Sanford Canton-Inwood Medical Center – Canton, SD



Sanford Canton-Inwood Medical Center is an 11-bed Critical Access Hospital located in a beautiful rural setting just east of Canton, SD. Through a partnership of Canton-Inwood Memorial Hospital Association and Sanford Health, the community established a health care facility focused on providing quality health care close to home.

Sanford Canton-Inwood employs 8 clinicians, including physicians and advanced practice providers in the areas of family medicine, sports medicine, surgery, counseling and interventional cardiology, and has over 100 employees.

Description of the Community Served

Canton, SD, population 3,000, is located 10 miles east of Interstate 29 on US Highway 18. The community is surrounded by Newton Hills State Park, Big Sioux River, and the rolling hills of the Sioux Valley. Canton is the county seat of Lincoln County.

The earliest known visitor was Lewis P. Hyde, who first came to the area in 1866. By 1868, there were 35 people living in Lincoln County. The residents named the community Canton, believing the location to be the exact opposite of Canton, China. In 1880, the Chicago, Milwaukee, St. Paul and Pacific Railroad crossed the Big Sioux River to reach Canton. The city still has an active rail freight service and many historic homes and buildings dating back to the late 1800s. Two of Canton's historical sites are the Lincoln County Courthouse built in 1889 and the Canton Lutheran Church, which was built in 1908.

Canton is home to six industries: Eastern Farmers Co-op, Adams Thermal Systems, Bid-Well, a Terex Company, Johnson Feed, Inc., Fastek Products, and Legacy Electronics. The community has several restaurants and approximately 200 businesses.

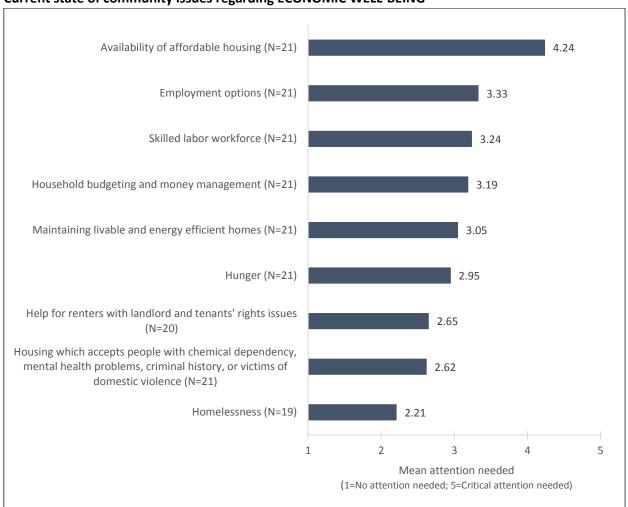
Key Findings

Community Health Concerns

The key findings are based on the key stakeholder survey, the resident survey, and secondary research. The key stakeholder survey ranked key indicators on a Likert scale with 1 meaning no attention needed and 5 meaning critical attention needed. Survey results ranking 3.0 or above are considered to be high ranking. Sanford is addressing many of the needs that ranked below 3.0; however, the high ranking needs of 3.0 or above are considered for the prioritization process. The resident survey addresses personal health needs and concerns. The secondary research provides further understanding of the health of the community, and in some cases, the indicators align with and validate our findings.

Economic Well-Being: The concern for the community's economic well-being is focused on the need for available affordable housing, a skilled workforce and employment options, household budgeting and money management skills, and liable energy efficient homes.

Current state of community issues regarding ECONOMIC WELL-BEING



Healthy People 2020 has defined the social determinants of health. "Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks." Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as "place." The patterns of social engagement and sense of security and well-being are also affected by where people live. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.

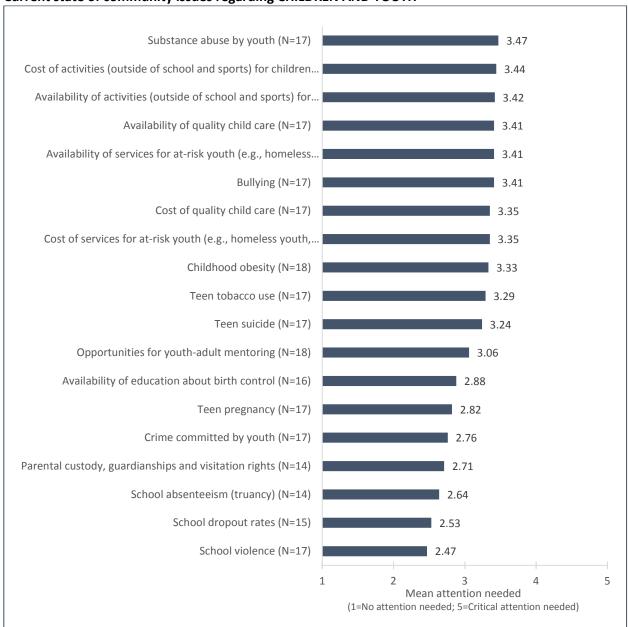
Transportation: The concern for transportation focuses on the need for walking and biking paths and the driving habits of residents.

Current state of community issues regarding TRANSPORTATION



Children and Youth: The concerns for children and youth are numerous and include substance abuse by youth, the cost and availability of activities for children, the availability of quality childcare, childhood obesity, the need for services for at-risk youth, bullying, teen tobacco use, and teen suicide.





According to the U.S. Department of Drug Enforcement Administration (DEA), nationally almost 20% of students surveyed admit to using marijuana at least once during the last 30 days, and 13% of students surveyed admitted driving when they had used marijuana within the last 30 days.

Researchers have identified *risk factors* that can increase a person's chances for misuse, and *protective factors* that can reduce the risk. However, many people with risk factors do not abuse substances. The risk factors for substance abuse among youth include boredom, stress, curiosity, the desire to feel grown up, or to lessen peer pressure.

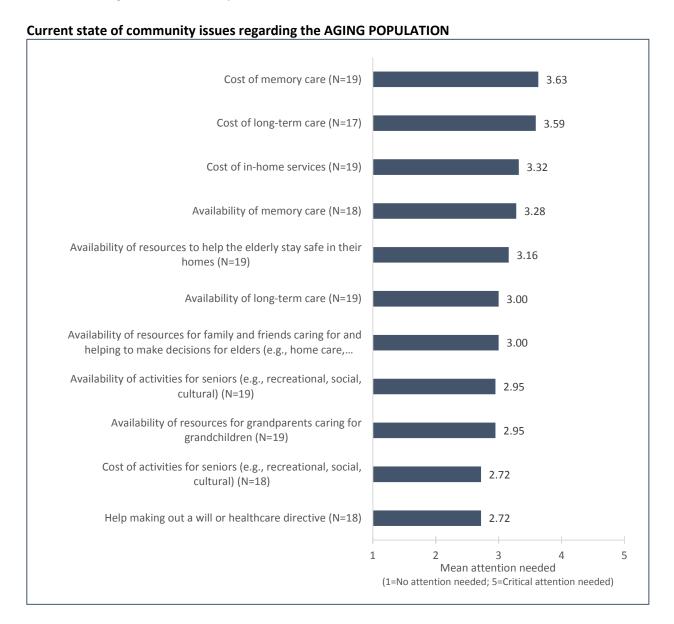
Youth may also be more likely to try drugs because of circumstances or events called risk factors. Examples of risk factors include:

- Poor grades in school
- Engaging in alcohol or drug use at a young age
- Friends and peers who engage in alcohol or drug use
- Persistent, progressive, and generalized substance use, misuse, and use disorders by family members
- Conflict between parents or between parents and children, including abuse or neglect
- Bullying

Protective factors include:

- Having high self-esteem
- Attending a school with policies against using alcohol and drugs
- Having an adult role model who doesn't use tobacco or drugs or misuse alcohol
- Participating in athletic, community, or faith-based groups
- Living in a community with youth activities that prohibit drugs and alcohol

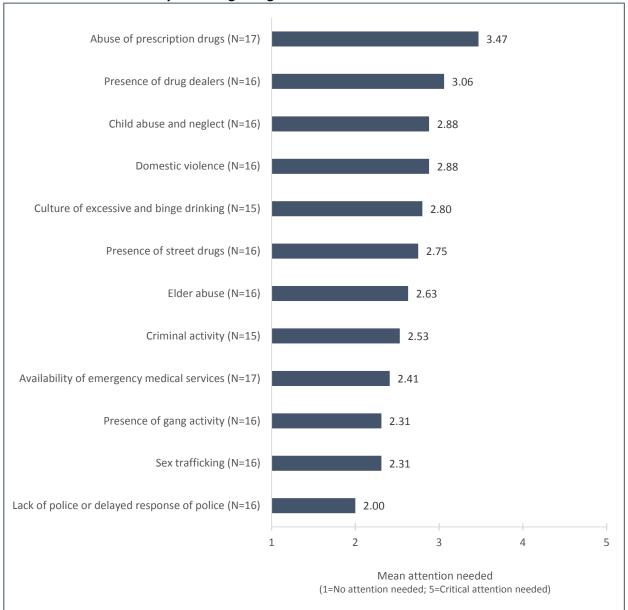
Aging Population: The cost of long term care and memory care are top concerns once again and were top concerns during the 2016 CHNA cycle.



According to the U.S. Health and Human Services Administration on Aging, the cost of long term care depends on the type and duration of care you need, the provider you use, and where you live. Sanford providers work to help seniors live healthy independent lives. Sanford social workers, case managers, and discharge planners refer patients to area service providers to make certain that patients receive a safe discharge and transition to the appropriate levels of care.

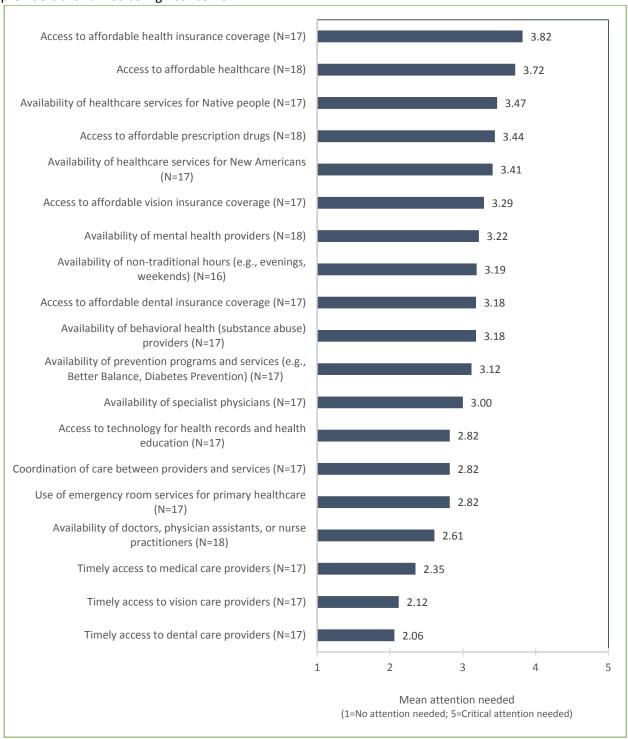
Safety: The abuse of prescription drugs is the top concern for safety in the community.

Current state of community issues regarding SAFETY



The National Institute on Drug Abuse states that the misuse of prescription drugs means taking a medication in a manner or dose other than what was prescribed; or taking someone else's prescription, even if for a legitimate medical complaint such as pain; or taking a medication to feel euphoria (i.e., to get high). The term non-medical use of prescription drugs also refers to these categories of misuse. The three classes of medication most commonly misused are opioids, central nervous system depressants (this category includes tranquilizers, sedatives, and hypnotics) and stimulants - most often prescribed to treat attention deficit hyperactivity disorder (ADHD). Prescription drug misuse can have serious medical consequences. Providers at Sanford Health have reduced opioid prescriptions over the last three years in an effort to have fewer pills in circulation and a reduced opportunity for misuse.

Health Care and Wellness: Access to affordable health insurance, affordable health care, and affordable prescription drugs are all high concerns for community stakeholders. The availability of services for the American Indian and New American populations and the availability of behavioral health and mental health providers are ranked as high concerns.

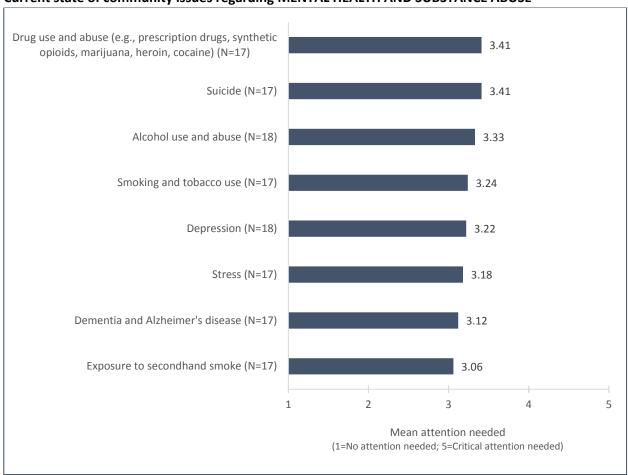


According to the Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, Health Professional Shortage Area (HPSA) designations are used to identify areas and population groups within the United States that are experiencing a shortage of health

professionals. The 2016 HRSA report projected that the supply of workers in selected behavioral health professions would be approximately 250,000 workers short of the projected demand by 2025.

Mental Health and Substance Abuse: Drug use and abuse, suicide, alcohol use and abuse, tobacco use, depression, stress, dementia and Alzheimer's, and exposure to second hand smoke are top concerns for the community.

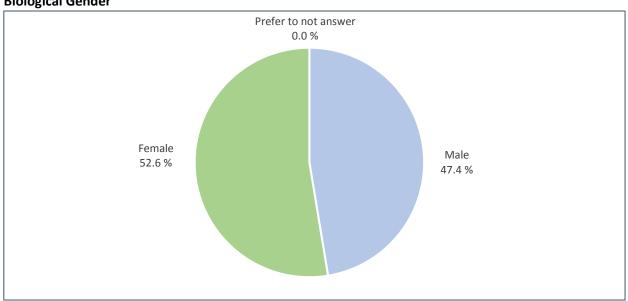




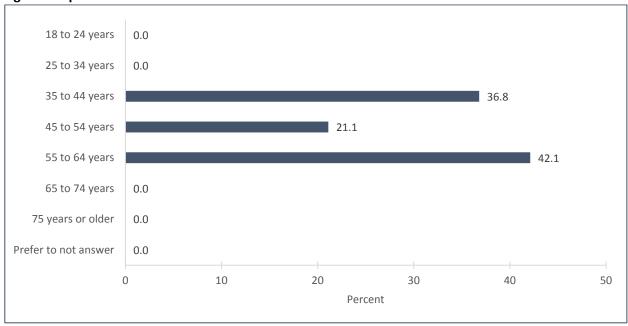
The Substance Abuse and Mental Health Services Administration reports that "Mental and substance use disorders can have a powerful effect on the health of individuals, their families, and their communities. In 2014, an estimated 9.8 million adults age 18 and older in the United States had a serious mental illness, 1.7 million of whom were age 18 to 25. Additionally, 15.7 million adults (age 18 or older) and 2.8 million youth (age 12 to 17) had a major depressive episode during the past year. In 2014, an estimated 22.5 million Americans age 12 and older self-reported needing treatment for alcohol or illicit drug use, and 11.8 million adults self-reported needing mental health treatment or counseling in the past year. These disorders are among the top conditions that cause disability and carry a high burden of disease in the United States, resulting in significant costs to families, employers, and publicly funded health systems. By 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide."

Demographic Information for Key Stakeholder Participants

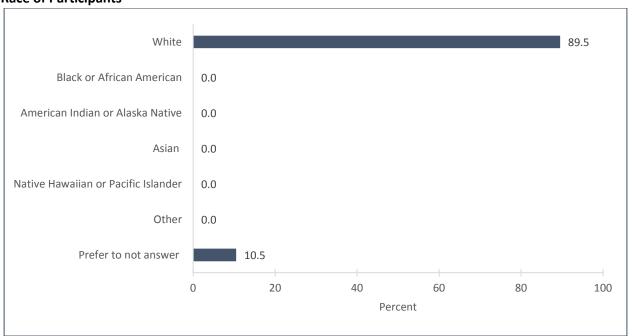
Biological Gender



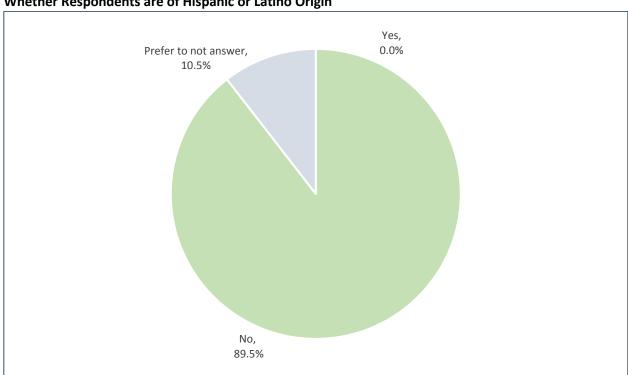
Age of Respondents



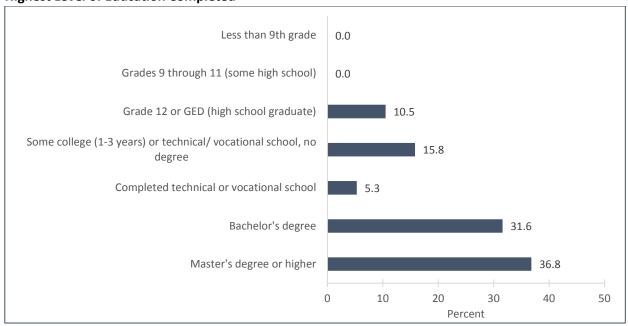
Race of Participants



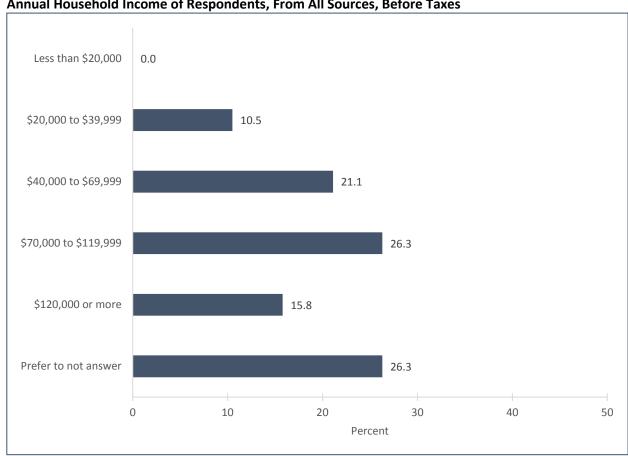
Whether Respondents are of Hispanic or Latino Origin



Highest Level of Education Completed







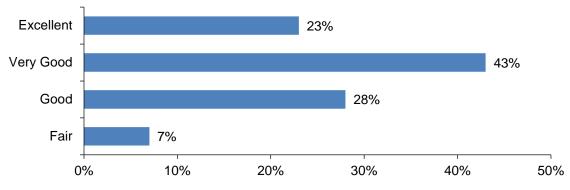
Residents' Health Concerns

Health is personal and it starts in our homes, schools, workplaces, neighborhoods and communities. Eating well and staying active, not smoking, getting the recommended immunizations and screening tests, and seeing a doctor for routine check-ups can positively influence our health.

The resident survey asks questions specific to the participant's personal health and health behaviors.

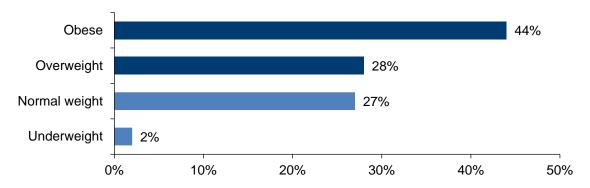
How would you rate your health?

Ninety three percent of survey participants rated their health as good or better.



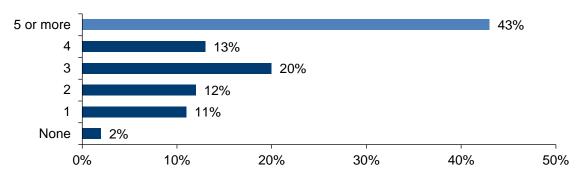
Body Mass Index (BMI)

Seventy-two percent of survey participants are overweight or obese.



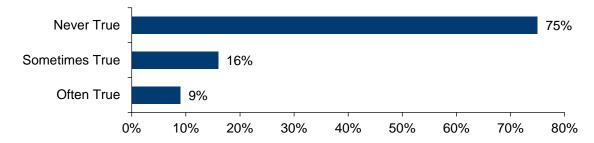
Total Servings of Fruits, Vegetables and Juice

Only 43% are consuming the recommended 5 or more daily servings of fruit and vegetables.



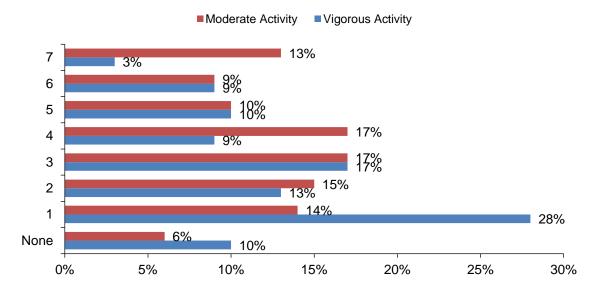
Food insecurity

Twenty-five percent report running out of food before having money to buy more.



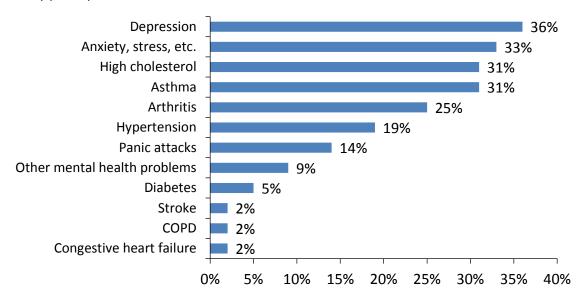
Days per Week of Physical Activity

Sixty-six percent have moderate exercise three or more times each week.



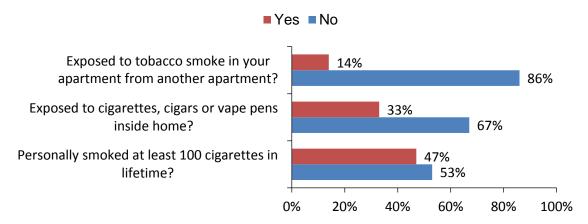
Past Diagnosis

Depression, anxiety, high cholesterol, asthma, arthritis and hypertension are the top diagnoses for the survey participants.



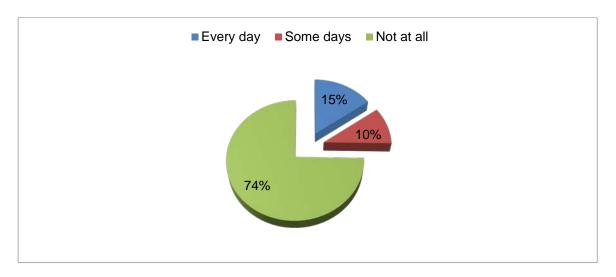
Exposure to Tobacco Smoke

Thirty-three percent are exposed to cigarettes, cigars or vape pens and forty-nine percent have smoked in their lifetime.



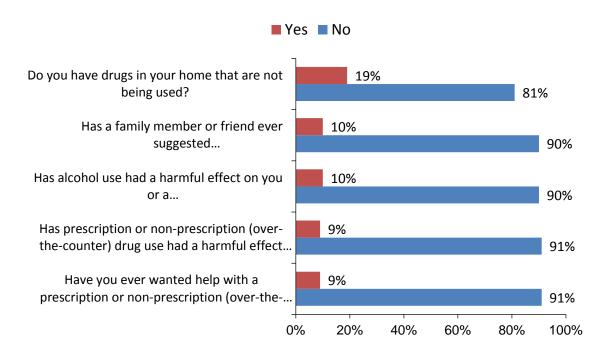
Do you currently smoke cigarettes?

Thirty percent currently smoke cigarettes.



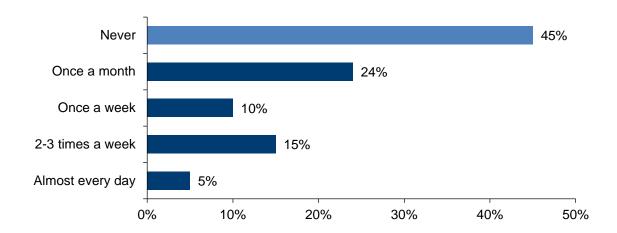
Drug and Alcohol Issues

Nineteen percent have drugs in their home that they are no longer using. Fourteen percent report that alcohol has had a harmful effect on them or a member of their family.

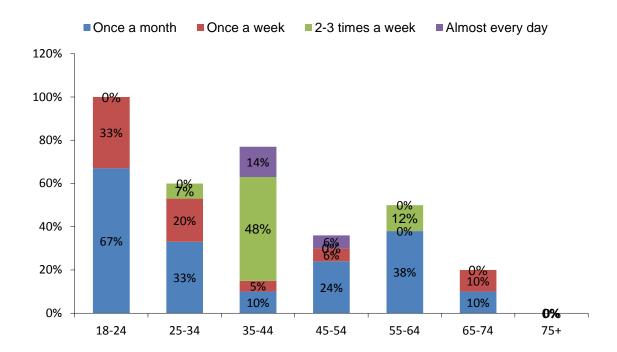


Binge Drinking

Fifty-five percent binge drink at least once per month.

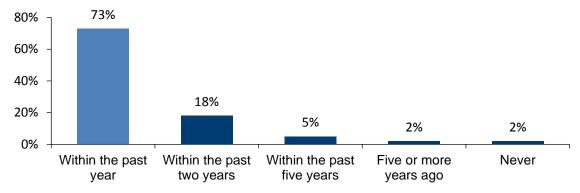


Binge Drinking Past 30 days by Age



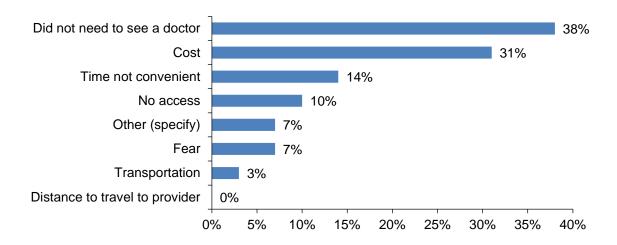
How long has it been since you last visited a doctor or health care provider for a routine check-up?

Twenty-seven percent have not had a routine check-up in more than a year.



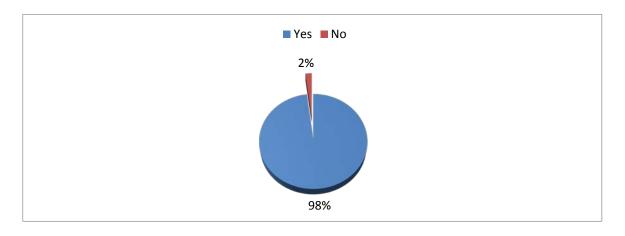
Barriers to Routine Check-up

Thirty-eight percent of survey respondents report not needing a routine check-up.



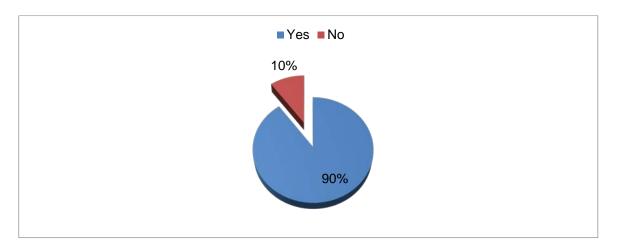
Do you have health care coverage for your children or dependents?

Two percent do not have health care insurance for their children.



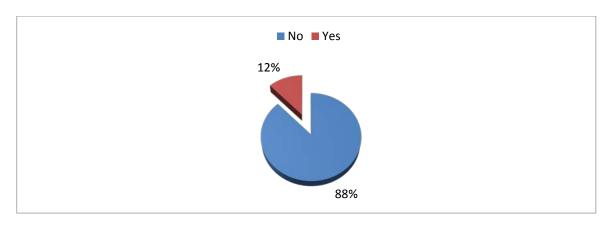
Do you currently have any kind of health insurance?

Ten percent do not have health care insurance for themselves.



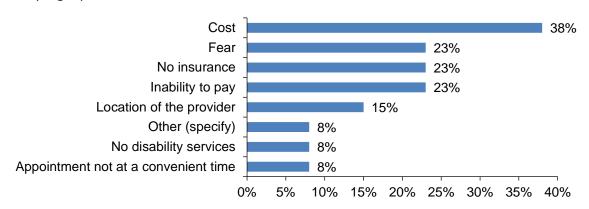
In the past year, did you or someone in your family need medical care, but did not receive the care they needed?

Twelve percent report not receiving the care that they needed.



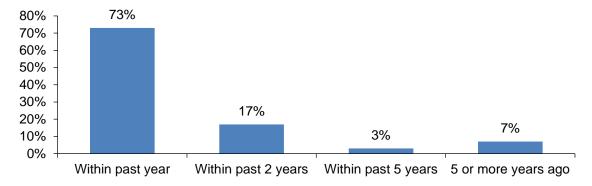
Barriers to not receiving the care needed

Thirty-eight percent stated that cost was a barrier.



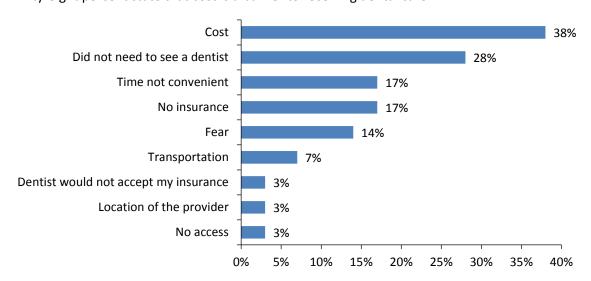
How long has it been since you last visited a dentist?

Twenty-seven percent have not visited a dentist in more than a year.



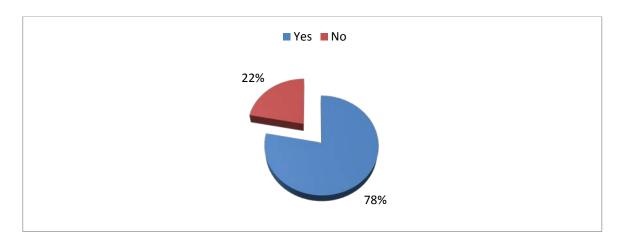
Barriers to Visiting the Dentist

Thirty-eight percent state that cost is a barrier to receiving dental care.



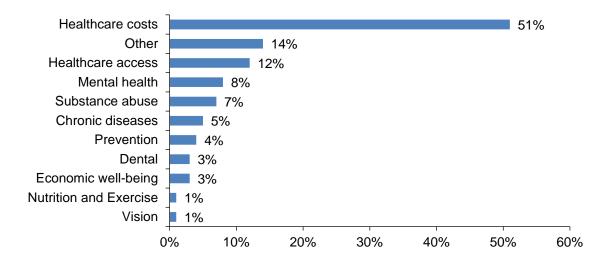
Do you have any kind of dental care or oral health insurance coverage?

Twenty-two percent of survey respondents do not have dental insurance.



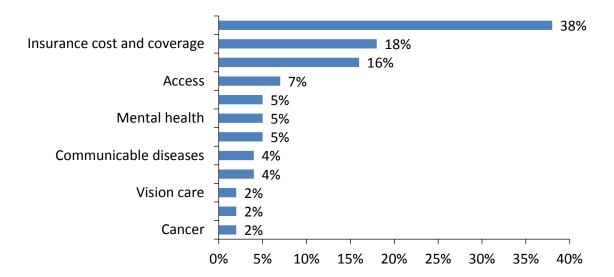
Most Important Community Issues

Health care costs and health care access are the top concerns of respondents for their community.



Most Important Issue for Family

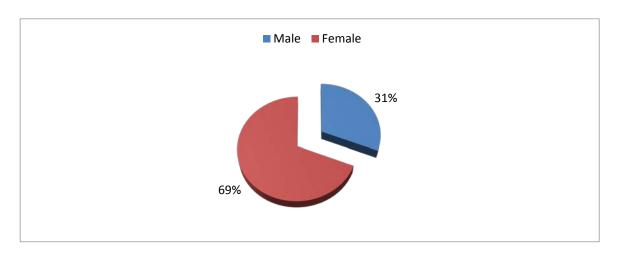
Health care costs and insurance cost and coverage are the top concerns of survey respondents for their family.



Demographic Information for Community Resident Participants

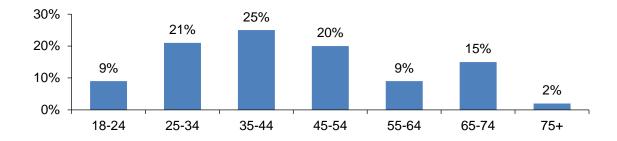
Biological Gender

Only 31% of the survey participants were male.

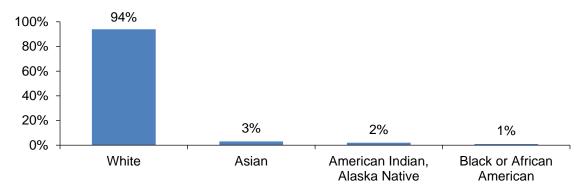


Age

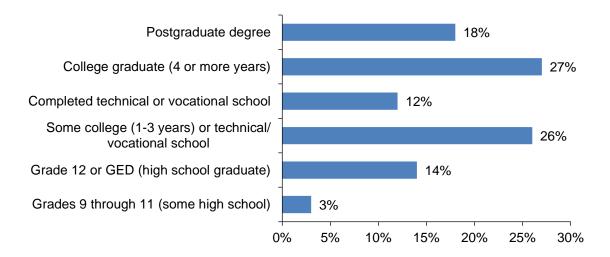
Every age group was represented among the survey participants; however, only 2% fell into the 75+ age range.



Ethnicity

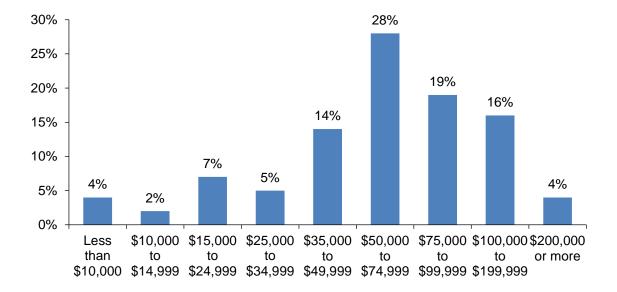


Education Level



Total Annual Household Income

Thirteen percent of survey participants have an annual household income at or below the Federal Poverty Level for a family of four.



Secondary Research Findings

Census Data

66,223 - Population of Lincoln County, South Dakota and Lyon County, Iowa.

	Lincoln (SD)	Lyon (IA)
% below 18 years of age	28.6	28.4
% 65 and older	11.6	17.3
% White – non-Hispanic	93.6	95.8
American Indian	0.6	0.4
Hispanic	1.9	2.6
African American	1.3	0.2
Asian	1.3	0.3
% Female	50.3	49.2
% Rural	29.3	100

County Health Rankings

	Lincoln County	Lyon County	State of South Dakota	U.S. Top Performers
Adult smoking	14%	13%	18%	14%
Adult obesity	29%	34%	31%	26%
Physical inactivity	20%	33%	22%	20%
Excessive drinking	20%	22%	20%	13%
Alcohol-related driving deaths	22%	22%	37%	13%
Food insecurity	8%	9%	12%	10%
Uninsured adults	7%	6%	14%	7%
Uninsured children	4%	5%	7%	3%
Children in poverty	4%	9%	17%	12%
Children eligible for free or reduced lunch	17%	26%	42%	33%
Diabetes monitoring	89%	93%	84%	91%
Mammography screening	77%	71%	66%	71%
Median household income	\$84,600	\$62,500	\$54,900	\$65,600

Health Needs and Community Resources Identified

The Internal Revenue Service requires that a community health needs assessment include an inventory of resources that are available to address the unmet needs. This document is referred to as an asset map. Sanford Health conducted asset mapping by reviewing the primary and secondary research and identifying the unmet needs from the various surveys and data sets. Each unmet need was researched to determine what resources are available in the community and county to address the needs. The asset map was reviewed by Sanford leadership and by community key stakeholders to validate the assets. The asset map helped to identify gaps in services. Once gaps were determined the key stakeholder group proceeded to the prioritization discussion and multi-voting exercise. The group was asked to prioritize the top two concerns that would be further developed into implementation strategies.

The process executed in the work was based on the McKnight Foundation model "Mapping Community Capacity" by John L. McKnight and John Kretzmann, Institute for Policy Research at Northwestern University.

The asset mapping process identified needs from the following:

- Key stakeholder survey
- Resident survey
- Facilitated discussion by the key stakeholders
- Secondary research
- Community resources that are available to address the needs

Please see the asset map in the Appendix.

Canton/Inwood 2019 Community Health Needs Assessment Prioritization Worksheet

Criteria to Identify Priority Problem

- Cost and/or return on investment
- · Availability of solutions
- Impact of problem
- Availability of resources (staff, time, money, equipment) to solve problem
- Urgency of solving problem (Ebola or air pollution)
- Size of problem (e.g. # of individuals affected)

Criteria to Identify Intervention for Problem

- Expertise to implement solution
- · Return on investment
- · Effectiveness of solution
- Ease of implementation/maintenance
- Potential negative consequences
- Legal considerations
- Impact on systems or health
- Feasibility of intervention

Health Indicator/Concern

Economic Well-Being

- Availability of affordable housing 4.24 4 votes
- Employment options 3.33 2 votes
- Skilled labor workforce 3.24
- Household budgeting and money management 3.19
- Maintaining livable and energy efficient homes 3.05

Transportation

- Availability of walking and biking options 3.27
- Driving habits 3.05

Children and Youth

- Substance abuse by youth 3.47 4 votes
- Cost of activities (outside of school and sports) for children and youth 3.44
- Availability of activities (outside of school and sports) for children and youth 3.42
- Availability of quality child care 3.41 1 vote
- Availability of services for at-risk youth 3.41
- Bullying 3.41 2 votes
- Cost of quality child care 3.35
- Cost of services for at-risk youth 3.35
- Childhood obesity 3.33
- Teen tobacco use 3.29
- Teen suicide 3.24 1 vote
- Opportunities for youth-adult mentoring 3.06

Aging Population

- Cost of memory care 3.63
- Cost of long term care 3.59
- Cost of in-home services 3.32
- Availability of memory care 3.28
- Availability of resources to help the elderly stay safe in their homes 3.16 2 votes

Safety

- Abuse of prescription drugs 3.47 1 vote
- Presence of drug dealers 3.06

Health Care Access

- Access to affordable health insurance coverage 3.82
- Access to affordable health care 3.72
- Availability of health care services for Native people 3.47
- Access to affordable prescription drugs 3.44
- Availability of health care services for New Americans 3.41
- Access to affordable vision insurance coverage 3.29
- Availability of mental health providers 3.22
- Availability of non-traditional hours 3.19
- Access to affordable dental insurance coverage 3.18
- Availability of behavioral health 3.18
 - Availability of prevention programs and services 3.12

Mental Health and Substance Abuse

- Drug use and abuse 3.41 4 votes
- Suicide 3.41 1 vote
- Alcohol use and abuse 3.33 1 vote
- Smoking and tobacco use 3.24
- Depression 3.22 1 vote
- Stress 3.18
- Dementia and Alzheimer's Disease 3.12
- Exposure to secondhand smoke 3.06

2018 Community Health Needs Assessment

How Sanford Canton-Inwood is Addressing the Community Needs

Identified Concerns	How Sanford Canton-Inwood is Addressing the Community Needs
ECONOMIC WELL BEING	
Availability of affordable housing	Sanford is addressing the need by working with the Canton Economic Development Committee. Sanford's Senior Director is the president of the CEDC. One of the main goals for the group is housing. The President and Sanford Senior Director went to the City Commission on behalf of the CEDC requesting \$45,000 for seed money for the engineering fees associated with housing development to help entice developers to establish building work in
	Canton.
Employment options	Sanford Canton-Inwood Medical Center's (SCIMC) Senior Director works with the CEDC to help recruit new businesses to town and add jobs to our local economy.
Skilled labor workforce	SCIMC's Senior Director works with CEDC to help recruit new businesses to town and add jobs to our local economy.
Household budgeting & money management	SCIMC sponsors Junior Achievement. This group of individuals goes into the local schools and teaches many topics, one being budgeting and money management.
Maintaining livable & energy efficient homes TRANSPORTATION	SCIMC's Senior Director works with the CEDC's housing committee to work on bringing in developers to work on affordable and cost efficient homes.
Availability of walking & biking options	We have staff on some Empower Canton initiative teams and one is biking trails. They continue to work as a group with a focus on a single track which is a single lane for biking and can also be used for walking.
Driving habits	Providers continue to work with patients and their families on aging patients' driving assessments. The school offers drivers education classes to students over the age of 14 for \$275. Have looked at grant options to help pay for this service.
CHILDREN AND YOUTH	
Substance abuse by youth	SCIMC works with Keystone Treatment Center in providing contracted services for drug screens and lab work for Keystone's substance abuse patients.
Cost of activities (outside of school & sports) for children and youth	The Senior Director helped develop the Canton-Inwood Area Youth Organization, which assisted in bringing a volleyball and basketball camp to town. It contributed \$400 to 4 individuals who were not able to afford the full tuition for the basketball camp. The hospital's foundation also provided funding for the summer recreation program to buy new equipment (\$5,000).
Availability of activities (outside of school & sports) for children & youth	The Senior Director assisted in bringing in additional sport camps and revamping the summer recreation program to help boost attendance. Attendance for the summer recreation program grew from 78 in 2017 to 147 in 2018.
Availability of quality childcare	
Availability of services for at-risk youth	GED classes are offered at Canton High School, counseling is offered in Sanford Clinic by Becky, and Behavioral Health is offered via telehealth by Mark Daniels.
Bullying	We continue to help with <i>Girls on the Run</i> through the EMBE program that offers classes in self-esteem, anti-bullying and bullying awareness, and exercises to run a 5K at the end of the season. This program helps with self-esteem building for 3 rd through 5 th grade girls.

Identified Concerns	How Sanford Canton-Inwood is Addressing the Community Needs
Cost of quality childcare	The RN Health Coach and providers work with patients on resources such as
	childcare assistance and Love, Inc. resources.
Cost of services for at-risk youth	Sports physicals are offered at \$35 or free for teens who would like to be in
	sports. We offer STD classes at the school and include community resources
	for physicals, STD testing, and birth control options.
Childhood obesity	We continue to sponsor the local Bike Rodeo, which encourages kids to be
	active. We sponsor the summer recreation program each year. We also put
	on a Health Fair every year and gear some of our educational material
	toward youth and healthy lifestyles. We continue to help with Girls on the
	Run through the EMBE program that offers classes in self-esteem, anti-
	bullying and bullying awareness, and exercises to run a 5K at the end of the
	season. This program helps with self-esteem building for 3 rd through 5 th
	grade girls.
Teen tobacco use	
Teen suicide	SCIMC offers counseling services with a licensed outreach counselor. She
	assists patients with depression, stress, anxiety, grief, eating disorders,
	chronic mental conditions, ADHD/ADD, and behavioral concerns. She comes
	to Canton 2 x per month to see patients in the clinic.
Opportunities for youth/adult	SCIMC has encouraged staff to volunteer time at <i>Girls on the Run</i> as well as
mentoring	the Junior Achievement program in the Canton Schools.
AGING POPULATION	
Cost of memory care	Sanford Health has just merged with Good Samaritan Society. Canton
	currently has a facility in town and we will be able to work together more in
	regards to many of the issues that our aging community faces. The hospital
	social worker also assists patients in completing long term care Medicaid
	applications.
Cost of long term care	Sanford Health has just merged with Good Samaritan Society. Canton
	currently has a facility in town and we will be able to work together more in
	regards to many of the issues that our aging community faces. The hospital
	social worker also assists patients in completing long term care Medicaid applications.
Cost of in-home services	Referrals are made by the SCIMC social worker to Adult Services and Aging as
Cost of in-home services	well as Medicaid for patients needing assistance with the cost of in-home
	care.
Availability of memory care	Sanford Health has just merged with Good Samaritan Society. Canton
Availability of memory care	currently has a facility in town and we will be able to work together more in
	regards to many of the issues that our aging community faces. SCIMC's social
	worker also assists families and patients in locating memory care and assists
	with the referral process.
Availability of resources to help	SCIMC's social worker and/or clinic RN Health Coach make referrals to Adult
the elderly stay safe in their	Services and Aging, as well as the Health Co-op, to provide services to the
homes	elderly and disabled and assist in managing their medications and other
	health needs.
Availability of long term care	SCIMC's social worker assists patients with finding long term care, beginning
_	with their first choice.
Availability of family & friends	SCIMC's social worker and RN Health Coach, as well as Adult Services and
caring for & helping to make	Aging, are available to assist families in making decisions for elderly patients.
decision for elders	
SAFETY	
Abuse of prescription drugs	Our clinical providers work with Sanford and our patients by entering into a
	pain management contract that aims to reduce the prolonged use of
	prescription drugs by offering alternate treatment plans for the patients.

Identified Concerns	How Sanford Canton-Inwood is Addressing the Community Needs
Presence of drug dealers	Canton High School has a drug and alcohol counselor who works with the
	middle school and high school students. SCIMC has offered to help this fall
	with classes focusing on the issues within the community.
HEALTH CARE ACCESS	
Access to affordable health	Sanford Health provides a wide array of health insurance options for patients
insurance coverage	depending on needs.
Access to affordable health care	Sanford Health provides a wide array of health insurance options for patients
	depending on needs. SCIMC also offers Direct Access Lab with cash only
	prices for those who don't have insurance or have high deductibles. Canton
	also has a Health Co-op with health care professionals to help serve the
	under-insured and uninsured population. Our RN Health Coach is also a
	resource for those who find the cost of health care to be a barrier.
Availability of health care	We have 5 providers at our hospital/clinic who are available to care for the
services for Native people	health needs of Native Americans.
Access to affordable	We have an RN Health Coach who works with patients to find low cost
prescription drugs	medications or free medications through voucher programs.
Availability of health care	We have 5 providers at our hospital/clinic who are available to care for the
services for New Americans	health needs of New Americans.
Access to affordable vision	Referrals are made to the local Lions Club that will assist in providing glasses
insurance coverage	for those who need them and cannot afford to pay.
Availability of mental health	SCIMC is working with the Sanford Vermillion hospital to provide an
providers	Integrated Health Therapist via telemedicine.
Availability of non-traditional	SCIMC provides an acute care clinic on Saturdays from 8:00 a.m. to 12:00
hours	p.m.
Access to affordable dental	SD Donated Dental has assisted in dental needs. Currently there is a 2-year
insurance coverage	waiting period. Referrals are also made to Falls Community Health and USD
_	Dental for dental services based on income.
Availability of behavioral health	SCIMC is working with the Sanford Vermillion hospital to provide an
	Integrated Health Therapist via telemedicine.
Availability of prevention	Providers use SD and IA smoking Quitline that offers counseling, medication
programs and services	and follow-up. All Women Count is used for women who are uninsured or
	underinsured for yearly physicals, mammograms, and pap/cervical
	prevention. Sanford offers Direct Access Labs which provide labs at a cash
	discounted price to help monitor certain ongoing health risks or to assess the
	potential for health risks. An annual Health Fair, Saturday mammograms, and
	heart and vascular screens are also offered at a reduced price.
Availability of specialist	SCIMC provides counseling, orthopedics, cardiology, and general surgery
physicians	outreach on a monthly basis.
MENTAL HEALTH & SUBSTANCE	
ABUSE	
Drug use and abuse	Our providers work with our quality department to establish goals and
	tactics on how to treat each patient.
Suicide	Our providers work with our quality department to establish goals and
	tactics on how to treat each patient.
Alcohol use and abuse	Our providers work with our quality department to establish goals and
	tactics on how to treat each patient.
Smoking & tobacco use	Our providers work with our quality department to establish goals and
	tactics on how to treat each patient.
Depression	Our providers work with our quality department to establish goals and
	tactics on how to treat each patient.
C1	·
Stress	Our providers work with our quality department to establish goals and

Identified Concerns	How Sanford Canton-Inwood is Addressing the Community Needs
Dementia & Alzheimer's	A dementia and Alzheimers support group is offered through Sanford
Disease	Canton-Inwood.
Exposure to secondhand smoke	Providers address smoking during physical appointments, asthma
	appointments, and referrals made to SD and IA Quitline and March of Dimes.
WELLNESS	
Routine check-up:	SCIMC has an RN Heath Coach who runs many registries to accumulate a list
 Have not had a routine 	of individuals who need to be seen, then between the RN Health Coach and
check-up in more than 1	other staff, these patients are contacted either by phone, mail or both to get
year – 25%	them into the clinic to be seen by a provider. If patient does not have
• Cost was an issue – 31%	insurance, the RN Health Coach will help see if they qualify for Medicaid or
	other subsidized plans. If not, charity care is offered.
Dental check-up:	USD Dental and the Canton School District offer yearly screening, cleanings
 Did not visit a dentist in 	and dental care to all children in the school district for free. Falls Community
more than one year –	Health is also a referral for dental needs based on income.
27%	
• Cost was an issue – 38%	
Have dental insurance -	
78% Did not have a flu shot in the	SCIMC in conjunction with Sanford Health Marketing does a lot of advertising
	and communication with patients on the benefits of getting a flu shot.
past year – 37%	Sanford has made it mandatory for employees to get the flu shot.
Do not get the recommended	We have an annual Wellness Challenge that gets the community involved in
5+ servings of fruits/vegetables	a friendly competition to live a healthier lifestyle and one of the challenges is
each day – 57%	to get people to eat more fruits and vegetables.
Obese – 44%	SCIMC sponsors many community events to help address obesity - Health
Obese – 4476	Fair, Bike Rodeo, Wellness Challenge, Healthy Eating Topics, etc. Our
	providers also have a BMI quality measure in which they address weight at
	each visit and work with the patient to improve their weight.
Overweight – 28%	SCIMC sponsors many community events to help address obesity - Health
Over weight 2070	Fair, Bike Rodeo, Wellness Challenge, Healthy Eating Topics, etc. Our
	providers also have a BMI quality measure in which they address weight at
	each visit and work with the patient to improve their weight.
	eden visit and work with the patient to improve their weight.

Implementation Strategies

Implementation Strategies - 2018

Priority 1: Economic Well-Being - Affordable Housing

Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.

Priority 2: Behavioral Health and Mental Health Access

Mental health is important at every stage of life and affects how people think, feel and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health and behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Canton-Inwood Community Health Needs Assessment Implementation Strategy Action Plan – 2019-2021

Priority 1: Economic Well-Being - Availability of affordable Housing

<u>Projected Impact</u>: Increasing the availability of affordable housing units will increase the economic well-being of community members

Goal 1: Work with Canton Economic Development Committee to expand housing

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Attend CEDC Meetings and present the findings from the CHNA research	Housing developer contacts	CEO	Executive Team Oversight	
Assist Housing Committee	Number of affordable homes available	CEO	Executive Team Oversight	Work with the City and landowners on appropriate land options
Identify funding resources to help with building concept design for land options	Land development identification and design	CEO	Executive Team Oversight	Partner with local agencies (Utilities, City, County) for funding

Priority 2: Behavioral Health and Mental Health Access – Substance Abuse by Youth

<u>Projected Impact</u>: Bring awareness of drug use impact to help reduce substance abuse by youth

Goal 1: Work with school and law enforcement to educate children on the effects of drug abuse

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Sponsor an	Number of students	Sanford	Executive	Local School District,
educational	attending	Canton-	Team	Local Police, and
presentation by local		Inwood	Oversight	possibly County
resources to educate		Medical		Sheriff's office
youth on short- and		Center		
long-term effects of		Leadership		
drug abuse		Team		

<u>Goal 2</u>: Work with local treatment facility and law enforcement to educate parents on early detection of drug use and abuse in youth

Actions/Tactics	Measurable Outcomes & Timeline	Dedicated Resources	Leadership	Note any community partnerships and collaborations - if applicable
Sponsor an	Number of parents	Sanford	Executive	Local School District,
educational	attending	Canton-Inwood	Team	Local Police,
presentation by local		Medical Center	Oversight	Keystone Treatment
resources to educate		Leadership		Facility, and possibly
parents on early		Team		County Sheriff's
detection of youth				office
drug use and abuse				

Demonstrating Impact – 2017-2019 Strategies

Priority 1: Children and Youth

Projected Impact: The Sanford fit on-line modules are available for the schools and daycare centers in

the community – serving a broad base of students and their families

Goal 1: Provide health and wellness opportunities to area students and families

Actions/Tactics	Measureable Outcomes	Dedicated Resources	Leadership	Note any community partnerships and collaborations (if applicable)
Implement Sanford <i>fit</i> in local schools and daycares	# of classrooms using the program at the end of the time period	Clinic RN Health Coach	Sanford fit Leadership Executive Team Oversight	Schools and daycares
Secure grant funding to help with printing costs and promotional items	# of printed materials distributed to schools and daycare centers # of events to create community awareness	Sanford Grant Office	Sanford fit Leadership Executive Team Oversight	Schools and daycares

Priority 2: Physical Health

Projected Impact: Community members are more active and physically fit

Goal 1: Increase opportunities to improve physical activity

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Community partnerships and collaborations - if applicable
Develop a wellness challenge	Increase the number of teams in participation	Clinic RN Health Coach	Executive Team Oversight	Partner with local businesses for prizes and participation
Community Health Fair and Bike Rodeo	Increase residents' participation in these events	Sanford Departments Display at Health Fair	Executive Team Oversight	Partner with Chamber to make sure these events grow

Demonstrating Impact - 2017-2019 Strategies

During the 2016 Community Health Needs Assessment research cycle community members were invited to discuss community needs, provide recommendations, and vote on the top priorities to address over the following three years. At Sanford Canton-Inwood Medical Center, the top priorities addressed through an implementation strategy process included:

- 1) Children and Youth
- 2) Physical Health

We are encouraged by the progress that we have made.

Goal 1: CHILDREN AND YOUTH - Provide Health and Wellness Opportunities to Area Students and Families

With the growing obesity epidemic the Sanford Canton-Inwood Medical Center leadership team worked closely with the City of Canton and the Canton School System to work on strategies to give families more opportunities to be physically fit. Beginning in April of 2017 the City Manager began leading focus group discussions on what people in Canton wanted for their future and the results were taken to a community forum on August 24, 2017. As a result of those meetings, one group, headed by the Senior Director of the hospital, worked on exploring how to enhance youth activities. Work began on how to improve the summer recreation plan for youth ages 5 to 12 years of age because the numbers had gone from 140 kids in 2011 to 84. As a result, the group used Survey Monkey to survey all parents who had children of that age and then tailored the 2018 summer recreation program based on the feedback. The results were staggering. The enrollees for the 2018 recreation program went up to 148 kids in ages 5 to 12. Some of the biggest changes included more activities like baseball, ultimate Frisbee, football, kickball, and volleyball, and the added Friday field trips to state parks, museums, and other local attractions. Sanford's Board of Directors was very supportive of this project and provided over \$6,000 in funding to help purchase the equipment needed for these new programs as well as sponsoring some of the field trips for the children and their families.

Sanford and the Canton school system also worked together to increase activities. Sanford provided the Canton Elementary School, which includes approximately 300 students K-5, with a Sanford *fit* program kit that helps kids with moods, eating better, and provides information on different activities that are fun and keep kids active. Sanford Canton-Inwood Medical Center Board of Directors made the decision to invest in helping the school fund a strength and conditioning coach. The new coach started in July 2018 and works with student athletes, and also with those students who want to build confidence and become healthier.

Goal 2 - PHYSICAL HEALTH - Increase Opportunities to Improve Physical Activity

The Sanford Canton-Inwood Medical Center staff and Board of Directors have joined forces with the Canton Chamber of Commerce on a community Wellness Challenge. The program started in the summer of 2013 and is run on an annual basis. The program is set up as a competition and gives points to the individuals on each team for things like eating fruits and vegetables, exercising, attending community events, volunteering, and many other things. Each week results are tallied and posted for teams to see how they compare with each other. The length of the competition has been anywhere from 6 weeks up to 10 weeks in duration. This program was a good way to have a friendly competition while providing incentives toward living a healthier lifestyle in our community.

Sanford Canton-Inwood Medical Center also sponsors a Health Fair every year in March. Over the course of the last three years, many of the staff at the hospital have helped to focus more towards healthy living, providing activities for kids to be more aware of a healthy lifestyle. Activities such as planting fruits and vegetables,

learning about healthy food, heart screenings, etc. have all been a part of the Health Fair. The attendance has been over 500 community members for the past 5 years and since adding the kid's activities the attendance of children has been visibly increasing.

Community Feedback from the 2016 Community Health Needs Assessment

Sanford Health is prepared to accept feedback on the 2016 Community Health Needs Assessment and has provided online comment fields on our website for ease of access. There have been no comments or questions about the Sanford Canton-Inwood Medical Center's CHNA.

Appendix

Primary Research

Canton-Inwood Asset Map

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary Data	Community resources available to address the need	Gap?
			Data		
Economic Well Being	Availability of affordable housing 4.24 Employment options 3.33 Skilled labor workforce 3.24 Household budgeting and money management 3.19 Maintaining livable and energy-efficient homes 3.05	25% report that they run out of food before having money to buy more		Housing resources: Canton Hsg. & Redevelopment Commission, 903 W. 5th St., Canton Canton Public Housing Authority, 903 W. 5th St., Canton Inter-Lakes Community Action Partnership, 505 N. Western Ave., Sioux Falls Canton Realty, 218 E. 5th St., Canton Dakota Midwest Real Estate, 402 W. 5th St., Canton Low Income Housing resources: Colonial Village Apts., 903 W. 5th St., Canton Elms Apts., 503 E. Poplar Dr., Canton Old Main Apts., 320 N. Lawler St., Canton Villa Apts., 916 E. 2nd St., Canton Employment resources:	
				Major Employers: Eastern Farmers Co-op, 415 E. 5th St., Canton Adams Thermal Systems, 47920 W. 5th St., Canton Bid-Well, 501 W. Industrial Rd., Canton Johnson Feed, Inc., 305 W. Industrial Rd., Canton Fastek Products, 515 Noid St., Canton Legacy Electronics, 1220 N. Dakota St., Canton Money Management resources: Lincoln Co. Extension Service (money mgmt. classes), 104 N. Main St., Canton Farmers State Bank, 220 E. 5th St., Canton Great Western Bank, 102 W. 5th St., Canton First Bank & Trust, 402 E. 5th St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary Data	Community resources available to address the need	Gap?
				Security Savings Bank, 100 S. West St., Canton Home Maintenance/Energy Efficiency resources: AR Electric, 913 Candy Court, Canton Bryant's Lawn Care, 305 Noid St., Canton Canton Home & Farm, 215 S. Broadway, Canton Food resources: Canton Farmers Market, 600 W. 5 th St., Canton Senior Meals, 215 E. 4 th St., Canton Meals on Wheels, c/o LeAnn Anderson 605-987-5520 Food Pantry, 124 E. 2 nd St., Canton R. Burgess Food Pantry, 100 E. 3 rd St., Canton Sunshine Foods, 715 E. 5 th St., Canton Kroger Foods, 405 N. Riverview Rd., Canton Canton School District reduced price meals for students, 800 N. Main, Canton SNAP program, 700 Governors Drive, Pierre Classes for meal planning, Lincoln Co. Extension Service, 104 N. Main St., Canton	
Transportation	Availability of walking and biking options 3.27 Driving habits 3.05			Physical Activity resources: Newton Hills State Park, 28767 - 482nd Avenue, Canton Jack Fox Park, 225 N. Broadway St., Canton West Ball Park, West Hwy 18 & Howard St., Canton Betty Everhart Park, 200 E. 5 th St., Canton Kennedy Park, 210 N. Dakota St., Canton Chautauqua Park, 10 th St. & S. Broadway, Canton Stand Pipe Park, N Grant & E Lynn Streets, Canton South Mini Park, corner of Cedar & 10th St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
				 Canton Cycling Classic, 210 N. Dakota St., Canton Independence Day Bike Parade, 28767 – 482nd Avenue, Canton Park District, 210 N. Dakota St., Canton School sports activities – E. O. Lawrence Elementary School, 724 Sanborn St., Canton School sports activities – Middle & High School, 800 N. Main, Canton Swimming Pool, 415 N. Sanborn St., Canton Hiawatha Golf Club, 2400 E. 5th St., Canton Youth Softball & Football, 210 N. Dakota St., Canton Canton Baseball, 800 N. Main, Canton Town & Country Bowling, 122 N. Cedar St., Canton Britt's Workout, 49 Park Lane, Canton Curves, 1006 W. 5th St., Canton Swenson Fitness, 28199 West Ave., Canton Driver Education resources: DriversEd.com SD Dept. of Education drivers education classes, 800 Governors Drive, Pierre SD Safety Council, 1108 N. West Ave., Sioux Falls SD AAA, 1300 Industrial Ave., Sioux Falls Canton High School, 800 N. Main, Canton Community Education, 724 N. 	
				Sanborn, Canton	
Children and Youth	Substance abuse by youth 3.47 Cost of activities (outside of school and sports) for children and youth 3.44 Availability of activities (outside of school and sports) for children and youth 3.42			Substance Abuse resources: AA, 1000 N. West Ave., Sioux Falls Arch Halfway House, 333 S. Spring Ave., Sioux Falls Avera Addiction Recovery, 2412 S Cliff Ave., Sioux Falls Bartels Counseling, 6330 S. Western Ave., Sioux Falls Carroll Institute, 310 S. First Ave., Sioux Falls	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
	Availability of quality child care 3.41			Changes & Choices Recovery Center, 301 S. 1st Ave., Sioux	
	Availability of services for at-risk youth 3.41			Choices Recovery, 2701 S. Minnesete Ave. Sieuw Felle	
	Bullying 3.41			Minnesota Ave., Sioux Falls • Face It Together, 231 S. Phillips Ave., Sioux Falls	
	Cost of quality child care			• First Step, 4320 S. Louise Ave., Sioux Falls	
	3.35			Glory House, 4000 SW Ave., Sioux Falls	
	Cost of services for at-risk youth 3.35			Keystone Treatment Center, 3800 S. Kiwanis Ave., Sioux	
	Childhood obesity 3.33			 Falls Minnehaha Co. Detox Center, 415 N. Dakota Ave., Sioux Falls 	
	Teen tobacco use 3.29			 Prairie View Prevention Services, 822 E. 41st St., Sioux 	
	Teen suicide 3.24			Falls • Sioux Falls VA, 2501 W. 22 nd	
	Opportunities for youth/adult mentoring			St., Sioux Falls Sioux Falls Urban Indian	
	3.06			Health, 711 N. Lake Ave., Sioux Falls	
				 Sioux Falls Treatment Center, 2519 W. 8th St., Sioux Falls 	
				Southeastern Alcohol & Drug Abuse Prevention Center,	
				1309 W. 51st St., Sioux Falls Tallgrass Recovery, 27048 S.	
				 Tallgrass Ave., Sioux Falls Berakhah House, 400 N. Western Ave., Sioux Falls 	
				Genesis Program, 1301 E. Austin St., Sioux Falls	
				 Salvation Army, 1017 N. Sherman Ave., Sioux Falls 	
				• 12 Step Living Corp., 2601 S. Minnesota Ave., Sioux Falls	
				 Carroll Institute, 327 S. Spring Ave., Sioux Falls 	
				 Volunteers of America, 826 W. 2nd St., Sioux Falls 	
				Volunteers of America, 1401 W. 51 st St., Sioux Falls	
				Volunteers of America, 1310 – 51st St., Sioux Falls	
				Youth Activities resources: • Canton Latchkey, 724 N.	
				Sanborn, Canton Park Dept., 210 N. Dakota St.,	
				Canton Swimming Pool, 415 N.	
				Sanborn St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
			Data	 E. O. Lawrence Elementary School activities, 724 Sanborn St., Canton Middle & High School activities, 800 N. Main, Canton 4-H Club, 104 N. Main St., Canton Boy Scouts, c/o Jeff Peterson, 28348 – 481st Avenue, Canton Girl Scouts, c/o Stacey Knutson, 605-987-2314 Cub Scouts, c/o Melissa Swier, 714 E. Elder St., Canton High School Booster Club, 800 N. Main, Canton River of Life Community Church, 120 S. Main St., Canton Newton Hills State Park, 28767 – 482nd Ave., Canton Jack Fox Park, 225 N. Broadway St., Canton West Ball Park, W Hwy 18 & Howard St., Canton Betty Everhart Park, 200 E. 5th St., Canton Kennedy Park, 210 N. Dakota St., Canton Chautauqua Park, 10th St. & S. Bdwy, Canton Stand Pipe Park, N. Grant & E. Lynn Sts., Canton South Mini Park, Corner of Cedar & 10th St., Canton Swenson Fitness Center, 28199 West Ave., Canton Hiawatha Golf Club, 2400 E. 5th St., Canton Canton Baseball, 800 N. Main, Canton Canton Latchkey, 724 N. Broadway, Canton Public Library, 225 N. Broadway, Canton Child Care resources: Canton Latchkey, 724 N. Sanborn, Canton Noah's Ark, 202 S. Bartlett St., Canton Noah's Ark, 202 S. Bartlett St., 	
				CantonBlessed Wonders, 921 N.	
				College St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
Identified Concern	Key Stakeholder Survey	Resident Survey			Gap?
				Obesity resources: Sanford dieticians, 440 N. Hiawatha Dr., Canton Sanford Clinic, 440 N. Hiawatha Dr., Canton Swenson Fitness, 28199 West Avenue, Canton Curves, 1006 W. 5th St., Canton Brit's Workout, 49 Park Lane, Canton Canton Farmers Market, 600 W. 5th St., Canton	
				Extension Office, 104 N. Main, Canton Smoking Cessation resources: Sanford Canton-Inwood Clinic, 440 N. Hiawatha Dr., Canton Mental Health resources: Keystone Treatment Center, 3800 S. Kiwanis Ave., Sioux Falls Crawford Counseling Center, 1010 W. 5th St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	·
				 SE Behavioral HealthCare, 2000 S. Summit Ave., Sioux Falls Dakota Oak Counseling, 3220 W. 57th St., Sioux Falls Sioux Falls Psychological Services, 2109 S. Norton Ave., Sioux Falls Great Plains Psychological Services, 4105 Carnegie Circle, Sioux Falls Catholic Family Services, 523 N. Duluth Ave., Sioux Falls Heuermann Counseling Clinic, 2110 S. Brown Pl., Sioux Falls LifeMarks Behavioral Health, 1310 W. 51st St., Sioux Falls Sanford Behavioral Health, 1305 W. 18th St., Sioux Falls NAMI South Dakota, P O Box, 88808, Sioux Falls NAMI South Dakota, P O Box, 88808, Sioux Falls Stronghold Counseling Services, 4300 S. Louise Ave., Sioux Falls Youth/Adult Mentoring resources: 4-H Clubs, 104 N. Main St., Canton Boy Scouts, c/o Jeff Peterson, 28348 - 481st Ave., Canton Cub Scouts, c/o Melissa Swier, 714 E. Elder St., Canton Girl Scouts, c/o Stacey Knutson, 605-987-2314 Big Brother/Big Sister, 1108 NW Avenue, Sioux Falls 	
Aging Population	Cost of memory care 3.63 Cost of long term care 3.59 Cost of in-home services 3.32 Availability of memory care 3.28 Availability of resources to			Memory Care resources: Canton Good Samaritan Center, 1022 N. Dakota Drive., Canton Long Term Care resources: Canton Good Samaritan Center, 1022 N. Dakota Dr., Canton Lincoln Co. Home Health Agency & Public Health, 100 E.	
	help the elderly stay safe in their homes 3.16 Availability of long term care 3.00 Availability of family and friends caring for and			5 th St., Canton • Senior Citizens Center, 215 E. 4 th St., Canton	

helping to make decisions for elders 3.00 In-Home Services resources: Lincoln Co. Home Health, 100 E. 5° St., Canton Sanford Home Medical Equipment, 723 E. 5° St., Canton Sanford Home Medical Equipment, 723 E. 5° St., Canton Sanford Home Health, 440 N. Hiawatha Dr., Canton Meals on Wheels, c/o LeAnn Anderson 605-887-5520 Resources to help the elderly stay in their homes: Lincoln Co. Home Health Agency & Public Health, 100 E. 5° St., Canton Sanford Home Medical Equipment, 723 E. 5° St., Canton Sanford Home Medical Equipment, 723 E. 5° St., Canton Sanford Home Health, 440 N. Hiawatha Dr., Canton Halsch Pharmacy, 303 E. 5° St., Canton Halsch Pharmacy, 303 E. 5° St., Canton Lewis Family Drug, 715 E. 5° St., Canton Senior Meals, 215 E. 4° St., Canton Meals on Wheels, c/o LeAnn Anderson 605-897-5520 Senior Citizens Center, 215 E. 4° St., Canton SD Dept. of Human Services Respite Care Program, 500 E. Capital, Pierre Lincoln. Co. Dept. of Social Services, 104 N. Main, Canton R. Burgess Food Pantry, 100 E. 3°, Canton Abuse of prescription drugs Abuse of Prescription Drugs resources:	Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
for elders 3.00 • Lincoln Co. Home Health Agency & Public Health, 100 E. 5° St., Canton • Sanford Home Medical Equipment, 728 E. 5° St., Canton • Sanford Home Medical Equipment, 728 E. 5° St., Canton • Sanford Home Health, 440 N. Hiawatha Dr., Canton • Meals on Wheels, c/o LeAnn Anderson 605-987-5520 Resources to help the elderly stay in their homes: • Lincoln Co. Home Health Agency & Public Health, 100 E. 5° St., Canton • Sanford Home Medical Equipment, 728 E. 5° St., Canton • Sanford Home Medical Equipment, 728 E. 5° St., Canton • Sanford Home Health, 440 N. Hiawatha Dr., Canton • Haisch Pharmacy, 308 E. 5° St., Canton • Lewis Family Drug, 715 E. 5° St., Canton • Lewis Family Drug, 715 E. 5° St., Canton • Senior Meals, 215 E. 4° St., Canton • Meals on Wheels, c/o LeAnn Anderson 605-987-5520 • Senior Citizens Center, 215 E. 4° St., Canton • SD Dept. of Human Services Respite Care Program, 500 E. Capital, Pierre • Lincoln. Co. Dept. of Social Services, 104 N, Main, Canton • R. Burgess Food Pantry, 100 E. 3°, Canton • R. Rugess Food Pantry, 100 E. 3°, Canton • R. Rugess Food Pantry, 100 E. 3°, Canton • R. Burgess Food Pantry, 100 E. 3°, Canton • Public Library, 225 N. Broadway, Canton						
3.47 resources:					 Lincoln Co. Home Health Agency & Public Health, 100 E. 5th St., Canton Sanford Home Medical Equipment, 723 E. 5th St., Canton Sanford Home Health, 440 N. Hiawatha Dr., Canton Meals on Wheels, c/o LeAnn Anderson 605-987-5520 Resources to help the elderly stay in their homes: Lincoln Co. Home Health Agency & Public Health, 100 E. 5th St., Canton Sanford Home Medical Equipment, 723 E. 5th St., Canton Sanford Home Health, 440 N. Hiawatha Dr., Canton Haisch Pharmacy, 303 E. 5th St., Canton Lewis Family Drug, 715 E. 5th St., Canton Senior Meals, 215 E. 4th St., Canton Meals on Wheels, c/o LeAnn Anderson 605-987-5520 Senior Citizens Center, 215 E. 4th St., Canton SD Dept. of Human Services Respite Care Program, 500 E. Capital, Pierre Lincoln. Co. Dept. of Social Services, 104 N, Main, Canton Food Pantry, 124 E. 2nd St., Canton R. Burgess Food Pantry, 100 E. 3rd, Canton Canton Transit System, 521 S. Lincoln St., Canton Public Library, 225 N. 	
Presence of drug dealers 3.06 Canton Lincoln Co. Sheriff, 128 N. Main St., Canton	Safety	3.47 Presence of drug dealers			resources: Canton Police, 123 N. Main St., Canton Lincoln Co. Sheriff, 128 N.	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary Data	Community resources available to address the need	Gap?
				Resources to combat drug dealers in the community: Canton Police, 123 N. Main St., Canton Lincoln Co. Sheriff, 128 N. Main St., Canton	
Health Care Access	Access to affordable health insurance coverage 3.82 Access to affordable health care 3.72 Availability of health care services for Native people 3.47 Access to affordable prescription drugs 3.44 Availability of health care services for New Americans 3.41 Access to affordable vision insurance coverage 3.29 Availability of mental health providers 3.22 Availability of nontraditional hours 3.19 Access to affordable dental insurance coverage 3.18 Availability of behavioral health 3.18 Availability of prevention programs and services 3.12 Availability of specialist physicians 3.00	10% do not have health insurance		Affordable Health Insurance resources: Avera Health Plans, 3816 S. Elmwood Pl., Sioux Falls Sanford Health Plan, 1305 W. 18 St., Sioux Falls State Farm, 111 N. Main St., Canton Health Care resources: Sanford Canton-Inwood Medical Center & Clinic, 440 N. Hiawatha Dr., Canton Sanford Community Care Program, 440 N. Hiawatha Dr., Canton Sanford Medical Home Program, 440 N. Hiawatha Dr., Canton Lincoln Co. Public Health, 104 N. Main, Canton Sanford Home Medical Equipment, 723 E. 5th St., Canton Good Samaritan Center, 1022 N. Dakota Dr., Canton Keystone Treatment Center, 1010 E. 2nd St., Canton Canton Family Dental, 1110 W. 5th St., Canton Canton Family vision Center, 109 E. 5th St., Canton Lewis Family Drug, 715 E. 5th St., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
Tuentineu concern	ney stanenoraer sarrey	nesident survey	Data	to address the need	Cup.
				Lincoln Co. Community Health	
				Nurse & WIC office, 104 N.	
				Main St., Canton	
				Affordable Prescription Drugs:	
				CancerCare co-payment CancerCare co-payment CancerCare co-payment	
				assistance, 800-813-4673	
				Freedrugcard.us	
				Rxfreecqrd.com Medsavercard.com	
				Yourrxcard.com	
				Medicationdiscountcard.com	
				Nedymeds.org/drugcard Capryprogram org	
				Caprxprogram.orgSouthdakotarxcard.com	
				Gooddaysfromcdf.org	
				NORD Patient Assistance	
				Program, rarediseases.org	
				• SD Partnership for	
				Prescription Assistance,	
				pparx.org	
				Patient Access Network	
				Foundation,	
				panfoundation.org	
				 Pfizer RC Pathways, pfizerRX 	
				pathways.com	
				• RXhope.com	
				Health Care for New Americans:	
				Sanford Canton-Inwood	
				Medical Center, 440 N.	
				Hiawatha Dr., Canton	
				Lincoln County Community Health Nurse & WIC 104 N	
				Health Nurse & WIC, 104 N. Main St., Canton	
				Wall St., Callton	
				Vision Care resources:	
				Canton Family Vision Clinic,	
				109 E. 5 th St., Canton	
				Mental Health resources:	
				Keystone Treatment Center,	
				1010 E. 2 nd St., Canton	
				Crawford Counseling Center,	
				1010 W. 5 th St., Canton	
				SE Behavioral Health Second line 2000 S. Second line	
				Counseling, 2000 S. Summit	
				Ave., Sioux Falls	
				 Dakota Oak Counseling, 3220 W. 57th St., Sioux Falls 	
				Sioux Falls Psychological	
				Services, 2109 S. Norton Ave.,	
				Sioux Falls	
				Great Plains Psychological	
				Services, 4105 s. Carnegie	
				Circle, Sioux Falls	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
			Data	Catholic Family Services, 523 N. Duluth Ave., Sioux Falls Heuermann Counseling Clinic, 2210 S. Brown Pl., Sioux Falls LifeMarks Behavioral Health, 1310 W. 51st St., Sioux Falls NAMI South Dakota, P O Box 88808, Sioux Falls Stronghold Counseling, 4300 S. Louise Ave., Sioux Falls Sanford Behavioral Health, 1305 W. 18th St., Sioux Falls Dental resources: Canton Dental Clinic, 1110 W. 5th St., Canton Falls Community Dental Clinic, 421 N. Main, Sioux Falls USD Dental Hygiene Clinic, 521 N. Main, Sioux Falls Prevention Programs & Services: Sanford Canton Inwood Medical Center, 440 N. Hiawatha Dr., Canton Specialist Physicians: Sanford Canton Inwood Medical Center, 440 N. Hiawatha Dr., Canton USD Sanford Medical Center,	
Mental Health and Substance Abuse	Drug use and abuse 3.41 Suicide 3.41 Alcohol use and abuse 3.33 Smoking and tobacco use 3.24 Depression 3.22 Stress 3.18 Dementia and Alzheimer's Disease 3.12 Exposure to secondhand smoke 3.06	55% self-report binge drinking at least 1x/month 36% report a diagnosis of depression 33% report a diagnosis of anxiety/stress 31% report a diagnosis of high cholesterol 31% report a diagnosis of asthma 25% report a diagnosis of arthritis		Drug & Alcohol Use/Abuse resources: AA, 1000 N. West Ave., Sioux Falls Arch Halfway House, 333 S. Spring Ave., Sioux Falls Avera Addiction Recovery, 2412 S Cliff Ave., Sioux Falls Bartels Counseling, 6330 S. Western Ave., Sioux Falls Carroll Institute, 310 S. First Ave., Sioux Falls Changes & Choices Recovery Center, 301 S. 1st Avenue, Sioux Falls Choices Recovery, 2701 S. Minnesota Ave., Sioux Falls Face It Together, 231 S. Phillips Ave., Sioux Falls First Step, 4320 S. Louise Ave., Sioux Falls Glory House, 4000 SW Ave., Sioux Falls	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
			Data	to address the need	
		26% currently smoke cigarettes		 Keystone Treatment Center, 3800 S. Kiwanis Ave., Sioux Falls Minnehaha Co. Detox Center, 415 N. Dakota Ave., Sioux Falls Prairie View Prevention Services, 822 E. 41st St., Sioux Falls Sioux Falls VA, 2501 W. 22nd St., Sioux Falls Sioux Falls Urban Indian Health, 711 N. Lake Ave., Sioux Falls Sioux Falls Treatment Center, 2519 W. 8th St., Sioux Falls Southeastern Alcohol & Drug Abuse Prevention Center, 1309 W. 51st St., Sioux Falls Tallgrass Recovery, 27048 S. Tallgrass Ave., Sioux Falls Berakhah House, 400 N. Western Ave., Sioux Falls Genesis Program, 1301 E. Austin St., Sioux Falls Salvation Army, 1017 N. Sherman Ave., Sioux Falls 12 Step Living Corp., 2601 S. Minnesota Ave., Sioux Falls Carroll Institute, 327 S. Spring Ave., Sioux Falls Volunteers of America, 826 W. 2nd St., Sioux Falls Volunteers of America, 1401 W. 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Volunteers of America, 1310 – 51st St., Sioux Falls Crawford Counseling Center, 500 W. 5th St., Canton SE Behavioral Health Counseling, 3200 W. 57th St., Sioux Falls Great Plans Psychological Services, 4105 Carnegie Circle, Sioux Falls Catholic Family Services, 523 	
				N. Duluth Ave., Sioux falls	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
	,	,	Data	to address the need	·
			Data	 Heuermann Counseling Clinic, 2110 S. Brown Pl., Sioux Falls LifeMarks Behavioral Health, 1310 W. 51st St., Sioux Falls NAMI South Dakota, P O Box 88808, Sioux Falls Stronghold Counseling Services, 4300 S. Louise Ave., Sioux Falls Sanford Behavioral Health, 1305 W. 18th St., Sioux Falls Tobacco Cessation resources: Sanford Canton-Inwood Clinic, 440 N. Hiawatha Dr., Canton American Lung Association, Lungsd.org Quitline, SDQuitline.com American Heart Association, P O Box 90545, Sioux Falls Dementia/Alzheimer's resources: Alzheimer's Support Group, 621 E. 4th St., Canton Physicians specializing in dementia:	
				Better Choices Better Health, c/o SD DOH, 615 E. 4 th St., Piorro	
				Sanford Medical Home, 440 Historical Page Contact	
				N. Hiawatha Dr., Canton	
Wellness		25% have not had a routine check-up in		Medical Care resources: Sanford Canton-Inwood Clinic, 440 N. Hiawatha Dr., Canton	

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary	Community resources available	Gap?
		,	Data	to address the need	
		mana Aban 4			
		more than 1 year and cost		Lincoln Co. Community Lockh 104 N. Main St.	
		was an issue for		Health, 104 N. Main St., Canton	
		31%		Lewis Drug (screenings,	
		31/0		wellness checks), 715 E. 5 th	
		27% did not visit		St., Canton	
		their dentist in		St., Carton	
		more than 1		Dental resources:	
		year – cost was a		• Canton Dental Clinic, 1110 W.	
		barrier to 38%		5 th St., Canton	
		78% have dental		• Falls Community Dental Clinic,	
		insurance		421 N. Main, Sioux Falls	
				USD Dental Hygiene Clinic,	
		37% did not		521 N. Main, Sioux Falls	
		have a flu shot in			
		the past year		Flu Shot resources:	
		==o(1		• Sanford Canton-Inwood Clinic,	
		57% do not get		440 N. Hiawatha Dr., Canton	
		the recommended 5		• Lincoln Co. Community	
		or more servings		Health, 104 N. Main St.,	
		of more servings		Canton	
		fruits/vegetables		• Lewis Drug, 715 E. 5 th St.,	
		each day		Canton	
		440/		Obesity resources:	
		44% report that		 Sanford dieticians, 440 N. 	
		they are obese		Hiawatha Dr., Canton	
		28% report that		• Sanford Clinic, 440 N.	
		they are		Hiawatha Dr., Canton	
		overweight		• Swenson Fitness, 28199 West	
				Avenue, Canton	
				Curves, 1006 W. 5 th St., Canton Dritte Werkerst, 40 Berly Lane	
				Brit's Workout, 49 Park Lane, Canton	
				Canton Canton Farmers Market, 600	
				W. 5 th St., Canton	
				• Extension Office, 104 N. Main,	
				Canton	
				Physical Activity resources:	
				Newton Hills State Park,	
				28767 - 482nd Avenue,	
				Canton	
				 Jack Fox Park, 225 N. 	
				Broadway St., Canton	
				West Ball Park, West Hwy 18	
				& Howard St., Canton	
				Betty Everhart Park, 200 E. 5 th	
				St., Canton	
				 Kennedy Park, 210 N. Dakota 	
				St., Canton	
				• Chautauqua Park, 10 th St. & S.	
				Broadway, Canton	
				Stand Pipe Park, N Grant & E	
				Lynn Streets, Canton	<u> </u>

Identified Concern	Key Stakeholder Survey	Resident Survey	Secondary Data	Community resources available to address the need	Gap?
				 South Mini Park, corner of Cedar & 10th St., Canton Canton Cycling Classic, 210 N. Dakota St., Canton Independence Day Bike Parade, 28767 – 482nd Avenue, Canton Park District, 210 N. Dakota St., Canton School sports activities – E. O. Lawrence Elementary School, 724 Sanborn St., Canton School sports activities – Middle & High School, 800 N. Main, Canton Swimming Pool, 415 N. Sanborn St., Canton Hiawatha Golf Club, 2400 E. 5th St., Canton Youth Softball & Football, 210 N. Dakota St., Canton Canton Baseball, 800 N. Main, Canton Town & Country Bowling, 122 N. Cedar St., Canton Britt's Workout, 49 Park Lane, Canton Curves, 1006 W. 5th St., Canton Swenson Fitness, 28199 West Ave., Canton 	

Key Stakeholder Survey

Sanford Canton/Inwood Medical Center

Community Health Needs Assessment
Results from an October 2017 Non-Generalizable
Online Survey of Community Stakeholders

November 2017

SANF#RD°

STUDY DESIGN and METHODOLOGY

The following report includes non-generalizable survey results from an October 2017 online survey of community leaders and key stakeholders identified by Sanford Canton/Inwood Medical Center. This study was conducted through a partnership between the Community Health Collaborative and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Members of the Community Health Collaborative distributed the survey link via e-mail to stakeholders and key leaders, located within various agencies in the community, and asked them to complete the online survey. Therefore, it is important to note that the data in this report are not generalizable to the community. Data collection occurred in the month of October. A total of 22 respondents participated in the online survey.

TABLE OF CONTENTS

SURVEY RESU	JLTS	3
Current State	e of Health and Wellness Issues Within the Community	3
Figure 1.	Current state of community issues regarding ECONOMIC WELL-BEING	3
Figure 2.	Current state of community issues regarding TRANSPORTATION	4
Figure 3.	Current state of community issues regarding CHILDREN AND YOUTH	5
Figure 4.	Current state of community issues regarding the AGING POPULATION	6
Figure 5.	Current state of community issues regarding SAFETY	7
Figure 6.	Current state of community issues regarding HEALTHCARE AND WELLNESS	8
Figure 7.	Current state of community issues regarding MENTAL HEALTH AND SUBSTANCE ABUSE	≣9
Demographic	c Information	9
Figure 8.	Age of respondents	9
Figure 9.	Biological sex of respondents	10
Figure 10). Race of respondents	10
Figure 11	. Whether respondents are of Hispanic or Latino origin	11
Figure 12	2. Marital status of respondents	11
Figure 13	3. Living situation of respondents	12
Figure 14	I. Highest level of education completed by respondents	12
Figure 15	Employment status of respondents	13
Figure 16	5. Whether respondents are military veterans	13
Figure 17	7. Annual household income of respondents, from all sources, before taxes	14
Table 1.	Zip code of respondents	14
Table 2.	Comments from respondents	15
APPENDIX TA	ABLE	16
Appendix	Table 1. Current state of health and wellness issues within the community	16

SURVEY RESULTS

Current State of Health and Wellness Issues within the Community

Using a 1 to 5 scale, with 1 being "no attention needed"; 2 being "little attention needed"; 3 being "moderate attention needed"; 4 being "serious attention needed"; and 5 being "critical attention needed," respondents were asked to, based on their knowledge, select the option that best describes their understanding of the current state of each issue regarding ECONOMIC WELL-BEING, TRANSPORTATION, CHILDREN AND YOUTH, the AGING POPULATION, SAFETY, HEALTH CARE AND WELLNESS, and MENTAL HEALTH AND SUBSTANCE ABUSE.

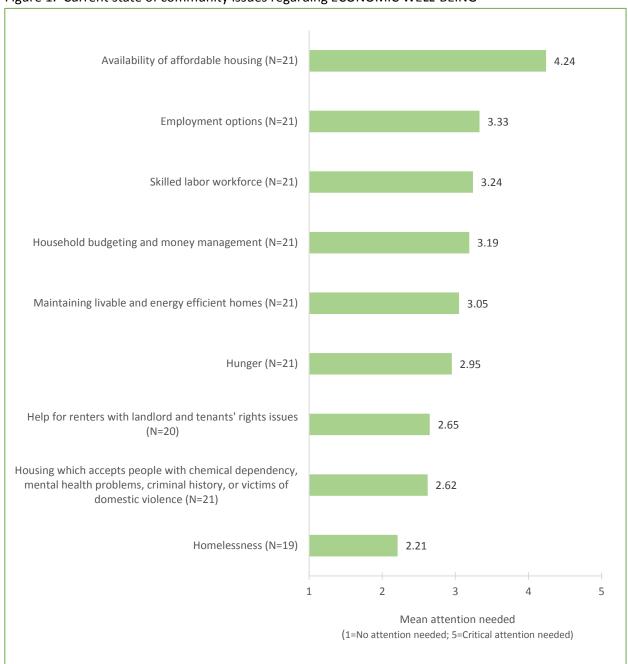
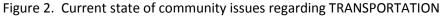


Figure 1. Current state of community issues regarding ECONOMIC WELL-BEING



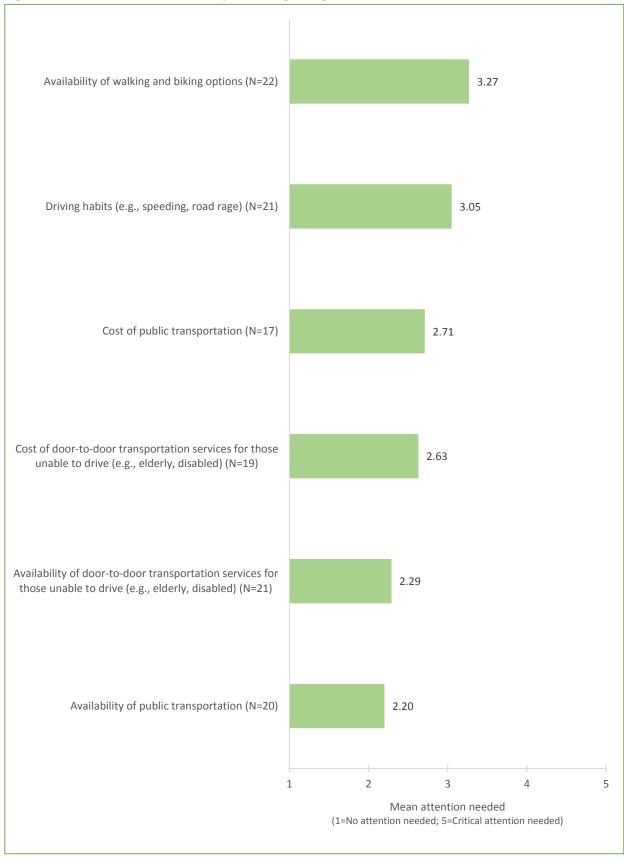


Figure 3. Current state of community issues regarding CHILDREN AND YOUTH

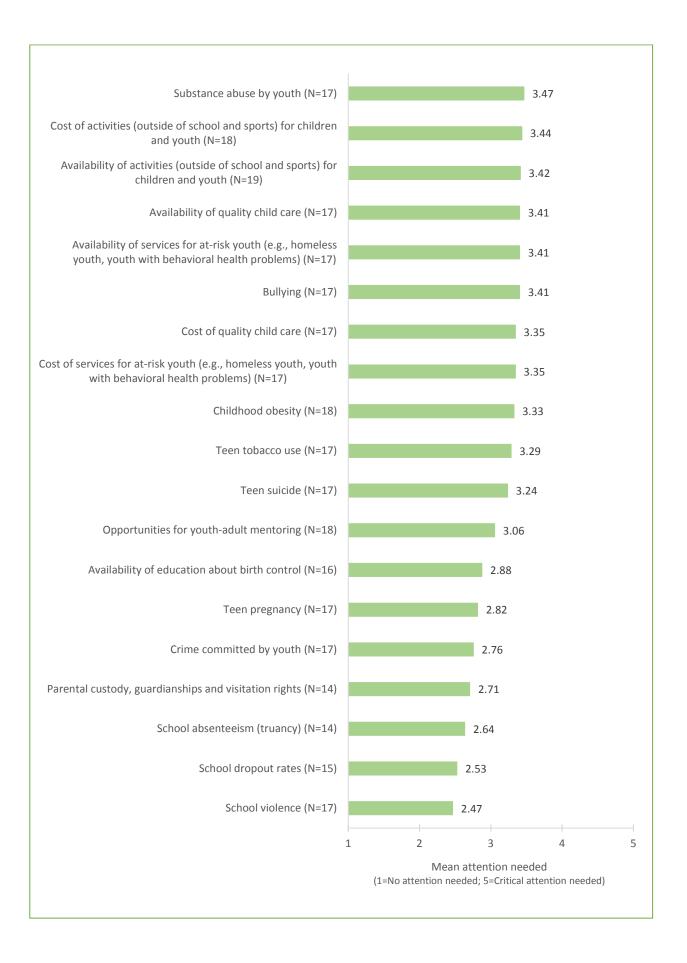


Figure 4. Current state of community issues regarding the AGING POPULATION

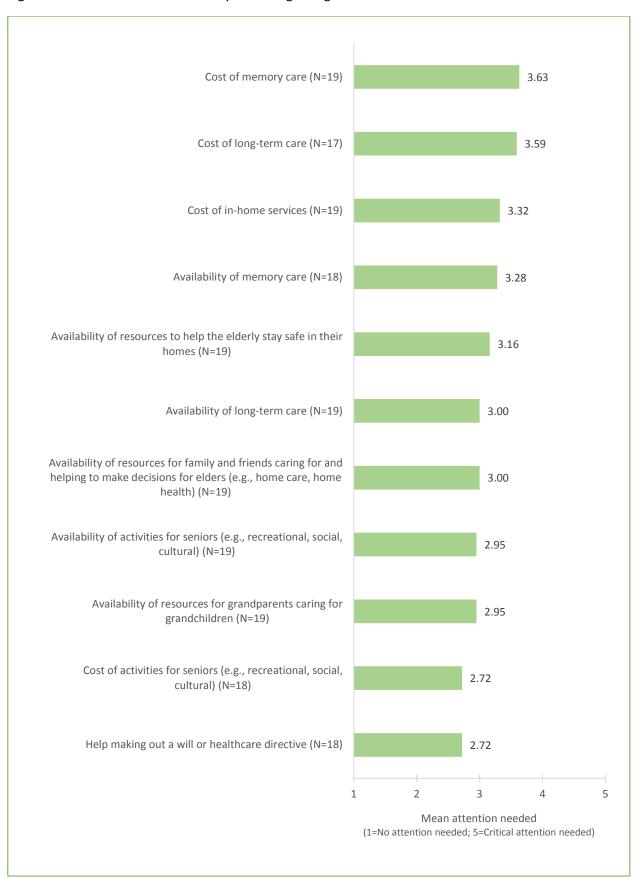


Figure 5. Current state of community issues regarding SAFETY

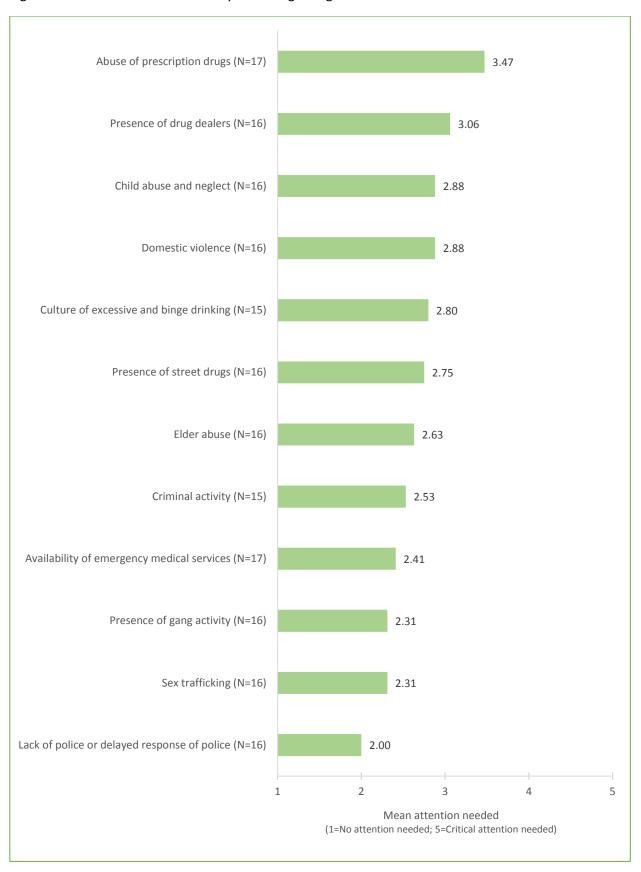
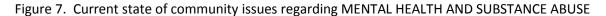
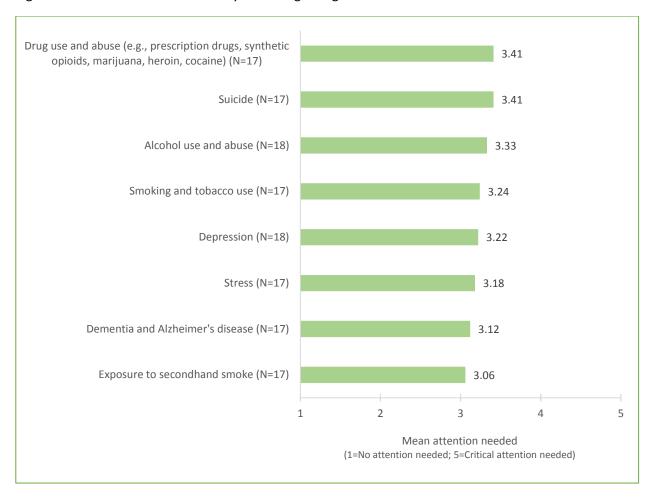


Figure 6. Current state of community issues regarding HEALTH CARE AND WELLNESS

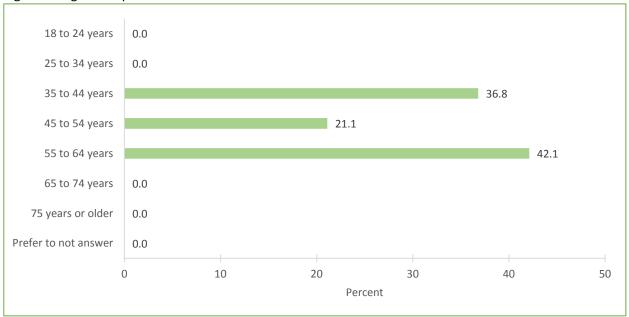






Demographic Information

Figure 8. Age of respondents



N=19

Figure 9. Biological sex of respondents

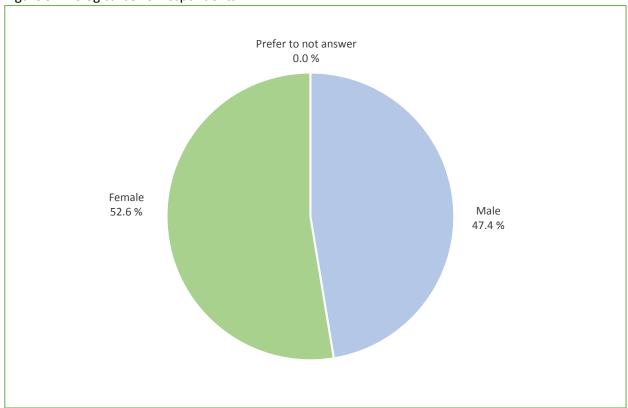


Figure 10. Race of respondents

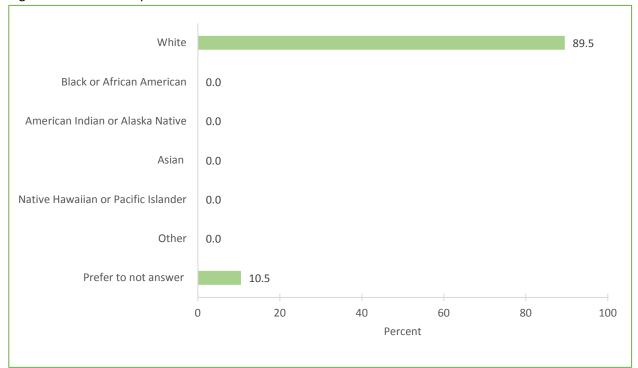


Figure 11. Whether respondents are of Hispanic or Latino origin

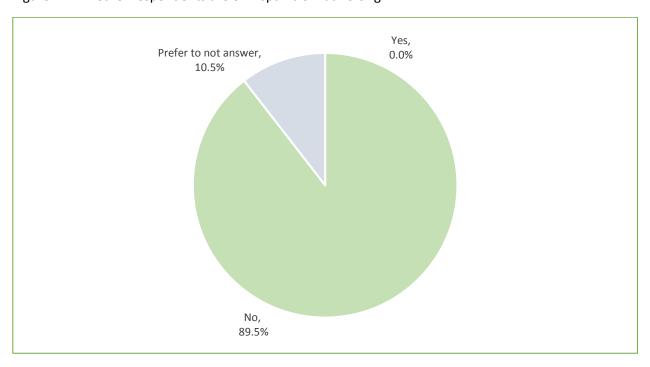
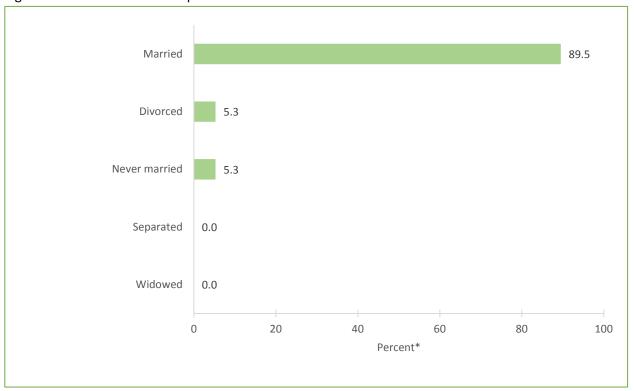
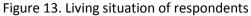


Figure 12. Marital status of respondents



^{*}Percentages do not total 100.0 due to rounding.



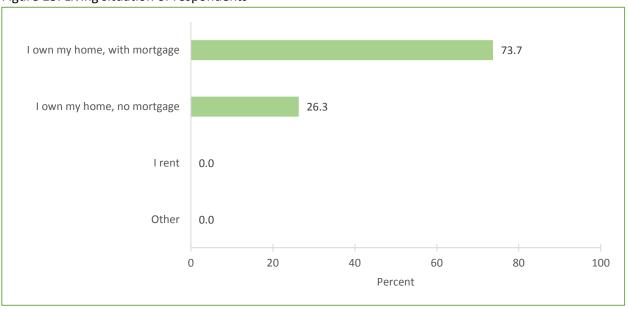


Figure 14. Highest level of education completed by respondents

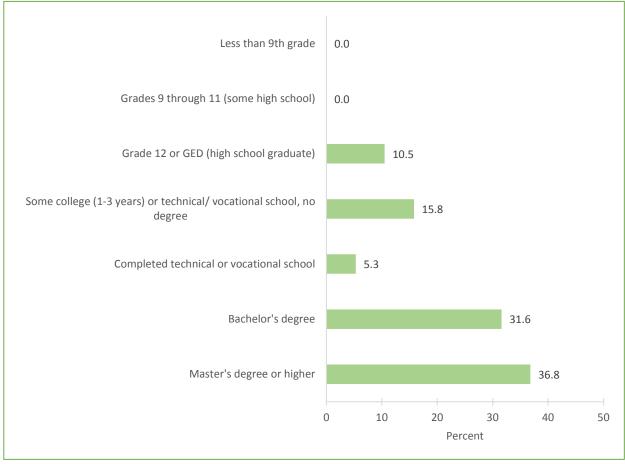


Figure 15. Employment status of respondents

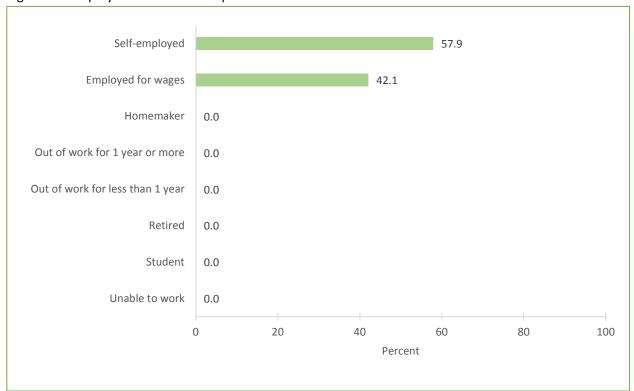
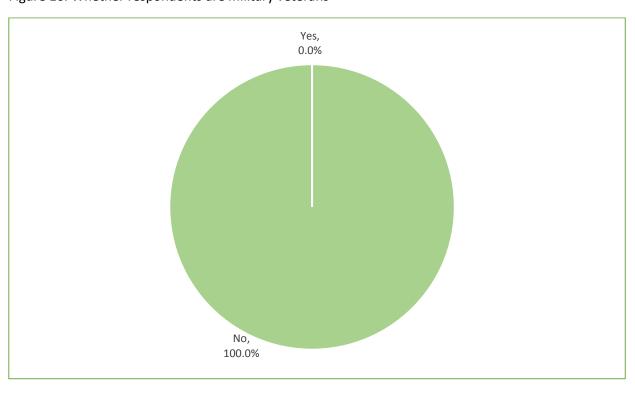


Figure 16. Whether respondents are military veterans



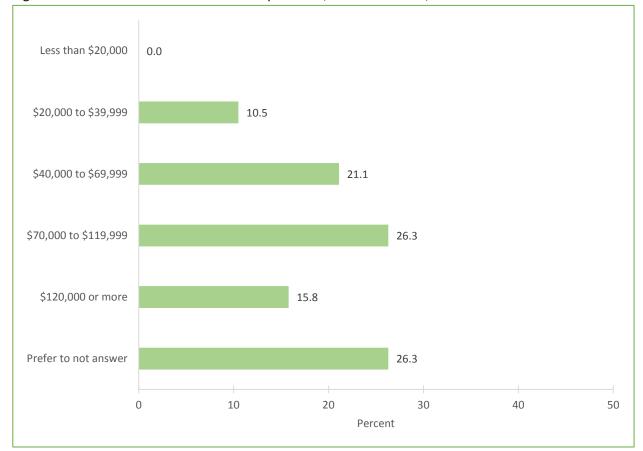


Figure 17. Annual household income of respondents, from all sources, before taxes

Table 1. Zip Code of Respondents

	Number of
Zip code	respondents
57013	17
51240	1
57106	1

Table 2. Comments from Respondents

Comments
Housing, Quality Health Care, Availability of Counselors/Psychiatrists are all issues.
I would love a bike trail! It's so dangerous for kids to ride their bikes on the streets in Canton. Too
many distracted drivers.

APPENDIX TABLE

Appendix Table 1. Current state of health and wellness issues within the community

		Percent of respondents*						
		Level of attention needed						
		1	2	3	4	5		
Statements	Mean**	None	Little	Moderate	Serious	Critical	NA	Total
ECONOMIC WELL-BEING ISSUES								
Availability of affordable housing								
(N=21)	4.24	0.0	0.0	23.8	28.6	47.6	0.0	100.0
Employment options (N=21)	3.33	4.8	4.8	57.1	19.0	14.3	0.0	100.0
Help for renters with landlord and								
tenants' rights issues (N=21)	2.65	0.0	33.3	61.9	0.0	0.0	4.8	100.0
Homelessness (N=19)	2.21	5.3	68.4	26.3	0.0	0.0	0.0	100.0
Housing which accepts people with								
chemical dependency, mental								
health problems, criminal history,								
or victims of domestic violence								
(N=22)	2.62	9.1	27.3	50.0	9.1	0.0	4.5	100.0
Household budgeting and money								
management (N=21)	3.19	0.0	14.3	57.1	23.8	4.8	0.0	100.0
Hunger (N=21)	2.95	0.0	19.0	66.7	14.3	0.0	0.0	100.0
Maintaining livable and energy								
efficient homes (N=21)	3.05	0.0	14.3	71.4	9.5	4.8	0.0	100.0
Skilled labor workforce (N=21)	3.24	0.0	14.3	57.1	19.0	9.5	0.0	99.9
TRANSPORTATION ISSUES								
Availability of door-to-door								
transportation services for those								
unable to drive (e.g., elderly,								
disabled) (N=21)	2.29	9.5	52.4	38.1	0.0	0.0	0.0	100.0
Availability of public transportation								
(N=21)	2.20	19.0	38.1	38.1	0.0	0.0	4.8	100.0
Availability of walking and biking								
options (N=22)	3.27	0.0	22.7	40.9	22.7	13.6	0.0	99.9
Cost of door-to-door transportation								
services for those unable to drive								
(e.g., elderly, disabled) (N=19)	2.63	5.3	31.6	57.9	5.3	0.0	0.0	100.1
Cost of public transportation								
(N=19)	2.71	0.0	36.8	42.1	10.5	0.0	10.5	99.9
Driving habits (e.g., speeding, road								
rage) (N=21)	3.05	0.0	33.3	38.1	19.0	9.5	0.0	99.9
CHILDREN AND YOUTH								
Availability of activities (outside of								
school and sports) for children and								
youth (N=19)	3.42	0.0	15.8	42.1	26.3	15.8	0.0	100.0
Availability of education about birth								
control (N=18)	2.88	5.6	16.7	50.0	16.7	0.0	11.1	100.1
Availability of quality child care								
(N=18)	3.41	5.6	11.1	33.3	27.8	16.7	5.6	100.1
Availability of services for at-risk								
youth (e.g., homeless youth, youth	3.41	0.0	5.6	50.0	33.3	5.6	5.6	100.1

		Percent of respondents*						T
		Level of attention needed						
Statements	Mean**	1 None	2 Little	3 Moderate	4 Serious	5 Critical	NA	Total
with behavioral health problems)								
(N=18)								
Bullying (N=17)	3.41	0.0	11.8	47.1	29.4	11.8	0.0	100.1
Childhood obesity (N=18)	3.33	0.0	27.8	16.7	50.0	5.6	0.0	100.1
Cost of activities (outside of school								
and sports) for children and youth								
(N=18)	3.44	0.0	5.6	44.4	50.0	0.0	0.0	100.0
Cost of quality child care (N=18)	3.35	0.0	11.1	44.4	33.3	5.6	5.6	100.0
Cost of services for at-risk youth								
(e.g., homeless youth, youth with								
behavioral health problems) (N=18)	3.35	0.0	16.7	38.9	27.8	11.1	5.6	100.1
Crime committed by youth (N=17)	2.76	0.0	47.1	29.4	23.5	0.0	0.0	100.0
Opportunities for youth-adult								
mentoring (N=18)	3.06	0.0	11.1	72.2	16.7	0.0	0.0	100.0
Parental custody, guardianships								
and visitation rights (N=17)	2.71	5.9	17.6	52.9	5.9	0.0	17.6	99.9
School absenteeism (truancy)								
(N=17)	2.64	5.9	23.5	47.1	5.9	0.0	17.6	100.0
School dropout rates (N=17)	2.53	5.9	29.4	52.9	0.0	0.0	11.8	100.0
School violence (N=17)	2.47	5.9	47.1	41.2	5.9	0.0	0.0	100.1
Substance abuse by youth (N=17)	3.47	0.0	5.9	41.2	52.9	0.0	0.0	100.0
Teen pregnancy (N=17)	2.82	0.0	41.2	35.3	23.5	0.0	0.0	100.0
Teen suicide (N=17)	3.24	0.0	11.8	58.8	23.5	5.9	0.0	100.0
Teen tobacco use (N=17)	3.29	0.0	5.9	58.8	35.3	0.0	0.0	100.0
THE AGING POPULATION								
Availability of activities for seniors								
(e.g., recreational, social, cultural)								
(N=19)	2.95	0.0	21.1	63.2	15.8	0.0	0.0	100.1
Availability of long term care								
(N=19)	3.00	5.3	31.6	26.3	31.6	5.3	0.0	100.1
Availability of memory care (N=18)	3.28	0.0	16.7	44.4	33.3	5.6	0.0	100.0
Availability of resources for family								
and friends caring for and helping								
to make decisions for elders (e.g.,								
home care, home health) (N=19)	3.00	0.0	31.6	36.8	31.6	0.0	0.0	100.0
Availability of resources for								
grandparents caring for								
grandchildren (N=19)	2.95	0.0	31.6	42.1	26.3	0.0	0.0	100.0
Availability of resources to help the								
elderly stay safe in their homes	_	_		_		_	_	
(N=19)	3.16	0.0	21.1	47.4	26.3	5.3	0.0	100.1
Cost of activities for seniors (e.g.,	_	_		_		_	_	
recreational, social, cultural) (N=19)	2.72	5.3	26.3	52.6	10.5	0.0	5.3	100.0
Cost of in-home services (N=19)	3.32	0.0	21.1	31.6	42.1	5.3	0.0	100.1
Cost of long term care (N=17)	3.59	0.0	17.6	29.4	29.4	23.5	0.0	99.9
Cost of memory care (N=19)	3.63	0.0	15.8	36.8	15.8	31.6	0.0	100.0
Help making out a will or								
healthcare directive (N=19)			_					
	2.72	5.3	26.3	52.6	10.5	0.0	5.3	100.0

		Percent of respondents*						
		Level of attention needed						
		1	2	3	4	5		
Statements	Mean**	None	Little	Moderate	Serious	Critical	NA	Total
SAFETY								
Abuse of prescription drugs (N=17)	3.47	0.0	5.9	47.1	41.2	5.9	0.0	100.1
Availability of emergency medical								
services (N=17)	2.41	5.9	52.9	35.3	5.9	0.0	0.0	100.0
Child abuse and neglect (N=16)	2.88	0.0	25.0	62.5	12.5	0.0	0.0	100.0
Criminal activity (N=15)	2.53	0.0	53.3	40.0	6.7	0.0	0.0	100.0
Culture of excessive and binge								
drinking (N=15)	2.80	0.0	26.7	66.7	6.7	0.0	0.0	100.1
Domestic violence (N=16)	2.88	0.0	31.3	50.0	18.8	0.0	0.0	100.1
Elder abuse (N=16)	2.63	0.0	43.8	50.0	6.3	0.0	0.0	100.1
Lack of police or delayed response								
of police (N=16)	2.00	18.8	62.5	18.8	0.0	0.0	0.0	100.1
Presence of drug dealers (N=16)	3.06	0.0	25.0	43.8	31.3	0.0	0.0	100.1
Presence of gang activity (N=16)	2.31	12.5	62.5	18.8	0.0	0.0	6.3	100.1
Presence of street drugs (N=16)	2.75	0.0	43.8	37.5	18.8	0.0	0.0	100.1
Sex trafficking (N=16)	2.31	12.5	56.3	18.8	12.5	0.0	0.0	100.1
HEALTH CARE AND WELLNESS								
Access to affordable dental								
insurance coverage (N= 17)	3.18	0.0	29.4	35.3	23.5	11.8	0.0	100.0
Access to affordable health								
insurance coverage (N=17)	3.82	0.0	11.8	23.5	35.3	29.4	0.0	100.0
Access to affordable health care								
(N=18)	3.72	0.0	16.7	22.2	33.3	27.8	0.0	100.0
Access to affordable prescription								
drugs (N=18)	3.44	0.0	16.7	38.9	27.8	16.7	0.0	100.1
Access to affordable vision								
insurance coverage (N=17)	3.29	5.9	5.9	52.9	23.5	11.8	0.0	100.0
Access to technology for health								
records and health education								
(N=17)	2.82	0.0	52.9	29.4	5.9	5.9	5.9	100.0
Availability of behavioral health								
(substance abuse) providers (N=17)	3.18	0.0	29.4	35.3	23.5	11.8	0.0	100.0
Availability of doctors, physician								
assistants, or nurse practitioners								
(N=18)	2.61	0.0	50.0	44.4	0.0	5.6	0.0	100.0
Availability of health care services								
for Native people (N=17)	3.47	0.0	35.3	35.3	0.0	5.9	23.5	100.0
Availability of health care services								
for New Americans (N=17)	3.41	5.9	29.4	35.3	0.0	5.9	23.5	100.0
Availability of mental health								
providers (N=18)	3.22	0.0	27.8	38.9	16.7	16.7	0.0	100.1
Availability of non-traditional hours								
(e.g., evenings, weekends) (N=16)	3.19	0.0	18.8	50.0	25.0	6.3	0.0	100.1
Availability of prevention programs								
and services (e.g., Better Balance,								
Diabetes Prevention) (N=17)	3.12	0.0	17.6	52.9	29.4	0.0	0.0	99.9
Availability of specialist physicians								
(N=17)	3.00	0.0	29.4	41.2	29.4	0.0	0.0	100.0

		Percent of respondents*						
		Level of attention needed						
		1	2	3	4	5		
Statements	Mean**	None	Little	Moderate	Serious	Critical	NA	Total
Coordination of care between								
providers and services (N=17)	2.82	5.9	17.6	64.7	11.8	0.0	0.0	100.0
Timely access to medical care								
providers (N=17)	2.35	17.6	29.4	52.9	0.0	0.0	0.0	99.9
Timely access to dental care								
providers (N=17)	2.06	29.4	35.3	35.3	0.0	0.0	0.0	100.0
Timely access to vision care								
providers (N=17)	2.12	29.4	29.4	41.2	0.0	0.0	0.0	100.0
Use of emergency room services for								
primary healthcare (N=17)	2.82	11.8	23.5	47.1	5.9	11.8	0.0	100.1
MENTAL HEALTH AND SUBSTANCE								
ABUSE								
Alcohol use and abuse (N=18)	3.33	0.0	11.1	44.4	44.4	0.0	0.0	99.9
Dementia and Alzheimer's disease								
(N=17)	3.12	0.0	11.8	64.7	23.5	0.0	0.0	100.0
Depression (N=18)	3.22	0.0	16.7	50.0	27.8	5.6	0.0	100.1
Drug use and abuse (e.g.,								
prescription drugs, synthetic								
opioids, marijuana, heroin, cocaine)								
(N=17)	3.41	0.0	5.9	47.1	47.1	0.0	0.0	100.1
Exposure to secondhand smoke								
(N=17)	3.06	0.0	29.4	35.3	35.3	0.0	0.0	100.0
Smoking and tobacco use (N=17)	3.24	0.0	23.5	29.4	47.1	0.0	0.0	100.0
Stress (N=17)	3.18	0.0	17.6	47.1	35.3	0.0	0.0	100.0
Suicide (N=17)	3.41	0.0	5.9	52.9	35.3	5.9	0.0	100.0

^{*}Percentages may not total 100.0 due to rounding.

^{**}NA (not applicable) responses were excluded when calculating the Means. As a result, the number of responses (N) in Appendix Table 1, which reflect total responses, may differ from the Ns in Figures 1 through 7, which exclude NA.

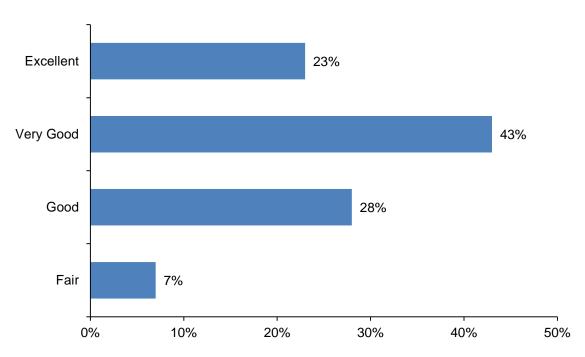
Residents' Survey

Canton-Inwood CHNA Survey Report

March 08, 2018

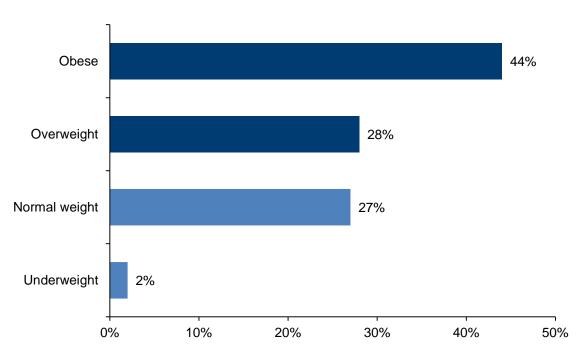
Charts Exported by MarketSight®

How would you rate your health?



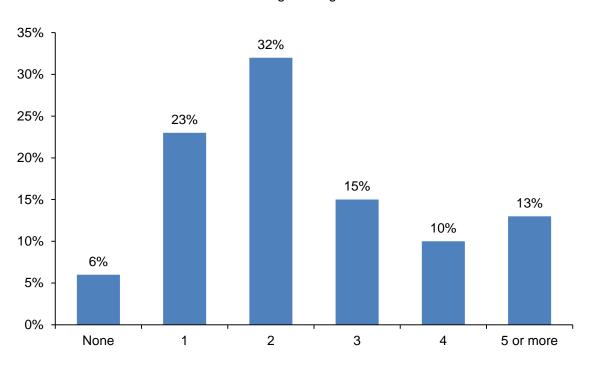
Base: Fair (n=7), Good (n=29), Very Good (n=45), Excellent (n=24), Sample Size = 105

ВМІ



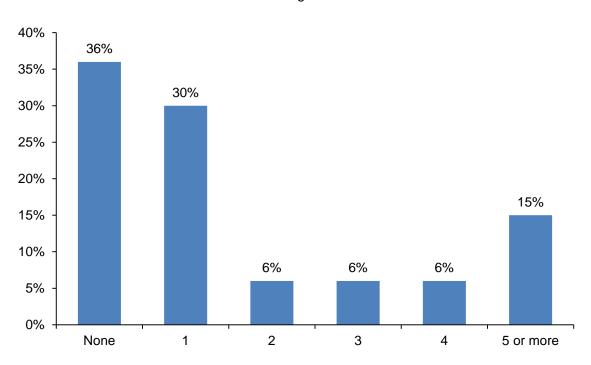
Base: Underweight (n=2), Normal weight (n=25), Overweight (n=26), Obese (n=41), Sample Size = 94

Servings of Vegetables



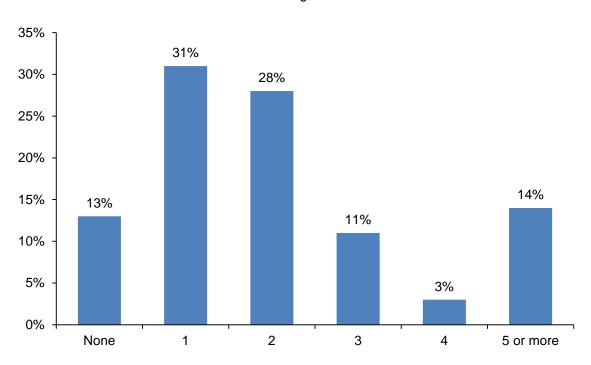
Base: None (n=6), 1 (n=23), 2 (n=31), 3 (n=15), 4 (n=10), 5 or more (n=13), Sample Size = 98

Servings of Juice



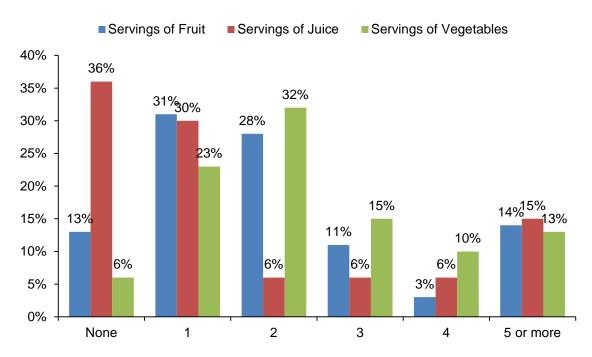
Base: None (n=29), 1 (n=24), 2 (n=5), 3 (n=5), 4 (n=5), 5 or more (n=12), Sample Size = 80

Servings of Fruit



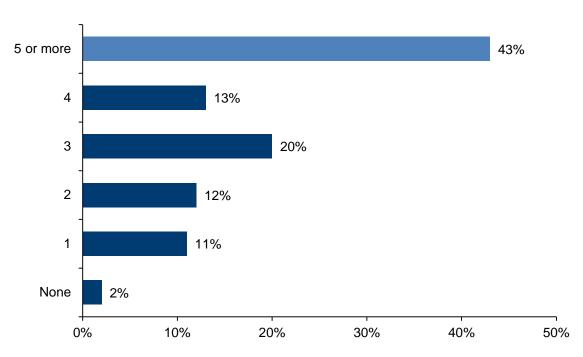
Base: None (n=11), 1 (n=27), 2 (n=24), 3 (n=10), 4 (n=3), 5 or more (n=12), Sample Size = 87

Servings of Fruit, Vegetables and Juice



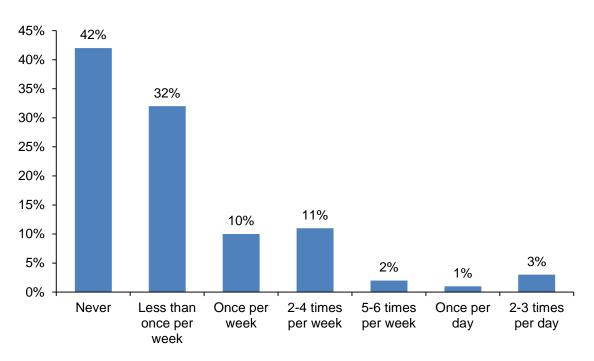
Sample Size = Variable

Total Servings of Fruits, Vegetables and Juice



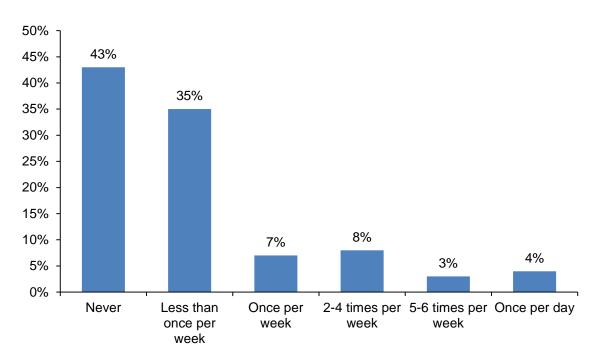
Base: None (n=2), 1 (n=11), 2 (n=12), 3 (n=21), 4 (n=13), 5 or more (n=44), Sample Size = 103

Snapple, Flavored Teas, Capri Sun, etc.



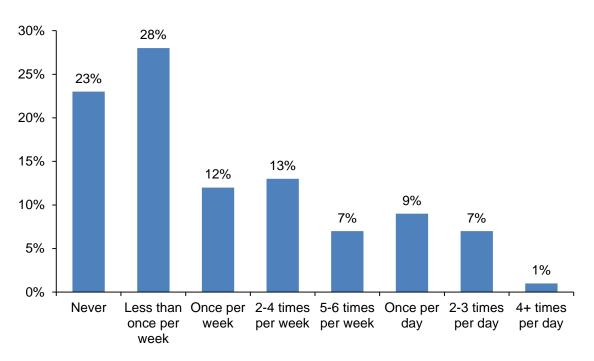
Base: Never (n=42), Less than once per week (n=32), Once per week (n=10), 2-4 times per week (n=11), 5-6 times per week (n=2), Once per day (n=1), 2-3 times per day (n=3), Sample Size = 101

Gatorade, Powerade, etc.



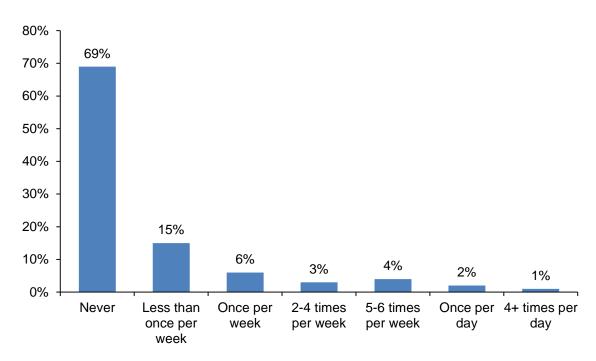
Base: Never (n=44), Less than once per week (n=36), Once per week (n=7), 2-4 times per week (n=8), 5-6 times per week (n=3), Once per day (n=4), Sample Size = 102

Soda or Pop



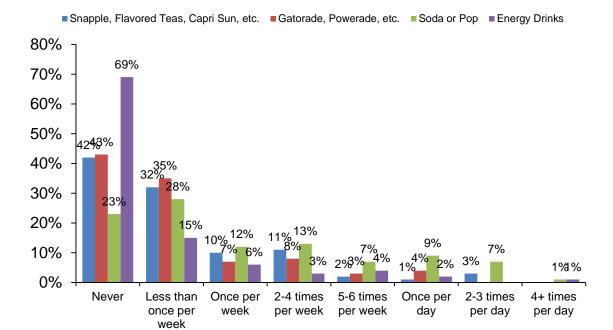
Base: Never (n=24), Less than once per week (n=29), Once per week (n=13), 2-4 times per week (n=14), 5-6 times per week (n=7), Once per day (n=9), 2-3 times per day (n=7), 4+ times per day (n=1), Sample Size = 104

Energy Drinks



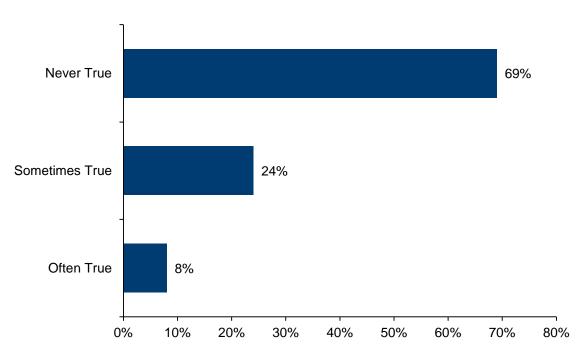
Base: Never (n=70), Less than once per week (n=15), Once per week (n=6), 2-4 times per week (n=3), 5-6 times per week (n=4), Once per day (n=2), 4+ times per day (n=1), Sample Size = 101

Sugar Sweetened Drinks



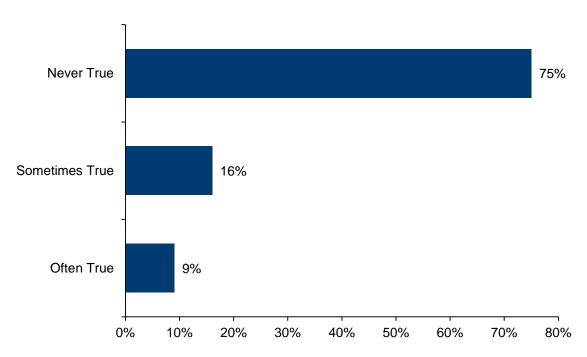
Sample Size = Variable

Worried whether our food would run out before we got money to buy more.



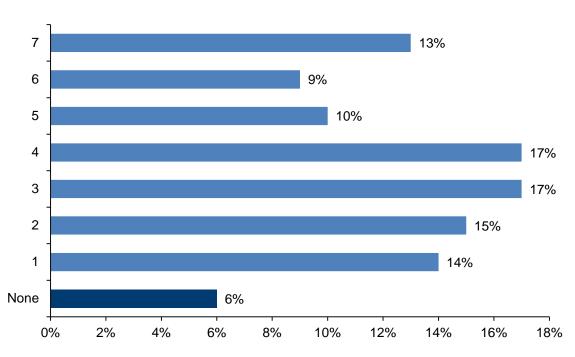
Base: Often True (n=8), Sometimes True (n=25), Never True (n=72), Sample Size = 105

The food that we bought just didn't last, and we didn't have money to get more.



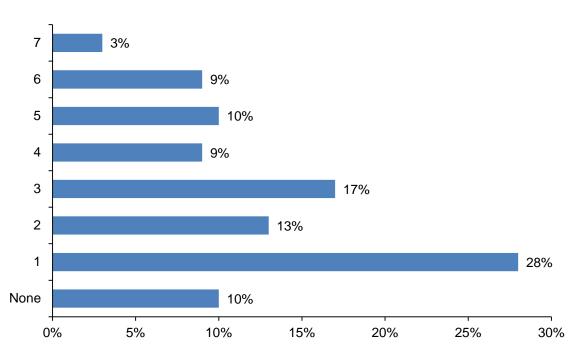
Base: Often True (n=9), Sometimes True (n=17), Never True (n=79), Sample Size = 105

Days Per Week of Moderate Physical Activity



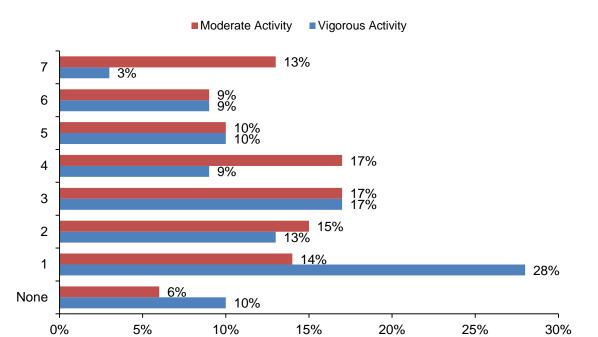
 $Base: None \ (n=6), \ 1 \ (n=14), \ 2 \ (n=15), \ 3 \ (n=17), \ 4 \ (n=17), \ 5 \ (n=10), \ 6 \ (n=9), \ 7 \ (n=13), \ Sample \ Size = 101$

Days Per Week of Vigorous Physical Activity



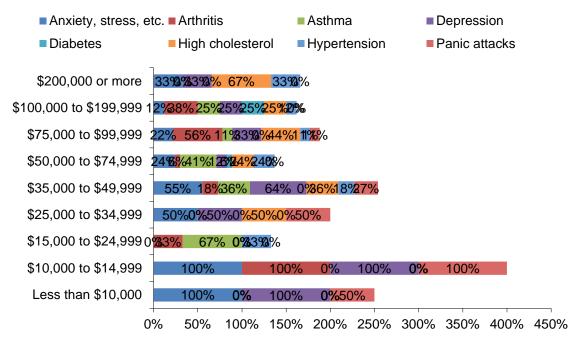
Base: None (n=9), 1 (n=24), 2 (n=11), 3 (n=15), 4 (n=8), 5 (n=9), 6 (n=8), 7 (n=3), Sample Size = 87

Days Per Week of Physical Activity



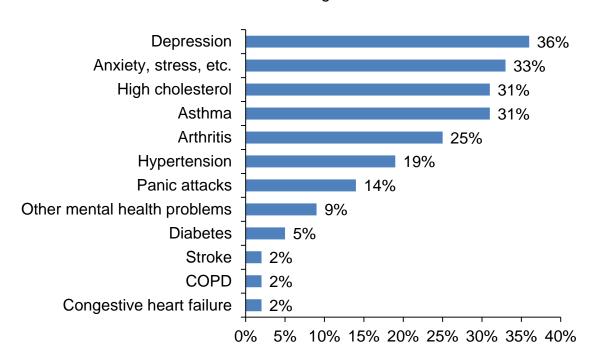
Sample Size = Variable

Past Diagnosis by Total Household Income



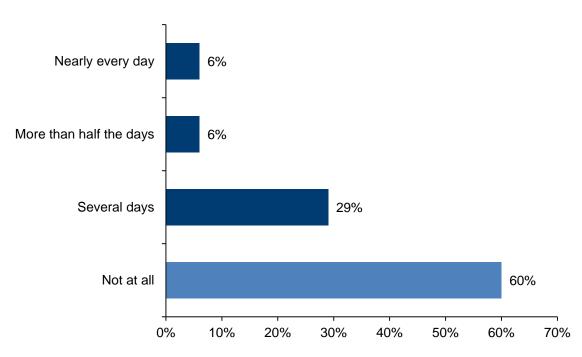
Base: Less than \$10,000 (n=2), \$10,000 to \$14,999 (n=1), \$15,000 to \$24,999 (n=3), \$25,000 to \$34,999 (n=2), \$35,000 to \$49,999 (n=11), \$50,000 to \$74,999 (n=17), \$75,000 to \$99,999 (n=9), \$100,000 to \$199,999 (n=8), \$200,000 or more (n=3), Sample Size = 56 (Community 2 = Lincoln / Lyon)

Past Diagnosis



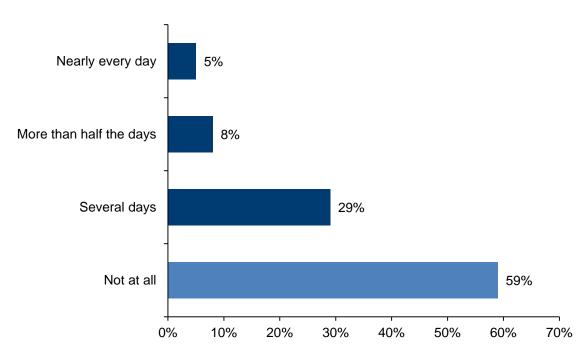
Base: Anxiety, stress, etc. (n=21), Arthritis (n=16), Asthma (n=20), Congestive heart failure (n=1), COPD (n=1), Depression (n=23), Diabetes (n=3), High cholesterol (n=20), Hypertension (n=12), Other mental health problems (n=6), Panic attacks (n=9), Stroke (O=ft)nfairple Sizineoft/Lyon)

Little Interest or Pleasure in Doing Things



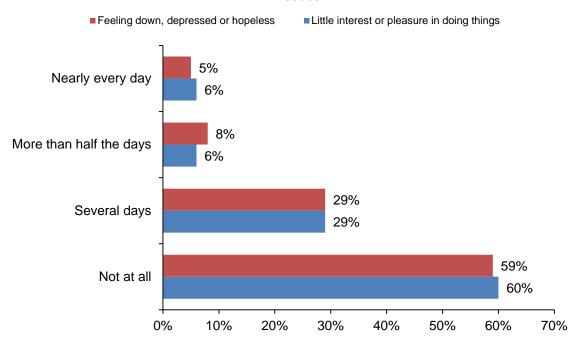
 $Base: Not at all \ (n=63), Several \ days \ (n=30), More \ than \ half \ the \ days \ (n=6), Nearly \ every \ day \ (n=6), Sample \ Size = 105$

Feeling Down, Depressed or Hopeless



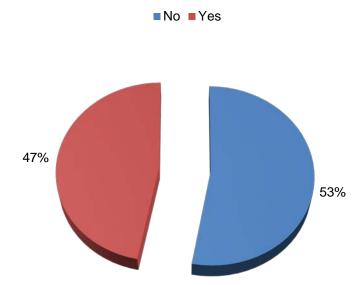
 $Base: Not at all \ (n=62), Several \ days \ (n=30), More \ than \ half \ the \ days \ (n=8), Nearly \ every \ day \ (n=5), Sample \ Size = 105$

Over the past two weeks, how often have you been bothered by either of the following issues?



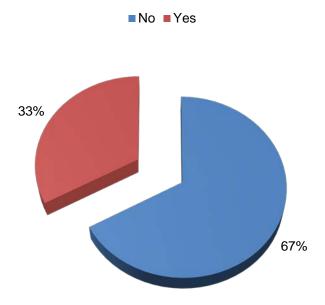
Sample Size = 105

Have you smoked at least 100 cigarettes in your entire life?



Base: Yes (n=49), No (n=56), Sample Size = 105

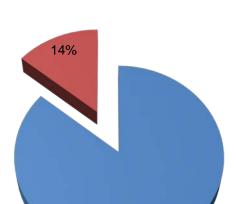
Has someone smoked cigarettes, cigars or used vape pens anywhere inside your home?



Base: Yes (n=35), No (n=70), Sample Size = 105

Have you smelled tobacco smoke in your apartment that comes from another apartment?

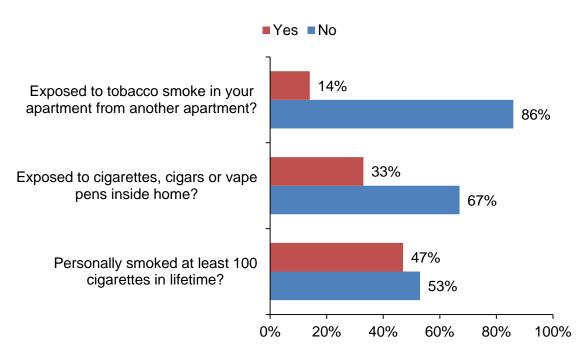
■No ■Yes



86%

Base: Yes (n=15), No (n=89), Sample Size = 104

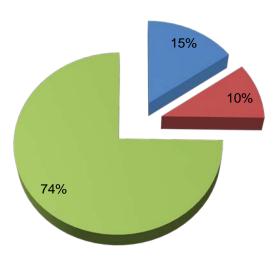
Exposure to Tobacco Smoke



Base: Personally smoked at least 100 cigarettes in lifetime? (n=105), Exposed to cigarettes, cigars or vape pens inside home? (n=105), Exposed to tobacco smoke in your apartment from another apartment? (n=104), Sample Size = Variable (Community 2 = Lincoln / Lyon)

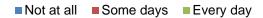
Do you currently smoke cigarettes?

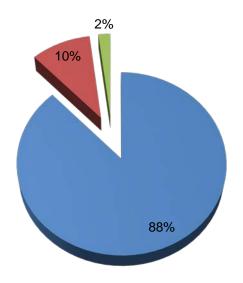




Base: Not at all (n=78), Some days (n=11), Every day (n=16), Sample Size = 105

Do you currently use chewing tobacco?

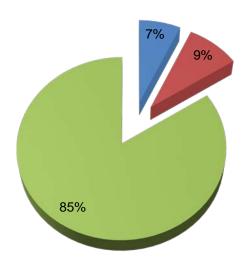




Base: Not at all (n=92), Some days (n=10), Every day (n=2), Sample Size = 104

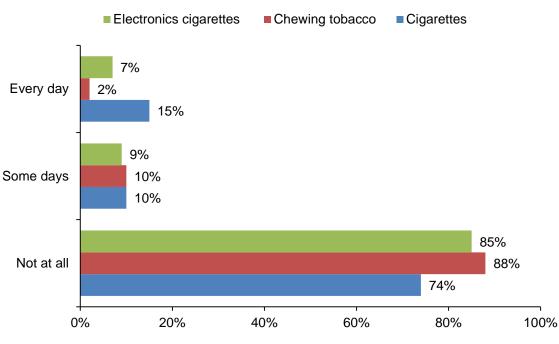
Do you currently use electronics cigarettes or vape?





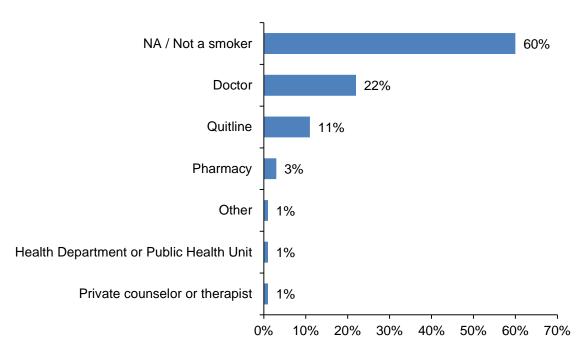
Base: Not at all (n=88), Some days (n=9), Every day (n=7), Sample Size = 104

Current Tobacco Use



Sample Size = Variable

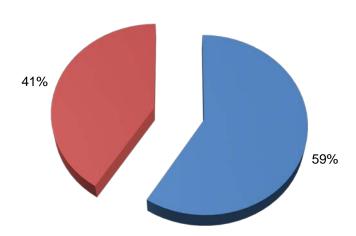
Where would you go for help if you wanted to quit using tobacco products?



Base: NA / Not a smoker (n=54), Quitline (n=10), Doctor (n=20), Pharmacy (n=3), Private counselor or therapist (n=1), Health Department or Public Health Unit (n=1), Other (n=1), Sample Size = 90

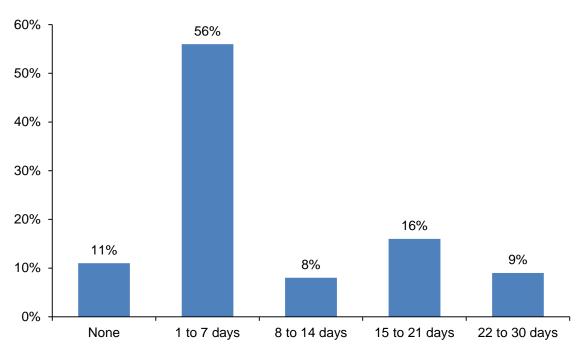
During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit? (Smokers only)





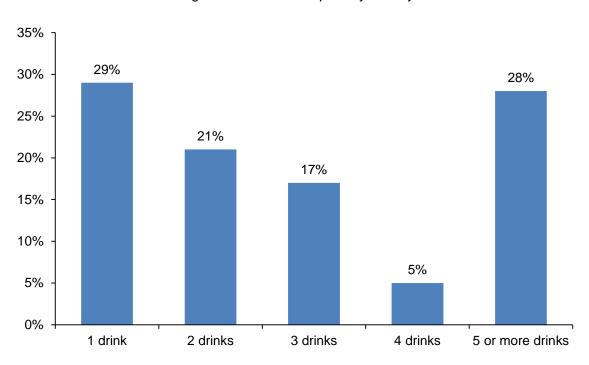
Base: Yes (n=19), No (n=13), Sample Size = 32

Number of days with at least 1 drink in the past 30 days



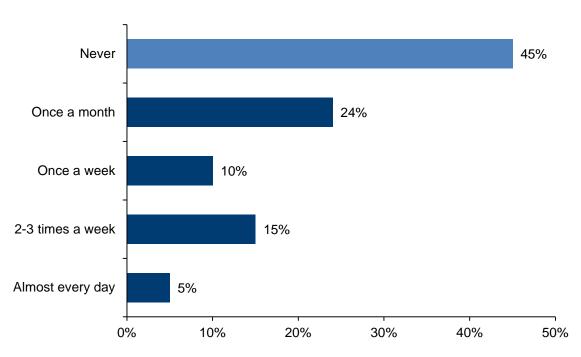
Base: None (n=10), 1 to 7 days (n=49), 8 to 14 days (n=7), 15 to 21 days (n=14), 22 to 30 days (n=8), Sample Size = 88

Average number of drinks per day when you drink



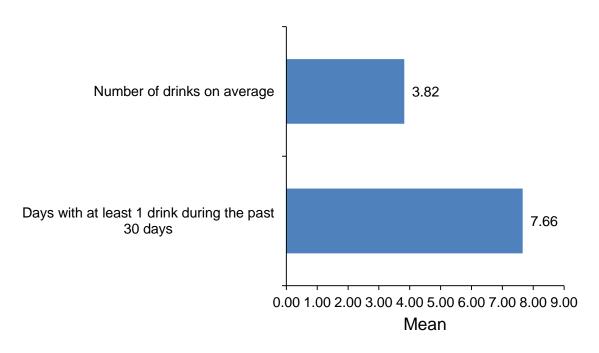
 $Base: 1 \ drink \ (n=22), 2 \ drinks \ (n=16), 3 \ drinks \ (n=13), 4 \ drinks \ (n=4), 5 \ or \ more \ drinks \ (n=21), Sample \ Size = 76$

Binge Drinking



Base: Almost every day (n=4), 2-3 times a week (n=12), Once a week (n=8), Once a month (n=19), Never (n=35), Sample Size = 78

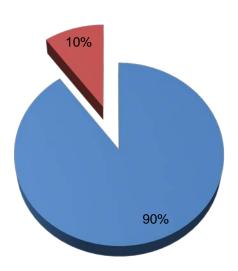
Average Alcohol Use During the Past 30 Days



Base: Days with at least 1 drink during the past 30 days (n=88), Number of drinks on average (n=77), Sample Size = Variable (Community 2 = Lincoln / Lyon)

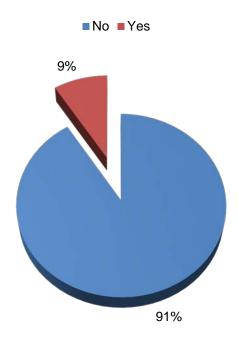
Has alcohol use had a harmful effect on you or a family member in the past two years?





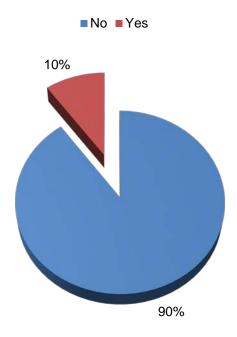
Base: Yes (n=11), No (n=94), Sample Size = 105

Have you ever wanted help with a prescription or non-prescription drug use?



Base: Yes (n=9), No (n=96), Sample Size = 105

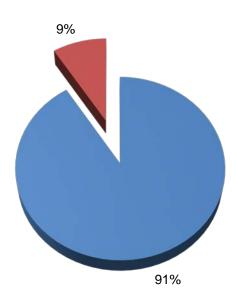
Has a family member or friend ever suggested that you get help for substance use?



Base: Yes (n=10), No (n=95), Sample Size = 105

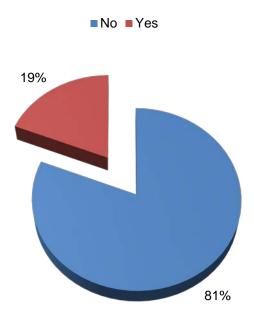
Has prescription or non-prescription drug use had a harmful effect on you or a family member in the past two years?





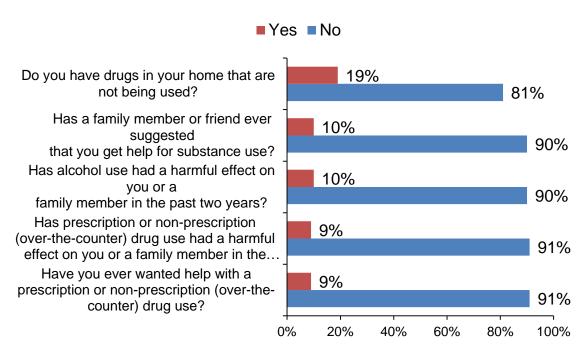
Base: Yes (n=9), No (n=96), Sample Size = 105

Do you have drugs in your home that are not being used?



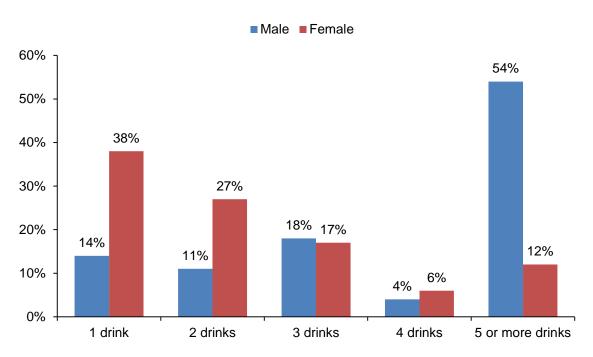
Base: Yes (n=20), No (n=85), Sample Size = 105

Drug and Alcohol Issues



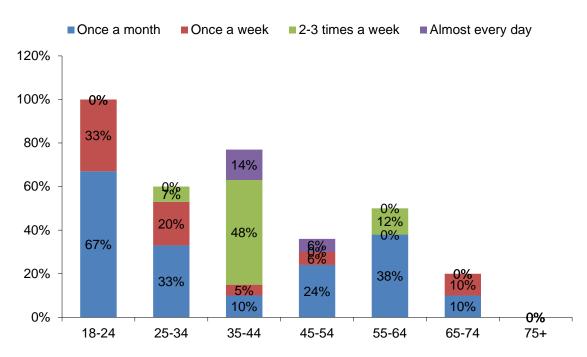
Sample Size = 105

Average number of drinks per day when you drink by gender



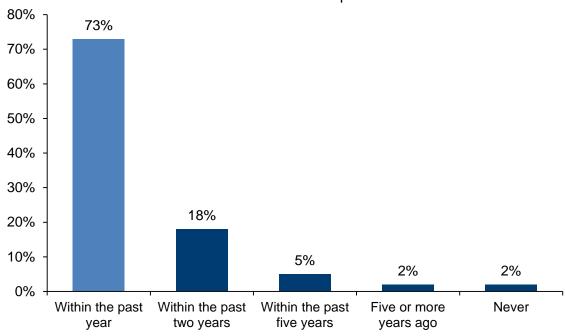
 $Base: 1 \ drink \ (n=22), 2 \ drinks \ (n=16), 3 \ drinks \ (n=13), 4 \ drinks \ (n=4), 5 \ or \ more \ drinks \ (n=21), Sample \ Size = 76$

Binge Drinking past 30 days by Age



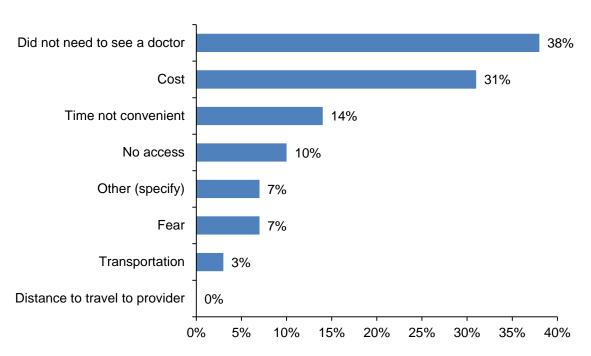
Base: 18-24 (n=6), 25-34 (n=15), 35-44 (n=21), 45-54 (n=17), 55-64 (n=8), 65-74 (n=10), 75+ (n=1), Sample Size = 78

How long has it been since you last visited a doctor or health care provider for a routine checkup?



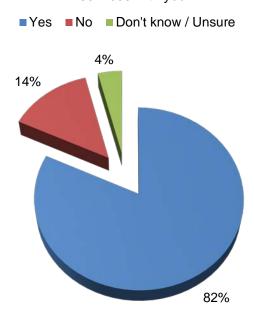
Base: Within the past year (n=76), Within the past two years (n=19), Within the past five years (n=5), Five or more years ago (n=2), Never (n=2), Sample Size = 104

Barriers to Routine Checkup



Base: No access (n=3), Distance to travel to provider (n=0), Cost (n=9), Fear (n=2), Transportation (n=1), Time not convenient (n=4), Did not need to see a doctor (n=11), Other (specify) (n=2), Sample Size = 29

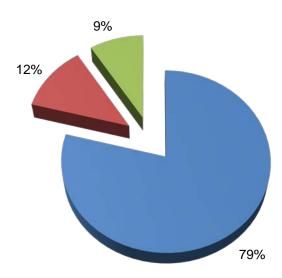
Has your medical provider reviewed the risks and benefits of screenings and preventive services with you?



Base: Yes (n=86), No (n=15), Don't know / Unsure (n=4), Sample Size = 105

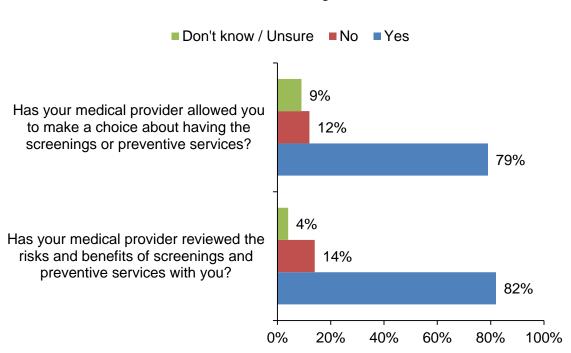
Has your medical provider allowed you to make a choice about having screenings or preventive services?





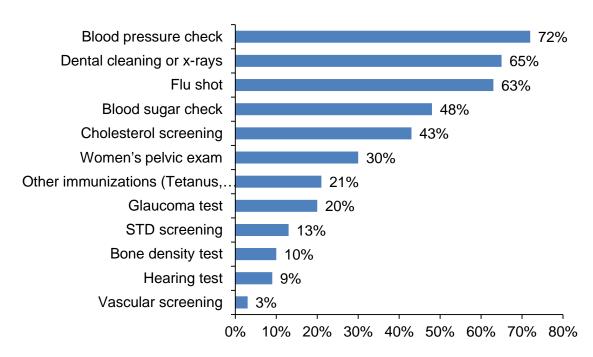
Base: Yes (n=82), No (n=13), Don't know / Unsure (n=9), Sample Size = 104

Screenings



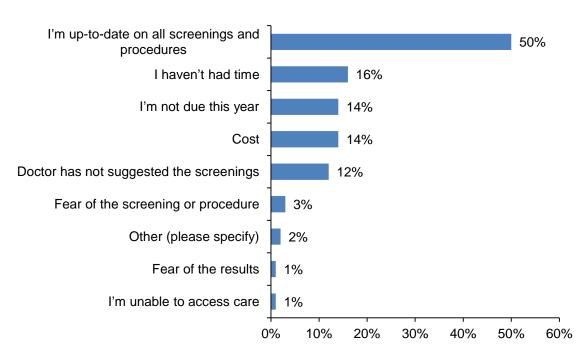
Base: Has your medical provider allowed you to make a choice about having the screenings or preventive services? (n=104), Has your medical provider reviewed the risks and benefits of screenings and preventive services with you? (n=105), Sample Size = Variable (Community 2 = Lincoln / Lyon)

Preventive Procedures Last Year



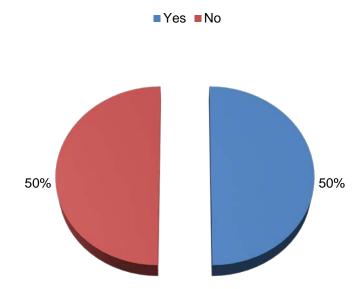
Base: Blood pressure check (n=74), Blood sugar check (n=49), Bone density test (n=10), Cholesterol screening (n=44), Dental cleaning or x-rays (n=67), Flu shot (n=65), Other immunizations (Tetanus, Hepatitis A or B) (n=22), Glaucoma test (n=21), Hearing test (n=9), Women's pelvic exam (n=31), STD screening (n=13), Vascular screening (n=3), Sample Size = 103 (Community 2 = Lincoln / Lyon)

Barriers for Preventive Procedures



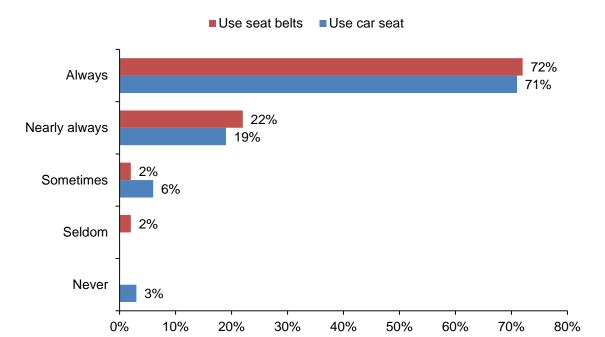
Base: I'm up-to-date on all screenings and procedures (n=53), Doctor has not suggested the screenings (n=13), Cost (n=15), I'm unable to access care (n=1), Fear of the screening or procedure (n=3), Fear of the results (n=1), I'm not due this year (n=15), I haven't had time (n=17), Other (please specify) (n=2), Sample Size = 105. (Size = 105) (Lyon)

Do you have children under the age of 18 living in your household?



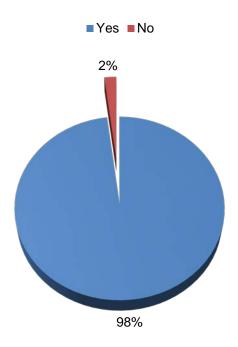
Base: Yes (n=52), No (n=53), Sample Size = 105

Children's Car Safety



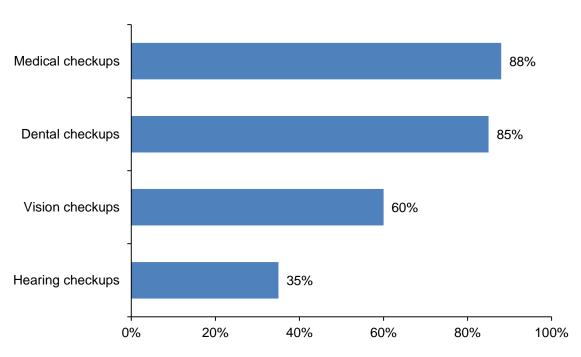
Sample Size = Variable

Do you have healthcare coverage for your children or dependents?



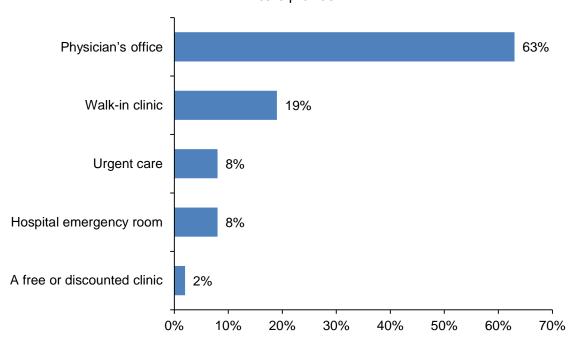
Base: Yes (n=51), No (n=1), Sample Size = 52

Children's Preventative Services



Base: Dental checkups (n=44), Vision checkups (n=31), Hearing checkups (n=18), Medical checkups (n=46), Sample Size = 52

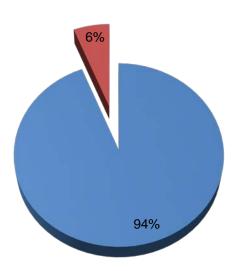
Where do you most often take your children when they are sick and need to see a health care provider?



Base: Physician's office (n=33), Hospital emergency room (n=4), Urgent care (n=4), Walk-in clinic (n=10), A free or discounted clinic (n=1), Sample Size = 52

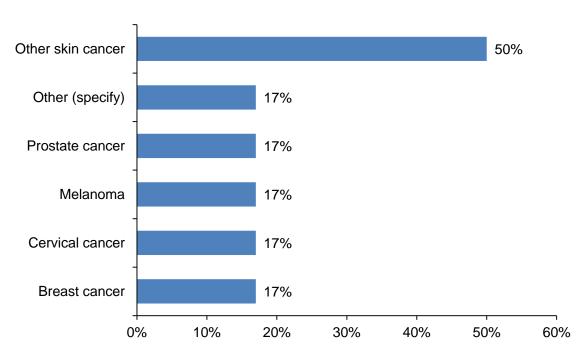
Have you ever been diagnosed with cancer?





Base: Yes (n=6), No (n=99), Sample Size = 105

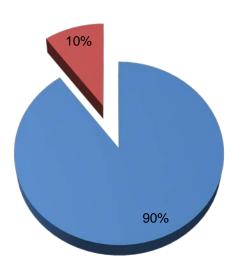
Type of Cancer



Base: Breast cancer (n=1), Cervical cancer (n=1), Melanoma (n=1), Other skin cancer (n=3), Prostate cancer (n=1), Other (specify) (n=1), Sample Size = 6

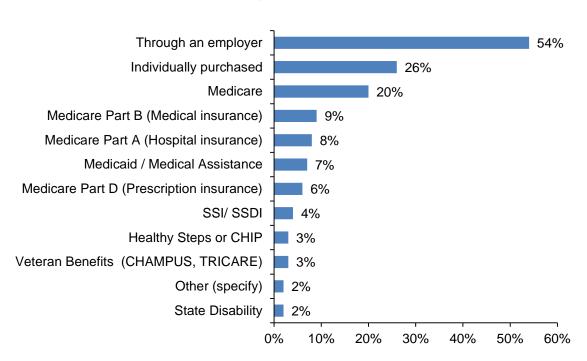
Do you currently have any kind of health insurance?





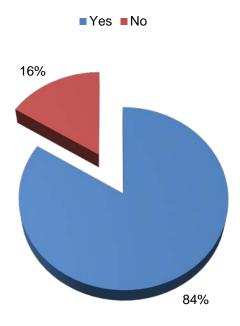
Base: Yes (n=95), No (n=10), Sample Size = 105

Type of Insurance



Base: Through an employer (n=51), Individually purchased (n=25), Medicare (n=19), Medicare Part A (Hospital insurance) (n=8), Medicare Part B (Medical insurance) (n=9), Medicare Part D (Prescription insurance) (n=6), State Disability (n=2), SSI/ SSDI (n=4), Medicaid / Medical Assistance (n=7), Veteran Benefits (CHAMPUS, TRICARE) (n=3), Healthy Steps or CHIP (n=3), Other (specify) (n=2), Sample Size = 95 (Community 2 = Lincoln / Lyon)

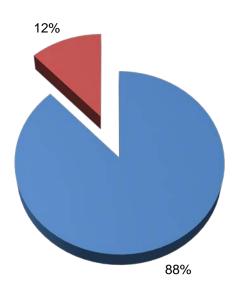
Do you have an established primary healthcare provider?



Base: Yes (n=88), No (n=17), Sample Size = 105

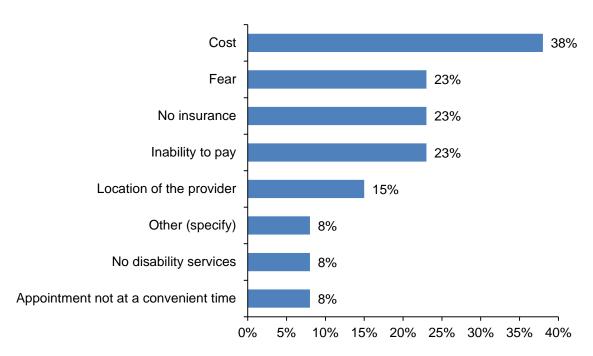
In the past year, did you or someone in your family need medical care, but did not receive the care they needed?





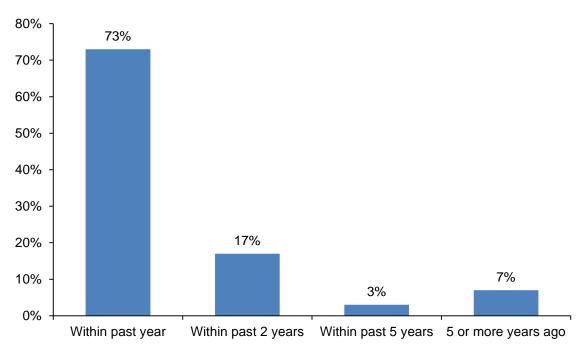
Base: Yes (n=13), No (n=91), Sample Size = 104

Barriers to Receiving Care Needed



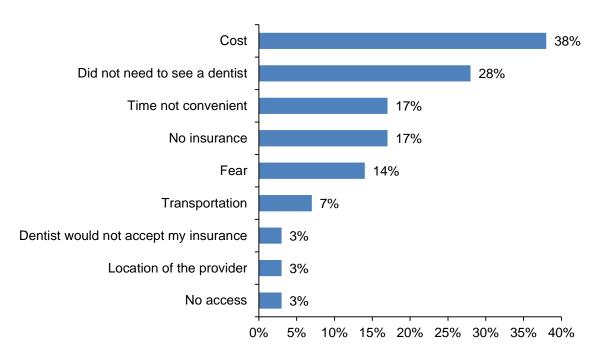
Base: Inability to pay (n=3), Appointment not at a convenient time (n=1), No disability services (n=1), No insurance (n=3), Location of the provider (n=2), Cost (n=5), Fear (n=3), Other (specify) (n=1)

How long has it been since you last visited a dentist?



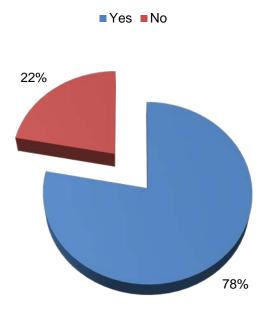
Base: Within past year (n=75), Within past 2 years (n=18), Within past 5 years (n=3), 5 or more years ago (n=7), Sample Size = 103
(Community 2 = Lincoln / Lyon)

Barriers to Visiting the Dentist



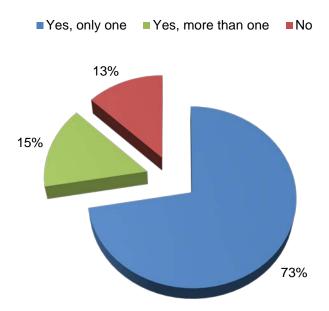
Base: No access (n=1), No insurance (n=5), Location of the provider (n=1), Cost (n=11), Fear (n=4), Transportation (n=2), Time not convenient (n=5), Dentist would not accept my insurance (n=1), Did not need to see a dentist (n=8), Sample Size = 29

Do you have any kind of dental care or oral health insurance coverage?



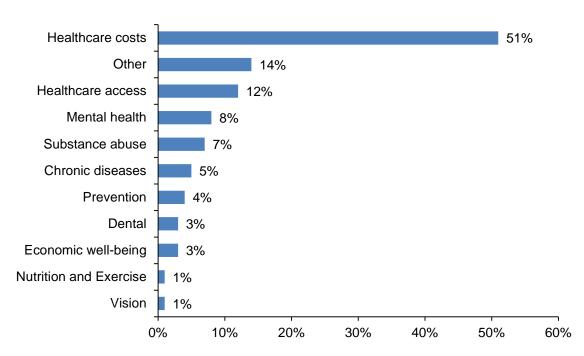
Base: Yes (n=81), No (n=23), Sample Size = 104

Do you have a dentist that you see for routine care?



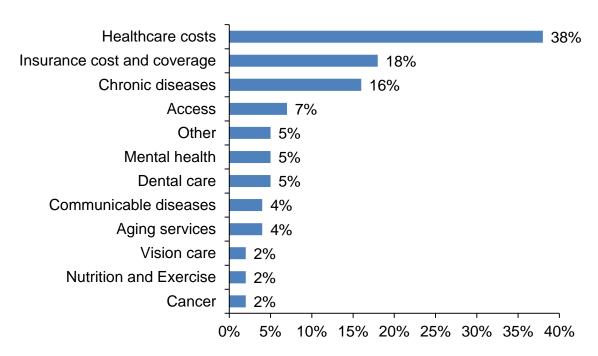
Base: Yes, only one (n=75), Yes, more than one (n=15), No (n=13), Sample Size = 103

Most Important Community Issues



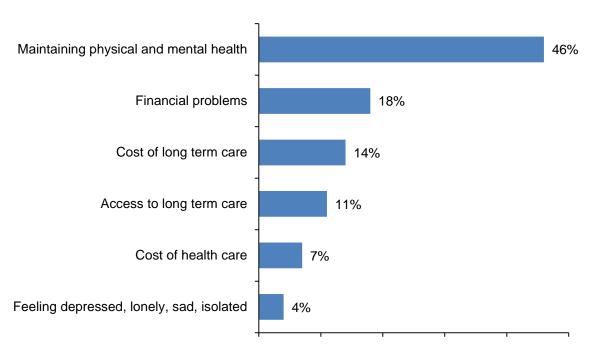
Base: Economic well-being (n=2), Healthcare access (n=9), Mental health (n=6), Substance abuse (n=5), Chronic diseases (n=4), Healthcare costs (n=37), Dental (n=2), Prevention (n=3), Vision (n=1), Nutrition and Exercise (n=1), Other (n=10), Sample Size = 96 (Community 2 = Lincoln / Lyon)

Most Important Issue for Family



Base: Access (n=4), Aging services (n=2), Cancer (n=1), Chronic diseases (n=9), Communicable diseases (n=2), Healthcare costs (n=21), Dental care (n=3), Nutrition and Exercise (n=1), Insurance cost and coverage (n=10), Mental health (n=3), Vision care (n=1), Other (n=3), Resemble Nite 2:96 incoln / Lyon)

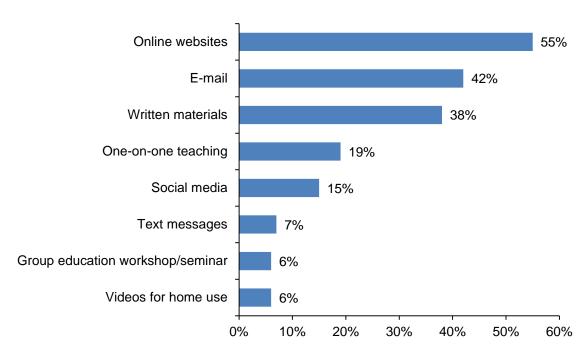
What is your biggest concern as you age? (Age 65+)



Base: Cost of health care (n=2), Maintaining physical and mental health (n=13), Feeling depressed, lonely, sad, isolated (n=1), Access to long term care (n=3), Cost of long term care (n=4), Financial problems (n=5), Sample Size = 17

(Community 2 = Lincoln / Lyon)

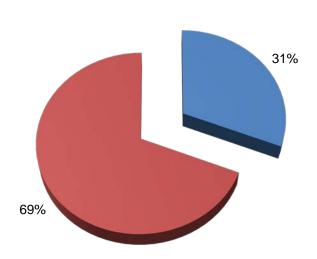
What method(s) would you prefer to get health information?



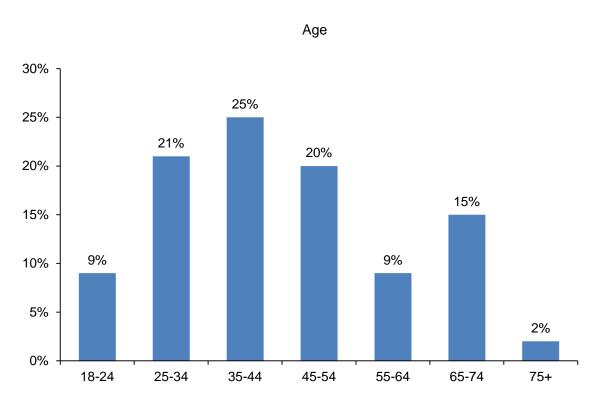
Base: Written materials (n=39), Videos for home use (n=6), Social media (n=15), Text messages (n=7), One-on-one teaching (n=20), E-mail (n=43), Group education workshop/seminar (n=6), Online websites (n=57), Sample Size = 103





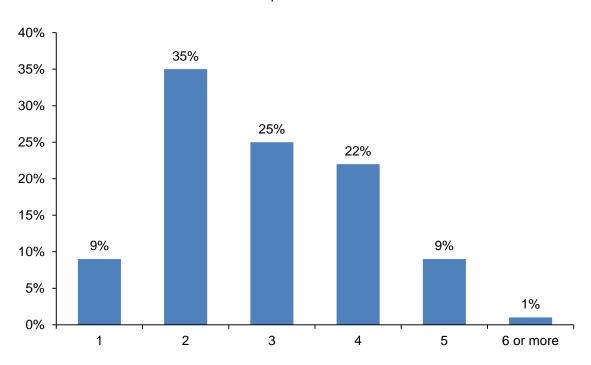


Base: Male (n=33), Female (n=72), Sample Size = 105



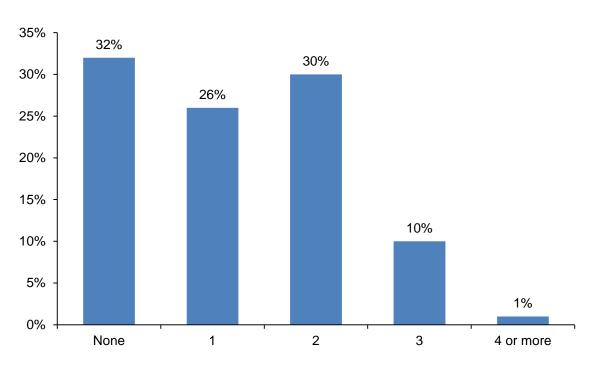
 $Base: 18-24 \ (n=9), \ 25-34 \ (n=22), \ 35-44 \ (n=26), \ 45-54 \ (n=21), \ 55-64 \ (n=9), \ 65-74 \ (n=16), \ 75+ \ (n=2), \ Sample \ Size=105$

People in Household



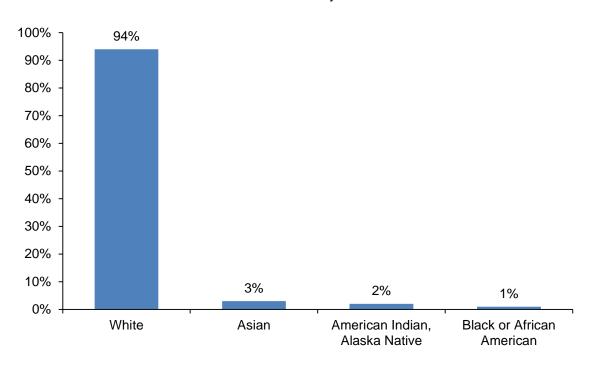
Base: 1 (n=9), 2 (n=37), 3 (n=26), 4 (n=23), 5 (n=9), 6 or more (n=1), Sample Size = 105

Children in Household Under 18



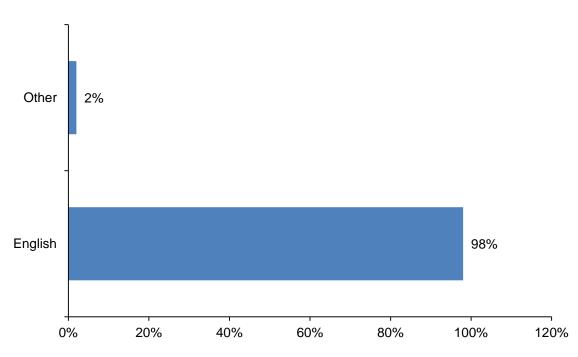
Base: None (n=26), 1 (n=21), 2 (n=24), 3 (n=8), 4 or more (n=1), Sample Size = 80

Ethnicity



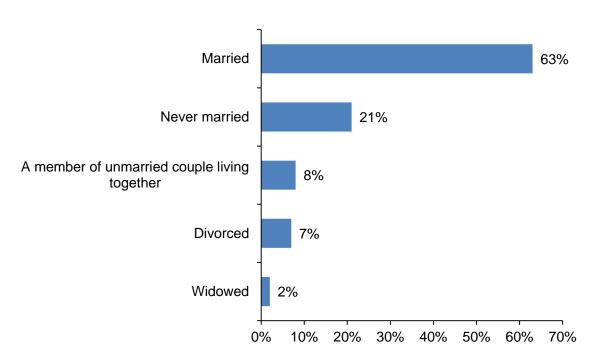
Base: White (n=99), Black or African American (n=1), Asian (n=3), American Indian, Alaska Native (n=2), Sample Size = 105

Language Spoken in Home



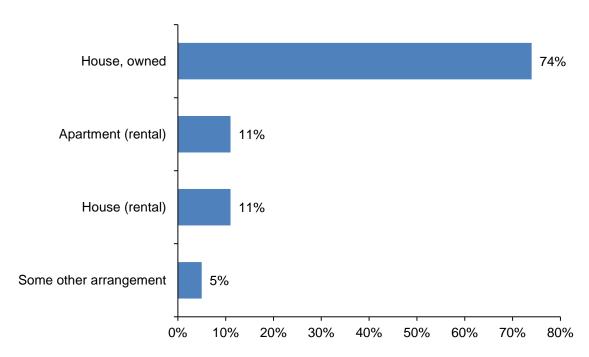
Base: English (n=103), Other (n=2), Sample Size = 105

Marital Status



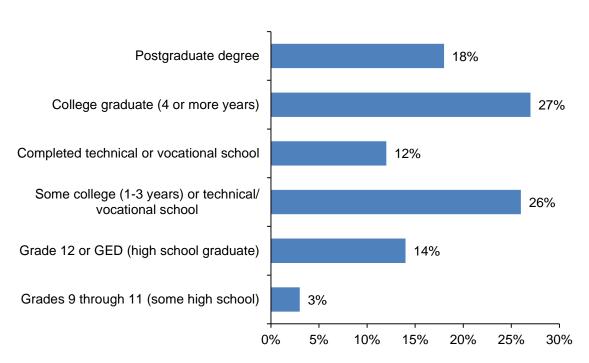
Base: Never married (n=22), Married (n=66), Divorced (n=7), Widowed (n=2), A member of unmarried couple living together (n=8), Sample Size = 105

Current Living Situation



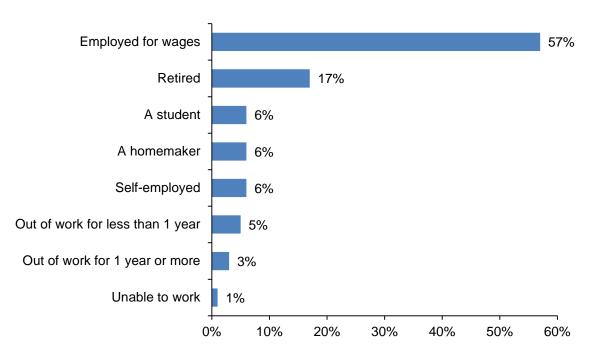
Base: House, owned (n=77), House (rental) (n=11), Apartment (rental) (n=11), Some other arrangement (n=5), Sample Size = 104

Education Level



Base: Grades 9 through 11 (some high school) (n=3), Grade 12 or GED (high school graduate) (n=15), Some college (1-3 years) or technical/vocational school (n=27), Completed technical or vocational school (n=12), College graduate (4 or more years) (n=28), Postgraduate degree (n=19), Sample Size = 104 mmunity 2 = Lincoln / Lyon)

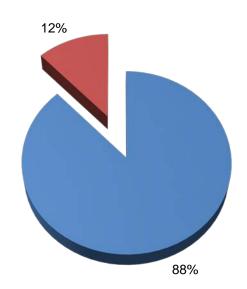
Employment Status



Base: Employed for wages (n=60), Self-employed (n=6), Out of work for less than 1 year (n=5), Out of work for 1 year or more (n=3), A homemaker (n=6), A student (n=6), Retired (n=18), Unable to work (n=1), Sample Size = 105

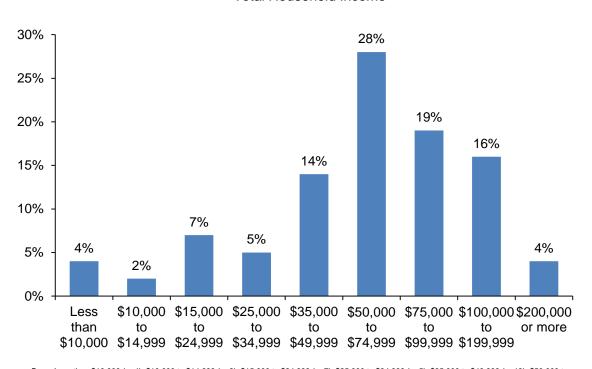
Sample Source

■ Qualtrics ■ Open Invitation / FaceBook



Base: Qualtrics (n=92), Open Invitation / FaceBook (n=13), Sample Size = 105

Total Household Income



Base: Less than \$10,000 (n=4), \$10,000 to \$14,999 (n=2), \$15,000 to \$24,999 (n=7), \$25,000 to \$34,999 (n=5), \$35,000 to \$49,999 (n=13), \$50,000 to \$74,999 (n=26), \$75,000 to \$99,999 (n=18), \$100,000 to \$199,999 (n=15), \$200,000 or more (n=4), Sample Size = 94

Prioritization Worksheet

Canton/Inwood 2019 Community Health Needs Assessment Prioritization Worksheet

Criteria to Identify Priority Problem

- Cost and/or return on investment
- Availability of solutions
- Impact of problem
- Availability of resources (staff, time, money, equipment) to solve problem
- Urgency of solving problem (Ebola or air pollution)
- Size of problem (e.g. # of individuals affected)

Criteria to Identify Intervention for Problem

- Expertise to implement solution
- Return on investment
- Effectiveness of solution
- Ease of implementation/maintenance
- Potential negative consequences
- Legal considerations
- Impact on systems or health
- Feasibility of intervention

Health Indicator/Concern	Round 1 Vote	Round 2 Vote	Round 3 Vote
 Economic Well-Being Availability of affordable housing 4.24 – 4 votes Employment options 3.33 – 2 votes Skilled labor workforce 3.24 Household budgeting and money management 3.19 Maintaining livable and energy efficient homes 3.05 	3 way tie – Availability of Affordable Housing		
 Transportation Availability of walking and biking options 3.27 Driving habits 3.05 			
 Children and Youth Substance abuse by youth 3.47 – 4 votes Cost of activities (outside of school and sports) for children and youth 3.44 Availability of activities (outside of school and sports) for children and youth 3.42 Availability of quality childcare 3.41 – 1 vote Availability of services for at-risk youth 3.41 Bullying 3.41 – 2 votes Cost of quality childcare 3.35 Cost of services for at-risk youth 3.35 Childhood obesity 3.33 Teen tobacco use 3.29 Teen suicide 3.24 – 1 vote Opportunities for youth-adult mentoring 3.06 	3 way tie – Substance Abuse by Youth		
Aging Population Cost of memory care 3.63 Cost of long term care 3.59 Cost of in-home services 3.32 Availability of memory care 3.28 Availability of resources to help the elderly stay safe in their homes 3.16 – 2 votes Safety			
 Abuse of prescription drugs 3.47 – 1 vote Presence of drug dealers 3.06 			

Health Indicator/Concern	Round 1 Vote	Round 2 Vote	Round 3 Vote
 Health Care Access Access to affordable health insurance coverage 3.82 Access to affordable health care 3.72 Availability of health care services for Native people 3.47 Access to affordable prescription drugs 3.44 Availability of health care services for New Americans 3.41 Access to affordable vision insurance coverage 3.29 Availability of mental health providers 3.22 Availability of non-traditional hours 3.19 			
 Access to affordable dental insurance coverage 3.18 Availability of behavioral health 3.18 Availability of prevention programs and services 3.12 			
 Mental Health and Substance Abuse Drug use and abuse 3.41 - 4 votes Suicide 3.41 - 1 vote Alcohol use and abuse 3.33 - 1 vote Smoking and tobacco use 3.24 Depression 3.22 - 1 vote Stress 3.18 Dementia and Alzheimer's Disease 3.12 Exposure to secondhand smoke 3.06 	3 way tie – Drug Use and Abuse		

Secondary Research

Definitions of Key Indicators

County Health Rankings & Roadmaps Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

This Excel file contains the ranks and scores for each county in your state and the underlying data details for the measures used in

calculating the 2018 County Health Rankings. In addition, the file contains additional measures that are reported on the County

Health Rankings web site for your state.

For additional information about how the County Health Rankings are calculated, please visit www.countyhealthrankings.org

Contents:

Outcomes & Factors Rankings

Outcomes & Factors Sub Rankings

Ranked Measures Data (including measure values, confidence intervals* and z-scores**)

Additional Measures Data (including measure values and confidence intervals*)

Ranked Measure Sources and Years

Additional Measure Sources and Years

- * 95% confidence intervals are provided where applicable and available.
- ** Z-scores are "adjusted" z-scores (e.g., multiplied by -1 if a positively framed measure, set to zero for missing and unreliable

values for ranked counties, and truncated at -3 or +3 if county population is less than 20,000).

Measure	Data Elements	Description	
Geographic	FIPS	Federal Information Processing Standard	
identifiers	State		
	County		
Premature death	Years of Potential Life Lost Rate	Age-adjusted YPLL rate per 100,000	
	95% CI - Low	95% confidence interval reported by National Center for	
	95% CI - High	Health Statistics	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	Years of Potential Life Lost Rate (Black)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Blacks	
	Years of Potential Life Lost Rate (Hispanic)	Age-adjusted YPLL rate per 100,000 for Hispanics	
	Years of Potential Life Lost Rate (White)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Whites	

Measure	Data Elements	Description	
Poor or fair health	% Fair/Poor	Percentage of adults that report fair or poor health	
	95% CI - Low		
	95% CI - High	95% confidence interval reported by BRFSS	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Poor physical health days	Physically Unhealthy Days	Average number of reported physically unhealthy days per month	
_	95% CI - Low	95% confidence interval reported by BRFSS	
	95% CI - High	(1)	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Poor mental health days	Mentally Unhealthy Days	Average number of reported mentally unhealthy days per month	
	95% CI - Low	95% confidence interval reported by BRFSS	
	95% CI - High	5570 communicativa reported by bin 55	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Low birthweight	Unreliable	Value reported but considered unreliable since based on counts of twenty or less.	
	% LBW	Percentage of births with low birth weight (<2500g)	
	95% CI - Low	95% confidence interval	
	95% CI - High	95% Confidence interval	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	% LBW (Black)	Percentage of births with low birth weight (<2500g) for non- Hispanic Blacks	
	% LBW (Hispanic)	Percentage of births with low birth weight (<2500g) for Hispanics	
	% LBW (White)	Percentage of births with low birth weight (<2500g) for non- Hispanic Whites	
Adult smoking	% Smokers	Percentage of adults that reported currently smoking	
	95% CI - Low		
	95% CI - High	95% confidence interval reported by BRFSS	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Adult obesity	% Obese	Percentage of adults that report BMI >= 30	
	95% CI - Low	OFO/ confidence internal reported by PDFCC	
	95% CI - High	95% confidence interval reported by BRFSS	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Food environment	Food Environment Index	Indicator of access to healthy foods - 0 is worst, 10 is best	
index	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Physical inactivity	% Physically Inactive	Percentage of adults that report no leisure-time physical activity	
	95% CI - Low	95% confidence interval	
	95% CI - High		
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	

Measure	Data Elements	Description	
Access to exercise opportunities	% With Access	Percentage of the population with access to places for physical activity	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Excessive drinking	% Excessive Drinking	Percentage of adults that report excessive drinking	
	95% CI - Low	ore/ Cil in the Lil porce	
	95% CI - High	95% confidence interval reported by BRFSS	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Alcohol-impaired	# Alcohol-Impaired Driving Deaths	Number of alcohol-impaired motor vehicle deaths	
driving deaths	# Driving Deaths	Number of motor vehicle deaths	
	% Alcohol-Impaired	Percentage of driving deaths with alcohol involvement	
	95% CI - Low	OFOV confidence internal value Delegate distribution	
	95% CI - High	95% confidence interval using Poisson distribution	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Sexually	# Chlamydia Cases	Number of chlamydia cases	
transmitted infections	Chlamydia Rate	Chlamydia cases per 100,000 population	
infections	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Teen births	Teen Birth Rate	Births per 1,000 females ages 15-19	
	95% CI - Low		
	95% CI - High	95% confidence interval	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	Teen Birth Rate (Black)	Births per 1,000 females ages 15-19 for Black non-Hispanic mothers	
	Teen Birth Rate (Hispanic)	Births per 1,000 females ages 15-19 for Hispanic mothers	
	Teen Birth Rate (White)	Births per 1,000 females ages 15-19 for White non-Hispanic mothers	
Uninsured	# Uninsured	Number of people under age 65 without insurance	
	% Uninsured	Percentage of people under age 65 without insurance	
	95% CI - Low	050/ (1)	
	95% CI - High	95% confidence interval reported by SAHIE	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Primary care	# Primary Care Physicians	Number of primary care physicians (PCP) in patient care	
physicians	PCP Rate	Primary Care Physicians per 100,000 population	
	PCP Ratio	Population to Primary Care Physicians ratio	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Dentists	# Dentists	Number of dentists	
	Dentist Rate	Dentists per 100,000 population	
	Dentist Ratio	Population to Dentists ratio	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Mental health	# Mental Health Providers	Number of mental health providers (MHP)	
providers	MHP Rate	Mental Health Providers per 100,000 population	
	MHP Ratio	Population to Mental Health Providers ratio	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	# Medicare Enrollees	Number of Medicare enrollees	

Measure	Data Elements	Description	
	Preventable Hosp. Rate	Discharges for Ambulatory Care Sensitive Conditions per	
		1,000	
Preventable	95% CI - Low	Medicare Enrollees	
hospital stays	95% CI - High	95% confidence interval reported by Dartmouth Institute	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Diabetes	# Diabetics	Number of diabetic Medicare enrollees	
monitoring	% Receiving HbA1c	Percentage of diabetic Medicare enrollees receiving HbA1c	
	/o neserving 112/120	test	
	95% CI - Low	OFO/ confidence interval reported by Dortmouth Institute	
	95% CI - High	95% confidence interval reported by Dartmouth Institute	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	% Receiving HbA1c (Black)	Percentage of Black diabetic Medicare enrollees receiving HbA1c test	
	% Receiving HbA1c (White)	Percentage of White diabetic Medicare enrollees receiving HbA1c test	
Mammography	# Medicare Enrollees	Number of female Medicare enrollees age 67-69	
screening	% Mammography	Percentage of female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)	
	95% CI - Low	OF 0/ as a find a man in term and was a suite of the Doubles a cubb largetitude	
	95% CI - High	95% confidence interval reported by Dartmouth Institute	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	% Mammography (Black)	Percentage of Black female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)	
	% Mammography (White)	Percentage of White female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)	
High school	Cohort Size	Number of students expected to graduate	
graduation	Graduation Rate	Graduation rate	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Some college	# Some College	Adults age 25-44 with some post-secondary education	
	Population	Adults age 25-44	
	% Some College	Percentage of adults age 25-44 with some post-secondary education	
	95% CI - Low	95% confidence interval	
	95% CI - High	33/6 COMMUNICE MILET VAL	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Unemployment	# Unemployed	Number of people ages 16+ unemployed and looking for work	
	Labor Force	Size of the labor force	
	% Unemployed	Percentage of population ages 16+ unemployed and looking for work	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Children in poverty	% Children in Poverty	Percentage of children (under age 18) living in poverty	
	95% CI - Low	OFO/ confidence interval reported by CAIRE	
	95% CI - High	95% confidence interval reported by SAIPE	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	

Measure	Data Elements	Description	
	% Children in Poverty (Black)	Percentage of non-Hispanic Black children (under age 18) living in poverty - from the 2012-2016 ACS	
	% Children in Poverty (Hispanic)	Percentage of Hispanic children (under age 18) living in poverty – from the 2012-2016 ACS Percentage of non-Hispanic White children (under age 18) living in poverty - from the 2012-2016 ACS	
	% Children in Poverty (White)		
Income inequality	80th Percentile Income	80th percentile of median household income	
	20th Percentile Income	20th percentile of median household income	
	Income Ratio	Ratio of household income at the 80th percentile to income at the 20th percentile	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Children in single-	# Single-Parent Households	Number of children that live in single-parent households	
parent households	# Households	Number of children in households	
	% Single-Parent Households	Percentage of children that live in single-parent households	
	95% CI - Low	050/ 61	
	95% CI - High	95% confidence interval	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Social associations	# Associations	Number of associations	
	Association Rate	Associations per 10,000 population	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Violent crime	# Violent Crimes	Number of violent crimes	
	Violent Crime Rate	Violent crimes per 100,000 population	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Injury deaths	# Injury Deaths	Number of injury deaths	
	Injury Death Rate	Injury mortality rate per 100,000.	
	95% CI - Low	95% confidence interval as reported by the National Center	
	95% CI - High	for Health Statistics	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Air pollution - particulate matter	Average Daily PM2.5	Average daily amount of fine particulate matter in micrograms per cubic meter	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Drinking water	Presence of violation	County affected by a water violation: 1-Yes, 0-No	
violations	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Severe housing problems	# Households with Severe Problems	Number of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	
	% Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	
	95% CI - Low	OFO/ confidence interval	
	95% CI - High	95% confidence interval	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
Driving alone to	% Drive Alone	Percentage of workers who drive alone to work	
work	95% CI - Low	OFO/ panfidance interval	
	95% CI - High	95% confidence interval	

Measure	Data Elements	Description	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	
	% Drive Alone (Black)	Percentage of non-Hispanic Black workers who drive alone to work	
	% Drive Alone (Hispanic)	Percentage of Hispanic workers who drive alone to work	
	% Drive Alone (White)	Percentage of non-Hispanic White workers who drive alone to work	
Long commute - driving alone	# Workers who Drive Alone	Number of workers who commute in their car, truck or van alone	
	% Long Commute - Drives Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes	
	95% CI - Low		
	95% CI - High	95% confidence interval	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)	

County Health Rankings

	Lincoln County SD	Lvon County IA
Length of Life		
Premature age-adjusted mortality	180	260
Child mortality	40	
Infant mortality	5	
Quality of Life		
Frequent physical distress	8%	8%
Frequent mental distress	8%	9%
Diabetes prevalence**	7%	11%
HIV prevalence		
Health Behaviors		
Food insecurity**	8%	9%
Limited access to healthy foods	1%	3%
Drug overdose deaths		
Drug overdose deaths - modeled	4-5.9	6-7.9
Motor vehicle crash deaths	6	12
Insufficient sleep	24%	25%
Clinical Care		
Uninsured adults	7%	6%
Uninsured children	4%	5%
Health care costs**	\$8,725	\$8,441
Other primary care providers	1,089:1	2,351:1
Social & Economic Factors		
Disconnected youth		
Median household income	\$84,600	\$62,500
Children eligible for free or reduced price lunch	17%	26%
Residential segregation - black/white**	50	
Residential segregation - non-white/white**	20	28
Homicides		
Firearm fatalities	6	
Physical Environment		
Demographics		
Population	54,469	11,754
% below 18 years of age	28.6%	28.4%
% 65 and older	11.6%	17.3%
% Non-Hispanic African American	1.3%	0.2%
% American Indian and Alaskan Native	0.6%	0.4%
% Asian	1.3%	0.3%
% Native Hawaiian/Other Pacific Islander	0.1%	0.1%
% Hispanic	1.9%	2.6%
% Non-Hispanic white	93.6%	95.8%
% not proficient in English	1%	0%
% Females	50.3%	49.2%

