

# **Community Health Needs Assessment**

## SANFORD USD MEDICAL CENTER SIOUX FALLS – 2022-2024



Dear Community Members,

Sanford Sioux Falls USD Medical Center is pleased to present the 2021 Community Health Needs Assessment (CHNA). Sanford Health completes a community health needs assessment for facilities across our footprint once every three years. This process helps to identify unmet health needs in communities we serve, and allows us to strategically plan how to best address those needs. The CHNA process is well-aligned with Sanford's mission to be dedicated to the work of health and healing.

During 2020 and 2021, members of the community were invited to complete a survey to help identify gaps and unmet health needs. Key stakeholders completed a survey to identify concerns for the community related to the social determinants of health. These include economic well-being, transportation, children and youth, the aging population, safety, access to services, and mental and behavioral health.

Sanford Health, in partnership with the NDSU Center for Social Research, analyzed the data from the primary research along with key secondary data from County Health Rankings. We also 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 significant health needs in a formalized implementation strategy for the 2022-2024 fiscal years:

- Access to care
- Chronic disease prevention
- Mental health and addiction

The CHNA also focused on the many strengths of our community. This report includes the community assets that are available to address identified health needs. We have also included an impact report from our 2018 implementation strategies.

Sanford Sioux Falls USD Medical Center is committed to extending care beyond our bricks and mortar. We are committed to meeting the health care needs of the broader community, and the Community Health Needs Assessment will ensure continued focus on these key areas. Working together, we can fulfill our mission, and improve the health and wellness of our community.

Sincerely,

Paul Hanson President Sanford Sioux Falls USD Medical Center

#### BACKGROUND

#### **Community Description**

The Sanford USD Medical Center is located in Sioux Falls, South Dakota, the most populous city in the state. 272,379 people live in the Sioux Falls metro area, as of 2020, and it accounts for more than a quarter of the total state population.

Sioux Falls was chartered in 1856 on the banks of the Big Sioux River and serves as the county seat for Minnehaha County. Experiencing a 54% population growth over the last 20 years the once quiet prairie town has transformed into a cultural and economic hub for the region.

Sioux Falls has been ranked by Best Life Magazine as the healthiest city in the United States, and one of the healthiest cities by many other organizations. Other notable Sioux Falls rankings include; number 1 on SmartAsset's best city for young professionals, number 2 on tax foundation's best tax climate, number 6 on SmartAsset's best places to raise kids, and number 7 on LivAbility's best places to live.

Sanford Health is the largest employer in Sioux Falls. Sioux Falls is ranked number one on Forbes' list of Best Small Places for Business and Careers, and provides a home base for financial services, renewable energy industry, health care and expertise in manufacturing, research and back-office operations. Key industries include medical device manufacturing, biomedical research, data centers and customer care services.

The community as defined for purposes of the Community Health Needs Assessment includes Lincoln, Minnehaha, McCook, and Turner Counties. Demographic detail for the counties is included in the appendix.

#### Partners

The Community Health Needs Assessment is the result of the hard work and coordination of numerous people within the organization and among community partners. Sanford Health would like to thank and acknowledge the following for their assistance. The development of the program would not have been possible without their expertise regarding the communities and populations we serve.

#### **Sanford Health**

- Michelle Micka, System Vice President, Finance, Health Services
- Dr. Jeremy Cauwels, System Vice President, Chief Physician
- Corey Brown, System Vice President, Government Affairs
- Clarence Mellang, Senior Director, Communications
- Michelle Bruhn, Senior Vice President, Health Services Operations
- Blayne Hagen, Executive Director, Legal
- Stacy Wrightsman, Executive Director, Community Relations
- Matt Ditmanson, Director, Community Benefit Programs
- Emily Griese, Vice President, Population Health and Clinical Operations
- Marnie Walth, Senior Legislative Affairs Specialist
- Joseph Beaudreau, Patient Relations Specialist and Indian Health Advocate
- Phil Clark, Director, Market Research
- Shawn Tronier, Senior Marketing Analyst
- Amber Langner, Vice President, Treasury
- Catherine Bernard, Director, Tax
- Deana Caron, Senior Tax Accountant

#### **System Partners**

We would also like to express our gratitude to the following individuals for their expertise during the development and analysis of the Community Health Needs Assessment:

- Jeanne Larson, Executive Director, Northern Dental Access Center
- Carol Biren, Division Director, Southwest Health and Human Services
- Cynthia Borgen, Director, Beltrami County Public Health
- Mary Michaels, Public Health Prevention Coordinator, Sioux Falls Department of Health
- Renae Moch, Director, Burleigh Public Health and President, North Dakota Public Health Association
- Ann Kinney, Senior Research Scientist, Minnesota Department of Health
- Jennifer Nelson, Public Health Educator, Southwest Health and Human Services
- Julie Ward, Vice President of Strategy and Social Innovation, Avera Health
- Jody Lien, Director, Ottertail Public Health
- Karen Pifher, Community Health Program Manager, Essentia Health
- Lori Jensen, Public Health Nurse Beltram County Health and Human Services
- Erica Solseth, CHI St. Alexius Health
- Sister Nancy Miller, Director Mission Integration, CHI St. Alexius Health
- Nancy Hodur, Director, North Dakota State University Center for Social Research
- Karen Olson, Research Specialist, North Dakota State University Center for Social Research

#### **Sioux Falls Partners**

We express our gratitude to the following community collaborative members for their participation in the community focus group listening sessions and key stakeholder interviews:

#### **Health Care**

- Sarah Bruns, Sanford Health
- Gwen Jensen, Sanford Health
- Sister Mary Thomas, Avera McKennan Hospital & University Health Center
- Kristin Tuttle, Lifescape
- Ann Hamilton, Sanford Health
- Thomas Otten, Avera Behavioral health Center
- Rick Kooima, Avera Health
- Todd Bechtold, Sanford Health
- Alisa Reindl, Avera Health
- Rachel Gangle, Sioux Falls VA
- Patty Larson, Avera McKennan Hospital & University Health Center
- Jean Gross, Delta Dental
- Josh Merkley, Keystone Treatment Center
- Stacy Reitmeier, Avera McKennan
- Kim Hansen, Southeastern Behavioral Health Care
- Michaela Gasca, Falls Community Health
- Michaela Seiber, South Dakota Urban Indian Health (interview)

#### Community / Nonprofit

- Janet Kittams, Helpline Center
- Jay Powell, Sioux Empire United Way
- Wendy White, Face it TOGETHER, Inc.
- Lori Montis, Minnehaha County
- Jill Ireland, American Cancer Society
- Taneeza Islam, South Dakota Voices for Peace
- Julie Becker, St. Francis House
- Kerri Tietgen, EmBe
- Brett Quall, The Community Outreach

- Candy Hanson, Sioux Falls Thrive
- Christina Riss, Sioux Empire United Way
- Gerald Beninga, Active Generations
- Vicki Stewart, Sioux Falls Business Resource Network (interview)
- Fran Rice, Health Connect of South Dakota
- Madeline Shields, Bishop Dudley House (interview)
- Matt Gassen, Feeding South Dakota (interview)

#### Government

- Kari Benz, Minnehaha County
- Carol Muller, Minnehaha County
- Brett Johnson, Minnehaha County

#### Education

- Amy Benda, Sioux Falls Hope Coalition
- Dr. Jane Stavem, Superintendent SF School District (interview)

#### Sanford Sioux Falls Description

Sanford USD Medical Center is a 545-bed tertiary medical center in Sioux Falls, SD, providing comprehensive, innovative multispecialty care for patients from across the Midwest. It is the largest hospital in South Dakota and a Level II adult and pediatric trauma center, serviced by Sanford AirMed air ambulance, which covers a vast geographic region and offers four specialized transport teams, including adult, pediatric, neonatal and obstetric. As a provider of highly specialized services, Sanford USD offers Centers of Excellence in heart and vascular, children's services, cancer, neuroscience, orthopedics and sports medicine, and women's health. It also serves as the primary teaching hospital for the Sanford USD School of Medicine, located at the University of South Dakota in Vermillion. Sanford employs more than 12,000 people in the Sioux Falls area, including 526 board-certified physicians and 552 advanced practice providers (APPs) in more than 80 medical specialties. Sanford USD Medical Center is accredited by The Joint Commission and is a designated Magnet hospital by the American Nurses' Credentialing Center.

Through its mission, dedicated to sharing God's love through the work of health, healing and comfort, and its vision of improving the human condition at every stage of life through exceptional care, spiritual enrichment, innovation and discovery, Sanford is making medical care accessible to the entire region.

- <u>Sanford Children's Castle of Care</u> serves pediatric patients in a five-state area and through Sanford World Clinics, which comprise 133 health facilities in 10 countries. State-of-the-art neonatal intensive care and pediatric intensive care units offer 24/7 care by local specialists. This includes 135 pediatric specialists in over 30 unique medical areas of expertise. The model of CARE focuses on excellence in clinical services, advocacy, research, and education.
- <u>Sanford Heart Hospital</u> is a state-of-the-art hospital offering highly advanced, integrated, and personalized heart care from more than 750 experienced heart specialists and staff. All services for heart patients — emergency care, outpatient testing, surgery, rehab, catheterization, consultation with specialists — are consolidated into one building attached to the medical center, allowing for easy access. Within Sanford Heart Hospital, patients receive personalized, innovative health care where comfort, well-being, compassion, communication, and empowered choices allow them to experience their healing journey in a positive, life-changing way.
- <u>Sanford Orthopedic and Sports Medicine</u> has depth of services and specialties to treat sprains, strains, tears, breaks, joint pain, and concussions. We offer more than 45 expert providers with extensive experience in diagnosis, surgery, and nonsurgical treatments.

Sanford is a regional leader in sports medicine and works with over 125 club, high school, collegiate, and semiprofessional teams.

- Sanford's Cancer Center and Edith Sanford Breast Center combine to form a unique beacon of expert cancer and breast care throughout the region. Through the generosity of Denny Sanford, we have designed a space that supports advanced cancer care and breast care delivery models of the future, encompassing the whole person built on a foundation of distinguished research and supporting team-based care. Sanford runs the WISDOM Study to create the most effective screening protocols for all women at every stage of life and participates in nationwide studies through the National Cancer Institute (NCI). One of the main objectives of the NCI Community Cancer Centers Program is to reduce cancer care disparities among underserved populations through education, prevention, screening, treatment, and patient-family support programs.
- <u>Sanford Women's</u> offers state-of-the-art obstetric and gynecological care for women of all ages in several locations throughout a four-state area. Care is provided by specialists in OB/GYN, maternal-fetal medicine, urogynecology, fertility and reproductive medicine, low intervention birth, and more. Sanford Women's Plaza is a unique destination that provides women with a variety of health options, all in one location.
- <u>Imagenetics</u> Sanford Health is embedding the latest in genomic medicine into primary care through Imagenetics. This program provides physicians with unprecedented patient-specific information to better identify effective medications and risk for inherited disease in order to design a care plan for the future. Through a national partnership with the U.S. Department of Veterans Affairs, Sanford Health is bringing free pharmacogenetic testing to 250,000 veterans across the country. Sanford Imagenetics was established in 2014 thanks to a generous gift of \$125 million from philanthropist Denny Sanford.
- <u>Sanford Health Plan</u> is a community-based, non-profit health insurance company that offers product lines for individuals, families, and businesses in North Dakota, South Dakota, Minnesota, and Iowa. Sanford Health Plan's regional network of 25,000 providers includes Sanford Health practitioners and providers as well as those affiliated with other health systems or in independent practice. The health plan also maintains a nationwide network for members living or traveling outside of the service area. There are currently 210,000 enrolled Sanford Health Plan members

#### **CHNA** Purpose

The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues 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 and justify 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.

#### **Regulatory Requirements**

Federal regulations stipulate that non-profit medical centers conduct a community health needs assessment at least once every three years and prioritize the needs for the purpose of implementation strategy development and submission in accordance with the Internal Revenue Code 501(r)(3).

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

The regulations stipulate that each medical center take into account input from persons who represent the broad interests of the community. Hospitals are required to seek 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 or 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 explain why they 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 form 990 Schedule H.

Finally, hospitals are to be transparent with the findings and make the written CHNA report available to anyone who asks for the report. 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 2022 report will be Sanford's fourth report cycle since the requirements were enacted in 2010.

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 <a href="https://www.sanfordhealth.org/about/community-health-needs-assessment">https://www.sanfordhealth.org/about/community-health-needs-assessment</a>. No community comments or questions regarding the previous CHNA have been made via the website link or email address.

#### **CHNA Process**

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



#### Limitations

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

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

#### **Community and Stakeholder Survey**

Members of the community were asked a series of questions through an online survey designed in partnership with health experts and public health officials across the Sanford footprint to understand the needs of the community based upon the UW Population Health model. Each respondent was asked to rate community drivers from poor to excellent. Any response other than excellent was offered a follow up opportunity to comment on the reason. Respondents were also asked a series of questions specific to their health care access, health care quality, barriers to care, travel to care, and insurance. The survey was sent to a sample of the Minnehaha, McCook, Turner, and Lincoln County, SD populations secured through Qualtrics, a qualified vendor. The full set of questions is available in the appendix.

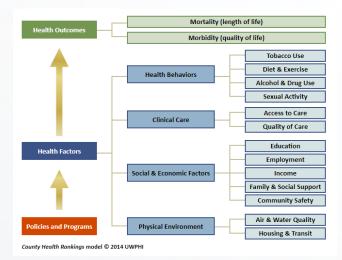
To further promote community involvement the survey was also sent to community stakeholders and elected officials with knowledge and connections amongst medically underserved, low income, or minority populations, including the City of Sioux Falls public health department. Stakeholders were asked to complete the instrument as a resident of the community and forward the survey to their respective populations for greater involvement. The survey was highlighted in a Sanford Health News article

(https://news.sanfordhealth.org/community/health-needs-assessment-survey/) and promoted through social media via paid communications. The paid communications yielded 344,300 impressions and 1,150 completed surveys across the system.

Survey data for the local community should be considered directional and best utilized in conjunction with additional data. A total of 739 of respondents from the local CHNA area completed the survey. 6,748 total respondents from across the entire Sanford footprint completed the survey.

#### **Secondary Data**

County Health Rankings is based upon the UW Population Health model and serves as the main secondary data source utilized for the community health needs assessment. Alignment of the survey and secondary data within the UW Population Health model allows for greater connection of the data sets. Population data are sourced to the U.S. Census Bureau. Additional data sources may be used and are sourced within the document.



#### Health Needs Identification Methodology

The Center for Social Research at North Dakota State University was retained to develop the initial community health needs list for each community and builds upon their involvement during the previous cycle. The following methodology was used to develop the significant health needs presented later in the report:

- Survey data was stratified into representative groups based upon population: large urban communities, medium sized communities, and rural communities. The three groups were analyzed separately. Sioux Falls is included with Bismarck, ND and Fargo, ND.
- To identify community health care needs, each community's score by question was compared to the average stratified composite of the comparative group. For example, if the composite stratified system-wide average score is 4 and an individual community's average response was 2.5, that would suggest an issue of concern and a potential community health care need to be highlighted in the summary findings.
- Upon determination of a potential strength or need, County Health Rankings (https://www.countyhealthrankings.org/) and responses from open-ended questions provided additional insights into the drivers of the respective needs.
- A similar methodology was also used to provide additional insights into findings from County Health Rankings data with relevant health needs highlighted in the survey findings.
- Health needs identified through either the survey or County Health Rankings data but not both were also included in the findings.

#### **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.

#### **Community Listening Sessions and Interviews**

Two community listening sessions were held in April 2021 with participants representing various sectors of the community including health care, community/nonprofit, government, and education. The listening session was sponsored by all four coalition partners. Intersections Consulting group facilitated discussions using a four-part process as follows:

- A warm-up conversation to get participants in a community health mindset, using an "Elements of a Health Community" visual;
- A scan of what is happening, trending and emerging, using a "Wave" visual;
- A dive into underlying structures and deeper thinking that is driving community health, using an "Iceberg" visual; and
- A catch-all approach to gathering advice for community health systems of all kinds, using a "Dear Health Systems" visual.

Intersections Consulting also facilitated several individual interview-style sessions with key community partners. All listening sessions were facilitated virtually using Zoom video calls, along with a virtual facilitation app called Miro to encourage hands-on engagement. All sessions were facilitated by Intersection Consulting's John Beranek and Joe Bartmann, with production assistance by Charity Adams.

#### **Priority Needs Identification**

Upon completion of the multipronged assessment process as detailed above, three health needs were identified by consensus of CHNA assessment coalition partners. Coalition partners adopted identical priority needs but are developing individual Implementation Plans. Consensus was based upon all factors, including primary and secondary data, input from the community, and scalability of current hospital programs and resources to address the identified needs efficiently and effectively. All identified needs not addressed in the implementation plan were shared with other community partners for action. Requests for survey data and other CHNA assets by public

health organizations, governmental bodies, and community partners were and continue to be supported.

#### **Community Definition:**

Lincoln, McCook, Turner, and Minnehaha Counties in South Dakota are included in the data analysis and represent a majority of the volumes to Sanford USD Medical Center. No population was excluded from the process.

#### COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

#### **Community Health Summary**

CHNA respondents were asked to rate various community health issues and their personal health and wellness on the following 1 to 5 scale: 1= poor, 2= fair, 3= good, 4= very good, 5= excellent. Overall, perceptions among CHNA respondents in the Sioux Falls area regarding the following community health issues were positive. Average scores by category as follows:

- Access to daily transportation (avg. score=3.10)
- Long-term nursing care and senior housing quality (avg. score=3.37)
- Child care and preschool quality (avg. score=3.57)
- Community safety (avg. score=3.69)
- Access to healthy foods (avg. score=3.70)
- Employment and economic opportunities (avg. score=3.71)
- Environmental health (avg. score=3.90)
- Access to exercise opportunities (avg. score=3.93)
- Health care quality (avg. score=4.00)

With the exception of environmental health, average scores for CHNA respondents in the Sioux Falls area for each of these community health issues were higher than scores for any of the comparison group markets.

When asked about their personal health, CHNA respondents in the Sioux Falls area rated their current health and wellness as good (average score=3.41) and their current ability to access health care services as very good (average score=3.95). Again, these average scores were higher than the average in both the Fargo and Bismarck markets. Despite higher rankings when compared to similar-sized markets, it is important to note that average scores of CHNA respondents in all three markets were very similar.

County Health Rankings (CHR) data indicate that Lincoln County is among the healthiest counties in South Dakota and McCook, Minnehaha, and Turner counties rank in the uppermiddle range of South Dakota counties in terms of overall health. However, the following health needs were identified for further consideration (in no particular order).

#### **Significant Health Needs Identified**

#### Access to Affordable Health Care

Access to affordable, quality health care is important to physical, social, and mental health. Health insurance, local care options, and a usual source of care help to ensure access to health care. Having access to care allows individuals to enter the health care system, find care easily and locally, pay for care, and get their health needs met.

When CHNA respondents in the Sioux Falls area were asked about the most important health care issues impacting their community, the cost of health care was their top concern, after COVID-19 issues. In addition, when respondents were asked about their biggest health care concerns for themselves and their family (concerns they face on a regular basis), cost and the ability to afford needed health care was their top health care concern.

Regarding routine checkups, 17 percent of CHNA respondents in the Sioux Falls area had not been to a physician or provider for a routine checkup in the past year, which is the highest percentage among similar-sized markets served by Sanford Health. When asked why, the third leading concern was the cost and inability to afford care (16%), behind COVID-19 concerns (56%) and not needing to see a doctor (21%). In addition, 12 percent of CHNA respondents in the Sioux Falls area indicated that they or a family member needed medical care in the past year but did not receive it. When asked why, the main reason was due to cost and inability to pay for health care services (51%), followed by COVID-19 concerns (49%) and no health insurance (31%).

According to CHR, approximately 9 percent of people in the Sioux Falls area are uninsured, a rate which is higher than the average in the Bismarck and Fargo markets served by Sanford Health.

Local As	set Mapping
Skilled Labor/Employment resources	Skilled Labor/Employment resources
• Aerotek, 5016 S. Bur Oak Pl.	(cont.)
Bridges Employment Resource Center,	• Goodwill Job Center, 3400 S. Norton
2300 W. 46th St.	Avenue
City of Sioux Falls Homeless Outreach, 224	<ul> <li>IMKO, 4309 S. Racket Drive</li> </ul>
W. 9th St.	• Job Service, 811 E. 10th St.
• Command Center, 409 S. 2nd Ave.	<ul> <li>Key Staffing, 500 N. Western Ave.</li> </ul>
Dress for Success (provides professional	• LSS Center for New Americans, 300 E. 6th
attire for job interviews & career	St. (provides employment services)
development tools for women), 620 W. 18th	• People Ready, 201 W. 37th St.
St.	• Pro Force Services, 2221 W. Russell Street
• DSS Child Care Services (provides financial	• SD Dept. of Labor, 811 E. 10th St.
help for those seeking employment) - 800-	• Spartan Staffing, 201 W. 37th St.
227-3020	• Spherion, 4320 S. Arway Drive
• Employment Edge, 4320 S. Louise Avenue	• Tradesmen International, 8609 W. 26th
• Experience Works, 2116 S. Minn. Avenue	Street
• Express Employment, 434 S. Kiwanis	Workforce Solutions, Chamber of
• Farmworker Jobs Program, 811 E. 10th St.	Commerce, 101 Pierce St.
Prescription Assistance programs	Health Insurance resources
CancerCare Co-payment Assistance Foundation 866- 552-6729	Sanford Health Plan, 300 N. Cherapa Place     Sp. Madiaal Insurance Program, 700
Freedrugcard.us	<ul> <li>SD Medical Insurance Program, 700</li> <li>Governors Drive, Pierre</li> </ul>
Rxfreecard.com	• Wellmark Blue Cross Blue Shield, 1601 W.
Medsavercard.com	Madison Street
Yourrxcard.com	• Avera Health Plan, 3816 S. Elmwood Ave.
Medicationdiscountcard.com	• Dakota Care, 2600 W. 49th St.
Needymeds.org/drugcard	• Medica, 5032 S. Bur Oak Pl.
Caprxprogram.org	• Midwest Employee Benefits, 5000 S.
Southdakotarxcard.com	MacArthur Lane
Gooddaysfromcdf.org	
NORD Patient Assistance Programs	
• SD Partnership for Prescription Assistance	
- pparx.org	
Patient Access Network (PAN) Foundation	
– panfoundation.org	
• Pfizer RX Pathways – pfizerrxpathways.com	
RXhope.com	

#### **Physical Activity and Nutrition**

The environments where people live, learn, work, and play affect access to healthy food and opportunities for physical activity which, along with genetic factors and personal choices, shape the health and the risk of being overweight and obese.

After the cost of health care and COVID-19 concerns, chronic health issues were the next leading health care concern that CHNA respondents and their families in the Sioux Falls area face on a regular basis. The most commonly cited chronic health concerns included being overweight, obesity, and diabetes. Diabetes is an important marker for a range of health behaviors. CHR data indicate that one in ten adults in the Sioux Falls area has diabetes (10%) and one in three adults has obesity (34%) – both rates are slightly higher than the comparison group average.

CHR data also indicate that 21 percent of individuals in the Sioux Falls market are physically inactive (which is similar to the comparison group average) and 8 percent are considered food insecure and do not have a reliable source of food (which is the highest rate among similar markets). While CHNA respondents in the Sioux Falls area rated access to healthy foods between good and very good (average score=3.70), 13 percent rated access to healthy foods as poor or fair. The most common reason cited by respondents who rated access to healthy foods as poor or fair included the high cost of fresh produce and healthy foods.

Local Asset Mapping	
Healthy Nutrition resources	Healthy Nutrition resources (cont.)
<ul> <li>Sanford dietitians, 1305 W. 18th St.</li> <li>Avera dietitians, 3900 W. Avera Drive</li> <li>Community Garden, Leaders Park, 500 Leadale Avenue</li> <li>County Extension classes, 2001 E. 8th Street</li> <li>Falls Community Clinic dietitians, 521 E. Mai Avenue</li> <li>Great Life nutritional classes, 4500 S. Tennis Lane</li> <li>Hy-Vee dieticians (several locations)</li> <li>SE Technical Institute classes, 2205 N. Caree Avenue</li> <li>SF Urban Indian Health, 711 N. Lake Avenue</li> <li>VA dietitians, 2501 W. 22nd St.</li> <li>Farmers Markets:</li> <li>Gundy's Farmers Market, 8th &amp; Railroad Center</li> <li>Falls Park Farmers Market, P O Box 2531</li> </ul>	<ul> <li>Prairie Farmers Market, 300 N. Cherapa Place</li> <li>Sioux Empire Farmers Market, 401 E. 8th St</li> <li>Grocery Stores (some have multiple locations)</li> <li>ALDI, 2808 S. Louise</li> <li>Andy's Affiliated Foods, 1025 S. Cleveland</li> <li>Beeryozka Grocery, 3301 E. 26th St.</li> <li>Fareway, 1431 W. 41st St.</li> <li>Franklin Food Market, 711 N. Cliff Ave.</li> <li>Global Foods, 1002 W. 6th St.</li> <li>Hy-Vee (several locations)</li> <li>Mercato, 631 W. 11th St.</li> <li>Pomegranate Market, 4815 S. Louise</li> <li>Sunshine Foods, 530 S. 2nd Ave.</li> <li>Tienda America, 114 S. Franklin Ave.</li> <li>Thanh Mai, 824 E. Rice St.</li> <li>The Co-op Natural Foods, 410 W. 18th St.</li> </ul>
• MTM Euro Farmers Market, 5315 W. 41st St.	<ul> <li>Walmart, 7821 S. Minn. Ave</li> </ul>
<ul> <li>Physical Activity Resources</li> <li>SF Parks &amp; Recreation Dept. 100 E. 6th Street</li> <li>9 Round Fitness</li> <li>X Fitness, 112 W. 39th St.</li> <li>24/7 Fitness, 300 N. Dakota Ave.</li> <li>Anytime Fitness, 2320 S. Marion Rd.; 3212 E. 10th St.</li> <li>Avera McKennan Fitness Center, 3400 S. Southeastern Ave.</li> </ul>	<ul> <li>Physical Activity resources (cont.) Ice Skating:</li> <li>Sherman Park Rink, 2705 W. 12th Street Snowshoeing:</li> <li>Big Sioux Park, 1800 E. 18th St. Cross Countre Skiing:</li> <li>Spencer Park, I-229 &amp; South Cliff Ave.</li> <li>Sertoma Park, W. 49th St. &amp; Oxbow Ave.</li> <li>Great Bear Ski Valley, 5901 E. Rice Street</li> </ul>
<ul> <li>Air Madness, 310 W. Industrial Dr., Harrisbur</li> <li>Champion Legacy Dance Studio, 3320 S. Bedford Avenue</li> </ul>	<ul> <li>Mountain Biking:</li> <li>Leaders Park, 500 Leadale Ave. Biking Club</li> <li>Falls Area Bicyclists, P.O. Box 91741</li> </ul>

<ul> <li>True Body Weight Management, 5011 S. Louise</li> </ul>
Louise
<ul> <li>Weigh to Go, 3801 W. 34th St.</li> </ul>
<ul> <li>Weight Watchers, 2101 W. 41st St.</li> </ul>

#### <u>Mental Health</u>

Mental health includes our emotional, psychological, and social well-being and affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood<sup>1</sup>.

When CHNA respondents in the Sioux Falls area were asked which health care services they would like to see offered or improved in their community, most said behavioral and mental health services (55%) followed by addiction treatment (40%). According to CHR, adults in the Sioux Falls market average about 3.0 mentally unhealthy days each month and 10 percent of adults average at least 14 days of mental distress per month. One of the most important measures of mental health within a community is suicide. CHR data indicate that there are 17 suicides for every 100,000 people in the Sioux Falls area, a rate similar to those in the Bismarck and Fargo market areas served by Sanford Health. According to CHR, the Sioux Falls area has one mental health provider for every 502 people (which is the highest ratio among similar-sized markets served by Sanford Health).

Local Asset Mapping	
Substance Abuse resources	Substance Abuse resources (cont.)
<ul> <li>Al-Anon, 41 W. Sioux Street</li> </ul>	<ul> <li>Narcotics Anonymous meetings (many</li> </ul>
Alcoholics Anonymous, 1000 N. West Avenue	locations)
<ul> <li>Arch Halfway House, 516 W. 12th Street</li> </ul>	New Day Counseling, 1320 E. Rushmore Drive
• Avera Behavioral Health, 4400 W. 69th St.	<ul> <li>Phillips Mental Health, 6209 E. Silver Maple</li> </ul>
• Avera Addiction Recovery Program, 2412 S.	Circle
Cliff Avenue	• Prairie View Prevention Services, 822 E. 41st St.
<ul> <li>Bartels Counseling, 6330 S. Western Avenue</li> </ul>	(schoolbased intervention)
<ul> <li>Carroll Institute, 310 S. 1st Ave.</li> </ul>	<ul> <li>Psychiatric Services, LLC, 101 S. Reid Street</li> </ul>
<ul> <li>Choices Recovery, 2701 S. Minn. Ave.</li> </ul>	<ul> <li>Psychotherapy Associates, 2210 W. Brown Place</li> </ul>
<ul> <li>City of Sioux Falls Homeless Outreach, 224 V</li> </ul>	Renew Counseling, 5201 W. Western Avenue
9th St.	Restoration Treatment Services, 225 E. 11th
<ul> <li>Clarity Counseling, 101 S Reid St.</li> </ul>	Street
Counseling Resources, 4109 S. Carnegie	<ul> <li>Safe Home, 320 W. 3rd St. (permanent housing</li> </ul>
Circle	for persistently homeless adults who have
<ul> <li>Dakota Drug &amp; Alcohol Prevention, 822 E. 41</li> </ul>	
St.	Sanford Behavioral Health, 2400 W. 49th Stree
• Emerald Psychological Services, 5032 S. Bur	• Sioux Falls Treatment Center, 2519 W. 8th St.
Oak Place	Sioux Falls Urban Indian Health, 711 N. Lake Ave
• Face It Together, 5020 S. Tennis Lane; 231 S.	Sioux Falls Wellness Counseling, 5201 S.
Phillips Ave.	Western Avenue
• First Step, 4320 S. Louise Ave.	• Stolsmark, Erin, Inc., 6809 S. Minn. Avenue
Glory Home, 4000 S. West Ave.	Stronghold Counseling, 4300 S. Louise
<ul> <li>Gorman, Stacy Counseling, 6809 S. Minn. Av</li> </ul>	Tallgrass Recovery / Transitional Living Corp.,
	27048 Tallgrass Ave.

<sup>&</sup>lt;sup>1</sup> U.S. Department of Health & Human Services, MentalHealth.gov. Available at https://www.mentalhealth.gov/basics/what-is-mental-health

<ul> <li>Great Plains Psychological Services, 4105 S. Carnegie Place</li> <li>Heisler Treatment Center, 1401 W. 51st St.</li> <li>Integrative Wellness, 5000 S. Minn. Avenue</li> <li>Keystone Outreach, 7511 S. Louise Ave.</li> <li>LaVelle &amp; Associates, 5024 S. Bur Oak Place</li> <li>Minnehaha Co. Detox Center, 500 N. Minn. Ave.</li> </ul>	<ul> <li>VA Medical Center, 2501 W. 22nd Street</li> <li>Volunteers of America Dakotas, 1310 – 51st St.</li> </ul>
<ul> <li>Minnehaha Co. Detox Center, 500 N. Minn. Ave.</li> <li>Mental/Behavioral Health resources</li> <li>Avera Behavioral Health, 4400 W. 69th Street</li> <li>Behavior Management Counseling Service, 3610 S. Western Avenue</li> <li>Bartels Counseling, 6330 S. Western Avenue</li> <li>Bethesda Christian Counseling, 400 S. Sycamore Ave.</li> <li>Caminado Juntois (Spanish speaking counselor), 617 E. 7th St.</li> <li>Catholic Family Services, 523 N. Duluth Avenue</li> <li>Center for Family Medicine, 1115 E. 20th Street</li> <li>Children's Home Society, 801 N. Sycamore Avenue</li> <li>Christensen, Barbara, Inc., 6809 S. Minnesota Avenue</li> <li>Clarity Counseling, 101 S Reid St.</li> <li>Compass Center, 1800 W. 12th St.</li> <li>Community Counseling Clinic, 2109 S. Norto Avenue</li> <li>Conrad Counseling, 5024 S. Bur Oak Place</li> <li>Credo Counseling, 5024 S. Bur Oak Place</li> <li>Dakota Oak Counseling, 3220 W. 57th Street</li> <li>Digatono, Daniel T. Counseling, 4410 S. Tennis Lane</li> <li>Discover Wellness, 2121 W. 63 Pl.</li> <li>Emerald Psychological Services, 5032 S. Bur Oak Place</li> <li>Emotions Anonymous support group, P. O. Box 4245</li> <li>Encompass Mental Health, 100 S. Spring Avenue</li> <li>Evenson Counseling, 3701 W. 49th Street</li> <li>Family Service, Inc., 2210 W. Brown Place</li> <li>Family Ties Christian Counseling, 3500 S. Phillips Ave.</li> <li>Four Directions Counseling, 101 S. Reid St.</li> <li>Glow – Glorious Lifestyle – Optimal Weight,</li> </ul>	<ul> <li>LifeGate Christian Counseling, 6820 W. 26th Street</li> <li>LifeMarks Behavioral Health, 1310 W. 51st St.</li> <li>LifeScape, 1020 W. 18th Street</li> <li>Lighting a New Way, 1500 S. Sycamore Ave.</li> <li>LSS Counseling, 705 E. 41st Street</li> <li>Maass, Ronda Counseling, 5510 S. Tennis Lane</li> <li>Moore Counseling, 4801 W. 41st St.</li> <li>NAMI (National Alliance on Mental Illness), 121 S Main Ave.</li> <li>New Day Counseling, 1320 E. Rushmore Drive</li> <li>New Idea Counseling, 2500 W. 49th Street</li> <li>Phillips Mental Health, 6209 E. Silver Maple Circle</li> <li>Psychiatric Services, LLC, 101 S. Reid Street</li> <li>Psychological Solutions, 6810 S. Lyncrest Avenue</li> <li>Psychotherapy Associates, 2210 W. Brown Place</li> <li>Renew Counseling, 5201 W. Western Avenue</li> <li>Resolutions Counseling, 6116 S. Lyncrest Avenue</li> </ul>
<ul> <li>1601 E. 69th St.</li> <li>Gorman, Stacy Counseling, 6809 S. Minn. Av</li> <li>Great Plains Psychological Services, 4105 S. Carnegie Place</li> </ul>	<ul> <li>Sozo Counseling Care, 3500 S. Phillips Avenue</li> <li>Stolsmark, Erin, Inc., 6809 S. Minn. Avenue</li> <li>Stronghold Counseling, 4300 S. Louise Avenue</li> <li>VA, 2501 W. 22nd Street</li> <li>Vet Center, 3200 W. 49th Street</li> </ul>

<ul> <li>Guth, Mary T. Counseling, 3610 S. Western Ave.</li> <li>Hansen-Mayer, Brenda, 1601 E. 69th Street</li> <li>Harp, Tina Counseling, 6509 S. Cliff Avenue</li> <li>Hauck, Stacey Counseling, 1601 E. 69th Street</li> <li>Helpline Center / 211 Response, 1000 N. West Ave.</li> <li>Heuermann Counseling Clinic, 2210 S. Brown Place (free short-term counseling)</li> <li>Holm, Ellen Counseling, 4410 S. Tennis Lane</li> <li>Huffman, Darla Counseling, 6809 S. Minn. Avenue</li> <li>Integrative Wellness, 5000 S. Minn. Avenue</li> <li>Journey Counseling, 6209 S. Pinnacle Place</li> </ul>	<ul> <li>Keiser, Kimberly &amp; Assoc., 6320 S. Western Avenue</li> <li>Key Solutions, 3800 S. Kiwanis Ave.</li> </ul>
<ul> <li>Journey Therapy, 1500 S. Sycamore</li> <li>Tobacco Cessation resources</li> <li>Avera Health, 1325 S. Cliff Ave.</li> <li>Avera Walking Forward Program for American Indians, 3900 W. Avera Drive</li> <li>Falls Community Health Clinic, 521 N. Main Avenue</li> <li>National Cancer Institute Smoking QuitLine - 877-448- 7848</li> <li>Prairie View Prevention Services, 822 E. 41st Street (school-based intervention)</li> <li>QuitLine, SDQuitline.com</li> <li>QuitNow - 800-784-8669</li> </ul>	<ul> <li>Tobacco Cessation resources (cont.)</li> <li>Sanford Clinics – all locations</li> <li>Sanford Health lung screen, 1205 S. Grange Avenue</li> <li>Sanford Health Plan (covers meds for smoking cessation), 300 N. Cherapa Place</li> <li>SD Department of Health, 600 E. Capitol Ave., Pierre (many resources)</li> </ul>

#### Access to Health Care Providers

CHNA respondents in the Sioux Falls area rated their ability to access health care as very good (average score=3.95); however, nearly one in five CHNA respondents in the Sioux Falls area reported traveling outside of their community to receive health care services in the past three years (18%). When asked why, most of those who traveled for care indicated that they needed specialty care or the needed services were not available locally (56%), followed by 38 percent of respondents who traveled for better or higher quality care.

One in eight CHNA respondents in the Sioux Falls area indicated they do not currently have a primary care physician (12%); this is the lowest percentage among similar markets. When asked which health care services they would like to see offered or improved in their community, one in four CHNA respondents in the Sioux Falls area said walk-in or urgent care (25%) with 22% stating family medicine or primary care, and 21% mentioning dental care. According to CHR, the Sioux Falls area has one primary care physician for every 956 people, the lowest ratio among similar-sized markets served by Sanford Health, and one dentist for every 1,656 people, the highest ratio among similar markets.

Local Asset Mapping	
Urgent Care	Hospitals
<ul> <li>Abbina Urgent Care, 12th/Kennedy NW</li> </ul>	<ul> <li>Sanford USD Medical Center and Hospital,</li> </ul>
corner, E 12th St, Sioux Falls	1305 W 18th St, Sioux Falls
<ul> <li>Sanford Sports Complex Acute Care and</li> </ul>	<ul> <li>Avera McKennan Hospital &amp; University</li> </ul>
Orthopedic Fast Track Clinic, 4000 Hercules	Health Center, 1325 S Cliff Ave, Sioux Falls
Ave, Sioux Falls	<ul> <li>Avera Heart Hospital of South Dakota, 4500</li> </ul>
	W 69th St, Sioux Falls

<ul> <li>Sioux Falls Urgent Care, 7600 S Minnesota Ave, Sioux Falls</li> <li>Sanford Health Downtown Clinic, 136 S Phillips Ave #102, Sioux Falls</li> <li>Urgent Care: Avera Family Health Center, 2100 S Marion Rd, Sioux Falls</li> <li>Sanford 26th &amp; Sycamore Acute Care and Orthopedic Fast Track Clinic, 4405 E 26th S Sioux Falls</li> <li>Sanford 69th &amp; Minnesota Acute Care and Orthopedic Fast Track Clinic, 6110 S Minnesota Ave, Sioux Falls</li> <li>Sanford 32nd &amp; Ellis Acute Care and Orthopedic Fast Track Clinic, 2601 S Ellis Ro Sioux Falls</li> <li>My Sanford Nurse, 1305 W 18th St, Sioux Falls</li> <li>My Sanford Nurse, 1305 W 18th St, Sioux Falls</li> <li>Urgent Care: Avera Dawley Farm, 1035 S Highline Pl, Sioux Falls</li> <li>Sanford Brandon Acute Care &amp; Orthopedic Fast Track Clinic, 1105 E Holly Blvd, Brandor</li> <li>Urgent Care: Avera 69<sup>th</sup> &amp; Western, 1910 W 69th St, Sioux Falls</li> <li>Sanford Health Occupational Medicine Clir 900 East 54th St N, Sioux Falls</li> </ul>	<ul> <li>VA Medical Center-Sioux Falls, 2501 W 22<sup>nd</sup> St</li> <li>Clinics <ul> <li>Sanford Health Clinics: Multiple locations</li> <li>Avera Clinics: Multiple locations</li> <li>Storm Clinic 7600 S Minnesota Ave, Sioux Falls</li> <li>South Dakota Urban Indian Health Sioux Falls Clinic, 1200 Northwest Ave, Sioux Falls</li> </ul> </li> </ul>

#### Long-Term Care

Safe, quality, affordable housing is fundamental to a healthy life. Healthy homes can improve lives and provide a foundation of health for individuals and families, but unhealthy homes can just as easily undermine quality of life and even cause poor or substandard health. A safe, quality, and affordable home is paramount to healthy aging<sup>2</sup>.

Overall, CHNA respondents in the Sioux Falls area rated the quality of long-term care, nursing homes, and senior housing as good (average score=3.37); however, one in five respondents rated the quality as poor or fair (20%). When respondents who rated the quality of long-term care, nursing homes, and senior housing as poor or fair were asked why they did so, responses focused on understaffed facilities and unskilled workers. One respondent summed up the thoughts of many by highlighting a discrepancy in the quality of services (number of staff, quality of food, environment) among people who can afford private pay for long-term nursing homes and those who can only afford state-funded facilities. When CHNA survey respondents in the Sioux Falls area were asked which health care services they would like to see offered or improved in their community, one in four respondents said long-term care (25%).

Local Asset Mapping	
Long-Term Care resources	Home Care/Respite Care resources
<ul> <li>Avera Prince of Peace, 4513 S. Prince of</li> </ul>	Comfort Keepers, 4300 S. Louise Ave.
Peace Place	• Home Instead – 605-274-2273
• Bethany Lutheran Home, 1901 S. Holly Ave.	• Home Style Health Assistance of SF - 605-
• Dow Rummel Village, 1321 W. Dow Rumme	610-8448
St.	• Sanford Home Care, 2710 W. 12th Street
Golden Living Center, 3900 S. Cathy Avenue	• Sanford Home Medical Equipment, 2710 W.
• Good Samaritan, 401 W. 2nd St.	12th Street
• Luther Manor, 1500 W. 38th St.	

<sup>2</sup> The Urban Institute, Urban Wire: Aging. Available at https://www.urban.org/urban-wire/topic/aging

Southridge Healthcare, 3600 S. Norton	• SD Dept. of Human Services respite care
Avenue	program, 3800 E. Hwy. 34, Pierre
	• Synergy Home Care, 108 E. 38th St.
Assisted Living resources	

- Avera Prince of Peace, 4513 S. Prince of Peace Place
- Cayman Court, 4101 W. Cayman Street
- Dow Rummel Village, 1321 W. Dow Rummel St.
- Edgewood Vista, 3409 E. 5th St.; 3401 W. Ralph Rogers Rd.
- Good Samaritan Society, 1722 & 3901 S. Marion Rd.
- Green Leaf, 3409 E. 5th St.
- Inn on Westport, 4000 S. Westport Ave.
- Meadows on Sycamore, 130 N. Sycamore
- Prairie Crossings, 1800 S. Dorothy Avenue
- Primrose Retirement Community, 7400 S. Louise Ave.
- Stoney Brook Suites, 4501 E. Pampas Place
- Trail Ridge, 3408 W. Ralph Rogers Road
- Washington Crossing, 4709 E. 6th Street
- Waterford, 111 W. 17th St.

#### **Public Transportation**

Transportation systems help ensure that people can reach everyday destinations, such as jobs, schools, healthy food outlets, and healthcare facilities, safely and reliably. Public transportation services play an important role for people who are unable to drive, people without access to personal vehicles, children, individuals with disabilities, and older adults<sup>3</sup>.

CHNA respondents in the Sioux Falls area rated community access to daily transportation as good (average score=3.10); however, 30 percent of respondents rated access to daily transportation as poor or fair – with the average score being the second lowest rating among community health issues in the Sioux Falls area, after affordable housing. When respondents who rated community access to daily transportation as poor or fair were asked why they did so, responses focused on limited bus routes and hours of operation. Respondents added that there are additional difficulties for seniors and those with disabilities to manage existing public transit options. Respondents also indicated that public transportation options outside the core metro are scarce, if available.

Local Asset Mapping	
Transportation resources	Transportation resources
• Bowden Youth Center, 430 W. 11th Street	• Sioux Empire Wheels to Work, 805 E. Pam
• Calvary Episcopal Cathedral, 500 S. Main	Rd.
Ave. (gas assistance)	• Sioux Falls Immunization Coalition, 300 S.
• Center of Hope, 225 E. 11th St., (low cost bike	Phillips Ave.
for work; bike repair)	• Sioux Falls Wheelchair Transit Plus, 123 W.
• Disabled American Veterans, 1519 W. 51st	43rd St.
Street	<ul> <li>Siouxland Paratransit Services, 208 N. Detroi</li> </ul>
<ul> <li>Elite Taxi, 2915 E., Bragstad Drive</li> </ul>	Avenue
<ul> <li>Pass-It-On – 605-367-4217 (bus passes)</li> </ul>	• Wheelchair Express, 614 N. Kiwanis Avenue
<ul> <li>Project C.A.R., 327 S. Dakota Ave.</li> </ul>	• Workers on Wheels (WOW), 230 W. 46th St.
• Sioux Area Metro (SAM), 120 E. 11th Street	

<sup>&</sup>lt;sup>3</sup> Centers for Disease Control and Prevention, Office of the Associate Director for Policy and Strategy, Population Health and Healthcare Office. Available at https://www.cdc.gov/policy/hst/hi5/publictransportation/index.html.

#### Affordable Housing

There is a strong and growing evidence base linking stable and affordable housing to health. As housing costs have outpaced local incomes, households not only struggle to acquire and maintain adequate shelter, but also face difficult trade-offs in meeting other basic needs. When the majority of a paycheck goes toward the rent or mortgage, it can be difficult to afford doctor visits, healthy foods, utility bills, and reliable transportation to work or school. This can, in turn, lead to increased stress levels and emotional strain.

CHNA respondents in the Sioux Falls area rated the availability of affordable housing in their community as less than good (average score=2.75) and lower than any other community health issue. When asked to explain why they rated community access to affordable housing the way they did, CHNA respondents suggested there is limited housing available in the Sioux Falls market area that is affordable. Respondents added that units which may be affordable are often lower quality and undesirable.

CHR data suggest that 11 percent of households in the Sioux Falls area have severe housing problems (i.e., overcrowded, high housing costs, lack of kitchen facilities, or lack of plumbing facilities) and 9 percent of households spend at least 50 percent of their household income on housing costs – both rates are similar to the comparison group average.

### **IMPLEMENTATION PLAN**

#### **Priorities**

Upon completion of the multipronged assessment process as detailed above, three health needs were identified by consensus of CHNA assessment coalition partners.

- 1. Access to care
- 2. Chronic disease prevention
- 3. Mental health and addiction

Consensus was based upon all factors, including primary and secondary data, input from the community, scalability of current hospital and public health programs, and resources to address the identified needs efficiently and effectively. All significant identified needs not addressed in the implementation plan were shared with other community partners for action. Sanford USD Medical Center will continue to partner with our local CHNA coalition partners, Avera Health, the VA Hospital, and the City of Sioux Falls Public Health Department to address significant health needs in our community in 2022 and beyond.

#### **Priority 1: ACCESS TO CARE**

#### **Current Activities:**

Financial counselors are available to help patients who need free or discounted care. Sanford Health Plan options can also be reviewed for those seeking affordable health insurance coverage. Walk-ins, video visits, e-visits, online scheduling, and same-day access are available at all primary care locations. Sanford USD Medical Center provides nurse case managers in the emergency department to support complex patients who access care in this setting, working with the multidisciplinary team to support the needs of the individual. Behavioral health care access has been enhanced with the recruitment of additional providers and placing behavioral health triage therapists in all primary care clinics.

#### **Projected Impact:**

Improve community access so care is available and affordable for all

Actions/Tactics	Measurable Outcomes & Timeline	Resources to be Committed	Leadership	Community partners/ collaborations (if applicable)
-Advocate for	-On ballot by	-Financial	-Public Policy	-Coalition
Medicaid expansion through ballot initiative	2022, reduced uninsured and increase in Medicaid population	support -Marketing	team -Paul Hanson	partners -SDAHO
-Promote Sanford Health Plan as affordable insurance alternative -Support efforts to identify subsidies and other cost reductions	-Decrease in uncompensated care, higher enrollment in health plan	-Sanford Health Plan Medicare supplement will be offered	-Sanford Health Plan team	-Independent insurance agents

#### Goal 1: Increase access to and awareness of affordable care options

#### Goal 2: Improve access through virtual care options

Actions/Tactics	Measurable Outcomes & Timeline	Resources to be Committed	Leadership	Community partners/ collaborations (if applicable)
-Expand primary care access through virtual care	-Number of primary care virtual visits	- Investments in virtual care	-Medical, operational, and nursing executives	
-Educate patients on MyChart capabilities for virtual visits, E-visits, and messaging	-MyChart utilization data -Brand awareness -E-visit utilization	-Marketing	-Sanford corporate and market leadership	-City and state leaders -Philanthropic partners
-Increase awareness of My Sanford Nurse resource	-Number of contacts	-Marketing	-Nursing executives	

#### **Priority 2: CHRONIC DISEASE PREVENTION**

#### **Current Activities:**

Sanford USD Medical Center takes an integrated approach to disease prevention. Sanford promotes the importance of having a primary care provider and offers screening opportunities for early detection and intervention of chronic disease. Sanford provides nurse case managers, dieticians, and behavioral health therapists, among other resources, to holistically address patient needs. Sanford provides a variety of community education opportunities. Sanford Dieticians give nutrition education presentations to employees of Sioux Falls businesses. Sanford provides fitCare classes for childcare providers in the region and the Sanford fit program is available in area schools and online. Sanford also works in partnership with the Sioux Falls Health Department on numerous health promotion programs.

#### **Projected Impact:**

Improved chronic disease management and reduction of obesity

Goal 1: Broaden communit	y awareness of the importance of	primary and preventative care
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Actions/Tactics	Measurable Outcomes & Timeline	Resources to be Committed	Leadership	Community partners/ collaborations (if applicable)
-PCP campaign	-Greater attribution to PCPs -Fewer patients 'not receiving care in previous year' in next CHNA survey -Primary care volume growth	-Marketing -Provider recruitment	-Sanford Clinic leadership	-Community business and real estate providers
-Increase preventative screenings, mammograms, and immunizations	-Number of screening events -Number of tests -Number of immunizations -Performance improvement plans	-Continued investments in Quality structure -Investment in mobile screening units	-Sanford Quality team	-Retail pharmacies -Nursing schools -Community health nurses

### Goal 2: Improve care for children at risk for obesity

Actions/Tactics	Measurable Outcomes & Timeline	Resources to be Committed	Leadership	Community partners/ collaborations (if applicable)
-Promote healthy eating via parent and child education -Facilitate referrals to additional services as needed	-Number of referrals to dietician services - Performance improvement plan	-Well-child visits & sports physicals -RN Health Coaches -Dieticians -Athletic sponsorship -Resources available at Sanford wellness centers, Pentagon, Fieldhouse, etc.	-Sioux Falls executive team	-Feeding SD -City of Sioux Falls -Local schools
-Partner with local schools and childcare centers to expand impact of the Sanford fit program	-Number of participating schools and childcare centers -Total number of children impacted	-Online program -In-person presentations and activities	-Marketing team	-Local schools -Childcare centers

-Ensure children	-Improved	-Financial support of	-Sioux Falls	-Feeding SD
have consistent	CHNA survey	community centers	executive	-United Way
access to healthy	data		team	-City of Sioux
foods				Falls
				-Local schools
				-Backpack
				programs

#### **Priority 3: MENTAL HEALTH and ADDICTION**

#### **Current Activities:**

Sanford has recruited both adult and child psychiatry providers to increase the size of the current Sanford Psychiatry group. A Licensed Addiction Counselor is also available to provide outpatient addiction/chemical dependency care. Sanford places behavioral health triage therapists in all primary care clinics to provide immediate access to mental health screening as need is identified. Sanford also invests in 24/7 access to inpatient mental health counselors and psychiatry and psychology. Sanford has been a key partner in the community behavioral health initiative which established The Link Community Triage Center in 2021. The Link offers an innovative approach to address gaps in critical services for people living with mental health and substance abuse challenges.

#### **Projected Impact:**

Improve care management for residents suffering from substance abuse and mental health issues

Actions/Tactics	Measurable Outcomes & Timeline	utcomes Resources to be Committed		Community partners/ collaborations (if applicable)
-Develop robust resource availability during non-traditional hours to reduce ED utilization	-Reduction of time in ED for mental health services	-IHTs at walk- in, urgent care sites -Virtual care resources -Provider recruitment	-Sioux Falls executive team	-The Link -Avera Behavioral Health -SD State Hospital (Yankton)
-Leverage virtual care initiative toward behavioral health services	-Increase in overall outpatient psychiatry volumes	-Virtual care center development -Provider recruitment	-Corporate and Sioux Falls executive teams	-City of Sioux Falls -State and local broadband expansion
-Continue to actively recruit BH providers to increase availability of timely appointments	-Increased provider numbers	-Provider recruitment -Facilities investment	-Sanford Clinic team	

#### Goal 1: Expand access to timely behavioral health care

Actions/Tactics	Measurable Outcomes & Timeline	Resources to be Committed	Leadership	Community partners/ collaborations (if applicable)
-Coordinate follow- up care, including a treatment plan of action, etc.	-Number of treatment plans -Number of substance use admissions	-RN Care Navigators -Provider recruitment	-Case management team	-The Link -Avera Behavioral Health
-Increase community awareness regarding prevention, intervention, and treatment options	-Number of presentations -Number of social media posts -Media communication	-Mental Health First Aid courses -Marketing -Provider recruitment	-Sioux Falls executive team	-City of Sioux Falls
-Substance abuse prevention education at local schools	-Number of students impacted -Number of participating schools	-RN Health Coaches	-Sioux Falls executive team	-Law enforcement -Local schools

#### Goal 2: Reduce negative impact of addiction and substance abuse on the community

#### **Needs Not Addressed**

The report provided by the NDSU Center for Social Research identified health needs for the Sioux Falls area based on the primary survey data and key secondary data points from the County Health Rankings. Based on all inputs to date, including listening sessions, interviews, and coalition partner discussions, the majority of the needs identified by NDSU are addressed in the 2022-2024 implementation plan with a few exceptions.

**Long-Term Care**: while an important community issue, long-term care is not included in the 2022-2024 implementation plan as it was considered a lower priority for purposes of the Community Health Needs Assessment. Sanford Health and the Good Samaritan Society continually and actively work to improve access to affordable senior care on an ongoing basis. With senior living facilities in the community, throughout South Dakota, and in other states, our organization is firmly committed to providing high quality, affordable care for seniors.

Sanford providers also work to keep seniors healthy and living independently as long as possible. One program that assists in transitioning a patient from the medical center to home is the transitional nursing program. At Sanford USD Medical Center in Sioux Falls, Advanced Practice Providers (APP) and experienced nurse case managers provide nursing care to support complex patients for a defined period after discharge from the hospital, usually 4 weeks. The patient is referred and assessed prior to discharge to assure that early identification and response to health risks is planned. This is a multidisciplinary approach working with the health care team. Services provided include:

- Home visit soon after discharge
- Medication review
- Health status monitoring
- Provide/reinforce discharge education
- Assures follow-up appointments are made and accessible to the patient
- Telephone encounters are provided to continue monitoring and provide support
- Additional home visits are made based on patient need
- The nurse coordinates care with patients provider and the team
- The transition nurse provides a warm hand-off to the clinic and provider at the end of the transition period
- Research has demonstrated a reduction in readmission, decreased cost, decreased length of stay

Asset mapping on page 20 of this report details the variety of community resources available to assist residents in need of long-term care services. Sanford Health will share assessment results with relevant local partners as needed and will also continue to work with our local health assessment coalition group as appropriate to address this need.

**Public Transportation:** while an important community issue, public transportation is not included in the 2022-2024 implementation plan as other organizations, including those listed in the asset map, are addressing the need and the need is a lower priority compared to other areas for purposes of the CHNA. Sanford Case Management and Social Work screens patients and provides taxi vouchers where needed. Sanford also provides vouchers to help support the transportation needs of patients. Lyft, taxi services and the Downtown Sioux Falls Trolley are available to serve patients.

Asset mapping on page 21 of this report details the variety of community resources available to assist residents in need of public transportation services. Sanford Health will share assessment results with relevant local partners as needed and will also continue to work with our local health assessment coalition group as appropriate to address this need.

**Affordable Housing:** while an important community issue, affordable housing is not included in the 2022-2024 implementation plan as other organizations, including those listed in the asset map, are addressing the need and the need is a lower priority compared to other areas for purposes of the CHNA. Sanford USD Medical Center continues to provide nurse case managers in the emergency department to support complex patients who access care in this setting, working with the multidisciplinary team to support the needs of the individual. The nurse case manager is available to consult with patients who need additional support to manage complex social, health or chronic conditions and provides referrals to resources in the community as appropriate for the assessed needs. The nurse case manager is a broker of services, linking the individual to community-based services including:

- Establishing a primary care provider
- Referrals to mental health and substance abuse resources
- Medication assistance
- Food and housing assistance

Many other community organizations (see asset mapping – page 22) are addressing this issue on an ongoing basis. Sanford Health will share assessment results with relevant local partners as needed and will also continue to work with our local health assessment coalition group as appropriate to address this need.

#### **Priority 1: Workforce**

Goal: A skilled labor force is enhanced and growing in the Sioux Falls community

Strategy:

- Recruit, support and develop a skilled workforce.
- Increase clinical and non-clinical internships from higher education organizations.
- Sponsor individuals who are pursuing the LPN program.
- Support students who are enrolling in health careers through the Heart of Tomorrow.
- Recruit and support Residents and Fellows.

In 2020, Sanford USD Medical Center (SUSDMC) continued a multi-faceted approach to improving the economic well-being of our community. This included partnerships with higher education organizations for internships, LPN sponsorships, scholarships, residencies, and fellowships along with support for our workforce during the COVID pandemic.

- In 2020, we sponsored 55 LPNs and 60 MAs (six through our traditional sponsorship and 54 through MedCerts) to help meet patient care demands in our ambulatory locations. The Certified Medical Assistance Program includes coverage of tuition with a 2-year work commitment.
- The Sanford Sons and Daughters program has 273 individuals in physician education who are in medical school, residency, or fellowship and who receive support including scholarships.
- The Heart of Tomorrow program provided scholarships of \$1,000 each to 100 high school or college aged children of Sanford employees.
- Sanford solely supports residency education in pediatrics and general surgery and fellowship education in cardiology and interventional cardiology, and partner with other health care facilities on residencies in internal medicine, pathology, transitional year, and family medicine. All programs continue at full capacity.
- Sanford implemented a nurse residency program which is a 12-month training program designed to support the nurse resident's transition from the role of student nurse to professional registered nurse. To date, 409 RNs have graduated from the program with another 620 in progress. We also support a student nurse internship program, a 10-week summer program available to students in their final nursing semesters offering hands-on experience and guidance from a preceptor.
- Classrooms to Careers (C2C) Sanford partnered with local organizations to launch the C2C pilot program for Sioux Falls high school students in 2019-2020. Our goal is to make post-secondary education a reality for underserved, low income, and/or ethnically diverse students. Students earn dual credit, paid by Sanford. Courses are taught by Southeast Technical College (STC) instructors, and funding includes a coordinator to work with students on post-secondary career plans. The Sanford Aspire Career Center also provides career counseling support and access to post-secondary education sponsorships for high-need roles (such as MA, LPN, Surgical Tech etc.). We currently have 37 students in this program with plans to grow this exponentially each year.

Sanford Health is proud to have maintained our workforce through COVID with no furloughs to date. Additionally, we created the Sanford Family Stability plan to support our workforce. The plan offered a one-time stability payment and covered health insurance premiums to those most impacted by changes to our operations caused by the pandemic. In addition, the Sanford Family rallied to help their own by making considerable contributions to the PTO donation bank and Employee Crisis Fund to offer additional help where it was needed most.

To meet the increased need for clinical care team members throughout the pandemic, a just-intime skills training program was developed. Customized curriculums provided employee crosstraining allowed staff to work outside of their current role confidently and safely. We also hired additional nursing staff where needed during peak COVID surge. Finally, through a partnership with the Sioux Falls School District and Avera Health, Sanford provided childcare for essential workers to support our workforce and maintain adequate levels of staffing for health care personnel and first responders during the COVID-19 challenges.

#### **Priority 2: Behavioral Health and Mental Health Access**

Goal: Behavioral health and mental health services are available and have capacity for patients and community members

Strategy:

- Integrated Health Therapists are embedded into primary care centers.
- A formal recruitment plan is in place for behavioral health specialty services.
- PHQ-9 scores are improved for patients with depression.
- Explore the feasibility of a community triage program.

Sanford Sioux Falls continues to refine our operational model to ensure availability of necessary services for patients and community members to meet growing behavioral and mental health services needs. Integrative Health Therapists continue to be embedded in each primary care clinic. PHQ-9 depression remission performance consistently exceeds the national benchmark – ensuring consistent screening for depression across the patient population. The integrated care model provides bedside rounding/counseling during inpatient stays and crisis assessments/behavioral interventions by the Mental Health team at SUSDMC. Behavioral Health telehealth utilization also increased.

The behavioral and mental health provider team continues to grow. The Psychiatry and Psychology Clinic currently has 25 total providers, including 5 physicians (2 adult psychiatrists and 3 child and adolescent psychiatrists); 6 APPs; 6 Psychologists and 8 Behavioral Health Therapists.

The region has 24 Integrated Health Therapists within primary locations including 7 IHTs in Sioux Falls Primary Care Clinics; 2 IHTs covering specialty clinics; 1 IHT covering Oncology; 11 Network IHTs and 3 Behavioral Health Therapists (BHTs) embedded in primary care locations in Sioux Falls. Additionally, 2 IHTs have recently been hired and will be starting on April 11, 2021. Both will work in Sioux Falls.

Sanford has collaborated with the City of Sioux Falls, Minnehaha County, and Avera Health to create the Community Triage Center (CTC). The (CTC) will be a voluntary and involuntary commitment (IVC) mid-level care alternative for those with substance/alcohol abuse with potential mental illness co-morbidities who are not violent in their behavior. The CTC is scheduled to open 2nd Quarter 2021.

Finally, employee well-being resources have been greatly augmented during the past year. In addition to a robust employee assistance program, the Clinician Well-Being Program has been expanded to support clinicians, residents, and fellows as they face unique challenges and stress often inherent to their work. The program resources available include on-demand, a WorkLife Concierge virtual assistant available 24/7, as well as access to peer coaching, mentoring, and free, confidential counseling.

#### **CONTACT INFORMATION**

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

Anyone wishing to receive a free printed copy, obtain information on any topic brought forth in the report, or offer public comments for consideration during the implementation plan or future Community Health Needs Assessment work, please contact us at

Community.Benefits.Sanford@SanfordHealth.org or visit https://www.sanfordhealth.org/contact-us.

#### Survey Responses

Survey responses are available through an online dashboard at https://www.sanfordhealth.org/about/community-health-needs-assessment

#### Expanded Demographics<sup>4</sup>

At 254,262 the combined population of Lincoln and Minnehaha County account for nearly 29% of South Dakota's total population, and both counties have a growth rate significantly higher than the SD growth rate. Additionally those counties have a much higher population density than the state, Minnehaha County being the most dense at 210 people per square mile. Lincoln, Turner and McCook Counties are less diverse than Minnehaha County and the state as over 94% of their residents are White. Minnehaha County has the highest proportion of Black or African American residents at 6.1%, and all counties have a lower American Indian population than the whole of South Dakota, which is 9%.

Home values and rent costs are the highest in Lincoln County, followed by Minnehaha County, the state of SD, McCook County, and Turner County respectively. The counties generally have more computers per household and more internet access per household on average than the state average, with the exception of Turner County. The counties and the state have a high school graduation rate above 91% with the exception of McCook County at 88.7%. Lincoln and Minnehaha County have secondary education rates upwards of 33% while McCook and Turner County have secondary education rates below 25%. The state total secondary education rate is 28.8%

Employment rates are higher in the counties than in the state by a sizeable margin, with the exception of Turner County. The counties also have a higher median annual income with Lincoln County leading at over \$82,000. The counties have a lower poverty rate with Lincoln County having the lowest of the group.

	McCook County, SD	Turner County, SD	Lincoln County, SD	Minnehaha County, SD	South Dakota
Population estimates, July 1, 2019, (V2019)	5,586	8,384	61,128	193,134	884,659
Population estimates base, April 1, 2010, (V2019)	5,618	8,349	44,823	169,474	814,198
Population, percent change - April 1, 2010 (estimates base) to July 1, 2019, (V2019)	-0.6%	0.4%	36.4%	14.0%	8.7%
Population per square mile, 2010	9.8	13.5	77.7	210	10.7
Persons under 5 years, percent	8.2%	6.2%	7.2%	7.5%	6.9%
Persons under 18 years, percent	27.8%	24.4%	27.7%	25.2%	24.5%
Persons 65 years and over, percent	18.9%	21.4%	13.4%	13.5%	17.2%
White alone, percent	96.2%	96.8%	94.2%	86.2%	84.6%
Black or African American alone, percent	0.7%	0.6%	1.8%	6.1%	2.3%

<sup>&</sup>lt;sup>4</sup> https://www.census.gov/quickfacts

American Indian and Alaska Native alone, percent	1.5%	1.1%	0.7%	2.8%	9.0%
Asian alone, percent	0.2%	0.2%	1.5%	2.1%	1.5%
Native Hawaiian and Other Pacific Islander alone, percent	0.1%	###	0.1%	0.1%	0.1%
Two or More Races, percent	1.3%	1.2%	1.8%	2.5%	2.5%
Hispanic or Latino, percent	4.3%	2.6%	2.4%	5.1%	4.2%
White alone, not Hispanic or Latino, percent	92.9%	94.7%	92.2%	82.0%	81.5%
Median value of owner-occupied housing units, 2015-2019	\$137,800	\$122,400	\$228,800	\$186,800	\$167,100
Median gross rent, 2015-2019	\$575	\$661	\$963	\$813	\$747
Households with a computer, percent, 2015-2019	89.5%	83.0%	95.4%	91.9%	88.5%
Households with a broadband Internet subscription, percent, 2015-2019	80.6%	74.0%	91.0%	85.4%	80.7%
High school graduate or higher, percent of persons age 25 years+, 2015-2019	88.7%	92.0%	94.8%	92.5%	91.7%
Bachelor's degree or higher, percent of persons age 25 years+, 2015-2019	24.1%	23.7%	37.6%	33.1%	28.8%
With a disability, under age 65 years, percent, 2015-2019	7.2%	8.5%	6.1%	7.3%	8.1%
Persons without health insurance, under age 65 years, percent	12.3%	10.7%	6.9%	11.0%	12.2%
In civilian labor force, total, percent of population age 16 years+, 2015-2019	70.4%	66.4%	74.9%	74.4%	67.7%
Median household income (in 2019 dollars), 2015-2019	\$61,507	\$59,242	\$82,473	\$61,772	\$58,275
Per capita income in past 12 months (in 2019 dollars), 2015-2019	\$29,020	\$30,677	\$40,059	\$31,716	\$30,773
Persons in poverty, percent	9.2%	10.1%	3.8%	8.7%	11.9%
Total employer establishments, 2019	187	243	1,731	5,834	27,108
Total employment, 2019	932	1,419	21,375	120,386	358,943

CHNA Survey Questionnaire The survey tool was delivered online via Qualtrics. The survey questions are presented below as a reference.

RESIDENCE					
Please enter yo Please enter yo					
What Is your cu			-		
COMMUNITY					
	rate the qualit	y of HEALTH C	ARE available in	your communi	ty?
Poor	Fair	Good	Very Good		Don't Know
0	0	0	0	0	0
in your opinion,	, what is the m	ust important i	HEALTH CARE Iss	ue your comm	unity faces?
low would you	rate the qualit	y of LONG-TER	M CARE, NURSIN	IG HOMES & S	ENIOR
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#### How would you rate the availability of AFFORDABLE HOUSING In your community?

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

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

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

Why did you give it that rating?

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

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

Why did you give it that rating?

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

#### How would you rate the ENVIRONMENTAL health of your community?

(clean air, clean water, etc.)

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

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

	Poor O	Fair O	-	Very Good O	Excellent O	Don't Know O
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Why did you give it that rating?

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

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

Why did you give it that rating?

#### YOUR HEALTH AND WELLNESS

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

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

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

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

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

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

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

- O Heart Care
- O Labor and Delivery
- O Long-Term Care / Nursing Homes
- O Orthopedics and Sports Medicine
- O OBGYN / Womens' Care
- O Pediatrics / Childrens' Care
- O Walk-in / Urgent Care
- O Other (please specify):

#### YOUR HEALTH CARE USAGE

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

O Yes O No

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

- O Within the past year
- O Within the past 2 years
- O Within the past 5 years
- O More than 5 years ago O Never

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

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

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

O Other (please specify):

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

Poor	Fair	Good	Very
0	0	0	

y Good 0

Excellent 0

Why did you give it that rating?

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

O Yes O No O Unsure

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

O Cost/Inability to Pay

O COVID-19

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

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

O Other (please specify):

#### TRAVELING FOR CARE

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

O Yes O No

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

O Immediate / faster appointment

O Cost or insurance coverage

providers

O On vacation / traveling / snowbirds

O Don't feel welcomed or valued by local

City \_\_\_\_\_ State \_\_

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

- O Referred by a physician
- O Better / higher quality of care
- O Medical emergency
- O Needed a specialist / service was not available locally
- O Second opinion
- O Other (please specify)
- YOUR HEALTH INSURANCE

#### Do you currently have health insurance?

O Yes O No

#### Please Indicate the source of your health Insurance coverage.

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

O Other (please specify)

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dba Sanford USD Medical Center EIN# 45-0227855

#### DEMOGRAPHICS

#### What is your biological sex?

O Male O Female

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

O Yes O No

How many people live in your house, including yourself?

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

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

O Yes O No

What Is your race? (Select all that apply)

O American Indian or Alaska Native

O Caucasian or White

O Asian

O Native Hawaiian or Pacific Islander

O Black or African American

O Other (please specify)

#### How long have you been a US Citizen?

O I am not a US citizen

Are you planning to become a US citizen? O Yes O No O Prefer not to answer

0 0 - 5 years 0 6 - 10 years

O More than 10 years

What language is spoken most frequently in your home? \_

#### What is your current marital status?

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

#### Which of the following best describes your current living situation?

O House (owned)

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

#### What is your primary mode of daily transportation?

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

O Other (please specify)

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

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

#### Your current employment status is best described as:

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

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

#### What is your total household income from all sources?

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

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