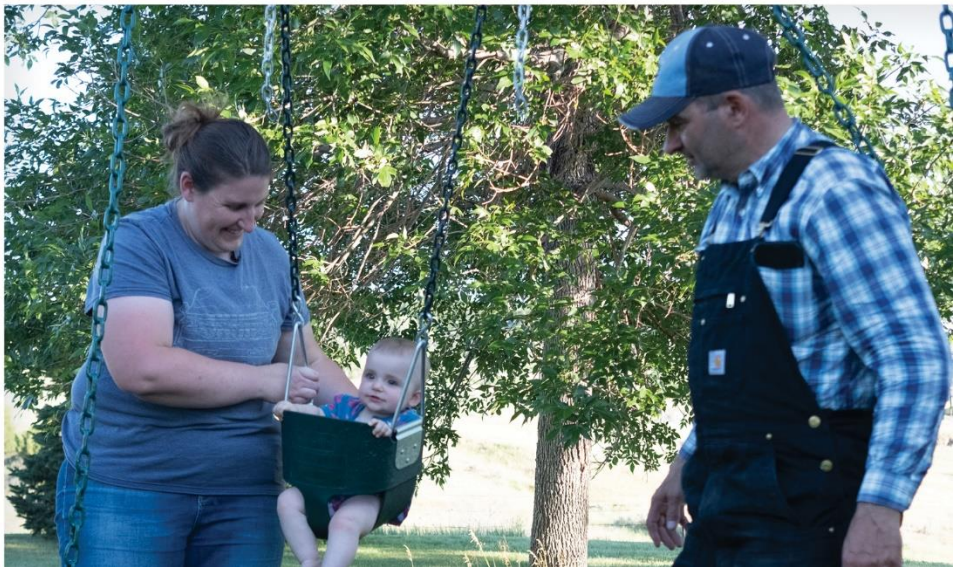
Community Health Needs Assessment

SANFORD VERMILLION MEDICAL CENTER
2025-2027



Dear Community Members,

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

The report and implementation plan that follows will guide our work over the next three years and builds upon previous progress made in our community.

The Community Health Needs Assessment is a rigorous process in which we sought input from community members, leaders, and organizations including public health. Additionally, Sanford Health collaborated with the North Dakota State University Center for Social Research to incorporate additional data analysis and provide an independent assessment. Together, these elements paint a picture of the current needs facing the community, opportunities for partnership with area businesses and organizations, and resources available to address identified needs.

On behalf of the Sanford Vermillion Medical Center team, thank you for your continued support of the Community Health Needs Assessment process.

Sincerely,

Veronica Schmidt
President and Chief Executive Officer
Sanford Vermillion Medical Center

BACKGROUND

Community Description

The Sanford Vermillion Medical Center is located in Vermillion, SD, a community of over 11,700 people. Located in the Southeast corner of South Dakota, Vermillion lies atop a bluff on the Missouri River, and offers easy access to and from surrounding areas. The city of Vermillion was incorporated in 1877 but has been home to Native Americans for centuries. Before the city's founding it was visited by Lewis and Clark. The University of South Dakota (USD) was founded in Vermillion in 1862 and currently enrolls over 10,000 students. USD is home to South Dakota's only law, medical, and accredited business schools.

Vermillion boasts small town charm and big town amenities, including a vibrant artistic community, division one college sports, and economic opportunities. The City's major employers include the University of South Dakota, Sanford Health, Sodexo, Walmart, Hy-Vee, Polaris, City of Vermillion, and more.

The community as defined for purposes of the Community Health Needs Assessment includes Clay and Union Counties in South Dakota and represent a majority of the volumes to the Sanford Vermillion Medical Center. No populations were intentionally excluded during the process of defining the community or within the CHNA process. Demographic detail for the counties is included in the appendix.

Partners

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

Sanford Health

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

System Partners

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

Vermillion Partners

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

- Julie Girard, Improvement Advisor, Sanford Vermillion Medical Center
- Cindy Benzel, Ancillary Services Manager, Sanford Vermillion Medical Center
- Janice McGuire, Nursing and Clinic Services Director, Sanford Vermillion Medical Center
- Rachel Olson, Clinic Director, Sanford Vermillion Medical Center, Vermillion School Board Member
- Lisa Wood, Public Health
- Lindsey Jennewein, Vermillion City Council Member
- Veronica Schmidt, Chief Executive Officer, Sanford Vermillion Medical Center
- Emmanuel Akinwande, Operations Director, Feeding Vermillion
- Kelsey Collier-Wise, Director, United Way of Vermillion
- Katherine Price, University of South Dakota, DHF, Vermillion City Council Member
- Noah Benson, FARM Medical Student, Sanford Vermillion Medical Center
- Jill Christopherson, Executive Assistant, Sanford Vermillion Medical Center

Sanford Vermillion Description

Sanford Vermillion Medical Center is a 25-bed, acute care Critical Access Hospital serving 25,000 people in Clay and Union counties in southeast South Dakota and a few counties across the Missouri river in Nebraska. Services provided include trauma/emergency medicine, therapies, mammography, and radiology.

Sanford Health partnered with Dakota Hospital Foundation in Vermillion on a $12 million remodeling and expansion of Sanford Vermillion Medical Center. Work included remodeling several areas as well as removing a 1935 building and replacing it with an expanded outpatient service center with enhanced technology. The project was announced in 2014 and was completed in the fall of 2017. Sanford Health assumed ownership of the infrastructure, including building projects and technology at the conclusion of the project.

Sanford Vermillion also includes an outpatient clinic, a 66-bed nursing home, and 23-unit assisted living center. The clinic provides over 24,000 patient visits annually and includes the USD student health contract population. Sanford Vermillion employs nine clinicians, including physicians, advanced practice providers, integrated health therapists, and 250 employees.

CHNA Purpose

The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues. Findings from the assessment serve as a catalyst to align expertise and develop a Community Investment/Community Benefit plan of action. There is great intrinsic value in a community health needs assessment when it serves to validate not-for-profit status and create opportunity to identify and address public health issues from a broad perspective. 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. It also serves to support progress made toward organizational strategies.

Regulatory Requirements

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

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

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

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

The community health needs assessment includes a process to identify community resources available to address identified and prioritized needs. Hospitals are to address each assessed need or explain why they are not addressing a need. Once needs have been identified and prioritized, hospitals are required to develop an implementation strategy for each. The strategies are reported on the IRS 990 and a status report must be provided each year on IRS form 990 Schedule H.

Finally, hospitals are required to be transparent with the findings and make the written CHNA report available to anyone who requests it. All CHNA reports and

implementation strategies are housed on the Sanford website at www.sanfordhealth.org. Hospitals must keep three cycles of assessments on their website.

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

CHNA Process

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

Limitations

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

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

Following the completion of the 2022-2024 report, Sanford Health determined that the survey collection process was an area for improvement. Efforts to improve representation across demographics is a focus for the current and future cycles.

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

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

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

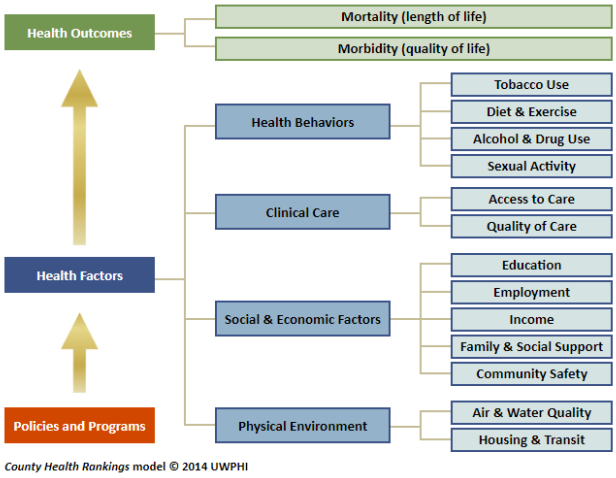
Community and Stakeholder Survey

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

The survey was the first of multiple efforts to engage community stakeholders and elected officials with knowledge and connections amongst medically underserved, low income, or minority populations. Stakeholders were sent the survey and asked to complete the instrument and then forward the survey to their respective populations for greater involvement. Additional investments to increase involvement in the survey are noted in the "Limitations" section of the report.

Survey data for the local community should be considered directional and best utilized in conjunction with additional data. A total of 296 respondents from the CHNA area completed the survey. Promotion investments by the system yielded a total of 9,714completed surveys from across the Sanford footprint, an increase from 6,748 the previous cycle. The responses generated 48,643 open-ended responses and 1.76 million pieces of data (cells).

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



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

- Survey data was stratified into representative groups based upon population: large urban communities, medium sized communities, and rural communities. The three groups were analyzed separately. Vermillion is included with Aberdeen, SD; Bemidji, MN; Thief River Falls, MN; and Worthington, MN.
- To identify community health care needs, each community's score by question was compared to the average stratified composite of the comparative group. For example, if the composite stratified system-wide average score is 4 and an individual community's average response was 2.5, which would suggest an issue of concern and a potential community health care need to be highlighted in the summary findings.
- Upon determination of a potential strength or need, County Health Rankings (https://www.countyhealthrankings.org/) and responses from open-ended questions provided additional insights into the drivers of the respective needs.
- A similar methodology was also used to provide additional insights into findings from County Health Rankings data with relevant health needs highlighted in the survey findings.
- Health needs identified through either the survey or County Health Rankings data but not both were also included in the findings.
- The Center for Social Research validates the findings of the primary research by engaging at least two internal reviewers. Each reviewer has their own technique and strengths to review the findings; however, they check for accuracy in the data by reviewing the code/syntax, the output, the correct representation of the data in the report, verbiage, consistency, context, and overall readability. Both reviewers also supported previous CHNA reports.

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

A positive development since the previous CHNA report is the integration of findhelp.com into the Sanford Health digital ecosystem. In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health-related social care needs. The system is

available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to Sanford Health patients and is available on Sanfordhealth.org and in MyChart. Patients can receive information in the format that is meaningful to them (electronic or paper) and in their preferred language. The tool is used to identify local resources as part of the community asset mapping section of this report.

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

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

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

At the end of the meeting the hospital administrator proposed the following health needs to be addressed within the Implementation plan – Improving Access to Healthcare Providers and Healthy Living in the Community. Administrator recommendations are based on all factors, including primary and secondary data, input from the community stakeholder meeting, and scalability of current hospital programs and resources to address the identified needs efficiently and effectively. All identified needs not addressed in the implementation plan were shared with other community partners for action.

COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

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

The top health needs presented below were identified through a mix of primary and secondary research conducted by the North Dakota State University Center for Social Research, which was commissioned by Sanford Health to analyze the data, and Sanford Health. Priority was given to the key topics ranked lowest by community survey with further analysis provided through secondary research. Areas of focus that may not have been raised by the community survey but shown to be an area of focus through secondary research, were also included.

Each health need includes the drivers behind its inclusion in the list, including qualitative survey results, qualitative responses from the survey, and stratified results from the enterprise results that provide clarity to the local discussion. Secondary research from County Health Rankings and other sources were also provided. Insight from the community stakeholder meetings was included as a valuable tool for understanding the needs, and importantly, how to address each issue

For the purposes of this assessment, the Vermillion market area is defined as the combination of Clay and Union counties in South Dakota. The community health summary and identified health needs presented below were identified through a mix of primary and secondary research. Priority was given to the key topics rated lowest by respondents of the community survey, with further analysis provided through secondary research using the 2023 County Health Rankings (CHR) data. Areas of focus that may not have been raised by the community survey but shown to be an area of focus through secondary research, are also included. To further assist in identifying community health needs, survey and CHR data were collected for similar-sized market areas served by Sanford Health. Similar-sized market areas identified for and included in this analysis include Aberdeen, SD; Bemidji, MN; Thief River Falls, MN; Vermillion, SD; and Worthington, MN. For each measure, averages were calculated for each of the market areas and for the group as a whole for comparison purposes. Context and research provided to explain the importance of a particular health topic were obtained from CHR unless otherwise noted. A total of 296 respondents from the Vermillion area completed the survey.

Community Health Summary

Survey respondents were asked to rate various issues impacting health in their community and issues impacting their personal health and wellness on the following 1 to 5 scale: 1= poor, 2= fair, 3= good, 4= very good, 5= excellent.

Overall, perceptions among survey respondents in the Vermillion area regarding the following community health issues were positive (average score of 3.00 or higher):

- Environmental health (average score= 3.87)
- Community safety (average score=3.71)
- Access to exercise opportunities (average score=3.53)
- Health care quality (average score = 3.43)
- Access to healthy foods (average score=3.39)
- Early child care quality (average score=3.05)

All of these scores for the Vermillion area were higher than the comparison group average.

When asked about their personal health, survey respondents in the Vermillion area rated their current health and wellness as good (average score=3.35) (which is the highest score when compared to similar-sized markets served by Sanford) and their current ability to access health care services as slightly better (average score=3.68) (which is also the highest score among similar-sized markets). CHR data indicates that both Clay and Union counties in South Dakota are among the healthiest counties in South Dakota.

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

Top Health Needs

Access to Health Care Providers
Survey respondents in the Vermillion area rated their own ability to access health care as good (average score=3.68) – a score which is higher than similar-sized communities served by Sanford Health. In addition, most respondents have a primary care provider (85%) and have been in for a routine checkup or screening in the past year (86%). Despite this positive feedback, when respondents were asked about the most important health care issues impacting their community, general access to health care and a shortage of health care providers was the top issue, more so than cost.

When asked if they or a family member had traveled to receive health care services outside of their community within the past three years, 84 percent of respondents in the Vermillion area indicated they had (which is the highest percentage among similar-sized markets served by Sanford). When asked why, most of those who traveled for care indicated that they needed specialty care or the needed services were not available locally (82%), followed by 32 percent who were referred by a physician and 27 percent who traveled for better or higher quality care. According to CHR, in the Vermillion area there are 1,691 people for every primary care physician (a ratio which is higher/worse than the comparison group average), 1,281 people for every dentist (a ratio which is lower than the comparative group average), and 1,884 people per mental health care provider (a ratio which is four times higher than the comparison group average).

Nearly two-thirds (62%) of survey respondents in the Vermillion area indicated that there are health care services they would like to see offered or improved in their community. When these respondents were asked *which* health care services they would like to see offered or improved, most said behavioral and mental health services (53%), followed by dermatology (33%), long-term care and nursing homes (30%), addiction treatment (28%), walk-in/urgent care (26%), family medicine or primary care (21%), cancer care (21%), heart care (20%), and OBGYN/women's care (19%).

Stakeholder meeting participants decided Access to Health Care Providers is a top priority need for the community and for Sanford Vermillion to tackle. When deciding this community need, members discussed that increasing access to providers would help bring access to senior care and quality care. The meeting participants agreed that while there is work currently being done with access, there are still improvements to be made.

Local Asset Mapping	
Mental Health resources: • Sanford Clinic Vermillion MSW & Psychologist Mental Health Therapy Services • USD Student Counseling Center (Cook House), 414 E. Clark St., Vermillion • Vermillion Prevention Coalition, 414 E. Clark St., Vermillion • USD Psych Services Center (for students), 411 E. Clark St., Vermillion • Better Living Counseling, 1120 Valley View Dr, Vermillion • Lewis & Clark Behavioral Health, 200 W. Main, Vermillion • Sunstone Counseling, 5 S. Market St, Vermillion • Hope Therapy & Evaluation Services, 6 W. Main Street • 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 Cir., Sioux falls •Southeastern Behavioral Healthcare, 2000 S. Summit Ave., Sioux Falls	**Health Care Resources:** • Sanford Vermillion Clinic & Medical Center, 20 S. Plum St., Vermillion. Services include: o Sanford Community Care Program o Sanford Medical Home o Sanford Case Managers o Sanford Social Worker • USD Student Health Clinic (has discounted rates offered to students), 20 S. Plum St., Vermillion • Vermillion Medical Clinic, 101 S. Plum, Vermillion • Public Health, 211 W. Main, Vermillion • HeartPrint Home Care, 2610 South Dakota 50, Vermillion • Sanford Home Care/Hospice, 848 E. Cherry St., Vermillion • Sanford Home Medical Equipment, 900 E. Cherry St., Vermillion • Home Medical Supplies: o Davis Pharmacy, 5 W. Cherry St., Vermillion o Walmart Pharmacy, 1207 Princeton Ave., Vermillion o Hy-Vee Pharmacy, 525 W. Cherry St., Vermillion
Substance Abuse resources: • Sanford Clinic Vermillion MSW & Psychologist Mental Health Therapy Services • USD Student Counseling Center (Cook House), 414 E. Clark St., Vermillion • Vermillion Prevention Coalition, 414 E. Clark St., Vermillion • USD Psych Services Center (for students), 411 E. Clark St., Vermillion • Gapp Counseling Service, PO Box 553, Vermillion • Lewis & Clark Behavioral Health, 200 W. Main St., Vermillion • Glory House, 4000 South West Ave., Sioux Falls • Keystone Outreach, 1010 E. 2nd St., Canton	**Substance Abuse Resources Cont**.: •Sioux Falls VA Medical Center, 2501 W. 22nd St., Sioux Falls • Tallgrass Recovery, 27048 S. Tallgrass Ave., Sioux Falls • Bartels Counseling, 7520 S Grand Arbor Ct Ste 145., Sioux Falls • Choices Recovery, 622 S. Minn. Ave., Sioux Falls • Carroll Institute, 310 South 1st Ave., Sioux Falls • Sioux Falls Urban Indian Health, 711 N. Lake Ave., Sioux Falls •Tallgrass Recovery & Sober Living Homes, 27048 Tallgrass Ave., Sioux Falls • BAART Programs Sioux Falls, 2519 W. 8th St., Sioux Falls • Arch Residential Treatment Center, 516 W. 12th St., Sioux Falls **For Help Finding Additional Resources:** https://sanford.findhelp.com/

Access to Affordable Health Care
Cost and the ability to afford needed health care was identified as the top health care concern that survey respondents and their families in the Vermillion area face on a regular basis (and the second leading community health care issue, behind general access). In addition, one in five survey respondents in the Vermillion area indicated that they or a family member needed medical care in the past year but did not receive it (which is slightly lower than the comparison group average). When asked why, the main reason was due to cost (43%). Accessing affordable health care is also a challenge for the 10 percent of people in the Vermillion area who are uninsured, a rate which is similar to the comparison group average.

Adding to the difficulty in accessing affordable health care in the Vermillion area is the economic climate. Survey respondents in the Vermillion area rated the employment and economic opportunities in their community as less than good (average score=2.91), a score which is below the comparison group average. When respondents were asked why they rated these opportunities as they did, respondents acknowledged available job opportunities; however, they are typically entry-level with lower wage options and basic skill set requirements. Respondents also indicated that there are limited career opportunities with a growth trajectory in the mid- to higher-level pay ranges. Even so, CHR data indicate that the Vermillion area has one of the lowest unemployment rates (3.3%), the lowest child poverty rate (11%), and the highest median household income ($69,351) when compared to similar-sized communities served by Sanford Health.

Community meeting members discussed affordable health care and expressed interest in continuing the current efforts with increasing access to affordable health care. Sanford Vermillion is not prioritizing affordable health care as a top issue but has plans to continue with promoting the financial assistance program and providing resources to patients.

Local Asset Mapping	
Health Insurance resources: • Sanford Health Plan, 300 Cherapa Pl., Sioux Falls • Farm Bureau Ins., 846 E Cherry St., Vermillion • State Farm Ins., 16 E. Main, Vermillion • American Family Ins., 112 W. Main, Vermillion • HUB International, 15 E. Main, Vermillion • Financial Assistance – Clay County, 211 West Main St, Vermillion • South Dakota Department of Social Services, 114 South Market Street, Vermillion • VA Health Care, 2501 West 22nd Street, Sioux Falls	**Prescription Assistance programs**: • CancerCare co-payment assistance, 800-813-4673 • Freedrugcard.us • Medsavecard.com • rxgo.com • americasdrugcard.org • Southdakotarxcard.com • mygooddays.org • NORD Patient Assistance Program, rarediseases.org • SD Partnership for Prescription Assistance, pparx.org • Patient Access Network Foundation, panfoundation.org • Pfizer RX Pathways, pfizerrxpathways.com • RXhope.com • Needymeds.org **For Help Finding Additional Resources:** https://sanford.findhelp.com/

Healthy Living
When survey respondents in the Vermillion area were asked about their biggest health care concerns for themselves and their family (concerns faced on a regular basis), chronic health issues were among top concerns (behind affordability and access issues). And the most commonly cited chronic health concerns involved weight, diabetes, and the heart. When survey respondents were asked which health care services they would like to see offered or improved in their community, one-fifth said heart care services (20%). In addition, diabetes is an important marker for a range of health behaviors. CHR data indicate that nearly one in ten adults in the Vermillion area has diabetes (8%) (which is similar to the comparison group average) and one in three adults has obesity (36%) (which is higher than similar-sized market areas served by Sanford). Fortunately, 76 percent of residents in the Vermillion area have access to exercise opportunities – a rate which is higher than the comparison group average.

Regarding tobacco and alcohol usage, CHR data indicate 17 percent of adults in the Vermillion area are smokers (which is one of the lowest rates when compared to similar-sized markets) and 23 percent of adults drink excessively (a rate which is similar to the comparison group average). However, 42 percent of motor vehicle crash deaths in the Vermillion area involve alcohol, a rate which is higher than similar-sized markets served by Sanford Health.

During the stakeholder meeting community members expressed the need for more accessible healthy living options for the community. This was chosen as a top priority need for Sanford Health to address in the Vermillion community, especially with chronic diseases and providing access to necessary resources. Meeting participants also discussed partnerships between organizations to increase access and availability of resources for the community.

<table>
<tr><th colspan="2">Local Asset Mapping</th></tr>
<tr><td>Primary Health Care Providers/Routine Medical Care Resources:
• Sanford Vermillion Medical Center, 20 S Plum St, Vermillion
• Vermillion Medical Clinic, 101 S Plum St, Vermillion
• Veterans Health Administration (VHA), 2501 W 22nd St, Sioux Falls
• South Dakota Urban Indian Health, 1200 N W Ave, Sioux Falls
• USD Student Health Services, 20 S Plum St, Vermillion
•Pharmacies that provide flu shots & vaccinations:
• Hy-Vee Pharmacy, 525 W Cherry St, Vermillion
• Davis Pharmacy, 5 W Cherry St, Vermillion
• Walmart Pharmacy, 1207 Princeton Ave, Vermillion
• Lewis Family Drug, 204 W Main St, Elk Point
• Walgreens, 2020 Broadway Ave, Yankton
• CVS, 3600 S Louise Ave, Sioux Falls</td><td>Dental Resources:
• Vermillion Dental Health, 111 Court Street, Vermillion
• Houska Dental, 1302 E Main Street, Vermillion
• Knutson Family Dentistry, 1714 E Cherry St., Vermillion
• Neighborhood Dental, 711 WE. Cedar/Hwy.46, Beresford
• Horizon Health Yankton Medical & Dental, 920 Broadway Ave Suite 2, Yankton

Chronic Disease Resources:
• Sanford Vermillion Medical Center, 20 S Plum St, Vermillion
• Clay County Community Health Services, 211 W Main St, Vermillion
• South Dakota Department of Social Services, 114 South Market St, Vermillion
• American Diabetes Association – diabetes.org
• American Heart Assoc. – heart.org
• Asthma & Allergy Foundation – aafa.org</td></tr>
<tr><td>Obesity Resources:</td><td>Physical Activity Resources:</td></tr>
</table>

• Sanford Vermillion Medical Center Dietitian, 20 S Plum Street, Vermillion • Hy-Vee Registered Dietitian, 525 W Cherry St, Vermillion • USD Registered Dietitians, 414 E Clark St, Vermillion • Sanford Weight Management Center, 1310 W 22nd St, Sioux Falls • Safe and Smart Weight Loss, Yankton Medical Clinic, 1104 W 8th St, Yankton • Fit to be Well, 5001 Sergeant Rd Ste 375, Sioux City **Healthy Eating Resources:** • Charlie's Cupboard - Center for Continuing Education Room 114, 414 E Clark St, Vermillion • Vermillion Food Pantry, 9 Court Street, Vermillion • Hy-Vee Grocery Store, 525 W Cherry St, Vermillion • Vermillion Area Farmers Market, 511 High Street, Vermillion (Thursdays and Saturdays in the Summer) • Walmart, 1207 Princeton Ave, Vermillion	• Anytime Fitness, 838 E Cherry St, Vermillion • USD Wellness Center, 1031 N University St, Vermillion • Wirth-It Fitness, 115 E Main St, Vermillion • Bluffs Golf Course, 2021 E Main St, Vermillion • Prentis Plunge Pool, 800 E Clark St, Vermillion • Spirit Mound Historic Prairie TRACK Trail, 31148 SD-19, Vermillion • Clay County Park, 31829 460th Ave, Vermillion • Prentis Park, 800 E Clark St, Vermillion • Cotton Park, 501 S Dakota St, Vermillion • Barstow Park, 25 Center St, Vermillion • USD Tennis Courts, 1101 N Dakota St, Vermillion • Baseball and Softball Fields, Vermillion Parks & Recreation • Mulberry Bend Overlook, State Hwy 15, Newcastle Nebraska **For Help Finding Additional Resources:** https://sanford.findhelp.com/

Long-Term Senior 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[1].

Respondents in the Vermillion area rated the quality of long-term care, nursing homes, and senior housing as less than good (average score=2.89) – and one in three respondents rated the quality as poor or fair (33%). 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 noted a general lack of care services and living options available for a growing elderly population, staffing shortages for care facilities, and long wait lists for nursing homes. In addition, of survey respondents in the Vermillion area who would like to see specific services offered or improved in their community, 30 percent said long-term care.

Stakeholder meeting participants discussed senior care and decided while this is a top issue in the community, this is an issue where Sanford can be a contributing partner. With senior care and assisted living, meeting participants brought up different community organizations who are currently focused on senior housing and how partnering to create and provide resources to the community can lead to higher quality senior care.

Local Asset Mapping	
Memory Care Resources: • Sanford Vermillion Care Center Memory Unit, 125 S Walker St, Vermillion • Angelhaus Yankton East & West, 2905 & 2903 Douglas Ave, Yankton • Avera Sacred Heart Majestic Bluffs, 211 W 11th St, Yankton • Westwood Specialty Care, 4201 Fieldcrest Dr, Sioux City • Edgewood Memory Care, 3401 West Ralph Rogers Road, Sioux Falls • Dow Rummel Village, 1321 W Dow Rummel St, Sioux Falls • Meadows on Sycamore, 130 N Sycamore Ave, Sioux Falls	**Long Term Care Resources:** • Sanford Health Vermillion Dakota Gardens, 126 S Plum St, Vermillion • Sanford Vermillion Care Center, 125 S. Walker Street, Vermillion • Sanford Home Health, 848 E Cherry St, Vermillion • Wakonda Heritage Manor, 515 Ohio St, Wakonda • Sunset Manor Avera, 129 E Clay St, Irene • Arbor Care Centers, 401 W Darlene St, Hartington • Akron Care Center, 991 IA-3, Akron • Good Samaritan Society, 4312 W Creekside Cir, Sioux Falls **For Help Finding Additional Resources:** https://sanford.findhelp.com/

Public Transportation

Transportation systems help ensure that people can reach everyday destinations, such as jobs, schools, healthy food outlets, and health care facilities, safely and reliably. Public transportation services play an important role for people who are unable to drive, people without access to personal vehicles, children, individuals with disabilities, and older adults[2].

Respondents in the Vermillion area also rated community access to daily transportation as less than good (average score=2.54). When asked to explain why they rated community access to daily transportation the way they did, respondents noted very limited public transportation options. In addition, respondents indicated that existing options require advance notice for pickup, do not extend to rural areas, and do not operate outside of business hours (no evenings or weekends), making things inefficient and ineffective for many working families, the elderly, and those with disabilities.

When the stakeholder meeting participants discussed public transportation, they decided there is work to be done with transportation in the community. The group decided that while this is a top issue for the community, public transportation is not a top issue that Sanford Vermillion can directly address, as a hospital. The group agreed that Sanford can help partner on current and future community efforts with public transportation, especially with medical transportation and transportation for students at the University of South Dakota.

Local Asset Mapping
Transportation: • Vermillion Public Transit, 604 High Street, Vermillion (605) 624 - RIDE •Affordable Taxi Cab Company, 1401 Whiting St Yankton, SD, 57078, (605)-689-2822 **For Help Finding Additional Resources:** https://sanford.findhelp.com/

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

Respondents in the Vermillion area rated the availability of affordable housing in their community as fair (average score=1.97) and lower than any other community health issue. When asked to explain why they rated community access to affordable housing the way they did, responses focused on the increasing prices for both rent and single-family homes – making it difficult for seniors to transfer into needed arrangements, workers to remain unburdened by housing costs, students to find affordable rents, and young families to find safe and affordable starter homes.

CHR data indicate that 13 percent of households in the Vermillion area have severe housing problems (i.e., overcrowded, high housing costs, lack of kitchen facilities, or lack of plumbing facilities) and 12 percent of households spend at least 50 percent of their household income on housing costs – both rates are similar to the comparison group average.

Community stakeholder meeting participants discussed affordable housing and decided that while there is work to be done, this is not a top issue that can be directly addressed by Sanford Vermillion. The group discussed ways that Sanford can help provide resources for the community with affordable housing, and help be a part of the conversation and participation with other organizations. This decision comes from the community and community organizations working on affordable housing and discussions on affordable housing being affected by the two priority needs: access to health care providers and healthy living.

Local Asset Mapping	
Housing resources: · Vermillion Housing Authority, 25 Center St., Vermillion · CCCS of LSS SD (housing counseling agency), 816 E. Clark St., Vermillion · University Rentals, 844 E. Cherry St., Vermillion · Clark's Landing, 1305 E. Clark St., Vermillion · East River Properties, LLC, 844 E Cherry St, Vermillion · Premier Real Estate, 1216 E. Cherry St. Suite 101, Vermillion · Dakota Realty, 125 E. Cherry St., Vermillion · Maloney Real Estate, 108 E. Main, Vermillion · Grace Property Management – gracepropertymanagem.wixsite.com	**Low Income Apts.:** · Applewood Court, 923 W. Clark, Vermillion · Cressman Court, 200 Hall St., Vermillion · Oakwood Apts., 1100 E. Clark, Vermillion · Walnut St. Apts., 601 Elm St., Vermillion · Town Square Apts., 505 W. Main St., Vermillion · Madison Park Townhomes, 315 N. Norbeck St., Vermillion **For Help Finding Additional Resources:** https://sanford.findhelp.com/

Sanford Area of Focus
The significant health needs noted above were brought forward as topics of discussion at the

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

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

1. Improving Access to Medical Care Providers.
2. Improving Healthy Living in the Community

Implementation Plan for Priority Needs

Priority 1: Improve Access to Medical Care Providers.

Current Activities

We currently have one Mental Health provider who offers telemedicine visit types and need oncology specialty outreach which could be done by telemedicine. We do not currently offer telemedicine for the hospitalist services at the hospital. We also have two Family Medicine providers offering Obstetric services but will be adding one more provider late 2024/early in 2025.

Projected Impact
Upon completion of the three-year Implementation Plan, the community would see an increase in primary care visits and preventive care services.

Goal 1: Offer Additional Telemedicine Visit Types

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Offer more Telemedicine Visits for Clinic for Mental Health and Specialty Outreach Services	Increase telemedicine visits for clinic 10% by 2027	Telemedicine equipment for Hospital and Emergency Room	Rachel Olson, Stan Knobloch, Julie Girard	Sanford Health Eagle TeleHealth
Offer more Telemedicine Visits for Hospital for Mental Health; Hospitalist	Increase telemedicine visits for hospital 10% by 2027	Telemedicine equipment; clinic cart for telemedicine	Janice McGuire, Stan Knobloch, Julie Girard	Sanford Health

Goal 2: Expand Obstetrics Services at Sanford Vermillion

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Expand Clinic Obstetrics Visits with New Provider	Increase the number of OB Visits at clinic 10% by 2027	New OB provider	Rachel Olson, Stan Knobloch, Julie Girard	
Increase Hospital Obstetric Visits	Increase the number of OB visits at the hospital 5% by 2027	New OB Provider	Janice McGuire, Stan Knobloch, Julie Girard	

Priority 2: Improve Healthy Living for the Vermillion Community

We currently do most of our colorectal screenings by colonoscopy but are participating in a Sanford Health initiative to get more patients screened by Cologuard. At this time, we do not offer Diabetic Education locally to our diabetic patients. They must travel to Sioux Falls for this service or other communities.

Projected Impact
Upon completion of the three-year Implementation Plan, the community would see lower incidence of chronic disease rates.

Goal 1: Increase Services at Sanford Vermillion for Colorectal Screenings & Diabetic Education.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Increase the Number of Colorectal Screenings done by Cologuard	Increase the number of colorectal screenings by Cologuard 5% increase by 2027	Clinic providers	Rachel Olson, Stan Knobloch, Julie Girard	
Maintain or Increase the number of Colorectal Screenings by Colonoscopy	Maintain or Increase the number of colorectal screenings by Colonoscopy 0-3% by 2027	OR Staff General Surgeon	Janice McGuire, Stan Knobloch, Julie Girard	

Goal 2: Establish Diabetic Education services at Sanford Vermillion Medical Center in person and/or via Telemedicine Visits.

Actions/Tactics	Measurable Outcome & Timeline	Resources to be Committed	Leadership	Community partnerships and collaborations, if applicable
Offer Diabetic Education via Telemedicine	Establish Diabetic Education visits via telemedicine by 2026	Certified Dietitian with Telemedicine capability	Cindy Benzel; Rachel Olson; Julie Girard	Sanford Health
Offer Diabetic Education with our Dietitian	Establish Diabetic Education visits in person at SVMC by the end of 2027	Certified Dietitian; Education/certi-fication for the SVMC Dietitian	Cindy Benzel; Rachel Olson; Julie Girard	Sanford Health

Needs Not Addressed

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

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

EVALUATION OF 2022-2024 CHNA

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

Sanford Health continues to integrate the CHNA report, supporting data, and Implementation Plans across the organization, including in the annual strategic planning program and operations. The Sanford Health Board of Trustees incorporated population health as an aspirational target metric necessary to become the “premier rural health system” in the country. The population health target aligns the work conducted through the CHNA with the overall evaluation of Sanford’s success.

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

In 2022, the organization implemented findhelp, an online tool to incorporate contact and referral information to connect community-based organizations with patients to meet their health related-social care needs. The system is available to the health care team and as a public facing site for self-navigation to consumers. A link is included on every after-visit summary provided to patients and is available on Sanfordhealth.org and MyChart. Findhelp generated nearly 28,000 internal and external searches from within CHNA-defined communities on CHNA topics in 2022 and over 19,000 in 2023. The Vermillion CHNA area conducted 798 searches in 2022 and 2023.

Access to Affordable Health Care

Sanford Vermillion continued to work in 2023 on our two goals to enhance access to affordable health care for the community. For the first goal, the hospital and clinic again promoted the organization’s financial assistance program to applicable patients. This helped to reduce the number of unpaid accounts going to bad debt or collections by increasing the

utilization of the assistance program to assist paying for approved patients' medical bills for up to 12 months.

To promote the program, the hospital staff continued to provide the financial assistance program patient brochure to all admitted patients in 2023 and the emergency room waiting room. The clinic staff provided education sessions at the University of South Dakota (USD) on our financial assistance program so the student population would be aware of the program since we have the contract to provide USD Student Health Services. The clinic also displays the brochure in the central registration area where most patients check in as well as the outpatient waiting rooms. The clinic provides our billing office's business cards with their phone number to patients who wish to call about the financial assistance program, setting up payment plans, or have other billing inquiries. Financial assistance packets are also provided to patients as requested at the clinic and the financial assistance program application is available at the clinic, hospital and on the Sanford website for patients to access.

The write offs for patient accounts sent to Bad Debt or collections in 2023 decreased from 2022 by over $190,000 which was one of our goals. The total amount of accounts written off to our financial assistance program in 2023 was up from 2022 over $7,000 for a total of $1,756,454.

For the second goal to promote community awareness of other assistance programs for medications and preventative care, the clinic director continued to provide education at orientation for all new staff and providers on the patient assistance programs available for medications and preventative care such as NeedyMeds.com and All Women Count. The Clinic Health Coach and our Community Health Care Worker assisted patients with accessing these resources for those applicable. The Community Health Care Worker saw 21 patients in 2023 assisting them with various resources and services during home visits.

The clinic also provided the MedData patient brochure in the waiting room for patients to access their program to assist with medical bills for uninsured and/or gaps in coverage. The other patient assistance programs are also on the website and brochures for each are in the clinic lobby and are provided to applicable patients. The hospital has a list of available community assistance resources created by our social worker that is reviewed with and given to all applicable patients at discharge.

Clinic staff and providers also continue to promote our direct access labs to patients with high deductibles or no insurance to get lab services at reduced costs without seeing a provider if paid at time of service; no insurance is billed. This service is promoted on Sanford Health's website as Sanford Vermillion being a provider of it; we promote it internally at our facility on all our TV monitors in waiting rooms and educate all new providers at orientation on this service. In 2023 we conducted 346 direct access labs which is an increase from 219 in 2022.

Since 2022, Sanford Vermillion has also provided a free health clinic one evening per month for those who are uninsured in collaboration with the University of South Dakota. Services include treating acute care issues, chronic health care conditions and preventative medicine.

Health Care Access – Mental & Behavioral Health

In 2023 Sanford Vermillion continued work to improve access to mental and behavioral health services; promoting alternative visit types to increase this access via verbal, video, telehealth, and direct access laboratory visits and allowing open scheduling of mental and

behavioral health services. We were not able to expand services into weekend hours but continue to maintain that as a future goal.

All behavioral health visits were open to virtual visits in 2023 and self-scheduling. The integrated health therapist (IHT) offers all visit types including in-person, video, telehealth, and phone visits. The outreach psychology provider who comes to Vermillion offers telehealth when there's inclement weather and the other mental health counselor offers in-person visits. The total number of behavioral/mental health visits did not increase from 2022 to 2023; we had a total of 1942 mental/behavioral health visits for 2023, which is down from 2,412 last year. We did have 241 virtual visits in 2023 which was an increase. The number and % of canceled visits and no-show appointments remained about 5%, in line with the industry average.

Sanford Vermillion's behavioral/mental health providers are promoted on our website; each have a page description for patients to see and access information about them. They are also featured and promoted at all of our Dakota Hospital Foundation events throughout the year. The alternate visit types are promoted by clinic staff and providers, through the Sanford website, with our outreach provider ads and with our MyChart app where they can self-schedule appointments.

The accessibility for patients to come in and get labs on their own without seeing a doctor through the Direct Access Labs was utilized by more patients in 2023 with 346 labs completed compared to 219 in 2022.

Open scheduling of appointments also increased in 2023 via the MyChart app. For 2023, 8% of our clinic appointments were scheduled online by Sanford Vermillion patients.

CONTACT INFORMATION

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

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

APPROVAL

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

APPENDIX

Expanded Demographics[1]

According to the United States Census Bureau, Clay County had a 3.1% increase in population from April 2020 to July 2023, which trails the state overall but outpaces Union County at 2.2%. Union County has a higher share of residents on both ends of the age spectrum with a higher proportion of residents under the age of five and over the age of 65. Clay County, potentially driven by the University of South Dakota, has a greater share of residents between 18 and 65. Union County has a higher share of owner-occupied housing (70.0%) than the state while Clay County trails significantly at 51.1%). Clay County has a higher proportion of residents with college and advanced degrees while at the same time having a higher proportion of residents in poverty (20%), potentially due to the presence of the University, its faculty, and student body.

Fact	Clay County, SD	Union County, SD	South Dakota
Population estimates, July 1, 2023, (V2023)	15,431	17,183	919,318
Population estimates base, April 1, 2020, (V2023)	14,967	16,818	886,668
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	3.10%	2.20%	3.70%
Persons under 5 years, percent	4.20%	5.30%	6.40%
Persons under 18 years, percent	17.00%	23.50%	24.10%
Persons 65 years and over, percent	12.60%	19.40%	18.00%
White alone, percent	88.60%	93.90%	84.20%
Black or African American alone, percent	1.80%	1.40%	2.60%
American Indian and Alaska Native alone, percent	4.00%	1.00%	8.50%
Asian alone, percent	2.70%	1.60%	1.80%
Native Hawaiian and Other Pacific Islander alone, percent	0.10%	0.20%	0.10%
Two or More Races, percent	2.70%	1.90%	2.80%
Hispanic or Latino, percent	3.30%	4.80%	4.90%
White alone, not Hispanic or Latino, percent	86.30%	89.80%	80.70%
Housing Units, July 1, 2023, (V2023)	6,296	7,782	417,220
Owner-occupied housing unit rate, 2018-2022	51.10%	70.00%	68.40%
Median value of owner-occupied housing units, 2018-2022	$209,300	$254,900	$219,500
Median selected monthly owner costs -with a mortgage, 2018-2022	$1,544	$1,668	$1,557
Median selected monthly owner costs -without a mortgage, 2018-2022	$647	$662	$571
Median gross rent, 2018-2022	$758	$1,008	$878

[1] https://www.census.gov/quickfacts

Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	4.50%	4.00%	6.50%
Households with a computer, percent, 2018-2022	94.30%	92.90%	92.60%
Households with a broadband Internet subscription, percent, 2018-2022	89.80%	85.40%	86.80%
High school graduate or higher, percent of persons age 25 years+, 2018-2022	93.40%	94.50%	92.70%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	40.00%	35.40%	30.40%
With a disability, under age 65 years, percent, 2018-2022	10.30%	7.20%	8.00%
Persons without health insurance, under age 65 years, percent	13.20%	8.20%	9.80%
In civilian labor force, total, percent of population age 16 years+, 2018-2022	67.30%	67.00%	67.10%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	64.00%	60.20%	63.70%
Mean travel time to work (minutes), workers age 16 years+, 2018-2022	16.9	18.8	17.4
Median household income (in 2022 dollars), 2018-2022	$55,963	$82,036	$69,457
Per capita income in past 12 months (in 2022 dollars), 2018-2022	$30,033	$47,193	$36,850
Persons in poverty, percent	20.00%	6.00%	12.50%
Total employer establishments, 2021	304	538	27,951
Total employment, 2021	3,778	9,044	363,923

Community Health Needs Assessment Survey

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

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

RESIDENCE

Please enter your county of residence: _____

Please enter your zip code: _____

What is your current age? _____

COMMUNITY

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

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

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

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

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

Why did you give it that rating?

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

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

Why did you give it that rating?

1

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
O	O	O	O	O	O

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
O	O	O	O	O	O

Why did you give it that rating?

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

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

Why did you give it that rating?

How would you rate the ENVIRONMENTAL health of your community?
(clean air, clean water, etc.)

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

Why did you give it that rating?

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

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

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
O	O	O	O	O	O

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
O	O	O	O	O	O

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 Good	Excellent
O	O	O	O	O

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?)*

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 Immediate / faster appointment
O On vacation / traveling / snowbirds
O Cost or insurance coverage
O Don't feel welcomed or valued by local providers
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)*

DEMOGRAPHICS

What is your sex?

O Male O Female O Prefer not to answer

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

O Yes O No O Prefer not to answer

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

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

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

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

O 0 – 5 years
O 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 Single, never married
O Unmarried couple living together
O Divorced
O Widowed
O Separated

Which of the following best describes your current living situation?

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

What is your primary mode of daily transportation?

- O Automobile/Truck *(owned or leased)*
- O Online Ride Service *(Uber / Lyft)*
- O Taxi Service
- O Public Transportation *(bus / subway / rail)*
- O Walk
- O Bicycle
- O Family, Friends or Neighbors
- 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.