Dear Community Members,

Sanford Webster has conducted a community health needs assessment (CHNA) and formally identified unmet needs in the community. A component of the 2013 CHNA work is a perception survey.

During FY 2012/2013 members of the community were asked to complete a survey to help Sanford identify unmet health needs. Sanford analyzed the survey data, identified unmet needs, and partnered with key community stakeholders to develop a list of resources and assets that were available to address them. A gap analysis was also conducted to identify the most significant health needs, and they were addressed in the implementation strategy that is included in this document.

Sanford Webster has set strategy to address the following community health needs:
- Assisted Living for Seniors
- Adult and Childhood Obesity
- Medical Providers Recruitment Plan

Sanford is also addressing mental health services and obesity through enterprise-wide implementation strategies. The enterprise strategies are included in this for your review.

Additionally, the asset map/resource list is included in this document along with the action steps that will be taken.

At Sanford Webster, patient care extends beyond our bricks and mortar. As a not-for-profit organization, ensuring that the benefits of health care reach the broad needs of communities is at the core of who we are. By working with communities, we can bring health and healing to the people who live and work across our region. Together, we can fulfill this mission.

Sincerely,

[Signature]

David Rogers
CEO
Addressing the Needs in Webster

ACCESS

Community resources addressing the need:
  
Sanford’s commitment to addressing the need:
  • Sanford addresses this need through an active recruiting plan and has determined this as a priority. Sanford has developed an implementation strategy for medical provider recruitment.

CANCER

Community resources addressing the need:
  • Sanford Cancer Biology Research Center

Sanford’s commitment to addressing the need:
  • Sanford has dedicated resources and recruited experts in the field of oncology to address cancer research.

CHRONIC DISEASE

Community resources addressing the need:
  • Sanford Medical Home
  • Sanford Dietitians

Sanford’s commitment to addressing the need:
  • Sanford has executed new programs to improve care coordination, including the Health Coach and Medical Home program for the purpose of impacting chronic disease. Sanford is committed to finding a cure for Type I Diabetes. Better Choices/Better Health is a program that addresses chronic disease self-management and is available free of charge to all patients with a chronic disease and is available on-line at https://selfmanage.org/sanford/
  • Additionally, obesity is a co-morbidity of many chronic diseases and is a priority for Sanford Enterprise. The enterprise implementation strategy will address obesity.

CITY INFRASTRUCTURE

Community resources addressing the need:
  •
Sanford’s commitment to addressing the need:
  • Sanford will address this need by sharing the survey results with community leaders.

DENTAL CARE

Community resources addressing the need:
  •

Sanford’s commitment to addressing the need:
  • Sanford will address this need by sharing the survey results with community leaders.

ECONOMIC SITUATION/BUSINESS COMMUNITY

Community resources addressing the need:
  •

Sanford’s commitment to addressing the need:
  • Sanford will address this need by sharing the survey results with community leaders.

ELDERLY

Community resources addressing the need:
  •

Sanford’s commitment to addressing the need:
  • Sanford will address this need by sharing the survey results with community leaders.
  • Sanford has also determined this need to be high priority and has developed an implementation strategy to address the need for assisted living services.

HEALTHCARE COST/INSURANCE COST

Community resources addressing the need:
  •

Sanford’s commitment to addressing the need:
  • Sanford provides charity care through the Community Care program and continues to provide resources and monitoring of access for healthcare. Additionally, there is a discounted fee available to patients who qualify.

HEALTH FACTORS

Community resources addressing the need:
  •
Sanford’s commitment to addressing the need:
- Sanford is addressing substance abuse through an implementation strategy for mental health services. Sanford also has prioritized medical provider recruitment through an implementation strategy.
- Sanford will also address this need by sharing the survey results with community leaders and public health.

**JUDICIAL/POLICE**

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community leaders.

**MENTAL HEALTH**

Community resources addressing the need:
- Sanford One Care

Sanford’s commitment to addressing the need
- Sanford has prioritized mental health as an enterprise implementation strategy for 2013-2016.

**MORBIDITY/MORTALITY**

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford will share this information with county and community leaders.

**OBESITY**

Community resources addressing the need:
- Sanford WebMD Fit Kids
- Sanford dietitians

Sanford’s commitment to addressing the need:
- Sanford has prioritized obesity as an enterprise implementation strategy for 2013-2016.

**PHYSICIANS**

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need
- Sanford addresses this need through an active recruiting plan and has determined this as a priority. Sanford has developed an implementation strategy for medical provider recruitment.

POLLUTION/ENVIRONMENT

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community leaders.

POVERTY

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford provides charity care through the Community Care program and continues to provide resources and monitoring of access for healthcare. Additionally, there is a discounted fee is available to patients who qualify.

SCHOOLS

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community and school leaders.

SUBSTANCE ABUSE

Community resources addressing the need:
- Sanford One Care

Sanford’s commitment to addressing the need:
- Sanford has prioritized mental health as an enterprise implementation strategy for 2013-2016.
- Sanford will also share this concern with community leaders.

TRAFFIC

Community resources addressing the need:
- 

Sanford’s commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community leaders.
WELLNESS

Community resources addressing the need:
- Sanford WebMD Fit Kids
- Sanford dietitians

Sanford's commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community leaders.
- Sanford has prioritized obesity as an enterprise implementation strategy for 2013-2016.

YOUTH

Community resources addressing the need:
- Sanford WebMD Fit Kids
- Sanford One Care
- Sanford dietitians

Sanford's commitment to addressing the need:
- Sanford will address this need by sharing the survey results with community leaders.
- Sanford has prioritized obesity as an enterprise implementation strategy for 2013-2016.

SANFORD SPECIFIC

Community resources addressing the need:
- 

Sanford's commitment to addressing the need:
- Sanford provides charity care through the Community Care program and continues to provide resources and monitoring of access for healthcare. Additionally, there is a discounted fee available to patients who qualify.
Sanford Webster Community Health Needs Assessment

Implementation Strategy

FY 2014-2016 Action Plan

Priority 1: Assisted Living for the Elderly

Goal 1: Study the feasibility of converting part of Bethesda’s Heritage Village Apartments into an assisted living facility

Measurable Outcome:
- Community members will be able to turn to Bethesda Home for a continuum of care that provides independent, assisted and skilled nursing living options. Success will be determined by measuring demand through tours, waiting lists, occupancy rates.

Sanford Resources:
- SDAHO financial feasibility study
- External consultant

Priority 2: Obesity

Goal 1: Work with Sanford WebMD Fit Kids program to leverage this program to parents and children through the local school system

Measurable Outcome:
- Sanford staff will make routine visits to classrooms and student/parent events to promote Sanford WebMD Fit Kids and other activities that reduce obesity

Sanford Resources:
- Sanford WebMD Fit Kids
- Webster providers
- Webster Area School System
- School Nurse
- Health Coach
Goal 2: Work with medical center dietitian to develop services for obesity prevention/control

Measurable Outcome:
- Parents and community members will know they can turn to the Sanford Webster Health Coach and dietitian for assistance with their weight loss efforts

Sanford Resources:
- Sanford WebMD Fit Kids
- Dietitian
- Health Coach

Goal 3: Work with exercise specialists to develop exercise programs (walking clubs, biking clubs, fitness center programs, etc.) for community members

Measurable Outcome:
- By December 2016 Sanford Webster will provide three organized exercise programs to the community

Sanford Resources:
- Sanford WebMD Fit Kids
- Webster providers
- Health Coach

Priority 3: Medical Provider Recruitment

Goal 1: Recruit an additional provider to bring the Medical Staff to 2 FT MDs, 1 PT MD, 2 FT APP

Measurable Outcome:
- By December 2016 Sanford Webster will have recruited a new physician to the clinic or will be actively seeking a new physician to fill an upcoming physician retirement

Sanford Resources:
- Sanford Provider Recruitment
- 3Rnet
Community Health Needs Assessment

Sanford Health
Enterprise Implementation Strategy

FY 2014-2016 Action Plan

Priority 1: Mental Health Services – Sanford One Mind

Goal 1: Integration of behavioral health services or access to behavioral health in all 38 One Care primary clinic sites

Measurable Outcome:
- All 38 primary care clinic sites within the enterprise will have access to behavioral health services by FY 2016

Sanford Resources:
- Sanford One Care Director and Assistant
- Sanford One Care Coordinator
- Daniel Heinemann, MD
- Stephen Nelson, MD
- Core Team Clinical Skills Development Coordinators
- Core Team Traditional Culture Advisor/Cultural Diversity Liaison
- Core Team IT
- Core Team Curriculum Development Team
- One Care Development Communication Coordinator
- One Care Department Assistant
- Clinical Skills Development Team (training over 200 physicians and over 360 staff)

Goal 2: Analyze and present outcomes of the first three years of integrated behavioral health services

Measurable Outcome:
- Results are analyzed and reported to leadership during FY 2016

Sanford Resources:
- Daniel Heinemann, MD
- Stephen Nelson, MD
Priority 2: Obesity

Goal 1: Create an annual symposium/workshop for providers to address weight management and obesity

Measurable Outcome:

- CEUs are available for providers who attend the annual obesity symposium – first annual date set for April 25, 2014

Sanford Resources:

- $10,000 budgeted
- James Mitchell, M.D.
- Linda Bartholomay, LRD
- Carrie McLeod, MBA, MS, LRD,CDE
- Luis Garcia, MD
- Chris Tiongson, MD
- Ron Wiisanen, MD
- Jo Burdick, MS, BSN
- Naomi Aufman, MS

Goal 2: Develop community classes and leverage existing resources, including dietitians, exercise physiologists, WebMD Fit Kids

Measurable Outcome:

- Classes are scheduled to address obesity and obesity prevention

Sanford Resources:

- Clinical Dietitians
- Exercise Physiologists
- Behavioral Health Team
- Bariatric Services
- Providers
- WebMD Fit Kids