

Community Health Needs Assessment 2016



Lisbon Area Health Services

905 Main Street, P.O. Box 353, Lisbon, ND 58054

Mission Statement: The mission of Lisbon Area Health Services is to nurture the healing ministry of the Church supported by education and research. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

LAHS Vision: The vision of Lisbon Area Health Services is to provide high quality healthcare to meet the needs of the communities we serve. We are committed to maintain our presence into the future by serving our customers by dedicated skilled staff.

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Introduction

A community health needs assessment is a systematic process involving community input to identify community health needs, prioritize needs and act on unfulfilled needs. The implementation will be LAHS' plan to address community health needs also known as the community benefit plan.

Conducting a Community Health Needs Assessment (CHNA) is a federal requirement for charitable hospitals enacted as a part of the 2010 Affordable Care Act which includes adopting implementation strategies.

The purpose for conducting a community health needs assessment is to describe the health of the local population, identify community needs, and identify action needed to address the future delivery of health care in Ransom and Sargent counties. A health needs assessment benefits the local community by: 1) opening the discussion between community members about the future of health care in the community, 2) organizing information to help guide, inform and educate, 3) collecting input from the local community including providers.

Overview of Services and Facilities

Lisbon Area Health Services

Lisbon Area Health Services is a 25-bed critical access hospital in Lisbon, North Dakota. This is with 12 acute beds and 13 Swing beds. It is a state-designated Level V Trauma Center, a Stroke Ready Hospital and employs approximately 85 people. LAHS is the only hospital in Ransom and Sargent counties and serves 9286 people throughout 1720.87 square miles. Locally available services provided by LAHS include the following:

Out patient services	
Cardiac Services/Rehab	Emergency Room
End of Life Care	Laboratory Services
Swing- Bed Services	Occupational Therapy
Radiology –Bone Density	Physical Therapy
Radiology- Digital Mammography	*Visiting Specialists
Radiology- General Ultrasound	Surgical Services
Radiology- Echocardiography	
Radiology- General X-Ray	
Radiology-Fluoroscopy	Acute Care Hospital
Radiology-Nuclear Medicine	Inpatient Pharmacy
Radiology- MRI	Clinic
Radiology- CT Scan	
Radiology- EEG's	
Radiology- EKG's	
Respiratory Care-Sleep Studies	
Respiratory Care- Pulmonary Function Testing	

* Visiting Specialists on a monthly base are: Surgeons, Urology, Orthopedics, and Hearing Aid Services.

Health Care Facilities, History, and Other Resources

Lisbon Area Health Services (LAHS) originally known as Community Memorial Hospital opened its doors on February 1, 1952. Lutheran Hospitals & Homes Society (LHHS) of Fargo worked on this project with the local Community Memorial Hospital Association and assumed operations of the hospital.

In 1967 an addition was added to the northeast portion of the hospital, which became a 20-bed nursing home wing.

It was determined that additional space was needed and another addition was made to the south of the existing structure. This was completed in 1976 and became the new hospital wing. The previous hospital wing was converted to 25 nursing home beds.

In 1992, Community Memorial Hospital and Nursing Home celebrated 40 years of dedicated service to the sick.

By 1996 a remodeling project had been completed and a clinic was moved into the facility. At this time the facility's name changed to Lisbon Medical Center.

Lisbon Area Health Services changed to Critical Access Hospital status effective January 1, 2001. The facility was acquired by Catholic Health Initiatives on October 1, 2002.

The facility now has a trade name of CHI Lisbon Health.

LAHS is served by physicians and allied professional staff from CHI Lisbon Health Clinic, Family Medical Clinic and Essentia Health- Lisbon.

In addition to LAHS, Lisbon has 3 other clinics, two home care agencies, two hospice agencies and two long term care facilities (LTC) as well as a LTC facility in Enderlin and one in Forman. There are two assisted living facilities and two facilities that offer basic care.

Lisbon is located in southeast ND which is one hour away from Fargo. Its economy is based on agriculture, manufacturing, and retail trades. Lisbon Public School System offers curriculum for students K-12 and offer a variety of sports, music and drama. The Historical Opera House hosts several cultural events throughout the year. The scenic theatre offers a variety of selections for diverse ages. The park board maintains 2 city parks, swimming pool, ball diamond, and tennis court. The surrounding areas provide recreational areas such as skiing, water sports, hunting, golf and camping.

I. Community Served by Lisbon Area Health Services.

North Dakota County Map



Ransom and Sargent counties are located in the southeastern part of North Dakota. Sargent County borders South Dakota and the (X) on the map marks the location of Lisbon Area Health Services (LAHS).

The defined community for LAHS is noted on the service area map above. LAHS primary service area encircles the two counties of Ransom and Sargent in North Dakota. Although the secondary service area includes parts of 5 counties, Ransom and Sargent counties are the defined primary areas for this assessment as CHI Lisbon health is the only hospital in the county and approximately 10 miles from the Sargent county line. This was determined by the internal assessment team. The communities in these 2 counties are Cogswell, Gwinner, Forman, Milnor, Lisbon, Enderlin, McLeod, Sheldon, Havana, Stirum, Rutland, and Fort Ransom. This community was determined in conjunction with public health from Ransom and Sargent counties. The survey tool was to benefit both of the future work of both public health entities.

The survey was available in all of these communities to gain information for LAHS and Ransom and Sargent Public Health Departments. The survey was not intended to be a scientific or statistically valid sampling of the population. This survey was designed to be an additional tool for collecting data from the communities at large. The survey had broad general questions on it also to be able to utilize responses in respective counties/ communities. This is indicated by request for zip codes.

The hospital's community benefits programs serve the designated geographical areas. Priority populations include low income seniors, uninsured and underinsured and persons with disabilities and medical conditions.

II. Community Health Needs Assessment Process

To help determine future decisions and strategic planning, LAHS conducted a community health needs assessment survey. This was done through a joint effort of LAHS and Sargent County District Health Unit and Ransom County Public Health Department. Community health data was used and solicited input from community members by interviews and a public survey. The survey was distributed throughout Ransom and Sargent County as an on line survey through Survey Monkey. Additional information was collected through key informant interviews of locally identified community leaders.

The survey covered the following information: Economical, environmental, and transportation concerns, concerns surrounding youth, concerns with aging population, concern with safety, level of concern with healthcare, concern with substance use/abuse, preventative screenings, barriers to medical care, demographics, (employment, gender, race, income, years in the community, insurance status) and where care is sought and distance to care. Additionally chronic diseases, routine physical exam, dental care, access to care, concern with physical and mental health and tobacco use were also covered.

The survey period was from May 1, 2015 through June 30, 2015. Please see Appendix A for the specific survey tool. 102 surveys were completed for the assessment, 61 in Ransom County and 41 in Sargent County. This is significantly down from the prior assessment three years ago.

There were no information gaps that were identified that impacted the hospitals ability to assess the health needs due to the quantitative information for demographic and health status were available for both counties.

The survey tool was designed to:

- Understand community's general rating of their own health and health issues
- Understand the community's awareness of services
- Understand the community's needs for services and concerns
- Obtain suggestion for future needs/gaps in services

Several sources were reviewed as part of this assessment. The North Dakota Kids Count Fact Book shows that children ages 0-17 living in poverty in 2015 was 121 or 9.5% in Ransom County while Sargent County is 50 or 5.9% a decrease from 2010 in both counties respectively 178 or 13.2% and 97 or 10.5%. North Dakota was 21,403 or 14.1%. Looking at the Ransom and Sargent counties community health profiles on vital statistics data on births and deaths from 2009-2013 you will find that Ransom county's leading cause of death was heart disease followed by cancer while Sargent county's was cancer followed by heart disease. For both counties, the leading cause of death for age group 45-84 was cancer, then heart, and then

COPD/unintentional injury. The 85 plus age group came in with heart as number one for Ransom County and cancer for Sargent County. This data would indicate that reductions in mortality may be achieved by focusing on the prevention of cancer and heart disease for the over 45 age group.

Other information provided in the Adult Behavioral Risk Factors of the Community Health Profile in Appendix D of this document. There are quality of life issues and conditions noted for individuals 18 years or older. The areas included for reference are high blood pressure, obesity, cholesterol, Chronic lung disease, arthritis, cardiovascular disease, stroke, physical activity, smoking, general health, health insurance, drinking habits, vaccination, and crime.

The following information was taken from the Ransom and Sargent County Community Health Profile/Adult Behavioral Risk Factors from 2011-2013. Flu vaccinations and pneumonia vaccinations for respondents age 65 or older in Ransom County and Sargent County were not reported with comparison to the North Dakota rate of 40.3% that did not have a flu vaccination and 29.4% that did not receive a pneumonia vaccination.

The County Health Rankings for 2015 of North Dakota note ranking of counties in ND. These maps help locate the healthiest and least healthy counties in the state. Ransom County is ranked #16 in Health outcomes and Sargent County is #2 a significant change for both counties from 3 years ago where Ransom county was #6 and Sargent County was ranked #31.

In ND county ranking for Health Factors include health behaviors, clinical care, social and economic factors, and physical environmental factors. Ransom County ranks #26 and Sargent County was #3. Three years ago Ransom County was ranked #22 and Sargent County ranked #18. Again dramatic changes. Each of these ranks represents a weighted summary of a number of different measures. Additional information is available at the County Health Rankings website, www.countyhealthrankings.org. It is important to note that these statistics describe the population of Ransom and Sargent County, regardless of where these county residents receive their medical care.

The rankings and survey reveal that there is opportunity for improvement in several areas in the LAHS service area. In Ransom and Sargent Counties showed respondents with a body mass index of 25 or greater was 67.2%. This compares to ND overall of 66.1%, which is slightly lower than the two counties. Health and Human resources reported in November of 2015 reported 36.5% of American adults are obese with 40% in the age group of 40-59. According to the State of Obesity: Better policies for a healthier America 2014, North Dakota is the 9th highest adult obesity rate in the nation, which is significantly up from 2010 which was 28%. For reporting of ever being told that they have diabetes in Ransom County is 9.4% compared to the state of 8.5% which is down a percent for comparisons with the last survey. High Cholesterol is another Risk Factor that showed up as being above the North Dakota average by 4% in the Community Health Profile. Along with this is High Blood Pressure (Hypertension) that comes in at 34% in the two counties when the North Dakota average is 29.5% demonstrating an overall increase in

the state. This is respondents who reported ever having been told by a doctor, nurse or other health professional that they had high blood pressure. Respondents who had 8 or more days in a month where their mental health was not good was 9.6% for both Ransom and Sargent Counties. This is compared to ND of 10.8%. Respondents that reported that they did not get the recommended level of activity for Ransom and Sargent counties was 55.3% compared to the state of ND at 53.8%. Those respondents reporting little or no physical activity was 34.5% for both counties compared to ND which is 30.4%. Heavy drinking defined as more than two drinks per day for men and more than one drink for women in Ransom and Sargent Counties is 12.1% while the state is 6.8%. Respondents with binge drinking which is defined as 5 drinks for men and 4 drinks for women was 28.1% for the two counties compared to 24.2% for ND.

Secondary Data

Secondary data was collected from a variety of sources including U.S. Census Bureau, the North Dakota Department of Health, 2015 North Dakota Kids Count Fact Book, the Robert Wood Johnson Foundation's County Health Rankings, the National Survey of Children's Health Data Resource Center, the North Dakota Behavioral Risk Factor Surveillance System, State of Obesity, and Health and Human Services November 2015.

Demographic Information

Total population in Ransom County is 5,472 and Sargent County 3,859 contributing to the state of ND population which is 724,840.

The statistics show for the two counties (Sargent and Ransom) have a greater percentage of individuals between the age of 50 and 59 have a higher median age than the North Dakota average which is 20-29. The second greatest category for Ransom County is ages 10-19 with Sargent County ages 60-69.

Ransom County had the highest education as high school degree while Sargent County was some college/associate degree which is the same category as the state statistics.

Those with a disability are 14.5 % for Ransom County and 10.8% in Sargent County with the state percentage of disability at 10.6% for both counties. Both counties and the state seeing the greatest noted with disability seen with those 65 and older.

Below Poverty level category results in 504 in Ransom County at 9.5%. Sargent County is at 7.4% ND comparison is 11.9%.

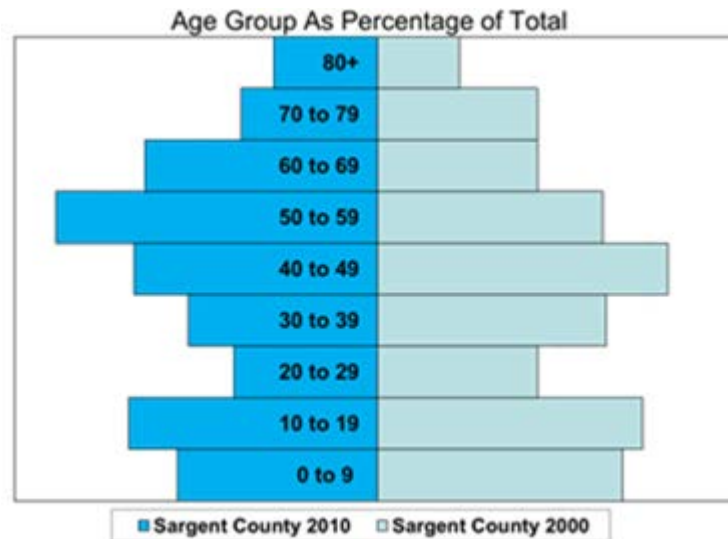
Demographic Information----- Sargent County

The Demographic Section of this report comes from the US Census Bureau (www.census.gov). Most tables are derived either from the Census estimates for 2013 or from the Community Population Survey aggregated over a several year period. The table header describes the specific years from which the data is derived.

1

Population by Age Group, 2009-2013 ACS Estimates				
Age Group	Sargent County		North Dakota	
	Number	Percent	Number	Percent
0-9	436	11.3%	91,871	12.7%
10-19	498	12.9%	93,318	12.9%
20-29	345	8.9%	124,424	17.2%
30-39	401	10.4%	91,148	12.6%
40-49	493	12.8%	79,573	11.0%
50-59	643	16.7%	101,998	14.1%
60-69	525	13.6%	69,446	9.6%
70-79	331	8.6%	41,233	5.7%
80+	187	4.8%	31,829	4.4%
Total	3,859	100.0%	724,840	100.0%
0-17	855	22.2%	161,317	22.3%
65+	731	18.9%	102,722	14.2%

2



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Female Population and Percentage Female by Age, 2009-2013 ACS Estimates				
Age Group	Sargent County		North Dakota	
	Number	Percent	Number	Percent
0-9	209	47.9%	45,342	49.4%
10-19	214	43.0%	44,988	48.2%
20-29	153	44.3%	55,615	44.7%
30-39	183	45.6%	41,092	45.1%
40-49	253	51.3%	39,675	49.9%
50-59	279	43.4%	50,656	49.7%
60-69	248	47.2%	34,361	49.5%
70-79	187	56.5%	21,254	51.5%
80+	97	51.9%	20,546	64.5%
Total	1,823	47.2%	353,530	48.8%
0-17	408	47.7%	78,484	48.7%
65+	378	51.7%	50,201	48.9%

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Decennial Population Change, 1990 to 2000, 2000 to 2010				
Census	Sargent County	10 Year Change	North Dakota	10 Year Change
1990	4,549	(%)	638,800	(%)
2000	4,366	-4.0%	642,200	0.5%
2010	3,829	-12.3%	672,591	4.7%

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Race, 2009-2013 ACS Estimates				
Race	Sargent County		North Dakota	
	Number	Percentage	Number	Percentage
Total	3,859	100.0%	723,393	100.0%
White	3,743	97.0%	643,478	89.0%
Black	21	0.5%	10,827	1.5%
Am. Indian	21	0.5%	40,214	5.6%
Asian	27	0.7%	9,096	1.3%
Pac. Islander	0	0.0%	371	0.1%
Other	30	0.8%	4,620	0.6%
Multirace	17	0.4%	29,574	4.1%

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Household Populations, 2011-2013 ACS Three Year Estimates				
	Sargent County		North Dakota	
	Number	Percent	Number	Percent
Total	3,859	100.0%	703,203	100.0%
In Family Households	3,114	80.7%	530,615	75.5%
In Non-Family Households	710	18.4%	146,330	20.8%
Total In Households	3,824	99.1%	676,945	96.3%
Institutionalized*	35	0.9%	9,675	1.4%
Non-institutionalized*	0	0.0%	16,583	2.4%
Total in Group Quarters	35	0.9%	26,258	3.7%

7

Marital Status of Persons Age 15 and Older, 2009-2013 ACS Estimates				
Marital Status	Sargent County		North Dakota	
	Number	Percent	Number	Percent
Total Age 15+	3,128	100.0%	561,346	100.0%
Never Married	629	20.1%	177,385	31.6%
Now Married	1,971	63.0%	291,900	52.0%
Separated	25	0.8%	5,052	0.9%
Widowed	188	6.0%	33,681	6.0%
Divorced	319	10.2%	53,328	9.5%

8

Educational Attainment Among Persons 25+, 2009-2013 ACS Estimates				
Education	Sargent County		North Dakota	
	Number	Percent	Number	Percent
Total	2,748	100.0%	457,771	100.0%
Less than 9th Grade	165	6.0%	19,226	4.2%
Some High School	151	5.5%	21,057	4.6%
High school or GRE	962	35.0%	125,429	27.4%
Some College / Asso. Degree	978	35.6%	168,002	36.7%
Bachelor's degree	418	15.2%	89,723	19.6%
Post Graduate Degree	77	2.8%	34,791	7.6%

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Persons with Disability, 2009-2013 ACS Estimates				
Group	Sargent County		North Dakota	
	Number	Percent	Number	Percent
Total	3,821	100.0%	688,158	100.0%
Any Disability	411	10.8%	72,762	10.6%
No Disability	3,410	89.2%	615,396	89.4%
Self Care Disability	81	2.1%	11,274	1.6%
0-17 with any disability	40	4.7%	4,677	2.9%
18-64 with any disability	170	7.4%	35,931	7.8%
65+ with any disability	201	28.8%	32,154	31.3%

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Income and Poverty Status by Age Group, 2009-2013 ACS Estimates				
	Sargent County		North Dakota	
Median Household Income	\$53,381		\$54,920	
Per Capita Income	\$29,950		\$30,436	
	Number	Percent	Number	Percent
Below Poverty Level	282	7.4%	80,644	11.9%
Under 5 years	22	11.3%	7,714	16.9%
5 to 11 years	9	2.6%	7,944	13.2%
12 to 17 years	19	6.2%	5,776	11.8%
18 to 64 years	165	7.3%	49,568	11.6%
65 to 74 years	32	8.1%	3,448	7.0%
75 years and over	35	11.5%	6,194	13.7%
Total Known Children in Poverty	50	5.8%	21,434	13.3%
Total Known Age 65+ in Poverty	67	9.2%	9,642	9.4%

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Family Poverty, 2009-2013 ACS Estimates				
	Sargent County		North Dakota	
	Number	Percent*	Number	Percent*
Total Families	1,143	100.0%	176,378	100.0%
Families in Poverty	75	6.6%	13,052	7.4%
Families with Own Children	445	38.9%	80,964	45.9%
Families with Own Children in Poverty	53	4.6%	10,121	5.7%
Families with Own Children and Female Parent Only	87	7.6%	16,716	9.5%
Families with Own Children and Female Parent Only in Poverty	50	4.4%	6,452	3.7%

* Percent family poverty is percent of total families

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Age of Housing, 2009-2013 ACS Estimates				
	Sargent County		North Dakota	
	Number	Percent	Number	Percent
Housing units: Total	2,016	100.0%	329,970	100.0%
1980 and Later	498	24.7%	128,111	38.8%
1970 to 1979	360	17.9%	66,396	20.1%
Prior to 1970	1,158	57.4%	135,463	41.1%

Vital Statistics Data

BIRTHS AND DEATH DEFINITIONS

Vital Statistics Data comes from the birth and death records collected by the State of North Dakota aggregated over a five year period. All births and deaths represent the county of residence not the county of occurrence. The number of events is blocked if fewer than five. Formulas for calculating rates and ratios are as follows:

Birth Rate = Resident live births divided by the total resident population

x 1000. **Pregnancies** = Live births + Fetal deaths + Induced termination

of pregnancy. **Pregnancy Rate** = Total pregnancies divided by the total

resident population x 1000. **Fertility Rate** = Resident live births divided

by female population (age 15-44) x 1000.

Teenage Birth Rate = Teenage births (age <20) divided by female teen population x 1000.

Teenage Pregnancy Rate =

Teenage pregnancies (age <20) divided by female teen population x 1000.

Out of Wedlock Live Birth Ratio =

Resident OOW live births divided by total resident live births x 1000.

Out of Wedlock Pregnancy Ratio =

Resident OOW pregnancies divided by total pregnancies x 1000.

Low Weight Ratio =

Low weight births (birth weight < 2500 grams) divided by total resident live

births x 1000. **Infant Death Ratio** = Number of infant deaths divided by the total

resident live births x 1000. **Childhood & Adolescent Deaths** = Deaths to

individuals 1 - 19 years of age.

Childhood and Adolescent Death Rate =

Number of resident deaths (age 1 - 19) divided by population (age 1 - 19) x 100,000

Crude Death Rate = Death events divided by population x 100,000.

Age-Adjusted Death Rate = Death events with age specific adjustments x 100,000 population.

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Births, 2009-2013				
	Sargent County		North Dakota	
	Number	Rate or Ratio	Number	Rate or Ratio
Live Births and Rate	172	9	47,959	14
Pregnancies and Rate	187	10	52,505	15
Fertility Rate		83		72
Teen Births and Rate	*	NA	2,118	12
Teen Pregnancies and Rate	8	9	3,725	21
Out of Wedlock Births and Ratio	30	174	15,686	327
Out of Wedlock <u>Preg</u> and Ratio	40	214	19436	370
Low Birth Weight Birth and Ratio	9	52	3,078	64

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Child Deaths, 2009-2013				
	Sargent County		North Dakota	
	Number	Rate or Ratio	Number	Rate or Ratio
Infant Deaths and Ratio	0	0	286	6
Child and Adolescent Deaths and Rate	*	NA	270	32
Total Deaths and Crude Rate	181	938	29,616	866

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Deaths and Age Adjusted Death Rate by Cause, 2009-2013		
	Sargent County	North Dakota
	Number (Adj. Rate)	Number (Adj. Rate)
All Causes	180 (655)	29,581 (702)
Heart Disease	35 (128)	6,762 (154)
Cancer	53 (187)	6,315 (156)
Stroke	10 (35)	1,684 (37)
Alzheimers Disease	8 (28)	2,189 (45)
<u>COPD</u>	14 (47)	1,707 (41)
Unintentional Injury	6 (32)	1,625 (44)
Diabetes Mellitus	13 (46)	1,022 (24)
Pneumonia and Influenza	2 (7)	682 (15)
Cirrhosis	4 (15)	394 (11)
Suicide	2 (10)	551 (16)

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Leading Causes of Death by Age Group for Sargent County, 2009-2013			
Age	1	2	3
0-4	Unintentional Injury		
5-14	Unintentional Injury		
15-24			
25-34	Suicide	Kidney	
35-44	Unintentional Injury	Heart Cancer	
45-54	Cancer 5	Heart Unintentional Injury	Cirrhosis Diabetes
55-64	Cancer 10	Heart COPD	Stroke
65-74	Cancer 12	Heart COPD	Diabetes
75-84	Heart 14	Cancer 10	Stroke COPD
85+	Cancer 15	Heart 12	Diabetes Stroke

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Leading Causes of Death by Age Group for North Dakota, 2006-2010			
Age	1	2	3
0-4	Congenital Anomaly 69	Prematurity 44	SIDS 40
5-14	Unintentional Injury 26	Cancer 10	Congenital Anomaly 6
15-24	Unintentional Injury 184	Suicide 109	Cancer 20
25-34	Unintentional Injury 166	Suicide 91	Heart 32
35-44	Unintentional Injury 173	Heart 94	Cancer 88
45-54	Cancer 493	Heart 335	Unintentional Injury 194
55-64	Cancer 1001	Heart 579	Unintentional Injury 137
65-74	Cancer 1562	Heart 843	COPD 313
75-84	Cancer 1992	Heart 1797	COPD 626
85+	Heart 3421	Alzheimer's Dz 1391	Cancer 1352

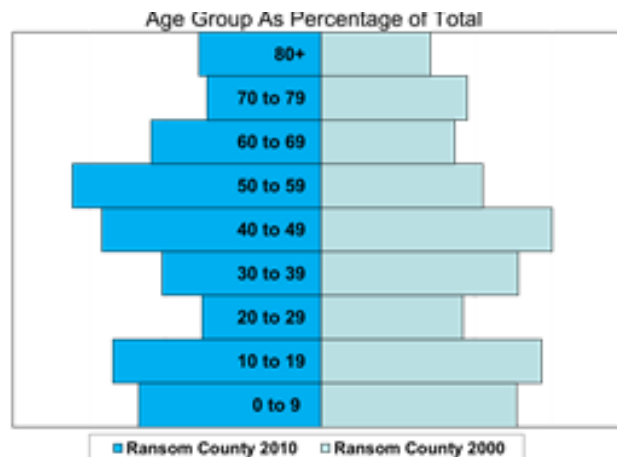
Demographic Information----- Ransom County

The Demographic Section of this report comes from the US Census Bureau (www.census.gov). Most tables are derived either from the Census estimates for 2013 or from the Community Population Survey aggregated over a several year period. The table header describes the specific years from which the data is derived. The table showing percent population change uses census data from 2000/2010. Tables present number of persons and percentages which in almost all circumstances represent the category specific percentage of all persons referenced by the table (e.g., percentage of persons age 15 and older who are married). Age specific poverty rates represent the percentage of each.

1

Age Group	Ransom County		North Dakota	
	Number	Percent	Number	Percent
0-9	601	11.0%	91,871	12.7%
10-19	852	15.6%	93,318	12.9%
20-29	392	7.2%	124,424	17.2%
30-39	531	9.7%	91,148	12.6%
40-49	774	14.1%	79,573	11.0%
50-59	868	15.9%	101,998	14.1%
60-69	610	11.1%	69,446	9.6%
70-79	365	6.7%	41,233	5.7%
80+	479	8.8%	31,829	4.4%
Total	5,472	100.0%	724,840	100.0%
0-17	1,297	23.7%	161,317	22.3%
65+	1,101	20.1%	102,722	14.2%

2



3

Female Population and Percentage Female by Age, 2009-2013 ACS Estimates				
Age Group	Ransom County		North Dakota	
	Number	Percent	Number	Percent
0-9	261	43.4%	45,342	49.4%
10-19	430	50.5%	44,988	48.2%
20-29	173	44.1%	55,615	44.7%
30-39	225	42.4%	41,092	45.1%
40-49	395	51.0%	39,675	49.9%
50-59	427	49.2%	50,656	49.7%
60-69	263	43.1%	34,361	49.5%
70-79	211	57.8%	21,254	51.5%
80+	289	60.3%	20,546	64.5%
Total	2,674	48.9%	353,530	48.8%
0-17	601	46.3%	78,484	48.7%
65+	609	55.3%	50,201	48.9%

4

Decennial Population Change, 1990 to 2000, 2000 to 2010				
Census	Ransom County	10 Year Change	North Dakota	10 Year Change
1990	5,921	(%)	638,800	(%)
2000	5,890	-0.5%	642,200	0.5%
2010	5,457	-7.4%	672,591	4.7%

POPULATION DATA

5

Race, 2009-2013 ACS Estimates				
Race	Ransom County		North Dakota	
	Number	Percentage	Number	Percentage
Total	5,472	100.0%	723,393	100.0%
White	5,342	97.6%	643,478	89.0%
Black	26	0.5%	10,827	1.5%
Am Indian	13	0.2%	40,214	5.6%
Asian	9	0.2%	9,096	1.3%
Pac. Islander	0	0.0%	371	0.1%
Other	5	0.1%	4,620	0.6%
Multirace	77	1.4%	29,574	4.1%

6

Household Populations, 2011-2013 ACS Three Year Estimates				
	Ransom County		North Dakota	
	Number	Percent	Number	Percent
Total	5,472	100.0%	703,203	100.0%
In Family Households	4,326	79.1%	530,615	75.5%
In Non-Family Households	975	17.8%	146,330	20.8%
Total In Households	5,301	96.9%	676,945	96.3%
Institutionalized*	141	2.6%	9,675	1.4%
Non-institutionalized*	0	0.0%	16,583	2.4%
Total in Group Quarters	141	2.6%	26,258	3.7%

7

Marital Status of Persons Age 15 and Older, 2009-2013 ACS Estimates				
Marital Status	Ransom County		North Dakota	
	Number	Percent	Number	Percent
Total Age 15+	4,441	100.0%	561,346	100.0%
Never Married	950	21.4%	177,385	31.6%
Now Married	2,594	58.4%	291,900	52.0%
Separated	89	2.0%	5,052	0.9%
Widowed	351	7.9%	33,681	6.0%
Divorced	457	10.3%	53,328	9.5%

8

Educational Attainment Among Persons 25+, 2009-2013 ACS Estimates				
Education	Ransom County		North Dakota	
	Number	Percent	Number	Percent
Total	3,868	100.0%	457,771	100.0%
Less than 9th Grade	228	5.9%	19,226	4.2%
Some High School	240	6.2%	21,057	4.6%
High school or GRE	1,389	35.9%	125,429	27.4%
Some College / <u>Asso.</u> Degree	1,373	35.5%	168,002	36.7%
Bachelor's degree	499	12.9%	89,723	19.6%
Post Graduate Degree	139	3.6%	34,791	7.6%

9

Persons with Disability, 2009-2013 ACS Estimates				
Group	Ransom County		North Dakota	
	Number	Percent	Number	Percent
Total	5,301	100.0%	688,158	100.0%
Any Disability	771	14.5%	72,762	10.6%
No Disability	4,530	85.5%	615,396	89.4%
<u>Self Care</u> Disability	87	1.7%	11,274	1.6%
0-17 with any disability	28	2.2%	4,677	2.9%
18-64 with any disability	402	13.1%	35,931	7.8%
65+ with any disability	341	36.5%	32,154	31.3%

10

Income and Poverty Status by Age Group, 2009-2013 ACS Estimates				
	Ransom County		North Dakota	
Median Household Income	\$49,788		\$54,920	
Per Capita Income	\$26,137		\$30,436	
	Number	Percent	Number	Percent
Below Poverty Level	504	9.5%	80,644	11.9%
Under 5 years	32	10.4%	7,714	16.9%
5 to 11 years	47	11.7%	7,944	13.2%
12 to 17 years	42	7.4%	5,776	11.8%
18 to 64 years	288	9.4%	49,568	11.6%
65 to 74 years	27	6.0%	3,448	7.0%
75 years and over	68	14.1%	6,194	13.7%
Total Known Children in Poverty	121	9.3%	21,434	13.3%
Total Known Age 65+ in Poverty	95	8.6%	9,642	9.4%

11

Family Poverty, 2009-2013 ACS Estimates				
	Ransom County		North Dakota	
	Number	Percent*	Number	Percent*
Total Families	1,399	100.0%	176,378	100.0%
Families in Poverty	62	4.4%	13,052	7.4%
Families with Own Children	593	42.4%	80,964	45.9%
Families with Own Children in Poverty	49	3.5%	10,121	5.7%
Families with Own Children and Female Parent Only	64	4.6%	16,716	9.5%
Families with Own Children and Female Parent Only in Poverty	30	2.1%	6,452	3.7%

* Percent family poverty is percent of total families

12

Age of Housing, 2009-2013 ACS Estimates				
	Ransom County		North Dakota	
	Number	Percent	Number	Percent
Housing units: Total	2,647	100.0%	329,970	100.0%
1980 and Later	799	30.2%	128,111	38.8%
1970 to 1979	413	15.6%	66,396	20.1%
Prior to 1970	1,435	54.2%	135,463	41.1%

13

Births, 2009-2013				
	Ransom County		North Dakota	
	Number	Rate or Ratio	Number	Rate or Ratio
Live Births and Rate	302	11	47,959	14
Pregnancies and Rate	325	12	52,505	15
Fertility Rate		96		72
Teen Births and Rate	18	10	2,118	12
Teen Pregnancies and Rate	23	13	3,725	21
Out of Wedlock Births and Ratio	109	361	15,686	327
Out of Wedlock <u>Preg</u> and Ratio	125	385	19,436	370
Low Birth Weight Birth and Ratio	22	73	3,078	64

14

Child Deaths, 2009-2013				
	Ransom County		North Dakota	
	Number	Rate or Ratio	Number	Rate or Ratio
Infant Deaths and Ratio	*	NA	286	6
Child and Adolescent Deaths and Rate	*	NA	270	32
Total Deaths and Crude Rate	389	1,422	29,616	866

15

Deaths and Age Adjusted Death Rate by Cause, 2009-2013		
	Ransom County	North Dakota
	Number (Adj. Rate)	Number (Adj. Rate)
All Causes	388 (768)	29,581 (702)
Heart Disease	95 (155)	6,762 (154)
Cancer	81 (186)	6,315 (156)
Stroke	27 (45)	1,664 (37)
<u>Alzheimers</u> Disease	18 (28)	2,189 (45)
COPD Unintentional Injury	28 (59)	1,707 (41)
Diabetes Mellitus	16 (47)	1,625 (44)
Pneumonia and Influenza	16 (35)	1,022 (24)
Cirrhosis	14 (22)	682 (15)
Suicide	6 (17)	394 (11)
	*	551 (16)

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Leading Causes of Death by Age Group for Ransom County, 2009-2013			
Age	1	2	3
0-4	Unintentional Injury		
5-14			
15-24	Suicide		
25-34	Unintentional Injury	Cancer	
35-44	Unintentional Injury	Cancer	Cirrhosis
45-54	Cancer	Heart	Suicide
	Unintentional Injury		Stroke
55-64	Cancer	Heart	COPD
	9	5	Stroke
65-74	Cancer	Heart	COPD
	21	8	
75-84	Cancer	Heart	COPD
	25	19	11
85+	Heart	Cancer	Stroke
	61	21	16

17

Leading Causes of Death by Age Group for North Dakota, 2006-2010			
Age	1	2	3
0-4	Concaenital Anomalv 69	Prematurity 44	SIDS 40
5-14	Unintentional Injurv 26	Cancer 10	Concaenital Anomalv 6
15-24	Unintentional Injurv 184	Suicide 109	Cancer 20
25-34	Unintentional Injurv 166	Suicide 91	Heart 32
35-44	Unintentional Injurv 173	Heart 94	Cancer 88
45-54	Cancer 493	Heart 335	Unintentional Injurv 194
55-64	Cancer 1001	Heart 579	Unintentional Injurv 137
65-74	Cancer 1562	Heart 843	COPD 313
75-84	Cancer 1992	Heart 1797	COPD 626
85+	Heart 3421	Alzheimer's Dz 1391	Cancer 1352

ADULT BEHAVIORAL RISK FACTORS DEFINITION

The following three pages represent data received from the Adult Behavioral Risk Factor Surveillance Survey. The Adult Behavioral Risk Factor data are derived from aggregated data (the number of years specified is in the table) continuously collected by telephone survey from persons 18 years and older. All data is self-reported data. Numbers given are point estimate percentages followed by 95% confidence intervals. Statistical significance can be determined by comparing confidence intervals between two geographic areas. To be statistically significant, confidence intervals may not overlap. For example the confidence intervals 9.3 (8.3-10.2) and 10.8 (10.0-11.6) overlap (see picture below) so the difference between the two numbers is not statistically significant. That means that substantial uncertainty remains whether the apparent difference is due to chance alone (due to sampling variation) rather than representing a true difference in the prevalence of the condition in the two populations. The less they overlap, the more likely it is that the point estimates represent truly different prevalence's in the two populations.

18

Binge Drinking	Respondents who reported binge drinking (5 drinks for men, 4 drinks for women) one or more times in the past 30 days.	28.1 (20.7-35.4)	24.3 (18.8-29.9)	24.2 (23.2-25.1)
Heavy Drinking	Respondents who reported heavy drinking (more than 2 drinks per day for men, more than 1 drink per day for women) during the past 30 days	12.1 (6.4-17.7)	7.5 (4.3-10.7)	6.8 (6.2-7.4)
Drunk Driving	Respondents who reported driving when they had too much to drink one or more times during the past 30 days	NA	NA	1.9 (1.5-2.4)
Doctor Diagnosed Arthritis	Respondents who reported ever have been told by a doctor or other health professional that they had some form of arthritis.	33.2 (26.5-39.9)	28.8 (24.4-33.3)	25.1 (24.3-25.9)
Activity Limitation Due to Arthritis	Respondents who reported being limited in any usual activities because of arthritis or joint symptoms.	12.5 (7.6-17.3)	9.5 (6.6-12.4)	8.3 (7.8-8.8)
Ever Asthma	Respondents who reported ever having been told by a doctor, nurse or other health professional that they had asthma.	11.2 (5.7-16.7)	10.6 (7.1-14.2)	11.5 (10.7-12.2)
Current Asthma	Respondents who reported ever having been told by a doctor, nurse or other health professional that they had asthma and who still have asthma.	8.5 (3.3-13.7)	8.2 (4.9-11.6)	8.1 (7.5-8.7)
Overweight But Not Obese	Respondents with a body mass index greater than or equal to 25 but less than 30 (overweight)	36.6 (28.8-44.4)	37.8 (32.0-43.7)	36.7 (35.7-37.7)
Obese	Respondents with a body mass index greater than or equal to 30 (obese)	30.5 (24.0-37.1)	33.8 (28.1-39.5)	29.4 (28.5-30.4)
Overweight or Obese	Respondents with a body mass index greater than or equal to 25 (overweight or obese)	67.2 (59.3-75.0)	71.6 (65.9-77.3)	66.1 (65.1-67.2)
Ever Cancer	Respondents who reported ever having been told by a doctor, nurse or other health professional that they had cancer (excluding skin cancer).	6.2 (3.2- 9.1)	7.5 (5.2- 9.9)	6.4 (6.0-6.8)

ADULT BEHAVIORAL RISK FACTORS, 2011-2013

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	CARDIOVASCULAR	Sargent, Ransom Counties 2011-2013	Trill, Steele, Sargent, Ransom 2011-2013	North Dakota 2011-2013
Heart Attack	Respondents who reported ever having been told by a doctor, nurse or other health care professional that they had a heart attack.	4.8 (2.5- 7.0)	4.0 (2.5- 5.5)	4.3 (3.9- 4.6)
Angina	Respondents who reported ever having been told by a doctor, nurse or other health care professional that they had angina.	NA	3.3 (1.8- 4.7)	4.1 (3.7-4.4)
Stroke	Respondents who reported ever having been told by a doctor, nurse or other health care professional that they had a stroke.	NA	NA	2.3 (2.0-2.5)
Cardiovascular Disease	Respondents who reported ever having been told by a doctor, nurse or other health care professional that they had any of the following: heart attack, angina or stroke.	6.7 (4.1- 9.3)	6.5 (4.5- 8.4)	7.6 (7.1- 8.0)
CHOLESTEROL				
Never Cholesterol Test	Respondents who reported never having a cholesterol test	15.8 (8.9-22.7)	19.0 (12.6- 25.4)	22.3 (21.1- 23.4)
No Cholesterol Test in Past 5 Years	Respondents who reported never having a cholesterol test in the past five years	21.4 (13.5- 29.3)	24.6 (18.0- 31.1)	26.7 (25.5- 27.9)
High Cholesterol	Respondents who reported that they had ever been told by a doctor, nurse or other health professional that they had high cholesterol.	40.4 (31.8- 49.0)	40.3 (33.8- 46.9)	36.6 (35.4- 37.8)
CHRONIC LUNG DISEASE				
COPD	Respondents who have ever been told by a doctor, nurse or other health professional ever told you that they have COPD (chronic obstructive pulmonary disease), emphysema, or chronic bronchitis?	NA	5.7 (3.5- 7.9)	4.0 (4.2-5.0)
COLORECTAL CANCER				
Fecal Occult Blood	Respondents age 50 and older who reported not having a fecal occult blood test in the past two years.	NA	81.5 (73.2-89.9)	86.2 (84.8-87.6)
Never Sigmoidoscopy	Respondents age 50 and older who reported never having had a sigmoidoscopy or colonoscopy	NA	45.2 (33.4-56.9)	38.0 (35.9-40.2)
Up to date for Colorectal Screening	Respondents age 50 and older who are up to date according to recommended screening guidelines for colorectal screening	NA	53.8 (42.1-65.4)	59.1 (56.9-61.3)
DIABETES				
Diabetes Diagnosis	Respondents who reported ever having been told by a doctor that they had diabetes.	9.4 (5.5-13.2)	9.9 (7.0-12.8)	8.5 (8.0- 9.0)
FRUITS AND VEGETABLES				
Five Fruits and Vegetables	Respondents who reported that they do not usually eat 5 fruits and vegetables per day	90.6 (85.8- 95.3)	87.5 (82.8- 92.2)	85.9 (85.0- 86.7)

ADULT BEHAVIORAL RISK FACTORS, 2011-2013

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	GENERAL HEALTH	Sargent, Ransom Counties 2011-2013	Traill, Steele, Sargent, Ransom 2011-2013	North Dakota 2011-2013
Fair or Poor Health	Respondents who reported that their general health was fair or poor	9.6 (8.0-13.3)	11.8 (8.8-14.9)	14.0 (13.3-14.7)
Poor physical Health	Respondents who reported they had 8 or more days in the last 30 when their physical health was not good	7.7 (3.2-12.3)	9.1 (5.8-12.4)	11.6 (11.0-12.3)
Poor Mental Health	Respondents who reported they had 8 or more days in the last 30 when their mental health was not good	9.6 (4.0-15.1)	10.3 (8.2-14.4)	10.8 (10.2-11.5)
Activity Limitation Due to Poor Health	Respondents who reported they had 8 or more days in the last 30 when poor physical or mental health kept them from doing their usual activities.	NA	NA	7.1 (6.6-7.6)
Any Activity Limitation	Respondents who reported being limited in any way due to physical, mental or emotional problem.	13.3 (8.8-17.7)	15.2 (11.7-18.7)	17.9 (17.2-18.7)
HEALTH CARE ACCESS				
Health Insurance	Respondents who reported not having any form or health care coverage	NA	9.0 (5.5-12.4)	12.4 (11.6-13.1)
Access Limited by Cost	Respondents who reported needing to see a doctor during the past 12 months but could not due to cost.	NA	NA	8.1 (7.4-8.7)
No Personal Provider	Respondents who reported that they did not have one person they consider to be their personal doctor or health care provider.	20.2 (14.0-26.4)	20.4 (15.5-25.4)	26.0 (25.0-26.9)
HYPERTENSION				
High Blood Pressure	Respondents who reported ever having been told by a doctor, nurse or other health professional that they had high blood pressure.	34.0 (26.2-41.7)	28.9 (23.5-34.3)	29.5 (28.6-30.6)
IMMUNIZATION				
Influenza Vaccine	Respondents age 65 and older who reported that they did not have a flu shot in the past year	NA	37.5 (24.2-40.9)	40.3 (38.6-42.0)
Pneumococcal Vaccine	Respondents age 65 or older who reported never having had a pneumonia shot.	NA	28.2 (19.6-36.8)	29.4 (27.8-31.0)
INJURY				
Fall	Respondents 45 years and older who reported that they had fallen in the past 12 months	NA	28.2 (19.0-37.5)	27.8 (25.9-29.8)
Seat Belt	Respondents who reported not always wearing their seatbelt	49.6 (41.5-57.8)	47.8 (41.9-53.7)	32.6 (31.6-33.6)

ADULT BEHAVIORAL RISK FACTORS, 2011-2013

	ORAL HEALTH	Sargent, Ransom Counties 2011-2013	Traill, Steele, Sargent, Ransom 2011-2013	North Dakota 2011-2013
Dental Visit	Respondents who reported that they have not had a dental visit in the past year	NA	NA	32.8 (31.0-34.7)
Tooth Loss	Respondents who reported they ever had a permanent tooth extracted.	NA	NA	43.2 (41.4-45.0)
PHYSICAL ACTIVITY				
Recommend Physical Activity	Respondents who reported that they did not get the recommended amount of physical activity	55.3 (45.8-64.7)	51.7 (44.8-58.8)	53.8 (52.6-55.1)
Inactive	Respondents reporting little or no physical activity	34.5 (25.7-43.2)	29.7 (23.4-36.0)	30.4 (29.3-31.6)
TOBACCO				
Current Smoking	Respondents who reported that they smoked every day or some days	18.4 (12.4-24.4)	18.0 (13.4-22.5)	21.8 (20.6-22.5)
WOMEN'S HEALTH				
Pap Smear	Women 18 and older who reported that they have not had a pap smear in the past three years	NA	NA	23.7 (20.9-26.5)
Mammogram Age 40+	Women 40 and older who reported that they have not had a mammogram in the past two years	NA	NA	26.4 (24.0-28.9)

CRIME

Sargent County							
	2009	2010	2011	2012	2013	5 year	5-Year Rate
Murder	0	0	0	0	0	0	0.0
Rape	0	0	0	0	0	0	0.0
Robbery	0	0	0	0	0	0	0.0
Aggrav. Assault	3	0	3	0	0	6	30.8
Violent crime	3	0	3	0	0	6	30.8
Burglary	2	7	5	8	4	26	133.5
Larceny	19	23	18	13	11	84	431.4
Motor vehicle theft	3	3	1	0	1	8	41.1
Property crime	24	33	24	21	16	118	608.1
Total	27	33	27	21	16	124	638.9

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CRIME

23

Ransom County							
	2009	2010	2011	2012	2013	5 year	5-Year Rate
Murder	0	0	0	1	0	1	3.6
Rape	2	1	1	0	0	4	14.4
Robbery	1	0	0	0	0	1	3.6
Aggrav. Assault	1	5	2	2	4	14	50.5
Violent crime	4	6	3	3	4	20	72.1
Burglary	33	23	24	20	7	107	385.7
Larceny	23	24	22	34	24	127	457.7
Motor vehicle theft	5	5	2	6	2	20	72.1
Property crime	61	52	48	60	33	254	915.5
Total	65	58	51	63	37	274	987.6

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North Dakota

	2009	2010	2011	2012	2013	5 year	5-Year Rate
Murder	15	11	15	20	14	75	2.2
Rape	206	222	207	243	237	1,115	32.6
Robbery	102	85	91	117	151	546	16.0
Aggrav. Assault	795	847	1,040	1,071	1,156	4,909	143.6
Violent crime	1,118	1,165	1,353	1,451	1,558	6,645	194.3
Burglary	2,180	1,826	2,227	2,200	2,656	11,089	324.3
Larceny	8,699	8,673	9,344	10,184	10,243	47,143	1378.6
Motor vehicle theft	854	825	783	854	1,228	4,524	132.3
Property crime	11,733	11,324	12,334	13,238	14,127	62,756	1835.2
Total	12,851	12,489	13,687	14,689	15,685	69,401	2029.5

III. Community Input

Interviews

One-on-one interviews with key informants were conducted in person or via phone in Ransom and Sargent counties. Representatives from CHI Lisbon Health conducted the interviews. The individuals selected for interview included those persons who had special knowledge of public health as well as broad interests of the community that CHI Lisbon Health serves. This included individuals from Ransom and Sargent Public Health, area law enforcement, City Mayor, senior service coordinator for the counties, School superintendent and presidents of local community service groups of Civic and Commerce and Kiwanis. These interviews took place from Jan 2016-Mar 2016.

Topics covered during these interviews included but not limited to, the most troubling health problems in our communities, issues of concern to the general public officials and the programs already in place to address some of the items identified.

Priority populations included low income services, uninsured and underinsured and persons with disabilities, medical conditions and minorities. These specific populations are included through input from Senior services, public health and Freedom Resources.

Mental health is the number one issue identified by the community member interviews. Mental health is a broad topic which includes alcohol abuse, drug issues both street drugs and prescription drug use, depression, and domestic violence issues. Obesity was identified as a significant need through both public health department interviews and seen as a direct correlation to mental well-being.

It was identified through the interview process that there is a lack of available mental health services in the area. It was noted that law enforcement has seen a significant increase in emergency calls related to mental health from 3-4 calls per month to 3-4 calls per week an increase noted throughout the last 20 years. Juvenile system lacks availability of beds and support.

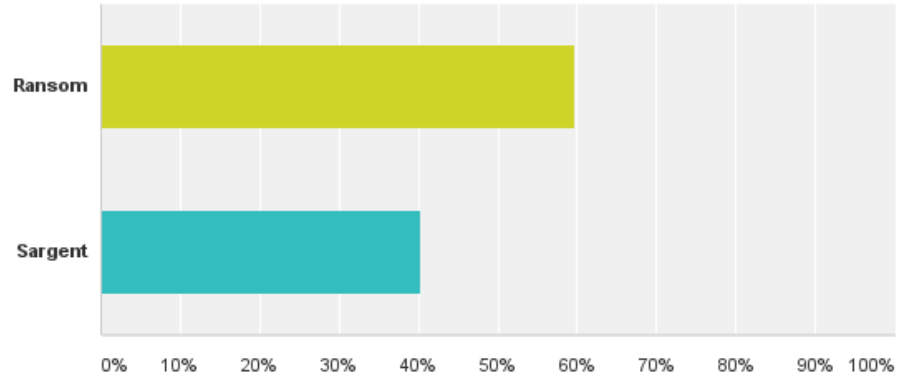
Also identified was not enough funding to have programs/resources and facilities available for a variety of needs. A great number of senior service programs are in place and available. There are not sufficient number of people committing to participate in the programs. Other programs that are offered regarding preventative health are underutilized.

Following this paragraph is the actual results of the CHNA survey. Question # 48 is written comments section of the survey which included the following 7 comments: wanting a hearing test, too long of survey, need SE social services and YMCA for childcare/eldercare, counseling fitness and nutrition, access to non-sport activities for youth, big drug issue that needs addressing, cost of health care: too many on assistance and not working when jobs are available

Findings of Survey

Q1 In what county do you currently reside ?

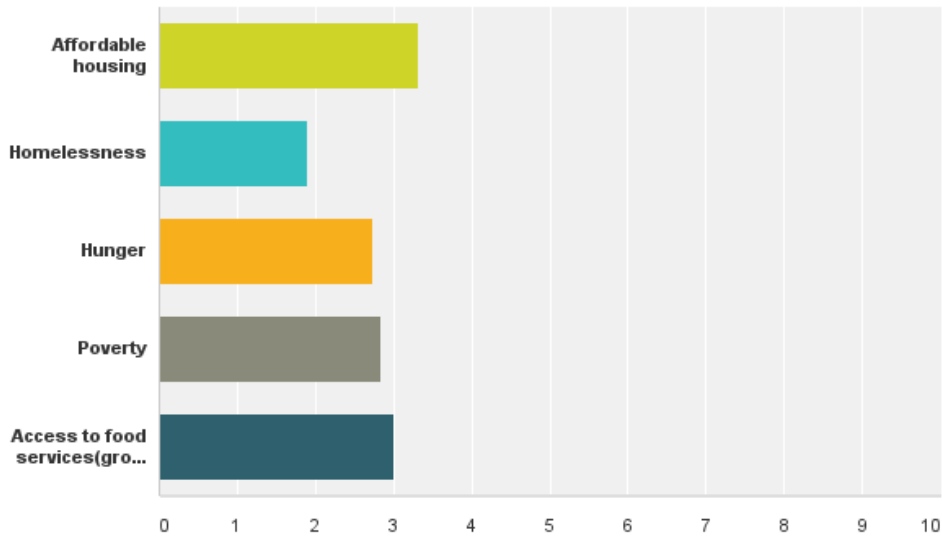
Answered: 102 Skipped: 0



Answer Choices	Responses
Ransom	59.80% 61
Sargent	40.20% 41
Total	102

Q2 Considering your COMMUNITY, what is your level of concern with ECONOMICS issues such as:

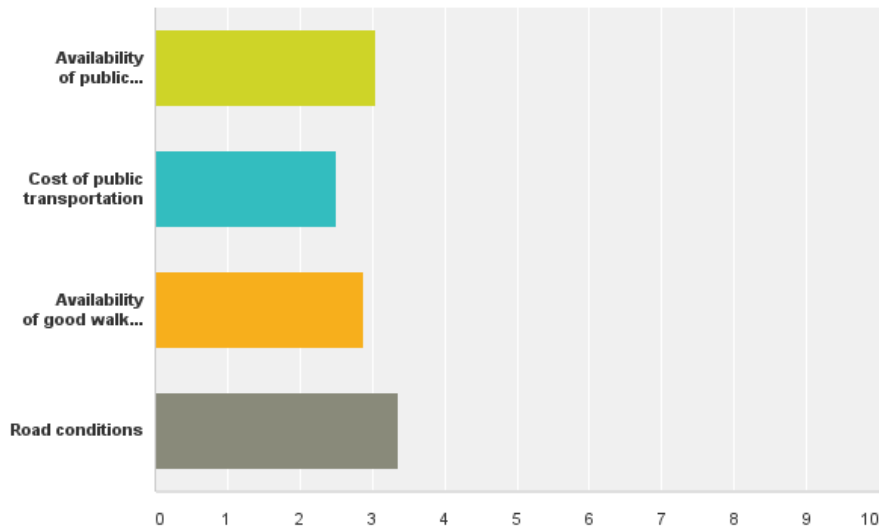
Answered: 102 Skipped: 0



	1= not at all	2	3	4	5= a great deal	Total	Weighted Average
Affordable housing	7.92% 8	16.83% 17	29.70% 30	26.73% 27	18.81% 19	101	3.32
Homelessness	40.20% 41	38.24% 39	14.71% 15	4.90% 5	1.96% 2	102	1.90
Hunger	9.80% 10	35.29% 36	33.33% 34	14.71% 15	6.86% 7	102	2.74
Poverty	8.82% 9	30.39% 31	37.25% 38	15.69% 16	7.84% 8	102	2.83
Access to food services(groceries, senior meals, food pantries, etc.)	11.76% 12	23.53% 24	30.39% 31	21.57% 22	12.75% 13	102	3.00

Q3 Considering your COMMUNITY, what is your level of concern with TRANSPORTATION issues such as:

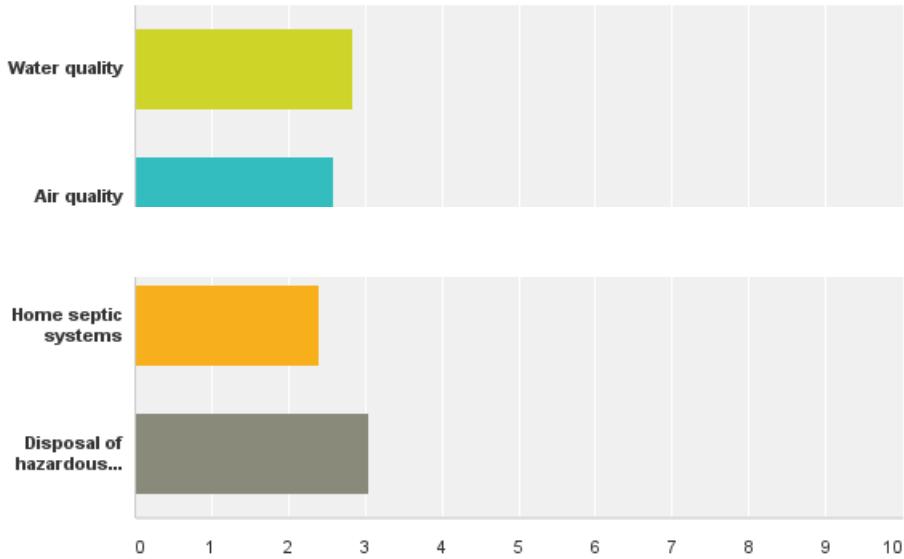
Answered: 102 Skipped: 0



	1= not at all	2	3	4	5= a great deal	Total	Weighted Average
Availability of public transportation	17.65% 18	13.73% 14	32.35% 33	18.63% 19	17.65% 18	102	3.05
Cost of public transportation	27.72% 28	26.73% 27	24.75% 25	9.90% 10	10.89% 11	101	2.50
Availability of good walking or biking options	25.49% 26	12.75% 13	26.47% 27	17.65% 18	17.65% 18	102	2.89
Road conditions	11.88% 12	14.85% 15	24.75% 25	21.78% 22	26.73% 27	101	3.37

Q4 Considering your COMMUNITY, what is your level of concern with ENVIROMENTAL issues such as:

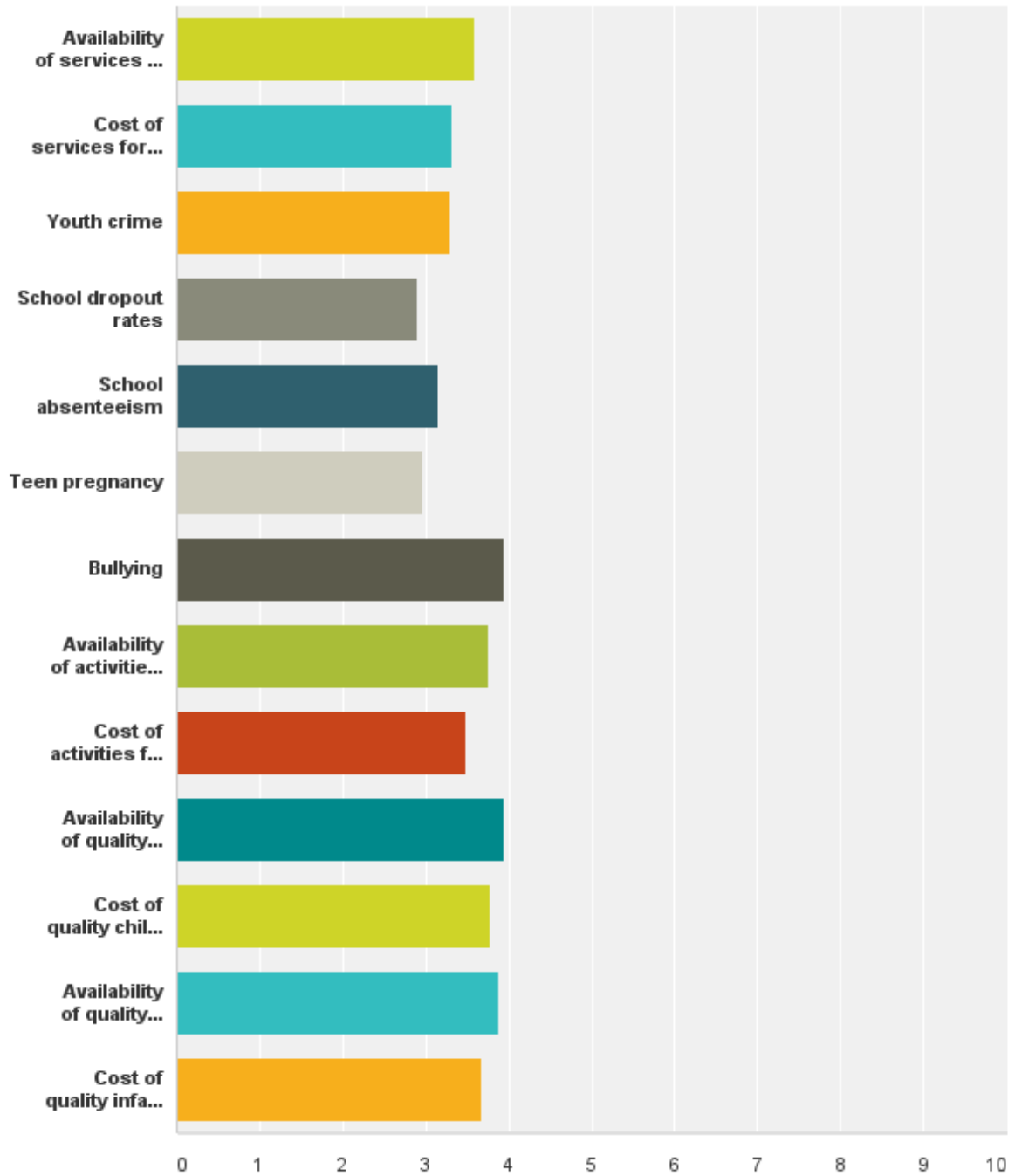
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	1=not at all	2	3	4	5= a great deal	Total	Weighted Average
Water quality	28.00% 28	18.00% 18	18.00% 18	14.00% 14	22.00% 22	100	2.84
Air quality	30.00% 30	27.00% 27	15.00% 15	10.00% 10	18.00% 18	100	2.59
Home septic systems	31.63% 31	26.53% 26	22.45% 22	8.16% 8	11.22% 11	98	2.41
Disposal of hazardous waste(batteries ,paint,chemicals,electronics, etc.)	21.00% 21	20.00% 20	14.00% 14	24.00% 24	21.00% 21	100	3.04

Q5 Considering your COMMUNITY, what is your level of concern with CHILDREN and YOUTH issues such as:

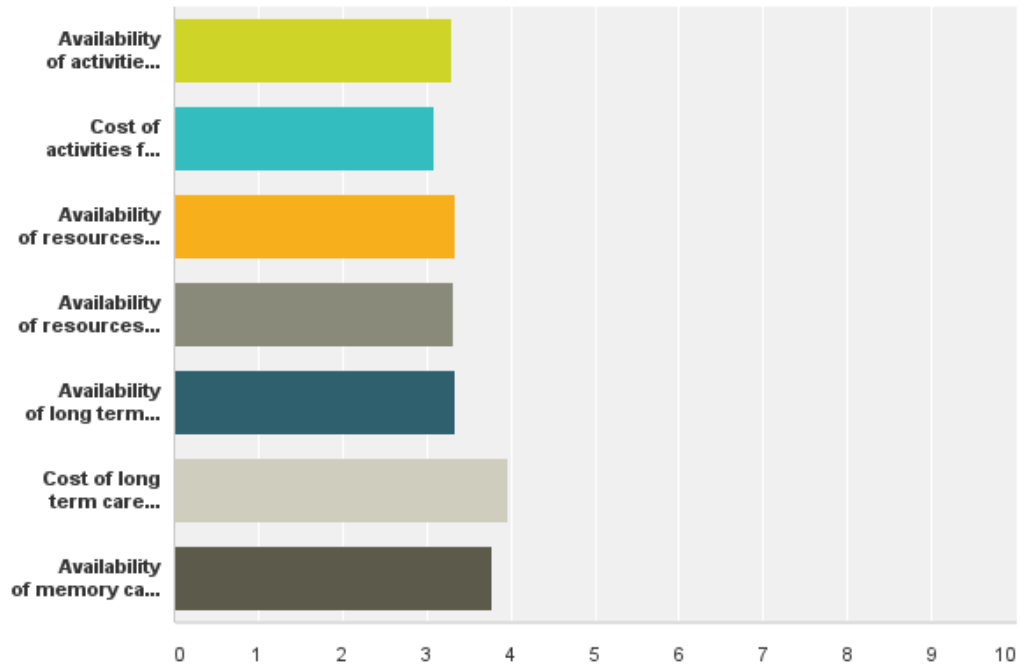
Answered: 102 Skipped: 0



	1=not at all	2	3	4	5=a great deal	Total	Weighted Average
Availability of services for at-risk youth	8.91% 9	8.91% 9	26.73% 27	23.76% 24	31.68% 32	101	3.60
Cost of services for at-risk youth	8.91% 9	19.80% 20	26.73% 27	20.79% 21	23.76% 24	101	3.31
Youth crime	8.91% 9	21.78% 22	27.72% 28	14.85% 15	26.73% 27	101	3.29
School dropout rates	12.75% 13	31.37% 32	25.49% 26	13.73% 14	16.67% 17	102	2.90
School absenteeism	11.76% 12	25.49% 26	20.59% 21	20.59% 21	21.57% 22	102	3.15
Teen pregnancy	12.75% 13	28.43% 29	24.51% 25	18.63% 19	15.69% 16	102	2.96
Bullying	3.92% 4	9.80% 10	17.65% 18	25.49% 26	43.14% 44	102	3.94
Availability of activities for children and youth	4.90% 5	9.80% 10	22.55% 23	29.41% 30	33.33% 34	102	3.76
Cost of activities for children and youth	7.92% 8	13.86% 14	26.73% 27	24.75% 25	26.73% 27	101	3.49
Availability of quality child care	4.95% 5	6.93% 7	14.85% 15	34.65% 35	38.61% 39	101	3.95
Cost of quality child care	3.96% 4	10.89% 11	20.79% 21	32.67% 33	31.68% 32	101	3.77
Availability of quality infant care(birth to 2 years of age)	5.94% 6	10.89% 11	10.89% 11	32.67% 33	39.60% 40	101	3.89
Cost of quality infant care	6.00% 6	13.00% 13	21.00% 21	27.00% 27	33.00% 33	100	3.68

Q6 Considering your COMMUNITY, what is your level of concern with these AGING POPULATION issues:

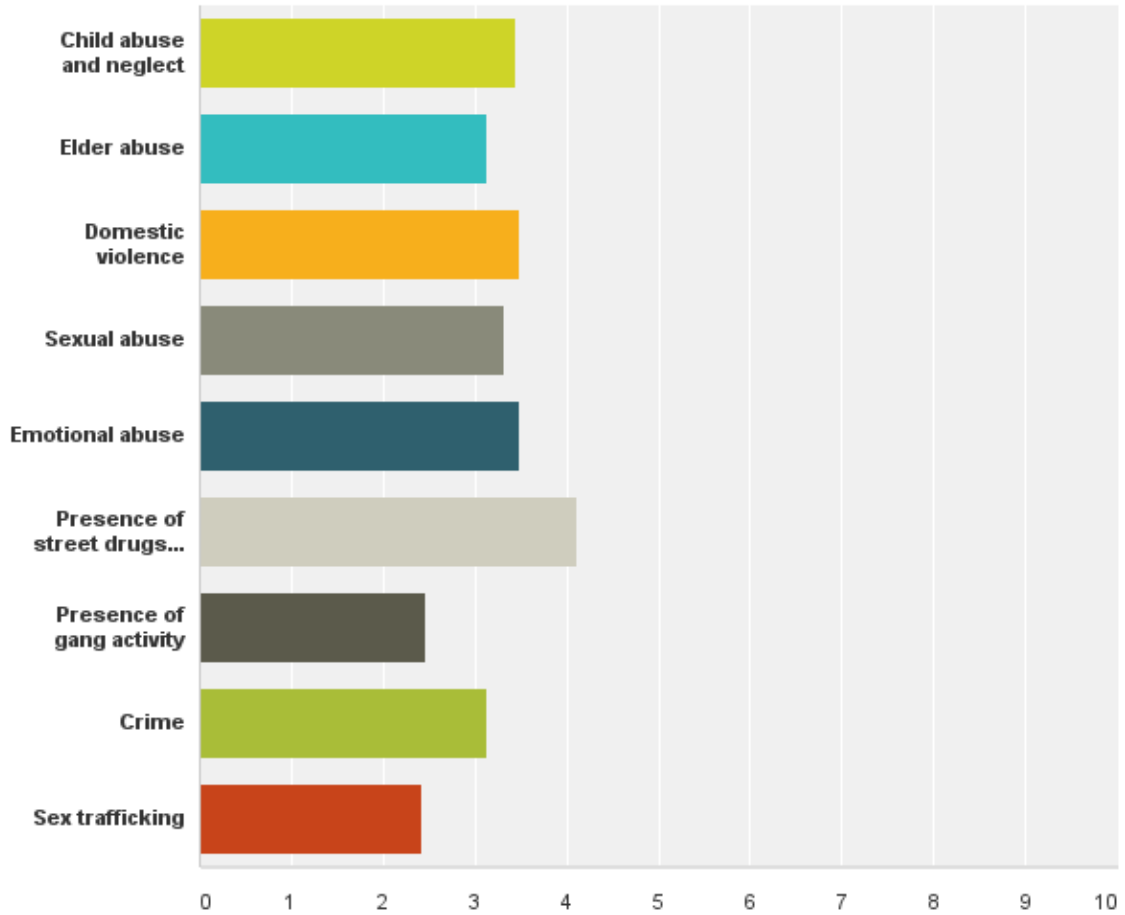
Answered: 102 Skipped: 0



	1=not at all	2	3	4	5=a great deal	Total	Weighted Average
Availability of activities for seniors	9.80% 10	18.63% 19	21.57% 22	32.35% 33	17.65% 18	102	3.29
Cost of activities for seniors	11.76% 12	19.61% 20	32.35% 33	21.57% 22	14.71% 15	102	3.08
Availability of resources to help the elderly stay safe in their home	8.91% 9	18.81% 19	23.76% 24	26.73% 27	21.78% 22	101	3.34
Availability of resources for family/friends caring for and making decisions for elders	8.82% 9	17.65% 18	25.49% 26	28.43% 29	19.61% 20	102	3.32
Availability of long term care facilities	10.78% 11	14.71% 15	25.49% 26	26.47% 27	22.55% 23	102	3.35
Cost of long term care facilities	3.96% 4	7.92% 8	15.84% 16	32.67% 33	39.60% 40	101	3.96
Availability of memory care facilities	3.92% 4	10.78% 11	24.51% 25	25.49% 26	35.29% 36	102	3.77

Q7 Considering your COMMUNITY, what is your level of concern with SAFETY items such as:

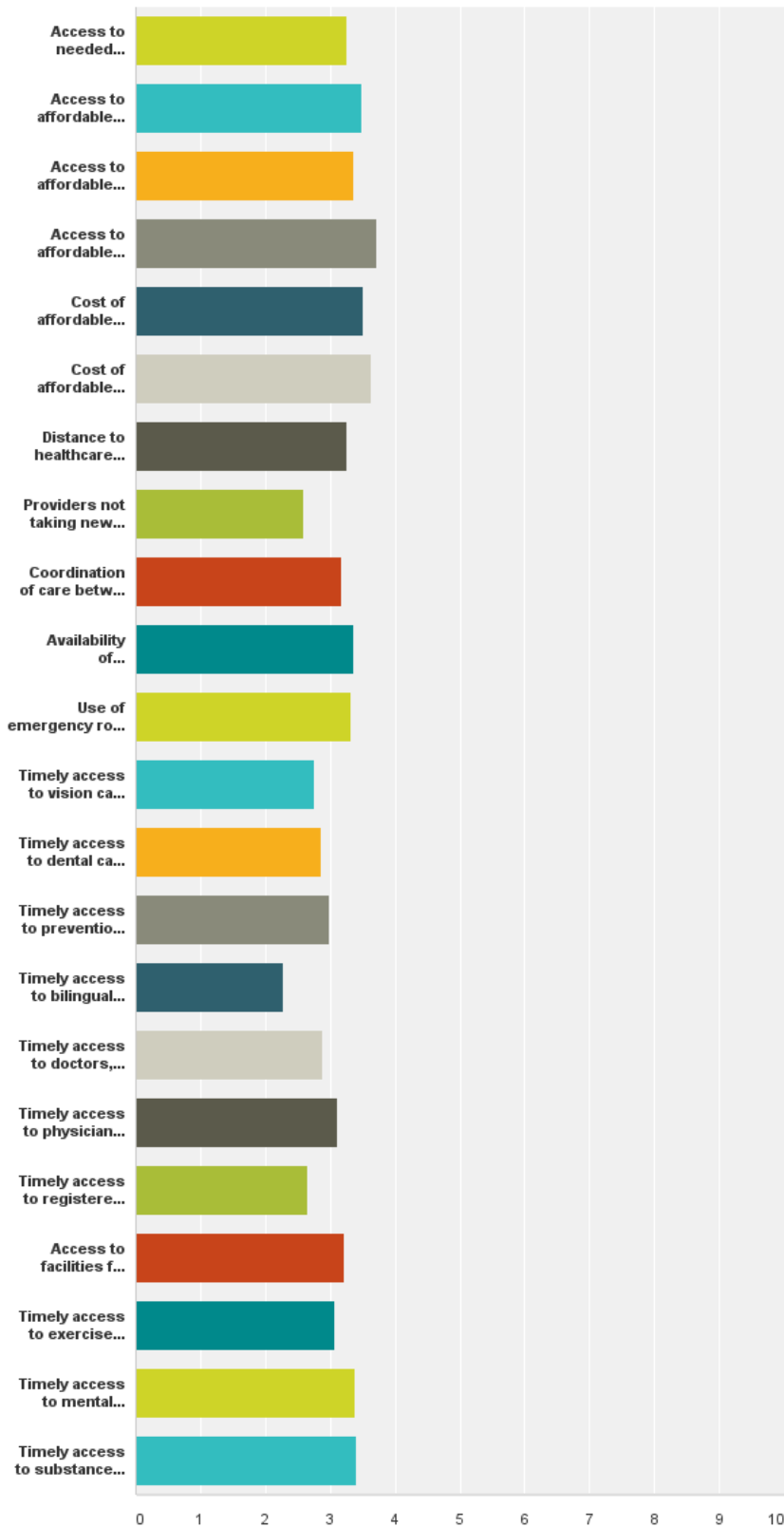
Answered: 102 Skipped: 0



	1=not at all	2	3	4	5=a great deal	Total	Weighted Average
Child abuse and neglect	6.86% 7	20.59% 21	21.57% 22	22.55% 23	28.43% 29	102	3.45
Elder abuse	11.88% 12	24.75% 25	25.74% 26	13.86% 14	23.76% 24	101	3.13
Domestic violence	5.88% 6	19.61% 20	22.55% 23	24.51% 25	27.45% 28	102	3.48
Sexual abuse	8.82% 9	21.57% 22	26.47% 27	14.71% 15	28.43% 29	102	3.32
Emotional abuse	6.86% 7	18.63% 19	22.55% 23	22.55% 23	29.41% 30	102	3.49
Presence of street drugs, prescription drugs, and alcohol in the community	4.90% 5	7.84% 8	10.78% 11	23.53% 24	52.94% 54	102	4.12
Presence of gang activity	29.41% 30	30.39% 31	17.65% 18	8.82% 9	13.73% 14	102	2.47
Crime	8.82% 9	25.49% 26	28.43% 29	17.65% 18	19.61% 20	102	3.14
Sex trafficking	32.35% 33	25.49% 26	21.57% 22	7.84% 8	12.75% 13	102	2.43

Q8 Considering your COMMUNITY, what is your level of concern with HEALTHCARE:

Answered: 102 Skipped: 0

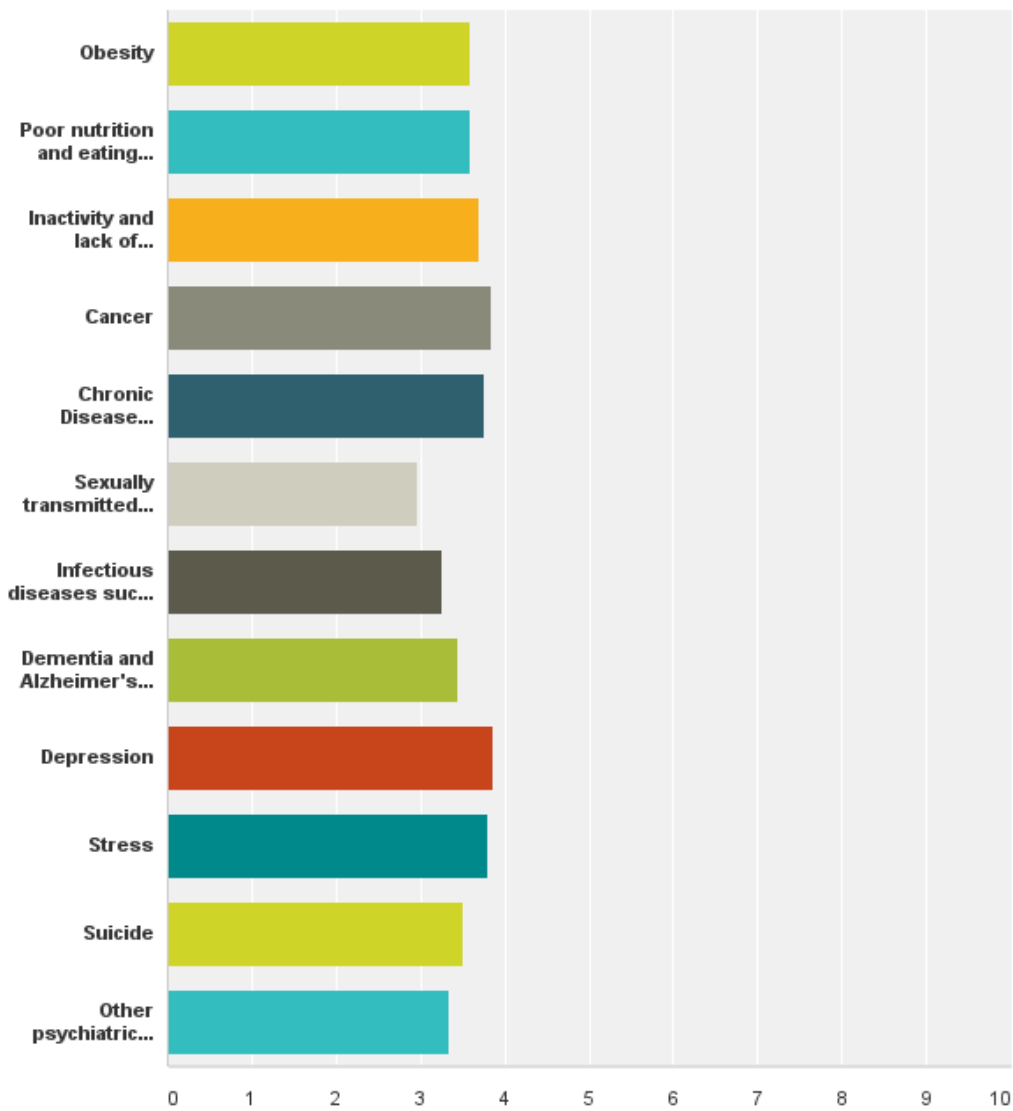


	1=not at all	2	3	4	5=a great deal	Total	Weighted Average
Access to needed technology and equipment	11.76% 12	21.57% 22	21.57% 22	20.59% 21	24.51% 25	102	3.25
Access to affordable healthcare	12.75% 13	15.69% 16	19.61% 20	14.71% 15	37.25% 38	102	3.48
Access to affordable prescription drugs	14.85% 15	18.81% 19	16.83% 17	14.85% 15	34.65% 35	101	3.36
Access to affordable health insurance	10.78% 11	12.75% 13	14.71% 15	17.65% 18	44.12% 45	102	3.72
Cost of affordable vision insurance	12.75% 13	13.73% 14	20.59% 21	15.69% 16	37.25% 38	102	3.51
Cost of affordable dental insurance	10.78% 11	10.78% 11	22.55% 23	15.69% 16	40.20% 41	102	3.64
Distance to healthcare services	15.84% 16	15.84% 16	19.80% 20	24.75% 25	23.76% 24	101	3.25
Providers not taking new patients	29.70% 30	22.77% 23	23.76% 24	6.93% 7	16.83% 17	101	2.58
Coordination of care between providers and services	12.75% 13	24.51% 25	18.63% 19	20.59% 21	23.53% 24	102	3.18
Availability of non-traditional hours (evenings, weekends, etc.)	9.80% 10	19.61% 20	19.61% 20	26.47% 27	24.51% 25	102	3.36
Use of emergency room services for primary healthcare	15.69% 16	13.73% 14	22.55% 23	19.61% 20	28.43% 29	102	3.31
Timely access to vision care providers	27.45% 28	16.67% 17	25.49% 26	13.73% 14	16.67% 17	102	2.75
Timely access to dental care providers	24.51% 25	15.69% 16	26.47% 27	14.71% 15	18.63% 19	102	2.87
Timely access to prevention programs and services	18.81% 19	14.85% 15	32.67% 33	16.83% 17	16.83% 17	101	2.98
Timely access to bilingual providers and/or translators	38.61% 39	18.81% 19	26.73% 27	7.92% 8	7.92% 8	101	2.28
Timely access to doctors, physician assistants, or nurse practitioners	18.63% 19	22.55% 23	26.47% 27	15.69% 16	16.67% 17	102	2.89
Timely access to physician specialists	15.69% 16	16.67% 17	26.47% 27	23.53% 24	17.65% 18	102	3.11
Timely access to registered dieticians	21.00% 21	23.00% 23	34.00% 34	13.00% 13	9.00% 9	100	2.66
Access to facilities for exercising	14.71% 15	10.78% 11	32.35% 33	22.55% 23	19.61% 20	102	3.22
Timely access to exercise specialists or personal trainers	11.76% 12	17.65% 18	35.29% 36	22.55% 23	12.75% 13	102	3.07
Timely access to mental health providers	14.71% 15	10.78% 11	24.51% 25	21.57% 22	28.43% 29	102	3.38
Timely access to substance abuse providers	13.73% 14	13.73% 14	20.59% 21	22.55% 23	29.41% 30	102	3.40

On **Question number 9**---What specific services do you feel your health care organization needs to add and why. There were a total of 29 responses of those 3 answered none, 5 responded with a gym, 10 responded with need for mental health/substance abuse and 2 responded with activities for youth.

Q10 Considering your COMMUNITY, what is your level of concern with these PHYSICAL and MENTAL HEALTH issues:

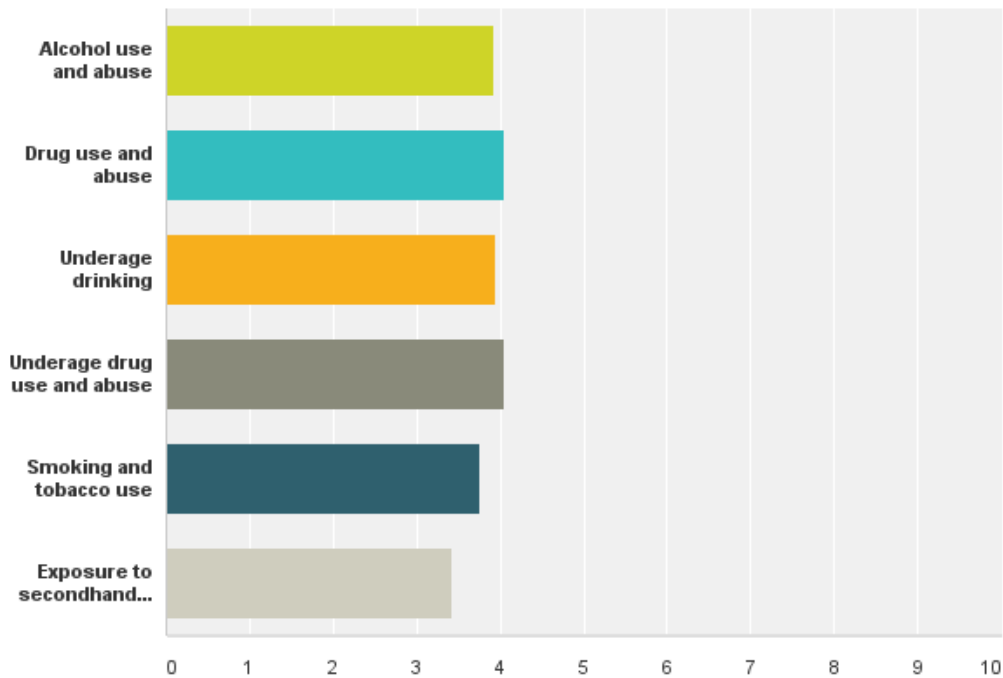
Answered: 102 Skipped: 0



	1= not at all	2	3	4	5= a great deal	Total	Weighted Average
Obesity	2.97% 3	12.87% 13	29.70% 30	29.70% 30	24.75% 25	101	3.60
Poor nutrition and eating habits	4.90% 5	8.82% 9	31.37% 32	31.37% 32	23.53% 24	102	3.60
Inactivity and lack of exercise	5.88% 6	6.86% 7	27.45% 28	32.35% 33	27.45% 28	102	3.69
Cancer	5.88% 6	4.90% 5	21.57% 22	33.33% 34	34.31% 35	102	3.85
Chronic Disease (diabetes, heart disease, multiple sclerosis, etc.)	4.04% 4	9.09% 9	24.24% 24	32.32% 32	30.30% 30	99	3.76
Sexually transmitted disease (AIDS, HIV, chlamydia, etc.)	12.87% 13	23.76% 24	29.70% 30	20.79% 21	12.87% 13	101	2.97
Infectious diseases such as the Flu	8.82% 9	18.63% 19	29.41% 30	24.51% 25	18.63% 19	102	3.25
Dementia and Alzheimer's disease	7.92% 8	12.87% 13	25.74% 26	33.66% 34	19.80% 20	101	3.45
Depression	3.96% 4	8.91% 9	16.83% 17	36.63% 37	33.66% 34	101	3.87
Stress	5.88% 6	5.88% 6	19.61% 20	38.24% 39	30.39% 31	102	3.81
Suicide	7.00% 7	16.00% 16	26.00% 26	22.00% 22	29.00% 29	100	3.50
Other psychiatric diagnosis (multiple personalities, bipolar, etc.)	10.00% 10	18.00% 18	26.00% 26	21.00% 21	25.00% 25	100	3.33

Q11 Considering your COMMUNITY, what is your level of concern with SUBSTANCE USE and ABUSE with these issues:

Answered: 102 Skipped: 0

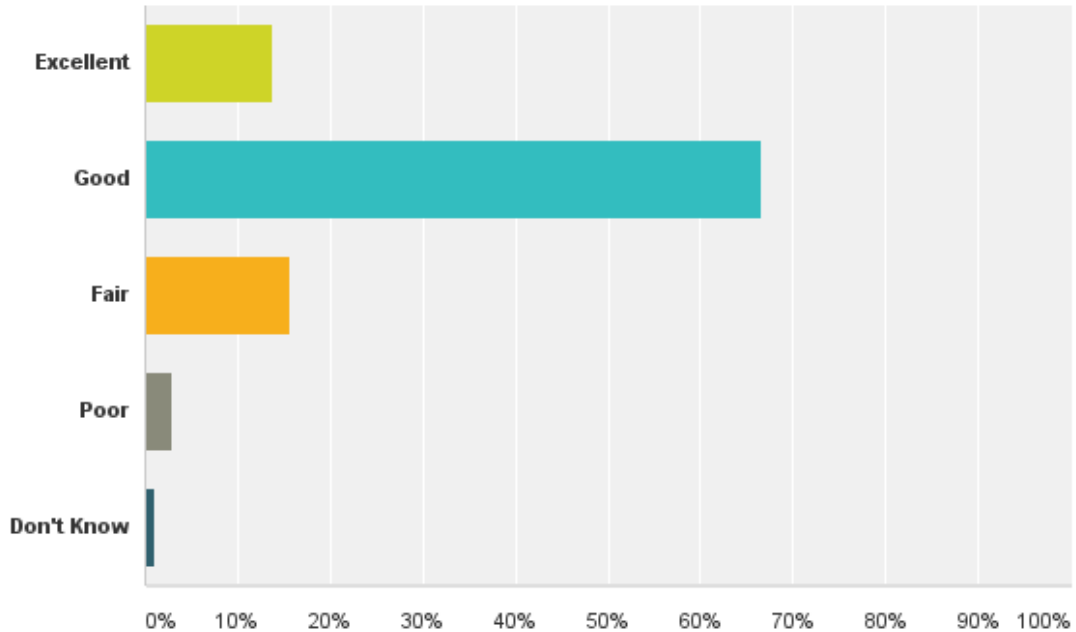


	1=not at all	2	3	4	5=a great deal	Total	Weighted Average
Alcohol use and abuse	5.88% 6	5.88% 6	14.71% 15	36.27% 37	37.25% 38	102	3.93
Drug use and abuse	3.92% 4	6.86% 7	15.69% 16	27.45% 28	46.08% 47	102	4.05
Underage drinking	3.92% 4	8.82% 9	14.71% 15	33.33% 34	39.22% 40	102	3.95
Underage drug use and abuse	2.97% 3	10.89% 11	9.90% 10	31.68% 32	44.55% 45	101	4.04
Smoking and tobacco use	3.92% 4	10.78% 11	21.57% 22	33.33% 34	30.39% 31	102	3.75
Exposure to secondhand smoke	8.82% 9	19.61% 20	24.51% 25	14.71% 15	32.35% 33	102	3.42

Question number 11 Considering your community, what is your level of concern with substance use and abuse with these issues. Of the 6 issues 5 were noted with a weighted average of 3.75 or higher with the highest for drug use and abuse at 4.05 with 75 responding with a 4 or 5. Second was underage drug use and abuse at a weighted average of 4.04 with 77 responding with a 4 or 5. Followed by underage drinking at 3.95,

Q12 In general, how would you rate YOUR HEALTH ?

Answered: 102 Skipped: 0



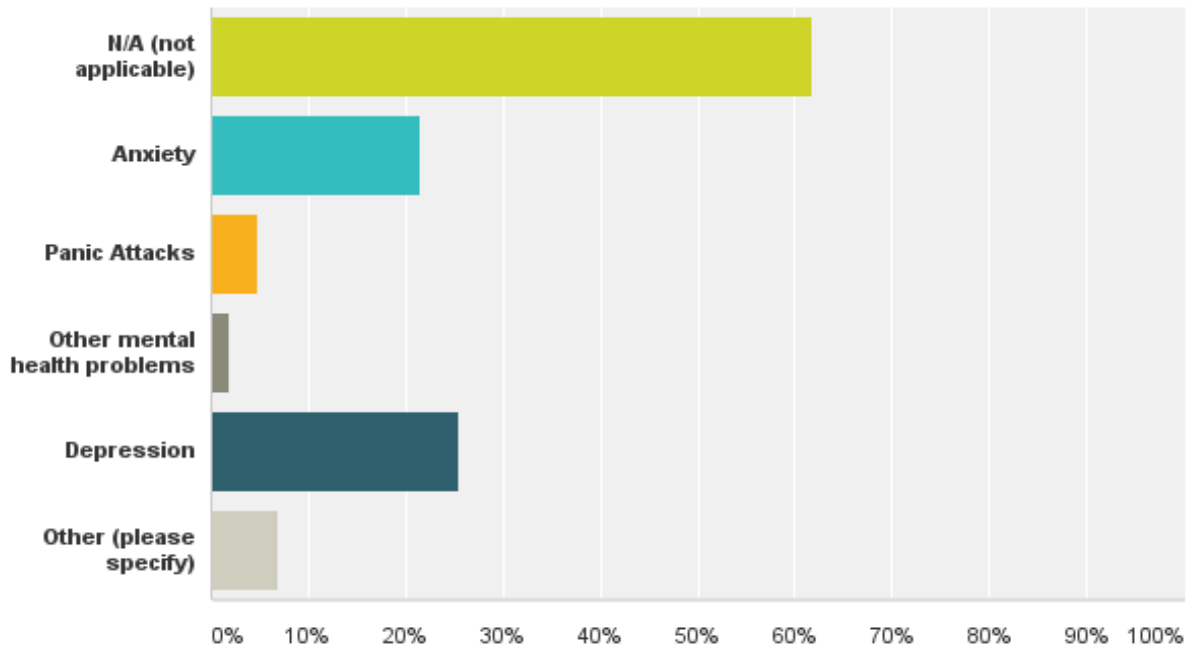
Answer Choices	Responses
Excellent	13.73% 14
Good	66.67% 68
Fair	15.69% 16
Poor	2.94% 3
Don't Know	0.98% 1
Total	102

Question Number 12 In general how would rate your health. 14 responded excellent, 68 responded good, 16 responded fair, 3 responded poor and 1 responded don't know.

According to the BRFSS report for 2014, ND statistics are as follows: 17.9% responded excellent, 36.9% responded very good, 31.1% responded good, 11% responded fair, and 3.1% responded poor.

Q13 Have you ever been told by a Doctor/Medical Provider that you have any of the following?

Answered: 102 Skipped: 0



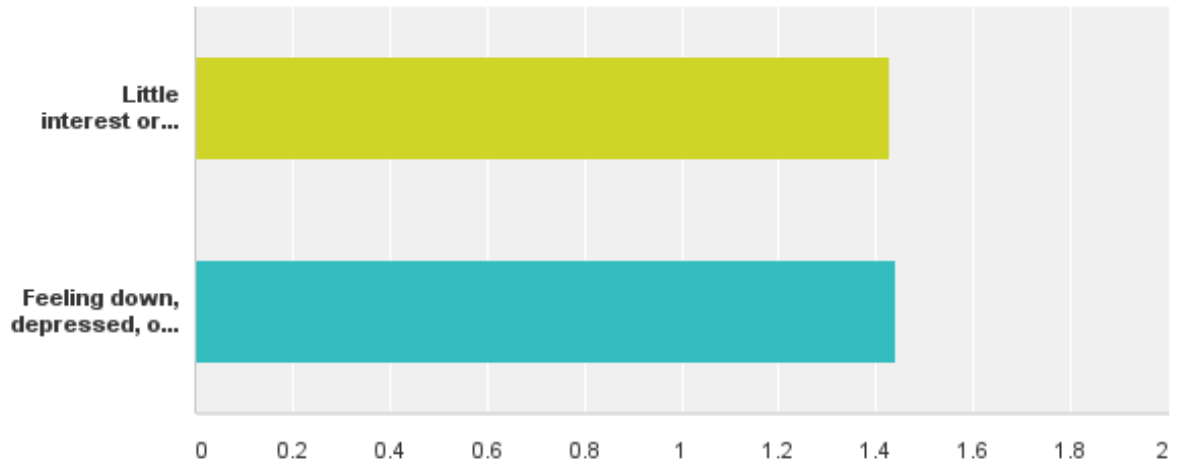
Answer Choices	Responses
N/A (not applicable)	61.76% 63
Anxiety	21.57% 22
Panic Attacks	4.90% 5
Other mental health problems	1.96% 2
Depression	25.49% 26
Other (please specify)	6.86% 7
Total Respondents: 102	

Question Number 14 Thinking about your mental health which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good. 12 responded with 20-30 days, 3 responded with 11-19 days, 37 responded with 1-10 days and 29 responded with 0 days.

According to the BRFSS for 2014, ND statistics are as follows: 3.7% responded with 30 days, 7.7% responded with 8-29 days, 10.7% responded with 3-7 days, 9.1% responded with 1-2 days, and 68.8% responded with 0 days.

Q15 Over the past 2 weeks, how often have you been bothered by any of the following issues? (Check 1 for each)

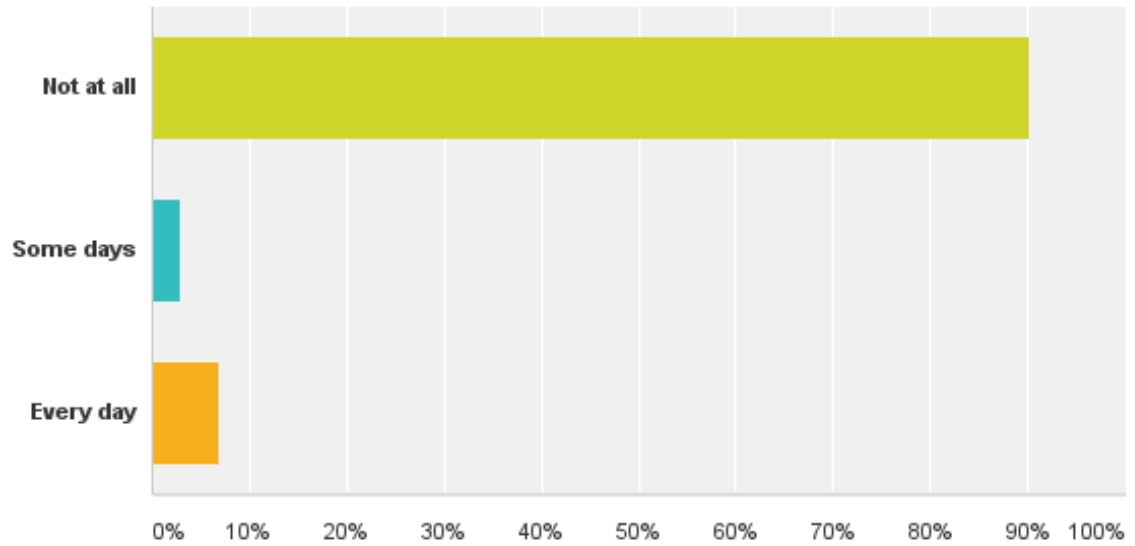
Answered: 102 Skipped: 0



	Not at all	Several Days	More than half of the days	Nearly every day	Total	Weighted Average
Little interest or pleasure in doing things	72.55% 74	18.63% 19	1.96% 2	6.86% 7	102	1.43
Feeling down, depressed, or hopeless	74.51% 76	15.69% 16	0.98% 1	8.82% 9	102	1.44

Q16 How often do you currently smoke cigarettes?

Answered: 102 Skipped: 0

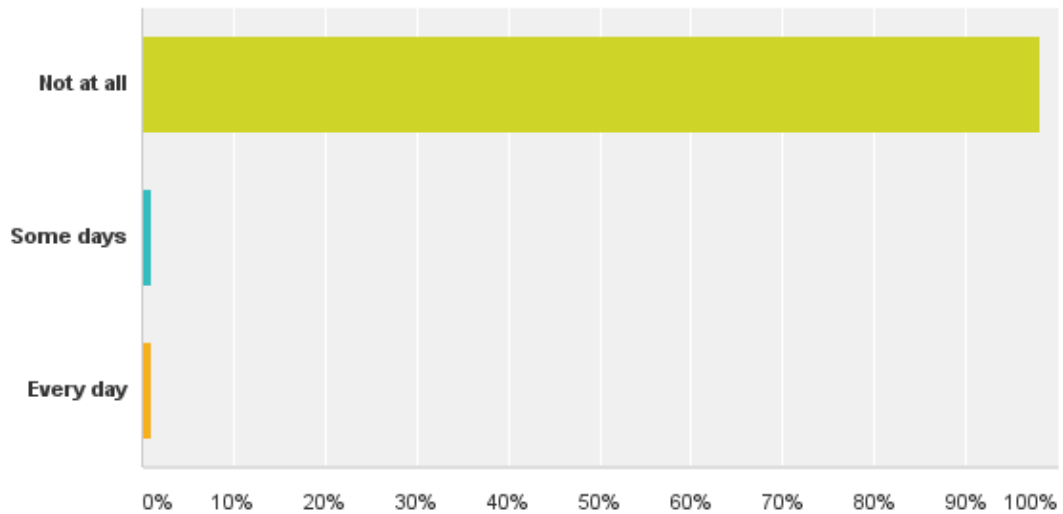


Answer Choices	Responses
Not at all	90.20% 92
Some days	2.94% 3
Every day	6.86% 7
Total	102

According to the 2015 County Health Rankings Key Findings Report, the minimum county value is 3% and the maximum is 51%, with a US average of 21%.

Q17 How often do you currently use chewing tobacco or snuff ?

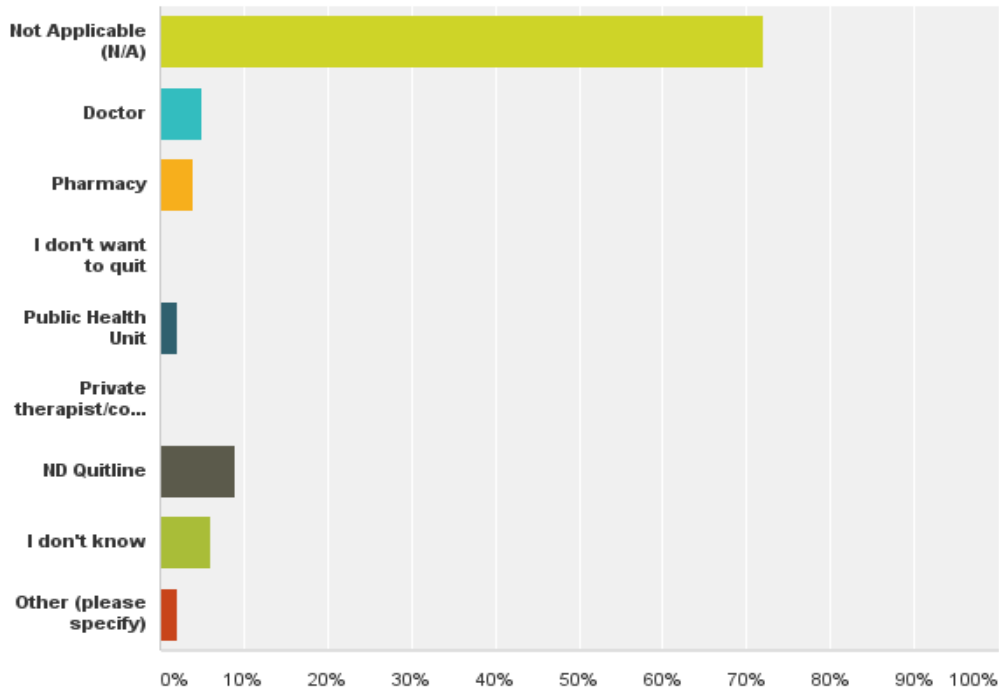
Answered: 102 Skipped: 0



Answer Choices	Responses
Not at all	98.04% 100
Some days	0.98% 1
Every day	0.98% 1
Total	102

Q18 Where would you first go for help if you wanted to quit using tobacco ? (Choose 1 answer)

Answered: 100 Skipped: 2

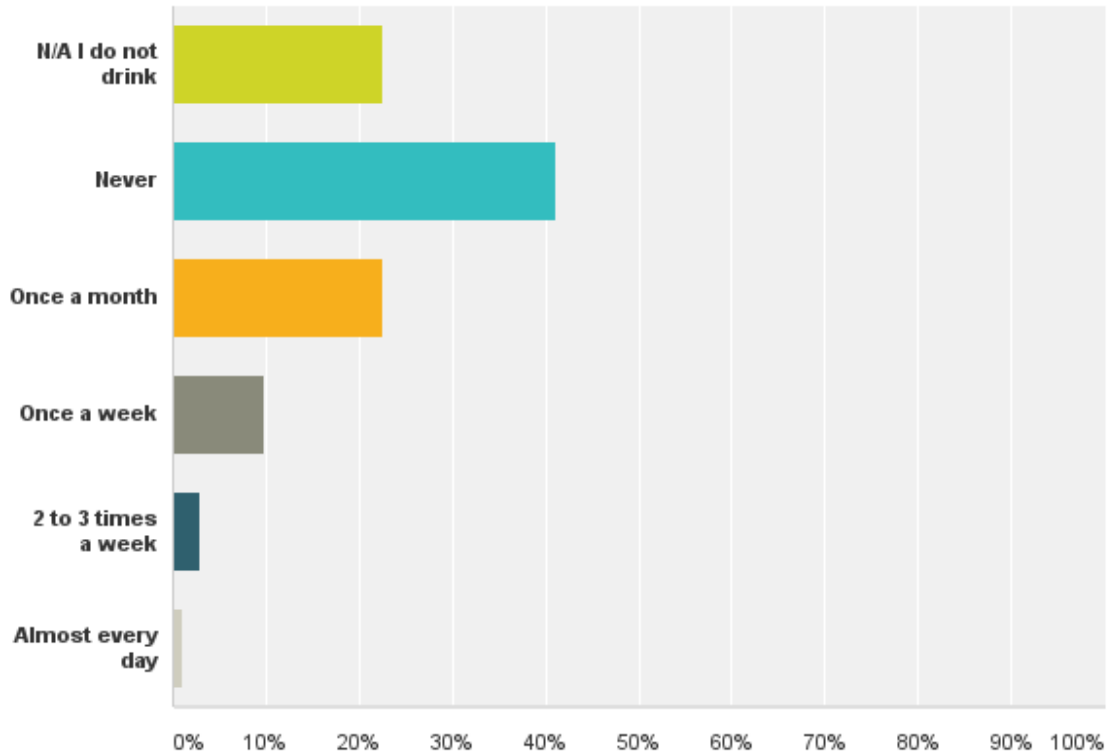


Answer Choices	Responses
Not Applicable (N/A)	72.00% 72
Doctor	5.00% 5
Pharmacy	4.00% 4
I don't want to quit	0.00% 0
Public Health Unit	2.00% 2
Private therapist/counselor	0.00% 0
ND Quitline	9.00% 9
I don't know	6.00% 6
Other (please specify)	2.00% 2
Total	100

Question #19: During the PAST 30 DAYS on the days when you drank, about how many drinks did you drink on average? A drink is 1 can of beer, 1 glass of wine, or a drink with 1 shot of liquor. 27 responded that they had 0 drinks in the 30 days, 53 responded that they had 1-2 drinks, 18 responded that they had 3-5 drinks, 3 responded that they has 6-10 drinks and 1 responded that they had 15 drinks.

Q20 During the PAST 30 DAYS, how many times did you consume at least 4 or 5 alcoholic drinks (4 for females, 5 for males) on the same occasion(at the same time, or within a couple hours of each other)?

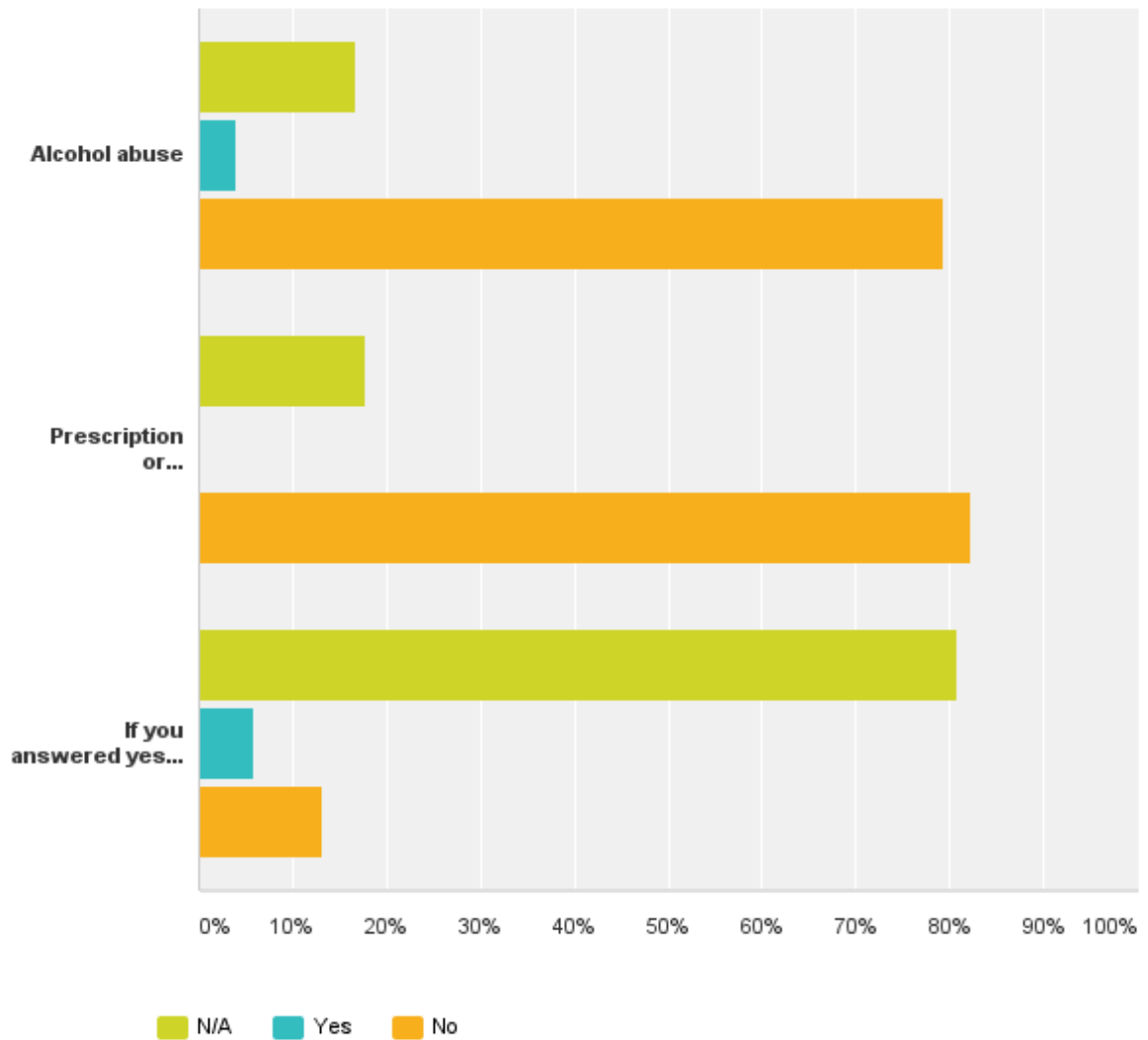
Answered: 102 Skipped: 0



Answer Choices	Responses
N/A I do not drink	22.55% 23
Never	41.18% 42
Once a month	22.55% 23
Once a week	9.80% 10
2 to 3 times a week	2.94% 3
Almost every day	0.98% 1
Total	102

Q21 Have you ever had a problem with

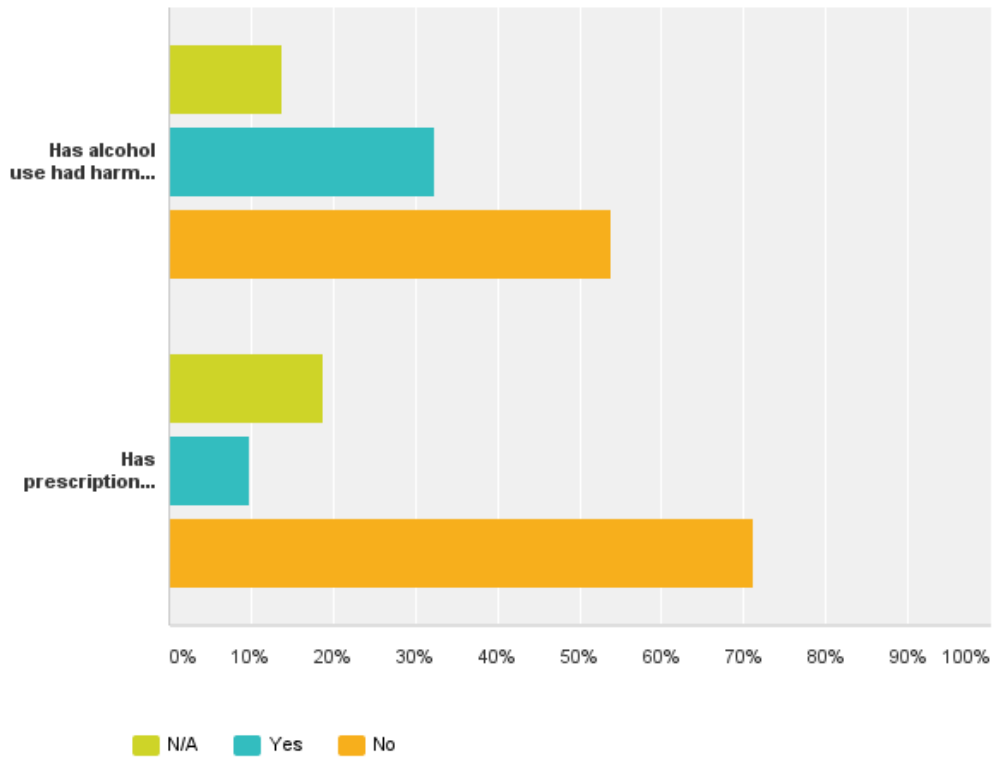
Answered: 102 Skipped: 0



	N/A	Yes	No	Total
Alcohol abuse	16.67% 17	3.92% 4	79.41% 81	102
Prescription or non-prescription drug abuse	17.82% 18	0.00% 0	82.18% 83	101
If you answered yes to one of the above, did you get the help you needed?	80.88% 55	5.88% 4	13.24% 9	68

Q22 Over the past 2 years

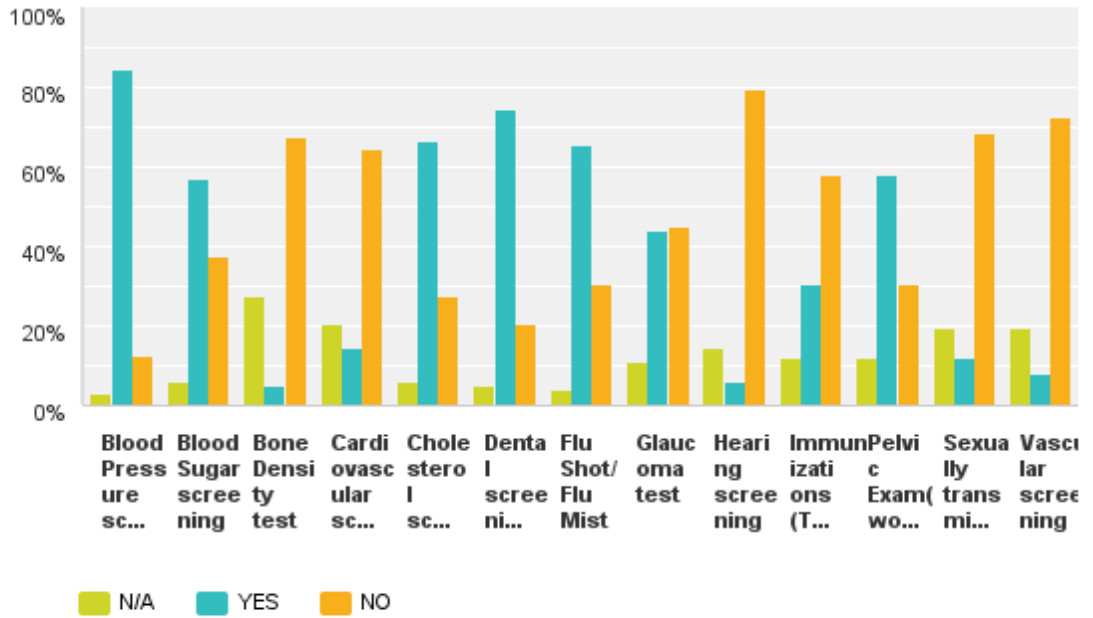
Answered: 102 Skipped: 0



	N/A	Yes	No	Total
Has alcohol use had harmful effects on you or a family member?	13.73% 14	32.35% 33	53.92% 55	102
Has prescription or non-prescription drug use had harmful effects on you or a family member?	18.81% 19	9.90% 10	71.29% 72	101

Q23 Below is a list of GENERAL preventative screenings and procedures that you may have had in the last year. Please tell us whether or not you had each of the procedures in the last year. Please answer N/A if the question does not pertain to you (i.e. not at the age for a bone density test).

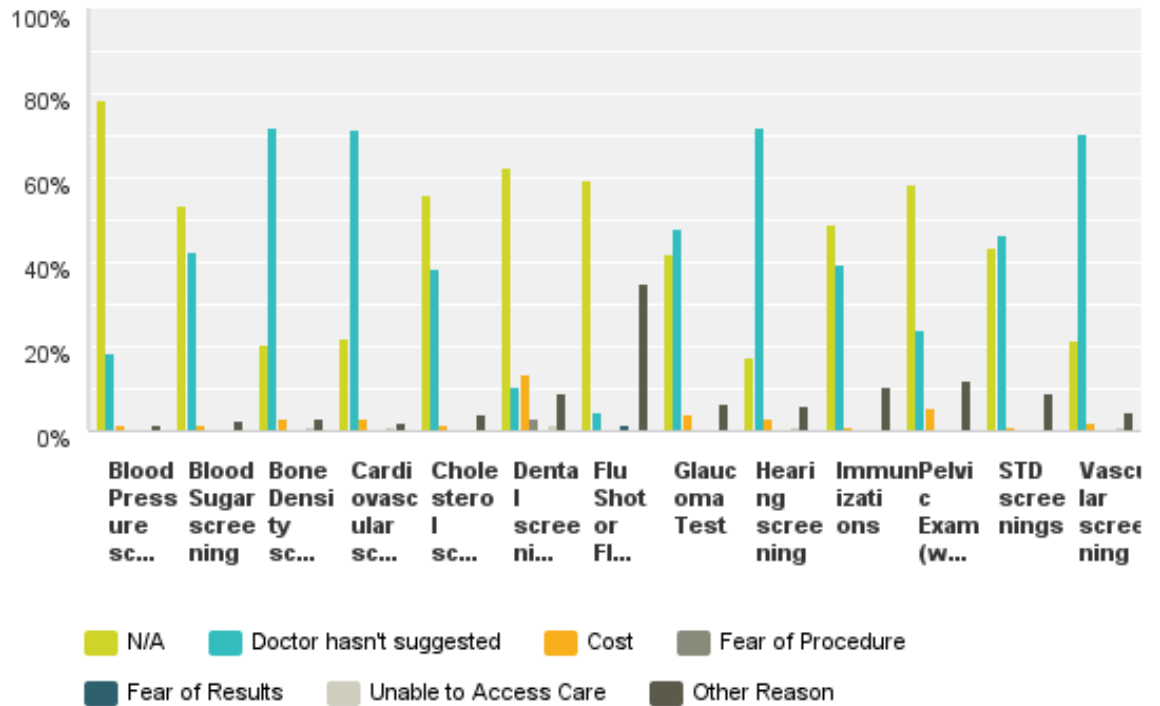
Answered: 102 Skipped: 0



	N/A	YES	NO	Total
Blood Pressure screening	2.94% 3	84.31% 86	12.75% 13	102
Blood Sugar screening	5.88% 6	56.86% 58	37.25% 38	102
Bone Density test	27.45% 28	4.90% 5	67.65% 69	102
Cardiovascular screening	20.59% 21	14.71% 15	64.71% 66	102
Cholesterol screening	5.88% 6	66.67% 68	27.45% 28	102
Dental screening and x-rays	4.90% 5	74.51% 76	20.59% 21	102
Flu Shot/Flu Mist	3.92% 4	65.69% 67	30.39% 31	102
Glaucoma test	10.78% 11	44.12% 45	45.10% 46	102
Hearing screening	14.71% 15	5.88% 6	79.41% 81	102
Immunizations (Tetanus, Hepatitis A or B etc.)	11.76% 12	30.39% 31	57.84% 59	102
Pelvic Exam(women's health)	11.76% 12	57.84% 59	30.39% 31	102
Sexually transmitted disease (STD) screening	19.61% 20	11.76% 12	68.63% 70	102
Vascular screening	19.61% 20	7.84% 8	72.55% 74	102

Q24 If you DID NOT have the procedures in the last year, why not?

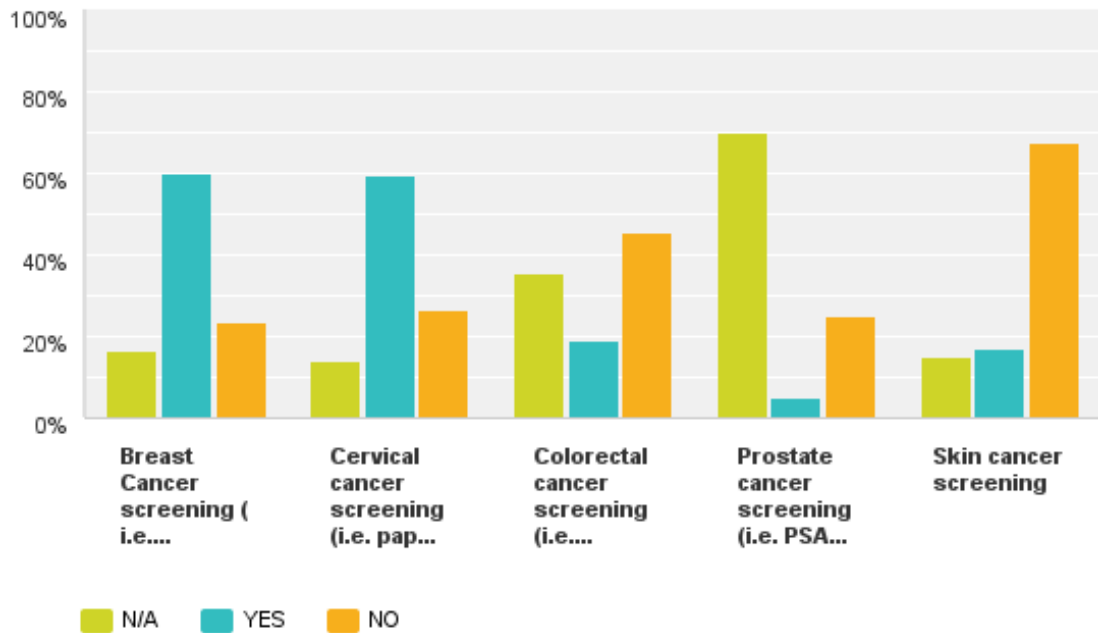
Answered: 101 Skipped: 1



	N/A	Doctor hasn't suggested	Cost	Fear of Procedure	Fear of Results	Unable to Access Care	Other Reason	Total
Blood Pressure screening	78.46% 51	18.46% 12	1.54% 1	0.00% 0	0.00% 0	0.00% 0	1.54% 1	65
Blood Sugar screening	53.33% 40	42.67% 32	1.33% 1	0.00% 0	0.00% 0	0.00% 0	2.67% 2	75
Bone Density screening	20.43% 19	72.04% 67	3.23% 3	0.00% 0	0.00% 0	1.08% 1	3.23% 3	93
Cardiovascular screening	22.11% 21	71.58% 68	3.16% 3	0.00% 0	0.00% 0	1.05% 1	2.11% 2	95
Cholesterol screening	56.16% 41	38.36% 28	1.37% 1	0.00% 0	0.00% 0	0.00% 0	4.11% 3	73
Dental screening and X-rays	62.69% 42	10.45% 7	13.43% 9	2.99% 2	0.00% 0	1.49% 1	8.96% 6	67
Flu Shot or Flu Mist	59.42% 41	4.35% 3	0.00% 0	0.00% 0	1.45% 1	0.00% 0	34.78% 24	69
Glaucoma Test	41.77% 33	48.10% 38	3.80% 3	0.00% 0	0.00% 0	0.00% 0	6.33% 5	79
Hearing screening	17.53% 17	72.16% 70	3.09% 3	0.00% 0	0.00% 0	1.03% 1	6.19% 6	97
Immunizations	48.81% 41	39.29% 33	1.19% 1	0.00% 0	0.00% 0	0.00% 0	10.71% 9	84
Pelvic Exam (women's health)	58.67% 44	24.00% 18	5.33% 4	0.00% 0	0.00% 0	0.00% 0	12.00% 9	75
STD screenings	43.33% 39	46.67% 42	1.11% 1	0.00% 0	0.00% 0	0.00% 0	8.89% 8	90
Vascular screening	21.74% 20	70.65% 65	2.17% 2	0.00% 0	0.00% 0	1.09% 1	4.35% 4	92

Q25 Below is a list of preventative CANCER screenings and procedures that you may have had in the last year. Please tell us whether or not you had each of the procedures in the last year.

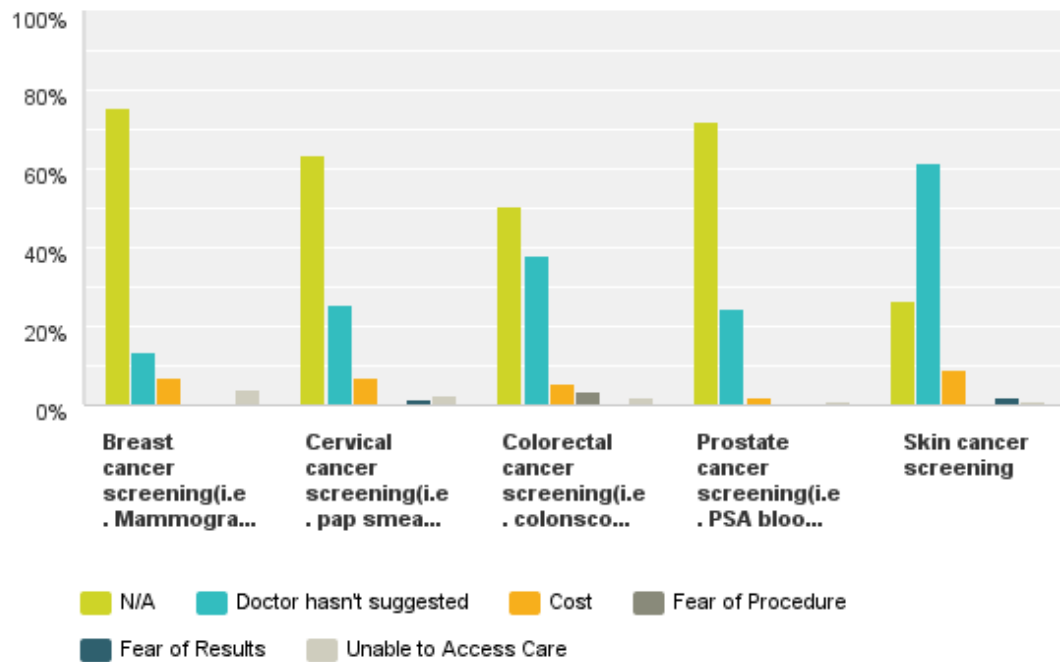
Answered: 102 Skipped: 0



	N/A	YES	NO	Total
Breast Cancer screening (i.e. mammogram, breast exam, monthly self exam, women age 40+)	16.67% 17	59.80% 61	23.53% 24	102
Cervical cancer screening (i.e. pap smear within 3 years of first sexual intercourse, or by 21 every 1-3 years depending on the risk factors)	13.86% 14	59.41% 60	26.73% 27	101
Colorectal cancer screening (i.e. colonoscopy every 10 years beginning at age 50, fecal occult blood test every year, barium enema every 5 years, all depending on risk factors)	35.64% 36	18.81% 19	45.54% 46	101
Prostate cancer screening (i.e. PSA blood test and/or digital exam)	70.00% 70	5.00% 5	25.00% 25	100
Skin cancer screening	15.15% 15	17.17% 17	67.68% 67	99

Q26 If you DID NOT have the procedures in the last year, why not ?

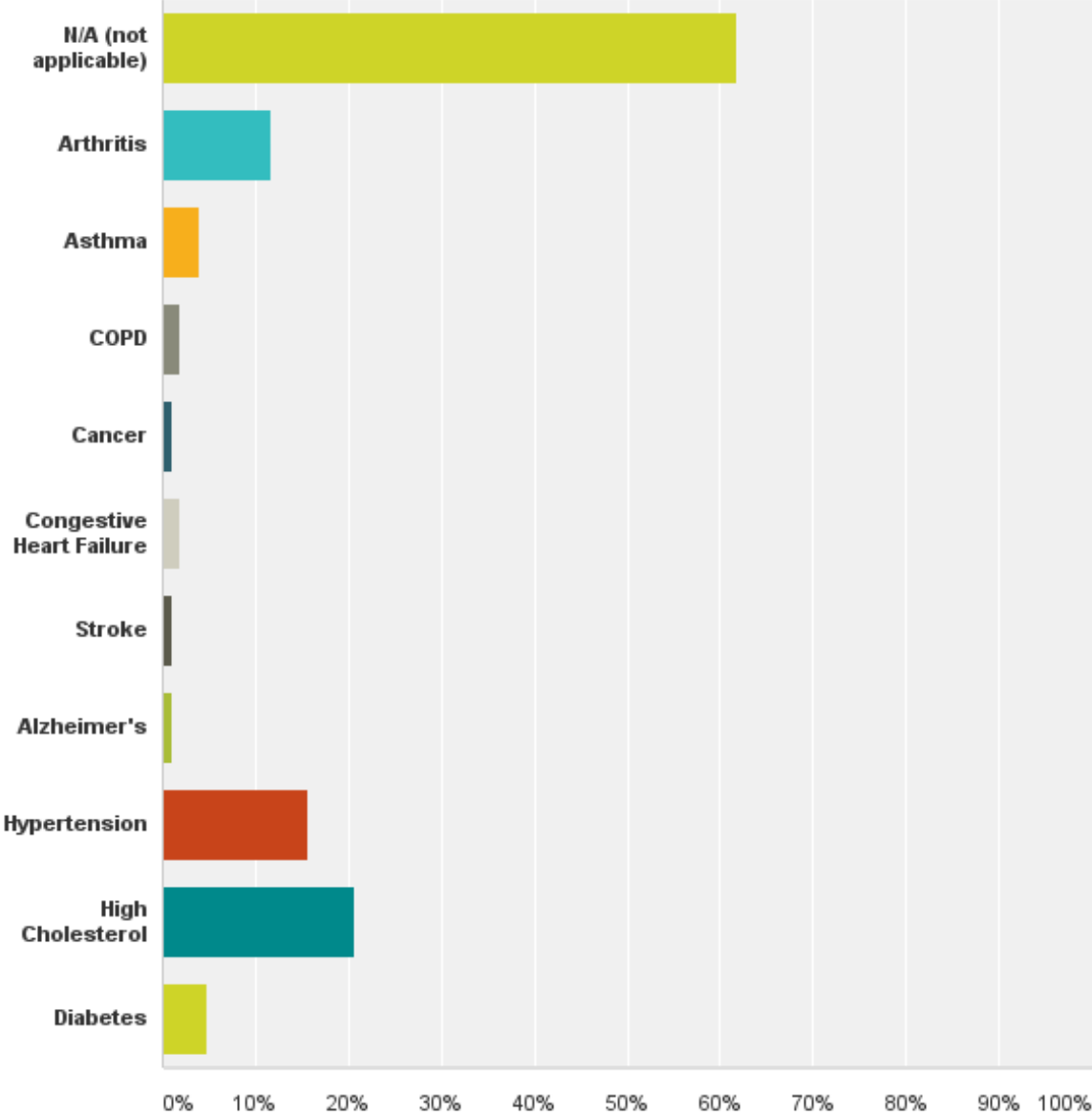
Answered: 99 Skipped: 3



	N/A	Doctor hasn't suggested	Cost	Fear of Procedure	Fear of Results	Unable to Access Care	Total
Breast cancer screening(i.e. Mammogram, breast exam, woman age 40+)	75.68% 56	13.51% 10	6.76% 5	0.00% 0	0.00% 0	4.05% 3	74
Cervical cancer screening(i.e. pap smear within 3 yrs of intercourse, or by age 21 every 1-3 yrs, depending on the risk factors)	63.51% 47	25.68% 19	6.76% 5	0.00% 0	1.35% 1	2.70% 2	74
Colorectal cancer screening(i.e. colonoscopy every 10 yrs beginning at age 50, fecal occult blood test every year, barium enema every 5 yrs, all depending on risk factors)	50.56% 45	38.20% 34	5.62% 5	3.37% 3	0.00% 0	2.25% 2	89
Prostate cancer screening(i.e. PSA blood test and or digital exam)	72.22% 65	24.44% 22	2.22% 2	0.00% 0	0.00% 0	1.11% 1	90
Skin cancer screening	26.37% 24	61.54% 56	8.79% 8	0.00% 0	2.20% 2	1.10% 1	91

Q27 Do you have any of the following chronic diseases(Choose all that apply).

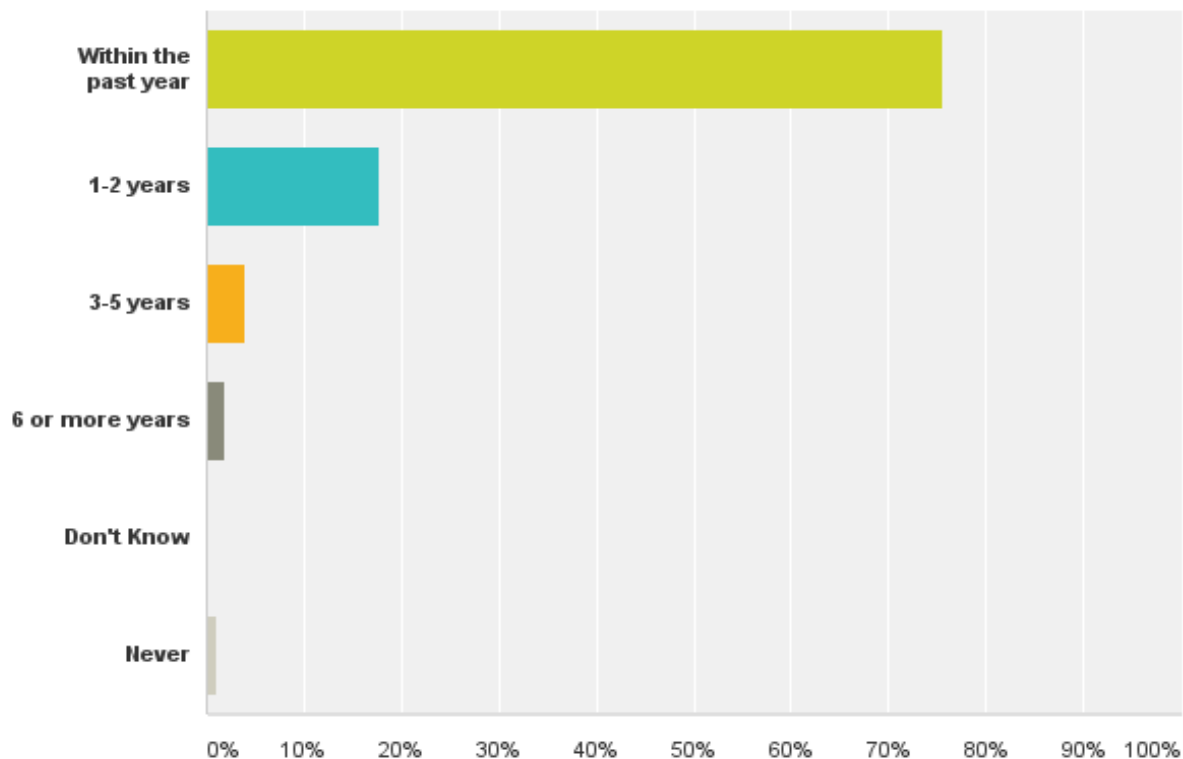
Answered: 102 Skipped: 0



Answer Choices	Responses	
N/A (not applicable)	61.76%	63
Arthritis	11.76%	12
Asthma	3.92%	4
COPD	1.96%	2
Cancer	0.98%	1
Congestive Heart Failure	1.96%	2
Stroke	0.98%	1
Alzheimer's	0.98%	1
Hypertension	15.69%	16
High Cholesterol	20.59%	21
Diabetes	4.90%	5
Total Respondents: 102		

Q28 About how long has it been since you last visited a Doctor or Health Care Provider for a routine physical exam?

Answered: 102 Skipped: 0

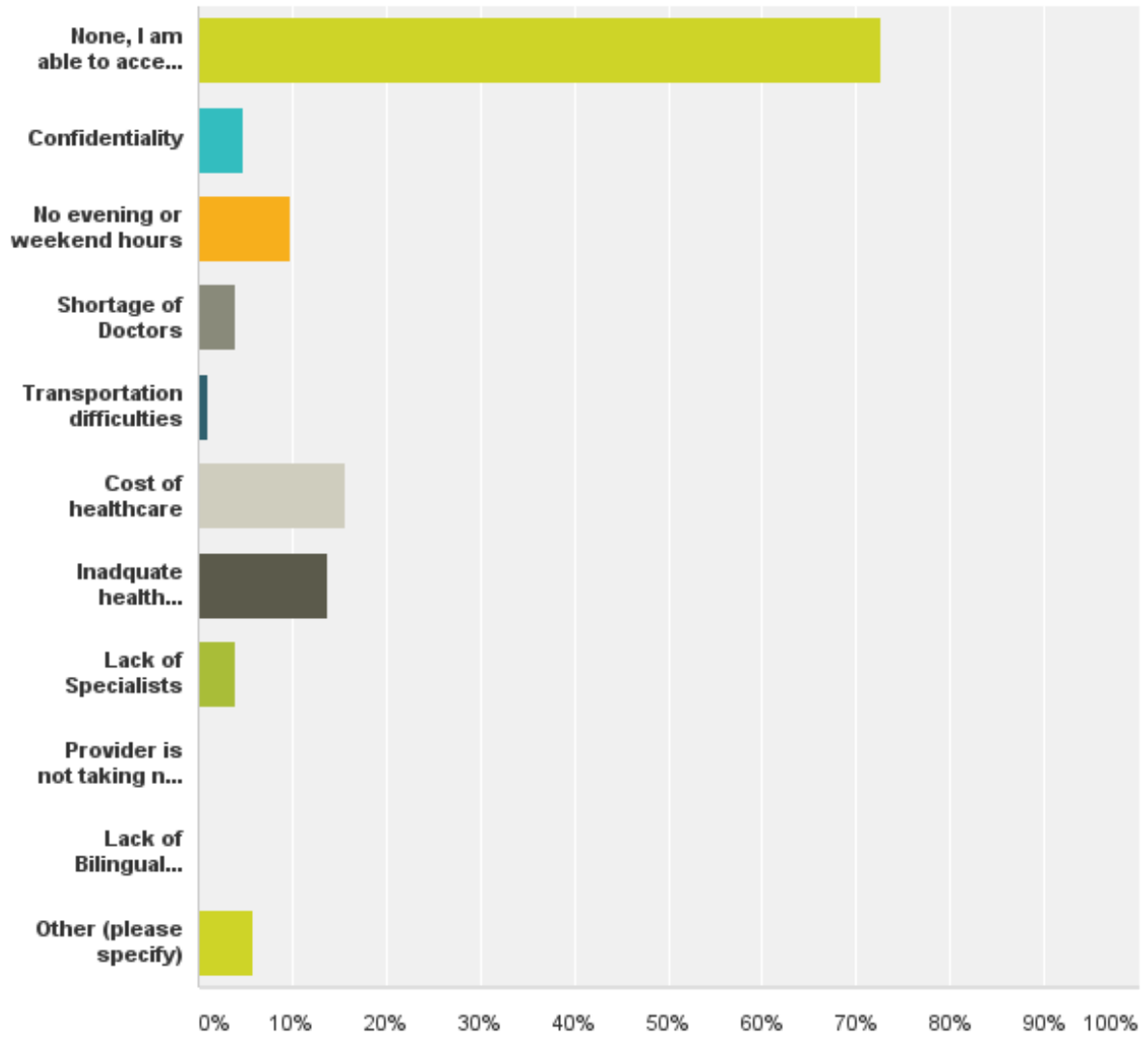


Answer Choices	Responses
Within the past year	75.49% 77
1-2 years	17.65% 18
3-5 years	3.92% 4
6 or more years	1.96% 2
Don't Know	0.00% 0
Never	0.98% 1
Total	102

Question # 28: About how long has it been since you last visited a Doctor or Health Care Provider for a routine physical exam? The highest number of responses at 77 out of 102 was with the past year. 18 responded with 1-2 years, 4 responded with 3-5 years, 2 responded with 6 or more years, 0 responses didn't know, and 1 response was never. According to the BRFSS for 2014, ND responses were as follows: 64.3% within within the past year, 13.5% responded with 1-<2 years, 10.4% responded with 2-<5 years, 10.9% responded with 5 or more years, and 0.9% responded with never.

Q29 What are the barriers that affect your access to medical care ? (Check all that apply)

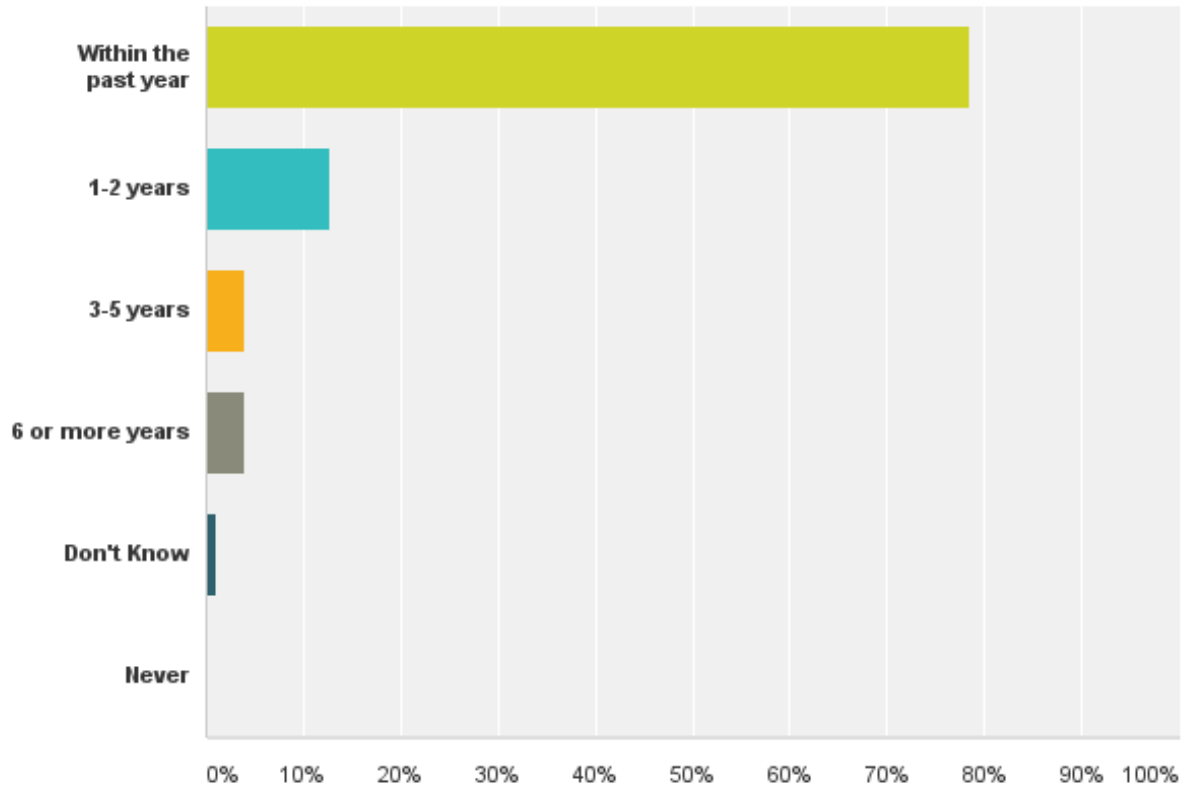
Answered: 102 Skipped: 0



Answer Choices	Responses	
None, I am able to access medical care with no problems	72.55%	74
Confidentiality	4.90%	5
No evening or weekend hours	9.80%	10
Shortage of Doctors	3.92%	4
Transportation difficulties	0.98%	1
Cost of healthcare	15.69%	16
Inadquate health insurance(i.e. high copays, high deductibles, inconsistent coverage)	13.73%	14
Lack of Specialists	3.92%	4
Provider is not taking new patients	0.00%	0
Lack of Bilingual Providers	0.00%	0
Other (please specify)	5.88%	6
Total Respondents: 102		

Q30 About how long has it been since you last visited a Dentist or dental clinic for any reason ?

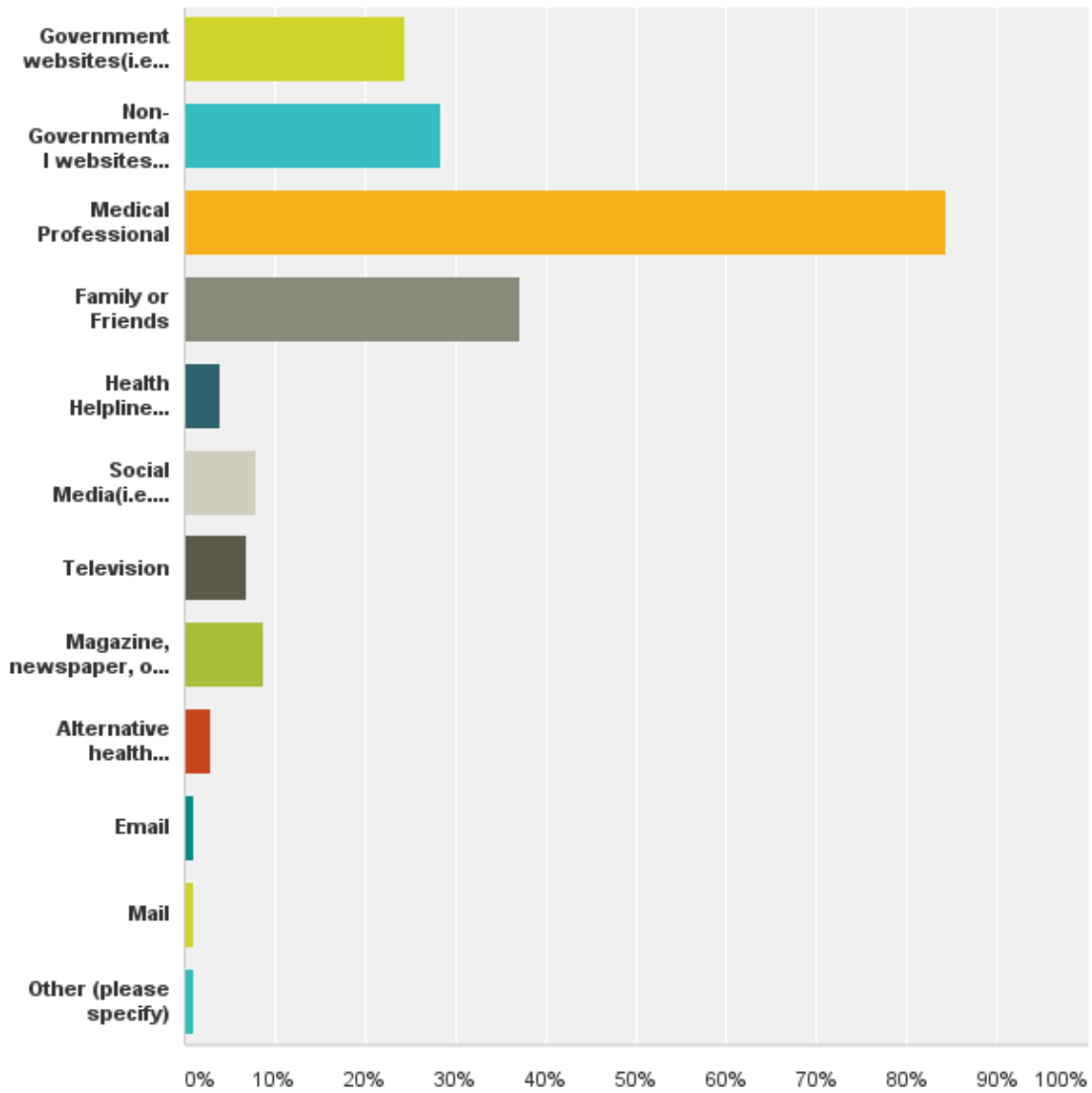
Answered: 102 Skipped: 0



Answer Choices	Responses
Within the past year	78.43% 80
1-2 years	12.75% 13
3-5 years	3.92% 4
6 or more years	3.92% 4
Don't Know	0.98% 1
Never	0.00% 0
Total	102

Q31 Where do you get most of your health-related information (Choose all that apply).

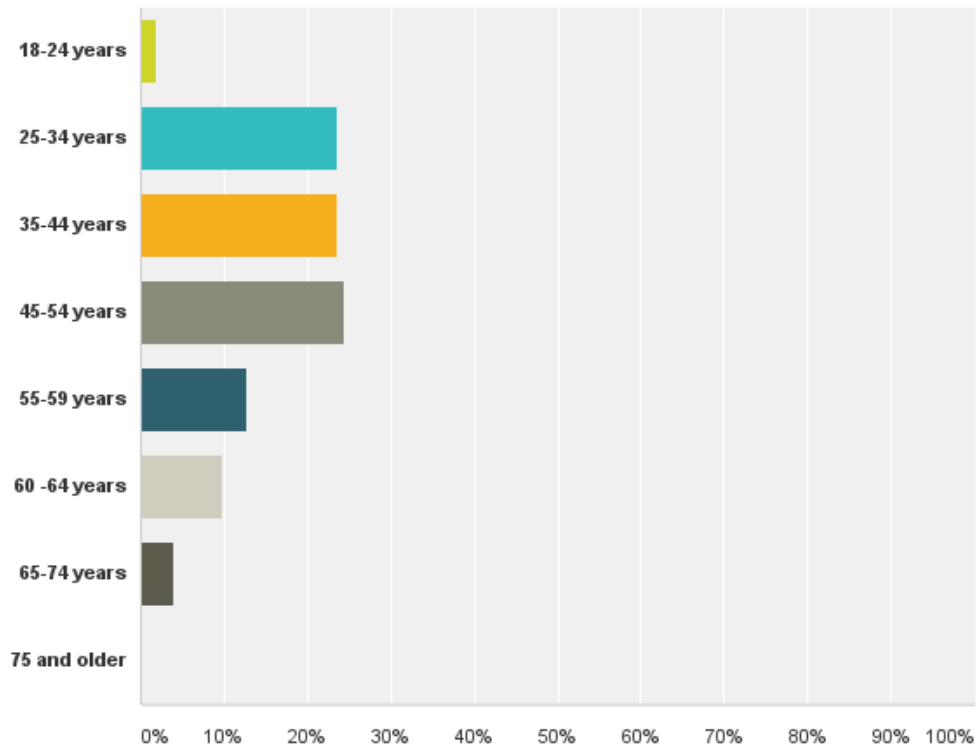
Answered: 102 Skipped: 0



Answer Choices	Responses	
Government websites(i.e. local Public Health, CDC)	24.51%	25
Non-Governmental websites (i.e. WebMD)	28.43%	29
Medical Professional	84.31%	86
Family or Friends	37.25%	38
Health Helpline (telephone)	3.92%	4
Social Media(i.e. Facebook, Twitter, Instagram)	7.84%	8
Television	6.86%	7
Magazine, newspaper, or books	8.82%	9
Alternative health specialist	2.94%	3
Email	0.98%	1
Mail	0.98%	1
Other (please specify)	0.98%	1
Total Respondents: 102		

Q32 What is your age ?

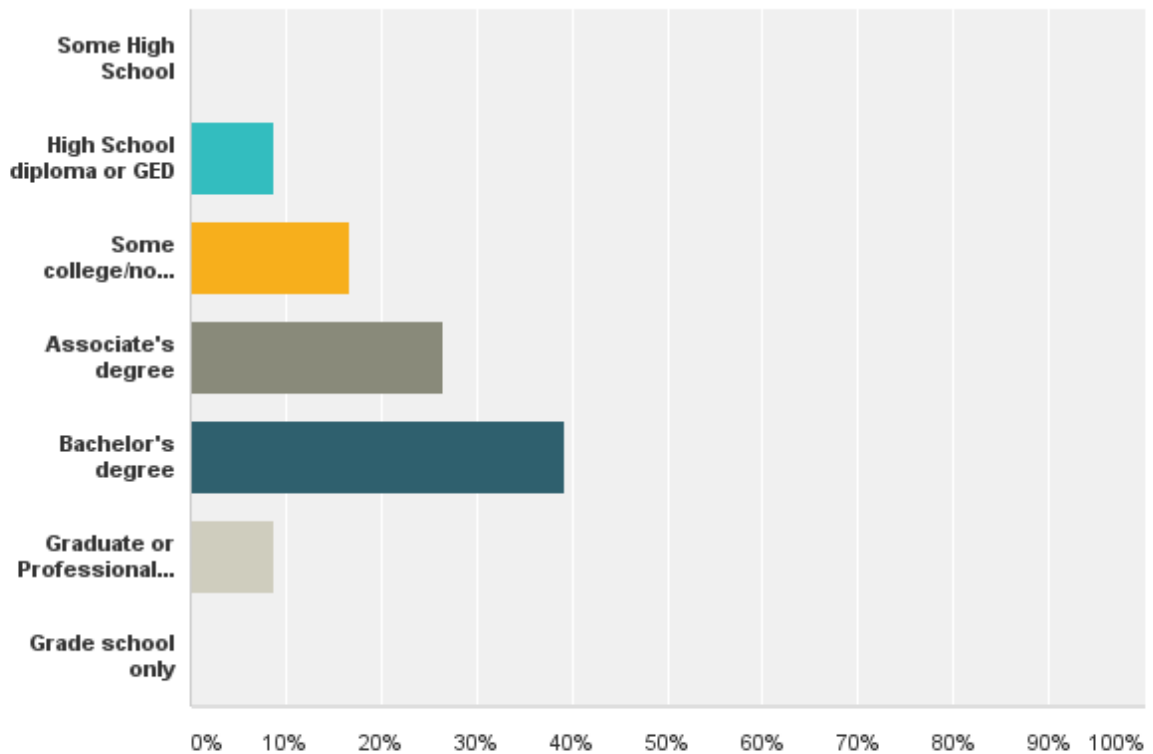
Answered: 102 Skipped: 0



Answer Choices	Responses
18-24 years	1.96% 2
25-34 years	23.53% 24
35-44 years	23.53% 24
45-54 years	24.51% 25
55-59 years	12.75% 13
60-64 years	9.80% 10
65-74 years	3.92% 4
75 and older	0.00% 0
Total	102

Q33 What is your highest level of education ?

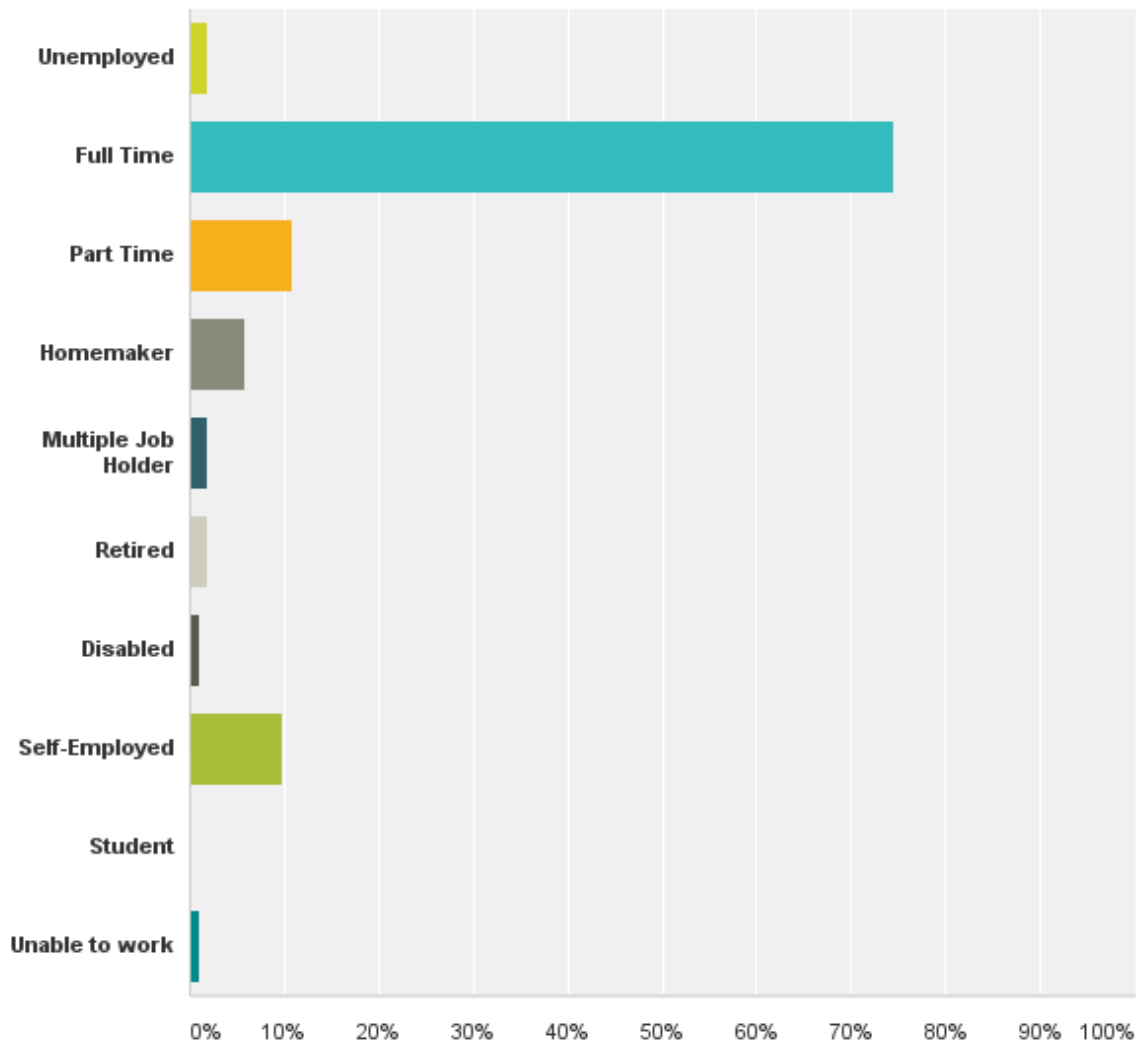
Answered: 102 Skipped: 0



Answer Choices	Responses
Some High School	0.00% 0
High School diploma or GED	8.82% 9
Some college/no degree	16.67% 17
Associate's degree	26.47% 27
Bachelor's degree	39.22% 40
Graduate or Professional degree	8.82% 9
Grade school only	0.00% 0
Total	102

Q34 What is your employment status ? (choose all that apply)

Answered: 102 Skipped: 0

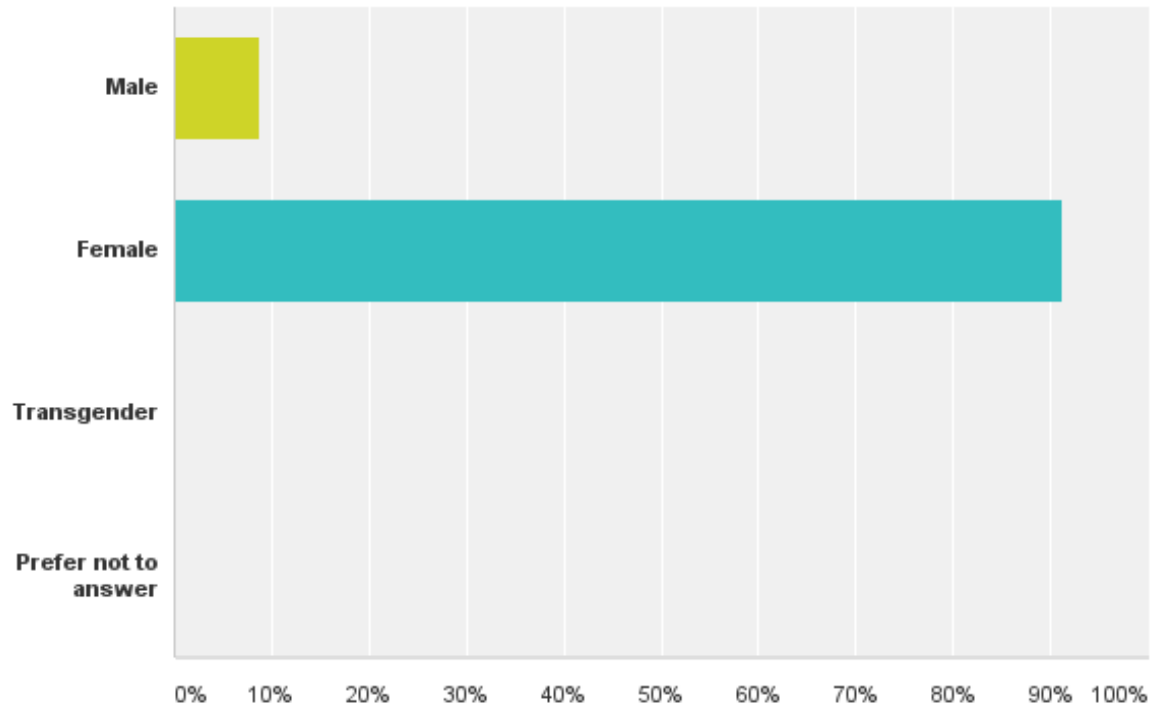


Answer Choices	Responses	
Unemployed	1.96%	2
Full Time	74.51%	76
Part Time	10.78%	11
Homemaker	5.88%	6
Multiple Job Holder	1.96%	2
Retired	1.96%	2
Disabled	0.98%	1
Self-Employed	9.80%	10
Student	0.00%	0
Unable to work	0.98%	1
Total Respondents: 102		

According to the 2015 County Health Rankings Key Findings Report, The minimum county value for unemployment is 1% and the maximum is 28%, with the average US median of 7%.

Q35 What is your gender ?

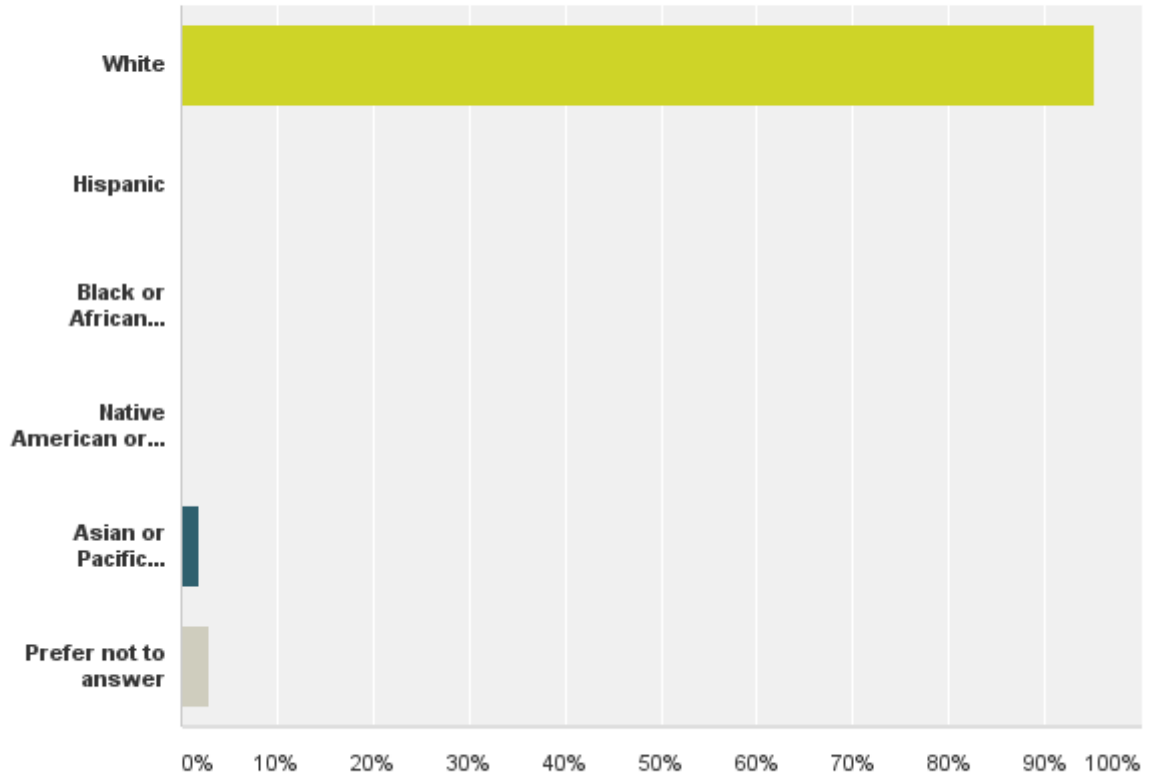
Answered: 102 Skipped: 0



Answer Choices	Responses
Male	8.82% 9
Female	91.18% 93
Transgender	0.00% 0
Prefer not to answer	0.00% 0
Total	102

Q36 What best describes your race/ethnicity ?(Coose all that apply)

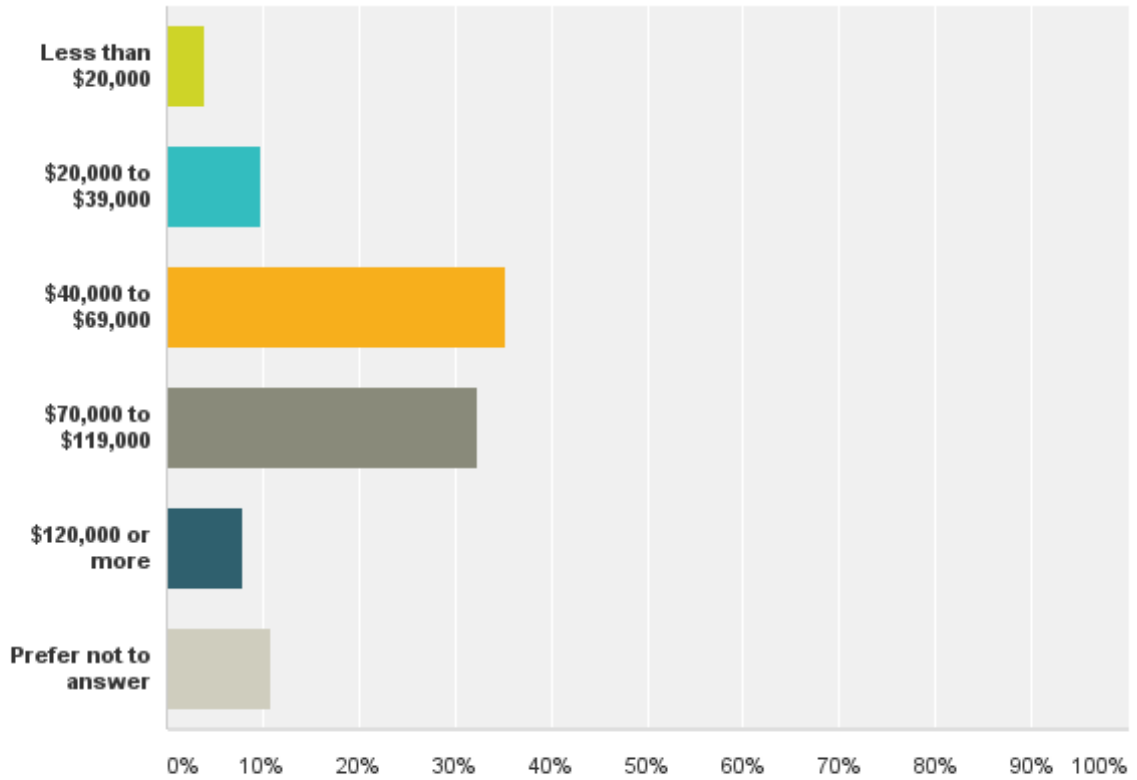
Answered: 102 Skipped: 0



Answer Choices	Responses
White	95.10% 97
Hispanic	0.00% 0
Black or African American	0.00% 0
Native American or Alaska Native	0.00% 0
Asian or Pacific Islander	1.96% 2
Prefer not to answer	2.94% 3
Total Respondents: 102	

Q37 What is your approximate annual household income before taxes ?

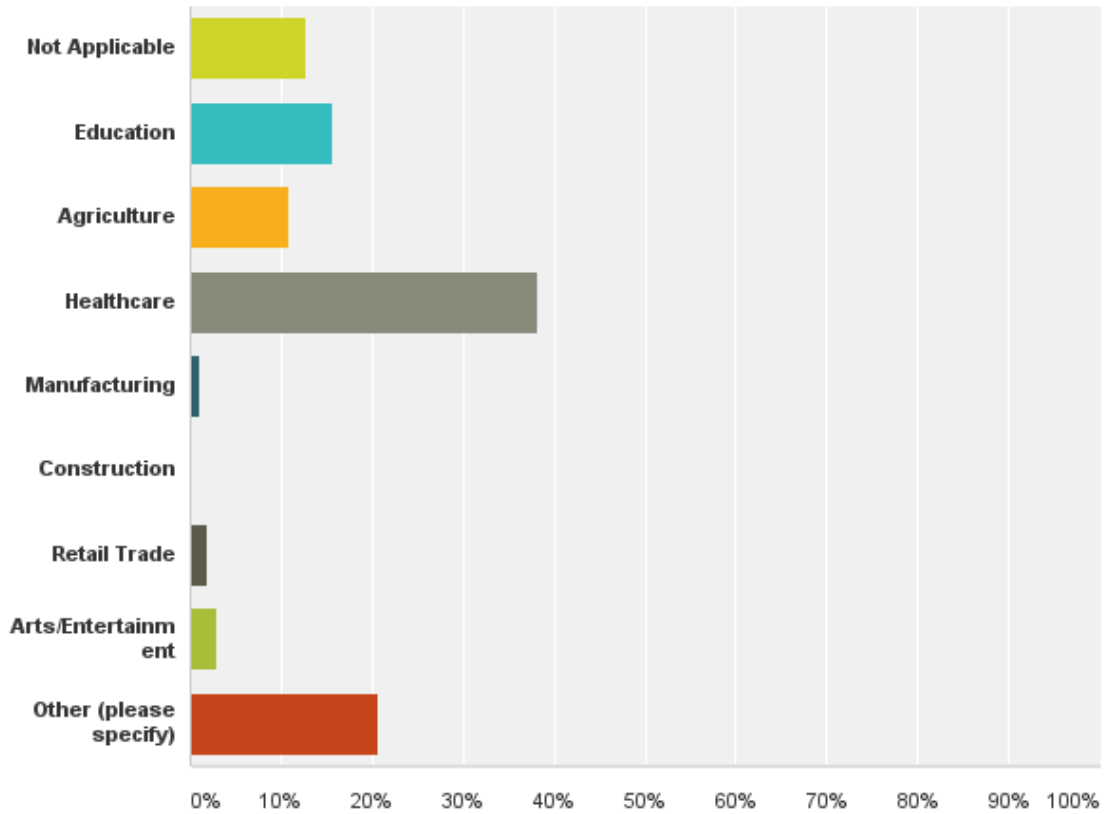
Answered: 102 Skipped: 0



Answer Choices	Responses
Less than \$20,000	3.92% 4
\$20,000 to \$39,000	9.80% 10
\$40,000 to \$69,000	35.29% 36
\$70,000 to \$119,000	32.35% 33
\$120,000 or more	7.84% 8
Prefer not to answer	10.78% 11
Total	102

Q38 If employed, what is your professional field ? (Choose all that apply)

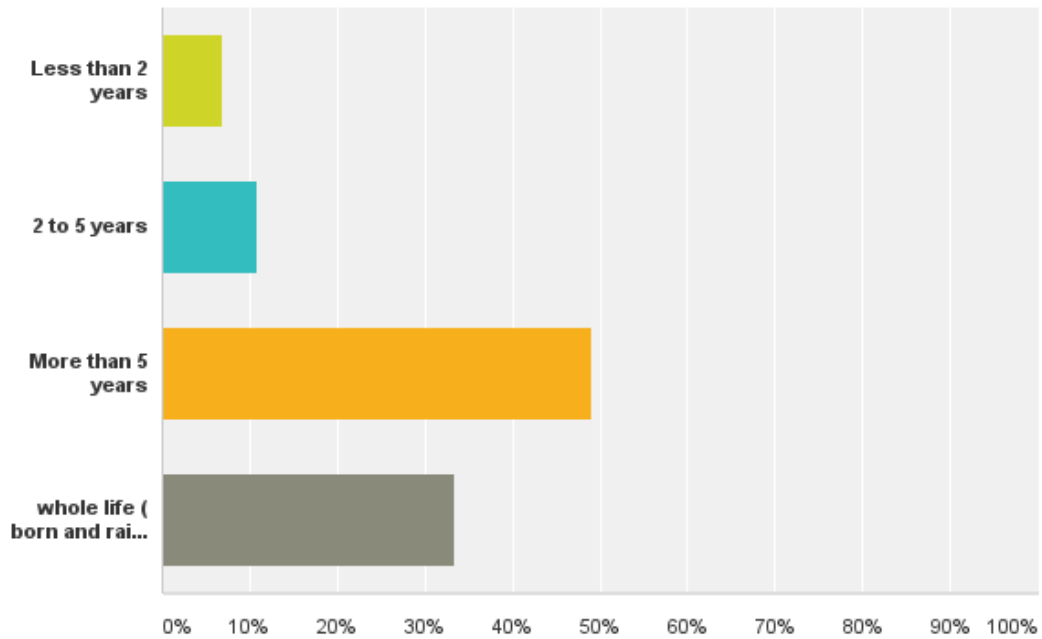
Answered: 102 Skipped: 0



Answer Choices	Responses
Not Applicable	12.75% 13
Education	15.69% 16
Agriculture	10.78% 11
Healthcare	38.24% 39
Manufacturing	0.98% 1
Construction	0.00% 0
Retail Trade	1.96% 2
Arts/Entertainment	2.94% 3
Other (please specify)	20.59% 21
Total Respondents: 102	

Q39 How long have you lived in your community ?

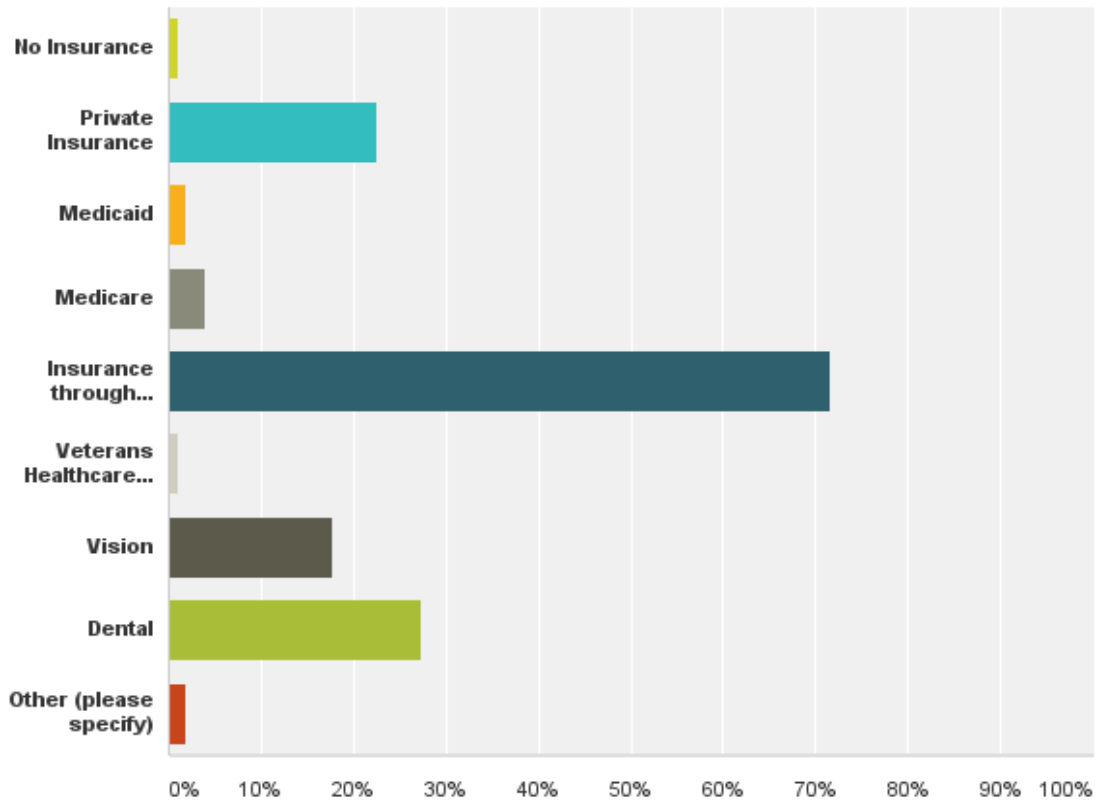
Answered: 102 Skipped: 0



Answer Choices	Responses
Less than 2 years	6.86% 7
2 to 5 years	10.78% 11
More than 5 years	49.02% 50
whole life (born and raised here)	33.33% 34
Total	102

Q40 What is your insurance status ? (Choose all that apply)

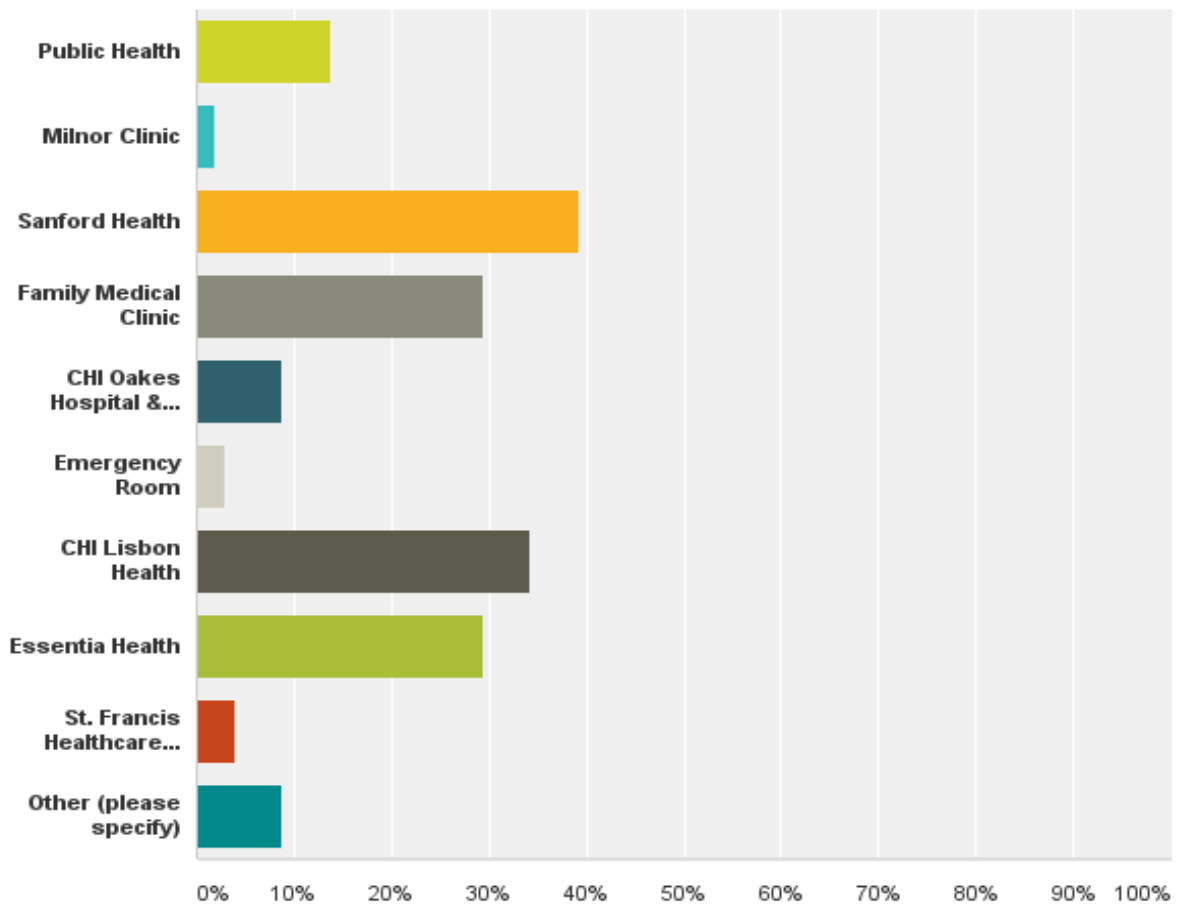
Answered: 102 Skipped: 0



Answer Choices	Responses
No Insurance	0.98% 1
Private Insurance	22.55% 23
Medicaid	1.96% 2
Medicare	3.92% 4
Insurance through employer	71.57% 73
Veterans Healthcare Benefits	0.98% 1
Vision	17.65% 18
Dental	27.45% 28
Other (please specify)	1.96% 2
Total Respondents: 102	

Q41 Where do you often go to access medical care ? (Check all that apply)

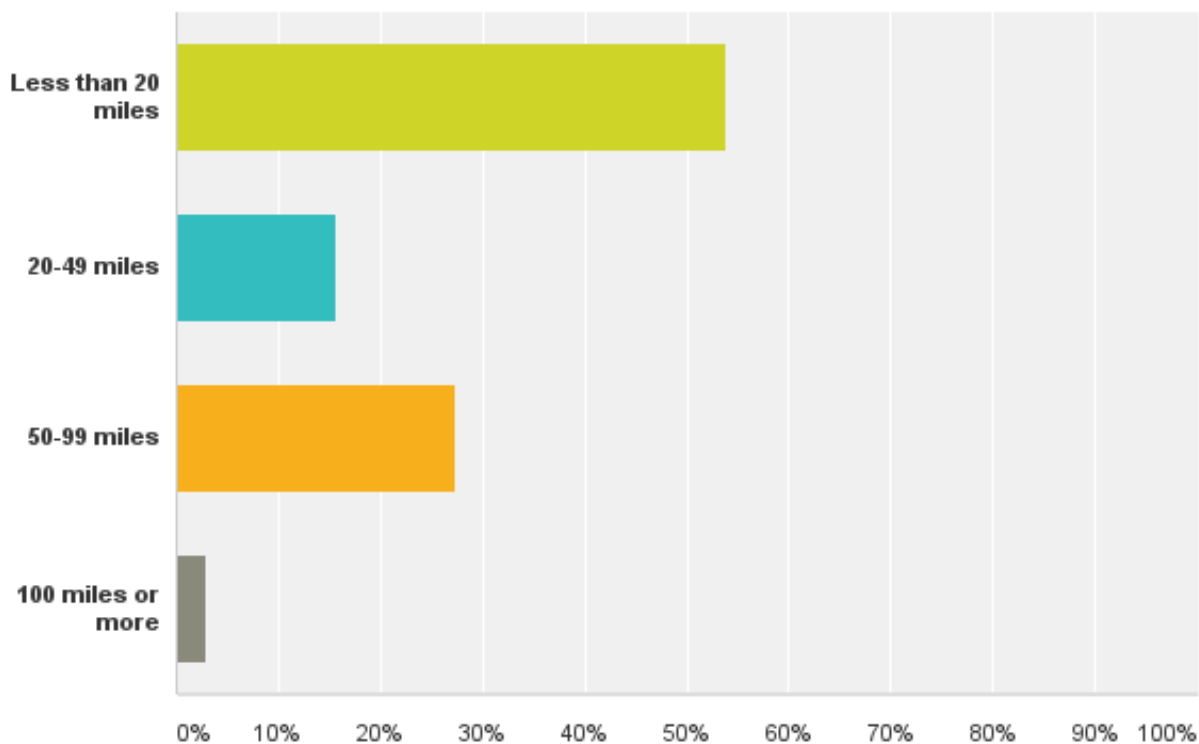
Answered: 102 Skipped: 0



Answer Choices	Responses
Public Health	13.73% 14
Milnor Clinic	1.96% 2
Sanford Health	39.22% 40
Family Medical Clinic	29.41% 30
CHI Oakes Hospital & Clinic	8.82% 9
Emergency Room	2.94% 3
CHI Lisbon Health	34.31% 35
Essentia Health	29.41% 30
St. Francis Healthcare Campus, Breckenridge	3.92% 4
Other (please specify)	8.82% 9
Total Respondents: 102	

Q42 How far do you have to travel to access medical care ?

Answered: 102 Skipped: 0

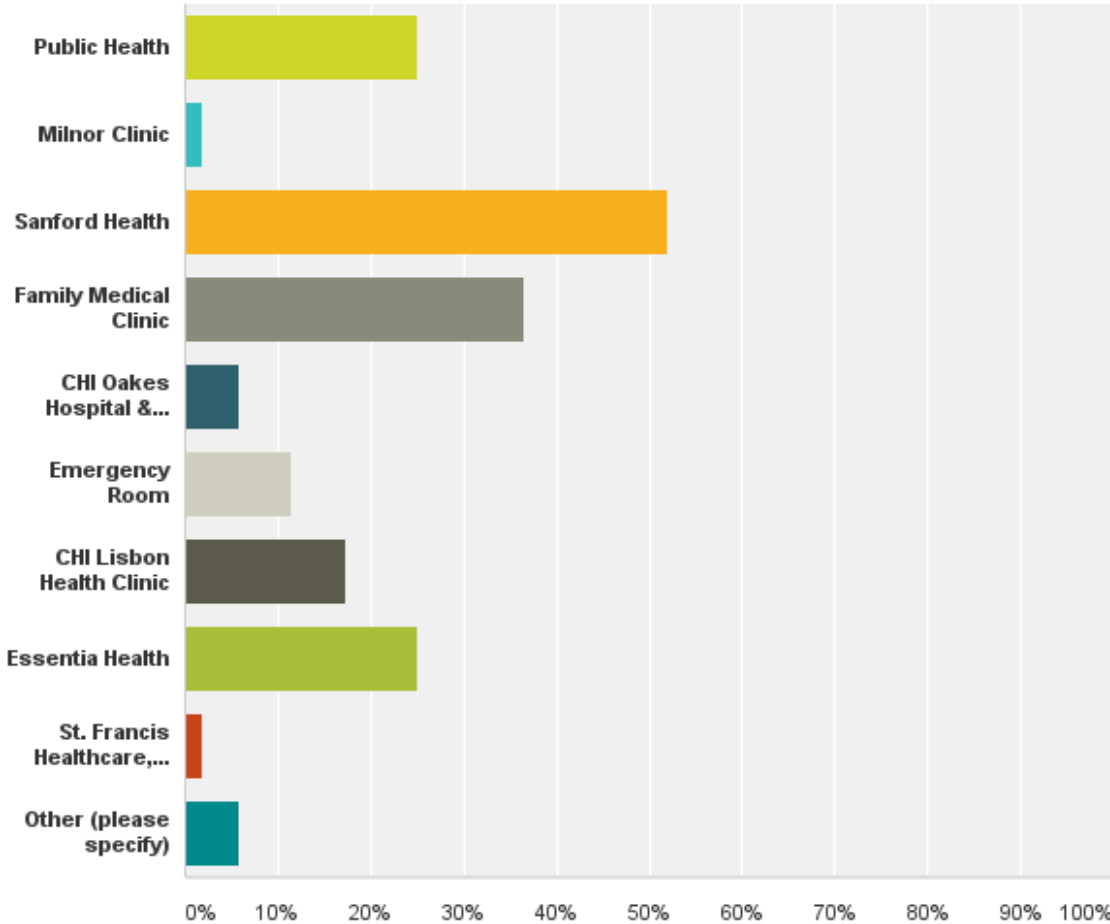


Answer Choices	Responses	
Less than 20 miles	53.92%	55
20-49 miles	15.69%	16
50-99 miles	27.45%	28
100 miles or more	2.94%	3
Total		102

Question #43: How many children younger than 18 year live in your household. 52 had none, 14 responded with 1, 24 responded with 2, 7 responded with 3, 4 responded with 4 and 1 responded with 6 children in the household under 18 years.

Q44 Where do you often go to access medical care for your CHILD ? (Check all that apply)

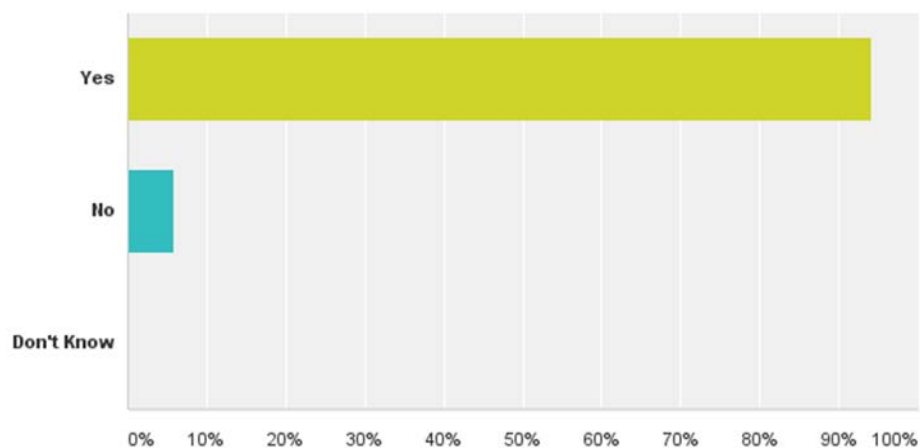
Answered: 52 Skipped: 50



Answer Choices	Responses	
Public Health	25.00%	13
Milnor Clinic	1.92%	1
Sanford Health	51.92%	27
Family Medical Clinic	36.54%	19
CHI Oakes Hospital & Clinic	5.77%	3
Emergency Room	11.54%	6
CHI Lisbon Health Clinic	17.31%	9
Essentia Health	25.00%	13
St. Francis Healthcare, Breckenridge	1.92%	1
Other (please specify)	5.77%	3
Total Respondents: 52		

Q45 Are all children in your household current on their immunizations?

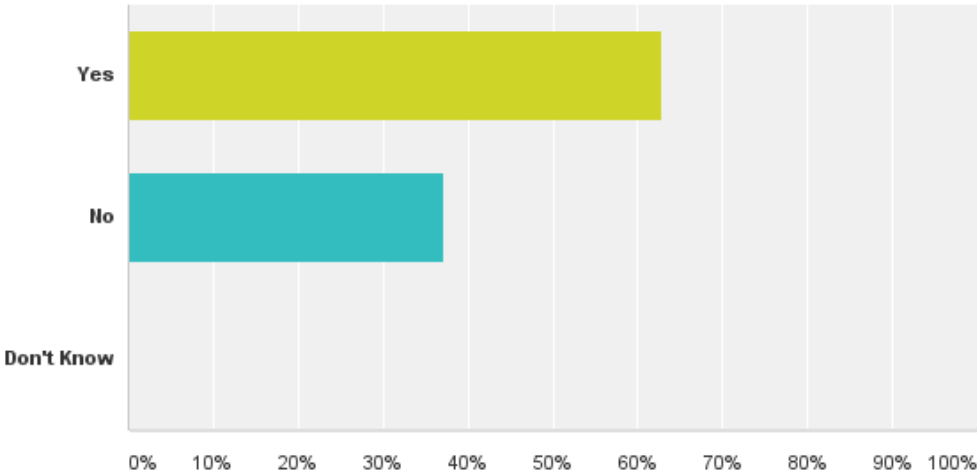
Answered: 52 Skipped: 50



Answer Choices	Responses	
Yes	94.23%	49
No	5.77%	3
Don't Know	0.00%	0
Total		52

Q46 Do all children in your home, (6 months to 18years) get a flu shot or flu mist each year?

Answered: 51 Skipped: 51



Answer Choices	Responses
Yes	62.75% 32
No	37.25% 19
Don't Know	0.00% 0
Total	51

Question #47 What is your home zip code

- 46-Lisbon
- 16-Forman
- 8-Gwinner
- 6-Enderlin
- 4-Milnor
- 4-Fort Ransom/Englevale

Question#48 Please share any additional concerns and suggestions you may have. 7 comments were shared. Summary of results included wanting a hearing test, too long of survey, need SE social services and YMCA for childcare/eldercare, counseling fitness and nutrition, access to non-sport activities for youth, big drug issue that needs addressing, cost of health care: too many on assistance and not working when jobs are available

IV. Prioritized Significant Community Health Needs

The validation of priorities was performed by the discussion and debate method. Preliminary priorities/ areas of need were identified by the hospital internal assessment team and the local public health departments. This was reviewed and discussion held with external entities, leadership and LAHS Board of Directors. The priorities were selected based on burden, urgency of need and estimated feasibility and effectiveness of possible interventions. This information will be utilized for the implementation strategy.

Identified areas of need/ concern from the Community Health Needs Assessment:

The identified areas of needs include:

- Obesity, Poor nutrition, and Inactivity
- Mental Health Services
- Violence Prevention
- Cost of Healthcare
- Access and cost of childcare and infant care
- Bullying

Following significant discussion and consideration with community input, there were three areas selected as top priorities include Mental Health services, Violence prevention, and Collectively: Obesity, Poor nutrition and Inactivity. Work has begun to formulate a strategic plan for this work. More in-depth explanation/information follows.

Obesity, Poor Nutrition and Inactivity –This was identified through physical and mental health concerns. LAHS has a Healthy Spirit Program that focuses on health and prevention and is available to staff to participate in. Ransom and Sargent counties each have a community coalition that is focusing on decreasing adult obesity. The objective is to decrease adult obesity rates by a minimum of 3% in each county by January of 2020. The indicators for this include increase presence of obesity information, maintain/enhance current wellness programs and add additional programs/activities, and increase community partners within the coalitions. LAHS is a member of the RC coalition.

Mental Health Services is a broad term for the sake of identification of this high need area that incorporates psychological care, substance abuse addiction counselors and affordable treatment services for this. Also depression and Stress are community concerns. This was also supported by the interviews conducted as a part of the assessment. Tele psychiatry services have been added to our services offered in the Emergency Room. This has been a great addition to our providers who are working in the ER and are often challenged with placing a patient who is in need of mental health

services. Outpatient Tele-psychiatry services are planned to be added to services offered at LAHS by fall of 2016. The Ransom and Sargent coalitions have focused on adult binge drinking and underage drinking. This continues to be a need identified as well as substance abuse.

Violence Prevention is a great area of focus by CHI and specifically to our community which is flowing through the local Violence Prevention Coalition. The violence prevention program will work preventing intimate partner violence using a dual approach. First by building community and organizational capacity through enhancing regular networks and increasing awareness of intimate partner violence but also by teaching local community outreach leaders how to train professionals in many fields to incorporated intimate partner violence prevention efforts in their existing work. Second educate individuals throughout the community on intimate partner violence prevention. The goal is to reduce reported incidents by 20% by 2018.

Cost of Health Care This includes cost of services and insurance. This was identified as concerns with healthcare which included cost of health, dental and vision insurance. LAHS has a Charity Care Program for those who apply for this type of assistance. Lisbon Area Health Services is a part of Catholic Health Initiatives (CHI), a nonprofit organization with a longstanding commitment to assist those who seek our care, regardless of ability to pay. If a patient is unable to pay for all or part of their care they receive at our hospital, they may be eligible for free or discounted services. On the LAHS website (www.lisbonhospital.com) under the tab Patients & Visitors is a drop down that is Financial Assistance. This is where you can find a full explanation of our Charity Care Program.

Access and cost of child care and infant care This is an area identified of high need. This will be shared with both counties through Economic Development for their information and planning purposes. This would be out of scope of the mission of LAHS.

Bullying is an area also identified of high need. Currently the Lisbon school system has a bullying program to address with the school age children. Bullying takes place in a variety of places such as work place. With the focus on Mental Health issues it is felt that an indirect impact may occur to this area of need.

V. Potentially Available Resources

There are many resources available in Ransom and Sargent counties to assist in addressing the significant health needs identified through the CHNA of 2016. The following resources are available:

Sargent County Health District

Ransom County Public Health

Lisbon Area Health Services

Abuse Resource Network

Ransom County Healthy Lifestyle Coalition

-Coalition members noted include representation of: attorney, physician, county commissioners,

County health department members, SADD advisors, School board members and faculty, Long term care, law enforcement, hospital, Civic and Commerce, NDSU Extension office, city council Healthy Sargent County, Kiwanis organization

-Coalition members include representation of: law enforcement, Public health district, student with SADD, Freedom Resource, NDSU Extension office, Fitness coach, Community member, School counselor, pastor, wellness coach, ambulance, social services, parent group, senior services, WIC director.

CHI Lisbon Health Employees

CHI Lisbon health Medical Staff

CHI Board of Directors

CHI Division tele-psychiatry services

Freedom Resources

NDSU Extension Office Ransom County

NDSU Extension Office Sargent County

Ministerial Association Ransom and Sargent County

Throughout the assessment and written report, there has been support from local and regional levels by interviews and sharing of data.

VI. Evaluation of Impact

The Community Health needs assessment from 2013 had community priorities identified to be focused on. The following will provide updates on those initiatives identified.

No evenings or weekend hours: Family Medical Clinic had been offering Saturday clinic hours, however has since discontinued this schedule. LAHS started a provider based clinic and not able to offer weekend/evening hours due to low number of providers, however do have clinic appointments available over the noon hour unlike the other local clinics. No additional action taken due to low number of providers.

Cost of Healthcare: LAHS has a financial assistance person to assist with patients in need of financial assistance at our facility. The greatest challenge that LAHS has is to work with patients to ensure that they complete the application which includes submission of specific financial records. Many individuals who do qualify do not complete the process. Information regarding our Charity Care program is listed on our website at lisbonhospital.com. Impact of charity care for FY15-\$87,439, FY 14-\$60,901, FY 13-\$70,040.

Lack of specialists: LAHS has made several attempts in the last couple of years to bring in ENT services as well as dermatology which has been unsuccessful. Dr Johnson, an orthopedic surgeon from Breckenridge, had started seeing patients as an outpatient and performing limited surgical procedures within the past couple of months, however due to cost has discontinued outreach at this time. Essentia has no future plans to bring specialty physicians to Lisbon. There has been no successful attempts to this initiative.

Diabetes Care: Education has been a high area of focus in the past three years with our diabetes educator as well as community education through the NDSU Extension office. Specifically a class for pre-diabetics or people with risk factors was started in January 2016 through Ransom County Public Health.

Health Services for Cancer Patients: This was an area of high concern. LAHS has been unsuccessful to recruit for a consulting oncologist as we had several years ago. LAHS continues to offer a very limited list of chemotherapy. Services that we are able to provide are lab work, injections after chemo as well as discontinuation of some Chemotherapy pumps which saves the patient an additional trip to a tertiary care facility. This has had a small overall impact for patient traveling to tertiary care centers.

Health Services for Obesity and Education: This was noted as a high priority item. There was a great amount of focus on healthy eating and making right choices as well as cooking options through formalized class education. There were two health fairs held in the past 3 years where a variety of booths were available. The booths included healthy food choices/snacks as well as therapy exercises, blood sugar screenings, as well as information on screening mammography and colonoscopies. Obesity continues to be of high concern and continues to be an area of focus.

Poor Nutrition and Eating Habits: The focus on this has been done in conjunction with overall focus on obesity and education.

Mental Health Services: This was identified as a high priority. The pilot project in CHI was completed and Emergency tele-psychology was implemented at LAHS approximately a year ago with good success in assisting ER patients and placement of patients elsewhere as needed. This was an impact to eight patients. The local coalitions focused on a component of mental health with focusing on underage drinking and adult binge drinking in Ransom and Sargent counties. This work included server training for establishments, working with the youth through a program Parents Lead, as well as regular education in the local papers. This work was found to be successful by the coalition. The results of the follow up survey sent out to a sampling of residents will be presented to the coalitions soon.

In Home Services: This was seen as a low priority in the last survey as Faith in Action was unsuccessful in this community. The Heart program located in Enderlin has received grant funding to put such a program into place in the Lisbon area.

Another Physician in the community: This was noted as a high priority. A physician and a Nurse Practitioner have been hired and a provider based clinic started within the hospital.

Dialysis Facility: The dialysis facility in Oakes continues to operate for this region and is an area of high expense. The facility is located 40 miles from Lisbon.

More support groups: This was an area of moderate need. Education has been increased through the efforts of Relay for Life with cancer. Education has been provided on healthy eating, underage drinking, and adult binge drinking. No set support groups have been established.




Appendix A

Ransom & Sargent County Community Health Needs Assessment



Introduction to Survey

CHI Lisbon Health, Ransom County Health Department and Sargent County District Health Unit invite you to participate in the 2015 Community Health Needs Assessment. The information that we gather from you will be important for the future development of an action plan to address the identified unmet needs in the community. Your participation in this work is important to the community health improvement for all of our communities.

Please take a moment to complete the survey. Your answers will be combined with other responses in Survey Monkey and reported as a combined total. If you have any questions about the survey, you may contact Pat Olofson, at 1-701-683-6455  1-701-683-6455 or Pat Olofson@catholicealth.net, or Alison Peterson, SCDHU at 1-701-724-3725  1-701-724-3725 or alisonpeterson@co.sargent.nd.us, or Brenna Welton, RCHD 1-701-683-6151  1-701-683-6151 or brenna.welton@co.ransom.nd.us.

Thank you for completing this survey.

1. In what county do you currently reside ?

Using a 1-5 scale, with 1 being "**not at all**" and 5 being "**a great deal**", please tell us your level of concern about health and wellness issues in your community. Please mark which fits best.

2. Considering your COMMUNITY, what is your level of concern with ECONOMICS issues such as:

	1= not at all	2	3	4	5= a great deal
Affordable housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homelessness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hunger	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poverty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to food services (groceries, senior meals, food pantries, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Considering your COMMUNITY, what is your level of concern with TRANSPORTATION issues such as:

	1= not at all	2	3	4	5= a great deal
Availability of public transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of public transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of good walking or biking options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Road conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Considering your COMMUNITY, what is your level of concern with ENVIROMENTAL issues such as:

	1=not at all	2	3	4	5= a great deal
Water quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Air quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home septic systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disposal of hazardous waste (batteries,paint,chemicals,electronics, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 5. Considering your COMMUNITY, what is your level of concern with CHILDREN and YOUTH issues such as:**

	1=not at all	2	3	4	5=a great deal
Availability of services for at-risk youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of services for at-risk youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School dropout rates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School absenteeism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teen pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of activities for children and youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of activities for children and youth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of quality child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of quality child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of quality infant care(birth to 2 years of age)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of quality infant care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Considering your COMMUNITY, what is your level of concern with these AGING POPULATION issues:

	1=not at all	2	3	4	5=a great deal
Availability of activities for seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of activities for seniors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of resources to help the elderly stay safe in their home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of resources for family/friends caring for and making decisions for elders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of long term care facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of long term care facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of memory care facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Considering your COMMUNITY, what is your level of concern with SAFETY items such as:

	1=not at all	2	3	4	5=a great deal
Child abuse and neglect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elder abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Domestic violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Presence of street drugs, prescription drugs, and alcohol in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Presence of gang activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sex trafficking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 8. Considering your COMMUNITY, what is your level of concern with HEALTHCARE:**

	1=not at all	2	3	4	5=a great deal
Access to needed technology and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to affordable healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to affordable prescription drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to affordable health insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of affordable vision insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of affordable dental insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Distance to healthcare services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providers not taking new patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coordination of care between providers and services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of non-traditional hours (evenings, weekends, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use of emergency room services for primary healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Timely access to vision care providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to dental care providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to prevention programs and services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to bilingual providers and/or translators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to doctors, physician assistants, or nurse practitioners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to physician specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to registered dieticians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to facilities for exercising	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to exercise specialists or personal trainers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to mental health providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely access to substance abuse providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. What specific services, if any, do you think YOUR HEALTHCARE ORGANIZATION needs to add, and why?

*** 10. Considering your COMMUNITY, what is your level of concern with these PHYSICAL and MENTAL HEALTH issues:**

	1= not at all	2	3	4	5= a great deal
Obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor nutrition and eating habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inactivity and lack of exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cancer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic Disease (diabetes, heart disease, multiple sclerosis, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexually transmitted disease (AIDS, HIV, chlamydia, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Infectious diseases such as the Flu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dementia and Alzheimer's disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other psychiatric diagnosis (multiple personalities, bi-polar, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 11. Considering your COMMUNITY, what is your level of concern with SUBSTANCE USE and ABUSE with these issues:**

	1=not at all	2	3	4	5=a great deal
Alcohol use and abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug use and abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Underage drinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Underage drug use and abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking and tobacco use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exposure to secondhand smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following set of questions is on **YOUR OWN PERSONAL HEALTH.**

12. In general, how would you rate YOUR HEALTH ?

- Excellent
- Good
- Fair
- Poor
- Don't Know

*** 13. Have you ever been told by a Doctor/Medical Provider that you have any of the following?**

- N/A (not applicable)
- Anxiety
- Panic Attacks
- Other mental health problems
- Depression
- Other (please specify)

14. Thinking about your Mental Health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your Mental Health not good?

*** 15. Over the past 2 weeks, how often have you been bothered by any of the following issues? (Check 1 for each)**

	Not at all	Several Days	More than half of the days	Nearly every day
Little interest or pleasure in doing things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling down, depressed, or hopeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 16. How often do you currently smoke cigarettes?**

- Not at all
- Some days
- Every day

*** 17. How often do you currently use chewing tobacco or snuff ?**

- Not at all
- Some days
- Every day

18. Where would you first go for help if you wanted to quit using tobacco ? (Choose 1 answer)

- Not Applicable (N/A)
- Doctor
- Pharmacy
- I don't want to quit
- Public Health Unit
- Private therapist/counselor
- ND Quitline
- I don't know
- Other (please specify)

*** 19. During the PAST 30 DAYS on the days when you drank, about how many drinks did you drink on average? A drink is 1 can of beer, 1 glass of wine, or a drink with 1 shot of liquor.**

*** 20. During the PAST 30 DAYS, how many times did you consume at least 4 or 5 alcoholic drinks (4 for females, 5 for males) on the same occasion(at the same time, or within a couple hours of each other)?**

- N/A I do not drink
- Never
- Once a month
- Once a week
- 2 to 3 times a week
- Almost every day

21. Have you ever had a problem with

	N/A	Yes	No
Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription or non-prescription drug abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If you answered yes to one of the above, did you get the help you needed?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. Over the past 2 years

	N/A	Yes	No
Has alcohol use had harmful effects on you or a family member?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has prescription or non-prescription drug use had harmful effects on you or a family member?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

These questions are still on *your own PERSONAL HEALTH*.

*** 23. Below is a list of GENERAL preventative screenings and procedures that you may have had in the last year. Please tell us whether or not you had each of the procedures in the last year. Please answer N/A if the question does not pertain to you (i.e. not at the age for a bone density test).**

	N/A	YES	NO
Blood Pressure screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blood Sugar screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bone Density test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cardiovascular screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cholesterol screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental screening and x-rays	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flu Shot/Flu Mist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Glaucoma test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunizations (Tetanus, Hepatitis A or B etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pelvic Exam(women's health)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexually transmitted disease (STD) screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vascular screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. If you DID NOT have the procedures in the last year, why not?

	N/A	Doctor hasn't suggested	Cost	Fear of Procedure	Fear of Results	Unable to Access Care	Other Reason
Blood Pressure screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blood Sugar screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bone Density screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cardiovascular screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cholesterol screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental screening and X-rays	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flu Shot or Flu Mist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Glaucoma Test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pelvic Exam (women's health)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
STD screenings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vascular screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

25. Below is a list of preventative CANCER screenings and procedures that you may have had in the last year. Please tell us whether or not you had each of the procedures in the last year.

	N/A	YES	NO
Breast Cancer screening (i.e. mammogram, breast exam, monthly self exam,women age 40+)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cervical cancer screening (i.e. pap smear within 3 years of first sexual intercourse, or by 21 every 1-3 years depending on the risk factors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Colorectal cancer screening (i.e. colonoscopy every 10 years beginning at age 50 , fecal occult blood test every year, barium enema every 5 years, all depending on risk factors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prostate cancer screening (i.e. PSA blood test and/or digital exam)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skin cancer screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. If you DID NOT have the procedures in the last year, why not ?

	N/A	Doctor hasn't suggested	Cost	Fear of Procedure	Fear of Results	Unable to Access Care
Breast cancer screening(i.e. Mammogram, breast exam, woman age 40+)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cervical cancer screening(i.e. pap smear within 3 yrs of intercourse, or by age 21 every 1-3 yrs, depending on the risk factors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Colorectal cancer screening(i.e. colonoscopy every 10 yrs beginning at age 50, fecal occult blood test every year, barium enema every 5 yrs, all depending on risk factors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prostate cancer screening(i.e. PSA blood test and or digital exam)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skin cancer screening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

*** 27. Do you have any of the following chronic diseases(Choose all that apply).**

- N/A (not applicable)
- Arthritis
- Asthma
- COPD
- Cancer
- Congestive Heart Failure
- Stroke
- Alzheimer's
- Hypertension
- High Cholesterol
- Diabetes

Other (please specify)

*** 28. About how long has it been since you last visited a Doctor or Health Care Provider for a routine physical exam?**

- Within the past year
- 1-2 years
- 3-5 years
- 6 or more years
- Don't Know
- Never

*** 29. What are the barriers that affect your access to medical care ? (Check all that apply)**

- None, I am able to access medical care with no problems
- Confidentiality
- No evening or weekend hours
- Shortage of Doctors
- Transportation difficulties
- Cost of healthcare
- Inadquate health insurance(i.e. high copays, high deductibles, inconsistent coverage)
- Lack of Specialists
- Provider is not taking new patients
- Lack of Bilingual Providers
- Other (please specify)

*** 30. About how long has it been since you last visited a Dentist or dental clinic for any reason ?**

- Within the past year
- 1-2 years
- 3-5 years
- 6 or more years
- Don't Know
- Never

*** 31. Where do you get most of your health-related information (Choose all that apply).**

- Government websites(i.e. local Public Health, CDC)
- Non-Governmental websites (i.e. WebMD)
- Medical Professional
- Family or Friends
- Health Helpline (telephone)
- Social Media(i.e. Facebook, Twitter, Instagram)
- Television
- Magazine, newspaper, or books
- Alternative health specialist
- Email
- Mail
- Other (please specify)

Demographic Information- Please tell us about yourself.

This section gives us an idea of who needs to be reached with information. Giving your zip code at the end of this survey will help us know which cities we need to reach out to.

*** 32. What is your age ?**

- 18-24 years
- 25-34 years
- 35-44 years
- 45-54 years
- 55-59 years
- 60 -64 years
- 65-74 years
- 75 and older

*** 33. What is your highest level of education ?**

- Some High School
- High School diploma or GED
- Some college/no degree
- Associate's degree
- Bachelor's degree
- Graduate or Professional degree
- Grade school only

34. What is your employment status ? (choose all that apply)

- Unemployed
- Full Time
- Part Time
- Homemaker
- Multiple Job Holder
- Retired
- Disabled
- Self-Employed
- Student
- Unable to work

*** 35. What is your gender ?**

- Male
- Female
- Transgender
- Prefer not to answer

36. What best describes your race/ethnicity ?(Coose all that apply)

- White
- Hispanic
- Black or African American
- Native American or Alaska Native
- Asian or Pacific Islander
- Prefer not to answer

37. What is your approximate annual household income before taxes ?

- Less than \$20,000
- \$20,000 to \$39,000
- \$40,000 to \$69,000
- \$70,000 to \$119,000
- \$120,000 or more
- Prefer not to answer

*** 38. If employed, what is your professional field ? (Choose all that apply)**

- Not Applicable
- Education
- Agriculture
- Healthcare
- Manufacturing
- Construction
- Retail Trade
- Arts/Entertainment
- Other (please specify)

*** 39. How long have you lived in your community ?**

- Less than 2 years
- 2 to 5 years
- More than 5 years
- whole life (born and raised here)

*** 40. What is your insurance status ? (Choose all that apply)**

- No Insurance
- Private Insurance
- Medicaid
- Medicare
- Insurance through employer
- Veterans Healthcare Benefits
- Vision
- Dental
- Other (please specify)

*** 41. Where do you often go to access medical care ? (Check all that apply)**

- Public Health
- Milnor Clinic
- Sanford Health
- Family Medical Clinic
- CHI Oakes Hospital & Clinic
- Emergency Room
- CHI Lisbon Health
- Essentia Health
- St. Francis Healthcare Campus, Breckenridge
- Other (please specify)

*** 42. How far do you have to travel to access medical care ?**

- Less than 20 miles
- 20-49 miles
- 50-99 miles
- 100 miles or more

43. How many children younger than 18 years live in your household ? (If none please skip to question 47)

44. Where do you often go to access medical care for your CHILD ? (Check all that apply)

- Public Health
- Milnor Clinic
- Sanford Health
- Family Medical Clinic
- CHI Oakes Hospital & Clinic
- Emergency Room
- CHI Lisbon Health Clinic
- Essentia Health
- St. Francis Healthcare, Breckenridge
- Other (please specify)

45. Are all children in your household current on their immunizations?

- Yes
- No
- Don't Know

46. Do all children in your home, (6 months to 18years) get a flu shot or flu mist each year?

- Yes
- No
- Don't Know

47. What is your home Zip Code ?

48. Please share any additional concerns and suggestions you may have.

Appendix B

Survey Distribution by Community

Communities included in Survey Distribution

Ransom County and Sargent County—all cities within these counties

Elliot
Enderlin
Fort Ransom
Lisbon (Co. Seat)
Sheldon

Cayuga
Cogswell
Forman (Co Seat)
Gwinner
Havana
Milnor
Rutland



Ransom County, ND



Sargent County, ND