

# **2013 Avera Heart Hospital of South Dakota Implementation Strategy**

## **Summary**

Avera Heart Hospital is a joint venture owned by Avera McKennan and the physicians of North Central Heart Institute. The 53 bed critical-care hospital, specializing in all aspects of cardiology and cardiovascular surgery, is located in Sioux Falls, S.D. Avera Heart Hospital provides excellent and state-of-the-art cardiovascular care to all patients and their families and has the lowest risk-adjusted heart attack mortality and readmission rates in the region.

Avera Heart Hospital was part of a Community Health Needs Assessment performed in conjunction with its partner, Avera McKennan, in compliance with federal governmental requirements under Internal Revenue Code Section 501(r). While Avera Heart Hospital itself is not subject to the provisions of 501(r), the fact it is owned by Avera McKennan, a 501(c)(3) hospital subjects it to these rules. Therefore, the Avera Heart Hospital is a part of the assessment.

The 2013 Community Health Needs Assessment utilized a combination of quantitative and qualitative information based on census data, patient data, and focus group feedback from several community organizations and leaders. This report summarizes the results of the analysis.

## **Target Areas & Population**

Avera Heart Hospital serves both urban and rural populations, as the city of Sioux Falls is a metropolitan area situated in a largely rural region. Sioux Falls is the state's largest city, with a population of 153,888 according to the 2010 U.S. Census. The Sioux Falls Metropolitan Statistical Area (including Minnehaha, Lincoln, McCook, and Turner counties) in 2010 had 228,261 residents, or nearly 30 percent of the state's population, and has an estimated 2012 population of 237,251.

Given the population size and continued growth of Lincoln and Minnehaha counties over the past decade, Avera Heart Hospital's Implementation Strategy will focus on these high growth counties while continuing to serve outlying communities throughout the service area. The population for these two counties has grown 24.3 percent over the past decade, adding about 42,000 residents.

While South Dakota as a whole is aging and failing to replace aging generations with younger generations, Sioux Falls continues to grow. This growth—due to economic opportunities for younger residents and in-migration from refugees and immigrant labor—brings additional challenges and needs. These needs are also representative of those in rural areas because rural residents gravitate to more metropolitan areas when small towns decline or industry departs. The needs in Sioux Falls, however, are more robust simply because the population in Sioux Falls is more complex and diverse than in other areas of the state. The population is predominately white. The largest age group consists of those in the category of 15-44 years of age. There are 86,409 households, with an average of 2.71 persons per household. The 2009 median family income was \$62,661; median household income, \$50,498; and per-capita income, \$25,339.

## **Strategy & Plan Development**

Avera McKennan and Avera Heart Hospital relied on both primary and secondary data in conducting the Community Health Needs Assessment. The following are four key sources of information that were instrumental in identifying health needs and priorities:

1. 2010 Community Needs Assessment
2. 2011 Community Health Needs Assessment
3. Interviews with Key Health Personnel
4. Findings and priorities of the Live Well Sioux Falls Coalition

### 2010 Community Needs Assessment

The process began by reviewing a 2010 Community Needs Assessment that was conducted by the Government Research Bureau at the University of South Dakota at Vermillion, S.D. This research included:

- An area scan which reviewed previous needs assessments
- A phone survey asking 300 respondents in the Sioux Falls area:
  1. What is the most pressing need in your community?;
  2. What is the most pressing need facing you or your family?; and
  3. What is the most pressing health-care-related need in South Dakota, your community, or for you and your family?
- Five focus groups in Sioux Falls composed of government officials, Avera staff, at-large community members, nonprofit executives and staff members in Sioux Falls, community business leaders, and individuals representing the needs of immigrant populations in the Sioux Falls region. These focus groups were asked to identify the most pressing community needs, as well as pressing needs related specifically to health care.

As this assessment was completed in 2010, the information was used as background support. Therefore, additional efforts were made to update research in 2011 and 2012.

### 2011 Community Health Needs Survey

Avera McKennan developed a 24-question survey to assess current community satisfaction with health services provided to the community. Surveys were distributed at the Sioux Falls Annual 4th of July Celebration and the annual Free Breast Health Screening at Scheels Sports Center in Sioux Falls. Individuals attending these events were approached non-systematically and, if they agreed to participate, they completed the survey at that time. Following the questions concerning satisfaction with health services, participants provided open-ended responses concerning the greatest health needs for them, their families, or the community. All responses were anonymous and data was analyzed by Drs. Karla Hunter and Jenn Anderson of South Dakota State University at Brookings, S.D.

### Interviews with Key Community Health Personnel

Primary data was collected through personal interviews with the executive director of South Dakota Urban Indian Health, Inc.; the assistant director of the Sioux Falls Department of Health; the Sioux Falls Community Health dental director; and manager of the Avera Medical Group Health Care Clinic. Participants were asked to identify key needs in the community. All interviews were conducted in 2012.

### Live Well Sioux Falls Health Needs Assessment Survey

Guided by the City of Sioux Falls Health Department, Live Well Sioux Falls is a project that stemmed from a Community Health Transformation Grant from the South Dakota Department of Health, and aims to improve the health and well-being of the citizens of Sioux Falls.

Live Well Sioux Falls seeks to prevent and reduce tobacco use, increase control and awareness of high blood pressure and high cholesterol through quality preventative services, and improve the community environment to support health, specifically to increase active transportation and recreation.

A Community Health Needs Assessment, via interviews, focus groups, and surveys, was designed to reveal what the citizens of Sioux Falls felt were needs and assets within the community. A community survey was completed in August 2012. In this project, which extends through 2016, more than 24 community partner agencies are drafting a comprehensive approach toward a healthier city.

Live Well Survey respondents were asked to identify their perceived top three unhealthy behaviors from a list of 12 behaviors including access to affordable housing; alcohol abuse; bullying; child health or childhood obesity; crime; lack of exercise; poor eating habits; smoking/tobacco use; substance abuse/alcohol, drug, prescription; and workforce and job training opportunities. Respondents were also asked to indicate significant problems that exist in Sioux Falls across a number of areas.

Primary and secondary data from these assessments and research activities allowed Avera Heart Hospital through its relationship with Avera McKennan to identify themes and trends, ultimately developing a list of most commonly mentioned community needs and concerns.

### **Major Needs**

As mentioned above, four major sources of information were relied on in the CHNA: a Community Needs Assessment conducted by the Government Research Bureau at the University of South Dakota at Vermillion, S.D.; a health needs questionnaire with results analyzed by personnel from South Dakota State University at Brookings, S.D.; key interviews with community health leaders; and a Community Health Needs Assessment conducted by a consortium of more than 24 organizations known as Live Well Sioux Falls. Results of these activities are as follows:

#### 2010 Community Needs Assessment

1. Area Scan: A range of concerns were identified including specific cancer diagnoses to broader concerns such as no or limited health insurance, costs of health care, low or no physical activity, drug and alcohol abuse, and obesity.
2. Phone Survey: The most pressing community health care need was identified as health insurance costs and concerns, while the most pressing health needs personally facing survey respondents related to general health, obesity, and alcohol/drug use.
3. Focus Groups: Five focus groups of community leaders identified the greatest health needs in the Sioux Falls community as:
  - a. Health insurance/health care access;
  - b. Navigation and case management – support resources to help people in poverty and those with chronic health conditions keep current on their health care; and
  - c. Obesity.

#### 2011 Community Health Needs Survey

Based on analysis of responses provided, the greatest community health needs are:

1. Limited affordability of health services and prescriptions;
2. Management of chronic conditions (e.g., diabetes, thyroid) or pain; and
3. Access to wellness/exercise facilities to improve cardiovascular health and lose weight.

The lowest levels of satisfaction were reported for:

- Affordability of prescription drugs
  - Across the entire sample, the number one health need (as indicated by the lowest level of satisfaction) was the affordability of prescription drugs.

- Access to dental care services
  - Those without health insurance, those who receive federal or local government assistance, and those who rent their homes have the greatest need for access to dental care services.
- Access to wellness and exercise facilities
  - Those without health insurance and those who receive federal or local government assistance have the greatest need for access to wellness and exercise facilities.

### Interviews with Key Community Health Personnel

Interviews identified these key needs:

- Widespread obesity, high cholesterol, poor diet and lack of exercise in the population
- Access to behavioral health services for uninsured/underinsured
- Access to specialty care for uninsured/underinsured
- Access to diagnostic care for uninsured/underinsured
- Chronic disease management of uninsured/underinsured
- Dental health services for children
- Follow up and coordination to address abuse of prescription drugs (people who go from provider to provider)
- Diabetes care and education
- Care of uninsured, underinsured, Native American, homeless, prison releases and non-English speaking populations
- Health education directed toward people in poverty

### Live Well Sioux Falls Health Needs Assessment Survey

Respondents identified their perceived top three unhealthy behaviors as:

- Alcohol abuse (45.6 percent)
- Poor eating habits (44.5 percent)
- Smoking/tobacco use (41.7 percent)
- Lack of exercise (40.5 percent) closely followed.

Respondents identified the top two significant health care problems that exist in Sioux Falls as:

- Child health or childhood obesity (34.6 percent)
- Substance abuse/alcohol/drug/prescription (32.9 percent)

Through all of these sources, common themes were identified including: Obesity/poor diet/lack of exercise; health care access for uninsured/underinsured people, including specialty care and mental health services; management of chronic conditions; and smoking/alcohol use.

### **System of Prioritization**

A special Community Health Needs Assessment task force was formed to compile the list of the most commonly and most highly identified needs identified in the various data collection methods listed above. This list was presented to Avera McKennan Administrative Council, and, based on a series of considerations (criticality, potential impact, feasibility, and probability of success), the Council prioritized needs in the order given:

- Obesity/poor diet/lack of exercise
- Health care access for uninsured/underinsured people, including specialty care and mental health services
- Management of chronic conditions

- Smoking/alcohol use

### **Description of Avera Heart Hospital Action Plan**

Avera Heart Hospital will address community concerns of health care access for uninsured/underinsured, obesity/poor diet, management of chronic conditions, and smoking use through current service offerings in addition to partnering with the City and other community health care entities. Avera Heart Hospital via Avera McKennan will report progress on these initiatives in three years when the next Community Health Needs Assessment process takes place.

### **Action Plans and Next Steps for Priorities**

For the priority areas listed above, Avera Heart Hospital will:

- Create detailed work plans to achieve priorities
- Develop measureable goals and objectives to ensure efforts can be quantified
- Review current community benefit programs to ensure programs align with priorities and current community needs
- Engage with Avera McKennan, the City of Sioux Falls, Sanford Health, and other key organizations to identify opportunities to partner and/or expand existing offerings to address community-wide needs
- Communicate with the Board and hospital leaders on an ongoing basis

### **Needs Not Being Addressed & Why:**

While all identified community needs are important, Avera Heart Hospital will only address the four needs that were prioritized as most critical. Other needs identified through the process including such things as dental care, behavioral health services, or access to exercise facilities will not be addressed as they were a lower priority and are not within the hospital's core competencies..

### **Board Approval**

This Community Health Needs Assessment Implementation Strategy report was prepared for the May 28, 2014 meeting of the Avera Heart Hospital of South Dakota Board of Directors.

Avera Heart Hospital Board of Directors Approval:

 Don C. Badalala, President

By Name and Title

5/29/14

Date