

# Avera Hand County Memorial Hospital Miller, South Dakota

## 2016 Community Health Needs Assessment

Administrator: Bryan Breitling



## TABLE OF CONTENTS:

- I. Introduction.
- II. Community Served by the Hospital.
  - a. Overview of Avera Hand County Memorial Hospital.
  - b. Governance.
  - c. Primary Care Services.
  - d. The Community We Serve.
  - e. Chronic Health Indicators.
- III. Community Input.
  - a. CHNA Survey Process.
  - b. Small Group Meetings.
- IV. Prioritized Significant Community Health Needs.
  - a. #1 Assistance navigating your personal medical record through patient portal or hospital website.
  - b. #2 Access to public transportation.
  - c. #3 Access to affordable housing.
- V. Potentially Available Resources.
- VI. Evaluation of Impact.
  - a. #1 Mental Health Access.
  - b. #2 Public Transportation.
  - c. #3 Recruitment.
  - d. #4 Wellness.

## II. INTRODUCTION:

In 2015 to 2016, Avera Hand County Memorial Hospital completed a Community Health Needs Assessment (CHNA) for Hand County, S.D., the hospital's primary service area. The process started with defining our community and collecting secondary data and resources. Once completed, the process continued with paper surveys that various community groups completed, and compilations of our focus groups. Our internal CHNA team reviewed the secondary data, compiled paper surveys, and focus group results, to prioritize goals addressing identified community health needs to improve the overall health of the community. The following document is the report generated as a result of these processes.

## III. COMMUNITY SERVED BY THE HOSPITAL.

### *a. Overview of Avera Hand County Memorial Hospital.*

Avera Hand County Memorial Hospital is a community hospital located in Miller, S.D., county seat for Hand County. Designated by Medicare as a Critical Access Hospital, the hospital is a member of the Avera Health system of care, based out of Sioux Falls, S.D..



Avera Hand County Memorial Hospital has two family practice physicians and three certified nurse practitioners and employs 82 people. The hospital is a 35,000 square foot facility, which includes inpatient, outpatient and clinic services. Avera Hand County Memorial Hospital partners with Avera Health offering eCare services, which utilize state of the art technology providing 24 hour access for both emergent and consulting care. Avera Hand County Memorial Hospital had 268 inpatient discharges and 14,694 outpatient visits in FY2015.

### *b. Governance.*

Avera Hand County Memorial Hospital is a leased facility by Avera Health. Locally, Hand County owns the health campus. The entire campus is leased to Hand County Memorial Hospital, Inc., which operates some community based services and subleases space to Vision Care, a vision clinic in Miller, and also subleases the hospital and clinic areas to Avera McKennan. Avera McKennan operates the hospital and clinic as Avera Hand County Memorial Hospital and Avera Medical Group – Miller as a department of their organization. The relationship strengthens the Avera ties to enhance clinical, management and organizational support, while maximizing the local ownership the County provides. The governing board of Hand County Memorial Hospital also serves as the advisory board to Avera Hand County Memorial Hospital.

Avera Hand County Memorial Hospital is truly a community organization. Our employees are encouraged to participate in community activities, volunteering their time, and serving on various committees and boards. We strive to sustain an effective community benefit ministry. Avera is a health ministry rooted in the Gospel. Our mission is to make a positive impact in the lives and health of persons and communities by providing quality services guided by Christian values. Avera Hand County Memorial Hospital has an auxiliary that sponsors various volunteer opportunities at the hospital and provides staff thank you events throughout the year.

*c. Primary Care Services.*

Avera Hand County Memorial Hospital is the only hospital in Hand County. The hospital is regionally based, whereas the nearest hospital is 45 miles away. Avera Medical Group – Miller, is our primary care clinic. Also regionally based, Avera Medical Group – Miller is the only medical clinic in Hand County.

Additional health care related services in Hand County include a Medicare certified nursing home, assisted living, home health, hospice, ambulance service, chiropractic services, a vision clinic, and public health clinic.

Avera Hand County Memorial Hospital recently completed a large construction project, modernizing our facility to meet consumer expectations and implementing new healthcare technology. Reinvesting in the facilities and technology ensure the hospital is up to date, which is an important investment in the health of our rural community. This project has proved vital for several reasons, including providing modern physical areas for care to be provided, enhancing the technology access for the “eServices” now provided, and providing a more comfortable and controlled environment for healing to take place. Additionally, the investment in the community has already made a positive impact in the recruitment efforts of providers and staff to our local community. Twenty percent of this project was paid for by donations from the community, another 20 percent by reserves, and the remaining funds were made available through a USDA loan, in which the County residents approved by an 87 percent approval vote. This project was the first in a series of investments approved in the community, ranging from a new elementary school and several agricultural related projects, such as dealership expansions and a new rail loop West of Miller, S.D.

Avera Hand County Memorial Hospital provides inpatient acute and swingbed care, as well as outpatient services such as emergency services, outpatient treatments, physical, occupational and speech therapy, respiratory therapy and DME services, cardiac rehab, various laboratory services, radiology including radiographs, bone density, and CT along with radiology services provided regionally such as ultrasound and mammography. Additionally, Avera Medical Group – Miller is a primary care clinic based within the hospital, employing three family practice physicians and three nurse practitioners providing coverage for the clinic, ER, inpatient and other hospital outpatient services.

Avera Health is a large rural based health system based in Sioux Falls, S.D. and serves facilities in South Dakota, Minnesota, Nebraska and Iowa. One mission of Avera is to meet the health care needs of rural residents. Through that mission, the growth of “eServices” has blossomed. Avera Hand County Memorial Hospital uses eEmergency, ePharmacy, eConsult, eStroke, eICU, and PACS services, whereby our patients receive services locally in Miller, S.D., but have the benefit of direct contact with a specialist in a regional community or our care providers discussing the care, options and best routes to take in providing the care to our patients. It has allowed more patients to receive care in their home community receiving additional support than previously allowed. In addition, if a transfer is required, the eServices team can assist with the preparations for the transfer and receiving of the patient at a tertiary facility.

Avera Hand County Memorial Hospital uses the same electronic medical record that is sponsored by Avera Health. As a result, ease of health related data is shared among the Avera facilities when a transfer is required or a test is completed at another Avera facility.

*d. The Community We Serve.*

The primary county Avera Hand County Memorial Hospital serves is Hand County. According to the United States Census Bureau, 2010 census lists Hand County at 3,431 people, of which 98.5 percent were white and English is the primary language spoken. The 2015 estimates for Hand County are 3,348, a 2.4 percent drop from the 2010 census base.

The percent of each age breakdown, compared to the state of South Dakota, is similar or lower with two exceptions, the 20 – 34 is much lower and the 65+ breakdown is almost twice the statewide breakdown.

The 2014 US Census illustrates that Hand County’s median household income was \$46,951 compared to the state average of \$50,338. 10 percent of Hand County residents were below poverty compared to the state’s rate of 14.2 percent. According to SD Kids Count, 19 percent of the students in the Miller School District were eligible for free lunches in 2014.

As reported by the Bureau of Labor, the unemployment rate for Hand County was 2.7 percent for February 2016, which was the same as the state rate.

Age Breakdowns	Hand County		State of SD	
	Total	% of Tot	Total	% of Tot
<b>Under 5 years</b>	174	5.3%	59,621	7.3%
<b>5 to 9 years</b>	182	5.6%	55,531	6.8%
<b>10 to 14 years</b>	206	6.3%	53,960	6.6%
<b>15 to 19 years</b>	174	5.3%	57,628	7.1%
<b>20 to 24 years</b>	121	3.7%	57,596	7.1%
<b>25 to 34 years</b>	251	7.7%	105,429	12.9%
<b>35 to 44 years</b>	372	11.4%	93,112	11.4%
<b>45 to 54 years</b>	523	16.0%	116,918	14.4%
<b>55 to 59 years</b>	236	7.2%	54,231	6.7%
<b>60 to 64 years</b>	173	5.3%	43,573	5.4%
<b>65 to 74 years</b>	313	9.6%	57,627	7.1%
<b>75 to 84 years</b>	327	10.0%	39,728	4.9%
<b>85 years and over</b>	216	6.6%	19,226	2.4%
<b>Total population</b>	<b>3268</b>	<b>100.0%</b>	<b>814,180</b>	<b>100.0%</b>
<b>65+</b>	<b>856</b>	<b>26.2%</b>	<b>116,581</b>	<b>14.3%</b>

According to the 2014 SD Department of Health's Inpatient Origin & Destination Study, 77.47 percent of all inpatient admissions at Avera Hand County Memorial Hospital, were residents of Hand County.

<b><i>Inpatient Origin Summary Report</i></b>							
<b><i>for January - December 2014</i></b>							
Miller - Avera Hand County Memorial Hospital							
	Discharges	% of Discharges	Discharges				
			<18	18-44	45-64	65-74	75+
Beadle	6	3.30%	0	1	0	2	3
Brown	1	0.55%	0	0	0	0	1
Faulk	1	0.55%	0	0	0	0	1
Grant	1	0.55%	0	0	0	0	1
Hand	141	77.47%	0	8	9	18	106
Hughes	2	1.10%	0	0	1	0	1
Hyde	26	14.29%	0	0	1	9	16
Walworth	1	0.55%	0	1	0	0	0
Alaska	1	0.55%	0	0	1	0	0
Washington	2	1.10%	0	0	0	0	2
Total	182	100.00%	0	10	12	29	131

The hospital has a financial assistance policy that is followed for any patient requesting assistance or any patient who has illustrated difficulty in paying their bills. The hospital also works closely with patients and their families to provide assistance, ranging from assisting patients with the County Poor Relief application, registering for VA benefits, Medicaid or whatever other means the patient or guarantor may qualify or be eligible for.

Avera Hand County Memorial Hospital also provides numerous community benefits. Each year, a list of the benefits is compiled and shared with the community. The community benefit

programs span a wide range of activities from blood pressure checks to CPR classes as well as providing hospital employee staff hours for community benefit projects. Avera Hand County Memorial Hospital is proud to partner with the community, and meets the needs where possible. Due to our distance to larger communities with more services, e.g. our maintenance staff has assisted with DME equipment repair. Each year the hospital participates in the Farm and Home Show; offering community members free or reduce cholesterol screens, assist with the Lions on vision screenings, and/or a variety of other screenings, health education or services. As stated, a complete list is prepared annually and shared with the community.

*e. Chronic Health Indicators.*

<b>Chronic Health Indicators, Morbidity &amp; Preventive Services</b>						
<b>Indicators</b>	<b>Data Source</b>	<b>Year (Group of Years)</b>	<b>Hand County</b>		<b>State of SD</b>	
			<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Diabetes incidence rate per 1,000	CC	2006-2012		7.2%		7.2%
Age-adjusted cancer incidence rate/100,000	SD CR	2003-2012	355.9		453.3	
% of adults that report having been diagnosed with high blood pressure	CC	2006-2012		19.5%		28.5%
% of adults that report fair or poor health	CHR	2015		6.0%		11.0%
Average number of reported physically unhealthy days per month among adults 18 years of age and over	CHR	2015	2.3		2.7	
Average number of reported mentally unhealthy days per month among adults 18 years and over	CHR	2015	2.2		2.6	
% of adult women respondents age 50+ who report having mammogram in past 2 years	CC	2006-2012		81.2%		77.8%
%of adults age 50+ who have had a Sigmoidoscopy/Colonoscopy within the past 10 years	CC	2006-2012		45.7%		63.6%
% of women age 18+ who report having a pap smear test in the past 3 years	CC	2006-2012		83.1%		76.2%

SDCR = South Dakota Cancer Registry; CC = Community Commons; CHR = County Heath Rankings

Chronic diseases account for seven of every 10 deaths in the United States. They are among the most prevalent, costly, and preventable health problems. Examples of chronic diseases include cancer, heart disease, stroke, obesity, arthritis, and diabetes. Healthy lifestyles can reduce the risk for developing chronic disease. The above chart lists chronic health indicators for Hand County and the State of South Dakota.

In a study by the CDC National Health Profiles by County per 100,000 lives 2010,

	Hand County	State of SD	United States
Percent low birth weight infants	5.9%	6.6%	8.2%
Heart Disease	120.4	191.3	190.9
Malignant Cancer	120.6	188.1	178.4
Cerebrovascular Disease (stroke)	27.4	47.0	45.1
Accidents	35.9	47.8	41.0
Alzheimer's Disease	13.7	36.3	22.7
Diabetes Mellitus	13.5	26.9	23.7

#### **IV. COMMUNITY INPUT.**

##### *a. CHNA Survey Process.*

The hospital used a survey tool to begin the process of qualitative data collection. The survey was available to the Hand County Community Health staff, the Miller Area Health Board, the Miller Senior Citizens membership, and the hospital auxiliary members during the winter of 2016. The Hand County Community Health staff represents and serves the county's underserved population. The Miller senior citizens membership is representative of the community senior members including low income and underserved seniors. The hospital auxiliary also represents and serves members who are low income.

The survey had two components; the first was the multiple choice satisfaction ranking, whereby each question had five choices; completely unsatisfied, unsatisfied, satisfied, very satisfied or not applicable. The second component of the survey was the essay questions. There were five questions available.

##### *b. Small Group Meetings.*

Community small groups were selected for presentation and dialogue, based on their specific connections to the community and the constituents they represent and/or have regular contact with. The small groups meetings consisted of the AHCMH auxiliary, Foundation Committee members, Miller School Guidance Counselor, On Hand Development leadership, and the Hand County Public Health Nurse.

The results were organized in a ranking of most unsatisfactory to most satisfactory for presentation to the various community groups for dialogue. At each group setting, we reviewed the satisfaction ratings of the survey to begin the dialogue, asking various questions to identify themes or trends. The essay portion of the interviews spurred more personalized dialogue as each small group had the ability to identify with specific comments resulting in those dialogue conversations being expanded to be more specific on those topics. The health need priorities were selected based on the consensus of the majority of the small group meetings.

## V. PRIORITIZED SIGNIFICANT COMMUNITY HEALTH NEEDS.

The community health needs assessment planning group reviewed the satisfaction ratings, essay responses, and focus group discussions. Discussion and ranking of the prioritized significant community health needs was conducted. The CHNA planning group consisted of the hospital department managers, the Miller school guidance counselor, and the Hand County public health nurse.

*a. Assistance navigating your personal medical record through patient portal or hospital website.*

Through the survey process and discussions with the focus group, educating community members on the benefits of the patient portal continues to be a priority. Assistance with registering patients for patient portal is available, but continued support so continued access of the portal is recommended. The comment of “the more it is used, the easier it becomes!” is what resonates. However, many patients have used it when medical services were used, then didn’t access it for a while and no longer are using it. Our focus will be to conduct educational programs for patients to illustrate the patient portal benefits.

*b. Access to public transportation.*

Miller has a good public transportation service for in town residents seeking in town appointments. For out of town appointments, the hospital refers patients who cannot drive and who need transport to Capital City Transit of Pierre. Their public transportation bus comes to Miller when scheduled and takes patients to appointments in various cities. Our focus will be to work with Capital City Transit of Pierre, both within the facility as well as in the community, to create awareness and to get the word out about the public transportation services available.

*c. Access to affordable housing.*

Housing in Miller is a tight market and has a higher end price for our size of community. The On Hand Economic Development has completed a housing study in Miller, and is working with the city to spur housing development in Miller. Our focus will be to provide leadership to the housing task force, and support housing development in the community through subsidy, rental support, or other methods to assist with the development of affordable housing in Miller.

## **VI. POTENTIALLY AVAILABLE RESOURCES.**

- a. Assistance navigating your personal medical record through patient portal or hospital website.*

Avera Hand County Memorial Hospital is a member of the Avera Health System. Through this relationship, we have experienced staff that can provide local education to patients and family members seeking access to the patient portal, while also receiving support from Avera Marketing and Avera Information Technology areas to assist with appropriate education awareness and technology access to support the education goals.

- b. Access to public transportation.*

Miller does have good access to public transportation. The Miller Housing Authority operates the local Miller Wheels program. In addition, Capital City Transit of Pierre does a good job of transporting patients to out of town appointments. Our goals will be to work with these two entities to share their message and make contacting them easier for access to public transportation services.

- c. Access to affordable housing.*

The South Dakota Housing Authority and Dakota Resources are working with several communities in South Dakota on rural housing. In Miller, On Hand Economic Development is contracting with Dakota Resources for assistance with studying and spurring housing in Miller. The Miller City Council and the Miller Housing Authority are also partnering with On Hand Economic Development to provide guidance, assistance, and leadership to the housing development. Recognizing the impact housing has on rural recruitment, Avera Health, Wheat Growers, and South Dakota Network are working on a statewide partnership to develop ways to support housing development in rural communities. The South Dakota Association of Healthcare Organizations also recently took up housing development in rural communities as a priority for rural health care recruitment.

South Dakota has access to reduced cost housing through the ‘Governor’s House’ program. Currently, the ‘Governor’s Houses’ are limited to economically challenged recipients, however, Economic Development agencies are able to purchase the houses and place them, selling them to community members who qualify.

## **VI. EVALUATION OF 2013 COMMUNITY HEALTH NEEDS ASSESSMENT IMPACT.**

### *a. Mental Health Access.*

Avera Hand County Memorial Hospital, partnering with Community Counseling of Huron, SD, has expanded community mental / behavioral health on-site. Avera Medical Group-Miller has implemented Care Coordination; whereas a Master's prepared Social Worker is part of the clinic care coordination team. The hospital continues to work with the Avera eServices team on the development of an "eBehavioral Health" service line.

### *b. Public Transportation.*

Miller has a good public transportation service for in town residents seeking in town appointments. For out of town appointments, the hospital has begun to refer patients who cannot drive and who need transport to out of town appointments to Capital City Transit of Pierre. Their public transportation bus now takes patients to appointments in various cities outside of Miller.

### *c. Recruitment.*

Avera Hand County Memorial Hospital has offered scholarships to local students pursuing a medical degree, and continues to work with local high school students and local students pursuing medical services with the intent of recruiting them back to Miller.

The hospital has successfully hired a physician and certified nurse practitioner since our last CHNA

### *d. Wellness.*

Avera Hand County Memorial has added a healthy food choice (fresh fruit or vegetable) vending machine at the hospital since the 2013 community health needs assessment.

### **Evaluation:**

Avera Hand County Memorial Hospital made their CHNA report and Implementation Strategy available to the community by posting it on their website. No written comments were received on either the CHNA report or Implementation Strategy.

### **Board Approval:**

This report was prepared for, and approved at the June 2016 Avera Hand County Memorial Hospital Board of Directors regular meeting.