

**Fiscal
Year
2018**

**Community Health Needs
Assessment Implementation
Strategy**

Avera Sacred Heart Hospital

501 Summit Street, Yankton, SD 57078

Fiscal Year 2018

Organization Mission:

History:

The Benedictine Sisters of Sacred Heart Monastery founded Avera Sacred Heart Hospital in 1897. At the bequest of Bishop Thomas O’Gorman, the Sisters created a 30-bed hospital to provide health care for the sick and injured in the frontier region. In the past 100+ years, Avera Sacred Heart Hospital’s rural health mission has grown into a regional health service network organized to provide comprehensive services to residents of southeastern South Dakota and northeastern Nebraska.

Mission:

Avera Sacred Heart Hospital adheres to Avera’s mission: 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.

Values:

The core values of compassion, hospitality, and stewardship guide Avera employees in their daily work.

Compassion: The compassion of Jesus, especially for the poor and the sick of body and spirit, shapes the manner in which health care is delivered by Avera’s employees, physicians, administrators, volunteers and sponsors. Compassionate caring is expressed through sensitive listening and responding, understanding, support, patience, and healing touch.

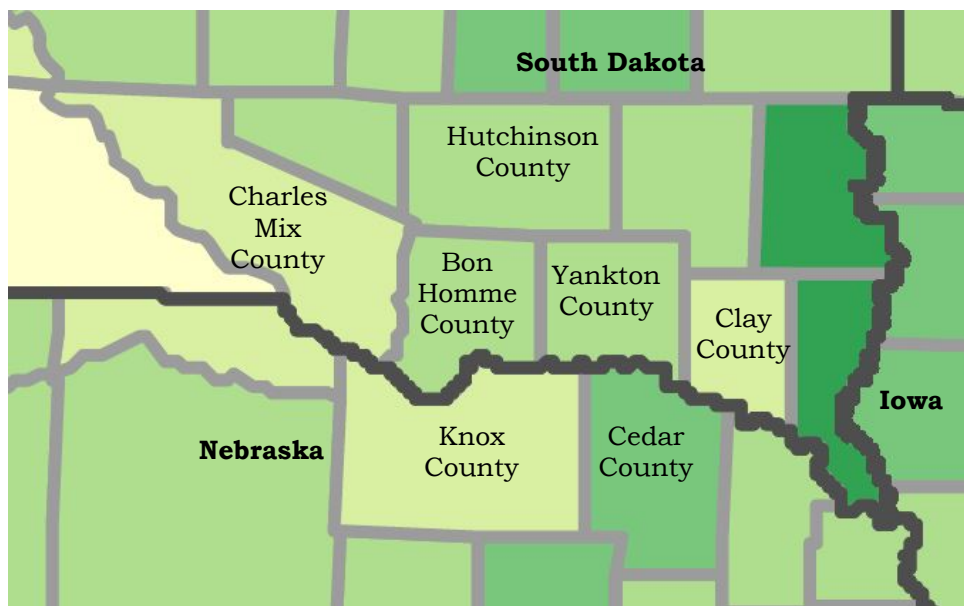
Hospitality: The encounters of Jesus with each person were typified by openness and mutuality. Welcoming presence, attentiveness to needs, a gracious manner seasoned with a sense of humor, are expressions of hospitality in and by the Avera Health community.

Stewardship: Threaded through the mission of Jesus was the restoration of all the world to right relationship with its Creator. In that same spirit and mission, the members of Avera Health treat persons, organizational power and earth’s resources with justice and responsibility. Respect, truth and integrity are foundational to right relationships among those who serve, and those who are served.

The Community Served:

Yankton County is the most populated county in Avera Sacred Heart Hospital's service area and ranks as the #1 county for discharges for the hospital. In 2013, 1700 of the 3,434 patients discharged from the hospital originated from Yankton County according to market data from the South Dakota Association of Health Care Organizations. Avera Sacred Heart Hospital service area spans counties in Southeast South Dakota and Northeast Nebraska. Approximately 73 percent of all discharges from the hospital originate from five counties in South Dakota: Yankton (50 percent), Bon Homme (9 percent), Charles Mix (8 percent), Clay (3 percent), and Hutchinson (3 percent).

During the fiscal year a community health needs assessment was conducted by Avera Sacred Heart Hospital for the seven county primary service area: Yankton, Bon Homme, Charles Mix, Hutchinson and Clay counties in South Dakota and Knox and Cedar counties in Nebraska.



County	State	Population
Yankton County	South Dakota	22,702
Bon Homme County	South Dakota	6,985
Charles Mix County	South Dakota	9,396
Clay County	South Dakota	13,964
Hutchinson County	South Dakota	7,301
Cedar County	Nebraska	8,564
Knox County	Nebraska	8,701

Yankton is the seat of Yankton County and takes pride in being the first capital city of Dakota Territory. Avera Sacred Heart Hospital is located on the banks of the Missouri River in Southeast South Dakota.

Demographics:

The economic state of our primary county, Yankton County, remains stable. The unemployment rate has decreased from 4.6 percent in 2011 to 3.5 percent in 2013 and further decreased to 2.6 percent in 2017 according to Bureau of Labor Statistics, Local Area Unemployment data. Median household income for the county is \$48,991, approximately 8.7 percent lower than the median household income for the State of South Dakota, \$53,263. The percentage of people 100 percent below the federal poverty level for Yankton County is 13.6 percent compared to 14 percent for the State of South Dakota. Please refer to the following table for all other primary service area county economic data.

Economic Security and Financial Resources										
SAIPE = Small Area Income and Poverty Estimate										
Indicators	Data Source	Year (Group of Years)	Yankton County		Bon Homme County		Clay County		Charles Mix County	
			#	%	#	%	#	%	#	%
Children under 18 years age in poverty	SAIPE	2015	684	14.5%	208	17.1%	430	17.7%	922	34.6%
Median Household Income	SAIPE	2015	\$48,991		\$48,900		\$43,902		\$41,005	
% of persons below 100% of the Federal Poverty Level	SAIPE	2015	2,808	13.6%	808	14.6%	2,242	19%	2,088	23.3%
Indicators	Data Source	Year (Group of Years)	Hutchinson County		State of South Dakota					
			#	%	#	%				
Children under 18 years age in poverty	SAIPE	2015	265	18.2	36,584	17.7%				
Median Household Income	SAIPE	2015	\$49,558		\$53,263					
% of persons below 100% of the Federal Poverty Level	SAIPE	2015	840	12.3%	114,291	14.00%				

Indicators	Data Source	Year (Group of Years)	Cedar County		Knox County		State of Nebraska	
			#	%	#	%	#	%
Children under 18 years age in poverty	SAIPE	2015	263	12.4%	414	20.1%	73,349	15.9%
Median Household Income	SAIPE	2015	\$56,092		\$45,466		\$55,073	
% of persons below 100% of the Federal Poverty Level	SAIPE	2015	787	9.4%	1,141	13.7%	224,696	12.2%

Age Distribution
ACS = American Community Survey

Age Group	Data Source	Year (Group of Years)	Yankton County	Bon Homme County	Clay County	Charles Mix County	Hutchinson County	State of South Dakota
			%	%	%	%	%	%
Under 5 years	ACS	2011-2015	6.0%	4.6%	5.0%	8.5%	6.4%	15.0%
5 to 9 years	ACS	2011-2015	5.8%	5.0%	4.7%	8.4%	6.4%	7.0%
10 to 14 years	ACS	2011-2015	5.9%	5.6%	4.6%	7.6%	6.0%	6.5%
15 to 19 years	ACS	2011-2015	6.3%	5.7%	14.4%	7.5%	6.6%	6.8%
20 to 24 years	ACS	2011-2015	6.1%	6.7%	21.2%	5.8%	4.5%	7.2%
25 to 34 years	ACS	2011-2015	12.9%	12.6%	12.9%	10.0%	9.2%	13.1%
35 to 44 years	ACS	2011-2015	12.1%	11.6%	8.9%	9.7%	10.3%	11.4%
45 to 54 years	ACS	2011-2015	14.3%	14.1%	8.7%	12.3%	12.7%	13.0%
55 to 59 years	ACS	2011-2015	7.3%	8.4%	4.7%	7.0%	7.6%	6.9%
60 to 64 years	ACS	2011-2015	6.5%	5.2%	4.5%	5.4%	6.5%	6.1%
65 to 74 years	ACS	2011-2015	8.4%	9.2%	5.6%	8.5%	9.4%	7.8%
75 to 84 years	ACS	2011-2015	6.4%	7.8%	3.1%	6.1%	8.5%	4.7%
85 years and over	ACS	2011-2015	2.0%	3.4%	1.9%	3.2%	6.0%	2.4%

Age Group	Data Source	Year (Group of Years)	Cedar County, NE	Knox County, NE
			%	%
Under 5 years	ACS	2011-2015	5.9%	6.2%
5 to 9 years	ACS	2011-2015	7.2%	5.6%
10 to 14 years	ACS	2011-2015	7.1%	8.0%
15 to 19 years	ACS	2011-2015	7.1%	6.3%
20 to 24 years	ACS	2011-2015	4.6%	4.1%
25 to 34 years	ACS	2011-2015	8.9%	8.0%
35 to 44 years	ACS	2011-2015	9.4%	9.2%
45 to 54 years	ACS	2011-2015	14.2%	14.0%
55 to 59 years	ACS	2011-2015	7.9%	7.6%
60 to 64 years	ACS	2011-2015	6.5%	7.5%
65 to 74 years	ACS	2011-2015	9.4%	10.9%
75 to 84 years	ACS	2011-2015	7.6%	8.0%
85 years and over	ACS	2011-2015	4.1%	4.7%

Avera Sacred Heart Hospital's primary service area of Yankton County is predominately Caucasian (92.3 percent). Latino/Hispanic comprises 3.3 percent of the population and 2.2 percent is American Indian.

Race & Ethnicity								
ACS = American Community Survey								
Race/Ethnic Group	Data Source	Year (Group of Years)	Yankton County	Bon Homme County	Charles Mix County	Clay County	Hutchinson County	State of South Dakota
			%	%	%	%	%	%
White	ACS	2010-2014	92.3%	92.8%	66.6%	92.5%	97.1%	85.0%
Black or African American	ACS	2010-2014	2.1%	1.3%	0.7%	2.0%	0.3%	1.6%
American Indian or Alaska Native	ACS	2010-2014	2.2%	6.2%	35.1%	4.2%	2.9%	8.6%
Asian	ACS	2010-2014	0.6%	1.1%	0.3%	2.6%	0.2%	1.2%
Native Hawaiian or other Pacific Islander	ACS	2010-2014	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%
Some other race	ACS	2010-2014	0.9%	0.9%	0.6%	1.1%	0.4%	0.9%
Two or more races	ACS	2010-2014	1.7%	2.4%	3.1%	2.4%	0.9%	2.6%
Hispanic or Latino Origin	ACS	2010-2014	3.3%	4.0%	2.5%	2.5%	1.9%	3.3%

Race & Ethnicity				
ACS = American Community Survey				
Race/Ethnic Group	Data Source	Year (Group of Years)	Cedar County, NE	Knox County, NE
			%	%
White	ACS	2010-2014	99.4%	88.9%
Black or African American	ACS	2010-2014	0.4%	0.3%
American Indian or Alaska Native	ACS	2010-2014	0.7%	10.8%
Asian	ACS	2010-2014	0.1%	0.6%
Native Hawaiian or other Pacific Islander	ACS	2010-2014	0.1%	0.6%
Some other race	ACS	2010-2014	0.2%	0.8%
Two or more races	ACS	2010-2014	0.8%	1.5%
Hispanic or Latino Origin	ACS	2010-2014	1.6%	2.5%

Implementation Strategy Process:

Avera Sacred Heart Hospital utilized aspects of the Community Health Needs Assessment and Improvement Planning toolkit developed by the South Dakota Department of Health, focus groups conducted by Maximizing Excellence, LLC, and an online survey. The Community Health Needs Assessment and Improvement Planning toolkit was developed to offer communities a reliable resource that can be used to identify, prioritize, and address their community health needs. Avera Sacred Heart Hospital extensively utilized the toolkit during the Fiscal Year 2015 Community Health Needs Assessment and elected to build upon those results for this Community Health Needs Assessment. The Good & Healthy South Dakota Community Health Needs Assessment and Implementation Planning toolkit provided a strong framework to guide and assist Avera Sacred Heart Hospital in conducting the assessment. The process included gathering data focused on the nutrition, physical activity, tobacco usage, and chronic disease management.

Avera Sacred Heart Hospital contracted with Maximizing Excellence, LLC to conduct three focus groups hosted in Yankton, S.D. Careful consideration was taken to ensure that input gathered was representative of the community at large including the medically underserved, low-income or minority populations. Invitations were sent to members of the Yankton Chamber of Commerce, service groups (Lions Club, Rotary Club, Sertoma Club, etc.), agency leaders (e.g. Boys and Girls Club, Yankton County Health Services, Food Bank, the Senior Citizen Center, the Banquet, South Dakota Department of Social Service Yankton Region, etc.) and recruitment flyers soliciting input at the focus groups were placed throughout the community. Personal invitations were extended to individuals identified as key informants working with or representing low-income, minority and medically underserved populations of the community. The Community Health Needs Assessment Steering Committee felt the focus group participants were a sampling of the cross-section of socio-economic demographics and represented the interests of the medically underserved, minorities and low-income members primarily of Yankton County. The focus groups were open to participants throughout the Avera Sacred Heart Hospital service area. Participants included individuals representing local businesses, nonprofits, the retiree community, the City of Yankton, higher education, the Yankton School District, South Dakota Department of Social Services, and general community members. The focus groups were conducted in 90 minute sessions. In exchange for their time, participants were offered a \$40 gift card to the local grocery store.

The focus groups were facilitated by master-prepared social workers from Maximizing Excellence, LLC. The following questions were asked in each focus group:

- What is healthy about the community?

- What keeps people from being healthy in Yankton?
- What services are most important to you?
- Most significant health care related need facing your family?
- Most significant health care related need facing your community?
- Most significant health care need related to physical activity?
- Most significant health care need related to nutrition?
- Most significant health care need related to tobacco use?
- Most significant health care need related to chronic disease management?
- Other areas that should be prioritized?
- Doctor or hospital visit in the past year?
- Most significant barriers to accessing resources in your community?
- What is one thing Avera Sacred Heart is doing well?
- How could Avera Sacred Heart improve how it serves the community?
- One aspect of health care you would change in Yankton?
- Actions, programs, strategies to make biggest impact on health care needs?
- Do you have an advanced directive?

The questions were asked and replies were recorded in a consistent and statistical structure throughout the study. The facilitator assisted each group with prioritizing the needs defined from highest to lowest. Maximizing Excellence, LLC compiled and analyzed the data and presented a written report of findings to Avera Sacred Heart Hospital. The following themes presented:

- Nutrition
- Physical Activity
- Tobacco Use
- Chronic Disease Management
- Coordinated Care
- Community Perception
- Advance Directives
- Access to Care
- Affordable Care

Prioritized List of Significant Health Needs Identified in the Community Health Needs Assessment:

After consultation with various professionals concerning the afore mentioned themes, the three major areas highlighted for further research and comparison were nutrition, coordination of care, and access to care. This decision was based on the severity of the issue, Avera Sacred Heart Hospital's current involvement in these areas and professional outlook.

Significant Health Needs to be Addressed:

Nutrition:

Nutrition was identified as a significant concern throughout the community and specifically a lack of programming centered on nutrition, making good choices and basic cooking skills. Focus group participants indicated "...more needs to be done to increase the availability, affordability, and convenient access to healthy options, especially amongst those most in need, within the community." (Maximizing Excellence, LLC report) Participants stressed the importance of employing preventive measures related to nutrition.

The need also aligns with the Healthy People 2020 goal, which is to: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.

On March 4, 2015, approximately 20 people gathered in Yankton to begin discussions on nutritional educational needs in the surrounding areas including Yankton and Vermillion, S.D. The main focus of the meeting was to advocate that South Dakota State University (SDSU) Extension Service reconsider offering nutrition education programs in Yankton. Due to budget constraints, this program was eliminated approximately six years ago. Avera Sacred Heart Hospital was part of the discussion and supportive of increasing nutritional awareness, education, and skills in the community. As a result of this meeting, the SDSU Extension program was reinstated in the community. A food council spearheaded by the Extension program and individuals from Avera Sacred Heart Hospital began. The food council meets monthly to promote healthy choices throughout the community. A different fruit or vegetable is highlighted each month and recipes are available to help people utilize the main ingredient.

The Yankton Food Council hosted a Conversation on Hunger at the Avera Sacred Heart Hospital Pavilion on July 12, 2017. Twenty-seven individuals representing twenty-three different agencies, non-profits, South Dakota Social Services, health care, and local business leaders gathered to discuss food insecurities specifically in Yankton and in the surrounding communities as well. The United Way & Volunteer Services of Greater Yankton collaborated with the Yankton Food Council to contract with Maximizing Excellence, LLC to facilitate the meeting and ongoing steps to possibly create a Food Insecure Collaborative. Much of the discussion focused on lack of access to healthy choices.

The need for nutritional programming is evidenced by data gathered concerning the prevalence of adults and children with a body mass index (BMI) score of 30 or greater, signifying obesity. The reported lack of fruits and vegetable being consumed by adults in Yankton County and in South Dakota in general is concerning.

Avera Sacred Heart Hospital is committed to continue to provide quality nutrition education in its service area.

Nutrition									
CC = Community Commons, SDYR = South Dakota Youth Risk Behavior Survey, KFF = Kaiser Family Foundation									
Indicator	Data Source	Year (Group of Years)	Yankton County	Bon Homme County	Charles Mix County	Clay County	Hutchinson County	Cedar County, NE	Knox County, NE
			%	%	%	%	%	%	%
% of Adults who are Obese based on BMI of >30	CC	2014	29.2%	32.1%	33.1%	29.8%	29.4%	28.1%	27.9%
Indicator	Data Source	Year (Group of Years)	State of South Dakota	State of Nebraska					
Average servings per day of fruit	CC	2015	1.18	1.30					
Average servings per day of vegetables	CC	2015	1.65	1.79					
% of High School Seniors who consume 5 or more fruits and vegetables daily	SDYR	2013	18.3%						
% of Children overweight ages 10-17	KFF	2015	26.5%	28.9%					

Goal: *Increase nutrition education, healthy choices, and awareness in the community.*

Partners: *Yankton Food Council, clinics, providers, public health, employers, civic leaders, schools*

- Provide quarterly community nutrition education, including portion control, and basic cooking tips
- Fulfill the requirements for the South Dakota Healthy Workplace grant
- Actively participate in the Food Insecurities Collaborative
- Introduce and encourage healthy vending across the service area

Coordinated Care:

The need for more collaborative, coordinated health care in Yankton surfaced during focus group discussions. “Increased communication and collaboration between ASHH [Avera Sacred Heart Hospital] and Yankton Medical Clinic and other community resources could further enhance the patient experience and quality of care received.” (Maximizing Excellence, LLC report)

On April 1, 2017, Avera Sacred Heart Hospital purchased the Lewis and Clark Specialty Hospital and Medical Office Building in Yankton, SD. This 10 bed facility and office building is now part of Avera Sacred Heart Hospital. This further enhances Avera Sacred Heart Hospital’s commitment to providing quality, coordinated care throughout the region. As part of the purchase, Avera Sacred Heart Hospital now has a primary clinic Yankton. The Avera Medical Group Family Practice clinic is staffed by one physician and two advanced care providers.

Avera Sacred Heart Hospital and Yankton Medical Clinic collaborated to provide additional access to their respective electronic medical records to promote the seamless delivery of care between the two facilities. Specifically, the Emergency Department physicians at Avera Sacred Heart Hospital can now access the records at the Yankton Medical Clinic when necessary to provide safe and effective care to those patients.

A chief medical officer position was created and hired in 2015. Dr. Kevin Bray, obstetrician and gynecologist at the Yankton Medical Clinic, serves in this role. Dr. Bray helps to communicate information between the two facilities and guide the clinical care at the hospital.

In 2016, Lewis and Clark Behavioral Health Services opened its chemical dependency unit on third floor of the Avera Sacred Heart Hospital Benedictine Center. This sixteen bed unit provides residential substance treatment through a state of the art 28 day intensive inpatient treatment program.

Avera Sacred Heart Hospital is committed to continue efforts to collaborate with health care providers throughout its service area.

Goal: Increase care coordination between the hospital and clinical providers

Partners: Health care providers throughout the Avera Sacred Heart Hospital service area

- Upgrade the electronic medical record to Meditech 6.1
- In consultation with the members of the hospital’s medical staff, determine use and scope for the Avera Surgical Hospital, formerly known as the Lewis and Clark Specialty Hospital
- Expand the Avera Sacred Heart Hospital hospitalist program
- Implement a wound care clinic
- Implement a palliative care program

Access to Care and Affordable Care:

“Availability, accessibility, and affordability of basic care and specialty services housed in Yankton influence overall community health...Services deemed most important or associated with significant need vary on a person-to-person basis but share a common thread: available services are only as helpful as they are 1) accessible, in terms of hours and transportation; and 2) affordable, in terms of insurance coverage and out-of-pocket costs.” (Maximizing Excellence, LLC report)

In 2012, approximately 16.3 percent of adults in Yankton County under age 65 did not have health insurance. In 2015, that number decreased to 10.2% according to the Small Area Health Insurance Estimates. With the implementation of the Affordable Care Act and the opening of the health insurance exchanges, the uninsured rate among U.S. adults averaged 12.9 percent for fourth quarter 2014. (Gallup-Healthways Well-Being Index) The State of South Dakota has elected to not expand Medicaid to 138 percent of federal poverty guidelines. As a result, there are approximately 48,000 South Dakotans who do not qualify for Medicaid and are not eligible for subsidies to offset the cost of health insurance on the health exchanges. (South Dakota Department of Social Services: Medicaid Expansion Estimates, Demographics and Cost, April 2013)

Access to Care SAHIE = Small Area Health Insurance Estimates, CHR = County Health Rankings									
Indicators	Data Source	Year	Yankton County	Bon Homme County	Charles Mix County	Clay County	Hutchinson County	Cedar County NE	Knox County NE
% of adults under 65 years (18-64) of age without health insurance	SAHIE	2015	10.2%	12.8%	19.5%	11.9%	11.4%	9.1%	13.3%

Primary Care Physician Ratio	CHR	2016	990:1	1,400:1	1,160:1	1,550:1	2,430:1	Nebraska 1,350:1
Mental Health Providers Ratio	CHR	2016	201:1	6,990:1	No Data	2,330:1	7,300:1	Nebraska 1,420:1

Ninety-two percent of the focus group participants indicated they had a doctor’s appointment or went to the hospital in the past year. (Maximizing Excellence, LLC report) Of the online survey participants, 66.67% indicated they were able to see a doctor when they needed to; 12.5% indicated they could not afford it. When asked “how would you rate the accessibility of healthcare services in your community”, 3.19% indicated a 1, 7.45% indicated a 2, 24.47% indicated a 3, 36.17% indicated a 4, and 28.72% indicated a 5 on a scale of 1 to 10.

Significant barriers to accessing the resources in the community include transportation, affordability, and availability of timely care.

In terms of accessible, affordable transportation, Liberty Mobility Now, Inc. is establishing service in Yankton County. It is a ride-share platform similar to Uber but focused on rural and small urban communities. Yankton Area Progress Growth (YAPG) partnered with Liberty to bring its services to the Yankton Area. Avera Sacred Heart Hospital is a contributing member of YAPG.

Avera Sacred Heart Hospital was an active advocate for the presence of a federally-qualified health center in Yankton. allPoints Clinic opened in 2013; in 2016 the clinic transitioned to Horizon’s Healthcare. The clinic is located on the Avera Sacred Heart Hospital campus. Horizon’s Healthcare offers a sliding fee scale for medical, dental, and behavioral health services.

Availability of services according to the focus groups, revolves around limited hours, limited interpreter services, significant wait times for certain specialties e.g. dermatology, few options for working poor, and lack of available child care. Avera Sacred Heart Hospital contracts with an interpreter service that specializes in healthcare to provide around-the-clock access to over one hundred different languages. Avera Sacred Heart Hospital now has a primary clinic in Yankton, Avera Medical Group Family Medicine staffed with one physician and two advance practice providers. Avera Medical Group also staffs an Ear, Nose and Throat clinic, Pain clinic, Behavioral Health clinic, and Podiatry clinic in Yankton. Avera Medical Group has a number of family practice clinics throughout Knox and Cedar counties in Nebraska. Avera Sacred Heart

Hospital will continue its commitment to provide high quality services to meet the needs of its service area.

Goal: *Provide accessible and affordable care*

Partners: *clinics, health providers, public health, employers, schools, civic leaders*

- Deploy strategies to contain costs and maximize efficiencies throughout the Avera Health System via the Office of Performance Excellence and other measures
- Expand Occupational Health offerings throughout the service area
- Support and promote Yankton Area Progressive Growth's partnership with Liberty Mobility to provide additional transportation opportunities
- Provide education to the community on the healthcare services and specialties offered in the Avera Sacred Heart Hospital service area
- Install the new linear accelerator in the Avera Cancer Institute Yankton eliminating the need for people to commute outside of the area for services.

Significant Health Needs Not Addressed:

The following themes received a relatively low priority; however, Avera Sacred Heart Hospital will continue to assess and monitor these needs through planning efforts to serve the health and well-being of the service area communities.

- Physical Activity
- Tobacco Use
- Chronic Disease Management

Approval:

The 2018 Implementation Strategy was presented and approved by the Avera Sacred Heart Hospital Board of Directors on August 7, 2017.

Wayne Kindle, Chair

Wayne Kindle, EdD, Chair,
Avera Sacred Heart Hospital
Board of Directors

8/7/17

Date