

# Avera

## Hand County Memorial Hospital



Miller, SD

# 2019 Community Health Needs Assessment

**Project Coordinator: Marissa Trosen, RRT, Director of Ancillary Services**

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## **I. Executive Summary**

In 2018 and 2019, 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 by defining our community and collecting secondary data and resources. Once that was completed, the process continued with primary data collection including paper surveys being distributed in two settings and interviews with various individuals. Our internal CHNA committee reviewed the data collected and identified the community health needs to improve the overall health of the community. The areas identified were then prioritized. The following document is the report generated as a result of these processes.

## **II. 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, SD., county seat for Hand County. The hospital is designated by Medicare as a Critical Access Hospital and is a member of the Avera Health System based out of Sioux Falls, SD.



Avera Hand County Memorial Hospital has two family practice physicians, three certified nurse practitioners, and 73 employees. The hospital is a 37,000 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 279 inpatient discharges and 11,790 outpatient visits in Fiscal Year 2018.

### *b. Governance*

Avera Hand County Memorial Hospital is a leased facility by Avera Health. Locally, Hand County owns the health care campus. The entire campus is leased to Hand County Memorial, Inc. which operates some community based services and subleases space to Vision Care, providing eye care in Miller, and also subleases the hospital and clinic areas to Avera McKennan. Avera McKennan operates the hospital as Avera Hand County Memorial Hospital and the clinic as Avera Medical Group Miller as departments 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, Inc. 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 service to various committees and boards. We strive to sustain an effective community benefit ministry. Avera is a health ministry rooted in the Gospel. Avera's Mission is to make a positive impact in the 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 such as blood drives and mass mailings and provides thank you events for staff.

*c. Primary Care Services*

Avera Hand County Memorial Hospital is the only hospital in Hand County. The next nearest hospital is forty-five miles away. Avera Medical Group Miller is our primary care clinic and also the only clinic in Hand County. The next nearest clinic is roughly twenty-five miles away.

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

Avera Hand County Memorial Hospital completed a large construction project and renovation in 2014. This project modernized the facility to meet consumer expectations and implement new healthcare technology. Reinvesting in the facilities and technology ensures the hospital is up to date, which is an important investment in the health of our rural community. The construction project helped provide a comfortable and controlled environment for healing to take place.

Since the construction project finished, the hospital has made several technology and equipment upgrades. The hospital received a grant from the Helmsley Trust for a new 64 slice Computed Tomography (CT) scanner. This scanner was an upgrade from the previous 16 slice scanner. The new CT equipment allowed for an increase in the types of images offered and the clarity and detail of the images for providers. The hospital laboratory also upgraded their chemistry, coagulation, and flu/strep/RSV testing equipment. This upgrade was part of the Avera Laboratory Service Line standardization and allows for the same test to be run on the same equipment with the same reference ranges at every Avera facility. The standardization provides consistency for providers when making medical decisions. The inpatient hospital beds were replaced in 2018 giving patients more comfort during their stay at the facility. The beds also have improved call light functions and movement alarms increasing patient safety. The emergency department received a new gurney in 2019 and it includes a built-in scale which is important when dosing certain medications. There is also an x-ray plate built into the gurney so that patients do not have to be moved as much to obtain the image in situations such as traumas. The improvement efforts at the facility make a positive impact in the recruitment efforts of providers and staff to our rural community.

Avera Hand County Memorial Hospital provides inpatient acute and swing bed care, as well as outpatient services such as emergency services; outpatient treatments; physical, occupational, and speech therapy; respiratory therapy and DME; cardiac and pulmonary rehabilitation; laboratory services; and radiology including radiographs, bone density scans, CT scans, and outreach mammography and ultrasound imaging. Additionally, Avera Medical Group Miller is a primary care clinic based within the hospital, employing two family practice physicians and three nurse practitioners. These providers provide care in the clinic, coverage for the ER, inpatient care, and outpatient services.

Avera Health is a large health system based in Sioux Falls, SD and serves facilities in North Dakota, South Dakota, Minnesota, Nebraska, and Iowa. The health system has 33 hospitals, 208 primary and specialty care clinics, 40 senior living facilities, home care and hospice, sports and wellness facilities, and home medical equipment outlets. 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 utilizes eEmergency, ePharmacy, eConsult, telestroke, eHospitalist, and PACS services, allowing our patients to receive services locally in Miller, SD with direct contact to specialists. This collaboration brings discussions of care, options, and best routes of treatment for our patients. The eServices partnership has allowed more patients to be cared for in their community with additional support. If a transfer is required, the Avera Transfer Center can assist with the preparations for the transfer and coordinate the receiving of the patient at a tertiary facility.

Avera Hand County Memorial Hospital utilizes 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, a consult is requested, or a test is needing 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 2013-2017 American Community Survey 5-Year estimates, the population

in Hand County is 3,303 people, of which 98.6 percent are white. This estimate compared to the 2010 Census Bureau shows a 3.7 percent drop in population.

	South Dakota		Hand County	
	Estimated Population	Percent of Population	Estimated Population	Percent of Population
Under 5 Years	60,212	7.0%	193	5.8%
5 to 9 Years	60,424	7.1%	254	7.7%
10 to 14 Years	57,249	6.7%	154	4.7%
15 to 19 Years	56,282	6.6%	176	5.3%
20 to 24 Years	60,672	7.1%	164	5.0%
25 to 34 Years	112,691	13.2%	343	10.4%
35 to 44 Years	98,082	11.5%	297	9.0%
45 to 54 Years	104,537	12.2%	386	11.7%
55 to 59 Years	58,899	6.9%	288	8.7%
60 to 64 Years	54,278	6.3%	222	6.7%
65 to 74 Years	72,564	8.5%	337	10.2%
75 to 84 Years	39,732	4.6%	304	9.2%
85 Years & Over	19,822	2.3%	185	5.6%

The percent of each age break down for Hand County, compared to South Dakota, is demonstrated in this table with data from the American Fact Finder of the US Census Bureau. Hand County is similar or lower in about half of the age groups. Exceptions include: 5-9 years old, 55-59 years old, 60-64 years old, 65-74 years old, 75-84 years old, and 85+ years old.

The US Census Bureau Quick Facts illustrates that Hand County’s median household income in 2017 was \$50,720 compared to South Dakota’s median income of \$54,126. 10.5 percent of Hand County’s residents were in poverty compared to 13 percent of South Dakota’s. According to South Dakota Kids Count, 21 percent of the students in the Miller School District were eligible for free and reduced lunches during the 2016-2017 school year.

As reported by the South Dakota Department of Labor and Regulation, the unemployment rate for Hand County in June of 2018 was 2.3 percent. The state

<b>Inpatient Origin Summary Report July 1, 2017 to June 30, 2018</b>		
<b>Miller- Avera Hand County Memorial Hospital</b>		
<b>County</b>	<b># of Admissions</b>	<b>% of Admissions</b>
Beadle	15	5%
Faulk	6	2%
Hand	203	72%
Hughes	1	0.30%
Hyde	51	18%
Stanley	1	0.30%
Minnehaha	1	0.30%
Perry County, Mississippi	1	0.30%
Whitman County, Washington	1	0.30%
<b>Total # of Admissions</b>	<b>281</b>	

unemployment rate for this period of time was 2.9 percent.

The Avera Hand County Memorial Hospital Inpatient Origin report for Fiscal Year 2018 demonstrates that 72 percent of the hospitals admissions are from Hand County.

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 with the County Poor Relief application, registering for VA benefits, Medicaid benefits, or any 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 benefits is compiled and shared with the community. The community benefit programs include a wide variety of activities from blood pressure checks to youth health classes to delivering meals on wheels. The hospital is proud to partner with the

community and meet needs where possible. Each year, the hospital participates in the local Farm and Home show offering community members complimentary blood pressure checks, immunization information, flu shots, farm safety, and other educational topics. As previously stated, a completed list is prepared annually and shared with the community.

*e. Chronic Health Indicators*

According to the Centers for Disease Control and Prevention (CDC), 6 in 10 adults in the United States have a chronic disease and 4 in 10 have two or more chronic diseases. The leading causes of death and disability incur 3.3 Trillion Dollars in Annual Health Care costs. Many of the diseases are caused by tobacco use, poor nutrition, lack of physical activity, and excessive alcohol use. The CDC reported that from 2012-2016, the leading causes of death for Hand County were cancer, heart disease, cerebrovascular disease, and chronic lower respiratory infection. The chart below illustrates the Chronic Health Indicators, Mortality, and Preventative Services for Hand County and South Dakota.

Data from the South Dakota Department of Health, Office of Health Statistics shows the following information from 2012-2016 for Hand County and South Dakota:

	<b>Hand County</b>	<b>State of South Dakota</b>
<b>% Low Birth Weight Infants</b>	6.4	6.4
<b>Heart Disease</b>	113.4	152.1
<b>Malignant Cancer</b>	140.9	157.5

<b>Indicator</b>	<b>Data Source</b>	<b>Year (Group of Years)</b>	<b>Hand County Number</b>	<b>Hand County %</b>	<b>State of SD Number</b>	<b>State of SD %</b>
# of adults that report fair or poor health	CHR	2018		9%		12%
Average # of days reported physically unhealthy days per month among adults 18 years of age and over	CHR	2018	2.5		3.1	
Average # of reported mentally unhealthy days per month among adults 18 years and over	CHR	2018	2.5		2.9	
Age-Adjusted cancer incidence rate/100,000	SDCR	2006-2015	405		455.4	
% of adults age 20+ who have been diagnosed with Diabetes	CC	2013		7.4%		7.89%
%of adults that report having been diagnosed with high blood pressure	CC	2006-2012		19.5%		26.1%
% of females age 67-69 who had a mammogram within the last 2 years	CC	2014		78.9%		66.1%
% of adults ages 50+ who have had a Sigmoidoscopy/Colonoscopy within the past 10 years	CC	2006-2012		45.7%		59.2%
% of females ages 18+ who reporting having a pap smear test in the past 3 years	CC	2006-2012		83.1%		78.4%

\* CC = Community Commons; SDCR = South Dakota Cancer Registry; CHR = County Health Rankings

<b>Cerebrovascular Disease</b>	53.3	36.5
<b>Accidents</b>	45.9	48.9

<b>Alzheimer’s Disease</b>	26.0	36.5
<b>Diabetes Mellitus</b>	26.9	23.1

\*Heart disease, Malignant Cancer, Cerebrovascular Disease, Accidents, Alzheimer’s Disease, and Diabetes Mellitus are mortality rates per 100,000 population.

**III. Community Input**

*a. Survey Process*

The hospital used a survey tool to begin the process of qualitative data collection. The survey was distributed in two settings. The survey had six sections. The first section was demographics which identified age groups, zip code of participants, gender, and race. The second section was defining health behaviors including wearing seat belts, receiving the flu shot, physical activity, and smoking. The third through fifth sections were on Medical Care and Services, Health Education and Information Resources, and Community Support and Quality of Life. For these questions, participants ranked each topic out of five choices: completely unsatisfied, unsatisfied, satisfied, very satisfied, and not applicable. The final section of the survey was four open-ended questions giving participants a chance to explain their thoughts and opinions of the community, health care, and hospital.

The first setting that the survey was dispersed was during a Hand County Memorial Hospital Auxiliary Meeting in September of 2018. The Auxiliary group represents the low-income population and medically underserved population for Hand County. 23 surveys were passed out and 15 were completed and returned.

The second round of surveys were passed out during all visit registrations at Avera Medical Group Miller during a two week time period. 360 surveys were passed out and 19 were completed and returned. The clinic participants represent the medically underserved population of Hand County.

*b. Interviews*

Three interviews were conducted with five questions in each interview. The groups interviewed included: Community Health Nurse representing the public health entity, Coordinated Care Team representing the medically underserved population, and the Miller High School Counselor representing the minority population for the students and families served by the school. The questions asked during the interviews gave participants a chance to discuss the health issues facing the community, the perception of the hospital services, resources available, and challenges faced in each of their settings.

**IV. Prioritized Community Health Needs**

The community health needs assessment planning committee met and reviewed the surveys and interview responses. Discussion and ranking of the identified health needs was conducted. The committee consisted of two hospital directors, a hospital physical therapist,

the Community Health Nurse and assisted living manager, and a hospital nurse. The following categories were selected because they encompassed the largest amount of dissatisfaction and needs identified by respondents.

*a. Disease Prevention and Maintenance*

The survey process and interviews identified a community need for education and access to disease prevention and maintenance. The survey respondents noted being unsatisfied with the access to wellness facilities and information available for health maintenance and disease prevention. The open-ended question responses included many replies about the lack of drug awareness and education. The interview responses included a need for education on immunizations and substance abuse. There are many programs and resources available; making sure the community is aware of them will be our focus.

*b. Access to Specialty Care*

A frequent response on all forms of community input was access to specialty care. Respondents noted the need for local dialysis, endocrinology outreach, dermatology care, and access to mental health professionals. The hospital and clinic currently have outreach specialists but are continually researching the needs of the patients. With the high volume of concern about specialty care, it will be the CHNA committee's focus to work with the hospital and clinic on what specialists are currently available and what specialists are needed.

**V. Potentially Available Resources**

*a. Disease Prevention and Maintenance*

Avera Hand County Memorial Hospital is currently participating in weekly newspaper articles for the Miller Press on various healthcare topics. This platform can be utilized for public education. The hospital and Avera Medical Group Miller are in the process of working with Avera Health to create a local Facebook page. With social media being highly utilized in almost all age groups, the Facebook page can be a source of education for the public as well. The hospital and clinic also participate in the annual community Farm and Home Show which can be a way to reach the community for educational topics via hand-outs, posters, demonstrations, and discussions.

*b. Access to Specialty Care*

As a member of the Avera Health System, there is access to specialty care. The hospital has created a business plan to evaluate the potential of offering dialysis care locally. If this service is approved, it will be our goal to communicate this service to the public so that they are aware of its availability.

Avera Medical Group Miller is currently working to implement access to social workers for mental health care via eCare technology. Once this service is fully implemented our goal will be to ensure the public is aware of its availability. Community Counseling from Huron, SD also provides outreach for counseling services in Miller, so our committee will make it a priority to ensure the community is aware of this service.

Currently, Avera Hand County Memorial Hospital offers eConsult visits for specialty providers within the Avera system and a select number of specialists with other healthcare systems. Endocrinology care via eConsult has been evaluated historically due to the high volume of local patients traveling for those visits. Unfortunately, due to the requirements of the endocrinology service, it was not able to be added to list of specialists. The hospital has been planning to work on transitioning the eConsult service to the clinic, which will allow for endocrinology care to be added.

There are no current plans to add dermatology outreach care. A member or members of the community health needs assessment committee will attend a medical staff meeting to address the needs for further outreach specialty care.

## **VI. Evaluation of the 2016 Community Health Needs Assessment Impact**

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

Avera Hand County Memorial Hospital and Avera Medical Group Miller utilized the annual community Farm and Home Show as a platform to educate the public on how to navigate the patient portal. Staff were onsite during the Farm and Home Show with laptops to assist community members in signing up for the portal and learning how to navigate it. Also, when patients register for clinic visits, they are offered access to the portal and staff are available to assist them in setting up their portal. When patients are discharged from the hospital or emergency department, patient portal access information is printed and given to the patient. The facility has signage and brochures throughout regarding the patient portal.

### *b. Access to public transportation*

Public transportation is widely used for patients in Hand County. There are three primary modes of public transportation available: the community bus, River City Transit, and VA Transportation. Coordinated Care is often utilized when patients are in need of transportation for medical appointments; they schedule the transportation services for the patients. Also, Avera Medical Group Mission has created a printable document for each of its clinics including public transportation availability with contact information. This document can be printed for any patient needing the data. In the hospital's cardiac rehab

department, they schedule bus rides for patients who are unable to drive due to their cardiac procedure. This ensures patients are able to attend their scheduled sessions without the burden of finding a driver if they do not have one. Staff throughout the hospital and clinic have the transportation contact information available to assist patients at any time.

*c. Access to affordable housing*

The access to affordable housing in Hand County continues to be worked on. The hospital administrator serves on the housing task force for On Hand Economic Development. The task force is currently working on updating their housing study. Two governor's houses have been brought into the community for purchase. The hospital has purchased properties adjacent to their campus and rents them out to the public. The city of Miller is working on two developments in town for additional housing space.

*d. Evaluation*

Avera Hand County Memorial Hospital made their Community Health Needs Assessment and Implementation Strategy available to the community by posting it on their website. The document was also available to be printed at any time for no charge to the requesting party. No written comments were received on either document.

**VII. Board Approval**

The 2019 CHNA document was reviewed and approved on May 28, 2019 by the Avera Hand County Memorial Hospital Board of Directors.