



Community Health Needs Assessment

CHI Mercy Health – Valley City, ND

Approved May 2025



NDSU Center for Social Research Report #118

Prepared by Nancy Hodur, Kaeleigh Schroeder, and Avram Slone

Acknowledgements

The CHNA process is a significant undertaking resulting from the vision and leadership of numerous individuals and governing bodies. It is important to acknowledge those who have dedicated time and energy to ensure that thoughtful planning and long-range strategic vision serve as the basis for policy and decision-making regarding community health needs.

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Executive Summary

Purpose

The purpose of this community health needs assessment (CHNA) is to identify and prioritize significant health needs of the community served by CHI Mercy Health in Valley City. The priorities identified in this report help to guide the hospital's community health improvement programs and community benefit activities, as well as its collaborative efforts with other organizations that share a mission to improve health. This CHNA report meets requirements of the Patient Protection and Affordable Care Act that not-for-profit hospitals conduct a community health needs assessment at least once every three years.

CommonSpirit Health Commitment and Mission Statement

The hospital's commitment to engaging with the community, assessing priority needs, and helping to address them with community health program activities is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

CHNA Collaborators

CHI Mercy Health Valley City contracted with the North Dakota State University Center for Social Research to conduct the CHNA. The Center for Social Research developed community profiles and developed and conducted a community feedback survey that provided the foundation for this needs assessment. Other collaborators included the City County Health District (CCHD), South Central Human Services, and Prairie St. John's.

Community Definition

CHI Mercy Health Valley City is located in Valley City, North Dakota. The hospital primarily serves Barnes County where Valley City is located and is the only hospital in Barnes County. Barnes County is considered the primary service area for this community health needs assessment. Barnes County is designated as a Health Professional Shortage Area (HPSA) by the United States Health Resources & Services Administration. Barnes County is a semi-rural county located in southeastern North Dakota and has an estimated population of 10,826. Additionally, the hospital serves parts of Griggs, Cass, Ransom, LaMoure, and Stutsman Counties, all located in North Dakota.

Assessment Process and Methods

Community health needs were assessed using secondary data from national and state sources and primary data were gathered from community members during a two-month survey period. CHI Mercy Health Valley City solicited input from community organizations representing health, education, law enforcement, victim advocacy, social services, and the medically underserved to review and validate community health needs at a community input meeting held January 23, 2025.

Multiple data sources with various indicators that inform social considerations were compiled and analyzed. Data sources include but are not limited to County Health Rankings, the American Community Survey (ACS), the Bureau of Economic Analysis (BEA), and the Centers for Disease Control and Surveillance (CDC). All community level data were compared to state and national data for context. Community member input was solicited via an online survey and a community input meeting.

The survey was administered using a QR code for public distribution using various online and print media, and a survey link that was distributed by hospital personnel. At least one public health organization was invited to participate in distribution of the community survey. Upon conclusion of the survey fielding period, data were compiled and analyzed. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents.

CHI Mercy Health Valley City solicited feedback on survey findings at a community input meeting on January 23, 2025. A presentation that summarized the community profile and highlighted key survey findings was used to report and validate priority needs identified in the survey results, as well as guide discussion of needs and priorities for community health improvement planning. CHI Mercy Health Valley City solicited input from community organizations representing health, education, law enforcement, victim advocacy, social services, and the medically underserved to review and validate community health needs.

Prioritized Significant Health Needs

Based on analysis of survey data, the following items were identified as issues with the greatest degree of consensus among survey respondents. Secondary data are provided in support of these findings.

- **Affordability of health services.** A majority of respondents (61 percent) cited the cost of health care services as a barrier to health care; 31 percent indicated the cost of health care services was an extreme barrier. Just over half of respondents (53 percent) indicated the price of prescription drugs was a barrier; 31 percent said it was somewhat of a barrier and 38 percent said it was an extreme barrier. The median household income in Barnes County (\$64,447) is lower than the median in North Dakota overall (\$73,959) which may be a factor affecting the ability to pay for goods and services. The availability of local health services and the length of time to see a provider were also cited as barriers to care by 53 and 51 percent of respondents, respectively.
- **Mental health (anxiety, stress, depression) and suicide.** A majority of respondents were concerned about mental health in their community; 58 percent were very concerned and 25 percent were somewhat concerned. Further, a majority of respondents were concerned about suicide in their community; 51 percent were very concerned and 29 percent were somewhat concerned. When asked if their community has adequate mental health services, 60 percent of respondents disagreed. The ratio of population to mental health care providers is substantially higher in Barnes County (1,190:1) than in North Dakota overall (420:1), which is consistent with respondents' perception of the lack of mental health services.
- **Substance misuse.** A majority of respondents were concerned about substance misuse in their community (alcohol, prescription drugs, tobacco or vaping, and illicit or street drugs); 64 percent were very concerned and 22 percent were somewhat concerned. While the rate of adult excessive drinking in Barnes County (19 percent) is lower than the statewide average (23 percent), substance misuse concerns incorporate misuse of prescription drugs, tobacco or vaping, and illicit or street drugs. Half of respondents (51 percent) indicated they believe drug use and misuse has worsened since the previous CHNA was conducted in 2022.
- **Healthy and affordable food.** A majority of respondents were concerned about access to healthy and affordable food; 43 percent were very concerned and 25 percent were somewhat concerned. Further, 64 percent of respondents disagreed when asked if their

community has adequate access to healthy and affordable foods. The adult obesity rate in Barnes County (43 percent) is higher than in North Dakota overall (36 percent) – and access to exercise opportunities was lower in Barnes County (61 percent) than in North Dakota overall (76 percent).

Survey findings were presented at a community input meeting on January 23, 2025. During the meeting, attendees discussed the survey findings as presented, particularly pertaining to economic concerns and mental health. Those present noted that low income in the area is putting financial strain on many residents. Additionally, some discussed the issue of lack of education around “poor mental health days” and being able to ask for help with mental health. While attendees noted the reduction in stigma around mental health issues, they also indicated that those who help (i.e., some of those in attendance who work in mental health) may struggle to ask for help for themselves.

Resources Potentially Available

Programs, resources, and organizations in the community that are potentially available to address the significant health needs were identified by key informants giving input to this process. While not exhaustive, this list — which includes dozens of potential resources — draws on the experiences and knowledge base of those directly serving the community. A list of community resources can be found in a separate resource section later in the report.

Report Adoption, Availability, and Comments

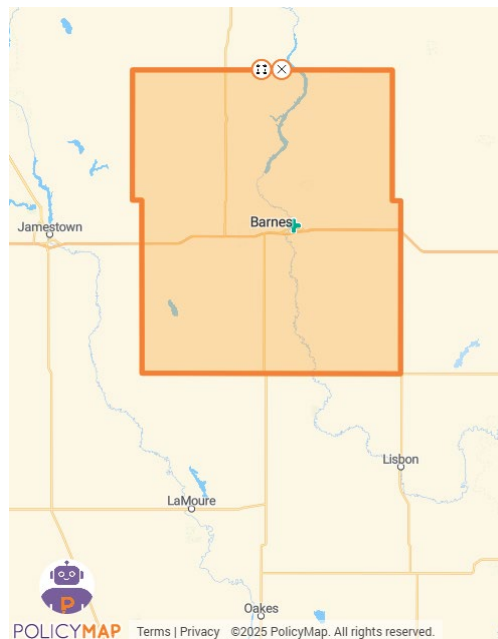
This CHNA report was adopted by the CHI Mercy Health board of directors in May 2025. The report is widely available to the public on the hospital’s web site, and a paper copy is available for inspection upon request at the Administration Office of CHI Mercy Health. Written comments on this report can be submitted via mail to CHI Health - The McAuley Fogelstrom Center, (12809 W Dodge Rd, Omaha, NE 68154 attn. Healthy Communities) – or electronically at <https://forms.gle/KGRq62swNdQyAehX8> – or by calling Ashley Carroll, Market Director, Community and Population Health, at: (402) 343-4548.

Community Definition

CHI Mercy Health Valley City is located in Valley City, North Dakota at 570 Chautauqua Boulevard. The hospital primarily serves Barnes County where Valley City is located and is the only hospital in Barnes County. Barnes County is considered the primary service area for this community health needs assessment. Barnes County is designated as a Health Professional Shortage Area (HPSA) by the United States Health Resources & Services Administration.

Barnes County is a semi-rural county located in southeastern North Dakota and has an estimated population of 10,826. It is bordered by Griggs County to the north, Steele County to the northeast, Cass County to the east, Ransom County to the southeast, LaMoure County to the southwest, and Stutsman County to the west. The county seat and largest city in Barnes is Valley City, which is located in the center of the county.

The following zip code corresponds to 80 percent of patient admissions to CHI Mercy Health Valley City: 58072.

Figure A: CHI Mercy Health Community Health Needs Assessment Service Area


Core demographics for Barnes County are summarized in Table 1.

Table 1. Core Demographic Summary, Barnes County, North Dakota	
Measure	Barnes County, ND
Community Description	Semi-rural
Population	10,826
Racial and Ethnic Distribution	
White, non-Hispanic alone	90.0%
American Indian and Alaska Native alone	1.6%
Black or African American alone	1.9%
Asian or Pacific Islander alone	1.4%
Some other race alone	0.4%
Two or more races	3.5%
Hispanic Origin (of any race)	2.3%
Median Household Income	\$64,447
Percent of Persons below Poverty Rate	13.0%
Unemployment Rate	2.2%
Percent Population with less than High School Diploma	5.0%
Percent of People 5 and Older who are Non-English Speaking	0.6%
Percent of People without Health Insurance	8%
Percent of People with Medicaid	11.5%
Health Professional Shortage Area	Yes
Medically Underserved Area	No
Number of Hospitals in the County	1 (CHI Mercy Health)

Hospital Description

CHI Mercy Health Valley City, a 25-bed critical access hospital, has been serving Barnes County and the surrounding area since 1928. Hospital services include medical, surgical (both inpatient and outpatient), swing bed, physical therapy, occupational therapy, cardiac rehab, home health, respiratory care, laboratory, ambulatory care, emergency services, and a radiology department with a CT unit, mammography, pain management clinic, and mobile MRI services. The hospital also offers outpatient clinics in podiatry and orthopedics through cooperating providers, ensuring that residents have access to a variety of health care needs close to home.

Founded by the Sisters of Mercy, the hospital was built with the vision of creating healthier communities through a healing ministry. The hospital's journey began with a leap of faith, as the Sisters of Mercy and the community of Valley City collaborated to establish a state-of-the-art, five-story Spanish-style institution. Over the years the hospital has undergone expansions and renovations, including the addition of a five-story north wing in 1952 and a three-story addition in 1974. The hospital's history, its commitment to its mission, and its dedication to providing compassionate and excellent care make it a valuable asset to the region.

Assessment Process and Methods

Community health needs were assessed using a two-pronged analysis approach: secondary data from national and state sources; and primary data gathered from community members during a two-month survey period. CHI Mercy Health Valley City solicited input from community organizations representing health, education, law enforcement, victim advocacy, social services, and the medically underserved to review and validate community health needs at a community input meeting held January 23, 2025.

Secondary data: community profiles

Community profiles are an integral part of assessing community health needs. To get a complete sense of the community, multiple data sources with various indicators that inform social considerations were compiled and analyzed. Data sources include but are not limited to County Health Rankings, the American Community Survey (ACS), the Bureau of Economic Analysis (BEA), and the Centers for Disease Control and Surveillance (CDC). All community level data were compared to state and national data for context.

Primary data: health needs survey and community discussion

To help supplement secondary data sources, community member input was solicited via an online survey and a community input meeting. The online survey was administered using the Qualtrics online survey platform from August 12 to October 16, 2024. The survey was administered using a QR code for public distribution using various online and print media and a survey link that was distributed by hospital personnel. At least one public health organization was invited to participate in the distribution of the community survey. The survey tool can be found in Appendix B.

Upon conclusion of the survey fielding period, data were compiled and analyzed. Survey findings are detailed later in this assessment. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents. Detailed results can be found in Appendix C.

Community Input

After the conclusion of the survey fielding period and the analysis and compilation of a draft report of the findings, NDSU CSR team members compiled the findings for a presentation in Valley City on January 23, 2025 for community member discussion and validation. There were 31 attendees, including representatives from:

- City County Health District (CCHD)
- Barnes County Ambulance
- Barnes County
- Valley City Public Schools
- Valley City State University
- Advocates for Change (AFC)
- Barnes County Sheriff
- Prairie St. John's
- Barnes County Correctional Center
- Sanford Health
- NDSU Extension
- Abused Persons Outreach Center
- CHI Mercy Health Valley City
- Free Through Recovery
- Healthy Families ND
- St. Raphael's Care Center
- South Central Human Services
- Valley City – Barnes County Development Corporation
- Buffalo Bridges Human Service Zone

CHI Mercy Health Valley City collaborated with City County Health District, Prairie St John's, and Sanford Health. CHI Mercy Health Valley City contracted with North Dakota State University Center for Social Research to conduct the CHNA. The Center for Social Research developed community profiles and developed and conducted a community feedback survey that provided the foundation for this needs assessment.

The hospital invited written comments on the most recent CHNA report and Implementation Strategy both in the documents and on the website where they are widely available to the public. No written comments have been received.

Assessment Data and Findings

The following sections provide a detailed community profile and survey results.

Community Profile

Barnes County is a semi-rural county in southeastern North Dakota. The county seat and largest city is Valley City. With 10,826 residents, Barnes County is North Dakota's 13th most populous county. It is home to proportionally more adults aged 65 and older than the rest of North Dakota and the United States as a whole. Like most of North Dakota, Barnes County's racial composition is largely white. The median household income and median home value are lower in Barnes County than they are in North Dakota and the nation overall, but so are the costs associated with home ownership and rent. Barnes County has higher than average percentages of householders living alone as well as households with residents aged 65 and older. Barnes County's poverty rate is higher than the average in North Dakota and the nation overall.

The obesity rate in Barnes County is higher than the rate in North Dakota and the nation overall. The adult excessive drinking rate in Barnes County is lower than the rate in North Dakota but slightly higher than the national average. The county's leading causes of death in 2021 were malignant neoplasms, diseases of the heart, accidents, COVID-19, and chronic lower respiratory diseases. Barnes County has a higher annual flu shot rate than both North Dakota and the nation. Barnes County has fewer residents per primary care physician than North Dakota and the nation, but more residents per mental health care provider and dentist.

Barnes County faces very high risk of loss due to cold and winter weather. However, Barnes County's overall risk due to natural hazards is relatively low. Barnes County's social vulnerability is rated as very low and its community resilience is rated as very high. These factors combined give Barnes County a very low National Risk Index Score; a score which is worse than most North Dakota counties but better than most counties nationally.

Community Demographics

The American Community Survey's (ACS) most recent five-year estimate of Barnes County's population is 10,826, making it the state's 13th most populous county. One in five residents in Barnes County are under the age of 18 and nearly 1 in 4 are aged 65 and older (Table 2). The county's racial composition is largely non-Hispanic white (90 percent). Less than one percent of the population speaks English less than very well (Table 1). The county's gender split is roughly even, at 50.2 percent male and 49.8 percent female.

Table 2: Population Estimates, Barnes County, ND, North Dakota, and United States, by Age, Race/Ethnicity, and Sex (2022)

Age Group	Barnes County Population	Barnes County Percentages	North Dakota Percentages	United States Percentages
0-4	491	4.5%	6.7%	5.7%
5-17	1,675	15.5%	16.9%	16.4%
18-24	1,142	10.5%	11.3%	9.4%
25-44	2,316	21.4%	27.1%	26.6%
45-64	2,757	25.5%	22.2%	25.3%
65 and older	2,445	22.6%	15.9%	16.5%
Total	10,826	100.0%	100.0%	100.0%
Race and Ethnicity*				
White, non-Hispanic alone	9,738	90.0%	83.0%	58.9%
American Indian and Alaska Native	168	1.6%	4.7%	0.8%
Asian	137	1.3%	1.6%	5.8%
Black or African American alone	201	1.9%	3.2%	12.5%
Native Hawaiian & Pacific Islander	10	0.1%	0.2%	0.2%
Some other race alone	46	0.4%	1.4%	6.0%
Two or more races	375	3.5%	4.4%	8.8%
Hispanic Origin (of any race)	253	2.3%	4.3%	18.7%
Sex				
Female	5,390	49.8%	48.6%	50.4%
Male	5,436	50.2%	51.4%	49.6%
Total	10,826	100.0%	100.0%	100.0%

*Overlapping racial/ethnic categories mean that the percentages will not total to 100% of the population.

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Estimates from the ACS indicate that there are 4,892 households in Barnes County with an average of 2.1 persons per household. Median household income is \$64,447 in Barnes County, which is lower than the median household income for North Dakota and the nation overall, \$73,959 and \$75,149 respectively (Table 3). Three in four households in Barnes County are owner-occupied and median owner costs are \$1,314 per month including the mortgage. Median rent in Barnes County is \$773 per month. Both median owner costs and median rent are lower in Barnes County than in North Dakota and the United States overall. Forty percent of households are occupied by householders living alone and 21.6 percent have children in residence (Table 4). The percentage of householders living alone,

households with residents aged 65 and older, and householders aged 65 and older living alone are higher in Barnes County than in North Dakota and the nation overall.

Table 3: Household Demographics, Barnes County, ND, North Dakota, and United States (2022)

Item	Barnes County	North Dakota	United States
Total households	4,892	320,038	125,736,353
Owner-occupied housing rate	74.5%	63.2%	64.8%
Average household size (persons per household)	2.1	2.3	2.6
Median value of owned-occupied housing	\$157,800	\$232,500	\$281,900
Median monthly owner costs (with mortgage)	\$1,314	\$1,653	\$1,828
Median monthly owner costs (without mortgage)	\$522	\$551	\$584
Median gross rent	\$773	\$912	\$1,268
Median household income	\$64,447	\$73,959	\$75,149

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Table 4: Household Characteristics, Barnes County, ND, North Dakota, and United States (2022)

Household Characteristics	Barnes County Households	Percent of Barnes County Households*	Percent of North Dakota Households*	Percent of United States Households*
Households with children aged 0-17	1,059	21.6%	27.8%	30.2%
Households with adults aged 65 and older	1,685	34.4%	26.7%	30.8%
Householders living alone	1,971	40.3%	33.2%	28.3%
Householders aged 65 and older living alone	755	15.4%	11.8%	11.5%

*Overlapping household characteristics mean that the percentages of households will not total to 100% of the total number of households.

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Estimates from the ACS indicate that there are 5,474 adults in the workforce in Barnes County. The largest industries in the county by percentage of the workforce are educational services, health care, and social assistance; agriculture, forestry, fishing, hunting, and mining; and manufacturing, which account for 28.0 percent, 10.6 percent, and 9.4 percent, respectively (Table 5). Other industries that employ substantial portions of the county's workforce include retail; arts, entertainment, recreation, accommodation, and food service; construction; and professional, scientific, technical, administrative, and waste management services. In 2023, the county's three largest employers were John Deere, Valley City State University, and Open Door Health (NDLMI 2024).

Table 5: Employment by Industry, Barnes County, ND (2022)

Sector	Estimated Workers	Percent of Workforce
Educational services, health care and social assistance	1,530	28.0%
Agriculture, forestry, fishing, hunting and mining	581	10.6%
Manufacturing	514	9.4%
Retail	469	8.6%
Arts, entertainment, recreation, accommodation and food service	450	8.2%
Construction	433	7.9%
Professional, scientific, technical, administrative, and waste management services	348	6.4%
Other	1,149	20.9%
Total workforce	5,474	100.0%

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

The poverty rate in Barnes County is 13.0 percent, which is higher than the poverty rate in North Dakota (10.8 percent) and the nation overall (12.5 percent) (Table 6). About 17 percent of children in Barnes County live below the poverty line compared to 11.3 percent statewide and 16.7 percent nationally. More than 1 in 4 (28.8 percent) school-aged children in Barnes County are eligible for free or reduced-price school lunch, which is higher than North Dakota (23.2 percent) and lower than the national average (50.8 percent).

Table 6: Poverty Characteristics, Barnes County, ND, North Dakota, and United States (2022)

Poverty Characteristics	Barnes County Estimate	Barnes County Percent*	North Dakota Percent*	United States Percent*
All persons below poverty level (% of total population)	1,329	13.0%	10.8%	12.5%
All persons below 200% poverty level (% of total population)	2,597	25.3%	24.7%	28.8%
Children aged 0-17 below poverty level (% of children 0-17)	364	16.9%	11.3%	16.7%
Adults aged 65 and older below poverty level (% of adults 65 and older)	275	12.1%	9.1%	10.0%
Eligible recipients of free or reduced-price school lunch	397	28.8%	23.2%	50.8%

*Differing populations and overlapping categories mean that percentages will not total to 100%.

Sources: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates; 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute

Most residents in Barnes County aged 25 and older have at least some college experience (63.8 percent); 28.7 percent have attained at least a bachelor's degree. This is lower than in North Dakota and the nation overall, where 31.4 percent and 34.3 percent of the population aged 25 and older, respectively, have at least a bachelor's degree. Fewer than one in 10 residents aged 25 and older in Barnes County did not complete high school (5.0 percent), which is lower than in North Dakota (6.5 percent) and the nation overall (10.9 percent) (Table 7).

Table 7: Educational Attainment for Persons Aged 25 and Older, Barnes County, ND, North Dakota, and United States (2022)

Level of Education Attained	Barnes County Estimate	Barnes County Percent of Population 25 and Older	North Dakota Percent of Population 25 and Older	United States Percent of Population 25 and Older
Less than high school	379	5.0%	6.5%	10.9%
High school diploma or GED	2,343	31.2%	26.1%	26.4%
Some college or Associate's degree	2,638	35.1%	36.0%	28.5%
Bachelor's degree	1,624	21.6%	22.3%	20.9%
Graduate or professional degree	534	7.1%	9.1%	13.4%
<i>Total population aged 25 and older</i>	<i>7,518</i>	<i>100.0%</i>	<i>100.0%</i>	<i>100.0%</i>

Source: U.S. Census Bureau, 2018-2022 American Community Survey (ACS) 5-year estimates.

Community Health Factors and Outcomes

As of 2021, 16 percent of adults in Barnes County smoked cigarettes, on par with 16 percent of North Dakotans and 15 percent of Americans overall (Table 8). The adult obesity rate in Barnes County (43 percent) is higher than the rate in North Dakota and the nation overall (36 percent and 34 percent, respectively). Adults in Barnes County were slightly less likely to report a lack of physical activity outside of work (23 percent) than in North Dakota overall (25 percent), but about as likely as adults nationwide (23 percent). Although the percentage of adults who reportedly engage in excessive drinking is lower in Barnes County than it is in North Dakota (19 percent compared to 23 percent, respectively), it is slightly higher than the nationwide average (18 percent). About six in 10 adults in Barnes County report easy access to exercise opportunities (61 percent), compared to 76 percent in North Dakota and 84 percent nationally.

The prevalence of Barnes County residents reporting poor mental health days in the past month (3.8 days) is slightly lower than North Dakota overall (4.0 days) and the national average (4.8 days).

Table 8: Health Behaviors, Barnes County, ND, North Dakota, and the United States (2021)

Health Behavior	Barnes County	North Dakota	United States
Adult Smoking	16%	16%	15%
Adult Obesity	43%	36%	34%
Adult Excessive Drinking	19%	23%	18%
Alcohol-Impaired Driving Deaths	33%	39%	26%
Physical Inactivity ¹	23%	25%	23%
Access to Exercise Opportunities ²	61%	76%	84%
Poor Mental Health Days ³	3.8	4.0	4.8

Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute.

¹Physical Inactivity refers to the percent of adults who report participating in no physical activity outside of work.

²Access to Exercise Opportunities refers to the percent of adults who report living close to a park or recreation facility.

³The average number of self-reported mentally unhealthy days in the past 30 days.

Leading causes of death in 2021 for residents under age 75 in Barnes County were malignant neoplasms and diseases of the heart, followed by accidents, COVID-19, and chronic lower respiratory diseases (Table 9). Life expectancy in Barnes County is 76.5 years. This is lower than life expectancy in North Dakota (78.1 years) and the nation overall (77.6 years) (County Health Rankings & Roadmaps, 2024).

Table 9: Leading Causes of Death in Barnes County, ND Residents Under Age 75 (2019-2021)

Cause of Death	Deaths	Rate Per 100,000 Population Under 75
Malignant Neoplasms	47	165.9
Diseases of the heart	25	88.3
Accidents	20	70.6
COVID-19 ¹	12	Unreliable ¹
Chronic lower respiratory diseases ¹	11	Unreliable ¹

Source: 2024 County Health Rankings & Roadmaps, a program of the University of Wisconsin Population Health Institute
¹Crude rates per 100,000 population under 75 are unreliable due to the small number of deaths.

The rate of people under age 65 without health insurance is slightly lower than the rate in North Dakota and the nation overall. In Barnes County, 8 percent of people under the age of 65 did not have health insurance compared with 9 percent of all North Dakotans and 10 percent nationally (Table 10).

Flu vaccination rates in Barnes County are higher than in North Dakota and the nation overall. The annual flu shot rate in Barnes County is 57 percent, which is eight percentage points higher than the North Dakota rate overall (49 percent) and 11 percentage points higher than the national average (46 percent).

The Food Environment Index is a measure of food security and access to healthy foods with a ranking system ranging from 0 (worst) to 10 (best). The Barnes County Food Environment Index score was 9.3, which is slightly higher than North Dakota's score of 9.1 and higher than the national score of 7.7 (Table 10).

Table 10: Other Health Factors, Barnes County, ND, North Dakota, and United States

Description of Factor	Barnes County	North Dakota	United States
Uninsured Rate, 2021	8%	9%	10%
Medicaid Coverage, 2022	11.5%	11.9%	20.4%
Unemployment Rate, 2022	2.2%	2.0%	3.7%
Low Birthweight Rate, 2016-2022	7%	7%	8%
Annual Mammogram Rate, 2021 ¹	58%	53%	43%
Annual Flu Shot Rate, 2021 ²	57%	49%	46%
Food Environment Index, 2019-2021 ³	9.3	9.1	7.7

Sources: US Census Bureau's Small Area Health Insurance Estimates (SAHIE) program, 2021; The Local Area Unemployment Statistics (LAUS) program of the Bureau of Labor Statistics, 2022; Map the Meal Gap, Feeding America, 2021; The Centers for Medicare & Medicaid Services Office of Minority Health's Mapping Medicare Disparities (MMD) Tool, 2021; NDHHS COVID-19 Vaccine Dashboard; CDC COVIDVaxView
¹Percentage of female Medicare enrollees who received an annual mammogram.
²Percent of Medicare enrollees who received an annual flu shot.
³The Food Environment Index is a measure of food environment that combines food insecurity rates with rates of access to healthy foods. It is scored on a scale from 0 (worst) to 10 (best).

The ratio of Barnes County residents to primary care physicians is 1,080:1 compared to a ratio of 1,290:1 in North Dakota and 1,330:1 nationally. However, the ratio of residents to mental health care providers is higher in Barnes County than it is statewide or nationally (1,190:1, 420:1, and 300:1 respectively) and the ratio of residents to dentists is also higher (1,540:1, 1,420:1, and 1,360:1 respectively) (Table 11). Barnes County is designated as a Health Professional Shortage Area (HPSA) and one township in Barnes County is designated as a Medically Underserved Area (MUA) by

the United States Health Resources & Services Administration. No other hospital is located in Barnes County.

Table 11: Number of Residents Per Health Care Provider in Barnes County, ND, North Dakota, and the United States

Type of Provider	Barnes County	North Dakota	United States
Primary Care Physicians, 2021	1,080:1	1,290:1	1,330:1
Mental Health Care Providers, 2024	1,190:1	420:1	300:1
Dentists, 2022	1,540:1	1,420:1	1,360:1

Sources: Health Resources & Services Administration, Area Health Resource Files; CMS, National Provider Identification Registry.

National Risk Index

The Federal Emergency Management Agency (FEMA) administers the National Risk Index, a dataset and tool that estimates the risk level for natural disasters at the county level. A county's Risk Index is calculated using three metrics: Expected Annual Loss, Social Vulnerability, and Community Resilience. A community's exposure to and ability to cope with hazardous conditions can have a substantial impact on factors that inform community health outcomes, such as the strain on that community's health care system and its ability to make sure that residents have access to essential goods and services in times of crisis.

Overall, Barnes County's National Risk Index rating is Very Low. This indicates a strong general preparedness for and ability to recover from natural and manmade hazards. Although 69.8 percent of North Dakota counties have a lower National Risk Index score than Barnes County, 46.9 percent of counties nationally have a lower score (Table 12).

Table 12: National Risk Index Percentiles for Barnes County, ND when compared to North Dakota Counties and U.S. Counties (2024)

Index	Percentile within North Dakota	U.S. Percentile
Expected Annual Loss	77.4	57.4
Social Vulnerability	41.5	8.5
Community Resilience	77.4	84.0
<i>National Risk Index</i>	<i>69.8</i>	<i>46.9</i>

Note: The Risk Index can be read as "69.8% of counties in North Dakota have a lower Risk Index than Barnes County; 46.9% of U.S. counties have a lower Risk Index than Barnes County."

Sources: FEMA, National Risk Index; CDC/ATSDR Social Vulnerability Index 2022; University of South Carolina's Hazards and Vulnerability Research Institute (HVRI)'s Baseline Resilience Indicators for Communities (HVRI BRIC).

Expected Annual Loss

Expected Annual Loss scores are calculated by combining a community's exposure to natural hazards, annualized frequency of hazards, and the historic loss ratio for various natural hazards. Barnes County's overall Expected Annual Loss is rated as Relatively Low overall on a five-point scale: Very Low, Relatively Low, Relatively Moderate, Relatively High, and Very High (NRI 2024). However, the county faces relatively moderate to relatively high strong wind, hail, winter weather, ice storm, and cold wave hazards. Expected annual loss caused by cold wave and winter weather in particular is very high. Barnes County's expected annual loss is higher than 77.4 percent of North Dakota counties and 57.4 percent of counties nationally.

Social Vulnerability Index

Social vulnerability is a concept related to a community's ability to prepare for and respond to hazardous events. A community's social vulnerability is gauged using the Social Vulnerability Index (SVI) (ATSDR) (CDC, 2024): an aggregated index of 16 socioeconomic factors categorized into four themes: socioeconomic status, household characteristics, racial and ethnic minority status, and housing type/transportation. SVI is a nationally recognized measure of a location's social vulnerability, and therefore its ability to prepare for and respond to disasters. While the SVI technically is a measure of ability to respond to natural disasters and aid emergency planning, the index is an accepted tool to gauge overall community socioeconomic well-being. A higher SVI indicates a higher vulnerability to hazard.

Barnes County's Social Vulnerability is rated Very Low. Barnes County has higher social vulnerability than 41.5 percent of North Dakota counties and 8.5 percent of counties nationally. For a more thorough breakdown of Barnes County's Social Vulnerability see Appendix A.

Community Resilience

A community's Community Resilience score is defined as its ability to prepare for, withstand, and recover from hazardous events (Cutter et al. 2014). Categories considered in the compilation of scores include Human Well-Being, Economy, Infrastructure, Governance, Community Capacity, and Environment. Barnes County's Community Resilience ranking is Very High. Barnes county has higher community resilience than 77.4 percent of North Dakota's 53 counties and 84.0 percent of counties nationally. While the county is somewhat vulnerable to hazardous weather conditions, community resilience indicators suggest the county is well-prepared to respond to hazardous events.

Community Health Survey Analysis

The survey solicited feedback on respondents' perceptions of various issues and topics in six broad categories: people in my community, services in my community, concerns in my community, concerns about violence, medical services, and barriers to care. Survey data were analyzed using widely accepted standard descriptive statistics, such as measures of mean, median, and frequencies. Priority needs were identified as those issues with the greatest level of consensus among survey respondents. Detailed survey findings can be found in Appendix C.

Respondent Demographics

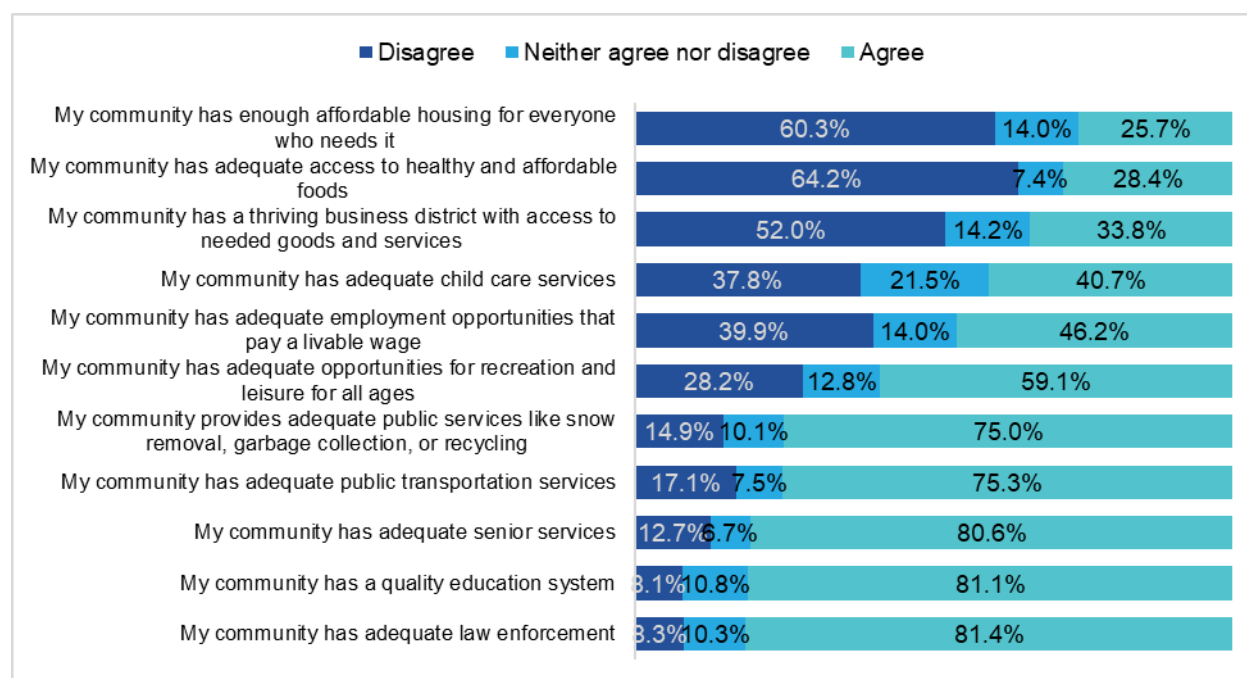
One hundred and fifty-two people responded to the CHI Mercy Health community health needs assessment survey. The mean age of respondents was 46 years and 81 percent of respondents were female. Ninety-four percent of respondents identified as white and 6 percent identified as Hispanic or Latine. More than one-third (38 percent) of respondents reported an annual household income of \$100,000 or more; another 39 percent reported an annual household income of \$50,000 to \$74,999. Forty percent of respondents had a bachelor's degree as their highest level of education and 27 percent had a graduate or professional degree. Two-thirds (66 percent) were employed full time, 19 percent were retired, and 12 percent were employed part-time.

Findings

When asked about the people in their community, 71 percent of respondents agreed there is a sense of civic responsibility and engagement. A similar percentage (70 percent) agreed people feel welcome and accepted in their community. Sixty percent agreed the people in their community have a shared vision and community goals and 54 percent agreed their community is culturally diverse (Appendix C).

Respondents were positive about many services in their community. The vast majority of respondents agreed that their community has adequate senior services (81 percent), a quality education system (81 percent), and adequate law enforcement (81 percent). However, 64 percent of respondents disagreed that their community has adequate access to healthy and affordable foods and 60 percent disagreed that the community has enough affordable housing for everyone who needs it. Fifty-two percent disagreed the community has a thriving business district with access to needed goods and services (Figure 1).

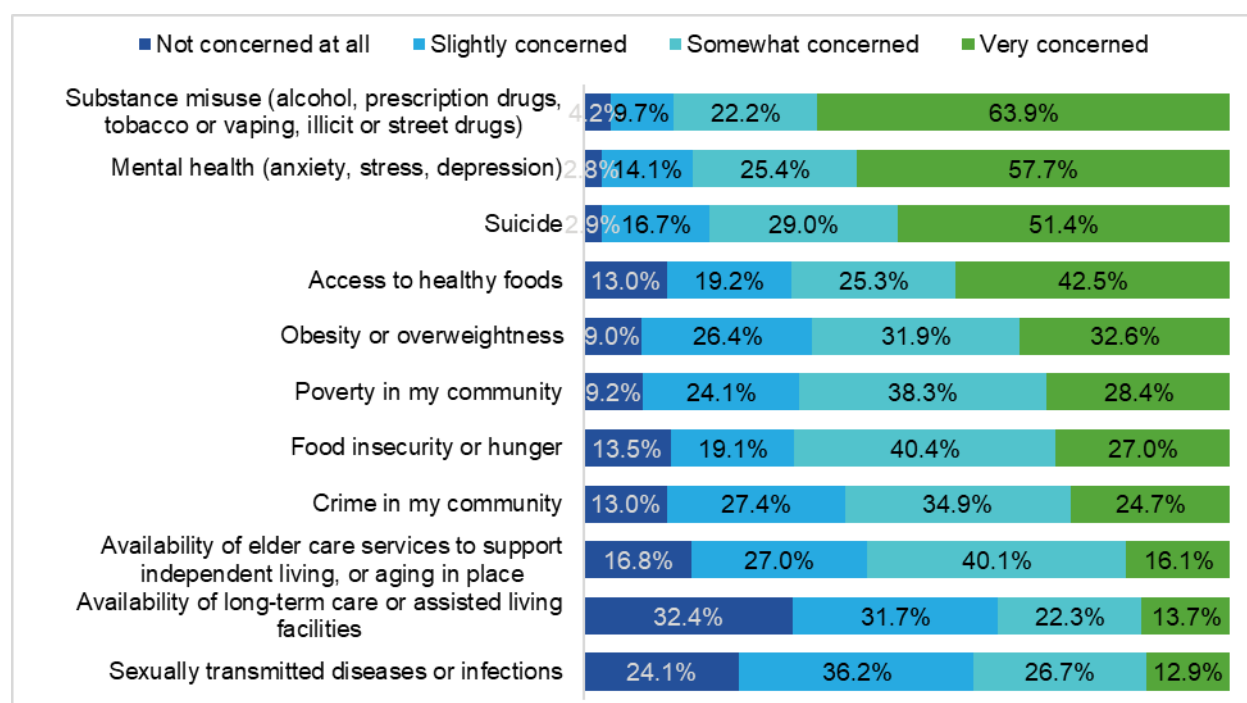
Figure 1: Services in My Community, Community Health Needs Assessment, 2024



Respondent n: 134-149.

Among community concerns, respondents expressed the most concern about substance misuse followed closely by mental health issues. Sixty-four percent of respondents were very concerned about substance misuse in their community; 22 percent were somewhat concerned and 10 percent were slightly concerned about this issue. Likewise, 58 percent of respondents were very concerned about mental health (anxiety, stress, depression) in their community, 25 percent were somewhat concerned, and 14 percent were slightly concerned about this issue. The availability of long-term care or assisted living facilities had the highest percentage of respondents who were not at all concerned about this issue (32 percent), followed by sexually transmitted diseases. Twenty-four percent of respondents said they were not concerned at all with sexually transmitted diseases in their community (Figure 2).

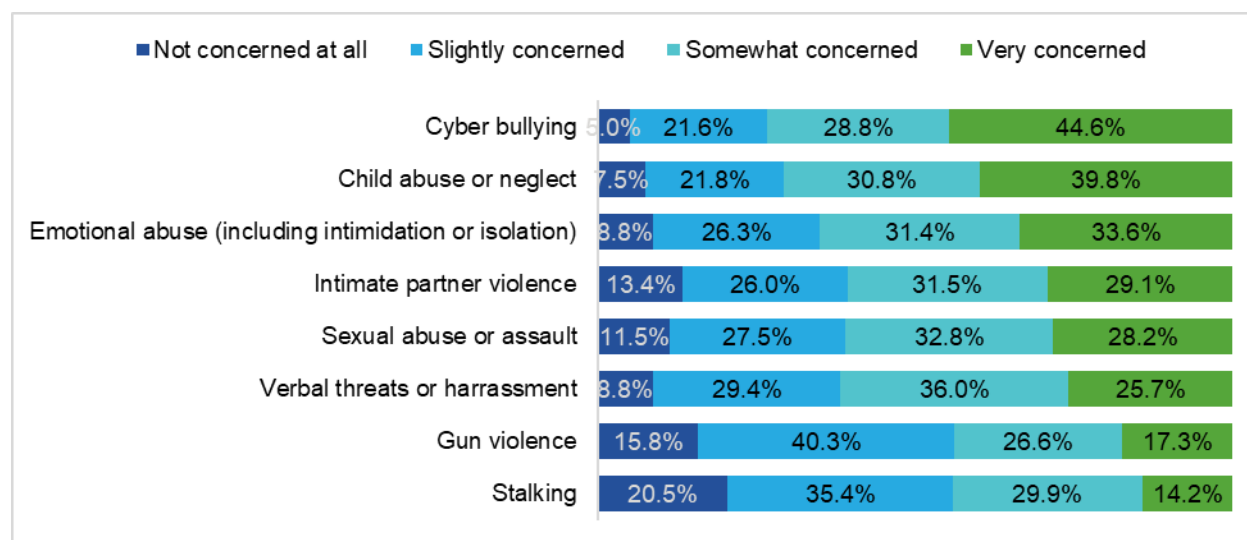
Figure 2: Concerns in My Community, Community Health Needs Assessment, 2024



Respondent n: 137-146.

When asked about specific violence concerns in their community, cyber bullying drew the highest percentage of respondents who were very concerned (45 percent); 29 percent were somewhat concerned and 22 percent were slightly concerned about this issue. Forty percent of respondents were very concerned about child abuse or neglect (another 31 percent were somewhat concerned and 22 percent were slightly concerned) and 34 percent of respondents were very concerned about emotional abuse (including intimidation and isolation). Although stalking and gun violence had the lowest percentage of respondents who were very concerned (14 percent and 17 percent, respectively), most respondents still expressed some level of concern about these issues. Twenty-one percent of respondents were not at all concerned about stalking and 16 percent were not at all concerned about gun violence (Figure 3).

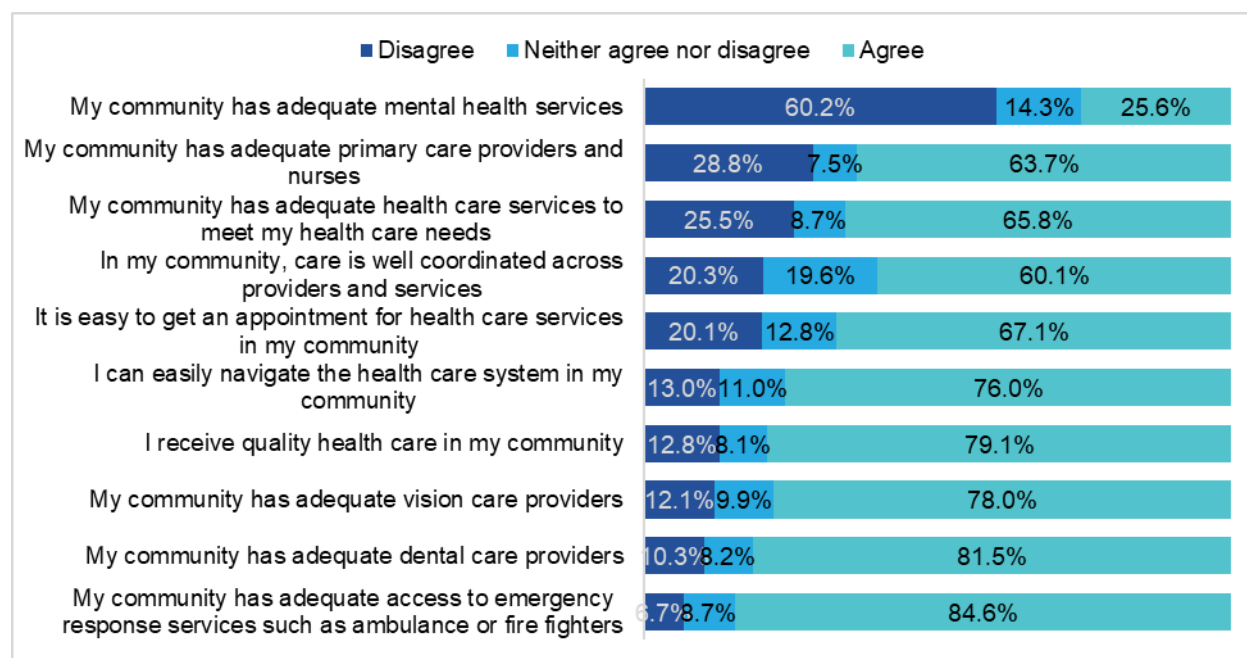
Figure 3: Violence Concerns in My Community



Respondent n: 127-139.

Most respondents (60 percent) disagreed that their community has adequate mental health services. However, with respect to other medical services in the community, 64 percent of respondents agreed with statements about adequate access and availability. Eighty-five percent of respondents agreed the community has adequate access to emergency response services and 82 percent agreed the community has adequate dental care providers. Similarly, 79 percent agreed they receive quality health care in their community and 78 percent agreed they have adequate vision care providers (Figure 4).

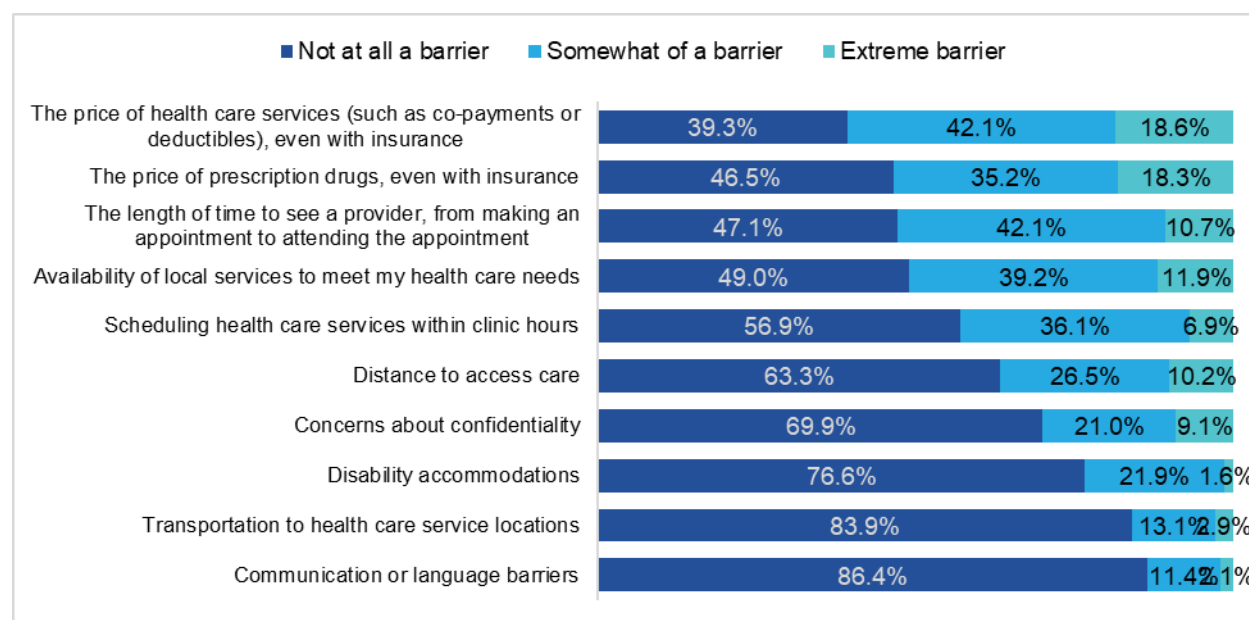
Figure 4: Medical Services in My Community, Community Health Needs Assessment, 2024



Respondent n: 133-149.

While issues like communication or transportation were not considered barriers to seeking care for most (86 percent said communication was not at all a barrier and 84 percent said transportation to health care service locations was not at all a barrier to care), respondents did find cost to be an issue. Sixty-one percent of respondents considered the price of health care services, even with insurance, to be at least somewhat of a barrier (19 percent considered it to be an extreme barrier) and 53 percent considered the price of prescription drugs to be at least somewhat of a barrier (18 percent considered it to be an extreme barrier). The length of time to see a provider, from making the appointment to attending the appointment, was considered at least somewhat of a barrier for 53 percent of respondents, and the availability of local services to meet health care needs was considered at least somewhat of a barrier for 51 percent of respondents (Figure 5).

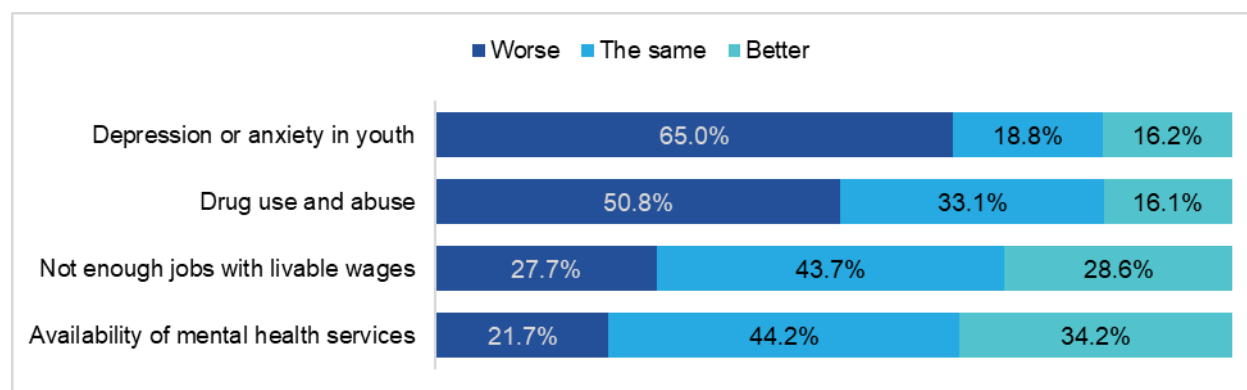
Figure 5: Barriers to Seeking Medical Care, Community Health Needs Assessment, 2024



Respondent n: 128-142.

Respondents were asked about their perceptions of the issues identified for prioritization in the previous CHNA conducted in 2022. Two-thirds (65 percent) of respondents indicated that depression or anxiety in youth has worsened since 2022 and 51 percent indicated that drug use and misuse in their community has worsened since then. However, one-third (33 percent) thought drug use is about the same as before. Respondents were more divided about the remaining two issues. About four in 10 respondents (44 percent) thought the availability of jobs with livable wages is the same as before while 28 percent thought it has worsened and 29 percent thought it has improved. Likewise, while 44 percent of respondents thought the availability of mental health services is the same as in 2022, 22 percent thought it has worsened and 34 percent thought it has improved (Figure 6).

Figure 6: Issues Identified in the Previous CHNA, Community Health Needs Assessment, 2024

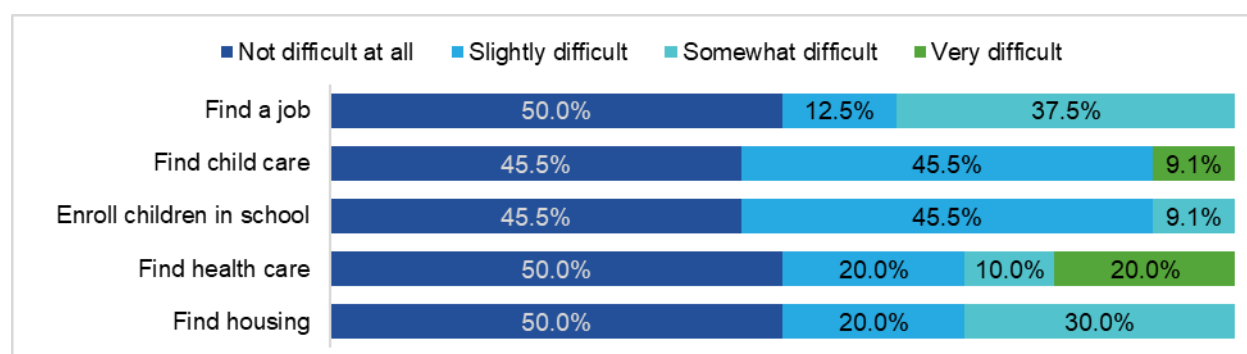


Respondent n: 117-120.

In the past year, 81 percent of respondents had an annual physical exam, 78 percent had a dental exam or checkup, 76 percent received a vaccination, and 70 percent had a vision exam or checkup. Eighty-seven percent of respondents said they had a primary care provider and 81 percent relied on their primary care provider for health information. Internet sources were a source of health information for 55 percent of respondents and 51 percent relied on public health professionals. Fifty percent of respondents received their health information from other health care professionals and 47 percent received health information from word of mouth (such as friends and family). Seventy percent of respondents had health insurance provided through an employer and 24 percent had health insurance from a government program (such as Medicare or Medicaid) (Appendix C).

Nine percent of respondents had moved to the community in the past year. While half of newcomers found most newcomer tasks not at all difficult, 20 percent of newcomers said finding health care was very difficult (20 percent found this task slightly difficult and 10 percent found it somewhat difficult) and nine percent said finding child care was very difficult (another 46 percent found this task slightly difficult) (Figure 7).

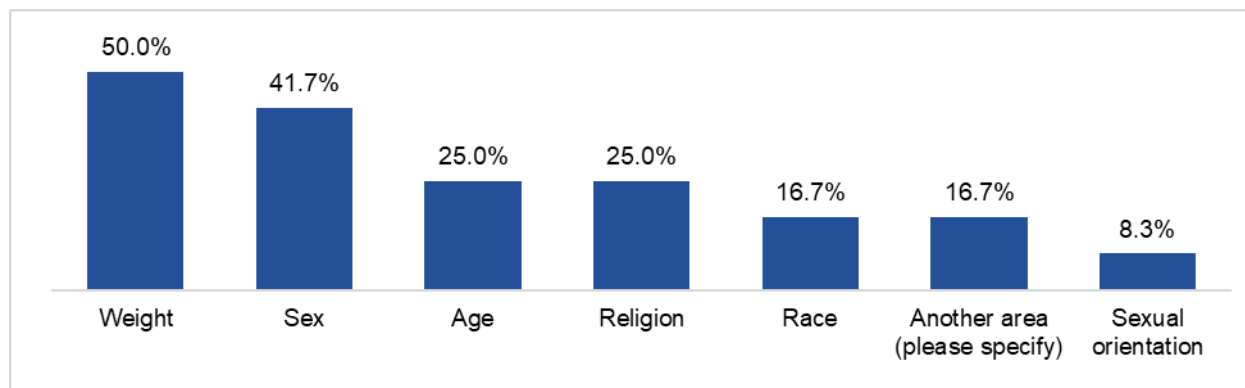
Figure 7: Difficulty Rating of Newcomer Tasks, Community Health Needs Assessment, 2024



Respondent n: 8-11

Nine percent of respondents said they had experienced discrimination in the past 12 months, with the most common area of discrimination being their weight (50 percent) or sex (42 percent) (Figure 8).

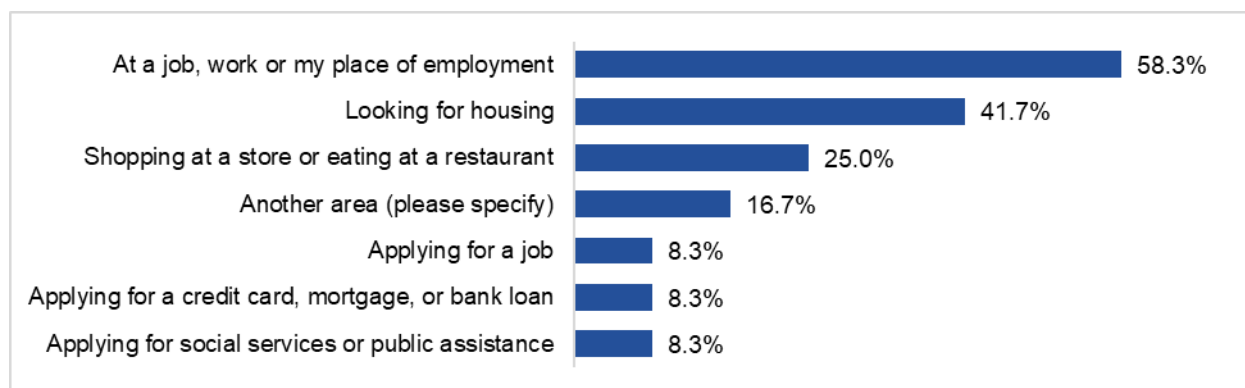
Figure 8: Areas of Discrimination, Community Health Needs Assessment, 2024



Respondent n: 12. Respondents were permitted to select more than one response.

The most common situation where respondents experienced discrimination was in the workplace (58 percent) followed by when they were looking for housing (42 percent) (Figure 9).

Figure 9: Situations of Discrimination, Community Health Needs Assessment, 2024



Respondent n: 12. Respondents were permitted to select more than one response.

While 58 percent of respondents said it was not difficult at all for them to pay for heating, housing, or medical bills, 23 percent said it was slightly difficult, and 18 percent said it was somewhat or very difficult (Appendix C).

Significant Community Health Needs

Based on analysis of survey data the following issues were identified as issues with the greatest degree of consensus among survey respondents. Secondary data are provided in support of these findings.

- **Affordability of health services.** A majority of respondents (61 percent) cited the cost of health care services as a barrier to health care; 31 percent indicated the cost of health care services was an extreme barrier. Just over half of respondents (53 percent) indicated the price of prescription drugs was a barrier; 31 percent said it was somewhat of a barrier and 38 percent said it was an extreme barrier. The median household income in Barnes County (\$64,447) is lower than the median in North Dakota overall (\$73,959) which may be a factor affecting the ability to pay for goods and services. The availability of local health services and the length of time to see a provider were also cited as barriers to care by 53 and 51 percent of respondents, respectively.
- **Mental health (anxiety, stress, depression) and suicide.** A majority of respondents were concerned about mental health in their community; 58 percent were very concerned and 25 percent were somewhat concerned. Further, a majority of respondents were concerned about suicide in their community; 51 percent were very concerned and 29 percent were somewhat concerned. When asked if their community has adequate mental health services, 60 percent of respondents disagreed. The ratio of population to mental health care providers is substantially higher in Barnes County (1,190:1) than in North Dakota overall (420:1), which is consistent with respondents' perception of the lack of mental health services.
- **Substance misuse.** A majority of respondents were concerned about substance misuse in their community (alcohol, prescription drugs, tobacco or vaping, and illicit or street drugs); 64 percent were very concerned and 22 percent were somewhat concerned. While the rate of adult excessive drinking in Barnes County (19 percent) is lower than the statewide average (23 percent), substance misuse concerns incorporate misuse of prescription drugs, tobacco or vaping, and illicit or street drugs. Half of respondents (51 percent) indicated they believe drug use and misuse has worsened since the previous CHNA was conducted in 2022.
- **Healthy and affordable food.** A majority of respondents were concerned about access to healthy and affordable food; 43 percent were very concerned and 25 percent were somewhat concerned. Further, 64 percent of respondents disagreed when asked if their community has adequate access to healthy and affordable foods. The adult obesity rate in Barnes County (43 percent) is higher than in North Dakota overall (36 percent) – and access to exercise opportunities was lower in Barnes County (61 percent) than in North Dakota overall (76 percent).

Survey findings were presented at a community input meeting on January 23, 2025. During the meeting, attendees discussed the survey findings as presented, particularly pertaining to economic concerns and mental health. Those present noted that low income in the area is putting financial strain on many residents. Additionally, some discussed the issue of the lack of education around “poor mental health days” and being able to ask for help with mental health. While attendees noted a reduction in stigma around mental health issues, they also indicated that those who help (i.e., some of those in attendance who work in mental health) may struggle to ask for help for themselves. Attendees also discussed supports in the community to help navigate community resources and systems, and provide help for the “helpers” who might not be comfortable asking for help for themselves.

Resources Potentially Available to Address Needs


Programs, resources, and organizations in the community that are potentially available to address the significant health needs were identified by key informants giving input to this process. While not exhaustive, the list draws on the experiences and knowledge base of those directly serving our community. The following potential partners may be useful resources as CHI Mercy Health strives to meet community needs

Agency/Organization Name	Classification
City-County Health District	Home Care/Community Services
Prairie St. John's (Fargo, ND)	Mental health
SMP Health - St. Raphael's Care Center	Nursing Home
South Central Senior Center	Senior Care/Transportation/Food
CHI Health at Home	Home Health care
CHI Hospice	Hospice
Low Income Energy Assistance (LIEA)	Utility Assistance
Prescription Assistance Program http://www.prescriptionassist.org/	Prescription
Great Plains Food Bank Mobile Pantry	Food
Mobility Plus Rehabilitation	Physical Therapy
Nu Cara Pharmacy	Pharmacy /DME
Thrifty White Pharmacy	Pharmacy
Bridgeview Estates ALF	Assisted Living Facility
The Legacy Place ALF	Assisted Living Facility
Open Door Group Home No 2	Developmental Disability Housing
Open Door Center	Developmental Disability Services
South Central Human Service Center: Region VI	Mental Health
Valley City Satellite Clinic	Mental Health
Barnes County Veteran Services	Veteran Services
Valley City Community Closet	Clothing

Impact of Actions Taken Since Preceding CHNA

2023-2025 Community Health Implementation Strategy


Health Need: Availability of Mental Health Services

 Health Need: Availability of Mental Health Services *for the purposes of implementation planning, the hospital is using "Behavioral Health Services" as a broader approach to include "Mental Health"	
Anticipated Impact (Goal)	The hospital's initiative to address availability of mental health services is to create virtual health access, increase appropriate screening processes, and increase awareness and education.
Strategy or Program	Summary Description
1.1 Virtual Behavioral Health Service Assessments	<p>1.1.1 Provide a virtual provider-patient assessment tool for assessing behavioral health issues.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Strategy being discontinued due to lack of resources. • Measures: there are no measures to report. • FY24 Actions and Impact: Strategy discontinued in FY23 due to lack of resources. • Measures: there are no measures to report. • FY25: Pending Results
1.2 North Dakota Hospital Association (NDHA) Behavioral Health workgroup	<p>1.2.1 Participate in NDHA workgroup to address behavioral health care in ND CAHs.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Strategy being discontinued as it is being captured in other strategies within this priority need. • Measures: there are no measures to report. • FY24 Actions and Impact: Strategy discontinued in FY24 because work was completed • Measures: There are no measures to report. • FY25: Pending Results
1.3 Screening process at Critical Access Hospital (CAH)	<p>1.3.1 Evaluate screenings for people in crisis who may need referral to other facilities.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Screenings currently implemented for patients presenting to the ER • Measures: 60 patients screened and referred for further treatment to other facilities • FY24 Actions and Impact: Screenings currently implemented for patients presenting to the ER with behavioral health needs. • Measures: 89 patients screened for behavioral health needs, 8 of these patients screened for suicidal ideation, 46 of these patients were transferred to other facilities for further treatment • FY25: Pending Results <p>1.3.2 Define process for transporting individuals in need of behavioral health services.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Responsibility for this process assumed by local law enforcement and is in place. Strategy to be discontinued to better utilize resources

	<ul style="list-style-type: none"> • Measures: there are no measures to report. • FY24 Actions and Impact: Responsibility for this process was assumed by local law enforcement and family if applicable and is in place. • Measures: there are no measures to report.
1.4 Screening and communication processes with schools	<p>1.4.1 Assist in developing screening and communication processes to identify behavioral health issues in youth and communicate with appropriate resources.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Strategy on Hold due to organizational restructuring and loss of staff; further evaluation will be needed to determine role and capacity for this work. • Measures: there are no measures to report. • FY24 Actions and Impact: Community Health Improvement Grant (\$6,124) awarded to Valley City Education Foundation. The funds were used to sponsor Access for All programming for mental health services for public school students. • Measures: Grant funding covered one month of behavioral health support for over 50 students in Kindergarten through 12th grade in Valley City.
1.5 Education on available behavioral health services	<p>1.5.1 Partner with City-County Health District to provide mental health first aid training to educate the community and emergency room providers on the current available treatment options and work towards developing and implementing new treatment options for people in crisis.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Mental Health First Aid trainings provided to new trainers. • Measures: <ul style="list-style-type: none"> • 13 individuals completed training to provide Mental Health First Aid to adults • 4 individuals completed training to teach Teen Mental Health First Aid • FY24 Actions and Impact: No trainings provided in FY24 due to staffing turnover at City-County Health District and staffing shortages at CHI Mercy Hospital. Conversations continuing to provide trainings in FY25 • Measures: No measures to report at this time <p>1.5.2 North Dakota Violence Prevention “Coaching boys into men” program that addresses mental health issues tied to violence in youth as young as 12 years of age.</p> <ul style="list-style-type: none"> • FY23 Actions and Impact: Valley City Public Schools basketball coach trained and provided “Coaching Boys into Men” program to team. • Measures: <ul style="list-style-type: none"> • 12 sessions held • 30 unique students participated in sessions • FY24 Actions and Impact: No training provided in FY24 due to turnover in coaching staff and inability to find new coach to provide trainings. Activity on hold until new coach is found to provide trainings, or different strategy can be employed to provide trainings to other community members. • Measures: No measures to report at this time.


	<p>1.6.1 Partnered with South Central Human Services and City-County Health District to distribute grant funding for behavioral health and housing needs.</p> <ul style="list-style-type: none"> • FY24 Action and Impact: Awarded \$25,000 SPARK Grant. Set up screening and fund distribution processes for transitional housing needs related to behavioral health. • Measures: Distributed \$25,000 to 34 individuals in need.
Planned Resources	The hospital will provide registered nurses, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.
Planned Collaborators	CHI Mercy Health Valley City will work closely with the local Behavior Health Coalition and participating members, in particular; City-County Health District, South Central Human Service Center, Valley City Police, Barnes County Sheriff's Office, Valley City State University and Valley City Public Schools.

Health Need: Not enough jobs with livable wages


 Health Need: Not enough jobs with livable wages	
Strategy or Program	Summary Description
2.1 Grow Your Own Healthcare Workforce	<p>2.1.1 Hospital will create a job shadow program for high school-aged youth to learn about healthcare occupations.</p> <ul style="list-style-type: none"> • FY23 Action and Impact: Shadow program utilized for high school students interested in healthcare occupations • Measures: <ul style="list-style-type: none"> ○ 9 students shadowed healthcare professionals in FY23 • FY24 Action and Impact: Shadow program utilized for high school students interested in healthcare occupations • Measures: <ul style="list-style-type: none"> ○ 9 students shadowed healthcare professionals in FY24 <p>2.1.2 The hospital will participate in or host a local job fair.</p> <ul style="list-style-type: none"> • FY 23 Action and Impact: One job fair hosted by local HR. Strategy to be discontinued due to less-than-optimal success; plan to better utilize resources. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY23 due to less-than-optimal success and staffing restructure; plan to better utilize resources. • Measures: there are no measures to report. <p>2.1.3 CHI Mercy Health Valley City to provide classes to the community for Certified Nursing Assistant certification beyond existing high school programs</p> <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy being discontinued as it is being led by other community organizations. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY24 as it is being led by other community organizations. • Measures: there are no measures to report.

	<p>2.1.4 CHI Mercy Health Valley City will provide clinical rotations for students in healthcare career fields to promote healthcare professions</p> <ul style="list-style-type: none"> • FY24 Action and Impact: Hospital accepted clinical students in nursing, lab, and pharmacy during FY24 • Measures: 12 students total served in clinical rotations <p>2.1.5 CHI Mercy Health to develop healthcare careers through scholarships to graduating high school students entering educational programs in healthcare fields.</p> <ul style="list-style-type: none"> • FY24 Action and Impact: Scholarships provided to graduating high school students entering healthcare career fields • Measures: Three \$500 scholarships awarded to three graduating high school seniors
2.2 Partner with Valley City Economic Development Group and Chamber of Commerce	<p>2.2.1 In support of local businesses, build awareness of jobs and the availability of competitive livable wages and benefits within the community.</p> <ul style="list-style-type: none"> • FY23 Action and Impact: Hospital president was filmed in one promotional video utilized in the community. • Measures: # of promotional videos filmed: 1 • FY24 Action and Impact: Community completed this program in FY23 and has discontinued these efforts. Resources being utilized on other recruitment programs. • Measures: No measures to report at this time.
2.3 Workforce Health Education	<p>2.3.1 Increase awareness among employers and encourage education in understanding workplace mental health struggles to maintain/recruit workforce.</p> <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy being discontinued as it is being reported in Strategy 1.5.1. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY24 as it is being reported in Strategy 1.5.1. • Measures: there are no measures to report.
Planned Resources	The hospital will provide human resource contacts, philanthropic grants, outreach communications, and program management support for these initiatives.
Planned Collaborators	CHI Mercy Health Valley City will work closely with the local business owners, South Central Human Service Center, Valley City Economic Development Group, Local government agencies, Valley City State University and the Valley City Chamber of Commerce.

Health Need: Depression/anxiety – Youth

	Health Need: Depression/anxiety – Youth
Anticipated Impact (Goal)	The hospital's initiatives are to explore community and wellness opportunities to prevent youth depression and anxiety, and increase the ability to identify and provide early interventions.
Strategy or Program	Summary Description
3.1 Education for frontline workers	3.1.1 The hospital will work with local schools, emergency services and agencies to provide behavioral health education to workers who are directly impacted by youth with behavioral health problems. <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy on Hold due to Organization Restructure, will re-evaluate available resources for FY24. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy on Hold due to turnover in the local public health department and fewer resources available within CHI Mercy Health. Looking to address in FY25. • Measures: There are no measures to report.
3.2 Explore evidence-based prevention programs	3.2.1 Work with local agencies to develop or implement a prevention program that can be used by all members of the Behavioral Health Coalition to work towards reducing the number of youth suffering from depression and anxiety. <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy being discontinued as it is being reported in Strategies 3.1.1 and 3.1.3. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY23 as it is being reported in Strategies 3.1.1 and 3.1.3. • Measures: there are no measures to report
3.3 South Central Human Service Center Resources	3.3.1 Partner with South Central Human Service Center to educate the community on the current available treatment options and work towards developing and implementing new treatment options. <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy on Hold due to Organization Restructure, will re-evaluate available resources for FY24. • Measures: there are no measures to report. • FY24 Action and Impact: Collaborated with South Central Human Service Center and City-County Health District to create one grant funded behavioral health position at local prison. This position will screen residents and establish connections to behavioral health resources. Established Memory Cafe which is a monthly meeting for caregivers, family, and patients with dementia. • Measures: One behavioral health position created, on hold as processes and logistics are refined. Memory Cafe meets monthly and has 10 attendants on average.
Planned Resources	The hospital will provide registered nurses, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.
Planned Collaborators	CHI Mercy Health Valley City will work closely with the local Behavioral Health Coalition and participating members, in particular; City-County Health District, South Central Human Service Center and Valley City Public Schools.

Health Need: Alcohol and Drug use and abuse – Youth

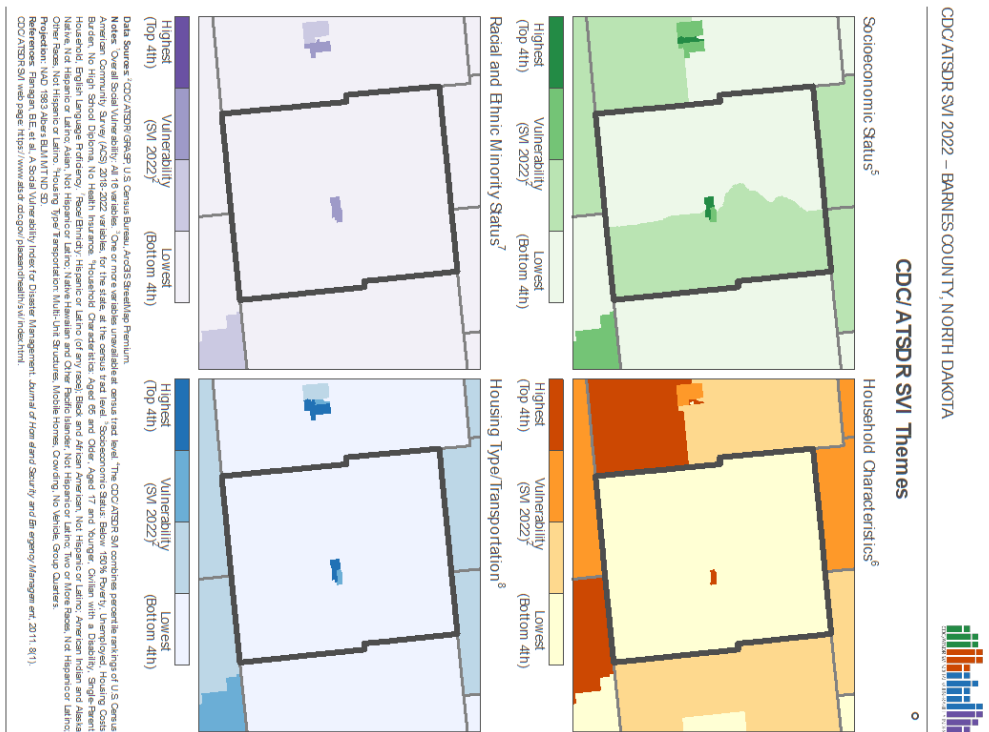
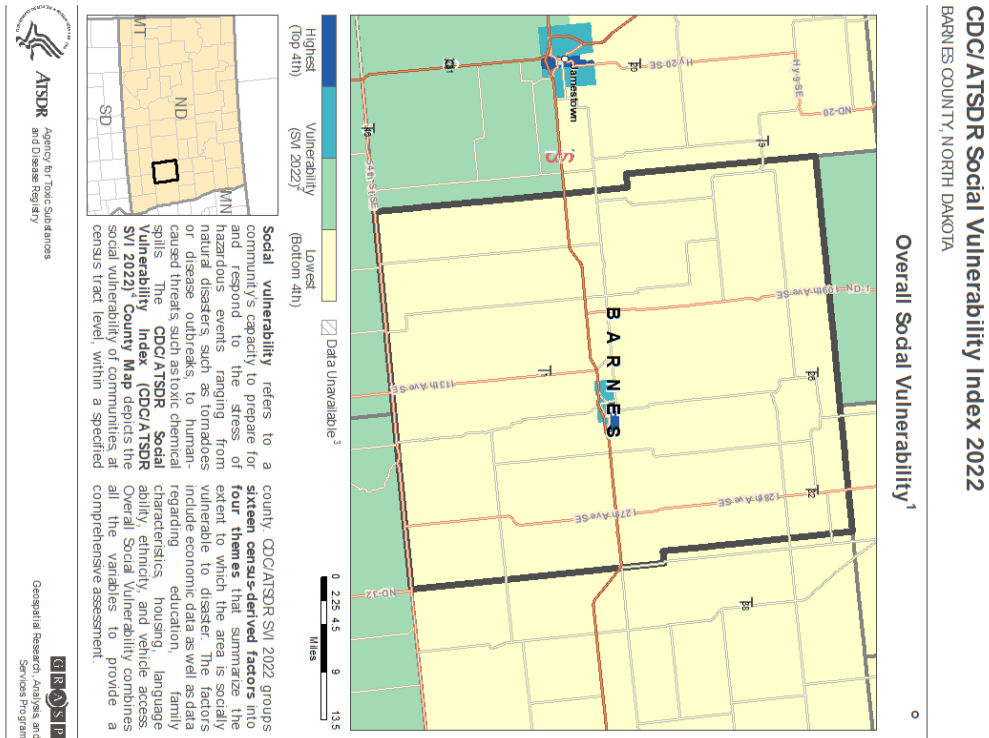
	Health Need: Alcohol and Drug use and abuse – Youth
Anticipated Impact (Goal)	The hospital's initiatives are to increase access to prevention strategies for the community and health care providers as well as identify and grow a support system for educators and parents.
Strategy or Program	Summary Description
4.1 Community Health Partners at Valley City Schools	<p>4.1.1 Provide school-based health care education about alcohol and drug abuse to children and families.</p> <ul style="list-style-type: none"> • FY23 Action and Impact: Strategy was put on hold due to limited resources, will evaluate continuing this Strategy during FY24. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy was put on hold in FY23 due to limited resources. Focus on other priorities due to staffing constraints • Measures: there are no measures to report. <p>4.1.2 Train staff in identifying and assessing youth who may be struggling with addiction problems.</p> <ul style="list-style-type: none"> • FY 23 Action and Impact: This strategy is being discontinued as it is being reported in Strategy 3.1.1. • Measures: there are no measures to report. • FY24 Action and Impact: This strategy discontinued in FY24 as it is being reported in Strategy 3.1.1. • Measures: there are no measures to report.
4.2 Identify preventive programs for alcohol and drug abuse.	<p>4.2.1 Work with local faith leaders, schools and parent groups to develop peer support resources for youth struggling with addiction.</p> <ul style="list-style-type: none"> • FY 23 Action and Impact: Strategy being discontinued as it is being reported in Strategy 3.1.1. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY23 as it is being reported in Strategy 3.1.1. • Measures: there are no measures to report.
4.3 Identify current and new treatment resources	<p>4.3.1 Partner with South Central Human Service Center to educate the community on the currently available treatment options and work towards developing and implementing new treatment options.</p> <ul style="list-style-type: none"> • FY 23 Action and Impact: Strategy being discontinued as it is being reported in Strategy 3.3.1. • Measures: there are no measures to report. • FY24 Action and Impact: Strategy discontinued in FY23 as it is being reported in Strategy 3.3.1. • Measures: there are no measures to report.
Planned Resources	The hospital will provide registered nurses, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.
Planned Collaborators	CHI Mercy Health Valley City will work closely with the local Behavioral Health Coalition and participating members, in particular; City-County Health District, South Central Human Service Center, Valley City Police, Barnes County Sheriff's Office, Faith based leaders and Valley City Public Schools

References

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- County Health Rankings & Roadmaps (2024). *Barnes County, North Dakota* County Health Rankings & Roadmaps. <https://www.countyhealthrankings.org/health-data/north-dakota/barnes?year=2024>
- Cutter, S. L., Ash, K. D., & Emrich, C. T. (2014). The geographies of community disaster resilience. *Global Environmental Change*, 29, 65–77. <https://doi.org/10.1016/j.gloenvcha.2014.08.005>
- National Risk Index. (2024). *Barnes County, North Dakota*. Federal Emergency Management Agency. <https://hazards.fema.gov/nri/>
- North Dakota Labor Market Information (2024). *North Dakota Largest Employers*. North Dakota Job Service. <https://www.ndlmi.com/vosnet/gsipub/documentView.aspx?docid=682>

Appendices

Appendix A: CDC/ATSDR Social Vulnerability Index 2022 for Barnes County, ND



Appendix B: Survey Instrument

Please note: the instrument below has been formatted to allow for mail completion and may look slightly different than presented online. The questions are the same.

COMMUNITY HEALTH NEEDS ASSESSMENT 2024

Every three years, we conduct a Community Health Needs Assessment (CHNA) to better understand health and well-being at individual and community levels. This survey will ask you a few questions about the challenges in your community, and how you think they should be approached. It will also ask a few questions about you, so we can understand more about your individual experiences as they relate to your health and well-being. There are no wrong answers to these questions, and your answers are anonymous. Your name will not be on any reports, and your answers will be grouped with those from other people who respond.

This survey will take about 10 minutes to complete. Your participation is voluntary. If you do not want to participate at all, or if you do not want to answer a particular question, that's okay. If you choose to do the survey, your answers will be kept anonymous and confidential and will be used only to answer questions related to the purpose of this study. What we learn from the survey will be used to plan communication strategies to help people in your community.

You have the option to include your email address in a gift card prize draw! Simply complete the survey, include your email address at the end, and return the survey to us for your chance to win!

Your contact information will not be used for any other purpose than the prize draw. It will not be used in analysis or reporting.

If you have any trouble with any question, please refer to the following resources:

Center for Social Research

Nancy Hodur	nancy.hodur@ndsu.edu	(701) 231-8621
Kaeleigh Schroeder	kaeleigh.schroeder@ndsu.edu	
Avi Slone	avram.slone@ndsu.edu	

CommonSpirit Healthy Communities liaison

Ashley Carroll	ashley.carroll@commonspirit.org
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Completing the survey means that you give your consent to participate in this Community Health Needs Assessment.

What is your zip code?

What is the state where you live?

What is the county where you live?

Please indicate your level of agreement for each of the following statements about the people in your community.

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	I don't know
My community is culturally diverse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People feel welcome and accepted in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a sense of civic responsibility and engagement in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The people in my community have a shared vision and community goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there anything you would like to add about the people in your community?

Please indicate your level of agreement for each of the following statements about services in your community.

	Strongly Disagree	Somewha t Disagree	Neither Agree nor Disagree	Somewha t Agree	Strongly Agree	I don't know
My community has adequate opportunities for recreation and leisure for all ages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has a thriving business district with access to needed goods and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community provides adequate public services like snow removal, garbage collection, or recycling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate child care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate senior services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has a quality education system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate public transportation services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate employment opportunities that pay a livable wage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate law enforcement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has enough affordable housing for everyone who needs it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate access to healthy and affordable foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there anything you would like to add about services in your community?

How concerned are you about each of the following in your community?

	Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	I don't know	Not applicable to my community
Substance misuse (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health (anxiety, stress, depression)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suicide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to healthy foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food insecurity, hunger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually transmitted diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of long-term care or assisted living facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of elder care services to support independent living, or aging in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity or overweightness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Negative effects of social media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there other issues in your community that you are concerned about?

How concerned are you about the following types of violence in your community?

	Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	I don't know	Not applicable to my community
Cyber bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child abuse or neglect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intimate partner violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional abuse (including: intimidation, isolation, verbal threats, economic abuse/withholding funds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual abuse or assault	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stalking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal threats or harassment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gun violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there other types of violence in your community that you are concerned about?

Please indicate your level of agreement with the following issues related to medical services in your community.

	Strongly Disagree	Somewh at Disagree	Neither Agree nor Disagree	Somewh at Agree	Strongly Agree	I don't know
It is easy to get an appointment for health care services in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate primary care providers and nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate health care services to meet my health care needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate dental care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate vision care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has adequate access to emergency response services such as ambulance or fire fighters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can easily navigate the health care system in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I receive quality health care in my community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In my community, care is well-coordinated across providers and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other concerns about access to health care services in your community?

Which preventative health care measures have you received in the last year? Select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Vaccinations | <input type="checkbox"/> Counseling for tobacco use, alcohol use, weight loss, or behavioral health |
| <input type="checkbox"/> Annual physical exam | <input type="checkbox"/> Depression screening |
| <input type="checkbox"/> Mammogram | <input type="checkbox"/> STD/STI screening |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Vision exam |
| <input type="checkbox"/> Blood pressure or cholesterol screening | <input type="checkbox"/> Dental exam/annual checkup |

To what degree are each of the following a barrier to your ability to access health care services?

	Not at all a barrier	Somewhat of a barrier	Extreme barrier	I don't know
Transportation to health services locations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of local services to meet my health care needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to see the same provider over time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduling health care services within clinic hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The price of prescription drugs, even with insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The price of health care services (such as co-payments or deductibles), even with health insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication or language barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficulty using or accessing technology to communicate with provider or system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concerns about confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability accommodations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health insurance coverage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The length of time to see a provider, from making an appointment to attending the appointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distance to access care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there other barriers to your ability to access health care in your community?

Do you currently have a primary care doctor?

- ☐ Yes
☐ No
☐ Prefer not to respond

Where do you find out about health information? Select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Primary care provider | <input type="checkbox"/> My employer |
| <input type="checkbox"/> Other health care providers | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Public health professionals | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Internet sources | <input type="checkbox"/> Other (please specify _____) |
| <input type="checkbox"/> Word of mouth | |
| <input type="checkbox"/> Advertising, such as TV commercials | |

What type of health insurance coverage do you currently have? Select all that apply.

- ☐ Commercial private health insurance (coverage purchased by you or your employer)
- ☐ Medicare
- ☐ Medicaid etc.)
- ☐ Indian Health Service (IHS)
- ☐ Military (Tricare, Champus, VA)
- ☐ Other (please specify _____)
- ☐ No health insurance (**GO TO Q3.7**)
- ☐ Prefer not to say

Why do you NOT have health insurance? Select all that apply.

DO NOT RESPOND IF YOU DO HAVE HEALTH INSURANCE

- ☐ Too expensive
- ☐ Too difficult or complex to obtain health insurance
- ☐ I have a pre-existing condition that is not covered
- ☐ I am healthy and do not need insurance
- ☐ I do not qualify for Medicaid
- ☐ I was disenrolled from Medicaid
- ☐ Another reason (please specify _____)
- ☐ Prefer not to say

What specific health care services, if any, do you think should be added locally?

Did you move to your community in the past year?

- ☐ Yes
- ☐ No (**GO TO Q4.3**)
- ☐ Prefer not to respond (**GO TO Q4.3**)

How difficult was it to do the following?

	Not difficult at all	Slightly difficult	Somewhat difficult	Very difficult	I don't know/I'm not sure	Not applicable to me
Enroll children in school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find healthcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find childcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you experienced discrimination in the past 12 months?

- ☐ Yes
☐ No (**GO TO Q4.6**)
☐ Prefer not to respond (**GO TO Q4.6**)

In what area(s) have you experienced discrimination? Select all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Race | <input type="checkbox"/> Disability |
| <input type="checkbox"/> Ethnicity | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Sex | <input type="checkbox"/> Another area (specify: _____) |
| <input type="checkbox"/> Gender identity | <input type="checkbox"/> _____) |
| <input type="checkbox"/> Sexual orientation | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Age | |
| <input type="checkbox"/> Weight | |

In which of the following situations did you experience discrimination? Select all that apply.

- ☐ Applying for a job
☐ At a job, work or my place of employment
☐ Receiving medical care
☐ Looking for housing
☐ Applying for a credit card, bank loan, or mortgage
☐ Shopping at a store or eating at a restaurant
☐ Applying for social services or public assistance
☐ Interacting with the police
☐ Appearing in court
☐ Another area (specify) _____
☐ Prefer not to say

How difficult is it for you to pay for heating, housing, or medical care?

- ☐ Not difficult at all
☐ Slightly difficult
☐ Somewhat difficult
☐ Very difficult
☐ I don't know/I'm not sure

In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What is your age?

What is your gender?

- ☐ Male
- ☐ Female
- ☐ Non-binary/third gender
- ☐ Other (please describe: _____)
- ☐ Prefer not to say

Which one of these groups best represents your race? Select all that apply.

- ☐ American Indian or Alaska Native
- ☐ Black or African American
- ☐ Asian
- ☐ Native Hawaiian or Pacific Islander
- ☐ Two or more races
- ☐ White
- ☐ Other (please describe: _____)

Do you identify as Hispanic, Latine, or of Spanish origin?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What is your estimated household income?

- ☐ Less than \$15,000
- ☐ \$15,000 - \$24,999
- ☐ \$25,000 - \$49,999
- ☐ \$50,000 - \$74,999
- ☐ \$75,000 - \$99,999
- ☐ \$100,000 - \$149,999
- ☐ \$150,000 and over
- ☐ Prefer not to say

What is the highest level of education you have completed?

- | | |
|---|--|
| <input type="checkbox"/> Less than 9th Grade | <input type="checkbox"/> Associate's degree |
| <input type="checkbox"/> 9th to 12th Grade, no diploma | <input type="checkbox"/> Bachelor's degree |
| <input type="checkbox"/> High school graduate or equivalent | <input type="checkbox"/> Graduate or professional degree |
| <input type="checkbox"/> Some college, no degree | <input type="checkbox"/> Prefer not to say |

Which of these categories best describes your employment status?

- ☐ Employed full time
- ☐ Employed part time
- ☐ Unemployed
- ☐ Retired
- ☐ Student
- ☐ Disabled
- ☐ Prefer not to say

What is your marital status?

- ☐ Single
- ☐ Married or in a domestic partnership
- ☐ Divorced or separated
- ☐ Widowed
- ☐ Prefer not to say

How many people live in your household? Use numbers only. If you live alone, put "1".

Do you have access to reliable internet in your home?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

How did you access this survey?

- ☐ Hospital or public health website
- ☐ Hospital or public health social media page (e.g., Facebook)
- ☐ Hospital or public health employee directly
- ☐ Economic development website or social media
- ☐ Church bulletin
- ☐ Other website or social media page (please specify) _____
- ☐ Newsletter (please specify from where) _____
- ☐ Newspaper advertisement
- ☐ Word of mouth
- ☐ Direct email (please specify from where) _____
- ☐ Another way (please specify) _____

Please provide any additional comments you think we could use to improve the delivery of health care in your community. If you need more space, please attach additional paper.

If you would like to enter our prize drawing, please write your email address below!

Thanks for completing our survey!
***We appreciate your time, and your responses will help inform
health care decisions in your community.***

***If you entered your name to be included in our draw, we'll contact the winners BY
EMAIL once the survey has closed. Good luck!***

Appendix C: Survey Frequencies

Completing the survey means that you give your consent to participate in this Community Health Needs Assessment.					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	I consent	152	100.0	100.0	100.0

What is your zip code?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		30	19.7%	19.7%	19.7%
	34000	1	0.7%	0.7%	20.4%
	58002	1	0.7%	0.7%	21.1%
	58033	1	0.7%	0.7%	21.7%
	58049	2	1.3%	1.3%	23.0%
	58054	1	0.7%	0.7%	23.7%
	58063	1	0.7%	0.7%	24.3%
	58071	1	0.7%	0.7%	25.0%
	58072	97	63.8%	63.8%	88.8%
	58244	1	0.7%	0.7%	89.5%
	58323	1	0.7%	0.7%	90.1%
	58401	4	2.6%	2.6%	92.8%
	58429	1	0.7%	0.7%	93.4%
	58461	1	0.7%	0.7%	94.1%
	58474	1	0.7%	0.7%	94.7%
	58479	2	1.3%	1.3%	96.1%
	58480	1	0.7%	0.7%	96.7%
	58492	1	0.7%	0.7%	97.4%
	58621	1	0.7%	0.7%	98.0%
	58701	1	0.7%	0.7%	98.7%
	58783	1	0.7%	0.7%	99.3%
	58784	1	0.7%	0.7%	100.0%
	Total	152	100.0%	100.0%	

What is the state in which you live?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	North Dakota	152	100.0%	100.0%	100.0%

What is the county where you live in North Dakota?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Barnes	141	92.8%	92.8%	92.8%
	Cass	3	2.0%	2.0%	94.7%
	Dickey	1	0.7%	0.7%	95.4%
	LaMoure	1	0.7%	0.7%	96.1%
	Ransom	2	1.3%	1.3%	97.4%
	Stutsman	3	2.0%	2.0%	99.3%
	Traill	1	0.7%	0.7%	100.0%
Total		152	100.0%	100.0%	

People in Your Community

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for each of the following statements about the people in your community. - My community is culturally diverse	Count	12	42	15	67	13	149
	Row N %	8.1%	28.2%	10.1%	45.0%	8.7%	100.0%
Please indicate your level of agreement for each of the following statements about the people in your community. - People feel welcome and accepted in my community	Count	3	20	20	72	30	145
	Row N %	2.1%	13.8%	13.8%	49.7%	20.7%	100.0%
Please indicate your level of agreement for each of the following statements about the people in your community. - There is a sense of civic responsibility and engagement in my community	Count	3	19	21	74	32	149
	Row N %	2.0%	12.8%	14.1%	49.7%	21.5%	100.0%
Please indicate your level of agreement for each of the following statements about the people in your community. - The people in my community have a shared vision and community goals	Count	7	28	24	73	14	146
	Row N %	4.8%	19.2%	16.4%	50.0%	9.6%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: People in your community - My community is culturally diverse	Count	54	15	80	149
	Row N %	36.2%	10.1%	53.7%	100.0%
RECODE: People in your community - People feel welcome and accepted in my community	Count	23	20	102	145
	Row N %	15.9%	13.8%	70.3%	100.0%
RECODE: People in your community - There is a sense of civic responsibility and engagement in my community	Count	22	21	106	149
	Row N %	14.8%	14.1%	71.1%	100.0%
RECODE: People in your community - The people in my community have a shared vision and community goals	Count	35	24	87	146
	Row N %	24.0%	16.4%	59.6%	100.0%

Services in Your Community

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate opportunities for recreation and leisure for all ages	Count	14	28	19	58	30	149
	Row N %	9.4%	18.8%	12.8%	38.9%	20.1%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has a thriving business district with access to needed goods and services	Count	30	47	21	40	10	148
	Row N %	20.3%	31.8%	14.2%	27.0%	6.8%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community provides adequate public services like snow removal, garbage collection, or recycling	Count	9	13	15	58	53	148
	Row N %	6.1%	8.8%	10.1%	39.2%	35.8%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate child care services	Count	20	31	29	37	18	135
	Row N %	14.8%	23.0%	21.5%	27.4%	13.3%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate senior services	Count	7	10	9	65	43	134
	Row N %	5.2%	7.5%	6.7%	48.5%	32.1%	100.0%
	Count	4	8	16	49	71	148

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement for each of the following statements about services in your community. - My community has a quality education system	Row N %	2.7%	5.4%	10.8%	33.1%	48.0%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate public transportation services	Count	5	20	11	55	55	146
	Row N %	3.4%	13.7%	7.5%	37.7%	37.7%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate employment opportunities that pay a livable wage	Count	15	42	20	49	17	143
	Row N %	10.5%	29.4%	14.0%	34.3%	11.9%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate law enforcement	Count	4	8	15	61	57	145
	Row N %	2.8%	5.5%	10.3%	42.1%	39.3%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has enough affordable housing for everyone who needs it	Count	39	43	19	24	11	136
	Row N %	28.7%	31.6%	14.0%	17.6%	8.1%	100.0%
Please indicate your level of agreement for each of the following statements about services in your community. - My community has adequate access to healthy and affordable foods	Count	50	45	11	33	9	148
	Row N %	33.8%	30.4%	7.4%	22.3%	6.1%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Services in your community - My community has adequate opportunities for recreation and leisure for all ages	Count	42	19	88	149
	Row N %	28.2%	12.8%	59.1%	100.0%
RECODE: Services in your community - My community has a thriving business district with access to needed goods and services	Count	77	21	50	148
	Row N %	52.0%	14.2%	33.8%	100.0%
	Count	22	15	111	148

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Services in your community - My community provides adequate public services like snow removal, garbage collection, or recycling	Row N %	14.9%	10.1%	75.0%	100.0%
RECODE: Services in your community - My community has adequate child care services	Count	51	29	55	135
	Row N %	37.8%	21.5%	40.7%	100.0%
RECODE: Services in your community - My community has adequate senior services	Count	17	9	108	134
	Row N %	12.7%	6.7%	80.6%	100.0%
RECODE: Services in your community. - My community has a quality education system	Count	12	16	120	148
	Row N %	8.1%	10.8%	81.1%	100.0%
RECODE: Services in your community. - My community has adequate public transportation services	Count	25	11	110	146
	Row N %	17.1%	7.5%	75.3%	100.0%
RECODE: Services in your community. - My community has adequate employment opportunities that pay a livable wage	Count	57	20	66	143
	Row N %	39.9%	14.0%	46.2%	100.0%
RECODE: Services in your community. - My community has adequate law enforcement	Count	12	15	118	145
	Row N %	8.3%	10.3%	81.4%	100.0%
RECODE: Services in your community. - My community has enough affordable housing for everyone who needs it	Count	82	19	35	136
	Row N %	60.3%	14.0%	25.7%	100.0%
RECODE: Services in your community. - My community has adequate access to healthy and affordable foods	Count	95	11	42	148
	Row N %	64.2%	7.4%	28.4%	100.0%

Community Concerns

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about each of the following in your community? - Substance misuse (alcohol, prescription drugs, tobacco or vaping, illicit or street drugs)	Count	6	14	32	92	144
	Row N %	4.2%	9.7%	22.2%	63.9%	100.0%
How concerned are you about each of the following in your community? - Mental health (anxiety, stress, depression)	Count	4	20	36	82	142
	Row N %	2.8%	14.1%	25.4%	57.7%	100.0%
How concerned are you about each of the following in your community? - Suicide	Count	4	23	40	71	138
	Row N %	2.9%	16.7%	29.0%	51.4%	100.0%
How concerned are you about each of the following in your community? - Access to healthy foods	Count	19	28	37	62	146
	Row N %	13.0%	19.2%	25.3%	42.5%	100.0%

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about each of the following in your community? - Food insecurity or hunger	Count	19	27	57	38	141
	Row N %	13.5%	19.1%	40.4%	27.0%	100.0%
How concerned are you about each of the following in your community? - Poverty in my community	Count	13	34	54	40	141
	Row N %	9.2%	24.1%	38.3%	28.4%	100.0%
How concerned are you about each of the following in your community? - Sexually transmitted diseases or infections	Count	28	42	31	15	116
	Row N %	24.1%	36.2%	26.7%	12.9%	100.0%
How concerned are you about each of the following in your community? - Crime in my community	Count	19	40	51	36	146
	Row N %	13.0%	27.4%	34.9%	24.7%	100.0%
How concerned are you about each of the following in your community? - Availability of long-term care or assisted living facilities	Count	45	44	31	19	139
	Row N %	32.4%	31.7%	22.3%	13.7%	100.0%
How concerned are you about each of the following in your community? - Availability of elder care services to support independent living, or aging in place	Count	23	37	55	22	137
	Row N %	16.8%	27.0%	40.1%	16.1%	100.0%
How concerned are you about each of the following in your community? - Obesity or overweightness	Count	13	38	46	47	144
	Row N %	9.0%	26.4%	31.9%	32.6%	100.0%

Violence Concerns in Community

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
How concerned are you about the following types of violence in your community? - Cyber bullying	Count	7	30	40	62	139
	Row N %	5.0%	21.6%	28.8%	44.6%	100.0%
How concerned are you about the following types of violence in your community? - Child abuse or neglect	Count	10	29	41	53	133
	Row N %	7.5%	21.8%	30.8%	39.8%	100.0%
How concerned are you about the following types of violence in your community? - Intimate partner violence	Count	17	33	40	37	127
	Row N %	13.4%	26.0%	31.5%	29.1%	100.0%
How concerned are you about the following types of violence in your community?	Count	12	36	43	46	137
	Row N %	8.8%	26.3%	31.4%	33.6%	100.0%

		Not concerned at all	Slightly concerned	Somewhat concerned	Very concerned	Total
community? - Emotional abuse (including intimidation or isolation)						
How concerned are you about the following types of violence in your community? - Sexual abuse or assault	Count	15	36	43	37	131
	Row N %	11.5%	27.5%	32.8%	28.2%	100.0%
How concerned are you about the following types of violence in your community? - Stalking	Count	26	45	38	18	127
	Row N %	20.5%	35.4%	29.9%	14.2%	100.0%
How concerned are you about the following types of violence in your community? - Verbal threats or harassment	Count	12	40	49	35	136
	Row N %	8.8%	29.4%	36.0%	25.7%	100.0%
How concerned are you about the following types of violence in your community? - Gun violence	Count	22	56	37	24	139
	Row N %	15.8%	40.3%	26.6%	17.3%	100.0%

Medical Services in Your Community

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Please indicate your level of agreement with the following issues related to medical services in your community. - It is easy to get an appointment for health care services in my community	Count	7	23	19	63	37	149
	Row N %	4.7%	15.4%	12.8%	42.3%	24.8%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - My community has adequate primary care providers and nurses	Count	15	27	11	67	26	146
	Row N %	10.3%	18.5%	7.5%	45.9%	17.8%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - My community has adequate health care services to meet my health care needs	Count	12	26	13	72	26	149
	Row N %	8.1%	17.4%	8.7%	48.3%	17.4%	100.0%
Please indicate your level of agreement with the following issues related to	Count	3	12	12	48	71	146
	Row N %	2.1%	8.2%	8.2%	32.9%	48.6%	100.0%

		Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
medical services in your community. - My community has adequate dental care providers							
Please indicate your level of agreement with the following issues related to medical services in your community. - My community has adequate vision care providers	Count	6	11	14	62	48	141
	Row N %	4.3%	7.8%	9.9%	44.0%	34.0%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - My community has adequate mental health services	Count	41	39	19	31	3	133
	Row N %	30.8%	29.3%	14.3%	23.3%	2.3%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - My community has adequate access to emergency response services such as ambulance or fire fighters	Count	3	7	13	55	71	149
	Row N %	2.0%	4.7%	8.7%	36.9%	47.7%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - I can easily navigate the health care system in my community	Count	3	16	16	51	60	146
	Row N %	2.1%	11.0%	11.0%	34.9%	41.1%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - I receive quality health care in my community	Count	7	12	12	67	50	148
	Row N %	4.7%	8.1%	8.1%	45.3%	33.8%	100.0%
Please indicate your level of agreement with the following issues related to medical services in your community. - In my community, care is well coordinated across providers and services	Count	10	18	27	64	19	138
	Row N %	7.2%	13.0%	19.6%	46.4%	13.8%	100.0%

		Disagree	Neither agree nor disagree	Agree	Total
RECODE: Medical services in your community. - It is easy to get an appointment for health care services in my community	Count	30	19	100	149
	Row N %	20.1%	12.8%	67.1%	100.0%
RECODE: Medical services in your community. - My community has adequate primary care providers and nurses	Count	42	11	93	146
	Row N %	28.8%	7.5%	63.7%	100.0%
RECODE: Medical services in your community. - My community has adequate health care services to meet my health care needs	Count	38	13	98	149
	Row N %	25.5%	8.7%	65.8%	100.0%
RECODE: Medical services in your community. - My community has adequate dental care providers	Count	15	12	119	146
	Row N %	10.3%	8.2%	81.5%	100.0%
RECODE: Medical services in your community. - My community has adequate vision care providers	Count	17	14	110	141
	Row N %	12.1%	9.9%	78.0%	100.0%
RECODE: Medical services in your community. - My community has adequate mental health services	Count	80	19	34	133
	Row N %	60.2%	14.3%	25.6%	100.0%
RECODE: Medical services in your community. - My community has adequate access to emergency response services such as ambulance or fire fighters	Count	10	13	126	149
	Row N %	6.7%	8.7%	84.6%	100.0%
RECODE: Medical services in your community. - I can easily navigate the health care system in my community	Count	19	16	111	146
	Row N %	13.0%	11.0%	76.0%	100.0%
RECODE: Medical services in your community. - I receive quality health care in my community	Count	19	12	117	148
	Row N %	12.8%	8.1%	79.1%	100.0%
RECODE: Medical services in your community. - In my community, care is well coordinated across providers and services	Count	28	27	83	138
	Row N %	20.3%	19.6%	60.1%	100.0%

Last CHNA Needs

		Much worse	Somewhat worse	About the same	Somewhat better	Much better	Total
Three years ago, the last Community Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? - Availability of mental health services	Count	5	21	53	28	13	120
	Row N %	4.2%	17.5%	44.2%	23.3%	10.8%	100.0%
Three years ago, the last Community Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? - Not enough jobs with livable wages	Count	8	25	52	24	10	119
	Row N %	6.7%	21.0%	43.7%	20.2%	8.4%	100.0%
Three years ago, the last Community Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? - Drug use and abuse	Count	19	41	39	11	8	118
	Row N %	16.1%	34.7%	33.1%	9.3%	6.8%	100.0%
Three years ago, the last Community Health Needs Assessment identified the following issues as community health needs. To what degree do you believe these issues have changed? - Depression or anxiety in youth	Count	31	45	22	10	9	117
	Row N %	26.5%	38.5%	18.8%	8.5%	7.7%	100.0%

		Worse	The same	Better	Total
RECODE: Previous issues - Availability of mental health services	Count	26	53	41	120
	Row N %	21.7%	44.2%	34.2%	100.0%
RECODE: Previous issues - Not enough jobs with livable wages	Count	33	52	34	119
	Row N %	27.7%	43.7%	28.6%	100.0%
RECODE: Previous issues - Drug use and abuse	Count	60	39	19	118
	Row N %	50.8%	33.1%	16.1%	100.0%
RECODE: Previous issues - Depression or anxiety in youth	Count	76	22	19	117
	Row N %	65.0%	18.8%	16.2%	100.0%

Preventative Health Care Measures

Multiple Response							
	Valid		Missing		Total		
	N	Percent	N	Percent	N	Percent	
MRQ5.1 ^a	142	93.4%	10	6.6%	152	100.0%	

MRQ5.1 Frequencies

MRQ5.1 Frequencies				
		Responses		Percent of Cases
		N	Percent	
MRQ5.1 ^a	Which of the following preventative health care measures have you received in the last year? Vaccinations	108	15.0%	76.1%
	Which of the following preventative health care measures have you received in the last year? Annual physical exam	115	16.0%	81.0%
	Which of the following preventative health care measures have you received in the last year? Mammogram	74	10.3%	52.1%
	Which of the following preventative health care measures have you received in the last year? Colonoscopy	31	4.3%	21.8%
	Which of the following preventative health care measures have you received in the last year? Blood pressure or cholesterol screening	93	12.9%	65.5%
	Which of the following preventative health care measures have you received in the last year? Counseling for tobacco use, alcohol dependency, weight loss, behavioral health	30	4.2%	21.1%
	Which of the following preventative health care measures have you received in the last year? Depression screening	44	6.1%	31.0%
	Which of the following preventative health care measures have you received in the last year? STD/STI Screening	14	1.9%	9.9%
	Which of the following preventative health care measures have you received in the last year? Vision exam or annual checkup	100	13.9%	70.4%
	Which of the following preventative health care measures have you received in the last year? Dental exam or annual checkup	110	15.3%	77.5%
Total		719	100.0%	506.3%

a. Dichotomy group tabulated at value 1.

		Not at all a barrier	Somewhat of a barrier	Extreme barrier	Total
To what degree are each of the following issues a barrier to your ability to access health care services? - Transportation to health care service locations	Count	115	18	4	137
	Row N %	83.9%	13.1%	2.9%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Distance to access care	Count	93	39	15	147
	Row N %	63.3%	26.5%	10.2%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Concerns about confidentiality	Count	100	30	13	143
	Row N %	69.9%	21.0%	9.1%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Availability of local services to meet my health care needs	Count	70	56	17	143
	Row N %	49.0%	39.2%	11.9%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Communication or language barriers	Count	121	16	3	140
	Row N %	86.4%	11.4%	2.1%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Disability accommodations	Count	98	28	2	128
	Row N %	76.6%	21.9%	1.6%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - Scheduling health care services within clinic hours	Count	82	52	10	144
	Row N %	56.9%	36.1%	6.9%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - The length of time to see a provider, from making an appointment to attending the appointment	Count	66	59	15	140
	Row N %	47.1%	42.1%	10.7%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - The price of prescription drugs, even with insurance	Count	66	50	26	142
	Row N %	46.5%	35.2%	18.3%	100.0%
To what degree are each of the following issues a barrier to your ability to access health care services? - The price of health care services (such as co-payments or deductibles), even with insurance	Count	55	59	26	140
	Row N %	39.3%	42.1%	18.6%	100.0%

Do you currently have a primary care doctor?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	127	83.6%	87.0%	87.0%
	No	19	12.5%	13.0%	100.0%
	Total	146	96.1%	100.0%	
Missing	Prefer not to respond	1	0.7%		
	System	5	3.3%		
	Total	6	3.9%		
Total		152	100.0%		

Multiple Response						
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ5.5 ^a	147	96.7%	5	3.3%	152	100.0%
a. Dichotomy group tabulated at value 1.						

MRQ5.5 Frequencies				
		Responses		Percent of Cases
		N	Percent	
MRQ5.5 ^a	Where do you find out about health information? Other health care professionals	74	14.3%	50.3%
	Where do you find out about health information? Primary care provider	119	23.1%	81.0%
	Where do you find out about health information? Public health professionals	75	14.5%	51.0%
	Where do you find out about health information? Internet sources	81	15.7%	55.1%
	Where do you find out about health information? Word of mouth (including family and friends)	69	13.4%	46.9%
	Where do you find out about health information? Advertising, such as TV commercials	21	4.1%	14.3%
	Where do you find out about health information? My employer	37	7.2%	25.2%
	Where do you find out about health information? Newspaper	16	3.1%	10.9%
	Where do you find out about health information? Radio	17	3.3%	11.6%
	Where do you find out about health information? Other source	7	1.4%	4.8%
Total		516	100.0%	351.0%
a. Dichotomy group tabulated at value 1.				

Multiple Response						
Case Summary						
	Cases					
	Valid			Missing		Total
	N	Percent	N	Percent	N	Percent
MRQ5.6 ^a	148	97.4%	4	2.6%	152	100.0%
a. Dichotomy group tabulated at value 1.						

MRQ5.6 Frequencies				
		Responses		Percent of Cases
		N	Percent	
MRQ5.6 ^a	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Insurance through employer (either your own or a family member's)	104	58.4%	70.3%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Private health insurance (coverage purchased by you)	25	14.0%	16.9%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Government program (Medicare, Medicaid, etc.)	36	20.2%	24.3%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Military (Tricare, Champus, VA)	6	3.4%	4.1%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Other (please specify)	5	2.8%	3.4%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice No health insurance	1	0.6%	0.7%
	What type of health insurance coverage do you have? (Select all that apply) - Selected Choice Prefer not to say	1	0.6%	0.7%
Total		178	100.0%	120.3%
a. Dichotomy group tabulated at value 1.				

SOCIAL HARDSHIP AND DISCRIMINATION

Did you move to your community in the past year?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	13	8.6%	9.0%	9.0%
	No	132	86.8%	91.0%	100.0%
	Total	145	95.4%	100.0%	
Missing	System	7	4.6%		
Total		152	100.0%		

		Not difficult at all	Slightly difficult	Somewhat difficult	Very difficult	Total
How difficult was it to do the following things? - Enroll children in school	Count	5	2	3	0	10
	Row N %	50.0%	20.0%	30.0%	0.0%	100.0%
How difficult was it to do the following things? - Find housing	Count	5	2	1	2	10
	Row N %	50.0%	20.0%	10.0%	20.0%	100.0%
How difficult was it to do the following things? - Find health care	Count	5	5	1	0	11
	Row N %	45.5%	45.5%	9.1%	0.0%	100.0%
How difficult was it to do the following things? - Find a job	Count	5	5	0	1	11
	Row N %	45.5%	45.5%	0.0%	9.1%	100.0%
How difficult was it to do the following things? - Find child care	Count	4	1	3	0	8
	Row N %	50.0%	12.5%	37.5%	0.0%	100.0%

Have you experienced discrimination in the past 12 months?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	12	7.9%	8.6%	8.6%
	No	127	83.6%	91.4%	100.0%
	Total	139	91.4%	100.0%	
Missing	Prefer not to respond	1	0.7%		
	System	12	7.9%		
	Total	13	8.6%		
Total		152	100.0%		

Multiple Response						
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ6.4 ^a	12	7.9%	140	92.1%	152	100.0%
a. Dichotomy group tabulated at value 1.						

MRQ6.4 Frequencies				
		Responses		Percent of Cases
		N	Percent	
MRQ6.4 ^a	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Race	2	9.1%	16.7%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Sex	5	22.7%	41.7%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Sexual orientation	1	4.5%	8.3%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Age	3	13.6%	25.0%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Weight	6	27.3%	50.0%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Religion	3	13.6%	25.0%
	In what areas have you experienced discrimination? Select all that apply. - Selected Choice Another area (please specify)	2	9.1%	16.7%
Total		22	100.0%	183.3%
a. Dichotomy group tabulated at value 1.				

Multiple Response						
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ6.5 ^a	12	7.9%	140	92.1%	152	100.0%
a. Dichotomy group tabulated at value 1.						

MRQ6.5 Frequencies		Responses		Percent of Cases
		N	Percent	
MRQ6.5 ^a	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Applying for a job	1	5.0%	8.3%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice At a job, work or my place of employment	7	35.0%	58.3%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Looking for housing	5	25.0%	41.7%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Applying for a credit card, mortgage, or bank loan	1	5.0%	8.3%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Shopping at a store or eating at a restaurant	3	15.0%	25.0%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Applying for social services or public assistance	1	5.0%	8.3%
	In which of the following situations did you experience discrimination? Select all that apply. - Selected Choice Prefer not to respond	2	10.0%	16.7%
Total		20	100.0%	166.7%
a. Dichotomy group tabulated at value 1.				

How difficult is it for you to pay for heating, housing, or medical care?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Not difficult at all	79	52.0%	58.1%	58.1%
	Slightly difficult	32	21.1%	23.5%	81.6%
	Somewhat difficult	17	11.2%	12.5%	94.1%
	Very difficult	8	5.3%	5.9%	100.0%
	Total	136	89.5%	100.0%	
Missing	I don't know	1	0.7%		
	Prefer not to respond	4	2.6%		
	System	11	7.2%		
	Total	16	10.5%		
Total		152	100.0%		

In the last month, have you had to sleep outside, in a shelter, in your car, at a family member or friend's house, or in a place not meant for sleeping?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	4	2.6%	2.8%	2.8%
	No	137	90.1%	97.2%	100.0%
	Total	141	92.8%	100.0%	
Missing	Prefer not to respond	1	0.7%		
	System	10	6.6%		
	Total	11	7.2%		
Total		152	100.0%		

Statistics		
What is your age? - Select your age on the slider		
N	Valid	133
	Missing	19
Mean		45.8947
Median		46.0000

RECODE: Age					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 18 years	4	2.6%	3.0%	3.0%
	18 to 34 years	32	21.1%	24.1%	27.1%
	35 to 44 years	28	18.4%	21.1%	48.1%
	45 to 64 years	47	30.9%	35.3%	83.5%
	65 to 84 years	21	13.8%	15.8%	99.2%
	85 years and older	1	0.7%	0.8%	100.0%
	Total	133	87.5%	100.0%	
Missing	System	19	12.5%		
Total		152	100.0%		

What is your gender? - Selected Choice					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	26	17.1%	18.6%	18.6%
	Female	113	74.3%	80.7%	99.3%
	Other (please describe)	1	0.7%	0.7%	100.0%
	Total	140	92.1%	100.0%	
Missing	Prefer not to say	3	2.0%		
	System	9	5.9%		
	Total	12	7.9%		
Total		152	100.0%		

Multiple Response						
Case Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
MRQ7.3 ^a	147	96.7%	5	3.3%	152	100.0%
a. Dichotomy group tabulated at value 1.						

MRQ7.3 Frequencies				
		Responses		Percent of Cases
		N	Percent	
MRQ7.3 ^a	Which of these groups best represents your race? Select all that apply. - Selected Choice White	138	93.9%	93.9%
	Which of these groups best represents your race? Select all that apply. - Selected Choice Black or African American	2	1.4%	1.4%
	Which of these groups best represents your race? Select all that apply. - Selected Choice American Indian or Alaska Native	2	1.4%	1.4%
	Which of these groups best represents your race? Select all that apply. - Selected Choice Asian	3	2.0%	2.0%
	Which of these groups best represents your race? Select all that apply. - Selected Choice Prefer not to say	2	1.4%	1.4%
Total		147	100.0%	100.0%
a. Dichotomy group tabulated at value 1.				

Do you identify as Hispanic, Latine, or of Spanish origin?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	9	5.9%	6.3%	6.3%
	No	134	88.2%	93.7%	100.0%
	Total	143	94.1%	100.0%	
Missing	Prefer not to say	1	0.7%		
	System	8	5.3%		
	Total	9	5.9%		
Total		152	100.0%		

What is your estimated annual household income?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than \$15,000	4	2.6%	3.0%	3.0%
	\$15,000 - \$24,999	5	3.3%	3.8%	6.8%
	\$25,000 - \$49,999	21	13.8%	15.9%	22.7%
	\$50,000 - \$74,999	27	17.8%	20.5%	43.2%
	\$75,000 - \$99,999	25	16.4%	18.9%	62.1%
	\$100,000 - \$149,999	33	21.7%	25.0%	87.1%
	\$150,000 and over	17	11.2%	12.9%	100.0%
	Total	132	86.8%	100.0%	
Missing	Prefer not to say	13	8.6%		
	System	7	4.65		
	Total	20	13.2%		
Total		152	100.0%		

What is the highest level of education you have completed?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	High school graduate or equivalency	13	8.6%	9.2%	9.2%
	Some college, no degree	19	12.5%	13.4%	22.5%
	Associate's degree	15	9.9%	10.6%	33.1%
	Bachelor's degree	57	37.5%	40.1%	73.2%
	Graduate or professional degree	38	25.0%	26.8%	100.0%
	Total	142	93.4%	100.0%	
Missing	Prefer not to respond	1	0.7%		
	System	9	5.9%		
	Total	10	6.6%		
Total		152	100.0%		

Which of these categories best describes your employment status?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employed full time	85	55.9%	65.9%	65.9%
	Employed part time	16	10.5%	12.4%	78.3%
	Unemployed	1	0.7%	0.8%	79.1%
	Retired	24	15.8%	18.6%	97.7%
	Student	3	2.0%	2.3%	100.0%
	Total	129	84.9%	100.0%	
Missing	Prefer not to say	4	2.6%		
	System	19	12.5%		
	Total	23	15.1%		
Total		152	100.0%		

What is your marital status?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single	23	15.1%	15.8%	15.8%
	Married or in a domestic partnership	111	73.0%	76.0%	91.8%
	Divorced or separated	7	4.6%	4.8%	96.6%
	Widowed	5	3.3%	3.4%	100.0%
	Total	146	96.1%	100.0%	
Missing	System	6	3.9%		
Total		152	100.0%		

Statistics		
How many people live in your household? Use numbers only. If you live alone, put "1".		
N	Valid	145
	Missing	7
Mean		2.7655
Median		2.0000

RECODE: How many people live in your household?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 person	17	11.2%	11.7%	11.7%
	2 to 4 people	113	74.3%	77.9%	89.7%
	5 or more people	15	9.9%	10.3%	100.0%
	Total	145	95.4%	100.0%	
Missing	System	7	4.6%		
Total		152	100.0%		

Do you have access to reliable internet in your home?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	140	92.1%	96.6%	96.6%
	No	5	3.3%	3.4%	100.0%
	Total	145	95.4%	100.0%	
Missing	Prefer not to respond	2	1.3%		
	System	5	3.3%		
	Total	7	4.6%		
Total		152	100.0%		

How did you get access to this survey, or survey link? - Selected Choice					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Hospital or public health website	21	13.8%	14.5%	14.5%
	Hospital or public health social media page (e.g. Facebook)	21	13.8%	14.5%	29.0%
	Hospital or public health employee directly	32	21.1%	22.1%	51.0%
	Economic development website or social media page	2	1.3%	1.4%	52.4%
	Other website or social media page (please specify)	24	15.8%	16.6%	69.0%
	Newsletter (please specify from where)	2	1.3%	1.4%	70.3%
	Newspaper advertisement	1	0.7%	0.7%	71.0%
	Word of mouth	3	2.0%	2.1%	73.1%
	Direct email (please specify from where)	31	20.4%	21.4%	94.5%
	Another way (please specify)	8	5.3%	5.5%	100.0%
	Total	145	95.4%	100.0%	
Missing	System	7	4.6%		
Total		152	100.0%		

Distribution Channel					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	anonymous	144	94.7%	94.7%	94.7%
	qr	8	5.3%	5.3%	100.0%
	Total	152	100.0%	100.0%	