

Heart of America Medical Center Service Area

2022 Community Health Needs Assessment

May 2022

Each Critical Access Hospital must conduct a Community Health Needs Assessment (CHNA) once every three years, as mandated by law. Local public health units seeking to gain/maintain accreditation conduct an assessment every five years. CHNAs completed by the Center for Rural Health (CRH) include secondary data review, community focus groups, key informant interviews, and a community survey. This fact sheet presents key community strengths and opportunities from the Rugby service area 2022 CHNA.

The Heart of America Medical Center (HAMC) service area is comprised of Pierce County in its entirety. Pierce County's population from 2010 to 2019 decreased by 8.8%. The percentage of residents ages 65 and older is 8.5% higher for Pierce County (23.8%) than the North Dakota average (15.3%), and the rate of education is slightly higher for Pierce County (93.3%) than the North Dakota average (92.5%). The median household income in Pierce County (\$55,660) is much lower than the state average for North Dakota (\$63,473).

Community Strengths

The top three assets identified in the community survey included it was a safe place to live with little or no crime, people in the community are friendly, helpful, and supportive, and healthcare. Other community assets included being family-friendly and active faith community.

Health Outcomes and Factors

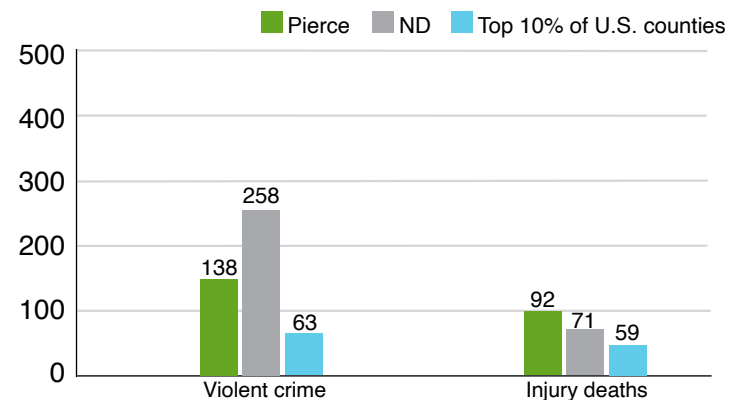
In review of secondary data, only 16% of Pierce County residents reported poor or fair health. It also had a greater percentage of residents reporting physical inactivity and adult smoking than the rest of the state and the top 10% of U.S. counties. See Table 1.

Table 1. Health Factors by % of Population, 2021

	Pierce County	ND	Top 10% U.S.
Uninsured	8%	8%	6%
Poor or fair health	16%	14%	14%
Access to exercise opportunities	72%	74%	91%
Physical inactivity	26%	23%	19%
Adult obesity	40%	34%	26%
Adult smoking	21%	20%	16%

Injury deaths were much higher in Pierce County (92 deaths per 100,000 residents) than in the state overall (71 per 100,000 residents), along with the top 10% of U.S. counties (59 per 100,000 residents). See Figure 1.

Figure 1. Cases per 100,000 Population, 2021



In 2020, data shows Medicaid recipients (% of population ages 0-20) was 27.5% for Pierce County, which is higher than the North Dakota average of 26.0%. Child food insecurity reported in 2019 was 15.0% for Pierce County, while North Dakota was 9.6%. See Table 2 for more information on children's health factors.

Table 2. Children's Health Factors by % of Population

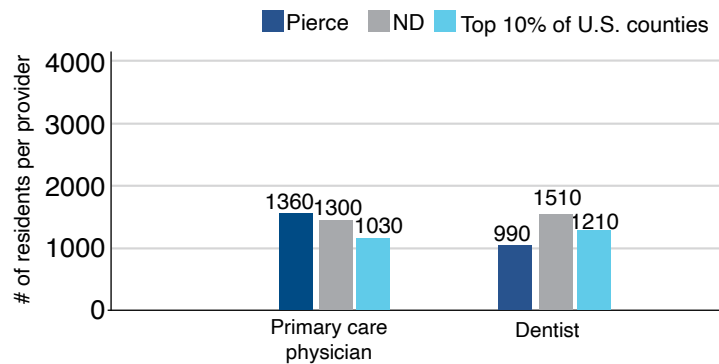
	Pierce	ND
Victims of child abuse and neglect requiring services (2018)	24.44	9.98
Child food insecurity, (2019)	15.0%	9.6%
Medicaid recipients (2020)	27.5%	26.0%
Children enrolled in Healthy Steps (2020)	2.4%	1.6%
Receiving SNAP (2020)	13.3%	16.9%

In 2021, 14% of children in Pierce County were living in poverty. This is higher than both the state (11%) and the top 10% of U.S. counties (10%).

Healthcare Access

Based on the provider to population ratio, Pierce County has a few more residents per primary care provider (1,360) than the state's average (1,300) and the top 10% of the U.S. (1,030). There were less residents per dentist than the state and top 10% of the U.S. See Figure 2.

Figure 2. Provider to Population Ratios, 2021



Community Concerns

In a survey conducted by CRH, residents identified up to three primary community concerns. The top two concerns were depression and anxiety in youth (56%) and having enough child daycare services (52%). Depression and anxiety in adults, attracting and retaining young families, and the lack of jobs with livable wages made the top five. See Table 3.

Table 3. Community Concerns, 2021

Community Concerns	%
Depression/anxiety in youth	56%
Having enough child daycare services	52%
Depression/anxiety in adults	49%
Attracting and retaining young families	43%
Not enough jobs with livable wages	43%

In January 2022, a community focus group identified their top concerns as:

1. Attracting and retaining young families
2. Availability of mental health services
3. Having enough child daycare services
4. Not enough healthcare staff in general

In the survey, community members also identified perceived barriers (up to three) specifically related to accessing local healthcare. The top four barriers were:

1. Not enough evening/weekend hours (36%)
2. Not affordable (32%)
3. No insurance or limited insurance (31%)
4. Not able to get appointment/ limited hours (26%)

Individuals also indicated which specific healthcare services, if any, they felt should be added locally. The number one desired service to add locally was mental health services.

Steps Undertaken Since 2019 CHNA

HAMC has taken steps to address the top concerns identified in the 2019 assessment. The need for attracting and retaining young families has been an issue with lack of daycare issues as well. HAMC has looked into daycare services. Low staffing levels have made it difficult to fill shifts at the on-site daycare. In regard to the ability to meet the needs of the older population, more screenings have been implemented into the care center, allowing for a better idea of what services each person needs. HAMC has been searching for a mental health provider but has been unable to hire one at this time. As for cost of health insurance, HAMC indicated in the implementation plan that this need would not be addressed by the hospital as it is addressed by numerous existing programs operated by the hospital and other organizations as well as other community partners. Youth depression/anxiety has not yet been addressed.

Implementation Strategies

Hospitals and local public health units prepare implementation strategies as a blueprint for meeting needs identified in a CHNA. Access the complete and community-specific CHNA Reports and Implementation Strategies at, ruralhealth.und.edu/projects/community-health-needs-assessment/reports

Full Report

Nissen, K. & Walter A.

Heart of American Medical Center Service Area: Community Health Needs Assessment, 2022.

For More Information

Visit the website, ruralhealth.und.edu/projects/community-health-needs-assessment or contact:

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