

Dear Community Members,

Sanford Medical Center Bemidji is pleased to present the 2018 Community Health Needs Assessment (CHNA).

Sanford completes a community health needs assessment every three years. It is through this work that we identify the unmet needs in the community and strategically plan how we can best address those needs. The CHNA process aligns with Sanford's mission - *Dedicated to the work of health and healing.*

During 2017 and 2018, members of the community were invited to complete a survey to help identify the unmet needs. Key stakeholders completed a survey to identify concerns for the community related to economic well-being, transportation, children and youth, the aging population, safety, and access to mental and behavioral health. Sanford analyzed the data from the primary research and met with key stakeholders to prioritize the identified needs. Our strategies to address the needs are included in this report.

Sanford will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- Economic Well-Being
- Mental Health and Substance Abuse
- Children and Youth

The CHNA also focused on the strengths of our community and includes the many community assets that are available to address the community health needs. We have also included an impact report from our 2016 implementation strategies.

Sanford Bemidji is committed to extending care beyond our bricks and mortar. We are committed to meeting the health care needs of the broader community. Together, we can fulfill our mission.

Sincerely,



Bryan Nermoe
President
Sanford Medical Center Bemidji



Joy Johnson
Vice President, Operations
Sanford Medical Center Bemidji

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Sanford Bemidji Medical Center

Community Health Needs Assessment

2018

Executive Summary

Purpose

The purpose of a community health needs assessment is to develop a global view of the population's health and the prevalence of disease and health issues within our community. Findings from the assessment serve as a catalyst to align expertise and develop a Community Investment/Community Benefit plan of action. There is great intrinsic value in a community health needs assessment when it serves to validate, justify and defend the not-for-profit status and create opportunity to identify and address public health issues from a broad perspective. A community health needs assessment identifies the community's strengths and areas for improvement. A community health needs assessment is critical to a vital Community Investment/Community Benefit Program that builds on community assets, promotes collaboration, improves community health, and promotes innovation and research. A community health needs assessment also serves to validate progress made toward organizational strategies and provides further evidence for retaining our not-for-profit status.

Our Guiding Principles

- All health care is a community asset
- Care should be delivered as close to home as possible
- Access to health care must be provided regionally
- Integrated care delivers the best quality and efficiency
- Community involvement and support are essential to success
- Sanford Health is invited into the communities we serve

Regulatory Requirements

Federal regulations stipulate that non-profit medical centers conduct a community health needs assessment at least once every three years and prioritize the needs for the purpose of implementation strategy development and submission in accordance with the Internal Revenue Code 501(r).

Internal Revenue Code 501(r) requires that each hospital must have: (1) conducted a community health needs assessment in the applicable taxable year; (2) adopted an implementation strategy for meeting the community health needs identified in the assessment; and (3) created transparency by making the information widely available.

The regulations stipulate that each medical center take into account input from persons who represent the broad interests of the community. We are required to seek at least one state, local, tribal or regional government public health department or state Office of Rural Health with knowledge, information or expertise relevant to the health needs of the community.

Non-profit hospitals are required to seek input from members of medically underserved, low income, and minority populations in the community, or organizations serving or representing the interest of such populations, and underserved populations experiencing disparities or at risk of not receiving adequate care as a result of being uninsured or due to geographic, language, financial or other barriers.

The community health needs assessment includes a process to identify community resources that are available to address the assessed needs and a prioritization of the needs.

Hospitals are to address each and every assessed needs or defend why we are not addressing the needs. Once the needs have been identified and prioritized, hospitals are required to develop an implementation strategy to address the top needs. The strategies are reported on IRS Form 990 and a status report must be provided each year on IRS 990 Schedule H.

Finally, hospitals are to be transparent with the findings and make the written CHNA report available to anyone who asks for the report. Sanford places the CHNA reports and the implementation strategies on the Sanford website. Hospitals are required to keep three cycles of assessments on the web site. The 2018 report will be Sanford's third report cycle since the requirements were enacted in 2010.

Study Design and Methodology

1. Primary Research

A. *Key Stakeholder Survey*

An online survey was conducted with identified community key stakeholders. The study concentrated on the stakeholders' concerns for the community specific to economic well-being, transportation, children and youth, the aging population, safety, health care and wellness, mental health and substance abuse. The study was conducted through a partnership between Sanford Health and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Sanford Health and Beltrami Public Health distributed the survey link via email to stakeholders and key leaders located within the Bemidji community and Beltrami County. Data collection occurred from December 2017 to January 2018. A total of 58 community stakeholders participated in the survey.

B. *Resident Survey*

The resident survey tool included questions about the respondent's personal health. An online survey was developed in partnership with public health experts from across the Sanford footprint. The Minnesota Health Department reviewed and advised Sanford about key questions that they request of the Statewide Health Improvement Partnership (SHIP) surveys and those questions were included in the resident survey. Questions specific to American Indian residents were developed by the North Dakota Public Health Association. The survey was posted on Facebook and a notice was posted in the local newspaper to invite residents to take the survey. The newspaper post included a URL for the survey. The survey was also sent to a representative sample of the populations secured through Qualtrics, a qualified vendor. A total of 248 community residents participated in the survey.

C. *Community Asset Mapping*

Asset mapping was conducted to find the community resources available to address the assessed needs. Each unmet need was researched to determine what resources were available to address the needs. Once gaps were determined, the prioritization exercise followed with key stakeholder groups determining the top needs.

D. *Community Stakeholder Discussions*

Community stakeholders were invited to attend a presentation of the findings of the CHNA research. Facilitated discussion commenced and each participant was asked to consider his or her top two or three priorities that should be further developed into implementation strategies. The meeting served to inform the group of the findings but also served as a catalyst to drive collaboration.

E. *Prioritization Process*

The primary and secondary research data was analyzed to develop the top unmet needs. The analyzed list of needs was developed into a worksheet. A multi-voting methodology from the American Society for Quality was implemented to determine what top priorities would be further developed into implementation strategies. Key community stakeholders met with medical center leaders to complete the multi-voting exercise.

2. Secondary Research

- A. The 2018 County Health Rankings were reviewed and included in the report and in the asset mapping process.
- B. The U.S. Census Bureau estimates were reviewed.
- C. Community Commons were reviewed and specific data sets were considered. The Community Commons link is <https://www.communitycommons.org/maps-data/>
- D. North Country Community Health Services 2017 Northwest Region Adult Health Behavior Survey Summary – Beltrami County Report was also included in the assessment.

Limitations of the Study

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in Bemidji and Beltrami County, Minnesota. A good faith effort was made to secure input from a broad base of the community. However, when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates from the U.S. Census Bureau, there was improvement over the last several CHNAs but there is still a need to capture demographic that better represents the community. This is part of our CHNA continuous improvement process.

The Internal Revenue Code 501(r) statute requires that a broad base of key community stakeholders have input into the needs of the community. Those community members specified in the statute include persons who represent the broad interests of the community served by the hospital facility including those with special expertise in public health; Federal, tribal, regional, state and or local health or other departments or agencies with information relevant to the health needs of the community served; and leaders, representatives, or members of medically underserved, low income, and minority populations.

Sanford extended a good faith effort to engage all of the aforementioned community representatives in the survey process. We worked closely with public health experts throughout the assessment process.

Public comments and responses to the community health needs assessment and the implementations strategies are welcome on the Sanford website or contact can be made at <https://www.sanfordhealth.org/contact-us/form>.

Key Findings

Community Health Concerns

The key findings are based on the key stakeholder survey, the resident survey and secondary research. The key stakeholder survey ranked key indicators on a Likert scale with 1 meaning no attention needed and 5 meaning critical attention needed. Survey results ranking 3.0 or above are considered to be high ranking. Sanford is addressing many of the needs that ranked below 3.0; however, the high ranking needs of 3.0 or above are considered for the prioritization process. The resident survey addresses personal health needs and concern. The secondary research provides further understanding of the health of the community and in some cases the indicators are aligned and validate our findings.

Economic Well-Being

Community stakeholders are most concerned that there is a need for affordable housing (ranking 4.16), high concern for homelessness (4.14), and a need for housing that accepts people with chemical dependency, mental health problems, criminal history or victims of domestic abuse (3.07).

People in Beltrami County are struggling with food insecurity - 31% of resident survey participants report that they worry they will not have enough food before having money to buy more, and 25% report that their food did not last until they had money to buy more.

Children and Youth

Community stakeholders are most concerned about substance abuse by youth (4.28) and teen suicide (4.00).

Aging Population

Community stakeholders are most concerned about the cost of long term care and the availability of memory care (4.02).

Safety

Community stakeholders are most concerned about abuse of prescription drugs (4.52), child abuse and neglect (4.32), the presence of street drugs (4.29), the presence of drug dealers (4.16), criminal activity (4.11), and domestic violence (4.05).

Health Care Access

Community stakeholders are most concerned about the availability of mental health providers (4.36), the availability of behavioral health (substance abuse) providers (4.30), and the use of emergency room services for primary health care (4.00).

Mental Health and Substance Abuse

Community stakeholders are most concerned about drug use and abuse (4.59), alcohol use and abuse (4.38), depression (4.09), and suicide (4.07).

49% of resident survey participants report that they have been diagnosed with depression, and 54% report a diagnosis of anxiety/stress.

Resident survey participants are facing the following issues:

- 66% report that they are overweight or obese
- 49% self-report binge drinking at least 1X/month
- 27% have not visited a dentist in more than a year
- 26% report that alcohol use has had a harmful effect on them or a member of their family in the past two years
- 25% report running out of food before having money to buy more
- 24% self-report that they have drugs in their home they are not using
- 24% have a diagnosis of hypertension and/or high cholesterol
- 19% currently smoke cigarettes

Community stakeholders worked through a multi-voting prioritization process to determine the top priorities and needs of the community.

Sanford Bemidji will address the following health needs in a formalized implementation strategy for the 2019-2021 fiscal years:

- *Economic Well-Being*
- *Mental Health/Behavioral Health and Substance Abuse*

Implementation Strategies

Priority 1: Economic Well-Being

The Robert Wood Johnson Foundation's Commission to Build a Healthier America reports that good physical and mental health depends on having homes that are safe and free from physical hazards. Adequate housing should protect individuals and families from harmful exposures and provides them with a sense of privacy, security, stability and control, and can make important contributions to health. In contrast, poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries, and poor childhood development. Sanford Health has made economic well-being a significant priority and has developed a strategic plan to work with community leaders to collaborate on housing and support services development.

Food security means access by all people at all times to enough food for an active, healthy life. Food insecurity describes a household's inability to provide enough food for every person to live an active, healthy life. According to the United States Department of Agriculture, an estimated 12.3 percent of American households were food insecure at least some time during the year in 2016, meaning they lacked access to enough food for an active, healthy life for all household members. That is essentially unchanged from 12.7 percent in 2015. The prevalence of very low food security is also essentially unchanged, at 4.9 percent in 2016 and 5.0 percent in 2015. Sanford has made economic well-being a significant priority and has developed a strategic plan to reduce the number of people impacted by hunger.

The Council on Social Work Education reports that economic well-being may be achieved by individuals, families, and communities through public policies that ensure the ability to build financial knowledge and skills, access to safe and affordable financial products and economic resources, and opportunities for generating income and asset building. It occurs within a context of economic justice within which labor markets provide opportunities for secure full employment with adequate compensation and benefits for all. Sanford has made economic well-being a significant priority and has developed a strategic plan to provide workforce and skilled labor opportunities in the Bemidji area.

Priority 2: Mental Health/Behavioral Health and Substance Abuse

Mental health is important at every stage of life and affects how people think, feel, and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental, and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health and behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Bemidji Medical Center
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C. Community Commons were reviewed and specific data sets were considered. The Community Commons link is <https://www.communitycommons.org/maps-data/>

- D. The Horizon Public Health Report was reviewed and specific data sets were considered and compared to our primary research for validation. The link to the report is <http://horizonpublichealth.org/>

Limitations of the Study

The findings in this study provide an overall snapshot of behaviors, attitudes, and perceptions of residents living in Bemidji and Beltrami County, Minnesota. A good faith effort was made to secure input from a broad base of the community. However, when comparing certain demographic characteristics (i.e., age, gender, income, minority status) with the current population estimates from the U.S. Census Bureau, there was improvement over the last several CHNAs but there is still a need to capture demographic that better represents the community. This is part of our CHNA continuous improvement process.

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Acknowledgements

Sanford Health would like to thank and acknowledge the Steering Committees for their assistance and expertise while conducting the assessment and analysis of the community needs.

Sanford Steering Group:

- Sara Ballhagen, Administrative Assistant, Sanford Bemidji
- Stacy Barstad, Senior Director, Sanford Tracy and Sanford Westbrook
- Rob Belanger, Clinic Director, Sanford Bemidji
- Catherine Bernard, Tax Manager, Corporate Accounting, Sanford Health
- Michelle Bruhn, Senior Vice President, Finance, Health Services Division, Sanford Health
- Randy Bury, Chief Administrative Officer, Sanford Health
- Brian Carlson, Executive Director, Sanford Thief River Falls
- Denise Clouse, Marketing Coordinator, Sanford Tracy
- Ashley Erickson, Senior Director, Sanford Aberdeen
- JoAnn Foltz, Senior Director, Sanford Bemidji
- Isaac Gerdes, Senior Director, Sanford Webster
- Paul Gerhart, Director of Fiscal Services, Sanford Canton
- Julie Girard, Improvement Advisor, Sanford Vermillion
- Paul Hanson, President, Sanford Sioux Falls
- Joy Johnson, VP, Operations, Sanford Bemidji
- JoAnn Kunkel, Chief Financial Officer, Sanford Health
- Mary Lake, Executive Assistant, Sanford Health Network Fargo Region
- Amber Langner, Senior Director of Finance, Corporate Accounting, Sanford Health
- Scott Larson, Senior Director, Sanford Canton

- Tiffany Lawrence, VP, Finance, Sanford Fargo
- Martha Leclerc, VP, Corporate Contracting, Sanford Health
- Tammy Loosbrock, Senior Director, Sanford Luverne and Sanford Rock Rapids
- Carrie McLeod, Sanford Community Health Improvement/Community Benefit - CHNA Director
- Jac McTaggart, Senior Director, Sanford Hillsboro and Sanford Mayville
- Rick Nordahl, Senior Director, Sanford Sheldon
- Erica Peterson, Senior Director, Sanford Chamberlain
- Gwen Post, Director of Nursing and Clinical Services, Sanford Worthington
- Dawn Schnell, Senior Director, Sanford Jackson
- Lori Sisk, Senior Director, Sanford Canby and Sanford Clear Lake
- Jennifer Tewes, Clinic Supervisor, Sanford Jackson
- Tim Tracy, Senior Director, Sanford Vermillion
- Ruth Twedt, Manager of Ancillary Services, Sanford Clear Lake
- Marnie Walth, Senior Legislative Affairs Specialist, Sanford Bismarck
- Jennifer Weg, Executive Director, Sanford Worthington

We express our gratitude to the following community collaborative members for their expertise during the planning, development and analysis of the community health needs assessment:

- Clinton Alexander, Fargo Moorhead Native American Center
- Kristin Bausman, Becker County Public Health
- Justin Bohrer, Fargo Cass Public Health
- Cynthia Borgen, Beltrami Public Health
- Jackie Buboltz, Essentia Health
- Anita Cardinal, Pennington County Public Health
- Leah Deyo, Essentia Health
- Peter Ekadu, Nobles County Public Health
- Stacie Golombiecki, Nobles County Public Health
- Christian Harris, New American Consortium
- Caitlyn Hurley, Avera Health
- Deb Jacobs, Wilkin County Public Health
- Joy Johnson, Sanford Health
- Ann Kinney, Minnesota Department of Health
- Krista Kopperud, Southwest Health and Human Services
- Ann Malmberg, Dakota Medical Foundation Mayors' Blue Ribbon Commission on Addiction
- Kathy McKay, Clay County Public Health
- Jac McTaggart, Sanford Health
- Mary Michaels, Sioux Falls Department of Health
- Teresa Miler, Avera Health
- Renae Moch, Burleigh County Public Health
- Brittany Ness, Steel County Public Health
- Ruth Roman, Fargo Cass Public Health
- Kay Schwartzwalter, Center for Social Research, NDSU
- Becky Secore, Beltrami Public Health
- Julie Sorby, Family HealthCare Center
- Brenda Stallman, Traill County Public Health
- Diane Thorson, Ottertail County Public Health
- Juli Ward, Avera Health
- MayLynn Warne, North Dakota Public Health Association

We extend our special thanks to the community and county leaders, public health administration, physicians, nurses, legislators and community representatives for diverse populations for their participation in this work. Together we are reaching our vision “to improve the human condition through exceptional care, innovation and discovery.”

The following Bemidji community stakeholders participated in community discussions and helped to formulate the priorities for our implementation strategies:

- Renee Axtman, Indian Health
- Joe Beaudreau, Indian Health Advocate
- Cynthia Borgen, Beltrami Public Health Director
- Jeane Edevold-Larson, Northern Dental Access Center
- Theresa Gehrke-Herwynen, Chaplain
- Megan Heuer-Koronen, Beltrami Family Health Program
- Joy Johnson, VP, Operations, Sanford Health Bemidji
- Bob Luoma, Sanford Health Patient Relations
- Nate Mathews, Bemidji City Manager
- Katherine Monkman, Director of Case Management, Sanford Health
- Connie Morman, Sanford Community Health
- Sarah Weinzierl, Clinical Director, Sanford Health
- Lindsey Wangberg, Sanford Health Marketing Director
- Matt Webb, Sanford Health Pharmacy Manager

Description of Sanford Bemidji Medical Center

Sanford Bemidji Medical Center, a 118-bed regional medical center, has been a vital part of the Bemidji community since 1898. It is the largest hospital in the region, serving 176,000 people. It serves as a regional hub for AirMed air ambulance services and offers a Level IV trauma center and fully staffed emergency room.

As a provider of specialized care, Sanford Bemidji offers expanded services in cancer, heart and vascular care, orthopedics and sports medicine, behavioral health and women's health, along with comprehensive adult, pediatric and senior health services. Thousands of patients in the Bemidji region are able to receive specialty care in their community, close to home.

In 2018, Sanford opened the Joe Lueken Cancer Center – the region's largest cancer facility, offering comprehensive care in one location. Services include medical oncology/hematology, radiation oncology, surgical oncology, infusion and pharmacy, research and clinical trials, nutrition, navigation and ongoing support, genetic counseling, survivorship and more. The new cancer center will serve thousands of people from throughout the region.

A merger with Upper Mississippi Mental Health in 2017 resulted in Sanford Bemidji becoming the largest provider of mental health services in the region. UMMHC had an outstanding history with programs for families, groups and individuals. Services range from psychological evaluations to alcohol and drug addiction services, in-school child and adolescent therapy. With their expertise, and Sanford's integrated system, it was a win-win for both organizations and allowed Sanford to embed needed behavioral health services into primary care clinics. A group of 70 mental health professionals from UMMHC joined the Sanford Bemidji team in 2017.

The Sanford Bemidji Heart and Vascular Center opened in 2013. This 6,500 square foot department, located within the medical center, features a cardiology clinic, cardiac cath lab and prep and recovery areas. The center provides a broad spectrum of treatment including 24/7 emergent STEMI care, cardiology, interventional cardiology, cardiac electrophysiology, cardiac rehab, vascular surgery, screenings and more. Plans are underway to expand our current facility as we have reached capacity in our current space.

Sanford Bemidji also has 78 skilled nursing home beds, 120 assisted living apartments, including a separate dementia unit, a durable medical equipment company, a Class A licensed home care agency, and a Medicare-certified hospice program.

Sanford Bemidji currently employs 165 clinicians, including physicians and advanced practice providers, and more than 2,000 other staff.

Description of the Community Served



Located in north central Minnesota, Bemidji is surrounded by breathtaking natural beauty. The community graces the shore of Lake Bemidji, one of more than 400 crystal clear lakes in the region. Known as the “First City on the Mississippi,” Bemidji is the county seat of Beltrami County, with an estimated 250,000 residents living within 75 miles of the community.

Ranked as a “Top Town” by Outdoor Life magazine, Bemidji serves as the center for economic development for all of northern Minnesota and is the regional hub for educational services, health care, retail shopping, transportation, finance and governmental services. It also serves as the central hub for the Red Lake, White Earth and the Leech Lake Indian reservations.

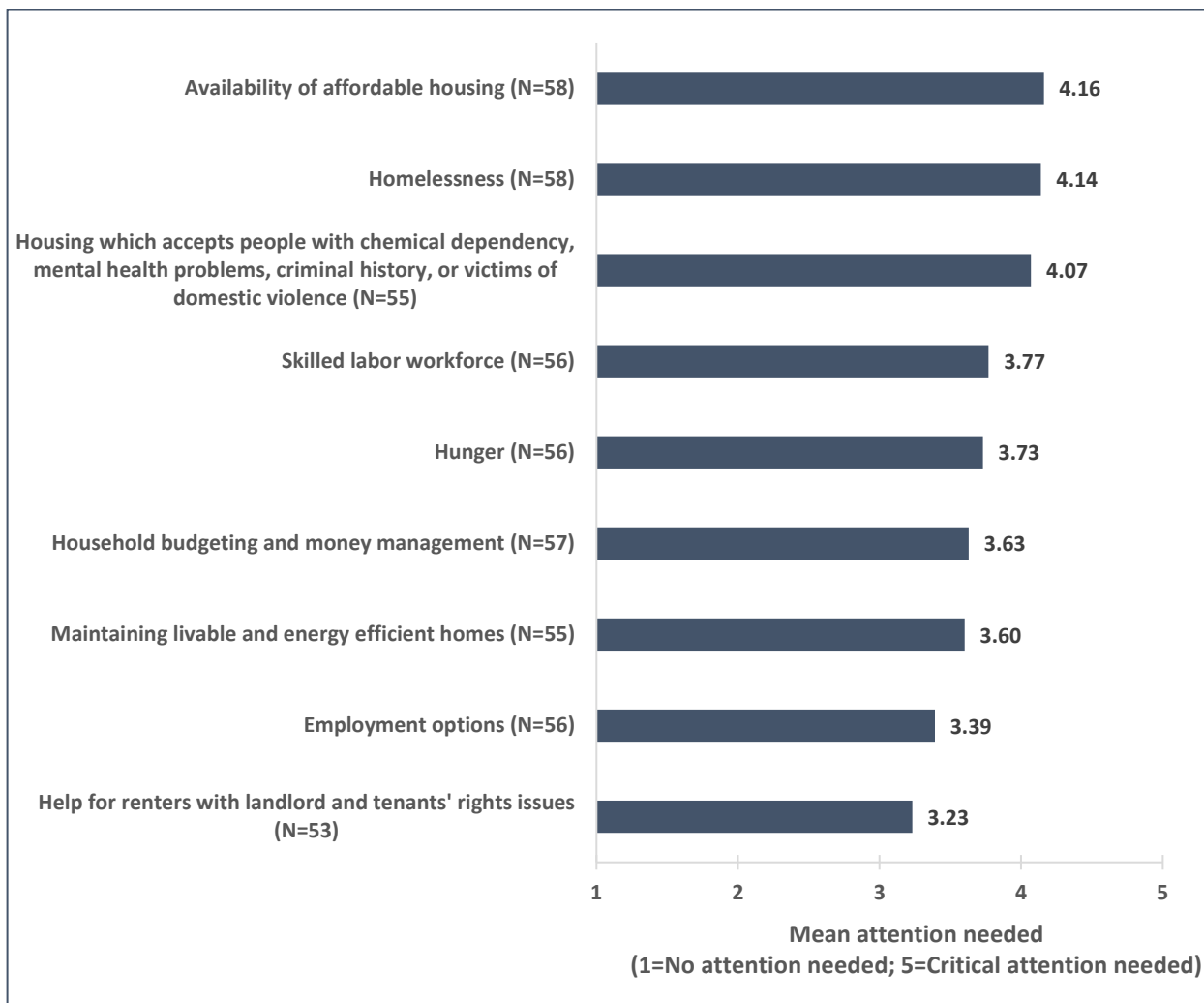
Bemidji is located near many popular recreational destinations, including Itasca State Park, Lake Bemidji State Park, state forest areas, and the Chippewa National Forest. There are 400 fishing lakes within 25 miles of the city, and over 500 miles of snowmobile trails and 160 kilometers of cross-country ski trails are located in and around Bemidji. During the summer, more than 25,000 visitors per month stop to take photographs at the iconic statues of Paul Bunyan and Babe the Blue Ox.

Key Findings

Community Health Concerns

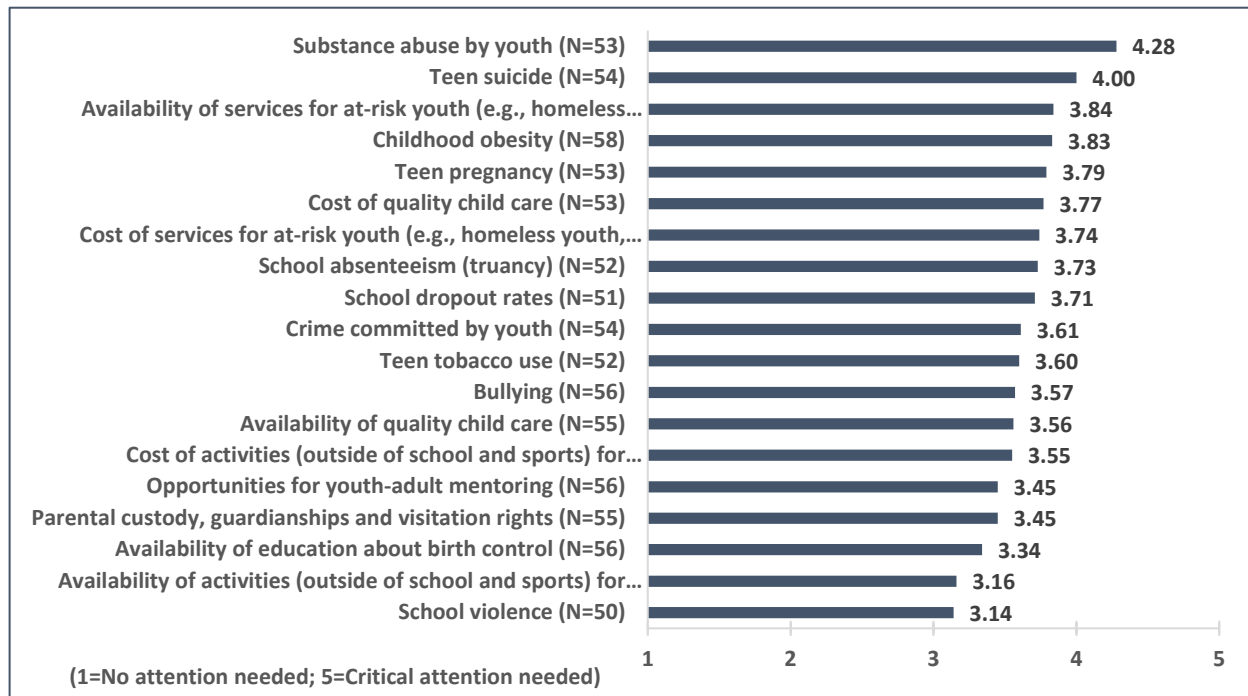
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Economic Well-Being: The concern for the community's economic well-being is focused on the need for affordable housing, homelessness and housing that accepts people in recovery, mental illness, criminal history or victims of domestic abuse.



Healthy People 2020 has defined the social determinants of health. “Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” The patterns of social engagement and sense of security and well-being are also affected by where people live. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.

Children and Youth: The concern for children and youth is highest for substance abuse and teen suicide.



According to the U.S. Department of Drug Enforcement Administration (DEA), nationally almost **20 percent** of students surveyed admit to using marijuana at least once during the last 30 days, and 13 percent of students surveyed **admitted driving** when they used marijuana within the last 30 days.

Researchers have identified *risk factors* that can increase a person’s chances for misuse, and *protective factors* that can reduce the risk. However, many people with risk factors do not abuse substances. The risk factors for substance abuse among youth include boredom, stress, curiosity, the desire to feel grown up, or to lessen peer pressure.

Youth may also be more likely to try drugs because of circumstances or events called risk factors. Examples of risk factors include:

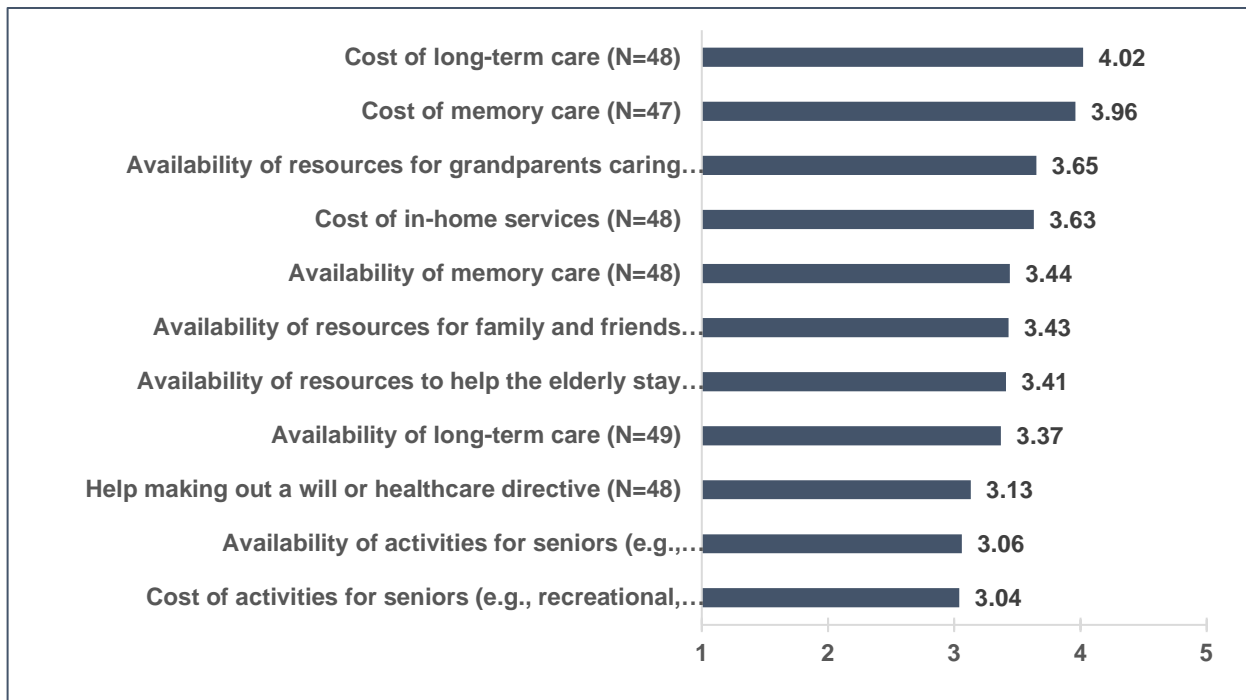
- Poor grades in school
- Engaging in alcohol or drug use at a young age
- Friends and peers who engage in alcohol or drug use

- Persistent, progressive, and generalized substance use, misuse, and use disorders by family members
- Conflict between parents or between parents and children, including abuse or neglect
- Bullying

Protective factors include:

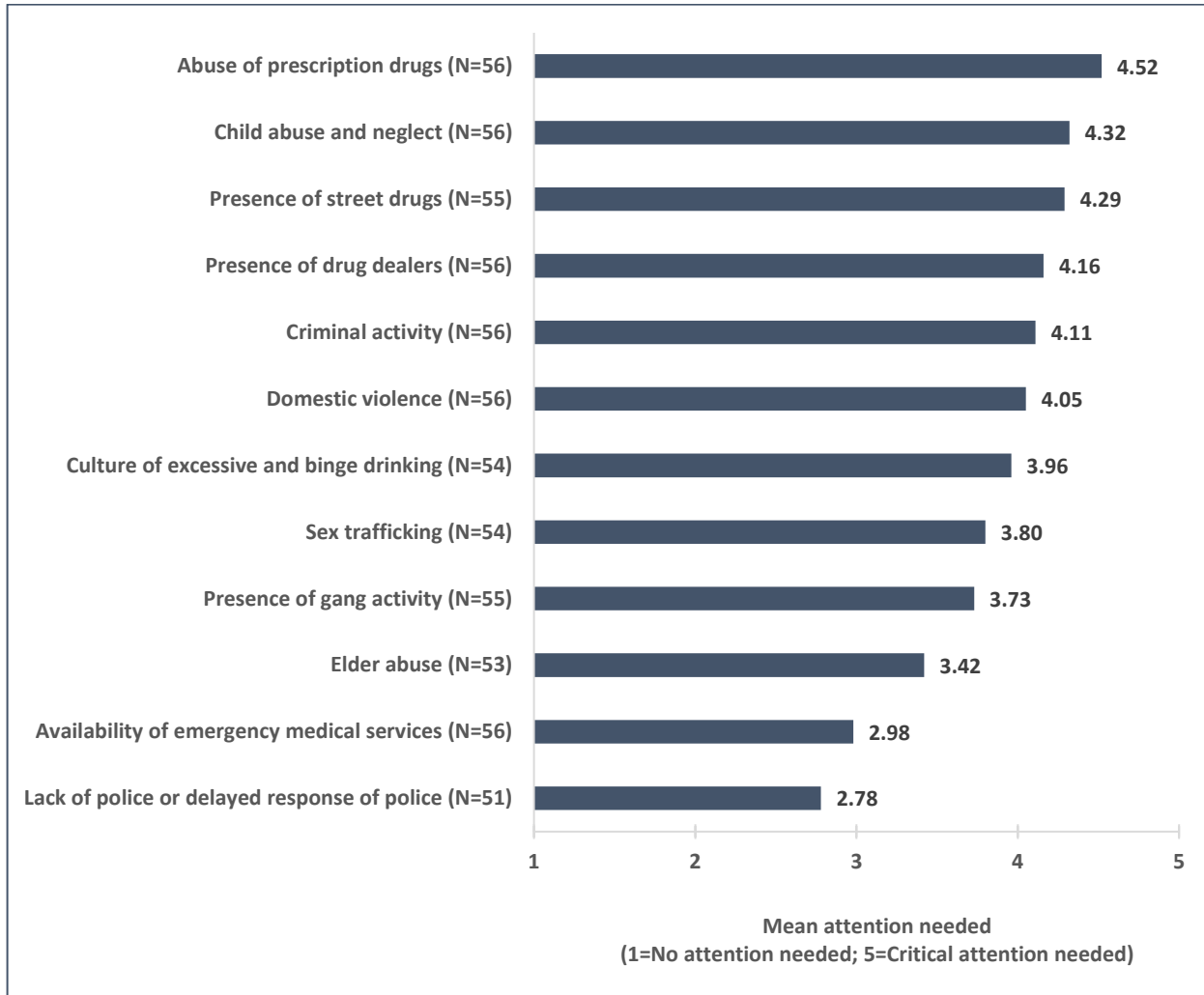
- Having high self-esteem
- Attending a school with policies against using alcohol and drugs
- Having an adult role model who doesn't use tobacco or drugs or misuse alcohol
- Participating in athletic, community, or faith-based groups
- Living in a community with youth activities that prohibit drugs and alcohol

Aging Population: The cost of long term care and memory care are top concerns again and were top concerns during the 2016 CHNA cycle.



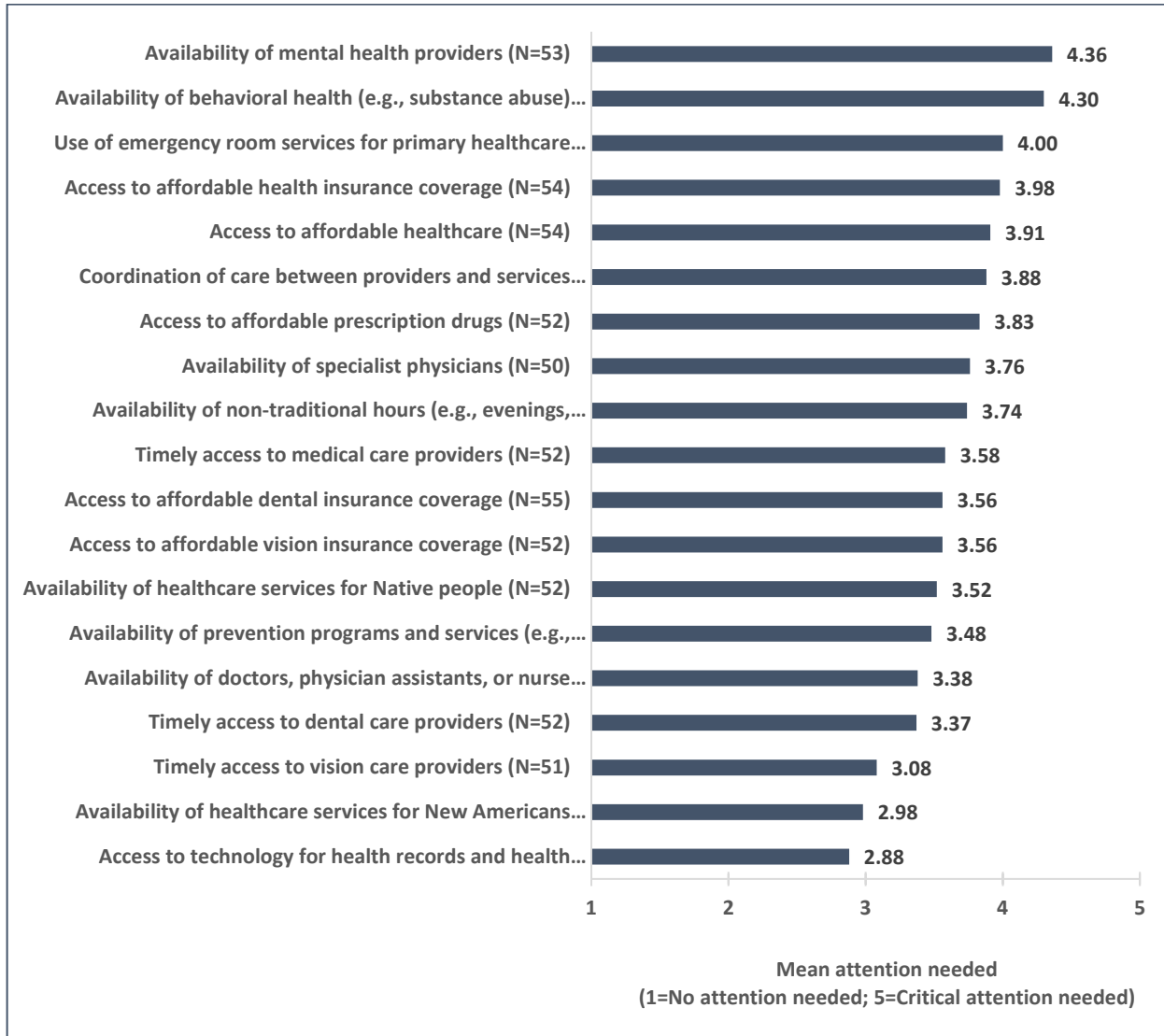
According to the U.S. Health and Human Services Administration on Aging, the cost of long term care depends on the type and duration of care you need, the provider you use, and where you live. Sanford providers work to help seniors live healthy independent lives. Sanford social workers, case managers, and discharge planners refer patients to area service providers to make certain that patients receive a safe discharge and transition to the appropriate levels of care.

Safety: The abuse of prescription drugs, child abuse, the presence of street drugs and the presence of drug dealers are top concerns for safety in the community.



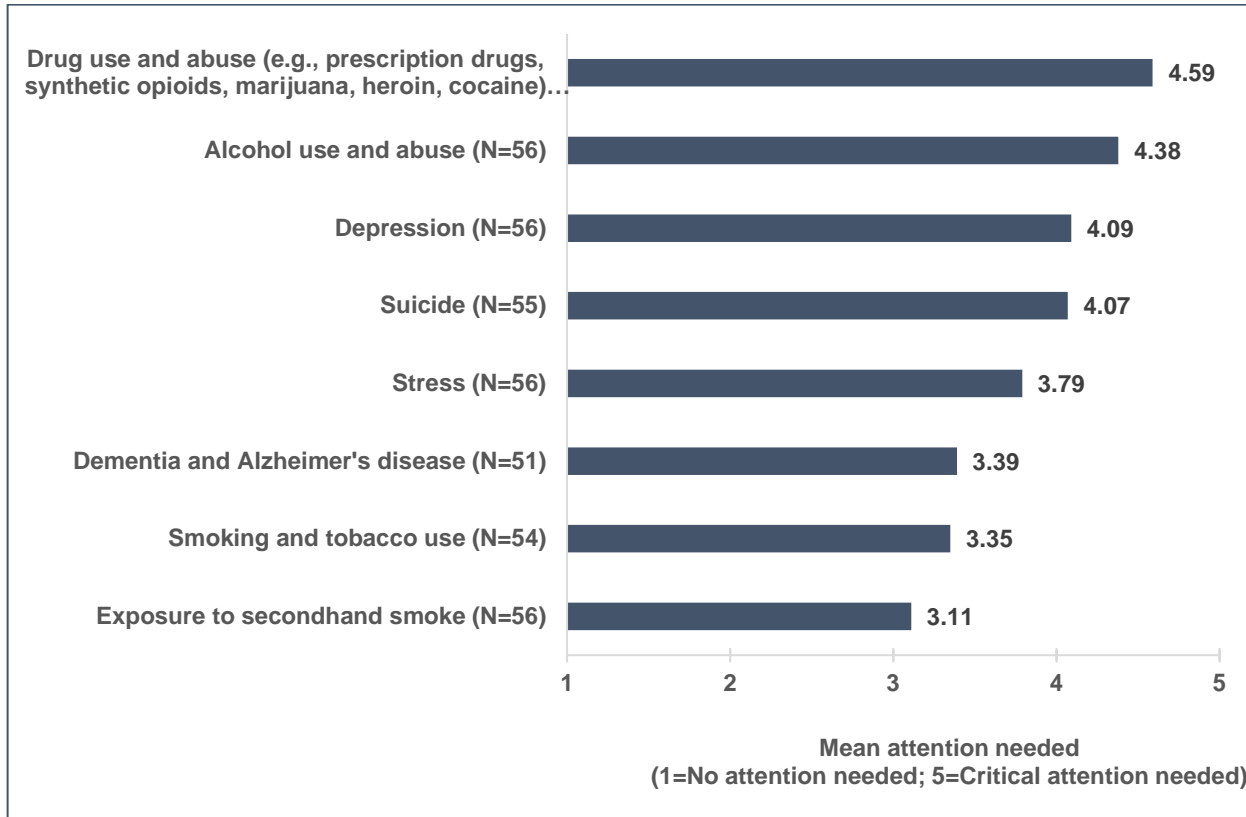
The National Institute on Drug Abuse states that the misuse of prescription drugs means taking a medication in a manner or dose other than what was prescribed; or taking someone else’s prescription, even if for a legitimate medical complaint such as pain; or taking a medication to feel euphoria (i.e., to get high). The term *non-medical use* of prescription drugs also refers to these categories of misuse. The three classes of medication most commonly misused are opioids, central nervous system depressants (this category includes tranquilizers, sedatives, and hypnotics) and stimulants - most often prescribed to treat attention deficit hyperactivity disorder (ADHD). Prescription drug misuse can have serious medical consequences. Providers at Sanford Health have reduced opioid prescriptions over the last three years in an effort to have fewer pills in circulation and a reduced opportunity for misuse.

Health Care and Wellness: The availability of mental health and behavioral health providers is ranked very high among the top concerns for the community.



According to the Bureau of Health Workforce, Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, Health Professional Shortage Area (HPSA) designations are used to identify areas and population groups within the United States that are experiencing a shortage of health professionals. The 2016 HRSA report projected that the supply of workers in selected behavioral health professions would be approximately 250,000 workers short of the projected demand by 2025. According to the Community Commons for Beltrami County there are no mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.

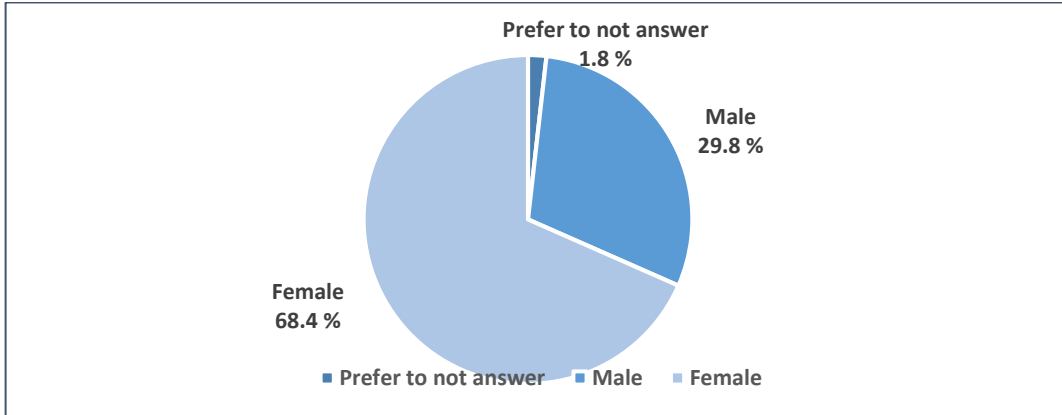
Mental Health and Substance Abuse: Drug use and abuse, stress, depression and alcohol use and abuse are top concerns for the community.



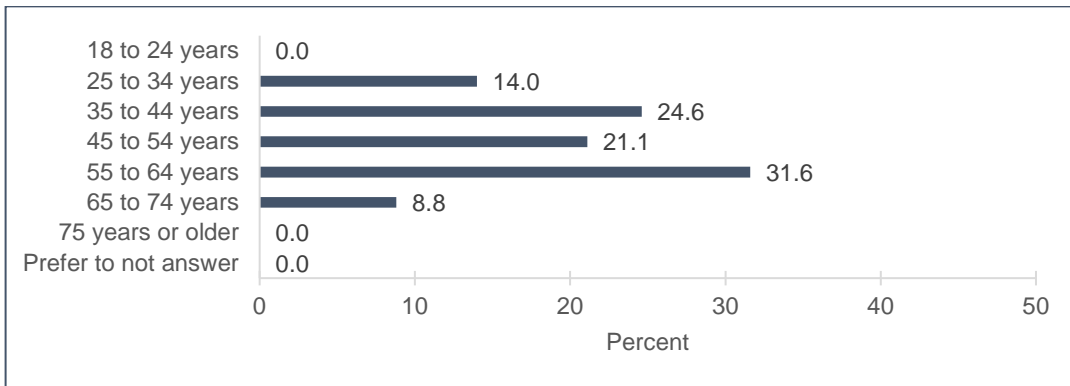
The Substance Abuse and Mental Health Services Administration reports that “Mental and substance use disorders can have a powerful effect on the health of individuals, their families, and their communities. In 2014, an estimated 9.8 million adults age 18 and older in the United States had a serious mental illness, and 1.7 million of whom were age 18 to 25. Also, 15.7 million adults (age 18 or older) and 2.8 million youth (age 12 to 17) had a major depressive episode during the past year. In 2014, an estimated 22.5 million Americans age 12 and older self-reported needing treatment for alcohol or illicit drug use, and 11.8 million adults self-reported needing mental health treatment or counseling in the past year. These disorders are among the top conditions that cause disability and carry a high burden of disease in the United States, resulting in significant costs to families, employers, and publicly funded health systems. By 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide.”

Demographic Information for Key Stakeholder Participants

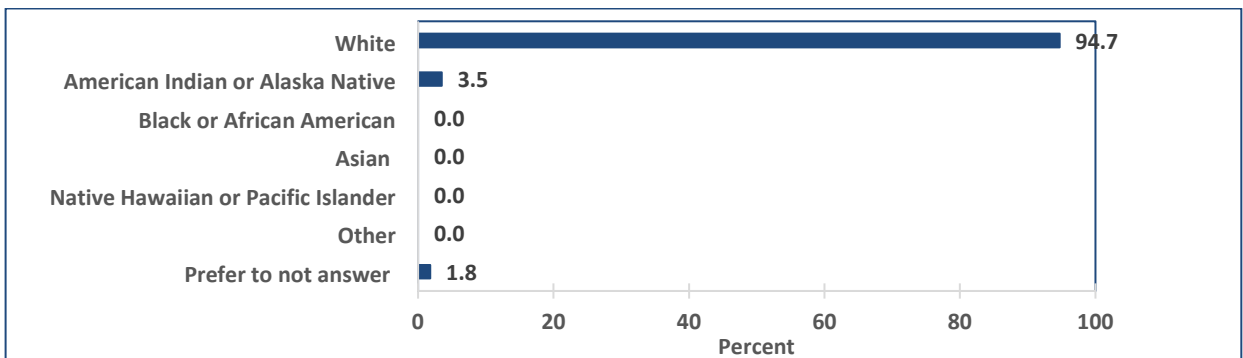
Biological Gender



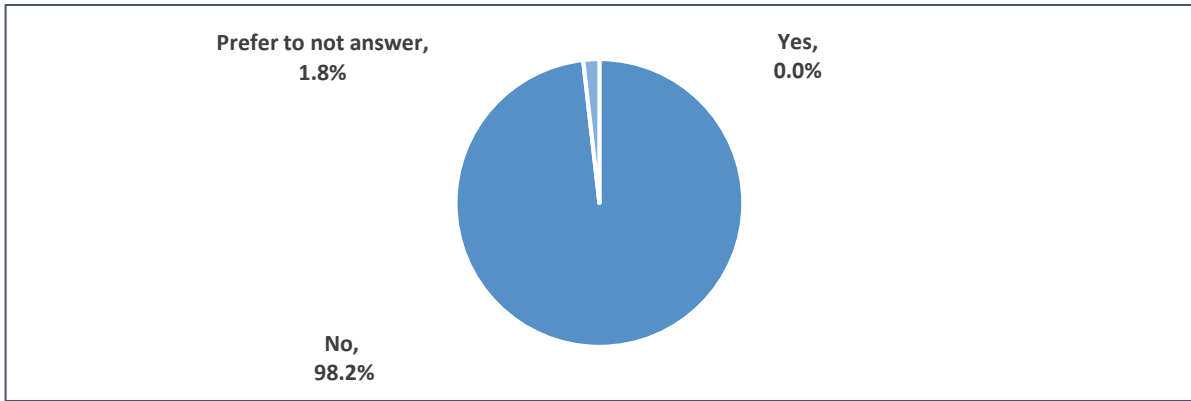
Age of Participants



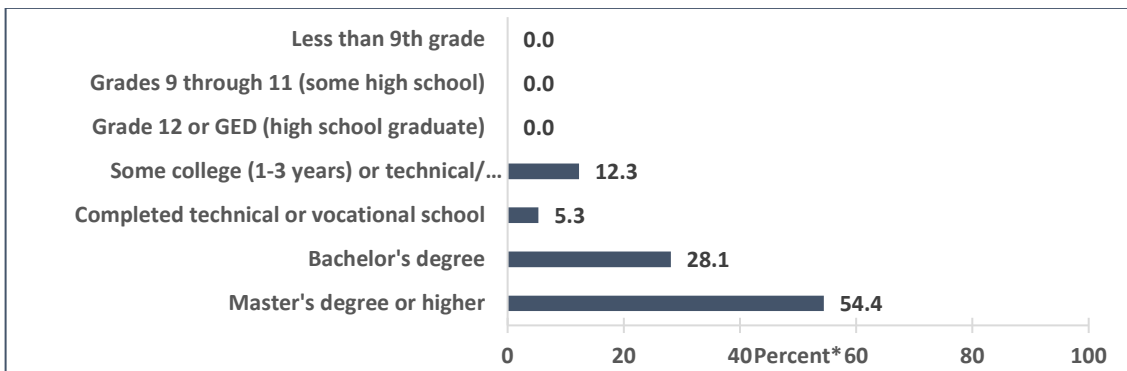
Race of Participants



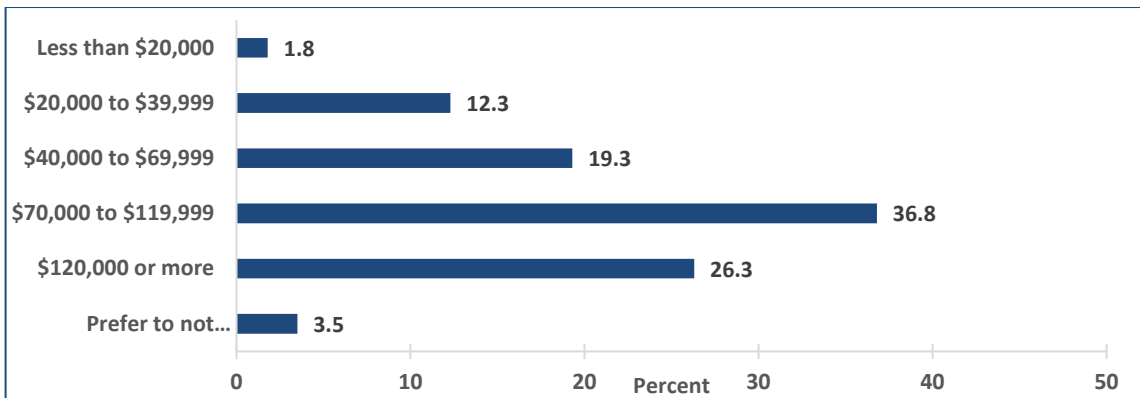
Whether Respondents are of Hispanic or Latino Origin



Highest Level of Education Completed



Annual Household Income of Respondents, from all sources, before taxes



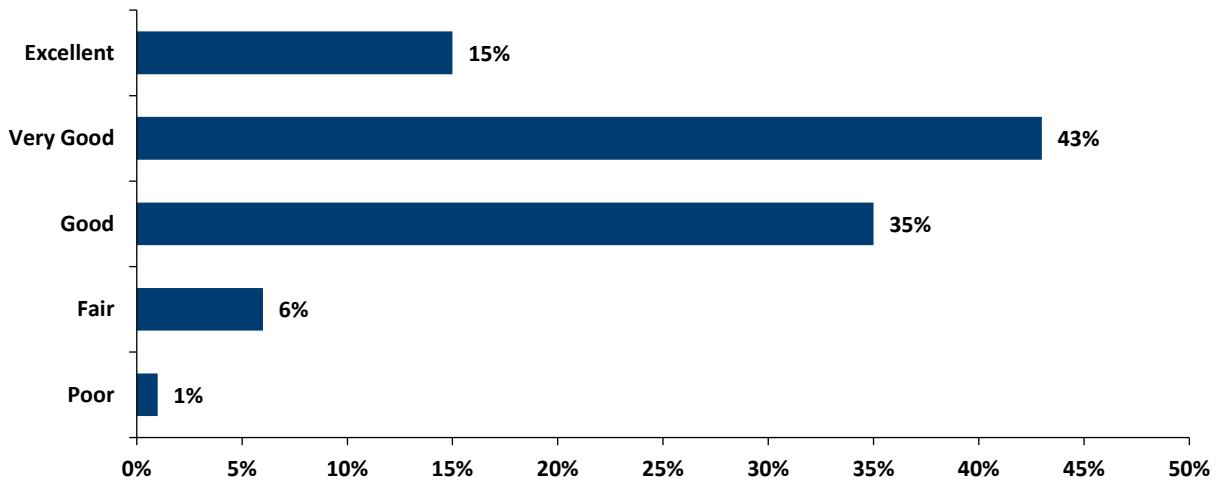
Residents' Health Concerns

Health is personal and it starts in our homes, schools, workplaces, neighborhoods, and communities. Eating well and staying active, not smoking, getting the recommended immunizations and screening tests, and seeing a doctor for routine check-ups can positively influence our health.

The resident survey asks questions specific to the participants' personal health and health behaviors.

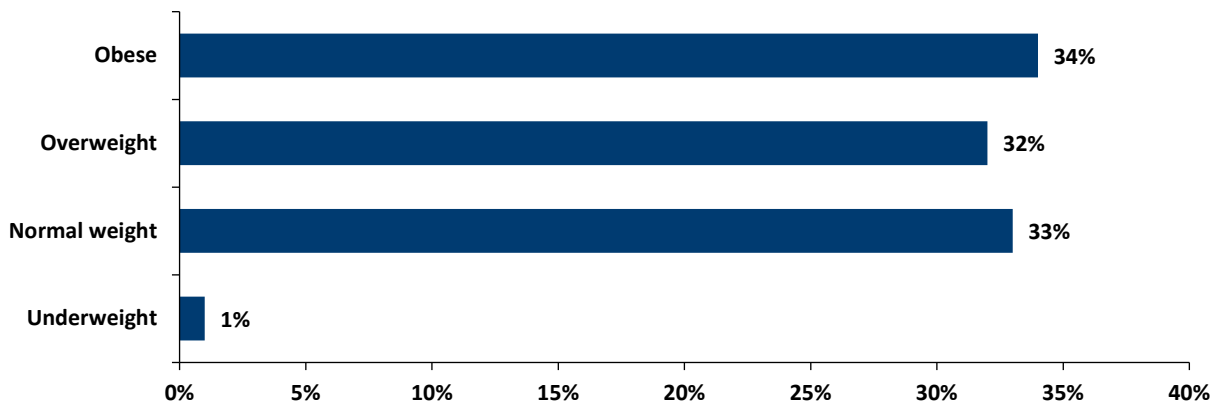
How would you rate your health?

Ninety-three percent of survey participants rated their health as good or better.



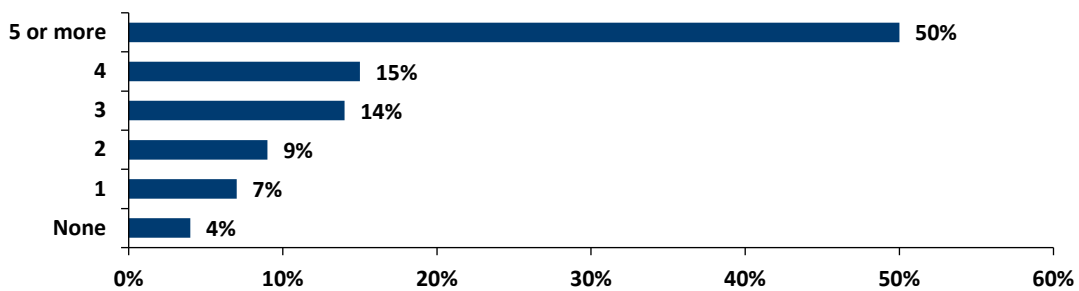
Body Mass Index

Sixty-six percent of participants are overweight or obese.



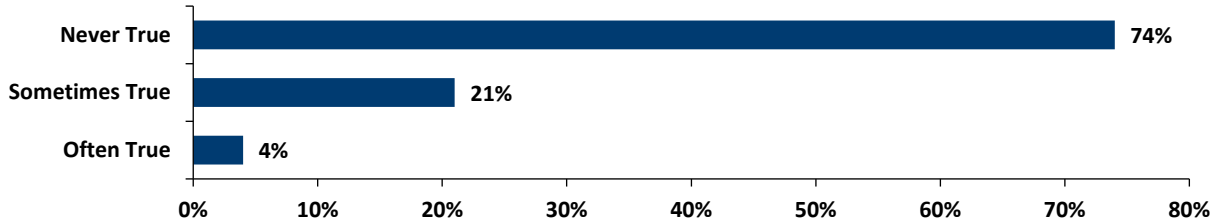
Total daily servings of fruits and vegetables

Only 50% are getting their recommended five or more a day servings of fruits and vegetables.



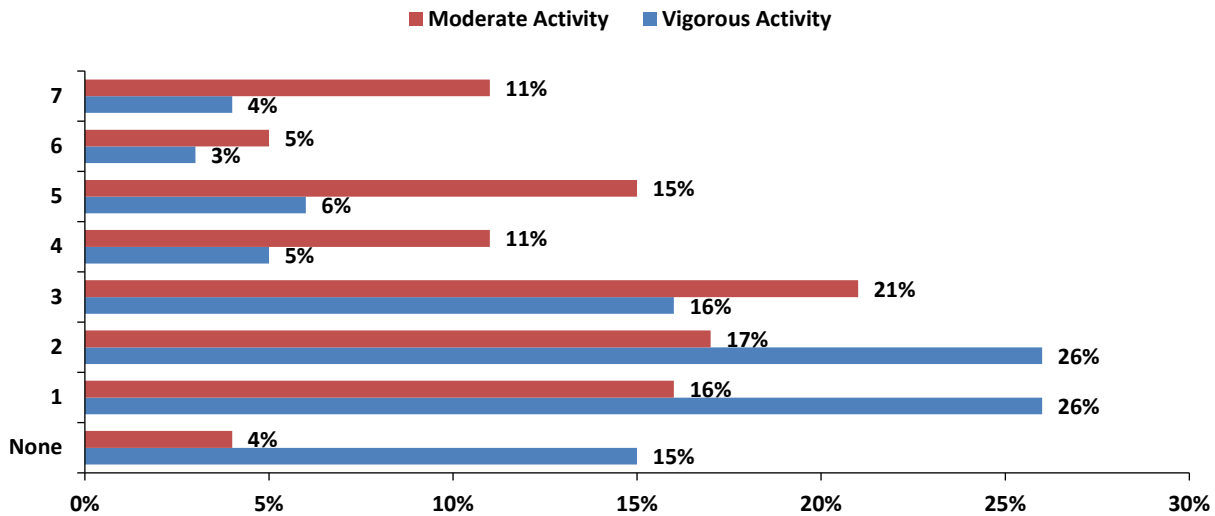
Food did not last until there was money to buy more

Twenty-five percent of survey participants run out of food before they have money to purchase more.



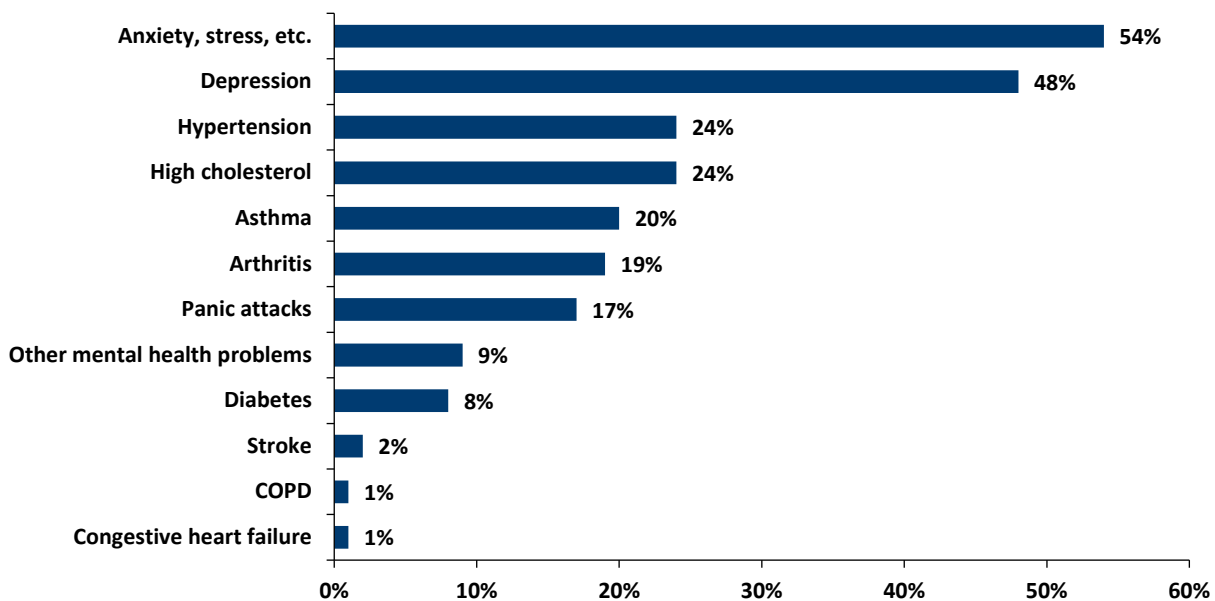
Days per week of physical activity

Sixty-three percent of survey participants have moderate physical activity three or more times each week.



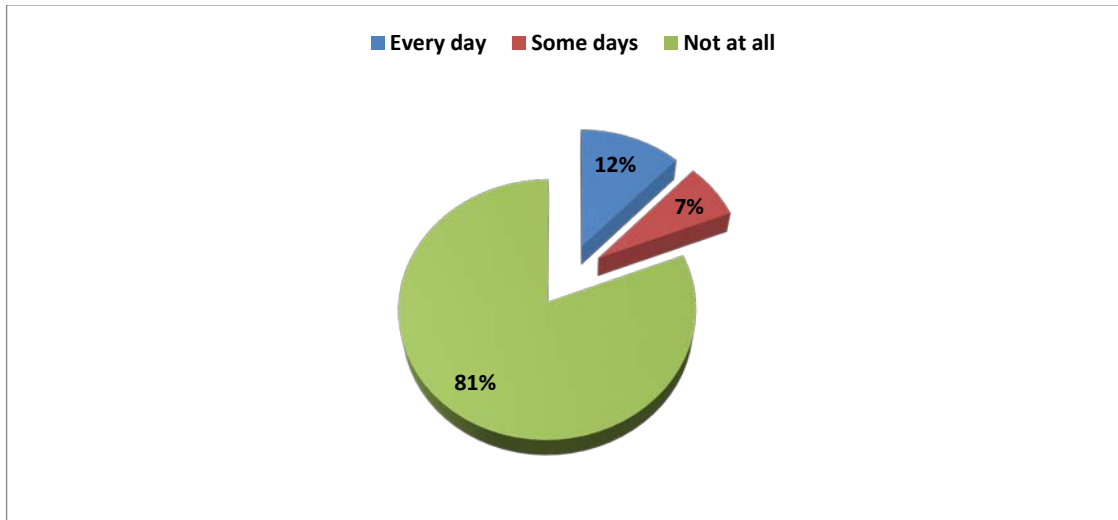
Past diagnosis

Depression and anxiety rank very high among survey participants. High cholesterol, hypertension, asthma and arthritis are the top chronic disease issues among survey participants.



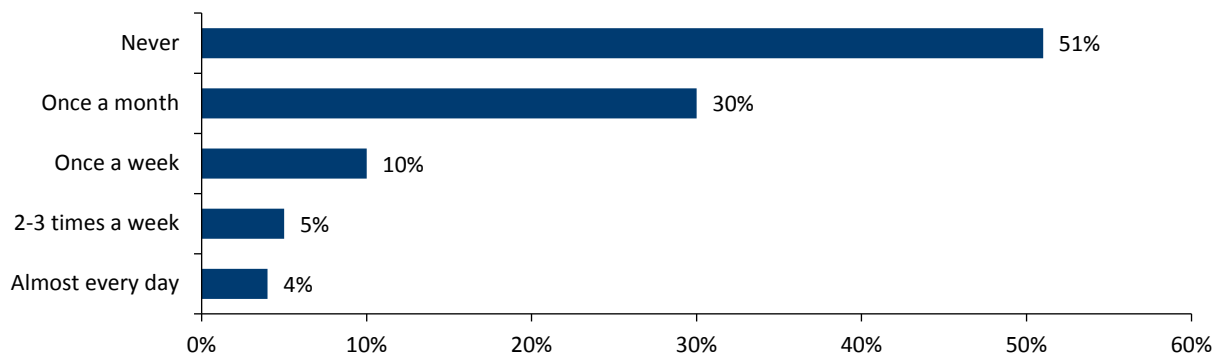
Tobacco use

Nineteen percent of survey participants currently smoke cigarettes. Sixteen percent smoke cigarettes every day.

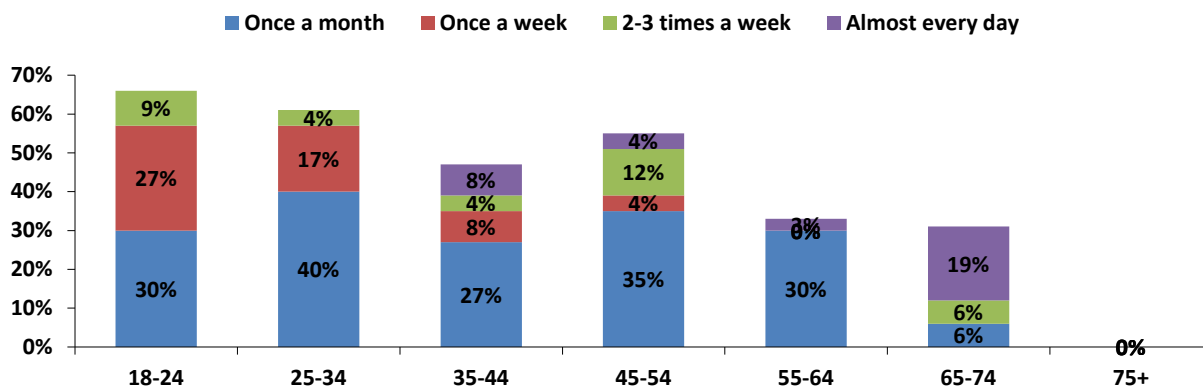


Binge drinking

Forty-nine percent of survey participants self-report that they binge drink at least once per month and twenty percent binge at least weekly.

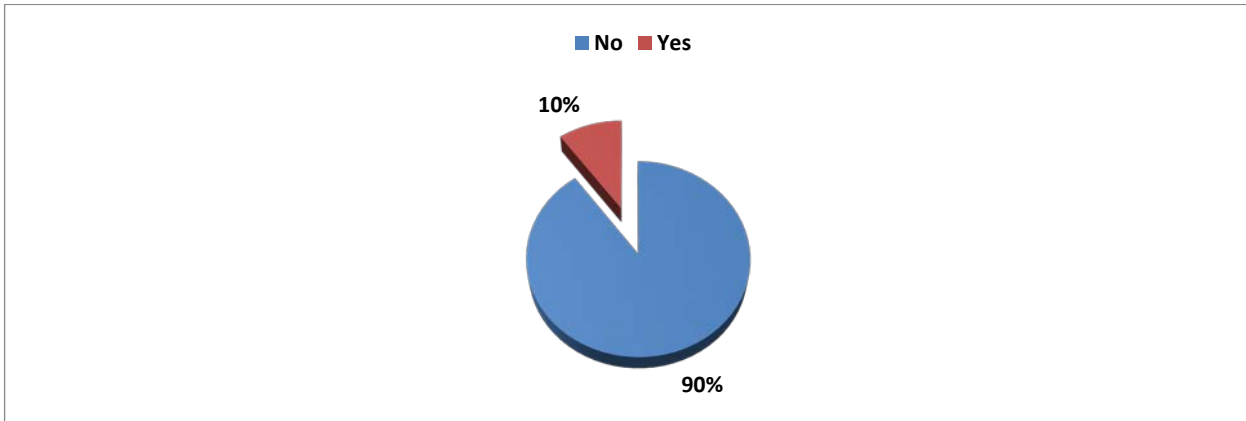


Binge drinking by age



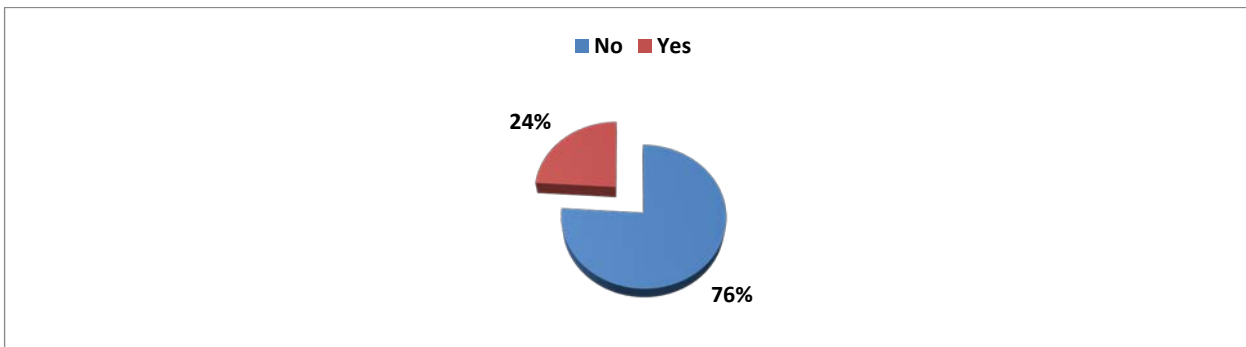
Has alcohol had a harmful effect on you or a family member in the past two years?

Ten percent of survey participants report that alcohol has had a harmful effect on themselves or a family member within the past two years.



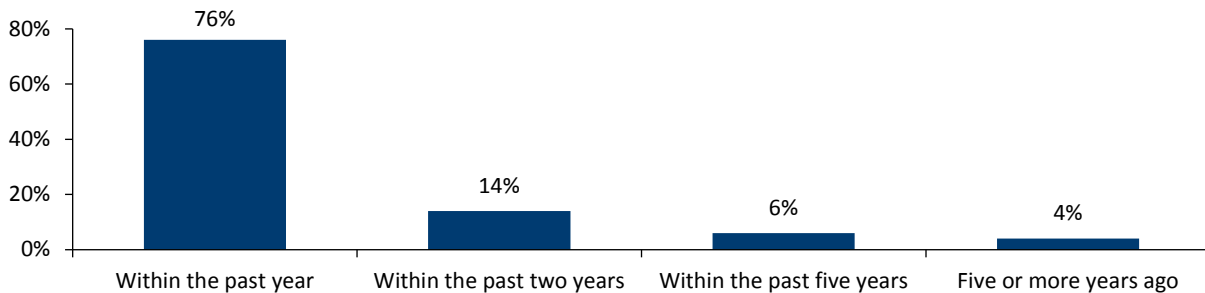
Do you have drugs in your home that are not being used?

Twenty-four percent have drugs in their home that they are no longer using.



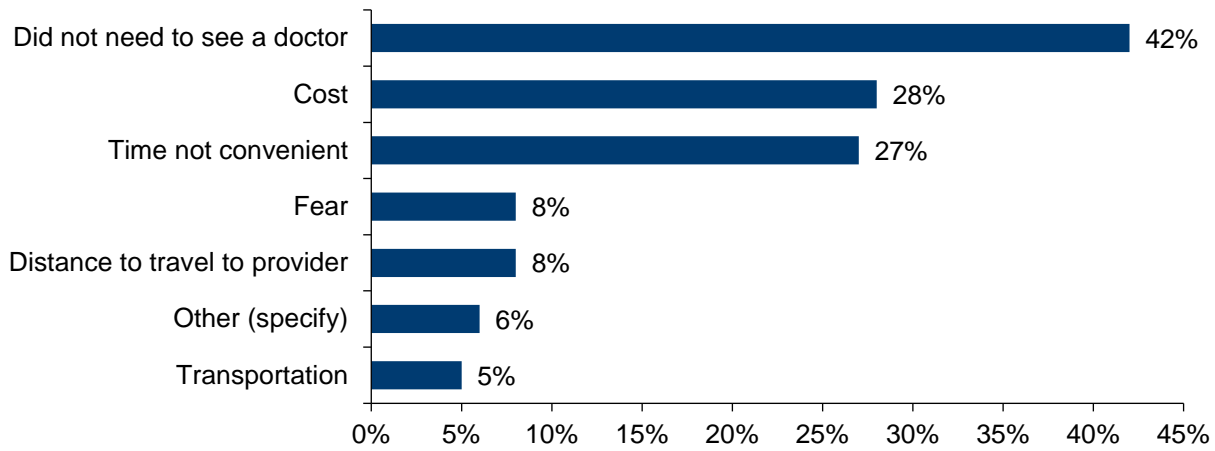
How long has it been since you visited a doctor or health care provider for a routine check-up?

Twenty-two percent of survey participants have not had a routine check-up in more than a year.



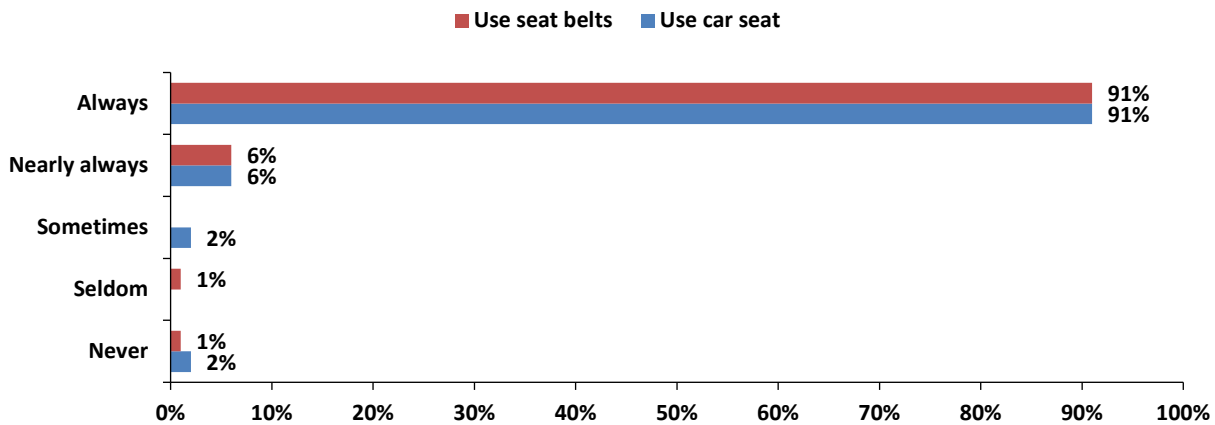
Barriers to routine check-up

Forty-two percent of survey participants stated that they did not need to see a doctor in the past year and twenty-two percent stated that cost was a barrier.



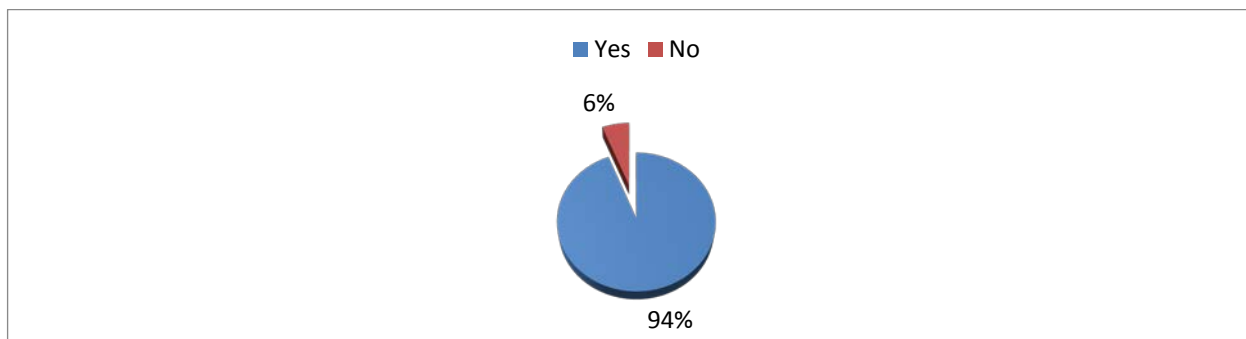
Child car safety

Eight percent do not always use seat belts for their children and ten percent do not always use car seats.



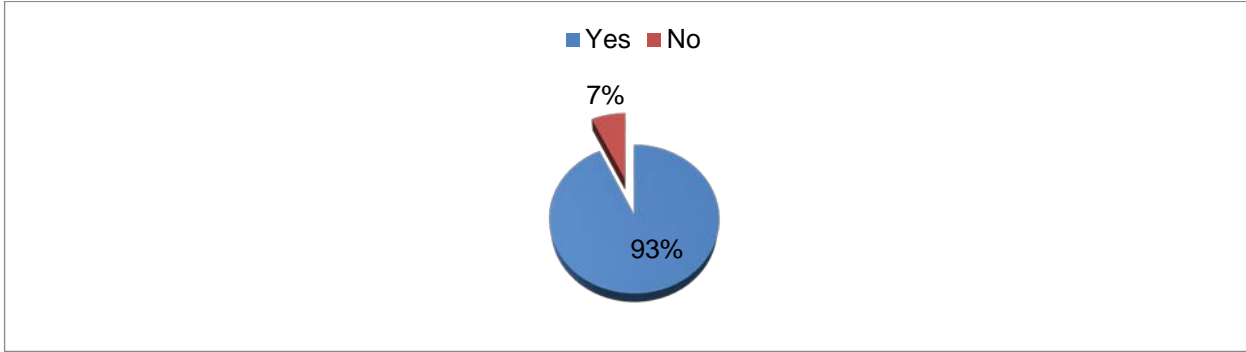
Do you have health care coverage for your children or dependents?

Only 6% of survey participants do not have health insurance for their children or dependents.



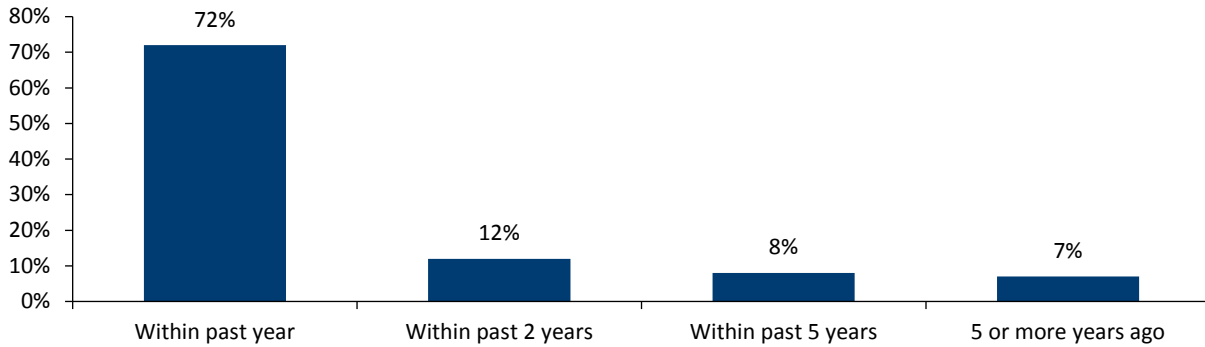
Do you currently have any kind of health insurance?

Only 7% of survey participants do not have health insurance.



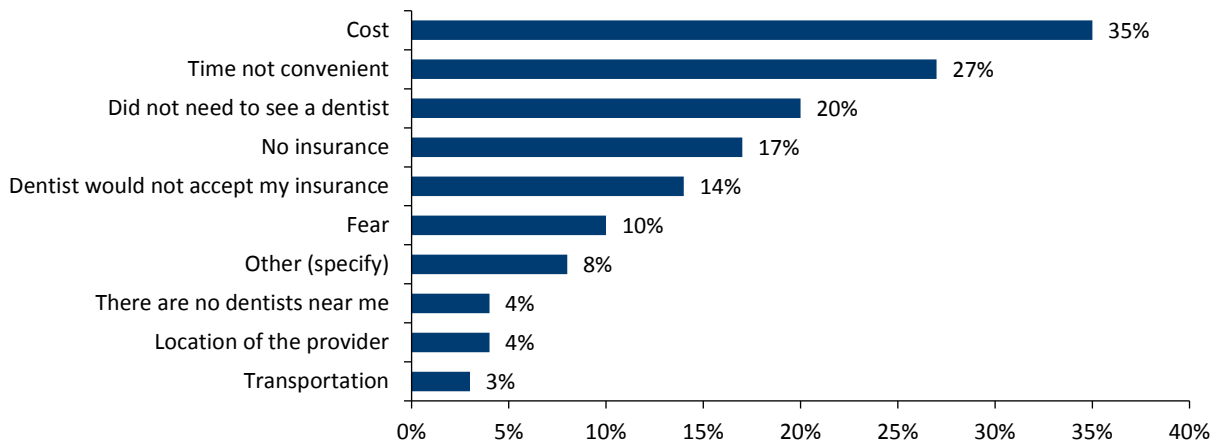
How long has it been since you visited a dentist?

Twenty-seven percent of survey participants have not visited a dentist in more than a year.



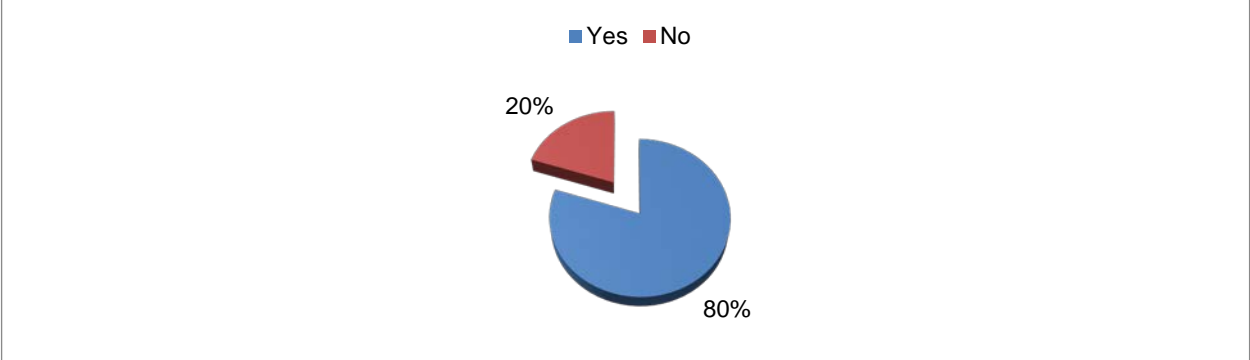
Barriers to visiting a dentist

Cost and convenient time are reported barriers to visiting a dentist.



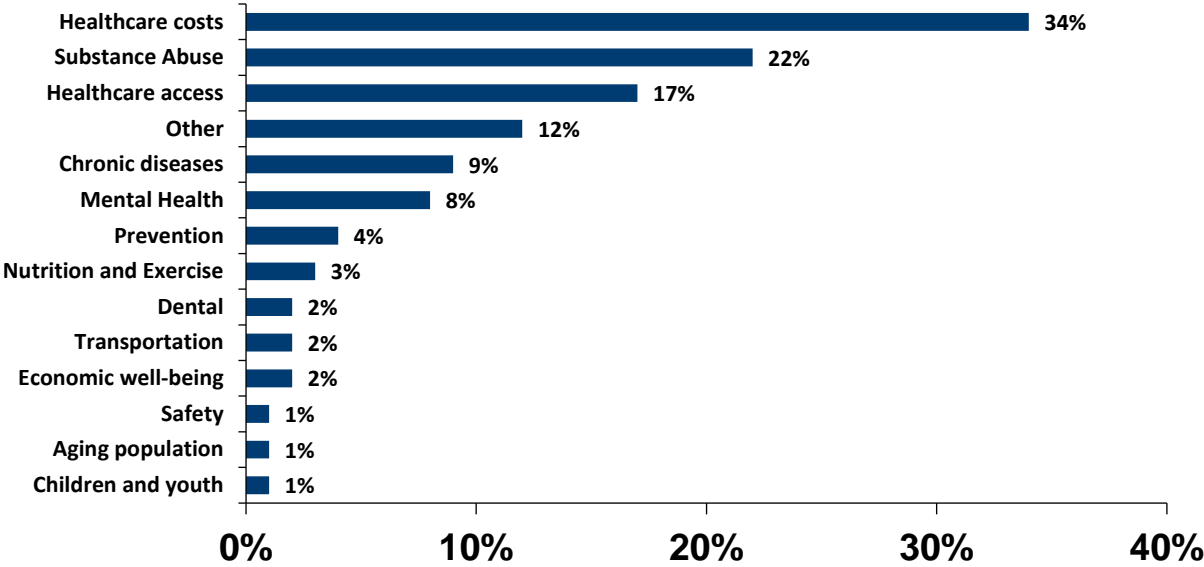
Do you have any type of dental insurance coverage?

Twenty percent of survey participant do not have dental insurance.



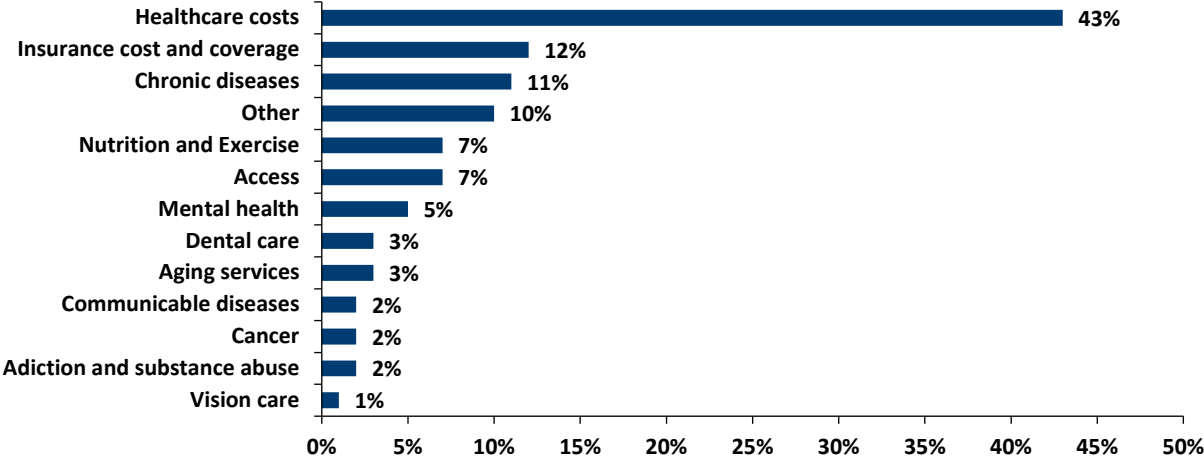
What are the most important community issues for you?

The cost of health care is a high concern for 34% of survey participants. Substance abuse is the second highest concern.



What are the most important community issues for your family?

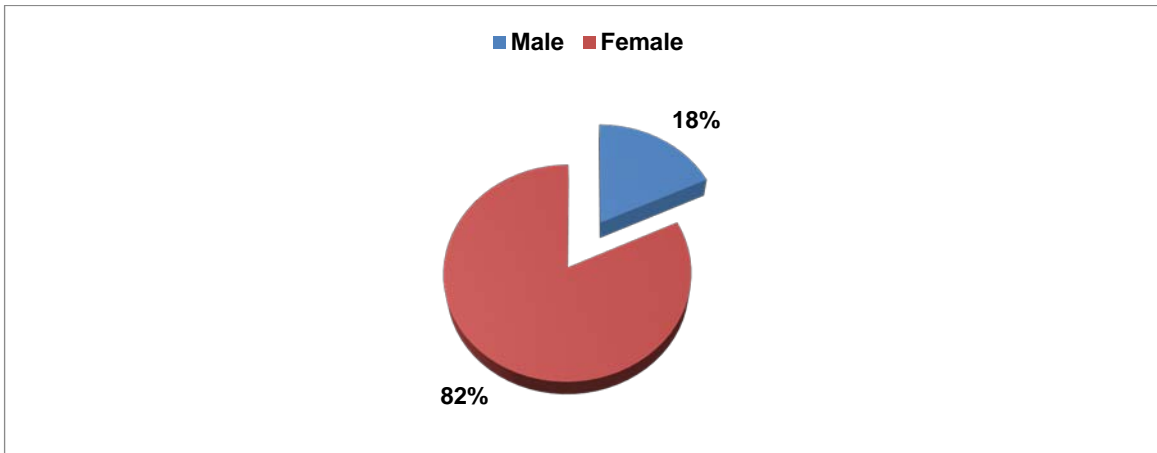
When asked what is the most important issue for the participant’s family, health care cost and insurance cost and coverage were the top concerns.



Demographic Information for Community Resident Participants

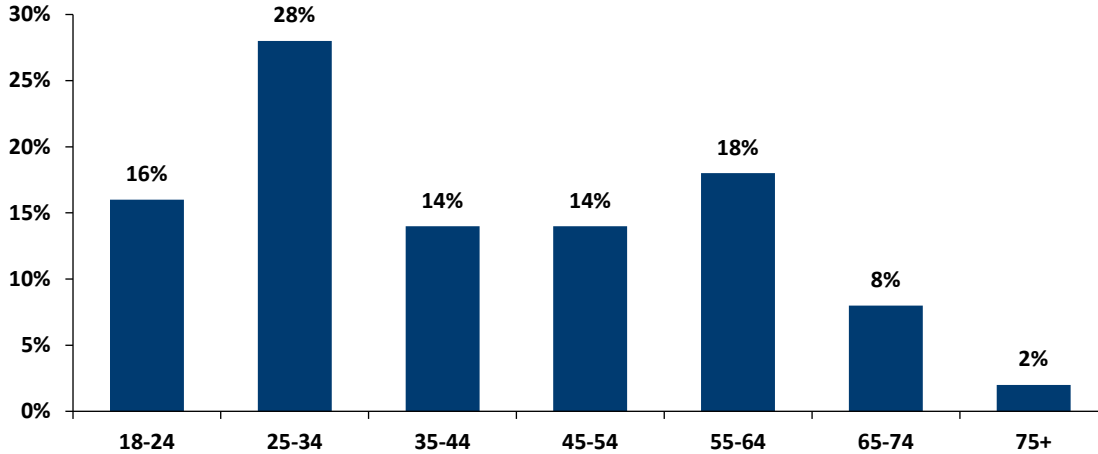
Biological Gender

Only 18% of the survey participants were male.

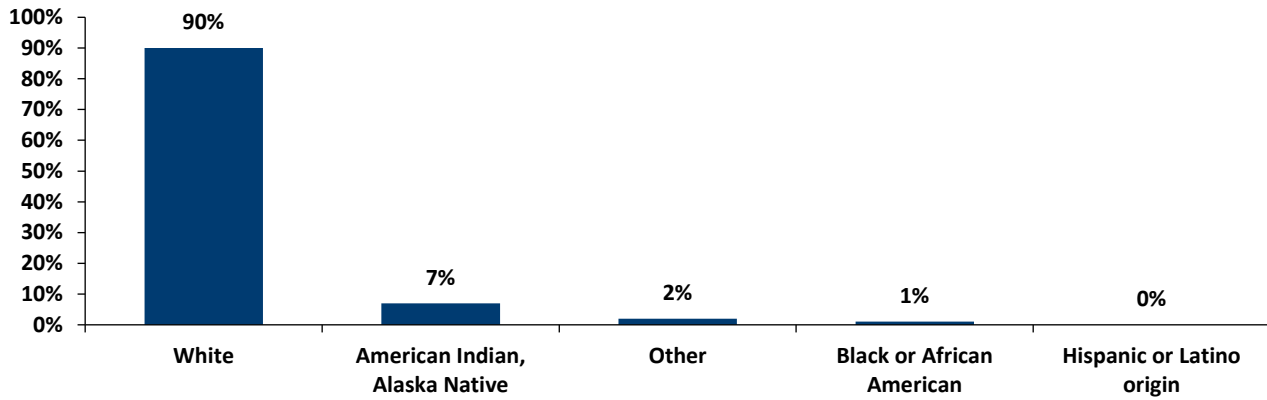


Age

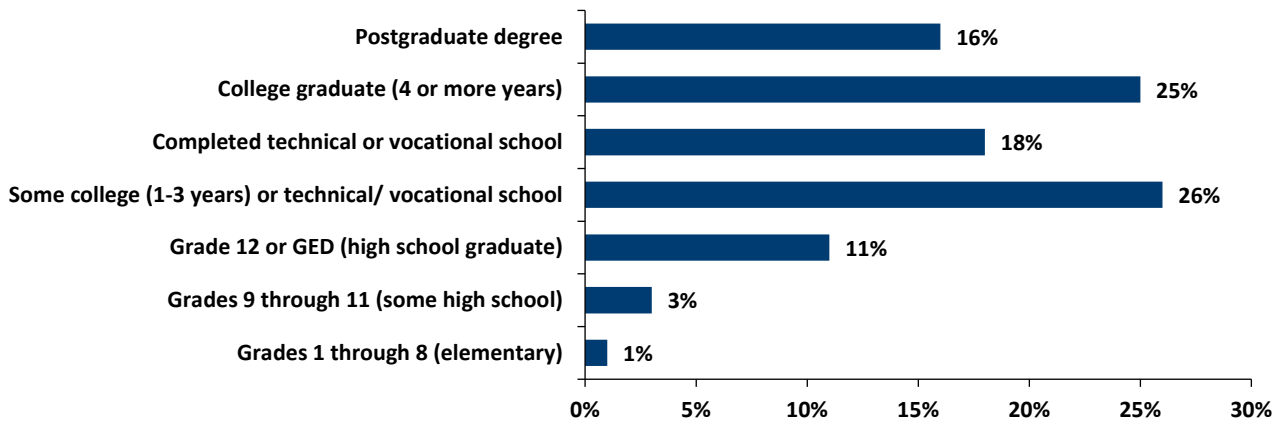
Every age group was represented among the survey participants; however, only 2% fell into the 75+ year age group.



Ethnicity

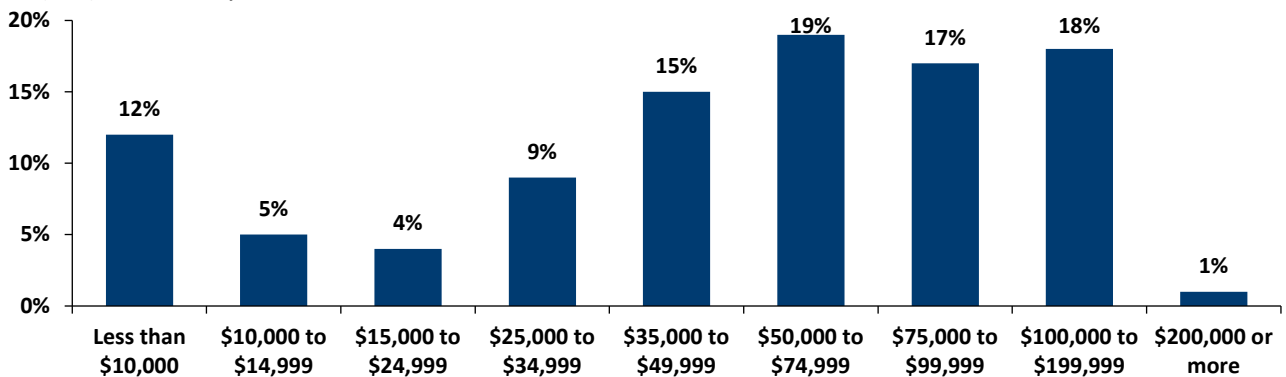


Education Level



Total Annual Household Income

Twenty-three percent of survey participants have an annual household income at or below the Federal Poverty Level (FPL) for a family of four.



Secondary Research Findings

Census Data

Population of Beltrami County, Minnesota	46,106
% below 18 years of age	25.3
% 65 and older	15.5
% White – non-Hispanic	72.6
American Indian	21.6
Hispanic	2.2
African American	0.7
Asian	0.7
% Female	50.2
% Rural	67.1

County Health Rankings

	Beltrami County	State of Minnesota	US top Performers
Adult smoking	20%	15%	14%
Adult obesity	30%	27%	26%
Physical inactivity	22%	20%	20%
Excessive drinking	23%	23%	13%
Alcohol related driving deaths	36%	30%	13%
Food insecurity	13%	10%	10%
Uninsured adults	10%	6%	7%
Uninsured children	5%	3%	3%
Children in poverty	25%	13%	12%
Children eligible for free or reduced lunch	59%	38%	33%
Diabetes monitoring	66%	88%	91%
Mammography screening	60%	65%	71%
Median household income	\$45,300	\$65,100	\$65,600

Health Needs and Community Resources Identified

The Internal Revenue Service requires that a community health needs assessment include an inventory of resources that are available to address the unmet needs. This document is referred to as an asset map. Sanford Health conducted asset mapping by reviewing the primary and secondary research and identifying the unmet needs from the various surveys and data sets. Each unmet need was researched to determine what resources are available in the community and county to address the needs. The asset map was reviewed by Sanford leadership and by community key stakeholders to validate the assets. The asset map helped to identify gaps in services. Once gaps were determined the key stakeholder group proceeded to the prioritization discussion and multi-voting exercise. The group was asked to prioritize the top two concerns that would be further developed into implementation strategies.

The process executed in the work was based on the McKnight Foundation model “Mapping Community Capacity” by John L. McKnight and John Kretzmann, Institute for Policy Research at Northwestern University.

The asset mapping process identified needs from the following:

- Key stakeholder survey
- Resident survey
- Facilitated discussion by the key stakeholders
- Secondary research
- Community resources that are available to address the needs

Please see the asset map in the Appendix.

Prioritization

A multi-voting methodology was implemented to determine what top priorities would be further developed into implementation strategies. Key community stakeholders met with medical center leaders to discuss community needs and complete the multi-voting exercise.

The following needs were brought forward for prioritization:

<p>Health Indicator/Concern</p> <p>Economic Well-Being</p> <ul style="list-style-type: none"> • Availability of affordable housing 4.16 • Homelessness 4.14 • Housing which accepts people with chemical dependency, mental health problems, criminal history or victims of domestic violence 4.07 • Skilled labor workforce 3.77 • 25% report that their food ran out before they had money to buy more
<p>Children and Youth</p> <ul style="list-style-type: none"> • Substance abuse by youth 4.28 • Teen suicide 4.00
<p>Aging Population</p> <ul style="list-style-type: none"> • Cost of long-term care 4.02
<p>Safety</p> <ul style="list-style-type: none"> • Abuse of prescription drugs 4.52 - 24% report that they have drugs in their home that they are not using • Child abuse and neglect 4.32 • Presence of street drugs 4.29 • Presence of drug dealers 4.16 • Criminal activity 4.11 • Domestic violence 4.05
<p>Healthcare Access</p> <ul style="list-style-type: none"> • Availability of mental health providers 4.36 • Availability of behavioral health 4.30 • Use of emergency room services for primary health care 4.00
<p>Mental Health and Substance Abuse</p> <ul style="list-style-type: none"> • Drug use and abuse 4.59 • Alcohol use and abuse 4.38 • 49% self-report that they binge drink at least 1X/month • 26% report that alcohol use has had a harmful effect on them or a family member in the past 2 years • Depression 4.09 - 48% report a diagnosis of depression • Suicide 4.07 • 54% report a diagnosis of anxiety/stress • 19% report that they currently smoke cigarettes
<p>Wellness</p> <ul style="list-style-type: none"> • 24% have not had a routine checkup in more than 1 year • 27% have not visited their dentist in more than 1 year • 24% report a diagnosis of hypertension • 24% report a diagnosis of high cholesterol • 20% report a diagnosis of asthma • 66% report that they are obese or overweight • 50% do not consume the recommended 5 or more of fruits/vegetables each day • 33% do not get moderate exercise at least 3X/week

Please see the multi-voting prioritization worksheet in the Appendix.

How Sanford is Addressing the Needs

Sanford is addressing all of the assessed needs that fall within our scope of work. In some cases, the need is one where we do not have the expertise to adequately address the need. However, Sanford leaders will communicate the findings to community experts and leaders.

Identified Concerns	How Sanford Bemidji is Addressing the Community Needs
ECONOMIC WELL BEING	
Availability of affordable housing	Sanford Bemidji sponsors nursing personnel to be on site in the recently built housing complex for the homeless and chronic inebriates.
Homelessness	Sanford is working with a community collaborative to identify housing project opportunities for low income and hard-to-house individuals and families
Housing which accepts people with chemical dependency, mental health problems, criminal history, or victims of domestic violence	Sanford is working with a community collaborative to identify housing project opportunities for low income and hard-to-house individuals and families. We are also underwriting the cost of nursing personnel in a recently built 60-unit housing complex for the homeless and chronic inebriates.
Skilled labor workforce	Sanford is working with the local university and technical college to support and sponsor health occupations.
Hunger	Sanford funds the “No Hungry Child” initiative and will provide support for the next 3 years to assure all children in the Bemidji schools have access to food, 7 days a week, 365 days of the year.
Household budgeting and money management	Sanford will share the concerns from the community stakeholder survey with the county social service agencies.
Maintaining livable and energy efficient homes	Sanford will share the concerns from the community stakeholder survey with the county social service agencies.
Food runs out before they have money to buy more – 25%	Sanford will share the concerns from the community stakeholder survey with the county social service agencies. Sanford is also funding the “No Hungry Child” Program.
TRANSPORTATION	
Availability of public transportation	Sanford will share these assessed needs with the leadership of the City of Bemidji. Sanford will not directly address the transportation needs because it is not our core business.
Availability of door-to-door transportation services for those unable to drive	Sanford will share these assessed needs with the leadership of the City of Bemidji. Sanford will not directly address the transportation needs because it is not our core business.
Cost of door-to-door transportation services for those unable to drive	Sanford will share these assessed needs with the leadership of the City of Bemidji. Sanford will not directly address the transportation needs because it is not our core business.
CHILDREN AND YOUTH	
Substance abuse by youth	Sanford Bemidji Behavioral Health operates a 24/7 emergency hotline and a crisis response team that can be dispatched, and the ER services these patients as well.
Teen suicide	Sanford Bemidji Behavioral Health operates a 24/7 emergency hotline and a crisis response team that can be dispatched, and the ER services these patients as well.
Availability of services for at-risk youth	Sanford Bemidji Behavioral Health operates a 24/7 emergency hotline and a crisis response team that can be dispatched.
Childhood obesity	Pediatricians address the issue of obesity with their patients, emphasizing exercise and diet and referrals to the Bemidji Boys and Girls Club.
Teen pregnancy	In addition to clinical services provided by Sanford Bemidji Medical Center, Beltrami Public Health provides children and teen services through 21 years of age. Referral can also be made to Planned Parenthood or other social service agencies.

Identified Concerns	How Sanford Bemidji is Addressing the Community Needs
Cost of quality child care	Sanford will share the concerns from the key stakeholder survey with county social service agencies and the Bemidji Boys and Girls Club.
Cost of services for at-risk youth	Sanford will share the concerns from the key stakeholder survey with county social service agencies and the Bemidji Boys and Girls Club.
School absenteeism	Sanford will share the concerns from the key stakeholder survey with county social service agencies and the Bemidji Boys and Girls Club.
School dropout rates	Sanford will address this concern by sharing the information with county social service agencies and area schools.
Crime committed by youth	Sanford will address this concern by sharing the information with county social service agencies and area law enforcement.
Teen tobacco use	Sanford offers patients of all ages access to stop smoking programs.
Bullying	Sanford will address this concern by sharing the information with county social service agencies and area schools.
Availability of quality child care	Sanford will address this concern by sharing the information with county social services.
Cost of activities (outside of school and sports) for children and youth	Sanford will address this concern by sharing the information with county social service agencies, the Bemidji Boys and Girls Club and area schools.
AGING POPULATION	
Cost of long term care	The cost of LTC will not be directly addressed by Sanford Health but these concerns will be shared with county social service agencies and state legislators.
Cost of memory care	The cost of memory care will not be directly addressed by Sanford Health but these concerns will be shared with county social service agencies and state legislators.
Availability of resources for grandparents caring for grandchildren	Issues of this nature will be referred to county social service agencies.
Cost of in-home services	The cost of services will not be directly addressed by Sanford Health but these concerns will be shared with county social service agencies and state legislators.
SAFETY	
Abuse of prescription drugs	Sanford has changed its prescription drug protocols and provider services for patients who are prescribed a narcotic for pain management.
Drugs in their home that are not being used - 24%	Drug drop boxes are available in our clinic and medications are labeled to recommend disposal.
Child abuse and neglect	Issues of this nature will be referred to county social service agencies.
Presence of street drugs	Issues of this nature will be referred to law enforcement agencies.
Presence of drug dealers	Issues of this nature will be referred to law enforcement agencies.
Criminal activity	Issues of this nature will be referred to law enforcement agencies.
Domestic violence	Issues of this nature will be referred to the NWMN Family Advocacy Center, law enforcement agencies and social service agencies.
Culture of excessive and binge drinking	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Sex trafficking	Issues of this nature will be referred to the NWMN Family Advocacy Center, law enforcement agencies and social service agencies.
Presence of gang activity	Issues of this nature will be referred to law enforcement agencies.
HEALTH CARE ACCESS	
Availability of mental health providers	Sanford is affiliated with the area mental health center and has added 15 additional mental health providers. We take all patients, regardless of their ability to pay.
Availability of behavioral health	Sanford is affiliated with the area mental health center and has added 15 additional mental health providers. We take all patients, regardless of their ability to pay.

Identified Concerns	How Sanford Bemidji is Addressing the Community Needs
Use of emergency room services for primary health care	Sanford has recently recruited 5 new PCPs, as well as extended hours of our Walk In clinic to 7 days a week/12 hours a day to offer options to ER visits. Sanford also provides a high-risk case manager in the ER referring patients to PCP practices.
Access to affordable health insurance coverage	Sanford offers all patients insurance enrollment assistance, including government programs.
Access to affordable health care	Sanford provides a Community Care Program for anyone who is unable to pay for care. We offer all patients insurance enrollment assistance, including government programs. We do not refuse care to anyone, regardless of the ability to pay.
Coordination of care between providers and services	Sanford has shared community-wide care management meetings, inclusive of county and other social service providers. Sanford's electronic health record system is available in read-only to all members of the care team, inside and outside our organization.
Access to affordable prescription drugs	Sanford has various drug subsidy programs that offer medication for discounts or free, based on ability to pay.
Availability of specialist physicians	Sanford added 15 additional physicians in the last year, including specialists in gastroenterology, pulmonary/critical care, psychology, and imaging cardiology.
Availability of non-traditional working hours	Sanford provides extended hours at our Walk In clinic 7 days a week 12 hours a day. Also have e-visit and video visit options on the Internet.
Timely access to medical care providers	Sanford recruited 5 new PCPs, as well as extended hours of the Walk In clinic to 7 days a week/12 hours a day to offer options to ER visits.
Access to affordable dental insurance coverage	Issues of this nature will be referred to the Northern Dental Access Clinic.
Access to affordable vision insurance coverage	Sanford offers all patients insurance enrollment assistance, including government programs.
Availability of health care services for Native people	Sanford offers all patients insurance enrollment assistance, including assistance with government programs. All insurances, including Indian Health, are accepted.
MENTAL HEALTH & SUBSTANCE ABUSE	
Drug use and abuse	Sanford is affiliated with the area mental health center and has added 15 additional mental health providers. We offer several outpatient chemical dependency treatment services, including expanding into a Suboxone Clinic. We accept all patients, regardless of their ability to pay, on a sliding fee schedule or at no fee. We will be opening a detox center in January 2019 and will be evaluating the feasibility of Inpatient chemical dependency treatment.
Alcohol use and abuse	Sanford is affiliated with the area mental health center and has added 15 additional mental health providers. We offer several outpatient chemical dependency treatment services, including expanding into a Suboxone Clinic. We accept all patients, regardless of their ability to pay, on a sliding fee schedule or at no fee. We will be opening a detox center in January 2019 and will be evaluating the feasibility of Inpatient chemical dependency treatment.
Binge drink at least 1 x/month – 49%	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Alcohol use has a harmful effect on them or a family member in the past 2 years 26%	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Depression	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Diagnosis of depression – 48%	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.

Identified Concerns	How Sanford Bemidji is Addressing the Community Needs
Suicide	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services
Stress	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Dementia & Alzheimer's Disease	Sanford offers a dementia unit within our senior services campus, as well as diagnosis and early treatment within our primary care clinics. On occasion, issues of this nature may be referred to the County social services.
Diagnosis of anxiety/stress – 54%	Sanford assesses all patients by their PCPS and Integrative Health Triage Therapists to provide early intervention and referral. Treatment services are also available within our Behavioral Health Services.
Currently smoke cigarettes – 19%	At Sanford, smoking is assessed by PCPs and programs are offered to stop smoking, including medication assisted withdrawal management.

Implementation Strategies

Implementation Strategies - 2018

Priority 1: Economic Well-Being

The Robert Wood Johnson Foundation's Commission to Build a Healthier America reports that good physical and mental health depends on having homes that are safe and free from physical hazards. Adequate housing should protect individuals and families from harmful exposures and provides them with a sense of privacy, security, stability, and control, and can make important contributions to health. In contrast, poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries, and poor childhood development. Sanford Health has made economic well-being a significant priority and has developed a strategic plan to work with community leaders to collaborate on housing and support services development.

Food security means access by all people at all times to enough food for an active, healthy life. Food insecurity describes a household's inability to provide enough food for every person to live an active, healthy life. According to United States Department of Agriculture, an estimated 12.3 percent of American households were food insecure at least some time during the year in 2016, meaning they lacked access to enough food for an active, healthy life for all household members. That is essentially unchanged from 12.7 percent in 2015. The prevalence of very low food security was also essentially unchanged, at 4.9 percent in 2016 and 5.0 percent in 2015. Sanford has made economic well-being a significant priority and has developed a strategic plan to reduce the number of people impacted by hunger.

The Council on Social Work Education reports that economic well-being may be achieved by individuals, families, and communities through public policies that ensure the ability to build financial knowledge and skills, access to safe and affordable financial products and economic resources, and opportunities for generating income and asset building. It occurs within a context of economic justice within which labor markets provide opportunities for secure full employment with adequate compensation and benefits for all. Sanford has made economic well-being a significant priority and has developed a strategic plan to provide workforce and skilled labor opportunities in the Bemidji area.

Priority 2: Mental Health/Behavioral Health and Substance Abuse

Mental health is important at every stage of life and affects how people think, feel, and act. According to the National Institute of Mental Health, depression is one of the most common mental disorders in the U.S. Current research suggests that depression is caused by a combination of genetic, biological, environmental, and psychological factors. Depression is among the most treatable of mental disorders.

Sanford has made mental health a significant priority and has developed strategies to reduce mortality and morbidity from mental health, behavioral health and substance abuse. It is Sanford's goal to reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness.

Sanford Bemidji 2018 Community Health Needs Assessment

Implementation Strategy Action Plan

Priority 1: Economic Well-Being

Projected Impact: Reduce the number of people impacted by hunger, unemployment, under-employment and homelessness

Goal 1: Work with community collaborative on housing and support service development

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Participate in Beltrami County Collaborative focused on housing and support services in our region	Development of new housing units for low income, homeless and hard-to-house (felons, etc.) in 2020	Leadership time and supportive services such as case management and nursing	Joy Johnson	Group of 15 community partners meeting monthly to identify housing priorities and opportunities
Work with HRDC to develop business model for project	Develop project concepts in 2018	Leadership time	Joy Johnson	Partnership with local housing authority and county
Provide grant writing and project management assistance to secure funding for projects	A grant is submitted for community housing	Grants department, finance department and leadership resources	Joy Johnson	

Goal 2: Assure children and youth have access to healthy food

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Work with area public schools to expand meal programs to include all schools and to offer year-round meal options	School meal program is available year round	Funding expected to be \$70,000/year	Lindsey Wangberg	Private/public partnership to enhance community wellness and health
Collaborate with United Way to grow Back Pack Buddies programs to impact all schools at all levels	# of backpacks provided to area schools in 2019, 2020, 2021	Funding expected to be \$70,000/year	Lindsey Wangberg	
Continue to work with schools and other community organizations to expand food and meal programs to assure children and youth have year-round access to meals	# of community partners collaborating to support year-round access to meals in 2019, 2020, 2021		Lindsey Wangberg	

Goal 3: Work collaboratively with community resources on economic development opportunities for the region

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Engage with Greater Bemidji, Visit Bemidji, Bemidji Chamber of Commerce and other community groups to solicit and engage potential employers in considering Bemidji for expansion	# of new businesses relocated to Bemidji in 2019, 2020, 2021	Membership fees and leadership time and resources	Bryan Nermoe	Sanford has representation in community entities to facilitate and encourage this effort
Host potential new businesses and present health care opportunities and benefits of relocating to Bemidji	# of businesses and individuals attending	Leadership time and resources	Bryan Nermoe	
Actively participate in events and celebrations that raise awareness of Bemidji and the region	# of events in 2019, 2020, 2021	Sponsorship costs of community events such as Marathon, Dragon Boats, Hockey Day in MN, etc.	Bryan Nermoe	

Priority 2: Mental Health and Substance Abuse

Projected Impact: Reduce the number of individuals whose overall well-being is negatively impacted by addiction and mental illness

Goal 1: Open a residential crisis center for the provision of mental health and detoxification treatment.

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Remodel existing building	Complete construction by 2/2019	Building value and remodel costs \$2 million	Paul Nistler Joy Johnson	Building donated by PMAP insurer PrimeWest and owned by County. Leased to us for \$1.
Hire staff, develop policies and license programs	Complete by 2/2019	Total of 25 FTEs	Paul Nistler Joy Johnson	Work collaboratively with community partners on hiring and onboarding
Open IRTS, RCS and Detox programs	Complete by 3/2019	14 total beds	Paul Nistler Joy Johnson	

Goal 2: Expand Medication Assisted Therapy and associated chemical dependency treatment programs to serve adults

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Add physicians certified to oversee MAT patients	# of providers certified	Recruitment expenses, relocation and salaries estimated at \$400,000	Drs. Colleen Swank and Sarah Weinzierl	Limit to number of patients each provider can supervise. Need more MDs willing to be part.
Expand treatment capacity and co-locate with MAT Clinic	# of patients	LADC hiring and time allocation	Paul Nistler	
Hire nursing and support staff	# of hires	Implement staffing and other support systems needed to deliver MAT and treatment at 1611 Clinic site	Paul Nistler	

Goal 3: Recruit additional behavioral health treatment practitioners, including psychiatry, psychology and psychiatric nurse practitioners

Actions/Tactics	Measurable Outcomes and Timeline	Dedicated Resources/Budget/Resource Assumptions	Leadership	Note any community partnerships and collaborations - if applicable
Identify BH candidates, including psychiatry, psychology, Psych NP, etc.	# recruited	Hire sourcing agencies, travel to conferences and recruiter time commitment	Colleen Swank, Brian Mathews	
Coordinate site visits, interviews and follow-up with potential candidates	# of interviews	Recruiter, service line leaders, senior leaders	Colleen Swank, Brian Mathews	
Develop contracts, negotiate and transition new providers to Bemidji locations	# of new hires	Recruitment expenses, physician relocations and salaries estimated at \$400,000/psychiatrist	Colleen Swank, Sarah Weinzeirl	

Demonstrating Impact – 2016 Strategies

Priority 1: Mental Health/Behavioral Health

Mental health includes emotional, psychological, and social well-being. It affects how people think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

Many factors contribute to mental health problems, including:

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse
- Family history of mental health problems

Mental health problems are common but people with mental health problems can get better and many recover completely.

Sanford has prioritized mental/behavioral health as a top priority and has created strategies to reduce mortality and morbidity from chemical addiction and mental illness, recruit additional psychiatry/psychology providers for the ambulatory care setting, and enhance the level of behavioral health services that are available to patients in the hospital setting.

Priority 2: Children and Youth

According to the American Congress of Obstetricians and Gynecologists, pregnant teens are at higher risk of certain health problems (such as high blood pressure or anemia) than pregnant women who are older. Pregnant teens are more likely to go into labor too early. This is called *preterm* birth. These risks are even greater for teens who are younger than 15 years or for those who do not get prenatal care. Teen pregnancies carry extra health risks to both the mother and the baby. Often, teens don't get prenatal care soon enough, which can lead to problems later on. They have a higher risk for pregnancy-related high blood pressure and its complications. Risks for the baby include premature birth and a low birth weight.

Sanford has prioritized children and youth as a top priority and has set strategy to improve the health of newborns and young children, and to enhance the level of care that is available for high-risk infants.

Additionally, Sanford *fit* is an online community health activation initiative created by Sanford Health that provides engaging programs and resources to kids, families, leaders and role models across numerous settings to promote and activate healthy choices. The four key factors of healthy choices, a healthy body and healthy life included in *fit* are, MOOD – Emotions and Attitudes, RECHARGE – Sleep and Relaxation, FOOD – Mindful Nutrition Choices, and MOVE – Physical Activity Levels.

Sanford *fit* programs and resources have been enhanced for a number of settings to captivate, educate and activate leaders, influencers and kids to understand what healthy choices are, what they can do and to encourage them to put them in practice. These programs and resources are created for schools, daycares, after-school programs, home, community events, on the go and more. For more information visit www.Sanfordfit.org

Implementation Strategy for Sanford Bemidji Medical Center FY 2017-2019 Action Plan

Priority 1: Behavioral Health

Projected Impact: Reduce mortality and morbidity from chemical addiction and mental health disease

Goal 1: Participate in the planning for development of a community-based continuum of behavioral health services

Actions/Tactics	Measureable Outcomes	Dedicated Resources	Leadership	Note any community partnerships and collaborations (if applicable)
A community partnership is developed for the purpose of planning a no wrong door approach to community behavioral health services	A process is developed for referrals to behavioral health services	ER Case Manager, High-Risk Case Manager, Peer Support Advocate, Behavioral Health Triage Therapist	Joy Johnson	Upper Mississippi Mental Health Center, Beltrami County Health and Human Services
Gaps are being identified in the continuum of behavioral health services in the region	Existence of a broad scope of outpatient residential and acute behavioral health services for individuals at various stages of mental illness		Joy Johnson	Upper Mississippi MHC, Sanford TRF Behavioral Health, Beltrami County

Goal 2: Offer psychiatry and psychology services in the ambulatory setting

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Note any community partnerships - if applicable
Recruit additional providers to Sanford Bemidji Clinic	Number of added providers	Celia Beck, Bill Stoner	Bill Stoner	Work with existing community providers, CBHH and Horizon Health
Expand availability to tele-psychiatry within the hospital and clinic	Additional hours of psychiatry coverage for mental health patients	Psychiatrist	Joy Johnson	Sanford Thief River Falls Behavioral Health

Goal 3: Enhance the level of behavioral health services available to patients hospitalized at SBMC

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Note any community partnerships and collaborations - if applicable
Hire or contract behavioral health experts to provide early assessment	Early diagnosis and initiation of treatment and transfer	Assessment resources	Joy Johnson	

Priority 2: Children and Youth

Projected Impact: Improved health of newborns and young children

Goal 1: Reduce the number of infants born addicted to opioids

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Note any community partnerships and collaborations - if applicable
Develop case management resources to work with women who are pregnant or at risk of pregnancy and are opioid users	Women assigned a case manager	Prime West grant	Lisa Johnson	Work with County and tribes
Coordinate MAT options available for pregnant women	Pregnant women receiving MAT	Community CD providers	Lisa Johnson	Working with Upper Mississippi Mental Health Center on chemical dependency program development

Goal 2: Enhance the level of care available for high-risk infants born in Sanford Bemidji Medical Center

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Note any community partnerships and collaborations - if applicable
Develop gap analysis for establishing a Level II NICU	Completed analysis	Staff time	OB/peds manager & pediatricians	
Educate staff to assure clinical competency for Level II care	Hours of training provided	Staff time	OB/peds manager pediatricians	
Develop other support services needed to obtain Level II NICU	Availability of support programs such as therapies, nutrition, ventilator management, etc.	Capital and staff time	OB/peds manager, pharmacy, therapy	

Goal 3: Improve the availability for programs for youth across the community

Actions/Tactics	Measureable Outcomes	Resources	Leadership	Note any community partnerships and collaborations - if applicable
Provide Sanford <i>fit</i> program to the local schools and communicate the sanfordfit.org website broadly to patients and community groups	Sanford <i>fit</i> is available to all students and families in the area through classroom and <i>fit</i> website	Sanford <i>fit</i> leadership	Sanford leaders	Local schools - Classroom teachers Child care leaders

Community Feedback from the 2016 Community Health Needs Assessment

Sanford Health is prepared to accept feedback on the 2016 Community Health Needs Assessment and has provided online comment fields on our website for ease of access. There have been no comments or questions about the Sanford Bemidji Medical Center's CHNA.

Appendix

Primary Research

Asset Map

Bemidji Asset Map

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
<p>Economic Well Being</p>	<p>Availability of affordable housing 4.16</p> <p>Homelessness 4.14</p> <p>Housing which accepts people with chemical dependency, mental health problems, criminal history, or victims of domestic violence 4.07</p>	<p>25% report that their food ran out before they had money to buy more</p>	<p>25% of children live in poverty</p> <p>*</p>	<p>Housing resources:</p> <ul style="list-style-type: none"> • Northwoods Rentals, 481 Mag 7 Ct. SW, Bemidji • Bi-County Community Action Program, 6603 Bemidji Ave. N., Bemidji • Housing & Redevelopment Authority, 619 American Ave. NW, Bemidji • Headwaters Housing Development Corp., Paul Bunyan State Trail, Bemidji • Crown Property Management, 258 Anne St. NW, Bemidji • Property Professionals, 602 Beltrami Ave. NW, Bemidji • Bemidji Management, 218-751-6881 • Vision Properties Mgmt., 1421 Bemidji Ave. N., Bemidji • Bridges Housing Program, 619 America Ave. NW, Bemidji • ARC United Housing Access Services, 651-604-8045 <p>Low Income Housing resources:</p> <ul style="list-style-type: none"> • Bi-County Community Action Program (rent assistance), 6603 Bemidji Ave. N., Bemidji • Bemidji Churches United (provides financial assistant to low income residents looking for housing), 414 Lincoln Ave. SE, Bemidji • Delton Manor Apts., 1903 Delton Ave. NW, Bemidji • Red Pine Estates, 2590 Ridgeway Ave. NW, Bemidji • Baker Housing, 803 Dewey Ave., Bemidji • Pine Tree Estates, 721 – 15th St. NW, Bemidji • Regency Park South, 1228 – 30th St. NW, Bemidji • Regency Park Apts., 1410 – 30th St. NW, Bemidji • Pine Ridge, 2925 Pine Ridge Ave. NW, Bemidji • Northview Manor, 1805 – 30th St. NW, Bemidji • Windsong, 1000 Anne St. NW, Bemidji • Nymore, 1500 Roosevelt Rd. SE, Bemidji • Northland, 619 America Ave. NW, Bemidji • Sprucewoods, 718 – 15th St. NW, Bemidji • Minnesota Apts., 2513 MN Ave. NW, Bemidji • Bristlecone Apts., 2510 Irvine Ave. NW, Bemidji • Northern Star, 800 – 26th St. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Kestrel Pine, 906 – 26th St. NW, Bemidji • Carter Place, 918 Carter Cir. SE, Bemidji • Colony Park, 2815 Ridgeway Ave. NW, Bemidji • Ridgeway Court 3, 910 – 30th St. NW, Bemidji • Ridgeway Apts., 2938 Ridgeway Ave. NW, Bemidji • Conifer West Apts., 2215 Conifer Ave. NW, Bemidji • Timber Ridge Apts., 2215 Conifer Ave. NW, Bemidji • Gatewood Park, 1220 – 30th St. NW, Bemidji • Presidential Estates, 519 Anne St. NW, Bemidji • Odayin House, 3524 St. Onge Dr. NE, Bemidji • Whispering Meadows, 3813 Whispering Meadows Ct. NW, Bemidji <p>Homelessness/Poverty resources:</p> <ul style="list-style-type: none"> • Beltrami Co. Public Health, 701 MN Avenue NW, Bemidji • Beltrami Co. Health & Human Services (emergency general assistance), 616 America Ave. NW, Bemidji • Bi-county Community Action Program, PO Box 579, Bemidji • Bridges Housing Program, 619 America Ave. NW, Bemidji • ARC United Housing Access Services, 651-604-8045 • Habitat for Humanity, 1357 Exchange Ave. SE, Bemidji • House of Hospitality/Village of Hope homeless shelter, 525 Miss. Ave. NW, Bemidji • Bemidji Soup Kitchen, PO Box 1584, Bemidji • Food Shelf, 1260 Industrial Park Dr. S., Bemidji • Community Garden Plots, 1351 – 5th St. NW, Bemidji (3 locations) • Evergreen Youth Services, 610 Patriot Dr. NW, Bemidji • MAC (Mothers & Children), 218-333-6856 • SNAP & WIC programs, 616 America Ave. NW, Bemidji • Thrift Stores: <ul style="list-style-type: none"> ○ Goodwill, 407 Beltrami Ave. NW, Bemidji ○ ARC, 1812 MN Court NW, Bemidji ○ St. Philip’s Clothing Depot, 720 Beltrami Ave. NW, Bemidji ○ Twice But Nice, 411 Beltrami Ave. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ TK’s Closet, 217 – 3rd St. NW, Bemidji ○ Urban Treasures, 108 – 3rd St. NW, Bemidji ○ Value Smart, 144 Peaceful Meadow Lane, Bemidji ○ My Best Friend’s Closet, 209 Beltrami Ave. NW, Bemidji ○ Seventh Day Adventist Clothing Center, 810 – 15th St. NW, Bemidji ○ American Red Cross, 1900 Division St. W., Bemidji ○ Restore, 1357 Exchange Ave. SE, Bemidji <p>Employment resources:</p> <ul style="list-style-type: none"> ● Beltrami Co. Health & Human Services (employment counseling, job training), 616 America Ave. NW, Bemidji ● MN WorkForce Center, 616 America Ave. NW, Bemidji ● Experience Works, 309 America Ave. NW, Bemidji ● Northwest Indian Community Development Center, 1819 Bemidji Ave. N., Bemidji ● Occupational Development Center 1219 Naylor Dr. SE, Bemidji ● Search Resources, 1710 Paul Bunyan Dr. NW, Bemidji ● Always There Staffing, 2522 Hannah Ave. NW, Bemidji ● Doherty Staffing, 1008 Paul Bunyan Dr. NW, Bemidji <p>Major employers:</p> <ul style="list-style-type: none"> ● Sanford Heath, 1233 – 34th St. NW, Bemidji ● Bemidji Public Schools, 3300 Gillett Dr. NW, Bemidji ● Bemidji State University, 1500 Birchmont Dr. NE, Bemidji ● Beltrami Co., 701 Minn. Ave. NW, Bemidji ● Anderson Fabrics, 348 Summit Ave. W., Bemidji ● Knife River Materials, 4101 Bemidji Ave. N., Bemidji ● Nortech Systems, Inc., 4050 Norris Ct. NW, Bemidji ● Norboard Minnesota, 4409 Northwood Rd. NW, Solway ● Paul Bunyan Communications, 1831 Anne St. NW, Bemidji ● Potlatch, 50518 Co. Hwy 45, Bemidji ● City of Bemidji, 317 – 4th St. NW, Bemidji ● Synergy Solutions, 1018 Industrial Park Dr. SE, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<p>Hunger/Food resources:</p> <ul style="list-style-type: none"> • Bemidji Soup Kitchen, PO Box 1584, Bemidji • Food Shelf, 1260 Industrial Park Dr. S., Bemidji • MAC (Mothers & Children), 218-333-6856 • SNAP & WIC programs, 616 America Ave. NW, Bemidji • Meals on Wheels, 1270 Neilson Ave. SE, Bemidji • Senior Meals, (Senior Center), 216 – 3rd St. NW, Bemidji • Grocery Stores: <ul style="list-style-type: none"> ○ Lueken’s Village Foods South, 609 Washington Ave. S., Bemidji ○ Lueken’s Village Foods North, 1171 Paul Bunyan Dr. NW, Bemidji ○ Harmony Natural Foods Co-op, 302 Irvine Ave. NW, Bemidji ○ Marketplace Foods, 2000 Paul Bunyan Dr. NW, Bemidji ○ Johanneson’s, Inc., 2301 Johanneson Dr. NW, Bemidji ○ Nymore food Mart, 609 – 4th St. SE, Bemidji ○ Stittsworth Meats, 722 Paul Bunyan Dr. NW, Bemidji ○ Pete’s Place, 7189 Pete Lane NW, Bemidji • Bemidji Natural Choice Farmers Market, 2nd St. & Beltrami, Bemidji • Bemidji Area Farmers Market, held at Subway Parking lot along the lakefront, Bemidji • Community Garden Plots, 1351 – 5th St. NW, Bemidji (3 locations) • CSAs that serve Bemidji: <ul style="list-style-type: none"> ○ Lone Rock Farms, 5143 – 15th St. NW, Bemidji ○ Northern Light Farm, 2048 Agate Lane NW, Solway ○ Farmucopia, pick up at 303 Railroad St., Bemidji ○ Today’s Food, Inc., Co. Rd. 38, Benedict ○ TJL Farm, 27081 Lower Rice Lake Rd., Bagley <p>Household budgeting/money management resources:</p> <ul style="list-style-type: none"> • Beltrami Co. Extension (classes in budgeting, etc.), 7223 Frontage Rd. NW, Bemidji • Bemidji Community Education, 1420 Beltrami Ave. NW, Bemidji • First National Bank, 1600 Paul Bunyan Dr. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • First National Bank, 429 MN Avenue NW, Bemidji • Security Bank, 1025 Paul Bunyan Drive NW, Bemidji 	
Transportation	<p>Availability of public transportation 3.83</p> <p>Availability of door-to-door transportation services for those unable to drive 3.82</p> <p>Cost of door-to-door transportation services for those unable to drive 3.56</p>		17% have a long commute to work	<p>Transportation resources:</p> <ul style="list-style-type: none"> • Bemidji Bus Lines, 1507 Naylor Dr. SE, Bemidji • Bemidji Cab, 919 – 15th St. NW, Bemidji • First City Taxi, 623 – 22nd St. NW, Bemidji • Living at Home Caregivers, PO Box 465, Park Rapids • Bemidji Medi-Van, 900 Longview Dr., Detroit Lakes • Rental cars – Enterprise, National, Avis, Hertz – 3824 Moberg Dr. NW, Bemidji • North Air Care, 4405 Hangar Dr. NW, Bemidji • Paul Bunyan Transit (city bus), 706 S. Railroad St. SE, Bemidji • Northwoods Interfaith Caregivers, 616 America Ave. NW, Bemidji • Touching Hearts at Home, 615 Anne St. NW, Bemidji • Soaring Eagles Transportation, 2406 Tracy Ct. NW, Bemidji • Sparrow Transport Services, 50334 – 279th Ave., Bemidji • Bemidji Ambulance, 512 Kay Ave. SE, Bemidji 	
Children and Youth	<p>Substance abuse by youth 4.28</p> <p>Teen suicide 4.00</p> <p>Availability of services for at-risk youth 3.84</p> <p>Childhood obesity 3.83</p> <p>Teen pregnancy 3.79</p> <p>Cost of quality child care 3.77</p> <p>Cost of services for at-risk youth 3.74</p> <p>School absenteeism 3.73</p> <p>School dropout rates 3.71</p> <p>Crime committed by youth 3.61</p>		39 teen births (2018 report)	<p>Substance Abuse resources:</p> <ul style="list-style-type: none"> • Bemidji Area Program for Recovery, 403 – 4th St. NW, Bemidji • Lake Region Chem. Dependency, 1510 Bemidji Ave. N., Bemidji • AA program, 218-536-9008 • NA program, 2508 Wash. Ave. SE, Bemidji • Oshki Manidoo Center, 1741 – 15th St. NW, Bemidji • Restore House, 1001 Mississippi Ave. NW, Bemidji • Face It Together, 408 Beltrami Ave. NW, Bemidji • Alano Club, 3802 Greenleaf Ave. NW, Bemidji • Park Place (housing for those with substance abuse/mental health issues), 600 – 3rd St. NW, Bemidji <p>Suicide resources:</p> <ul style="list-style-type: none"> • Sanford Behavioral Health, 116 – 3rd St. NW & 722 – 15 St. NW, Bemidji • Sanford Mental Health Access Clinic (walk in), 1233 – 34th St. NW, Bemidji • Hope House Community Support Program, 2014 – 7th St. SE, Bemidji • Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
	<p>Teen tobacco use 3.60</p> <p>Bullying 3.57</p> <p>Availability of quality child care 3.56</p> <p>Cost of activities (outside of school & sports) for children and youth 3.55</p>			<ul style="list-style-type: none"> • Beltrami Co. Health & Human Services, 616 America Ave. NW, Bemidji • BSU Counseling (for enrolled students), 1500 Birchmont Dr. NE, Bemidji • Bridges Housing Program for people with mental illness – 641-602-1880 • Center for Psychiatric Care, 519 Anne St. NW, Bemidji • Community Behavioral Health Hospital, 800 Bemidji Ave. N., Bemidji • 24-Hr. Crisis Line – 800-422-0045 • Evergreen Youth & Family Services, 610 Patriot Dr. NW, Bemidji • Evergreen Crisis Shelter, 622 Mississippi Ave. NW, Bemidji • Great River Psychological Services, 403 – 4th St. NW, Bemidji • Integrative Health & Wellness, 819 Paul Bunyan Dr. SE, Bemidji • Journey, 1630 Forest Lane SE, Bemidji • National Alliance for Mental Illness (monthly mtgs.), meets at 509 America Ave. NW, Bemidji • Nightlights Family Support Group, 702 Beltrami Ave. NW, Bemidji • Northern Psychological Services, 404 – 4th St. NW, Bemidji • North Homes Children & Family Services, 4225 Technology Dr. NW, Bemidji • Region II Mental Health Initiative (monthly mtgs.) – 213-333-4196 • Stellher (outpatient therapy), 519 Anne St. NW, Bemidji • Stellher Children’s Crisis Line – 800-422-0045 • Tamara Mason (outpatient therapy), 522 Beltrami Ave NW, Bemidji • Veteran’s Support Group, 705 – 5th St. NW, Bemidji • Wellness in the Woods, 25362 – 230th St., Verndale • Wildgren, Wilimek & Assoc., 1526 – 30th St. NW, Bemidji • Woodvale Psychological Services, 403 – 4th St. NW, Bemidji • Keeping Our Children Safe suicide prevention program, 403 – 4th St. NW, Bemidji • Yellow Ribbon suicide prevention hotline – 800-865-0606 • Native Youth Crisis Hotline – 877-209-1266 • Foster care beds for adults in crisis: <ul style="list-style-type: none"> ○ Spruce Woods Apts., 718 – 15th St. NW, Bemidji ○ MSOCS, 810 Clausen Ave. SW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ Cardinal of MN, 714 Lake Ave. SE, Bemidji ○ Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji <p>Resources for At-Risk youth:</p> <ul style="list-style-type: none"> ● Evergreen Kinship North, 610 Patriot Dr. NW, Bemidji ● Evergreen Youth Crisis Center, 622 Mississippi Ave. NW, Bemidji ● Timber Bay House, 234 Gerald Lane NW, Bemidji ● Stellher Children’s Crisis Line – 800-422-0045 ● Keeping Our Children Safe suicide prevention program, 403 – 4th St. NW, Bemidji ● Native American Youth Hotline – 877-273-8255 ● Native Youth Crisis Hotline – 877-209-1266 <p>Teen Pregnancy resources:</p> <ul style="list-style-type: none"> ● Birthright, 1510 Bemidji Ave. N., Bemidji ● Evergreen Youth & Family Services, 610 Patriot Dr. NW, Bemidji ● Northwoods Pregnancy Care Center, 609 Bemidji Ave. N., Bemidji ● Sanford Health Clinic, 1233 – 34th St. NW, Bemidji ● Evergreen Young Parents, 610 Patriot Dr. NW, Bemidji <p>Childhood Obesity resources:</p> <ul style="list-style-type: none"> ● Sanford Clinic, 1233 – 34th St. NW, Bemidji ● Sanford dietitians, 1233 – 34th St. NW, Bemidji ● Sanford fit http://www.sanfordfit.org/ ● Beltrami Co. Public Health, 701 Minn. Ave. NW, Bemidji ● Bemidji Parks & Recreation Dept., 423 Wilson Ave. SE, Bemidji (parks, playgrounds & organized summer activities) <p>Child Care resources:</p> <ul style="list-style-type: none"> ● Beltrami Co. Child Care Assistance Program, 616 America Ave. NW, Bemidji ● Bi-County Head Start, 2529 – 15th St. NW, Bemidji ● Leech Lake Head Start, 705 – 5th St. NW, Bemidji <p>Preschools:</p> <ul style="list-style-type: none"> ○ TLC Preschool, 1141 – 13th Ave. E., Bemidji ○ Calvary Lutheran Preschool, 2508 Wash. Ave. SE, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ First Lutheran Preschool, 900 Bemidji Ave. N., Bemidji ○ Heartland Christian Academy Preschool, 9914 Heartland Cir. NW, Bemidji ○ Apple Tree Preschool, 117 Main Ave. E., Bemidji • Daycare Centers: <ul style="list-style-type: none"> ○ Little Rascals Daycare, 127 – 23rd St. NE, Bemidji ○ Bethel Child Care Center, 5232 Irvine Ave. NW, Bemidji ○ Kandi Land Learning Academy, 928 Wash. Ave. S., Bemidji ○ Beginnings, 521 – 32nd Ave. W., Bemidji ○ Sunny Days, 1330 Augusta Dr. NE, Bemidji ○ Growing Tree Daycare, 123 – 29th St. NE, Bemidji ○ Apple Blossom Childcare, 924 Beltrami Ave. NE, Bemidji ○ Tender Hearts, 824 Roosevelt Rd. SE, Bemidji ○ Gym Bin, 928 Washington Ave. S., Bemidji ○ Oak Hills Daycare, 1600 Oak Hills Rd SW, Bemidji ○ Adventures in Fun, 2415 Pearl Dr. NE, Bemidji ○ Kim’s Kids, 3330 Jackson Ave. SW, Bemidji ○ Tot Stop, 29345 US 2, Bemidji • In-Home Group Daycares: <ul style="list-style-type: none"> ○ Kids Clubhouse, 20th St., Bemidji ○ Wendy Tisdell, 821 – 3rd St. SE, Bemidji ○ Connie’s Little Tykes, 47093 – 229th Ave., Bemidji ○ Marilyn Geller & Angie Anderson, Beltrami Ave. NW, Bemidji ○ Shannon Anderson & Coralee Meyers, Irvine Ave. NW, Bemidji ○ Debbie Ammonson, Grant Valley Rd. NW, Bemidji ○ Monica Arel, Last Road NW, Bemidji ○ Stacy Black, Spencer Rd. NW, Bemidji ○ Susan Bushman & Jessica Johnson, Irvine Ave. NW, Bemidji ○ Linda Caron, Pine Crest Court NW, Bemidji ○ Kimberly Christofferson, Augusta Dr. NW, Bemidji ○ Melinda Delaney, 179th Ave., Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ Nicole DuBois, 4964 Grant Valley Rd. NW, Bemidji ○ Penny Evans, Chad Dr. NW, Bemidji ○ Dana Fenske, Madison Ave. SW, Bemidji ○ Misty Fischer, Majestic Pines LN NW, Bemidji ○ Jeri Francis, Carr Lk. Rd. SW, Bemidi ○ Connie Fredrickson, Pine Grove St. SW, Bemidji ○ Misty Giffen, Jackpine Rd. NW, Bemidji ○ Sheila Hall, Park Ave. NW, Bemidji ○ Shawna Hanks, 5th St. SE, Bemidji ○ Lora Hendricks, Monroe Ave. SW, Bemidji ○ Sheila M. Hirt, Kay Ave. SW, Bemidji ○ Rachelle Houle, Bixby Ave. NE, Bemidji ○ Gwenn Hovestol, Oak Hills Rd. SW, Bemidji ○ Ilene Jacobson, Wild Plum LN NE, Bemidji ○ Amy Jensen, Valley View Dr., NE, Bemidji ○ Nichole Kelsey, 16th St. SW, Bemidji ○ Kayla Koenig, 2nd St. SE, Bemidji <p>Tobacco Cessation resources:</p> <ul style="list-style-type: none"> ● Sanford Clinic, 1233 – 34th St. NW, Bemidji ● Beltrami Co. Public Health, 701 Minn. Ave. NW, Bemidji ● Sarah Lehman, Tobacco Treatment Specialist, 1233 – 34th St. NW, Bemidji ● Jay Passa, BSU, 1500 Birchmont Dr. NE, Bemidji (for BSU students) ● Quit Plan – quitplan.com ● Clear Way Minnesota – clearwaymn.org ● American Lung Assn. – Alamn.org ● Office of the Surgeon General – smokefree.gov <p>Bullying resources:</p> <ul style="list-style-type: none"> ● Beltrami County Sheriff, 613 MN Ave. NW, Bemidji ● Bemidji Police, 613 MN Ave. NW, Bemidji ● School Counselors, 3300 Gillett Dr. NW, Bemidji <p>Youth Crime resources:</p> <ul style="list-style-type: none"> ● Beltrami County Sheriff, 613 Minn. Ave. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Bemidji Police, 613 Minn. Ave. NW, Bemidji <p>Activities for Youth (other than school/sports activities):</p> <ul style="list-style-type: none"> • Alano Club, 3802 Greenleaf Ave. NW, Bemidji • Boys & Girls Clubs, 1600 Minn. Ave. NW, Bemidji • Boy Scouts, 3877 Stebner Rd., Hermantown • Girl Scouts, 750 Paul Bunyan Dr. NW, Bemidji • 4-H, Beltrami County Extension, 7223 Frontage Rd. NW, Bemidji • Headwaters Science Center, 413 Beltrami Ave. NW, Bemidji • Kinship North Mentoring Program, 622 Mississippi Ave., Bemidji • Headwaters School of Music, 519 MN Ave. NW, Bemidji • Bemidji Public Library, 509 America Ave. NW, Bemidji • Paul Bunyan Playhouse children’s activities, 314 Beltrami Ave. NW, Bemidji 	
Aging Population	Cost of long term care 4.02			<p>Long Term Care resources:</p> <ul style="list-style-type: none"> • Havenwood Care Center, 1633 Delton Ave., Bemidji • Sanford Health Nielson Place, 1000 Anne St. NW, Bemidji • Touch of Home, 711 – 17th St. NW, Bemidji • Sanford Health Trillium Memory Care, 930 Anne St. NW, Bemidji • Cedar Cottage, 1711 Delton Ave. NW, Bemidji • Elder Care, 1633 Delton Ave. NW, Bemidji • Goldpine Home, 1700 – 30th St. NW, Bemidji • WindSong Assisted Living, 1010 Anne St. NW, Bemidji • Long Lake Loon Lodge, 7747 Loon Lodge LN NE, Bemidji • Sanford Health WoodsEdge, Senior Living, 1000 Anne St. NW, Bemidji • Clubb House assisted living, 622 – 21st St. NW, Bemidji • Colleen’s Caring Hands (assisted living), 2525 Bemidji Ave. N., Bemidji <p>Memory Care resources:</p> <ul style="list-style-type: none"> • Sanford Health Trillium Memory Care, 930 Anne St. NW, Bemidji • Havenwood Care Center, 1633 Delton Ave., Bemidji • Sanford Health Nielson Place, 1000 Anne St. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Touch of Home, 711 – 17th St. NW, Bemidji • Sanford WoodsEdge, 1000 Anne St. NW, Bemidji • Elder Care, 1633 Delton Ave. NW, Bemidji <p>Resources for grandparents caring for grandchildren:</p> <ul style="list-style-type: none"> • Legal Aid, 215 – 4th St. NW, Bemidji • Beltrami Co. Health & Human Services, 616 America Ave. NW, Bemidji • Senior LinkAge Line – 800-333-2433 • LSS Kinship Family Support Services – 877-917-4640 • MN Kinship Caregivers Assn. – mkca.org • LawHelpMN.org – free legal help • Grandfamilies State Law & Policy Resource Center – grandfamilies.org • American Grandparents Assn. – grandparents.com • Raising Grandchildren Support Group – AARP.org/online-community • The Brookdale Foundation – brookdalefoundation.net • Generations United – gu.org <p>In-Home Services:</p> <ul style="list-style-type: none"> • Northwoods Caregivers (transportation, grocery shopping, visiting, homemaking), 616 America Ave. NW, Bemidji • Touching Hearts at Home, 615 Anne St. NW, Bemidji • Caregiver Coaching & Support Group, Northwoods Caregivers, 616 America Ave., Bemidji • Sanford HealthCare Accessories, 1705 Anne St. NW, Bemidji • Sanford Home Care/Hospice, 3201 Pine Ridge Ave NW, Bemidji • Good Samaritan Home Care, 2508 Washington Ave. SE, Bemidji • HealthStar Home Health, 2524 Hannah Ave. NW, Bemidji • First Nations Home Health, 2524 Hannah Ave. NW, Bemidji • Circle of Life Home Care Anishinaabe (personal care for Native Americans), 2406 Tracy Ct. NW, Bemidji • Bi-County Community Action Agency (weatherization, repair, home services), 6603 Bemidji Ave. N., Bemidji • Mobile Service Team (through Bemidji Evang. Covenant Church – assists with practical needs, repairs, etc.), 5405 Hart Lane NW, Bemidji • Parish Nurses: 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ Bemidji Evangelical Covenant Church, 5405 Hart Lane NW, Bemidji ○ Bemidji United Methodist Church, 924 Beltrami Ave. NW, Bemidji ○ New Salem Lutheran, 7491 Island View Dr. NE, Bemidji ○ People’s Church, 824 America Ave. NW, Bemidji ○ St. Phillip’s Catholic Church, 702 Beltrami Ave. NW, Bemidji 	
Safety	<p>Abuse of prescription drugs 4.52</p> <p>24% report that they have drugs in their home that they are not using</p> <p>Child abuse and neglect 4.32</p> <p>Presence of street drugs 4.29</p> <p>Presence of drug dealers 4.16</p> <p>Criminal activity 4.11</p> <p>Domestic violence 4.05</p>	24% report that they have drugs in their home that they are not using	Alcohol impaired driving deaths – 36%	<p>Substance Abuse resources:</p> <ul style="list-style-type: none"> ● Bemidji Area Program for Recovery, 403 – 4th St. NW, Bemidji ● Lake Region Chem. Dependency, 1510 Bemidji Ave. N., Bemidji ● AA program, 218-536-9008 ● NA program, 2508 Wash. Ave. SE, Bemidji ● Oshki Manidoo Center, 1741 – 15th St. NW, Bemidji ● Restore House, 1001 Mississippi Ave. NW, Bemidji ● Face It Together, 408 Beltrami Ave. NW, Bemidji ● Alano Club, 3802 Greenleaf Ave. NW, Bemidji ● Park Place (housing for those with substance abuse/mental health issues), 600 – 3rd St. NW, Bemidji <p>Drug Take Back Programs:</p> <ul style="list-style-type: none"> ● Beltrami Co. Sheriff, 613 MN Ave. NW, Bemidji <p>Child Abuse/Neglect resources:</p> <ul style="list-style-type: none"> ● Beltrami County Sheriff, 613 Minn. Ave. NW, Bemidji ● Bemidji Police, 613 Minn. Ave. NW, Bemidji ● Beltrami County Child Protection, 616 America Ave. NW, Bemidji ● Sanford Children’s Mobile Crisis Team, 800-422-0045 ● Native American Youth Hotline – 800-273-8255 <p>Street Drugs/Drug Dealers/Criminal Activity/Sex Trafficking/Gang Activity resources:</p> <ul style="list-style-type: none"> ● Beltrami County Sheriff, 613 Minn. Ave. NW, Bemidji ● Bemidji Police, 613 Minn. Ave. NW, Bemidji <p>Domestic Violence resources:</p>	

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				<ul style="list-style-type: none"> • Beltrami County Sheriff, 613 Minn. Ave. NW, Bemidji • Bemidji Police, 613 Minn. Ave. NW, Bemidji • Northwoods Coalition for Family Safety, PO Box 563, Bemidji • Peacemaker Resources, 2301 Johanneson Dr. N., Bemidji • Support Within Reach Sexual Violence Resource Center, 403 – 4th St. NW, Bemidji • Family Advocacy Center of Northern MN, 800 Bemidji Ave. N., Bemidji • House of Hospitality/Village of Hope homeless shelter, 525 Miss. Ave. NW, Bemidji • Nokomagiis Program for Tribal Elders & Children, 1819 Bemidji Ave. N., Bemidji • Sexual Assault Program of Beltrami, Cass & Hubbard Co., 403 – 4th St. NW, Bemidji • Domestic Violence Hotline – 800-799-7233 • Support Within Reach, 403 – 4th St. NW, Bemidji • Leech Lake Family Violence Program for Ojibwe, 190 Sailstar Dr. NW, Cass Lake • Equay Wiigamig Women’s Shelter – PO Box 909, Red Lake 	
<p>Health Care Access</p>	<p>Availability of mental health providers 4.36</p> <p>Availability of behavioral health 4.30</p> <p>Use of emergency room services for primary health care 4.00</p> <p>Timely access to medical care providers 3.58</p> <p>Access to affordable dental insurance coverage 3.56</p>		<p>Primary care physicians 1,090:1</p> <p>Mental Health providers 320:1</p> <p>Dentists: 1,540:1</p>	<p>Mental Health/Behavioral Health resources:</p> <ul style="list-style-type: none"> • Sanford Behavioral Health, 116 – 3rd St. NW & 722 – 15 St. NW, Bemidji • Sanford Mental Health Access Clinic (walk in), 1233 – 34th St. NW, Bemidji • Hope House Community Support Program, 2014 – 7th St. SE, Bemidji • Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji • Beltrami Co. Health & Human Services, 616 America Ave. NW, Bemidji • BSU Counseling (for enrolled students), 1500 Birchmont Dr. NE, Bemidji • Bridges Housing Program for people with mental illness – 641-602-1880 • Center for Psychiatric Care, 519 Anne St. NW, Bemidji • Community Behavioral Health Hospital, 800 Bemidji Ave. N., Bemidji • 24-Hr. Crisis Line – 800-422-0045 • Evergreen Youth & Family Services, 610 Patriot Dr. NW, Bemidji • Evergreen Crisis Shelter, 622 Mississippi Ave. NW, Bemidji • Great River Psychological Services, 403 – 4th St. NW, Bemidji • Integrative Health & Wellness, 819 Paul Bunyan Dr. SE, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Journey, 1630 Forest Lane SE, Bemidji • National Alliance for Mental Illness (monthly mtgs.), meets at 509 America Ave. NW, Bemidji • Nightlights Family Support Group, 702 Beltrami Ave. NW, Bemidji • Northern Psychological Services, 404 – 4th St. NW, Bemidji • North Homes Children & Family Services, 4225 Technology Dr. NW, Bemidji • Region II Mental Health Initiative (monthly mtgs.) – 213-333-4196 • Stellher (outpatient therapy), 519 Anne St. NW, Bemidji • Stellher Children’s Crisis Line – 800-422-0045 • Tamara Mason (outpatient therapy), 522 Beltrami Ave NW, Bemidji • Wellness in the Woods, 25362 – 230th St., Verndale • Wildgren, Wilimek & Assoc., 1526 – 30th St. NW, Bemidji • Woodvale Psychological Services, 403 – 4th St. NW, Bemidji • Eagle Vista Ranch, 16150 Golden Eagle Ct. NW, Bemidji • Full Circle Counseling, 516 Beltrami Ave., Bemidji • Integrative Health & Wellness, 819 Paul Bunyan Dr. S., Bemidji • Lake Country Associates, 1426 Bemidji Ave. N., Bemidji • Lindell Consulting, 702 – 5th St. NW, Bemidji • Rural MN Behavioral Health, 516 Beltrami Ave. NW., Bemidji • Park Place (housing for those with substance abuse/mental health issues), 600 – 3rd St. NW, Bemidji • Foster care beds for adults in crisis: <ul style="list-style-type: none"> ○ Spruce Woods Apts., 718 – 15th St. NW, Bemidji ○ MN State Operated Community Services, 810 Clausen Ave. SW, Bemidji ○ Cardinal of MN, 714 Lake Ave. SE, Bemidji ○ Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji ○ Eagles Wing, 5603 Tall Pines Rd. NE, Bemidji ○ Lighthouse Lodge, 3217 Johnson St. NW, Bemidji ○ Teri Kinn Adult Foster Care, 10240 N. Garden Lane NE, Bemidji • Mental Health Support Groups 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ Veteran’s Support Group, 701 – 5th St. NW, Bemidji ○ Sound Off (Combat Veterans Support Group), 1300 Anne St. NW, Bemidji ○ Nightlights Family Support Group, 702 Beltrami Ave., Bemidji ○ REACH Family Support Group, 2014 – 7th St. SE, Bemidji <p>Primary Health Care Providers/ Routine Medical Care resources:</p> <ul style="list-style-type: none"> ● Sanford Clinic, 1233 – 34th St. NW, Bemidji ● Beltrami Co. Public Health, 616 America Ave. NW, Bemidji ● Indian Health Clinic, 522 Minn. Ave. NW, Bemidji ● Tru North Health Care, 514 Beltrami Ave. NW, Bemidji ● BSU Student Health Clinic, 1st Floor of Cedar Hall, BSU campus, Bemidji ● VA Community Based Outpatient Clinic, 705 – 5th St. NW, Bemidji ● Pharmacies that provide flu shots & vaccinations: <ul style="list-style-type: none"> ○ Iverson Corner Drug, 408 Minn. Ave. NW, Bemidji ○ MedSave Family Pharmacy, 217 Paul Bunyan Dr. NW, Bemidji ○ Walgreen Pharmacy, 421 Paul Bunyan Dr. NW, Bemidji ○ Thrifty White, 2000 Paul Bunyan Dr. NW, Bemidji ○ CVS Pharmacy, 2312 Bemidji Ave. N., Bemidji <p>Health Insurance providers:</p> <ul style="list-style-type: none"> ● MN Sure – MNSure.org ● Pine Country Insurance, 507 Beltrami Ave. NW, Bemidji ● Northway Insurance Services, 307 – 3rd St. NW, Bemidji ● Diversified Insurance, 309 America Ave. NW, Bemidji <p>Affordable Health Care resources:</p> <ul style="list-style-type: none"> ● Sanford Clinic, 1233 – 34th St. NW, Bemidji ● Sanford Community Care Program, 1233 – 34th St. NW, Bemidji ● Bemidji Area Indian Health Services, 522 MN Ave. NW, Bem. ● Beltrami Co. Health & Human Services, 616 America Ave. NW, Bemidji ● MedExpress Urgent Care, 2317 Bemidji Ave. N., Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<p>Prescription Assistance programs:</p> <ul style="list-style-type: none"> • KPAassist Patient Assistance Program, 602 Beltrami Ave. NW, Bemidji • MN Drug Card – Mndrugcard.com • Discount Prescription Card – 888-884-7713 • Prescription Drug Assistance Program, 573-996-3333 • CancerCare co-payment assistance, 800-813-4673 • Freedrugcard.us • Rxfreecard.com • Medsavercard.com • Yourrxcard.com • Medicationdiscountcard.com • Nedymeds.org/drugcard • Caprxprogram.org • Gooddaysfromcdf.org • NORD Patient Assistance Program, rarediseases.org • Patient Access Network Foundation, panfoundation.org • Pfizer RC Pathways, pfizerRX pathways.com • RXhope.com <p>Dental Insurance resources:</p> <ul style="list-style-type: none"> • Aspen Dental (Insurance & Financing), 2219 Paul Bunyan Dr. NW, Bemidji • North Country Dental (has a membership plan & payment plan), 1311 Bemidji Ave., Bemidji • Northern Dental Access Center, 1405 Anne St. NW, Bemidji <p>Vision Insurance providers:</p> <ul style="list-style-type: none"> • Vision Insurance Plan (VSP) – visionhealthreferece.com • Stonewell Ins., 522 Beltrami Ave. NW, Bemidji • Lindfors Ins. Agency, 120 – 2nd St. NW, Fosston <p>Health Care Services for Native people:</p> <ul style="list-style-type: none"> • Circle of Life Home Care Anishinaabe (personal care for Native Americans), 2406 Tracy Ct. NW, Bemidji • First Nations Home Health, 2524 Hannah Ave. NW, Bemidji • Native American Youth Hotline – 800-273-8255 • Native Youth Crisis Hotline – 877-209-1266 • Indian Health Clinic, 522 Minn. Ave. NW, Bemidji • Leech Lake Family Violence Program for Ojibwe, 190 Sailstar Dr. NW, Cass Lake 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Nokomagiis Program for Tribal Elders & Children, 1819 Bemidji Ave. N., Bemidji • Equay Wiigamig Women’s Shelter, PO Box 909, Red Lake 	
Mental Health and Substance Abuse	<p>Drug use and abuse 4.59</p> <p>Alcohol use and abuse 4.38</p> <p>49% self-report that they binge drink at least 1 x/month</p> <p>26% report that alcohol use has had a harmful effect on them or a family member in the past 2 years</p> <p>Depression 4.09</p> <p>48% report a diagnosis of depression</p> <p>Suicide 4.07</p> <p>54% report a diagnosis of anxiety/stress</p> <p>19% report that they currently smoke cigarettes</p>	<p>49% self-report that they binge drink at least 1 x/month</p> <p>26% report that alcohol use has had a harmful effect on them or a family member in the past 2 years</p> <p>48% report a diagnosis of depression</p> <p>54% report a diagnosis of anxiety/stress</p> <p>19% report that they currently smoke cigarettes</p>	<p>Excessive drinking 23%</p> <p>Adult smoking 210%</p>	<p>Substance Abuse resources:</p> <ul style="list-style-type: none"> • Bemidji Area Program for Recovery, 403 – 4th St. NW, Bem. • Lake Region Chem. Dependency, 1510 Bemidji Ave. N., Bemidji • AA program, 218-536-9008 • NA program, 2508 Wash. Ave. SE, Bemidji • Oshki Manidoo Center, 1741 – 15th St. NW, Bemidji • Restore House, 1001 Mississippi Ave. NW, Bemidji • Face It Together, 408 Beltrami Ave. NW, Bemidji • Alano Club, 3802 Greenleaf Ave. NW, Bemidji • Park Place (housing for those with substance abuse/mental health issues), 600 – 3rd St. NW, Bemidji <p>Mental Health & Suicide resources:</p> <ul style="list-style-type: none"> • Sanford Behavioral Health, 116 – 3rd St. NW & 722 – 15 St. NW, Bemidji • Sanford Mental Health Access Clinic (walk in), 1233 – 34th St. NW, Bemidji • Hope House Community Support Program, 2014 – 7th St. SE, Bemidji • Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji • Beltrami Co. Health & Human Services, 616 America Ave. NW, Bemidji • BSU Counseling (for enrolled students), 1500 Birchmont Dr. NE, Bemidji • Bridges Housing Program for people with mental illness – 641-602-1880 • Center for Psychiatric Care, 519 Anne St. NW, Bemidji • Community Behavioral Health Hospital, 800 Bemidji Ave. N., Bemidji • 24-Hr. Crisis Line – 800-422-0045 • Evergreen Youth & Family Services, 610 Patriot Dr. NW, Bemidji • Evergreen Crisis Shelter, 622 Mississippi Ave. NW, Bemidji • Great River Psychological Services, 403 – 4th St. NW, Bemidji • Integrative Health & Wellness, 819 Paul Bunyan Dr. SE, Bemidji • Journey, 1630 Forest Lane SE, Bemidji • National Alliance for Mental Illness (monthly mtgs.), meets at 509 America Ave. NW, Bemidji • Nightlights Family Support Group, 702 Beltrami Ave. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Northern Psychological Services, 404 – 4th St. NW, Bemidji • North Homes Children & Family Services, 4225 Technology Dr. NW, Bemidji • Region II Mental Health Initiative (monthly mtgs.) – 213-333-4196 • Stellher (outpatient therapy), 519 Anne St. NW, Bemidji • Stellher Children’s Crisis Line – 800-422-0045 • Tamara Mason (outpatient therapy), 522 Beltrami Ave NW, Bemidji • Veteran’s Support Group, 705 – 5th St. NW, Bemidji • Wellness in the Woods, 25362 – 230th St., Verndale • Wildgren, Wilimek & Assoc., 1526 – 30th St. NW, Bemidji • Woodvale Psychological Services, 403 – 4th St. NW, Bemidji • Keeping Our Children Safe suicide prevention program, 403 – 4th St. NW, Bemidji • Yellow Ribbon suicide prevention hotline – 800-865-0606 • Native Youth Crisis Hotline – 877-209-1266 • Eagle Vista Ranch, 16150 Golden Eagle Ct. NW, Bemidji • Full Circle Counseling, 516 Beltrami Ave., Bemidji • Integrative Health & Wellness, 819 Paul Bunyan Dr. S., Bemidji • Lake Country Associates, 1426 Bemidji Ave. N., Bemidji • Lindell Consulting, 702 – 5th St. NW, Bemidji • Rural MN Behavioral Health, 516 Beltrami Ave. NW, Bemidji • Park Place (housing for those with substance abuse/mental health issues), 600 – 3rd St. NW, Bemidji • Foster care beds for adults in crisis: <ul style="list-style-type: none"> ○ Spruce Woods Apts., 718 – 15th St. NW, Bemidji ○ MSOCS, 810 Clausen Ave. SW, Bemidji ○ Cardinal of MN, 714 Lake Ave. SE, Bemidji ○ Upper Mississippi Mental Health Center, 722 – 15th St. NW, Bemidji ○ Eagle Wing, 5603 Tall Pines Rd. NE, Bemidji ○ Lighthouse Lodge, 3217 Johnson St. NW, Bemidji ○ Teri Kinn Adult Foster Care, 10240 N. Garden Lane NE, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<p>Dementia/Alzheimer’s Disease resources:</p> <ul style="list-style-type: none"> • Alzheimer’s Assn. – alz.org • Sanford Health Trillium Memory Care, 930 Anne St. NW, Bemidji • Havenwood Care Center, 1633 Delton Ave., Bemidji • Sanford Health Nielson Place, 1000 Anne St. NW, Bemidji • Touch of Home, 711 – 17th St. NW, Bemidji • Sanford WoodsEdge, 1000 Anne St. NW, Bemidji • Elder Care, 1633 Delton Ave. NW, Bemidji <p>Tobacco Cessation resources:</p> <ul style="list-style-type: none"> • Iverson Drug smoking cessation management program, 418 MN Ave. NW, Bemidji • BSU tobacco cessation program, 1500 Birchmont Dr. NE, Bemidji • Clearway Minnesota – Clearwaymn.org • American Lung Association – LungUSA2.org • Sanford Clinic, 1233 – 34th St. NW, Bemidji • Beltrami Co. Public Health, 616 America Ave. NW, Bemidji • Indian Health Clinic, 522 Minn. Ave. NW, Bemidji • Tru North Health Care, 514 Beltrami Ave. NW, Bemidji • BSU Student Health Clinic, 1st Floor of Cedar Hall, BSU campus, Bemidji • VA Community Based Outpatient Clinic, 705 – 5th St. NW, Bemidji 	
Wellness	<p>24% have not had a routine check-up in more than 1 year</p> <p>27% have not visited their dentist in more than 1 year</p> <p>24% report a diagnosis of hypertension and 24% report a diagnosis of high cholesterol</p> <p>20% report a diagnosis of asthma</p> <p>34% report that they are obese</p>	<p>24% have not had a routine check-up in more than 1 year</p> <p>27% have not visited their dentist in more than 1 year</p> <p>24% report a diagnosis of hypertension and 24% report a diagnosis of high cholesterol</p> <p>20% report a diagnosis of asthma</p> <p>34% report that they are obese</p>	Adult obesity 32%	<p>Resources for Routine Health Care Check-ups:</p> <ul style="list-style-type: none"> • Sanford Clinic, 1233 – 34th St. NW, Bemidji • Beltrami Co. Public Health, 616 America Ave. NW, Bemidji • MedExpress Urgent Care, 2317 Bemidji Ave. N., Bemidji • Indian Health Clinic, 522 Minn. Ave. NW, Bemidji • Tru North Health Care, 514 Beltrami Ave. NW, Bemidji • BSU Student Health Clinic, 1st Floor of Cedar Hall, BSU campus, Bemidji • VA Community Based Outpatient Clinic, 705 – 5th St. NW, Bemidji • Pharmacies that give flu shots & vaccinations: <ul style="list-style-type: none"> ○ Iverson Corner Drug, 408 Minn. Ave. NW, Bemidji 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
	<p>32% report that they are overweight</p> <p>50% do not consume the recommended 5 or more fruits/vegetables each day</p> <p>33% do not get moderate exercise at least 3 x/week</p>	<p>32% report that they are overweight</p> <p>50% do not consume the recommended 5 or more fruits/vegetables each day</p> <p>33% do not get moderate exercise at least 3 x/week</p>		<ul style="list-style-type: none"> ○ MedSave Family Pharmacy, 217 Paul Bunyan Dr. NW, Bemidji ○ Walgreen Pharmacy, 421 Paul Bunyan Dr. NW, Bemidji ○ Thrifty White, 2000 Paul Bunyan Dr. NW, Bemidji ○ CVS Pharmacy, 2312 Bemidji Ave. N., Bemidji <p>Dental resources:</p> <ul style="list-style-type: none"> ● Northern Dental Access Center ● Aspen Dental, 1650 – 45th St. S., Bemidji ● Hazelton Family Dentistry, 110 Mag Seven Ct. SW, Bemidji ● Bemidji Dental, 2600 Bemidji Ave. N., Bemidji <p>Chronic Disease resources:</p> <ul style="list-style-type: none"> ● Sanford Clinic, 1233 – 34th St. NW, Bemidji ● Sanford Better Choices Better Health, 1233 – 34th St. NW, Bemidji ● Beltrami Co. Public Health, 616 America Ave. NW, Bemidji ● Indian Health Clinic, 522 Minn. Ave. NW, Bemidji ● American Heart Assoc. – heart.org ● Asthma & Allergy Foundation – aafa.org <p>Obesity resources:</p> <ul style="list-style-type: none"> ● Sanford dieticians, 1233 – 34th St. NW, Bemidji ● Beltrami Co. Public Health, 616 America Ave. NW, Bemidji ● Indian Health Clinic, 522 Minn. Ave. NW, Bemidji ● MedExpress Urgent Care, 2317 Bemidji Ave. N., Bemidji ● Tru North Health Care, 514 Beltrami Ave. NW, Bemidji ● BSU Student Health Clinic, 1st Floor of Cedar Hall, BSU campus, Bemidji ● VA Community Based Outpatient Clinic, 705 – 5th St. NW, Bemidji ● Beltrami County Extension (nutrition information & classes), 7223 Frontage Rd. NW, Bemidji ● MedSave Nutrition Counselor ● Fitness Centers: <ul style="list-style-type: none"> ○ Anytime Fitness ○ In Charge Fitness ○ Snap Fitness ○ N X Q S Fitness ○ Knock-Out Fit Club ○ Curves ○ Northern Fitness ○ Fusion Dance & Fitness Center ○ Gym Bin ○ CrossFit Bemidji <p>Healthy Eating resources:</p>	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> • Beltrami County Extension (nutrition information & classes), 7223 Frontage Rd. NW, Bemidji • Sanford dieticians, 1233 – 34th St. NW, Bemidji • MedSave Nutrition Counselor • I Can Prevent Diabetes courses • Beltrami Co. Public Health, 616 America Ave. NW, Bemidji • Community Garden Plots, 1351 – 5th St. NW, Bemidji (3 locations) • Farmers Markets: <ul style="list-style-type: none"> ○ Bemidji Area Farmers Market ○ Bemidji Natural Choice Farmers Market • Grocery Stores: <ul style="list-style-type: none"> ○ Lueken’s Village Foods South, 609 Washington Ave. S., Bemidji ○ Lueken’s Village Foods North, 1171 Paul Bunyan Dr. NW, Bemidji ○ Harmony Natural Foods Co-op, 302 Irvine Ave. NW, Bemidji ○ Marketplace Foods, 2000 Paul Bunyan Dr. NW, Bemidji ○ Johanneson’s, Inc., 2301 Johanneson Dr. NW, Bemidji ○ Nymore food Mart, 609 – 4th St. SE, Bemidji ○ Stittsworth Meats, 722 Paul Bunyan Dr. NW, Bemidji ○ Pete’s Place, 7189 Pete Lane NW, Bemidji • CSAs that serve Bemidji: <ul style="list-style-type: none"> ○ Lone Rock Farms, 5143 – 15th St. NW, Bemidji ○ Northern Light Farm, 2048 Agate Lane NW, Solway ○ Farmucopia, pick up at 303 Railroad St., Bemidji ○ Today’s Food, Inc., Co. Rd. 38, Benedict ○ TJL Farm, 27081 Lower Rice Lake Rd., Bagley <p>Physical Activity resources:</p> <ul style="list-style-type: none"> • Park District activities • School physical activities • Sanford Center • Gillette Recreation Center • Bemidji Curling Club • Evenson Memorial Baseball Field, • Bemidji Soccer Fields • Bemidji Baptist Christian School facilities • Heartland Christian Academy facilities • St. Mark’s Lutheran School facilities • St. Philip’s School facilities • Fitness Centers: <ul style="list-style-type: none"> ○ Anytime Fitness ○ In Charge Fitness 	

Identified Concern	Key stakeholder survey	Resident survey	Secondary data	Community resources available to address the need	Gap ?
				<ul style="list-style-type: none"> ○ Snap Fitness ○ N X Q.S Fitness ○ Knock-Out Fit Club ○ Curves ○ Northern Fitness ○ Fusion Dance & Fitness Center ○ Gym Bin ○ CrossFit Bemidji 	

Sanford Bemidji/Bagley Medical Center

Community Health Needs Assessment

Results from an October 2017 Non-Generalizable

Online Survey of Community Stakeholders

November 2017

SANFORD

STUDY DESIGN and METHODOLOGY

The following report includes non-generalizable survey results from an October 2017 online survey of community leaders and key stakeholders identified by Sanford Bemidji/Bagley Medical Center. This study was conducted through a partnership between the Community Health Collaborative and the Center for Social Research (CSR) at North Dakota State University. The CSR developed and maintained links to the online survey tool. Members of the Community Health Collaborative distributed the survey link via e-mail to stakeholders and key leaders, located within various agencies in the community, and asked them to complete the online survey. **Therefore, it is important to note that the data in this report are not generalizable to the community.** Data collection occurred during the month of October and the first week of November. A total of 58 respondents participated in the online survey.

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SURVEY RESULTS

Current State of Health and Wellness Issues Within the Community

Using a 1 to 5 scale, with 1 being “no attention needed”; 2 being “little attention needed”; 3 being “moderate attention needed”; 4 being “serious attention needed”; and 5 being “critical attention needed,” respondents were asked to, based on their knowledge, select the option that best describes their understanding of the current state of each issue regarding ECONOMIC WELL-BEING, TRANSPORTATION, CHILDREN AND YOUTH, the AGING POPULATION, SAFETY, HEALTHCARE AND WELLNESS, and MENTAL HEALTH AND SUBSTANCE ABUSE.

Figure 1. Current state of community issues regarding ECONOMIC WELL-BEING

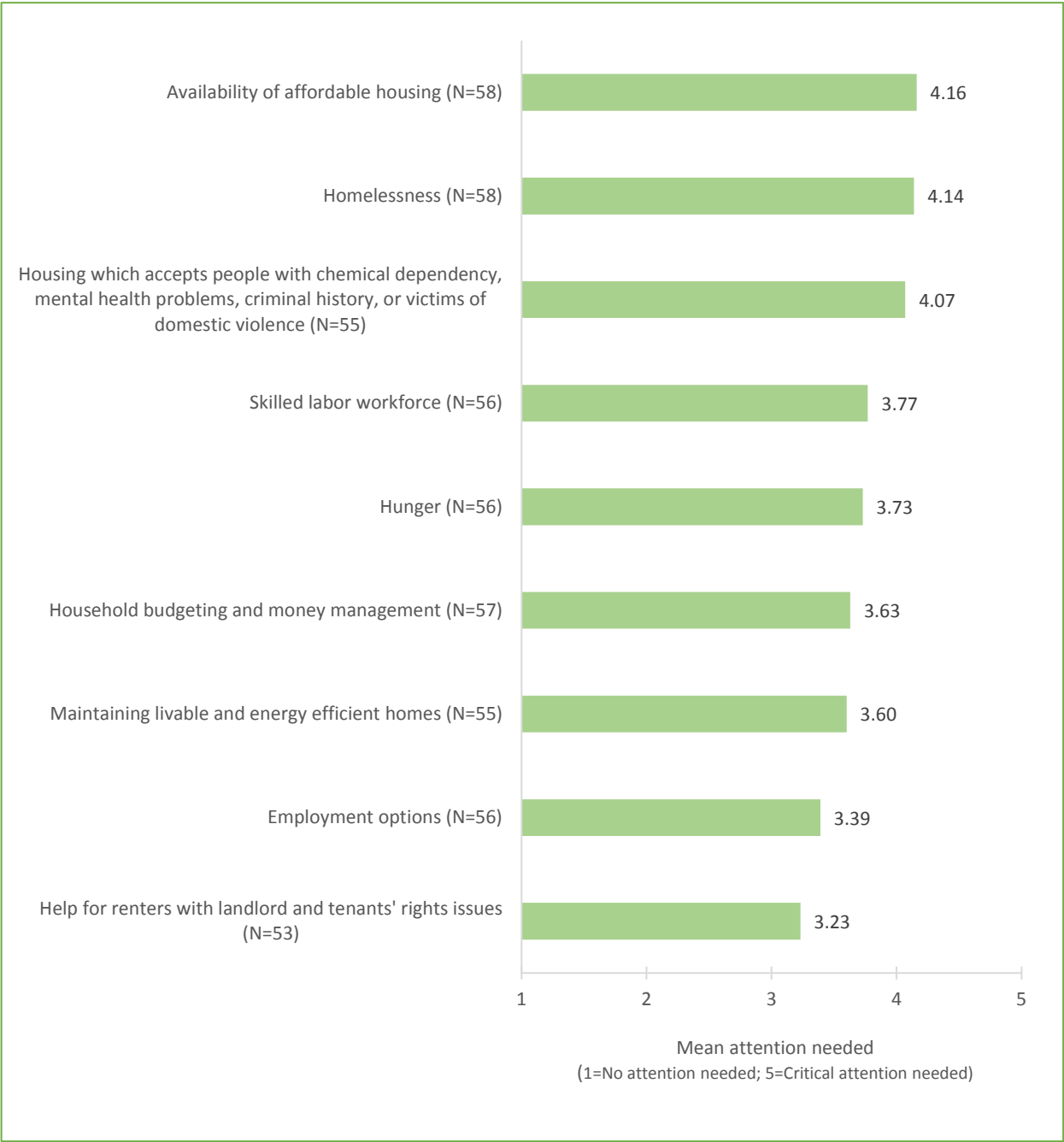


Figure 2. Current state of community issues regarding TRANSPORTATION

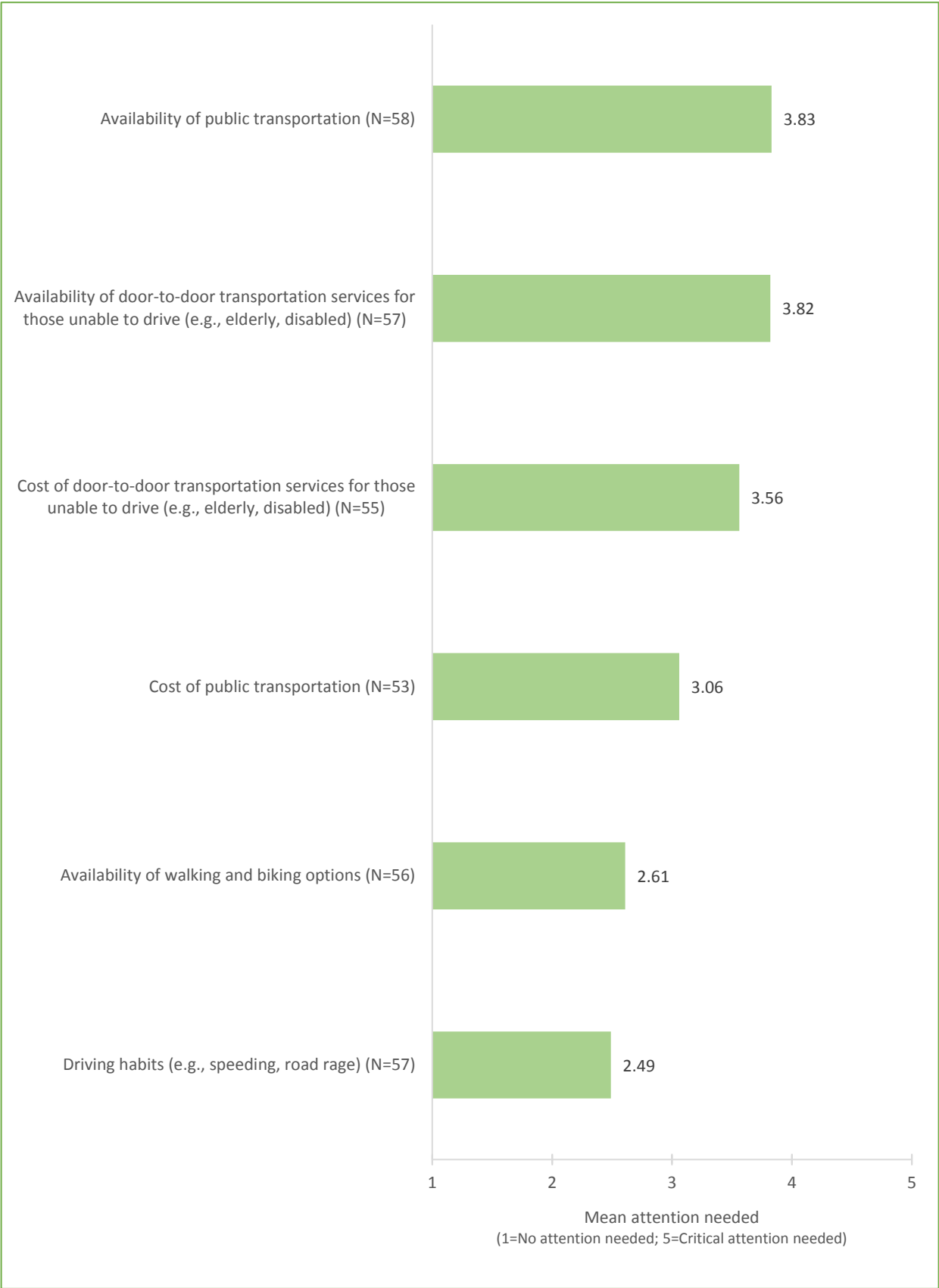


Figure 3. Current state of community issues regarding CHILDREN AND YOUTH



Figure 4. Current state of community issues regarding the AGING POPULATION



Figure 5. Current state of community issues regarding SAFETY

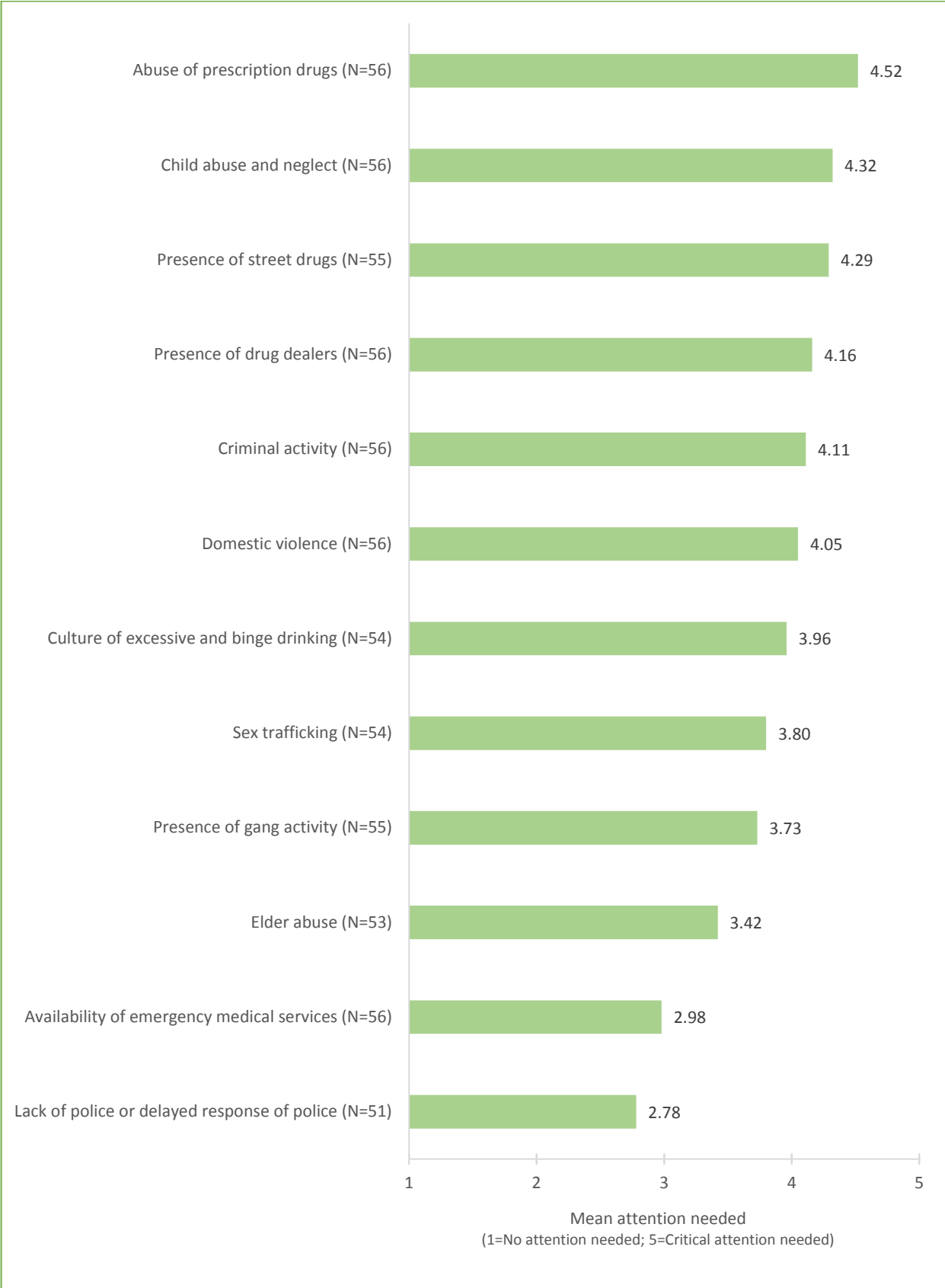


Figure 6. Current state of community issues regarding HEALTHCARE AND WELLNESS

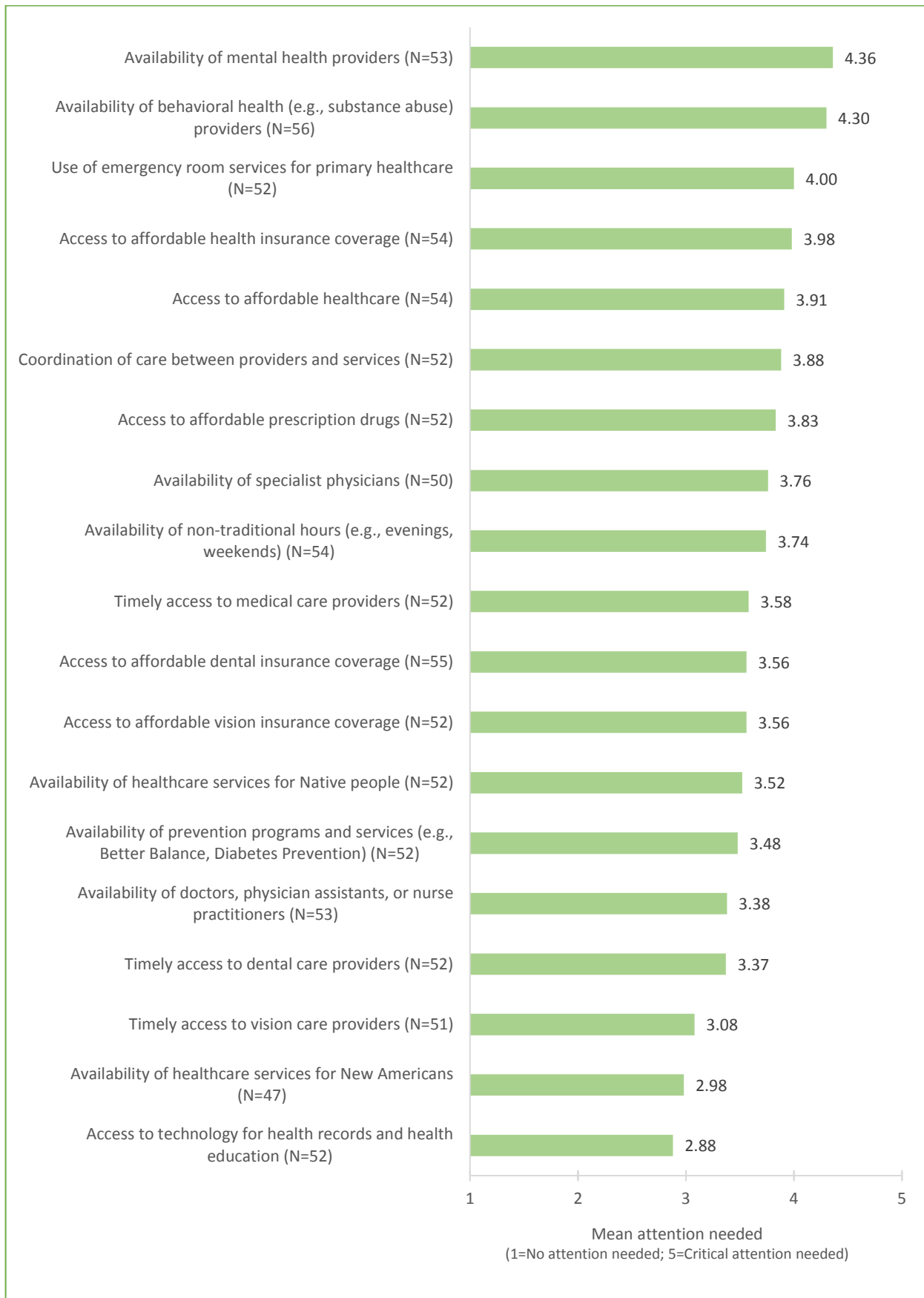
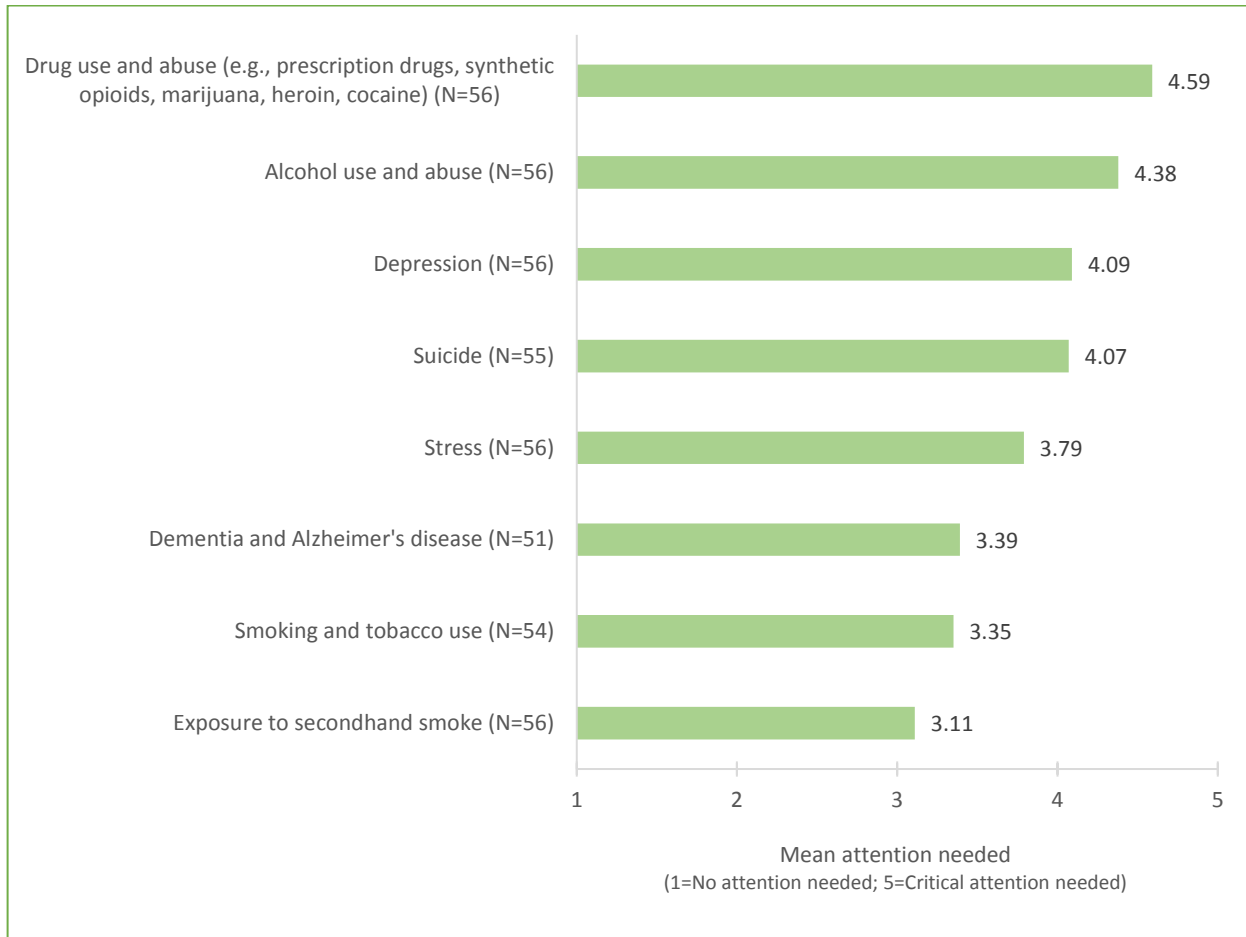
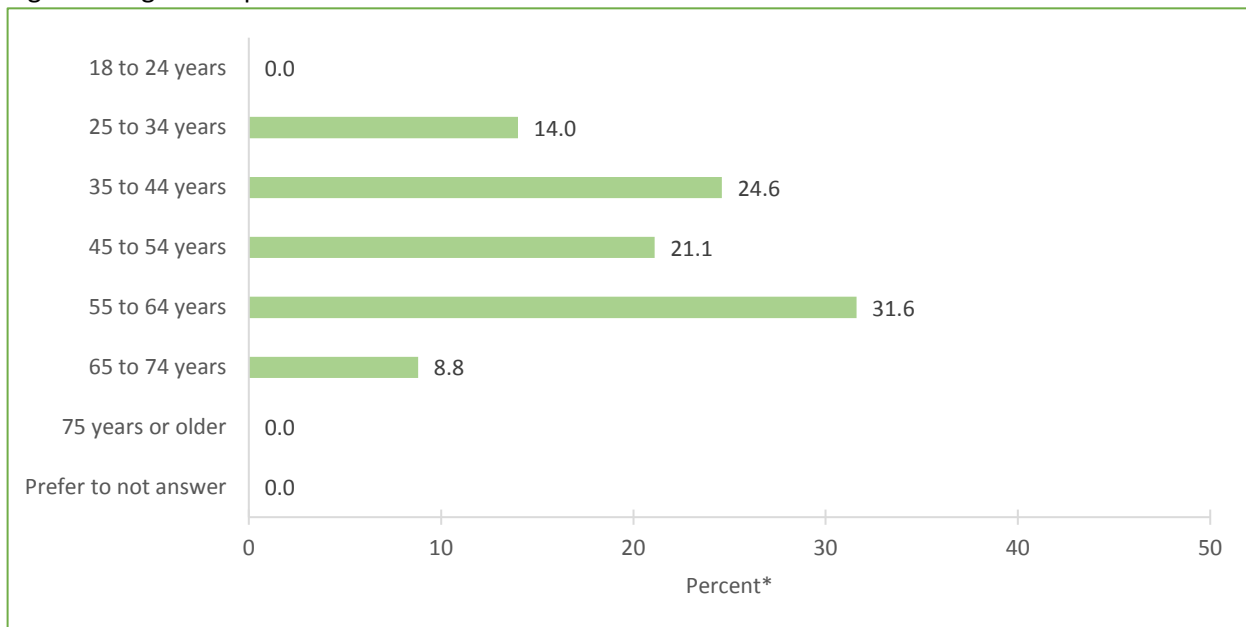


Figure 7. Current state of community issues regarding MENTAL HEALTH AND SUBSTANCE ABUSE



Demographic Information

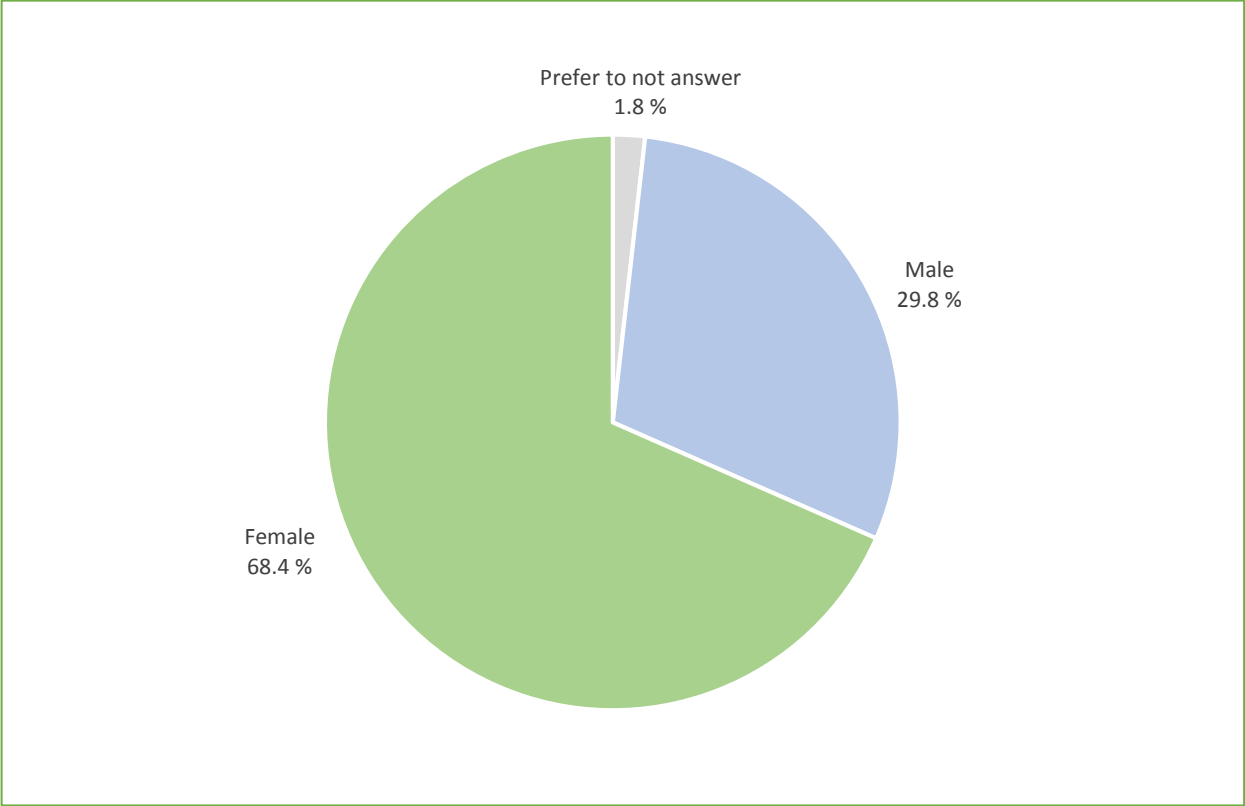
Figure 8. Age of respondents



N=57

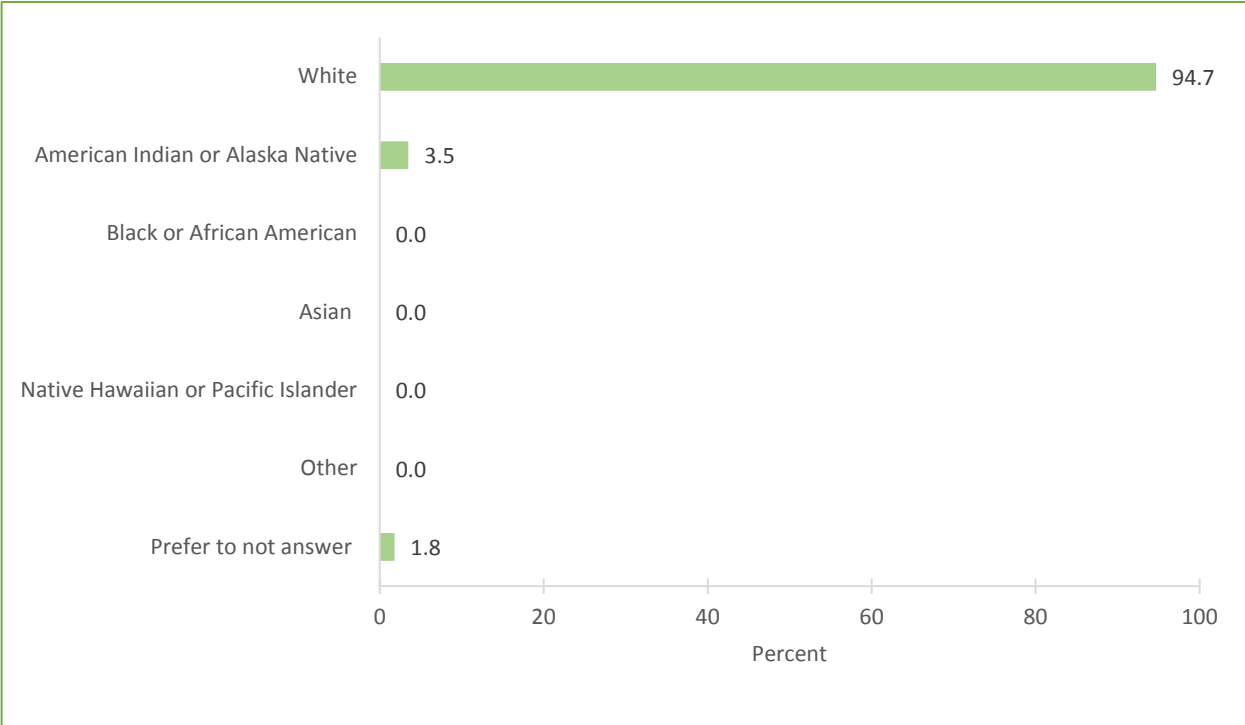
*Percentages do not total 100.0 due to rounding.

Figure 9. Biological sex of respondents



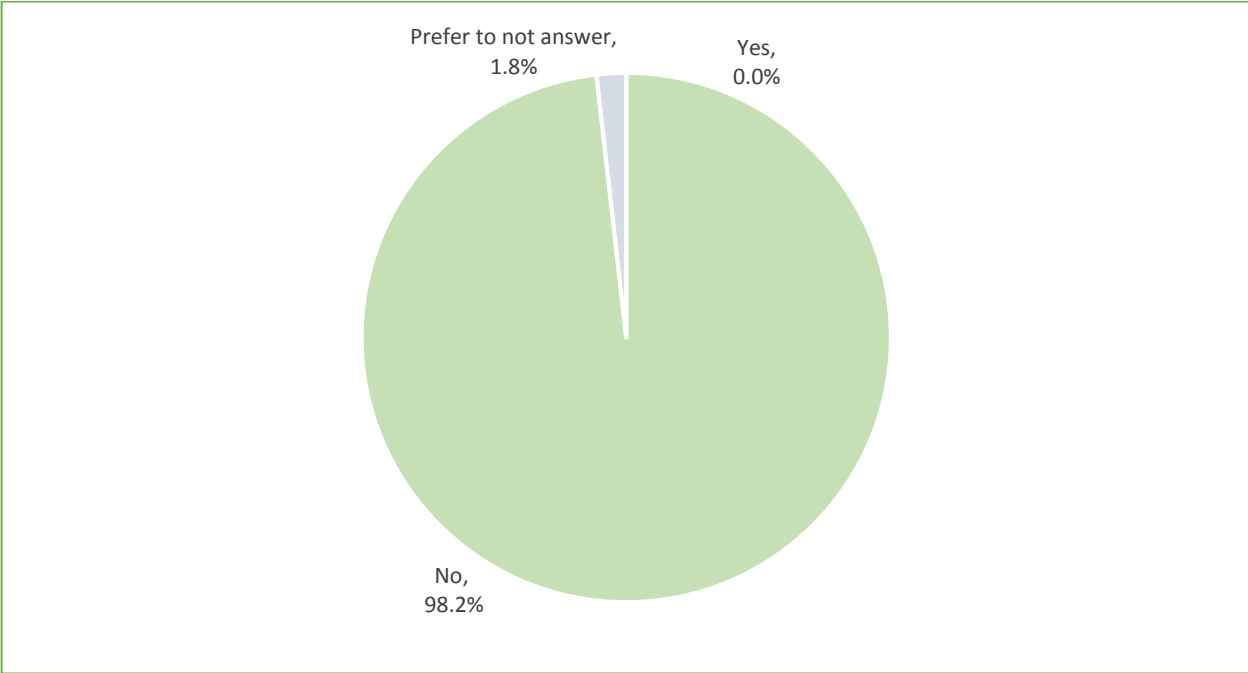
N=57

Figure 10. Race of respondents



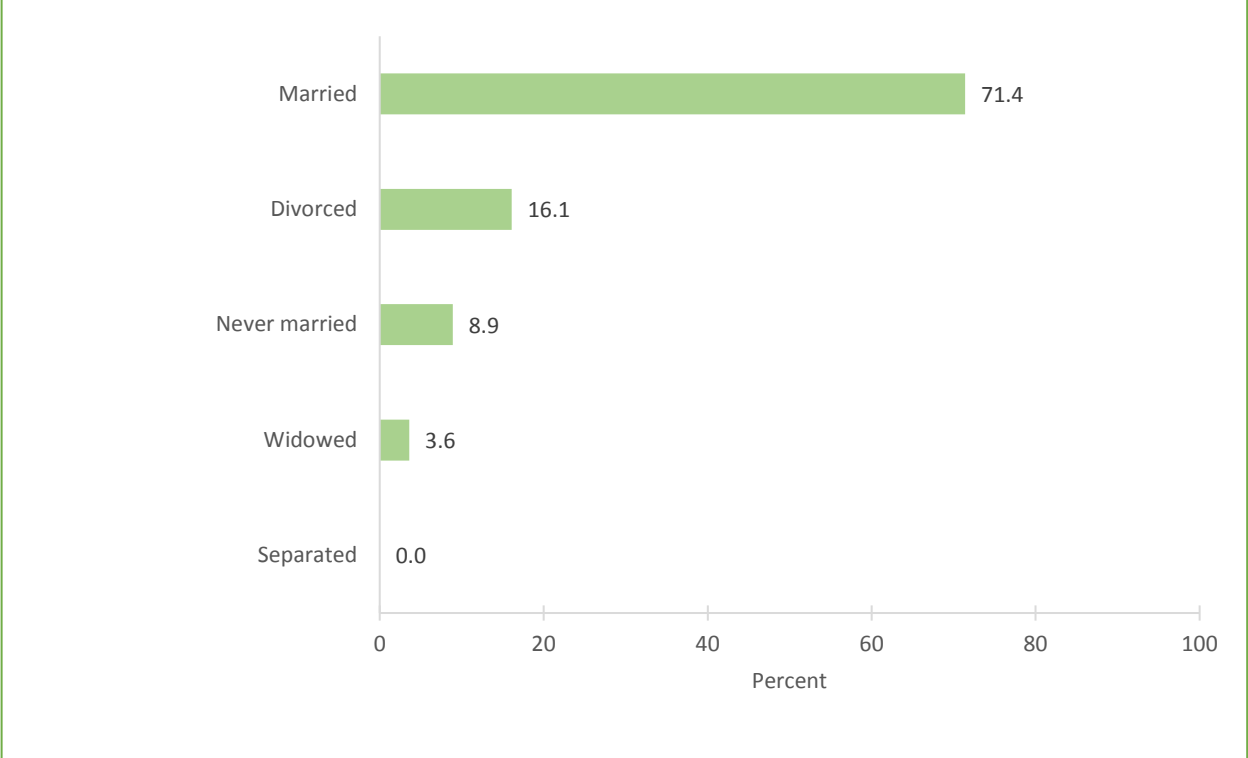
N=57

Figure 11. Whether respondents are of Hispanic or Latino origin



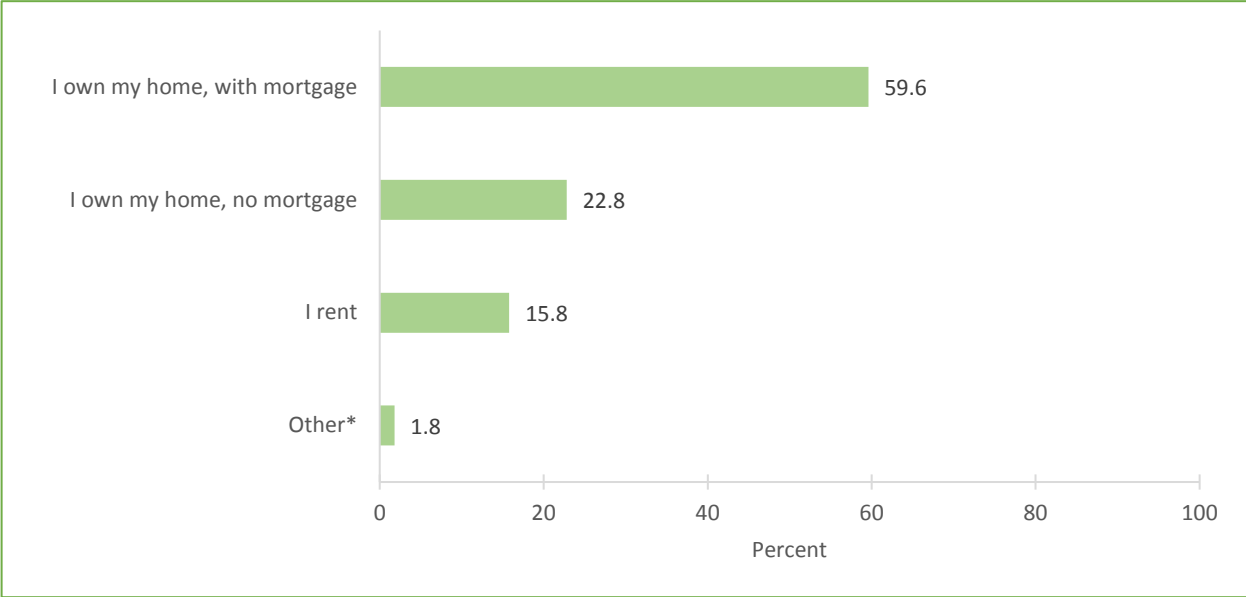
N=57

Figure 12. Marital status of respondents



N=56

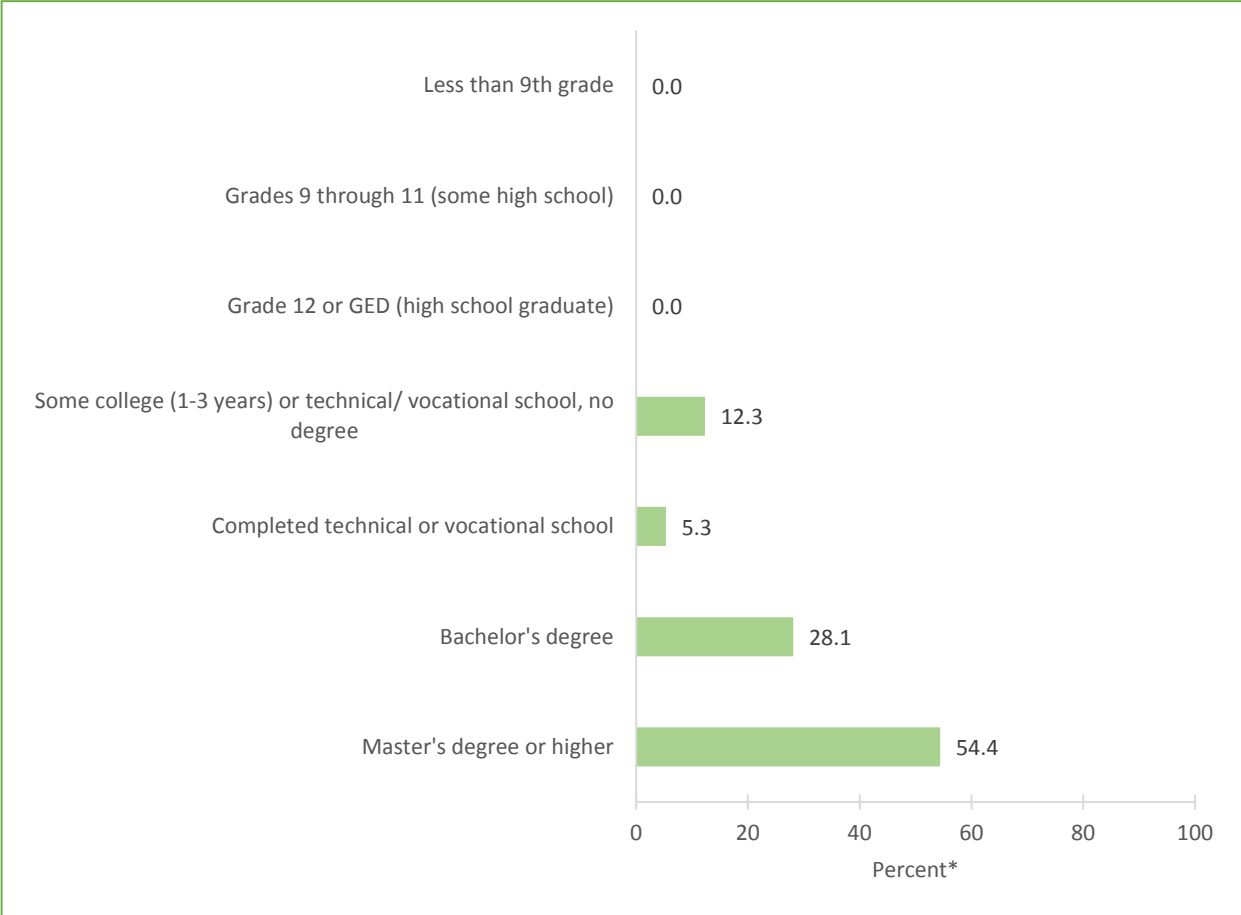
Figure 13. Living situation of respondents



N=57

*There was no written response for "other".

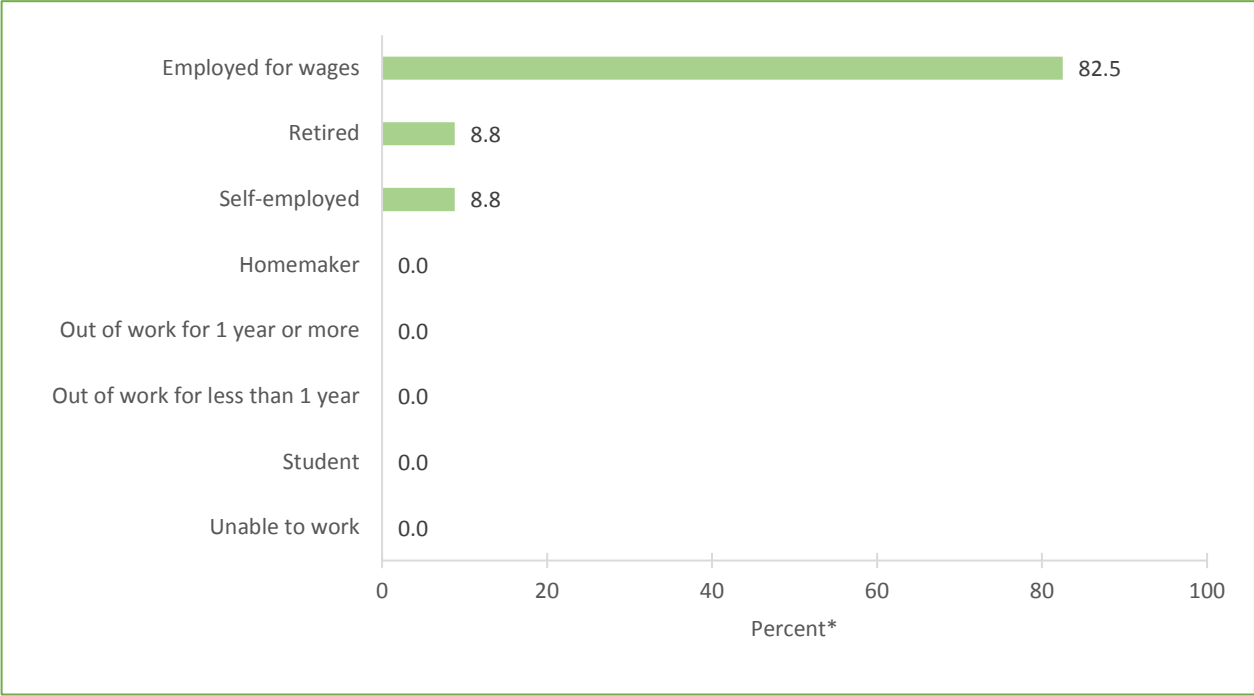
Figure 14. Highest level of education completed by respondents



N=57

*Percentages do not total 100.0 due to rounding.

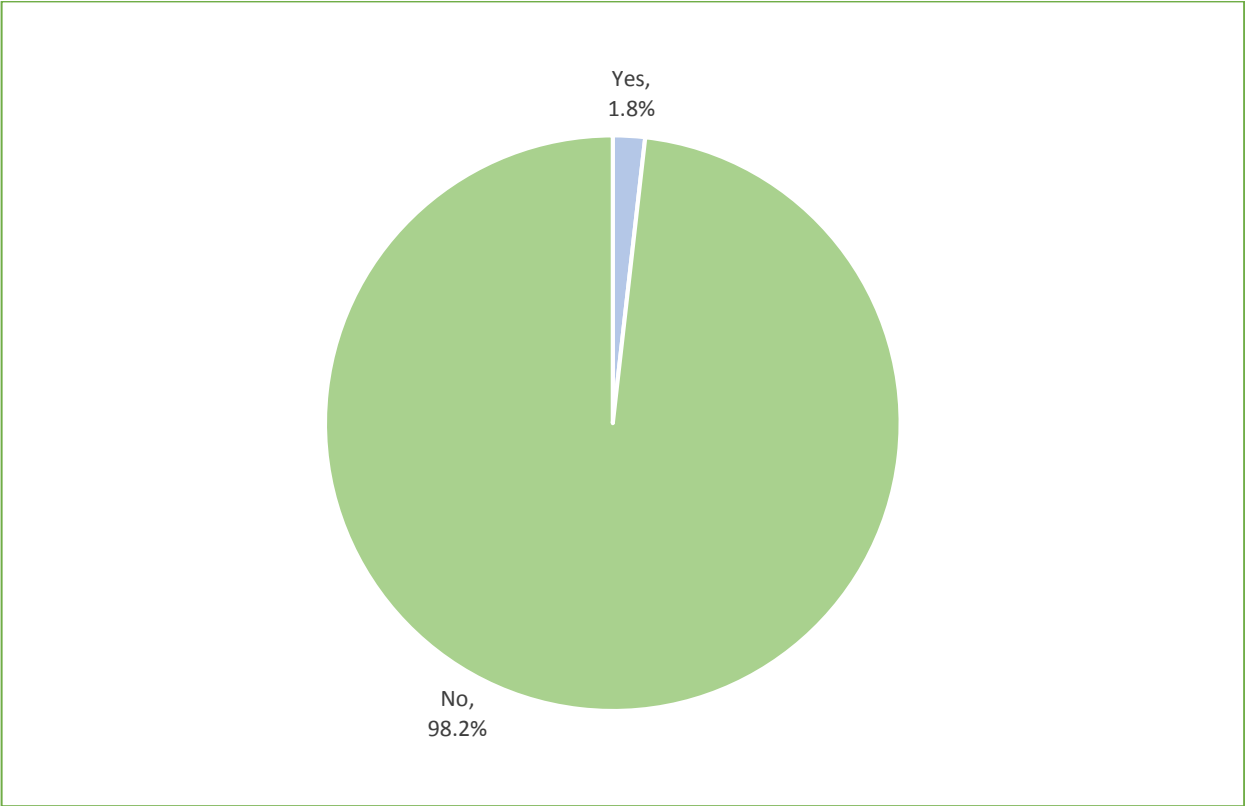
Figure 15. Employment status of respondents



N=57

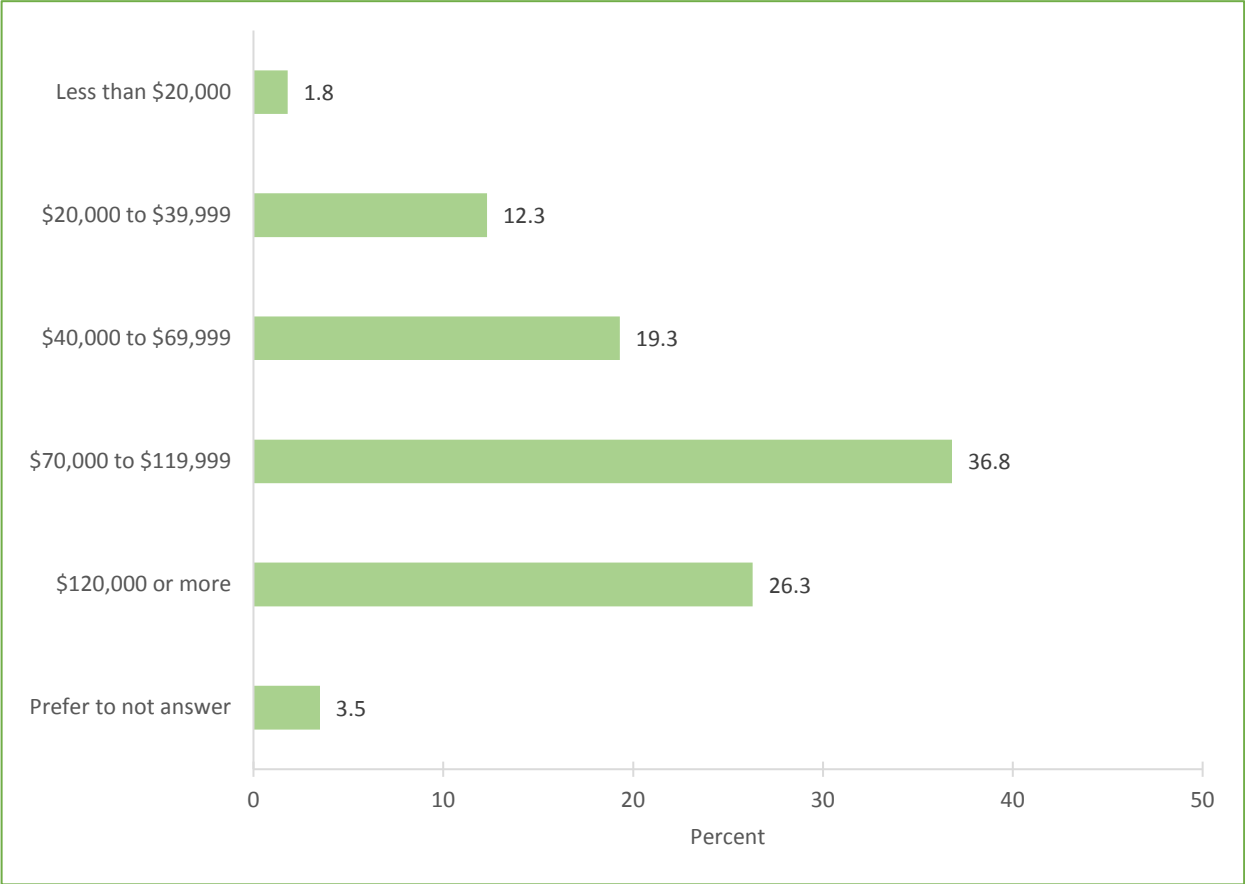
*Percentages do not total 100.0 due to rounding.

Figure 16. Whether respondents are military veterans



N=55

Figure 17. Annual household income of respondents, from all sources, before taxes



N=57

Table 1. Zip code of respondents

Zip code	Number of respondents
56601	48
56461	2
56626	1
56630	1
56633	1
56647	1
56670	1
56676	1
56678	1

N=57

Table 2. Comments from respondents

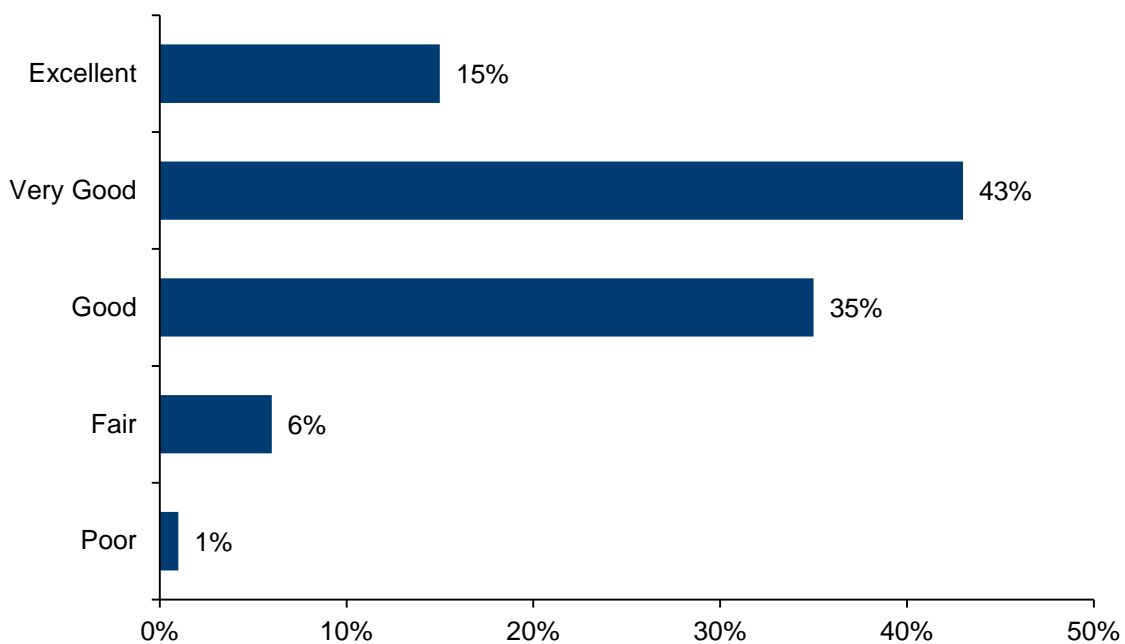
Comments
Landlords in this town are slum lords. It is terrible! Because of college students renting, the working class families get gouged for rent. The working class pay through the nose and there is so much help for people in this town in poverty but we still have so many problems. So many on welfare and SSI, why work or get an education? It is beyond frustrating. We have a City Manager who HATES our town, and a City Council that does not listen to their constituents. When neighborhoods have SIGNED PETITIONS, they still do not listen. I look forward to moving out of the city limits so I do not have to deal with the Council or the Mayor. She is extremely unfriendly! I have tried to talk to her in public and she is rude! Good luck fixing all the problems in this town!
Need for parenting support groups related to parenting children with mental health needs.
The biggest need I see is for cooperation and communication among agencies. Sanford needs to be community-focused and listen to the needs to the people.
There are no current long-term mental health places for youth anywhere near; this is the largest problem I see in our area!

Bemidji CHNA Survey Report

February 26, 2018

Charts Exported by MarketSight®

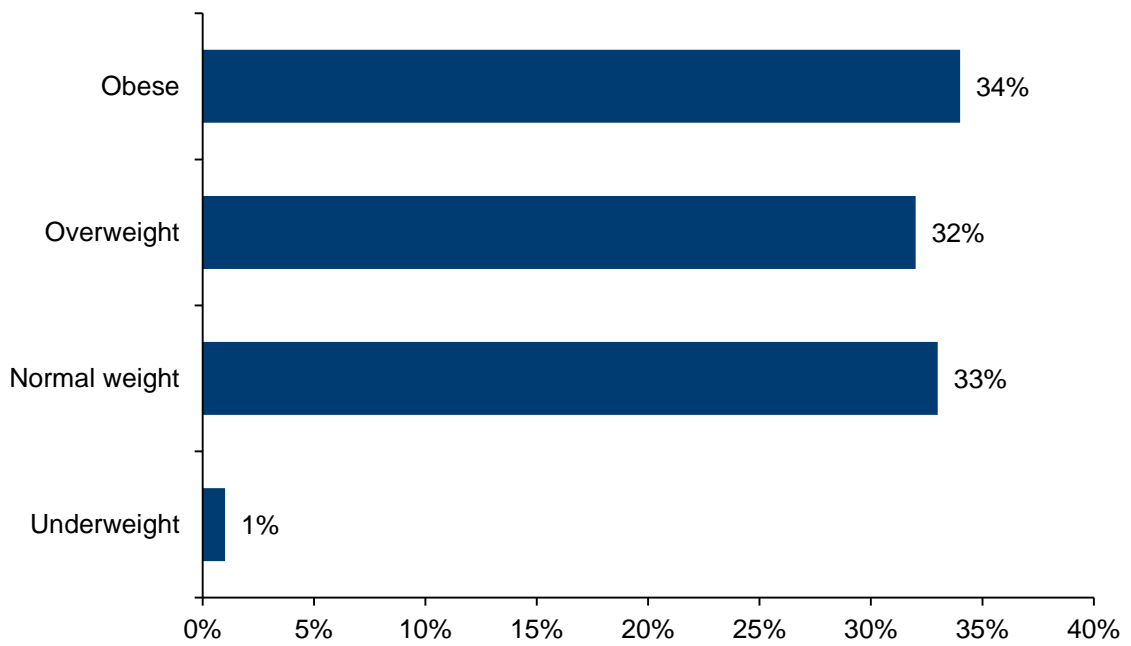
How would you rate your health?



Base: Poor (n=3), Fair (n=15), Good (n=86), Very Good (n=106), Excellent (n=38), Sample Size = 248

(Community = Beltrami)

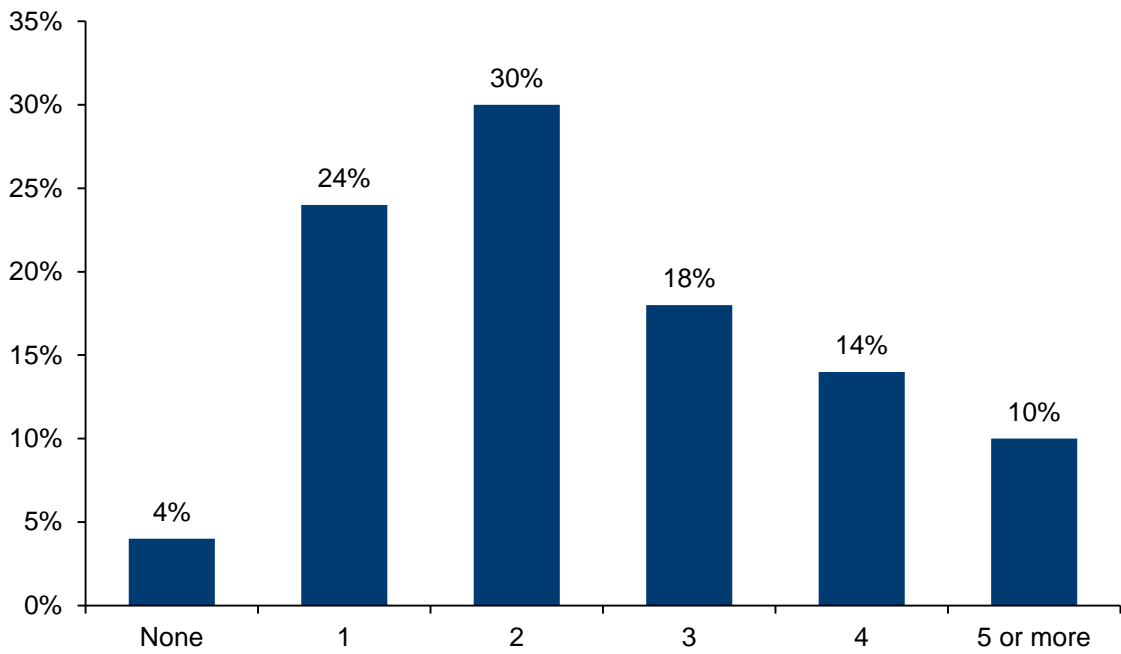
BMI



Base: Underweight (n=3), Normal weight (n=80), Overweight (n=78), Obese (n=83), Sample Size = 244

(Community = Beltrami)

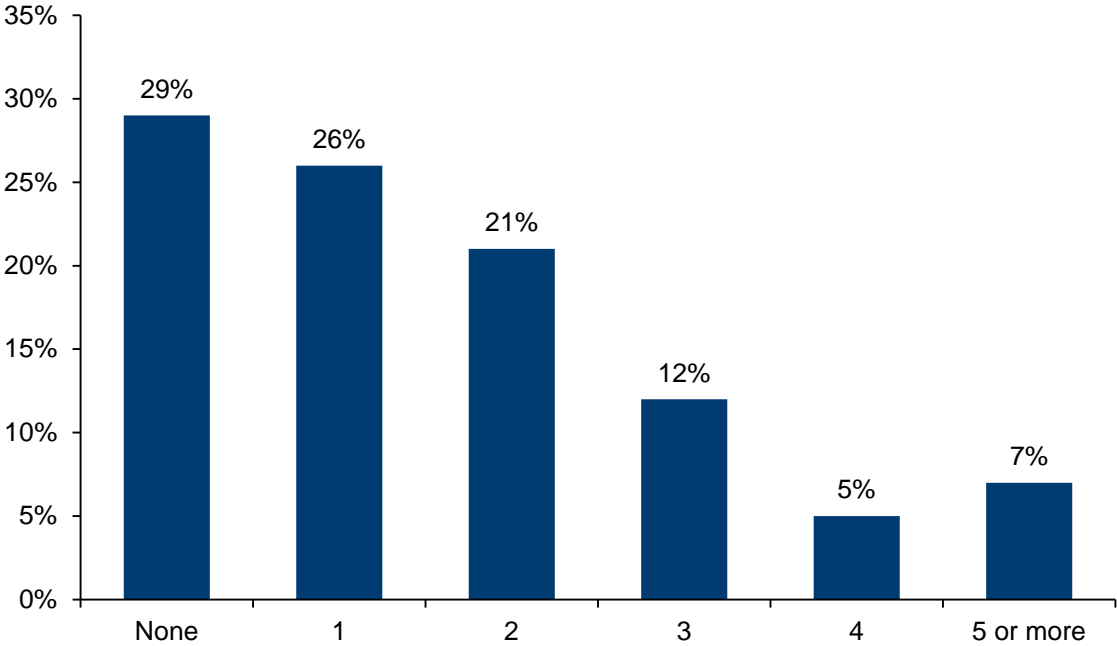
Servings of Vegetables



Base: None (n=10), 1 (n=56), 2 (n=71), 3 (n=41), 4 (n=32), 5 or more (n=24), Sample Size = 234

(Community = Beltrami)

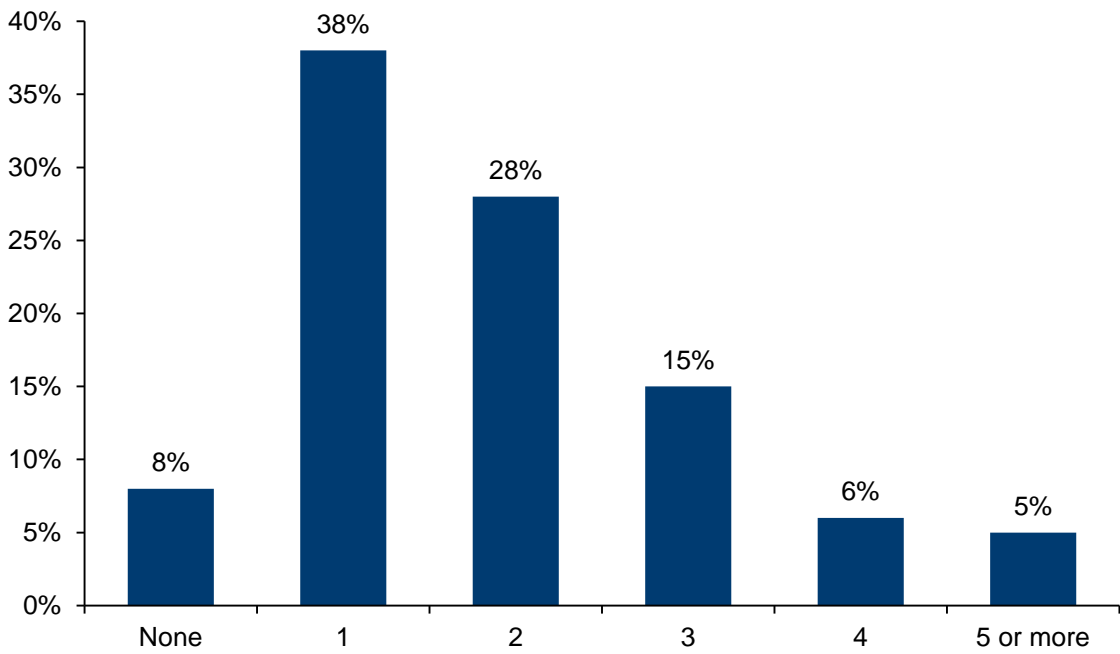
Servings of Juice



Base: None (n=46), 1 (n=41), 2 (n=34), 3 (n=19), 4 (n=8), 5 or more (n=11), Sample Size = 159

(Community = Beltrami)

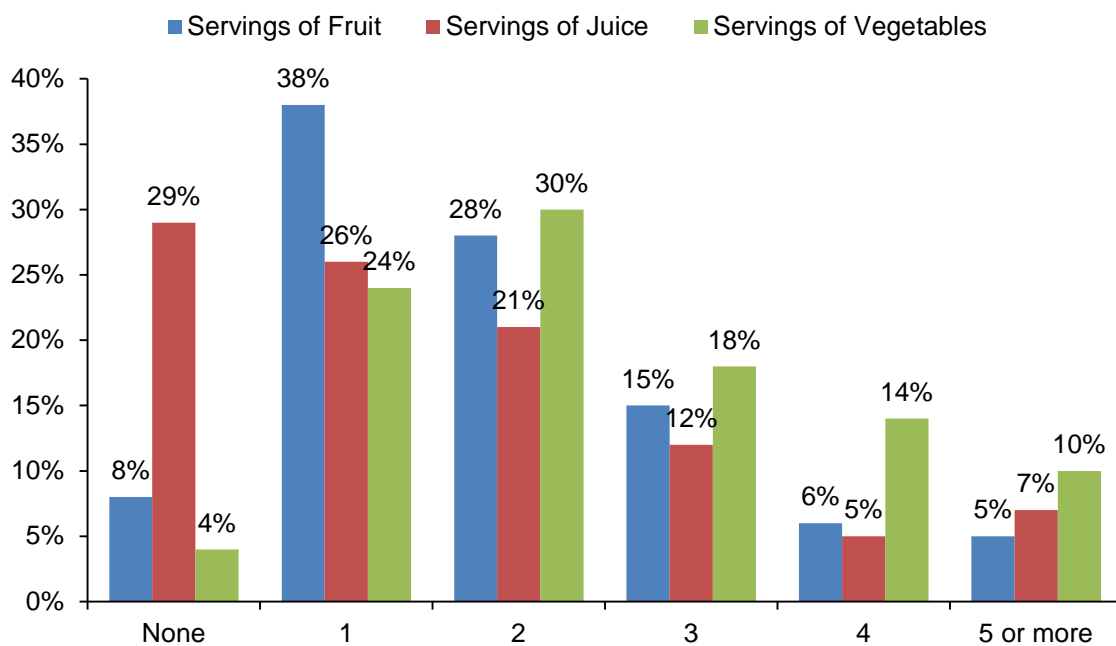
Servings of Fruit



Base: None (n=16), 1 (n=75), 2 (n=54), 3 (n=30), 4 (n=12), 5 or more (n=9), Sample Size = 196

(Community = Beltrami)

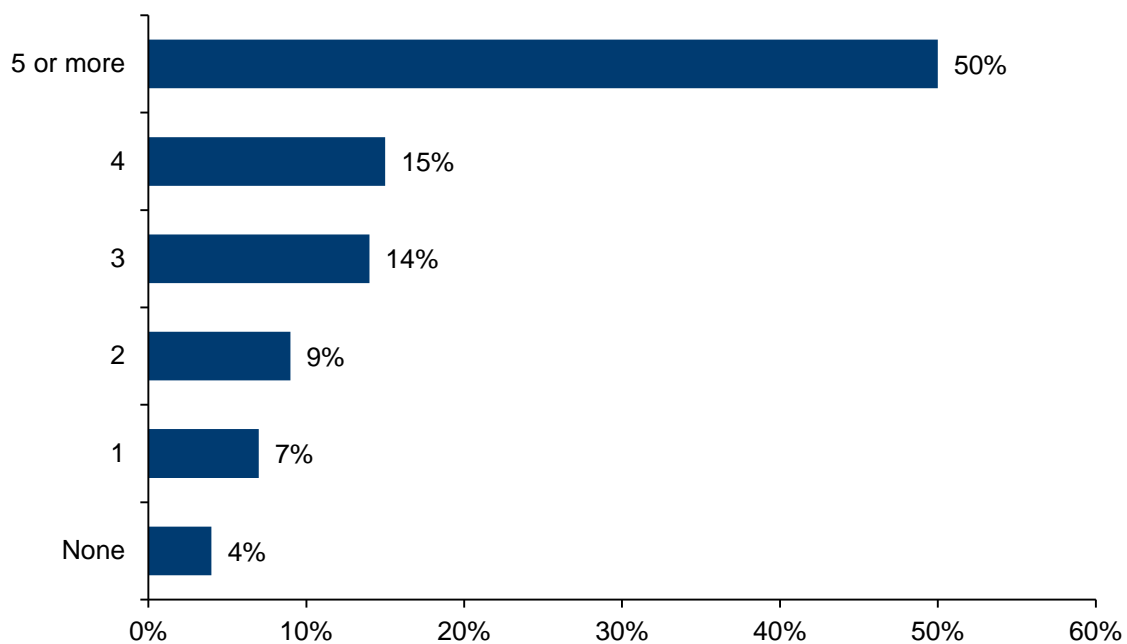
Servings of Fruit, Vegetables and Juice



Sample Size = Variable

(Community = Beltrami)

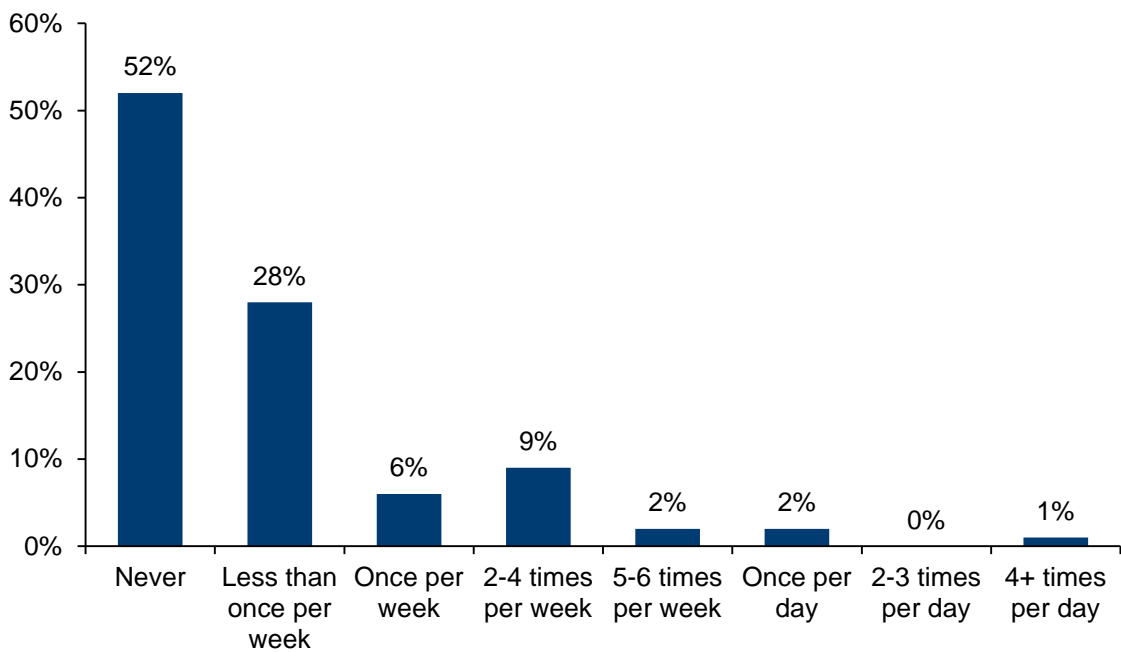
Total Servings of Fruits, Vegetables and Juice



Base: None (n=9), 1 (n=18), 2 (n=21), 3 (n=35), 4 (n=37), 5 or more (n=122), Sample Size = 242

(Community = Beltrami)

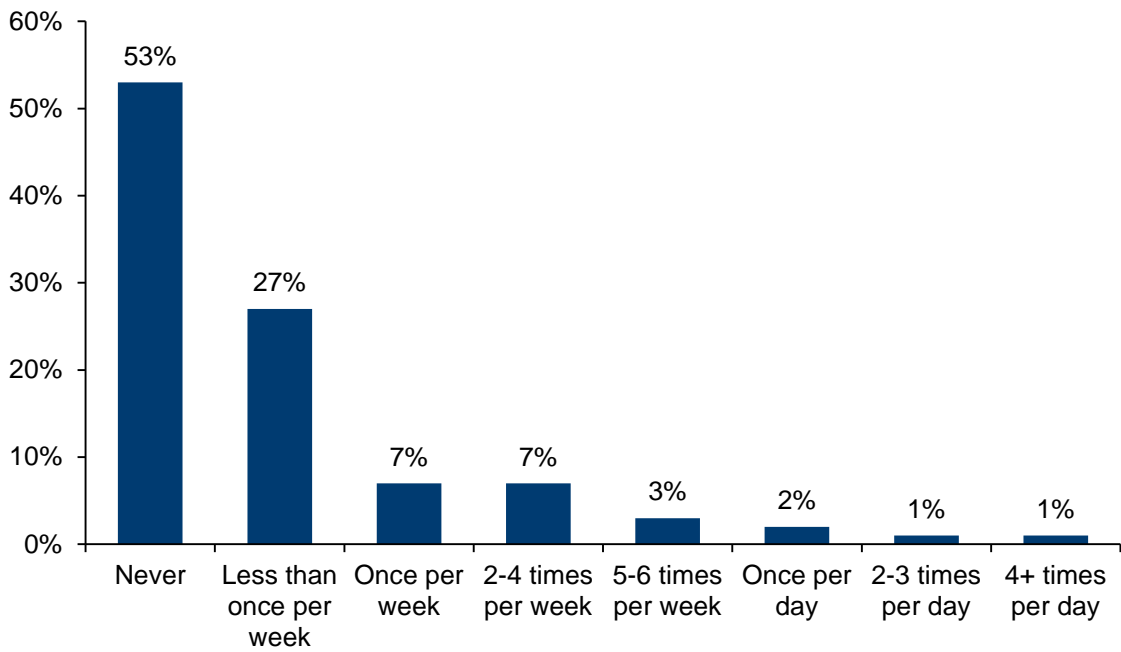
Snapple, Flavored Teas, Capri Sun, etc.



Base: Never (n=126), Less than once per week (n=67), Once per week (n=15), 2-4 times per week (n=21), 5-6 times per week (n=5), Once per day (n=6), 2-3 times per day (n=1), 4+ times per day (n=2), Sample Size = 243

(Community = Beltrami)

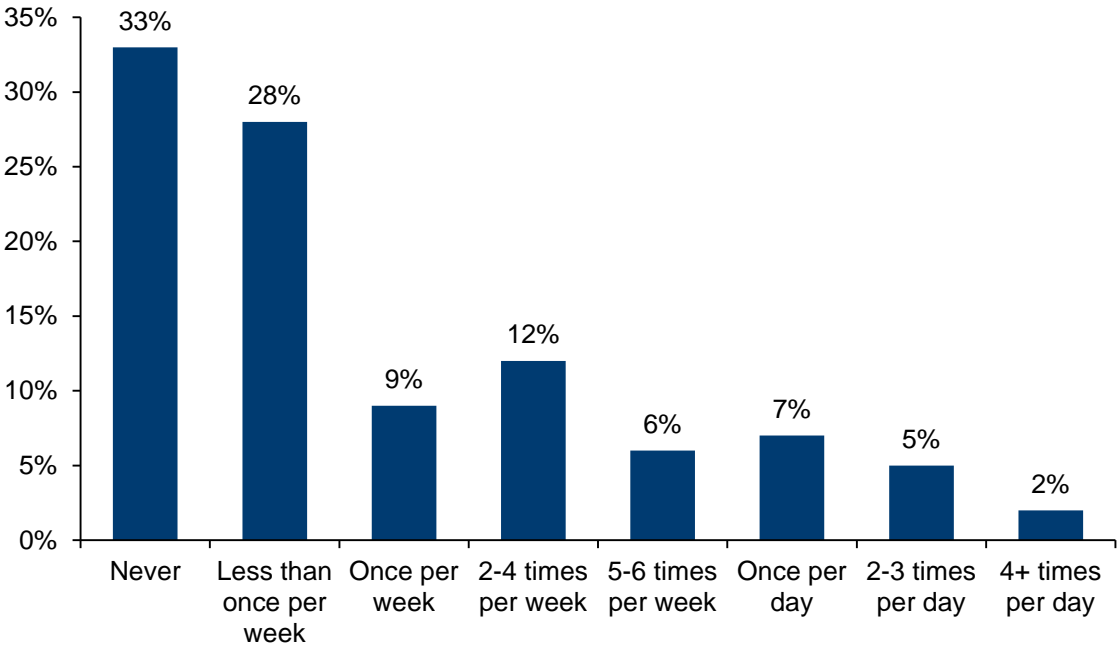
Gatorade, Powerade, etc.



Base: Never (n=130), Less than once per week (n=65), Once per week (n=18), 2-4 times per week (n=16), 5-6 times per week (n=8), Once per day (n=4), 2-3 times per day (n=2), 4+ times per day (n=2), Sample Size = 245

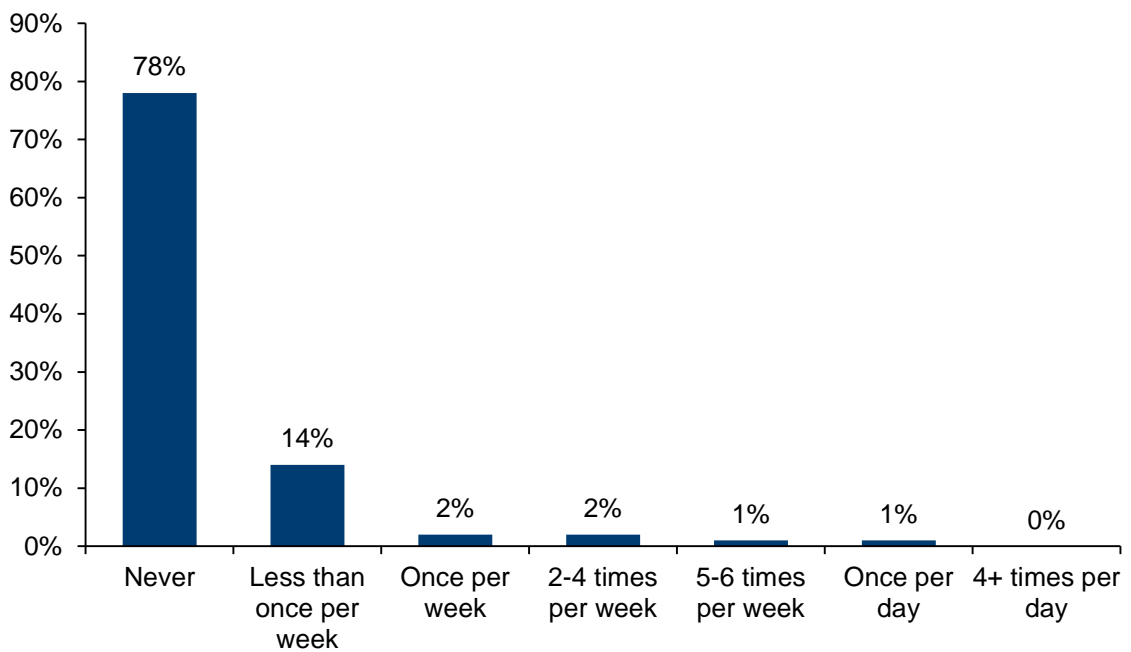
(Community = Beltrami)

Soda or Pop



Base: Never (n=80), Less than once per week (n=68), Once per week (n=21), 2-4 times per week (n=29), 5-6 times per week (n=15), Once per day (n=16), 2-3 times per day (n=12), 4+ times per day (n=5), Sample Size = 246
(Community = Beltrami)

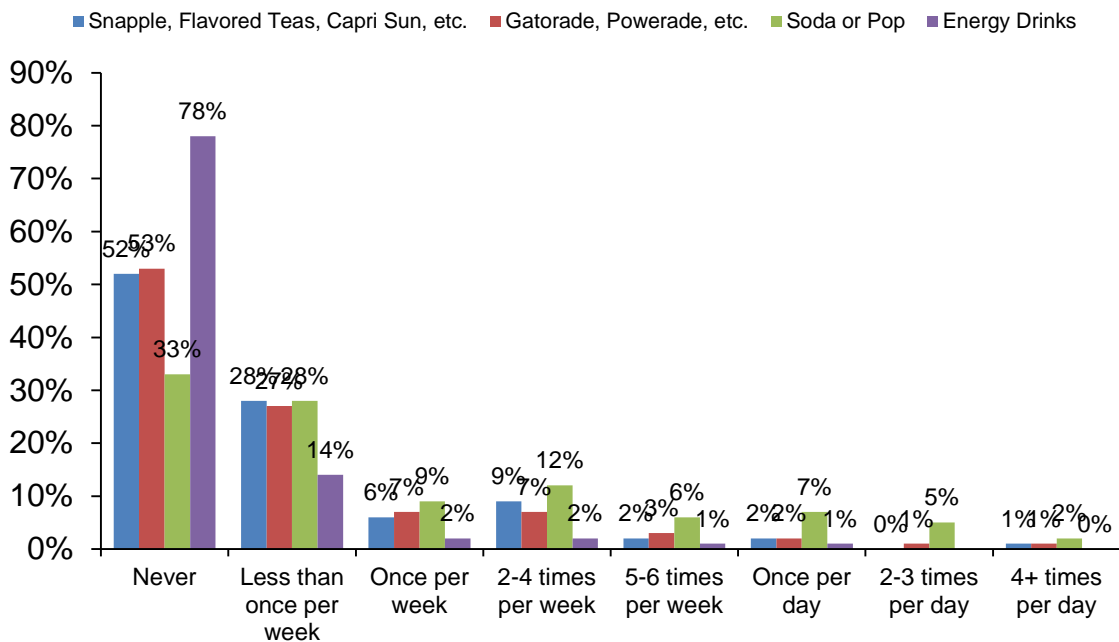
Energy Drinks



Base: Never (n=190), Less than once per week (n=35), Once per week (n=6), 2-4 times per week (n=6), 5-6 times per week (n=2), Once per day (n=3), 4+ times per day (n=1), Sample Size = 243

(Community = Beltrami)

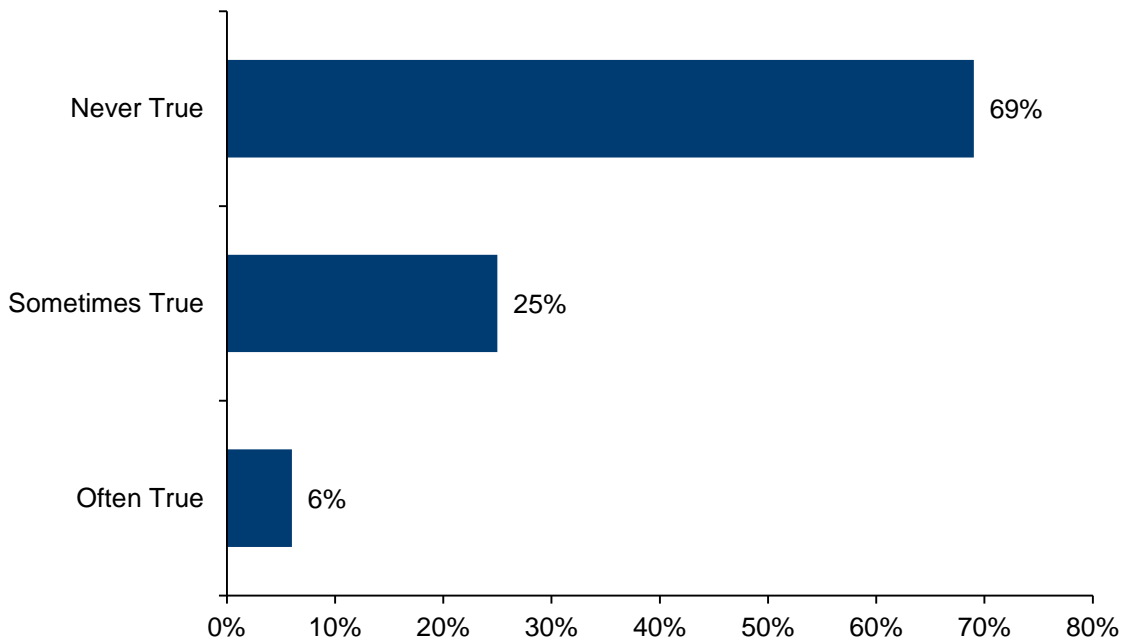
Sugar Sweetened Drinks



Sample Size = Variable

(Community = Beltrami)

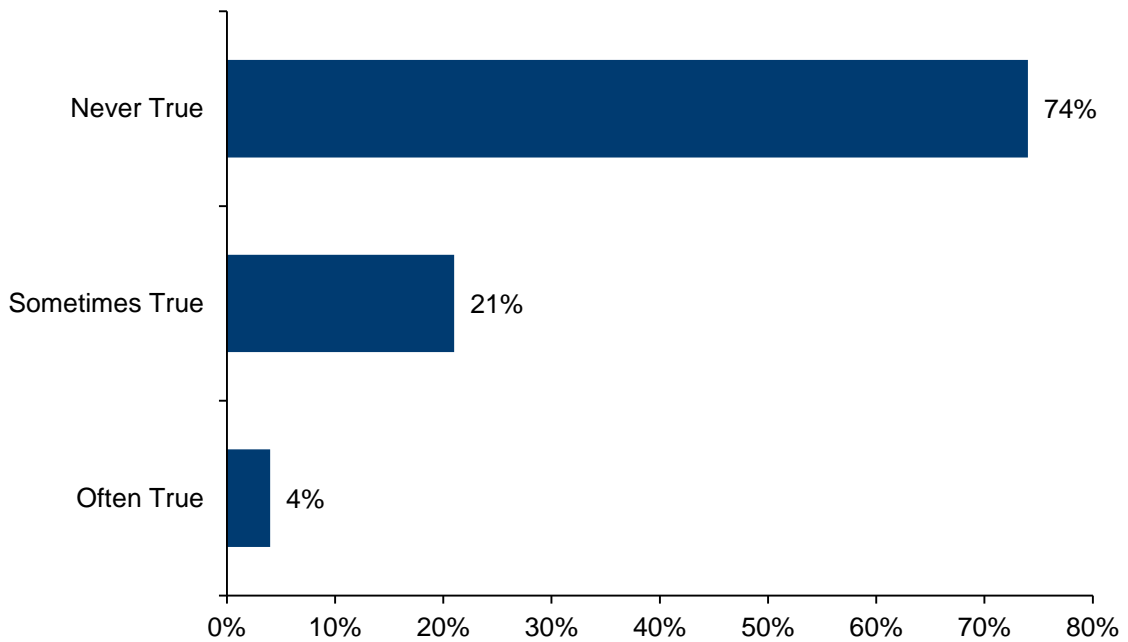
Worried whether our food would run out before we got money to buy more.



Base: Often True (n=14), Sometimes True (n=63), Never True (n=171), Sample Size = 248

(Community = Beltrami)

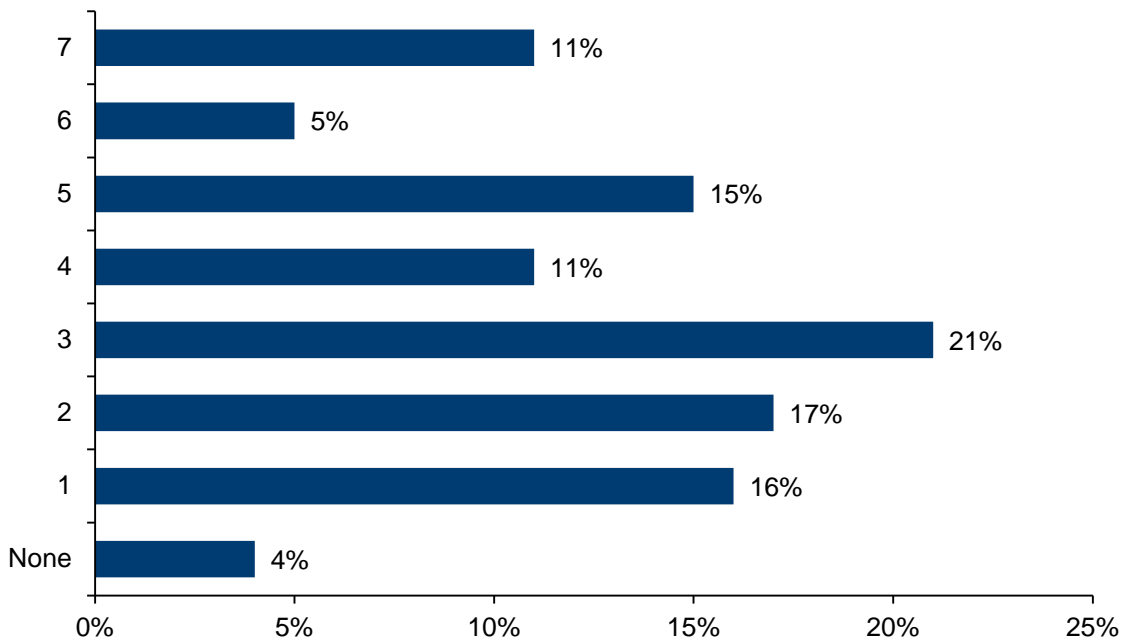
The food that we bought just didn't last, and we didn't have money to get more.



Base: Often True (n=11), Sometimes True (n=53), Never True (n=183), Sample Size = 247

(Community = Beltrami)

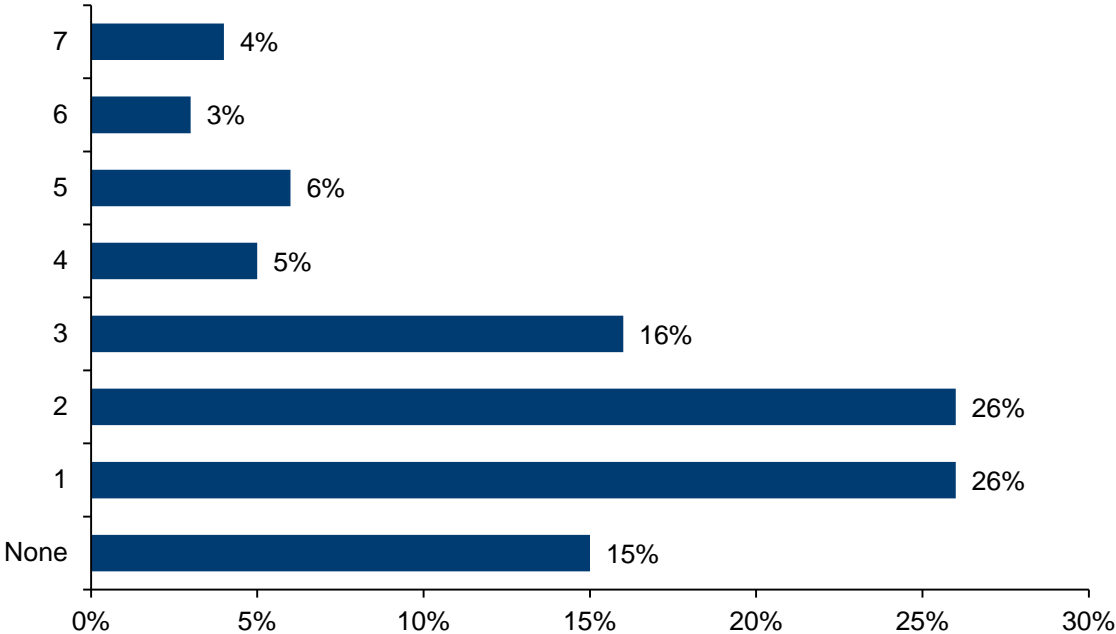
Days Per Week of Moderate Physical Activity



Base: None (n=8), 1 (n=36), 2 (n=39), 3 (n=47), 4 (n=25), 5 (n=33), 6 (n=11), 7 (n=24), Sample Size = 223

(Community = Beltrami)

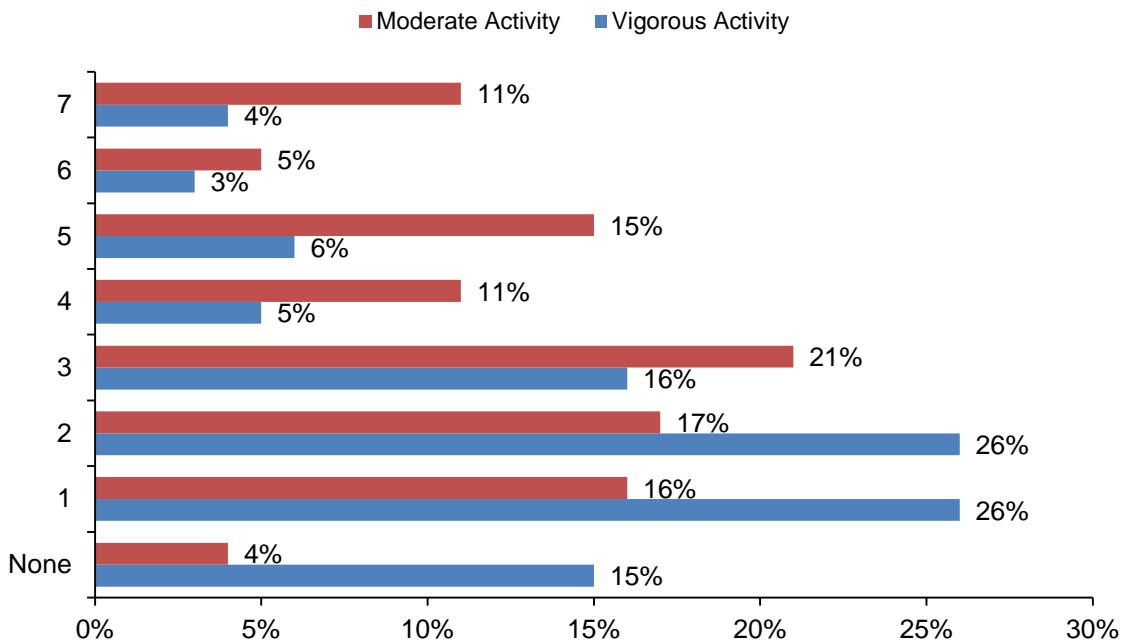
Days Per Week of Vigorous Physical Activity



Base: None (n=28), 1 (n=50), 2 (n=50), 3 (n=30), 4 (n=9), 5 (n=11), 6 (n=6), 7 (n=8), Sample Size = 192

(Community = Beltrami)

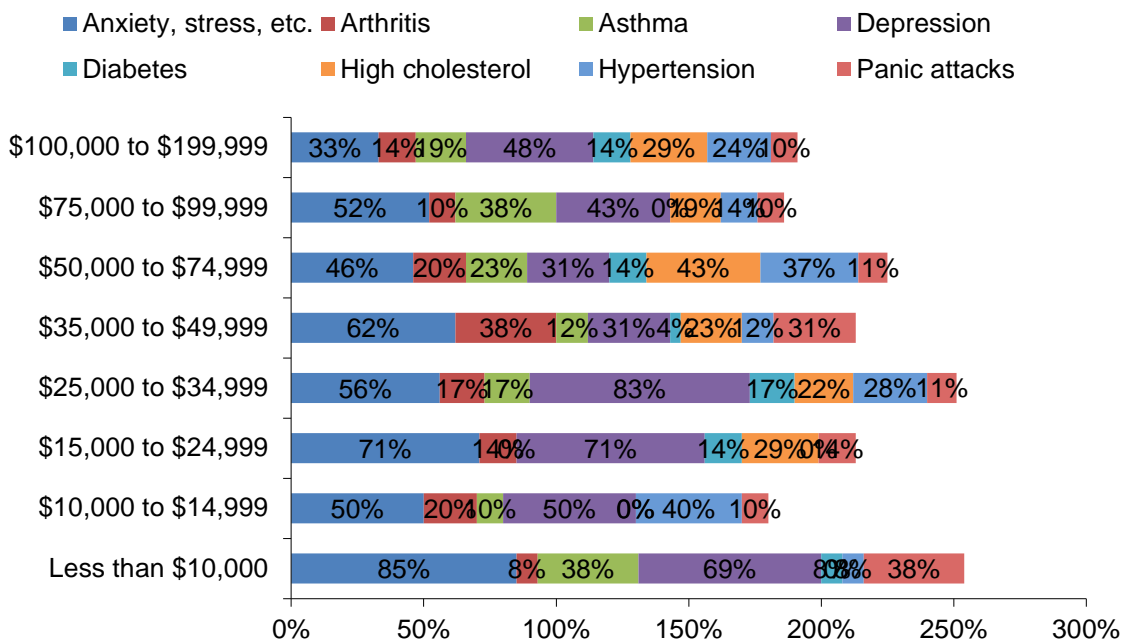
Days Per Week of Physical Activity



Sample Size = Variable

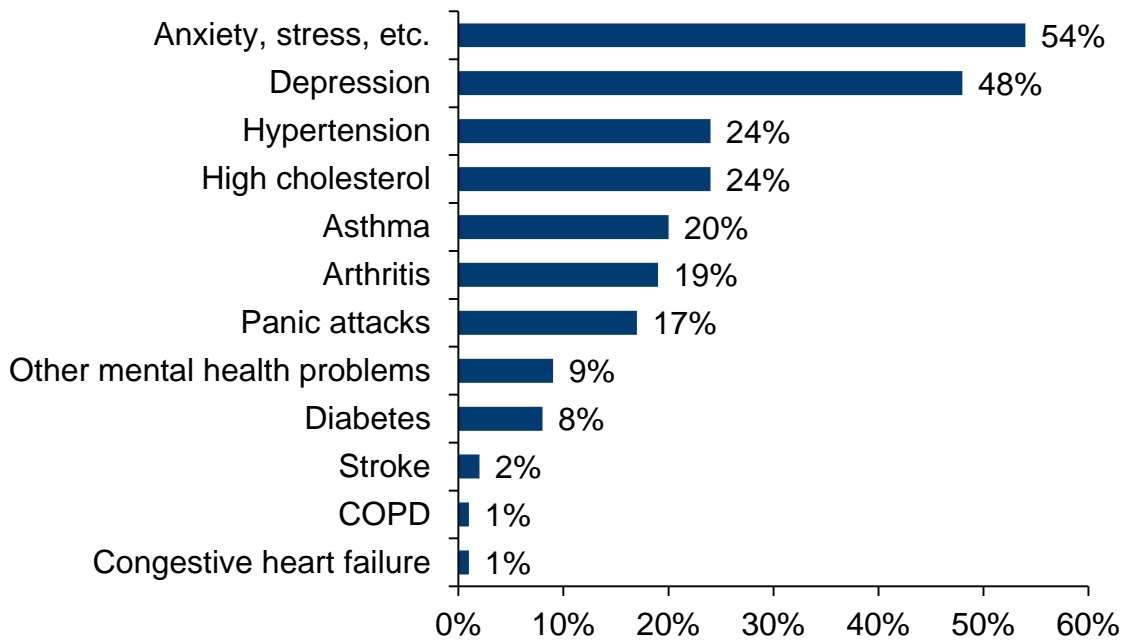
(Community = Beltrami)

Past Diagnosis by Total Household Income



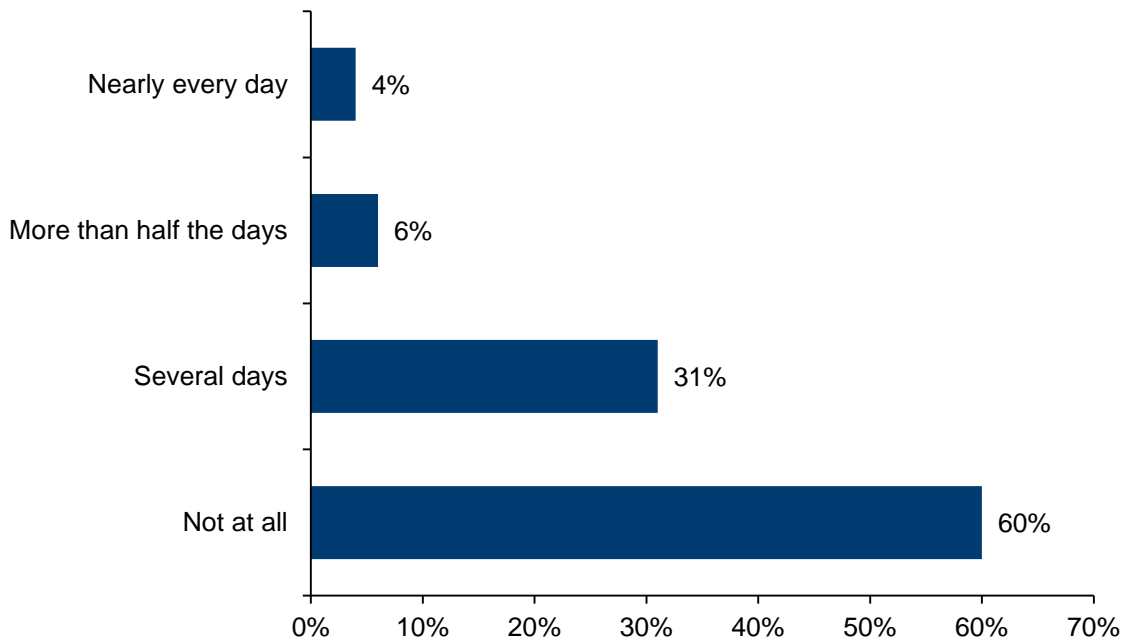
Base: Less than \$10,000 (n=13), \$10,000 to \$14,999 (n=10), \$15,000 to \$24,999 (n=7), \$25,000 to \$34,999 (n=18), \$35,000 to \$49,999 (n=26), \$50,000 to \$74,999 (n=35), \$75,000 to \$99,999 (n=21), \$100,000 to \$199,999 (n=21), Sample Size = 151
 (Community = Beltrami)

Past Diagnosis



Base: Anxiety, stress, etc. (n=90), Arthritis (n=32), Asthma (n=33), Congestive heart failure (n=2), COPD (n=2), Depression (n=80), Diabetes (n=14), High cholesterol (n=41), Hypertension (n=40), Other mental health problems (n=15), Panic attacks (n=28), Stroke (n=2). Sample Size = 168

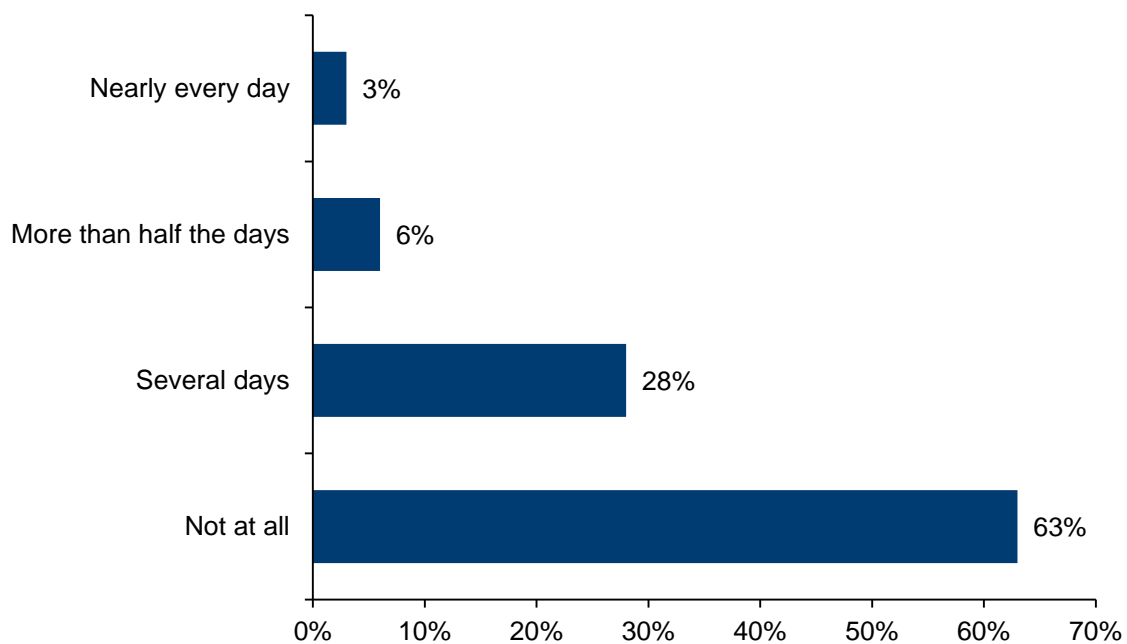
Little Interest or Pleasure in Doing Things



Base: Not at all (n=148), Several days (n=76), More than half the days (n=15), Nearly every day (n=9), Sample Size = 248

(Community = Beltrami)

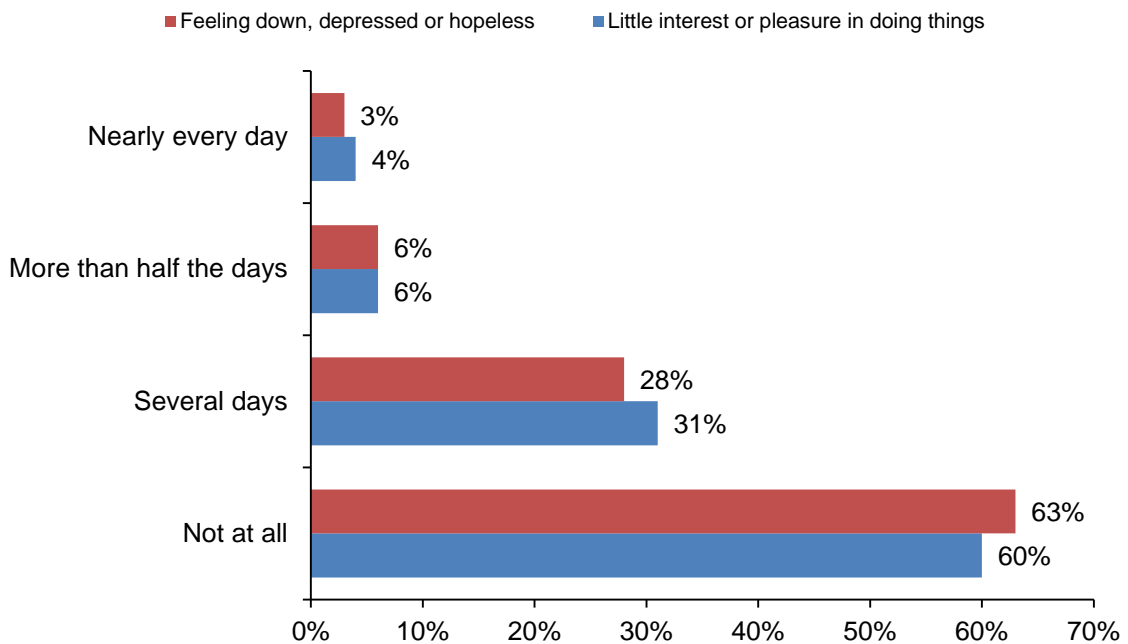
Feeling Down, Depressed or Hopeless



Base: Not at all (n=154), Several days (n=70), More than half the days (n=15), Nearly every day (n=7), Sample Size = 246

(Community = Beltrami)

Over the past two weeks, how often have you been bothered by either of the following issues?

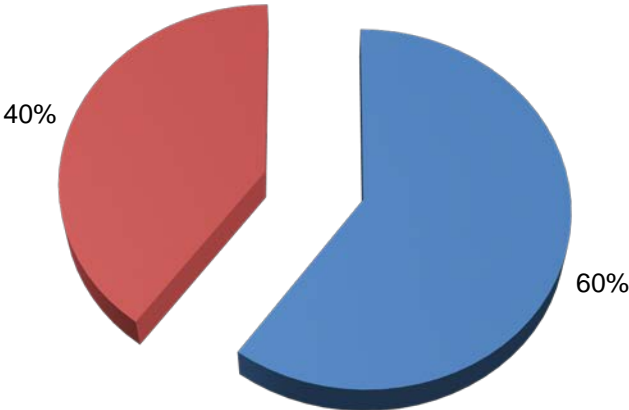


Sample Size = Variable

(Community = Beltrami)

Have you smoked at least 100 cigarettes in your entire life?

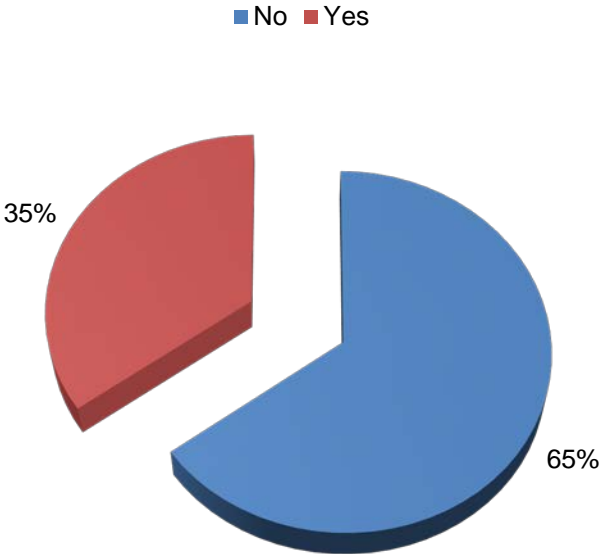
■ No ■ Yes



Base: Yes (n=98), No (n=150), Sample Size = 248

(Community = Beltrami)

Has someone smoked cigarettes, cigars or used vape pens anywhere inside your home?

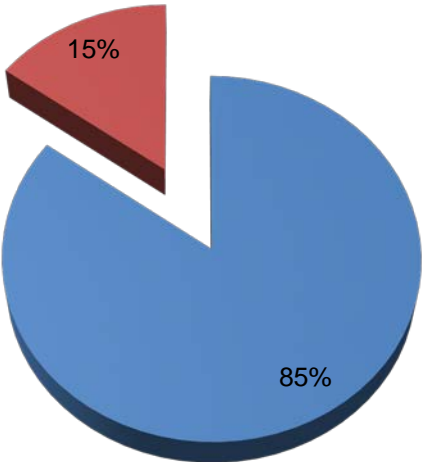


Base: Yes (n=87), No (n=161), Sample Size = 248

(Community = Beltrami)

Have you smelled tobacco smoke in your apartment that comes from another apartment?

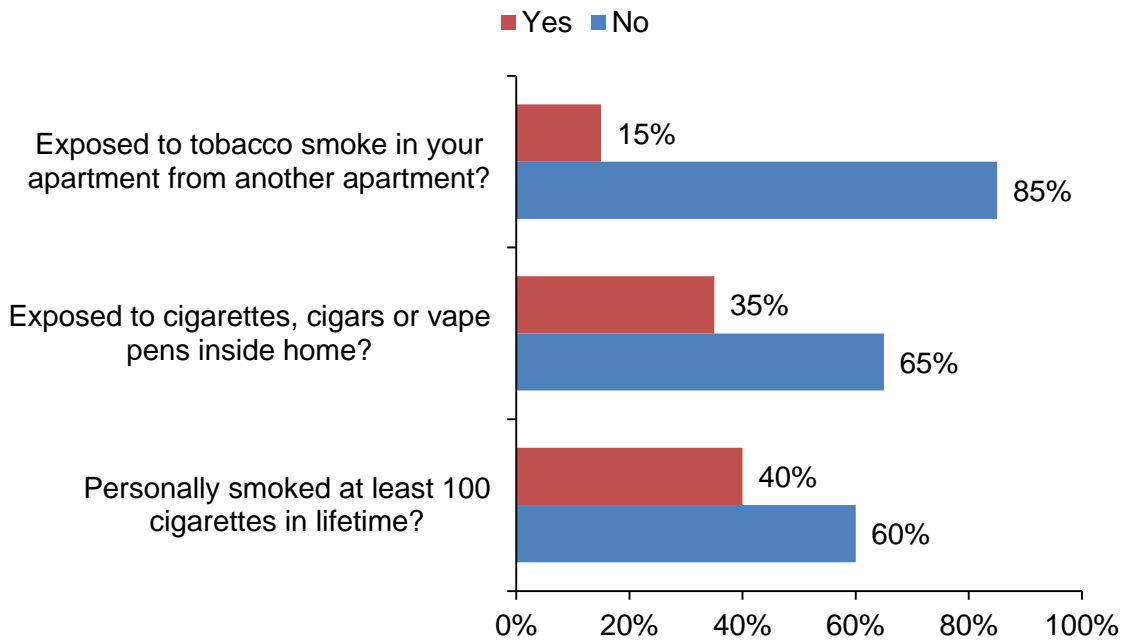
■ No ■ Yes



Base: Yes (n=36), No (n=210), Sample Size = 246

(Community = Beltrami)

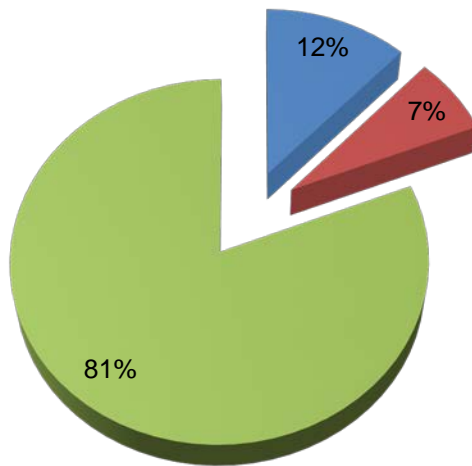
Exposure to Tobacco Smoke



Base: Personally smoked at least 100 cigarettes in lifetime? (n=248), Exposed to cigarettes, cigars or vape pens inside home? (n=248), Exposed to tobacco smoke in your apartment from another apartment? (n=246), Sample Size = Variable (Community = Beltrami)

Do you currently smoke cigarettes?

■ Every day ■ Some days ■ Not at all

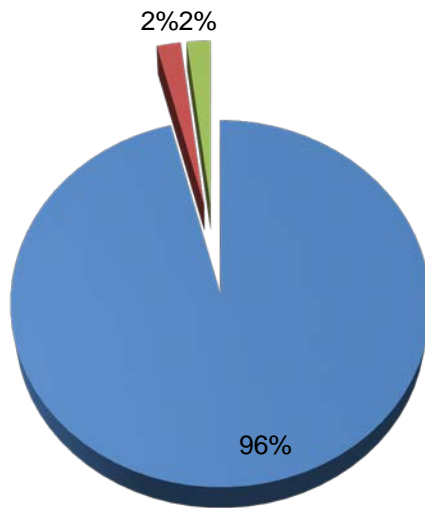


Base: Not at all (n=201), Some days (n=17), Every day (n=30), Sample Size = 248

(Community = Beltrami)

Do you currently use chewing tobacco?

■ Not at all ■ Some days ■ Every day

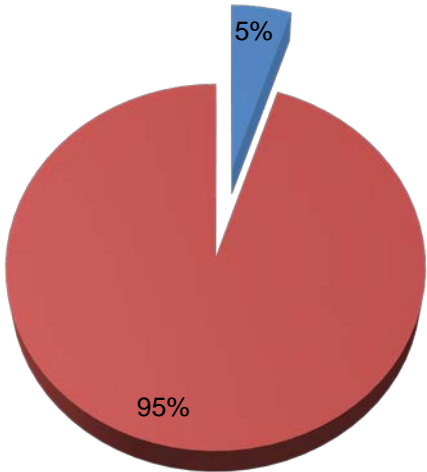


Base: Not at all (n=237), Some days (n=6), Every day (n=4), Sample Size = 247

(Community = Beltrami)

Do you currently use electronics cigarettes or vape?

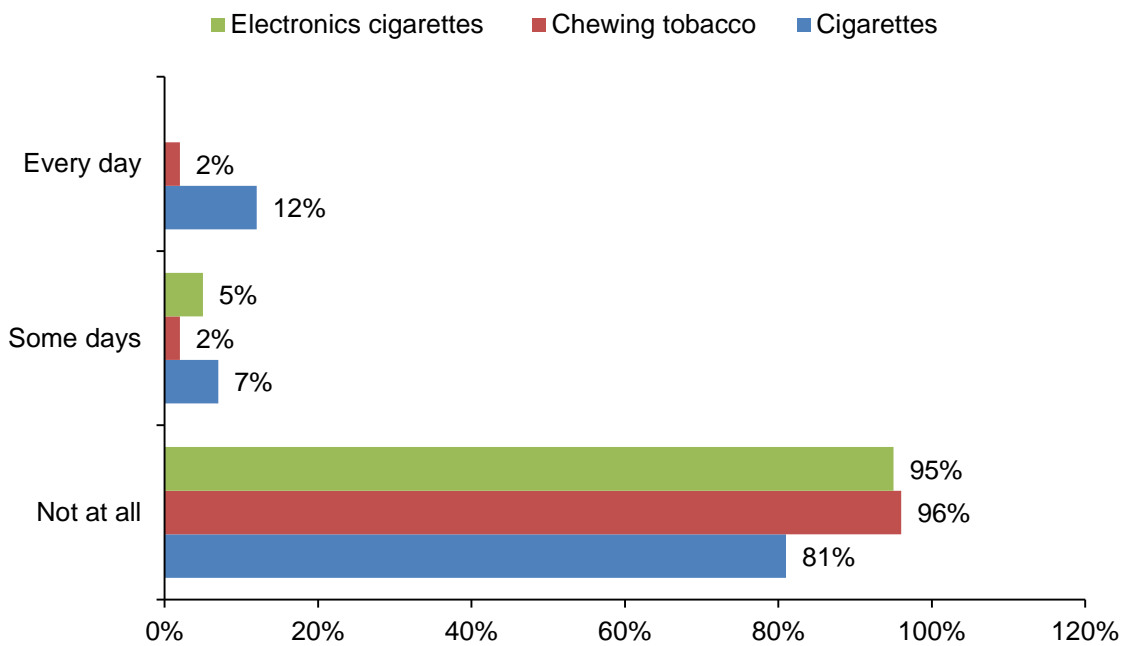
■ Some days ■ Not at all



Base: Not at all (n=235), Some days (n=13), Sample Size = 248

(Community = Beltrami)

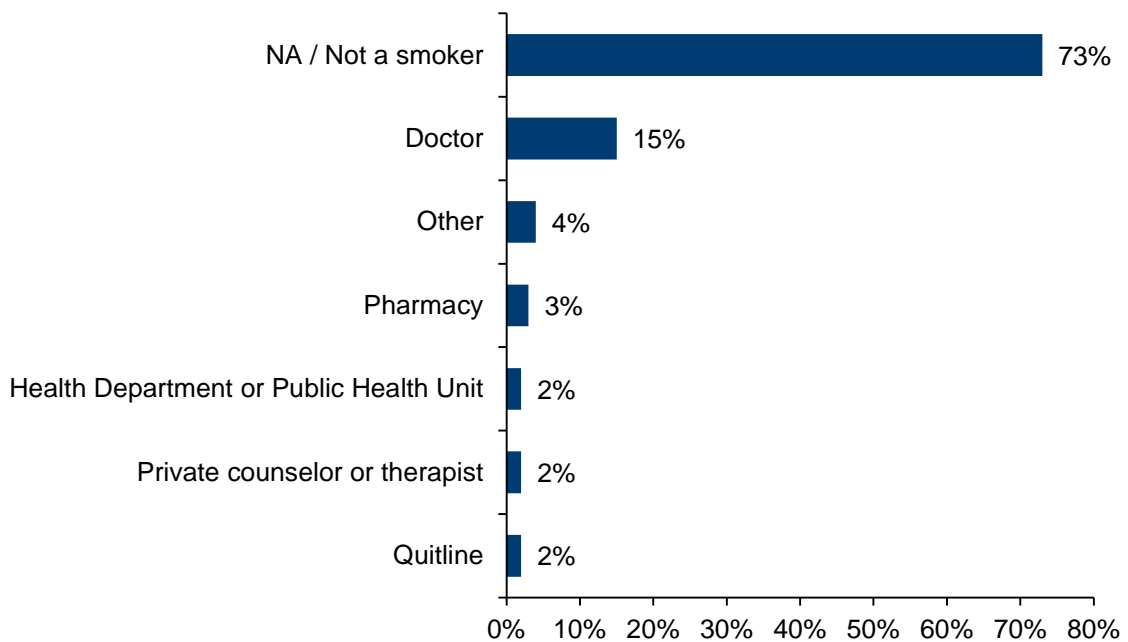
Current Tobacco Use



Sample Size = Variable

(Community = Beltrami)

Where would you go for help if you wanted to quit using tobacco products?

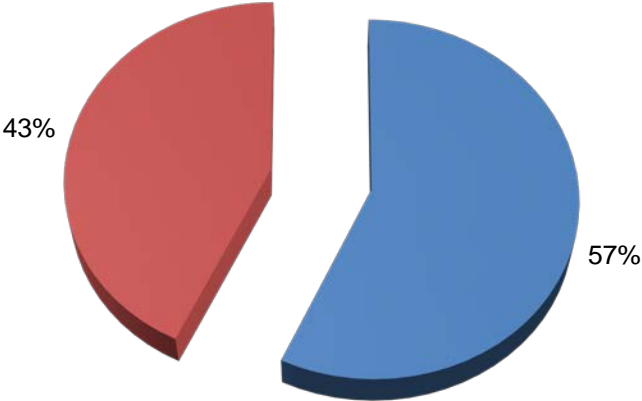


Base: NA / Not a smoker (n=164), Quitline (n=5), Doctor (n=33), Pharmacy (n=7), Private counselor or therapist (n=5), Health Department or Public Health Unit (n=4), Other (n=8), Sample Size = 226

(Community = Beltrami)

During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit? (Smokers only)

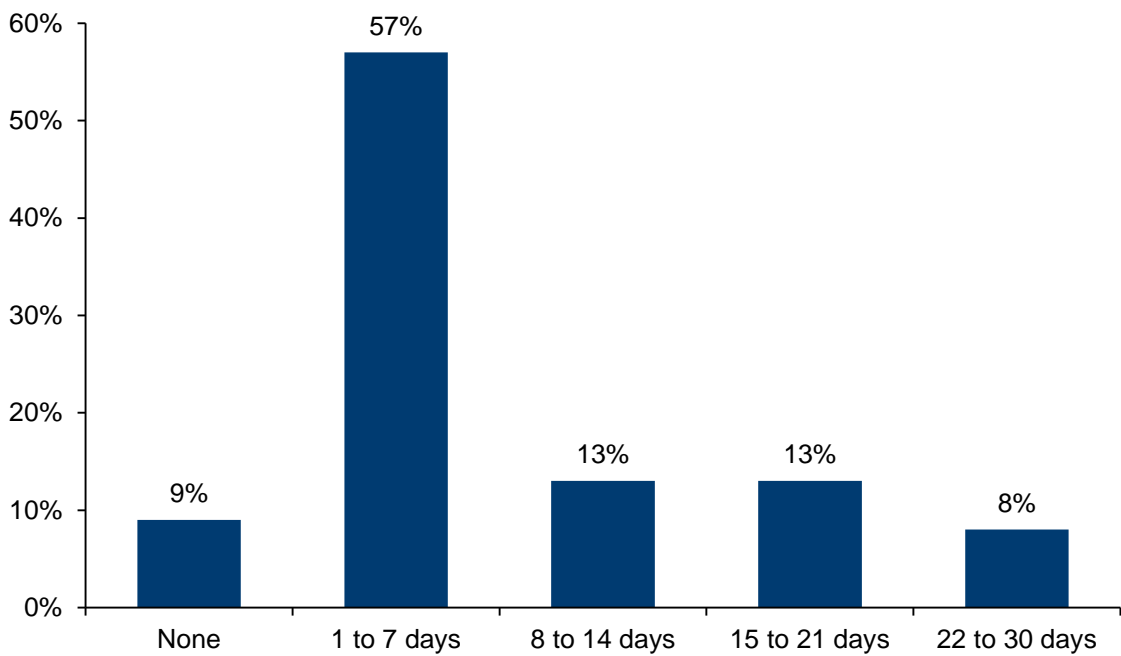
■ Yes ■ No



Base: Yes (n=31), No (n=23), Sample Size = 54

(Community = Beltrami)

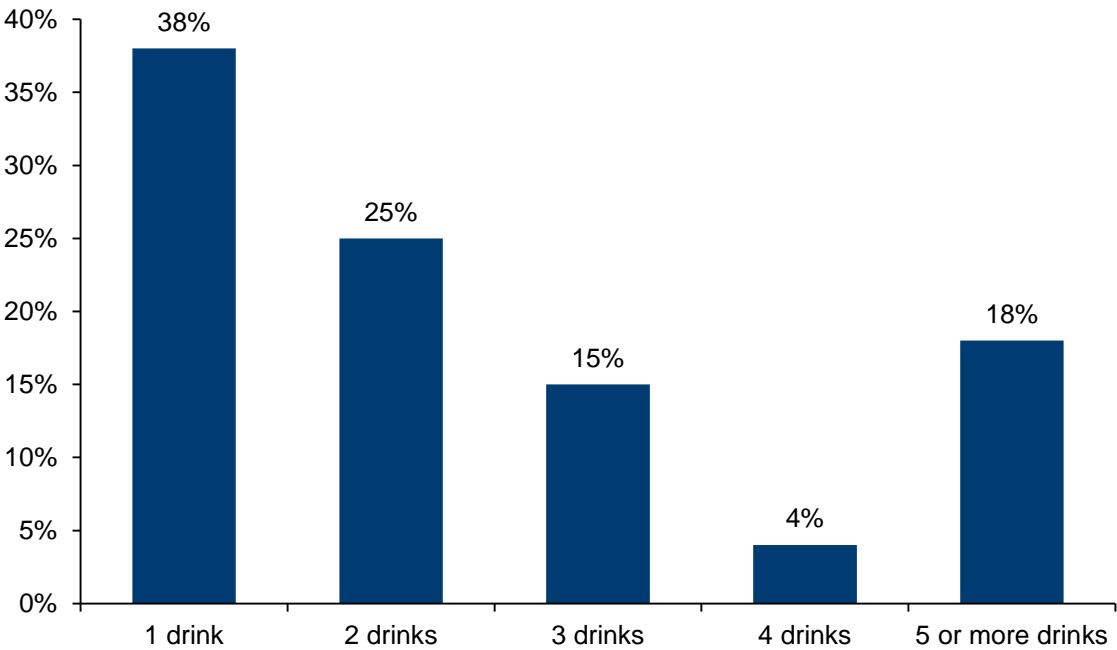
Number of days with at least 1 drink in the past 30 days



Base: None (n=19), 1 to 7 days (n=121), 8 to 14 days (n=27), 15 to 21 days (n=28), 22 to 30 days (n=16), Sample Size = 211

(Community = Beltrami)

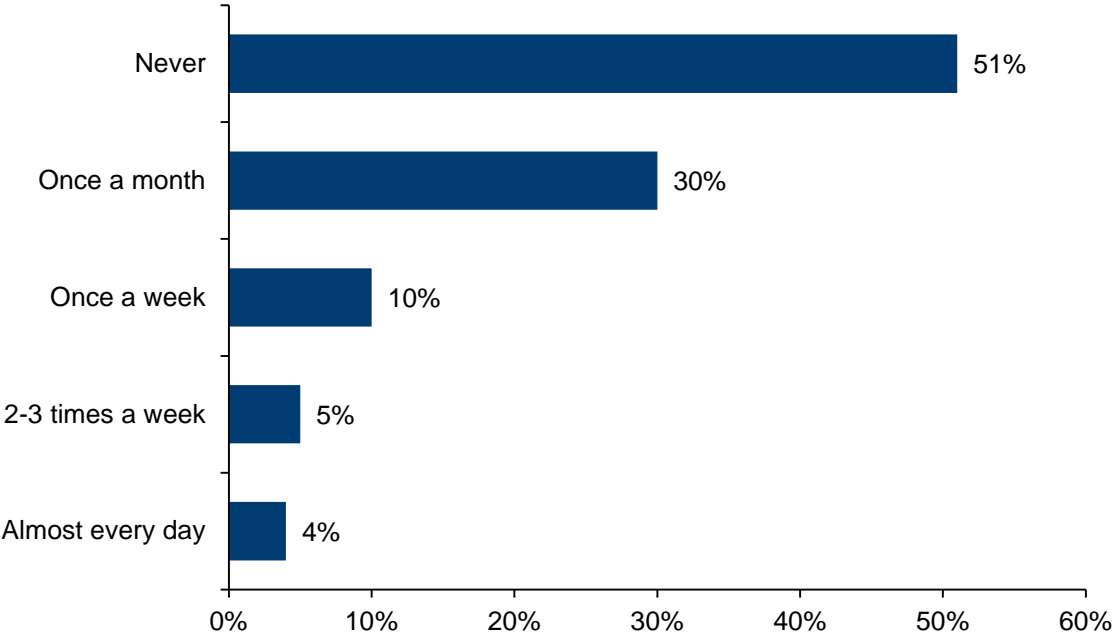
Average number of drinks per day when you drink



Base: 1 drink (n=70), 2 drinks (n=47), 3 drinks (n=27), 4 drinks (n=8), 5 or more drinks (n=33), Sample Size = 185

(Community = Beltrami)

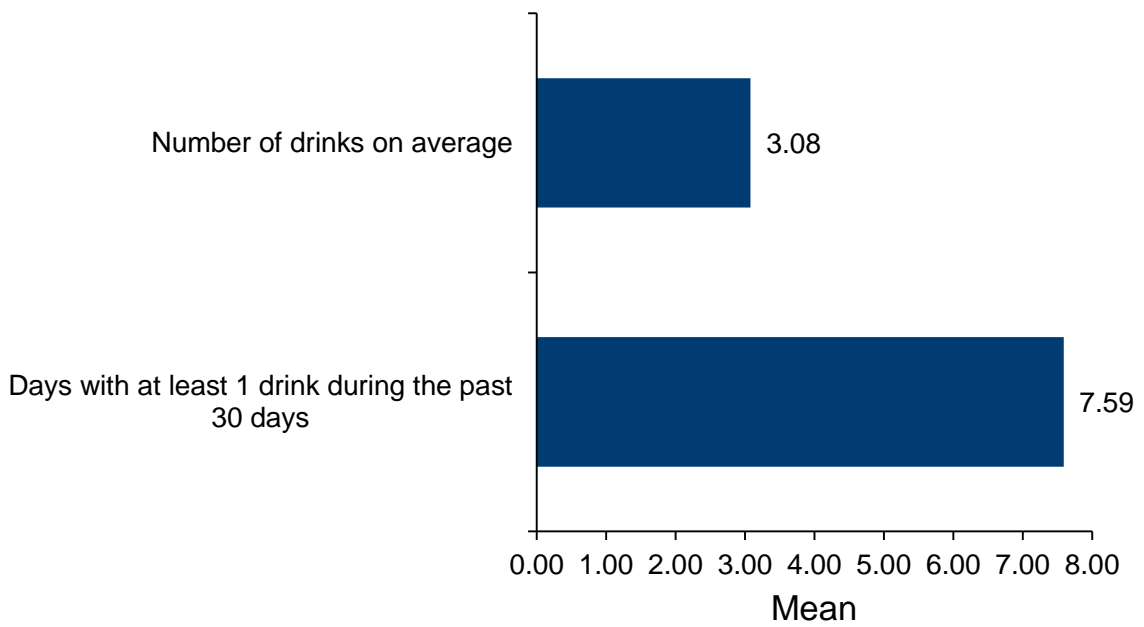
Binge Drinking



Base: Almost every day (n=7), 2-3 times a week (n=10), Once a week (n=20), Once a month (n=57), Never (n=98), Sample Size = 192

(Community = Beltrami)

Average Alcohol Use During the Past 30 Days

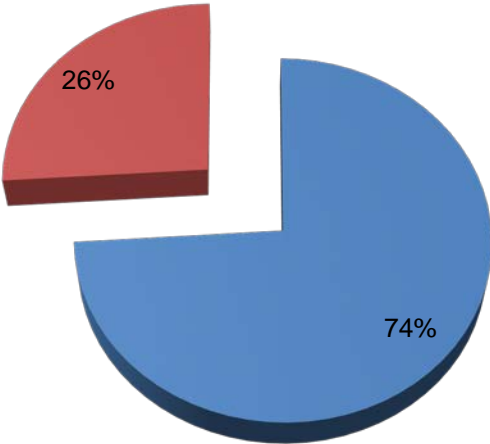


Base: Days with at least 1 drink during the past 30 days (n=211), Number of drinks on average (n=189), Sample Size = Variable

(Community = Beltrami)

Has alcohol use had a harmful effect on you or a family member in the past two years?

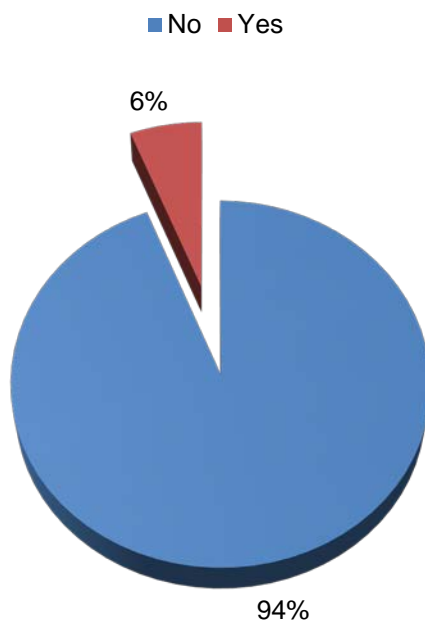
■ No ■ Yes



Base: Yes (n=63), No (n=184), Sample Size = 247

(Community = Beltrami)

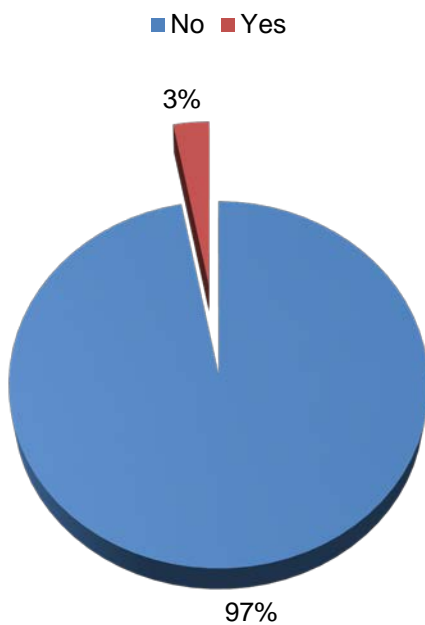
Have you ever wanted help with a prescription or non-prescription drug use?



Base: Yes (n=16), No (n=231), Sample Size = 247

(Community = Beltrami)

Has a family member or friend ever suggested that you get help for substance use?

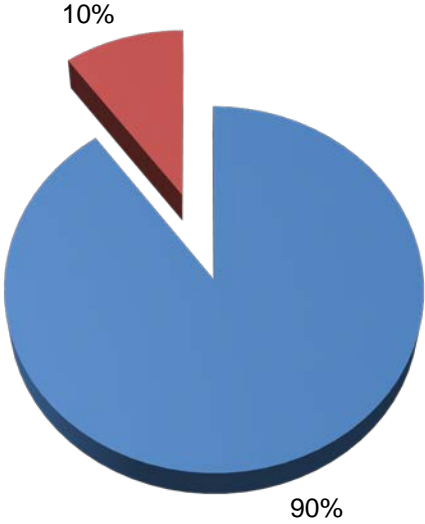


Base: Yes (n=8), No (n=239), Sample Size = 247

(Community = Beltrami)

Has prescription or non-prescription drug use had a harmful effect on you or a family member in the past two years?

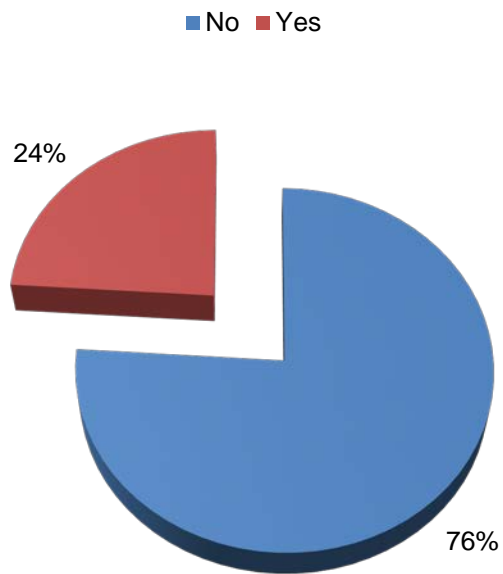
■ No ■ Yes



Base: Yes (n=25), No (n=222), Sample Size = 247

(Community = Beltrami)

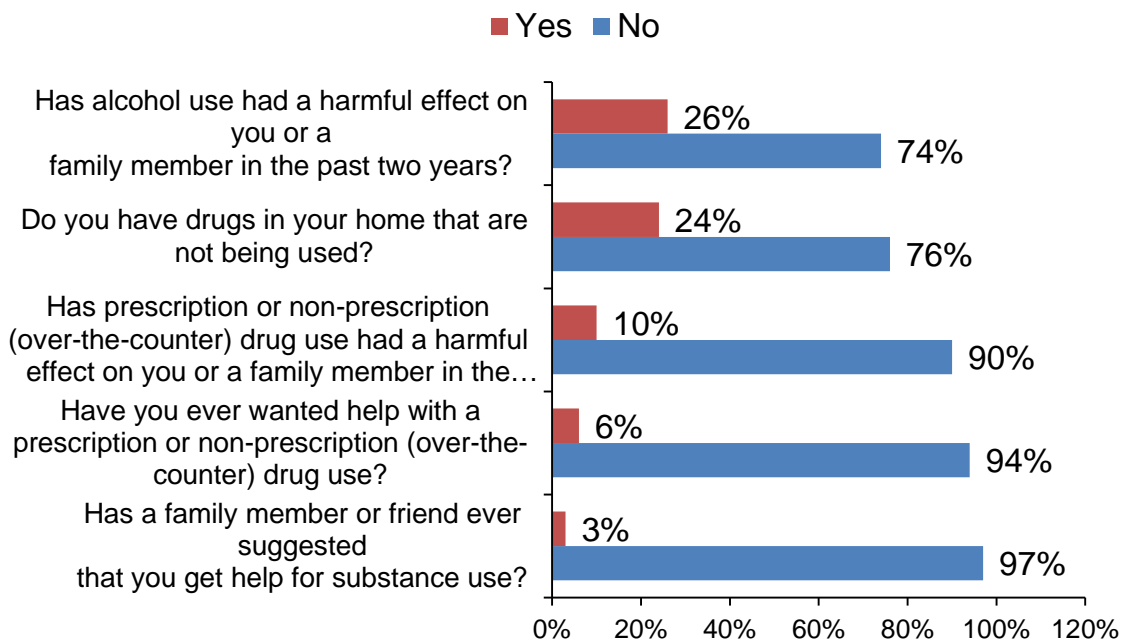
Do you have drugs in your home that are not being used?



Base: Yes (n=60), No (n=187), Sample Size = 247

(Community = Beltrami)

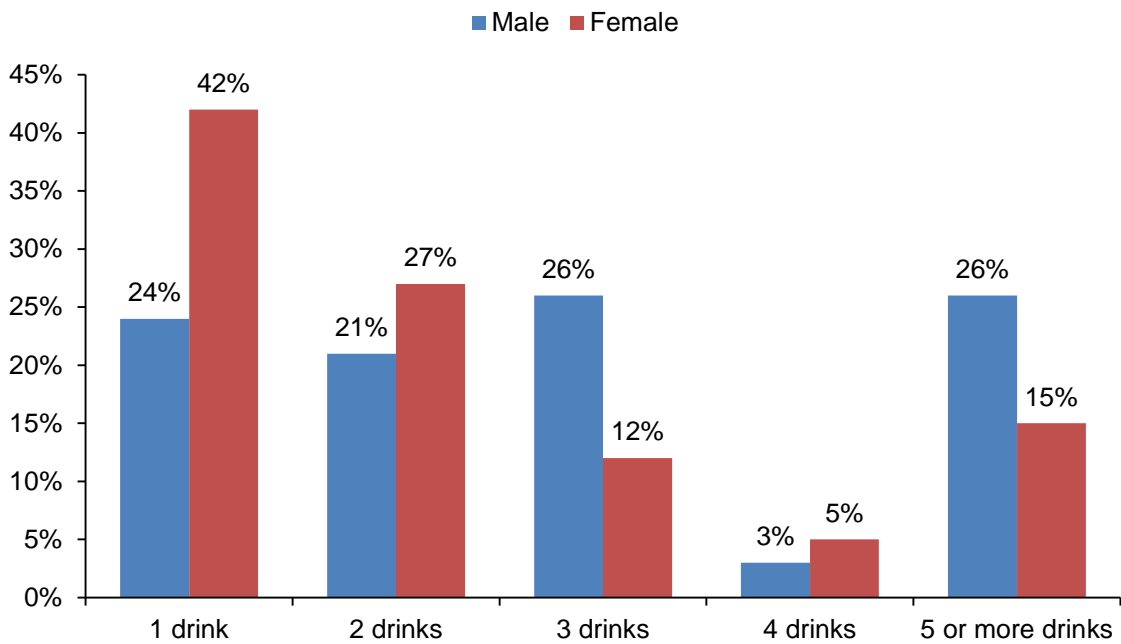
Drug and Alcohol Issues



Sample Size = 247

(Community = Beltrami)

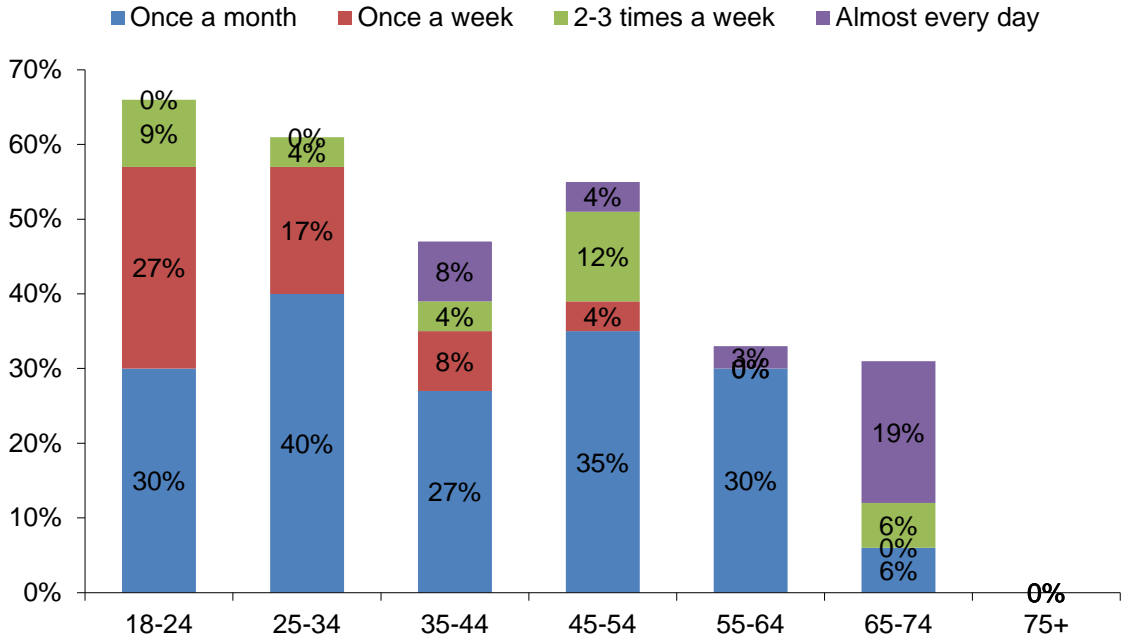
Average number of drinks per day when you drink by gender



Base: 1 drink (n=70), 2 drinks (n=47), 3 drinks (n=27), 4 drinks (n=8), 5 or more drinks (n=32), Sample Size = 184

(Community = Beltrami)

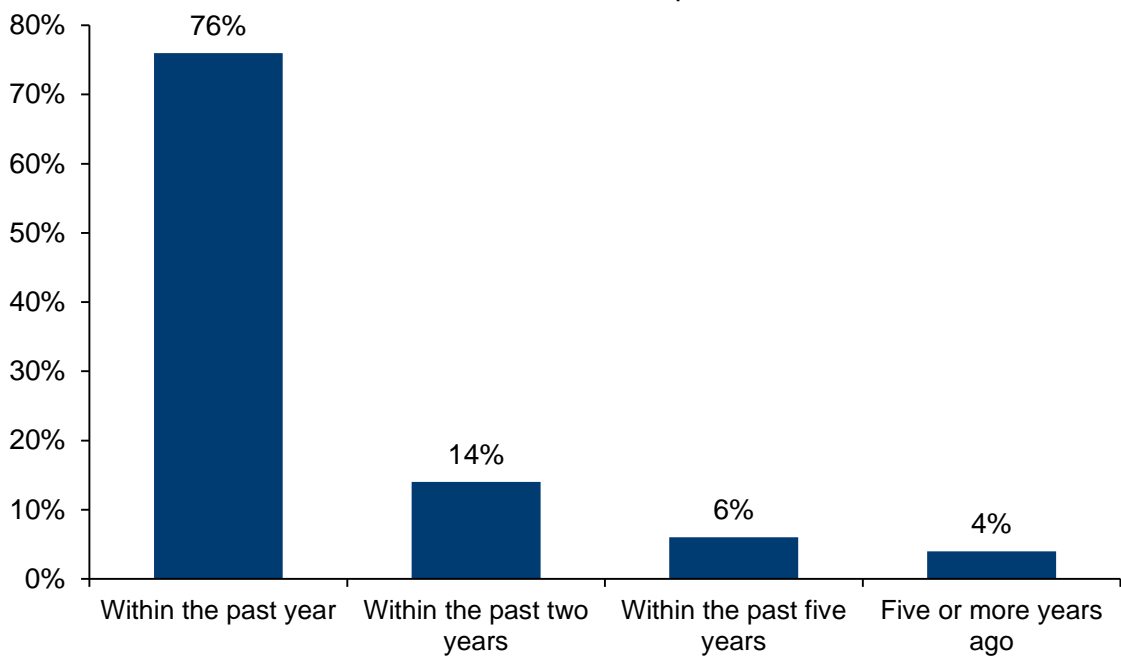
Binge Drinking past 30 days by Age



Base: 18-24 (n=33), 25-34 (n=48), 35-44 (n=26), 45-54 (n=26), 55-64 (n=37), 65-74 (n=16), 75+ (n=5), Sample Size = 191

(Community = Beltrami)

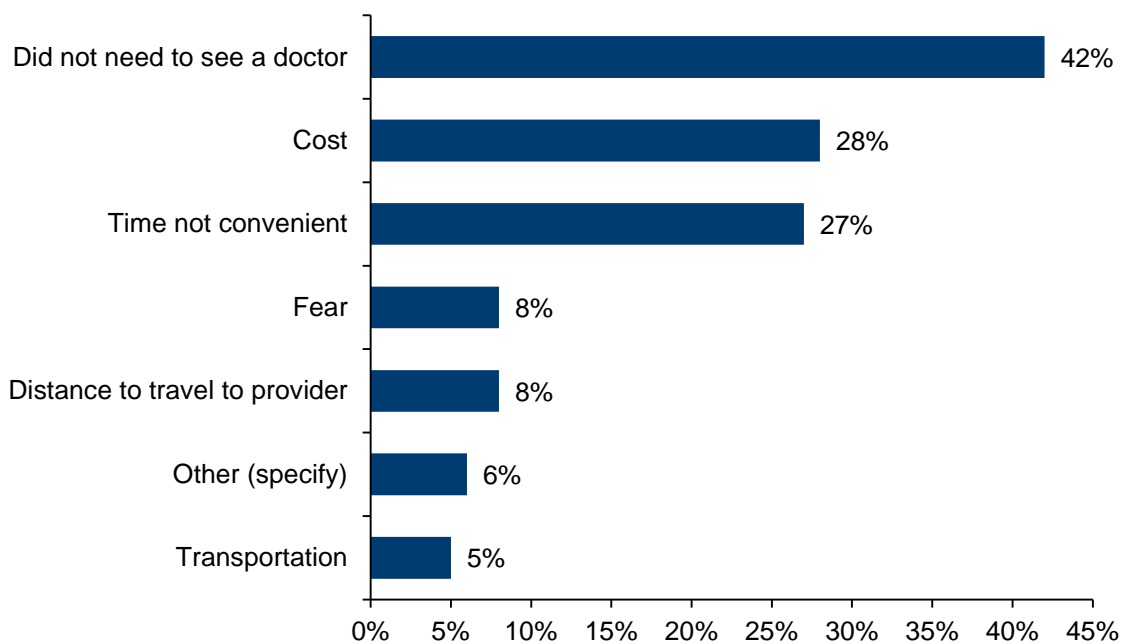
How long has it been since you last visited a doctor or health care provider for a routine checkup?



Base: Within the past year (n=182), Within the past two years (n=34), Within the past five years (n=14), Five or more years ago (n=10), Sample Size = 240

(Community = Beltrami)

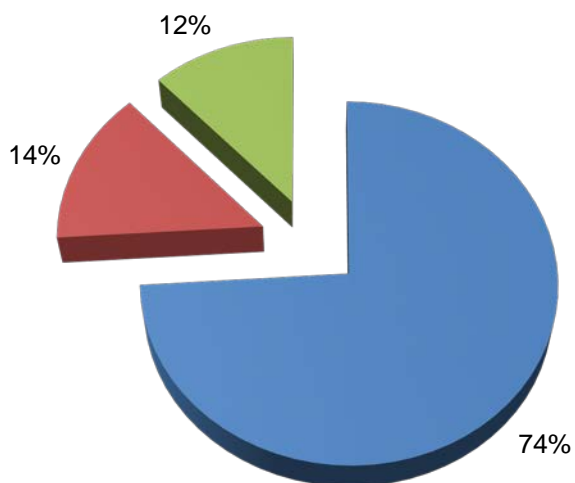
Barriers to Routine Checkup



Base: Distance to travel to provider (n=5), Cost (n=18), Fear (n=5), Transportation (n=3), Time not convenient (n=17), Did not need to see a doctor (n=27), Other (specify) (n=4), Sample Size = 64
(Community = Beltrami)

Has your medical provider reviewed the risks and benefits of screenings and preventive services with you?

■ Yes ■ No ■ Don't know / Unsure

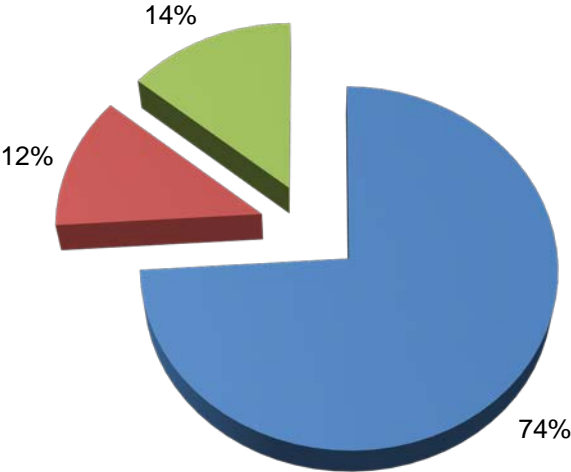


Base: Yes (n=182), No (n=35), Don't know / Unsure (n=29), Sample Size = 246

(Community = Beltrami)

Has your medical provider allowed you to make a choice about having screenings or preventive services?

■ Yes ■ No ■ Don't know / Unsure

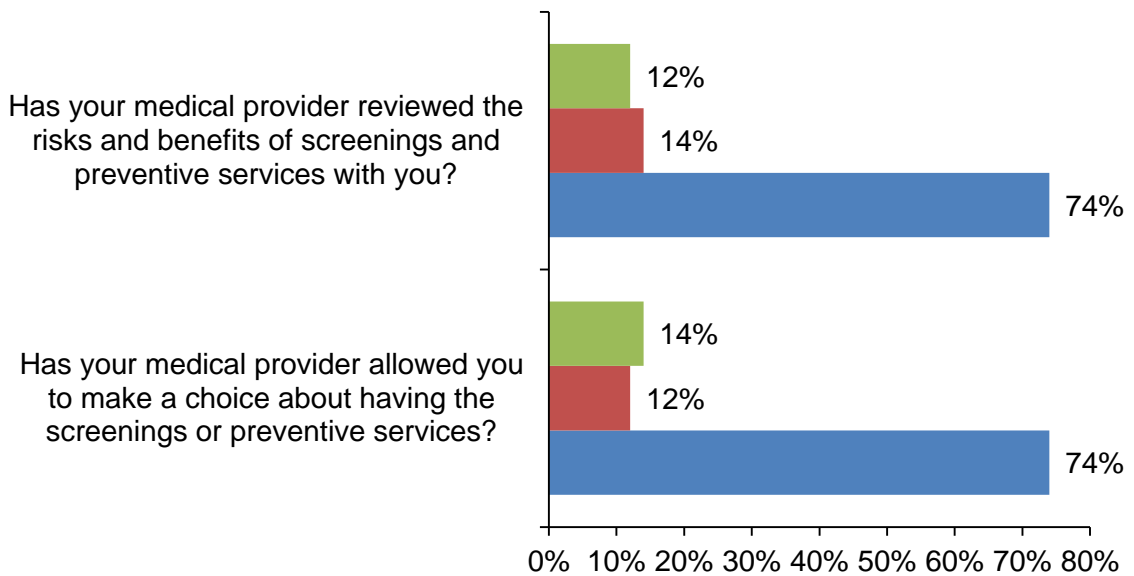


Base: Yes (n=183), No (n=29), Don't know / Unsure (n=34), Sample Size = 246

(Community = Beltrami)

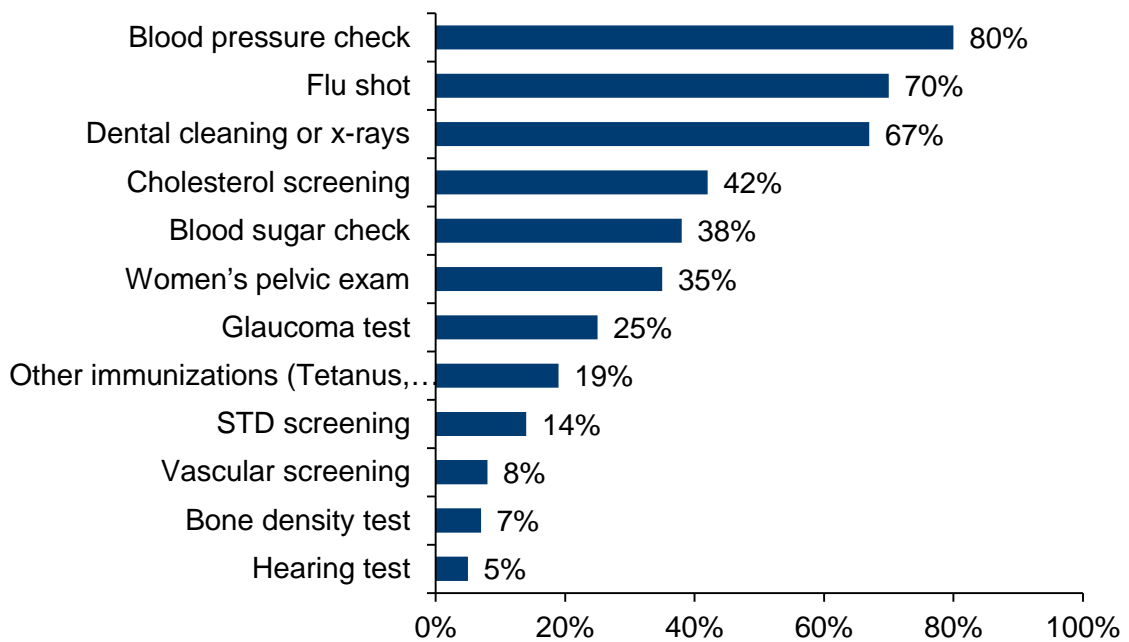
Screenings

■ Don't know / Unsure ■ No ■ Yes



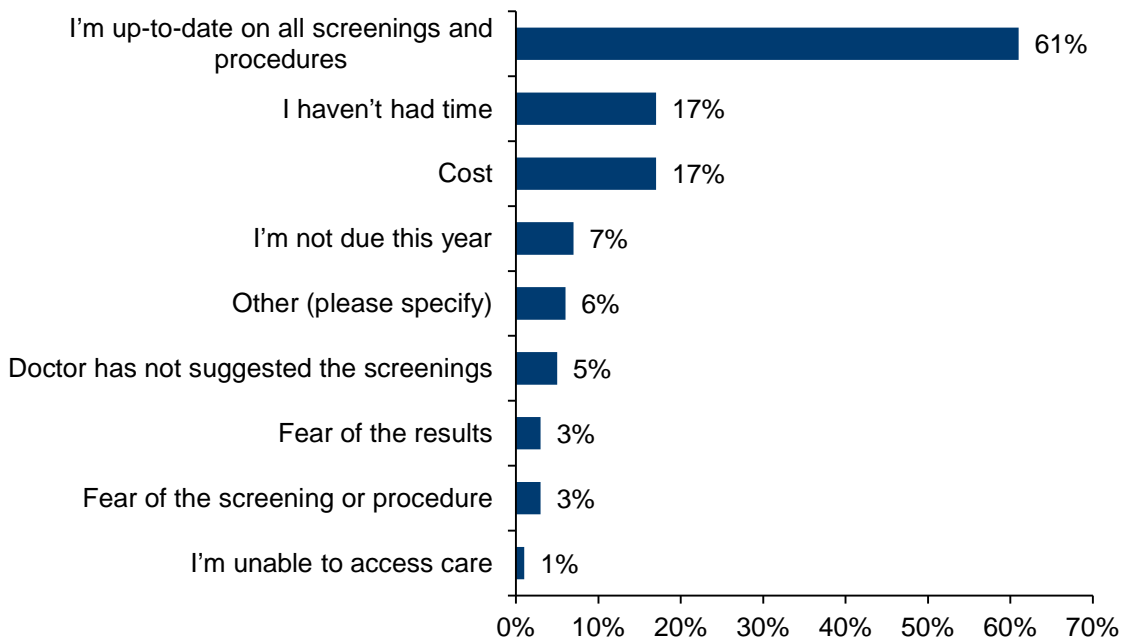
Base: Has your medical provider allowed you to make a choice about having the screenings or preventive services? (n=246), Has your medical provider reviewed the risks and benefits of screenings and preventive services with you? (n=246), Sample Size = 246 (Community = Beltrami)

Preventive Procedures Last Year



Base: Blood pressure check (n=176), Blood sugar check (n=85), Bone density test (n=16), Cholesterol screening (n=92), Dental cleaning or x-rays (n=148), Flu shot (n=155), Other immunizations (Tetanus, Hepatitis A or B) (n=41), Glaucoma test (n=56), Hearing test (n=11), Women's pelvic exam (n=77), STD screening (n=32), Vascular screening (n=17), Sample Size = 221 (Community = Beltrami)

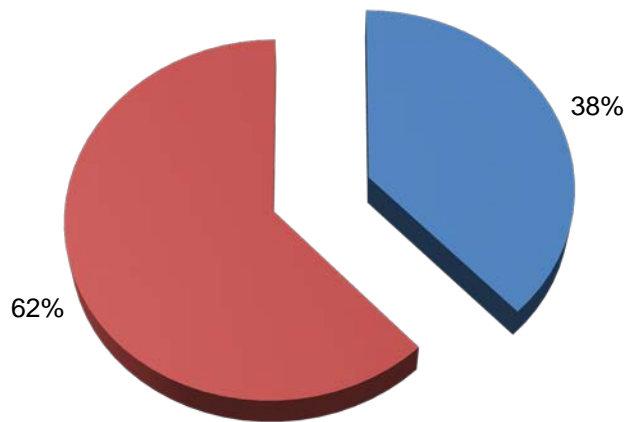
Barriers for Preventive Procedures



Base: I'm up-to-date on all screenings and procedures (n=151), Doctor has not suggested the screenings (n=12), Cost (n=42), I'm unable to access care (n=2), Fear of the screening or procedure (n=8), Fear of the results (n=7), I'm not due this year (n=16), I haven't had time (n=41), Other (please specify) (n=14), Sample Size = 246 (Community = Beltrami)

Do you have children under the age of 18 living in your household?

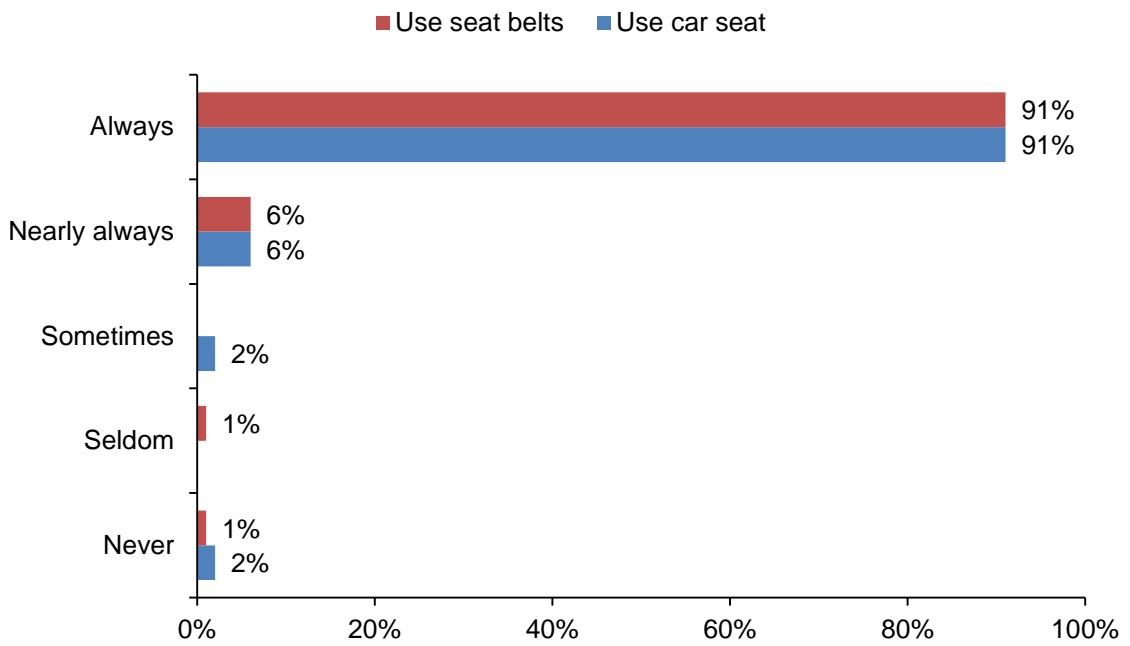
■ Yes ■ No



Base: Yes (n=94), No (n=152), Sample Size = 246

(Community = Beltrami)

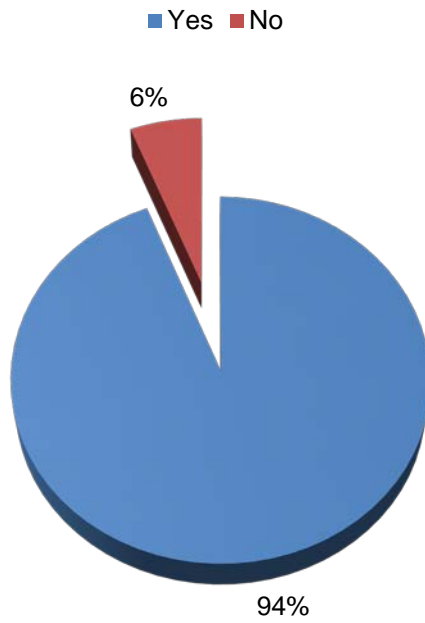
Children's Car Safety



Sample Size = Variable

(Community = Beltrami)

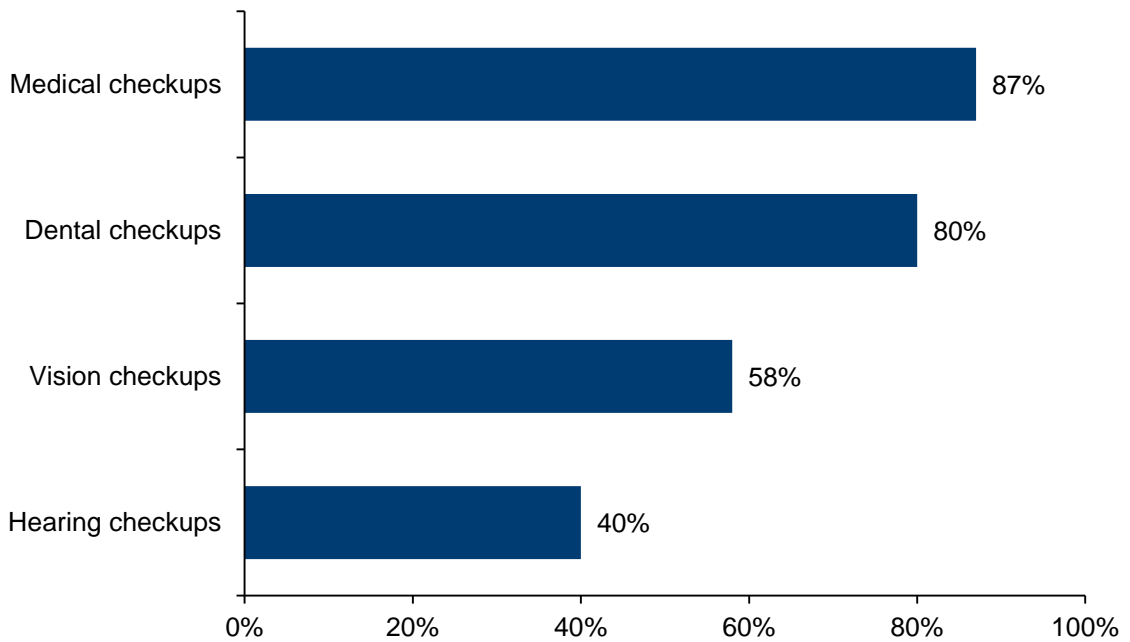
Do you have healthcare coverage for your children or dependents?



Base: Yes (n=87), No (n=6), Sample Size = 93

(Community = Beltrami)

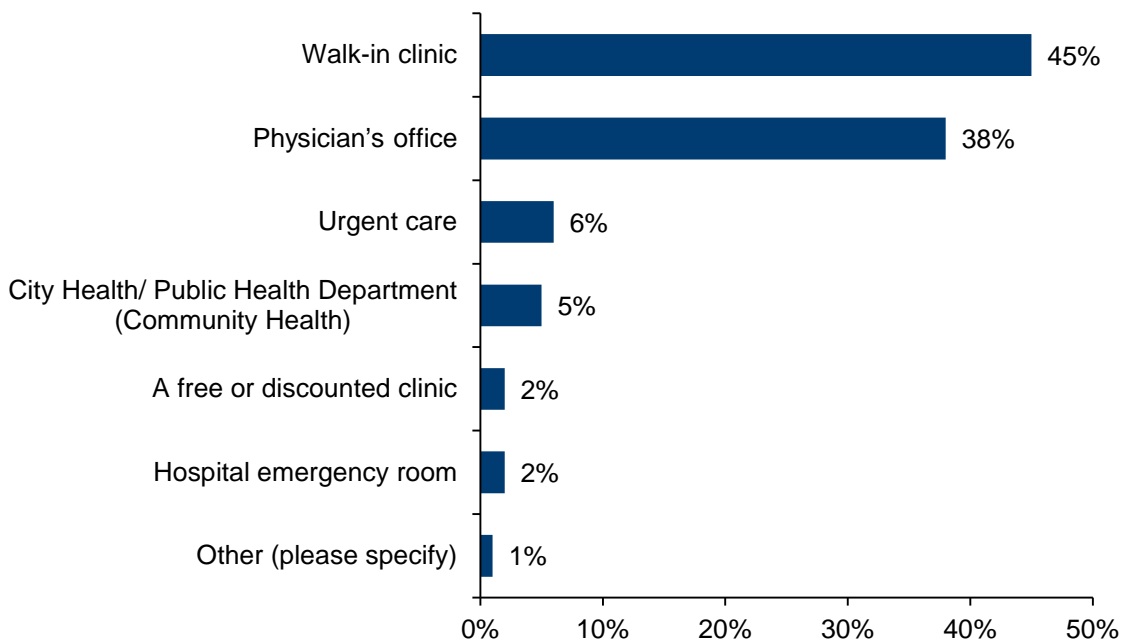
Children's Preventative Services



Base: Dental checkups (n=74), Vision checkups (n=53), Hearing checkups (n=37), Medical checkups (n=80), Sample Size = 92

(Community = Beltrami)

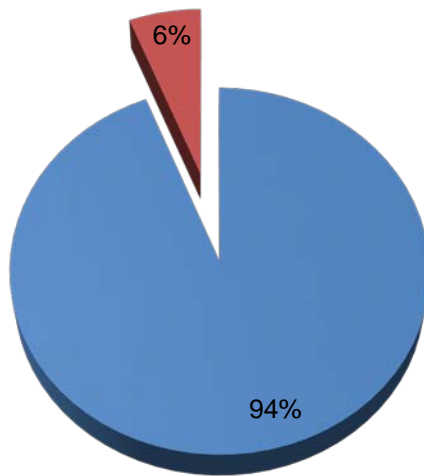
Where do you most often take your children when they are sick and need to see a health care provider?



Base: Physician's office (n=36), Hospital emergency room (n=2), Urgent care (n=6), Walk-in clinic (n=42), City Health/ Public Health Department (Community Health) (n=5), A free or discounted clinic (n=2), Other (please specify) (n=1), Sample Size = 94
(Community = Beltrami)

Have you ever been diagnosed with cancer?

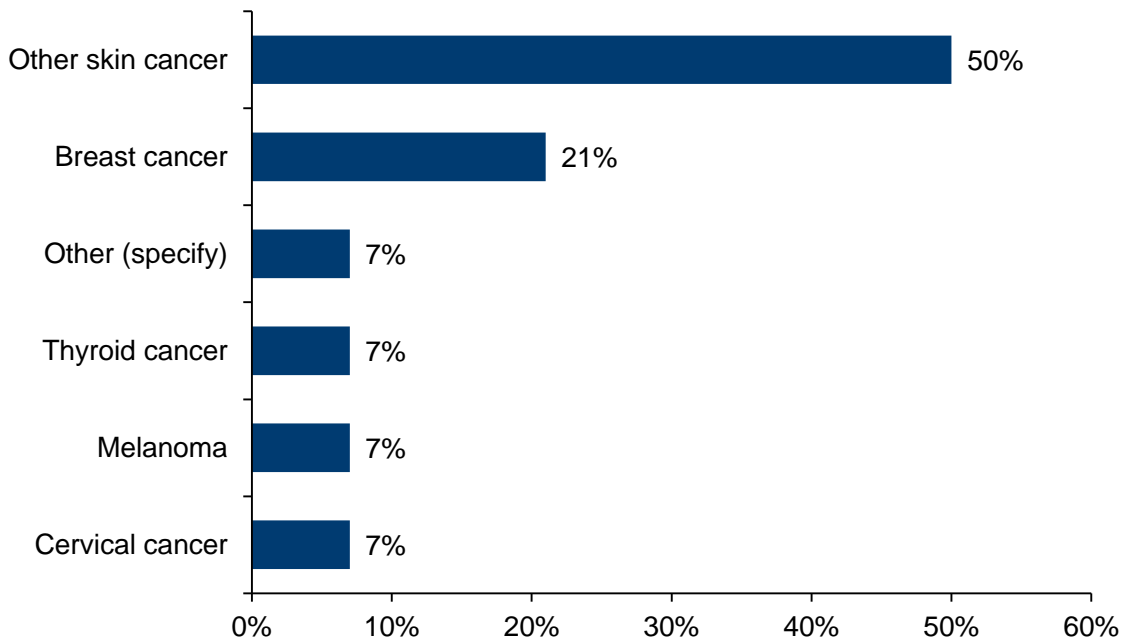
■ No ■ Yes



Base: Yes (n=14), No (n=231), Sample Size = 245

(Community = Beltrami)

Type of Cancer

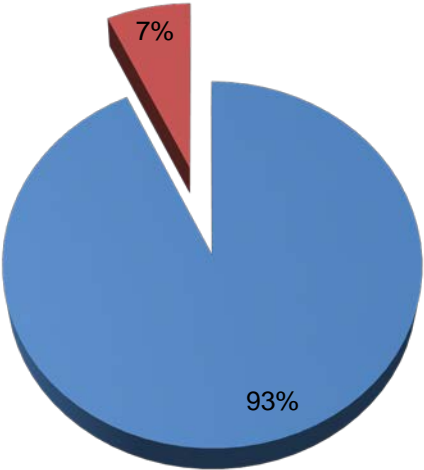


Base: Breast cancer (n=3), Cervical cancer (n=1), Melanoma (n=1), Other skin cancer (n=7), Thyroid cancer (n=1), Other (specify) (n=1), Sample Size = 14

(Community = Beltrami)

Do you currently have any kind of health insurance?

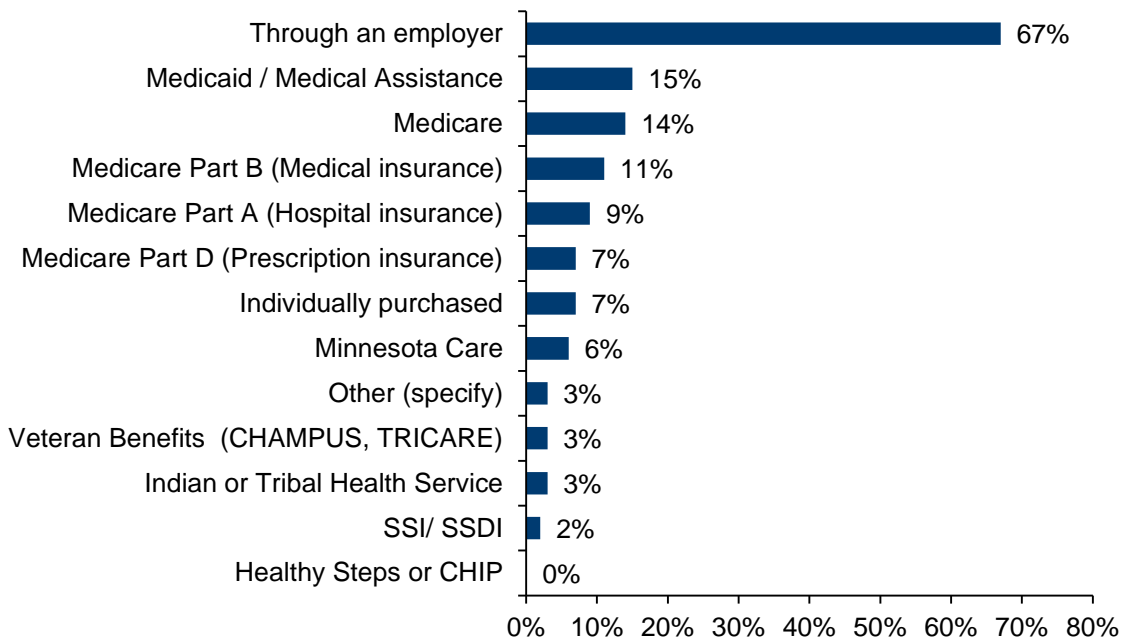
■ Yes ■ No



Base: Yes (n=229), No (n=17), Sample Size = 246

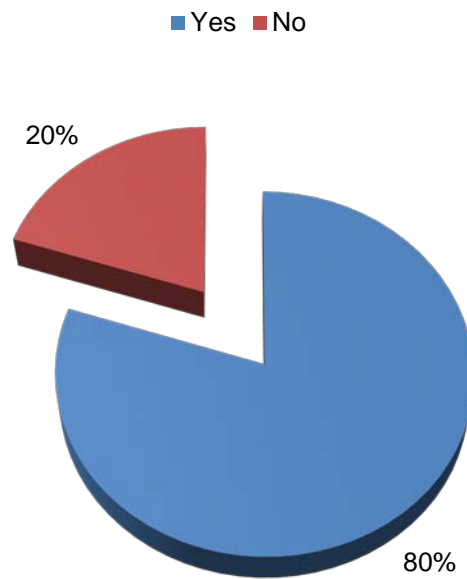
(Community = Beltrami)

Type of Insurance



Base: Through an employer (n=153), Individually purchased (n=17), Indian or Tribal Health Service (n=7), Medicare (n=31), Medicare Part A (Hospital insurance) (n=21), Medicare Part B (Medical insurance) (n=25), Medicare Part D (Prescription insurance) (n=17), SSI/ SSDI (n=5), Medicaid / Medical Assistance (n=35), Minnesota Care (n=13), Veteran Benefits (CHAMPUS, TRICARE) (n=6), Healthy Steps or CHIP (n=1), Other (specify) (n=8), Sample Size = 229 (Community = Beltrami)

Do you have an established primary healthcare provider?

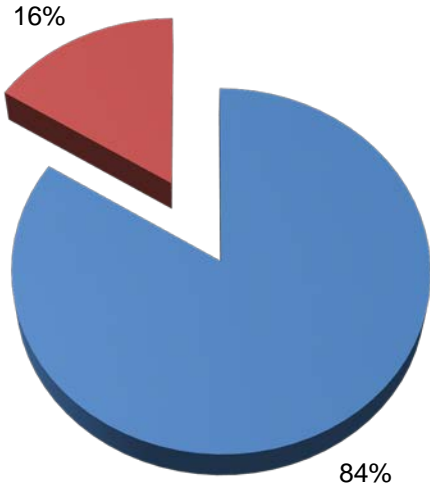


Base: Yes (n=194), No (n=50), Sample Size = 244

(Community = Beltrami)

In the past year, did you or someone in your family need medical care, but did not receive the care they needed?

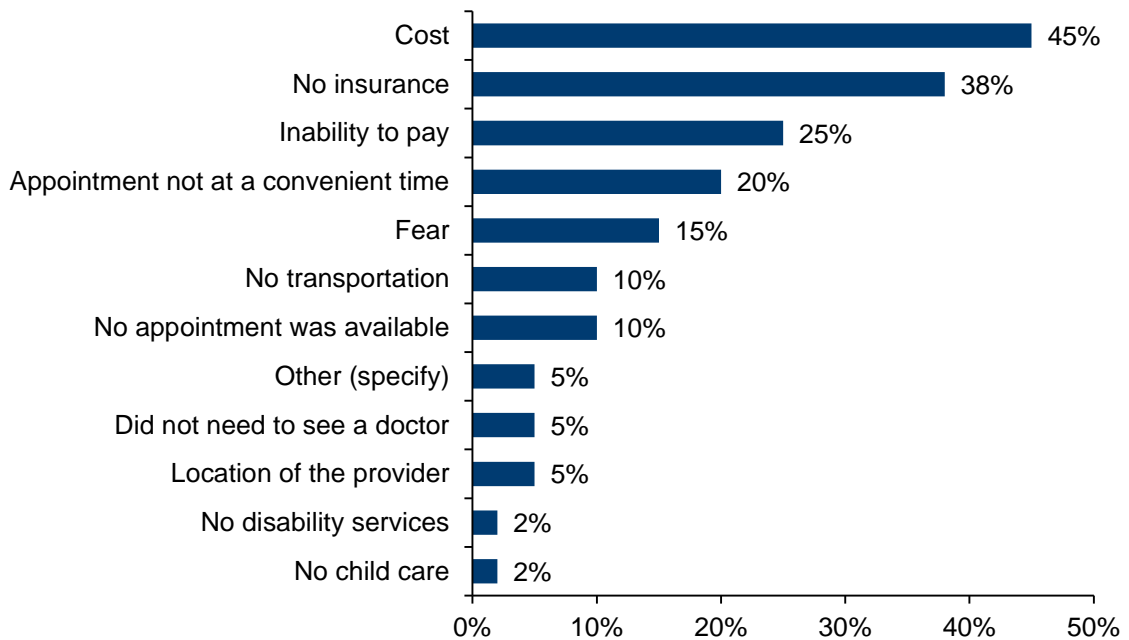
■ No ■ Yes



Base: Yes (n=40), No (n=206), Sample Size = 246

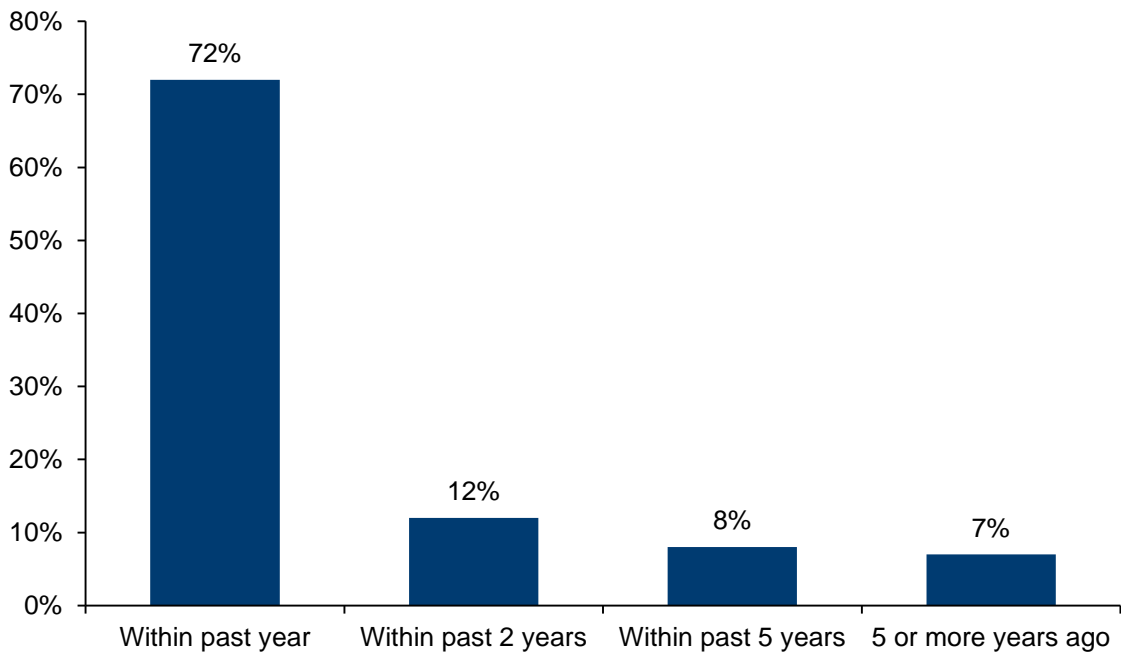
(Community = Beltrami)

Barriers to Receiving Care Needed



Base: Inability to pay (n=10), No child care (n=1), No appointment was available (n=4), Appointment not at a convenient time (n=8), No disability services (n=1), No insurance (n=15), No transportation (n=4), Location of the provider (n=2), Cost (n=18), Fear (n=6), Did not need to see a doctor (n=2), Other (specify) (n=2)
(Community = Beltrami)

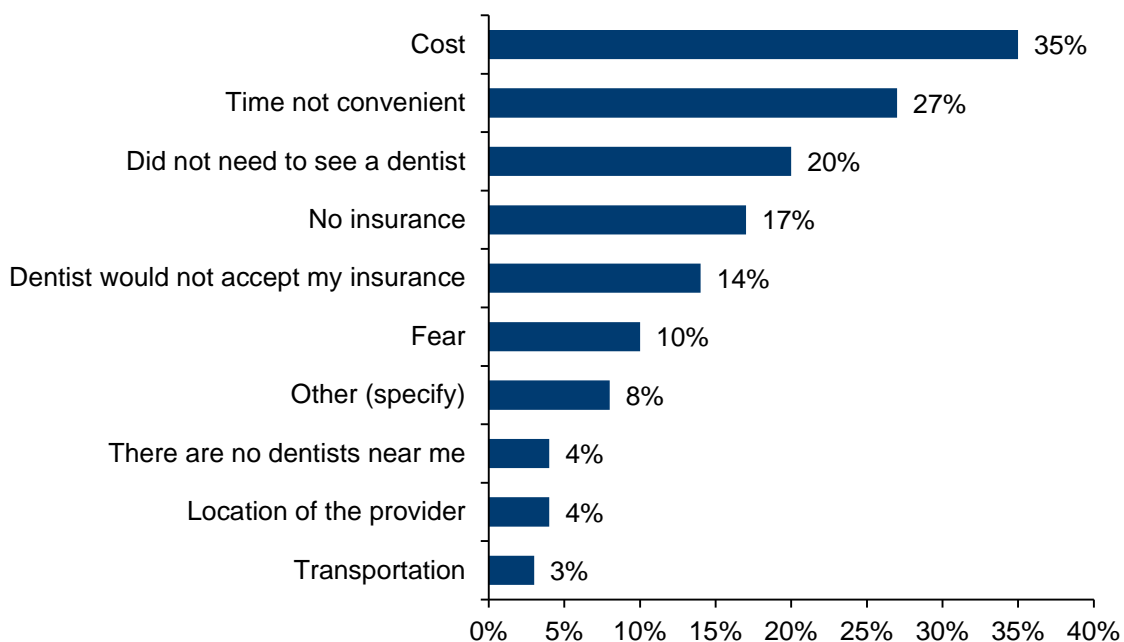
How long has it been since you last visited a dentist?



Base: Within past year (n=174), Within past 2 years (n=30), Within past 5 years (n=20), 5 or more years ago (n=16), Sample Size = 240

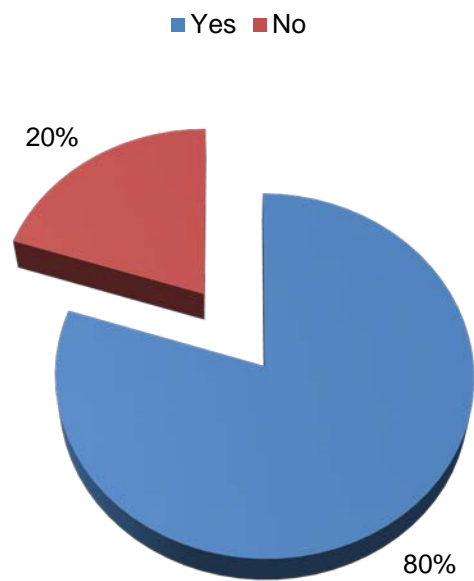
(Community = Beltrami)

Barriers to Visiting the Dentist



Base: No insurance (n=12), Location of the provider (n=3), Cost (n=25), Fear (n=7), Transportation (n=2), Time not convenient (n=19), There are no dentists near me (n=3), Dentist would not accept my insurance (n=10), Did not need to see a dentist (n=14), Other (specify) (n=6), Sample Size = 71
(Community = Beltrami)

Do you have any kind of dental care or oral health insurance coverage?

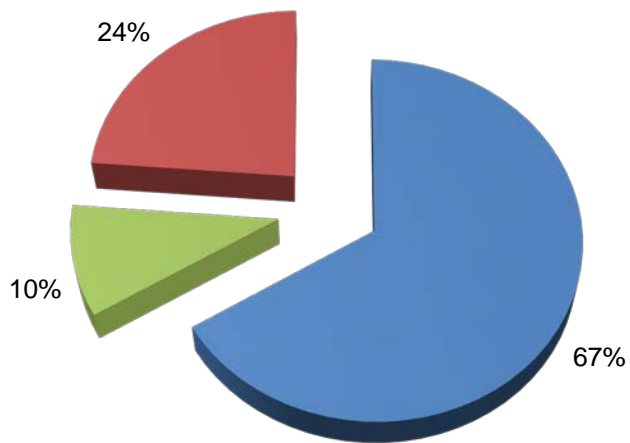


Base: Yes (n=182), No (n=46), Sample Size = 228

(Community = Beltrami)

Do you have a dentist that you see for routine care?

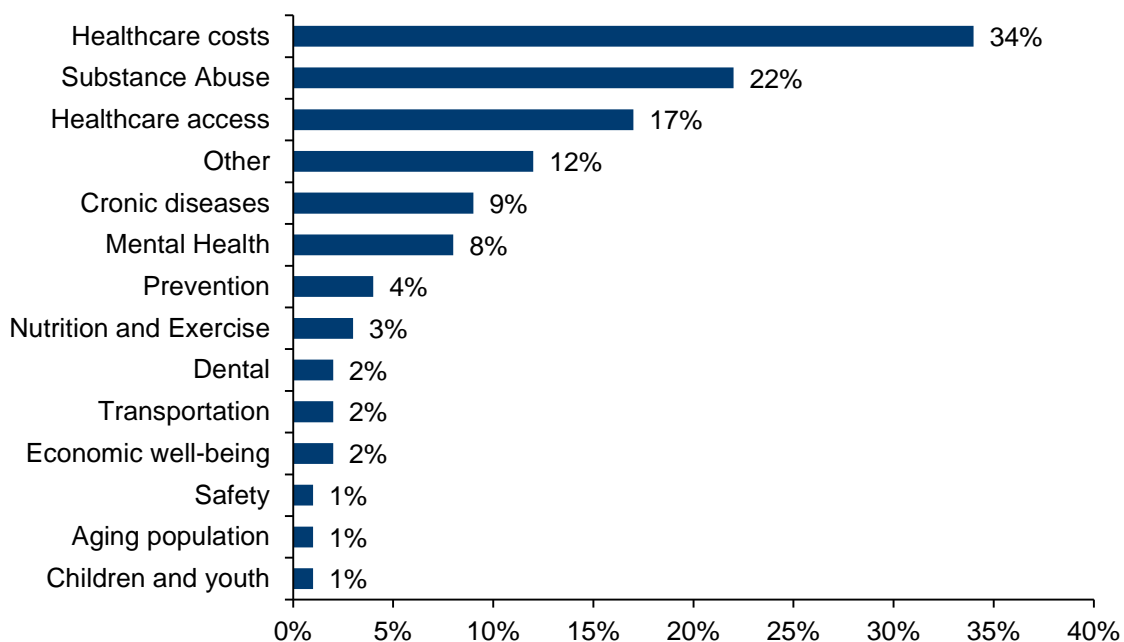
■ Yes, only one ■ Yes, more than one ■ No



Base: Yes, only one (n=159), Yes, more than one (n=23), No (n=56), Sample Size = 238

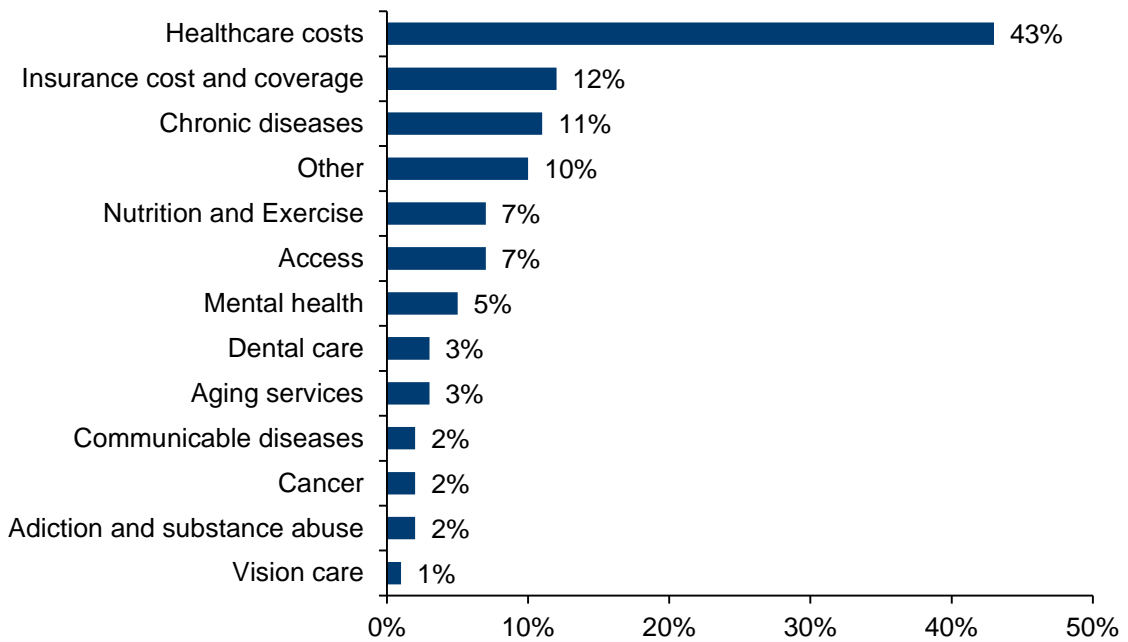
(Community = Beltrami)

Most Important Community Issues



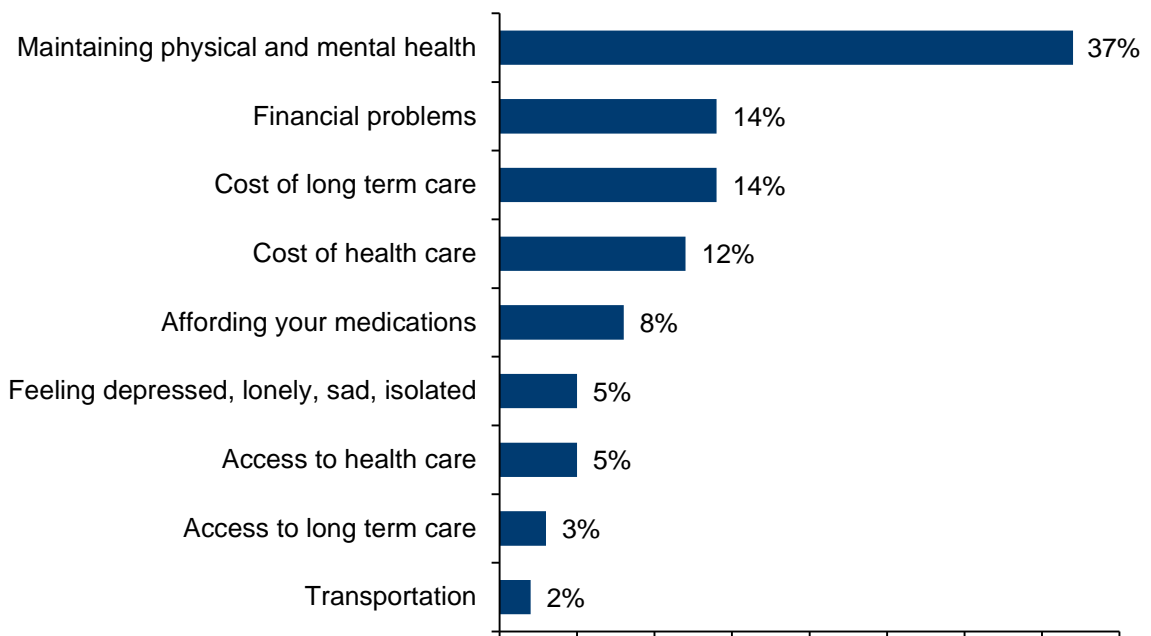
Base: Economic well-being (n=3), Transportation (n=4), Children and youth (n=1), Aging population (n=1), Safety (n=1), Healthcare access (n=32), Mental Health (n=15), Substance Abuse (n=43), Cronic diseases (n=17), Healthcare costs (n=65), Dental (n=4), Prevention (n=7), Nutrition and Exercise (n=6), Other (n=24), Sample Size = 215 (Community = Bellfami)

Most Important Issue for Family



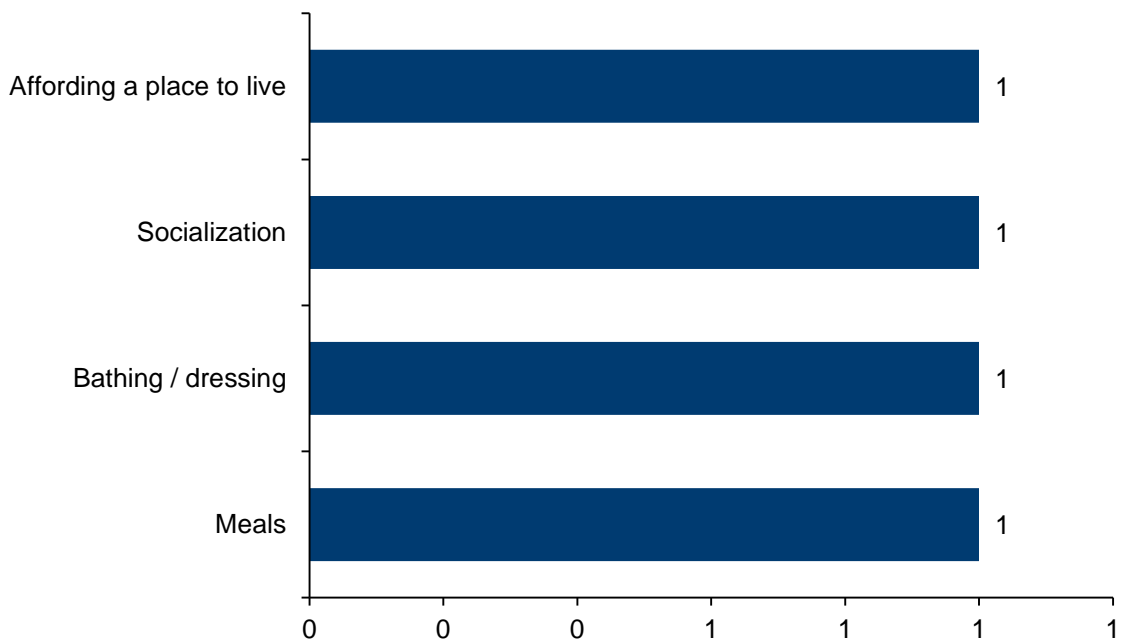
Base: Access (n=10), Addiction and substance abuse (n=3), Aging services (n=5), Cancer (n=3), Chronic diseases (n=16), Communicable diseases (n=3), Healthcare costs (n=66), Dental care (n=4), Nutrition and Exercise (n=10), Insurance cost and coverage (n=18), Mental health (n=7), Vision care (n=1), Other (n=15), Sample Size = 206 (Community = Bellfami)

What is your biggest concern as you age? (Age 65+)



Base: Access to health care (n=3), Cost of health care (n=7), Affording your medications (n=5), Maintaining physical and mental health (n=22), Feeling depressed, lonely, sad, isolated (n=3), Access to long term care (n=2), Cost of long term care (n=8), Financial problems (n=8), Transportation (n=1), Sample Size = 27.
(Community = Beltrami)

Which of these tasks do you need assistance with? (Age 65+)

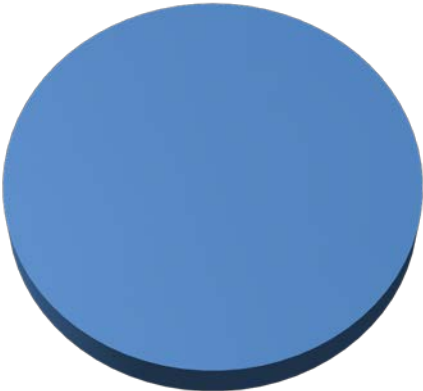


Base: Meals (n=1), Bathing / dressing (n=1), Socialization (n=1), Affording a place to live (n=1), Sample Size = 1

(Community = Beltrami)

Do you know where to go to get help with the tasks you need assistance with? (Age 65+)

■ No

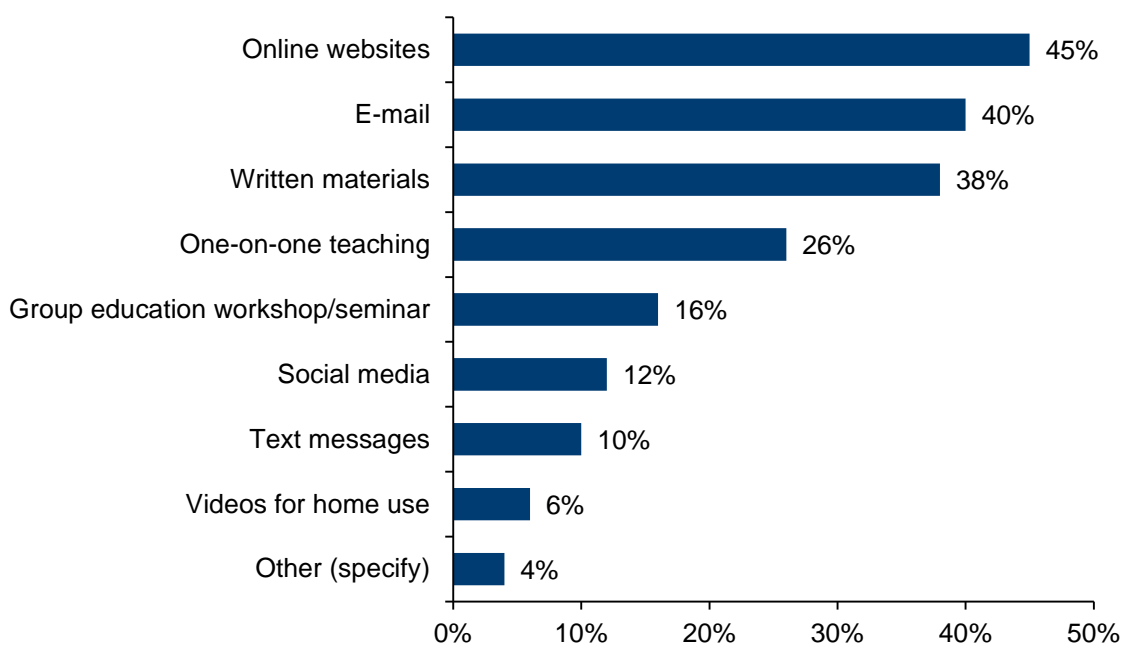


1

Base: No (n=1), Sample Size = 1

(Community = Beltrami)

What method(s) would you prefer to get health information?

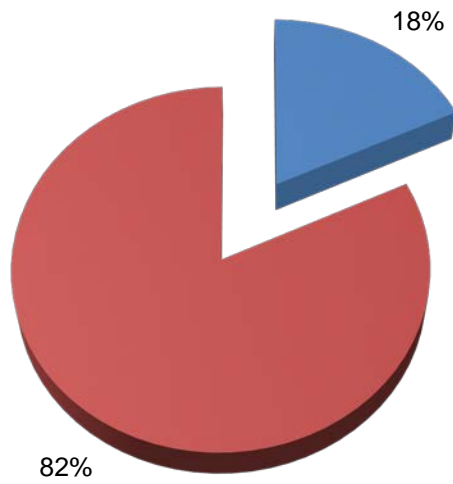


Base: Written materials (n=92), Videos for home use (n=14), Social media (n=28), Text messages (n=23), One-on-one teaching (n=62), E-mail (n=95), Group education workshop/seminar (n=39), Online websites (n=108), Other (specify) (n=10), Sample Size = 240

(Community = Beltrami)

Gender

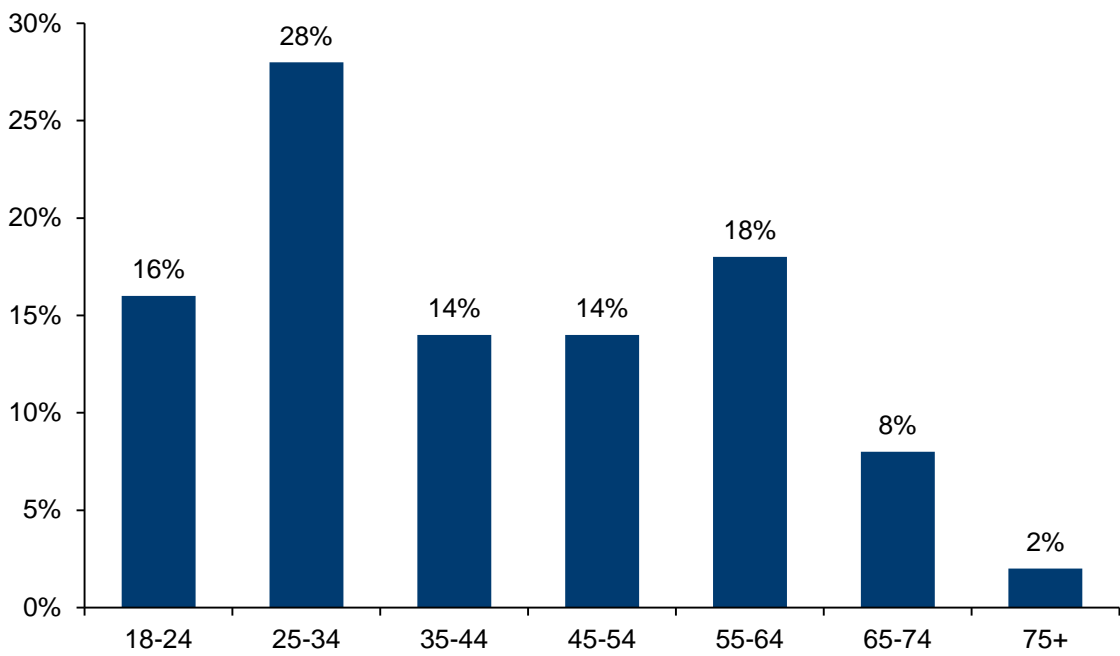
■ Male ■ Female



Base: Male (n=43), Female (n=200), Sample Size = 243

(Community = Beltrami)

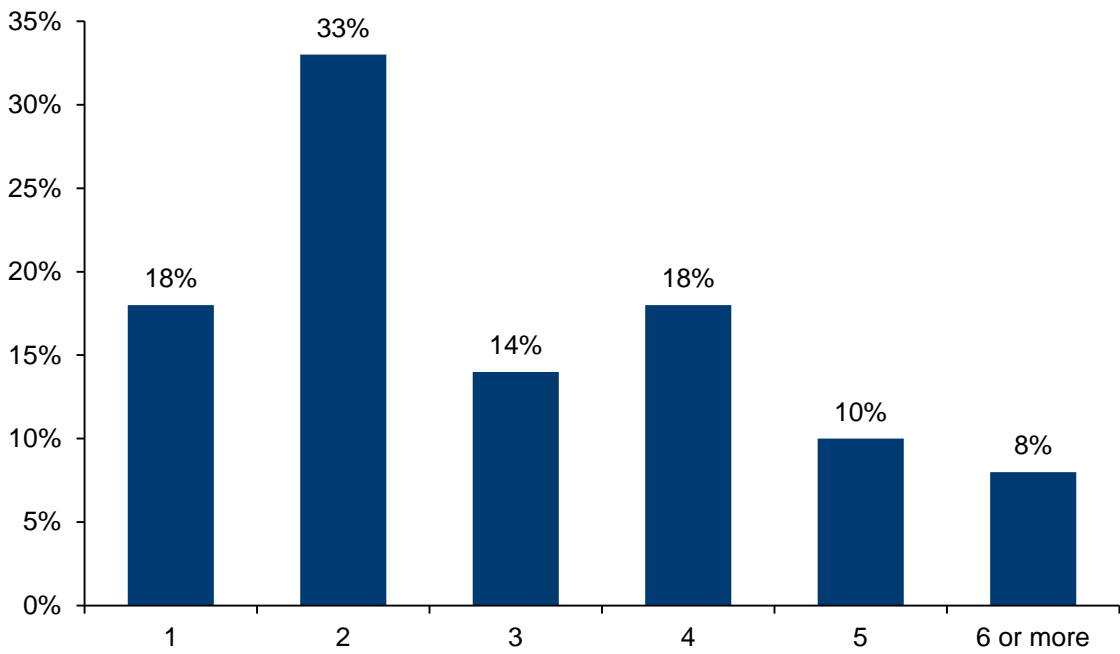
Age



Base: 18-24 (n=39), 25-34 (n=67), 35-44 (n=34), 45-54 (n=35), 55-64 (n=43), 65-74 (n=19), 75+ (n=6), Sample Size = 243

(Community = Beltrami)

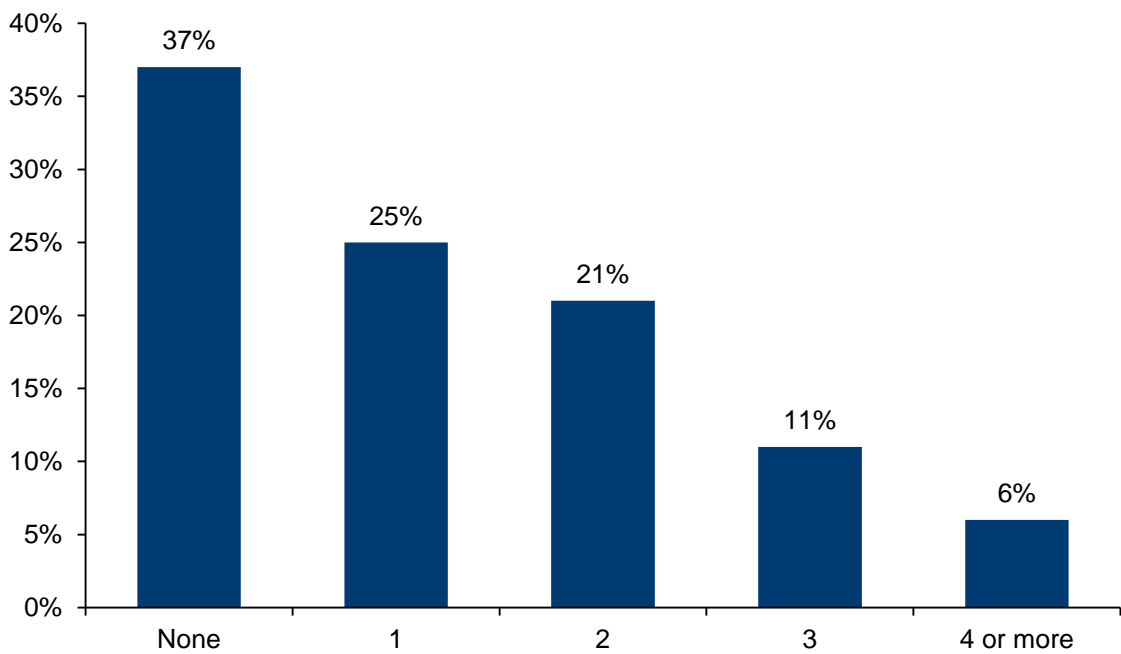
People in Household



Base: 1 (n=42), 2 (n=79), 3 (n=34), 4 (n=42), 5 (n=24), 6 or more (n=19), Sample Size = 240

(Community = Beltrami)

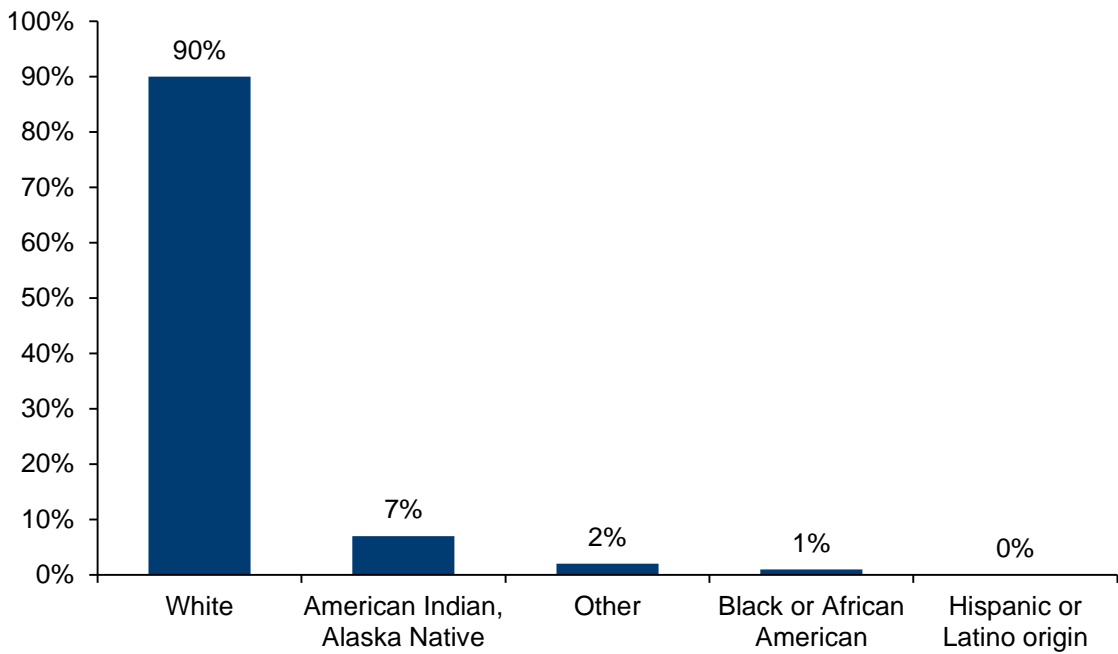
Children in Household Under 18



Base: None (n=59), 1 (n=40), 2 (n=33), 3 (n=17), 4 or more (n=9), Sample Size = 158

(Community = Beltrami)

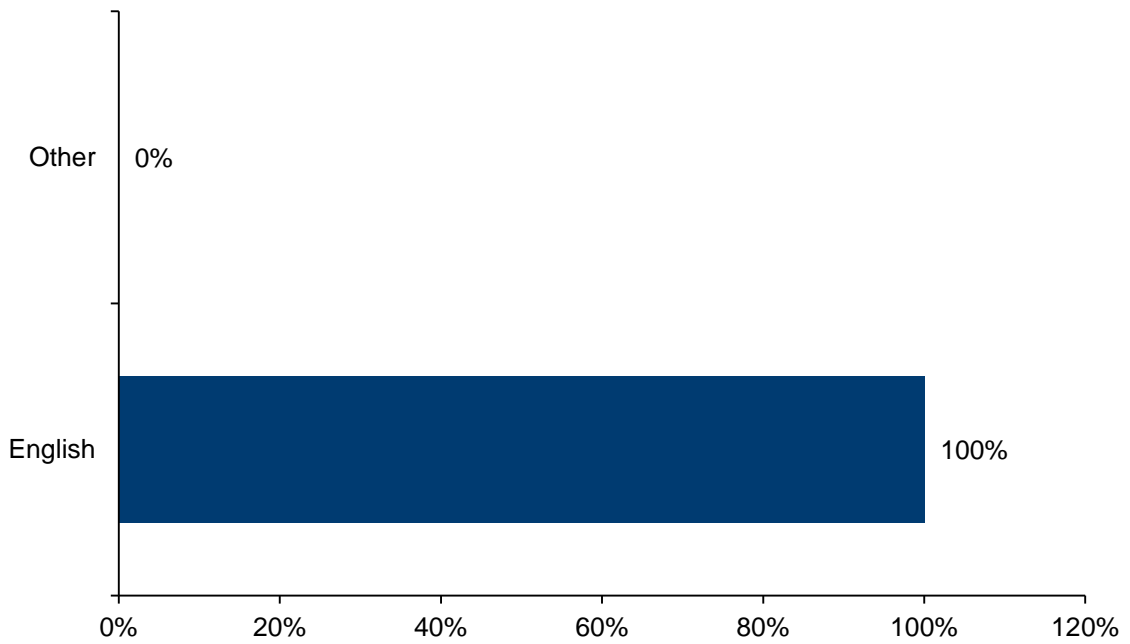
Ethnicity



Base: White (n=220), Black or African American (n=2), American Indian, Alaska Native (n=16), Hispanic or Latino origin (n=1), Other (n=6), Sample Size = 245

(Community = Beltrami)

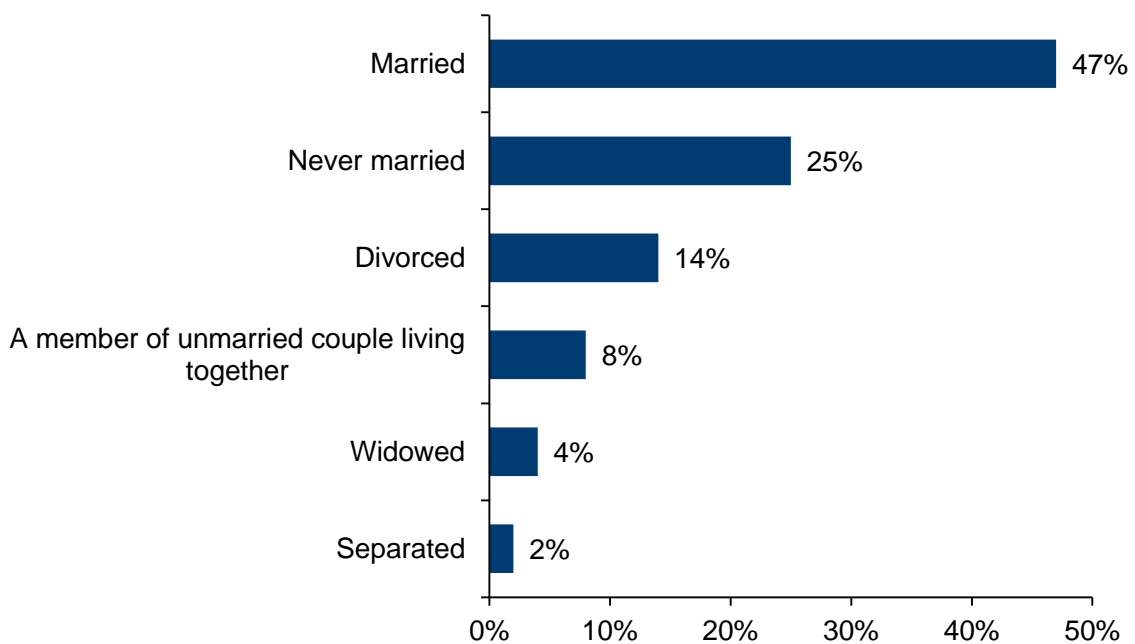
Language Spoken in Home



Base: English (n=243), Other (n=1), Sample Size = 244

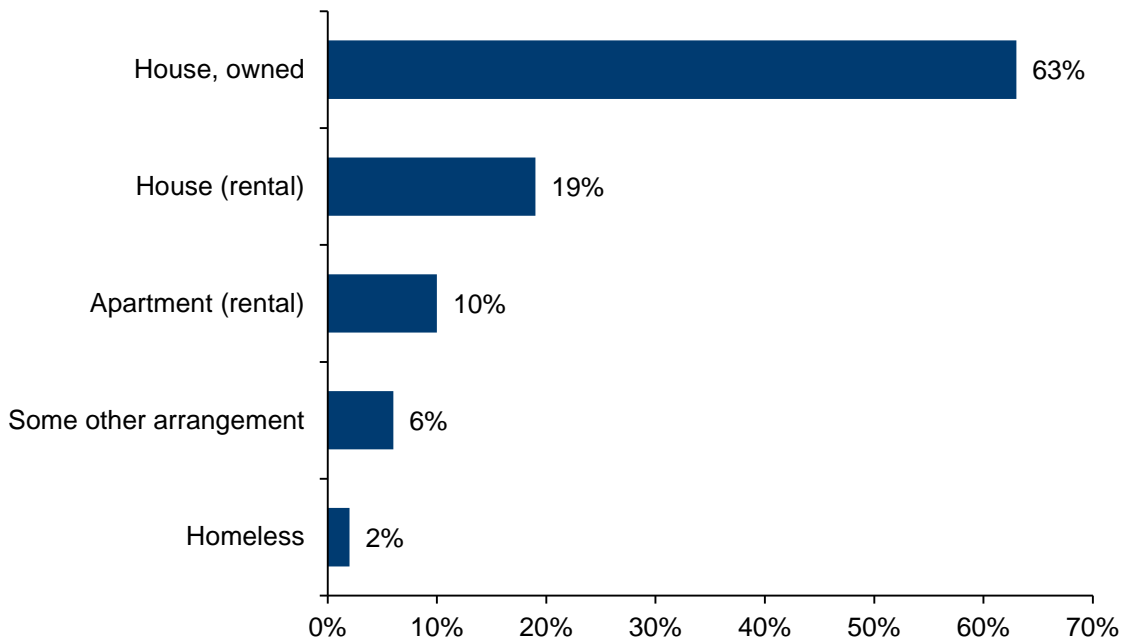
(Community = Beltrami)

Marital Status



Base: Never married (n=62), Married (n=115), Divorced (n=34), Widowed (n=10), Separated (n=4), A member of unmarried couple living together (n=20), Sample Size = 245
(Community = Beltrami)

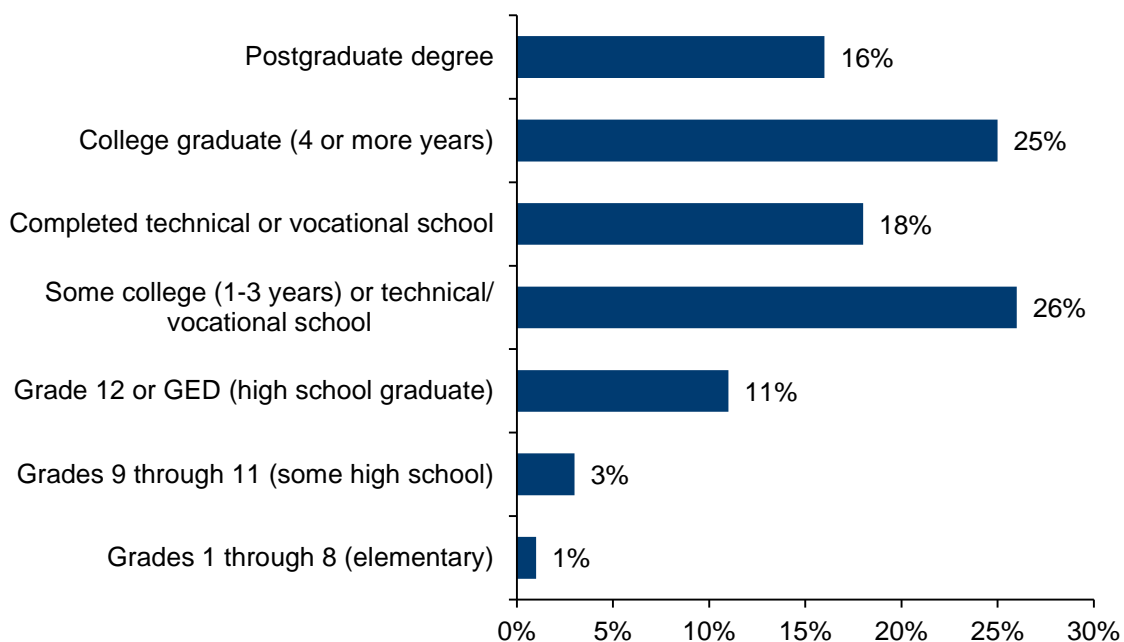
Current Living Situation



Base: House, owned (n=153), House (rental) (n=45), Apartment (rental) (n=25), Homeless (n=6), Some other arrangement (n=14), Sample Size = 243

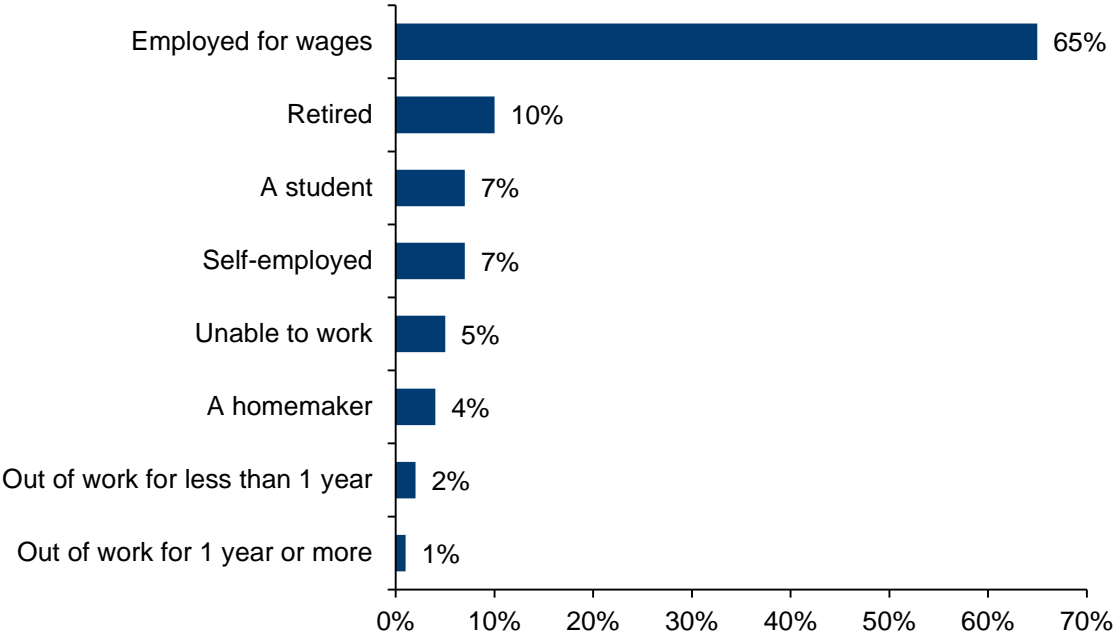
(Community = Beltrami)

Education Level



Base: Grades 1 through 8 (elementary) (n=2), Grades 9 through 11 (some high school) (n=7), Grade 12 or GED (high school graduate) (n=28), Some college (1-3 years) or technical/ vocational school (n=64), Completed technical or vocational school (n=43), College graduate (4 or more years) (n=62), Postgraduate degree (n=39), Sample Size = 245 (Community = Beltrami)

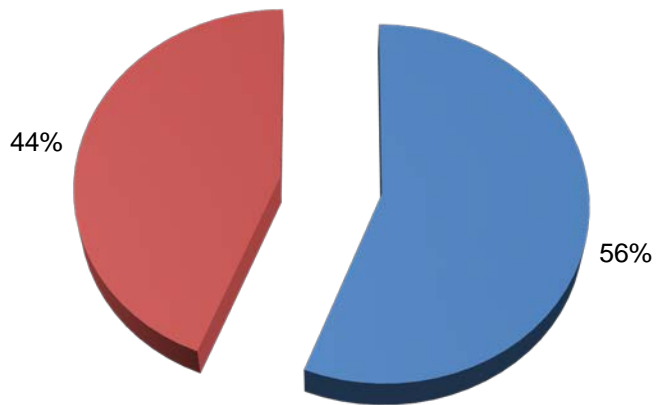
Employment Status



Base: Employed for wages (n=159), Self-employed (n=16), Out of work for less than 1 year (n=6), Out of work for 1 year or more (n=2), A homemaker (n=10), A student (n=16), Retired (n=24), Unable to work (n=12), Sample Size = 245
(Community = Beltrami)

Sample Source

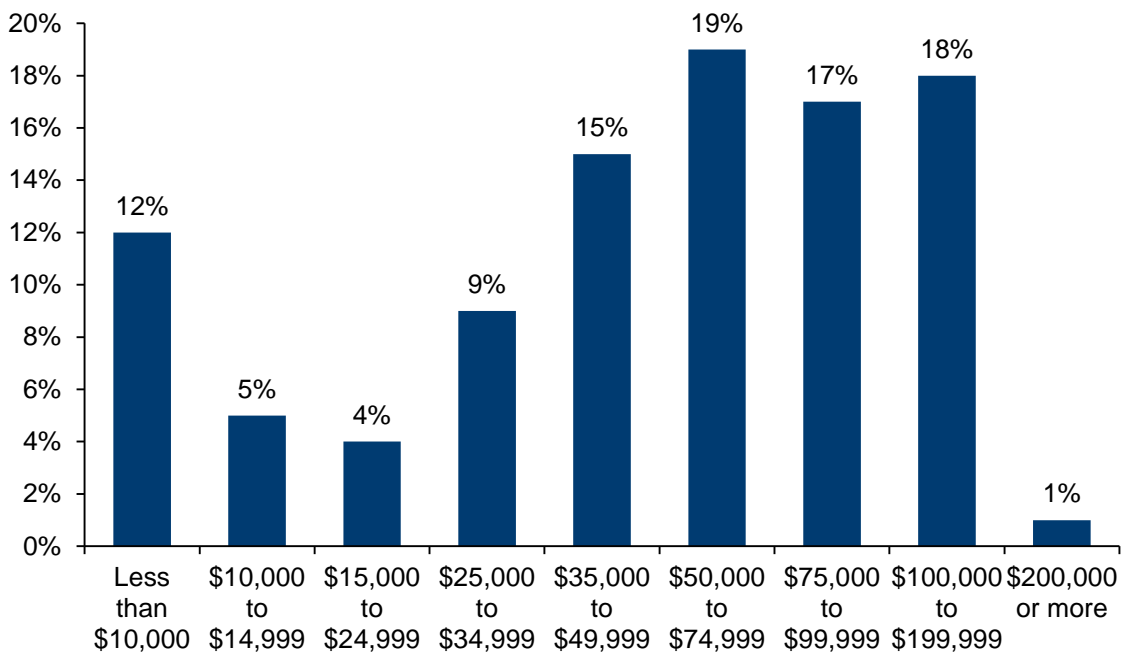
■ Qualtrics ■ Open Invitation / FaceBook



Base: Qualtrics (n=140), Open Invitation / FaceBook (n=108), Sample Size = 248

(Community = Beltrami)

Total Household Income



Base: Less than \$10,000 (n=28), \$10,000 to \$14,999 (n=12), \$15,000 to \$24,999 (n=10), \$25,000 to \$34,999 (n=20), \$35,000 to \$49,999 (n=34), \$50,000 to \$74,999 (n=43), \$75,000 to \$99,999 (n=38), \$100,000 to \$199,999 (n=40), \$200,000 or more (n=2), Sample Size = 227

(Community = Beltrami)

Bemidji 2019 Community Health Needs Assessment Prioritization Worksheet

Criteria to Identify Priority Problem

- Cost and/or return on investment
- Availability of solutions
- Impact of problem
- Availability of resources (staff, time, money, equipment) to solve problem
- Urgency of solving problem (Ebola or air pollution)
- Size of problem (e.g. # of individuals affected)

Criteria to Identify Intervention for Problem

- Expertise to implement solution
- Return on investment
- Effectiveness of solution
- Ease of implementation/maintenance
- Potential negative consequences
- Legal considerations
- Impact on systems or health
- Feasibility of intervention

Health Indicator/Concern	Round 1 Vote	Round 2 Vote	Round 3 Vote
Economic Well-Being <ul style="list-style-type: none"> • Availability of affordable housing 4.16 • Homelessness 4.14 • Housing which accepts people with chemical dependency, mental health problems, criminal history or victims of domestic violence 4.07 • Skilled labor workforce 3.77 • 25% report that their food ran out before they had money to buy more 	10 votes #1 priority		
Children and Youth <ul style="list-style-type: none"> • Substance abuse by youth 4.28 • Teen suicide 4.00 	2 votes		
Aging Population <ul style="list-style-type: none"> • Cost of long term care 4.02 	1 vote		
Safety <ul style="list-style-type: none"> • Abuse of prescription drugs 4.52 • 24% report that they have drugs in their home that they are not using • Child abuse and neglect 4.32 • Presence of street drugs 4.29 • Presence of drug dealers 4.16 • Criminal activity 4.11 • Domestic violence 4.05 	5 votes		
Health Care Access <ul style="list-style-type: none"> • Availability of mental health providers 4.36 • Availability of behavioral health 4.30 • Use of emergency room services for primary health care 4.00 			
Mental Health and Substance Abuse <ul style="list-style-type: none"> • Drug use and abuse 4.59 • Alcohol use and abuse 4.38 • 49% self-report that they binge drink at least 1X/month • 26% report that alcohol use has had a harmful effect on them or a family member in the past 2 years • Depression 4.09 • 48% report a diagnosis of depression • Suicide 4.07 • 54% report a diagnosis of anxiety/stress • 19% report that they currently smoke cigarettes 	9 votes - #2 priority		

Health Indicator/Concern	Round 1 Vote	Round 2 Vote	Round 3 Vote
<p>Wellness</p> <ul style="list-style-type: none"> • 24% have not had a routine checkup in more than 1 year • 27% have not visited their dentist in more than 1 year • 24% report a diagnosis of hypertension • 24% report a diagnosis of high cholesterol • 20% report a diagnosis of asthma • 34% report that they are obese • 32% report that they are overweight • 50% do not consume the recommended 5 or more of fruits/vegetables each day • 33% do not get moderate exercise at least 3X/week 			

Secondary Data

Evaluation Group, LLC

North Country Community Health Services

2017 NORTHWEST REGION ADULT HEALTH BEHAVIOR SURVEY SUMMARY

Beltrami County Report

April
2018

Authored by
Garth Kruger, Ph.D.

Evaluation Group, LLC * 29337 310th Ave NW * Warren, MN 56762
Tel (218) 437-8435 * e-mail [gkruger@evaluationgroupllc.c](mailto:gkruger@evaluationgroupllc.com)

Executive Summary

- Weight** 58.2% of all individuals residing in Beltrami County are considered either overweight (25.5%) or obese (32.7%). This is a much lower overall percentage of overweight/obese individuals than in 2014 (72.5%).
- The state average is 64.5% (36.7% overweight; 27.8%, obese).
 - Obesity in the county is still higher than state levels.
 - The percentage of individuals who are overweight or obese increases with age.
 - Males are 17% more obese than females.
- Physical Activity** Across Beltrami County only an estimated 29% of individuals are getting their recommended levels of physical activity, far lower than the state rate of 55%.
- Females tended to meet PAG more than males (36.6% vs. 21.5%).
 - Individuals with higher incomes tended to achieve PAG slightly more.
 - Individuals age 35-54 achieved PAG the most at 36%.
- Tobacco** Approximately 13.5% of all adults in Beltrami County are smokers.
- This is 1.6% higher than the 11.9% found three years previously. Across the CHB region smoking has declined slightly.
 - Individuals with less than \$35k annual household income had triple the rate of smoking compared to households earning more than \$35k (30% vs. 10%).
 - Only 5% of those with 4-year degrees smoked compared to individuals with an AA degree (24%), trade school/some college (23%), or HS grad (18%).
 - Current smokers are more male (18.8%) than female (8.5%).
- Alcohol** Respondents indicated that 68.5% of them had consumed alcohol at least once/past 30 days.
- 29% of respondents indicated that alcohol had a ‘harmful effect’ on themselves or a family member.
 - Households earning \$50-\$75k or more were much more adversely impacted at 48% than those from other income groups.
 - Only 17% of individuals with a high school diploma or less experienced harmful effects compared to other educational levels.
 - Eighty-three percent of individuals from higher income households (>\$75k+) reported drinking over the past 30 days compared to 58% of those earning \$34k or less.
- Mental Health** 34% of respondents had been told by a healthcare professional that they had a mental health concern at some point in their lives.
- Over the past 30 days, 28% of respondents expressed feelings of hopelessness, anxiety or loss of interest in things they used to enjoy.

Recommendations

- Health planners should continue to focus resources on areas that develop and encourage physical activity across working adult populations.
- Prevention efforts need to help people find time in their day to get some physical activity.
 - Assist in structuring environments to enhance physical activity.
- Track binge drinking as in the 2013 survey.
- Add questions about opioid use

Weight Status

Survey respondents were asked to report their height and weight. From that information a Body Mass Index (BMI) was calculated¹. As Figure 1 shows below, **58.2% of all individuals residing in Beltrami County are considered either overweight (25.5%) or obese (32.7%). This is a substantially lower percentage of individuals overweight and fewer obese than from 2014; and is lower than the state average of 64.5% (36.7% overweight; 27.8%, obese).** To learn more, see <https://stateofobesity.org/states/mn>. In terms of gender and age as related to weight, older males tend to be heaviest while younger females weigh the least (see Figures 2 and 3).

Figure 1

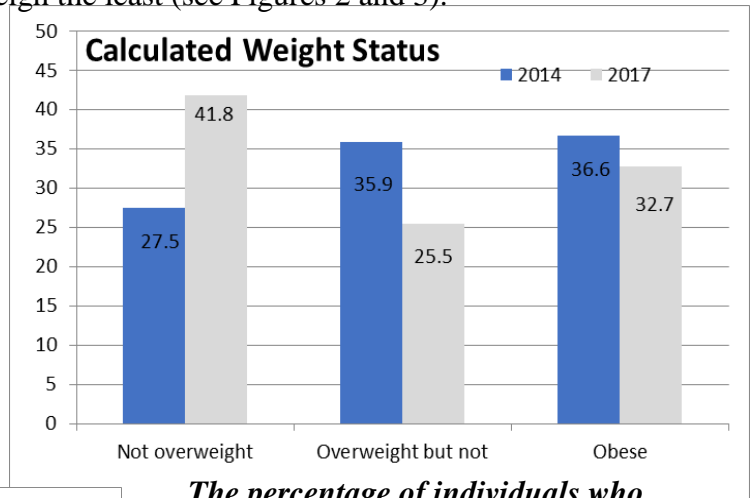
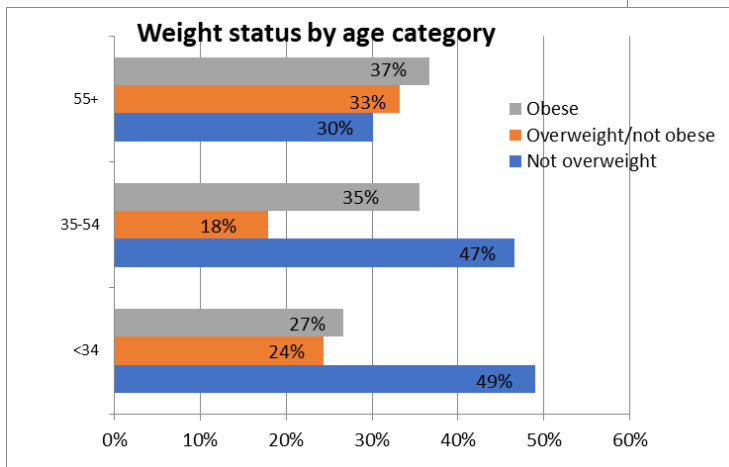


Figure 2

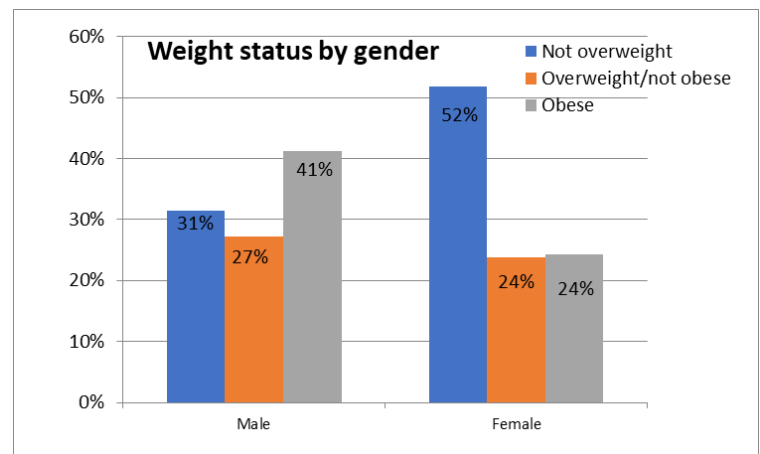


The percentage of individuals who are overweight or obese increases with age as shown in Figure 2.

This suggests that the greatest gains in changing population weight is in working with individuals age 35 and older.

Males are 17% more obese than females.

Figure 3

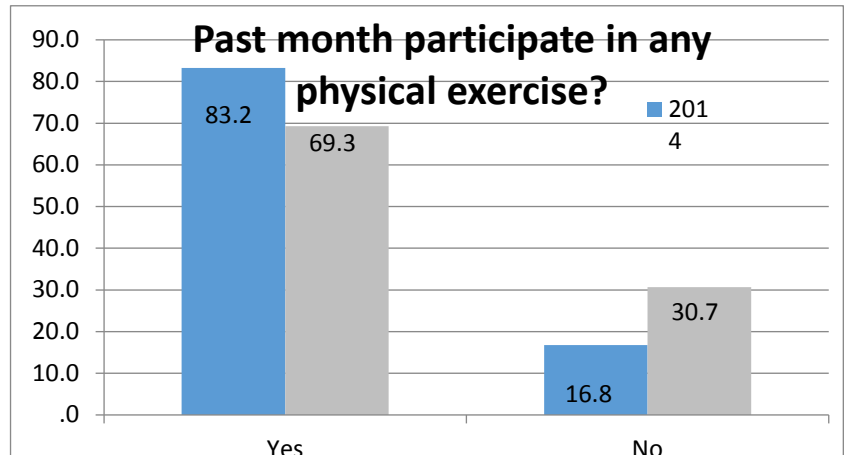


¹ There are some exceptions to be considered in using BMI to accurately assess the health of individuals; however, it is assumed here to be a generally accurate measure for the body mass composite a population.

Physical Activity

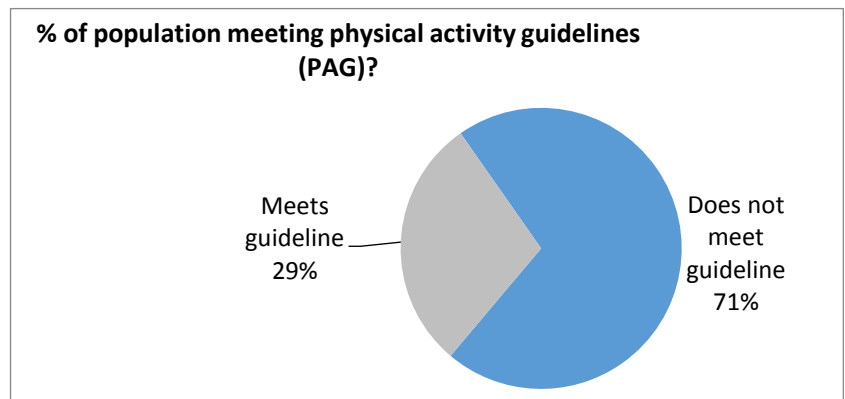
Participants were asked “During the past 30 days, other than your regular job, did you participate in any physical activity or exercises such as running, calisthenics, golf, gardening, or walking for exercise?” Thirty percent of survey respondents in 2017 indicated “no” whereas in 2014 only 16.8% said no. The state average on this measure is approximately 18%.^{2,3}

Figure 4



Attainment of Physical Activity Guidelines (PAG) were assessed. This was achieved through a series of questions examining the extent of moderate physical activity (30 minutes/day for /5+ days) and vigorous physical activity (20 minutes a day for 3+ days).⁴

Figure 5



Across Beltrami County, only an estimated 29% of individuals are getting their recommended levels of physical activity. This is far lower than the average rate of 55% of all Minnesotans.

- Females tended to meet PAG more than males (36.6% vs. 21.5%).
- Individuals with higher incomes tended to achieve PAG slightly more (See Figure 7).
- Individuals age 35-54 achieved PAG the most at 36% (See Figure 7.1).

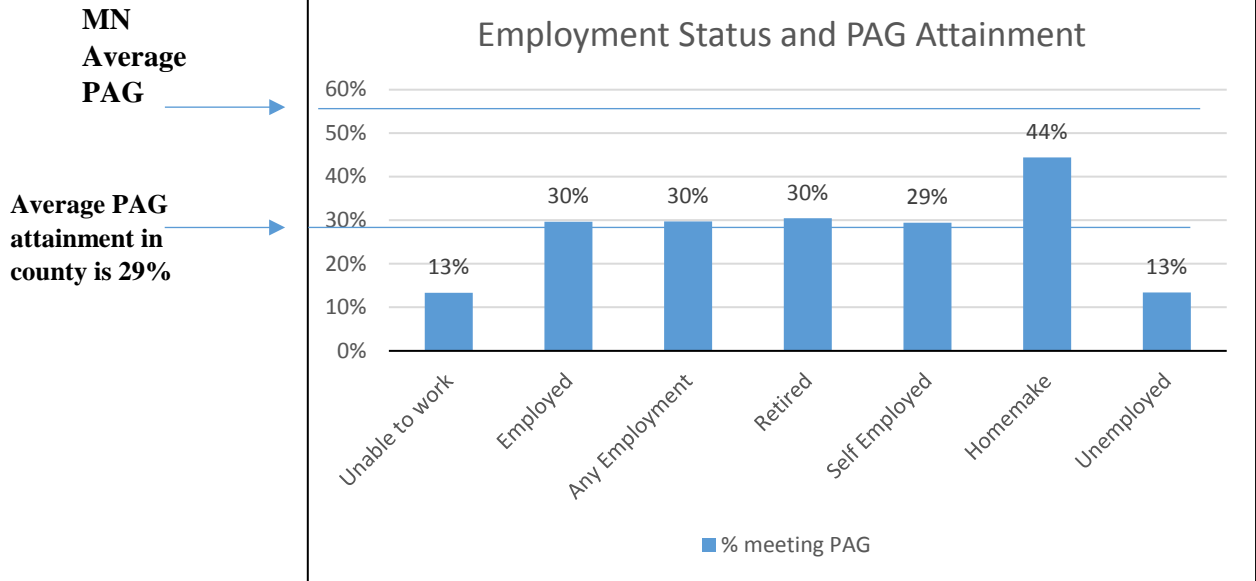
² <https://stateofobesity.org/physical-inactivity/>

³

https://nccd.cdc.gov/dnpao_dtm/rdPage.aspx?rdReport=DNPAO_DTM.ExploreByLocation&rdRequestForwarding=Form

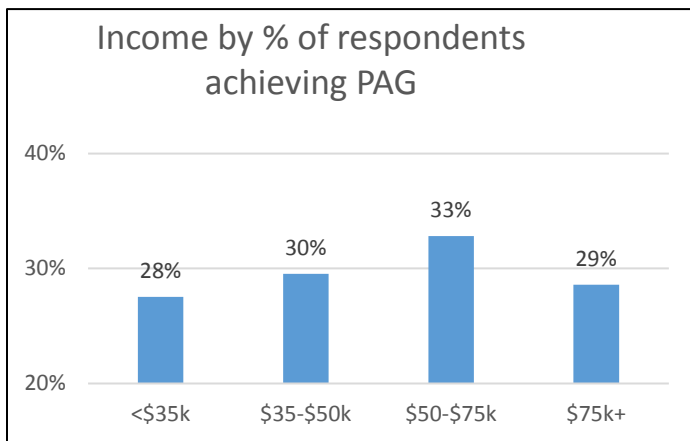
⁴Moderate exercises are defined as those that “cause only light sweating and a small increase in breathing or heart rate, and vigorous are those that “cause heavy sweating and a large increase in breathing or heart rate. To learn more see <http://www.health.gov/paguidelines/guidelines/summary.aspx>

Figure 6



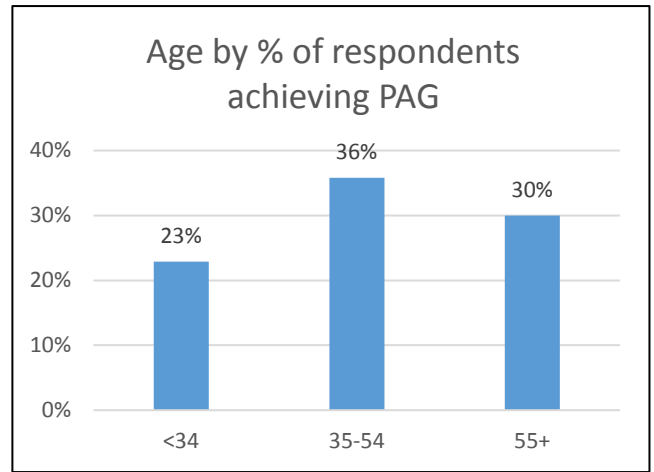
Workplace wellness initiatives are popular efforts, and as the data in Figure 6 suggest they are focused on a population that is lower in their attainment of Physical Activity Guidelines relative to other demographic groups (e.g. students, unemployed, homemakers). ***Health planners should continue to focus resources on areas that develop and encourage physical activity across working adult populations and in workplace settings.***

Figure 7



Weather was noted as the greatest reason for lack of physical activity (70%) followed by ‘lack of time’ (66%). All other reasons were endorsed approximately 30% of the time (traffic, walking paths/trails, public facilities not available, poor maintenance of sidewalks, public facilities not available when I want to use them).

Figure 7.1

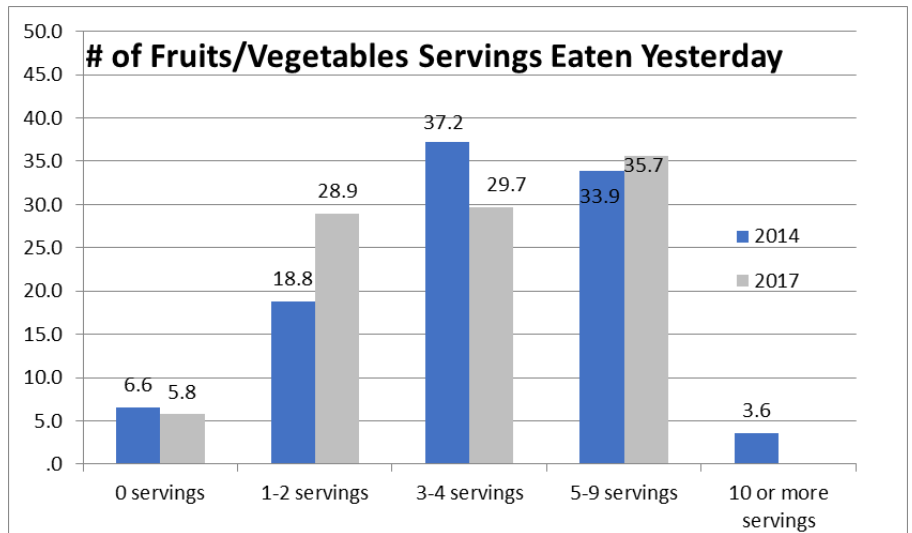


Nutrition

In 2017, a total of 35.7% of adults reported eating five or more servings of fruit and vegetables combined per day -which is the daily recommended intake. That total rises to 65.4% if you include those who get 3-4 servings a day, which is just below recommendations.

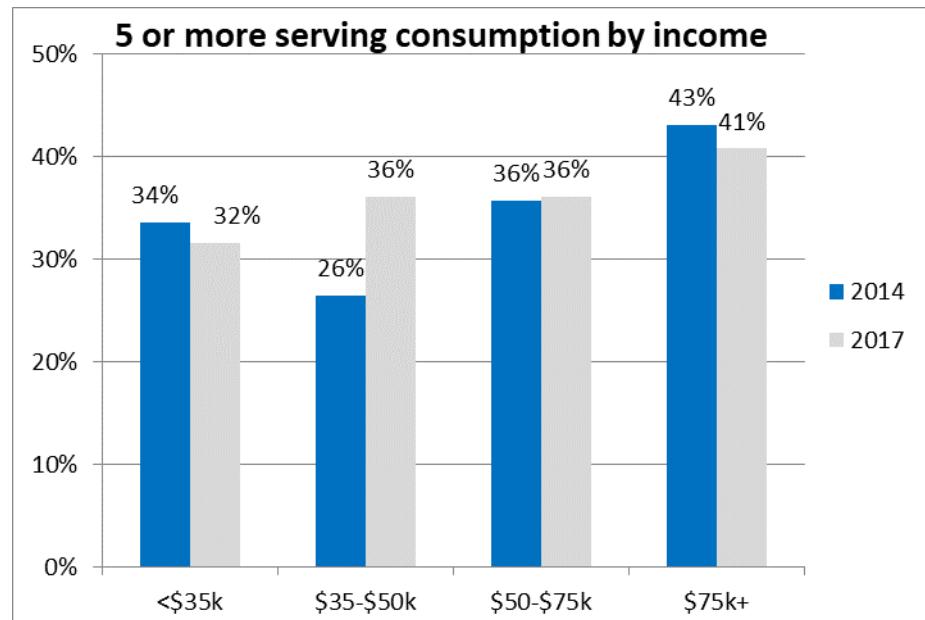
Survey results indicate that two-thirds of the population in the county regularly consume nutritious food. Given the findings on nutrition intake compared to exercise, the data suggest that *the problem it seems is not in a lack of eating nutritious food but rather consuming too many calories.*

Figure 8



- ***Both fruits and vegetables are consumed at similar rates with vegetables having a slight edge.***
- **72% of individuals age 35+ consume 3 or more servings**
 - Only 55% of those younger than 35 consume 3 or more servings.
 - 52% of those who are high-school grads or less consume 3 or more servings compared to 75% of those with an Associates’ degree or greater.
- Individuals with greater income tend to consume more F/V as shown in Figure 9 below.

Figure 9



Tobacco Use

Approximately 13.5% of all adults in Beltrami County are smokers. This is 1.6% higher than 11.9% found three years previously. Across the CHB region smoking has declined slightly suggesting that positive impacts may be the result of numerous prevention efforts. Current smokers are more male (18.8%) than female (8.5%) and differ significantly by income and education. Individuals with less than \$35k annual household income had triple the rate of smoking compared to households earning more than \$35k (30% vs. 10%). Only 5% of those with 4-year degrees smoked compared to individuals with an AA degree (24%), trade school/some college (23%), or HS grad (18%).

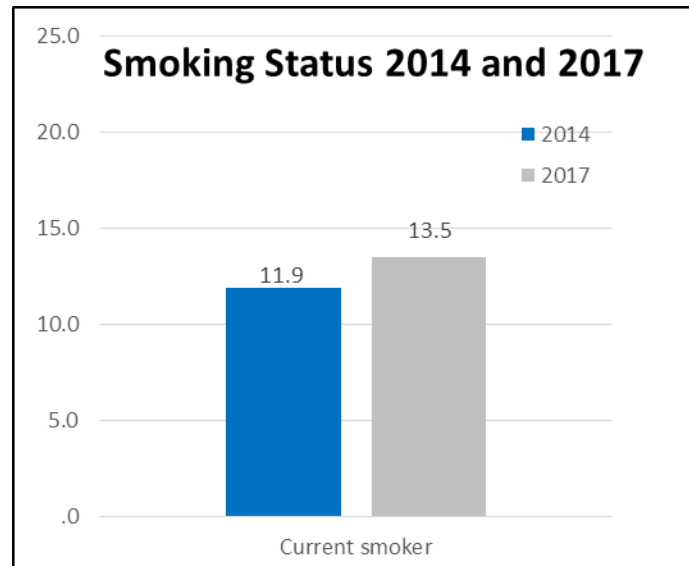
Beltrami County has the second highest smoking rates in the region at 13.5%. This is a slight increase from 2014.

Table 1

	North Country CHB Region	NC Less Beltrami County	Beltrami County	Clearwater County	LOW County	Hubbard County	MN State
Current smokers 2014	12.9	14	11.9	15.5	17.6	12.7	14.1
Current smokers 2017	13	12.2	13.5	10.9	14.5	12.2	14.1*
Net increase/decrease	0.1	-1.8	1.6	-4.6	-3.1	-0.5	--

Results also found that 3.2% of adults are smokeless tobacco users, (3:1 male/female ratio for smokeless tobacco users). E-cigarette use is even lower at somewhere around 3%. Statewide surveys estimate adult e-cigarette use in Minnesota at 6%⁵. Northwest Minnesota estimates range from 2-6% from the 2014 MN Adult Tobacco Survey.⁶

Figure 10



Alcohol Use

Participants were asked “during the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?” Respondents indicated that 68.5% of them had consumed alcohol. A further 29% percent of respondents indicated that alcohol had a ‘harmful effect’ on themselves or a family member. Households earning \$50-75k or more were much more adversely impacted at 48% than those from other income groups. Reasons for this are unclear. Conversely, only 17% of individuals with a high school diploma or less experienced harmful effects compared to other educational levels.

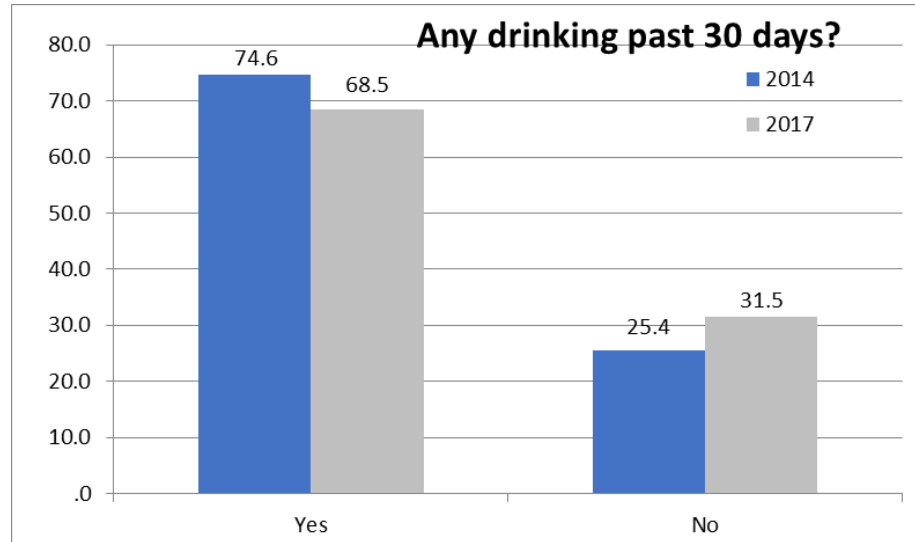
- ***Drinking percentages were split evenly across genders***
- ***73% of individuals younger than 55 reported drinking versus 61% for those older than 55.***
- ***Eighty-three percent of individuals from higher income households (>\$75k+) reported drinking over the past 30 days compared to 58% of those earning \$34k or less.***
- Individuals with an AA degree or better were more likely to report alcohol consumption over the past 30 days (74%) than those with a high school degree or less (47%).
- It should be noted that ‘any drinking’ does not mean problem drinking. Future surveys should include questions pertaining to binge drinking as were included in 2013 to get a better handle on dangerous drinking.

⁵ <http://www.health.state.mn.us/ecigarettes>

*data for 2017 not yet available.

⁶ http://www.mntobacco.nonprofitoffice.com/vertical/Sites/%7B988CF811-1678-459A-A9CE-34BD4C0D8B40%7D/uploads/MATS_2014_Technical_Report_Final_2015-01-21.pdf

Figure 11

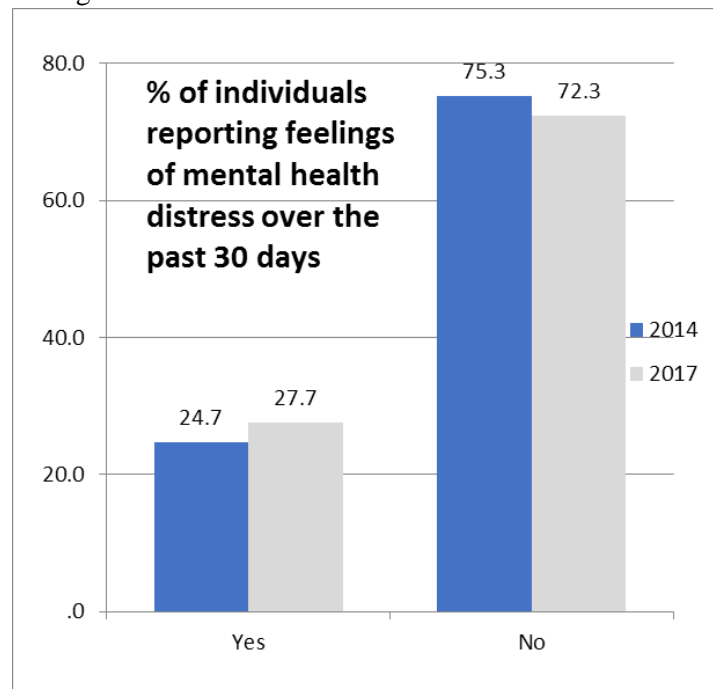


Mental Health

- Approximately 14% of individuals living in Beltrami County self-report having Fair or Poor general mental health at the time of the survey.
- **34% have been told at some point in their lives by a healthcare professional that they have a mental health concern.**
- 20% have delayed getting mental health treatment when it was needed.
 - **Of this group, the delay occurred for a variety of reasons, including fear of getting treatment (43%), cost (20%), perceived lack of severity (20%), 'did not know where to go' (17%), deductible too expensive (12.4%), could not get an appointment (3%),**

Nearly 28% of respondents expressed feelings of hopelessness, anxiety or loss of interest in things they used to enjoy over the past 30 days. This figure jumps to 37% for those who are 34 years old or less and compares to 19% for those aged 55 or older.

Figure 12



Medical Care

Approximately 76% of Beltrami County residents reported having a medical checkup over the past year (see Figure 13). Twenty-nine percent delayed seeking medical care over the past 12 months when they felt they needed it (see Figure 14). The primary reasons for not seeking care were cost (41%), transportation problems (25%) and high deductible (23%). *Instead of people not seeking medical care because of no health insurance, many may not be seeking medical care because the deductibles and associated costs are high.*

Figure 13

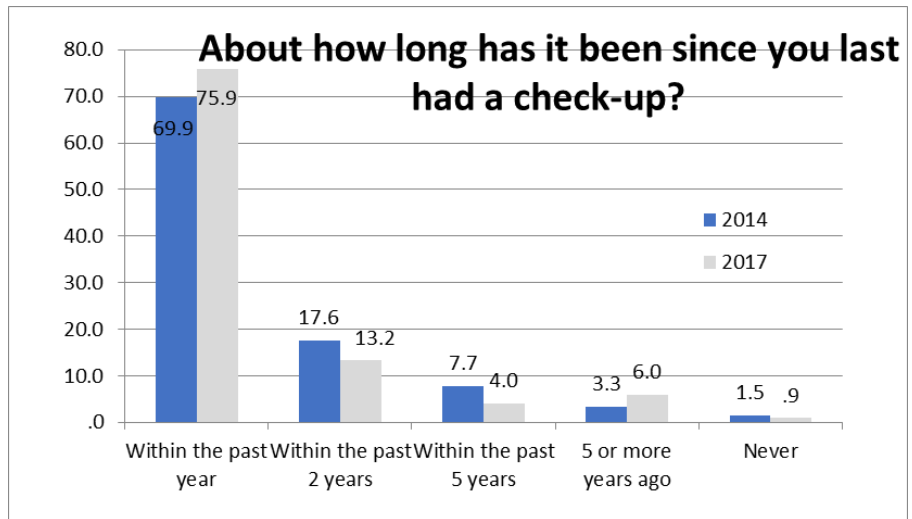
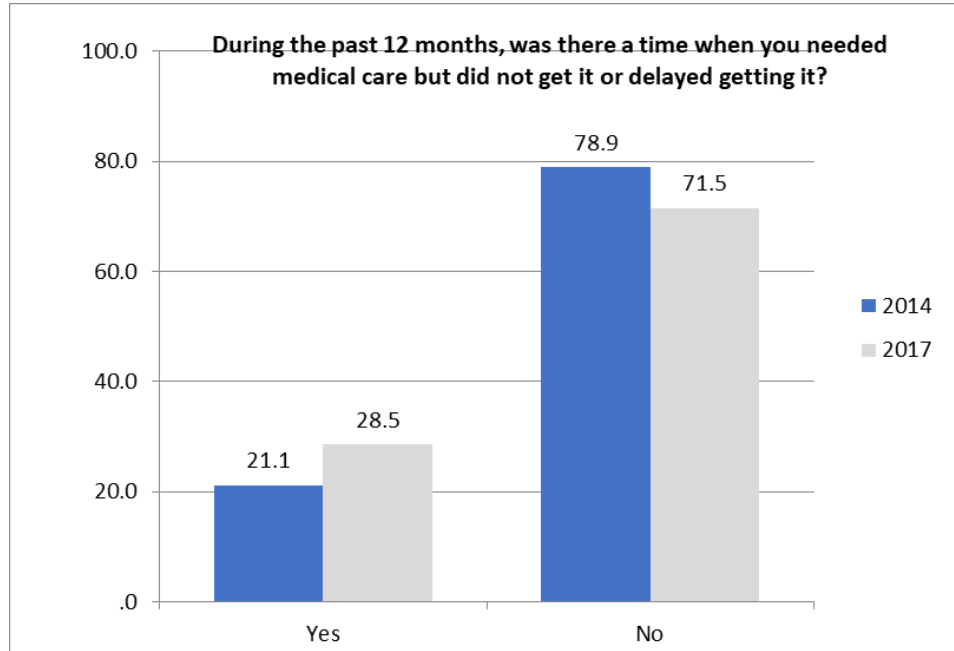


Figure 14



Appendix A

Methodology

Survey Instrument

Staff from the public health agencies representing Beltrami, Clearwater, Hubbard, Kittson, Lake of the Woods, Mahnomen, Marshall, Norman, Pennington, Polk, Red Lake and Roseau counties developed the questions for the survey instrument with technical assistance from the Minnesota Department of Health Center for Health Statistics. Existing items from the Behavior Risk Factor Surveillance System (BRFSS) survey and from recent county-level surveys in Minnesota were used to design some of the items on the survey instrument. The survey was formatted by the survey vendor, Survey Systems, Inc. of New Brighton, MN, as a scannable, self-administered English-language questionnaire.

Sample

A two-stage sampling strategy was used for obtaining probability samples of adults living in each of the twelve counties. A separate sample was drawn for each county. For the first stage of sampling, a random sample of county residential addresses was purchased from a national sampling vendor (Marketing Systems Group of Horsham, PA). Address-based sampling was used so that all households would have an equal chance of being sampled for the survey. Marketing Systems Group obtained the list of addresses from the U.S. Postal Service. For the second stage of sampling, the “most recent birthday” method of within-household respondent selection was used to specify one adult from each selected household to complete the survey.

Survey Administration

An initial survey packet that included a cover letter, the survey instrument, and a postage-paid return envelope was mailed November 27, 2017, to 18,679 households in the 12-county region. In nine of the counties, survey packets were mailed to samples of 1600 households per county. Three of the counties have fewer than 1600 households; in these cases, survey packets were mailed to all households.

About one week after the first survey packets were mailed (December 5), a reminder postcard was sent to all sampled households, reminding those who had not yet returned a survey to do so, and thanking those who had already responded. Three weeks after the reminder postcards were mailed (December 27), another full survey packet was sent to all households that still had not returned the survey. The remaining completed surveys were received over the next six weeks, with the final date for the receipt of surveys being January 31, 2018.

Completed Surveys and Response Rate

Completed surveys were received from 4296 adult residents of the twelve counties; thus, the overall response rate was 22.9% (4296/18679). County-specific response rates can be found on the next page.

Data Entry and Weighting

The responses from the completed surveys were scanned into an electronic file by Survey Systems, Inc. To ensure that the survey results are representative of the adult population of each of the twelve counties, the data were weighted when analyzed. The weighting accounts for the sample design by adjusting for the number of adults living in each sampled household. The weighting also includes a post-stratification adjustment so that the gender and age distribution of the survey respondents mirrors the gender and age distribution of the adult populations of the twelve counties, according to U.S. Census Bureau American Community Survey 2012-2016 estimates.

County	Surveys mailed	Completed Surveys	Response Rate
Beltrami	1600	316	19.8%
Clearwater	1600	354	22.1%
Hubbard	1600	376	23.5%
Kittson	1402	445	31.7%
Lake of the Woods	1553	337	21.7%
Mahnomen	1600	299	18.7%
Marshall	1600	401	25.1%
Norman	1600	383	23.9%
Pennington	1600	301	18.8%
Polk	1600	351	21.9%
Red Lake	1414	373	26.4%
Roseau	1600	360	22.5%
Total	18769	4296	22.9%

Strengths and Weaknesses of Current Survey Design Methods

Strengths

1. No other adult behavioral risk study focusing on a broad range of health topics has been conducted in the region other than the BRFSS studies (which have traditionally sampled very few individuals in the region)
2. Randomized sampling of county residential addresses was used. This procedure helps eliminate data that is either positively or negatively skewed due to selection biases often associated with convenience sampling.

Weaknesses

1. It must be assumed (through the process of weighting) that individuals responding to the survey who fall within specific demographic groups (for example males aged 18-35), are not different in any substantial way from their peers within that subgroup who did not respond to the survey. It is possible in some instances where responses within individual demographic categories were small enough that the assumption of similarity between those two groups is of concern. Unfortunately, it is impossible to know to what degree of accuracy is achieved ultimately except to examine each data point individually, in context, and through conversations with experienced healthcare professionals serving the region.

Definitions of Key Indicators

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

This Excel file contains the ranks and scores for each county in your state and the underlying data details for the measures used in calculating the 2018 *County Health Rankings*. In addition, the file contains additional measures that are reported on the *County Health Rankings* web site for your state.

For additional information about how the *County Health Rankings* are calculated, please visit www.countyhealthrankings.org

Contents:

Outcomes & Factors Rankings

Outcomes & Factors Sub Rankings

Ranked Measures Data (including measure values, confidence intervals* and z-scores**)

Additional Measures Data (including measure values and confidence intervals*)

Ranked Measure Sources and Years

Additional Measure Sources and Years

* 95% confidence intervals are provided where applicable and available.

** Z-scores are "adjusted" z-scores (e.g., multiplied by -1 if a positively framed measure, set to zero for missing and unreliable values for ranked counties, and truncated at -3 or +3 if county population is less than 20,000).

Measure	Data Elements	Description
Geographic identifiers	FIPS	Federal Information Processing Standard
	State	
	County	
Premature death	Years of Potential Life Lost Rate	Age-adjusted YPLL rate per 100,000
	95% CI - Low	95% confidence interval reported by National Center for Health Statistics
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	Years of Potential Life Lost Rate (Black)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Blacks
	Years of Potential Life Lost Rate (Hispanic)	Age-adjusted YPLL rate per 100,000 for Hispanics
	Years of Potential Life Lost Rate (White)	Age-adjusted YPLL rate per 100,000 for non-Hispanic Whites
Poor or fair health	% Fair/Poor	Percentage of adults that report fair or poor health

Measure	Data Elements	Description
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Poor physical health days	Physically Unhealthy Days	Average number of reported physically unhealthy days per month
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Poor mental health days	Mentally Unhealthy Days	Average number of reported mentally unhealthy days per month
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Low birthweight	Unreliable	Value reported but considered unreliable since based on counts of twenty or less.
	% LBW	Percentage of births with low birth weight (<2500g)
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% LBW (Black)	Percentage of births with low birth weight (<2500g) for non-Hispanic Blacks
	% LBW (Hispanic)	Percentage of births with low birth weight (<2500g) for Hispanics
	% LBW (White)	Percentage of births with low birth weight (<2500g) for non-Hispanic Whites
Adult smoking	% Smokers	Percentage of adults that reported currently smoking
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Adult obesity	% Obese	Percentage of adults that report BMI >= 30

Measure	Data Elements	Description
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Food environment index	Food Environment Index	Indicator of access to healthy foods - 0 is worst, 10 is best
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Physical inactivity	% Physically Inactive	Percentage of adults that report no leisure-time physical activity
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Access to exercise opportunities	% With Access	Percentage of the population with access to places for physical activity
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Excessive drinking	% Excessive Drinking	Percentage of adults that report excessive drinking
	95% CI - Low	95% confidence interval reported by BRFSS
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Alcohol-impaired driving deaths	# Alcohol-Impaired Driving Deaths	Number of alcohol-impaired motor vehicle deaths
	# Driving Deaths	Number of motor vehicle deaths
	% Alcohol-Impaired	Percentage of driving deaths with alcohol involvement
	95% CI - Low	95% confidence interval using Poisson distribution
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Sexually transmitted infections	# Chlamydia Cases	Number of chlamydia cases
	Chlamydia Rate	Chlamydia cases per 100,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Teen births	Teen Birth Rate	Births per 1,000 females ages 15-19
	95% CI - Low	95% confidence interval

Measure	Data Elements	Description
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	Teen Birth Rate (Black)	Births per 1,000 females ages 15-19 for Black non-Hispanic mothers
	Teen Birth Rate (Hispanic)	Births per 1,000 females ages 15-19 for Hispanic mothers
	Teen Birth Rate (White)	Births per 1,000 females ages 15-19 for White non-Hispanic mothers
Uninsured	# Uninsured	Number of people under age 65 without insurance
	% Uninsured	Percentage of people under age 65 without insurance
	95% CI - Low	95% confidence interval reported by SAHIE
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Primary care physicians	# Primary Care Physicians	Number of primary care physicians (PCP) in patient care
	PCP Rate	Primary Care Physicians per 100,000 population
	PCP Ratio	Population to Primary Care Physicians ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Dentists	# Dentists	Number of dentists
	Dentist Rate	Dentists per 100,000 population
	Dentist Ratio	Population to Dentists ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Mental health providers	# Mental Health Providers	Number of mental health providers (MHP)
	MHP Rate	Mental Health Providers per 100,000 population
	MHP Ratio	Population to Mental Health Providers ratio
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Preventable hospital stays	# Medicare Enrollees	Number of Medicare enrollees
	Preventable Hosp. Rate	Discharges for Ambulatory Care Sensitive Conditions per 1,000 Medicare Enrollees

Measure	Data Elements	Description
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Diabetes monitoring	# Diabetics	Number of diabetic Medicare enrollees
	% Receiving HbA1c	Percentage of diabetic Medicare enrollees receiving HbA1c test
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Receiving HbA1c (Black)	Percentage of Black diabetic Medicare enrollees receiving HbA1c test
	% Receiving HbA1c (White)	Percentage of White diabetic Medicare enrollees receiving HbA1c test
Mammography screening	# Medicare Enrollees	Number of female Medicare enrollees age 67-69
	% Mammography	Percentage of female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
	95% CI - Low	95% confidence interval reported by Dartmouth Institute
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Mammography (Black)	Percentage of Black female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
	% Mammography (White)	Percentage of White female Medicare enrollees having at least 1 mammogram in 2 yrs (age 67-69)
High school graduation	Cohort Size	Number of students expected to graduate
	Graduation Rate	Graduation rate
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)

Measure	Data Elements	Description
Some college	# Some College	Adults age 25-44 with some post-secondary education
	Population	Adults age 25-44
	% Some College	Percentage of adults age 25-44 with some post-secondary education
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Unemployment	# Unemployed	Number of people ages 16+ unemployed and looking for work
	Labor Force	Size of the labor force
	% Unemployed	Percentage of population ages 16+ unemployed and looking for work
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Children in poverty	% Children in Poverty	Percentage of children (under age 18) living in poverty
	95% CI - Low	95% confidence interval reported by SAIPE
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Children in Poverty (Black)	Percentage of non-Hispanic Black children (under age 18) living in poverty - from the 2012-2016 ACS
	% Children in Poverty (Hispanic)	Percentage of Hispanic children (under age 18) living in poverty - from the 2012-2016 ACS
	% Children in Poverty (White)	Percentage of non-Hispanic White children (under age 18) living in poverty - from the 2012-2016 ACS
Income inequality	80th Percentile Income	80th percentile of median household income
	20th Percentile Income	20th percentile of median household income
	Income Ratio	Ratio of household income at the 80th percentile to income at the 20th percentile

Measure	Data Elements	Description
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Children in single-parent households	# Single-Parent Households	Number of children that live in single-parent households
	# Households	Number of children in households
	% Single-Parent Households	Percentage of children that live in single-parent households
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Social associations	# Associations	Number of associations
	Association Rate	Associations per 10,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Violent crime	# Violent Crimes	Number of violent crimes
	Violent Crime Rate	Violent crimes per 100,000 population
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Injury deaths	# Injury Deaths	Number of injury deaths
	Injury Death Rate	Injury mortality rate per 100,000.
	95% CI - Low	95% confidence interval as reported by the National Center for Health Statistics
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Air pollution - particulate matter	Average Daily PM2.5	Average daily amount of fine particulate matter in micrograms per cubic meter
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Drinking water violations	Presence of violation	County affected by a water violation: 1-Yes, 0-No
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Severe housing problems	# Households with Severe Problems	Number of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities

Measure	Data Elements	Description
	% Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
Driving alone to work	% Drive Alone	Percentage of workers who drive alone to work
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)
	% Drive Alone (Black)	Percentage of non-Hispanic Black workers who drive alone to work
	% Drive Alone (Hispanic)	Percentage of Hispanic workers who drive alone to work
	% Drive Alone (White)	Percentage of non-Hispanic White workers who drive alone to work
Long commute - driving alone	# Workers who Drive Alone	Number of workers who commute in their car, truck or van alone
	% Long Commute - Drives Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes
	95% CI - Low	95% confidence interval
	95% CI - High	
	Z-Score	(Measure - Average of state counties)/(Standard Deviation)










County Health Rankings



County Health Rankings for Beltrami County, Minnesota

	County	State
Population	46,106	5,519,952
% below 18 years of age	25.3%	23.3%
% 65 and older	15.3%	15.1%
% Non-Hispanic African American	0.7%	6.0%
% American Indian and Alaskan Native	21.6%	1.3%
% Asian	0.75	4.9%
% Native Hawaiian/Other Pacific Islander	0.0%	0.1%
% Hispanic	2.2%	5.2%
% Non-Hispanic white	72.6%	80.6%
% not proficient in English	0%	2%
% Females	50.2%	50.2%
% Rural	67.1%	26.7%

	Beltrami Trend County (Click for info)	Error Margin	Top U.S. Performers	Minnesota Rank (of 87) (Click for info)
Health Outcomes				86
Length of Life				86

Premature death	8,900	7,800-9,900	5,300	5,100	
Quality of Life					85
Poor or fair health	16%	15-16%	12%	12%	
Poor physical health days	3.7	3.6-3.9	3.0	3.0	
Poor mental health days	3.5	3.4-3.6	3.1	3.2	
Low birthweight	6%	6-7%	6%	6%	
Additional Health Outcomes (not included in overall ranking) +					
Premature age-adjusted mortality	390	360-430	270	260	
Child mortality	120	90-130	40	40	
Infant mortality	11	8-14	4	5	
Frequent physical distress	12%	12%	9%	9%	
Frequent mental distress	12%	11-12%	10%	10%	
Diabetes prevalence	10%	11-12%	8%	8%	
HIV prevalence	38		49	171	
Health Factors					36
Health Behaviors					86
Adult smoking	20%	19-20%	14%	15%	
Adult obesity	32%	29-36%	26%	27%	
Food environment index	7.9		8.6	8.9	
Physical inactivity	22%	19-24%	20%	20%	
Access to exercise opportunities	76%		91%	88%	
Excessive drinking	23%	22-24%	13%	23%	
Alcohol-impaired driving deaths	36%	26-45%	13%	30%	
Sexually transmitted infections	4665		145.1	389.3	
Teen births	39	36-43	15	17	
Additional Health Behaviors (not included in overall ranking) +					
Food insecurity	13%		10%	10%	

Limited access to healthy foods	7%		2%	6%	
Drug overdose deaths	8		4-14	10	11
Drug overdose deaths - modeled	12-13.9%			8-11.9	12.5
Motor vehicle crash deaths	12		9-16	9	8
Insufficient sleep	31%		30-32%	27%	30%
Clinical Care					84
Uninsured	9%		8-10%	6%	5%
Primary care physicians	1,090:1			1,030:1	1,110:1
Dentists	1,540:1			1,280:1	1,440:1
Mental health providers	320:1			330:1	470:1
Preventable hospital stays	43		37-49	35	37
Diabetes monitoring	66%		57-74%	91%	88%
Mammography screening	60%		50-71%	71%	65%
Additional Clinical Care (not included in overall ranking) +					
Uninsured adults	10%		9-12%	7%	6%
Uninsured children	5%		4-6%	3%	3%
Health care costs	\$8,621				\$8,250
Other primary care providers				782:1	1,020:1
Social & Economic Factors					83
High school graduation	67%			95%	83%
Some college	66%		62-71%	72%	74%
Unemployment	5.3%			3.2%	3.9%
Children in poverty	25%		19-30%	12%	13%
Income inequality	4.5		4.1-4.9	3.7	4.4
Children in single-parent households	46%		42-51%	20%	28%

Social associations	10%		22.1	13.0
Violent crime	221		62	231
Injury deaths	79	67-90	55	62
Additional Social & Economic Factors (not included in overall ranking) +				
Disconnected youth	16%		10%	9%
Median household income	\$45,300	\$41,700-49,000	\$65,100	\$65,600
Household Income	\$45,300			
Household income (Hispanic)	\$23,800			
Household income (White)	\$49,000			
Children eligible for free or reduced price lunch	59%		33%	38%
Residential segregation - black/white	66		23	62
Residential segregation - non-white/white	58		14	49
Homicides	4		2	2
Firearm fatalities	10		7	7
Physical Environment				6
Air pollution - particulate matter (Click for info)	8.7		6.7	9.3
Drinking water violations	No			
Severe housing problems	16%	14-18%	9%	14%
Driving alone to work	75+%	73-77%	72%	78%
Long commute - driving alone	17%	15-18%	15%	30%

Note: Blank values reflect unreliable or missing data

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University of Wisconsin
Population Health Institute
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Support
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