

North Canyon Medical Center

Community Health Needs Assessment

September 2016



NORTH CANYON
MEDICAL CENTER



CPAs & BUSINESS ADVISORS



Overview

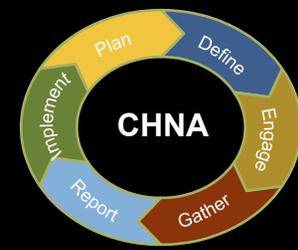


Between February and August 2016, North Canyon Medical Center (NCMC) conducted a Community Health Needs Assessment (CHNA) for the approximately 15,000 residents of Gooding County in Idaho. NCMC is located in the town of Gooding and serves the surrounding rural area. The CHNA was conducted with assistance from Eide Bailly LLP an accounting and consulting firm specializing in consulting with healthcare organizations.

The CHNA is a tool used to help communities assess their strengths as well as their weaknesses when it comes to the health of the community. It is also the foundation for improving and promoting the health of the community. The process helps to identify factors that affect the health of a population and determine the availability of resources within the community to adequately address these factors and health needs.



Overview

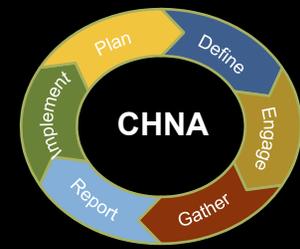


The CHNA process also fulfills the requirements set forth by the Internal Revenue Code 501(r)(3), a statute established within the Patient Protection and Affordable Care Act, which requires not-for-profit hospitals to conduct a CHNA every three years. This report includes qualitative and quantitative information from local, state, and federal sources. Input was received from persons that represented a broad range of interests in the community; persons with public health knowledge and expertise; and persons representing medically underserved and vulnerable populations.

NCMC will create an implementation plan to clarify how it and other community resources will address the needs identified during the CHNA process.



Hospital Overview



North Canyon Medical Center is a 15-bed critical access hospital located in the south central region of Idaho. NCMC is located in the city of Gooding, with a population of approximately 3,400. NCMC offers state-of-the-art healthcare with a personal touch. Our employees take pride in creating an environment of comfort, safety, and familiarity for each of our patient.



Hospital Overview



North Canyon Medical Center provides the following services:

- **Acute Care**
- **Diabetes Education and Management**
- **Diagnostic Imaging**
- **Emergency Services**
- **Clinical Services**
- **Family Medicine**
- **Fitness Center**
- **Laboratory Services**
- **Nutrition Services**
- **Rehabilitation Services**
- **Respiratory Therapy**
- **Sleep Studies**
- **Social Services**
- **Specialty Clinics**
- **Surgical Services**
- **Swing Bed**
- **TeleBehavioral Health**
- **Telepharmacy**
- **Transportation Van**
- **Wound Care**

Community Served



The community served is defined as Gooding County as this represents the primary service area based on admit/discharge data. However, NCMC also provides services to patients from several neighboring counties including, Lincoln County, Camas County, Glens Ferry, King Hill and Buhl.





Community Population



Changes in population from 2010 to 2014

	2010 Census	2015 Estimate	% Change
Gooding County	15,464	15,064	(2.6%)
Idaho	1,567,652	1,634,464	4.3%
United States <small>www.census.gov</small>	308,758,105	318,857,105	3.3%

Community Demographics



Changes in age demographics from 2010 to 2014

	Under 5 years of age		Under 18 years of age		65 and over	
	2010	2014	2010	2014	2010	2014
Gooding County	8.3%	6.9%	29.5%	28.2%	15.1%	16.4%
Idaho	7.8%	7.0%	27.4%	26.4%	12.4%	14.3%
United States	6.5%	6.2%	24.0%	23.1%	13.0%	14.5%

www.census.gov



Changes in race and origin demographics in Gooding County from 2010 to 2014:

	2010	2014
White	69.6%	68.6%
Hispanic	28.1%	28.6%
African American	0.2%	0.5%
American Indian	0.8%	1.8%
Asian	0.5%	0.9%
Pacific Islander	0.1%	0.2%
Two or more	2.4%	1.8%

www.census.gov



Income and Poverty



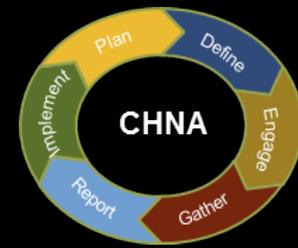
Income and Poverty Rates for Gooding County and the State of Idaho

	Gooding County	Idaho
Median Household Income	38,447	53,482
Per capita income	18,965	28,555
Persons living in poverty	17.1%	14.8%

American Community Survey, Quick Facts



Unemployment Rates



Annual Unemployment Rates for Gooding County, State of Idaho and United States

	2010	2011	2012	2013	2014
Gooding County	7.5%	6.7%	5.7%	4.9%	4.0%
Idaho	9.0%	8.3%	7.2%	6.2%	4.8%
United States	9.6%	8.9%	8.1%	7.4%	6.2%

United States Department of Labor Bureau of Labor Statistics



Conducting the Assessment

To ensure input from persons with broad knowledge of the community, a Community Advisory Committee was organized with individuals from the community served. Personal invitations were sent to individuals representing various community, business, educational and religious groups. Representatives from the local health care providers and the community health department were invited to bring in additional professional perspective.

The individuals identified to participate in the process have direct access with individuals across all subsections of the community and therefore can address needs that may impact those populations that are medically underserved or most in need. Gooding County has a large Hispanic and undocumented population along with large population without medical insurance.

Conducting the Assessment



Community participants represented the following community organizations

- North Canyon Medical Center
- Gooding School District
- Helping Hearts & Hands
- Idaho School for the Deaf and Blind
- Orchard Valley Head Start
- Bennett Hills
- Pro Active Behavioral Health
- St. Luke's Magic Valley
- Gooding EMS
- Wendell Senior Center
- County Commissioners
- EMPA
- Gooding Family Physicians
- South Central Community Action
- Hagerman School District
- City of Gooding Mayor

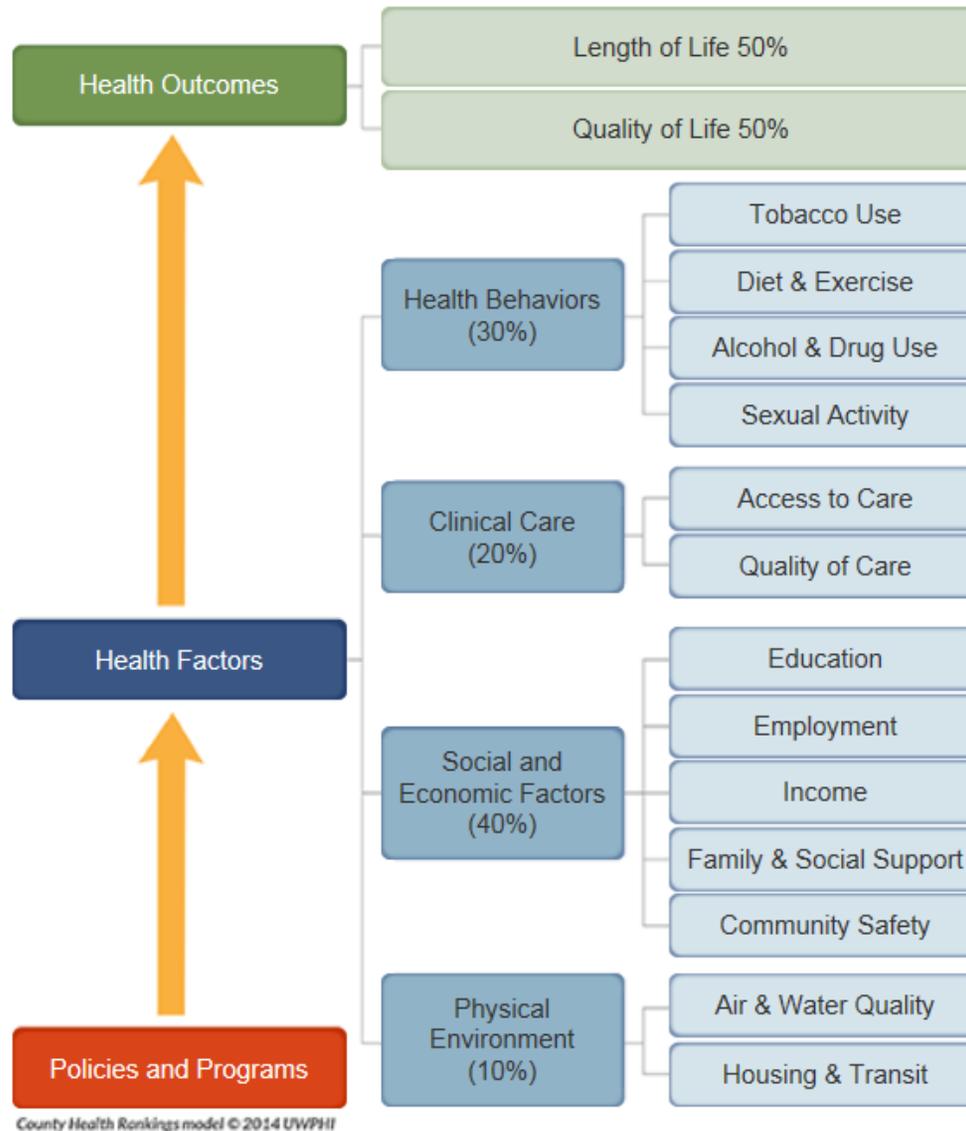


Conducting the Assessment

An initial meeting with the Community Advisory Committee was held on March 31, 2016. The committee reviewed national and state health care trends in addition to rankings available from 2016 County Health Rankings & Roadmaps (<http://www.countyhealthrankings.org>). The review included analysis of health trends and comparisons between the service area, Idaho and the United States.

The County Health Rankings provides a snapshot of a community's health and a starting point for investigating and focusing on the health of the community. The ranking focuses on Health Factors (Behaviors, Clinical Care, and Social and Economic Factors) and Policies and Programs that result in Health Outcomes (Length and Quality of Life).

County Health Rankings



County Health Rankings & Roadmaps
A Healthier Nation, County by County

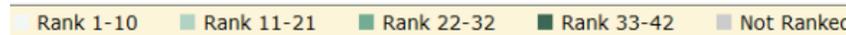
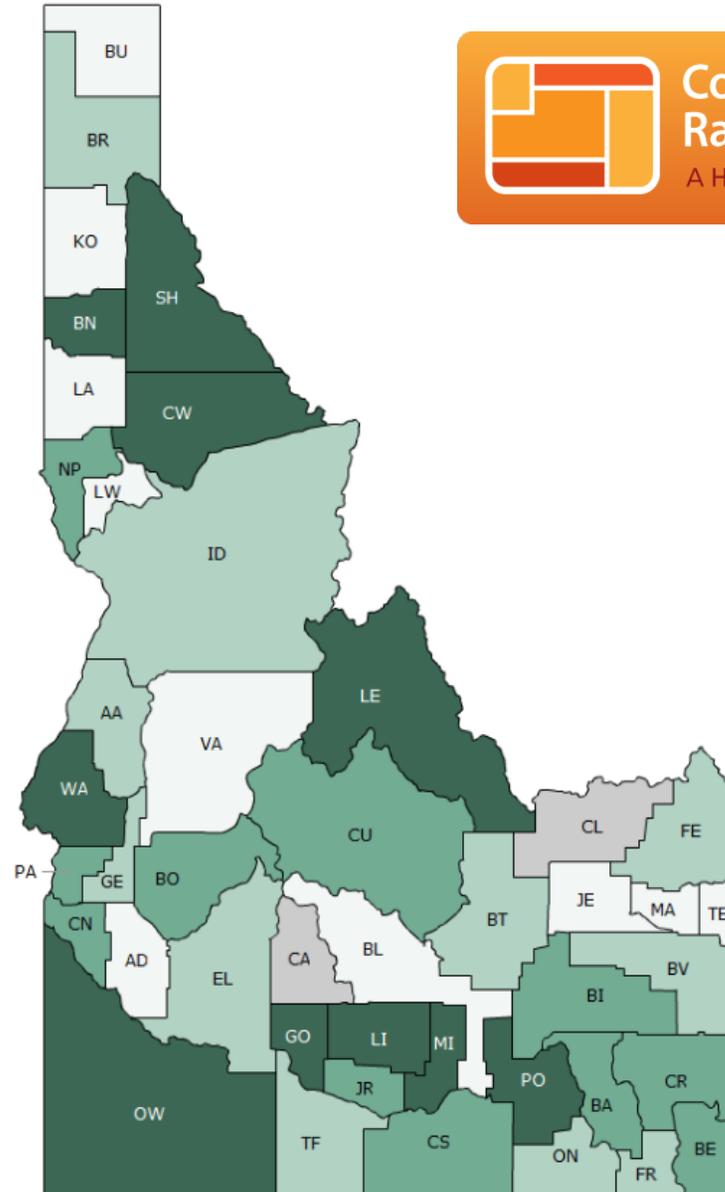


Overall Rankings: Health Outcomes



The following provides overall health outcome rankings by county for the state of Idaho (*lower the better*).

**Gooding County:
34 of 42**





Overall Rankings: Health Factors

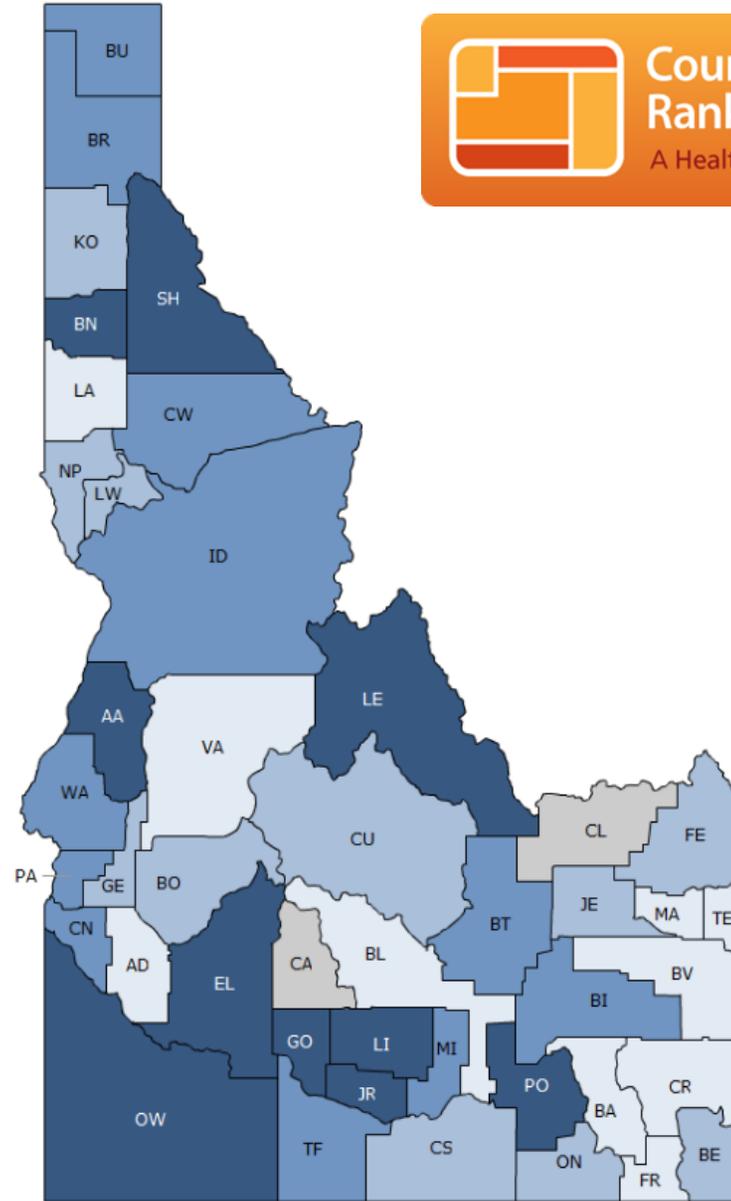


The following provides overall health factor rankings by county for the state of Idaho (*lower the better*).

Gooding County:
36 of 42



County Health Rankings & Roadmaps
A Healthier Nation, County by County



Rank 1-10 Rank 11-21 Rank 22-32 Rank 33-42 Not Ranked



Length and Quality of Life



	Gooding County	Idaho	Top 10% US
Premature Death*	7,500	6,100	5,200
Poor or fair health	19%	13%	12%
Poor physical health days**	4.2	3.3	2.9
Poor mental health days**	3.9	3.3	2.8
Low birthweight	7%	7%	6%

* Per 100,000

** Average number reported in the past 30 days





Health Factors-Behaviors



	Gooding County	Idaho	Top 10% US
Adult Smoking	19%	16%	14%
Adult Obesity	32%	28%	25%
Physical inactivity	24%	20%	20%
Access to exercise opportunities	60%	75%	91%
Excessive Drinking	15%	16%	12%
Alcohol-impaired driving deaths	28%	33%	14%
Sexually transmitted diseases*	313.9	340.2	134.1
Teen births**	53		

* Per 100,000 of population

** Per 1,000 female population ages 15-19 from 2007-2013

County Health Rankings & Roadmaps
A Healthier Nation, County by County



Health Factors-Clinical Care



	Gooding County	Idaho	Top 10% US
Uninsured	28%	19%	11%
Primary Care Physicians	2,150:1	1,580:1	1,040:1
Dentists	3,770:1	1,560:1	1,340:1
Mental health Providers	890:1	520:1	370:1
Preventable hospital stays*	58	33	38
Diabetic monitoring**	79%	82%	90%
Mammography screening**	54%	58%	71%

* Per 1,000 Medicare enrollees

** Based on Medicare enrollees



Social and Economic Factors



	Gooding County	Idaho	Top 10% US
High School Graduation	79%	81%	93%
Some College	42%	64%	72%
Unemployment	4%	4.8%	3.5%
Children in poverty	25%	19%	13%
Income inequity*	3.9	4.1	3.7
Children in single-parent households	22%	25%	21%
Violent Crime**	154	210	59
Injury Deaths**	68		

* Ratio of income at 80th percentile to income at 20th percentile

** Per 100,000 of population



County Health Rankings & Roadmaps
 A Healthier Nation, County by County



Advisory Committee Observations



The Community Advisory Committee had a facilitated conversation around the information identified in the County Health Rankings report along with their personal experience working with the community, especially vulnerable populations. The following were the general observations:

- **Needs to be a focus on preventative efforts around health factors**
 - **Hard to make an impact unless people take personal responsibility**
- **A significant portion of the population are low income and not getting healthcare services needed**
 - **Children**
 - **Undocumented**
 - **Hispanic**
 - **Uninsured**



Advisory Committee Observations



- **There is an overall lack of understanding in the community of available services and aid available from the hospital and other service agencies**
- **Many residents travel to Family Health Services (free clinic outside of the local area) in order to receive free care**
 - **Many requests are made for travel assistance**
- **Great services and recreational facilities are available in the community**
 - **Lack of knowledge of services available**
 - **Lack of personal responsibility**
 - **May not be reaching groups most in need**
 - **Need coordination amongst key stakeholders**
- **There is a communication barrier with the Hispanic population**



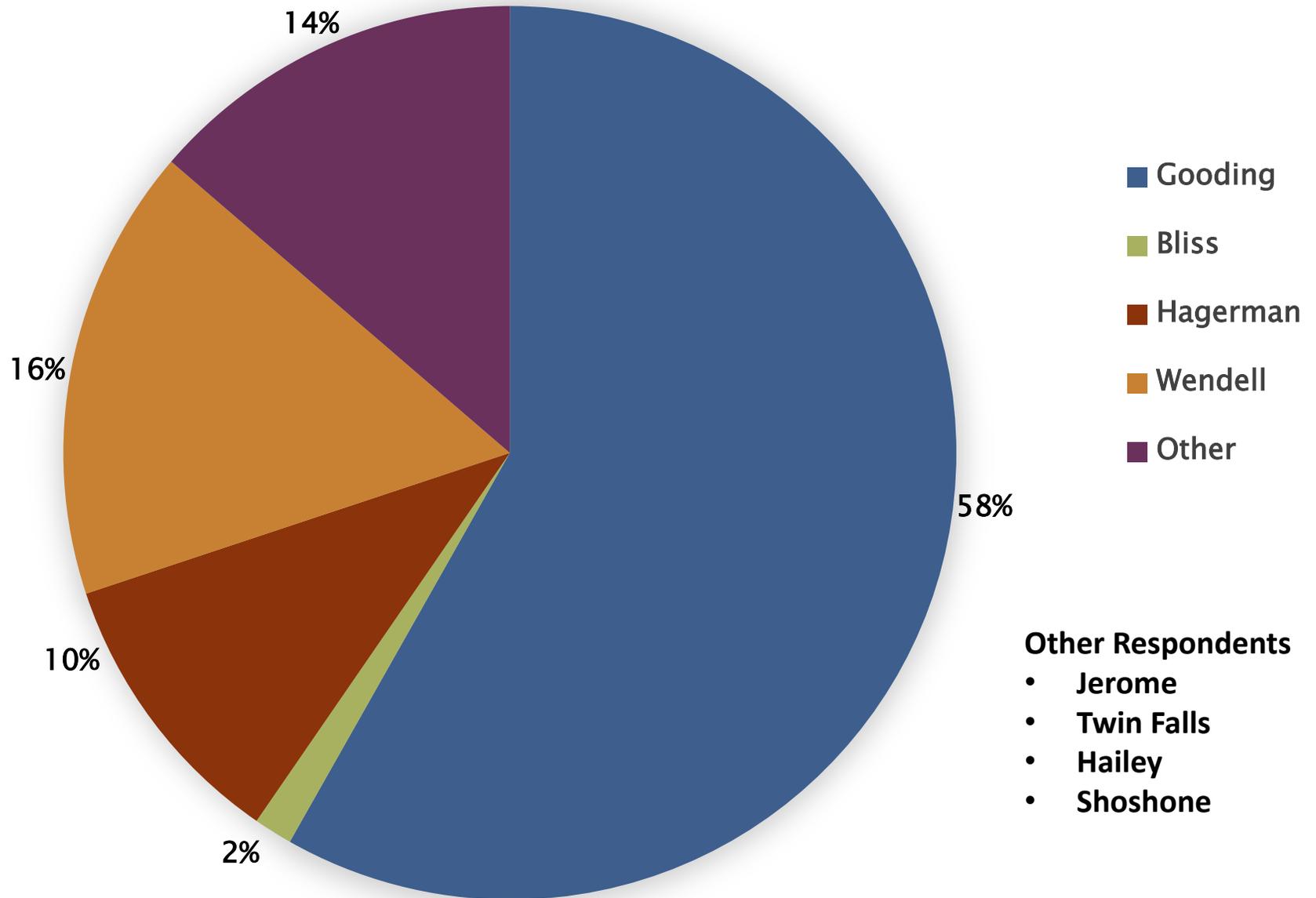
Conducting the Assessment



In order to gather feedback from individuals not participating in the Community Advisory Committee, a survey tool was developed to address general questions related to the health of the community. The survey was distributed by the hospital and by members of the Community Advisory Committee to others in the community including those identified as medically underserved. The surveys were returned for independent review and analysis prior to the June 22nd meeting of the Advisory Committee.

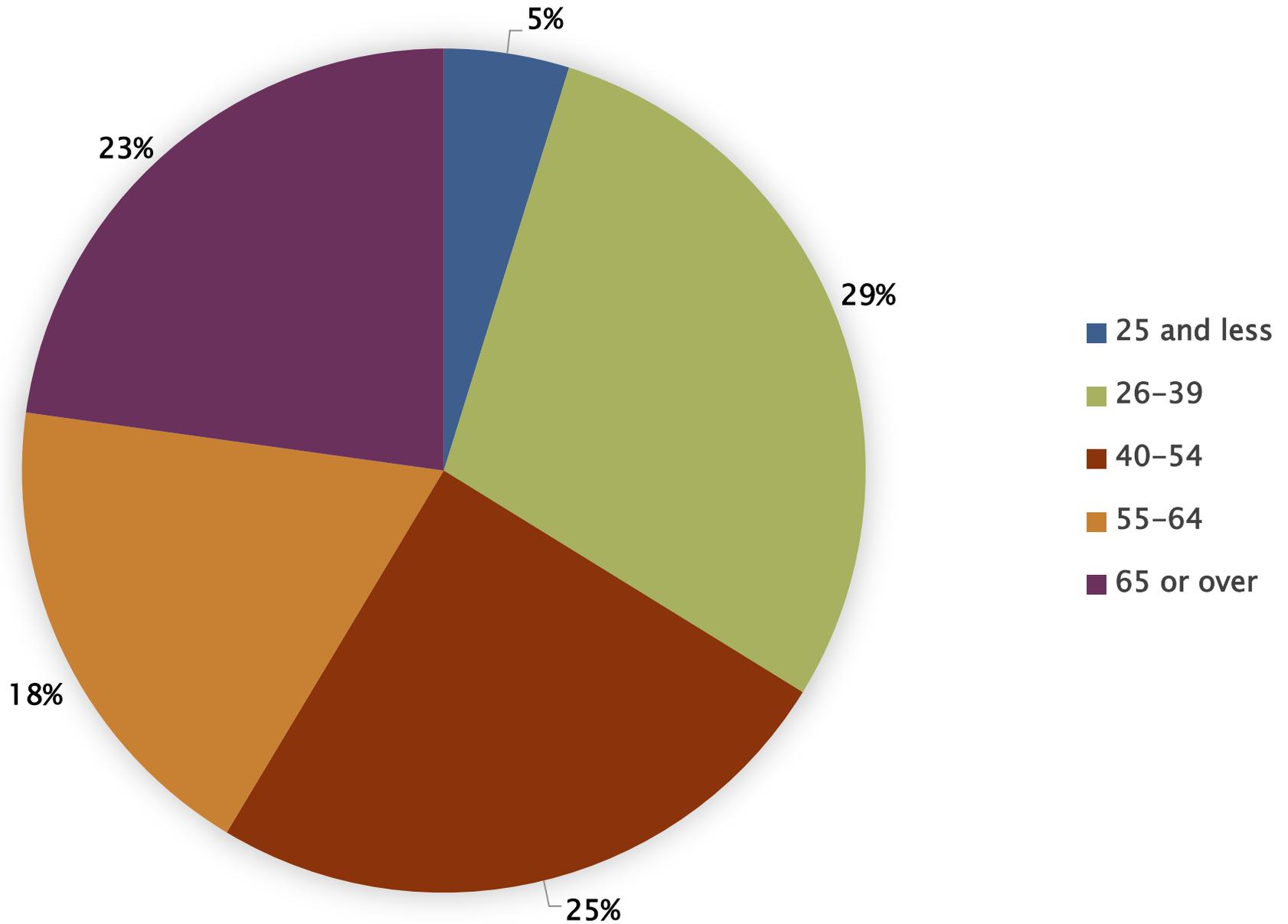
- The survey was distributed to the local community groups, Chambers of Commerce members, hospital board members, employees and other key community members
- 141 surveys were completed by members of the community representing a mix of the community demographics

Demographic Information



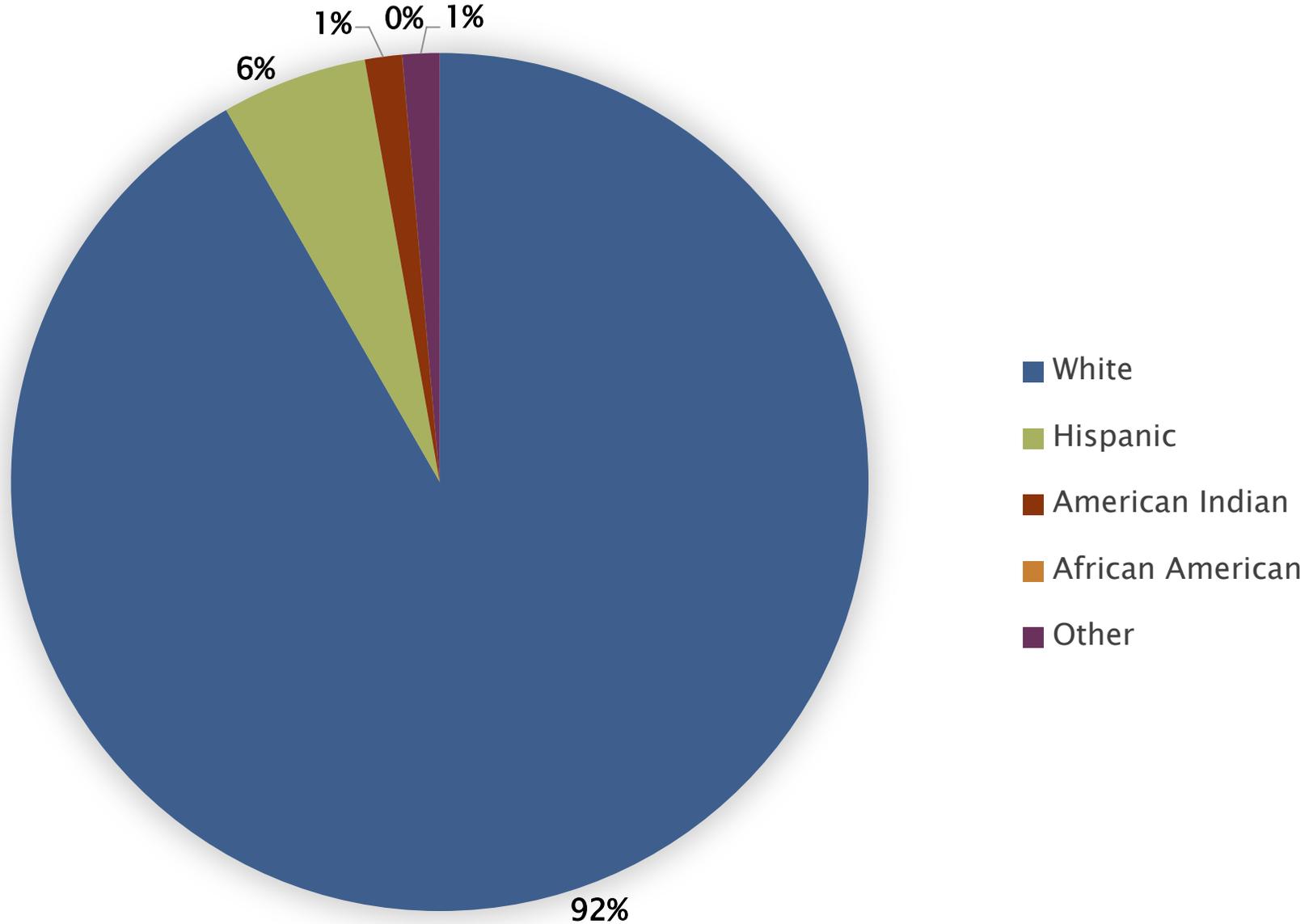


Age of Respondents





Race of Respondents

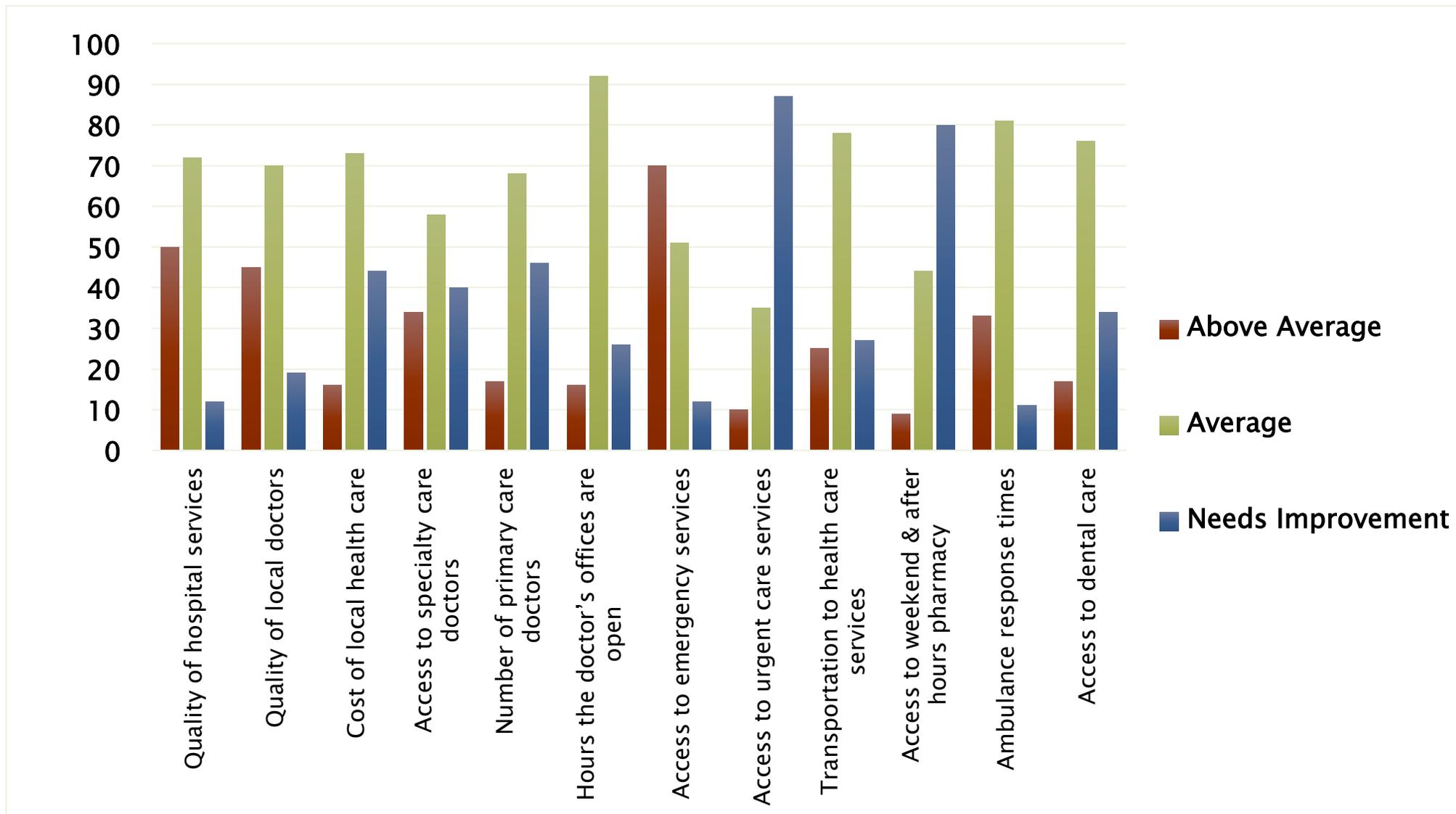




Survey Results



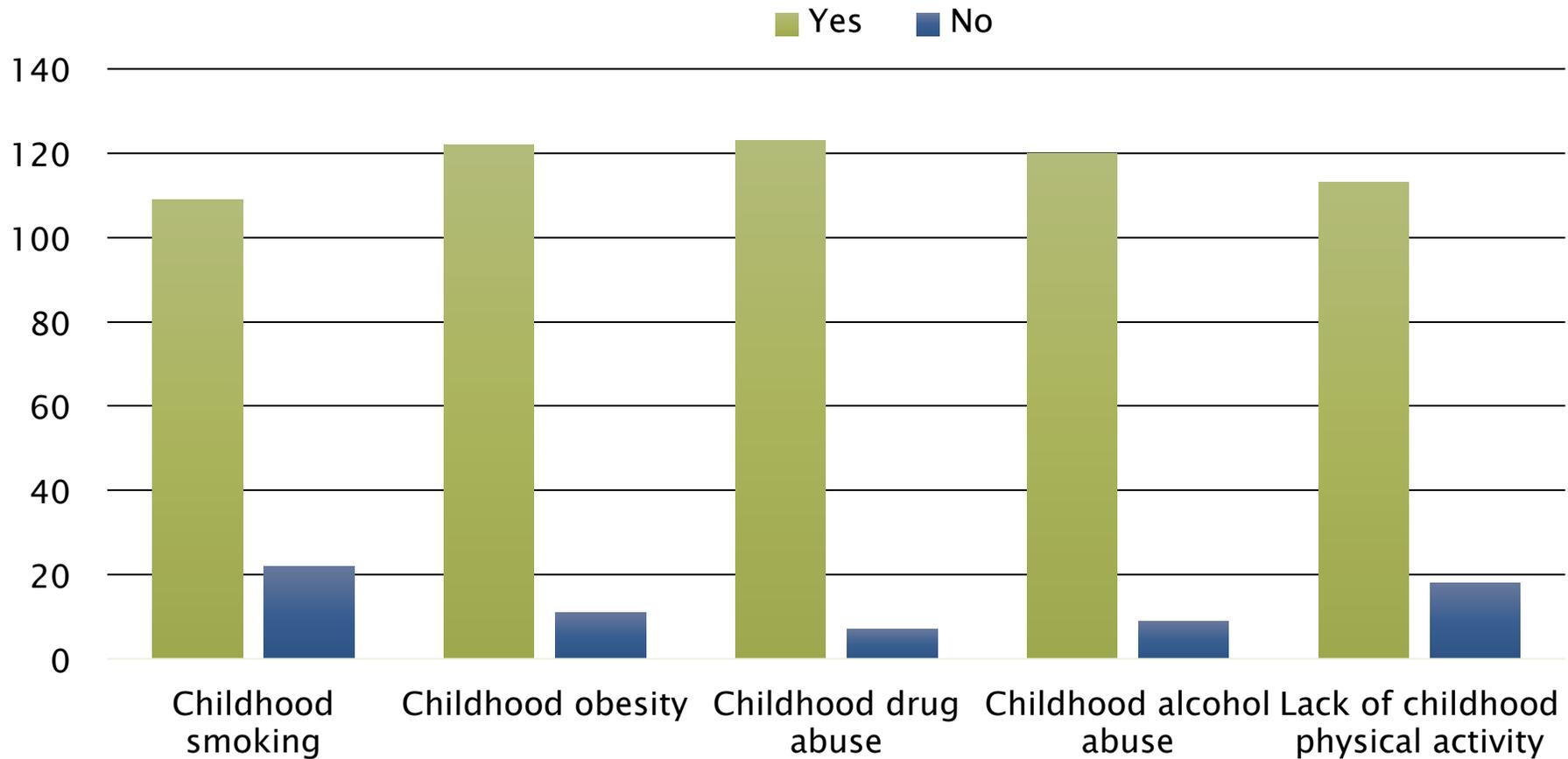
Overall Perception of Healthcare



Survey Results



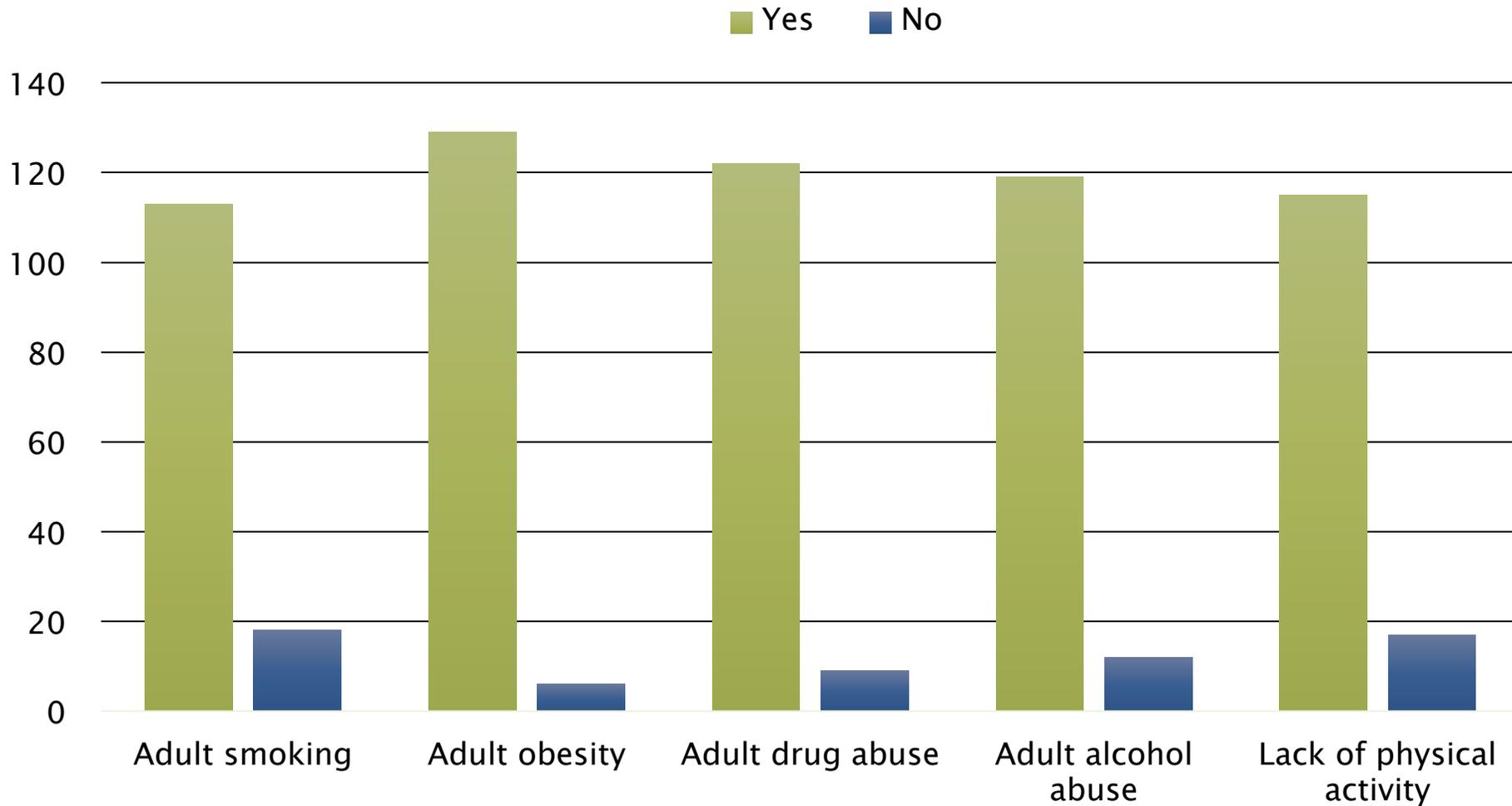
Health Concerns-Childhood population (Youth to 18)



Survey Results



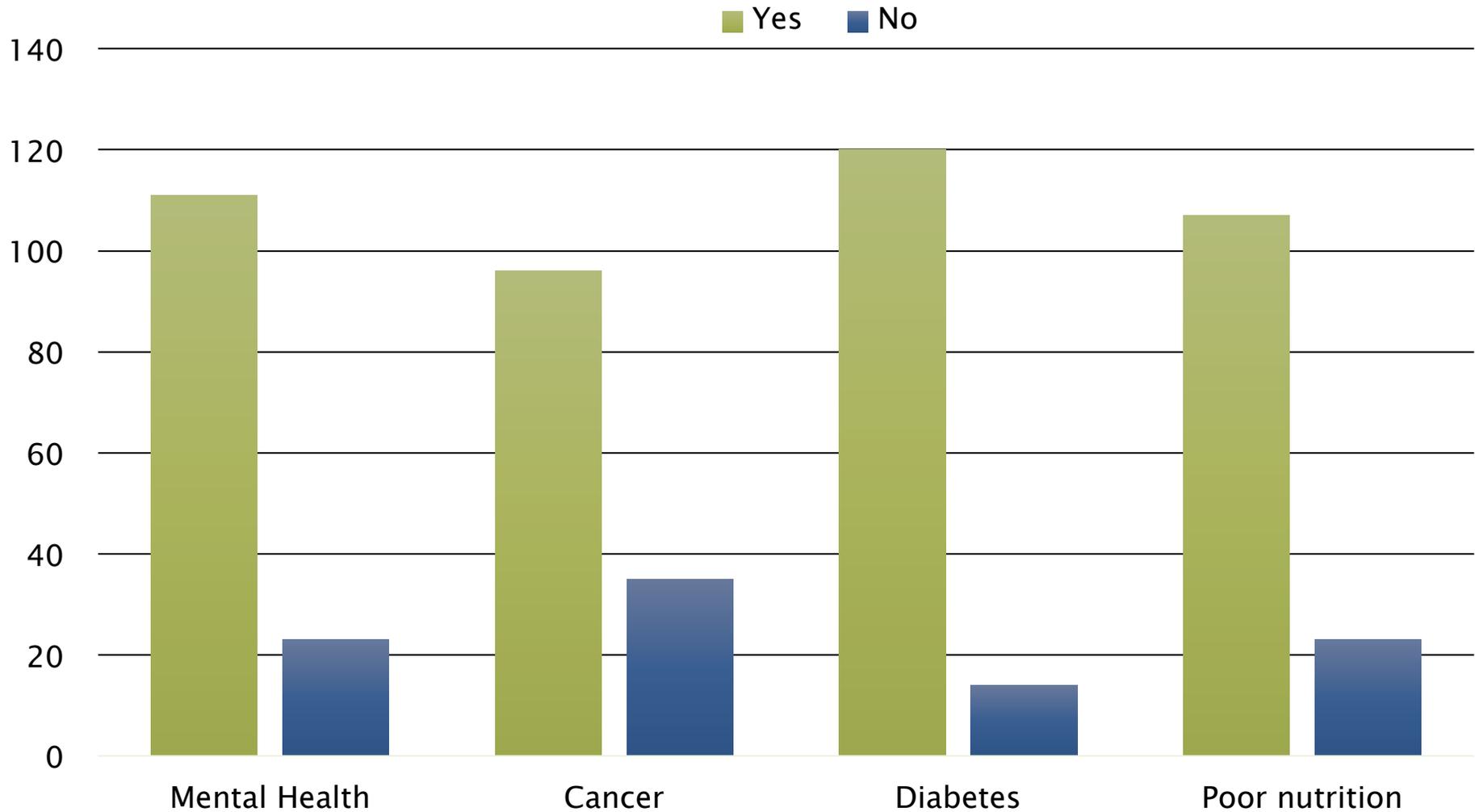
Health Concerns-Adult population (18 & above)



Survey Results



Health Concerns-Community as a whole



Survey Results

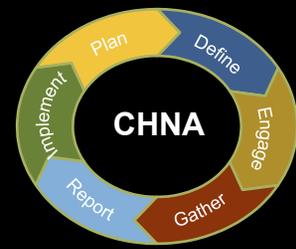


- **Changes in Healthcare Needed**
 - **Urgent care/extended clinic access**
 - **Cost is too expensive**
 - **Sliding scale for services**
 - **Local free clinic**
 - **More mental health services**
 - **Access to specialists**
 - **Pediatricians**
 - **OB/GYN**
 - **Transportation to medical services**
 - **Collaboration amongst services**
 - **Patient advocates**

Survey Results



- **Underlying Issues Impacting the Health of the Community**
 - **Transportation issues**
 - **Lack of personal responsibility and education**
 - **Poverty**
 - **Cost**
 - **Lack of understanding of preventative medicine**
 - **Childcare**
 - **Undocumented workers without access to care**
 - **Overall access to care**
 - **Lack of parental responsibility**



Conducting the Assessment

The Community Advisory Committee met for a second time on June 22nd and reviewed the County Health Data, the survey results and the observations from the initial meeting. They discussed the various needs identified in these mediums and the overall impact those needs have on the health of the community. They specifically addressed the significance of the needs with respect to the vulnerable populations.

Based on that discussion and the information reviewed, a list of eight potential community needs was developed. There were no primary or chronic diseases or other specific health needs identified related to low income or chronically ill populations.



Prioritization of Needs



The Community Advisory Committee members used a set of criteria to evaluate the list of potential needs identified through the fact finding process. The criteria included:

- a. The burden, scope, severity and urgency of the health need
- b. The effectiveness of possible interventions
- c. The impact on the greatest number of community members
- d. The importance the community places on the need including personal responsibility
- e. The ability to make an impact with low effort

The Community Advisory Committee discussed each of the identified health issues in terms of whether it truly was an issue, the potential health improvement impact, cost and urgency. This process involved casual group discussion allowing individuals to make decisions with input from their fellow committee members.



Prioritization of Needs



Each committee member voted for the top five issues they felt were the highest priority and where the most impact could be achieved. The prioritization process identified five priority issues for the community, presented in rank order:

- **Coordination of Services**
- **Urgent Care/extended hours**
- **Behavioral Health Issues**
- **Sliding fee/free clinic**
- **Drug and alcohol use amongst teens**



Community Resources



Other resources in the community that may be available to work in collaboration with North Canyon Medical Center to address the needs identified include:

- **School Districts**
- **Helping Hearts & Hands**
- **Idaho School for the Deaf and Blind**
- **Orchard Valley Head Start**
- **Pro Active Behavioral Health**
- **Senior Centers**
- **Physician Groups**
- **Gooding EMS**
- **EMPA**
- **South Central Community Action**
- **City of Gooding Mayor**
- **Assisted Living/Nursing Homes**
- **Local businesses**
- **County Commissioners**
- **Chamber of Commerce**
- **Churches**



Evaluation of Impact of Prior CHNA



NCMC completed a CHNA in September of 2013. No written comments have been received from this assessment. NCMC identified the following needs during the prior assessment and have conducted the following activities in order to address the needs identified:

- **Education on Health Care Reform and Options**
 - Information nights at senior centers and chambers
 - Education of staff
- **Chronic Disease/ Obesity/ Mammogram/ Diabetes/ Nutrition/Smoking**
 - Presented various health topics to community groups
 - Diabetes Prevention Program started
 - Men's Health campaign



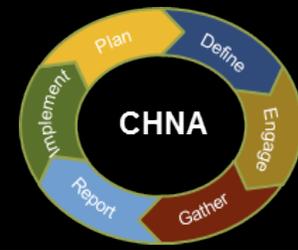
Evaluation of Impact of Prior CHNA



- **Education on Services Available**
 - New website
 - Increased marketing, social media, mailers
- **More Accessible Public Transportation**
 - Transportation program started to and from NCMC
 - Approximately 300 rides
- **Shortage of Specialists**
 - Increased orthopedic services
 - Hired radiologist
 - Increased access for wound care and sleep lab



Evaluation of Impact of Prior CHNA



- **Primary Care**
 - Integrated local family physician office
 - Recruited DO, FNP, PA
 - Expanded clinic hours
- **Cost of Health Care**
 - Charge master review and pricing analysis
 - Provide financial assistance
- **Physical Inactivity**
 - Community fun run/walk
- **Aging Services**
 - Monthly presentations at senior centers
 - Increased marketing, social media, mailers



Next Steps



This Community Health Needs Assessment report was approved by the Board of Directors at their meeting on August 30, 2016.

NCMC is required to adopt an organization specific implementation strategy in response to the Community Health Needs Assessment report. In the coming months, this implementation strategy will be discussed and approved by the Board of Directors of NCMC, and will be reviewed on an annual basis. The CHNA process and public report will be repeated every three years, as required by federal regulations.



Contact Information



Community members who would like to provide comments on the needs identified or provide input on the next CHNA process are encouraged to contact NCMC with their inquiries, suggestions or comments.

**Shellie Amundson
Director Community Relations
North Canyon Medical Center
267 North Canyon Drive
Gooding, ID 83330
Shellie.Amundson@ncm-c.org**