

Presentation Medical Center and Rolla Service Area

2019 Community Health Needs Assessment

October 2019

Each Critical Access Hospital must conduct a Community Health Needs Assessment (CHNA) once every three years, as mandated by law. Local public health units seeking to gain/maintain accreditation conduct an assessment every five years. CHNAs completed by the Center for Rural Health (CRH) include secondary data review, community focus groups, key informant interviews, and a community survey. This fact sheet presents key community strengths and opportunities from the Presentation Medical Center (PMC) service area 2019 CHNA.

The PMC service area is comprised of Rolette County (population 14,301) in its entirety. The median household income is \$36,170 compared to the state's median household income of \$61,285.

Community Strengths

The top three assets identified in the community survey included an informal, laidback lifestyle; closeness to work and activities; and that people are friendly, helpful, and supportive. Other community assets include two fitness centers, two golf courses, multiple lakes, and hiking/biking trails. The community also reports a significantly lower rate of violent crime than the state overall.

Health Outcomes and Factors

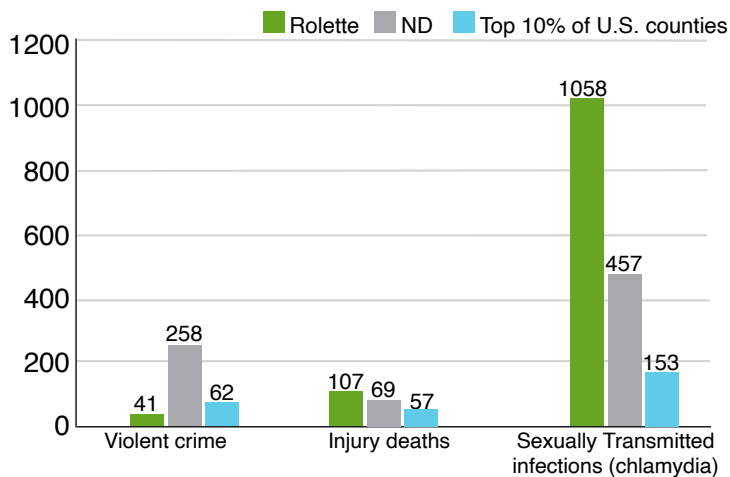
In review of secondary data, 27% of Rolette County residents reported poor or fair health, as opposed to 14% for the state. The county had a greater percentage of residents reporting excessive drinking, physical inactivity, adult smoking, and obesity than the top 10% of U.S. counties. See Table 1.

Table 1. Health Factors by % of Population, 2019

	Rolette County	ND	Top 10% U.S.
Poor or fair health	27%	14%	12%
Excessive drinking	19%	26%	13%
Access to exercise opportunities	64%	74%	91%
Physical inactivity	29%	22%	19%
Adult obesity	39%	32%	26%
Adult smokers	32%	20%	14%

Injury deaths were more prevalent in Rolette County (107 deaths per 100,000 residents) than in the state overall (69 per 100,000 residents) and the top 10% of U.S. counties (57 per 100,000 residents). The same is true for incidence of chlamydia. Violent crimes, however, were less than the state overall. See Figure 1.

Figure 1. Cases per 100,000 Population, 2019



In Rolette County in 2017 there were 456 licensed daycare spots for the 2,009 children ages 0-13 with both parents in the labor force. See Table 2 for more information on children's health.

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

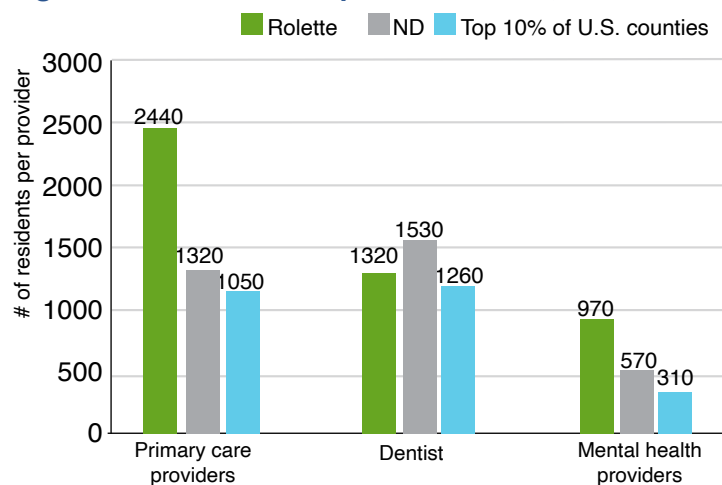
	Rolette	ND
Children uninsured (2016)	13.1%	9%
Uninsured children below 200% of poverty (% of pop.) (2016)	44.2%	42%
Medicaid recipients (2017)	66.4%	28%
Children enrolled in Healthy Steps (2013)	2.2%	3%
Receiving SNAP (2017)	58%	20%

In 2019, the teen birth rate for Rolette County was 70 births per 1,000 females (15-19 years old), which is significantly higher than the state average of 23 per 1,000 and the top 10% of U.S. counties (14 per 1,000).

Healthcare Access

Based on the provider to population ratio, Rolette County has fewer residents per single dentist (1,320) than the state's average (1,530), but more than the top 10% of U.S. counties (1,260). The county also had more residents per primary care physicians (2,440) than the state's average (1,320) and more residents per mental health provider (970) than the state's average (570 per resident). See Figure 2.

Figure 2. Provider to Population Ratios, 2019



Community Concerns

In a survey conducted by CRH, residents identified up to three primary community concerns. The top two concerns were drug use and abuse among adults (62%) and youth (58%). Adult alcohol use and abuse, not enough jobs with livable wages, and youth alcohol use and abuse made the top five. See Table 3.

Table 3. Community Concerns, 2019

Community Concerns	%
Drug Use and Abuse – adults	62%
Drug Use and Abuse – youth	58%
Alcohol Use and Abuse – adults	54%
Not Enough Jobs with Livable Wages	46%
Alcohol Use & Abuse – youth	45%
Poverty	42%
Ability to Retain Primary Care Providers	39%
Cost of Long-Term/Nursing Home Care	39%
Availability of Resources to Help the Elderly Stay in their Homes	36%

In May 29, 2019, a community focus group identified their top concerns as:

1. Ability to retain primary care providers
2. Drug use and abuse – youth
3. Obesity – adults

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

1. Not able to see same provider over time (38% of respondents)
2. Not enough providers (31%)
3. Not able to get appointments/limited hours (27%)
4. No insurance/limited insurance (27%)
5. Not enough specialists (25%)

Individuals also indicated which specific healthcare services, if any, they felt should be added locally. The most often cited service was dental care.

Steps Undertaken Since 2016 CHNA

As a result of the previous CHNA, PMC has added one physician and has developed a provider retention plan to focus on this issue. PMC has also started weekly diabetes education classes, working closely with Rolette County Public Health District (RCPHD) on providing information on diabetes prevention and control for the public. Additionally, RCPHD has collaborated with PMC to implement an education and awareness program on the issue of alcohol/substance abuse, along with increased screening and community forums about the opioid epidemic.

Implementation Strategies

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

Full Report

Gibbens, B. and Larson, S. Rolla Service Area: Community Health Needs Assessment, 2019.

For More Information

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

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