

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 Grafton service area 2022 CHNA.

The Grafton service area comprises Walsh County. With regard to demographics, Walsh County's population from 2020 to 2021 decreased by almost 1%. The percentage of residents ages 65 and older is approximately 6% higher for Walsh County (21.5%) than the North Dakota average (15.7%), and the high school graduation rate is lower for Walsh County (86.8%) than the North Dakota average (93.1%). The median household income in Walsh County (\$55,428) is lower than the state average for North Dakota (\$65,315).

Community Strengths

The top three assets identified in the community survey included people are friendly, helpful, and supportive; the community was family-friendly; and healthcare. Other community assets include it being a safe place to live and that it had a quality school system

Health Outcomes and Factors

In review of secondary data, Walsh County residents reported food environment index at 9.2, which was slightly better than the state average of 9.0 and the top 10% of the U.S. at 8.6. However, Walsh County had a greater percentage of residents reporting physical inactivity, adult smoking, and obesity than the top 10% of U.S. counties. See Table 1.

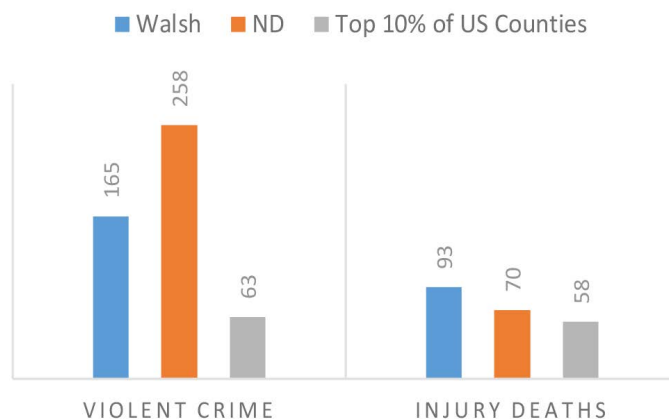
Table 1. Health Factors by % of Population, 2021

	Walsh County	ND	Top 10% U.S.
Uninsured	11%	9%	6%
Food environment index	9.2	9.0	8.6
Access to exercise opportunities	66%	74%	91%
Physical inactivity	27%	24%	20%
Adult obesity	35%	33%	26%
Adult smokers	21%	14%	18%

Injury deaths were more prevalent in Walsh County (93 deaths per 100,000 residents) than in the state overall (70 per 100,000

residents) and the top 10% of U.S. counties (58 per 100,000 residents). Violent crime in Walsh County (165 deaths per 100,000 residents) was lower than the state average (258 deaths per 100,000 residents) but much higher than the top 10% of U.S. counties (63 per 100,000 residents). See Figure 1.

Figure 1. Cases per 100,000 Population, 2021



In 2020, data shows victims of child abuse and neglect requiring services (rate per 1,000 children ages 0-17) was 14.52 in Walsh County, while North Dakota was 8.89. Medicaid recipients (% of population ages 0-20) were 38.7% for Walsh County, which is higher than the North Dakota average of 26.0%. See Table 2 for more information on children's health factors.

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

	Walsh	ND
Victims of child abuse and neglect requiring services (2020)	14.52	8.89
Children food insecurity (2019)	9.1%	9.3%
Medicaid recipients (2020)	38.7%	26.0%
Children enrolled in Healthy Steps (2020)	2.7%	1.7%
Receiving SNAP (2020)	21.9%	17.0%

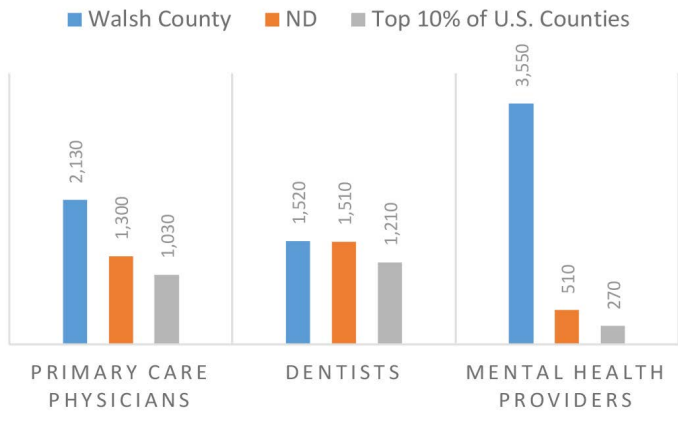
In 2021, the teen birth rate for Walsh County was 27 births per 1,000 females (15-19 years old). This rate is higher than the state average of 20 per 1,000 and higher than the top 10% of U.S. counties (12 per 1,000).

Healthcare Access

Based on the provider to population ratio, Walsh County has fewer residents per single mental health provider (3,550 residents per one mental health provider) than the state's average and the top 10% of U.S. counties. The same was true

for primary care physicians (2,130 per primary care physicians). Walsh County had slightly more residents per dentist than the state and top 10% of U.S. counties. See Figure 2.

Figure 2. Provider to Population Ratios, 2021



Community Concerns

In a survey conducted by CRH, residents identified up to three primary community concerns. The top two concerns were bullying/cyberbullying (68%) and having enough child daycare services (56%). Depression/anxiety in youth, attracting and retaining young families, and alcohol use and abuse in adults made the top five. See Table 3.

Table 3. Community Concerns, 2021

Community Concerns	%
Bullying/cyberbullying – youth	68%
Having enough child daycare services	56%
Depression/anxiety – youth	54%
Attracting and retaining young families	47%
Alcohol use and abuse – adults	47%
Depression/anxiety – adults	47%
Drug use and abuse – youth	40%
Availability of mental health services	40%
Alcohol use and abuse – youth	38%

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

1. Availability of mental health and substance use disorder treatment services
2. Availability of resources to help elderly stay in their homes
3. Having enough child daycare services

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

1. No insurance/limited insurance (36%)
2. Can't get transportation services (29%)
3. Not affordable (28%)
4. Don't know about local services (25%)
5. Not enough evening/weekend hours (20%)

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

Steps Undertaken Since 2019 CHNA

Unity Medical Center chose not to address Need: Attracting and retaining young families. Need 2 & Need 5: Availability of mental health services and Depression/anxiety – Unity Medical Center host telemedicine visits in their clinic locations for patients seeking treatment from mental health provider services. Online grief support is also available through Altru and Hospice of the Red River Valley. Motivated Unity Medical staff attended NAMI (National Alliance for Mentally Ill) training to bring further resources to our community. Need 3 & Need 4: Alcohol use and abuse and Drug use and abuse – UMC continues to participate in the Walsh County Substance Abuse Prevention Coalition to reduce adult binge drinking, underage drinking, and illicit drug use.

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

Dryburgh, B., Nissen, K., Unity Medical Center Service Area: Community Health Needs Assessment, 2022.

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For More Information

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