

Mountrail County Medical Center, Stanley Service Area

2021 Community Health Needs Assessment

May 2022

Each Critical Access Hospital must conduct a Community Health Needs Assessment (CHNA) once every three years, as mandated by law. Local public health units seeking to gain/maintain accreditation conduct an assessment every five years. CHNAs completed by the Center for Rural Health (CRH) include secondary data review, community focus groups, key informant interviews, and a community survey. This fact sheet presents key community strengths and opportunities from the Stanley service area 2021 CHNA.

The Stanley service area comprises Mountrail County. The population from 2010 to 2019 increased by 37.6%. The average number of residents younger than age 18 (27.6%) for Mountrail County, comes in 4.1 percentage points higher than the North Dakota average (23.5%). The median household income in Mountrail County (\$72,147) is much higher than the state average for North Dakota (\$63,473).

Community Strengths

The top three assets identified in the community survey were it's family-friendly, a safe place to live, and the short distance to work and to activities. People are friendly, helpful, and supportive came in at number four.

Health Outcomes and Factors

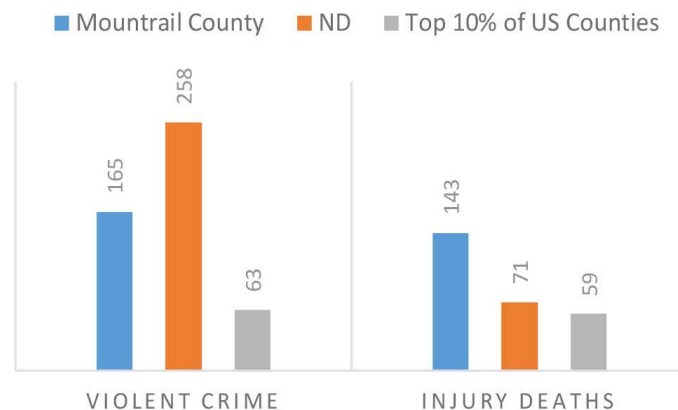
In review of secondary data, 15% of Mountrail County residents are uninsured and had a greater percentage of residents reporting excessive drinking, physical inactivity, adult smoking, and obesity than the state and the top 10% of U.S. counties. See Table 1.

Table 1. Health Factors by % of Population, 2021

	Mountrail	ND	Top 10% U.S.
Uninsured	15%	8%	6%
Excessive drinking	25%	24%	15%
Access to exercise opportunities	45%	74%	91%
Physical inactivity	30%	23%	19%
Adult obesity	39%	34%	26%
Adult smokers	22%	20%	16%

Injury deaths were more prevalent in Mountrail County (143 deaths per 100,000 residents) than in the state overall (71 per 100,000 residents) and the top 10% of U.S. counties (59 per 100,000 residents). See Figure 1.

Figure 1. Cases per 100.000 Population. 2021



In 2020, data shows Medicaid recipients (% of population ages 0-20) was 28.9% for Mountrail County, which is higher than the North Dakota average of 26.0%. Child food insecurity reported in 2019 was 10.1% for Mountrail County, while North Dakota was 9.3%. See Table 2 for more information on children's health factors.

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

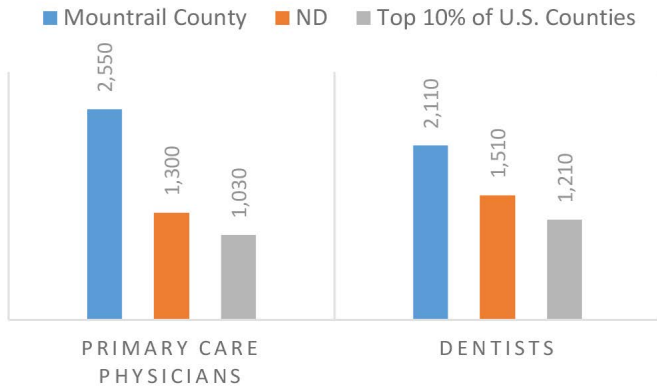
	Mountrail	ND
Victims of child abuse and neglect requiring services (rate per 1,000 children ages 0-17) (2019)	8.89	10.74
Child food insecurity (2019)	10.1%	9.3%
Medicaid recipients (2020)	28.9%	26.0%
Children enrolled in Healthy Steps (2020)	1.8%	1.7%
Receiving SNAP (% of population age 0-18) (2020)	11.3%	17.0%

In 2021, 13% of children in Mountrail County were living in poverty. This is higher than both the state (11%) and the top 10% of U.S. counties (10%).

Healthcare Access

Based on the provider to population ratio, Mountrail County has far more residents per single dentist than the state's average and the top 10% of U.S. counties. In addition, Mountrail County had more residents per primary care provider than the state's average and the 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 having enough child daycare services and drug use and abuse in youth. Cyberbullying/social media bullying, alcohol use and abuse in adults, and cost of long-term/nursing home care made the top five. See Table 3.

Table 3. Community Concerns, 2021

Community Concerns	%
Having enough child daycare services	67%
Drug use and abuse – youth	66%
Cyberbullying/social media bullying	61%
Alcohol use and abuse – adult	60%
Cost of long-term/nursing home care	53%
Smoking and tobacco use – youth	51%
Not enough affordable housing	50%
Bullying	50%

In December 2021, a community focus group identified their top concerns as:

1. Alcohol use and abuse for all ages
2. Depression/anxiety for all ages
3. Attracting and retaining young families
4. 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. Not enough evening or weekend hours
2. Concerns about confidentiality
3. No insurance or limited insurance
4. Can't get transportation services
5. Not affordable

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

Steps Undertaken Since 2019 CHNA

Mountrail County Medical Center (MCMC) has taken steps to address the top concerns identified in 2019 assessment. In an effort to address availability of mental health services, Dare to Define YOU youth leadership program was started in New Town and Stanley. In addition, they continue to work with the Stanley High School administration to identify at-risk children, along with Mountrail County Health Foundation funding these children to receive help. MCMC is working with local agencies, such as the Upper Missouri District Health Unit and the local social services along with the MCMC emergency room, to address adult alcohol use and abuse, along with Stanley's local Alcoholics Anonymous group. Youth drug use and abuse was a high priority and MCMC has been working with the schools that fall under their area of impact to see what biggest concerns are. Dare to Define YOU youth leadership program is present, along with committee representation, on the Stanley Drug Task Force. Skittle Skool III was held for both mental health and issues pertaining from drug abuse to vaping.

Implementation Strategies

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

Full Report

Nissen, K., & Long, H. Stanley Service Area: Community Health Needs Assessment, 2022.

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For More Information

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