

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 Tioga service area 2022 CHNA.

Tioga Medical Center (TMC) service area's population, which is primarily Williams County, has increased by 45% from 2010 to 2020. The average number of residents younger than age 18 (29.4%) for Williams County comes in 5.8 percentage points higher than the North Dakota average (23.5%). The median household income in Williams County (\$87,161) is much higher than the state average for North Dakota (\$63,473).

Community Strengths

The top three assets identified in the community survey included people being friendly, helpful, and supportive; access to local events and festivals; and it being family friendly. Other assets include it being a safe place to live, people here are involved in their community, and it was noted as being an active faith community.

Health Outcomes and Factors

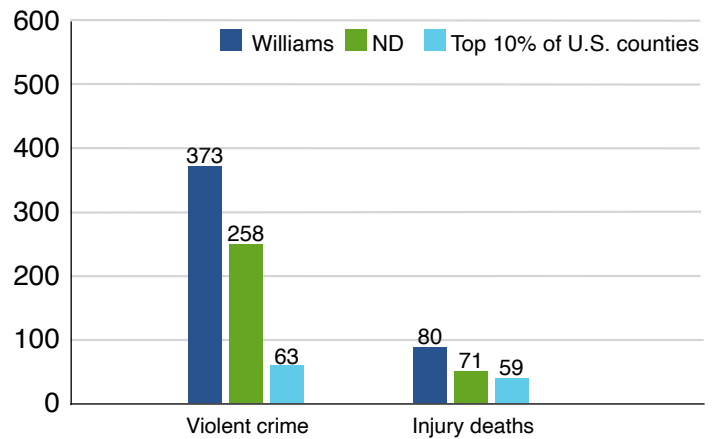
In review of secondary data, 15% of Williams County residents reported poor or fair health. They also reported having a greater percentage of residents reporting physical inactivity, adult smoking, obesity, and alcohol impaired driving deaths than the top 10% of U.S. counties. See Table 1.

Table 1. Health Factors by % of Population, 2021

	Williams	ND	Top 10% U.S.
Uninsured	8%	8%	6%
Excessive drinking	25%	24%	15%
Alcohol impaired driving deaths	46%	42%	11%
Physical inactivity	24%	23%	19%
Adult obesity	38%	34%	26%
Adult smokers	20%	20%	16%

Violent crimes were more prevalent in Williams County (373 per 100,000 residents, respectively) than in the state overall (258 per 100,000 residents) and the top 10% of U.S. counties (63 per 100,000 residents). Injury deaths were slightly higher as well. See Figure 1.

Figure 1. Cases per 100,000 Population, 2021



In 2020, data shows Medicaid recipients (% of population ages 0-20) was 21.3% for Williams County, which is lower than the North Dakota average of 26.0%. See Table 2 for more information on children's health factors.

In 2021, the teen birth rate for Williams County was 36 births per 1,000 females (15-19 years old), which 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).

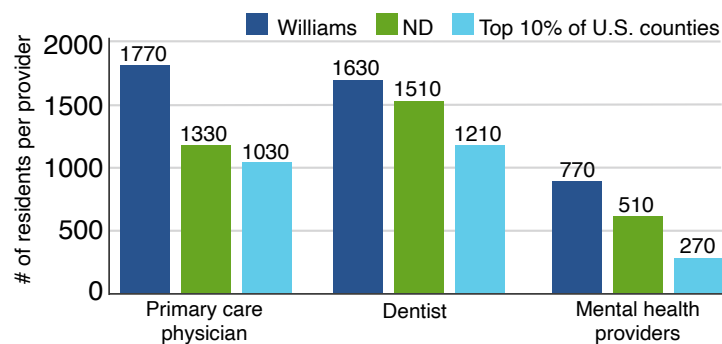
Table 2. Children's Health Factors by % of Population

	Williams	ND
Victims of child abuse and neglect requiring services (rate per 1,000 children ages 0-17), 2020	16.70	9.98
Child food insecurity, (2019)	7.1%	9.6%
Medicaid recipients (2020)	21.3%	26.0%
Children enrolled in Healthy Steps (2020)	1.1%	1.6%
Receiving SNAP (2020)	11.0%	16.9%

Healthcare Access

Based on the provider to population ratio, Williams County has more residents per single dentist, primary care physicians, and mental health providers than the state's average and the top 10% of U.S. counties. See Figure 2.

Figure 2. Provider to Population Ratios, 2018



Community Concerns

In a survey conducted by CRH, residents identified up to three primary community concerns. The top two concerns were bullying/cyberbullying and depression/anxiety in youth. Making the top five list was drug use and abuse in youth, emotional abuse, and availability of resources to help elderly stay in their homes. See Table 3.

Table 3. Community Concerns, 2021

Community Concerns	%
Bullying/cyberbullying	84%
Depression/anxiety – youth	58%
Drug use and abuse – youth	44%
Emotional abuse	44%
Availability of resources to help elderly stay in their homes	44%
Alcohol use and abuse – adult	41%
Availability of home health	41%

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

1. Depression/anxiety (all ages)
2. Attracting and retaining young families
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. Not enough evening/weekend hours (48%)
2. Not able to get appointment/limited hours (48%)
3. Concerns about confidentiality (30%)
4. Not enough specialists (19%)
5. Not enough providers (15%)

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

TMC has started making change in regard to the needs identified. *Attracting and retaining young families* was noted as a problem area. TMC has been active in discussions with the city of Tioga, Tioga School District (TSD), Tioga Rec, and other organizations regarding community events for young families. TMC is active in a new Facebook group, created to promote awareness of events available in the community. *Depression/anxiety among the youth*: TMC has worked closely with Licensed Clinical Social Workers to strengthen services available at TMC and aide at TSD. TMC continues to promote mental health awareness in the community through social media, radio interviews, and public education through staff members. A new partnership was developed with ConnectUS Therapy in August of 2021, which provides mental health medication management in Tioga and a strong referral process for mental health services for the community. Due to challenges from COVID-19, Need 3: *Having enough child daycare services* and Need 4: *Not enough affordable housing, were not addressed.*

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

Long, H. & Nissen, K., Tioga Medical Center Service Area: Community Health Needs Assessment, 2022.

Fact Sheet Authors

Holly Long, MSML & Kylie Nissen, BBA, CHA

For More Information

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

Kylie Nissen, BBA, CHA
Program Director
kylie.nissen@UND.edu

Holly Long, MSML
CHNA Project Coordinator
holly.long@UND.edu

Community Liaison

Shelby Davis, Clinic Manager and Foundation Director, Tioga Medical Center
(701) 664-3305 • sdean@tiogahealth.org

CHNAs are supported in part by the health facilities and the State Office of Rural Health grant, U.S. Department of Health and Human Services Health Resources and Services Administration Federal Office of Rural Health Policy.

