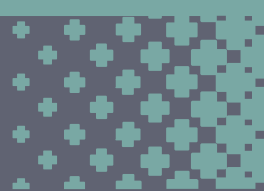




Bonner General Health

Community Health Needs Assessment

November 2019



Overview

Bonner General Health conducted a Community Health Needs Assessment (CHNA) between August and November of 2019 for the approximate 44,727 residents of Bonner County. Including the communities of Sandpoint, Priest River, Sagle, Cocolalla, Ponderay, Hope, and Clark Fork.

A Community Health Needs Assessment is a tool used to help communities assess their strength 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 assessment serves as a foundation for enhancing and promoting the health of the community. The process helps to identify factors affecting the health of a population and determine the availability of resources within the community to adequately address these factors and health needs.

The Community Health Needs Assessment fulfills the requirements set forth by the Internal Revenue Code 501 ©(3), a statute established within the Patient Protection and Affordable Care Act. The statute 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. The input was received from persons representing a broad range of interests in the community; persons with public health knowledge and expertise; and persons serving medically underserved and vulnerable populations.

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

Hospital Overview

Bonner General operates a 25-bed hospital, network of clinics, and programs serving Bonner County and the surrounding area. The following clinical and hospital services are provided:

- Emergency Department
- Critical Care Unit
- Maternity Unit
- Inpatient & Outpatient Surgical Services
- Medical Surgical Department
- Laboratory
- Diagnostic Imaging
- Cardiac Rehabilitation
- Dietary & Diabetes Education
- Home Health & Hospice
- Pharmacy
- Anticoagulation Clinic
- Behavioral Health Clinic
- Ear, Nose, & Throat Clinic
- Immediate Care Clinic
- Infusions & Procedures Clinic
- Physical, Occupational & Speech Therapy (4 locations)
- Occupational Health
- Orthopedic Clinic
- Occupational Health Clinic
- Ophthalmology Clinic – February 2020
- Sandpoint Women’s Health
- Wound Care Clinic
- Adult Exercise Program
- Bereavement Services
- Better Breathers Club
- Childbirth Education
- Coping and Support Training - CAST
- Community First Aid & CPR Classes
- Diabetes Education
- Intensive Behavioral Health
- Mended Hearts Support Group
- Parkinson’s Support Group
- Schweitzer First Aide Station

Community Overview

Primary Industries:

- Food Services
- Healthcare & Social Assistance
- Manufacturing
- Retail
- Travel & Tourism

Census:

- Population, Census, April 1, 2010 **44,727**
- Estimated overall increase of **9.4%** in total population between 2010-2018
- Racial make up of the service area
 - Caucasian/White **95.5%**
 - Hispanic **3.2%**
 - American Indian & Alaska Native **0.9%**
 - Asian **0.7%**

Household Income/Health Coverage:

- Median household income (2017) **\$45,607**
- Per capita income (2017) **\$25,909**
- **13.7%** income below the poverty level
- Those under age 18 **19.7%**
- Those age 65 and over **24.5%**
- Unemployment rate is estimated to be **3.9%**
- Approximately **13.3 %** of the population does not have any health insurance coverage.

U.S. Census Bureau, 2013 – 2017 American Community Survey 5 – Year Estimates



Conducting the Assessment

To ensure input from persons with a broad knowledge of the community, a Community Advisory Committee was organized with individuals from Bonner County. Personal invitations were sent to individuals representing various community, business, educational, and religious groups. Representatives from the hospital, Federally Qualified Health Center, Panhandle Health District, along with community providers were invited to bring in professional perspective.

The individuals identified to participate in the process have direct access to community members across all subsections of the community and, therefore, can address needs that may impact those populations that are medically underserved or most in need. People with special health needs such as elderly, children, uninsured, and unemployed were represented by individuals who provide services to these populations.

Thirty-five individuals participated in the advisory meeting representing the following community organizations:

-
- **Bonner General Health**
 - **Local Businesses**
 - **Medical Professionals**
 - **Chamber of Commerce**
 - **School District**
 - **Health District**
 - **Community Coalition for Health**
 - **Community Members**
-

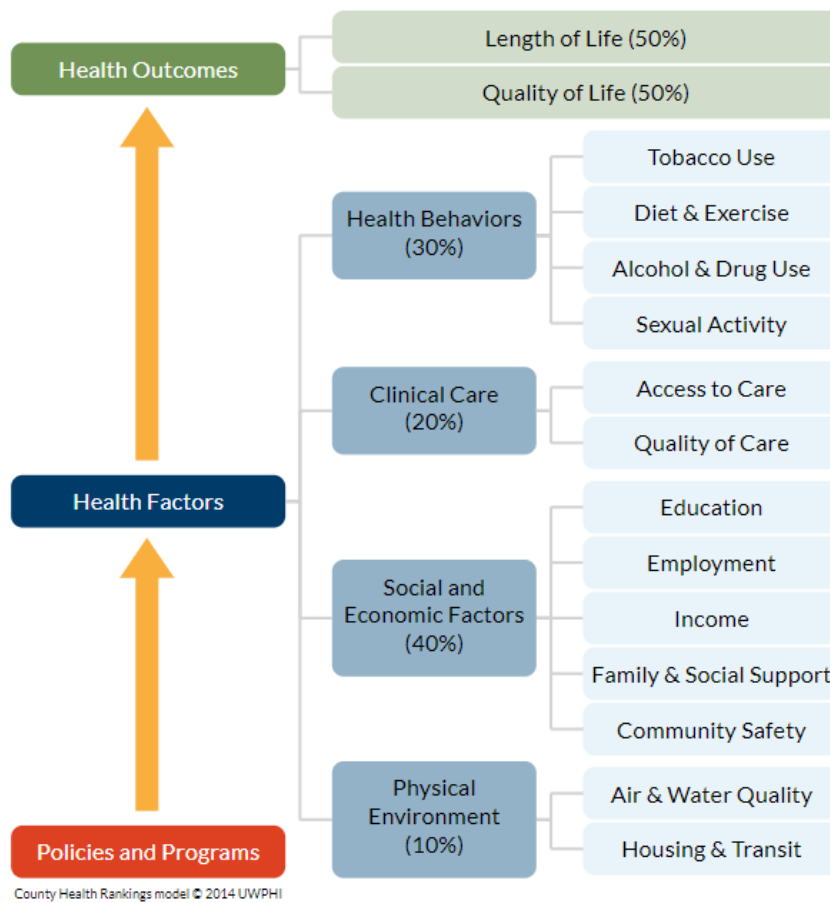
A meeting with the Community Advisory Committee was held on November 19, 2019. The committee reviewed current demographic information from four different surveys. The 2018 County Health Rankings & Roadmaps (<http://www.countyhealthrankings.org>), 2016 Behavioral Risk Factor Surveillance System (BRFSS) (<http://healthstatistics@dhw.idaho.gov>), 2018 Community Health Assessment conducted by Panhandle Health District (<http://panhandlehealthdistrict.org/communityhealth>), and 2019 Bonner General Health Community Health Needs Assessment (<http://bonnergeneral.org>).

The review included analysis of health trends and comparisons between the service area of Bonner County, Idaho, and the United States.

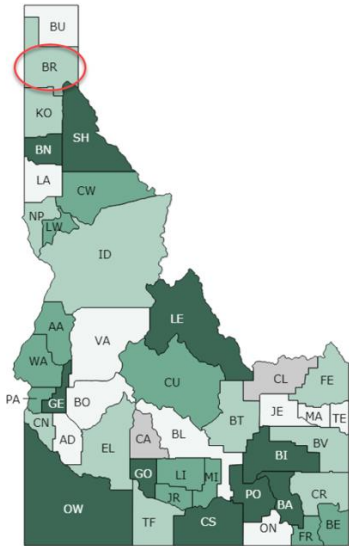
County Health Rankings

The County Health Rankings is an annual assessment of emphasizing factors that can make communities healthier. The assessment was developed by the University Of Wisconsin Population Of Health Institute. The assessment provides information on a county by county basis based on data pulled from various sources, including public health records and individual responses.

The assessment identifies “**Areas to Explore**” that are specific measures likely to have a more significant impact on the community’s health based on the value and relative weight in the rankings model of population health, and “**Areas of Strength**” where the community is already doing well. Also, it provides trends compared to prior years (see topic areas noted as **improving (green)**, **steady (yellow)**, **declining (red)**).



Overall Rankings: Health Outcomes



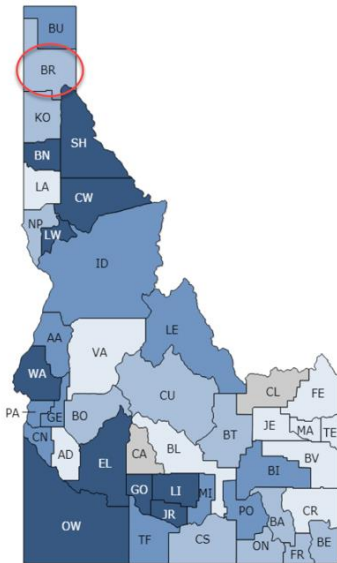
The following provides overall health outcome rankings by county for the state of Idaho & the service area.

Bonner County ranks **11** out of 42 counties (lower the better)



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

Overall Rankings: Health Factors



The following provides overall health factor rankings by county for the state of Idaho & the service area.

Bonner County ranks **25** out of 42 counties (lower the better)



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

Length & Quality of Life

	Bonner County	Trend	Error Margin	Top U.S. Performers	Idaho	Rank (of 42)
Health Outcomes						11
Length of Life						18
Premature death *	6,800		5,700-7,800	5,400	6,300	
Quality of Life						6
Poor or fair health	13%		12-13%	12%	15%	
Poor physical health days **	3.6		3.5-3.8	3.0	3.7	
Poor mental health days **	3.7		3.5-3.9	3.1	3.7	
Low birthweight	6%		5-7%	6%	7%	

County Health Rankings & Roadmaps
Building a Culture of Health, County by County

* Per 100,000

** Average number reported in the past 30 days

Health Factors – Behaviors

	Bonner County	Trend	Error Margin	Top U.S. Performers	Idaho	Rank (of 42)
Health Factors						19
Health Behaviors						5
Adult smoking	14%		13-14%	14%	14%	
Adult obesity	26%		22-29%	26%	28%	
Food environment index	7.3			8.7	7.2	
Physical inactivity	20%		17-24%	19%	19%	
Access to exercise opportunities	79%			91%	78%	
Excessive drinking	18%		17-18%	13%	17%	
Alcohol-impaired driving deaths	16%		9-25%	13%	31%	
Sexually transmitted infections *	188.7			152.8	356.3	
Teen births	<u>25</u>		22-29	14	24	

County Health Rankings & Roadmaps
Building a Culture of Health, County by County

* Per 100,000

** Per 1,000 female population ages 15-19 2011-2017

Health Factors – Clinical Care

	Bonner County	Trend	Error Margin	Top U.S. Performers	Idaho	Rank (of 42)
Clinical Care 14						
Uninsured	12%		10-14%	6%	12%	
Primary care physicians	1,700:1			1,050:1	1,550:1	
Dentists	1,820:1			1,260:1	1,550:1	
Mental health providers	490:1			310:1	510:1	
Preventable hospital stays *	1,947			2,765	2,696	
Mammography screening **	30%			49%	39%	
Flu vaccinations	32%			52%	39%	

County Health Rankings & Roadmaps
Building a Culture of Health, County by County

* Per 1,000 Medicare enrollees
** Based on Medicare enrollees

Health Factors – Social & Economic Factors

Social & Economic Factors 29					
High school graduation	82%			96%	80%
Some college	58%		52-64%	73%	65%
Unemployment	4.5%			2.9%	3.2%
Children in poverty	19%		13-25%	11%	15%
Income inequality *	4.4		4.0-4.8	3.7	4.3
Children in single-parent households	28%		22-35%	20%	25%
Social associations	9.9			21.9	7.4
Violent crime **	166			63	221
Injury deaths**	79		67-92	57	73

County Health Rankings & Roadmaps
Building a Culture of Health, County by County

* Ratio of income at 80th percentile to income at 20th percentile
** Per 100,000 of population

Idaho Behavioral Risk Factors - 2016

The Advisory Committee reviewed information from the Behavioral Risk Factor Surveillance System a public health surveillance program designed to identify emerging health problems, chronic diseases, injuries, and the behavioral risk factors that contribute to them. Data was collected using random-digit dialed surveys of landline and cellular telephone users who were aged 18 or older. Landline and cellular telephone numbers were sampled using disproportionately stratified sampling; the state's seven public health districts were defined as strata. Interviewers conducted at least 755 interviews in the Idaho Panhandle Health District. The Panhandle Health District includes the counties of Boundary, Bonner, Kootenai, Benewah, & Shoshone.

Idaho Behavioral Risk Factors - 2016

I	Panhandle	Idaho	US Median
Reported Health as Fair or Poor	18.7%	15.9%	16.4%
Adults without Health Care Coverage	17.1%	15.5%	10%
Have ever been told they had diabetes	8.2%	8.9%	10.5%
Have ever been diagnosed with asthma	9.4%	9.3%	9.3%
Have ever been told they have arthritis	30.9%	24%	25.8%
Adults diagnosed with coronary heart disease	3.9%	3.9%	4.1%
Adults diagnosed with stroke	3.4%	2.6%	3.1%
Did not participate in physical activity	19.4%	20.2%	23.1%
	Panhandle	Idaho	US Median
Were overweight (BMI >25)	62.8%	64.5%	65.4%
Were obese (BMI >30)	25.2%	27.4%	29.9%
Smoked cigarettes	16.7%	14.5%	17.1%
Binge drinkers (>4 dinks at a time)	17.8%	16.1%	16.9%
Heavy drinkers (>30 drinks in 30 days (F) or 60 in 30 (M))	10.3%	7%	6.5%

healthandwelfare.idaho.gov/Portals/Idaho_BRFSS_Annual_Report_2016

Panhandle Health District 2018 Community Health Assessment


Panhandle Health District utilized the Mobilizing for Action through Planning and Partnerships (MAPP) model for conducting the Community Health Assessment. MAPP is a community-wide strategic process for improving public health created by the National Association of County & City Health Officials (NACCHO) and the Centers for Disease Control & Prevention (CDC). Following the 6 phases of the MAPP process, Panhandle Health District engaged stakeholders and community members in each of the five counties through the complete process of the Community Health Assessment. The core of the MAPP process is in the four assessments.

- **Community Themes & Strengths Assessment (CTSA)** provides a deeper understanding of issues important to community residents.
- **Community Health Status Assessment (CHSA)** Analyzes secondary health data to identify trends and provide a snapshot of health.
- **Forces of Change Assessment (FCA)** Identifies trends, factors and events that influence health, quality of life and the local public health system.
- **Local Public Health System Assessment (LPHS)** Identifies strengths and weaknesses of the local public health system.

These four assessments were conducted concurrently to identify common themes and opportunities for improvement within our health system. The Advisory Council reviewed the findings specific to Bonner County.

HEALTH CARE

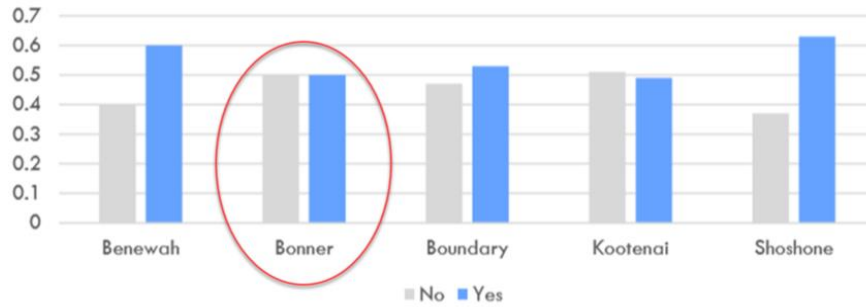
Bonner County is served by Bonner General Hospital; a Federally Qualified Health Center, Kaniksu Health Services; and a free health care clinic for the uninsured, Bonner Partners in Care. Bonner General recently expanded and has new facilities and increased services. Sandpoint was recently awarded a High Five Grant which they are using to assess the health of the community and examine the feasibility of a YMCA in the community.



<p>Threats</p> <ul style="list-style-type: none">• High uninsured and underinsured population; many cannot afford care even on a sliding fee• High suicide rates• Medicaid not expanding; high proportion of Bonner County falls in the Medicaid coverage gap leaving many without health insurance• Lack of diabetes prevention classes and tobacco cessation classes	<p>Opportunities/Assets I</p> <ul style="list-style-type: none">• Bonner Partners in Care• Kaniksu Health Services clinics• Interventions at high schools• Life Flight• High Five Grant can make infrastructural changes to the community
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

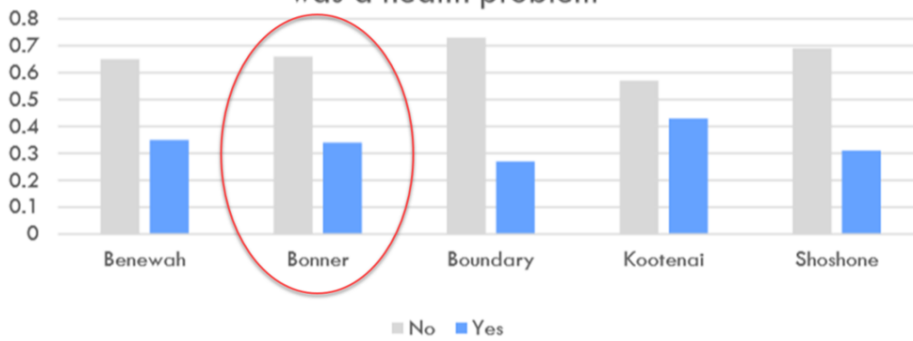
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt drug abuse was a health problem



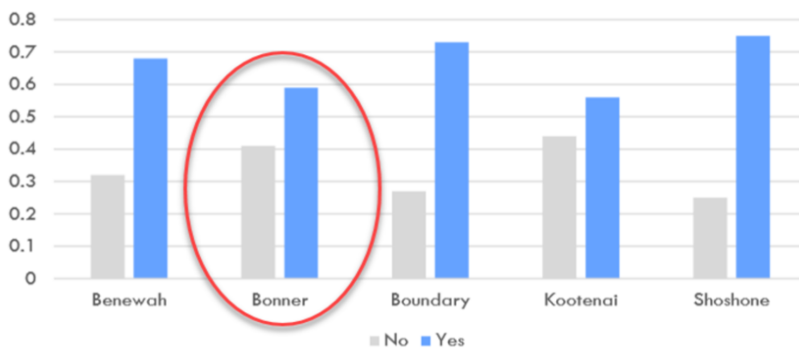
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt mental health was a health problem



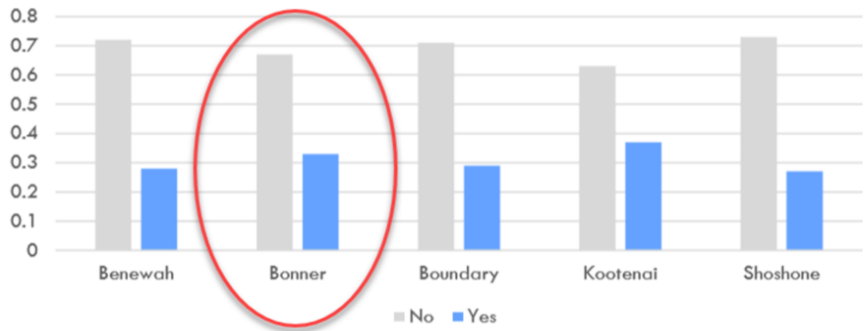
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt drug abuse was a health behavior problem



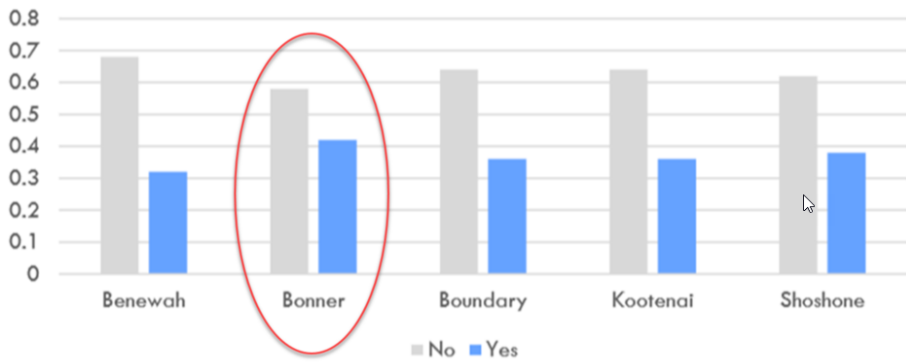
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt obesity was a health problem



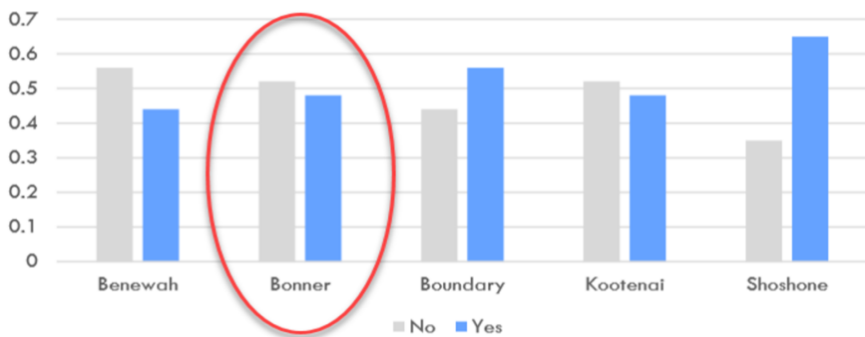
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt unhealthy eating was a health behavior problem



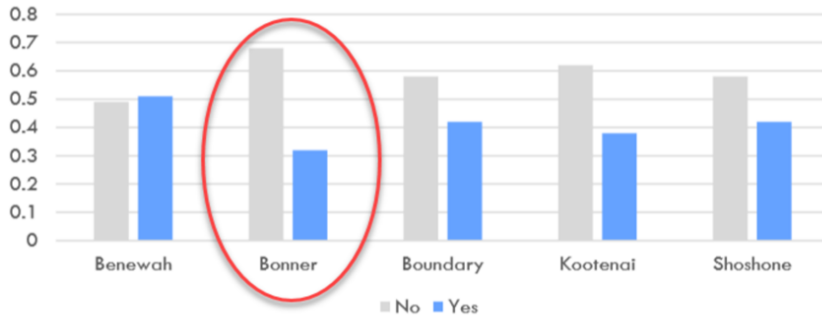
Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt alcohol abuse was a health behavior problem



Panhandlehealthdistrict.org/healthdata

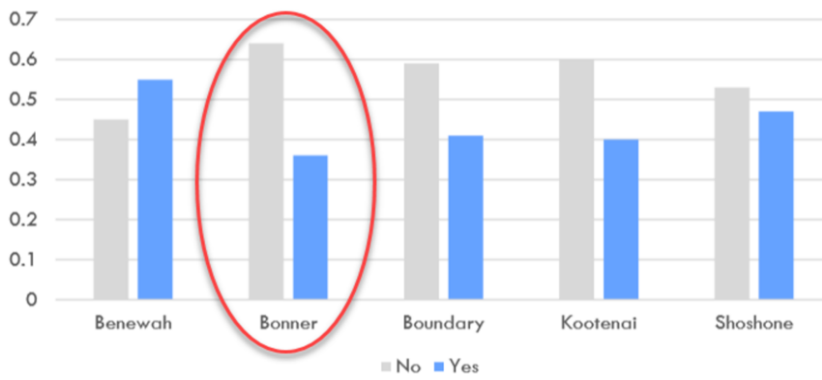
Proportion of respondents who felt obesity was their biggest health problem



Panhandle Health District
Healthy People in Healthy Communities

Panhandlehealthdistrict.org/healthdata

Proportion of respondents who have joint or back pain



Panhandle Health District
Healthy People in Healthy Communities

Panhandlehealthdistrict.org/healthdata

Proportion of respondents who felt that high cost of health care was their biggest health problem



Panhandle Health District
Healthy People in Healthy Communities

Panhandlehealthdistrict.org/healthdata

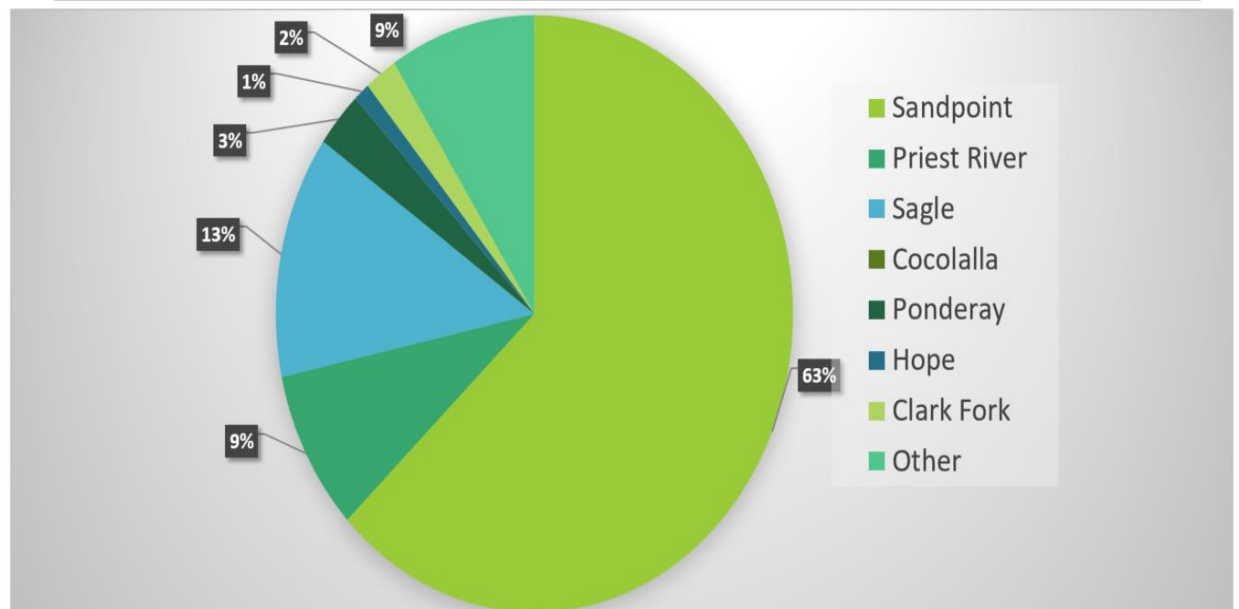
Bonner General Health 2019 Community Health Needs Assessment

Bonner General Health developed a survey tool to address general questions related to the health of the community. In order to gather feedback from individuals not participating in the Community Advisory Committee, the survey was distributed to others in the community including those identified as medically underserved. The surveys were returned for independent review & analysis prior to the November 19th meeting of the Advisory committee.

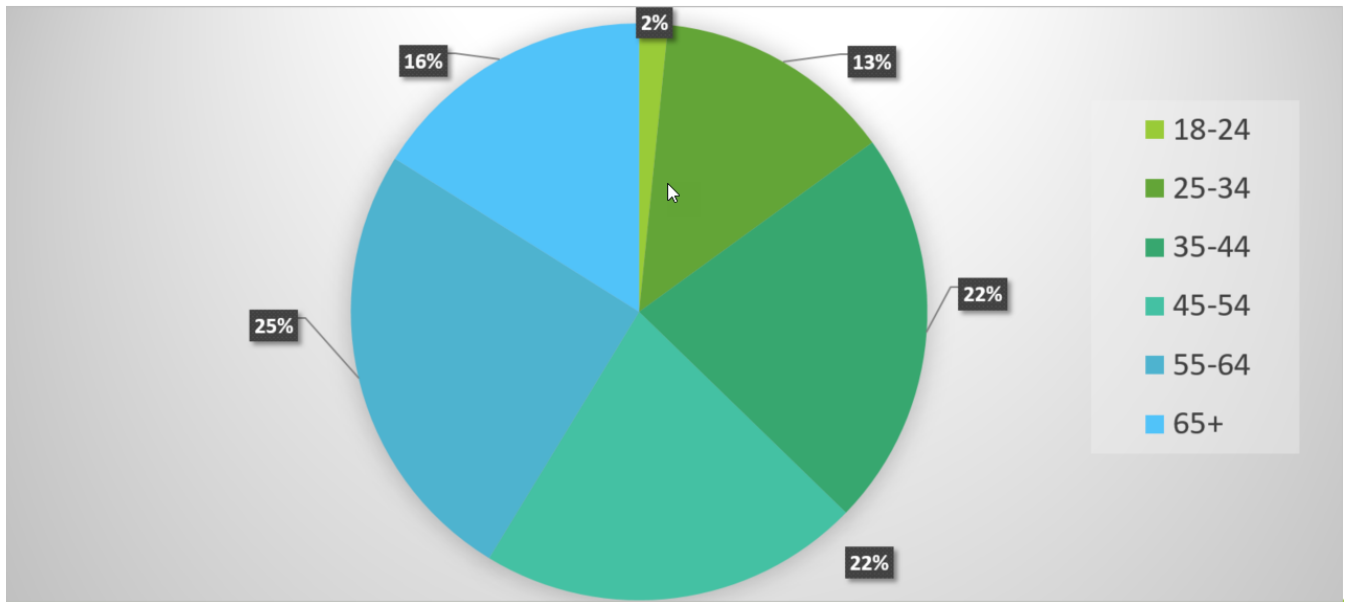
- The survey was distributed to the local community groups, Chamber of Commerce, hospital board members, employees, and other key community members.
- 419 surveys were completed by members of the community representing a mix of the community demographics.

Bonner General Survey Results

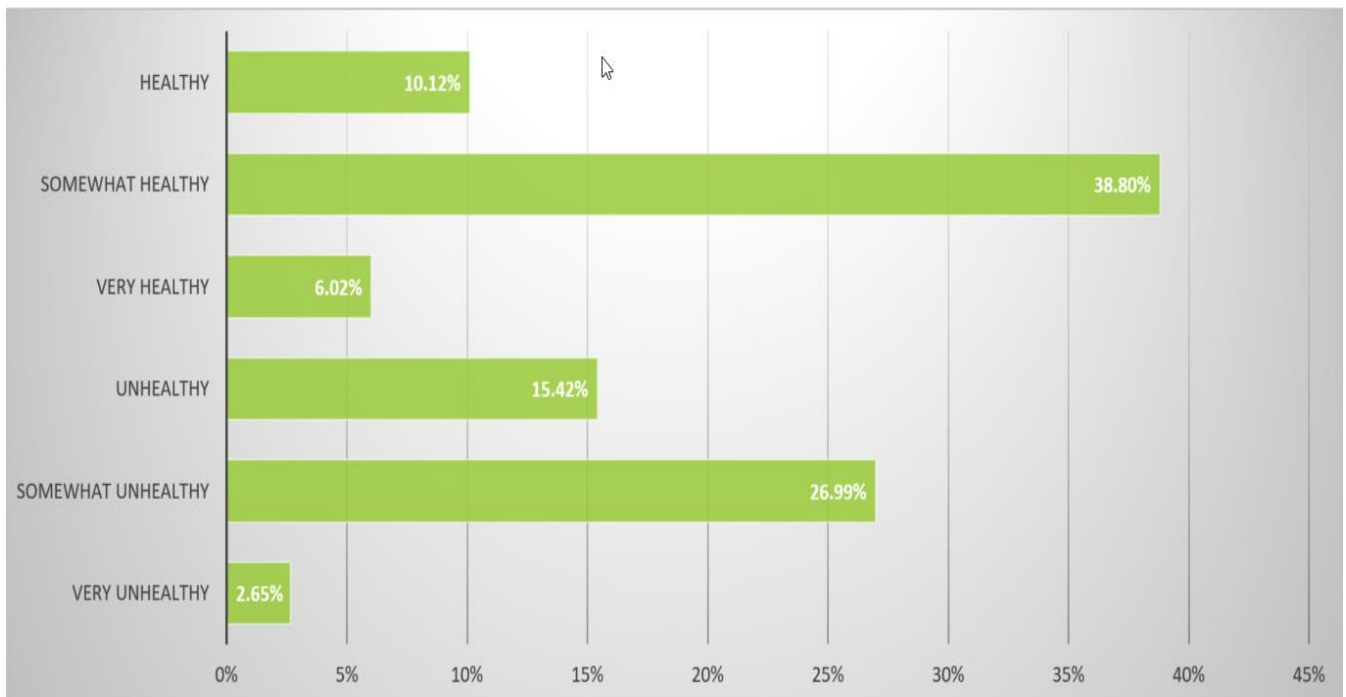
Demographic Information



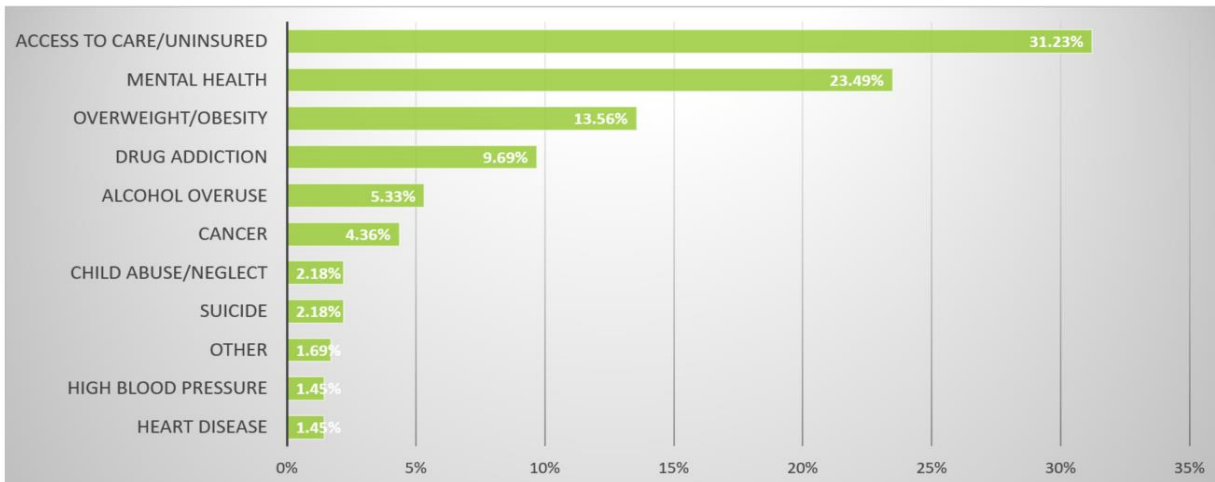
Age of Respondents



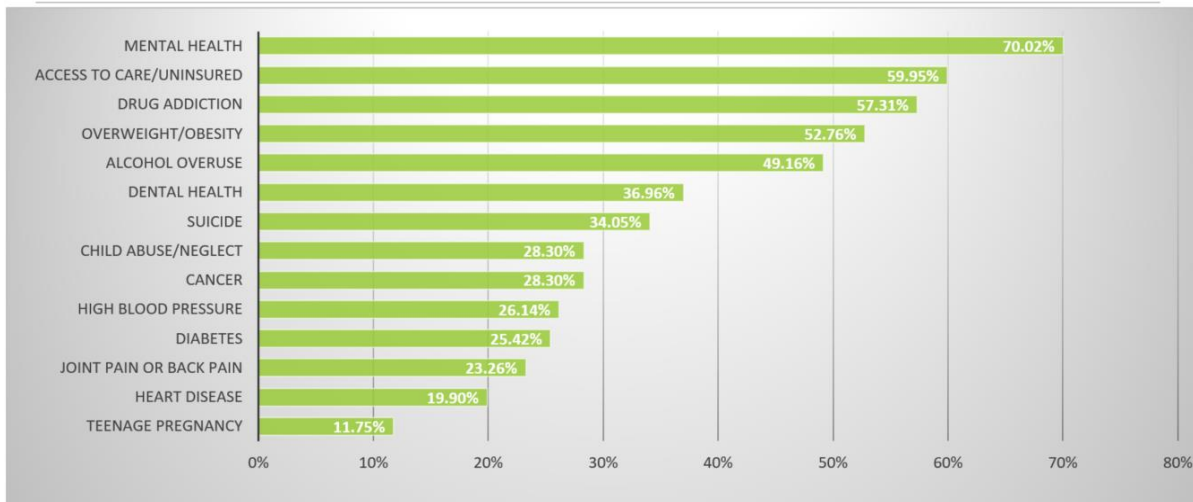
Community Health



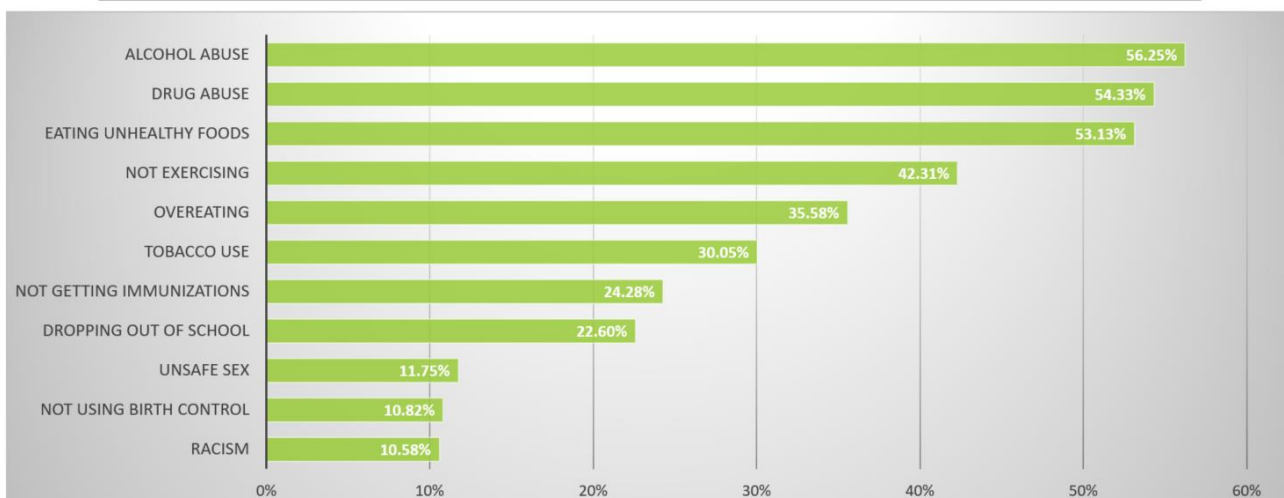
The most significant health problem in Bonner County (select one)



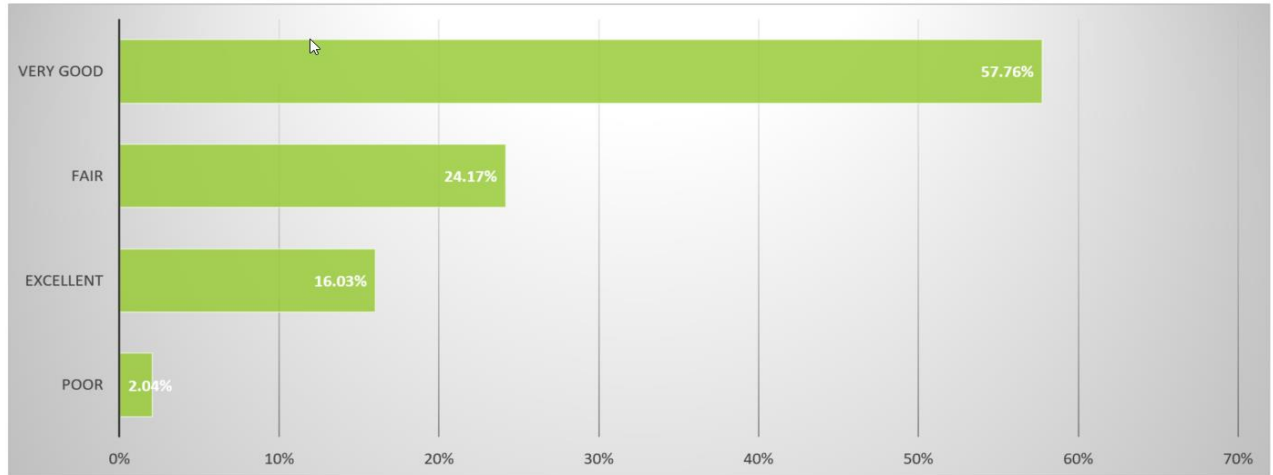
Top Health Problems in Bonner County (Select All that Apply)



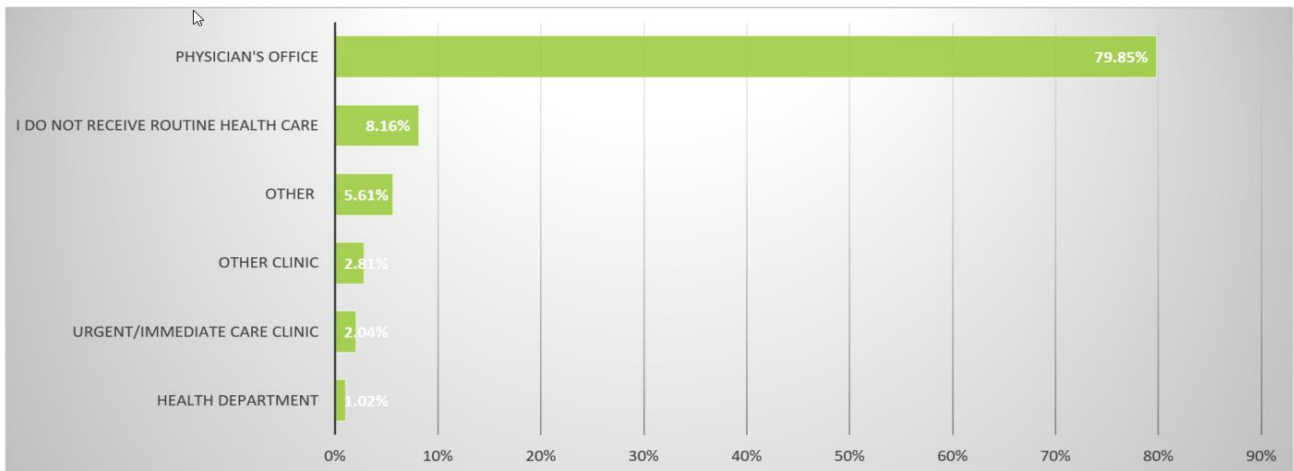
Most common behaviors that have the greatest impact on overall health of people in Bonner County



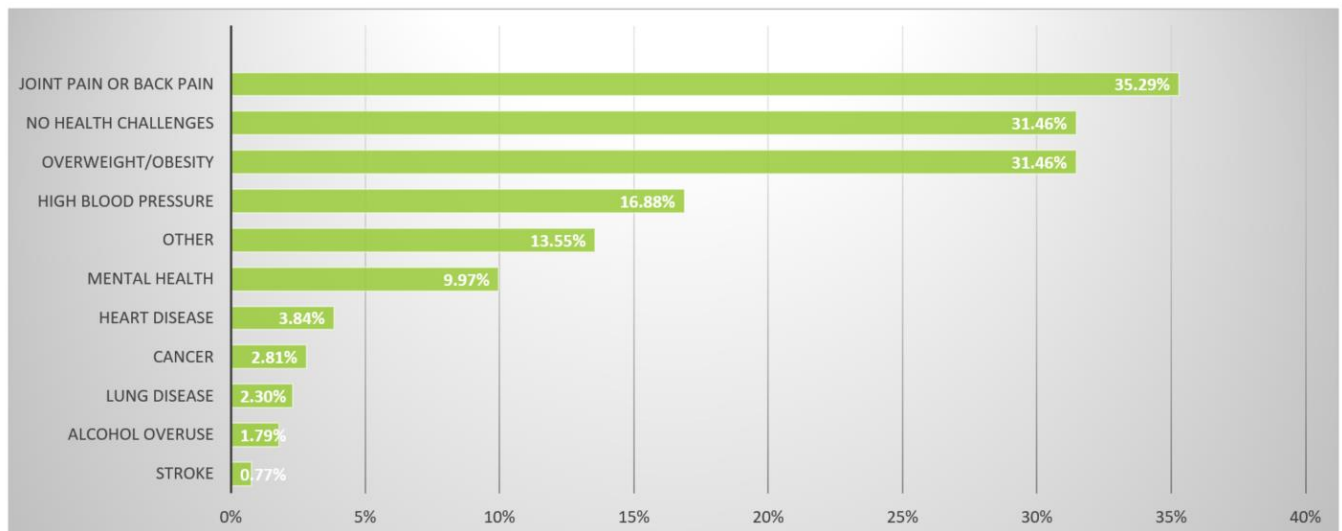
How would you describe your overall health?



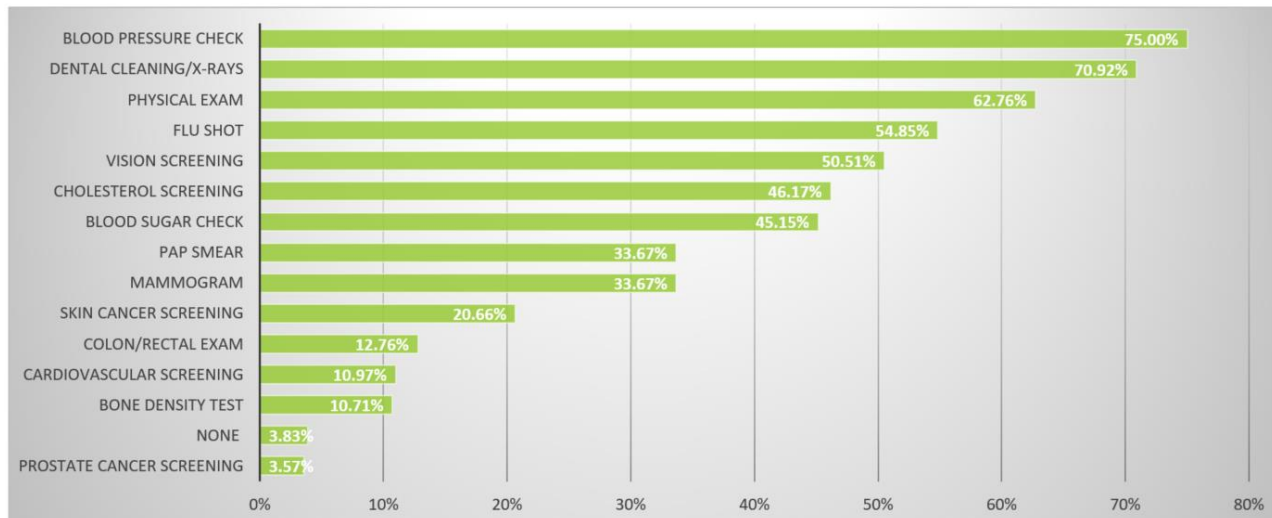
Where do you go for routine health care?



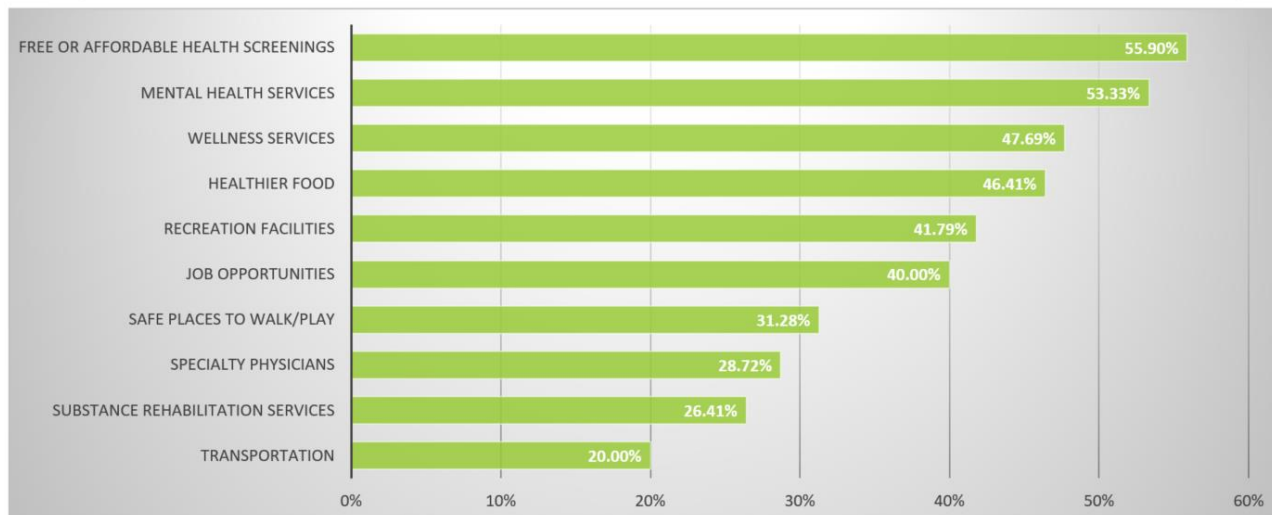
Select health challenges you face.



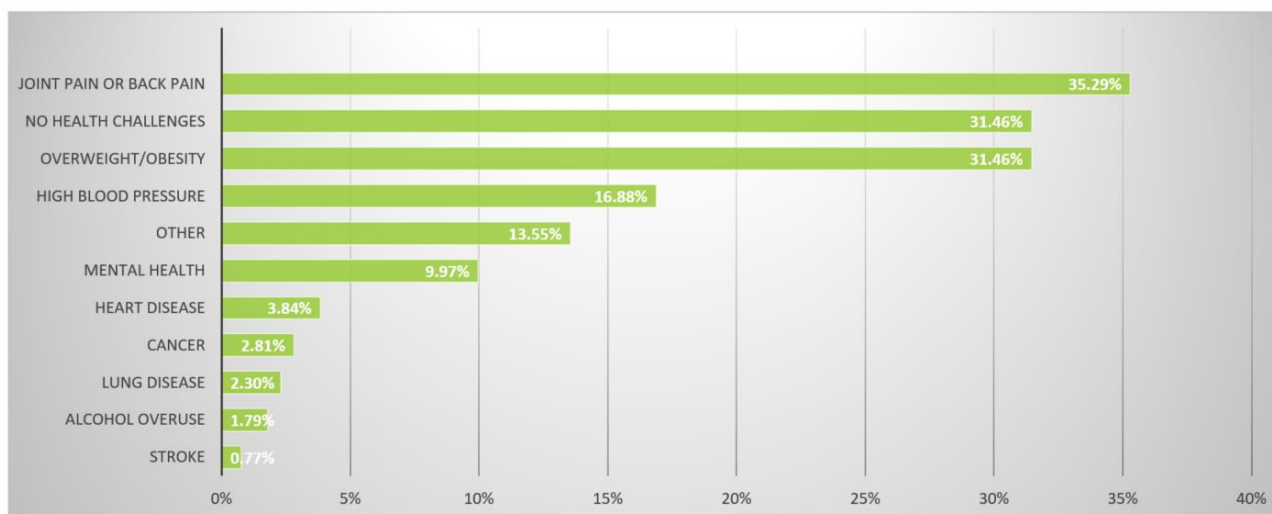
Preventative procedures completed in the past 12 months



What is needed to improve the health of your family & neighbors?



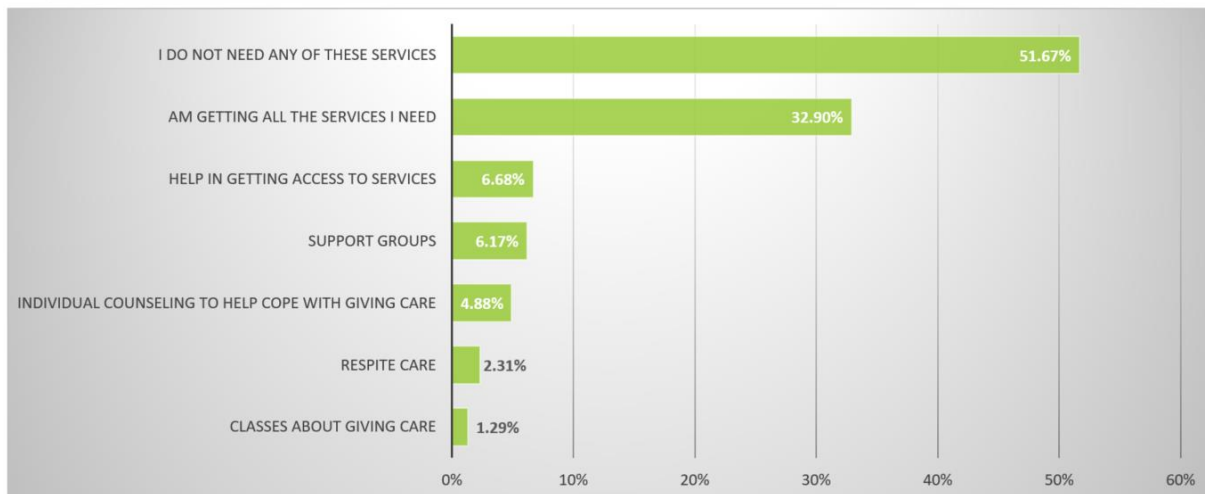
Select health challenges you face.



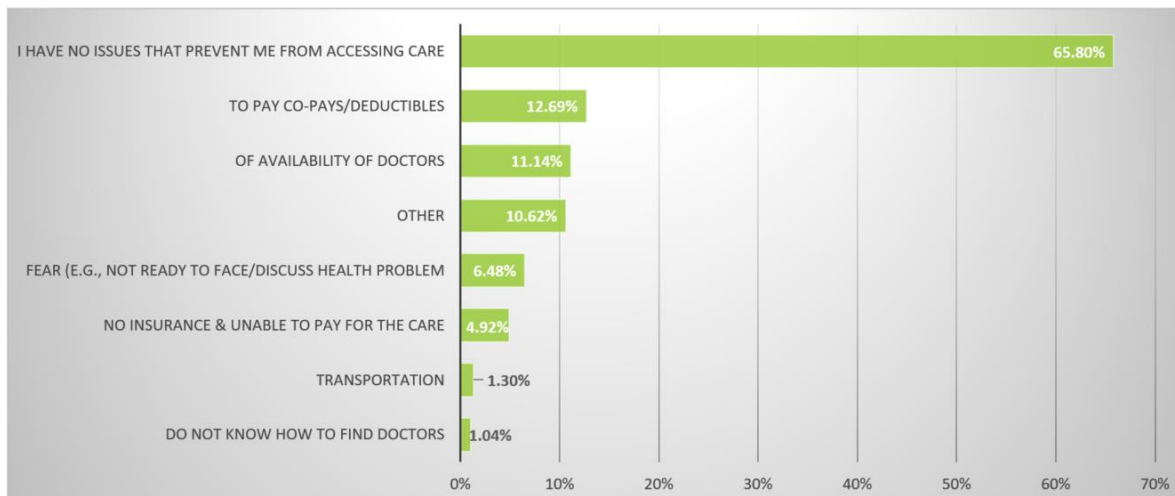
What has been the biggest source of stress in your life?



Of the following support services, which one do YOU need, that you are not currently getting?



Issues that prevented you from accessing care



Changes in Healthcare Needed

- Access to healthcare services
 - Mental Health resources for pediatric/adolescents
 - Primary care for Medicare patients
 - Affordable health insurance
 - Medicaid Expansion
 - Transportation
 - Substance abuse counseling & resources
 - Increased Foster Care
 - Long-term care facilities
 - Mental Health in-patient services
- Other Comments
 - Organizations, employers, & community members to continue encouraging people to focus on nutrition & exercise
 - Enhance education for parents regarding social media/screen time, peer pressure & stigma, and resources available in our community for support
 - Promote additional resources for elderly support to decrease neglect
 - Begin to promote & incentivize healthy life style habits during elementary age with the goal of enhancing awareness to the entire family.

Evaluation of Impact of Prior CHNA 2016

Bonner General Health completed a Community Health Needs Assessment between August and December 2016. No written comments have been received from this assessment. Bonner General Health identified the following needs during the prior assessment and have conducted the following activities in collaboration with community partners in order to address the needs identified.

Evaluation of Impact of Prior CHNA

Obesity – Promote healthy activities & lifestyle changes to combat obesity

- Bonner General Health Intensive Behavioral Health for Obesity
- Provide nutritional education in the community
 - Sandpoint Youth Center
 - Participate in Food for Our Children program (SMS, LPO, & Sagle Elementary)
- Diabetes Education & support groups
- Support, promote, & fund BGH Employee Wellness Program
- Sponsor & support community events involving exercise



Evaluation of Impact of Prior CHNA

Mental Health & Suicide – Internal & external programs to assist with mental health & suicide prevention



- 2013 hired Dr. Johnson psychiatrist & opened the Behavioral Health clinic
 - ❑ 2017/2018 expanded the Behavioral Health clinic
 - ❖ Dr. Joseph Wassif – Psychologist
 - ❖ Natasha Talbott, Psychiatric Nurse Practitioner
 - ❑ December 2019 Licensed Masters Social Worker
- Grief acceptance classes through Hospice
 - ❑ Organize, manage, & staff Kid’s Camp – weekend camp for children who have lost a loved one
- Sponsor community activities that bring awareness to mental health & suicide prevention
 - ❑ Underground Kindness – Walk for Hope
- Partner with law enforcement, the court system, & physicians to improve the mental health hold process
- Participate & support Coping & Support Training (CAST) an intervention program focusing on three elements – mood management, school skills, maintaining non drug use/or decrease drug use.



Evaluation of Impact of Prior CHNA

Child Abuse/Neglect – Support partnerships with organization working to protect children



- Partner & Sponsor of Kinderhaven
 - ❑ Free family movie at the Panida (April & October)
 - ❑ Festival of trees
 - ❑ Crockpot cooking class
- Collaborate with Panhandle Alliance of Education
 - ❑ Books for Babies program
- Collaborate with Lake Pend Oreille School District
 - ❑ Trust Based Relational Intervention (TBRI) – host & sponsor training
 - ❑ CAST – Coping & Support Training
- Collaborate with Mountain States Early Head Start
 - ❑ Circle of Security Parenting Classes
- Coordinate Food for our Children program



Conducting the Assessment

The Community Advisory Committee reviewed the health data and the survey results and compared the information to their personal experience working with the community. They discussed the various needs identified in these mediums and the overall impact those needs have on the health of Bonner County. The committee specifically addressed the significance of the needs with respect to the vulnerable populations.

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

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:



Selection Criteria

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

Prioritization of Needs

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.

The prioritization process identified four priority issues for the community:

- Abuse/Neglect – Children, Elderly, & Special Needs
- Mental Health/Suicide
- Obesity
- Substance Abuse

Community Resources

The Community Advisory Committee identified the following community resources available to work in collaboration with Bonner General Health to address the needs identified:

- Bonner General Health
 - Intensive Behavioral Health for Obesity
 - Diabetes Education
 - Employee program Healthy U
 - Behavioral Health Clinic
 - Grief acceptance classes through Hospice
 - Coping and Support Training (CAST)
 - Better Breathers Club
 - Mended Hearts Support Group
 - Rock Steady Boxing
- Bonner County Drug Court
- Bonner County Coalition for Health
- CASA
- Food for Our Children
- Kaniksu Health Services
- Kinderhaven
- Lake Pend Oreille School District
- Newport Hospital
- Northwest Hospital Alliance
- Panhandle Alliance for Education
- Panhandle Animal Shelter – partnership with Behavioral Health Clinic
- Sandpoint Community Resource Center
- Underground Kindness

Next Steps

The Community Health Needs Assessment report was approved by the Board of Directors at their meeting on December 20, 2019.

Bonner General Health 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 Bonner General Health, 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.

Community members who would like to provide comments on the needs identified or provide input on the next CHNA process are encouraged to contact Bonner General Health with their inquiries, suggestions, or comments. Erin Binnall, Community Development Manager. 208.265.3390. erin.binnall@bonnergeneral.org

References:

Census Bureau (2019). Quick Facts. Retrieved from
<https://www.census.gov/quickfacts/fact/table/bonnercountyidaho,US/PST045219>

County Health Rankings – University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation Rankings. (n.d.). Retrieved October 2019, from
<http://www.countyhealthrankings.org/app/idaho/2018/rankings/>

Idaho Health Behaviors, 2016. Results from the Behavioral Risk Factor Surveillance System. Bureau of Vital Records and Health Statistics, Division of Public Health, Idaho Department of Health and Welfare. 2016. Retrieved from
<https://healthandwelfare.idaho.gov/Health/VitalRecordsandHealthStatistics/HealthStatistics/BehavioralRiskFactorSurveillanceSystem/tabid/913/Default.aspx>

Community Health Assessment, 2018. Panhandle Health District Healthy People in Healthy Communities. Retrieved from
<http://panhandlehealthdistrict.org/healthdata/>

