

Spooner Health Spooner, Wisconsin

Community Health Needs Assessment and Key Informant Interview Findings

January 2019



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RESOURCE CENTER

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INTRODUCTION

Spooner Health, located in Spooner, Wisconsin, is a 20-bed critical access hospital (CAH) with a wide range of services from emergency and inpatient care to outpatient therapy, surgery and diagnostic imaging. Spooner Health participated in Community Health Needs Assessment (CHNA) services administered by the National Rural Health Resource Center (The Center) of Duluth, Minnesota.

In the summer of 2018, The Center conferred with leaders from Spooner Health to discuss the objectives of a regional CHNA. A mailed survey instrument was developed to assess the health care needs and preferences in the service area. The survey instrument was designed to be easily completed by respondents. Responses were electronically scanned to maximize accuracy. The survey was designed to assemble information from residents regarding:

- Demographics of respondents
- Utilization and perception of local health services
- Perception of community health

The survey was based on a design that has been used extensively in the states of Minnesota, Montana, Wyoming, Washington, Utah, Alaska and Idaho.

Sampling

Spooner Health provided The Center with a list of inpatient hospital admissions. Zip codes with the greatest number of admissions were stratified in the initial sample selection. Each area would be represented in the sampling proportionately to both the overall served population and the number of past admissions. Eight hundred residents were selected randomly from PrimeNet Data Source, a marketing organization. Although the survey samples were proportionately selected, actual surveys returned from each population area varied. This may result in slightly less proportional results.

Survey Implementation

In August 2018, the CHNA, a cover letter on Spooner Health's letterhead, and a postage paid reply envelope were mailed first-class to 800 randomly selected residents in the targeted region (six zip codes). A press release was sent to local newspapers prior to the survey distribution announcing that Spooner Health would conduct a CHNA throughout the region, in cooperation with The Center.

One-hundred-fifty-five of the mailed surveys were returned, providing a 19.4% response rate. Based on the sample size, surveyors are 95% confident that the

responses are representative of the service area population, with a margin of error of 7.07. Note that zero of the original 800 surveys sent were returned by the U.S. Postal Service as undeliverable. Based on the experience of The Center, zero undeliverable mailings is irregular. The response rate may be underestimated if some of the survey mailings were in fact undeliverable. In 2015, 21 of the 800 mailed surveys were returned by the U.S. Postal Service as undeliverable.

Recommendations are included for developing and implementing program plans to address key health issues identified by the community. A copy of the survey instrument is included at the end of the report ([Appendix A](#)).

Report Findings May be Used For:

- Developing and implementing plans to address key issues as required by the Patient Protection and Affordable Care Act §9007 for 501(c)3 charitable hospitals
- Promoting collaboration and partnerships within the community or region
- Supporting community-based strategic planning
- Writing grants to support the community’s engagement with local health care services
- Educating groups about emerging issues and community priorities
- Supporting community advocacy or policy development

SURVEY FINDINGS

The Center also administered Spooner Health’s CHNA 2015 mailed survey and compiled the survey findings. This allows us to show comparative data for questions that were asked both years, when answer options were similar. In 2015, 225 of the mailed surveys were completed and 83 people responded to the online survey, providing an overall response rate of 41%. In 2018, 155 surveys were returned for a 19% response rate. Where possible, comparative data between the two years of the survey are displayed.

In the following tables and graphs, the question asked on the mailed survey is emboldened and the question number from the mailed survey is appropriately labeled as “Q4”.

A series of key informant interviews were also conducted to add more information to the CHNA findings. Methodology and findings of the key informant interviews are discussed later in the report and in [Appendix C](#).

Survey Demographics

The majority of survey respondents are women, aged 56-75 who reside in Spooner. (N=155) In 2015, the majority of the survey respondents were women, aged 46-75 who reside in Spooner.

| Community | n= | 2018 | 2015 Place of Residence |
|----------------|-----------|------------|-------------------------|
| Spooner | 79 | 51% | 45% |
| Trego | 18 | 12% | 12% |
| Shell Lake | 14 | 9% | 15% |
| Webster | 12 | 8% | N/A |
| Danbury | 7 | 5% | N/A |
| Hayward | 6 | 4% | N/A |
| Sarona | 6 | 4% | 5% |
| Minong | 5 | 3% | 6% |
| Stone Lake | 4 | 3% | N/A |
| Springbrook | 3 | 2% | 11% |
| Other | 1 | 1% | N/A |
| Siren | 0 | 0% | N/A |

97% of 2018 survey respondents answered, "Yes, I live at the address where this survey was mailed at least 6 months out of the year".

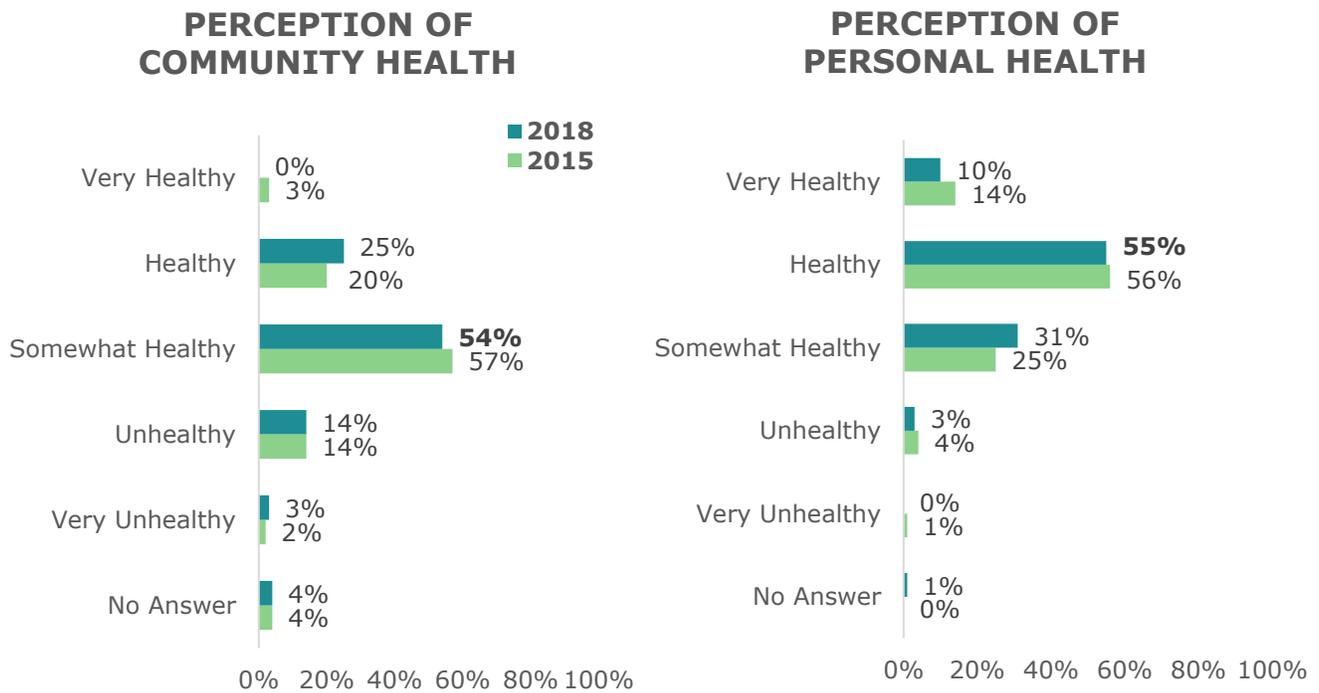
| Gender | n= | 2018 | 2015 |
|---------------|-----------|------------|------------|
| Female | 91 | 59% | 70% |
| Male | 58 | 37% | 30% |
| No answer | 6 | 4% | N/A |
| Other | 0 | 0% | N/A |

| Age | n= | 2018 | 2015 |
|--------------|-----------|------------|------|
| 18-25 | 0 | 0% | 1% |
| 26-35 | 5 | 3% | 6% |
| 36-45 | 10 | 6% | 8% |
| 46-55 | 19 | 12% | 13% |
| 56-65 | 37 | 24% | 29% |
| 66-75 | 43 | 28% | 24% |
| 76-85 | 26 | 17% | 13% |
| 86+ | 12 | 8% | 5% |
| No answer | 3 | 2% | N/A |



Perception of Community and Personal Health

Q2 and Q9: How would you rate the health of your community / your personal health? In 2018, 54% of respondents felt like their community was somewhat healthy, similar to the 2015 results. Likewise, 55% of 2018 survey respondents felt like they were personally healthy. (N=155)



Key informants described the overall health of the community as average, with a population that is aging and has a mix of low and high income.

Community Health Concerns

Q3: What do you think are the three most serious health concerns in our community? In 2018, drug abuse/overdose was the top community health concern, almost double the percent of respondents since 2015. Chronic disease was the second highest rated health concern, followed by health care, which rose 13%. Respondents were asked to select three that apply, so totals do not equal 100%. (N=155)

| Top Health Concerns | n= | 2018 |
|--|-----------|------------|
| Drug abuse/overdose | 92 | 59% |
| Chronic diseases (arthritis, heart disease, cancer, Alzheimer's, diabetes etc.) | 75 | 48% |
| Cost of healthcare | 69 | 45% |
| Alcohol abuse | 55 | 35% |
| Obesity (lack of nutrition/exercise) | 45 | 29% |
| Infectious diseases (flu, ticks, food borne) | 25 | 16% |
| Tobacco/cigarette use | 24 | 15% |
| Lack of access to mental healthcare | 24 | 15% |
| Prescription drug abuse | 22 | 14% |
| Lack of access to specialty healthcare | 20 | 13% |
| Lack of knowledge/stigma of mental illness | 11 | 7% |
| Falls | 11 | 7% |
| Lack of access to dental care | 5 | 3% |
| Other | 4 | 3% |
| Unintended pregnancy | 3 | 2% |
| Elder abuse | 1 | 1% |

In 2015, there were 30 different answer options for this question. The top concerns were:

- Chronic disease (41%)
- Obesity (37%)
- Alcohol abuse (33%)
- Cost of healthcare (32%)
- Drug abuse/overdose (30%)
- Poverty (28%)

Key informants felt the greatest health needs included access and transportation; behavioral health services; lifestyle and preventative health services; and

OB/Gyn/maternal care. They noted limited transportation services available in the area, and that those that are available are primarily for the elderly population. A need for mental health, alcohol and drug related services was mentioned multiple times. Mental/behavioral health services should relate to the population in the area that is aging, with lower socioeconomic status, uneducated, unemployed and could include diverse ethnic groups including a local Native American population. It was noted that having a full scope of services available locally to meet behavioral health needs would be advantageous. Several key informants noted concern that maternal care could not be provided at Spooner Health and that babies were not delivered locally.

Improve Community Health

Q4: What would be the three best ways to improve people’s health in our community? The most frequently selected criteria for a healthy community was “Access to health insurance” followed closely by “awareness of local services” and “affordable healthy food”. These responses were similar in 2015, however access to health insurance increased by 19%. Respondents were asked to select three that apply, so totals do not equal 100%. (n=150)

| Ways to Improve Community Health | n= | 2018 | 2015 |
|---|-----------|-------------|-------------|
| Access to health insurance | 79 | 53% | 34% |
| Awareness of local services | 70 | 47% | 46% |
| Affordable healthy food | 48 | 32% | 38% |
| Access to mental health providers | 40 | 27% | 29% |
| Changes to public policy/laws | 36 | 24% | 20% |
| Community education | 36 | 24% | 29% |
| Transportation services | 36 | 24% | 21% |
| School health programs | 29 | 19% | 18% |
| Access to dental insurance | 24 | 16% | 22% |
| Worksite health programs | 16 | 11% | 14% |
| Other | 12 | 8% | 17% |
| Timely dental care | 11 | 7% | 10% |

Key informants described ways the hospital can improve the health of the community related to maternity care, drug and alcohol use, healthy lifestyle choices, prevention and early intervention, and transportation. They suggested opportunities for collaboration, further described in the Key Informant Interviews

section of this report. Key informants did note that Spooner Health collaborates well with different community stakeholders.

Delayed Health Care Services

Q5: In the past three years, was there a time when you or a member of your household thought you needed health care services but did NOT get or delayed getting medical services? 22% said "Yes, in the past three years, I (household) did NOT get or delayed getting medical services". (N=155) In 2015, 33% did not or delayed getting medical services.

Reasons to Not Receive Health Care Services

Q6: If yes, select the three most important reasons why you did not receive health care services. The top reasons respondents delayed health care services was "too long to wait for an appointment", nearly 20% more than in 2015. Not having insurance decreased by 11%. (n=37)

| Reason to Delay | n= | 2018 | 2015 |
|--|-----------|------------|------------|
| Too long to wait for an appointment | 19 | 51% | 32% |
| It costs too much | 18 | 49% | 61% |
| My insurance didn't cover it | 9 | 24% | 39% |
| Other | 9 | 24% | 12% |
| Could not get an appointment | 8 | 22% | 18% |
| It was too far to go | 7 | 19% | 13% |
| Not treated with respect | 4 | 11% | 10% |
| Too nervous or afraid | 4 | 11% | 7% |
| Don't like doctors | 3 | 8% | 10% |
| Office wasn't open when I could go | 3 | 8% | 13% |
| No insurance | 3 | 8% | 19% |
| Transportation problems | 3 | 8% | 8% |
| Unsure if services were available | 2 | 5% | 10% |
| Didn't know where to go | 2 | 5% | 5% |
| Could not get off work | 1 | 3% | 5% |
| Had no one to care for the children | 0 | 0% | 1% |
| Language barrier | 0 | 0% | N/A |

Key informants described barriers to health services at Spooner Health, which included transportation, appointment availability, recruitment and retention of providers and lack of OB services available locally. They also noted a barrier is patients having adequate health insurance coverage.

Additional Health Services Needed

Q7: In your opinion, what would improve our community’s access to healthcare services? More primary care providers and specialists are the top ideas to improve access to health care. Notably among “other” responses, affordability received five responses (3%). Respondents were asked to check all that apply, so totals do not equal 100%. (n=151)

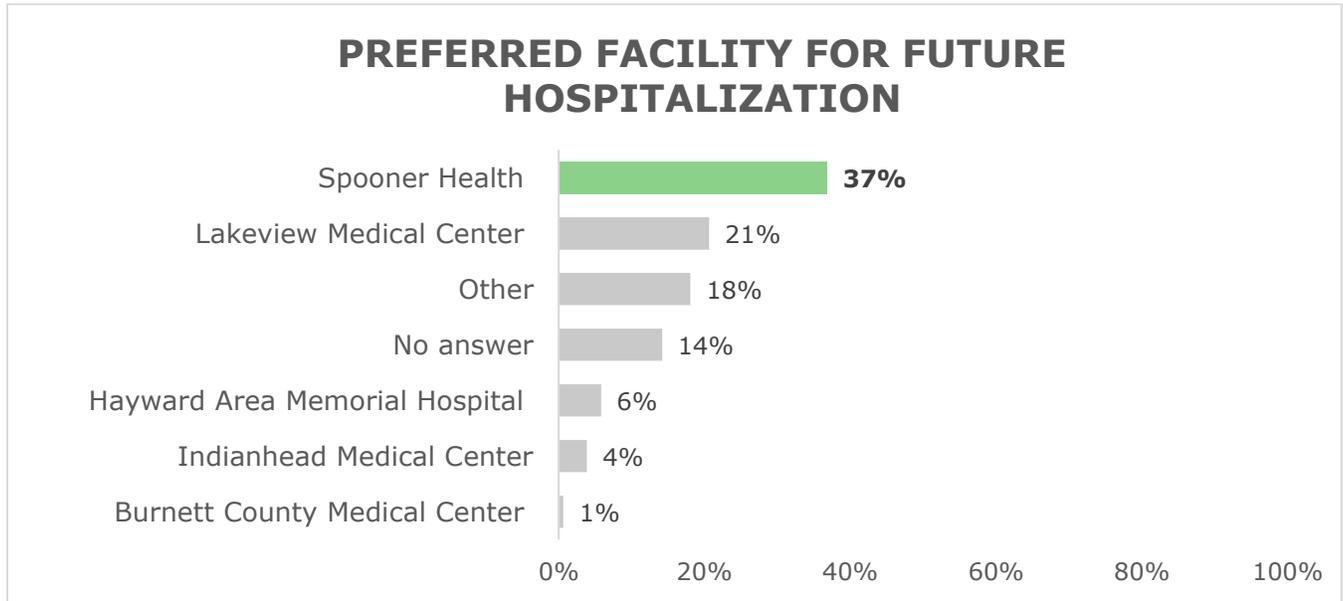
| Ideas to Improve Access | n= | 2018 | 2015 |
|------------------------------------|-----------|------------|------------|
| More primary care providers | 76 | 50% | 52% |
| More specialists | 65 | 43% | 38% |
| Urgent Care | 65 | 43% | 57% |
| Outpatient services expanded hours | 49 | 32% | 44% |
| Improved quality of care | 46 | 30% | 27% |
| Transportation assistance | 43 | 28% | 29% |
| Greater health education services | 36 | 24% | 30% |
| Telemedicine | 25 | 17% | 8% |
| Other | 18 | 12% | 13% |
| Cultural sensitivity | 3 | 2% | 3% |
| Interpreter services | 2 | 1% | 1% |

OB/maternity care, including delivery, and mental and behavioral health, including alcohol/ drug treatment for children, are services key informants would like to see added locally. They also suggested the addition of surgical services, urgent care and oral health.

The above services suggested by key informants are also reasons why they felt local residents might leave the community to seek services elsewhere. In addition, key informants also thought that insurance coverage, the desire to seek care within a larger health system and the mentality that bigger facilities provide better care may be reasons to leave the community for health care services.

Future Hospital Utilization

Q8: If you or a household member needed to be hospitalized in the future, which facility would you chose? “Spoooner Health” was the most frequently cited hospital for future hospitalization. This question was not asked in 2015. (N=155)



| Facility | n= |
|--------------------------------|---|
| Spoooner Health | 57 |
| Lakeview Medical Center | 32 |
| Hayward Area Memorial Hospital | 9 |
| Indianhead Medical Center | 6 |
| Burnett County Medical Center | 1 |
| Other | 28 Most common response included Mayo facilities (11) and Essentia Health Duluth (7) |



Key informants recognize the convenience that having local care provides. They noted it does aid with a top concern about transportation. They also noted that Spooner Health has providers that know their patients and provide personal care, which was viewed as an asset. The community relationships established by Spooner Health were acknowledged by the key informants, and they felt it aided to the local sense of community. The strengths of Spooner Health described by the key informants included quality of care, availability, local specialty and outpatient services, the investment in the new facility, and its staff. Key informants described the staff of Spooner Health as caring, trusted, knowledgeable, personable and customer service oriented.

KEY INFORMANT INTERVIEWS

Key Informant Methodology

The Center was contracted by Spooner Health to conduct key informant phone interviews to provide qualitative data on the strengths and needs of local health care services. Thirteen individuals were identified by the hospital to participate in key informant interviews in November 2018. Participants were identified as people living in Spooner and the surrounding area. Invitations were emailed with the key informant questions attached ([Appendix C](#)). The key informants were identified based on the various consumer groups of local health services including senior citizens, young parents, health care providers and community leaders. Nine people participated in total; six men and three women. Each session was approximately 15 minutes in length and included the same questions. The questions and discussions were led by Kim Nordin of The Center.

Limitations

There are two major limitations that should be considered when reviewing these results:

- The information is based on comments from a small segment of the community
- Participants are chosen as key informants by Spooner Health, which introduces selection bias.

Summary of Major Points

Overall Health

Key informants described the population as aging, with a mix of low and high income that is of average health. Three health issues were identified when discussing the overall health: drug, alcohol and tobacco abuse; mental health; and obesity and chronic illness.

Greatest health need in the community

The greatest health needs included access and transportation; behavioral health services; lifestyle and preventative health services; and OB/Gyn/maternal care.

- Access and transportation

There are limited transportation services available in the area, primarily for the elderly population. Referrals to larger systems or out of area can be challenging due to access and transportation. Access to healthy foods and quality housing was also mentioned.

- Behavioral health services
A need for mental health, alcohol and drug related services was mentioned multiple times. Mental/behavioral health services should relate to the population in the area that is aging, with lower socioeconomic status, uneducated, unemployed and could include diverse ethnic groups including a local Native American population. It was noted that having a full scope of services available locally to meet behavioral health needs would be advantageous.
- Lifestyles and preventative health services
Comments in this category varied from overall education on wellness, to a focus on child care (including neglect, nutrition, parenting) and prevention and management of chronic diseases.
- OB/Gyn/maternal care
Comments noted that babies are not delivered at Spooner Health and that maternity care is not provided at the facility.

Ways the hospital can increase the health of the community, including opportunities to collaborate

Topic areas to support to increase wellness include maternity care, drug and alcohol use, healthy lifestyle choices, prevention and early intervention, and transportation.

Key informants felt Spooner Health collaborates well with different community stakeholders. Opportunities for collaboration included collaborating with realtors who can showcase the hospital's services to new residents. Collaboration with faith community could be leveraged to increase voluntarism and also collaborate with social services to address behavioral health issues, including drug abuse. Collaborating with organizations that support parents of children using drugs could be beneficial to the community. It was also suggested the hospital expand its outreach by use of social media and becoming more actively involved in the community events they sponsor.

Strengths of health services offered at Spooner Health

- Staff – caring, trusted, knowledgeable, personable, customer service oriented
- Good quality services
- Availability
- Local specialty and outpatient services
- Investment in the new facility

Barriers to health services available at Spooner Health

- Access to adequate health insurance coverage
- Transportation
- Appointment availability with doctors
- Recruitment and retention of providers
- No OB services
- Collaboration and patient information sharing between departments, i.e., ER, clinic, hospital

New health care services to add locally

- OB/maternity care including delivery
- Mental and behavioral health, including alcohol/ drug treatment for children
- Surgical services
- Urgent care
- Oral health
- A few key informants were satisfied with services available locally

Why people leave the community for health care

- OB/maternity care
- Mentality that bigger facilities provide better care
- Services not available locally
- Urgent or convenient care not provided in Spooner
- Insurance coverage
- Preference to be part of a larger system

Benefits of heaving health services available locally

- Convenience and transportation, not having to travel
- Providers know you, provide personal care
- Community relationships established by Spooner Health
- Local sense of community

CONCLUSIONS, RECOMMENDATIONS, AND ACKNOWLEDGEMENTS

Conclusions

The community survey respondents and key informants were very supportive of the services provided by Spooner Health and the positive impact the facility has on the surrounding community. Most respondents reported their health as “somewhat healthy”, which is similar to comments from key informant interviews who either felt the community was rather healthy, or in need of improvement. Comments from key informants noted demographic and social factors that may contribute to health status, such as age, poverty and access to transportation.

Top community health concerns included drug abuse/overdose, chronic diseases and the cost of health care. Key informants felt the top health concerns were access and transportation, behavioral health services, lifestyle and preventative health services, and OB/Gyn/maternal care.

We asked key informants what Spooner Health could do to increase the health of the community and to identify opportunities to collaborate. It was noted that Spooner Health collaborates well in the community, but opportunities may exist related to the faith community, support for parents of children using drugs, and with local realtors who orient new community members to the area.

Spooner Health is the location of choice for future hospitalization. Key informants described the benefits of having care locally, especially since transportation is a concern.

Areas of need to improve the health of the community or barriers to health services offered at Spooner Health Hospital focused on access to primary care and specialty care services, urgent care, mental health services, transportation, OB/maternal care, and access to adequate health insurance coverage. Survey respondents also requested more available information on the services offered at the hospital and expanded outpatient office hours.

We asked key informants what some of the strengths of the health services offered at Spooner Health. Strengths noted included the quality of care, availability, access to local specialty and outpatient services, and investment in the new facility. The key informants seem very happy with the staff and providers and recognize the community benefit of Spooner Health.

Recommendations

Noting the changes in health care reimbursement structures, hospitals will begin to be reimbursed based on the population's health outcomes. This transformation is changing the definition of hospital volume from the number of procedures and interventions to the number of patients being seen in the service area. Capture a greater market share by expanding efforts towards individuals that are currently healthy and not currently utilizing local health services by engaging the community in prevention/wellness activities and health education. Providers and the hospital Board should also be educated on this transition as it is imperative for future sustainability and viability of Spooner Health.

It is recommended the hospital increase efforts on role modeling prevention and wellness and expand collaborative community partnerships to improve the overall coordination of care for patients. It is suggested that the hospital take an active role in the community events it sponsors.

Alcohol and drug abuse, mental/behavioral health, transportation, OB/maternal care, and cost of care were top issues noted from the findings. Consider opportunities to partner locally and regionally to address needs. A culturally competent health care system can help improve health outcomes and quality of care and can contribute to the elimination of racial and ethnic health disparities. As such, Spooner Health should ensure its services are provided to reduce the impact of social determinants of health on adverse health outcomes.

Continuing to support the positive staff culture is an excellent marketing strategy for the facility. Happy, engaged employees produce happy patients. Consider communicating the availability of services in various methods to promote the breadth and quality of care provided at Spooner Health. Also consider the expansion of outpatient office hours or addition of an urgent care to meet patient need.

Moreover, share results and communicate proposed implementation strategies that address community needs as this will promote customer trust and loyalty. It is advised to create a communications strategy for releasing the report findings. It is important to be clear on the intent of these communications (e.g., to share information or to stimulate action).

Acknowledgements

The Center would like to thank Ms. Cara Walters for her contributions and work with developing and distributing the assessment and coordinating the key informant interviews.

APPENDIX A: SURVEY INSTRUMENT

November 5, 2018

Dear Resident:

Spooner Health is partnering with the National Rural Health Resource Center to administer a community health survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to meet present and future healthcare needs.

You are probably aware of many challenges facing rural healthcare, such as access to services and affordability. Unfortunately, many of the factors that threaten healthcare services in other rural areas challenge our local healthcare system as well. However, by completing the enclosed survey, you can help guide Spooner Health in developing comprehensive and affordable healthcare services to our area residents.

Your name has been randomly selected as a resident who lives in the Spooner Health service area. **Your help is critical in determining health priorities and future needs.** The survey covers topics such as: use of healthcare services, awareness of services, community health, health insurance and demographics. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to meet present and future needs, in addition to identifying community health and wellness needs.

Once you complete your survey, simply **return it in the enclosed self-addressed, postage paid envelope postmarked by December 17, 2018.**

We know your time is valuable, so we have made an effort to keep the survey to about 15 minutes.

All survey responses will go to the National Rural Health Resource Center in Duluth, Minnesota, the organization that is assisting with this project. If you have any questions about the survey, please call Tracy Morton at 1-800-997-6685, ext. 227. We believe, with your help, we can continue to improve healthcare services in our region.

Thank you for your assistance. We appreciate your effort.

Sincerely,



Mike Schafer, CEO

Spooner Health

Community Health Needs Assessment Spooner, WI Area

INSTRUCTIONS: Fill in the circle next to the corresponding answer with a #2 pencil or ink pen to complete the survey and return it in the enclosed postage paid envelope. If you need assistance completing the survey, please contact the National Rural Health Resource Center at 1-800-997-6685. **All responses will be kept confidential.**

1. This assessment is intended to support the health needs of the community through care provided at Spooner Health. Spooner Health seeks to provide high-quality healthcare to the area. Do you live at the address where this survey was mailed at least 6 months out of the year?

- Yes No

2. How would you rate the general health of our community?

- Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

3. In the following list, what do you think are the **three** most serious health concerns in our community? (Select 3 that apply)

- | | |
|---|---|
| <input type="radio"/> Alcohol abuse | <input type="radio"/> Infectious diseases (flu, ticks, food borne) |
| <input type="radio"/> Drug abuse/overdose | <input type="radio"/> Chronic diseases (arthritis, heart disease, cancer, alzheimer's, diabetes etc.) |
| <input type="radio"/> Prescription drug abuse | <input type="radio"/> Obesity (lack of nutrition/exercise) |
| <input type="radio"/> Tobacco/cigarette use | <input type="radio"/> Lack of knowledge/stigma of mental illness |
| <input type="radio"/> Elder abuse | <input type="radio"/> Lack of access to dental care |
| <input type="radio"/> Falls | <input type="radio"/> Lack of access to mental healthcare |
| <input type="radio"/> Unintended pregnancy | <input type="radio"/> Lack of access to specialty healthcare |
| <input type="radio"/> Cost of health care | <input type="radio"/> Other _____ |

4. What would be the **three** best ways to improve people's health in our community? (Select 3 that apply)

- | | | |
|---|---|--|
| <input type="radio"/> Access to dental insurance | <input type="radio"/> Awareness of local services | <input type="radio"/> Transportation services |
| <input type="radio"/> Access to health insurance | <input type="radio"/> Changes to public policy/laws | <input type="radio"/> Timely dental care |
| <input type="radio"/> Access to mental health providers | <input type="radio"/> Community education | <input type="radio"/> Worksite health programs |
| <input type="radio"/> Affordable healthy food | <input type="radio"/> School health programs | <input type="radio"/> Other _____ |

5. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?

- Yes (If yes, move to question 6) No (If no, move to question 7)

6. If yes, what were the **three** most important reasons why you did not receive healthcare services?

(Select 3 that apply)

- | | | |
|---|--|--|
| <input type="radio"/> Could not get an appointment | <input type="radio"/> It costs too much | <input type="radio"/> Not treated with respect |
| <input type="radio"/> Don't like doctors | <input type="radio"/> Could not get off work | <input type="radio"/> Too nervous or afraid |
| <input type="radio"/> Too long to wait for an appointment | <input type="radio"/> Didn't know where to go | <input type="radio"/> Transportation problems |
| <input type="radio"/> Office wasn't open when I could go | <input type="radio"/> It was too far to go | <input type="radio"/> Language barrier |
| <input type="radio"/> Unsure if services were available | <input type="radio"/> My insurance didn't cover it | <input type="radio"/> Other_____ |
| <input type="radio"/> Had no one to care for the children | <input type="radio"/> No insurance | |

7. In your opinion, what would improve our community's access to healthcare services? (Select all that apply)

- | | | |
|---|--|--|
| <input type="radio"/> Greater health education services | <input type="radio"/> More specialists | <input type="radio"/> Cultural sensitivity |
| <input type="radio"/> Improved quality of care | <input type="radio"/> Transportation assistance | <input type="radio"/> Urgent Care |
| <input type="radio"/> Interpreter services | <input type="radio"/> Telemedicine | <input type="radio"/> Other_____ |
| <input type="radio"/> More primary care providers | <input type="radio"/> Outpatient services expanded hours | |

8. If you or a household member needed to be hospitalized in the future, which facility would you chose?

- | | |
|---|--|
| <input type="radio"/> Spooner Health | <input type="radio"/> Hayward Area Memorial Hospital |
| <input type="radio"/> Lakeview Medical Center | <input type="radio"/> Burnett County Medical Center |
| <input type="radio"/> Indianhead Medical Center | <input type="radio"/> Other_____ |

9. Overall, how would you rate your personal health?

- Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

10. Where do you currently live by zip code?

- | | | | |
|--|-------------------------------------|---|--|
| <input type="radio"/> 54801 Spooner | <input type="radio"/> 54830 Danbury | <input type="radio"/> 54875 Springbrook | <input type="radio"/> 54876 Stone Lake |
| <input type="radio"/> 54893 Webster | <input type="radio"/> 54888 Trego | <input type="radio"/> 54872 Siren | <input type="radio"/> 54843 Hayward |
| <input type="radio"/> 54871 Shell Lake | <input type="radio"/> 54859 Minong | <input type="radio"/> 54870 Sarona | <input type="radio"/> Other_____ |

11. What is your gender? Male Female Other_____

12. What is your age range?

- 18-25 26-35 36-45 46-55 56-65 66-75 76-85 86+

Please return in the postage paid envelope enclosed with this survey or mail to:
National Rural Health Resource Center, 525 South Lake Avenue Duluth MN 55802

THANK YOU VERY MUCH FOR YOUR TIME

Please note that all information will remain confidential

APPENDIX B: CHNA “OTHER” SURVEY COMMENTS

The following outlines comments written in the field selection of “other” in the survey. A number in parenthesis e.g. (3) indicates the frequency of that response.

3. In the following list, what do you think are the **three** most serious health concerns in our community?

- Aging
- All of the above
- No urgent care
- Lack of a positive future
- Lack of natural, herbal medicine
- Chronic drug abuse in Shell Lake, WI
- The time it takes in the Emergency Room
- Good primary care doctor for elderly females (female doctor)
- All of them, person in one of these categories also need to buy in and follow processes, procedures. Not a quick fix.

4. What would be the **three** best ways to improve people’s health in our community?

- Affordability (4)
- Access to health insurance
- Low income, despair
- Urgent Care
- Proper Medication
- Parents teaching kids
- Salvation through Jesus
- Community fitness center
- Parents need to tell their children no from time to time regarding unhealthy food choices
- All very important, work in progress
- Promotion of faith-based drug treatment (Teen Challenge for instance). More time for doctor to study background of patient and to know the client’s history

5. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delated getting medical services?

- We did need support services. We were given a list, but found we were not eligible for most.
- Parent educational classes in improving children's health

6. If yes, what were the **three** most important reasons why you did not receive healthcare services?

- No coverage. Badger Care... Very limited. No inpatient care for my son, etc.
- Insurance
- Lack of time, other priorities. Waited to ask when went for kids scheduled appointments, question was for skin irritation, question for myself.
- Trust issues
- Doctor's lack of knowledge of helping people wean off pharmaceutical drugs
- Already owe on my hospital bill. Didn't want to add onto it.
- Given the run around in the past – no answer and new appointment for each new test
- Waited for house in emergency room (ER) for treatment in Hayward
- No urgent care, ER too expensive
- Limited doctor selection
- Could not get an appointment option fast enough
- No specialty care locally
- Emergency is not adequate
- Dental insurance

7. In your opinion, what would improve our community's access to healthcare services?

- Affordability (5)
- OB (2)
- Care for patient more than money
- Home Care
- Parks for seniors
- Free exercise programs
- Mental health doctors
- Extended clinic hours
- Trauma informed team
- Police need to be educated fully

- Better coverage with Badger Care
- Lack of understanding and follow-up
- Dialysis
- Stop the run around to see one doctor to refer to a specialist or have x-ray before CT-scan

8. If you or a household member needed to be hospitalized in the future, which facility would you choose?

- Mayo (11)
 - Eau Claire (6)
 - Rochester (3)
 - Barron Medical Center (3)
 - Luther Hospital
- Duluth (8)
 - St. Mary's/Essentia (7)
 - St. Luke's
- St. Croix (5)
- Don't know (4)
- Marshfield R. L. (3)
- Rice Lake (3)
- Minneapolis (2)
- St. Mary's Sacred Heart (2)
- Regions in St. Paul, MN
- Cumberland
- Bigger city
- Park Nicollet
- VA Medical Hospital Transportation Minneapolis, MN
- If serious, Abbot NW Minneapolis
- Lakeview has great people working there
- Where insurance covers

APPENDIX C: KEY INFORMANT INTERVIEW INVITATION AND QUESTIONS



NATIONAL
RURAL HEALTH
RESOURCE CENTER

[insert name],

As a patient of Spooner Health,

We invite you to **participate in a focus group** conducted by the National Rural Health Resource Center on behalf of Spooner Health. Key Informant Interviews are an excellent way for community members to share their opinions in an honest yet confidential environment. The goal of this focus group is to assist Spooner Health in identifying strengths and needs of health services for the region.

Whether you or a family member are involved with local health care services or not, **this is your chance to help guide high quality local health services in the future.**

We invite you to participate in the focus group scheduled for **Tuesday, October 16, 2018** from **5:30 – 6:30am** at **Spooner Health Hospital, 1906 Blake Avenue, in Spooner.** Your identity is not part of the focus group report and your individual responses will be kept confidential. Refreshments will be provided by Spooner Health.

Please confirm your attendance by contacting Keely at the National Rural Health Resource Center by phone (1-800-997-6685) or e-mail (klonetto@ruralcenter.org).

We look forward to your participation. Thank you.

Sincerely,

Tracy Morton, Director of Population Health

National Rural Health Resource Center

Key Informant Questions

The questions below are the types of questions that will be asked during this focus group. The purpose of this focus group is to identify the strengths and needs of health services in the Spooner Health service area. No identifiable information will be disclosed in the report and the results will assist the medical center with future care and planning.

1. Describe the overall health of this community.
2. What is the greatest health need in the community?
3. What do you think Spooner Health could do to increase the health of the community? Where are the opportunities to collaborate?
4. In your opinion, what are some of the strengths (availability, quality) of the health services offered at Spooner Health?
5. In your opinion, what are some of the barriers of the health services available at Spooner Health?
6. What new health care services would you like to see available locally?
7. Why might people leave the community for health care?
8. What are some of the benefits of having health services available locally?